# **Commonwealth of Massachusetts Executive Office of Health and Human Services**



# The Mass HIway Connection Requirement: Year 1 & Year 2

January 2018



## Today's presenter





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This presentation has been reviewed and approved by the Mass Hlway, and the presenters are acting as authorized representatives of the Mass Hlway.

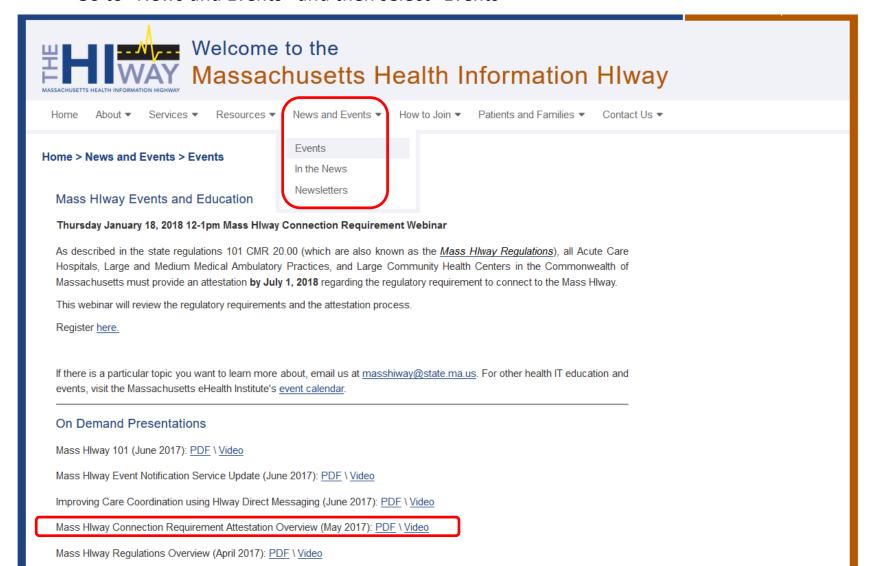
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### Mass HIway webinars



- Past webinars and presentations are available on the HIway website <u>www.masshiway.net</u>
- Go to "News and Events" and then select "Events"





### HIway connection requirement



- The *HIway connection requirement* is the requirement for providers to connect to the Mass HIway, as set forth in M.G.L. Chapter 118I (section 7) and as detailed in the Mass HIway Regulations (101 CMR 20.00).
- The providers that have a required HIway connection date that is specified in the Mass HIway Regulations are listed below.

Provider Organization	2017	2018	2019
Acute Care Hospitals	<b>Year 1</b> of the HIway connection requirement	<b>Year 2</b> of the HIway connection requirement	Year 3 of the HIway connection requirement
Large and Medium Medical Ambulatory Practices	<b>no</b> Hlway connection requirement	Year 1 of the HIway connection requirement	Year 2 of the HIway connection requirement
Large Community Health Centers	<b>no</b> Hlway connection requirement	<b>Year 1</b> of the HIway connection requirement	Year 2 of the HIway connection requirement
Small Community Health Centers	<b>no</b> Hlway connection requirement	<b>no</b> HIway connection requirement	<b>Year 1</b> of the HIway connection requirement

- Who & When: Provider organizations that have HIway connection dates that are specified in the Mass HIway Regulations are required to submit the applicable Attestation Form by July 1<sup>st</sup> in the applicable year.
  - In 2018, by July 1st: (1) Acute Care Hospitals: submit Year 2 Attestation Form
    - (2) Large & Medium Medical Ambulatory Practices + Large CHCs: submit Year 1 Attestation Form





#### Using the Mass HIway is as easy as 1-2-3!

- **1. Ask your vendor** if they are connected to, or able to connect to the HIway.
- **2. Contact us.** We will connect you with a Mass HIway Account Manager to get your organizations enrolled and connected.
- **3. Exchange** with your trading partners!

