



# pharmacy & 2011 technology conference

August 27 - 30, 2011 ■ Boston Convention & Exhibition Center ■ Boston, MA

**Date:** Tuesday, August 30, 2011

**Time:** 9:45 a.m. – 10:45 a.m.

**Location:** Boston Convention & Exhibition Center, Meeting Level 2, Room 257 AB

**Title:** **Health Information Exchange: How Pharmacy Can Participate**  
ACPE # 0206-0000-11-519-L03-P (0.1 CEU)

**Speaker:** Kenneth Majkowski, PharmD, Surescripts


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## **Learning Objectives:**

At the conclusion of this knowledge-based program, participants will be better able to:

- Identify the major data uses HIEs have for medication history
- Identify key components of security and privacy policies and procedures
- Discuss how pharmacy can participate in HIE strategies

Don't forget to obtain continuing education credit for your participation in this session. Instructions for processing your statement of credit online are included in your registration bag.



The Nation's E-Prescription Network

## Health Information Exchange: How Pharmacy Can Participate

### NACDS Pharmacy and Technology Conference

August 30, 2011



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## Surescripts Overview

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## Definition of E-Prescribing

**E-Prescribing supports a shift to a paperless and more informed way for payers, prescribers and pharmacists to communicate.**

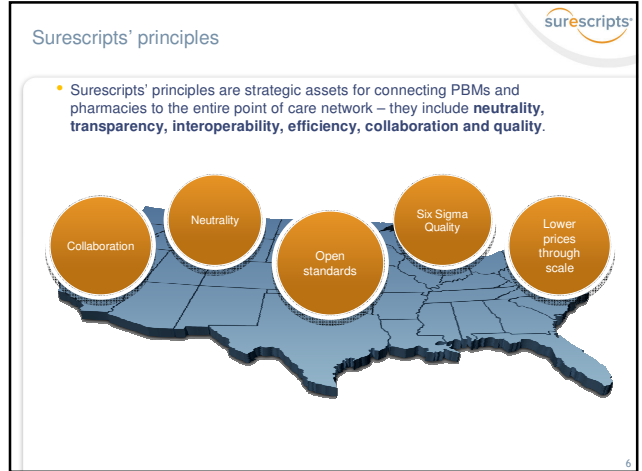
E-Prescribing occurs when a prescriber uses a computer or handheld device with software that enables him or her to:

- **Prescription Benefit**
  - Electronically access that patient's prescription benefit.
- **Prescription History**
  - With a patient's consent, electronically access that patient's prescription history.
- **Prescription Routing**
  - Electronically route the prescription to the patient's choice of pharmacy. When the patient runs out of refills, his or her pharmacist can also electronically send a prescription renewal request to the physician's office for approval.

**Improved Safety, Reduced Cost and Increased Efficiency**



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- Surescripts' objectives in engaging with and creating products for HIEs
- Align with the Surescripts mission: to improve US Healthcare by leveraging our network to lower costs and improve patient care, in this case by enabling and complementing HIEs
  - Maintain and propagate Surescripts core principles
    - Neutrality, Quality, Open standards, Transparency, Efficiency, Low Cost
  - Dovetail with Surescripts' efforts to engage local markets to improve e-Prescribing quality, adoption, and utilization
  - Help pharmacy industry lead and contribute data that enables future improvements in care coordination in most efficient manner
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## Why are HIEs important?

- \$560 million for state HIEs
  - States receive between \$4 and \$40 million
- \$250 million for Beacon Community Program
  - 17 HIEs to receive between \$10 and \$20 million
- \$643 M to Regional Extension Centers
  - To 60 Centers, over 4 years
- Private HIEs/IDNs
- HIEs are focused on driving meaningful use, including:
  - E-prescribing
  - Medication reconciliation
  - Electronic lab orders and results delivery
  - Exchanging Clinical Summaries
  - Public Health reporting
- HIEs are reaching to many parties, including to Surescripts, payers, PBMs, and pharmacies for e-prescribing and medication history connectivity
- Surescripts can be the point of connectivity on behalf of payers, PBMs, pharmacies

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## Market importance and overview

	Health Information Exchange	Regional Extension Centers	Beacon Communities	Integrated Delivery Networks / Private HIE
Funding	\$560M States between \$4M - \$40M	\$643M over a 4 year period to 60 RECs	\$220M to 23 communities	Self-sustaining
What they are	Regional entities, usually states	Newly formed entities	Regionally defined "communities" that may or may not coincide with a State HIE or REC	Mostly large IDNs or collections of IDNs
Mission	Focus on facilitating Meaningful Use	Assisting in driving physician adoption and utilization of EMR	Each have different population health goals and initiatives	Offer data sharing services within an enterprise to increase efficiencies and quality.
Surescripts Services that are relevant	E-Prescribing Med history BI Reporting Clinical Interoperability	E-Prescribing BI reporting	E-Prescribing Med history BI Reporting Clinical Interoperability	E-Prescribing Med history BI Reporting Clinical Interoperability

