

MICHIGAN HEALTH INFORMATION TECHNOLOGY COMMISSION

August 20, 2015

The Michigan Health Information Technology Commission is an advisory Commission to the Michigan Department of Health and Human Services and is subject to the Michigan open meetings act, 1976 PA 267, MCL 15.261 to 15.275

Welcome & Introductions

- Commissioner Updates
- Recognition of Dr. Gregory Forzley

2015 Goals – August HIT Commission Update

Governance Development and Execution of Relevant Agreements

- Newest Payer Qualified Data Sharing Organizations (QOs):
 - **Upper Peninsula Health Plan (UPHP)**
 - **Mid-state Health Network**
 - **Blue Cross Complete of Michigan (BCC)**
 - **TotalHealthCare (THC)**
- Newest Consumer Qualified Organization (CQO):
 - **Medyear**
- New “Simple Data Sharing Organization” (SDSO):
 - **Michigan Health and Hospitals Association (MHA)**
- 46 Total “Trusted Data Sharing Organizations” with MiHIN
 - Qualified Organizations: 30
 - Sponsored & Other Sharing Organizations: 16

Technology and Implementation Road Map Goals

- Remote Identity Proofing Service final beta-testing (view demo at www.ripsiti.com)
- Initiated technical reviews for “Exchange Death Notifications” use case
- Immunization History/Forecast pilot ending; readying for production
- Statewide Consumer Directory data sharing with Personal Health Record successfully demonstrated
- Federation Framework – milestone completed
 - Successful setup of the framework for a federation with MiHIN in the Citizens Quality Assurance (QA) environment
 - Trusted non-State system able to utilize State-issued identities
- Hospital/Health System conformance with ADT requirements dramatically improving
 - Peer 1 hospitals achieving mostly green status (no reds)
- MiHIN “Patient Generator” used to create test data for HIMSS “Patient Matching Connectathon” August 14

2015 Goals – August Update

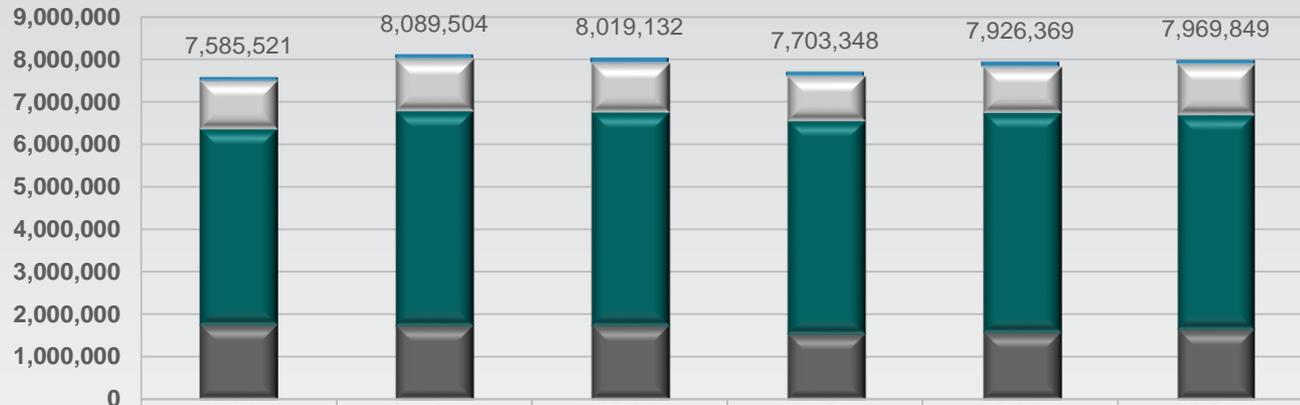
QO & VQO Data Sharing

- More than **372 million+** messages received since production started May 8, 2012
 - Have processed as many as **8 MLN+** total messages/week
 - Averaging **7.8 MLN+** messages/week
 - **5-6 MLN+ ADT** messages/week; **1.2 MLN+** public health messages/week
- Total 445 ADT senders, 34 receivers to date
 - Estimated **93%** of admissions statewide now being sent through MiHIN
- New patient match for **ADTs > 60%** match rate; sent **.581 MLN+** ADTs out last week
 - Common Key Service will increase match rate **> 90%**
- More than **512,000 Reportable Lab** messages received/sent to MDSS
- More than **12 MLN Immunization** messages received/sent to MCIR
- More than **56 MLN Syndromic Surveillance** messages received/sent to MSSS
- More than 150 Care Plans/Integrated Care Bridge Records (ICBR) per week
- Presently processing approximately **351,000 Discharges** per week (ADT A03)
 - **1.5+ MLN Medication Reconciliations at Discharge/month expected**

MiHIN Shared Services Utilization

- **5.6 MLN** patient-provider relationships in Active Care Relationship Service (ACRS)
- **4.7 MLN** unique patient records in ACRS
- **378,777** unique providers in statewide Health Provider Directory; **4,061** unique organizations
- ACOs, PIHPs, and Medicaid plans for Dually-Eligible to share CCDs by Oct. 1st
- Approaching **3,000** MIDIGATE transactions per week (via Direct Secure Messaging)
- MiHIN standard “personas” populated into MDHHS MMIS/Champs, MICAM, MCIR, and other key systems at State of Michigan for “gold standard” integration testing
- Presented information shared services to staff from Illinois Office of the Governor
- The second Medication Management White Paper event held virtually July 23
 - Next meeting will be in-person August 25 from 9:30-3pm
 - Expecting approx. 60 participants from several organizations

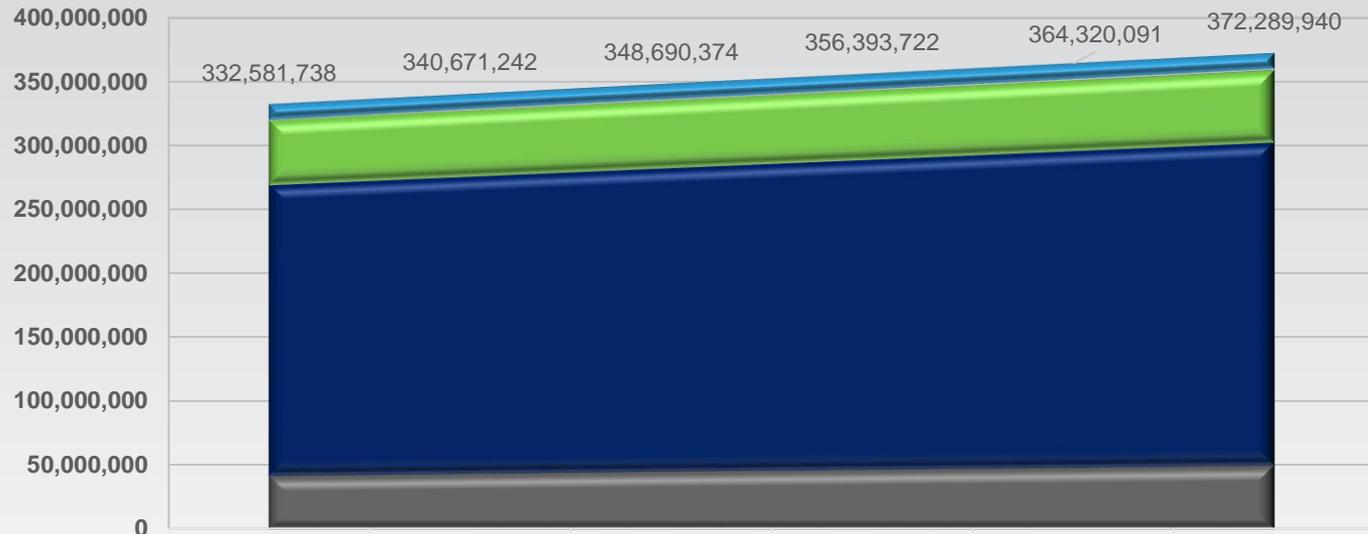
Weekly Message Volumes



	7/4/2015	7/11/2015	7/18/2015	7/25/2015	8/1/2015	8/8/2015
■ Submit Immunizations	83,925	90,174	109,141	99,289	107,261	93,842
■ Submit Reportable Labs	8,257	9,951	9,273	9,610	10,333	9,178
■ Submit Syndromic Surveillance Data	1,137,471	1,213,984	1,149,840	1,047,541	1,070,990	1,178,746
■ Submit ADT Notifications	4,606,101	5,048,799	5,024,282	5,019,478	5,167,887	5,054,962
■ Receive ADT Notifications	1,749,767	1,726,596	1,726,596	1,527,430	1,569,898	1,633,121
Total Messages	7,585,521	8,089,504	8,019,132	7,703,348	7,926,369	7,969,849



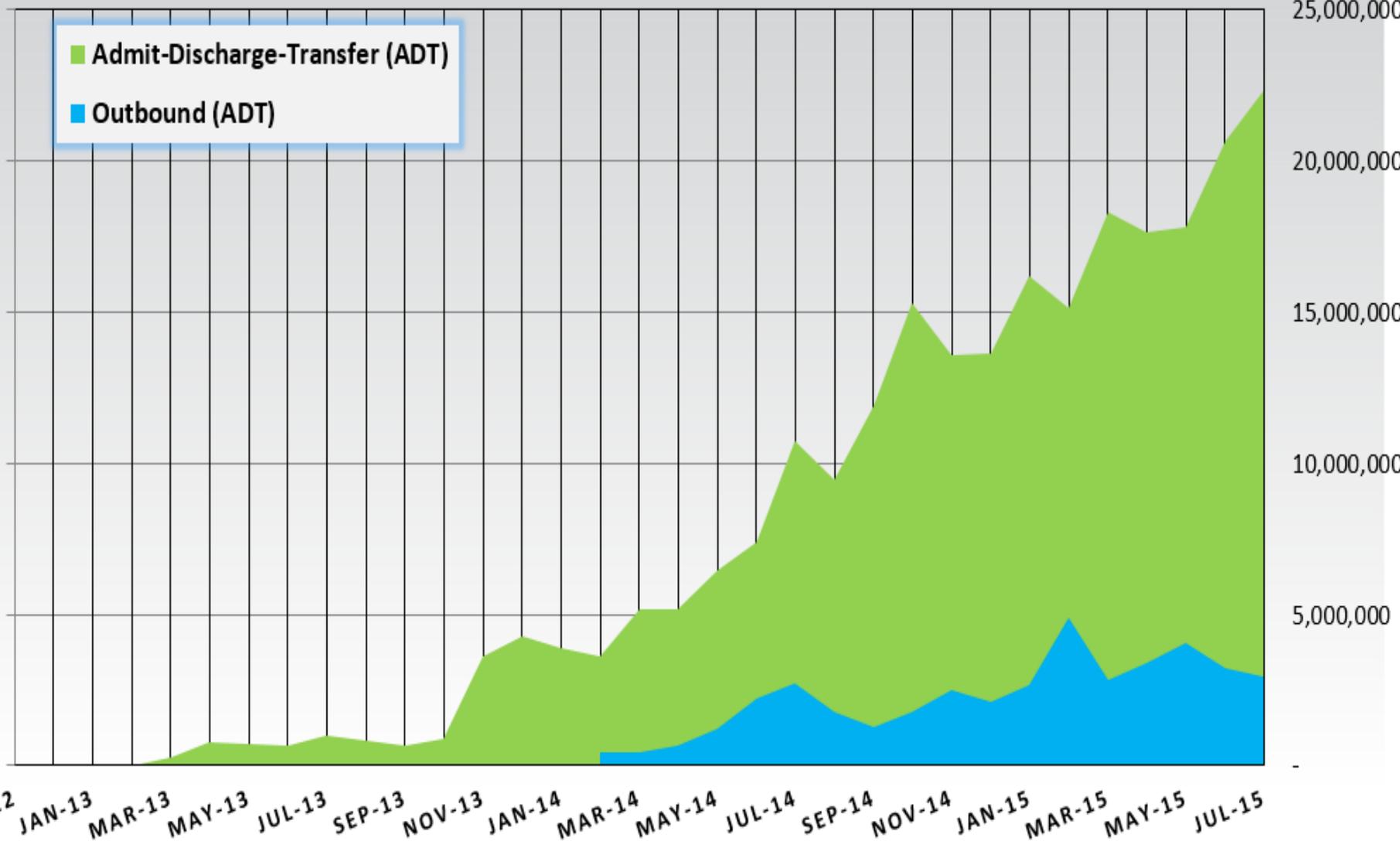
Cumulative Message Volumes



	7/4/2015	7/11/2015	7/18/2015	7/25/2015	8/1/2015	8/8/2015
Submit Immunizations	11,988,900	12,079,074	12,188,215	12,287,504	12,394,765	12,488,607
Submit Reportable Labs	464,544	474,495	483,768	493,378	503,711	512,889
Submit Syndromic Surveillance Data	50,964,812	52,178,796	53,328,636	54,376,177	55,447,167	56,625,913
Submit ADT Notifications	227,575,748	232,624,547	237,648,829	242,668,307	247,836,194	252,891,156
Receive ADT Notifications	41,587,734	43,314,330	45,040,926	46,568,356	48,138,254	49,771,375
Total Messages	332,581,738	340,671,242	348,690,374	356,393,722	364,320,091	372,289,940



