

What's New, What's Next

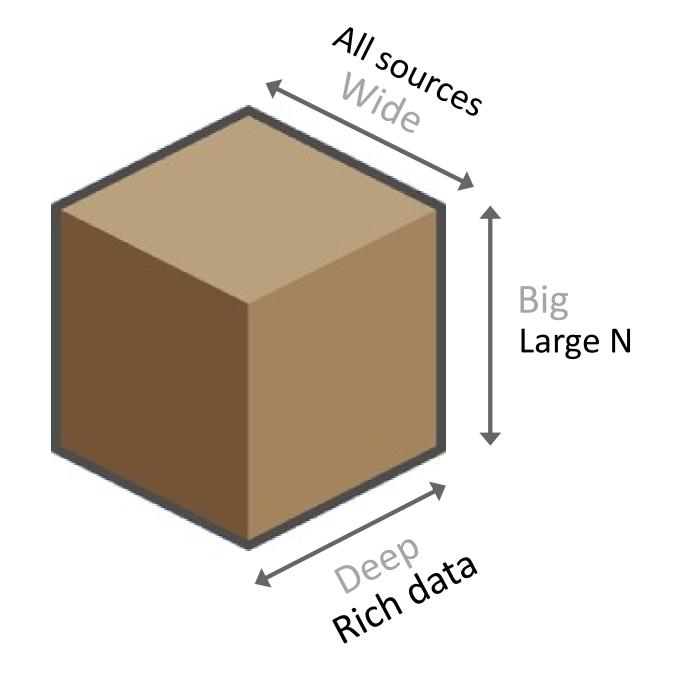
InterSystems HealthCare

Jonathan Teich

HealthShare CMIO and Director, Product Management



All the Data





Healthcare is at the confluence of three major forces





Economic



Consumer



Technological







Economic



Aging population



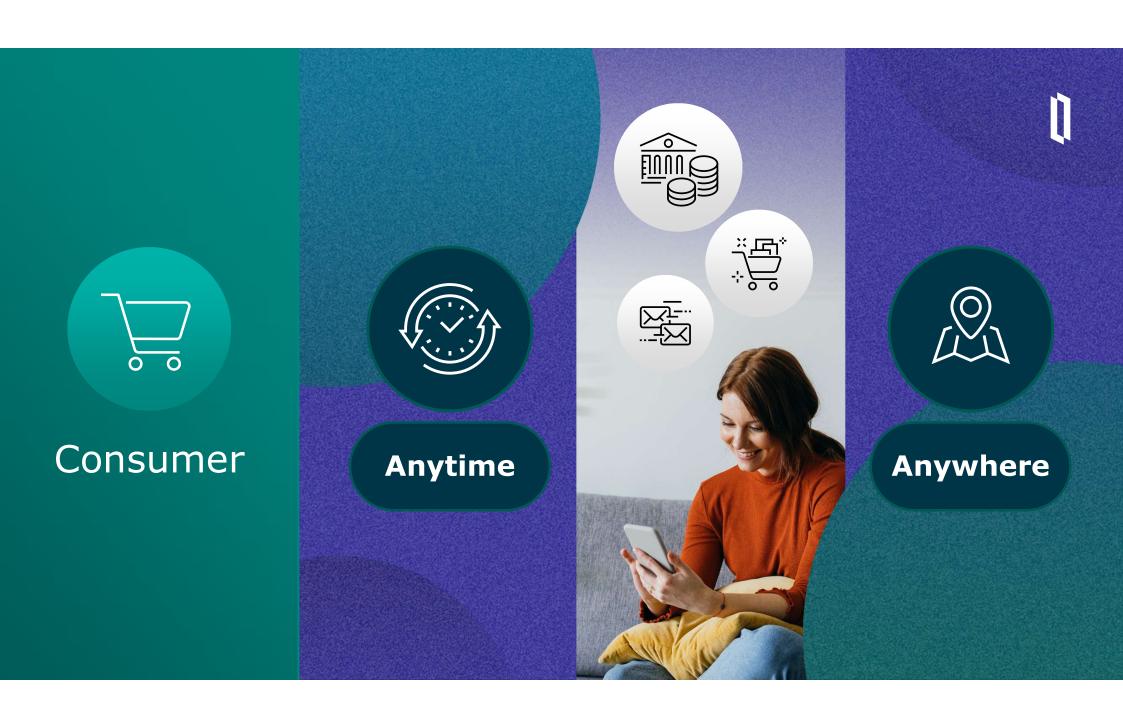
Thin margins

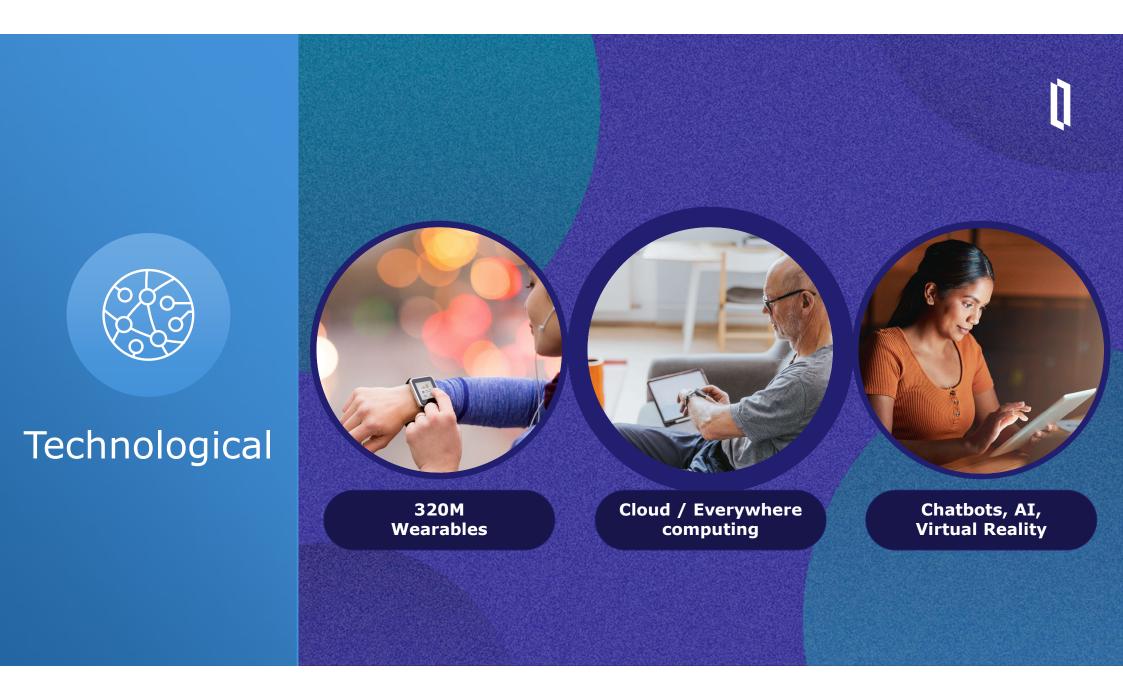


Staffing and supply chain pressures



New payment models

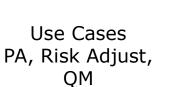




Trends in Healthcare and Health IT 2022









Volume Up/ Workers Down Distributed Care



Consumerism /Patient Roles Apps, Websites, Plans



Extended Data Supply Chain, SDOH, Community

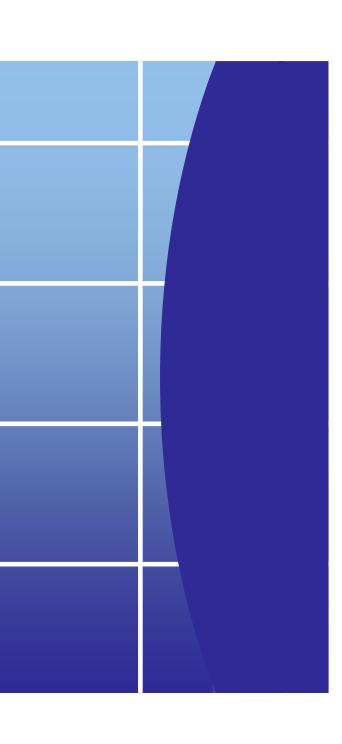


Big Data/Cloud/FHIR Mergers, Covid, AI

Strategic Themes



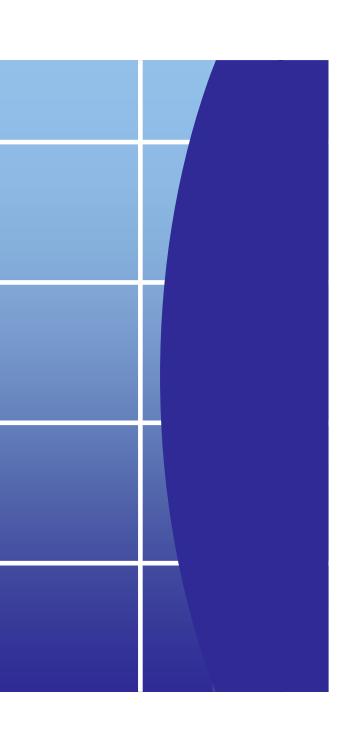
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Flexibility Platform and Solutions	Performance / Capacity	Multi-Capable Analytics	High-Value Use Case Solutions	Extended Data	TCO



HealthShare 2022 drivers



- Technologies: Cloud, FHIR, AI/ML, larger data sources
- Use cases: individual and population
 - Prior auth, quality, HEDIS, epidemics and disasters, regulatory, community-wide...
- Novel data: resources, supply chain, SDOH, community, hybrid
- Volume up / workers down = efficiency and coordination needed
- Consumerism and patient-facing apps and websites
- Cost



HealthShare Strategic Themes



- Flexibility, configurability and upgradability for platform and solutions
 - Cloud, services, low-code, interchangeable parts
- Performance and capacity
- High-value use case solutions and solution templates
- Actionable analytics and advanced notifications
- Rapid extended data capabilities
- ↓ Cost and time to install/upgrade



