



Cost Breakthroughs in Patient Centered Medical Homes

Simple. Secure. Seamless.
Your key to healthcare communications.

October 2015



Agenda

- Introduction
- Care management via Direct - industry snapshot
- Care management and the PCMH
- How health plans can improve care management
 - Current approaches, successes & failures
- Results
- Next Steps
- Questions



Secure Exchange Solutions

Secure Exchange Solutions is a leading HISP, providing a cloud encryption, routing and directory service that helps providers and their patients, health information exchanges, plans and the public sector communicate PHI securely and easily.

Our customers include...

- Public and commercial health plans
- Health Information Exchanges
- 1,000+ Hospitals & Health Systems
- 200,000+ physicians (through over 90 EMRs)
- 10,000,000+ patients (through our PMR and patient app partners)

EHR Connectivity through SES HISP



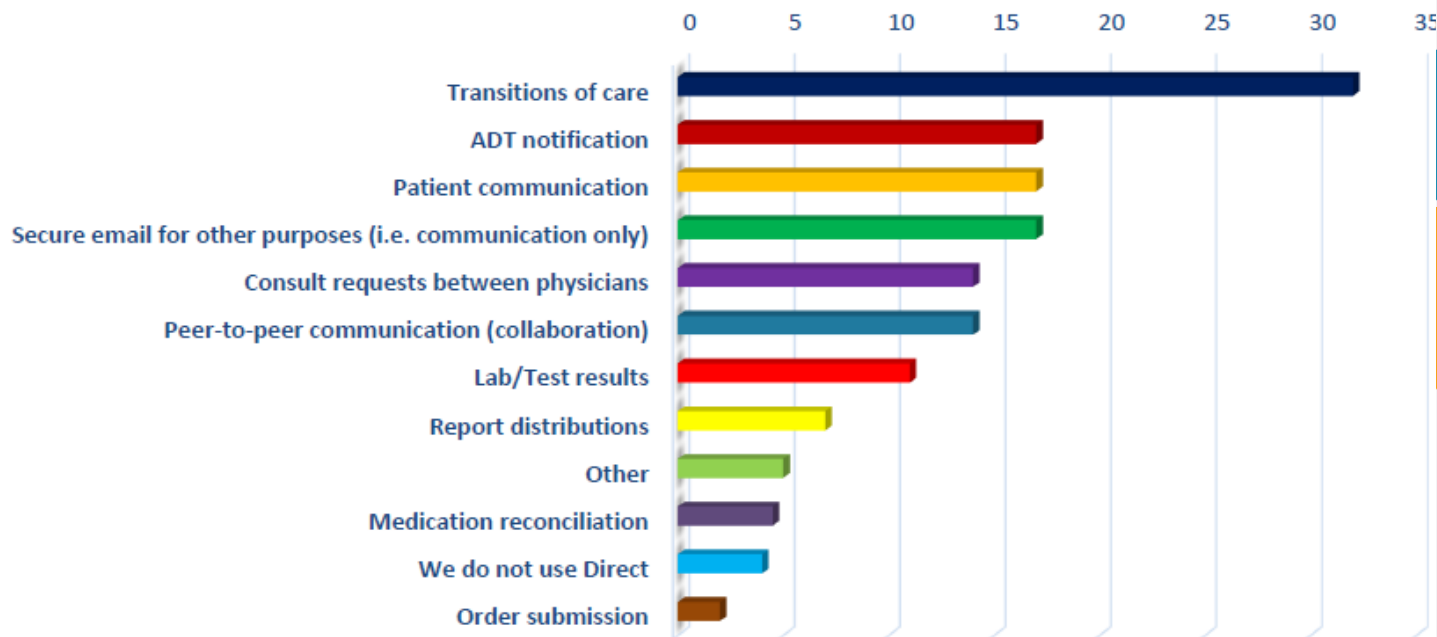
Access to over 300 EHRs, 50 HIEs, 35K HCOs



Direct secure messaging landscape

In which of the following are you currently using Direct Messaging?

