Pennsylvania eHealth Partnership Advisory Board Meeting

February 14, 2020





Agenda

10 a.m. Welcome and Introductions

- 10:05 Minutes of February 14, 2020 Meeting
- 10:10 PA eHealth Partnership Program Updates
- 10:30 National Perspective on HIE
- 10:50 Healthshare Exchange Overview
- 11:10 DOH Priorities and Innovation Projects
- 11:40 HIE Trust Community Committee Updates
- Noon Brief Lunch Break
- 12:25 Brainstorming for FFY2021 IAPD-Funded Projects
- 12:45 PA eHealth Financial Overview
- 1:15 P3N Fee Model and Schedule Review
- 1:45 New Business
- 1:50 Public Comment
- 2 p.m. Adjournment

February 14, 2020





David F. Simon, JD Consumer Representative

and

PA eHealth Advisory Board Chair



PA eHealth Advisory Board

Mr. MARTIN CICCOCIOPPO, Director, PA eHealth Partnership Program Pennsylvania Department of Human Services (Secretary of DHS Designee)

Ms. PAMELA E. CLARKE, Senior Director, Quality, Health Promotion Council (House Appointed HIO Representative)

Mr. JOSEPH FISNE, Associate Chief Information Officer Geisinger Health System (Senate Appointed HIO Representative)

Mr. SCOTT FRANK, Chief Information Officer Capital Blue Cross (Insurer Representative)

Ms. JENNIFER B. HAGGERTY, Chief Operating Officer Pennsylvania Homecare Association (Home Care or Hospice Representative)

Dr. BRIAN HANNAH, Vice President, Chief Medical Information Officer Mercy Health (Hospital Representative)

Dr. TIMOTHY HEILMANN, Chief Medical Information Officer UPMC Susquehanna (Physician or Nurse Representative)



PA eHealth Advisory Board continued

Mr. MICHAEL HUMPFREYS, Chief of Staff Pennsylvania Insurance Department (Insurance Commissioner Designee)

Ms. JULIE KORICK, Director of Finance & Business Development Pennsylvania Association of Community Health Centers (Underserved Representative)

Ms. MINTA LIVENGOOD, Vice Chair Consumer Subcommittee of the MAAC (Consumer Representative)

Mr. PAUL MCGUIRE, Long Term Care Consultant (Post-Acute Care Facility Representative)

Ms. MEGHNA PATEL, Deputy Secretary for Health Innovation, PA Department of Health (Secretary of Health Designee)

Dr. MICHAEL A. SHEINBERG, Chief Medical Information Officer Penn Medicine Lancaster General Health (House Appointed HIO Representative)

Mr. DAVID F. SIMON (Chair), Chief Legal Affairs Officer Philadelphia College of Osteopathic Medicine (Consumer Representative)



Ex Officio Members

Mr. MICHAEL MARTZ, Chief Information Officer Mount Nittany Health System (Nominated as Senate HIO Appointee)

Ms. PHYLLIS SZYMANSKI, Director ClinicalConnect HIE (Nominated as Senate HIO Appointee)

Mr. DON REED, Chief Operating Officer HealthShare Exchange (Nominated as House HIO Appointee)



Martin Ciccocioppo, MBA MHA Director

Pennsylvania eHealth Partnership Program

Office of Medical Assistance Programs

Pennsylvania Department of Human Services



Recent PA eHealth Accomplishments

- Received responses to our P3N Request for Information.
- DHS 2019-2022 Strategic Plan includes P3N strategic objectives to help lead the health care system toward value-based purchasing coordinated across payers.
- Updated P3N Certification Package with the HIO Community.
- PA eHealth Annual Report is undergoing executive review.
- Expanded P3N ADT Statewide Notification Service to include inpatient ADTs.
- Released Public Health Gateway Onboarding Grant Request for Applications and advanced other FFY2020 IAPD HIE projects.
- Began the process of onboarding the MA FFS Cases Managers to the P3N.
- Secured commitment from Department of Aging to share AAA care plans with the P3N.

February 14, 2020



DHS Strategic Plan (2.2 Coordinated Care)

Strategic Objective	Key Milestones	Anticipated Timing	Lead DHS Offices	
b . Lead VBP coordination across payers to align provider incentives and reduce burden	Support DOH Rural Health Model	Ongoing	Secretary's Office, OMAP	
	Develop DHS stakeholder advisory group, leveraging existing Medical Assistance Advisory Subcommittees, to advise the Department on implementation of aligned VBP	Q1 2020	Secretary's Office, OMAP, OMHSAS, OLTL	
	Roll out perinatal bundled payment		OMAP	
	Work towards multi-payer alignment across state government to help providers focus population health efforts	2021	Secretary's Office, OMAP, OMHSAS, OLTL	
c. Align and advance VBP initiatives within Physical, Behavioral, and Community HealthChoices	Align and advance pay for performance and efficiency adjustments across HealthChoices programs, to the extent feasible	2021 and annually thereafter	omap, omhsas, oltl	
	Require CHC-MCOs to join a P3N certified health information organization (HIO)	2021	OLTL	
	Require BH-MCOs to join a P3N certified HIO	2021	OMHSAS	



DHS Strategic Plan (2.2 Coordinated Care)

Strategic Objective	Key Milestones	Anticipated Timing	Lead DHS Offices		
	Expand the P3N's electronic encounter notification service to include inpatient and ambulatory encounters	Q1 2020	OMAP		
d . Give providers clear data to support practice improvement and success in VBP arrangements	Enable care plan sharing among providers and payers across the P3N	Q2 2020			
	Develop standard expectations for type, frequency, and method of data sharing by MA MCOs (and other payers, if willing) with providers	Q3 2020	OMAP, OMHSAS, OLTL		
	Provide MA claims to P3N Certified HIOs on a timely recurring basis (excluding super-protected and payment data)	Q4 2020	OMAP		
	Increase percentage of hospitals participating in the P3N's electronic encounter notification service by 15% annually	Annually			
	Increase percentage of long-term care providers connected to P3N by 15 percent annually		omap, oltl		

