



3 Key Technologies

in a Single Platform to Achieve
Interoperable Health Care Data

consensus

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Despite Health and Human Services' continued campaign to bring about data interoperability across the U.S. health care industry by 2024, data sharing among providers, payers and health systems remains a significant challenge. EHRs were intended to digitize patient health information, but they often use proprietary models for recognizing, naming and categorizing data and clinical concepts — and this practice has led to less interoperability, not more.

Besides EHRs, the industry has adopted various technologies, such as digital cloud fax, Direct Message and referral networks, to try to make data sharing easier. Also, a number of new standards have been developed to help with interoperability, with the most recent being FHIR 4. Many of these technologies and standards have made great strides in their own spheres of influence, but no one technology or standard can solve the interoperability and data-sharing challenges on their own. **As it stands, 57% of health care organizations say they experience significant difficulty in sending and receiving data across different vendor platforms¹.**

Finding a complete, easy-to-integrate interoperable solution is difficult. Many tools provide part of the connectivity solution, but gaps remain. For instance, some solutions aren't efficient in the most common workflow processes, such as referrals, requests for authorizations and ADT (admit/discharge/transfer). Other solutions may not support a key technology, such as direct messaging.

Even when solutions can interoperate, it's often too time-consuming and expensive to do so. This is because the complexity of moving from paper or a digital cloud fax server to electronic health records (EHRs) can require a significant investment — and may still not be fully effective.

“We had difficulty sharing across EMR [electronic medical records] platforms — many different practices and hospitals we worked with didn't use the same EMR we used, and that resulted in a delay of information or a cumbersome process to obtain certain information,” said Jill Gross, previous Practice Manager at River Valley Infectious Disease Specialists.

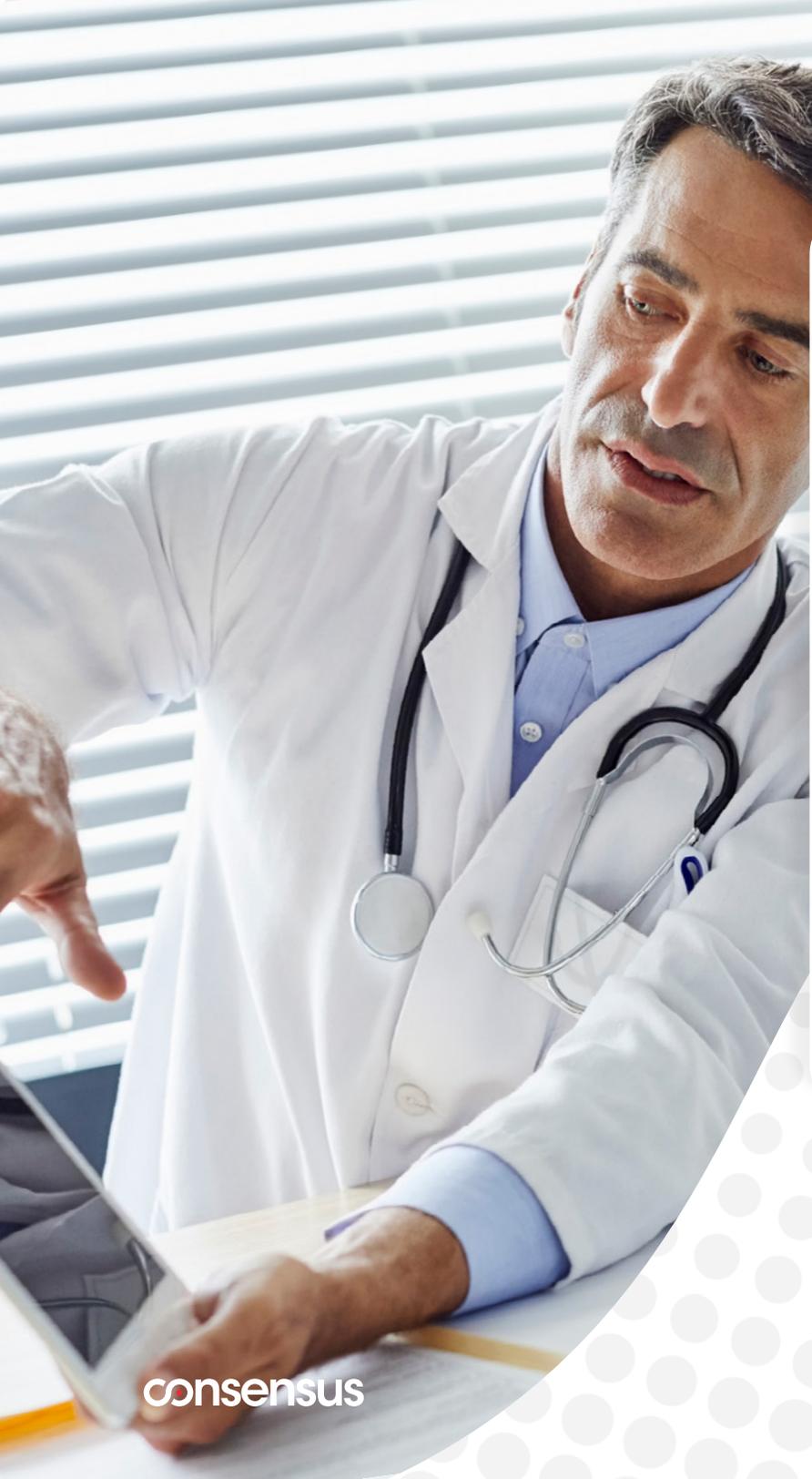
Exchanging information can also be costly, with extra fees required by their EHR to exchange data. About one-third (35%) of organizations say they have to pay to send or receive data with other health organizations outside their system⁴. Similarly, 28% of organizations say they've had to develop a customized interface to exchange electronic health data⁵. And many leading EHRs are still not connected to interoperable frameworks, such as Carequality, or to referral networks, such as CommonWell or health information exchanges (HIEs).

