

Pennsylvania Health-Information Exchange
Testimony to the Senate Communications and Technology Committee
Senator Mike Folmer, Chairman

First, let me thank the committee and particularly Senators Folmer and Farnese for the opportunity to comment on this important topic.

Definition

Health-Information Exchange (HIE) – health IT that enables clinicians and patients to access information from other members of the healthcare team that work for multiple companies¹

The importance of health-information exchange (HIE) to improved healthcare:

Effective use of health IT is necessary to but not sufficient for improved quality, cost, and patient satisfaction. In particular, health-information exchange that connects all of the patient’s healthcare team (including the patient and her caregivers) is necessary if patients are to receive care that is coordinated across all venues of care.

Keystone Health-Information Exchange (KeyHIE)

Seventeen healthcare companies representing 14 hospitals, 94 clinics, and 42 long-term, post-acute care facilities in 33 Pennsylvania counties sharing information on 450,000 patients, who have given their consent to information sharing. (The only such HIE in Pennsylvania.)

According to the Office of the National Coordinator for Health IT, KeyHIE is “one of the nation’s most successful and innovative HIEs”.²

Barriers to effective health-information exchange the State can remove:

- Planning and Governance
 - Careful assessment of the needs of the entire healthcare team (including surveys and semi-structured interviews)
 - Full stakeholder representation
 - Fully transparent transactions and reporting
- Create a State provider directory (multi-disciplinary)—to enable secure clinician messaging.
- Patient Consent
 - Create a statewide opt-out policy (for patient safety and convenience).^{3, 4}
 - Failing that, create an approved form for patient consent (legally sound and readable at the sixth-grade level).
- Create a consistent policy on patient identification.
- Budgetary Discipline

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- Budget no more than the available federal funds (\$17,000,000)—and required matching funds—for the State HIE.
- Designate half of the available federal funds (\$8,500,000) for connecting resource-constrained Pennsylvania care-delivery organizations to the State HIE or to regional HIEs that are connected to the State exchange—rather than supporting multiple regional HIEs directly. (This will ensure that significant numbers of practices and hospitals (approximately 283) are connected; it would also avoid contention about what constitutes an HIE and which HIE in a region should be supported.)
- Use all existing and evolving national standards for data security (patient privacy), data transmission, and clinical content.

Geisinger's Support of a State Health-Information Exchange

While Geisinger has no interest in operating the Pennsylvania health-information exchange, we are prepared to provide information and expert opinion for the use of State leaders as they assess the business case for and design of a State exchange. We stand by our previous commitment to share the Keystone Health Information Exchange's (KeyHIE's) architecture, skills, and policies (all of which are built according to national standards) with the Pennsylvania HIE initiative, including

- Provider Directory,
- Patient Consent, and
- Patient identification.

KeyHIE can provide important near-term benefits for Pennsylvanians as well as increasing the effectiveness of the Pennsylvania HIE at such time as it is completed—without necessitating any double-work.

- KeyHIE will be connected to the National Health-Information Network (NHIN) in 2011.
- As soon as the Pennsylvania HIE is ready, a single connection to KeyHIE will connect all 150 KeyHIE facilities to the Pennsylvania HIE.

KeyHIE Background

- Designed to serve any Pennsylvania patient and any licensed healthcare professional.
 - First phase - All healthcare professionals in 42 Pennsylvania counties.

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- Active negotiation with potential members in Philadelphia and Pittsburgh.
- Low Cost Structure
 - Focus on the Information that is most important to patients and doctors.
 - No technology requirement beyond a computer connected to the Internet and the ability to create an electronic document.
 - Adapting existing IT skills and software products to the needs of health-information exchange.
- Helping hospitals and other labs translate their results into the standard language (LOINC) so that they can be shared across the country.
- Teaching the lab translation and other HIE skills in open forums across Pennsylvania.
- Working with ONC and CMS to extract the electronic Minimum Data Set (MDS) that every long-term-care facility is required to submit to CMS into the national standard format for clinical documents (CCD). This will enable us to include these facilities' information in KeyHIE (and the Pennsylvania HIE when it is completed) with no resource expenditure on the part of long-term-care facilities beyond the initial connection costs. The same service is being designed to serve the patients of home health agencies that submit OASIS data to CMS.

Geisinger IT Background

Geisinger IT provides world-class services at 75% of national benchmark costs.

References

1. Walker, J. M. (in press). Using Health IT to Improve Health Care and Patient Safety. Handbook of Human Factors and Ergonomics in Health Care and Patient Safety. P. Carayon. London, Lawrence Erlbaum Associates.
2. Stevens, L. (2011). ONC Review of Pennsylvania HIE Plan.
3. Bates, M. (2010). Statewide Health Information Exchange: Best Practice Insights from the Field. Thomson Reuters.
4. MO-HITECH Legal/Policy Workgroup (2010). Opt-in Versus Opt-out: Consent Models for Health Information Exchange through Missouri's Statewide Health Information Exchange Network.

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