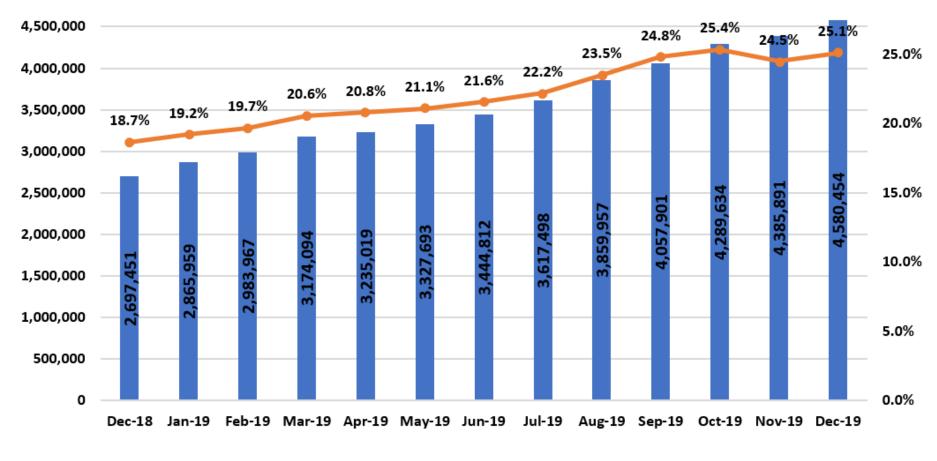


December 4, 2019 – Unanimous Approval of 2019 Modifications (V4a)

- January 1, 2020 Effective date for all changes
- Application Added Policy 11
- PAR4 Addendum Added services and adjusted insurance requirements
- Policy 1 Added definitions
- Policy 5 Added "Restricted Self-Pay" policy
- Policy 10 Revised NIST requirement
- Policy 11 New Downtime Notification Policy
- Technical Requirements Various updates
- Re-Affirmed language in Policies 2, 3, 4, 6, 7, 8, and 9
- Updated P3N Certification Package documents posted on DHS website



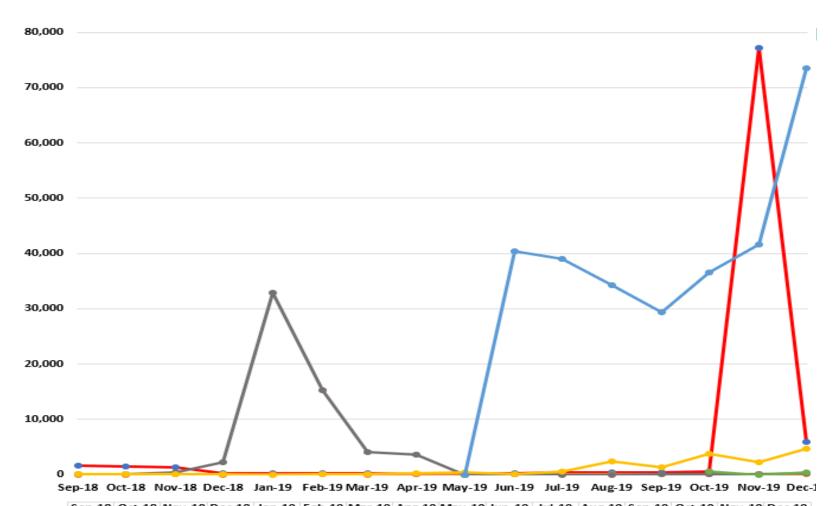




🛯 # Overlap 🛛 🔫 🛶 % Overlap

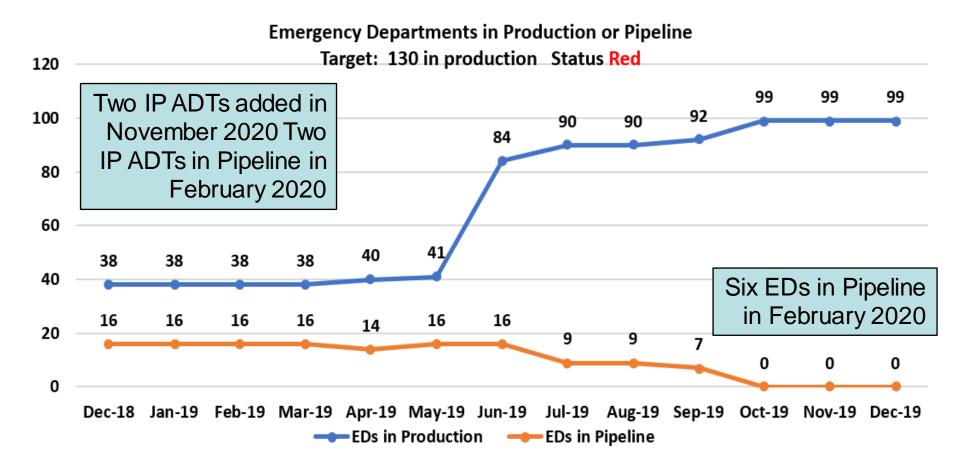


Total # of successful inbound Participant document retrieves P3N processed Target: 100,000/month - Red (84,642 in December 2019)



	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19	May-19	Jun-19	Jul-19	Aug-19	Sep-19	Oct-19	Nov-19	Dec-19
	1,625	1,521	1,297	202	257	283	165	159	127	271	367	378	368	496	77,136	5,863
CCHIE	5	7	18	4	11	19	9	10	1	13	28	40	35	31	18	43
	24	36	357	2,308	32,918	15,317	4,077	3,611	0	20	6	3	18	23	39	277
Mt. Nittany	69	92	35	13	1	50	55	194	349	123	587	2,355	1,317	3,775	2,164	4,627
CPCHIE									2	40,462	39,023	34,253	29,416	36,489	41,573	73,484
														558	1	348
Column1																

ADT Participation





HIE Onboarding Grants

These grants will be made available to Health Information Organizations (HIOs) to support them in their efforts to connect a variety of healthcare providers to HIO's networks and, in turn, to the P3N. RFA nearing release.

Health Plan Onboarding Grants

These grants will be made available to HIOs to support them in their efforts to connect MA health plans with meaningful interoperability to HIO's networks and, in turn, to the P3N. RFA under internal review.

PHG Onboarding Grants

These grants are made available to HIOs to support their efforts to connect their Member Organizations to the Public Health Gateway (PHG). The PHG permits a single point of connection from a provider, via an HIO, to a variety of public health reporting systems. RFA responses due February 28, 2020.



Radiology Image Sharing

This project will utilize an HIO to electronically share existing radiology and mammography images across a network of care team members to reduce unnecessary radiology exposure to patients and is more costeffective and value-based. KeyHIE will be the HIO to implement this initiative. This is the second year of a two-year project. KeyHIE has agreement for signature.

Care Plan Document Registry

The primary goal of this project is to customize and extend the alreadyestablished P3N to provide a state-wide centralized care plan registry available to all healthcare providers and payer in PA for Medicaid patients initially. The project will establish an care plan document registry in cooperation with our HIO partners. This registry will help PH and BH MA MCOs meet DHS contractual requirements to share care plans to improve care coordination. This registry will be similar to Advance Care Documents Registry completed in FFY2019. Reviewing draft SOW.



