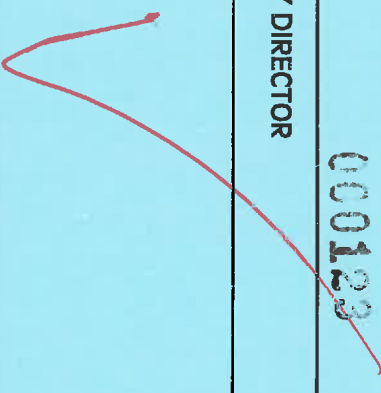


DEPARTMENT OF HEALTH AND HUMAN SERVICES
OFFICE OF DIRECTOR

ACTION REFERRAL

TO <i>Bawling/Ries</i>	DATE <i>8-1-06</i>
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DIRECTOR'S USE ONLY	ACTION REQUESTED
1. LOC NUMBER <i>000123</i>	<input type="checkbox"/> Prepare reply for the Director's signature DATE DUE _____
2. DATE SIGNED BY DIRECTOR 	<input checked="" type="checkbox"/> Prepare reply for appropriate signature DATE DUE <i>8-10-06</i>
	<input type="checkbox"/> FOIA DATE DUE _____
	<input type="checkbox"/> Necessary Action

APPROVALS (Only when prepared for director's signature)	APPROVE	* DISAPPROVE (Note reason for disapproval and return to preparer.)	COMMENT
1.			
2.			
3.			
4.			

From: Gary Ries
To: Linda Malone
Date: 7/31/2006 4:12:56 PM
Subject: Survey

This is the final, approved by Robby.

Gary

RECEIVED

AUG 01 2006

Department of Health & Human Services
OFFICE OF THE DIRECTOR

Department of Health and Human Services
OFFICE OF
INSPECTOR GENERAL

STATE MEDICAID AGENCIES'
INITIATIVES ON HEALTH
INFORMATION TECHNOLOGY

STATE MEDICAID DIRECTOR SURVEY



Thank you for taking the time to provide us with information on the health information technology (health IT) initiatives your State Medicaid agency is involved with. As we mentioned in our e-mail, the Office of Inspector General of the U.S. Department of Health and Human Services is currently conducting a survey of all State Medicaid Directors to identify health information technology initiatives that are **planned** or **currently being used** to deliver or monitor health care for Medicaid beneficiaries.

For the purposes of this survey, please note that **we are interested in any health IT initiative that is either directly funded by Medicaid, or utilizes any Medicaid resources, such as staffing.** Based on your responses, we may contact you in the future to obtain more specific information.

The deadline for completing this survey is July 13, 2006. Please send your answers to the following email address: christine.moundas@oig.hhs.gov


If you have any questions about filling out the questionnaire, please call Christine Moundas at (212) 264-1999 or Meridith Seife at (212) 264-1998.

Please see the next page for instructions on completing this survey.

Instructions

This questionnaire includes the following sections:

Section I:	Health IT Definitions
Section II:	Health IT Initiatives for Medicaid
Section III:	Benefits and Challenges of Implementing Health IT Initiatives
Section IV:	Federal Guidance and Funding for Health IT
Section V:	Contact Information

- You may appoint a designee or include other Medicaid staff in responding to this survey.
- Please answer every question, unless instructed otherwise. The instruction to skip a questions will be clearly marked with a “” symbol and a direction to skip to a specific question.
- In some cases, your health IT initiative may resemble but not precisely fit into the category we have provided. Please place this initiative into the category it most resembles.
- If your health IT initiative does not resemble any of the categories we have provided, there is an “other” category where you may provide more specific information on your initiative.
- We have provided limits to the answer fields, however answers may be continued at the end of the survey when necessary. In these instances, please be sure to indicate which question is being continued.
- Please provide us with any available documents that describe your initiatives in more detail. However, these additional documents should not replace your survey responses. You may send additional materials as e-mail attachments along with your completed survey or, if you prefer, you may send the materials by mail to:

Attention: Christine Moundas
U.S. Department of Health and Human Services
Office of Inspector General
Office of Evaluation and Inspections
26 Federal Plaza, Room 41-106
New York, NY 10278

- If you have any questions about filling out this survey, please call Christine Moundas at (212) 264-1999 or Meridith Seife at (212) 264-1998.
- **The deadline for completing this survey is July 13, 2006.** Please send your electronic answers to: christine.moundas@oig.hhs.gov

Section I: Health IT Definitions

Health IT is commonly defined as:

“Technology used to collect, store, retrieve, and transfer clinical and administrative information electronically.”

