



NORTH CAROLINA HEALTH INFORMATION EXCHANGE AUTHORITY

Office Hours

August 16, 2023

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NC HIEA Team Members



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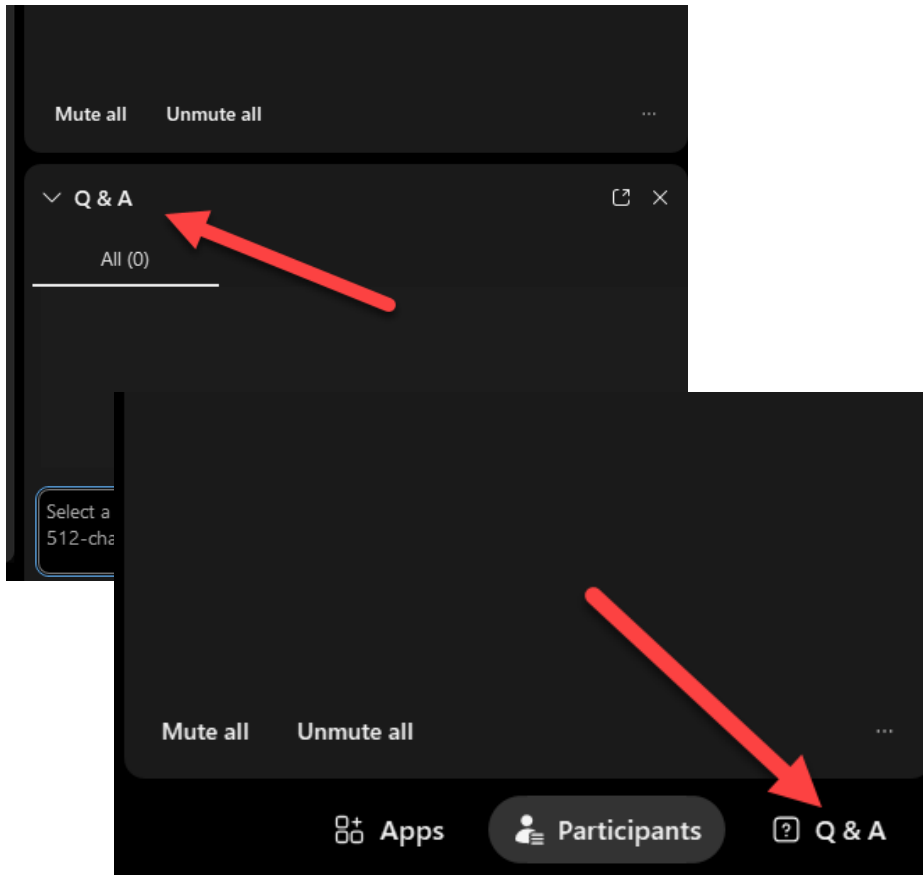


Luke Keeler
Business
Development
Specialist



Karon Casey
NC*Notify
Lead Analyst

Housekeeping Items Before We Start



- We will first review the previously submitted questions.
- At the end, if you have a question, you can utilize the Q&A feature.
- A copy of the presentation slides will go out to everyone who registered for today's webinar.

North Carolina Health Information Exchange Authority

Overview of Topics



- **Welcome and Introductions**
- **N.C. Health Information Exchange Authority Overview**
- **DSM Directory**
- **NC*Notify**
- **Other Pre-Submitted Questions**
- **Opportunity for Participants to ask Questions**
- **Conclusion**

North Carolina Health Information Exchange Authority

The NC HIEA was created in 2015 to oversee and administer the state-designated health information exchange, NC HealthConnex. Providers who use state funds, like Medicaid or the State Health Plan, to provide health care are mandated to connect to NC HealthConnex.



Vision: *Link all health care providers across North Carolina, enabling participants to access information to support improved health care quality and outcomes.*

Mission: *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.*

Office Hours Pre-Submitted Questions



The NC Health Information Exchange Authority

Pre-Submitted Question

At this point, how successful is this program?

What is the advantage and disadvantage of participating in this program?

How has the adoption of NCHIE (NC HealthConnex) changed the way providers communicate?

How would NC HealthConnex improve the provider and member engagement?

Any upcoming changes?

How do other practices use this feature in their clinic?

