

THE OFFICE OF THE STATE COORDINATOR FOR HEALTH INFORMATION EXCHANGE

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State Coordinator for Health Information Exchange
Oklahoma Health Care Authority

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HIE Updates / SoonerSelect Provider Incentive Program 01/24/2024

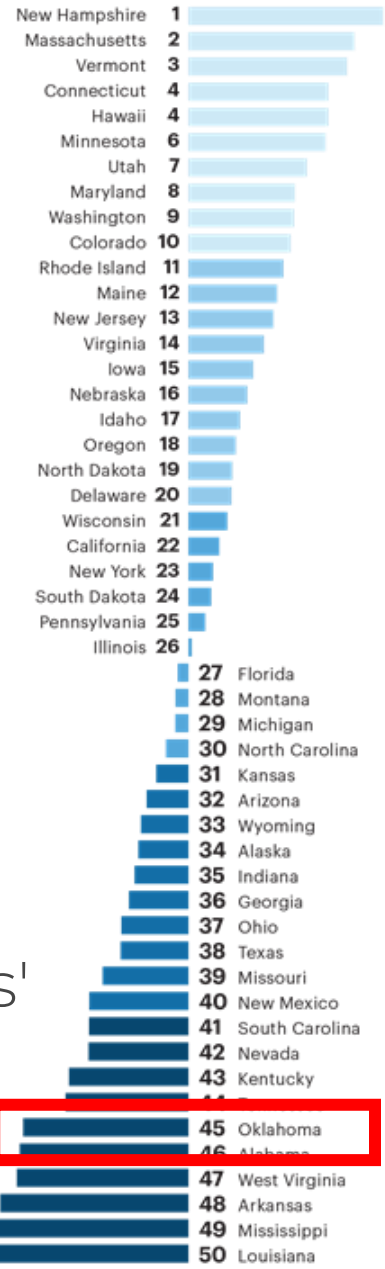


AGENDA

- Why Health Information Exchange?
- HIE Status Update, Common Questions & Framework.
- OHCA Programs for Assisting Providers
 - Connection Fee Assistance Program
 - SoonerSelect Provider Incentive Program Overview
- How to Participate
- Question & Answers
- Value for Providers
- HIE Clinical Portal Demo (If time allows)

THE PROBLEM

- Oklahoma’s health is poor
 - 45th in the nation
- Oklahoma’s health care is poorly coordinated and expensive
 - 10th highest cost in the nation
- Care coordination is a major cause
 - Lack of preventive care
 - Errors (ADE’s effect 20,000 Oklahomans annually)
 - Despite US average cancer rates overall, Oklahomans' mortality is almost 20% higher
 - Overall health care system ranking: 48th



Source: America's Health Rankings composite measure, 2022.
 *Sum of weighted z-scores across all measures included in the rankings.



WHY HEALTH INFORMATION EXCHANGE?

>90% of Oklahomans have records in more than one health care delivery system

Health Information Exchanges help ...

- Reduce health care costs associated with redundant testing, hospital readmissions, and emergency department visits
- Improve care coordination during transitions between health care settings, reduce adverse drug events and missed preventive care
- Improve patient experience and performance on quality measures
- Comply with state and federal programs such as CMS interoperability rules

Reduce errors and missed opportunities due to care fragmentation!

