

Wyoming Frontier Information (WYFI)

Wyoming Medical Society Annual Meeting
Jackson Lake Lodge

Friday, June 2, 2017

Agenda

1. Background
 - a) CMS Funding
 - b) Timeline
2. Wyoming To-Be Vision
3. Healthcare Partners Needs Assessment Results
4. Steering Committee and Subcommittees
5. HIE Vendor Procurement

Background

This Wyoming HIE initiative understands the history of the previous state HIE and has gathered information on lessons learned and best practices from Wyoming and across the nation.

What's different this time?

Readiness

- The health information technology (HIT) environment has changed in the last four years. More providers have implemented electronic health records.

Approach

- Collaborative approach that engages stakeholders early on in HIE development and provides transparency.

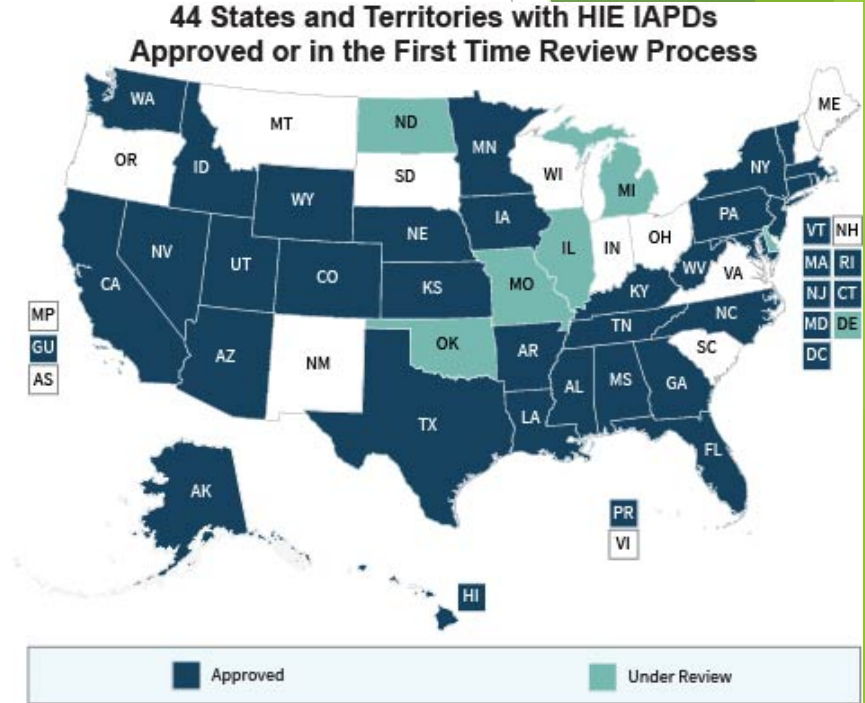
Organization

- This initiative is following a different process. State procurement vs. federal grant.

