



Mass HIway 101

***Overview of the statewide health information exchange
for the state of Massachusetts***

June 2017



Today's presenters



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This presentation has been reviewed and approved by the Mass Hlway, and the presenters are acting as authorized representatives of the Mass Hlway.

The information provided in this presentation is for general information purposes only, and in no way modifies or amends the statutes, regulations, and other official statements of policy and procedure that govern access to and use of the Mass Hlway.



Mass Hlway webinars



- Past webinars and presentations are available on the Hlway website www.masshiway.net
- Go to “News and Events” and then select “Events”

The screenshot shows the homepage of the Mass Hlway website. At the top right, there is a link for "Skip to main content". The main header features the "THE HIWAY" logo and the text "Welcome to the Massachusetts Health Information Hlway". Below the header is a navigation menu with items: Home, About, Services, Resources, News and Events, How to Join, Patients and Families, and Contact Us. The "News and Events" menu is open, showing sub-items: Events, In the News, and Newsletters. The "Events" sub-item is highlighted. Below the navigation, the breadcrumb trail reads "Home > News and Events > Events". The main content area is titled "Mass Hlway Events and Education". Under the heading "In person event:", there is a bullet point for a Friday, May 12, 2017, event in Holyoke, MA, with a "Register here" link. Under the heading "Webinars listed below are held from 12:00-1:00 PM, Thursdays:", there are four bullet points for webinars on May 18, June 8, June 22, and June 29, 2017, each with a "Register here" link. At the bottom, there is a section for "On Demand Presentations" with links for "Mass Hlway Regulations Overview (April 2017): PDF \ Video" and "Mass Hlway Guide to the Provider Directory: PDF \ Video".



**This presentation was developed by staff from EOHHS, Mass Hlway,
and the Mass Hlway Account Management Team**

About the MA Hlway Account Management Team:

- Massachusetts eHealth Collaborative (MAeHC) was selected by EOHHS through an open bid process to serve as the Mass Hlway's Account Management team.
- Working in partnership with the Mass Hlway, our team delivers outreach, education, and on site user support services to the provider community and participants, with a goal of increasing adoption and effective utilization of the Mass Hlway across the Commonwealth.
- The Mass Hlway Account Management Team includes:
 - Mark Belanger
 - Murali Athuluri
 - Len Levine
 - Jennifer Monahan
 - Kelly Luchini



- 1. Introduction to the Mass Hlway**
- 2. Hlway Direct Messaging**
- 3. Getting connected to the Mass Hlway**
- 4. Mass Hlway Regulations**
- 5. The Hlway connection requirement**



What is the Mass Hlway?



The Mass Hlway is the statewide, state-sponsored Health Information Exchange (HIE) operated by the Executive Office of Health and Human Services (EOHHS).

- **Mission:** The mission of the Mass Hlway is to enable health information exchange by health care providers and other Mass Hlway Users regardless of affiliation, location or differences in technology.
- **The Mass Hlway has two core functions:**
 - **Function #1 – Hlway Direct Messaging:**
i.e., a secure method of sending a transmission from one Mass Hlway User to another, where the Hlway does not use, analyze or share information in the transmissions
 - **Function #2 – Hlway-Sponsored Services:**
i.e., services such as the forthcoming state-wide Event Notification Service (ENS), where the Hlway may use, analyze, and/or share the minimal amount of information necessary to conduct the service, on behalf of Hlway Participants
- **The Mass Hlway does not currently function as a clinical data repository**
- **The Mass Hlway provides health information exchange across the state:**
 - Over 1,000 Hlway Participants, including organizations across the care continuum (including hospitals from 60+ organizations, ambulatory providers, long-term care facilities)



HIway Participants by Level of Care

(as of June 2017)



Care Continuum

← more than 1,100 Participants →

Hospitals	Ambulatory	Long-Term, Post-Acute & Others
<p>Approximately 80 organizations</p> <ul style="list-style-type: none"> Mix of large networks and medical centers to single-site community hospitals 	<p>More than 850 organizations/providers</p> <ul style="list-style-type: none"> Primary care providers and specialists across a broad range of medical services Health centers and clinics providing medical, emotional, behavioral, and additional social services Urgent care and minute clinics 	<p>Over 170 organizations</p> <p>Range of services and organization types including:</p> <ul style="list-style-type: none"> Area Agency on Aging (AAA) Aging Service Access Point (ASAP) Behavioral Health Skilled Nursing Facilities (SNF) Nursing homes Inpatient Rehabilitation Facilities (IRF) Home health, palliative care, and hospice

Note: 15+ orgs such as Labs, Payers, Imaging Centers, business associates etc.

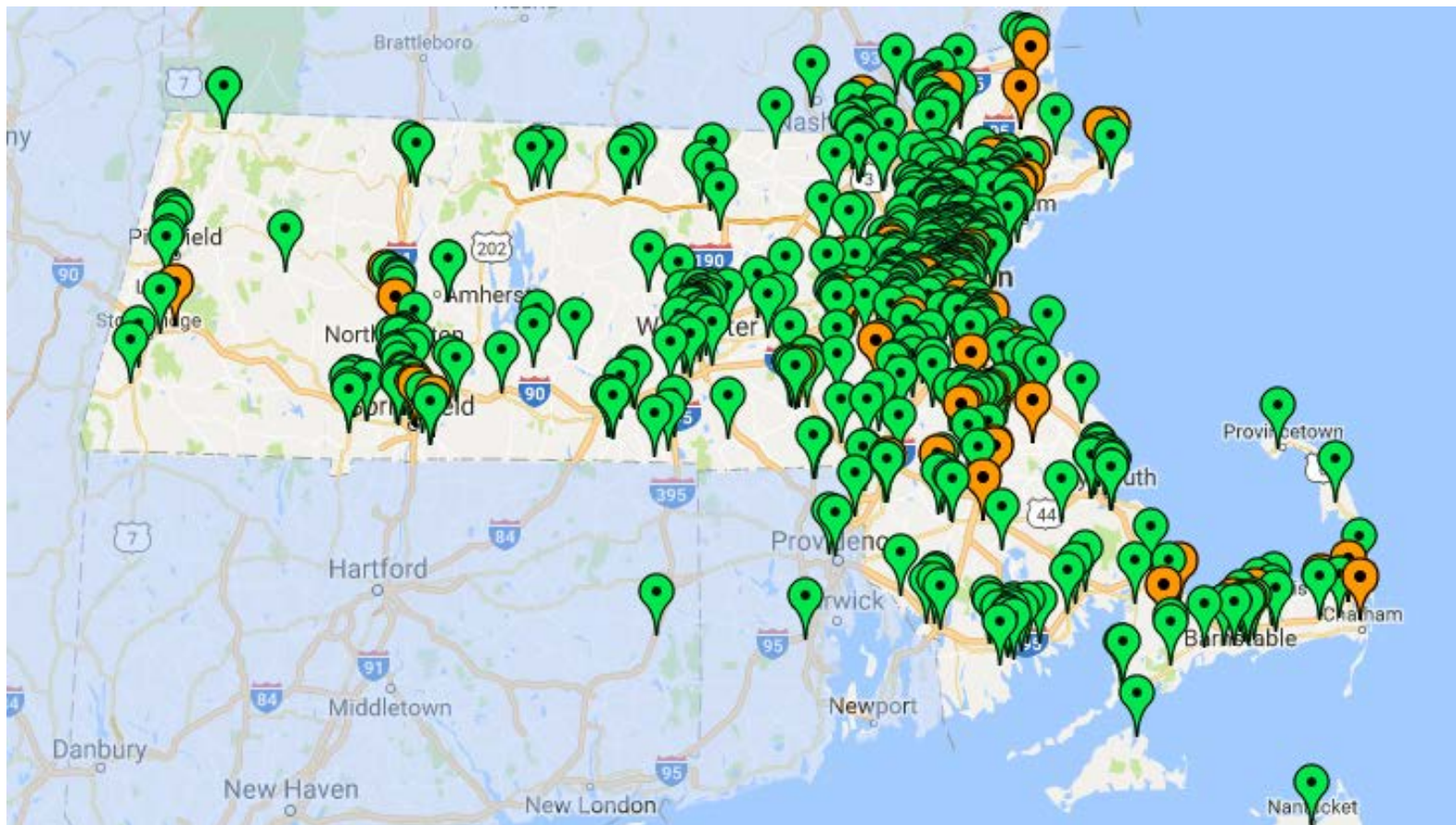


Participant Map



An interactive participant map of all Mass HIway Participants is updated monthly, and is available on the Mass HIway website.

Find the map at the Mass HIway website (www.masshiway.net). Under the [Resources](#) drop-down menu, select [Participant List](#). The map is maintained in partnership with the Massachusetts eHealth Institute (MeHI).





In addition to improving care coordination with other healthcare providers, public health and quality reporting, the Hlway can help your organization:

✓ **Participate in various programs and initiatives:**

- Meaningful Use Stage 2 – Transition of Care and Public Health Reporting measures
- CMS Delivery System Transformation Initiatives (DSTI)
- Community Hospital Acceleration, Revitalization and Transformation Grants (CHART)
- Massachusetts Infrastructure and Capacity Building Grants (ICB)
- Massachusetts Prevention and Wellness Trust Fund
- Patient Centered Medical Home (PCMH)
- Accountable Care Organization (ACO)

✓ **Comply with Massachusetts Law**





- Connecting to the Mass Hlway satisfies the Board of Registration in Medicine (BORIM) EHR proficiency requirement for license renewal (MGL Chapter 224) and requirement for connection to the statewide health information exchange (MGL Chapter 118I)



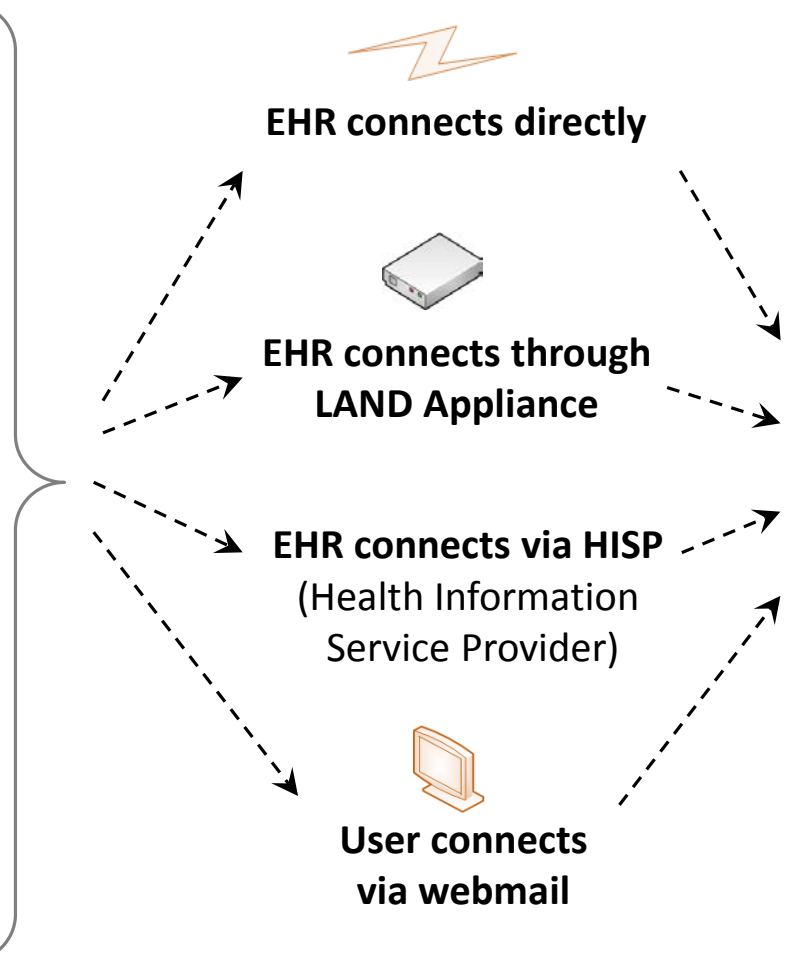
Connectivity Options



User types

-  Physician practice
-  Hospital
-  Long-term care
- Other providers
- Public health
- Health plans
- 

Connectivity options



HIE Services









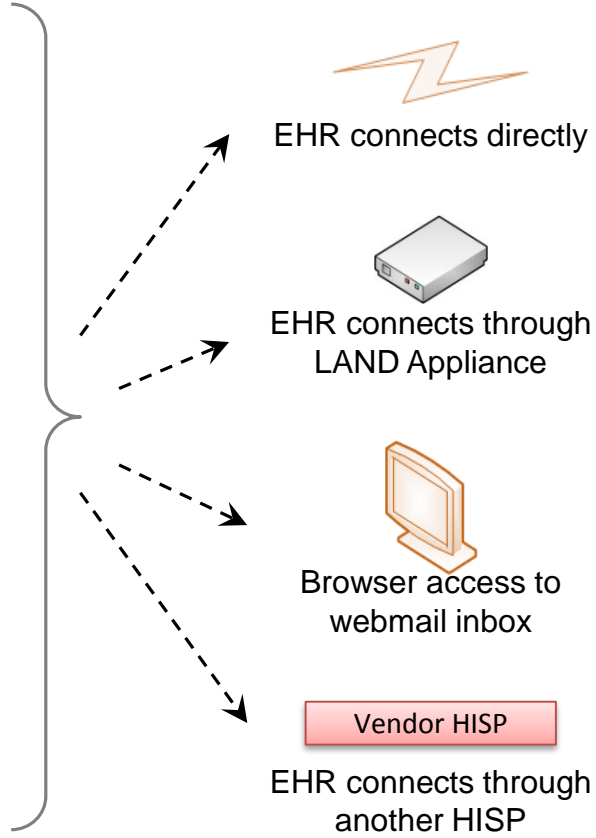
Connectivity Options



User types

-  Physician practices
-  Hospitals
-  Long-term care
Other providers
Public health
Health plans
-  Labs and Imaging Centers

Connectivity options



Deployment optionality

- Direct - (SMTP + S/MIME)
- Direct - SOAP Web Services
- Direct - XDR TLS
- Direct - XDR Double encryption
- LAND - Directory Drop
- LAND - Web Services
- LAND - XDR Web Services
- LAND - FTP Interface
- LAND - HTTP Interface
- Webmail
- Webmail - SEE
- HISP - Bi-lateral trust bundle
- HISP - Direct Trust bundle

Providing multiple connectivity options has supported **broad participation in the Mass Hlway.**

The Mass Hlway currently works with more than 44 EHR vendors, 23 HISPs, and 7 integration engines, through **13 deployment variations.**



In response to customer demand and certification requirements, a growing number of EHR vendors are integrating Direct Exchange standards into their products and providing connections on behalf of its users– also known as a Health Information Service Provider (HISP).

