The Link

Data Sources

The following data sources are currently available through HEALTHeLINK. Those bolded are new since the last edition of The Link.

- Catholic Health System (ADTs, radiology, labs)
- ECMC (ADTs, radiology, labs, **transcribed reports**)
- Kaleida Health System (ADTs, radiology, labs, transcribed reports)
- Mount St. Mary's Hospital (ADTs, radiology, **labs**, transcribed reports)
- Niagara Falls Memorial (ADTs, radiology, **labs, ER reports**)
- Quest Diagnostics (labs)
- Roswell Park Cancer Institute (ADTs, radiology, labs, transcribed reports)
- RxHub (medication history)
- **Southtowns Radiology**
- **Spectrum Radiology**
- Surescripts (medication history)
- United Memorial Medical Center (ADTs, radiology, **labs**)
- Upper Allegheny Health System (ADTs, **radiology, labs & transcribed reports**)
- WCA of Jamestown (ADTs, radiology, labs, transcribed reports)
- Windsong Radiology Group

Total participating practices: 228
Total participating providers: 1,575
Total results available through HEALTHeLINK: 45 million

For more info, visit www.wnyhealthelink.com

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HEALTHeLINK & Meaningful Use

Registration for the Meaningful Use (MU) EHR incentive programs has begun. HEALTHeLINK provides a number of capabilities to WNY providers that support MU requirements.

- **Clinical reports delivery** – Connect your EHR to HEALTHeLINK to have clinical tests you order pushed directly into your EHR from any data source (hospitals, radiology centers and independent laboratories) connected to HEALTHeLINK. Supports MU objective "Incorporate clinical lab test results into EHR as structured/searchable data."
- **EHR to EHR clinical data transfer** – Push patient clinical records directly between referring physician EMRs. Supports core objective "Implement capability to electronically exchange key clinical information among providers and patient authorized entities electronically."
- **Clinical reports search** - Given patient consent, search for any clinical result from any data source connected to HEALTHeLINK regardless of the ordering physician, and have that result pushed directly into your EHR. Supports MU objective "Incorporate clinical lab test results into EHR as structured/searchable data."
- **Medication history search** – Given patient consent, search for retail and mail order medications filled for patients, which directly supports several MU objectives.
- **E-prescribing capability** – Supports core objectives "generate & transmit permissible prescriptions electronically" and "computer provider order entry for medication orders."

In addition, HEALTHeLINK has consulting services available to help practices achieve MU objectives and offers assistance with EHR selection and implementation and patient centered medical home certification.

Data Source Updates

Niagara Falls Memorial Medical Center's Emergency Room Visit Notes are now available through HEALTHeLINK. These reports provide clinicians access to a patient's emergency room experience and treatment, which in turn allows primary care physicians to provide proactive, enhanced and informed follow up care which improves patient quality, safety and continuity of care.

ADT (Admission, Discharge, Transfer) transactions will soon be found on the VHR (Virtual Health Record) summary page. They provide notice that a patient has been admitted to the hospital or emergency room or discharged from the hospital. Providers, especially primary care physicians, can use this information to ensure that proper follow up is arranged for these transitions in care. These are received from all current hospital data sources and will be added to the VHR page in the next two months.

Cheryl Howe appointed board chair

Howe, executive vice president, operations at BlueCross BlueShield of Western New York was appointed chair of HEALTHeLINK's board of directors. Immediate past chair Michael Cropp, MD, president and CEO of Independent Health and David Scamurra, MD, pathologist with X-Cell Laboratories of WNY were each named vice chairs.

Other HEALTHeLINK board members include: Anthony Billittier, MD, Erie County Commissioner of Health; David Dunn, MD, vice president, health sciences, University at Buffalo; Richard Gold, executive vice president, mortgage and consumer lending, M&T Bank; Dennis Horrigan, president & CEO, Catholic Medical Partners IPA; James Kaskie, president and CEO, Kaleida Health System; Jody Lomeo, CEO, Erie County Medical Center Corporation; Kenneth Oakley, CEO, Rural Health Education Center; Judy Smith, MD, executive medical director, Roswell Park Cancer Institute; and Art Wingerter, president, Univera Healthcare.

