Leveraging SPNS Initiatives to Transform Client Level Data Collection into Service and Quality Tools

Washington, DC August 23, 2010





Facilitated by:

Catherine Correa
Jesse Thomas



COMPAS

Today's Agenda

- Problem Statement
- Client Level Data Collection
- Client Level Data Reporting
 - Use of Client Level Data
- Stakeholders and Technology



Where Are We From?



Who Are You?

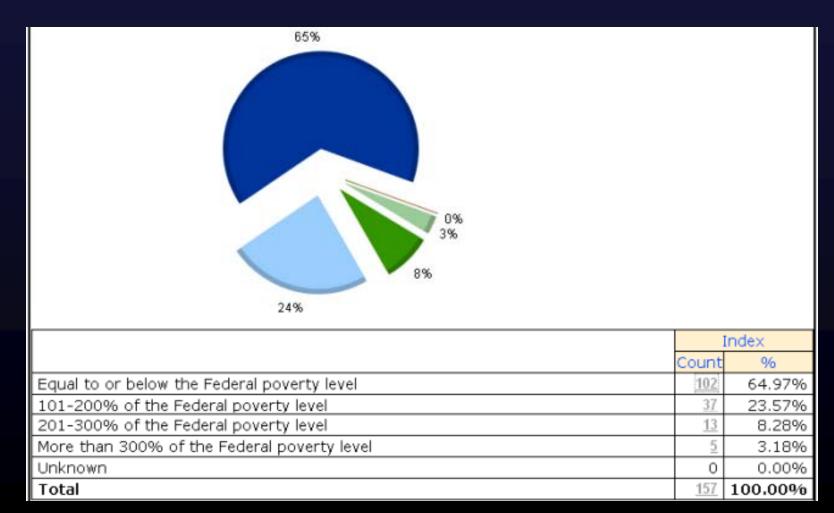
RSR!

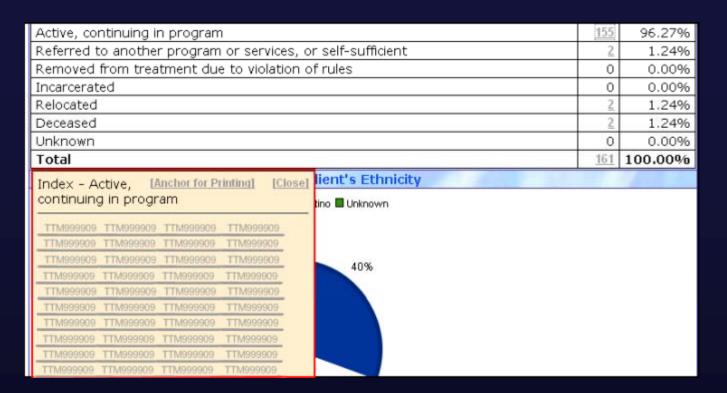
The Challenge and the Opportunity

eCOMPAS (e2) Visual / Clickabkle RSR

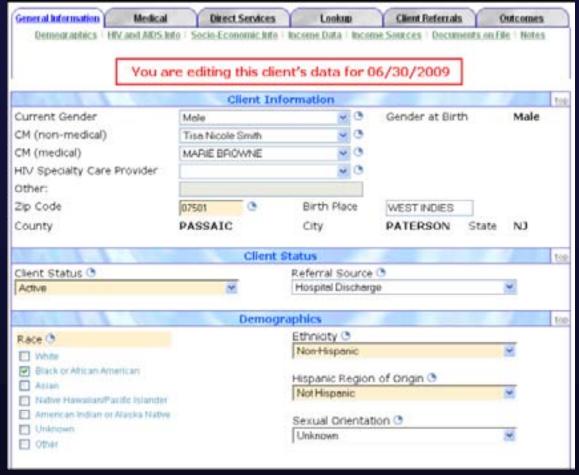
RSR Aggregate Data

Preview of Client Level Data before submission to HRSA





- eCOMPAS provides drilldown capability
- Click on any number to see the client records that comprise that aggregate number.



- ...which allows you to go to any client's record, and update their data accordingly.
- Changes are reflected immediately in the RSR, for the correct reporting time period.
- This is the eCOMPAS Time Machine feature, and allows you to correct past data historically, without creating problems in current data.

 eCOMPAS also offers Data Cleanup Tools, which will check for inconsistent or invalid data, alert you to them, and allow you to correct them.

Cleanup the data

Data Cleanup tool for HIV Status

Data Cleanup tool for Client Race

Data Cleanup tool for Affected-Client Infected ID

Data Cleanup tool for Household Income and Family Size

Clients who received services in the selected reporting period from this agency

Instructions: For each client, review the Family Income and the Family Size fields. If they are correct, click on the "Correct" button. If they are incorrect, enter the correct values and click the "Correct" button.

Your mission is to make sure all records have been corrected or verified such that all records say "Verified" and are yellow (not red or white).

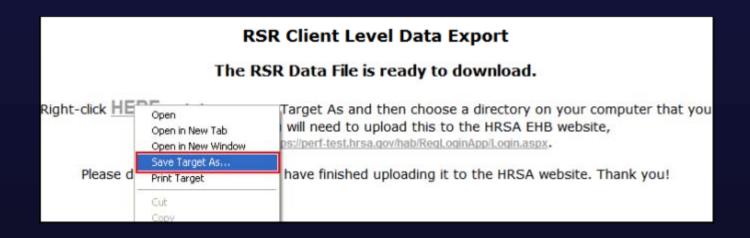
Please note that the system will update the information only for the client for which the "Correct" button was clicked.

Records in red are those in which one of the following issues exist:

- Family Size is zero incorrect, since family size always includes the individual, and thus
 has to be at least one
- Yearly Individual Income greater than Yearly Family Income incorrect, since family income should include the individual's income
- For family size of 1, Yearly Individual Income not equal to Yearly Family Income

| ClientID | Yearly Individual Income | Yearly Family | Income | Family size | Verified |
|-------------------------------------|---------------------------------|----------------------|--------|-------------|----------|
| ZZF123412 | \$0.00 | \$0.00 | | 0 | Correct |
| ZZF435512 | \$0.00 | \$0.00 | | 0 | Correct |
| Total clients: 2, to be reviewed: 2 | | | | | |

 You can even update multiple clients at the same time.



 And uploading the data to the HRSA EHB is real-time and easy.

eCOMPAS RSR

→ The RSR process was transformed from a mandated challenge into a user-friendly, data quality improvement opportunity

and still serves today as a quality improvement tool used by Case Managers.

Cross-Part Collaborative Data

eCOMPAS Supporting Improvement

| | Cross Collaborative Report | | |
|--|--|------------|--|
| | From Date: 11/01/2007 To Date: 10/31/2008 or Select: March 2009 Generate Report | v | |
| - | 96 of Ryan White HIV/AIDS clients with 2 CD4 tests in a year | 142 d july | |
| 2. | Clients eligible for indicator Clients who are in this indicator | 142 (List) | |
| 3 Clients who are not in this indicator. [Close] | | | |
| | Indicator Percentage RFG85782 FFG85782 FFG85782 FFG85782 FFG85782 | 74.696 | |
| 2) | 96 AIDS clients who are prescribed HAART WHF645368 UIG734935 | 123 | |
| 1. | Clients eligible for indicator GEK857147 | 79 (List) | |
| Clients who are in this indicator WHY245167 | | | |
| 3. | Clients who are not in this indcator DIV532546 | 14 (1.081) | |
| | Indicator Percentage | 82.3% | |

 User clicks on the number of clients NOT in the numerator.

2. A list of clients pops up.

 Staff drill-down to each client record and use it as a tool for follow-up.

