

eHealth Council

Oct. 15, 2018

1:30 P.M. CT – 3:30 P.M. CT
Lincoln-Lancaster Public Health Department
3131 O St.
Lincoln, NE

Tentative Agenda

Links to agendas, minutes, and meeting materials can be found at
http://www.nitc.nebraska.gov/ehealth_council/meetings/index.html

1:30	Roll Call Notice of Posting of Agenda Notice of Nebraska Open Meetings Act Posting <i>Approval of March 13, 2018 minutes*</i> <i>Approval of April 12, 2018 minutes*</i> Public Comment
1:40	Nomination of Co-Chair* Nomination of New Member <ul style="list-style-type: none">• Jan Evans
1:45	NeHII Update*—Jaime Bland
2:15	PDMP Update
2:30	Data Governance Work Group Charter and Next Steps*—Kevin Conway
3:00	Other Updates <ul style="list-style-type: none">• Digital Readiness Survey• Rural Broadband Task Force• Nebraska Hospital Association Telehealth/Broadband Survey of Hospitals• Rural Health In 2030: The Role of the University of Nebraska Medical Center https://www.unmc.edu/_documents/ruralhealth2030.pdf• ONC Blog--Heat Wave: The U.S. is Poised to Catch FHIR in 2019 https://www.healthit.gov/buzz-blog/interoperability/heat-wave-the-u-s-is-poised-to-catch-fhir-i
3:30	Adjourn

* Indicates action items

Meeting notices were posted on the Public Meeting and NITC websites on Sept. 28, 2018. Meeting agenda posted on Oct. 11, 2018.

- NeHII is one of 7 HIEs that are Qualified Clinical Data Registries (QCDRs). NeHII is working on the data extract for five measures.

APPROVAL OF APRIL 5, 2017 MINUTES*

Kevin Conway made a motion to approve the April 5, 2017 minutes. Kathy Cook seconded the motion. **The vote was as follows: Borchert-Yes, Conway-Yes, Cook-Yes, Fattig-Yes, Kadavy-Yes, Evans-Yes, Morien-Yes, Palm-Yes, Sterud-Yes, Turman-Yes, Wood-Yes, and Young-Yes. (12-Yes, 0-Nay, 0-Abstain)** Motion carried.

APPROVAL OF OCT. 12, 2017 MINUTES

Dave Palm made a motion to approve the Oct. 12, 2017 minutes. Kevin Conway seconded the motion. **The vote was as follows: Borchert-Yes, Conway-Yes, Cook-Yes, Fattig-Yes, Kadavy-Yes, Evans-Yes, Morien-Yes, Palm-Yes, Sterud-Yes, Turman-Yes, Wood-Yes, and Young-Yes. (12-Yes, 0-Nay, 0-Abstain)** Motion carried.

UPDATES

TRUSTED EXCHANGE FRAMEWORK AND COMMON AGREEMENT

Zoe Barber, Office of the National Coordinator for Health IT

Zoe Barber gave a presentation via phone on the ONC's proposed Trusted Exchange Framework and Common Agreement. The 21st Century Cures Act charged ONC with developing a trusted exchange framework. The framework has two parts.

Part A—Principles for Trusted Exchange General principles that provide guardrails to engender trust between Health Information Networks (HINs)

- Principle 1 - Standardization
- Principle 2 - Transparency
- Principle 3 - Cooperation and Non-Discrimination
- Principle 4 - Security and Patient Safety
- Principle 5 - Access
- Principle 6 - Data-driven Accountability

Part B—Minimum Required Terms and Conditions for Trusted Exchange

A minimum set of terms and conditions for the purpose of ensuring that common practices are in place and required of all participants who participate in the Trusted Exchange Framework, including:

- Common authentication processes of trusted health information network participants;
- A common set of rules for trusted exchange;
- A minimum core set of organizational and operational policies to enable the exchange of electronic health information among networks.

The Framework also addresses the need to standardize data sets through the US Core Data for Interoperability (USCDI). The USCDI establishes a minimum set of data classes that are required to be interoperable nationwide and is designed to be expanded in an iterative and predictable way over time. Data classes listed in the USCDI are represented in a technically agnostic manner.

HIE AND DATA GOVERNANCE DISCUSSION

Deb Bass, NeHII; Kevin Conway, Nebraska Hospital Association; Dr. James McClay, UNMC

At the October meeting, the eHealth Council identified data governance as a topic to discuss at a future meeting. Deb Bass, Kevin Conway, and Dr. McClay helped Ms. Byers plan the discussion at today's meeting.

Deb Bass served on an AHIMA work group on data governance. She gave an overview of the seven principals of IT governance that AHIMA identified:.

