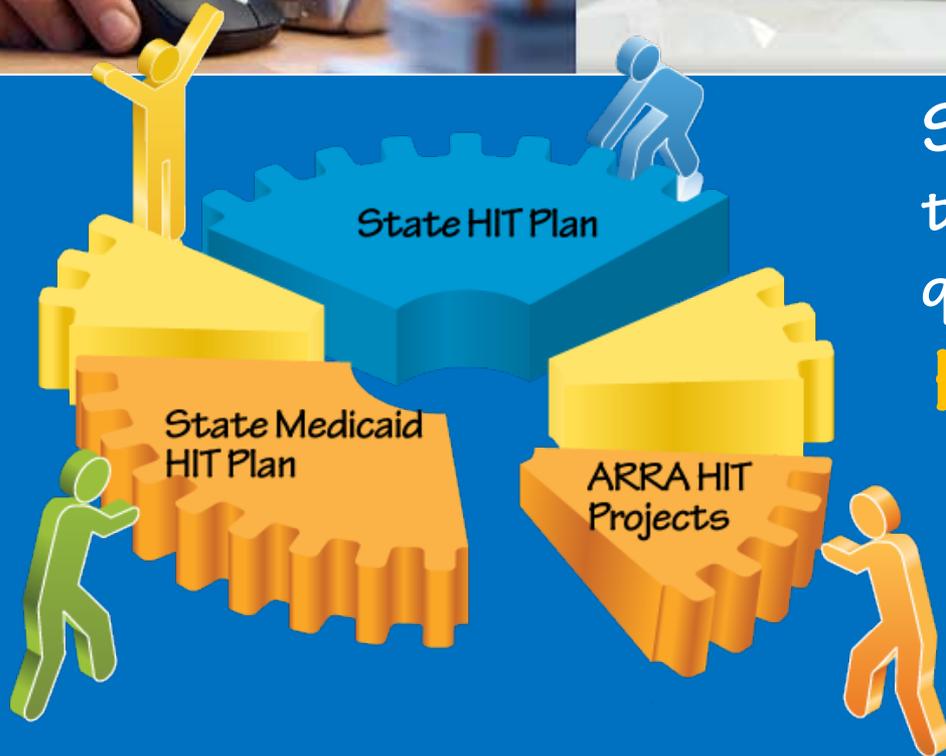




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to reduce health care costs & improve  
quality of care

## HIT and HIE in Alaska





# Health Information Technology

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## Acronym Definitions

### HIT – Health Information Technology

tools and processes for data gathering and comprehensive management of health information

### HIE – Health Information Exchange

electronic movement of health-related data among consumers, providers and organizations according to agreed standards and protocols



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## Acronym Definitions

### **EMR – Electronic Medical Record**

An electronic record of health-related information on an individual that can be created, gathered, managed, and consulted by authorized clinicians and staff within one health care organization.

### **EHR – Electronic Health Record**

An electronic record of health-related information on an individual that conforms to nationally recognized interoperability standards and that can be created, managed and consulted by authorized clinicians and staff across more than one health care organization.



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## HIT / HIE Change Drivers

- Alaska's healthcare providers are investing in EHR technology (\$ 100M +)
- Alaska's healthcare providers are aligned in support of statewide HIE to securely exchange records between providers for safe and timely care
- ARRA/HITECH Act and meaningful use incentives
- Emerging technologies solve speed and privacy issues



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## DHSS ARRA/HITECH Efforts

- DHSS Participating-in or Implementing:
  - EHR Incentive Program
  - CHIPRA Quality Initiative
  - Pacific Northwest Health Policy Consortium
  - APHSA Multi-State HIT Collaborative
  - State Health Information Exchange Cooperative Agreement program
- Other Opportunities
  - HITECH Grant/Loan Program



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## Provider EHR Incentive Payments

- For Medicaid: Potentially as high as \$ 63,750 over 6 yrs
- For Medicare: Potentially as high as \$ 48,000
- Incentive Requirements
  - Be an “*eligible*” professional (EP)
  - Use “*certified*” EHR technology
  - Meet the “*meaningful use*” criteria in the employment of the certified EHR technology