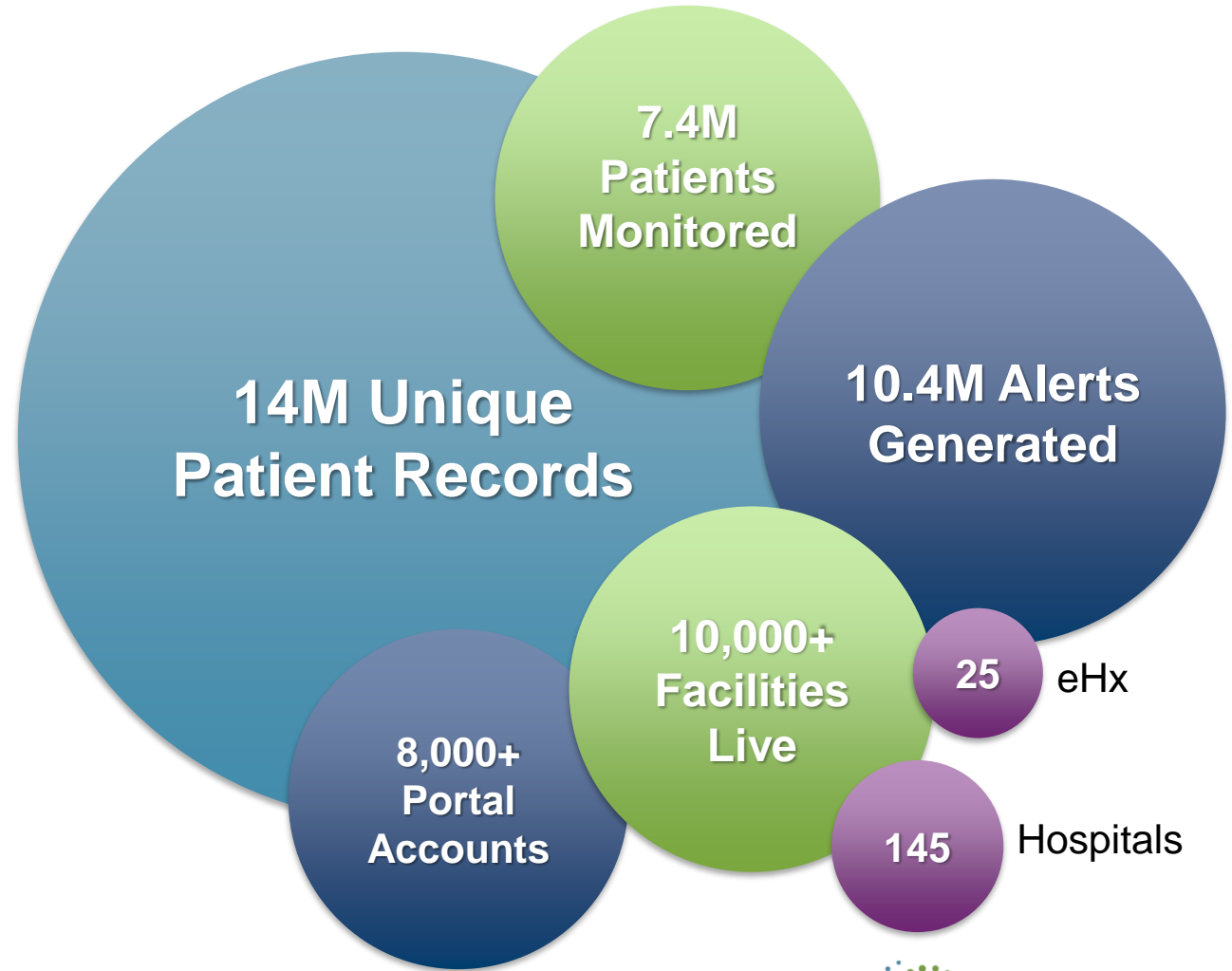
What type of use are other LHDs getting out of the NC HealthConnex Portal? For those who don't offer Primary Care, how can we benefit from this access?



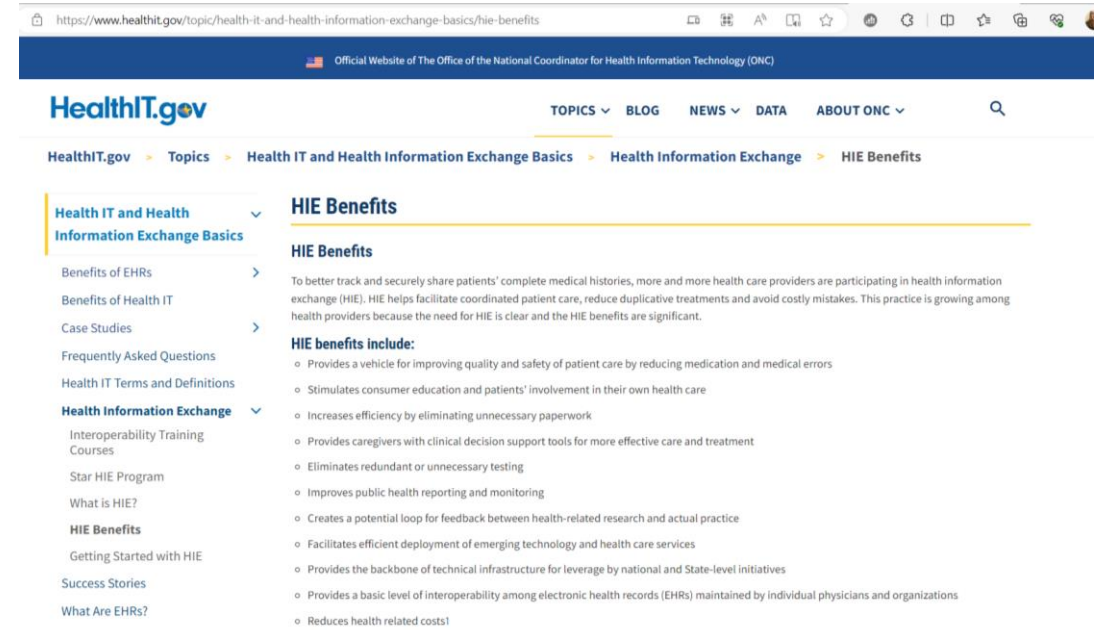
The NC Health Information Exchange Authority

Pre-Submitted Question

- We have been operating since 2015. We have over 10,000 facilities live and sending data including 145 hospitals.
- We have over 14 million unique patient records, and are connected to 25 interstate and border states through the eHealthExchange which has data on DOD and the VA.
- According to the most recent numbers available, we are also monitoring 7.4 million patients through NC*Notify, generating 10.4 million alerts.



- The advantage of using NC HealthConnex is that it enables providers to see their patients' most up-to-date health information including medications, lab results, allergies, and diagnoses.
- This leads to better care outcomes for patient, a decrease in duplication of testing, and potential cost savings by utilizing NC*Notify for ADT alerts.
- A disadvantage you may face is that even though NC HealthConnex does not charge for any of our services, your EMR vendor may charge you for the connection.
- You can view these [FAQs](#) on our [website](#) for more information.



For more information on the benefits of health information exchanges, please visit [this page](#).