### The Massachusetts Health Information Highway (Mass Hlway)

Phone: 1.855.MA-HIWAY (1.855.624.4929)

Email for General Inquires: MassHlway@state.ma.us

Email for Technical Support: <u>MassHlwaySupport@state.ma.us</u>

Website: www.MassHlway.net





- 1. Introduction & background: The Mass HIway, Mass HIway Regulations, and the HIway connection requirement
- 2. Year 1 and Year 2 Attestation Forms
- 3. Conclusion



# The Mass HIway is the statewide, state-sponsored Health Information Exchange (HIE) operated by the Executive Office of Health and Human Services (EOHHS).

- **Mission:** The mission of the Mass HIway is to enable health information exchange by health care providers and other Mass HIway Users regardless of affiliation, location or differences in technology.
- The Mass HIway has two core functions:
  - Function #1 HIway Direct Messaging:
     i.e., a secure method of sending a transmission from one Mass HIway User to another, where the HIway does not use, analyze or share information in the transmissions
  - Function #2 HIway-Sponsored Services:

     i.e., services such as the forthcoming state-wide Event Notification Service (ENS), where the
     HIway may use, analyze, and/or share the minimal amount of information necessary to conduct the service, on behalf of HIway Participants
- The Mass HIway does <u>not</u> currently function as a clinical data repository
- The Mass HIway provides health information exchange across the state:
  - Over 1,200 HIway Participants, including organizations across the care continuum (including hospitals from 60+ organizations, ambulatory providers, long-term care facilities)



# HIway Direct Messaging offers a secure method for transmitting messages between HIway Users for a wide variety of use cases

- In the last 3 months of 2017, over 9 million HIway Direct Messages were transmitted each month
  - o including over 250,000 Provider-to-Provider transmissions (i.e., more than a 20% increase vs. 12 months ago)
- Mass HIway Direct Messaging allows secure transmission of information to support a wide variety of use cases, within several categories.
  - Use case categories include: Public Health Reporting, Provider-to-Provider Communications,
     Payer Case Management, Quality Reporting (as per the Mass HIway Policies & Procedures)
- HIway Users can connect to the Mass HIway by one of several connectivity options. This has supported broad participation in the Mass HIway.
  - HIway Participants can connect to the Mass HIway by several methods:
    - Direct EHR connection
    - a Local Access for Network Distribution (LAND) appliance connection
    - a HIway Trusted Health Information Service Provider (HISP)
    - a Webmail connection, which does not require an EHR
  - As a result of the multiple connectivity options the Mass HIway currently works with more than 44 EHR vendors, 25 HISPs, and 7 integration engines, through 13 deployment variations.



## The Mass HIway Regulations



#### The main purpose of the Mass HIway Regulations is to:

- Establish requirements for organizations that use the Mass HIway
- Implement the state statutory requirement for providers to connect to the Mass HIway (which is referred to in this presentation as the *HIway connection requirement*)
- Establish the mechanism to allow patients to opt-in and opt-out of the Mass HIway
- The regulations require that information be transmitted via HIway Direct Messaging in compliance with applicable federal and state privacy laws and implementing regulations, and thereby aligns the use of HIway Direct Messaging with other modes of transmission (e.g., sending information by fax or phone).
- The Mass HIway Regulations went into effect on February 10, 2017.
- In March 2017, EOHHS and the Mass HIway released supporting documents related to the Mass HIway Regulations:
  - Mass Hlway Regulations Summary
  - Mass HIway Regulations FAQs
  - Mass HIway Fact Sheet for Patients
  - Mass HIway Policies & Procedures (version 3). In October 2017 version 4 of the Policies & Procedures was released
- In April 2017, the HIway hosted a webinar providing a Mass HIway Regulations Overview
- In May 2017, the HIway hosted a webinar on the HIway Connection Requirement



### HIway connection requirement



The HIway connection requirement is implemented using a phased-in approach.

#### The phased-in approach has four aspects:

 Three types of Provider Organizations (i.e., Acute Care Hospitals, Large & Medium Medical Ambulatory Practices, Community Health Centers) have connection dates that are specified in the Mass HIway Regulations.

EOHHS anticipates that Provider Organizations which are not specified in the regulations will be required to connect at a future date, with future guidance providing at least one year notice for affected organizations to connect.

