



PCE SYSTEMS

Connecting Michigan for Health:
An Update on Electronic Consent Management
from the “Boots on the Ground”

Presented By:
Jeff Chang
CEO, PCE Systems

QUICK INTRODUCTION

- PCE Systems
 - Health IT Vendor with focus on public behavioral health and integrated health initiatives
 - MiHIN Trusted Data Sharing Organization (VQO)
 - Behavioral Health Information Exchange
- Project Categories
 - Consent-managed community care coordination
 - Payer-provider data integration
 - Implementation of MiHIN Use Cases
 - Local integrated care and other health initiatives

FIVE YEARS AGO...

The “Problem” of Behavioral Health Information Exchange

- Physical Health Focus of the Industry
- Privacy Laws and Regulations – Mental Health Code and 42 C.F.R. Part 2
 - Party-Specific Consents
 - Redisclosure
 - Expiration
- The “Risk of Being Wrong”
- Engaging Stakeholders
- Software Vendors



SLOW PROGRESS IS STILL PROGRESS



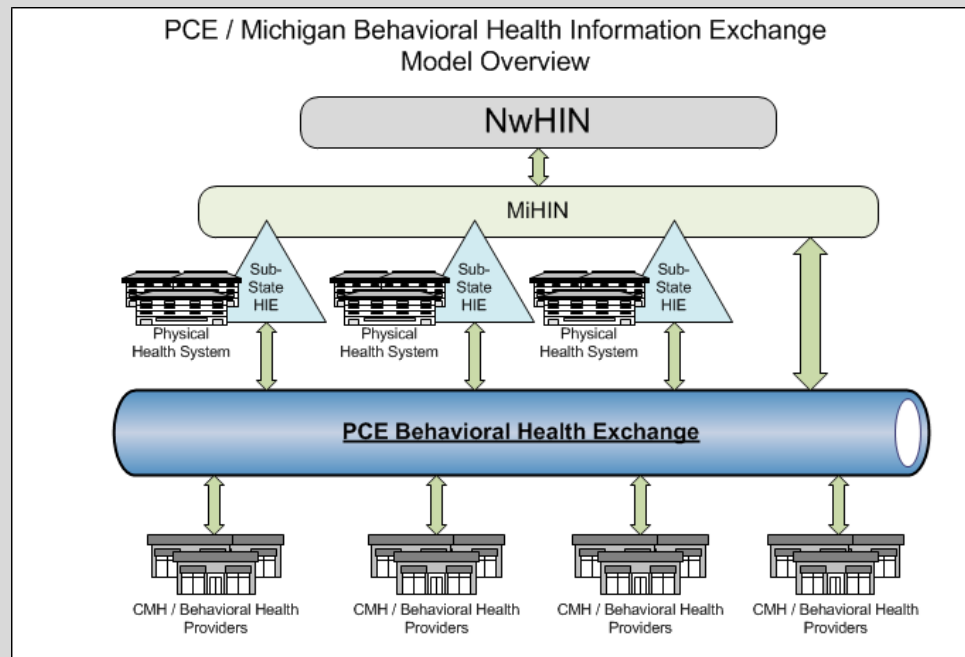
VARYING LEVELS OF DCH-3927 ADOPTION



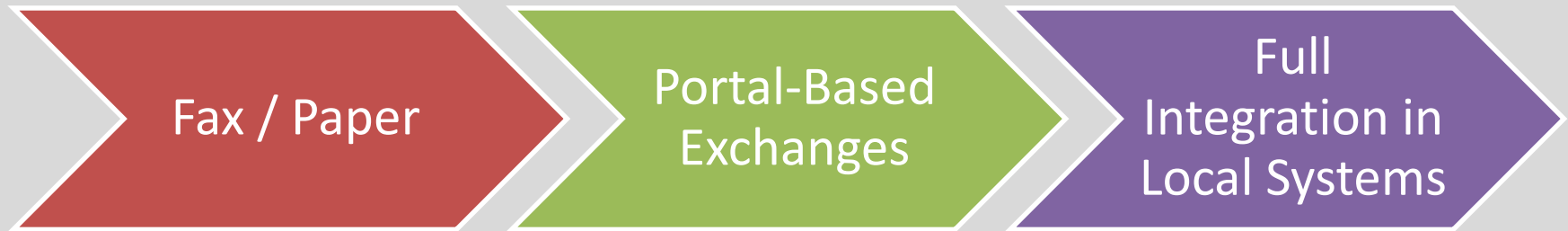
- Adoption of the DCH-3927 consent form has been broad across Michigan CMHs
 - Collected over 320,000 consents statewide
- Three major “flavors”
 - Supplement to other consents
 - As sole consent to share information
 - Electronically Registered in Electronic Consent Management System

