



2021 Health IT Environmental Scan Executive Summary

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Executive Summary

The Florida Agency for Health Care Administration (AHCA or the Agency) conducted this Environmental Scan (2021 Scan) to fulfill federally required closeout activities for the Health Information Technology for Economic and Clinical Health Act (HITECH). The purpose of the 2021 Scan was to assess Health Information Technology (Health IT) adoption within the state. Work was collaboratively accomplished by HealthTech Solutions (HealthTech) and KPMG—contractors who have worked with the Agency since 2012 in supporting the Medicaid Promoting Interoperability (PI) Program (formerly known as the Electronic Health Record Incentive Program) through outreach and auditing activities. The Agency conducted a baseline scan in 2010 as part of planning for HITECH, and in 2018, a [Health Information Exchange \(HIE\) As-Is Assessment and To-Be Roadmap](#) (2018 Study) was undertaken to measure Health IT adoption progress.

As in past scans, the 2021 Scan gathered insight and information on the adoption and utilization of Electronic Health Record (EHR) systems in Florida, efficiency and utilization of Health IT activities including emergency preparedness services, telehealth and ePrescribing, impact and utilization of services offered through the Florida HIE Services (Florida HIE), and overall clinical data exchange and interoperability throughout the state. The 2021 Scan consisted of three key activities:

- Literature review including past assessments and environmental scans, federal guidance, and best practices
- Electronic surveys to:
 - Ambulatory providers, defined as any medical provider offering outpatient-based services including diagnosis, observation, consultation, treatment, intervention, and rehabilitation
 - Hospital facilities, defined as either an acute care, children’s hospital, Critical Access Hospital (CAH), or a rehabilitation facility (defined as those providing an integrated multidisciplinary program designed to improve the physical function of individuals)¹
 - Payers (Accountable Care Organizations [ACOs] and Medicaid health plans)
- Focused interviews with stakeholders including Agency staff, state agencies, HIE participants, and provider association representatives.

The information gathered through the 2021 Scan will be used to prepare the required final State Medicaid Health IT Plan (SMHP) and provide direction for future planning efforts for expansion and utilization of Health IT initiatives.

Through a combination of HITECH funding, Agency focus, and provider interest and adoption of Health IT, the state has seen an increased use of technology in supporting the exchange and availability of patient data to facilitate care delivery, health care operations, and quality programs. Within the scope of the 2021 Scan, the term Health IT is inclusive of the Florida HIE, adoption, and capabilities of EHR systems, the PI Program, the electronic transmission of prescriptions among providers and pharmacies (ePrescribing), telehealth, and other technology-driven systems and services supporting interoperability and exchange of clinical data.

¹ [AHCA: Hospital & Outpatient Services Unit - Rehabilitation Agencies \(myflorida.com\)](#)

EHR Adoption and Use of Health IT

In 2010, HITECH was enacted to promote and expand Health IT adoption, specifically, the use of EHRs by health care providers. Through HITECH, the Medicaid and Medicare PI Programs were implemented, allowing for incentive payments to eligible providers who adopted, implemented, or upgraded to Certified EHR Technology (CEHRT) and/or met federal Meaningful Use requirements. EHR certification requirements are established by standards, implementation specifications, and certification criteria adopted by the secretary of the Department of Health and Human Services (HHS), and the program is administered by the Office of the National Coordinator for Health Information Technology (ONC). ONC-certified systems support interoperability among systems and provide functionality that may not be available in noncertified systems.

Results from the 2021 Scan indicate a 35-percentage-point increase (from 36.0% to 71.0%) in the use of CEHRT to store patient data by hospital survey respondents and a 24-percentage-point increase (43.0% to 67.0%) by ambulatory respondents compared to the 2018 Study (based on presumed similar survey populations). Of ambulatory and hospital respondents who do not currently use an EHR (certified or not) system, 84.2% of ambulatory and 37.5% of hospital respondents indicated they plan to implement an EHR system in the next one to three years. These findings support the impact of the Agency's investment in outreach activities related to Health IT and how the Agency's efforts have played a role in the shift toward electronic exchange of health care data.

Even with the increased use of EHRs, there is room for growth in provider participation in Health IT programs overall. Ambulatory respondents (42.0%) reported "cost" as a barrier preventing their practice from participating in HIE platforms, followed by "need more information about health information exchange" (37.3%). This finding is not unique to Florida. According to the [2018 ONC Annual Report](#), while progress has been made in the adoption of Health IT across the U.S. health care industry, significant interoperability hurdles remain, including technical, financial, and trust barriers.

