Health Information Exchange (HIE) Communication Strategies:

Health information exchanges explore communication strategies for consumers, professionals, and providers.

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Summary: Of all HIE's surveyed, the majority used public relations and marketing firms on retainer to handle most of their communication needs. Many have used traditional means of media placement and events to connect and inform their stakeholders of the services they provide. The HIEs who responded identified that holding regular in-person meetings with consumers and professionals had more brand recognition and more were more likely to know them and their services. Those who used social media have found that although the channels provide a direct way to connect with consumers, it has not given the best return on investment, and some HIE's do not use it all.

Introduction

Over the last ten years, health information exchanges (HIE) have had the unique obstacle of conveying what they offer to those who would use their services. As an industry that inherently mixes both healthcare and information technology, creating the right messages for promoting HIE services to multiple target audiences can be both difficult and nuanced.

Conducted through a survey of eleven (11) health information exchanges within the nation, this white paper serves as a report of how some HIEs are connecting to consumers and providers in the communities they serve. Also detailed are the strategies that each organization profiled has determined to be necessary for connecting to its service users. Included are regional or area wide HIEs connecting multiple healthcare entities, but not statewide networks that, in turn, connect multiple HIEs.

Methodology

Research data was collected from participants through a series of questions administered by phone interviews and email correspondence. Participants who responded, and agreed to be interviewed, either verbally answered or submitted responses to the following questions:

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1. How long has your HIE been established?

2. What communities does your HIE serve?

3. Briefly, what are the programs and services that your HIE provides?

4. How well does the community you serve know about your organization?

5. Do you feel that you have a communications/outreach program, at all?

6. What are the main components of it?

7. What in-house and outside resources have you allocated to those areas? (web development, public relations, marketing materials, advertising, social media, other?)
   a. Do you have a communication staff?
   b. If so, how many?

8. Can you give a sense of budget?

9. Which of these areas have given you the best return on investment, for both consumers and professionals?

10. Specifically with social media, what do you think has worked best and least?

11. Do you have separate staff that specializes in engagement and adoption directly with providers?

12. Do you feel that your communication needs are different now than when you first started? If so, how have you shifted communications emphasis and resources?

Profiles of Surveyed HIEs/RHIOs

The following profiles are created from submitted responses to the above questions. These profiles provide insight into where each individual HIE

stands in its efforts to communicate to stakeholders, professionals and consumers.

Colorado Regional Health Information Exchange (CORHIO)

Established in early 2010, the Colorado Regional Health Information Exchange is a state-designated entity that serves the eastern part of the state, with 92 percent of hospitals enrolled in the HIE. CORHIO is a full-service integrated HIE providing:

- Query Based Exchange,
- Results Delivery-Based Exchange
- Direct Messaging
- Image Delivery
- Integration with Public Health.

When asked how well the community served knew CORHIO, they responded that healthcare and health IT professionals in the state know them well. They created patient-focused messaging early on, however focused on a PR approach to generate more interest and awareness in providers during 2011.

CORHIO has an outreach team, which comprises seven staff members who handle marketing and communications. Of the seven members, two focus on marketing and communication needs for CORHIO, while the other five members work on business development and face-to-face interactions with health systems and providers.

"*When we first started, [we were] very focused on awareness building. Now with 3.9 million unique patients in the HIE, everyone knows who we are, and what we do. [Now] it's about helping them with Meaningful Use, and clearly defining our offerings.*"-**Christine Baker, Director of Communication and Marketing, CORHIO.**

For CORHIO, messaging to professionals has been the primary focus of the HIE's communication efforts. Christine Baker, Director of Marketing and Communications for CORHIO, indicated that this focus on just healthcare professionals and providers has contained communication efforts to the following:

- Face-to-face meetings.
- E-mail newsletters.
- Events.

She indicated that focusing on communicating solely to providers and professionals in the region has given CORHIO the best return on

investment for establishing a network of service users that knows who they are and what they do. CORHIE's online presence exists through their website, with minimal use of social media. Baker identified that Twitter and LinkedIN are used only to try to connect to thought leaders in the field. Baker believes that the need for CORHIE's communication efforts has shifted from awareness building to expressing key features of the HIO.

Chesapeake Regional Information System for Our Patients (CRISP)

The Chesapeake Regional Information System for Our Patients (CRISP) is the statewide health information exchange in Maryland and Washington, DC. Founded in 2009, CRISP serves over 8 million patients in the area, and exchanges data with at 47 acute-care hospitals. CRISP provides the following services with its exchanging membership:

- Query tool that permits providers to view patient information (lab, radiology, medication, PDMP, insurance, transcribed report information) through a secure web portal

- Secure clinical email messaging

- ADT/registration information for patient demographics, allergies, and consent status lab results (pathology)

- Comprehensive medication information including PDMP

- Radiology reports

- Transcribed reports (discharge summary and any other available reports).