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## Prevailing HIE Priorities

- Promoting widespread adoption of HIE and health IT
- Focus on ePrescribing, delivery of Lab data and Clinical Summary exchange
- Enabling the delivery of specific services that will increase the quality and efficiency of healthcare, including ePrescribing, care coordination, quality reporting and other HIE services
- Fostering advanced clinical care applications that improve the health of chronically ill patients
- Using a practical, efficient approach to enable providers and hospitals to satisfy the criteria established by the Centers for Medicare & Medicaid Services ("CMS") for demonstrating meaningful use of health IT, so that they may qualify for incentive payments
- Enabling improvements in population and public health, including accurate and timely access to registries, public health reporting, and emergency preparedness
- Ensuring ongoing and broad stakeholder participation in the development of and continuous improvement in the technical and policy infrastructure supporting HIE
- Establishing the necessary protections to ensure the privacy and security of individual health information
- Advancing HIE services in a sustainable manner that contributes to the overall economic efficiency of the healthcare delivery system

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## What Products and Services does Surescripts have to offer?

### Description of Services

- **ePrescribing Engagement**-With the ONC directive for State HIEs, Beacon Communities and RECs to focus on ePrescribing, Surescripts can offer consulting services, experiences, best practice examples and tools to help communities address ePrescribing adoption and utilization
- **Medication History Services**
  - **HIE Medication History Service**- Six to twelve months of event driven medication history using our current HL7 interface delivered to an HIE Portal or Exchange. The HIE has the option of storing a copy of the medication history in a CDR for future use in population health analysis.
  - **Population Cohort Medication History Service**-Non-event driven medication histories on a select cohort of patients on a predetermined schedule. Our current HL7 medication history interface will be used to deliver this service
  - **Medication History Acute**- Clinical event driven med history primarily for medication reconciliation purposes distributed through our technology partners at either a transaction or subscription fee.
- **Business Intelligence Services**- Business Intelligence Reporting and Analytics. There is also an opportunity to provide Consulting Services within the HIE marketplace
- **Clinical Interoperability Services**

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ePrescribing Engagement  
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Medication History for HIEs


Sharing medication history with State HIEs and Beacon Communities appears to help in two ways



- 1 **Improve patient care and reduce adverse patient events by providing access to patient-specific Medication History at the point of care in non e-prescribing situations or to physicians without EMRs / EHRs**
  - Use Case 1 – Provide Medication History through an HIE portal, to be viewed by clinicians at the point of care
  - Use Case 2 – Provide Medication History to an HIE exchange, which then delivers the Medication History to clinician’s technology vendor at the point of care or through its own integrated software package
- 2 **Track public health trends by leveraging Medication History and other data (e.g. lab results, radiology reports, PHRs, and information from CCR/CCDs) to create actionable insights through population health analysis and reporting**
  - Use Case 3 – HIEs store Medication History as it travels through their portal or exchange and uses it for population health analysis
  - Use Case 4 – HIEs ask for additional Medication History on a scheduled basis for population cohorts; use case not associated with a patient event, but set-up for more systemic clinical analysis

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Proposed HIE Med History Product Matrix



Product	Standard Product Description
<b>HIE Med History Service</b>	<ul style="list-style-type: none"> <li>• Patient event look-up via HIE Portal or HIE to EMR data exchange</li> <li>• For use as display, passed on to EMR, or population health outcome and quality analysis</li> <li>• 12 Months of data</li> <li>• Fulfills Use Case #1 and #2</li> <li>• Fulfills Use Case #3 when patient event has occurred</li> </ul>
<b>Medication History for a Population Cohort</b>	<ul style="list-style-type: none"> <li>• Base-line med history data needed for Population Health, outcome and quality analysis</li> <li>• Individual queries not associated with a patient event</li> <li>• 12 months of data</li> <li>• Fulfills Use Case #3 and #4</li> </ul>

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## Critical issues to address for these new products

Our board and data sources have raised these issues



### Data Use

- How the data will be used and stored?

### Consent

- Identify the consent or notification process
- Review consent forms if available
- Document how and when consent is obtained
- Document the extent of the consent
  - All data
  - All providers
- Consent obtained for all data uses

### Security

- Mandate HITECH Security guidelines
- Address Security Policies and Procedures
- Review policy for breach
- Data in transit and at rest policies
- Data destruction policies
- Data retention policies
- Right to audit

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## Medication History to HIEs requires specific, explicit approval from our data sources



Surescripts already delivers Medication History information to the prescriber in the course of e-Prescribing and for Medication Reconciliation. However, HIEs will use Med History for additional purposes including in some cases storing the data for population health analysis. Therefore, Surescripts must get permission from data sources to:

1. Deliver Medication History on a patient-even driven basis and allow HIE to retain the Medication History for population health analysis
2. Provide a 'Medication History Population Cohort' service for HIE customers on a periodic reporting basis

Data sources will have the option of participating and must give Surescripts explicit approval before we can make their Medication History available to HIEs

Surescripts will work to obtain approvals from our data sources

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Medication History Acute  
for HIEs

## Medication Reconciliation




- JCAHO 2010 Medication Reconciliation Standards address:
  - Hospitals
  - Ambulatory Care
  - Behavioral Health
  - Critical Access Hospitals
  - Home Care
  - Long Term Care
  - Office Based Surgery

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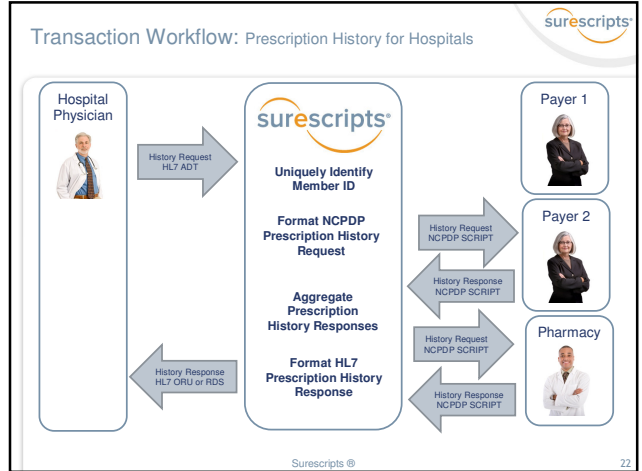
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## Medication History for Hospitals

- Provides clinicians convenient access to up-to-date medication history for patients they are treating in an inpatient setting
  - Person search
  - Dispensed claims medication history
  - Delivered to the acute care setting via strategic distribution partners (DrFirst, Emerging Health, GE Healthcare, Healthcare Systems, InterMedHx, Regenstrief, Siemens, others...)
  - HL7 Interface
    - ADT
    - RDS
    - ORU



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Business Intelligence Products for the State and Local Markets

## Today's business intelligence products

High level product overview

<b>E-Prescriber List</b> Prescriber First Name, Last Name Practice Name Practice Address, City, State, Zip Prescriber NPI or DEA E-prescribing Date	<b>E-Pharmacy List</b> Pharmacy Name Pharmacy Address, City, State, Zip Pharmacy NCPDPID Type: Chain or Independent E-prescribing Date
<b>Aggregate Summaries</b> (Transactions)	
<b>Public Health</b> Prescription Name NDC Code Zip Code CBSA, County, State	<b>Local Market Report</b> Pharmacy Landscape Prescriber Landscape Trending Data Benchmarks and Analytics

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## Surescripts provides reporting to ONC



- What is the report?
  - Prescriber Data by Zip Code and State: data tables detailing prescriber behavior regarding electronic prescriptions in every zip code/state of the United States
  - Pharmacy Data: data tables detailing e-prescribing behavior of all pharmacies within the United States
- What data may be shared with whom?
  - All data provided may be shared with ONC contractors and grantees
  - Certain national, state, and/or regional data on e-prescribing behavior may be available to the public through online dashboards

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Pharmacies Role in HIEs

## Pharmacies Role in HIEs




- What role can a pharmacy play in a local or state HIE?
  - Stakeholder
    - Steering Committee Member
    - Serve on Sub Committees
  - ePrescribing Resource
    - Local Subject Matter Expert
    - Assist with Prescription Routing Implementations
      - HIE
      - REC
    - Refill/Renewal Services
  - Data Source
    - Dispensed Medication History
      - Utilize Surescripts
      - Direct Connect
    - Adherence Messages
    - Immunization/Flu Shots Summaries to Primary Care Physicians and Public Health
    - Reporting
  - Data User
    - MTM Programs
    - Counseling patients with Chronic Disease
    - Non-medication Data
      - Diagnosis Code
      - Lab Report
      - GIC/Adherence Messaging

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HIE Considerations



## HIE Considerations

- HIE versus HIO
  - Exchange
  - Storage
  - Governance
  - Private versus Public
- Data Use
  - Use of your data as a data provider
  - Your use of data as a data user
  - Strong, Specific Contract Language
- Consent and Notification
  - Opt-In versus Opt-Out
  - Consent versus Notification
  - Policies and Procedures
  - Documentation
  - Auditable


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## HIE Considerations

- Security and Privacy
  - Data in Motion
  - Data at Rest
  - Data Retention
  - Data Destruction
  - Breach
- Business Associate Agreements
- The Technology
  - HIE Portal
  - Direct Connect
    - NCPDP
    - HL7
- The Dollars
  - Subscription fee
  - Transaction fee
  - Rev share
  - Sustainability Model

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Questions and Discussion



Thank you!