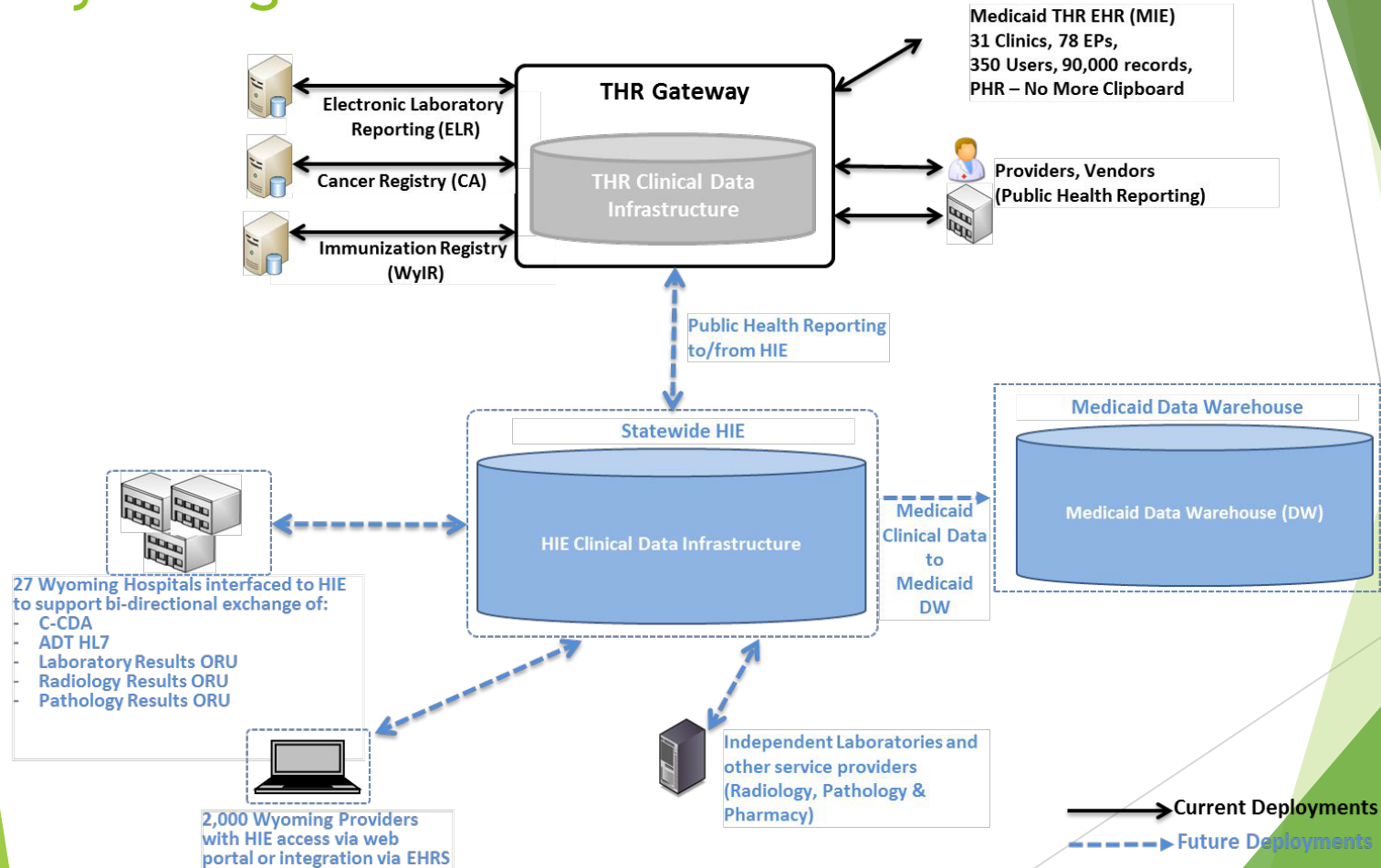
Background

CMS Funding

- The Center for Medicare and Medicaid (CMS) announced a 90% Federal/10% State match funding opportunity available to assist states with promoting HIEs that will connect a variety of Medicaid providers.
- The Wyoming Department of Health (WDH) submitted a HIE Implementation Advanced Planning Document (HIE IAPD) and received approval for these funds.
- The goal is to work with stakeholders across the state to effectively use the funds to build an HIE that will bring value to providers and Wyoming residents.
- Fully funded through Design, Development and Implementation
- State procurement process



