



KeyHIE Update

Spring 2019



Thankfully, Spring is officially here! Pennsylvania seems to be warming up nicely as the days get longer. We are planning for our next **Sprint 38** release, which will occur on Tuesday, April 30th. Expected downtime will occur from 6:00pm 4/30 until 1:00am on 5/1. Here's what is included in this issue:

- [KeyHIE User Group Conference 2019](#)
- [New KeyHIE Participants](#)

- [Journal Article from the American Pharmaceutical Association](#)
- [KeyHIE Success Story](#)
- [21st Century Cures Act Update](#)



2019 KeyHIE User Group Meeting

The 2019 KeyHIE User Group Meeting is almost here! Please plan to attend this year's conference on Wednesday, April 10th from 9:30am until 4pm at the Pine Barn Inn in Danville, PA. If you are planning to attend, please RSVP by sending an email to KeyHIEAdmin@KeyHIE.org We look forward to seeing you there!

Welcome New KeyHIE Participants!

- Buffalo Valley Lutheran Village
- Centre Volunteers in Medici
 - Cumberland Crossings
 - Landmark Health
 - Ohesson Manor
- Rogan Family Medicine

- Valley ENT

KeyHIE in the News



Featuring Kim Chaundy, Senior Director of KeyHIE, the Journal of the American Pharmacists Association has reached final publication of its article showcasing the impact KeyHIE can have on patient care. The study focused on the utilization of coordinated pharmaceutical care, facilitated by communication through KeyHIE. That coordination of care demonstrated overall reductions in 30-day re-admissions, lower patient mortality, and a significant increase in Return on Investment (ROI) based on the patients affected. Please click [here](#) to check out the article.



KeyHIE Success Story - Family Practice Center

KeyHIE continues to leverage its expertise to improve the way in which Patients receive care. Recently, KeyHIE began delivering reports for Family Practice Center, which allow immediate follow-up on time-sensitive items such as ER visits, nursing home admissions, and hospital discharges. According to Selina Spade, Operations Manager for FPC, "Family Practice Center is taking great strides in keeping patients from being readmitted by following up with

them shortly after discharge to ensure they are following through with discharge instructions, starting or stopping medications as instructed, or scheduling them for a follow-up assessment."

"Recently, KeyHIE created a daily report that is e-mailed to us that showing FPC patients seen by every facility that provides discharge data to KeyHIE, including some that come through the PA Patient & Provider Network (P3N). We know who the patient was, what facility they were discharged from, when they were discharged, and for some facilities, what diagnoses they had. The information is pulled from KeyHIE, so we receive it in a much more timely manner than having to wait for performing providers to complete their documentation. It is proving to be a great tool to keep us from missing our patients being discharged, and allowing us to follow up with them. We chose the report vs. the alerts at this time, so we can look at each chart individually. If we already know about the discharge, then we move on and do not bombard the office with duplicate information. But if we see the patient on the report and no evidence in the chart that the office is aware the patient was discharged, then we can alert the office and a follow-up process can start."

KeyHIE is able to provide this enhanced functionality for all participating organizations as part of our standard service offering. If you feel that a similar report would benefit your particular practice or facility, please feel free to contact us at 570-214-9438 or KeyHIEAdmin@KeyHIE.org to request further information.



21st Century Cures Act

Proposed Rule Update

On March 4, 2019, the United States Department of Health and Human Services and Centers for Medicare & Medicaid Services published their Proposed Rules based on the 21st Century Cures Act and Executive Order 13813. The new proposed rule aims to advance interoperability and improve patient access to health information, as well as to increase the portability of their information regardless of care setting. This would apply to those patients changing health plans or transitioning from standard health plans to Medicare. HHS looks to continue with the MyHealthEData initiative, and include an open application programming interface (API) for health insurance payers, which will allow third-party software to interface with applications allowing patient access to their PHI.

The current proposed rule is a continuation of previous efforts to encourage electronic interchange of PHI through the Promoting Interoperability Programs. The five identified barriers to interoperability are Patient Identifier, Standardization, Information Blocking, Adoption of Certified Health IT, and Privacy Concerns. A major focus going forward will be open Application Programming Interfaces (APIs) that would allow patients to access ePHI including claims data and coverage information. The goal appears to be the advancement of a competitive marketplace that would allow patients to use the secure application of their choice to access their own PHI, regardless of provider or health plan. An open period for comments will be held until May 3rd, 2019 so we expect more details to be forthcoming after that.



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