

# **HealthInfoNet and Clinical Data Capture Update – LD1818 Workgroup Presentation**

August 9, 2012

# HealthInfoNet

- HealthInfoNet operates **Maine's designated statewide health information exchange (HIE)**, a secure, standardized electronic system where providers can share patient health information for treatment purposes
- The **Statewide Regional Extension Center**
  - Supporting 1,000 and primary care providers and 22 Rural and Critical Access Hospitals statewide in:
    - Accelerating electronic health record adoption
    - Education
    - Participation in HIE and other Statewide health IT activities
- Key partner in the **Bangor Beacon Community**
  - HIE support for care transitions, coordination, and population health



# What is HealthInfoNet?

- **Maine-based:** The Board of Directors are active and prominent in the Maine medical community and represent a variety of organizations and interests
- **Independent:** HealthInfoNet is independent and is not owned by insurance companies, health care organizations, associations, employers or government
- **Nonprofit:** HealthInfoNet is a private nonprofit organization. It is funded by many sources including charitable foundations, Maine health care providers, and state and federal government
- **Multi-stakeholder:** Involves Consumers, Providers, Payers, Business and Government

# How does it work?

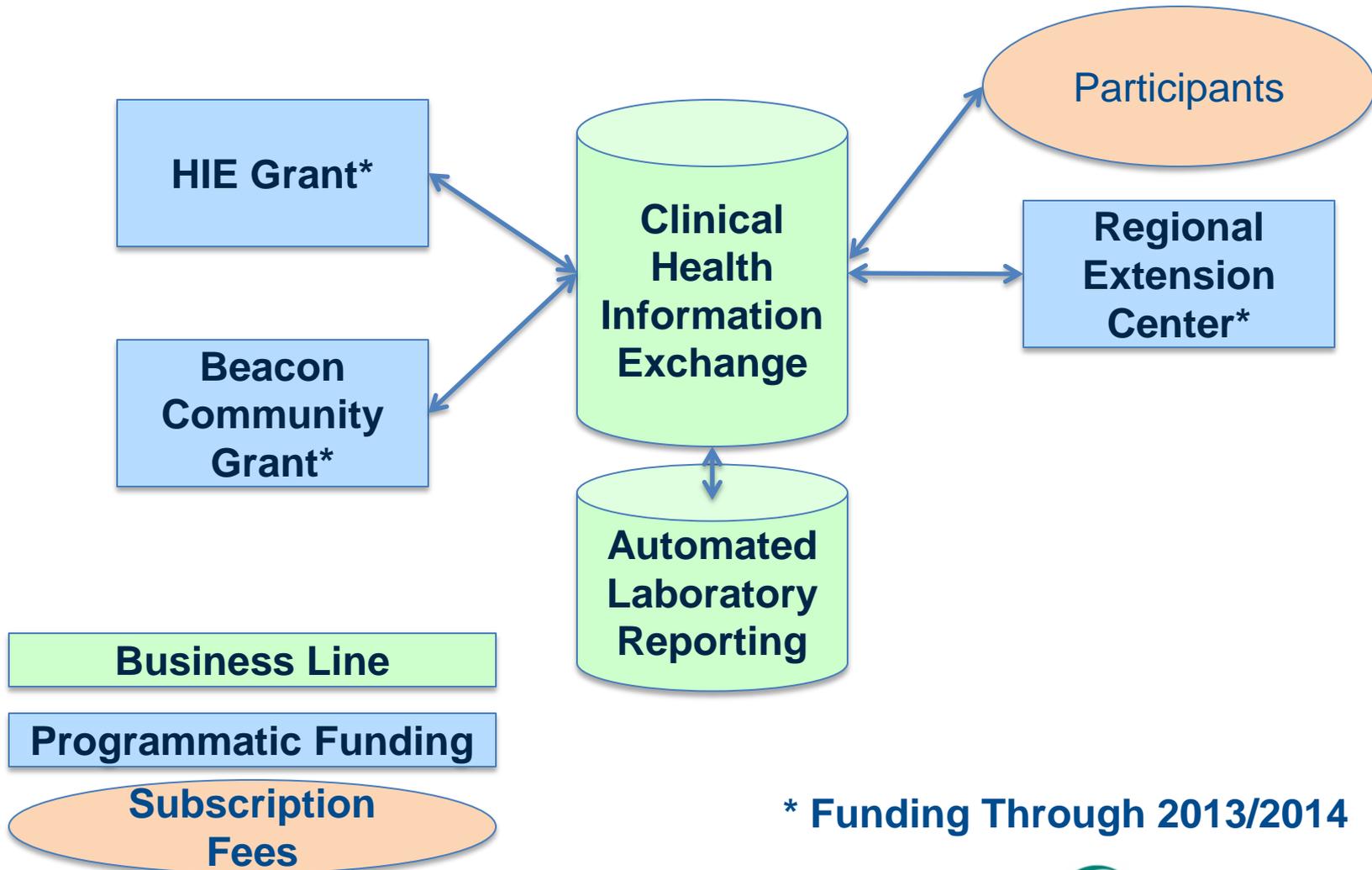
- HealthInfoNet's system combines information from separate health care sites to create a **single electronic patient health record**
- Patient health information is **automatically uploaded** from a provider's electronic medical record system
- The information is **standardized and aggregated** across care sites
- Clinicians can seamlessly access their patient's information in HealthInfoNet **from within their EMR**
- HealthInfoNet **automates reporting** of certain illnesses and conditions like Lyme disease or food poisoning, to public health experts at the Maine CDC