A HISP is an organization that manages security and transport for health information exchange among health care entities or individuals using the Direct standard for transport.

Functions can be performed by existing organizations (such as EHR vendors or HIE organizations) or by standalone organizations specializing in HISP services.

HISPs perform two key functions that support scalability of exchange using the Direct standard.

- ✓ **Establish trust networks** by defining policies for network participation, issuing security certificates tied to a HISP anchor certificate to enforce such policies, and verifying HISP participant identity
- ✓ **Issue direct addresses** tied to the HISP anchor certificate in accordance with conventions defined by the Direct standard



HISP Connections



Mass HIway is interconnected with 23 private HISPs. As a result, a rich network for HIway Direct Messaging is fully available to MA providers





23 HISPs Connected to Mass Hlway

- | | |
|--------------------------------|---------------------------------------|
| 1. Allscripts (MedAllies HISP) | 13. MaxMD |
| 2. Aprima | 14. MatrixCare |
| 3. Athenahealth | 15. McKesson (RelayHealth) |
| 4. CareAccord | 16. Medicity |
| 5. CareConnect (NetSmart HISP) | 17. MyHealthProvider (Mercy Hospital) |
| 6. Cerner | 18. NextGen Share |
| 7. DataMotion | 19. NHHIO |
| 8. eClinicalWorks | 20. SES |
| 9. eClinicalWorks Plus | 21. Surescripts |
| 10. eLINC | 22. UpDox |
| 11. EMR Direct | 23. Wellport (Lumira HISP) |
| 12. Inpriva | |

3 HISPs In Process of Connecting to Mass Hlway

HISP Vendor	Kickoff	Onboarding	Testing	Hlway Prod Readiness	Live/Target Date
PCE Systems					Jun
ASP.md					Jun
Care 360					TBD
IICA-Direct					TBD



Is My Vendor Connected?

(as of Jun 2017)



The Mass Hlway is currently connected to, or in the process of connecting to, the following vendors:

Advanced Data Systems	Eaglesoft Clinician	LMR	Remarkable Health
Allscripts	eClinicalWorks	Lytec MD (McKesson)	SEE
Amazing Charts	eHana	Matrix	Siemens
AMS	EMA Modernizing Medicine	MatrixCare	Sigmacare
Aprima	E-MDs	Mckesson	SMART
ASPMD	Encite	Medflow	Soarian (Cerner)
Athenahealth	Epic	Meditech	Spring Charts
Axxess	Flatiron	MediTouch	STC
BayCIS	GE	Mednet Medical (EMR4MD)	Suncoast Solutions
Cantana Health(NTT Data)	gEHRiMed	Netsmart	Surescripts
Care At Hand	Greenway	Nextech	Unitcare
Care360 (Quest)	HCHB	NextGen	Vista
Carelogic	HealthWyse	Office Practicum	WebOMR
Cerner	HermesIQ	PCE Systems	Zoll
ComChart	HomeCare	Physician's Computer Company	
Compulink	Homecare Homebase	Point Click Care	
CPSI	Homegrown	Point N Click	
Credible	icanotes	Practice Fusion	
Delta (Encore product)	ImageTrends	Practice Partners	
Dentrix	Impreva	Practice Perfect	
Documat	Kantime	Prospect	



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What can you send?



The HIway is 'content agnostic,' and does not restrict message types

Patient clinical information:

- Summary of Care / Transition of Care Record (TOC)
- Request for Patient Care Summaries
- Discharge Summaries
- Referral Summary Information
- Specialist Consult Notes
- Progress Notes

Patient clinical alerts:

- Emergency Department Notification
- Mortality Notification
- Transfer Notification
- Disposition Notification (admit/discharge)

Quality reporting:

- Information for calculation and reporting of clinical quality measures

Public Health Reporting:

- Securely comply with reporting regulations for the Mass. Department of Public Health
- Massachusetts Immunization Information System (MIIS)
- Electronic Lab Reporting (ELR)
- Syndromic Surveillance (SS)
- Massachusetts Cancer Registry (MCR)
- Opioid Treatment Program (OTP)
- Childhood Lead Poisoning Prevention Program (CLPPP)
- Occupational Lead Poisoning Registry (Adult Lead)
- E-Referral

Note: *What makes DPH submissions different:* There is no cost for a HIway connection that is used exclusively for DPH reporting.



Use Cases for Hlway Direct Messaging



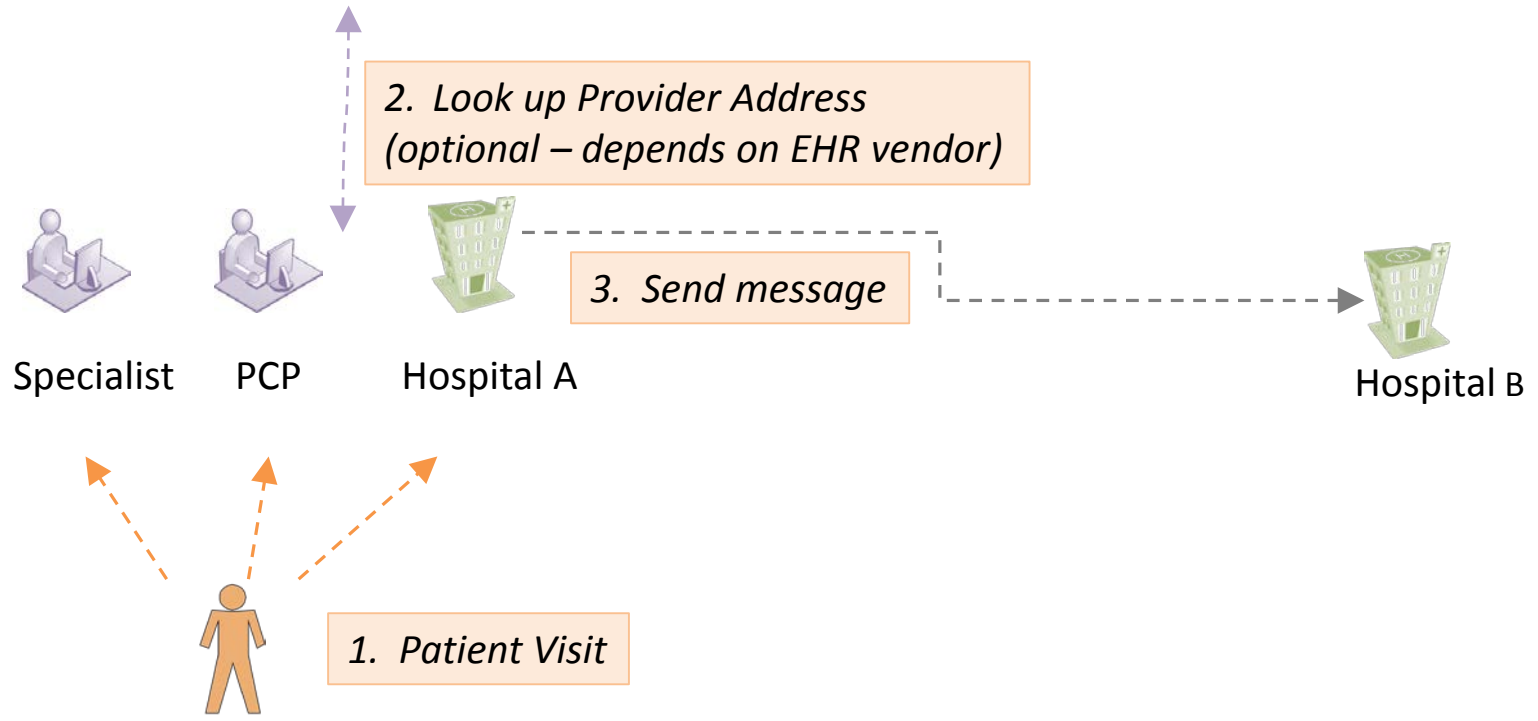
Use Case Categories	Example Use Cases
Provider-to-Provider Communications	<ul style="list-style-type: none"> • Hospital sends a discharge summary to a Skilled Nursing Facility (SNF) or Long Term/Post Acute Care (LTPAC) facility • Primary Care Provider (PCP) sends a referral notice to a specialist • Specialist sends consult notes & updated medications list to patient’s PCP • Hospital ED requests a patient’s medical record from a PCP • PCP sends a CCD or C-CDA with Problems, Allergies, Medications, and Immunizations (PAMI) to a Hospital caring for their patient
Payer Case Management	<ul style="list-style-type: none"> • ACO sends quality metrics to a payer • Provider sends lab results to a payer • Provider sends claims data to payer
Quality Reporting	<ul style="list-style-type: none"> • Provider sends clinical data to Business Associate for quality metrics analysis • Provider sends quality metrics to Business Associate for report preparation
Public Health Reporting	<ul style="list-style-type: none"> • Provider sends to DPH: <ul style="list-style-type: none"> ○ Massachusetts Immunization Information System (MIIS) ○ Syndromic Surveillance (SS) ○ Opioid Treatment Program (OTP) ○ Childhood Lead Paint Poison Prevention Program (CLPPP) • Provider sends to other agencies: <ul style="list-style-type: none"> ○ Occupational Lead Poisoning Registry (Adult Lead) ○ Children’s Behavioral Health Initiative (CBHI)



Data holder sends patient information to recipient

Provider Directory

<u>Provider name</u>	<u>Local name</u>	<u>Institution</u>	<u>Direct address</u>
Smith, Marilyn M	Smith, Marilyn	Hospital	Marilyn.Smith@direct.HospitalB.masshiway.net
Smith, Marilyn M	Smith, Mary	HPC Primary Care	Marilyn.Smith@direct.HPC.masshiway.net





Transitions of Care (Referrals)



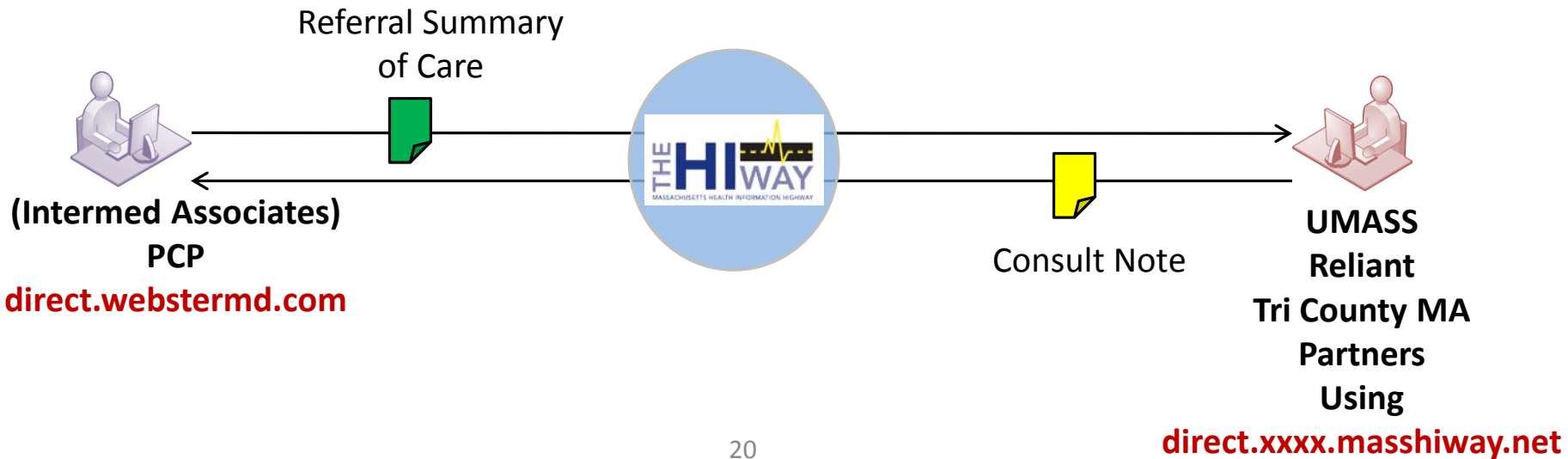
TOC from 'Intermed Associates' to Specialists on Mass Hlway

Patient Scenario:

1. Patient sees PCP @ Intermed
2. PCP refers patient to a Cardiac specialist
3. Patient sees specialist
4. Patient sees PCP for follow up care

Information Flows:

- A. PCP sends Specialist a summary of care document via the Mass Hlway
- B. Specialist sends PCP a consult note via the Mass Hlway





Heywood Hospital Sending Lab Results to Gardner VNA

- Workflow:**
1. After a Gardner VNA provider, or the patient's primary care physician, orders lab work the patient takes the lab order to Heywood Hospital.
 2. Heywood Hospital receives the order
 3. Information for Gardner VNA patients is entered with a specific location code so that results for Gardner VNA patients can be filtered.
 4. Once the patient's lab work is completed, the results are passed to Heywood's Iatric interface engine, which does the filtering, and sends the appropriate results from Heywood Hospital over the Mass HIway to Gardner VNA .
 5. The lab result is then accepted into Gardner VNA's McKesson Home Health system where the result is attached to the patient record for review and follow-up.





