Darticipale in

THE HEALTH IT MODERNIZATION PROGRAM AWARENESS SURVEY









Tribal Consultation and Urban Confer PATH EHR Scope and Capabilities

August 7, 2025

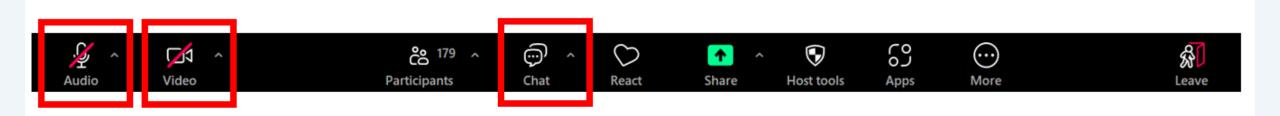
Indian Health Service
Health Information Technology
Modernization Program



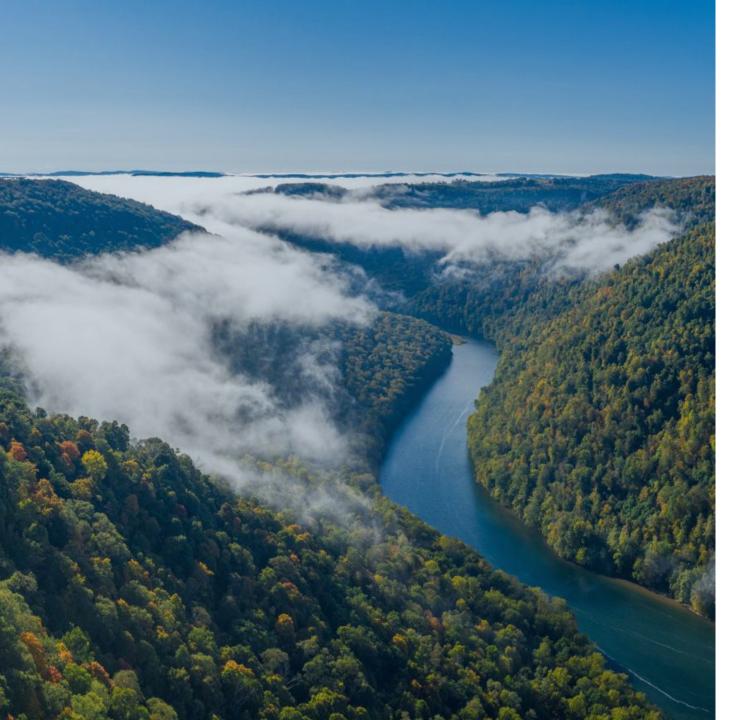
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- If you lose connectivity during the session, simply re-click your access link to re-join the meeting
- If you experience technical difficulties, send a note using the chat box on the bottom menu bar we will assist you from there



Enjoy the session!





Opening in a Good Way

Rebecca Liberty

Ioway Tribe of Kansas and Nebraska

Rules of Engagement



- Active participation is welcome from tribal and urban Indian organization representatives only
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Agenda

Health Information Technology (IT) Modernization Overview & Updates	Mitchell Thornbrugh Chief Information Officer	1:40 - 1:45 p.m. ET
Enterprise Collaboration Group (ECG) Update	Dr. Howard Hays Chief Medical Information Officer	1:45 - 1:50 p.m. ET
Modernization Focus: PATH EHR Scope and Capabilities	Jonathan White GDIT Clinical Informatics Lead Dr. Thomas Mahoney Oracle Director and Healthcare Executive	1:50 - 2:10 p.m. ET
Open Dialogue	Jeanette Kompkoff Director of Division of Health Information Technology Modernization and Operations	2:10 - 2:50 p.m. ET
Upcoming Engagement Opportunities	Kimberly Shije DHITMO Organizational Change Manager	2:50 - 2:55 p.m. ET
Closing	Mitchell Thornbrugh Chief Information Officer	2:55 - 3:00 p.m. ET



Health IT Modernization Overview & Updates

Mitchell Thornbrugh
Chief Information Officer

PATH EHR Overview





PATH EHR uses Oracle Health technology to offer a secure, scalable, and configurable solution to support high-quality health care delivery across multiple organizations.

