Disclosures

Presenter(s) has no financial interest to disclose.

This continuing education activity is managed and accredited by AffinityCE/Professional Education Services Group in cooperation with HRSA and LRG. PESG, HRSA, LRG and all accrediting organization do not support or endorse any product or service mentioned in this activity.

PESG, HRSA, and LRG staff as well as planners and reviewers have no relevant financial or nonfinancial interest to disclose.

Commercial Support was not received for this activity.

Portland, OR TGA – Part A

- **Currently 7 sub-recipients**

  - 2 import data into CW
    - EPIC
    - ServicePoint
    - CAREWare

  - 5 directly enter data into CW

  - 2 imports from non-sub-recipients
    - Part B ADAP
    - State of Oregon Surveillance

- **~2,600 clients served yearly** (2,628 in FY17-18)

- **Service Categories funded**

  - outpatient/ambulatory care
  - medical case management
  - heath insurance
  - mental health
  - dental
  - early intervention services
  - substance abuse
  - psychosocial support
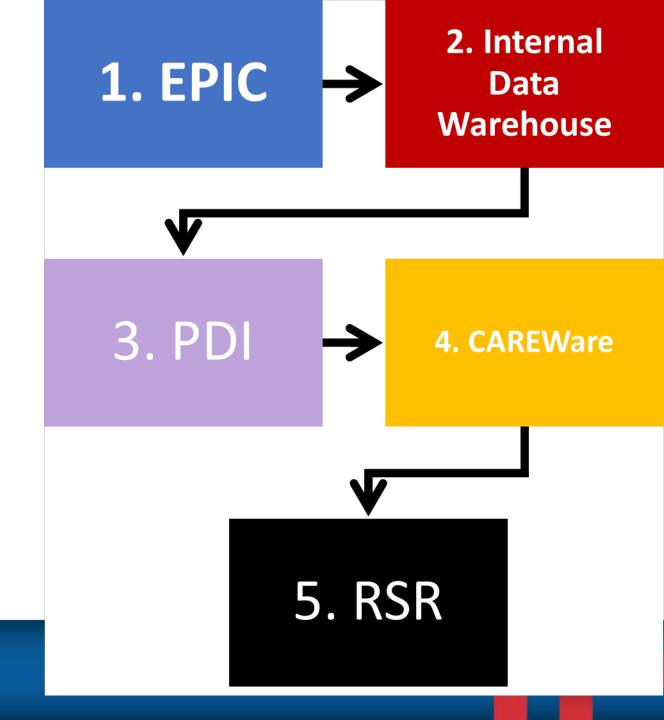 - food
  - non-medical case management

Resources Available

1. **Part A grantee**

   a) Data Analyst Sr (me)

2. **Information Technology Department (IT) (internal)**

   a) Business Systems Analyst

   b) Data Developer

   c) data warehouse for EPIC data

3. **EPIC Support (Internal)**

   a) Business Process Consultant

4. **Sub-recipient – Medical Provider**

   a) Manager

   b) Health Director

Structure Model

1. EPIC → 2. Internal Data Warehouse → 3. PDI → 4. CAREWare → 5. RSR

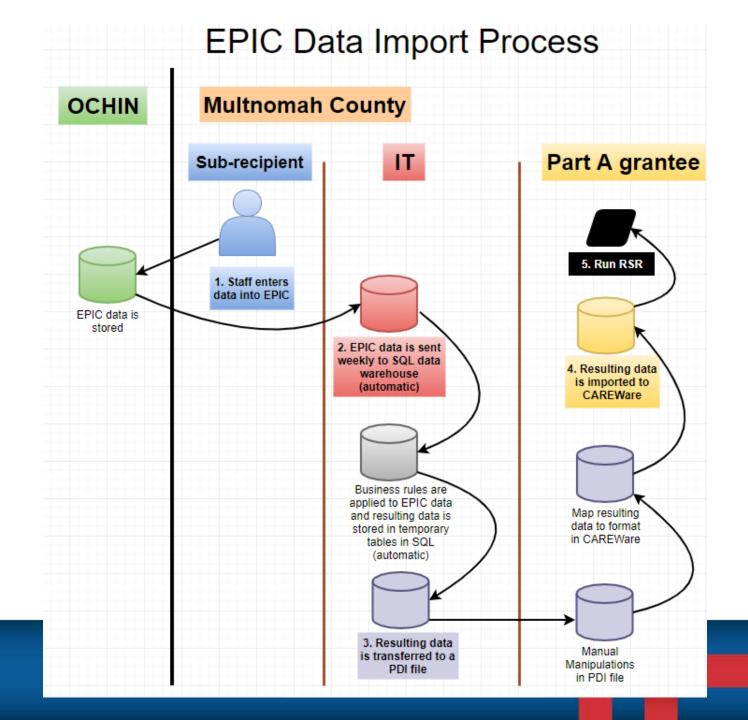# Structure Model cont.

1. 2 Parts to the Process

    1. **Technical** – moving the data

    2. **Documentation** – what does the data look like as it moves

Structure Model cont. 2

Technical – moving the data

EPIC Data Import Process

- OCHIN
- Multnomah County
  - Sub-recipient
  - IT
  - Part A grantee

EPIC data is stored

1. Staff enters data into EPIC

2. EPIC data is sent weekly to SQL data warehouse (automatic)

Business rules are applied to EPIC data and resulting data is stored in temporary tables in SQL (automatic)

3. Resulting data is transferred to a PDI file

Manual Manipulations in PDI file

Map resulting data to format in CAREWare

4. Resulting data is imported to CAREWare

5. Run RSR

Structure Model cont. 3

Documentation – what does the data look like as it moves

EPIC to RSR Documentation Template

1. Location in EPIC

Table:
Column:

2. Location in SQL Data Warehouse

Table:
Column:

Location in SQL Temp Database

Table:
Column:

Clinical Standard

NA

Includes ICD dx codes:

Data Map - Source System to RSR

2. Source Table	Column FK	1. EPIC Values	Notes	3. PDI Value	4. CAREWare Value	5. RSR Value

3. Location on PDI

Table:
Column:

4. Location in CAREWare

Tab:
sub-tab:
Field Name:

5. Location on RSR

Category:
Name:

RSR Data Dictionary

NA

Benefits for Completing the RSR

- One database (One Stop Shop)

- Leverage data collection

- Quality Assurance

- Duplicates

- HRSA changes are build by CAREWare

Benefits To the Overall Program

- One database (One Stop Shop)

- Data sharing

- Leverage data collection

- Care coordination

- Shared Eligibility

- General Oversight of RW system

Questions

Thank You

- Jill Weber

  - jill.weber@multco.us

  - 503-988-3507

Obtaining CME/CE Credit

If you would like to receive continuing education credit for this activity, please visit:

http://ryanwhite.cds.pesgce.com