La Paz Regional Hospital

ASET Unconnected Healthcare Providers Health Information Exchange (HIE)
Grant Program Application Cover Sheet

1. Name and address of Organization submitting grant application:

   La Paz Regional Hospital
   1200 W. Mohave Road
   Parker, AZ 85344

2. Contact information:

   M. Victoria Clark, CEO
   La Paz Regional Hospital
   1200 W. Mohave Rd.
   Parker, AZ 85344
   Phone: (928) 669-7300
   Email address: vclark@lapazhospital.org

3. Executive sponsor of application: M. Victoria Clark, CEO

4. Date of application to ASET: November 15, 2012

5. Total dollar amount requested: $50,000

La Paz Regional Hospital
Unconnected Healthcare Providers HIE Grant Proposal
November 15, 2012

PROJECT DESCRIPTION AND PARTNER RELATIONSHIPS/COLLABORATIVE STRUCTURE

Introduction

La Paz Regional Hospital is applying for the Planning and Implementation Grant. It will address all three of the Office of National Coordinator (ONC) health information exchange priorities by implementing E-prescribing, enabling providers to receive structured lab results and creating a provider portal to facilitate transitions of care by sharing patient care summaries between the hospital and providers. By participating in the AZ Health-e Connection Direct Connect, we will begin to engage our medical community in direct electronic exchange of structured data, a process that will continue to expand in the future.

a. **Organizational Descriptions**

La Paz Regional Hospital is a 25-bed rural acute care hospital in La Paz County. It is the only hospital of its size in Arizona that is not a federally designated Critical Access Hospital (CAH). It meets all of the requirements for CAH except the distance requirement, since there is an Indian Health facility within the 35-mile distance requirement. Notwithstanding this unique position, the hospital has worked assiduously to develop its electronic health record capability. With this grant, it can meet Meaningful Use Stage 2 requirements.

The entire county is designated as a Health Professional Shortage Area for primary care. The towns of Salome, Quartzsite, and Parker, and the Colorado River Indian Tribes are all additionally classified as Medically Underserved. The County is recognized as a dental health shortage area. The hospital operates federally designated Rural Health Clinics (RHC) in Salome, Bouse and Quartzsite and has an application in progress for a Parker clinic. The Parker clinic has been approved for RHC by Medicare CMS, and will be certified after a state inspection. The hospital is working with the ADHS Division of Public Health to prepare an application to transition the Quartzsite facility to a Federally Qualified Health Center (FQHC).

Sonora Quest Laboratory is the reference laboratory for the hospital and clinics, with results delivered to the hospital and the clinics via FAX. David A. Dexter, Sonora CEO and Board Chair for AzHeC, in his letter of support strongly recommends this application.

b. **Geographic Area and Demographics of Population**

This grant will allow key health care providers in La Paz County to develop health information exchange with the overall mission to improve access to, and quality of, the healthcare services available to this 4,184 square mile county area covering more land mass than Rhode Island and Delaware combined.

The initial needs assessment completed in 2011 showed the following:

- According to the 2010 national census, La Paz County is the oldest, in terms of average age of the population, in the United States.
- One in four persons is receiving public assistance.
- Incidence of tobacco use and chronic disease are among the highest in Arizona.
- Forty-six percent of La Paz County children live in single-parent households, of which 42% live below the federal poverty line.
- Overall, over one-fourth of the population lives below the federal poverty line.
- La Paz County has one of the highest unemployment rates in the nation, and it had the highest increase in unemployment in the state of Arizona over the 12 month period from July 2010 to June 2011.
- La Paz is a medically underserved area by both national and state standards.
- One in five adults lacks medical insurance.
- Thirty percent of the population suffers from obesity.

La Paz County, population 20,000, swells to over 65,000 in the winter months, as residents of northern states flee the cold and wet weather for our fair and dry desert season. This puts an additional burden on the county's medical system. Staffing is a particular problem, dealing not only with recruiting to a rural area, but providing enough staff for the winter months layoffs during the lean summer months.

In La Paz County, the remoteness, sparse population, and the extreme population changes from winter to summer make access to medical services a serious problem. Some rural communities lack primary health care or easy access to health services, and fall under the federal and state guidelines of Health Professional Shortage Areas (HPSA) and Medically Underserved Areas (MUA) and Populations (MUP).

Located in Parker, La Paz Regional Hospital is the only public access hospital in the county. There is an Indian Health facility in Parker that serves approximately 3,000 members of the Colorado River Indian Tribes (C.R.I.T.) for non-critical medical care. La Paz Regional serves all residents of the county.

