



# Healthcare IT News

# HOSPITALS

## & INTEGRATED DELIVERY NETWORKS

### NEWSBRIEFS

#### MOODY'S: HEALTHCARE REFORM COULD BENEFIT HOSPITALS

President-elect Barack Obama's plan to extend healthcare to uninsured Americans will be beneficial to hospitals, medical centers and hospital equipment makers, according to Moody's Investors Service. The New York-based rating agency said the Democratic party's healthcare agenda includes increasing research funding and providing \$10 billion a year over five years to healthcare providers for adoption of healthcare information technology. "The expected spending could positively affect the top-line growth of many healthcare providers," the report speculated.

#### ILLINOIS HOSPITAL GOES WIRELESS THROUGHOUT

Methodist Medical Center, a 330-bed hospital in Peoria, Ill., has deployed wireless technology to boost patient care and safety through expanded patient monitoring. With a single, integrated wireless platform, Methodist Medical Center provides wireless coverage throughout the facility, enabling it to monitor more patients while increasing the use of cellular phones, PDAs, pagers and laptops at the point of care. The medical center is using technology developed by GE Healthcare called GE CARESCAPE Enterprise Access. MobileAccess powers the technology.

#### SOUTH DAKOTA HOSPITALS RECEIVE GRANTS FOR IT

Fourteen rural hospitals in South Dakota will receive \$194,766 in grants to boost healthcare information technology initiatives. The grant funding comes to the state's Department of Health through the Medicare Rural Hospital Flexibility Program, a federal initiative that provides funding to state governments to strengthen rural health.

#### MICHIGAN HOSPITALS LAUNCH DATA EXCHANGE CALLED THIS

Three Michigan hospitals are poised to link for data sharing. Deckerville Community Hospital, Harbor Beach Community Hospital and Mercy Hospital-Port Huron are part of Michigan's "thumb" region. The data-sharing initiative is called Michigan Thumb Health Information System, or THIS. THIS has been designed to include access to and from other regional healthcare systems. The scope of the initiative is intended to be more than double – growing to several other critical access and tertiary hospitals in the region.

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## Henry Ford goes to single sign-on

Radiology rollout makes access easier for 1,400 users.

BY ANNE RAWLAND GABRIEL, Contributing Writer

DETROIT – While many are still evaluating single sign-on (SSO), Radiology Services at Henry Ford Health System is already a step beyond.

To reduce access bottlenecks for 1,400 users spread across 13 Detroit-area sites, the department just completed an eight-month pilot of active-proximity technology that detects users

from dozens of feet away.

"Among other things, the pilot helped us find a logon/logoff balance," said Darryl Bonner, supervisor of radiology information services. "If you're just walking over to confer with a colleague, you don't want the system to log you out. For our environment, a 10-foot walk up and a 20-foot walk away is the sweet spot. Now, you couldn't take the devices away from the doctors who have them."



Darryl Bonner



Healthcare providers demonstrate Imprivata's single sign-on technology.

Neuroradiologist Jeff Corrigan, MD, is among the lucky handful in the pilot. "It definitely speeds

things up," he said of the readers that detect the encrypted SSO see page 13

Microsoft Surface technology is in use in entertainment, retail and hotel sectors, but not yet in healthcare. Texas Health Resources is working with Microsoft to develop new applications.



## Below the Surface

Texas Health innovates with Microsoft unit.

BY BERNIE MONEGAIN, Editor

DALLAS – Texas Health Resources, which operates 13 hospitals in Dallas and surrounding areas, is developing ways in which Microsoft's new Surface technology might be used in healthcare.

One brainstorming session came up with 100 ideas for how the technology, which looks like a card table with a computer surface, could be used on the healthcare front. Emerging as the top concept to test further is the use of the unit in patient-physician consultations.

Ferdinand Velasco, MD, chief medical officer at Texas Health Resources, describes

the computer as a "specialized computing platform." It provides a touch screen that is multi-touch and multi-user, he said, and it allows for much more interactivity than any other computing platform. There's no keyboard or mouse. Materials are manipulated with the touch of the screen.

Surface technology is in use in the entertainment (one can play Pac Man on Microsoft Surface, for example), retail and concierge environments, so far.

