Mass HIway Regulations

Overview of the Mass HIway Regulations
and the implications for
healthcare providers, patients and other stakeholders

April 2017
Today’s presenters

Michael Chin, MD  
Mass Health Senior Policy Analyst  
Assistant Professor, Department of Family Medicine & Community Health, University of Massachusetts Medical School  
Michael.Chin@umassmed.edu

Murali Athuluri  
Lead Mass HIway Account Manager  
Executive MBA with Value Measurement in Healthcare, Harvard Business School  
mathuluri@maehc.org

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

The information provided in this presentation is for general information purposes only, and in no way modifies or amends the statutes, regulations, and other official statements of policy and procedure that govern access to and use of the Mass HIway.
About the MA HIway Account Management Team:

- Massachusetts eHealth Collaborative (MAeHC) was selected by EOHHS through an open bid process to serve as the Mass HIway’s Account Management team.

- Working in partnership with the Mass HIway, our team delivers outreach, education, and on site user support services to the provider community and participants, with a goal of increasing adoption and effective utilization of the Mass HIway across the Commonwealth.

- The Mass HIway Account Management Team includes:
  - Mark Belanger
  - Murali Athuluri
  - Len Levine
  - Jennifer Monahan
  - Kelly Luchini
## Agenda

1. Introduction to the Mass HIway
2. Overview of the Mass HIway Regulations
3. Implications for healthcare providers, patients, and other stakeholders
4. Getting Connected to the Mass HIway
5. Conclusion & discussion
Health Information Exchange is defined as...

- **verb**: the process by which the data can be exchanged
- **noun**: the organization that facilitates the exchange

Today the focus is on the Mass HIway, which is the statewide, state-sponsored Health Information Exchange (HIE) for the Commonwealth of Massachusetts, which provides health information exchange services for healthcare providers across the state.
The Mass HIway is the statewide, state-sponsored Health Information Exchange (HIE) operated by the Executive Office of Health and Human Services (EOHHS).

Mass HIway provides secure, electronic transport of health-related information between healthcare organizations.

- HIway Direct Messaging is used by providers to easily send patient information—such as laboratory orders and results, patient referrals, or discharge summaries—directly to another health care professional.

- HIway Direct Messaging functions like regular e-mail with additional security measures to ensure that messages are only accessible to the intended recipient, per the protection regulations of the Health Insurance Portability and Accountability Act (HIPAA).

- The Mass HIway does **not** currently function as a clinical data repository HIE.

- The Mass HIway is **not** the state health *insurance* exchange known as the Health Connector.
• Most software vendors already offer direct messaging services for their users, however the Mass HIway offers a single channel intended for use by all providers in the Commonwealth regardless of affiliation, location, or differences in technology.

• Current Mass HIway Participants represent a variety of providers and care settings, ranging from practices to hospitals, covering primary, ambulatory, acute, long-term, post-acute, behavioral health, home health and other facilities.

• New Mass HIway Participants enroll daily, and Participants produce millions of HIway transactions each month.
# HIway Participants by Level of Care

## Care Continuum

<table>
<thead>
<tr>
<th>Hospitals</th>
<th>Ambulatory</th>
<th>Long-Term &amp; Post-Acute</th>
</tr>
</thead>
<tbody>
<tr>
<td>Approximately 63</td>
<td>More than 881 organizations/providers</td>
<td>Approximately 70 organizations</td>
</tr>
<tr>
<td>organizations</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Mix of large networks and medical centers to single-site community hospitals |  
Range of services and organization types including but not limited to: Area Agency on Aging (AAA) Aging Service Access Point (ASAP), Skilled Nursing Facilities (SNF), nursing homes, Inpatient Rehabilitation Facilities (IRF), home health, palliative care, and hospice |
|                         | Primary care providers and specialists across a broad range of medical services |  
Health centers and clinics providing medical, emotional, behavioral, and additional social services  
Urgent care and minute clinics |  

**Note:** 10+ orgs such as Labs, Payers, Imaging Centers, business associates etc.
An interactive participant map of all Mass HIway Participants is updated monthly, and is available on the Mass HIway website.

Find the map at the Mass HIway website (www.masshiway.net). Under the Resources drop-down menu, select Participant List. The map is maintained in partnership with the Massachusetts eHealth Institute (MeHI).
Mass HIway website

Welcome to the Massachusetts Health Information HIway

Important Update

The final Mass HIway Regulations are now available and are in effect as of February 10, 2017.

Click here for a summary of the Mass HIway Regulations, and click here for frequently asked questions about the Mass HIway Regulations.

