



NORTH CAROLINA HEALTH INFORMATION EXCHANGE AUTHORITY

How to Connect Call Webinar
March 28, 2022

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NC Health Information Exchange Authority



House Keeping Items before we start

- We will be recording this webinar
- Please place questions in the chat.
- Please put your phones/computers on mute.

North Carolina Health Information Exchange Authority

Overview of Topics

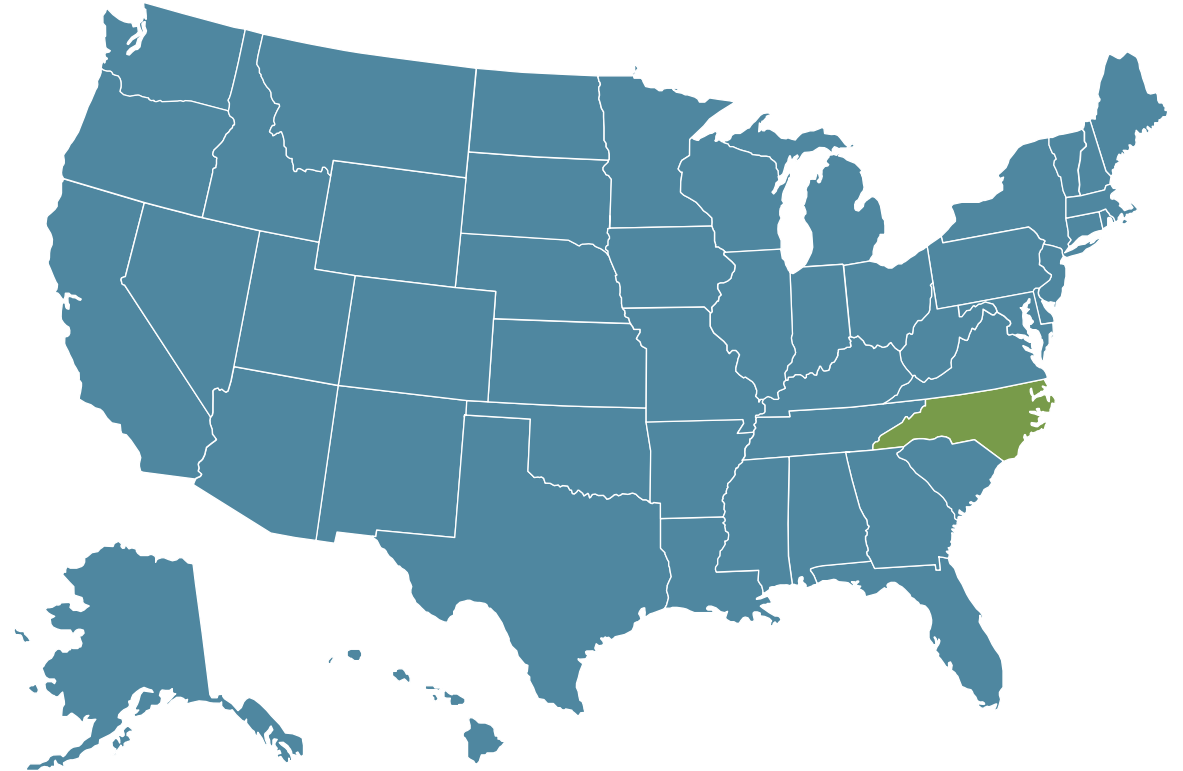


- **Overview of HIEA**
- **HIE Mandate**
- **What HIE Is and How HIE Works**
- **Participation Agreement and Compliance**
- **Suite of Services**
- **Questions**

Vision for Connectivity

North Carolina set out a vision to create communities of connected health care providers electronically across the state.

- Allow providers to view their patients' longitudinal health record in real time
- Improve health care quality, enhance patient safety and improve health outcomes
- Consolidate data reporting requirements across the state to ease administrative burdens and create efficiencies by eliminating duplicative data integrations
- Create outbound services to give providers insight to their at-risk patient population



NC HealthConnex by the Numbers

We connect health care providers to safely and securely share health information through a trusted network to improve health care quality and outcomes for North Carolinians.



STATE DESIGNATED



SECURE



PARTNERSHIP

NC HealthConnex by the Numbers:

- **60,000 + providers with contributed records**
- **7,000+ health care facilities live submitting data, including 140 hospitals**
- **5,000+ health care facilities in onboarding**
- **150 million+ continuity of care documents (CCDs)**
- **11 million+ unique patient records with clinical documents**
- **80 Electronic Health Record (EHR) vendors live**
- **22+ border and interstate HIEs connected via the eHealth Exchange and the Patient Centered Data Home, including connections to the VA and DoD**



See Who's Connected



[NC HIEA Home](#)
[For Patients](#)
[For Providers](#)
[Services](#)
[FAQs](#)
[About Us](#)
[News & Events](#)

Modernizing Health Information Exchange

North Carolina's new, modernized health information exchange, NC HealthConnex, delivers added value to the conversations that are happening at all levels in the health care industry. It breaks down information silos between providers, achieves greater outcomes for patients and creates efficiencies in state-funded programs such as Medicaid.