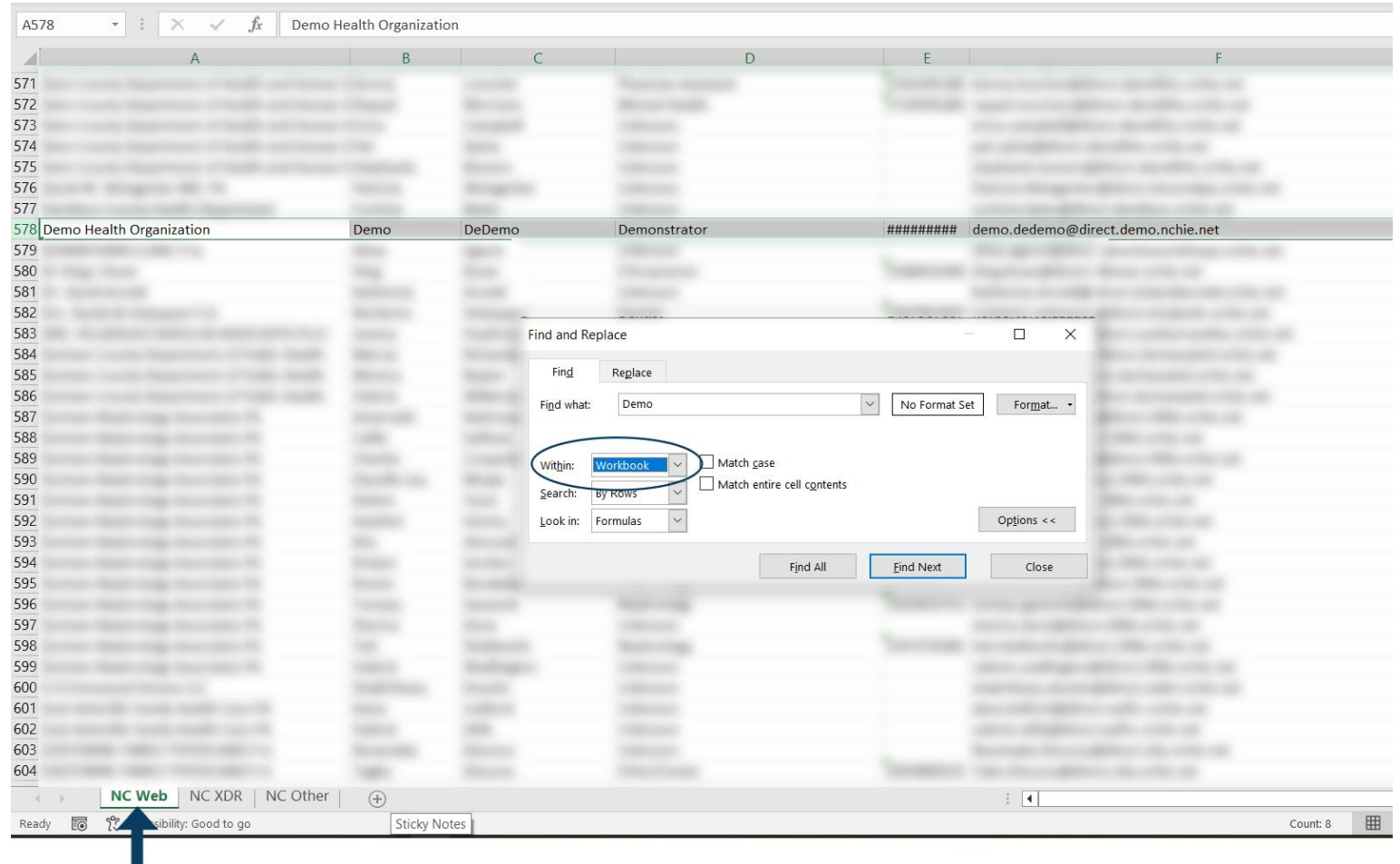
- [NC HealthConnex](#) is helping to streamline communication between providers and their patients and between other providers.
- NC HealthConnex gives providers access to records on patients with whom they have a treatment relationship without filling out ROIs and calling/faxing other offices. It also allows providers to communicate directly with one another securely through [DSM](#).
- Having access to a patient's longitudinal record allows providers to be better prepared to make treatment decisions for the patient and better communicate with their patients about their treatment plan.
- The NC HIEA is also committed to improving communication with our participants. We provide this quarterly Office Hours webinar, the quarterly Teletown Hall, and the monthly How To Connect Call.
- You can reach our provider relations/outreach team at 919-754-6912 and at hiea@nc.gov. You can also sign up for our [newsletter](#) to keep abreast of any changes with NC HealthConnex
- One upcoming change is an upgrade to the Clinical Portal.

- Local health departments are allowed to access NC HealthConnex for any of the permitted purposes identified in the participation agreement, which includes payment, health care operation and certain public health purposes and reporting. Providers at local health departments can look up patient records for treatment purposes, which may include checking for vaccinations.
- If you think using the data in NC HealthConnex would be helpful for a program or activity at your local health department, then we encourage you to check with your Participation Account Administrator so that they can determine whether that use complies with the participation agreement and any applicable law. You can see which providers are connected on our [participant map](#) on our [website](#).
- Some examples of permitted purposes are:
 - Using NC*Notify for Transitional Care Management and meeting quality measures.
 - Accessing longitudinal patient records on patients with whom you have a treatment relationship.
 - Using the Clinical Portal to see if a patient has received care in other facilities or has new diagnoses.
- Feel free to watch [this video](#) for more information on how others use NC HealthConnex.

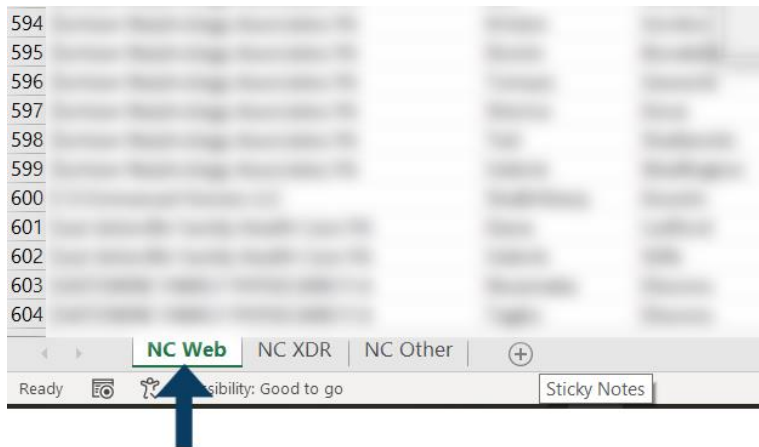
DSM Directory

Let's talk about [DSM](#) and the directory email some of you may get.