The Massachusetts Health Information HIway (Mass HIway)

In October 2012, Massachusetts launched the statewide electronic health information exchange, the Massachusetts Health Information HIway (The Mass HIway). The Mass HIway is not a clinical data repository and instead, offers doctors’ offices, hospitals, laboratories, pharmacies, skilled nursing facilities, and other healthcare organizations a way to securely and seamlessly transmit vital data electronically.

This meaningful exchange of information can
Mass HIway Benefits

In addition to improving care coordination with other healthcare providers, public health and quality reporting, the HIway can help your organization:

✓ **Participate in various programs and initiatives:**
  - Meaningful Use Stage 2 – Transition of Care and Public Health Reporting measures
  - CMS Delivery System Transformation Initiatives (DSTI)
  - Community Hospital Acceleration, Revitalization and Transformation Grants (CHART)
  - Massachusetts Infrastructure and Capacity Building Grants (ICB)
  - Massachusetts Prevention and Wellness Trust Fund
  - Patient Centered Medical Home (PCMH)
  - Accountable Care Organization (ACO)

✓ **Comply with Massachusetts Law**
  - Connecting to the Mass HIway satisfies the Board of Registration in Medicine (BORIM) EHR proficiency requirement for license renewal (MGL Chapter 224) and requirement for connection to the statewide health information exchange (MGL Chapter 118I)
The Mass HIway has two core functions:

- **Function #1 – HIway Direct Messaging:**
  i.e., a secure method of sending a transmission from Provider A to Provider B, 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.
## Use Case Categories

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

**User types**
- Physician practice
- Hospital
- Long-term care
- Other providers
- Public health
- Health plans

**Connectivity options**
- EHR connects directly
- EHR connects through LAND Appliance
- EHR connects via HISP (Health Information Service Provider)
- User connects via webmail

**HIE Services**
Providing multiple connectivity options has supported **broad participation in the Mass HIway**. The Mass HIway currently works with more than 44 EHR vendors, 23 HISPs, and 7 integration engines, through **13 deployment variations**.
The Mass HIway is currently connected to, or in the process of connecting to, the following vendors:

<table>
<thead>
<tr>
<th>Advanced Data Systems</th>
<th>Eaglesoft Clinician</th>
<th>LMR</th>
<th>SEE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Allscripts</td>
<td>eClinicalWorks</td>
<td>Lytec MD (McKesson)</td>
<td>Siemens</td>
</tr>
<tr>
<td>Amazing Charts</td>
<td>eHana</td>
<td>Matrix</td>
<td>SMART</td>
</tr>
<tr>
<td>AMS</td>
<td>EMA Modernizing Medicine</td>
<td>MatrixCare</td>
<td>Soarian (Cerner)</td>
</tr>
<tr>
<td>Aprima</td>
<td>E-MDs</td>
<td>Mckesson</td>
<td>Spring Charts</td>
</tr>
<tr>
<td>ASPMD</td>
<td>Encite</td>
<td>Medflow</td>
<td>STC</td>
</tr>
<tr>
<td>Athenahealth</td>
<td>Epic</td>
<td>Meditech</td>
<td>Suncoast Solutions</td>
</tr>
<tr>
<td>Axxess</td>
<td>Flatiron</td>
<td>MediTouch</td>
<td>Surescripts</td>
</tr>
<tr>
<td>BayCIS</td>
<td>GE</td>
<td>Mednet Medical (EMR4MD)</td>
<td>Unitcare</td>
</tr>
<tr>
<td>Care At Hand</td>
<td>gEHRiMed</td>
<td>Netsmart</td>
<td>Vista</td>
</tr>
<tr>
<td>Care360 (Quest)</td>
<td>Greenway</td>
<td>Nextech</td>
<td>WebOMR</td>
</tr>
<tr>
<td>Carelogic</td>
<td>HCHB</td>
<td>NextGen</td>
<td>Zoll</td>
</tr>
<tr>
<td>Cerner</td>
<td>HealthWyse</td>
<td>Office Practicum</td>
<td></td>
</tr>
<tr>
<td>ComChart</td>
<td>HermesIQ</td>
<td>Physician's Computer Company</td>
<td></td>
</tr>
<tr>
<td>Compulink</td>
<td>HomeCare</td>
<td>Point Click Care</td>
<td></td>
</tr>
<tr>
<td>CPSI</td>
<td>Homecare Homebase</td>
<td>Point N Click</td>
<td></td>
</tr>
<tr>
<td>Credible</td>
<td>Homegrown</td>
<td>Practice Fusion</td>
<td></td>
</tr>
<tr>
<td>Delta (Encore product)</td>
<td>icanotes</td>
<td>Practice Partners</td>
<td></td>
</tr>
<tr>
<td>Dentrix</td>
<td>Impreva</td>
<td>Practice Perfect</td>
<td></td>
</tr>
<tr>
<td>Docutat</td>
<td>Kantime</td>
<td>Prospect</td>
<td></td>
</tr>
</tbody>
</table>
In response to customer demand and certification requirements, a growing number of EHR vendors are integrating Direct Exchange standards into their products and providing connections on behalf of its users—also known as a Health Information Service Provider (HISP).