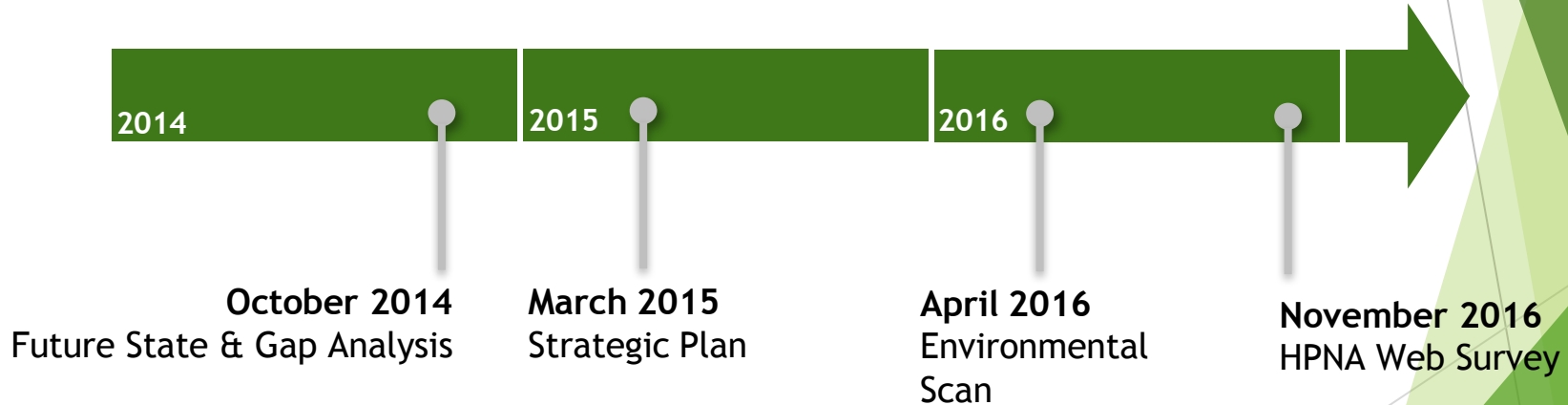
Wyoming To-Be Vision for HIE



Background

Planning and Data Gathering Timeline

The Wyoming Department of Health (WDH) has completed the following steps prior to the start of any HIE development:



Healthcare Partners Needs Assessment

Purpose: To identify trading partners in Wyoming and understand how the collaboration between hospitals, providers, and trading partners can be improved and enhanced through an HIE.

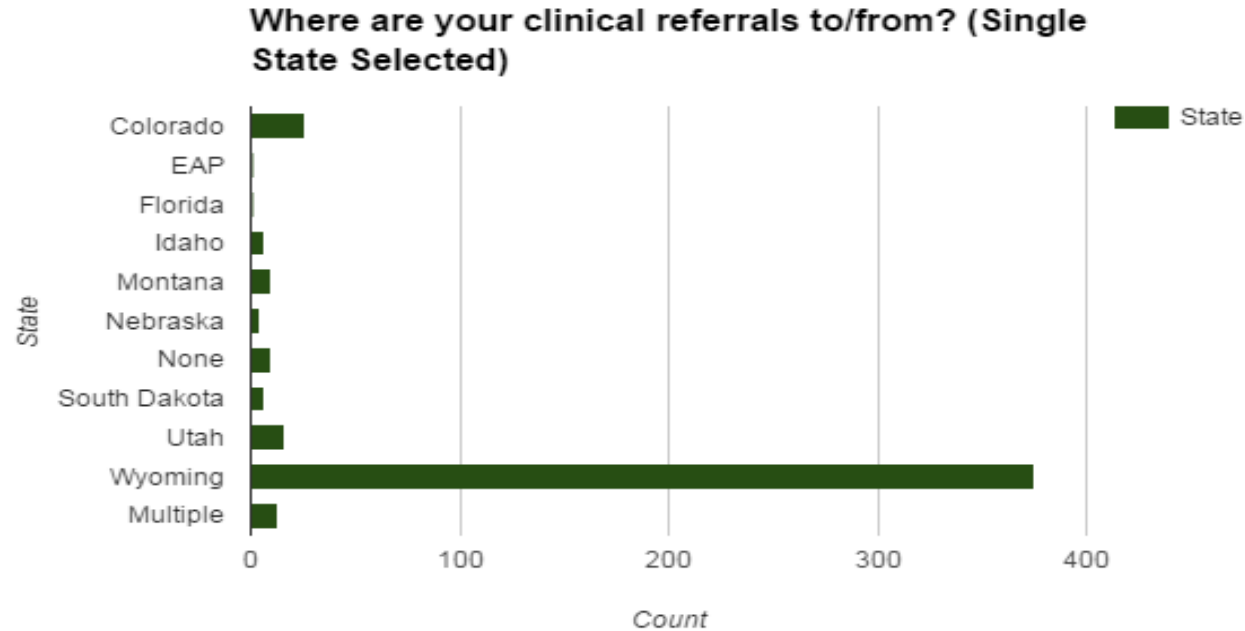
- Web Survey sent out in November 2016 and closed early January 2017
- Response rate was 11.4%

