Indiana Council of Community Mental Health Centers

October 14, 2013
Role of the State HIT Coordinator

- Develop and advocate for HIT Policy
- Coordinate efforts with Medicaid, public health, and other federally funded programs
- Serve as a liaison between the private and public sectors
- Serve as a resource for all HIT stakeholders
What is IHIT?

- Indiana Health Information Technology, Inc.
- State Designated Entity (SDE)
- Received $13.3 million in HITECH funding
- Responsible for furthering HIE activities within the state
HITECH Programs Address Barriers to Adoption, Meaningful Use, Exchange

Barriers

- Cost of EHR Adoption
- Meaningful Use difficult to achieve for small providers
- Barriers to health information exchange
- Lack of trained workforce
- Lack of trust, policy framework
- Need for “real world” examples of HIT contribution to Health Care Transformation

Intervention

- MU Incentives
- REC and HITRC
- HIE Program Standards & Interoperability
- Workforce
- Privacy and Security
- Beacon SHARP

Funds Allocated

- $27.3 B* (Cost of EHR Adoption)
- $643M
- $50M (Meaningful Use)
- $548M
- $64.3M (Barriers to health information exchange)
- $118M (Lack of trained workforce)
- Addressed across all Programs
- $250M
- $60M (Need for “real world” examples of HIT contribution to Health Care Transformation)

* $27.3 B is high scenario
Federal Health IT Strategic Plan 2011-2015

Goal I: Achieve Adoption and Information Exchange through Meaningful Use of Health IT

Goal II: Improve Care, Improve Population Health, and Reduce Health Care Costs through the Use of Health IT

Goal III: Inspire Confidence and Trust in Health IT

Goal IV: Empower Individuals with Health IT to Improve their Health and the Health Care System

Goal V: Achieve Rapid Learning and Technological Advancement
Indiana Heath Information Orgs
State HIE Role – Driving Interoperability

Statewide Provider Directory

Virtual IHIT

Clinical Message Routing

Nomenclature Normalization

Patient and Results Discovery/Query
IHIT Funded Projects

- **Connectivity Matching Grant Program**
  - 30 additional Rural/Critical Access Hospitals
  - 80 FQHC and Rural Health Clinics
  - 20 stand-alone lab and radiology entities

- **HIO Connectivity**
  - HIO to HIO message routing
  - CCD/CCR routing
  - Message Extraction to Data Repository
  - Consolidated Care Summaries by push and query methodologies

- **Immunization Registry Integration**
  - HIO and EMR bi-direction interfacing with CHIRP
  - Increased access to immunization data

- **Consumer Mediated Exchange – PHR**
  - 12 pilots sites across state, multiple use cases

- **Implantable Cardiac Device Data Access**
  - 2 pilot sites, 2 EHR vendors, PHR, and medical device company
IHIT Funded Projects, \textit{cont.}

- Long Term Care/Behavioral Facility Integration
  - Transitions of Care Support

- Stage 2 MU White Space
  - CDA Processor
  - Modular Certification
  - ELR integration
  - CCD/Direct support

- Organ Procurement Entity Integration

- Blue Button+ Reference Implementation
  - PHR integration with regional reference lab

- Clinical Data Warehouse Development
  - Improved ACO/MU Analytics
  - ADT Alerts
  - Support Data Queries
Indiana HIE Progress

- 5 HISPs deployed (Secure Messaging)
- HISP Directory interoperability
- All sub-state HIO deployed Connect gateways
- Cross-HIO query starting April 2013
- 28 hospitals, 66 clinics, 7 lab/rad entities enrolled in HIE Connectivity Program
Indiana HIE Metrics

- 56% of Hospitals have access to Care Summaries
- 78% of Hospital Labs Submitting Results
- 48% of Hospitals Submitting Immunizations
- 53% of Hospitals Submitting ELR
- 99% of Hospital ER’s submitting Surveillance data
- 42 Million+ Pushed (Directed) Transactions Q1 2013
- 5.2 Million+ Public Health Messages Q1 2013
Electronic Health Records (EHR) Incentives/Other State Metrics
# Medicare EHR Payments

As of Aug 31, 2013

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<tr>
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<th>EP</th>
<th>Amount</th>
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<tbody>
<tr>
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<tr>
<td>Hospital</td>
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<td>$3,856,281</td>
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<td>Dual-Eligible</td>
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<td>$146,758,296</td>
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<tr>
<td><strong>Totals</strong></td>
<td>5,144</td>
<td><strong>$231,908,259</strong></td>
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## Medicaid EHR Payments

<table>
<thead>
<tr>
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<th>As of Sept 20, 2013</th>
<th>Year 1/Year 2</th>
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<tbody>
<tr>
<td>Medicaid EP</td>
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<td>Hospital*</td>
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<td>Dual-Eligible</td>
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<tr>
<td>Totals</td>
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</table>

