

Using Health Information Technology in a Meaningful Way

June 2017



Arizona Health-e Connection is now **Health Current**

Where We've Been

More complete information leads to better care and better outcomes. That's why we've worked for more than ten years to become Arizona's primary resource for information technology and exchange. As we've grown, our core goal has remained the same: help providers use information technology to improve peoples' lives.

Our new name reflects what we have become: a partner that gives providers the information they need to make better clinical decisions and keep people healthy.

Where We're Headed

More complete information is more meaningful. It makes healthcare transformation possible. And Health Current is central to this progress, integrating information technology and care delivery to improve the health and wellbeing of individuals and communities.

Why Meaningful Use?

Meaningful Use was designed to obtain provider engagement in using technology and tools like the health information exchange (HIE) to add value to practices while improving patient care coordination.

Meaningful Users are those who qualify to receive funding under the Medicare and Medicaid Electronic Health Records (EHR) Incentive Programs under the HITECH provisions of the 2009 American Recovery and Reinvestment Act (ARRA).

Note: This presentation only includes information specific to the Medicaid EHR Incentive program

Why Use Health Information Technology in a Meaningful Way?

Financial Incentives –

- Eligible professionals (EPs) can receive up to \$63,750 through the Medicaid EHR Incentive Program
- AHCCCS Value Based Purchasing (VBP) Program – VBP Differential Adjustment Payment increase for qualified e-prescribing
- HIE Subsidy Program

Quality Improvement

- 75% of EHR adopters report enhanced patient care
- Nurses report spending 15-26% more time with patients
- 85% of physicians report being somewhat or very satisfied with their EHR system
- Using Health Information Technology can reduce hospital re-admissions by 75%

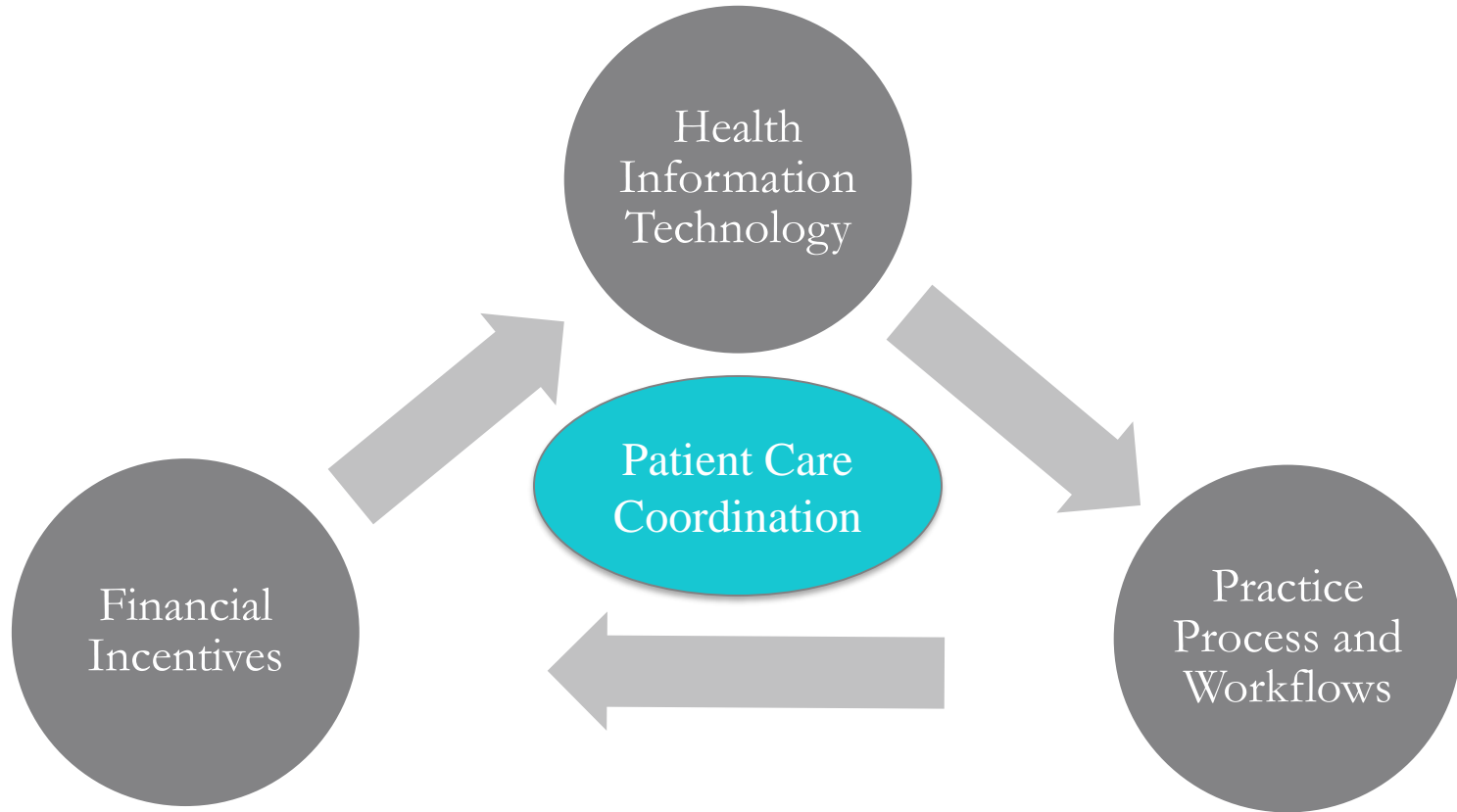
Why Use Health Information Technology in a Meaningful Way?