Below are some common examples of health IT. Please keep in mind that this list is not exhaustive and may not include health IT used to deliver and/or monitor health care for Medicaid beneficiaries in your State. Again, we are interested in hearing about any health IT initiatives your State agency has or is planning.

Electronic Health Records (EHRs) are records of patient health information generated by one or more encounters within a care delivery organization. EHRs include electronic medical records (EMRs) and can contain clinical data, clinical decision support, controlled medical vocabulary, order entry, computerized provider order entry, pharmacy, and clinical documentation applications. Healthcare practitioners use EHRs to document, monitor, and manage health care delivery. Additionally, EHRs can be longitudinal and can allow for a seamless exchange of health information between providers across multiple care settings.

Personal health records are point-in-time, portable records of patient health information ranging from encounter data to adverse drug interaction checks. A personal health record can provide patients and authorized health care providers access to prescriptions, lab and test results, claims data, allergies, and other information. There are several ways patients can maintain their portable, personal health records. These include computer disks, key-chain USB drives, and internet-based applications.

E-prescribing is the transmission of prescription or prescription-related information between a prescriber, dispenser, pharmacy benefit manager, or health plan, either directly or through an intermediary. E-prescribing includes, but is not limited to, two-way transmissions between the point of care and the dispenser. In general, e-prescribing technology allows prescribers to check for dosage, interactions with other medications, and therapeutic duplication. The technology can also provide information about formulary-based drug coverage.

Chronic Disease Monitoring consists of automated tools that provide remote monitoring capabilities to support the collection and transmission of health status information. Remote patient monitoring can be run through an in-home hub equipped with diagnostic devices which can be used to collect data such as patient weight, blood glucose levels, etc., about the patient on a daily basis. This information is then communicated to the primary care physician or other clinicians monitoring the patient. Devices for collecting these data may include scales, blood pressure cuffs, and glucometers. Technologies for patient-provider communications may include secure messaging, teleconferencing, and web-based resources. Additionally, these monitoring technologies may transmit reminders to patients regarding appointment schedules and medication administration.

Section II: Health IT Initiatives for Medicaid

The first section contains questions about any initiatives you have or are planning on electronic health records (EHRs), personal health records, e-prescribing, chronic disease monitoring or other types of health IT.

Electronic Health Records

1. This first set of questions deal with the use of EHRs. Does your State Medicaid agency **currently** have any initiatives on EHRs?

☒ X Yes

☐ No  **SKIP TO QUESTION # 5**

2. What is the name of this initiative?

Name: Client Management System (CMS)

3. Approximately how long has this initiative been in place?

Number of Months: 36

4. Please describe this EHR initiative: (PLEASE NOTE THAT THERE IS ADDITIONAL SPACE AT THE END OF THE SURVEY TO CONTINUE YOUR ANSWER. YOU MAY ALSO ATTACH DOCUMENTATION WHEN SUBMITTING YOUR COMPLETED SURVEY.)

CMS is a web-based, HIPAA compliant, secure application that provides authorized service providers access to Medicaid claims data. CMS utilizes stored Medicaid data and database components for the provision of data collection analysis, and linkage that is used for monitoring/tracking of defined populations and services rendered to Medicaid beneficiaries by public sector entities. Additionally, CMS allows tracking of public sector clients across multiple agencies and other Medicaid service providers to ensure better coordination and management of patient care. CMS is intended to enhance treatment, payment and operation of services to Medicaid patients, lead to better coordination of care for patients and assist in program management by leading to improved and more cost effective outcomes. CMS has the capability to generate annual management reports that detail process measures and quality assurance elements.

