



Providing **Solutions**
for the Uninsured

Healthcare Access San Antonio

Internet2 Presentation

October 8, 2009

HASA Stakeholders

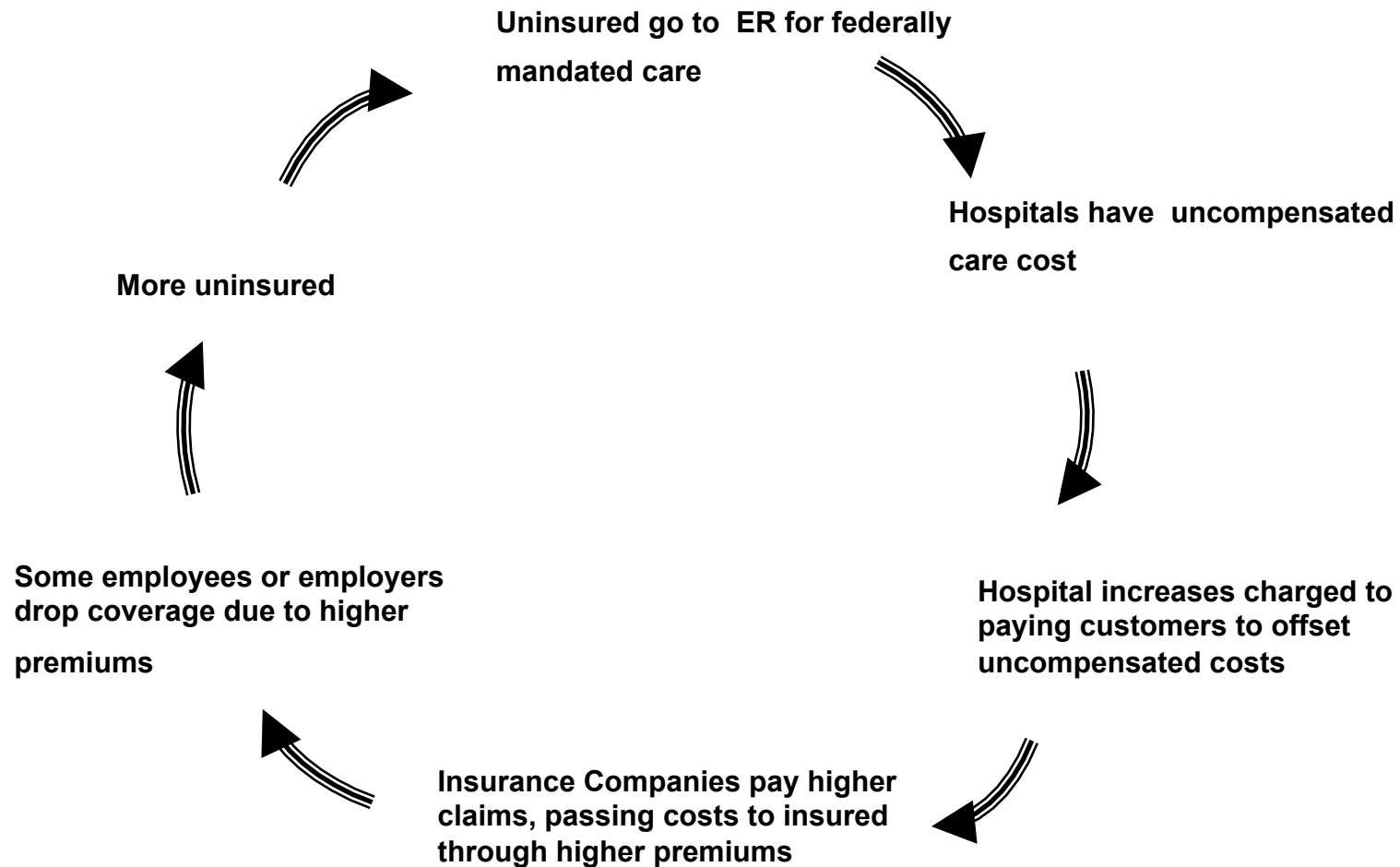
- **Baptist Health System**
 - **CentroMed**
- **CHRISTUS Santa Rosa Health Care**
 - **CommuniCare Health Center**
 - **Daughters of Charity Service**
 - **Methodist Healthcare Ministries**
 - **Methodist Healthcare System**
 - **University Health System**
- **San Antonio Metropolitan Health District.**

HASA Mission

*To improve the medical safety net for Bexar County
Uninsured*

- MEDICAIDER- Help Uninsured qualify for financial assistance
- SecureShare- A shared data repository for medical information

