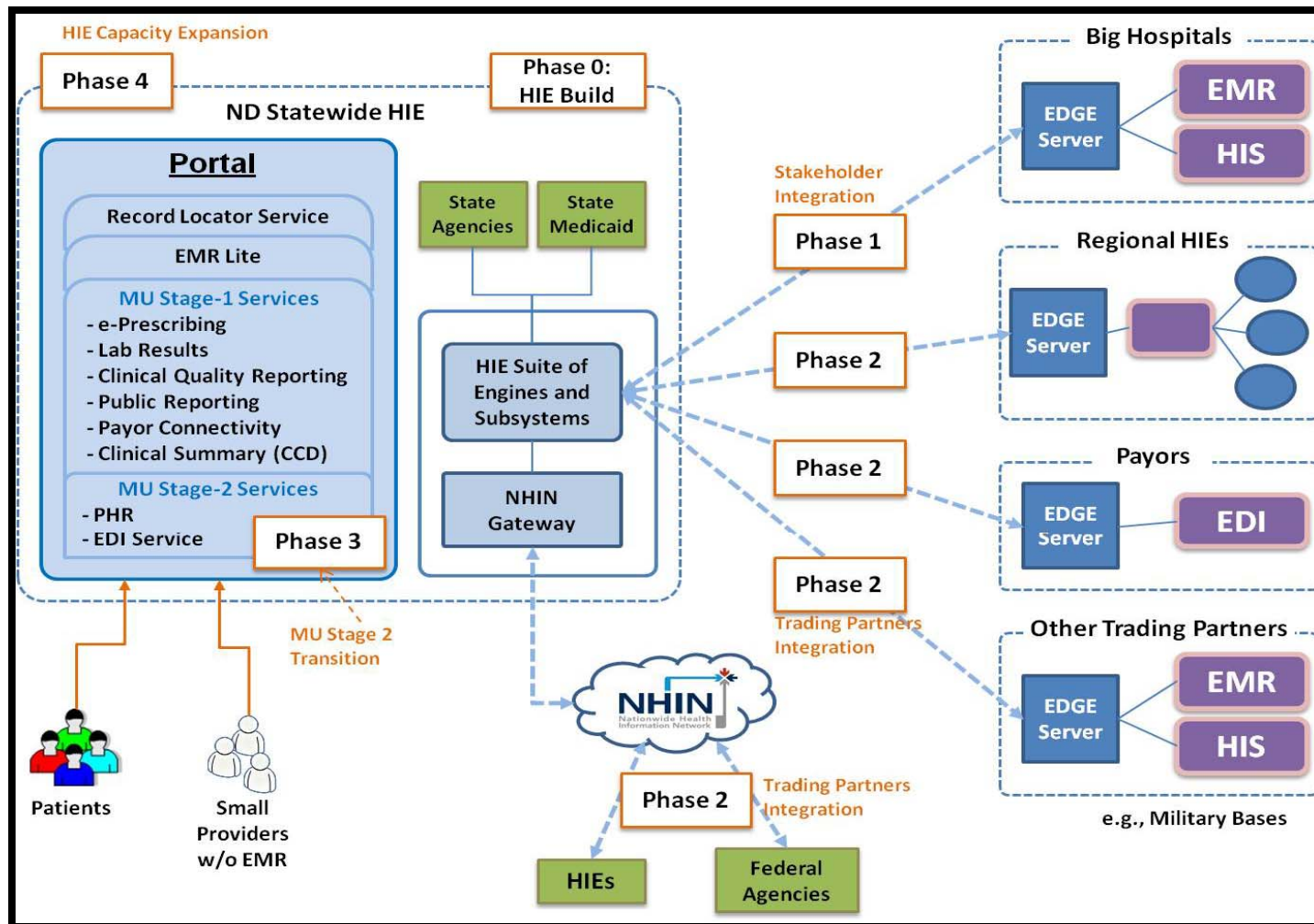# State HIE Strategic & Operational Plans
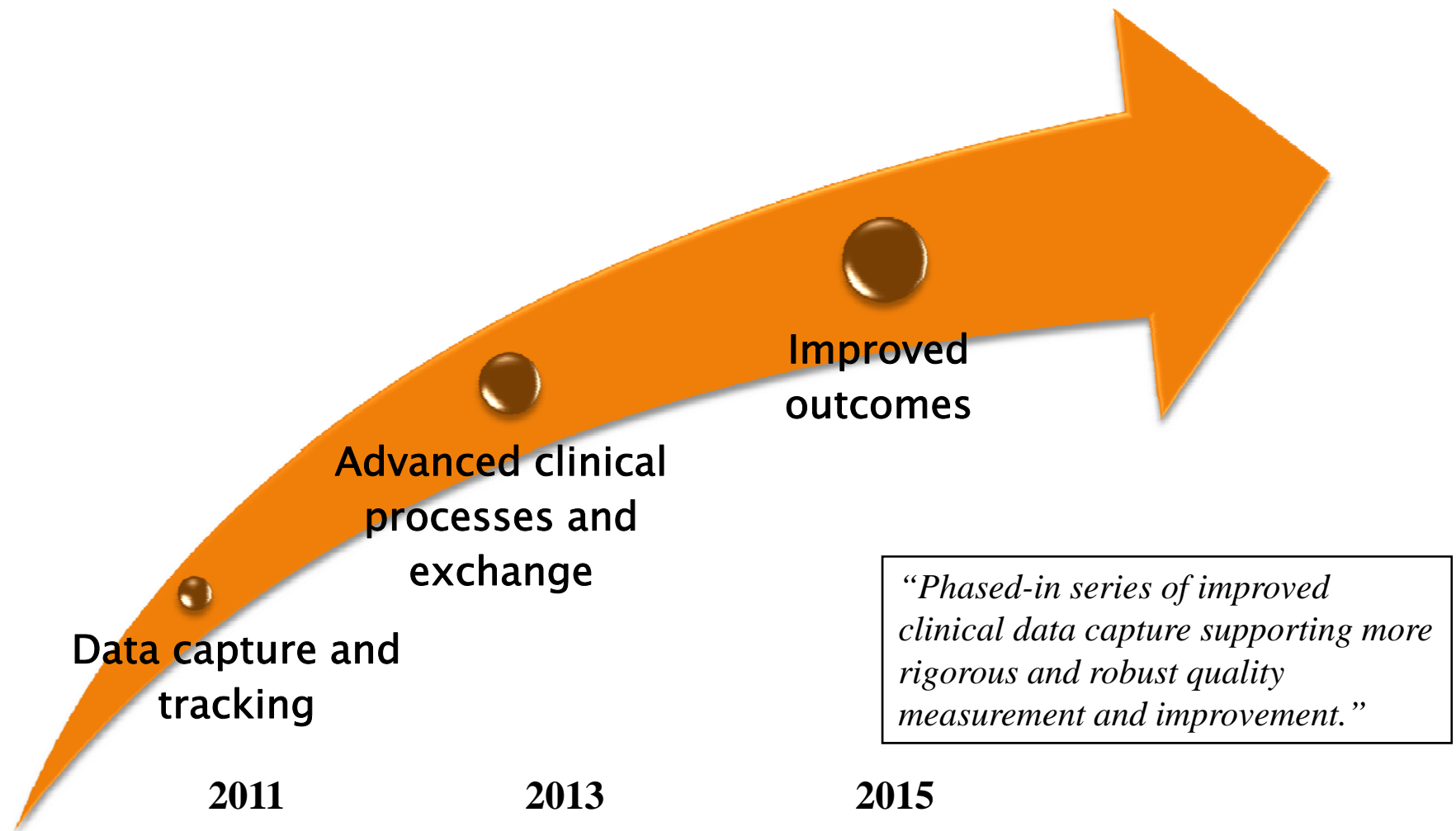
- Implementation Strategy
  - Phase 1 - Develop HIE Strategic and Operational Plans
  - Phase 2 - HIE Implementation & Ongoing Operations

