



# Using a Disaster Event as a Use Case for Health Information Exchange

**APHA Presentation** 

November 3, 2015





# **Disclosure**

- The views expressed in this presentation are the presenters and do not necessarily reflect the position or policy of the US Department of Health and Human Services
- No Relationships to Disclose

# Agenda

- HIE Overall Landscape
- Emergency Medical Services
- Connecting EMS and HIE

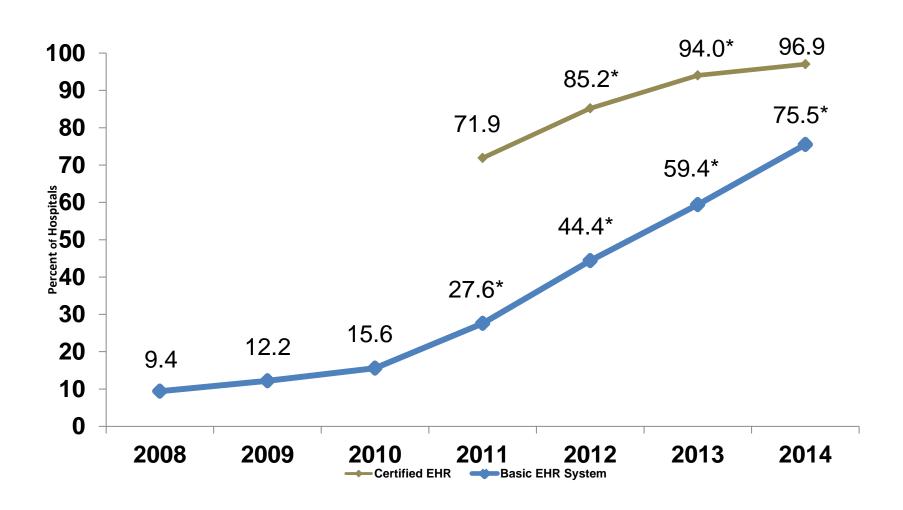
# **HIE Collaborative Goals 2010 - 2015**



- Foster exchange networks
  - Build capacity of local and affinity models
  - Reduce cost and complexity, including through shared services
  - Policies that encourage exchange
- Ensure exchange across networks + EMS
  - Every provider has at least one option for exchange
  - Governance and trust
  - Common standards to connect the nodes
  - Expand connectivity for EMS providers to connect to hospital electronic health records systems, local and regional health information exchange networks.

