



Behavioral Health is Essential To Health



Prevention Works



Treatment is Effective



People Recover



SAMHSA-HRSA Center for Integrated Health Solutions

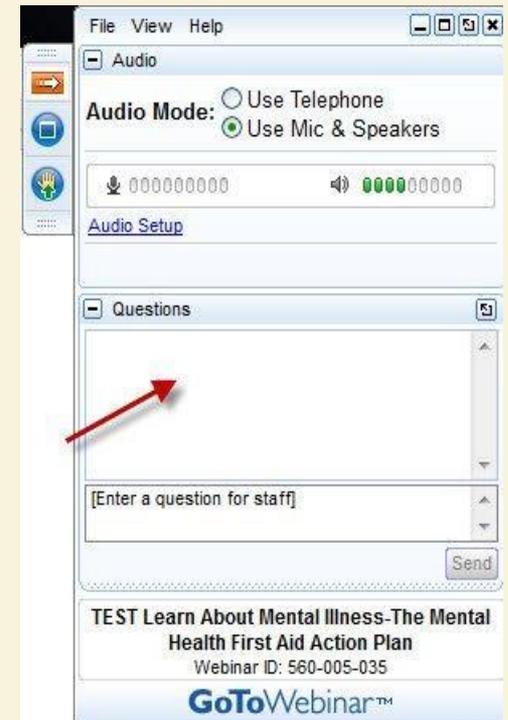
Integrating Behavioral Health and HIV Into Electronic Health Records Communities of Practice

Monday, August 31, 2015

How to ask a question during the webinar



- If you dialed in to this webinar on your phone please use the “raise your hand” button and we will open up your lines for you to ask your question to the group. **(left)**
- If you are listening to this webinar from your computer speakers, please type your questions into the question box and we will address your questions. **(right)**



**THIS SESSION WILL
BE RECORDED**



SAMHSA-HRSA Center for Integrated Health Solutions

**Slides for today's CoP are
available on the CIHS website at:**

<http://www.integration.samhsa.gov/mai-coc-grantees-online-community/communities-of-practice>



