



THSA

TEXAS HEALTH SERVICES AUTHORITY

March 2025

TEXAS HEALTH SERVICES AUTHORITY

- Created in 2007 by the Texas Legislature as the public/private entity to promote and coordinate electronic health information exchange in the State of Texas.
- Operates two major functions: (1) HIETexas -- electronic health information exchange platform, and (2) SECURETexas – a privacy and security certification program.
- Governed by a 12-member board of directors, appointed by the Texas Governor and confirmed by the Texas Senate. Two ex-officio members representing state health agencies also sit on the board.



[Section 182.101\(a\)\(1\), Health and Safety Code](#)
[HEALTH AND SAFETY CODE CHAPTER 182. ELECTRONIC EXCHANGE OF HEALTH INFORMATION \(texas.gov\)](#)

Texas HHSC's Interoperability for Texas: Powering Health 2022

Strategy 3: EDEN

EDEN provides near real-time Emergency Department (ED) ADT notifications via HIETexas. EDEN is implemented using push technology, a recently added exchange modality in the Trusted Exchange Framework and Common Agreement (TEFCA) developed by the Office of the National Coordinator for Health Information Technology.¹¹ With ADT data transmitted to Texas Medicaid, subscribing MCOs and providers can enhance care for patients. ADT data assists in soothing care transitions. Diagnosis and admissions data are valuable for care coordination and allow MCOs to automate prior authorizations. ADT data also supports Texas Medicaid's efforts to reduce inappropriate ED use by enabling identification of clients in need of education on non-emergent alternatives and improves follow-up care.

<https://www.hhs.texas.gov/sites/default/files/documents/interoperability-texas-powering-health-dec-2022.pdf>

TEXAS HEALTH SERVICES AUTHORITY *INTEROPERABILITY*

HIETexas
EDEN

Emergency Department Encounter Notifications

Real time alerts to determine where a patient has been admitted, discharged or transferred.

HIETexas
PULSE

Patient Unified Lookup System for Emergencies

Remote and secure access to electronic health information during declared disasters in alternate care sites.



Privacy & Security Certification

Privacy and security program to certify compliance with state and federal medical privacy and security law.

Supported through a combination of state funds from the Texas Health and Human Services Commission and federal funds from the Centers for Medicare and Medicaid Services.

ED VISIT PREVENTED

Sunny Side Home Health received a wound care referral from Dr. Welby for Mr. Smith after a fall he had at home. Nurse Ann has been seeing Mr. Smith and treating the wound.

She notices that Mr. Smith is having trouble ambulating and is dizzy. Nurse Ann looks at the national network and sees that Mr. Smith was discharged from a hospital in another state where his daughter lives two months ago. He had been treated for a heart condition. Nurse Ann checks the medications list against the hospital discharge medication list. They do not match and there are no cardiac medications. Nurse Ann calls Dr. Welby to discuss. Dr. Welby was not advised of the hospital stay in another state nor of the cardiac medications prescribed.

Dr. Welby prescribes blood pressure and cardiac medications.



POTENTIALLY PREVENTABLE HOSPITAL READMITS

Nov 15, 2022

By [Jared Kaltwasser](#)

Patient avoidance or postponement of care are common reasons for home health care delays, the authors said.

Patients discharged from the hospital are at a higher risk of re-hospitalization if they experience a delay in post discharge [home health care](#) initiation, according to a new study.

The study, [published in Journal of the American Medical Directors Association](#), shows the risk of a re-hospitalization or emergency department (ED) visit jumps by 12% when patients wait more than 2 days for their at-home care to start.

ENHANCING CARE COORDINATION

Mrs. Jones fell in her apartment. Her designated caregiver found her and called the ambulance.

The ambulance took her to the local hospital where she was admitted.

Nurse Mary Smith nor the hospitalist are aware that Mrs. Jones has dementia.

