



Connecticut Direct Messaging Service Overview

Simple. Secure. Seamless.
Your key to healthcare communications.

December 17, 2015



Overview

- Introduction
- Connecticut Direct Messaging Program
- Connecticut Direct Landscape
- Direct Exchange - HIE Use Cases
- Expanding Current Program
- Q&A



Introduction

- We help our customers secure, streamline, manage and control health information exchange.
- Secure Exchange provides encryption, routing and directory services for **Direct secure information exchange of PHI** between hospitals, providers, patients, and health information exchanges (HIEs).
- A leading **Health Information Service Provider (HISP)** and **Certificate Authority (CA)**, we provide our customers a standard model for Direct exchange that integrates with existing provider workflows and electronic health record (EHR) systems.
- **Established Customer Base** - Nationwide, state, regional, IDNs and hospitals, providers, HIEs, health plans and EHR and HIT vendors rely on SES to support Direct exchange



Leveraging the Direct Standard

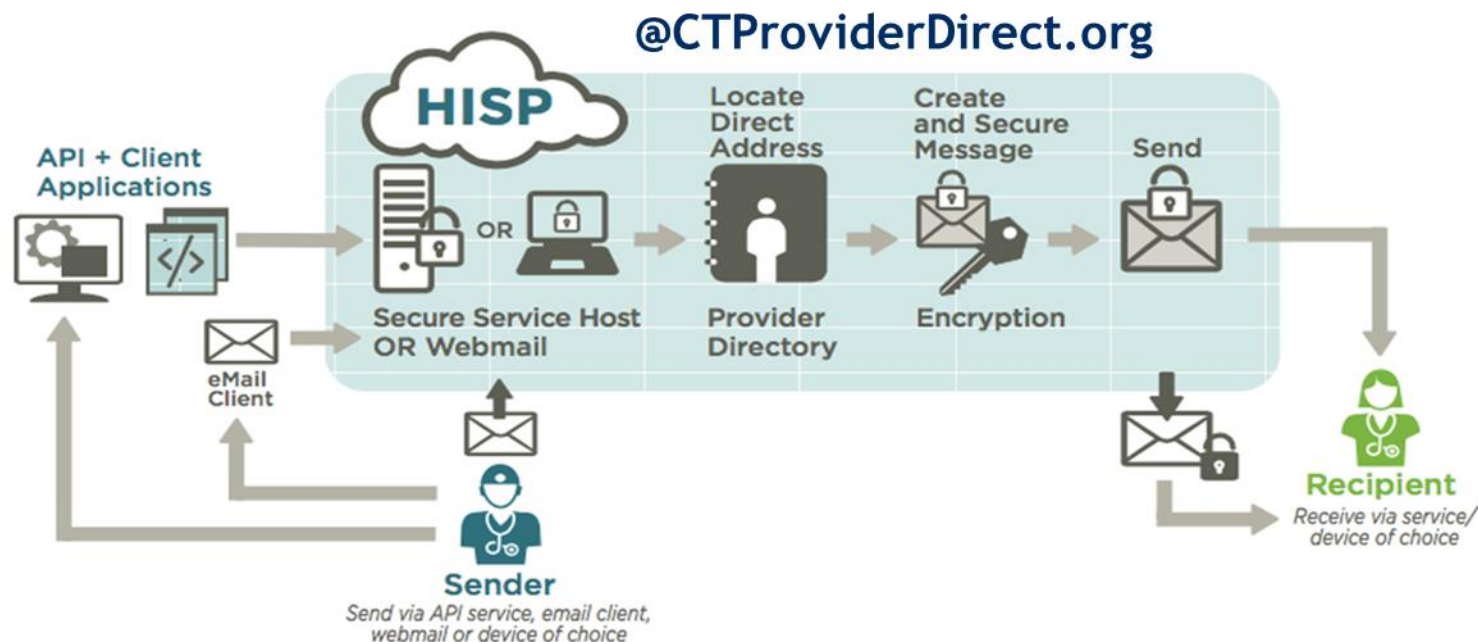


- Developed by a public-private collaboration called the Direct Project and sponsored by the Office of the National Coordinator for Health IT (ONC) in 2010.