Florida HIE Services and Ongoing Focus

The Florida HIE offers a State Gateway to connect to national health information exchange organizations known as Query Solutions, Direct Messaging to support the secure transmission of health information, and Encounter Notification Services (ENS) to provide subscribers with timely notifications about their members' hospital admissions, discharges, and transfers (ADTs). There are both data sources and data subscribers for ENS. Interviewees agree ENS is the Florida HIE flagship service, with ENS having the highest utilization and acceptance among Florida HIE subscribers.

Key ENS survey findings include:

- Of the 21.3% ambulatory respondents participating in ENS, they use it for care coordination activities (93.7%), patient tracking (59.3%), population health (40.6%), and transition management (68.7%).
- The majority (60.0%) of hospital respondents participate in ENS only as a data source, and 22.8% participate as both a data source and subscriber, compared to 3.1% of ambulatory respondents who participate as data source and 34.3% that are participating as both a data source and a subscriber for ENS data.
- Even though ENS is the Florida HIE flagship service, 37.3% of the ambulatory respondents indicated that needing more information about the Florida HIE was a barrier to participating,

with 59.3% of respondents indicating they do not know where to find additional educational materials to obtain knowledge about service offerings.

- Of hospital respondents, 24.1% indicated they do not know where to find additional materials to obtain knowledge about the Florida HIE.

Although this covers a large portion of overall survey respondents, there is still a significant number of respondents throughout the state who are not participating in any Florida HIE services. These data points illustrate the need for the Agency to continue to expand outreach and education activities related to the Florida HIE and available services like ENS.

The technical cost of connecting to ENS as a subscriber is still an apparent barrier to smaller providers such as behavioral health practices; although, it was acknowledged that ongoing subscription cost is minimal to most subscribers. Overall, ENS should be considered a successful implementation within the Florida Health IT landscape, and the Agency should continue efforts to increase education regarding ENS utilization and its benefits to providers, such as enhancing communications, streamlining workflows, and supporting care and case management teams.

Relationships Within the Agency and with Other State Agencies

Focused interviews assessed the utilization of health information and highlighted potential barriers of data exchange within and between state agencies serving patients/clients. Interviewees stated that there is a lack of standardization in the systems used by agencies to exchange patient/client information; and that programs and services could be supported by health information exchange services. For example, the Florida Department of Health is currently leveraging the Florida HIE in all 67 county health departments to obtain useful data for COVID-19 prevention and control.

The Agency has taken initial steps to enable interoperability for the exchange of health information among health and human services agencies through the use of two foundational platforms designed for systems integration and data integrity. According to interviewed stakeholders, the Agency is also using these Medicaid enterprise platform integration processes to both engage and integrate with other agencies. Health information exchange encourages interagency collaboration, communication, and integration, which was noted during the stakeholder interviews. Additionally, supporting care co-ordination activities encourages increased collaboration among Florida's health and human services agencies (e.g., Department of Children and Families and Department of Health). A key activity in this area would be to initially quantify existing Health IT capabilities within each Agency and develop use cases to support individual and collective Agency needs.

Emergency Preparedness

Through the foundation provided by ENS, the Agency has embarked on implementing the Emergency Patient Look-Up Service (E-PLUS), an emergency preparedness tool. Within E-PLUS, the Emergency Census functionality can be used to track patient movement, assist in the location of missing individuals, and in authorized cases, identify and retrieve a patient's clinical record including medication history. Of the 21.3% of ambulatory respondents using ENS, 12.5% were aware of E-PLUS, while only 17.1% of the 35 hospital respondents using ENS were aware of E-PLUS. All interviewed stakeholders indicated they are aware of the emergency preparedness tool and indicated interest in these services and the proposed benefits to patient care.

This is a key area for growth and development of use cases. The survey findings support that the program, while still in pilot stage, needs to be further expanded to include an education

campaign to increase awareness. In support of E-PLUS deployment, the Agency should continue to build partner-ships with supporting organizations such as the American Red Cross and Florida Division of Emergency Management to help strengthen the state's collective ability to respond to emergency and/or disaster situations.

Other Key Findings

2021 Scan key highlights are provided below:

- 90.2% of hospital respondents use some type of EHR system (CEHRT, non-CEHRT, and hybrid).
- 87.9% of ambulatory respondents use some type of EHR system (CEHRT, non-CEHRT, and hybrid).
- 100% of hospital respondents who do not currently have CEHRT and do not plan on implementing CEHRT indicated cost of implementation as the predominant barrier.
- 66.0% of ambulatory respondents indicated they do not participate in any of the Florida HIE services.
- 100% of payer respondents indicated they are aware of the services offered through the Florida HIE.
- 100% of payer respondents indicated they would like to see medical records added as an ENS data source.
- 86.0% of ambulatory respondents and 88.0% of hospital respondents use telehealth to provide patient care.
- 80.7% and 69.3% of hospital and ambulatory respondents, respectively, currently have ePrescribing capabilities as part of their EHR system.