

New Mexico State HIE

*One State's Early Experience with ONC's State HIE
Cooperative Agreement Program*



HIMSS Chapter HIE Liaison Roundtable Education Webinar

May 20, 2010

Agenda

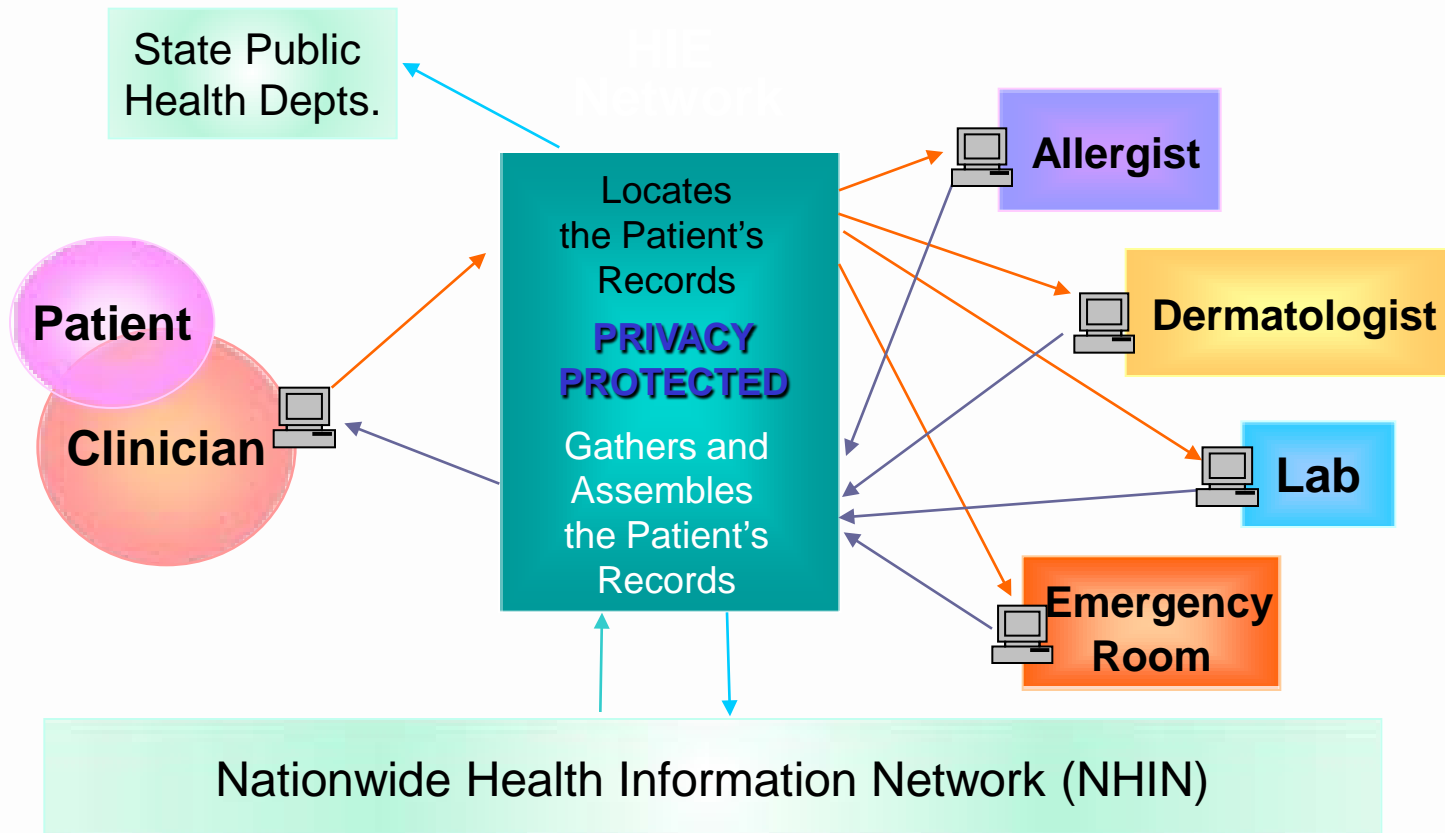
- What is LCF/NMHIC?
- How NMHIC Works
- History of HIE Development
- State HIE Cooperative Agreement Program
- Prerequisites for a Successful State HIE Plan
- Approach to Develop a Successful Plan
- What Worked Well and What Did Not

What is LCF/NMHIC

- **LCF Research**
 - Independent applied health research organization
 - Non-profit 501(c)(3)
- **New Mexico Health Information Collaborative (NMHIC)**
 - Name of the HIE network
 - Name of the collaborative that supports the network
- **What does NMHIC do?**
 - Improves patient care by connecting doctors to electronic patient information scattered across different medical care organizations in our community.

How NMHIC Works

Clinician Requests Access to Patient Records with Patient Consent



History of HIE Development

- **NMHIC created in 2004**
 - Driven by local stakeholder priorities
 - Funded by AHRQ grant
- **Awarded Nationwide Health Information Network (NHIN) Trial Implementation Contract, Sept. 2007**
- **Designated by the NM DOH as the agent for e-Reporting**

History of HIE Development, cont.

