Conversation with the Connecticut Statewide Health IT Advisory Council

Dan Paoletti, CEO
The Ohio Health Information Partnership
CliniSync Health Information Exchange
January 13, 2016

The Partnership was created in
August of 2009 as a 501c3 in
collaboration with the
Ohio Department of Insurance.

Founders/Members

Initial Funding

Our work started with the Regional Extension Center (REC) helping over 6,000 EPs to meet Meaningful Use.

REC

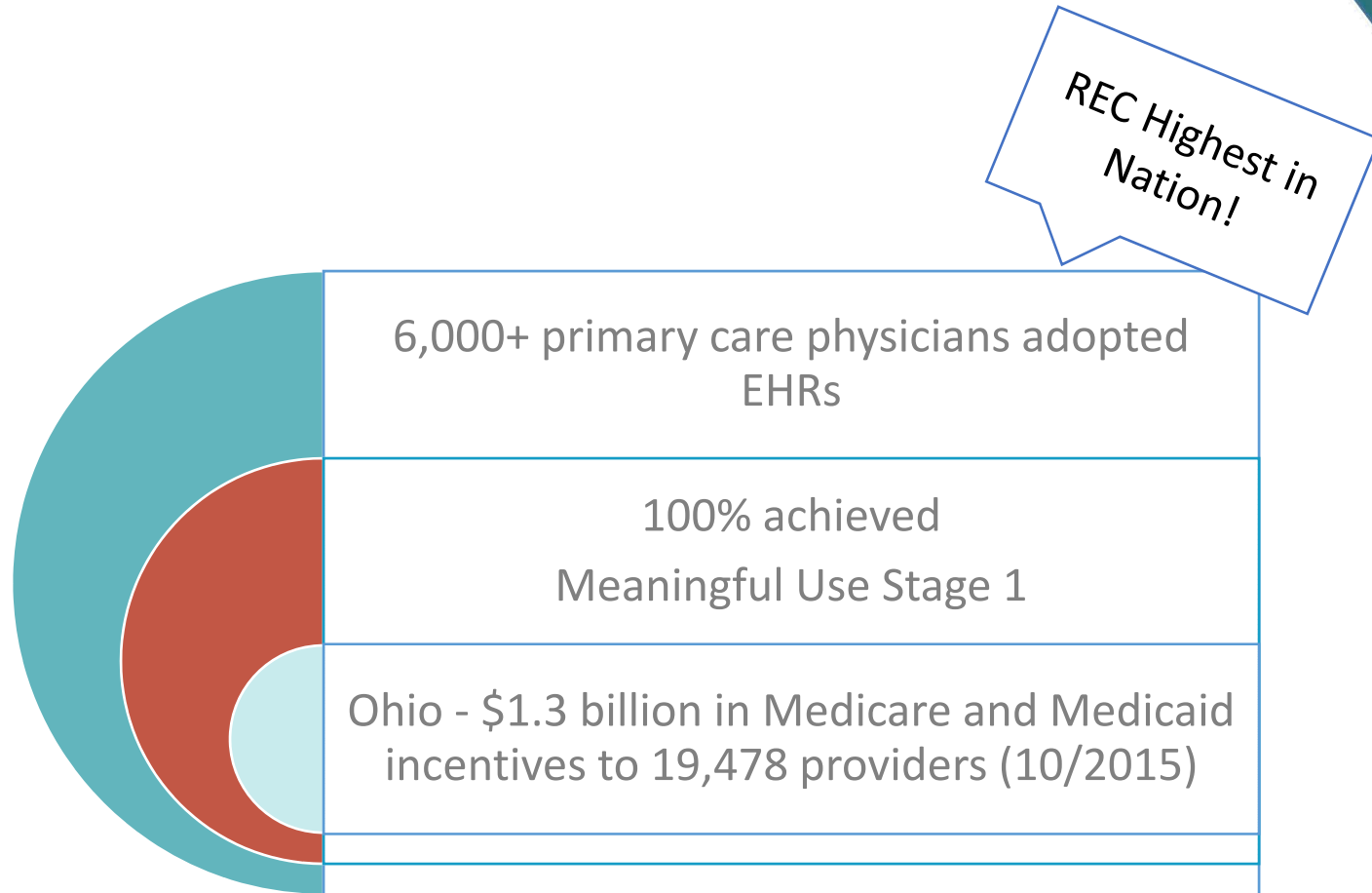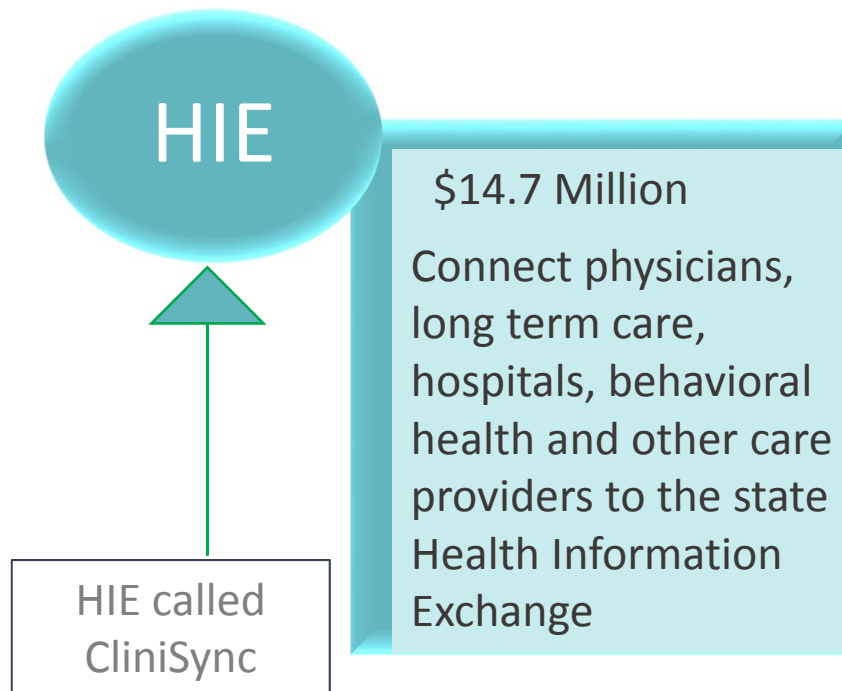$28.3 Million

