

Modern Healthcare

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Special Feature » *Maureen McKinney*

Top 25 Clinical Informaticists

How the Top 25 were chosen

Modern Healthcare's Top 25 Clinical Informaticists recognition program recognizes medical professionals who excel at using patient-care data to improve the clinical and financial performance of their healthcare organizations.

Among the titles of these medical professionals are chief medical information or informatics officer, or CMIO; chief health information or informatics officer, or CHIO; director of clinical information or informatics, or DCI; and medical director of information or informatics systems, or MDIS. The program is not limited to those titles.

To select honorees for the second annual listing of the Top 25 Clinical Informaticists, done in partnership with the Association of Medical Directors of Information Systems, the magazine issued a call for nominations on July 11. The nomination deadline was Aug. 19. Readers submitted a total of 38 nominations.

An editorial review board consisting of senior editors at Modern Healthcare reviewed the nominations and judged the candidates on the following three criteria. Whether the nominee:

- Successfully used patient-care data to improve his or her organization's clinical and financial performance.
- Demonstrated a willingness to share expertise with others in the field of clinical informatics.
- Assumed a leadership position in clinical informatics outside of the candidate's own organization or company.

The review board made its final decisions on the Top 25 on Sept. 9 and recipients were notified Sept. 12 and 13. The final list appears in this issue in alphabetical order. Per editorial policy, award sponsors are not involved in the nomination or submission process nor the judging or determination of recipients.

If you have questions, comments or suggestions on the program, contact Editor David Burda at 312-649-5439 or at dburda@modernhealthcare.com. The magazine extends its appreciation and thanks to all of the nominees and to everyone involved who contributed to the success of this year's program. Please read the magazine for details of Modern Healthcare's third annual listing of the Top 25 Clinical Informaticists to be published in 2012.

Cindy Brown



As director of clinical informatics at 599-bed PinnacleHealth in Harrisburg, Pa., Cindy Brown has led a range of projects, including the system's deployment of computerized physician order entry. She used PinnacleHealth's clinical information system to create tools to improve aspiration pneumonia rates in stroke patients, to increase pneumonia vaccination rates among at-risk patients, and to lower rates of catheter-associated urinary tract infections. She also is the project lead for the health system's meaningful-use initiative.

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Special Feature

» Maureen McKinney

A specialty all their own

Annual roster of the Top 25 Clinical Informaticists shows continued growth in their roles, new designation for docs

In late September, the American Medical Informatics Association issued an announcement considered by many to be a watershed moment for the field. For the first time, according to the AMIA, clinical informatics would become a board-certified physician subspecialty—alongside others such as medical toxicology and pediatric anesthesiology—with the first certifications slated for early 2013.

“It is entirely appropriate and timely to certify clinical informatics as a specialized area of training and expertise in an era when more and more clinicians are turning to data-driven, computer-assisted clinical decision support to provide care for their patients,” said Nancy Lorenzi, board chair of the AMIA, in a Sept. 22 news release.

That recognition is a bellwether for clinical informatics, which combines first-hand knowledge of patient care, technological know-how, change management skills and other performance improvement strategies, says Dr. William Bria, chief medical information officer for 20-hospital Shriners Hospitals for Children, Tampa, Fla.

“What’s clear now is that the informatics field has the respect of mainstream medicine,” says Bria, who is also the co-founder and president of the Association of Medical Directors of Information Systems. “My colleagues and I have gone from the lunatic fringe to risk-takers to early adopters, and now the use of IT is considered best practice.”

And now, as clinical informatics is increasingly viewed as a critical element of patient safety and quality, Modern Healthcare is recognizing top performers in its second annual list of Top 25 Clinical Informaticists, a distinction that honors those who successfully employ data-driven improvement strategies and who lead others just starting out in the profession.

