

## Virtual Lifetime Electronic Record:

VA's Experience With National Health Information Exchange

Greater Pittsburgh Chapter AAPC November 20, 2012



# National Health Information Exchange: Why The Delay?

"Hurricane Sandy took many lives and caused billions of dollars in damage. But so does a healthcare system that still refuses to embrace interoperability."

http://www.informationweek.com/healthcare/interoperability/national-health-information-exchange-why/240044378

# **Background Information**



#### What is VLER?

On April 9, 2009, President Obama directed the Department of Defense (DoD) and the Department of Veterans Affairs (VA) to create the Virtual Lifetime Electronic Record (VLER), which:



"... will ultimately contain administrative and medical information from the day an individual enters military service throughout their military career and after they leave the military."

-President Barack Obama

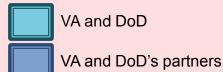
#### Benefits of VLER Health

- Allows sharing certain parts of the electronic health record between VA, DoD and selected private health care providers over a secure network known as the eHealth Exchange (formerly Nationwide Health Information Network (NwHIN))
- Benefits Veterans and Service members who receive a portion of their care from non-VA health care providers
  - Eliminates need to hand-carry health records
  - Allows VA and private health care providers to share access to up-to-the-minute health information
  - Veterans may opt in or opt out at any time

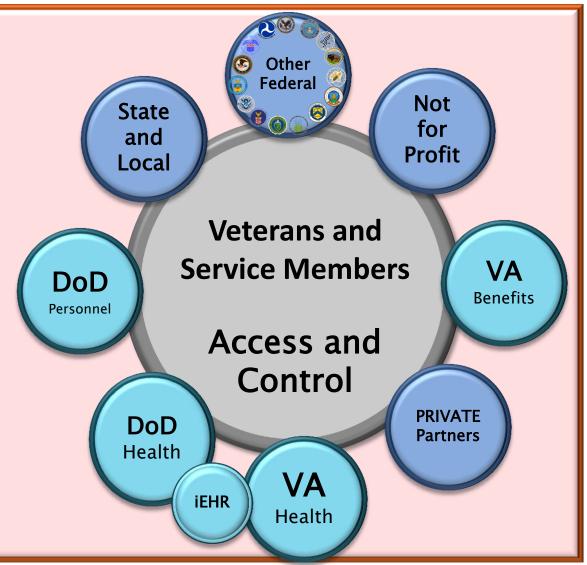


## Virtual Lifetime Electronic

Better enable VA and its partners to proactively provide the full continuum of services and benefits Veterans have earned via Veterancentric processes made possible by effective and efficient, standards-based information sharing.



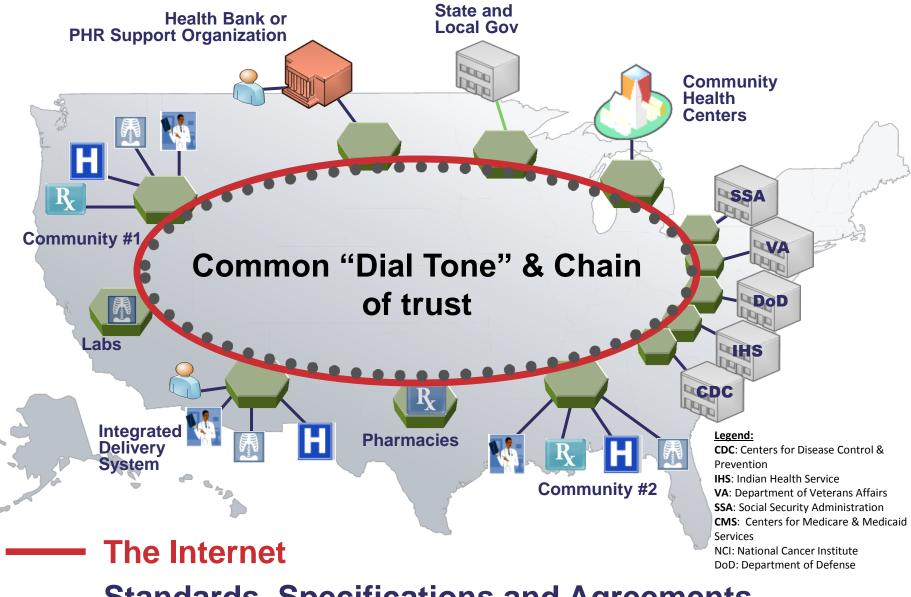
DoD = Department of Defense iEHR = Integrated Electronic Health Record VA = Department of Veterans Affairs





