INTEROPERABILITY
From the County’s Perspective
Who would the MHP want to exchange information with?

- Contract Providers
- FQHC’s
- Thanks to the Affordable Care Act:
  - Managed Care Plans
  - Primary Care
  - MCP Behavioral Health Providers
- Emergency Rooms
Meaningful Use mandates use of the HL-7 Continuity of Care Document (CCD)

- Patient Summary:
  - Problem (Diagnoses)
  - Demographics (DOB, Race, etc.)
  - Medications

- Billing Information Exchange:
  - Only applies to Contract Providers
  - HIPAA 837/835 Transactions – required by HIPAA
For E/R’s, the Patient Summary (CCD) is sufficient

From Contract Providers, the MHP would also like to see:
- Treatment Plans
- Progress Notes
- Assessments

For FQHC’s and MCP’s we also need:
- Standardized MH and Substance Use Disorder Screenings and Assessments
The HL-7 CCD is Standardized
  - Most, if not all, EHR Vendors are Meaningful Use Certified and therefore support this standard

There are NOT standards for:
  - Treatment Plans
  - Progress Notes
  - Assessments
  - Screenings

They must be developed!
This is still an Open Issue
- RHIO’s
- Secure e-mail
- Provider Portals
- Health Information Exchanges

There is no accepted and available mechanism at this time
Security & Privacy

- HIPAA: not very challenging
- 42 CFR Part 2
  - Should be dependent on a Specific Release of Information
  - Cannot be re-disclosed
Mental Health Plans must agree on MOU’s with Managed Care Plans
  - Focused on standardized screening tools

Data Sharing defined by Contract Language for Counties and Contracted Providers
  - Currently, many Counties have their Contract Providers use their EHR systems
  - For electronic data sharing, Standards are needed for Progress Notes, Assessments and Tx Plans

For FQHC’s and Primary Care: Uncharted Territory