



Ohio Health Information Partnership  
Health Information in a Heartbeat



*Bringing physicians together for a healthier Ohio*

## The CURES Act and Interoperability in Ohio: Requirements for Physician Offices

# Interoperability and Information Blocking



## **Goals of Presentation are to answer:**

- *What does your practice need to do to meet interoperability?*
- *What does CliniSync do to support you?*
- *What can we do together to make you interoperable?*

**Effective Date for Compliance:**  
**April 5, 2021**

## Presenters

- **Karen Bishop**  
*Manager, HIE Connectivity/Exchange Solutions*  
*CliniSync HIE*
- **Eric Bradison**  
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- **Scott Mash, MSLIT**  
*Director, Consulting Operations and HIE Outreach*



[www.clinisync.com](http://www.clinisync.com)



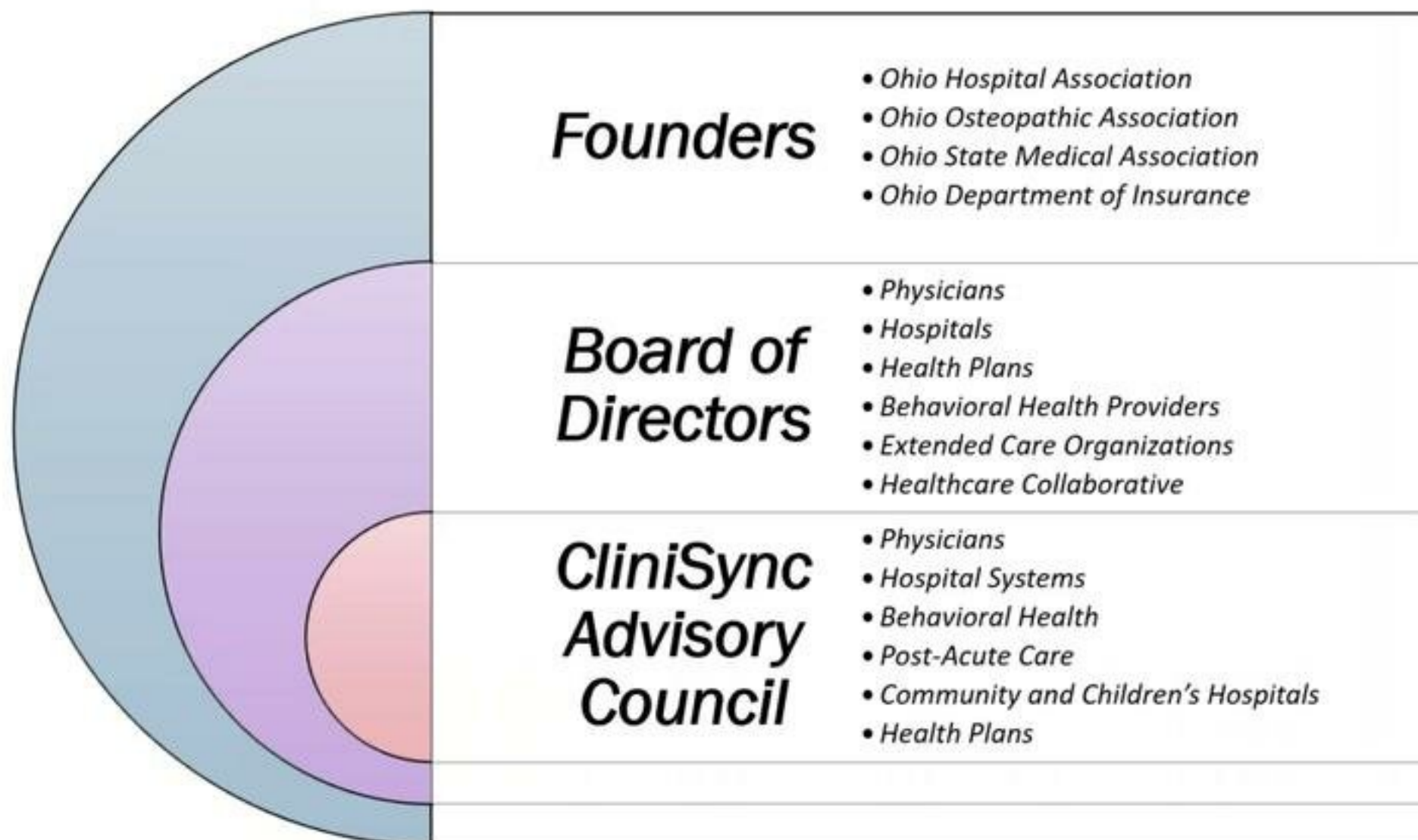
## *Good Time to Be Looking at Interoperability...*