Uninsured Community Impact



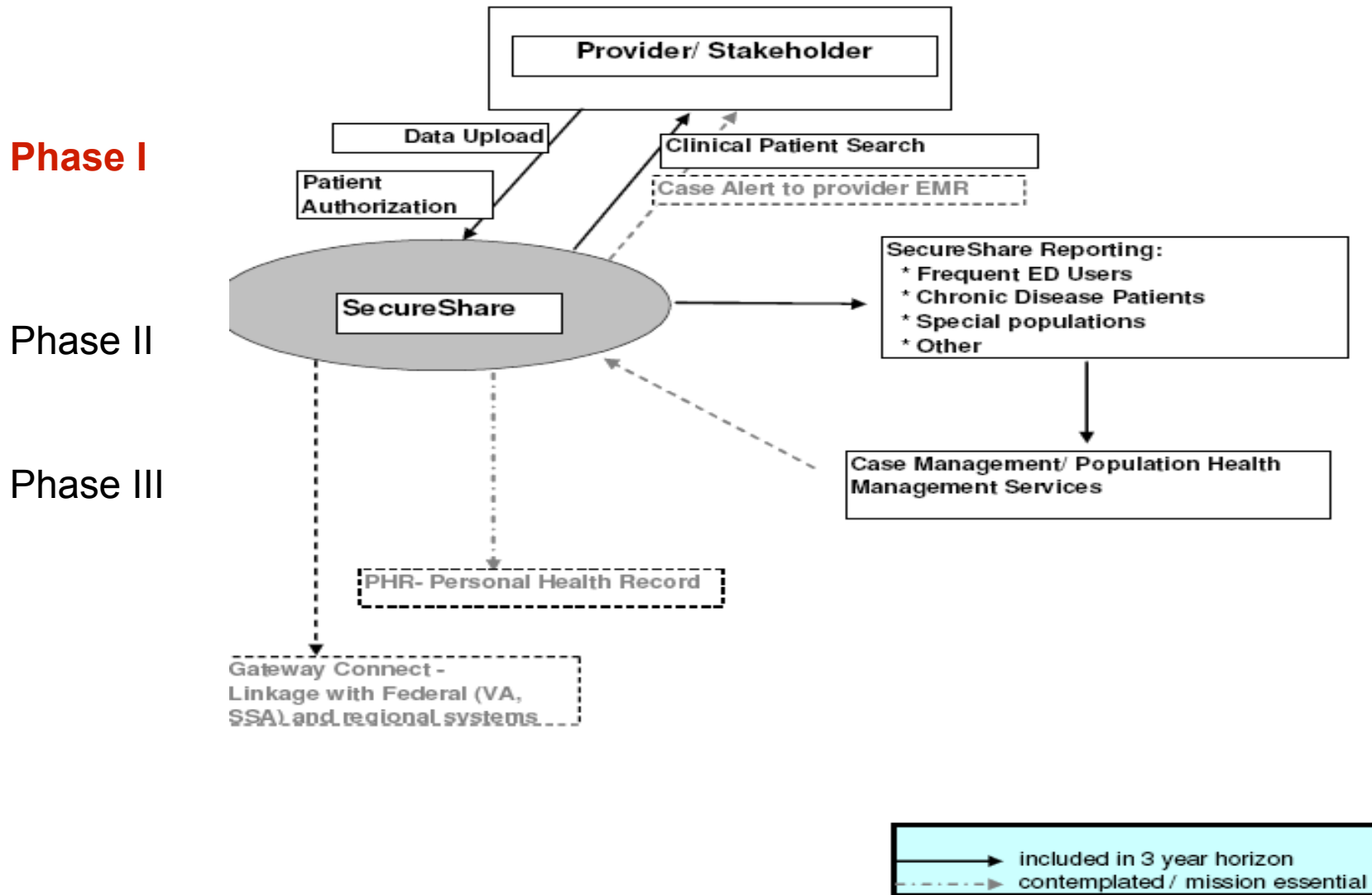
From: Texas state Comptroller's office

HASA Value Proposition

Stakeholder	Value	Impact and Consideration
Patient	<ul style="list-style-type: none"> •Improved health care •Reimbursement opportunities •Care closer to home 	<ul style="list-style-type: none"> •Willingness to engage •Engagement in own health •Minimal cost
FQHC	<ul style="list-style-type: none"> •Optimize reimbursement opportunity •Enhance care •Create medical home 	<ul style="list-style-type: none"> •Cost to implement •Integration of extra steps into business flow
Hospital System	<ul style="list-style-type: none"> •Identify Frequent flyers •Patient history allows for care efficiency •Reducing duplication of tests 	<ul style="list-style-type: none"> • Lowered use of un-necessary ER and I/P • Less free service provides for more realistic pricing •Integration of extra steps into business flow
Corporate Community	<ul style="list-style-type: none"> • Improving the health care safety net improves business climate •‘Basic insurance product’ for entry level income enhances employee morale and turnover (Tri-share program) 	<ul style="list-style-type: none"> •Competitive business climate •Improved work force •Increased productivity
Care Community	<ul style="list-style-type: none"> •Integration of patient information to link to other community services 	<ul style="list-style-type: none"> •Privacy impact •Mission impact

Quantification of Value proposition to be determined

SecureShare- Development

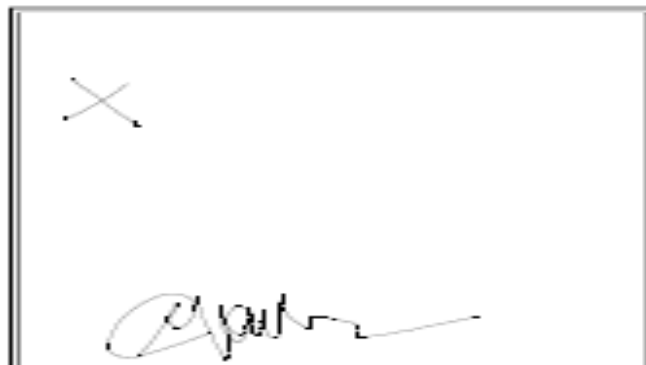


Clinical view

Last name* XXX First name* YY DOB* 01/01/2001 ZIP |
 (*required) Search Clear

	Last	First	DOB	Zip	Location	Score
<input checked="" type="checkbox"/>	XXX	YYY	01-01-2001	12345	University Health System	33.9
<input checked="" type="checkbox"/>	XXX	YYY	01-01-2001	12345	CHRISTUS Santa Rosa	33.9
<input checked="" type="checkbox"/>	XXX	YYY	01-01-2001	12345	CHRISTUS Santa Rosa	33.9
<input checked="" type="checkbox"/>	XXX	YYY	01-01-2001	12345	BHS	33.9
<input checked="" type="checkbox"/>	XXX	YYY	01-01-2001	12345	BHS	33.9
<input checked="" type="checkbox"/>	XXX	YYY	01-01-2001	12345	BHS	33.9

