

# ENHANCING PEDIATRIC AND FAMILY PRACTICE: LEVERAGING HEALTH INFORMATION EXCHANGE FOR BETTER PATIENT CARE

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Chief Executive Officer,  
MyHealth Access Network

Explore Healthcare Summit /OAFP Scientific Assembly – May 2025



# AGENDA

- Purpose / Why a Health Information Exchange?
- History, Common Questions, HIE Progress & Milestones
- HIE Milestones
- Incentives for HIE Participation
- Progress & Framework
- Capabilities & Coverage
- Additional Value Capabilities
- Opportunity Ahead
- Discussion / Questions

# OKLAHOMA'S HEALTHCARE CRISIS: WHY CHANGE IS NEEDED

- **Ranked 47th in overall healthcare** quality, among the worst in the U.S.
  - Oklahoma ranks **near the bottom in key healthcare outcomes**—high hospital readmissions, poor chronic disease management, and preventable ER visits.
- **10th highest healthcare costs in the nation**, yet outcomes remain poor
  - **Providers struggle** with fragmented data, leading to **duplicate tests, medication errors, and delayed diagnoses**.
- **Uncoordinated care leads to inefficiencies and higher costs**
  - Patients receive **disconnected, expensive, and inefficient care**.



# WHAT IS AND WHY HEALTH INFORMATION EXCHANGE?

A Health Information Exchange (HIE) is a **secure system** that allows electronic sharing of a patient's medical record among different healthcare **providers involved in their care**.

The network is a digital hub where various doctors, nurses, care coordinators, pharmacists, mental health professionals, and other authorized healthcare professionals can access a patient's medical history in real-time.

Patient records are accessed within the network **according to HIPAA** and other **relevant state and federal laws**.

**Reduce health care costs** associated with redundant testing, hospital readmissions, and emergency department visits

**Improve care coordination** during transitions between health care settings, reduce adverse drug events and missed preventive care

Provide clinical data to **improve outcomes and support healthier Oklahomans**

**1/3 of Oklahomans have records in more than one health care delivery system**

# COMMON QUESTIONS

- Fees are set by the state designated entity for providers that choose to participate
  - Participation **Fees vary based on Organization Type and Size**
  - **Connection Fees can be paid through** the Connection Fee Assistance Program
  - **Incentives are available** for certain provider types that will in most case **exceed the annual costs of participation**
- Privacy & Security
  - HIPAA Compliance: SDE HIE policies are **more restrictive** than HIPAA and **providers must be in a treatment relationship to access records** and attest to that at the time of access
  - No Substance Abuse 42 CFR Part 2 data, or psychotherapy notes go into the HIE
  - Providers can **mark charts** or encounters as **sensitive**, and **not sent**
  - Security: SDE technology is **HITRUST certified**, 10+ years operating
- Provider Choice / Patient Consent
  - **Patients have the right to opt-out** and prevent disclosure (No Break the Glass allowed)
  - **Mental health patients must affirmatively consent** to any data being shared by a participating provider
  - **Providers have a choice in participation**; all exemption requests will be granted

# HIE MILESTONES

- **OKSHINE** was created in May 2021 to ensure every Oklahoma provider has access to a secure, statewide HIE
- **Office of the State Coordinator for HIE** was created in May 2022
- MyHealth received state designation in 2022
- Connection Fee Assistance Program launched in late 2023
  - Provided 21 million to connect Oklahoma providers
- SoonerSelect Provider Incentive Program launched in April of 2024
  - 15-month funding pool of \$134,330,110

# LEGISLATION

## SB 574 (May 2021)

- Created the **Oklahoma State Health Information Network Exchange (OKSHINE)**.

## SB 1369 (May 2022)

- Created the **Office of the State Coordinator** for Health Information Exchange.
- **Designated** that a health information exchange organization be named **state-designated entity for health information exchange (operations) be named** and overseen by the Coordinator.
- Defined the Health Information Exchange **Organization** as one **governed by its stakeholders**.
- Patient-specific protected health **information shall only be disclosed in compliance with relevant state or federal privacy laws**
- **Provided for Tort protection** for providers who use or do not use HIE data
- Data ownership remains in the property of the source providing.
- Declared a mandate that “**all providers shall**” participate in the statewide HIE **by July 1, 2023**.
- Coordinator may grant **exemptions**

## SB 32X

- Provided \$21 Million for one-time connection fees to the HIE for Oklahoma providers

## SB 1337

- Provides for **managed care entities** and providers to **submit data to the HIE**

## HB 3556

- Changed Language to “**all providers may**” participate in the statewide – Final Rules Reflect Choice

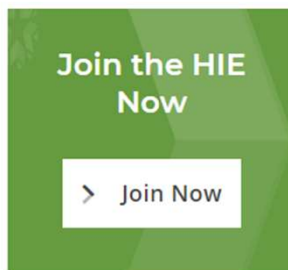
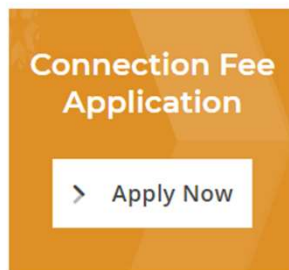
# INCENTIVES FOR HIE PARTICIPATION





# 1. CONNECTION FEE ASSISTANCE

- **2023 Legislative appropriation of \$30 million specific for HIE connection funding**
  - Any Organization that employs licensed Health Care providers in the State of Oklahoma is eligible.
  - Covers **all one-time fees** from **EHR Providers and MyHealth** to get providers connected, other related fees may be considered.
  - Funding may not always be available:
    - Carry-over remaining funds to FY25
    - **2024 Legislature approved pool for FY2025 of \$21 Million.**



Secure Connection Fee Assistance now! Apply at <https://okshine.ok.gov>

## 2. SOONERSELECT PROVIDER INCENTIVE PROGRAM

- **Eligible Provider Types**

- Advanced practice nurses, mid-level practitioners, **mental health providers** and licensed behavioral health practitioners, podiatrists, physicians, or anesthesiologist assistants

- **Exceptions**

- Behavioral Health Services by Mental Health professionals and Licensed Behavioral Health Practitioners at **Community Mental Health Centers are excluded** as they participate in a separate directed payment program
- Services rendered by **state employed or contracted physicians are excluded** as they participate in a separate directed payment program
- **Services at Federally Qualified Health Centers, Rural Health Clinics, and IHS/Tribal clinics are excluded**
- **Services for Medicaid population not transitioning to SoonerSelect (such as ABD) are excluded**

## 2. SOONERSELECT PROVIDER INCENTIVE PROGRAM

- Eligible providers can receive an estimated 28% increase in base fee schedule reimbursements for qualifying care and services
  - **+18.5%** base fee schedule increase for providers participating in SoonerSelect.
  - **+9.25%** for SoonerSelect Medicaid providers who participate in the HIE (send data & utilize) including;
    - Membership in Good Standing with Oklahoma State Designated Entity, MyHealth Access Network
    - Live (or demonstrably in progress) Connection from the provider's EMR to the HIE (SSO must be included for larger practices)
    - Program Q1 – Q5, (April 2024 – June 2025) does not require a set utilization metric target
      - Note: Future quarters will likely require demonstrated increase in utilization by the organization/provider)

## 2. SOONERSELECT PROVIDER INCENTIVE PROGRAM

AVERAGE PROGRAM PAYOUT EXAMPLES  
(APRIL 2024 – DECEMBER 2024)

Facility/Clinic Type	Avg Individual Providers	Avg Qualified Medical Billings	Avg SoonerSelect Incentive Payment	Avg Total Amount Paid for HIE Participation	HIE Participation Cost for per Quarter	Avg Net to Organization (3 Quarters)
Major Hospital System	831	\$4,280,864.81	\$1,234,823.32	<b>\$395,980.00</b>	\$71,249.64	<b>\$974,191.08</b>
Large Clinic Group	55	\$361,704.31	\$100,406.28	<b>\$33,457.65</b>	\$5,609.52	<b>\$83,544.39</b>
Small Clinic Group	1	\$18,991.89	\$5,478.58	<b>\$1,756.75</b>	\$165.00	<b>\$4,775.25</b>
Large Behavioral Health Group	186	\$2,739,410.44	\$760,214.15	<b>\$253,404.72</b>	\$13,635.36	<b>\$719,308.08</b>
Small Behavioral Health Group	3	\$87,062.75	\$24,159.92	<b>\$8,053.31</b>	\$165.00	<b>\$23,664.93</b>

