

# **Health Information Technology: Opportunities for Arkansas**

## **Overview of Arkansas Health Information Technology Activities**

For

## **Hometown Health Improvement Sustainability Annual Conference**

March 30, 2011

# HIT Management & Oversight

## Office of Health Information Technology

- Established by Executive Order by Governor Beebe on May 11, 2010
- Plans and implements the statewide State Health Alliance for Records Exchange (SHARE), the name for the AR Health Information Exchange (HIE)
- Created the Health Information Exchange Council
- Defined the roles and responsibilities of the State Coordinator and the Office
- Funded by the Office of the National Coordinator for HIT (ONC) through the State Health Information Exchange Cooperative Agreement Program

## HIT Coordinator

- Plans, develops, implements, sustains SHARE
- Coordinates HIT across ARRA/HITECH, federal and state programs- Medicaid, Medicare and Public Health
- Key interface on HIT with private/public stakeholders, local, state and federal agencies



# Health Information Technology & Health Information Exchange

**HIT** is when computers and other electronic devices are used to manage health information.

**HIE** is the electronic movement of health related data and information among healthcare providers and organizations.

## Electronic Medical Records & Electronic Health Records

### EMR

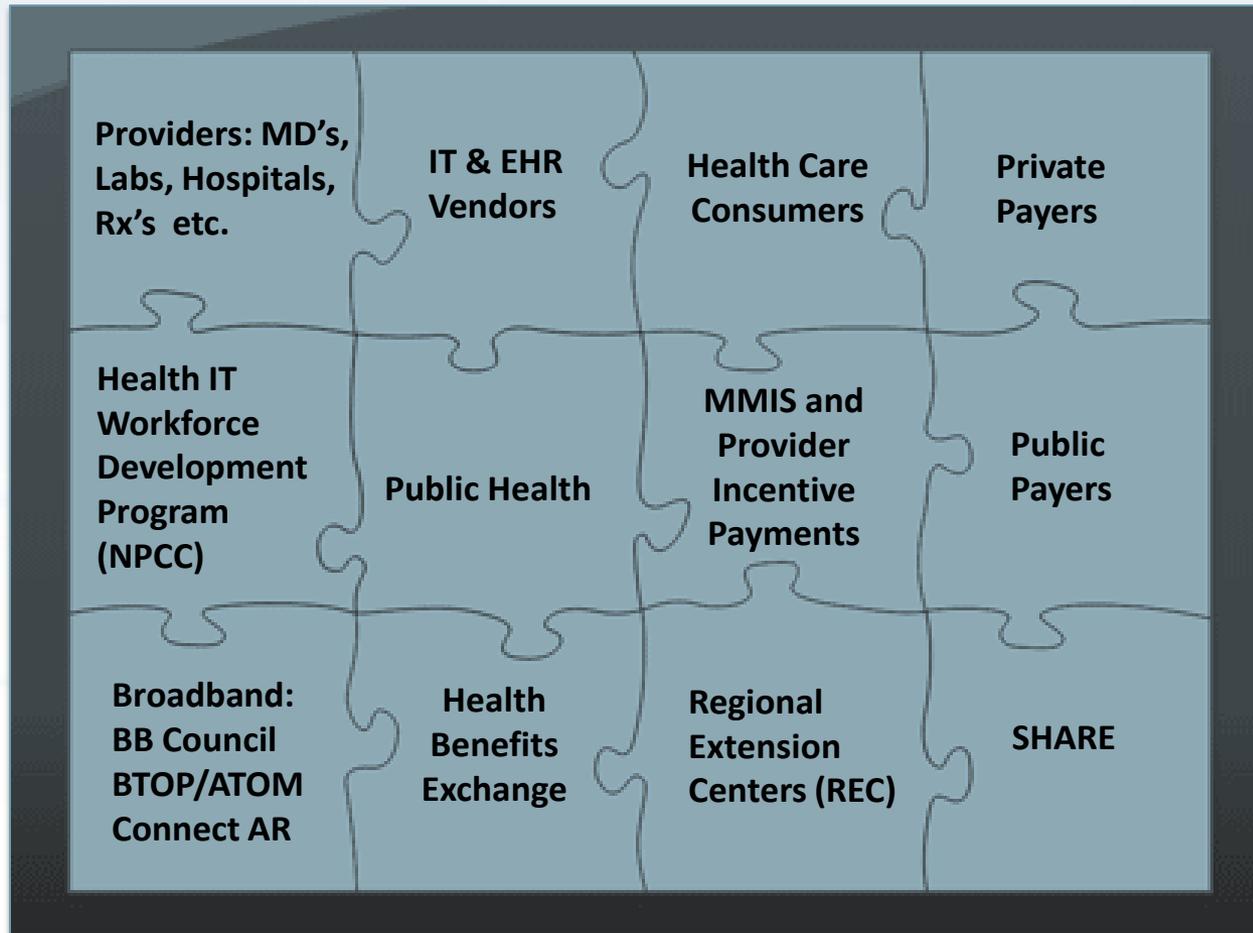
- Computerized medical record
- Created at the source of care (hospital, clinic)
- Part of a stand-alone, local health information system
- Not shared across health organizations

