



# The Office of the National Coordinator for Health Information Technology

## Ohio Health Information Technology Strategic and Operational Plan Profile

### Overview

With nearly 11.5 million residents, Ohio is the country's 7<sup>th</sup> most populous state and has a geographic position linking the Northeast with the Midwest. It is also within a one-day drive of 50% of the US population and 70% of the country's manufacturing capacity. Roughly 65%, or 57 out of 88, of Ohio's counties are formally designated as rural, Appalachian, or underserved. Ohio has chosen to focus their Regional Extension Center (REC) and Health Information Exchange (HIE) efforts on this portion of the state, as it constitutes their most significant capacity gap. Additionally, outside what is supported by HealthBridge in the greater Cincinnati area, almost no HIE activity is occurring between unaffiliated organizations in Ohio. To meet the tremendous needs of as many providers as possible across the state, Ohio will begin with a Direct Project secure messaging strategy. This strategy initially includes core services, but will build out more complex HIE capacity over time. The state has designated Ohio Health Information Partnership (OHIP), the non-profit organization, to receive the State HIE Cooperative Agreement funds that support this work, as well as oversee implementation of the state plan. OHIP also serves as the REC for the majority of the state.

### Model and Services

In the first phase, OHIP will work with their stakeholders to develop an authoritative provider directory and Health Information Service Provider (HISP) services to support secure messaging. These HISP services will use Nationwide Health Information Network (NwHIN) Direct Project protocols. OHIP will leverage information obtained through multiple databases, including information from REC recruitment, state medical associations, and state licensing boards, to develop the provider directory. This will be the authoritative provider directory for the state and all Ohio providers, hospitals, and labs will have the opportunity to utilize it at no charge. Because OHIP is also the REC for most of Ohio, they are uniquely positioned to leverage their REC outreach efforts with providers and EHR vendors across the state.

OHIP has already developed a regional partner network that covers the state, including coordination with HealthBridge, the REC responsible for the greater Cincinnati area. OHIP will use this infrastructure to effectively reach providers with technical assistance and information about the core services developed to support their Phase I strategy. OHIP will apply lessons learned from their Phase I efforts to expand the provider directory into an authoritative, statewide master entity directory; develop a master patient index; record locator service; and enhanced public health connectivity that would support longitudinal record exchange in the future. As they embark on their HIE service development, they will also explore potential convergence points of clinical and administrative exchange processes.



**State:** Ohio

**Interim HIT Coordinator:**  
Bob Campbell

**State Designated Entity:**  
Ohio Health Information Partnership (OHIP)

**Award Amount:**  
\$14,872,199

**Contact:**  
Dan Paoletti, CEO, OHIP  
[danp@ohanet.org](mailto:danp@ohanet.org)  
614-221-7614

**Website:**  
<http://www.ohionline.org>

**Other Related ONC funding in Ohio:**

- Ohio Health Information Partnership Regional Extension Center (REC): \$28,500,000
- HealthBridge Inc. Regional Extension Center (for select areas in Ohio, Indiana & Kentucky): \$9,738,000
- Greater Cincinnati Beacon Community: \$13,775,630



## Highlights

- **Commitment to Focus on Neediest Geography of State.** OHIP has committed to devoting its primary attention to the greatest HIE gap within their state – the Appalachian and other rural communities. In concert with a clear and coordinated REC focus, OHIP stands to help these communities make significant improvements in the tools and organizations used to provide care to the state’s neediest residents. Without OHIP’s dedication to these communities, their providers may not be able to achieve meaningful use of HIT.
- **Beacon Award.** OHIP has an opportunity to learn from and develop HIE services that complement the work of the Greater Cincinnati Beacon Community.
- **Open Provider Directory.** To fully enable a statewide HIE, OHIP will develop a broadly available provider directory that can serve multiple known and emerging needs. OHIP’s directories will contain a broad complement of information for health care providers ranging from physicians, long-term care providers, and labs.