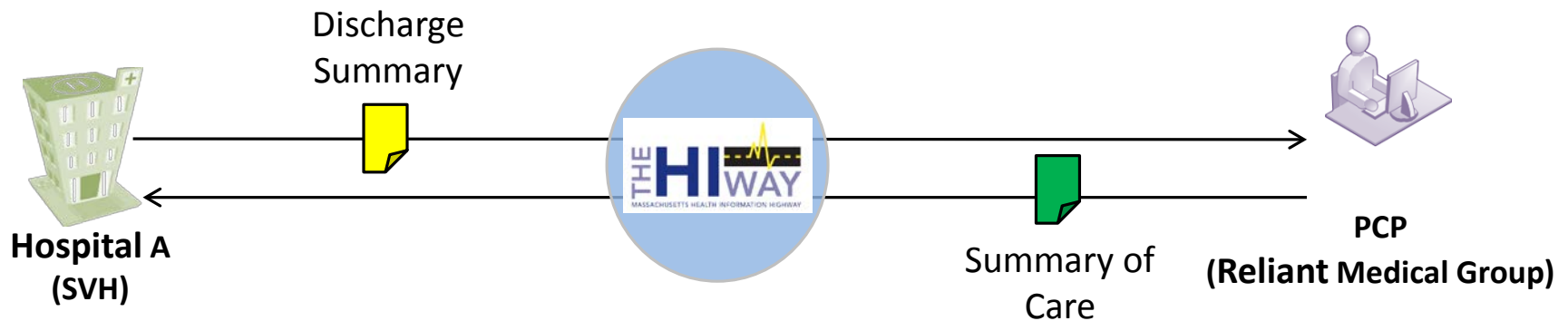
SVH Sends Patient Discharge CCDA to PCP @ Reliant Medical Group

Patient Scenario:

1. Patient discharged from Emergency Department of SVH or Milford Regional
2. Discharge CCDA is sent via Mass Hlway
3. Patient sees PCP for follow up care, PCP has access to Meds prescribed during discharge

Information Flows:

- A. SVH informs Reliant that patient is in ED via point to point interface
- B. PCP sends critical information to Hospital ED via the Mass Hlway
- C. Hospital sends PCP discharge summary via the Mass Hlway





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- Mass HIway Users have the option of implementing a local opt-in and/or opt-out process that applies to their organization's use of HIway Direct Messaging, but are not required to do so.
- Mass HIway Users are no longer required to distribute the 1-page [Mass HIway Fact Sheet for Patients](#), but if they choose to do so, they must use the updated version of this fact sheet that was released in March 2017.



For patients:

- Key information for patients about the Hlway is provided in the updated *Hlway Fact Sheet for Patients*.
- The Mass Hlway does not currently function as a clinical data repository that holds electronic medical records for individuals. Patient's electronic health record(s) are held by specific provider organizations and not the Mass Hlway.

The Mass Hlway: Fact Sheet for Patients



The Mass Hlway is a secure statewide Health Information Exchange that allows your healthcare providers to safely and quickly send your health information to where it is most needed. Doctors or nurses can care for you better when they have important information about your health. The Mass Hlway is designed to make this safer and faster. The goal is better care coordination and quality for you and your family.

What is the Mass Hlway?

- Mass Hlway is the statewide health information exchange (HIE). Healthcare providers can use the Mass Hlway to quickly and securely send and receive your health information to better coordinate your care.
- The Mass Hlway is managed by the Commonwealth of Massachusetts' Executive Office of Health and Human Services (EOHHS).

How does the Mass Hlway protect my information?

The Mass Hlway has security measures in place to protect your information that aren't true of current methods, like fax, mail, or portable media like a CD or USB (flash drive), such as:

- Using a special code so that only authorized providers can read the information sent over the Mass Hlway (this is known as encrypting data).
- Establishing policies and procedures that authorize the Mass Hlway to suspend Hlway participants as necessary to prevent unauthorized use of the Mass Hlway.
- Overseeing who has access to the Mass Hlway and who has used it for a patient's healthcare.

How can the Mass Hlway help me?

- If you were discharged from a hospital, the Mass Hlway can be used by the hospital to send your doctor a note about your hospital stay so that he or she is up to date about healthcare that you have received.
- If you get tests done, the doctor can use the Mass Hlway to send the results to other members of your healthcare team, like your specialist. This helps them coordinate your care. It can also save time and money by reducing the need for repeat tests.
- If you have a chronic condition your health insurer case manager can use the Mass Hlway to communicate with your doctors to coordinate your care and help you stay healthy.
- Not all of your healthcare providers may be using the Mass Hlway yet. There may be more benefits to you as more healthcare organizations use the Mass Hlway.

Who can use the Mass Hlway and why?

- Currently the Mass Hlway may only be used by healthcare organizations (like doctors' offices, hospitals, public health agencies, and health insurers).
- The Mass Hlway can only be used for information sharing as allowed by federal and state privacy laws. You still need to give special permission for providers to request and receive certain sensitive information. You can speak to your healthcare provider about what information is sent over the Mass Hlway.

Can I request my medical record from the Mass Hlway?

- No. A patient's medical record itself is not part of the Mass Hlway system. Talk to your provider for information about how to obtain your medical records.

Want more information?

- Talk with your doctor or their office staff about how they are using the Mass Hlway.
- Visit www.masshiway.net, email us at masshiway@state.ma.us, or call us at 1-855-MA-Hlway (624-4929) and press 3.



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If your organization is interested in connecting to the Mass Hlway contact any member of the Mass Hlway Account Management Team:

- ✓ Enrollment
- ✓ Onboarding
- ✓ Addressing
- ✓ Connection steps
- ✓ Use case identification
- ✓ Exchanging with your trading partners



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Jennifer Monahan
JMonahan@maehc.org



The Mass HIway Provider Directory is a searchable directory of individual and organizational healthcare providers.

What PD is for:

- Provides destination addresses for Direct messaging (i.e. Direct email address)
- Stores the specific details such as organization name, provider first name, last name, specialty, contact information, NPI and personal/organizational email address along with the Direct email address

The Provider Directory contains over 20,000+ addresses (department and individual level addresses included)

Your Account Manager will assist you in operationalizing the Provider Directory, identifying who of your trading partners are in the Mass HIway Community today and how to engage additional trading partners to exchange on the HIway.



Direct Email Address Examples



Individual Address:

Endpoint Domain

Murali.Athuluri@direct.outreachdemo.masshiway.net

Organization Address:

QDC@direct.maehc.masshiway.net / testing1@direct.eohhs.masshiway.net

Departmental Direct email address:

IT@direct.eohhs.masshiway.net or eohhs.it@direct.eohhs.masshiway.net

Third-Party HISP Direct email addresses:

john.smith@practicename.eclinicaldirect.com

john.smith.x@xxx.direct.athenahealth.com

johnsmith@xxxx.allscriptsdirect.net

John.smith@XXXX.circlehealthdirect.org



Ways to Access Addresses:

- **Manual Entry**
 - If your EHR allows it, you may directly enter a known address manually
- **Mass Hlway Webservice**
 - Participants looking to integrate the Mass Hlway PD into internal workflows via their EHR system can use the Mass Hlway PD Webservice to search and retrieve provider/organization/department direct address
 - The Mass Hlway PD Webservice is also available for LAND connection
- **Within Webmail**
 - Mass Hlway Secure Webmail has a provider lookup function
- **By using manual PD Extract (CSV/Excel) file**
 - If your EHR has directories, they may be integrated with Mass Hlway PD (vendor dependent)
 - The Mass Hlway distributes the Mass Hlway PD to qualified Hlway Participants and vendors upon request. These Hlway Participants and vendors are issued a monthly notification and password, which are then used to download the PD extract from the Mass Hlway website at <http://masshiway.net/HPP/Services/ProviderDirectory/index.htm>

Get on the Provider Directory distribution list by emailing us at masshiway@state.ma.us



Timeline for Hlway Enrollment



Discovery	Implementation	Testing	Go Live
Week 1 – 2	Week 3 – 5	Week 6 – 8	Week 9
Connection Type Forms/Certs	Installation Work	Loop back test Transaction testing	Migrate to production

- **Connection to the Mass Hlway is dependent on capabilities of your EHR vendor and your organization’s technical architecture. Your Account Manager will walk you through the connectivity options to find the best solution for you:**
 - Direct XDR connection to EHR
 - Local Access Network Distribution (LAND) appliance
 - Webmail
- **Your account manager will also help you set up your addresses for the Provider Directory**
- **The implementation team will configure and test the solution and bring your organization live**

Note: Above timelines are indicative of a typical effort time spent by the Mass Hlway team from the time all of the completed requirements are obtained from the participant and vary by connection type/EHR vendor.



Using the Mass HIway is as easy as 1-2-3!

1. **Ask your vendor** if they are connected to, or able to connect to the HIway.
2. **Contact us.** We will connect you with a Mass HIway Account Manager to get your organizations enrolled and connected.
3. **Exchange** with your trading partners!

The Massachusetts Health Information Highway (Mass HIway)

Phone: 1.855.MA-HIWAY (1.855.624.4929)

Email for General Inquires: MassHIway@state.ma.us

Email for Technical Support: MassHIwaySupport@state.ma.us

Website: www.MassHIway.net



Visit www.masshiway.net for additional information, resources including on-demand webinars, and to sign up for our newsletter!





To receive the updates related to the Mass Hlway, sign up to receive the Mass Hlway Newsletter on the Mass Hlway's web page at: www.MassHlway.net

Skip to main content

THE HIWAY Welcome to the Massachusetts Health Information Hlway

Home About Services Resources News and Events How to Join Patients and Families Contact Us

The Mass Hlway

In October 2012, Massachusetts launched the statewide electronic health information exchange, The Massachusetts Health Information Highway (The Mass Hlway). The Mass Hlway offers doctors' offices, hospitals, laboratories, pharmacies, skilled nursing facilities, and other healthcare organizations a way to securely and seamlessly transmit vital data electronically.

This meaningful exchange of information can enable the Commonwealth's care community to:

[Sign up for our newsletter](#)

What's New

Click [here](#) for the interactive Mass Hlway Participant List Map.

Tweets - #MassHlway



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The main purpose of the Mass Hlway Regulations is to:

- Establish requirements for organizations that use the Mass Hlway
- Implement the state statutory requirement for providers to connect to the Mass Hlway (which is referred to in this presentation as the *Hlway connection requirement*)
- Establish the mechanism to allow patients to opt-in and opt-out of the Mass Hlway
- **The regulations require that information be transmitted via Hlway Direct Messaging in compliance with applicable federal and state privacy laws and implementing regulations, and thereby aligns the use of Hlway Direct Messaging with other modes of transmission (e.g., sending information by fax or phone).**
- **The Mass Hlway Regulations went into effect on February 10, 2017.**
- **In March 2017, EOHHS and the Mass Hlway released supporting documents related to the Mass Hlway Regulations:**
 - [Mass Hlway Regulations Summary](#)
 - [Mass Hlway Regulations FAQs](#)
 - [Mass Hlway Policies & Procedures \(version 3\)](#)
 - [Mass Hlway Fact Sheet for Patients](#)
- **In April 2017, the Hlway hosted a *Mass Hlway Regulations Overview* (via webinar)**



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How can the Mass Hlway help me?

- If you were discharged from a hospital, the Mass Hlway can be used by the hospital to send your doctor a note about your hospital stay so that he or she is up to date about healthcare that you have received.
- If you get tests done, the doctor can use the Mass Hlway to send the results to other members of your healthcare team, like your specialist. This helps them coordinate your care. It can also save time and money by reducing the need for repeat tests.
- If you have a chronic condition your health insurer case manager can use the Mass Hlway to communicate with your doctors to coordinate your care and help you stay healthy.
- Not all of your healthcare providers may be using the Mass Hlway yet. There may be more benefits to you as more healthcare organizations use the Mass Hlway.

Who can use the Mass Hlway and why?

- Currently the Mass Hlway may only be used by healthcare organizations (like doctors' offices, hospitals, public health agencies, and health insurers).
- The Mass Hlway can only be used for information sharing as allowed by federal and state privacy laws. You still need to give special permission for providers to request and receive certain sensitive information. You can speak to your healthcare provider about what information is sent over the Mass Hlway.

Can I request my medical record from the Mass Hlway?

- No. A patient's medical record itself is not part of the Mass Hlway system. Talk to your provider for information about how to obtain your medical records.

Want more information?

- Talk with your doctor or their office staff about how they are using the Mass Hlway.
- Visit www.masshiway.net, email us at masshiway@state.ma.us, or call us at 1-855-MA-Hlway (624-4929) and press 3.



The regulations answer the “**who, when and how**” regarding the Hlway connection requirement.