## What is eHealth Exchange?

- A program now under Healtheway, a non-profit, public-private partnership developed to improve the quality and efficiency of healthcare by establishing a mechanism for nationwide health information exchange
- A common set of standards and specifications that provide the foundation for the secure exchange of health information that supports meaningful use
- Enable data exchange, whether between two different organizations across the street or across the country

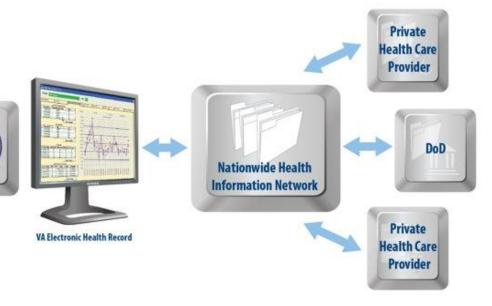


Standards, Specifications and Agreements

for Secure Connections

## eHealth Exchange (Formerly NwHIN)

- eHealth Exchange Direct
  - Trusted Network
  - Point-to-Point "Push" of clinical information using secure email
  - Standard or nonstructured notes and reports
- eHealth Exchange
  - Trusted Network
  - Query and Retrieve methodology
  - Standards-based exchange of relevant dinical information



#### **DURSA**

- Data Use and Reciprocal Support Agreement
  - Legal agreement to promote and establish trust among multiple participants
  - Codifies common set of expectations into enforceable legal framework
  - Eliminates need for point-to-point agreements
    - Developed in coordination with Office of National Coordinator (ONC) in the US Department of Health and Human Services
    - Part of NwHIN trial implementations
    - "Network": all of standards, services and policies identified by ONC that enables secure health info exchange via the Internet

## Highlights of DURSA

- Applicable law
- Permitted Purposes
- Breach Notification



## VLER -eHealth Exchange

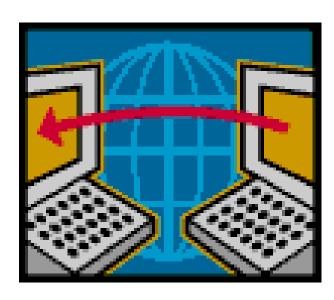
Exchange of foundational clinical health data set

#### – VA 2-Way Pilot Sites:

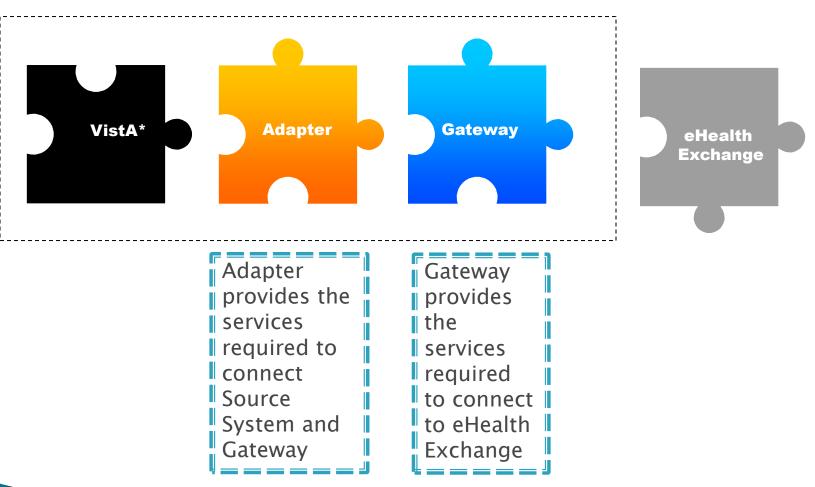
- Asheville, NC
- Richmond, VA
- Indianapolis, IN
- Grand Junction, CO
- Salt Lake City, UT
- Buffalo, NY
- Minneapolis, MN
- Charleston, SC
- Altoona, PA