Loc	University Health System	CHRISTUS Santa Rosa	CHRISTUS Santa Rosa	BHS	BHS	BHS
First	YYY	YYY	YYY	YYY	YYY	YYY
Middle						
Last	XXX	XXX	XXX	XXX	XXX	XXX
DOB	01-01-2001	01-01-2001	01-01-2001	01-01-2001	01-01-2001	01-01-2001
SSN4						
Addr1	123 WYE STREET	123 WYE STREET	123 WYE STREET	123 WYE STREET	123 WYE STREET	123 WYE STREET
Addr2						
City	SAN ANTONIO	SAN ANTONIO	SAN ANTONIO	SAN ANTONIO	SAN ANTONIO	SAN ANTONIO
Zip	12345	12345	12345	12345	12345	12345
State						
Score	33.9	33.9	33.9	33.9	33.9	33.9
	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>



Date	Site	Login	OPT
2009-07-15 09:	106.100.24	brian.stowe	IN
Use Consent On File			
Print Consent in English			
Print Consent in Spanish			
No signature pad			
Bypass Consent			

Clinical view

HEALTHCARE ACCESS SAN ANTONIO (HASA) AUTHORIZATION TO USE AND RELEASE CONFIDENTIAL HEALTH INFORMATION

- I give my permission for HASA, its employees and its member health care providers to use and release my confidential health information with other HASA members, their employees and their health care providers. I understand that by giving my permission, my health care provider may be able to provide me with better quality health care.

MY RIGHTS

I MAY REFUSE TO SIGN

I understand that I may refuse to sign this Authorization. If I do refuse, my ability to receive health care or benefits **will not** be affected.

I MAY CANCEL THIS AUTHORIZATION

I understand that if I sign this, I have a right to change my mind. If I decide that I want to cancel this authorization, I must do so in writing directly to my provider. My cancellation for any reason will not apply to confidential information that has already been shared with HASA members.

I understand that if I cancel this Authorization, it may take up to 72 hours (3 days) for this cancellation to be processed and effective. After that, information about me that is shared will be locked in the computer and cannot be viewed by the providers.

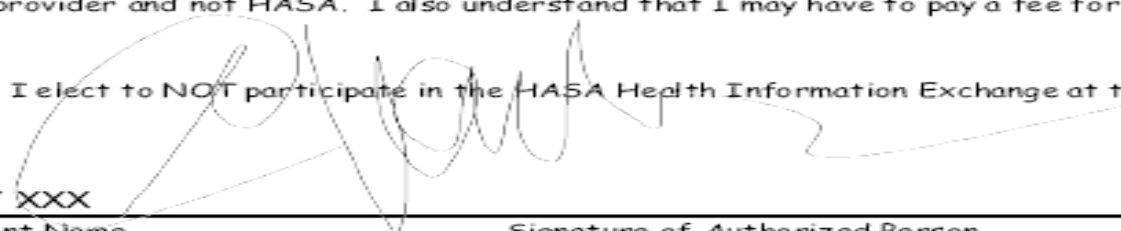
I HAVE A RIGHT TO SEE MY RECORDS

I understand that if I sign this Authorization, I have a right to keep a copy of it and to see what information has been shared because of it. If I want to see my records, I must ask my health care provider and not HASA. I also understand that I may have to pay a fee for copies.

- I elect to NOT participate in the HASA Health Information Exchange at this time.

YYY XXX

Patient Name



Signature of Authorized Person

2009-07-15 09:02:09.0

Date

Name (if different from Patient)

Relationship to Patient

Date

Witness Name

Signature

Date

Clinical view

Patient Medical and Encounter Summary

provided by Healthcare Access San Antonio - Fri Aug 7 09:44:06 CDT 2009

[Print](#)

Disclaimer: This record is an aggregate summary of medical information obtained from multiple participating health care providers. This history summary is intended to support optimal patient care. It is not intended to replace a patient's medical record nor is it guaranteed to encompass all historical information on this patient. It is provided to you in conformance with patient privacy requirements.

Allergies

[Summary/Details](#)

[Print](#)

CAPTOPRIL
ENALAPRIL
HEPARIN

Medications Prescribed

[Summary/Details](#)

[Print](#)

losartan tablet 100 mg
Nephrocaps capsule Vitamin B Complex with C and Folic Acid
calcium acetate 667 mg oral tablet
acetaminophen-hydrocodone 500 mg-5 mg oral capsule
OK to use Lt Brachiocephalic AVF for dialysis - start w/ one cannula and advance to two.
gliPIZIDE extended release
metoprolol
RenaPlex
amlodipine 10 mg oral tablet
Coumadin tablet 5 mg

Labs

[Summary/Details](#)

[Print](#)

Date	Ordered By	Panel	Test	Results	Range	Abnormal	Location
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Radiology Reports

[Summary/Details](#)

[Print](#)

