



eHealth Initiative Interoperability Work Group

July 11, 2016

2:00 p.m. ET

Reminder

Please mute your line when not speaking

(* 6 to mute, *7 to unmute)

This call is being recorded



OCTOBER 4-5, 2016
WASHINGTON, DC

Where healthcare challenges find solutions

eHI's Innovation Showcase is on!

Why Attend?

- **Get ready** for your “aha” moment at eHI's Innovation Showcase. Discover new ideas and the healthcare applications to enable your next leap forward.
- **Got a problem?** Find solutions to administrative, infrastructure, workflow, and consumer data integration challenges.
- **Need a partner?** Our innovative environment matches solution developers with healthcare senior executives for results.

We're bringing back the Innovation Challenge! Informative sessions will highlight best practices and innovations from leaders in: Data & Analytics, Interoperability, Privacy & Security and Clinical and Business Motivators.

Space is limited so Register now at <http://events.ehidc.org!>

Agenda

Topic	Timeframe
Welcome and Overview	2:00 p.m.
Challenges and Solutions to HIPAA Security and Privacy, 42 CFR Part 2 Confidentiality in Integrated Primary and Behavioral Health Care <i>Colleen O'Donnell, MSW, PMP, CHTS-IM</i> <i>Policy and Practice Improvement Specialist</i> <i>National Council for Community Behavioral Healthcare</i> <i>Washington, DC</i>	2:05 p.m.
Next Steps	2:50 p.m.

Challenges and Solutions to
HIPAA Security and Privacy,
42 CFR Part 2 Confidentiality
in Integrated Primary and Behavioral Health
Care

eHI Interoperability Work Group

2:00 p.m. ET, Monday July 11th

Colleen O'Donnell, MSW, PMP, CHTS-IM

Policy and Practice Improvement Specialist

National Council for Community Behavioral Healthcare

Washington, DC

Overview

- Ensure common frame of reference
 - What is Privacy and Security?
 - What is Confidentiality?
- Locus of responsibility for patient care in PC/BH integrated care model
- Sharing health information in PC/BH integration

Privacy, Security, Confidentiality

- Compliance with HIPAA - Privacy and Security
 - All patient health information (PHI)
- Compliance with 42 CFR Part 2 – Confidentiality
 - PHI that originates in treatment “program”
 - “Special protections”

- Questions on difference between HIPAA Privacy and Security, and 4 CFR Part 2 Confidentiality?

Primary Responsibility for Patient Care In PC/BH Integrated Care Model – Primary Care

- Patient-centered medical home
- Primary care provider leads team
- Public health care model
- Patients with chronic health condition,
moderate mental illness

Primary Responsibility for Patient Care In PC/BH Integrated Care Model – Behavioral Health

- Patient-centered medical home
- Behavioral Health provider leads team
- Public health care model
- Patients with chronic health condition,
serious mental illness

Questions re: locus of responsibility for patients with chronic health condition and serious mental illness?

Exchanging Information - HIE

- State or Regional Health Information Exchange (HIE)
<http://www.healthit.gov/providers-professionals/health-information-exchange/getting-started-hie>

Exchanging Information - Direct

- Nationwide Health Information Network “Direct”
<http://wiki.directproject.org/User+Stories>
 - Simple, secure, scalable
 - Point-to-point transmission / receipt
 - Network of verified providers
 - Compliance with HIPAA and 42 CFR Part 2
 - More info
<http://nwhin.siframework.org/Direct+Project+Basics>

One Caveat

- Compliance with federal regulations
- States can add regulations
- Organizations can add policies

