Informatics is Not Just for Clinicians: Opportunities for a Future in Informatics

William Hersh, MD
Professor and Chair
Department of Medical Informatics & Clinical Epidemiology
Oregon Health & Science University
Portland, OR, USA
Email: hersh@ohsu.edu
Web: www.billhersh.info

Blog: informaticsprofessor.blogspot.com

References

Altman, RB (2012). Translational bioinformatics: linking the molecular world to the clinical world. *Clinical Pharmacology and Therapeutics*. 91: 994-1000.

Anonymous (2012). Demand Persists for Experienced Health IT Staff. Ann Arbor, MI, College of Healthcare Information Management Executives. http://www.cio-

chime.org/chime/press/surveys/pdf/CHIME_Workforce _survey_report.pdf

Anonymous (2012). Needles in a haystack: Seeking knowledge with clinical informatics, PriceWaterhouseCoopers. http://www.pwc.com/us/en/health-industries/publications/needles-in-a-haystack.jhtml

Anonymous (2013). Solving the talent equation for health IT, PriceWaterhouseCoopers. http://www.pwc.com/us/HITtalent

Araujo, J, Pepper, C, et al. (2009). The profession of public health informatics: still emerging? *International Journal of Medical Informatics*. 78: 375-385.

Blumenthal, D (2010). Launching HITECH. New England Journal of Medicine. 362: 382-385.

Bui, AAT and Taira, RK, Eds. (2010). Medical Imaging Informatics. New York, NY, Springer.

Buntin, MB, Burke, MF, et al. (2011). The benefits of health information technology: a review of the recent literature shows predominantly positive results. *Health Affairs*. 30: 464-471.

Chaudhry, B, Wang, J, et al. (2006). Systematic review: impact of health information technology on quality, efficiency, and costs of medical care. *Annals of Internal Medicine*. 144: 742-752.

Detmer, D, Bloomrosen, M, et al. (2008). Integrated personal health records: transformative tools for consumer-centric care. *BMC Medical Informatics & Decision Making*. 8: 45.

http://www.biomedcentral.com/1472-6947/8/45

Feldman, SS and Hersh, W (2008). Evaluating the AMIA-OHSU 10x10 program to train healthcare professionals in medical informatics. *AMIA Annual Symposium Proceedings*, Washington, DC. American Medical Informatics Association. 182-186

Furukawa, MF, Vibbert, D, et al. (2012). HITECH and Health IT Jobs: Evidence from Online Job Postings. Washington, DC, Office of the National Coordinator for Health Information Technology.

http://www.healthit.gov/sites/default/files/pdf/0512_ONCDataBrief2_JobPostings.pdf

Goldzweig, CL, Towfigh, A, et al. (2009). Costs and benefits of health information technology: new trends from the literature. *Health Affairs*. 28: w282-w293.

Hersh, W (2004). Health care information technology: progress and barriers. *Journal of the American Medical Association*. 292: 2273-2274.

Hersh, W (2009). A stimulus to define informatics and health information technology. *BMC Medical Informatics & Decision Making*. 9: 24. http://www.biomedcentral.com/1472-6947/9/24/

Hersh, W (2010). The health information technology workforce: estimations of demands and a framework for requirements. *Applied Clinical Informatics*. 1: 197-212.

Hersh, W (2012). Update on the ONC for Health IT Workforce Development Program. HIMSS Clinical Informatics Insights, July, 2012.

http://www.himss.org/ASP/ContentRedirector.asp?ContentId=80559&type=HIMSSNewsItem;src=cii201 20709

Hersh, W and Williamson, J (2007). Educating 10,000 informaticians by 2010: the AMIA 10×10 program. *International Journal of Medical Informatics*. 76: 377-382.

Hersh, WR (2007). The full spectrum of biomedical informatics education at Oregon Health & Science University. *Methods of Information in Medicine*. 46: 80-83.

Hersh, WR and Wright, A (2008). What workforce is needed to implement the health information technology agenda? An analysis from the HIMSS Analytics™ Database. *AMIA Annual Symposium Proceedings*, Washington, DC. American Medical Informatics Association. 303-307

Kulikowski, CA, Shortliffe, EH, et al. (2012). AMIA Board white paper: definition of biomedical informatics and specification of core competencies for graduate education in the discipline. *Journal of the American Medical Informatics Association*. 19: 931-938.

