COMMUNICATIONS PLAN

for

AZ PACeHR

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Table 1. Revision History Table

Revision	Date	Name	Description
01	3/24/09	Linda Schwank	Document created
02	6/12/09	Linda Schwank	Re-organized and added content

1. COMMUNICATION STRATEGY

II. COMMUNICATION PLAN COMPONENTS

Providers often don't trust the electronic exchange of information in part because they don't understand it, nor are they aware of the requirements and standards in effect for electronic exchange of information to occur (a significant benefit to EHR implementation). Consequently, communication efforts will focus on alleviating these significant barriers through the application of two primary strategies developed to address the current understanding of the Arizona medical community's perception and use of EHRs – 1) A key constituent outreach component, and 2) A community awareness component. Both strategies will encompass efforts to educate providers on EHRs.

A. Key Constituent Outreach Component

The intent of the outreach is to ensure the results of the project and the processes by which they were achieved are communicated to the appropriate groups so they are aware of both what was completed and by what means.

Goal:

Inform and involve as many medical community members as possible, representing a diverse range of provider types, with an emphasis on primary care providers, OBGYN, and pediatricians.

Objectives:

1) To inform key stakeholders about how they and their members can actively participate in PACeHR – both from an organizational development perspective and for the programs it will administer.

2) To cultivate personal relationships with key constituents and create a flow of accurate information (on EHRs) exchange throughout the process (not an HIE).

3) To raise awareness about the critical need for electronic health records within the State of Arizona.

4) To garner broad community involvement and support for PACeHR.

Target:

The type and level of messages to be communicated to each targeted constituent group is somewhat varied based on their interest in the process and program. Each targeted group is defined below, including a brief description on the type of messages that will need to be communicated.

1) **Provider Organizations**: There are a diverse number of professional provider organizations that regularly communicate industry and professional information to their memberships. The goal of communications to this group is to gain visibility for PACeHR, to share the current status and results of the organization and programs, and to develop exchanges on initiatives carried out with these organizations.

2) **Providers**: Individual providers across Arizona are the backbone of the PACeHR program as they are the primary targeted recipients of the program so it is critical to maintain regular communication with this key group. At a minimum, two key messages that must be provided are 'how' PACeHR selected their EHR vendor(s) – both the selection process and the criteria applied - and the value to a provider to join PACeHR.

3) **Health Plan Executives**: Commercial and Public health plans each have a similar group of users that require varying levels of information but may require different access modes. As a collective group, they are critical to the success of the individual small provider practice in their EHR implementation efforts. Since this group can be effective in vocalizing their concerns, the messages required for this group need to be strategic as their support can encourage more rapid adoption as the health plans gain significant advantages by having provider groups that actively use EHRs. Communications should focus on how they can help enable the small provider practice to achieve EHR implementation, the benefit to those providers, and on how their use translates to value to the health plans.

4) **AHCCCS Steering Committee and Executive Leadership**: As key sponsors / supporters of the PACeHR program, communications to this group are continual and focus on how PACeHR efforts impact other areas of the organization to ensure consistent messages and activities occur. Coordination and communication with this group will identify early on potential areas of concern and provide current information on how PACeHR may or may not be impacted by other strategies within the organization.

5) **Service Partners**: There are many support services businesses that can benefit tremendously from access to providers already considering implementing electronic health record systems. Consequently, they should be interested in the efforts of PACeHR as it will provide immediate access to a target market and provide facilitation services to help pursue business contracts. The communications geared for this group should focus on how their business can benefit from a PACeHR connection.

B. Community Awareness Component

The intent of these outreach efforts is to ensure the use of the data that results from the project is appropriately controlled and all reasonable safety and security measures have been implemented. The impact to this constituency is centered on data privacy and security, and the two groups overlap in their area of concern. One group is focused on ensuring the data - *their data* - can't be identified back to a specific individual. The second group, which requires the same security measures, is more focused on *using* that de-identified data at a group level to better understand healthcare outcomes.

Goal:
Educate and inform non-healthcare providers about healthcare data uses and security measures imbedded in EHR-provided data.

Objectives:
1) To build public awareness about the data security measures implemented with an EHR in a provider's office, to encourage patient support of those practices, and to educate patients on what to expect when their provider implements an EHR.

2) To inform patient populations about where they can get information / education on PHI, HIT, and information on the value of these concepts to their own health.

3) To raise awareness about available data for research purposes to encourage researchers to explore data access agreements with PACeHR.

Target:
The type and level of messages to be communicated to each targeted constituent group is somewhat varied based on their interest in the process and program. These targeted groups are quite varied in their role within the EHR adoption process. These roles are discussed below in the brief description on the type of messages that will need to be communicated.

