

HIMSS[®]16

Conference & Exhibition

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TRANSFORMING
HEALTH THROUGH IT



Enabling Practical and Compelling Use Cases for Data Exchange

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DISCLAIMER: The views and opinions expressed in this presentation are those of the author and do not necessarily represent official policy or position of HIMSS.

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Conflict of Interest

Laurance Stuntz

Mariann Yeager, MBA

Has no real or apparent conflicts of interest to report.

Agenda

Tackling Data Sharing in Massachusetts

- Driving Hlway Implementation Grants and Communities Grants
- Collaborating at the local level and across Massachusetts
- Ensuring HIE Value

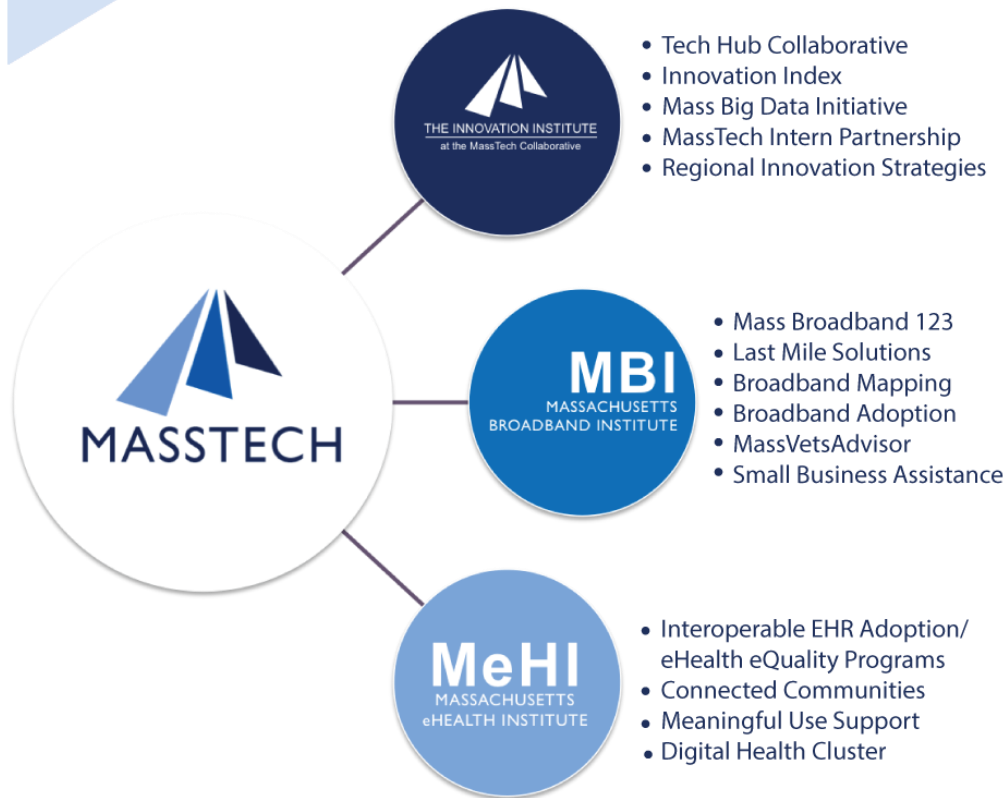
Health IT Interoperability at the National Level

- Examining the many solutions to the many challenges of interoperability
- Encouraging collaboration and innovation

Q&A

Learning Objectives

- Assess how collaborative approaches to exchange are supporting and extending interoperability
- Describe how national standards for query and Direct Messaging can be integrated into workflows across several use cases
- Evaluate how consumer-driven exchange can be facilitated through diverse health IT platforms and mobile applications



MeHI is the designated Massachusetts state agency for:

- Coordinating health care innovation, technology and competitiveness
- Accelerating the adoption of health information technologies
- Promoting Health IT to improve the safety, quality and efficiency of health care in Massachusetts
- Advancing the dissemination of electronic health records systems in all health care provider settings

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MeHI is a division of the Massachusetts Technology Collaborative, a public economic development agency