HPNA Results

- Total Responses: 442
- Responses were received from all 23 counties

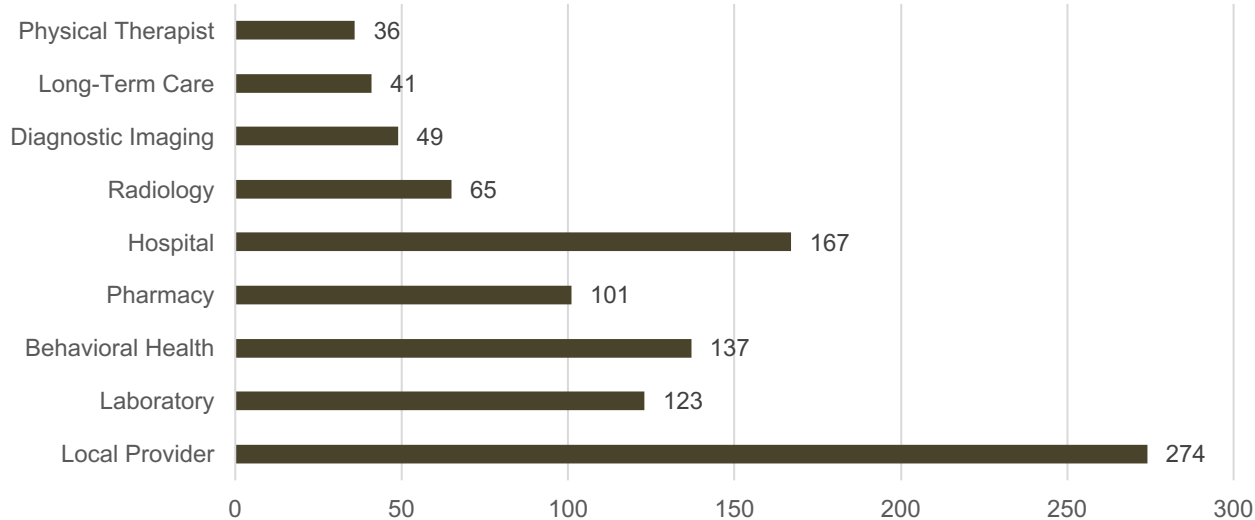
Provider Type	Count
Behavioral Health	110
Primary Care/Family Doctor	56
Dental	44
Public Health	15
Physical Therapy	11
Pharmacy	11
Chiropractor	10
Multispecialty with Primary Care included	16
Other	169