1. Open the attached Excel spreadsheet.
2. Search for your DSM address by holding CTRL + F on your keyboard, then typing in your organization name in the search bar. Make sure to search by "Workbook" NOT by "Sheet."



DSM Directory



Tab 1: NC Web

If your organization appears in **Tab 1** (meaning you have DSM through NC HealthConnex) and you would like to either disable or add any DSM addresses to the directory, please send an email to the NC HealthConnex Help Desk at HIEmail@sas.com and include “DSM Directory Change” as the subject.

Tab 2: NC XDR

If your organization appears in Tab 2, please use your administrative access to the SES portal to make any changes.

Tab 3: NC Other (HISP)

If your organization appears in Tab 3 (your DSM is through your EMR vendor, please contact your HISP – Health Internet Service Provider (your EMR vendor) to request any changes. Please ask your EMR vendor to report these changes to DirectTrust. The NC HealthConnex Help Desk Team cannot make these changes for you.

DSM Questions

Pre-Submitted Questions

How do I get Direct Secure Messaging?

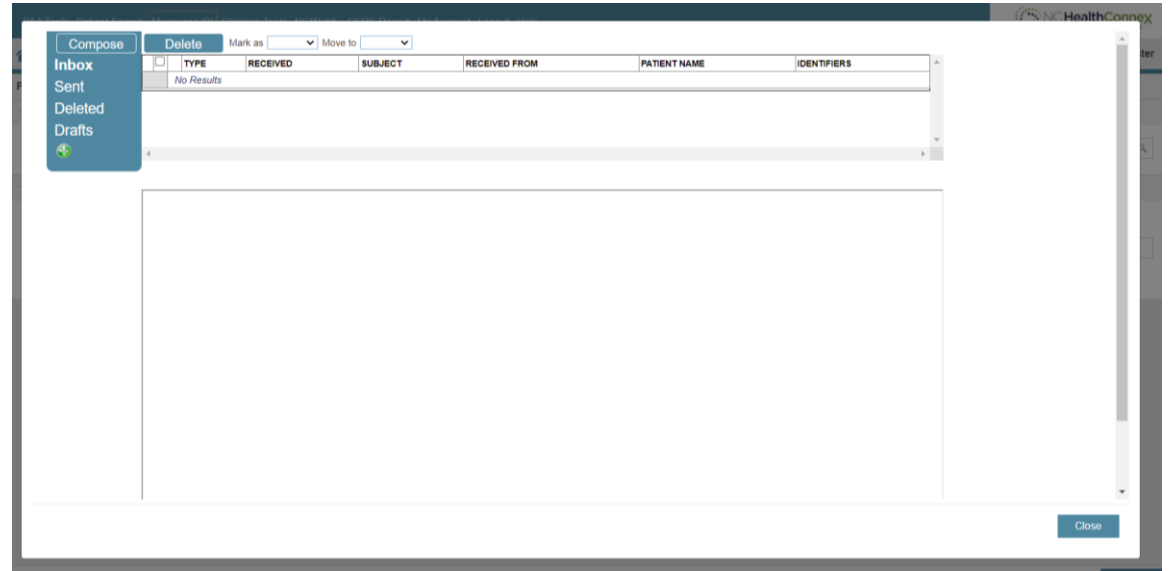
Is there a limit to how many users can be given DSM in our organization?

I am not a part of the directory because I don't have Full Participation Agreement. How will I get any communication from other providers who work with my patient?

DSM Questions

Pre-Submitted Questions

- If you do not have [Direct Secure Messaging](#) through your EMR, you can request a DSM address by emailing HIESupport@sas.com. You will access your inbox through the Clinical Portal.
- You can have as many users as you want. Just remember the importance of the [user attestation](#) once a quarter if you are the [Participant Account Administrator](#).
- Without a Full Participation Agreement, you are unable to utilize DSM or other NC HealthConnex services due to the HIPAA Privacy rule. You will have to contact other providers by phone, fax or email.
- DSM and other value-added services are provided free of charge with a [Full Participation Agreement](#), which contains a Business Associate Agreement that covers you and NC HealthConnex under HIPAA and allows you to access patient data.



NC*Notify Questions

How do I access NC*Notify?

How are providers using NC*Notify?

NC*Notify Questions

Pre-Submitted Question

- If you have not signed up for NC*Notify, there is a [web-based enrollment form](#) on our website.
- You can access [NC*Notify](#) through the [Clinical Portal](#) in your web browser. Some providers prefer to receive notifications directly into their inbox through their EMR.
- NC*Notify alerts providers when their patients have received care in other settings.
- Gives providers insights to check in with patients after events and to schedule follow-up appointments for clinic interventions.
- Reduces avoidable hospital readmissions and improves coordination across the care continuum.
- Helps providers achieve financial goals under value-based care contracts.
- Helps providers comply with state and federal quality initiatives such as promoting interoperability and conditions of participation (CMS).



Is the patient list for NC*Notify tracking live for services requested/performed? Are we only able to submit list by list to review, and what is that turn around time for results?

An [NC*Notify](#) subscriber provides a list of the patients for whom the subscriber would like to receive event notifications such as admissions and discharges for inpatient, outpatient, and emergency department encounters. If one of the patients from the patient list is admitted to a hospital for an emergency department or inpatient visit or visits another participating organization, the subscriber will receive a notification alerting them of these events. Notification files can be delivered weekly, once per day, several times per day, and in near real-time.