- Encounter Notifications, (ENS)

Former Vice President of Operations for CRISP, Daniel Wilt, provided that CRISP would use connections through its membership for both professional and consumer communication. The HIE was also promoted through MEDCHI, Maryland State Medical Society, and the Maryland Hospital Association. Daniel responded that the Hospital Association held events regularly that provided information about CRISP to physicians and providers.

Communication to consumers was not originally a priority, but happened through hospital and provider contact with patients, who provided

information about CRISP. Materials and other information about CRISP were then distributed through the hospital association, providers and members who participated with the HIE. Daniel added that as consumer awareness of CRISP grew, the HIE used a small informational advertisement in *Best of Baltimore Magazine*.

According to Daniel during his time there, the communication needs for CRISP had shifted from when the HIE became first established. He provided that the beginning challenges were "getting the [CRISP] name into the marketplace", but as that happened, managing mis-information and opt-out procedures became a new communication need.

Delaware Health Information Network (DHIN)

The Delaware Health Information Network is one the earliest adopted HIE's, established in 1997, and then exchanging ten years later in May 2007. DHIN describes themselves as the "electronic post office and library" offering:

- Query-Based Exchange

- Direct Messaging

- Results Delivery

- Image Delivery

- Immunization Registry

- Cancer Registry

> "As we work together to bring down the cost of healthcare...*[HIE's] need to be more consumer focused.*"-
> **Randy Farmer, M.S., M.Ed.**
> **Chief Operating Officer, DHIN**

DHIN has 100 percent of Delaware hospitals and 1.9 million patients in the HIE, with 800,000 of those, and some internationally. DHIN currently has notification based (ENS) interoperability with CRISP and is looking to connect with other HIE's as it grows. About 44 percent of Delaware residents are covered by plans that support DHIN.

Randy Farmer, chief operations officer of DHIN, indicated that "leveraging" the network DHIN builds through connecting and exchanging is the best way reach professionals, providers, and the general public. However, the HIE uses a variety of communication resources, in addition to organic relationship building to connect to publics of all levels. DHIN's communication strategies include:

- Public relations firm
- Marketing firm
- Social media firm
- Website
- Media interviews
- Advertisements

The engagement and adoption team at DHIN, includes four relationship managers who oversee 150 to 200 separate practices.

Eastern Tennessee Health Information Network (etHIN)

Incorporated in 2005, the Eastern Tennessee Health Information Network serves 19 counties of eastern Tennessee.

As a full-service HIE, etHIN provides the following services to its consumers:

- Virtual Health Record (VHR) - clinical portal
- Clinical Inbox - data push subscription service
- etHIN Direct SX – healthcare only secure messaging
- Full HIE Integration to Physicians' EMR (Bi-directional or uni-directional)
- Immunization Registry (IR) and Electronic Lab Reporting (ELR) - updates, full reports
- Image Gateway – images are available, tied to radiology reports
- Connect Gateway – connection to the nationwide eHealth Exchange

In 2012 and 2013, etHIN employed a communications and outreach effort in the local healthcare community. This effort contained the following strategies:

- In-person sales efforts,
- Articles in local healthcare media,
- Speaking engagements,

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- Involvement in community-wide healthcare initiatives and committees.

In the last quarter of 2014, etHIN contracted with an outside communications firm to redevelop the etHIN website, create a newsletter and other materials, and conducted public relations to enhance etHIN's name recognition in the areas served.

Currently, etHIN expressed that their participation in community wide healthcare initiatives, committees, and speaking engagements at professional meetings have provided good exposure for etHIN. This has delivered the most ROI for professionals according to etHIN.

etHIN does not interact with, nor provide services directly to, consumers. The communication program does not use social. etHIN's communications coordinator manages marketing, public relations, sales, and provider outreach. For engagement and adoption needs etHIN utilizes a part-time staff that performs sales and training roles for their members.

Communication efforts for etHIN have shifted from initially supporting the effort to build the HIE and add data connections. But with little data at the time, there were minimal external communication needs. As data grew within the HIE, the need for marketing and communications efforts did as well. Communications was originally a part-time contracted position, which later became a full-time staff position for the organization.

