

Supporting Meaningful Use

Health Information Exchange Options for Texas Hospitals and Physicians

THSA



TEXAS HEALTH SERVICES AUTHORITY

VISION

To enhance health care quality and effectiveness for all patients, the health care sector should be supported by an infrastructure made up of interoperable, electronic health records composed of standardized, structured data elements that are exchanged among authorized health care organizations and providers across secure regional and statewide networks.

MISSION

The Texas Health Services Authority will promote and coordinate the development of a seamless electronic health information infrastructure to improve the quality, safety, and efficiency of the Texas health care sector while protecting individual privacy.

Summary and Purpose

The American Recovery and Reinvestment Act (ARRA) provides incentives for eligible Medicaid and Medicare health care practitioners and hospitals for the “meaningful use” of certified electronic health records (EHRs). One component of “meaningful use” is the ability to exchange clinical health data across secure electronic networks under clinically appropriate circumstances. Texas is supporting the development of electronic health information exchange (HIE) infrastructure statewide to ensure that Texas physicians and hospitals are not prevented from receiving billions of dollars in available federal meaningful use incentive payments over the next decade.

The purpose of this document is to provide hospitals, physicians and other interested parties with information about Texas HIE and achieving federal meaningful use requirements relating to HIE. This document provides background information relating to the Texas Local HIE Grant Program, the rural Texas White Space strategy, and the Request for Information (RFI) issued to identify additional service providers who intend to provide Direct-compliant secure messaging services. It also provides basic identification and contact information for the community-based HIEs participating in the Local HIE Grant Program, White Space qualified health information service providers (HISPs) and RFI respondents, and links to additional information resources relating to each of those service providers.

Hospitals and physicians wishing to participate in HIE should contact the local HIE initiative serving their county for more information about how to connect and begin exchanging information (*see page 3 for contact information*).

Hospitals and physicians located in rural Texas counties not being served by a local HIE initiative (referred to as the Texas “White Space”) are eligible to receive subsidized HIE services from any of the HISPs qualified to provide connectivity services in those counties (*see page 4 for contact information*). Physicians and hospitals interested in considering other unsubsidized options for HIE connectivity may be interested in services provided by other organizations that can support HIE (*see page 5 for more information*).

Common Abbreviations:

ARRA - American Recovery and Reinvestment Act

EHR - Electronic Health Record

HHSC - Health and Human Services Commission

HIE - Health Information Exchange

HISP - Health Information Service Provider

RFA - Request for Applications

RFI - Request for Information

RFQ - Request for Qualifications

Introduction and Background

In March 2010, the Texas Health and Human Services Commission (HHSC) received an award from the Office of National Coordinator for Health Information Technology (ONC) for funding through the State HIE Cooperative Agreement Program. The purpose of this program, which was created by the American Recovery and Reinvestment Act, is to fund state planning and implementation of electronic health information networks to support higher quality, safer, and more efficient health care. Texas' allotment through this program is \$28.8 million over the four years of the program. The HHSC is serving as the fiscal agent for this funding and the Texas Health Services Authority (THSA), under contract with HHSC, is serving as a convening entity to ensure broad input from stakeholders, such as consumers, hospitals, health plans, and physicians, on the development and implementation of health information exchange (HIE) in Texas.

In preparation for moving forward with the development HIE in Texas through this funding award, during 2010 the state conducted an environmental scan to assess readiness for HIE implementation, including a survey of local HIE initiatives, and issued a Request for Information (RFI) to identify HIE network services available in Texas that offer providers specific HIE functions.

In November 2010, ONC approved the Texas HIE strategic and operational plans developed by the THSA. These plans, which guide the implementation of HIE services in Texas, outline and support the implementation of the following three key strategies:

- General state-level operations administered jointly by THSA and HHSC to support a transparent and collaborative governance structure to coordinate the implementation of HIE in Texas, develop policies and guidelines, and provide statewide HIE services;
- Local HIE Grant Program to partially fund planning, development, and operations of local and regional HIE networks; and
- “White space” coverage to provide HIE connectivity through HISP’s regions of the state without local or regional HIEs.

Pursuant to the strategies identified in the state’s approved Strategic and Operation Plan, the HHSC and THSA created a Local HIE Grant Program to provide partial funding for the planning, implementation and operation of local HIE initiatives and networks, and initiated a program to qualify HISPs to provide essential connectivity services in the portions of rural Texas not served by Local HIE Grant Program participant HIEs. In 2011, the THSA sought to augment the initial environmental scan with a subsequent Request for Information (RFI) to identify additional service providers intending to offer Direct-compliant messaging services in Texas.

