

New Rules: Lessons from Tennessee

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<http://www.volunteer-ehealth.org>

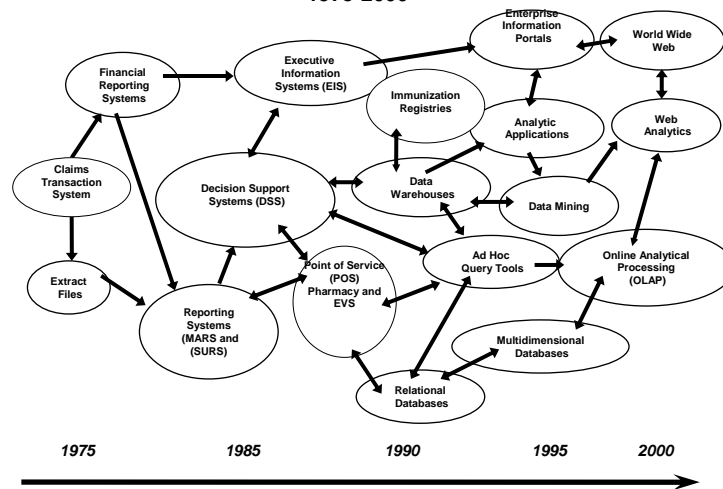
<http://www.volunteer-ehealth.org/frisse>

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The “system” is anything but a system

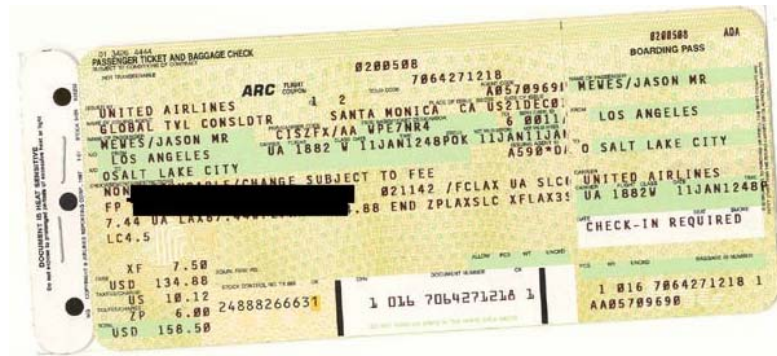
MMIS Evolution and Trends
1975-2000



Source: Modified from *Data Warehousing and E-Commerce*, William J. Lewis
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2

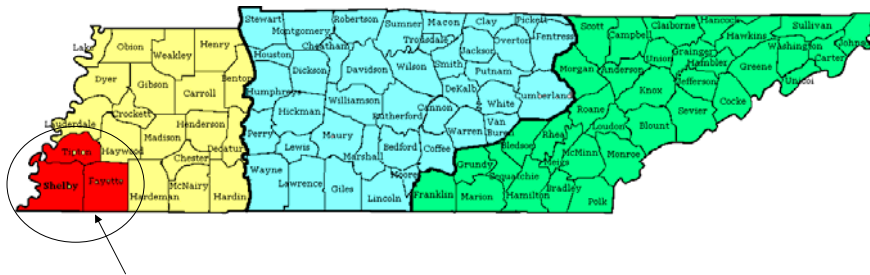
The “market” is anything but a market



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The state is not a single state



Tennessee borders 8 other states

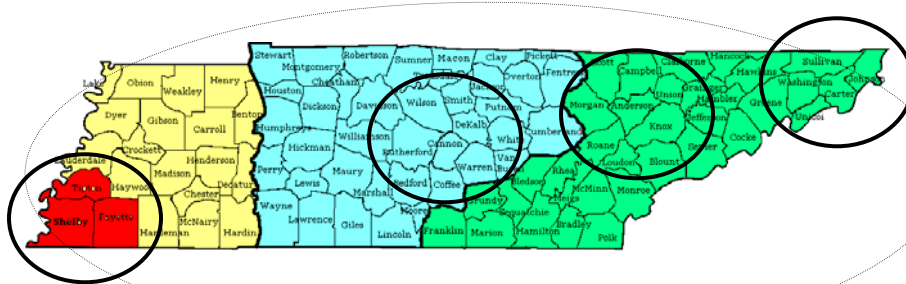
Our initiative covers 3 counties and includes Memphis.