Assist providers in EHR selection, implementation and achieving Meaningful Use

REC Results

REC Highest in Nation!

6,000+ primary care physicians adopted EHRs

100% achieved
Meaningful Use Stage 1

Ohio - $1.3 billion in Medicare and Medicaid incentives to 19,478 providers (10/2015)

Initial Funding for HIE

In 2011 we began the HIE as the State Designated Entity for Ohio (from 2009 to 2011 was all planning). First Hospital implementation began in 2012.

HIE

HIE called CliniSync

$14.7 Million

Connect physicians, long term care, hospitals, behavioral health and other care providers to the state Health Information Exchange

- RFP was issued: *Sept 2010*
- Award and Contract signing Occurred: *Apr 2011*
- ONC signed off: *Jul 2011*

Ohio State Law on HIE

In 2012, statutory language governing HIE was put in place in an attempt to better align Ohio law with HIPAA

Ohio Revised Code,
Chapter 3798

http://codes.ohio.gov/orc/3798

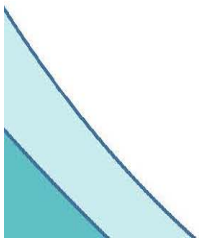*Health information exchange isn't just about technology, it's about community and trust.*
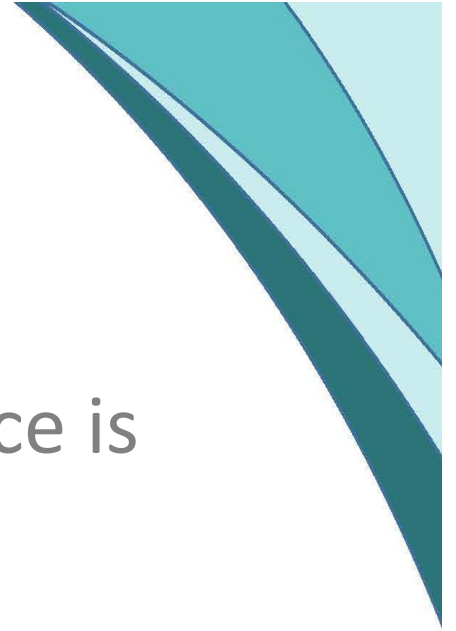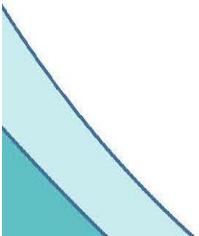
Outreach

