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Health Information Technology updates

Welcome Shaun Wilhelm!

Shaun Wilhelm has joined the Health Care Authority as the Health Information Technology (HIT) Section Manager, effective April 2nd. Shaun will be responsible for providing strategic HIT direction for Washington state, integrating this Health Information Exchange (HIE) and HIT strategy into broad-ranging Medicaid and related efforts. This includes the Medicaid Electronic Health Record (EHR) incentive payment program, the contract with OneHealthPort as the state-designated Health Information Exchange, the Clinical Data Repository (CDR), and the HIT Operational Plan for the Medicaid Transformation initiative.

Shaun comes to us from the Alaska Department of Health and Social Services, Division of Behavioral Health, where she was the Chief of Risk and Research Management. We are very excited to have her join our team as we continue this important HIT work with our community partners.

Clinical Data Repository updates

Transforming healthcare will require new and unconventional approaches for the use of

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Need help?

Clinical Data Repository (CDR):

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- [Readiness steps with OHP](#)
- [Email HCA](#)
- [Email OHP](#)

Electronic Health Records (EHR):

- [EHR resource page](#)
- [ProviderOne help](#)
- CMS EHR Help desk: 1-888-734-6433 option #1
- CMS account security: 1-866-484-8049 option #3
- [CMS listserv](#)

healthcare technology. Combining the CDR, Health Information Exchange (HIE) and Single Sign-On (SSO) provides the capability to share disparate data across multiple platforms and settings for various Trading Partners. All WA hospitals are now connected to the HIE and SSO digital credentials are in place in almost all provider offices. The addition of the CDR provides a key foundational component upon which other services and functionality can be added to improve care delivery, coordination of services and clinical outcomes.

Just as a reminder of the blended data set that is currently in the CDR, as it continues to build critical mass:

- Eligibility data for 2.1M Medicaid managed care lives (over 700,000 of which have at least one C-CDA submitted to their record)
- Over 3M clinical records overall
- Over 2 years of clinically relevant claims (Medical, Dental, Pharmacy)

The WA state HIE and CDR strategy is in line with evolving national initiatives to improve interoperability, reduce the administrative burden on providers and facilitate patient access to and management of their own data. The Centers for Medicare and Medicaid Services (CMS) recently launched MyHealthEData to get healthcare information into the hands of patients faster. The initiative aims to have patients receive a copy of their entire health record electronically, which can be done through application program interfaces

(APIs). Overall, CMS believes the future of healthcare depends on the development of open APIs. Health Level 7's Fast Healthcare Interoperability Resources (FHIR) is growing in adoption within the state, and both OneHealthPort and the HCA are interested in how this, and other APIs, will support further interoperability over time.

CMS also plans to take steps to decrease data blocking so that patients can see their complete history outside of just one health system. Under the 21st Century Cures Act, EHR vendors and hospitals have to attest that they are not engaged in information blocking.

Healthcare costs are rising, but one of the most common complaints from patients and providers is the inefficiency of EHRs to effectively coordinate care for their patients. Medical information is still being faxed and patients are given CD-ROMs. CMS emphasized that we cannot effectively transition to a value-based system unless we transfer all of the clinical and payment data to a point of care. The HIE and Clinical Data Repository will help facilitate this care coordination for citizens of WA state.

CMS intends to issue State Medicaid Director letters, along with additional guidance. One will map many existing HITECH/HIE/Reporting functions to existing work streams. Another will address the recommendations from the White House on the Opiate crisis, with flexibility for Medicaid to define how the rules will work. In a future stage of the CDR, substance use disorder (SUD) information will be made available in the system with patient consent and integration with the state Prescription Drug Monitoring Program

(PDMP) is being discussed. These actions can assist various clinical staff as they address the challenge of the opioid epidemic.

Finally, CMS announced a complete overhaul of Meaningful Use and intends to post a series of proposed rules to change the program that are open to public comment by year's end. The CDR can assist providers with MU compliance, so these changes to the program will be tracked closely by HCA.

Electronic Health Record stats

Hospitals

Year 1 = 88 (\$63,781,127)

Year 2 = 81 (\$36,102,305)

Year 3 = 77 (\$29,081,024)

Year 4 = 64 (\$18,095,783)

Eligible Providers

Year 1 = 6,938 (\$146,795,030)

Year 2 = 3,193 (\$26,993,184)

Year 3 = 2,232 (\$18,923,839)

Year 4 = 1,474 (\$12,483,672)

Year 5 = 729 (\$6,176,669)

Year 6 = 187 (\$1,586,667)

Grand total = \$360,019,300

About the Health Care Authority (HCA)

The Washington State Health Care Authority purchases health care for more than 2 million Washington residents through Apple Health (Medicaid) and the Public Employees Benefits Board (PEBB) Program. As

the largest health care purchaser in the state, we lead the effort to transform health care, helping ensure Washington residents have access to better health and better care at a lower cost.

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