Privacy Protection and Technology Di usion: The Case of Electronic Medical Records

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Policy Motivation: Di usion is Important

Di usion is important: In US

- ► 44,000-98,000 deaths/year due to medical errors
- \$100 billion estimated cost savings a year

Paper kills. Paper records are an utterly irrational national security risk.

-Former House Speaker Newt Gingrich commenting on his book "Saving Lives and Saving Money"

Newt Gingrich and I have disagreed on many issues, including health care, but I agree with....his book "Saving Lives and Saving Money,"

-Hillary Clinton

Data on Technology Adoption

- Use the HIMSS Dorenfest database (2005 version) which records hospital's software and hardware
- Match with AHA data for obserrdware

Adoption over time



Figure: New Adoptions of EMR by Year

Data on Privacy Laws

- Surveys of state health privacy statutes by Health Privacy Project at Georgetown University (we examine hospitals)
 Pritts et al (2002) (also 1999 and 1996)
- Example: Georgia's state privacy law limits who can look at test results
- Example: Mass. state privacy law limits flow of information on Psych., Drug/Alcohol-Use, HIV status.

Summary of Adoption Results

- ► Find that state privacy laws reduce adoption by 24 percent.
- With no state privacy law, one hospital's adoption increases another's propensity to adopt by 6%. With state privacy law, negligible e ect
- Panel data shows that privacy laws inhibit responsiveness to compatible installed base

Neonatal Outcomes

Why Healthcare IT may a ect neonatal outcomes

- ► High-Risk Patients account for 70 % of neonatal deaths
- ▶ 99.5% of "High-Risk" patients give birth in hospitals
- Wide medical literature: Reliable documentation and accurate monitoring by Maternal-Fetal Medicine department within hospitals is essential for successful outcomes.
 - Documentation of Blood Pressure/Testing: Pre-Eclampsia, Gestational Diabetes (Walker (2000))
 - Regular ultrasound allows management of
 - Placental Abruption, Vasa Previa, Placenta Previa, Cord Complications (Chou et al 2000), (Oyelese et al 1999)
 - Interuterine-Growth Restriction (Ott 2002)
 - Twin-Twin Syndrome (Quintero et al 2001)

Summary of Results

- Adoption of healthcare IT by an additional hospital in a county reduces infant mortality in that county by between 5 and 18 deaths per 100,000 live births.
- Gains for African-Americans are double those for Whites.
- Rough cost-e ectiveness calculations suggest that healthcare IT is associated with a cost of \$450,140 per infant saved.

Conclusion

- Contribution: Empirical study documenting how privacy protection is inhibiting network benefits and di usion of Electronic Medical Records
- Contribution: Health IT Policy
 - There are many reasons that privacy laws may be a good thing
 - However, it is important to confront trade-o s between swift di usion and protecting patient privacy
- Broader applicability to other interactive IT applications