*Tri-Cities are 370 miles from Canada and 430 miles from Memphis!
(Same as San Diego to San Francisco)*

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Some regions extend across state borders



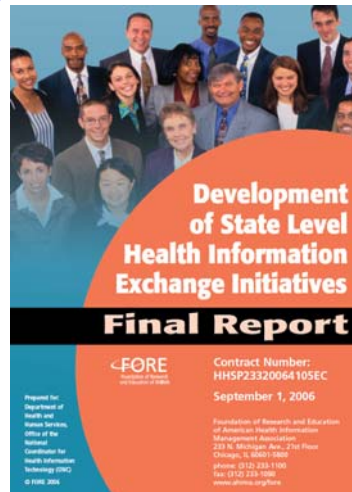
Other initiatives include Shared Health (Blue Cross); CareSpark (Tri-Cities – NE TN); eastern TN Health Information Network; Middle Tennessee

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States have power – with limits

- Conveners
- Employers
- Medicaid
- Public health
- Regulators
- Legislators
- Agents of economic progress
- Market-makers
- Focusing on long-term issues



See: <http://www.staterhio.org/>

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Sustained leadership (and funding) are critical

- Governor Phil Bredesen was personally involved in the Memphis project
- He has taken similar positions with other members of Tennessee's "portfolio of initiatives."
- The Commissioner of Finance and Administration was personally involved regularly for many months
- The state committed significant sums of money to complement AHRQ funding
- The leadership of the community was engaged quickly and given control
- Local leaders advanced the privacy and business agenda

Focus was crucial

- Our project focused initially on large hospitals and clinics in the Memphis area.
- We take all data from 15 institutions "as is." We parse and normalize key elements. We present as a uniform view through a record locator service, a record access service, and a secure Web browser.
- We deliver at present only to a select number of emergency departments using extreme security measures
- We are scaling to an "open utility" model that will be open to the market

You have to build it to really understand it

Help ? User: fri00w (Frise, Mark E) StarPanel Lite V1.2.0

Log Out Lock Clear All

Patient Search

Name SSN MRN

Medical Record Number

MRN#

Facility
The Regional Medical Ctr

Search

patient search result
You just searched for
MRN: 00029214 VAULT: med
Please use the plus, minus and hide button to toggle your selection.

MRN	NAME	DOB	SEX	SSN	SITE	DOS
0016		-74	M	XXX-X5-3337	Baptist Memphis (East)	06/01/2006
40		-74	M	XXX-X5-3337	Methodist Healthcare	06/01/2006
42		-74	M	XXX-X5-3337	Methodist Healthcare	06/03/2006
MC14		-74	M	XXX-X5-3337	The Regional Medical Ctr	05/31/2006
0008		-74	M	XXX-X5-3337	St. Francis Hospital	05/31/2006
0604		-74	M	XXX-X5-3337	Saint Francis-Bartlett	05/12/2006

