

THE INDIAN HEALTH SERVICE

Innovations in Clinical Care Using RPMS



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Superior Health Information Management
Now and for the Future

**VistA Community Leadership Meeting
November 7, 2006**

Objectives

- Contrast IHS-VHA, RPMS-VistA
- Describe several examples of clinical and public health development in RPMS beyond VistA-derived capabilities

Indian Health Service

- Provides comprehensive care to over 1.8 million American Indians / Alaska Natives
- Nearly 600 health care facilities

	Federal	Tribal
Hospitals	36	13
Health Centers	61	158
Health Stations	49	76
Residential treatment centers	5	28
Alaska village clinics		170
Urban programs		

Indian Health Service

- Over 50% of programs are operated by tribes through tribally run compacted or contracted facilities
- 34 urban programs are contracted to provide care to AI/AN populations in metropolitan areas
- Remaining care is provided through federally operated 'direct' programs (majority of the user population still receives care in direct programs)

IHS is not VHA

- Cradle to grave care
 - Pediatrics
 - Prenatal and obstetrical care
- Smaller facilities, more rurally located
- Decentralized administration
- Tribal autonomy
- Community and population-based mission
- Very modest IT staffing & budget

The EHR Challenge for IHS

- Produce or acquire an Electronic Health Record system that:
 - Meets clinical and business needs of both Tribally and Federally operated facilities
 - Is scalable to the needs of facilities ranging from small rural clinics to medium-sized hospitals
 - Is affordable to facilities with no resource cushion or ability to borrow
 - Is sustainable into the future

RPMS – Elements of an EMR for over 20 Years

Existing elements

- Registration
- Scheduling
- Pharmacy
- Radiology
- Laboratory
- Immunizations
- Reminders (passive)
- Problem List
- Health Summary
- Other PCC functions
- Billing
- More . . .