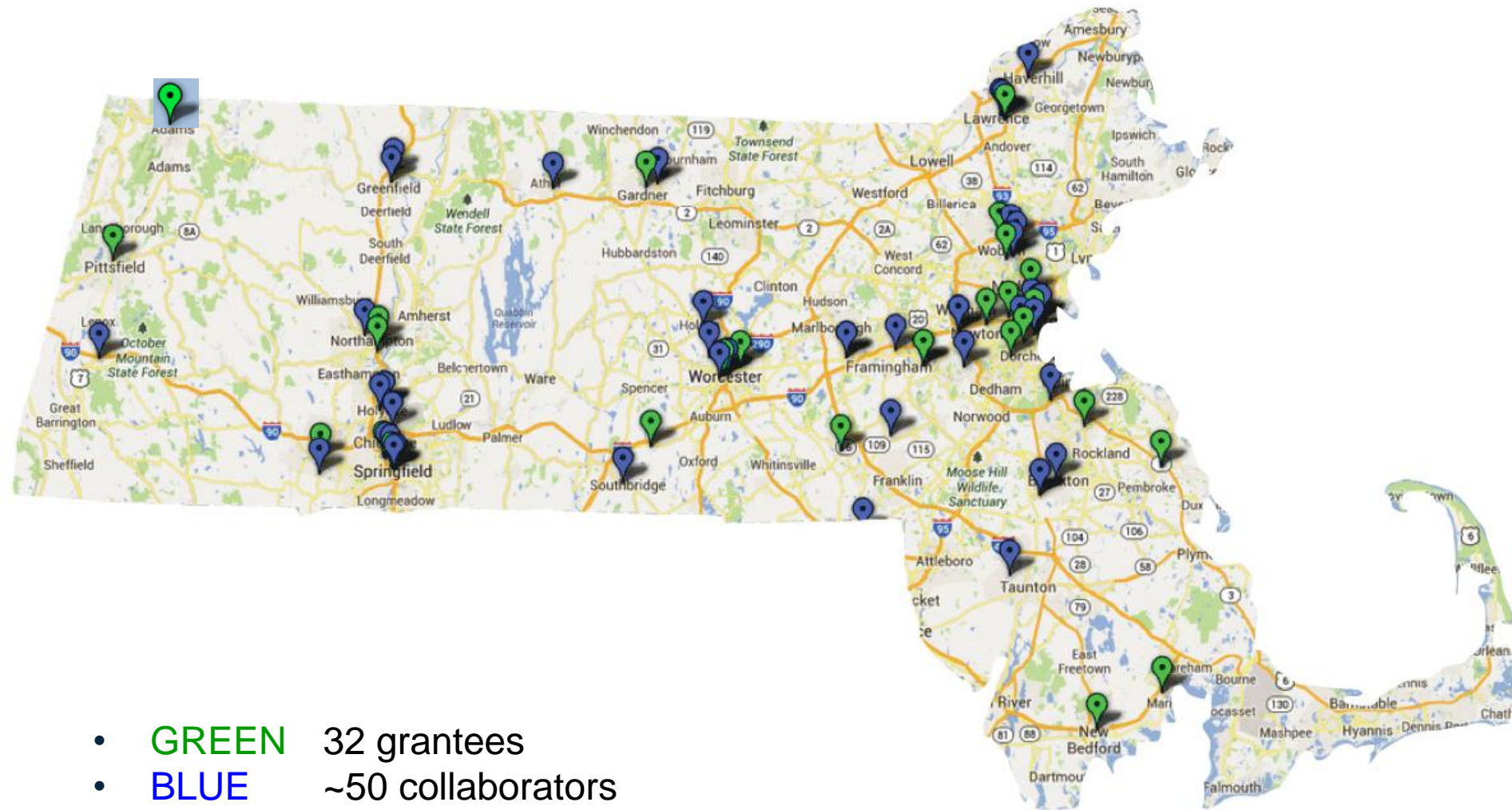
Massachusetts Health Information Exchange Timeline

