Congress holds the key to achieving improved healthcare through better use of data
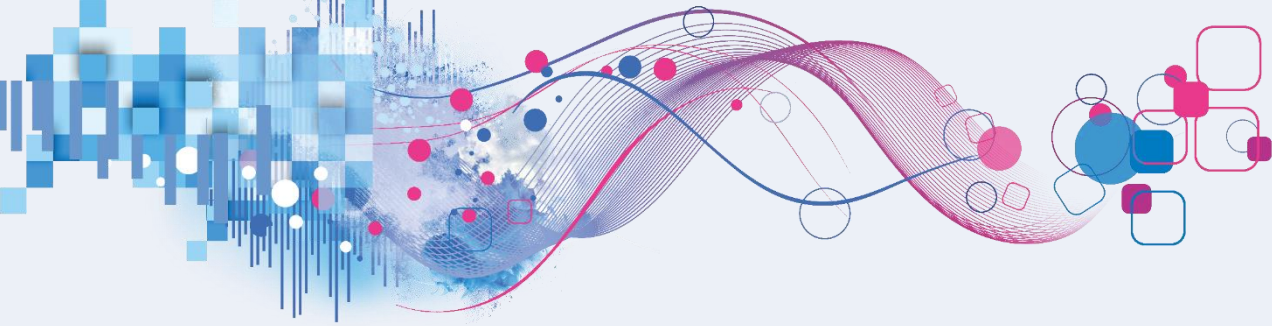
Presented to:

Becker's Hospital Review 4th Annual Health IT + Revenue Cycle Conference

September 19-22, 2018

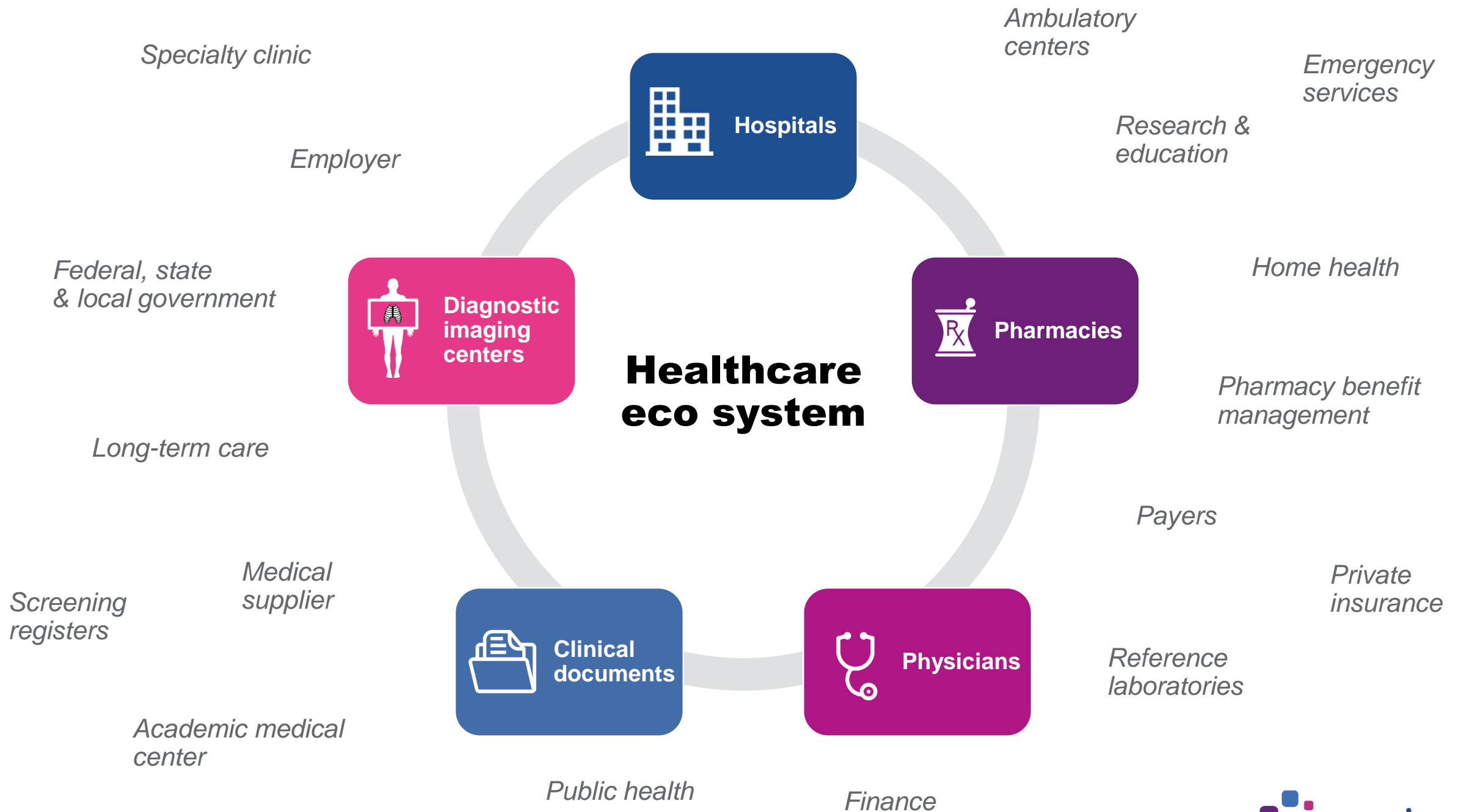**Hyatt Regency, Chicago**

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Today's presentation

1. Current state of the industry

2. Ensuring Patient Access to Healthcare Records Act

3. Patient safety, population health management, and duplicate medical record challenges

4. How the industry can link data from multiple clearinghouses through a non-vendor-specific universal patient identifier (UPI) algorithm

5. Real-world example: National Council for Prescription Drug Programs (NCPDP)

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Current state of the industry
Still a mostly disconnected ecosystem

Healthcare eco system

Hospitals

Pharmacies

Physicians

Clinical documents

Diagnostic imaging centers

Specialty clinic

Ambulatory centers

Emergency services

Research & education

Employer

Home health

Federal, state & local government

Pharmacy benefit management

Long-term care

Payers

Private insurance

Medical supplier

Reference laboratories

Screening registers

Academic medical center

Public health

Finance

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Transparency of health data a top priority for policy makers

- Trusted Exchange Framework and Common Agreement

- HHS pricing transparency rulemaking

- 21st Century Cures Act Rulemaking

  – Information Blocking

- Access to data held by clearinghouses

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Ensuring Patient Access to Healthcare Records Act

- Would remove the Business Associate (BA) status from clearinghouses, which are the only covered entities under HIPAA that also carry the BA designation.

- Data currently archived in clearinghouses could be used to provide health histories on nearly the entire U.S. population

- This data, which has use limitations because of the original HIPAA law, would facilitate improved patient record matching to:

  - create a secure, universal patient medical record

  - allow technological innovation that leads to true interoperability in healthcare

- If passed the legislation wouldn't change or limit the patient privacy and data security protections afforded under existing law

Valuable data is on HIPAA lockdown

- **Clearinghouses handle an estimated 90% of all healthcare claims transactions in the United States**

  - These companies have existed for decades—long before the idea that consumers should have access to their EHRs.

  - Clearinghouses manage payment transactions that flow between payers and more than 5,000 hospitals, 900,000 doctors, 66,000 pharmacies, and 20,000 labs.

- **HIPAA's dual restrictions on healthcare clearinghouses limit the use of this data for any purpose except processing claims**

  - The result is that clearinghouses are prevented from playing a role in helping patients and providers easily obtain a full and historical view of healthcare visits, diagnosis, and treatment.

  - The Ensuring Patient Access to Healthcare Records Act would allow clearinghouses to lead this effort.

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> " *As technology improves it is likely that clearinghouses will find ways to take advantage of databases of protected health information that aggregate records based on the individual subject of the information. This technology would allow more cost-effective access to clearinghouse records on individuals and therefore access for inspection and copying could be appropriate and reasonable.* "

1999 HIPAA Privacy Rulemaking

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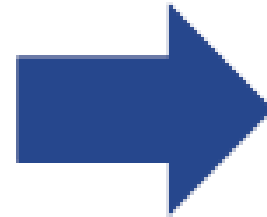
Data from payers, pharmacies, labs, and providers (via clearinghouses & HIEs) creates comprehensive patient view

which powers clinical workflows, analytics, smartphone apps, and consumer devices

Integrated health data would reduce costs and improve the customer experience

The legislation would clarify that healthcare clearinghouses, should be permitted to use and disclose protected health information in the same manner as other covered entities under the HIPAA Privacy Rule, allowing clearinghouses to distribute data for all permitted uses under HIPAA while still ensuring that they meet the privacy and data security requirements of current law.