- 2. The three types of Provider Organizations have an initial "Year 1" connection requirement between 2017 and 2019.
- 3. How Provider Organizations fulfill the HIway connection requirement is phased-in over four years, with penalties for not meeting the requirement beginning in Year 4.
- 4. The statutory requirement that providers implement "interoperable EHR systems" that connect to the Mass HIway is fulfilled by implementing HIway Direct Messaging.



Section 20.06 of the Mass HIway Regulations provide the definitions of the Provider Organizations that have HIway connection dates specified in the regulations.

#### Acute Care Hospital:

- o hospital licensed under M.G.L. c111 s.51, and the teaching hospital of UMass Medical School
- see the List of Health Care Facilities Licensed or Certified by the Division\* (available here)

#### Medical Ambulatory Practice:

- an organization that includes licensed providers who provide primary or specialty outpatient health care
- Large Medical Ambulatory Practice: more than 50 licensed providers
- Medium Medical Ambulatory Practice: 10 to 50 licensed providers
- Small Medical Ambulatory Practice: less than 10 licensed providers

#### Community Health Center (CHC):

- o A Federally Qualified Health Center (FQHC) or a FQHC look-alike (as defined by HRSA), or
- An organization that files cost reports as a CHC, as requested by the Health Policy Commission
- Large CHC: 10 or more licensed providers
- o Small CHC: less than 10 licensed providers

<sup>\*</sup> This list is referred to as the Massachusetts Licensed or Certified Health Care Facility/Agency Listing in Section 20.06 of the regulations.



## **Provider Organizations (continued)**



- Section 20.06 of the Mass HIway Regulations provides details regarding the definitions that are mentioned in the previous slide. These details include the following:
  - Licensed providers: For the definitions in Section 20.06 of the regulations, licensed providers
    are limited to include medical doctors, doctors of osteopathy, nurse practitioners, or physician
    assistants.
  - O How to calculate the number of licensed providers: For the purposes of the regulations, the number of licensed providers that a Provider Organization has is calculated based on the number of licensed providers that provide health care services to patients on behalf of the provider organization in the month of June prior to that organization's initial required connection date to the Mass HIway, regardless of employment status.
- The Mass Hiway Regulations FAQs describes that the Mass Hiway Regulations set required Hiway connection dates for certain provider organizations (i.e., Acute Care Hospitals, Large & Medium Medical Ambulatory Practices, and Community Health Centers), and not for other types of provider organizations (e.g., nursing homes, dental clinics, behavioral health entities, Small Medical Ambulatory Practices, solo practices).



### HIway connection requirement: Years 1 - 4



The HIway connection requirement follows a four-year phased-in approach that progressively encourages use of the Mass HIway for Provider-to-Provider communications and bi-directional exchange of health information.

#### **How Provider Organizations connect:**

- <u>Year 1</u>: Send or receive HIway Direct Messages for **at least one use case**. The use case may be within **any category** of use cases.
- <u>Year 2</u>: Send or receive HIway Direct Messages for at least one use case that is within the **Provider-to-Provider Communications category** of use cases.
- <u>Year 3</u>: **Send** HIway Direct Messages for at least one use case, **and also receive** HIway Direct Messages for at least one use case. Both of these uses cases should be within the **Provider-to-Provider Communications category** of use cases.
- <u>Year 4</u>: The provider organization may be **subject to penalties**, if that organization has not met the requirements established in this section. Penalties do not take effect until Year 4 of the connection requirement (i.e., in January 2020, at the earliest).

**Acute Care Hospitals:** In addition to using HIway Direct Messaging, Acute Care Hospitals are also required to send Admission Discharge Transfer notifications (ADTs) to the Mass HIway within 12 months of the ENS' launch as a part of the HIway connection requirement.





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### HIway connection requirement



- The *HIway connection requirement* is the requirement for providers to connect to the Mass HIway, as set forth in M.G.L. Chapter 118I (section 7) and as detailed in the Mass HIway Regulations (101 CMR 20.00).
- The providers that have a required HIway connection date that is specified in the Mass HIway Regulations are listed below.

