

Connecting Data, Improving Care: How MiHIN Supports CAHs

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Michigan Health Information Network Shared Services (MiHIN)

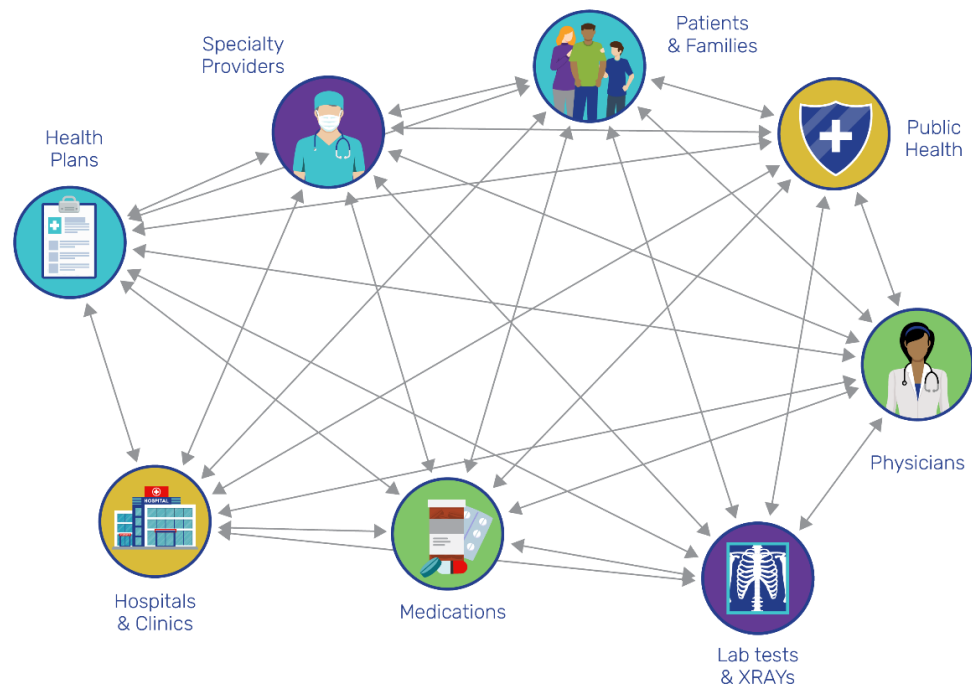
Michigan Health Information Network Shared Services (MiHIN) is the state-designated entity for health information exchange in Michigan, dedicated to improving the healthcare experience, improving quality, and decreasing cost for Michigan's people making valuable data available at the point of care.



Statewide Health Information Exchange Creates Efficiency

BEFORE:

Duplication of effort, waste and expense



NOW:

Connect once to access shared services



Efficiencies:

- Phone calls
- Chart Pulls
- Faxing
- Email Requests
- P.H. Reporting
- Fewer Log Ins
- Less Creds
- Less Testing
- External View
- Download Docs
- No Standards

