

Spring 2020



SHARE

State Health Alliance FOR Records Exchange

A Newsletter from the State Health Alliance for Records Exchange

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 @SHAREarkansas

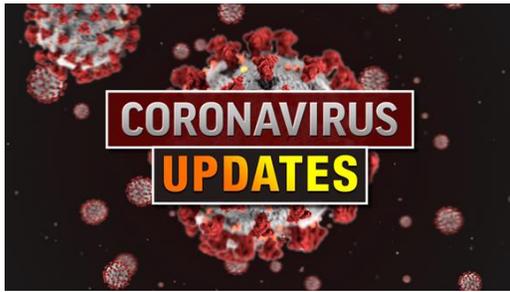
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SHARE COVID-19 Alerts



Our COVID-19 Laboratory Notifications service brings alerts of positive test results of attributed patients to providers, accountable care organizations (ACO), clinically integrated networks (CIN) and payers.

SHARE remains fully operational during this pandemic and is providing uninterrupted data exchange for our customers and the healthcare community throughout Arkansas.

We are working with our health information exchange participants, including the State of Arkansas, on important monitoring, surveillance and care coordination initiatives to assist with this situation.

The qualified participants that are already receiving the SHARE 24-hour daily reports of emergency department and inpatient discharges will also get the COVID-19 Laboratory Notifications.

Through direct secure messaging, we can notify you when patients have tested positive for COVID-19.

Access to this timely information can be used to:

- Improve disease management during COVID-19 pandemic
- Improve care management and coordination for patients or members
- Prevent hospital admission and readmissions
- Inform quality improvement
- Help healthcare providers pinpoint areas for improving outcomes

New Connections



\$817,000 Awarded to Rural Arkansas Hospitals for full integration with SHARE



Arkansas Blue Cross and Blue Shield has awarded \$817,000 to the Arkansas Rural Health Partnership (ARHP) to fund a connection to the State Health Alliance for Records Exchange (SHARE) program.

ARHP is a nonprofit organization made up of 14 hospitals and 108 hospital-owned or affiliated clinics in the southern region of the state.

"Health care is changing, and it's up to all of us in health care to adapt and respond and whenever possible to lead that change"

-Blue Cross President and CEO Curtis Barnett

For some of the hospitals, the grant will start their participation in SHARE. Several member hospitals currently are only participating at the minimal level and three member hospitals are not sharing data at all.

The one-year grant will allow all the hospitals to connect to SHARE at the highest level.

The SHARE program is an electronic platform allowing health care providers to communicate electronically, even if they are on different systems. SHARE produces a more complete picture of a patient's record and reduces unnecessary testing and waste.

New value-based care models for payment to health care providers are driving a shift to population health approaches that focus on prevention, improved chronic disease management and wellness activities and away from the traditional fee-for-service model.

Data that will be shared

- Admission, Discharge, Transfers
- Allergies
- Clinical Care Summaries
- Continuity of Care Documents
- Discharge Summaries
- Immunizations
- Laboratory Results
- Medications
- Progress Notes
- Vitals

"I want to help hospitals in rural Arkansas stay afloat with good-bottom line economics allowed by things like collaborative purchasing, negotiation of contracts, access to healthcare services through telehealth, and quality healthcare services that keep the rural patient at home"

-Arkansas Rural Health Partnership CEO Mellie Bridewell

Connected Care = Better Care

Written by By Mark T. Jansen, M.D. Printed in the Arkansas Democrat-Gazette February 14, 2020.

I'm a country doctor at heart. For nearly three decades, it was my great privilege to serve as a family physician to people who live in the communities that make up the largely rural greater Arkadelphia area.

When I learned Arkansas Blue Cross and Blue Shield was investing in creating a better informed and more connected healthcare delivery system in south Arkansas, I could not help but smile.

Healthcare in rural Arkansas has changed. The hospitals that once served small towns and farming communities are struggling to survive.

Healthcare is much better than it was back when state-of-the-art technology was an X-ray machine.

It's also true that it's now much more financially challenging for rural hospitals to acquire and maintain the sophisticated equipment that is required to offer the high-tech services patients now have come to view as "basic."

CT scans are a great example. If I can see you've recently had a CT scan in the next town down the road, I won't order one. I'll hop on the computer and look at the one you just had done.

If I am armed with your history, I can still devise an effective treatment plan and protect you from unnecessary exposure to radiation at the same time.

When it comes to healthcare, timely and accurate information is the blood supply, and this system is like a virtual transfusion that can be accessed at the touch of a button.

-Dr. Mark T. Jansen, VP, CMO for Arkansas Blue Cross Blue Shield

Patients can take comfort in knowing information about their care travels with them whether they are at their family doctor's office in Rison or when they see a cardiologist in Pine Bluff.

This connectivity benefits individuals, but it also can help us identify community-specific or regional health challenges and opportunities by analyzing the rich, centralized store of data it creates.

We can use these insights to develop strategies to improve the health and quality of life of local communities or even the entire region.

Investments like this one are absolutely essential to the future sustainability of the healthcare delivery system in the more rural and medically underserved areas of our state. But this is only the beginning.

We must add to it a greater use of remotely delivered assessment and care through technologies such as telemedicine.

And we must be on the lookout for more ways technology can help future generations of country doctors deliver the first-rate, personally tailored care their patients deserve.