The hospital operates Rural Health Clinics in Bouse, Salome, and Quartzsite. The clinic in Bouse is part time, two days a week. Quartzsite has one additional practice that operates during October thru March and is closed six months of the year. It is mainly a cash business. There are no health care services of any kind in the communities of Wenden, Brenda, Ehrenberg, and Cibola. This is significant as the county encompasses 4,184 square miles, with communities separated by stark desert.

c. **Issue//Business process to Improve**

La Paz Regional hospital currently utilizes paper and fax for exchanging information with unaffiliated organizations, including physicians, laboratories, and pharmacies. The hospital utilizes CPSI software for accounting, billing, materials management, nursing documentation, and CPOE. The physician documentation module is on order, to be implemented in February. Currently both lab and radiology use an outside service for resulting a substantial portion of exams. These results are received via fax and must be scanned, printed, and then manually faxed to the appropriate provider. The last method used to view documents is a web based EHR platform. In order to utilize this method effectively results would need to be transmitted directly to the HIS through an interface. Due to a high volume of scanning, documents are often not available for viewing in the EHR for several days.

The project would include three improvement efforts:

1. Provider Portal: With the SMTP encryption software and interface with the HIS, the functionality of the exchange server would be increased. A physician and specialist portal for medical record information would be established.
2. Structures Lab Results: The addition of two interfaces with Sonora Quest Laboratory and Arizona Health-e Connection for connecting to the Arizona State Laboratory and Sonora Quest Laboratory would allow results to be automatically forwarded to and/or from these agencies for incorporation into the medical record, making results immediately available for treatment and medical care.
3. E-prescribing: The Pharmacy E-prescribing module has been purchased, but the implementation has been delayed due to budget constraints for set-up and training. E-prescribing would provide patients and pharmacies much needed improvement in turnaround time. E-prescribing requires training and additional hardware for access.

The overriding purpose of this grant would be to connect the hospital with outside providers, pharmacies and laboratories. The number of **care transitions** is estimated at:

Information flow	Description	Patients	Total
Hospital -Physician	Summary of Care, La Paz to and from primary/specialist	950	1900
Hospital -Hospital	Summary of Care, La Paz to referral hospital, LTC	513	513
Clinics - Physician	Summary of Care, La Paz Clinics to private physician	4,700	4,700
Hospital-Pharmacy	Rx on Inpatient Discharge to Pharmacy Average 2.5 Rx per patient discharge	950	2,375
Clinic -Pharmacy	Rx after Clinic visit Average 1 Rx per visit	7,298	7,298
Emergency -	Rx after ED Visit	10,038	12,045

Pharmacy	Average 1.2 Rx per Visit		
Urgent Care - Pharmacy	Rx after Urgent Care Visit Average 0.96 Rx per Visit	3,725	3,576
Surgery - Pharmacy	Rx after Surgery/Cardiac Cath/Special Procedures. Average 1.6 RX per Procedure	1,505	2,408
Imaging - Physician	Imaging interpretations/Images from Imaging to provider	18,447	18,447
Total	TOTAL CARE TRANSITIONS	48,126	53,262

d. **How HIE Grant Funds will meet Business Objectives**

Our business objectives mesh with our mission of service to La Paz County. In order to continue meeting the needs of area residents, the hospital must proceed with electronic health records and make these records complete, available for care, and allow patient access to summary results. With the assistance of grant funds, La Paz Regional would be able to meet Meaningful Use Stage 2 objectives, providing a much needed cash return on the investment in the electronic medical record. It would provide connectivity for our providers and service partners, especially Sonora Quest and local Pharmacies.

The purpose Health Information Exchange (HIE) is to enable the creation of an interoperable Electronic Health Record (EHR) for each individual by connecting the information contained in various organizations across the continuum of care. Through the interoperability provided by the HIE, unconnected providers can now access medical information contained in a patient's health record, resulting in improved quality and patient safety, reduced costs, and evidence-based care.

For providers, access to medical information is essential. Creating a physician and specialist portal will allow providers access to information essential to the continuum of care of the patient. Physician offices need laboratory results, imaging results, admission and surgery results. For years, hospitals sent "paper" to physicians, and whether it was sitting in a pile waiting to be filed, filed and not found, or simply "lost" in the FAX, the physician could have a patient in an examination room and not have the information he/she needs to adequately care for the patient. The wait time in calling the hospital with an urgent request for patient information is costly in terms of time spent by all staff. Access to patient information for follow up care is essential. The physician portal with improve access to necessary information, reduce costs for both the hospital and the provider, and improve patient care.