Improved Communication

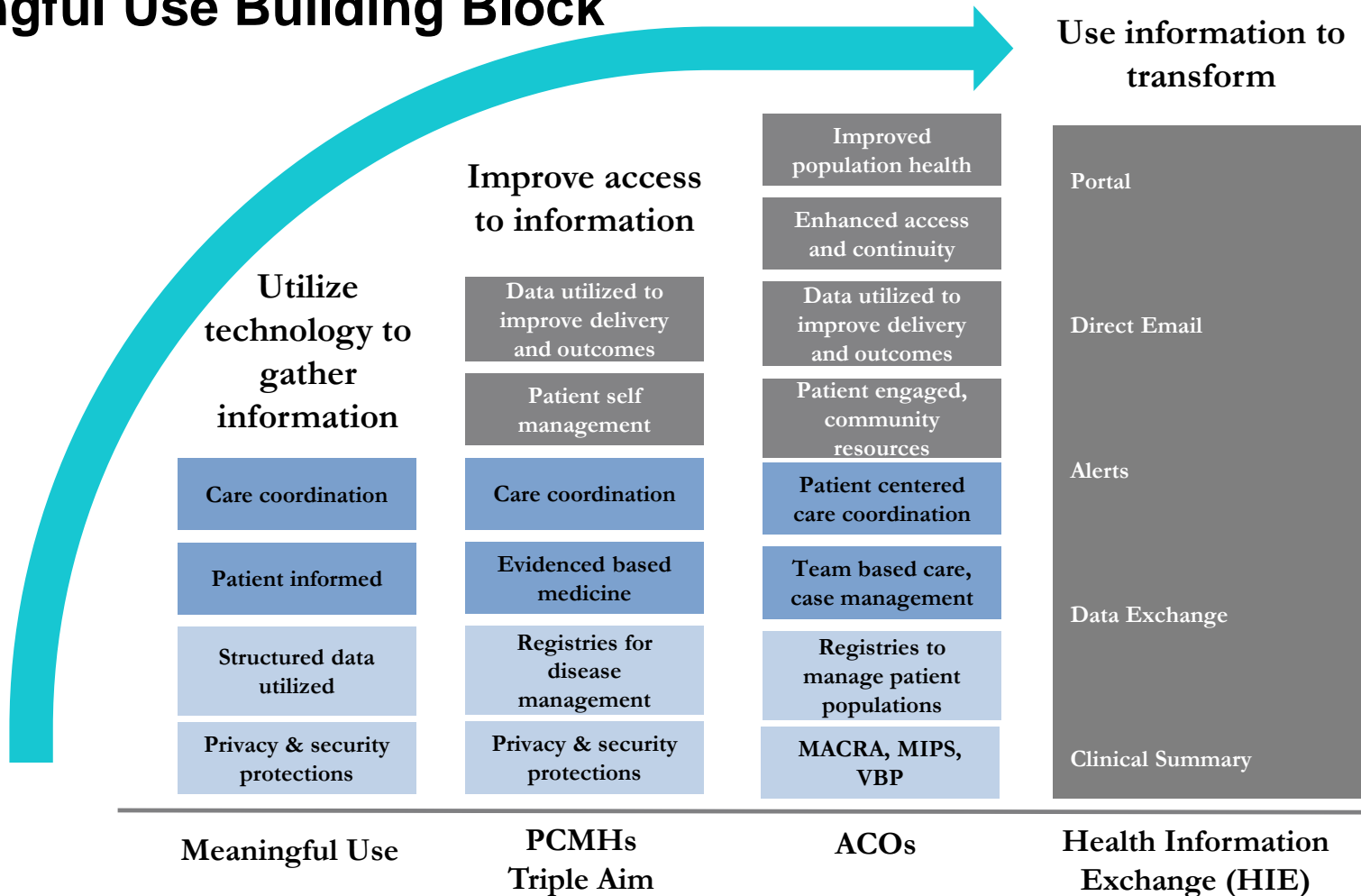
- By connecting to the HIE, providers are able to receive additional information (such as alerts) on their patients
- Providers who are connected to the HIE are able to exchange secure messages and share patient information to enhance care coordination
- Patients are able to be more active members of their care team as a result of increased access to healthcare information and providers.
- Patients are better able to understand their health and make informed lifestyle adjustments due to increased access to patient-specific education (e.g. links to relevant information with extensive articles, videos, and images for the patient)