Great Lakes Health Connect (GLHC)

Since 2009, Great Lakes Health Connect has served the state of Michigan, connecting with more than 120 hospitals. As the HIE for the state, GLHC facilitates the following services for its exchangers and patients:

- Result delivery
- Radiology
- Lab ordering
- Image delivery
- Immunization registry
- Report lab delivery

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- Referrals
- Medical history
- Pricing valuation for Social Security.
- End-of-life action plans storage.

At the time of interview, George Bosnjack, business development manager of GLHC, expressed that the organization was looking to connect more with its general public, having only at this point focused on working with professionals in the field, member health systems, and providers. The communication program of GLHC currently includes:

- A public relations firm

- Marketing firm

- On-staff marketing person

- Writer who coordinates with the firms.

GLHC also has a team of six engagement and adoption team members who work with providers across the state.

Having never paid for advertising, Bosnjack credited GLHC's recognition in the professional community to the efforts of the engagement and adoption team, earned media, and their connection to about 4,000 healthcare providers and hospitals through their exchange database. On line, the HIO employs its website, LinkedIn and Facebook pages.

When asked if the communication focus of GLHC has shifted since being first established, Bosnjack stated that first it was about building identity, and the brand of GLHC, and now it has become about expanding their role in the Michigan healthcare community.

HEALTHeLINK

Serving the eight counties of western New York, including Buffalo and Niagara falls, HealtheLink is the HIE for its region. Incorporated in 2006, and exchanging since 2009, HealtheLink exists to drive adoption of exchange in the state as it provides the following services:
- Patient Query.

- Results Delivery to EMRs through Physicians on Record.
- HR Patient Query image exchange.
- Medication History query functionality.
- CCD format compatibility.
- Provider Alerts through subscription services.
- Medicaid health homes.

Stephen Gates, Senior Manager of Provider Support Services for Health*e*Link explained that communication strategies that Health*e*Link used were:

- Attending health-focused events in the area

- A marketing sub-committee

- Website,

- Social media,

- Google analytics.

Gates spoke of health fairs and related events as instrumental in establishing the use of Health*e*Link's HIE services. He estimated adoption by 70 percent of providers in the region, with about 50 percent of patients consenting to exchange of their clinical information in western New York State.

Health*e*Link's engagement and adoption team of six staff members works with between 100 and 120 practices and providers each. They are supported by an interface team and work with providers on sign up, engagement and active use.

Gates spoke to the focus of the HIE's communications efforts shifting toward value discussion and exchanging with other states as they have infrastructure in place to do so.

HealthShare Exchange of Southeastern Pennsylvania, Inc. (HSX)

HealthShare Exchange of Southeastern Pennsylvania (HSX) is the regional HIE for the five-county Delaware Valley region. Incorporated in May of 2012, HSX provides the following services to its exchangers:

- Direct Messaging

- Encounter Notification Summary (ENS)

- Patient Query
- Discharge/Admission Alerts
- Care team Identification

The communication program for HSX consists of:

- Events
- Webinars
- Social media
- Videos
- Web content
- Research whitepapers

The communication team believes that HSX is increasing awareness within the professional healthcare communities of Pennsylvania, and on a growing national level. HSX continues to direct its outreach program to its board, committees, key contacts at member organizations, and both trade and general media. The team also continues to develop educational content for consumers to explain the services of HSX.

The best return on investment for HSX has been through direct outreach to members and providers. As a component of this effort, HSX's engagement and adoption team of two staff members and one intern handles direct interactions with providers and member health systems.

In an effort to be more connected, and visible to both professionals and consumers, HSX exists on popular social media platforms. These include LinkedIn, Instagram, Facebook, YouTube, Vimeo and Twitter. Twitter has been an important tool for weekly messaging, where the goal is to reach thought leaders and health IT decision makers, to promote events where HSX staff are present, and to connect with other HIE's.

In addition to expanding its toolkit of promotional content and media, the communication efforts for HSX have changed since the HIE was first established. In the beginning, it was focused primarily on branding and creating its presence as a regional HIE where there was not one before. Now, communication efforts have been retooled to clearly defining the

services and benefits that HSX offers for members, providers, and consumers.

Keystone Health Information Exchange (KeyHIE)

Founded in 2005, Keystone Health Information Exchange has been exchanging with providers in the counties of central and northeastern Pennsylvania. As a full-service HIE it provides the following services with exchangers:

- HIE Provider Portal,
- "MyKey Care" (HIE Connected Patient portal)
- "KEYHIE Transform" for Nursing home and Health agencies
- Clinical Summary to share with providers
- KEYHIE Direct Secure Messaging.