See Who's Connected: Map

 Current List of NC HealthConnex Participants Presented in an Interactive Map

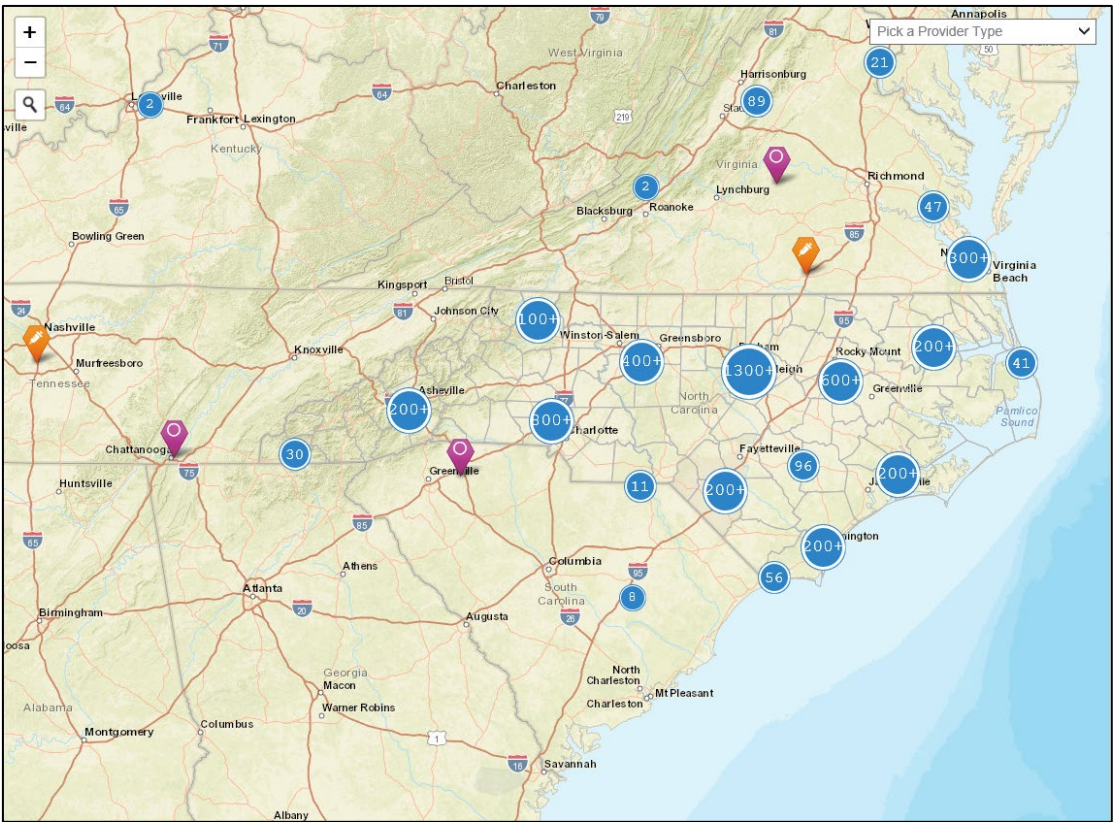
How to Connect

 Link with other providers and help improve outcomes

FAQs

 Find answers to your questions here

Hospital	Laboratory	Multi	Other
Outpatient	Pharmacy	Unknown	



What Does the Law Mandate?



- January 1, 2023, deadline to connect
- Beyond the Mandate - why is it important to connect?
 - Aggregating patient electronic health information across the care continuum breaks down data siloes and improves the quality of care offered to patients
 - Supporting Medicaid Managed Care and other state-funded programs where closing gaps in care and improving care coordination help lower the cost of care
 - Improving whole person care through the continued development and utilization of a statewide HIE
- In response to N.C. SL 2021-26, the NC HIEA submitted a [report](#) to the NCGA that covers:
 - Status of connections and,
 - Recommendations for enforcement

What is Health Information Exchange?

A health information exchange (HIE) is a secure, electronic network that gives authorized health care providers the ability to access and share health-related information across a statewide information highway.



HIE

Benefits



DOCTOR ABLE TO IMPROVE DIAGNOSES



ER DOCTOR AND CARE TEAM ABLE TO QUICKLY ACCESS YOUR HEALTH HISTORY



LESS CHANCE OF HARMFUL DRUG INTERACTIONS



AVOIDANCE OR REDUCTION OF DUPLICATE MEDICAL TESTS



A NEW DOCTOR ABLE TO REVIEW YOUR HEALTH HISTORY PRIOR TO YOUR VISIT



DOCTOR WARNED OF POTENTIAL ALLERGIC REACTIONS



A full “picture” of a person’s health, including ambulatory visits, hospitalizations and medications



Improved, more accurate and timely medication reconciliation that reduces errors and avoids unnecessary tests



Access to test results, reducing costly duplicative tests and gaps in treatment



Exchange

How HIE Works



Electronic Health Records
Clinicians enter data into their EHR, and that data is pulled into the HIE.



Data Provided
Clinicians who have care relationships with their patients are able to readily access that data.



1

Elements Available

Current data elements available in NC HealthConnex include allergies, encounters, immunizations, medications, problems, procedures and results.

2

Security in Place

All data is protected, stored and accessed only for purposes permissible under federal and state law.



Exchange

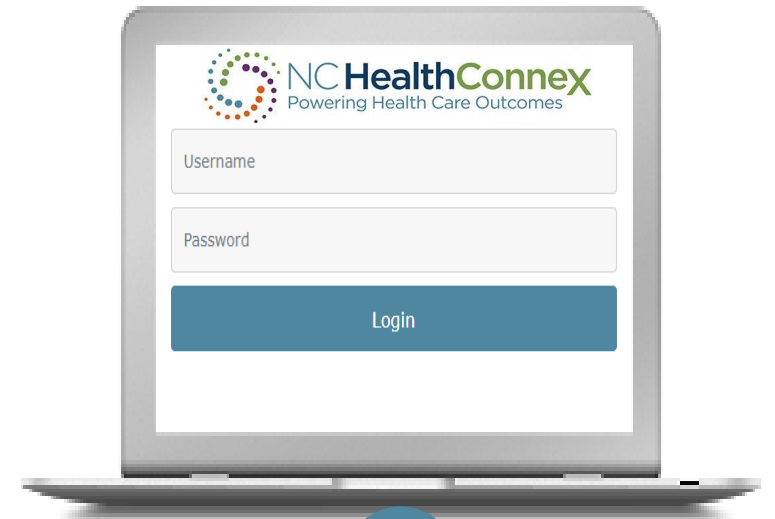
How HIE Works

Uni-directional Connection



Electronic Health Record

Clinicians enter data into EHR and that data is automatically sent to HIE



Data Provided

Clinicians who have care relationships with their patients are readily able to access that data



Exchange

How HIE Works

Bi-directional Connection



Electronic Health Record

Clinicians enter data into their EHR, and that data is automatically sent to the HIE.