#### VA, DoD 3-Way Sites

- Hampton, VA
- San Diego, CA
- Spokane, WA
- Puget Sound, WA

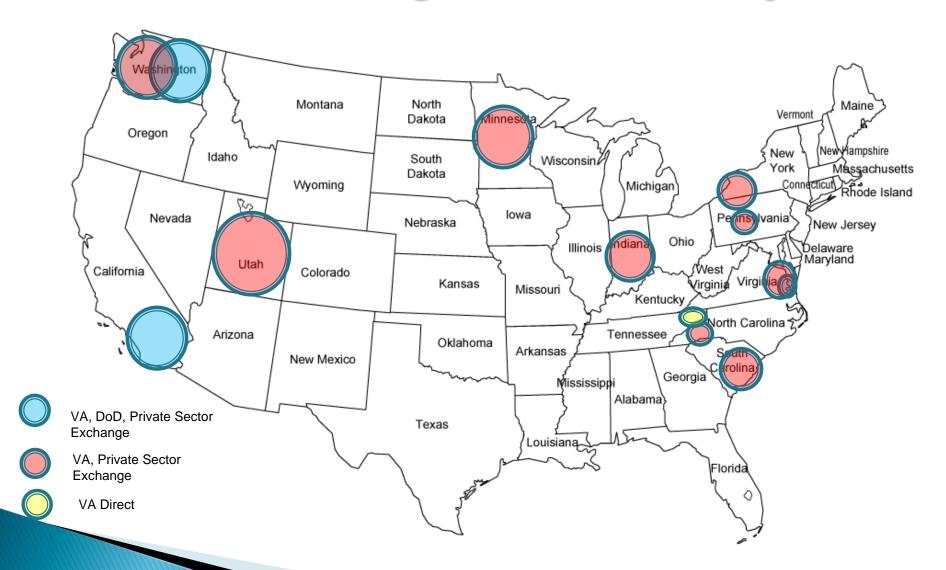


## Connecting to the eHealth Exchange



\*VistA = Veterans Health Information Systems and Technology Architecture

## eHealth Exchange and Direct Projects



## Role of Health Information Management (HIM)

- Administrative management of health records is the responsibility of HIM
- HIM professional is responsible for:
  - Both safeguarding and disclosing, as appropriate, health information according to applicable laws, organizational policies and standards
  - Honoring the patient's right to consent to authorize disclosure or restrict disclosure as permitted
  - Ensuring each request for patient data and health care information has a valid authorization prior to disclosure as required
  - Coordinating disclosures of protected health information (PHI)
  - Applying routine administrative processes to all requests, recording all disclosures, and accounting for any exceptions to routine processing

### Patient Authorization Needs

- VA regulations require a Veteran's authorization to disclose health information pertaining to Title 38 U.S.C. 7332-protected conditions
- Disclosing health information to DoD does not require an authorization
- Private health partners may or may not require a Veteran's authorization, depending on their organizational policies and state regulations

### Authorization – VA Form 10–0485

First.

I request and authorize my VA health care facility to release my protected health information (PHI) for treatment purposes only to the communities that are participating in the eHealth Exchange (formerly NwHIN).

#### Department of Veterans Affairs

Patient Full Name

VA FORM 10-0485

Request for and Authorization to Release Protected Health Information to Nationwide Health Information Network

Middle:

Date

Privacy Act Information: The execution of this form does not authorize the release of information other than that specifically described below. The information requested on this form is solicited under Title 38, U.S.C. The form authorizes release of information in accordance with The Health Insurance Portability and Accountability Act, (HIPAA) 45 CFR Parts 160 and 164, 5 U.S.C. 552a, and 38 U.S.C. 5701 and 7332 that you specify. Your disclosure of the Information requested on this form is voluntary. However if the information containing last four of the Social Security Number (SSN) (the SSN will be used to locate records for release) is not furnished completely and accurately, Nationwide Health Information Network will be unable to comply with the request. The Veterans Health Administration may not condition treatment, payment, enrollment or eligibility on signing the authorization. VA may disclose the information that you put on the form as permitted by law. VA may make a "routine use" disclosure of the information as outlined in the Privacy Act systems of records notices identified as 24VA19 "Patient Medical Record-VA" and in accordance with the VHA Notice of Privacy Practices. You do not have to provide the information to VA, but if you do not the Nationwide Health Information Network exchange will be unable to process your request and serve your medical needs. Failure to furnish the information will not have any affect on any other benefits to which you may be entitled. VA may also use this information on this form to identify Veterans and persons claiming or receiving VA benefits and their records, and for other purposes authorized or required by law.

| Last: (print)  |  |  |  |  |
|--|--|--|--|--|
| Last four digits of SSI  | V:   |  |  |  |
| Requestor Name:  | VA Approved Nationwide Health Information Network Participants   |  |  |  |
| Information Requeste   |  |  |  |  |
| Pertinent health inform  | ation from electronic health record.   |  |  |  |
|  |  |  |  |  |
| purposes only to the co<br>information may consis<br>of or referral for Alcoho<br>authorization covers the | my VA health care facility to release my protected health information (PHI) for treatment minimities that are participating in the Nationwide Health Information Network (NwHIN). This to fithe diagnosis of Sickle Cell Anemia, the treatment of or referral for Drug Abuse, treatment of Abuse or the treatment of or testing for infection with Human Immunodeficiency Virus. This is diagnoses and related health information that I may have upon signing of the authorization the related health information that I may acquire in the future, including those protected by 38 |  |  |  |
| eBenefits portal, or in v<br>records, at any time, ex<br>effective upon receipt b                          | remain in effect for the period of five years. I may revoke this authorization through the criting at my Release of Information (ROI) unit at the VA health care facility housing my cept to the extent that action has already been taken to comply with it. Written revocation is sy the Release of Information (ROI). Re-disclosure of my electronic health records by those on may be accomplished without my further authorization and may no longer be protected.  |  |  |  |
|  |  |  |  |  |
|  | I certify that this request has been made freely, voluntarily and without coercion and that the we is accurate and complete to the best of my knowledge.   |  |  |  |
|  |  |  |  |  |

Signature of Patient

...for the period of 5 years.



