

eHealth Exchange™






2018 ANNUAL Participant Meeting

OCTOBER 24, 2018

Gaylord National Harbor, MD

Veterans Health Information Exchange (VHIE)

Margaret Donahue, M.D., Department of Veteran Affairs (VA)

- 1  **Implement VA Mission Act**
- 2  **Improve Quality of Patient Data Received**
- 3  **Increase Purpose of Use for Sharing Patient Data**
- 4  **Implement Exchange National Level Gateway**
- 5  **Overcoming Challenges**

VA MISSION ACT

Section 132: Improving Information Sharing with Community Providers

Amends 38 U.S.C. Section 7332(b)(2)

From allowing the Secretary to disclose Veterans' protected health information with consent

(H) To a non-Department entity...that provides hospital care or medical services to Veterans as authorized by the Secretary...



To allowing the Secretary to disclose Veterans' protected health information without consent

(H)(i) To a non-Department entity (including private entities and other Federal agencies) for purposes of providing health care, including hospital care medical services and extended care services, to patients or performing other health care-related activities or functions.

Need for a Nationwide Network

With the MISSION Act, allows the VA Secretary to disclose Veterans' protected health information without consent.

Impact to Partners

- VHIE community care partners can expect increased network traffic due to increased sharing of Veteran health information.
- Partners no longer need to gather consent from Veterans to share their VA health records.
- VA Documents will be labeled if protected health information included.



Improve Quality of patient data received

VHIE Data Quality Origin

- Majority of Veterans use community health care providers in addition to the VA providers
- VHIE recognized the need for continuous data quality monitoring on the production data
- VHIE understands that interpretation of standards and adherence to those standards varies greatly
- VHIE understands criticality of clinicians trust in the data and the data usability

VHIE Data Quality Improvement Good News

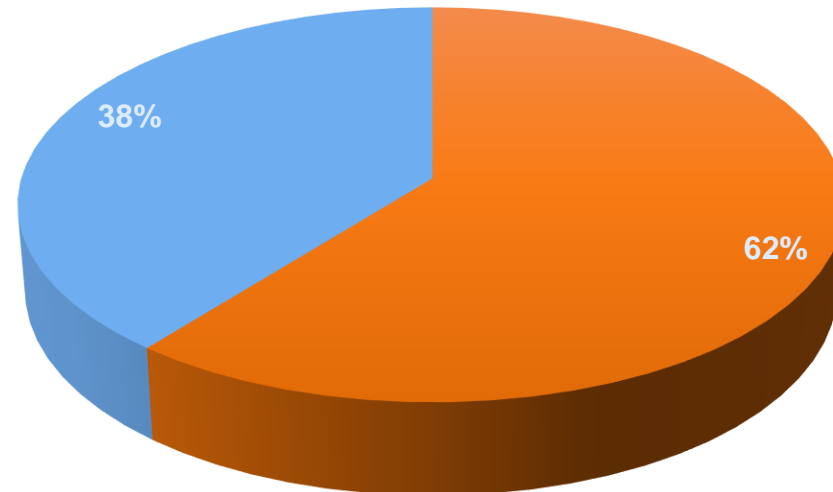
- Empower HIE with actionable observations to fix
- Partners enthusiastic to see observations and engage in research
- Trends show improvement in completeness overall
- Highest impact opportunities – Vendor level improvements

VHIE Data Quality Challenges

- Perception of low return on investment on data quality issues
- Clinicians and applications depend on high quality data
- Data overload continues, example: duplicate records
- Wide array of standards and adherence to standards
- Business Rule conflicts across business entities
- Partial data content being exchanged in HL7 documents