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- 1998 - Administrative exchange NEHEN created
- 2004-2007 - BCBSMA creates MAeHC and funds EHR and local HIE pilots
- 2008 – NEHEN launches RxGateway for ePrescribing
- 2009 – MA-SHARE initiates exchange of clinical information, eventually merged into NEHEN
- 2011 – MeHI, EOHHS and CMS work together to fund the Mass Hlway
- 2012 – Mass Hlway launched, with Direct-based services
- 2013-2014 – Hlway Implementation Grants
- 2015 – Hlway Phase 2 (RLS) enters pilot
- 2016 – Community Collaboration Grants launched

HIway Implementation Grants

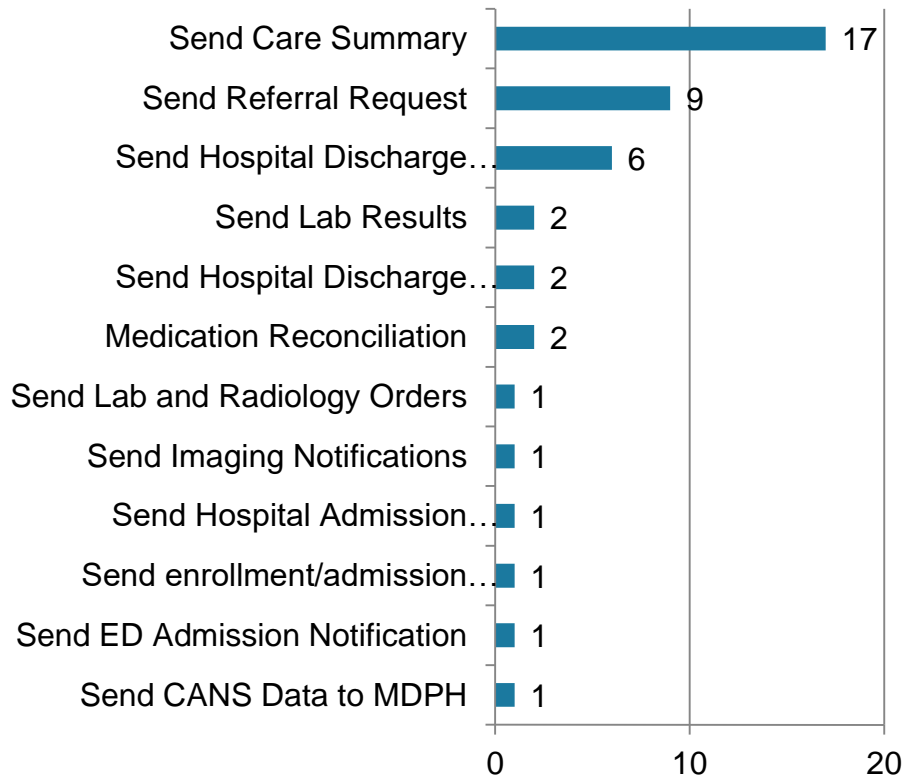
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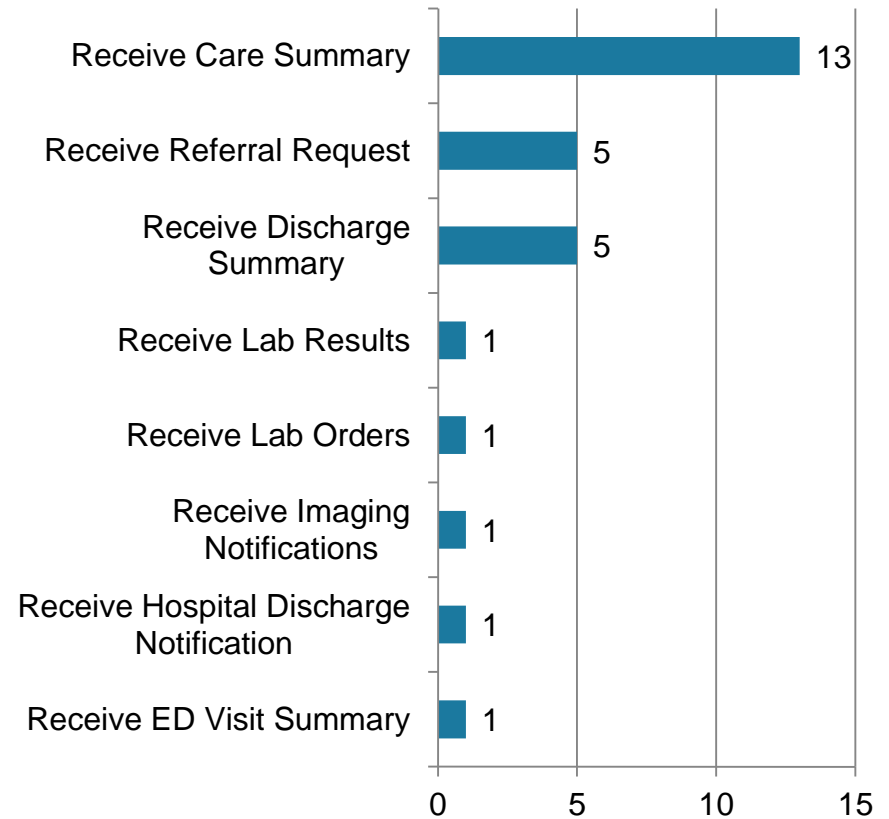
How grantees used the HIway

