

## C.8 Kentucky Health Information Exchange (KHIE) and Electronic Health Records

### REQUIREMENT: RFP Section 60.7.C.8

8. Kentucky Health Information Exchange (KHIE) and Electronic Health Records (Section 17 Kentucky Health Information Exchange, Section 18 Electronic Health Records)

- a. Describe strategies and incentives the Vendor will implement to encourage provider adoption and use of electronic health records that result in improvements in the quality of care for Enrollees and cost of health care services.
- b. Describe strategies for requiring participants to establish connectivity to the Kentucky Health Information Exchange (KHIE) for a minimum of:
  - i. Providers: applicable public health reporting
  - ii. Hospitals: applicable public health reporting and Admit Discharge Transfer (ADT's).
- c. Provide a description of initiatives and incentives to encourage adoption of electronic health records and information exchange.

### Molina's provider strategies, incentives, and collaborative partnerships with the Kentucky Health Information Exchange (KHIE) and other MCOs will encourage adoption and use of electronic health records (EHRs) and connection to KHIE.

Molina understands the importance of exchanging meaningful clinical data across the continuum of care, including ensuring access to the right information, at the right time for providers and care team, Enrollees, and all other stakeholders. A health information exchange (HIE) is central to facilitating the information flow by improving efficiency and reliability. It can eliminate and reduce unnecessary costs and paperwork and provide Enrollees, caregivers, and the provider community enhanced clinical decision support tools. The benefits are far reaching—from improving quality and safety to reducing medication misuse and medical errors.

Molina fully supports KHIE's mission to offer a comprehensive patient health record that improves care and care coordination, reduces unnecessary costs, and avoids redundant services to improve overall health outcomes for Kentucky residents. Given the Commonwealth's investment in KHIE and transition to a new system in 2019, we understand how critically important it is for Kentucky to find the right MCO partners.

Our parent company brings extensive experience partnering with states on using EHRs and HIEs, and we believe in the compelling value these systems offer to our network providers, MCOs, and the Commonwealth, including improved Enrollee care and cost savings to the system. Molina will use Epic Community Connect to extend EHR systems to our network providers in Kentucky. The Community Connect system promotes a community record for Molina and will offer our network providers access to an industry leading EHR system at a significantly reduced cost. To increase participation, especially among rural providers, **Molina will incentivize providers not currently on an EHR to connect to the Epic Community Connect EHR platform by paying 80% of their ongoing maintenance fees, if they agree to meet quality performance metrics.**



Additionally, we will leverage the successful experience our affiliated Medicaid health plans have with HIEs. For example, our affiliated health plan in Mississippi is a leading participant and key design contributor to the state's HIE, partnering with the state on a virtual, real-time exchange that helps the state gain insight into how therapies affect health outcomes and the cost of care. This multifaceted collaboration spans topics ranging from real-time messaging to use-case dialogues and focuses on building a comprehensive, value-based, and standardized data set accessible to all MCOs and the provider community. Similar to our approach in Mississippi, **Molina welcomes**

### Encouraging EHR and HIE

- Proven collaboration with state partners, HIEs, providers, and other MCOs
- Proactive solutions to address technological and financial barriers providers may face
- Experience with incentive programs that reward providers for adopting EHR systems and connecting to HIEs


**opportunities to collaborate in Kentucky, such as partnering with the Commonwealth, University of Kentucky, University of Louisville, Kentucky Primary Care Association, and other key providers across the Commonwealth, in community-based forums surrounding data sharing.**

Our overall strategy and proposed approaches will comply with all requirements in Attachment C, Draft Medicaid Managed Care Contract and Appendices, Section 17, Office of Health Data and Analytics and Section 18, Electronic Health Records.

## **a. STRATEGIES AND INCENTIVES TO ENCOURAGE EHR ADOPTION AND USE**

Provider adoption and appropriate use of EHR is critical for improving patient care, reducing healthcare costs, and improving continuity of care across the healthcare continuum. **We understand and fully support the role KHIE has already established in driving EHR adoption and use throughout Kentucky by providing meaningful use public health reporting measures to those who participate.** Based on 2017 data from the Office of the National Coordinator for Health IT, Kentucky's EHR adoption rate is on par with the national average and provides an excellent opportunity for Molina to assist and improve adoption.