**CMS has incentivized practices to become interoperable in 2021.**

# Ohio Health Information Partnership Governance

Grassroots, Community-Based, Statewide



# *CliniSync HIE: Connecting Ohio's Providers*

## ***General Information***



15 Million unique patients in the HIE



11.3 Million results sent to practices and providers in the past 12 months



155 Hospitals in Ohio, Kentucky and West Virginia  
500 LTPACS      67 Home Health      31 Hospice



15,000+ Independent and hospital-employed providers participating



12 Health plans including 5 Medicaid managed care plans



## *How Does the CURES Act Define Interoperability?*



Interoperability

# Interoperability and Information Blocking

## Two Sides to a Coin

CURES Act:  
Interoperability.  
Providers and  
Health  
Information  
Exchanges (HIEs).

- **21<sup>st</sup> Century Cures Act**
- **“Interoperability”** means such health information technology that—
  - “(A) Enables the **secure exchange of electronic health information with**, and use of electronic health information from, **other health information technology without special effort** on the part of the user;
  - “(B) Allows for complete access, exchange, and use of all electronically accessible health information for authorized use under applicable State or Federal law; and
  - “(C) Does not constitute information blocking as defined in section 3022(a).”

*Proving interoperability is a fact-specific process for demonstrating the accessibility of data.*



# Interoperability and Information Blocking

## Two Sides to a Coin

### CURES Act : Information Blocking Definition

- “Information blocking” is:
  - *A practice that except as required by law or specified in the rules is likely to interfere with, prevent or materially discourage access, exchange or use of electronic health information.*
  - *For providers, the provider knows that practice is unreasonable and likely to interfere with data exchange.*
- *New rules are designed to prevent information blocking in the following cases:*
  - 1) *By vendors with their clients*
  - 2) *By providers with other providers outside their health system*
  - 3) *By providers with patients*
- *Information blocking does not apply to payers unless the payer is covered under the definition of health care provider (e.g., home health).*

## *CMS's Top Priorities for Exchange of Data: Patient Access to Information and Technical Integration*



These are two of the main components of Interoperability.

## Patient Access to the Medical Record: *Proposed HIPAA Changes*



*Note: CliniSync does not give direct access to patients for data contained in the HIE. It is the responsibility of hospitals and providers to make sure that they have policies and procedures in place that support patient access to the patient's own data.*



# Proposed HIPAA Privacy Rule Update on Access to Records

*CMS balancing the right of privacy against the need to coordinate care*

## Major Areas Covered:

- **Patient Access:** *New guidelines on release medical records (e.g., timeliness, format, and access issues for patient or 3<sup>rd</sup> parties).*
- **Family and Caregiver Access:** *Access to patient information and medical record by family and/or caregivers for teenagers and young adults in cases involving SUD, SMI or emergencies.*
- **Payer and Social Services Access:** *Use of information for care coordination and case management by other providers and payers.*



*The proposed regulations on the HIPAA Privacy Rule (RIN 0945-AA00) were published on January 19, 2021. A copy of the rule can be found at <https://www.hhs.gov/sites/default/files/hhs-ocr-hipaa-nprm.pdf>. Comments are due by March 22, 2021.*





## *What Will a Practice Need to Do to Comply?*

- **Once the Privacy Rule is finalized (most likely, mid-summer), plan on updating your workflow and policies to include:**
  - **Patient Access Policy:** Create patient access policy on release of records that will mimic the Privacy rule. Include: patient portal access, access through a phone app and general information about release of records.
  - **Phone App Information:** Place language on website explaining how to contact the practice if patient wants to enable a phone app to get information. CMS is “strongly encouraging” payers and providers to have patient education information available about the privacy and security concerns of pushing data to uncertified phone app vendors (no HIPAA protections once the data leaves the hospital or provider’s EHR).
  - **Case Management and Care Coordination:** Establish workflow as to how information can be shared with other providers of care or payers when it is for case management or care coordination.
  - **Staff Training:** Establish training for staff around patient’s right of access to records and how to comply.
  - **Notice of Privacy Practices:** Update your information to new language in HIPAA rule.

