



Oak Hill

Since 1893, services
& solutions for people
with disabilities.

Testimony Before the Human Services Committee
Regarding H. B. No. 5354 (Raised)
An Act to Provide Incentives for Hospitals to Adopt Electronic Health Records.

Good morning, Senator Doyle, Representative Walker and members of the Human Services Committee. I am Stan Soby, Vice President for Community Programs at Oak Hill, a non-profit community provider of services to over 550 people of all ages with developmental and other disabilities, located here in Hartford and in over 90 locations in 58 Connecticut towns.

Thank you for the opportunity to speak in support of H. B. No. 5354 (Raised) An Act to Provide Incentives for Hospitals to Adopt Electronic Health Records. I am also here to ask that you be as inclusive as possible in your definition of "professionals who are meaningful electronic health record users." This is not just a hospital or physician's office issue; community providers of services to people with disabilities collect and provide important health information that is utilized in hospital and medical office settings.

Oak Hill has made the commitment to its consumers and their guardians and families in our mission statement to "set the standard" in the delivery of supports and services. The use of electronic health records has become the standard. In fact, three states, Delaware, North Dakota and Montana, have already mandated that all providers statewide use the system we are using today. We also believe an electronic records system is necessary to be able to respond to and survive the movement in the Department of Developmental Services to an attendance-based, fee-for-services payment system.

Oak Hill spent over a year defining its needs and vetting potential vendors. Having selected a vendor, we spent months designing an implementation plan and educating our program staff in the system's use, going live on July 1, 2009. Our outcomes include having better communication and better documentation, which lead to better service, more accurate billing information which improves our reimbursement capture and 360° accountability within the agency. Our plans include providing guardians with user accounts to access their loved ones records directly.

Community providers also need to be included in the definition of "health care facilities" referenced in Section 2(b) of H.B. 5354. Thanks to the assistance of Congressman John Larson's office, Oak Hill and our vendor have been included in eHealthCT's Health Information Exchange pilot. We want our consumers to be able to fully benefit from our use of an electronic health record system by having vital health information we collect be readily available electronically in a hospital emergency department or a medical specialist's office. We are responsible for conveying that information about the people we support, which we now do by printing out information from our system.

This has not been an inexpensive undertaking. Our vendor uses a subscription model and houses the data, so we pay an annual fee for the service. We provided two hours of introductory training for each of our some 1,000 hourly-paid employees and to our 190 supervisory and clinical employees. While we have a strong information technology infrastructure already in place, we needed to give our employees the means to use the electronic records system efficiently and effectively, adding laptops for locations and upgrading our wireless routers.

While we are a large enough agency that we have been able to cover the cost amortized over a five year period through not refilling two vacant supervisory positions, not many agencies could do the same. Given that funding is available through the federal American Recovery and Reinvestment Act of 2009, we encourage you to take the broadest approach possible and include community providers in your request for funding for incentive and/or reimbursement payments.

Thank you.

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