HIE UPDATE

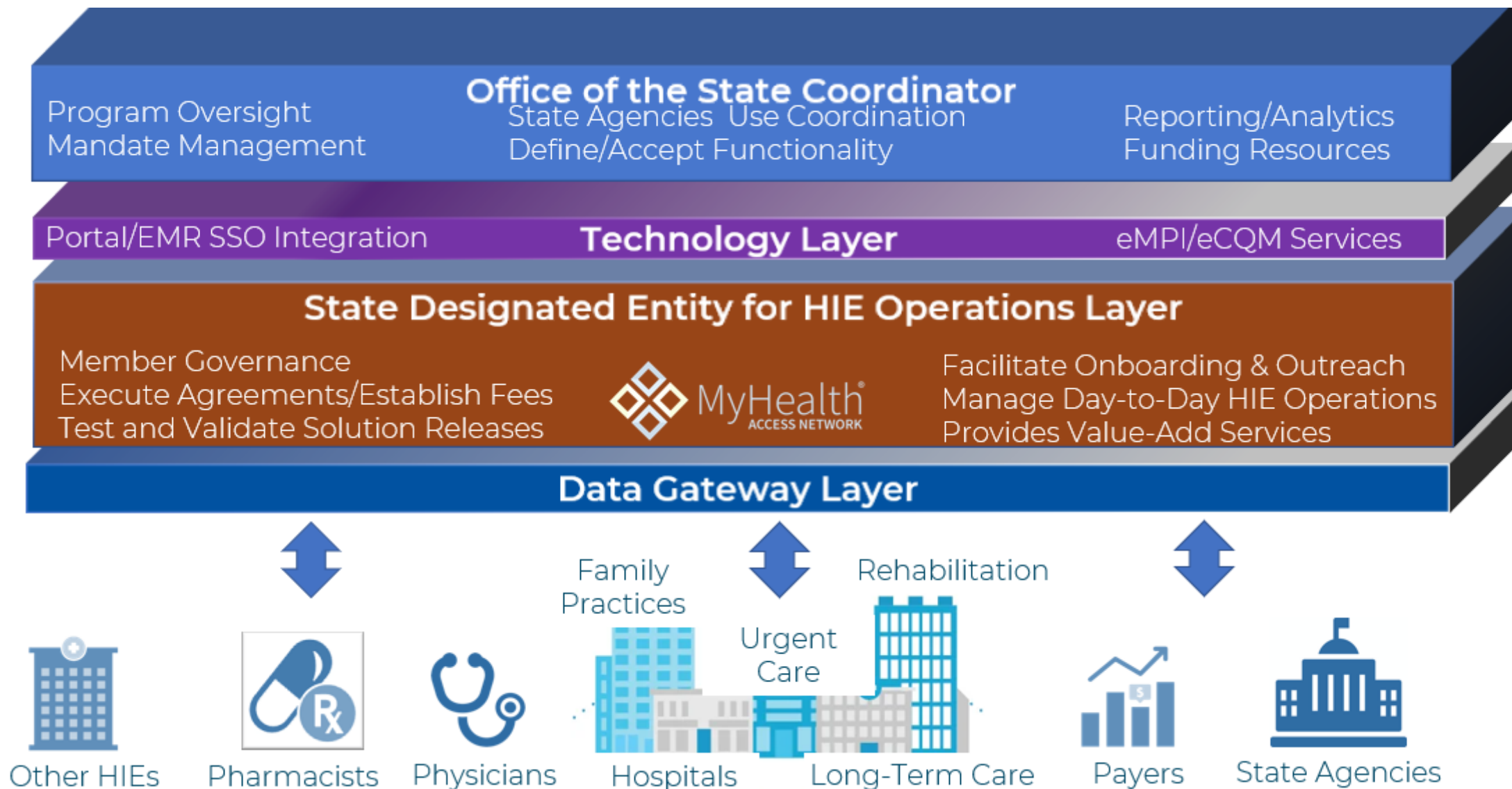


- Progress Statistics
 - Averaging >35,000 Unique Patient's records accessed monthly
 - **75% increase in Utilization from Sept 2022**
 - Over 500 organizations participate in the HIE serving patients in 1500 Locations
 - **130 Organizations joined in last Year, that's a 35% increase in membership**
 - SoonerSelect Dental & Medical MCE's Contracted with HIE Training and Connections Underway
 - Exemptions Granted: **2621**
- Join Now
 - Utilizing Connection Fee Assistance and the Directed Payments Incentive makes for a 0\$ investment for most practices!

COMMON QUESTIONS

- Providers have a choice in participation; all exemption requests will be granted
- Fees are set by the state designated entity for providers that choose to participate
 - Participation Fees vary based on Organization Type and Size
 - Connection Fees may be paid through the Connection Fee Assistance Program
- Privacy & Security
 - HIPAA Compliance: SDE HIE policies are more restrictive than HIPAA and providers must Be in a treatment relationship to access records and attest to that at the time of access
 - No Substance Abuse 42 CFR Part 2 data, or psychotherapy notes go into the HIE.
 - Providers can **mark charts** or encounters as **sensitive**, and **not sent**.
 - Security: SDE technology is HITRUST certified, 10+ years operating
- Patient Consent
 - Patients have the right to opt-out and prevent disclosure (No Break the Glass allowed)
 - Mental health patients must affirmatively consent to any data being shared by a participating provider.

HIE FRAMEWORK



USER SATISFACTION REPORTING

Net Promoter Score

Q2 2023



"I have been able to read dr notes to really understand what happened when my client does not understand"
- Clinician, Health Department

"It allows us to support patients as they are dealing with mental health concerns with us, but sometimes their medical health concerns play a role in their mental health and it's great to be able to work with and support patients addressing all of their health, not just their mental health."
- Care Manager, Behavioral Health

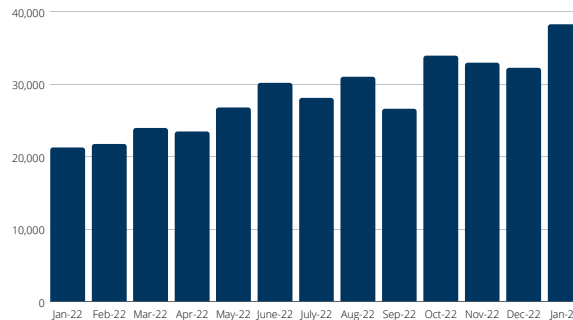
"I love MHAN to check on my clients and better help coordinate care. I have the ability to check if my clients end up in hospital networks so we can help discharge."
- Clinician, Behavioral Health

"A client came in and said they had no allergies. I was able to look and see they were allergic to multiple medications that we might have given them in our urgent care"

- Care Manager, Behavioral Health

Provider Portal Utilization

Unique patients viewed



"We have been able to find health conditions and medical concerns when assessing patients for organ/tissue donation eligibility that help us with this process tremendously!"
- Organ Procurement Organization

"Being able to access clients MyHealth records helps with giving me a better knowledge of clients health risks and being able to provide continuity of care"
- Clinician, Behavioral Health

"MyHealth helps us to find clients that are sometimes unreachable due to phone number changes/ address changes/ etc. MyHealth can help us locate clients and provide services when clients are facing difficult challenges."
- Care Manager, Behavioral Health

"I provide psychiatric care to people living with severe mental illness in the community. Many are homeless and utilize different healthcare systems in the city. Being able to access their hospital and ER records has made it possible to ensure continuity of care and prevent hospitalizations and adverse outcomes. MyHealth saves lives, it is an incredible resource for the community mental health network."

- Clinician, Behavioral Health

"Most patients can't remember their A1c so it is of great help to be able to look this information up. It is helpful for evaluating the status of glucose control while determining their diabetic retinopathy status."

- Optometrist

CHALLENGES & GOOD NEWS

- HIE participation can be expensive:
 - Data Connections: \$5k-\$10k per data feed connected
 - Ongoing Participation costs: monthly fees vary by provider type
- OHCA, and MyHealth have worked hard to reduce provider cost burden
- Two new programs available to offset MOST or ALL provider costs for HIE connection and participation
 - Connection Fee Assistance Program
 - SoonerSelect Provider incentive program

1. CONNECTION FEE ASSISTANCE

- **Legislative appropriation of \$30 million specific for HIE connection funding**
 - Any Organization that employs licensed Health Care providers in the State of Oklahoma is eligible.
 - Covers all one-time fees from MyHealth to get providers connected, other related fees may be considered
 - Funding may not always be available:
 - Projecting Connection Fee Assistance will not expend \$30 Million by 6/30/24
 - Requesting Carry-over remaining funds to FY25
 - No Guarantee funds will Carry-Over to FY25

**Secure Connection Fee Assistance now! Apply
at <https://okshine.ok.gov>**

CONNECTION FEE ASSISTANCE

[HTTPS://OKSHINE.OK.GOV](https://okshine.ok.gov)

Connection Fee Application
> Apply Now

Join the HIE Now
> Join Now

Exemption Registration
> Open Form

OKSHINE Overview

The passage of Senate Bill 1369 in 2022 changed the [laws](#) around health information exchange (HIE). The Office of the State Coordinator for Health Information Exchange was established along with the mandate for [all licensed health care providers](#) to participate in the HIE by July 1, 2023.