HPNA Results

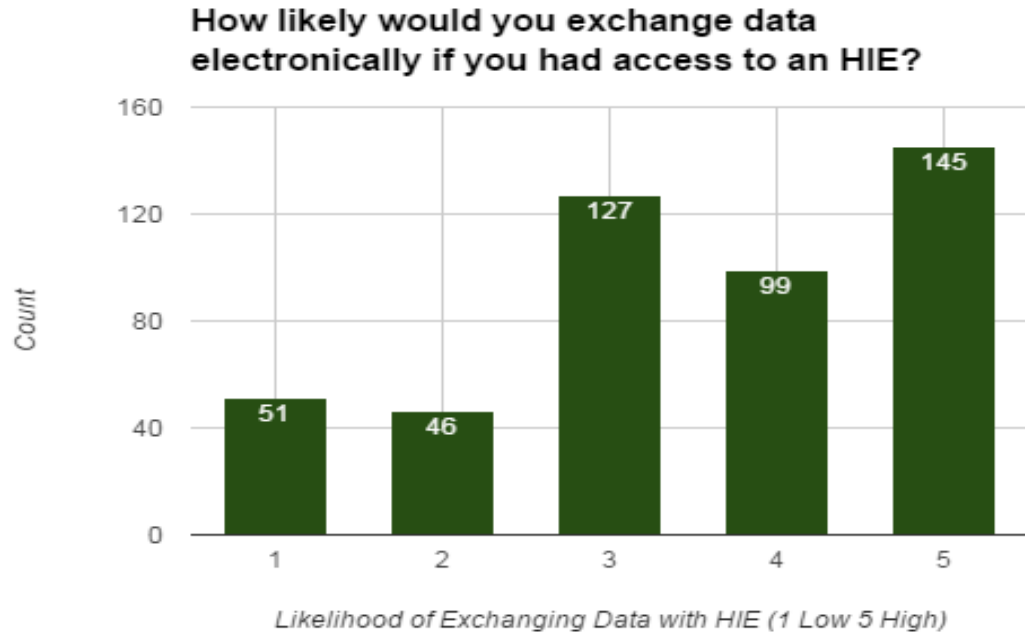


HPNA Results

What are the three primary entities you currently exchange data with or would like to exchange data with electronically?

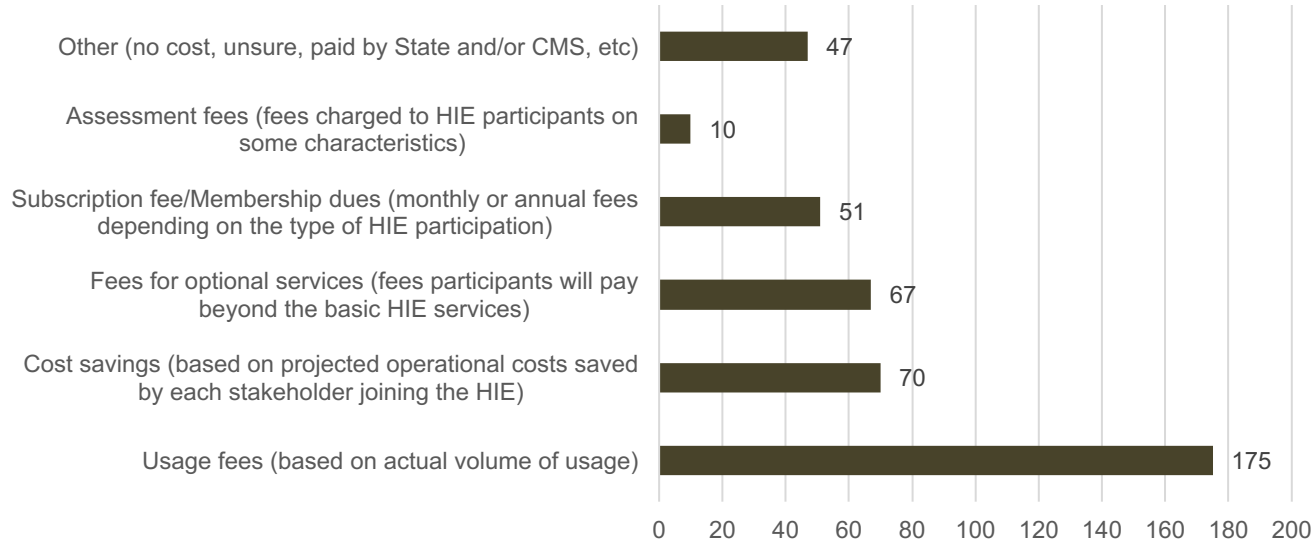


HPNA Results



HPNA Results

Please indicate how you would like to see the HIE become a sustainable entity:



WYFI Governance

Technical

- Arek Shennar
- Dr. Dean Bartholomew
- Sheila Bush
- Deb Anderson
- Dan Golder
- Jody Siltzer
- Joe Grabdore
- Mike Henningsen*
- Kevin Carey*
- Rick Joslin
- Sandip Ray
- Timothy Caswell (WDH)
- Ruth Jo Friess (WDH)
- Linda Cramer (PCG)
- Chris Smith (PCG)

