

# **Agenda**

- MiHIN Introduction
- Active Care Relationship Service® (ACRS®) 101
  - What is the ACRS?
  - Why is the ACRS important?
  - Who does the ACRS benefit?
  - How does the ACRS work?
- Mechanisms
  - File-based ACRS
  - Manage ACRS
  - Real-Time (RT) ACRS
  - ACRS CareLink
- Files and Specs





# Michigan Health Information Network Shared Services (MiHIN)

MiHIN is Michigan's state-designated entity to continuously improve healthcare quality, efficiency, and patient safety by promoting secure, electronic exchange of health information. MiHIN represents a growing network of public and private organizations working to overcome data sharing barriers, reduce costs, and ultimately advance the health of Michigan's population.



**Federal Office of National Coordinator** establishes State Health Information Exchange Cooperative Agreement Program

Michigan forms **Health Information** Technology Commission, which establishes MiHIN.

> Active Care Relationship Service (ACRS) and Admission Discharge, Transfer (ADT) Notifications go live

**97%** 

of Admissions Discharge Transfer **Notifications** statewide sent through MiHIN

Common Key Service introduced for patient matching

131,133,812

Immunization Queries Corporation and Interoperability

data points flow through the statewide network each week



INTEROPERABILITY

Velatura Public Benefit

Institute established

velatura

• 2010 - 2012 - 2013 - 2014 - 2016 - 2017 - 2019 - 2020 - 2022 - 2023 - 2024  $\rightarrow$ 

More than

MiHIN completes its corporate affiliation of Great Lakes Health Connect (GLHC)

HDU legislation introduced in Michigan

messages routed through statewide network

messages routed through statewide network

More than

## **Network of Networks**



Making valuable data available at the point of care.



# Active Care Relationship Service® (ACRS®)



# **Active Care Relationship Service® (ACRS®)**

Attributing patients with the providers who care for them

- MiHIN's Active Care Relationship Service®
   (ACRS®) is the care mapping service
   supporting our ability to exchange real-time
   notifications and updates on a patient to all
   those in the health ecosystem legally caring
   for that person.
- ACRS maps a comprehensive view of the healthcare professionals and organizations actively involved in a patient's care, to facilitate the exchange of critical information necessary to deliver optimized, personalized, care delivery.

#### **Defining an Active Care Relationship**

- A patient attributed to a healthcare professional/participating organization indicates that:
  - The healthcare professional/ participating organization has seen the patient within the past two years, and expects to see them again or,
  - A patient has been attributed to a healthcare professional/managing organization via a payer.



# **Types of Active Care Relationships**

Declared

Sent to MiHIN from a person or entity defined within the active care relationship

Assigned

Provided to MiHIN by a third-party. This is common when a primary care physician is assigned by a Health Maintenance Organization (HMO) Reported

Created by MiHIN for an organization based on message content passing through MiHIN

Derived

Created using statistical analysis or via mathematical modeling of data integrated from multiple sources and provided to MiHIN

# Why is the ACRS Important?



If we know who the information or data pertains to, and we know who has a legally defined relationship with that person, we can notify, share and make available that information and data about the right patients to the right care team members.

# **Foundation for Sharing**

- ACRS supports our Legal Chain of Trust
- Sharing through MiHIN is supported through the HIPAA Privacy Rule
- The HIPAA Privacy Rule allows sharing for Treatment, Payment, and Healthcare Operations for patients whom entities have in common
- ACRS allows MiHIN to discover patients "in common"



# **Conditions of Participation Compliance**

- Conditions of Participation for Sending Encounter Notifications
- Identifying providers who should receive healthcare alerts on an individual



# **Supports Provider Access API**



- Payers must make certain information available to providers via an application program interface (API) under CMS Patient Access Rule expansion
- CMS requires that only providers who have an active relationship with the patient can access this information, and payers must confirm this
- Payers are directed to leverage frameworks for patient provider attribution
- ACRS acts as the framework for patient provider attribution

# Why ACRS?

#### **Care Coordination**

ACRS enables
seamless
coordination,
communication and
information sharing
between different
care teams, improving
patient outcomes and
reducing healthcare
costs.