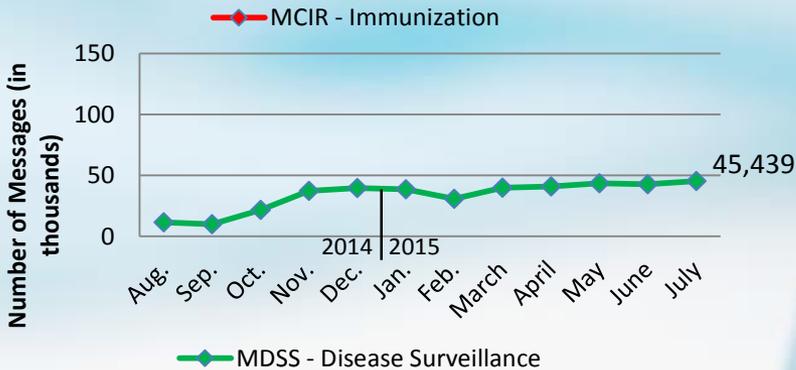
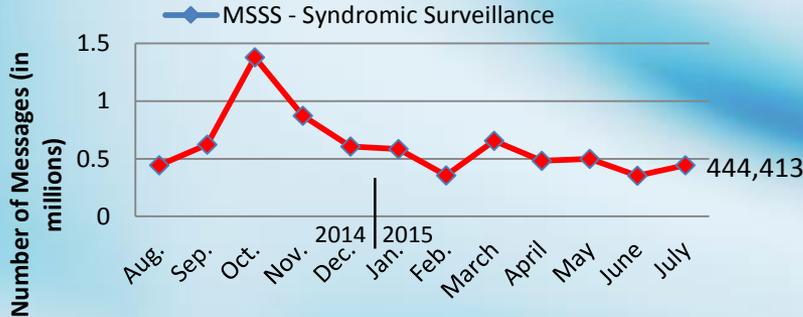
MONTHLY MESSAGE COUNT



NOV-12 JAN-13 MAR-13 MAY-13 JUL-13 SEP-13 NOV-13 JAN-14 MAR-14 MAY-14 JUL-14 SEP-14 NOV-14 JAN-15 MAR-15 MAY-15 JUL-15



Transmission Production Numbers



Future Transmission Types

- Newborn Screening CCHD
- Birth Defect Reports
- Cancer Case Reports
- MCIR Query

Project Updates

Consumer Engagement: Advanced Directives

Phase I of the Peace of Mind (POM) registry advance directive project will enable Medicaid beneficiaries the ability to upload advance directives directly to the POM registry via the myHealthButton (mHB)/myHealthPortal (mHP) . This initial phase is slated to go-live in September 2015.

Planning for Phase II of the project will commence in FY16. Phase II of the project will allow Medicaid beneficiaries to query and retrieve their Living Wills or other advanced directives. The ability to query and retrieve will utilize mHB/mHP, the Mi-Way Statewide Consumer Directory, and the Active Care Relationship Service (ACRS). These components will provide functionality that will allow beneficiaries to access their advanced directives no matter where they choose to store them.

Privacy and Security: MILogin Multi-Factor Authentication

Migrations of Medicaid Single Sign-On applications to the new MILogin system continue into FY16. Applications that contain Protected Health Information (PHI), Personally Identifiable Information (PII), or other sensitive information will be required to implement a new security feature that is available with MILogin. Multi-Factor Authentication (MFA) is a layer of security on top of the usual login password functionality. MILogin offers three multi-factor methods for receipt of the one-time password delivered by a) text messaging, b) email, or c) phone call to the customer's landline or cellphone. Many of us currently use MFA when we access our bank accounts via the internet. MILogin customers will also be able to register their mobile devices.



Participation Year (PY) Goals

August 2015 Dashboard

	Reporting Status	Prior # of Incentives Paid (June)	Current # of Incentives Paid (July)	PY Goal: Number of Incentive Payments	PY Medicaid Incentive Funding Expended
Eligible Professionals (EPs)	AIU 2013	1323	1323	1003	\$ 27,681,687
	AIU 2014	892	975	1000	\$ 20,477,929
	AIU 2015	14	41	500	\$ 821,669
	MU 2013	1207	1210	1043	\$ 10,157,515
	MU 2014	1106	1141	1444	\$ 9,602,178
	MU 2015	5	7	1702	\$ 48,168
Eligible Hospitals (EHs)	AIU 2013	16	16	15	\$ 6,864,231
	AIU 2014	3	3	17	\$ 3,036,526
	AIU 2015	0	0	5	\$ -
	MU 2013	80	79	70	\$ 28,089,553
	MU 2014	59	61	44	\$ 13,069,360
	MU 2015	0	0	28	\$ -

Cumulative Incentives for EHR Incentive Program 2011 to Present

	Total Number of EPs & EHs Paid	Total Federal Medicaid Incentive Funding Expended
AIU	4,992	\$ 183,585,971
MU	3,056	\$ 97,634,438

Key: AIU= Adopt, Implement or Upgrade MU= Meaningful Use

2015 Goals – August Update

Federally Funded REC

Supporting adoption and achievement of Stage 1 Meaningful Use with a minimum of 3,724 priority providers across Michigan's primary care community.

- **3,724(+)** *Milestone 1*: Recruitment of Eligible Priority Primary Care Providers (PPCPs); >100% to goal
- **3,724(+)** *Milestone 2*: EHR Go-Live with PPCPs; >100% to goal
- **3,724(+)** *Milestone 3*: Stage 1 Meaningful Use Attestation with PPCPs; >100% to goal

MDHHS Medicaid Program (90/10)

Supporting providers in Michigan with high volumes of Medicaid patients in attaining Meaningful Use.

- **612- Specialist Sign-Ups**: Recruitment of Medicaid eligible specialists (Non-Primary Care)
 - 343- AIUs | 17- 90day MU attestation | *Specialist Sign-Up breakdown: Behavioral Health 58%, Dentistry 31%, Optometry 6%, Other 5%*
- **594- Stage1Year1(or2) Sign-ups**: Recruitment of MEPs in Stage 1 of Meaningful Use
 - 262- AIUs | 119- MU attestations
- **145- Stage2Year1 Sign-ups**: Recruitment of MEPs in Stage 2 of Meaningful Use
 - 5- 90day MU Attestation

M-CEITA Provider Metrics

Client data provides insight into EHR adoption and Meaningful Use landscape across Michigan Providers.

- M-CEITA is eagerly anticipating the release of the Modified Stage 2 Final Rule. Among many anticipated changes for providers in 2015, the rule should include the change from a 365-day reporting period down to a 90-day reporting period for all EPs.
- M-CEITA is now offering Technical Assistance designed to assist EPs with understanding and attesting to PQRS program requirements.
- M-CEITA is now offering a new service line designed to assist providers who have been selected for a CMS or MDHHS Meaningful Use audit.

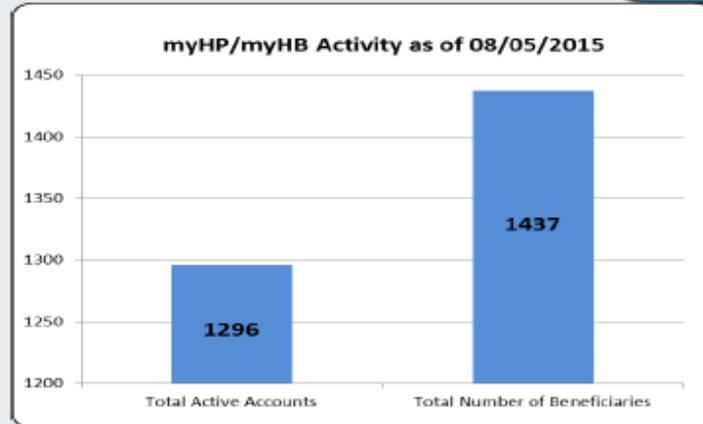
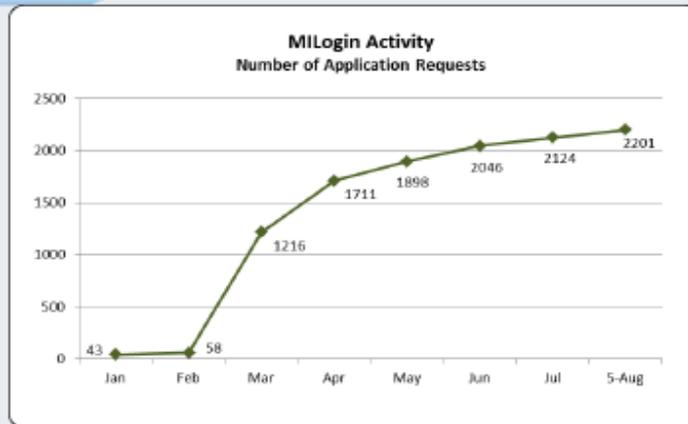
Quality Improvement Initiatives

Expanding our focus to assist providers with future stages of MU, other quality process improvements and public health priorities with an emphasis on EHR-enabled improvements.

- M-CEITA has completed Year 1 activities under the MDHHS/CDC 1305 grant, teaching healthcare teams state-wide how to leverage Health IT to improve HTN & DM management and have been contracted to continue with add'l Year 2 work which includes developing an "eUniversity" for Health IT strategies and tools related to HTN and DM.
- Under the MDHHS/CDC 1422 grant, M-CEITA is providing Technical Assistance to selected MI communities, working directly with healthcare providers and their teams to teach best practices in how to leverage Health IT to improve hypertension rates.
- M-CEITA continues to be an active participant in the multi-state ASTHO Million Hearts Learning Collaborative, partnering with MDHHS and other stakeholders to improve hypertension rates in selected clinics in the Muskegon area.



myHealthButton/myHealthPortal Dashboard



Updates:

6.0 Release (September 2015)

- ◊ Upload MiWay Consumer Advance Directives for the Peace of Mind Registry
- ◊ View claim/encounter data
- ◊ Provide authorizations for the release of protected health information (PHI)
- ◊ Upload clinical documents (Continuity Care Documents)
- ◊ MDHHS-generated online alerts, notifications and surveys

Outreach Activities (July-September 2015)

- ◊ Facebook Promoted Posts
- ◊ Facebook Mobile App Installation Ads
- ◊ Targeted Desktop Display Advertisement

August 2015

Consumer Engagement Dashboard

Stakeholder Collaboration

Consumer Engagement Interest Group Call

August Call: the MSU Institute for Health Policy will be presenting on “Meaningful Use: Opportunities to Improve Patient-Specific Clinical Summaries” and we will meet our newest member, Dr. Nickell Dixon – MDHHS’s Health Equity Coordinator.

Next Calls

Tuesday, August 18th
2:00pm – 3:30pm

Number: 1-415-655-0001
Access Code: 199 355 146

Meeting Link:

[https://meetings.webex.com/collabs/
#/meetings/detail?uuid=M3F7T3JAS3
1A9FZUZPB EFUC7CF-
5781&rnd=859930.76052](https://meetings.webex.com/collabs/#/meetings/detail?uuid=M3F7T3JAS31A9FZUZPB EFUC7CF-5781&rnd=859930.76052)

Outreach & Education

Health IT Education Campaign

Louisiana launched it’s statewide campaign on August 1st – “[Your Health In Your Hands](#).” The site includes resources and guides on patient portals, EHRs, and health information exchange. The campaign will include a social media presence as well as, a statewide media campaign – TV ads, radio ads, billboards, etc.

The Consumer Engagement Team is meeting with Louisiana Health Care Quality Forum to learn about Louisiana’s approach.

The Team is also meeting with state partners to work on creating a health IT education campaign in Michigan. The purpose would be to both educate consumers on what health IT is and its benefits on public & individual health.

Michigan’s outreach materials so far include:

Videos

- “[Improving Health in Michigan through Health IT](#)” – explains the overall benefits of health IT
- “[Michigan Health Information Exchange Landscape](#)” – explains the architecture of HIE in Michigan

Infographics

- Personas that describe how consumers benefit from using health IT – attached

Online

- www.MichiganHealthIT.org – a website for providers that includes resources on the EHR Incentive Program and consumer engagement.