| Deliverable	Status
Project Management Plan	Completed
Environmental Scan	Completed
Data Analysis	Completed
Initial Strategies & Goals	Completed
Market Testing	Completed
Strategic & Operational Plans	Submitted: Sept. 27, 2010 http://www.healthit.nd.gov/strategic-and-operational-plans/
ONC Approval & Final Acceptance	ONC Reviewing – minimum 6–8 weeks

HIE With Phases

Bending the Curve Towards Transformed Health

Improved
outcomes

Advanced clinical
processes and
exchange

Data capture and
tracking

"*Phased-in series of improved
clinical data capture supporting more
rigorous and robust quality
measurement and improvement.*"

2011   **2013**   **2015**

Source: Connecting for Health, Markle Foundation "Achieving the Health IT Objectives of the American
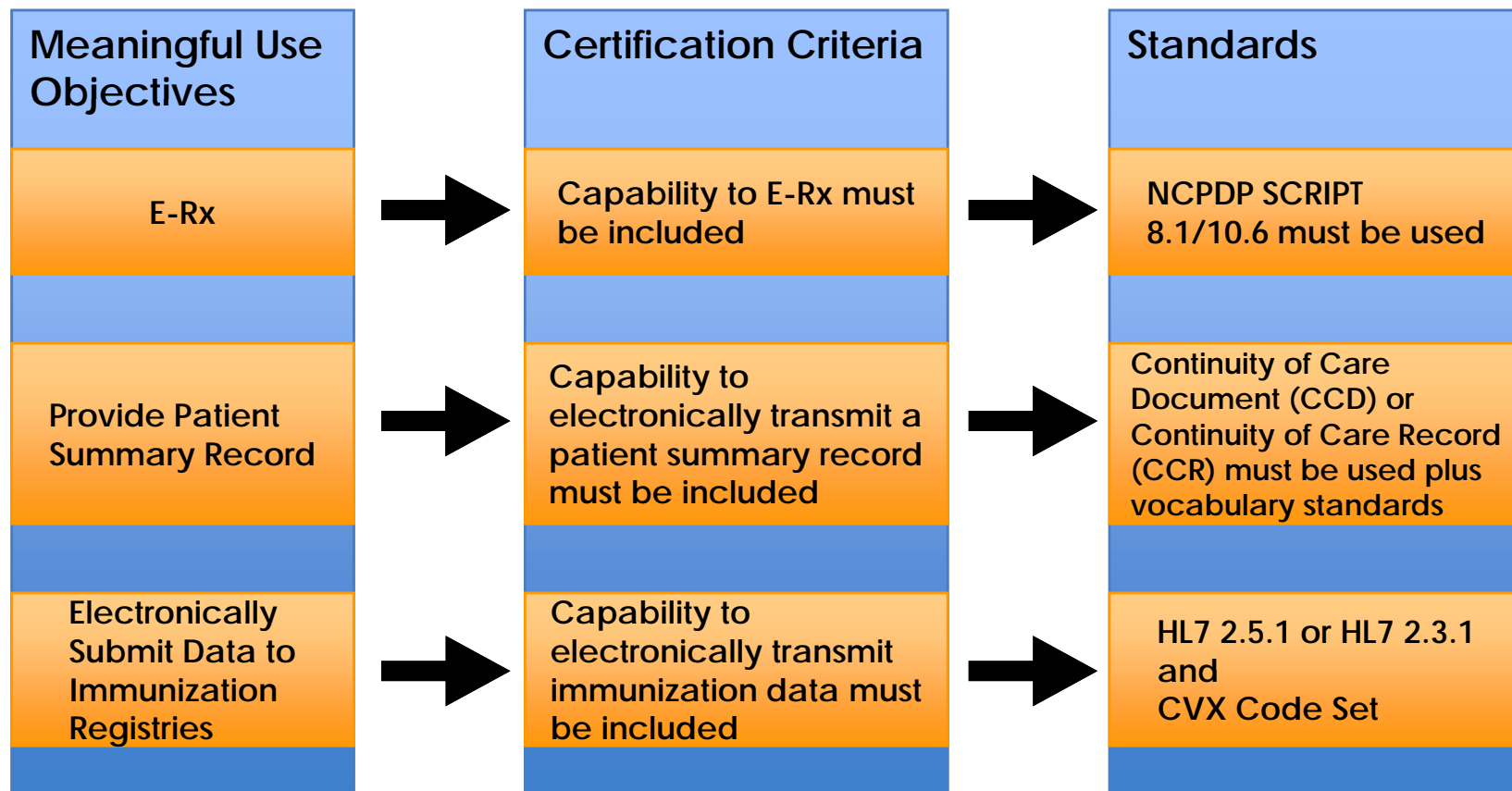Recovery and Reinvestment Act" April 2009