Scanned documents do become part of the medical record and are available to providers. However, the scanned record exists as a document that must be accessed individually. For instance, laboratory results are grouped together such that providers can get a timeline of results and changes in patient condition. With a scanned laboratory result, the provider would not see those results on the software generated historical result section; instead, the provider must view the scanned document. The value of having an interface which allows laboratory results to be interpreted directly into the laboratory results section and incorporated into the historical laboratory summary is significant for improvement in patient care. The advantage of HIE interfaces will allow information processed by laboratories to be directly input into the medical record, such that it will be seamlessly incorporated into laboratory historical data, without the need for review of a particular document.

There is immense value in E-prescriptions. Patients would no longer have to carry an Rx to the pharmacy and wait for the Rx to be filled. E-prescribing would allow direct transmission of prescriptions to the pharmacy of the patient's choice, providing better record keeping, reduced paper flow, timelier medication administration, and ease of operation.

e. **Serving the Needs of the Underserved and Low Income Populations**

One in four persons in the county receives some type of assistance. We are already classified as medically underserved. The Rural Health Clinics serve low income and provide access to medical care through a sliding fee schedule that is not available outside the clinics. The local library augments access to electronic data for low income/transient persons with computer access points. With a patient portal, our residents will become part of the continuum of care as they have never been before, feeling a part of the system and more in control, which will assist with their health and wellness.

f. **Fiscal Agent**
La Paz Regional Hospital will serve as fiscal agent for the project.

g. **Project Lead**
   a. M. Victoria Clark, CEO of La Paz Regional Hospital, has over 35 years of healthcare experience. She has successfully managed two grants from the USDA Distance Learning and Telemedicine program, five from Komen for the Cure, SHIP grants from the Office of Rural Health SHIP program, Emergency Management grants, an ADHS grant to complete needs assessments in Quartzsite and Salome, and grants from other states during previous work experience.
   b. See Attached CV.

h. **Co-Applicant Senior Leader**
Sonora Quest has submitted a letter of support and provided much detail on the interface requirements.

1. PROJECT WORK PLAN

La Paz Regional Hospital has met Meaningful Use Stage 1 federal requirements and received the initial payment. Nursing documentation, computerized physician order entry, laboratory, radiology, pharmacy, patient education software has all been installed and in use. This grant would assist the hospital in connecting our software with other providers, including Physicians, Specialists, Sonora Quest Laboratories, Arizona State laboratory and ADHS Surveillance Program, and multiple pharmacies.

ACTIVITY	COLLABORATORS Responsible Party	OUTCOMES DELIVERABLES	START DATE	END DATE
PHYSICIAN AND SPECIALIST PORTAL				
Purchase and Install Exchange 2013 and Office 2013	Micah Katke,CONEX Technical Jean Jennings,LPRH IT Dept.	Update system hardware software for compatibility and ability to exchange information.	1/1/13	2/18/13
Purchase and install Symantec Protection Suite	Micah Katke,CONEX Technical Jean Jennings,LPRH IT Dept.	Establish protection for the system to ensure privacy, virus Protection, Web Filtering, Email filtering, Email encryption, Device Control	1/1/13	2/18/13
Set up provider portal to allow physicians to log onto La Paz HER and Radiology applications	Brad Sapenfield, VP Operations Fast Health	A provider portal available at hospital website with all the	03/01/13	03/30/13