## Interoperability through Technical Integration: How Can You Share Data Electronically and Avoid Charges of Information Blocking?



Need to share data with other providers, patients and health plans.



## *CliniSync HIE Services that Support Interoperability*

### **Results Delivery**

- Allows you to receive discrete results and reports in real time

### **Community Health Record**

- Permits you to view a patient's visits to different hospitals and practices in one place

### **Referrals**

- Lets you send and receive referrals that you manage and track

### **Notify**

- Alerts you when a patient is admitted or discharged from a hospital or Emergency Department

### **Direct Messages**

- Lets you send a secure email with attachments

### **Contribute**

- Provides opportunity for you to contribute Continuity of Care Documents (care summaries) to the Community Health Record

### **Care Coordination and Quality**

- Provides a platform to bring data together to manage quality metrics and care coordination

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## *Interoperability For Physician Practices*

*In the 2021 Physician Fee Schedule rule, CMS is supporting bi-directional exchange of data through an HIE as a comprehensive method of meeting interoperability.*

### **CMS states:**

“HIEs allow for broader interoperability beyond one health system or point-to point connections among payers, patients, and health care providers. By enabling bi-directional exchange of information between health care providers and aggregating data across providers with disparate systems, HIEs can bring together the information needed to create a true longitudinal care record and support improved care coordination by facilitating timely access to robust health information across care settings.

Bi-directional exchange means that the clinician’s EHR is enabled to allow for querying and sharing data by sending, receiving, and incorporating data via an HIE for every patient.”





## Interoperability

### *What data would not flow to the HIE?*

*The law is changing in March 2021 to create a new consent process for the exchange of drug and alcohol (SUD) records.*

- *Information relating to drug and alcohol treatment will only be transmitted if there is the appropriate 42 CFR Part 2 consent (process will change with change in law in March 2021).*
- *Psychotherapy notes may be excluded under HIPAA.*
- *Other information that is not part of the Continuity of Care Document (CCD).*

*Your EHR should be set up to automatically draw the appropriate data from your system to transmit to the HIE.*

# National Interoperability: Networks Accessed through CliniSync

- **eHealth Exchange (old NwHIN network)**

- National Health Information Network
- Principal network connecting federal agencies with non-federal organizations

- **DirectTrust**

- Oversees the secure communications network that uses DIRECT messaging to communicate between various providers



- **Commonwell**

- Carequality Implementer
- HIE established primarily by EHR vendors:
  - Cerner
  - Meditech
  - Greenway
  - Athenahealth
  - Brightree
  - ChangeHealthcare
  - eCW
  - eMDs
  - MedHost

- **\*Carequality**

- Carequality is not an HIE
- Provides the trust framework for HIE networks such as eHealth Exchange

*CliniSync is already connected to the VA and the Department of Defense and can provide your practice clinical records on military veterans and currently enlisted personnel.*