Microsoft Surface would allow for a physician to show a patient just where in the artery the blockage is. A cardiologist



Ferdinand Velasco, MD

SURFACE see page 43

## Decision support boosts care for rural patients

BY JOHN ANDREWS, Contributing Editor

PINE BLUFF, AR – When it comes to deploying sophisticated information systems, most people think it is confined to large urban hospitals with unlimited resources. But based on how Jefferson Regional Medical Center has adroitly used the functionality of its decision support system, that perception may change.

In fact, JRMC could be seen as a model of technology implementation for larger hospitals as well as for health centers in similar rural areas. As a progressively minded organization, JRMC is intent on shattering the "backwards" stereotypes commonly associated with hospitals that serve remote populations.

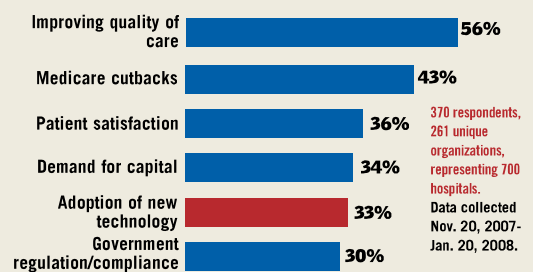
"Don't be fooled by the fact that JRMC is a community hospital in a small Arkansas town," said Jim Cato, vice president and chief nursing officer for Atlanta-based Eclipsys, manufacturer of the hospital's software



John Skowronski, MD, medical director of the emergency department at Jefferson Regional Medical Center, is among the champions of decision support.

JRMC see page 14

### Top business issues facing healthcare



# Leapfrog to launch new hospital rewards program

BY MOLLY MERRILL, Associate Editor

WASHINGTON - The Leapfrog Group is set to launch its new hospital incentives and reward program, which it touts as more comprehensive and easier to use for both hospitals and payers.

The Leapfrog Hospital Rewards Program, or LHRP, will be based on data collected through its updated Leapfrog Hospital Survey, which evaluates hospital patient safety.

In 2005, The Leapfrog Group launched the first version of a rewards program for hospitals in two pilot markets.

"We re-designed the program so that it uses measures from the Leapfrog Hospital Survey as its infrastructure and also incorporates best practices and lessons learned from our earlier pilot programs," said Leah Binder, CEO of The Leapfrog Group. "We are excited to

offer a new program that challenges hospitals to become top performers and rewards them for achieving progress toward this goal."

The new LHRP includes a standardized measure set and scoring methodology, in addition to customizable program features, that purchasers can license and implement in local markets.

"Value-based purchasing initiatives are spreading throughout the

country, so it's important for Leapfrog to offer a nationally standardized and evidence-based approach so multiple payers can use LHRP simultaneously to accelerate the drive toward improving quality," said Binder.

The LHRP is available for payers to license and implement in any market across the country.

"The Leapfrog Group is a leader



Leah Binder

in the hospital quality and safety movement," said William Finck, director of network initiatives for Horizon Blue Cross Blue Shield of New Jersey. "Their program has helped our hospitals identify opportu-

nities for improvement and focus resources on those opportunities. ■

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## SSO

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signal from the RFID-based card hanging next to his ID badge. "Plus, automatically logging off when you walk away certainly facilitates patient privacy and record protection."

Yet the active-proximity technology, called XyLoc MD by Ensure Technologies, isn't the heart of the system. In fact, the pilot was an unexpected by-product of a larger SSO effort that began in 2006, as network lockouts were resulting in escalated organizational risk.

"As complex password aggravation grew, it became increasingly common for everyone to use one person's access throughout a day," Bonner said. "So, we evaluated four SSO solutions and Imprivata's

**"As complex password aggravation grew, it became increasingly common for everyone to use one person's access throughout a day."**