Using Health Information Technology in a Meaningful Way

One part of the process in improving care coordination



Meaningful Use Building Block



AHCCCS Medicaid EHR Incentive Program 2017 Program Requirements

- Eligible Provider Criteria – remain the same
 - Physicians
 - Nurse Practitioners
 - Certified Nurse – Midwife
 - Dentists
 - Physician Assistants who practice in a FQHC or RHC that is lead by a PA
- Patient Volume Requirements – remain the same
 - Minimum of 30% Medicaid patient volume
 - Exception: 20% minimum for Pediatricians
 - Or practice predominantly in a FQHC or RHC and have at least 30% patient volume to needy individuals

REMINDER....
Attestation deadline for
PY2016 is June 30, 2017

AHCCCS Medicaid EHR Incentive Program

2017 Program Requirements

- Time Periods –
 - Patient Volume – 90 consecutive days from 2016
 - MU Measures – 90 consecutive days from 2017
- ePIP Availability for Attestation - TBD
- All providers are required to attest to a single set of Objectives and Measures
 - Modified Stage 2 Objectives and Measures
 - For EPs, there are 10 Objectives
- All providers must attest to Objectives and Measures using EHR technology certified to the 2014 Edition (or greater)

Eligible Professionals – Medicaid EHR Modified Stage 2 Objectives and Measures for 2017

1. Protect electronic protected health information (ePHI)
2. Use clinical decision support
3. Use computerized provider order entry (CPOE)
4. Prescribe electronically (eRx)
5. Health information exchange (HIE) (transition of care referrals)
6. Patient specific education
7. Medication reconciliation
8. Patient electronic access
9. Secure electronic messaging
10. Public health reporting

1. Protect Patient Health Information

	Stage 1	Stage 2
Objective	Protect electronic health information created or maintained by the certified EHR Technology through the implementation of appropriate technical capabilities	Protect electronic health information created or maintained by the Certified EHR Technology through the implementation of appropriate technical capabilities
Measure	Conduct or review a security risk analysis per 45 CFR 164.308 (a)(1) and implement security updates as necessary and correct identified security deficiencies as part of its risk management process	Conduct or review a security risk analysis in accordance with the requirements under 45 CFR 164.308 (a)(1), including addressing the encryption/security of data at rest and implement security updates as necessary and correct identified security deficiencies as part of its risk management process

2. Clinical Decision Support

	Stage 1	Stage 2
Objective	Implement one clinical decision support rule relevant to specialty or high clinical priority along with the ability to track compliance that rule	Use clinical decision support to improve performance on high-priority health conditions
Measure	Implement 1 clinical decision support rule	<p>Implement 5 clinical decision support interventions <i>related to 4 or more clinical quality measures</i>, if applicable, at a relevant point in patient care for the entire EHR reporting period.</p> <p>The EP, eligible hospital, or CAH has <i>enabled the functionality for drug-drug and drug-allergy interaction</i> checks for the entire EHR reporting period</p>

3. Computerized Physician Order Entry (CPOE) for Medication, Laboratory and Radiology Orders

	Stage 1	Stage 2
Objective	Use CPOE for medication orders directly entered by any licensed healthcare professional who can enter orders into the medical record per state, local and professional guidelines	Use computerized provider order entry (CPOE) for medication, laboratory and radiology orders directly entered by any licensed healthcare professional who can enter orders into the medical record per state, local and professional guidelines
Measure	More than 30% of unique patients with at least one medication in their medication list seen by the EP have at least one medication order entered using CPOE	More than 60% of medication, 30% of laboratory, and 30% of radiology orders created by the EP during the EHR reporting period are recorded using CPOE