# Population Health Management

ACRS supports
population health
management
initiatives by
aggregating and
analyzing health data
from various sources.

Can be used to identify high-risk patients, track health trends, and implement targeted interventions to improve the health of the community.

# Patient Engagement & Trust Building

ACRS aims to empowers patients to actively participate in their own care by providing their care team members with access to their health records and personalized care plans.

Care Team members can confirm with patients their shared understanding of their care journey.

#### Interoperability

ACRS promotes interoperability by facilitating the exchange of health information between different healthcare systems and organizations.

Ensures that patient data is available when and where it is needed, regardless of the system or provider.

### **Who Does ACRS Benefit?**



#### **Patients**

Engaged, comprehensive care



#### **Providers**

 Access to comprehensive view of patient's medical history, improved care coordination



#### **Health Plans/Payers**

• Streamlined claims processing, reduced administrative costs



#### **Local Health Depts & Government Entities**

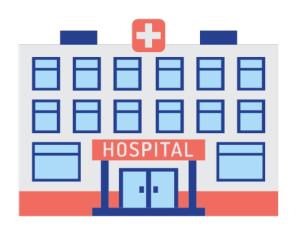
Improved outcomes and reduced costs



#### **Technology Vendors**

• Opportunities for innovative solutions, enhanced overall healthcare experience

# How does ACRS support data flow to participants?

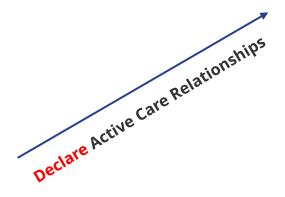




Send Patient Data (Which can act as a Reported Active Care Relationship)







MiHIN HIE Platform Message Router

Find & Retrieve Care Team Delivery Address Information

Push (proactively send) or make available for Query
Patient Data
to Active Care Relationships





#### File-Based ACRS

#### When to Use

 Identifying whom you have an active care relationship with prior to receiving push notifications in realtime

#### Why to Use

- Seeking to receive patient notifications in real-time
- Can be automated
- Validation feedback provided (instant feedback via File Submission Module)

#### Who to Use

 Larger organizations (POs, Health Plans, etc.)

#### Real-Time ACRS

#### When to Use

 Seeking to "capture" new patients in between file submissions

#### Why to Use

Can be used to
 establish real-time
 relationships with
 patients (e.g., prior to
 the flat-file being
 submitted)

#### Who to Use

 Any organization actively sending data to MiHIN

#### Manage ACRS

#### When to Use

- An active care relationship does not already exist, or the patient is deceased
- Establishing, editing, or removing active care relationships

#### Why to Use

- Declaring active care relationships in between file submissions
- Declaring/removing patients on the fly

#### Who to Use

 Health Departments, CMHs, Hospice, Organ Donors, etc.

#### ACRS CareLink

#### When to Use

 When attempting to retrieve patient information for whom you do not have an active care relationship with

#### Why to Use?

 Ease of use when attempting to review patient information and needing to declare an active care relationship quickly

#### Who to Use?

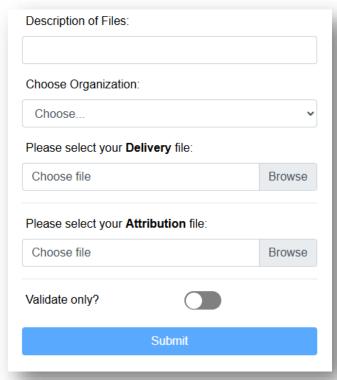
 Health Departments, CMHs, Nurses, Care Managers, Organ Donors, etc.



## **File-based ACRS**

# **Submit ACRS Files via MIGateway® File Submission**

- Requires a MIGateway license
- Instantaneous validation and status feedback via UI and email



# **Submit ACRS Files Via Secure File Transfer Protocol (SFTP)**

- Connectivity form must be completed and returned.
- Files uploaded to the submission folder
- Validation feedback returned via SFTP return folder and email

Regardless of the submission mechanism, if a patient appears on the attribution file one month and does not appear on the following month's attribution file, the patient is no longer considered to be a participating patient.