Molina is deeply committed to encouraging the adoption and use of EHRs to improve the quality of care and to reduce costs. Exhibit C.8-1 summarizes our multifaceted approach.

	<b>Encouraging EHR</b> <ul style="list-style-type: none"><li>• Provide web-based technology supports</li><li>• Provide payment of ongoing maintenance fees</li><li>• Educate providers on EHR incentive programs and value of connecting to KHIE</li><li>• Encourage adoption through VBP programs</li><li>• Monitor progress</li><li>• Identify and address barriers</li></ul>	<b>Benefits of EHR</b> <ul style="list-style-type: none"><li>• Expediency and accessibility</li><li>• Preventive and chronic care management</li><li>• Improved Enrollee health outcomes</li><li>• Widespread interoperability</li><li>• Improved communication</li><li>• Fewer medical records requests for quality improvement and utilization management</li></ul>
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### **Exhibit C.8-1. Encouraging Providers to Use EHRs**

Our strategy maximizes impact through a combination of collaboration, education, and incentives to encourage adoption and use of EHRs through the following elements:

- First, we propose **establishing an MCO KHIE workgroup** to collaborate on strategies and to share best practices and lessons learned, and Molina will readily spearhead this effort. We have led such collaborative efforts in other state Medicaid markets. We have found that coordinated efforts with our partner MCOs to drive utilization of HIE data with providers and hospital systems significantly improves data sharing and leads to improved health outcomes and reduced costs, especially for Enrollees with chronic and complex conditions and special healthcare needs.
- Second, **we will establish partnerships with KHIE and local and regional hospital systems to outreach to and educate providers about EHR adoption.** Using community and educational engagement activities, we will present a value proposition outlining the clear benefits EHRs have within provider practices and how connecting to KHIE and sharing information will help them improve care for the patients they serve. With an EHR, providers can perform rich data mining to identify care gaps and focus on health issues pertinent to Kentuckians, helping to manage and ultimately improve health outcomes.
- Third, we will **educate all network providers on the benefits of EHR and available incentive programs**, such as the Medicaid EHR Incentive Program and new Provider Assistance Program. We will educate providers about the benefits of EHRs and connecting to KHIE and how the ability to

access and retrieve patient medical information promptly helps them make more informed clinical decisions at the point of care, leading to improved health outcomes and efficiency. We will also explain how providers can use KHIE's Health Information Service Provider and Direct Secure Messaging (DSM) to communicate relevant patient health information at the point of care in a secure and encrypted manner. We will tap into existing resources to maximize impact and reach. For example, we will provide education and support at our community-based Molina One-Stop Help Centers and invite KHIE Regional Extension Center staff and KHIE Outreach Coordinators to visit and present on EHR adoption and KHIE. Molina will comply with data requests from the Department to assist in verifying providers are meeting requirements for the EHR Incentive Payment Program. We will also invite providers to join our network who have received EHR incentive funds and meet the terms and conditions for participation in Molina's network.

- Fourth, ***we will provide financial incentives to providers and we will use value-based pay-for-performance tools and educate providers about how the EHR better positions them to earn financial rewards in more complex and rewarding value-based contracts.*** Our value-based contracting methodologies will encourage providers to identify and resolve gaps in care, which is best accomplished when providers adopt and make optimal use of an EHR. We recognize EHR implementation and maintenance costs can be prohibitive for providers, often running into the hundreds of thousands of dollars. To increase participation, ***Molina will incentivize providers not currently on an EHR to connect to the Epic Community Connect EHR platform by paying 80% of their ongoing maintenance fees, if they agree to meet quality performance metrics.*** This provides an affordable mechanism to simplify access to an EHR system, better visibility into patient care, and allows clinical data to be integrated into a single secure database for providers to access and share clinical information across care settings. The Epic EHR platform is HIPAA-compliant and has been certified by the Certification Commission for Health Information Technology, an Office of the National Coordinator for Health Information Technology-Authorized Testing and Certification Body, in accordance with criteria adopted by the Secretary of Health and Human Services.
- Finally, we know implementing an EHR can be daunting for some providers. Our Provider Engagement Team will ***assist providers in evaluating their resources and capabilities and provide support*** to successfully implement and use the Epic Community Connect EHR platform. We will provide incremental technological support for providers who are in different stages of readiness to help them identify and remove barriers to EHR adoption. We will work to understand the barriers providers face when moving to electronic functionality by conducting an evaluation of in-house tools (e.g., Web portal) and systems (e.g., claims) for those providers who cannot yet adopt EHR.