# HEALTH PROVIDERS ELIGIBLE FOR THE INCENTIVE PROGRAM

Provider Type	Specialty
<b>09 - Advance Practice Nurse</b>	092 - Clinical Nurse Specialist
	093 - Certified Nurse Practitioner
	094 - Certified Registered Nurse Anesthetist (CRNA)
	095 - Certified Nurse Midwife
	096 - CNP Allergist
	097 - Psychiatric/Mental Health APRN
<b>10 - Mid-Level Practitioner</b>	100 - Physician Assistant
	102 - PA Allergist
	569 - Addiction Medicine
<b>11 - Mental Health Provider</b>	112 - Psychologist
	115 - Licensed Clinical Social Worker
	116 - Certified Social Worker
	119 - Family Training
	121 - Licensed Professional Counselor
	123 - Para Professional
<b>14 - Podiatrist</b>	140 - Podiatrist

Provider Type	Specialty
<b>31 - Physician</b>	272 - Oral Surgeon
	310 - Allergist
	311 - Anesthesiologist
	312 - Cardiologist
	313 - Cardiovascular Surgeon
	314 - Dermatologist
	315 - Emergency Medicine Practitioner
	316 - Family Practitioner
	317 - Gastroenterologist
	318 - General Practitioner
	319 - General Surgeon
	320 - Geriatric Practitioner
	321 - Hand Surgeon
	322 - Internist
	323 - Neonatologist
	324 - Nephrologist
	325 - Neurological Surgeon

# HEALTH PROVIDERS ELIGIBLE FOR THE INCENTIVE PROGRAM (CONT)

Provider Type	Specialty
31 - Physician	326 - Neurologist
	327 - Nuclear Medicine Practitioner
	328 - Obstetrician/Gynecologist
	329 - Oncologist
	330 - Ophthalmologist
	331 - Orthopedic Surgeon
	332 - Otologist, Laryngologist, Phonologist
	333 - Pathologist
	334 - Pediatric Surgeon
	335 - Maternal Fetal Medicine
	336 - Physical Medicine and Rehabilitation Practitioner
	337 - Plastic Surgeon
	338 - Proctologist
	339 - Psychiatrist
	340 - Pulmonary Disease Specialist
	341 - Radiologist

Provider Type	Specialty
31 - Physician	342 - Thoracic Surgeon
	343 - Urologist
	344 - General Internist
	345 - General Pediatrician
	346 - Dispensing Physician (1 active provider)
	347 - Radiation Oncologist
	348 - Abdominal Surgery
	349 - Adolescent Medicine
	350 - Critical Care
	351 - Diabetes
	352 - Endocrinology
	353 - Geriatric Psychiatry
	354 - Gynecological Oncology
	355 - Hematology
	356 - Hematology Oncology
	357 - Immunology

# HEALTH PROVIDERS ELIGIBLE FOR THE INCENTIVE PROGRAM (CONT)

Provider Type	Specialty
31 - Physician	358 - Infectious Diseases
	359 - Internal Medicine Pediatrics
	520 - Laryngology
	521 - Maxillofacial Surgery (3 active providers)
	522 - Musculoskeletal Oncology
	523 - Neurology Child
	524 - Occupational Medicine
	525 - Pain Medicine
	526 - Pediatric Critical Care Medicine
	527 - Pediatric Emergency Med (Pediatrics)
	528 - Pediatric Endocrinology
	529 - Pediatric Gastroenterology
	540 - Pediatric Hematology Oncology
	541 - Pediatric Infectious Disease
	542 - Pediatric Nephrology
	543 - Pediatric Ophthalmology

Provider Type	Specialty
31 - Physician	544 - Pediatric Orthopedics
	545 - Pediatric Otolaryngology
	546 - Pediatric Pathology
	547 - Pediatric Pulmonology
	548 - Pediatric Rheumatology
	549 - Pediatrics Allergy
	550 - Pediatrics Cardiology
	551 - Pediatric Surgery (Neurology)
	552 - Pediatric Urology
	553 - Psychiatry Child
	554 - Pulmonary Diseases
	555 - Rheumatology
	556 - Rhinology
	557 - Sports Medicine
	558 - Surgery Colon & Rectal
	559 - Surgery Head & Neck

# HEALTH PROVIDERS ELIGIBLE FOR THE INCENTIVE PROGRAM (CONT)

Provider Type	Specialty
31 - Physician	560 - Surgery Pediatric
	561 - Surgery Traumatic
	562 - Transplant Surgery
	563 - Neonatal Perinatal Medicine
	565 - Sleep Medicine
	566 - Medical Resident in Training
	568 - Family Practice Obstetrics
	569 - Addiction Medicine
53 - Licensed Behavioral Health Practitioner	093 - Certified Nurse Practitioner
	115 - Licensed Clinical Social Worker
	121 - Licensed Professional Counselor
	535 - Licensed Mental Health Professional – LBP
	536 - Under Supervision
	585 - Licensed Marital and Family Therapists
	586 - Licensed Alcohol and Drug Counselor
	587 - LADC/MH

Provider Type	Specialty
11 - Mental Health Provider	110 - Outpatient Mental Health Clinic
60 - Anesthesiologist Assistant	101 - Anesthesiologist Assistant



# HEALTH PROVIDERS EXCLUDED FROM THE INCENTIVE PROGRAM

## Exclusions

- Payments made for services rendered at or by providers or organizations with the following types and specialties are not included in the incentive payment calculation.

Provider Type	Specialty
<b>02 - Ambulatory Surgical Center (ASC)</b>	022 – ITU Ambulatory Service Center
<b>08 - Clinic</b>	080 - Federally Qualified Health Center 081 - Rural Health Center 084 - ITU Outpatient Clinic 086 - Dental Clinic 087 - OT/PT/ST/RT Group 106 - ITU Inpatient Service 184 - Hospital Based Rural Health Clinic 185 - Free Standing Rural Health Clinic

Provider Type	Specialty
<b>11 - Mental Health Provider</b>	111 - Community Mental Health Clinic 118 - Department of Mental Health and Substance Abuse Services (DMHSAS) Contracted Provider
<b>13 - Public Health Agencies</b>	All Specialties
<b>26 - Transportation Provider</b>	268 - ITU Ambulance
<b>52 - State Employed Physicians</b>	All Specialties