4. Prescribe Electronically (eRx)

	Stage 1	Stage 2
Objective	Generate and transmit permissible prescriptions electronically (eRx)	Generate and transmit permissible prescriptions electronically (eRx)
Measure	More than 40% of all permissible prescriptions written by the EP are transmitted electronically using certified EHR technology	More than 50% of all permissible prescriptions written by the EP are compared to at least one drug formulary and transmitted electronically using Certified EHR Technology

E-Prescribing (eRx) and Electronic Prescriptions of Controlled Substance (EPCS) Assistance Available!

Health Current can help with eRx and EPCS by answering questions and assisting you overcome barriers you may encounter.

Email erx@healthcurrent.org or call us at 602-449-7873

Additional resources are also available at:

<https://healthcurrent.org/information-center/e-prescribing/>

Watch for webinar on eRx and EPCS to be planned in the near future!

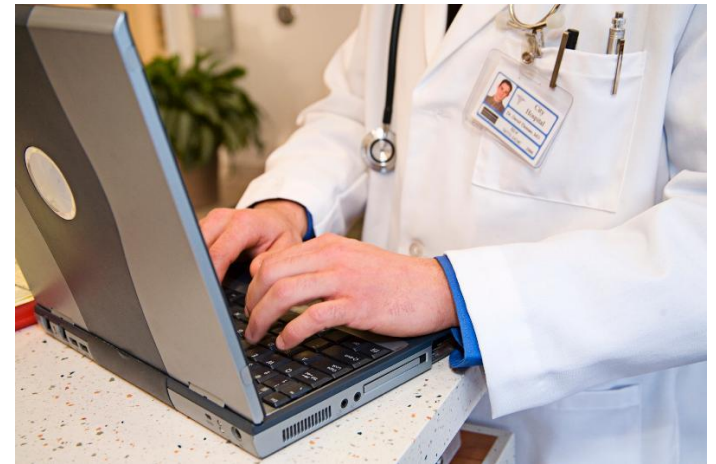
5. Health Information Exchange (HIE)

	Stage 1	Stage 2
Objective	The EP who transitions their patient to another setting of care or provider of care or refers their patient to another provider of care should provide summary of care record for each transition of care or referral	The EP who transitions their patient to another setting of care or provider of care or refers their patient to another provider of care should provide summary of care record for each transition of care or referral
Measure	The EP who transitions or refers their patient to another setting of care or provider of care provides a summary of care record for more than 50% of transitions of care and referrals	The EP who transitions or refers their patient to another setting of care or provider of care provides a summary of care record for more than 50% of transitions of care and referrals

Health Current HIE

Health Current is the health information exchange (HIE) that helps partners transform care by bringing together communities and information across Arizona.

More complete information is more meaningful and leads to better care and better outcomes. It makes healthcare transformation possible. That's why we've worked for more than ten years to become Arizona's primary resource for information technology and exchange, integrating information with the delivery of care to improve the health and wellbeing of individuals and communities. As we've grown, our core goal has remained the same: help providers use information technology to improve people's lives.