# Ohio Interoperability: CliniSync Hospitals by Region

| Central   | Northeast   | Northwest   | Southeast  | South/<br>Southwest   |
|---|---|---|--|---|
| Adena Health (3)<br>Avita Health (3)<br>Fairfield Medical Center<br>Madison County Hospital<br>Mary Rutan<br>Memorial Hospital Union<br>County<br>Morrow County Hospital<br>Mount Carmel (6)<br>Nationwide Children's<br>OHH-Berger<br>OSU Wexner Medical Center<br>(5)<br>OhioHealth (8) | Akron Children's (2)<br>Akron General-CCF (3)<br>Alliance Community Hospital<br>Aultman (3)<br>Cleveland Clinic (13)<br>East Liverpool City Hospital<br>Humility of Mary Health (3)<br>Lake Health (3)<br>Bon Secours Mercy Health<br>Lorain (2)<br>Mercy Medical Center Canton<br>MetroHealth System<br>MedCentral/OHH -Mansfield<br>(2)<br>Pomerene Hospital<br>Salem Community<br>Southwest General<br>St Vincent's Charity Medical<br>Summa Health (4)<br>Trinity Health (2)<br>Union Hospital-CCF<br>University Hospitals (15)<br>Western Reserve<br>Wooster Community | Bellevue Hospital<br>Blanchard Valley (2)<br>Community Health &<br>Wellness (3)<br>Community Memorial-<br>Hicksville<br>Firelands Regional Medical<br>Center<br>Fisher-Titus<br>Fulton County Health Center<br>Grand Lake/Joint Twp<br>Henry County Hospital<br>Lima Memorial<br>Magruder Hospital<br>Mercer County Community<br>Bon Secours Mercy Health<br>Toledo (7)<br>St Rita's Health Partners (2)<br>University of Toledo Medical<br>Van Wert County Hospital<br>Wilson Health<br>Wyandot Hospital | Barnesville<br>Coshocton Community<br>Hospital<br>Genesis Health<br>Knox Community Hospital<br>Licking Memorial Hospital<br>Marietta Memorial Health (3)<br>Southeastern Ohio Regional<br>Medical (SEORMC)<br>Wheeling and Belmont (3) | Dayton Children's<br>Fayette County Memorial<br>Hocking Valley Community<br>Holzer Health (2)<br>Kettering Health (7)<br>King's Daughters (2)<br>OHH-O'Bleness<br>Premier Health (4)<br>Southern Ohio Medical<br>Center<br>Wayne Healthcare<br>Bon Secours Mercy Health<br>Cincinnati & Springfield<br>(7)*CCDA |

155

*Through CliniSync, you are electronically connected to all these hospitals.*



## *Ohio Interoperability: CCD Contributors* (Includes all practices with a given organization)

| CENTRAL  | NORTHEAST  | NORTHWEST   | SOUTHEAST   | SOUTH/<br>SOUTHWEST  |
|--|--|---|---|--|
| OSU Wexner Medical Center<br>OhioHealth<br>Lower Lights Christian Health Center<br>Logan Elm<br>Valley View Health Centers<br>National Youth Advocate Program<br>Avita Health System<br>Madison County Hospital<br>Memorial Hospital of Union County | Akron Children's Alliance Community Hospital<br>Cleveland Clinic Lake Health<br>Bon Secours Mercy Health Lorain<br>Mercy Medical Center Canton<br>MetroHealth System<br>Salem Community<br>St Vincent's Charity Medical<br>Summa Health<br>Trinity Health<br>University Hospitals<br>Wooster Community<br>Bloomington Medical Services<br>Parkside Villa<br>NEON<br>Crystal Clinic<br>Comprehensive Internal Medicine<br>Lake County Family Practice | Blanchard Valley Medical Associates<br>Community Health & Wellness Logan County<br>Firelands Regional Medical Center<br>Grand Lake/Joint Twp<br>Lima Memorial<br>Bon Secours Mercy Health Toledo<br>Wilson Memorial Hospital<br>Health Partners of Western Ohio<br>Van Wert Health<br>Mercer Health<br>Wyandot Hospital | Coshocton Community Hospital<br>Genesis Health<br>Licking Memorial Hospital<br>Marietta Memorial Health<br>Medical Associates of Cambridge<br>Hocking Valley Hospital | Dayton Children's<br>King's Daughters<br>Premier Health Partners |

*Visit our webpage for the most recent live contributors  
<http://www.clinisync.org/> and look for "Contributing Members" under "Member Resources" tab.*

# Ambulatory and Inpatient Vendors Working with CliniSync



1. 3M
2. Acumen 2.0
3. AcumenMD
4. Advance Data Systems
5. AlertMD
6. Allscripts Pro
7. Allscripts Sunrise
8. Allscripts Touchworks
9. AmazingCharts
10. American Medical Software
11. Aprima
12. AthenaHealth
13. Atlas Medical
14. Bizmatics Inc