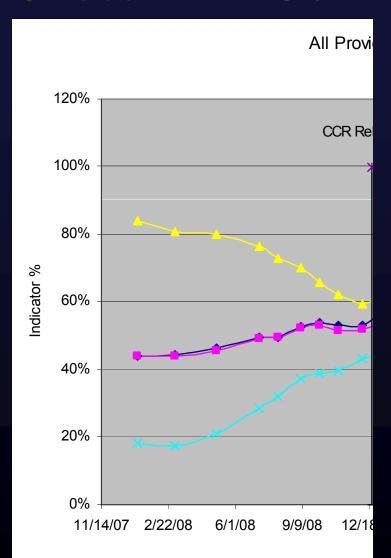
Benchmark Data Feature Added

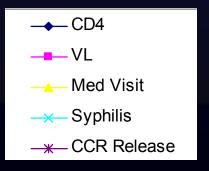
Cross Collaborative Report

From Date: 11/01/2007 To Date: 10/31/2008 or Select: April 2009

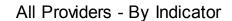
| 1 |) % of Ryan White HIV/AIDS clients with 2 CD4 tests in a year | [2] |
|----|---|--------------------|
| 1. | Clients eligible for indicator | 88 (<u>List)</u> |
| 2. | Clients who are in this indicator | 64 (<u>List</u>) |
| 3. | Clients who are not in this indcator | 24 (List) |
| | Indicator Percentage | 72.7% |
| | State of New Jersey Average Indicator Percentage | 75.4% |

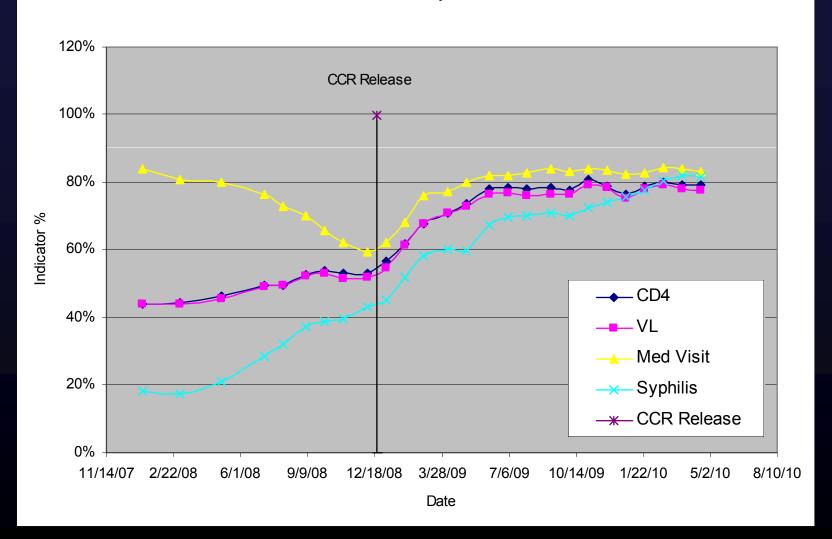
Cross Part Collaborative Outcomes





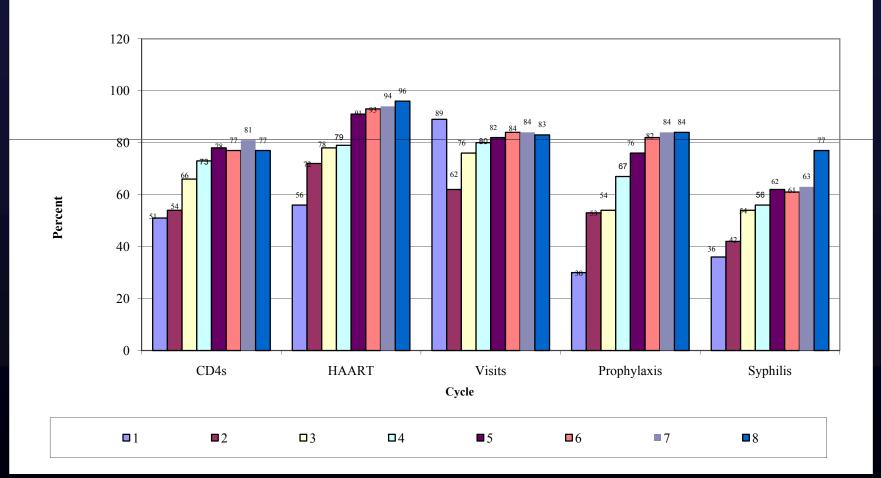
Cross Part Collaborative Outcomes

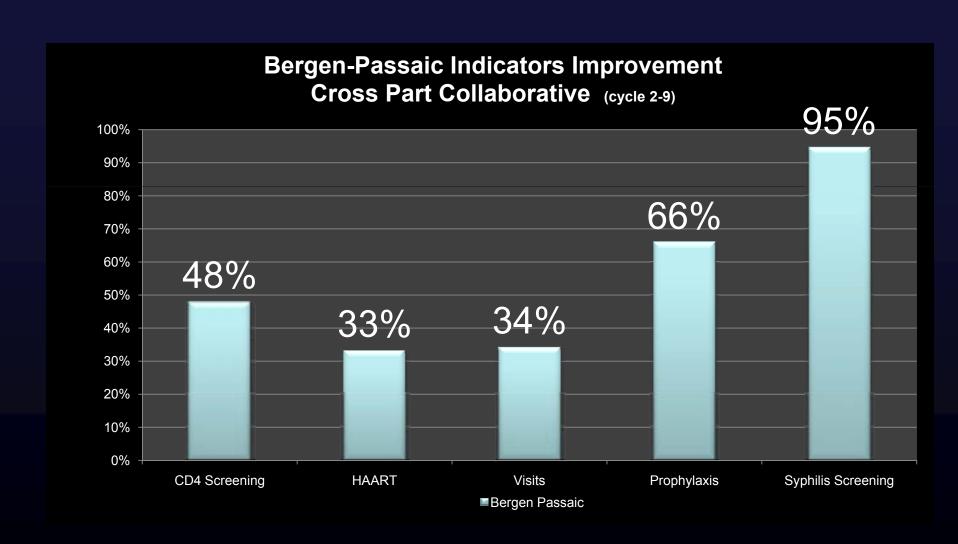




Cross Part Collaborative Clinical Outcomes (a) a Glance

Bergen-Passaic Cycle 1-8 CPC Data





Proactive

eCOMPAS Alerts

Agency Alerts

Search Bulk/Group Referrals Outreach Useful Links Tracker QM (799)

Alerts | Alert Subscriptions | Journaling

Summary of Current Alerts

Click on each alert for details.

| Туре | Upcoming Alerts | Past-Due Alerts | Recommendation |
|--|--------------------|--------------------|---|
| CD4 test not performed [?] within past three months | <u>0</u> | <u>160</u> | Consider scheduling or following-up to conduct CD4 test |
| VL test not performed within[?] past three months | <u>0</u> | <u>164</u> | Consider scheduling or following-up to conduct a VL test |
| No medical appointment in [?] the past three months | N/A | <u>168</u> | Consider scheduling or following-up to ensure medical appointment |
| CD4 results less than 200 [?] but status has not changed to AIDS | N/A | 7 | Review records and ensure the HIV Status is correct. It may need to be changed to AIDS. |
| No TB/TST conducted within [?] 12 months of the last TB/TST | N/A | 122 | Consider scheduling or following-up to conduct TB/TST |
| Active clients who have not [?] received any services in the past 6 months | N/A | 178 | Review client records and try to reconnect them to services or mark as inactive. |

All recommendations assume that you first ensure that the data (e.g., CD4 test date and value) has been entered into eCOMPAS.

If you wish to suggest a new alert click here

Agency Alerts

Search Bulk/Group Referrals Outreach Useful Links Tracker QM

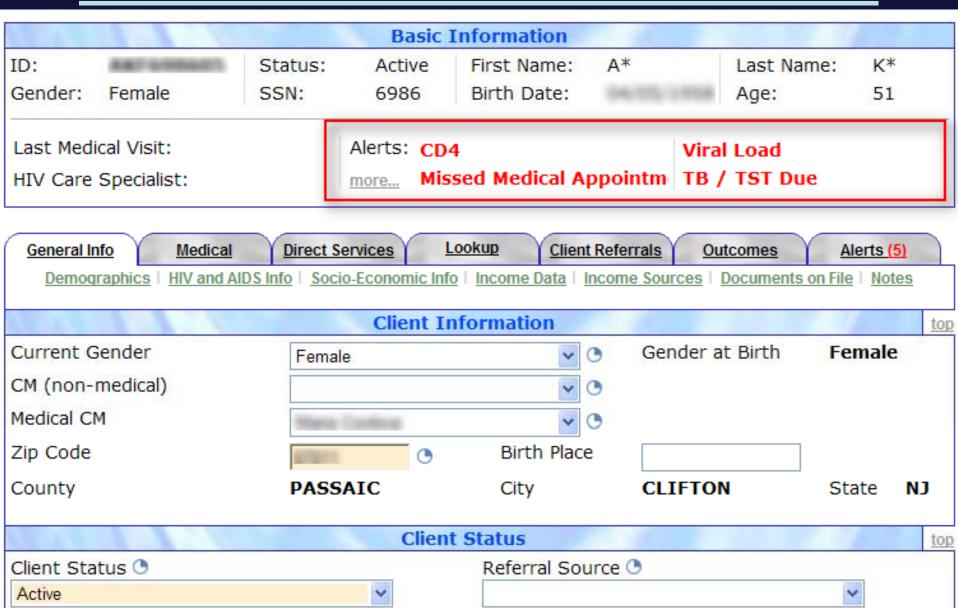
erts | Alert Subscriptions | Journaling

Summary of Current Alerts

Click on each alert for details.