We will continually monitor provider adoption of EHRs and adjust our strategies and incentives, as indicated, to maximize EHR adoption.

## **b. STRATEGIES TO REQUIRE KHIE CONNECTIVITY BY PARTICIPANTS**

Molina recognizes and supports the important role that meaningful clinical data exchange plays across the continuum of care. We applaud the Commonwealth's mission to drive KHIE connectivity, with more than 100 hospitals and approximately 2,500 ambulatory care sites currently connected through KHIE.

### **b.i. PROVIDER ADOPTION AND CONNECTIVITY TO KHIE**

We will employ measures to promote establishment of connectivity to KHIE, use of DSM, and hospital submission of admission, discharge, transfer (ADT) messages to KHIE. We will do this through:

- **Provider Agreements.** Our written provider agreements require providers to participate in and comply with KHIE, including submitting data to KHIE in accordance with Kentucky laws and Medicaid requirements. During initial contracting with new providers, our Provider Contracting team will query them on existing EHR systems, use of DSM if they do not have EHRs, and connection to

KHIE. We will log their responses in our system to track, report, and monitor activity. Within one month of contracting with Molina, our locally based provider services representatives will generate a report to identify newly contracted providers who had not yet connected to KHIE. They will contact the provider by telephone or in person to confirm they signed a KHIE Participation Agreement and are successfully submitting data to KHIE. For providers who do not have an EHR system, our provider services representatives will confirm they signed up for DSM and are successfully using it to share pertinent patient health information. If the provider is not in compliance with connectivity requirements, we will develop a KHIE compliance action plan in partnership with the provider, reiterate the administrative and financial support that Molina offers, and reinforce the availability state incentive programs.

- **Provider Outreach and Education.** Our dedicated Provider Engagement team and community-based provider services representative will educate providers on the benefits of EHR and encourage them to adopt EHR, connect to the KHIE, and use DSM. We will partner with existing resources, such as provider associations (e.g., the Kentucky Primary Care Association) and KHIE Outreach Coordinators, to promote EHR adoption and KHIE connectivity and to ensure consistent messaging. We understand KHIE acts as a data intermediary in Kentucky for providers to report to the Kentucky immunization and cancer registries, syndromic surveillance data, and reportable laboratory results. We will assist providers who have questions or challenges in public health reporting.
- **Provider Website.** Our provider website will include information on KHIE and a link to the KHIE website.
- **Provider Manual and Bulletins/Newsletters.** We will include information on KHIE in our Provider Manual and provider bulletins/newsletters, including the benefits to the provider and the patients they care for. Through our partnership with KHIE, we will leverage their existing materials to ensure accurate and consistent messaging. We will also include information on KHIE's Regional Extension Centers, KHIE Outreach Coordinators, and links to the KHIE website in our materials.

## **b.ii. HOSPITAL CONNECTIVITY TO KHIE**

Our written hospital agreements require providers to participate in and comply with KHIE, including submitting data to KHIE in accordance with Kentucky laws and Medicaid requirements. During quarterly Joint Operational Committee meetings with Kentucky health systems and hospital providers, we will emphasize the value of ADT messages and how it can improve the health of Kentuckians and reduce healthcare costs. We will encourage and educate hospital systems to work with local provider groups and communities on the value of ADT information and how it can positively impact point of care.

Molina will also offer a pay-for-performance incentive for hospital partners to submit/use standardized KHIE-defined data in the KHIE system.

## **PARTNERING WITH KHIE TO DRIVE IMPROVEMENTS**

We have spent time in Kentucky learning about KHIE and meeting one-on-one with the deputy executive director. We understand a key challenge for KHIE, which aligns with challenges HIE systems face across the nation, is that participating providers often submit disparate, non-standardized quality, claims, and encounters data, negatively impacting an HIE's ability to achieve "meaningful use" and system utilization and efficacy. Molina will bring our experience and success in working with hospitals to submit standardized data sets to provide consistent, meaningful data to drive quality and efficiency.

By supporting a common, secure electronic infrastructure for sharing standardized KHIE-defined health information, we look forward to an active partnership with KHIE to support patient-centered care, improve care quality and health outcomes, reduce medical errors, and make efficient use of healthcare funding. Likewise, we believe that, by strengthening local-level data contributions through the engagement of community and regional data exchange platforms, we can impact and improve the health of all Kentucky residents.