Provider Organization	2017	2018	2019
Acute Care Hospitals	Year 1	Year 2	Year 3
Large and Medium Medical Ambulatory Practices	<b>no</b> HIway connection requirement	Year 1	Year 2
Large Community Health Centers	<b>no</b> Hlway connection requirement	Year 1	Year 2
Small Community Health Centers	<b>no</b> Hlway connection requirement	<b>no</b> Hlway connection requirement	Year 1

• Who & When: Provider organizations that have HIway connection dates that are specified in the Mass HIway Regulations are required to submit the applicable Attestation Form by July 1<sup>st</sup> in the applicable year.

In 2018, by July 1st: (1) Acute Care Hospitals: submit Year 2 Attestation Form

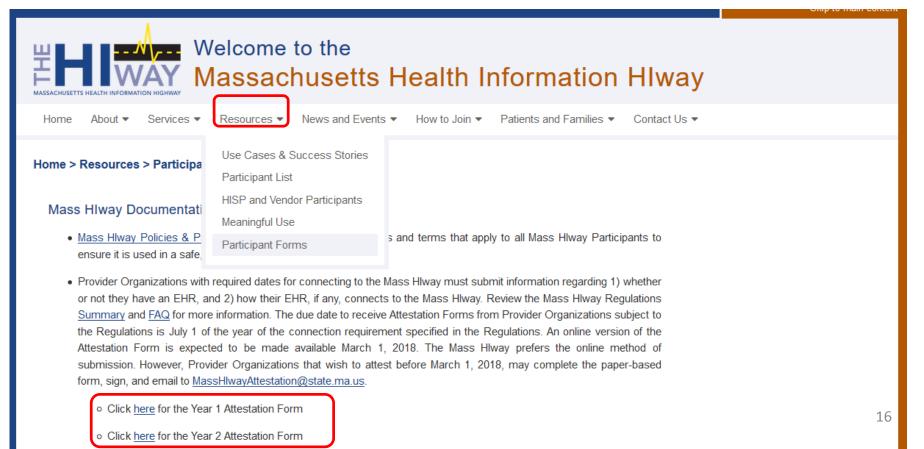
(2) Large & Medium Medical Ambulatory Practices + Large CHCs: submit Year 1 Attestation Form



### **Attestation Forms**



- The <u>Year 1</u> & <u>Year 2</u> Attestation Forms are available at the Mass HIway website: <u>www.masshiway.net</u>
- Go to the "Resources" drop-down menu, and then select "Participant Forms"
- There are two methods of completing and submitting the forms:
  - o The preferred method: the on-line version of the form (which is expected to be available in March 2018)
  - The alternate method: the PDF version of the form (which should be completed, printed, signed, scanned, and emailed to: <a href="MassHlwayAttestation@state.ma.us">MassHlwayAttestation@state.ma.us</a>)





### Year 1 Attestation Form: What



- The Year 1 & Year 2 Attestation Forms are six pages long, and must be used by provider organizations that have a HIway connection requirement date.
- The form collects two areas of information: (1) how the organization met the HIway connection requirement, and (2) does the organization have an EHR, and if so, how does it connects to the HIway

#### The Year 1 Attestation Form collects the following information:

- 1. How the organization met the Year 1 or Year 2 Hlway connection requirement:
  - Questions on the attestation form include:
    - In the Year 1 form: The use case is within what category of use cases?
       Categories include: (1) Provider-to-Provider Communications, (2) Payer Case Management, (3) Quality Reporting, (4) Public Health Reporting, (5) Other
    - Describe the use case
    - Approximate # of HIway Direct Messages per month for the use case
- 2. Does the organization have an EHR (and if so, how does it connect to the HIway):
  - Questions on the attestation form include:
    - Name and version of the EHR?
    - Is the EHR an ONC Certified Health IT Product?
    - How is the organization connecting to the HIway?
       Options include: (1) EHR directly to HIway, (2) EHR via a HISP, or (3) via Mass HIway webmail



### Attestation Forms: PDF versions



## Attestation Form Year 1 Mass HIway Connection Requirement



<u>Purpose</u>: This Attestation Form shall be completed by Provider Organizations in order to report compliance with the first year of the statutory requirement that Provider Organizations implement fully interoperable electronic health record (EHR) systems that connect to the Mass Hlway in accordance with the <u>Mass Hlway Regulations (101 CMR 20)</u>. The Mass Hlway is the Commonwealth's statewide, state-sponsored health information exchange. Instructions for this form appear as endnotes on pages 7 to 8 of this document.