Understanding the local marketplace is key to outreach.
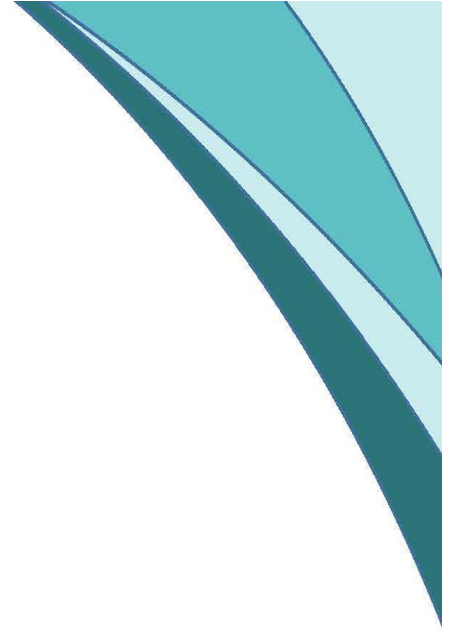
Local Champions are essential.

Philosophy

Grassroots effort driven
by the community
pushing participation.

Philosophy

- Primary Stakeholders are those that use the information to care for the patient.

- Community-wide goal is to allow data to follow the patient.

- Relationship with the Patient is between the Patient and the Clinical and Provider community.

Consent Model

2011 to 2015 was Opt In
2016 CliniSync is moving to Opt Out

Governance
Board of Directors

Board Structure

- Governed by Code of Regulations

- 16 Board Members – 3 Founding Members and 13 Members as designated

- Member seats by stakeholder type:

  - 3 Provider Association Members (Founding)
  - 3 Physicians
  - 2 Hospitals
  - 4 At Large Seats (includes LTC)
  - 1 Each Consumer, FQHC, Payer and Business Reps

Board Responsibilities

- Vested with the management of the business and affairs of The Partnership

- Assists in the achievement of The Partnership's mission and purposes and sets both goals and policies for their implementation

- Sets the compensation for executive officers

- Has the right to engage advisors to the Board, such as accountants and legal counsel

- Must approve other key financial, membership and legal matters

Governance
CliniSync Advisory Council (CAC)

CAC Responsibilities

CAC provides a stabilizing influence so that organizational concepts and directions are established and maintained with a visionary view. Members of CAC ensure those most engaged in the program are establishing services to meet business priorities.

The primary goals of CAC are to:

- Advise the Board on operational and strategic improvements
- Review operational direction - current and future
- Establish a Product Roadmap
- Contribute Policy Guidance (e.g., auditing, consent, access requirements)
- Assist with evaluating HIE development strategies and lessons learned
- Create polices for information exchange and the HIE use

Ohio's CliniSync HIE

Total Contracted Hospitals: 150

Green: CliniSync Live Hospitals (111)

Yellow: In implementation

Blue: HealthBridge Live Hospitals (20+)

Almost 95% of hospitals in Ohio have committed to an HIE.

Over 92% of 11.5M Ohioans will be served.

Hospital Implementation

Data Collection	Data Analysis	Certification Testing	Production
8	**3**	**19**	**111**

Data Collection (8)
- Community Memorial Hicksville
- Magruder Hospital
- The Medical Center at Elizabeth Place
- Wood County
- O'Bleness Memorial
- Wyandot Hospital
- Lake Health (2)

Data Analysis (3)
- Wayne Community
- Knox Community Hospital
- Samaritan Regional

Certification Testing (19)
- Firelands
- Fisher Titus
- Harrison Community
- Holzer Health System (2)
- Ohio State (6)
- Wilson Memorial
- Summa Health (4)
- Akron Children's (2)
- METROHealth

