



**Public Health Institute, Population Health Innovation Lab
Novel Approaches Webinar Questions and Responses
04.04.2018**

Q1: What EHRs do you interface with? Do you also interface with population management software?

CareMessage:

CareMessage can interface with EHRs such as: EPIC, OCHIN, NextGen, GE Centricity, Epic, Allscripts, Greenway, Primesuite, and Intergy, and Datanet. We also interface with population management tools: i2iTracks and Azara Healthcare. We are exploring additional partners to this list as well.

Please reach out to Jessica Day at jday@caremessage.org as we would be happy to scope out what would be possible for your organization regardless of whether your technology is listed above or not.

emocha Health: We've interfaced with large national laboratory services internationally and EHRs such as Epic domestically but the most important thing to figure out with integrations are the clear business and data sharing needs. emocha can integrate with EHRs and population management software on request after a requirements gathering session with the emocha Chief Technology Officer.

Bayes Impact:

Our hospital readmission model can be integrated with any EHR with HL7 compatibility. In the past, we have extensively worked with Epic.

Q2: What are your pricing packages like? Is there a trial period?

CareMessage: Our pricing model is dependent on the unique factors of each healthcare organization: size, EHR, other tools, etc.

If someone is interested in learning more about CareMessage and how we would be priced for their organization, please send an email to Jessica Day at jday@caremessage.org to set up a call to discuss in more detail.

emocha Health: There is a one-time implementation fee, inclusive of standard emocha configurations and WebEx training, and monthly costs inclusive of hosting, maintenance, and support based on user volumes.

Additional requests, such as non-standard customizations and/or integrations, can be added on. For a quote specific to your location, please email Katrina Rios at krios@emocha.com.

Bayes Impact:

Our tools are open-source and have no license fee. Depend on the need and the extent of support, we charge for our services. Please email mehdi@bayesimpact.org with questions or inquiries.



Q3: Can you explain a little about how secure this app is?

CareMessage:

The CareMessage platform is HIPAA compliant meaning that the data on our web-app is protected and encrypted. However, text-messages or SMS are unencrypted and therefore are not considered a secure form of communication. We encourage organizations who want to send sensitive information or use a patient's name in the text-message, to consider stronger forms of consent. For organizations concerned about HIPAA, we provide consent forms in Spanish and English. These consent forms can be reviewed and signed by patients when they visit the doctor's office or they can be mailed to patients.

For additional information and to answer any questions regarding security, please email Jessica Day at jday@caremessage.org.

emocha Health: The emocha platform, including the mobile application and web portal, is end-to-end HIPAA secure. emocha complies with HIPAA regulations on how to handle protected health information (PHI), including but not limited to secure encryption of data, access controls, and industry-standard best practices. A robust role-based permission system limits system access to only authorized, authenticated users to ensure the need-to-know basis of PHI. All PHI is encrypted both in-flight and at-rest, and all access to, or modification of, patient data and system configuration is logged complying to both HIPAA and IRB requirements. Data is securely encrypted on the device and transmits via a secure cloud to a web portal where authorized users are able to login and see the data. Regular internal and external security audits are conducted on the software.

To request a HIPAA Security White paper or additional security information, please email Katrina Rios at krios@emocha.com

Bayes Impact:

Our Encompas tool is entirely built on open-source data and packages. We can provide a custom-built version on a secure server if the use would like to analyze sensitive data.



Q4: Have any of these software been used by any tribal organizations?

CareMessage: We do not have any current partners with CareMessage who are tribal organizations, but we would love to explore this partnership opportunity.

If you're interested to connect with us, please email Jessica Day at jday@caremessage.org.

emocha Health: Though there's been early interest in use of the emocha platform among tribal organizations for tuberculosis and opioid use disorder treatment, no projects have been launched with tribal organizations at this time.

To discuss this possibility, please email Katrina Rios at krios@emocha.com

Bayes Impact:

No.

Q5: For emocha Health, what is the legislation that was referred to?

The umbrella legislation is called "store-and-forward" legislation, which allows reimbursement of certain conditions for store-and-forward telehealth, which asynchronous video directly observed therapy falls under.

Legislation varies tremendously between states and by condition (i.e. in many cases, store-and-forward is only reimbursable right now for dermatology) but the Center for Connected Health Policy has a fantastic resource that is kept up-to-date with recently passed and upcoming legislation. [A link is available here.](#)

Q6: For CareMessage, we would love to learn more about your successes and lessons learned with interoperability.

We have a variety of case studies from healthcare organizations who have leveraged interoperability with CareMessage to: (A) reduce appointment no-shows for safety net providers, (B) increase rates of preventive screenings and (C) improve self-management for chronic and behavioral conditions for patients that are often the most difficult to reach.

We would love to talk more in detail with some of the successes and lessons learned with interoperability, please reach out to Jessica Day at jday@caremessage.org to schedule some time to discuss this topic in more depth as it applies to your organization's top priorities.