15. Cerner
16. ClinixMD
17. Code Hero
18. CPSI
19. CureMD
20. DaVita
21. digiChart EHR
22. DRS Enterprise
23. eClinicalWorks
24. e-MDs
25. Elation
26. Emdeon
27. Epic
28. Essentia LWSI

29. GE Healthcare
30. Glenwood Systems
31. gMED
32. Greenway Medical
33. Healthland
34. HMS MediHost
35. Keane
36. IKnowMed
37. IMS





# *Ambulatory and Inpatient Vendors Working with CliniSync*



**38. McKesson Clinical**

**39. MDNet**

**40. MDSuite**

**41. MDTech**

**42. MEDENT EMR/EHR**

**43. Medical Informatics Engineer**

**44. Medical Office Online**

**45. Medicat**

**46. MediKeeper**

**47. MedInformatix**

**48. MediMobile**

**49. MediSoft**

**50. MediTab**

**51. Meditech**

**52. Meditech Expanse**

**53. Merge RAD**

**54. Meridian EMR**

**55. MicroMD**

**56. MIE Webchart**

**57. Modernizing Medicine**

**58. NextGen Healthcare**

**59. NTT Data**

**60. Office Practicum**

**61. OncoEMR by Flatiron**

**62. Orchard Harvest**

**63. Practice Fusion**

**64. Practice Partner**

**65. Provation**

**66. Siemens**

**67. SOAPware**

**68. SoftLab**

**69. Sound Physicians**

**70. SpeechQ**

**71. StreamlineMD & Smartcare**

**72. Sunquest**

**73. SYNAPSE RIS**

**74. UroChart**

**75. Vitera Healthcare Solutions**



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## Interoperability

### *How Does this Benefit My Practice?*

#### **Benefits include:**

- **Interoperability and Information Blocking:** Participants who are connected to an HIE for both sending and receiving information are by definition considered to be interoperable by CMS:
  - *Will share information electronically with other providers as information flows to the CliniSync Community Health Record (CHR)*
  - *Will connect at the national level to both send and receive information; can receive information from the Veterans Administration (VA), Department of Defense (DoD) and other HIEs across the country*
  - *Will be connected to an all-inclusive HIE for with over 75 different vendors being integrated*
- **MIPS Promoting Interoperability:** To report for *Promoting Interoperability* for the MIPS program in 2021, will only need to attest to the following statements:
  - *Participation in an HIE that has secure, bi-directional exchange that can occur for every patient encounter, transition or referral*
  - *HIE provider participates in is capable of exchanging information across a broad network of unaffiliated exchange partners with different EHRs*
  - *Practice uses functions of CEHRT, including data contribution, querying and secure messaging to exchange information*

## MIPS 2021 Reporting: Promoting Interoperability

|      | Objectives                                       | Measures  | Potential Score                      | Alternative Attestation              |
|------|--|---|--------------------------------------|--------------------------------------|
| ---- | Protect Electronic Health Information            | Perform review within the calendar year   | <u>Required</u><br><i>Not scored</i> | <u>Required</u><br><i>Not scored</i> |
| 1    | Electronic Prescribing (eRx)                     | <b>eRx</b> <ul style="list-style-type: none"> <li>EPCS <u>not required in 2019</u></li> <li>If don't report controlled substances, then PDMP query bonus not available</li> </ul> | 10 Points                            | 10 Points                            |
|      |  | <b>Bonus:</b> Query of Prescription Drug Monitoring Program (OARRS Database) <ul style="list-style-type: none"> <li>Bonus is full points; no numerator/denominator</li> </ul>     | 5 Points<br><i>(Bonus)</i>           | 5 Points<br><i>(Bonus)</i>           |
| 2    | Health Information Exchange                      | Support electronic referral loops by sending electronic information   | 20 Points                            | <i>Automatic<br/>20 Points</i>       |
|      |  | Support electronic referral loops by receiving and incorporating health information   | 20 Points                            | <i>Automatic 20 Points</i>           |
| 3    | Provider to Patient Exchange                     | Provide patients electronic access to their health information <ul style="list-style-type: none"> <li>Includes API access for apps in addition to patient portal</li> </ul>       | 40 Points                            | 40 Points                            |
| 4    | Public Health & Clinical Data Registry Reporting | Must do <b>two</b> of the following:<br>Immunization, Syndromic Surveillance, PH Registry Reporting, Clinical Data Registry Reporting   | 10 Points                            | 10 Points                            |