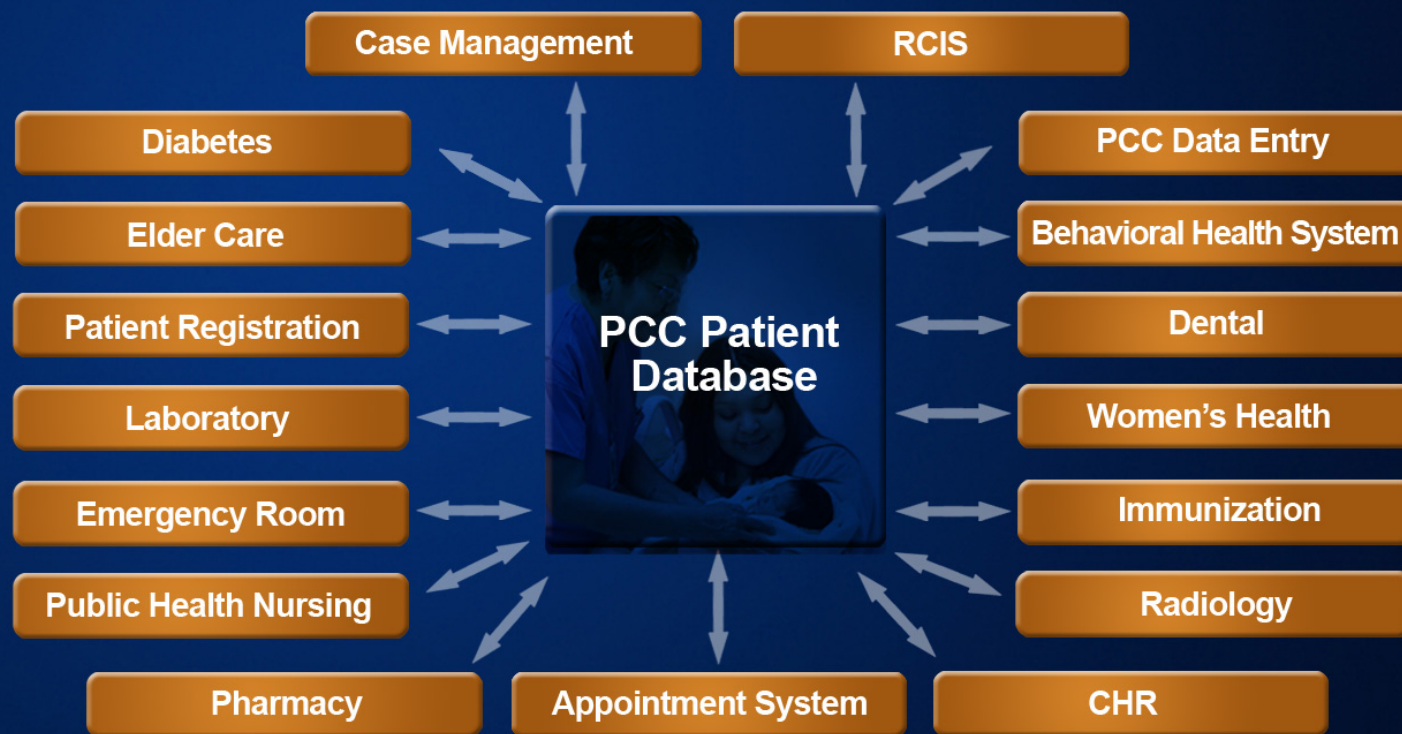
Lacking elements

- Provider order entry
- Note authoring
- Point of care data entry
- GUI usability
- Active reminders & notifications

IHS Philosophy in Health IT

- Leverage work of VHA and others where it is relevant to IHS mission
 - Pharmacy, Laboratory, Radiology, etc.
- Co-develop where possible to meet common needs
 - FileMan, MailMan, current enhancements (Rad, BCMA)
- Develop as needed to address unique IHS/Tribal imperatives
 - PCC, Immunization, Women's Health, Third Party Billing, Pharmacy POS, iCare, CRS

RPMS Integrates Multiple Clinical Systems



VistA and RPMS

- Common programming/database architecture
- Applications shared by VHA and IHS
- Most developed for use in VHA and adapted for IHS
- Some developed for use in IHS and adapted for VHA
- RPMS focused around Visit data contained in Patient Care Component (PCC)
- IHS uses HRN instead of SSN

VistA and RPMS

- VHA-developed apps:
 - Pharmacy
 - Radiology
 - Laboratory
 - Dietary
 - PIMS
 - Reminders
 - Mental Health Assistant
 - Care Management
 - Health e-Vet Vista
 - Etc.
- IHS-developed apps
 - Women's Health
 - Immunization
 - Pharmacy POS
 - 3rd Party Billing
 - Behavioral Health
 - PCC, PCC+
 - Diabetes Management
 - Integrated Case Mgmt
 - CRS
 - Etc.

RPMS Innovations in Care

- PCC-Plus (PCC+)
- Well Child Care
- Immunization Data Exchange
- Prenatal Care
- Behavioral Health System
- RPMS EHR
- Diabetes Management System
- Asthma Register System
- Integrated Case Management System
- Clinical Reporting System

PCC-Plus (PCC+)

- Real-time generation of encounter forms populated with PCC data
- Uses mail merge features of MS Word
- Nearly 3500 merge fields
- Display of demographic-specific tables and code sets (ICD and CPT/HCPCS)
- Pediatric growth charts and guidance
- Prenatal flow sheets (in development)

Well Child Care

- CDC Growth Charts – in PCC+ and EHR GUI
- Infant birthweight & feeding choices
- Ages & Stages Questionnaire (ASQ)
 - Age-specific screening in 5 dimensions
 - Print form, record score in EHR or PCC
 - Guidance for abnormal screens
- Well Child Knowledgebase
 - Thousands of age-specific reminders, education, developmental & medical screening, etc.
 - Nationally deployed set with local management
- Additional screening tools (DDST milestones)

Immunization Data Exchange

- IHS and Tribes share many patients with private sector
 - Shot records often incomplete due to patient mobility
 - Risk for under- and over-immunization
- Data exchange system for pediatric immunizations developed
 - HL-7 data files exported to and imported from State immunization registries
 - Currently active with five states, millions of records exchanged to date

Prenatal Care (in development)

- Data collection and entry for:
 - First Prenatal Visit
 - Interim Prenatal Visits
 - Postpartum Visit
- Over 600 data points
- Flowchart presentation where appropriate
- Data carries over to future pregnancies
- Multiple GUI components planned
- Flowchart infrastructure extensible to other types of data

Reference Lab Interface

- Released for Laboratory v5.2 (IHS patch 1021)
- Uni- or Bi-directional interface with contracted reference laboratories
 - Unidirectional receives lab results into PCC
 - Bidirectional sends orders to reference lab and receives results into lab package (EHR)
- Implementation is fairly labor-intensive

RPMS Behavioral Health System

- MH/SS developed in early 1990's
 - The first complete electronic record in IHS
 - All data could be directly entered by providers
- BHS released 2003
 - Combined MH, SS, and A/SA functionality
 - BH GUI released 2004
 - BHS and BH GUI are in use at ~250 I/T/U sites

