

MMIS Conference

New York City – New York State Medicaid
Medication History Pilot

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EXPERIENCE. RESULTS.

Agenda

- Background on the Project
- New York City Government Perspective
 - Primary Care Information Project
- New York State Government Perspective
 - Medicaid as an “enlightened” payer
- Next Steps
- Questions



EXPERIENCE. RESULTS.

Background on the Project

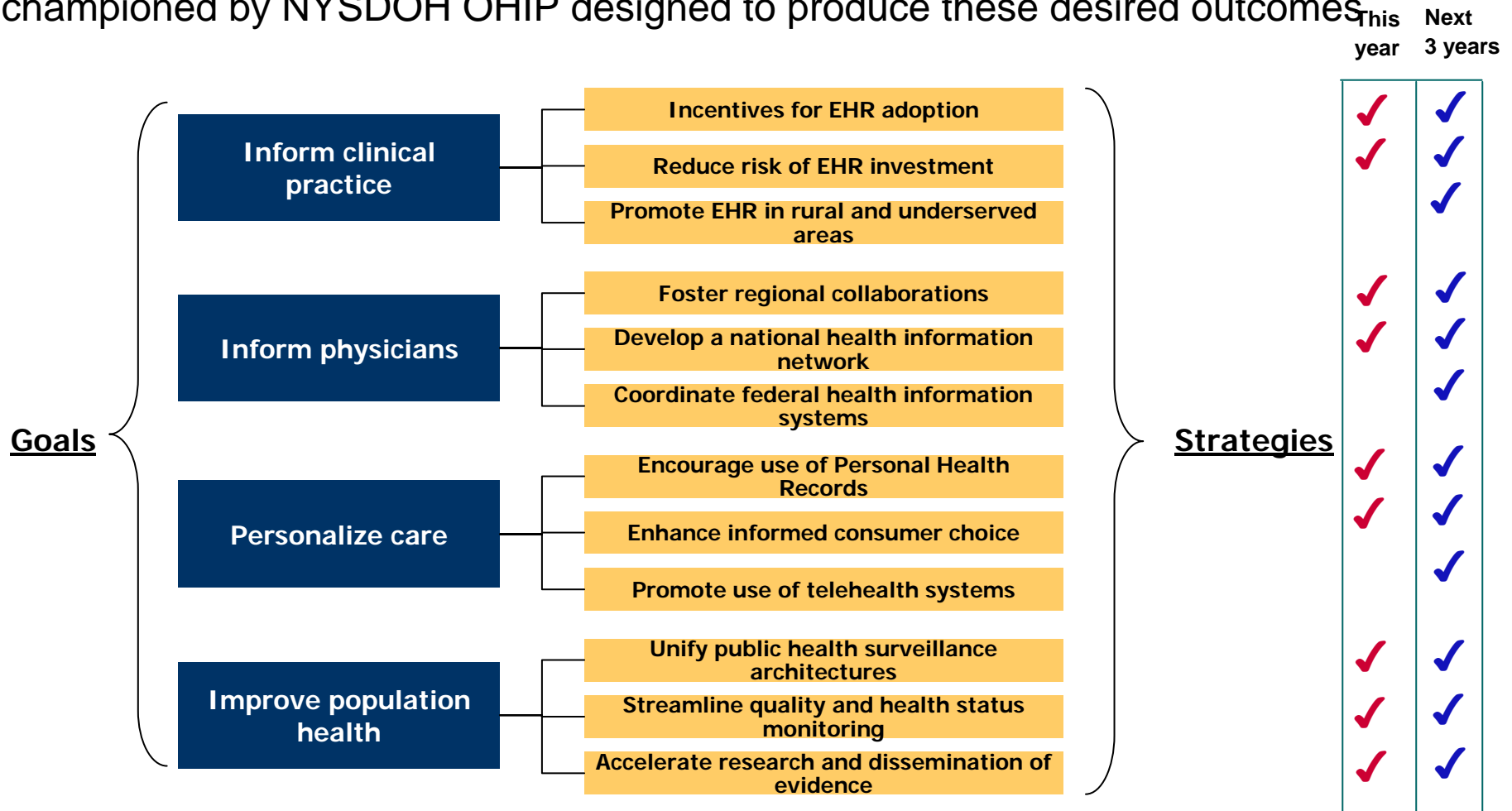
- ❑ Known as **eMedNY**, The New York State Department of Health (NYSDOH) Office of Health Insurance Programs' (OHIP) Medicaid Management Information System (MMIS) completed a major modernization effort in 2005 that included many new features including many **new web based, online, real-time features**.
- ❑ NYSDOH and the New York City Department of Health and Mental Hygiene (NYCDOHMH) are leveraging these capabilities to **create an interface between NY City's Primary Care Information Project, and eMedNY**.
- ❑ The first step is a pilot program to supply **Eligibility, Medication History and Formulary** information to the **point of care** to physicians using an electronic medical record.
- ❑ The pilot will culminate in a **controlled study of the impact** of having that information.
- ❑ Next steps may include leveraging the City-State collaborative effort into a **statewide program that includes Medicaid interfacing with RHIOs**, and potentially the ability to share **Continuity of Care Documents** for the state's **4 million Medicaid lives**.
- ❑ This is a very solid example of how **Medicaid can leverage the hidden power of its MMIS** to create **positive return on one of the state's largest capital investments**