Sources

EMRs

Claims

Devices

Economic/Social

Registries/HIEs

Labs / Omics

Life Science

Care Planning and Coordination

4



Clinical Visualisation



Advanced Rules and Notifications



Data Access and Exchange







Analytics



Patient

Engagement

Health

Connect





Patient Index

Data Strength

The most trusted source of aggregated, interoperable data



Speed - Capacity - Reliability - Manageability - Flexibility

Healthcare Solutions



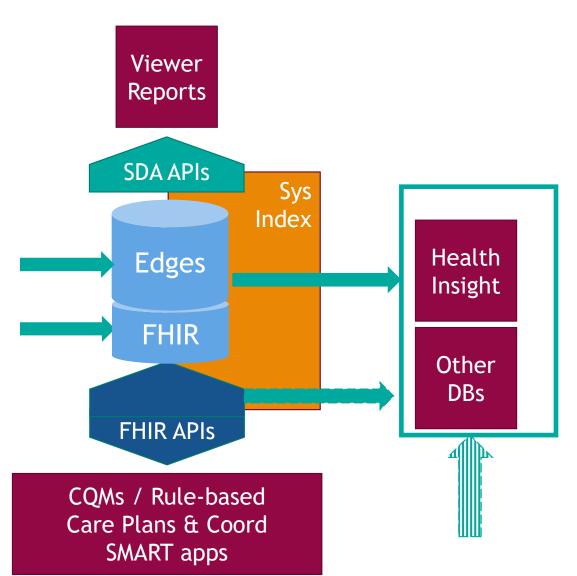
Superior added value on top of "just data"



Views - Summaries -Coordination Logic - Analysis - Notifications

Unified Care Record

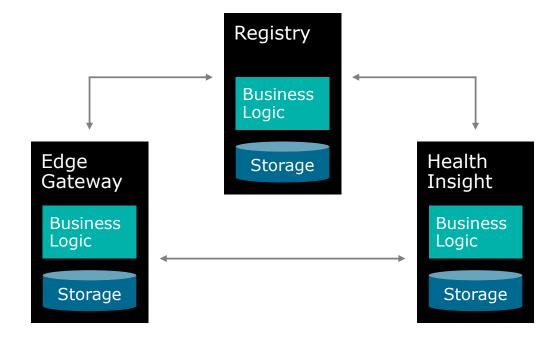
- Ongoing performance and capacity enhancement
- Data expansion
 - PDex, X12 claims and benefits, CARIN
 - All expansions realised in FHIR and relational
 - External and non-patient data, social, community
- Expanded cloud presence and access