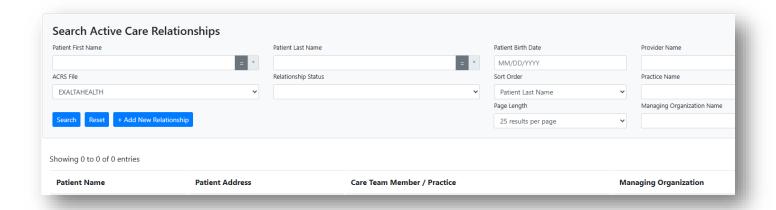
# **Real-Time (RT) and Manage ACRS**

#### Establish Active Care Relationships via Real-Time (RT) ACRS

- Organizations that participate in a MiHIN data exchange solution as a SENDER may have relationships captured based on the information in the messages or documents
- Relationship will only sustain for 90 days past its creation

# **Establish Active Care Relationships via Manage ACRS**

- Manually declare, edit, or remove, active care relationships in realtime
- Relationship will only sustain for 90 days past its creation

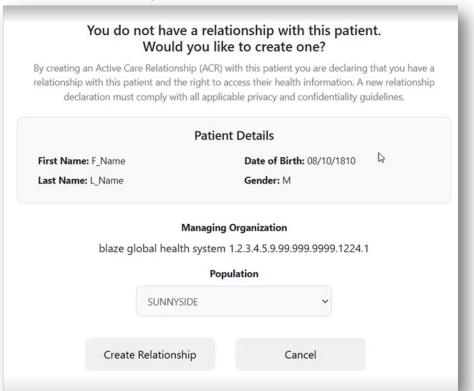




#### **ACRS CareLink allows users to:**

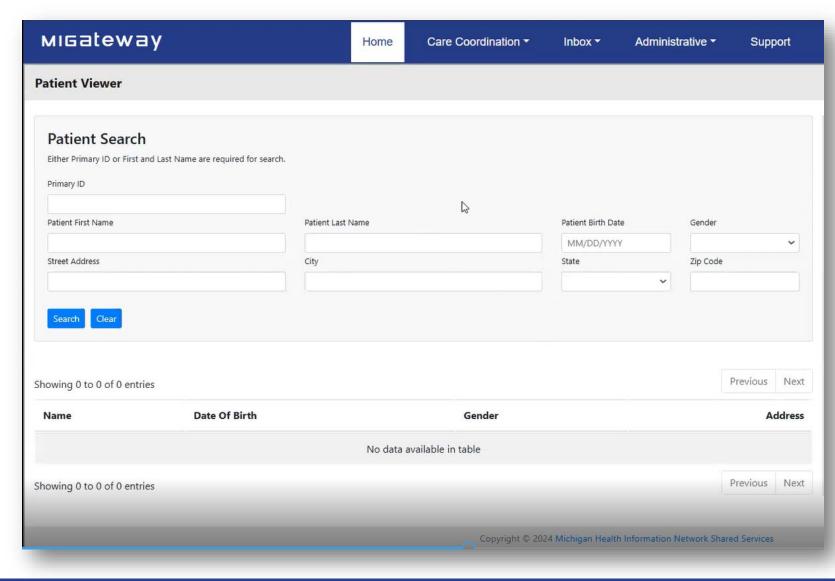
- Search for patients across the whole eMPI versus just their associated ACRS populations
- View PHI related to patients they have an existing active care relationship with
- Seamlessly create a new active care relationship with patients they do not have an existing relationship with