A HISP is an organization that manages security and transport for health information exchange among health care entities or individuals using the Direct standard for transport.

Functions can be performed by existing organizations (such as EHR vendors or HIE organizations) or by standalone organizations specializing in HISP services.

HISPs perform two key functions that support scalability of exchange using the Direct standard.

- **Establish trust networks** by defining policies for network participation, issuing security certificates tied to a HISP anchor certificate to enforce such policies, and verifying HISP participant identity
- **Issue direct addresses** tied to the HISP anchor certificate in accordance with conventions defined by the Direct standard
Mass HIway is interconnected with several private HISPs – A rich network for HIway
Direct Messaging is fully available to MA providers
23 HISPs Connected to Mass HIway

1. Allscripts (MedAllies HISP)
2. Aprima
3. Athenahealth
4. CareAccord
5. CareConnect (NetSmart HISP)
6. Cerner
7. DataMotion
8. eClinicalWorks
9. eClinicalWorks Plus
10. eLINC
11. EMR Direct
12. Inprivia
13. MaxMD
14. MatrixCare
15. McKesson (RelayHealth)
16. Medicity
17. MyHealthProvider (Mercy Hospital)
18. NextGen Share
19. NHHIO
20. SES
21. Surescripts
22. UpDox
23. Wellport (Lumira HISP)

3 HISPs In Process of Connecting to Mass HIway

<table>
<thead>
<tr>
<th>HISP Vendor</th>
<th>Kickoff</th>
<th>Onboarding</th>
<th>Testing</th>
<th>HIway Prod Readiness</th>
<th>Live/Target Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>ASP.md</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>TBD</td>
</tr>
<tr>
<td>Care 360</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>TBD</td>
</tr>
<tr>
<td>IICA-Direct</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>TBD</td>
</tr>
</tbody>
</table>

Source: HIT Council Presentation (February 2017)
1. Introduction to the Mass HIway
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The main purpose of the Mass HIway Regulations is to:

- Establish requirements for organizations that use the Mass HIway; and
- Implement key requirements of M.G.L. Chapter 118I, which include:
  a) The requirement for providers in Massachusetts to implement a fully interoperable electronic health record (EHR) system that connects to the Mass HIway; and
  b) The establishment of a mechanism to allow patients to opt-in and opt-out of the Mass HIway.
Under Section 7 of M.G.L. Chapter 118I, which took effect on January 1, 2017, all providers in the Commonwealth “shall implement fully interoperable electronic health records systems that connect to the statewide health information exchange."

The Mass HIway Regulations were developed through an open, public process, during which EOHHS gathered feedback from the state's Health Information Technology (HIT) Council, the Council's advisory groups, and other stakeholders from across the state. The process included a public comment period and public hearing held in the fall of 2016.

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 HIway Regulations Summary
- Mass HIway Regulations FAQs
- Mass HIway Policies & Procedures (version 3)
- Mass HIway Fact Sheet for Patients
The regulations and supporting documents are available on the Mass Hiway website.
The regulations answer the “who, when and how” regarding the HIway connection requirement.

**Who must connect:**

- At this time, only those **Provider Organizations** that are specified in the regulations, as opposed to individual licensed professionals, are required to connect to the Mass HIway.

- The regulations implement a **phased-in approach whereby three groups of Provider Organizations have HIway connection dates specified in the regulations**, and other types of Provider Organizations will be required to connect at later dates that are not yet specified.
  
  - The following three groups of Provider Organizations have required HIway connection dates that are specified in the regulations: (1) Acute Care Hospitals; (2) Large & Medium Medical Ambulatory Practices; and (3) Community Health Centers

  - Other types of Provider Organizations (e.g., behavioral health entities, dental clinics, and nursing homes) will be required to connect at a date that will be specified in the future. Future guidance will provide at least one year notice for affected provider organizations to connect to the Mass HIway.
When must Provider Organizations connect:

- The regulations implement a **phased-in approach** where the initial “Year 1” HIway connection requirement occurs between 2017 and 2019 for the three types of Provider Organizations that have connection dates specified in the regulations.

