



massachusetts



A Division of the
Massachusetts
Technology Collaborative



institute

Health IT Council Meeting

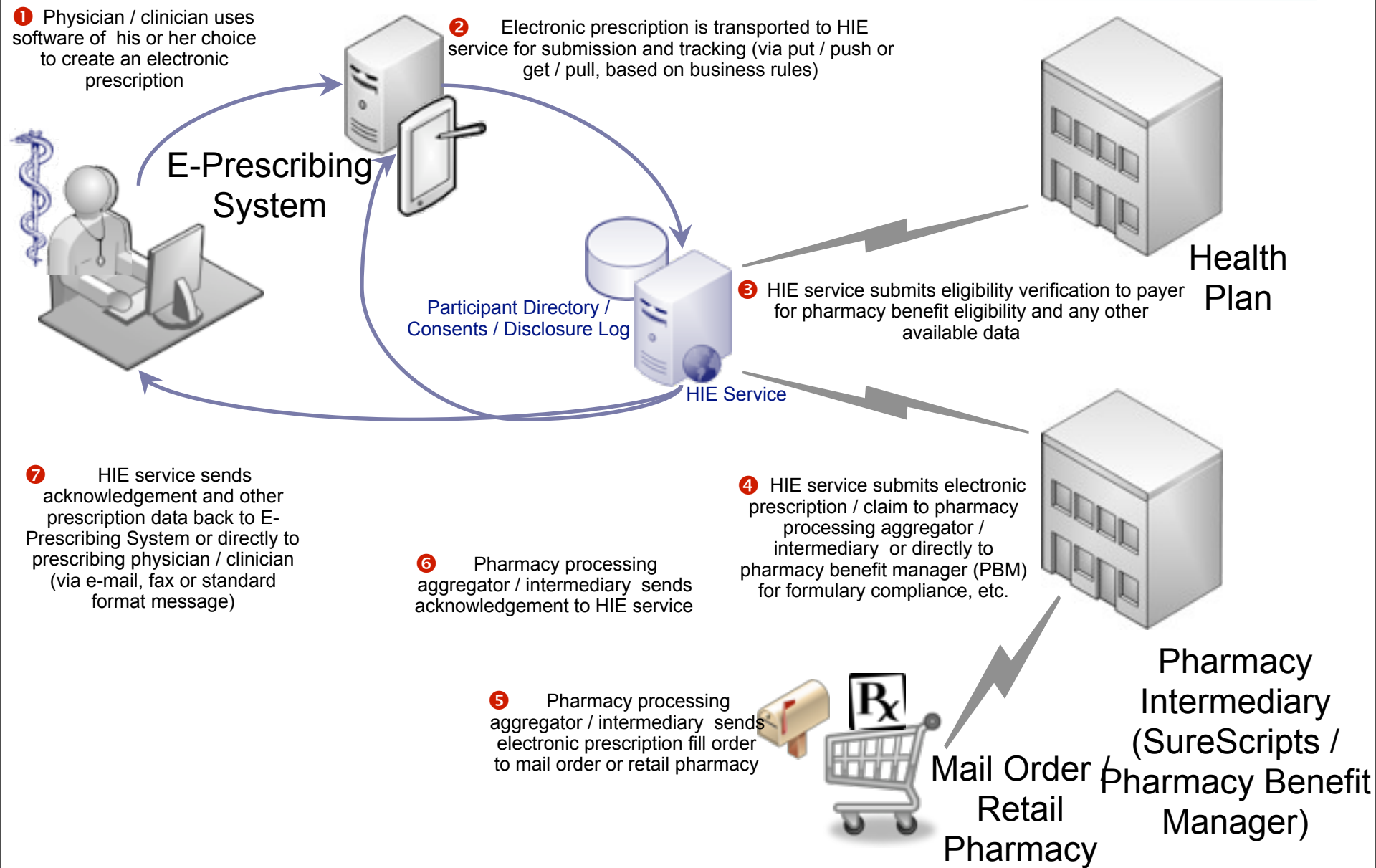
October 18, 2010

Massachusetts Health IT Council Meeting
HEALTH INFORMATION EXCHANGE VISION

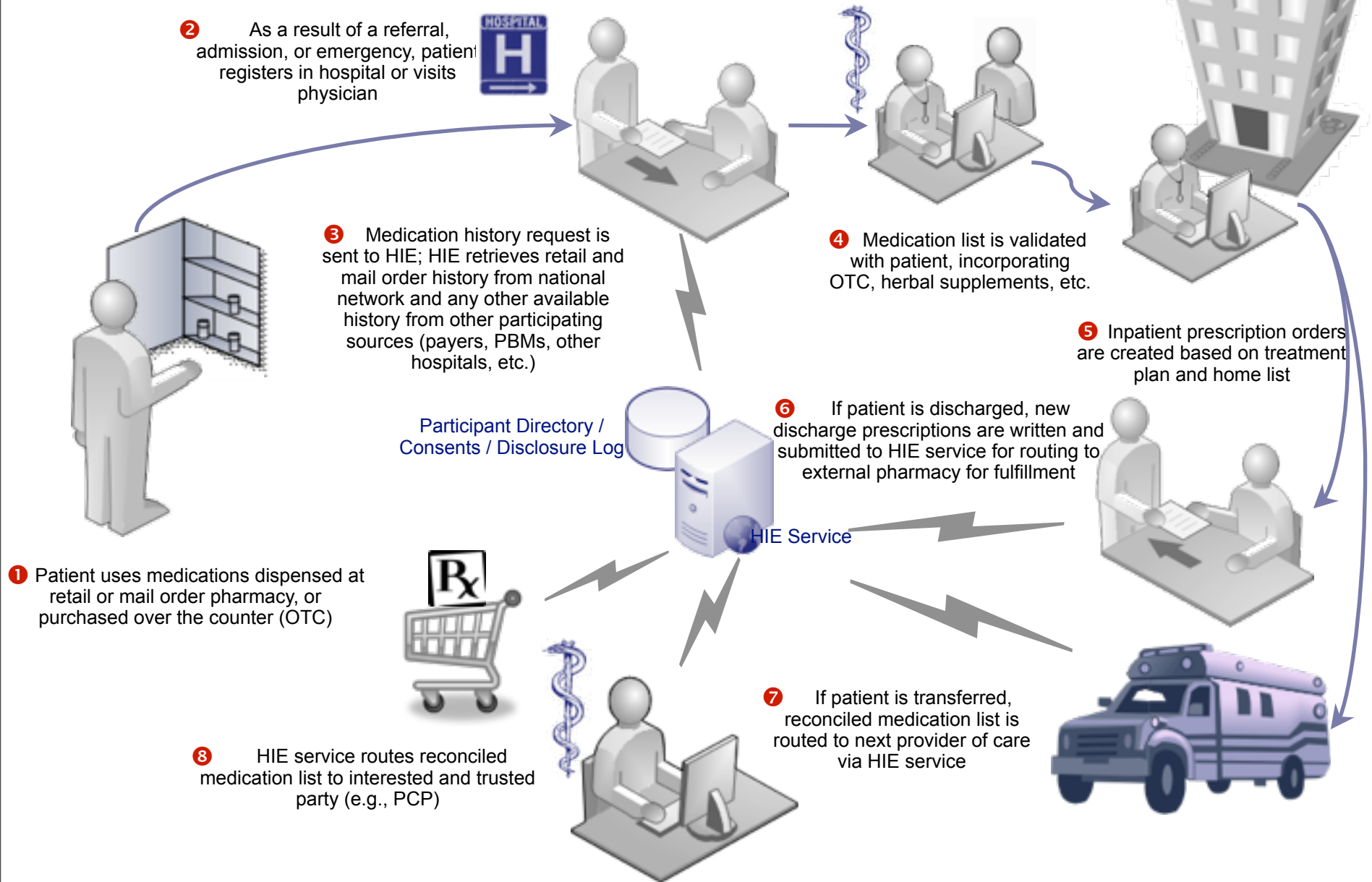
Health Information Exchange Vision

- Our 2010 current state includes e-prescribing functionality (eligibility, formulary, history, routing, refill), administrative transactions (benefits, referral/auth, claims, claims status), and hospital summary push to pcp/referring clinicians
- Our 2011 vision is to provide push routing among every provider in the Commonwealth, directories supporting routing, public key infrastructure, and public health repositories (immunization, syndromic surveillance, reportable lab) necessary for every provider in the Commonwealth to achieve meaningful use stage 1, improving healthcare quality, safety and efficiency.
- Our 2013 vision is to provide the master patient index, record locator, all payer database, event notification, patient controlled consent functionality, and pull data exchange tools necessary to achieve meaningful use stage 2, improving care coordination and patient engagement in the Commonwealth.
- Our 2015 vision is to provide the pharmacosurveillance, decision support, and clinical research tools necessary to achieve meaningful use stage 3, creating the foundation for accountable care organizations and supporting healthcare reform in the Commonwealth.