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Send



Receive



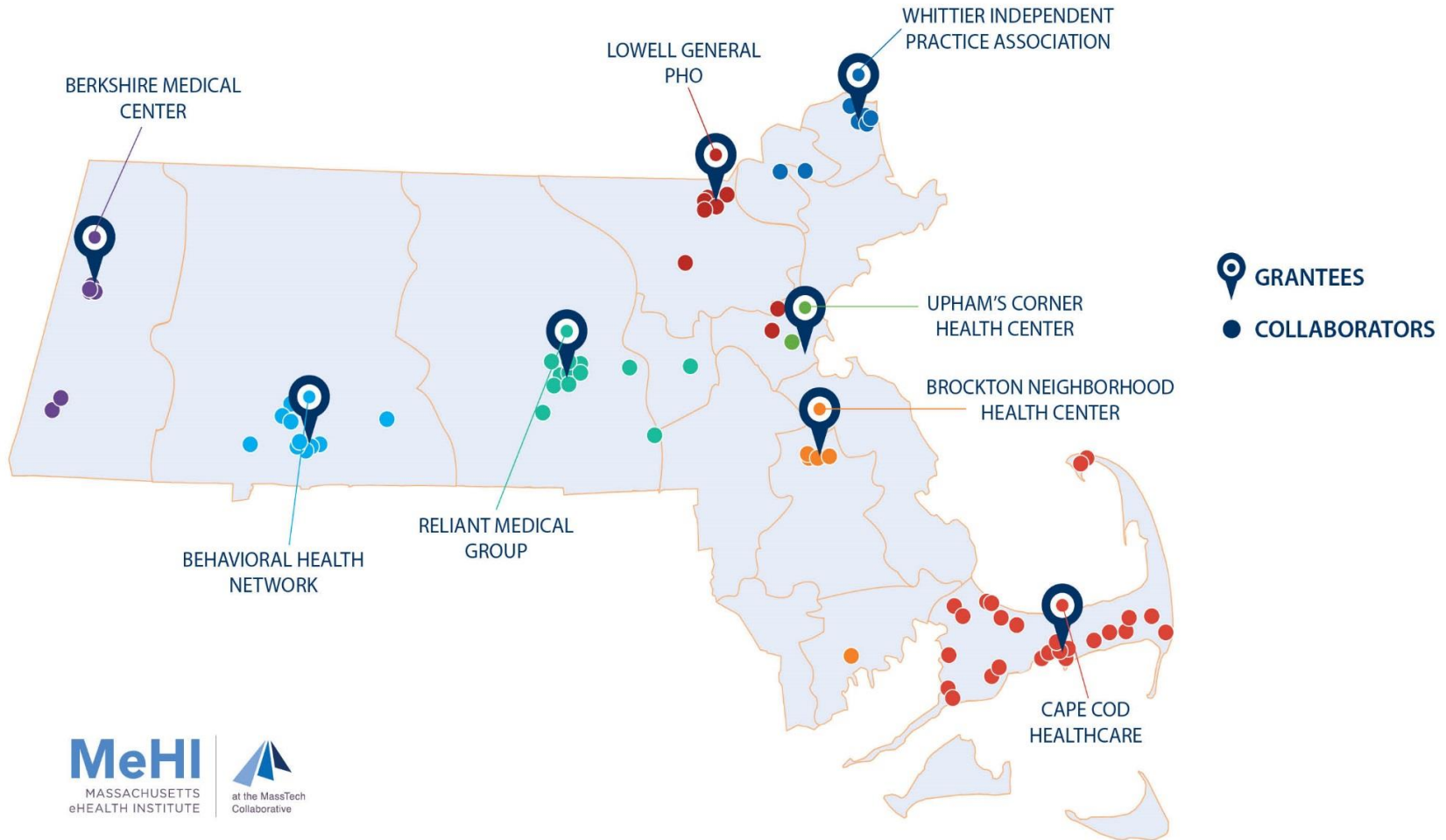
Connected Communities Implementation Grant