SAMHSA-HRSA Center for Integrated Health Solutions

Electronic Health Records Data Sharing Best Practices

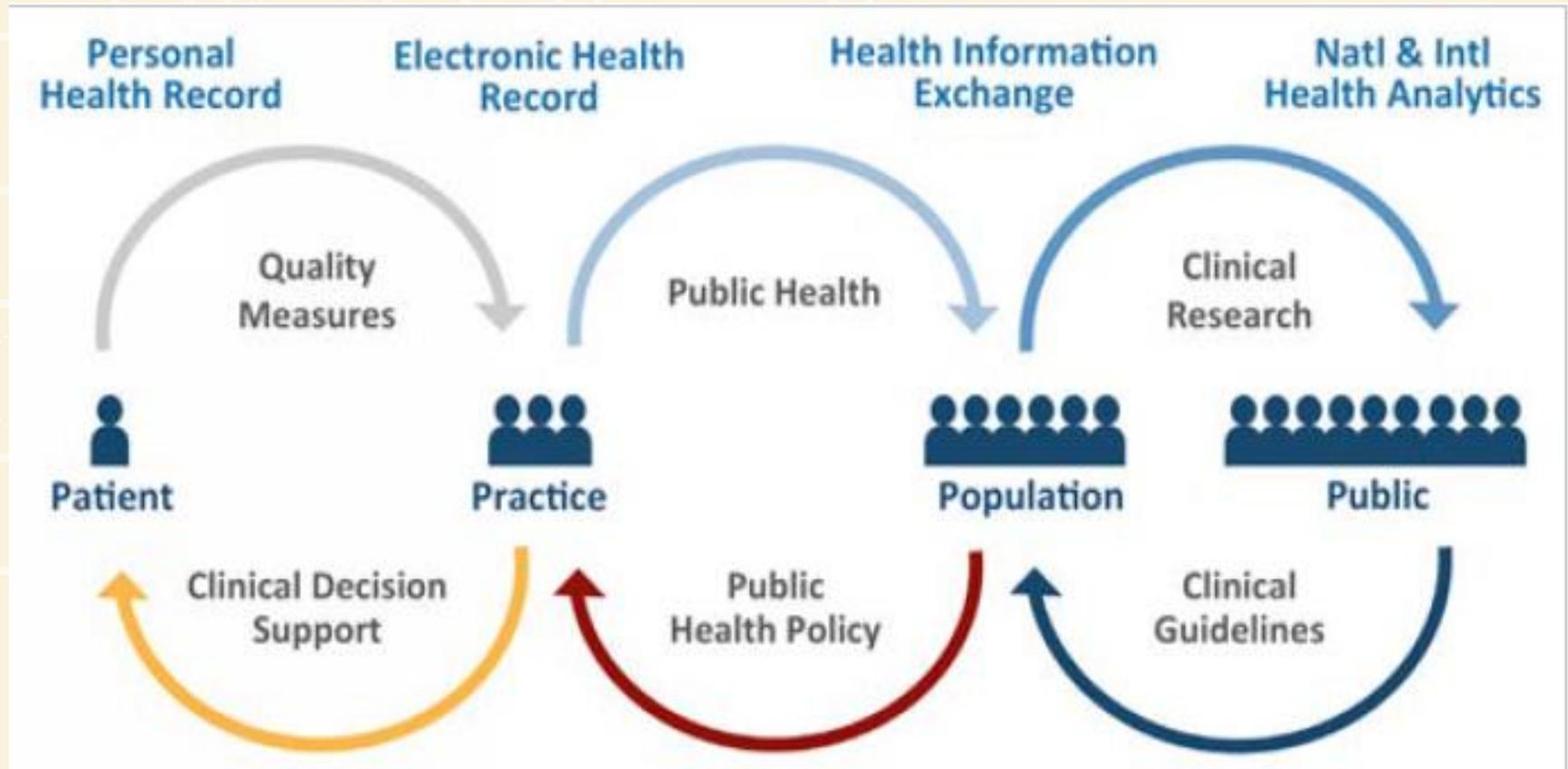
Presented by: Adrian Bishop



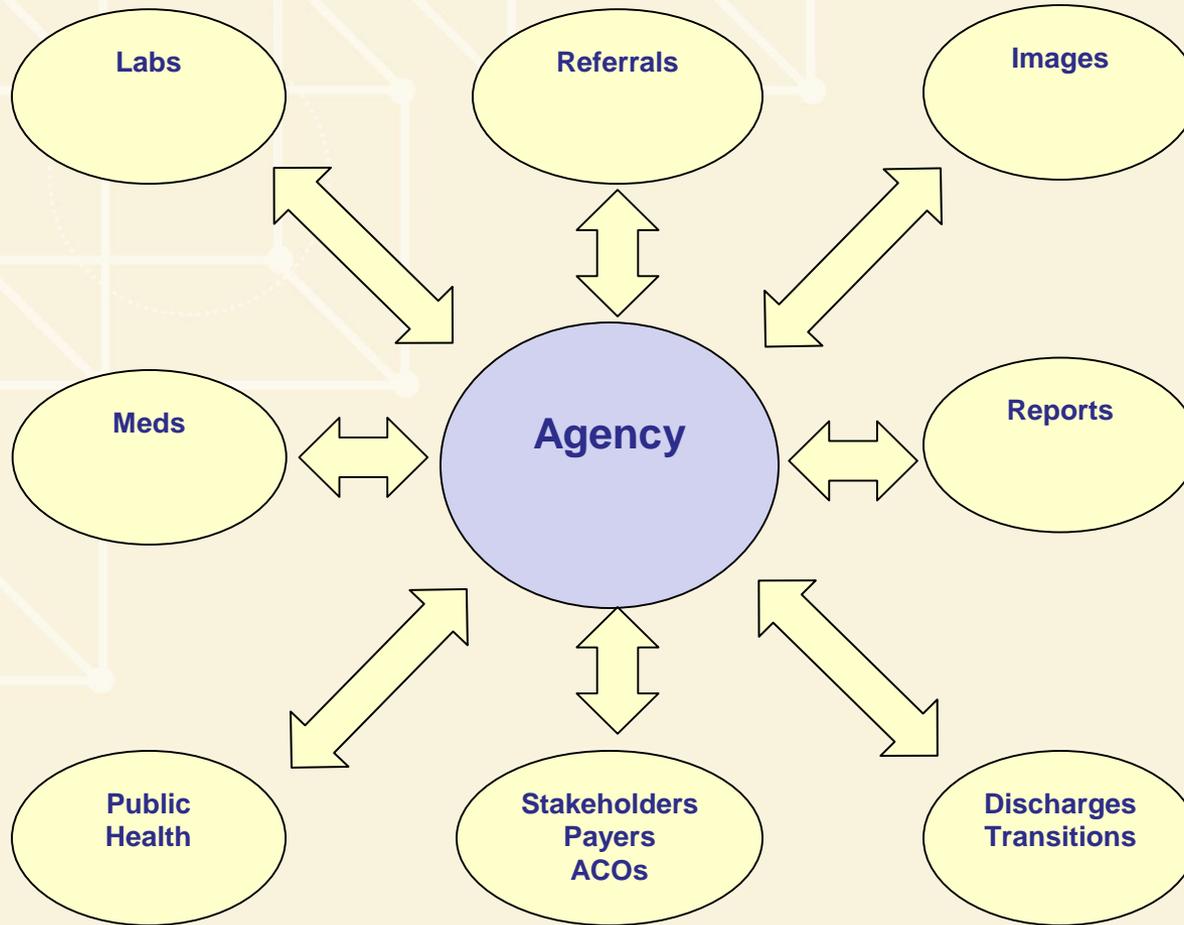
Agenda

- The mechanics of sharing data
 - What information do we share?
 - How do we share it?
 - Where are we heading?
- System options
 - What are the current requirements?
- Best practices
- Useful links