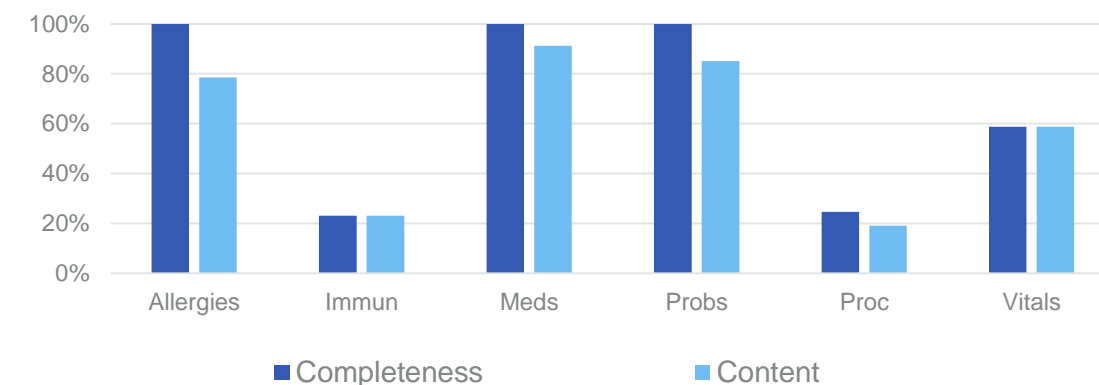
Data Quality Team – Analytic Reviews – Model Driven Health Tool (MDHT)

14,844 XML's / 9 Sustainment Partners



■ Clinical Summary
 ■ Subsequent Evaluation

9,224 CCD-A XML's / 9 Sustainment Partners



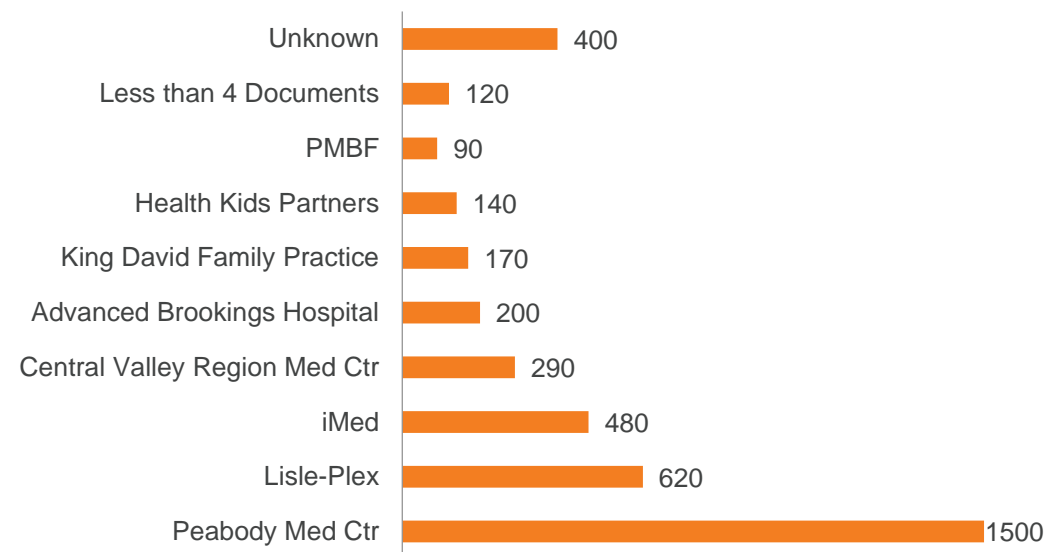
- **Allergies** Verify Date, SnoMed CT Code System, RxNorm Code System
- **Immunizations**: CVX Code System
- **Medications** Status and Code System
- **Problems** :Date and Code System
- **Procedures** Code System
- **Vital Signs** Code System

Total	Allergies	Immun	Meds	Probs	Proc	Vitals
Documents	5,220	1,205	5,220	5,220	1,283	3,069
Rows	6,138	5,192	43,879	26,580	4,770	25,160
Content Score	4,820	5,192	40,021	22,624	3,701	25,160

