

# TRIBAL HEALTH ORGANIZATIONS INTEGRATING NEXTGEN (THOIN)



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Presentation to  
Indian Health Services(IHS)  
Information Systems  
Advisory Committee (ISAC)

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# Why are we here?

- Provide information to Indian Health Services Information Systems Advisory Committee
- Tribal Health Organizations Integrating NextGen (THOIN)
- GPRA Performance Measures, DM Audit, Immunizations and NextGen Update
- Next Steps for THOIN





THOIN BEGINNING

*got* **EHR?**

# GRANT SPONSORED

- **June 27 and 28, 2007.** Tribal NextGen (NG) Users meeting hosted by CRIHB - funded by Tides / AHRQ grant,

- **Goals For Meeting.**

- Networking with current NG users/interested NG users. Including EPM/EMR use of NG,

- Share information on EHR implementation with other users and NextGen Representatives.

- Form a Tribal NextGen Users Group to bring a voice to NG on pricing, culturally educated trainers, and other concerns unique to Indian Health clinics.

# NextGen User Meeting

## Attendees

### California

- Colusa Indian Health Clinic
- Shingle Springs Rancheria
- Tule River Indian Health Project
- MACT Health Board, Inc.
- Redding Rancheria Tribal Health
- Warner Mountain Indian Health Project

# NextGen User Meeting

## Attendees

### Northwest - Central

- Utah Navajo Health System, Utah
- Port Gamble S'Klallam Tribe, WA
- Puyallip Tribal Authority, WA
- Benewah Medical Center, ID
- Coquille Indian Tribe Health Center, OR
- Shakopee Dakota Clinic, Mn

# NextGen User Meeting

## New members following meeting

- Fond du Lac Band of Lake Superior Chippewa, MN
- Prairie Band Potawatomi Health Center, KN