EXPERIENCE. RESULTS.

ONCHIT's "Framework for Strategic Action" identifies key goals and strategies to improve population health and reduce healthcare costs

– The NYC-NYS Meds History Pilot is one of many projects under way championed by NYSDOH OHIP designed to produce these desired outcomes





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Primary Care Information Project

- Mission
 - Increase the quality of care in medically underserved areas through health information technology (HIT)
- Program Areas
 - Define Public Health Functionality for EHRs
 - NYC Center of Excellence in PH Informatics
 - Promote adoption of EHRs with PH functionality
 - \$27 million Mayoral initiative, \$3 million State grant
 - Research and evaluation



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Benefits to New York

- Public Health
 - Monitoring population health
 - Understanding and addressing disparities
- Providers of Care
 - HHC
 - Correctional Health
- Medicaid and Uninsured
 - Improving quality
 - Moderating costs without reducing services



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PCIP Roadmap

1. Citywide EHR Network

- Procure “best of breed” Electronic Health Record
- Add Public Health/Quality Improvement functionality
- Prepare Network and Hardware Infrastructure
- Extend to Correctional Health and community providers

2. Citywide Quality Improvement Network

- Citywide quality measurement and reporting
- Decision supports and other quality improvement
- Extend to other ambulatory EHRs

3. Citywide Health Information Exchange Network

- Interfaces to other systems (e.g., HHC)
- Linkages to RHIOs
- **Medicaid Medication History**



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State Plans Take Shape



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August 8, 2007

Commissioner Daines Announces Statewide Plan to Enable Improvements in Health Care Quality, Affordability and Outcomes Through Health Information Technology

Health Commissioner Richard F. Daines, M.D., today announced the launch of a comprehensive health information technology program, part of Governor Eliot Spitzer's agenda to advance patient-centered care and enable improvements in health care quality, affordability and outcomes for each person, family and business in New York.

Related Quality Improvement/Cost Containment Approaches

Results

Increased:

Overall Population Health

- Formulary Compliance
- Mgt of Chronic Disease
- Resource Utilization
- Patient Education/Ownership

Decreased:

- Adverse Drug Events
- Inpatient Days
- ER Visits/Duplicate Tests
- "Pay and Chase" activity
- **Overall Medicaid Budget**

Cost of Providing Healthcare to the Citizens of NY





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Today: NYC – NYS Medicaid Medication History Pilot

Data Share

Meds History
Formulary

Clinical Data Exchange Standards
NCPDP 8.1 (SCRIPT)

