Missouri Health Connection

Statewide health information network
One connection: better coordination and better care.

Introduction and Welcome:
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Center for Health Policy
MO HIT Assistance Center

Presenter:
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Director of Public Affairs & Communication
Missouri Health Connection
Before we begin...

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Missouri’s Federally-designated Regional Extension Center

- **University of Missouri:**
  - Department of Health Management and Informatics
  - Center for Health Policy
  - Department of Family and Community Medicine
  - Missouri School of Journalism

- **Partners:**
  - EHR Pathway
  - Hospital Industry Data Institute (Critical Access Hospitals)
  - Missouri Primary Care Association
  - Missouri Telehealth Network
  - Primaris
Vision

Assist Missouri's health care providers in using electronic health records to improve the access and quality of health services; to reduce inefficiencies and avoidable costs; and to optimize the health outcomes of Missourians.
What is our role?

- For providers who do not have a certified EHR system - We help you choose and implement one in your office
- For providers who already have a system - We help eligible providers meet the Medicare or Medicaid criteria for incentive payments
MO HIT Assistance Center
Now Serves
Large Practices & Specialists

- Contact MO HIT Assistance Center for details and pricing
CME & AOA Credit
Now Available

- Instructions provided after today’s presentation
Disclosures

The Office of Continuing Education, School of Medicine, University of Missouri is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

The Office of Continuing Education, School of Medicine, University of Missouri designates this live Internet educational activity for a maximum of one AMA PRA Category 1 Credit™. Physicians should only claim the credit commensurate with the extent of their participation in the activity.

The learning objectives of this live Internet educational activity are:

- Choose an appropriate electronic health record for the practice, create a change team, redesign practice workflow and successfully implement transition to electronic records.
- Appropriately track quality measures in electronic health records and to create accurate reports of quality indicators; physicians will understand how to use indicators to improve patient outcomes.
- Identify potential privacy and security issues in individual practices that are utilizing electronic health records and provide tools for practices to use to assess their security measures to see if they are appropriate.
- Measure and track the way individual practices are reporting on the meaningful use requirements in the federal HIT Tech Act; understand additional clinical reporting requirements contained in meaningful use phases two and three.
- Appropriately design and implement patient portals for patients to access their health care information and learn how to better take care of their health conditions.

The planning members and presenter for this activity have no commercial relationships to disclose.
Disclosures

This regional extension center is funded through an award from the Office of the National Coordinator for Health Information Technology, Department of Health and Human Services Award Number 90RC0039/01.

Cerner and the University of Missouri Health System have an independent strategic alliance to provide unique support for the Tiger Institute for Health Innovation, a collaborative venture to promote innovative health care solutions to drive down cost and dramatically increase quality of care for the state of Missouri. The Missouri Health Information Technology Assistance Center at the University of Missouri, however, is vendor neutral in its support of the adoption and implementation of EMRs by health care providers in Missouri as they move toward meaningful use.
Missouri Health Connection

Statewide health information network
One connection: better coordination and better care.

Missouri HIT Assistance Center
November 8, 2012

Mindy Mazur, Director of Public Affairs & Communications
Missouri Health Connection

- State-designated entity to create health information network
- Non-profit organization
- Board of directors and workgroups include members from:
  - State government,
  - Private health care orgs,
  - Private practice physicians,
  - Professional organizations,
  - Consumer advocacy groups.
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<tr>
<th>Name</th>
<th>Title</th>
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Structure and Workgroups

* More than 80 individuals from throughout the state have been participating in creating the Missouri Health Connection.

- Board of Directors
  - MHC Staff
- Consumer Advisory Council
- Legal & Policy Workgroup
- Technology & Operations Workgroup
  - Pilot Subgroup
- Finance Workgroup
Missouri’s Vision: Six Objectives for MHC

- Improve the quality of medical decision-making and the coordination of care;
- Provide accountability in safeguarding the privacy & security of medical info;
- Reduce preventable medical errors and avoid duplication of treatment;
- Improve the public health;
- Enhance the affordability and value of health care; and
- Empower Missourians to take a more active role in their own health care.

One Connection. Better Coordination and Better Care.
Missouri Health Connection

- **What MHC’s Network will provide:**
  - Most economical network for interconnectivity
  - Real time *information* at the point of care
  - Leave no Missouri provider behind
  - Help for providers to meet **Meaningful Use** and get $ incentives
  - Single point of connection for statewide health data, including **Medicaid**
  - Framework for interstate connectivity
Missouri Health Connection’s network will:

- help providers meaningfully use electronic health records

...thus allowing providers to also secure additional incentives that could represent *nearly $400 million* into Missouri.
Current state vs. future vision

Current Confusion

Future Vision
MHC’s health information network
MHC: statewide health information network

- Hospitals
- Labs and Imaging Centers
- Physicians
- Pharmacies
- Personal Health Records/Patient Portals
- Public Health & Medicaid
- Nursing Homes
- Clinic
- Patient
Our Services

- MHC Direct Secured Messaging
- MHC HealthShare Network
MHC Direct Secure Messaging

- **HIPAA-compliant email address**
  - *Functions like standard email, but encrypted and secure*

- **Securely routes care summaries, clinical notes, lab results**
  - *No more faxing*

- **Helps Providers Meet Stage 1 Meaningful Use**
  - *Simple to use*
  - *You only need an Internet connection*
MHC HealthShare

- Query-based network
  - Comprehensive medical data at the point of care
  - Platform to support integration within healthcare orgs
  - Interoperability & exchange of health information with other healthcare organizations

- Components include:
  - Provider Directory
  - Terminology Engine
  - Consent Management
  - Clinical Message Delivery
How will providers connect?

- Through secure Web portal (viewer)

or

- Through EMR (embedded)
MHC’s Secure Network – Ensuring Privacy

- MHC’s Network is a secure, private network
- Missouri patients get to choose if they want to “opt-in” to allow for exchange of data
- Providers participating in MHC must abide by State and Federal laws (i.e. HIPAA)
- Patients’ information is pulled only “as-needed” by providers caring for them
- MHC’s Network is for CLINICAL purposes
- MHC’s Legal and Policy workgroup – thorough review of all policies
MHC’s Secure Network -- Ensuring Security

- Only registered providers can access data
- Role Based Access
- MHC’s Network will verify true identity of data senders and data receivers
- Unlike paper systems, MHC’s Network will be able to audit & keep track of who accesses or changes information
Tying it all together...

One connection to MHC means better coordination and better care
A simple example (Branson vacation)

- You live in St. Louis (doctor, etc. is there)
- On vacation in Branson you get sick
- You are unconscious & taken to hospital
- With MHC, docs able to pull medical records from St. Louis
  - PCP, Lab, Rx
- Saw allergy to meds
- Prevented duplicate test
- Didn’t have to wait
- All Info at point of care

= BETTER OUTCOME!
Case Study: Saving Time, Money and Lives in Memphis

Study:

- **12 hospital emergency rooms in the Memphis area shared patient information electronically**
  - Compared ER outcomes from 2 groups of patients: one with clinical background in EHRs and another without data

Results:

- **Participating hospitals reduced health-care costs by $2 million over 13 months**
  - Doctors avoided needless admissions, CT scans and other unnecessary or duplicative tests
  - Research indicates that the savings for hospitals around the US could be in the billions and lead to better medical outcomes

QUESTIONS?
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