## Patient Authorization Examples

| Organization                                       | Consent model | Comments  |  |  |
|--|---------------|---|--|--|
| VA   | Opt in        | Global to all eHealth Exchange participants, duration=5 years |  |  |
| DoD  | Opt out       |   |  |  |
| Kaiser Permanente                                  | Opt in        | Opt-in approach taken for initial San Diego pilot             |  |  |
| Utah Health Information Network                    | Opt in        | Emergency case and one time authorization considered          |  |  |
| MedVirginia  | Opt out       |   |  |  |
| Inland Northwest Health Services                   | Opt out       |   |  |  |
| Multicare  | Opt in        |   |  |  |
| Indiana Health Information Network                 | Opt out       |   |  |  |
| North Carolina Health Information<br>Collaborative | Opt out       |   |  |  |

**NO** information is shared until the patient **opts in** to participate Information **is** shared unless the patient **opts out** 

#### Pilot Enrollment Process

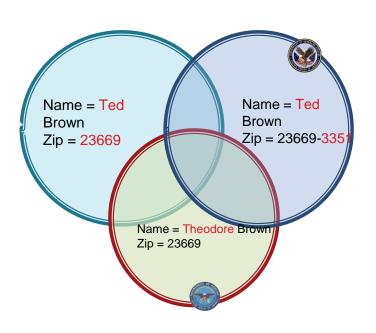
- Identify shared patients
- Invite patients to join or hold Open Enrollment
- Receive signed VA Authorization Forms
- Validate authorization forms
- Opt-in/ Announce using the Veterans Authorizations and Preferences (VAP) System
- Store authorization forms
- Generate letters and reports

## Challenges for VLER Health

- The pilot phase involves an initial flood of enrollment activities, with "trickle-down" expected
- Short term ramp-up versus long-term sustainability
- Managing the patient authorization process
- System of Records and Retention Requirements
- Incorporating non-VA health information without unnecessary use of copy/paste
- Moving towards fine-grained restriction capabilities

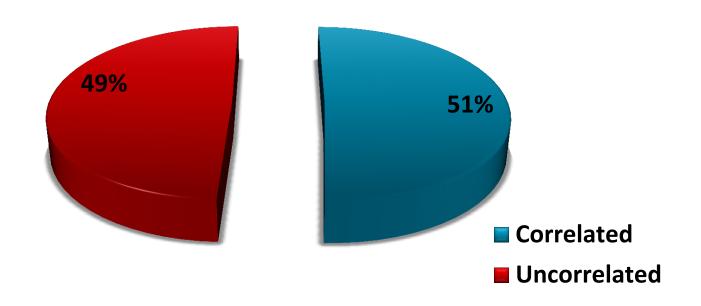
## Challenges to Identity Management

- Patient identity format, volatile
- Successful matching based on
  - Full Name
  - Date of Birth
  - Gender
  - Full SSN
- Multiple assigning authorities
- Matching algorithm deterministic vs. probabilistic
- Announcement strategy
  - Real-time with query for document
  - Ahead of time when patient authorization is received