Miller, HD, Yasnoff, WA, et al. (2009). Personal Health Records: The Essential Missing Element in 21st Century Healthcare. Chicago, IL, Healthcare Information and Management Systems Society. Richesson, RL and Andrews, JE, Eds. (2012). Clinical Research Informatics. New York, NY, Springer. Smith, M, Saunders, R, et al. (2012). Best Care at Lower Cost: The Path to Continuously Learning Health Care in America. Washington, DC, National Academies Press.

Informatics is Not Just for Clinicians: Opportunities for a Future in **Informatics**

William Hersh, MD Professor and Chair Department of Medical Informatics & Clinical Epidemiology Oregon Health & Science University Portland, OR, USA Email: hersh@ohsu.edu Web: www.billhersh.info

Blog: informaticsprofessor.blogspot.com

Overview

- Role of health information technology (HIT) and informatics in improving our healthcare system
- Needs and opportunities for a competent professional workforce
- Important recent HIT workforce developments
- Opportunities for education in informatics



Regardless of your political views, the US healthcare system needs fixin'

- Recent IOM report (Smith, 2012) analyzes data to find annual
 - \$750B in waste (out of \$2.5T system)
 - 75,000 premature deaths
- · Sources of waste
 - Unnecessary services provided
 - Services inefficiently delivered
 - Prices too high relative to costs
 - Excess administrative costs
 - Missed opportunities for prevention
 - Fraud

http://www.iom.edu/Reports/2012/Best-Care-at-Lower-Cost-The-Path-to-Continuously-Learning-Health-Care-in-America.aspx

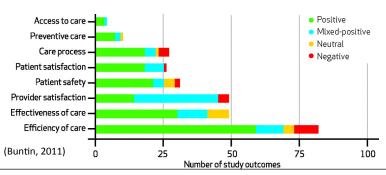


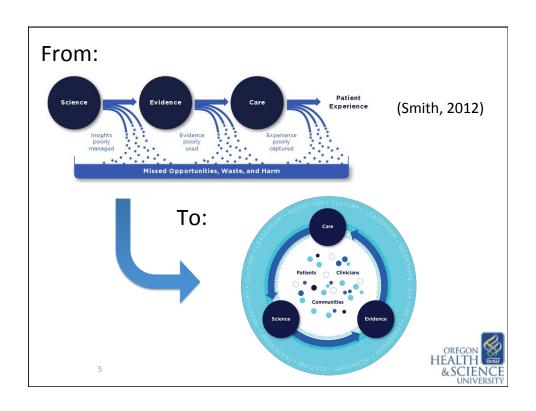


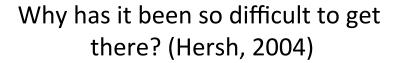


Health information technology (HIT) is part of solution

- Systematic reviews (Chaudhry, 2006; Goldzweig, 2009; Buntin, 2011) have identified benefits in a variety of areas
 - Although 18-25% of studies come from a small number of 'health IT leader" institutions







Health Care Information Technology

Progress and Barriers

m Hersh, MD

THE 3 DECADES SINCE THE TERM "MEDICAL INFORMATION on for information to chology critical working at the intersection of information technology (TI) and medicine have eveloped and evaluated computer applications aims and patients to think more fundamentally about how innovations and and another than the contract of the c

- Cost
- Technical challenges
- Interoperability
- Privacy and confidentiality
- Workforce

Gene IT. It is no exaggration to declare that the years ahead protent the "declared or braith information technology."
Informatics is poised to have a major impact in patientclinician communication. In the Clinical Crossroads article

dinician formatics is possed to have a major impact in patientclinician communication. In the Clinical Crossroads article

dinician formation (and the clinical Crossroads article)

when the communication of the first distribution of the communication of the clinical crossroads article

distribution of the communication of the clinical crossroads article

distribution of the communication of the clinical crossroads article

distribution of the communication of the clinical crossroads article

distribution of the communication of the clinical crossroads article

distribution of the communication of the clinical crossroads article

distribution of the clinical crossroads article

distribution of the communication of the clinical crossroads article

distribution of the c



Help was provided by a (then) new US president



"To improve the quality of our health care while lowering its cost, we will make the immediate investments necessary to ensure that within five years, all of America's medical records are computerized ... It just won't save billions of dollars and **thousands of jobs** – it will save lives by reducing the deadly but preventable medical errors that pervade our health care system."