- An integral component of Meaningful Use objectives and designed to support the goal of health information exchange between providers using electronic health records (EHRs) engaged in Meaningful Use.
- Direct exchange is part of a long term national strategy to transition from paper-based to electronic health care records that can be shared more easily to reduce costs and improve the quality of patient care.
- Most EHRs were not designed to be inherently capable of exchange with other EHRs - Direct helps to solve this problem and encourages interoperability.



Connecticut Direct Messaging Program

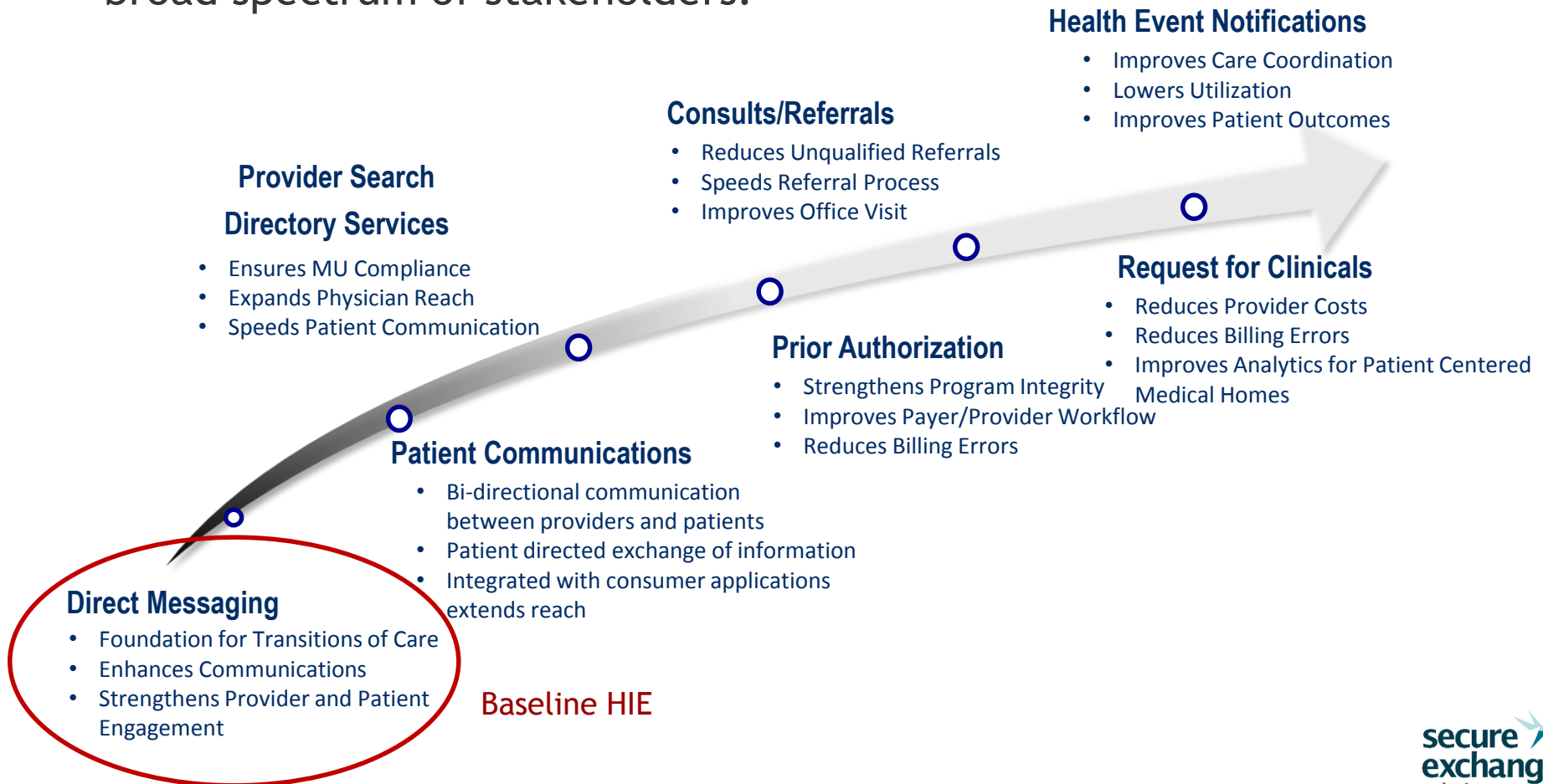
- ✓ Standards based approach, supports manual and automated model
- ✓ Push method for HIE, provider or patient can elect to transmit information
- ✓ Can be used by any community provider, with or without an EHR
- ✓ Access available to CT MU enabled providers through their current systems or through the CT Provider Direct portal
- ✓ Direct is integrated into existing provider EHR workflows for sending and receiving clinical data to support transitions of care (C-CDAs)
- ✓ Optimized and scalable to support other use cases (alerts, referrals)