HIT/HIE August 2015 Updates

- August HIT Commission Dashboard
- MDHHS Project Updates
- HIT Commission Action Plan
- Public Comment

HIT Commission Action Plan

- The HIT Office created the initial draft of the action plan, which is based upon the 2014 Annual Report and June 2015 Strategic Planning Meeting.
- The action plan covers two years (2015 and 2016) and includes actions items with progress measures.
- The HIT Office also developed a list of potential agenda topics for the remaining meetings in 2015 as well as upcoming meetings in 2016.

Update on the Peace of Mind Registry

Amy Olszewski, Gift of Life Michigan
Meghan Vanderstelt, MDHHS



MI Peace of Mind

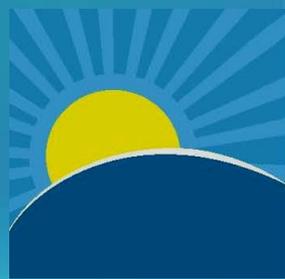
MICHIGAN'S ADVANCE DIRECTIVE REGISTRY

Peace of Mind Registry Update: August 2015

Amy Olszewski, MPA
Donor Services Center Director
Gift of Life Michigan

Peace of Mind Registry

- Established by statute in 2012
- Direction and oversight: Michigan Department of Health and Human Services (MDHHS)
- Administration: Gift of Life Michigan through contract with MDCH
- Grant received from Gift of Life Foundation to fund registry initiation



Peace of Mind Registry

Who?: Anyone will be able to open an account on the website.

What?: Advance directives are not defined. The person uploads a file to their personal account. Neither MDHHS nor Gift of Life Michigan will view personal advance directives.

Where?: www.MIpeaceofmind.org



Three Aspects of Registry

- Users (account creation/upload)
- Access (health care providers/download)
- Interactive electronic advance directive



Users: Development in 2013

- Law passed that Healthy Michigan plan enrollees must be offered the option to upload an advance directive to the Peace of Mind registry
- Can use own advance directive or complete a DHHS-approved document (includes an option to decline)
- Users can upload own registry or send in to be uploaded by Gift of Life Michigan





MIPeaceofMind

MICHIGAN'S ADVANCE DIRECTIVE REGISTRY



MIPeaceofMind

My Account

Resources

Questions

Home

Welcome to the Peace of Mind Registry.

Someday, an illness or injury may leave you unable to make important health care decisions for yourself. To prepare for that possibility, you may want to write down your wishes in an advance directive. An advance directive can help ensure your wishes are honored in the future.

Preparing an advance directive is voluntary - no one requires you to do so. But if you do, it's important that you make that document accessible to health providers who will care for you someday so your wishes are known and honored.

You can use this Registry to keep a copy of your advance directive. Your advance directive will soon be available to your doctors and to a hospital, nursing home, or other health care provider when you are a patient or resident. In the meantime, please carry your wallet card and present it to a health care provider so they may request a copy of your advance directive.

If you sign an advance directive, it is your choice whether to participate in this Registry. Registration does not affect whether the document is legally binding.

Even if you register your advance directive, you always have the right to revoke it.

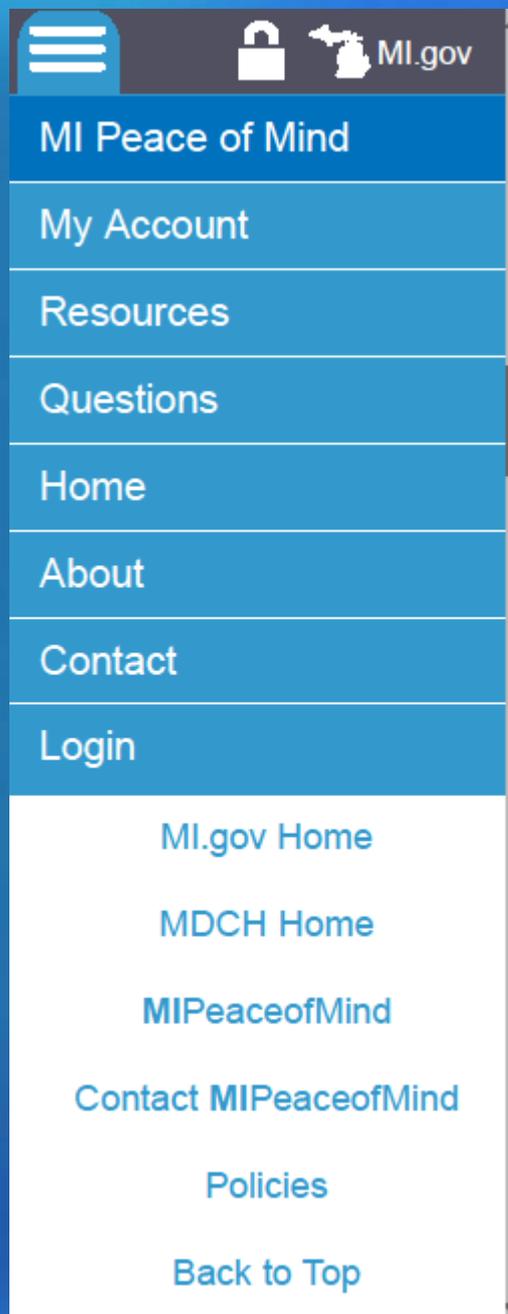
There is no cost to you to register your advance directive. There is no cost to health care providers to have access to your advance directive.

At this website, you can:

- Learn more about advance directives, and view sample advance directive forms, by clicking on, [Resources](#)



Mobile Phone



A vertical navigation menu for a mobile application. At the top is a dark grey header with a white hamburger menu icon, a white padlock icon, a white outline of the state of Michigan, and the text "MI.gov". Below the header are ten blue menu items: "MI Peace of Mind", "My Account", "Resources", "Questions", "Home", "About", "Contact", and "Login". Below these is a white section containing seven blue text links: "MI.gov Home", "MDCH Home", "MIPeaceofMind", "Contact MIPeaceofMind", "Policies", and "Back to Top".

- MI.gov
- MI Peace of Mind
- My Account
- Resources
- Questions
- Home
- About
- Contact
- Login
- MI.gov Home
- MDCH Home
- MIPeaceofMind
- Contact MIPeaceofMind
- Policies
- Back to Top



Users: Status

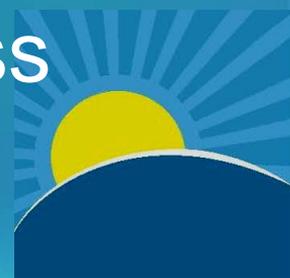
- Soft Launch in March 2015 with Healthy Michigan mailing
- Call For: Ideas on how to message the registry and possibly combine with other advance directive campaigns

“Now that you have completed your advance directive, please upload it to the secure website, MIPeaceofMind.org”



Users: Current State

- As of this week (August 14, 2015), more than 1020 registrants through the soft launch rollout.
- Almost all registrants are a result of the Healthy Michigan mailing (eventual outreach to almost 600,000 residents)
- Majority of users access through their desktop, but about 20% regularly access through their mobile phone.

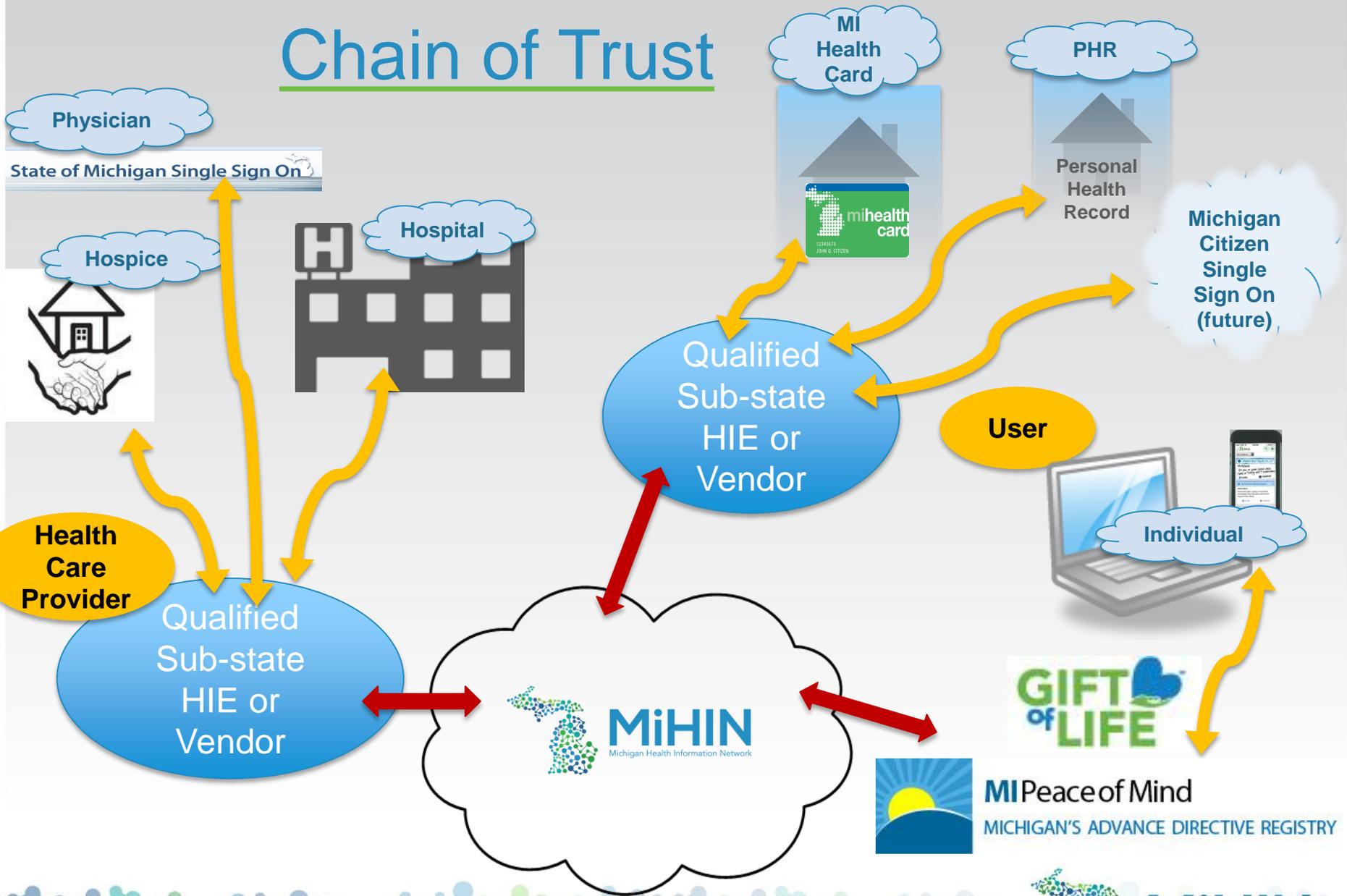


Access: MiHIN

- Currently working with MiHIN (Michigan Health Information Network) to work through the electronic Health Information Exchanges (HIEs)
 - Pull directives through MiHIN – convenience for users through one account/seamless
 - Push directives through MiHIN – convenience for health care providers/one signon and electronic search and upload



Chain of Trust



Access: Status

- June 2015 - Pull of advance directives through exchange piloted
- Fall 2015 - Soft launch of pull of advance directives through select exchanges
- Fall 2015 - Push of advance directives (testing/pilot program)
- Jan 2016 - Rollout push and pull of registries through HIE plans
- Spring 2016 – Finalize accounts for providers not in HIEs (e.g., select hospice programs)



Access: Current State

- With every account creation and upload of a document to the Peace of Mind Registry, a wallet card is issued
- Participants are asked to produce the wallet card and the provider can call the 24/7 hotline to obtain a copy of the registry



Questions?

Amy Olszewski

aolszewski@giftoflifemichigan.org

866-500-5801 x1014

Concerns?

Meghan Sifuentes Vanderstelt

VandersteltM@michigan.gov

517-241-2963



Panel Discussion on Advance Directives and Health Information Technology

Jason Werner, MDHHS

Rick Wilkening, Michigan Health Information Network

Doug Dietzman, Great Lakes Health Connect

Kate LaBeau, Upper Peninsula Health Plan

Amy Olszewski, Gift of Life Michigan



myHealth Button/myHealth Portal integration with Peace of Mind Registry

Jason Werner - MDHHS



Medicaid EHR
INCENTIVE PROGRAM



How did this all start?