5. Is your State Medicaid agency **planning any future** initiatives on EHRs?

☒ Yes

☐ No  **SKIP TO QUESTION # 9**

6. What is the name of this initiative?

Name: To be determined

7. On approximately what date does your agency plan to implement this initiative?

_____ Month _____ Year To be determined

8. Please describe this EHR initiative: (PLEASE NOTE THAT THERE IS ADDITIONAL SPACE AT THE END OF THE SURVEY TO CONTINUE YOUR ANSWER. YOU MAY ALSO ATTACH DOCUMENTATION WHEN SUBMITTING YOUR COMPLETED SURVEY.)

This pilot project will involve primary care physicians in several counties throughout the State. The project is to help providers coordinate care for their patients by allowing all diagnosis and procedure code data to be reviewed through an electronic medical record (EMR) platform. The Office of Research and Statistics is partnering with the Department of Health and Human Services to provide an EMR service link to physicians with and without current EMRs in their office. This system contains all security protocols that ensure HIPAA compliance. The pilot will involve 8 physicians for a period of 6 months.

Personal Health Records

9. This next question deals with the use of personal health records. Does your State Medicaid agency **currently** have any initiatives on personal health records?

____ Yes

☒ No



SKIP TO QUESTION #13

10. What is the name of this initiative?

Name:

11. Approximately how long has this initiative been in place?

Number of Months:

12. Please describe this personal health records initiative: (PLEASE NOTE THAT THERE IS ADDITIONAL SPACE AT THE END OF THE SURVEY TO CONTINUE YOUR ANSWER. YOU MAY ALSO ATTACH DOCUMENTATION WHEN SUBMITTING YOUR COMPLETED SURVEY.)

13. Is your State Medicaid agency planning any future initiatives on personal health records?

_____ Yes

☒ No  **SKIP TO QUESTION # 17**

14. What is the name of this initiative?

Name:

15. On approximately what date does your agency plan to implement this initiative?

_____ Month _____ Year

16. Please describe this personal health record initiative: (PLEASE NOTE THAT THERE IS ADDITIONAL SPACE AT THE END OF THE SURVEY TO CONTINUE YOUR ANSWER. YOU MAY ALSO ATTACH DOCUMENTATION WHEN SUBMITTING YOUR COMPLETED SURVEY.)

E-prescribing

17. This next question deals with the use of e-prescribing. Does your State Medicaid agency **currently** have any initiatives on e-prescribing?

_____ Yes

☒ No  **SKIP TO QUESTION # 21**

18. What is the name of this initiative?

Name:

19. Approximately how long has this initiative been in place?

Number of Months:

20. Please describe this e-prescribing initiative: (PLEASE NOTE THAT THERE IS ADDITIONAL SPACE AT THE END OF THE SURVEY TO CONTINUE YOUR ANSWER. YOU MAY ALSO ATTACH DOCUMENTATION WHEN SUBMITTING YOUR COMPLETED SURVEY.)

21. Is your State Medicaid agency **planning any future** initiatives on e-prescribing?

____ Yes

☒ No



SKIP TO QUESTION # 25

22. What is the name of this initiative?

Name:

23. On approximately what date does your agency plan to implement this initiative?

____ Month ____ Year

24. Please describe this e-prescribing initiative: (PLEASE NOTE THAT THERE IS ADDITIONAL SPACE AT THE END OF THE SURVEY TO CONTINUE YOUR ANSWER. YOU MAY ALSO ATTACH DOCUMENTATION WHEN SUBMITTING YOUR COMPLETED SURVEY.)

Chronic Disease Monitoring

25. This next question deals with chronic disease monitoring. Does your State Medicaid agency **currently** have any initiatives on chronic disease monitoring?