# HealthInfoNet's HIE Statistics

## As of August 2012

- 1,002,000 individuals (78% of ME population) have a HealthInfoNet record
  - 80,624 individuals have primary addresses outside of Maine
  - 9,565 individuals (less than 1%) have opted out
- 5,169 Maine clinicians and care staff can access the system
- Impact of provider organizations participating
  - 25 of Maine's 39 hospitals connected – 34 under contract (All by 2013)
  - 5 FQHCs under contract as of December 2011
  - Over 180 Ambulatory practices connected (1,000 providers under contract through REC)
- Support provider reporting requirements to Maine CDC (labs and immunizations)

# Current HIN Operations



\* Funding Through 2013/2014

# Phase I Business Line Descriptions

**Clinical Health Information Exchange** - The existing exchange operation supporting treatment between hospitals and medical offices

**Direct** - Secure messaging to support “push-based” exchange between trusted sources

**VNA** - Statewide image repository for image archiving & shared treatment support

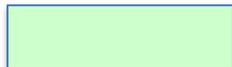
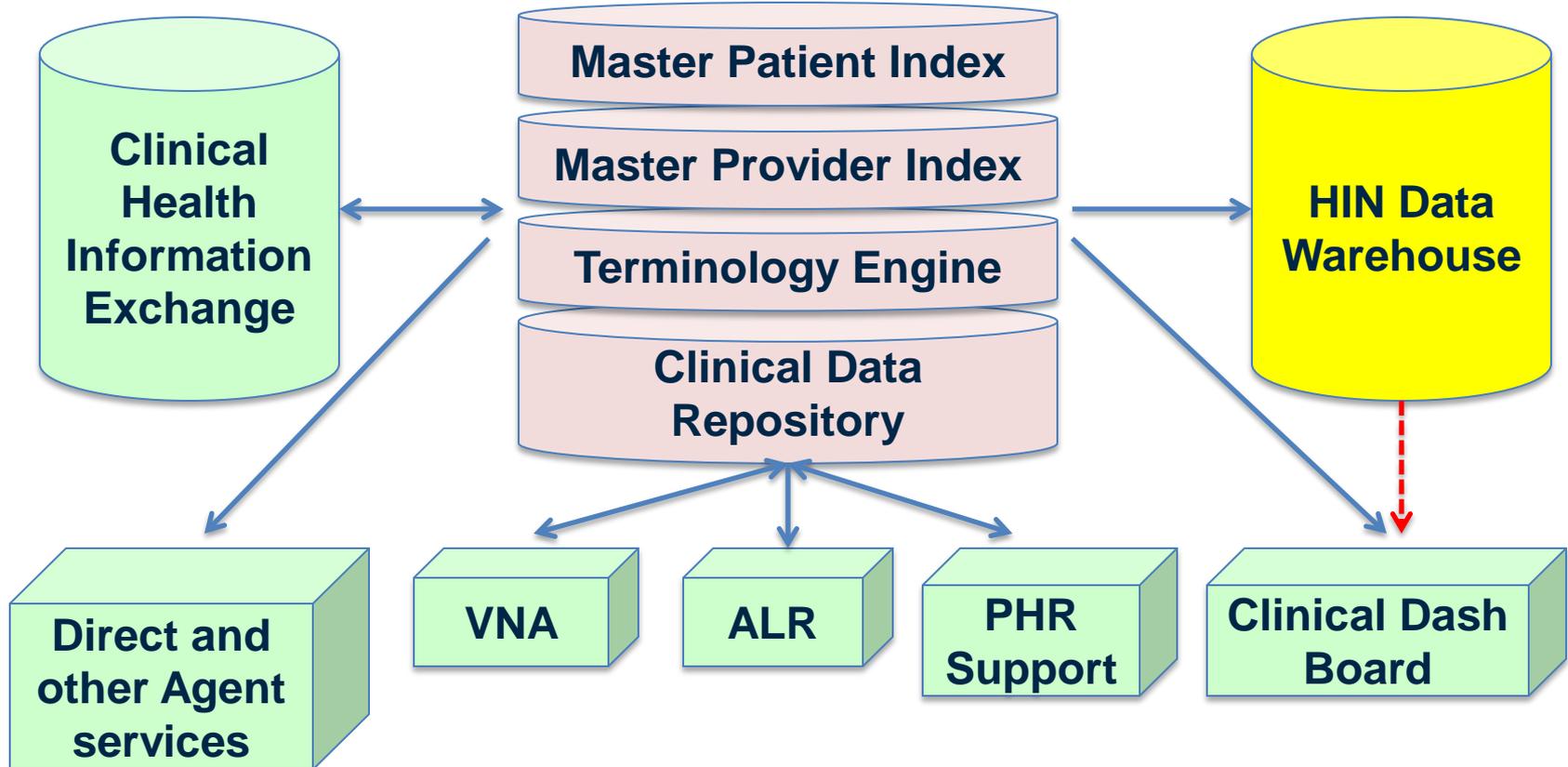
**PHR** - Personal Health Record

**Clinical Dash Board** - Real time monitoring and notification for defined areas of treatment management like readmission within 30 days or visit to the emergency department