## Challenges to Identity Management

% Correlated vs. Uncorrelated

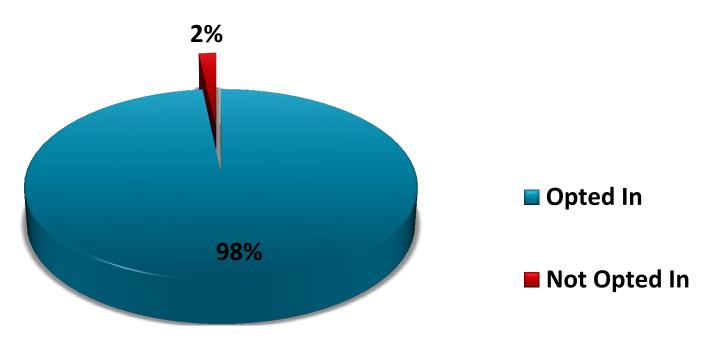


As of June 27, 2012

## **Our Success**

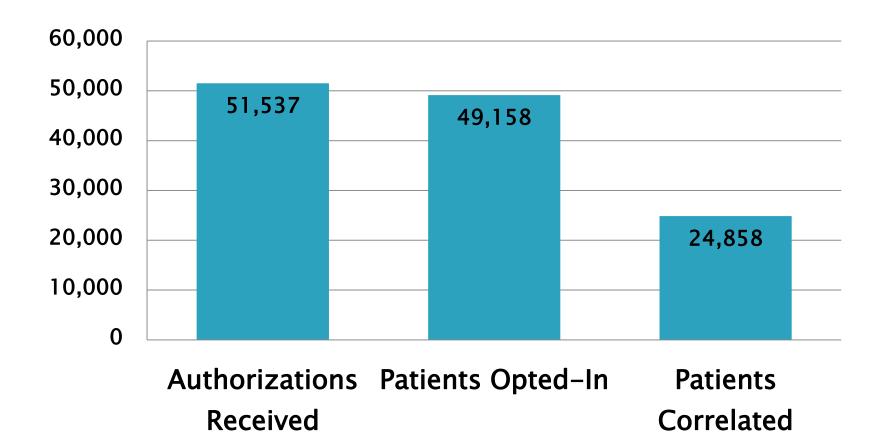
# Total Signed Authorizations: 51,537

% of Opted in Patients towards 50,000 Goal



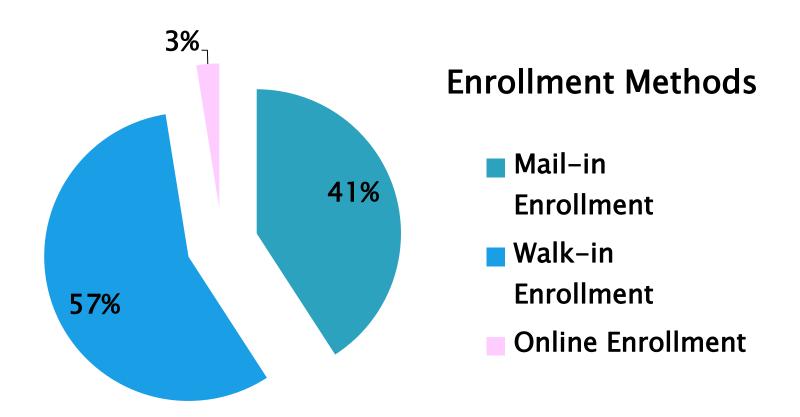
As of June 27, 2012

## Our Success

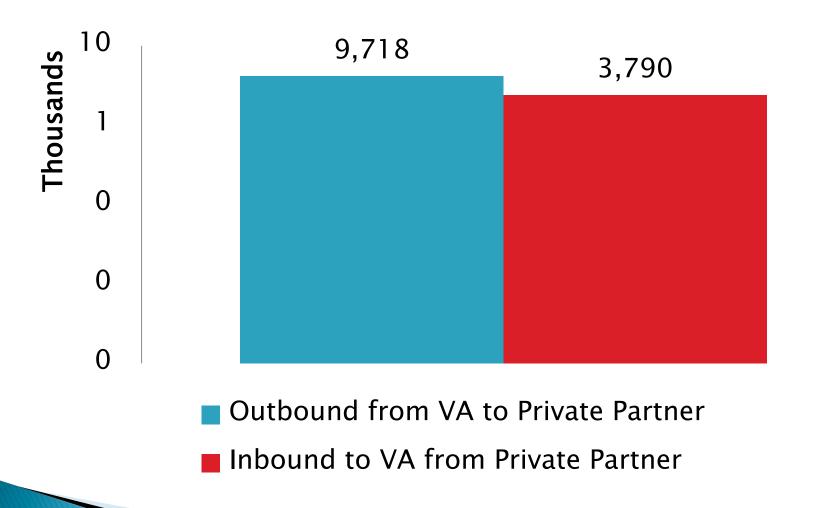


As of June 27, 2012

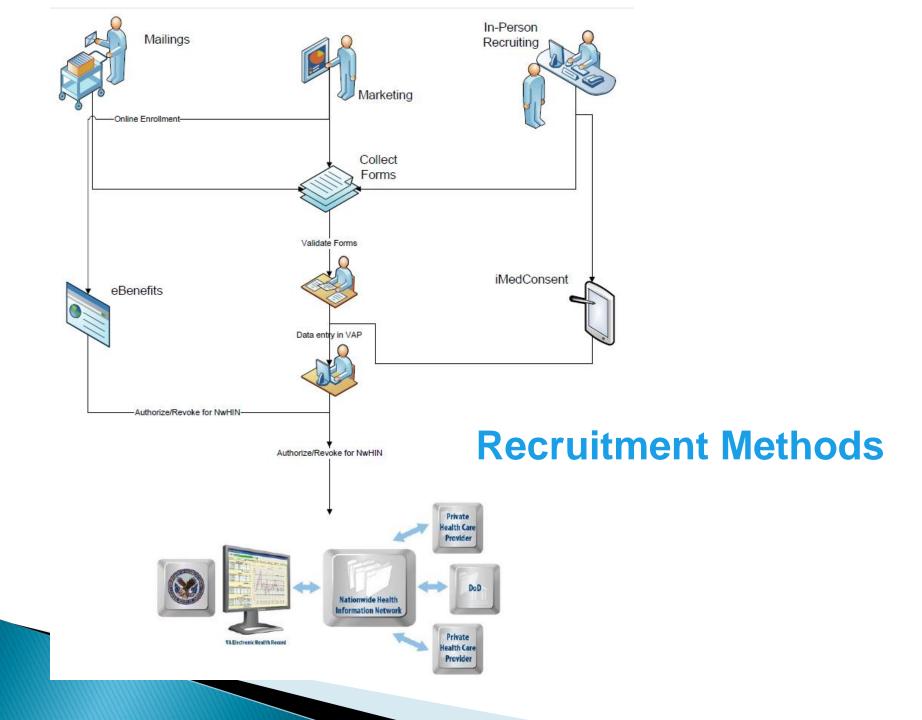
## Recruitment Method Success



## Our Success - Exchanges



| C32                                   | C62                                |  |  |  |
|---------------------------------------|------------------------------------|--|--|--|
| Person Information                    | Consults/Referrals                 |  |  |  |
| Support                               | Discharge Summaries                |  |  |  |
| Healthcare Provider                   | Results of Diagnostic Studies      |  |  |  |
| Information Source                    | Cardiology Studies                 |  |  |  |
| Language Spoken                       | Obstetrical Studies                |  |  |  |
| Allergies                             | Gastroenterology Endoscopy Studies |  |  |  |
| Problems/Condition                    | Pulmonary Studies                  |  |  |  |
| Medications                           | Ophthalmology/Optometry Studies    |  |  |  |
| Lab Results: chemistry and hematology | Neuromuscular Electrophysiology    |  |  |  |
|                                       | Studies                            |  |  |  |
| Immunizations                         | Miscellaneous Studies              |  |  |  |
| Vital Signs                           | Procedure notes                    |  |  |  |
| List of encounters                    | History & Physical notes           |  |  |  |
| List of procedures                    | Radiology reports                  |  |  |  |
|                                       | Surgery reports                    |  |  |  |