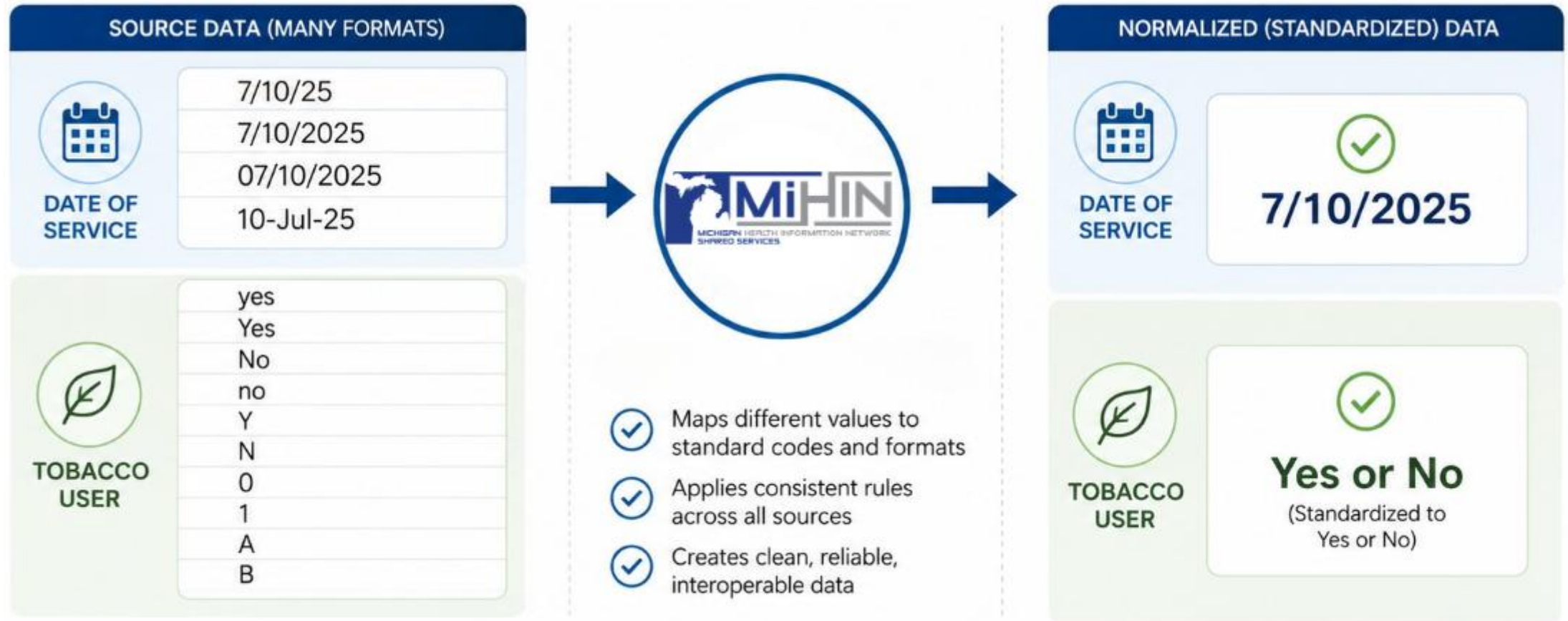
Connecting Data From Every Corner of Healthcare



Broad Network of 78 Electronic Health Management Platforms

Acumen	CPSI	Evident	Health Fusion	Lifepoint	NextCare	Physicians ComputerCo	TRIARQ
Advance MD	DaVita	FlatIron	HeathQuest Esoterics	Medaptus	NextGen	Point Click Care	Truemed IT
Allegiance MD	ECHO	GE Centricity	Home Care Home Base	Medent	Outcomes Prescribe Well	Practice Fusion	UL Solutions
Allscripts	eClinical Works	GeniusDoc	HST Pathways	Medicat	Office Medicine	Praxis	UnisonMD
Amazing Charts	Elation	Genius Solutions	Huntington Technologies	Meditab	Office Practicum	Prognosis	Veradigm
Aprima	Ellkay	gGastro	I 3 Business Solutions	Meditech	OpenText	ProMedica	WRS
Athena	EMDs	Glance	Insync	MIE	Orchard	RxNT	Availity
CareCloud	eMedical Notes	Glenwood Solutions	iPatientCare	ModMed	Paragon	RPMS	Change Healthcare
Care Tracker	Enable Healthcare	gMed	Ignite Medical Tech	ModuleMD	Patagonia	SRS	
Cerner	Epic	Greenway	Labsoft	NetSmart	PCE	Sunquest	

Normalization of Data



HIPAA-Compliant Services with Patient's PHI

Treatment

- Exam Room / Emergency Room Utilization

Payment

- Finance Related Utilization [Billing, Collecting, Coding Claims]

