

Different Strategies to Meet Information-Sharing Needs

Publicly Supported Community Health Information Exchanges versus Enterprise Health Information Exchanges

New York, New York, March 14, 2016—The US government has invested billions of dollars to encourage the adoption of information technologies to exchange health information and to enable providers to efficiently and effectively share patient information with other providers. Health care providers have multiple options for obtaining and sharing patient information. Community health information exchanges (HIEs) facilitate information sharing for a broad group of providers within a region--and often are supported by public funds. Enterprise HIEs are a more recent development, often created by health systems themselves to connect affiliated hospitals and physicians.

In a new [study](#) in the March issue of *The Milbank Quarterly*, researchers from Indiana University Richard M. Fairbanks School of Public Health and Texas A&M Health Sciences Center investigated why some health systems participate in community HIE and others establish their own. A qualitative analysis, the study identifies factors influencing participation in, and success of, each HIE approach.

Background

Enterprise HIEs are employed by sophisticated health systems controlling a technology network of desired trading partners using a strategic resource. Community HIEs support obtaining patient information from the broadest set of providers, but with more dispersed benefits to all participants, the community, and patients. Although not an “either/or decision,” community and enterprise HIEs do compete for such finite organizational resources as time, skilled staff, and money. Both approaches face the challenges of vendor costs and less-than-interoperable technology. Moreover, both community and enterprise HIEs support aggregating clinical data and following patients across settings.

Findings

Using semi-structured interviews with 40 policymakers, community and enterprise HIE leaders, and health care executives from 19 different organizations, the researchers identified several factors that influenced differing strategies to meet information-sharing needs and various health systems’ choice to participate in either community HIEs or enterprise HIEs.

Health policy may encourage the community exchange of public information, but the business case for enterprise HIEs appears stronger. As a result, the sustainability of a community HIE as a public good may necessitate ongoing public funding and supportive regulation.

“To keep up with changing reimbursement strategies and changing policy initiatives, health care organizations need to be able to share and analyze patient information,” explains lead author Joshua Vest of Indiana University. “Community HIE and enterprise HIE represent two different strategies to meet this

changing environment. This study is the first contrast of how those two strategies can work together or how they can compete. For health care leaders, it is about which of these strategies meets the organization's needs. For public policy makers, it is about which strategy can support broader gains for public health and the health care system."

About *The Milbank Quarterly*

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