

## Direct Secure Messaging for Disaster Preparedness



**We will begin in just a few minutes.**

- Please put your phones on mute.
- Please do not use the hold feature of your phone while participating in the webinar.



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## Direct Secure Messaging for Disaster Preparedness



A Service of the  
Florida Health Information Exchange



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## CEUs

- **One CEU / CME is available at no cost to webinar participants.**
- Registered participants can find further information and instructions for receiving CEU/CME credit on the program information sheet. In addition, the contact for each group will receive a roster to record signatures of attendees who want to receive CEU/CME credit.
- Please contact Debbie Kelley at [Debbie.kelley@doh.state.fl.us](mailto:Debbie.kelley@doh.state.fl.us) or (850) 245-4444 Ext 2060 if you have any questions regarding the upcoming program.
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## Speakers

- **Pamela King**  
**HIE Outreach Coordinator**  
**AHCA - Agency for Healthcare Administration**
- **Walt Culbertson**  
**Technical and Operations Leader**  
**AHCA - Agency for Healthcare Administration**

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## HIT/HIE - Disaster Preparedness Foundation



- Health information technology (HIT) is the use of computer hardware and software to securely store, retrieve, and share patient health and medical information.
- Health information exchange (HIE) is the movement of health information electronically across multiple organizations.
- Exchanging health information is important:
  - Make sure that health care providers have access to the most up-to-date information.
  - Make the most informed decisions about patient care that is possible.



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## Direct Messaging Standard



- **Standards-based.** Built on Internet standards for secure e-mail communication wrapped around special governance and policies recommended by ONC.
- **Simple.** Connects healthcare stakeholders through universal addressing using simple push of information in any format.
- **Secure.** Users can easily verify messages are complete and not tampered with in travel.
- **Scalable.** Enables Internet scale with no central network authority.
- **Flexible.** Any message payload.

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## What is Direct Secure Messaging?

- DSM is the Florida HIE Implementation of the Direct standard for secure, encrypted email for sending protected health information.
  - Attachments up to 10 mb in size
  - Can be integrated into existing computer systems
  - No software to download
  - Secure Web-based Portal on most Internet accessible devices
  - Notification of DSM Mail to personal email
  - Ability to forward email for group email sharing
  - HIPAA compliant



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## The Flexibility of Direct Messaging

### Communication Pathways



Between People



Between Machines



Between People & Machines

### Communication Content

I've attached the study of Mr. Author. Thanks for seeing him.



Readable by People

```
EVN(A28|20060501140008|000338475*Author*Arthur*****
*Regional
MPI&2.16.840.1.113883.19.2018/ISO*L|20060501140008<cr>
PDI|000197245**NationalPN&2.16.840.1.113883.19.38/ISO*PN-45
30**
```

Readable by Machines

I've attached an x-ray and electronic record for Mr. Author.



```
EVN(A28|20060501140008|000
338475*Author*Arthur*****
*RegionalMPI&2.16.840.1.11388
3.19.2018/ISO*L|2006050114000
8<cr>
```

Readable by People and/or Machines

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## Who is Using Direct Secure Messaging?



- Providers & staff
- Hospitals
- Ambulatory surgery centers
- Community mental health centers
- Federally Qualified Health Centers
- Rural Health Clinics
- Hospices
- Pharmacies
- Skilled nursing facilities
- Clinical laboratories
- State agencies
- County Health Departments
- Managed care organizations
- Third party administrators
- Health plans

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## Direct Secure Messaging in 2013

- Anticipate 10,000 users by the end of 2013
- Other Direct HISP Connections
  - Electronic Health Record vendors
  - State-sponsored HISPs
- Government agencies
- Targeted provider outreach




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## Florida Disaster Preparedness Use Care

- Florida emergency planners and first responder organizations can use DSM for coordination and planning
- Dislocated patient presents in neighboring county or state emergency department
- Rendering provider or facility sends Direct message to patient's health plan or Florida care provider
- Clinical information is returned via direct message in structured or unstructured format




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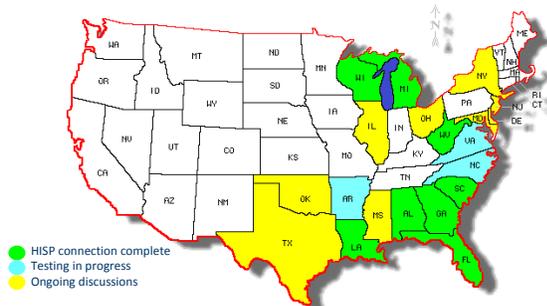
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## DSM Connections to Other States




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## Acute Care Emergency Via DIRECT