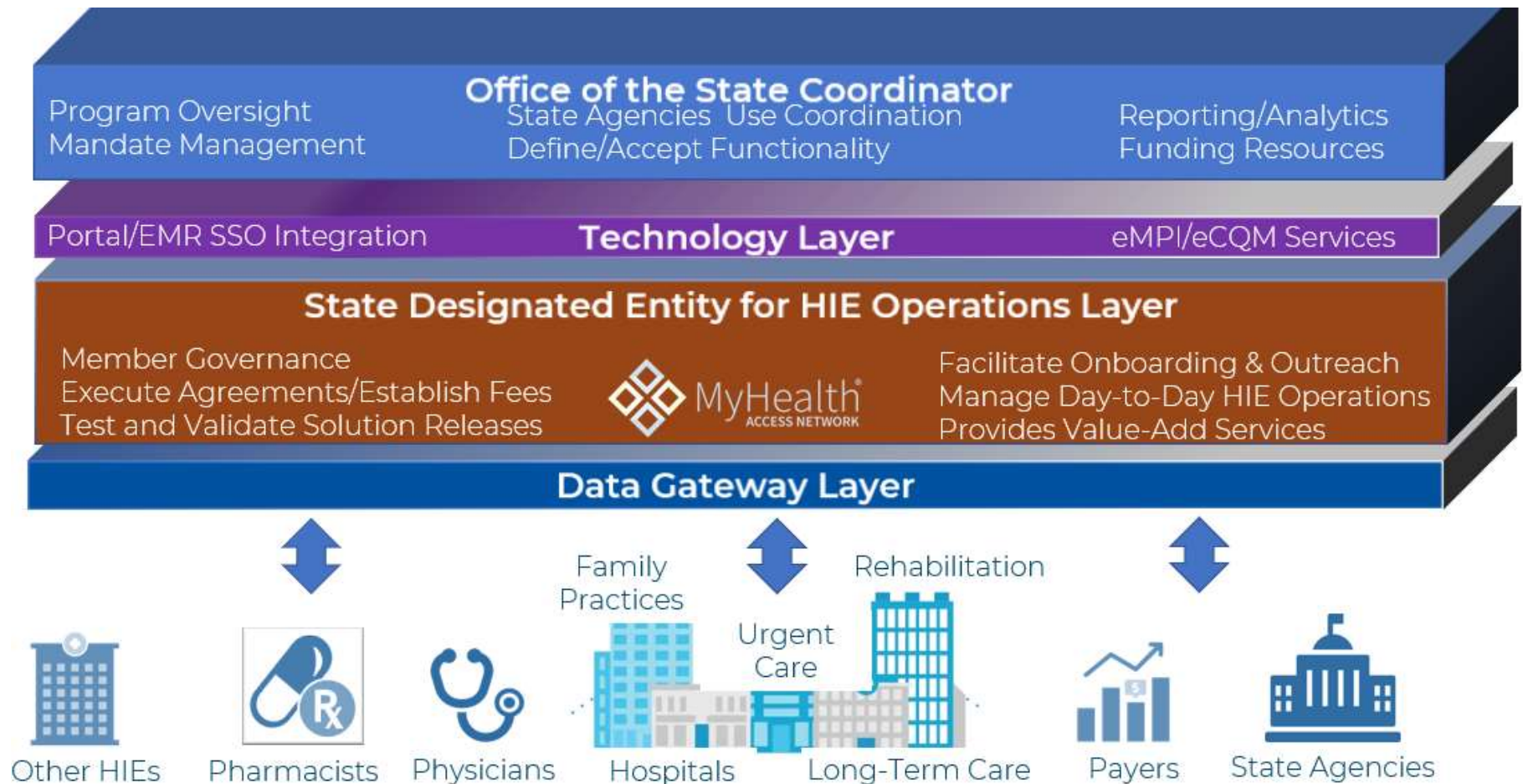
# HIE PROGRESS & FRAMEWORK



# HIE PROGRESS

- Progress Statistics
  - Averaging >50,000+ Unique Patient's records accessed monthly
    - **200%+ increase in Utilization from Sept 2022**
  - Over 500 organizations actively participate in the HIE serving patients in 1500+ Locations
    - **200+ Organizations joined since July 2022; membership nearly doubled!**
  - SoonerSelect Dental & Medical MCE's Contracted, Trained and Connected
    - ADT / care fragmentation available are in use at MCE's who have elected to receive.
  - Connection Fee Grants Awarded: **485**
    - Over **200+** Organizations Actively working on connecting – Optimization in Process
    - EMR Connection Fees now eligible for reimbursement.
  - SoonerSelect Directed payments (April 2024 – June 2025)
    - Plan Q1 (04/24-06-24) Closed – Payments Issued \$12M / HIE Incentive \$2M
    - Plan Q2 (07/24-09-24) Closed– Payments Issued \$37M / HIE Incentive \$7M
    - Plan Q3 (Oct24-Dec24) – Payments Issued \$26M / HIE Incentive \$5.5M
    - Continues through June 2025 (Planning to extend to SFY26, working with CMS)

# HIE FRAMEWORK



# DIVISION OF RESPONSIBILITY

- Select and oversee the state designated entity
- Implement laws and rules related to HIE
- Represent the state in SDE governance
- Seek funds / incentives to support providers in adopting the HIE



- Stakeholder-governed operator of HIE
- Establish policies for data exchange and utilization
- Establish pricing for services
- Outreach and Onboard participants
- Ensure patient rights are protected & data secured