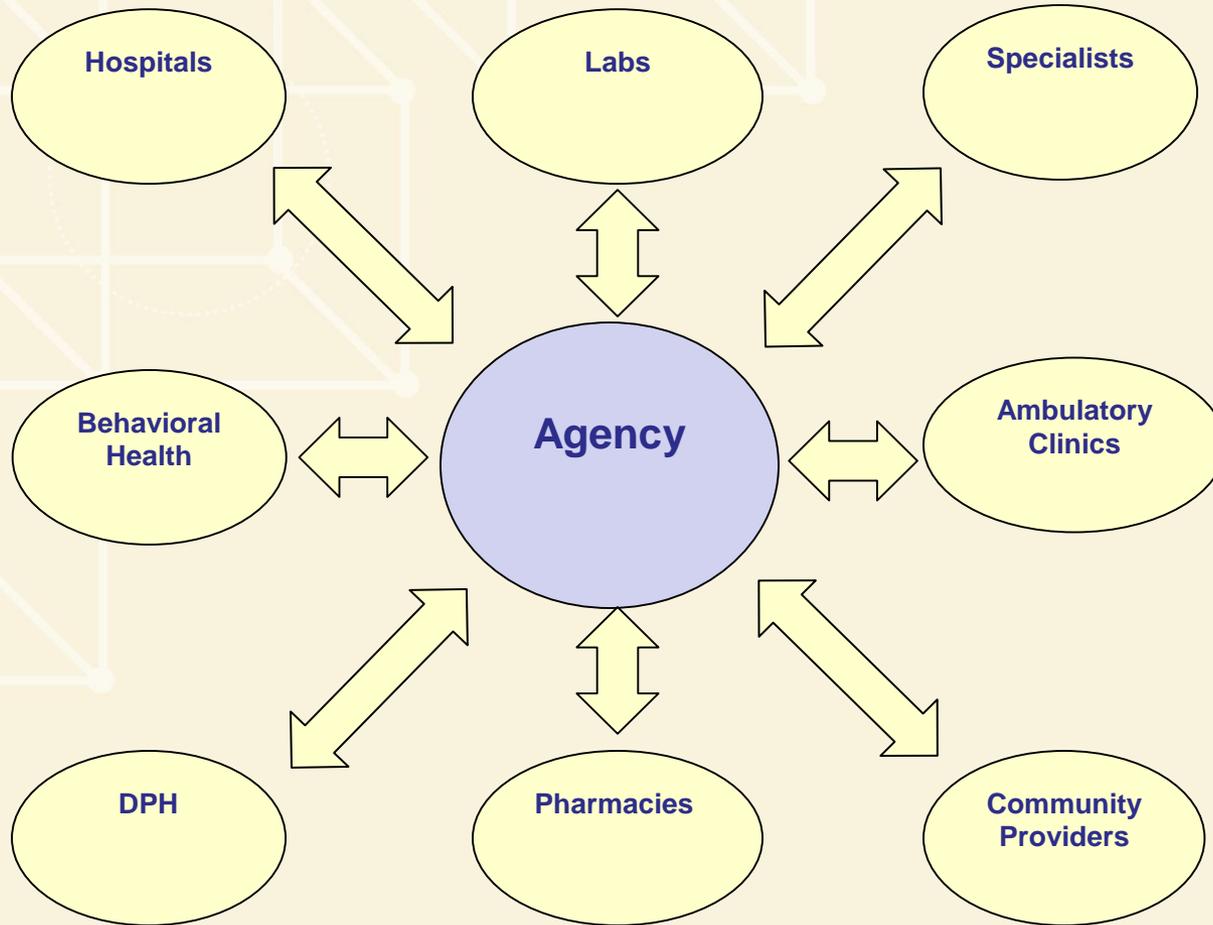
The eHealth Ecosystem



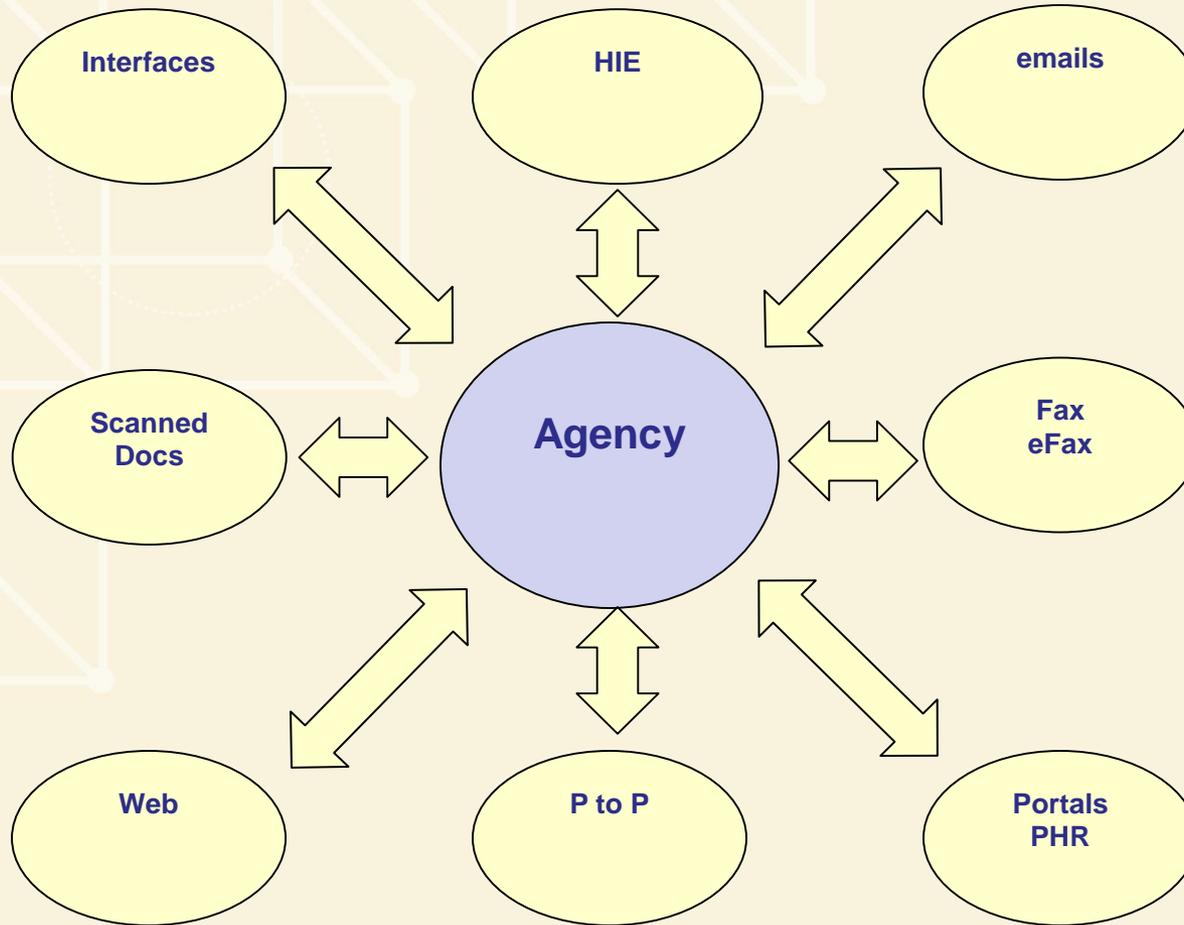