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## Medicare Eligible Providers

### • Medicare Eligible Professionals

- Physician (MD , DO)
- Dental surgeons/doctors (DDS, DMD)
- Podiatrists
- Optometrists
- Chiropractors

### • Non-Hospital Based

### • Hospital

- Hospitals currently participating in Medicare, including acute care and critical access hospitals

### • Not eligible

- Psychiatric, rehabilitation, long-term care, children's and cancer hospitals
- Behavioral health professionals (including MDs)
- Nurses



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## Medicaid Eligible Providers

- ◉ **Medicaid Eligible Professionals**
  - ◉ Physician (MD, DO)
  - ◉ Dentist
  - ◉ Certified nurse mid-wife
  - ◉ Nurse practitioner, and
  - ◉ Physician assistant if practicing in a rural health clinic or a Federally Qualified Health Center led by a physician assistant
- ◉ **Non-Hospital Based**
- ◉ **Hospitals: Acute care and children's hospitals meeting certain Medicaid patient volumes**
- ◉ **Not eligible**
  - ◉ Behavioral health hospitals and professionals (including MDs)
  - ◉ Nurses
  - ◉ Lab techs
  - ◉ Chiropractors



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## Meaningful Use Goals

- Provide access to comprehensive patient health data for patient's healthcare team.
- Use evidence-based order sets and computerized provider order entry (CPOE).
- Apply clinical decision support at the point of care.
- Generate lists of patients who need care and use them to reach out to those patients.
- Report information for quality improvement and public reporting.
- Provide patients with data to enable them to make informed healthcare decisions.
- Communicate with public health agencies
- Ensure privacy and transparency of data shared



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## Staged Implementation of Electronic Health Records and Health Information Exchange

### 1996-2005 PRECURSOR

- Telehealth Advisory Council
- Telemedicine Projects
- Early Broadband Work

### 2005-2009 PLANNING

- Alaska RHIO
- AHRQ/ONC – Security and Privacy Collaborative
- Community Workgroups
- Statewide Business Plan

### 2010-2012 STAGE 1

- Increased EHR Adoption
- E-Prescribing
- Lab Results
- Continuity of Care Document (demographics, eligibility, problem list)

### 2013-2014 STAGE 2

- Personal Health Record
- Health Alerts
- National Health Information Network Connection
- Public Health Reporting
- Quality Reporting

### 2015-2016 STAGE 3

- Comprehensive Patient Data
- Real-time Public Health Surveillance



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## Meaningful Use Timeline

First Payment year	Payment Year				
	2011	2012	2013	2014	2015
2011	Stage 1	Stage 1	Stage 2	Stage 2	TBD
2012		Stage 1	Stage 1	Stage 2	TBD
2013			Stage 1	Stage 1	TBD
2014				Stage 1	TBD



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## DHSS EHR Incentive Role

- Verify eligibility of and disburse provider payments
- Verify provider eligibility and identity and collect program data
- Collect quality measures from providers
- Fight fraud and abuse; e.g., ensure no payment duplication between Medicare and Medicaid programs
- Recoup monies from overpayments or erroneous payments
- Establish a provider appeals process
- Report estimated and actual expenditures for the program using the Medicaid Budget and Expenditure System

# Health Information Technology

## State HIT Plan

- Privacy & Security Plan
- Intrastate Activities
- Interstate Activities
- Privacy & Security Plan