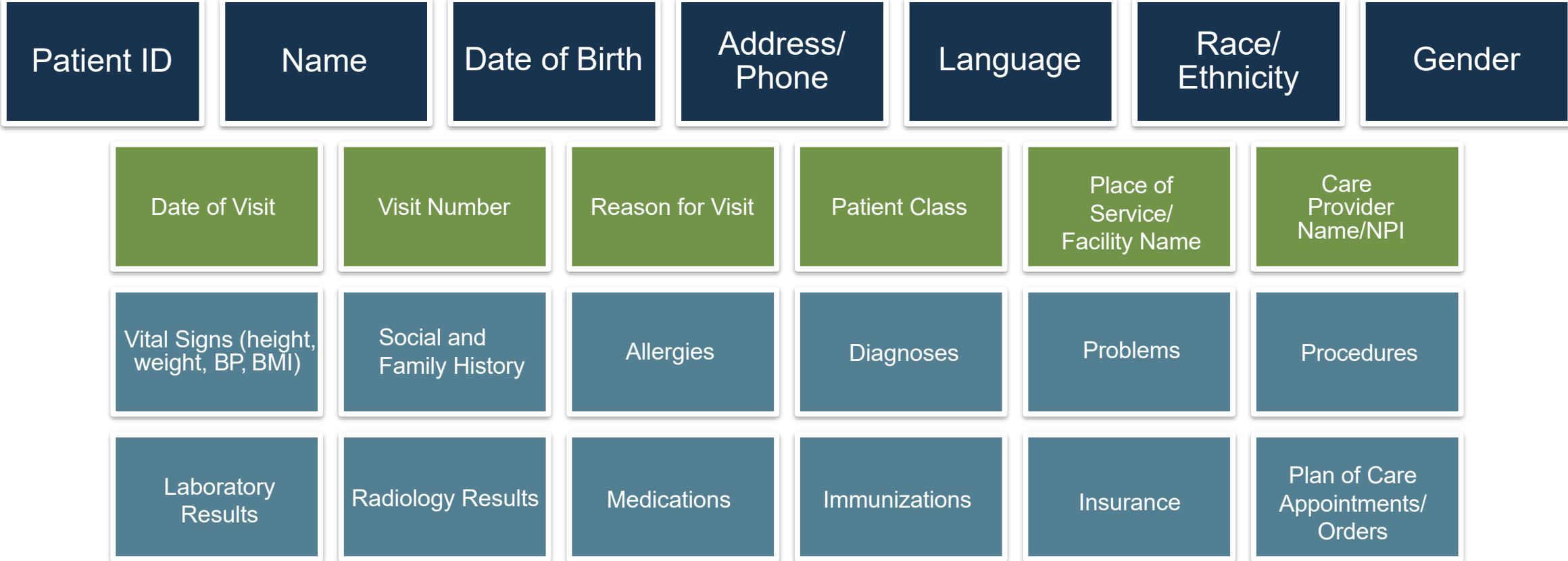
Data Sent to EHR

Clinicians who have care relationships with their patients are able to readily access that data via their EHR.



What Data Elements Will You Need to Submit?

The NC HealthConnex Data Target



How Do Providers Meet the Mandate?

There are two steps to determine a practice's readiness for connection.

1. Does your practice have a Participation Agreement in place?
 1. **The Participation Agreement** is the document that governs the exchange of data between the practice and NC HealthConnex. This contract must be in place before the technical build can begin. Participation Agreements are [linked on our website](#) for providers to download, review, sign and return.
2. Does your practice have an EHR that can send CCD or HL7 messages?
 1. **Technology in Place:** The NC HIEA Participation Agreement requests EHRs that are minimally capable of sending HL7 messages, version 2 and higher.

Attachment 1

Participant Address for Notice

	Primary Contact	Alternate Contact Not required
Name		
Title		
Organization		
Address		
City, State Zip		
Phone		
Fax (not required)		
E-mail		

Attachment 2

Participant Account Administrator

Staff member who will be the point of contact for the NC HIEA for communications and credentialing NC HealthConnex users in your organization.

Name:

Position Title:

Email Address:

Phone Number:

Mailing Address:

Technical Services Contact

Staff member who will work with our technology vendor to build a connection from your organization to NC HealthConnex.

Name:

Position Title:

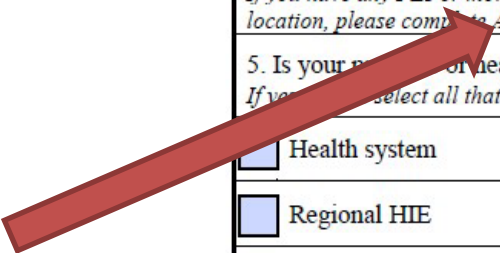
Email Address:

Phone Number:

Mailing Address:

Attachment 3

Participant Background Information		
1. Type of facility or system: <i>Please select all that apply below.</i>		
<input type="checkbox"/> Hospital, Health System, or Regional HIE	<input type="checkbox"/> Ambulatory/ Outpatient Clinic	<input type="checkbox"/> Laboratory <input type="checkbox"/> Pharmacy <input type="checkbox"/> Other <i>Please specify:</i> <input type="text"/>
2. Provider type: <i>This field is not required if your organization is a Hospital, Health System, Regional HIE, Laboratory, or Pharmacy</i>		
<input type="checkbox"/> Primary Care	<input type="checkbox"/> Dental or Orthodontic	<input type="checkbox"/> Respiratory, Developmental, Rehabilitative or Restorative
<input type="checkbox"/> Pediatrics	<input type="checkbox"/> Residential Facility	<input type="checkbox"/> Speech, Language and Hearing
<input type="checkbox"/> OB/GYN	<input type="checkbox"/> In Home Care, e.g. PCS, CAP-C/DA, etc.	<input type="checkbox"/> Other <i>Please specify:</i> <input type="text"/>
<input type="checkbox"/> Behavioral Health	<input type="checkbox"/> Eye & Vision	<input type="text"/>
3. Participant Organization National Provider Identifier (NPI):	<input type="text"/>	
4. How many Participating Entities (PEs) or facility locations does your organization have? <i>If you have any PEs or more than one facility location, please complete Attachment 4</i>	<input type="text"/>	
5. Is your organization or health system a part of one or more the following? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>If yes, please select all that apply and list the name of the organization(s).</i>		
<input type="checkbox"/> Health system	<input type="text"/>	
<input type="checkbox"/> Regional HIE	<input type="text"/>	
<input type="checkbox"/> Accountable Care Organization	<input type="text"/>	
<input type="checkbox"/> Clinically Integrated Network	<input type="text"/>	



