



NC Health  
Information  
Exchange

# NC Health Information Exchange: Strategy and Vision

Presentation to  
North Carolina General Assembly:  
Joint Legislative Oversight Committee on HHS  
Joint Legislative Oversight Committee on IT

December 13th, 2011  
Presenter: Jeff Miller

## Why a Health Information Exchange (HIE)?

Compared to other developed nations, the United States spends two to three times as much per person on health care – but lags behind them in life expectancy, infant mortality, obesity and avoidable deaths.

**A confluence of forces...**

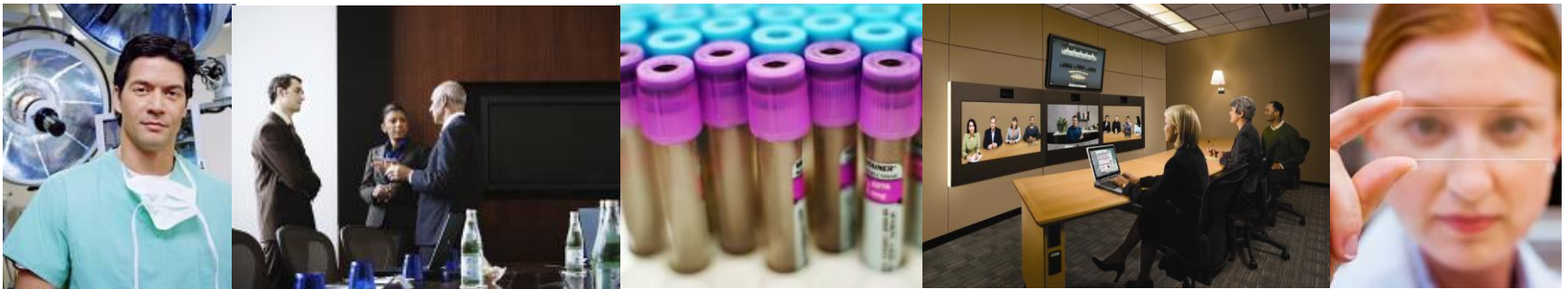
► MARKET   ► GOVERNMENT MANDATES   ► TECHNOLOGY   ► CONSUMERISM

**...is forcing different parts of our health care system to work in concert more closely than ever before.**

**The glue in these new relationships – the currency in this new health economy – is instant, accurate, useful information.**

## NC HIE Overview and Governance

- Nonprofit organization established as a Statewide Designated Entity (SDE) in April 2010
- Board of directors: 25 CEOs and health care leaders in the North Carolina community
- Four workgroups: strategy and policy experts on
  - Clinical and technical operations
  - Governance
  - Finance
  - Legal and policy




# Setting the Strategic Agenda – NC HIE Mission



NC HIE will provide a set of secure, scalable information services that

- Promotes the **access, exchange** and **analysis** of health care information
- Enables participating organizations to:
  - Improve medical decision-making and coordination of care
  - Improve health outcomes
  - Control health care costs

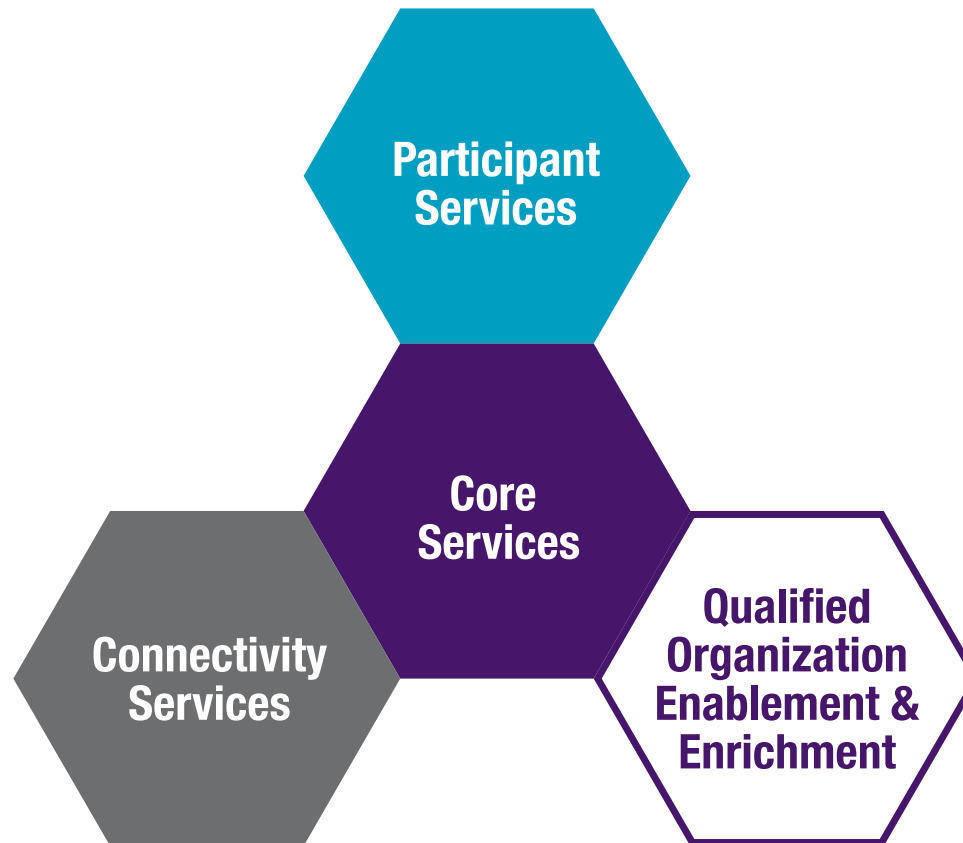
## Organizational Approach – NC HIE’s Choice