Production (111)
- **Adena Health System (3)**
- **Akron General (3)**
- **Alliance Community**
- **Aultman (3)** – Lab Only
- **Avita (2)**
- **Barnesville**
- Bellevue
- **Berger Hospital**
- **Blanchard Valley (2)**
- Cleveland Clinic (12)
- **Coshocton County**
- **Community Health and Wellness (3)**
- **Dayton Children's**
- **East Liverpool**
- **Elyria Memorial**
- Fairfield Med Ctr
- Fayette County
- **Fremont Memorial**
- **Fulton County**
- **Grand Lake/Joint Twp**
- **Genesis (2)**
- Henry County
- Hocking Valley
- **Humility of Mary (3)**
- **Joel Pomerene Mem Health**
- **Kettering (6)**
- **King's Daughters** - Rad only
- **Licking Memorial**
- **Lima Memorial**
- **Marietta Memorial (2)**
- **Mary Rutan**
- MedCentral/Ohio Health Mansfield(2)
- **Mercer County**
- **Mercy Canton**
- **Mercy Lorain (2)**
- **Memorial Hospital Union County**
- **Mercy Toledo (7)**
- **Morrow County**
- **Mount Carmel Health System (4)** – Rad/Trans only
- **Nationwide Children's** - Rad only
- **Parma Community**
- **Premier Health Partners (4)**
- **Robinson Memorial**
- **Salem Community**
- **SEORMC**
- **St. John**
- **Saint Rita's (2)**
- **St. Vincent Charity**
- **Southern Ohio Med Ctr**
- **Southwest General**
- **Trinity Health (2)**
- **Union Hospital**
- **University Hospitals (9)**
- **University of Toledo Med Ctr**
- **Van Wert**
- **Wooster Community**
- Western Reserve

*Signed off on results delivery

**141 in Process
9 Getting
Ready to Start**

Total Active Hospitals

As of 12/14/2015

19

Statewide Participation

- 4,886 physicians in 1,229 practices are live on CliniSync.

- Includes home health, behavioral health, optometry, chiropractor, pharmacists and independent laboratories

- 365 long-term, post-acute care facilities are contracted and in implementation.

- Our provider directory includes 15,000 direct email addresses.

- Several payers engaged –contracted or finalizing contracts.

- *Home Health, Behavioral Health, Optometrists, Chiropractors, Pharmacists.*

Data Contribution (Hybrid-Federated Model)

- 8 million patients in Master Patient Index for HIE

- HL7 (Most Hospitals)
  - ADT
  - Lab, Micro, Pathology and Blood Bank
  - Radiology and sub-ologies
  - Transcription
  - Some CCD/CCDA (mostly for hospital employed physician practices)
  - Public Health Reporting

- ADT/Registration and CCD/CCDA
- Referrals and other communications in the Referral Application
- Eligibility Files
- Beginning pharmacy, optometry and other services.
- Looking at claim contribution
- Provider Directory for Transitions of Care
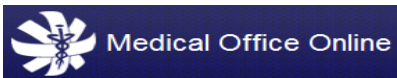- Public Health Reporting

Integration

In Ohio, 30 VENDORS

Vendors

CLINISYNC CURRENT SERVICES

Connect

Community Health
Record
Clinical Results Inbox
DIRECT Messaging
Health Plan Services

Integrate

Clinical Results & Reports
Delivery
Electronic Orders
Integrated DIRECT Messaging
Access to Community Health
Record

Notify

Admission &
Discharge
Notifications

Contribute

Public Health Reporting
Summary of Care Document
(CCD)
HL7 Interfaces
CCD Parsing

Consult

CliniSync Community
Liaisons
Meaningful Use & More

DIRECTory

DIRECT email
addresses of
providers

CONNECT

- **Community Health Record**

  Access a single community record of your patients' health encounters at hospitals and with other providers through CONNECT, providing a comprehensive picture of a patient's health history.

- **Clinical Results Inbox**

  Receive clinical results and reports through CONNECT. You can receive lab results, radiology and transcribed reports directly into a secure, integrated inbox, or into your electronic health record system.

- **Referrals**

  Electronically send and receive customized patient referrals with confirmation and tracking in real time through CONNECT. Your staff can streamline the referral process to reduce phone calls and faxing.

- **DIRECT Messaging**

  CONNECT with other providers using our HISP (Health Information Service Provider) by sending and receiving secure messages, called DIRECT.