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- Designed to support organizations in demonstrating community collaboration using HIT to address a real-world, practical, measurable healthcare need.
- Projects were required to include **behavioral health** and/or **long term and post-acute care organizations**.
 - Addresses some of the key cost drivers identified by the Massachusetts Health Policy Commission
- **Aimed at the priorities identified in the community needs assessments** with a focus on improving two aspects of care coordination; **care transitions** and **cross-setting care management**

Connected Communities: Grantees and Collaborators

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Connected Communities Implementation Grants

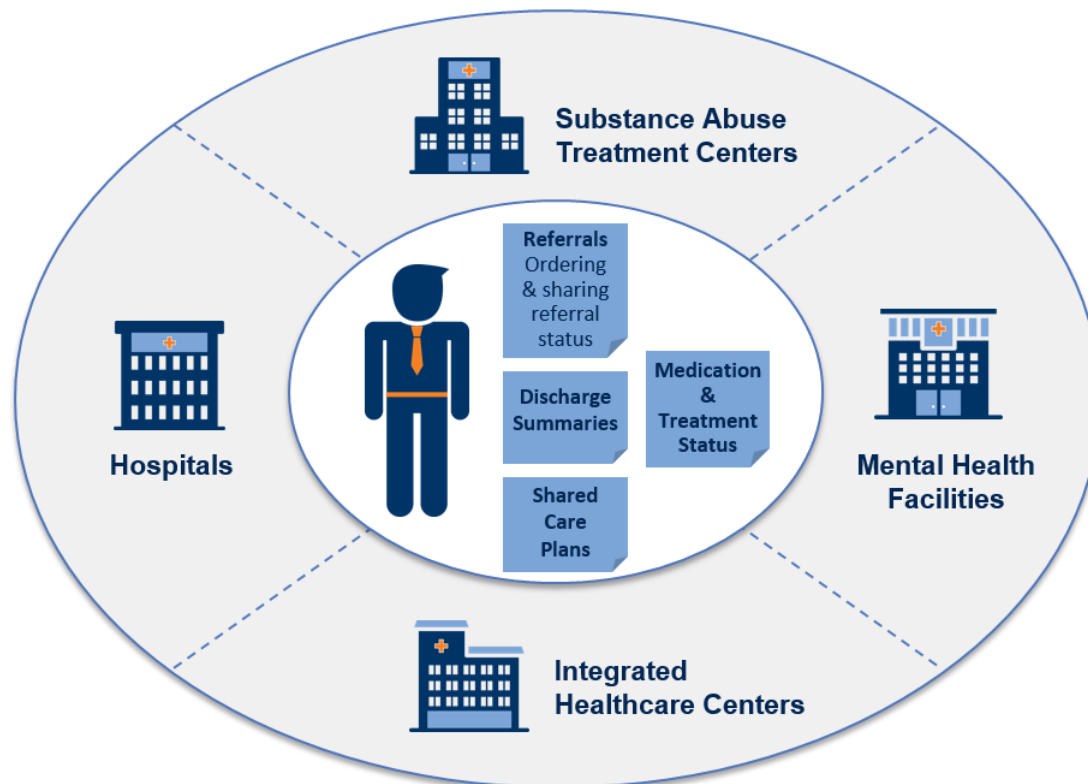
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Grantee	# of Collaborators	Use Cases
Behavioral Health Network	13	eReferral – inpatient psychiatric with substance abuse treatment facilities
Berkshire Medical Center	7	Care Transition & Coordination – medical center with community services
Brockton Neighborhood Health Center	5	Opioid Treatment Care Coordination – eReferrals, ADT, care coordination, meds/treatment
Cape Cod Healthcare	33	Care Transition, ADT, Discharge Summary, CCDA – post acute care, behavioral health
Lowell General PHO	9	Cross-provider Care Planning/Management – across a broad range of provider types, post acute care
Reliant Medical Group	14	Care Transition, eConsents, ADT, CCDA – automated processes
Upham's Corner Health Center	1	Closed Loop Referral, Care Coordination with Boston Children's
Whittier Independent Practice Association	8	Medication Reconciliation with hospital, post-acute, behavioral health organizations via Wellport HIE