HIE Timeline
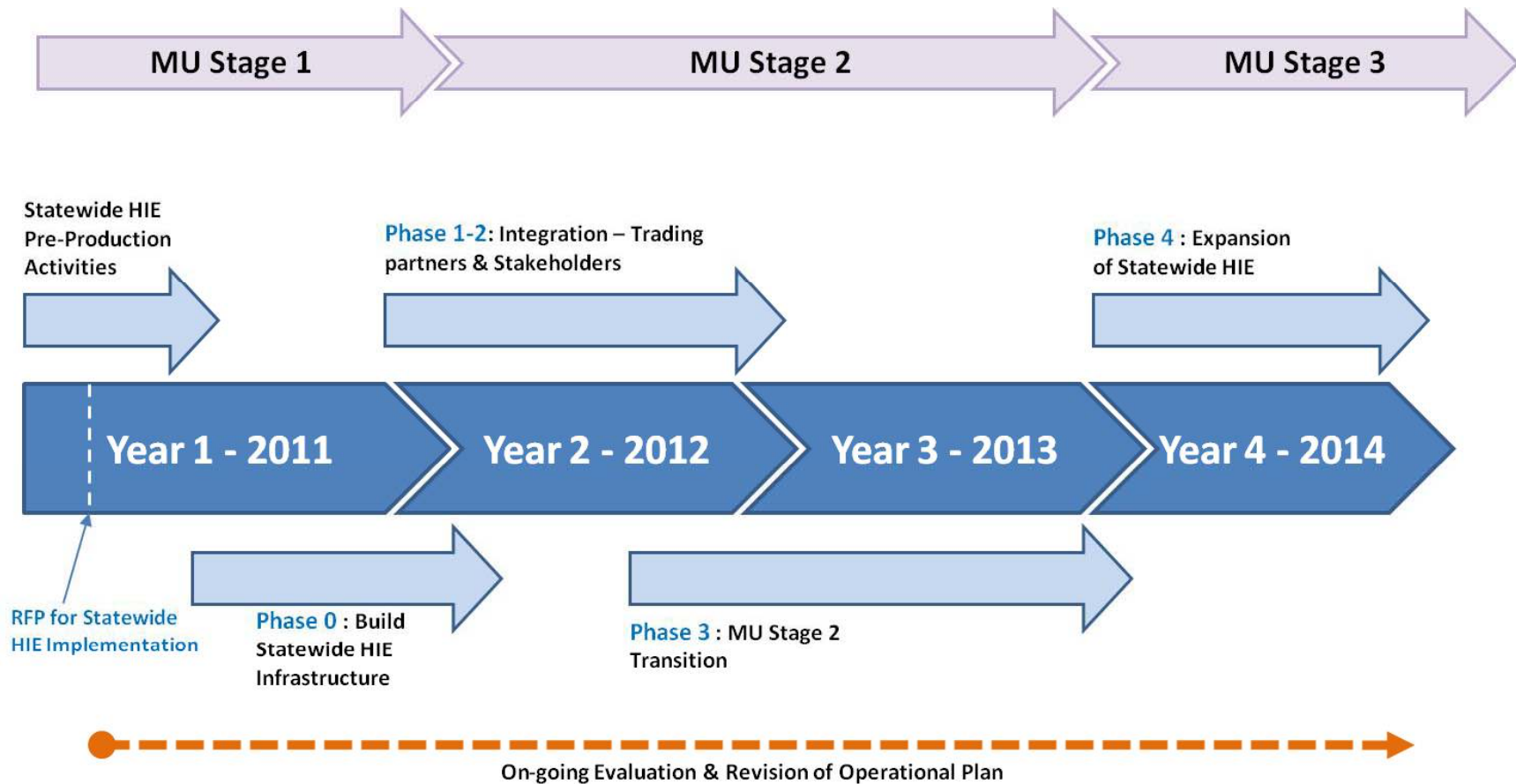
Final Rules

- Initial Set of Standards, Implementation Specifications, and Certification Criteria for Electronic Health Records
- Establishment of the Temporary Certification Program for Health Information Technology
  - To Date Three Certifiers Approved
    - Infoguard
    - CCHIT
    - Drummond Group
  - 40 Systems Certified (Per ONC Website 10/11/2010)
    - 24 complete
    - 16 modular

Aligning Certification and Standards

Meaningful Use Objectives	Certification Criteria	Standards
E-Rx	Capability to E-Rx must be included	NCPDP SCRIPT 8.1/10.6 must be used