Date	Report
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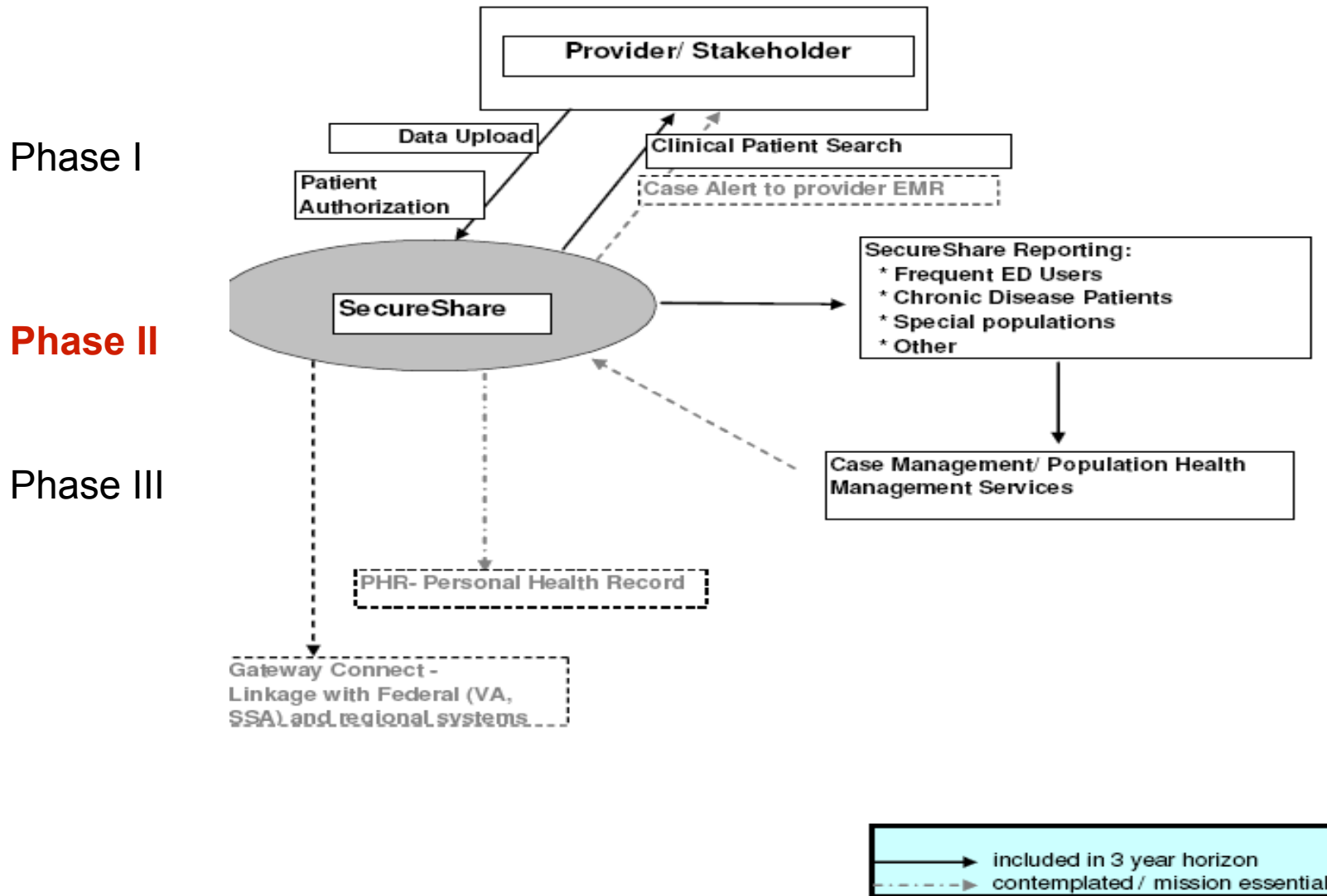
Encounters

[Summary/Details](#)

[Print](#)

Date	Diagnosis 1	Diagnosis 2	Reason	More	Location
2009-02-19	HEADACHE	SURGICAL OR OTHER PROCEDURE NOT CARRIED OUT BECAUSE OF PATIENT'S DECISION	HEAD INJURY NOSE NAUSEA HEADACHE	x	Christus Medical Center
Date	Diagnosis 1	Diagnosis 2	Reason	More	Location
2008-01-27	SWELLING OF LIMB	SURGICAL OR OTHER PROCEDURE NOT CARRIED OUT BECAUSE OF PATIENT'S DECISION	LFT KNEE SEVERLY SWOLLEN, FELL N PAIN	x	Christus Adult Downtown