| Туре | | Upcoming Past-Due Alerts Alerts | | Recommendation |
|---|--|---------------------------------|-------------|---|
| CD4 test not performed [3] within past three mo ADM304231 | | <u>0</u> | 160 ose] | Consider scheduling or following-up to conduct CD4 test |
| VL test not performe past three months | ADM837106 AFF234024 AGM689 0 | | | Consider scheduling or following-up to conduct a VL test |
| LINO MEDICAL ADDOINTMUS | AKF081401 AKF698605 APM000418 | | | Consider scheduling or following-up to ensure medical appointment |
| but status has not d | ARF613718 AVM764014 BDF733019 BPF911810 | | | Review records and ensure the HIV Status is correct. It may need to be changed to AIDS. |
| No TB/TST conducted 12 months of the las | CBM923618 CMF470719 CNM530706 | | | Consider scheduling or following-up to conduct TB/TST |
| Active clients who had received any services 6 months | | | | Review client records and try to reconnect them to services or mark as inactive. |

Client Header – On all screens



Client Alerts Tab

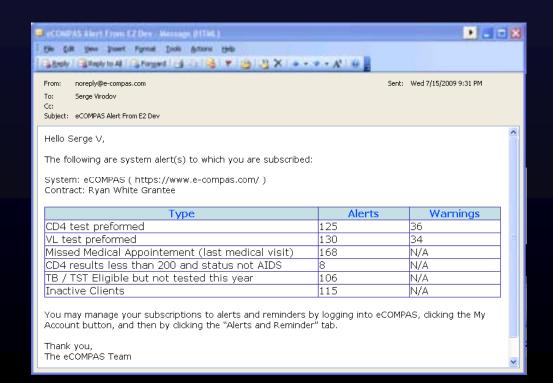
| General Info Medical Direct | ct Services Lookup Client Referrals Outcomes Alerts (5) | | | | |
|--|--|--|--|--|--|
| | Past Due Alerts | | | | |
| Alert Name | Recommendation | | | | |
| CD4 test performed | Consider scheduling or following-up to conduct CD4 test | | | | |
| VL test performed | Consider scheduling or following-up to conduct a VL test | | | | |
| Missed Medical Appointement (last | Consider scheduling or following-up to ensure medical appointment | | | | |
| medical visit) | | | | | |
| TB / TST Eliqible but not tested in the past | Consider scheduling or following-up to conduct TB/TST | | | | |
| <u>year</u> | | | | | |
| Inactive Clients | Review client records and try to reconnect them to services or mark as inactive. | | | | |

Coming Up Alerts

There are no warnings at this time.

Email Alerts

- Proactive, regular, push notification
- Clicking sends to secure site
- Same summary as the agency report in eCOMPAS



Email Alerts - Subscription

- Everyone subscribed originally
- Option to opt out

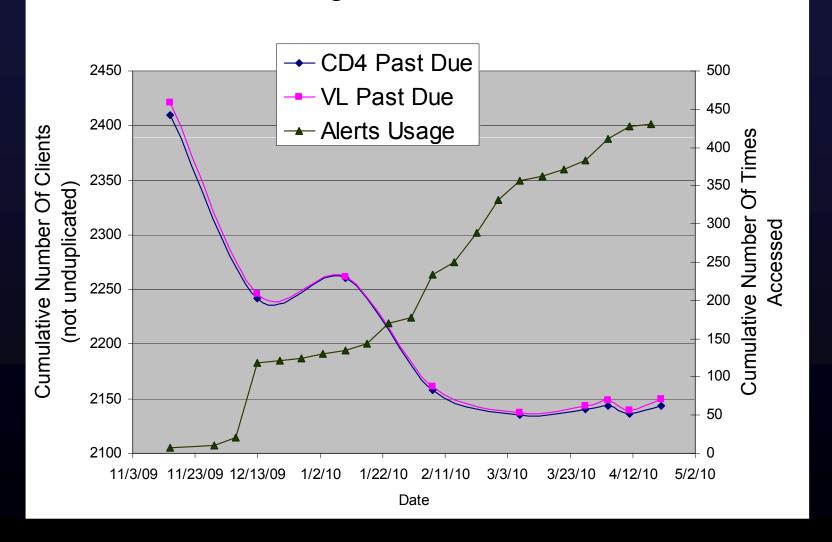
Welcome to the eCOMPAS Alerts and Reminders Module.

The following alerts are currently available to you.
You may subscribe or unsubscribe and click **Update** when you are finished.

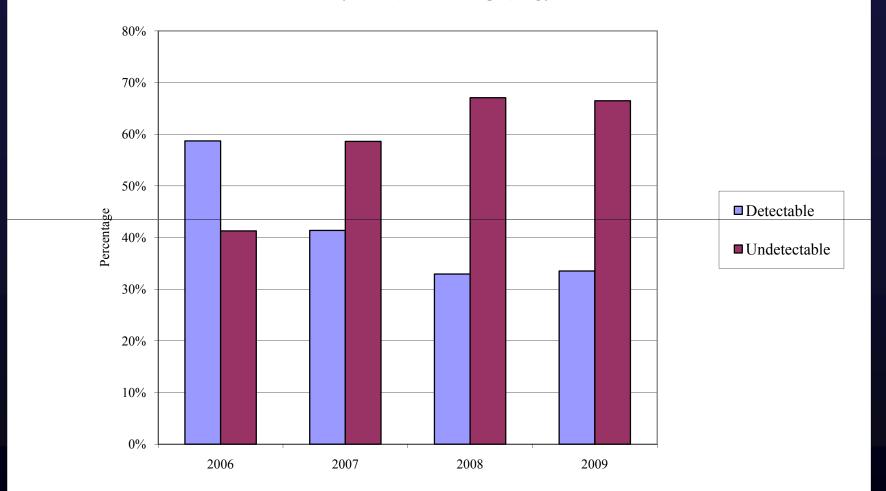
| Subscribe | Reminders |
|-----------|--|
| ✓ | CD4 test performed |
| ✓ | VL test performed |
| ▽ | Missed Medical Appointement (last medical visit) |
| ▽ | CD4 results less than 200 and status not AIDS |
| ✓ | TB / TST Eligible but not tested this year |
| ▽ | Inactive Clients |

Alerts Module Usage vs. Outcomes

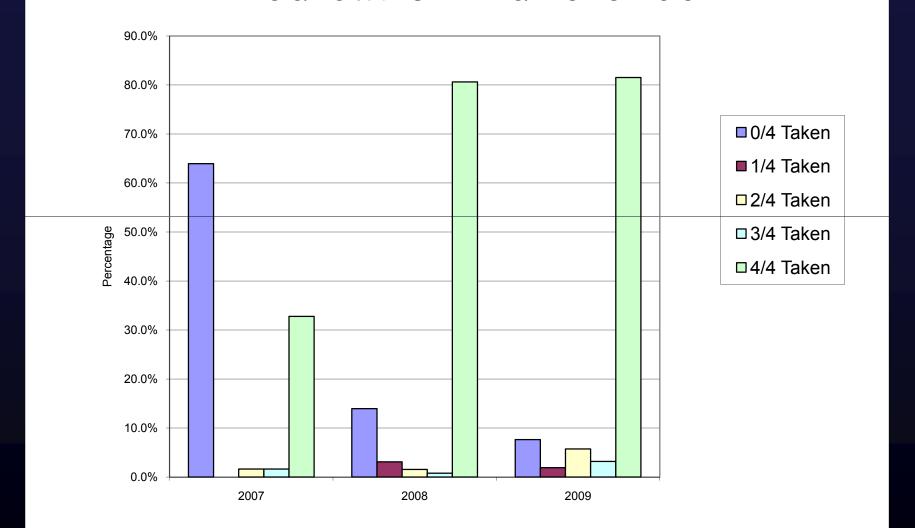
Alerts Usage vs. Number of Alerts



Viral Load



Medication Adherence





Leveraging SPNS Initiatives to Transform Client Level Data Collection into Service and Quality Tools

Facilitated by:

Peter Whiticar, Hawaii Dept. of Health Charles Lyden, AIDS Community Care Team Don Kyles, Life Foundation Bryan Talisayan, Waikiki Health Center Jesse Thomas, RDE Systems August 23, 2010





Where Are We From?