Information To Be Shared

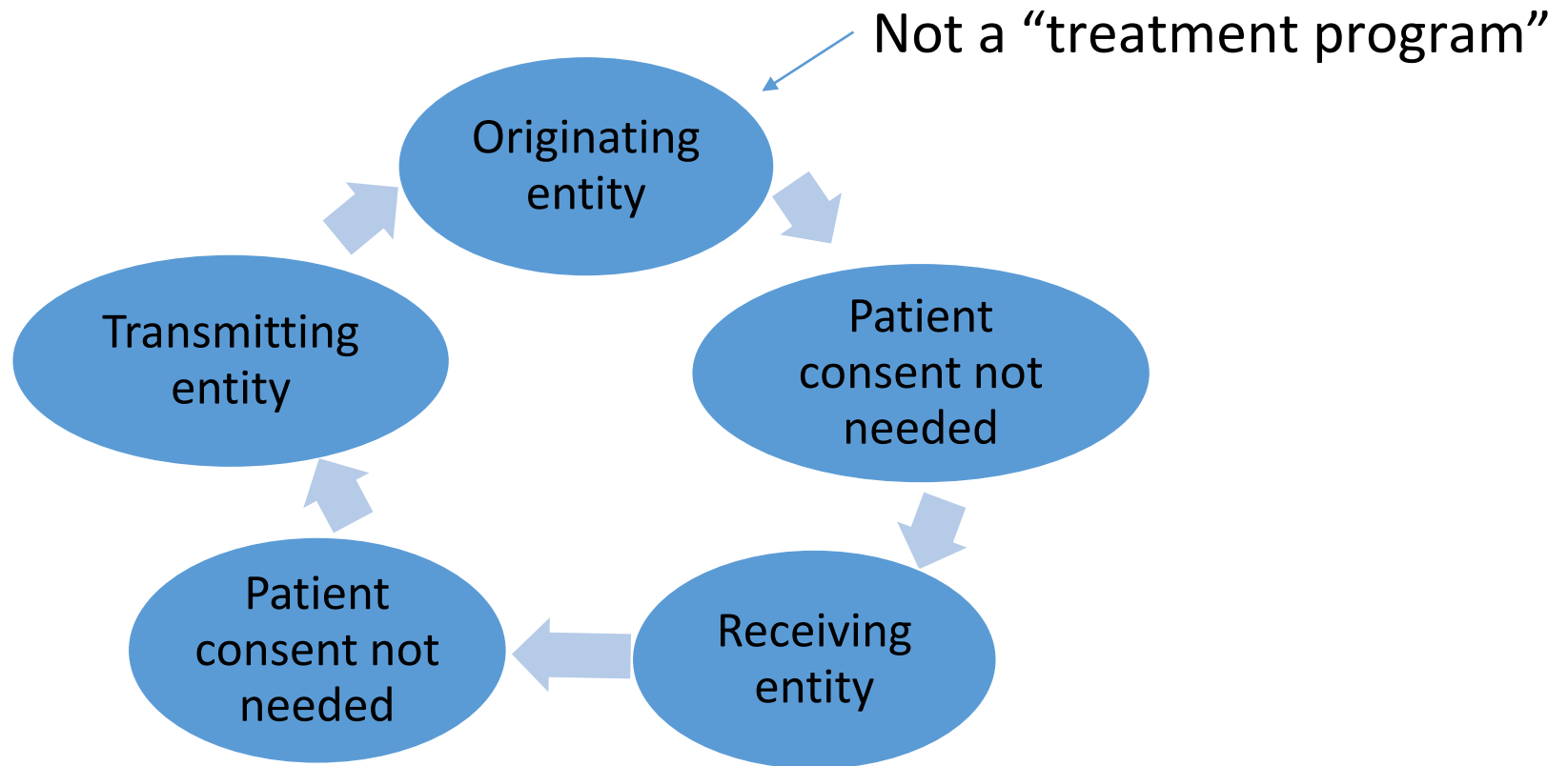
- Common Clinical Data Set = Master
- Transition of Care Summary = subset
- Clinical Summary = subset
- Required for EHRS certification

- Questions on data and technology standards for exchanging patient health information?