___ Yes

☒ No



SKIP TO QUESTION #29

26. What is the name of this initiative?

Name:

27. Approximately how long has this initiative been in place?

Number of Months:

28. Please describe this chronic disease monitoring initiative: (PLEASE NOTE THAT THERE IS ADDITIONAL SPACE AT THE END OF THE SURVEY TO CONTINUE YOUR ANSWER. YOU MAY ALSO ATTACH DOCUMENTATION WHEN SUBMITTING YOUR COMPLETED SURVEY.)

29. Is your State Medicaid agency **planning any future** initiatives on chronic disease monitoring?

☒ X ☐ Yes

☐ No  **SKIP TO QUESTION #33**

30. What is the name of this initiative?

Name: To be determined.

31. On approximately what date does your agency plan to implement this initiative?

Month Year To be determined.

32. Please describe this chronic disease monitoring initiative: (PLEASE NOTE THAT THERE IS ADDITIONAL SPACE AT THE END OF THE SURVEY TO CONTINUE YOUR ANSWER. YOU MAY ALSO ATTACH DOCUMENTATION WHEN SUBMITTING YOUR COMPLETED SURVEY.)

The Medicaid agency is currently using our recently purchased decision support system to analyze data on high utilizers. Disease management and monitoring initiatives may be pursued upon completion of this analysis. We have met with prospective vendors that utilize various technologies to remotely monitor beneficiaries.

Other Health IT Initiative

33. Does your State Medicaid agency **currently** have any other health IT initiative?

☒ Yes

☐ No  **SKIP TO QUESTION #37**

34. What is the name of this initiative?

Name: MedStat Decision Support

35. Approximately how long has this initiative been in place?

Number of Months: Contract Award July 2005.

36. Please describe this initiative: (PLEASE NOTE THAT THERE IS ADDITIONAL SPACE AT THE END OF THE SURVEY TO CONTINUE YOUR ANSWER. YOU MAY ALSO ATTACH DOCUMENTATION WHEN SUBMITTING YOUR COMPLETED SURVEY.)

Medstat Advantage Suite integrates information from diverse sources and systems, organizes it to support decision making, and enables easy access to information in a flexible, customized application. Its powerful applications are linked to an integrated warehouse of medical and prescription claims, encounters, eligibility, lab results, authorizations, health risks assessments, and performance measures.

Web-enabled Advantage Suite packages and organizes critical healthcare quality and cost information into views that compel decision-making. The product provides a comprehensive measures catalog, and produces flexible and fast reports to maximize productivity and facilitate rapid information distribution.

Within the SCDHHS Bureau of Long Term Care we have also utilized information technology in the operations of the three of our 1915c home and community-base waivers. There are two IT systems, Care Call and an automated assessment and care planning system. Care Call works by having the workers call a toll free number when they go in the home to check in and again when they leave to check out. This call automatically identifies the company providing the service and the consumer receiving it and the amount of time spent on the service. This is compared to the service authorized by the case manager. If it matches, Medicaid will pay the provider for the service. If not, no payment will be made.

Since 1991, case managers have been able to use the automated Case Management System (CMS) to assist them in their work. This system keeps automated records of all intake, assessment, and care planning activities. Case managers download information to laptops which can be used in the consumer's homes as assessments are completed. They then upload information which becomes part of a statewide database.

37. Is your State Medicaid agency **planning** any other health IT initiative?

☒ X ☐ Yes

☐ No  **SKIP TO QUESTION #41**

38. What is the name of this initiative?

Name: Healthy Connections

39. On approximately what date does your agency plan to implement this initiative?

_____ Month _____ Year To be determined.

40. Please describe this initiative: (PLEASE NOTE THAT THERE IS ADDITIONAL SPACE AT THE
END OF THE SURVEY TO CONTINUE YOUR ANSWER. YOU MAY ALSO ATTACH
DOCUMENTATION WHEN SUBMITTING YOUR COMPLETED SURVEY.)

