

Arizona Electronic Health Record (EHR) Collaborative Purchasing Program (CPP)
FREQUENTLY ASKED QUESTIONS (FAQs)

1. What is the Electronic Health Record (EHR) Collaborative Purchasing Program (CPP)?

In collaboration with Arizona's provider organizations and the Arizona Health-e Connection, the Arizona Health Care Cost Containment System (AHCCCS) is leading the creation of the Arizona Electronic Health Record (EHR) Collaborative Purchasing Program (CPP). Slated for an early 2009 launch, the CPP is designed to help providers in small- and medium-sized medical practices with the transition to an affordable, user friendly EHR system. The CPP leverages group purchasing and vendor oversight to deliver a low-hassle, low-cost web-based CCHIT*-certified EHR and the services needed to plan for, implement, use, and maintain an EHR. Discounts for hardware and other products and services are also anticipated.

The CPP is being created using funds from the Medicaid Transformation Grant program.

*CCHIT (Certification Commission for Healthcare Information Technology) <http://www.cchit.org/>

2. Who is eligible for participation in the EHR CPP?

All licensed Arizona providers are eligible for participation. Initial program capacity may be limited, so priority will be given to Primary Care Providers* from **small (1-5)** and **medium-sized (6-50)** practices who are AHCCCS registered providers and who have submitted the *Interest Form* available at <http://www.azhealthrecord.com/InterestForm/Default.aspx>

**Primary Care providers are those licensed in Arizona as allopathic or osteopathic physicians and who specialize in family practice, internal medicine, obstetrics, gynecology or pediatrics; certified nurse practitioners or certified nurse midwives; or physician assistants.*
<http://azahcccs.gov/Publications/ProviderTraining/Reporting/PCPMemberRatios.asp#Primary>

3. What functions can I expect from the web-based EHR available through the CPP?

The CPP EHR will offer a CCHIT-certified, web-based Electronic Health Record (EHR) that includes the following modular features:

- Clinical notes (medical history, problem list, SOAP notes)
- E-Prescribing (medication list, allergies, interactions, formularies, refills)
- E-Referrals (Continuity of Care Record [CCR], attachments)
- Interfaces with lab, radiology, hospital, and other key service providers
- Eligibility verification (AHCCCS)
- Practice management (financial and administrative modules optional)
- Secure patient portal
- Discounted monthly subscription (under \$500 per full-time provider-dependent on upon total number of participating providers and customization features)
- Standard reports, including
 - HEDIS <http://www.ncqa.org/tabid/855/Default.aspx>
 - CMS PQRI http://www.cms.hhs.gov/PQRI/15_MeasuresCodes.asp
 - EPSDT http://www.azahcccs.gov/Regulations/OSPPolicy/Appendicies/appx_b.asp
 - Medical Home <http://www.ncqa.org/tabid/631/Default.aspx>
 - Ad-hoc reporting tools

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4. What other benefits are available through the CPP?

The CPP will connect participants to group discounts and other programs not available to individual practices or clinics.

CPP Participants will be eligible for:

- Group purchase rates for hardware, software, interfaces, maintenance, and support services
- Help with practice assessment, planning, selection, set-up, training, implementation, and policies
- Tiered discounts and arrangements for part-time providers and students
- Contract management and expedited issues resolution
- Facilitated user forum

5. Keeping up with CMS, AHCCCS, ADHS (health department) and all the other health plan requirements and reports is expensive and time-consuming. How will the CPP EHR help with all of these reporting requirements?

A standard feature of the CPP EHR is a reporting tool that will make it easy to satisfy reporting requirements for AHCCCS, CMS and selected HEDIS and Medical Home measures. The reporting tool will make it easy for you to monitor your practice's performance, compare it to aggregated benchmarks, and participate in incentive programs. And because it is web-based, you will always have the latest guidelines and measures. The standard reporting modules will include:

- HEDIS <http://www.ncqa.org/tabid/855/Default.aspx>
- CMS PQRI http://www.cms.hhs.gov/PQRI/15_MeasuresCodes.asp
- EPSDT http://www.azahcccs.gov/Regulations/OSPPolicy/Appendicies/appx_b.asp
- Medical Home <http://www.ncqa.org/tabid/631/Default.aspx>

6. Do I directly contract with the EHR company?

Yes, you (or your organization) will sign a standardized agreement with the EHR company which includes the fixed monthly subscription rate. The terms of the agreement will be determined during the State of Arizona RFP process. The State of Arizona (AHCCCS) will also have an agreement with the company to ensure contract oversight.

7. When can I start using the EHR purchased through the CPP?

The first CPP EHR users are expected to go-live in February 2009. The actual time from commitment to implementation will be practice-specific.

8. How will the CPP EHR vendor be selected?

The State of Arizona Request for Proposals (RFP) process will be used to select the EHR product. The core review criteria include: company and system stability, system technology and functional capabilities, cost, and completeness of RFP response. A practicing clinician panel will assist in the final product(s) selection.

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9. What does the monthly CPP EHR subscription fee cover?

The monthly subscription fee will cover training, licenses, maintenance, software and system upgrades (excluding your office computer's hardware), common interfaces and support.

10. How is the CPP EHR subscription fee determined?

The fee initially will be based on the number interested clinicians (as assessed by the number completed *Interest Forms*): the greater the number of participants, the lower the subscription fee.