Attachment 3

Substance Use Disorder Treatment Information	
6. Does your organization or any unit within your organization provide Substance Use Disorder treatment?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7. If yes to 6, does your organization fall under 42 C.F.R. Part 2? <i>If unsure, please contact your legal counsel and visit the SAMHSA website at www.SAMHSA.gov</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No

Electronic Health Record (EHR Vendor) Information	
<i>Please discuss these questions with your Technical Services Contact</i>	
8. EHR Vendor:	<input style="background-color: #e6f2ff;" type="text"/>
9. EHR Vendor Product & Version:	<input style="background-color: #e6f2ff;" type="text"/>
10. Hosting Location:	<input type="checkbox"/> On-site <input type="checkbox"/> Cloud-based
	<input type="checkbox"/> Hub/server on-site at another location <input type="checkbox"/> Other: <input style="background-color: #e6f2ff;" type="text"/>
11. EHR Vendor Contact Name:	<input style="background-color: #e6f2ff;" type="text"/>
12. EHR Vendor Contact Email:	<input style="background-color: #e6f2ff;" type="text"/>
13. EHR Vendor Contact Phone Number:	<input style="background-color: #e6f2ff;" type="text"/>

Attachment 4

Attachment 4 Participating Entities & Facility Locations

I. Is Participant executing the Agreement on behalf of one or more Participating Entities, as defined at Section 2.37.

Yes: No:

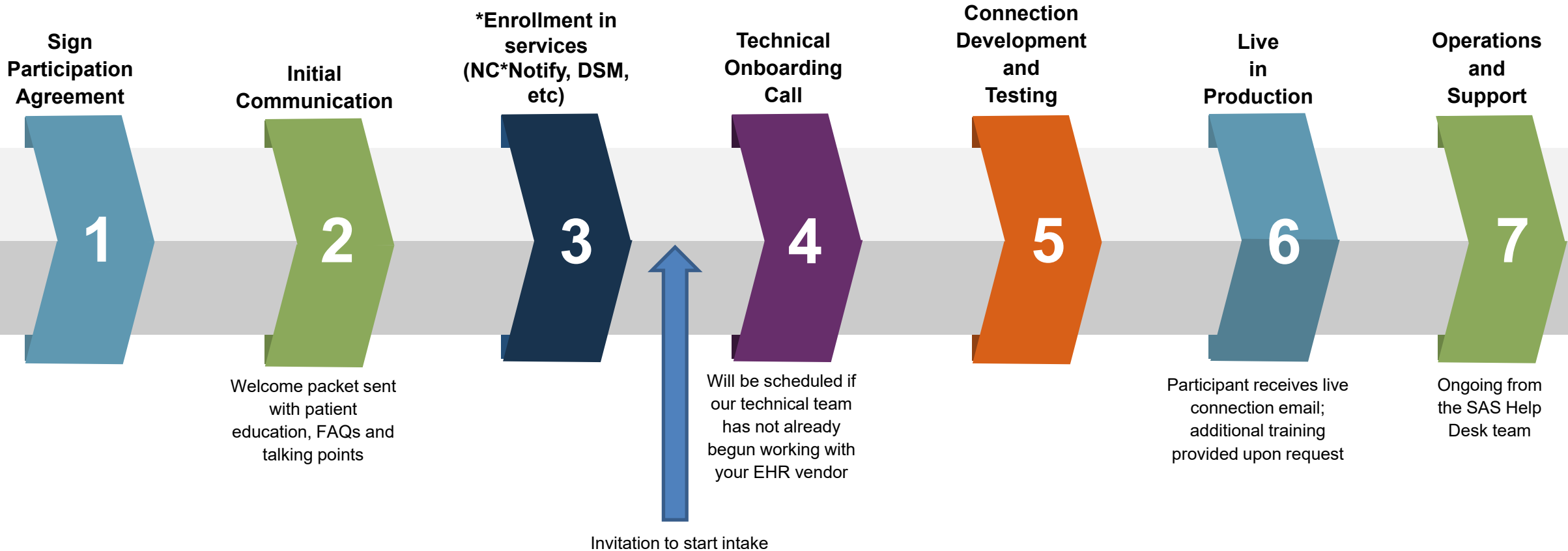
II. Provide the requested information regarding each Participating Entity as well as each of your organization's facility locations.

- If you have more than three Participating Entities, please click [here](#) to complete the Excel spreadsheet, labeled "Attachment 4," and submit it with this Agreement.
- Include information for all facility locations that are part of your organization. Only provide the organization NPI for your Participating Entities or facilities; do not list individual provider NPIs.
- Incomplete information on this Attachment will delay the process of your agreement.
- After Participant executes this Agreement, it is Participant's duty to provide updated, accurate information to the NC HIEA about facilities and Participating Entities.