Today's Agenda Introduction **Problem Statement and Vision** Methodology **Overcoming Challenges Outcomes and Benefits** Lessons Learned Conclusion

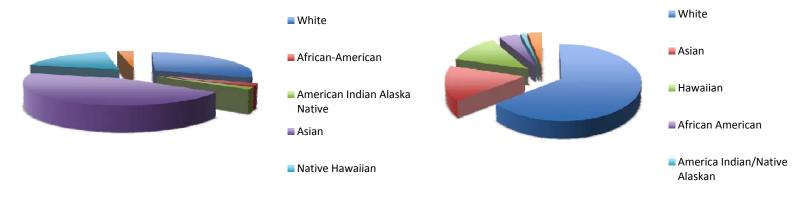
Panel and Our Roles in Project

- Peter Whiticar, Hawaii Dept. of Health
- Charles Lyden, AIDS Community Care Team
- Don Kyles, Life Foundation
- Bryan Talisayan, Waikiki Health Center
- Jesse Thomas, RDE Systems



General Population

HIV/AIDS Cases by Race



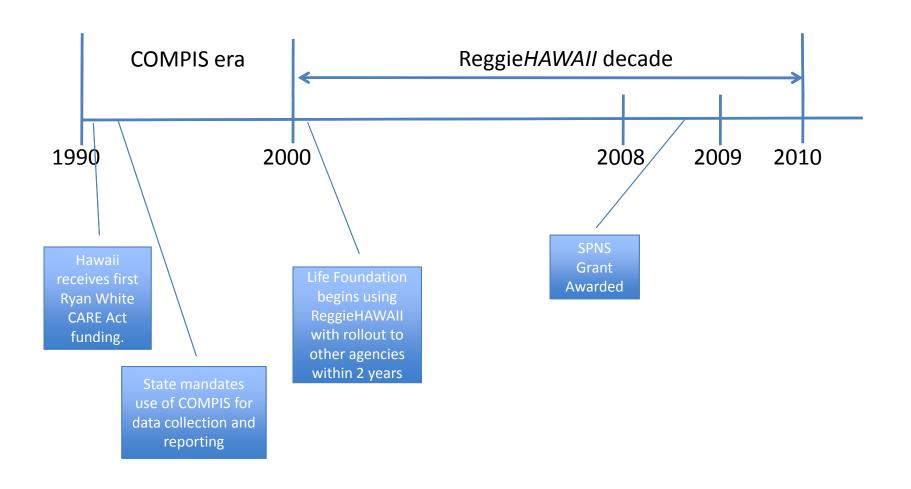
Problem Statement

- 1. New HRSA and State data collection requirements.
- 2. Aging, unsupported data system (Reggie) described as not user friendly and not meeting users' needs.
- 3. Emerging emphasis on quality management.
- 4. Desire by everyone to provide better service and reduce unnecessary paperwork.

Vision

- 1. Fully comply with federal and State data requirements.
- 2. User-friendly and intuitive web-based system.
- 3. Save time and reduce stress.
- 4. Improve data quality.
- Empower users to retrieve and use data for better service.
- 6. Share data through information exchange.
- 7. Establish a platform for the next level of quality management and innovation.

Data Collection Systems Timeline



Methodology

SPNS

SPNS made it all possible

Joint SPNS application developed by DOH and lead ASOs

Initial Strategy

After surveying systems, none met needs.

Decided to build own system.

 Until HRSA AGM 2008, when saw Paterson TGA and eCOMPAS.

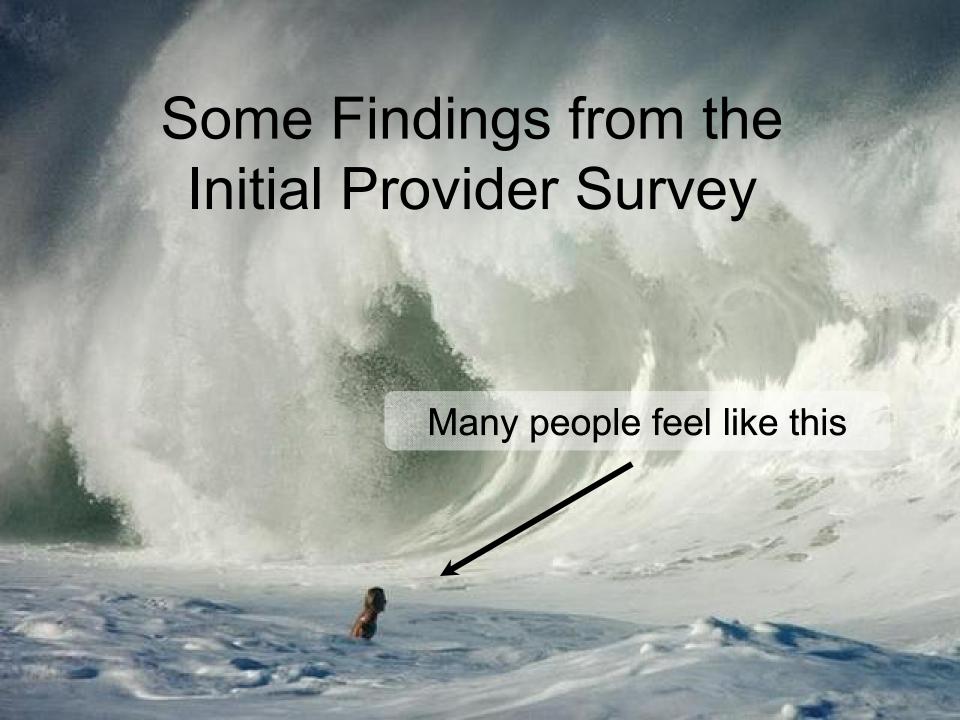
Current Strategy

 eCOMPAS serve as platform to be adapted to local needs and new innovations.

 Operate within a "partnership paradigm" instead of a traditional "transactional paradigm" with our technology partner to achieve our large vision in a short time frame.

 RDE Systems, makers of eCOMPAS, fit perfectly with this needed approach.

Surveying and Interviewing to Identify Potential Barriers and Challenges





e2Hawaii Challenges

- *Time. Project time has been halved, which means less time for specs clarification, prototyping, feedback, development, testing, and launch preparation.
- *Any new system with significant changes impacts work processes. **Change** is not easy nor always accepted.
- *Data Conversion from one system to another.
- *New Data Sharing model increases complexity of data management, training, etc.
- *Lack of detailed specifications at outset make it difficult to plan and begin development.
- *New concept of using the system to help support more **standard** work practices is valuable, but presents organizational challenges.
- *Infrastructure. Ensuring a secure subnet, VPN, and access to vendor is a new area, and may present challenges.

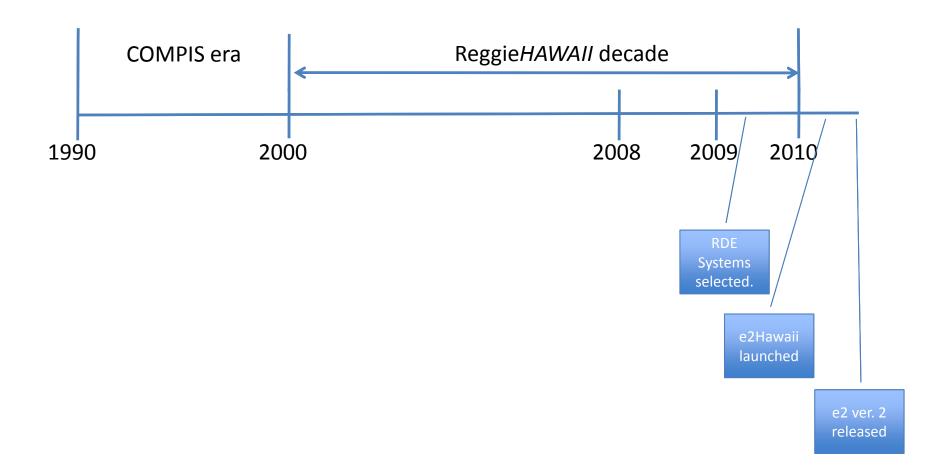
Top 10 eCOMPAS Guiding Principles

- 1. People are the most important component in success!
- 2. Success should be defined holistically by each stakeholder.
- 3. Everyone should be more empowered with better information.
- 4. Better action requires better system intelligence.
- 5. Visual is better.