11. What will I need to access the CPP EHR?

The EHR requires access to a high-speed Internet connection. This connection will facilitate the delivery of the web-based functions of the EHR and data security tools for your workstations. It also will enable you to obtain privacy protection, disaster recovery, hosting, versioning, maintenance of databases, additional application software (for internal workstations), and interfaces to external data sources (e.g., lab, hospital, radiology).

Any mid-range computer purchased in the last three years should suffice for this application. When the CPP EHR is selected, specific requirements will be available. Typically, a mid-range computer meets the following specifications:

Internet Browser:	Internet Explorer 7 Mozilla Firefox 2.0 Safari 3.0
Computer Processor:	Intel® Pentium® 4 Class
Operating Systems:	Microsoft XP Apple OS X
Memory:	1 GB (RAM) 30 GB hard drive
Display:	Super VGA (800 X 600)
Network Interface:	10 / 100 Mbps Ethernet card
Peripherals/Other:	Pointer device Printer (optional) Video accelerator card USB port Broadband Internet access (cable or DSL)

12. What if I only have a dial-up Internet connection?

To effectively use a web-based EHR in a busy clinic or practice, a high-speed Internet connection is required. As a member of the CPP, we will help you to investigate broadband options in your area. You may be eligible for special high-speed connectivity assistance.

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13. Who is responsible for system security and privacy?

The company providing the EHR solution will be responsible for ensuring system security and must adhere to the industry-standard security and privacy requirements as outlined in the State contract.

14. Who will provide the CPP EHR training?

Web-based and on-site training will be provided by the EHR vendor in a collaborative arrangement with provider organizations and health plans.

15. Can old medical records be scanned into the CPP EHR?

Yes, document processing will be a feature of the CPP EHR. This process will be personalized to your environment.

16. What if I already have an EMR?

Congratulations on being an early adopter! You are positively impacting the quality, safety and efficiency of care for your patients, and will be eligible to participate in the local, state and/or national medical home incentive programs that will launch in 2009.

You may be interested in the other discounts and services offered as part of the CPP, including the reporting modules. Or, if your current EMR system is not meeting your needs, you may wish to explore the CPP EHR as an alternative option.

17. What if I want to opt out after initial participation? What happens if I want to switch to another company?

If you decide to discontinue your EHR subscription, you may transition your data to another system or print it out. Key elements of the record will be exportable and therefore interoperable with other CCHIT-certified EHR systems.

18. What if the EHR company goes out of business?

The financial status of the company is part of the State of Arizona evaluation process. It includes a requirement that the company providing the EHR will have a contingency plan that specifies that the EHR system electronic code will be held in escrow. This ensures that the application will be able to be used to transition data even after the product is no longer supported. Additionally, key elements of the records will be exportable so that your information can easily transition to another product.

19. How is the “Medical Home” concept linked to the EHR Collaborative Purchasing Program CPP?

The “patient-centered Medical Home” model and reimbursement structure requires an EHR to take advantage of the full quality, safety, and efficiency benefits. The CPP EHR will include Medical Home reporting modules. For more information on the Medical Home measures, visit <http://www.ncqa.org/tabid/631/Default.aspx>

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20. How is Arizona's e-prescribing initiative (EAZRx) linked to the EHR CPP?

The CPP EHR includes an e-prescribing application that meets CCHIT and SureScripts standards, including connectivity to SureScripts/RxHub. You may choose to implement the e-prescribing application first to start taking advantage of e-prescribing benefits right away. For more information about EAZRx <http://www.azhec.org/ePrescribingAZ.jsp>

21. Will this be linked to any other incentive programs (e.g., AzHEC, other insurers)?

Coordination with other incentive programs will make adoption easier. We are working with the Arizona Health-e Connection, provider organizations, and local health plan representatives to align the incentives for EHR adoption and facilitate participation in related programs. CPP members will be notified as these programs become available.

22. What if only some of our providers want to use the EHR?

The most successful EHR implementations occur when everyone in the practice is engaged, but phased implementations are possible and identified through the "needs assessment" part of the planning phase.

23. How does the State Request for Proposals (RFP) process work?

The EHR RFP will be released in December with responses due in January. After a preliminary review by AHCCCS, a representative panel of clinicians will participate in demonstrations and assist in the final product selection.

24. How do EHR and EMR differ?

The terms EHR and EMR are often used interchangeably. Technically, there are differences, which are identified in the standard terminology approved this year by the ONC (Office of the National Coordinator):

EHR contains health-related information on an individual that conforms to nationally recognized *interoperability standards* and that can be created, managed, and consulted by authorized clinicians and staff across more than one health care organization. (The purpose of the EHR is to facilitate care across organizations to support continuity of care.)

EMR contains health-related information on an individual that can be created, gathered, managed, and consulted by authorized clinicians and staff within one health care organization.

For more detailed information, visit ONC at www.hhs.gov/healthit/onc/mission

25. What is CCHIT (Certification Commission for Healthcare Information Technology)?

The Certification Commission for Healthcare Information Technology or CCHIT is a recognized certification body for electronic health records and their networks, and an independent, voluntary, private-sector initiative. Their mission is to **accelerate the adoption of health information technology by creating an efficient, credible and sustainable certification program.** <http://www.cchit.org/>

For more information visit <http://www.azhealthrecord.gov/ CPP/Default.aspx>
or contact Brent Bizik, brent.bizik@azahcccs.gov or 602-417-6971.

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