Sustainability

- Arek Shennar
- Clay Vanhouten
- Dr. Allen Gee
- Eric Boley
- Deb Anderson
- Dan Golder
- Franz Fuchs
- Sandip Ray
- Morgan Honea*
- Kevin Carey*
- Ruth Jo Friess (WDH)
- Jan Paterson (PCG)

Provider Relations

- Andrea Bluel
- David Squires
- Elizabeth White
- Linda Van Dorn
- Debbie Hendershot
- Terry Johnson
- Dr. Mark Domskey
- Arek Shennar
- Dr. Allen Gee
- Eric Boley
- Franz Fuchs
- Dr. Dean Bartholomew
- Matt LaHiff
- Pat Monahan
- Sheila Bush
- Deb Anderson
- Kevin Carey*
- Dr. James Bush (WDH)
- Andrea Bailey (WDH)
- Kim Huynh (PCG)

Legal, Policy, Privacy & Security

- | | |
|---|--|
| <ul style="list-style-type: none">• Arek Shennar• Dan Golder• Jesse Springer (WDH)• Jan Paterson (PCG)• Gerald Laska (WDH)• Dr. Mark Domskey | <ul style="list-style-type: none">• Angie Vanhouten• Dallas Lain• Franz Fuchs• Sheila Bush• Jan Paterson (PCG) |
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Steering Committee

*Will participate after the RFP Procurement process

Technical

The WYFI technical direction should be in complete alignment with the core WYFI use-cases, and should support the overall goal of improvement and coordination of healthcare for the citizens of Wyoming.

Technical Components to Consider:

- Industry Standards and Best Practices
- Connections to other HIEs
- Scalability of Infrastructure
- Disaster Recovery

Provider Outreach

Provider outreach effort will assure that the functionality and benefits of WYFI become well known across the state. This outreach will also continue to assist in onboarding to the HIE where possible to achieve a critical mass of providers sharing data.

Outreach Methods:

- Web Survey
- Targeted Outreach
- Healthcare Conferences/Meetings
- Web Conferences
- Newsletters

Legal, Policy, Privacy and Security

Legal, policy, privacy and security protections, as defined and executed in WYFI's organizational policies, will be critical to maintain trust. Patients, consumers, healthcare organizations and government agencies have demonstrated a strong desire to ensure legality, privacy, confidentiality and integrity of health information in the electronic exchange of health information.

Legal, Policy, Privacy and Security Components to Consider:

- Consent and Contract Management
- Data Integrity and Quality
- Data Use Agreements
- Alignment with Federal HIE Efforts
- Non-Compliance Procedures

Sustainability

The inclusion of a sustainable HIE with interoperable health information systems for the long term will enable the Wyoming healthcare provider communities to improve the quality, safety and efficiency of care.

Sustainability Plan Components to Consider:

- Overall HIE Strategy
- Business Model
- Sustainability Approach and Plan
- Use Cases for WYFI

Sustainability

- 90 % of DDI is Federal Funded and the State is providing the remaining 10%
- Sustainability costs will not begin until 3rd Phase of DDI is complete
- All building of connections and “GO LIVE” is part of DDI
- Minimum of 2 years before any sustainability costs will be incurred - this would give a timeline project of sustainability costs not starting until FFY 2020
 - Estimated maintenance and operational costs will begin upon completion of design, development and implementation and are \$321,971 per year. Includes all phases developed and functionality.

