WA State HIE & HITECH

Jerry Britcher, HCA Chief Information Officer

WA State Health Care Authority
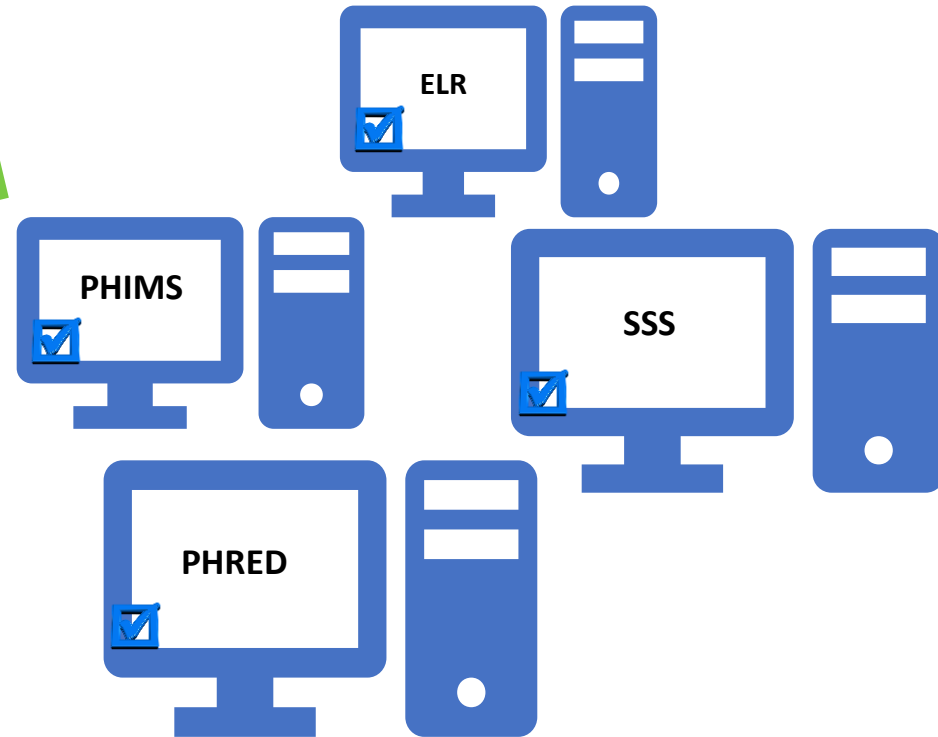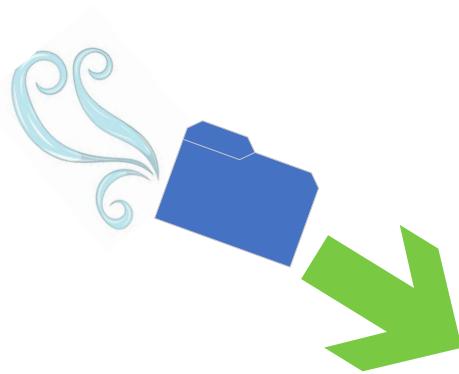
Washington State Department of HEALTH