Information Sharing



Information Sharing

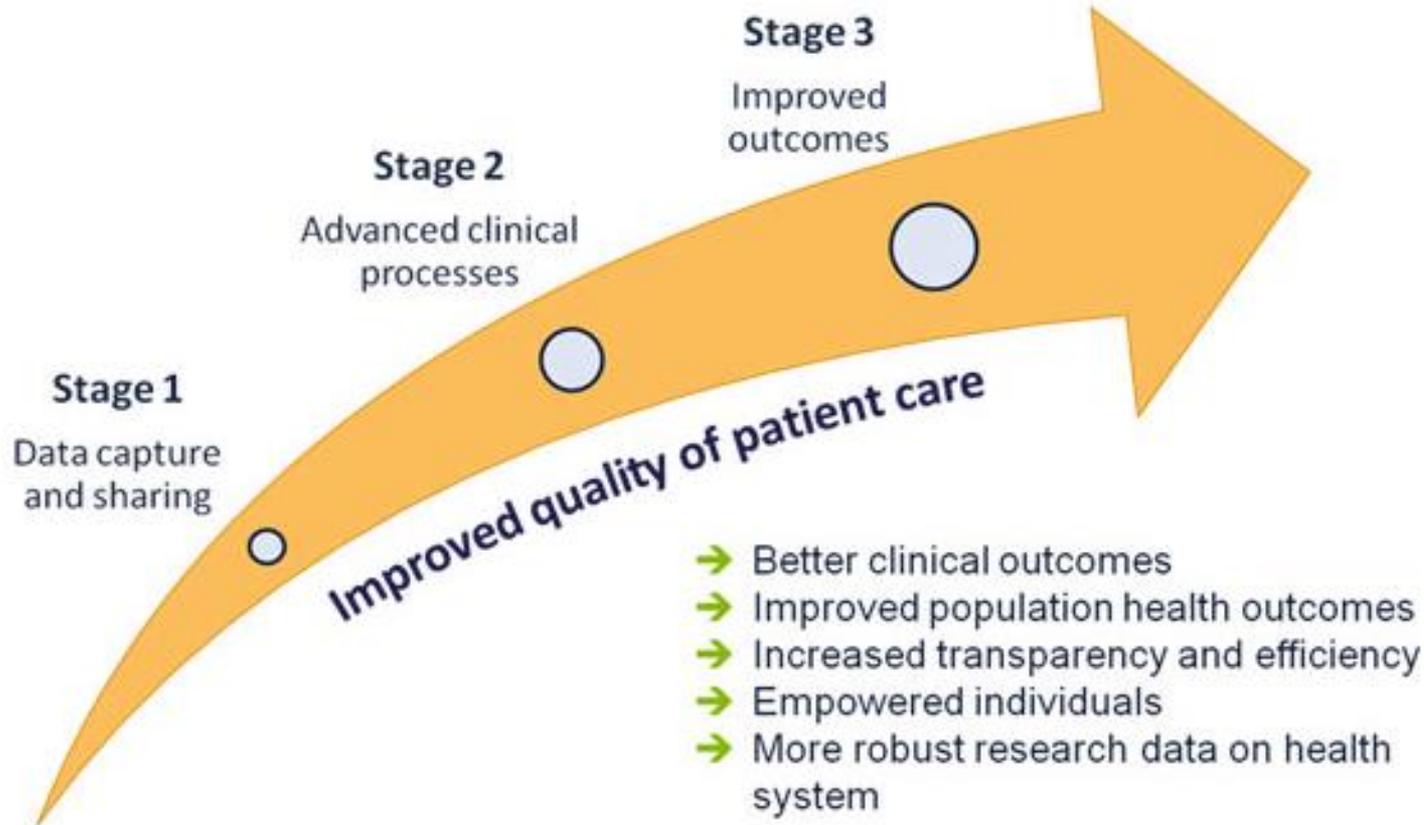


Information Sharing