The screenshot shows an Excel spreadsheet with the following structure:

- Row 1: Title "North Carolina Health Information Exchange Authority Agreement"
- Row 2: Subtitle "Attachment 4: Participating Entities & Facility Locations"
- Row 3: Instructions: "Please review the Instructions when completing this Attachment and submitting it with the executed Agreement. Provide the requested information regarding each Participating Entity as well as each of your organization's facility locations."
- Row 4: Additional instructions: "Include information for all facility locations that are part of your organization. Only provide the organization NPI for your Participating Entities or facilities; do not list individual provider NPIs. Incomplete information on this Attachment will delay the process of your agreement. After Participant executes this Agreement, it is Participant's duty to provide updated, accurate information to the NC HIEA about facilities and Participating Entities."
- Row 5: Table header with two main sections: "Facility Information" and "State Funding Information".
- Row 6: Table header with columns: "Legal Facility Name", "Facility NPI", "Facility Street Address", "City", "State", "Zip", "County", "EHR Vendor", "Facility Type", "Provider Type", "NC Medicaid", "MCO/LME", "from NC SHP", and "Other State Funds".
- Rows 7-16: Empty table rows for data entry.

Connection Process



Patient Education & Opt-Out



Patient education materials provided to organization via email in the welcome packet.

Includes:

- Sample notice of privacy practices
- Fact sheet
- Tri-fold brochure order form
- Talking points
- FAQs
- Employee education materials
 - Employee newsletter
 - Leadership emails

* Patients have the right to opt out of having their information shared between providers through NC HealthConnex.

All NC HIEA policies are posted on our website, nchealthconnex.gov.



Privacy & Security

NC HealthConnex is a secure, private network

- The NC HIEA follows the highest information security standards available
- Information is always encrypted and sent over a private network
- NC HealthConnex is compliant with all federal and state privacy and security laws
- Information that identifies patients will not be sold in any way or shared with anyone other than authorized health care providers or organizations that have entered into HIPAA compliant, data-sharing agreements

Privacy & Security

User Access

Sensitive Data

Opt Out

User Access

We take our role of data stewards seriously and expect that our participants will as well.

- Role-based access to control access levels for each authorized user
- Participant Account Administrator (PAA) will be responsible for assigning roles to users; NC HealthConnex Help Desk will provide credentials to these users
- Access to patient information granted if established treatment relationship with the patient

Privacy & Security

User Access

Sensitive Data

Opt Out

User Access

- Authorization assures the confidentiality of health information
- Participant Account Administrator (PAA) will have the authority to assign authorized user accounts; NC HealthConnex Help Desk creates credentials
- No user will be authorized unless PAA has given user required credentials
 - Participating Entity
- [PAA Reference Guide](#)

***PAAs are not authorized to give user credentials to persons or entities that are not Participating Entities.**

Privacy & Security

User Access

Sensitive Data

Opt Out

NC HIEA Policies

Privacy and Security Policy	Dec. 16, 2021
User Access Policy	April 5, 2021
Behavioral Health Sensitive Data Policy	Nov. 15, 2018
Opt-Out Information	Oct. 2, 2019

Privacy & Security

User Access

Sensitive Data

Opt Out



Suite of Services

Exchange

Expanding Exchange Reach & Capabilities

Access a Patient's Clinical Record

- Web-based Portal (uni-directional connection)
- EMR Integration (bi-directional connection)
- Information in the portal has been parsed from the patients' CCDs for easy viewing, a longitudinal record

Communicate PHI Securely

- DIRECT Secure Messaging (DSM) that is HIPAA compliant and convenient

Additional Integrations

- Controlled Substance Reporting System (CSRS)
- eHealth Exchange
- Patient Centered Data Home (PCDH)

Access NC*Notify ADT Notifications via Clinical Portal

Exchange

Direct Secure Message

Improves coordination of care between health care providers and their patients by providing the ability to communicate with other health care providers securely.

Messaging can be used for:

- Transitions of care
 - CCD
 - CCD-A documents
- Lab tests and results
- Referrals
- Reports

The screenshot displays the NC HealthConnex Direct Secure Message interface. On the left, a navigation menu includes 'Compose', 'Inbox', 'Sent', 'Deleted', and 'Drafts'. The main area shows a table of received messages with columns for 'TYPE', 'RECEIVED', 'SUBJECT', 'RECEIVED FROM', 'PATIENT NAME', and 'IDENTIFIERS'. A 'Compose Message' window is open, featuring fields for 'Send To...', 'CC...', 'Patient..', 'Message Type' (set to 'Referral'), 'Reason', 'Subject', and 'Note'. The 'Attachments' section is also visible. The interface includes a 'Patient Search' and 'Logout' link at the top left, and the NC HealthConnex logo at the top right.

	TYPE	RECEIVED	SUBJECT	RECEIVED FROM	PATIENT NAME	IDENTIFIERS
<input type="checkbox"/>	Direct Message	2019-03-18 10:59:20	Secure Message From: Demo,Two	demo-id-2@service2.directaddress.net		
<input type="checkbox"/>	Direct Message	2019-02-12 14:14				
<input type="checkbox"/>	Direct Message	2019-02-12 13:13				
<input type="checkbox"/>	Direct Message	2019-02-07 16:16				

Exchange

Controlled Substance Reporting System

- NC HealthConnex will help providers meet the STOP Act requirement.
- **Single sign-on** to the NC HealthConnex clinical portal will query the Appriss/CSRS database.
- Creates an additional pathway for providers to access the state's prescription drug monitoring program.

PAA Tools Patient Search Clinician Tools NC*Notify **CSRS Report** My Account Logout Help

EMR Id
Assigned By

Last Name
First Name
Middle Name
Date of Birth
MM-DD-YYYY

Recent Patient Searches

Last, First	Sex	DOB
CARLSON, CARL	M	2002-07-01
DEMO, JANE M	F	1942-03-29
JohnsonDemo, EricD	M	1952-10-01
SMITH, JANE	F	1972-12-02
STEVENSON, STEVE	M	1980-10-20
Smith, John	M	1930-10-19



NARxCare - Google Chrome

Secure | https://gateway-sf-prsp.pmp.appriss.com/v5_1/report/link/3sf17710-a135-447a-9443-0636209142d4#

Menu Contact Appriss Support

No prescription data is available from your state PMP for this patient.