# Relationship will only sustain for 90 days past its creation



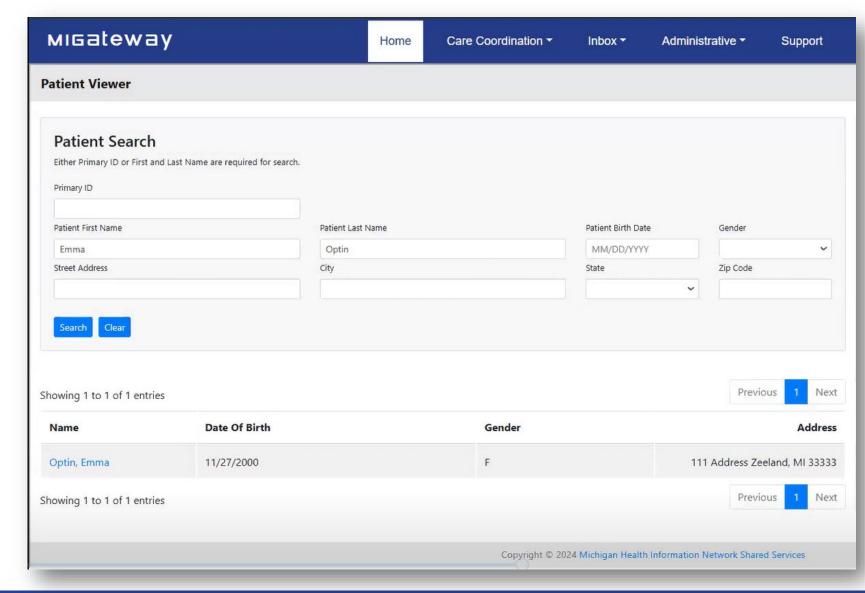
To ensure timely and accurate data reception, participating organizations are encouraged to utilize RT ACRS and/or File-based ACRS in conjunction with ACRS CareLink. These methods leverage real-time routing and matching, optimizing the data exchange process.





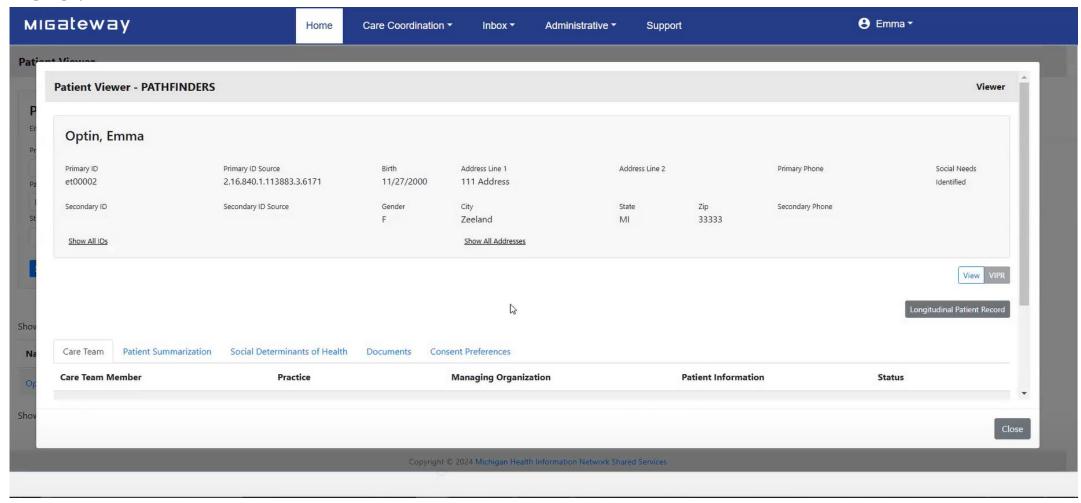
The MIGateway user must enter the patient's first name and last name, or the patient's local ID/MRN within the Patient Search tab.

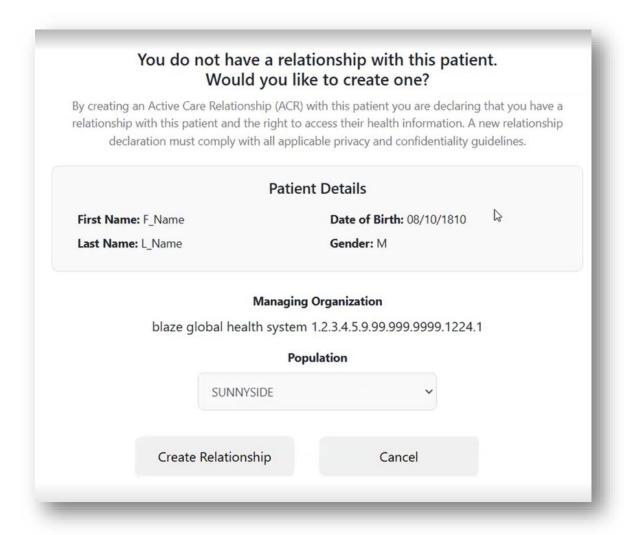
First Name and Last Name is not case sensitive but must be spelled properly.