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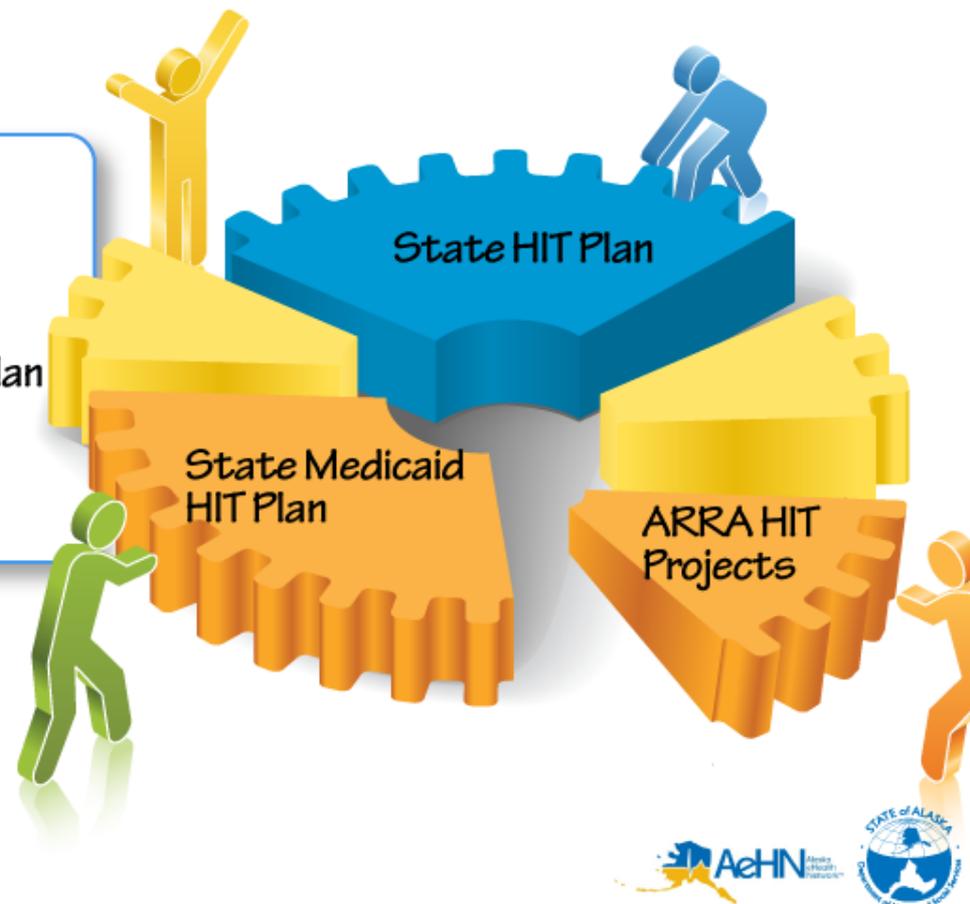
*to reduce health care costs & improve the quality of care*

## State Medicaid HIT Plan

- Current Medicaid HIT Landscape
- Future Medicaid HIT Landscape
- EHR Incentive Implementation Plan
- EHR Incentive Audit Strategy
- HIT Roadmap

## ARRA HIT Projects

- Broadband Mapping
- Broadband Infrastructure
- CHIPRA Quality Initiative
- Regional Extension Center





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## State Medicaid HIT Plan (SMHP)

- Vision for health IT in Alaska Medicaid
- Defines how Alaska will determine and verify provider eligibility for EHR incentives
- Defines how EHR incentive payments will be made
- Defines how Meaningful Use will be reported and verified
- Defines how state controlled health data (MMIS, immunization registry, etc) is linked on the state network and with the HIE

Survey @ <http://www.hss.state.ak.us/hit/>



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## Health Information Exchange

- SB133 required HSS Commissioner to implement an HIE with an advisory board
- ARRA required Governor to name an SDE and a HIT Coordinator
- State Department of Health and Social Services (DHSS) is the State Designated Entity
- DHSS has contracted AeHN to procure and manage the HIE



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## AeHN Mission

To improve the safety, cost effectiveness, and quality of healthcare in Alaska through widespread secure, confidential electronic clinical information systems including promotion of electronic health records and facilitation of health information exchange.

## Vision

A connected Alaska health care delivery system

## Geographic Service Area

State of Alaska



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## AeHN Goals & Services

### • HIE Core Services

- Master Patient Index
- Record Locator Service
- Messaging
- Audit
- Personal Health Record