An authorized individual at the applicable Provider Organization should complete and submit this Attestation Form by the date specified in the instructions. ¹ Contact MassHlwayAttestation@state.ma.us if you need assistance completing this Attestation Form or meeting the connection requirement.

#### Section A: Provider Organization Information:

- 1) Legal name of the Provider Organization (Example: George Washington Hospital):
- Street Address (Please include the address for the Provider Organization, not for the administrative or billing
  office if these are different):

Questions 3-5 are required in order to help identify the Provider Organization that is completing the Attestation Form.

- 3) Massachusetts Tax ID (TIN):
- 4) Organization NPI (Can be retrieved from the NPPES NPI Registry here: https://npiregistry.cms.hhs.gov/):
- 5) Provider Organization's Direct address domain(s)2:
- 6) Name of parent company or organization (if applicable):

Question 7 applies to a parent company or organization subject to the regulations that may include suborganizations or legal entities that are also subject to the regulations based on the definition of Provider Organization in Section 20.08 of the regulations.

7) Name all of the sub-organizations or legal entities that are subject to the Year 1 Connection Requirement AND use the same implementation of an EHR and domain as the parent company or organization. A single Attestation Form from the parent organization may be sufficient to cover the attestation requirement for all Provider Organizations subject to the Mass HIway Regulations that use the same implementation of and EHR and domain. The Mass HIway may require separate Attestation Forms as it deems necessary. If the suborganizations or legal entities are using a different EHR system and domain than the parent organization, separate Attestation Forms are required.

Contact MassHlwayAttestation@state.ma.us if you need clarification or assistance in completing Question 7.

1

### An updated version of the Year 1 Attestation Form was released in December 2017

Attestation Form Year 1 Mass HIway Connection Requirement				
<u>Purpose</u> : This attestation form shall be completed by Provider Organizations in order to report compliance with the statutory requirement that Provider Organizations implement fully interoperable electronic health record systems that connect to the Mass Hiway, (Mass Hiway Regulations). The Mass Hiway is the Commonwealth's state-wide, state-sponsored health information exchange. Instructions for this form appear as footnotes.				
An authorized individual at the applicable Provider Organization should complete this attestation form, then print, sign, and email the completed form to the Mass Hiway at MassHiwayAttestation@state.ma.us by the dates specified in the instructions.1				
1. Name of the Provider Organization: <sup>2</sup>				
2. Street Address of the Provider Organization:3				
3. Provider Organization Tax ID (TIN):4				
4. Description of the Use Case that has been implemented to meet the Year 1 connection requirement:				
a) Descriptive name for the Use Case:5				
b) Date that the Use Case was implemented (MM/YYYY): <sup>6</sup>				
c) Category of Use Case (select only one):7				
Provider to Provider Communications Quality Reporting				
Payer Case Management Public Health Reporting				
Other (please specify)				
d) Does this Use Case involve the Provider Organization sending a HIway Direct Message, or receiving a HIway Direct Message, or both? (Select only one of the three following options):				
The Use Case involves the Provider Organization sending, but not receiving a HIway Direct Message.				
The Use Case involves the Provider Organization receiving, but not sending a HIway Direct Message.				
The Use Case involves the Provider Organization both sending and receiving a HIway Direct Message.				
e) Name of the other entity (or entities) participating in the exchange of information for the Use Case: <sup>8</sup>				
Please check the box below, to confirm that you have coordinated with the other entity (or entities) for this Use Case, in order to establish that the other entity is receiving and able to use the transmission.  The Provider Organization attests that the work flow or process for this Use Case has been coordinated with the other entity (or entities) listed in 4(e).				
f) Describe the scope of the activity addressed by the Use Case: 9				
g) Describe the scope of the organization(s) involved in the Use Case: <sup>10</sup>				
h) Approximate expected message volume per month. 11				



### Attestation Forms: On-line Version



- On-line versions of the Year 1 & Year 2 Attestation Forms are expected to be available in March 2018.
- It is recommended that an organization should prepare all the answers that will be entered before starting to complete the on-line form in an internet browser, since the on-line form can't be partially saved for completion at a later date. Downloading the PDF version of the form may help with this step.