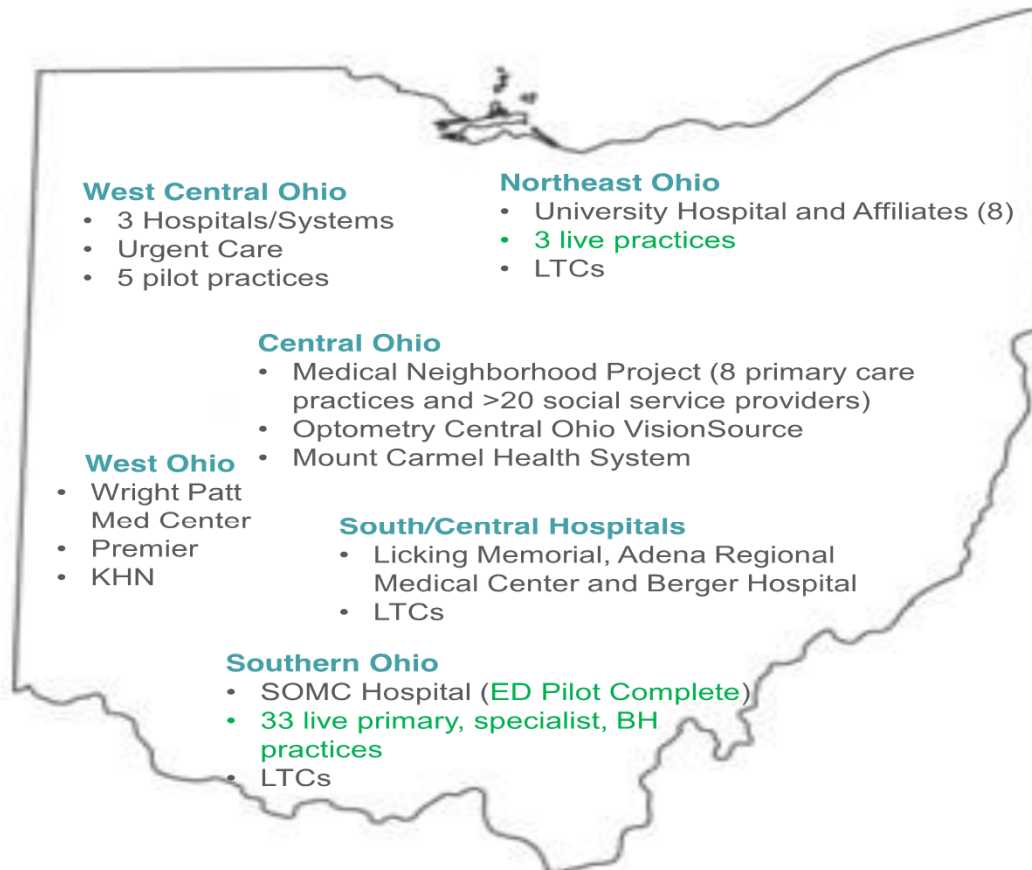# Certifications & Accreditations

- Accredited
- Testing with VA

- Certified

CONNECT

Community Health Record Rolled Out
March of 2015

CONNECT

Where are the early adopting CHR Communities?

West Central Ohio
- 3 Hospitals/Systems
- Urgent Care
- 5 pilot practices

Northeast Ohio
- University Hospital and Affiliates (8)
- 3 live practices
- LTCs

Central Ohio
- Medical Neighborhood Project (8 primary care practices and >20 social service providers)
- Optometry Central Ohio VisionSource
- Mount Carmel Health System

West Ohio
- Wright Patt Med Center
- Premier
- KHN

South/Central Hospitals
- Licking Memorial, Adena Regional Medical Center and Berger Hospital
- LTCs

Southern Ohio
- SOMC Hospital (ED Pilot Complete)
- 33 live primary, specialist, BH practices
- LTCs

- Tremendous interest in service including LTC/BH Community
- Green pilot sites live; others implementing
- Majority of patients opting-in
- Beginning with automated consent
- Hospitals focusing on ED/Urgent Care

CONNECT

Total Patients Since Inception: 8,777,781

By Year

Yearly Total

Year	Yearly Total
2011	22,401
2012	416,664
2013	2,095,089
2014	1,707,104
2015	4,536,523