Who must connect:

- At this time, only those **Provider Organizations** that are specified in the regulations, as opposed to individual licensed professionals, are required to connect to the Mass Hlway.
- The regulations implement a **phased-in approach whereby three groups of Provider Organizations have Hlway connection dates specified in the regulations**, and other types of Provider Organizations will be required to connect at later dates that are not yet specified.
 - The following three groups of Provider Organizations have required Hlway connection dates that are specified in the regulations: (1) Acute Care Hospitals; (2) Large & Medium Medical Ambulatory Practices; and (3) Community Health Centers
 - Other types of Provider Organizations (e.g., behavioral health entities, dental clinics, and nursing homes) will be required to connect at a date that will be specified in the future. Future guidance will provide at least one year notice for affected provider organizations to connect to the Mass Hlway.



When must Provider Organizations connect:

- The regulations implement a **phased-in approach** where the initial “Year 1” HIway connection requirement occurs between 2017 and 2019 for the three types of Provider Organizations that have connection dates specified in the regulations.
- The **three types of Provider Organizations** have the following initial HIway connection dates:
 - *Acute Care Hospitals*: February 10, 2017
 - *Large & Medium Medical Ambulatory Practices*: January 1, 2018
 - *Large Community Health Centers*: January 1, 2018
 - *Small Community Health Centers*: January 1, 2019

Note: Definitions of these Provider Organizations are in section 20.06 of the regulations where Medical Ambulatory Practices and Community Health Centers are defined as small if they have fewer than 10 licensed providers (i.e., medical doctors, doctors of osteopathy, nurse practitioners or physician assistants).



How Provider Organizations connect:

The regulations implement a **four-year phased-in approach** regarding how Provider Organizations fulfill the HIway connection requirement:

- Year 1: Send or receive HIway Direct Messages for **at least one use case**. The use case may be within **any category** of use cases.
- Year 2: Send or receive HIway Direct Messages for **at least one use case that is within the Provider-to-Provider Communications category** of use cases.
- Year 3: **Send** HIway Direct Messages for at least one use case, **and also receive** HIway Direct Messages for at least one use case. Both of these uses cases should be within the Provider-to-Provider communications category of use cases.
- Year 4: The provider organization may be **subject to penalties**, if that organization has not met the requirements established in this section.
 - The penalty schedule and amounts are described in section 20.14 of the regulations.
 - Under the four-year phased-in approach implemented by the regulations, penalties do not take effect until Year 4 of the connection requirement (i.e., in January 2020, at the earliest).

Acute Care Hospitals: In addition to using HIway Direct Messaging, Acute Care Hospitals are also required to send Admission Discharge Transfer notifications (ADTs) to the Mass HIway within 12 months of the ENS' launch as a part of the HIway connection requirement.



The regulations and the Mass Hlway Policies & Procedures describe the following requirements related to EHR systems:

- Provider Organizations with specified dates for connecting to the Mass Hlway will be required to attest to: (a) whether or not they have an EHR, and (b) how their EHR, if any, connects to the Mass Hlway.
- Provider Organizations that have Hlway connection dates specified in the regulations will fulfill the M.G.L. Chapter 118I requirement that providers establish interoperable EHR systems that connect to the Mass Hlway by **implementing Hlway Direct Messaging**.
- Provider Organizations may implement Hlway Direct Messaging by one of several methods, including:
 - an EHR's Direct XDR connection
 - a Local Access for Network Distribution (LAND) appliance connection
 - a Webmail connection, which does not require an EHR



The regulations describe that an **opt-in opt-out mechanism for HIway-Sponsored Services** will be implemented and operated by the Mass HIway once these services are launched by the Mass HIway.

- Opt-in by written notice: The opt-in mechanism will be fulfilled by HIway Participants informing patients through written notice how the HIway Participant intends to use HIway-Sponsored Services, and how the patient can opt-out of HIway-Sponsored Services.
- Centralized opt-out: The Mass HIway or its designee will administer a centralized opt-out system for HIway-Sponsored Services that will implement a mechanism for individuals to choose not to participate in HIway-Sponsored Services.
- Supplemental local processes: HIway Participants can elect to implement additional local opt-in and/or opt-out processes that apply to their organization's use of HIway-Sponsored Services; these additional processes must supplement and not replace the HIway's opt-in opt-out mechanism.



The Mass Hlway Regulations



The regulations and supporting documents are available on the Mass Hlway website

Mass Hlway Regulations Summary



In February 2017 the Massachusetts Executive Office of Health & Human Services (EOHHS) promulgated state regulations *101 CMR 20.00: Health Information Exchange*, also referred to as the Mass Hlway Regulations. The Mass Hlway is the state-sponsored, statewide health information exchange for the Commonwealth of Massachusetts.

The full regulations, *Mass Hlway Regulations Frequently Asked Questions (FAQs)*, and the *Mass Hlway Policies & Procedures*, are available on the [Mass Hlway's website](#). In this summary document, terms that are defined in Section 20.04 of the regulations, such as Hlway Direct Messaging, are capitalized. In addition, references to specific sections of the regulations are provided in blue font.

Purpose of the Mass Hlway Regulations:

The main purpose of the Mass Hlway Regulations is to establish requirements for organizations that use the Mass Hlway, and to implement key requirements of M.G.L. Chapter 118I, which include: (1) the requirement for providers in Massachusetts to implement a fully interoperable electronic health record (EHR) system that connects to the Mass Hlway; and (2) the establishment of a mechanism to allow patients to opt-in and opt-out of the Mass Hlway.

The Mass Hlway: mission and core functions

The mission of the Mass Hlway is to enable health information exchange by health care providers and other Mass Hlway Users regardless of affiliation, location, or differences in technology. The Mass Hlway has two main functions to help achieve its mission:

- **Function #1 – Hlway Direct Messaging:** The Mass Hlway offers a secure method for transmitting a message containing patient health information, where the Mass Hlway does not analyze, use, or share the contents of the message except as required to deliver it and to make it available for use by the intended recipient.
- **Function #2 – Hlway-Sponsored Services:** The Mass Hlway plans to offer services to aid Hlway Participants in health care coordination including the anticipated statewide Event Notification Service (ENS), which will enable notifications to be sent to a patient's healthcare providers, as appropriate, when that patient is admitted to any participating hospital in the state.

The Mass Hlway connection requirement: Who must connect to the Mass Hlway, and when

- At this time, only those Provider Organizations that are specified in the regulations, as opposed to individual licensed professionals, are required to connect to the Mass Hlway. (101 CMR 20.08)
- The regulations implement a phased-in approach, with the following three groups of Provider Organizations having an initial "Year 1" requirement to connect to the Mass Hlway by the following dates: (1) Acute Care Hospitals by February 10, 2017; (2) Large & Medium Medical Ambulatory Practices by January 1, 2018; (3) Large Community Health Centers by January 1, 2018, and Small Community Health Centers by January 1, 2019. (101 CMR 20.08 and 20.09)
- EOHHS anticipates that other types of Provider Organizations (e.g., behavioral health entities, dental clinics, and nursing homes) will be required to connect at a date that will be specified in the future. Future guidance will provide at least one year notice for affected provider organizations to connect to the Mass Hlway. (101 CMR 20.08(1b))

How Provider Organizations fulfill the Hlway connection requirement

- **Hlway Direct Messaging:** Provider Organizations with connection dates specified in the regulations can meet the Hlway connection requirement by sending and receiving Hlway Direct Messages, following a phased-in approach over 4 years (101 CMR 20.08(3)). The methods by which organizations may implement Direct Messaging are in the last bullet point on this page.

Mass Hlway Regulations FAQs

Version 1. February 2017



In February 2017 the Massachusetts Executive Office of Health & Human Services (EOHHS) promulgated the state regulation *101 CMR 20.00: Health Information Exchange*, which is also known as the *Mass Hlway Regulations*. These regulations implement key components of Massachusetts General Law (M.G.L.) Chapter 118I, pertaining to the Mass Hlway, which is the state-sponsored, statewide health information exchange (HIE) for the Commonwealth of Massachusetts.

This document provides Frequently Asked Questions (FAQs) and answers that can help stakeholders understand how the regulations apply to them. Terms that are defined in Section 20.04 of the regulations, such as Hlway Direct Messaging, are capitalized in this FAQ document.

The full regulations, this FAQ document, a 2-page *Mass Hlway Regulations Summary*, and the *Mass Hlway Policies & Procedures* are available on the [Mass Hlway website](#).

Frequently Asked Questions (FAQs):

1. Background about the Mass Hlway Regulations and M.G.L. Chapter 118I:

a) Q: How were the Mass Hlway Regulations developed?

A: The regulations were developed through an open, transparent process, during which EOHHS gathered feedback from the state's Health Information Technology (HIT) Council, the Council's advisory groups, and other stakeholders from across the state. The process included a public comment period and public hearing held in the fall of 2016.

2. The Hlway connection requirement: Who and when

a) Q: Who do the Mass Hlway Regulations apply to?

A: The regulations apply to all Mass Hlway Users (which are defined in 101 CMR 20.04). Under the regulations, (101 CMR 20.05) certain Provider Organizations are required to meet the Hlway connection requirement, while other categories of eligible Mass Hlway Users (e.g., Provider Organizations that do not have specified Hlway connection dates in the regulations, local departments of public health, or health insurance plans) are eligible but not currently required to connect to the Mass Hlway.

b) Q: Are individual providers, such as a physician, nurse practitioner, pharmacist, or laboratory technician, required to connect to the Mass Hlway?

A: No, not at this time. Under the regulations (101 CMR 20.08) specified Provider Organizations are required to connect to the Mass Hlway, rather than individual health care providers who hold a professional license in the state.

c) Q: Why do the Mass Hlway Regulations set required Hlway connection dates for certain Provider Organizations, and not others?

A: The regulations set Hlway connection dates for three groups of Provider Organizations (i.e., Acute Care Hospitals, Large and Medium Medical Ambulatory Practices, and Community Health Centers) and not for other types of Provider Organizations (e.g., nursing homes, dental clinics, behavioral health entities, Small Medical Ambulatory Practices, solo practices). The regulations implement this approach because these three Provider Organizations are more likely to have adopted health information technology earlier than other provider organizations, as they may have had access to federal funding to adopt EHR systems, and have more resources than other organizations to implement regulatory requirements. (continued on page 2)



- 1. Introduction to the Mass Hlway**
- 2. Hlway Direct Messaging**
- 3. Getting connected to the Mass Hlway**
- 4. Mass Hlway Regulations**
- 5. The Hlway connection requirement**



The Hiway connection requirement is implemented using a phased-in approach.

The phased-in approach has four aspects:

- 1. Three types of Provider Organizations (i.e., Acute Care Hospitals, Large & Medium Medical Ambulatory Practices, Community Health Centers) have connection dates that are specified in the regulations.**

EOHHS anticipates that Provider Organizations which are not specified in the regulations will be required to connect at a future date, with future guidance providing at least one year notice for affected organizations to connect.

- 2. The three types of Provider Organizations have an initial “Year 1” connection requirement between 2017 and 2019.**
- 3. How Provider Organizations fulfill the Hiway connection requirement is phased-in over four years, with penalties for not meeting the requirement beginning in Year 4.**
(See the next slide for additional details)
- 4. The statutory requirement that providers implement “interoperable EHR systems” that connect to the Mass Hiway is fulfilled by implementing Hiway Direct Messaging.**



The Hlway connection requirement follows a four-year phased-in approach that progressively encourages use of the Mass Hlway for Provider-to-Provider communications and bi-directional exchange of health information.

How Provider Organizations connect:

- Year 1: Send or receive Hlway Direct Messages for **at least one use case**.
The use case may be within **any category** of use cases.
- Year 2: Send or receive Hlway Direct Messages for **at least one use case that is within the Provider-to-Provider Communications category** of use cases.
- Year 3: **Send** Hlway Direct Messages for at least one use case, **and also receive** Hlway Direct Messages for at least one use case. Both of these uses cases should be within the **Provider-to-Provider Communications category** of use cases.
- Year 4: The provider organization may be **subject to penalties**, if that organization has not met the requirements established in this section. Penalties do not take effect until Year 4 of the connection requirement (i.e., in January 2020, at the earliest).

Acute Care Hospitals: In addition to using Hlway Direct Messaging, Acute Care Hospitals are also required to send Admission Discharge Transfer notifications (ADTs) to the Mass Hlway within 12 months of the ENS' launch as a part of the Hlway connection requirement.



Year 1 Attestation Form



The Year 1 Attestation Form is available here:

http://www.masshiway.net/HPP/cs/groups/hpp/documents/document/b3jt/x3ll/~edisp/attestation_form_year1.pdf

Attestation Form Year 1 Mass HIway Connection Requirement



Purpose: This attestation form shall be completed by Provider Organizations in order to report compliance with the statutory requirement that Provider Organizations implement fully interoperable electronic health record systems that connect to the Mass HIway. (Mass HIway Regulations). The Mass HIway is the Commonwealth's state-wide, state-sponsored health information exchange. Instructions for this form appear as footnotes.