Top 10 eCOMPAS Guiding Principles

- 6. Think outside the box!
- 7. Ease of use is critical for success.
- 8. Time is better spent with clients than on paperwork!
- 9. Simple and clean is more powerful than complex and messy.
- 10. No one has all of the answers. But a great process, open to everyone, produces great results.

Data Collection Systems Timeline



Where are we?

- HRSA SPNS Award and User Advisory Group Formed
- 2. RDE Systems and eCOMPAS (e2) Identified
- 3. Stakeholder engagement throughout
- 4. Many prototypes and pilots by RDE
- 5. Regular user group feedback
- 6. Beta Launch
- 7. Security and Privacy Review
- 8. Training Launch
- 9. Data Conversion by Life Foundation
- 10. Data Conversion Launch
- 11. Successful daily operation!



Innovative Concepts

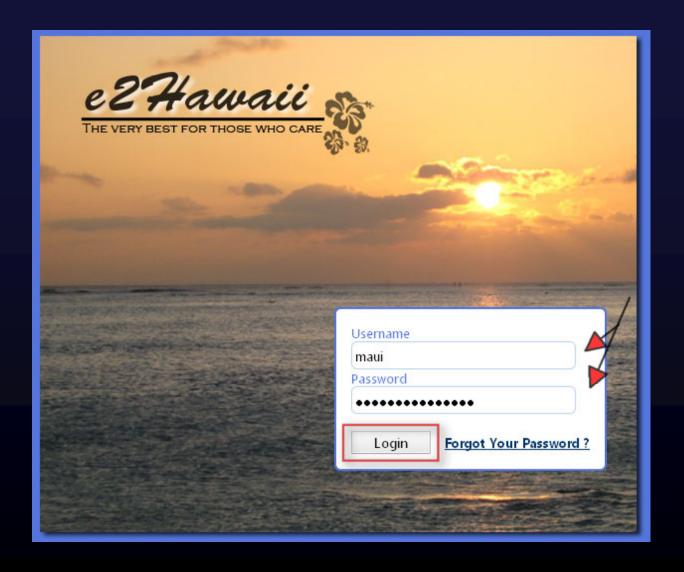
- Cross-Agency Client Data Sharing for Care Coordination and Treatment
- 2. PHI Application Standardizing HIPAA Compliance
- H-Programs (ADAP) Integrated with the State
- 4. Visual, Interactive RSR for more than just compliance
- 5. Health Information Exchange with Waikiki Health Center (Part C)

Accomplishments and Outcomes

- One-day, smooth launch of very user friendly system
- 2. RSR Compliant on Day 1
- 3. 3,795 clients and 409,000 units of services spanning over 18 years of data converted from legacy system. 99.92% data conversion success
- 4. Little-to-no training required!
- 5. High user satisfaction
- 6. More engaged users

Demo of Highlights

Client Intake – Login

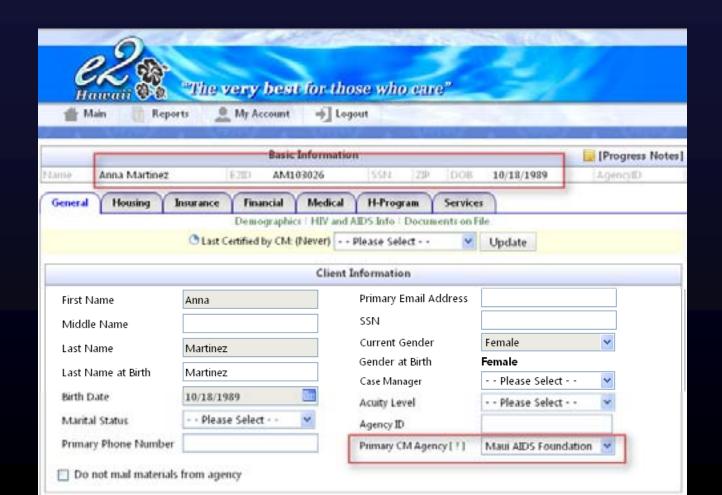


Client Intake – Access the Intake

| Client Search | | | | | | | |
|---------------|------------|-----------|----------------------|--------------------|---|--|--|
| Search For | | | Search | Intake | | | |
| Filter By | Last Name | ~ | Status Active, conti | nuing in program 🔻 | | | |
| | | | | | | | |
| Last Name | First Name | Agency ID | DOB | ZIP | | | |
| Campbell | Brian | 8B7Q0 | 02/07/1967 | 96773 | ^ | | |
| Campbell | Brian | 867W3 | 08/20/1974 | 96772 | | | |
| Campbell | Brian | 61158 | 07/23/1986 | 96773 | | | |
| Campbell | Brian | KH6KU | 06/26/1997 | 96773 | | | |
| Campbell | Rebecca | 53778 | 01/15/1966 | 96773 | | | |
| Campbell | Rebecca | KO59P | 10/18/1976 | 96772 | | | |
| Campbell | Rebecca | W4D8P | 07/26/1960 | 96772 | | | |
| | Brian | 6R5QK | 02/16/1979 | 96772 | | | |
| Campbell | | | 01/18/1990 | 96772 | | | |

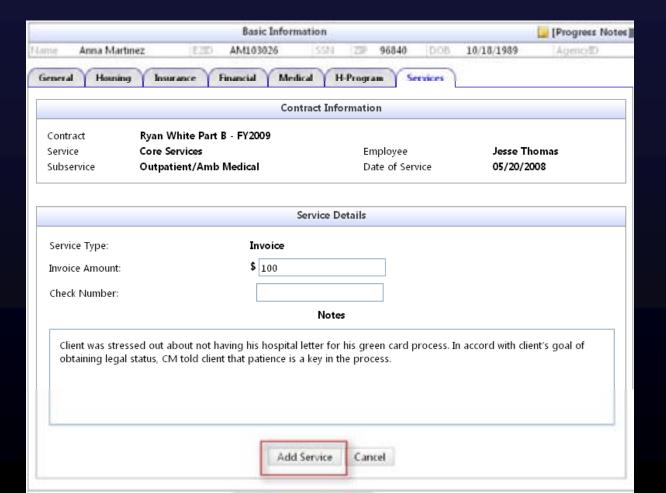
Client Intake – General Info

General Information Tab: Personal Info



Service Delivery – Step 2

Integrated Progress Notes

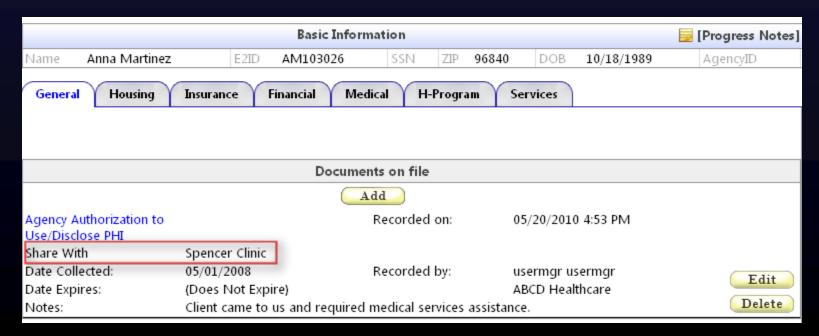


Scenario: Referral from One Agency to Another Agency

With Data Sharing!