CONNECT
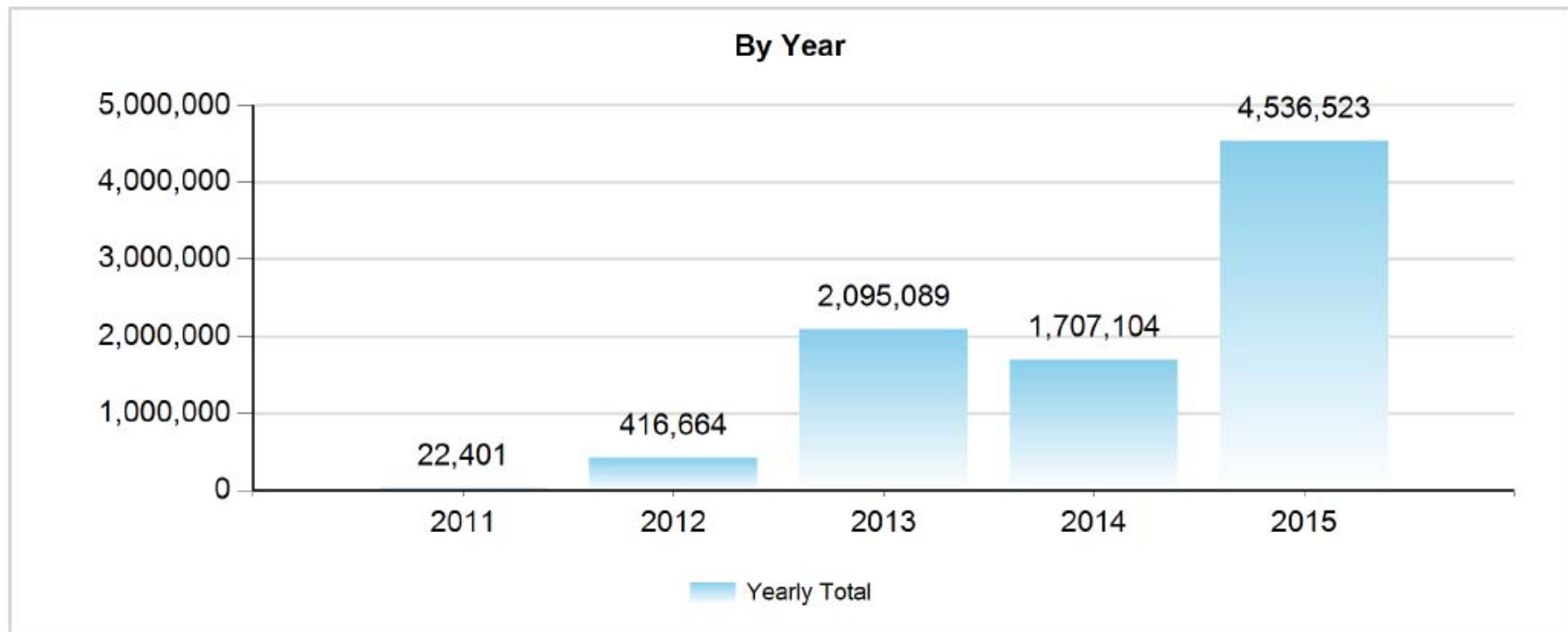
Integration into the National Prescription Drug Monitoring Database

Working with the Ohio Board of Pharmacy to integrate the PDMP into the Community Health Record

CliniSync Web-Based Portal

OUR VISION IS TO IMPROVE ELECTRONIC COMMUNICATION AMONG THOSE WHO TOUCH A PATIENT'S CARE SO WE CAN IMPROVE HEALTH CARE FOR ALL OHIOANS

CliniSync is a health information exchange application, developed and sponsored by the Ohio Health Information Partnership. CliniSync provides secure, encrypted access to confidential patient information. Only authorized users are permitted to access this application. Under federal HIPAA regulations, it is a criminal offense to disclose or misuse patient healthcare data.

Ohio Health Information Partnership
Health Information in a Heartbeat

Username

Password

LOG IN

Reset Password

Powered by
MEDICITY℠

Lesson Learned

Absolutely critical to keep
providers in their EMR
experience

CONNECT

Key Deliverables for Q1-2016 to Q2-2016

Disseminate a CCDA/CCD that is published to the CHR to allow for actionable data to be ingested into an EMR in a meaningful way. Allow CCDA/CCDs contributed through our Affinity gateway and parsed to be added discretely to the CHR.

Query directly from a provider's EMR to access this information for care of the patient.

Broad data contribution from Ambulatory, Long-Term Care, Home Health and Pharmacies are going to be key to payment reform.

CONNECT

Key Deliverables for 2016

Clinical Data Marts for use for development projects

INTEGRATE

- ## Clinical Results Delivery
  INTEGRATE patients' lab results, radiology and transcribed reports into your EHR system, including, care summaries, history & physicals progress notes and more.

- ## Electronic Orders
  If your hospital chooses to participate in Electronic Orders through INTEGRATE services, you can place orders directly from your EHR system to the hospital without interrupting your workflow.

- ## Integrated DIRECT Messaging
  With Integrated DIRECT messaging, you can send and receive secure messages from within your EHR system to other providers and these become part of your patient's health record.

NOTIFY

- **Admission and Discharge Notifications**

    - Receive a notification when one of your patients goes to the Emergency Department or is admitted to a hospital or discharged from it.