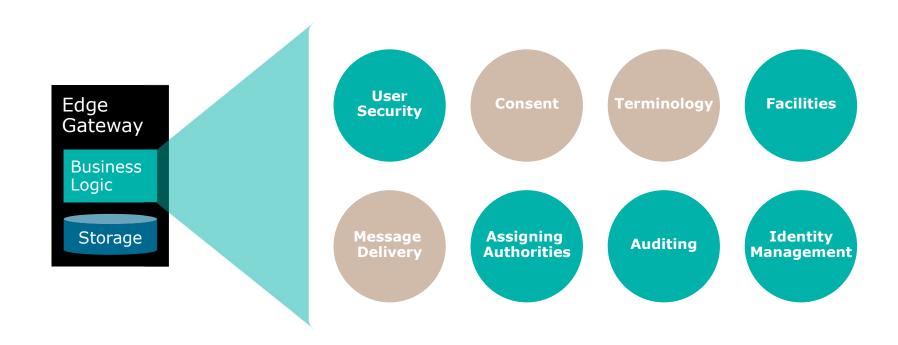




Unified Care Record



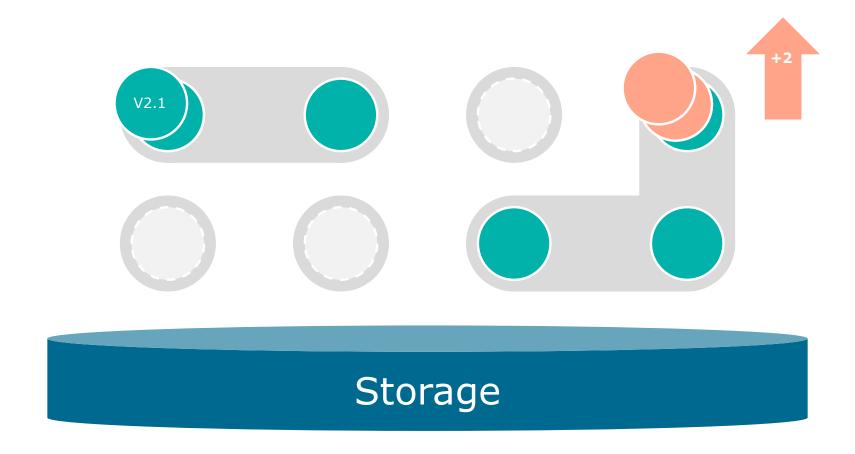












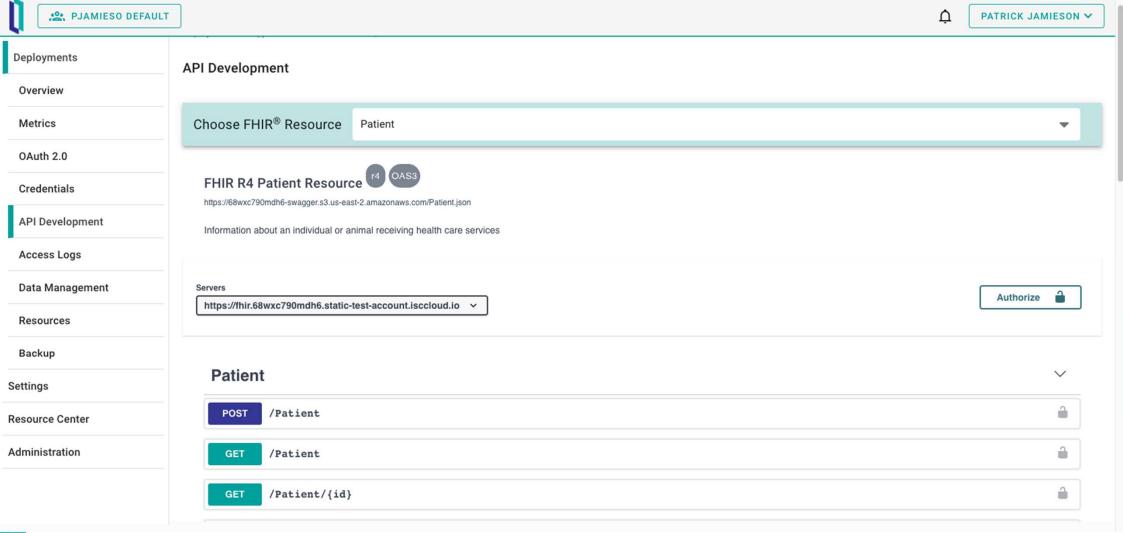
InterSystems on HL7 FHIR®

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- Mission: services for any source
- Data symmetry in SDA, Health Insight, FHIR
- Wide profile support
- FHIR data ingestion
- Bulk FHIR Data
- FHIR accelerator service
- HL7 to FHIR Message Transformation service
- FHIR input/output to clinical decision support



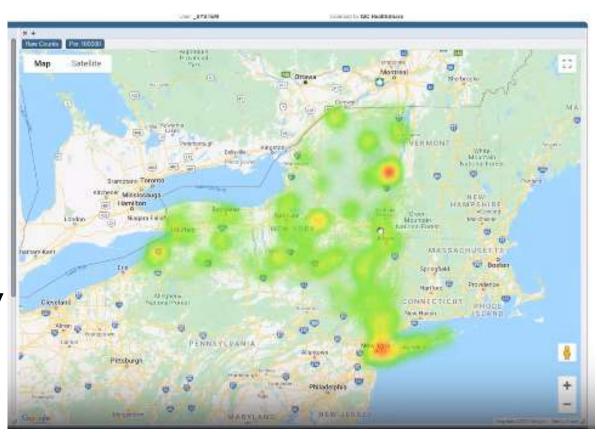
IRIS FHIR accelerator and HL7-to-FHIR service



Health Insight – data strength



- Population and organizational insight
- Big / wide data
- Rapid, low-latency data ingestion
- Top-class database, flexible front end
- Rapid interfacing, modeling, cube building
- Synergy with external DBs
- Support AI/ML, large registries, SDOH...



