

April 4, 2012

To: NITC Commissioners
From: Anne Byers
Subject: eHealth Council report

State HIE Cooperative Agreement Progress Report. On March 15, 2010, the Nebraska Information Technology Commission received \$6.8 million in funding from the U.S. Department of Health and Human Services, Office of the National Coordinator for Health IT through the HITECH ACT enacted as part of the American Recovery and Reinvestment Act of 2009. The Nebraska Information Technology Commission is partnering with NeHII (Nebraska Health Information Initiative), eBHIN (Electronic Behavioral Health Information Network, the Nebraska Department of Health and Human Services Division of Public Health, and the Nebraska Statewide Telehealth Network to implement the cooperative agreement.

NeHII is completing implementation activities with 1 new hospital—Regional West Medical Center in Scottsbluff—and has recruited 20 hospitals, including 16 Critical Access Hospitals, Boys Town National Research Hospital, Columbus Community Hospital, BryanLGH West and BryanLGH East. When these hospital implementations are completed in 2012, approximately two-thirds of the state’s hospital beds will be covered by NeHII. NeHII now has over 2,000 users up from 1,288 on Dec. 31, 2010.

NeHII and the Nebraska Department of Health and Services Division of Public Health have been working with NeHII’s vendor, Axolotl, to exchange information between the State of Nebraska’s immunization registry, NESIIS, and NeHII. Phase I of the exchange is operational, allowing the exchange of data from NeHII’s electronic health record (EHR) users to the immunization registry. Work continues on the other two phases of the project. NeHII, Axolotl, and the NDHSS Division of Public Health are also working on the exchange of information between NeHII and the State’s disease reporting system (NEDSS) and the State’s syndromic surveillance system.

NeHII began a pilot of the Direct project in late 2011 for results delivery via secure messaging with Pathology Services in North Platte.

Nebraska is also developing one of the country’s first behavioral health information exchanges. eBHIN went live with its electronic health record and electronic practice management (EHR/EPM) system and data upload to Magellan, the State’s administrative services organization, in the summer of 2011 in southeast Nebraska. In December 2011, behavioral health providers in Region I in the Panhandle went live with the EHR/EPM system. The HIE will go live in both regions early in 2012.

A progress report showing metrics is included in the meeting materials.

Evaluation. In December 2011, the NITC/Office of the CIO contracted with UNMC to serve as an external evaluator for the State HIE Cooperative Agreement. The scope of work focuses on seven areas:

- Required and ad hoc monitoring and tracking
- Provider satisfaction with health information exchange
- Consumer satisfaction
- E-prescribing evaluation
- Radiology and laboratory data
- Utilization of medication histories
- Value of HIE in the emergency department

UNMC has already completed a lab census and a survey of Nebraska pharmacies not accepting e-prescriptions. The evaluation team is currently analyzing the results and preparing reports.

Plan Updates. The Office of the National Coordinator for Health IT released guidance for updating state eHealth plans on Feb. 8, 2012, giving Nebraska and other states with plans originally approved in 2010 a deadline of May 8, 2012. Revised plans must include an evaluation plan, sustainability plan, privacy and security framework, and implementation timelines. The eHealth Council met on Feb. 29 to discuss plan revisions. The eHealth Council agreed that a small group of individuals involved in implementing the State HIE Cooperative Agreement would work on plan revisions.

Besides the new sections, most of the changes to the plan will be simply updates reflecting the current health information exchange environment. The only other significant change will likely be greater incorporation of Direct into our strategies. Direct is a protocol for the secure messaging of health information. The Office of the National Coordinator is currently working diligently to identify use cases for Direct.

Privacy and Security Framework. The Office of the National Coordinator released a program information notice on a privacy and security framework on March 22, 2012. A revised document was sent on March 23, 2012. No extension for the privacy and security section required in state plan updates was given. The privacy and security framework includes the domains of individual access; correction; openness and transparency; individual choice; collection, use and disclosure limitation; data quality and integrity; safeguards; and accountability.

Some of the policies are likely not achievable today. For example, the individual choice domain includes the following statement:

“Individuals should have choice about which providers can access their information. In addition, recipients are encouraged to develop policies and technical approaches that offer individuals more granular choice than having all or none of their information exchanged.”

To my knowledge, technical solutions to segregate data are currently not available. Implementing this policy could add additional costs to health information exchange initiatives. A copy of the Privacy and Security Program Information Notice is included in the meeting materials.

Membership Renewals. The terms of six eHealth Council members are up for renewal:

- Dr. Delane Wycoff
- John Roberts
- Harold Krueger
- Joel Dougherty
- Nancy Shank
- Donna Hammack

I will be asking you to approve renewing their memberships.