Operations

- Care Coordination, Transitions of Care, Gaps in Care, PoP Health

Treatment = MlGateway® Longitudinal Record (11,000 Users)

Migateway
Home
Care Coordination ▾
Administrative ▾
Support
 Bryan ▾

Aug 7, 2025, 4:16 PM
 Bryan Bulock

★

Summary
Patient Names & Identifiers
Address
Demographics 1
Demographics 2
Related Persons

PATIENT INFORMATION		DEMOGRAPHICS		CONTACT INFORMATION	
EID	8786956	Date of Birth	1999-06-22	Email	
First Name	Mariska	Gender	female	Phone	
Middle Name		Marital Status	Married	Address	1111 First Address Ave High Hills, MI 11111
Last Name	Sample	Deceased			

Lab / Observation Results

Source ▾	Collected ▾	Test ▾	Status ▾	Specimen ▾	Flag ▾
MAIN LAB-SPARROW	7/22/2025 15:32	Urinalysis dipstick W Reflex Microscopic panel - Urine	final		A
MAIN LAB-SPARROW	7/11/2025 08:00	Urinalysis dipstick W	final		A

Encounters

Date ▾	Type ▾	Facility ▾	Care Provider	End of Encoun	Encounter Num	Admit Reaso
7/08/2025	Emergency	Covington Memorial Hospital	-		111111	
4/24/2025	Inpatient	Covington Memorial Hospital	-		100355405383	
4/23/2025	Ambulatory			4/23/2025	75126795	

MIGateway/Longitudinal Record Users

Clinical Setting

- Patient history (diagnosis, allergies, treatments)
- Reduced errors (inappropriate medication)
- Critical context (Real-Time ED visits)
- Transitions of care (hospital, rehab, primary care)
- Specialty visit (test results, treatment summaries)
- Long-term tracking (chronic diseases, co-morbid)
- Reduced testing (labs, imaging, immunizations)
- Streamlined workflows (no hunting down info)

Emergency Rooms

- Improved decision making (past diagnosis)
- Enhanced patient safety (adverse drug interact)
- Reduced admissions (show previous ECG abnor)
- Reduced readmission (show previous baselines)
- Avoid redundancy (labs, imaging, immunizations)
- Search, Alert, File and Reconcile(SAFR functionality)
- Lower doctor utiliz (multiple drs seeing patient)
- Reduced length of stay (7.04%)

Tumor Registry – (Specialty)

- Outside Record Review (HUGE) help to the team
- MiGateway first place to look for annual follow up
- Date of passing for a patient
- Abstracting
- Find treatment for chemo
- Find treatment for immunotherapy
- Fine treatment for radiation therapy
- ***“Almost every aspect of our job requires it”***

Market Segment Users

- Hospice
- Rehabilitation Centers / Physical Therapy
- Behavioral Health Facilities
- Pharmacies
- Accountable Care Organizations
- Physician Organizations
- Home Health Care Agencies (PACE)
- Health Departments (City and County)

BCBSM Incentive Program for Data Sharing [20/100 Pts]

Measure number	Measure description	Total points possible	Points available by quarter			
			1Q	2Q	3Q	4Q
1	Maintain ADT data quality conformance with inclusion of the common key	6	1.50	1.50	1.50	1.50
2	Maintain CCDA data conformance for inpatient, observation, and ED visits	6	1.50	1.50	1.50	1.50
3	Transmit all ambulatory CCDA data	4	1.00	1.00	1.00	1.00
4	Maintain data conformance for statewide lab result data	4	1.00	1.00	1.00	1.00
NA	Participate in Claims Pilot Project	10	Participation in the Claims Pilot Project			