1) **Patients / General Public**: While not a primary focus group, the patients of the providers using the EHR system are critical to the overall success of that utilization. Patients must understand how electronic use of their personal health information (PHI) will impact them, and what precautions / safeguards their providers have in place to ensure data security and privacy. Education about these issues can alleviate those concerns and result in patient buy-in to the process, so their acceptance is crucial. Unfortunately, providing sufficient education can be time consuming. However, a number of organizations and institutions provide educational information for the general public re: health information technology (HIT) and EHRs - providers need simple access to these resources. Once they're identified and made available to the Arizona public / patients of the providers targeted for PACeHR implementations, this issue will begin to dissolve. Consequently, communications for this group should focus on informing providers on resources to which they can refer their patients for more information on HIT, EHRs, PHI, etc. These efforts can counter the negative publicity that often circulates around PHI.

2) **Research / Academia**: A great deal of healthcare research occurs within the Arizona community that could benefit from access to de-identified data on the Arizona population. Communication efforts should maintain cooperative relationships with these individuals and institutions to encourage their support to help address and resolve privacy and data access issues.

2.   MATERIALS AND TOOLS:

The core set of materials and tools used to communicate the key messages to each audience are listed below. This list should be amended as audiences suggest / identify other information avenues they prefer. The use of internet marketing needs to be expanded within this document (use of message boards, on-line user groups, discussion groups, etc.).

Communication efforts will range from 1:1 interactions with PACeHR staff and medical community leaders to meetings with provider organization and health plan executives to distribution of prepared documents, usage and maintenance of web sites / information produced for web sites, and facilitation of messages throughout the state through other electronic vehicles (primarily email and professional medical association newsletters and meetings). The document types noted below will contain the messages to be delivered to each target audience. How these documents / messages are communicated and will be addressed further in this Plan.

2.1   Marketing Materials

Noted below are both materials designed and developed re: PACeHR but also include ancillary connections to external sources that can provide information, materials, and / or tools needed to accelerate the use and understanding of EHRs in Arizona. Together, incorporating information available through other entities into the PACeHR-specific documents / resources can help accelerate adoption tendencies – the more people know the facts, the greater the opportunity for change.

2.1.1   Collaterals – all documents will be available in a hard and soft version.

- **LOI**: This Letter of Interest will be used to assess provider interest in PACeHR for various topics. The LOI will be adjusted based on the desired information / feedback needed from the provider community (e.g. initial interest in a purchasing collaborative, to assess interest in being a pilot, etc.). *An online version plus a paper fax-back format are needed to ensure a wide audience reach.*

- **Frequently Asked Questions (FAQs)**: Information presented in a question and answer format will be used to inform providers on common issues / questions about the PACeHR program. This document will be updated periodically to **promote the current messages that need to be** shared and as sufficient new information is ready for public release. It should help **illustrate the value of PACeHR for individuals and / or organizations** and to encourage them to inquire to the organization re: services / information offered. *It will be accessible online or as a document attachment.*

- **PACeHR Flyer**: Current information at a fairly high-level in bullet format for education at a glance. Easily understood pieces of key information. The intended use is to provide a quick overview to catch a provider's attention to encourage them to want more

information. The focus of these sheets may change over time as the program grows and is more widely understood.

■ **Fact Sheets**: Presents **the value proposition(s)** to the practice based on specific segments of PACeHR and / or the EHR program. This simply presented document is 'why' a provider should use XYZ EHR or ABC PACeHR service. Another version can be created to present the same type of information for the other targeted audiences (e.g. why a patient should want their provider to have an EHR).

2.1.2   Program Support Materials

■ **Calendar press releases**: Simple "who, what, where" format announcing events and/or milestones reached.

■ **Articles in Newsletters:** Activity or events that the provider organizations can share with their membership re: PACeHR and also could include ways in which they can get involved on the user and / or administrative side(s).

■ **PowerPoint presentations**: Program presentation summarizing PACeHR at various points in time based on the intended audience – could be available for downloads directly from the PACeHR website.

2.1.3   On-Line Education Available (through external organizations)

■ **Fact Sheets / Information Resources** – Provides data on relevant topics available **through external organizations** - Communications around provider education should focus on creating communications / tools that enable PACeHR to refer providers to these organizations. The greater the understanding of HIE / EHR, the greater the chance a provider / patient will pursue use of an EHR. Sources that provide this type of information need to be presented in other PACeHR-specific communications, which will help build support to advance EHR adoption.

■ **Websites** – Sites that offer education and outreach programs re: HIT for providers and patients via Education Toolkits (HISPC). These resources encompass information specifically on EHRs and associated data privacy and security aspects presented in formats to increase an individual's comfort level with these concepts. These resources need to be woven into the PACeHR website / products and services function so interested but uninformed providers or patients can learn more about these concepts before they explore how to best use PACeHR. Once they better understand how EHRs work and the associated value and issues, only then will they see the tremendous value available through PACeHR. One example is the HISPC (Health Information Security and Privacy)

2.2   Distribution Tools

A direct-to-user distribution approach has proven very effective in prior PACeHR communication efforts. To continue this strategy requires easy access to current contact information in the form of distribution lists by audience type.