A subscriber can update a patient list as frequently as needed, such as daily, weekly, monthly, but we do request that the patient list is updated at least quarterly. Updated patient lists are typically processed for notifications within 24 hours.

Our organization was able to set up our EHR to ingest the ADT alerts, but we are struggling with the amount and types of alerts coming in. For instance, patient registration notifications come in, and it is my understanding those are generated when a patient's chart is updated (i.e., new address, insurance etc.), but if we wanted to be able to streamline and have only the event types of ED visit, hospitalizations admit/discharges and observations come in...will there be the ability at some point in the near future to establish any of these parameters.

Per our [specifications](#), notifications are sent for the following ADT events:

- ADT^A01 – Inpatient Admission
- ADT^A03 -- Discharge
- ADT^A04 – Outpatient/ED Registration
- ADT^A06 – Change Outpatient to an Inpatient
- ADT^A07 – Change Inpatient to an Outpatient

In the current environment, your organization will need develop a patient filtering process through your EMR when ingesting the ADT alerts. HIEA is always looking to improve our participant experience and will take your request back to our development team for consideration in a future release.

Mandate/Connection Questions

Pre-Submitted Questions

Who needs to sign up?

If we have a Participation Agreement in place, how long does it take to finish the process?

When will I be notified that our connection is built?

Trying to understand the program as a whole and when will it actually go into effect, or is it still in the works? What else by providers besides the initial registration is needing to be completed at this time?

We are a large multi-specialty medical clinic. When will the exchange have the capacity to connect our group? We have been in the queue for many years.

Is there an update on if chiropractors are required to connect?

When will Southeastern Region providers be connected so that records from Novant Wilmington and others will be available?



Mandate/Connection Questions

Pre-Submitted Question

- The [mandate to connect](#) to NC HealthConnex required that those receiving state funds for providing health care services, such as Medicaid and the State Health Plan, initiate their connection by **January 1, 2023**.
- Signing a [participation agreement](#) demonstrates a good-faith effort to meet the connection mandate.
- Actively engaging in the onboarding process with your technical vendor and the NC HIEA also demonstrates a good-faith effort to meet the connection mandate.
- The North Carolina Legislature is reviewing a bill that would make it voluntary for chiropractors to connect to NC HealthConnex. The NC HIEA is following the bill to see if it will become law.
- A complete list of providers who needs to sign-up can be found in [N.C.G.S. § 90-414.4](#) or on our page [What Does the Law Mandate?](#)



Mandate/Connection Questions

Pre-Submitted Question

- It takes about 4-6 weeks for the Participation Agreement to be executed and returned to you.
- At that time, you can begin accessing [NC HealthConnex Services](#) if you have a Full Participation Agreement. You do not need to wait until your connection is complete to utilize services such as DSM or NC*Notify or to [request live training](#) or watch [training modules](#) on our website.
- When it is your organizations' turn in the queue, we will reach out by email to have you complete the connection scoping checklist. This will begin your connection onboarding. Please see the "[How to Connect](#)" section of our [website](#).
- There are 6,000 providers in queue. The NC HIEA uses a priority matrix to determine when to connect an organization based on several factors: how large the organization is, what kind of data they contribute, who their EMR is and if we already have a connection.
- Please reach out to us by email at hiea@nc.gov to check on your organization's connections status.

Mandate/Connection Questions

Pre-Submitted Question

- CCHIE providers are already connected or in the process of connecting.
- We began work on this region last year when we became aware of CCHIE closing operations. Operations closed on August 8th of this year.
- We have worked in close partnership with CCHIE to help all providers transition to NC HealthConnex.
- There is information on our [website](#) with more details.



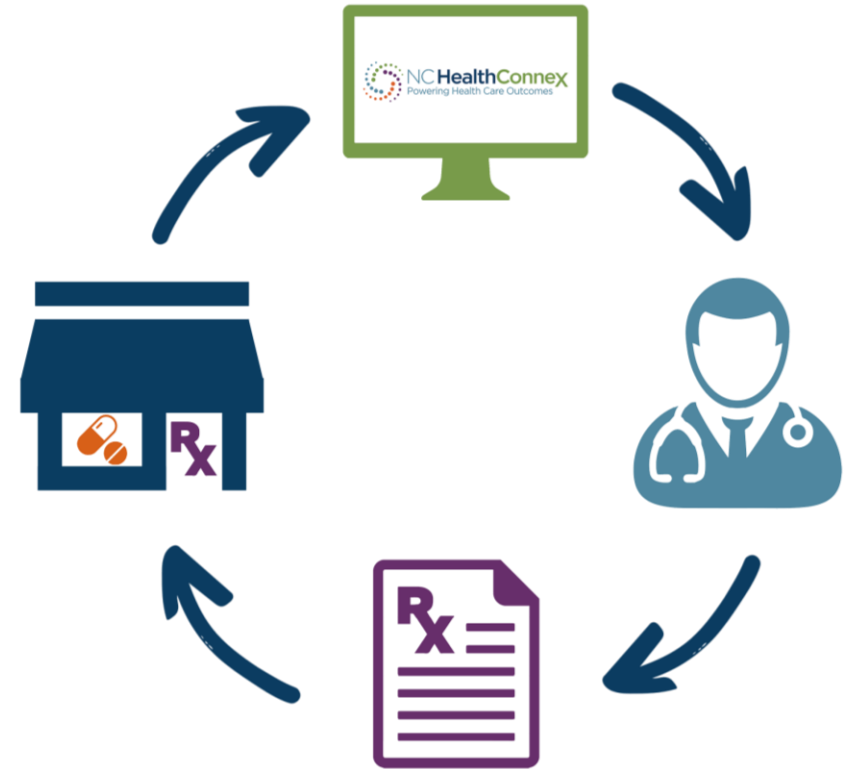
Pharmacy Connections

Pre-Submitted Question

When will pharmacy connections begin?