- Transparency
- Integrity
- Protection
- Compliance
- Availability
- Retention
- Disposition

Ms. Bass noted the similarities between AHIMA's principles for data governance and the principals for trusted exchange. The council will discuss if or how the council would like to address data governance at the April meeting.

ADJOURNMENT

Marsha Morien adjourned the meeting at 12:01 P.M.

EHEALTH COUNCIL

April 12, 2018, 1:30 p.m. CT – 4:00 p.m. CT
Varner Hall, 3835 Holdrege Street, Lower Level, Board Room
Videoconferencing Available by Request

MINUTES

MEMBERS PRESENT: Kevin Borchert, Kevin Conway, Marty Fattig, Cindy Kadavy, Dr. Marsha Morien, Dave Palm, June Ryan and Todd Searls

MEMBERS PRESENT FOR PARTICIPATION ONLY: Jim McClay, Brian Sterud, Robin Szwaneck, and Dr. Delane Wycoff

MEMBERS ABSENT: Kathy Cook, Dr. Rama Kolli, Shawn Murdock, Joel Dougherty, Kimberly Galt, Max Thacker, Anna Turman, Linda Wittmuss, and Bridget Young

ROLL CALL NOTICE OF POSTING OF AGENDA NOTICE OF NEBRASKA OPEN MEETINGS ACT POSTING

Marty Fattig, Co-Chair, called the meeting to order at 1:35 p.m. Roll call was taken. There were eight voting members present. A quorum was not present to conduct official business. There four members on video conference for participation only.

APPROVAL OF MARCH 13, 2018 MINUTES*

Approval of the March 13, 2018 meeting minutes was tabled until the next meeting.

PUBLIC COMMENT

There was no public comment.

NEW MEMBER NOMINATION*

Two new members have been nominated to serve on the eHealth Council:

- Ashley Newmyer, Injury Epidemiologist, Division of Public Health, Department of Health and Human Services
- Gary Cochran, Associate Professor, University of Nebraska Medical Center

Max Thacker is resigning and has nominated Mary Devany, Director of eHealth, University of Nebraska Medical Center.

Due to no quorum present, the Council agreed by group consensus, to vote on the new members by email. Ms. Byers will get an email sent to members, along with Mary Devany's bio.

RECOGNITION OF MARSHA MORIEN ON HER RETIREMENT

Ms. Morien was recognized for her contributions to the eHealth Council and to health IT in Nebraska. Ms. Morien commented that eHealth and patient advocacy have been her passion and that she is proud of the work and progress the Council has made and the national recognition Nebraska has received in the area of eHealth. She is willing to assist with the transition of new co-chair. Ms. Morien was presented with flowers and an Admiralship in the Nebraska Navy in appreciation of her service to the Council.

NOMINATION OF A NEW CO-CHAIR*

Nominations were tabled until the next meeting.

HIE AND DATA GOVERNANCE DISCUSSION-NEXT STEPS*

The Council agreed to form a work group to address this issue and bring recommendations to the full council. Ms. Byers will send a note to Council members asking for volunteers to serve on the work group, as well as to recommend individuals outside of the Council who may be interested in serving on the Work Group. Kevin Conway will help Ms. Byers develop a draft charter for the work group.

It was recommended to get someone from Medicaid to serve on the Council as well as the work group.

Discussion occurred regarding data blocking is coming more and more to the forefront.

HOW HEALTH IT CAN SUPPORT PUBLIC HEALTH-

Dave Palm, Kathy Cook, Vineeth Yedulla and Maya Chilese

Vineeth Yedulla provided the NeHII presentation regarding data analytics.

Maya Chilese, Department of Health and Human Services, provided the overview of [the State Health Improvement Plan 2017-2021](#).

Members discussed the issue of funding sources in Nebraska to advance the goals of the State Health Improvement Plan. There is potential to have private sector funding, although most private sources of money may prefer to donate to a foundation rather than a state or federal agency.

Max Thacker was not present to give an update on the Nebraska Statewide Telehealth Network. Mr. Fattig said a letter was sent to participants notifying them that the telehealth network will sunset. Ms. Byers will send the notification to Council members. The system was getting outdated with T1 technology. It operated via volunteers and had no funding for staff. Both federal and Nebraska universal service funds were used to support the network.

The University of Nebraska Extension, the Nebraska Information Technology Commission, the Nebraska Public Service Commission, and Nebraska Library Commission have partnered with the Purdue Center for Regional Development to conduct a statewide Digital Readiness survey. The survey is open to the public and available until April 30. The survey is to research how Nebraskans are using broadband and the cost benefits.