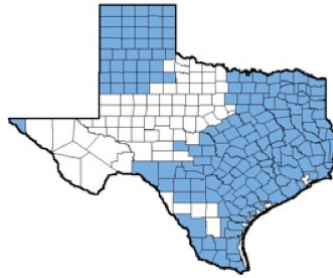
Different Approaches to HIE

There are different ways to exchange health information electronically, the most common being “push” and “pull” or query-based methods.

The basic “push”-based HIE approach being promoted through the “white space” strategy is in contrast to the robust HIE approach being promoted through the local HIEs, which enable “pull”, or query-based, HIE. A simple analogy is that email enables a “push” type of data exchange whereas Google’s search engine enables an on-demand “pull” type of data exchange from any source in an exchange network. Through “push”-based HIE, providers can actively send clinical information to other providers, enabling particular HIE use cases such as delivery of laboratory results from the lab to the ordering provider or delivery of a clinical summary upon referral to a specialist or a hospital.

Through “pull”-based HIE, providers can query the network to find clinical data produced by other providers, enabling HIE use cases such as checking for the presence of lab results before performing lab tests or querying for medical history for patients arriving in the emergency department. There are clear theoretical mechanisms by which “pull”-based exchange can improve the quality, safety, and efficiency of health care and a growing body of empirical results supporting the theory.

Texas Local HIE Grant Program



In December 2010, the HHSC issued a Request for Applications (RFA) for funding under the Local HIE Grant Program and made planning grant awards to 16 community-based HIEs, entering into contracts with the HIEs to develop Business and Operational (B&O) Plans for the operation of HIE in their communities. Funding under the program was distributed according to the number of hospitals and physicians each HIE intended to connect. Program awardees, which intend to connect the majority of physicians and hospitals in Texas, conducted a planning process and submitted quarterly progress reports and B&O plans to the THSA and HHSC for review and HHSC approval for subsequent implementation funding. As of December 2011, all sixteen B&O plans had been submitted to the THSA and HHSC for review and approval. Of the 16 HIEs that were initially funded, 13 have decided to continue in the program. At a minimum, these HIEs will support the following HIE services in 2012:

- electronic prescription;
- lab results delivery; and
- clinical summary exchange.

The HIEs may offer other types of valued HIE services in addition to those listed above. A list of the HIEs participating in the program is available below.

Program Participants

Coalition of Health Services (Amarillo)	Health Information Network of South Texas (Corpus Christi)
Montgomery County HIE	Rio Grande Valley HIE (Harlingen)
North Texas Accountable Health Care Partnership (Dallas/Fort Worth)	Integrated Care Collaboration (Austin)
Greater Houston HIE	Rio One Health Network (Edinberg)
Healthcare Access San Antonio	iHealth Trust (Houston)
Paso del Norte HIE (El Paso)	Southeast Texas Health System (Goliad)
FirstNet HIE (Tyler)	

Other Resource Documents

- [Local HIE Participants](#) - List of local HIEs including service areas, websites, and contact information
- [Local HIE Profile Sheets](#) - Individual local HIE profile pages including HIE descriptions, objectives, and additional details
- [Approved B&O Plans](#) - Local HIE business and operations plans approved by the HHSC
- [Local HIE Grant Program RFA](#) - Local HIE Grant Program Request for Applications issued by the HHSC in December 2010

Texas Rural “White Space” Strategy

In May 2011, the THSA issued a Request for Qualifications (RFQ) to identify organizations with the qualifications and experience required to provide electronic capabilities for the transmission of all clinical transactions necessary to enable health care providers to achieve “meaningful use” of electronic health records (EHRs) in the rural regions of the state not served by one of the Local HIE Program participant HIEs. Through the RFQ, the THSA sought to establish a marketplace of qualified HISPs, organizations that support the secure transport of structured or unstructured data (e.g., simple text and PDF, semi-structured text, and highly structured messages and documents) on behalf of the sending or receiving organization or individual, to provide at least “lite” HIE connectivity services to physicians and hospitals located in White Space counties.

\$2 million in total funds is currently available to support the White Space strategy. All qualified HISPs participating in the marketplace are eligible to receive a subsidized payment from the THSA based on the number of eligible hospitals and physicians located in the identified White Space counties that each HISP is able to connect. The subsidy, or voucher, is in the amount of \$400 per White Space physician connected and \$5000 for each White Space hospital connected. There are about 160 hospitals and 3000 physicians located in the Texas White Space counties.