Data Quality Team – Analytic Reviews – MDHT Year End HIE Analysis

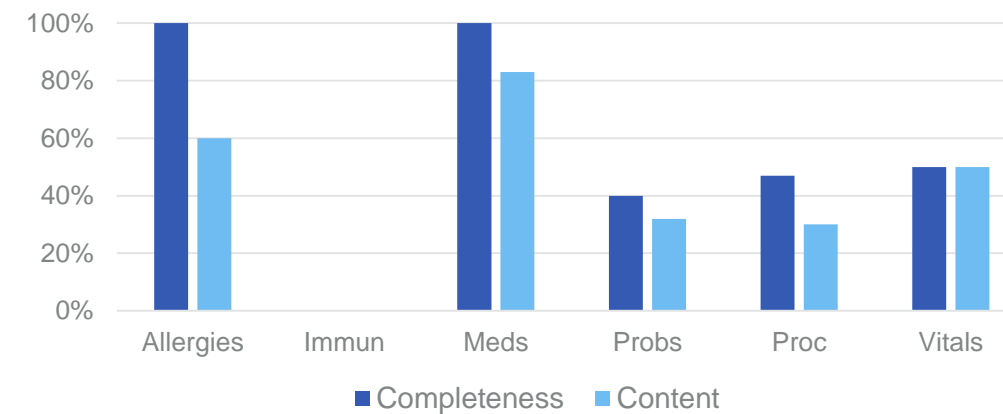
HIE Participating Stakeholders

Participating Stakeholders (Organizations)



Note: Stakeholder participation varies significantly within HIEs. Feedback could be prioritized based on the stakeholder quantity being exchanged by the HIE

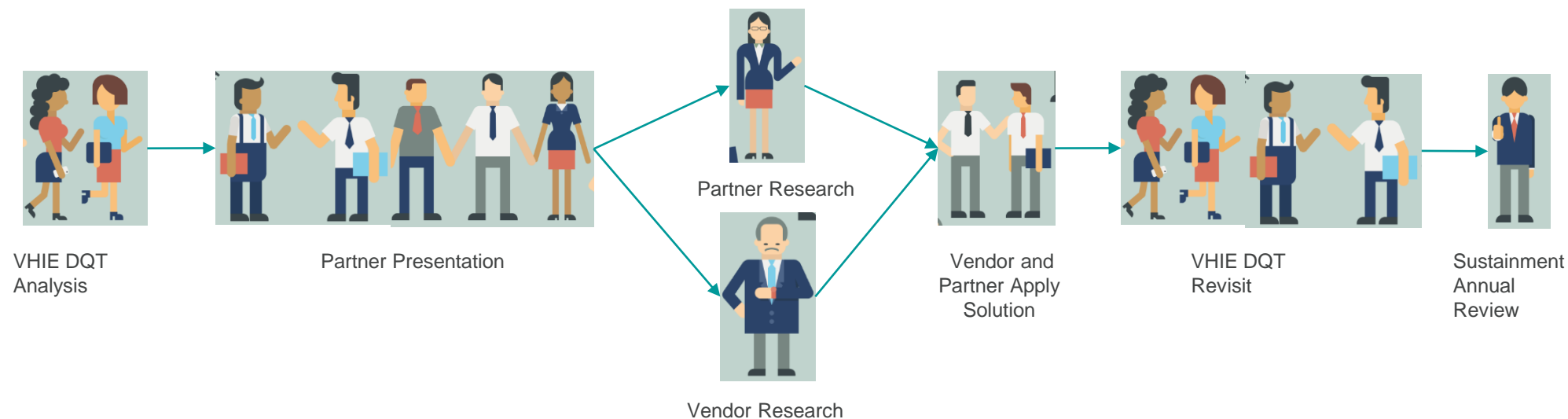
4,000 CCD-A XML's / 6 Sustainment Partners