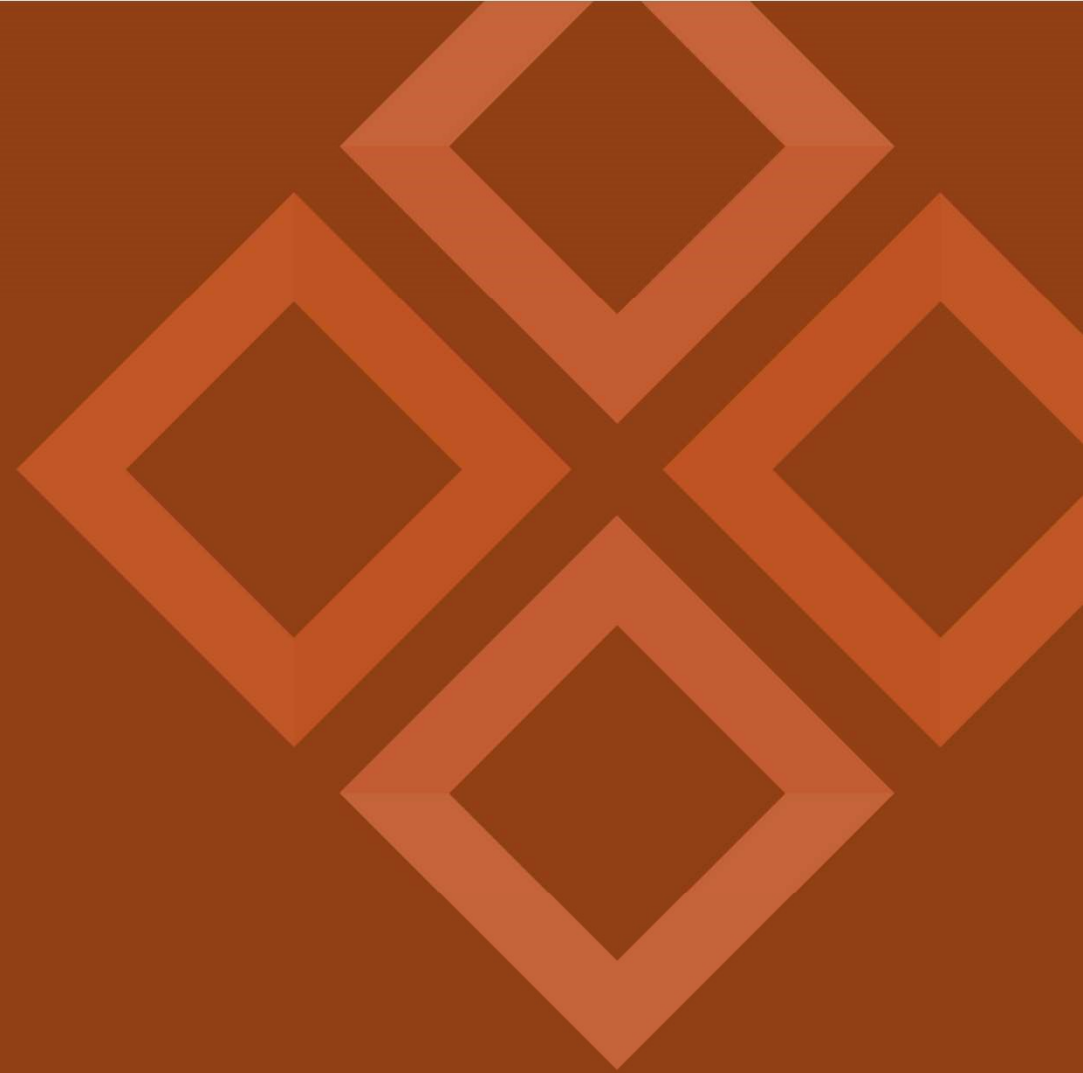
# HIE CAPABILITIES & COVERAGE

**David Kendrick, MD, MPH, FACP**

Chief Executive Officer,  
MyHealth Access Network

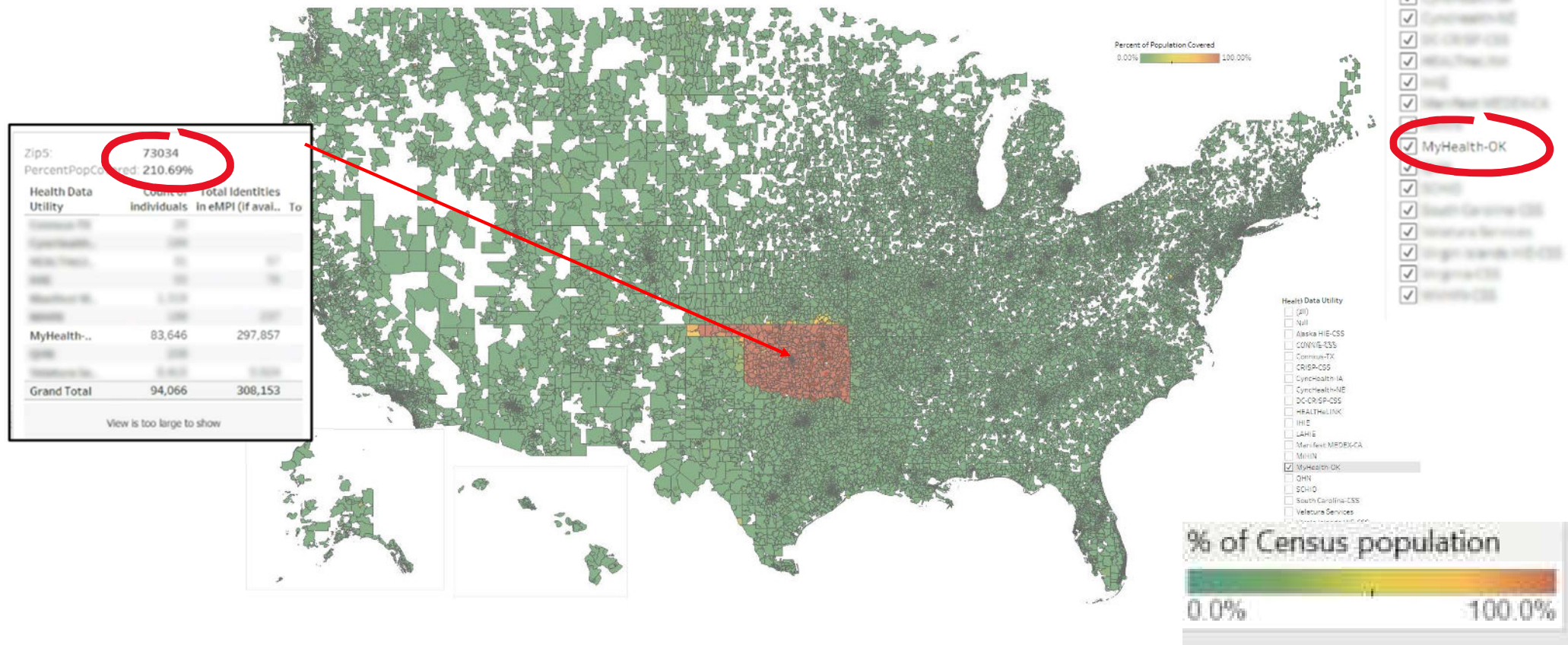
## **MyHealth Access Network**

Oklahoma's State-Designated Entity for  
Health Information Exchange (HIE)





# US HIE PATIENT POPULATION / DATA DENSITY



# FRAGMENTATION BY HEALTH SYSTEM

HEALTH SYSTEM A

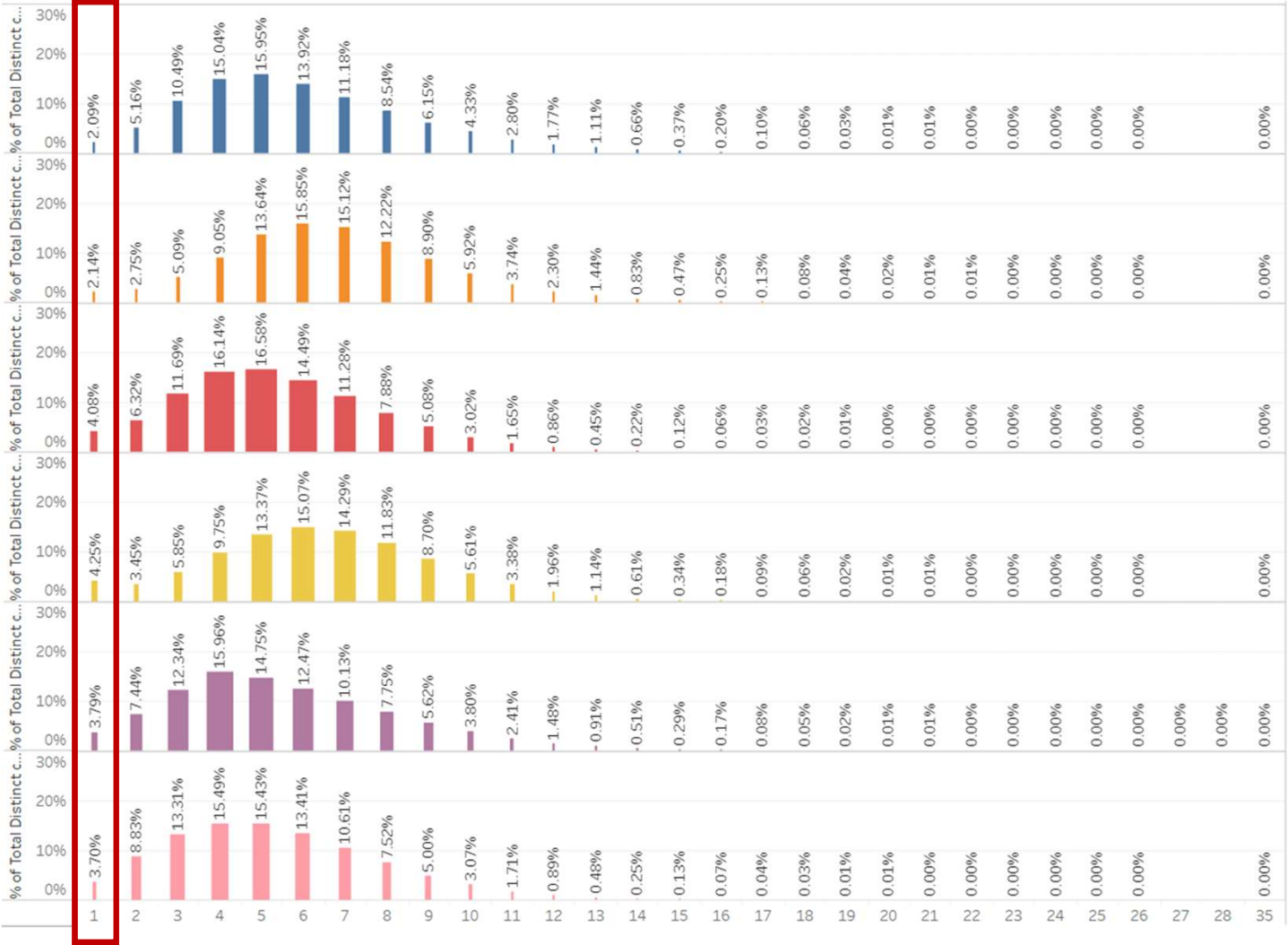
HEALTH SYSTEM B

HEALTH SYSTEM C

HEALTH SYSTEM D

HEALTH SYSTEM E

HEALTH SYSTEM F







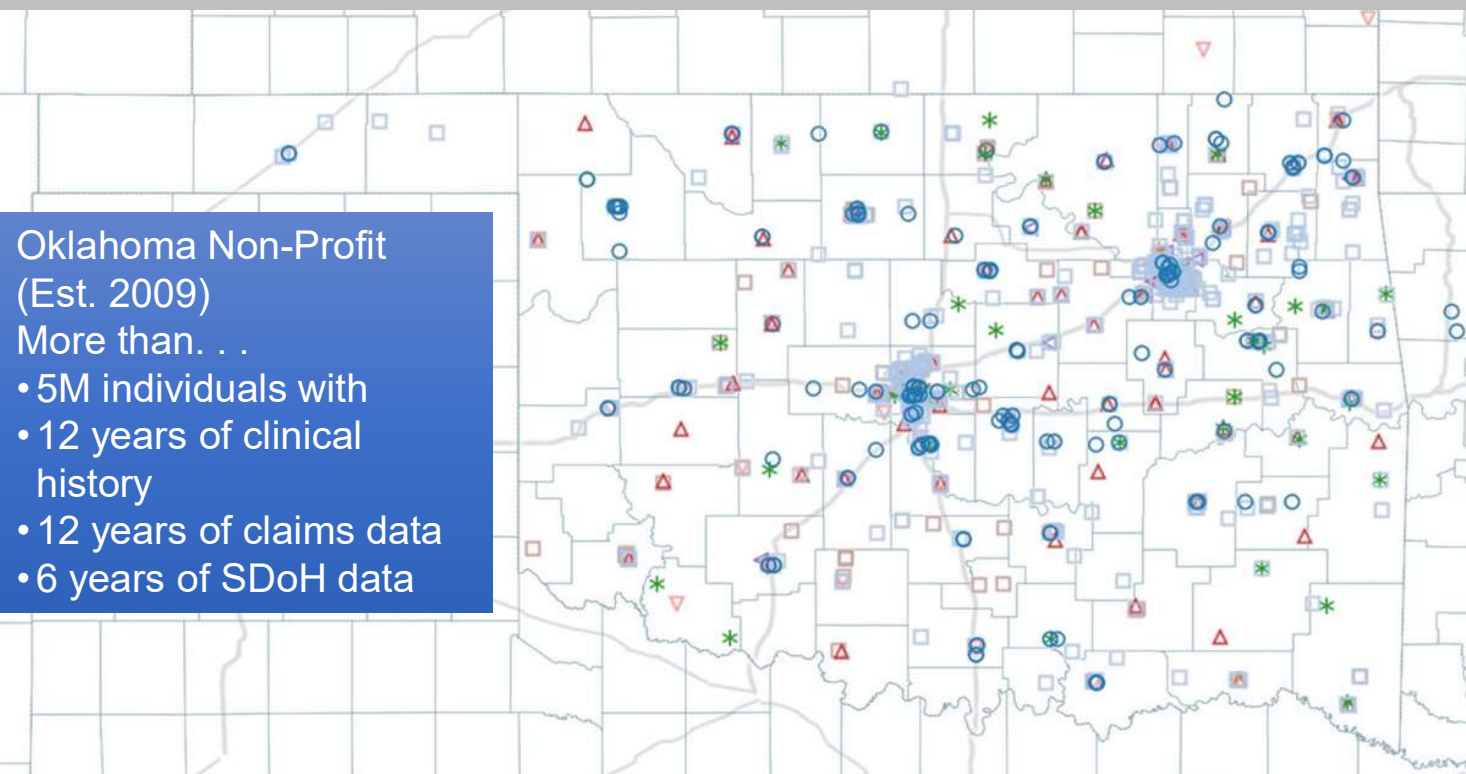


>1,500 locations serving >130,000 patients daily

Oklahoma Non-Profit  
(Est. 2009)

More than. . .

