

EXCHANGE

NEWS OF ELECTRONIC HEALTH TECHNOLOGY FROM ALASKA AND BEYOND

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President's Update



These are indeed exciting times for AeHN. With a full staff on board and testing of the Alaska Health Information Exchange (HIE) scheduled to begin mid July, we're excited the HIE will go live this August. AeHN is also proud to announce we have been approved by the Nationwide Health Information Network Executive Committee to start the on-boarding process to connect Alaska's Health Information Exchange to the Nationwide Health Information Network (NHIN). This is a huge boost in confidence for privacy and security, as much of the approval was based on the Alaska HIE's ability to withstand the rigorous testing and documentation needed for approval to connect to the NHIN. The immediate impact for Alaska is access to health information for our Veteran Affairs and Department of Defense partners. However, to gain access to health information from the Alaska HIE and the NHIN, your organization needs to join AeHN. For questions regarding the HIE, contact AeHN's Executive Director, Bill Sorrells, bill@ak-ehealth.org, or the Health Information Technology Director, Joseph Furrer, joe@ak-ehealth.org.

Our Regional Extension Center (REC) needs your help. AeHN's REC staff is working feverishly to make available up to \$3,000 in service benefits per eligible primary care provider to help them reach Meaningful Use standards and the generous incentive monies offered through Medicaid and Medicare. We have over \$4M in federal benefits, that if not obligated for the 1,000 Alaskan primary care providers by March 2012, the balance will be diverted to other states that show greater need. Please help us not let this happen. If you or someone you know is a primary care provider, or a qualified rural or critical access hospital, contact Jim Landon, jim@ak-ehealth.org, Director AeHN's REC, to inquire about incentives available and joining the Alaska eHealth Network.

Paul Sherry

Paul Sherry
President

AeHN Welcomes New Members

Welcome to the following practices and clinics who have joined our network since our spring newsletter report. Be sure to check out the benefits of membership below!

- Fairbanks Orthopaedic Center
- Polar Wind Medical Center
- Northern Alaska Medical & Surgical
- Polar Pediatrics, Inc
- Alaska Family Care Associates
- Sunshine Community Health Center
- Valley Medical Care
- Angelica Balingit, MD
- Elizabeth Crow, MD
- Alaska Internal Medicine & Pediatrics
- Dr. David Grauman
- Kodiak Community Health Center
- Alaska Medicare Clinic

AeHN Membership benefits you two ways, Now and Later!

Now- Take advantage of Regional Extension Center services to assist providers with EHR adoption and meaningful use. Services include readiness assessment, workflow design, IT support, training and more. Services are available to all providers, and the federally-funded program offers eligible providers up to \$3,000 in services Free! It's like a gift card for EHR related services!

Later- Be a charter member of the electronic health information exchange (HIE) network when it launches in 2011. As a member you will be able to exchange key medical record information securely and privately with other providers, hospitals and labs to have the data you need at the point of care.

For additional information including a membership agreement, contact Jim Landon at 866-966-9030 ext. 4, or jim@ak-ehealth.org.

Three New Members Join AeHN Team

AeHN is pleased to announce the addition of three new, key team members to our growing staff:

Karol Dixon, Health Information Exchange Privacy and Data Quality Analyst. Karol will have primary responsibility for ensuring appropriate protections for patient health information and high levels of data quality, thereby creating value and trust as we move Alaska's health information exchange forward. Karol holds a bachelor's degree in Economics from the University of Alaska Anchorage and a Juris Doctorate from the University of New Mexico and has broad experience working for various tribal organizations.



New to the AeHN Team, from L to R: Karol Dixon; Georgiana Jorgensen; and Doris Yanas-House

Georgiana Jorgensen, Business Development specialist for the Regional Extension Center. Georgiana will engage customers and healthcare organizations on the value of AeHN's services, both the REC and the HIE, to help them reach Meaningful Use of electronic health

records. Georgiana has broad work experience in various healthcare settings and a strong background in customer relationship management.

Doris Yanas-House, Alaska Health Information Exchange Education Coordinator. Doris will develop the training programs for healthcare organizations to integrate and use the Alaska health information exchange services and will also provide educational support for Alaskans using the planned

statewide patient portal. With 20 years of healthcare administration experience, Doris earned a Bachelor's degree in Education and Development from Southern Illinois University Carbondale and a Master's in Business Administration/Computer Information Systems from Webster University.

Learning About Meaningful Use in Alaska's Heartland

June 4, Saturday morning early, hearty Fairbanksans (and one Juneauite!) gathered at the Wedgewood Resort to learn about EHR Meaningful Use Incentive programs, Alaskan Resources, and related topics. Although Fairbanks is further north than much of the Alaskan populace, it boasts a high rate of EHR adoption. AeHN put on the workshop in coordination with an active Fairbanks committee. Primary sponsors were Alaska Primary Care Associates, AlasConnect, and Northrim Bank along with First National Bank Alaska, e-MDs, Greenway, and Dragon.



EHR Meaningful Use Guidelines Lead to Patient Care Benefits

By Erin McArthur, MD, FAAP
LaTouche Pediatrics



I have been asked to write about my experience with an electronic health record; please keep in mind that I am a physician and not a writer nor an IT specialist, but that has not stopped me from being involved in the implementation of two electronic health records (EHRs).