SecureShare- Development

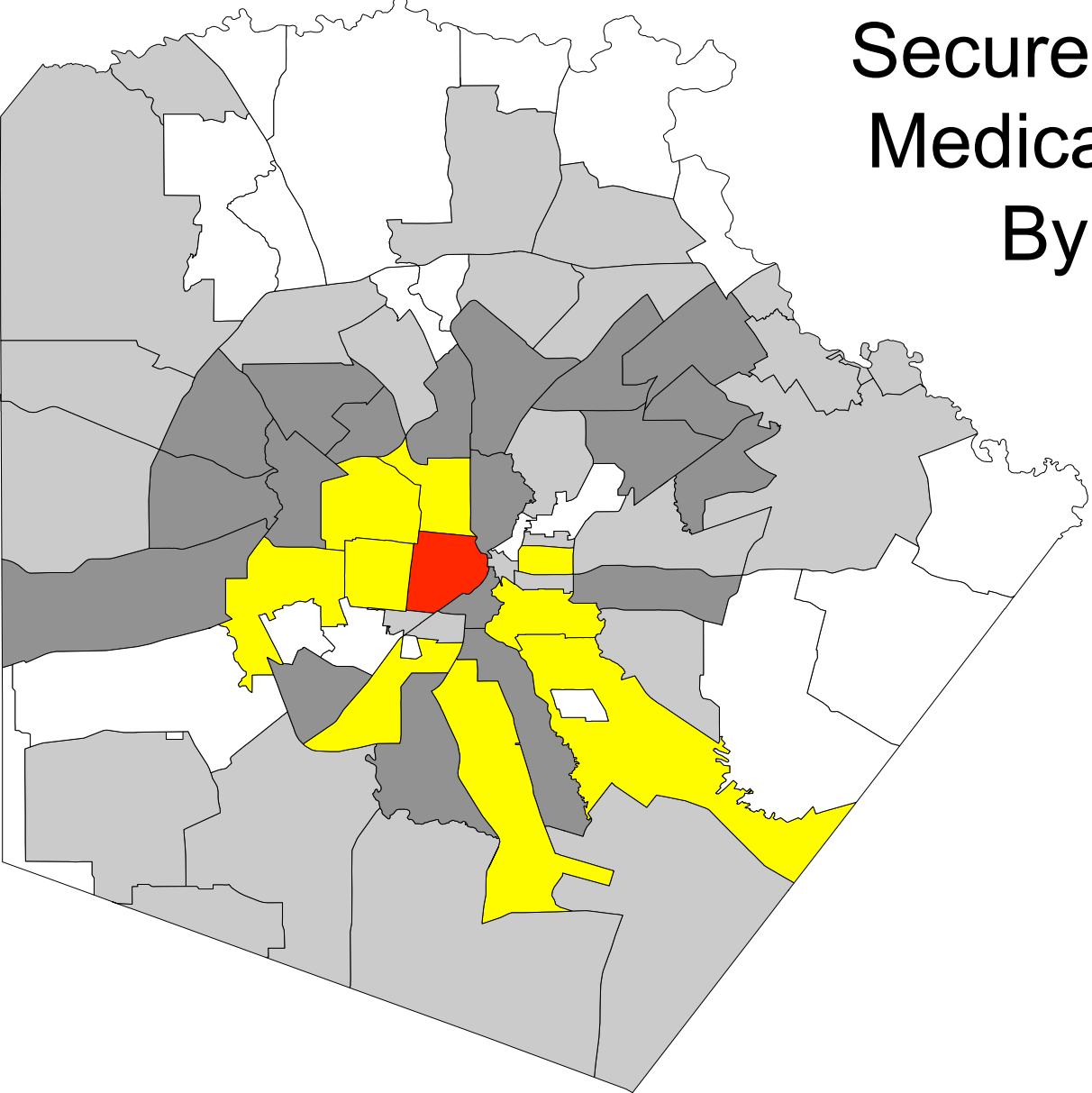
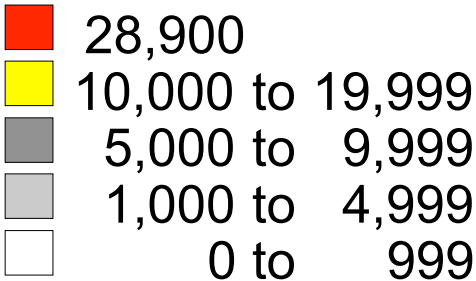


Reporting Design

- Open Source product- labor intensive for development
- Ad hoc reporting through query functionality
- Standard reporting through data cubes
- Reporting as de-identified or identified

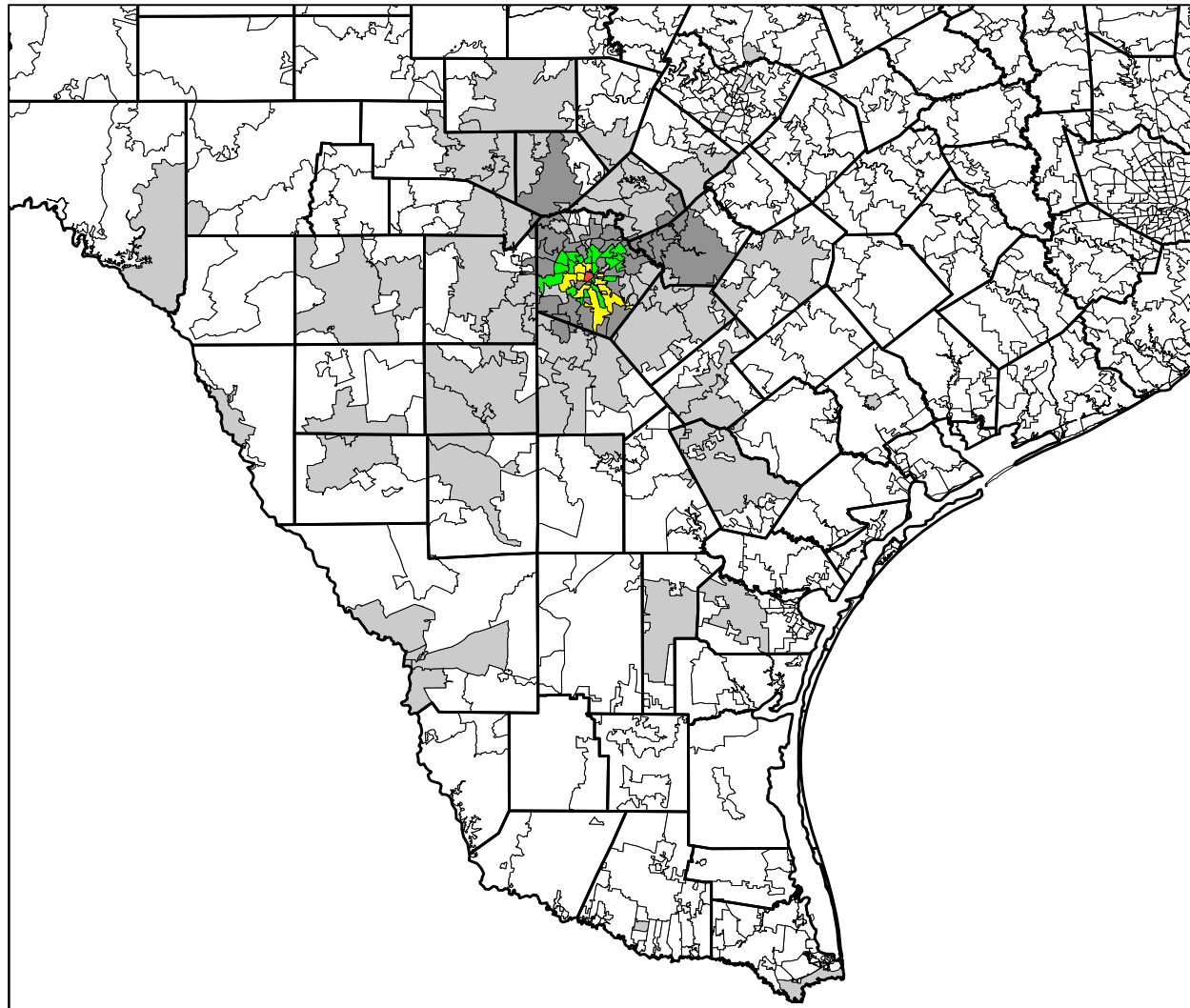
SecureShare capture Medically Uninsured By Zip Code