The Office of the Coordinator is responsible for establishing policies and procedures for the state-designated entity. The state has partnered with [MyHealth Access Network](#) as the state-designated entity. The MyHealth Access Network provides health information to flow seamlessly to and from authorized organizations in Oklahoma. The HIE's goal is to meet the needs of end users including their patients, hospitals and health systems, payers, state health departments to have secure, accurate data available at the right place, for the right purposes.

 **OKLAHOMA**
Health Care Authority

**Office of the State Coordinator
for Health Information Exchange**

OKSHINE Connection Fee Application

In an effort to advance the ability for systems to exchange health information and create more complete patient health records, the Oklahoma Legislature passed SB 32X in 2023. This bill enabled funding for a one-time connection fee for providers to connect to the Health Information Exchange through the State Designated Entity (SDE).

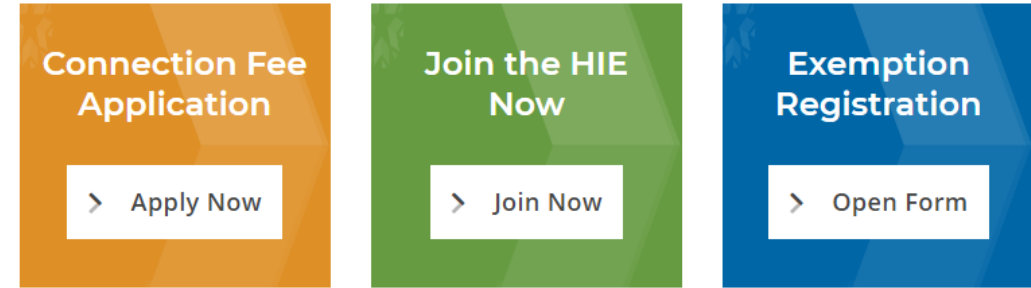
This form is to provide notice to the Office of the State Coordinator for HIE that the below health care provider requests to receive fee assistance to complete their connection to the statewide HIE.

Have you submitted an application to the State Designated Entity?

Yes
 No

GETTING CONNECTED

- Visit OKSHINE.OK.Gov
- Select:
 - **Join Now**
 - **Connection Fee Application or**
 - **Exemption Request** to begin the application process
- Complete required fields:
 - Organization Information
 - Email, etc.



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MISSION

To enhance health care delivery in

VISION

To help realize Oklahoma's goal of

2. SOONERSELECT PROVIDER INCENTIVE PROGRAM

Section 3241.3 of Title 63 of the Oklahoma Statutes, as amended by Oklahoma Senate Bill 1396 (2022), creates a new managed care provider funding pool.

- OHCA is implementing as a State Directed Payment for physicians and other qualifying practitioners pending CMS approval
- Designed to increase participation, quality, and access improvements / network
- Total Pool incentive for initial 15-month rate year = \$134,330,110
 - This pool of incentive funds will be paid out on a first come-first served basis
- Initial 15-month rate year begins April 1, 2024 and ends June 30, 2025
- Payouts will be made at the end of each quarter based on Medicaid actual reimbursements

SOONERSELECT PROVIDER INCENTIVE PROGRAM

- Eligible Provider Types:
 - Advance practice nurses, mid-level practitioners, mental health providers and licensed behavioral health practitioners, podiatrist, physician, or anesthesiologist assistant.
 - Behavioral Health Services by Mental Health professionals and Licensed Behavioral Health Practitioners at Community Mental Health Centers are excluded as they participate in a separate directed payment program.
 - Services rendered by state employed or contracted physicians are excluded as they participate in a separate directed payment program.
 - Services at Federally Qualified Health Centers, Rural Health Clinics, and IHS/Tribal clinics are excluded.
 - Services for Medicaid population not transitioning to SoonerSelect (such as ABD) are excluded

SOONERSELECT PROVIDER INCENTIVE PROGRAM

- Eligible providers can receive an estimated 28% increase in base fee schedule reimbursements for qualifying care and services.

- +18.5% base fee schedule increase for providers participating in SoonerSelect.
- +9.5% for Medicaid providers who participate in the HIE (send data & utilize) including;
 - Membership in Good Standing with Oklahoma State Designated Entity, MyHealth Access Network.
 - Live (or demonstrably in progress) Connection from the provider's EMR to the HIE.
 - To be eligible, provider must have logged into the HIE and accessed at least 1 patient chart per quarter.

SOONERSELECT PROVIDER INCENTIVE PROGRAM (CONTINUED)

- Other Incentive Payments:
 - \$25 increase payment for SBIRT screenings, after hours care, and well visits.
 - Screening, Brief Intervention and Referral to Treatment (SBIRT) screenings provide early detection and intervention to address substance use in a variety of health care settings.
 - SBIRT - HCPCS code H0049
 - After hours care for increased access to services, excluding services provided in an urgent care or hospital setting.
 - CPT codes 99050, 99051
 - Any well visit service to incentive primary care.
 - CPT codes 99381 - 99387, 99391 - 99397, 99461

DIVISION OF RESPONSIBILITY

Office of State HIE

- Select the state designated entity
- Implement laws and rules related to HIE
- Represent the state in SDE governance
- Seek funds to support providers in adopting the HIE



OKLAHOMA
Health Care Authority

State Designated Entity

- Stakeholder-governed operator of HIE
- Establish policies for data exchange and utilization
- Establish pricing for services
- Ensure patient rights are protected & data secured