- Darryl Bonner

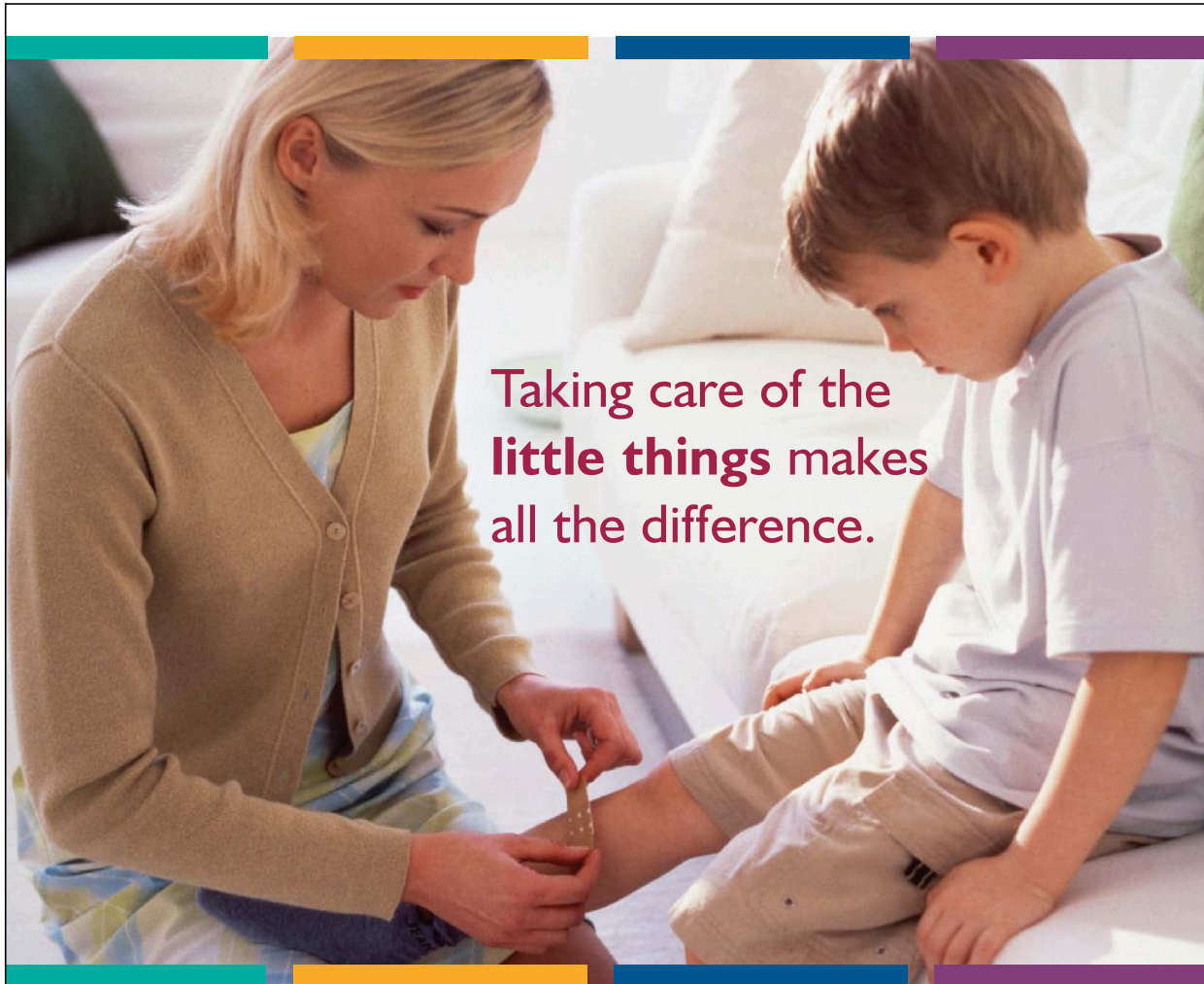
OneSign appliance offered the most sophisticated capabilities without adding development, administrative or network complexity overhead for our 20-person IT staff."

Imprivata's native XyLoc support can make an attractive pairing for strong authentication. "Although XyLoc is a decade old and stable, it's much easier to deploy when the underlying SSO supports it natively," said Mark Diodati, senior analyst with the Burton Group. "Otherwise, XyLoc requires custom integration with the incumbent development, administration and support costs."

After a year of SSO deployment Bonner estimates basic features alone have trimmed help desk calls by an estimated \$700,000 annually. "Ironically, strong authentication wasn't originally a purchasing factor," he said. "But, selecting Imprivata is permitting us to plan a department-wide expansion of active-proximity technology during the second half of 2009." ■

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