Neighborhood clinics
1300 physicians
200,000 recipients

eMedNY System

Direct Data
Share

Physician Office
CCHIT-Accredited
EHR + e-
Prescribing

e-Prescribing
Networks

Use Cases

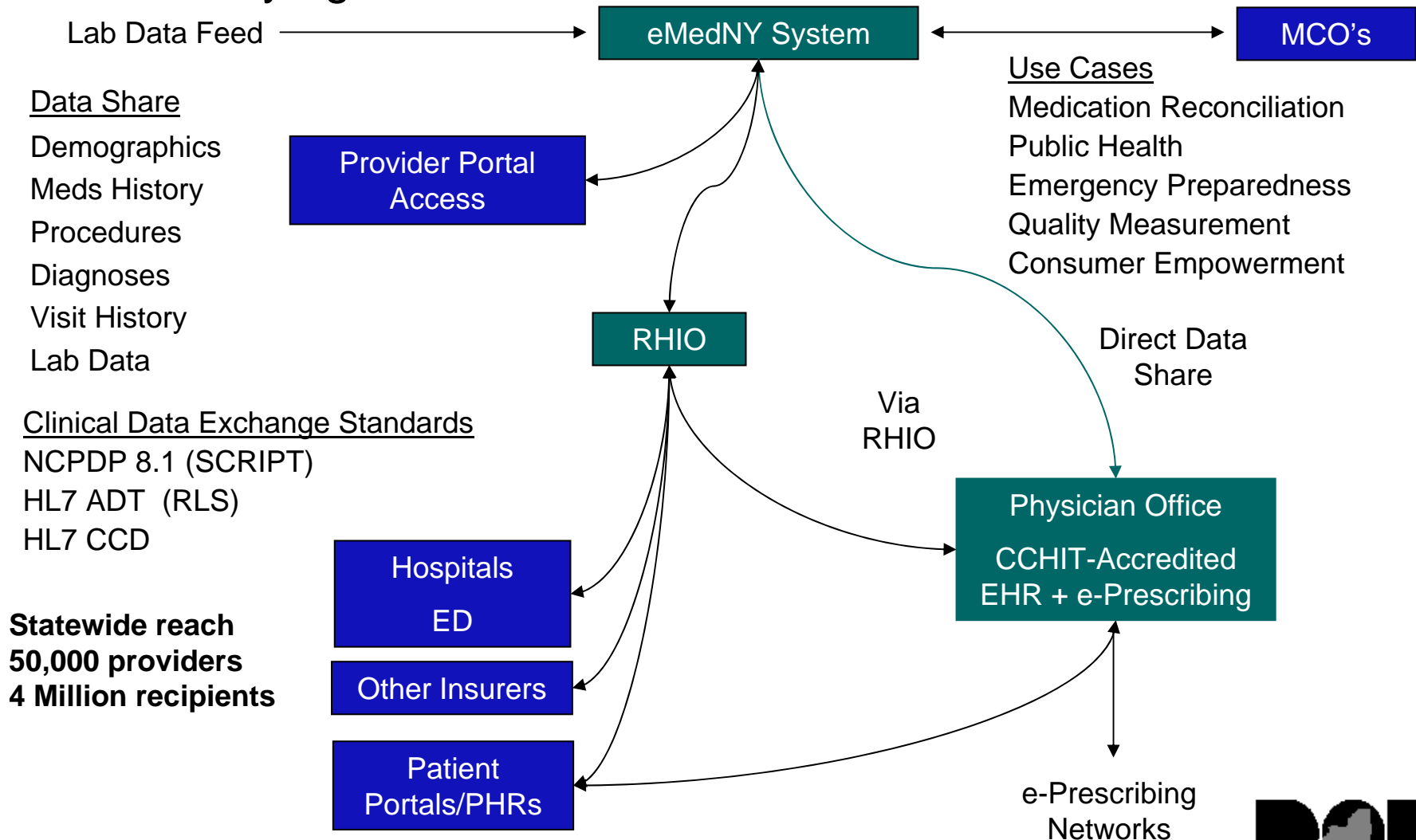
Medication Reconciliation
Public Health
Impact Assessment





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Tommorrow: Statewide Interoperable HIT as a tool for 'Patient First' Quality agenda





EXPERIENCE. RESULTS.

Technical Requirements for the Physician's Office

- CCHIT Certified EHR (2006 standards), including access controls, audit records, authentication;
- Protection against malicious software (malware / spyware);
- Security certificate to be issued by the State's fiscal agent.

