Connecting Communities Workgroup
January 28, 2014
In-person Planning Session

Participants:

Deb Hemler – IHIE
David Horrocks – CRISP
Tony Scheuth – Point-of-care Partners
David McCallie, MD – Cerner
Phil Tally – American Medical Association
Doug Dietzman – Michigan Health Connect
Ken Rosenfield – eHealth Technologies
Laura Young – Behavioral Health Information
Network of AZ

Peter Kirschbauer – ICW
Brenna Quinn – Siemens
Mike Morgan – Updox
Todd Bennett – LexisNexis
Kevin Mahoney – Emdeon
Stacie Jones – American College of Emergency
Physicians

Meeting Summary:

During eHI's Annual Conference 2014, the Connecting Communities Workgroup held an in-person meeting for stakeholders to weigh in on strategic priorities for 2014 and begin defining the scope of a long-term project for the group to complete during the year. The meeting began with three HIEs sharing their perspectives on the future of health information exchange and trends that will impact the marketplace:

David Horrocks, President, CRISP
CRISP is the statewide HIE for Maryland. CRISP's service offerings currently include query functionality, encounter notifications, and analytics around readmission reporting. In addition to increasing overall utilization of the system among providers, CRISP's priorities for the future include engaging payers (both for sustainability and for coordinating care), public health (an immunization registry and prescription drug monitoring, and bolstering its analytics capabilities to support the population health needs of Maryland's unique reimbursement models.

Deb Hemler, Director of Engagement, IHIE
Though not the state designated exchange for Indiana, IHIE is one of the largest HIEs in the country and covers many of the providers in the state. IHIE's services are built to take advantage of the Network for Patient Care, a data warehouse which is accessed consistently across care settings. In addition to the data warehouse, notable services include clinical results delivery and notifiable condition reporting for public health purposes. IHIE recently established a for-profit subsidiary to apply lessons learned and best practices for data exchange in other states. IHIE is also working to leverage Direct for exchanging CCDs and developing and predictive analytics technology for readmission risk analysis.

Doug Dietzman, Executive Director, Michigan Health Connect
Michigan Health Connect (MHC) is another large, well-established HIE. MHC uses a service-oriented approach to deliver value to stakeholders. By building exchange infrastructure and capabilities in the state, MHC is now looking to meet specific needs within its community. The organization has developed services such as results delivery and electronic lab/radiology ordering, as well as a large electronic referral network. Unlike other HIEs, MHC is not interested in building its analytics capabilities. Rather, the organization works to deliver data that providers want for meeting their own local needs.

Following these short presentations, attendees were asked to identify other issues and priority areas for the workgroup to cover in 2014. Overall, the group acknowledged that the act of sharing information is not sufficient to achieve the greater goals of improving quality and reducing costs. Now that exchange is taking place, what's more important is learning how to operationalize the data being shared to make it relevant at the point of care. For example, organizations are increasingly able to send and receive CCDs, yet in many cases, it's unclear how to best use the document. For complex patients in particular, a CCD may be extremely long. Multiple encounters may generate new CCDs, which may overlap and/or lack

important information. Therefore, one key focus area for the workgroup in 2014 will be to identify and share innovative examples of ways HIEs are empowering stakeholders to use the staggering amount of information that is being generated. Other topics of interest include:

- Strategies for increasing HIE utilization, particularly among ambulatory care providers
- The role of HIE models that aren't traditional RHIOs, community HIEs, or state HIEs, such as private networks, and enterprise HIEs
- Sustainability in the wake of expiring federal funding
- The relationship between HIEs and use of Direct, especially as MU certified products incorporate Direct and providers obtain individual Direct addresses as a result

Finally, attendees discussed ideas for longer-term projects for the workgroup to complete. With a few exceptions, in 2013, Connecting Communities focused primarily on education. In 2014, workgroup members would like to collaboratively work to develop one or two deliverables. Two ideas leveraging the multi-stakeholder nature of the workgroup generated particular interest:

- Define HIE and highlight "bright spots" – The market for information sharing has expanded well beyond the confines of traditional state and community based HIEs. This project would seek to classify various types of information exchange efforts, describe what they look like, and highlight successful examples of each.

- Define exchange functionalities independent of organizations – This project also recognizes the diverse nature of HIEs, and instead focuses on the services and functionalities that are offered. It would seek to identify which services are most valuable in a value-based coordinated care environment while highlighting best practices around development, implementation, and use.