SAMHSA-HRSA
Center for Integrated Health Solutions

Integration & Data Sharing Issues

Region IX and X

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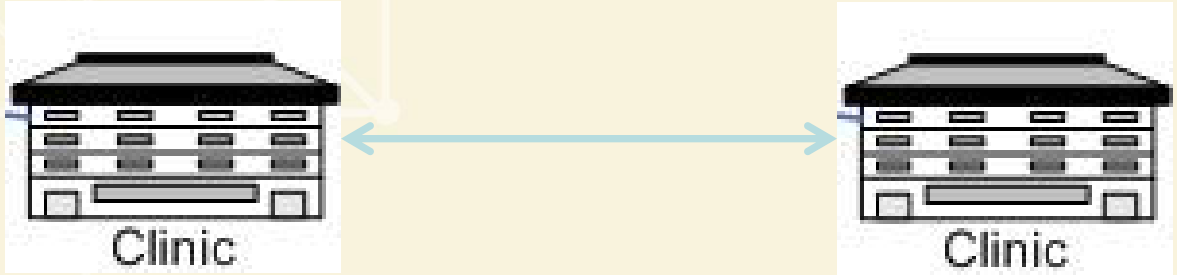
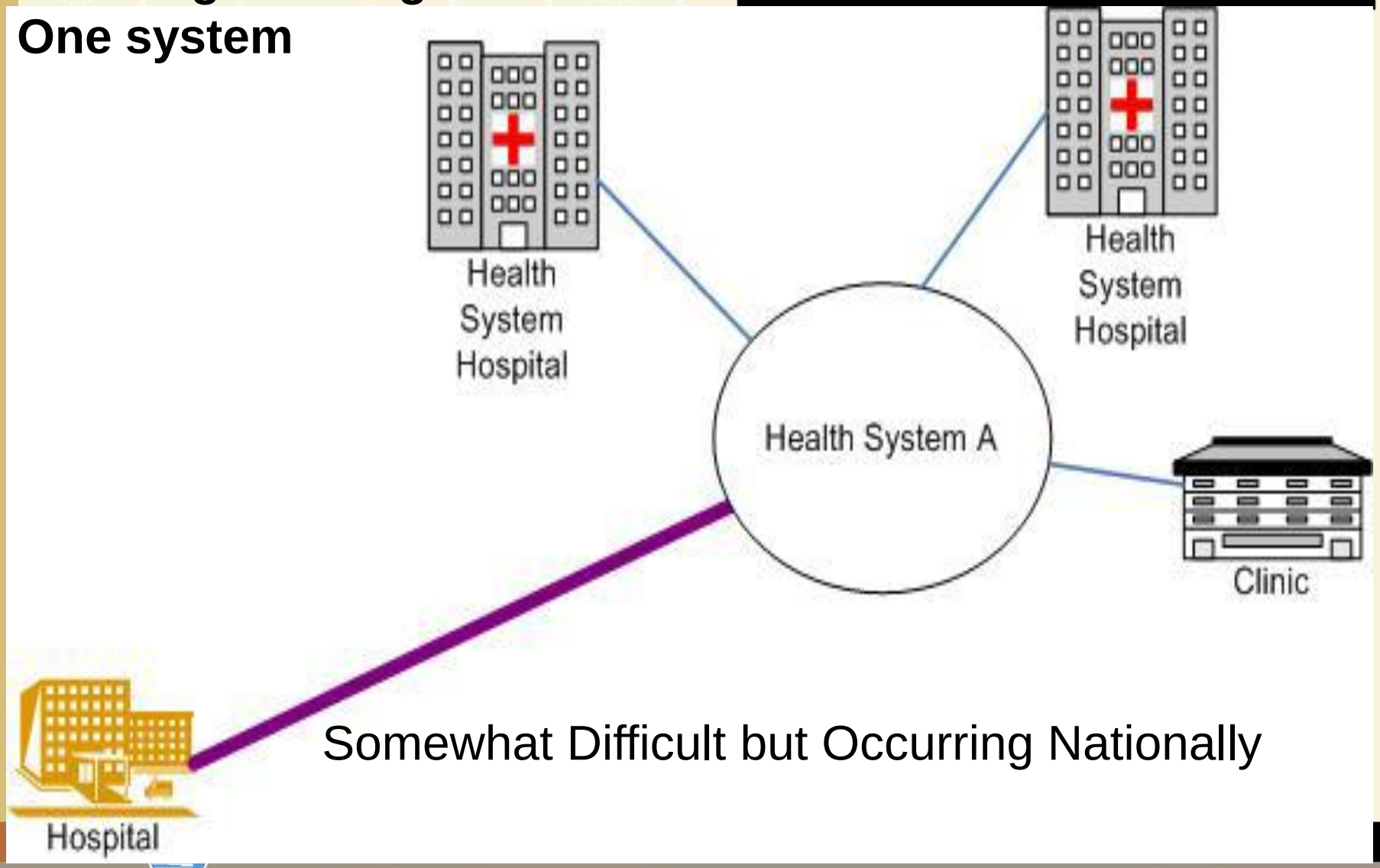
Flavors of Exchange