### EHR

- Collection of health information
- Can be shared and updated across healthcare organizations
- Includes demographics, medication history, medical history, test results, allergies, radiology images, etc.



# HIT Overview: A Complex Puzzle



# Health Information Technology for Economic and Clinical Health (HITECH) Act

*Promotes the meaningful use of health information technology to improve the quality of healthcare*

- Congress passed as part of the American Recovery and Reinvestment Act
- HITECH and other federal programs offer potential \$500 million to AR for information technology resources for physicians, hospitals, pharmacies, and labs to make meaningful use of electronic health records (EHRs)
- Established the State Health Information Exchange Cooperative Agreement Program that provided grant to Arkansas to aid in the development of health information exchange (HIE) capacity among health care providers



Eligible Professionals



REC

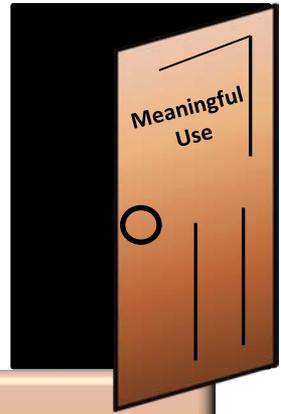
Provider Incentive Program

Broadband Connection

IT Workforce Support

SHARE

Meaningful Use



## Eligible Providers

Eligible Practitioners/Providers (EPs) will receive incentives **after** the purchase of Certified EHR products.

Eligible Providers who have already adopted and are using EHR's may qualify for incentive payments for **Upgrades** to their systems.

Eligible providers from Medicaid and Medicare include:

### Medicare

Dr. of Medicine/Osteopathy  
Dental Surgery/Medicine  
Podiatry; Optometry  
Chiropractic  
Hospitals/Children's Hospitals

### Medicaid

Physicians/Dentists  
Nurse Practitioners  
Cert Nurse MW  
Physicians Assistants in FQHC's  
Hospitals/Children's Hospitals/Critical  
Access



## Regional Extension Center (REC)

*Tasked with providing technical assistance and financial incentives to EPs who want to make the transition to EHRs and participate in the Medicaid and Medicare Incentive Programs.*



- Division of the Arkansas Foundation of Medical Care
- Assists in the selection of an EHR systems
- Recruits, trains, provides assistance, in EHR use
- Certify that providers are meaningfully using EHRs
- Award amount \$7.4 million total
- Helps EP's: **Adopt** EHR systems
  - Implement** EHR systems
  - Upgrade** existing EHR systems to meet national standards



## Provider Incentive Program (PIP)

Eligible Practitioners/Providers (EPs) will receive incentives **after** the purchase of Certified EMR/HER products.

EPs must choose to qualify for Medicaid or Medicare reimbursement.

- Medicaid up to \$63,750 over 6 years
- Medicare up to \$44,000 over 5 years

Individual practitioners and facilities are eligible to receive monetary incentives from Medicaid and Medicare.