The representatives of KeyHIE who provided the information regarding the HIE's communication strategies reported that the communities they serve are not as aware as they would like them to be of KeyHIE. The exchange has elevated its presence in the community through:

- Newsletters
- Sending staff to attend community events
- Visiting exchanger facilities
- Providing patient portal training
- Annual report to exchanging organizations
- Online informational tool kit

Resources dedicated to their communication efforts include use of a website development firm and two in-house PR and marketing consultants. Face-to-face contact between representatives of the HIE and community members was said to have been the most effective for KeyHIE.

Key HIE has a physician liaison team of eight to ten staff members, who follow up to 50 exchangers each. They do not invest any resources into social media, as their own research has found that it was not effective for their purposes.

HealthShare Exchange
OF SOUTHEASTERN PENNSYLVANIA, INC.

Key HIE initially focused on creating the patient portal and connecting with the systems in which it would be used. Now, it has evolved to tailoring messages and services to each unique audience.

Louisiana Health Information Exchange (LaHIE)

The Louisiana Health Information Exchange is a single HIE serving the entire state of Lousiana since 2007. Exchanging since 2011, LaHIE has 239 signed participant organizations, houses more than one million unique patient records and processes more than 58 million transactions per month. LaHIE became the state designated entity, in 2009, to lead the planning and implementation of health IT grants made available by the American Recovery and Reinvestment Act (ARRA).

LaHIE exchanges with hospitals, providers, school health centers, home health agencies, and other healthcare-related organizations in the state. It provides the following services to participants through its exchange:

- Master Patient Index

- Provider Registry

- Record Locator Services

- User identity management and authentication

- Audit trail

- Consent management

- Patient Portal

- National exchange gateway

- Prescription drug monitoring

- Insurance eligibility verification

- Image viewing

"Our primary objective in 2015 will be consumer engagement, providing outreach, and education at the community level to ensure that Louisiana residents are aware of and prepared to use health IT to take an active role in their health and health care."-**Jamie Martin, Director of Communication and Marketing, LaHIE**

Jamie Martin, Marketing and Communications Manager for the Louisiana Health Care Quality Forum, reported that LA HIE conducts outreach to both healthcare providers and consumers. LaHE has high name recognition within the healthcare community and providers in the state. The HIE will begin reaching out to consumers in 2015.

Martin described that LaHIE uses an integrated approach that consists of print, broadcast and digital media outreach. This includes:

- Onsite and virtual education/training

- Videos

- Print and digital marketing materials

- Advertising

- Public relations

- Social media

- An organizational blog

- A monthly electronic newsletter

- Website

LaHIE's website development is contracted to an outside developer, but the site content is managed, maintained, and produced by the in-house communication team. This team consists of a director, a manager, a graphic designer, and a project specialist. Martin identified both Twitter and the organizational blog as giving them the most return on investment. They also find the social media platforms of Facebook, YouTube, and LinkedIn to be valuable.

LaHIE's engagement and adoption services are tasked through their sales and technical staff that work directly with providers in both areas. The marketing and communications staff provides additional support services to assist providers in achieving patient engagement goals. Martin provided that LaHIE's communication focuses have shifted from more on the healthcare provider/organization side, to the consumer side with the launch of consumer-facing tools such as a patient portal.

North Carolina Health Information Exchange

North Carolina Health Information Exchange is the statewide HIE based in Raleigh, NC. Incorporated in April 2010, it provides the following services to its consumers:

- NC Direct Messaging
- Immunization Registry

- Electronic Laboratory Reporting (ELR)
- Transitions of Care
- NC Central Cancer Registry
- Specialized Registry Reporting
- Electronic Clinical Quality Measures (eCQMs)

NC HIE has developed a comprehensive communication program with goals and measurable objectives to increase both provider and patient awareness. The plan incorporates evaluation methods, including conducting a survey among more than 400 providers in North Carolina to measure awareness of NC HIE and better understand provider needs around health information exchange. The program outreach program includes:

- NC HIE e-News: a monthly e-newsletter to approximately 400

  stakeholders.

- Social Media through Twitter, Facebook, LinkedIn.

- Press Releases

- Blog Posts

- Infographics/Animation

- Earned Media Coverage

At the time of interview, Morgan Servie, Public Relations and Communications Manager for NC HIE, expressed that the HIE was working with a large university in the area to better understand patient awareness and attitudes. Servie responded that the collaboration with the university would include focus groups that gauge attitudes towards HIEs, as well as feedback on NC HIE's current communication collateral available to patients.

NC HIE has an outreach calendar for the course of the year with events happening in the North Carolina healthcare community. The HIE has an outreach team that typically speaks and/or exhibits at three to four events per month.