PHG Utilization

This project supports the advancement of the PHG and is primarily DOH staff expenses. This is a continuation of the FFY2019 project.

Case Reporting

This project will expand electronic case reporting (eCR) capabilities by building a service to allow enhanced HIE integration that is not dependent on the Digital Bridge. This service will enable the reporting of additional types of cases and also meet the MU requirements. This is a continuation of the FFY2019 project.

Immunization Registry Interoperability

This initiative supports the MU Stage 3 Public Health Objective. This funding was requested by DOH to support additional PA-SIIS registry staff. Funding may be re-purposed to support new PA-SIIS infrastructure.

(Note: Projects 6-8 support Dept. of Health public health registries.)



Education and Outreach

This project will utilize an outside vendor to offer training, technical assistance and outreach to small and mid-sized provider groups and eligible professionals in PA to continue the group's participation in the incentive program. This is a continuation of the FFY 2019 project.

Allegheny County Population Health

Allegheny County Health Department (ACHD), in collaboration with Western PA's two largest health systems, will implement a software tool and network infrastructure to conduct population health analysis of EHR data aggregated from the participating systems. Specifically, the ACHD will use software to perform an analysis of the geographical distribution of diabetes and hypertension, looking at disease progression, treatment, and control. This is the second year of a two-year project. ACHD has agreement for signature.

Total Approved FFY 2020 IAPD Funding = \$11.7 million

(DHS provides the 10% state matching funds.) February 14, 2020 18



National Perspective on HIE



Kelly Hoover Thompson,

Chief Executive officer



SHIEC Annual Survey

SHIEC is an association of Community HIE Organizations

- 77 Full and Associate Members
- 60+ Strategic Business and Technical members

2019: Annual Member Survey

- 81% Response Rate
- Topics include governance, policy, business models, technology, data exchanged, participation in nationwide interoperability models

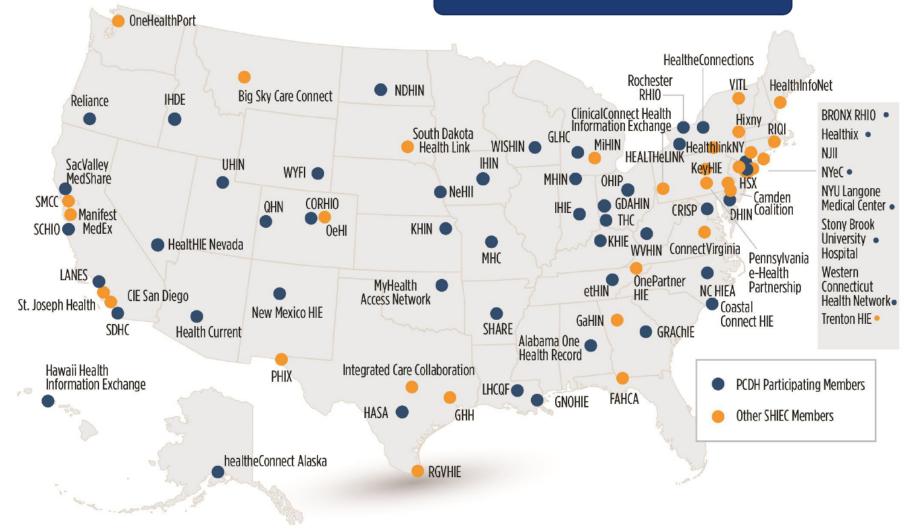


HIEs now span the nation

>92% of the US Population

pennsylvania

DEPARTMENT OF HUMAN SERVICES



Nationwide Alerting through HIE's



February 14, 2020

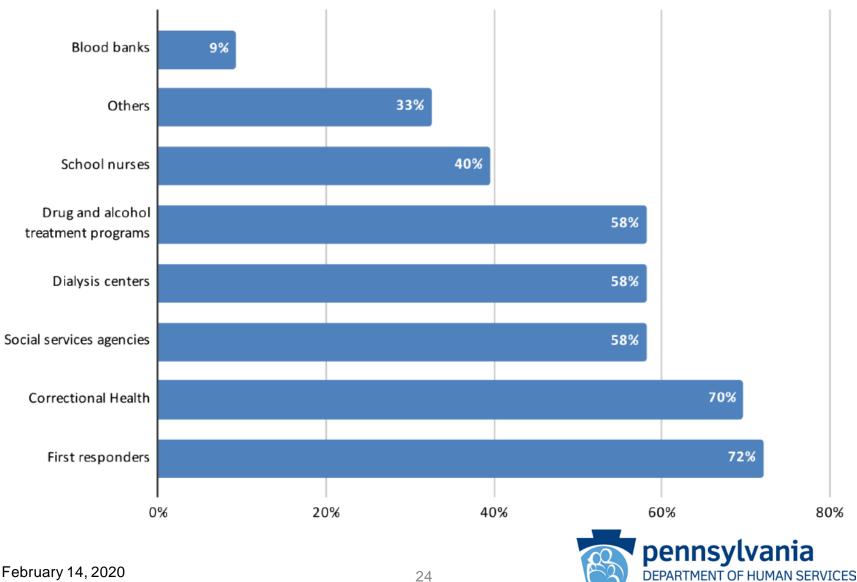
DEPARTMENT OF HUMAN SERVICES

Annual Data Volume (3.3 Billion Messages)

Healthcare Encounters 2,149,173,208	Lab and Imaging Results 614,697,564	Care Summaries 524,767,204
	ADT Alerts 453,315,793	Other 338,920,920 Immunizations 52,991,328
		Clinical Documents 113,763,988

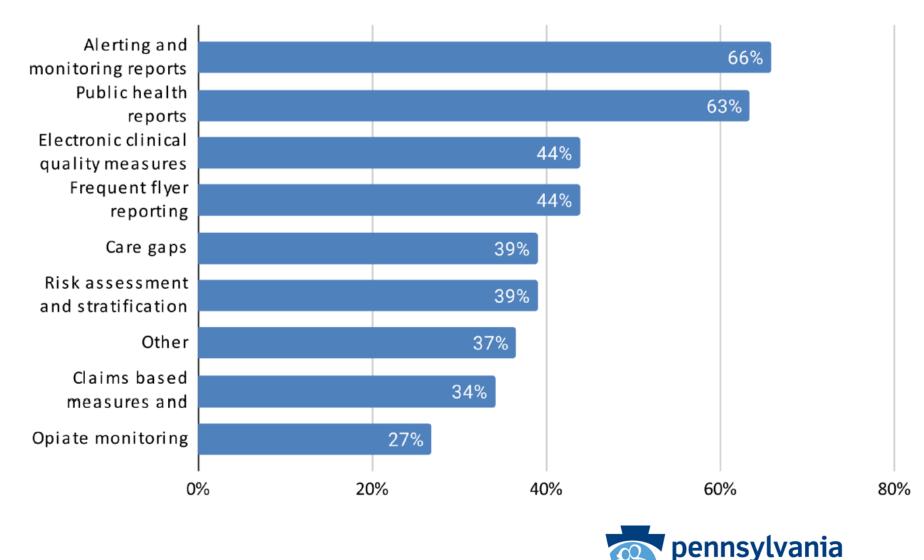


HIE's Connect Whole Communities



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Analytics Services Provided by HIEs