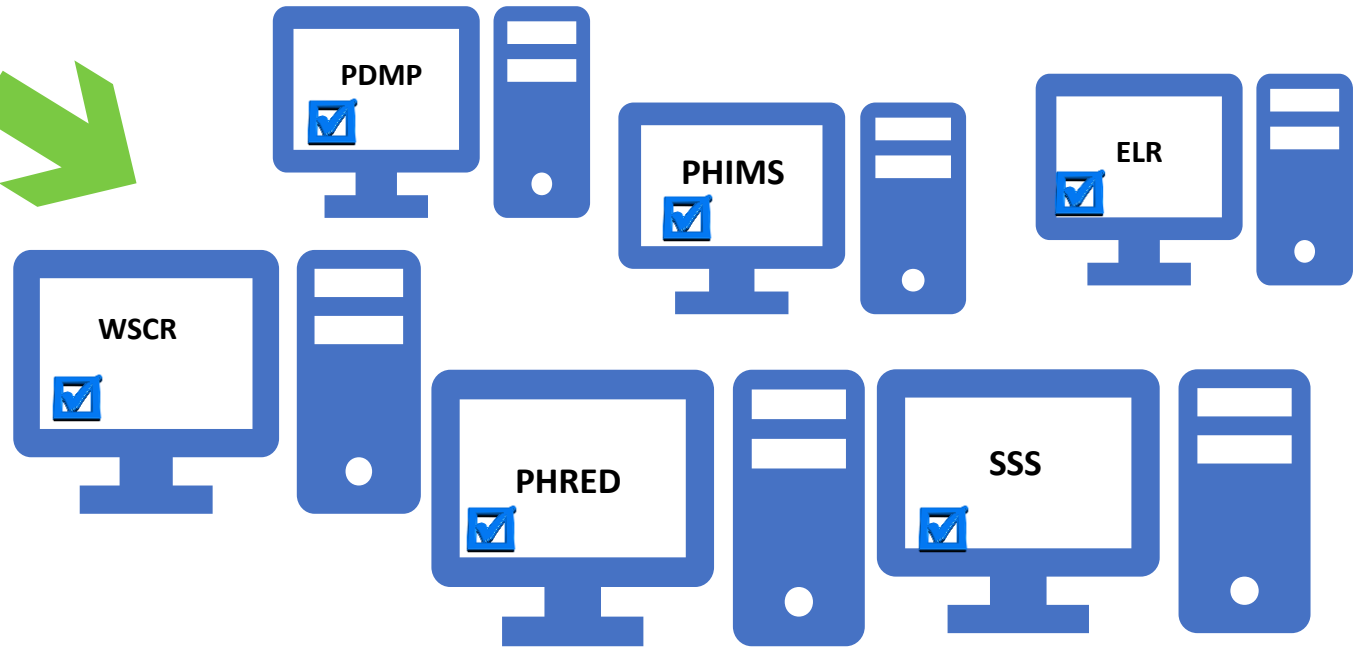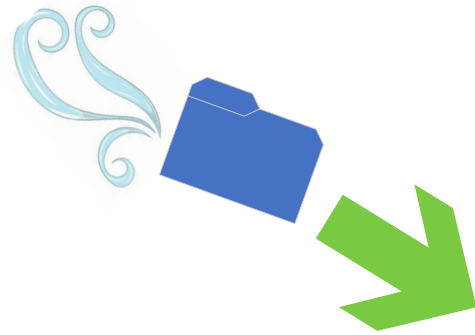Washington State Health Care Authority

HCA - DOH HITECH COLLABORATION

Stage 1

Stage 2

STATE DESIGNED HIE

Public Health use of HIE

Chris Baumgartner, Deputy Chief Informatics Officer

WA State Department of Health

What did WA DOH fund via HITECH?

Agency-Wide Initiatives:

- Enterprise Architecture team
- Rhapsody team (integration engine)
- Disease Surveillance System
- Coordination and fiscal
- Data Modernization
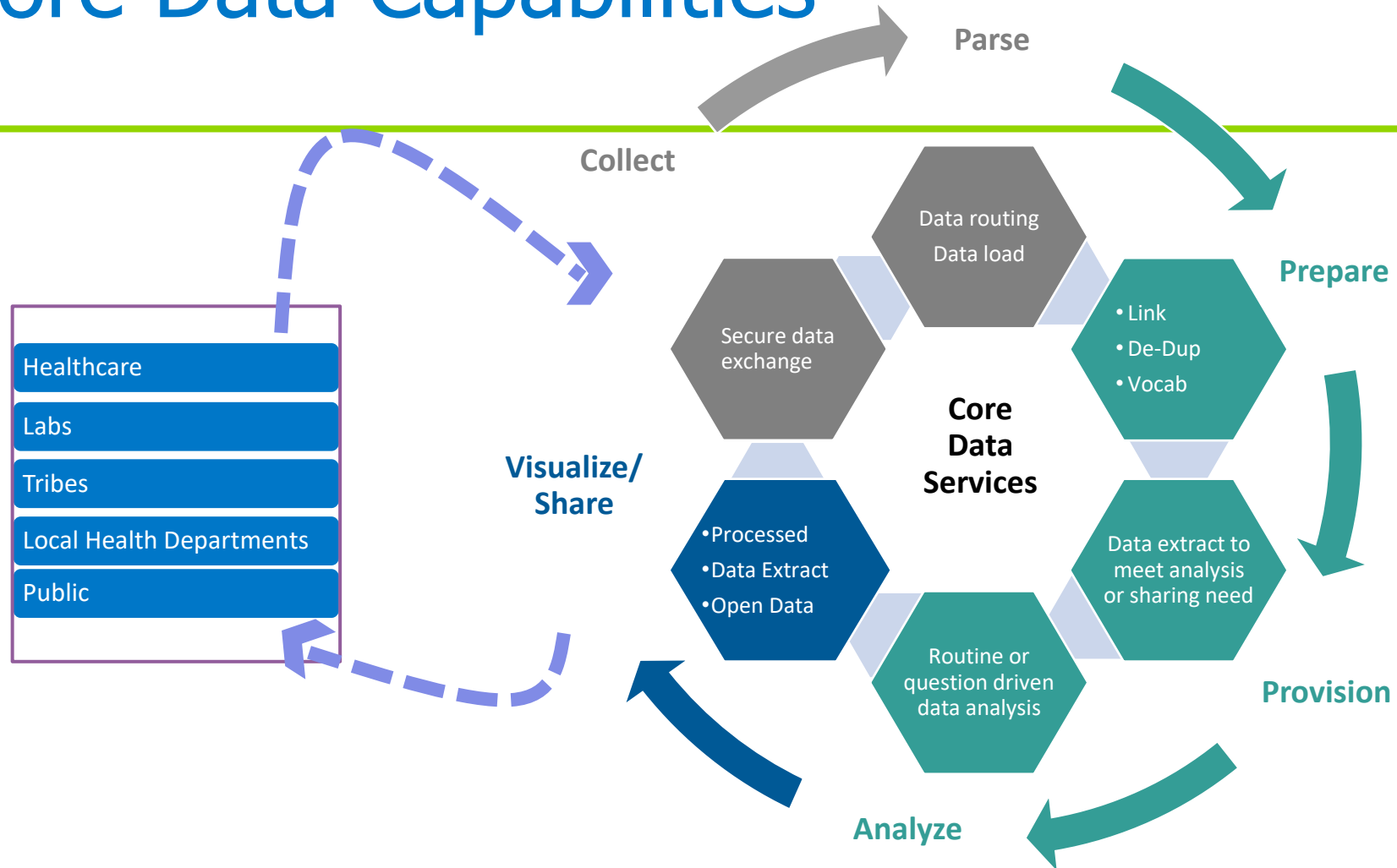
Data Streams Implemented:

- Electronic Lab Reporting
- Syndromic
- Immunization
- Cancer
- Prescription Drug Monitoring
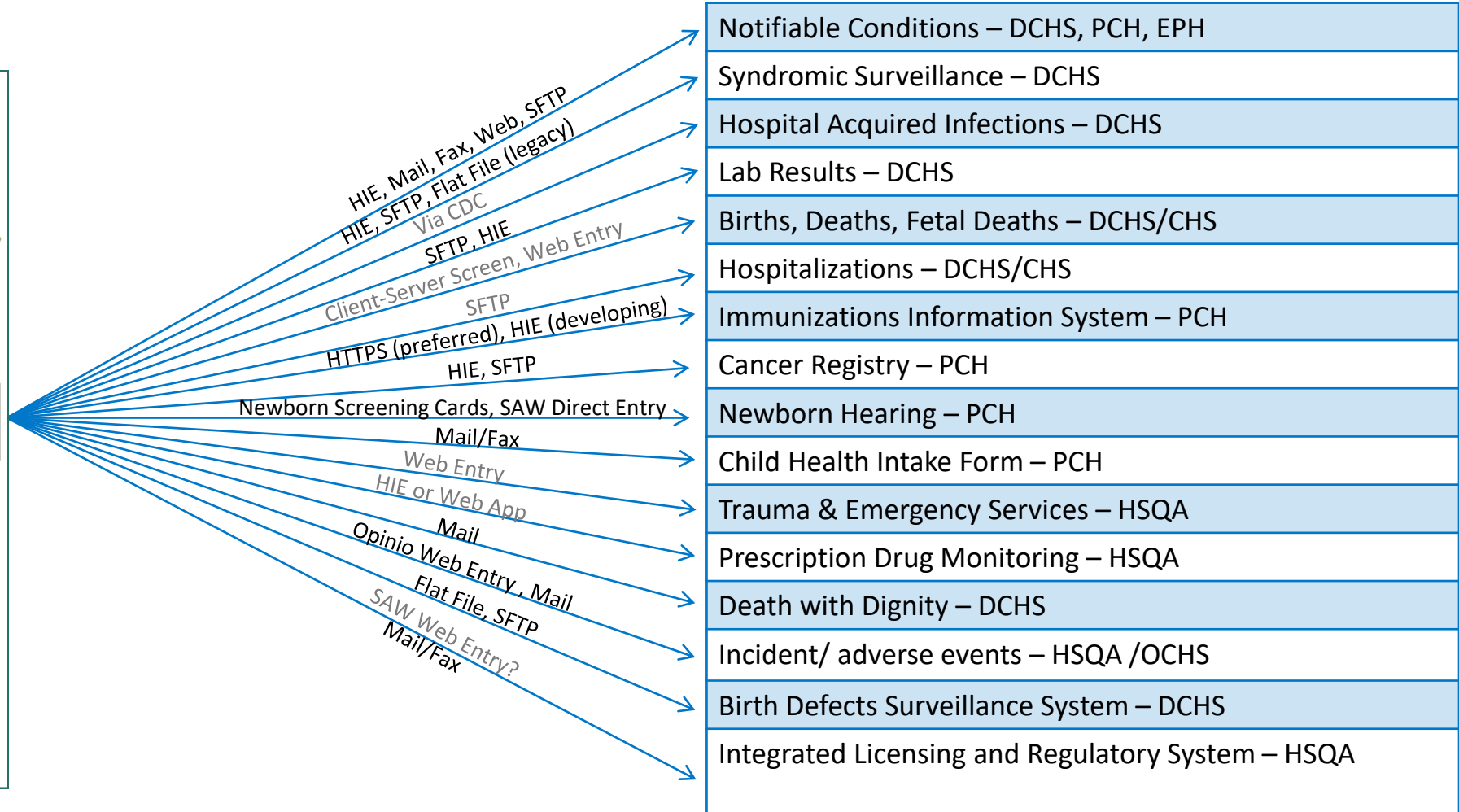
Data Stream Planning:

- Newborn Screening
- Emergency Medical Services
- Child Developmental Health
- Electronic Case Reporting
- LIMS
- Foundational Public Health Services

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DOH Core Data Capabilities

Parse

Collect

Prepare

Provision

Analyze

Visualize/Share

Healthcare
Labs
Tribes
Local Health Departments
Public

Data routing
Data load

Secure data exchange

- Link
- De-Dup
- Vocab

Core Data Services

Data extract to meet analysis or sharing need

- Processed
- Data Extract
- Open Data

Routine or question driven data analysis

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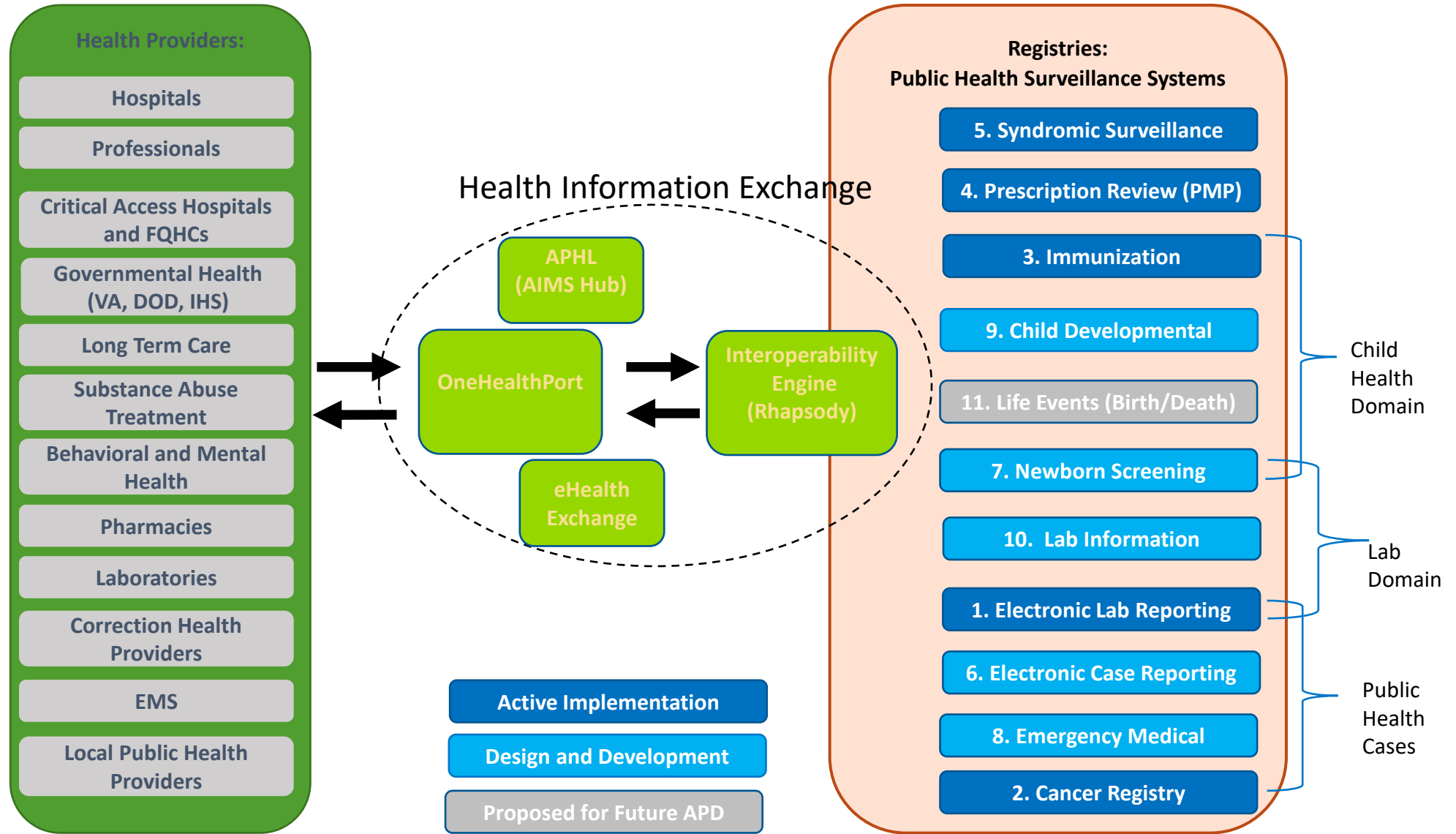
Healthcare Providers Perspective (SILOS)