Route electronic prescriptions 2010

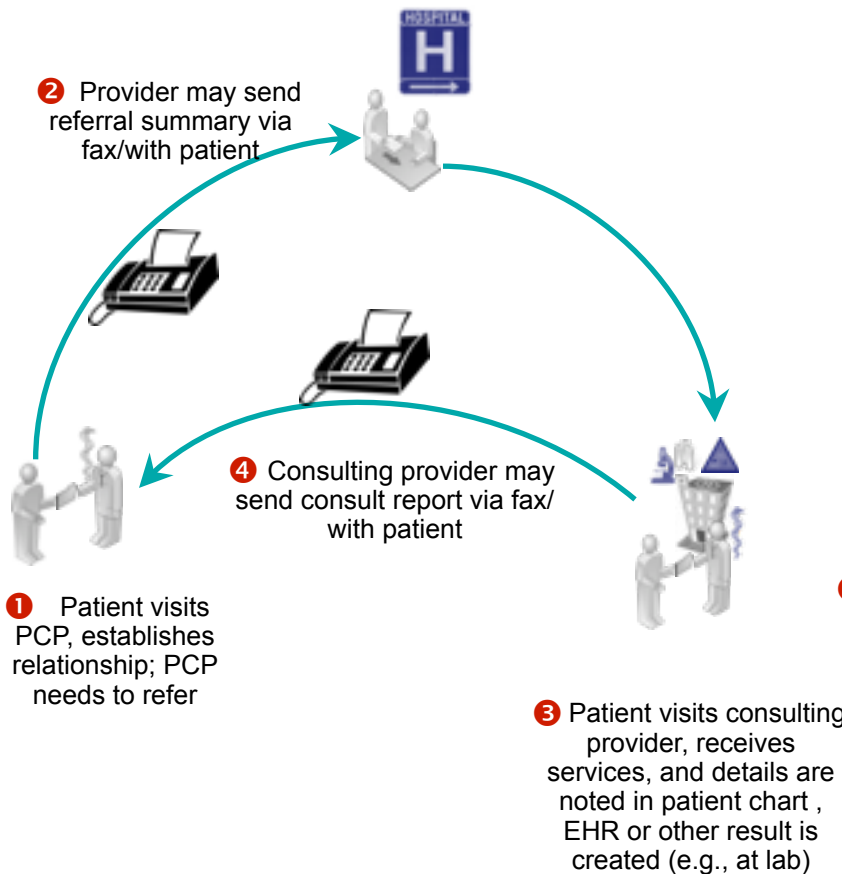


Retrieve Medication History for Medication Reconciliation 2010

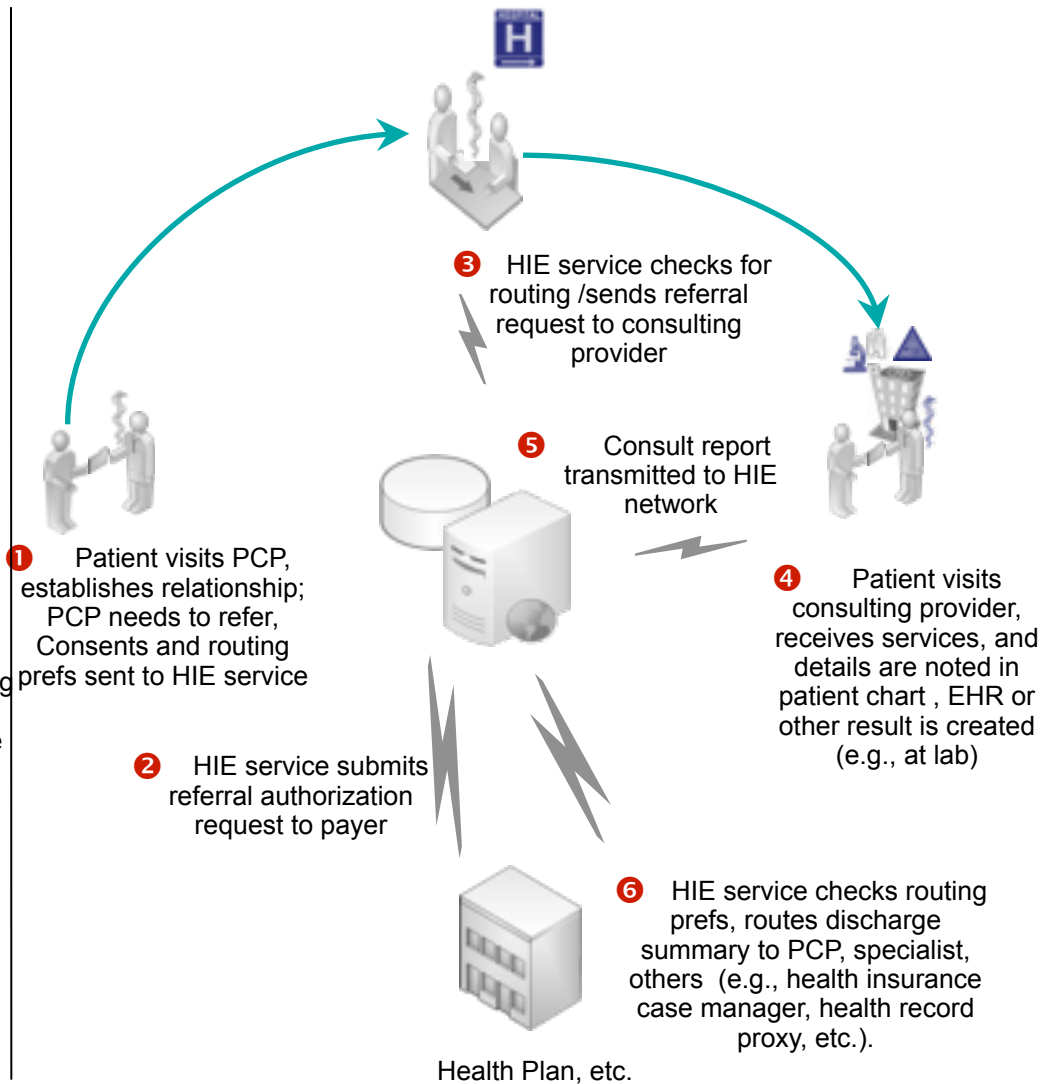


Care Coordination

2010

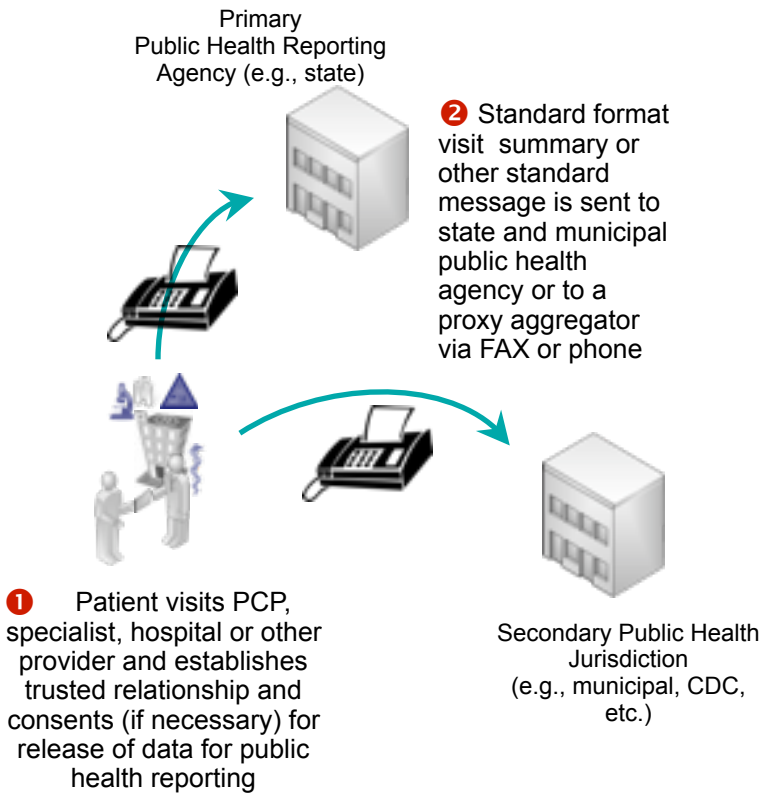


2011

