eHealth Council
March 16, 2009

Meeting Minutes

Members Present:
Vivianne Chaumont
Kimberly Galt
Dan Griess
Donna Hammack
Steve Henderson
Alice Henneman
Ron Hoffman, Jr.
Wende Baker (for C. J. Johnson)
Harold Krueger
Jeff Kuhr
Ken Lawonn (via phone –joined 15 minutes late)
David Lawton
Keith Mueller
John Roberts (phone)
Nancy Shank
September Stone
Delane Wycoff (phone)
Harris Frankel (phone—alternate for Delane Wycoff)

Opening Business

Roll Call, Notice of Posting of Agenda, Notice of Nebraska Open Meetings Act Posting, Approval of Minutes

Dan Griess called the meeting to order at 9:30. There were 16 members present. The meeting announcement and agenda were posted on the NITC website and on the Nebraska Public Meeting Calendar on March 9, 2009. A copy of the Nebraska Open Meetings Act was available on the wall.

Keith Mueller moved to approve the August 13, Oct. 2, and Dec. 2 minutes as presented.   Kim Galt seconded the motion. Roll call vote: Chaumont-Yes, Galt-Yes, Griess- Yes, Hammack-Yes, Henderson-Yes, Henneman-Yes, Hoffman-Yes, Baker-Yes, Krueger-Yes, Kuhr-Yes, Lawton-Yes, Mueller-Yes, Roberts-Yes, Shank-Yes, Stone-Yes, Wycoff-Yes. **Motion carried.**

Public Comment

There was no public comment.

Health IT Stimulus Funding

Lt. Governor Rick Sheehy discussed stimulus funding opportunities for health IT. $300 million has been allocated for state grants to promote health IT. At this point, few details are known. Nebraska could receive $34 million for implementation or planning.   In order to qualify for this funding, the State of Nebraska will need to submit a plan for eHealth.   The eHealth Council is charged with developing the plan.   Lt. Governor Sheehy stressed the importance of transparency.   The State of Nebraska has

created a website (www.recovery.nebraska.gov) to provide information on funding received by the state. The eHealth Council will probably play a role in monitoring grant funds. Plans will probably be due in 2009 and funds will be distributed in 2010.

Lt. Governor Sheehy also said that he will work with the offices of Senator Johanns or Senator Nelson to urge the Treasury Department to act on applications for 501(c)3 status for health information exchanges.

Lt. Governor Sheehy urged the eHealth council to take a broad view when developing a state plan and look at a time frame of up to five years.

Nancy Shank suggested that the eHealth Council could help spread the word about funding opportunities. She also suggested that the eHealth Council could be the state-designated entity to disperse funds.   Lt. Governor Sheehy said that was a possibility, although some issues would have to be resolved.

Kim Galt asked about the approval process for the plan.   The plan would be approved by the eHealth Council, the NITC, and the Governor.

Keith Mueller commented that it may be wise to also look at other non-health IT funding programs such as broadband. Lt. Governor Sheehy commented that he will be meeting with the Public Service Commission next week to discuss broadband.

Needs of Surveyors

Helen Meeks discussed the needs of surveyors to access information.   When conducting surveys and inspections, staff members need access to information.   They need to look at records to determine if deficient practices have occurred.   They may need to take away copies of evidentiary information.   CMS is talking to states about access to electronic information.   Surveyors may need staff assistance available and may need to print copies.   Ms. Meeks suggested contacting her office to resolve issues that may arise during a survey.   She mentioned the importance of training staff to use electronic records.

Membership

Terms of the following members have expired:

- o Steve Henderson
- o Senator Annette Dubas
- o Congressman Jeff Fortenberry
- o Dr. Delane Wycoff
- o John Roberts
- o Harold Krueger
- o Jeff Kuhr
- o Ron Hoffman, Jr.
- o Nancy Shank
- o Henry Zach

Henry Zach declined serving on the eHealth Council another term, leaving an opening on the eHealth Council. All other members up for renewal indicated a willingness to serve another term. Joyce Beck, the CEO of Thayer County Health Systems, was suggested as a nominee to fill Henry Zach's position.

Wende Baker was previously nominated to replace C.J. Johnson as the representative of SNBHIN. There was no quorum at the meeting, however, so her nomination still needs to be approved.

Nancy Shank moved to the nominations of Steve Henderson, Senator Annette Dubas Congressman Jeff Fortenberry, Dr. Delane Wycoff, John Roberts, Harold Krueger, Jeff Kuhr, Ron Hoffman, Jr., Nancy Shank, Wende Baker, and Joyce Beck. Kim Galt seconded the motion. Roll call vote: Chaumont-Yes, Galt-Yes, Griess- Yes, Hammack-Yes, Henderson-Yes, Henneman-Yes, Hoffman-Yes, Baker-Yes, Krueger-Yes, Kuhr-abstain, Lawton-Yes, Mueller-Yes, Shank-Yes, Stone-Yes, Wycoff-Yes. Motion carried.

Updates and Reports

HISPC

Legislative Update—As of March 12, 2009. Neb. Rev. Stat. 71-8403 stipulates that authorizations for release of medical records are valid for a maximum period of 180 days. At a hearing before the Health and Human Services Committee, Brenda Decker proposed an amendment to LB288 (the Health and Human Services Clean Up Bill) to eliminate the 180-day restrictions. LB288 (Health and Human Services Clean Up Bill) has been designated as a priority bill by the Health and Human Services Committee. It still has not been placed on general file and no amendments have been filed, though.