January 5, 2009

Health Information Technology for Economic and Clinical Health (HITECH) Act of the American Recovery and Reinvestment Act (ARRA) (Blumenthal, 2010)

- Incentives for electronic health record (EHR) adoption by physicians and hospitals (up to \$27B)
- Direct grants administered by federal agencies (\$2B, including \$118M for workforce development)

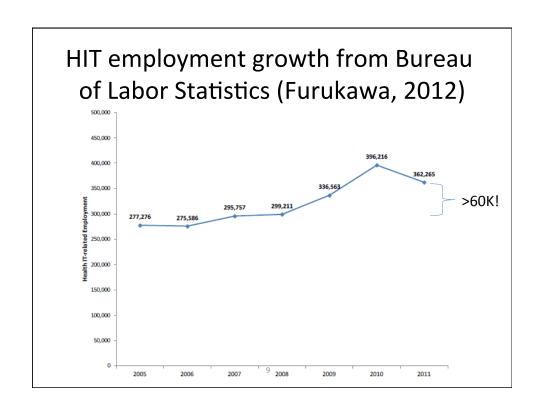
&SCIENCE

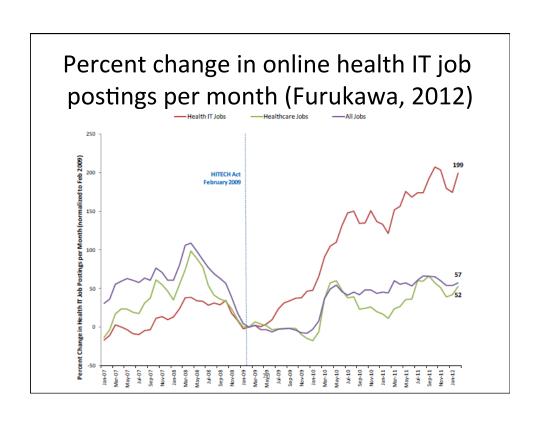
7

One of the challenges has been lack of a professional workforce

- Analysis of HIMSS Analytics Database[™] estimated need of 41,000 additional HIT professionals as we moved to more advanced clinical systems (Hersh, 2008)
- ONC increased estimate of need to 50,000, leading to Workforce Development Program being part of HITECH Program (Hersh, 2012)
- Actual numbers hired have been even higher (Furukawa, 2012) – see next slide
- Despite growth of jobs and number trained, shortfalls persist (CHIME, 2012)

8





Demand still persists for experienced health IT staff (CHIME, 2012)

- Skills most often in demand
 - Clinical software implementation and support staff (e.g., EHR, CPOE) 74%
 - Infrastructure staff 47%
 - Business software implementation and support staff 45%
- 71% said IT staff shortages could jeopardize an enterprise IT project, while 58% said they would definitely or possibly affect meeting meaningful use criteria for incentive funding
- 85% also expressed concerns about being able to retain current staff
- 67% were aware of the ONC workforce programs, with 12% of those respondents reporting that they had hired graduates from them

OREGON HEALTH &SCIE

11

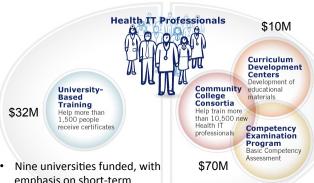
Important informatics workforce developments

- Office of the National Coordinator for Health IT (ONC) Workforce Development Program
 - Aiming to create the workforce needed to implement the HITECH Act
- Changing nature of informatics work
 - Transition from implementation to analytics
- Certification in health IT and informatics
 - New certifications being added to historical ones from nursing and HIM



ONC Workforce Development Program

Investment of \$118M based on estimated need for 51,000 health IT professionals in 12 workforce roles (half in universities, half in community colleges)



- emphasis on short-term training using distance learning
- OHSU funded to enroll trainees in existing programs

- Five universities funded to develop curricula for community college programs
- OHSU funded to develop curricula and to serve as National Training & **Dissemination Center** (NTDC)
- Curriculum available at www.onc-ntdc.info



13

\$6M

"Health sector demands for informatics" (PwC, 2012)

Providers

- •Pay-for-performance reporting
- Performance management report
- •Automated transaction system ·Clinical dashboards for use at the
- point of care •New government standardized data definitions
- ·Program for acquiring evidencebased medicine practices and driving these to the bedside and
- Personalized medicine
- Remote patient monitoring and management