Data Strength

The most trusted source of aggregated, interoperable data

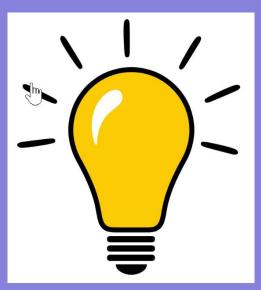


Speed - Capacity - Reliability - Manageability - Flexibility

Healthcare Solutions

U

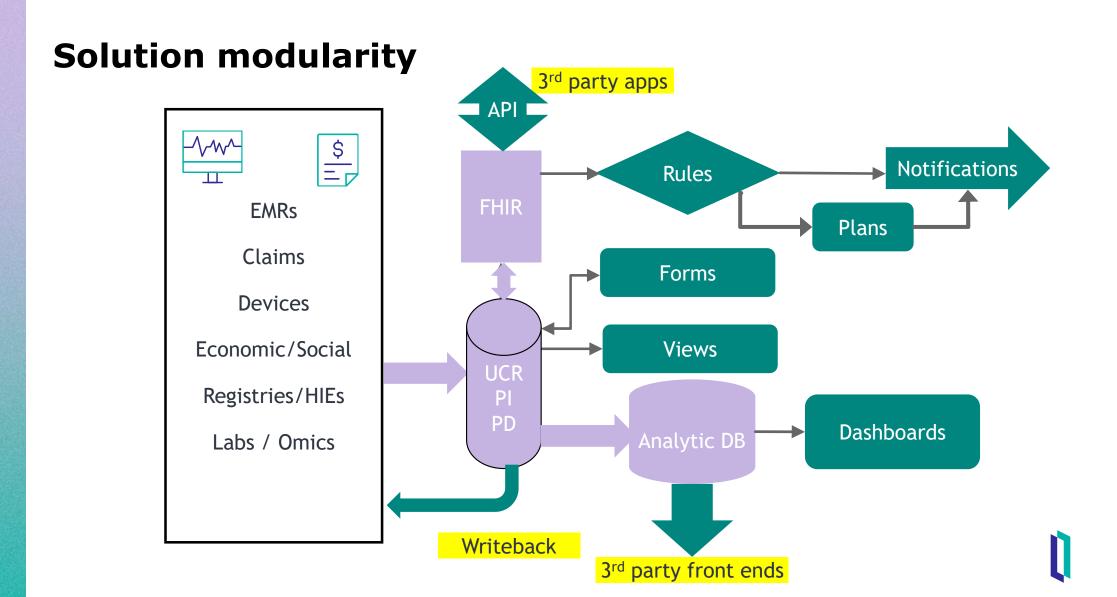
Superior added value on top of "just data"



Views - Summaries -Coordination Logic - Analysis - Notifications

Solution modularity 3rd party apps API I FHIR **EMRs** Claims Devices Economic/Social UCR Registries/HIEs PD Dashboards Analytic DB Labs / Omics

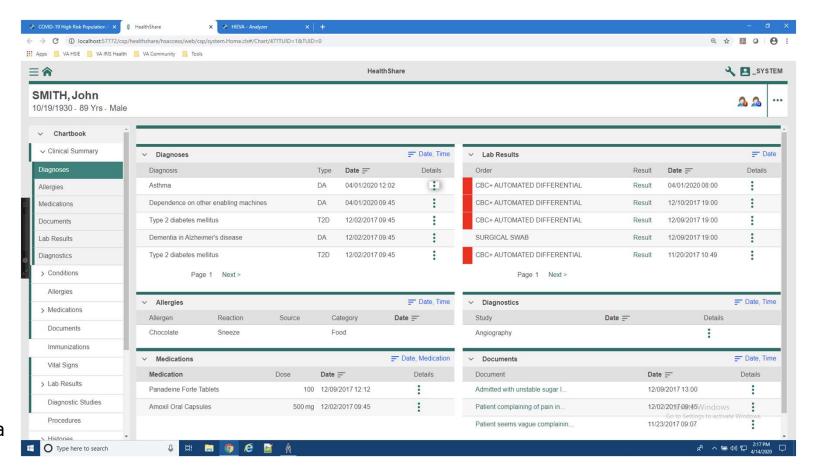




Clinical Viewer



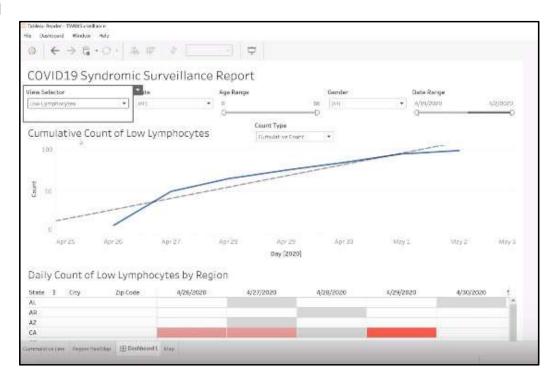
- Expanding data types
- Data configurability
- Clinical & claims data combination
- Use-case filtered views
- Ongoing:
 - Performance enhancements
 - UX and graphing enhancements
 - User-designed reports
 - Grouping & filtering
 - Noncategorised data



Analytics / Population level: example of Covid-19



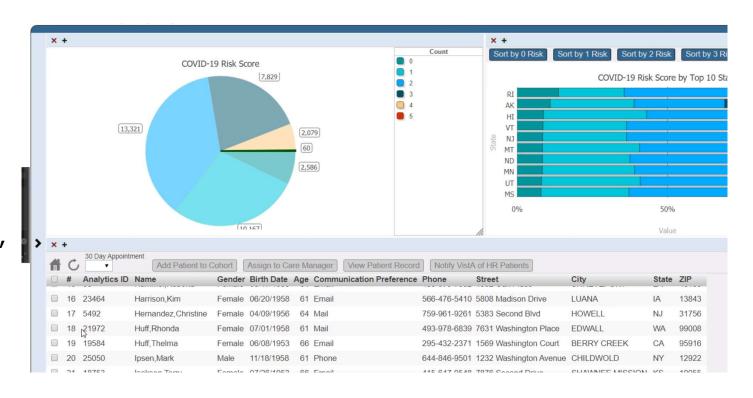
- Track epidemic progress across a region
- Public and national common reporting
- Track and redeploy resources
- Predict associations (causes/treatments), severity
- Syndromic surveillance trends / anomalies