**ALR** - Automated laboratory result reporting to Maine CDC

# HIN Expanded Operation- Phase I

## HIN Core Data Sets

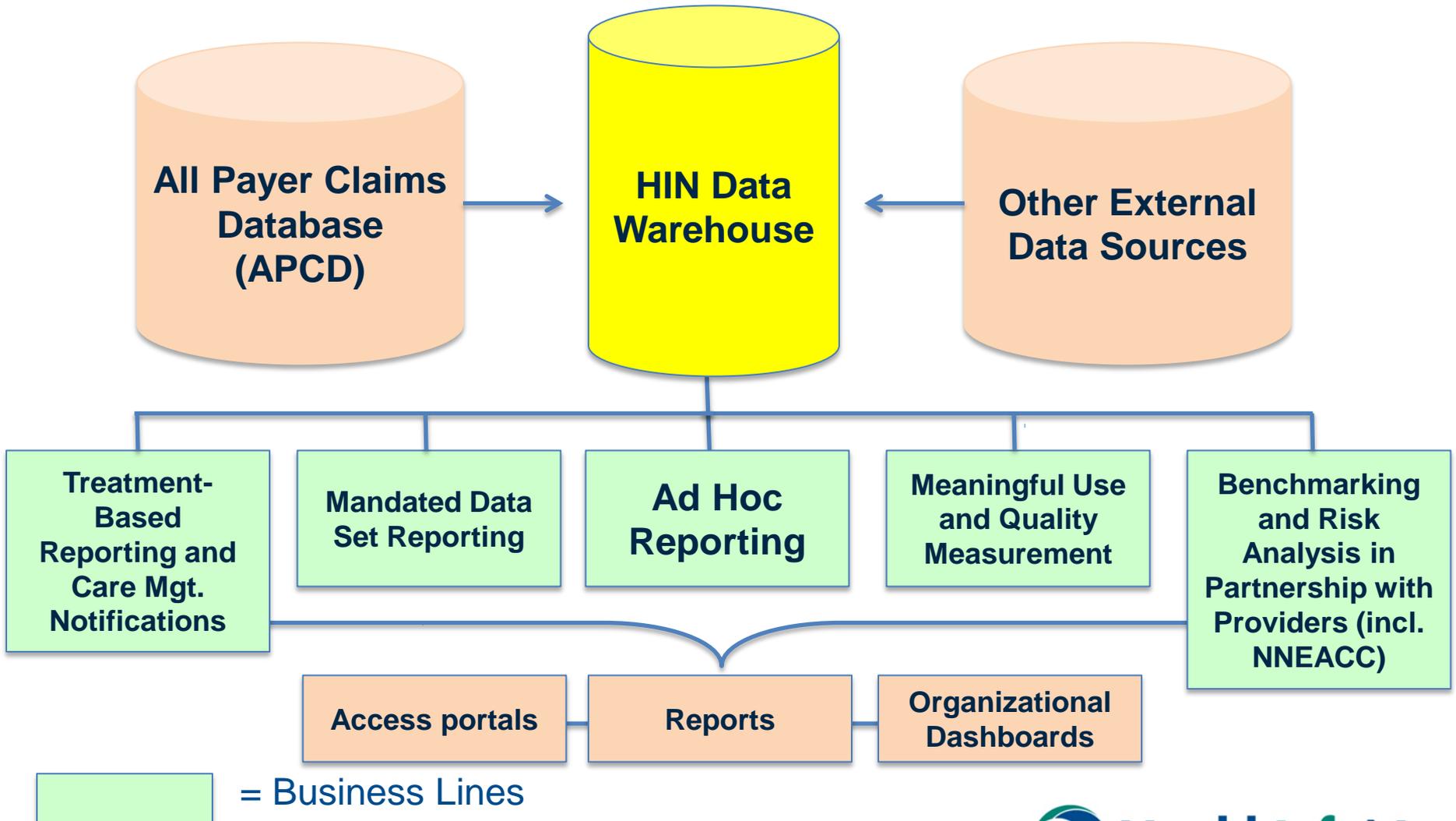


= Business Lines

# HIN Integrated Data Analysis/Reporting Update

- Through a combination of a Maine Health Access Foundation Grant and the Beacon Community Grant, HIN is working to:
  - Stand up a Data Warehouse to allow for the use of the HIE Data in analysis/reporting and data support for participating organizations
    - Reporting capabilities being sought include:
      - Provider-level: Clinical Decision Support and Chronic Disease Management
      - Organization-level: Alerts and notifications for readmissions, Org-level dashboards etc.
      - System-level: Community wide benchmarking and analysis
  - Choose vendor(s) to both create DW and link with the MHDO All-Payer All-Claims Database (vendor choice finalized by August 31<sup>st</sup>)
  - Formed a Technical Steering Committee to support scoping of warehouse activity
  - In fall of 2012 HIN will work with LD 1818 workgroup to develop policies for data release and use (using the MHDO rules and HIN participation agreement as the foundation)
  - The goal is to have the data warehouse and initial linkage activity completed by end of Q4 2012

# HIN Expanded Operation- Phase II (2012/2013)



# State Mandated Data Set Filing Requirement

- Hospital inpatient, outpatient and ER data must be filed no later than 90 days following the calendar quarter in which the discharge or service occurred
- HealthInfoNet receives the data real time and could turn around the required data within 30 days of receipt

# State and Federal Quality Reporting

- Meaningful Use:
  - Stages 1, 2 & 3
- Centers for Medicare and Medicaid
  - PQRS, eRX, etc.
- HRSA and Others
  - FQHCs, Rural Health Centers, etc.
- NQF/NCQA
- Health Insurers
  - HEDIS type etc.

# Strategic Business Model Summary

- HIE alone is not sustainable
- The data is where the “value” is
  - HIN’s aggregation of PHI across sites brings valuable opportunities for health system supports
- HIN is proposing to:
  - Support its participants by pursuing data driven business solutions that bring measurable value without compromising HIN’s core mission and commitment to **CONSUMERS** and **STAKEHOLDERS**
  - Be agile and responsive to opportunities presented by the changing health care environment
  - Leverage its position as a unique **STATEWIDE Health Data Resource**

# THANK YOU!