Number of Records

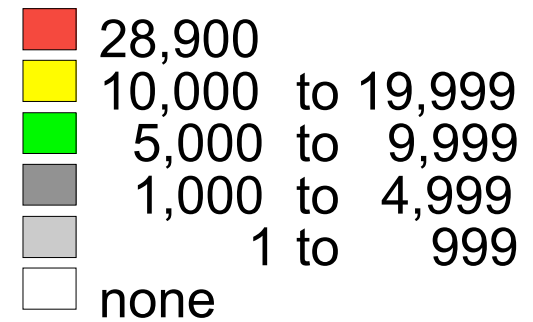


Source: Healthcare Access San Antonio 4/15/2009

SecureShare capture Medically Uninsured By Zip Code



Number of Records

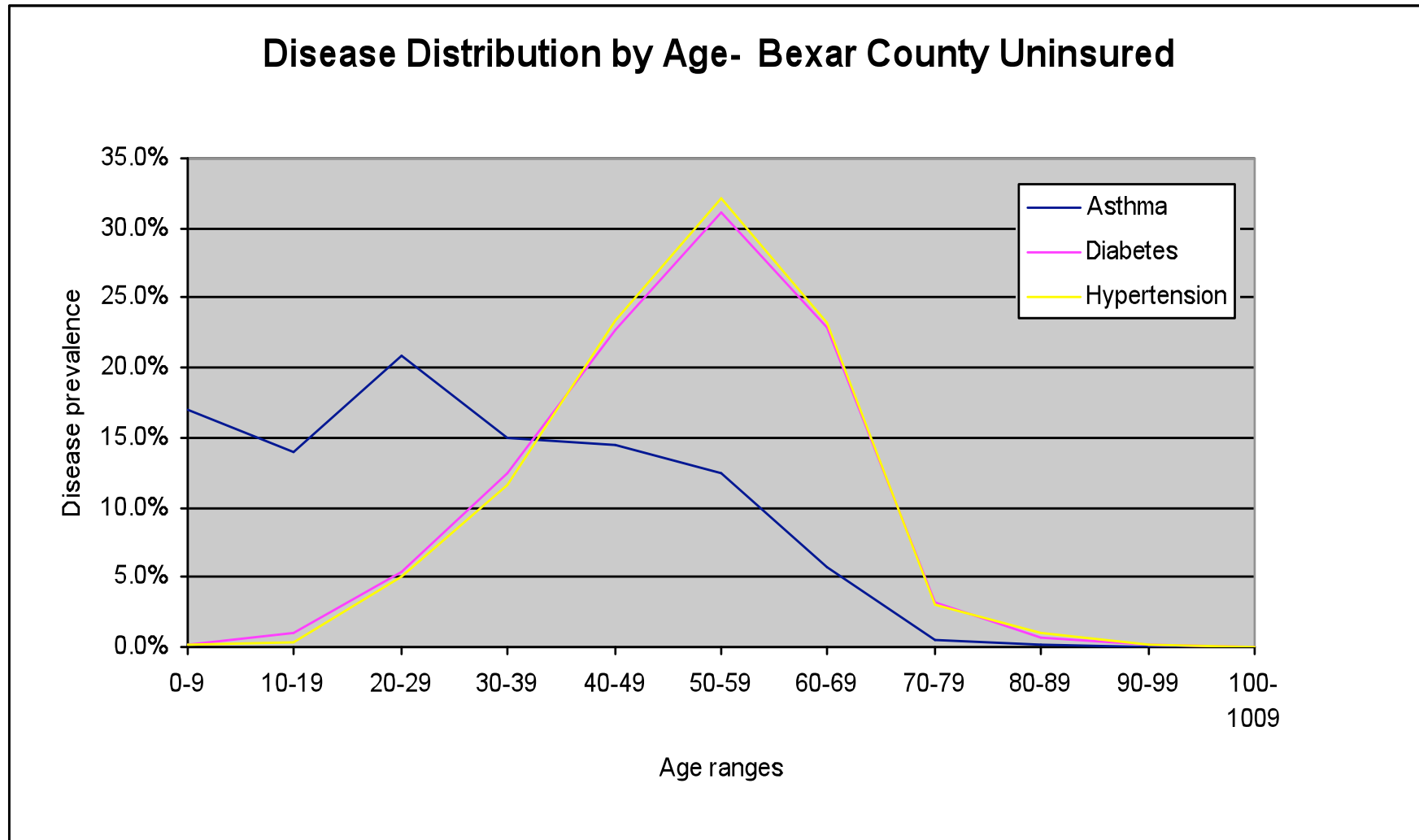


Source: Healthcare Access San Antonio 4/15/2009

Most Prevalent Diagnoses

Diagnoses	Dx Count
All	3,838,381
DIABETES MELLITUS*	243,990
ESSENTIAL HYPERTENSION*	216,843
DISORDER LIPOID METABOLISM*	119,349
NONDEPENDENT ABUSE DRUGS*	101,206
ENCOUNTER AFTERCARE*	79,681
GENERAL SYMPTOMS*	77,922
RESPIRATORY SYMPTOMS*	64,445
ABDOMINAL SYMPTOMS*	60,667
SPECIAL INVESTIGATION/EXAM*	56,580
OTH/UNSPEC DISORDERS JOINT*	54,494
SCREEN MALIG NEO*	49,896
DISEASES HARD TISSUE TEETH*	46,140
OTH/UNSPEC DISORDER BACK*	44,394
OTH DISORDERS SOFT TISSUES*	43,888
OVERWEIGHT, OBESITY*	39,987
OTH DISORDER URETHRA/URINARY TRA	39,008
ASTHMA*	38,050
DEPRESSIVE DISORDER OTH	37,767

Uninsured- Chronic Disease Prevalence



ER visits

SecureShare shows that:

- In 2007, uninsured people with a Diabetes diagnosis visited ER on average .1 more times; out of a total of 102,123 ER visits, this equates 10,212 more visits
- People with Diabetes and Hypertension diagnosis had same ER visit prevalence

ER visits- Frequent Flyers

Defined as 6 or more ER visits/Quarter

Analysis View

FF Quarter	Zip Codes	Age	Sex	Asthma?	Diabetes?	HTN?	HIE Id	Last Name	First Name	DOB	Measures	Patients	FF Visits
2008Q1	All	All	All	All	All	All	All	All	All	All		18	151
2008Q2	All	All	All	All	All	All	All	All	All	All		18	162
2008Q3	All	All	All	All	All	All	All	All	All	All		30	258
2008Q4	All	All	All	All	All	All	All	All	All	All		20	192
2009Q1	All	All	All	All	All	All	All	All	All	All		18	171
2009Q2	All	All	All	All	All	All	All	All	All	All		13	153

Slicer:

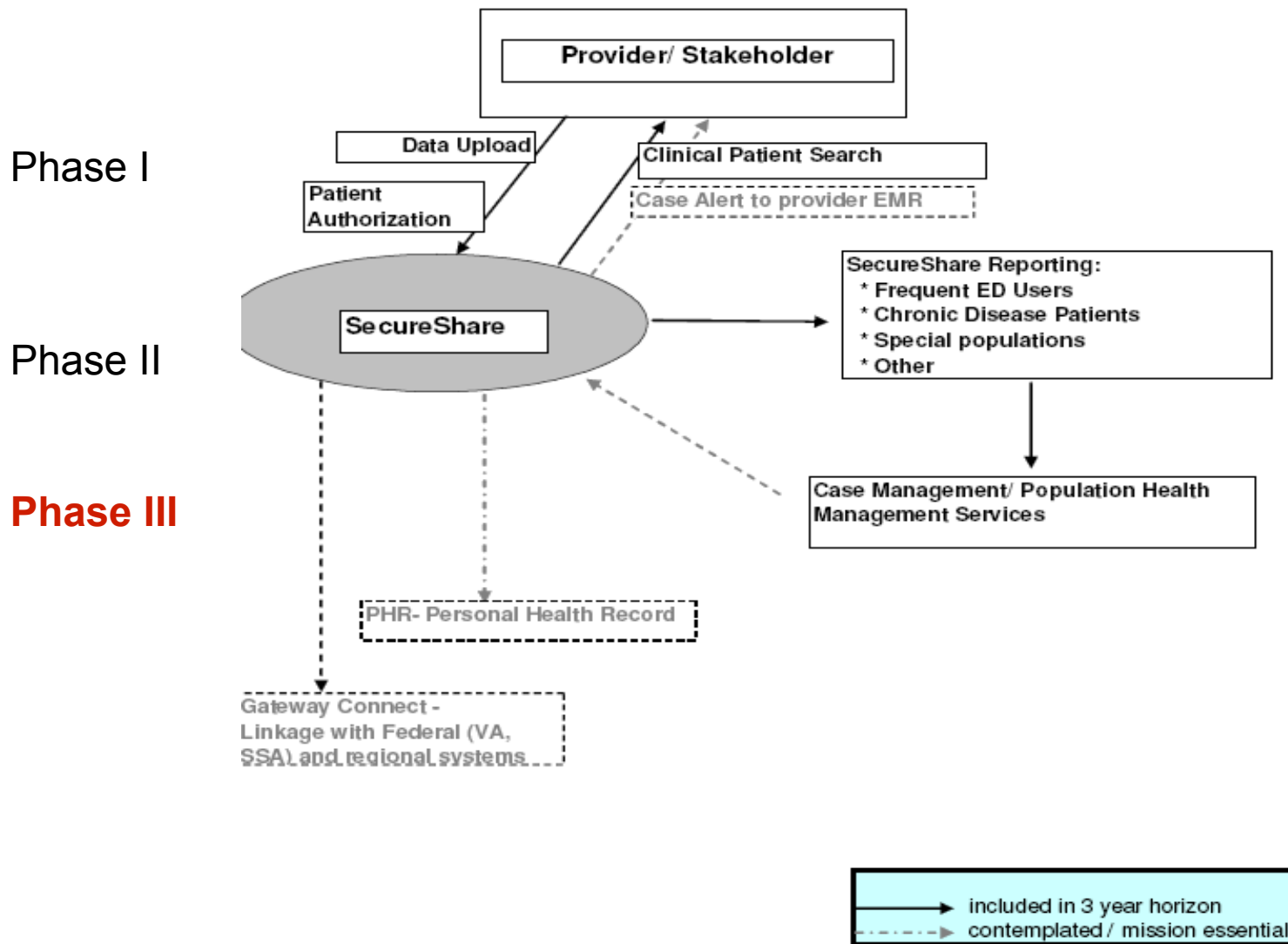
ER visits- Frequent Flyers traits

- Among FF little use of community clinics
- Presence of mental health & substance present but not yet quantifiable
- Identified people have additional hospital visits other than ER visits

Frequent Flyers Analysis Opportunity

- Triage & Case manage towards community health sources
- Secure share to be deployed in ER setting in order to obtain patient authorization
- Determine financial support opportunities