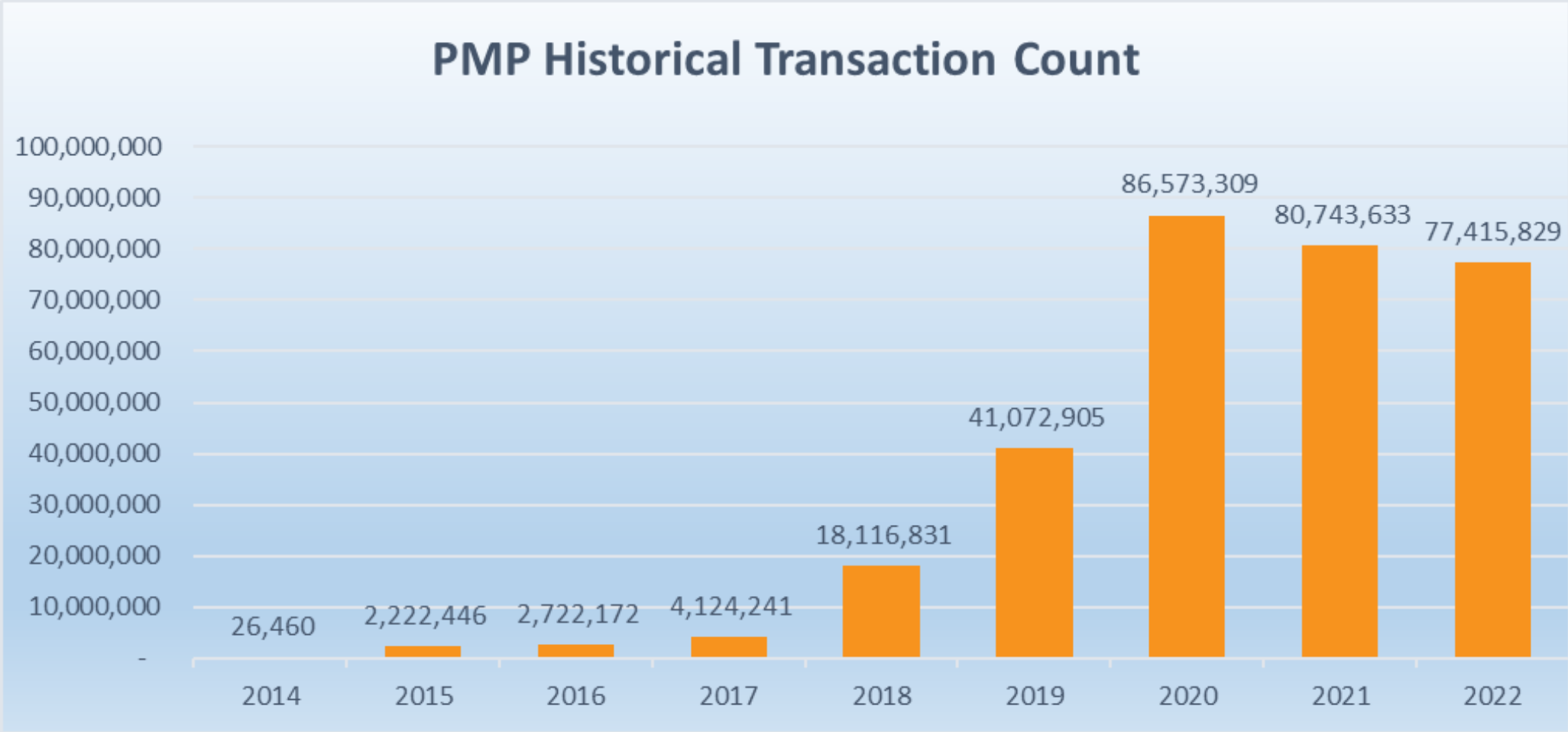# Interoperability Diagram

HIE Use: Benefits to Clinical Partners

- Charges a single flat annual fee

- HIE fees provide unlimited messaging for required public health reporting and any other trading done