ADJOURNMENT

With no further business, co-chair Mr. Fattig adjourned the meeting.

The meeting was adjourned at 3:55 p.m.

Meeting minutes were taken by Lori Lopez Urdiales and reviewed by Anne Byers, Office of the CIO.

Jan Evans:

Jan Evans began her career at the Iowa Department of Public Health in Des Moines, Iowa as a Family Health program manager in 1999. From there, she moved to IT and became an analyst, then a Project Manager. She worked on statewide initiatives for large projects such as the Birth Certificate Replacement effort and the Iowa Immunization Registry. Jan also served on the State of Iowa Information Technology Advisory Board. In 2006, Jan accepted a position at BlueCross BlueShield of Nebraska (BCBSNE) in the QA area as a Test Engineer. She was also a Release Coordinator before becoming an IT Development Manager in 2012 and then Director of Consumer Technology Solutions in 2014. More recently, Jan has additionally assumed responsibilities for the Data and API Center, along with the Data and Analytics teams. Jan likes progress and change and has welcomed the transformation of BCBSNE, as it moved from a waterfall model to an agile one; with a focus on servant leadership and living very impactful core values.

Jan has a degree from Iowa State University and has taken advantage of any learning opportunity presented to her since then. Jan volunteers and serves on the board for the American Cancer Society and is very passionate about this cause. Jan and her husband keep very busy following their two teenagers around to their activities. In the little other free time that is out there, Jan loves to be outside any time of year and also enjoys hosting friends and family whenever she can.

NITC eHealth Council
Data Governance Work Group Charter

1. Introduction

The Data Governance Work Group is an advisory group of the NITC eHealth Council.

2. Definition

Data governance is the overall management of the availability, usability, integrity and security of data used in an enterprise.

3. Purpose of Charter

The purpose of this charter is to provide operational guidance to the Data Governance Work Group.

4. eHealth Council Mission and Responsibilities

4.1 Council Mission

The mission of the Council is to foster the collaborative and innovative use of eHealth technologies through partnerships between public and private sectors, and to encourage communication and coordination among eHealth initiatives in Nebraska.

4.2 Council Responsibilities

4.2.1 Assist the Commission in developing, reviewing and updating the statewide technology plan.

4.2.2 Review the current status of healthcare information technology adoption by the healthcare delivery system in Nebraska;

4.2.3 Address potential security, privacy and other issues related to the adoption of interoperable healthcare information technology in Nebraska;

4.2.4 Evaluate the cost of using interoperable healthcare information technology by the healthcare delivery system in Nebraska;

4.2.5 Identify private resources and public/private partnerships to fund efforts to adopt interoperable healthcare information technology;

4.2.6 Support and promote the use of telehealth as a vehicle to improve healthcare access to Nebraskans;

4.2.7 Recommend best practices or policies for state government and private entities to promote the adoption of interoperable healthcare information technology by the healthcare delivery system in Nebraska, training, partnerships, and planning for the use of information technology in communities.

4.2.7 Review and make recommendations to the Commission on requests for funds from the Community Technology Fund.

5. Subcommittees

5.1 Subcommittees will be designated by vote of the eHealth Council to address specific topics.

5.2 Pursuant to provisions of Neb. Rev. Stat. § 84-1409(1), subcommittees of the Council shall not be required to provide notice of meetings.

6. Membership

Members of the Data Governance Work Group will include member of the eHealth Council as well as other interested stakeholders.

7. Chair

Members of the Data Governance Work Group may select a chair.

8. Charge

The Data Governance Work Group is charged with:

- Developing resources to improve awareness of what data governance is and the need for data governance policies and implementation within organizations.
- Developing resources, including a model data governance toolkit, to assist health care providers in Nebraska in developing and implementing data governance policies. The toolkit may address:
 - Data Vision
 - Data Strategy
 - Data Content Management
 - Key Elements of Data Quality
 - Data Dictionary Elements
 - Data Standards
 - Data Steward
 - Analytics Prioritization
 - Data Access
 - Analytical Visualization
 - Self-Serve Analytics
 - Data Literacy
- Promote the adoption of AHIMA's Information Governance Principles for Healthcare (IGPHC)[™]. The principles represent the vision for managing data. These guiding principles are as follows:
 - a) Accountability
 - b) Transparency
 - c) Integrity
 - d) Protection
 - e) Compliance
 - f) Availability
 - g) Retention
 - h) Disposition
 - i)
- Other activities which promote the development and implementation of data governance by health care providers in Nebraska.

9. Termination

The Data Governance Work Group will be terminated when the eHealth Council deems the Work Group has completed its charge or the eHealth Council deems the Work Group is no longer needed.