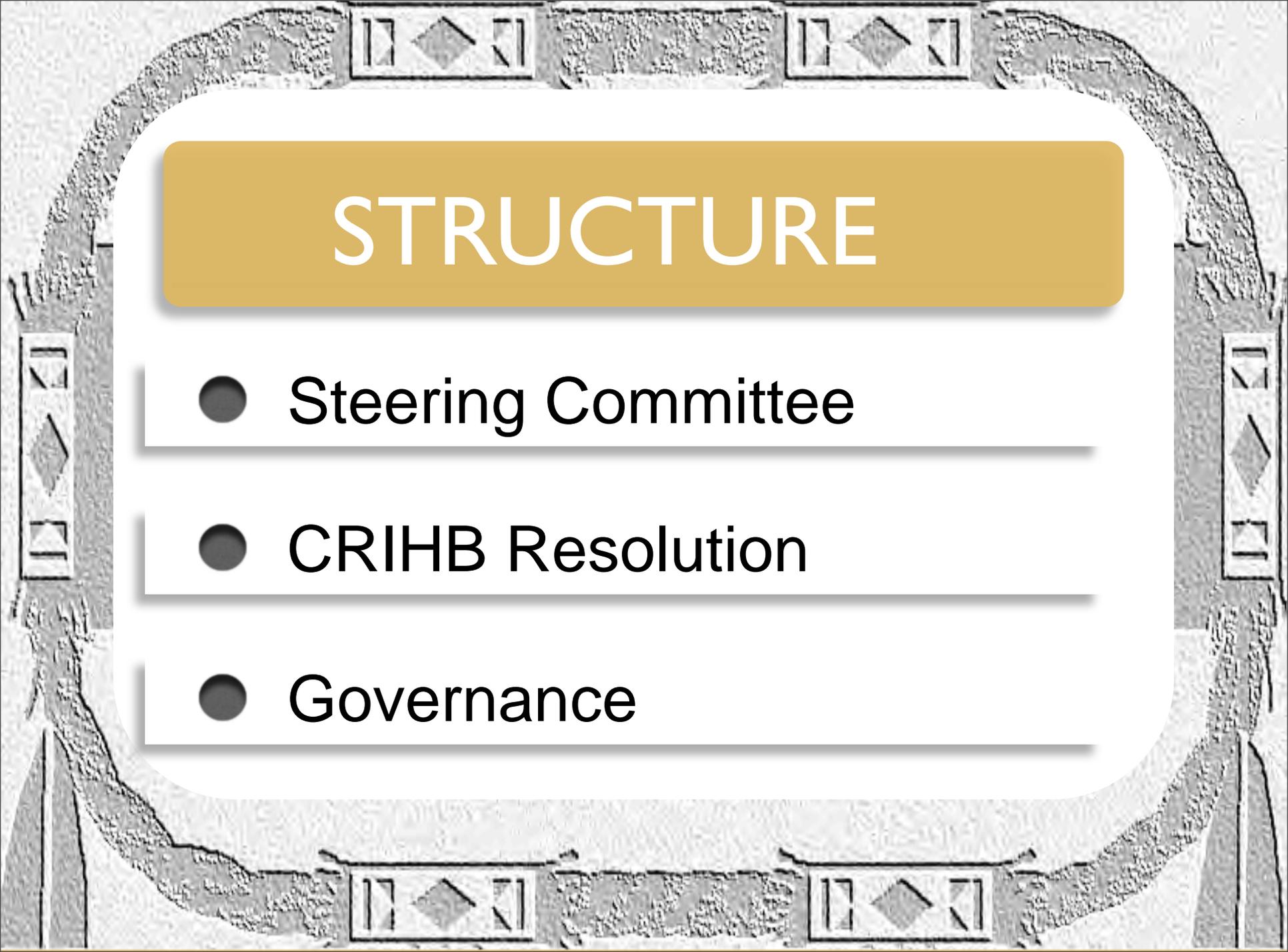
# GOALS

- Networking between CRIHB, NextGen, Tribal Health Organizations and Indian Health Services
- Cost effective access for tribal health organizations seeking NextGen EHR
- Culturally appropriate NextGen trainers
- Development of American Indian Performance Measure NextGen reports
- Develop governance for THOIN members

# MISSION STATEMENT

*Tribal Health Organizations Integrating NextGen* (THOIN) promotes and supports the use of electronic health systems for the advancement of wellness among American Indian/Alaskan Natives.

The purpose is to provide formal representation for tribal healthcare facilities between THOIN, NextGen and other related agencies.



# STRUCTURE

- Steering Committee
- CRIHB Resolution
- Governance



# MEMBERSHIP

As of November 5, 2007

Tribal Health Programs ....	14
States .....	7
Members .....	78

# STATES REPRESENTED

CALIFORNIA	OREGON	IDAHO
KANSAS	MINNESOTA	UTAH
	WASHINGTON	

# THOIN ACTIVITIES

- **Monthly phone conferences** - hosted by different members.
- **Formed steering committee**; UIHS, Puyallup, and Shakopee develop goals and objectives of the group,
- **Develop Memorandum of Understanding (MOU)** with NextGen. Key points; Preferential pricing and sharing of licenses,
- **Cultural training** for NextGen staff trainers,
- **Focus on tribal issues** at NextGen Annual Conference and software development input from tribal providers.

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# EVENTS

2007 NextGen Users Group Orlando, FL  
THOIN sessions

2008 NextGen Users Group Tennessee  
'Specialty' sessions

# Performance Measures

As of April 2008

- NextGen GPRA Report
- Indian Health Service provided
  - NextGen will create 'locked' report
  - Estimated release date



# Performance Measures

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- Diabetic Audit - Epi-info
- Immunizations
  - Quarterly
  - Two year old
  - Adolescent
- National Data Warehouse
  - Registration and Encounter Exports



# Contract Health Services



- Module created by CRIHB through NextGen Contract Health Services (CHS)
- Provides referral and fiscal tracking
- Interfaces with NextGen electronic medical record

# NEXTGEN UPDATE

**Charles W. Jarvis**

Assistant Vice-President Healthcare Industry  
Services and Government Relations

NextGen Healthcare Information Systems

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## About NextGen Healthcare

- Provides integrated electronic medical record, practice management & patient communication systems for the ambulatory care market
  - Headquarters in Horsham, PA and Atlanta, GA
  - Well funded, publicly held company, (NASDAQ: QSII)
  - 35,000+ providers now licensed to use NextGen.
  - Company in top 2% of NASDAQ listed companies.



## **NextGen Mission Statement**

- Provide the best ambulatory care information systems & service in the world.
- Achieve the gold standard of customer satisfaction.
- Help customers improve care and reduce costs.