Statewide HIE is the market	Regional HIEs	Statewide network of diverse qualified organizations	Market determines structure
<ul style="list-style-type: none"> <li>• Statewide HIE builds infrastructure</li> <li>• NC HIE’s focus on local adoption/ governance</li> </ul>	<ul style="list-style-type: none"> <li>• Divides NC into territories</li> <li>• Statewide HIE provides governance, manages monopolies</li> </ul>	<ul style="list-style-type: none"> <li>• Range of “QOs” make up core structure</li> <li>• Statewide HIE provides policy guidance, core services and interoperability</li> <li>• Value-added services benefitting the range of participants</li> </ul> 	<ul style="list-style-type: none"> <li>• No core services</li> <li>• Private market addresses interoperability</li> <li>• Focuses on education and policy guidance</li> </ul>

# Why a NC Health Information Exchange?

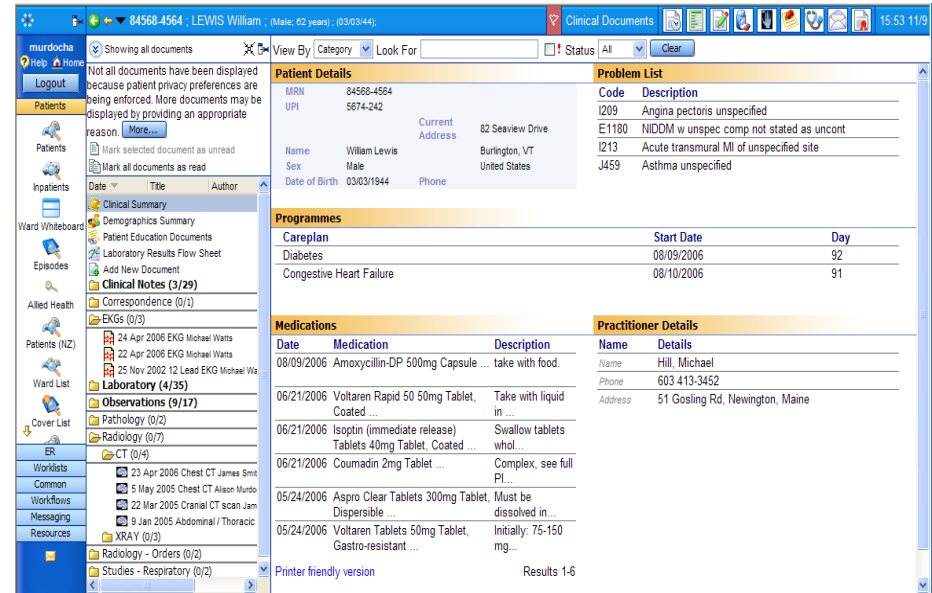
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Four focus areas for NC HIE initiatives:



# NC HIE Core Services Overview

- HIE Connectivity Fabric
  - Connectivity with participating systems: CCD, HL7, SSO, Web Services (Rhapsody™).
  - Storage of clinical information (CDR).
  - EMPI.
  - Data normalization.
  - Privacy and consent
- Virtual Patient Electronic Record
  - Web-based access to the longitudinal patient record (Clinical Portal).
  - User subscribed notifications
- Data Delivery Services
  - Lab results
- Direct Secure Messaging
  - Ability to send/receive secure messages with other Direct providers
  - Support for Direct-enabled EMR systems