- 5M individuals with
- 12 years of clinical history
- 12 years of claims data
- 6 years of SDoH data



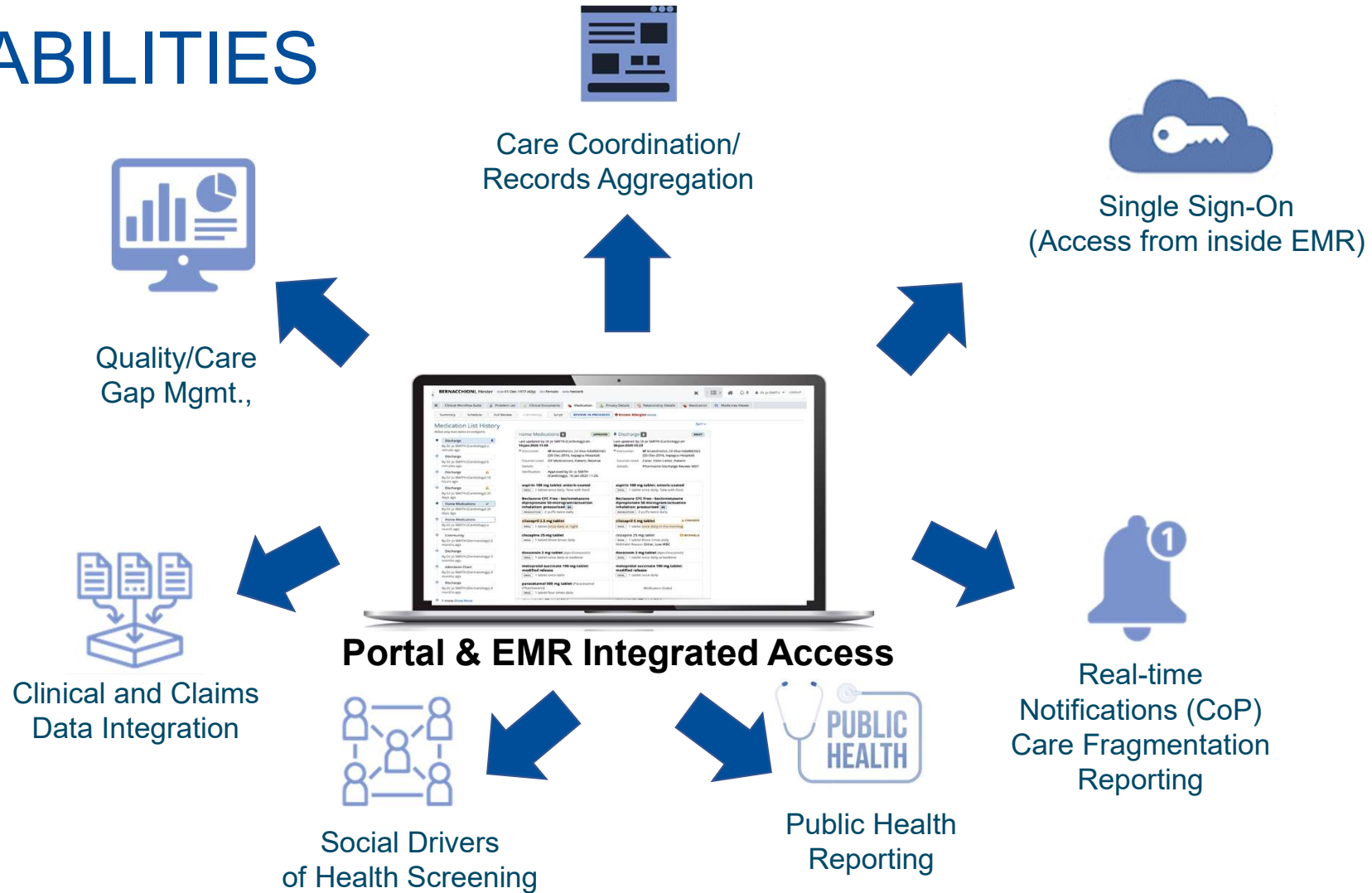
#### Facility Type

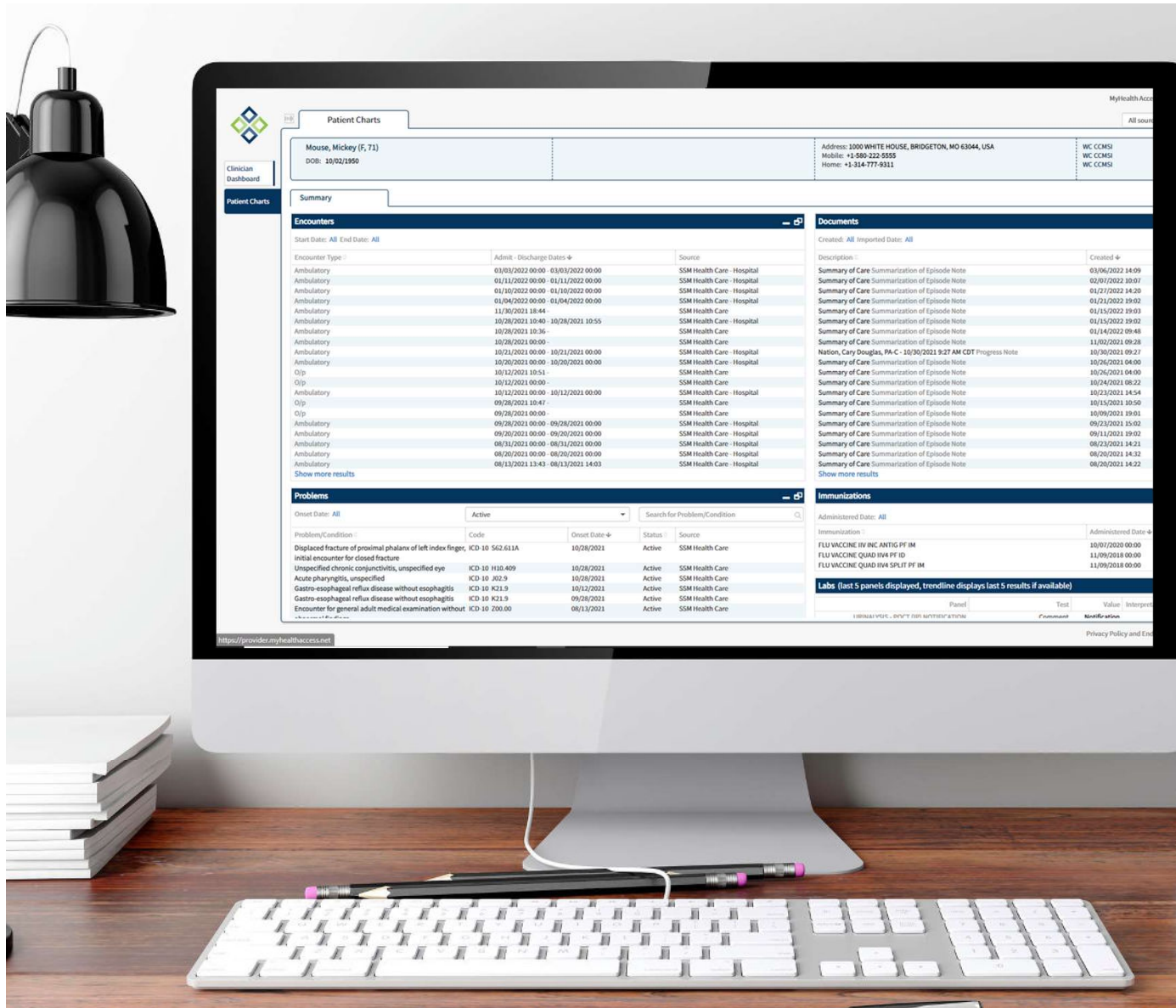
Null	Emergency Services	Lab	Pharmacy
Behavioral Health...	FQHC	Long Term Care ...	Public Health
Clinic	Hospice	Ophthalmology/Op...	Urgent Care Facility
Community/Social...	Hospital	Payer	