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Conclusions

- HIEs have grown to span the nation and serve nearly all Americans
- The Patient Centered Data Home[™], the only nationwide network to proactively push data, continues to grow rapidly
- HIEs connect an expanding scope of health and social organizations
- HIEs move more data than any other nationwide interoperability network
- HIEs are a cost effective component of critical national infrastructure





Prepared For: **PREALTH PARTNERSHIP**

Advisory Board

Don Reed SVP COO Don.Reed@HealthShareExchange.Org

Caring Means Sharing

February 14, 2020

Agenda

HealthShare Exchange

- Headlines
- Story
- Leadership
- Growth
- Solutions
- Future





Headlines

Hahnemann's Closure is Another Canary in the Health-Care Coal Mine. Dr. Stephen Klasko CEO Jefferson Health

Mercy Hospital in West Phila faces closure as an inpatient facility

by Harold Brubaker and Ellie Rushing, Updated: February 12, 2020

PINION

Jefferson CEO: Hahnemann's closure is another canary in the health-care coal mine | Opinion



Mercy Hospital in West Philadelph closure as an inpatient facility

by Harold Brubaker and Ellie Rushing, Updated: February 12, 2020- 1:32 PM



Trinity Health expects to end inpatient services at its 157-bed Mercy



Headlines

<u>Preventable Hospital Readmissions Cut by</u> <u>More Than 25%</u>

"To see such a drastic improvement just one year into our partnership … serves as a great motivator **Ralph W. Muller**, CEO, Univ Penn Health System

"These results are phenomenal and prove just how much we can achieve if we innovate together on purposeful programs" **Daniel J. Hilferty**, CEO, Independence Blue Cross



Preventable Hospital Readmissions Cut by More Than 25 Percent Under Innovative Contract Between University of Pennsylvania Health System and Independence Blue Cross

A year into new collaboration, Penn Medicine and Independence announce unprecedented results November 16, 2018

PHILADELPHIA – After the first year of an innovative, five-year contract between the University of Pennsylvania Health System (UPHS) and Independence Blue Cross (Independence), the health system is reporting a more than 25 percent cut in hospital readmissions – the largest readmission reduction in both organizations' history. As part of the first collaboration of its kind in the United States between a health system and a health insurer, the two organizations have launched a new slate of innovations to reduce the number of patients who return to the hospital within a month of going home. The contract provided that Independence wouldn't pay for the resulting hospitalization in those cases.





Headlines

Tandigm touts success reducing hospital, nursing admissions

"Philadelphia has the second highest hospital admission rate in the country for commercially insured patients, so managing unnecessary admissions and other excess utilization is critical to improving the quality and value of care"

Dr. Anthony Coletta Tandigm CEO



Our Story

We Are:

- Non-Profit
- Since 2012
- Diverse, Broad, Unique

What We Do:

- Connect Disparate Systems
- Enable Workflow
- Provide Secure Access



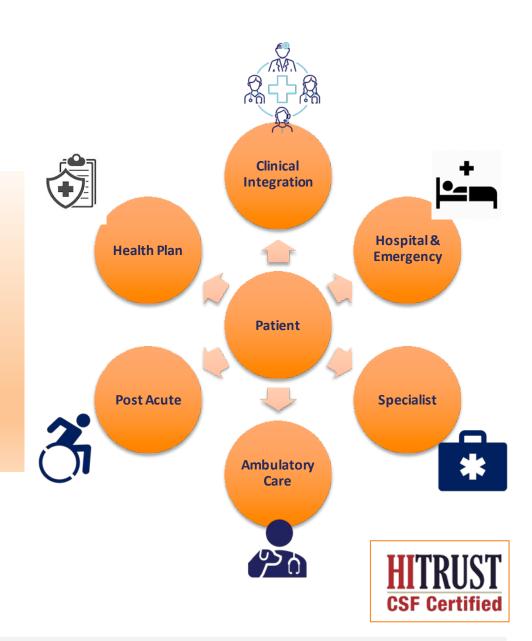




We Are: Patient Centric

Holistic Patient Approach

- Longitudinal
- Centralized
- Unified Record





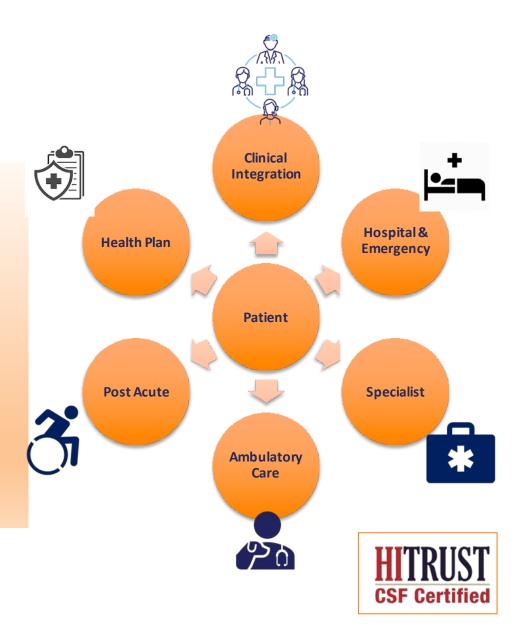
Our Story

Why We Do It:

- Enable Coordinated Care
- Improve Quality and Outcomes
- Lower Costs

Who We Do It For:

- Patients
- Providers & Plans
- ACO's, MCO's, ICN's





Our Leadership

We Are: Collaboration

- Diverse Competing Plans and Providers
- Independent, Neutral, True Community Collaborative
- Financially Stable and Sustainable for the Long Term



Over 175 People Volunteer Across our Committees



Our Leadership

Board of Trustees

Member "C" Suite Leadership

Committed to:

- **Drive Positive Change**
- **Improve Quality**
- **Lower Costs**





















Clinical Officer Trinity









Don Reed Senior Vice President, Chief Operating

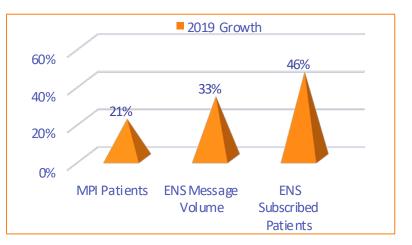
Brian Wells Chief Technology Officer &



Our Growth

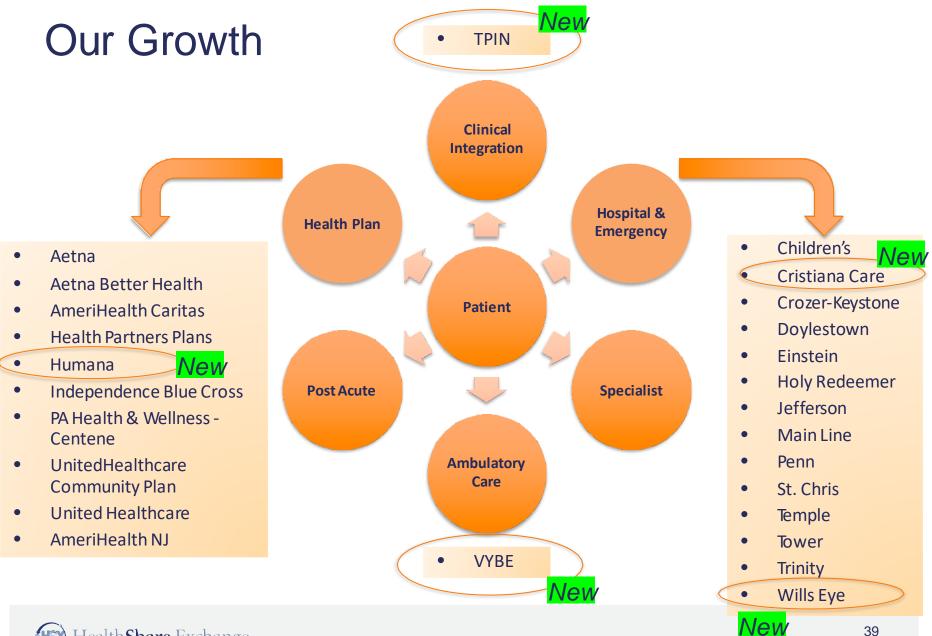
10 Million Lives5.7 Million ENS Subscribed Lives350+ Health Organizations











Health**Share** Exchange **HSX**

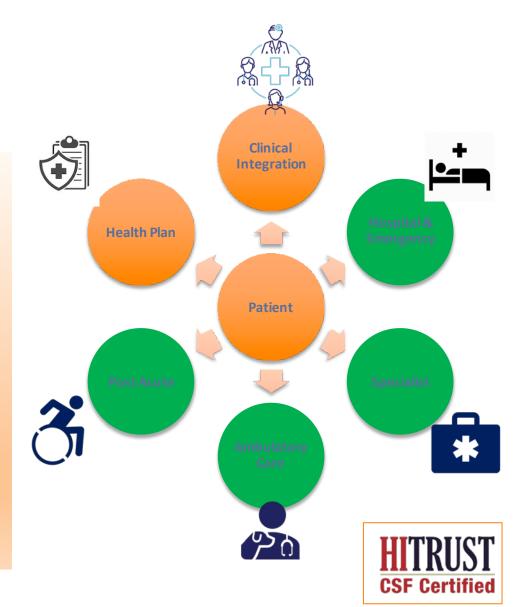
We Are: Provider Solutions

Treatment & Care Coordination

- Encounter Notifications
- ER- Clinical Activity History
- CDR Deep EMR Integration

Workflow

- Secure Messaging
- ACTF Care Team Finder
- Provider Directory



We Are: Encounter Notification Service (ENS)

- 1) Alerts Subscribing Provider Participants
- 2) Patients' Admissions, Discharges from: ER's; Hospitals; Post-Acute; Ambulatory Care
- 3) Notifications Delivered as Summary or in Real-Time

				/			
Destination Facility	Destination Practice	Primary Can Provider	e Destinatio MRN	Source Facil	ity Jource N	IRN First Nam	e Middle N
ABC Medical Group	Practice 1	Dr. Jones	12345	Hospital 1	ABC 234	Joe	A
ABC Medical Group	Practice 2	Dr. Smith	8765	Hospital 1	XYZ87658	Mary	
ABC Medical Group	Practice 1	Dr. Jones	91289	Skilled Nursi Facility 8	PQRB 74	7 Pam	c
ABC Medical Group	Practice 4	Dr. Miller	837445	Hospital 3	KUDO 384	William	
ABC Medical Group	Practice 5	Dr. Gonzalez	137894	Hospital 2	UID12374	Amy	ĸ
ABC Medical Group	Practice 6	Dr. Orion	76345	Hospital 10	YHT7645	Karen	5
						Karen	3
Source Setting	Event Type	Amit Date	Admit Time	Admit	Admit Type	Referral	
Setting	Event Type Admission	almit Date		Admit Reason		Referral	Discharge
			XXCXX	Admit Reason Chest Pain	Admit Type	Referral	Discharge
Setting Inpatient	Admission Patient	XX, X/XXXX	XX:3X	Admit Reason Chest Pain Fatigue	Admit Type Emergency	Referral Information Physician	Discharge
Setting Inpatient Emergency	Admission Patient Registration	xx/xx/xxxx xx/xx/xxxx	XX:XX XX:XX XX:XX	Admit Reason Chest Pain Fatigue Pneumonia	Admit Type Emergency Emergency	Referral Information Physician Referral	Discharge Date
Setting Inpatient Emergency Inpatient	Admission Patient Registration Discharge	xx/xx/xxxx xx/xx/xxxx xx/xx/xxxx	XXCXX XXCXX XXCXX XXCXX	Admit Reason Chest Pain Fatigue Pneumonia Laceration	Admit Type Emergency Emergency Routine	Referral Information Physician Referral	Discharge Date