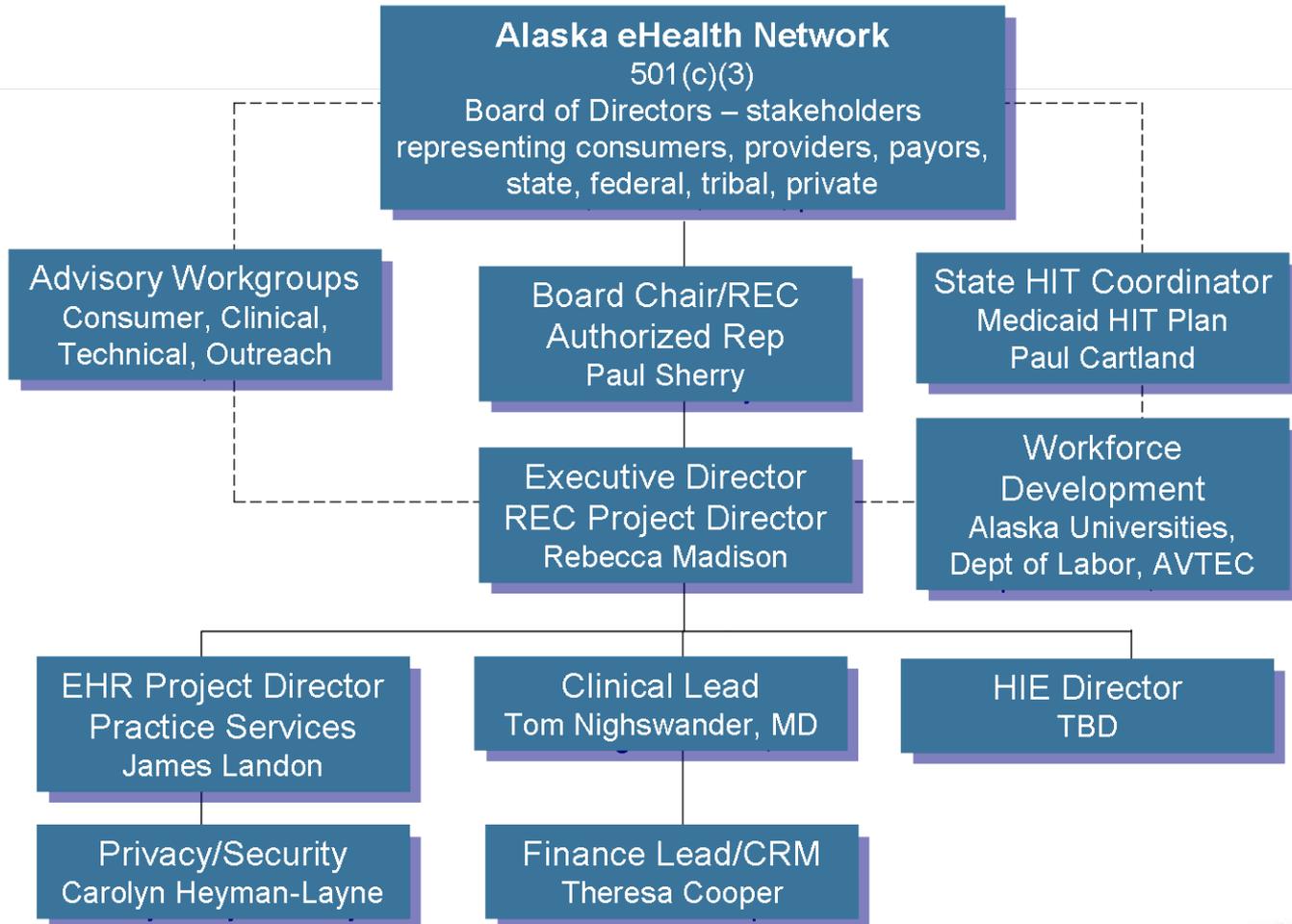
### • EHR Practice Services

- Readiness Assessment & Selection
- Work Flow Design/Redesign
- Implementation Support
- Outreach/Education
- IT Support



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## AeHN Funding

### • Current Funds through 2013

- \$3.6M, ONC Regional Extension Center – EHR assistance for providers
- \$3M, HIE for State of Alaska – provides interoperability for providers
- \$10M, FCC Rural Health Care Pilot – provides network connectivity to rural and urban non-profits