84568-4564, LEWIS William (Male, 62 years) : (03/03/44)

Showing all documents

Not all documents have been displayed because patient privacy preferences are being enforced. More documents may be displayed by providing an appropriate reason. [More...](#)

Mark selected document as unread

Mark all documents as read

**Patients**

**Patients**

**Inpatients**

**Ward Whiteboard**

**Episodes**

**Allied Health**

**Patients (1/2)**

**Ward List**

**Cover List**

**ER**

**Worklists**

**Common**

**Workflows**

**Messaging**

**Resources**

**Clinical Summary**

**Demographics Summary**

**Patient Education Documents**

**Laboratory Results Flow Sheet**

**Add New Document**

**Clinical Notes (3/29)**

**Correspondence (0/1)**

**EKGs (0/3)**

**Laboratory (4/35)**

**Observations (9/17)**

**Pathology (0/2)**

**Radiology (0/7)**

**CT (0/4)**

**XRAY (0/3)**

**Radiology - Orders (0/2)**

**Studies - Respiratory (0/2)**

**View By** Category **Look For** **Status** All **Clear**

**Patient Details**

MRN 84568-4564

UPI 5674-242

Name William Lewis

Sex Male

Date of Birth 03/03/1944

Current Address 82 Seaview Drive Burlington, VT United States

Phone

**Problem List**

Code	Description
I209	Angina pectoris unspecified
E1180	NIDDM w unspec comp not stated as uncont
I213	Acute transmural MI of unspecified site
J459	Asthma unspecified

**Programmes**

Careplan	Start Date	Day
Diabetes	08/09/2006	92
Congestive Heart Failure	08/10/2006	91

**Medications**

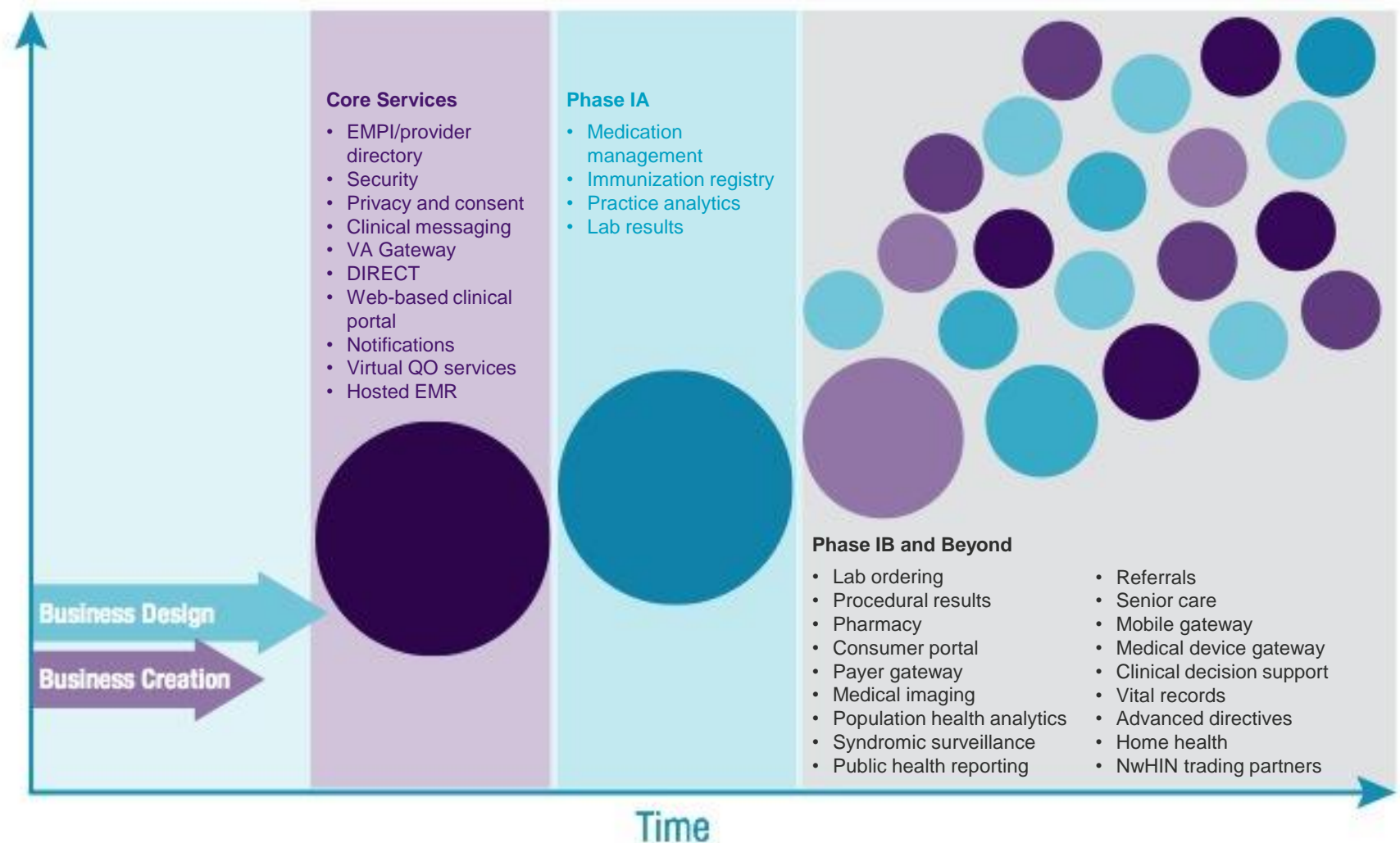
Date	Medication	Description
08/09/2006	Amoxicillin-DP 500mg Capsule ...	take with food.
06/21/2006	Voltaren Rapid 50 50mg Tablet, Coated.	Take with liquid in ...
06/21/2006	Isoprin (immediate release) Tablets 40mg Tablet, Coated ...	Swallow tablets whol...
06/21/2006	Coumadin 2mg Tablet ...	Complex, see full PI...
05/24/2006	Aspro Clear Tablets 300mg Tablet, Must be Dispersible ...	Must be dissolved in ...
05/24/2006	Voltaren Tablets 50mg Tablet, Gastro-resistant ...	Initially: 75-150 mg...