Jane Demo, 78 Powered by NaryCare

Narx Report Resources Download PDF

Date: 07/16/2020

Status of States Queried View Details

- Jane Demo
- Risk Indicators

NARX SCORES			OVERDOSE RISK SCORE	ADDITIONAL RISK INDICATORS (0)
Narcotic	Sedative	Stimulant	000 (Range 000-999)	
000	000	000		

Explanation and Guidance

This NarxCare report is based on search criteria supplied and the data entered by the dispensing pharmacy. For more information about any prescription, please contact the dispensing pharmacy or the prescriber. NarxCare scores and reports are intended to aid, not replace, medical decision making. None of the information presented should be used as sole justification for providing or refusing to provide medications. The information on this report is not warranted as accurate or complete.

Graphs

RX GRAPH Narcotic Opiorphine Sedative Stimulant Other

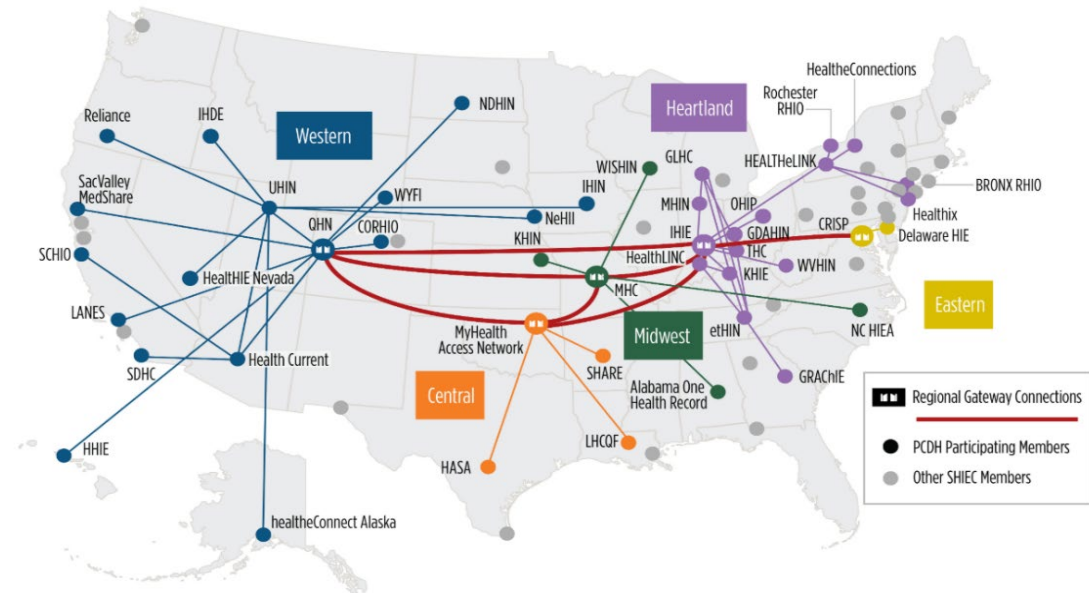
Exchange

Neighboring Connections via National Networks

eHealth Exchange

- Atrium Health CareConnect HIE (Charlotte, North Carolina),
- Carolina eHealth Network (South Carolina),
- Coastal Connect HIE (North Carolina)
- Cone Health (North Carolina),
- DaVita (national),
- eTHIN (East Tennessee)
- Florida HIE Services (Florida),
- GaHIN (Atlanta, Georgia),
- GRACHIE (Augusta, GA),
- healthconnect Alaska (Alaska),
- MedVirginia (Richmond, Virginia),
- OCHIN (Portland, Oregon),
- PULSE (Patient Unified Lookup System for Emergencies),
- SCHIEx (South Carolina),
- Sentara Health (Northern Virginia),
- VA HIE (Veterans Administration), DMIX (U.S. Department of Defense)
- Vidant Health (North Carolina)

Patient Centered Data Home (PCDH)



NC HealthConnex Clinical Portal: User Testimonials

“At the Open Door Clinic, we see many patients that have visited the ED and have been hospitalized for chronic medical conditions. The documents we receive directly from NC HealthConnex allow us to have all of the information we need at our fingertips. There is no interruption of workflow to request records, rescheduling patients until we have all of the information we need or even having to track down specialist referral notes. Those providers are in the system and are sending the data that we need via NC HealthConnex! The other side to this is the ED and hospital providers have access to the information we are sharing since our doctors are not on call at all hours. The continuity of care is incredible! We love it!”

Clinical Director for the Open Door Clinic dba Urban Ministries of Wake County

“I was able to confirm that a patient of mine who had **several outstanding referrals** to different care organizations had not rescheduled her appointments as planned. This saved time for me and the medical records staff from having to log into three separate Epic systems to get the same information.”