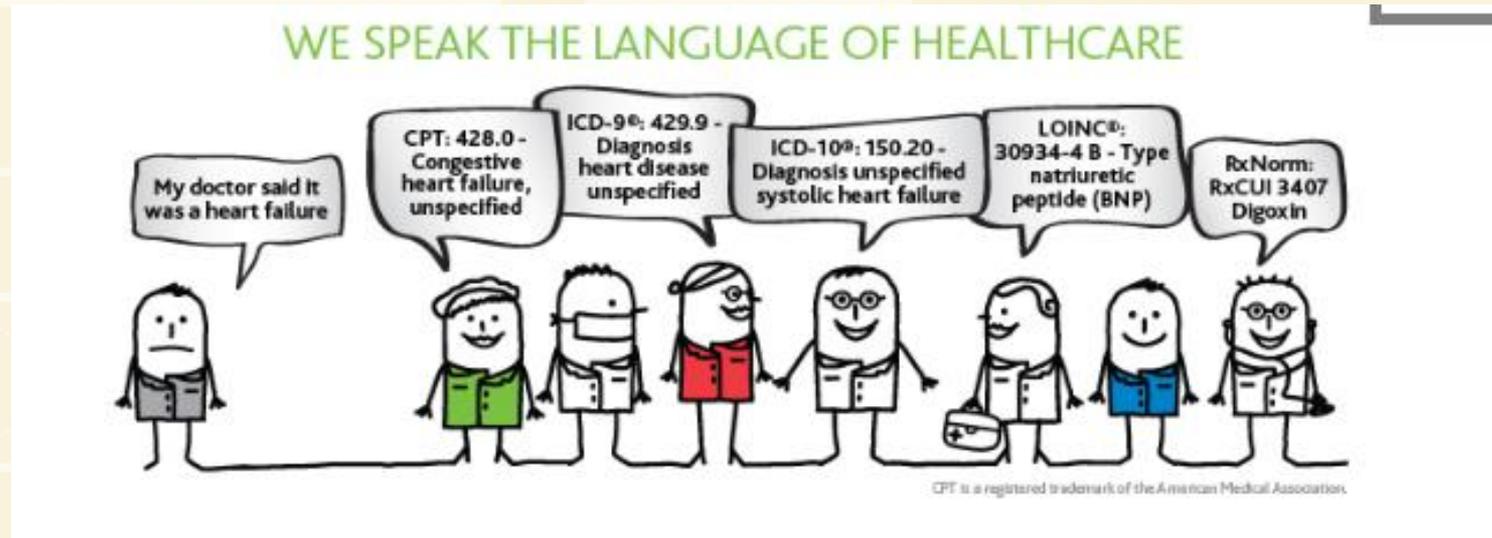


- Paper
- Images
- Text
- Data

Before Meaningful Use it was worse!