- Quantify cost savings from care triage
- Linkage with mental health services

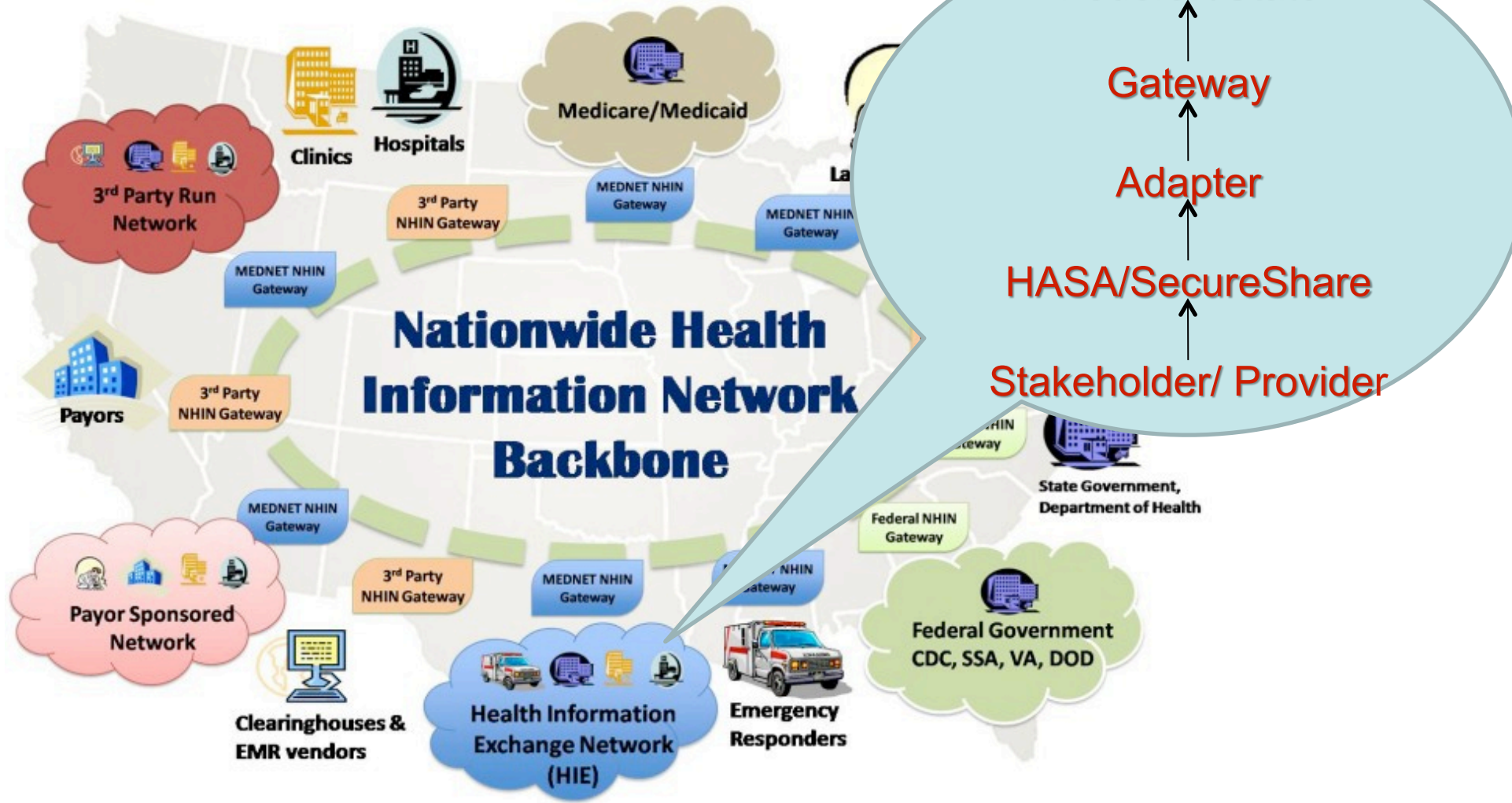
SecureShare- Development



Case/ Health Management

- SecureShare provides rifle vs. shotgun approach (deliver program to target audience)
- Community Collaboration is key to effective outreach
- Documentation and quantification of program impact

National Health Information Network (NHIN)



TEXAS HEALTH INFORMATION EXCHANGE COALITION