Workflow	Data Flow
1. A previously healthy 64 year old Florida panhandle resident presents to a Georgia Acute Care Emergency Facility (ER) after having evacuated his home in a hurricane and suffering a laceration to his arm and face.	HL7 Admit (ADT) or C-CDA <b>Direct Message</b> Pushed to: A. Rendering Georgia Physician if not on ER/EHR B. Patient's Florida Primary Care Physician (others) C. Patient's Health Plan and/or other data sources  <b>OR</b> Simple email (or form) containing patient demographic information and situation Pushed to B or C
2. Provider, Payer or other Data Source submits current clinical status of patient including: - Medication List - Problem List - Provider List - Allergy List - Other data as available.	Health Plan or other data source (Patient's Florida Primary Care Physician ) Clinical Status of Member/Patient (PDF/C-CDA/Other attachment) <b>Direct Message</b> Pushed to: A. Georgia Acute Care Emergency Facility B. Rendering Georgia Physician if not on ER EHR C. Patient's Florida Primary Care Physician (and others)  NOTE: Remember to inquire about a Patient Personal Health Record (PHR)

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## Acute Care Emergency Via DIRECT

Workflow	Data Flow
3. Patient blood pressure is mildly elevated, labs and radiology results are normal.	Information is collected and entered into the ER EHR.
4. Notification of HL7 events and reports are forwarded.	HL7 Reports (ORU) <b>Direct Message</b> Pushed to: A. Rendering Georgia Physician if not on ER EHR B. Patient's Florida Primary Care Physician (and others) C. Patient's Health Plan (where applicable)
5. The patient can't recall when his last tetanus shot was given.	Information is collected and entered into the ER EHR.
6. The Georgia ER queries the FL-HIE via the Nationwide Health Information Exchange for the patient's summary record document to review the patient's immunization and other clinical history <b>or</b> licensed Florida providers could access the Florida State Immunization Registry (FL-SHOTS) online.	Acute Care Emergency Facility could use A. Leverage the National eHealth Exchange to connect to the Florida HIE – Patient Look-Up Service (estimated Q1 2014) B. Current capability such as licensed Florida providers accessing Florida Shots Registry online

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## Acute Care Emergency Via DIRECT

Workflow	Data Flow
7. After review of the document, it is determined there is no record the patient had a tetanus booster. Patient receives stitches and is given a tetanus booster.	Information is collected and entered into the ER EHR.
8. The patient is discharged and the Emergency department systems generates a HL7 ADT Message.	HL7 Discharge (ADT) or C-CDA <b>Direct Message</b> Pushed to: A. Rendering Georgia Physician if not on ER EHR B. Patient's Florida Primary Care Physician (and others) C. Patient's Health Plan (where applicable) D. Patient's PHR (where available)
9. The Emergency Facility system generates an ORU summary of studies and a patient summary health record document, and a discharge summary document.	HL7 ORU Summary Studies and/or Patient Care Summary (CCR, CCD or C-CDA) and/or PDF Plan of Care or other Reports <b>Direct Message</b> Pushed to: A. Rendering Georgia Physician if not on ER EHR B. Patient's Florida Primary Care Physician (and others) C. Patient's Health Plan (where applicable) D. Patient's PHR (where available)

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## Call to Action

- Find out where your organization is in its HIE implementation.
  - Patient Look Up and Direct Messaging services.
- Establish outreach campaign to encourage obtaining a Direct Secure Messaging account in your organization.
  - Providers, hospitals, health plans, first responders, ESF8 and other state disaster preparedness resources who need to securely obtain and share patient health information.
- Identify and sign-up health data sources such as providers (EHRs), hospitals, health plans, pharmacies, labs and others.
- Encourage patient PHR adoption and use.
  - Health plans and others provide these to members.

2013 Preparedness, Emergency Response, and Recovery Consortium

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## Direct Secure Messaging

- Website: [www.florida-hie.net](http://www.florida-hie.net)
- Email: [FLHII@ahca.myflorida.com](mailto:FLHII@ahca.myflorida.com)
- Contact us by phone:
  - Walt Culbertson, Technical and Operations Lead @ 904-651-1805
  - Pamela King, Outreach Coordinator @ 850-412-3762



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## Citations:

- Baner, A. Rizk, S. Bailey, R. et al. "ONC State Health Policy Consortium Project: Health Information Exchange in Disaster Preparedness and Response." *Prepared for the Office of the National Coordinator for Health Information Technology*. Research Triangle Institute. July 2013
- Stevens, Lee. "Disaster Preparedness and Health Information Exchange." *Health Buzz*. September 2012. Retrieved June 28 from <http://www.healthit.gov/buzz-blog/ehr-case-studies/disaster-preparedness-health-information-exchange/>



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