KIE
KENTUCKY HEALTH INFORMATION EXCHANGE
Connecting Kentucky. Improving Healthcare.
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A COMPARISON OF CLAIMS DATA AND EHR DATA AVAILABLE FOR 500 PATIENTS

CLAIMS DATA
The foundation for most healthcare analytics, Claims Data is easy to come by, but delayed, and short on details.

EHR DATA
Real-time, rich in clinical content, and right under your fingertips. EHR data enhances risk algorithms and informs outcomes-based measures.

<table>
<thead>
<tr>
<th>KHIE Data Sets</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>ADT/Patient Demographics</strong></td>
<td>Name, Address, Phone, DOB</td>
</tr>
<tr>
<td><strong>Lab Results</strong></td>
<td>Include any pathology results</td>
</tr>
<tr>
<td><strong>Radiology Reports</strong></td>
<td>Transcribed findings and recommendations</td>
</tr>
<tr>
<td><strong>Other Transcribed Reports</strong></td>
<td>Any other type of transcribed reports. Ex: Operative report, ED report, Cancellation Notice, H&amp;P. ANY document that is transcribed that a hospital wants to send.</td>
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<tr>
<td><strong>CCD/CCDA</strong></td>
<td>Summary of Care: Included when info is available in patient record</td>
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<tr>
<td><strong>Medicaid Claims Data</strong></td>
<td>Anything Medicaid or MCO has paid</td>
</tr>
<tr>
<td><strong>Immunization</strong></td>
<td>Anything available in WebIZ</td>
</tr>
<tr>
<td><strong>Syndromic Surveillance</strong></td>
<td>ADT and Diagnosis</td>
</tr>
<tr>
<td><strong>Reportable Labs</strong></td>
<td>Requirements from Public Health</td>
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### Number of Data Feeds

<table>
<thead>
<tr>
<th>Category</th>
<th>Total</th>
<th>Hospital</th>
<th>Other</th>
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</thead>
<tbody>
<tr>
<td>Immunization</td>
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<td>83</td>
<td>1828</td>
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<tr>
<td>ADT – Demographics</td>
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<td>901</td>
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<tr>
<td>Syndromic Surveillance</td>
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<td>820</td>
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<tr>
<td>Lab Results</td>
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<tr>
<td>Reportable Lab</td>
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<tr>
<td>Radiology</td>
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<tr>
<td>Transcribed Notes</td>
<td>23</td>
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<tr>
<td>Platinum</td>
<td>330</td>
<td>33</td>
<td>297</td>
</tr>
</tbody>
</table>

- 95% of hospitals submit data to KHIE

### Additional Contributors
- EMS & Correctional Facilities
- Behavioral Health
CMS CoP Hospital Electronic Notification

Acronym: C-HEN (it’s a work in progress)
CMS CoP Hospital Electronic Notifications

• Requires hospitals, psychiatric hospitals and critical access hospitals (CAHs) to make electronic patient event notifications available to applicable post-acute care services providers and suppliers, and to community practitioners such as the patient’s established primary care practitioner, established primary care practice group or entity, or other practitioner or practice group or entity identified by the patient as primarily responsible for his or her care.

• The hospital must demonstrate that its system’s notification capacity is fully operational and that the hospital uses it in accordance with all state and federal statues and regulations applicable to the hospital’s exchange of patient health information, and that its system sends the notifications either directly, or through an intermediary that facilitates the exchange of health information.

• The hospital must also demonstrate that the notifications include at least patient name, treating practitioner name and sending institution name.

• Upon the patient’s registration in the emergency department or admission to inpatient services, and also either immediately prior to, or at the time of, the patient’s discharge or transfer (from the emergency department or inpatient services), the hospital must also demonstrate that it has made a reasonable effort to ensure that its system sends the notifications to all applicable post-acute care services providers and suppliers, as well as to any of the following practitioners and entities, which need to receive notifications of the patient’s status for treatment, care coordination, or quality improvement purposes: (1) the patient’s established primary care practitioner; (2) the patient’s established primary care practice group or entity; or (3) other practitioner, or other practice group or entity, identified by the patient as the practitioner, or practice group or entity, primarily responsible for his or her care.
 KHIE C-HEN Data Flow

1. Notification
   - Notification Delivery through:
     - Direct Secure Messaging
     - ePartnerViewer
     - Directly in EMR (sftp/rest)
   - Look up recipient provider
   - Provider Directory

2. Recipient Provider
   - ADT Message with recipient provider details
   - Notification Delivery Report
   - Sending Facility

3. You are Here
Step 1: ADT Submission Requirements

- Support Following ADT’s
  - Patient Admit
  - Patient Discharge
  - Patient Transfer
  - Patient Emergency Admit
  - Patient Emergency Discharge

- To Be Provided in ADT
  - Required: Name and NPI of the Recipient
  - Additional Fields:
    - Organization Name and NPI of Recipient Organization
    - Direct Secure Address of Recipient

- HL7 Segments
  - ROL (Role)
  - PV 1.52 (Other Healthcare Provider)

- Treating Practitioner Required in ADT Submission, Optional in HL7
Step 2: Notification Delivery

• Delivery Options
  • Event Notification Integration (FHIR API) (Requires Organization NPI)
  • Future: Full HL7 ADT (Requires Organization NPI)
  • ePartnerViewer
  • Direct Secure Messaging

• Direct Secure Messaging
  • Direct Address in HL7
  • Direct Trust Directory
  • KY Medicaid Provider Directory
  • KHIE Provider Directory
Step 3: Submission Status

- Monthly Status Report Provided Back via SFTP
- Provides 2 Reports
  - Undelivered Notifications
  - Delivered Notifications
Implementation Status

- March 30 Production Implementation
- Work Can Begin Now!
  - Mapping Data to HL7
- Compliance for CMS CoP by May 1, 2021.
How KHIE Adds Value

**Low Investment**
- Hospital Currently Sending ADT

**Reduced Burden**
- Negates Hospital Developing Point-to-Point Connection

**Compliance**
- Supports Multiple Channels for Delivery

**Assurance**
- Queries Multiple Provider Directories
Access to Data
Making Data Available

- ePartnerViewer
- Platinum
- KASPER
- Event Notifications

- Medicaid Claims
- Direct Secure Messaging
- Patient Alert Query

KHIE
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