

Kentucky e-Health Network Board Meeting

September 1, 2010



Welcome & Introductions

- **Board Member Introductions**

Old Business

- **December & May Meeting Minutes**
 - Review and Approval of December 2009 & May 2010 Meeting Minutes

Communications

- **KHIE Update**

- Jeff Brady, Executive Director

- Governor's Office of Electronic Health Information

- **State Medicaid HIT Plan**

- Bob Nowell, Director

- Department for Medicaid Services

Kentucky Health Information Exchange (KHIE)



Health Information Exchange in Kentucky

Historical Overview

2009 - American Recovery & Reinvestment Act
(ARRA)

to provide State Grants to Promote
Health Information Technology

to improve the quality and efficiency of health care

and expand the secure, electronic movement and use
of health information among organizations

according to nationally recognized standards

GOEHI Overview

Governor's Office of Electronic Health Information

In August 2009, Governor Steve Beshear named the Cabinet for Health and Family Services as the state entity responsible for the administration of Kentucky's Health Information Exchange (KHIE) and issued an Executive Order to create GOEHI

Charged with providing leadership for statewide health information technology

Kentucky Health Information Exchange

2007 Medicaid Transformation Grant (\$4.9M)

Allowed development of core functionality of
KHIE

6 Pilot Hospitals and 1 Clinic signed
the KHIE Participation Agreement

KHIE pilot went live online April 1, 2010

ARRA Funding

State HIE Cooperative Agreement

- Kentucky received \$9.75M
- Strategic & Operational Plan submitted August 27, 2010
- ONC must approve plan before operational funds will be made available

Five Domains

Must be addressed in the HIE Strategic and Operational Plan

Governance – develop a multi-stakeholder process

Finance – identification of resources necessary to fund the HIE

Technical Infrastructure –technical aspects to enable the HIE to operate in a secure and appropriate manner

Business and Technical Operations – procurement, project management, program evaluation and reporting measures

Legal/Policy – legal and policy barriers/enablers

KHIE Coordinating Council Members

CHFS Administrative Order in February 2010

- 23 Members on the Council
- 6 Committees reporting to the Council
 - (Six to ten members serve on each committee)
 - Accountability & Transparency
 - Business Development & Finance
 - Interoperability & Standards Development
 - Provider Adoption & Meaningful Use
 - Privacy & Security
 - Population Health
- Final Reports for Strategic & Operational Plan
7/30/2010

Kentucky Environmental Scan

- Laboratory - 60% Labs operating can deliver reports electronically
43% Providers receiving reports electronically
- Pharmacy – 85% Pharmacies capable of receiving e-Prescribing
16% Providers actually e-Prescribing
- Nationally < 4% Providers fully utilizing EMR Systems

What is the KHIE doing?

Initial participants in the KHIE are helping determine obstacles

- Many EMR Systems not ready to process CCD
(Continuity of Care Document – Standard of patient data transfer)
- Cost of EMR upgrades to hospitals & physician practices
- Disruption of practice for EMR implementation
- Getting Participant Agreements signed with KHIE

The goal is to increase the number of health care providers who have, and effectively use, EHRs and HIE.

The current initiative is to allow providers to reach Meaningful Use via multiple interface options

Our goal is to provide HIE Connectivity
to as many providers as possible
in the next 2 to 3 years
at no cost to the providers

Stage II



Data Exchange

Exchange Framework Provides:
 - Clinical Messaging
 - MPI
 - RLS
 - I-HUB-

HL7 v2:
 ADT,
 Transcriptions,
 Lab

I-HUB sends CCDs to ACS Repository

Aggregated CCD Contains all available Patient Data regardless of entry point

ACS Web Services Connectivity (Silver/Gold) Providers/Payers

Data Transformation

ACS ORCHESTRATION SERVICES

Sends QRY ^ T12/
 Answers with Doc ^ T12

SECURE WEB APPLICATIONS PORTAL
 N-tier

Gold level- Push of CCDs and documents Via MDM_T02

BizTalk

Patient CCDs Cache (Max Retention = 24 hrs)

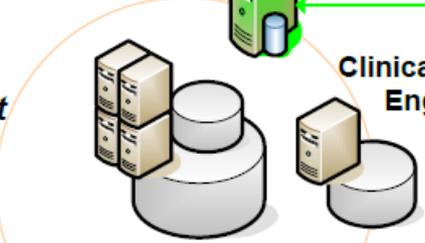
ACS sends QRY^T12 thru the I-HUB
 I-HUB Responds with DOC^T12 to ACS