Bria is one of 10 honorees to appear on both this year’s and last year’s lists. Others include notable industry leaders such as Dr. Brent James, chief quality officer and vice president of medical research and continuing medical education for Intermountain Healthcare, Salt Lake City, Utah; Dr. Howard Landa, CMIO of 312-bed Alameda County Medical Center, Oakland, Calif.; and Dr. Christopher Longhurst, CMIO at 303-bed Lucile Packard Children’s Hospital at Stanford, Palo Alto, Calif., whose 2010 study demonstrated the first link between computerized physician order entry and a reduction in mortality.

The time is now

“People now understand that it is time or past time for the successful application of health information technology in medicine,” Bria says, adding that the meaningful-use requirements for health information technology, mandated in the federal stimulus law, have put informatics directly on everyone’s radar. “It’s provided a springboard for the medical profession to sit up and take notice.”

The meaningful-use program is also providing significant payouts to some organizations that have a history of making IT a priority. St. Joseph Regional Medical Center, South Bend, Ind. has received roughly \$6 million in incentive payments, says Dr. Devin Zimmerman, CMIO of the 258-bed hospital.

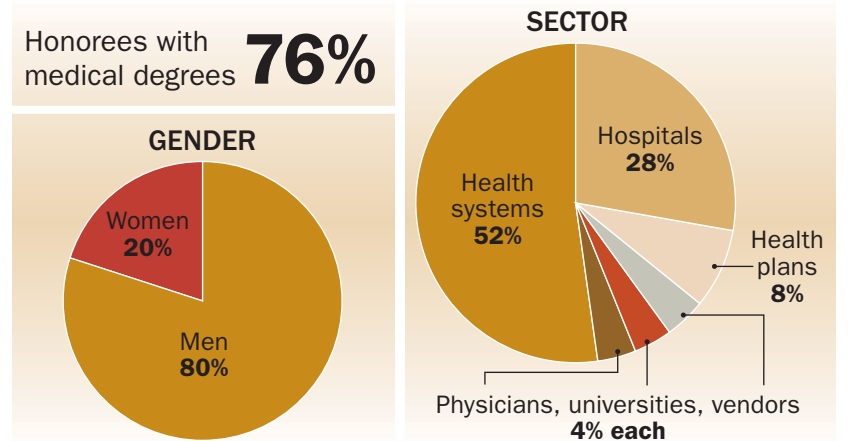
Zimmerman, who made this year’s list of top informaticists, was thrust into the role in 2007, when the organization’s former CMIO left abruptly just 10 months before the hospital was scheduled to go live with its electronic health-record system. Since then, he has led St. Joseph’s implementation of a range of IT systems, including hospitalwide discharge notes and medication bar code scanning.

Zimmerman credits his clinical background with enabling him to act as a bridge between the worlds of IT and clinical care.

PHOTO GALLERY

View a photo gallery of the Top 25 Clinical Informaticists at modernhealthcare.com/photos

THE TOP 25, BY THE NUMBERS



Source: Modern Healthcare

“As a clinical neurologist, I had interfaced with nearly every physician in the hospital,” he says. “They knew who I was and the quality of my work, and so they were more willing to listen to me. They couldn’t accuse me of not understanding the needs of the end user.”

For many of this year’s winners, their accomplishments leverage existing IT infrastructure to address issues such as prevention and care coordination. For instance, Dr. Rod Tarrago, CMIO at Children’s Hospitals and Clinics of Minnesota, a two-hospital system in the Twin Cities, points to the system’s implementation of an online safety checklist in the pediatric intensive-care unit.

The existing paper checklist was often unused, says Tarrago, one of this year’s Top 25. But the electronic version, embedded within the EHR, tracked physician compliance and that data helped the informatics team understand what changes were necessary.

“Informatics is helping us move away from the idea that we’re invincible and that we need to remember everything,” Tarrago says.