Administrative Requirements for the Physician's Office

- **42CFR 431.303 State authority for safeguarding information** – State retains Jurisdiction for safeguarding the Medicaid data
- Written patient consent must be obtained
- To get the Security Certificate, Provider must
 - Register for access through State Medicaid
 - Certify that they use malware / spyware;
 - Agree to abide by Federal and State statutes that require use of HIV and Mental Health data to be only for treatment and that provider is prohibited from re-disclosure





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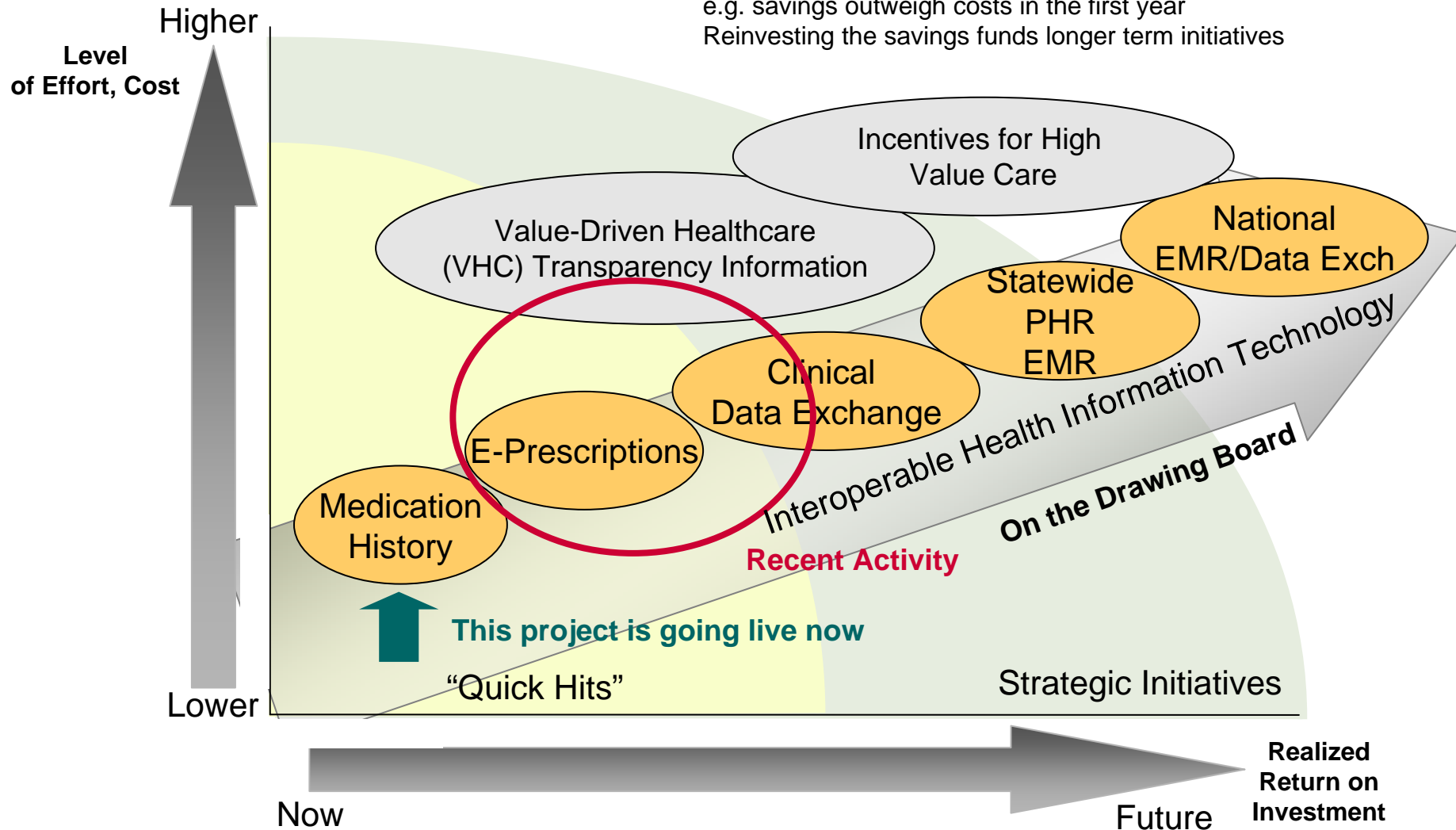
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A Roadmap to full benefits is being approached as a series of small successes

Many near term projects are “budget neutral”, e.g. savings outweigh costs in the first year
Reinvesting the savings funds longer term initiatives



Questions/Comments

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