“The challenge is that there needs to be a simpler way to communicate so that no matter how you want to talk to a provider, no matter how you want to pass that information on to someone else, you can do it,” said Jeffrey Sullivan, Chief Technology Officer at J2 Global.

Top Reasons Organizations Don't Share Patient Health Information:

- 63% say they either don't have an EHR or lack the capability to receive information².
- 56% do not share PHI within their organization and 52% do not share to outside organizations because of a lack of access to patient data-sharing systems³.





Adopting a Unified Data-Sharing Program

The current solution for many health care organizations to improve data sharing has been to adopt point solutions. However, as Brenda Hopkins, Chief Health Information officer at J2 Global, notes, “You still have to look at each of those individual manual processes and automate and sync your systems to the remaining manual pieces. It typically involves a lot of hours to remediate all of these individual point-to-point pieces.”

A better solution is to move to a unified, interoperable platform. By adopting a platform that accommodates digital cloud fax and Direct Message, and provides connectivity to referral networks, ACOs, community networks, and healthcare organizations can affordably and effectively enable digital document and patient data sharing.

A unified platform is not another point-to-point solution or a tool that will let you connect with *only a few* providers under *limited* circumstances. It is also not like an EHR with multiple API integrations that allow for the use of Direct Message or fax capabilities. Instead, a unified platform is a single interface and centralized location from which you can quickly and easily send and receive information regardless of what systems and tools other providers use and it is not just another interface for disparate systems.

“Many providers may think their EHR is their unified, multitool platform,” said Brad Spannbauer, Vice President of Software Implementation and Professional Services at J2 Global. “An EHR might be really good at managing the data that lives within the EHR, but when you import a fax into many EHRs, for example, you’ll see it only as a single record of data even though it could have records for five or six different patients in it. If you have a solution that can manage those faxes, parse them out, add additional metadata before it gets ingested into that EHR, that can save vast amounts of time — and that’s what a unified, interoperable platform can help do.”