BCBSM Incentive Program Guide

Measure 2 – ADT and CKS Conformance Thresholds – 4 points	
Group A: Complete Routing – messages must be populated with all the following fields	Threshold
PID-5.1: Patient Last Name	≥95%
PID-5.2: Patient First Name	≥95%
PID-7: Patient Date of Birth	≥95%
PID-11.5: Patient Zip	≥95%
PV1-19: Visit Number	≥95%
PV1-37: Discharged to Location	≥95%
PV1-44: Admit Date/Time	≥95%
PV1-45: Discharge Date/Time	≥95%
PID-29: Patient Death Date/Time	≥95%
PID-30: Patient Death Indicator	≥95%
IN1-3: Insurance Company ID	≥95%
IN1-4: Insurance Company Name	≥95%
PID-3.1 Common Key	≥60%
Group B: Complete Mapping – <u>MiHIN</u> mapping tables must be kept current for the following fields *	Threshold
MSH-4.1: Sending Facility- Hospital OID	≥95%
PV1-36: Discharge Disposition	≥95%
PID-8: Patient Sex	≥95%
PID-10: Patient Race	≥95%

Each measure has a specific % threshold of data that needs to be met.

Meaning, 95% or greater of every line item must have data present to be in compliance.

Today, quality of data is not measured, only the presence of the data is measured.

Conformance Module in MiGateway

Conformance Reporting Module ADT Conformance Overview Report Examples

Overall Conformance Report | Population Report: Routing Fields | Population Report: Mapping Fields | Population Report: Correct Coding Fields | Mapping Report | Correct Coding Report

Controls

Group Type: All | Group Name: All | Level of Aggregation: Facility | Period of Interest: Custom Period

Start Date (Custom Period Only): 2020-03-03 00:00 | End Date (Custom Period Only): 2021-09-20 00:00

Describes overall conformance rates and CKS population rates across groups/facilities.

Peer Group	Facility / Group	Overall Conformance Score
Unknown	Blue Star Hospital	85.2%
	Green Square Hospital	85.2%
	Orange Circle Hospital	85.2%
	Red Eagle Health System	88.9%

Overall Conformance Report | **Population Report: Routing Fields** | Population Report: Mapping Fields | Population Report: Correct Coding Fields | Mapping Report | Correct Coding Report

Controls

Group Type: All | Group Name: All | Group Aggregation: Facility | Trigger Type Aggregation: All Together | Period of Interest: Custom Period

Start Date (Custom Period Only): 2020-03-03 00:00 | End Date (Custom Period Only): 2021-09-20 00:00

For each Routing ADT Conformance Field and sending facility, reports the frequency at which that field was populated in sent ADT messages for the period.

Peer Group	Facility / Group	Trigger Type	PID-3.1 (CK)	PID-5.1	PID-5.2	PID-7	PID-11.5	PID-29	PID-30	PV1-37	PV1-44	PV1-45	IN1-3
Unknown	Blue Star Hospital	All	60.2%	100.0%	100.0%	100.0%	98.7%	15.9%	100.0%	99.9%	21.1%	0.1%	98.5%
	Green Square Hospital	All	0.0%	100.0%	100.0%	100.0%	100.0%	175.0%	99.9%	100.0%	20.2%	0.0%	100.0%
	Orange Circle Hospital	All	48.3%	100.0%	100.0%	100.0%	100.0%	147.8%	99.9%	99.9%	24.4%	0.0%	99.8%
	Red Eagle Health System	All	81.0%	100.0%	100.0%	100.0%	99.3%		98.9%	100.0%	13.4%	0.0%	98.5%
	Silver Triangle Medical Center	All	71.6%	100.0%	100.0%	99.9%	98.5%	229.6%	76.3%	100.0%	49.3%	0.0%	99.8%

ADT Conformance Reports for single hospital

ADT Conformance | C-CDA Conformance

ADT Conformance Overview for Hospitals | **ADT Conformance Report for SNFs** | ADT Conformance Report for Hospitals | ADT Fallout Report | ADT Mapping Analysis

Hospital ADT Conformance Report | Hospital ADT Conformance Population R...