2.2.1   Direct-to-Consumer Communications

These lists will span the previously-defined target markets (e.g. PACeHR partners, participants, etc.) but also must enable collection of data on new contacts. A system to create and manage distribution lists will meet this need to support the communication and marketing efforts of PACeHR. These community audiences are identified later in this document. A distribution list for each type of audience needs to be maintained in order to maximize the effectiveness of this strategy.

2.2.2   PACeHR-specific Website

PACeHR needs its own website to establish a significant web presence, and to encourage self-service information. It should be developed as **the 'hub' of PACeHR** so anyone tied to the organization can access needed information all in one place – it will provide the information much faster and decrease staff time commitments to process standard information needs. Content will include:

- Basic PACeHR information – what it is, why I care
- Types of subscriptions available – who can participate, how, why
- Access to resources to educate providers and patients on EHRs, etc.
- Any materials noted above should be available – or at a minimum, those same messages need to be presented here
- Forms – from product development ideas to 'I need help with…' to general requests for information.

A secondary vehicle will be communications enabled through the PACeHR section of www.azamie.gov .

2.2.3   Access to PACeHR via Other Websites

Internet marketing using social networking tools and websites will enable the PACeHR message to be shared at a nominal cost to PACeHR. Proper management of such network participation will require proactive effort by PACeHR. Additionally, the site will explore the internet as a tool to promote PACeHR User Groups for accelerated information sharing among providers with the PACeHR EHR.

3.   COMMUNICATION CONTENT - Wave 3

The type of information and communication vehicle applied to each audience will vary by type of audience and the intended message to communicate at any given time. However, the following table captures the primary audiences, the primary content / types of messages to be communicated and additional information to complete these communications.

Target Audience	Primary Content (WHAT we're communicating / info from project plan)	Vehicle	Frequency and Timing	Owner
Provider Organizations (AzMA, AzOMA, ACP, AAFP, APA, ADA, MGMA etc.)	▪ System selection status ▪ Calendar of upcoming events ▪ Key milestones set and accomplished ▪ Project governance ▪ Pilot program ▪ What's new / what they need to know about PACeHR and current / upcoming activities ▪ What PACeHR needs from them	Write articles for their organization-specific newsletters / tools they use to communicate w/their members Organizations will send out the information / articles	Monthly – information due to each organization by the last calendar day of each month in 2009	
Providers – who have expressed interest in PACeHR (LOI and / or Pilot inquiry responders)	▪ System selection status ▪ Calendar of upcoming events ▪ Key milestones set and accomplished ▪ Project governance ▪ Pilot program ▪ What's new / what they need to know about PACeHR and current / upcoming activities ▪ Promotional materials re: the value of EHRs; info on the ARRA stimulus package, etc. ▪ FAQ document(s) / updates ▪ Information re: EHRs, Privacy / Security, educational information on EHRs ▪ ARRA funding information ▪ PACeHR EHR product	Create articles, presentations, fact sheets, FAQs, and other materials targeted directly to the provider Email above directly to each provider; Email BLASTS Post documents to provider – focused websites / bulletin boards, etc. (including the azamie.gov website)	Schedule by avenue TBD	
Stakeholder Groups (e.g. AzHEC, AMIA, HIMMS, AHIMA),	▪	Presentations and meetings (w/executives or with members)		
Health Plan Executives	▪ System selection status ▪ Calendar of upcoming events ▪ Key milestones set and accomplished ▪ Project governance ▪ Pilot program ▪ What's new / what they need to know ▪ Bigger picture – how PACeHR ties with AMIE	Email updates (via AHCCCS HP Executive) Face-to-Face meetings as designated	TBD	
AHCCCS Steering Comm. and Executive Leadership	▪ System selection status ▪ Calendar of upcoming events ▪ Key milestones set and accomplished ▪ Project governance ▪ Pilot program ▪ Issues to address ▪ Bigger picture – how PACeHR ties w/AMIE	High-level slides re: current status / key issues	Monthly meetings	

Target Audience	Primary Content (WHAT we're communicating / info from project plan)	Vehicle	Frequency and Timing	Owner
PACeHR Service Partners (special groups who will have EHR Incentives for their staffs)	Note: They include: Banner (NextGen), MIHS (Epic), CHW-AZ (TBD), Scottsdale HC – (NextGen), Phoenix Childrens' (TBD)			
Patients / General Public				
Research / Academia				

4.   BUDGET

Expected costs for materials, website development and ongoing management, research, staff, and equipment will be included in the overall PACeHR budget.