### **Section 1: Provider Organization Information**

- 1. Legal name of the Provider Organization
- 2. Street Address of the Provider Organization
- 3. Massachusetts Tax ID (TIN) of the Provider Organization
- 4. Organization NPI
- 5. Provider Organization's Direct address domain
- 6. Name of parent company or organization (if applicable)
- 7. Name all of the sub-organizations or legal entities that are subject to the Year 1 Connection Requirement and use the same implementation of an HER and domain as the parent company or organization

Contact <u>MassHIwayAttestation@state.ma.us</u> if you need clarification or assistance in completing Question 7.



### Attestation Form: Section B



#### **Section B: Documentation of the Use Case**

- 8. Descriptive name for the Use Case
- 9. Approximate date that the Use Case was implemented
- 10. Category that the Use Case falls within:

Year 1 Form	Year 2 Form
<ul> <li>Select 1 of 4 options:</li> <li>Provider to Provider Communications</li> <li>Payer Case Management</li> <li>Quality Reporting</li> <li>Public Health Reporting</li> </ul>	Provider to Provider Communications is the only option

- 11. Does this Use Case involve the Provider Organization sending a HIway Direct Message, or receiving a HIway Direct Message, or both? (Select only one)
  - The Use Case involves the Provider Organization sending, but not receiving a HIway Direct Message.
  - The Use Case involves the Provider Organization receiving, but not sending a HIway Direct Message.
  - The Use Case involves the Provider Organization both sending and receiving a HIway Direct Message.
- 12. Name(s) of the other entity (or entities) participating in the exchange of information for the Use Case



### Attestation Form: Section B (continued)



- 13) Specify the type of entity (or entities) identified in question 12 that are participating in the exchange of information for the Use Case
- 14) Specify the type of information sent and/or received as part of the Use Case (select all that apply)
  - Discharge Summary Admission,
  - Discharge, Transfer (ADT)
  - Referral summary
  - Summary of care
  - General assessment
  - Other (please specify)
- 15) Specify the format of information send and/or received as part of the Use Case
  - CCD
  - C-CCDA/CCDA
  - Secure message
  - PDF
  - Other (please specify)



### Attestation Form: Section B (continued)



- 16) Estimate the percent of direct messages that are sent and/or received via the Mass HIway as part of the Use Case
  - Less than 25% of Direct Messages for the Use Case are sent and/or received via the Mass HIway
  - Between 25-99% of Direct Messages for the Use Case are sent and/or received via the Mass HIway
  - 100% of Direct Messages for the Use Case are sent and/or received via the Mass HIway; we do not use supplemental methods
- 17) Estimate the number of transactions sent per month as part of the Use Case
  - Less than 100 Direct Messages
  - Between 100 to 1,000 Direct Messages
  - Over 1,000 Direct Messages



## Attestation Form: Section C



### Section C: EMR / EHR System Information

- 18) Is your Provider Organization using an Electronic Medical Record (EMR) or an Electronic Health Record (EHR) system for the Use Case described in this Attestation? (yes / no)
- 19) Name of the EMR / EHR system
- 20) Version of the EMR / EHR system
- 21) How is the EMR / EHR system connecting to the Mass HIway (please select only one):
  - directly to the Mass HIway
  - via a HISP other than the Mass HIway
- 22) Is the EMR / EHR system an ONC Certified Health IT Product (yes / no)
- 23) How is your Provider Organization connecting to the Mass HIway (if your organization doesn't have an EMR/EHR system)?
  - via Mass HIway Webmail
  - via some other method (please specify)



#### **Section D: Contact information**

Enter contact information for the person(s) at the Provider Organization if the Mass HIway has technical or operational questions regarding this Attestation form: (up to 3 persons may be listed)

### **Section E: Signature**

As an authorized representative of the Provider Organization listed in Question #1, above, I attest that I am authorized to complete and submit this Attestation Form, that I have read the questions, and that the information submitted is true and correct.