The voucher is intended to act as a subsidy, and the HISPs may not charge participating physician or hospitals for any services until the voucher funds have been expended on those services. However, once those funds have been expended, HISPs may charge physicians and hospitals directly for their services in accordance with each HISP’s published pricing available on the THSA website.

The HISPs must adhere to federally required technical standards and operational policies as well as to additional requirements as included in the THSA agreement with the HISPs, including the provision of electronic capabilities for the transmission of all clinical transactions necessary for meaningful use of electronic health records in accordance with recognized federal and state standards. Initially, this includes the transmission of clinical care summaries and lab results.

The THSA issued its RFQ with the expectation that responses would be received from multiple HISPs capable of serving all or a portion of the physicians and hospitals in the White Space counties. Applications received were evaluated for quality, cost, readiness, coverage, and stated willingness to deliver core HIE services, implement required interoperability and privacy and security policies and standards, and participate in program evaluation. “Readiness” means the capability of supporting HIE services today, particularly those required to enable physicians and hospitals to achieve federal HIE Stage 1 meaningful use requirements relating to HIE. Following a rigorous application review and testing process, in August 2011 the THSA approved the preliminary initial selection of six HISPs, all of which have been required to sign a Uniform HISP Agreement with the THSA in order to be qualified for participation in the White Space program.

Other Resource Documents

- [White Space Program](#) - THSA White Space Strategy web page
- [White Space Qualified HISPs](#) - White Space HISPs and their Direct product names, websites, contact information and current program qualification status
- [White Space Fact Sheet and Q&A](#) - Fact Sheet and Q&A information for health care providers on the White Space voucher program
- [White Space RFQ](#) - White Space Request for Qualifications (RFQ) issued by the THSA to prospective HISPs in May 2011

Direct

An HIE data standard known as the Direct Protocol or ‘Direct’ has recently been developed to support secure electronic messaging of the “push” variety as described in the sidebar on page 3, similar to email. This will help enable providers to securely send and receive clinical summaries, lab results, and other clinical information. Many of the “White Space” HISPs and respondents to the statewide HIE RFI provide Direct-compatible HIE messaging options. It is anticipated that Direct-compatibility will be a requirement for certified EHRs in the future.

HISP Direct Services RFI

Following its 2010 environmental scan to assess initial readiness for HIE implementation in Texas, the THSA sought to augment its previous findings by issuing an additional Request for Information (RFI) in October 2011 to identify organizations that offer or intend to offer Nationwide Health Information Network (NwHIN) Direct protocol-based HIE connectivity services (see sidebar on page 4 for more on the Direct Protocol) to health care providers in Texas that include, at a minimum, the initial federal meaningful use required elements of clinical summary exchange for care coordination and patient engagement and electronic clinical laboratory results delivery.

All organizations that plan to offer Direct-based secure messaging services in Texas, including Texas Local HIE Grant Program participants providing services in their service areas and the six qualified White Space HISPs offering Direct services in the White Space region, were invited to respond by identifying themselves, their Direct-compliant product(s), and related information. The RFI, which was issued to augment the original environment scan and to ensure that responding organizations are part of the statewide HIE planning process, included clarification that its purpose was not intended as a “pre-proposal” or to endorse a particular solution, method, or product. The THSA received responses to the RFI from 17 organizations by the October 28, 2011 deadline.

Other Resource Document

- [HISP Direct Services RFI Respondents](#) - October 2011 THSA Request for Information (RFI) respondents' names, Direct product names, intended Texas Direct Services areas, availability of additional HIE services, and contact information



Links to Other Helpful Sources

Texas HIE Plan

www.thsa.org/media/1549/texas_plans_for_statewide_hie.pdf

Texas Health and Human Services Commission

www.hhsc.state.tx.us

Texas Department of State Health Services

www.dshs.state.tx.us

www.dshs.state.tx.us/mu/

Office of the National Coordinator for Health Information Technology

www.healthit.hhs.gov

www.healthit.gov

Centers for Medicare and Medicaid Services

www.cms.gov/EHRIncentivePrograms/30_Meaningful_Use.asp

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Background

The THSA was created by the Texas Legislature in 2007 as a public private partnership, legally structured as a nonprofit corporation, to support the improvement of the Texas health care system by promoting and coordinating HIE and health information technology (HIT) throughout the state to ensure that the right information is available to the right health care providers at the right times.

Contact Information

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