An authorized individual at the applicable Provider Organization should complete this attestation form, then print, sign, and email the completed form to the Mass HIway at MassHIwayAttestation@state.ma.us by the dates specified in the instructions.¹

1. Name of the Provider Organization:²
2. Street Address of the Provider Organization:³
3. Provider Organization Tax ID (TIN):⁴
4. Description of the Use Case that has been implemented to meet the Year 1 connection requirement:
 - a) Descriptive name for the Use Case:⁵
 - b) Date that the Use Case was implemented (MM/YYYY):⁵
 - c) Category of Use Case (select only one):⁷

<input type="checkbox"/> Provider to Provider Communications	<input type="checkbox"/> Quality Reporting
<input type="checkbox"/> Payer Case Management	<input type="checkbox"/> Public Health Reporting
<input type="checkbox"/> Other (please specify)	
 - d) Does this Use Case involve the Provider Organization sending a HIway Direct Message, or receiving a HIway Direct Message, or both? (Select only one of the three following options):
 - The Use Case involves the Provider Organization sending, but not receiving a HIway Direct Message.
 - The Use Case involves the Provider Organization receiving, but not sending a HIway Direct Message.
 - The Use Case involves the Provider Organization both sending and receiving a HIway Direct Message.
 - e) Name of the other entity (or entities) participating in the exchange of information for the Use Case:⁸

Please check the box below, to confirm that you have coordinated with the other entity (or entities) for this Use Case, in order to establish that the other entity is receiving and able to use the transmission.

The Provider Organization attests that the work flow or process for this Use Case has been coordinated with the other entity (or entities) listed in 4(e).
 - f) Describe the scope of the activity addressed by the Use Case: ⁹
 - g) Describe the scope of the organization(s) involved in the Use Case: ¹⁰
 - h) Approximate expected message volume per month. ¹¹

5. EMR / EHR system that the Provider Organization is currently using:

- a) Is your Provider Organization using an Electronic Medical Record (EMR) or an Electronic Health Record (EHR) system for the Use Case described in the previous question (yes / no):¹²

If the answer to question 5a is "yes", then answer questions 5b through 5e:

- b) Name of the EMR / EHR system:¹³
- c) Version of the EMR / EHR system:¹⁴
- d) How is the EMR / EHR system connecting to the Mass HIway (please select only one):
 - directly to the Mass HIway
 - via a HISP other than the Mass HIway
- e) Is the EMR / EHR system an ONC Certified Health IT Product (yes / no):¹⁵

If the answer to question 5a is "no", then answer question 5f:

- f) How is your Provider Organization connecting to the Mass HIway (please select all that apply):
 - via Mass HIway Webmail
 - via some other method (please specify)

6. Contact information for the person(s) at the Provider Organization if the Mass HIway has technical or operational questions regarding this Attestation form:¹⁶

- a) First/Last Name and Title: _____
Phone: _____ Email address: _____
Role in relation to the Mass HIway: _____
- b) First/Last Name and Title: _____
Phone: _____ Email address: _____
Role in relation to the Mass HIway: _____
- c) First/Last Name and Title: _____
Phone: _____ Email address: _____
Role in relation to the Mass HIway: _____

7. Signature:

- As an authorized representative of the Provider Organization listed in Question #1, above, I attest that I am authorized to complete and submit this Attestation Form, that I have read the questions, and that the information submitted is true and correct.¹⁷
- a) Signature: _____
 - b) First and Last Name, printed: _____
 - c) Title: _____
 - d) Date signed: _____ Month: ____ Day of Month: ____ Year: ____
 - e) Work phone #: _____
 - f) Email address: _____





Year 1 Attestation Form: Who, When, How



In 2017, Acute Care Hospitals are the only provider organizations required to connect to the Mass Hlway and to submit the Year 1 Attestation Form. Other organizations have these requirements in later years.

- **Who & When:** Provider organizations that have Hlway connection dates that are specified in the regulations are required to submit a Year 1 Attestation Form by July 1st after their initial Hlway connection requirement.

Provider Organization	Date of the “Year 1” Hlway connection requirement	Due date of the Year 1 Attestation Form
Acute Care Hospitals	February 10, 2017	July 1, 2017
Large and Medium Medical Ambulatory Practices	January 1, 2018	July 1, 2018
Large Community Health Centers	January 1, 2018	July 1, 2018
Small Community Health Centers	January 1, 2019	July 1, 2019

- **How:** Year 1 Attestation Forms should be submitted to the Mass Hlway (via email at: MassHlwayAttestation@state.ma.us)
- The Year 1 Attestation Form (&instructions) are available on the [Mass Hlway web page](#) in two places (i.e., as Appendix B in the [Hlway Policies & Procedures \(version 3\)](#) and as [a stand-alone PDF document](#))



Year 1 Attestation Form



- The Year 1 Attestation Form is available at the Mass Hlway website: www.masshiway.net
- Go to “Resources” and then select “Participant Forms”

The screenshot shows the homepage of the Mass Hlway website. The header includes the logo and the text "Welcome to the Massachusetts Health Information Hlway". The navigation menu includes "Home", "About", "Services", "Resources", "News and Events", "How to Join", "Patients and Families", and "Contact Us". The "Resources" menu is open, showing options like "Use Cases & Success Stories", "Participant List", "HISP and Vendor Participants", "Meaningful Use", and "Participant Forms". The "Participant Forms" option is highlighted with a red box. Below the navigation, there is a breadcrumb trail "Home > Resources > Participa" and a heading "Mas s Hlway Participant D". A list of bullet points follows, with the second bullet point containing a link to the "PDF Mass Hlway Attestation Form", which is also highlighted with a red box. The text "and terms that apply to all Mass Hlway Participants to" is visible to the right of the dropdown menu.



Year 1 Attestation Form: What



The Year 1 Attestation Form is two pages long, and must be used by provider organizations that have a Hlway connection requirement date. The form will provide information about how the organization met the requirement, their EHR (if they have one), and how they connect to the Mass Hlway.

The Year 1 Attestation Form collects the following information:

1. How the organization met the Year 1 Hlway connection requirement:

- **The Year 1 requirement:** To send or receive Hlway Direct Messages for at least one use case (The use case may be within any category of use cases)
- **Questions on the attestation form include:**
 - The use case is within what category of use cases?
Categories include: (1) Provider-to-Provider Communications, (2) Payer Case Management, (3) Quality Reporting, (4) Public Health Reporting, (5) Other
 - Describe the use case
 - Approximate # of Hlway Direct Messages per month for the use case

2. Describe whether or not the organization has an EHR (and if so, how does it connect to the Hlway):

- **Questions on the attestation form include:**
 - Name and version of the EHR?
 - Is the EHR an ONC Certified Health IT Product?
 - How is the organization connecting to the Hlway?
Options include: (1) EHR directly to Hlway, (2) EHR via a HISP, or (3) via Mass Hlway webmail



Conclusion



Past Hlway webinars are available on the Mass Hlway website:

- Go to the Mass Hlway website at www.masshiway.net
- Then, go to “*News & Events*” and next select “*Events*”

Mass Hlway webinars:

- **Mass Hlway Webinars:** (all webinars are Thursdays, noon-1pm)
 - June 8, 2017: Improving Care Coordination by Leveraging Mass Hlway Direct Messaging
 - June 22, 2017: Mass Hlway 101
 - June 29, 2017: ENS Update for the community



- A HIway Event Notification Service (ENS) will facilitate real-time notifications to providers when a patient is admitted, discharged or transferred to or from an inpatient setting. This in turn allows clinicians to respond with information and/or clinical support and coordination of care.
- **Value of a Statewide ENS:**

Private ENS services currently are accessed by individual providers or systems, but none provide the scope to support payment reform and delivery system improvement efforts statewide
- **Approach:**

In Spring 2017, the HIway is doing the following:

 1. Gathering input from stakeholders including representatives from hospitals, individual clinicians, vendors, as well as healthcare organizations
 2. Publishing an Request for Information (RFI) from ENS. The RFI was issued on June 6, 2017, and closes on July 3, 2017.



Thank you!

The Massachusetts Health Information Highway (Mass HIway)

Phone: 1.855.MA-HIWAY (1.855.624.4929)

Email for General Inquires: MassHIway@state.ma.us

Email for Technical Support: MassHIwaySupport@state.ma.us

Website: www.MassHIway.net



Appendix A: *Hiway Rate Card*



Massachusetts Health Information Highway (Mass HIway) Rate Card

Effective Date – October 1, 2014

Tier	Category	Description	One-time set-up fee (per node)	Direct Messaging Service			Direct Messaging Service + Query & Retrieve Service	
				Annual HIE Services Fee (per node)	Annual HIE Services Fee + LAND (per node)	Annual HIE Services Fee Webmail (per mailbox)	Annual HIE Services Fee (per node)	Annual HIE Services Fee + LAND (per node)
Tier 1	1a	Large hospitals/Health Systems	\$2,500	\$15,000	\$27,500	\$60	\$30,000	\$42,500
	1b	Health plans						
	1c	Multi-entity HIE						
	1d	Commercial imaging centers & labs						
Tier 2	2a	Small hospitals	\$1,000	\$10,000	\$15,000	\$60	\$17,500	\$22,500
	2b	Large ambulatory practices (50+ licensed providers)						
	2c	Large LTCs (500+ licensed beds)						
	2d	Ambulatory Surgery Centers						
	2e	Ambulance and Emergency Response						
	2f	Business associate affiliates						
	2g	Local government/Public Health						
Tier 3	3a	Small LTC (< 500 licensed beds)	\$500	\$2,500	\$4,500	\$60	\$4,750	\$6,750
	3b	Large behavioral health (10+ licensed providers)						
	3d	Large FQHCs (10+ licensed providers)						
	3e	Medium ambulatory practices (10-49 licensed providers)						
Tier 4	4a	Small behavioral health (< 10 licensed providers)	\$25	\$175	\$250	\$60	\$275	\$350
	4b (includes former 3c)	Home health, LTSS						
	4c	Small FQHCs (< 10 licensed providers)						
	4d	Small ambulatory practices (3-9)						
Tier 5	5a	Very Small ambulatory practices (1-2)	\$25	\$60	\$60	\$60	\$90	\$90



Appendix B: *Selected slides from the HIway Operations Update*
(presented at the May 2017 HIT Council Meeting)



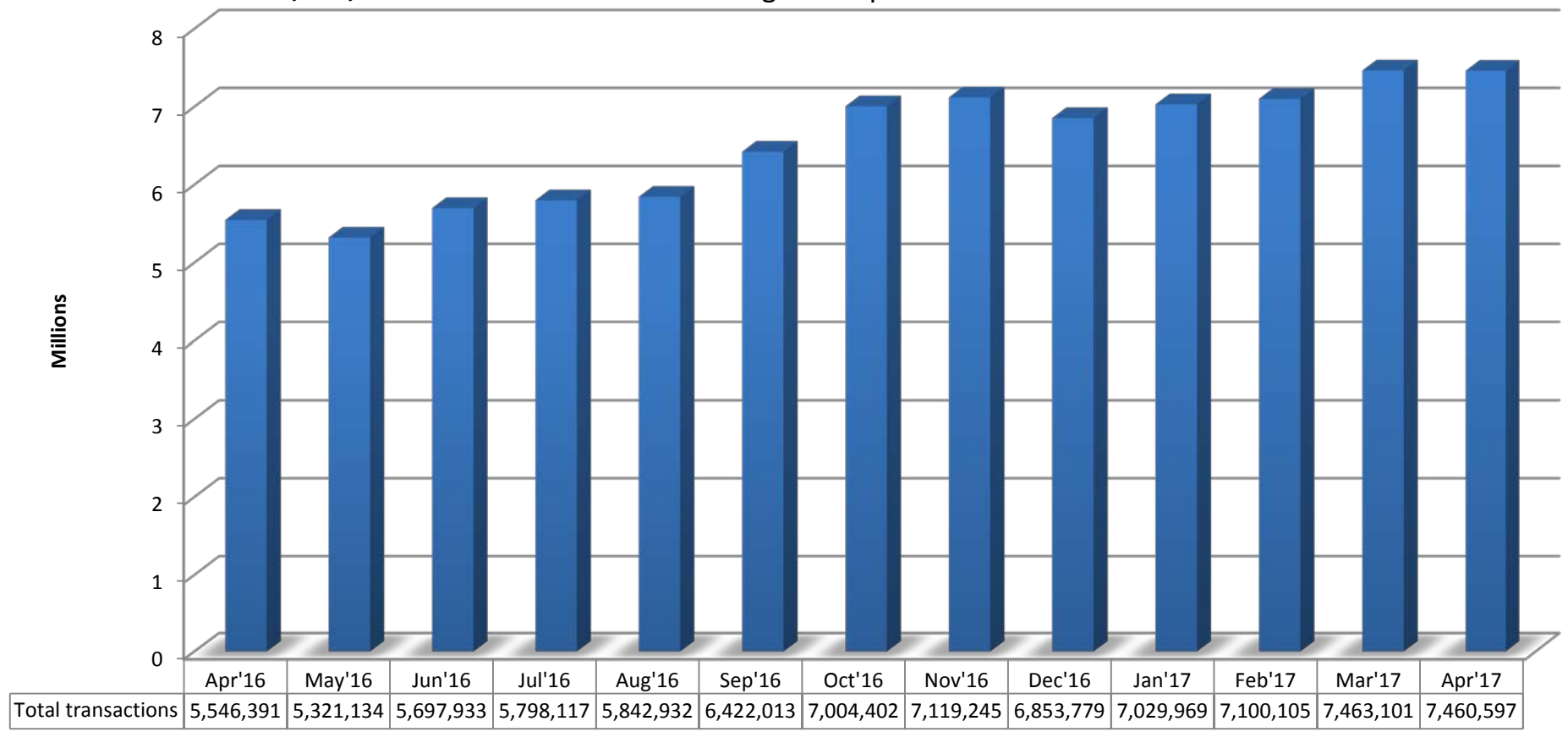
Hiway Transaction Activity



13 Month Hiway Transaction Activity

7,460,597 Transactions* exchanged in April (03/21/2017 to 04/20/2017**)