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# *Community Adoption in Ohio*

## *How a Practice Gets Connected*



*Presenters: Eric Bradison  
Karen Bishop*





## *What Does a Practice Need to Do to Become Interoperable?*

### *Connect to an HIE. To connect to CliniSync:*

- **Reach out and ask for Information:** Go to <http://www.clinisync.org/> if not already connected, go to “Sign Up for Services” and fill in your contact information.
- **Discuss vendor integration with CliniSync rep:** CliniSync HIE rep will talk to you about your specific EHR vendor and connecting to CliniSync. Your EHR vendor may charge you for an HIE connection; CliniSync does not charge you for connecting.
- **Schedule call with your practice, your vendor and CliniSync:** Work with CliniSync rep to schedule a 3-way call with you, CliniSync and your vendor to discuss timeline, costs, technical integration.
- **Approve integration project:** Once you have approved the ingoing and outgoing connections, CliniSync will work directly with your team and vendor to get the connections built.

## CCD – Continuity of Care Document: What Is It?



Continuity of Care Document  
CCD-Based intelligence

- Also referred to as a Summary of Care document
- Contains rich clinical detail about patient's journey
- Supported by certified EHR systems
- Can be an encounter-based or a longitudinal summary





## Interoperability

# Will all of the patient's record be transmitted to the HIE?

- *No. The information transmitted to the HIE includes information in a Continuity of Care Document (CCD) with the following common elements:*

Data to be included in Client's CCDA CCD Document: Check all that can be included

### PATIENT IDENTIFIERS

- ☐ Person Number/MRN
- ☐ Social Security Number\*\*

### PATIENT DEMOGRAPHICS

- ☐ Patient Name
- ☐ Date of Birth
- ☐ Administrative Sex
- ☐ Address (Current)

### PATIENT DATA

- ☐ Problems List
- ☐ Medication Allergies
- ☐ Medications List
- ☐ Immunizations

