

# Washington Health Information Collaborative

## Announcement of 2008 Funding Opportunity

In 2008, First Choice Health, the Washington State Health Care Authority, Qualis Health and the Puget Sound Health Alliance have once more joined forces to continue the Washington Health Information Collaborative (Collaborative). The Collaborative is offering financial incentives and consulting support to eligible applicants who are adopting and expanding Health Information Technology (Health IT) within their practices.

Funding is available to reduce the costs associated with Health IT adoption for primary care providers and critical access hospitals. Funding will be disbursed to successful applicants in awards of up to \$20,000. Qualis Health will offer to selected grantees advice and technical assistance related to:

- practice redesign to accommodate effective use of Health IT,
- the use Health IT to support implementation of the medical home model of primary care, and
- the use of Health IT to improve performance reporting.

### **Important Dates**

Announcement of Funding Opportunity	June 2 <sup>nd</sup>
Q & A period	June 3 <sup>rd</sup> - July 15 <sup>th</sup>
Applications Due	July 31 <sup>st</sup>
Award announcements	October 1 <sup>st</sup>

### **Definitions:**

*Clinician:* for the purposes of this announcement, a Doctor of Medicine, Doctor of Naturopathy, Doctor of Osteopathy, Physician Assistant, or Advanced Registered Nurse Practitioner.

*CCHIT:* the Certification Commission for Healthcare Information Technology, a voluntary, private-sector initiative acting as an independent certification authority for electronic health records and their networks. (Website: [www.cchit.org](http://www.cchit.org))

*Collaborative:* the Washington Health Information Collaborative.

*Health Information Technology (Health IT):* electronic health information management technology including Electronic Medical Records, Personal Health Records, and electronic information management systems that include functions such as chronic disease registries, decision support tools, electronic data reporting, computerized physician order entry, clinician feedback mechanisms, and electronic prescribing.

# Washington Health Information Collaborative

## **Background**

The Collaborative is a public-private partnership comprised of First Choice Health, the Washington State Health Care Authority, Qualis Health and the Puget Sound Health Alliance.

First Choice Health is a regionally-based hospital and physician owned company that provides health care services to nearly one million members in Washington State and other parts of the Pacific Northwest. The company emphasizes quality health care, public service, and bringing technology to benefit health care practitioners and patients.

The Washington State Health Care Authority is an independent cabinet level agency. It administers health programs that provide access to high-quality health care for more than 500,000 Washington residents including 316,000 state and local government employees and 128,000 enrollees in Basic Health, a state-subsidized program for low-income families.

The Puget Sound Health Alliance is a private, non-profit organization serving five counties of the central Puget Sound region: King, Kitsap, Pierce, Snohomish and Thurston. The Alliance is a collaborative effort of those who provide, pay for, and use health care services, all working together to improve the quality of patient care for a healthier community, at a price more people can afford.

Qualis Health is dedicated to improving the quality of healthcare delivery and health outcomes for individuals and populations across the nation. In operation since 1974, the non-profit, healthcare quality improvement organization (QIO) is headquartered in Seattle, Washington and has offices in Idaho, Nebraska, California, South Carolina, and Alaska.

First Choice Health is dedicating \$500,000 to fund direct grants to clinicians for acquisition or enhancement of Health Information Technology. The Health Care Authority (HCA) is dedicating at least \$300,000 to direct provider grants and an additional \$200,000 for community projects. To read more about community projects, go to [www.wahealthinfocollaborative.org/CommunityGrants.html](http://www.wahealthinfocollaborative.org/CommunityGrants.html). If the entire \$200,000 in community project grants is not disbursed, the HCA will use the remainder to fund direct grants to providers. Although both organizations have separately defined subsets of applicant eligibility criteria, the Collaborative has developed a joint application and a single set of initial evaluation criteria.

Health IT adoption has significant potential to improve outcomes of care by facilitating access to medical information, reducing medical errors through the use of provider and patient decision support tools, providing evidence based practice protocols, and contributing to increased clinical and administrative efficiencies in our health care system. We believe that clinical adoption of Health IT will ultimately not only improve the quality of care, but also lower health care costs and lead to greater availability and use of clinical data in the health care marketplace.