- PA 179 of 2012
- Healthy Michigan Plan
- myHealth Button/myHealth Portal Go-live
- Statewide Consumer Directory, Master Person Index & Common Key Service Go-live

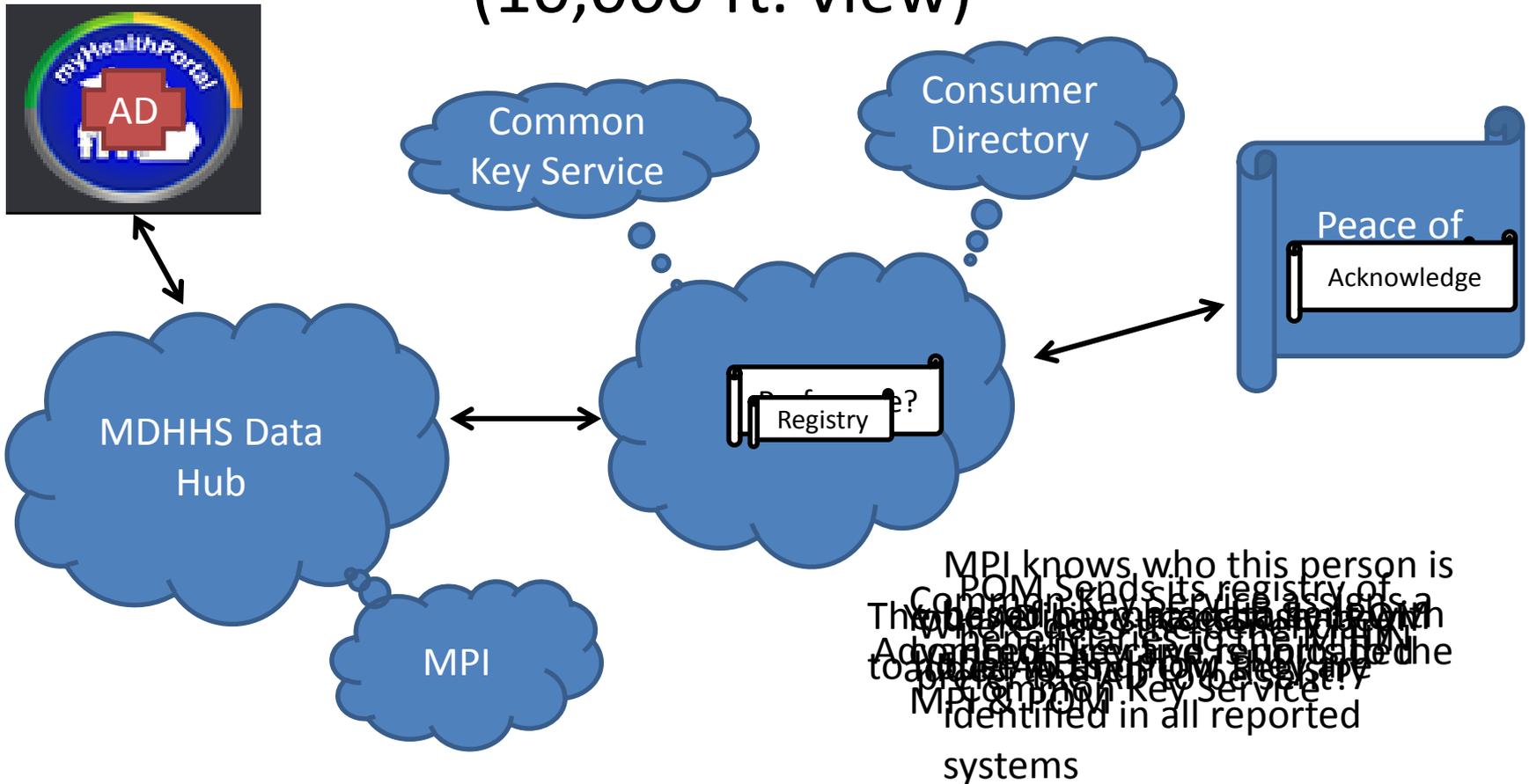


Use Cases

- First Use Case (Phase 1):
 - Add Advanced Directives from the myHealthPortal and myHealthButton into the Peace of Mind (POM) Registry. **Going Live September 25, 2015.**
- Second Use Case (Phase 2):
 - Use the myHealthPortal and myHealthButton to query Advance Directives from the Peace of Mind (POM) Registry. **Going live March 25, 2016.**

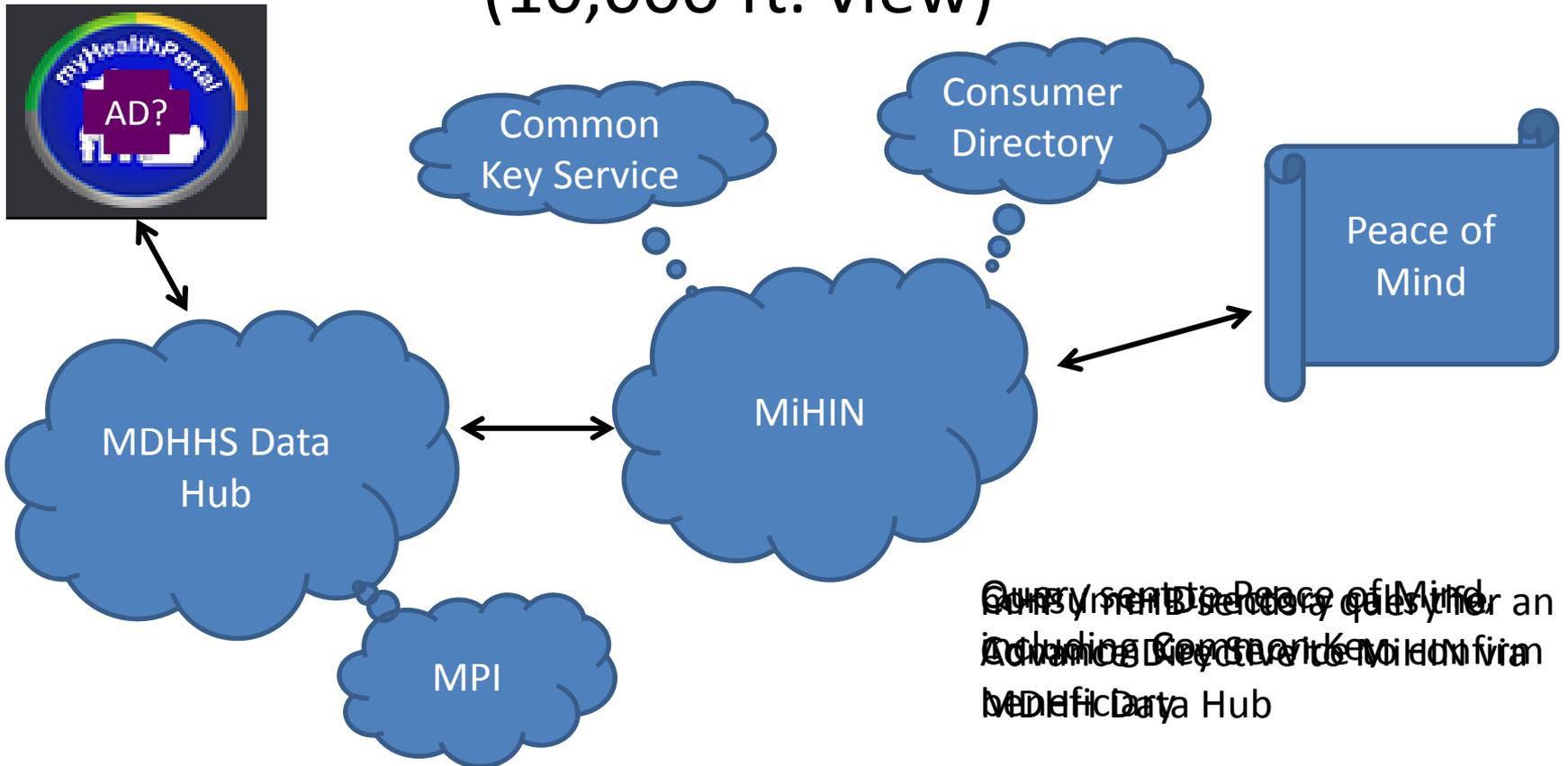
How Will This Work?

Phase 1 – Advance Directive stored in POM (10,000 ft. view)



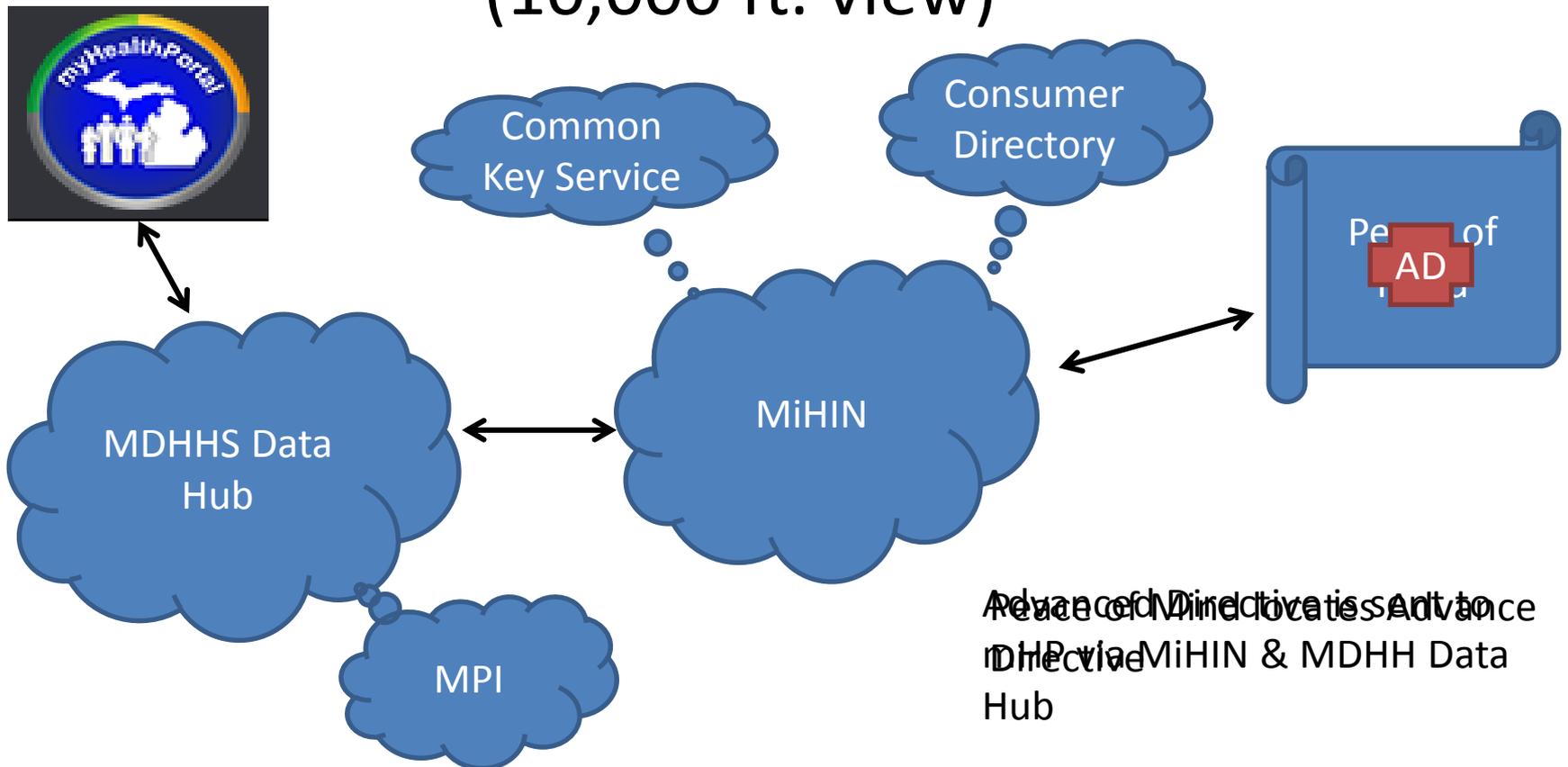
How Will This Work?

Phase 2 – Query Advance Directive from POM (10,000 ft. view)



How Will This Work?