ELECTRONIC CONSENT MANAGEMENT SYSTEM

- Implements the tracking of DCH-3927 consents electronically
- Serves as a gatekeeper for HIE access to Behavioral Health Information



EVOLUTION OF EXCHANGE

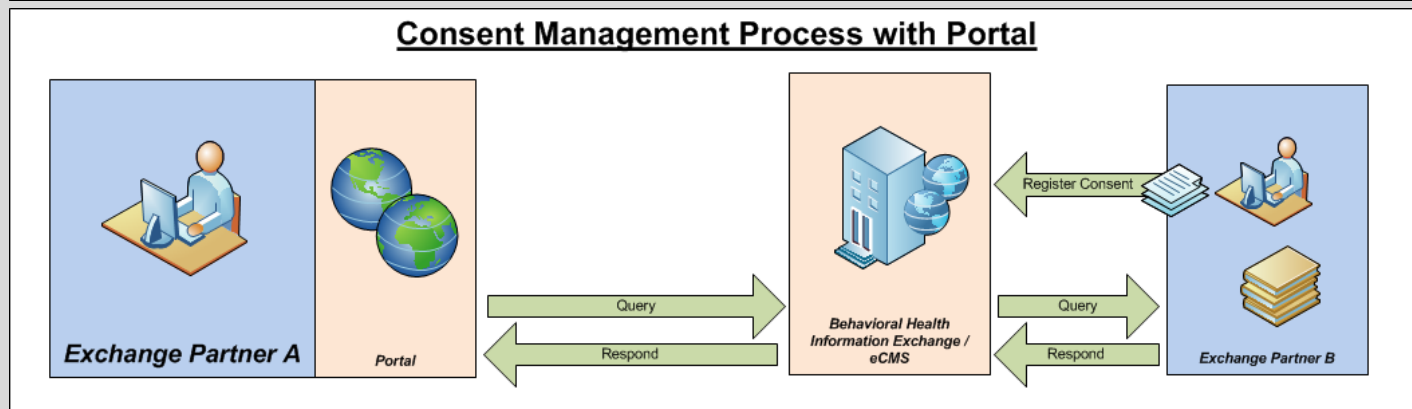
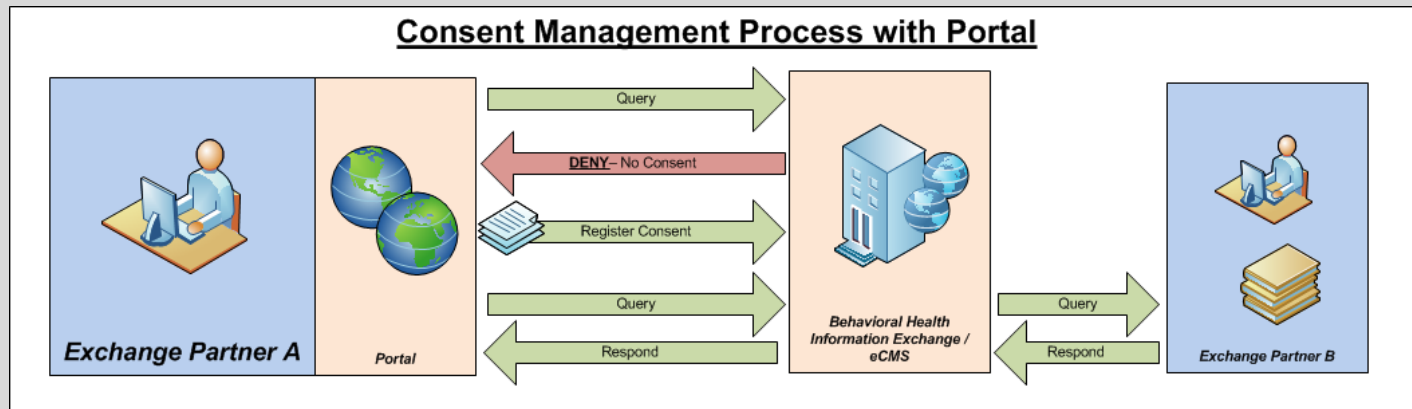


Where we are today...