Data portability through a non-vendor-specific UPI algorithm

- **Benefits patients / consumers**

  - Comprehensive view of their medical history

  - Associate all relevant health data with a unique individual, providing for the compilation of accurate medical histories that can flow throughout the healthcare ecosystem

  - Improved data matching prevents a patient receiving the wrong diagnosis or lab results after being mistaken for another patient with the same name

- **Benefits industry – payers and providers**

  - This data would lead to better public health outcomes, such as cost savings for payers and providers and a reduction in healthcare fraud and medical identity theft.

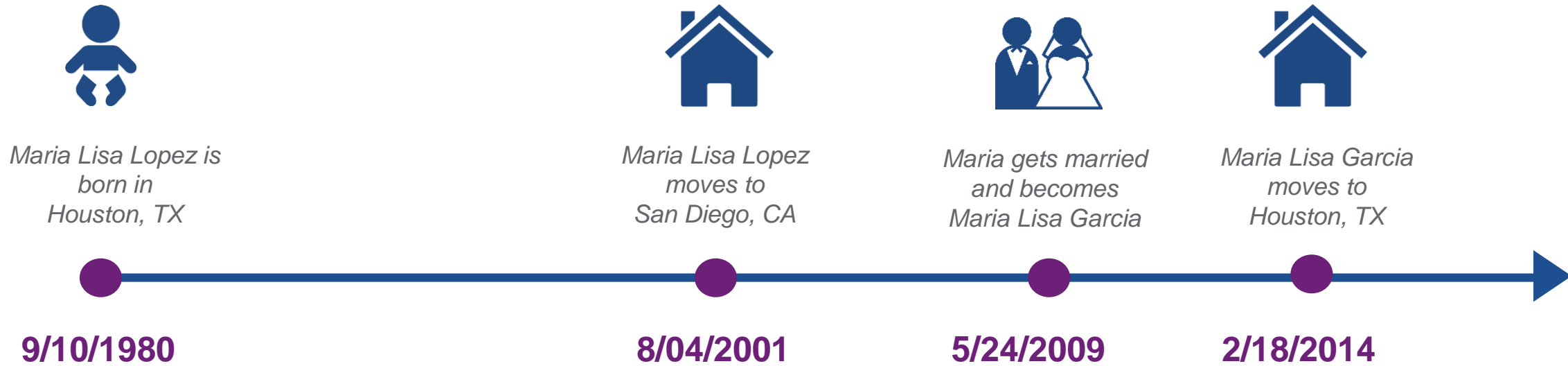 - Providers would see reduced costs, improved efficiencies and better healthcare outcomes

empower and engage patients by giving them access to their own—complete—medical records.

Who is Maria Garcia?

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Patient life events and health events don't always sync

Patient Life Events

Maria Lisa Lopez is born in Houston, TX	Maria Lisa Lopez moves to San Diego, CA	Maria gets married and becomes Maria Lisa Garcia	Maria Lisa Garcia moves to Houston, TX
9/10/1980	**8/04/2001**	**5/24/2009**	**2/18/2014**

Patient Health Events @ Hospital A

Maria Lisa Lopez is born at Hospital A in Houston, TX	Maria Lisa Lopez visits Hospital A for diabetes diagnosis	Maria Lisa Garcia gets bloodwork done at Hospital A
9/10/1980	**4/15/1989**	**1/19/2015**

Common patient identity challenges in healthcare

- Is this patient / provider who they say they are?

- Is the identity document the patient is providing authentic?

- Do we have the right patient record?

- Is the patient information accurate and current?

- Do we have all of the patient's information?

- Is the information formatted properly (i.e. deliverable address)?