134,819,578 Total Transactions* exchanged inception to date



* Note: Includes all transactions over Mass Hiway, both production and test

** Note: Reporting cycle is through the 20th of each month.

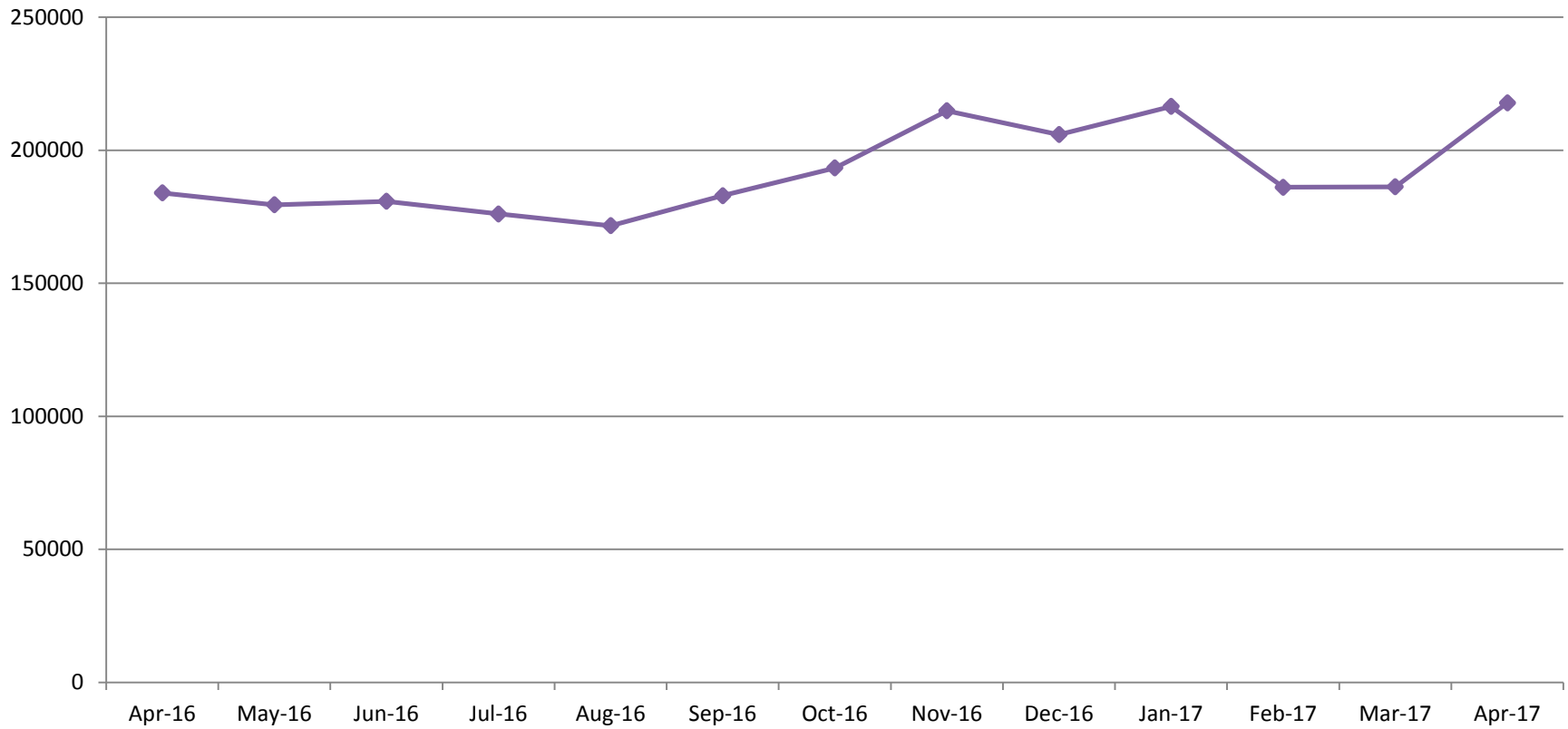


Hiway Transaction Analysis



Hiway Production Transaction Trends – Provider to Provider (Apr 2016 – Apr 2017)

3% of Hiway activity in April* was for Provider to Provider transactions



	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17
Provider to Provider	183980	179483	180788	176069	171657	182934	193363	214852	205901	216487	186118	186244	217828

* Note: Reporting cycle is through the 20th of each month.

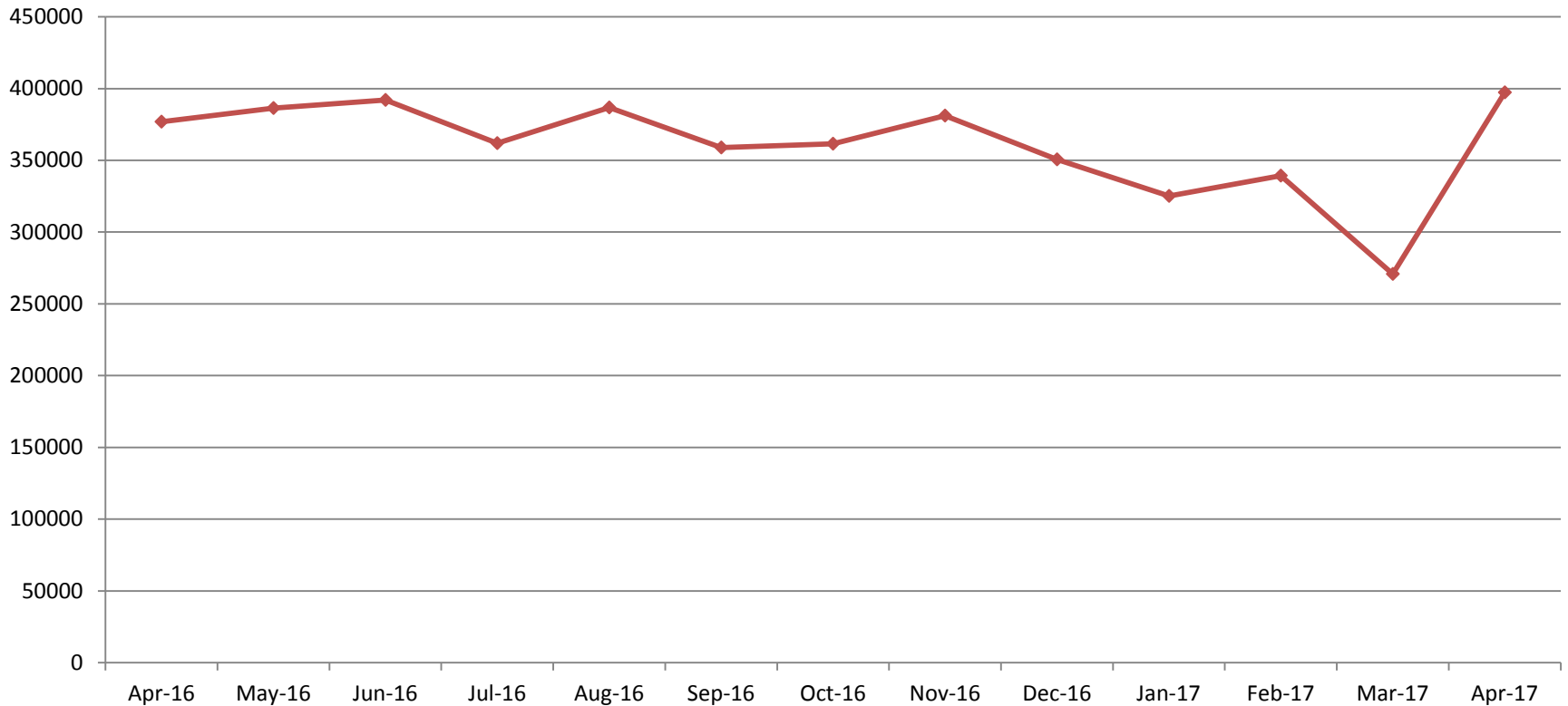


HIway Transaction Analysis



HIway Production Transaction Trends – Quality Reporting (Apr 2016 – Apr 2017)

5% of HIway activity in April* was for Quality Reporting transactions



	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17
Quality Reporting	376828	386426	392037	361916	386838	358863	361605	381174	350651	325166	339380	270903	397178

* Note: Reporting cycle is through the 20th of each month.

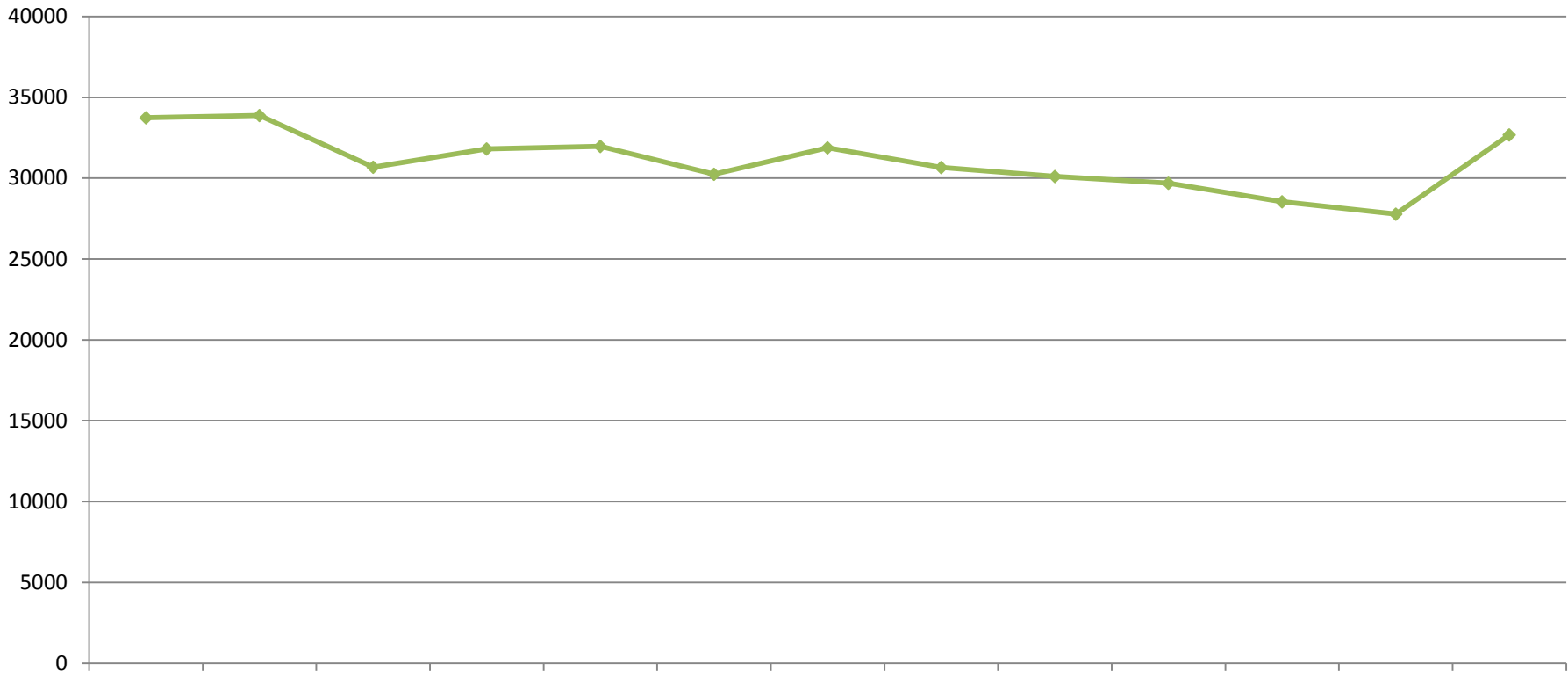


HIway Transaction Analysis



HIway Production Transaction Trends – Payer Case Management (Apr 2016 – Apr 2017)

< 1% of HIway activity in April* was for Payer Case Management transactions



	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17
Payer Case	33734	33879	30692	31805	31967	30251	31878	30667	30112	29700	28538	27786	32687

* Note: Reporting cycle is through the 20th of each month.