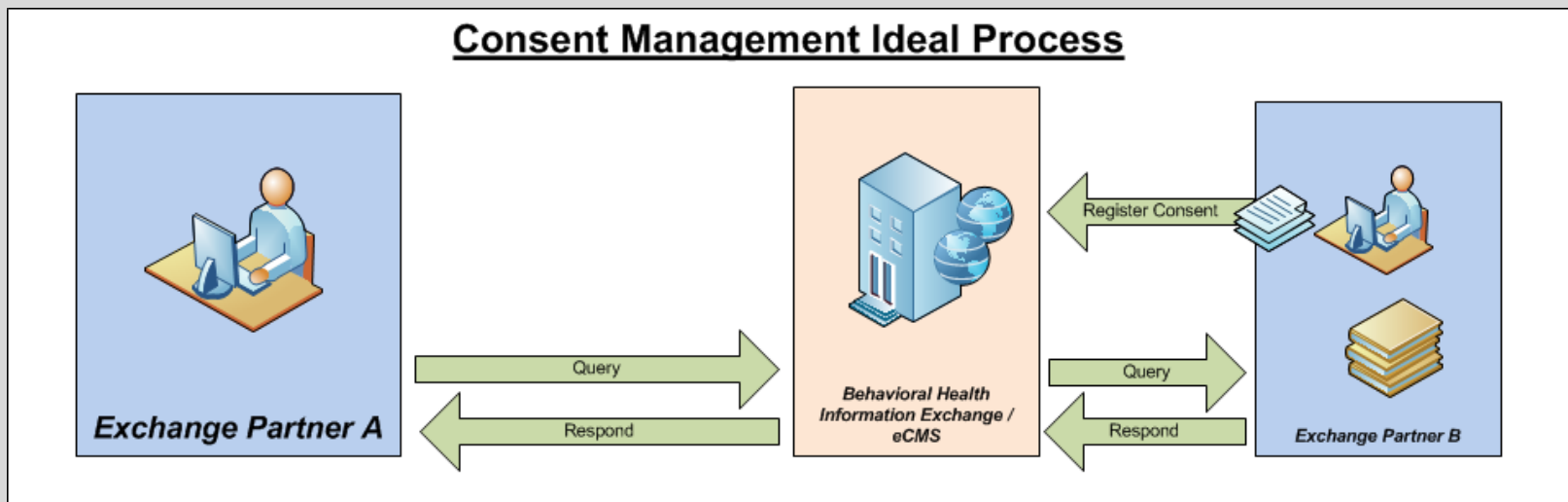
PROGRESS WE'VE MADE: MICARECONNECT

- Washtenaw / SIM Project (CHRT CHIR)
- Community Care Coordination Platform
- Portal Access to eCMS and HIE Resources