#### Facility Type

○ Null	× Emergency Services	▽ Lab	□ Pharmacy
○ Behavioral Health...	* FQHC	◁ Long Term Care ...	+ Public Health
□ Clinic	◇ Hospice	▷ Ophthalmology/Op...	× Urgent Care Facility
+ Community/Social...	△ Hospital	○ Payer	

# CAPABILITIES





- Find the most complete records immediately.
- No need to read separate documents from every org.
- Close loops on referrals.
- Coordinate Care Better

# SINGLE SIGN-ON

Pivotal in strategy to increase utilization

- Access to HIE in patient context!
- No login
- No searching

The screenshot displays a medical software interface for a patient named Jane Test. The interface includes a sidebar with various navigation options, a main content area with patient details and medical history, and a browser window showing a patient portal.

**Navigation Sidebar:**

- Test, Jane
- MyHealth HIE (highlighted with a red circle)
- Nursing Communications
- Orders
- I-View
- MAR
- MAR Summary
- Medication Request
- Results
- Vitals
- Advanced Growth Chart
- Allergies
- CC Summary
- Core Measure Data
- ED Summary
- Forms
- Inpatient Summary
- Notes
- Lab
- Medication List
- Pt Care Summary
- Rad
- Vitals
- Tasks
- Patient Information

**Patient Information:**

- Female 24 Years
- DOB: 01/01/2000
- MRN: 10000000
- Loc: S Cath
- Pt #: S 200000000
- Adm Sts: Outpatient/Same Day...
- Sts: Inpatient, Active, Inpatient, Chest Pain

**Admission Documentation:**

Result	Result	Author	Date/Time
In Patient Pregnant	No	Doe, John	
Patient Admitted From	Yes	Smith, Mary	Smith, Mary
Patient Preferred Name		Smith, Mary	Smith, Mary
Screening Test Score	27	Smith, Mary	Smith, Mary

**Reason for Visit:**

Chest Pain  
Modified: Doc, Jane Doe JUL 30, 2024 14:00

**Allergies:**

Substance	Severity
Penicillin	Anaphylaxis
Shellfish	Moderate
Aspirin (ASA)	Moderate
Lactose	Moderate

**Vital Signs:**

Vital Sign	Interpretation	Value
BP		120 / 70
P		73 bpm
RR		12 bpm
T		98.6 F
HR		66 bpm
HR		248 bpm
BMI		24
BSA		

**Encounters:**

Encounter Type	Admit - Discharge
Ambulatory	01/01/2024 12:55 - 01/01/2024 12:55
OP	06/01/2024 09:05 - 06/01/2024 09:05

**Browser Window:**

Provider Portal  
provider.myhealthaccess.net/dashboards

**Patient Charts:**

Test, Jane (F, 24)  
DOB: 01/01/2000

Address: 2542 ST, TULSA, OK 74104, US  
Home: (918) 579-2000; (918) 579-2000

VA CCN OPTUM  
NO INSURANCE  
SELF PAY

**Summary:**

**Allergies:**

Allergen	Reaction	Comment	Date	Status	Source
PCN			11/15/2021	Active	OUHSC-OKC
GLEEVEC	Reaction: Angioedema		03/16/2021	Active	OUHSC-OKC
ACE INHIBITORS	Reaction: Angioedema		11/09/2020	Active	OUHSC-OKC
CODINE			01/03/2018	Active	OUHSC-OKC
TAPE	Reaction: Hives		02/10/2014	Active	OUHSC-OKC
PEANUT	Reaction: Throat swells		02/28/2013	Active	OUHSC-OKC
PENICILLIN	Reaction: Itching, hives		12/04/2012	Active	OUHSC-OKC

**Encounters:**

Encounter Type	Admit - Discharge Dates	Source
Ambulatory	05/18/2024 12:55 - 05/18/2024 12:55	St John Clinics
Ambulatory	01/23/2024 15:00 - 01/23/2024 15:45	St John Clinics
Ambulatory	12/12/2023 12:13 - 12/12/2023 00:00	OU Health
Ambulatory	04/17/2023 11:31 - 03/21/2023 12:24	Ardent Health Services
Ambulatory	11/29/2022 11:22 - 11/19/2022 23:45	OUHSC-OKC
Ambulatory	11/19/2022 23:36 - 08/30/2022 11:54	OUHSC-OKC
Ambulatory	08/16/2022 08:15 - 08/09/2022 10:48	OUHSC-OKC
Ambulatory	08/09/2022 10:48 - 08/09/2022 10:48	OUHSC-OKC





Clinician  
Dashboard

Patient Charts

Patient Charts

Sources: All

TEST, JANE (F, 25)  
DOB: 01/01/2000

Demographics

Address: 2542 ST, TULSA, OK 74104, US  
Home: (918)579-2000; (918)579-2000

VA CCN OPTUM  
NO INSURANCE  
SELF PAY

Summary

Allergies

Allergen	Reaction	Comment	Date	Status	Source
PCN			11/15/2021	Active	OUHSC-OKC
GLEEVEC	Reaction: Angioedema		03/16/2021	Active	OUHSC-OKC
ACE INHIBITORS	Reaction: Angioedema		11/09/2020	Active	OUHSC-OKC
CODEINE			01/03/2018	Active	OUHSC-OKC
TAPE	Reaction: Hives		02/10/2014	Active	OUHSC-OKC
PEANUT	Reaction: throat swells		02/28/2013	Active	OUHSC-OKC
PENICILLIN	Reaction: Itching, hives		12/04/2012	Active	OUHSC-OKC
PORK	Reaction: Swelling and high blood pressure		11/13/2012	Active	OUHSC-OKC
ASPIRIN (ASA)	Reaction: hives		10/22/2012	Active	OUHSC-OKC
BANANA	Reaction: bannanas mild reaction		09/12/2012	Active	OUHSC-OKC
SHELLFISH			08/10/2012	Active	OUHSC-OKC
LOSARTAN POTASSIUM	Reaction: Edema		07/16/2012	Active	OUHSC-OKC
LATEX			06/25/2012	Active	OUHSC-OKC
SULFA (SULFAMETHOXAZOLE-TRIMETHOPRIM)			05/24/2012	Active	OUHSC-OKC
BEE STINGS			04/23/2012	Active	OUHSC-OKC
COCONUT			04/23/2012	Active	OUHSC-OKC
PENICILLIN			04/10/2012	Active	OUHSC-OKC
CT CONTRAST (ISOVUE-370)	Reaction: RASH/HIVES		04/06/2012	Active	OUHSC-OKC
APPLES			03/19/2012	Active	OUHSC-OKC
AMICAR (AMINOCAPROIC ACID TABS)			01/17/2012	Active	OUHSC-OKC

Medication

Date Written: All	Active				
Filter(s) active - to view additional data adjust search criteria or filter(s), or reset to all					
Medication	Route	Start/End Dates	Date Written	Source	

Labs (last 5 panels displayed, trendline displays last 5 results if available)

Panel	Test	Value	Interpretation	Trendline	Elapsed Time	Source	Status	Range
Unknown	urobilinogen, urine, semiquantitative (dipstick)	0.2			12y 3m	OUHSC-OKC	final	
	hemoglobin, urine, by dipstick	neg						
CBC	basophils as percent of blood leukocytes, automated count	0.2 %			12y 9m	OUHSC-OKC	final	
	erythrocyte (RBC) count	4.50 10E12/L						3.85-5.00
	mean platelet volume	15.5 fL	H					9.3-12.9
	mean corpuscular volume, RBC	85.5 fL						73.0-90.0
	monocytes as percent of blood leukocytes	0.4 %						
	leukocyte count, blood	5.5 10E9/L	L					6.0-14.5
	lymphocyte count, blood, automated	0.03 10E9/L	L					2.00-8.00
	monocyte count, blood	0.02 10E9/L	L					0.20-0.90
	Granulocyte percent	85.5 %						
	lymphocytes as percent of blood leukocytes	0.5 %						
	eosinophil	0.02 10E9/L						0.00-0.45



# PATIENT CHART SUMMARY

The following are examples of categories recorded in a patient's HIE chart, including the types of data captured and the source associated with each dataset.