Help ? User: port0r (Porter, James) StarPanel Lite V1.3.6

Log Out Lock Clear All

Patient Search

Name SSN MRN

Name/DOB/Gender

First name

Last name

Date of birth
MM / DD / YYYY

Gender
Select gender

Search

Patient Selection

Site MRN / DOS

BAR 060043821 21-SEP-06

BMHCC-Mem 0002114100 07-SEP-06

MED M001104147 27-JUL-06

MED M000622054 07-SEP-06

Methodist 11943026 18-JUL-06

SFH 000952794 21-SEP-06

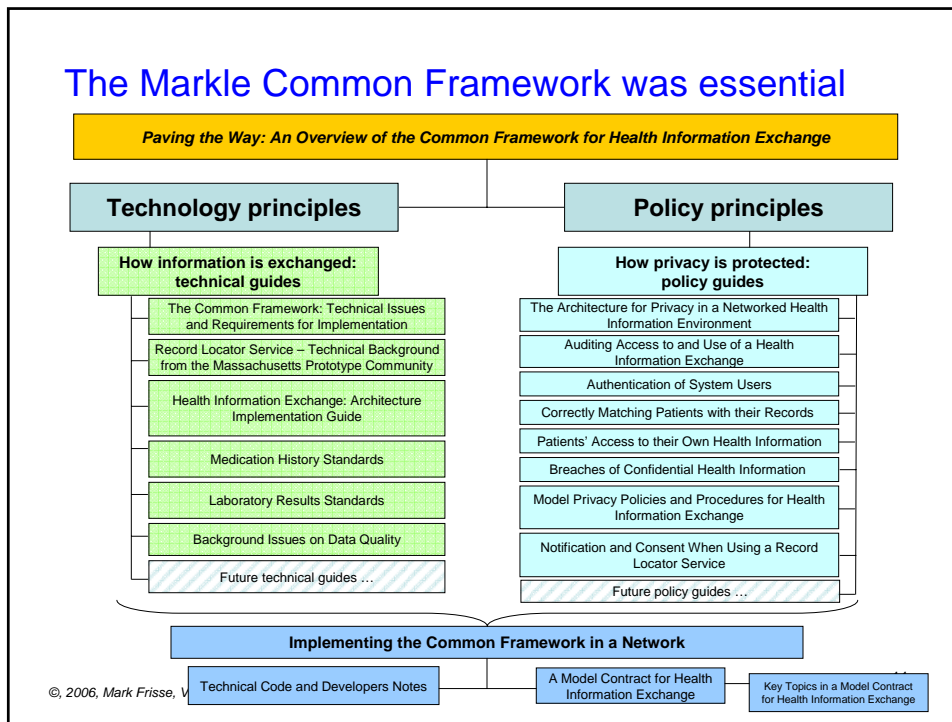
View Selected View All

Panels

EMP

Date	Location	Anion Gap	BUN	CL	CL CO2	Ca	Ca Creat	Gluc	K	K	Na	Na
09/27/06 15:45	SFH	-	4*	103	-	26	8.8	-	1.0	113*	-	3.1* 137
09/25/06 06:25	SFH	-	2*	106	-	26	8.1*	-	1.1	84	-	3.4* 140
09/24/06 05:00	SFH	-	3*	106	-	26	8.6*	-	0.9	88	-	3.1* 140
09/22/06 16:00	SFH	-	8	105	-	26	8.3*	-	1.3	92	-	3.2* 140
09/21/06 06:00	SFH	-	15	102	-	24	7.8*	-	1.8*	76	-	3.2* 137
09/21/06 02:01	BAR	-	13	101	-	22*	8.5*	-	1.6*	80	-	3.5 136
09/20/06 16:52	SFH	-	-	-	-	-	-	-	-	-	-	2.8*
09/20/06 06:38	SFH	-	4*	104	-	27	9.0	-	1.3	104	-	2.9* 141
09/13/06 22:05	BAR	-	7*	102	-	26	8.7*	-	1.3	99	-	2.8* 136
09/08/06 19:23	BAR	-	12	101	-	27	9.6	-	1.9*	79	-	3.3* 137
09/06/06 19:31	SFH	-	12	104	-	26	9.6	-	2.2*	108	-	3.5 142
09/04/06 04:45	SFH	-	11	100	-	27	9.9	-	2.0*	88	-	3.9 144
09/02/06 04:45	SFH	-	11	99	-	28	9.2	-	2.2*	98	-	3.9 136
08/30/06 04:00	SFH	-	10	102	-	23	8.1*	-	2.1*	98	-	4.0 134*
08/28/06 04:55	SFH	-	13	109*	-	22*	9.0	-	2.3*	101	-	4.7 139
08/26/06 05:30	SFH	-	11	108*	-	23	8.5*	-	2.3*	97	-	4.4 140
08/25/06 05:00	SFH	-	14	104	-	26	9.4	-	2.5*	90	-	4.3 137
08/24/06 00:01	SFH	-	18	100	-	22*	9.1	-	2.6*	107	-	3.3* 134*
08/22/06 20:30	SFH	-	13	96*	-	26	10.0	-	2.0*	100	-	3.4* 133*
08/19/06 09:00	SFH	-	9	98	-	27	9.2	-	1.6*	108	-	4.4 133*
08/18/06 03:30	SFH	-	8	100	-	29	8.3*	-	1.6*	105	-	4.2 135
08/17/06 05:00	SFH	-	10	100	-	26	9.2	-	1.7*	99	-	4.9 134*
08/16/06 04:30	SFH	-	10	99	-	24	9.1	-	1.6*	100	-	5.6* 132*
08/15/06 03:00	SFH	-	12	106	-	27	9.0	-	1.7*	122*	-	5.0 139