## **Awards and Accolades**

### **Innovation Award: Disease Surveillance, MS-HUG 2008**

Award Partner: Medical College of Wisconsin

### **Innovation Finalist: Ambulatory EHR, MS-HUG 2007**

Award Partner: Crystal Run Healthcare

### **#1 EHR Functionality Rating, AC Group 2007**

Top ranking in multi-specialty, community health records, FQHC, large, mid-size, and small practices categories

# NextGen

**1,500+ customers representing 35,000 + providers**



# NextGen EMR



NextGen EMR: Joe Dokes - [06/25/2007 02:24 PM : "Master Im"]

File Edit Default View Tools Utilities Window Help

Main Office Barclay, Joseph MD

Exit Save Clear Delete Patient History Inbox FAX Appx Close

**Patient:** Joe Dokes **Age:** 73 **DOB:** 03/16/1934  
**Current Provider:** Joseph Barclay MD **Gender:** Male **Current Encounter:** 06/25/2007

New patient  Established patient

**Reason(s) for visit** **Brief Visit** **Chronic Problem List** **Add new problem**

Reason(s) for visit	Brief Visit	Chronic Problem List	Add new problem
cough	F/U	Chronic Problem	Code
headache	F/U		
	F/U		
	F/U		
	F/U		

**Specialty:** FP **Visit Type:** Office Visit **Historian:** self

**Referring MD | PCP Info** **Alerts** **Patient Service Info** **Add to today's assessments** ?

**Vitals** **Add New Vital Signs** **Expand Vital Signs**

Date / Time	Temp F	Temp C	BP	Pulse	Rhythm	Respiration	Ht In	Ht Cm	Wt Lb	Wt Kg	C
06/25/2007 02:24 PM	98.4		123/67	67		18			200.00		di

**Medications**  No Medications **Comment** **Allergies**  No Known Allergies **Comment**

Medication	Dose	Sig Codes	Start Date	Stop Date	Ingredient/Allergen	Brand Name
AMOXICILLIN TRIHYDRATE	500MG	2CAP PO Q12H	06/25/2007	//		
ETHINYL ESTRADIOL/DROSPIRENON	0.03-3MG	1T PO QD	//	//		
ACETAMINOPHEN	325MG	2T PO Q6H	//	//		

**Health Monitor:** **Set Disease Management Protocols** **Tobacco User:**  yes  quit

Physical Exam	Due:	Tetanus	Due:	Eye Exam	Due:	ALT/AST	Due:
Physical Exam	06/25/2007	Tetanus	06/25/2007	Eye Exam	//	ALT/AST	//
Lipid Panel	06/25/2007	PSA Test	06/25/2007	Foot Exam	//	CPK	//
Colonoscopy	06/25/2017	Abdomen Screen	//	HgbA1C	//	Urinalysis	//
Sigmoidoscopy	06/25/2012			BMP Fasting	//	Urine Micro	//
FOBT x3	06/25/2007			EKG	//	TSH	//
Influenza Vac	06/25/2007			Stress Test	//	PFT	//
Pneumo Vac	06/25/2007			Echocardiogram	//	Chest X-ray	//

**HOME**  
 Demographics  
 Record Vital Signs  
 Nurse Documentation  
 Chart Summary  
 View Results  
 Allergies  
 Immunizations  
 Past Medical History  
 Family History  
 Social History  
 Health Maintenance  
 HPI / Problem List  
 Review of Systems  
 Physical Exam  
 Procedures  
 Assessment  
 Disease Management  
 Plan / Lab / OS / Diag  
 Document Library  
 E&M Coding

**Coumadin**  
 Adult Office Visit  
 Nutrition Assessment

Preview Offline

06/25/2007 02:24

06/25/2007

# E-Prescribing at NextGen



- GoldRx certified by SureScripts. Award based on prescriber and rx quantity, solution quality and implementation processes.
- e-Rx capabilities embedded into EMR workflow resulting in higher adoption of e-Rx

# Disease Management

NextGen EMR: Arthur Sweet - [12/08/2004 07:51 PM : "Diabetes"]