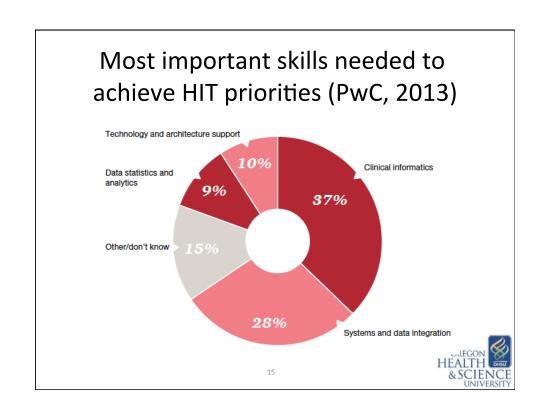
Health insurers

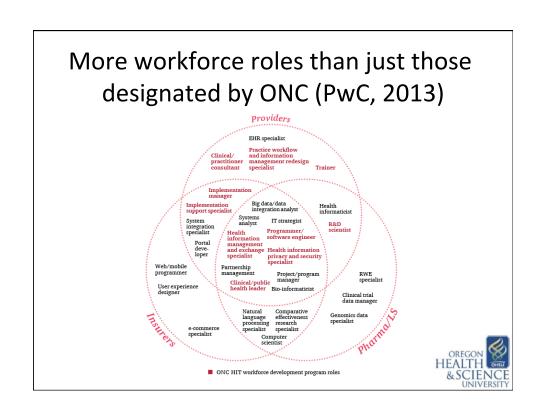
- ·Operational management to better manage costs and programs
 •Clinical analytics to support cost and quality programs
- •Consumer segmentation, to track product performance and support new product and growth sales strategies
- Provider network management analytics, to identify and reward strong providers and track network
- performance Pay-for-performance analytics to integrate into emerging quality and medical home payment models •Near real-time clinical data for care
- management; decreased reliance on claims as a source of data for analytics

Pharma/LS

- •Revised research and development •Analytics-based identification of diseases/conditions/populations with unmet therapeutics
- •Informatics approaches to patient recruitment; virtual clinical trials •Real-world trials post-market
- •New business models
- •New approaches to marketing and
- •Real-world comparative effectiveness
- •Convergence and real-world evidence
- ·Performance-based payment
- •Outcomes reporting ·Personalized medicine







HIT certifications in clinical and allied health professions

- Physicians newly designated subspecialty in clinical informatics
 - Subspecialty for those who have primary board certification
 - "Grandfathering" now, clinical fellowships later
 - http://www.theabpm.org/ABPM Clinical Informatics.pdf
- Nursing bachelor's degree with practice experience
 - http://www.nursecredentialing.org/NurseSpecialties/Informatics.aspx
- HIM has many; first three require formal education
 - Registered Health Information Administrator (RHIA)
 - Registered Health Information Technician (RHIT)
 - Certified Coding Specialist/Association (CCS, CCA, CCS-P)
 - Certified Health Data Analyst (CHDA)
 - Certified in Healthcare Privacy and Security (CHPS)
 - Clinical Documentation Improvement Professional (CDIP)
 - http://www.ahima.org/certification/default.aspx



17

Certifications specific to HIT

- HIMSS
 - CPHIMS/CAHIMS Certified Professional/Associate in Healthcare Information & Management Systems
 - http://www.himss.org/getcertified/
- HITPro developed out of ONC Workforce Development Program but available to anyone
 - http://www.hitproexams.org
- · Health IT Certification
 - http://www.healthitcertification.com
- CompTIA
 - http://certification.comptia.org/getCertified/certifications/ hittech.aspx



How do we build the informatics workforce?

- (Hersh, 2009; Hersh, 2010)
- Informatics requires a substantial knowledge of underlying healthcare and biomedicine but not necessarily formal training in these areas
- Let's explore
 - Career pathways
 - OHSU program experience
 - Opportunities to advance your career at OHSU



19

Career pathways have diverse inputs and outputs (Hersh, 2009) Health care professions, e.g., There is no single career medicine, nursing, etc. pathway, ladder, etc. Natural and life sciences, e.g., Jobs in: biology, genetics, etc. Biomedical Healthcare systems and health Clinical leadership informatics • IT leadership Computer science (CS), IT, and undergrad informatics education · Biomedical research (graduate Industry level) Academia Health information management (HIM) There are many career opportunities in many Others, e.g., business, library settings for all tracks and info. science 20 &SCIENCE

Experience of the OHSU program

http://www.ohsu.edu/informatics/

- Graduate level programs at Certificate, Master's, and PhD levels (Hersh, 2007)
 - "Building block" approach allows courses to be carried forward to higher levels
- Two "populations" of students
 - "First-career" students more likely to be full-time, on-campus, and from variety of backgrounds
 - "Career-changing" students likely to be part-time, distance, mostly (though not exclusively) from healthcare professions
- Many of latter group prefer "a la carte" learning
 - This has led to the successful 10x10 ("ten by ten") program that is a partnership with AMIA (Hersh, 2007; Feldman, 2008)
 - Overview and access to demo: http://www.billhersh.info/10x10.html