- Has the information changed since we last saw the patient?
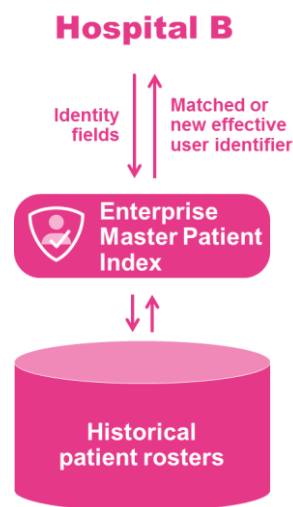
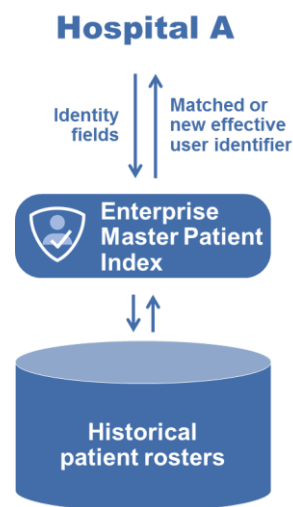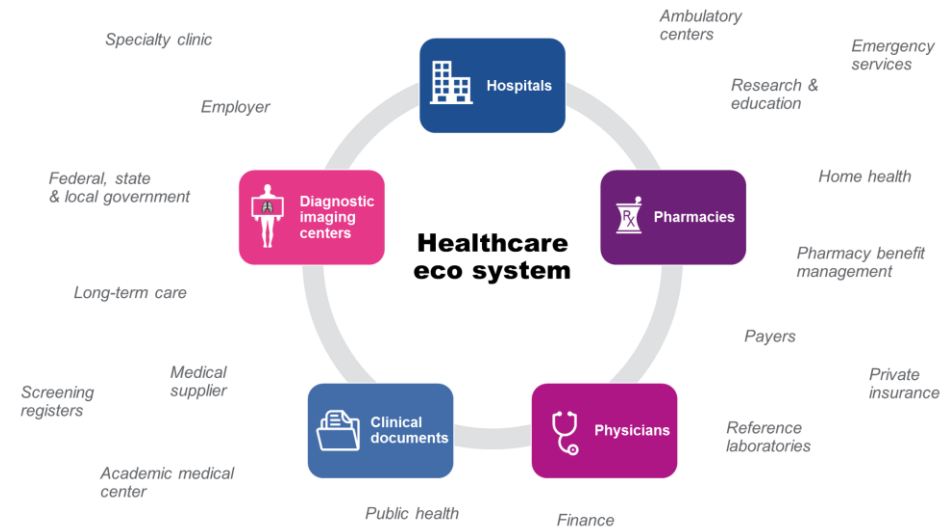- How are we doing managing patient identities across our systems?