Behavioral Health System

- Ability to document:
 - 1:1 patient encounters
 - Group encounters
 - Wellness Activity: Patient Ed, Health Factors and DV, DEP and ETOH screening
 - Treatment Plans and Treatment Plan reviews
 - Case Management Information
 - Incidences of Suicidal Behavior
- Integrated with RPMS medical information
- BH Components for EHR in development

Group Encounter Documentation

CROW HO

Primary Provider

Encounter Date: 1/25/2006

Program: CHEMICAL DEPENDENCY

Arrival Time: 6:00:00 PM

Group Name: Wednesday Evening AA Group

Community of Service:

Clinic: ALCOHOL AND SUBSTANCE

Activity: GROUP TREATMENT

Encounter Location: CROW HO

Activity Time: 60

Type of Contact: OUTPATIENT

Group Data | Patients | Patient Data

Secondary Providers

Name	

Add

Delete

POV (Primary Group Topic)

Code	Description	
27	ALCOHOL DEPENDENCE	

Add

Edit

Delete

S/O/AP (Standard Group Note)

Wednesday AA group.
Guest Speaker George Washington.
Video presentation on Medical Effects of Alcohol.

CPT Codes

Code	Description	
T1007	ALCOHOL&/SUBSTANCE ABUSE SERVICES	

Add

Delete

Save

Close

Suicide Reporting Form

- Agency initiative to reduce suicide
- 2006 GPRA performance indicator
 - Establish baseline data using SRF
- Data collection form for suicide & suicide related events
 - Completions, attempts, serious ideation
- Suicide form available via RPMS menu, Patient Chart, and now EHR
- Data exports via AMH

Demo,Raven Danielle F DOB 10/15/1970 Age 35 HRN 12253 SSN 517-27-4391

Local Case Number: Provider: TEST,DOCTOR ...
 Date of Act: 1/25/2006 Community Where Act Occurred: ...

Relationship Status: MARRIED Education Level: COLLEGE GRADUATE
 Employment Status: FULL-TIME

Self Destructive Act: ATTEMPT Previous Attempts: 1
 Location of Act: HOME OR VICINITY

Lethality: MEDIUM
 Disposition: IN-PATIENT MENTAL HEALTH TREATMENT (VOLUNTARY) ...

Method Substance Use Contributing Factor(s) Narrative

- ☐ Gunshot ☐ Carbon Monoxide
☐ Hanging ☒ Overdose
☐ Motor Vehicle ☐ Unknown
☐ Jumping ☐ Other:
☐ Stabbing/Laceration