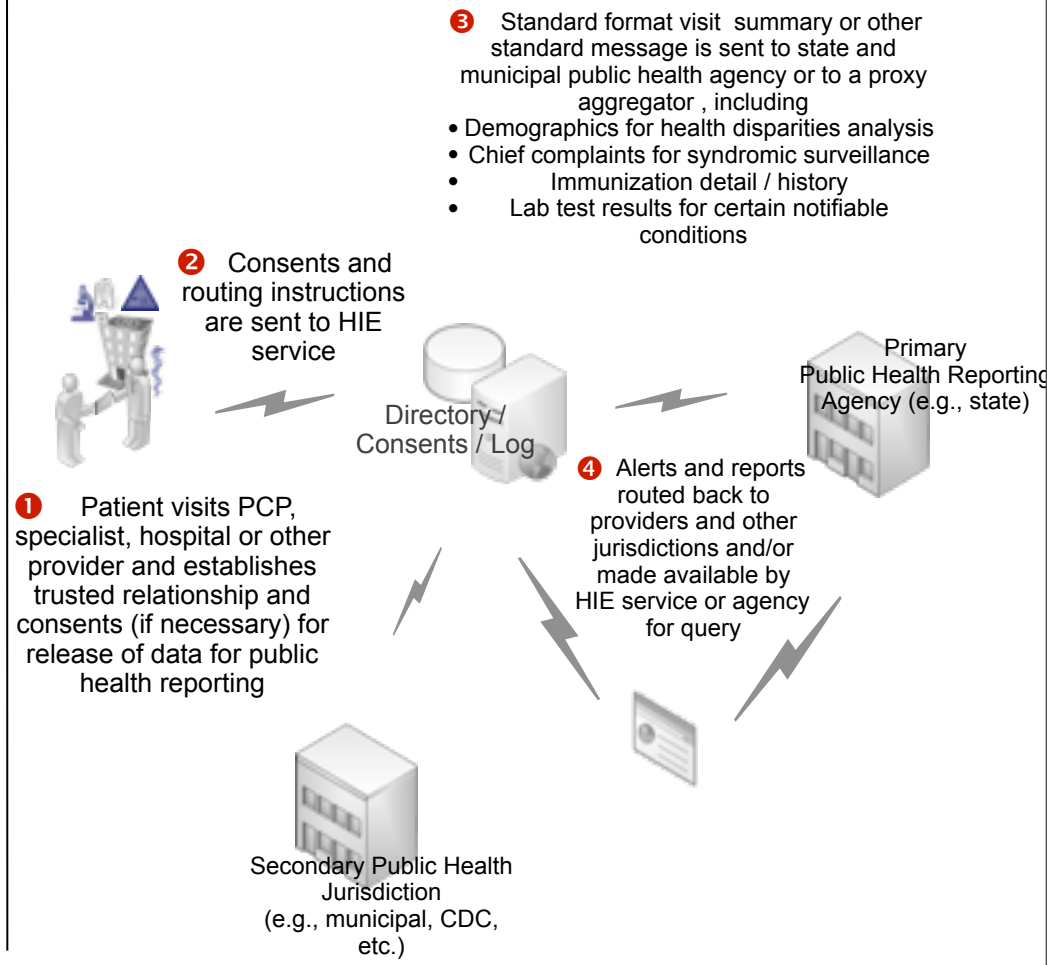


Public Health Reporting

2010

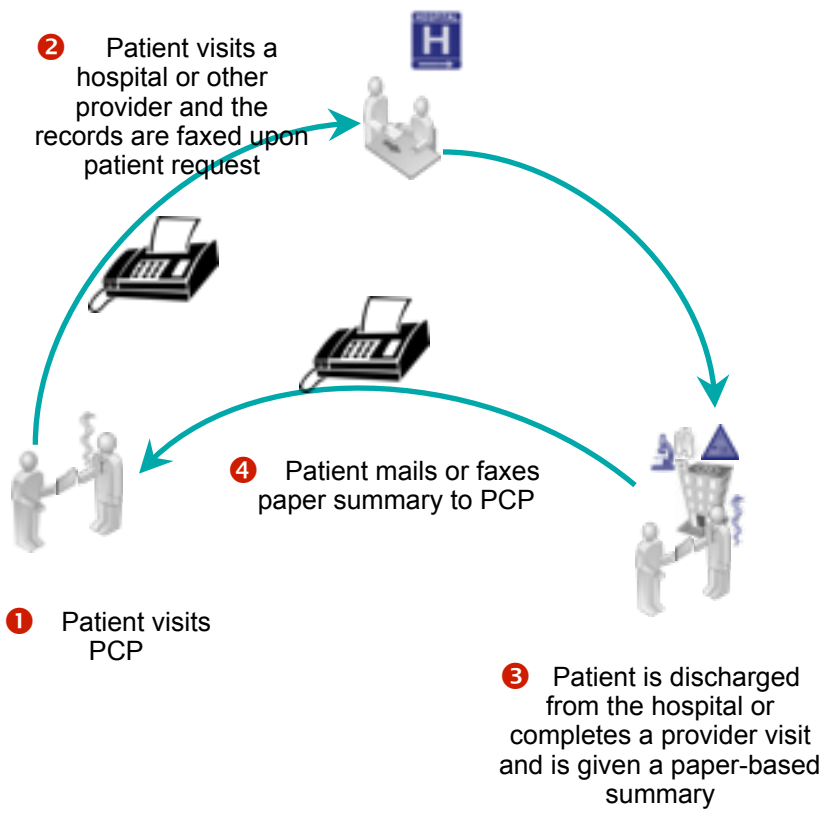


2011

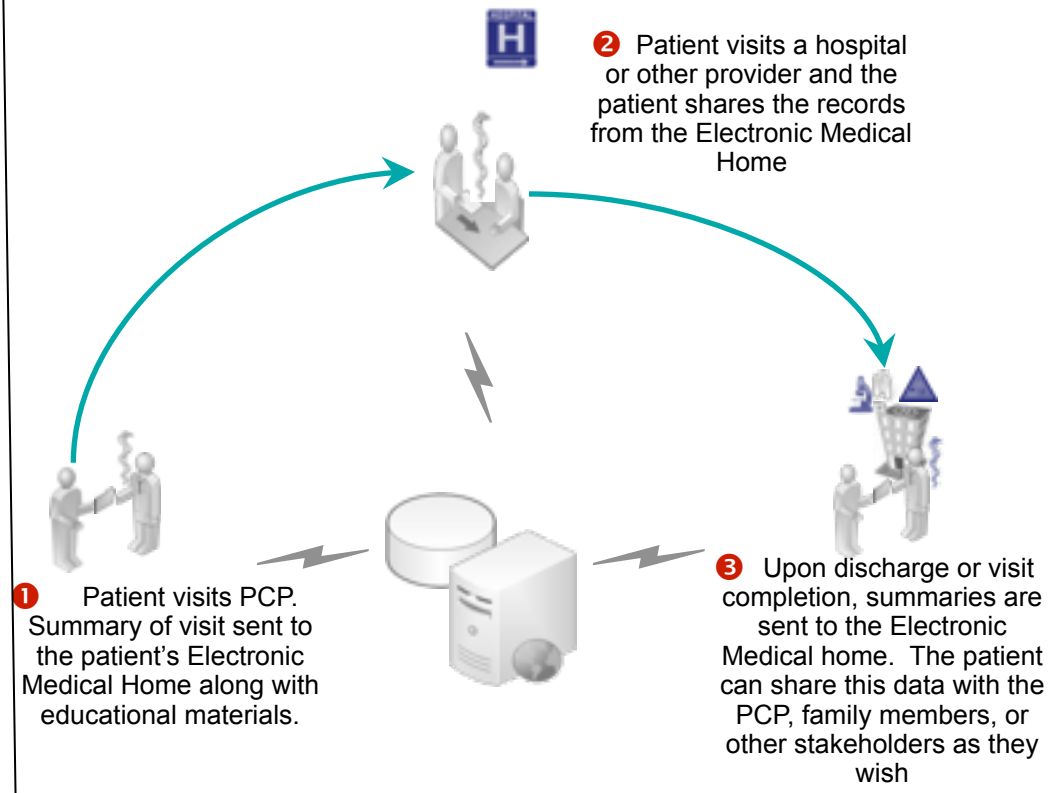


Consumer Empowerment

2010



2012



Query Patient History

2010



② Standard format visit summary and other data generated by visit, diagnostic test or other healthcare encounter or event is added to local records



① Patient visits PCP, specialist, hospital or other provider and establishes trusted relationship and consents for release of data to named health information organization



③ Providers, e.g. ED, would have to know where records are and get each

2013

③ Standard format visit summary and other data generated by visit, diagnostic test or other healthcare encounter or event is stored by HIE service or proxy to establish electronic health record or summary based on patient consent and business rules in HIE service



② Consents and routing instructions are sent to HIE service

① Patient visits PCP, specialist, hospital or other provider and establishes trusted relationship and consents for release of data to named health information organization

