

Alaska Health Information Exchange 2020 Progress & Recommendations Report



Prepared by the Alaska Department of Health and Social Services'

Health Information Technology Office

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Introduction

In 2010, SB 133 was enacted into law, creating Alaska's Health Information Exchange (HIE) "to improve the safety, cost effectiveness, and quality of healthcare in Alaska"¹ by connecting electronic health records (EHRs), public health registries, and auxiliary health systems. The goals of the HIE are to allow patients to move freely within Alaska's health care system, providers to effectively manage patient care, and the state to perform disease surveillance activities for public health. Ultimately, the HIE is meant to address the triple aim of healthcare:

1. Improving the patient experience of care (including quality and satisfaction);
2. Improving the health of populations; and
3. Reducing the per capita cost of health care.²

This report is prepared each December for the Alaska State Legislature as required by AS 18.23.315. This statute requires that this report contains an update of Alaska's health information exchange system, and a specific set of recommendations for long-term participation and financial support by the state. The following report summarize the HIE's current status, work during the calendar year 2020, and recommendations for 2021.

Progress Made in 2020

In 2020, there were 100 participating organizations which represent over 190 providers connected to the HIE. This is an increase of 172 providers from 2019. Users include 32 hospitals, 16 Federally Qualified Health Centers, 4 tribally approved hospitals, and 82 behavioral health providers. As of December 2020, there are a total of 504,902 patients in the HIE. Additionally, there were over 4,785 users of direct secure messaging (DSM), an increase of approximately 20% from 2019. The DSM is an encrypted email service to replace paper-based methods like fax or mail for patient records.

¹ Paskvan, Sen. Joe. (2009). Sponsor Statement SB 133. *26th Alaskan Legislature*. Retrieved December 26, 2019 from: http://www.akleg.gov/basis/get_documents.asp?session=26&docid=3310.

² Institute for Healthcare Improvement. (2012). IHI Triple Aim. *IHI Triple Aim Initiative*. Retrieved December 26, 2019 from: <http://www.ihl.org/Engage/Initiatives/TripleAim/Pages/default.aspx>

During 2020 healtheConnect Alaska, the HIE contractor, laid the foundation for new improvements planned for 2021. Progress made during 2020 by healtheConnect includes:

- Completed behavioral health (BH) integration into HIE
- Completed 42 Code of Federal Regulations (CFR) Part 2 Compliant Consent Integration
- Added single-sign-on capabilities
- Added Social Determinants of Health (SDOH) data to the HIE
- Integrated lab data into the HIE; and increased Electronic Lab Reporting (ELR) interfaces for SOA in response to COVID-19
- Prescription Drug Monitoring Program (PDMP) connectivity

In 2020, the department modified the prior contract with healtheConnect from July 1, 2019 through September 30, 2020 to include an additional three amendments. The department has executed various deliverables from the prior amendments that include:

1. Single-sign-on capability for the HIE portal
2. Smart alerts to support tribal Federal Medical Assistance Percentage (FMAP) initiatives
3. Enhanced functionality for immunization reporting
4. Integration of vital stats system
5. COVID-19 related integration

Upcoming Activities and Recommendations

In line with the department's 2021 funding request to the Centers for Medicare & Medicaid Services (CMS), the following activities will be included in the fifth contract amendment with healtheConnect, due to be executed in January 2021:

1. Enhanced Public Health Reporting: enhanced functionality for immunization reporting, Alaska Uniform Response Online Reporting Access (AURORA) and vital statistics integration to the HIE
2. Connection services to improve care coordination

The department is closely monitoring this contract in order to complete these activities under the enhanced federal funding provided under the Health Information Technology for Economic and Clinical Health (HITECH) Act, which remains in effect until September 2021.

Given the sunset of the HITECH funding (90% federal fund and 10% state general fund match) in 2021, and subsequent federal transition to Medicaid funding streams, the department is engaged in sustainability planning activities to ensure the continued support of the HIE. The department's recommendations and goals are as follows:

- Plan transition to Medicaid funding. The department has contracted services for a HITECH to Medicaid funding transition plan for strategic maximization of federal funds. The goal of this plan and the activities below encourage robust, long-term participation and financial support.
- Develop robust public health reporting. Successful public health reporting requires modernization of department disease registries and connection to the HIE, which are planned for the upcoming calendar year. The department has identified three potential pilot projects to test new database software, Microsoft Dynamics, with the plan to deploy this software across

the department if testing is successful. Existing modernized registries, such as the immunization registry, AURORA, and vital statistics, have been identified as potential connections for the HIE.

- Connect behavioral health providers. In conjunction with the changing landscape of the 1115 behavioral health waiver and resulting Administrative Services Organization, the department is evaluating the best method to connect behavioral health providers. This work will provide for additional care coordination among patients with substance-use disorders. To provide optimal care coordination, tasks include collecting SDOH data, with the department's goal of leveraging this information for Public Health Nursing and the Division of Behavioral Health to improve patient outcomes.
- Engage stakeholders. The healtheConnect Alaska Board of Directors continues to find ways to engage stakeholders and providers. This feedback is used to develop strategic plans and use cases for the HIE.

Conclusion

Much work has been completed by healtheConnect to set the stage for 2021. The upcoming year will build on a foundation of connections and maximize existing data exchange infrastructure to ensure the best patient care in Alaska. In consultation with the HIE board, stakeholders, and the public, the department is committed to providing a meaningful, useful, and crucial part of information exchange for Alaskans.