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## Project Description

The Collaborative is providing funding for a variety of potential projects across a continuum of adoption. Awards to eligible applicants will be made to fund partial costs of acquisition and expansion of Health IT systems. Funding will also be provided for community wide connectivity projects and for development of systems that facilitate patient access to their health information.

Specifically, funding will be awarded for projects addressing the following:

- Initial practice or facility Health IT acquisition and implementation support (e.g., technology, infrastructure, consulting, workflow redesign)
- Increased functionality of Health IT already in operation:
  - Purchase and/or implementation of additional modules (including decision support tools, computerized physician order entry, clinician feedback mechanisms, and chronic disease registry functions)
  - Data analysis and reporting capabilities
- Connectivity efforts in a given community (e.g., infrastructure upgrades, primary care/hospital data integration/interfacing, ancillary communications)
- Expanded patient access to their own medical information (personal health record features) and increased patient engagement in their care.

Funding will not be made available at this time for preliminary exploration of system options nor assessment of the viability of Health IT adoption for any given practice or facility. Successful applicants shall demonstrate due diligence in evaluating practice or facility readiness for a project funded by the Collaborative.

## *Goals and Desirable Outcomes*

The Collaborative has identified several main goals and desirable outcomes.

The goals are:

1. Create incentives for practice redesign in medical provider practices and rural hospitals around the availability and enhanced use of medical information to improve health care outcomes and the doctor-patient relationship.
2. Increase efficiencies in the provision of health care services.
3. Demonstrate the value of collaboration with others in the community to tackle community wide problems.
4. Grow collaboration and leverage resources to standardize Health IT functionalities.
5. Grow community support of, and patient involvement in, the implementation of Health IT.

Desirable outcomes include:

1. Enhanced delivery system infrastructure to improve treatment for people with chronic conditions in ambulatory and rural hospital settings.

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2. Increased use of patient or disease registries by primary care providers.
3. Increased use of decision support tools.
4. Increased use of feedback mechanisms by providers to gauge practice performance.
5. Creation of “community champions” to promote practice redesign through the use of Health IT.
6. Creation of a shared knowledge base about Health IT adoption processes and outcomes.
7. Increased awareness of the clinical value of using Health IT.

### *Eligibility*

Grants will be available to primary care and specialty practices, as well as critical access hospitals. Strong preference will be given to small primary care practices. Funding provided by First Choice Health is limited to providers who are part of the First Choice Health network in Washington, Idaho, Alaska and Oregon. Any funding from the Health Care Authority (HCA) is available to practices or hospitals in Washington state only. The HCA will offer preference to applicants participating in the medical home collaborative under Chapter 295 Laws of 2008. The HCA will also offer preference to providers using ASP EMR models, and geographic preference to providers in the following geographic regions

- Spokane
- Tacoma/Seattle
- Yakima/Tri-cities
- Wenatchee
- Whatcom County

### *Application and Award Process*

1. If after reviewing this announcement, you decide to apply, you must submit an **Application** by July 31, 2008. The 2008 Application is available [www.wahealthinfocollaborative.org/2008grants.html](http://www.wahealthinfocollaborative.org/2008grants.html)
2. Applicant questions may be submitted from June 2<sup>nd</sup> to July 15<sup>st</sup> via e-mail to [awardsqna@hca.wa.gov](mailto:awardsqna@hca.wa.gov). To see the cumulative list of **Questions and Answers**, go to [www.wahealthinfocollaborative.org/2008grants.html#QandA2008](http://www.wahealthinfocollaborative.org/2008grants.html#QandA2008)
3. Applicants must submit supporting documentation as required in the application.
4. Announcement of awards will be made on October 1, 2007.

Before submitting your application, we strongly urge you to review the following five documents (linked here:

[www.wahealthinfocollaborative.org/2008grants.html#ApplicationMaterials](http://www.wahealthinfocollaborative.org/2008grants.html#ApplicationMaterials))

- 2008 WHIC Funding Announcement (PDF)
- Planning and Implementation Checklist (PDF)
- Increased Functionality Checklist (PDF)

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- Determining Whether Your Practice is Ready to Adopt Health IT (PDF)
- Questions and Answers (PDF)

*If you have additional questions, please contact us.*

*Application Coordinator*

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