



Health Information Exchange Strategic and Operational Plan Profile

Overview

The Maine HIE Vision: Preserving and improving the health of Maine people requires a transformed patient centered health system that uses highly secure, integrated electronic health information systems to advance access, safety, quality, and cost efficiency in the care of individual patients and populations.

Maine's State HIE Program is managed out of the Office of the State Coordinator for Health Information Technology (OSCHIT), which is advised by a 26-member Health Information Technology Steering Committee (Steering Committee) and five standing sub-committees. HealthInfoNet (HIN) is the statewide health information exchange service provider.

HIN manages a provider portal that interfaces with electronic health records, hospital labs, the Maine Center for Disease Control and others to support statewide, robust health information exchange services, as described in additional detail below. HIN and the HIT Coordinator work closely with the Eastern Maine Healthcare Beacon Community to meet its goals. The Beacon Community is working to improve the health of people with chronic conditions such as diabetes, chronic obstructive pulmonary disease, congestive heart failure, and asthma, and relies heavily on the ability for participating providers to easily exchange critical health information.

Model and Services

Providers with electronic health records connect to HealthInfoNet (HIN) to receive and exchange clinical information. Using the network, providers share information such as drug allergies, prescriptions, medical conditions, and lab and test results.

HIN uses the Continuity of Care Record (CCR) data set as the foundation for HIE content; provides semantic data mapping to achieve data standardization for critical categories of clinical content (lab, prescription medication, diagnostic studies); supports statewide registries including a master patient index, a master provider index, and a patient centered clinical data summary; connects to the state public health information structure to support automated reporting of clinical data for public health surveillance and population management; and implements consumer privacy and security management practices.



State:
Maine

HIT Coordinator:
Jim Leonard

State Designated Entity:
State of Maine/Center for Disease Control

Award Amount:
\$6,599,401

Contact:
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Website:
<http://www.maine.gov/hit>

Other Related ONC funding in Maine:

Regional Extension Centers (RECs):
\$4,777,483

Beacon Community: \$12,749,740

Workforce Development: \$500,000



Highlights

- **Implementation:** HealthInfoNet (HIN) began with a two year demonstration phase that is now being rolled out statewide. HIN will expand in 2011 to include bidirectional HIE services and enable providers to meet all the Stage 1 Meaningful Use requirements related to exchange, including:
 - For individual professionals, provide patients with clinical summaries for each office visit; for hospitals, provide an electronic copy of hospital discharge instructions on request
 - On request, provide patients with an electronic copy of their health information (including diagnostic test results, problem list, medication lists, medication allergies, and for hospitals, discharge summary and procedures)
 - Incorporate clinical laboratory test results into EHRs as structured data
 - Generate lists of patients by specific conditions to use for quality improvement, reduction of disparities, research, or outreach
 - Use EHR technology to identify patient-specific education resources and provide those to the patient as appropriate
- **Public Health Reporting:** HealthInfoNet (HIN) enables automated laboratory result exchange for thirty (30) of the 72 diseases mandated for public reporting by the State of Maine. HIN has delivered the Public Health Information Network Management System (PHINMS) transport standard required by the Maine Center for Disease Control (MCDC) to communicate automated laboratory test results to the public health information infrastructure. The operational plan calls for the statewide exchange to begin developing a solution for supporting public health syndromic surveillance in the next phase of HIN Development. Furthermore, HIN and the state are working with the MCDC and the Beacon Community Project Team (Eastern Maine Healthcare) to develop interfacing capability for the current statewide immunization registry Impact II. This capability is a fundamental goal of the grant.
- **Coordination with Workforce Development:** Maine is closely communicating with both community college and university systems to coordinate efforts on workforce development. Maine's community college system is a sub-recipient to Tidewater Community College on the ONC community based training to develop and support educational programs in health information technology. The state HIT Coordinators is also participating in the planning group of the state university system and the University of Maine Farmington on their bachelors of science program in health informatics. The intent is to have a program developed and operational for incoming freshman in 2012 and to have course offerings in 2010.
- **Coordination with Medicaid/CHIP:** The state HIT Coordinator; Maine's Medicaid Program, MaineCare; and the Maine Center for Disease Control (MCDC) are coordinating efforts on a Children's Health Insurance Plan Reauthorization Act (CHIPRA) grant in conjunction with Vermont. This grant will provide an opportunity to automate the Bright Futures Early and Periodic Screening Diagnosis and Treatment (EPSDT) data that is currently manually collected on children and adolescents birth through 18. HealthInfoNet is collaborating with this group to both automate the Bright Futures forms but also include automated reporting capacity within the HIN exchange reporting tools set to be deployed in 2011. Reporting at the population levels will be of benefit to both the MaineCare and Maternal and Child Health Division of the MCDC.