Connected Community Grant Project

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CARE COORDINATION FOR SUBSTANCE USE DISORDER PATIENTS IN RESPONSE TO THE OPIOID CRISIS



GOALS

Developing workflows at each provider

Consistent referral and privacy protocols between providers

Content, data set and formatting standards

Developing technical infrastructure to support

Some facilities will be building connections to the MA Hlway

Specific Use Cases Drive Adoption

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Health Information Exchange Toolkit

This toolkit contains guides, templates, and forms to help develop effective connections to a Health Information Exchange (HIE), like the [Mass Hlway](#).



Use Case Resources

The Use Case resources listed below describe how to develop new use cases. Use the [Use Case Tools](#) to visualize and describe the actual use cases of the planned Health Information Exchange.

Resource	Description
Use Case Development Guide	This guide describes the benefits of developing a detailed Use Case, and the elements that should be included in every Use Case.
Use Case Development Form	This form provides a template for documenting your organization's Use Cases.
Developing a Use Case	This meeting presentation explains the Use Case concepts and provides Use Case examples.
Workshop Presentation	This alternate workshop presentation similarly explains the Use Case concepts and provides Use Case examples.
Use Case Examples	This document provides a list of the types of healthcare information that can be exchanged via an HIE. This serves as examples to develop potential Use Cases.

<http://mehi.masstech.org/education/resources-tools/hie-toolkit/>

The Sequoia Project's Role

The Sequoia Project is a trusted, independent convener of industry and government.

We work to address the challenges of secure, interoperable nationwide health information exchange (HIE).



SECURE



INTEROPERABLE



NATIONWIDE

Current Sequoia Project Initiatives

eHealth Exchange™

The **eHealth Exchange** is the largest and fastest growing health data sharing network in the US.

carequality

Carequality is a public-private collaborative process that built a national-level interoperability framework to inter-connect networks.

RSNA Image Share
VALIDATION

RSNA Image Share Validation Program is a conformity assessment program that tests the compliance of vendors' systems using quality standards determined most effective for accurate and efficient exchange of medical images including those used in the RSNA Image Share Network.

2016 Sequoia Priorities

- Patient Matching
- Provider Directory
- Improved specificity and testing of clinical documents

Different Approaches to Connect



Centralized

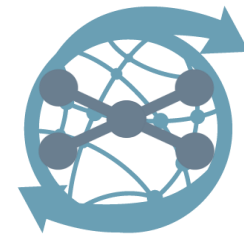


Regional and
statewide HIOs



Federated

The Internet



Federated with
Shared Services
(Hybrid)

eHealth Exchange™

Introduction to Carequality

Carequality creates a standardized, national-level interoperability framework to link all data sharing networks



Carequality is a coalition of data sharing networks who wish to interconnect using this interoperability framework

The Power of Connecting Networks



*How do you get nationwide connectivity?
Clinic by clinic, hospital by hospital?*

Data sharing networks have already connected many participants. The connections grow exponentially by connecting these networks.


➔ If you connect six clinics, you might reach a few dozen physicians.

➔ If you connect six networks, you can reach thousands of physicians.