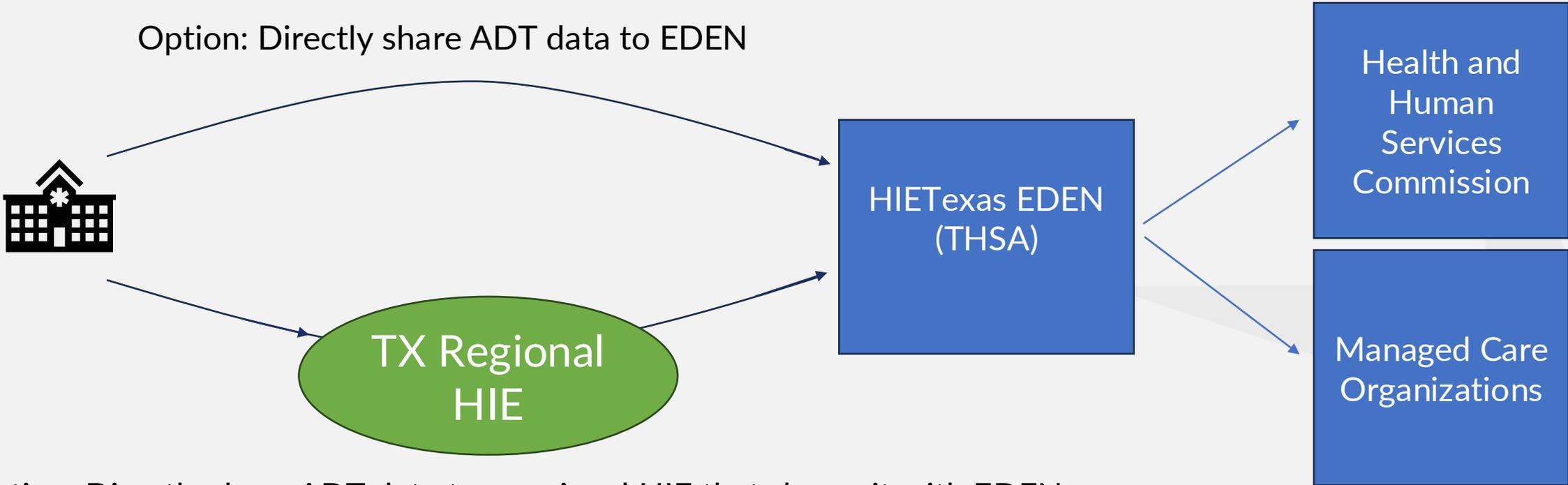
The PCP and the MCO care management team receive **an encounter notification** with local hospital name and attending physician. The PCP immediately calls the hospitalist to advise of Mrs. Jones medical history. The MCO care management team call to initiate discharge planning process with hospital.

3.27.2023
8 pm



3.28.2023
8 am

PATHS TO CONNECT TO HIETEXAS EDEN



Option: Directly share ADT data to a regional HIE that shares it with EDEN

THSA NETWORK PARTICIPATION (FOR EXCHANGE OF ADT DATA)

	Live	Underway
Acute Hospitals	169	43
Post Acute Hospitals	659	17
Behavioral Health Hospitals	7	18
Urgent Care	7	
Total Organizations	913	

598 Total Texas Hospitals with 38% THSA Participants



POTENTIALLY PREVENTABLE READMITS (PPR)

- Star provides benefits for low-income children, pregnant woman and families analysis showed PPR rates lower than target for 65.2% of HIETexas participating hospitals as compared to 49.4% of all others associated with a net positive monetary impact of \$522,665.
- Star + Plus provides benefits for adults who have disabilities or are age 65 and older showed a similar pattern with 63.1% of participating hospitals lower than target as compared to 53.3% of others associated with a net positive monetary impact of \$708,710.
- Star Health provides benefits for foster children and youth under the age of twenty who are former foster care children showed a smaller impact with one hospital with a rate lower than the State average associated with a net positive monetary impact of \$13,316.47.
- Star Kids provides benefits for children and young adults with disabilities. There were 3 HIETexas participating hospitals lower than target and four higher. There was a net negative monetary impact on this group of (\$240, 247).
- ***PPR Financial Savings for Medicaid: \$1,004,444 = \$522,665 + \$708,710 + \$13,316 + (\$240,247)***

POTENTIALLY PREVENTABLE EMERGENCY DEPARTMENT VISITS (PPV)

- Star provides benefits for low-income children, pregnant woman and families analysis showed PPV rates lower than target for 74% of HIE Texas participating hospitals as compared to 50.8% of all others associated with a net positive monetary impact of \$2,868,620.
- Star + Plus provides benefits for adults who have disabilities or are age 65 and older showed a similar pattern with 77.1% of participating hospitals lower than target as compared to 53.3% of others with a net positive monetary impact of \$1,038,050.
- Star Health provides benefits for foster children and youth under the age of twenty showed a similar pattern with 62.1% of participating hospitals lower than target as compared to 41% of others with a net positive monetary impact of \$52,929.
- Star Kids provides benefits for children and young adults with disabilities. The trend continued in this population with 67.6% of participating hospitals lower than the target as compared to 43.5% of others with a net positive monetary impact of \$311,434.
- ***PPV Financial Savings for Medicaid: \$4,271,033 = \$2,868,620 + \$1,038,050 + \$52,929 + \$311,434***

POWERED CARE COORDINATION

Care Management:

- Renal
- Diabetes
- Chronic Disease
- Cardiac
- Sickle Cell

MCOs



Hospitals



Post-Acute Care



Community Physicians



Home Care



Telehealth



- Home Care
- Palliative Care
- DME
- Remote Monitoring

CONTACT INFORMATION

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