ACTIVITY	COLLABORATORS Responsible Party	OUTCOMES DELIVERABLES	START DATE	END DATE
remotely, review records and request documents to be sent electronically	Kevin Brown, IT Manager	protection required as above.		
Train staff, physicians on portal. Review Health Information (HIM) requirements. Create policy/procedure.	Kevin Brown, IT Megan Blong, RN, IT Trainer	Classroom training records, individual training records. Approved Policies and Procedures.	03/31/13	04/30/13
GO LIVE Exchange Data between hospital and/or clinics and unaffiliated providers	Kevin Brown, IT Manager	Meet Grant Goal.	04/30/13	05/15/13
INTERFACE WITH SONORA QUEST, STATE LAB, AND ADHS SURVEILLANCE				
Purchase and install bidirectional interface to Sonora Quest Labs.	Sonora Quest Lab Lesley Spivey, CPSI Kevin Brown, IT Manager	Creation and successful installation of the interface Sonora Quest will provide its half of the bidirectional interface. CPSI charge is included in the grant.	04/01/13 (90 day lead time from order to delivery)	05/15/13
Purchase and install unidirectional interface with AZHEC Direct Connect for AZ State Laboratory and Surveillance Data.	AZHEC Lesley Spivey, CPSI Kevin Brown, IT Manager	Creation and successful installation of the interface. CPSI charge is included in the grant.	04/01/13 (90 day lead time from order to delivery)	05/15/13
Purchase 20 organization accounts from AZHEC for direct exchange.	AZHEC Lesley Spivey, CPSI Kevin Brown, IT Manager	Creation and successful installation of the interface. CPSI charge is included in the grant.	04/01/13 (90 day lead time from order to delivery)	05/15/13
Train nursing, medical records, lab, and Quality staff on interfaces and capabilities	Kevin Brown, IT Manager Megan Blong, RN	Lab and clinic staff who send reference specimens will be trained. Nursing and provider staff will be trained on how the data will be incorporated into the record.	05/15/13	06/25/13
GO LIVE Electronic data submission to State lab and ADHS Surveillance	Kevin Brown, IT Manager Megan Blong, RN	Meet Grant Goal by sending and receiving electronic laboratory	06/01/13	06/25/13

ACTIVITY	COLLABORATORS Responsible Party	OUTCOMES DELIVERABLES	START DATE	END DATE
Received structured lab results incorporated into CPSI system	Jean Jennings, IT	orders/results from Sonora and auto sending reports to the State lab and surveillance programs		
IMPLEMENT E-PRESCRIBING				
Set up physician security and pharmacy ID and zip code database for E-scribe.	Lesley Spivey, CPSI, Kevin Brown, It Manager Megan Blong, RN, IT Educator	Identification of pharmacies, creation of physician security and E-prescribing system parameters.	01/01/13	03/15/13
Provide individual training for staff physicians.	Kevin Brown, It Manager Megan Blong, RN, IT Educator	Train all physicians on the process, and limits of E-prescribing for types of drugs and how it works within CPOE.	03/15/13	04/30/13
Provide individual training for independent physicians and specialists	Kevin Brown, It Manager Megan Blong, RN, IT Educator	Train all physicians on the process, and limits of E-prescribing for types of drugs and how it works within CPOE.	03/15/13	04/30/13
GO LIVE E-prescribing to multiple pharmacies.	Kevin Brown, It Manager Megan Blong, RN, IT Educator	Live/Test data showing E-Prescribing in place and effective.	04/30/13	04/30/13

2. LINE ITEM BUDGET

Item	Description	Cost	No.#	Total	Grant	Match
Symantec Protection Suite	**Virus Protection, Web Filtering, Email filtering, Email encryption, Device Control**	**$4,500**	**1**	**$4,500**	**$4,500**	
Exchange Email Server	**Exchange 2013, Office 2013 Professional (100 licenses)**	**12,060**	**1**	**12,060**	**12,060**	
BackUp Exec	**Back Up software**	**4,400**	**1**	**4,400**	**4,400**	
External Drives	**External Drives 3 Terabyte**	**450**	**3**	**1,350**	**1,350**	
Computer on wheels for E-prescribing	**CPSI Computer on Wheels for Physician/Staff HIE with Pharmacies/laboratories**	**7.376**	**2**	**14,752**	**4,890**	**$9,862**

Item	Description	Cost	No.#	Total	Grant	Match
Interface with AZHEC	**CPSI interface**	**5,000**	**1**	**5,000**	**5,000**	
Interface with Sonora	**CPSI interface**	**9,000**	**1**	**9,000**	**9,000**	
Initial Set-up Fees with AZHEC	**AZ Health-e Connection Direct Exchange, Organizational and Individual Accounts (20)**	**225**	**20**	**4,500**	**4,500**	
Consultant Fees	**Micah Katke, CONEX Technical Consulting**	**3,800**	**1**	**3,800**	**3,800**	
IT Staff	**Kevin Brown, IT** **346 hours planning, set-up and installation.** **Wage $30.30/hour** **Benefits at 0.28**	 **10,484** **2,935**	 **1**	 **10,484** **2,935**		 **10,484** **2,935**
Nursing Staff Training	**125 persons, 3 hours training** **Average wage $18.47/hour** **Benefits at 0.28**	 **6,926** **1,939**	 **1**	 **6,926** **1,939**		 **6,926** **1,939**
Physician Training	**5 employed physicians** **Average wage $92.00/hr** **2 hours training** **Benefits at 0.28**	 **920** **258**	 **1**	 **920** **258**		 **920** **258**
Megan Blong, RN IT Trainer	**96 hours preparation, training program development, training of nurses, physicians, and patients.** **Wage $32.00/hour** **Benefits at 0.28**	 **3,072** **860**	 **1**	 **3,072** **860**		 **3,072** **860**
Matching Funds						**15,794**
TOTAL				**86,756**	**50,000**	**36,756**