MyHealth[®]
ACCESS NETWORK

SOONERSELECT PROVIDER INCENTIVE PROGRAM EXAMPLE

- Pediatrics Clinic

- 5 pediatricians, 1 nurse practitioner (6 total qualifying providers)
- Reimbursed \$50,000 each quarter through the Managed Care Organizations
- Practice Meets required criteria:
 - MyHealth Participants in Good Standing
 - Live Clinical Data Feed or in Qualifying queue status
 - Each provider has accessed at least 1 patient chart each quarter
- Quarterly Incentive Directed Payment to Practice:
 - Medicaid Provider Incentive: $\$50,000 \times 18.5\% = \$9,250$ per quarter
 - HIE Provider Incentive: $\$50,000 \times 9.5\% = \$4,750$ per quarter
 - Annual Medicaid Increase \$37,000 + HIE Increase \$19,000 for a total of \$56,000 potential annual increase
- MyHealth participation fees:
 - \$60 per provider per month $\times 12$ months $\times 6$ providers = \$4,320
- HIE Practice Net Income
 - $\$19,000 - \$4,320 = \$14,680$
 - 440% Return on Investment

ABOUT CMS DIRECTED PAYMENTS

- State Medicaid Agencies are authorized through CMS policy to make payments directly to providers who achieve pre-established milestones or performance targets
- Directed Payment Programs must be proposed and accepted annually by CMS
- Directed Payments may focus on specific activities or provider types or patient groups
- Directed Payments may be paid as fixed amounts, percentages of reimbursement for activities, etc.
- DPP's may change each year with changed incentive payments, performance goals, or providers in focus

HOW TO SIGN UP FOR SOONERSELECT PROVIDER INCENTIVE PROGRAM

1. Ensure a contract with a SoonerSelect health plan (Aetna, Humana, or Oklahoma Complete) is established
2. Complete MyHealth application at: <https://myhealthaccess.net>
3. Complete Connection Fee Assistance application at: <https://okshine.ok.gov>
4. Execute MyHealth Participation Agreement
 - Order Form electing "SoonerSelect Provider Incentive Program"
5. Provide NPI numbers for all Medicaid providers enrolled
6. Train all providers and encourage use of the HIE in appropriate settings
7. Support MyHealth in creation of data feeds and deployment

APPLICATION



[About Us](#) [Who We Serve](#) [Resources](#) [News](#) [Contact](#)

MyHealth empowers its members by providing a more complete picture of the right patient to the right provider at the right time.



Application for Participation in Oklahoma's State-Designated Entity for Health Information Exchange

Welcome to the application process for **Oklahoma's State Designated Entity for Health Information Exchange, MyHealth Access Network**. Completing this application is the first step in complying with Oklahoma's recently passed **Health Information Exchange Statutes**.

MyHealth Access Network is a non-profit Health Information Exchange (HIE) that connects healthcare providers, hospitals, and other organizations across disciplines to securely, privately, and appropriately share patients' health histories. We provide a platform for collaboration among providers through the use of innovative healthcare technology

Participation in the MyHealth Access Network provides you with the tools to:

- **Improve** quality of patient care and outcomes,
- **Promote** patient safety by reducing medication and medical errors,
- **Securely** and **efficiently** access patient medical records, laboratory results and other critical health information in real-time,
- **Enhance** patient's experience and ability to take control of their own health,
- **Strengthen** care coordination and streamline communication between healthcare settings, and
- **Reduce** health related costs associated with redundant testing, hospital admissions and emergency

Welcome to MyHealth.

MyHealth Access Network links more than 4,000 providers and their patients in a community-wide health information system that will help providers better monitor and improve care to:

- Reduce health care costs associated with redundant testing, hospital admissions, and emergency department visits
- Improve care coordination during transitions between health care settings
- Improve patients' experience and ability to take control of their own health
- Improve quality care for the state of Oklahoma and its nearly 4 million patients
- Bring community leaders and organizations together to utilize health information in meaningful ways to improve community care

[Learn More](#)

[Apply to Join](#)



First Name *

Last Name *

Email *

Organization Name *

Brief Description of Business Services

Address *

Address 2

Additional Resources:

[Training](#) >

[News](#) >

[FAQ](#) >

[How to Opt Out](#) >

OSDH and MyHealth Announce Partnership to Improve Flow of Vaccination Data

OKLAHOMA CITY - The Oklahoma State Department of Health (OSDH) and MyHealth Access Network have announced a partnership to improve the flow of vaccination data.

TIMELINE FOR DPP: KEY DATES



April 2024	June 30, 2024	July 1, 2024	July 2024	June 30, 2025
Clock starts on DPP Q1 Payment Opportunity.	Close of FY 2024 Q4 MyHealth will submit report of all Provider NPI's whose organizations are in good standing and who have accessed at least 1 chart during the quarter.	DPP FY2025 Q1 begins	DPP FY 2024 Q4 payments made to providers	DPP FY 2025 Q4 ends, MyHealth reports to OHCA

QUESTIONS?



HIE VALUE FOR PATIENTS & CAREGIVERS

- ▶ Reduced errors in care
 - 20,000 Oklahomans suffer avoidable adverse drug events annually
 - Preventive care alerts
- ▶ Speed access to care
 - Definitive diagnosis and treatment without waiting for records
 - Social needs detected and addressed in real time
- ▶ Reduce costs and burden
 - Reduced copays from unnecessary visits and testing
 - No need to request or pay for records to carry in paper form

HIE VALUE FOR HEALTH CARE PROVIDERS

- ▶ Reduced provider burden
 - Find and access records immediately for multiple use cases:
 - New patient, new prescription, emergency, pre-op, close referral loops
 - Reduce staff burden on providing records to others, as well as accounting of PHI disclosures
- ▶ Level playing field for rural and independent providers
 - Access to all necessary data for shared patients
 - Assurance that access is secure and compliant
 - Access to advanced services, like alerting, SDoH screening
- ▶ Performance in risk- and value-based payment models
 - Alerting to preventive care gaps and quality performance opportunities
 - Alerting to follow-up opportunities (hospital/ER discharge, etc.)

