



DEPARTMENT OF INFORMATION TECHNOLOGY

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We connect health care providers to safely and securely share health information through a trusted network to improve health care quality and outcomes for North Carolinians.



STATE DESIGNATED

North Carolina's statedesignated health information exchange

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SECURE

Secure statewide network for physicians and other health care providers in North Carolina to share important patient health information to improve patient care



PARTNERSHIP

Housed within the Department of Information Technology's Government Data Analytics Center (GDAC). Our technology partner is SAS Institute.



What is the NC Health Information Exchange Network, aka NC HealthConnex?

A Health Information Exchange (HIE) is a secure, electronic network that gives authorized health care providers the ability to access and share health-related information across a statewide information highway.



How Does Health Information Exchange Work?



Electronic Health Record Clinicians enter data into EHR and that data is pulled/pushed into HIE



Data Provided

Clinicians who have care relationships with their patients are able to readily access that data



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Elements Available

Current data elements available in NC HealthConnex include: Allergies, Encounters, Medications, Problems, Procedures, Results

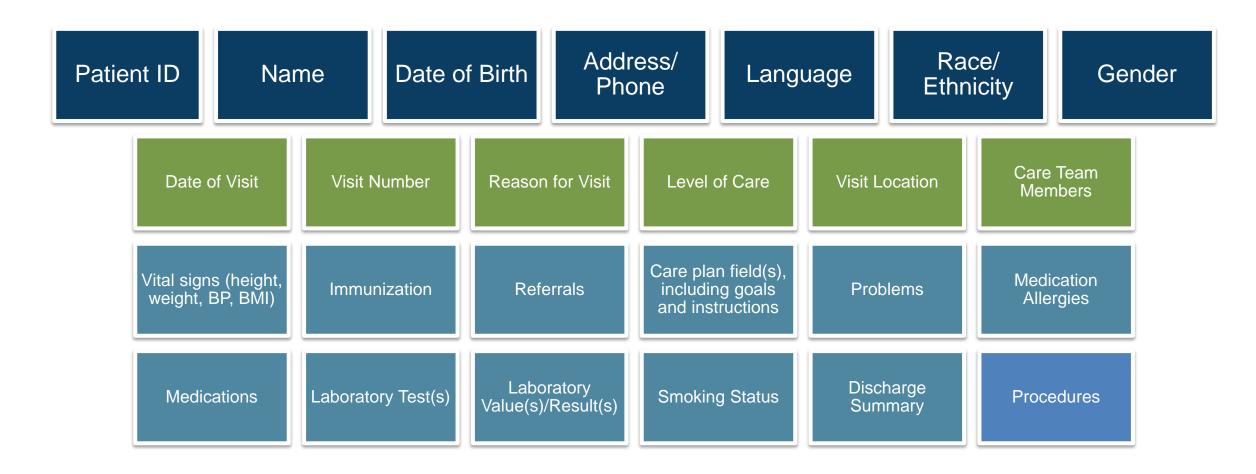


Security in Place

All data is protected, stored and accessed only for purposes permissible under federal and state law.



NC HealthConnex Current Data Targets

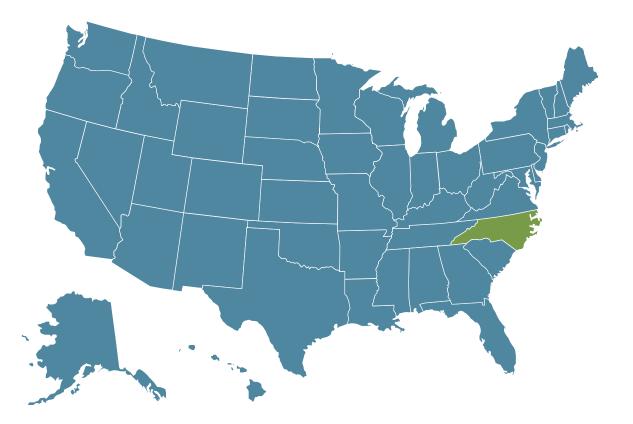




The Vision for Connectivity

North Carolina set out a vision to create communities of connected health care providers across the state.

- Allow providers to view their patients' longitudinal health record in real-time
- Improve health care quality, enhance patient safety, improve health outcomes
- Consolidate data reporting requirements across the state to ease administrative burden and create efficiencies by eliminating duplicative data integrations
- Create outbound services to give providers insight to their at-risk patient population





What Does the Law Mandate?

