Southwest Network: Integrating HIE Services Into a Large Behavioral Health Network

Avoiding a patient blood draw and a duplicate lab test because your organization is connected to the Health Current portal is a good thing. If it means avoiding blood draws for your population of seriously mentally ill (SMI) patients, the connection means much more.

When Southwest Network was first connected to Health Current, one of the most immediate benefits was the ability to check for lab work on SMI patients and avoid a blood draw if labs had already been done, according to Danielle Griffith, Corporate Compliance Director for Southwest Network. Being able to view previous lab results and see what medications had already been prescribed for their SMI patients was enough for Southwest Network to be "sold" on participation in the HIE; however, they wanted to find the best ways to take advantage of the connection to Health Current.

Southwest Network, a nonprofit charitable organization, has served emotionally disturbed children and SMI adults in Maricopa County since 1999. Services for children and adolescents are provided from three regional offices and at five Arizona Department of Child Safety offices. Services for adults are provided at seven outpatient clinics, including two integrated health homes that offer primary care services in coordination with behavioral health services. Read more.
Registration has been very strong for the Statewide User Group Meeting. Be sure that your organization is represented at the initial meeting, which is limited to Health Current participants only.

**When:** Tuesday, April 3, 2018  
**Time:** 10:00 a.m. - 3:30 p.m.  
**Where:** Virginia G. Piper Auditorium, UA College of Medicine, Phoenix  
600 E. Van Buren Street, Phoenix, Arizona 85004  
**Parking Map:** [Click Here]  
**Register:** [Click Here]

Many Health Current participants are familiar with the idea of a "user group" and have met with others who use the same electronic health record (EHR) system at that vendor's user group meeting. Health Current is organizing a similar type of user group for all Health Current participants, aimed at improving the use and value of the HIE. We will have an initial statewide kick-off meeting of the Health Current Statewide User Group on April 3, 2018 at the Virginia G. Piper Auditorium in downtown Phoenix.

Additional regional HIE User Group meetings are planned later in the year, however, we encourage attendance at this initial meeting to help us formulate the agenda, structure and schedule for these regional meetings.

**Who Should Attend?**  
Executives, managers and supervisors of Health Current participants should attend the initial meeting, and other users may attend subsequent regional meetings.

**Benefits of attending this inaugural meeting of the HIE User Group:**

- Learn about and share HIE use cases and best practices;
- Review how to access more complete and integrated patient information;
- Provide your input and feedback on how to improve and enhance services; and
- Learn how to navigate the requirements of Part 2 consent (consent to access information governed by 42 CFR Part 2 relating to treatment for substance and drug abuse)

**Space is limited**

[REGISTER NOW!]
Reminder: Complete the Provider Only Section of Patient Rights Forms

When Health Current participants provide their patients the Notice of Health Information Practices, that Notice informs patients of their right to opt out or opt back in to the HIE or to request to see their information. These patient decisions are recorded on the following forms that all include a Provider Office Only section:

- Opt Out Form
- Opt Back In Form
- Health Information Request Form

The Provider Office Only section of these forms must be completed. Without this section completed, Health Current is not able to identify the practice and the patient who has made the decision and properly process the patient decision or request. These forms are now available as fillable PDFs so that multiple copies of these forms can be printed with the Provider Office Only sections completed. To obtain copies of these forms as fillable PDFs, contact your account manager. Please send completed forms via these secure fax numbers: (602) 324-5596 or (520) 300-8364. If you do not know who your account manager is, please email HIEsupport@healthcurrent.org

TEFCA: A National Framework and Common Agreement for Interoperability

In January, the Office of the National Coordinator for Health Information Technology (ONC) provided a proposed Trusted Exchange Framework and Common Agreement (TEFCA) for public review and comment. Responses and comments were due by February 20, 2018, and Health Current along with many organizations, associations and HIEs provided responses and comments. The following questions and answers describe what is proposed by ONC along with potential benefits and areas of concern, according to Health Current.

What is TEFCA?

TEFCA (Trusted Exchange Framework and Common Agreement) is a proposal from ONC that aims to increase and enhance interoperability and improve the ability of providers and
their patients to securely access and use data from different sources. TEFCA includes two parts: a Draft Trusted Exchange Framework and a Draft Common Agreement. Read more.

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**Save the Date: Health Current Summit & Trade Show**

**11th Annual Health Current Summit & Trade Show**

Please plan to join us this December for the largest Health IT event in Arizona. Over 325 attendees participated in last year's Health Current Summit & Trade Show, which featured presentations, discussions and breakout sessions on how health information, innovative solutions and one-connection technology can achieve the triple aim of improved care, improved outcomes and lower costs. Look for more details coming soon.

**Date:** December 3 - 4, 2018  
**Location:** Renaissance Phoenix/Glendale Hotel & Spa, Glendale, AZ

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**CMS extends eCQM, EHR Incentive Program submission deadlines**

The Centers for Medicare and Medicaid Services has extended the deadline to March 16, 2018 for eligible hospitals and critical access hospitals to submit electronic clinical quality measure data for the Inpatient Quality Reporting program and to attest to Meaningful Use of electronic health records for Calendar Year 2017. The original deadline had been February 28.

"CMS understands that some hospitals and their health information technology (IT) vendors need additional time to submit their eCQM data and attest for Medicare EHR Incentive Program requirements," states the agency's announcement. "This extension is intended to reduce reporting burden and is part of CMS' continued commitment to ensuring successful
According to the agency, this extension applies to the eCQM submission requirement for the Hospital Inpatient Quality Reporting (IQR) program and all attestation submission requirements for the Medicare EHR Incentive Program for eligible hospitals and CAHs. However, all other aspects of eCQM reporting requirements remain the same for 2017 reporting.

Also See: CMS tweaks processes for attesting to EHR meaningful use