

2016 HIMSS Value of Health IT Survey

Executive Summary

January 11, 2016



Based on the feedback of 52 executives representing an exclusive cohort of healthcare organizations (HIMSS Analytics EMRAM Stage 6, Stage 7 and Davies Award winning hospitals), the findings from the **2016 HIMSS Value of Health IT Survey** paint a generally positive picture surrounding the perceived value derived from employing an electronic health record (EHR) system. By leveraging the HIMSS STEPS model to categorize respondent HIT value experiences into one of five generalized areas (**S**atisfaction, **T**reatment/Clinical, **E**lectronic Information/Data, **P**atient Engagement and **P**opulation Management, **S**avings), the findings of this study uncovered the following notable patterns in HIT value which should inform future considerations.

Universality of Value Experiences:

Experiencing value from one's HIT investment appears to be the norm for those with advanced EHR capabilities. In fact, approximately 88 percent of the executives reported at least one positive outcome of their EHR leading one to conclude that HIT value experiences are fairly widespread amongst this cohort of healthcare providers. That said, one should expect to see this percentage increase over time as organizations work through the varied challenges and competing priorities which often arise as technologies/processes become embedded in the life of the organization.

Variety of Value Experiences:

HIT value experiences are quite varied. While HIT value examples offered by respondents fell into all five areas of the STEPS model, there was great variability in the number and types of experiences reported. Though this study made no attempt to explore the rationale for these varied experiences, it is an observation warranting further attention.

Commonality of Value Experiences:

There were definitive patterns in the shared value experiences which are best understood by leveraging the HIMSS STEPS™ value optimization framework¹.

Treatment/Clinical: The majority of HIT value examples offered by respondents fell under the Treatment/Clinical heading of the STEPS model, with the clinical staff's *quality performance* forming the most frequently cited value of the EHR (by 83 percent of the

HIMSS STEPS™ value optimization framework <http://www.himss.org/ResourceLibrary/ValueSuite.aspx#/steps-app>

respondents). The commonality of Treatment/Clinical related HIT value examples offered may be reflective of the apparent priority these leading hospitals have placed on formally measuring the impact of their EHR on clinical processes (92 percent conduct such efforts).

Savings: Savings related HIT value examples constituted the second most common area cited by the respondents (81 percent reported that their organization documented at least one positive impact in the area of savings). The three areas where respondents were most likely to report achieving a positive financial impact were *coding accuracy*, *days in accounts receivable (AR)* and *transcription costs*.

Electronic Data/Information: More than half of the respondents (58 percent) reported that their organization had documented a positive impact in at least one of the areas included in the survey. The area with the most positive impact as a result of their organization's EHR implementation was the ability to *share information among providers*.

Prevention and Patient Education: While evidences surrounding the positive impact of the EHR on Prevention and Patient Education efforts were cited by some respondents, efforts to purposely impact population health via HIT are comparatively new. As a result, the value expressions offered under this heading were not as widespread as we have seen in the other STEPS categories. One would expect to see more examples in this area over time.

Satisfaction: Satisfaction value experiences constituted the fifth area within which HIT value examples were cited by the respondents. With satisfaction examples considering both nurses and physicians, organizations appeared to have been more effective in positively impacting their *nurses* (44 percent reported increased satisfaction amongst their nurses) than their *physicians* (29 percent). Given the significant disruptiveness the EHR has for clinicians, this area warrants close monitoring and further exploration. Arguably, as evidences of the clinical value of HIT become more known, it is reasonable to expect clinician satisfaction with the EHR to eventually increase.

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How to Cite This Survey

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For More Information, Contact:

Joyce Lofstrom
Senior Director, Corporate Communications
HIMSS
312/915-9237
jlofstrom@himss.org