How do pharmacies get training and when will implementation begin?

When does my pharmacy need to start sending info to NCHIE? What do I need to get started? I have already signed the agreements needed.



Pharmacy Connections

Pre-Submitted Question

- Pharmacy connections will begin once the pilot is complete. The pilot should be complete by the middle of August.
- At that time, our team will begin reaching out to pharmacies to complete the connection scoping checklist which begins the technical connection discussions.
- It will take several months to begin connections and pharmacy data will not be visible in the portal before then.
- You can view this [FAQ](#) regarding pharmacies on our website.



Training Questions

Pre-Submitted Question

How do we train our providers when they are new to using the system?

How do I use NC HealthConnex?

What is the best way to print from the clinical portal without printing unnecessary information?

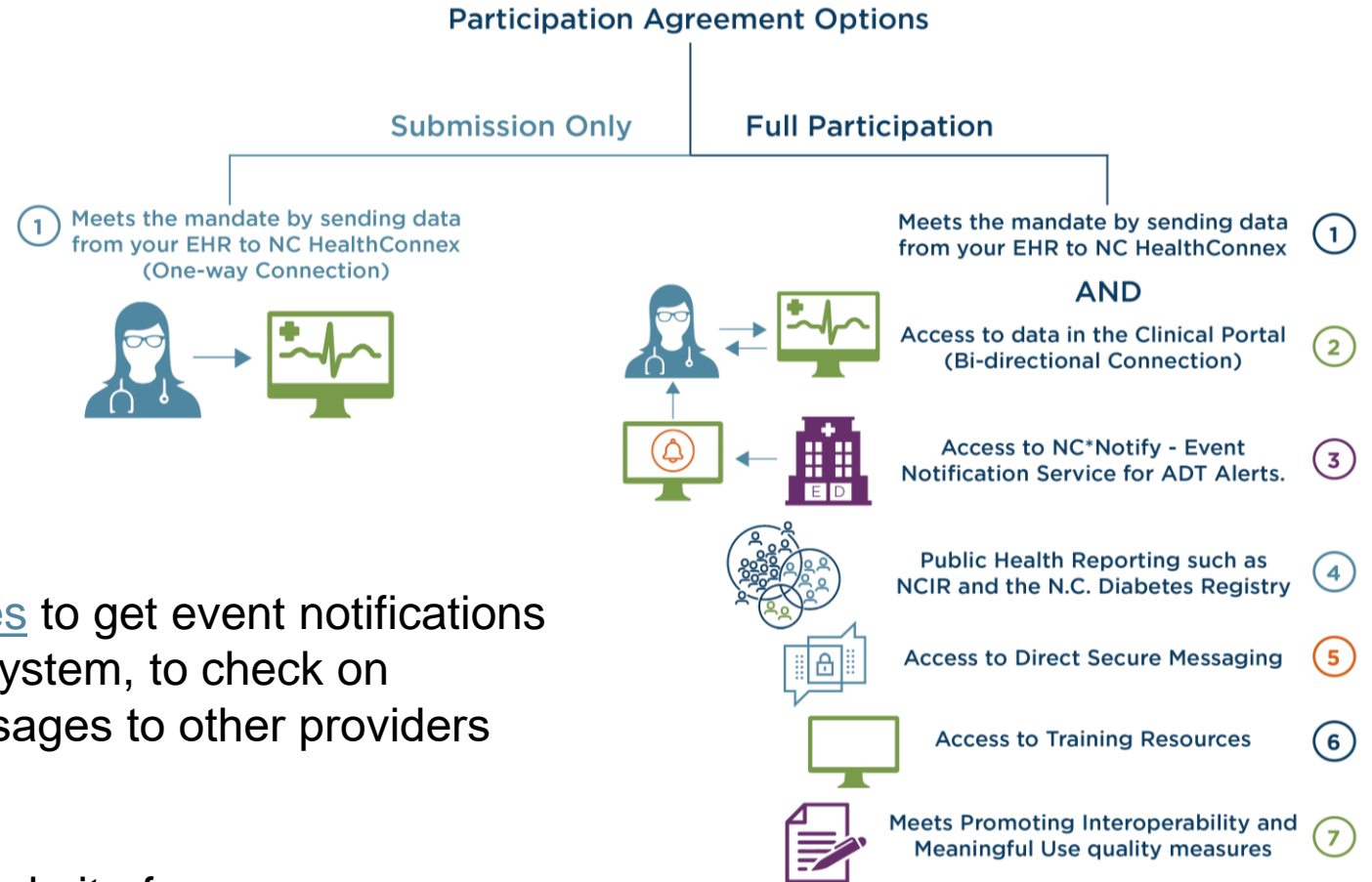
How can I set up a workflow using our current EHR Practice Fusion?

Are there more available records when logged into NCHIE directly compared to what is available in our EMR, athenaOne?

Training Questions

- There are multiple ways to utilize NC HealthConnex, but to get the best value, you will need a [Full Participation Agreement](#).
- This will allow you to see the data that other providers are submitting to NC HealthConnex on patients with whom you have a treatment relationship.
- You can also use our [value-added services](#) to get event notifications when patients receive care outside your system, to check on patients' vaccinations, to send direct messages to other providers and to participate in [training](#).
- Please see the [overview module](#) on our website for more information.

Pre-Submitted Question



Training Questions

Pre-Submitted Question

- The Clinical Portal is one way you can use NC HealthConnex to view patient information flowing in from other practices. Other options include a bi-directional interface in your EHR or Single Sign-On.
- Within the Clinical Portal, there is an option to print patient information down to the summary page level. Please note, this is a PDF feature, not a patient viewer feature.
- Click the print button, then pages, and then custom. With custom you can print any number of pages separated by a comma. You can also do page ranges.
- Please see page 44 of the [Clinical Portal User Guide](#).