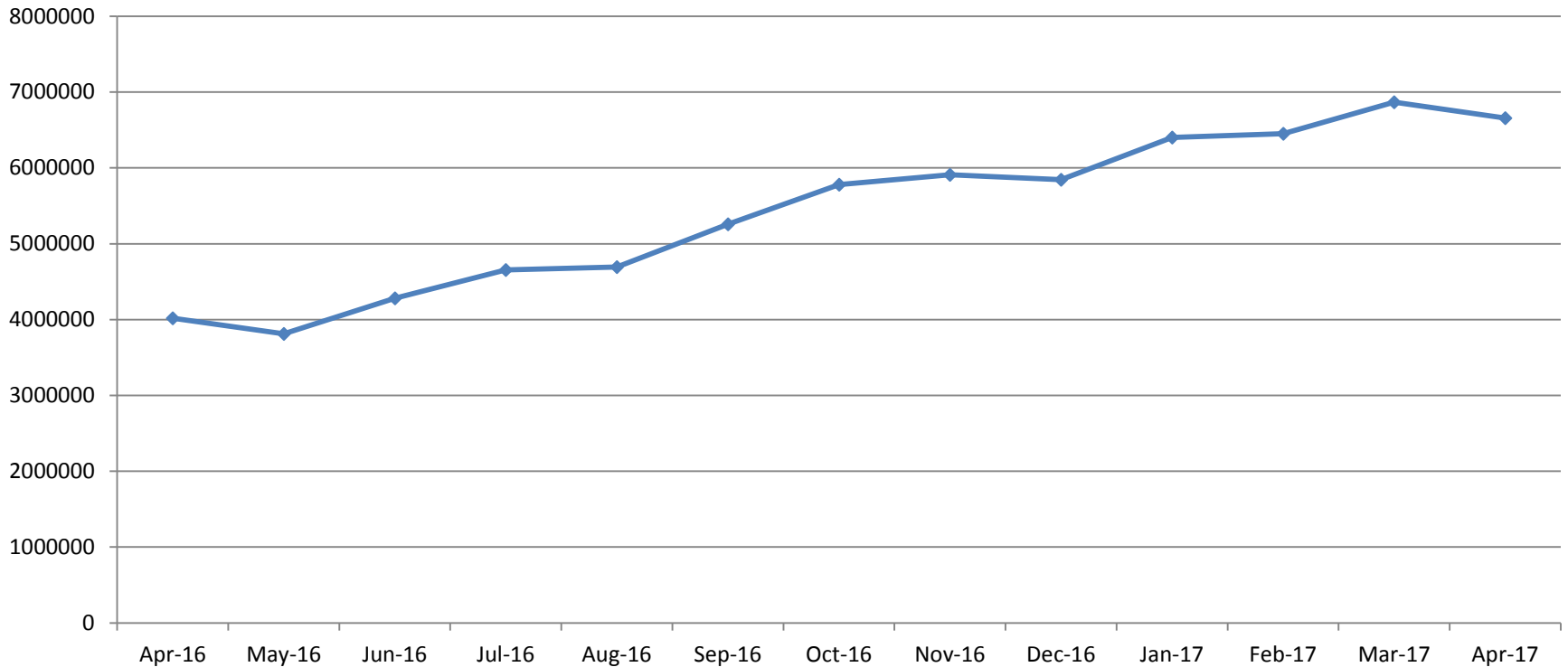
Hiway Transaction Analysis



Hiway Production Transaction Trends – Public Health Reporting (Apr 2016 – Apr 2017)

91% of Hiway activity in April* was for Public Health Reporting transactions.

These Public Health transactions are analyzed by application on the following slides.



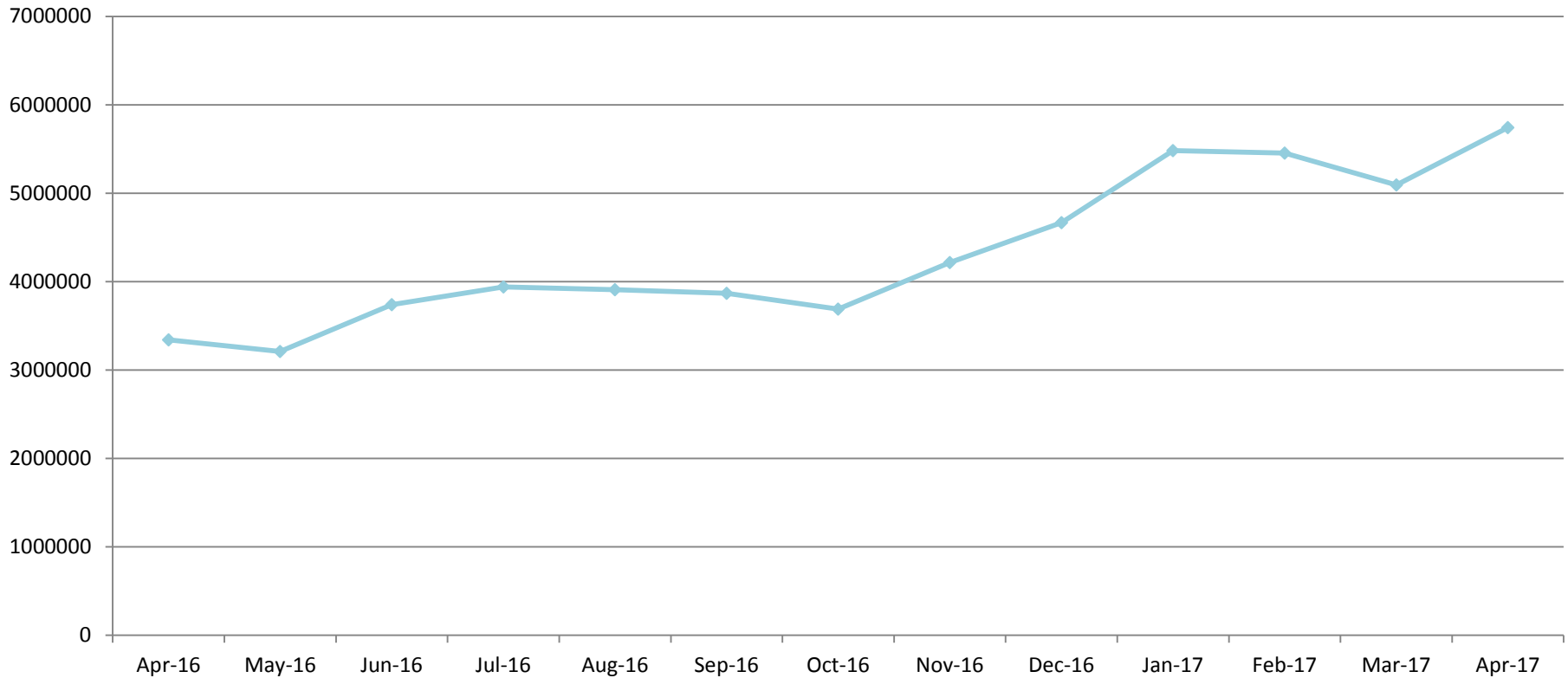
	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17
DPH Transactions	4017260	3810471	4281210	4655963	4692690	5258400	5779091	5911329	5843908	6401741	6452225	6867272	6656846

* Note: Reporting cycle is through the 20th of each month.



Public Health Reporting – Analysis by Application (Apr 2016 – Apr 2017)

Syndromic Surveillance Transactions

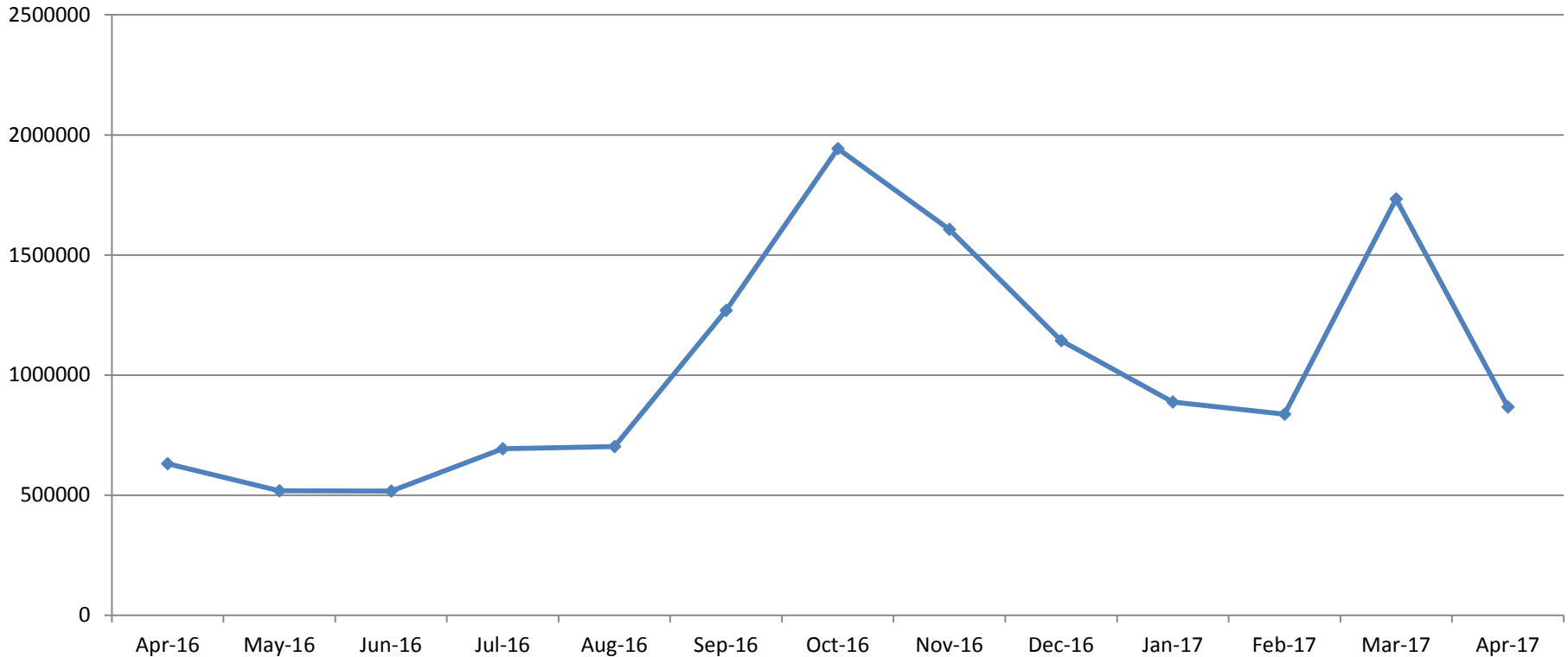


	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17
Syndromic	3339839	3210337	3740508	3941092	3906947	3867053	3690015	4214062	4667528	5480332	5454437	5094559	5742681



Public Health Reporting – Analysis by Application (Apr 2016 – Apr 2017)

Immunization (MIIS) Transactions

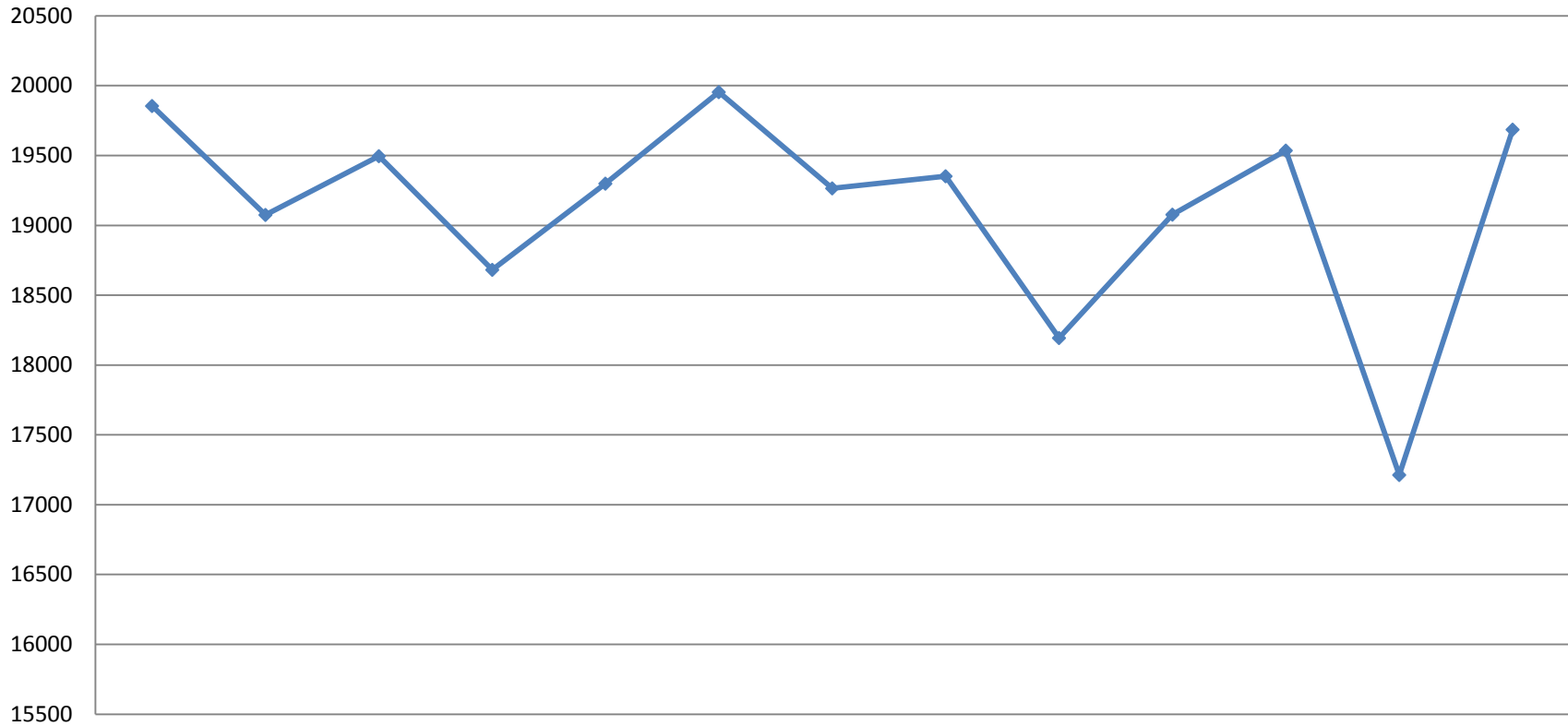


	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17
MIIS	630649	518751	517318	692856	702715	1269445	1943323	1606817	1143928	888367	837521	1733218	867478



Public Health Reporting – Analysis by Application (Apr 2016 – Apr 2017)