# Meaningful Use

	<u>Landscape</u>	<u>Strategy</u>
<u>E-Prescribing</u>	<p>1.3% (or 30 total) community pharmacies do not accept electronic prescriptions (primarily independent pharmacies and small pharmacy chains).</p> <p>Due to stringent regulation by the state's board of pharmacy, many providers with eRx capabilities have not turned on this functionality in their systems or simply do not use it.</p>	<p>OHIP will work with their regional partners and eRx Task Force to conduct targeted outreach and education to these 30 pharmacies. They will identify why the pharmacies are not currently accepting electronic prescriptions and work with them to resolve their issues. OHIP will track the ongoing success of their eRx adoption.</p> <p>OHIP will work with their REC side and their eRx Task Force, which includes the State's Board of Pharmacy, to increase provider adoption of certified EHRs with eRx capability. They will also ensure that both the adoption and use of eRx is consistent with the state's board of pharmacy requirements. OHIP will work to help providers that have not turned on this functionality to enable and use it in a certified manner.</p>
<u>Structured Lab Results</u>	<p>Although 90% of clinical labs in Ohio can currently support the electronic exchange of lab results, the majority of results are still delivered in a manner not fully integrated with the physicians' EHR systems.</p> <p>Majority of gap area is served by the 69 hospital-based laboratories inside Critical Access Hospitals (CAH) or other rural or underserved community hospitals (constitutes ~30% of total lab volume in the state).</p>	<p>OHIP will promote their open provider directory and HISP services among all labs in the state to enable the use of Direct protocols for structured lab results delivery.</p> <p>OHIP will focus their intensive efforts on the 69 hospital-based labs within their priority gap area. They will use the results of their REC's intensive laboratory systems analysis within these hospitals (funded through an REC CAH supplemental grant program) to create and offer the most appropriate translation and routing services possible for these hospitals.</p> <p>OHIP will work with the Ohio Dept of Health (ODH) to facilitate reportable electronic lab results delivery to ODH. OHIP will also provide education and communication to laboratory directors regarding CLIA/CAP requirements for validating clinical laboratory results exchanged electronically.</p> <p>ODH is developing a hospital reportable lab tool to harmonize LOINC crosswalk with CDC's reportable lab tool. ODH is also working with Surescripts to collaborate on CDC Reportable Lab Grant funding for educational events, outreach, and provider efforts.</p>
<u>Patient Care Summary</u>	<p>Some exchange among unaffiliated organizations is occurring via HealthBridge in the greater Cincinnati area and within IDNs, but no other care summary exchange across unaffiliated organizations is occurring in the state.</p>	<p>OHIP will encourage the use of the Direct Project protocols among providers and EHR vendors across the state to ensure secure messaging that supports patient care summary exchange. First, however, they will focus on their priority gap areas.</p> <p>OHIP will offer the tools to support Direct for free, but will charge a minimal subscription fee if providers choose to have OHIP manage patient consent.</p>



# HIE Inventory

Standards		Quality Improvement	
Nationwide Health Information Network Exchange Specifications	<b>X</b>	Care Coordination	<b>X</b>
Nationwide Health Information Network CONNECT	<b>X</b>	Quality Reporting	<b>X</b>
Nationwide Health Information Network DIRECT	<b>X</b>	Behavioral Health Information Exchange	<b>X</b>
Plans to exchange with federal agencies or other states via Nationwide Health Information specifications	<b>X</b>		
<b>Public Health</b>		<b>Lab Strategy</b>	
Electronic lab reporting of notifiable conditions	<b>X</b>	Translation services	<b>X</b>
Syndromic surveillance	<b>X</b>	EHR interface	<b>X</b>
Immunization data to an immunization registry	<b>X</b>	Policy strategy	
<b>Patient Engagement</b>		Order Compendium	
Patient Access/PHR	<b>X</b>	Bi-Directional	<b>X</b>
Blue Button			
Patient Outreach	<b>X</b>	<b>E-Prescribing</b>	
<b>Privacy and Security</b>		Alignment with CLIA	<b>X</b>
Privacy and Security Framework based on FIPS	<b>X</b>	Medication History	<b>X</b>
Individual choice (Opt In/Opt Out/hybrid)	<b>Hybrid</b>	Incentive or grants to independents	
Authentication Services	<b>X</b>	Plan for controlled substance	
Audit Log	<b>X</b>	Set goal for 100% participation	<b>X</b>
<b>Administrative Simplification</b>		Controlled substance strategy	
Electronic eligibility verification	<b>X</b>	<b>Care Summaries</b>	
Electronic claims transactions	<b>X</b>	Translation services	<b>X</b>
<b>Vendor</b>		CCD/CCR Repository	
Planning		<b>Directories</b>	
Core Services	<b>Medicity</b>	Provider Directory	<b>X</b>
<b>Plan Model</b>		Master Patient Index	<b>X</b>
Identified model(s)	<b>Elevator</b>	Record Locator Services	<b>X</b>
		Health Plan Directory	<b>X</b>
		Directory of licensed clinical laboratories	<b>X</b>

Information for this profile was obtained from the approved Operational and Strategic Plan submitted to the National Coordinator for Health Information Technology as a condition of the Health Information Exchange Cooperative Agreement. The complete plan can be downloaded at:  
[www.statehieresources.org](http://www.statehieresources.org)



Office of the National Coordinator for Health Information Technology  
 State Health Information Exchange Cooperative Agreement Program  
<http://HealthIT.hhs.gov>  
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