Hospitals as defined by G.S. 131E-176(3), doctors (licensed to practice under Article 1 of Chapter 90 of the General Statutes), and mid-level practitioners who provide Medicaid services and who have an electronic health record shall connect by June 1, 2018.

NC Medicaid Providers with Technology





Significant Progress

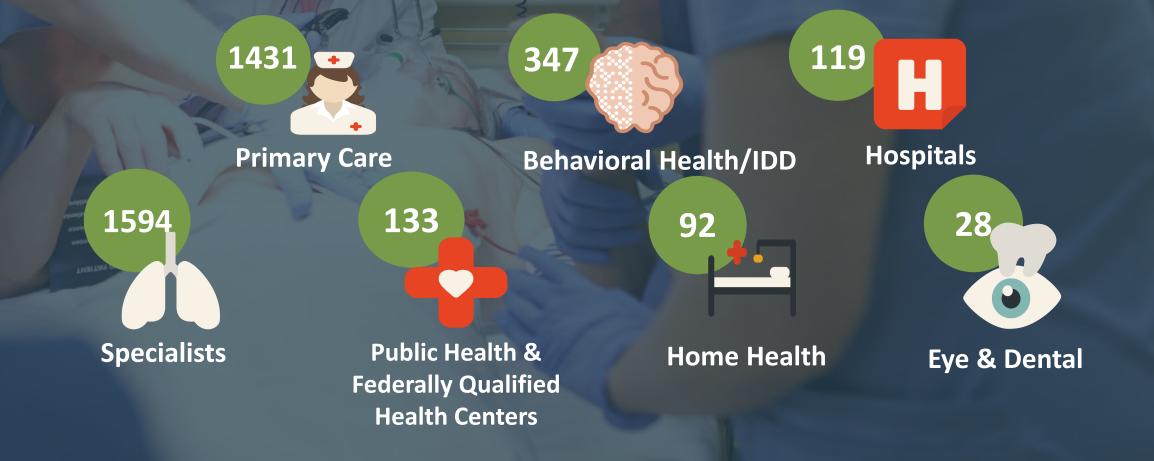
Number of Connected Providers					
Spring 2016	Spring 2017	Spring 2018			
108 Facilities	877 Facilities	1101 Facilities			
Number of Providers in the Onboarding Process					
2016	2017	2018			
158 Facilities	578 Facilities	2805 Facilities			

223% Growth in Connectivity



Types of Providers Connecting

Total number of facility types = onboarding + live in production

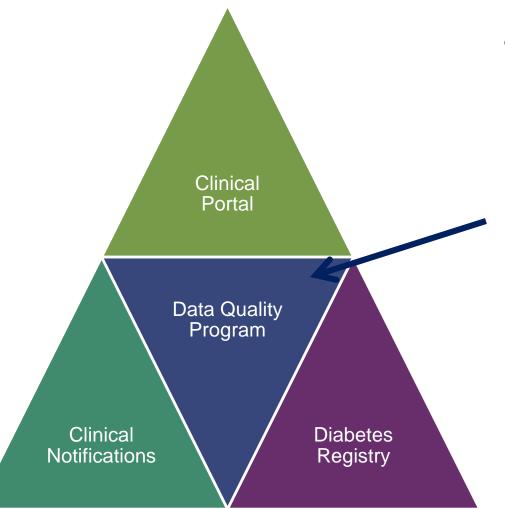


Connection Status by Provider Type:

Provider Type	In Process	Live	Total
Primary Care	1105	326	1431
FQHC	23	14	37
Behavioral Health	337	120	457
County Health Departments	11	84	96
Hospital	83	36	119
Specialist	995	510	1505
In Home Care	56	2	58
Laboratory	21	3	24
Pharmacy	2	2	4
Residential Facility	34		34
Respiratory, Developmental,			
Rehabilitative or Restorative	76	4	80
Speech, Language and Hearing	9		9
Eye & Vision	38		38
Dental	15		15
Grand Total	2805	1101	3906

Counts are facilities.