Easier access through the HEALTHeCOMMUNITY portal

In December 2010, HEALTHeLINK implemented version one of the HEALTHeCOMMUNITY portal. There are many health care related systems that providers and their staff use on a daily basis each with its own set of passwords and authentication methods. This requires the user to remember several user names and passwords or perhaps carry around a key chain full of authentication fobs and tokens. The portal is intended to solve this problem by providing one location where a user can authenticate oneself. They are then presented with a list of various secure systems to which they have usage permissions. By selecting one of those systems on the menu, they are granted access with no additional log-in required. The HEALTHeCOMMUNITY provides the user authenticated credentials to the secure system which validates the user and allows them in. This will greatly improve the user experience with access to multiple systems.

HEALTHeLINK and HEALTHeNET are the first two systems to utilize the HEALTHeCOMMUNITY portal. For the HEALTHeLINK user, the log-on process is greatly improved from previous methods. The user logs in at one location providing their second factor authentication. This second factor is good for 12 hours meaning in subsequent log-ins during the day, they will be required to provide only their user name and password, greatly improving the user experience with HEALTHeLINK.

HEALTHeLINK & medication history

HEALTHeLINK provides a fast and easy method to access a patient's medication history and helps clinicians build a more complete picture of their patients' medications. HEALTHeLINK can be used to identify patients who are receiving similar medications from different providers and alert providers of possible drug interactions.

Two sources are used to feed medication data elements into HEALTHeLINK. Using Surescripts, retail pharmacy data from Walgreens and Rite Aid feed any filled medications. Surescripts continues to work with other retail chains like Wal-Mart and CVS to make their data available through HEALTHeLINK in the future. Also adding medication data is RxHub, which is claims data. All of the participating pharmacy benefit managers, associated with the Surescripts network, send a list of all prescriptions that were paid for by the patient's insurance plan, which includes Medicaid and Medicare medications.

There are some instances when medication history is not yet available through HEALTHeLINK such as scripts not processed through a patient's insurance plan and dispensed at pharmacies that do not supply data to Surescripts or medications dispensed at an inpatient facility. While this will not be a complete list of all medications it is a starting point towards medication reconciliation.

Care quality & safety advantages of e-prescribing

HEALTHeLINK, BlueCross Blue Shield of WNY, Independent Health and Univera Healthcare want to encourage your practice to increase or begin sending your scripts electronically. E-prescribing benefits your practice, your patients and pharmacists by creating more efficient workflows, improving patient safety and increased medication compliance. Prescription benefits, medication history and prescription routing can all be managed electronically. HEALTHeLINK is currently offering free e-prescribing.

Through the HITECH Act, eligible prescribers can receive up to $44,000 in incentive payments by meeting qualitative and quantitative standards for the "meaningful use" of a certified EMR in 2011. E-prescribing is one of the core requirements for achieving "meaningful use." Medicare is also providing incentive payments to physicians for successful e-prescriptions. There are approximately 1,200 physicians in WNY who currently utilize e-prescribing technology and qualify for incentives. Beginning in 2012, Medicare will be applying a payment penalty of 1% for those practices who did not successfully e-prescribe in 2011. This penalty will be increased in subsequent years.

Beacon Community Program™
Awardee of The Office of the National Coordinator for Health Information Technology

Beacon Project Update

Over the last eight months the WNY Beacon Project has made many great strides in reaching out to the community for the betterment of diabetes management. The WNY Beacon Project has as its primary focus the improved outcomes for diabetic patients and support for the providers that treat them to achieve those outcome improvements. To support this objective and to ensure we stay on time and within budget, a strong project management approach to delivery is in place.

The project is proud to report an overall 10%+ increase in flu immunizations for the patients of providers that participated in the pilot program. We will improve the flu immunization campaign process and look forward to seeing more improvements through the flu season this year.

The WNY Beacon Project has engaged over 106 of the 500 Beacon providers to start the implementation of Tele-Monitoring, Patient Portal, Medication Reconciliation, Clinical Transformation, Registry Reporting and many other initiatives for WNY. We expect the implementation of these initiatives for the 106 providers to be complete around September 2011. An additional 300 providers are scheduled for implementation concluding March 2012 with the remaining 100 around September 2012.