21



Program tracks

- Clinical Informatics
 - Original track, focused on informatics in health, healthcare, public health, and clinical research settings
- Bioinformatics and Computational Biology (BCB)
 - Focused on informatics in genomics. molecular biology, and their translational research aspects
- Health Information Management (HIM)
 - Overlapping with clinical informatics, focused on HIM profession and leading to Registered Health Information Administrator (RHIA) certification



Degrees and certificates offered

- Doctor of Philosophy (PhD)
 - For those who wish to pursue research, academia, or leadership careers
- Master of Science (MS)
 - Research master's, including for those with doctoral degrees in other fields who wish to pursue research careers
- Master of Biomedical Informatics (MBI)
 - Professional master's degree for practitioners and leaders
- Graduate Certificate
 - Subset of master's degree as an introduction or career specialization

OREGON OSE
HEALTH

& SCIENCE
LINIVERSITY

23

Tracks, degrees and certificates, and availability

Degree/Certificate Track	PhD	MS	МВІ	Grad Cert
Clinical Informatics	On-campus	On-campus On-line	On-campus On-line	On-campus On-line
Bioinformatics and Computational Biology	On-campus	On-campus		
Health Information Management		On-campus On-line	On-campus On-line	On-campus On-line



Overview of OHSU graduate programs and "building block" model

Master's

- Tracks:
 - Clinical Informatics
 - Bioinformatics
- Thesis or Capstone

Graduate Certificate

- Tracks:
 - Clinical Informatics
 - Health Information Management

10x10

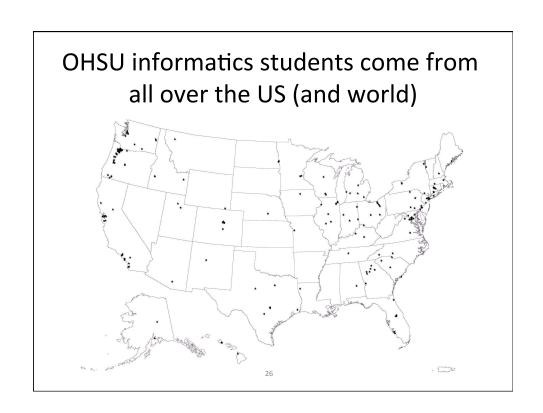
- Or introductory course

<u> PhD</u>

- Knowledge Base
- Advanced Research Methods
- Biostatistics
- Cognate
- Advanced Topics
- Doctoral Symposium
- Mentored Teaching
- Dissertation



25



Opportunities in informatics are <u>not</u> limited to healthcare

- Bioinformatics genomics and personalized medicine (Altman, 2012)
- Clinical and translational research building the "learning" healthcare system (Richesson, 2012)
- Public health protecting the public and promoting health (Araujo, 2009)
- Consumer health for all ages, especially aging Internet-savvy baby boomers (Detmer, 2008; Miller, 2009)
- Imaging informatics use of images for biomedical research, clinical care, etc. (Bui, 2010)







27

OHSU can help advance your career – Employee Tuition Benefit Program

- https://o2.ohsu.edu/human-resources/documents/upload/tuition-benefit-program.pdf
- Graduate Certificate and MBI are part of program, which provides \$150 per credit hour up to \$5250 per year
- Current tuition and fees for distance learning programs, Oregon residents
 - ~\$2085 per 3-credit course
 - ~\$16K/\$35K for Graduate Certificate/MBI
 - Tuition and fees lower for on-campus students but overall higher when add in health insurance and other fees
 - Out-of-state tuition about 15% higher



Conclusions

- Achieving the learning healthcare system will require informatics tools and professionals
- The grand experiment of HITECH is going on in the US – results not yet in
- There is continued need and career opportunity for informatics professionals, researchers, and others
- From implementation to analytics now that adoption is widespread, work of informatics will change to make beneficial use of data and information

29

For more information

- Bill Hersh
 - http://www.billhersh.info
 - Informatics Professor blog
 - http://informaticsprofessor.blogspot.com
- OHSU Department of Medical Informatics & Clinical Epidemiology (DMICE)
 - http://www.ohsu.edu/informatics
 - http://www.youtube.com/watch?v=T-74duDDvwU
 - http://oninformatics.com
- · What is Biomedical and Health Informatics?
 - http://www.billhersh.info/whatis
- Office of the National Coordinator for Health IT (ONC)
 - http://healthit.hhs.gov
- American Medical Informatics Association (AMIA)
 - http://www.amia.org
- · National Library of Medicine (NLM)
 - http://www.nlm.nih.gov



30