



POLICY OPTIONS IN BRIEF

Option 1: Establish a system to collect and make available to providers all prescriptions dispensed in Virginia (page 10).

Options 2 & 3: Provide access to the EDCC program to correctional facilities, state hospitals, and CSBs (page 14).

Option 4: Make improvements to the EDCC system to help current and new users more effectively use the information (page 15).

Option 5: Direct a plan to develop a consolidated platform to bring together the currently fragmented system of data sharing programs (page 19).

Option 6: Provide grant funding for community providers to gain access to the medical records within large health systems in their communities (page 23).

FINDINGS IN BRIEF

Providers can improve patient care and reduce unnecessary services with access to patient medical records

When providers are able to access a patient's medical history quickly and efficiently, they are able to make better clinical decisions and reduce unnecessary or duplicative tests. To accomplish this goal, the most important pieces of information are a complete prescription history for the patient, and the results of any recent lab or diagnostic tests.

Public programs that share data are meeting some data sharing needs, but require expansion or improvement to be effective

Two primary data sharing programs overseen by state agencies are the Prescription Monitoring Program (PMP) and the Emergency Department Care Coordination (EDCC) program. The PMP is an effective tool to collect and share with providers some prescription data, but is limited to a narrow subset of drugs that present a risk for addiction or over-prescribing. Creating a similar program that includes all prescriptions would address the number one piece of a patient's medical history that providers need. The EDCC program is a useful case management tool to assist individuals who frequently use hospital emergency rooms, but more non-hospital providers need to be added to maximize its benefits.

Multiple, fragmented programs and systems make it difficult for many providers to efficiently share data

There are a litany of private data sharing programs both within Virginia and nationally. Large health systems are often able to integrate these programs into their electronic medical records, but many smaller providers have to use multiple systems to access disparate pieces of a patient's medical history. This makes the data harder to access, and often discourages providers from using them at all. Bringing more of this data into one platform would enable easier access for providers.