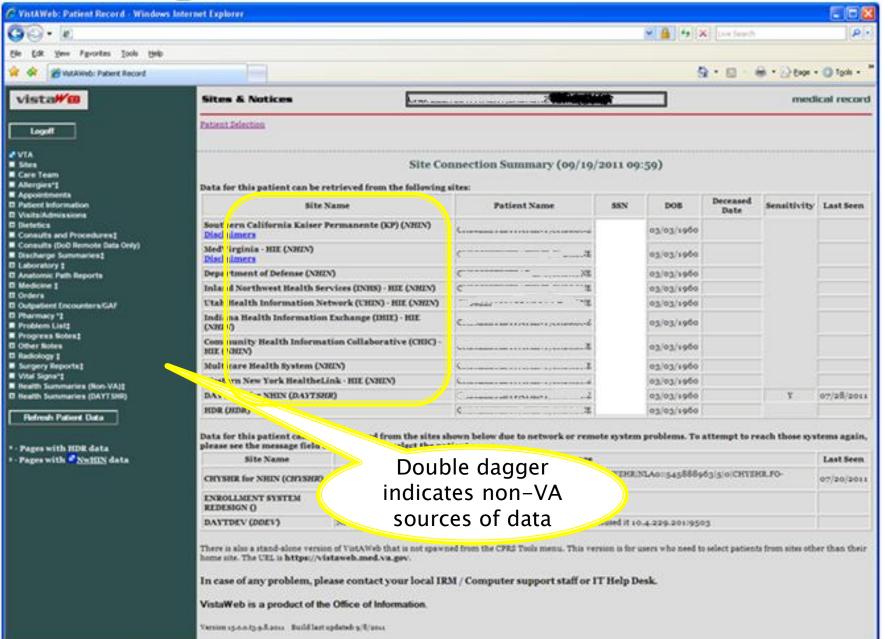
## Online Enrollment



## **Veterans Authorizations & Preferences**



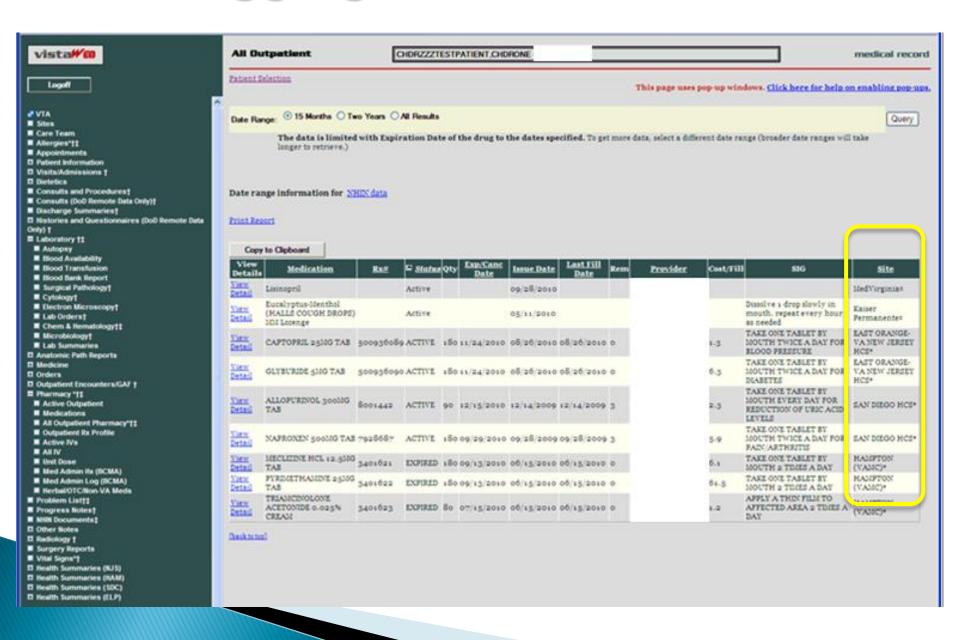
**Retrieving NwHIN Documents from VistAWeb** 