## **Hospital Medicare Incentive Payments**

Eligible hospitals and Critical Access Hospitals (CAHs) qualify for incentive payments if they demonstrate meaningful use of certified EHR technology

- Eligible hospitals can begin receiving payments in any year from FY 2011- FY 2015
- Payments based on several factors but begin with a base payment of \$2 million
- Hospitals that do not demonstrate meaningful use of certified EHR technology beginning in FY 2015 will be subject to Medicare payment adjustments

## **Hospital Medicaid Incentive Payments**

Eligible hospitals and Critical Access Hospitals (CAHs) qualify for incentive payments if they demonstrate meaningful use of certified EHR technology

Eligible hospitals include:

- Acute care hospitals with at least a 10% Medicaid population
- Children's Hospitals
- Can begin receiving payments in any year from FY 2011- FY 2015
- Payments based on several factors but begin with a base payment of \$2 million



## Broadband/ Connectivity

*Essential for the full use and implementation of SHARE*  
*Total broad-band funding for Arkansas: \$109.4 million*

Current Federally-funded initiatives underway:

- Connect Arkansas-promoting internet access and education across Arkansas.
- UAMS received Broadband Technology Opportunities Program (BTOP) grant through the Department of Commerce
- Arkansas Telehealth and Oversight Management (ATOM)- organizes hospitals and clinics to implement coordinated telehealth systems.





## National Park Community College

- Received \$976,528 from U.S. Department of Health and Human Services (HHS) for medical health informatics education program.
- Program will ensure the rapid and effective utilization and development of health information technologies infrastructure and wide-spread meaningful use of EHRs

Offers a six month, online certificate program from the following roles:

- Clinician/practitioner consultants
- Practice Workflow and information management redesign specialists
- Trainer



## SHARE (State Health Alliance for Records Exchange)

*A secure mechanism through which individuals, healthcare providers, and health organizations can electronically share health-related information to facilitate and strengthen the delivery of healthcare throughout Arkansas.*

- Arkansas's interoperable statewide HIE
- Received \$7.9 million (Federal Funding)
- Developed and implemented by the Office of HIT
- Strategic and Operational plans developed by the Office of HIT and received by ONC for approval



## SHARE Benefits

- Improve the overall quality of healthcare received by the patient.
- Provide consumers with better knowledge about their own health empowering them to take more responsibility for working health care providers in managing their own health.
- Health care providers will have access to the right medical information at the right time.
- Health care providers will have the life-saving information they need in times of an emergency.
- Availability of health data through SHARE will improve public health reporting which could potentially prevent public health emergencies and disease outbreaks.
- SHARE will save lives.



# SHARE Core Requirements

- Provider index and directory
- Data dictionary and vocabulary standardization
- Standards-based component (*NHIN Direct, HL/7 Clinical Document Architecture, SNOMED CT, and ICD-10*)
- Authentication/security component
- Master Person Index (MPI)
- Shared web portal access to SHARE connections

## Meaningful Use

*The use of certified EHR Technology, **in a meaningful way**, as one component of a broader HIT infrastructure needed to reform the health care system and improve health care quality, efficiency, and patient security.*

- Eligible Providers must **demonstrate meaningful use of EMRs/EHRs** to improve the quality of healthcare.
- Meaningful use is **staged compliance over 4 years** with increased requirements each year.
- **Financial Penalties will be assessed** by Medicare for failure to comply by 2015 resulting in reduced reimbursement for eligible procedures.

Eligible Professionals

REC

Provider Incentive Program

Broadband Connection

IT Workforce Support

SHARE



Meaningful Use

# Health Information Exchange and Public Health

- Public Health Reporting
  - Population health monitoring
  - Coordinated/connected source of information i.e. Immunization and Cancer Registries
- Public Health Laboratories
  - Facilitate e-communications with commercial labs
  - Structured lab results
- Reportable Disease Investigation and Surveillance
  - Improve response to cases of reportable disease i.e. food borne poisoning
- Syndromic Surveillance
  - Facilitates public health involvement in secondary prevention of chronic diseases



# Underlying Principles for Arkansas HIT Efforts

- It's Not About Technology—It's Really Not
- Don't Forget the Healthcare Consumer
- Embrace the Urgency of Change (If not now, when?)
- Build on Evidence of What's Working
- Be Realistic About What Government Can Do
- Be Inclusive & Create Equal Opportunities (No DD)
- Foster Innovation
- Find and Create Collaborative Partnerships

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# Any Questions???



"I have no idea how you died, we don't have access to your medical records."