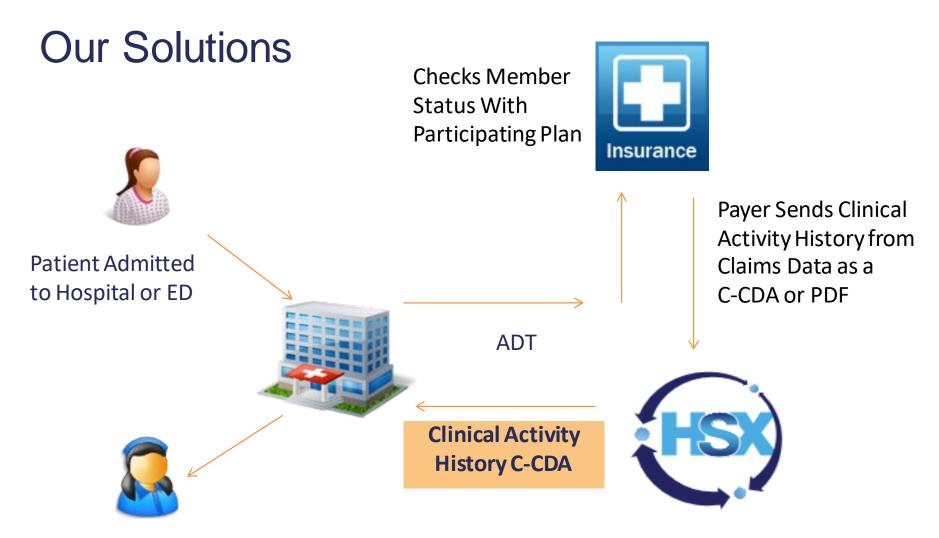


We Are: Payer Solutions

- Encounter Notification Service
- Auto Care Team Finder
- Claims Clinical Activity
- CPC+ Claims Data Aggregator
- HEDIS & STAR Measures Support
- Custom Analytics & Reports



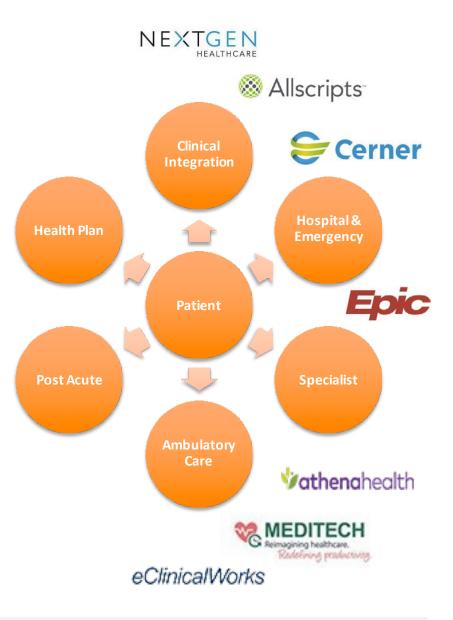




Hospital or ED Receives Payer Clinical Activity History C-CDA / PDF

We Are: Deep Integration

- 35+ Disparate EMR's, i.e. EPIC, Cerner, ECW
- Embedded Clinical Workflow
- Discrete & Consumed Clinical EMR Data

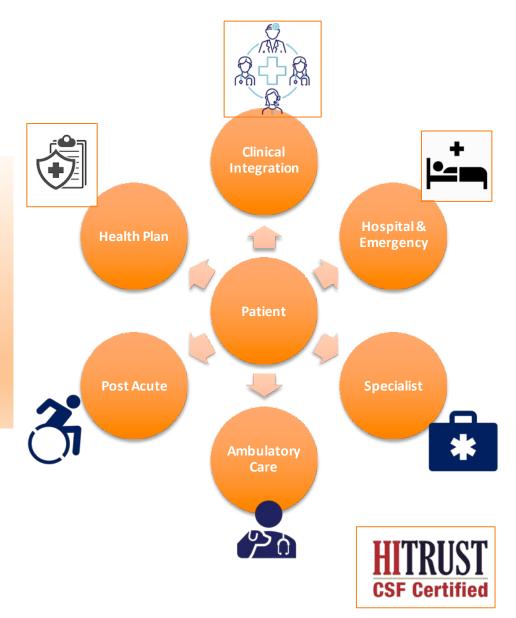




We Are: Connected

Data Sharing Gateways

- P3N, PA PHG, Certified HIO
- NJ II, NJ HIN
- eHealth Exchange Sequoia
- DirectTrust
- CareQuality
- DHIN





We Are: Wellness

- ENS + Clinical Data Repository
- Provide Updated Food Restrictions and Diet Adjustments
- Real-Time Coordination with Medical Care
- Care Team Dietary Updates Added to the Patients Medical Record









Our Future

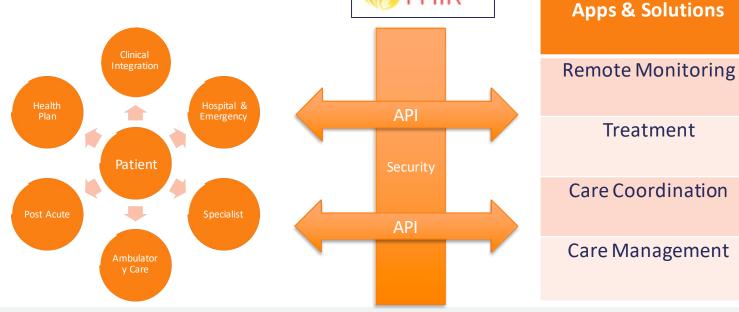
We Are: Innovation

Market Street enables:

- Solution Development
- Health App Access to Data
- Security & Risk Avoidance







Our Future

We Are: Emerging Partnerships

Federal Programs:

- MyHealthEData Initiative
- Da Vinci Project
- TEFCA and QHIN
- FHIR APIs

Partnerships:

- Benefits Data Trust
- AHA
- ADA
- American Red Cross
- BCBSA









BlueCross BlueShield Association



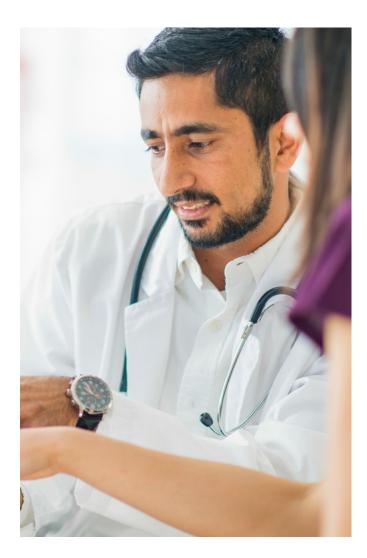


Thank You!

HealthShare Exchange

American College of Physicians Building 190North Independence Mall West Suite 701Philadelphia, PA 19106

www.healthshareexchange.org



Caring means sharing.

Meghna Patel

Deputy Secretary for Health Innovation

Pennsylvania Department of Health



DOH Vision and Mission

Vision: A healthy Pennsylvania for all

Mission:

To promote healthy behaviors, prevent injury and disease, and to assure the safe delivery of quality health care for all people in Pennsylvania



DOH Strategies for Year 2020-2023

- i. Maintain and enhance emergency services and public health preparedness.
- ii. Continually develop our talents to significantly advance public health in Pennsylvania.
- iii. Promote public health with awareness, prevention and improvement of outcomes where the need is greatest.
- iv. Use data, measures, and technology to enable public health performance.
- v. Improve staff, customer, and partner experience with consistent, efficient, and effective services and work processes.