- Many health systems have an agreement with OneHealthPort and already pay the annual fee. There are no setup or per transaction fees

- Connecting to a single HIE for multiple registries reduces implementation and operations costs

- Enables clinical partners to meet PI under federal CMS incentive program

- Ensures clinical partners do not have to build new connections

  ▶ E.g. If the state changes a vendor for one of our registries

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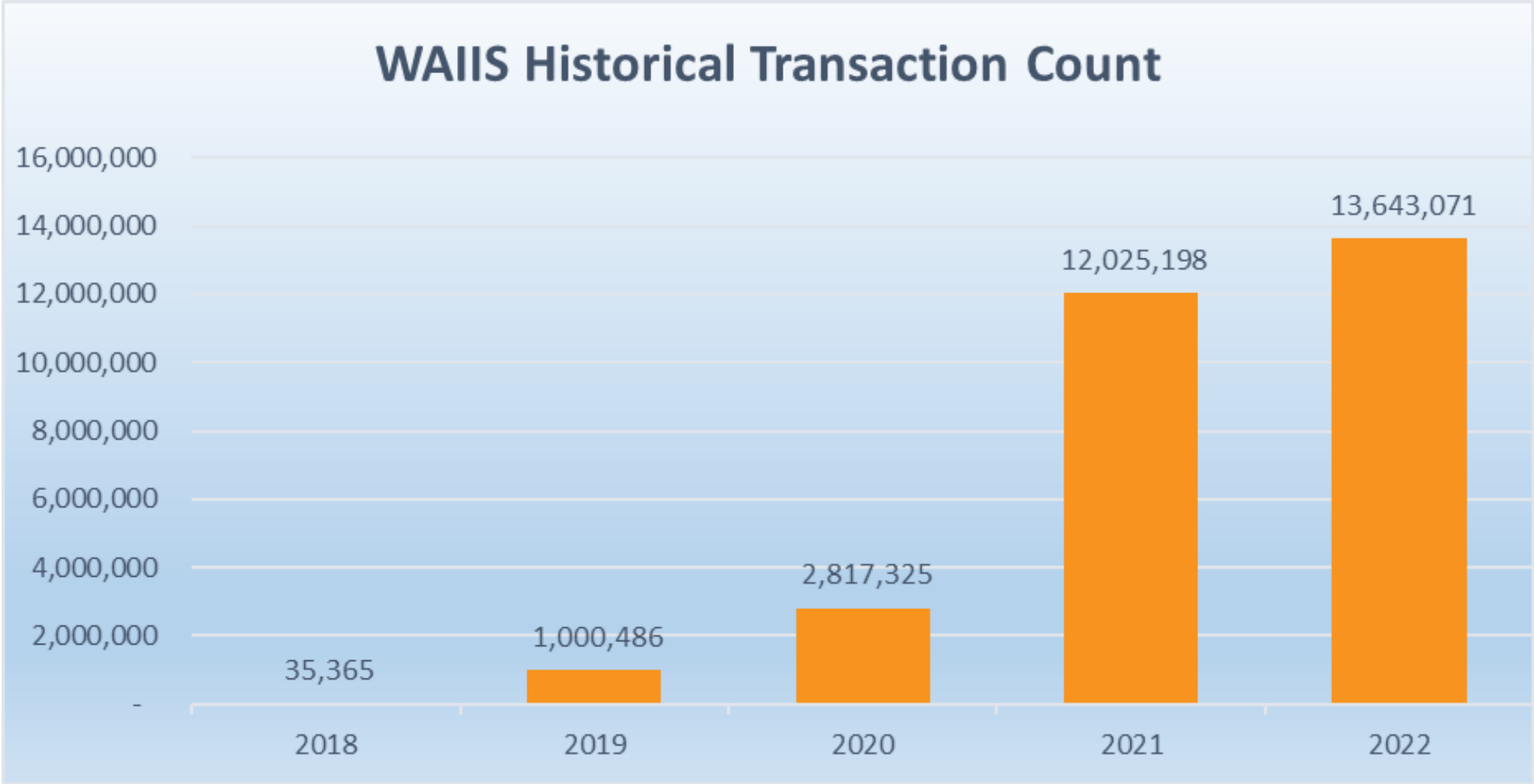Health Care Authority

HIE Use: Benefits to State Agencies

- Technology Reuse - Meets State Technology Policies

- Supports the overall State Health IT Plan

- DOH and clinical partners maintain the data exchange capability in a single entity; an economy of scale