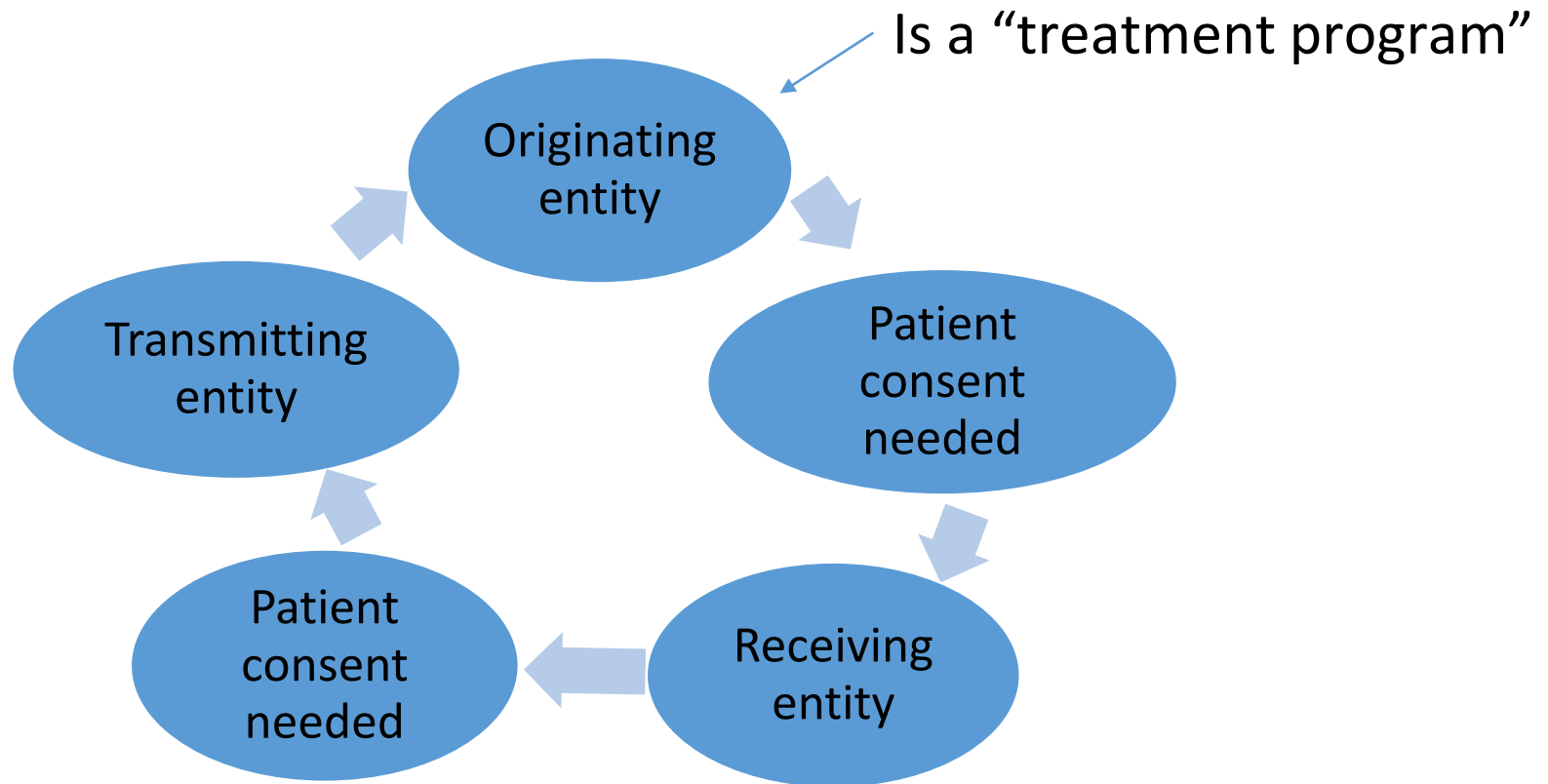
Central Challenge

- HIPAA – no consent required
- 42 CFR Part 2 – consent required
 - For initial release
 - **For re-release**