WHY AN HIE

- Improved care coordination
 - Enhanced Assessment
 - Close Gaps in Care
 - Enable better Follow-Up
 - Enhance Care management
- Reduced costs of care
- Address Social needs
- Quicker access to care and services



**THE HIE PROVIDES A PATH TO HEALTHIER
OUTCOMES FOR OKLAHOMANS**



OKLAHOMA

Health Care Authority

Contact Us:

Stephen Miller, CHCIO
State Coordinator for
Health Information Exchange
okshine@okhca.org
405-522-7458

David Kendrick, MD, MPH, FACP
Chief Executive Officer,
MyHealth Access Network
myhealth@myhealthaccess.net
918-236-3434

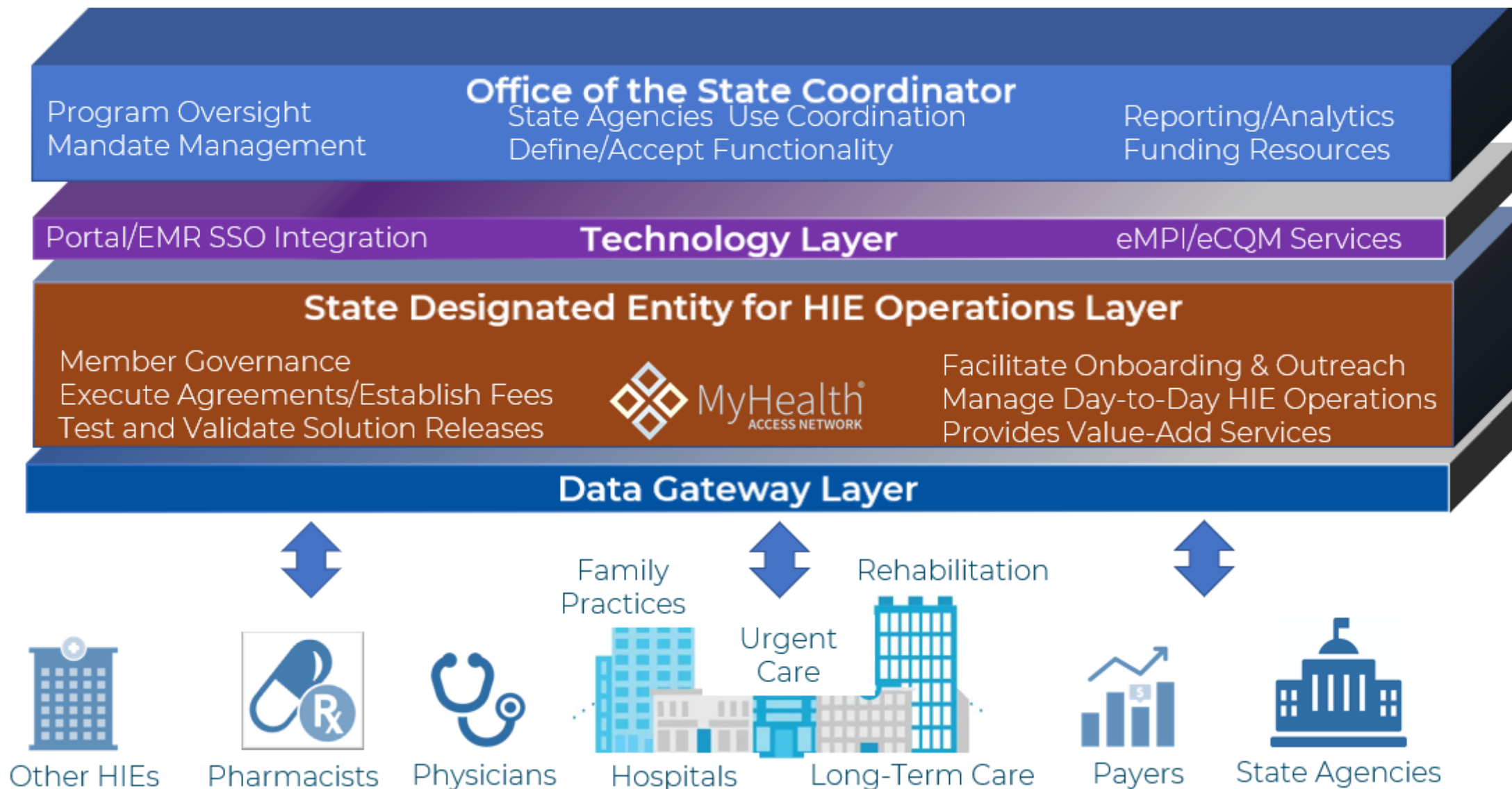
OKSHINE.Oklahoma.gov
Phone: 405-522-7458
Email: okshine@okhca.org



Appendix



HIE FRAMEWORK



DIVISION OF RESPONSIBILITY

Office of State HIE

- Select the state designated entity
- Implement laws and rules related to HIE
- Represent the state in SDE governance
- Seek funds to support providers in adopting the HIE