All patients in the eMPI exactly matching search criteria entered are returned below.

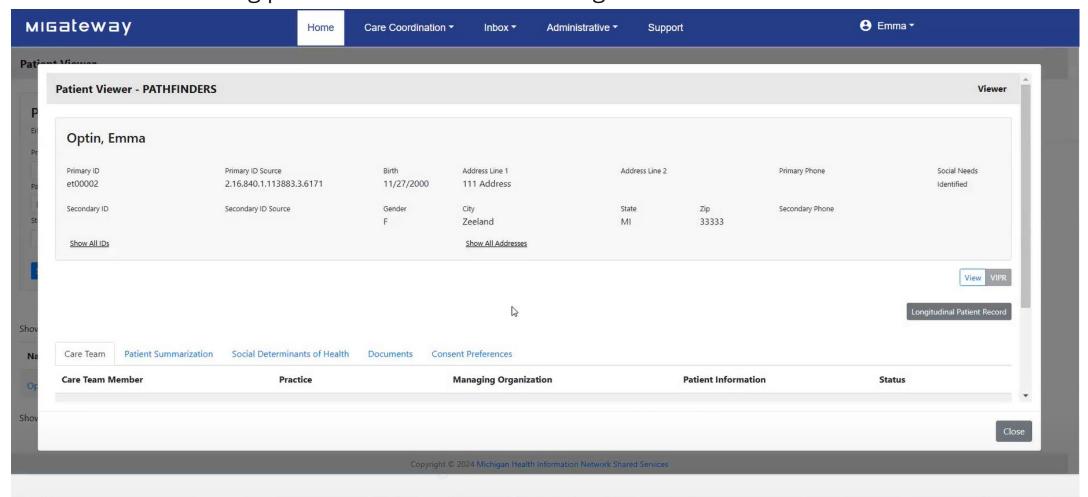
If the MIGateway user is associated with an ACRS population that has an active care relationship with the selected patient, the end user will be allowed to view additional data including data in the Longitudinal Record Viewer.