Directory /
Consents /
Log

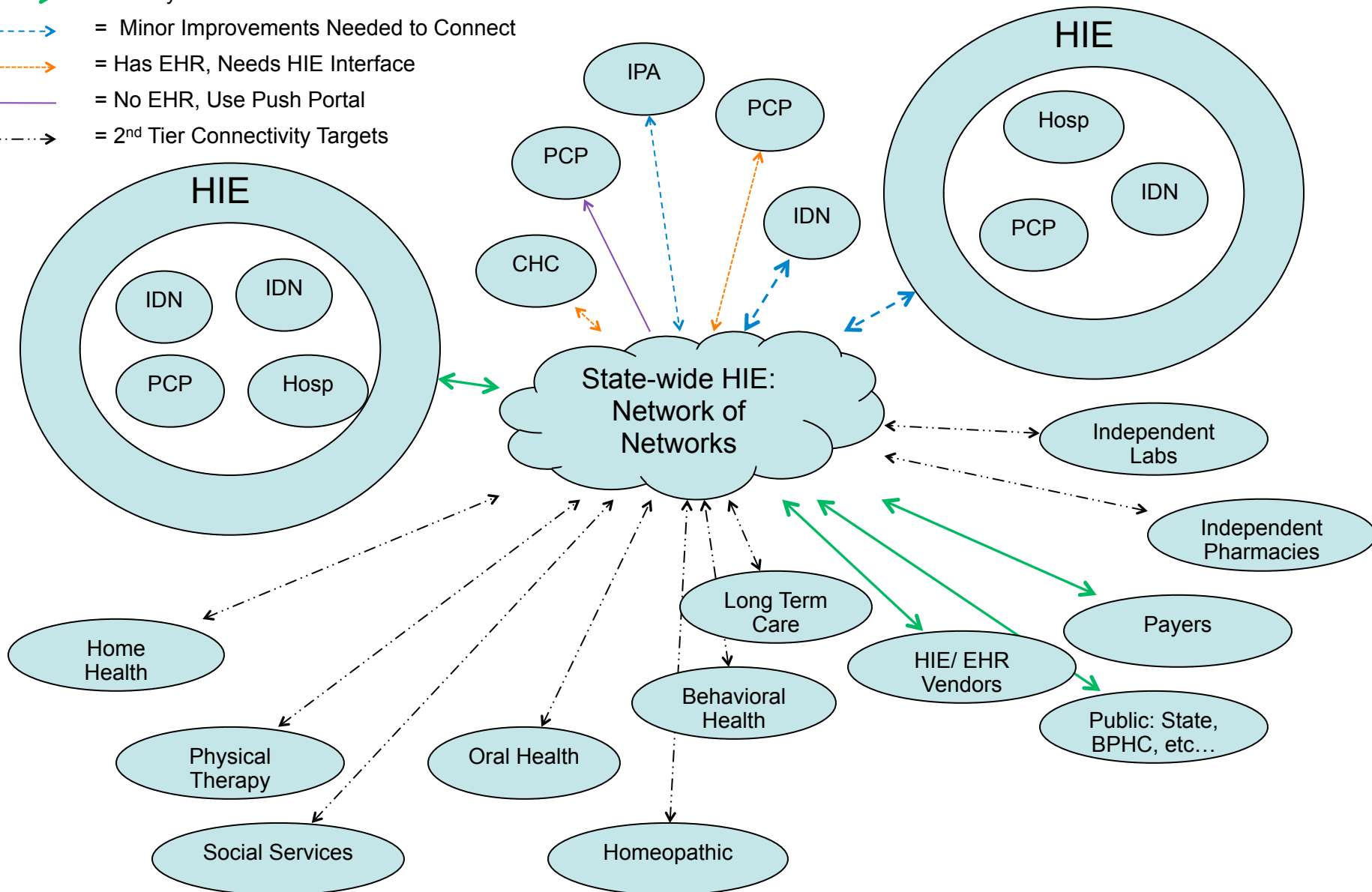
HIO, Portal Vendor or
Provider-Hosted
Portal



④ Providers, e.g. ED, and authorized parties can access electronic health record through EHR or portal provided by HIE service

HIE: Health Provider Network of Networks and Readiness to Connect

- = Ready to Connect
- = Minor Improvements Needed to Connect
- = Has EHR, Needs HIE Interface
- = No EHR, Use Push Portal
- = 2nd Tier Connectivity Targets



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Discussion/Questions?