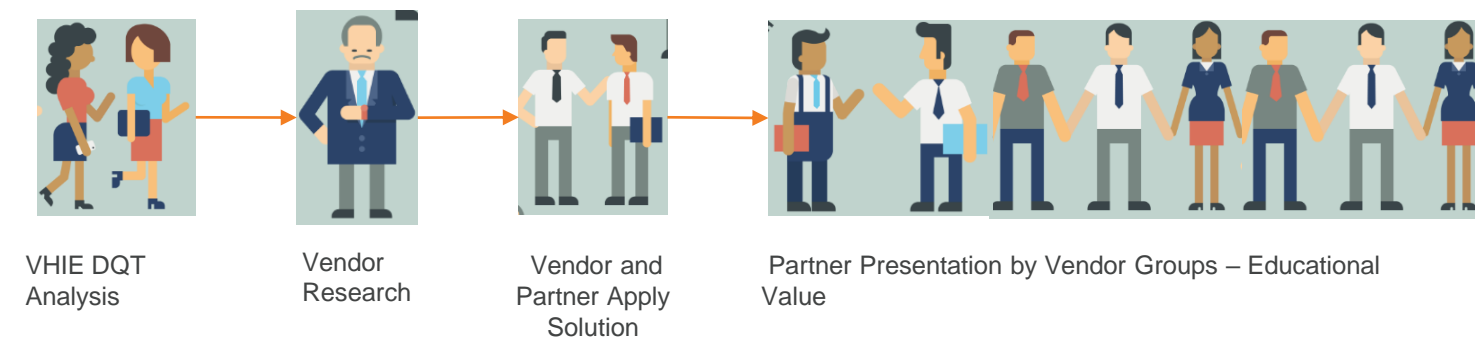
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Impactful DQ Strategy Evolution

FY18 Strategy – Single Partner - Low Impact



FY19 Strategy – Vendor Level / Large Enterprises – High Impact across many Partners



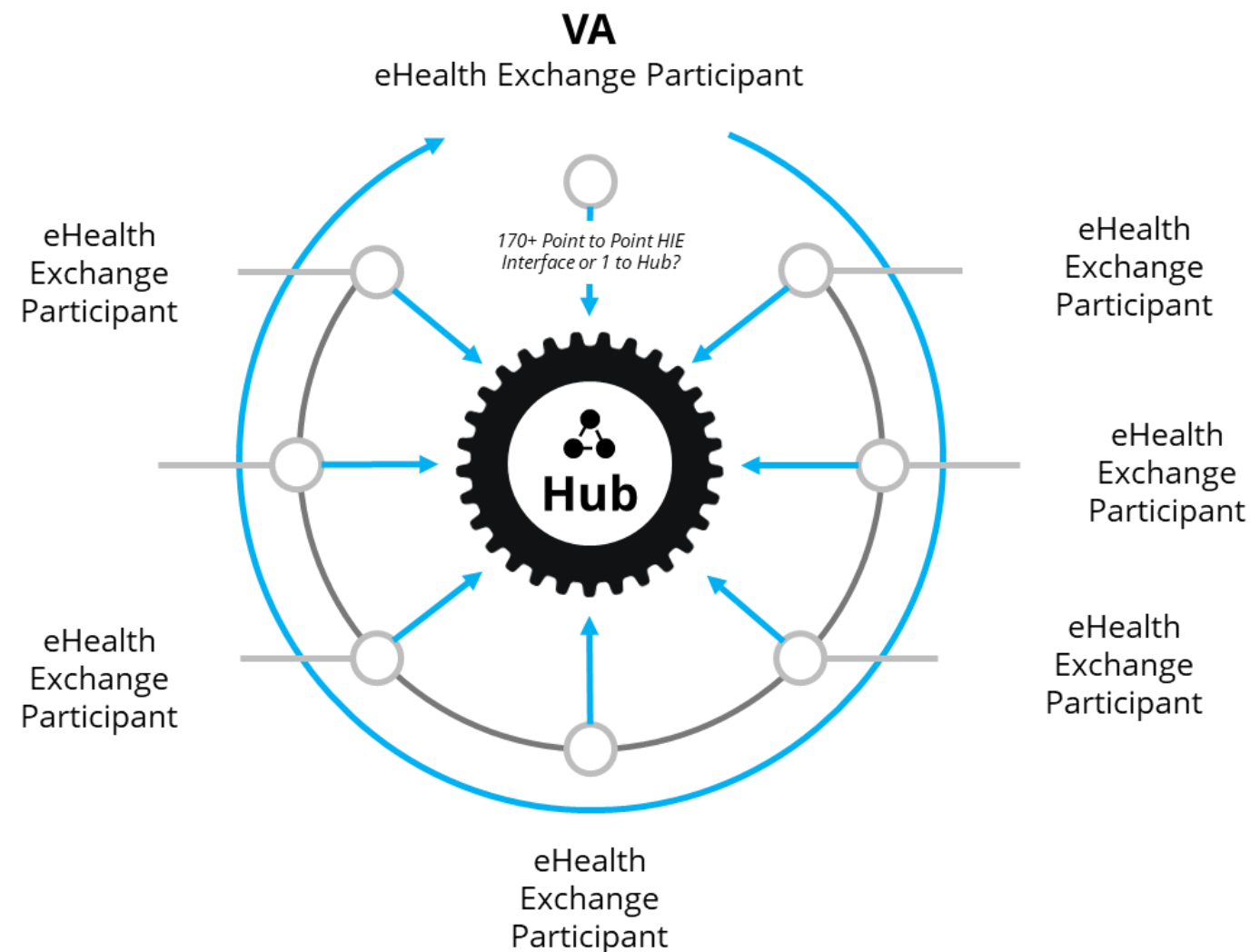
Increase Purpose of Use for Sharing Patient Data

