



## AeHN FACT SHEET

Overview

Alaska eHealth Network (AeHN) is a carefully planned solution to our national health care problem of high spending and low returns on healthcare. AeHN is an independent, non-profit organization established to create a statewide, standards-based electronic health network which will allow individual Alaskans to have their own personal health record and to authorize their health care providers to exchange electronic medical records in a timely, secure manner.

To improve the safety, cost effectiveness, and quality of healthcare in Alaska through the promotion and facilitation of widespread use of secure, confidential electronic clinical information systems including electronic health records (EHRs) and health information exchange (HIE).

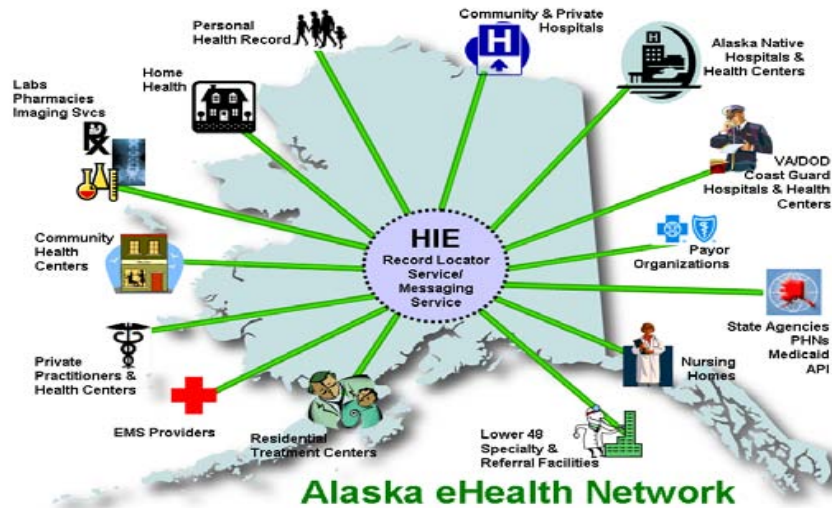
Mission

**Health Information Exchange (HIE)** – AeHN’s core function is the management of a secure electronic network, called a health information exchange, where providers share important medical information on their patients. Using the network, providers share information like drug allergies, prescriptions, medical conditions, and lab and test results. In an emergency, this helps providers quickly and more accurately diagnose and treat patients. In non-emergency situations it can decrease ordering of repeat tests and give providers a more complete picture of their patients’ care.

Services

AeHN has contracted with the State of Alaska to provide data exchange services for all Alaska providers. Many Alaska healthcare agencies and providers have begun the expensive and gradual transformation of their medical record systems from paper to electronic. Alaska medical providers are expected to invest well over \$100 million in these systems over the next five years. But EHRs alone do not solve the health care.

When complete, the AeHN will have the capability to provide any Alaskan with a secure Personal Health Record, including authorization for their health care providers to access electronic records required for continuity of care, such as hospitalization records, medical history, prescription information, vaccinations, allergies, imaging records and laboratory results. The Network will support telemedicine services, the transfer of high resolution images for patient care, video conferencing, and Voice over Internet applications for providers.



**Regional Extension Center** – Using federal funds awarded through the American Recovery and Reinvestment Act Regional Extension Center Program, AeHN assists healthcare providers to select, implement, and/or upgrade electronic health records to improve patient care. As part of the program, AeHN connects providers with discounted electronic health record products and services, and helps them achieve meaningful use of health information technology according to federal requirements.

Program services include: selection, implementation, or upgrading to a certified EHR, EHR readiness assessment, selecting & contracting with a vendor, implementation support & workflow design/re-design, training, post-implementation support services, and IT support & maintenance. Additionally, eligible primary care providers can qualify for up to \$3,000 in ARRA funding, and rural or critical access hospitals can qualify for up to \$12,000 in ARRA funding.

## Membership

AeHN is determined to ensure the long-term viability and success of the network when completed. The total annual operating cost of the Alaska eHealth Network, when fully deployed and used by the majority of state residents, is estimated at \$5 million, or less than \$10 per resident per year. To offset these costs AeHN has established a dues structure.

AeHN membership is open to any health care provider, health insurer, organization providing services to healthcare providers, governmental entity, non-governmental entities serving the healthcare industry, and private individuals. A member may fit multiple categories, but would only be eligible for the “best fit” category, or the category which most closely matches the organization.

**Category A: Hospitals and Multi-service Health Systems** - Statewide or regional enterprises with multiple-facilities and medically trained personnel that provide services to patients.

Dues: \$1/\$10,000 of gross revenues related to health services delivery.

**Category B: Medical and Dental Providers** - Enterprises with physicians, dentists, or other medically trained personnel that provide direct medical services to patients.

Dues: \$100 per full-time equivalent medical professional (MD, DDS, PA, NP) employed

**Category C: Ancillary Services Providers** - Non-hospital enterprises providing laboratory, imaging, or pharmacy services for patients. Dues: \$100 per Alaska service location

**Category D: Health Insurance Providers** - Enterprises providing health insurance benefit services for Alaskan residents. Dues: Share of amount total based on the ACHIA distribution formula

**Category E: Governmental and Non-Profit Entities** - Federal, state, city, borough, municipality, or special governmental district, or not-for profit professional or charitable organization that does not provide medical care services outlined in Categories A-D. Dues: \$250 per organization  
**Category F: Individual** - Individual private adult Alaskans Dues: \$25 per individual

## Benefits to Alaskans

Where they have been developed successfully, the benefits of HIE networks include;

- improved patient access to medical care,
- reduced incidents of duplicate and unnecessary testing and procedures,
- improved patient safety,
- reduced health agency administrative costs,
- greater patient and provider satisfaction, and
- enhanced rapid response to public health emergencies.

National studies demonstrate annual cost savings from the use of Electronic Health Records and HIE networks at approximately 5% of health care expenditures; this equates to an annual savings of \$249 million based on Alaska’s \$5 billion health care expenditures, or an annual savings of \$10-14 million based on the State of Alaska’s \$250 million Medicaid program.

## Board of Directors

**President:** Paul Sherry, Alaska Native Tribal Health Consortium

**Vice-President:** Jerome List, MD, Alaska EHR Alliance, Alaska Ear, Nose and Throat, Inc.

**Secretary:** J. Patrick Luby, Advocacy Director, AARP Alaska

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