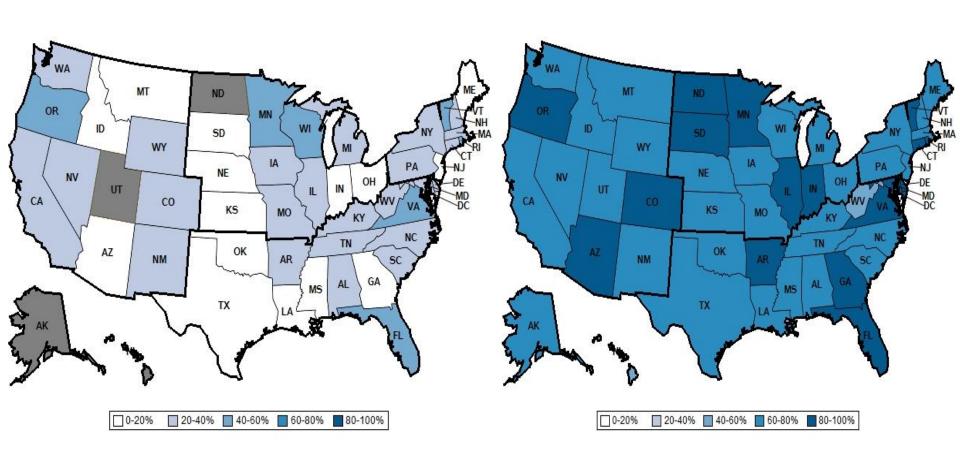
# **EHR Adoption 2008 - 2014**





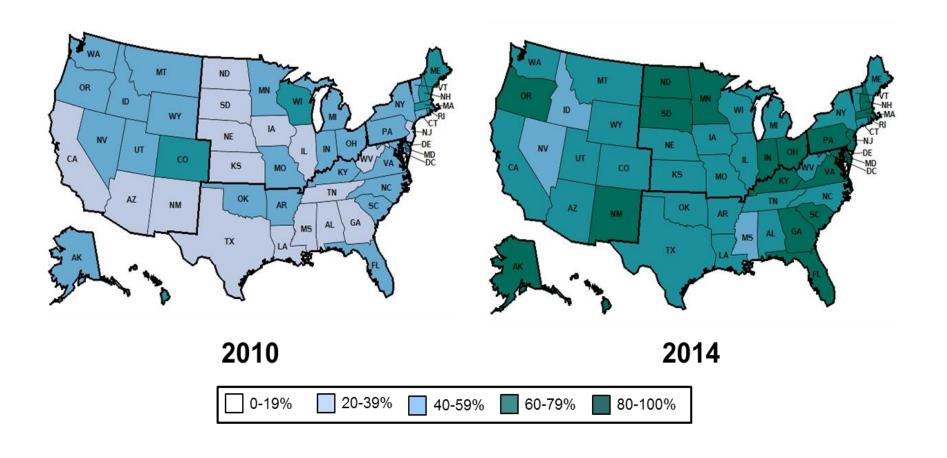
# State Adoption Rates 2011 - 2014





# **HIE Between Disparate Hospitals**

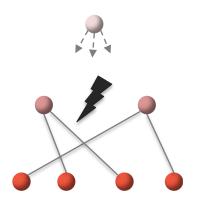




# **HIE Models**



#### **Elevator**

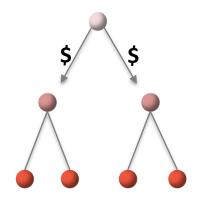


Rapid facilitation of directed exchange capabilities to support Stage 1 meaningful use

#### **Preconditions:**

- ✓ Little to no exchange activity
- ✓ Many providers and data trading partners that have limited HIT capabilities
- ✓ If HIE activity exists, no cross entity exchange

#### Capacity-builder

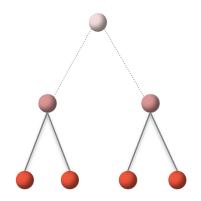


Bolstering of sub-state exchanges through financial and technical support, tied to performance goals

#### **Preconditions:**

- ✓ Sub-state nodes exist, but capacity needs to be built to meet Stage 1 MU
- √ Nodes are not connected
- ✓ No existing statewide exchange entity

#### **Orchestrator**

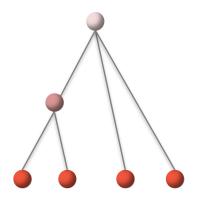


Thin-layer state-level network to connect existing sub-state exchanges. (2015 - Supports statewide EMS connectivity, query function, patient location.)

#### **Preconditions:**

- ✓ Operational sub-state nodes
- ✓ Nodes are not connected
- √ No existing statewide exchange entity
- ✓ Diverse local HIE approaches

#### **Public Utility**



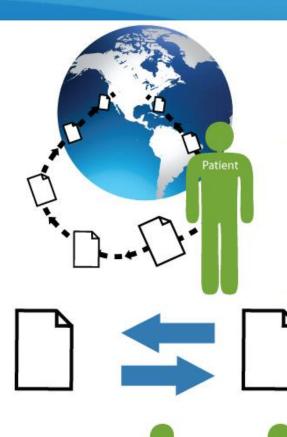
Statewide HIE activities providing a wide spectrum of HIE services directly to endusers and to sub-state exchanges where they exist

#### **Preconditions:**

- ✓ Operational state-level entity
- ✓ Strong stakeholder buy-in
- ✓ State government authority/financial support
- ✓ Existing staff capacity

