

Health Information Exchange Can Play a Big Role in Delivering Integrated Care

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Picture it: No more fax machines by 2020. That means no fax machines by next year.

Ambitious as this timeline may seem, it's actually the challenge set forth by Centers for Medicare and Medicaid Services (CMS) Administrator Seema Verma.¹ In a 2018 speech at an Office of the National Coordinator (ONC) Interoperability Forum, Verma challenged developers to make physician offices "a fax-free zone by 2020."

For other industries, this may seem doable. But health information management (HIM) professionals work in facilities that still rely on fax machines to exchange information. Even though more than 90 percent of those involved in the process already use electronic health records (EHRs), many organizations still must call or fax another facility to request information on a patient that has recently visited multiple locations.

The hesitation to go all in on electronic sharing of information is not for lack of present and developing technology. In fact, there are existing applications and programs that can help coordinate and exchange health information seamlessly. But providers and consumers simply need more information to understand and trust the technology already in place. Achieving ideal EHRs is still a work in progress for many providers.

Over the past few years, there has been an increase in confidence from healthcare consumers who believe safeguards are in place to protect medical records from unauthorized viewing, leading to increasing trust in health information exchanges (HIEs) according to ONC.² Still, not all consumers are sold on the safeguards in place to protect the electronic exchange of information.

Some consider the risk of an electronic data breach a bigger threat than their healthcare provider's inability to access their health information. If using a fax machine or traditional mail—both longtime, trusted forms of communication—are still considered a viable alternative to HIE, there are major deficits in consumer education to address. The familiarity of faxing and mailing information may be comforting to some, but it is time for EHRs and HIE technology to become the preferred transaction method and to bridge the information gap for truly integrated care.

The role of the HIM professional is to protect the confidentiality of health information while also making it available to those who need it. No one, however, has suggested sacrificing confidentiality in exchange for access. As mentioned earlier, there are ways to provide a safe, secure electronic method for moving health information from Point A to Point B efficiently.

To make information available among regional care providers and healthcare organizations, some states are embracing HIE technology through regional health information organizations (RHIOs). For example, Colorado uses the Colorado Regional Health Information Organization (CORHIO) to provide real-time access to clinical data from EHRs, secure web portals, and electronic reports. CORHIO,⁴ one of two regional HIE systems used in Colorado, provides numerous resources to patients with questions about the security of the HIE and offers options for restricting access to certain users. It's also important that those who volunteer to participate in any RHIO—including patients and providers—understand that the sharing of information is key to the HIE system and the only way they can be truly effective.

According to a 2018 Health Care Consumer Survey by Deloitte, consumers are more likely to share data and build trust with their providers when the consumers own their health data. However, it isn't always clear who owns the data. The survey also noted that stronger partnerships between physicians and health systems may increase the level of trust among these consumers and stakeholders. The technology and information should be easy to access and easy to understand. Many healthcare organizations are trying to accomplish this by using a patient portal that is connected with EHR vendor products.

But these systems are often isolated from each other. There also are limitations as to what data can be included in the patient portal, which may provide an incomplete summary of their health story. These patient portals are meant to provide the patient with their health data and are not always equipped to coordinate the sharing of patient data between providers. These disjointed efforts have created an opportunity for third-party technology companies to partner with consumers and healthcare organizations using standards based on fast healthcare interoperability resources (FHIR).

In an effort to promote interoperability, FHIR standardizes data and recreates it in a readable format. FHIR application programming interfaces (APIs) provide exchange capabilities once the data have been optimized for sharing. Depending on the sensitivity of the data, FHIR relies on numerous security measures to keep patient data secure, including authentication and access control. Since EHRs were not widely in place when HIPAA was first introduced in 1996, HIPAA Privacy and Security Rules have been adapted over the years to allow for the electronic exchange of information.

Care integration among multiple providers and locations can be achieved using efficient information exchange that is accessible and secure. HIM professionals can help by advocating to other providers and consumers about the numerous benefits of HIE technology while building trust in the confidentiality safeguards.

One way to do this is through community outreach, using targeted education about the provider-patient relationship and the shared ownership of healthcare information. With additional work and education the healthcare industry could make some headway toward making Verma's fax-free future a reality.

Notes

1. Butler, Mary. "CMS: Providers Should Get Rid of Fax Machines by 2020." Journal of AHIMA. August 9, 2018. <https://journal.ahima.org/2018/08/09/cms-providers-should-get-rid-of-fax-machines-by-2020/>.
2. Office of the National Coordinator for Health IT. "Individuals Perceptions of the Privacy and Security of Medical Records and Health Information Exchange." 2018. <https://dashboard.healthit.gov/quickstats/pages/consumers-privacy-security-medical-record-information-exchange.php>.
3. Betts, David and Leslie Korenda. "Inside the patient journey: Three key touch points for consumer engagement strategies. Findings from the Deloitte 2018 Health Care Consumer Survey." Deloitte Insights. September 25, 2018. <https://www2.deloitte.com/us/en/insights/industry/health-care/patient-engagement-health-care-consumer-survey.html>.
4. Colorado Regional Health Information Organization. "Our Services." 2019. <https://www.corhio.org/>.

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