Quality Health Network of Colorado – Becky Jessen
Examples of Successful Interoperability

Profile Element	Description	
Responsible Entity	The owner of the project	Quality Health Network, Grand Junction, Colorado
Participating Entities	Types of organizations participating, e.g., hospital, provider	Fire Department/EMS
Description	Short description of the project	Access to advance directives, query for data on what happened to a patient after an emergency call for QA Advance directives are uploaded by community and hospice providers to the HIE. The patient longitudinal record has a location were patient documents these can be uploaded. These are PDFs. EMS is provided by city governments. They query the patient records to see if they could have done something differently to improve care. Did an interview with the Fire Chief. This has had great value.
Standards Implemented	What standards were implemented in the project	No standards change in standards.
Policies Adopted	What policies were implemented/adopted to support the implementation	Outreach education to providers.
Timeframe	Start date, key milestones	Started collecting advance directives in HIE 4 – 5 years ago. Moved from Elysium to Mirth and have to re-educated providers EMS use started using QHN system in June, 2015
Volumes	Quantitative indicators, e.g., number of providers, number of records exchanged	Since the Fire Department has gained HIE access in July, 2015 they have viewed items in the patient longitudinal record 1,535 times
Impacts	Quantitative results, e.g.,	Do not have outcomes on EMS access to advance directives

	reduction in delays, cost savings	
	Qualitative results, e.g., provider satisfaction, perceptions, testimonies	Fire Chief believes that they are able to provide more rapid feedback. Used to be months before they had follow up data, now it is available immediately. More directed feedback helps provide more targeted and focused education/training.
References	Links or attached documents	
Contacts	Point of contact for further information	

Profile Element	Description	
Responsible Entity	The owner of the project	Quality Health Network, Grand Junction, Colorado
Participating Entities	Types of organizations participating, e.g., hospital, provider	Providers, healthcare organization VA Medical Centers
Description	Short description of the project	VA providers have access to QHN data. Can query the patient longitudinal record. Log into the QHN HIE system.
Standards Implemented	What standards were implemented in the project	Query access only. HIE does not have a data feed from VA.
Policies Adopted	What policies were implemented/adopted to support the implementation	
Timeframe	Start date, key milestones	First VA users acquired access in November of 2014, 50 additional users added in June of 2015.
Volumes	Quantitative indicators, e.g., number of providers, number of records exchanged	90% of providers, 80% of healthcare organizations in the HIE service area are connected 20 million clinical results in data repository VA providers have made 49,827 HIE data requests in 14 months since they gained access

Impacts	Quantitative results, e.g., reduction in delays, cost savings	
	Qualitative results, e.g., provider satisfaction, perceptions, testimonies	
References	Links or attached documents	
Contacts	Point of contact for further information	

Profile Element	Description	
Responsible Entity	The owner of the project	Quality Health Network, Grand Junction, Colorado
Participating Entities	Types of organizations participating, e.g., hospital, provider	Hospitals, EDs, providers
Description	Short description of the project	ED and hospital admit and discharge alerts. Hospitals send real time ADT feeds. Some are integrated into their EHRs. Others use SFTP or Direct messaging. Lots of variations in how the providers and care team want the messages. Depends on practice work-flow and EHR capability. There are some ACOs in the area and CPCI projects and PCMH Variability in vendor ability to integrate into EHR.
Standards Implemented	What standards were implemented in the project	ADT messages
Policies Adopted	What policies were implemented/adopted to support the implementation	Providers can subscribe to messages for a subset of patients. Can load that panel for them. Let's them do population health. Hospital registration does not always record, or incorrectly records, PCP. Patients may not always correctly identified their PCP.

Timeframe	Start date, key milestones	8 – 10 months
Volumes	Quantitative indicators, e.g., number of providers, number of records exchanged	60,424 alerts in Q2 2015 to 42 practices/organizations 61,330 alerts in Q3 2015 to 63 practices/organizations
Impacts	Quantitative results, e.g., reduction in delays, cost savings	
	Qualitative results, e.g., provider satisfaction, perceptions, testimonies	Anecdotal – One family of five had used the ED 62 times in the past year. Got them connected to a Spanish translator and helping them understanding their care options. ED has not been utilized since.
References	Links or attached documents	
Contacts	Point of contact for further information	

Profile Element	Description	
Responsible Entity	The owner of the project	Quality Health Network, Grand Junction, Colorado
Participating Entities	Types of organizations participating, e.g., hospital, provider	Rocky Mountain Orthopedic Associates
Description	Short description of the project	Medical records team assembles data from QHN in preparation for a patient visit. Download into their EHR. Done as a PDF.
Standards Implemented	What standards were implemented in the project	Uni-directional HIE interface and patient longitudinal record query access
Policies Adopted	What policies were implemented/adopted to support the implementation	

Timeframe	Start date, key milestones	From the beginning of QHN
Volumes	Quantitative indicators, e.g., number of providers, number of records exchanged	Practice averages 4,500-5,000 reports from QHN downloaded each month.
Impacts	Quantitative results, e.g., reduction in delays, cost savings	
	Qualitative results, e.g., provider satisfaction, perceptions, testimonies	Feel like they could not practice without this information
References	Links or attached documents	
Contacts	Point of contact for further information	

Profile Element	Description	
Responsible Entity	The owner of the project	Quality Health Network, Grand Junction, Colorado
Participating Entities	Types of organizations participating, e.g., hospital, provider	Hospice care organizations
Description	Short description of the project	Access to advance directives Review of patient records to determine if they are appropriate for hospice care Determine if patient meets Medicare criteria
Standards Implemented	What standards were implemented in the project	Probably not.
Policies Adopted	What policies were implemented/adopted to support the implementation	None

Timeframe	Start date, key milestones	2006
Volumes	Quantitative indicators, e.g., number of providers, number of records exchanged	Would be difficult to qualify people for hospice care without the record. Can query the record instead of querying far flung providers. This done for every admission. Can do 24 x 7. Hospice providers have made 19,988 HIE data requests in the last 5 months (7/1/2015-11/30/2015)
Impacts	Quantitative results, e.g., reduction in delays, cost savings	Probably a number of patients can get access hospice care because they are able to be qualified.
	Qualitative results, e.g., provider satisfaction, perceptions, testimonies	1 – 2 unnecessary resuscitations per month. Speculating that this might be going down
References	Links or attached documents	
Contacts	Point of contact for further information	