Allergies	• Allergen, Reaction, Comment, Date, Status (Active/Inactive)
Dispensed Medication	• Medication, Pharmacy, Date Filled
Documents	• Description, Created
Encounters	• Encounter Type, Admit – Discharge Dates
Equipment Devices	• Device, Date Implanted, Body Location
Family History	• Problem/Condition, Onset Date
Immunizations	• Immunization, Administered Date
Insurances	• Insurance Name, Effective Dates
Labs	• Panel, Test, Value, Interpretation, Trendline, Elapsed Time, Status & Range
Medication	• Medication, Route, Start/End Dates, Date Written
Patient Relationships	• Name, Phone, Relationship
Problems	• Problem/Condition, Code, Onset Date
Procedures	• Procedure, Date
Radiology	• Test, Date, Ordering Provider
Social History	• Social History, Onset Date
Vital Signs	• Vital Sign, Interpretation Time, Value, Elapsed Time

# WHAT USERS ARE SAYING



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# ADDITIONAL OFFERINGS

- **Care Fragmentation Alerting**

- Notifies and gives providers visibility into their patients who may receive care in the past 24 hours at a facility outside of yours (emergency rooms, hospitals, clinics).

- **Care Gap Reporting**

- Aids providers in pinpointing and addressing gaps in patient care by providing the most recent values, based on a provider's specified value set.

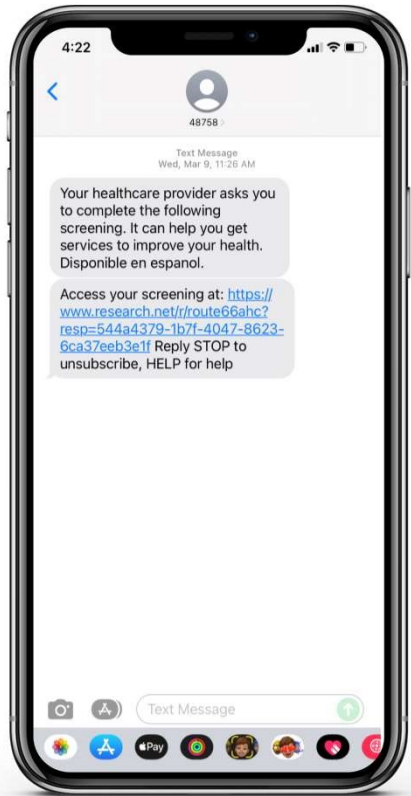
- **E-Notification (COP)**

- Helps hospitals meet CMS Conditions of Participation (CoP) Electronic Notification requirement by delivering real-time ADT notifications to a patient's care team upon admission, discharge, or transfer.

# **ADDITIONAL VALUE CAPABILITIES**



# SDOH Mobile Screening



11:29  
Messages  
research.net

Accountable Health Screening Tool

MyHealth ACCESS NETWORK

1. Which of the following languages would you feel comfortable completing a survey in?

☐ English  
☐ Spanish

☐ English  
☐ Spanish

Click the link below if you would like to view the Privacy Act Notice for the Accountable Health Communities  
Model: <https://myhealthaccess.net/MyHealth-Accountable-Health-Communities-Screening-Privacy-Notice-Final.pdf>

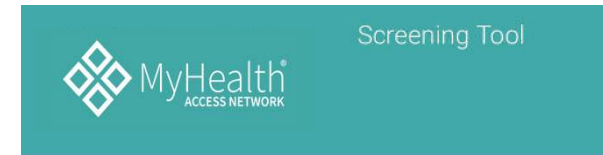
OK

7. Within the past 12 months, you worried that your food would run out before you got money to buy more.

- ☐ Often true  
☐ Sometimes true  
☐ Never true

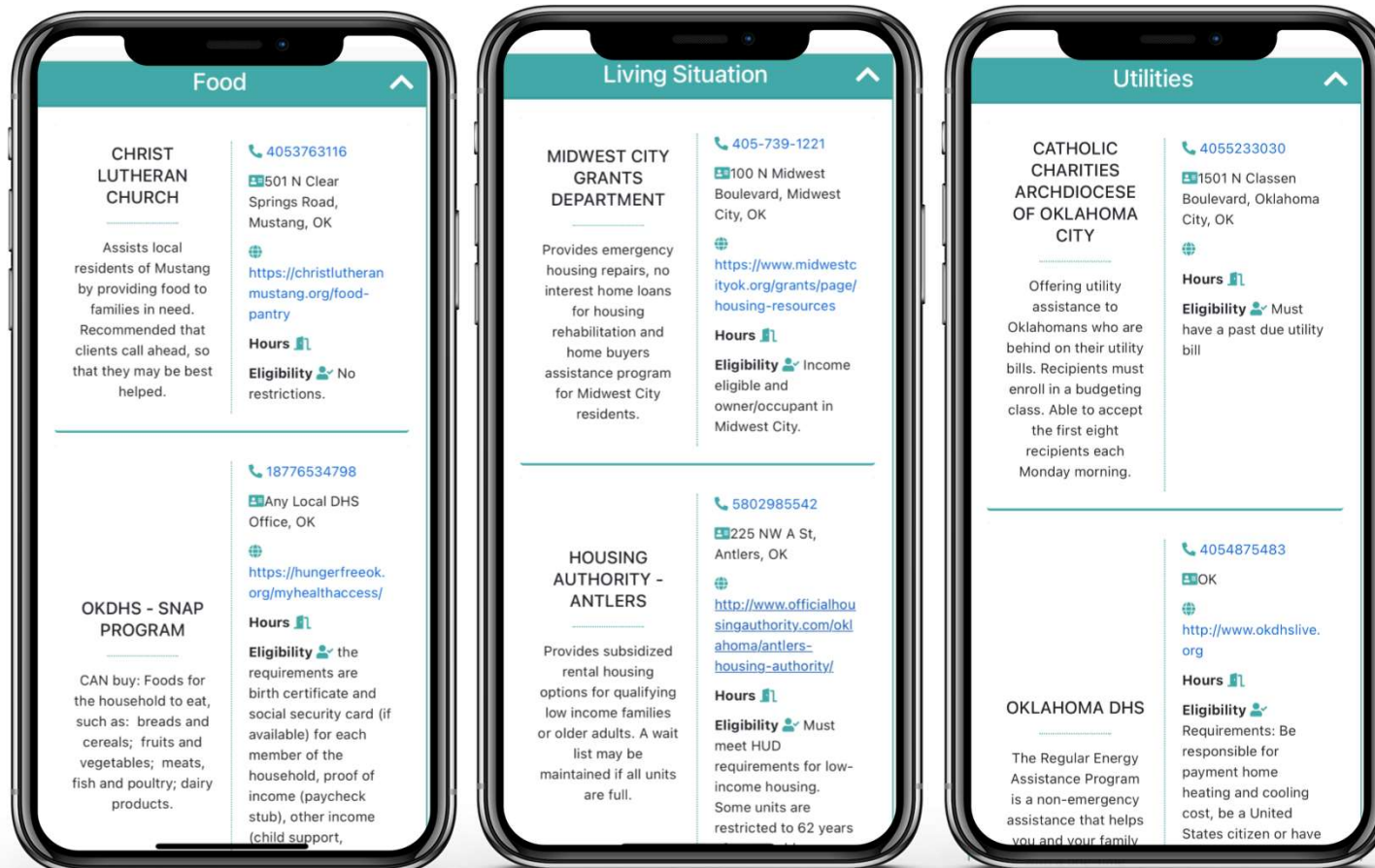
9. In the past 12 months, has lack of reliable transportation kept you from medical appointments, meetings, work or from getting to things needed for daily living?

- ☐ Yes  
☒ No



Thank you for completing our survey! Based on your survey results you may receive an additional text message with a link to help connect you to services in your community that may improve your health. Many of these services are low cost or free of charge.