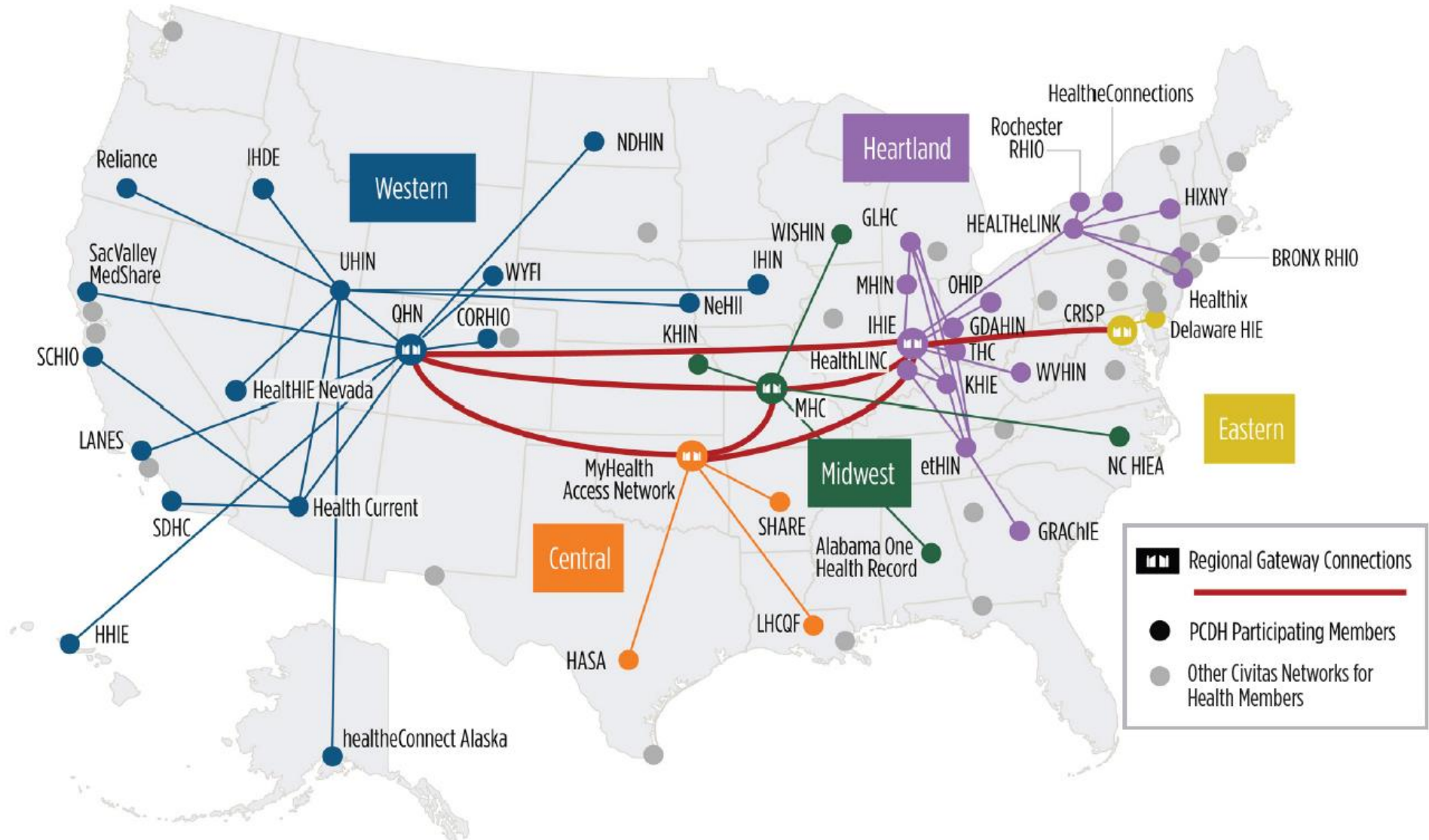


State Designated Entity

- Stakeholder-governed operator of HIE
- Establish policies for data exchange and utilization
- Establish pricing for services
- Ensure patient rights are protected & data secured



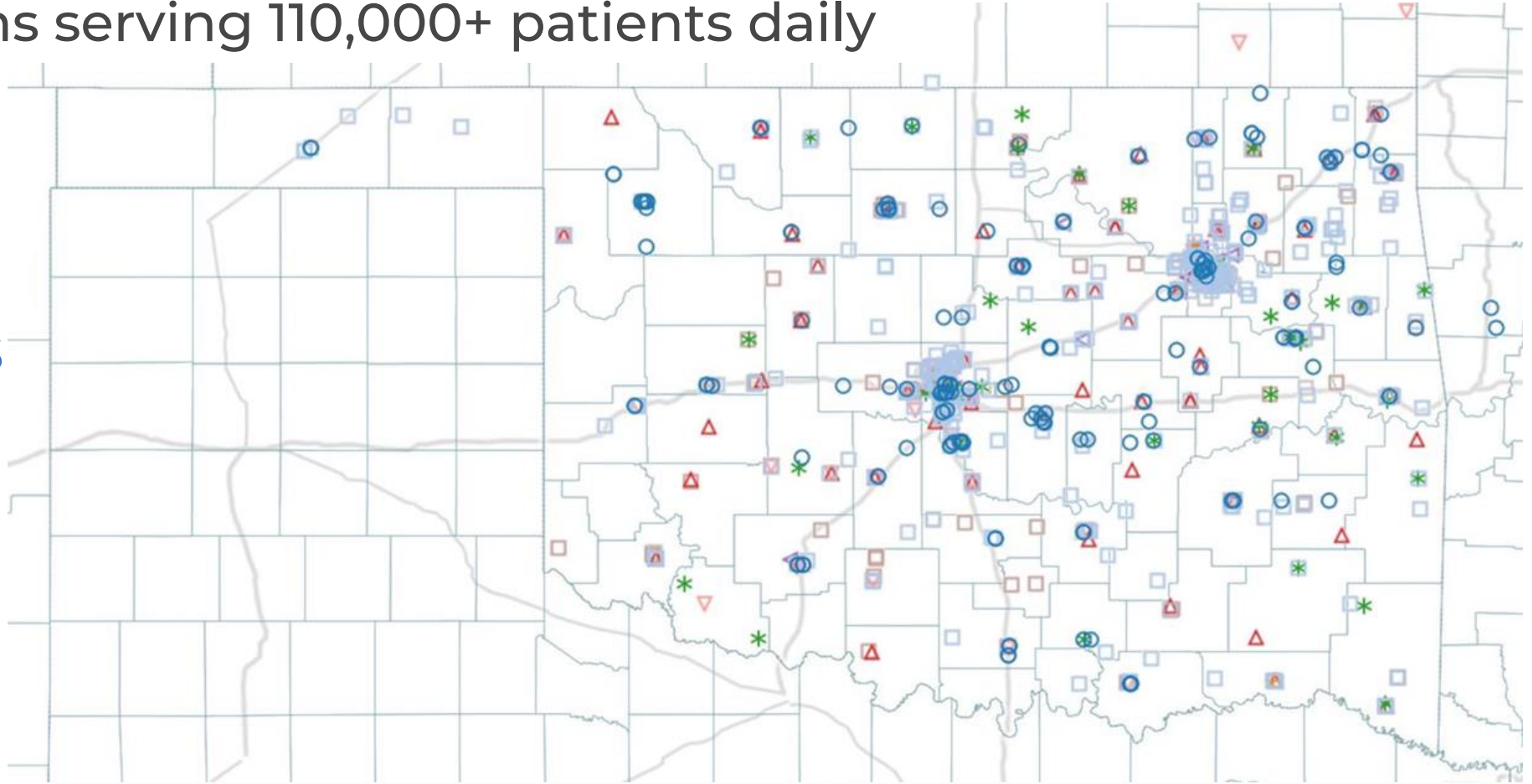
WHO ELSE IS DOING HIE?