Boston Public Health Commission Transactions

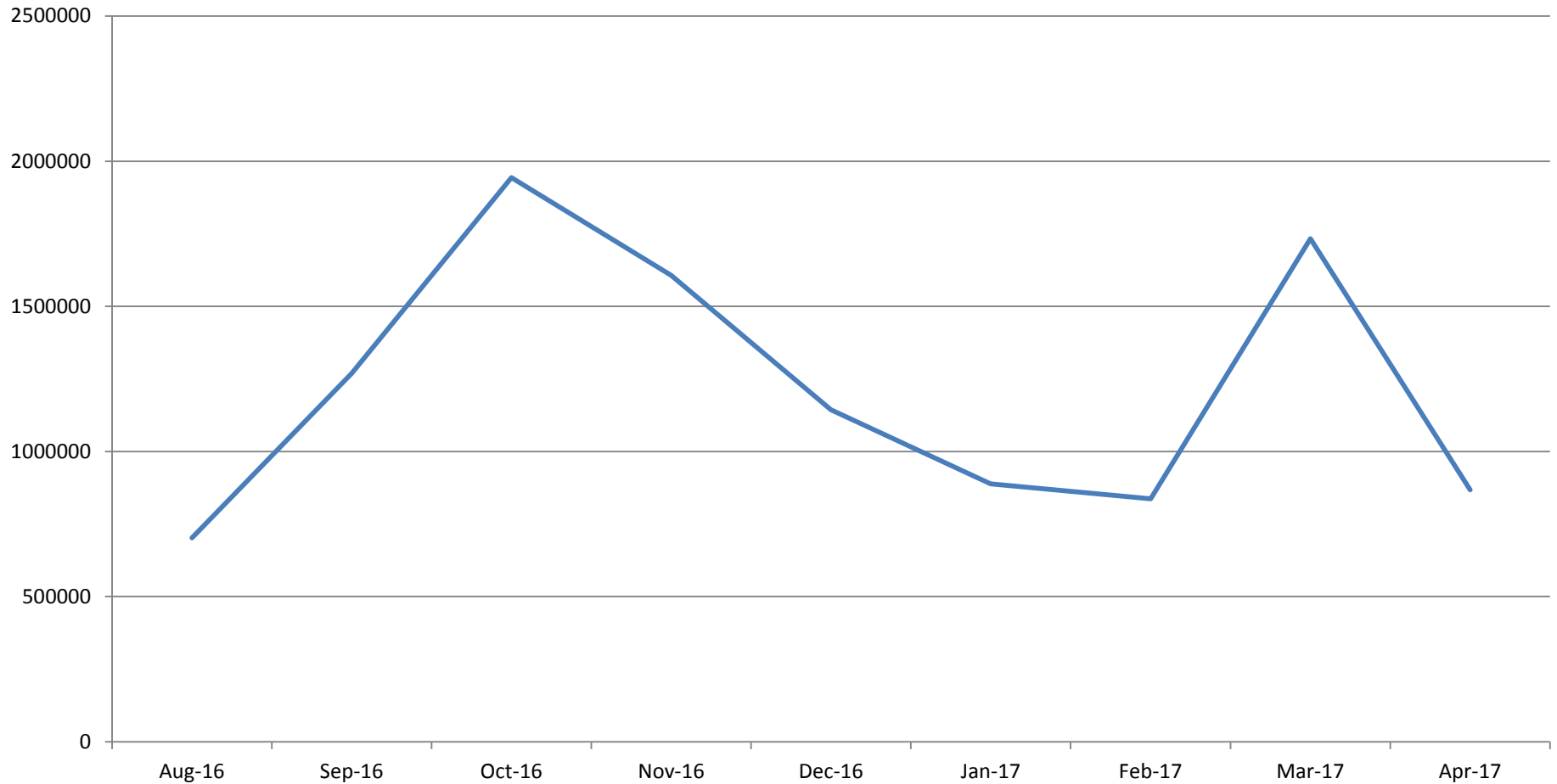


	Apr-16	May-16	Jun-16	Jul-16	Aug-16	Sep-16	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	Apr-17
— Boston Health	19854	19076	19496	18682	19300	19955	19266	19352	18193	19078	19535	17213	19685



Public Health Reporting – Analysis by Application (Aug 2016 – Apr 2017)

Opioid Treatment Program (OTP) Transactions **



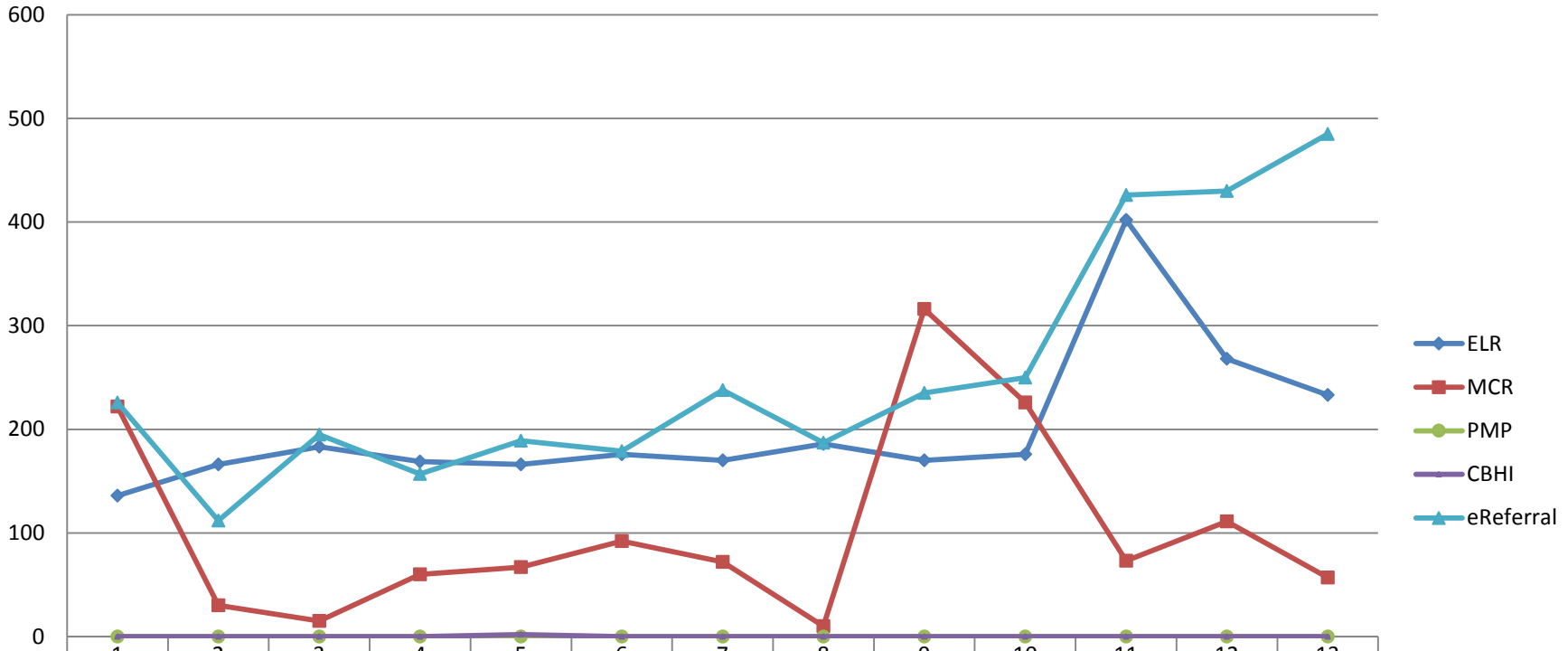
* Note: Reporting cycle is through the 20th of each month.

** Note: OTP data available starting August 2016.



Public Health Reporting – Analysis by Application (Apr 2016 – Apr 2017)

Other Public Health Transactions



	1	2	3	4	5	6	7	8	9	10	11	12	13
ELR	136	166	183	169	166	176	170	186	170	176	402	268	233
MCR	222	30	15	60	67	92	72	10	316	226	73	111	57
PMP	0	0	0	0	0	0	0	0	0	0	0	0	0
CBHI	0	0	0	0	2	0	0	0	0	0	0	0	0
eReferral	226	112	195	157	189	179	238	187	235	250	426	430	485



Customer Status Dashboard (April 2017)

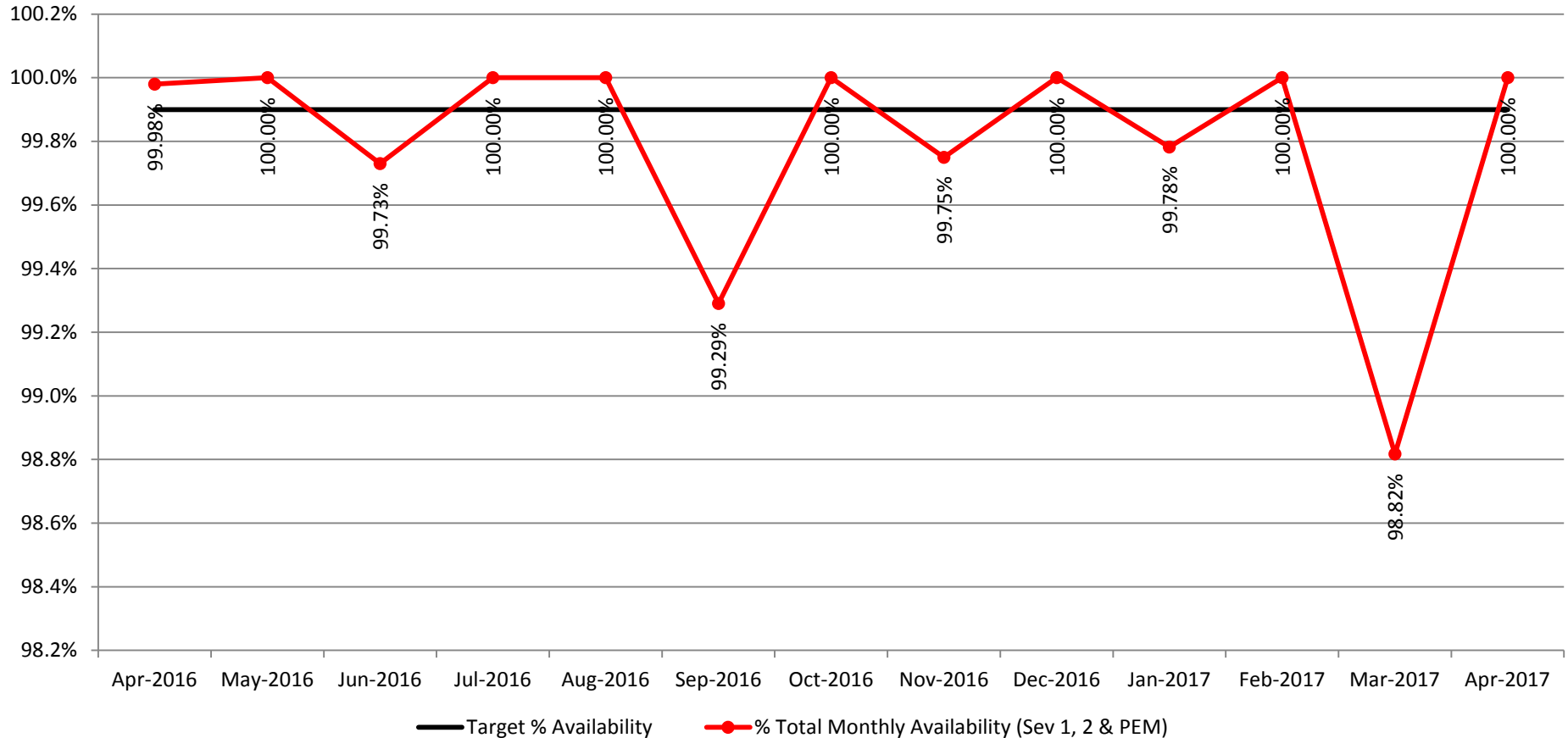


Tier (As of Apr 20 2017)	Universe (Est.)	Actively Using	%ActivelyUsing	Connected	%Connected	Enrolled	Tier Total
1a. Large hospitals/Health Systems	37	27	73%	5	14%	5	37
1b. Health plans	9	3	33%	2	22%		5
1c. Multi-entity HIE	12	4	33%	6	50%	2	12
1d. Commercial imaging centers & labs	5	3	60%	2	40%		5
2a. Small hospitals	46	35	76%	11	24%		46
2b. Large ambulatory practices (50+)	33	18	55%	15	45%		33
2c. Large LTCs (500+ licensed beds)	8	2	25%		0%		2
2d. Ambulatory Surgical Centers	63		0%	1	2%		1
2e. Ambulance and Emergency Response	39		0%	1	3%		1
2f. Business associate affiliates	5	1	20%	1	20%		2
2g. Local government/Public Health	8	1	13%	7	88%		8
3a. Small LTC (<500 licensed beds)	310	23	7%	42	14%		65
3b. Large behavioral health (10+ licensed providers)	10	1	10%	8	80%		9
3d. Large FQHCs (10-49)	30	14	47%	11	37%		25
3e. Medium ambulatory practices (10-49)	365	46	13%	24	7%		70
4a. Small behavioral health(<10 licensed providers)	90	5	6%	13	14%		18
4b. Home health, LTSS	149	23	15%	35	23%	4	62
4c. Small FQHCs (3-9)	29	4	14%	1	3%	1	6
4d. Small ambulatory practices (3-9)	1595	124	8%	119	7%	1	244
5a. Very Small ambulatory practices (1-2)	4010	154	4%	353	9%	6	513
Grand Total	6853	488	7%	657	10%	19	1164

“Actively Using” means connected and actively using; “Connected” means connected but not yet actively using; and “Enrolled” means an agreement has been signed but not yet connected



13 Month HIway Availability Trends



Metric Targets:

- “Total Monthly Availability” – no lower than 99.9% (downtime no more than ~44 minutes/month)