Controls

Facility: Silver Triangle Medical Center | Period of Interest: Custom Period | Start Date (Custom Period Only): 2019-01-02 | End Date (Custom Period Only): 2022-01-01

ADT Conformance Report for Hospitals

Provides an overview at the sender level of Overall ADT Conformance Score, along with the scores (population/mapping/correct coding) rates of the various constituent fields.

Overall Conformance Score

85.2%

Overall ADT Conformance Score

Indicates overall ADT data quality. Color-coded by fields conformance (Population, Mapping, etc). 0-14 (Red); 15-26 (Yellow); 27 (Green) for Peer Group 1-4 facilities; 0-14 (Red); 15-25 (Yellow); 26 (Green) for Peer Group 5 facilities.

Population Rates: Normalization/Mapping Field Data

PID-8	PID-10	PID-22	PV1-2	PV1-4 (I)	PV1-10	PV1-14 (I)	PV1-36 (IE)	DG1-6 (IE)	MSH-4
99.9%	98.3%	97.9%	100.0%	100.0%	99.6%	-99.1%	100.0%	99.9%	100.0%

Mapping Rates: Normalization/Mapping Field Data

PID-8	PID-10	PID-22	PV1-2	PV1-4	PV1-10	PV1-14	PV1-36	DG1-6	MSH-4
100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%	100.0%

Complete Mapping Data by Field

Rates at which the populated values of each message segment conform the ADT service specification. When evaluating each field for overall conformance, both the field's population rate and the mapping rate of its populated contents to the service standard are considered. Should no ADTs including a given mapped segment be sent, mapping that segment is considered to be **Failed**.

Hospital ADT Conformance Report | Hospital ADT Conformance Population R...

Controls

Facility: Silver Triangle Medical Center | Period of Interest: Custom Period | Start Date (Custom Period Only): 2019-01-02 | End Date (Custom Period Only): 2022-01-01

DG1-3.1 : Diagnosis Code ID
DG1-3.2 : Diagnosis Code Text
DG1-6 : Diagnosis Type
IN1-3 : Insurance Company ID
IN1-4 : Insurance Company Name
PID-5.1 : Patient Common Key
PID-5.1 : Patient Last Name
PID-5.2 : Patient First Name
PID-7 : Patient DOB
PID-8 : Patient Sex
PID-10 : Patient Race
PID-11.5 : Patient ZIP
PID-19 : Patient SSN
PID-22 : Ethnic Group

PID-29 : Patient Death Date/Time
PID-30 : Patient Death Indicator
PV1-2 : Patient Class
PV1-4 : Admission Type
PV1-7 : Attending Doctor ID
PV1-10 : Hospital Service
PV1-17 : Admitting Doctor ID
PV1-14 : Admit Source
PV1-19 : Visit Number
PV1-36 : Discharge Disposition
PV1-44 : Admit Date/Time
PV1-45 : Discharge Date/Time
PV1-37 : Discharged to Location

Population Rates: Coding Standard Conformance Field Data

DG1-3.1 (IE)	DG1-3.2 (IE)	PV1-7 (IE)	PV1-17 (I)
99.4%	99.9%	98.6%	99.4%

Proper Coding Rates: Coding Standards Conformance Field Data

DG1-3.1	DG1-3.2	PV1-7	PV1-17
98.1%	100.0%	100.0%	100.0%

Adherence to Coding Standards by Field

Rates at which the populated values of each message segment contain values properly formatted for that segment (e.g. ICD-10 diagnosis code etc.). When evaluating each field for overall conformance, both the field's population rate and the rate at which its values were properly formatted are considered. Should no ADTs including a given mapped segment be sent, adherence that segment is considered to be **Failed**.

