

1115 SUD Health IT Plan – DY3 (Q4) Update

The state provides the following updates to activities and metrics appearing in the approved HIT Plan. Updates are included in Attachments A1 and A2 included with the report's submission. Data and updates to process measures following submission of this report will be communicated to CMS during future monthly phone calls and quarterly reports.

1. Pg 2 - The state should provide CMS with an analysis of the current status of its health IT infrastructure/"ecosystem" to assess its readiness to support PDMP interoperability. Once completed, the analysis will serve as the basis for the health IT functionalities to be addressed over the course of the demonstration – or the assurance described above. Currently, LDH is no longer pursuing PDMP Interoperability through the SUPPORT Act Funding. This initiative has been placed on hold.
2. Pg 3 – Process measure: Status of contracting as reported by Board of Pharmacy.
3. Currently, LDH is no longer pursuing PDMP Interoperability through the SUPPORT Act Funding. This initiative has been placed on hold.
4. Pg 4 – Process measure: Convene stakeholder group quarterly to develop connectivity plan around PMP into HIE or EHR. Attach minutes. Currently, there is no update for this process.
5. Pg 5 – Process measure: Regular updates at quarterly Board of Pharmacy meetings. Attach minutes. Currently, there is no update for this process
6. Pg 5 – Process measure: Continue ad hoc meetings with CMS and ONC for IAPD guidance to enhance PMP connectivity in either HIE or EHR. Currently LDH is working to identify use cases to assist with HIE Integration. CMS has now mandated the Interoperability and Patient Access Rule, effective July 1, 2021. Meetings are ongoing to address opportunities. LDH plans to update the MES APD when plans are complete. Assessment of PMP plans may be resumed, but not certain at this time.
7. Pg 5 – Process measure: Presented to PMP Advisory Council on 1/10/18. Represent a plan proposal to Advisory Council or Board of Pharmacy as follow-up to garner stakeholder support in prep for 2019 session. Currently, there have been no updates or meetings regarding stakeholder support.
8. Pg 6 – Process measure: During procurement of data warehousing module under modernization, set capability for data match. There is no update to this component at this time. The development of the RFP has not been started.

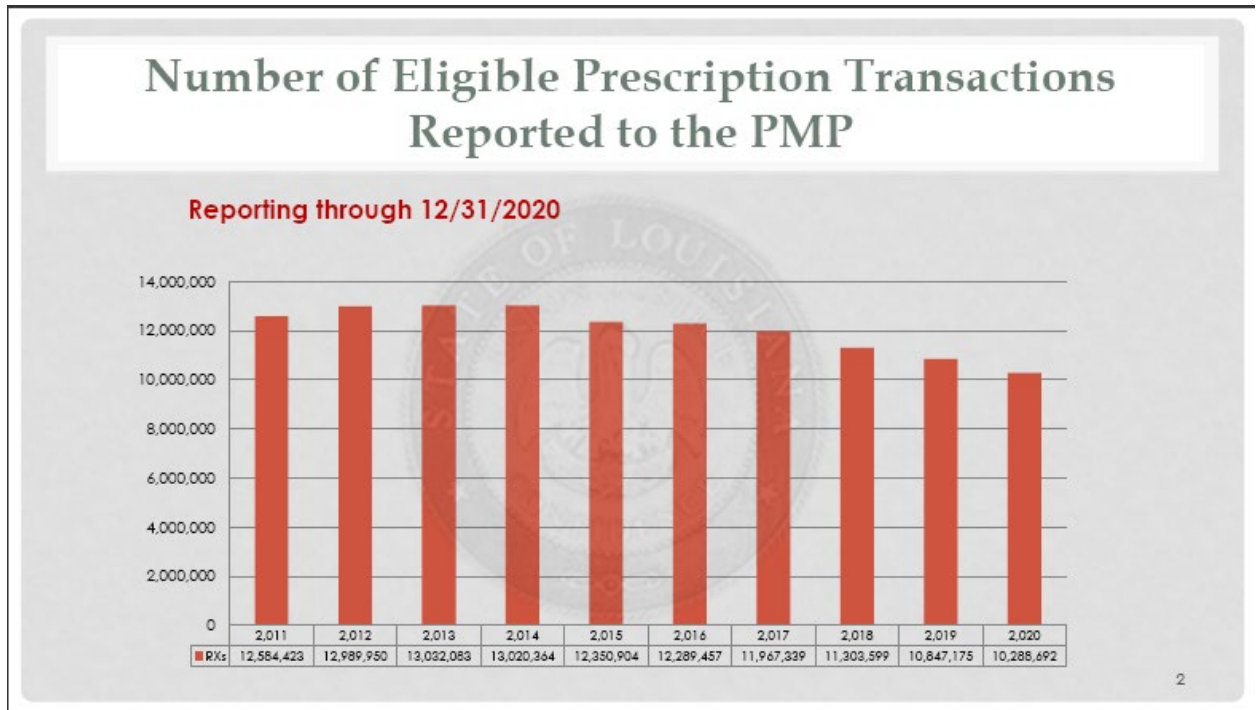
9. Pg 6 – Process measure: During procurement of pharmacy module, create reporting relationship and data feed into warehousing module.
No update at this time. The development of this RFP has not started.
10. Pg 8 – Process measure: Re-procure managed care contracts on timeline.
LDH announced its' intent to develop a new RFP for managed care contracts.
11. Pg 9 – Process measure: Presented to PMP Advisory Council on 1/10/18. Represent a plan to Advisory Council or Board of Pharmacy as follow-up to garner stakeholder support in prep for 2019 session.
Currently, there have been no updates or meetings regarding stakeholder support
12. Pg 9 – Process measure: If legislation does not proceed, we will pursue alternative data tracking internal to Medicaid.
No updates at this time. However, LDH's intent is to track internally as we move forward with the HIE Assessment and other PMP activities.
13. Pg 9/10 – Medicaid data measures
 - a. Opioid prescription utilization trend (recipients, drug name, amount, payments)
 - b. Opioid prescription utilization trend in naïve patients (recipients, drug name, amount, payments)
 - c.
See attachment A2-DY3 (Q4) HIT report. This file contains updated data through December 2020.