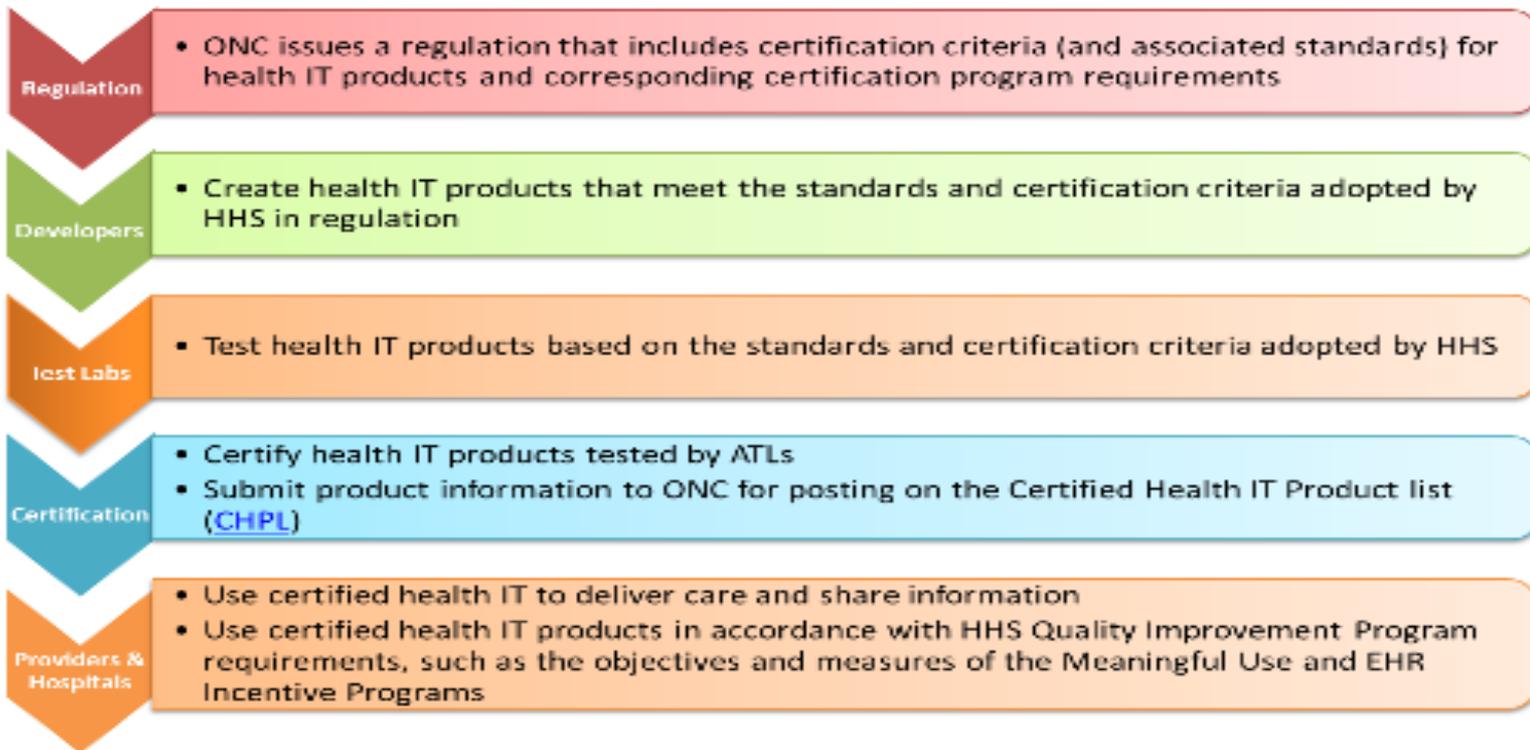
The Languages of data



The good news:

- Health Level-7 or **HL7** refers to a set of international standards for transfer of clinical and administrative data between software applications used by various healthcare providers.

Certified Health IT Product List (CHPL)



2014 EHR Certification Criteria

2014 Edition EHR Certification Criteria Required to Satisfy the Base EHR Definition	
EHR technology that:	Certification Criteria
Includes patient demographic and clinical health information, such as medical history and problem lists	Demographics § 170.314(a)(3) Problem List § 170.314(a)(5) Medication List § 170.314(a)(6) Medication Allergy List § 170.314(a)(7)
Has the capacity to provide clinical decision support	Clinical Decision Support § 170.314(a)(8)
Has the capacity to support physician order entry	Computerized Provider Order Entry § 170.314(a)(1)
Has the capacity to capture and query information relevant to health care quality	Clinical Quality Measures § 170.314(c)(1) through (3)
Has the capacity to exchange electronic health information with, and integrate such information from other sources	Transitions of Care § 170.314(b)(1) and (2) Data Portability § 170.314(b)(7)
Has the capacity to protect the confidentiality, integrity, and availability of health information stored and exchanged	Privacy and Security § 170.314(d)(1) through (8)

Connectivity



The Office of the National Coordinator for
Health Information Technology

Connecting Health and Care for the Nation

A Shared Nationwide
Interoperability Roadmap

DRAFT Version 1.0

Federal Health IT Strategic Plan Goals

COLLECT

GOAL 1: EXPAND ADOPTION OF HEALTH IT



SHARE

GOAL 2: ADVANCE SECURE AND INTEROPERABLE HEALTH INFORMATION



USE

GOAL 3: STRENGTHEN HEALTH CARE DELIVERY



GOAL 4: ADVANCE THE HEALTH AND WELL-BEING OF INDIVIDUALS AND COMMUNITIES



GOAL 5: ADVANCE RESEARCH SCIENTIFIC KNOWLEDGE AND INNOVATION



Consolidated Clinical Document

- Patient name
- Sex
- Date of birth
- Race
- Ethnicity
- Preferred language
- Smoking status
- Problems
- Medications
- Medication allergies
- Laboratory test(s)
- Laboratory value(s)/result(s)
- Vital signs
- Care plan field(s), including goals and instructions
- Procedures
- Care team members
- Immunizations
- Unique device identifier(s) for a patient's implantable device(s)
- Notes/narrative

Meaningful Use

Electronic Prescribing

EP Measure: More than 50 percent of all permissible prescriptions, or all prescriptions, written by the EP are queried for a drug formulary and transmitted electronically using Certified EHR Technology.

Patient Electronic Access (VDT)

- **EP Measure 1:**
More than 50 percent of all unique patients seen by the EP during the EHR reporting period are provided timely (within 4 business days after the information is available to the EP) online access to their health information subject to the EP's discretion to withhold certain information.
- **EP Measure 2:**
At least one patient seen by the EP during the EHR reporting period (or their authorized representatives) views, downloads, or transmits his or her health information to a third party.