- DOH and clinical partners sign onto the same memorandum of understanding (one agreement for all data types)

- Use of an HIE for all registries provides state and clinical partners system flexibility

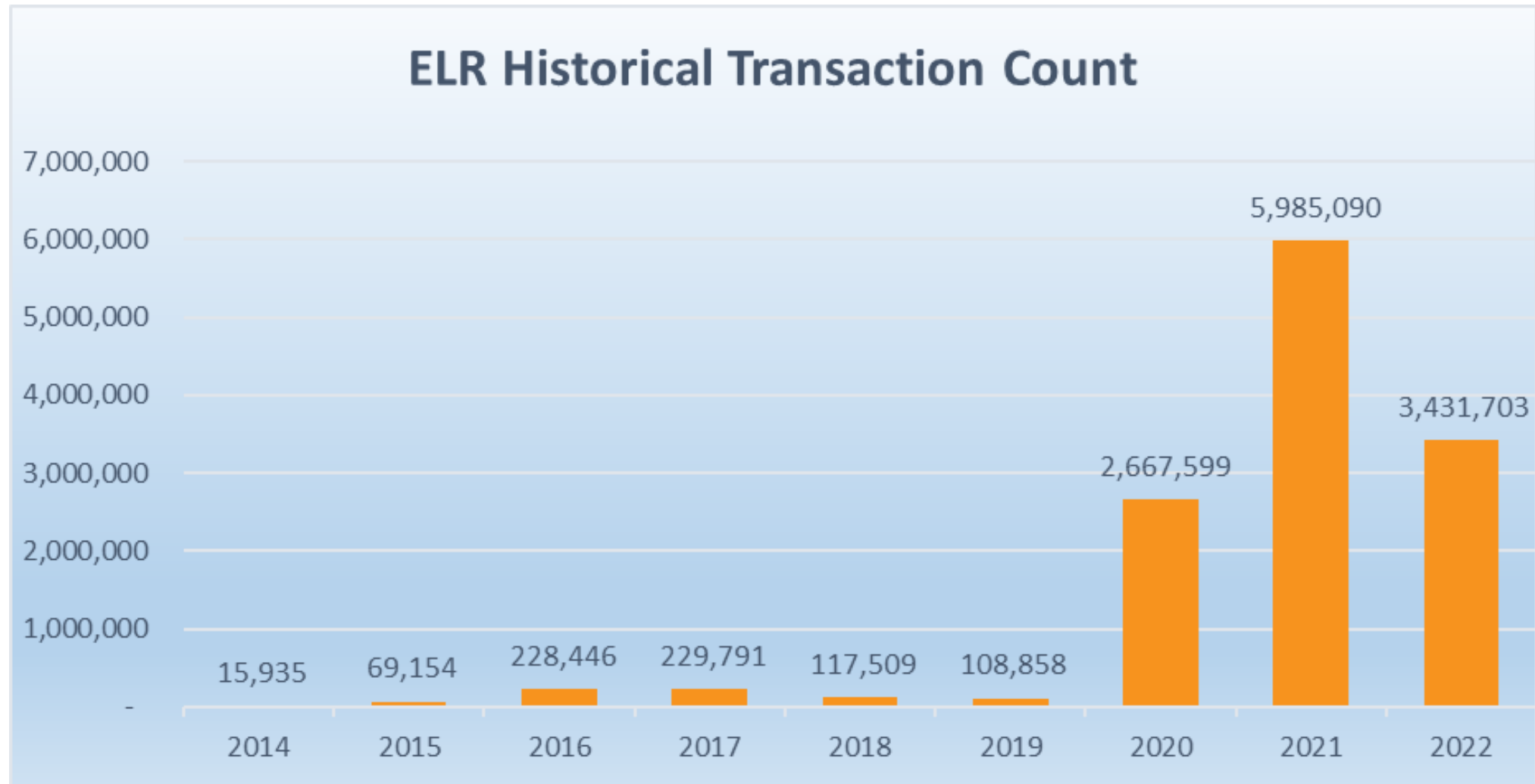 ▶ As new registries are created and old ones change their capabilities

HIE and the WA State Public Health Data Streams

PMP Historical Transaction Count

HIE and the WA State Public Health Data Streams

WAIIS Historical Transaction Count

HIE and the WA State Public Health Data Streams

ELR Historical Transaction Count

Year	Count
2014	15,935
2015	69,154
2016	228,446
2017	229,791
2018	117,509
2019	108,858
2020	2,667,599
2021	5,985,090
2022	3,431,703

ELR transaction increases in 2020-2021 were due to the COVID pandemic. Transaction increases in late 2022 were due to migration to API connectivity and single transaction submissions. The Electronic Laboratory Flat File (ELFF) was also discontinued and customers transitioned to use of ELR submissions.