Overdosed Using

Substance Name
 ALCOHOL
 ACETAMINOPHEN (E.G. TYLENOL)
 Add Edit Delete Clear

Delete

Print

Close

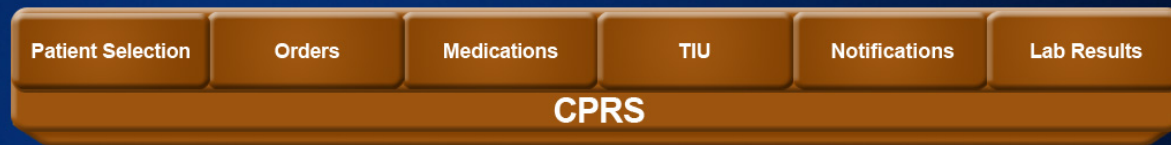
Save

RPMS Electronic Health Record

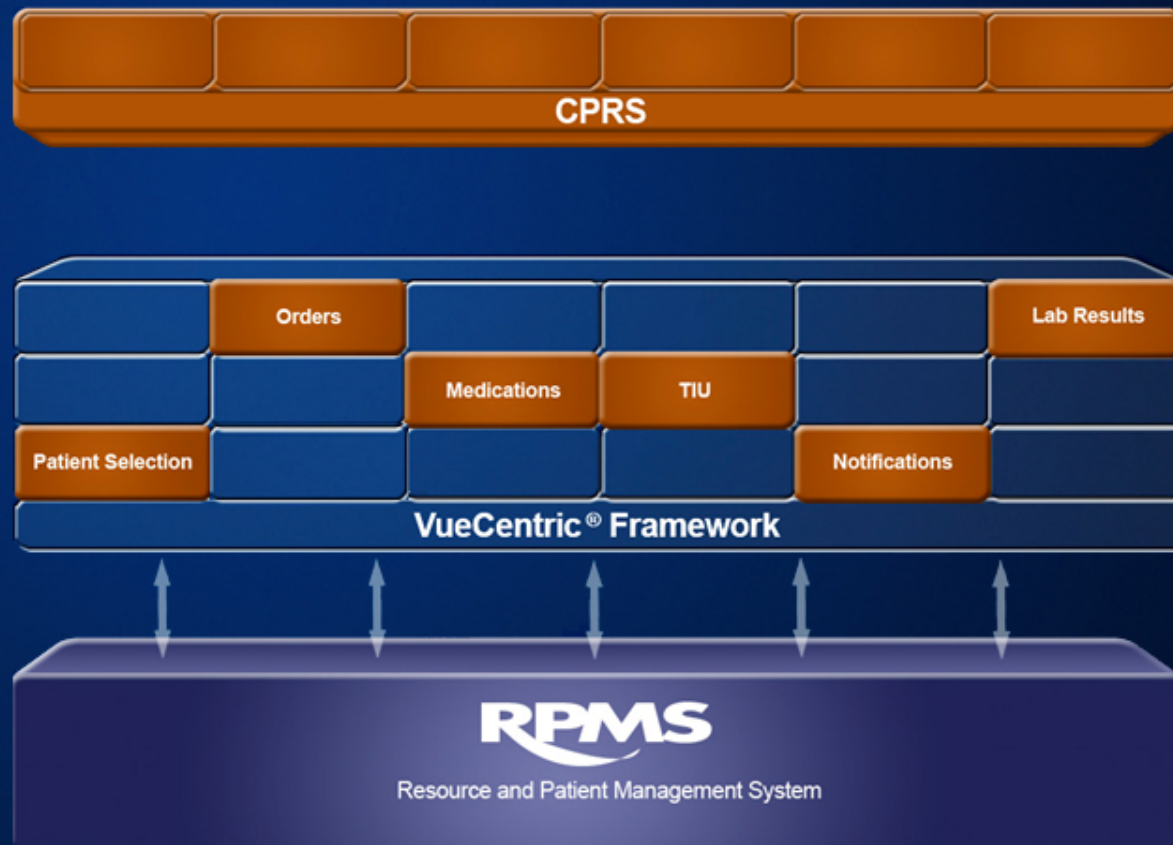
- Graphical User Interface to RPMS
 - User-friendly and intuitive access to RPMS database for clinicians and other staff
 - Componentized to allow incorporation of CPRS functionality as well as new capabilities developed within IHS
 - Proprietary “framework” for presentation of various GUI components
 - Licensed from Medsphere Systems