Meaningful Use

Protect Electronic Health Information

Measure:

Conduct or review a security risk analysis in accordance with the requirements in 45 CFR 164.308(a)(1), including addressing the security (to include encryption) of ePHI data stored in Certified EHR Technology in accordance with requirements in 45 CFR 164.312(a)(2)(iv) and 45 CFR 164.306(d)(3), and implement security updates as necessary and correct identified security deficiencies as part of the EP risk management process.

Medication Reconciliation

Measure:

The EP performs medication reconciliation for more than 50 percent of transitions of care in which the patient is transitioned into the care of the EP.

Meaningful Use

Patient Specific Education	EP Measure: Patient-specific education resources identified by Certified EHR Technology are provided to patients for more than 10 percent of all unique patients with office visits seen by the EP during the EHR reporting period.
Summary of Care	Measure: The EP that transitions or refers their patient to another setting of care or provider of care (1) uses CEHRT to create a summary of care record; and (2) electronically transmits such summary to a receiving provider for more than 10 percent of transitions of care and referrals.
Secure Messaging	Measure: During the EHR reporting period, the capability for patients to send and receive a secure electronic message with the provider was fully enabled.

Meaningful Use Data Public Health Sharing Requirements

- **Immunization Registry Reporting:** The EP is in active engagement with a public health agency to submit immunization data and receive immunization forecasts and histories from the public health immunization registry/immunization information system (IIS).
- **Syndromic Surveillance Reporting:** The EP is in active engagement with a public health agency to submit syndromic surveillance data from a non-urgent care ambulatory setting.
- **Case Reporting:** The EP is in active engagement with a public health agency to submit case reporting of reportable conditions.
- **Public Health Registry Reporting:** The EP is in active engagement with a public health agency to submit data to public health registries.
- **Clinical Data Registry Reporting:** The EP is in active engagement to submit data to a clinical data registry.

eCQMs

- Clinical quality measures, or CQMs, are tools that help eligible providers (EPs) measure and track the quality of health care services provided by eligible professionals within our health care system
- 64 eCQM (EHR)
- Align with the 6 Department of Health and Human Services' NQS priorities for health care quality improvement. (6 Domains)
 - Patient and Family Engagement
 - Patient Safety
 - Care Coordination Population
 - Public Health
 - Clinical Process/Effectiveness
 - Efficient Use of Health Care Resources
- Multi-specialty
 - Primary Care
 - Specialists
 - Behavioral Health
 - HIV

Best Practices

1. Invest in CEHRT – Certified Electronic Health Record Technology
2. Use Data to run your organization (don't view it as a necessary evil)
3. Make data integrity somebody's responsibility
4. "Error-Proof" the EHR Configuration
 - Limit the number of places the same information can be input
 - Configure EHR to match clinical workflows
 - Validate data integrity repeatedly
5. Proactively embark on compliance projects:
 - PCMH
 - Meaningful Use
6. Share Data not Text!
7. Monitor Actual Workflows
 - Inaccurate Data
 - Data in the wrong format or the wrong place
 - Missing data
8. Follow accepted best practices

Sharing Data Internally

- Usually multiple systems
 - Clinical EHR
 - BH EHR
 - Residential
 - Outpatient
 - Methadone
 - Etc
- 4 Choices
 - Integrated System
 - Interface
 - Warehouse
 - Manage through Workflow

Useful Links

Meaningful Use. HealthIT.gov

- <http://www.healthit.gov/providers-professionals/meaningful-use-definition-objectives>

Certified Health IT Product List (CHPL)

- <http://www.healthit.gov/policy-researchers-implementers/certified-health-it-product-list-chpl>

eCQM Library

- https://www.cms.gov/Regulations-and-Guidance/Legislation/EHRIncentivePrograms/eCQM_Library.html

Connecting Healthcare for the Nation (10 year Roadmap)

- <http://www.healthit.gov/sites/default/files/nationwide-interoperability-roadmap-draft-version-1.0.pdf>
- <http://healthit.gov/sites/default/files/ONC10yearInteroperabilityConceptPaper.pdf>

Presenter Contact Information

Name Adrian Bishop
Organization Advocates for Human Potential
Phone 978 261 1441
E-mail abishop@ahpnet.com



Additional Questions?
Contact the SAMHSA-HRSA Center for Integrated Health Solutions
integration@thenationalcouncil.org

For More Information & Resources

Visit www.integration.samhsa.gov or
e-mail integration@thenationalcouncil.org





SAMHSA-HRSA Center for Integrated Health Solutions

**Thank you for joining the Integrating
EHR CoP**

**Please take a moment to provide your
feedback by completing the survey at
the end of today's webinar.**