Health Information Exchange
Making it All Work

Montana HIMSS 5th Annual Conference and Trade Show

May 11, 2016
Who is UHIN?

- Community-based non-profit in business for 20+ years
- Mission: Positively impacting healthcare through reduced costs, improved quality, and better results by fostering data-driven decisions
- Healthcare Clearinghouse - UTRANSEND
- Clinical Health Information Exchange - cHIE
- Date Repository & Analytics - CareAchieve
- Standards Development Organization
UTAH’s HIE-the cHIE

- State-designated Health Information Exchange
- Secure network for healthcare professionals to exchange information about shared patients
- Includes information from clinics, hospitals, LTPAC and laboratories throughout Utah and neighboring states
- Connections for state-required reporting (Utah Cancer Registry, Utah Statewide Immunization Information System (USIIS), Syndromic Surveillance, Electronic Lab Reporting)
- eHealth Exchange member (Sequoia Project) to facilitate Meaningful Use Transition of Care documents
- DirectTrust accredited
Tools Supplied by the cHIE

Clinical Portal

- 30,000,000+ clinical records
- 1,941,128 patients with data

Information available in customizable patient summary view includes:

- Demographic data
- Laboratory values/results
- Vital signs
- POLSTs
- Encounters
- Problems
- Medications
- Allergies
- Immunizations
- Procedures

Variable Connection Methods

- Push of data through VPN, SFTP, Direct
- Query of federated data
- Routing of Transition of Care Documents
Tools Supplied by the cHIE

cHIE Alerts

- Timely electronic notifications when patients are admitted to or discharged from a hospital or emergency department

- Providers and case managers choose:
  - Which patients to receive Alerts for
  - When and how often to receive Alerts

- Supports timely intervention to reduce readmissions and complications
  - Meet patients in the emergency department
  - Follow up for chronic care
  - Customize Alert lists by use case (asthma, post-natal, behavioral health)
Patient-Centered Data Home

Exchange enabling providers using Arizona Health-e Connection, Quality Health Network (CO) and the Clinical Health Information Exchange (UT) to receive electronic notifications and patient summaries when their patients have an encounter at a hospital in one of the other HIEs’ network.
cHIE Direct

- Secure email system built to national standards
- Users can exchange summary of care documents for transitions through encrypted email
  - Security certificates authenticate the sender and receiver
- Great tool to support administrative exchange
  - Used to send electronic claims attachments to expedite claims processing
  - Used to preauthorize long-term care admissions with Medicaid
- Used to transmit WIC Formula and Food Authorization Forms
- Used to coordinate care between the VA and local hospitals

~7,700 messages exchanged monthly
655 providers listed in directory
Tools Supplied by the cHIE

Coordination of Benefits Reports

- Uses enrollment files from APCD
- Helps payers identify members with other coverage - providing more timely, accurate payments
- Allows Medicaid to identify and/or recover payments from commercial payers
- Future resource for providers to determine coverage information
Analytic Services

- Identify high-risk patients
- Monitor health indicators for patient cohorts and know when to intervene
- Increase outreach to those past due for preventive/chronic care services
- Understand the relationship between disease severity and demographic factors
- Establish care management relationships for healthier patients
- Greater necessary visit volume
Tools Supplied by the cHIE

CareAchieve Analytics Platform

- Standardizes patient data from different sources by matching proprietary terminology to SNOMED, LOINC and ICD-10 codes
- Uses Natural Language Processing Software to extract data from notes
- Customized reports, graphs and dashboards
- Risk reports to ensure correct risk assignment and accurate capitated payments
Hot Spotting
Readmission Reports

- **Messages**: 18245
- **Patients**: 13977

**Monthly Admissions**

- Jan 2013: 2500
- Feb 2013: 3000
- Mar 2013: 2500
- Apr 2013: 2000
- May 2013: 1500
- Jun 2013: 2000
- Jul 2013: 2500
- Aug 2013: 3000
- Sep 2013: 2500
- Oct 2013: 2000
- Nov 2013: 1500
- Dec 2013: 2000

**Admissions By Age**

- Age Group: 0-14, 15-29, 30-44, 45-59, 60-74, 75+
- Admissions Count:
  - 0-14: 1000
  - 30-44: 3000
  - 45-59: 2000
  - 60-74: 1500
  - 75+: 2000

**Main Reasons**

- Abdominal Pain
- Back Pain
- Bleeding
- Breath
- Chest Pain
- Cough
- Days
- Nausea
- Osteoarthritis
- Primary Problem
- PX
- Region
- Shortness of Breath
- Sore
- Swelling
- Throat
- Unilateral
- Unspecified
- Vomiting
- Head Injury
- Knee Laceration
- Headache
- Induction
The cHIE’s Success and Value

- Single source for community-wide clinical data sharing
- Single source for general medical/pharmacy data
- Helps clinicians and case managers perform care coordination
- Provides essential services to make the transformation to a patient centered healthcare system
- Provides notifications of admissions to the hospital and emergency department for follow-up care
- Supports Meaningful Use, MACRA, value-based reimbursement and population health
- Gathers and pushes relevant data to providers
The cHIE’s Success and Value

Examples of Success

- Asthma follow-up
- High Risk Behavioral care coordination
- Optimized work flow
- Reduced unnecessary hospital visits via alert tracking
Challenges

- Provider disruption of workflow
- EHR interfaces take time and can be costly to the practice
- Data is not standard
- Lack of funding for non-eligible providers
- Reticence about change
Lessons Learned

- Mitigate costs through connection grants
- Have all stakeholders at the table for governance
- Partner with the Department of Health
- Educate providers on value
  - Train staff
  - Offer on-going support
Questions

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