Dr. A. James Bender, medical director of health information at Virginia Mason Medical Center, Seattle, who also made this year’s list, says his focus is on using business process improvement strategies such as Lean to reduce waste and make care more efficient. In the hospital’s primary-care clinic, where Bender also is a practicing physician, the informatics team has standardized most processes, including visit preparation.

“We’ve seen a tremendous improvement in efficiency and patient satisfaction, and I’m home for dinner each night,” Bender says.

Preparing for ACOs

Several of this year’s honorees also mentioned how their efforts in clinical analytics and performance improvement have prepared their organizations for new payment delivery models, such as accountable care organizations.

Northwestern Memorial Physicians Group, a large Chicago-based primary-care group, has used its EHR for a number of innovative projects focused on care coordination and prevention, says Dr. Lyle Berkowitz, the group’s medical director of clinical information systems.

Berkowitz and his team built in capabilities for real-time scheduling of follow-up appointments and tests, thereby increasing the likelihood that patients would receive the right care, he says.

Additionally, they developed set clinical pathways for certain conditions and embedded those protocols into the electronic record. For example, if a patient presents with blood in his urine, a thyroid nodule or renal insufficiency, the EHR automatically provides the physician with a checklist detailing the evidence-based steps of care.

“Doctors may only see a patient with that particular condition once or twice a year so they can pull up a pathway with everything they need to

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—Dr. William Bria,
Shriners Hospitals for Children

know,” Berkowitz says.

And after the physician begins the pathway process, a care-coordination team follows up with the patient to ensure compliance, he adds.

“The team of referral coordinators is relatively inexpensive, and because of the increased efficiency, we pay for ourselves from a cost perspective,”

Berkowitz says. “As we move toward ACOs, this is exactly the kind of thing that will help us succeed.”

Changing healthcare delivery models is also on the minds of health plan leaders, according to Susan Dezavelle, director of medical informatics for Presbyterian Health Plan, the business arm of Presbyterian Healthcare Services, a seven-hospital integrated delivery system based in Albuquerque.

Dr. Colin Banas

Dr. Colin Banas, 35, is chief medical information officer at 732-bed Virginia Commonwealth University Health System, Richmond. In his current role, and in his previous role as assistant CMIO, Banas, who also is a hospitalist, helped to create a program that allows physicians to use smartphones to improve charge capture. He also led the rollout of the health system’s electronic health record in its 60 outpatient clinics, and spearheaded a medication reconciliation project that raised levels of discharge medication reconciliation to 90%.



Dr. Richard Bankowitz

As chief medical officer of Premier health alliance, Dr. Richard Bankowitz, 54, leads informatics efforts for the Charlotte, N.C.-based group-purchasing and quality-improvement organization. Bankowitz develops measures and refines methodology for the organization’s Quest initiative, a collaborative performance-improvement program with more than 250 hospitals. He also serves as a leader on the Hospital Quality Incentive Demonstration Project, a pay-for-performance initiative run jointly by Premier and the CMS.



Dr. Peter Basch

Dr. Peter Basch, 59, is medical director, ambulatory EHR and health IT policy, for nine-hospital MedStar Health, Columbia, Md. Basch, a practicing internist, led MedStar’s implementation of its electronic health record in more than 170 physician practices and developed a systemwide dashboard that uses clinical analytics to measure and improve the quality of diabetes care. Basch also is a senior fellow for health IT policy with the Center for American Progress.



Dr. A. James Bender

Now medical director of health information for 247-bed Virginia Mason Medical Center, Seattle, Dr. A. James Bender, 63, began his work in informatics in 2004, when he served as physician lead for the hospital’s implementation of computerized physician order entry. Since then, Bender, a practicing primary-care physician, has rolled out electronic medication reconciliation and is using informatics and Lean process improvements to streamline the organization’s primary-care clinic.



PHP is currently working with four local primary-care groups—including one within its own health system—on a project that ties payment to performance on selected utilization and quality measures, such as immunization rates and use of advanced radiology.