14. Pg 10 – PMP data measures
 a. User statistics by provider type

PMP User Stats for 2020 Q4 (10/1/2020 – 12/31/2020)

PMP Role Title - Healthcare Provider	Number of Providers <u>Eligible</u> for PMP Access (as of 09/30/2020)	Number of Providers with PMP <u>Active</u> Access Privileges (as of 09/30/2020)	Number of PMP Requests by Providers through <u>AWARxE™</u> During 2020Q3	Number of PMP Requests by Providers through <u>GATEWAY™</u> During 2020Q3
Physician (MD, DO)	13,380	8,853	443,852	3,711,498
Nurse Practitioner (APRN)	4,038	3,161	177,237	409,686
Dentist (DDS)	2,249	1,520	4,915	529
Physician Assistant (PA)	1,083	818	24,447	48,260
Optometrist (OD)	370	156	4	0
Podiatrist (DPM)	163	108	1,186	0
Medical Psychologist (MP)	95	88	11,431	4,599
Medical Intern/Resident	1,625	1,293	11,156	1,752
Prescriber's Delegate	NA	3,012	197,841	0
Pharmacist (PST)	9,407	4,704	899,992	1,751,008
Pharmacist's Delegate	NA	1,307	82,083	0
Totals	32,410	25,020	1,854,144	5,927,332

b. Eligible transactions reported to PMP



c. Prescriber and Pharmacists

No update at this time.

15. Pg 10 – Process measure: Timeline and progress on RFP re-procurement

Progress: LDH has announced its' intent to develop a new RFP

16. Pg 10 – Process measure: Decide which HIE technology will be utilized as an ADT feed.

Currently, ADT feeds are being handled by the Louisiana Emergency Department Information Exchange (LaEDIE) run by the Louisiana Health Care Quality Forum (LHCQF). There are several organizations within the state that are developing their own ADT feed system. This section will be updated when we receive more information. Currently, there are no changes to this information

17. Pg 10 – Process measure: Establish quarterly standing report for MCOs

No updates at this time.

18. Pg 10 – Data measure – How many ADT feeds are fed at different locations across the state by MCO and providers

Currently, there are 57 hospitals actively providing feeds to LaEDIE. The system provides a daily export to the five Healthy Louisiana MCOs based on their patient lists. The MCOs use this data to provide case management to their recipients.

19. Pg 11 - Data measure: Opioid naïve utilization trend monthly report (compare to cancer/palliative care Rx baseline)

Report included in the attached A2-DY3(Q4) HIT Excel spreadsheet (Monthly Tracking Impact of 7-day Opioid Quantity Limit and Utilization.xlsx).