File Edit Default View Tools Utilities Window Help

Main Office Cortez, Albert T MD

## Diabetes Flwsheet

Diabetes Mellitus  Type 1  Type 2

### To be Done EACH VISIT

Height  in  cm    BP Goal for diabetes mellitus    Syst 125    Diast 75  
 Weight  lb  .00 kg    BP Sitting 140    90  
 BMI     Pulse

BP Elevated: Click to go to HTN Flwsheet

Smoking  
 Smoker  Yes  Never  Former  
 Counseling  Yes  No  NA  
 Pharmacologic  Yes  No  NA

Foot Examination  due     Order  Completed  Excluded

### To be Done QUARTERLY

Hemoglobin A1c  due     Order  Completed  Excluded

### REFERRALS

Dilated Eye Exam      Order  Completed  Excluded  
 Fundoscopic Photo  due     Order  Completed  Excluded  
 Diabetes Center      Order  Completed  Excluded  
 Endocrinologist      Order  Completed  Excluded

### SELF-MANAGEMENT

Does patient possess knowledge of diabetes and its management?  
 Yes  No  N/A  
 Does patient have ability and willingness to enact treatment plan?  
 Yes  No  N/A  
 Does patient have the self-management skills to manage diabetes care?  
 Yes  No  N/A

### To be Done ANNUALLY

Lipid Panel  due     Order  Completed  Excluded  
 Fasting  Yes  No  
 Total Cholesterol   
 HDL-C   
 LDL-C   
 Triglycerides

Urine Protein  due     Order  Completed  Excluded  
 Urinalysis (Dipstick)  due     Order  Completed  Excluded  
 Microalb (Dipstick)  due     Order  Completed  Excluded  
 Microalb (quant)  due     Order  Completed  Excluded  
 Creatinine Clearance  due     Order  Completed  Excluded  
 Pneumovax  due     Order  Completed  Excluded  
 Influenza  due     Order  Completed  Excluded

### DRUG THERAPY

Insulin     Oral Agents

Aspirin Use  due  
 Prescribed  
 Actively taking aspirin  
 Not prescribed (medical reason)  
 Not prescribed (patient reasons)  
 Prescribe Aspirin Today  
 Aspirin 81 mg PO one daily  
 Aspirin 325 mg PO one daily

Comments

OK    Cancel

Status    due    due    ordered    due

Print Document

Ready    03/31/2005



Our commitment to the community health, rural health and Indian Health: over 150 FQHCs, Rural Health and Indian Health Centers with Clinical Measures Reporting

A Director of Community Health and Indian Health-Nancy Team, based in Atlanta Georgia



**We value partnering with our community customers:**

- **Behavioral Health templates developed with Dr. Lopez at Lynn Community Health, Lynn Massachusetts**
- **Ryan White HIV data fields developed with PTSO, Seattle, Washington**
- **Grant opportunity notification and assistance**



## The Funding Assistance and Grants Center Objectives

- To Maintain and Continually Enhance a Guide to the Funding Sources available to our Clients and Prospective Clients to help Procure Health Automation Systems.
- To Develop Unique Partnerships that Result in New Funding Sources Being Created for Health Automation



Director- Edna Boone

The Only Program of its kind in the HIT Provider  
Community

Results from 2005-present:

Over \$25 million for clients- to spend as they  
need.

## Examples:

- \$3,500,000 to a Client from a State Grant
- \$3,000,000 to a Client from a State Appropriation, Matching Funds and QIO support.
- \$1,500,000 from HRSA to implement automation in their CHC consortium.

**We use HIT as a means to better quality care-not as the end in and of itself.**

# NEXT STEPS

- Staff for THOIN
- THOIN group meeting July 9 - 10 , 2008
- Complete performance measure reports using NextGen and IHS GPRA
- IHI & IHS Chronic Care Initiative and Tribal Health Organizations with NG

# In Summary

- Tribal Health Organizations Integrating NextGen (THOIN)
  - Created to help tribes using non-RPMS EHR's
- GPR Performance Measures, DM Audit, Immunizations and NextGen Update
  - Assist tribal health organizations using NextGen to provide standardized data that will be aggregated into National reports to congress.
- Next Steps for THOIN
  - Listen to the needs of tribes using NextGen EHR and respond through networking, collaboration, and innovation to improve the healthcare outcomes of native people.

# Questions?

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