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Traditional Enterprise Master Patient Index (EMPI) solutions
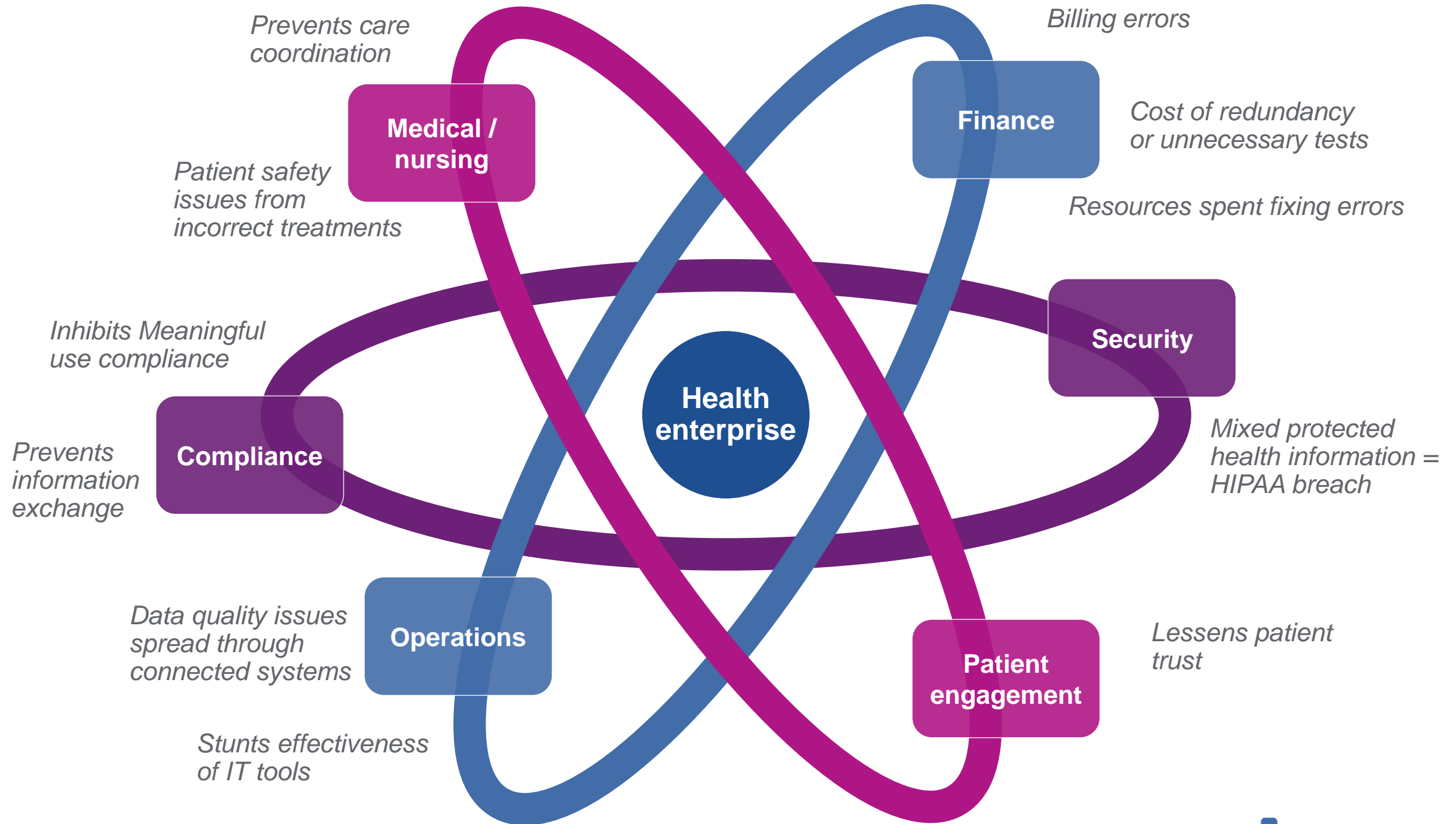