Health Insight Solutions

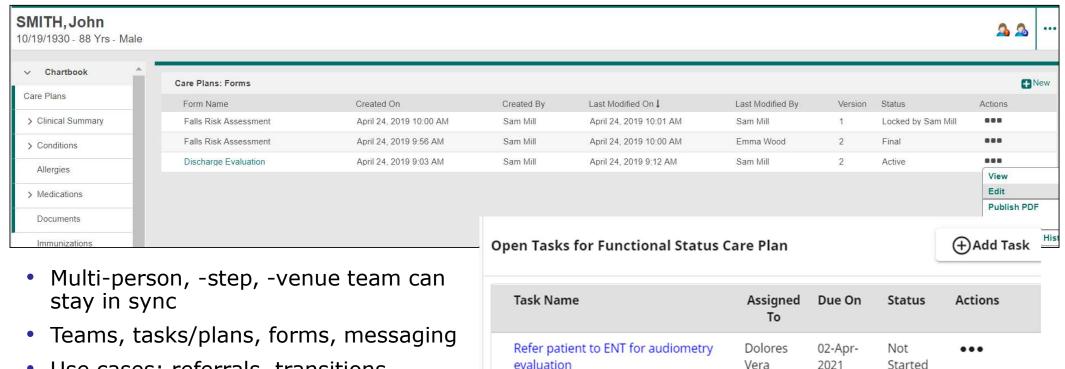


- Set of solution builder templates and tools
- Configured value sets, query content, dashboards, reports, cohort building
- Use cases: Gaps in care, utilisation, CQMs, Covid, surveillance, missed coding opportunities, pop health, chronic condition optimisation, adequacy of resources in a region



Care Community: care coordination and plans





- Use cases: referrals, transitions, chronic conditions, social care
- Patient engagement in plans
- Pop health = analytics + cohorting + care planning



Recommended Summary Plan for Emergency Care and Treatment

The ReSPECT process starts with a conversation between a person and a healthcare professional. The ReSPECT form is a clinical record of agreed recommendations. It is not a legally binding document.

1. This plan belongs to:

Full name	Hereford, James		
Date of birth (dd/mm/yyyy)	27/01/1965		
Address	1 County Lane Worcester WR1 1AT		
NHS/CHI/Health and care number	4507243333		
Preferred name			
Date completed (dd/mm/yyyy)			

2: Shared understanding of my health and current condition

Summary of relevant information for this plan including diagnoses and relevant personal circumstances:

Cancer of the pancreas with spread to the liver. Initial chemotherapy not effective; does not want more. No communication difficulties.

Lives with and is the main carer for her blind husband (he is known to local social services).

Details of other relevant care planning documents and where to find them (e.g. Advance or Anticipatory Care Plan; Advance Decision to Refuse Treatment or Advance Directive; Emergency plan for the carer):

Referred to palliative care for further discussions.

I have a legal welfare proxy in place (e.g. registered welfare attorney, person with parental responsibility)
- if ves provide details in Section 8

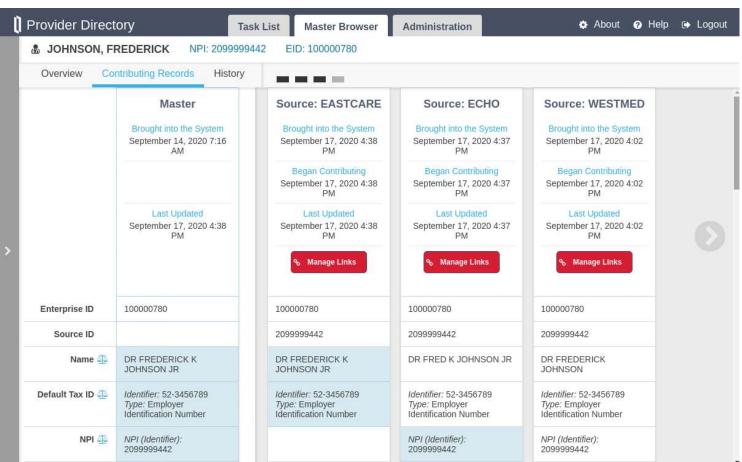
□Yes / ■No

3: What matters to me in decisions about my treatment and care in an emergency

Provider Directory



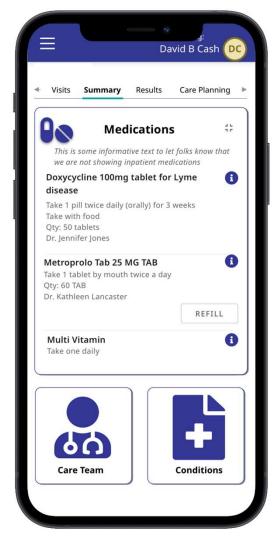
- HSPD as source of truth
- FHIR Da Vinci Plan-Net support
- Use cases:
 - Physician attribution
 - Notification recipients
 - Network/plan mgmt.
 - Referral search
 - No Surprises Act support
 - Cross-entity KPIs
 - Cross-entity care teams
- Ongoing: enhanced search, region and role fine control
- Patient Index referential, more matching enhancements