“With ACOs, we’re looking at ways to provide the very best care and informatics plays a huge part in that,” Dezavelle says.

Clinical informaticists can also tailor decision-support tools to ease workflow and avoid alert fatigue, says Dr. Matthew Berger, director of medical services, Einstein Division, of 1,490-bed Montefiore Medical Center, New York. Berger’s team has customized the system to prevent wrong-patient orders and they have fine-tuned the pain management workflow to be as specific as possible, he says.

“We want alerts to be smarter and specific to each patient,” Berger says. “We’ve actually seen a 180-degree change from where we started

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—*Dr. William Bria, Shriners Hospitals for Children*

out and now clinicians are demanding more informatics support than we can even keep up with.”

Educating the next group of informaticists is a priority, too. Dr. William Hersh, professor and chairman of the department of medical informatics and clinical epidemiology at Oregon Health & Science University, Portland, leads one of the most well-known informatics education programs in the country. Hersh, also on this year’s list, developed

Dr. Matthew Berger

Dr. Matthew Berger, 55, is director of medical services, Einstein Division, of 1,490-bed Montefiore Medical Center, New York, and technical director of clinical informatics at Emerging Health Information Technology, a Montefiore subsidiary. A practicing internist, Berger has spent the past 15 years working on various IT initiatives including Montefiore’s implementation of computerized physician order entry more than a decade ago, and customization of the hospital’s clinical decision-support system.



Dr. Lyle Berkowitz

Dr. Lyle Berkowitz, 45, is medical director of clinical information systems for Northwestern Memorial Physicians Group, a Chicago-based hospital-owned group that includes more than 100 physicians. At NMPG, Berkowitz, who is also a practicing internist, has led the practice’s implementation of a patient portal and has also spearheaded efforts to leverage existing IT systems for performance improvement. Additionally, Berkowitz is founder and director of the not-for-profit Szollosi Healthcare Innovation Program.



Dr. William Bria

Dr. William Bria is co-founder and president of the Association of Medical Directors of Information Systems. Bria, 60, is also chief medical information officer for Shriners Hospitals for Children, a 20-hospital system headquartered in Tampa, Fla. He is currently leading the system’s efforts to attest to meaningful use in 2012. He also co-edited with AMDIS CEO Richard Rydell the *CMIO Survival Guide*, an instructional handbook for clinical informatics leaders. Bria is also a practicing pulmonary critical-care physician.



Cindy Brown

As director of clinical informatics at 599-bed PinnacleHealth in Harrisburg, Pa., Cindy Brown has led a range of projects, including the system’s deployment of computerized physician order entry. She used PinnacleHealth’s clinical information system to create tools to improve aspiration pneumonia rates in stroke patients, to increase pneumonia vaccination rates among at-risk patients, and to lower rates of catheter-associated urinary tract infections. She also is the project lead for the health system’s meaningful-use initiative.



Dr. Paul Dexter

As chief medical information officer and director of clinical applications for 530-bed Wishard Health Services, Indianapolis, Dr. Paul Dexter has implemented a computerized physician order entry system that has resulted in shorter lengths of stay, lower costs and 80% fewer adverse drug events. Dexter is charged with coordinating the hospital’s clinical decision-support system and has led interventions to lower hospitalization rates among patients with heart failure and inappropriate medication rates among elderly emergency patients.



Susan Dezavelle

Susan Dezavelle, 55, is director of medical informatics for the 400,000-member Presbyterian Health Plan, which serves as the business unit for seven-hospital system Presbyterian Healthcare Services, Albuquerque. Dezavelle, a registered nurse, is leading a multiyear project that works with local primary-care groups to improve care coordination and align payment with better outcomes. Additionally, Dezavelle is working with the Robert Wood Johnson Foundation on its Aligning Forces for Quality initiative.



the 10x10 program, which educated clinicians in biomedical and health informatics.