Authorization Confirmation

- Added document successfully
- Easily editable
- Client Shared between two agencies automatically



Client Shows Up in Agency #2's Client List

| | | Client Searc | h | |
|---------------------------------|----------------------------|---------------------|---------------------------------|-----------------------|
| Search For | | | Q Search | □ Intake |
| Filter By | (ANY) | ~ | Status Active, conti | nuing in program 💌 |
| | | | | |
| | First Name | Agency ID | DOB | ZIP |
| Last Name Martinez Cooper | First Name Anna Alex | Agency ID 531-00-49 | DOB 10/18/1989 09/15/1965 | ZIP 96840 96797 |

Scenario: Reporting

Expenditures Report

| Funding Source: All Funding Sources | | | | | | | | |
|-------------------------------------|---------------------|--------------------------|---|----|--|--|--|--|
| From Date: 02/01/2009 | To Date: 02/28/2009 | or Select: February 2010 | ~ | Go | | | | |

Expenditures Reports

To Reports Menu



Maui AIDS Foundation Report for Period (2/01/2009 to 2/28/2009) Monthly Expenditure Report

| Service Provided | Current - 2/28/20 | | (2/01/2009 | Current ((01/01/2 | • | /28/2009) | Year to 6 2/28/200 | | I/01/2008 - | Budget | Balance |
|---------------------------|------------------------|-------------|------------|-----------------------|-------------|-----------|-----------------------|-------------|-------------|---------|---------|
| Service Provided | #Clients | #svc del | Amount | #Clients | #svc del | Amount | #Clients | #svc del | Amount | Amount | Amount |
| HSPAMM Referral | 21 | 21 | \$ 0.00 | 42 | 43 | \$ 0.00 | 174 | 190 | \$ 0.00 | \$ 0.00 | \$ 0.00 |
| HSPAMM Coun/Liaision | 17 | 17 | \$ 0.00 | 29 | 30 | \$ 0.00 | 153 | 167 | \$ 0.00 | \$ 0.00 | \$ 0.00 |
| HDAP Referral | 18 | 18 | \$ 0.00 | 37 | 37 | \$ 0.00 | 153 | 167 | \$ 0.00 | \$ 0.00 | \$ 0.00 |
| HDAP Coun/Liaision | 27 | 27 | \$ 0.00 | 56 | 62 | \$ 0.00 | 160 | 201 | \$ 0.00 | \$ 0.00 | \$ 0.00 |
| HCOBRA Referral | 20 | 21 | \$ 0.00 | 38 | 39 | \$ 0.00 | 164 | 188 | \$ 0.00 | \$ 0.00 | \$ 0.00 |
| HCOBRA Coun/Liaision | 20 | 20 | \$ 0.00 | 34 | 36 | \$ 0.00 | 156 | 179 | \$ 0.00 | \$ 0.00 | \$ 0.00 |
| Medicaid Referral | 18 | 18 | \$ 0.00 | 34 | 36 | \$ 0.00 | 153 | 178 | \$ 0.00 | \$ 0.00 | \$ 0.00 |
| Medicaid Coun/Liaision | 29 | 30 | \$ 0.00 | 45 | 47 | \$ 0.00 | 173 | 198 | \$ 0.00 | \$ 0.00 | \$ 0.00 |

Service Performance Report

| Please Select a Fiscal Year for the Service Performance Report | | | | | | | |
|--|---------------------------------------|--------------------------------------|--|--|--|--|--|
| Funding Source Fiscal Year: | All Funding Sources Fiscal Year 2009 | Request for the Selected Fiscal Year | | | | | |

Quarterly Service Performance Report

To Reports Menu

Export to PDF

Maui AIDS Foundation Period: Fiscal Year 2009 Quarterly Service Performance Report

| Scope of Service | Clients Contracted | Q1 | Q2 | Q3 | Q4 | Cumulative Total | Percent of Contract Amount |
|--|-----------------------|----|----|----|----|---------------------|-------------------------------|
| Medical Case Management / HSPAMM Coun/Liaision | 0 | 64 | 45 | 5 | 0 | 114 | 0.00% |
| Medical Case Management / HDAP Referral | 0 | 63 | 51 | 4 | 0 | 118 | 0.00% |
| Medical Case Management / HDAP Coun/Liaision | 0 | 72 | 43 | 3 | 0 | 118 | 0.00% |
| Medical Case Management / HCOBRA Referral | 0 | 60 | 48 | 3 | 0 | 111 | 0.00% |
| Medical Case Management / HCOBRA Coun/Liaision | 0 | 60 | 49 | 4 | 0 | 113 | 0.00% |
| Medical Case Management / Medicaid Referral | 0 | 62 | 53 | 2 | 0 | 117 | 0.00% |
| Modical Case Management / Modicaid Coun/Ligision | 0 | 50 | 52 | 2 | ٥ | 112 | 0.00% |

Roster Report - Filtering

| | Client Roster Report | To Reports Menu | Export to PDF |
|----------------|---|-----------------|---------------|
| From Date 01/0 | 1/2009 To Date 12/31/2009 or Select July 2010 | ~ | |
| Funding Source | All Funding Sources V | ~ | |
| Service | ~ | | |
| Subservice | ~ | | |
| Filter by | Client Status is Active, continuing in prog | | |
| | Run Report | | _ |
| | | | |

Roster Report - Output

| | | Client Ro | ster Report | To Reports Menu | 🃆 Export to PDF |
|---------------|--------------|-------------|--|---|-----------------|
| rom Date 01/0 | 1/2009 | To Date | 12/31/2009 | or Select August 2010 | |
| unding Source | All Fundir | ng Sources | • | Contract Ryan White - Year 18 (FY2 🕶 | |
| Service | Core Servic | es | | V | |
| Subservice | Outpatient/ | Amb Medical | l | • | |
| ilter by | Acuity Level | | is 4 | ~ | |
| _ | | | | | _ |
| | | | Run Repo | ort | |
| | | | 01/01/200 All Fund Ryan White - Core Outpatien | Roster Report D9 - 12/31/2009 ding Sources - Year 18 (FY2009) e Services t/Amb Medical y Level is 4 | |
| First Name | Last Name | Agency Id | Phone Number | Home Address | |
| Hunter | Adams | | 8144834155 | Grand Fawn Gate KUALAPUU 96757 | HI |
| Victor | Alexander | | 3016495196 | Umber Wagon Vista FORT SHAFTER 96 | 858 HI |

Cinder Bear Canvon HAUULA 96717 HI

Green Forest Glade KURTISTOWN 96760 HT

7518351208

5210666083

Anderson

Jessica

Scenario: H-Programs

Problem Statement and Vision

H-Programs – Step 1: Sharing

| Documents on file | | | | | | | |
|-------------------|--|-----------------------------|-----------------|--|--|--|--|
| Document Type: | Agency Authorization to Use/Disclose PHI | Recorded on: | - | | | | |
| Share With: | DOH-H-Programs | | | | | | |
| Date Collected: | 05/31/2010 | Recorded by: | usermgr usermgr | | | | |
| Date Expires: | 5 Years | | Life Foundation | | | | |
| Notes: | Agency authorizes DOH-H-Programs to review eligibility | CT information to determine | | | | | |
| | | .: | Add | | | | |





H-Programs – Step 2: Certification



H-Programs – Validations

HDAP



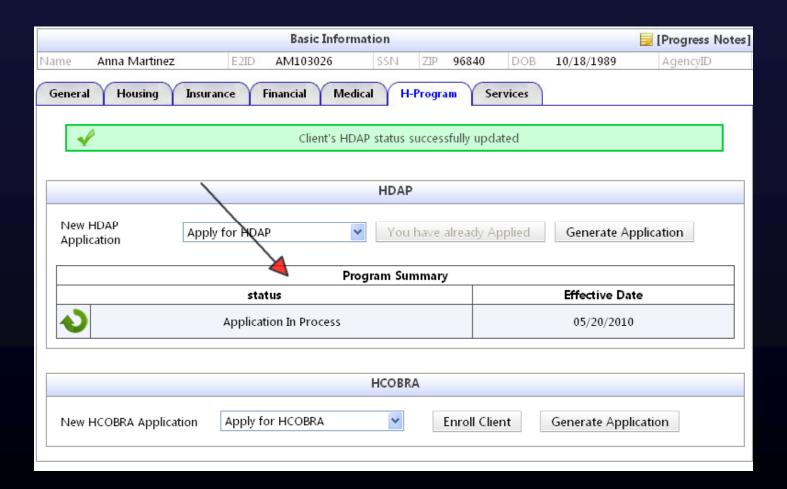
This Client cannot apply to HDAP. Client's Insurance Information has not been certified in the past 6 months

HDAP



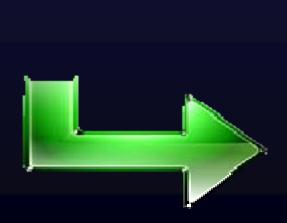
This Client cannot apply to HDAP. Client's Financial Information has not been certified in the past 6 months

H-Programs – Step 3: Application



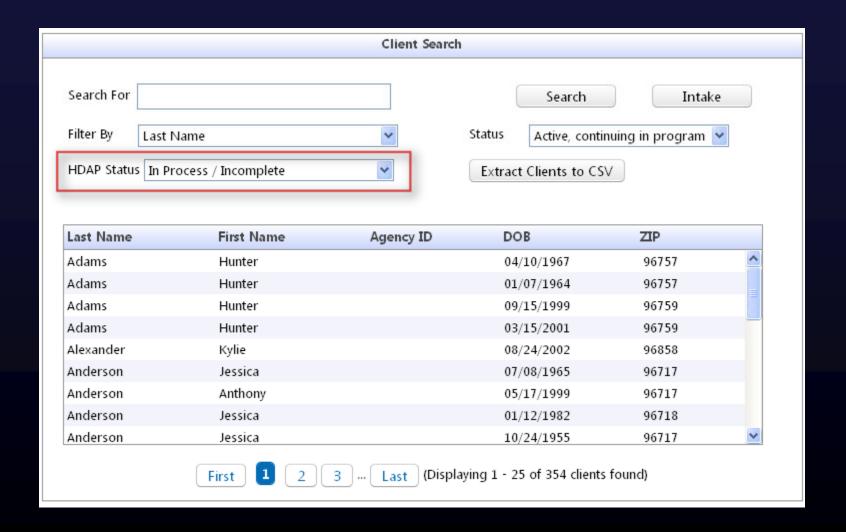
H-Programs – Step 3: Application cont.



