New Mexico Health Information Collaborative

NMHIC:
New Mexico’s Health Information Exchange (HIE) Network and Telehealth

September 5, 2013

Dale C. Alverson, MD
Medical Director, Center for Telehealth and Cybermedicine Research, University of New Mexico
Chief Medical Informatics Officer, LCF Research
Chairman, New Mexico Telehealth Alliance
Insurance Coverage for Telemedicine Services
Passed and Signed into Law 2013

Introduced by:
Sen. Jerry Ortiz y Pino (D)
and
Rep. Stephen Easley (D)

SENATE BILL 69
HOUSE BILL 171

New Mexico Telehealth Act
Passed and Signed into Law 2004

Introduced by:
Rep. Danice Picraux (D)
and
Supported by
Sen. Susan Wilson-Beffort (R)

HOUSE BILL 581
46TH LEGISLATURE - STATE OF NEW MEXICO
Telemedicine and Health Information Exchange (HIE)

• Telemedicine creates the “virtual” consultation and provision of service between providers and patients = access to care

• HIE creates the consolidated “virtual” medical record about the patient from a variety of electronic health records and sources = access to the patient’s health information

• HIE is Complimentary to Telehealth
Health Information Exchange (HIE)

- An HIE Solution brings health information systems together across regions and states in order to provide access to a patient’s information in **one centralized record**.

- Agnostic to the individual electronic health record (EHR) of a health organization or practice

- Multiple healthcare providers with access to the same record of clinical information will make healthcare delivery more robust and efficient with improved continuity, better outcomes, and reduced cost.

- There are significant benefits to patients, healthcare providers, payers and employers.
Core HIE Functions

Provides access to a current patient summary from a variety of sources (From Where and When):

- Problem List/Diagnosis
- Medications
- Immunizations
- Allergies
- Procedures
- Lab Data
- Radiology Data
- Encounter Summaries
Why is the Portal accessed?

- New patient, not seen before
- Infrequent patient
- Patient known to have received care elsewhere
- Complex patient
- Tracking of patient
- Patient ER visits and hospital stays
- EHR is unavailable
- Remote Access
- Disaster Access

*source NMHIC
Value/Benefits of HIE

- Access to each patient’s health information with patient consent
- The patient doesn’t have to keep remembering and repeating their health history
- Improved “situational awareness” regarding patient’s health and use of health systems, better coordination of care
- Better evaluation capability and improved efficiency in making diagnosis and management plans
- Decrease unnecessary duplication of tests
- Readmission avoidance
- Data Analytics: Public, Population, and Community Health
- Supports the Patient Centered Medical Home (PCMH)
- Integrates into Accountable Care Organizations (ACO)
New Mexico’s HIE: New Mexico Health Information Collaborative (NMHIC)

Clinician Requests Access to Patient Records with Patient Consent

- State Public Health Depts.
- Patient
- Clinician
- EHR Gateway
- Hospital
- Clinician Office
- Lab
- Emergency Room

NMHIC
HIE Network
Locates the Patient’s Records
Gathers & Assembles the Patient’s Records

eHealth Exchange (previous NwHIN)
Cloud Based

Dedicated physically secure facility with redundant power, cooling, and network

Scaleable, redundant application services

Central Data Repository

Internet

Internet connected Healthcare Provider

Healthcare Data Providers
Network of HIE Networks

Users of the system today:
SSA – disability determination
NM DOH – eReporting, ED Surveillance, Immunizations
Pilot users – UNM ED, ABQ HP, LHS
TELEHEALTH
CFTH CURRENT PROGRAMS

• SRMC Telehealth Consults
  • UNMH Pediatric ED
  • UNMH Psychiatry – PES
  • UNMH Neurology
• Child Ready Grant: State-wide Communities & Hospitals Ped Emergency Medicine (Dr. Sapien)
• United Healthcare Telehealth Pilots
• Ped ICU to SJRMC

• Post Traumatic Brain Injury (Dr. Mark Pedrotty/CTH)
• Tele-Stroke Contract
• Dermatology (under development)
• Cancer Center
  — Tumor Board – Las Cruces
• Audiology
Direct Patient Care

Maternal Fetal Medicine-High Risk Pregnancy
“Store and Forward”

• Capturing an image and **storing** it to then be **forwarded** for review by a medical specialists

• Examples include teleradiology, tele-pathology and tele-dermatology, tele-ophthalmology (retinal scans)
Diabetic Retinopathy Retinal Scans: Telemedicine or Health Information?
Trauma Triage


44% Transfer Avoidance
27% Management Recommendation Changes
CFTH OTHER SPECIAL PROJECTS

- Molina Community Connector Project (OCH)
- FCC Southwest Telehealth Access Grid ($15.4 million)
- Legislation: SB69 2013 Reimbursement
- Cimarron Clinic/Child Psych-Resident Training

- Truman Clinic/HIV-AIDS Counseling
- Native American/Navajo Nation
  - US Ignite/Telehealth to the Hogan
- Pine Hill Medical Center
- Congressman Rep. Ben Ray Lujan Town Hall - Video Conferencing (9 Northern NM sites)
The New Mexico Telehealth Alliance

Telehealth Alliance “Networks of Networks”

- Represents a consortium of public and private health care stakeholders: “Neutral Territory” (501c3)

- Reflects the diversity of our health care delivery system in New Mexico

- Enables collaboration

http://www.nmtelehealth.org/AboutUs/
SWTAG is a “Network of Networks”
Telehealth Toolkit

Videophone (H.324)

Software IP Based (H.323)

Desktop IP Based (H.323)

Small Conference Room IP Based (H.323)

SaaS (SIP)

Video

Vidyo

Skype
Hand Held Devices- “mHealth”

BlackBerry

Treo/Palm

iPhone

Droid

Smart Phones
Remote Monitoring

The “Smart Band-Aid”
Telemedicine and HIE

• Together they create a powerful set of complimentary tools in providing “virtual” care, improved ability to diagnose, treat and manage patients directly or through consultation with other providers

• Together they reflect an interaction similar to physical face-to-face interactions between providers and between providers and patients
Telemedicine and HIE

• The integration of Telemedicine and HIE:
  ➢ improve the continuity and coordination of appropriate comprehensive care for both diagnostic evaluation and management,
  ➢ decrease unnecessary variations in care,
  ➢ improve efficiencies in care,
  ➢ avoid unnecessary duplication of tests or procedures,
  ➢ reduce the need for higher cost services and hospitalization.

• When combined and effectively integrated they can be both complimentary and synergistic and become important components of an evolving healthcare environment

• Providing the right care, at the right place, at the right time to all New Mexicans across the State.
New Mexico Legislative Requests

• Officially recognize NMHIC as statewide HIE with which HCP organizations and Payers are expected to participate

• Officially recognize the New Mexico Telehealth Alliance as the state-wide resource center for Telehealth as replacement for the Telehealth/HIT Commission

• Develop State-wide Telehealth Fund/Grant Program

• Develop Matching Funds Pool for eligible participants; FCC HCF and USDA DLT
Questions?

http://www.lcfresearch.org/
http://som.unm.edu/telehealth
http://www.nmtelehealth.org/