CURRENT HIE COVERAGE

1500+ locations serving 110,000+ patients daily

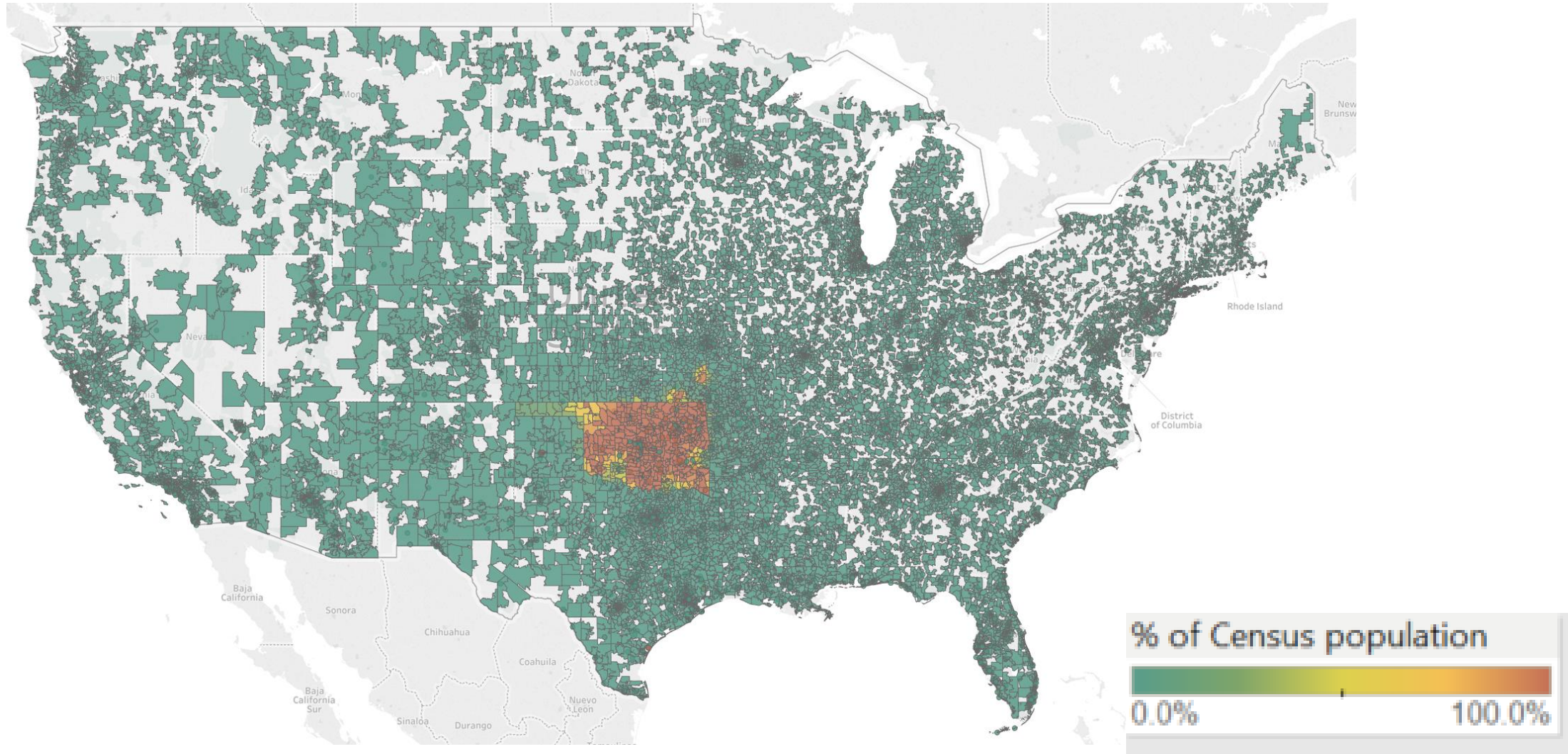
>500
Organizations
already
connected



Facility Type				Facility Type			
Null	Emergency Services	Lab	Pharmacy	Null	Emergency Services	Lab	Pharmacy
Behavioral Health...	FQHC	Long Term Care ...	Public Health	Behavioral Health...	FQHC	Long Term Care ...	Public Health
Clinic	Hospice	Ophthalmology/Op...	Urgent Care Facility	Clinic	Hospice	Ophthalmology/Op...	Urgent Care Facility
Community/Social...	Hospital	Payer		+ Community/Social...	Hospital		