Provide Patient Summary Record	Capability to electronically transmit a patient summary record must be included	Continuity of Care Document (CCD) or Continuity of Care Record (CCR) must be used plus vocabulary standards
Electronically Submit Data to Immunization Registries	Capability to electronically transmit immunization data must be included	HL7 2.5.1 or HL7 2.3.1 and CVX Code Set

Office of the National Coordinator(ONC) for HIT Funded Programs Designed to Support Achievement of Meaningful Use
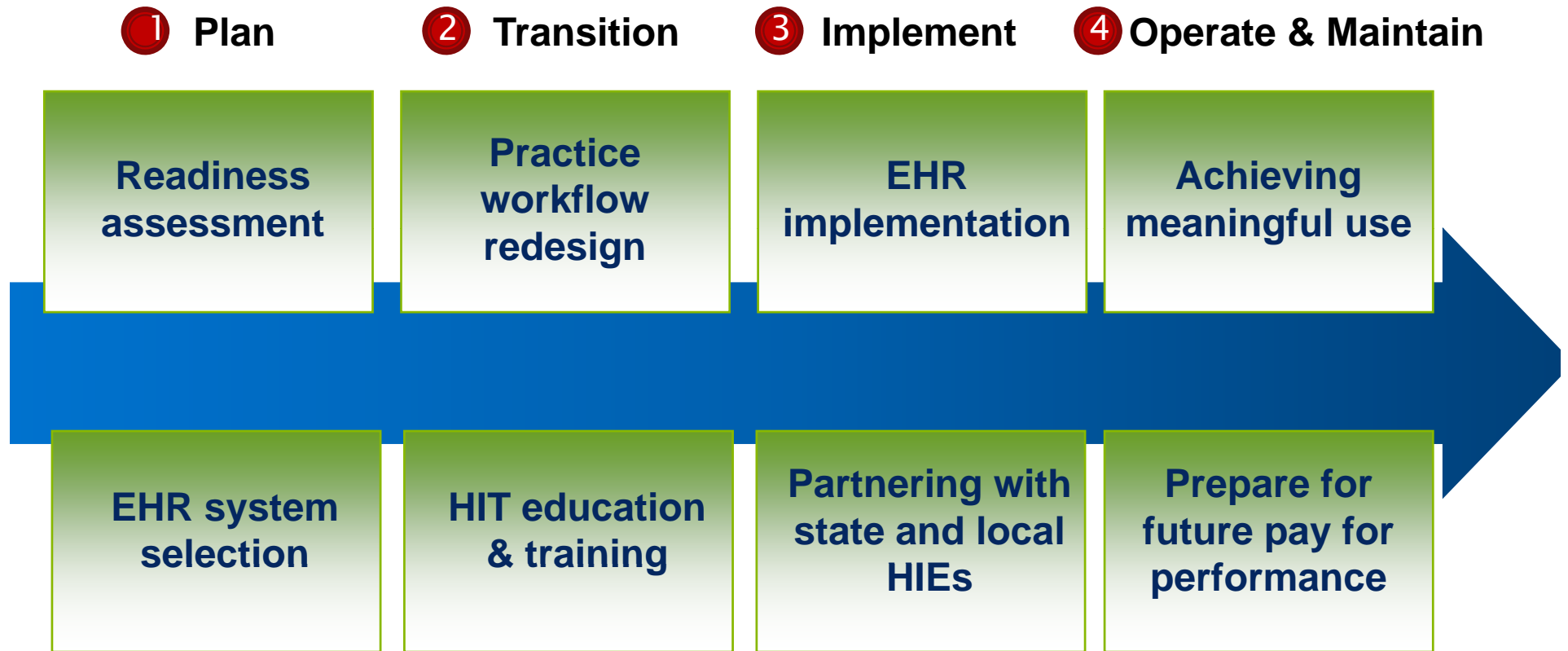
Regional Extension Centers(REC) for HIT

