



CT Health IT Advisory Council  
CHA Public Comment  
Submitted by: Karen Buckley, Vice President, Advocacy  
October 20, 2016

Good afternoon. Thank you for the opportunity to provide public comments today. My name is Karen Buckley and I am the Vice President of Advocacy for the Connecticut Hospital Association.

Connecticut hospitals have a long-standing commitment to optimizing care management and coordination. Over the last year, through CHA, Connecticut hospitals have engaged in a cross-continuum patient reference system – an innovative web-enabled application that allows providers and care coordinators to manage patient care in a way that helps to ensure that patients get the right care in the right place at the right time.

Through this system, providers and care coordinators receive real-time information about where the patient is being treated and had been treated previously. This is critically important, especially for patients who have complicated medical conditions, as it helps providers coordinate care across the continuum. For example, a patient with uncontrolled diabetes may traditionally go to numerous hospitals and other locations for care. The ability to understand the context of care helps improve patient outcomes.

The system enables hospitals and other providers to better manage populations and risks, including readmissions, in essentially real time. The system utilizes a specific set of data focused on instances of admission, discharge, or transfer (ADT feed). The system runs on a web-based application, which makes it easy to access for providers and care coordinators across the continuum because it is not dependent on running through an EMR or health information exchange.

Connecticut has historically not invested the resources required to implement the necessary technology and, as a result, hospitals and providers needed to move forward with prioritizing the use of limited resources to implement a technology solution. We now understand that a number of state government entities are looking at similar “notification” technologies for a variety of populations. CHA has heard from and is in various stages of discussions with the multiple state agencies that are interested in this effort. First, we would encourage stakeholders to work together to determine the best way to maximize the use of limited resources and eliminate any potential duplication. And second, CHA strongly recommends that all interested state entities take the time to investigate what systems have already been adopted by Connecticut hospitals and other providers before duplicating any services that are already in place and functioning.

With the tough fiscal times facing Connecticut, it is imperative that the limited resources available be used in the most efficient way possible.

We stand ready to work with the state to improve care and care coordination for Connecticut residents.