Secure Messaging Exchange
Uses DIRECT Protocols
Meets Meaningful Use Requirements



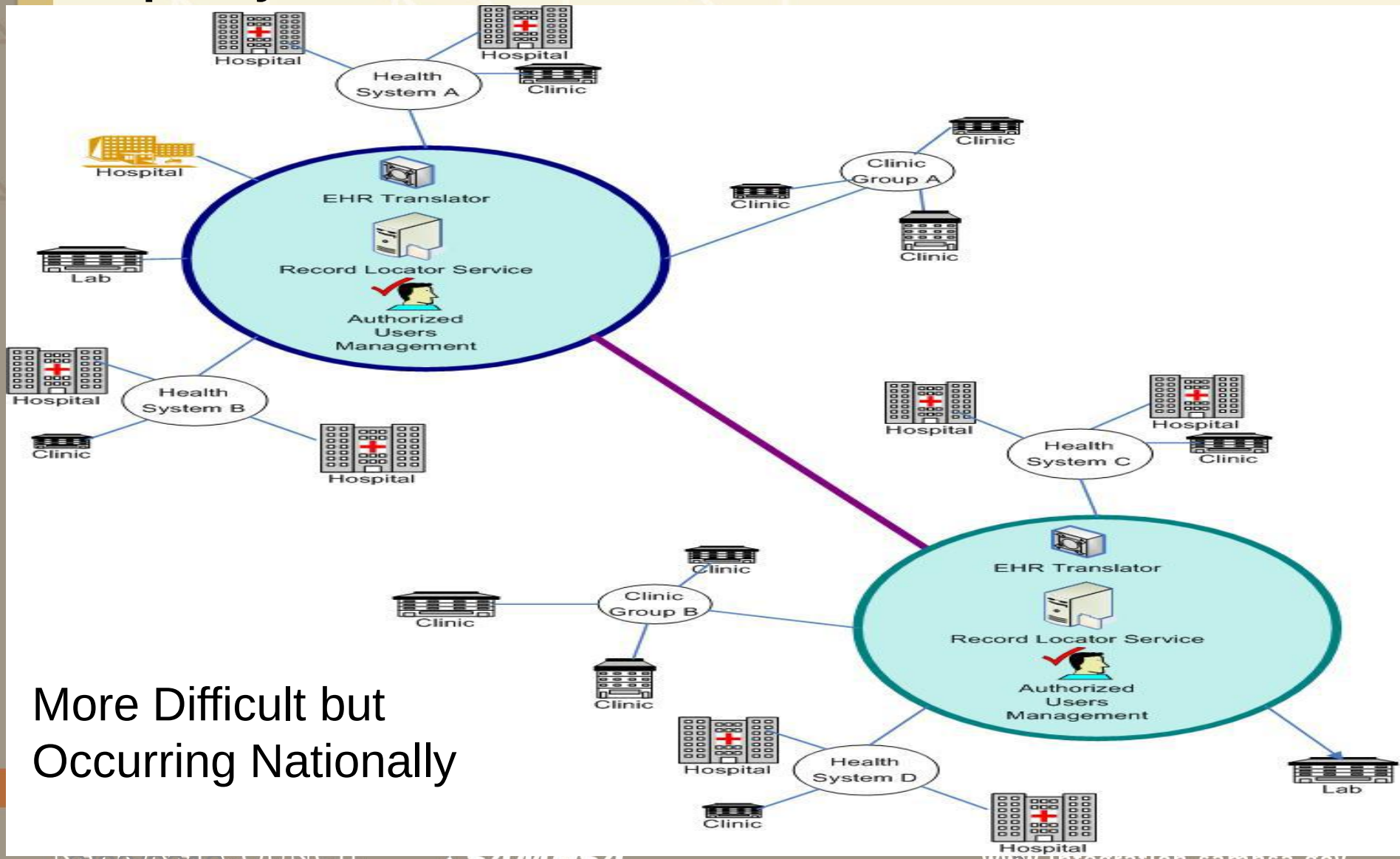
Easy

Exchange Among Providers in One system



Somewhat Difficult but Occurring Nationally

Exchange Among Providers in Multiple Systems



More Difficult but Occurring Nationally

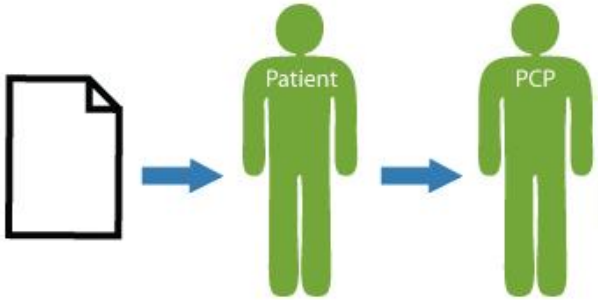
ONC's Goal - Information Securely Follows Patients Whenever and Wherever They Seek Care