David Yost, director of performance analytics for 32-hospital Catholic Health Partners, Cincinnati, also makes time for a weekend job as an informatics instructor for associate-level nursing students.

“They’re focused on graduating, but I like to think that a few of them will keep a kernel of what I tell them in their mind as they go forward,” says Yost, also on this year’s list.

And Charlene Webber-Schuss, direc-

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Children’s Hospitals and Clinics of Minnesota

tor of clinical informatics and the co-director of health information technology at 205-bed Community Hospital of the Monterey (Calif.) Peninsula, also takes on an additional role as an informatics educator. Webber-Schuss, another of this year’s honorees, travels to area colleges, speaking to students about burgeoning opportunities in the field.

“I go to tech classes and I talk about healthcare IT and I go to healthcare classes, too,” she says. “I want to let them know that the profession is growing and to keep it in mind as they develop their skills. We need strong clinicians who support and understand technology.” <<

Dr. William Hersh

Dr. William Hersh is professor and chairman of the department of medical informatics and clinical epidemiology in the school of medicine at Oregon Health & Science University. Hersh, 53, leads one of the largest clinical informatics educational programs in the country. In partnership with the American Medical Informatics Association, he developed the 10x10 program, which sought to educate 10,000 healthcare professionals in biomedical and health informatics by 2010.



Dr. Brent James

Dr. Brent James, 60, is chief quality officer and vice president of medical research and continuing medical education at Intermountain Healthcare, Salt Lake City. James also is executive director of Intermountain’s Institute for Health Care Delivery Research. Through a partnership with the Institute for Healthcare Improvement, James has overseen the Advanced Training Program in Health Care Delivery Improvement, a clinical quality-improvement education program completed by more than 1,200 medical leaders.



Dr. Kevin Johnson

Dr. Kevin Johnson is a professor and vice chairman of biomedical informatics at 815-bed Vanderbilt University Medical Center, Nashville. Johnson, 50, is the founding director of RxStar, Vanderbilt’s e-prescribing system, which uses electronic health-record data to provide safety checks and patient-specific alerts. He has received grants from HHS’ Agency for Healthcare Research and Quality for a number of projects examining topics such as the impact of electronic prescribing on medication errors.



Liz Johnson

Liz Johnson, 59, is vice president of applied clinical informatics at Dallas-based Tenet Healthcare Corp. Since joining Tenet in 2002, Johnson has spearheaded the 53-hospital system’s IMPACT (Improving Patient Care through Technology) program, which trains clinical informaticists in technology and evidence-based practices. Under her leadership, Tenet plans to implement EHRs and computerized physician order entry in all of its hospitals by 2014. She also serves on the federal government’s Health IT Standards Committee.



Dr. Howard Landa

Dr. Howard Landa, 54, serves as chief medical information officer of 312-bed Alameda County Medical Center, Oakland, Calif., and as CMIO at Hawaii Permanente Medical Group, Honolulu. In 2009, under Landa’s leadership, Kaiser Permanente’s Hawaii region attained HIMSS Stage 6 implementation—one step from the top of the scale—of its electronic health record system, just two months after rollout. Landa is a practicing pediatric urologist and also is vice chairman of the Association of Medical Directors of Information Systems.



Dr. Christopher Longhurst

Dr. Christopher Longhurst, 36, is a pediatric hospitalist at 303-bed Lucile Packard Children’s Hospital at Stanford, Palo Alto, Calif. In 2010, after serving as a physician lead and medical director of informatics, Longhurst was named chief medical information officer. He oversaw Lucile Packard’s rollout of computerized physician order entry using a dashboard of quality and safety indicators, and in 2010 co-authored the first study demonstrating a link between CPOE use and a reduction in mortality.



