**An Electronic Information System to Enhance Practice at an Opioid Treatment Program**

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AGENCY BACKGROUND

- **Organized in 1969**
- **7 clinical sites in Brooklyn & Manhattan**
- **Approx 3,000 patients**
- **380 employees**
- **Addiction, primary medical and HIV services**
- **20 years of failed attempts**
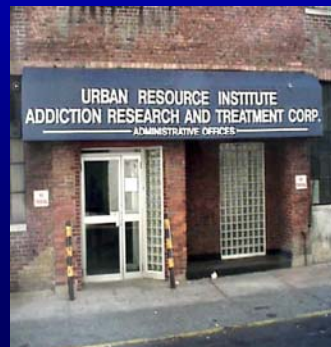
LAWS of EHR IMPLEMENTATION

- First Law
  - Implementation begins when you buy into the idea of moving from paper to an electronic system.

- Second Law
  - The decision to move to an electronic system is nothing less than a decision to irrevocably change the way your organization functions.

LAWS of EHR IMPLEMENTATION

- Third Law
  - There are 3 major components:
    - Electronic Health Record – captures and processes information
    - Processes for Information Exchange
    - Processes for Improved Decision-making

What institutional or agency challenges or barriers exist to the implementation of E.H.R. systems, particularly in the substance abuse treatment field in implementation of E.H.R. systems?

- Vague objectives & inadequate planning
- Costs (planning, training, software, hardware)
- Governance, management, staff resistance to change
- Inadequate Computer Literacy
- Determination of role IT in corporate governance
- Integrating primary medical care and behavioral health

What are institutional or agency benefits from implementing an E.H.R. system in the substance abuse treatment area?

- Improved regulatory compliance
- Return on the Investment
  - Increased Revenue via productivity
  - Decreased Expenses
- Increased coordination between disciplines
- Risk management benefits (fewer errors)
- Improved quality of care
- Staff & patient satisfaction
- Improved opportunities (funding/research)

What can be done to accelerate the use of interoperable electronic health data and development of common data standards in behavioral health treatment settings?

- Financial Support & Incentives
- Clear Regulatory Guidance
- Effective Collaborations
    - Provider-Payor-Regulator-Consumers
    - Medical & Behavioral Healthcare

How do you envision a uniform E.H.R. system for primary care, mental health and substance abuse treatment providers when there are different state reporting requirements?

- Federal standards & incentives for uniform reporting
- Industry standardization of electronic platforms
- Removal of regulatory barriers preventing information sharing
- Enforcement of violations of breeches of confidentiality

Treatment providers:
How have you been able to integrate health information technology into the administrative, clinical, and billing functions of your treatment program?

- Collaborations between providers and local health department, behavioral health and mental health agencies
- Stakeholders buy-in at the outset
- Research grant to evaluate planning and implementation

Treatment providers:
How do you plan to conform to national data standards and criteria for "meaningful use" of certified E.H.R. systems that are stipulated by the ARRA HITECH Act?

- Continued Participation in local collaborations between vendors, providers, and local health departments.
- Continuous staff training and incentives