

BTE's Effects on Partners Healthcare System

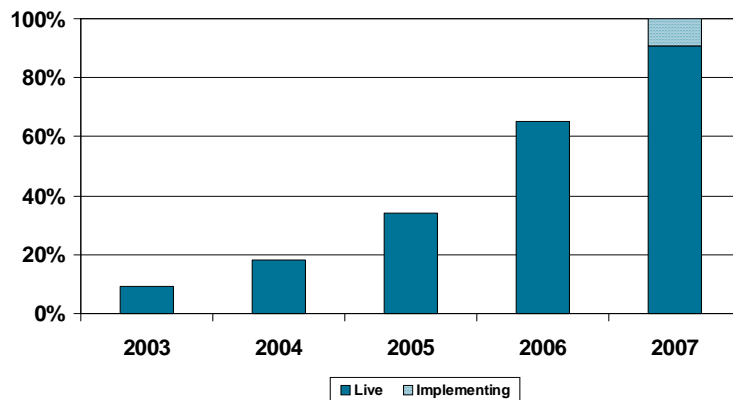
We like to think we invented most worthwhile concepts at Partners Healthcare System; the Massachusetts integrated delivery system founded by Brigham and Women's Hospital and Massachusetts General Hospital in 1994. But the fact is that we have learned a lot from BTE, and it has been a major influence on our efforts to improve our care since its inception.

We were fortunate enough to participate in the design team that developed BTE. From that effort, we learned how a disciplined process can be used to identify what functions are most "Critical to Quality" for various stakeholders, how to prioritize them, and how to get consensus on that prioritization. We have actually used this process subsequently to guide our own internal quality improvement efforts and also with payers to get agreement on the targets for our pay for performance contracts.

In all these settings, the process has yielded similar conclusions to those identified at the outset for BTE – that there are certain systems that have the most potential to improve care by reducing errors of over-use, under-use, and mis-use, and that we should be promoting the use of these systems so that providers can "get it right the first time."

At Partners, we looked carefully at the functions that BTE promotes, and they have emerged as core focuses for our efforts to turn our Network of providers into a truly integrated system. For example, electronic medical record adoption was one of the first emphases of BTE, and we at Partners made that a central incentive target in our pay-for-performance contracts with payers. In March 2007, we moved from carrots to sticks, and made EMR adoption a requirement for membership in our Network for PCPs by the end of 2008 and for specialists by the end of 2009. The graph below shows our progress in EMR adoption.

Community PCP EMR Adoption Trend



Data as of December 31, 2007.

In summary, BTE has identifies themes for improving efficiency, quality, and safety that we have repeatedly found to make sense. Our payers in Massachusetts have agreed, and we have incorporated these focuses into our contracts. The result has been an acceleration of the re-engineering of care. I think we are on a fast track to becoming a high performing healthcare system, and BTE has helped show the way.