The key to making an EHR work, in my opinion, is customization. We spent time making templates that were specific to our needs with our first EHR and I thought we had created ourselves a very helpful, user-friendly system to improve our patient care. For one thing, we could all read each other's notes, and therefore, had a better idea of where things were to go or what had already been done. I was lucky to have a very talented IT-savvy employee to work with my clinical judgment to make a pretty good system. The benefit that is being realized more with each passing week is the EHR's tie to the federal guidelines for meaningful use.

What the meaningful use guidelines have given us is a starting place to see how well a system can be utilized. Our office uses electronic interfaces with labs in town so when we put an order in it is available at the lab (even if the patient loses the slip or the fax does not go through). Same can be said for electronic prescriptions. There is much less of a black hole, almost none really,

in the land of e-prescriptions than there is in fax land. The patient summary we print out at the end of the visit is a great chance to write legible oral rehydration instructions or any other important piece of information that we want to get home to mom when dad brings them in for their appointment (clearly I am a pediatrician). We can easily write a physical form or referral letter within the system that attaches to the chart immediately (that means no scanning). When calls come back closer to the registration for school and the physical forms were lost, then they can be printed out with our signature and we do not have to do the work twice. Our faxes come electronically into our computer work list (again no scanning)

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and they can be dealt with if working at a satellite office or from home after the kids go to sleep. We have opened our patient portal system and patients can make appointments online, request refills, set up payment options.

What meaningful use has done for us is allowed us to take a closer look at all the things that an EHR can do beyond documenting a visit. Although there is time invested in setting up the system, and the learning curve in changing how we do the things in our profession that are beyond patient care, it is time well spent. My partners and I are always coming up with new ideas of how to use the EHR to improve our patient care and so far we have been able to find a way to make the system fit our needs.

For the complete article, go to www.ak-ehealth.org, *Health IT News*, *AeHN Newsletter*, *the Exchange*.

ak-ehealth.com
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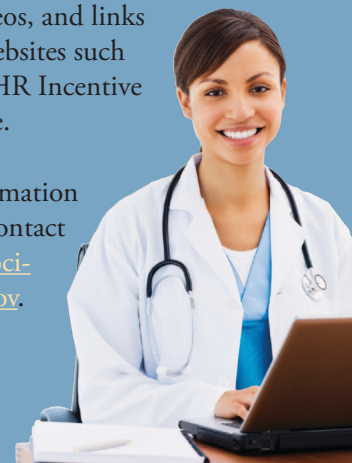
AeHN has upgraded its website to include information, news, resources, and all things Health IT related. The site has quick links for providers with information about Meaningful Use- EHR incentives, AeHN's services, EHR loan programs, upcoming events, and links to even more information. Check it out and let us know what you think! We hope you'll add www.ak-ehealth.org to your “favorites” list.



Newest Information on Alaska Medicaid Incentive Program

For up-to-date information on the State's EHR incentive program, that offers eligible providers up to \$63,750 each over six years, go to the State's Provider Outreach Page at <http://ak.rraincentive.com/default.aspx>. This site includes links to the State Level Registry, important program and eligibility information, including new instructive videos, and links to other key websites such as the CMS EHR Incentive registration site.

For more information or questions, contact Leah at leah.koci-enda@alaska.gov.





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Regional Extension Center (REC) Q&A By Jim Landon, REC Director, AeHN

Greetings AeHN members and prospective members! The following questions and answers are typical of those we frequently address about membership and services. Please contact us to learn more.

Is it difficult to join the AeHN? Not at all – and for the months of July – August 2011, AeHN is waiving membership fees for primary care practices and critical access / rural hospitals eligible to receive REC incentive funds.

Is there a separate cost to join the Health Information Exchange (HIE)? Not at this time.

What are the REC incentives available to eligible primary care providers and critical access / rural hospitals? Incentives are for technical services performed by AeHN vendors in support of the organization achieving meaningful use of their certified EHR and payable to such vendors on behalf of the organiza-

tion. Up to \$3,000 per eligible primary care provider (\$30,000 cap) or \$18,000 per eligible critical access / rural hospital is available. Eligible technical services include: EHR Readiness Assessment, Selecting an EHR / Contracting with Vendor, Work Flow Design/Redesign, Training, Implementation Support, and IT Support.

Are there REC incentive program exclusions? Yes. Personnel costs, supplies, travel, room and board, licenses, hardware and software purchases are specifically excluded from these services.

Our practice, critical access / rural hospital doesn't have an EHR – why should I join AeHN? AeHN partners can reduce your practice's burden of determining readiness to adopt health information technology as well as the evaluation of EHR software vendors based on the unique needs of your practice or hospital.

We have a large primary care practice – are we excluded from the REC incentive program? Not necessarily. While the REC Incentive Program is geared toward primary care practices sized at ten (10) providers or less, larger practices that service “Underserved” patients in certain settings may be eligible. AeHN evaluates eligibility on a practice-by-practice basis.

How do I join AeHN? Please contact Jim Landon at 866-966-9030 ext. 4 (jim@ak-ehealth.org) or Georgiana Jorgensen at 866-966-9030 ext. 7 (georgiana@ak-ehealth.org).

I've joined AeHN – what are the next steps? AeHN or one of our partners will contact you to conduct an assessment of your practice or critical access / rural hospital needs.

My question isn't shown here or not fully addressed. How do I learn more? Contact us or visit www.ak-ehealth.org/alaska-regional-extension-center.