### CLINICAL DATA

- ☐ Encounter List/Diagnoses
- ☐ Vital signs

### ADDITIONAL DATA

- ☐ Cognitive Status
- ☐ Functional Status

- ☐ Phone Number (Current)
- ☐ Preferred language
- ☐ Ethnicity
- ☐ Race

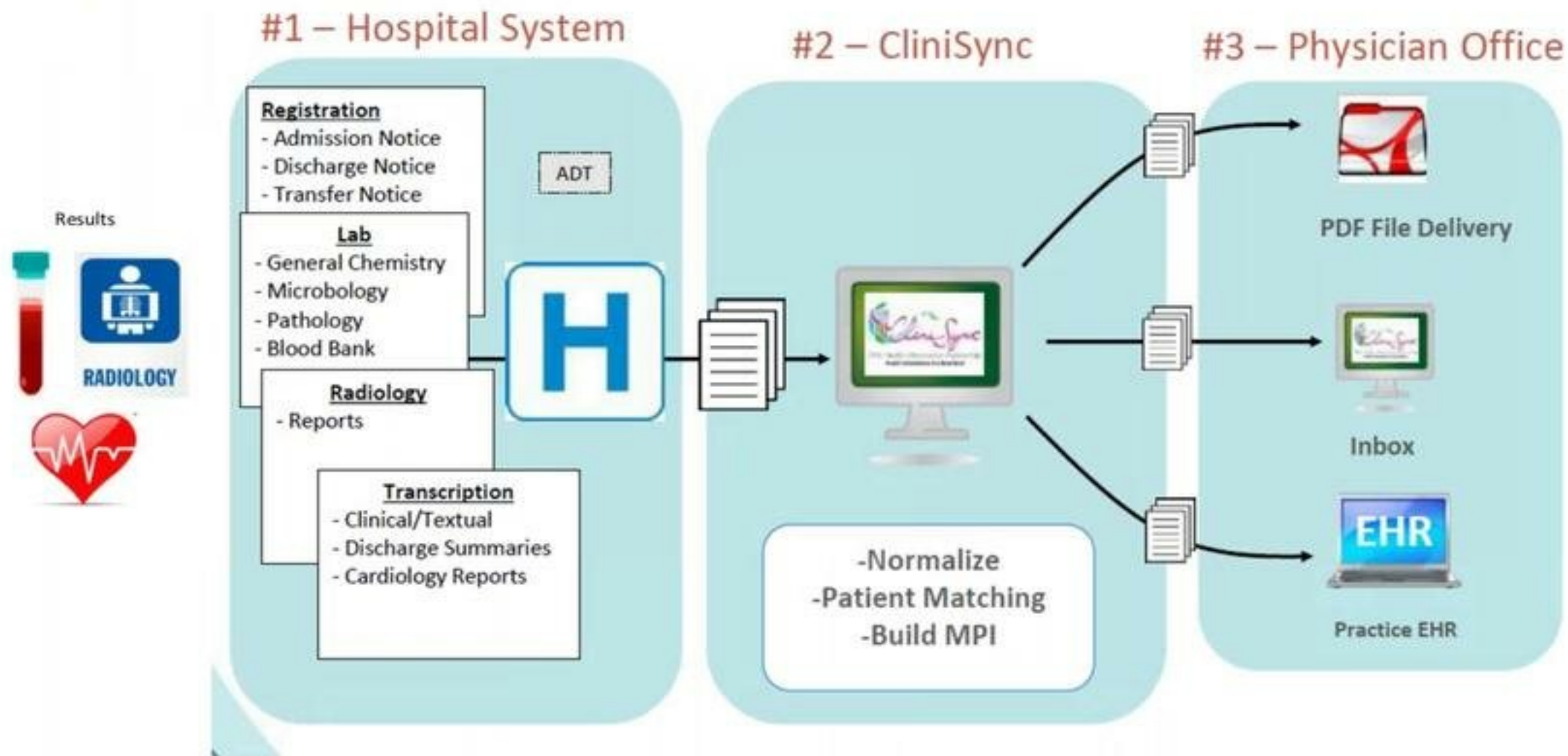
- ☐ Procedures
- ☐ Smoking status
- ☐ Care plan
- ☐ Care team member(s)

- ☐ Laboratory Value(s)/Result(s)
- ☐ Clinical Notes

- ☐ Reason for Referral

\*\* If SSN is not included, 5 Demographic values MUST be included

# How the HIE Works: Results Delivery—Lab Results or Imaging Reports From Hospitals or Outside Labs





## *How the HIE Works—Query and Retrieve from your EHR*

*Typical workflow for automatically querying CliniSync for results can vary from vendor to vendor, but this is the normal process:*

### **Batch Process (Query in Advance)**

- *A nightly process is set up in your EHR to identify the patients scheduled for the next day.*
- *The process queries CliniSync to gather treatment information for the patients on your roster. This will give easy access to recent clinical, demographic and insurance information about your patient.*
- *A Continuity of Care Document (CCD) is returned; this can be de-duplicated if your practice has requested it.*

*The CliniSync CCD is not the same as the information received for a Transition of Care via Direct messaging. Clinisync CCD pulls in information from many sources and not just one encounter.*

## *How the HIE Works—Query and Retrieve from your EHR*

*Typical workflow for automatically querying CliniSync for results can vary from vendor to vendor, but this is the normal process:*

### **On Demand Process (Query as Needed)**

- *A button or other trigger is designated in your EHR to query CliniSync to gather treatment information for the patient in context as you need it.*
- *A Continuity of Care Document (CCD) is returned; this can be de-duplicated if your practice has requested it.*

***Integration with the HIE allows you to receive information on meds, allergies and problems directly into your EHR for reconciliation.***