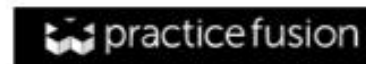
Step Approach to Improving HIE

Direct provides the foundation for other value added services that are important to providers and patients. Combined with other services, it supports baseline exchange across a broad spectrum of stakeholders.





Sampling of EHR Reach through Direct



Exchange with over 300 EHRs, 50+ HIEs

Participation in Provider and Patient Trust Bundles

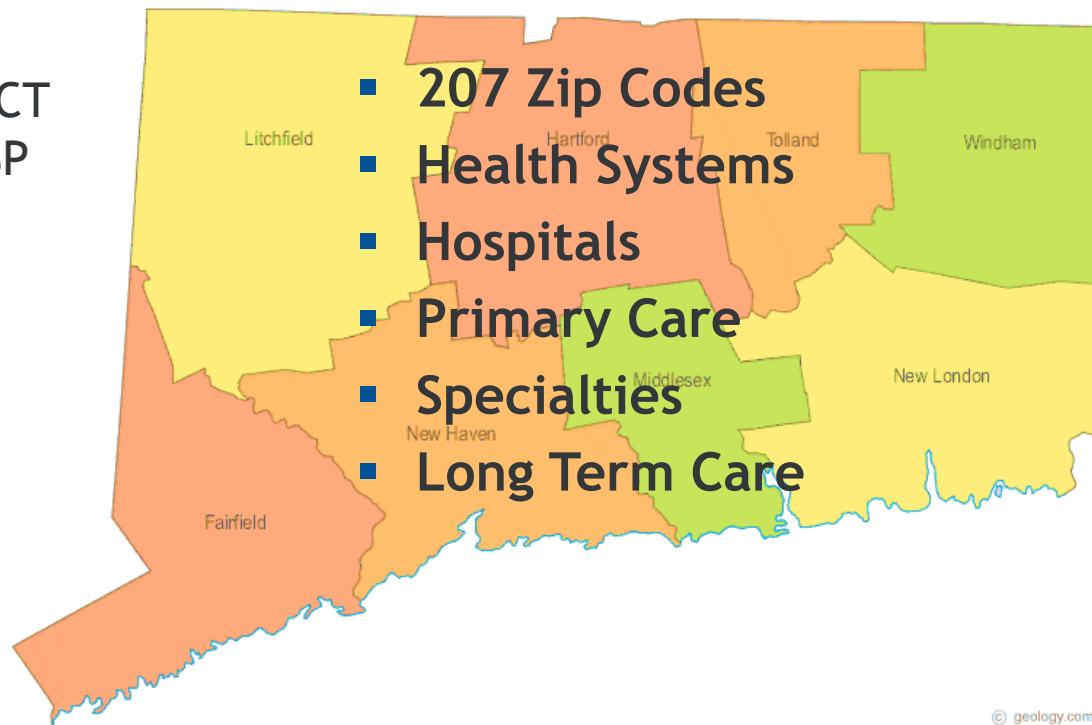
60+ Integrated Specialty HIT Application Partners