PA e-health partnership priorities from DOH

- i. Integrating all public health registries PDMP, Immunizations registry, and Cancer registry into clinician workflows and systems.
- ii. Ensure hospitals, health systems, community health care clinics, urgent care centers, pharmacies and long-term facilities are integrated across the state as permitted by state and federal laws.
- iii. Implement regulations and monitor compliance regarding eprescribing of controlled substances in PA.

Challenges: Lack of EHR use by dental and other small specialty providers.



HIE Trust Community Committee

Joe Fisne

Associate Chief Information Officer

Geisinger Health System



HIE Trust Community Committee

Chairperson:

• Kimberly A. Chaundy, Sr. Director HIE & Interoperability, KeyHIE (Re-Elected December 2019)

HIE Trust Community Committee Meeting Summaries:

- HIETCC Meeting Agenda, February 5, 2020
- HIETCC Meeting Minutes, February 14, 2020
- HIETCC Meeting Minutes, December 4, 2019
- HIETCC Meeting Minutes, November 6, 2019
- HIETCC Meeting Minutes, October 2, 2019



HIE Trust Community Committee

Topics covered/discussions w/continued focus on:

- Enabling discrete data sharing across the P3N
- Data reporting transparency across the P3N
- PDMP Conversion to RxCheck and HIE role
- IAPD-Funded Projects including Advance Directive Registry and Image Sharing
- Payer Member access to P3N
- HIO efforts to help payer members with HEDIS reporting
- P3N ADT Service expansion
- Super Protected Data (SPD) Filtering and Code Set
- National eHealth Exchange, CRISP connectivity, and SHIEC Patient Centered Data Home
- Approved P3N Certification Package updates including creating a new downtime notification policy.



Brainstorming FFY 2021 IAPD Projects

Dana Kaplan OMAP HIT Coordinator

Pennsylvania eHealth Partnership Program

Office of Medical Assistance Programs

Pennsylvania Department of Human Services



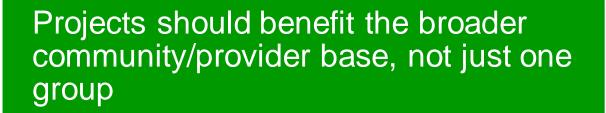
2021 IAPD Discussion

Our primary discussion will focus on 2021 IAPD project ideas but we may bring up some ideas to consider for future funding.

Reminder that these projects are 90% Federally funded so the state needs to cover the 10%

Must be related to the HIT Incentive program. If the project benefits more than the HIT program, then the project may need to be cost allocated and only a portion of the project can be covered by HITECH funds





CMS will not approve projects that would be considered 'maintenance' projects

CMS and DHS have to approve the proposed projects

Note: FFY2021 is the last opportunity to access 90/10 HITECH funding to support interoperability projects.

February 14, 2020



FFY2020 IAPD Projects for FFY2021

- 1. HIE Onboarding Grants
- 2. Public Health Gateway (PHG) Grants
- 3. PHG Utilization
- 4. Case Reporting
- 5. Education and Outreach
- 6. Immunization Registry Interoperability?
- 7. HIE Onboarding Grants for Payors



Possible New FFY2021 Projects

#	Name	Description
1	P3N	Infrastructure Re-procurement
2	State Hospitals EHR	Procurement and/or P3N Onboarding
3	Resource and Referral Tool	Interoperability with P3N
4	Improve Data Quality	Tool(s) to improve HIO data quality and patient matching
5	National Connectivity	Onboarding P3N to eHealth Exchange and/or Carequality
6	All Payer Claims Database	Leverage HIO and MA claims data
7	Security	Tool(s) to improve HIO data security
8	Patient Access	Enable FHIR access to clinical and claims data
9		
10		
11		
12		



Christy Stermer Program and Fiscal Manager

Pennsylvania eHealth Partnership Program

Office of Medical Assistance Programs

Pennsylvania Department of Human Services



Summary of Receipts and Expenditures

Receipts Detail Report						
PA eHealth Partnership Authority						
	(July 1, 2018–June 30, 2019)					
Business Area 21	Business Area 21					
Description	Transaction Amount	Notes				
Budget Amount *	\$ 14,176,392	SFY 18/19 Budget Across all Funds				
Deposit - Interagency	Deposit - Interagency \$ 752,000 SFY 18/19 P3N HIO User Fees					
TOTAL \$14,928,392						
*Budget amount includ	es a Budget Reserve of \$6,4	28,392 and Grant funds of \$8,500,000				

Summary of Expenditures PA eHealth Partnership Authority (July 1, 2018–June 30, 2019)				
Business Area 21 Expenditure Type	Expended Amount			
Personnel	\$ 561,921			
Operational	\$ 1,985,216			
Grants	Grants \$ 4,618,877			
Total	\$ 7,166,014			



List of Contracts

Ĩ	Contract				Contract	
	Туре	Grantee Name	PA Vendor #	Contract #	Amount	Notes
ł						Ambulatory
						Onboarding
	Grant	Clinical Connect	793238	21OB19201	\$45,000	Grant Program
ł					. ,	Hospital/Facility
						Onboarding
	Grant	Clinical Connect	793238	21OB19101	\$270,000	Grant Program
ł						Ambulatory
						Onboarding
	Grant	CPC HIE	117652	21OB19204	\$50,000	Grant Program
ľ		HealthShare				Hospital/Facility
		Exchange of				Onboarding
	Grant	Southeastern PA	777978	21OB19102	\$870,000	Grant Program
Ī		HealthShare				Ambulatory
		Exchange of				Onboarding
	Grant	Southeastern PA	777978	21OB19202	\$620,000	Grant Program
		HealthShare				Portal
		Exchange of				Onboarding
	Grant	Southeastern PA	777978	21OB19301	\$10,000	Grant Program
						Ambulatory
						Onboarding
	Grant	KeyHIE	793863	21OB19203	\$1,002,500	Grant Program
						Hospital/Facility
			793863			Onboarding
	Grant	KeyHIE		21OB19103	\$500,000	Grant Program
						Hospital/Facility
		Mount Nittany				Onboarding
	Grant	Medical Center	657990	210B19104	\$110,000	Grant Program
						PHG Grant
	Grant	Clinical Connect	793238	21PHG19101	\$5,000	Program
	0.0				<i>40,000</i>	
						PHG Grant
	Grant	Clinical Connect	793238	21PHG19201	\$5,000	Program
						PHG Grant
	Grant	CPC HIE	117652	21PHG19104	\$10,000	Program
L	orani	0.0112	11,002	1111010104	<i>\</i> 10,000	



List of Contracts (cont.)