Nebraska Health Information Initiative (NeHii)

Exchanging since 2009, the Nebraska Health Information Initiative (NeHii) serves the entire state of Nebraska. As a full-service HIE, the initiative has over 27 hospitals, accounting for 52 percent of beds in the state, connected to the exchange. NeHii provides the following services for their exchangers:

- Lab test results
- Radiology results
- Transcription reports
- Immunization information
- Problem lists
- Discharge information
- Prescription drug monitoring

Deb Bass, CEO of NeHii, stated that the Omaha area knows the HIE well, but the western part of the state does not. She continued that one of the initial tasks when the HIE began was to invest in marketing and establishing brand awareness. However, funding the marketing initiative has been a challenge for the organization.

"When we first started there was a myth that consumers were concerned about health information exchange, however, the opt-out rate for the state is less than 3%. Consumers are embracing what we have done."- **Deb Bass, CEO, NeHii**

In addition to their website, the consumer advisory board council gives information to consumers about their function as an HIE and provides information for opt-in/opt-out. NeHii's communication focus has continued to be about establishing the exchange's brand in the state with consumers.

Rochester Regional Health Information Organization (RHIO)

Exchanging since 2009, Rochester Regional Health Information Exchange serves a 13-county area in the Finger Lakes region of New York State, which has a population of 1.4 million people. RHIO provides:

- Clinical query viewer
- Electronic results delivery
- Alerts (event notification)
- Image exchange
- Subscription services for IDNs/ACOs

- Consent management (opt-in consent at provider level)

Jill Eisenstein of RHIO says that the exchange has actively marketed their services in the healthcare community and to consumers. Approximately, 70 percent of regional physicians participate, with currently more than 1.2 million unique patients who have provided RHIO consent for least one-provider organization.

Since RHIO started, outreach to both professionals and consumers have been a primary focus. In the first few years, the organization focused on patients and the general community, due to the consent policies of the state. Now they focus more on provider communications, healthcare/HIT industry media, and social media. A deployment staff visits providers throughout the region for training and informal communications.

> "I think the key is in identifying who you are trying to target in these communications [social media]. We focus on industry experts."-**Jill Eisenstein, Assistant Director, RHIO**

Eisenstein responded that she devotes a quarter of her time as Associate Director to managing communication. The main components of their communication programs are:

- Consumer and Provider websites
- Monthly newsletter
- Provider specific materials, including "sell sheets" detailing services
- Press releases to regional media
- Annual Report
- Regional speaking engagements
- Sponsorship of regional professional events (Medical Society, HIMSS, etc)
- Social media

Eisenstein reported that having a firm assist in communication efforts has been one of the biggest returns on investment for the HIO, with the caveat that having someone to direct the activity on staff is best. RHIO is looking to expand consumer-focused communication as the year continues.

Discussion

From the profiles of featured HIE's, a majority have discussed finding significant value using the following tactics in their outreach programs. These are ordered from most mentioned:

- Websites
- Public Relations/ Marketing Firms
- Events
- Newsletters
- Social Media
- Advertising

During the interviews, many HIE's responded that "face-to-face meetings/interactions" with providers were valuable to their communication efforts. Because "face-to-face meetings/interactions" are not mediated communication tools, it has been included here as a note to represent what many HIE's felt were valuable in having staff attend meetings in their respected healthcare communities.

Target audiences for the communication programs of each HIE has varied. Some like DHIN, HSX, and NCHIE find value in creating outreach efforts specific for consumers, as well as professionals. Others like NeHii, KeyHIE, and CORHIO, are looking to continue their current strategies with professionals first, before expanding into consumer outreach.

Many of the HIE's included have referenced their engagement and adoption, E&A, teams as being very effective in outreach strategies for professionals. DHIN, CRISP, and GLHC provided that their connection to their provider membership through engagement and adoption services has been helpful in establishing a presence in their respective healthcare community.

Lastly, the changes in communication for all HIE's surveyed has been from establishing the name, to clearly defining the services offered. All of the HIE's who responded are looking to broaden their communication and outreach for both professionals and consumers, but some are still developing strategies that fit their current priorities. For HIE's like LaHIE, who are at the stage to actively engage consumers, finding the

tools and messaging to do that has become both a challenge and opportunity.

All of the HIE's who responded to the survey identified communications to providers and consumer base to be important for the sustainability of their exchange. What varied between each entity were the methods and priorities set for reaching specific audiences. Many have identified that there is shared responsibility between outside communication firms who handle those needs, and internal tactics such as newsletters.

Sources:

HIE staff interviews 2014-2015