    - Notify is a subscription-model service that automates delivery of ADT health event notifications as they happen throughout the network.

    - This service is designed for the Case or Utilization Manager to quickly be alerted to ADT events particularly for high-risk patients.

    - Subscriber chooses event type, frequency and delivery method. Delivery methods include text message (SMS*), email*, secure email, secure web portal and/or .CSV output.   HL7 delivery on road map.

Options for ⚡ Notifications

- **Admission and Discharge Notifications**

  - Reports Delivery - receive an ADT Face sheet – routed based upon provider indicated in registration.

  - Notify – provider can post patient panel or routed based upon provider indicated in registration.

  - Gateway – ADT or Registration feed is queued to also create patient panel. HL7 messages are sent based upon filtering and routing options

CONTRIBUTE

- **Public Health Reporting**
  Use CliniSync to report public health data to the Ohio Department of Health.

- **Summary of Care**
  Contribute care summary documents to the Community Health Record.

- **HL7 Interfaces**
  Contribute clinical results to CliniSync for other providers to access.

PROVIDER DIRECTORY

- **Access a Provider Directory**

Gain access to a secure Provider DIRECTory that includes DirectTrust or secure email addresses of other physicians and providers to improve transitions of care.

Progress in LTPAC Sector

|	
LTC/SNF	• 365 facilities
Home Health	• 48 organizations
Hospice	• 4 organizations

CONNECT
Services for Health Plans

Working or contracting
with several large health
plans

HIE Services for Health Plans

Integrated Solutions		Electronic Communication Solutions		
Integrate	**Contribute**	**Notify**	**Connect**	**DIRECTory**
Admission & Discharge Data	**Summary of Care (CCD)**	**Admission & Discharge Notifications**	**DIRECT Messaging**	**Access a Provider DIRECTory**
Receive hospital visit information directly into your system when one of your enrollees goes to the ER or is admitted to a hospital.	Contribute care summary documents to CliniSync for providers to access at the point of care.	Receive a notification via text, secure email or secure portal when one of your enrollees goes to the ER or is admitted to a hospital.	Receive electronic care summaries from your providers via secure email	Gain access to a secure Provider DIRECTory that includes DirectTrust or secure email addresses of other physicians and providers to improve transitions of care.
Clinical Results & Reports Delivery			**Referrals**	
Receive lab results, radiology and transcribed reports directly into your system, such as care summaries, history & physicals, and progress notes.			Providers can share referral information electronically with confirmation and tracking in real time.	

Integrated Delivery Options
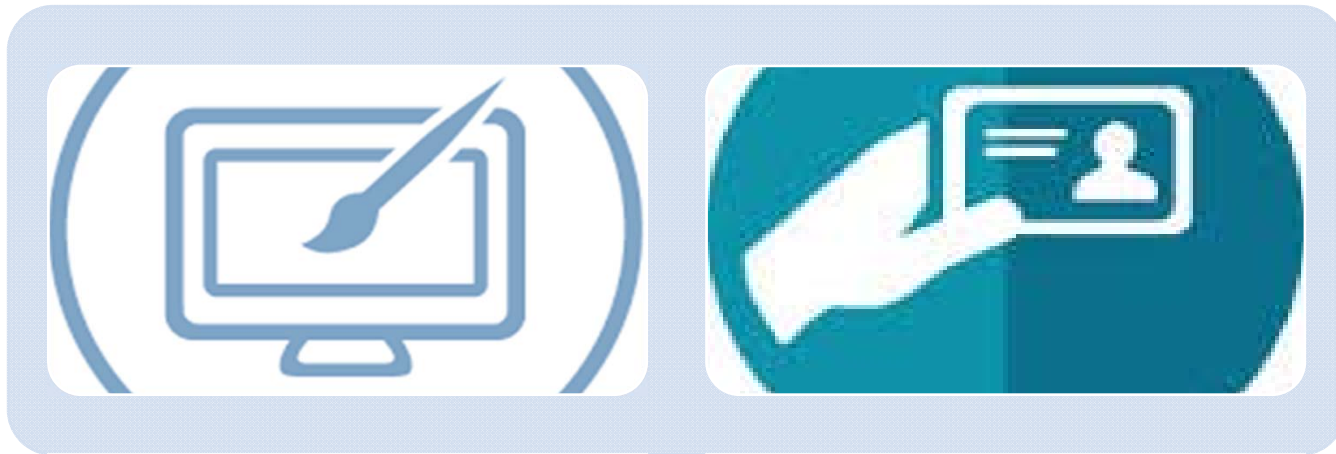
Designed To

- Automatically deliver information from CliniSync Participating Hospitals using a single outbound interface to the health plan's system
- Messages are delivered real-time in an HL7 format

