Behavioral Health Information Network of Arizona

Behavioral HIE: Statewide Roadmap and Update
Learning objective #1:

Learn the basics of what an HIE is and does. Learn how Behavioral Health Information Exchange goes beyond traditional HIE.
Definitions

**EHR**
Electronic Health Record
An electronic record of health-related information on an individual that conforms to nationally recognized interoperability standards and that can be created, managed and consulted by authorized clinicians and staff across more than one healthcare organization.

**ADT**
Admit/Discharge/Transfer Message
A message that is triggered by an event (such as patient admit, discharge, transfer, registration, etc.) that is generated from an EHR system.

**HIE**
Health Information Exchange
BHINAZ
The electronic movement of health-related information among organizations according to nationally recognized standards.

**PHR**
Personal Health Record
An electronic record of health-related information on an individual that conforms to nationally recognized interoperability standards and that can be drawn from multiple sources while being managed, shared and controlled by the individual.

**Direct**
Direct Secure Messaging
a HIPAA-compliant, encrypted email system that encrypts both the message body and any attachments. Users are validated and have been assigned a specific email address which insures the individual on the receiving end of the message is also a HIPAA-covered entity.
Meet Carlos
Who is Behavioral Health Information Network of Arizona (BHINAZ)?

- Community Stakeholder Owned
- Official formed as a Limited Liability Company (LLC) in Arizona – June 2013
- Arizona statewide initiative – Behavioral Health Providers, Public Agencies, Health Information Network of Arizona, and consumers
Key Drivers

• Health Care Reform / Patient Affordable Care Act (ACA)
• Heath Information Technology for Economic & Clinical Health (HITECH) Act
• Meaningful Use of Certified Electronic Health Records (EHR)
• Integration between physical and behavioral health
• Health / Medical Home Models
Why a Separate BH HIE Initiative?

- Complicated Federal Laws around Privacy - 42 CFR Part 2
- Maintains integrity of Behavioral Health system in Arizona
- Provides a platform for emerging business opportunities
- Allows behavioral health providers to collectively own new technology
Access to health information exchange data saves nearly $2,000 per patient annually.\(^1\)

82% of 231 clinicians surveyed said that valuable time was saved, reporting a mean time savings of 105 minutes per patient.\(^1\)

Nearly 90 percent of 231 clinicians surveyed said that quality of patient care was improved through HIE use.\(^1\)

HIE use reduced seven-day readmissions by 48%.\(^2\)

Combining medication history information from three sources improved accuracy and patient safety.\(^4\)

HIE can help identify ED ‘frequent fliers’ for care coordination, Dec 11, 2013; FierceHealthIT

1. Health Information Exchange Saves $1 Million in Emergency Care Costs for Medicare, Oct 14, 2015; American College of Emergency Physicians
3. HIE can help identify ED ‘frequent fliers’ for care coordination, Dec 11, 2013; FierceHealthIT
4. The Comparative Value of 3 Electronic Sources of Medication Data, Oct 20, 2014; Am J Pharm Benefits
Public Versus Private HIE

**Public**

- Availability and efficient distribution of a large volume of patient data
- Efficient exchange of standards-based data (CCD, IHE, etc.)
- Gateway to the National Health Information Network
- Arizona’s HINAZ
Public Versus Private HIE

**Private**

- Coordination of care among the providers in a community – workflow improvement
- Connecting systems and users with different technical capabilities and workflow needs
- Access to the community patient chart
- Business intelligence service to optimize pay-for-performance and quality improvement
- Support for emerging integrated delivery networks
Vision: Interoperability for Seamless, Integrated, Comprehensive Health Care
BHINAZ connection to The Network allows easy access to more complete patient information

Currently 50% of hospital discharges statewide
Expect 80 – 90% hospital discharge representation by end of 2015
Expect to connect to all FQHCs, FQHC-LAs and RHCs by 2016
The BHINAZ Network

- Behavioral Health Providers
- Public and Private External HIE’s
- Community Health Centers
- Advocacy Groups
- Public Agencies
- Primary Care

- Laboratory Companies (LabCorp, Sonora Quest, etc.)
- SureScripts/RxHub
- Specialists
- Hospital Systems
BHINAZ HIE Solution

- Clinical Data Repository (On demand CCD/CCDA/CCR/HL7)
- XCA/XCPD Gateway Services
- Master Patient Index
- Granular Consent Management
- Provider & Resource Directory
- Data Analytics & Reporting
- Orders & Medication Reconciliation
BHINAZ HIE Solution

- Secure, Web-Based Portal Access
- Support for Single Sign-on
- Security, Auditing & Network Management
- Support Core Integrated Healthcare Enterprise (IHE) Profiles
- Individual Referral Management between disparate EHRs
- Population Management
- Direct Exchange
Goals Around Care Integration - Care Coordination Platform