Modern Commercial Solution

Provides a proven configurable system with optimized workflows for patient care delivery

Cloud-Hosted and Centrally Managed

Supports the logical configuration of organizations into a single, secure, and scalable cloud-hosted infrastructure for PATH EHR

Comprehensive Support Services

Includes implementation, new functionalities, issue resolution, enterprise application support, and secure cloud management

IHS and Lawton Service Unit Collaboration



The Health IT Modernization Program team collaborated closely with leaders and staff across the Lawton Service Unit to build relationships, discuss upcoming deployment activities, and understand site-specific needs.

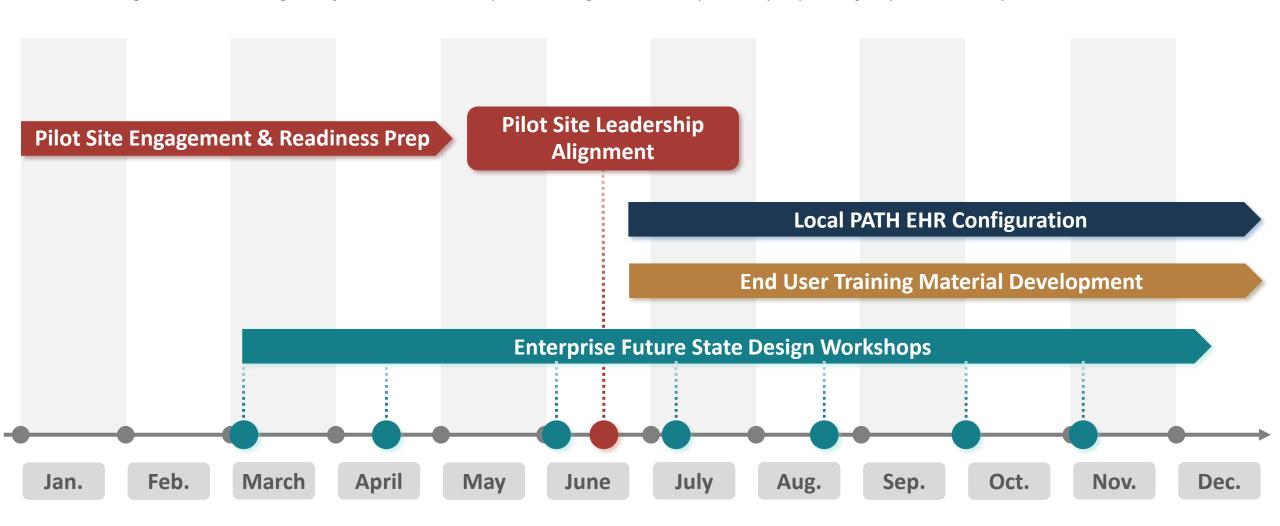




2025 Program Timeline



During 2025, the Program focuses on Enterprise Design Workshops and prepares for pilot site implementation



FY25 Recent Activities



Activities Updates



Enterprise Design Workshops

Hosted four enterprise design workshops, continued the iterative design approach, guiding participants through the design and build of future-state workflows



Site Leader Kick-off

Hosted Lawton Service Unit Leader Kick-off on June 10 to begin preparing for PATH EHR implementation



Current State Review

Held from June through August, the CSR is a combination of hybrid and on-site assessments that analyze a pilot site's operations and business processes to inform future implementation activities



Pathway to PATH

Held in Lawton, OK on July 30-31, the event provided attendees with the opportunity to connect with Program staff and learn more about the modernization effort



Enterprise Collaboration Group (ECG) Update

Dr. Howard Hays *Chief Medical Information Officer*

Enterprise Collaboration Group



The ECG is comprised of expert end-users of PATH EHR, drawn from IHS and participating tribal/urban Indian organizations, to:

Ensure that inputs for PATH
EHR configuration and
change management are
coming from actual users of
the solution

Prioritize patient safety and quality health care by building best practices into PATH EHR workflows, decision support, etc.