Total View of ADT Conformance

Population Requirements for Messages

Patient Class (PV1-2) Exclusions/Inclusions
 Outpatient, Pre-Admit, Recurring, Commercial Account Always Excluded
 Inpatient Only (PV1-4, PV1-14, PV1-17)
 Inpatient or Emergency Only (DG1-3.1, DG1-3.2, DG1-6, and PV1-7)

Message Type	Complete Routing Data														Complete Mapping										Coding Standards			
	PID-3.1	PID-5.1	PID-5.2	PID-7	PID-11.5	PV1-19	PID-29*	PID-30	PID-19	PV1-37	PV1-44	PV1-45	IN1-3	IN1-4	MSH-4.1	PID-8	PID-10	PID-22	PV1-2	PV1-4	PV1-10	PV1-14	PV1-36	DG1-6	DG1-3.1	DG1-3.2	PV1-7	PV1-17
A01	≥60%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	N/A		≥95%		≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%							
A02	≥60%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	N/A		≥95%				≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%							
A03	≥60%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	N/A	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%
A04	≥60%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	N/A		≥95%				≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%							
A05	≥60%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	N/A	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%						
A06	≥60%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	N/A		≥95%		≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%							
A07	≥60%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	N/A		≥95%		≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%							
A08	≥60%	≥95%	≥95%	≥95%	≥95%	≥95%		N/A		≥95%					≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%							
A09	≥60%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	N/A	≥95%	≥95%				≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%
A10	≥60%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	N/A		≥95%				≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%							
A11	≥60%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	N/A		≥95%				≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%							
A12	≥60%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	N/A		≥95%				≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%							
A13	≥60%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	N/A		≥95%		≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%							
A14	≥60%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	N/A		≥95%		≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%							
A15	≥60%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	N/A		≥95%				≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%							
A16	≥60%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	N/A	≥95%	≥95%		≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%							
A17	≥60%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	N/A		≥95%				≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%							
A18	≥60%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	N/A		≥95%				≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%							
A21	≥60%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	N/A		≥95%				≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%							
A22	≥60%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	N/A		≥95%				≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%							
A23	≥60%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	N/A		≥95%				≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%							
A25	≥60%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	N/A		≥95%				≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%							
A26	≥60%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	N/A		≥95%				≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%							
A27	≥60%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	N/A		≥95%		≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%							
A28	≥60%	≥95%	≥95%	≥95%	≥95%		≥95%	≥95%	N/A		≥95%				≥95%	≥95%	≥95%	≥95%		≥95%	≥95%							
A29	≥60%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	N/A						≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%							
A34	≥60%	≥95%	≥95%	≥95%	≥95%		≥95%	≥95%	N/A		≥95%				≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%							
A35	≥60%	≥95%	≥95%	≥95%	≥95%		≥95%	≥95%	N/A		≥95%				≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%							
A36	≥60%	≥95%	≥95%	≥95%	≥95%		≥95%	≥95%	N/A		≥95%				≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%							
A38	≥60%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	N/A		≥95%				≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%							
A40	≥60%	≥95%	≥95%	≥95%	≥95%		≥95%	≥95%	N/A						≥95%	≥95%	≥95%	≥95%										
A41	≥60%	≥95%	≥95%	≥95%	≥95%		≥95%	≥95%	N/A						≥95%	≥95%	≥95%	≥95%										
A44	≥60%	≥95%	≥95%	≥95%	≥95%		≥95%	≥95%	N/A						≥95%	≥95%	≥95%	≥95%										
A45	≥60%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	N/A		≥95%				≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%							
A52	≥60%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	N/A		≥95%				≥95%	≥95%	≥95%	≥95%	≥95%	≥95%	≥95%							

*PID-29 only measured where PID-30 indicates "Y/Yes" that the patient is deceased.

Data Sharing Physician Organizations

Data Flowing from P.O.s, SNFs, etc...

- ADTs
- CCDs
- LABs from (LabCorp and Quest Diagnostics)
- QMI (Quality Measure Improvement)
- Behavior Health Screening
- Social Determinants of Health

******Data flowing to hospitals is just as important as data flowing from them***

THANK YOU

LET'S CONNECT



mihin.org



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