

CORHIO & Health Current Merger - FAQs

The following are answers to common questions stakeholders of both the Colorado and Arizona Health Information Exchange (HIE) communities may have regarding the proposed merger of the two organizations.

As each phase of the proposed merger unfolds, more information and details will be provided.

Who are the external stakeholders for the HIE Community in each state?

There are multiple HIE stakeholders in each state, including: Health Systems/Hospitals, HIE Participant Organizations (550+ in Colorado; 760+ in Arizona), State Medicaid Agencies and Departments of Health, Healthcare Community partners, the Strategic Health Information Exchange Collaborative (SHIEC) Community, Vendors, and Media (Statewide, Local, Health IT industry).

Why are the Arizona and Colorado HIEs merging?

CORHIO of Colorado and Health Current of Arizona are like-minded organizations with a shared vision to mature and advance our HIE service offerings to better support the healthcare communities of our respective states. HIE consolidation will help each organization accelerate the timeline to achieve desired service improvements. Both Arizona and Colorado:

- Are national leaders in the HIE interoperability landscape—joining forces will further benefit the communities we serve
- Have strong Medicaid and public health relationships, with significant opportunities to continue expanding and leading in this area
- Have similarities in stakeholders and populations served, so there is natural alignment in the strategic development and delivery of HIE services

For more details, please visit the [proposed merger news release](#).

What is a regional health data utility?

Similar to services like water, electricity, natural gas, telephone service, and other essential services, a health data utility provides a vital role to the healthcare community and should be protected and supported accordingly. To learn more about the vision of non-profit HIEs serving the role of health data utilities, read the article, "[HIEs Are Vital to Public Health, But Need Reshaping](#)."

When will the merger occur?

The Board of Directors for each non-profit organization wholeheartedly approved the proposed letter of intent (LOI) to merge in late September 2020. The proposed merger involves three key phases: 1) Due diligence 2) Pre-merger planning and 3) Post-merger integration. The goal is to complete the Due-diligence phase by the end of Q1 2021. As each phase of the proposed merger unfolds, more information and details will be included in this document.

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In the short-term, how will HIE services be impacted during the merger process?

The HIE platforms in each state will continue to operate as normal and participants will continue to access real-time patient data and other services with no planned interruptions of service. Business as usual for HIE Participants in both states.

In the long-term, what are the benefits of the merger to the healthcare community?

The proposed merger of CORHIO and Health Current will benefit the healthcare communities of each state in the long-term by:

- Improving the ability to serve local communities at the state level and respond to community changes by leveraging skills, knowledge, expertise and efficiency
- Creating a larger data set at a regional level that supports more robust community health, public health, population health and advanced payment model advancements
- Allowing both organizations to fill in gaps in subject matter expertise, i.e., bring to bear more refined and deeper expertise than either organization would be able to support independently

What are the benefits of this merger for public sector stakeholders?

A larger and stronger relationship with State Medicaid and Public Health entities has the potential to advance Medicaid re-use opportunities and multi-state collaborations. We anticipate the ability to implement several HIE initiatives in respective states, such as:

- Advance directives registry
- CMS patient access rule compliance
- Care coordination
- Electronic clinical quality measures (eCQM) programs
- Public health infrastructure
- Social determinants of health

What are the benefits of this merger for private sector stakeholders?

Larger and stronger relationships with State Medicaid and Public Health entities have the potential to bring more initiatives to all stakeholders across both states.

Additionally, joining forces brings lessons learned and best practices across a broader community to further advance interoperability for all

And finally, the proposed merger will enable the organizations to achieve the scale necessary to implement federal policy that is impacting hospitals and health plans alike. Examples include:

- One connection to support multiple states
- Advancements in valuable and targeted interoperable solutions
- Hospital and health plan CMS interoperability rule solutions

Additional short-term and long-term benefits of the proposed merger will be identified during the discovery phase of the due diligence process and shared with stakeholders in the future.

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Who do I contact if I have questions, concerns or would like more information?

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