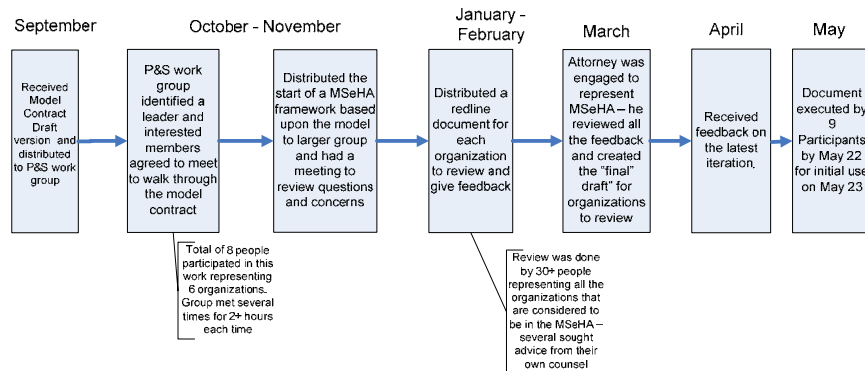
The Markle Common Framework was essential



It's about local policy

- Major barriers are not legal; primary barriers are local policies and workflow!
- Records are media, not paper.....(think Internet vs. book)
- People do not interpret / implement HIPAA uniformly
- Abstract discussions concerning pre-emption, protected health information, are important...but....
- We also know that the legal analysis will be ongoing and will include banking and consumer law as well as areas currently under investigation in many states
- We managed to execute agreements without a comprehensive, state-wide legal review

Policies take time



Our overall approach was to do as much work as we possibly could without incurring legal fees

MSeHA = Mid-South eHealth Alliance P & S = Privacy and Security

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Our course it is not sustainable (yet).....

- Nothing about American health care is sustainable
- Incentives are misaligned
- Complexity – even on “simple” issues like eligibility and e-prescribing – is crippling to innovation
- Population-based work may conflict with patient-specific interests and elevate public / practitioner concerns
- Health plans are pursuing multiple options
- Traditional EHR vendors are focusing on core markets
- Proliferating personal health records
- But the “horse is out of the barn”

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Previous

- [The MidSouth eHealth Alliance Data Sharing Agreements and Supporting Documents](#)
- [FORE / AHIMA Report](#)
- [The Tennessee eHealth Advisory Council](#)
- [Tennessee one of 9 States Participating in HHS / AHIMA Study](#)
- [Governor Bredesen, Healthcare Leaders Launch Campaign to Help Thousands of Tennessee Physicians Start e-Prescribing](#)
- [Volunteer eHealth Initiative Described in Recent AHRQ-funded Report](#)
- [Technical Advisory Panel Member Featured in Wall Street Journal](#)
- [Doctors Explore Prescription Usage](#)
- [Harvard and Industry Partners Announce Open-Source, User-Centric Identity Management Project](#)
- [CareSpark to co-Sponsor May 6 EMR Meeting](#)

Tuesday, September 26, 2006

The MidSouth eHealth Alliance Data Sharing Agreements and Supporting Documents

As of September, 2005, the MidSouth eHealth Alliance (MSeHA) and the AHRQ/TN State regional demonstration project is receiving comprehensive clinical data (labs, reports, diagnoses, etc.) from 15 organizations and is in operation in several emergency departments in the greater Memphis Area.

Our work led us to conclude that data-sharing agreements are critical. This process was based on data-sharing and other documents from the Markle Connecting for Health Policy Group. The process took much longer than expected but served as a vital means of bringing over 50 people within the region to a more common, patient-centered goal.

The MidSouth eHealth Alliance is a non-profit company chartered specifically to manage the data exchange demonstration project and is supported by multiple sub-groups and an inclusive operations committee working continually on updating policies and procedures. We present on this site three documents produced in the course of our work.