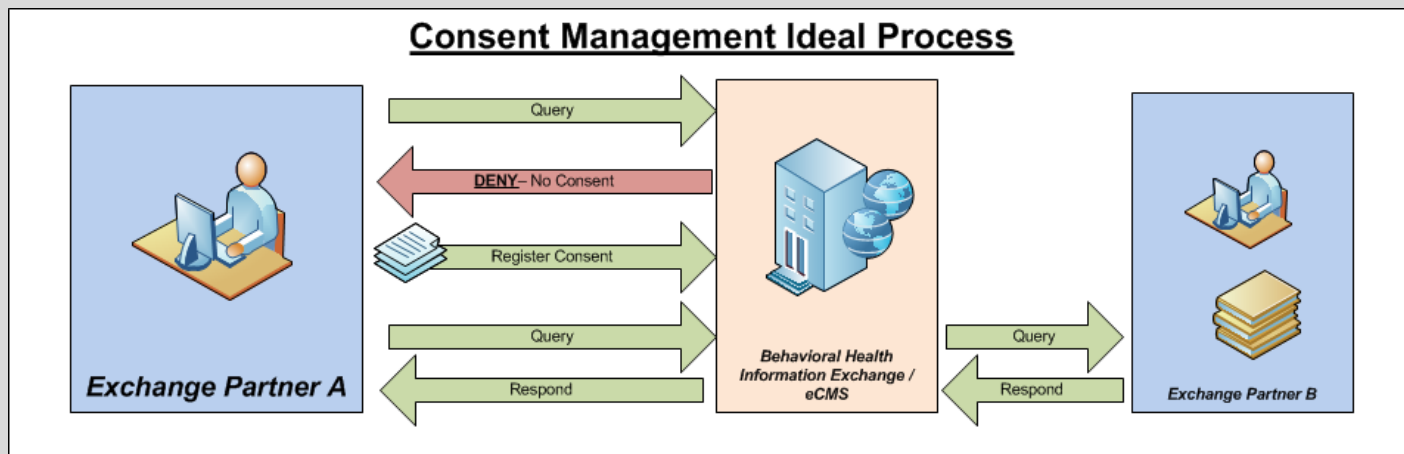
NON-PORTAL-BASED EXCHANGE

- Summit Pointe and Bronson Healthcare
 - Integration between PCE and Epic
 - Query Based: Uses NwHIN (XCA / SAML) Queries
 - No one has to leave their “home” EHRs



NEXT STEPS

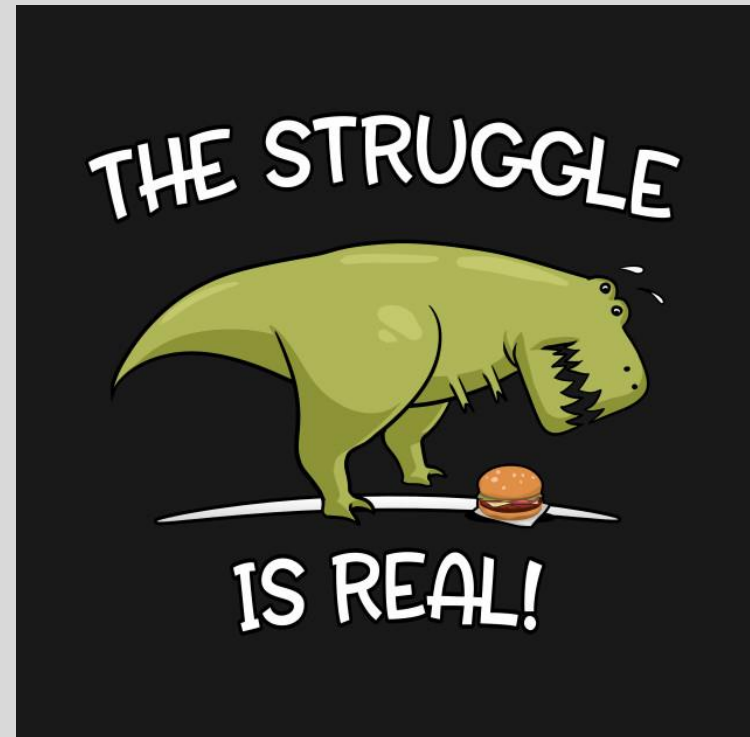
- Bronson Healthcare – Electronic Consent Registration



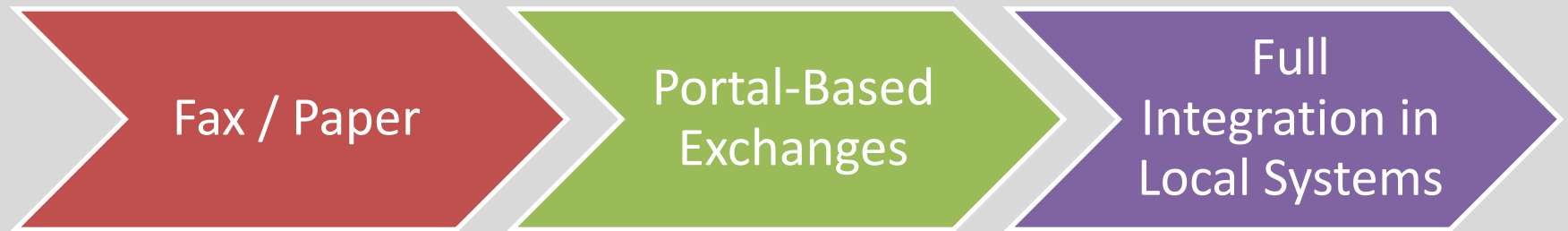
- Query-based exchange with Great Lakes Health Connect (GLHC)

THE STRUGGLE IS REAL

- There are numerous barriers to implementing behavioral health information exchange
- Consent management is just one piece of the puzzle
- Agencies and their vendors have varying technical capabilities
- Agencies have varying priorities
- Agencies have limited resources
- Agencies have varying motivation
- Adoption of standards is driven by all of these considerations and more



EVOLUTION OF EXCHANGE



Where we are today...

Where we want to be...