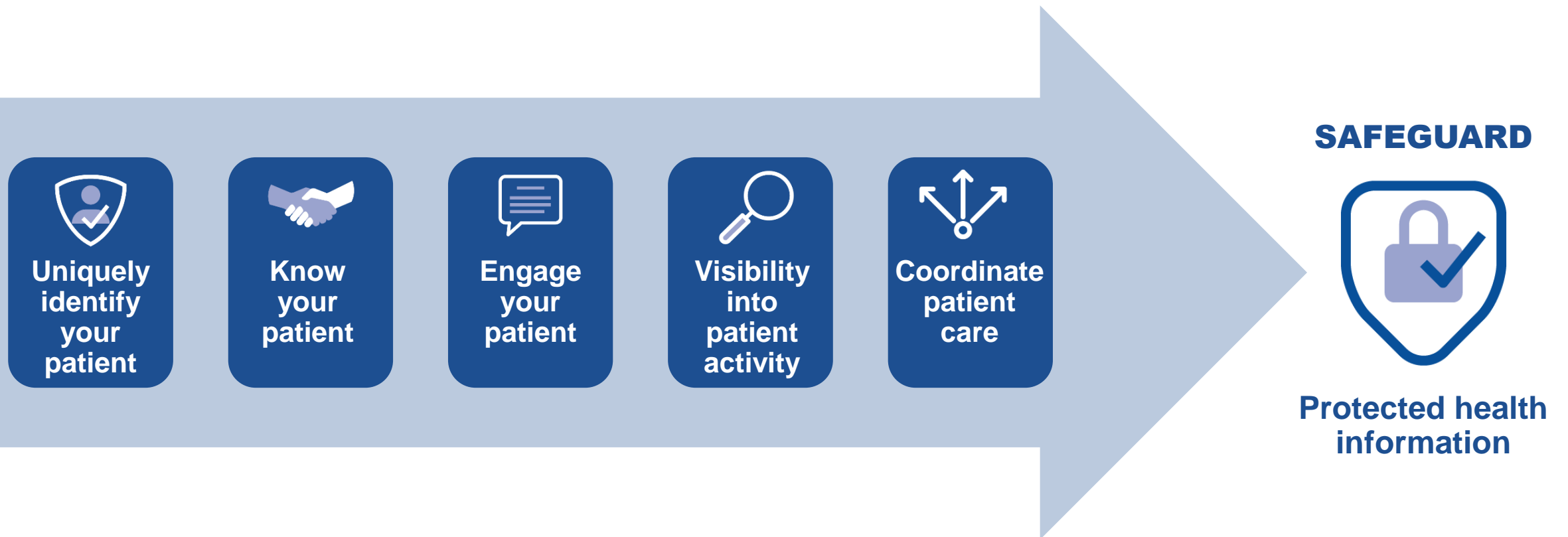
Private sector
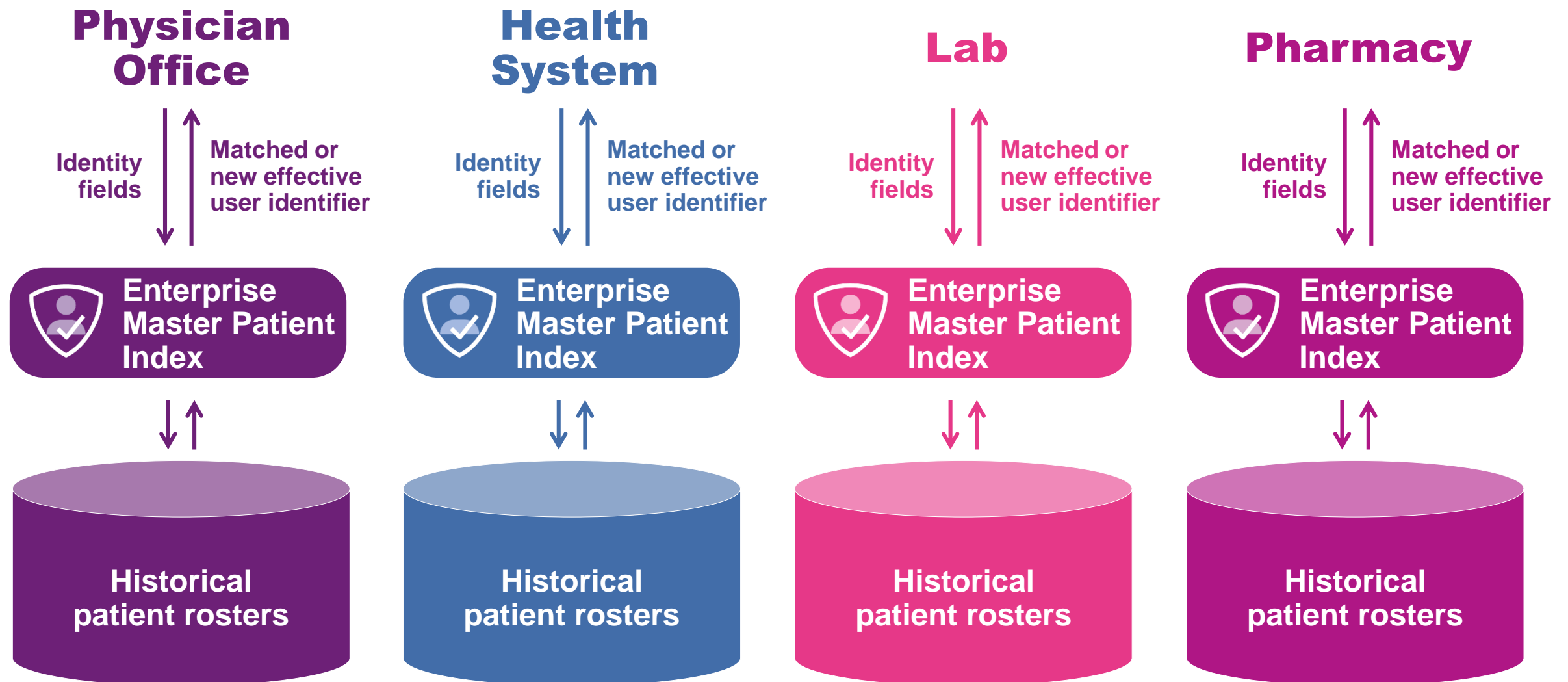
Traditional master patient index