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State Health Information Exchange Cooperative Agreement Program
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Meaningful Use

	<u>Landscape</u>	<u>Strategy</u>
<u>E-Prescribing</u>	The state has determined that e-prescribing functionality is largely available for providers through their EHR products or through other publically available tools (e.g. web-based solutions). The two remaining gaps are: enabling e-prescribing at the remaining 11 percent of retail pharmacies and ensuring EHR e-prescribing functionality.	The critical contributor to enabling e-prescribing in the remaining pharmacies is access to broadband. The HIT Coordinator is working with other state agencies on two broadband applications to fully connect Maine providers. In addition, the state and HealthInfoNet are working with the academic pharmacy program at the University of New England and RiteAid to develop support function and interfaces between HealthInfoNet and pharmacies to meet pharmacists' needs. The goal is to create a link between existing pharmacy record management systems and HealthInfoNet to provide pharmacists with patient data that will allow them to more fully participate as members of clinical care teams.
<u>Structured Lab Results</u>	Currently, many providers receive lab results electronically through point-to-point connections. A key service provided by HealthInfoNet is the mapping of individual lab codes to LOINC coding. HealthInfoNet supports the electronic reporting of lab results for 70 percent of the labs in the state. However, this information is not currently bi-directional and cannot be incorporated in a provider's EHR system.	<p>In January 2011, structured lab data will be bi-directional. The gaps the state and HealthInfoNet are working to address include: 1) securing LabCorp and Quest's participation in HealthInfoNet (and thus enabling electronic reporting of 100 percent of lab results), and 2) ensuring that the EHR systems have the capability to accept the structured lab data.</p> <p>The state and HealthInfoNet are addressing these two issues in the following ways: HealthInfoNet is beginning conversations with Quest and LabCorp to build interfaces to the HIE. HealthInfoNet will map the proprietary codes to LOINC codes. With respect to EHR functionality, HealthInfoNet requires EHR vendors to have this functionality in order to participate in the exchange. As the regional extension center (REC), HealthInfoNet is also requiring vendors to have this functionality in order to be included on the preferred vendor list.</p> <p>All the participants in the exchange will retain the option to choose to maintain their own point-to-point connections to labs or receive lab results through HealthInfoNet.</p>
<u>Patient Care Summary</u>	Clinical summary documents are currently available to providers through the view-only portal of HealthInfoNet.	When the HIE begins bi-directional data flow in January 2011, clinical summary documents can be integrated into a provider's EHR.



HIE Inventory

Standards		Quality Improvement	
Nationwide Health Information Network Exchange Specifications		Care Coordination	X
Nationwide Health Information Network CONNECT		Quality Reporting	X
Nationwide Health Information Network DIRECT		Behavioral Health Information Exchange	
Plans to exchange with federal agencies or other states via Nationwide Health Information specifications	X		
Public Health		Lab Strategy	
Electronic lab reporting of notifiable conditions	X	Translation services	X
Syndromic surveillance	X	EHR interface	X
Immunization data to an immunization registry	X	Policy strategy	
Patient Engagement		Order Compendium	
Patient Access/PHR		Bi-Directional	X
Blue Button		Alignment with CLIA	
Patient Outreach	X	E-Prescribing	
Privacy and Security		Medication History	X
Privacy and Security Framework based on FIPS	X	Incentive or grants to independents	
Individual choice (Opt In/Opt Out/hybrid)	Opt out	Plan for controlled substance	
Authentication Services	X	Set goal for 100% participation	X
Audit Log	X	Controlled substance strategy	
Administrative Simplification			
Electronic eligibility verification		Care Summaries	
Electronic claims transactions		Translation services	X
Vendor		CCD/CCR Repository	X
Planning		Directories	
Core Services	Orion	Provider Directory	X
	Initiate/IBM	Master Patient Index	X
	Health Language Inc. (HLI)	Record Locator Services	X
		Health Plan Directory	
		Directory of licensed clinical laboratories	



Information for this profile was obtained from the approved Operational and Strategic Plan submitted to the National Coordinator for Health Information Technology as a condition of the Health Information Exchange Cooperative Agreement. The complete plan can be downloaded at: www.statehieresources.org



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