## Experience

Using the Meaningful Use Stage 2 Consolidated Clinical Document Architecture (C-CDA), as defined by Health Level Seven (HL7) standards, our parent company currently sends clinical summaries and consolidated clinical documents to many state HIE organizations. Most of our 14 affiliated health plans collaborate with state HIE organizations. Most recently, our parent company collaborated with the state of Mississippi to help them define their HIE technology and data exchanges. For partners who are prepared to adopt the Fast Healthcare Interoperability Resources standard, we are exploring leading-edge technology to support the next generation of HIEs.

Given the years of experience our parent company and affiliated health plans have in partnering with states, providers, and other MCOs on HIEs across the country, we bring to the Commonwealth the knowledge and best practices gleaned from trial and error, numerous partnerships, and many lessons learned. This experience and insight has taught us that building a successful HIE is not in *requiring* hospitals and providers to connect, but in *giving them good reasons* to do so. In other words, an HIE must serve their needs so they can better meet the healthcare needs of their patients, raise their quality scores, and as mentioned above for EHR, help them ultimately succeed by meeting or exceeding the compensation goals set out for them in a world of value-based contracts.

## Leadership

Molina fully supports KHIE in establishing a compelling value proposition with hospitals and providers. We bring technical, analytical, and clinical resources to KHIE and will lead a community-oriented approach that brings providers, hospitals, and other stakeholders together to help KHIE achieve its fullest potential as a driver of quality care and better overall health in the Commonwealth.

## Practical Solutions

We are already delving into the challenges faced by the Commonwealth and have been listening to Kentucky Medicaid stakeholders. We understand that sharing health information electronically is only one part of the equation to giving hospitals and providers what they need to encourage participation and help them succeed. ***It is not the quantity of data that is important to providers, but rather the quality, relevancy, and transparency of the data that makes an impact.***

KHIE faces the challenge of sharing consistent, standardized data elements that have been defined with a clear purpose to drive provider and hospital performance and promote the wellbeing of Kentucky Medicaid Enrollees.

In support of that objective, Molina will arrange, as part of our value-based contracting efforts with providers and hospitals, incentives for standardizing data sharing with KHIE. For hospitals, that would include ADT information to foster improved quality of care for Enrollees by enabling better management of transitions of care.

For both providers and hospitals, the other applicable public health reporting data elements we recommend should be included, at a minimum, are:

- Demographic information
- Lab results
- Radiology
- Transcripts
- Current medication allergy list
- Encounter diagnosis
- Referring or transitioning provider's contact information

### Our affiliated health plans have implemented HIE supports for:

- ADT (Admit Discharge Transfer)
- Lab ORU (Observation Results Unsolicited)
- CCD exchange using IHE standards (XDR, XDS.b Transactions)
- Clinical Data Repository (CDR)
- ORM (Order Messaging)
- MDM (Medical Document Management)
- SIU (Scheduling Information unsolicited)

- Pathology
- Immunizations
- Current problem list
- Current medication list
- Procedures
- Discharge instructions (eligible hospitals and Critical Access Hospitals only)

Because no HIE can achieve its potential without robust provider network participation, Molina's long tradition of provider partnerships and engagement can be a key driver of KHIE's success. We know that providers, particularly primary care providers, view programs that improve data sharing and data aggregation as investments worth making in a healthcare environment where they are held accountable for care and quality.

We have recently begun implementation of 3M proprietary methodologies that:

- Help us develop smarter value-based payment incentives aligned with provider needs and care objectives
- Enable us to provide robust performance data and dashboards via our provider portal, which allows providers to identify gaps in care and to correlate outcome improvements based on their care plans

Additionally, we are further enhancing our provider portal capabilities to increase provider data access and digital adoption.

