HIE in Georgia from a CIO's Perspective

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CNFL HIMSS HIE Event



Presentation Agenda

- Introduction
- Early HIE work
 - Chatham County, Georgia, Safety Net Planning
 Council HIE Chatham Healthlink
 - Georgia statewide HIE
- In depth review of current statewide HIE
- Experience as a provider and customer of HIE



Introduction

Current position

- Sr. Vice President and CIO for Gwinnett Health System, Lawrenceville, Georgia
- Georgia Chapter HIMSS Board, President-elect, Chair of HiHIT Committee
- Technolgy Association of Georgia (TAG) Health Society – Board, Vice Chair
- GeorgiaCIO Leadership Advisory Board – Board member, Program Committee member

Past Experience

- Interim CIO, Carepoint Health
 System, Jersey City, NJ 1.5 years
- Sr. Vice President and CIO, Memorial Health University Medical Center, Savannah, GA – 5 years, HITT Advisory Board, Chatham Co IT Committee Chair
- Asst. Vice President and CIO, Phoebe Putney Health System, Albany, GA – 3 years
- Vice President and CIO, Promina Health System, Atlanta, GA – 3 years (employment 8 years)

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Early HIE Work

2006-2010



Chatham County Healthlink

History

- Established Chatham County Safety HIE Project in 2006
- Scope the healthcare providers that serve the uninsured and underinsured citizens of Chatham County
- Goals
 - Build a foundation for HIE
 - Distribute results and referral reports
 - Improve ED follow up care
 - Automate referral process
 - Streamline eligibility checking
 - Share real-time capacity availability

Accomplishments

- Developed policy and procedures for Chatham Healthlink
- Educated key stakeholders in community
- Secured grants to fund technology
- Implemented technology 2009
- Develop an HIE between the safety net providers
- Merged with larger regional HIE – still operating



Georgia Health Information Technology and Transparency (HITT) Advisory Board

History

- Established by executive order by Governor of Georgia Oct 2006
- Scope HIE, eRx, EMR
- Goals
 - Improved patient safety
 - Improved quality of care
 - Improved efficiency
 - Improved detection epidemic threats
 - Cost savings
 - Healthcare consumer engagement

Accomplishments

HITT Board

- Subcommittee work by industry stakeholders
 - Business and Clinical Operations
 - Governance and Finance
 - Legal and Privacy Policy
 - Technical Infrastructure
- Applied for and awarded federal grant \$13m 2010

Department of Community Health

- Established public/private entity, Georgia Health Information Exchange, Inc. (non-profit 501(c)(3)) 2010
- Georgia determined to be an OPT-OUT state



Update on the Georgia HIE

now called Georgia Health Information Network (GaHIN)



Georgia Health Information Network (GaHIN)

Dedicated to creating a healthier Georgia through the use and exchange of electronic health information

- Advance patient-centered healthcare
- Increase efficiency
- Improve the health of the state's entire population

GaHIN is the state designated entity (SDE) for HIE in Georgia

Organization-Wide Strategies by Year

- Establish the foundation for GaHIN and prepare the organization and statewide HIE Network for high growth through infrastructure development and product delivery.
- Develop and execute strategies to rapidly increase GaHIN membership and overall Network volume and value. Actively promote statewide interoperability between healthcare providers while making efforts to keep barriers to entry low.
- Research and evaluate the next generation of health information exchange products to meet the needs of Georgia healthcare stakeholders and further the usefulness and sustainability of the Network.
- Continue to employ and build upon successful 2015 and 2016 strategies to reach goal of 80% Georgia providers having access to their patient's health records via the GaHIN Network.
- Examine new ways to meet member needs including supporting access by patients to their healthcare records, providing leading-edge health information exchange products and ensuring the financial health and sustainability of GaHIN.

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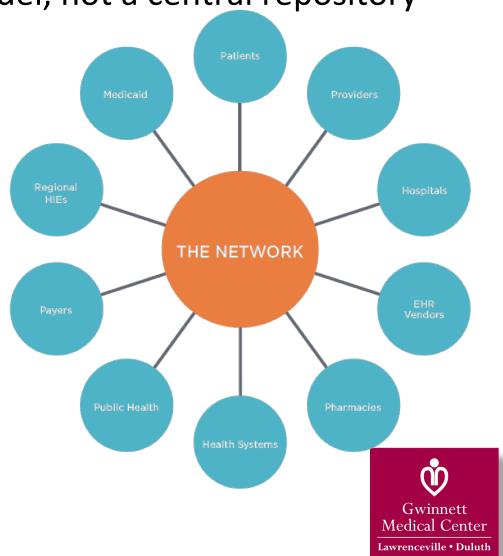
GaHIN Network of Networks Model

Federated-hybrid model, not a central repository

of clinical data

 Patient information remains with the treating provider and only flows when there is authorization

 GaHIN makes an individual data repository available to Members directly connected to the Network





Connecting Georgia GEORGIADIRECT

Basic Data Exchange

Free email messaging service to securely send patient health information to other authorized healthcare professionals

- 518,169 transactions in 2017
- 5,668 registered providers
- 288 member organizations





Connecting Georgia

GEORGIA CONNECTED CARE

Robust Integrated Patient Search (Query)

Providers can use their EHR to quickly access patient health data from hospitals, physician practices, state health systems and much more