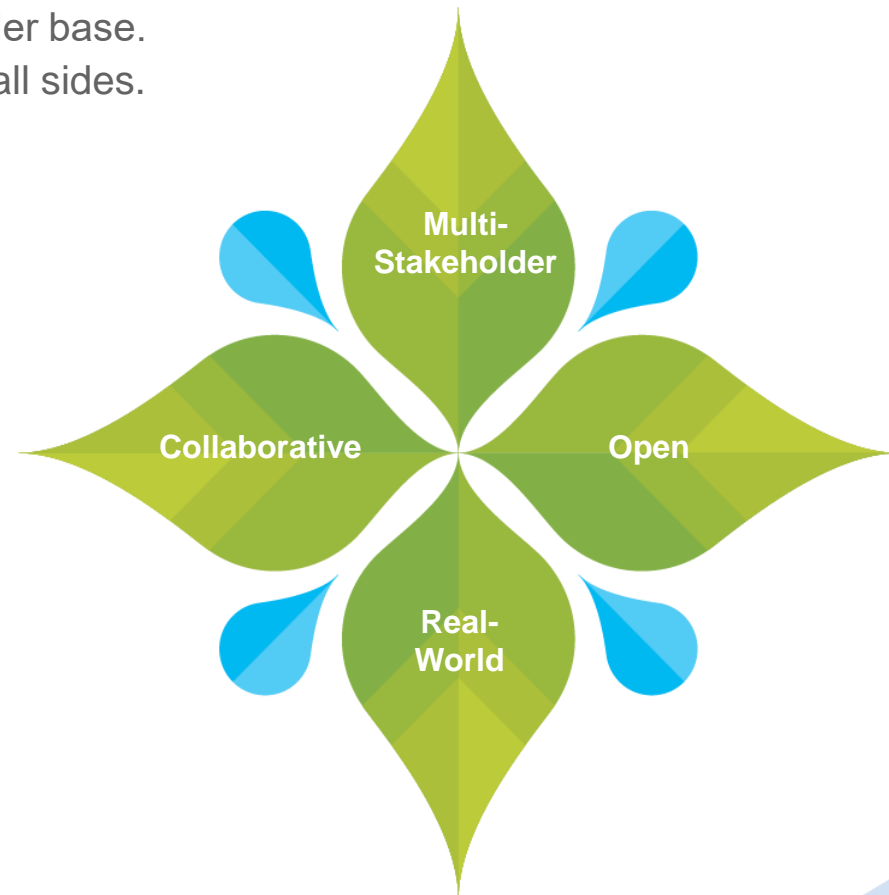
A Multi-Faceted Approach

Carequality's strength lies in its diverse stakeholder base. We approach the interoperability challenge from all sides.

Carequality is Supported by



The Sequoia Project is a nonprofit acting in the public interest. It convenes industry and government to address common interoperability challenges.





Essential Elements



Common rules of the road: In order for the varied participants to trust each other with health information, everyone needs to have a legal obligation to abide by the same rules.



Well-defined technical specs: Shared rules are not enough; clear standards must be laid out in an implementation guide that all implementers can follow.



A participant directory: To connect using the common standards, systems must know the addresses and roles of each participant.

Join Us in Solving Interoperability Together

The carequality Community:

- Physicians
- Consumers
- Government Agencies
- Data Sharing Networks
- Payers
- Behavioral Health
- Acute Care
- Long Term/ Post-Acute Care
- Hospice and Home Care
- Research
- Public Health
- Vendors
- Standards Development Orgs.
- Pharmacies
- EMS Services



Iterative Use Case Process



Initial Use Case: Query-Based Document Exchange

- Treatment
- Operations
- Patient Authorization (PHR)
- Payment
- Public Health

Carequality Framework Implementers

2016 Framework Initial Adopters



eClinicalWorks

Epic



NEXTGEN®
HEALTHCARE

OneRecord



Ever-Expanding Coverage

- 
- ✓ Over 300,000 Physicians
 - ✓ Over 1,800 Hospitals
 - ✓ Over 40,000 Clinics
 - ✓ More than 15 million patient records shared per month

Current Priorities



Carequality Directory: Overcoming the industry-wide challenge of maintaining an accurate provider directory



Patient Authorization: Patients are consumers that deserve to be in control of their healthcare information



Imaging Content: Supporting medical image sharing to patients and providers

Interoperability is a journey not a destination



Questions



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