

The Office of the National Coordinator for Health Information Technology



Health Information Exchange Strategic and Operational Plan Profile

Overview

Iowa's approach builds on a highly collaborative planning and stakeholder contribution process to establish the vision, guiding principles and goals of a comprehensive statewide health IT planning effort. The 2007 Iowa Commission on Affordable Health Care Plans for Small Businesses and Families reviewed, analyzed, and made recommendations on a broad spectrum of issues relating to the affordability of health care for Iowans, including health IT. In 2008, based on the Commission's recommendations, the Iowa legislature formed the e-Health Executive Committee and Advisory Council under the direction of Iowa Department of Public Health (IDPH). The multi-stakeholder collaborative to promote health IT is known as Iowa e-Health.

The IDPH, the state's designated entity for HIE, coordinated with other stakeholders, the Iowa Regional Extension Center (REC) and Iowa Medicaid Enterprise (Iowa Medicaid), to ensure providers have at least one option for meeting meaningful use requirements by the start of the incentive payment program in 2011. Iowa brings a high level of provider integration with three large health care systems with fully functional EHRs and two broadband systems which cover the entire state.

Iowa's approach is to directly offer services through a statewide HIE. This includes NwHIN Direct messaging to enable secure connectivity between provider EHRs, laboratory LISs, and other clinical information systems, and a statewide authoritative directory available to all providers.

Model and Services

Iowa will follow a two phased approach to enable HIE across the state, first as a Health Information Service Provider (HISP) to support secure messaging using NwHIN Direct protocols, and to assist existing EHR-to-EHR exchange to send and receive NwHIN Direct-compliant messages through their EHR using secure Simple Mail Transfer Protocol (SMTP) transport. This service will also include laboratory results reporting and summary of care documents in the CCD format.

Iowa will also commence a number of pilot projects between health system EHRs, providers, labs and pharmacies in order to measure progress in preparation for phase two of the statewide HIE adoption effort.

In the second phase through its collaborative stakeholder process, Iowa will provide enhanced features and services to qualified physicians, laboratories, pharmacies, public health and other health service providers.

Anticipated services include electronic submission to public health registries, bi-directional pharmacy and lab communication, expanded privacy, security and consent services, and tools for evaluation and quality assessment.



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

State:
Iowa



HIT Coordinator:
Kim Norby

State Designated Entity:
State of Iowa E-Health/ Iowa
Department of Public Health

Award Amount: \$8,375,000

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**Other Related ONC funding in
Iowa:**
IFMC Health Information
Technology Regional Extension
Center (REC) \$5,508,019

Highlights

- **Provider Health Systems Integration:** Assets and achievement of health IT reflects a high level of provider integration with existing health systems, with two large provider settings with the Health Information Management Systems Society (HIMSS) Stage 6 EHR adoption effort, two large broadband networks providing network connectivity to providers throughout the state, and several examples of information exchange among Iowa's providers. Some of these assets and achievements include:
 - **Iowa IFMC REC** providing technical assistance to 1,200 primary care providers and critical access hospitals
 - **University of Iowa Hospital and Clinics (UIHC)** employing a CCHIT and HIMSS Stage 6 certified EHR
 - **Mercy Health Network North Iowa** serving as a rural referral hospital with an integrated comprehensive EHRs system, one of the first in the U.S. in rural health care setting.
 - **Genesis Health System** utilizing a completely paperless inpatient EHR
 - **Iowa Health System (IHS)** using EHRs across inpatient and outpatient environments



Meaningful Use

	<u>Landscape</u>	<u>Strategy</u>
<u>E-Prescribing</u>	<ul style="list-style-type: none"> • 16% (2,813,116) of prescriptions were routed electronically in Iowa during 2009.¹ • Up to 18% of Iowa providers have e-Prescribing capability (2010).² • 63% of pharmacies can accept e-Prescriptions. (2010)² 	<ul style="list-style-type: none"> • Education and outreach to both pharmacies and providers • The REC will work with each provider implementing an EHR to identify which pharmacies that they need to be connected to and encourage those pharmacies to participate if they are not already. This very tactical approach will help ensure those providers needing to meet meaningful use will have a very specific personal plan, especially with e-prescribing.
<u>Structured Lab Results</u>	<ul style="list-style-type: none"> • 35% of labs are able to produce and deliver structured lab results.² • 57% of labs are able to receive orders electronically.² • 51% of lab results are currently being delivered electronically to providers with EHR capacity.² 	<ul style="list-style-type: none"> • Establish foundational processes to send and receive electronic lab orders and results through NwHIN Direct messaging standards. • In partnership with Medicaid, HIE, and REC, Iowa is using a focused, directed approach to use CAH and associated pharmacies, labs, and providers to make sure all are connected. CAH is the initial link, but as Labs are connected, they look too for their trading partners to make sure they too are connected • Communication and outreach to promote laboratory standards. • Investigate use of policy levers to encourage laboratory Phase I exchange including requirements for licensing labs in the state.
<u>Patient Care Summary</u>	<p>Patient care summary document exchange is available within existing health care systems. There is very little exchange between proprietary systems.</p>	<ul style="list-style-type: none"> • Market use of NwHIN Direct to exchange patient care summaries. • Conduct a pilot study to demonstrate patient care summary exchange between two large health care systems. • Make sure all REC and HIE approved vendors are capable of producing patient care summaries and able to send NwHIN Direct messages. • Conduct a vendor “connect-a-thon” in April to assist EMR vendors in meeting secure messaging requirements • Continue to work with REC and others in the state to help providers and health systems select or upgrade to systems that support patient care summaries.



HIE Inventory

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

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: <http://statehieresources.org/>



¹ Iowa's State Progress Report on e-Prescribing (report provided by ONC to Iowa; data from Surescripts as of December 31, 2009)

² Iowa e-Health Strategic and Operational Plan (March 2011), see Gap Analysis