3. BUDGET NARRATIVE

The budget for the project includes software, hardware, consulting and staff wage and benefit expense. We have made an arrangement with Fast Health Corp. to consult with us and set up the patient portal, free of charge, in exchange for our commitment to continue contracting for web support. Sonora Quest laboratory has agreed to provide their end of the CPSI – Sonora interface free of charge.

A. Salary and Fringe Benefits

Each employed staff member is billed at their salary and a 28% benefit rate, which covers FICA, Worker's Compensation, Unemployment Ins., Disability, and Life Insurance, Employer portion of Health, Vision and Dental insurance.

i. **$10,484** Kevin Brown, IT, 346 hours planning, set-up and installation. Wage $30.30/hour.
2,935 Benefits at 0.28. Kevin Brown will be the "go to" person for the installation and set-up of all hardware/software changes/updates. He will also participate in education of staff and physicians.

ii. **$ 6,926** 125 persons, 3 hours training, Average wage $18.47/hour,
1,939 Benefits at 0.28. Nursing, physicians, laboratory, quality improvement, medical records, and

business office will be required to attend education for these new processes.

iii. **$ 920** Five employed physicians, Average wage $92.00/hr, 2 hours training,
258 Benefits at 0.28 All five employed physicians will be required to have training.
$ 3,072 Megan Blong, RN, IT Educator, Wage $32.00/hour.
860 Benefits at 0.28. Ms. Blong will hold training classes, on the spot training, and follow up meetings with physician and staff on the connectivity processes including the physician portal, access to the portal, limitations of the portal, E-prescribing and interfaces with Sonora/AZ State.

B. Travel

No travel is billed under the grant.

C. Equipment

The purchase of the Microsoft exchange 2013 server will allow hospital departments the ability to send a maximum message size of 25mb increased from 10mb in previous versions. This increase in message size will be needed as the size of electronic health information continues to grow. This physician portal project will increase the accessibility of electronic health information by providing healthcare organizations the ability to directly access patient information thru the use of our web based EHR and Radiology systems. In addition unaffiliated health care organizations will be able to submit an electronic request for ePHI and receive the information via secure SMTP transmission.

i. **$12,060** The physician exchange project involves the purchase of a Microsoft Exchange server and Microsoft Office software so that all departments and users are able to exchange secured electronic information. The hospital is required to update the Office product as departments are using various Office products dating back to a 1998 version.

ii. **$ 1,350** Three 3-terabyte drives to accommodate the backup system on the exchange server.

iii. **$14,752** Two computer on wheels will be necessary for the increased computer usage for the physician portal and the Sonora Lab interface.

D. Software

i. **$ 4,500** One of the first steps in creating a system with outside access is to protect the internal system. The Symantec Protection Suite will provide that protection with Virus Protection, Web Filtering, Email filtering, E-mail encryption and device control.

ii. **$ 4,400** Back up software is required for the data, so that tracking and investigation is enabled.

iii. **$18,500** The hospital computer system, CPSI, will charge $9,000 for the bidirectional interface with Sonora and $5,000 for the unidirectional interfaces with AZHEC Direct Connect for State Lab and Surveillance reporting. This software will allow the two systems to communicate and to retrieve/store data in the correct place and manner. An initial set-up of 20 access points ($450 each=$4.500) to Direct Connect will connect hospital, clinics and private practices for data exchange.

E. Consultants

$3,800 Micah Katke, Consultant with Conex Technical, will be the project consultant for the installation of the physician portal and connectivity issues with the interfaces. He has extensive experience in computer connectivity and prior consultant experience with La Paz Regional.

H. In Kind Match The Hospital will match the $50,000 grant with $37,256, of which $25,.394 is an in-kind support of wages and benefits for project participants, and $11,862 is matching funds.

4. LETTER(S) OF SUPPORT

Sonora Quest Letter of Support: See Attachment

M. Victoria Clark. C.P.A.
P.O. Box 829
Parker, AZ 85344
vclark@lapazhospital.org

EXPERIENCE

La Paz Regional Hospital, Parker, AZ 2002 — Present

CHIEF EXECUTIVE OFFICER. Directs hospital operations for this 25-bed acute care hospital and three Rural Health Clinics. Revenue growth from $23 million to $61 million. Listed under Thompson's Top 100 Hospitals in 2007.