# Sharing Data Outbound to CliniSync for Other Providers

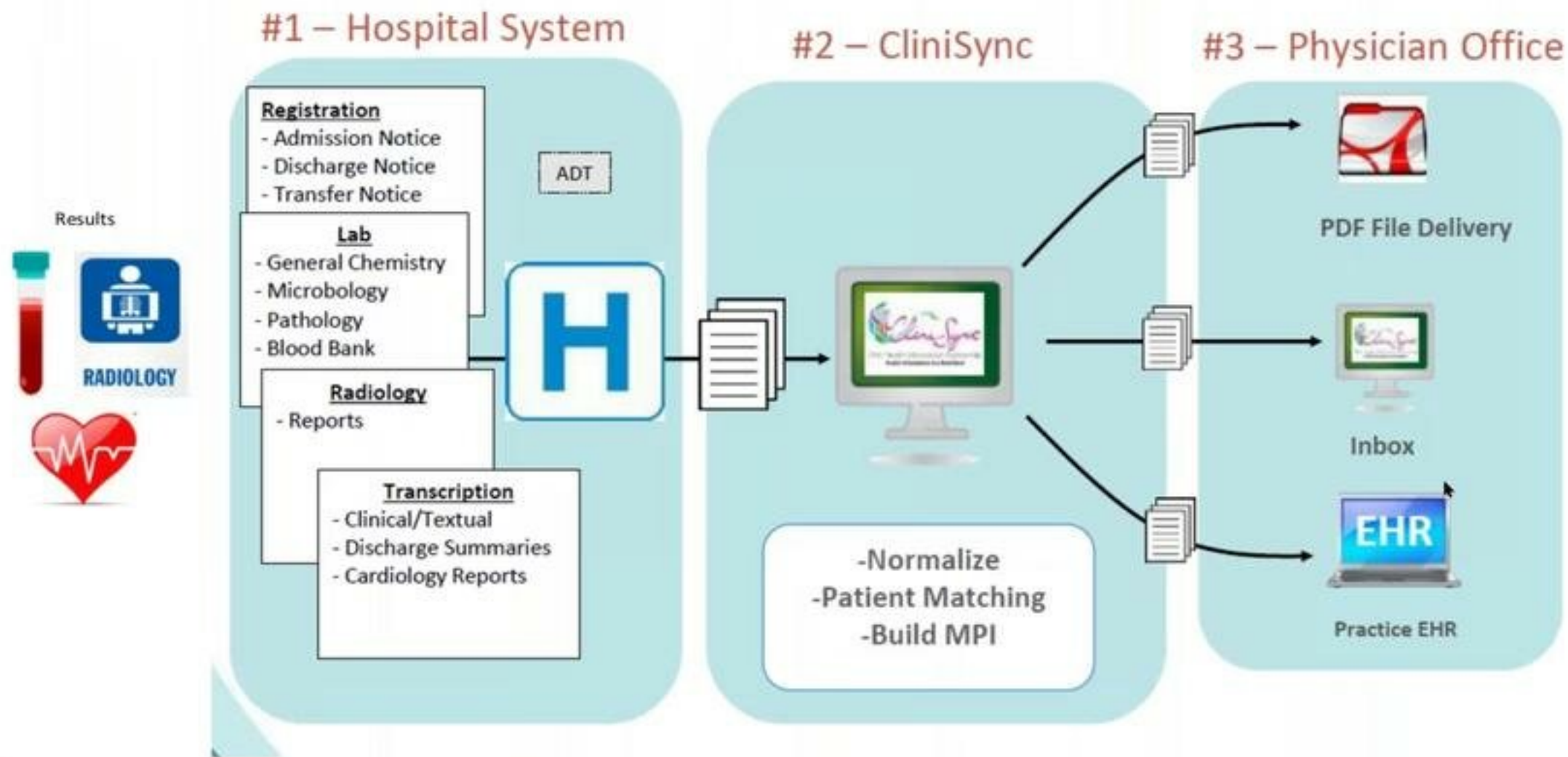
*CliniSync takes your CCD and combines it with other treating providers data to create a consolidated CCD*



**Patient data flows to the Community Health Record (CHR) to be shared with:**

- **Other treating providers**
- **Hospitals**
- **Post-Acute Care facilities**

# How the HIE Works: Results Delivery—Lab Results or Imaging Reports From Hospitals or Outside Labs







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It's a great source of information!

**[www.clinisync.org](http://www.clinisync.org)**