OKLAHOMA HIE PATIENT POPULATION



CAPABILITIES



Care Coordination/
Records Aggregation



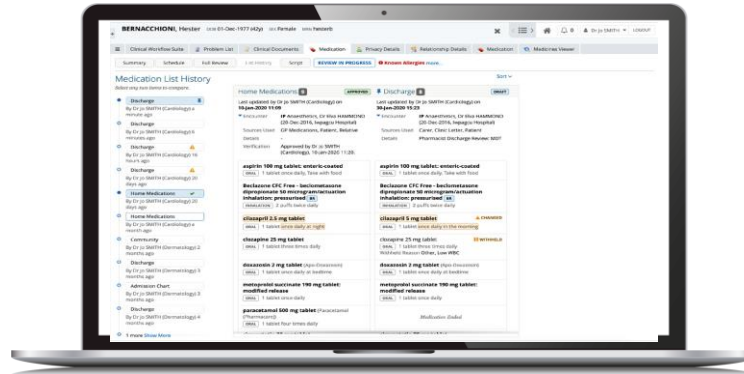
Direct
Messaging



Quality/Care
Gap Mgmt.,



Clinical and
Claims
Data Integration



Portal & EMR Integrated Access



Provider and
Relationship Registry



Public Health
Reporting



Real-time
Notifications (CoP)
Care
Fragmentation
Reporting



PROVIDER PORTAL



Patient Charts

Mouse, Mickey (F, 71)
DOB: 10/02/1950

Address: 1000 WHITE HOUSE, BRIDGETON, MO 63044, USA
Mobile: +1-580-222-5555
Home: +1-314-777-9311

WC CCSI
WC CCSI
WC CCSI

Summary

Encounters

Encounter Type	Admit - Discharge Dates	Source
Ambulatory	03/03/2022 00:00 - 03/03/2022 00:00	SSM Health Care - Hospital
Ambulatory	01/11/2022 00:00 - 01/11/2022 00:00	SSM Health Care - Hospital
Ambulatory	01/10/2022 00:00 - 01/10/2022 00:00	SSM Health Care - Hospital
Ambulatory	01/04/2022 00:00 - 01/04/2022 00:00	SSM Health Care - Hospital
Ambulatory	11/30/2021 18:44 -	SSM Health Care
Ambulatory	10/28/2021 10:40 - 10/28/2021 10:55	SSM Health Care - Hospital
Ambulatory	10/28/2021 10:36 -	SSM Health Care
Ambulatory	10/28/2021 00:00 -	SSM Health Care
Ambulatory	10/21/2021 00:00 - 10/21/2021 00:00	SSM Health Care - Hospital
Ambulatory	10/20/2021 00:00 - 10/20/2021 00:00	SSM Health Care - Hospital
O/p	10/12/2021 10:51 -	SSM Health Care
O/p	10/12/2021 00:00 -	SSM Health Care
Ambulatory	10/12/2021 00:00 - 10/12/2021 00:00	SSM Health Care - Hospital
O/p	09/28/2021 10:47 -	SSM Health Care
O/p	09/28/2021 00:00 -	SSM Health Care
Ambulatory	09/28/2021 00:00 - 09/28/2021 00:00	SSM Health Care - Hospital
Ambulatory	09/20/2021 00:00 - 09/20/2021 00:00	SSM Health Care - Hospital
Ambulatory	08/31/2021 00:00 - 08/31/2021 00:00	SSM Health Care - Hospital
Ambulatory	08/20/2021 00:00 - 08/20/2021 00:00	SSM Health Care - Hospital
Ambulatory	08/13/2021 13:43 - 08/13/2021 14:03	SSM Health Care - Hospital

Problems

Problem/Condition	Code	Onset Date	Status	Source
Displaced fracture of proximal phalanx of left index finger, initial encounter for closed fracture	ICD-10 S62.611A	10/28/2021	Active	SSM Health Care
Unspecified chronic conjunctivitis, unspecified eye	ICD-10 H10.409	10/28/2021	Active	SSM Health Care
Acute pharyngitis, unspecified	ICD-10 J02.9	10/28/2021	Active	SSM Health Care
Gastro-esophageal reflux disease without esophagitis	ICD-10 K21.9	10/12/2021	Active	SSM Health Care
Gastro-esophageal reflux disease without esophagitis	ICD-10 K21.9	09/28/2021	Active	SSM Health Care
Encounter for general adult medical examination without	ICD-10 Z00.00	08/13/2021	Active	SSM Health Care

Immunizations

Immunization	Administered Date
FLU VACCINE INV INC ANTIG PF IM	10/07/2020 00:00
FLU VACCINE QUAD INVA PF ID	11/09/2018 00:00
FLU VACCINE QUAD INVA SPLIT PF IM	11/09/2018 00:00

Value Proposition:

- Find the most complete records immediately.
- No need to read separate documents from every org.
- Close loops on referrals.

HIE LEGISLATIVE SUMMARY

SB 574 (May 2021)

- Created the **Oklahoma State Health Information Network Exchange (OKSHINE)**.
- Rules created and passed legislature and governor

SB 1369 (May 2022)

- Created the **Office of the State Coordinator** for Health Information Exchange
- Designated that a health information exchange organization be named **state-designated entity** for health information exchange (operations) – MyHealth Access Network
- Declared a mandate that “all licensed providers” participate in the statewide HIE **by July 1, 2023**.
- Coordinator may promulgate rules (via board approval) that include exemptions
- (March 2023) Final rule adjusted based on comments to increase exemption eligibility - board passed
- (June 2023) Defaulted to governor for approval - he disapproved with suggested revisions
- **(August 2023) New Emergency Rules passed by OHCA Board & Governor – All providers requesting exemptions will be granted, also providers are now defined as the Organization who employ them.**

SB 32X (June 2023)

- Legislative appropriation of **\$30 million specific for HIE connection funding through** grant application
 - Any Organization that employs licensed Health Care providers in the State of Oklahoma is eligible.
 - Covers all one-time fees from MyHealth to get providers connected, other related fees may be considered
 - **Connection Fee Assistance is now Available apply at <https://okshine.ok.gov>**

HIE EMERGENCY RULE CHANGES

- Broad exemptions that allow any provider seeking an exemption to be granted one;
- Refined and added definitions; HIE, OKSHINE, Provider (Organization)
- Clarifications on required participation
- Adherence to state and federal law regarding patient disclosure and consent
- Defined fees, including participation fee, connection fee, and reiterated grant for connection fees