Direct Landscape - Connecticut and Beyond

- 100+ Direct endpoints
 - CT Provider Direct community
- 6832 Direct endpoints in CT available thru HISP to HISP Directory exchange:
 - SES
 - Surescripts
 - AthenaHealth
 - NextGen
 - eClinicalWorks
 - DataMotion
 - Med Allies
- Beyond CT, 1M Direct endpoints in DirectTrust representing 40,000 organizations





Example Use Cases

- Care Transitions
- Referrals/Consults
- Care Management (health event notifications)
- Lab Orders/Results
- Patient Engagement
- Prior-Authorizations and Clinical Queries
- Reporting



Use Case: Care Transitions



Key Benefits reported:

- Faster, More Accurate Diagnosis and Treatment (i.e. emergency room)
- Support for Patient Safety (i.e. drug-drug or drug-allergy contraindications)
- Improved Transitions of Care (i.e. post discharge)
- Improved Coordination of Care (i.e. home health)
- Reduced Administrative Burden (i.e. automated lab results delivery/consumption)
- Avoidance of Duplicative Diagnostics (i.e. repeat x-rays)
- Support for a Continuously Learning Health System (i.e. support for population health efforts)
- All leading to better patient outcomes and cost saving

Key Challenges:

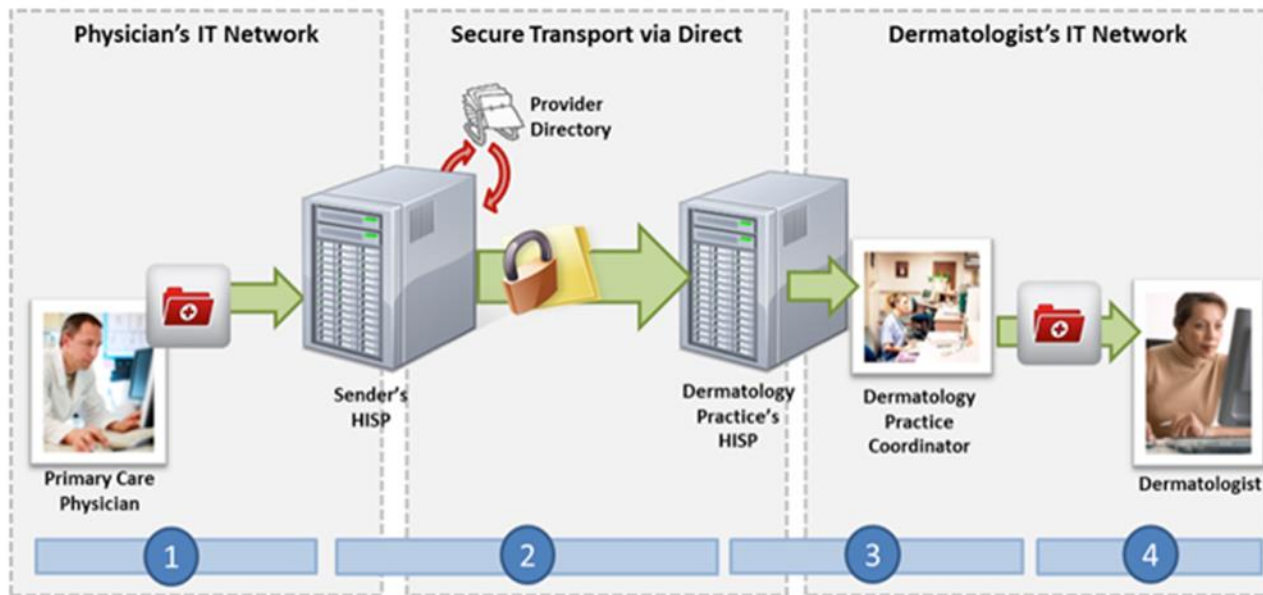
- Integration with Provider Workflows (technology meeting provider workflows)
- Complex Patient Privacy and Security Environment (disconnect between public policy/opinion and technology capabilities)
- Conflicting Priorities for HIT Resources (both for providers and vendors - it's hard to implement HIE when you are still trying to implement EHR)
- Cultural History (data silos and competition vs. collaboration)