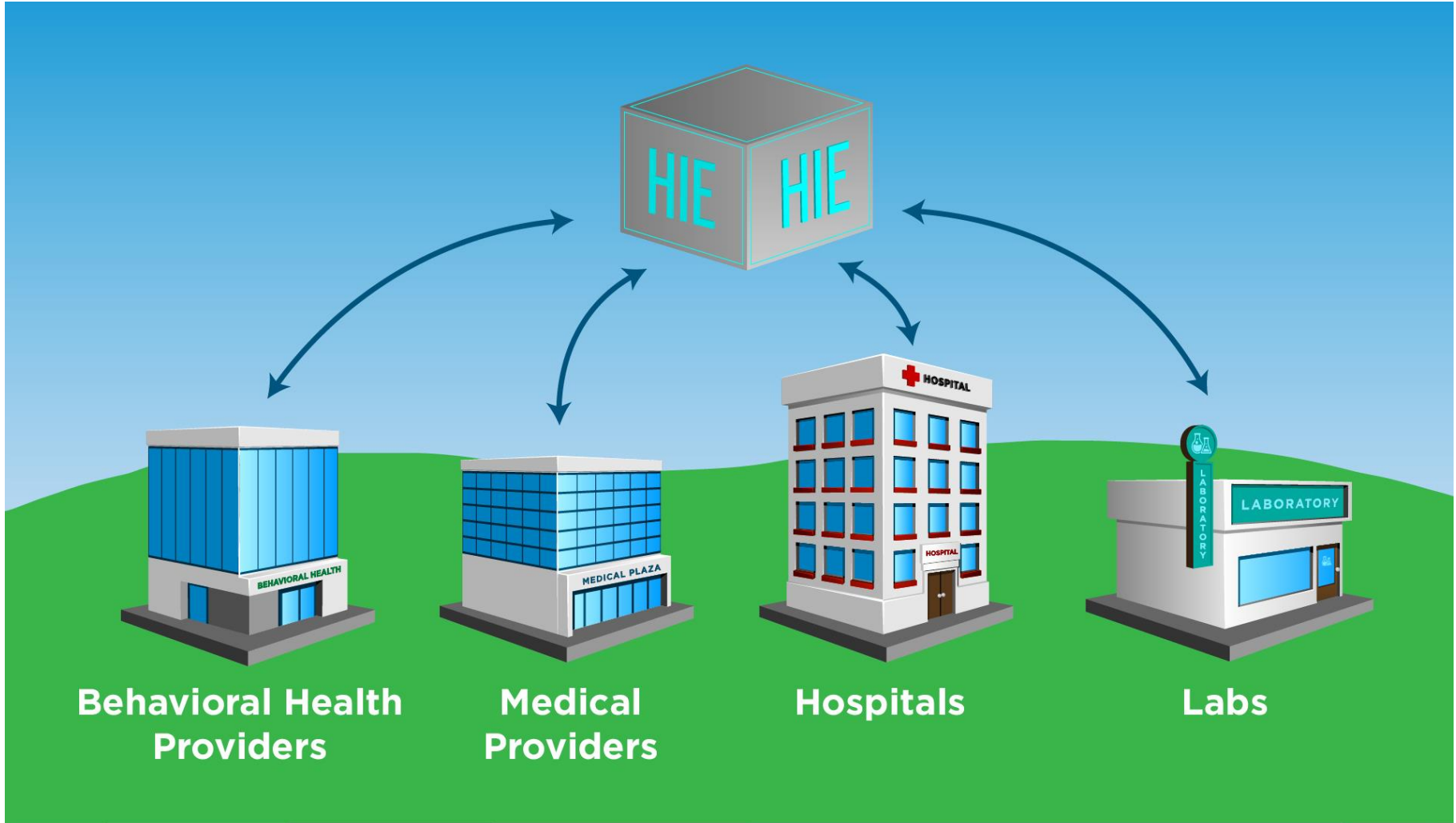


Health Current HIE

Meets the AHCCCS definition of a “Qualifying Health Information Exchange Organization”

A qualifying health information exchange organization is a non-profit health information organization as defined by A.R.S. § 36-3801 that provides statewide exchange of patient health information among disparate health organizations and providers not owned, operated, or controlled by the health information exchange.

A qualifying health information exchange organization must include representation by the administration of its board of directors and have a significant number of healthcare participants, including hospitals, laboratories, payers, community physicians and Federally Qualified Health Centers.





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Imagine fully informed health

Video is on this page on website: <https://healthcurrent.org/hie/patient-rights-process/>

Health Current HIE Benefits

- One Connection
- New Patient Information
- Timely Information to Coordinate Care
- Medical Histories from Out-of-State Sources
- Secure Communication
- Potential to decrease healthcare costs by reducing unnecessary tests and visits

Health Current HIE Services

Alerts

Alerts are sent to designated clinicians or individuals based upon a patient panel. Alerts can include:

- Inpatient Alerts
- Emergency Department (ED) Alerts
- Patient Centered Data Home™ (PCDH) Alerts

Direct Email

Direct Email is a HIPAA compliant, secure email account that provides the means for registered users to exchange patient protected health information with other DirectTrust-certified email accounts. Direct Email is often used to receive Alerts.

Health Current HIE Services

Portal

The Portal provides secure web-based access that allows selected patient/member data to be viewed online.

