## The Value of a Health Information Exchange: Quadruple Aim

Health Information

Exchange

- Less wasted time and repeated telling of my story
- Better quality of care because all of my clinicians know what's been happening with me
- Reduced clinical risk due to a reduction in harmful, uncomfortable diagnostic procedures or errors with allergies
- Increased safety because hospital and oved Potient GPs can all see my medications
- Reduced hospital readmissions because my GP can immediately see what happened in hospital
- All my care providers can see my care plan and input and agree
- I feel more empowered if I can see and input into the care plan

- Ability to access, in near real-time hospital records to support care at home and post discharge care
- Ability to build comprehensive care picture into GP workflow, including "delta" or "what's changed since last time" views
  - Improved care coordination with hospital and community providers including access to care planning tools while mobile in the community
    - Improved pandemic coordination and information dissemination
      - Better population level data and health needs analysis

- Reduced imaging and pathology diagnostics cost
- Reduced patient harm related to availability of medication and alleray information & associated costs
- Reduced length of stay and readmissions due to greater care coordination with receiving services
- Improved ability to identify frequent users of hospital system and target interventions
- Reduced costs from less diagnostic duplication, preventable admissions and delayed discharge

- Improved service planning through joining of hospital and primary care service utilization data
- Improved tections Improved population health outcomes and hospital flow through research and big data analysis
  - Reduced health inequalities
  - Improved community engagement and health literacy
  - Establishes a mechanism to plan care across traditional boundaries of general practice, hospitals, aged care and community services