The screenshot shows the 'View As' dropdown menu with the following options: Patient Summary (HTML), Consolidated CDA CCD, Consolidated CDA v2.1 CCD, Patient Summary (HTML), and Patient Summary (PDF). The 'Patient Summary (PDF)' option is highlighted with a red circle. The report title is 'Patient Summary Report for ADULT1 DEMONSTRATION1, F 1980-01-01'. The report content includes the following sections:

Patient Demographics

Name	Date Of Birth	Gender	Identification Number	Phone	Address
ADULT1 DEMONSTRATION1	1980-01-01	F	MRN: ADULTDEMO1 MRN: 100223858 MRN: 100223858 MRN: 100223858 MRN: 100223858 MRN: 100223858 MRN: 100223858 MRN: 100223858 MRN: 100223858 MRN: 100223858 MRN: 100223858 MRN: 100223858 MRN: 100223858 MRN: 100223858 MRN: 100223858 MRN: 100223858 MRN: ADULTDEMO1	(444) 111-8888	2000 NOT REAL STREET MEDIUM TOWN NC 27519

Allergies

Onset Date	Inactive Date	Allergen	Category	Last Updated At
2016-12-13		Ragweed	Propensity to adverse reactions to drugs	DUHS

Medications

Date	Medication	Strength	Duration	Source
2021-06-14	ceFAZolin (A NCEF) dry p ouster	Inactive	1 day	Duke University Health System

Training Questions: Practice Workflow

Pre-Submitted Question

- Integrating NC HealthConnex into your workflow depends on your office, staff, current workflow, etc. You may have support staff look up information prior to patient appointments, or you may like to look that information up yourself.
- If you have a bi-directional connection, the EMR queries the system within your EMR so that you do not have to go to a separate web browser to look for patient information, but it depends on your EMR capabilities.



- The records you see in your EMR vs. what you see in NC HealthConnex may be different. The [mandate](#) is for organizations to send data on state-funded patients, although some choose to send data on all their patients. If your patient is state funded, all their data should be in NC HealthConnex; if they are not, then it varies depending on the sender whether you will see their information or not.

Setup Questions

Pre-Submitted Question

How do I know if my setup is correct?

I think I am waiting on my EMR, but I feel out of the loop and want to make sure I am doing the right thing.

I've completed all my paperwork but have not received instructions on how to access the HIE or login credentials.

Setup Questions

Pre-Submitted Question



- Once your participation agreement has been executed, you should receive the [welcome packet](#) with instructions on how to proceed. If you have not received it, please email hiea@nc.gov so we can check your account.
- All our services are by request. You can email HIESupport@sas.com to request login credentials for access to the Clinical Portal.
- You can also contact HIESupport@sas.com to check on the status of your connection or to ensure that your connection is live and sending data.

Bi-directional Questions

Pre-Submitted Question

When will my data be two-way?

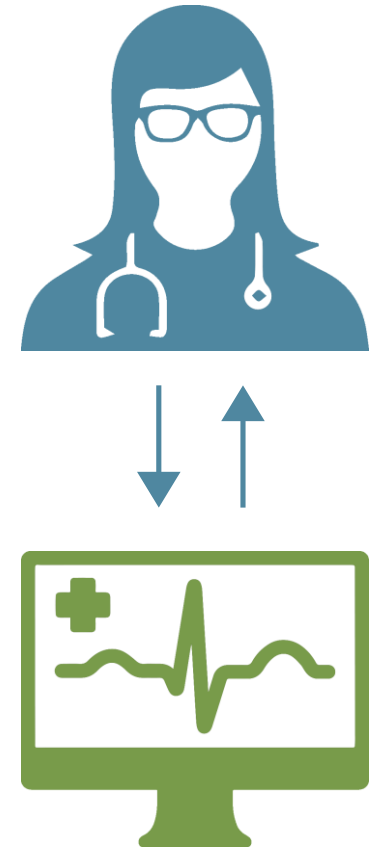
Bi-directional status – How do you know if you have it? How do you request it?

We have a bi-directional interface for our EHR; however, I find more information on the portal that is not crossing over or notifying us. We may need to assess our filters to be sure everything is setup correctly.

Bi-directional Questions

- Bi-directional connections are set up through an integration with your EMR, meaning you access NC HealthConnex patient data via your EMR and not through the Clinical Portal via a web browser.
- You can email hiea@nc.gov and ask about your organization's status. We can check for you and let you know.
- If you're interested in setting up a bi-directional connection with an EMR that has not currently developed an integration with the HIEA, you will need to reach out to your account representative to request that integration.
- Not all EMRs are capable of bi-directional connection, you would need to check with your EMR vendor.
- Two-way or bi-directional connections take time to build and usually the direct connection is built before the bi-directional connection begins.

Pre-Submitted Question



If you're concerned that information on the portal is not crossing over to your EMR or that your filters are not setup properly, you may want to reach out to your EMR vendor.

We talked to an expert at the SAS Institute, our technical partner who suggested checking these settings.

1. Is the EMR matching the same patient that you are finding in the portal?
2. What are the document query parameters?
3. Are there any EMR configuration steps that need to be made to retrieve documents?

For further help, please email HIESupport@sas.com, and they can help investigate further with your EMR.

Data Security/Privacy Questions

Pre-Submitted Question

Is this something patient's can choose to opt out of?