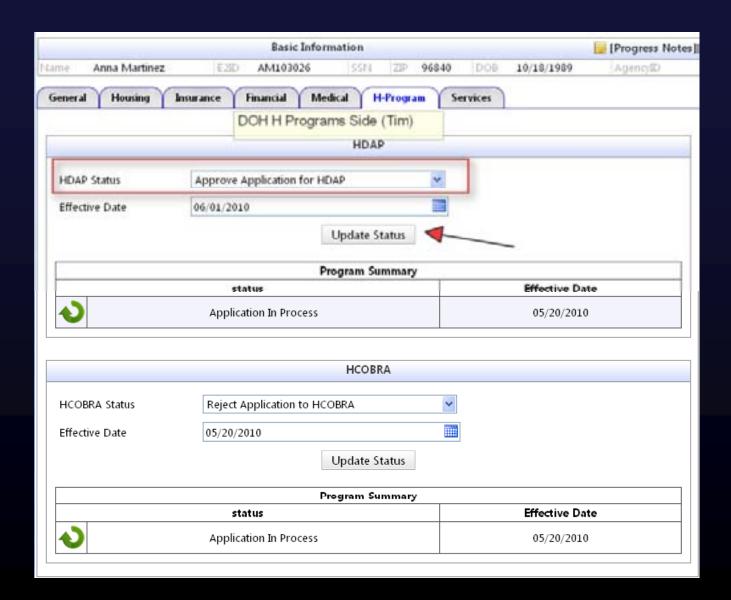




State Department of Health's View – Processing Applications



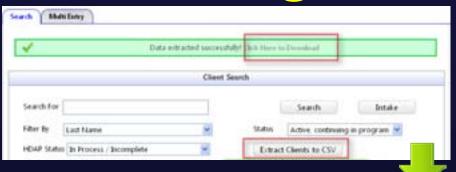
H-Programs – Processing Applications

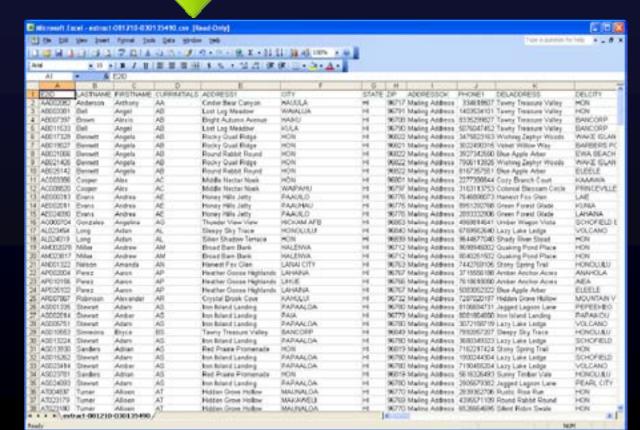


Real-Time Updated Information Between Case Managers and State Department of Health

| | Program Summary | | | |
|----------|---------------------------|----------------|--|--|
| | Status | Effective Date | | |
| Į | Discharged From HDAP | 07/31/2010 | | |
| > | Application Approved | 01/04/2010 | | |
| | Application Waitlisted | 12/08/2009 | | |
| | Application is Incomplete | 11/25/2009 | | |
| 2 | Application In Process | 11/22/2009 | | |
| * | Application Rejected | 10/22/2009 | | |

H-Programs – Data Extract





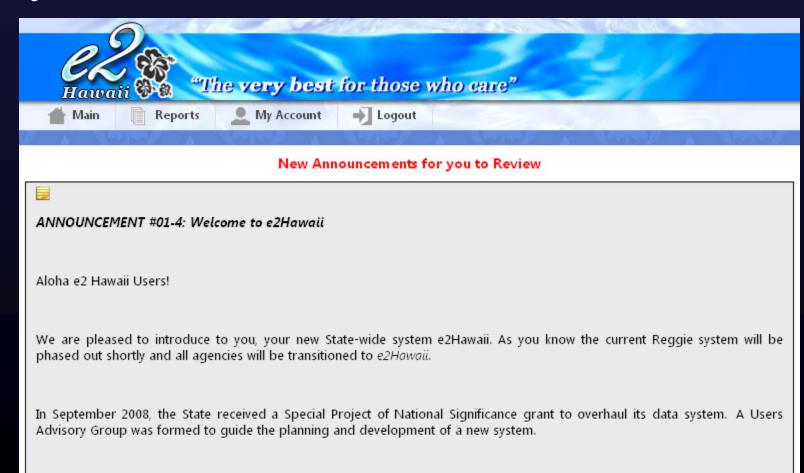
Summary of Highlighted Features

History audit trails

| | | | Demographics | | Ue: |
|-----------------|------------------------|---------------------|---------------------------------|---------------------|--------------------|
| Ethnicity | Hispanic | ~ | Sexual Orientation | Heterosexual | ~ |
| O Race | | | | | |
| Asian / Car | | | an American / Caribbean Black 🛭 | Native American / A | Jaskan Native |
| As Click here | to open the history of | Race Black or Afric | an American / Other | Native American / A | merican Indian |
| 🗆 Asian / Filin | nino/a | non-Hispanio | Black | Native Haw'n-Other | Dac Is / Guamanian |

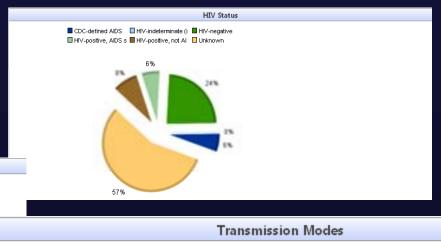
| Demographics 10P | | | | | | |
|-------------------------------|---|--|-----------------|--------------------|-----------------------|--|
| Ethnicity | Click here to open the history of Race close or Esc H Race History of Anna Martinez (Race) | | | | | |
| Race | | | | | | |
| Asian / C | Date/Time set | Value | Set by | Provider | an | |
| Asian / F | | (UNSET)Latino / Mexican, Mexican- American | Jesse Thomas | ABCD Healthcare | manian aiian/Pa | |
| Asian / k Asian / C Asian / C | 05/20/2010 16:51 | (SET)Latino / Mexican, Mexican-American | Jesse Thomas | ABCD Healthcare | shellese er Pacifi | |
| Asian / C | | (UNSET)Black or African American / Caribbean Black | Jesse Thomas | ABCD Healthcare | oan | |
| Asian / \ Black or African E | 05/20/2010 16:46 | (UNSET)Black or African American / Other non-Hispanic Black | Jesse Thomas | ABCD Healthcare | | |
| | 05/20/2010 | | lesse | ARCD | | |

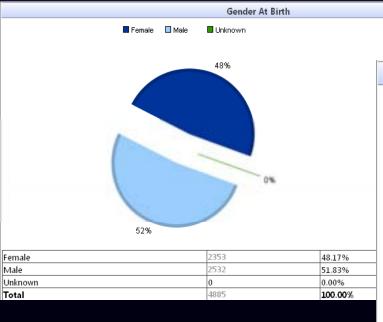
System Announcements

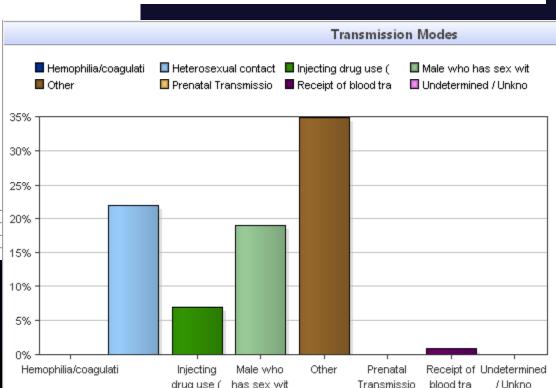


RDE Systems worked closely and collaboratively with the Users Group and other stakeholders to develop a Phase 1 system