Independent Physician’s Office



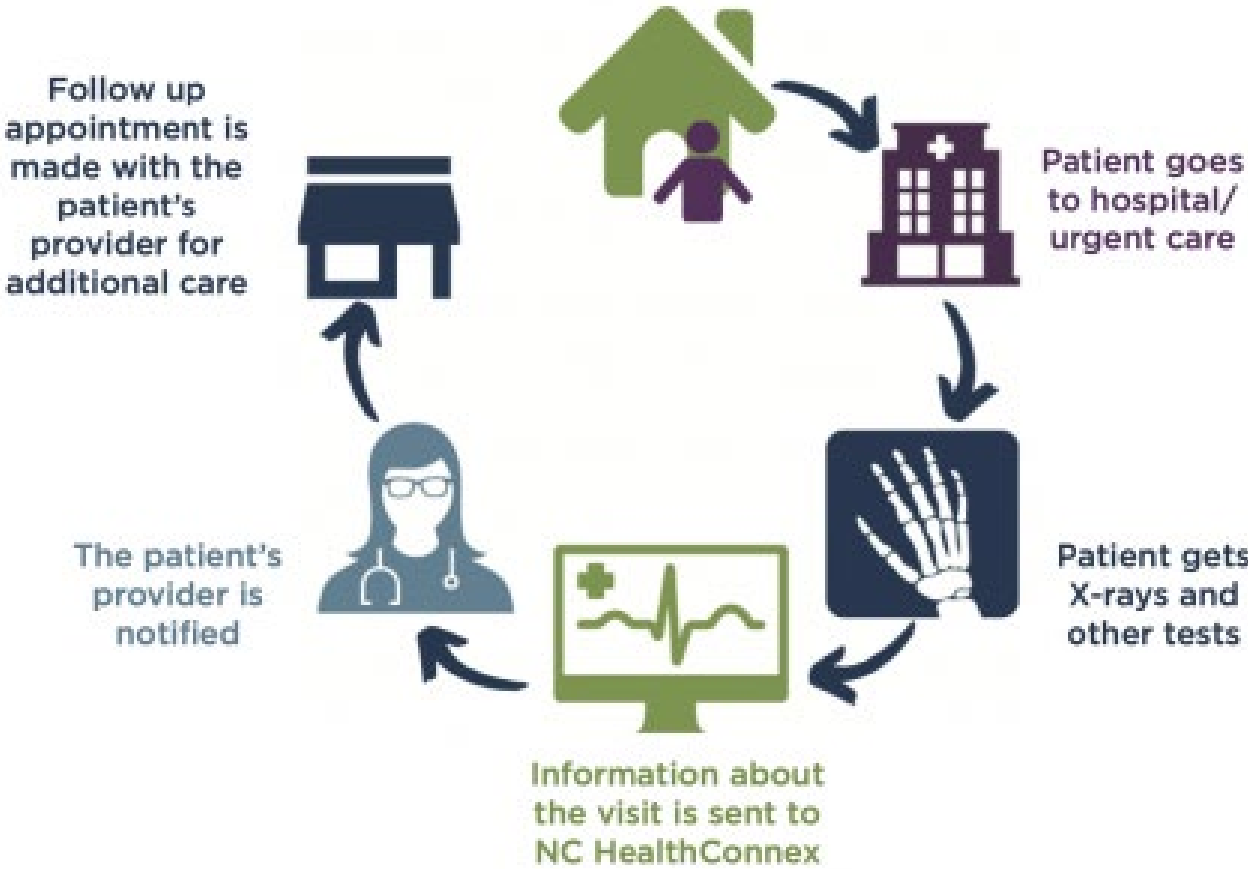
“I use the portal to look up labs, test results, consult notes from other providers for quality reporting. This data is provided to insurance companies and other agencies. I also use it to see if the patient has changed practices or has seen specialists. It provides an accurate picture of where the patient has been in their health care journey while saving valuable time and research.”

FQHC Case Manager



What is NC*Notify?

A subscription-based service based on admit and discharge messages (ADTs) that notifies providers as their patients receive services across the NC HealthConnex participant base - spanning geography, health care systems, acute and ambulatory care settings.



Statewide Impacts:

- 667 participants live
- 8.3M patients monitored
- 1.8M average alerts sent per month

How Does It Work?

Subscriptions

Subscribers establish their cohort of patients for whom they want to receive alerts.

Monitoring Feeds

All clinical data feeds coming into the HIE are monitored for a matching event or clinical data of interest to the subscribers. These events can then be pushed directly to the subscriber or made available on the web portal.

Receiving Notifications

Subscribers can receive notifications for events or data that match their patients via their preferred method.

- Batched notification files in delimited or HL7 format.
- Near real-time notifications via HL7 messages.
- Web-based NC*Notify dashboard via NC HealthConnex portal.



NC*Notify – Notification via NC HealthConnex Portal

PAA Tools Patient Search Messages (0) Clinician Tools NC*Notify CSRS Report My Account Logout Help



Filter by Name or MRN

AUDACIOUS

Saved Custom Filters

Add Filter

All Not started In progress Completed

Notifications count: 752
Last updated: 10:27 07/05/20

ERNIE FAKEEGRHZXSSEFAKE (AI-833007449)

Hospital 1
06/23/2020 04:17 PM
ER Registration
CHEST PAIN Transient cerebral ischemic attack, unspecified

THEOBALD FAKEKDHSUFRXBFAKE (AI-561902929)

Hospital 1
06/23/2020 04:17 PM
ER Discharge
FALL: PAIN Emphysema, unspecified

KATHERYN FAKESWLMUPLQVFAKE (AI-602246355)

Hospital 3
06/23/2020 04:17 PM
IP Admit
3 INFECTED TOES Unsteadiness on feet

EWARD FAKEEBPOHPWXFAKE (AI-932097722)

Hospital 1
06/23/2020 04:17 PM
ER Registration
PREGNANT WITH SPOTTING Unspecified fracture of the lower end of left radius, subsequent encounter for closed fracture with routine healing

MANDA FAKEMKRIFVTMFAKE (AI-634269834)

Hospital 2
06/23/2020 04:17 PM
ER Registration

Ernie FAKEEGRHZXSSEFAKE

AI-833007449

Demographics

MRN: AI-833007449	Home Phone: 410-799-1433
Date of Birth: 12/20/2011	Cell Phone:
Gender: M	Work Phone: 916-309-8019
Address 1: 94 Express	Primary Care Provider: Ernie Chaster
City: Baltimore	NPI: 47084949084
State: MD	Practice: Practice3
Zip: 21218	

Most Recent Event

Event Date: 06/23/2020 04:17 p.m.	Death Indicator: N
Admit Date: 03/09/2020 12:00 a.m.	Hospital Service: Internal Med
Discharge Date:	Patient Complaint: CHEST PAIN
Point of Care: Hospital 1	Diagnosis Description: Transient cerebral ischemic attack, UN
Admit Source: Court/law enforcement	Diagnosis Code: G45.9
Patient Class: Emergency	Discharge Disposition:
Event Type: Registration	Discharge to Location:

Additional Info

Number of ER Visits: 0

Number of IP Visits: 0

Event History

No Prior Events

Status Log

What Notifications Are Available?

Admission, Discharge, or Transfer – Notification of any visit in the NC HealthConnex network.

COVID-19 alerts – Notifications of a COVID-19 test and the result.

High utilizer alert – Notification of at least 2 ED visits in 90 days or at least 4 inpatient admissions in 12 months.