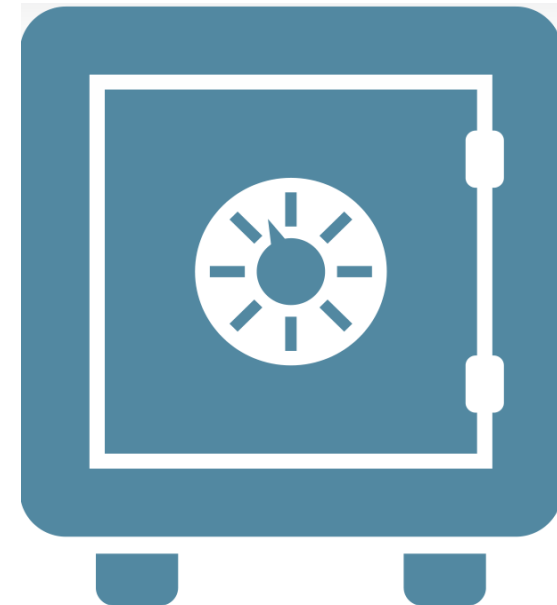
In light of Vanderbilt University Hospital releasing records to the Tennessee AG, how can we reassure our patients and ourselves that records held by NC HealthConnex will remain confidential?

Will there be tagging and sensitivity label requirements? Do you have suggested ways to automate those assignments?

Data Security/Privacy Questions

Pre-Submitted Question

- A patient may request an [opt out](#), which will prevent his or her protected health information from being disclosed by the NC HIEA to HIPAA-covered entities through the HIE Network.
- Patients can go to our [website](#), then navigate to [For Patients > Your Choices](#) to find opt-out forms and learn more about their rights under HIPAA.
- It is important to understand that the opt-out is between the patient and the NC HIEA and does not preclude the provider from having to send the data. It is still submitted to NC HealthConnex; it is just suppressed from view.
- Please see this [FAQ on our website](#).



Data Security/Privacy Questions

Pre-Submitted Question

- North Carolina law requires the NC HIEA to comply with HIPAA, including the Privacy Rule and Security Rule.
- The Participation Agreement, and the included Business Associate Agreement, identifies the permitted purposes for which the NC HIEA can use the data submitted by a provider. We encourage you to review Section 2.39 of the Participation Agreement to learn the limited circumstances in which the NC HIEA can use, access or disclose the data in the HIE. Our [privacy and security policy](#) is available on our [website](#).
- Most behavioral health information (clinical/demographic data) is permitted to be shared through NC HealthConnex; however, we do not accept 42 C.F.R. Part 2 data (SUD) or psychotherapy notes.
- This type of information may be shared via [Direct Secure Messaging \(DSM\)](#) with other participants if the provider sending the message complies with applicable law and obtains the required consent or authorization from the patient before disclosing the data via DSM.
- The [Behavioral Health and Sensitive Data Policy](#) is available on our website for more information.

Questions?

Reminder: Please use the Q&A feature at the bottom of WebEx to ask your question.



Chat Questions

We signed a PA in 2019, we're still in the queue. When will we be connected?

- Some providers have been in queue for years, due to the priority matrix score and the limit on how many organizations we can connect every year. If you are really motivated to get connected, you can email hiea@nc.gov to see if you can get moved up.

How can practices see organizations that are connected and what data they're sending?

- You can access our [participant map](#) to see what organizations are connected and what data they're sending.

national network, an initiative of Civitas Network. Find an [updated list of PCDH participants](#) in 25 states connected to NC HealthConnex.



Chat Questions

Can participants have bi-directional access and access the clinical portal on the web?

- Yes! You can access the portal from our [website](#). Go to [For Providers](#) > [Provider Clinical Portal](#).

Is the opt-out for all providers?

- The [opt-out](#) is for the patients who do not want their data viewed. The providers must still submit the data.

Can you see ED notes and lab results?

- It depends. All state-funded patient data must be submitted to NC HealthConnex. If a patient has another health plan, the data may be visible if the organization they went to is a full participant sending all of their data. All state-funded data (NC State Health Plan, Medicaid, and state-funded grants) should be visible.

Chat Questions

Do dental offices have to connect?

- Yes. As of right now, dentists are mandated to connect. Please see this [FAQ](#) on our website.

I've had a full PA since 2019, and I can't access NC*Notify. What do I do?

- Please email us at hiea@nc.gov so we can look into this issue.

Is there a list of practices that are fully participating?

- Yes. Please see the [participant list](#) on our website. It will say who has a full vs. a submit only agreement.

Is there a reason to rush on software for pharmacies?

- No. There is no need to change your software unless your software is unable to connect to NC HealthConnex, and even then, you do not need to change your software until you are ready to connect which could be months or years.

Chat Questions

How do we get on-site help?

- You can contact [NC AHEC's practice support](#) by email at practicesupport@ncahec.net.

Can we have test patients in the clinical portal for training purposes?

- There are demo patients in the demo environment. I don't know that we would be able to put test patients in the live environment. If you want training, please visit our [training page](#) where there are [training modules](#) or you can [request live training](#).

If patients opt-out, do we still get re-imbursed by insurance?

- It depends. The insurance companies can require you to participate for re-imburement; however, the legislature suspended the language in the bill that state-funded reimbursement would be held if not connected, meaning providers will still be paid by the State Health Plan and Medicaid.

Chat Questions

What is the time frame to see Novant data?

- Novant has already signed a full participation agreement and is sending all data. Novant New Hanover is in progress for connecting. If there is a Novant entity you are not seeing, please email us at hiea@nc.gov so we can investigate.

Is Healthie (EHR) able to connect?

- You can check our [Electronic Health Record Connectivity Report](#) on our [website](#). I do not see Healthie listed as a connected EHR.

I don't see my EHR vendor on the list. What do I do?

- You can contact your EHR vendor to see if they are able to connect. If not, you may need to eventually change EMRs when it is time for you to connect.

Chat Questions

Can we see where we are in the queue?

- I don't know that we can show you where you are in the queue; however, you can [email](#) and ask if you are on the schedule to be connected this year.

Are all Novant sites connected? Asking specifically about Brunswick.

- Yes, they should all be sending data. If you are not seeing data from a specific site, please let us know so we can investigate.

Thank You!

For more information, visit

www.nchealthconnex.gov

Tel: 919-754-6912

E-mail: hiea@nc.gov