The State submitted an 1115 waiver request to CMS in 2005. During negotiations with CMS, the Deficit Reduction Act which contained many of our concepts, was introduced and passed. The DHHS is now assessing the best strategy to move forward with its Medicaid reform initiatives and will likely apply to be one of the 10 pilot states for the Personal Health Account (PHA). In addition to the IT initiatives around the PHA we will likely include a provision utilizing stored value card technology.

Section III: Benefits and Challenges of Implementing Health IT Initiatives

The next set of questions deals with the potential benefits and challenges associated with implementing health IT initiatives for Medicaid.

41. In your opinion, what are the benefits, if any, associated with using health IT to deliver and/or monitor health care for Medicaid?

Increased access and coordination of care. Supports development of best practice treatment models and early identification of risk for adverse/outlier outcomes.

42. In your opinion, what are the challenges, if any, associated with using health IT to deliver and/or monitor health care for Medicaid?

Legal and privacy issues. Operationalization of system to front line clinical and case manager users. Many of our recipients lack a medical home and we lack authority over non-compliant patients. Many states are further challenged by a lack of expertise in current IT technology and medical treatments.

Section IV: Federal Guidance and Funding for Health IT

The next set of questions deals with any involvement your agency has had with federal entities to implement your health IT initiative. We also ask questions regarding the funds your agency uses or plans to use to implement health IT.

43. What guidance, if any, have the Centers for Medicare and Medicaid Services (CMS) provided to your agency with regard to the implementation of health IT for Medicaid?

Central office has been very helpful in guiding us through our Medicaid reform (1115 Waiver) process and coordinating those efforts with the DRA.

44. What other involvement, if any, has your office had with CMS to implement your health IT initiative(s)?

Review and approval of APDs, RFPs and other supporting documentation.

45. What involvement, if any, has your office had with the Office of the National Coordinator for Health IT to implement your health IT initiative(s)?

We are not aware of any involvement with this organization.

46. How, if at all, has your agency worked with other Federal or State agencies to implement your health IT initiative(s)?

We have worked with South Carolina's Office of Research and Statistics in developing our Data Warehouse. DHHS also partnered with other State agencies to develop the Memorandums of Agreement for the design and implementation of the web-based Client Management System. The goal is to ensure usability of the CMS by public sector users for care coordination, management of patient care and for decision support.

READ: As you may be aware, Section 6081 of the Deficit Reduction Act of 2005 allocates up to \$150 million for fiscal years 2007 and 2008 for newly-established “Medicaid Transformation Grants.” These grants are to provide payments to States for the adoption of “innovative methods to improve the effectiveness and efficiency in providing medical assistance” in their Medicaid programs. The implementation and use of health IT is one of the six specified permissible uses of these funds.

47. How, if at all, does your agency plan to use Medicaid Transformation Grant money to implement health IT initiatives?

The State is assessing all opportunities provided within the DRA including the potential grant application to fund an Electronic Medical Record.

READ: Other funding for health IT initiatives is available through Section 235 of Public Law 92-603, which allows 90-percent federal financial participation (FFP) for design, development or installation of Medicaid Management Information Systems (MMIS).

48. How, if at all, does your agency use or plan to use MMIS FFP funding to implement health IT?

READ: States may also use savings resulting from Section 1115 waivers to implement health IT.

49. How, if at all, does your agency use or plan to use savings resulting from Section 1115 waivers to implement health IT?

50. What other funds does your agency use or plan to use to implement health IT?

The State's share of Medicaid funding.

Section V: Contact Information

51. Please provide a primary contact for any follow-up questions we may have regarding your responses to this survey:

Gary Ries

52. What is this person's title?

Deputy Director, Eligibility and Beneficiary Services

53. What is this person's telephone number?

803-898-2851

54. What is this person's e-mail address?

ries@scdhhs.gov

Thank you for taking the time to complete this survey. As stated previously, we may contact you by telephone to obtain more specific information on your health IT initiative(s).

**We have provided extra space below for any responses that did not fit in the fields above.
Please remember to indicate which question is being continued.**