**Practitioner Details**

Name	Details
Hill, Michael	
Phone	603 413-3452
Address	51 Gosling Rd, Newington, Maine

Printer friendly version Results 1-6

# Timeline

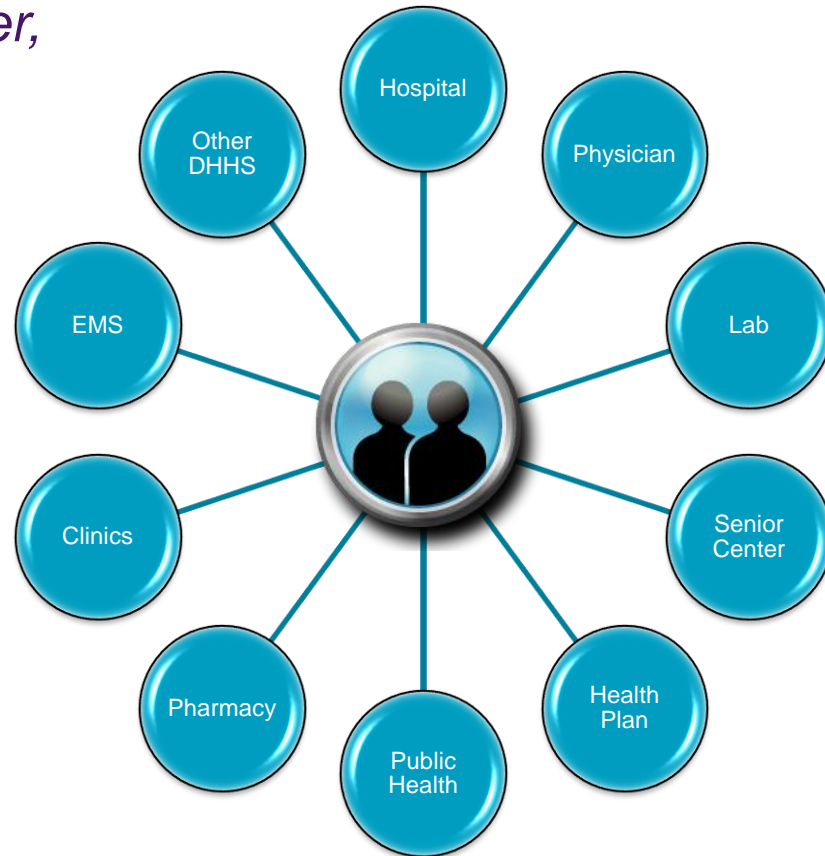




## What's in it for everyone?

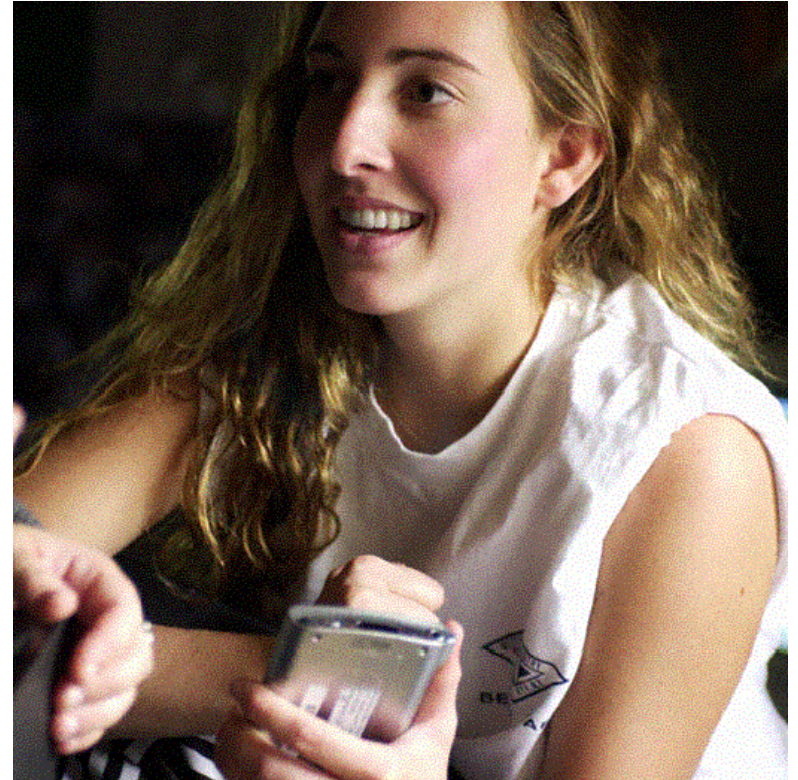
*Providing NC with better, safer, more affordable care*

- Integration
- Communication
- Insight
- Agility
- Custom



“The future is not so hard to predict. It’s already here, it’s just unevenly distributed.”

William Gibson, *Science fiction writer*



**Background**

# NC HIE Board of Directors

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## Executive Committee

- Lanier Cansler – Co-Chair  
NC Department of Health and Human Services
- Charles Sanders, MD – Co-Chair
- Bill Atkinson, PhD – Past Co-Chair  
North Carolina Hospital Association
- Hadley Callaway, MD – Vice Chairman  
North Carolina Medical Society
- Allen Dobson, MD – Treasurer  
Community Care North Carolina
- Jeff Miller – Chief Executive Officer
- George Saunders, MD –Director at Large  
North Carolina Medical Board
- Brad Wilson – Secretary  
Blue Cross Blue Shield of NC

## Ex-Officio

- Steve Cline, DDS  
NC DHHS/State HIT Coordinator
- Jerry Fralick  
CIO, State of NC
- Cragan Gray, MD  
State Medicaid Director

## Directors

- Thomas Bridges  
Board Directors

- Anthony Civello  
Pharmacy Interests
- Sam Cykert, MD  
Area Health Education Centers
- Gloria Frelix, MD  
Old North State Medical Society
- David King  
Laboratory Interests
- Becky Kitzmiller  
Nurses Association
- Ben Money  
NC Community Healthcare Centers Association
- Warren Newton, MD  
NC Healthcare Quality Alliance
- John Richter  
Nursing Home Industry
- Bill Roper, MD  
Academic Medical Centers
- Sam Spicer, MD  
NCHICA
- Senator Josh Stein  
NC State Senator
- Dave Tayloe, MD  
American Academy of Pediatrics
- Speaker Thom Tillis  
NC State Representative

# North Carolina Program to Advance Technology for Health (NC PATH)



- **\$15 million investment for**

- Technology
- Connectivity
- Support

- **Objectives:**

- Enablement of health information technology to support meaningful use
- Implementation of patient center medical home processes and practices
- Transformation of practice including quality improvement
- Community programs

More information at [www.allscripts.com/ncpath](http://www.allscripts.com/ncpath)