- **HIE-related privacy and security initiatives**
 - Designated by the State of New Mexico to lead the Health Information Security and Privacy Collaborative (HISPC), 2006-2009
 - Instrumental in the creation and passage of the New Mexico Electronic Medical Record Act, 2009
 - Data Use and Reciprocal Support Agreement (DURSA)
- **Selected by the Governor as New Mexico's SDE to provide HIE network services, May 2009**

History of HIE Development, cont.

- **Currently Connected**
 - 13 hospitals
 - 2 major medical groups
 - 2 major clinical laboratories
- **Our Community Master Person Index (MPI):**
 - Contains more than 1.1 million unique patients
 - Total population in state is 2.0 million

State HIE Cooperative Agreement Program

Purpose

- **Federal Perspective**
 - To help accelerate the development of state HIE networks to support meaningful use of health IT
 - Federal-state collaboration
 - State Designated Entities are optional
- **New Mexico Perspective**
 - Supports federal objectives
 - Federal objectives must be harmonized with local stakeholder priorities for network services
 - Potential to support rapid expansion of HIE

Program Status

- New Mexico is the first state to meet all ONC requirements for a State HIE Strategic and Operational Plan
- Therefore federal funds are being used to rapidly expand NMHIC throughout the state
- New Mexico State HIE Plan is publicly available at www.NMHIC.org

Plans for HIE Expansion in 2010

- Lovelace Health System (3 hospitals) – February (completed)
- SED Labs – February (completed)
- Christus St. Vincent – April (completed)
- Electronic reporting to NMDOH – May/June
- University of NM Hospital – June/August
- Pilots to evaluate clinician access/usage of NMHIC – July/December 2010

Plans for HIE Expansion in 2010 cont.

- **Several other health care providers will be added - last half of 2010**
 - Specialty group practices
 - Rural hospitals
- **Communication over NHIN - (VA, IHS, and DOD)**
 - SSA disability determination pilot – June/November
 - Indian Health Service pilot – Fall 2010
 - VA-NMHIC pilot – Winter 2010

Funding Status and Strategy

- **Funding allocated to New Mexico**
 - \$7.07M over four years
 - For planning - 0
 - For HIE expansion intra-state – 55%
 - For HIE communications over the NHIN – 45%
- **Our strategy for using the funding:**

Year	Approx. Amount	Matching Funds
2010	46%	0
2011	20%	\$1 for every \$9
2012	18%	\$1 for every \$7
2013	16%	\$1 for every \$3

Type of HIE Network Services

- **Provided by NMHIC**
 - Clinical summary exchange for care coordination and patient engagement
 - Clinical laboratory ordering and results delivery
 - Public health reporting (i.e., immunizations, notifiable laboratory results)
 - Quality reporting
- **Provided by HealthXnet**
 - Eligibility and claims transactions
- **Provided by NMHIC through SureScripts**
 - Prescribing and refill requests
 - Prescription fill status and/or medication fill history

Coordination

- **State agencies**
 - Public health: Reportable conditions and immunizations to NMDOH
 - Medicaid: Coordinating State HIE and Medicaid HIT plans
- **HITREC**
 - Some meaningful use measures require HIE (care coordination, public health reporting, quality measure reporting)
 - LCF has lead responsibility in New Mexico for both state HIE and HITREC
- **NHIN**
 - LCF/NMHIC awarded SSA contract to demonstrate electronic disability determination over NHIN (2010)
 - Care coordination within New Mexico with IHS, VA, DOD
- **Other States**

Prerequisites for a Successful State HIE Plan

- **Support from potential clinician users and provider organizations**
 - Willingness to provide and share patient information
 - Confidence that network services will meet their needs
- **Support from payers and/or employers**
 - Some level of confidence in the cost benefit of HIE

Prerequisites for a Successful State HIE Plan

- **Support from state government**
 - Designation as SDE
 - Designation as agent for e-reporting to public health
 - Participation in HIE governance, planning, funding strategies
 - Coordination with Medicaid
- **Availability of HIE core competencies**
 - Understanding of market: community priorities for each network service
 - Understanding of products: network services
 - Understanding of technical requirements: HIE architecture, functionality and interoperability standards

Approach to Develop a Successful Plan

- **Convene all key stakeholders to develop the State HIE Plan**
 - Establish common goal for the plan
 - Manage this effort with a project plan
- **Use the detailed instructions ONC has provided**
 - FOA explains the purpose and describes the intent
 - Each section provides specific instructions and guidance
 - Respond to every instruction
 - Someone on your team must be responsible for integrating all sections of the plan into a consistent, coherent whole
- **Always address your audience: ONC**
 - Take the time to make your responses complete, clear, and concise

What Worked Well and What Did Not

- **What Worked Well**

- Able to draw upon reservoir of trust among community stakeholders
- Able to draw upon stakeholder confidence from recent HIE accomplishments
- Community was committed to developing successful plan
- Strong project management kept the team on track

- **What Did Not**

- Size of State HIE Plan discourages some readers
- Difficulty integrating stakeholder-driven Business Plan into government-driven State HIE Plan
- Still struggling with some providers reluctant to share data
- Still struggling to achieve matching and sustainable funding

Questions?

Jeff Blair
Director of Health Informatics
505-938-9904
Jeff.Blair@LCFresearch.org
www.nmhic.org