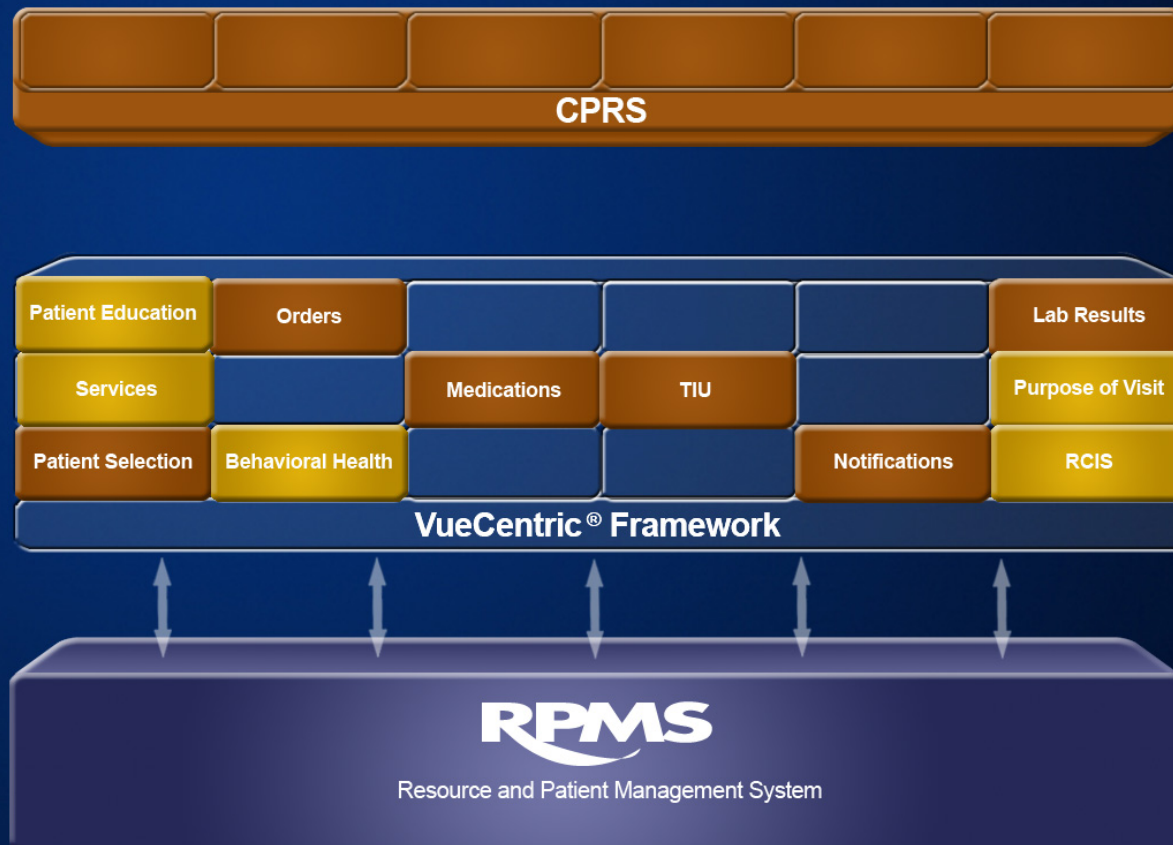
The EHR Componentized Framework



The EHR Componentized Framework



The EHR Componentized Framework



RPMS-EHR USER, DEMO

UserPatientToolsHelp

Patient ChartLocal ResourcesWeb ResourcesBH Options

Demo, Father546505-Mar-1955 (51)M

Visit not selectedUSER, DEMO

Rudd, Miles

Visit SummaryPharm Ed

Postin WA

Privacy CoverNursingPatient ReviewTests and ResultsOrders and DocumentationCodes and ServicesBehavioral HealthMiscellaneous

Notifications and RemindersProblems and Medications

Notifications for All Patients

Legend

Priority

LowMediumHigh

Info Only

	Patient	Notification
	PATIENT, DEMO (999999)	Abnormal labs - [GLUCOSE]
	DEMO, FEMALE A (21334)	Visit is missing a purpose of visit.
	DEMO, FATHER (5465)	Order requires electronic signature.
	DEMO, MOTHER R (3423)	Abnormal labs - [LIPID PROFILE DEMO]
	DEMO, MOTHER R (3423)	Imaging Results: CHEST 2 VIEWS PA&LAT
	DEMO, MOTHER R (3423)	Visit is missing a purpose of visit.
	DEMO, MOTHER R (3423)	Visit is missing a purpose of visit.
	DEMO, MOTHER R (3423)	Visit is missing a purpose of visit.
	DEMO, MOTHER R (3423)	Order requires electronic signature.
	DEMO, BOY (45444)	Visit is missing a purpose of visit.
	DEMO, TODDLER (36665)	Visit is missing a purpose of visit.
	DEMO, TODDLER (36665)	Visit is missing a purpose of visit.
	DEMO, TODDLER (36665)	Visit is missing a purpose of visit.
	TEST, PATIENT G (54554)	Visit is missing a purpose of visit.

Process

AllSelectedInfo OnlyForwardDeleteShow All

Adverse Reactions

Agent	Reaction
PENICILLINS	RASH

Alerts

Crisis Alert	Date
PAIN CONTRACT	23-May-2006 10:23

Reminders

Reminder	Date
Colon Cancer	DUE NOW
Depression Screen	17-Apr-2001 09:00
DM ACE/ARB	DUE NOW
DM Aspirin	DUE NOW
DM Dental Exam	DUE NOW
DM Eye Exam	DUE NOW
DM HgbA1c	DUE NOW

Demo, Father

5465

05-Mar-1955 (51) M

Visit not selected

USER, DEMO

Rudd, Miles

Visit
Summary

Pharm
Ed



Postings

WA

Privacy Cover

Nursing

Patient Review

Tests and Results

Orders and Documentation

Codes and Services

Behavioral Health

Miscellaneous

Problem/POV

Services

Problem List

Past Diagnoses

Past Procedures



Problem List

All Problems

Set as Today's POV

Add

Edit

Delete

ID	Provider Narrative	Status	Modified	Priority	Notes
SOUC3	TYPE 2 DIABETES MELLITUS	Active	03/11/2000		
SOUC1	HYPERTENSION	Active	02/04/2000		
SOUC2	TOBACCO USE	Active	02/04/2000		

Visit Diagnosis



Add

Edit

Delete

Provider Narrative	ICD	ICD Name	Priority	Cause	Injury Date
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Triage Summary