DDI Technical Milestones

Phase 1 (FFY 2018)

- Project Plan and Staffing Plan
- HIE Architecture, DR Plan, Help Desk Plan and Hosting Plan
- Master Patient Index (MPI)
- Clinical Data Repository (CDR)
- Terminology Services and Business Rules Engine
- Record Locator Service and demonstration of patient search capabilities
- Alerts Notification Module
- Integration of each of the 27 Hospitals as data contributors to the HIE (ADT, HL7 Laboratory, HL7 Radiology, HL7 Pathology, C-CDA, and Immunizations)
- Acceptance by the State of Integration of each of the 27 Hospital E.H.R.s with the RLS

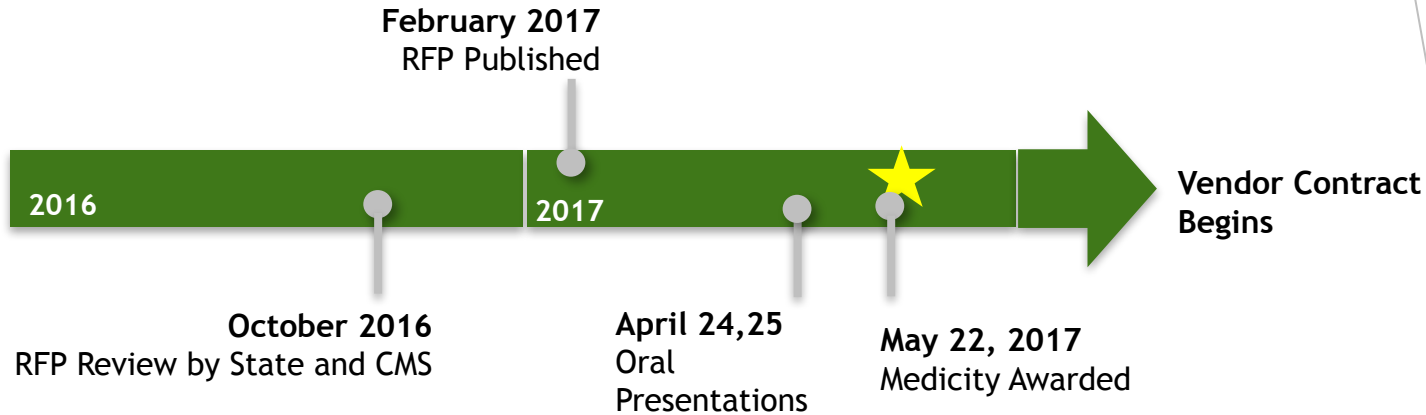
Phase 2 (FFY 2019)

- Provider Directory
- Integration with LabCorp and Quest Diagnostics
- Integration to allow all the stated Public Health registries to populate the CDR and HIE
- Integration to allow for provider Public Health reporting to all named registries using the existing THR Gateway
- Integration of 15 independent trading partners (Could include independent labs, regional HIE's)
- Integration of the WATRS system and the Trauma Registry
- Integration with the THR E.H.R.

Phase 3 (FFY 2019-2020)

- Integrations with 5 EHRs as data contributors to include Allscripts, Nextgen, Greenway, Athenahealth and eClinical Works
- Integrations of the RLS with 5 EHRs
- Integration of the HIE with the Medicaid infrastructure
- Interface with HealtheWay Gateway

HIE Vendor Procurement



Current Progress To Date:

- Oral Presentations April 24-25 presented to Proposal Evaluation Committee
- Medicity Awarded
- Contract Negotiations Underway

Perspective on Sustainability

- Governance
 - Observed Collaboration
 - Researched Funding Mechanism
- Proposal
 - 90/10 Alignment
 - Implementation Support
- Technology
 - Meet providers in workflow
 - Contribute to population health

Approach

- Dedicated and on-location professional services
 - Deploy software environment
 - Build unique interfaces
 - Adapt to user preferences
 - Travel to lead outreach
- Phased achievement
 - Hospitals
 - Intermediaries
 - Practices

Adaptability

- Exchange
 - Display within individual EMR workflow
- Referrals
 - Simplify routine patterns
- Notify
 - Population of interest, event triggers and notification preferences
- Organize
 - Search tabs of clinical data and filter patient views as you wish
- Explore
 - DataMart extracts enabling analytics

Vision

- Exchange orders for workflow integration
- Interstate network of networks
- Quality Payment Program reporting services

Questions and Comments

Email: WDH-HIE@wyo.gov

Website: health.wyo.gov/healthcarefin/wyoming_frontier_information_wyfi/