HIE and the WA State Public Health Data Streams

Syndromic Surveillance Historical Transaction Count

Year	Count
2014	431,962
2015	1,427,837
2016	972,825
2017	1,700,928
2018	1,279,980
2019	2,221,761
2020	4,872,887
2021	6,796,777
2022	22,429,000
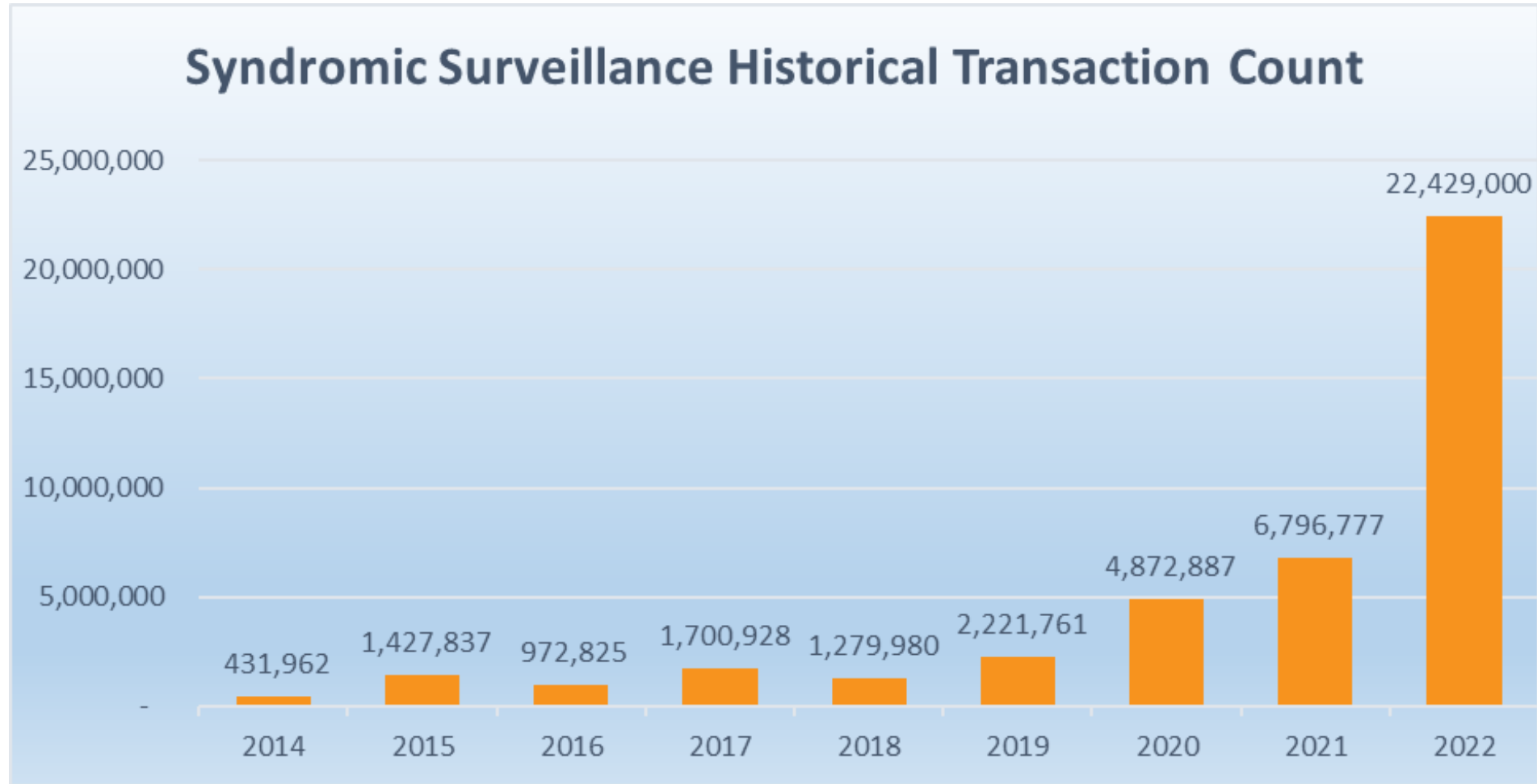
Syndromic Surveillance transaction increases in 2020-2021 were due to the COVID pandemic. The transaction increase in 2022 was due to single transaction submissions using API connectivity. In prior years, hourly batch submissions were commonly used.

Questions?

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