Visit Not Selected

ICD Pick-Lists

Display



Freq. Rank



Code



Description

Cols

4



Administrative
Medicine Pick List
Obgyn Pick List
Optometry
Peds Pick List
Pharmacy Pick List
Test List

- | | | | |
|--|--|--|--|
| ☐ 001: HTN | ☐ 006: HYPOTHYROID | ☐ 011: HEADACHE | ☐ 016: FIBROMYALGIAS |
| ☐ 002: GERD | ☐ 007: CHRONIC PAIN | ☐ 012: LBP | ☐ 017: POAG |
| ☐ 003: DEPRESSION | ☐ 008: COPD | ☐ 013: SEIZURE DISORDER | ☐ 018: RHEUMATOID ARTHRITIS |
| ☐ 004: OA | ☐ 009: DM TYPE 2 UNCNTRLD | ☐ 014: CHF | ☐ 019: ECZEMA CHRONIC |
| ☐ 005: CAD | ☐ 010: INSOMNIA | ☐ 015: METABOLIC SYNDROME | ☐ 020: UTI |

☐ Show All

RPMS Electronic Health Record

- Presently running at 69 facilities
- Positive effects on medication errors, GPRA measures, collections reported
- Variable, usually transient, effects on provider productivity
- EHR v1.1 is in testing

Public Health Activities System

- CPHAD – Computerized Public Health Activities Data System
- Providers & other staff document time spent in community and public health activities
- Better reporting of provider workload
- Increased visibility of public health role
- In test, release expected in November

Case Management in RPMS

Diabetes Management System

- Case Management for diabetic patients
- Automated additions to registry
- Reminders and performance indicators
- Automated periodic diabetes audits
- Reports

Asthma Management System

- Collect data on Asthma severity and triggers
- Case management & registry functions
- Reminders based on severity and medication taxonomies
- Reports

Asthma Documentation in EHR

The image displays two overlapping software windows from an Electronic Health Record (EHR) system, specifically for asthma management.

Add Asthma Record Window:

- Severity:** A dropdown menu.
- Asthma Management Plan:** A dropdown menu.
- Lung Function:** A group box containing three input fields: FEV 1, FEF 25-75, and PEF/Best PF.
- Triggers:** A group box containing three dropdown menus: Env. Tobacco Smoke, Particulate Matter, and Dust Mite.
- Asthma Register:** A section with a status label "Not in Register" and an "Activate" button.
- Buttons:** "OK" and "Cancel" buttons are located on the right side.

Update Asthma Registry Window:

- Last Asthma Visit:** An input field followed by a button with three dots (dropdown).
- Next Appt:** An input field followed by a button with three dots (dropdown).
- Case Manager:** An input field followed by a button with three dots (dropdown).
- Comments:** A large text area for notes.
- Buttons:** "OK" and "Cancel" buttons are located on the right side.

Integrated Case Management (iCare)

- Graphical user interface (GUI) for a fully integrated case management system
- Wrapper for current and future disease-specific register systems (DM, Asthma, HIV/STD, CVD, WH, etc.)
- Integrated decision support and patient management for multiple chronic conditions
- “Tag” individuals who have predefined diagnoses or health factors
- “Flag” care management triggers such as abnormal labs, ER visits, etc.

iCare (cont'd)

- Nationally defined preventive and disease-specific healthcare reminders
- Customizable patient panels – sharable, with ability to assign surrogate managers
- Quick performance views using CRS/GPRA logic for any patient or group of patients
- Information includes household and community perspectives
- iCare v1.0 release planned early CY2007

Name: [REDACTED]
Gender: F 8122 N MACARTHUR BLVE
Age: 69 TAHLEQUAH, OKLAHOMA 74464
DOB: 5/8/1936 **Phone:** 555-555-6162 **Tribe:** CHEROKEE NATION OF OKLAHOMA
DOD: **Alt. phone:** 555-999-5422 **Community:** TAHLEQUAH **Designated PCP:**
SSN: [REDACTED] **HRN:** 101857 **Barriers to Learning:** [REDACTED] **Insurance:**

Patient Record

Alerts

Problem List

Reminders

Health Summary

Patient Summary

Labs

Radiology

Meds

Referrals

Patient GPRA

Providers

Role	Name	Last Visit	Next Visit
DESIGNATED PRIMARY PROVIDER	[REDACTED]	06/14/2004	
WOMENS HEALTH	[REDACTED]		

Recent Visits

Last:

1 month

Date	Clinic	Provider	Diagnosis	POV

Scheduled Appointments

Next:

1 month

Date	Clinic	Provider

Panels

Panel Name	Owner
AD HOC TEST MULTI COMMUNITY-R...	[REDACTED]
MY PATIENTS	[REDACTED]
MY PATIENTS: [REDACTED]	[REDACTED]

RPMS Registers

Title	Status	Status Date	Category	Creator

Sched Appts by Clinic

Total Patients = 78

Patient List

Alerts

GPRA

GPRA Aggregated



GPRA Help

Reporting Period: Jan 01, 2005-Dec 31, 2005

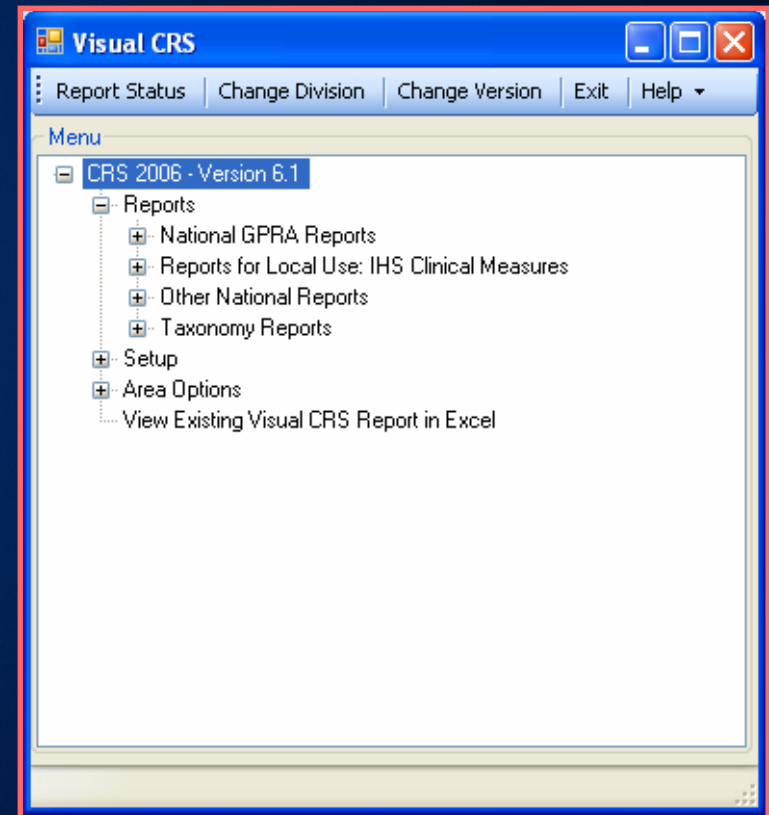


Clinical Group	Measure	# Patients in Denominator	# Patients in Numerator	% Met	IHS Current Performance	2010 GOAL
Access to Dental Servi...	Dental Access General # w/d...	78	0	0%	Maintain	40.0%
	A. # Refusals w/ % of Total...	0	0		Maintain	40.0%
Adult Immunizations: I...	Total # w/Flu vaccine docum...	62	0	0%		
	A. # of Refusals w/ % of Tota...	0	0			
Adult Immunizations: P...	Total # w/Pneumovax docum...	58	40	69.0%		
	A. # Refusals w/ % of Total IZ	40	0	0%		
Cancer Screening: Ma...	# w/Mammogram recorded...	0	0			
	A. # Refusals w/ % of total M...	0	0			
Cardiovascular Diseas...	# w/LDL 101-130	20	2	10.0%		
	# w/LDL 101-130	42	7	16.7%		
Childhood Immunizatio...	# w/ 4 doses DTaP or w/ Dx/...	1	0	0%	N/A	80.0%
	# w/ 3 doses Hib or w/Dx/Co...	1	1	100.0%	N/A	80.0%
	A. # Refusals w % of Total H...	1	0	0%	N/A	80.0%
	B. # w/ Dx/Contraind/NMI Re...	1	0	0%	N/A	80.0%
	# w/ 3 doses Hep B or w/ Dx/...	1	0	0%	N/A	80.0%
	A. # Refusals w/ % of Total...	0	0		N/A	80.0%
	B. # w/ Dx/Contraind/NMI Re...	0	0		N/A	80.0%
	# w/ 1 dose Varicella or w/ D...	1	0	0%	N/A	80.0%
	A. # Refusals w/ % of Total V...	0	0		N/A	80.0%
	B. # w/ Dx/Contraind/NMI Re...	0	0		N/A	80.0%
	# w/ All IZ (4:3:1:3:3:1) or w/...	1	0	0%	N/A	80.0%
	A. # Refusals w/ % of Total...	0	0		N/A	80.0%
	A. Refusals w/ % of Total all...	0	0		N/A	80.0%
	B. # w/ Dx/Contraind/NMI Re...	0	0		N/A	80.0%
	Childhood 19-35 mos # w/ 4...	1	0	0%	N/A	80.0%
	# w/ All 4:3:1:3:3:1 IZ - Only...	1	0	0%	N/A	80.0%
	# w/ 4:3:1:3:3 combo - Only...	1	0	0%	N/A	80.0%
	B. # w/ Dx/Contraind/NMI R...	0	0		N/A	80.0%
	# w/ 3 doses Polio or w/ Dx/...	1	1	100.0%	N/A	80.0%
	A. # Refusals w/ % of Total P...	1	0	0%	N/A	80.0%