Visual Analytics

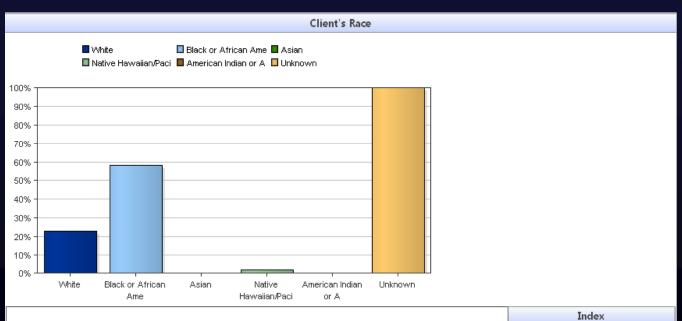






One-Click RSR

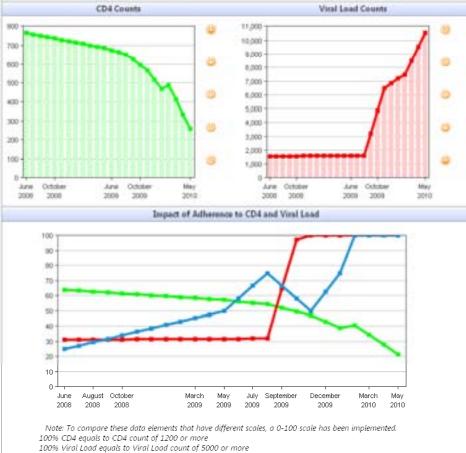




| | Index | |
|----------------------------------|-------|---------|
| | Count | % |
| White | 222 | 22.68% |
| Black or African American | 563 | 57.51% |
| Asian | 3 | 0.31% |
| Native Hawaiian/Pacific Islander | 23 | 2.35% |
| American Indian or Alaska Native | | 0.31% |
| Unknown | 979 | 100.00% |
| Total | 979 | 100.00% |

Comprehensive Medical Module



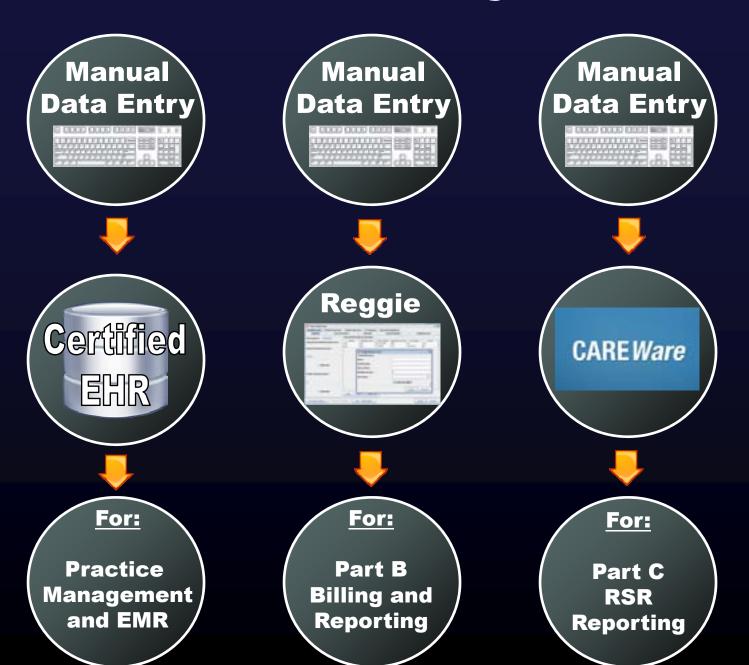




Part C SPNS Vignette:

Using Client Level Data
Requirements to Drive State-Wide
Electronic Health Information
Exchange

The Old Way

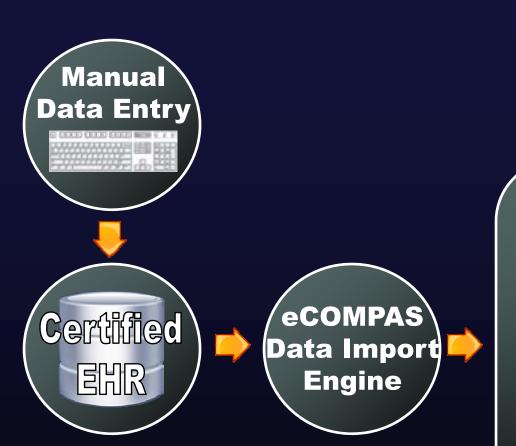


Problems with the Old Way

- Triple data entry!
- Data quality errors and time lost due to triple data entry.
- Keeping all sources of data in sync not feasible

 meaning data is not kept current in all
 systems.
- Data is not used fully for quality improvement.

The New Vision







- Part B Billing
- Part B Reporting
- Part B RSR
- Part C RSR
- Quality Management and Quality Reports





Project Challenges

- EHR had incomplete and out-of-date Data Dictionary.
- EHR documentation incomplete and out-of-date No Data Extract capability.
- EHR training insufficient for report generation and data extracts.
- EHR doesn't track all fields required by HRSA Ryan White programs.
- The exported data must follow both HRSA requirements and State-specific requirements.

Methods Used to Overcome Challenges

- A "Whatever it takes" paradigm not a "That's not my job" attitude.
- Extra effort and flexible schedules between partners: late nights and early mornings (time difference).
- Great collaboration and "fun" working atmosphere to offset additional work and challenges.
- Systematically reverse engineered poorly documented EHR database.
- Built a data extraction engine (eCOMPAS One Click Transfer).

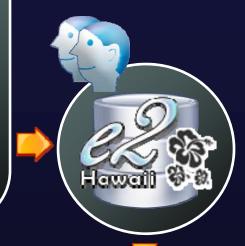




eCOMPAS Data Import Engine



- Review Imported Data
- Resolve Data Conflicts
- Import Records







- One Click Visual RSR
- Quality Control Data
- Generate Client LevelData File



Project Accomplishments

- Extensive collaboration led to creative solutions for many of the challenges and a foundation for future innovation.
- Policies and data entry were modified to track additional fields required by HRSA that weren't originally tracked.
- Fully automated data import process and created rules for data conflicts so that the system prompts users only in cases when necessary and does so in a user-friendly way.
- Comprehensive security approach to ensure PHI is protected end-to-end.

Project Accomplishments cont'd

- Estimated 80-90%+ data entry savings (some fields are not tracked by EHR)
- No further need to maintain multiple systems.
- Combined with innovative state-wide model of sharing data, this project will allow other agencies to see medical data important to the treatment and service of clients.
- Leveraged Part C SPNS grant to integrate seamlessly with State-wide eCOMPAS system for sustainability.

Lessons Learned





Be Creative and Share your Ideas

The small stuff counts too!

One Team



A Key Measure of Success

The Story of Lani

Friday August 13, 2010

Hey you guys:

What a wonderful system to have at our beck and call!! The multi services screen is BEAUTIFUL!!! I love it. You all have exceeded yourselves in E2. I believe one can absolutely NOT make mistakes during the services input. The system allows one to

- 1) see your work,
- 2) make changes that are erroneous in just that ONE page instead of getting out of one screen to access another to correct the error,
- 3) get finished in one-eighth of the time it originally took,
- 4) have plenty time to go on to other projects.

Gosh, you all are full of surprises. Myself did not know it would be so simple. Even a cave-man can do it!!

Thank you, thank you, thank you....

Aloha, Lani

P.S. The client roster screen is very very informative. This is extremely beneficial to our case managers. I know they express their astonishment at your accomplishments. We did not expect such detailed information.

Thank you again, Lani

Some Ideas Moving Forward

- Training for all levels, learning how to use data for many purposes
- Getting the data and into the system
- Using data to focus effort to improve medical outcomes
- Lack on ongoing funding and DOH IT resources
- Use of e3Hawaii for HUD reporting like NYC HOPWA

Q&A



Thank You!