Payer Eligibility Delivery

- Data delivered based on payer eligibility data provided by health plan
- Self-pay encounters excluded
- Payer can send eligibility data via flat file or real-time using HL7 standards

Branching Out

New Services for the Payer Environment

There will be a need for Ohio to have an all-payer claims database (APCD) that can be managed by a neutral third party and integrated with clinical data, allowing for the merging of clinical and claims data in an actionable way and serve up that up for authorized needs

A bidirectional data flow based upon agreements and contractual needs between payers and providers to better coordination care and meet payment reform requirements.

More efficient ways to allow for Pre-Cert/Authorization to move patients to LTC or Home Health in a faster timeline.

CONSULT

- **CliniSync Community Outreach Managers**

  Community Outreach Manger in each region.

- **CliniSyncPLUS**

  Guidance on Quality Reporting: MU requirements, audits, PQRS, HEDIS.

  Helping independent practitioners move to Value Based Care.

What does it cost to run an HIE?

$5 to 8 million dollars/year

Investments to Get Started

Investments made

HISP - Direct Messaging	$1,277,040
Implementation of hardware and hosting	$1,147,000
MPI/RLS capability	$1,224,000
Results Delivery/Community Health Record	$2,856,000
Hospital and Physician Implementation	$3,500,000

Total Infrastructure Costs $10,004,040

Sustainability Model

(Fees are all inclusive to Hospitals and Health Plans)

Hospital Fee Structure

$ per Annual Acute Care Discharge / Month
- $1,500 for Critical Access Hospitals (designated by the Centers for Medicare and Medicaid Services)
- $2,000 for Non-Critical Access Hospitals
- Cap for Systems

Health Plans*

Enrolled Members	Per Member Per Month (PMPM)	Cumulative Max Monthly Fee
1-100,000	$0.067	$6,700
100,001-200,000	$0.054	$6,700 + $5,400 = $12,100
200,001-1,000,000	$0.042	$12,100 + $33,600 = $45,700
1,000,000+	No Additional Fee	$45,700

(*Health Plan pricing still in negotiation phase)

Sustainability Model

Facility or Corporate - Size by # of Beds. Includes LTC, Dialysis, BH, ect...

- 0-55 Beds - $2,000 year
- 56-165 Beds - $36 bed/ year
- 166-300 Beds - $6,000 year
- 300+ Beds - Price Subject to Negotiation

Physician Practice, Home Health, etc...

Annual Subscription Fee Per   Provider Per Year
- 1-10 $300
- 11-20 $240
- 21-30 $180
- 31-50 $120
- 51+ $60

No Fees for Community Providers for the following Services
- Results Delivery
- Community Health Record
- Referral Management
- Orders
- HISP and Direct Messaging

Sustainability Model

Current Model and ongoing
Projections have CliniSync achieving
positive cash flow without grant
revenue or state funding.

Sustainability Model Lessons Learned

- Your model must be flexible. Direction and priorities change every 12-24 months.
- Your vendor must be a *"Technology Partner"* and you mush have the leverage to facilitate this relationship.
- Define your "Customer"
- Your paying Stakeholders must "Buy In" and have a voice in your direction.
- Hospitals are the key starting point.
- You must have Champions that can help facilitate conversations with EMR companies.
- The consumer/patient are always a priority but you must decide how they best fit in your model.

Relationship with Medicity

- Partnership more than Vendor / Client
- Close working relationship with Product and Implementation
- Leverage as a larger client
- Work closely with other large clients
- Success is jointly shared

Some Best Practice Ideas

- Potential partnership model to maximize investments already made and to leverage a Sustainability Model

- Grassroots efforts are key.

- The "Circle of Trust" is very fragile.

- Low pricing and Community Approach are a necessity for buy in.

- Don't believe half of what you hear about capabilities.

Two to Three Key Concepts from our Implementation and Design Experience

- The Master Patient Index Implementation should not break the bank.

- Hospitals are key drivers in the community.

- Be flexible – the return on investment is different to each stakeholder

It is not about HIE the entity, but the action of health information exchange.

QUESTIONS?