Personal Community

- Patient records access across the network, with overall and specific views
- Combined data for multi-EMR IDNs
- Host 3rd party SMART apps
- Control for CMS patient access API
- Control for prior auth requests
- Payer health programs
- Common forms structure for patient participation in care plans
- Major UX update



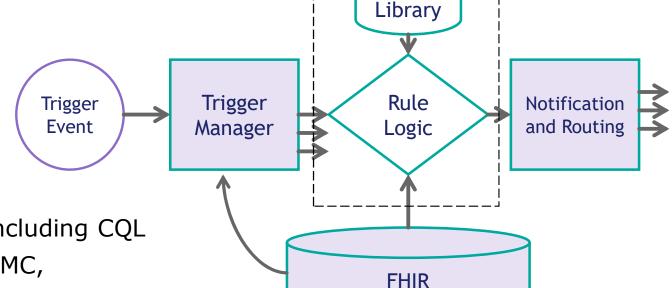




Intelligent Notifications / Healthcare Action Engine



- Alerts, reminders, guidance based on multi-site data
- No-code rule building
- Uses UCR data or any FHIR
- CDS Hooks interface
- Triggered or requested

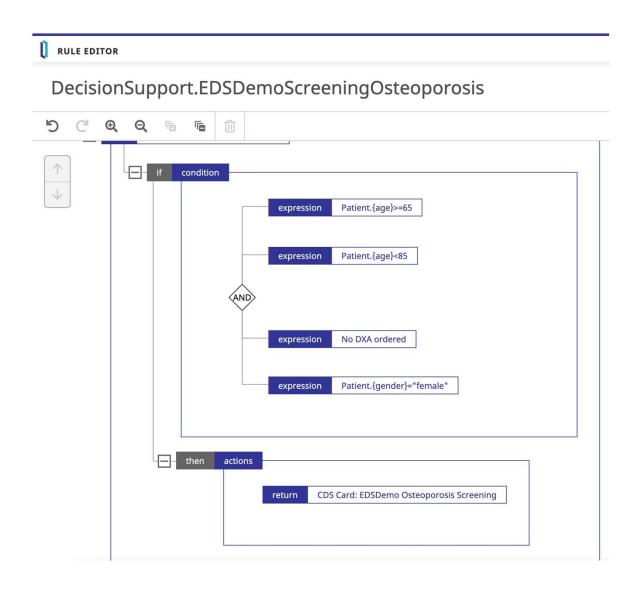


Rule

- Support for external logic including CQL
- Actions: Message, Direct, CMC, pipe to EHR, feed analytics

No-code rule builder

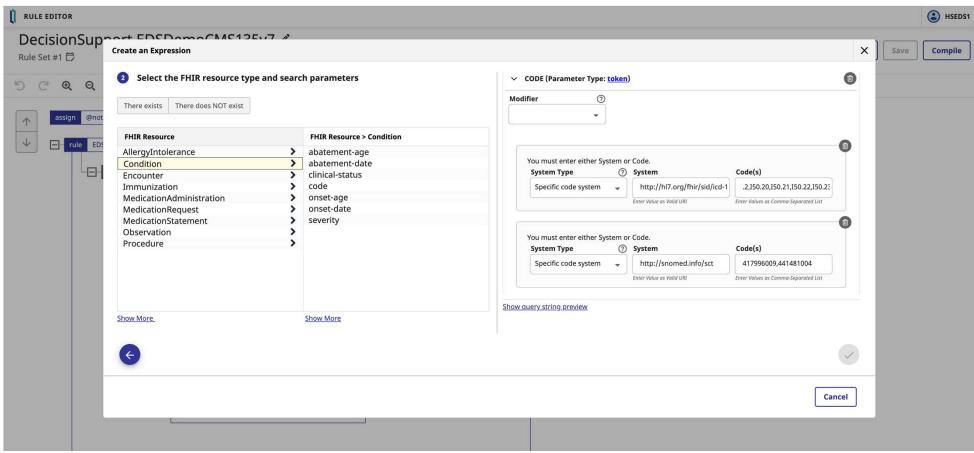
(Healthcare Action Engine)