- Enrollment and Care Team Assignment
- Integrated Care Plan
- Centralized Referral Management
- Patient Engagement & Communication
- Population Management
- Reporting and Data Analytics

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Learning objective #2:

Learn about types of behavioral and physical health data that can be exchanged and how efficiencies can be gained by receiving referral information real-time, electronically. See how real-time alerts about hospital admissions and discharges can help coordinate care.
Exchange & Clinical Information

• Structured Data Elements
  • Demographics, Labs, Medications, Allergies, & Diagnosis

• Clinical Documents
The Crisis Use Case

- BHINAZ will have 6 Maricopa County PNO’s connected for bi-directional exchange by 10/1/15
- Data from the PNO’s will be available via the portal viewer for Maricopa County crisis providers
  - Allows for consolidated look-up
  - Specific crisis information will be available for view
- Real-time Crisis Alerts will route to BHINAZ connected providers anytime their client has interacted with a crisis provider
• We route real-time ADT information received from The Network and other sources to our connected providers.
• We can also configure custom alerts for out-of-range lab values, medication concerns or for other meaningful data.
Lab Ordering through the BHINAZ Network

• BHINAZ has the functionality to allow providers to place a lab order directly through their EHR and route to appropriate lab. Results will be received electronically back to the EHR.

• Saves providers from having to complete individual lab connections to lab companies.
BHINAZ offers the flexibility to have data download directly to your EHR

- Choose from medication history, labs or any available documents
- Data is also always viewable via our data viewer

*Viewable data is always based on applicable patient consent*
• BHINAZ supports the ability to route referrals from one provider to another electronically
  • Provider can choose which data elements and documents to include in the referral
  • The receiving provider can choose to pull the referral directly into their EHR rather than create a new record
  • Allows for closed-loop tracking
The Technology
Powered by Mirth
Navigating the HIE
Mirth Res

Jewish Family & Children's Services

CFT Service Plan

Child's Name: ZzzTest, Patient1

Axis I Diagnosis: Facility.

Next Meeting Date: Meeting Location:

Attendees:

Meeting Elements:

Family Vision:

Team Goal/Discharge Plan:

Natural and community based supports:

Strengths and progress:

Brainstorming (including current areas of concern and unresolved challenges to increased family independence):

Family Feedback about the CFT: Did we accomplish what you needed today?

Progress Key: 0 = unresolved or worse; 1 = new need/objective; 2 = unchanged, still an objective; 3 = progress made but still an objective; 4 = resolved

Additional Services
Client moving to treatment coordinations:

Transportation:
Why transportation is medically necessary:
James Adam's Clinical Document

Subject: James Adam's Clinical Document

From: prent

Date: 11/04/2014 10:32

Size: 1.9 MB

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Please see attached.

Sent via Mirth Mail

CCD_1088.xml

Show Download
Learning objective #3: Learn about different consent models and see how consent keeps data secure.
Consent Management
Opt In vs. Opt Out

Opt Out
- Patient must OPT OUT
- Otherwise, they are Opted IN by default

Opt In
- Patient must OPT IN
- Otherwise, they are Opted OUT by default
The state of Arizona is an “Opt-Out” state.

BHINAZ operates under an “Opt-in” model requiring the client to specifically agree to share their protected data from one provider to another.

The BHINAZ model ensures that data protected under 42 CFR part 2 is not re-disclosed without proper consent.

All BHINAZ data is treated as Part 2 data.
BHINAZ Consent Facts

- Consent is captured electronically at the point of care.
- Opt-in consent is valid for 365 days, then a new consent is collected.
- Patients can revoke at any time.
- The consent is “all or nothing” per agency/entity. We are not doing data segmentation at this time.
BHINAZ Consent Facts

- We require the additional consent of minors aged 12-17. Minors can revoke without parents.
- Opt-in status reverts to “no consent on file” at the age of 18 or age 12. A new consent is required.
- Break-the-Glass is allowed regardless of consent status for valid emergency situations.
Consent Model

• Participant visits Agency A
• They sign a consent to allow their Agency A data to be shared/viewed by ALL BHINAZ organizations
• Agency A Data now flows to all other BHINAZ organizations.

- Opt-In

• Participant visits Detox Center
• They choose NOT to share their detox data
• No detox data can be viewed by any other agency on the network

- Opt-Out
BHINAZ Roadmap

Current
- Live with Granular Opt-in Consent
- Live with Connection from BHINAZ to Mercy Maricopa HIN
- Live with 7 connections including 3 PNO connections
- Live with Sonora Quest Labs Connection
- Live with ADT feed from The Network
- Live with ADT alerts to providers

1-2 Months
- All 6 Maricopa County PNOs connected
- Crisis data look up live for Crisis providers
- Live with Crisis Alerts to all connected providers

3-12 Months
- Live with bi-directional exchange with the Network
- Crisis Response Referral System
- Full Break-the-Glass functionality
- Enhanced Consent Portal
Contact

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