### **Attestation Forms: Process**



- General questions about the Attestation Forms should be sent via email to: <u>MassHlway@state.ma.us</u>, with the subject line of "Attestation Form"
- Completed Attestation Forms (both on-line and paper versions) get submitted to: MassHlwayAttestation@state.ma.us
- The Mass HIway will send a confirmation email notification to the Provider Organization once the Mass HIway has received an Attestation Form.



- 1. Introduction & background: The Mass HIway, Mass HIway Regulations, and the HIway connection requirement
- 2. Year 1 and Year 2 Attestation Forms
- 3. Conclusion





#### Past HIway webinars are available on the Mass HIway website:

- Go to the Mass HIway website at <u>www.masshiway.net</u>
- Then, go to "News & Events" and next select "Events"

#### **Upcoming Mass HIway events and webinars:**

- Mass HIway Webinars: all webinars are Thursdays, noon-1pm
- Mass Hlway Newsletter & Operations Updates: To receive notifications about the Hlway, subscribe to receive the Mass Hlway Newsletter on the Hlway's home page at www.MassHlway.net



### Mass HIway Newsletter & Updates



To receive the updates related to the Mass HIway, sign up to receive the Mass HIway Newsletter on the Mass HIway's web page at: www.MassHIway.net





- Leading up to the July 2018 attestation form due date, EOHHS expects to receive questions about the HIway connection requirement and attestation process
- EOHHS encourages stakeholders to contact the HIway with questions and comments related to the HIway connection requirement
  - EOHHS anticipates reviewing questions and updating the <u>Mass HIway Regulations</u>
     FAQs prior to the July 2018 attestation due date
  - To ask a general questions about the connection requirement & attestation process: MassHlway@state.ma.us
  - o To submit a completed attestation form: MassHlwayAttestation@state.ma.us



## Mass HIway contact information



### Thank you!

The Massachusetts Health Information Highway (Mass HIway)

Phone: 1.855.MA-HIWAY (1.855.624.4929)

Email for General Inquires: MassHIway@state.ma.us

Email for Technical Support: <u>MassHlwaySupport@state.ma.us</u>

Website: www.MassHlway.net





### **Appendix A:**

Selected slides from the HIway Regulations Overview, presented at the April 2017 Mass HIway Webinar



# Use Cases for HIway Direct Messaging



Use Case Categories	Example Use Cases	
Provider-to- Provider Communications	<ul> <li>Hospital sends a discharge summary to a Skilled Nursing Facility (SNF) or Long Term/Post Acute Care (LTPAC) facility</li> <li>Primary Care Provider (PCP) sends a referral notice to a specialist</li> <li>Specialist sends consult notes &amp; updated medications list to patient's PCP</li> <li>Hospital ED requests a patient's medical record from a PCP</li> <li>PCP sends a CCD or C-CDA with Problems, Allergies, Medications, and Immunizations (PAMI) to a Hospital caring for their patient</li> </ul>	
Payer Case Management	<ul> <li>ACO sends quality metrics to a payer</li> <li>Provider sends lab results to a payer</li> <li>Provider sends claims data to payer</li> </ul>	
Quality Reporting	<ul> <li>Provider sends clinical data to Business Associate for quality metrics analysis</li> <li>Provider sends quality metrics to Business Associate for report preparation</li> </ul>	
Public Health Reporting	<ul> <li>Provider sends to DPH:         <ul> <li>Massachusetts Immunization Information System (MIIS)</li> <li>Syndromic Surveillance (SS)</li> <li>Opioid Treatment Program (OTP)</li> <li>Childhood Lead Paint Poison Prevention Program (CLPPP)</li> </ul> </li> <li>Provider sends to other agencies:         <ul> <li>Occupational Lead Poisoning Registry (Adult Lead)</li> <li>Children's Behavioral Health Initiative (CBHI)</li> </ul> </li> </ul>	



# The regulations describe what information may be transmitted via HIway Direct Messaging

- Information may be transmitted via HIway Direct Messaging in compliance with applicable federal and state privacy laws and regulations (e.g., HIPAA, 42 CFR Part 2, M.G.L. Chapter 93H).
- This aligns the use of HIway Direct Messaging with other modes of transmission (e.g., sending information by fax or phone).
- Mass HIway Users have the option of implementing a local opt-in and/or opt-out process that applies to the use of HIway Direct Messaging by their organization.