Dr. Robert Murphy

As chief medical informatics officer of eight-hospital Memorial Hermann Healthcare System, Houston, Dr. Robert Murphy, 47, has led efforts to implement and enhance clinical decision-support tools, an achievement that the system credits with preventing more than 7,000 medication errors per year. Murphy is an adjunct faculty member at the University of Texas School of Biomedical Informatics, where he teaches a course on clinical decision support. He has also led Memorial Hermann's preparations to meet meaningful-use requirements.



Dr. Brian Patty

Dr. Brian Patty is vice president and chief medical informatics officer of four-hospital HealthEast Care System, St. Paul, Minn. As part of the system's multiyear Quality Journey initiative, Patty, 53, has led the deployment of a number of clinical decision-support tools in areas such as nursing and management of chronic disease. Among his projects, Patty helped to develop a technology-assisted tool used to prevent ventilator-assisted pneumonia that is credited with lowering VAP rates to zero at all of the system's hospitals by 2010.



Dr. Jeff Rose

Dr. Jeff Rose, 58, is vice president of clinical excellence, informatics, at Ascension Health, a 76-hospital Catholic health system based in St. Louis. Since assuming the post in 2004, Rose has led a range of projects focused on clinical decision support, optimized clinician workflow and patient safety. He was also an original member of the Care Collaborative, a partnership that developed and marketed more than 700 evidence-based order sets. Before joining Ascension, Rose was vice president and chief medical officer at Cerner Corp., Kansas City, Mo.



Rebecca Schwietz

Rebecca Schwietz is vice president of clinical performance at Healthfirst, a not-for-profit managed-care organization based in Newark, N.J. Schwietz, 34, was named to the post in 2010. She is charged with overseeing Healthfirst's performance under the CMS' Medicare Advantage star-rating system, which provides revenue bonuses based on quality of care and patient satisfaction. Schwietz also created a quality report for network hospitals that shows quarterly performance on selected quality measures.



Dr. Michael Shrift

Dr. Michael Shrift, 48, is vice president and chief medical information officer at Allina Hospitals & Clinics, a 10-hospital health system based in Minneapolis. Shrift leads Allina's clinical decision-support team, which numbers 40 informaticists, and he is co-leader of Allina's meaningful-use program. He has also led efforts to optimize the system's electronic health record and improve workflow. Shrift is a faculty member of the University of Minnesota's Institute for Health Informatics.



Dr. Rod Tarrago

Dr. Rod Tarrago, 39, is chief medical information officer at Children's Hospitals and Clinics of Minnesota. He has led the system's implementation of nursing documentation and computerized physician order entry. His team also instituted a safety checklist in the system's pediatric intensive-care unit that is embedded within the EHR and tracks clinician compliance. In addition, he created a change management program that used departmental champions, regular meetings and internal communications to ease IT transitions.



Charlene Webber-Schuss

Charlene Webber-Schuss, 49, is the director of clinical informatics and the co-director of health information technology at 205-bed Community Hospital of the Monterey Peninsula (Calif.) Peninsula. A registered nurse, Webber-Schuss has worked at various positions in the hospital for 27 years. In her role as an informaticist, she has led adoption of clinical documentation and computerized physician order entry and is currently working to implement closed-loop medication administration.



David Yost

David Yost, 54, is director of performance analytics for 32-hospital Catholic Health Partners, Cincinnati. He leads the system's analytics team, which provides feedback about clinical, operational and financial performance. The use of analytics is credited with a number of improvements, including drops in mortality and average length of stay, as well as increases in efficiency. Yost is a registered nurse who has nearly two decades of clinical nursing and nursing education experience.



Dr. Devin Zimmerman

Dr. Devin Zimmerman, 51, is chief medical information officer of 258-bed St. Joseph Regional Medical Center, South Bend, Ind. Zimmerman, a practicing neurologist, led the hospital's implementation of an electronic health record, hospitalwide discharge notes, point-of-care medication bar code scanning, and a module that allows real-time surgical anesthesia documentation. Zimmerman also headed the hospital's recent attestation to Stage 1 meaningful-use requirements.