A unified platform makes it easier for providers to stay connected throughout their patients’ continuum of care, eliminates many manual processes and streamlines workflows, increasing staff productivity and facilitates a better patient experience.

Here’s a look at what capabilities are essential to a unified platform and how they can integrate to make data sharing easier.

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Direct Message

Direct messaging is a national encryption standard for securely exchanging clinical health care data via the internet. Direct Message works well with EHRs for patient data sharing, and can be complementary to cloud fax. In fact, having direct messaging as part of a unified solution for sharing health care information can make many workflows simpler and more secure — and practices that use Direct Message are seeing important workflow and patient-care benefits.

For instance, one ophthalmologist's office transitioned from patient self-scheduling to Direct Message referrals scheduled by the ophthalmologist's office. This change resulted in the PCP's receiving results within 48 hours versus previously only receiving results 35% of the time. The transition also eliminated paper-based faxing, reducing referral scheduling time and increasing the automation of maintenance tasks within the PCP's EHR⁶.

Similarly, a pilot program between the two large health care organizations using Direct Message has been highly successful in better enabling care management and is now planned for a national rollout. Using Direct Message, the admitting organization can automatically push the daily census of admitted patients from one organization to the other. In response, the other organization sends a C-CDA for these patients.

Then, once patients are discharged, the discharging organization pushes, via Direct Message, a discharge C-CDA to the receiving organization's EHR⁷.

Fully adopted, direct messaging has the potential to eliminate many of the interoperability challenges today while providing a secure communication process for data exchange. However, because adoption of direct messaging is not yet complete, its use for the foreseeable future remains most valuable as part of a larger ecosystem of tools for sharing patient information.





Direct Message Case Study: Large Physicians' Group Practice Sees Higher-Quality and More Efficient Patient Care

A large, nonprofit physicians' group practice has seen multiple benefits from using direct messaging. It has used it to automatically send patient-summary documents containing medications, allergies, problems, recent test results, and more to its local Emergency Room's EHR. The Practice has also relayed event notifications from its local hospitals to the home health agency whenever a shared patient is seen in the ER or admitted to the hospital. Pushing this information via direct messaging automatically has helped avoid unnecessary home health visits while the patient is in the hospital and has allowed immediate follow-ups once a patient returns home.

The Practice has also automated a pushed CCD using Direct Message to the home health agency whenever a shared patient is seen by the PCP or a specialist, allowing the home health nurse to always be aware of updates to the patient's treatment plan. By automating data sharing with direct messaging, health care workers across the care continuum have access to the latest patient information, allowing the Practice to provide patients with higher-quality and more efficient care⁸.

By moving from legacy, paper-based faxing to cloud fax and having that integrated into a unified platform, health care organizations will see myriad benefits.

Cloud Fax

Fax is the most ubiquitous way health care organizations communicate and share data. However, legacy paper-based faxing is costly, lowers staff productivity, requires a large amount of manual labor to input data and can ultimately result in delayed patient care. Faxing overall isn't going away soon because it tends to be the one communication tool all providers know they can use to send and receive patient data — it may just take a different form.

By moving from legacy, paper-based faxing to cloud fax and having that integrated into a unified platform, health care organizations will see myriad benefits.

As Gross noted, switching from traditional fax to cloud fax can improve productivity and reduce manual processes. "Traditional fax is a drain in terms of having to deal with the office supply and maintenance component of it, such as having to replace toner or parts," Gross said. "It also takes a lot of time to convert faxes from static information into dynamic electronic information."