Performance Assessment in RPMS

Clinical Reporting System (CRS)

- Tracks GPRA & other clinical measures for local use as well as national reporting
- Performance assessment without manual chart audits
- Available in both GUI and roll-and-scroll versions



CRS 2006 Clinical Measures

- **21 GPRA** treatment and prevention measures
- **23 other key clinical measures**
Examples:
 - Diabetes Comprehensive Care
 - Osteoporosis Screening
 - Comprehensive CVD-Related Assessment
- **21 HEDIS** measures
- **23 Elder Care** measures (patients 55+)
- **17 CMS** (hospital) measures

CRS

- Identical logic ensures *comparable* performance data across all facilities
- Updated annually to reflect changes in the logic descriptions and to add new measures
- Local facilities can choose to transmit data for National GPRA, Elder Care and HEDIS performance reporting to their Area
- Area Offices can produce aggregated Area performance reports

Sample Performance Summary

SK

May 03, 2006

Page 1

*** IHS 2006 National GPRA Clinical Performance Measure Report ***

DEMO HOSPITAL

Report Period: Jul 01, 2005 to Jun 30, 2006

Previous Year Period: Jul 01, 2004 to Jun 30, 2005

Baseline Period: Jul 01, 1999 to Jun 30, 2000

CLINICAL PERFORMANCE SUMMARY

	Site Current	Site Previous	Site Baseline	GPRA06 Goal	Nat'l 2005	2010 Goal
DIABETES						
*Diabetes DX Ever	10.1%	9.6%	8.5%	N/A	11.0%	N/A
*Documented A1c	83.2%	73.2%	84.2%	N/A	78.0%	50.0%
Poor Glycemic Control >9.5	23.9%	14.8%	25.4%	Maintain	15.0%	TBD
Ideal Glycemic Control <7	27.7%	12.8%	23.7%	32.0%	30.0%	40.0%
*BP Assessed	98.1%	91.3%	93.9%	N/A	89.0%	N/A
Controlled BP <130/80	37.4%	32.9%	35.1%	Maintain	37.0%	50.0%
LDL Assessed	39.4%	0.7%	10.5%	56.0%	53.0%	70.0%
Nephropathy Assessed	58.1%	14.1%	0.9%	50.0%	47.0%	70.0%
Retinopathy Exam	57.4%	61.7%	53.5%	@ BASELINE # Maintain	@50.0% #50.0%	70.0% 70.0%
*Depression Assessed	3.9%	4.0%	3.5%	N/A	N/A	N/A
*Influenza Vaccine	76.1%	65.8%	65.8%	N/A	N/A	N/A
*Pneumovax Vaccine Ever	86.5%	84.6%	87.7%	N/A	N/A	N/A
DENTAL						
Dental Access General	16.9%	19.6%	20.1%	Maintain	24.0%	40.0%
Sealants	145	469	420	Maintain	249,882	TBD
Topical Fluoride						
*# Applications	158	157	64	N/A	113,324	N/A
# Patients	120	135	61	Maintain	85,318	TBD
IMMUNIZATIONS						
Influenza 65+	77.4%	67.5%	68.4%	Maintain	59.0%	90.0%

EHR

Clinical Logic Repository

- Currently reminders and performance logic reside in various stovepiped applications
- Logic for similar interventions (e.g. lipid management) may differ depending on disease state – confusing for clinicians
- If guidelines or performance indicators change, reprogramming in multiple packages
- Solution – single logic repository callable from various packages through APIs
- Presently in conceptual phase

Discussion

- RPMS: www.ihs.gov/cio/rpms
- EHR: www.ihs.gov/cio/ehr
- RPMS Clinical: www.ihs.gov/cio/ca
- CRS: www.ihs.gov/cio/crs
- GPRA: http://www.ihs.gov/cio/crs/crs_gpra_reporting.asp