Currently VA shares health data for treatment, emergency care and coverage.

VA will focus on sharing for:



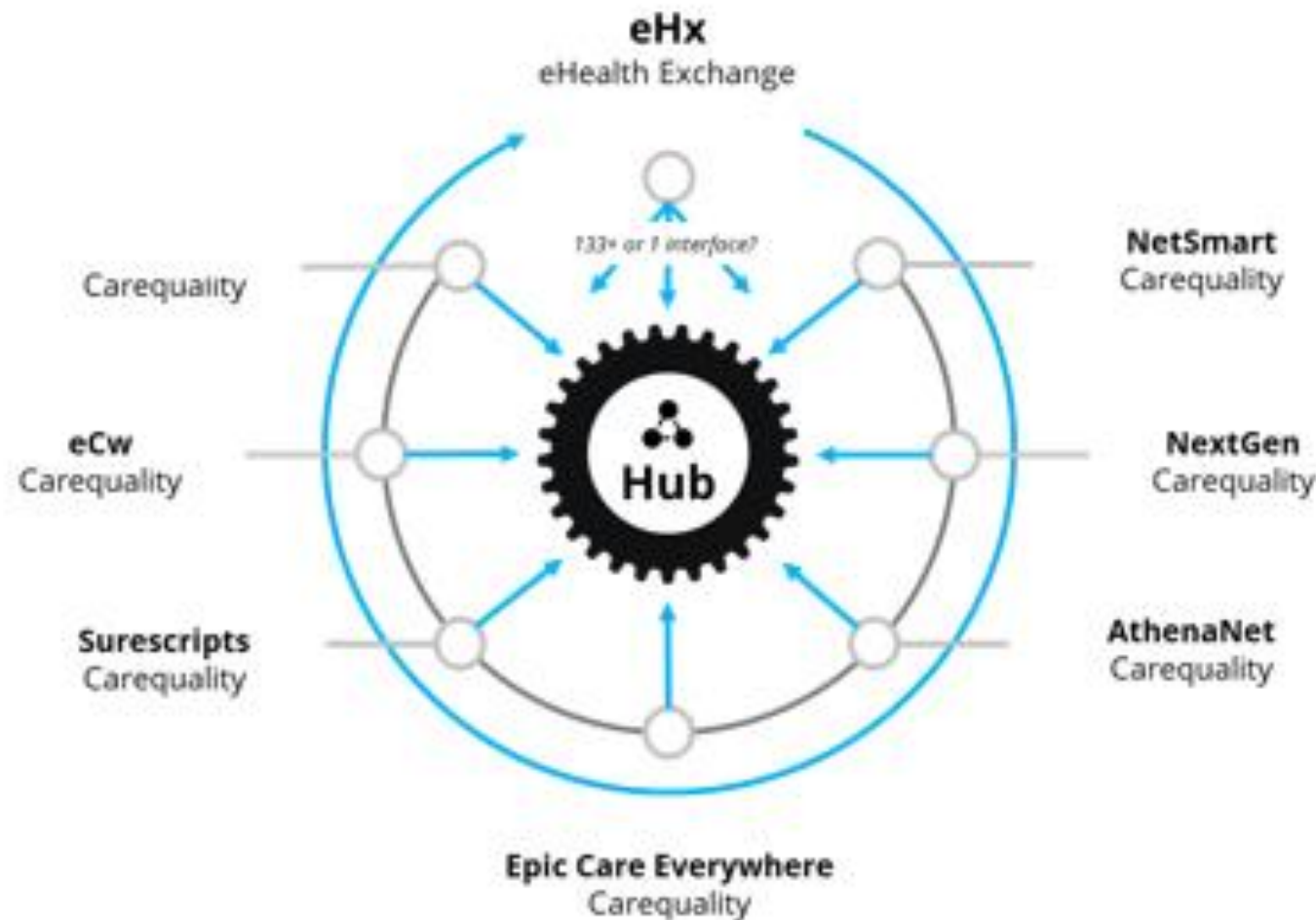
Implement National Level Gateway Service Business Driver: Scalability Within the eHx



