Iowa e-Health Connection
A monthly e-newsletter on the progress of health information technology and the health information exchange in Iowa

Executive Director Update
Welcome to the June edition of the Iowa e-Health Connection. On April 12th Governor Branstad signed the e-Health bill into law. This bill includes a number of provisions which I will highlight in this June edition.

First, the bill includes some liability protections for providers related to the use of information obtained through the Iowa Health Information Network (IHIN). If patient health care information is correct as presented to the IHIN but misused or mishandled by the retriever or end recipient, liability remains with the recipient. If information that is available and received through the IHIN is incorrect, liability would remain with the source of that information as long as appropriate best practices are followed by the recipient. If health information such as allergies or medication must always be verified with the patient, this would continue even though recent information was available through the IHIN.

Iowa e-Health By the Numbers
The nation’s leading e-prescribing network, Surescripts, provides data to the Office of the National Coordinator for Health IT on a quarterly basis. The data is used to track the extent to which e-prescribing technology is being utilized at the state level. Iowa’s e-prescribing environment accounts for the percent of pharmacies and physicians participating in e-prescribing, as well as the percent of new and renewal prescriptions being e-prescribed. Iowa e-Health’s e-Prescribing Subcommittee is working cooperatively with the Iowa Pharmacy Association and other interested stakeholders to provide education and outreach to pharmacists and prescribers in the state to encourage quality e-prescribing practices and increase adoption of this technology.
The bill also establishes a fee collection for participation in the IHIN. It also creates a separate fund for revenue and expense activities. The bill gives the Iowa Department of Public Health the authority to use this non-revertible funding for the specific requirements of the IHIN and the Iowa e-Health collaborative work of the Health Information Exchange grant. The department will do so through an annual budget approved by the e-Health Advisory Council and the State Board of Health. The advisory council will review the e-Health budget and the financial model annually and make recommendations to the State Board of Health.

The bill also establishes that Iowa is an opt-out state where patients must provide notification of their choice not to have their health information exchanged through the IHIN. The bill directs the department to establish that notification process in administrative rule. The choice not to have health information exchanged through the IHIN will begin as a statewide choice but the process could change in the future to provide patients more specific choices for opting out of IHIN exchange rather than only statewide. The rule itself will be rewritten and approved as technology advances which allows this more granular choice to be easily administered and with clear understanding by both providers and patients.

Other items in the bill include the addition of

**IHIN Logo Created**
A brand logo has been developed for the Iowa Health Information Network (IHIN). The logo is being incorporated into new informational materials, including a brochure about the Direct Secure Messaging component of the IHIN. The design of the logo contains multiple elements that represent the convergence of technology and health. The squares at the top of the mark appear to move from top to bottom, as if being moved like electronic data through the IHIN. The acronym uses a clean and bold font, giving it strength and prominence. The name is spelled out below, in a complementary font that doesn’t distract from the acronym. Blue is the primary color, chosen because the color signifies trust.

**Electronic Lab Reporting (ELR) Guidance Released by IDPH**
The Iowa Department of Public Health (IDPH) recently released the IDPH Implementation Guide and ELR Constrained Profile V1.01. The guide defines the standard structure and the standard content that must be used for electronic laboratory reporting (ELR) in order for the IPDH to be able to receive and consume electronic data. The guide describes how hospitals and laboratories should construct their messages, as well as how to go about submitting test messages, through a very useful tool called the Message Quality Framework (MQF) to the department. Once test messages have met the level of quality described in the guide using the MQF, messages are sent...
legislative definitions or modifications to those definitions already in HF 2539, clarification of the alignment to federal HIPAA laws, and those items that explain additional responsibilities of the department.

Thank you to the many individuals and organizations that helped to get SF2318 passed. Your efforts and other valuable contributions to this process are very greatly appreciated.

-- Kim Norby, Iowa e-Health Executive Director

Calendar

- June 19: Provider Adoption Workgroup Meeting; 1:00 pm via conference call
- June 20: Privacy and Security Workgroup Meeting; 1:00 pm via conference call
- June 22: Evaluation Workgroup Meeting; 9:00 am via conference call
- June 28: e-Prescribing Subcommittee Meeting; 2:00 pm via conference call

- June 29: IDPH for review. Once reviewed, IDPH will send a letter affirming that the facility has met the Meaningful Use Stage 1 objective for ELR.

IHIN’s Direct Secure Messaging Solution: Pilots Beginning in July

Iowa e-Health is pleased to offer Direct Secure Messaging as a first service of the Iowa Health Information Network beginning with pilot organizations on July 2, 2012.

The IHIN’s Direct Secure Messaging Solution enables providers to send patient health information via the internet in a secure and encrypted format to other providers with an IHIN Direct address. Though it functions much like standard email, IHIN Direct messages are secure, making it a quick and easy alternative to secured fax and a sensible replacement for un-secured email. The service allows for the exchange of information such as notes, referrals, care coordination details, and images.

EHR Adoption Success Story: Access to the Right Data at the Right Time

Flood preparation was the furthest thing from the minds of the staff at Medical Clinic P.C. in southwestern Iowa when they started using their EHR. They had the typical response to change that most EHR users experience. “They didn’t like it at first, but now they can’t live without it,” Nancy Buckalew, Practice Manager says. “There are just so many benefits to having an EHR.”

ICAetc Online Environment Open for EHR/EMR System Testing Prior to IHIN Connection

The Iowa Health Information Network (IHIN) is being built in preparation for
pilot go-live in July. It's time to get your electronic health record system ready to connect to the IHIN. Informatics Corporation of America (ICA) has an online testing environment to help you complete this essential task. Learn about how you can take advantage of this FREE opportunity to prepare for IHIN connection.

Health Information Network Will Offer Nurses Access to Complete Information, Greater Efficiency
The implementation of electronic health records will help nurses obtain important information to treat and care for patients, save valuable time and reduce inconvenience for patients, a leading nurse-educator says.

Calculated Risk in Telemedicine Fills Physician Void, Satisfies Patients
Imagine managing a health care system in a small city that has just lost its only psychiatrist. You could simply refer patients to providers several hours away, or you could do what Mercy Medical Center in Clinton has done – provide inpatient psychiatric care through telemedicine.

Registration for 2012 e-Health Summit is Open: Register Today!
Registration for the 2012 Iowa e-Health Summit, to be held August 8-9 at Prairie Meadows Events & Conference Center in Altoona, is open. Make plans to attend this premier event!
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