Palo Verde Hospital, Blythe, CA. 1996-2001
Subsidiary of Province Healthcare (formerly Brim Healthcare, Inc.)

CHIEF EXECUTIVE OFFICER. Directed all hospital operations for this 51-bed acute care hospital.

General Hospital, Eureka, California. January 1990 to 1996.
Subsidiary of Brim Healthcare, Inc.

ASST ADMINISTRATOR/CHIEF FINANCIAL OFFICER. Directed all financial operations for this 85-bed acute-care hospital and 15-bed rehabilitation unit with annual revenues of $57 million, four subsidiary operations, 500+ employees and a capital budget of $3.3 million.

Navapache Regional Medical Center, Show Low, Arizona. 1981 to 1989. Managed by Brim Healthcare, Inc.

CHIEF FINANCIAL OFFICER/ASSISTANT ADMINISTRATOR (1986 to 1990).
DIRECTOR OF CASE MANAGEMENT. (1985 to 1986)
MEDICAL TECHNOLOGIST. (1981 to 1985) Performed laboratory procedures and quality control in all laboratory departments.

Northland Pioneer College, Show Low, Arizona (1996-1998) Concurrently with CFO position)

INSTRUCTOR, Part time. Computer applications: Lotus, Word

EDUCATION

University of Arizona. Tucson, Arizona. B.S. Biology 1977.
30 credits, MBA program, 1978 — 1981.

PROFESSIONAL
ORGANIZATIONS/CERTIFICATIONS

Certified Public Accountant, State of Arizona.
HealthCare Financial Management Association, Fellow Parker Rotary Club
Medical Technologist, AMT, HEW.

REFERENCES: Upon Request

Sonora Quest Laboratories™
A Subsidiary of Laboratory Sciences of Arizona

November 14, 2012

Manisha Patel
Project Manager
Arizona Strategic Enterprise Technology (ASET) Office
State of Arizona
100 N. 15th Avenue, Suite 400
Phoenix, AZ 85007

Dear Manisha:

On behalf of Sonora Quest Laboratories, I am very pleased to write this letter of support for La Paz Regional Hospital to include in their application to participate in the Arizona Strategic Enterprise Technology's (ASET) Unconnected Healthcare Providers Health Information Exchange (HIE) Grant Program

Sonora Quest Laboratories is an integrated laboratory system servicing over 7,000 clients throughout Arizona including hospitals, physicians, and managed care organizations. We have approximately 2,600 employees statewide and perform over 70,000 diagnostic tests per day. Our comprehensive on-site test menu encompasses testing from routine to esoteric cytogenetic studies.

Key values within the Sonora Quest Laboratories system are compassion, collaboration and quality. Our passion is to provide every patient and every customer with services and products of uncompromising quality - error free, on time, every time. We believe in teamwork and the limitless possibilities of collaborative energy. We achieve excellence by putting collective goals ahead of personal interests. We support and encourage open communication and meaningful cooperation among colleagues from varying backgrounds and disciplines.

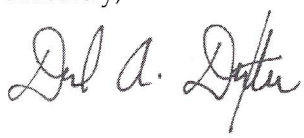
La Paz Regional Hospital currently uses Sonora Quest Laboratories for reference testing and we are long time business partners. La Paz has implemented CPSI, an electronic health information system, for their hospital and three clinics to improve patient care within their network. One area where our business relationship can improve is with the installation of a bi-directional interface between our information systems to enhance our testing collaboration. This grant will assist La Paz in securing the resources from CPSI for the interface in early 2013 and we at Sonora Quest Laboratories will assign the appropriate resources to begin working with them at that time.

Our commitment to the promotion of HIT and HIE in Arizona is evidenced by my service and participation on the Board of Directors and Executive Committees for both Arizona Health-e Connection (AzHeC) and Health Information Network of Arizona (HINAz), as well as serving as the Board Chair for AzHeC. Through this participation as well as through my personal

commitment to assisting long term care facilities with health IT and HIE adoption, I am pleased to offer my support to La Paz Regional Hospital.

In conclusion, Sonora Quest Laboratories strongly recommends La Paz Regional Hospital for receipt of a grant award through the ASET Unconnected Healthcare Providers HIE Grant Program, to support their HIE initiatives.

Sincerely,



David A. Dexter
President & CEO