



Ohio Health Information Partnership
Health Information in a Heartbeat

CONNECTS

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Get the latest on PQRS, MU, quality reporting

CMS is about to release final rules for MU 2015-2017! We're holding an in-person educational program with the Health Services Advisory Group (HSAG) to give you the most up-to-date information on PQRS requirements and Meaningful Use reporting for 2015 as well as a discussion of IQR and the relationship between quality reporting programs and practices.

When: Thursday, September 17, 2015 from 8:30 a.m. - 3 p.m.

Where: Conference Center at OCLC, 6600 Kilgour Pl., Dublin, OH 43017

Fee: \$75 per person + processing fee
(includes breakfast and lunch, non-refundable)

Register: <https://www.eventbrite.com/e/new-cms-requirements-quality-reporting-and-meaningful-use-in-2015-tickets-18007992390>

Topics and speakers include:

- **Blending Hospital and Physician Quality Reporting for Successful Payment Reform:** Kimberly Harris-Salamone, P.D, MPA and Bethany Wheeler, HSAG
- **Understanding the CMS Final Reporting Regulations for 2015 Medicare and Medicaid Incentives:** Scott Mash, MSLIT, CPHIMS, FHIMSS and Cathy Costello, J.D., Ohio

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- **Physician Quality Reporting Under 2015 PQRS and GPRO Requirements:** Annacler Harris-Blevin, MS, NJ-HITEC Registry
- **Update from Ohio Department of Health on Public Health Reporting and Meaningful Use:** Brian Fowler, MPH, Ohio Department of Health
- **Panel of all speakers for Q & A**



Meet Henry Vylanek, HIE Project Manager for Hospitals

As a member of the **CliniSync HIE Team**, Henry leads hospitals through implementation into the CliniSync Health Information Exchange.

From start to finish, he receives the initial patient data and then walks a hospital through certification testing and production until it attains a “go live” status. Then, CliniSync can transmit that clinical information to physicians and other clinicians in real-time.

Simultaneously, CliniSync captures data on a patient so it eventually can be pulled into one single record – along with health information on that patient from other facilities. When a clinician searches CliniSync by patient name, he or she can access all information within the system for that individual.

Henry says the length of time for the implementation process depends on the hospital size, systems used and resources available. He works with IT administrators, project managers, interface analysts and sometimes, Chief Information Officers.

“I like being able to look at the data we have and determine new ways to contextualize it for providers who will be viewing the data,” he says. “When you log into the Community Health Record, there are tons of records. My goal is to answer the question: How can we make this meaningful for a provider? What information is relevant when a patient presents for care?”

When he first joined CliniSync in April 2014, Henry brought past experience in pharmacy, medical records and clinical research to his position as a physician liaison and EHR implementation specialist.

He served as a clinical research assistant at Nationwide Children's Hospital while working on The Cancer Genome Atlas funded by the National Center Institute. He also has experience as a laboratory assistant at Ohio State University's Department of Oral Biology.

Henry holds a B.S. in microbiology from Ohio State. He has a wide range of knowledge involving EPIC EMR, coding, clinical data management, pharmacy systems and processes, HIPAA, medical records management, lab practices and medical terminology.

Some of his early work experience involved a position as a pharmacy technician at Giant Eagle, Inc. and a medical records clerk at the Ohio State University Medical Center, where he converted an OSU practice from paper records to electronic health records. Currently, Henry is applying for a graduate degree in healthcare informatics.



Welcome to the CliniSync Community

We continue to expand services to more and more practices and are especially encouraged that the number of our long-term and post-acute care facilities -- including hospice and home health -- continues to climb. We also thank the behavioral health community for joining us as well!

Welcome:

LBK Health Care (Liberty Nursing Centers) in 16 locations in OH

AIDS Resource Center Ohio (ARC) in Columbus

Arlington Family in Arlington (Hancock County)

East Holmes Family Care in Berlin

Maumee Bay Family Practice in Oregon

Meridian Community Care in Youngstown

Kidney Health Group in Akron

Portsmouth Vision Center in Portsmouth

Syntero in Dublin (Behavioral Health)

Kunz Medical Associates in Chillicothe

What makes an HIE succeed?

Health Information Exchanges really can be successful. Just look at the CliniSync Health Information Exchange here in Ohio.



Listen to **Brian Ahier**, Director of Standards and Government Affairs at Medicity (our technology vendor), and **Dan Paoletti**, our CEO, talk about how health information exchange can lead to value-based care and improved population health.

Click [here](#) or go to <http://www.healthagen.com/blog/making-case-successful-hies?hootPostID=24cb1d2600a76d60569131db017492ae>.



8/25 Chronic Disease Self-Management Webinar

Self-management: A community resource to help your patients with chronic diseases achieve better health

Tuesday, August 25, 2015 at 12:15 - 1:00 PM

Sponsored by: Ohio Patient-Centered Primary Care Collaborative

Patients with chronic diseases must begin to make behavior changes to improve their health. How can health professionals motivate change and move patients to recognize small steps that they can take towards better health? **How can community self-management programs help?** What is the benefit of referring patients to self-management programs? This webinar, hosted by the OPCPC Patient Engagement Learning Center, can help provider practices to answer these important questions. Participation is limited to the first 150 who register. [Register now!](#)



CMS to require health information exchange for long-term care

A new proposed rule released by CMS in July in conjunction with the [White House Conference on Aging](#) would require long-term care (LTC) facilities and nursing homes to **participate in health information exchange**, CMS says. During a [patient transfer](#) or discharge, long-term care facilities would be required not only to document an event in the patient's clinical record, but also to transmit that information to the receiving facility to promote continuity of care. To read the full article, click [here](#) or go to <http://healthitanalytics.com/news/cms-to-require-health-information-exchange-for-long-term-care>



Yes, it's legal to e-prescribe controlled substances

While you may have heard otherwise, it's legal to e-prescribe controlled substances in Ohio. To ensure that you and other prescribers have the most up-to-date information possible, we've convened an Ohio E-Prescribing Task Force with representatives from Ohio and national entities to work through misconceptions and align procedures for the medical community.

- **Did you know...it's legal to e-prescribe controlled substances in Ohio?**
 - It is, and in 48 other states.
- **We're legal to e-prescribe, but we're not doing it.**
 - Even though 78 percent of our pharmacies can accept EPCS, only 333 providers end them.
- **Ohio paved the way for controlled substance e-prescribing nationally.**
 - Two Ohio pharmacists from the Ohio Board of Pharmacy started the ball rolling in Washington in 2008.
- **Just in case you're skeptical.**
 - Five Ohioans die every day from drug overdoses, a 413 percent increase since 1999. More than a third of these are caused by overdoses of prescription opioid pain medications.
- **Maybe we can solve this problem together.**
 - Go to fact sheets produced by partners across the state for physicians, hospitals/clinics and pharmacists
here: <http://www.clinisync.org/index.php/about-us/e-prescribing-taskforce.html>
- **Read the full story here:**
http://www.clinisync.org/images/EPCS_Story.pdf

Feel free to re-publish this story and fact sheets or send this information to anyone you think will benefit from it.

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