

## **Statement to HIT Policy Committee on Health Plans**

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Thank you very much for the invitation to be here today. I am Julie Klapstein, CEO of Availity LLC.

Availity is a health information exchange connecting more than 150 health plans (1,150 indirect) and more than 60,000 doctors' offices. We currently have more than 600 million annual transactions on our network and are growing rapidly throughout the country. We provide administrative, clinical and financial transactions between health plans, physician offices and hospitals. We are an independent, private company, with a sustainable business model supported almost entirely from health plan administrative and financial transactions. Our transactions are offered at no cost to providers.

Availity is unique in the industry. We are a true multi-payer solution for providers, with a common user look and feel across multiple health plans and multiple transaction types. We obtain mass provider adoption region by region. The best example of our ability to gain mass adoption is in the state of Florida, our founding region.

All hospitals and 95% of physician offices in the state of Florida utilize our portal as well as our other administrative capabilities to exchange information with health plans and with each other. In the past three years, we have implemented the Availity CareProfile®, a provider facing health record, in more than 8,000 doctors' offices and hospitals in Florida. Our

Availity CareProfile health record is used in the smallest, solo practitioner office on up to large, multi-physician offices. In November 2009, we implemented CareProfile for Florida Medicaid (Agency for Health Care Administration) so we have multiple private and public health plans' information on the same provider health record. When the patient moves from one plan to another, their history is viewable for up to two years.

We are doing the same thing in other states, all financed by the administrative transactions from multiple health plans.

The primary source of our health data is obtained from claims. The clinically oriented administrative data includes critical information about the patient, including: diagnosis, tests performed, medications prescribed, ambulatory visits and inpatient events. We supplement that information with other sources of data, including lab results. We will support Electronic Medical Records or other clinical modules accessible in the provider office by allowing the information to be downloaded (if the provider chooses) to supplement their in-office record. Alternatively, the provider can just review the record online with a web browser. The information is valuable because it is current, supplements the information the patient reports and gives the provider a much broader history and knowledge base to support meaningful use. The provider knows what happened to their patient in the hospital or other doctors' offices across town. They can avoid duplicate orders and have a medication history, saving time, and improving quality.

There are three key messages I would like to leave you with:

1. **The infrastructure does not need to be built from scratch.**

Deployment and adoption efforts on a new network are time consuming and costly. I recommend that the existing administrative networks used today for claims transactions be utilized for clinical exchange, as well. The new standards for clinical exchange would be utilized as well as the existing HIPAA standards on the administrative transactions. It will be easier later to combine clinical and financial data on the same patient record if the same infrastructure was utilized for both.

2. **Build a sustainable business model.** We don't charge payers or providers for the Availity CareProfile. The financial and administrative transactions pay for the clinical exchange. Claims data is just one source of valuable data but should not be left out of the definition of meaningful use.

3. **Build it for scale.** Our network has unlimited growth and moves transactions in seconds (real time) to thousands of providers/payers. New payers like WellPoint and Blue Cross and Blue Shield of Minnesota are migrating their transactions to Availity without performance impact due to our scalable architecture.

In summary, we believe the evolving standards for information exchange under the "meaningful use" definition are invaluable to the industry. We recommend this definition be expanded to include claims data as a necessary and valuable source of clinical information.