Demographic data is only as good as each facility has obtain and stored in their patient rosters

Impacts of the entire ecosystem

Prevents care coordination

Billing errors

Patient safety issues from incorrect treatments

Cost of redundancy or unnecessary tests

Resources spent fixing errors

Inhibits Meaningful use compliance

Prevents information exchange

Mixed protected health information = HIPAA breach

Data quality issues spread through connected systems

Lessens patient trust

Stunts effectiveness of IT tools

Medical / nursing

Finance

Security

Health enterprise

Compliance

Operations

Patient engagement

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Safeguard protected health information

SAFEGUARD

Protected health information

Uniquely identify your patient

Know your patient

Engage your patient

Visibility into patient activity

Coordinate patient care

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NCPDP Overview

Producer / provider

28%

- Pharmacies
- Pharmacists
- Pharmaceutical manufacturers

Vendor / general interest

41%

- Drug wholesalers
- Consultants
- Clinical programs
- Distribution / packaging
- Software / hardware vendors

Payor / processor

31%

- HMOs
- PBMs
- PSAOs
- Government payers
- Health plans

- Individual memberships – 1 member, 1 vote
- Diversity and representation – Important for consensus building

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Using data for good

- 40+ years developing industry standards to improve patient safety and outcomes

- Positioned to facilitate industry-wide adoption through providers, pharmacies, payers and beyond

- 40+ years of experience managing, matching and protecting identities

- Continued focus and invest have helped fuel growth of our healthcare business and support our commitment to innovation and efforts which improve quality, access, and security in healthcare
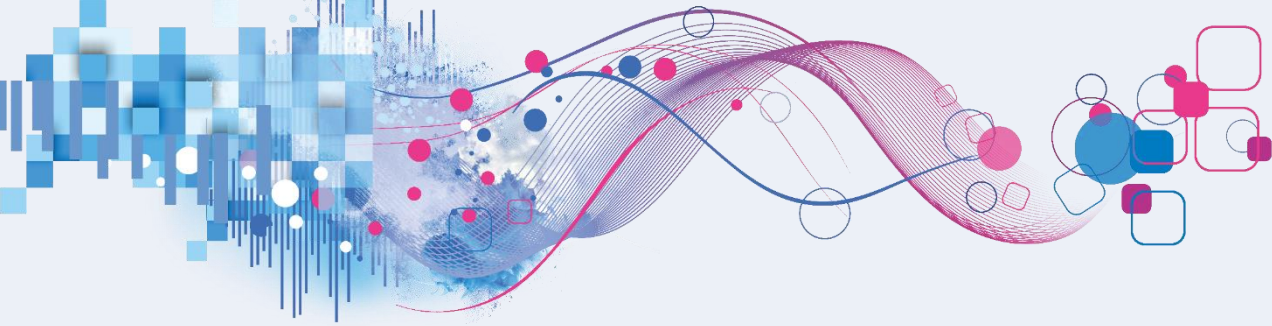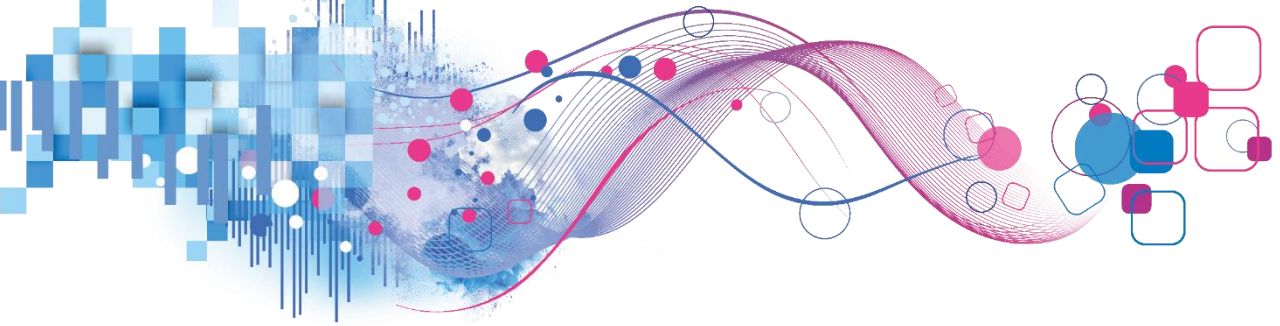
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