* Indiana has no Medicaid-only hospitals
E-Prescribing Providers

June 2010

May 2013
E-prescribing Transactions

June 2010

May 2013

< 100
101 - 200
201 - 300
301 - 400
> 400

IN

IHIT
INDIANA HEALTH INFORMATION TECHNOLOGY, INC.
Stage 2 Meaningful Use
“The Consumer Enters”
The iPatient
Consumer Mediated Exchange Challenge Grant
PHR Pilot Outcomes

- 6,776 PHR’s deployed at pilot sites
- All 5 Sub-state HIO’s participating
- Patients Recruiting Friends
- Higher Patient Activation Scores
- Addressing the Challenges
  - Patient ID and Matching/Authentication
  - Data Use Agreements
  - Minor Consents
What Is MyVaxIndiana

The Indiana State Department of Health (ISDH) maintains an Immunization Information System known as CHIRP (Children and Hoosier’s Immunization Registry Program). The purpose of CHIRP is to collect, forecast, manage, and share vaccine data to registered medical providers in Indiana. A provider may include private medical facilities, local health departments, hospitals, schools, and daycares. The program is run under the Indiana Code 16-38-5 which allows for providers and their designees to access to CHIRP. In addition an individual also may access their personal or their dependents vaccine record from either the registered CHIRP provider or directly from the Indiana State Department of Health.

As an update to the existing program, ISDH has created the MyVaxIndiana Immunization Portal which enables a person to access a vaccine record from any computer. To begin this process a registered CHIRP provider will create a patient ID number (PIN) which will grant a person specific patient access to the record they have requested. A parent or guardian could request a PIN to view their dependents immunization history, or any individual could do the same for their own record. They then have a number of options as to how their data can be viewed and saved. This includes an option to print and save the Official Immunization Record, download the record into a file format that may be compatible with their

FAQs

- How do I use this site?
- How can I find a CHIRP provider?

If you have a question that is not answered here, please feel free to contact us at any time. You can email us here or call toll-free at (888) 227-4439. As a tip, if you wish to download your record, please install Adobe Acrobat Reader.
Prescription Drug Monitoring Program (PDMP) Integration

The next public health measure
## Increasing Use of PDMP Data

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<th>LICENSE TYPE</th>
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<th>REGISTERED</th>
<th>TOTAL</th>
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<td>CSR-CERTIFIED NURSE MIDWIFE</td>
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<tr>
<td>CSR-OSTEOPATHIC PHYSICIAN</td>
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<td>DENTIST</td>
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<tr>
<td>NURSE PRACTITIONER</td>
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<td>PHARMACIST</td>
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<td>PHYSICIAN ASSISTANT</td>
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<td>612</td>
<td>841</td>
<td>41%</td>
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<td>PODIATRIST</td>
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<td>1299</td>
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<tr>
<td>RESIDENT</td>
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<td>1394</td>
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<tr>
<td>VETERINARIAN</td>
<td></td>
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<tr>
<td>TOTALS</td>
<td>25454</td>
<td>11783</td>
<td>37237</td>
<td>32%</td>
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1 out of 3 Registered

5,000+ reports/weekday

13,000,000 Rxs/annually

26
PDMP Workflow Integration

- No registration
- No username/password
- No query/search results
- No added steps
- No delay
PDMP Integration Pilot

- There was a **58% reduction** in either prescriptions written or number of pills prescribed.
- In **72% of cases there was more information** in the report than the physician was aware of.
- **100% reported that integrated report was easier to use.**
- 2 out of 3 accessing report in INPC **not** registered w/ INSPECT
- Worst offenders are less active (40% drop in 10+ prescribers/60 days)
- PDMP data integration is permanent with INPC as of January 2013.
- Requests increased from 5,000 to 10,000 daily
- “I have to say that this is probably one of the more genius moves of the 21st century. Having easy access to INSPECT without going to a totally different website and have it pop up instantly has taken a lot of time off of decision making for me. Thanks for spearheading it.”
  
  Wishard ER Physician
HIE/HIT Strategies
HIT as a Foundation

- Improved Quality, Efficiency, Pop. Health
- Care Delivery Innovations
- Provider Feedback & Measurement
- Payment Reform

Health IT Foundation
Opportunities For The State

- Ensure Interoperability between all Stakeholders
  - Public
  - Private
- Drive Public Health through data access
  - INSPECT
  - CHIRP
- Defining the Role of the Consumer
- Leverage HIT Assets and Resources for the Future
- Examine Indiana Statutes and Code for Electronic World
Opportunities For Mental Health Providers

- Maximize EHR Incentives
- Interoperability
  - Connect to HIE
  - Integration with Primary Care
- Defining the Role of the Consumer
- Prep for Medical Home payment models
- Develop Common Consent Practices
Contact Information

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