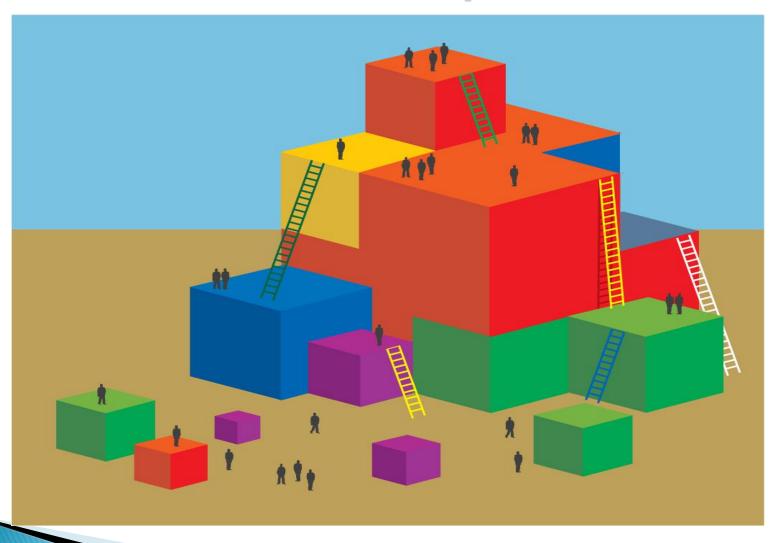
## **Summary of Care Record**

| Print Copy to                   | Clipboard                 |            | Close                    |                        |                   |              |        |
|---------------------------------|---------------------------|------------|--------------------------|------------------------|-------------------|--------------|--------|
|                                 |                           | n.o.v.r.   |                          |                        |                   |              | _      |
| CHDRZZZTEST                     | PATIENT, CHD              | RONE       | ,                        |                        |                   |              |        |
|                                 |                           |            | Kaiser Permane           | nte                    |                   |              |        |
|                                 |                           |            | Kaiser Permane           | iite                   |                   |              |        |
| reated On: Septemb              | er 28. 2010               | S          | ummarization of epis     | ode note               |                   |              |        |
|                                 | CHDRONE CHDRA             | ZZZTES     | TPATIENT F               | Patient ID:            |                   |              |        |
|                                 |                           |            |                          |                        |                   |              |        |
|                                 |                           |            |                          |                        |                   |              |        |
| Birthdate:                      |                           |            |                          | Sex: Male              |                   |              |        |
|                                 | English Caiser Permanente |            |                          |                        |                   |              | _      |
| Source: P                       | Carser Permanente         |            |                          |                        |                   |              | _      |
| Table of Conten                 | its                       |            |                          |                        |                   |              |        |
| Duchlama                        |                           |            |                          |                        |                   |              |        |
| Problems     Allergies, Ad      | lverse Reactions,         | Alerts     |                          |                        |                   |              |        |
| <ul> <li>Medications</li> </ul> |                           |            |                          |                        |                   |              |        |
| handal anna                     |                           |            |                          |                        |                   |              |        |
| Problems                        |                           |            |                          |                        |                   |              |        |
| D 411                           | Lamas well be autonomic   | and in the | la mandala Cantala arabi | lance flaces of an in- | abandaral basilis |              |        |
| abuse related may               | not be exchanged.         | ted in th  | is module. Certain prob  | iems flagged as t      | enavioral health  | or substance |        |
|                                 |                           |            |                          |                        |                   |              |        |
| Problems - Count (11)           |                           | Status     | Problem Code             | Date of<br>Onset       | Provider          | Source       |        |
| PAIN                            |                           | Active     |                          | Sep 29, 09             |                   |              |        |
| OBESITY                         |                           | Active     |                          | Sep 29, 09             |                   |              |        |
| DYSPNEA                         |                           | Active     |                          | Sep 29, 09             |                   |              |        |
| HISTORY OF CANCE                | ER OF THE COLON           | Active     |                          | Sep 25, 09             |                   |              |        |
| HYPERTENSION                    |                           | Active     |                          | Sep 22, 09             |                   |              |        |
| DIABETES MELLITU                |                           |            |                          | Sep 22, 09             |                   |              |        |
| DIABETES MELLITU                |                           |            |                          | Sep 22, 09             |                   |              |        |
| DIABETES MELLITU                |                           |            |                          | Sep 22, 09             |                   |              |        |
| MULTI INFARCT DE                | EMENTIA                   | Active     |                          | Mar 15, 07             |                   |              |        |
| SNORING                         | D A DATE A                | Active     |                          | Dec 22, 06             |                   |              |        |
| OBSTRUCTIVE SLEE                | P APNEA                   | Active     | )                        | Dec 22, 06             | )                 |              |        |
|                                 |                           |            |                          |                        |                   |              |        |
| Allergies, Adver                | rse Reactions,            | Alerts     |                          |                        |                   |              |        |
| All current allerg              | nine will be extract.     | ad in this | module                   |                        |                   |              |        |
| - All current allers            | gies will be extracti     | ed in this | riioddie                 |                        |                   |              |        |
| Allergens - Count (6)           |                           |            | Event Type               | Reaction               |                   | Severity     | Source |
| WHEAT BRAN                      | Sep 23,                   |            | Severity                 |                        |                   |              |        |
| AMOXICILLIN                     | Jan 20.                   | o.B        | Severity                 | Skin Rash an           | d/or Hives        |              |        |

## Aggregate View of Data



# Next Steps



## **Contact Information/Questions?**

Peggy Pugh, RN, CIPP/G, CPC, CPC-H, CCP margaret.pugh@va.gov



#### References and Resources

- VLER: <a href="http://www.va.gov/vler/">http://www.va.gov/vler/</a>
- eHealth Exchange: <a href="http://www.healthewayinc.org/">http://www.healthewayinc.org/</a>
- NwHIN Exchange: <a href="http://healthit.hhs.gov/portal/server.pt/community/healthit\_hhs\_gov\_nhin\_exchange/1407">http://healthit\_hhs\_gov\_nhin\_exchange/1407</a>
- DURSA: <a href="http://www.legalhie.com/federal-hie-guidance/updated-dursa-for-nhin-released-nov-30/">http://www.legalhie.com/federal-hie-guidance/updated-dursa-for-nhin-released-nov-30/</a>
- Affordable Care Act's Impact of Health Care for Veterans, February 22, 2012: <a href="http://health.universityofcalifornia.edu/2012/02/22/affordable-care-acts-impact-on-health-care-for-veterans/">http://health.universityofcalifornia.edu/2012/02/22/affordable-care-acts-impact-on-health-care-for-veterans/</a>
- National Health Info Exchange: Why The Delay?, Information Week, November 5, 2012: <a href="http://www.informationweek.com/healthcare/interoperability/national-health-information-exchange-why/240044378">http://www.informationweek.com/healthcare/interoperability/national-health-information-exchange-why/240044378</a>

#### References and Resources

- State Health Information Exchange: <a href="http://www.healthit.gov/policy-researchers-">http://www.healthit.gov/policy-researchers-</a> <a href="mailto:implementers/state-health-information-exchange">implementers/state-health-information-exchange</a>
- With eHealth Exchange, We Are Entering a New Era of HIE, Government Health IT, September 4, 2012: <a href="http://www.govhealthit.com/blog/ehealth-">http://www.govhealthit.com/blog/ehealth-</a> <a href="exchange-we-are-entering-new-era-hie">exchange-we-are-entering-new-era-hie</a>