Phase 2 – Return Advance Directive from POM (10,000 ft. view)



Ryan Paulson

Ryan Paulson



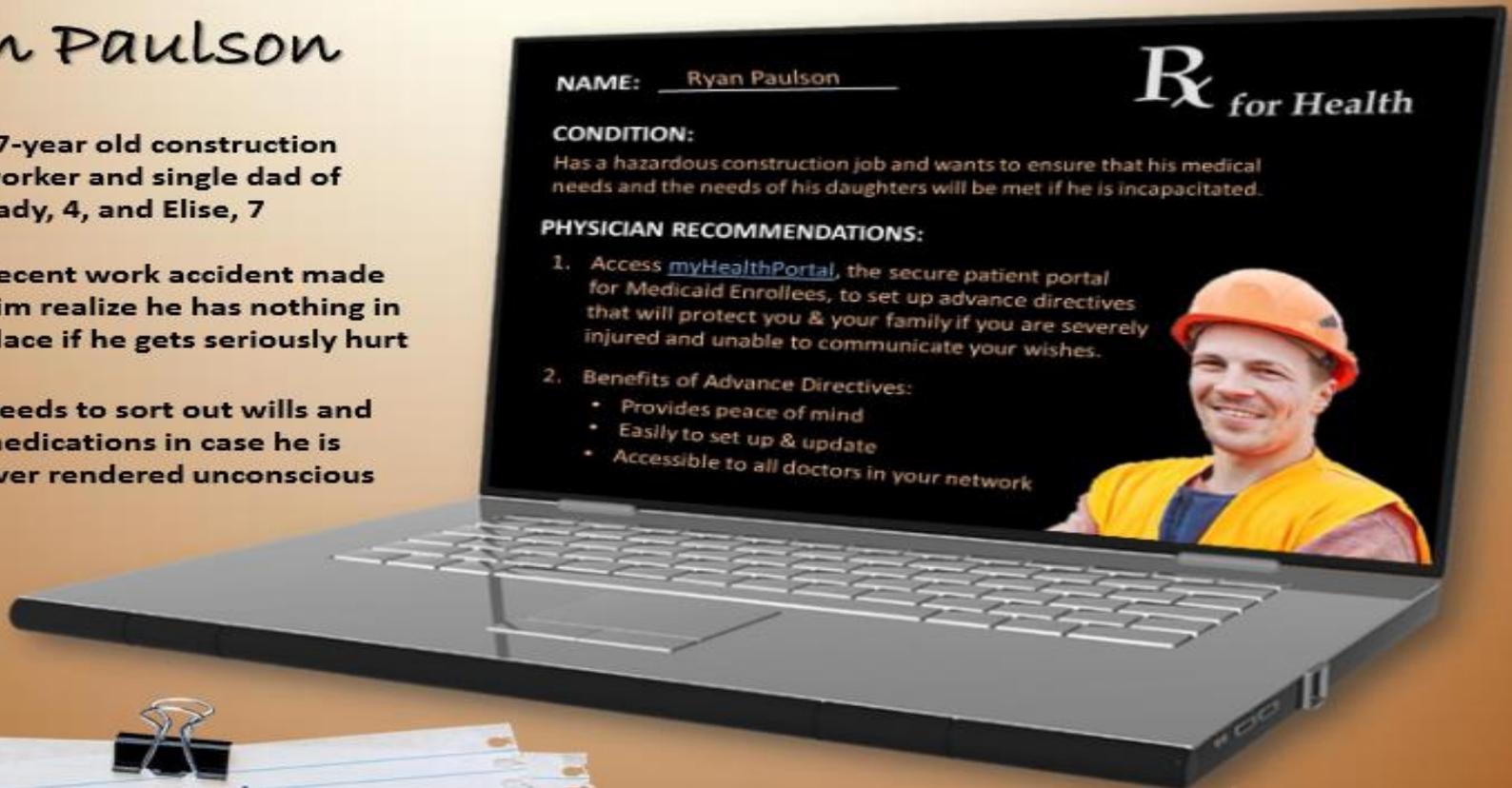
37-year old construction worker and single dad of Cady, 4, and Elise, 7



Recent work accident made him realize he has nothing in place if he gets seriously hurt



Needs to sort out wills and medications in case he is ever rendered unconscious



My Goals

1. Create a will and set up my medical information permissions
2. Assign power of attorney to my brother, Zachary

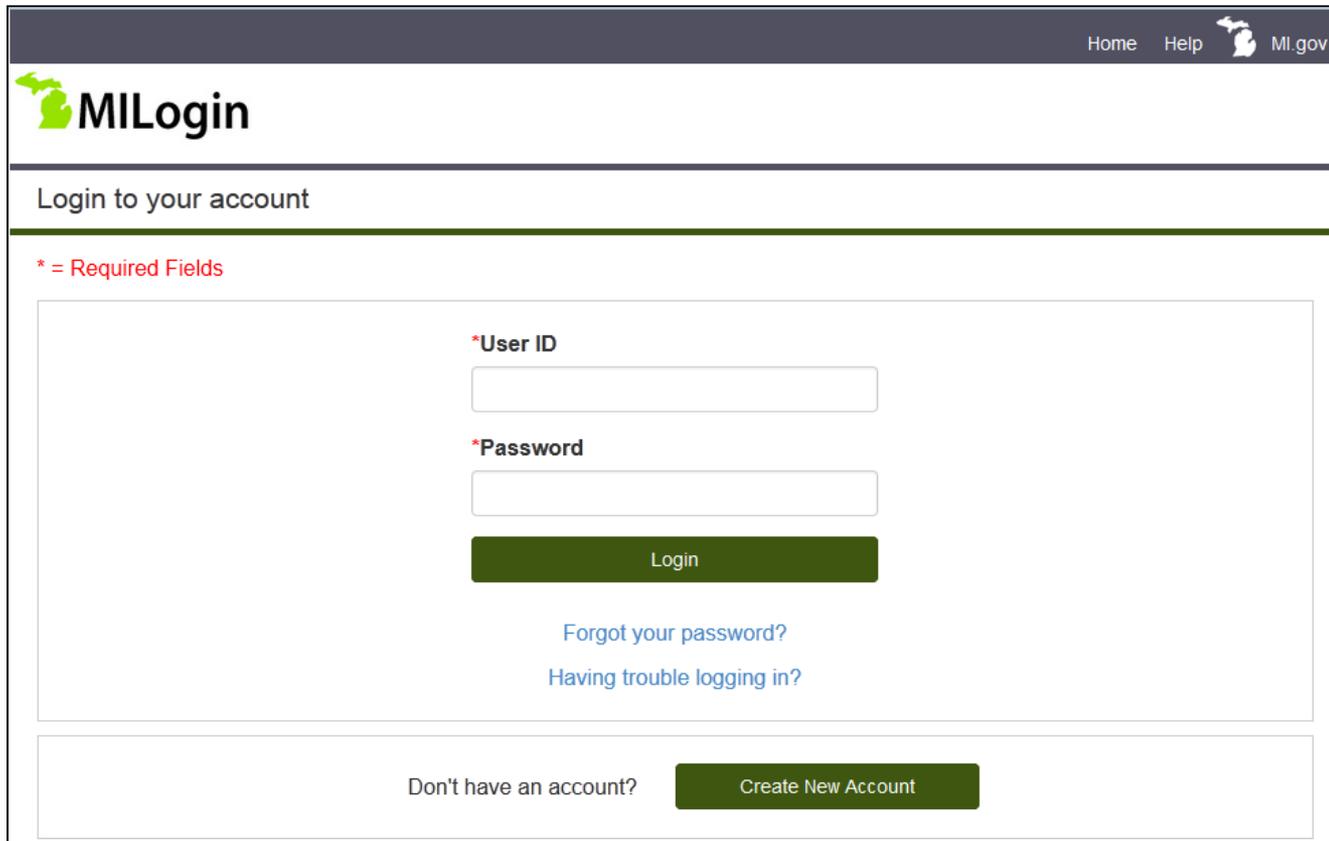
How Will This Work?

1) Beneficiary visits MI Page



How Will This Work?

2) Secure Login (MiCAM)



The screenshot shows the MiLogin secure login interface. At the top right, there are links for "Home", "Help", and "MI.gov" with a small Michigan state icon. The main heading is "MiLogin" with a green Michigan state icon. Below this, the text "Login to your account" is displayed. A red asterisk note indicates "* = Required Fields". The login form contains two input fields: "*User ID" and "*Password". Below the password field is a green "Login" button. Underneath the button are two blue links: "Forgot your password?" and "Having trouble logging in?". At the bottom of the form, there is a link "Don't have an account?" and a green "Create New Account" button.

Home Help  MI.gov

 MiLogin

Login to your account

* = Required Fields

*User ID

*Password

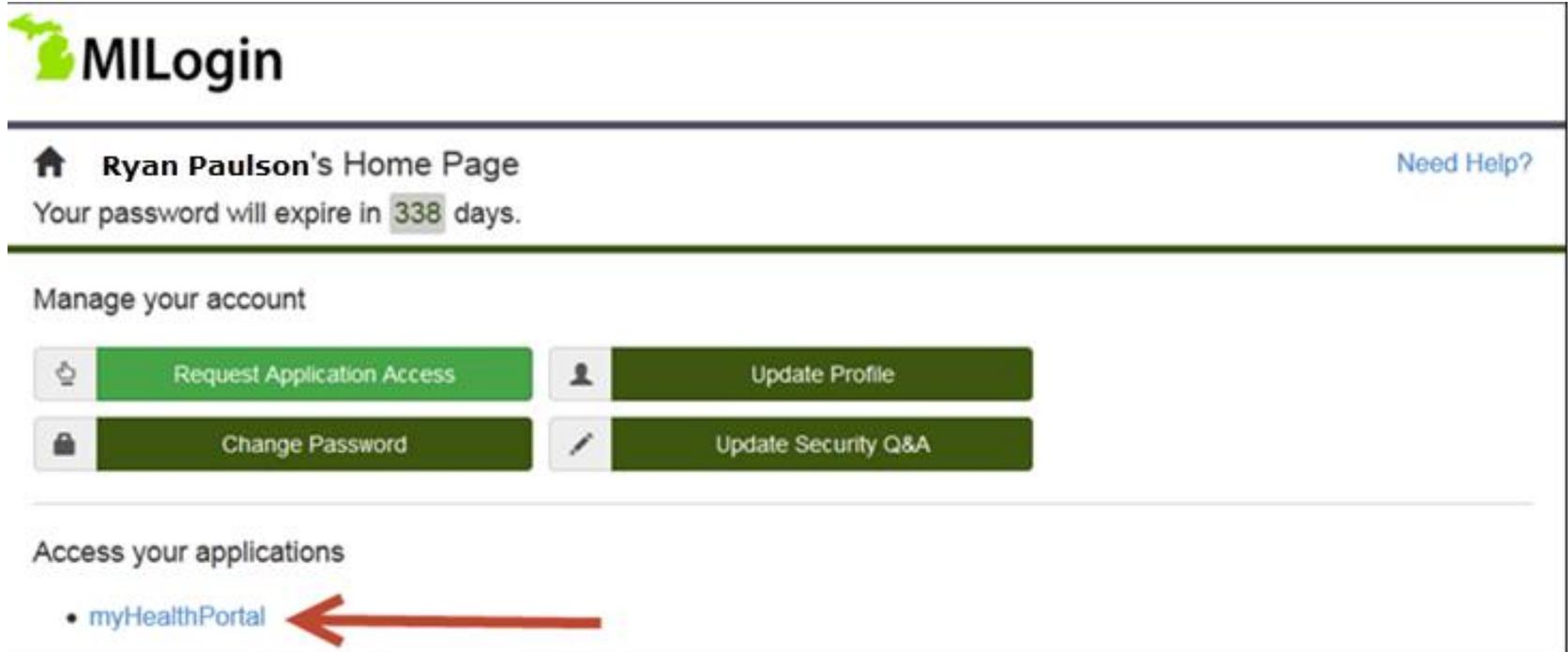
Login

[Forgot your password?](#)
[Having trouble logging in?](#)

Don't have an account? [Create New Account](#)

How Will This Work?

3) Access myHealthPortal from applications list



The screenshot shows the MILogin user interface. At the top left is the MILogin logo, which includes a green outline of the state of Michigan. Below the logo, the user's name "Ryan Paulson's Home Page" is displayed next to a home icon. To the right of the name is a "Need Help?" link. Below the name, a notification states "Your password will expire in 338 days." The main content area is titled "Manage your account" and contains four buttons: "Request Application Access" (with a key icon), "Update Profile" (with a person icon), "Change Password" (with a lock icon), and "Update Security Q&A" (with a pencil icon). Below this section is the "Access your applications" section, which lists "myHealthPortal" with a red arrow pointing to it.

MILogin

🏠 **Ryan Paulson's Home Page** [Need Help?](#)

Your password will expire in **338** days.

Manage your account

- 🔑 Request Application Access
- 👤 Update Profile
- 🔒 Change Password
- ✍️ Update Security Q&A

Access your applications

- [myHealthPortal](#) ←

How Will This Work?

[Advance Directive \(AD\)](#)

Someday an illness or injury may leave you unable to make important health care decisions for yourself. To prepare for that possibility, you may want to write down your wishes in an advance directive. An Advance Directive (AD) can help ensure your wishes are honored in the future. For additional information please go to <https://www.mipeaceofmind.org>. If you would like to upload your AD, you can do so by [uploading file here directly](#). Your AD will be sent over to Peace of Mind without having to create a separate user account.

[Authorization To Disclose Protected Health Information](#)

The rules, which are part of the Health Insurance Portability & Accountability Act (HIPAA), restrict access to protected health information by anyone not involved in treatment, payment or health care operations without the patient's permission.

