



Health Information Exchange Fact Sheet

Background

SB 574 (2021)

- Created the Oklahoma State Health Information Network Exchange (OKSHINE)

SB 1369 (2022)

- Created the **Office of the State Coordinator for Health Information Exchange - OHCA**
- Created concept of a **State Designated Entity for HIE Operations** overseen by the office – OHCA has contracted with **MyHealth Access Network as the SDE**.
- Requires that all health care providers participate in the statewide HIE.
- Coordinator may grant **exemptions**.
- OHCA must create administrative rules to implement law.

Administrative Rules (2023)

- The OHCA Board passed and Governor signed emergency rules (July 2023) that allows for any provider to register an exemption and it will be granted.
- Emergency rules must be taken through the permanent rulemaking process and be submitted to the Legislature. This will occur in the 2024 legislative session.

Health Information Exchange

Health information exchanges (HIEs) are connecting nationwide to seamlessly deliver patient health information across health systems, improving the patient experience by making their health information available whenever and wherever their care occurs.

With the statewide HIE, the state can vastly improve public health, **care coordination**, records exchange, and **address care fragmentation and care gaps** for providers.

- 70% of Oklahomans have records in more than one health care delivery system.
- The HIE currently covers more than 1400 locations serving more than 110,000 patients daily.
- MyHealth is a non-profit organization and is the State Designated Entity for HIE operations.
- There will be a one-time connection fee charged to establish interoperability, and an ongoing subscription fee.
- All 50 states are working towards or have an HIE.

Patient Privacy



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4345 N. Lincoln Blvd.
Oklahoma City, OK 73105



WEBSITES

oklahoma.gov/ohca
mysoonerCare.org



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All patient data is only accessible in secure, approved ways, compliant with state and federal law, including HIPAA. The HIE is set up to monitor access of all the health care information it receives to ensure patient privacy. Misuse of the system is a crime and is subject to all penalties associated with a HIPAA violation. More information on patient privacy can be found at myhealthaccess.net/who-we-are/faq/.

- Psychotherapy notes are **excluded** from transmission to the HIE as well as any behavioral health data covered by 42 CFR part 2.
- For those providers with electronic health records and the functionality, they should exclude any patient data that is legally obligated to be kept confidential and only transmit that data if patient consent is received. Data or charts may be flagged as restricted or sensitive by the provider and would not be submitted to the HIE..

Questions? Visit OKSHINE.OKLAHOMA.Gov

FAQs

Why do healthcare providers need to share patient information?

If you have ever had to recall all of your medications or test results from memory to a new provider or carry around printed medical records from one provider to the next on behalf of yourself or a loved one, you've experienced the need for information sharing between health care providers. Because patients may see several providers besides their primary care provider, different sets of medical records for the same patient can be found in different offices. This creates burdensome paperwork for the patient, and a very real risk that the patient could be prescribed a medication they are allergic to, or are already taking, or that the same tests already undergone (and paid for) are re-ordered.

A statewide HIE supports:

- Reduced health care costs associated with redundant testing, hospital readmissions and unnecessary emergency department visits.
- Improving care coordination during transitions between health care settings, reducing adverse drug events and missed preventive care.
- Improved patient experience and provider performance on quality measures

How can a statewide HIE improve health care?



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- Studies indicates that in 85% of families' visits to the doctor, critical health information is missing that could have changed the treatment plan. An HIE ensures that the relevant information is available for every provider to consider.
- Eliminates the delays created when a provider needs more information from other providers involved in a patient's care and would otherwise have to wait on the mail, a fax or a returned phone call.
- Enables your providers to communicate directly and securely with one another to ensure care is coordinated appropriately.
- Helps to avoid additional costs and health risks created by duplicated medical tests (such as increased radiation), or complications caused by missing information (like medication reactions or missed preventive care).

What health information is stored in the HIE?

Only high priority health information will be included in the HIE as required by federal regulations (see the United States Core Data for Interoperability). Medical professionals have determined that information such as the following is needed to coordinate your health care effectively:

1. Names of the doctors and other health professionals who provide your care
2. Diagnoses
3. Current medications prescribed to you
4. Lab and x-ray results
5. Past procedures
6. Known allergies
7. Immunization records
8. Hospital discharge records
9. Basic personal information (your name, address, family phone contacts, etc.)

Who will have access to medical records?

If a provider is participating in the HIE and if the patient consents, only the health care professionals involved in a patient's care are authorized to view that patient's records. These healthcare providers include doctors, nurses, hospital clinicians, diagnostic technicians, behavioral health providers, and pharmacists—the same individuals who maintain health records in separate systems today. Each of these provider types have specific permissions, or roles within the HIE, and each role is limited to accessing data elements relevant to their scope of care.

Access to data is guarded closely. MyHealth Access Network will rely on the same authorization procedures doctor's offices uses today to determine which health providers are eligible to access a patient's medical records. Access to clinical data



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elements is restricted to appropriate users such as a patient's provider and other providers involved in care, and the system keeps track of every person who views medical records so that privacy will be protected through regular auditing of usage logs.

Can an individual restrict the sharing of my medical records?

Yes. Any patient may decide to prevent access to their medical records.

Additionally, providers with electronic health records and the functionality, should exclude any patient data that is legally obligated to be kept confidential. Patient data subject to this legal obligation should only be shared after receiving patient consent. Providers may flag data or charts as restricted, or sensitive. These flagged charts would not be submitted to the HIE..

Can a medical provider see notes from therapy sessions? How is sensitive behavioral health information handled?

Providers and patients are in control of what data they share. Sensitive information of any type (behavioral or otherwise) is withheld by providers who mark a chart or note as sensitive.

The system conforms to all HIPAA regulations and is regularly audited to ensure compliance. Additionally, any care or services covered under 42 CFR Part 2 are excluded from data transmission, and psychotherapy notes from any provider are marked as sensitive and excluded from transmission to the HIE.

What is the cost?

The Legislature provided funding for the initial, one-time connection fee. A subscription fee is also required to access the network and is based on organization/provider types, and size.

Where can I find more information about MyHealth?

MyHealth is an Oklahoma-based non-profit organization whose board of directors is composed of members who represent medical associations, related disciplines (optometry, dentistry, first responders), community health organizations, insurance companies, medical universities, tribes, employers, public health, and patients.

myhealthaccess.net/

What do the emergency rules do?



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The emergency rules allow for any provider to register for an exemption and this exemption will be granted. Providers may choose to be exempted from transmitting data, utilizing data, or both. Exemptions will auto-renew unless a provider choose to participate.

Do providers need to submit historical data?

No. Only data moving forward will be included in the HIE.

This Fact Sheet will be updated as needed. *Revised 7/12/23 to include updated administrative rule information.*



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