Defining eReferral for Quitlines in Current HIT Environment

Robin Daigh

NAQC 2012 Annual Meeting
Kansas City, MO
Current Referral Process

Provider

State Quitline
**Crawl Walk Run**

<table>
<thead>
<tr>
<th>Provider</th>
<th>State Quitline</th>
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<tbody>
<tr>
<td>Secure Network</td>
<td></td>
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**Initiate Referral**
- Crawl: Paper form filled out
- Walk: Electronic form downloaded; some fields prepopulated
- Run: Electronic form in EMR, automatic completion

**Transmit Referral**
- Crawl: Paper forms sent by fax
- Walk: eForms sent by fax, efax, email or secure internet
- Run: eForms sent by secure internet with one EMR

**Interface with QL DB**
- Crawl: Manual entry from paper form to QL DB
- Walk: Manual entry from eForm to QL DB
- Run: Auto-populate from eForm to QL DB
**eReferral Process**

**Provider**
- Secure Network

**State Quitline**

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<tr>
<th>Interface with EMR</th>
<th>Transmit Results Letter</th>
<th>Create Results Letter</th>
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<tr>
<td>Crawl</td>
<td>Paper form scanned into EMR</td>
<td>Letter created and printed</td>
</tr>
<tr>
<td>Walk</td>
<td>eLetter autosaved to patient med record</td>
<td>Electronic letter created; some fields prepopulated</td>
</tr>
<tr>
<td>Run</td>
<td>eLetter autosaved to patient med record, autopopulate fields</td>
<td>Electronic form created, completed automatically in QL</td>
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PATIENT REFERRAL FORM

Date: 09/21/2011
Patient Last Name: Hernandez
Patient First Name: Hector
Gender: Male
Medical Record #: 220189558-4
Date of Birth: 02/21/1966
Address Line 1: 618 Logan Street
Address Line 2: Unit 122
City, State, Zipcode: Denver, CO 80206
Phone #1: 303-886-6864
Phone #2:

Referring Provider: Dr. Tom Thompson
Clinic/Hospital: Community Physicians
Address Line 1: 720 S. Broadway
Address Line 2: Suite 100
City, State, Zipcode: Denver, CO 80206
Phone: 720-301-1000
Fax: 720-901-2000

Does patient have any of the following conditions?
☐ pregnant ☐ uncontrolled high blood pressure ☐ heart disease

If yes, please sign to authorize the Quit Line to send the patient free, over-the-counter nicotine replacement therapy. If provider does not sign and the patient has any of the above listed conditions, the Quit Line cannot dispense medication.

Comments

This report has been electronically authenticated
by Peter Peterson, M.D., F.A.C.C. on 09/07/12 3:33 PM.
**PATIENT REFERRAL FORM**

- Date: { DOCPROPERTY MDIT_DOS \MERGEFORMAT }
- Patient Last Name: { DOCPROPERTY MDIT_LastName \MERGEFORMAT }
- Patient First Name: { DOCPROPERTY MDIT_FirstName \MERGEFORMAT }
- Gender: { DOCPROPERTY MDIT_Gender \MERGEFORMAT }
- Medical Record #: { DOCPROPERTY MDIT_MRN \MERGEFORMAT }
- Date of Birth: { DOCPROPERTY MDITDOB \MERGEFORMAT }
- Address Line 1: { DOCPROPERTY MDIT_Address_1 \MERGEFORMAT }
- Address Line 2: Unit 122
- City, State, Zipcode: Denver, CO 80206
- Phone #1: 303-888-6664
- Phone #2: 

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**Clinic/Hospital:**
Community Physicians

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**Comments**
________________________

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Secure Network (NHIN Direct Framework)

Authentication / Certificates
Security
Trust Authorities
Delivery Protocols
Standards
Provider Directories

user@direct.provider.com

user@direct.vendor.com
Sending Referrals

NHIN address and fax #s
HITECH Act

Meaningful Use

Wednesday,
July 28, 2010

Part II

Department of
Health and Human
Services

Centers for Medicare & Medicaid Services

42 CFR Parts 414, 415, 422 et al.
Medicare and Medicaid Programs.
Electronic Health Record Incentive
Program; Final Rule

Certified EHR

Wednesday,
July 28, 2010

Part III

Department of
Health and Human
Services

45 CFR Part 170
Health Information Technology Initial Set
of Standards, Implementation Specifications, and Certification Criteria
for Electronic Health Record Technology; Final Rule

Eligible Providers responsible for measures

EMR Vendors responsible for criteria
# Meaningful Use - Stage I

## CORE SET
- Problem List
- Medication List
- Medication Allergy List
- Vital Signs
- Smoking Status
- Demographics
- Drug-Drug, Drug-Allergy check
- ePrescribing
- Patient Copy of PHI
- Patient After-Visit Summary
- Electronic Exchange Notes
- HIPAA/Security/Privacy
- CPOE Medications
- Clinical Decision Support (1)
- Clinical Quality Measures (3)

## MENU SET
- Drug-Formulary check
- Lab Results
- Patient List Generator
- Medication Reconciliation
- Patient Reminders
- Patient Portal
- Patient Education
- Public Health Immunization
- Public Health Surveillance
- Summary of Care Record

Select 5 of above 10, including one public health measure
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<th>Meaningful Use Objective</th>
<th>Meaningful Use Measure</th>
<th>EMR Certification Criteria</th>
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| Smoking Status: Record smoking status for patients 13 years old or older. | **Physician Measure:** More than 50 percent of all unique patients 13 years old or older seen by the EP have smoking status recorded as structured data. **Hospital Measure:** More than 50 percent of all unique patients 13 years old or older or admitted to the eligible hospital’s inpatient or emergency department have smoking status recorded as structured data. | Enable a user to electronically record, modify, and retrieve the smoking status of a patient. Smoking status types must include:  
- current every day smoker  
- current some day smoker  
- former smoker  
- never smoker  
- smoker, current status unknown  
- unknown if ever smoked |
Collaborative Efforts

1. Documents
   - EMR referral forms
   - RHIO referral forms
   - NAQC referral form

2. Secure Network (NHIN Direct Framework)
   - RHIO initiatives
   - Private initiatives
   - MU requirements
   - NAQC collaborative

3. Interfaces
   - EMR – state health dept (HL7)
   - MU stage III requirements
   - NAQC collaborative

Quitline Database

Provider

Quitline Vendor