Protected health information is information that is identifiable to an individual. Some examples of individual identifiers are:

- Name
- Address
- Telephone numbers
- Birthdate
- Medicaid ID number and other medical record numbers
- Social Security number
- Name of employer

In most instances, the Department must have the individual's authorization in order to disclose their health information. Individuals that request the disclosure of their protected health information are

How Will This Work?

Advance Directive (AD)

← Back

Advance Directive (AD)

Please upload the document

Upload



Advance Directive Upload History

Search by Date Range *
(MM/DD/YYYY)

Start 07/12/2015



End 08/11/2015



Range v

Search

S.No	File Name	Date Uploaded	Submit Status
1	MDHHS_Agency_Header_Logo_485531_7 (1).png	08/11/2015	
2	PHIPDFBox4-2.pdf	08/05/2015	
3	Application_Update_details_28_nov_2012.pdf	08/04/2015	
4	county.txt	08/03/2015	
5	PHIPDFBox4.pdf	07/31/2015	
6	Look_and_Feel_Standards_302051_7 (1).pdf	07/31/2015	
7	MDHHS_Agency_Header_Logo_485531_7 (1).png	07/30/2015	
8	MDHHS_Agency_Header_Logo_485531_7 (1).png	07/30/2015	
9	test_upload.txt	07/22/2015	
10	test_upload.txt	07/22/2015	

Showing 1 - 10 out of 45

1 2 3 4 5

Please note that only documents uploaded through the application are displayed here. To view the documents please visit here <https://www.mipeaceofmind.org>.

How Will This Work?

Advance Directive (AD)

 Advance Directive (AD)

Please upload the document  Up

 Advance Directive Upload History

Search by Date Range *
(MM/DD/YYYY)

S.No 

1

2

3

4

Upload Attachment

Fields marked * are mandatory

First Name : Ryan

Last Name : Paulson

Date of Birth : 01/15/1978

Member ID : 000000011

File Path *

I understand that this document will be sent to Peace of Mind registry *

 Submit

 Cancel

How Will This Work?



Your Advanced Directive document has been successfully uploaded. Shortly an alert along with an email will be sent to confirm your document was accepted by the Peace of Mind Registry.

Michigan
Department of Health and Human Services

You can always go to <https://www.mipeaceofmind.org> to view the attachment.

A wide-angle photograph of a suspension bridge at dusk. The bridge's two main towers are illuminated with a warm yellow light, and the sky is a mix of orange and purple. The word "Questions?" is written in a large, white, serif font across the upper portion of the bridge.

Questions?

www.MichiganHealthIT.org

Electronic storage and transfer of advance care planning documents

*How Michigan approaches the secure,
electronic exchange of health information*

Rick Wilkening

Director, Major Accounts and Emerging Solutions
Michigan Health Information Network Shared Services

rick.wilkening@mihin.org



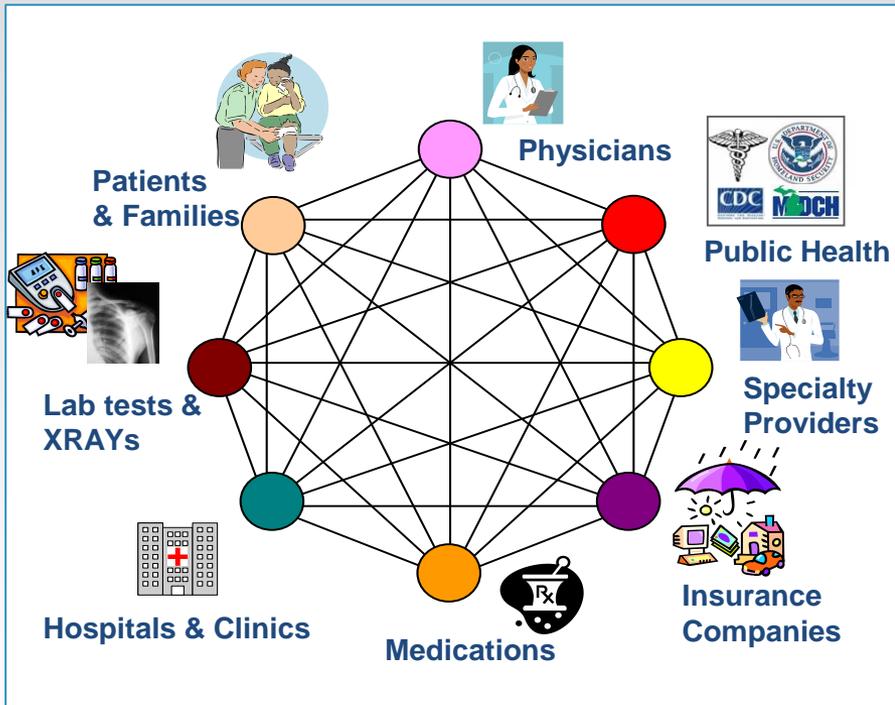
MiHIN Is

***Michigan's statewide
network for *sharing* health
information***

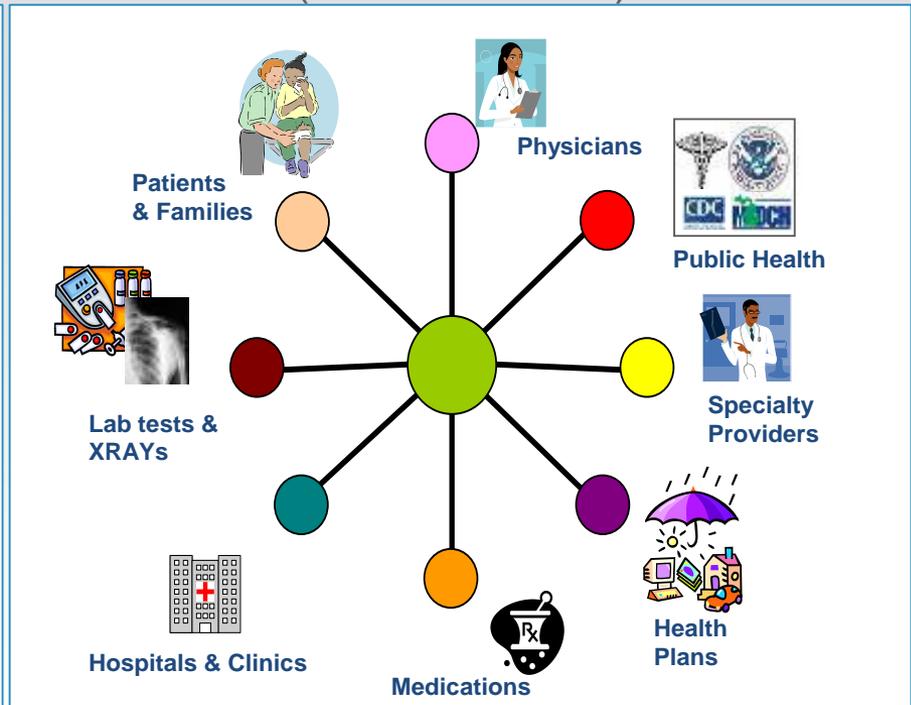


Statewide Coordination

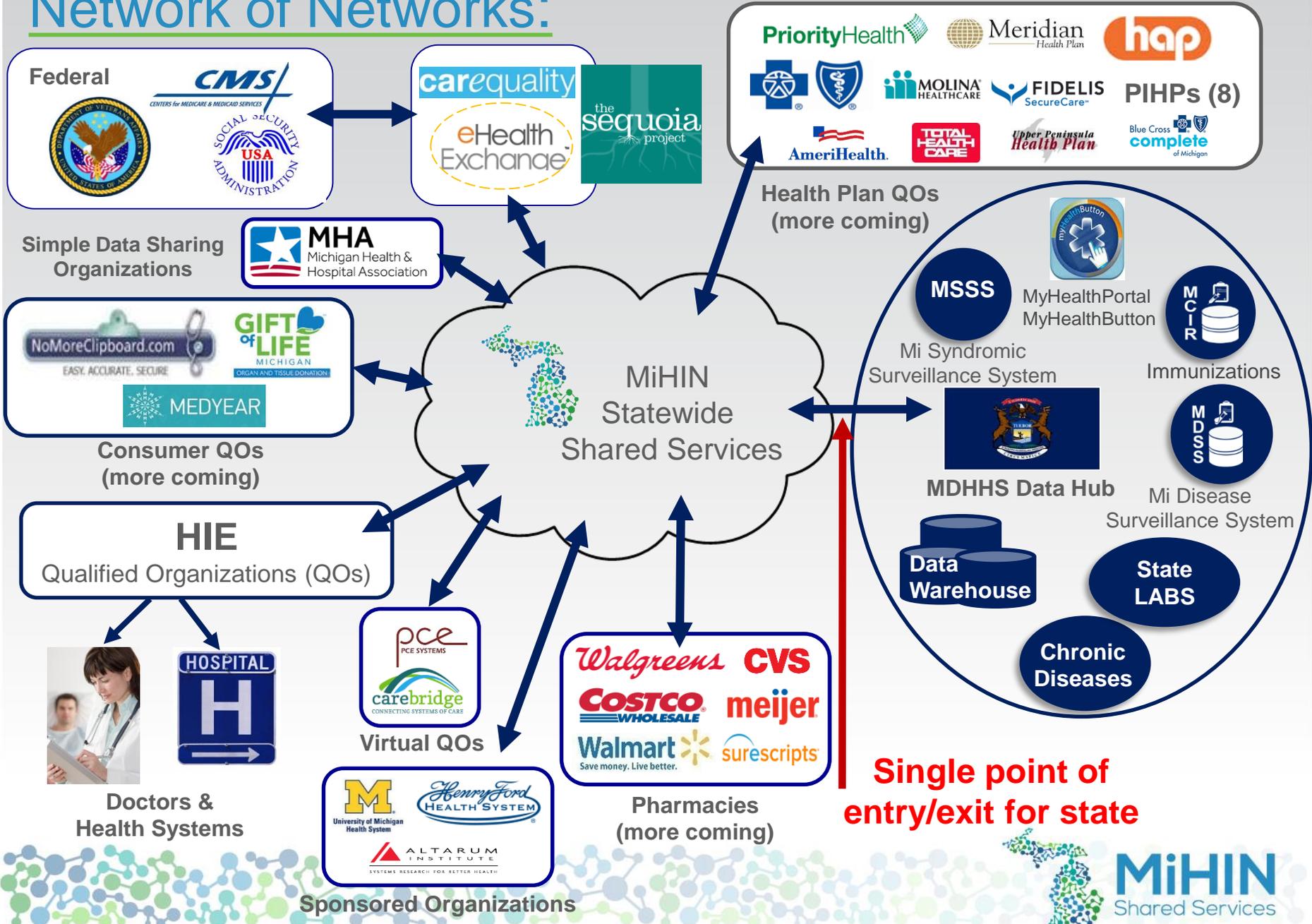
Duplication of effort, waste, & expense
($N*(N-1)/2$ connections)



Shared Services
(N connections)



Network of Networks:



Legal Infrastructure for Trusted Data Sharing Organizations (TDSOs)

ORGANIZATION AGREEMENT
(QDSOA, VQDSOA, CQDSOA,
SSOA, SSSOA, DDSOA, SDSOA)