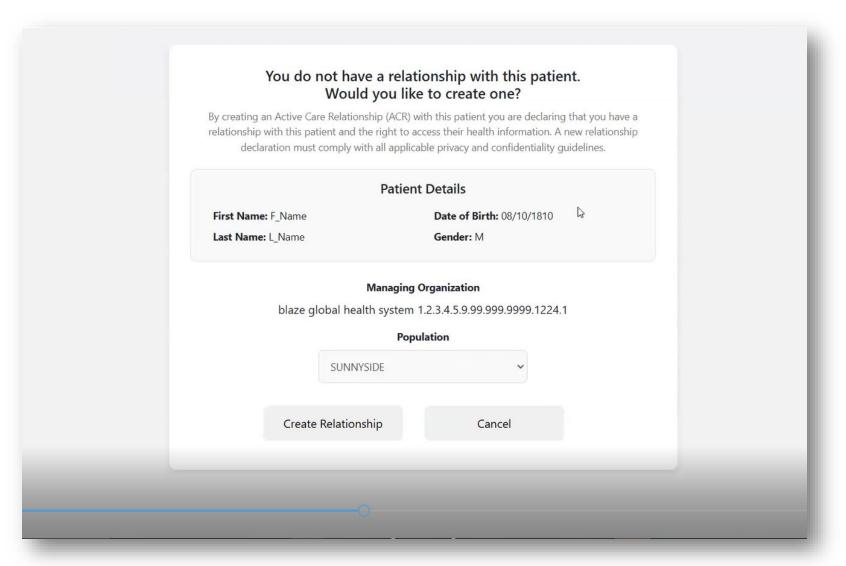




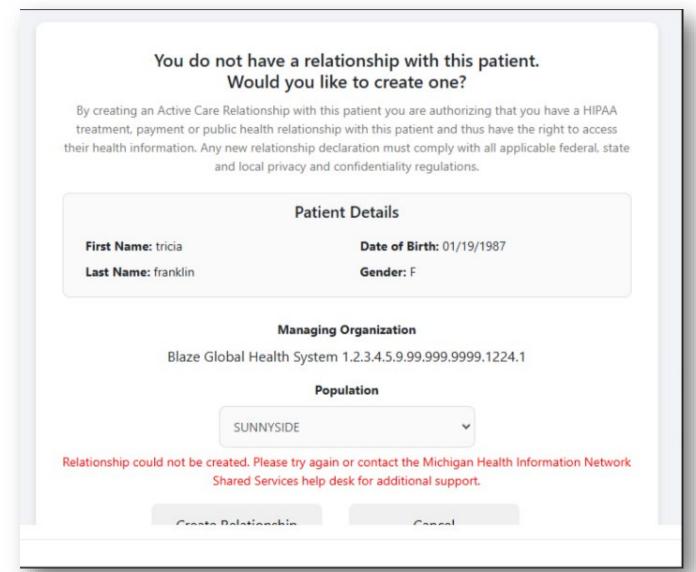
If the MIGateway user is not associated with an ACRS population that contains an active care relationship with the patient, the end user is presented this screen which will allow the end user to declare a relationship with the patient.

Once the active care relationship is created, the MIGateway user can view additional patient information including patient data found in the Longitudinal Record Viewer.





If the user is not associated with an ACRS population that contains an active care relationship with the patient, they are presented this screen which will allow them to declare a relationship with the patient.



If the MIGateway user is not granted permission to create the active care relationship and they click on a patient that does not have an active care relationship in the ACRS population the end user is associated with, the end user will be shown this error message in red when they attempt to click on the patient.



## **ACRS Submission Process**



Attribution & Delivery files are submitted to MiHIN for validation.

2

MiHIN validates the ACRS Attribution & Delivery files and provides feedback if the file(s) failed validation.



MiHIN confirms the delivery preferences for the patient's care team.



MiHIN routes data to the receiving organization via their delivery preferences.



# **ACRS Attribution & Delivery Files**



MiHIN must receive an ACRS Attribution File for all patients **who the** healthcare professional and/or organization is attesting they have an active care relationship with. Patients should be listed in an organization's ACRS file (a patient attributed to a provider) if the provider has seen the patient within the past two years and expects to see them again or a patient is attributed to a practice/provider by a payer.



An ACRS Delivery file must also be submitted to populate delivery preference data which advises MiHIN on **how** to send data to the receiving participant. Any providers, practices, and managing organizations that are included in the ACRS Attribution File should also be represented in the ACRS Delivery file.



The Attribution and Delivery file must be submitted to MiHIN every month for accuracy.

- Valid monthly files are a total refresh from the previous month's submission.
- Participating organization bears the responsibility of removing inactive patients from the ACRS Attribution File, as necessary.

# **ACRS Specification Review**



#### **PO ACRS file Spec**

• Used by Provider Organizations type entities, whereby a patient is related to a provider, a practice, and managing organization.

#### Non - PO ACRS file Spec

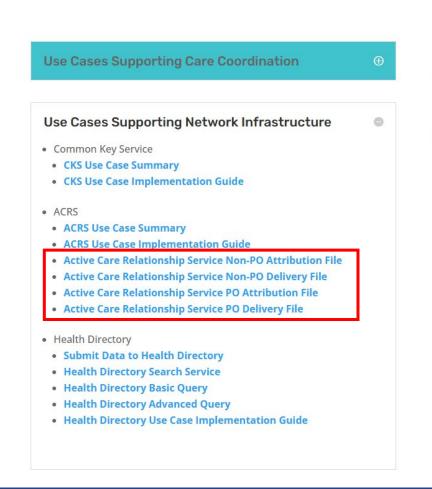
 Used by entities who are not Provider Organizations, whereby a patient may only be attributed to a managing organization. Non-POs could include payers, care management organizations, organ donors, health departments, and others that would not necessarily be able to specify relationships on the patient to provider & practice level.

Your MiHIN Account Manager and/or Customer Success Specialist will help advise as to which file spec your organization shall follow.

# What's included in the Attribution & Delivery Files?



#### **Use Cases**



# **Attribution & Delivery File Format**

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#### **LET'S CONNECT**



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