DONE



# Community Resource Summary



# SDOH PROGRAM METRICS

AUGUST 2018 – MARCH 2025

By the numbers:

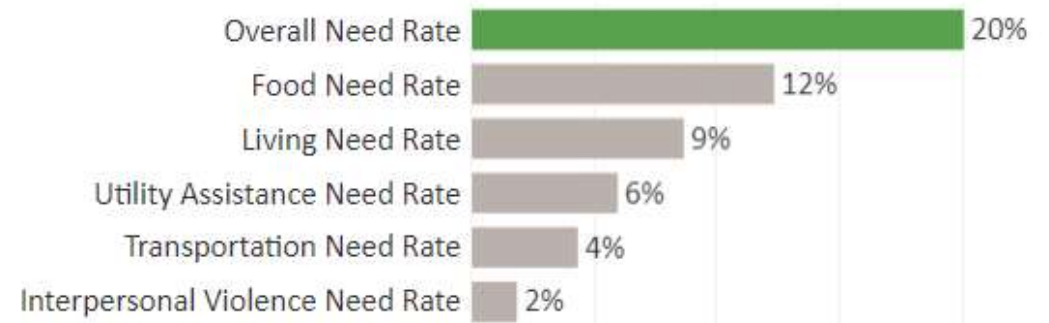
- ✓ **5.4+** million offers to screen
- ✓ **931,000+** responses
- ✓ **191,000+** responses with needs
- ✓ **317,000+** individual needs reported

Screening Delivery Rate

84%

Screening Response Rate

21%



24% of responses report 2+ needs

average of **1.7** needs are reported per need positive screening

**85%** of responses with a living need is due to living conditions\* rather than having a place to stay

*\*Living condition issues include lack of heating, lead paint or pipes, mold, oven or stove not working, pests, missing or not working smoke detectors, and water leaks*

# PROVIDER PORTAL – SOCIAL NEEDS RESULTS (IN DEV)

Patient Charts

Sources: All

TEST, ZZ TEST (F, 24)  
DOB: 01/01/2000

Demographics

Print full chart

Address: 2542 ST, TULSA, OK 74104, US  
Home: (918)579-2000; (918)579-2000

VIA CCN OPTUM  
NO INSURANCE  
SELF PAY

Summary

Social Needs Screening

Panel	Domain	Question	Response	
			06/15/24	10/11/23
Accountable health communities (AHC) health related social needs screening (HRSN) (96777-8)	Living Situation	What is your living situation today? (71802-3)	I have a steady place to live (LA3193-1)	I have a place to live today, but I am worried about losing it in the future (LA31994-9)
Accountable health communities (AHC) health related social needs screening (HRSN) (96777-8)	Food	In the last 12 months, how often has your food run out before you got money to buy more? (88122-7)	Sometimes true (LA6729-3)	Often True (LA28397-0)
Accountable health communities (AHC) health related social needs screening (HRSN) (96777-8)	Transportation	In the last 12 months, has transportation kept you from medical appointments, meetings, work, or from getting things needed for daily living? (93030-5)		

Social Needs Screening

Panel	Domain	Question	Response	
			06/15/24	10/11/23
Accountable health communities (AHC) health related social needs screening (HRSN) (96777-8)	Living Situation	What is your living situation today? (71802-3)	I have a steady place to live (LA3193-1)	I have a place to live today, but I am worried about losing it in the future (LA31994-9)
Accountable health communities (AHC) health related social needs screening (HRSN) (96777-8)	Food	Within the past 12 months, how often has your food run out before you got money to buy more? (88122-7)	Sometimes true (LA6729-3)	Often True (LA28397-0)

Documents

Created: All Imported Date: All

Description	Created	Source
College of Medicine Clinical Summary Summarization of episode note	11/30/2021 20:50	OUHSC-OKC
College of Medicine Clinical Summary Summarization of episode note	11/24/2021 22:26	OUHSC-OKC
College of Medicine Clinical Summary Summarization of episode note	11/23/2021 21:18	OUHSC-OKC
College of Medicine Clinical Summary Summarization of episode note	8/20/2021 00:38	OUHSC-OKC
College of Medicine Clinical Summary Summarization of episode note	8/20/2021 21:46	OUHSC-OKC
College of Medicine Clinical Summary Summarization of episode note	7/20/2021 20:28	OUHSC-OKC
College of Medicine Clinical Summary Summarization of episode note	6/20/2021 22:10	OUHSC-OKC
College of Medicine Clinical Summary Summarization of episode note	6/20/2021 20:38	OUHSC-OKC
College of Medicine Clinical Summary Summarization of episode note	2/20/2021 21:49	OUHSC-OKC
College of Medicine Clinical Summary Summarization of episode note	2/20/2021 20:41	OUHSC-OKC
College of Medicine Clinical Summary Summarization of episode note	7/20/2021 21:42	OUHSC-OKC
College of Medicine Clinical Summary Summarization of episode note	3/20/2021 19:23	OUHSC-OKC
College of Medicine Clinical Summary Summarization of episode note	1/20/2021 20:53	OUHSC-OKC
College of Medicine Clinical Summary Summarization of episode note	5/20/2021 20:52	OUHSC-OKC
College of Medicine Clinical Summary Summarization of episode note	9/20/2021 21:57	OUHSC-OKC
College of Medicine Clinical Summary Summarization of episode note	4/20/2021 20:39	OUHSC-OKC
College of Medicine Clinical Summary Summarization of episode note	1/20/2021 22:02	OUHSC-OKC
College of Medicine Clinical Summary Summarization of episode note	0/20/2021 22:11	OUHSC-OKC
College of Medicine Clinical Summary Summarization of episode note	5/20/2021 20:28	OUHSC-OKC
College of Medicine Clinical Summary Summarization of episode note	4/20/2021 22:34	OUHSC-OKC

Allergies

Allergen	Reaction	Comment
PCN		
GLEEVEC	Reaction: Angioedema	
ACE INHIBITORS	Reaction: Angioedema	
CODEINE		
TAPE	Reaction: Hives	
PEANUT	Reaction: throat swells	

Vital signs

Vital sign	Interpretation	Value	Elapsed Time	Vital sign	Interpretation
BP		120 / 80 mm(Hg)	2y 8m	BSA	
P		75 beats/min	2y 8m	PS	
RR		12 breaths/min	2y 8m	SpO2	
T		98.6 [degF]	2y 8m	LMP	
Ht		66 in	2y 8m	AG	
Wt		220 lbs	2y 8m	HC	

# HIE VALUE FOR HEALTHCARE PROVIDERS

- Reduced errors in care
- Speed access to care
- Reduce costs and burden
- Level playing field for rural and independent providers
- Performance in risk- and value-based payment models

# THE OPPORTUNITY AHEAD





# PIVOTAL TIME IN OKLAHOMA HIE

## **Opportunities**

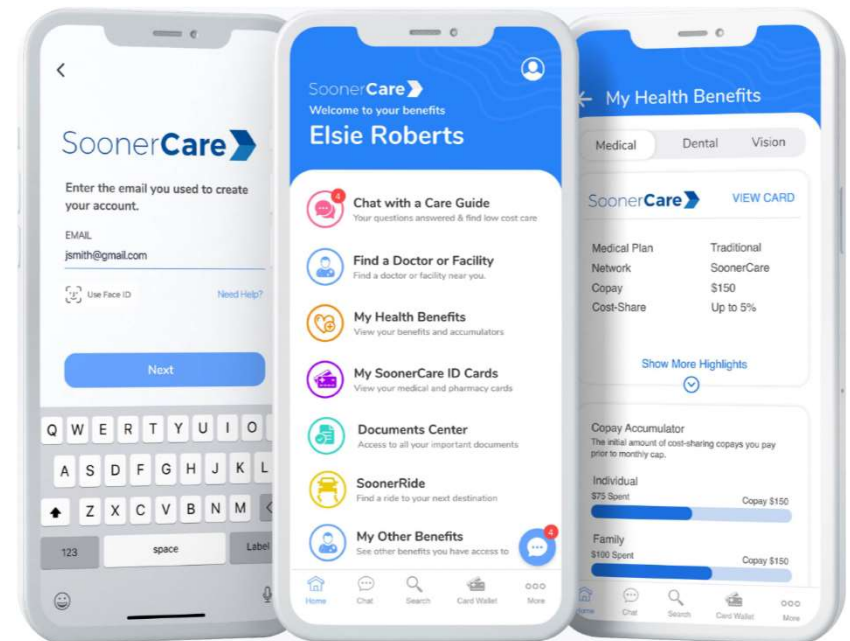
- State Funding for HIE has never been greater
- Cost pressure on Managed Care
- Incentives to get providers connected.
- Never before could most providers connect at no cost!
- In most cases the Provider will be incentivized more than their cost!

## **Risks**

- Legislature
- High risk of losing funding
- Timely Action by Providers

# HIE IN SUMMARY

- Improved care coordination
  - Enhanced assessment
  - Close gaps in care
  - Enable better follow-up
  - Enhanced care management
- Reduced costs of care
- Address social needs
- Timely access to care and services



The HIE provides a path to information for healthier outcomes for Oklahomans!

# HIE VISION

*“Our vision is for all Oklahomans to have a portable health record that can be easily accessed securely and used in care coordination between health care providers across the state to enable healthier Oklahomans.”*

# QUESTIONS?

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# DISCUSSION