ONC provided funding for 70 regional extension centers that will provide technical assistance, guidance and information on best practices to support and accelerate health care providers' efforts to become meaningful users of Electronic Health Records (EHRs).

- Regional Extension Assistance Centers for HIT(REACH) for Minnesota and North Dakota
- Key Health Alliance is the lead (Minnesota entities - Stratis Health, National Rural Health Resource Center and the College of St. Scholastica). Partnering with:
  - North Dakota Health Care Review
  - Center for Rural Health, UND, School of Medicine and Health Sciences
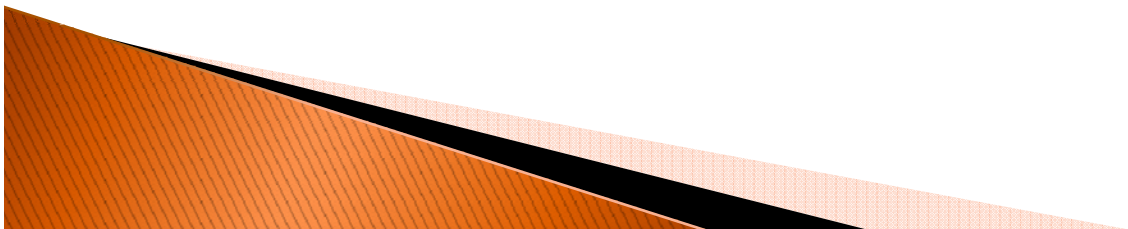
REACH can Provide Comprehensive Support throughout the Entire EHR Implementation Process

① Plan **② Transition** **③ Implement** **④ Operate & Maintain**

Readiness assessment	Practice workflow redesign	EHR implementation	Achieving meaningful use

EHR system selection	HIT education & training	Partnering with state and local HIEs	Prepare for future pay for performance

Register Now for REACH Services
http://www.khareach.org/
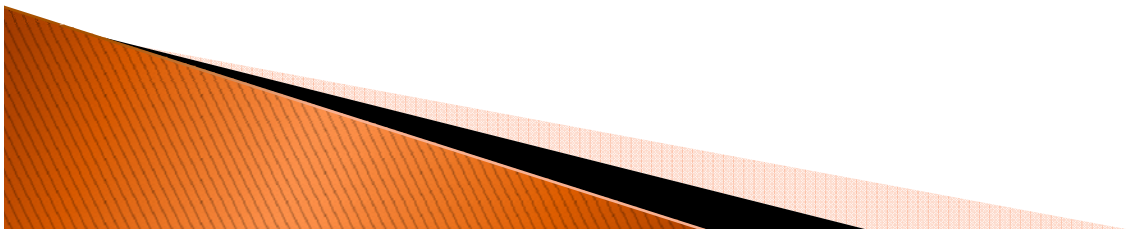
REACH services are:

- Available to North Dakota and Minnesota providers across the continuum of care. Fees depend on the services you need and qualification for federal discounts.

- Subsidized (up to 90%) now through January 2012, by a federal grant for providers who achieve the Stage 1 (2011) meaningful use criteria by the January 2012 deadline.

- Available for all providers who are not subsidized, including specialists, acute care hospitals, and long term care facilities, and for priority primary care providers after 2012, REACH fees are based on services needed.