Address accreditation requirements to minimize risk of adverse findings

15 ECG Domain Groups meet regularly during Enterprise Design Workshops to consider recommendations for PATH EHR configuration, based on their expertise.

ECG Membership

Structure and Composition



ECG Executive Committee

Standing Members



Clinical and administrative leaders at IHS headquarters 5 Standing Members

Rotating Members



Chairs of Domain Groups, two-year terms

15 Domain Group Chairs

Domain Group Members

(I/T/U, two-year terms)



Domain-appropriate SMEs drawn from I/T/U tenants on the enterprise EHR solution

98 Domain Group Members

ECG Activities Across the Lifecycle



Pre-Enterprise Design

- Key Design Decisions:
 Regular meetings to discuss vendor-neutral EHR design choices before detailed implementation
- Domain Preparation:
 Virtual sessions for Domain
 Groups to understand
 processes, procedures, and
 review design workbooks

Enterprise Design

- Design Workshops:

 Extensive workshops to
 finalize software packages
 and functional domains
- Core Team Involvement:
 ECG Chairs/Members, CMIO informatics and DHITMO staff meet regularly with vendor contractors to inform design decisions

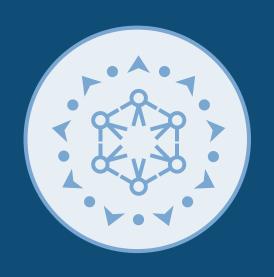
Post-Enterprise Design

- Ongoing Reviews: Regular
 Domain Group meetings to
 handle change requests,
 regular updates, and system
 upgrades
- Executive Oversight: The ECG Executive Committee will adjudicate escalated design issues and crossdomain changes









Modernization Focus: PATH EHR Scope and Capabilities

Jonathan White, GDIT Clinical Informatics Lead

Dr. Thomas Mahoney, Oracle Director & Healthcare Executive

Consultation and Confer Questions



1 What clarification do you need on PATH EHR capabilities?

What potential challenges do you foresee for staff or patients in implementing PATH EHR?

What capabilities and features of PATH EHR are most important to your organization?

A Single Patient Record in PATH EHR

Multi-tenancy allows multiple organizations to share a single software solution while keeping data secure.



Benefits

- Single patient health record
- Care coordination
- Sustainable
- Scalable
- Centralized maintenance
- Robust security
- Training and onboarding support

Key Features and Capabilities of PATH EHR

Comprehensive clinical, financial, and operational solution supporting the end-to-end continuum of care by fully replacing RPMS functionality and more.

CLINICAL

Full Continuum of Care

Robust patient chart application, with a full suite of applications across the continuum of health and care

FINANCIAL

End-to-End Revenue Cycle

From registration to claims and beyond; revenue cycle capabilities are driven from clinical workflows

OPERATIONAL

Monitoring and Backend Support

End-user adoption,
event and error
logging, auditing,
and performance
improvement
capabilities
inherent within
PATH EHR

INTEROPERABILITY

Data Interoperability

in multiple ways and multiple formats, securely, quickly, and through industry-standard methods

REPORTING

EHR and Enterprise-Wide

Pre-packaged reports, ad hoc queries, from single patient record; enterprise-wide analytics based on EHR and external data sources

Value of PATH EHR for Clinicians





Modernized User Interface

Allowing for ease of navigation



Decreased No-Show Rates

Timely appointment reminders allow for earlier cancellations and increased patients presenting



Increased Time with Patients

Less time searching for disparate information and more time delivering care



Improved Efficiency & Interoperability
Industry-standard processes, reduced administrative burden, and better resource utilization