# **HIE and the Patient Seek Care**





Find patient information to support unplanned care

**QUERY-BASED EXCHANGE** 

Send and receive patient information to support care coordination

**DIRECTED** 

Patients aggregate use and share their own information

CONSUMER-MEDIATED EXCHANGE

# Multiple Models







# **Emergency Medical Services**











# Preparedness and Response Shared Responsibility



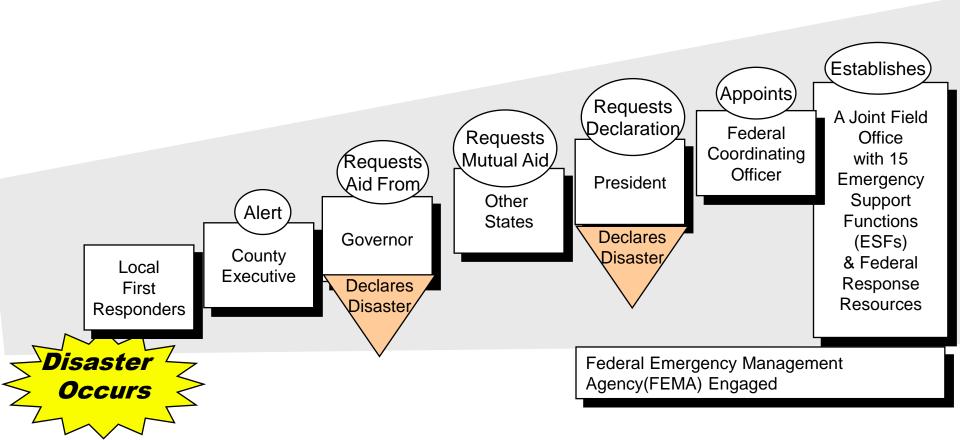
The successful delivery of daily emergency care is key to our nation's healthcare system emergency preparedness efforts





# "All Disasters are Local"





# **IDEA Lab in Action- California**



Connect HIEs (40+) so that providers and emergency responders have a way to access health information across systems.

- Improve patient health;
- Respond to disasters;
- Measure outcomes; and
- Save lives.

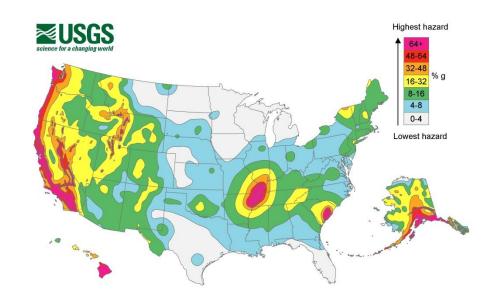


# Interoperability and national scalability

# **PULSE Use Case-Earthquake**



- 7+ magnitude earthquake in California
  - San Francisco Bay Area
    - Estimated 6 million people affected
    - 1.6 million displaced
  - Southern California
    - Estimated 5 million affected
    - 1.5 million displaced
    - The closer to Los
       Angeles up to 17.5
       million could be
       affected





# **Outcomes**



- A final report on the Patient Unified Lookup System for Emergencies (PULSE) technical requirements, use case, policy considerations, and next steps
- Letters of Intent to participate from more than 30 EMS and HIOs organizations in California
- Federal, state and local partners committed to driving PULSE forward

# Where We Are Now



- California EMS Authority has secured an Advanced HIE and Interoperability grant from ONC (through 2017)
  - Implement PULSE (connecting four HIOs)
  - +EMS to enable EMS providers on scene to exchange patient health information with local hospitals
- ONC, ASPR and NHTSA continue to provide technical assistance

# Resources

- IDEA Lab Project
- Healthit.gov
  - Blog: <u>Disaster Preparedness and HIE</u>
  - Blog: HIE Supports Disaster Preparedness and EMS
  - Blog: Expecting the Unexpected
- EMS Use Case Document
- California Project
  - Website
  - Blog

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