Providers Eligible for REACH Services

- Physicians and health care professionals with prescriptive privileges
  - Physicians assistants, nurse practitioners, nurse midwives
- Primarily focused on primary care
  - Family medicine, internal medicine, OB/GYN, pediatrics
- Small practices of 10 or fewer primary care providers with prescriptive privileges
- Designated rural health clinic (RHC), federally qualified health clinic (FQHC), or community health center (CHC), with any number of providers
- Clinic owned by a Critical Access Hospital (CAH), with any number of providers
- CAH and small rural hospitals.

Registered with Reach
- 22 Clinics representing 311 Primary Care Providers
- 16 Hospitals
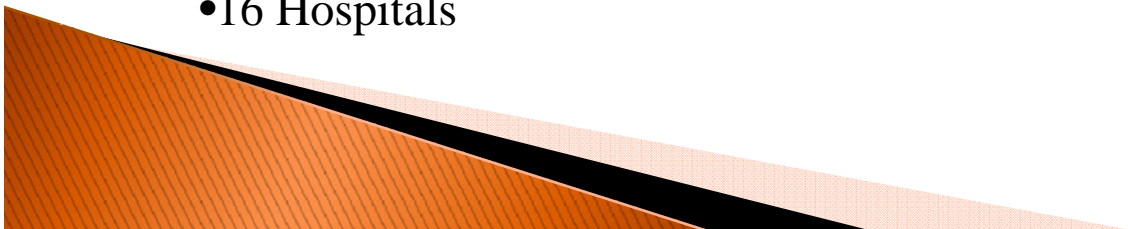
Lake Region State College(LRSC) – Health IT Certificates

Certificates available for four ONC defined roles:

- <u>Technical Software Support Staff</u> -Workers in this role will support and maintain the technology deployed in clinical and public health settings.

- <u>Health IT Trainer</u> - Workers in this role design and deliver training programs to employees in clinical and public health settings.

- <u>Clinician/Practitioner Consultant</u> - Workers in this role analyze, consult, and design a workflow process to optimize providers use of their EHR system and achieve meaningful use.

- <u>Workflow Redesign Specialist -</u> Workers in this role analyze and assist in reorganization of the workflow of a provider to take full advantage of the features of Health IT.
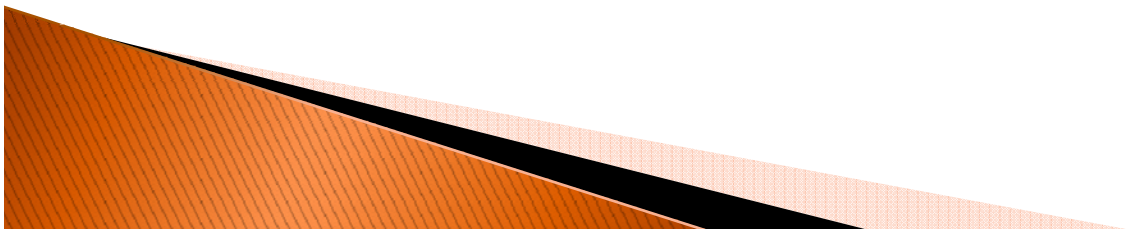
LRSC Health IT Program Highlights   www.lrsc.edu

- Non-Degree Certificates (completed in three-8 week terms)
- Convenient 8-week terms/coursework offered on-line
- New students may enroll each term
- Cost per Certificate - $2700 payable in thirds ($900/term)
- Tuition assistance ($900) available *upon completion of third term*

Terms Begin:
- September 27th, 2010
- November 29th, 2010
- February 7th, 2011
- April 4th, 2011
- June 6th, 2011

For more information contact:
Cindy Brown, Program Manger
701-662-1676/Cindy.M.Brown@lrsc.edu

Enrollment Information:
Debbie Lee, Administrative Assistant
701-662-1677/Debra.A.Lee@lrsc.edu