(select all that apply)



"Other" uses listed include:

- Unapproved texting
- Prior authorizations and claim attachments
- Accreditation review of HISPs, CAs and RAs
- Getting samples of CCDs / CCDAs
- Access to digital images

2015 HIMSS HIE AND DIRECT MESSAGING

SURVEY RESULTS

67% of participants support Direct as the method of choice for exchanging data

Agree that the cost of using Direct is worth the benefit of information exchange

51%

67% of HIOs are part of a scalable trust network (e.g., DirectTrust, NATE, HealtheWay)

TOP BENEFITS OF USING DIRECT:

- 1 Improved speed of information access
- 2 Reduce paper handling
- 3 More accurate & complete patient information

TOP MAJOR CHALLENGES TO DIRECT IMPLEMENTATIONS:

- 1 High cost
- 2 Changing workflows
- 3 Other providers not ready to interface

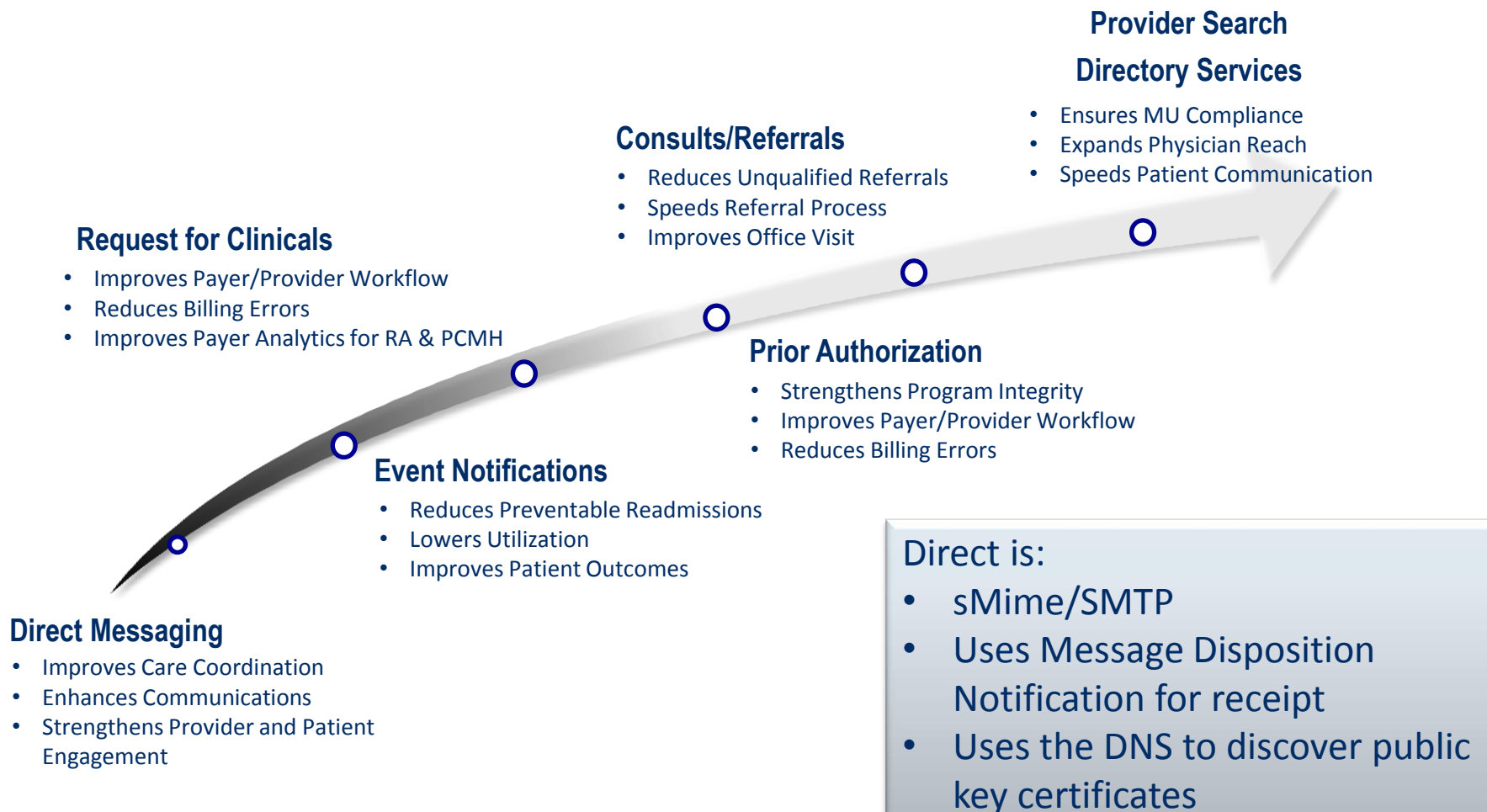
STILL **NO** STANDARD PROVIDER DIRECTORY FORMAT:

- 14%** report using LDAP
- 14%** use IHE HPD
- 18%** have no plans to adopt a standard
- 18%** are considering their options

Others use another proprietary standard or simply a relational database.

Direct secure messaging landscape

Direct is the underlying solution that enables true interoperability for better care management





In two separate studies, care coordination and care management are still reported among the leading challenges to the success of PCMH initiatives.

- Commins, John. Health Leaders Media, “Top PCMH Challenge” <http://healthleadersmedia.com/page-1/PHY-268852/Top-PCMH-Challenge-Coordinating-Care-with-Referral-Docs>
- Lauren M. Steckler, MHA; Sue S. Feldman, PhD, MEd, RN; and Carolyn A. Watts, PhD. The American Journal of Managed Care. “A Physician-led Accountable Care Organization: From Award to Implementation.” September 24, 2015. <http://www.ajmc.com/journals/ajac/2015/2015-vol3-n3/a-physician-led-accountable-care-organization-from-award-to-implementation#sthash.UDNIX5hj.dpuf>



PCMH and the Health Plan

Payers typically have advanced health tracking systems along with ample clinical information from:

- HL7 data (ADT ORU)
- CCDA
- X12 (claim, prior authorization, eligibility)

Payers can reduce healthcare delivery costs by communicating healthcare information to providers in a timely manner- helping providers overcome care management gaps and provider better coordinated care.



PCMH and the Health Plan

Payers can also leverage their wealth of data to communicate directly with members, providing guidance, follow up reminders and more information.

This builds patient engagement and compliance, improves follow up care, and leads to better outcomes.



Approaches to date

Current approaches to communication typically take this form:

- Secure email - email contains a link requiring a login
- Portal for doctors and patients
- Dedicated apps for a specific payer or provider

These approaches are cumbersome and expensive for health plans and for end users.

Email requiring a link

- Not user friendly.
- Separate systems/passwords for every sender, not retained by user.
- Expensive for the payers



Web portal / dedicated app

- Exists outside of regular workflows
- Requires separate login from EHR
- Multiple portals from multiple health systems and payers result in provider frustration and reduced utilization unless payer is sole source of income to provider.





Effective pushes of information

- Automated Notifications of Admission and Discharge
 - Hospitals push ADT's to centralized sites (usually to State HIEs)
 - The sites match the payer, provider and patient and route the information to care managers and providers (via Direct)
- The information appears within the EHR and/or HIE environment in which the provider already participates
- This is now expanding to give consumers more control over opt in/out, attribution and personal notification preferences.



Steps for implementation

1. Match members to providers
2. Implement Direct infrastructure (typically 2-4 weeks)
3. Discover Direct addresses for providers



Member communication

How is Direct used for payer-member communications?

- Microsoft Healthvault
- iTriage
- Your Care Universe
- Many new and emerging patient-centered applications



Results

- Reduced readmissions
- Lower communication costs
- Higher provider adoption



Future

- Additional message types are beginning to flow over Direct
 - Claim attachments
 - Prior Authorizations
 - Utilization reporting
 - Quality assessments
 - DME orders
 - And many more...
- Member communication is growing rapidly



Q&A / Thank You

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