The regulations describe that an **opt-in opt-out mechanism for Hlway-Sponsored Services** will be implemented and operated by the Mass Hlway once these services are launched by the Mass Hlway.

- Opt-in by written notice: The opt-in mechanism will be fulfilled by HIway Participants informing patients through written notice how the HIway Participant intends to use HIway-Sponsored Services, and how the patient can opt-out of HIway-Sponsored Services.
- <u>Centralized opt-out:</u> The Mass HIway or its designee will administer a centralized opt-out system for HIway-Sponsored Services that will implement a mechanism for individuals to choose not to participate in HIway-Sponsored Services.
- <u>Supplemental local processes</u>: HIway Participants can elect to implement additional local opt-in and/or opt-out processes that apply to their organization's use of HIway-Sponsored Services; these additional processes must supplement and not replace the HIway's opt-in opt-out mechanism.



### Implications for stakeholders



### For patients:

- Key information for patients about the HIway is provided in the updated HIway Fact Sheet for Patients.
- The Mass HIway does not currently function as a clinical data repository that holds electronic medical records for individuals. Patient's electronic health record(s) are held by specific provider organizations and not the Mass HIway.

### The Mass HIway:

**Fact Sheet for Patients** 





he Mass HIway is a secure statewide Health Information Exchange that allows your healthcare providers to safely and quickly send your health information to where it is most needed.

Doctors or nurses can care for you better when they have important information about your health. The Mass HIway is designed to make this safer and faster. The goal is better care coordination and quality for you and your family.

#### What is the Mass HIway?

- Mass Hlway is the statewide health information exchange (HIE).
   Healthcare providers can use the Mass Hlway to quickly and securely send and receive your health information to better coordinate your care.
- The Mass Hiway is managed by the Commonwealth of Massachusetts' Executive Office of Health and Human Services (EOHHS).

#### How does the Mass HIway protect my information?

The Mass HIway has security measures in place to protect your information that aren't true of current methods, like fax, mail, or portable media like a CD or USB (flash drive), such as:

- Using a special code so that only authorized providers can read the information sent over the Mass HIway (this is known as encrypting data).
- Establishing policies and procedures that authorize the Mass Hlway to suspend Hlway participants as necessary to prevent unauthorized use of the Mass Hlway.
- Overseeing who has access to the Mass HIway and who has used it for a patient's healthcare.

#### How can the Mass HIway help me?

- If you were discharged from a hospital, the Mass Hlway can be used by the hospital to send your doctor a note about your hospital stay so that he or she is up to date about healthcare that you have received.
- If you get tests done, the doctor can use the Mass Hilway to send the results to other members of your healthcare team, like your specialist.
   This helps them coordinate your care. It can also save time and money by reducing the need for repeat tests.
- If you have a chronic condition your health insurer case manager can use the Mass Hiway to communicate with your doctors to coordinate your care and help you stay healthy.
- Not all of your healthcare providers may be using the Mass Hlway yet. There may be more benefits to you as more healthcare organizations use the Mass Hlway.

#### Who can use the Mass HIway and why?

- Currently the Mass Hlway may only be used by healthcare organizations (like doctors' offices, hospitals, public health agencies, and health insurers).
- The Mass HIway can only be used for information sharing as allowed by federal and state privacy laws. You still need to give special permission for providers to request and receive certain sensitive information. You can speak to your healthcare provider about what information is sent over the Mass HIway.

#### Can I request my medical record from the Mass HIway?

 No. A patient's medical record itself is not part of the Mass Hlway system. Talk to your provider for information about how to obtain your medical records.

#### Want more information?

- Talk with your doctor or their office staff about how they are using the Mass Hlway.
- Visit www.masshiway.net, email us at masshiway@state.ma.us, or call us at 1-855-MA-Hlway (624-4929) and press 3.