### C. INITIATIVES AND INCENTIVES TO ENCOURAGE EHR ADOPTION AND INFORMATION EXCHANGE

Molina and our parent company are committed to partnering with the Commonwealth on its EHR/HIE journey and recognize that there is no one-size-fits-all solution to drive EHR and HIE connectivity and use. That is why we use the nuanced strategies and multifaceted approaches we have outlined within this section (subsections a. and b.). Our initiatives and incentives to encourage adoption of EHR and information exchange include:

- **Making technology available for providers to harness.** Recognizing the cost for providers to connect to electronic data systems can be prohibitive, Molina will incentivize providers not currently on an EHR to connect to the Epic Community Connect EHR platform by paying 80% of their ongoing maintenance fees, if they agree to meet quality performance metrics. This will provide a cost-affordable mechanism to simplify access to EHR, provide better visibility into patient care, and allow for clinical data to be integrated into a single, secure database that allows providers to access and share clinical information across care settings. We also offer a robust provider portal solution that enables providers to take advantage of our technology to use and share data electronically.
- **Providing technological support to providers.** We will assist providers in evaluating their resources and capabilities and provide support to successfully implement and use the Epic Community Connect EHR platform. As providers will be in varying degrees of readiness, we will provide incremental technological support to help them identify and remove barriers to EHR adoption.
- **Offering value-based pay-for-performance tools.** We will educate providers on the benefits of EHR and on the way using the EHR will position them to take full advantage of value-based contracts that provide incentives for meeting program goals. Our value-based contracting methodologies will encourage providers to identify and resolve gaps in care, which is best accomplished when providers make optimal use of an EHR. Providers can also be directly incentivized for their EHR capabilities.
- **Providing education, outreach, and support.** We will establish partnerships with KHIE and local and regional hospital systems to educate providers about the benefits of EHR and HIE adoption. Our dedicated Provider Engagement team will encourage providers to adopt EHRs and connect to KHIE. This cross-functional team helps our provider partners improve the quality of care for Enrollees and

reduce the cost of healthcare services, while meeting their performance goals for provider incentive payments. In-the-field, our community-based provider services representatives will explain the benefits of EHR technology and connecting to KHIE through daily meetings with providers. Our Provider Engagement team and provider services representatives will educate our providers about how they can use data mining to identify Enrollee care gaps or focus on health issues pertinent to Enrollees. We will also explain available incentive programs and how using electronic data can help them achieve financial rewards through Molina's incentive programs.

- **Engaging community-based support and resources.** Molina's One-Stop Help Centers across the Commonwealth will offer the full complement of provider services as well as access to our Provider Services and the Provider Engagement staff for support in meeting quality goals for incentive payments, assistance with EHRs, connecting to KHIE, and more. As part of our collaborative approach, we will invite KHIE Regional Extension Center staff and KHIE Outreach Coordinators to visit and make presentations to facilitate EHR adoption, support achievement of meaningful use, assist with completing applications for incentive funds, and encourage connectivity to KHIE.
- **Establishing collaborating partnerships.** We will reach out to Medicaid MCOs to coordinate efforts. We propose establishing an MCO KHIE Workgroup to share best practices and collaborate on ways to encourage EHR adoption and information exchange. To further our commitment to improve Enrollee outcomes through the exchange of health information, we have partnered with the Kentucky Primary Care Association to be connected to their quality data sharing platform, CHARLI. This partnership will enable us to leverage the power of a connected network with their established Independent Practice Association, community health partners, RHCs, and FQHCs.
- **Partnering with the Kentucky healthcare community to standardize data.** Recognizing that the quality of data counts, we will lead efforts for consistent, standardized data elements that are defined with a clear purpose to drive provider and hospital performance and promote the wellbeing of Kentucky Medicaid Enrollees. We will tie these standardized data elements to provider incentives and propose a menu of data elements, including hospital ADT data, to enable better management of transitions of care.

Working with KHIE, CHARLI, the Commonwealth, and other MCOs will provide rich claims data and HEDIS measures to support gaps in care analysis, data acquisition and aggregation, and clinical reconciliation to have a meaningful impact on reducing costs and improving health outcomes.

## EXCHANGING CLAIMS INFORMATION

Molina strongly supports the sharing of claims data within HIEs and will look to partner with KHIE in this effort to establish an all-payer claims database. This will provide meaningful and transparent data sharing and offer a comprehensive clinical record to provide greater insight into healthcare costs and support population health and analytics-driven healthcare decision-making.

As pioneering experts in Medicaid managed care—and specialists in government-funded healthcare programs—we incorporate all the above in a user-friendly approach, driven by our Provider Services team and supplemented by technical, analytical, and clinical staff, each of whom aims to avoid provider pain points, so we can get to the good work of improving health outcomes.

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