Find patient information to support unplanned care

QUERY-BASED EXCHANGE

Send and receive patient information to support care coordination

DIRECTED



Patients aggregate use and share their own information

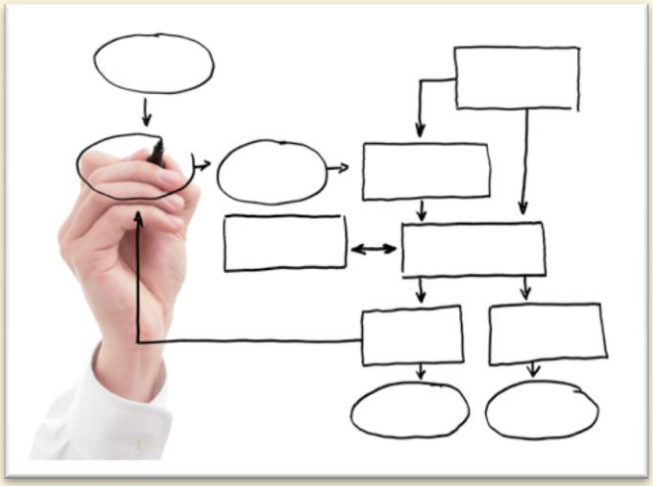
CONSUMER-MEDIATED EXCHANGE

MULTIPLE MODELS

ONC's Approach

Interoperability is a *journey*, not a destination

Leverage *government as a platform* for innovation to create conditions of interoperability



Health information exchange is *not one-size-fits-all*

Multiple approaches will exist *side-by-side*

Build in *incremental steps* – "don't let the perfect be the enemy of the good"

ONC's Role - Reduce Cost and Increase Trust and Value To Mobilize Exchange

COST

Standards: identify and urge adoption of scalable, highly adoptable standards that solve core interoperability issues for full portfolio of exchange options
Market: Encourage business practices and policies that allow information to follow patients to support patient care
HIE Program: Jump start needed services and policies

VALUE

- Payment reforms
- Meaningful Use
- Interoperability and wide-scale adoption

TRUST

- Identify and urge adoption of policies needed for trusted information exchange

ONC's ROLE

Exchange Priorities in 2012 - Driving Forward on Multiple Fronts

- More rigorous exchange requirements in Stage 2 to support better care coordination
- Standards building blocks are in place, with clear priorities to address missing pieces in 2012
- NwHIN Governance increases trust and reduces the need for one-to-one negotiations among exchange organizations
- State HIE Program jump starts needed services and policies

More Rigorous Exchange Requirements in Stage Two to Support Better Care Coordination

Proposed Stage Two Meaningful Use Exchange Requirements (summary)

- Provide summary of care document for more than 65% of transitions of care and referrals with **10% sent electronically** (across vendor and provider boundaries)
- Patients can **view, download or transmit** their own health information
- **Successful ongoing submission** of information to public health agencies (immunizations, syndromic surveillance, ELR)

Standards Building Blocks are in Place, with Clear Priorities to Address Missing Pieces in 2012

ONC Made Big Strides to Enable Exchange in Stage 1

The first challenge was to make sure that information produced by <u>every</u> EHR was understandable by another clinician and could be incorporated into his EHR

With the vocabularies, code sets and content structure standards in Stage 1 meaningful use every certified EHR can produce the standardized content needed:

- Produce and consume a standardized care summary
- Maintain standardized medication lists
- Consistently report quality measures and public health results
- Consume structured lab results

Additional Critical Pieces Are Now In Place

Next we needed a common approach to *transport*, allowing information to move from one point to another

- We now have two easily adopted standards for *transporting* information – NwHIN Direct and the transport protocol used in NwHIN Exchange

And it was clear that we needed more highly specified standards to support care transitions and lab results delivery

- For the first time in our country's history there is a single, broadly-supported electronic data standard for patient care transitions

This Year We Will Address the Missing Components to Support Scalable Exchange

- **Directories** – standards and policies to make them consistent, reliable, findable and open to be queried
- **Certificate management and discovery** - common guidelines for establishing and managing digital certificates and making the public keys "findable"
- **Governance** - baseline set of standards and policies that will accelerate exchange by assuring trust and reducing the cost and burden of negotiations among exchange participants

What will be Exchanged

C32, CCR/CCD, CDA

Clinical Element Data Dictionary

http://wiki.siframework.org/Transitions+of+Care+Initiative+CEDD

Biggest Hurdle

42 CFR Part 2 Consent Management
"To Whom"

This is being worked on now!!

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