Definitions

HIPAA Business Associate Terms

Basic Connection Terms & SLA

Cyber Liability Insurance

Indemnification & Liability

Contracting & Payment

Dispute Resolution

Term & Termination

Data Sharing Agreement

Use Case
#1

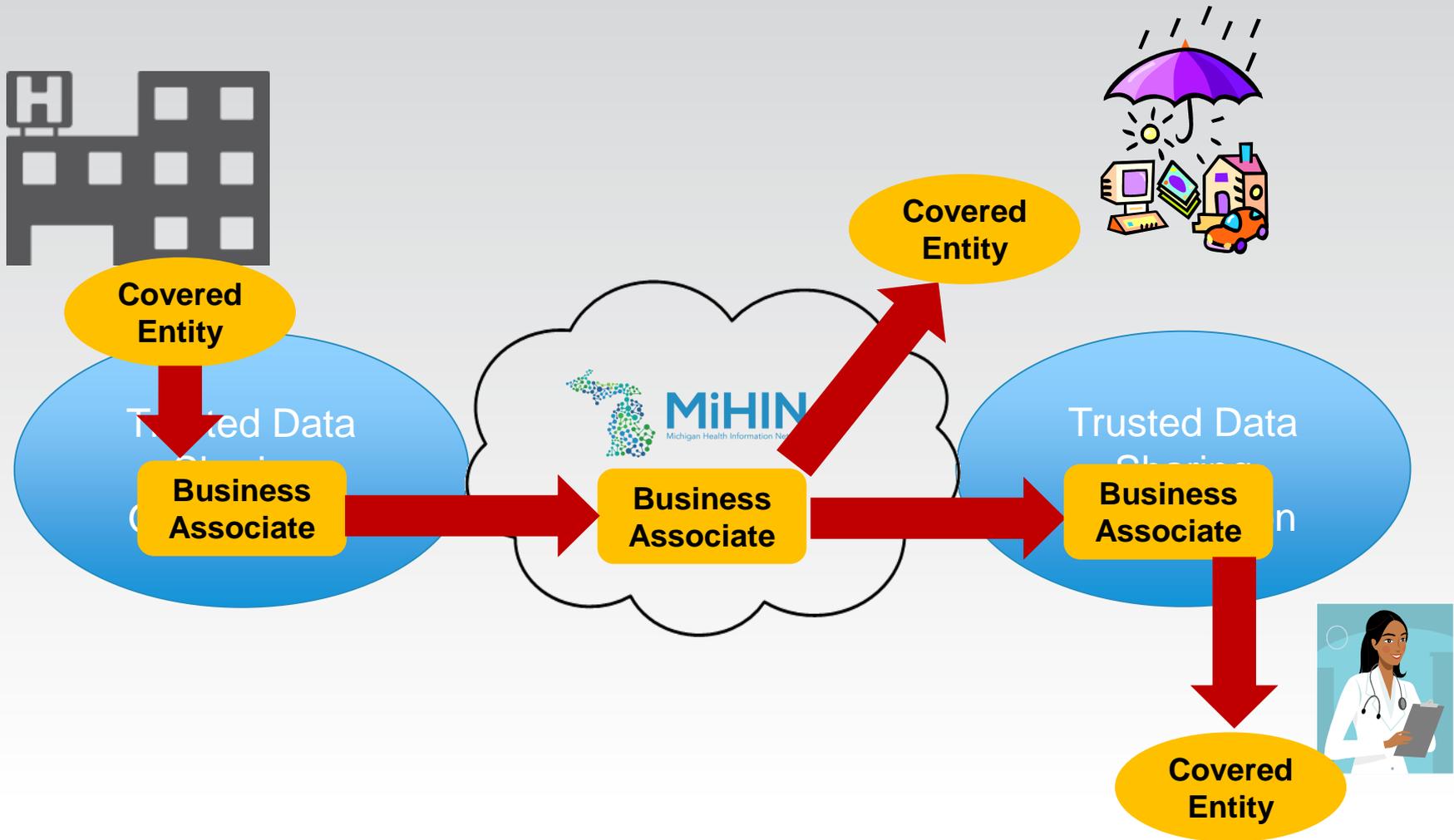
Use Case
#2

Use Case
#3

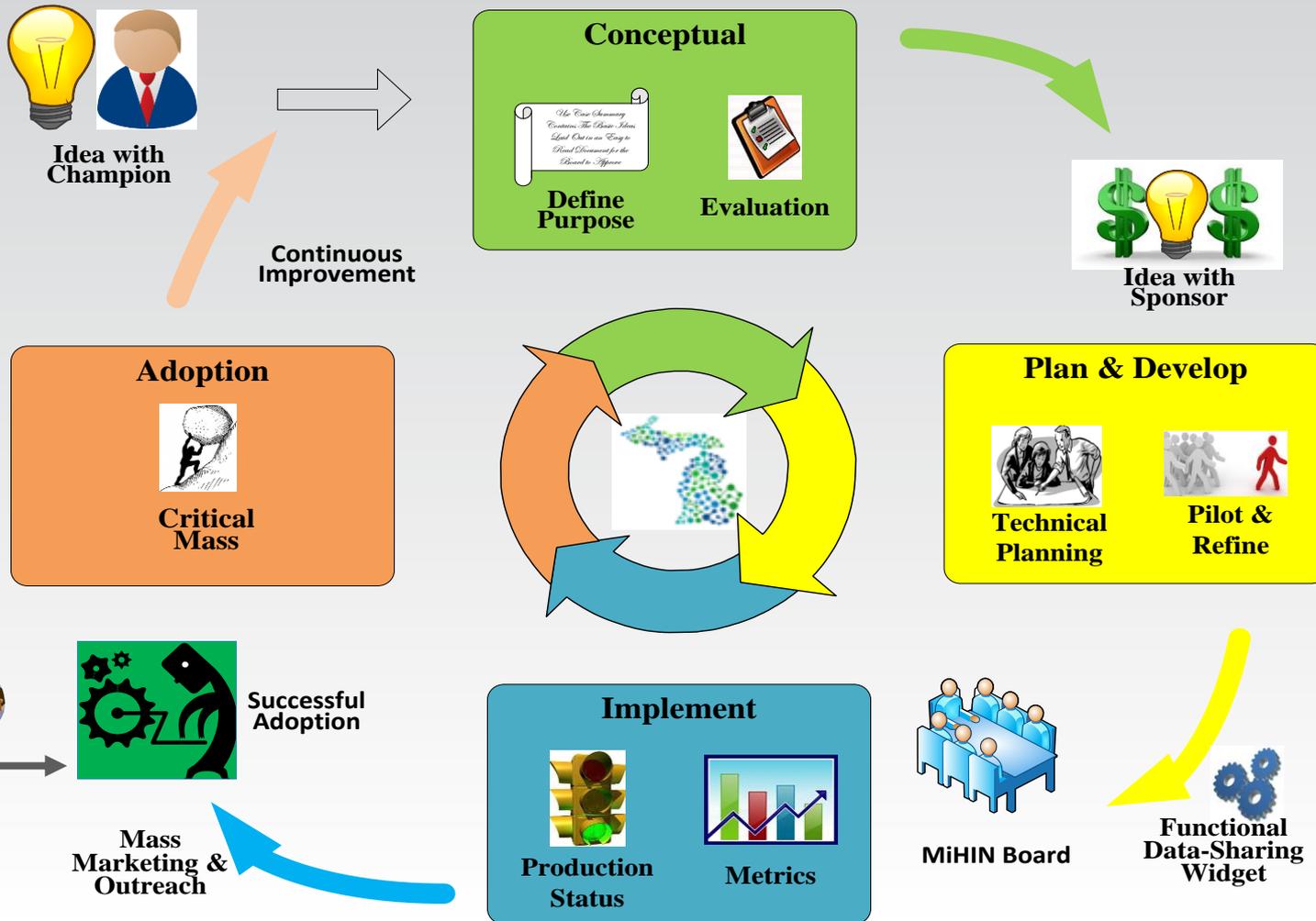
Use Case
#N



Clear Chain of Trust



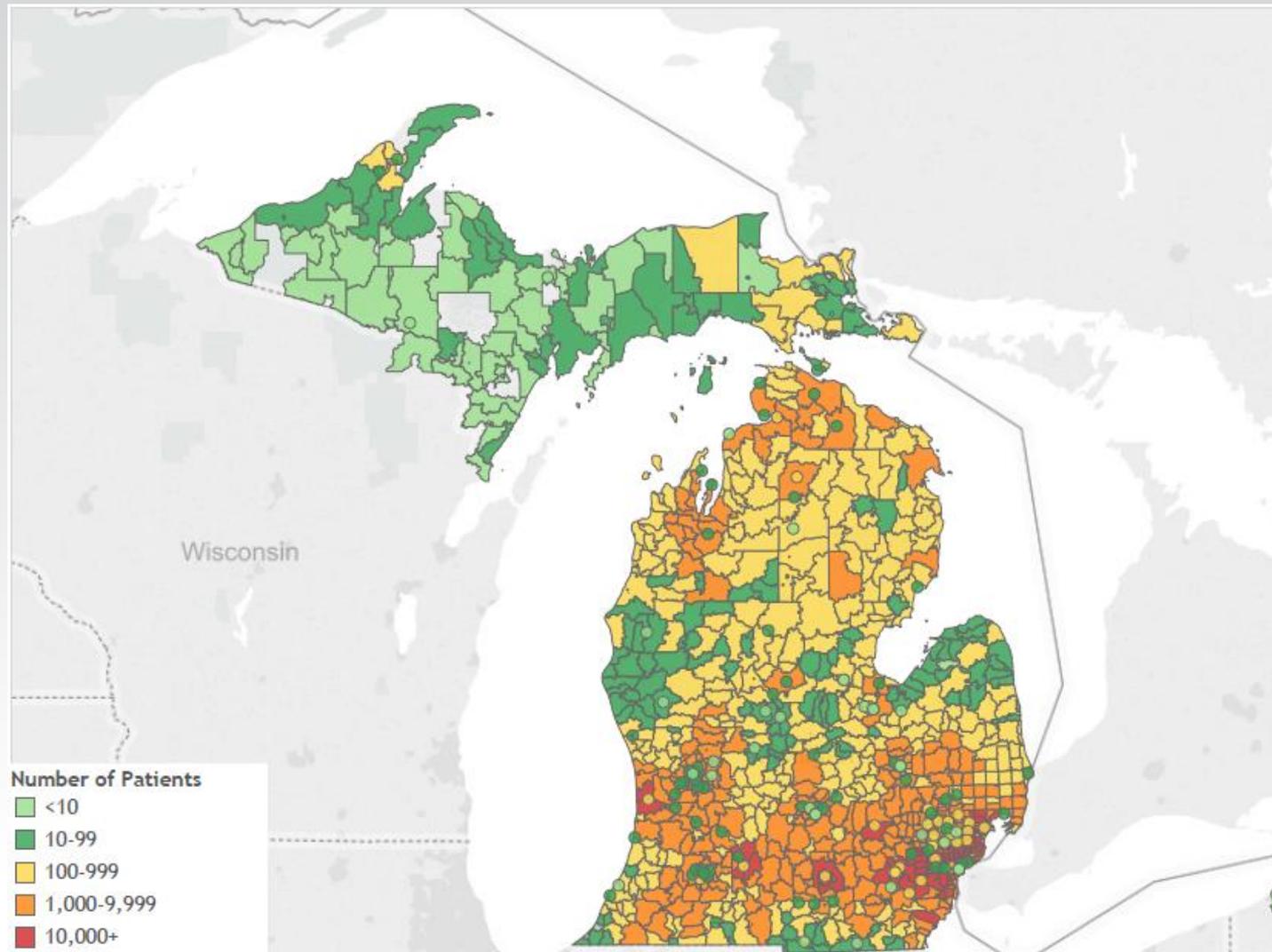
Use Case Factory™



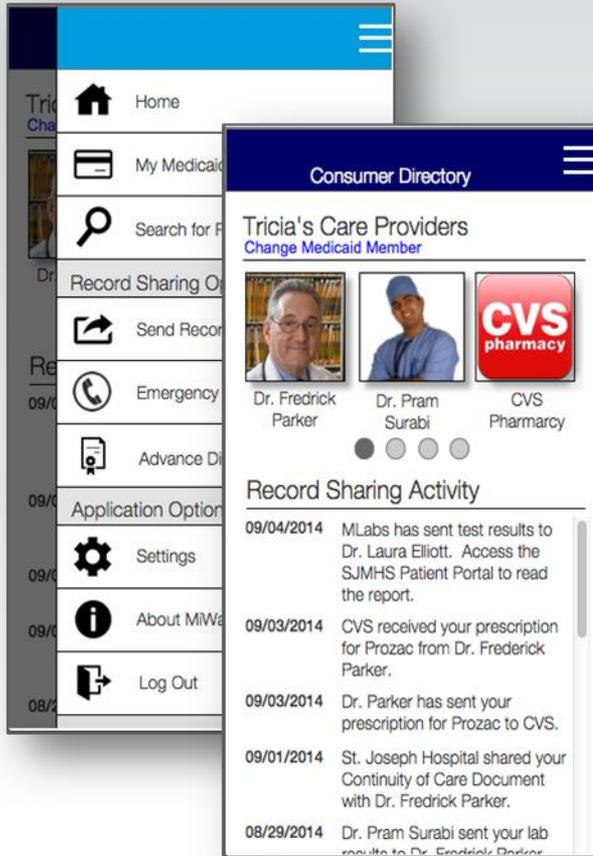
Anyone can submit ideas for use cases: <http://mihin.org/about-mihin/resources/use-case-submission-form/>



6 Million Active Care Relationships



Statewide Consumer Directory



One place for consumers

Identify your care team

Indicate preferences for consent

Specify how and where to share data

Define where your health data is stored

One place for providers

Find a patient's care team

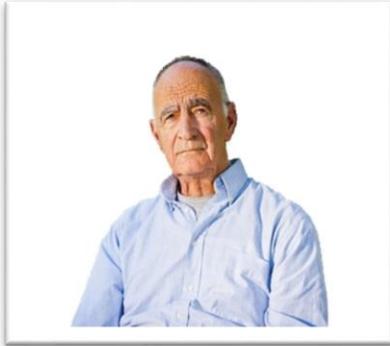
Recognize patient's wishes

Locate critical patient documents

Identify where to send patient data



Patient



Jerry Goodwall

Medicaid ID: 0000000012

CKS ID: ah7xixhifl4bdznumnupokdyn676bZR2kd4xekif

Jerry.P.Goodwall@direct.mihintest.org

Age: 79 years

Status: Veteran

Eligibility: Medicare/Medicaid

Location: Novi, MI

Active Care Relationships

Provider: Terry Bradford Green MD

Practice: Bayside Medical Group

Hospital: Michigan Comprehensive Care

Condition

- I. Recently Hospitalized for Stroke
- II. History of Hip Replacement, Foot Surgery, & Heart Murmur