Data Manipulation and Storage

CLINICAL PROCESS/ALERTS DATA AGGREGATION ONE RECORD

ACS Patient Data HUB

Clinical Rules Engine



Medicaid Repository

KHIE and REC Coordination

Kentucky has 2 Regional Extension Centers
For Provider EMR Adoption, Implementation,
And Connectivity

University of Kentucky
and
HealthBridge

EMR Certification

ONC has named
first 2 authorized certification groups

- Certified Commission for Health Information Technology (CCHIT)
- Drummond Group Inc. (DGI)

CHFS Cabinet Resources

- Medicaid Claims Data
- State Laboratory Results
 - Newborn Screenings
- Immunization Registry

More information on the KHIE can be found on the Governor's Office of Electronic Health Information website at <http://chfs.ky.gov/os/goehi/>



State Medicaid Health Information Technology Plan (SMHP)



The SMHP is where it all comes together

Encompasses:

Kentucky Health Information Exchange (KHIE)

Electronic Health Record (EHR)

Provider Incentive Plan

Meaningful Use (MU)

Four Primary Components

1. Current Landscape – ‘as is’
2. HIT Future – ‘to be’
3. Actions necessary to implement the Provider Incentive Plan
4. HIT Roadmap – how SMHP will be implemented

Current HIT Landscape – ‘as is’

- Define and benchmark existing capabilities and functions
- Leverage existing entities – KHIE, REC for EHR and Incentive program
- Use existing studies - State of Broadband Coverage in KY (Office of Technology)
- Provider Communications/Assessment
 - Identify Medicaid enrolled Providers
 - Educate on overall HIT
 - Increase awareness of the Incentive Program and the relationship to certified EHR technology and Meaningful Use
 - Conduct Provider Surveys to assess current status and provider plans to Adopt – Implement – Upgrade HIT Technology

HIT Future – ‘to be’

- Project out 5 years – iterative process
- Define specific goals – ex. % of Eligible Providers adopting with MU
- Inclusion of stakeholders in vision process
- Define system architecture requirements (MMIS)
- Provider interfaces
- Specific steps to encourage use
- How KY will assess/provide tech assistance
- How to assure populations with unique needs are addressed by EHR
- Regulatory changes if required to permit or facilitate adoption
- Harmonize with HIT Landscape, MITA, and KHIE architecture

Actions Necessary to Implement the Provider Incentive Program

- Administer Section 4201 rules for incentive payments to Eligible Providers
- Conduct adequate oversight of incentive payments and tracking MU
- Initiatives to encourage adoption of certified EHR technology to promote health care quality and the exchange of healthcare information

State Medicaid Health Information Technology Plan SMHP

	First Calendar Year in which the EP receives an Incentive Payment					
Calendar Year	CY 2011	CY 2012	CY 2013	CY 2014	CY 2015	CY 2016
2011	\$21,250					
2012	\$8,500	\$21,250				
2013	\$8,500	\$8,500	\$21,250			
2014	\$8,500	\$8,500	\$8,500	\$21,250		
2015	\$8,500	\$8,500	\$8,500	\$8,500	\$21,250	
2016	\$8,500	\$8,500	\$8,500	\$8,500	\$8,500	\$21,250
2017		\$8,500	\$8,500	\$8,500	\$8,500	\$8,500
2018			\$8,500	\$8,500	\$8,500	\$8,500
2019				\$8,500	\$8,500	\$8,500
2020					\$8,500	\$8,500
2021						\$8,500
TOTAL	\$63,750	\$63,750	\$63,750	\$63,750	\$63,750	\$63,750

Provider Incentive Program – Administrative Components

- Provider Eligibility Determination
- Provider Payment Calculation (eligibility; MU)
- Provider Payment
- Provider Participation
- Audit Program components (fraud, duplicate payments, coordination with Medicare)

HIT Roadmap

- Provider Incentive program
- Benchmark performance
- % Eligible Providers meeting MU – and how to achieve
- Leveraging existing components
- Projected dates of participation with Federal, regional and statewide HIE
- Organizational capacity
- Program Implementation operational plan
- Provider communications
- Implementation Advance Planning Document – federal funding

Adjournment

- **Next Board Meeting**
 - October 6, 2010, Capitol Annex, Room 131