Data-Driven Clinical Decisions

Advanced analytics and population health insights for improved patient outcomes



Better Device & System Integration

Oracle EHR connectivity, supply chain integration, and integrated ancillary systems



Modernized Patient Engagement for Clinicians Increased provider mobility through PowerChart Touch

Value of PATH EHR for Patients







Faster, More Convenient Access to Care *Shorter appointment scheduling time and streamlined telehealth workflows and referral process*



Enhanced Care Coordination

Improved access to records, test results, and referrals through a Closed Loop Referral Process



Increased Patient Safety

Enhanced clinical decision support, positive patient identification, and safety measures



Seamless Care Across Systems *Integrated health data across IHS, tribal, and urban Indian organizations*



Modernized Patient Engagement and User Interface Digital consent forms, automated appointment reminders, and self-service Patient Portal

PATH EHR Solution Set





Inpatient Pharmacy Core Clinicals (EHR)

Emergency Department

Rehabilitation

Radiology

Inpatient Behavioral Health

Lab

Clinical Inventory Management

Surgery & Perioperative

Women's Health



Ambulatory

Core Clinicals (EHR)

Practice Management Outpatient Pharmacy Outpatient Behavioral Health

Outpatient Rehab Patient Portal



Population Health

Population Health Management

Care Management Reporting & Analytics



Revenue Cycle & Health Information Management

Registration

Revenue Cycle Analytics

Scheduling

Acute Case Management Health Information Management

Document Management

Referral Management Patient Accounting

Contract Management



Interoperability

Health Record Management

Public Health Reporting

CommonWell



Technology Solutions

Device Connectivity Enterprise Document Management

Mobility & Connect

Interface Engine



Meet Julie Parrish

- 35-Year-Old
- Married,
 Parent of 2 Children
- Chronic Conditions
 - High Cholesterol
 - Migraine Headaches

Has an upcoming appointment for an annual check-up and to refill her medications

Patient Journey



Before Appointment

1 week before:

Julie logs in to her portal to remind herself, what the date and time are of her upcoming appointment

2 days before:

Julie receives a notification that she can complete pre-check-in activities for her visit

1 day before:

Julie receives an automated reminder about her upcoming appointment and indicates that she intends to attend the appointment



Day of Appointment

Julie checks in at the front desk, staff see that she completed pre-visit information on-line minimizing the amount of intake needed.

Her clinician reviews her chart and notes from the staff before seeing Julie. The system prompts him that Julie is due for a flu vaccine. He also orders a lipid panel to follow-up on Julie's high cholesterol.

During the visit Julie inquires about a "mole" on her arm that she thinks may be changing. Her clinician uses an EHR mobile application to capture a picture of the mole directly into her chart for future reference and comparison.

Julie consents to receiving the influenza vaccine. Staff use bar code medication administration to ensure the medication being administered matches the medication/vaccine that was ordered.

Julie's clinician also notes that her migraines are not well controlled despite aggressive therapies. He enters a referral to neurology to assist with management of Julie's migraine headaches.



Open Dialogue

Jeanette Kompkoff
Director of DHITMO

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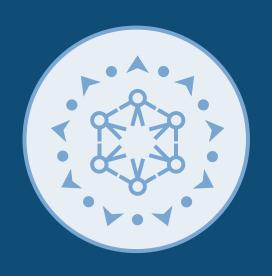
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Upcoming Engagement Opportunities

Kimberly Shije
DHITMO Organizational Change Manager

2025 TRIBAL CONSULTATION and URBAN CONFER



with the Health IT Modernization Program



PILOT SITE IMPLEMENTATION PATHWAY NOVEMBER 6



Tribal Consultation and Urban Confer (TC/UC) sessions provide an opportunity for our tribal and urban Indian organization partners to hear about Program updates from IHS leadership and provide input about modernization-focused topics for continued improvement of patient outcomes across Indian Country.





















Your input will allow the IHS to improve future events, communications, and programming.



Closing Mitchell Thornbrugh Chief Information Officer

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