- The **three types of Provider Organizations** have the following initial HIway connection dates:
  - **Acute Care Hospitals:** February 10, 2017
  - **Large & Medium Medical Ambulatory Practices:** January 1, 2018
  - **Large Community Health Centers:** January 1, 2018
  - **Small Community Health Centers:** January 1, 2019

**Note:** Definitions of these Provider Organizations are in section 20.06 of the regulations where Medical Ambulatory Practices and Community Health Centers are defined as **small** if they have fewer than 10 licensed providers (i.e., medical doctors, doctors of osteopathy, nurse practitioners or physician assistants).
The HIway connection requirement: How

How Provider Organizations connect:

The regulations implement a four-year phased-in approach regarding how Provider Organizations fulfill the HIway connection requirement:

• Year 1: Send or receive HIway Direct Messages for at least one use case. The use case may be within any category of use cases.

• Year 2: Send or receive HIway Direct Messages for at least one use case that is within the Provider-to-Provider Communications category of use cases.

• Year 3: 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.

• Year 4: The provider organization may be subject to penalties, if that organization has not met the requirements established in this section.
  o The penalty schedule and amounts are described in section 20.14 of the regulations.
  o Under the four-year phased-in approach implemented by the regulations, 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.
The regulations and the Mass HIway Policies & Procedures describe the following requirements related to EHR systems:

- Provider Organizations with specified dates for connecting to the Mass HIway will be required to attest to: (a) whether or not they have an EHR, and (b) how their EHR, if any, connects to the Mass HIway.

- Provider Organizations that have HIway connection dates specified in the regulations will fulfill the M.G.L. Chapter 118I requirement that providers establish interoperable EHR systems that connect to the Mass HIway by implementing HIway Direct Messaging.

- Provider Organizations may implement HIway Direct Messaging by one of several methods, including:
  - an EHR's Direct XDR connection
  - a Local Access for Network Distribution (LAND) appliance connection
  - a Webmail connection, which does not require an EHR
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.
Opt-in Opt-Out

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

- **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.

- **Centralized opt-out:** 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.

- **Supplemental local processes:** 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.
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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.
Implications for stakeholders

For health care organizations who are *already* connected to the HIway:

- The alignment of HIway Direct Messaging with other modes of transmission (e.g., sending information by fax or phone) will make using HIway Direct Messaging easier and more efficient.
- Some organizations may need to update their processes around using HIway Direct Messaging and may need to provide updated information to their patients about the Mass HIway.

For health care organizations who are *not yet* connected to the HIway:

- The regulations provide details on the HIway connection requirement and penalties for not meeting the requirement.
For all health care organizations and providers:

- The regulations set the minimum requirements for connecting to the Mass HIway. Organizations are encouraged to do more than the minimum, and many are already doing so.

- The number of healthcare organizations using the Mass HIway is continuing to grow, and includes the full spectrum of healthcare organizations (including hospitals, ambulatory clinics, long-term health facilities, home health agencies, payers, public health entities, etc.)

For Acute Care Hospitals:

- Year 1 Attestation Forms must be submitted to the HIway by July 1, 2017.
- The Year 1 Attestation Form is provided in the Mass HIway Policies & Procedures.

For the health care community:

- The phased-in HIway connection requirement encourages healthcare provider organizations to use the Mass HIway to progressively implement Provider-to-Provider communications, in order to improve care coordination.
- The regulations provide the foundation for the forthcoming statewide Event Notification Service (ENS), which aims to support more efficient and coordinated healthcare for patients.
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If your organization is interested in connecting to the Mass HIway contact any member of the Mass HIway Account Management Team:

- Enrollment
- Onboarding
- Addressing
- Connection steps
- Use case identification
- Exchanging with your trading partners

Murali Athuluri
Lead HIway Acct. Manager
(781) 296-3857
mathuluri@maehc.org

Len Levine
LLevine@maehc.org

Kelly Luchini, PMP
Kluchini@maehc.org

Jennifer Monahan
JMonahan@maehc.org
Connection to the Mass HIway is dependent on capabilities of your EHR vendor and your organization’s technical architecture. Your Account Manager will walk you through the connectivity options to find the best solution for you:

- Direct XDR connection to EHR
- Local Access Network Distribution (LAND) appliance
- Webmail

Your account manager will also help you set up your addresses for the Provider Directory

The implementation team will configure and test the solution and bring your organization live

Note: Above timelines are indicative of a typical effort time spent by the Mass HIway team from the time all of the completed requirements are obtained from the participant and vary by connection type/EHR vendor.
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!