Use Case: Referrals and Consults

Transferring Records between Providers

A physician transfers a patient's medical records to a different provider practice:



A patient is referred to a dermatologist practice by his primary care physician. Because the patient's conditions require care from a dermatological specialist but are not unique enough to necessitate a visit from a particular type of dermatologist, his primary care physician feels comfortable referring him to a general dermatology practice. The primary care physician transfers his patient's records to the dermatology practice office via a Direct group practice address (one that is not specific to an individual physician). The dermatology practice coordinator schedules the patient with one of their specialists and the records are forwarded.



Integrated into the Provider EHR workflow

The screenshot displays a 'Direct Messages' interface. On the left, a sidebar lists message categories: Inbound, Outbound, Processed, Sent from Portal, and Deleted. The main area shows a list of messages with columns for Date/Time, From, To, and Subject. Below the list, two windows are open:

- New Message:** A form for composing a message. Fields include 'From' (gmedtest2@service.directaddress.net), 'To', 'Subject', and 'Attachment'. A 'Send' button is at the top left.
- Transmit Record:** A detailed view of a message transmission. It shows the sender (gmedtest2@service.directaddress.net) and the subject (Transition of Care Summary). It includes a 'Use file as of' timestamp (03/25/2014 10:45:11 AM) and a table for referrals:

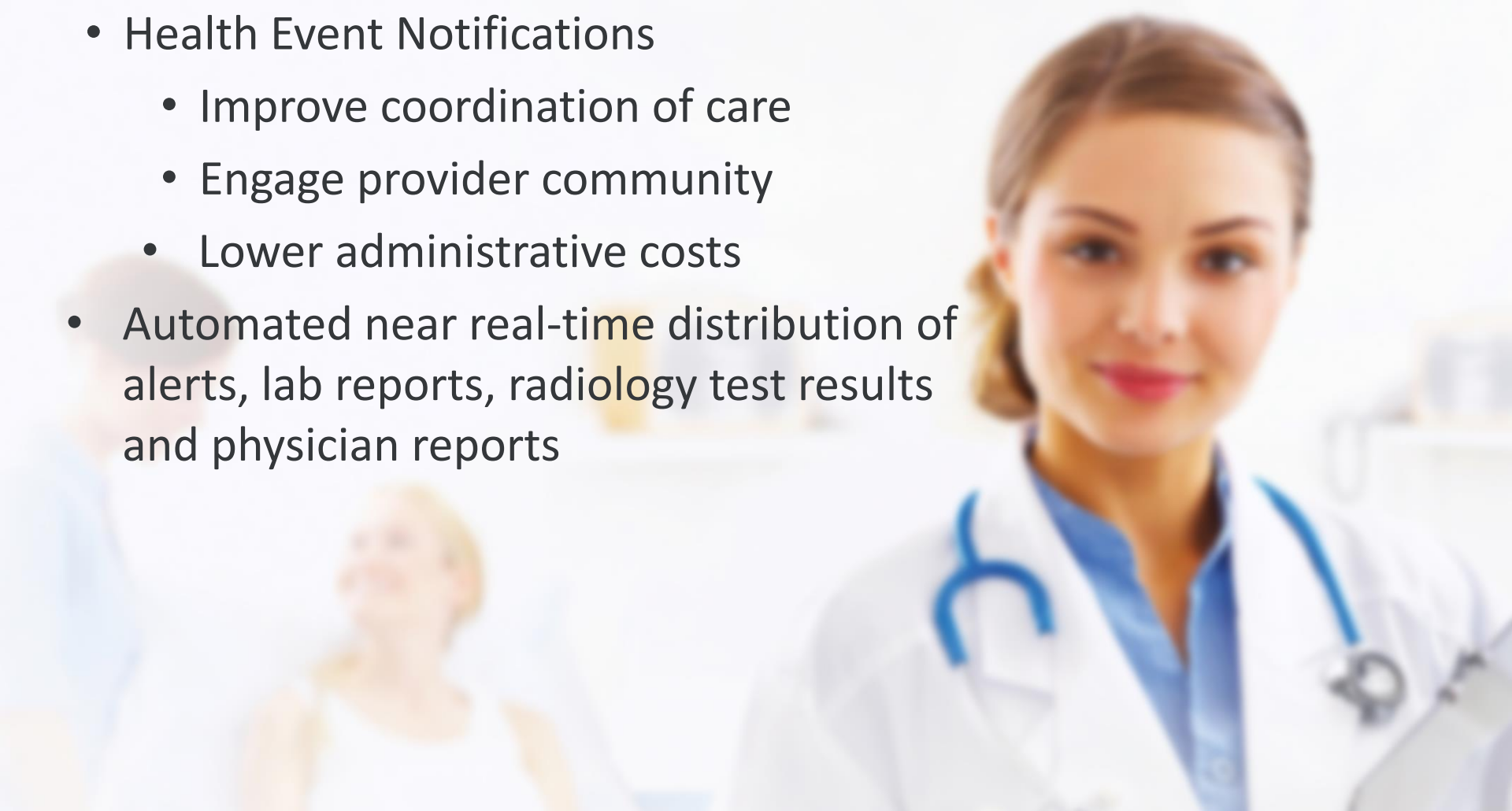
| Order Title | Refer To | Direct Address |
|-----------------------------------|---------------|-----------------|
| <input type="checkbox"/> referral | Institution 1 | test@direct.net |

It also features checkboxes for 'Send electronically to referrals', 'Save to a file', and 'Clinical Summary'. A second 'Use file as of' timestamp (03/25/2014 10:45:18 AM) and a 'Customize Data Elements' button are also present.



Use Case: Care Management

- Health Event Notifications
 - Improve coordination of care
 - Engage provider community
 - Lower administrative costs
- Automated near real-time distribution of alerts, lab reports, radiology test results and physician reports





Business Challenges Addressed

- Traditional care coordination and transition programs have been more hospital centric and related to patient discharges. When patients are admitted to the hospital, both primary care physicians and local community (non-surgical) specialists may need to be notified.
- ACO case managers need timely notifications about hospitalizations to act promptly, and direct patients to the most appropriate care settings. In addition, additional event information (place of discharge) is needed to better support patient care and coordination.
- Practices don't know how many of their patients are being hospitalized
- Improvement desired in timely communications
 - Admission Alerts
 - Discharge Alerts
 - Clinical Event Alerts (abnormal lab)
- Real time notification of clinical events for practice patients



Expanding Connecticut Direct

- ✓ Automated health event notifications provides immediate benefits to CT stakeholders
- ✓ Leverages existing Connecticut HIT Assets
 - ✓ Connecticut Provider Directory
 - ✓ Enterprise Master Patient Index
 - ✓ Augments future HIE platform investments
- ✓ Sustainable model, demonstrated in other states
- ✓ Augments state-wide HIE when implemented
- ✓ Rapid implementation demonstrating results in 2016



Q&A / Thank You

For More Information, Please Contact:

Michele Darnell
Vice President Sales

M: 703.966.6842

Email: mdarnell@secureexsolutions.com

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