### • Future Funding potential

- User fee-based HIE model
- Federal and State support models



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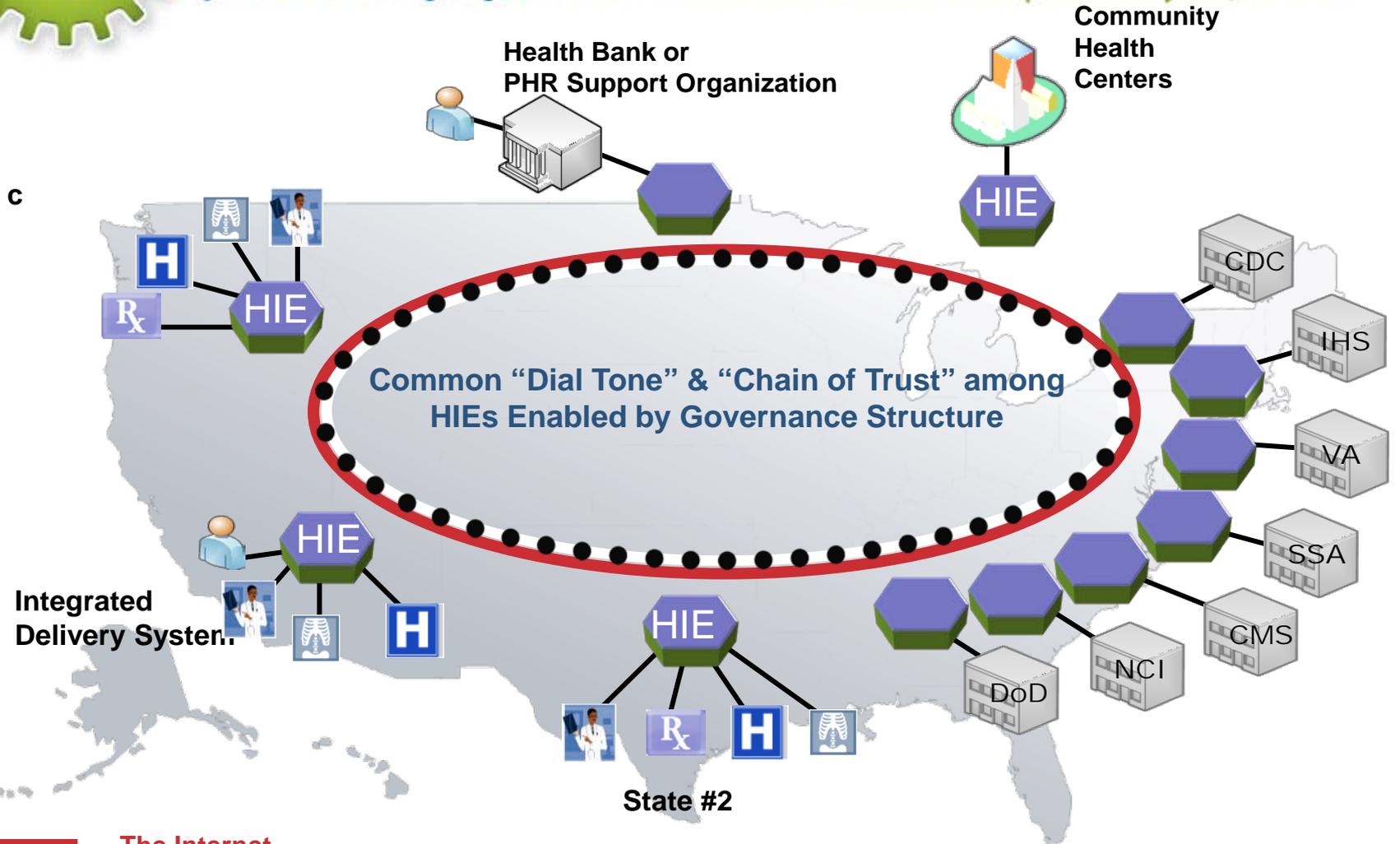
## National Health Information Network (NHIN)

- Set of policies and standards being developed at the national level to enable secure meaningful exchange of health data
- Open source solution called NHIN Connect
- Currently exchanging data among federal entities
- Pilot with HIEs



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The Internet

Standards, Specifications and Agreements for Secure Connections



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## Critical Issues Addressed