Cloud fax can also streamline a number of other workflows for health care providers, including:

- **Clinical lab workflows:** Cloud faxing removes data silos to improve the clinical laboratory workflow that is essential to effective care coordination. Cloud faxing between disparate lab systems — LabCorp and Quest, for example — allows for timely and cost-effective sharing of clinically relevant information. Moreover, standardizing data formats across departments can also help reduce errors as well as the time and costs associated with managing data variability.
- **Referral workflows:** Cloud fax can allow for bidirectional closed-loop referral workflows, allowing providers to send referrals and receive information back from consultants electronically. This results in more efficient workflows, quicker referral turnaround times, and improved patient and staff satisfaction.
- **Prior authorization workflows:** Cloud fax makes processing prior authorizations quick and easy. Instead of staff needing to retrieve documents from the fax machine, any prior authorizations received are immediately available in an online inbox where they can be easily downloaded and entered into the system. This lets the organization improve patient care by responding to requests much faster, especially in a busy clinic where dozens of patients with prior authorizations may be coming in each day.

With cloud fax, companies can add compliance and security layers to their fax process that simply don't exist with paper fax. Additionally, moving to cloud fax allows practices to maintain the same interoperability of legacy fax while significantly reducing the time and cost of manually inputting paper-based data into electronic systems.



Patient Query and Patient Care Network Connections

ACOs, community and state exchanges, HIEs, and networks such as CommonWell as well as the interoperability framework Carequality were all established to help make care coordination easier nationwide. Unfortunately, these networks and the Carequality framework are underused and often overlooked.

“There’s a large gap of understanding in particular with these frameworks and networks,” explained Hopkins. “The Carequality framework currently has 600,000 health care providers and growing, but not everybody knows about it, which may be the answer to why they’re not using it.”

The benefits of tapping into the Carequality framework and these other networks are significant. Having the ability to query via a third-party network enables organizations to receive information for several use cases including:

- **Treatment**
- **Payment**
- **Authorization-based disclosures**

Additionally, a unified platform that supports patient queries from leading interoperable solutions such as CommonWell and Carequality makes it easy to provide enhanced care coordination while also providing APIs that allow providers efficient connections to ACO and HIE data. Patients can also easily find all their data in one location, instead of searching through different personal health records from a number of EHR patient portals, giving them a better experience as well.



A unified platform is also the most cost-effective and fastest way to achieve interoperability.