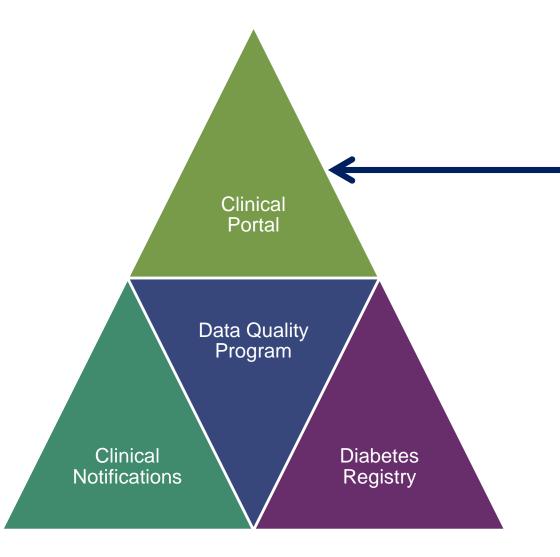
Data Quality Program

- Support NC HealthConnex Onboarding Process
- Ensure real-time notification of data delivery issues
- Educate and support Participants trying to improve their data to support Quality Improvement and other initiatives
- Confirm data is aligned with policies that ensure high-quality and accurate data outputs

Foundational element that supports ALL

<u>Services</u>

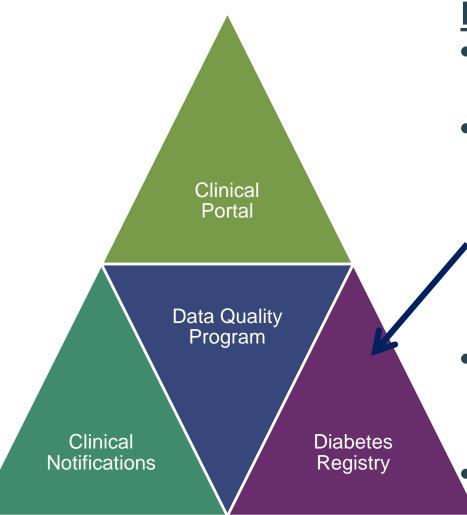




NC HealthConnex Clinical Portal

- State-wide, longitudinal view of a patient's medical record across different care providers, health systems, etc.
- Access to Direct Secure Messaging (DSM)

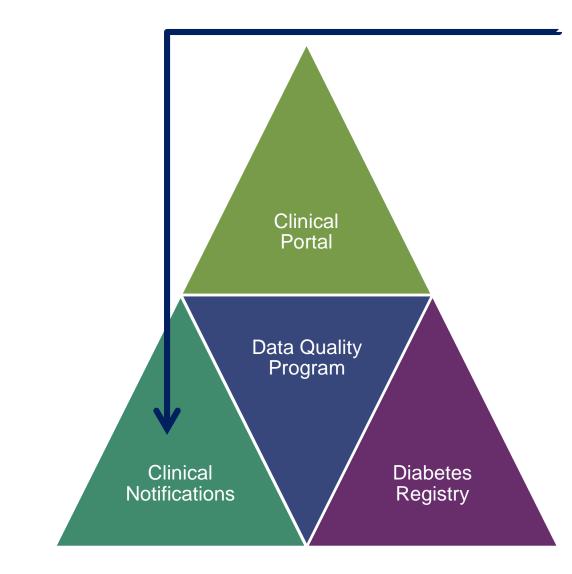




Diabetes Disease Registry

- Partnership between the NC Division of Public Health and NC HealthConnex
- Starting June 1, supports attestation for Meaningful Use Stage 3 and Modified Stage 2 for eligible hospitals, eligible critical access hospitals,
 and eligible professionals as well as Medicare Quality Payment Program Advancing Care Information for eligible clinicians
- Future plans to include a subscription based service for Participants where detail clinical data is provided based on a list of Participant's Patients
 Currently evaluating other clinical registries beyond Diabetes





Clinical Notifications

- Subscription-based service to notify Providers as their patients receive services across the care continuum – spans geography, hospital systems, acute and ambulatory care settings, etc.
- Custom lists allow cohorts of Patients tuned to Providers' interest
- Custom delivery methods to integrate into Provider workflows



DHHS | HIEA Roadmap

- Identify the most important overlapping areas where we can devote greater attention and focus going forward, toward a coordinated roadmap
- Partner on HIT efforts to increase value for the State and its citizens
- Consolidate HIT efforts/data requirements of health care providers to the State of North Carolina through leveraging a modernized HIE infrastructure
- Develop service offerings to provide North Carolina's health care provider the tools they need to deliver whole patient care in an efficient and secure manner



On the Horizon...

- Roadmap with DHHS will address shared vision for supporting managed care
- Controlled Substance Reporting (CSRS) Integration
- eHealth Exchange Connections (GAHIN & VA – currently connected)
- Use Case Work Group