Contract Type	Vendor Name	PA Vendor #	Contract #	Contract Amount	Notes
Grant	CPC HIE	117652	21PHG19204	\$185,000	PHG Grant
Granic	HealthShare	117052	2128019204	\$185,000	Program
	Exchange of				PHG Grant
Grant	Southeastern PA	777978	21PHG19102	\$5,000	Program
	HealthShare				PHG Grant
Grant	Exchange of Southeastern PA	777978	21PHG19202	\$20,000	Program
Grant	oodinedsteinin		21.11015202	<i>\$20,000</i>	_
Grant	KeyHIE	793863	21PHG19103	\$5,000	PHG Grant Program
Grant	Keynic	753803	210101010	\$5,000	
					PHG Grant
Grant	KeyHIE	793863	21PHG19203	\$60,000	Program
					Radiology Image
SS	KeyHIE	793863	4100082284	\$300,000	Sharing Project
					Allegheny
					County
IGA	Alloghopy County	159001-002	4100083064	\$500.000	Population
IGA	Allegheny County	159001-002	4100083004	\$500,000	Health Project Public Health
MOU/	PA Department of				Gateway
NOS	Health	689874	400021833	\$1,259,220	Projects
					Advance Care
CRF	IBM		CRF # 60	\$186,667	Plan Registry
TOTAL				\$6,018,387	



SFY19/20 Receipts and Expenditures To Date

July 1, 2019 - February 7, 2020

CI - Avail Cntrl Lvl	•	Period Expenditures	Fiscal Yr to Date Expenditures
61	Personnel Services		\$ 347,042.91
63	Operational Expenses		\$ 1,311,959.02
66	Grants		\$ 3,314,838.17
69	Non-Expense Items		\$ 10,000.00
Overall Result			\$ 4,983,840.10



IBM Costs

Option Year 1 – 2018/2019 • Base Fee • Inter/Intra State Connections • P3N ADT Feed Total	\$1,170,000 \$33,650 <u>\$12,800</u> \$1,216,450
Option Year 2 – 2019/2020 • Base Fee • Inter/Intra State Connections • P3N ADT Feed Total	\$1,217,000 \$33,650 <u>\$12,800</u> \$1,263,450
Option Year 3 – 2020/2021	¢1 265 000

- Base Fee
- Inter/Intra State Connections
- P3N ADT Feed

Total

\$1,265,000 \$33,650 <u>\$12,800</u> \$1,311,450



IBM Costs Cont

Option Year 4 – 2021/2022

•	Base Fee	\$1,	316,000
•	Inter/Intra State Connections	\$	33,650
•	P3N ADT Feed	\$	12,800
•	Advanced Directives (Estimate)*	\$	50,000
•	Care Plan Registry (Estimate)*	<u>\$</u>	50,000
Total		\$1,	462,450

*Note: In Option Year 4, IBM will be charging us for maintenance on Advanced Directives and Care Plan Registry and these costs are estimated.

During Option Year 4, we will also have costs related to our new system (Design, Implementation, Maintenance). We expect the new system to cost more than the old system but do not have estimated figures at this time.



P3N Fee Model and Schedule

The following table provides the fee schedule that was adopted by the Board on April 15, 2016, for state fiscal years 2015-2016, 2016-2017, 2017-2018, and 2018-2019. The table also includes the Department's proposed fees for SFYs 2019-2020 and 2020-2021. The Department will set the actual fee schedule for each SFY, as well as any modifications to the model, approximately twelve months before any year's fee schedule takes effect.

Category	State Fiscal Year					
	2015-16	2016-17	2017-18	2018-19	2019-20	2020-21
Small	\$22,500	\$22,500	\$26,000	\$30,000	\$30,000	\$30,000
Medium	\$45,000	\$45,000	\$52,000	\$60,000	\$60,000	\$60,000
Large	\$90,000	\$90,000	\$104,000	\$120,000	\$120,000	\$120,000
Very Large	\$135,000	\$135,000	\$156,000	\$180,000	\$180,000	\$180,000

HIO Fee Schedule as of January 9, 2019



Size Categories and Point Schedule

Size Categories	
Points	Category
Less than 200	Small
200 to 999	Medium
1,000 to 2,500	Large
More than 2,500	Very Large

Point Schedule for HIOs with Payer or Hospital Participation				
Payers				
Pennsylvania covered lives for which payers have HIE access via your HIO	1 point per 1,000 covered lives			
Hospitals				
Per location, regardless of affiliation ¹ .				
Critical Access Hospitals ²	0 points			
Small Hospitals (<150 beds)	25 points			
Medium Hospitals (150-300 beds)	50 points			
Large Hospitals (>300 beds)	100 points			



Alternate Point Schedule*

Facilities	
Per location, regardless of a ffiliation ¹ . Includes entities owned by and/or physically located within a hospital	
Ambulatory Surgery Centers	15 points
Long-Term/Post-Acute Care Facilities	2 points
Mental Health/Substance Abuse Facilities	5 points
Outpatient Cancer Treatment Centers	2 points
Physical Therapy/Occupational Therapy Practices	1 point
Pediatric Rehabilitation Practices	1 point
Urgent Care Centers	5 points
Practices	
Per location, regardless of a ffiliation ¹ .	
Community Clinic/FQHC/Safety Net Providers ³	0 points
Primary Care Physician Practices	1 point
Specialist Physician Practices	2 points
Multi-specialty Practices	3 points
Independent Diagnostic Service or Treatment Providers	
Per location, regardless of a ffiliation ¹ . <u>Does not</u> count entities owned by an organization counted above.	
Independent I maging Centers	2 points
Independent Reference Laboratories	0 points
Other Providers	
Per organization	
Ambulance/EMS services	0 points
Independent Pharmacies	0 points
Home Health Agencies	2 points

*Applies to HIOs that DO NOT include participation by hospitals or payers.

February 14, 2020



Public Comment

- Name of submitter for written comment submission acknowledged by chair
- Verbal comment (3 minutes per commenter)

For further information:

http://dhs.pa.gov/ehealth

PA eHealth Partnership Advisory Board:

https://www.dhs.pa.gov/providers/Providers/Pages/Health%20Information%20Technology /eHealth-Advisory-Board.aspx

P3N HIO Certification Package:

https://www.dhs.pa.gov/providers/Providers/Pages/Health%20Information%20Technology /HIO-Connection.aspx

P3N Certified Health Information Organizations (HIO) Information:

https://www.dhs.pa.gov/providers/Providers/Documents/Choose%20your%20HIO.pdf