Challenges

- Cost and effort to setup and maintain eHealth Exchange connections
- Risk
- Partner Integration Team work isn't reduced with HIE build
- Limited value, same cost structure, and risk by HIE duplicating the Hub's Partner connectivity

Business Driver: Scaling to Carequality



Challenges

- Cost and effort to setup and maintain eHealth Exchange connections
- Carequality's non-discrimination policy requires Carequality Connections respond to all treatment queries.
- Lack of practicality for eHealth Exchange Participants adopting Carequality to promptly setup & maintain Point-to-Point connections with Carequality's 11 centralized nodes plus 122 Epic Care Everywhere nodes.

Hub Benefits

- Compliance with Carequality's Non-Discrimination policy
- Speed to market
- VA's control increases its access to Carequality

Strategic Summary

Why eliminate point to point?

- Eliminate Duplication
 - Reduce Maintenance
 - Reduce Expense
- Reduce Vendor Risk
- Expand Reach
- Reduce Cyber Attack Risk

Why leverage the eHealth Exchange Hub?

- Combine of all eHealth Exchange & Carequality connections already
- Eliminate the duplication of 170 interfaces
- Reduce need to move partners twice as VA transitions to Cerner HIE
- Refocus Partner Integration Team to critical tasks
- Can disable the single interface to the eHealth Exchange Hub to protect the VA during cyber attacks

Why now?

- Simplify Cerner rollout complexity
- Increase partner numbers through connectivity to CareQuality
- Maintain/enhance VA security requirements
- Strike while the iron is hot: another opportunity to eliminate duplication may not appear again

Where VA needs help overcoming challenges



Registry health data submission

Dialysis data for Centers for Medicare and Medicaid Services (CMS)

Prescription Drug Monitoring Program (PDMP)



Images

Data Quality

Support Emergency and other Purpose of Uses



Support FHIR and further CCDA use cases

Plug and Play Onboarding



eHealth ExchangeTM