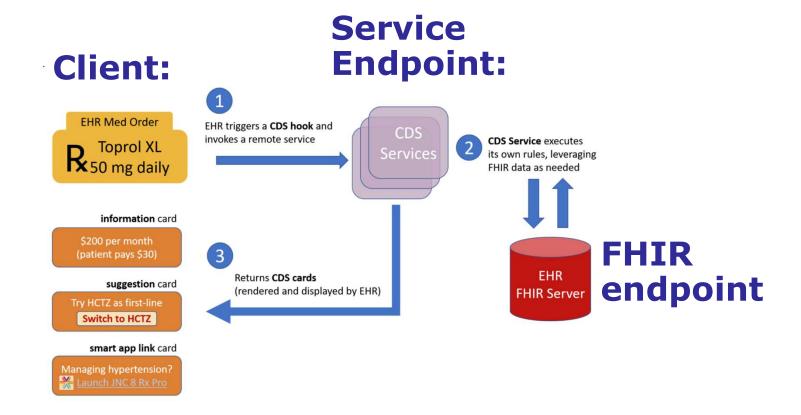
Healthcare Rule Editor





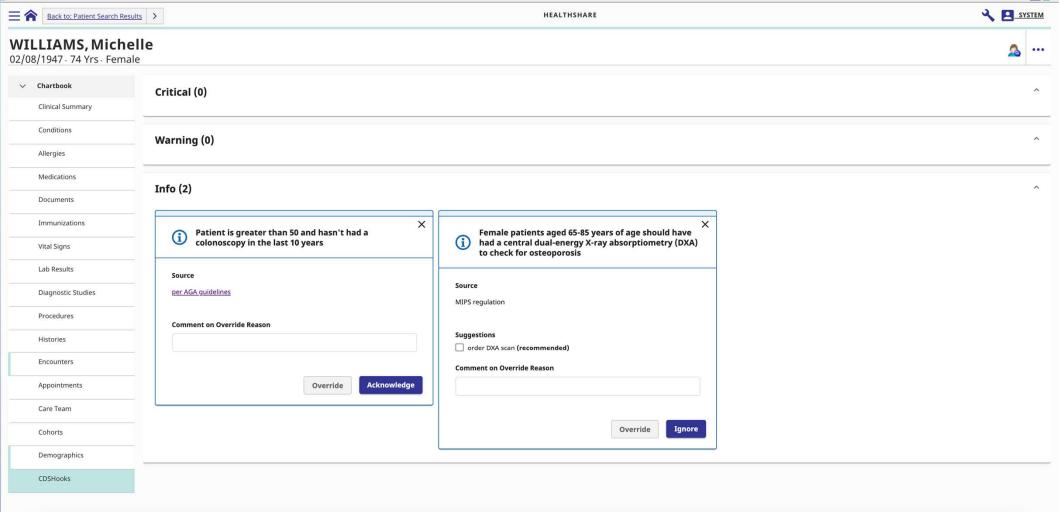
CDS Hooks framework for synchronous alerts





CDS Hooks Card Rendered within CV





Use cases: population analysis / individual intervention



- Burn pit exposure health status
- Patients seen outside of the VA
- Covid long-term follow-up
- Gaps in care / CQMs
- Stats and interventions for diabetes, heart failure, etc.
- Regional resource/disease balance
- Syndromic surveillance
- ED frequent users

- Patient access to data
- Care plan / pathway monitoring
- Referral patient collaboration
- Data for AI/ML
- Prior auth

Time to value / cost of HealthShare



- Storage
- Auditing
- New feeds
- Data feed analysis
- Rapid onboard of all data
- Heading off problems

- Stream compression
 - Stream global-level compression
 - Various HS components
 - Available in HS 2021.2
- Database Compression
 - Database disk-level compression
 - Allows for tiered storage (EBS block st1/sc1)
 - Specific use cases (audit data)
 - Available in HS 2021.2
- Journal Compression & Archive
 - Journal disk-level compression
 - Allows for tiered storage (EBS block st1/sc1 and object s3)
 - Impacts all HS instances
 - Available in HS 2022.x

80-90% compression of streams

Eg. 1TB of streams in gp2 =\$100/mo vs 150GB qp2 =\$15/mo

80-90% compression of audit data Leverage lower-cost storage tiers

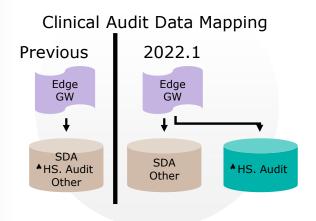
Eg. 30TB of audit in gp2 =\$3000/mo vs 5TB st1 =\$225/mo or sc1 =\$75/mo

80-90% compression of journals Leverage lower-cost storage tiers

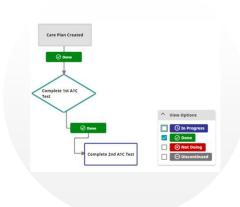
Eg. 1TB of journal in gp2 =\$100/mo vs 10GB gp3 + 140GB st1 =\$7.10/mo

Other InterSystems Healthcare highlights





Audit / Storage Reduction



Care Coordination: Sequenced Plans, Task Management



Clinical Viewer – Data Extensions, Enhanced Graphing and Control

Other InterSystems Healthcare Highlights

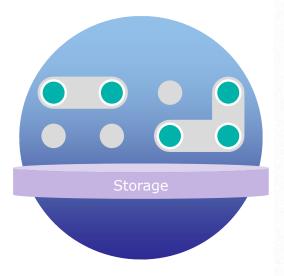




Provider Directory – Finer Forms and Regional Control



FHIR Edge For Payerto-Payer



Package Manager

Other InterSystems Healthcare Highlights





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Data Extensions



Personal Community New UX



Sources

EMRs

Claims

Devices

Economic/Social

Registries/HIEs

Labs / Omics

Life Science

Care Planning and Coordination



Clinical Visualisation



Advanced Rules and Notifications



Health

Connect



Unified Care Record



Data Access and Exchange (CMS)

Provider Directory





Patient Index



Analytics

Thank you