1. Privacy and Security
2. Workforce Development
3. Patient and Physician Buy In
4. Other Health Delivery Services



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## 1a. Patient: Privacy & Security

### • Patient privacy protections

- No central data repository, data resides where it is generated
- Patient authorization is required for access
- Audit reports and monitoring of record access available to patients

### • State and regional coordination

- Harmonization of state and federal privacy laws
- Collaboration across boundaries – WA, OR, CA, ID
- Participation in federal privacy and security projects



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## 1b. Law: Privacy & Security

- **Privacy, security and medical records laws vary by:**
  - Provider type
  - Document type
  - Patient demographics
  - Medical information categories
- **Ideally regulations would be standardized with:**
  - Consistent definitions of HIE/EHR terms
  - Consistent requirements for the privacy and security of medical records
- **AeHN has conducted a survey of Alaska laws instrumental to this standardization**



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## 1c. Policy Next Steps: Privacy and Security

- **Advancing HIE and EHRs** requires a statutory limitation on liability for participating providers
- **Non-uniform privacy and security policies** are a barrier to HIE/EHR adoption in Alaska.
- **Policies and forms** adopted by statute, regulation, or published and available through DHSS.
- **Use of the following policies and forms would greatly advance HIE:**
  - Release of Information/HIPAA Authorization
  - Patient identification standards
  - Minimum levels of privacy and security for medical records



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## 2a. Workforce Development

- **Alaska Need Estimate next five years\***
  - 100-500 additional Health IT professionals
  - Retraining of over 250 HIM staff
  - Significant Expansion of healthcare provider IT skills
- **Coordination with 2 and 4 year programs**
  - University of Alaska
  - Alaska Pacific University
  - AVTEC
  - AHEC
- **Employer Sponsored Training**



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## 2b. Workforce Requirements

- **Federally defined Health IT workforce roles**
  - Practice workflow and information management redesign specialists
  - Clinician/practitioner consultant
  - Implementation support specialists
  - Implementation managers
  - Technical/software support staff
  - Trainers



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## 2c. Workforce Development Next Steps

- Pre-college promotion of career development in Health IT (AHEC)
- Promotion of career path in Health IT (vocational through university level)
- Organization incentives for Health IT skills training for health professionals



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## 3. Patient and Provider Buy-In

### • Medicaid incentives

- Provides up to \$ 63K per provider who reach meaningful use (criteria still being defined)

### • Regional Extension Center incentives

- Provides up to \$ 2,500 per provider for assistance with implementation and training

### • Stakeholder Education Plan

- Standardized messages to providers and consumers
- Coordinated outreach with key organizations



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## 4. Other Health Delivery Services

- ◉ **Pharmacies**
  - ◉ e-Prescribing and Medication Reconciliation
- ◉ **Long-term Care Facilities**
  - ◉ Continuity of Care Document
- ◉ **Behavioral Health Services**
  - ◉ Special Considerations for Protected Records
  - ◉ AKAIMS
- ◉ **Imaging Centers**
  - ◉ Special considerations for oversize files
- ◉ **Public Health Agencies**
  - ◉ Immunization and Other Registries



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## Near Future Challenges

### • Cash Flow

- a portion of the federal funds are not released until meaningful use is established

