

# Health information exchanges should be better examined, study finds

December 1 2014

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While policymakers and health care professionals have identified health information exchanges—organizations that facilitate the sharing of patient medical information electronically between different organizations—as a promising solution to fragmented health care delivery in the United States, a RAND Corporation review found that few of the more than 100 such organizations have been evaluated.

The relatively few exchanges that have been examined show some evidence of reducing emergency department costs and usage, but other outcomes are unknown, according to the study published in the Dec. 2 edition of the *Annals of Internal Medicine*.

In the United States, personal [health information](#) is largely held within hospitals, physician practices and pharmacies, and typically cannot be shared routinely outside those individual settings.

"It is pretty well established that the U.S. health care system is highly fragmented," said Robert Rudin, lead author of the study and an associate policy researcher at RAND, a nonprofit research organization. "Lots of studies over the years, including some recent studies, have shown that a typical patient visits doctors in many different practices. Frequently the doctors don't have the patient's previous medical information.

"There is no sign of that problem getting better, and in fact it may get worse if medicine continues to become more specialized."

The frequent handoff of patients from provider to provider within and across health care systems results in delayed patient care and reduces the quality and efficiency of health care. Health information exchanges are an attempt to improve communication among providers, and many health experts believe that better communication will improve care and patient satisfaction while reducing costs.

The federal government has spurred the move to electronic data exchange by providing nearly \$600 million to support statewide health [information exchange](#) organizations. Some states have added additional funding.

"Our review found that, despite this enormous investment, the use of health information exchanges has only been studied in a few emergency departments," Rudin said. "In those studies, it seems to have some beneficial effect. Outside of that, there just aren't enough studies to indicate whether or not they are having the beneficial effects intended."

RAND researchers evaluated the health information exchange literature to investigate the effect of the organizations on health outcomes, cost measures, and patient and provider attitudes toward health information exchanges.

While there are more than 100 health information exchange initiatives that are considered operational, researchers found that only 13 initiatives had been evaluated by examining usage information. Six of those exchanges were in New York state, which is probably the nation's biggest investor in the approach.

"There are likely other [health information exchange](#) organizations in the country that are being used, and some may be having an impact. But, if they exist, they haven't been evaluated," Rudin said. "And without an evaluation, it is difficult to draw conclusions."

The researchers found no evidence showing whether or not health information exchanges are on track as a potential solution to the problem of fragmented [health care](#).

"We really don't know what works and what doesn't when it comes to implementing health information exchanges," said Rudin. "The evidence base is small relative to the size of federal and state investments, and relative to expectations that it will help address issues related to fragmentation of care."

More information is needed so that future investments can be spent the best way possible to improve the electronic flow of clinical information, he said.

Provided by RAND Corporation

Citation: Health information exchanges should be better examined, study finds (2014, December 1) retrieved 17 April 2024 from <https://medicalxpress.com/news/2014-12-health-exchanges.html>

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