- ~10,644 connected providers
- 1,020,176 queries in 2017
- 29,358,398 records in GaHIN's Master Patient Index

eHealth Exchange



Connected Organizations

GEORGIA CONNECTED CARE

State Agencies

- GA Medicaid/Department of Community Health (DCH)
- GA Department of Public Health (DPH)
- GA Division of Families and Children Services (DFCS)
- GA Department of Juvenile Justice (DJJ)
- GA Department of Behavioral Health and Developmental Disabilities (DBHDD)

Care Management Organizations

- Amerigroup (with IHE)
- CareSource
- Peach State
- WellCare

Health Systems/Hospitals

- Children's Healthcare of Atlanta (Epic)
- Emory Healthcare (Cerner)
- Grady Health System (Epic)
- Gwinnett Health System (RelayHealth)

Regional HIEs

- Georgia Health Connect (GaHC) (Liaison)
- GRAChIE/Chatham HealthLink (Cerner)
- HealtheConnection (Cerner)
- HealtHIE Georgia (Azalea)

Specialty Connections

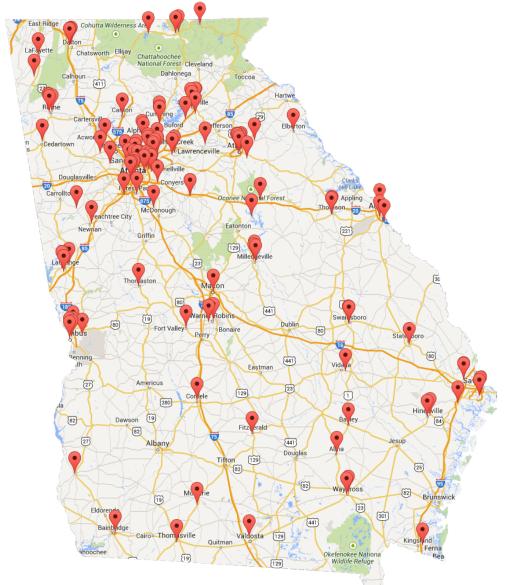
- Atlanta Gastroenterology Associates (Greenway)
- DaVita Healthcare Partners (eHealth Exchange)
- Georgia Partnership for Telehealth (Azalea)

National Exchange

- Veterans Health Administration
- Department of Defense
- Alabama (AOHR)
- East Tennessee HIE (etHIN)
- North Carolina HIE (NCHIEA)
- South Carolina Health Information Exchange (SCHIEx)



GaHIN Membership in Georgia







Moving Georgia Forward

Value-Added Products and Services

Anticipated Products and Services – 2017-18

- Medical image exchange
- Event notification services: payers and providers
- Laboratory results delivery
- Medication fill history services
- More public health registries
- Secure Messaging/Provider Directory

Exploring for 2018

- Population health management
- Advanced technology standards
- Event notification services: community
- Retail clinic connections
- Support for ACOs and PCMHs



Project Highlights

- Care Plan Exchange & ADT Care Alerts
- School-based health clinics in rural communities
- Georgia Justice Information Sharing Initiatives
- Georgia Prescription Drug Monitoring Program
- Value in HealthCare Atlanta Heart Failure Project
- GeorgiaDirect outreach/use cases:
 - Long-term care, EMS, pharmacies, behavioral health, FQHCs, Public Health District Offices, community health organizations, health systems, dentists, dialysis & asthma clinics, VA claims processing



GaHIN Alerting Events

GaHIN provides care alerts from providers to care management partners for the following events:

- Admitted as inpatient: When a patient is admitted as an inpatient to Provider
- <u>Discharged from inpatient status</u>: When a patient is discharged from inpatient status from Provider
- Transferred to another inpatient facility: When a patient is transferred to another inpatient facility from Provider
- Held on 23-hour observation: When a patient is held for observation at Provider and it is not considered an ER visit
- Treated in ER visit: When a patient is seen in the emergency room



GaHIN Registry Connections

- Immunization Georgia Registry of Immunization Transactions and Services (GRITS)
- Syndromic Surveillance
- Cancer Registry (GeorgiaDirect)
 - Georgia Center for Cancer Statistics added Georgia Direct as part of their protocol for providers and small hospitals that do not send information electronically
- EMS/Trauma Database
- Birth Defects Registry
- Newborn Registry
- Alzheimer's Registry (Georgia Alzheimer's Project)
- Prescription Drug Monitoring Program



Experience of a Provider Organization

Our HIE Journey

- Exchanging CCD's and distributing results with our local HIE – works very well – 10 yrs
- Connected to GaHIN using RelayHealth for inpatient clinical systems and ambulatory EMR - <6 months
- Our current inpatient clinical system has limitations with the variety of document types – This excludes 2 major, 1 minor facilities in our MSA
- Training physicians to use the HIE can be a challenge different document types, lots of info

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- Ambulatory EMR is a better workflow than inpatient
- Implementing Cerner inpatient and ambulatory removing RelayHealth

Our HIE Journey

- Our local HIE is more valuable for the physician practices than the hospital
- Connecting to GaHIN has been challenging due to our technology
- It will take time for us to assimilate all of the new information into the provider workflow
- We are incorporating the HIE into or training curriculum

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Lessons Learned

- HIE's require stakeholder engagement and that takes time – "what's in it for me?"
- Georgia is an opt-out state but each provider needs to develop policy and procedures in support of opt-out, include in NPP
- Competition among healthcare organizations can halt information sharing – back to stakeholder engagement
- Interoperability continues to be an obstacle
- Workflow, workflow, workflow
- Every experience will not be the same