### • Provider Enrollment

- providers may be slow or reluctant to enroll

### • Uncertainty Around Meaningful Use

- the “meaningful use” criteria are still in the rule-making stage



# Health Information Technology

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## Health IT Convergence

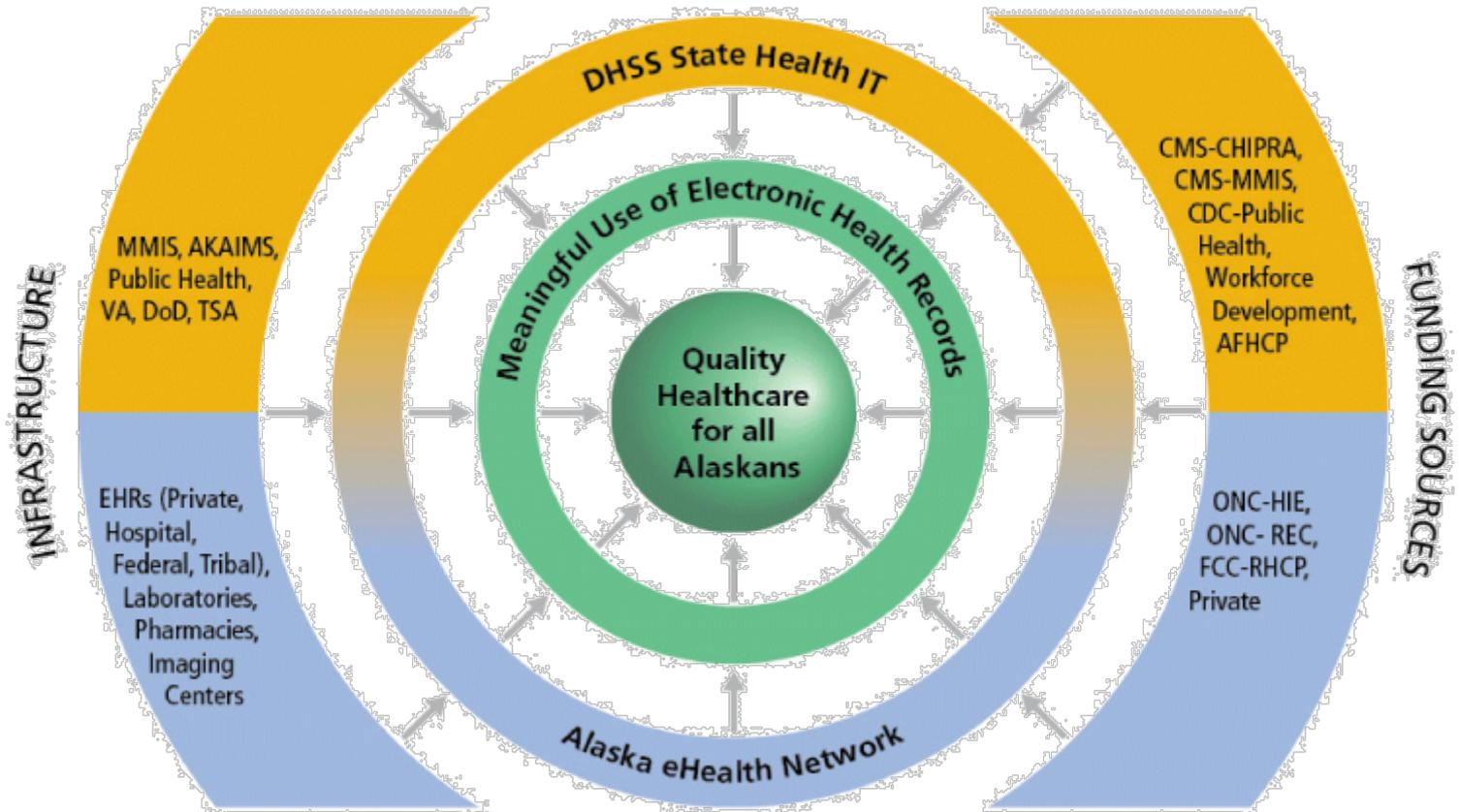
- **Public/Private Funded Infrastructure**
  - Requires transparent and efficient policies
- **Public/Private Governance**
  - Built on prior legislative action (SB 133, 2009)
- **Criteria for Meaningful Use**
  - Assures coordinated Health IT progress toward state and national goal
- **Joint Goal**
  - Quality Healthcare for All Alaskans



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## Public/Private Convergence





# Health Information Technology

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## Information Links

- <http://www.hss.state.ak.us/hit/>
- <http://www.ak-ehealth.org/>
- <http://www.cms.gov/EHRIncentivePrograms/>
- <http://healthit.hhs.gov>



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For more information contact:

**Rebecca Madison, Executive Director**

Alaska eHealth Network

[rebecca@ak-ehealth.org](mailto:rebecca@ak-ehealth.org)

866-966-9030, x3

**Paul Cartland, State HIT Coordinator**

State of AK, DHSS

[paul.cartland@alaska.gov](mailto:paul.cartland@alaska.gov)

907-269-6097