Revolving Loan Program

- Current Applications
  - 12 provided with 90% of Loan Request
    - Step 2 – Onsite Readiness Assessment
      - 11Completed
    - Step 3 – BND Loan Application
      - 8 applications received
      - 5 approved
      - 1 closed
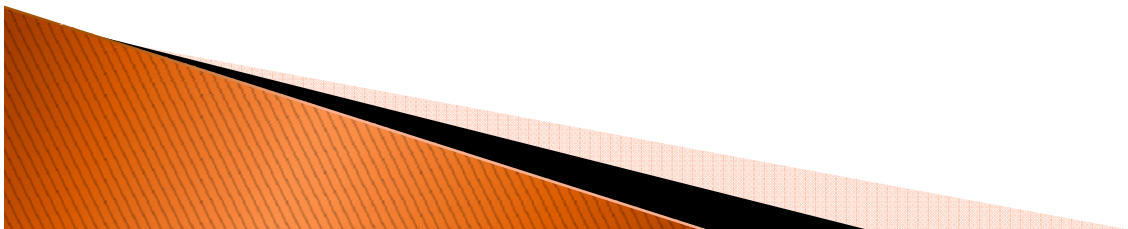
Revolving Loan Program – Additional Hospital Information

	Spent to Date	Additional	Total Anticipated	Hospitals Reporting	Average
PPS Hospitals	$ 195,750,000	$ 80,000,000	$275,750,000	5	$ 55,150,000
Critical Access Hos	$ 3,839,000	$ 3,860,000	$ 7,699,000	9	$ 855,444
Total	$ 199,589,000	$ 83,860,000	$283,449,000	14	$ 20,246,357

System	Count
Epic	4
McKesson	2
Healthland	8
Total	14
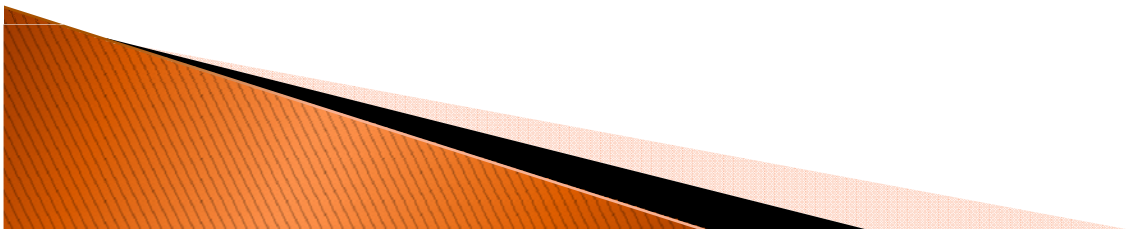
Office of the National Coordinator for Health Information Technology
Funding Coordination in North Dakota

Bellevue College (Region A)

Reach
A nonprofit federal HIT Regional Extension Center dedicated to helping providers in clinics, small hospitals, and other settings in North Dakota and Minnesota implement and effectively use EHRs. Our mission is to assure that each of our clients achieves meaningful use.

Lynette Dickson
Barb Groutt
Nancy Willis

Health Information Technology Advisory Committee
The HITAC mission is to advance the adoption and use of technology to exchange health information and improve healthcare quality, patient safety and overall efficiency of healthcare and public health services in North Dakota.

Lynette Dickson
Alex Todorovic
Sheldon Wolf

Lake Region State College
Lake Region State College offers certificates of completion in four Health IT workforce roles to provide a workforce with enhanced skills to successfully implement, support and maintain EHR Systems

Subcontract to
Provide Assistance
to ND Providers:

Facilitate Infrastructure
Development

Administer

Train Workforce
Technical Software   *Support Staff*
Health IT Trainer
Clinician/Practitioner   *Consultant*
Workflow Redesign   *Specialist*

ND Healthcare Review
ND Center for Rural Health

Input to HITAC

Health Information Exchange

ND Low Interest Revolving Loan Program *(State Funding)*

Provide Assistance with:
Planning
Transitions
Implementation
Operation and Maintenance

Exchange of Information
Between EHR's

Loan Funds to
Acquire EHR's

Providers

Electronic Health Records

Goal -- Improved Outcomes