Dental alerts – Providers are alerted when patients visit the emergency department for dental care.

Care team change alert – Providers are informed when a new organization has subscribed to their patient.

Diabetes diagnosis alert – Providers are alerted upon a new diabetes and/or pre-diabetes diagnosis for patients they are monitoring.

Chronic care management alert – Providers receive an alert when a patient meets the Centers for Medicare and Medicaid Services' chronic care management services criteria.

Use Case Reports

“The emergency ADT feed from NC*Notify I reviewed yesterday was timely, and when I went into HealthConnex to pull the CCD, I was able to get some valuable information regarding the physical condition of the client, which could then be shared with the direct care staff in the program as the **guardian failed to let us know when she dropped the child off for treatment.**”

- Behavioral Health Agency

A large hospital system is utilizing NC*Notify to gain insights into other facilities **in their system** that are not on the same EHR, as well as for feeding **downstream care management dashboards.**

“With services like NC*Notify, the entire care team can have much-needed information to keep patients safe during the riskiest times: when they **transition between one care entity and another.**”

- FQHC Participant

“Patient care has largely been synchronous with a scheduled appointment. Now, our real-time data gathering from the HIE has allowed us to prepare for a remodel of our system to asynchronous real-time knowledge-based care, where our providers’ workflows are disrupted 24/7, giving them **immediate, actionable knowledge to make their care plans living documents as our patients navigate the healthcare ecosystem around us.**”

Behavioral Health Services Provider

Promoting Interoperability (PI)

- **Weight:** 30% for MIPS APM and 20% of Traditional MIPS
- **Reporting period:** continuous 90 days minimum
- **Patient population reporting requirement:** all patients
- **Points:** 10-40 points per measure
- **Promoting Interoperability:** Total maximum points of 100
- **Bi-Directional Interface:** worth 40 of the 100 total points – single greatest point measure



[Promoting Interoperability | NC HIEA](#)

Promoting Interoperability (PI)

Objective	Measure	Maximum Points
e-Prescribing	e-Prescribing	10 points
	<i>Bonus: Query of Prescription Drug Monitoring Program (PDMP)</i>	<i>Bonus: 10 Points (5 points in 2020)</i>
Health Information Exchange	Support Electronic Referral Loops by Sending Health Information	20 points
	Support Electronic Referral Loops by Receiving and Incorporating Health Information	20 points
	OR Health Information Exchange (HIE) Bi-Directional Exchange	40 Points
Provider to Patient Exchange	Provide Patients Electronic Access to Their Health Information	40 points
Public Health and Clinical Data Exchange (Attest YES to 2; or YES to 1 and Exclude 1)	Report to two different public health agencies or clinical data registries for any of the following: <ol style="list-style-type: none"> 1. Immunization Registry Reporting (must be bi-directional) 2. Electronic Case Reporting (not available for practices) 3. Public Health Registry Reporting (NC HealthConnex Diabetes Registry) Enrollment Form 4. Clinical Data Registry Reporting 5. Syndromic Surveillance Reporting (not available for practices) 	10 points



How can NC HealthConnex help Lisa and her family?

Meet Lisa

Meet Lisa



- 5-year-old girl who suffers from Type 1 diabetes and two other chronic comorbidities
- Lisa lives in a rural county in North Carolina but has frequent visits with a variety of clinical specialists across the state.
- Lisa's family and care team are struggling to keep up with all her varied health care information across her care continuum.

Lisa's Relationship to the Diabetes Registry



- Lisa is living with Type I diabetes.
- Lisa's encounter data will populate the NC DHHS's DPH NC HealthConnex Diabetes Registry to help NC DHHS's DPH better understand and provide support to North Carolinians living with Type I or Type II diabetes.

Lisa's Relationship to the Clinical Portal



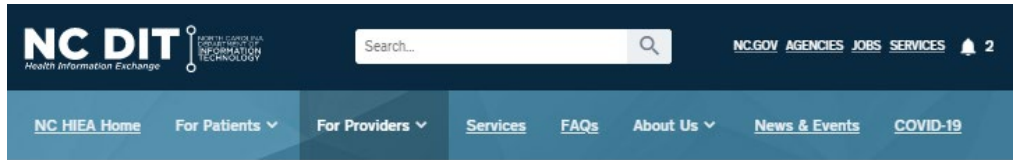
- Lisa's care continuum extends across the state of North Carolina.
- Lisa's providers are often in different networks but are able to leverage NC HealthConnex's Clinical Portal to see all of Lisa's encounters, medications, allergies, diagnoses, etc.
- Full and in-depth view of Lisa's longitudinal patient record.

Lisa's Relationship to NC*Notify



- Lisa recently had an ER visit while on vacation in another part of the state.
- After receiving information via NC HealthConnex's NC*Notify file, Lisa's PCP reached out to Lisa's parents to ensure that everything was okay with Lisa.
- Additionally, Lisa's PCP imported historical events received from NC HealthConnex's NC*Notify into her own analytics tool and can therefore see if this was an isolated incident.

Additional Training



Home » For Providers » Training & Resources

Training & Resources



Upcoming Training & Events
Check our calendar for upcoming NC HealthConnex training and HIEA events.

NC HIEA & AHEC Resources
Find training, news and other resources from the NC HIEA and NC AHEC partnership

NC HealthConnex Roadmap 2021
We detail five strategic areas for 2019-2021, the initiatives in each area and how we measure progress.



To Access Video Training

Participants can register [here](#) for Module 1, *NC HealthConnex Overview*. Registration is required in order to receive the link to Module 1. This training will last approximately 12 minutes.

Adobe Flash is required by the software being used to process your registration for the HIEA training courses. Please click the following URL to test the Flash Plug-in software on your computer or laptop: www.webinato.com/conftest/

Please also follow the instructions below to ensure that you have Flash access enabled for your browser. We hope that you

enjoy the NC HIEA training and your learning experience.



Questions?

Reminder: Please use the Q&A feature in your chat function of the WebEx feature.

Thank you!

**For more information visit,
www.nchealthconnex.gov**

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