Treatment

- I. Transferred to Physical Rehab
- II. Searching for a Long-Term Care Facility

Care Environment

- I. Relationships with multiple providers and specialists
- II. Complex condition increases risk for re-hospitalization
- III. Lack of advance directives
- IV. No long-term care plan
- V. Transfer to facility pending
- VI. Reporting to multiple payers; CMS & VA

Use Case Implementation

High-Touch Use Cases:

- Submit/Receive Statewide ADT Notifications
- Exchange Care Plan (ICBR)
- Exchange Advance Directives
- Submit/Receive Statewide Medication Reconciliation
- Exchange Continuity of Care Documents with VA
- Respond to SSA Disability Determination Requests for CCD

[All Use Cases](#)



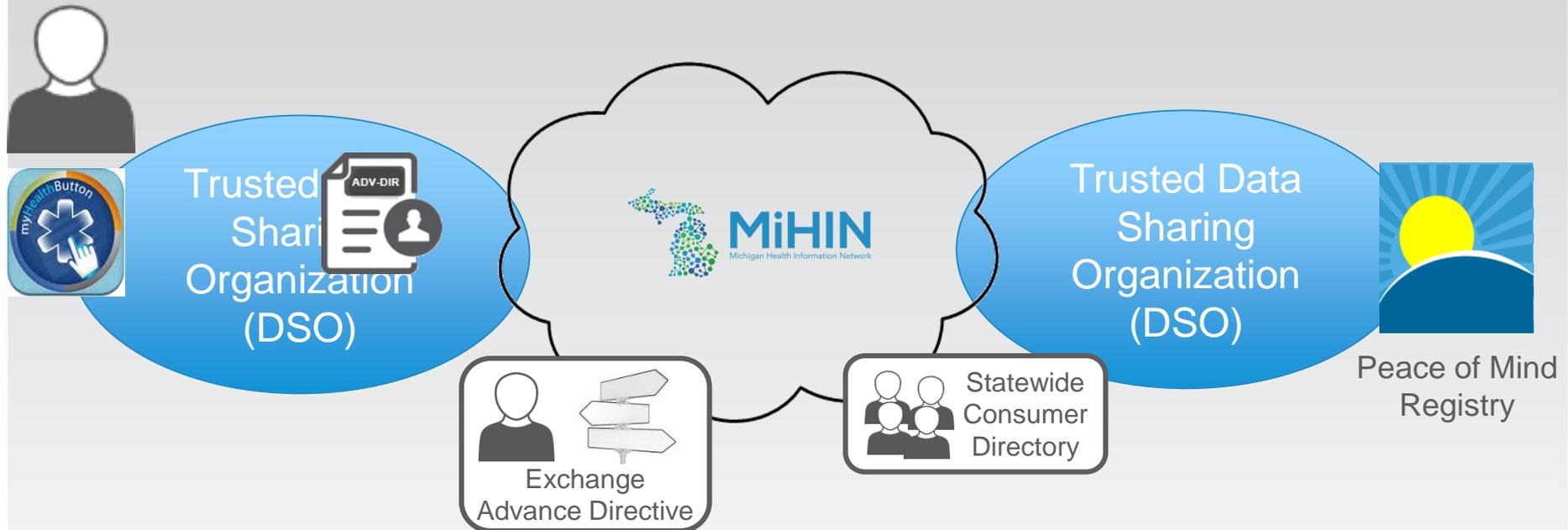
Exchange Advance Directives

- This Use Case enables:
 - Consumers to designate the location of their Advance Directives (ADs) - e.g. Peace of Mind Registry
- Normally ADs are stored in special registries, repositories, patient portals or Personal Health Records (PHRs)
- Patients to specify preferences for locating and sharing their ADs; patients are comforted knowing they control their preferences



Exchange Advance Directives

Example Data Flow



- 1) Beneficiary creates an Advance Directive, sends to MiHIN
- 2) MiHIN checks patient ID in Statewide Consumer Directory
- 3) SCD confirms patient preference to send Advance Directive to Peace of Mind
- 4) SCD distributes Advance Directive to Peace of Mind



Questions?

Thank you

Rick Wilkening

Director, Major Accounts and Emerging Solutions

rick.wilkening@mihin.org



Update on Advance Care Planning Activities

Doug Dietzman, Executive Director
Great Lakes Health Connect



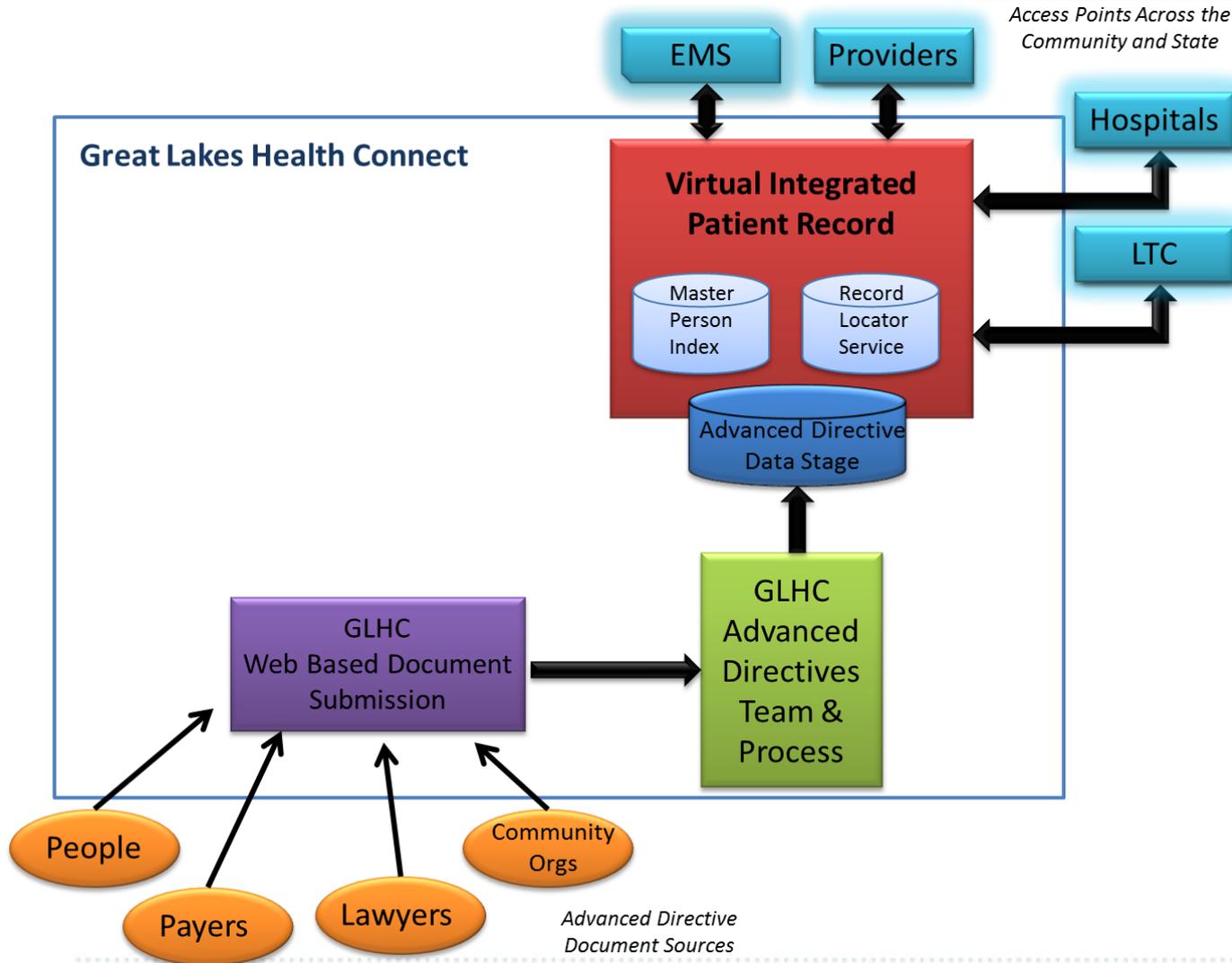
Advance Care Activity



- Participant directed and funded across 2 regions working on advance care planning initiatives (Grand Rapids & Flint)
- Optional service to store advance care documents alongside clinical data in longitudinal health record
 - GLHC not performing advance care planning process with consumers
- Simple initial implementation: web-based secure submission, basic document validation, submission to health record
 - Service does not dictate type or format of documents but does validate legibility and signature – no garbage (blanks, cat pictures, etc)
 - Service not built for direct consumer access/management but they can request latest documents from GLHC
 - Documents currently submitted through website by authorized submitters, not the general public at this time



Simple Initial Model



Example Screenshot



A screenshot of a medical software interface. The top navigation bar includes tabs for "Pt. Info", "Face Sheets", "Reports/ACD" (highlighted with a red box), "Encounters", "Tests", "Trend", and "Documents". Below the navigation bar, there are filters for "Type" (set to "All"), "Date Range" (set to "Last 3 Months"), and "Provider" (set to "All"). A list of report types is shown on the left, with "Durable Power of Att..." selected. The main content area displays a report titled "Durable Power of Attorney for Healthcare" with a date of "08/12/2015 7:59a EDT" and a "View PDF Report" link circled in red. A red arrow points from the "View PDF Report" link to the "Durable Power of Att..." entry in the left sidebar. Below the main content area, there is a footer with icons for a lightbulb, a person, a padlock, and a folder, followed by the text "INTELLIGENCE CONNECTED".

- View is within the “Reports/ACD” Tab
- ACDs show with other submitted clinical reports
- ACDs are stored as .pdf documents by type and date

Respecting Choices[®] First Steps[®], Last Steps[®] and Blended Model Design

Advance Care Planning Program

Kate LaBeau, RN, Organizational Faculty

Upper Peninsula Health Plan



Upper Peninsula Health Plan (UPHP) Honoring Healthcare Choices

- **The Vision:** To educate, advocate for, and create an awareness of advance care planning as a common tool empowering individuals to incorporate their values as they direct their own future healthcare
- **The Mission:** The UPHP Honoring Healthcare Choices Implementation Steering Committee (HHCISC) provides quality education, guidance and structure by offering routine advance care planning services that yield practical, reliable, and sustainable programs in all communities



Goals of Advance Care Planning

Plans reflect an individual's goals and values

- Including religious and cultural beliefs

Plans include

- Selection of a well prepared healthcare agent when possible
- Specific instructions that reflect informed decisions that are geared to the person's stage of health



Goals of Advance Care Planning

Plans are available to healthcare providers and treating physician

Plans enable patient decisions to guide or become medical orders

Plans are honored as intended

Plans prevent confusion and additional suffering during a healthcare crisis



Currently the Standard Approach to Advance Directives Consistently Fails

- Advance directives are often
 - not followed
 - not available
 - not specific
 - not accepted



Requirements of an Effective ACP Program

- System design
 - Accessibility of completed ACP tool
- Education and Training
 - Broad reaching educational opportunities for staff within facility or community in honoring specific instructions



Requirements of an Effective ACP Program (continued)

- Engaging others outside of facility or community walls
 - Mechanism to carry wishes for self across care settings
- Continuous Quality Improvement
 - Project plan revisions
 - Identification of changing components for the individual and the facilities or communities

Elements of Effective ACP Document Availability

- On-demand access of ACP documents
- Electronic storage through statewide system
- A “push-pull” system allowing multiple access points



How UPHIE Can Meet the Needs of all Participants

- Recognize the need of statewide availability of documented healthcare wishes
- Promote and participate in a statewide registry by serving as a conduit
- Advocate and collaborate with ACP services within the state and region
- Educate participants about the benefits and burdens of ACP storage and retrieval



Questions?



In Partnership with:  Halterman

Panel Discussion on Advance Directives and Health Information Technology

Jason Werner, MDHHS

Rick Wilkening, Michigan Health Information Network

Doug Dietzman, Great Lakes Health Connect

Kate LaBeau, Upper Peninsula Health Plan

Amy Olszewski, Gift of Life Michigan

HITC Next Steps

- HIT Commission Action Plan
- Fourth Quarter Availability

Public Comment

Adjourn