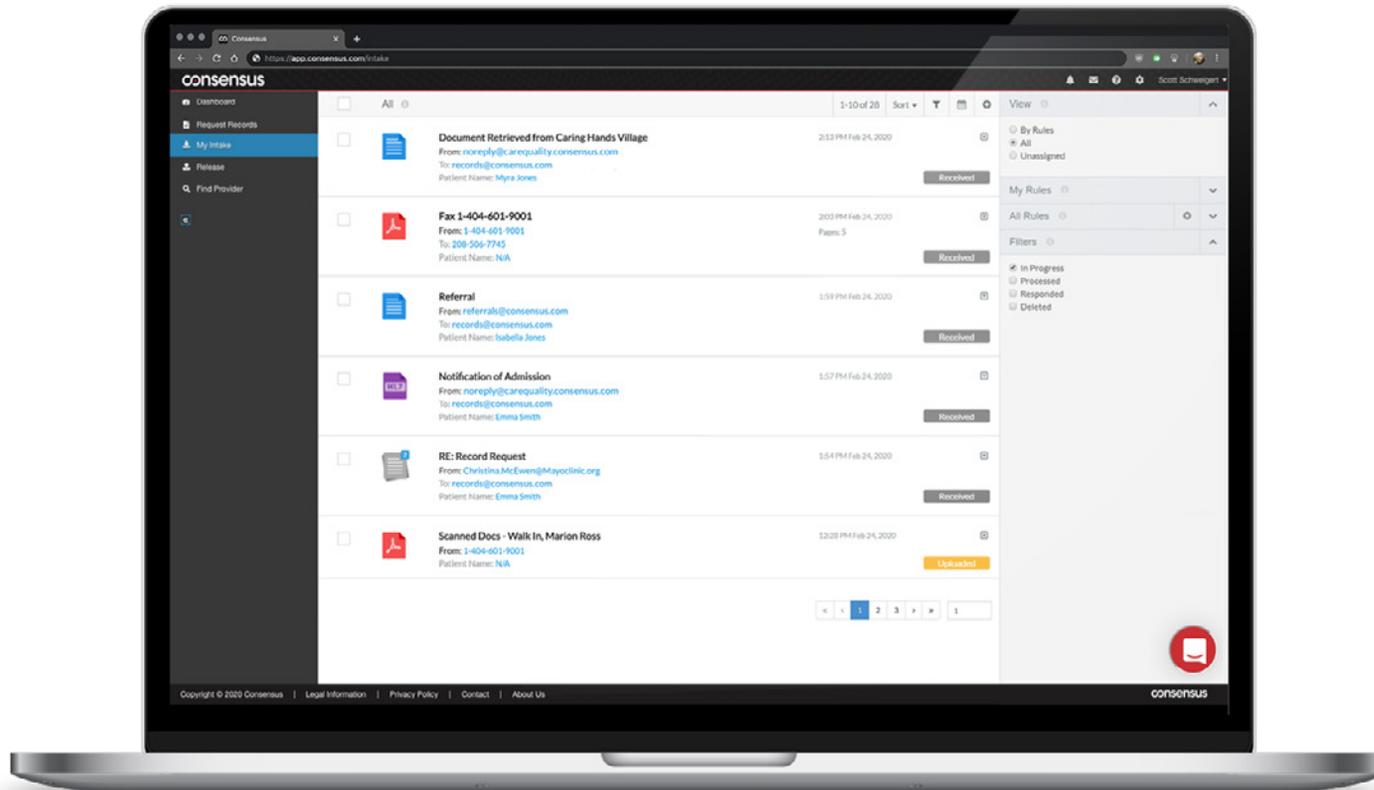
Achieve Greater Interoperability Faster and More Cost-Effectively

When you migrate your data exchange to a unified, open, standards-based platform, you access the entire health care communication ecosystem — cloud fax, direct messaging and patient query — from a single dashboard. A unified platform is also the most cost-effective and fastest way to achieve interoperability.

A unified platform manages all the interoperability work among different data-exchange tools in the background without your intervention. It will give you visibility into all the data-exchange activity happening across your organization. All inbound and outbound health-data exchanges will be secure and HIPAA-compliant — with the cloud fax solution also being HITRUST CSF-certified as well. And finally, you'll move from manual processes to more electronic forms of data exchange for everything from referrals to care coordination. This will help you to greatly increase staff productivity while also improving patient care — which should always be the end goal.

Sources

1. [“Sharing Data, Saving Lives.”](#) American Hospital Association, 2019.
2. [“Sharing Data, Saving Lives.”](#) American Hospital Association, 2019.
3. [“Future Health Index 2019.”](#) Philips, 2019.
4. [“Sharing Data, Saving Lives.”](#) American Hospital Association, 2019.
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6. [“Feature and Function Recommendations to the HIT Industry to Optimize Clinician Usability of Direct Interoperability to Enhance Patient Care,”](#) DirectTrust, Feb. 1, 2017.
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8. [“DirectTrust Direct Interoperability Success Story Use Cases,”](#) Sutter Health, 2020.



Messages from multiple sources and files types and managed uniformly through a centralized intake portal:

- **Faxes**
- **Direct secure messages**
- **Records request fulfilled**
- **On demand document retrieval**
- **Scanned paper documents**

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Consensus is offered by J2 Global with eFax Corporate, the largest enterprise-grade cloud fax that has also earned HITRUST CSF Certification. Consensus, connected by Kno2, offers an additional level of collaborative data sharing, including cloud faxing, direct secure messaging, patient query, HIE connectivity and an exchange API integration all in one easy-to-use platform.

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