HIPAA Referral Loop



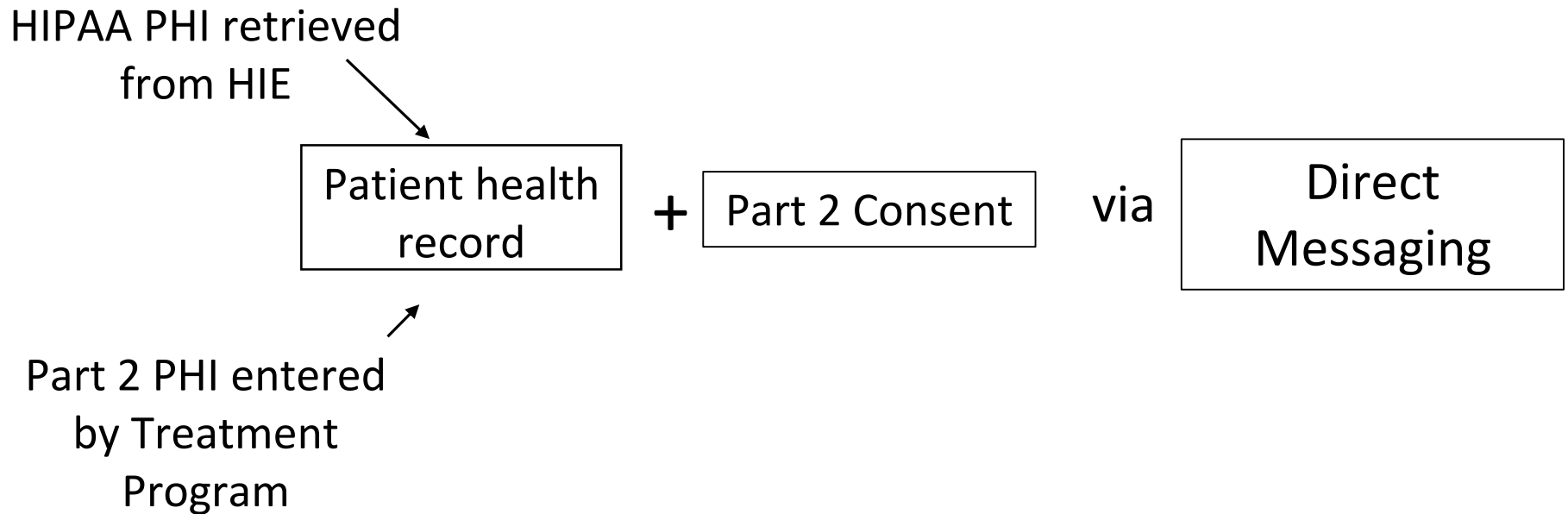
42 CFR Part 2 Referral Loop



State-based HIE vs Direct Messaging

- State-based HIE
 - HIPAA compliance
 - No 42 CFR Part 2 compliance
- Direct Messaging
 - HIPAA compliance
 - 42 CFR Part 2 compliance

Using State-based HIE and Direct Messaging



Steps - Administration

- Identify referral loop network
- Convene decision-makers
- Get Direct Messaging accounts
- Get access to State-based HIE

Steps - Personnel

- Modify policies and procedures
- Educate ALL staff
 - Why to implement
 - When to implement
 - How to implement
 - Multiple scenarios

Summary

- HIPAA protects Privacy and Security, 42 CFR Part 2 protects confidentiality
- SMI + chronic health condition means locus of responsibility for patient care is BH in PC/BH integrated care model
- Sharing health information in PC/BH integration combination of HIE and Direct Messaging

Data Sharing Practices Repository – Timelines

Task	Jan	Feb	Mar	Apr	May	Jun	Aug	Sep
Project Planning	■							
Consult with Related Initiatives		■	■	■				
Solicit Examples			■	■	■	■	■	■
Review Examples				■	■	■	■	■
Develop Repository					■	■	■	■

- Support for outreach
 - Commonwell
 - SHIEC
 - National Council on Behavioral Health
- Further suggestions – personal contacts

2:50 – 3:00

Next Steps for Interoperability Work Group

- Next call -- September 12th
 - No call in August
 - September call on second Monday instead of 1st Monday due to Labor Day
- Agenda
 - Guest Speaker
 - Review Examples
 - Further Outreach

Questions?

Thank you!