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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:* MassHIwaySupport@state.ma.us

*Website:* www.MassHIway.net
Visit [www.masshiway.net](http://www.masshiway.net) for the information, resources like on-demand webinars, and to sign up for our newsletter!
1. Introduction to the Mass HIway
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Past HIway webinars are available on the Mass HIway website:

- Go to the Mass HIway website at www.masshiway.net
- Then, go to “News & Events” and next select “Events”

Upcoming Mass HIway events and webinars:

- ENS Stakeholder Sessions:
  - May 12, 2017 (Friday, 10am – noon): Holyoke, MA

- Mass HIway Webinars: (all webinars are Thursdays, noon-1pm)
  - May 18, 2017: Mass HIway Connection Requirement Attestation Overview
  - June 8, 2017: Improving Care Coordination by Leveraging Mass HIway Direct Messaging
  - June 22, 2017: Mass HIway 101
  - June 29, 2017: ENS Update for the community
These key documents related to the Mass HIway Regulations are available on the Mass HIway website:

- The Mass HIway Regulations
- Mass HIway Regulations Summary
- Mass HIway Regulations FAQ
- Mass HIway Policies & Procedures
- HIway Fact Sheet for Patients

Questions about the Mass HIway Regulations can be sent via email to: MassHIway@state.ma.us
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: MassHIwaySupport@state.ma.us
Website: www.MassHIway.net
Appendix A:

Selected slides from the HIway Operations Update, presented at the February 2017 HIT Council Meeting
13 Month HIway Transaction Activity

7,029,969 Transactions* exchanged in January (12/21/2016 to 01/20/2017**)

112,795,775 Total Transactions* exchanged inception to date

<table>
<thead>
<tr>
<th>Month</th>
<th>Transactions (Millions)</th>
<th>% Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Jan 2016</td>
<td>4.28</td>
<td>20%</td>
</tr>
<tr>
<td>Feb 2016</td>
<td>5.14</td>
<td>-4%</td>
</tr>
<tr>
<td>Mar 2016</td>
<td>4.91</td>
<td>13%</td>
</tr>
<tr>
<td>Apr 2016</td>
<td>5.55</td>
<td>-4%</td>
</tr>
<tr>
<td>May 2016</td>
<td>5.32</td>
<td>7%</td>
</tr>
<tr>
<td>Jun 2016</td>
<td>5.70</td>
<td>2%</td>
</tr>
<tr>
<td>Jul 2016</td>
<td>5.80</td>
<td>1%</td>
</tr>
<tr>
<td>Aug 2016</td>
<td>5.84</td>
<td>10%</td>
</tr>
<tr>
<td>Sep 2016</td>
<td>6.42</td>
<td>9%</td>
</tr>
<tr>
<td>Oct 2016</td>
<td>7.00</td>
<td>2%</td>
</tr>
<tr>
<td>Nov 2016</td>
<td>7.12</td>
<td>-4%</td>
</tr>
<tr>
<td>Dec 2016</td>
<td>6.85</td>
<td>3%</td>
</tr>
<tr>
<td>Jan 2017</td>
<td>7.03</td>
<td></td>
</tr>
</tbody>
</table>

* Note: Includes all transactions over Mass HIway, both production and test
** Note: Reporting cycle is through the 20th of each month.
HIway Production Transaction Trends – Provider to Provider (Jan 2016 – Jan 2017)

3% of HIway activity in January* was for Provider to Provider transactions

* Note: Reporting cycle is through the 20th of each month.
## Customer Status Dashboard (Nov. 2016)

Data as of November 30, 2016 – Dashboard Reporting from new Mass HIway CRM in development

<table>
<thead>
<tr>
<th>Tier</th>
<th>SubTier</th>
<th>Universe (est)</th>
<th>Organizations Connected and Actively Using via Mass HIway</th>
<th>Organizations Connected and Actively Using via another HISP</th>
<th>Total Organizations Connected to and Actively Using Mass HIway</th>
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<td>% Actively Using</td>
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<td>Tier 1</td>
<td>1a. Large hospitals/Health Systems</td>
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<td>1b. Health plans</td>
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<td>1c. Multi-entity HIE</td>
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<td>1d. Commercial Imaging Centers &amp; Labs</td>
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<td>Tier 2</td>
<td>2a. Small hospitals</td>
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<td>2b. Large ambulatory practices (50+)</td>
<td>28</td>
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<td>2c. Large LTCs (500+ licensed beds)</td>
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<td>2d. Ambulatory Surgical Centers</td>
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<td>2e. Ambulance and Emergency Response</td>
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<td>2f. Business associate affiliates</td>
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<td>2g. Local government/Public Health</td>
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<td>3b. Large behavioral health (10+ licensed provid)</td>
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<td>3e. Medium ambulatory practices (10-49)</td>
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