Data Exchange

Data Exchange involves electronic interfaces between electronic health records (EHRs) and the HIE. Data exchange services include:

- Pushing Data to the HIE
- Receiving Data from the HIE

Health Current HIE Services

Clinical Summary

A Clinical Summary is a comprehensive Continuity of Care Document (CCD) containing up to 90 days of the patient's/member's most recent clinical and encounter information. Clinical Summaries include:

- Automated Clinical Summary
- Query/Response Clinical Summary
- Patient Centered Data Home™ (PCDH) Clinical Summary

Get Connected and Access the HIE Subsidy Program

- Through funding available from AHCCCS, Health Current offers the HIE Subsidy Program to support the participation of eligible participants in the health information exchange (HIE).
- The program *subsidizes implementation fees* of eligible participants who complete bidirectional connectivity with the HIE.
- Eligible participants include providers that participate in the AHCCCS EHR Incentive Program.
 - Expansion of eligibility requirements is expected soon
- To become a participant, obtain additional information on the HIE Subsidy Program and to determine your organization's eligibility call Health Current Recruitment at (602) 688-7216 or email recruitment@healthcurrent.org.

6. Patient Specific Education

Stage 1		Stage 2
Objective	N/A – was a Menu Objective in Stage 1	Use clinically relevant information from Certified EHR Technology (CEHRT) to identify patient-specific education resources and provide those resources to the patient.
Measure		Patient-specific education resources identified by CEHRT are provided to patients for more than 10 percent of all unique patients with office visits seen by the EP during the EHR reporting period.

Clinical Importance:

Patient-specific education is designed to help medical professionals and patients make better decisions about their health and links to relevant information with extensive articles, videos, and images for the patient. Patient-centered education allows for the patient to better understand their health and make informed lifestyle adjustments.

7. Medication Reconciliation

Stage 1		Stage 2
Objective	N/A – was a Menu Objective in Stage 1	The EP who receives a patient from another setting of care or provider of care or believes an encounter is relevant should perform medication reconciliation.
Measure		The EP who performs medication reconciliation for more than 50 percent of transitions of care in which the patient is transitioned into the care of the EP.

Clinical Importance:

The medication reconciliation process can help reduce medication errors that are especially common among patients who use multiple pharmacies, have co-morbidity factors, and multiple healthcare providers. Creating an accurate medication list is important to patient safety. Medication errors can be reduced by capturing a complete and accurate list of the medications a patient is taking (including non-prescription and alternative medications) and comparing this list with both documentation in the patient’s medical record during ambulatory care visits and the physician’s admission, transfer, and/or discharge orders in inpatient settings.

8. Patient Electronic Access

Patient Ability To Electronically View, Download & Transmit (VDT) Health Information

Stage 1		Stage 2
Objective	Provide patients the ability to view online, download and transmit their health information within four business days of the information being available to the EP.	Provide patients the ability to view online, download and transmit their health information within four business days of the information being available to the EP.
Measure	More than 50 percent of all unique patients seen by the EP during the EHR reporting period are provided timely (available to the patient within 4 business days after the information is available to the EP) online access to their health information.	More than 5 percent of all unique patients seen by the EP during the EHR reporting period (or their authorized representatives) view, download, or transmit to a third party their health information.

9. Secure Electronic Messaging

Stage 2

Objective	Use secure electronic messaging to communicate with patients on relevant health information.
Measure	A secure message was sent using the electronic messaging function of certified EHR technology (CEHRT) by more than 5 percent of unique patients (or their authorized representatives) seen by the EP during the EHR reporting period.

Clinical Importance:

Secure electronic messaging can play an important role in improving patient access to healthcare providers. It also helps patients who want to be better informed and more active members of their care team.

Secure messaging can be used to promote care coordination between visits, handle routine health issues, address patient questions and concerns, monitor patient condition(s), and help patients better manage their conditions. Secure messaging can be convenient for handling routine nonclinical tasks such as medication refills and referrals and evidence from a number of practices indicates that offering secure messaging contributes to patient satisfaction with care.

10. Public Health Reporting

Immunization Registries Data Submission

	Stage 1	Stage 2
Objective	N/A – was a Menu Objective in Stage 1	Capability to submit electronic data to immunization registries or Immunization Information Systems and actual submission except where prohibited and in accordance with applicable law and practice
Measure		Successful ongoing submission of electronic immunization data from Certified EHR Technology to an immunization registry or immunization information system for the entire EHR reporting period

Contact Information

Health Current – EHR Program Assistance

ehr@healthcurrent.org

602-688-7211

Health Current – eRx and EPCS Assistance

erx@healthcurrent.org

602-449-7873

Health Current – To Join the HIE

recruitment@healthcurrent.org

602-688-7216

AHCCCS EHR Help Desk

EHRIncentivePayments@azahcccs.gov

602-417-4333

AHCCCS Website

<https://www.azahcccs.gov/PlansProviders/CurrentProviders/EHR/>

Health Current Website

www.healthcurrent.org



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