The eHealth Council and E-Prescribing Work Group also identified a potential barrier to e-prescribing in a Nebraska statute that requires pharmacists to keep paper copies of prescriptions. A change to this statute which would allow pharmacists to keep copies of prescriptions in a readily retrievable format was included in LB220. Lt. Governor Sheehy provided a letter supporting the provision to the Health and Human Services Committee. LB 220 is on General File.

Nebraska HISPC. The Nebraska HISPC has published a report on its activities over the past year. The report is available at
http://www.nitc.nebraska.gov/eHc/meetings/documents/2009March/REV_DRAFT_HISPCII_Summary_Report.pdf .

HISPC Multi-State Collaboratives. Participants in the nine multi-state collaboratives addressing health information security and privacy issues met in Washington, DC on March 4-6. Materials produced by the collaboratives will be available from the website of the Office of the National Coordinator (http://www.hhs.gov/healthit/) after March 31. Nebraska has participated in the Adoption of Standards Collaborative.

The Office of the National Coordinator has just announced an extension of 3-4 months to the HISPC contracts with participating states. Possibilities include using other collaboratives' materials and continuing the work of the collaborative in which Nebraska participated. Nebraska has been invited to participate in a dialogue between the upper Midwest states (ND, SD, IA, NE, MN, WI) to address privacy and security barriers to HIE. Council members indicated support for using HISPC continuation funding to provide assistance in consumer education efforts. Council members also indicated support for entering into discussions with the upper Midwest states.

Telehealth

Donna Hammack reported that discussions continue with the FCC on the definition of rural which is used to determine eligibility for funding from the rural health care fund. The current definition would exclude several Nebraska hospitals from receiving funding. Hospitals eligible under the old definition have been temporarily receiving funding under a grandfather clause. An OAT grant is being submitted to refresh technology and to expand teletrauma and clinical services. A Congressional appropriation of $100,000 was also made.

PHR Work Group

The PHR Work Group has proposed the following conclusions and recommendations.

Conclusions

- Significant progress is being made in PHR interoperability standards and in the development of privacy and security protections.

- PHRs which are interoperable with other types of electronic medical records offer more value and convenience to consumers by reducing the need to personally enter data and by improving the timeliness, availability and accuracy of data.

- PHRs with financial management functions may offer further value to consumers by providing cost and benefit information to support decision making.

- PHRs which are interoperable may offer more value to health care providers. PHRs populated by data from providers may be viewed as being more reliable by health care providers.

- PHR adoption will require consumer education and incentives. Consumers may be more receptive to PHR adoption in conjunction with certain events such as the birth of a child, enrollment in college, the diagnosis of a chronic disease, or the need to manage care of a parent.

- Health care providers may also require education in incorporating PHRs into patient care and assistance in making adjustments in the practice workflow.

- PHRs as part of a broader health management program can help consumers reduce their health risks, better manage their health, and reduce their health care expenditures.

- PHRs as part of a broader health management program can help employers reduce their health care related costs.

Recommendations

o The State of Nebraska should explore making immunization data from the state's new immunization registry available to consumers through PHRs.

o Efforts should be made to encourage Nebraska's health information exchanges to offer PHRs or to make patient data available through third-party PHRs in the future.

o The utilization of PHRs in conjunction with a broader health management program for State employees should be periodically evaluated as a potential way to reduce health care costs. Continued developments in PHRs may reduce implementation costs and increase the ROI.

o The utilization of PHRs in conjunction with a broader health management program for Medicaid recipients should be periodically evaluated as a potential way to reduce health care costs. Continued developments in PHRs may reduce implementation costs and increase the ROI.

o The eHealth Council should look for opportunities to partner with other organizations in educational efforts targeting consumers and providers on the use of PHRs.

o Continued research on the benefits of PHRs and the ROI for PHRs should be done.

Kim Galt suggested revising the second recommendation to include other providers and to be less prescriptive about the role of health information exchanges in providing PHRs.

Steve Henderson moved to remand the second recommendation to the PHR work group for revision and to approve the other recommendations.   Kim Galt seconded the motion. Roll call

vote: Galt-Yes, Griess- Yes, Hammack-Yes, Henderson-Yes, Henneman-Yes, Hoffman-Yes, Baker-Yes, Krueger-Yes, Kuhr-Yes, Lawton-Yes, Mueller-Yes, Shank-Yes, Stone-Yes, Motion carried.

E-Prescribing

Kim Galt reported that the E-Prescribing Work Group has identified a number of issues related to e-prescribing and is drafting recommendations.

Public Health Work Group

Anne Byers, David Lawton, and Ann Fetrick drafted a charge and potential list of members for a Public Health Work Group.   The group was supportive of the charge and membership list. Kim Galt suggested broadening the membership to include EMS and other facilities.

Action Plan Development

Anne Byers reported that it is time for the Council to begin considering action items to be included in the statewide technology plan developed annually by the NITC. She suggested the Council's primary action item focus on the development of a state plan for health information exchange.   Health information security and privacy is another area that should be considered for inclusion in the statewide technology plan.

Ms. Byers presented draft principles and strategies as a starting point for the discussion on the development of the state plan for health information exchange.   Keith Mueller suggested including a statement that technology should support work processes--rather than making work processes more cumbersome technology should simplify and improve work processes. Kim Galt suggested including a statement on the need for health information to protect patient safety.   Keith Mueller suggested including a strategy on the development of telecommunications infrastructure.

The Council agreed to form a work group to develop a state plan for health information exchange. Representatives of the state's four health information exchanges will be invited to participate. David Lawton and Nancy Shank volunteered to serve on the committee. Keith Mueller or a representative of UNMC will also participate.

The Council asked Anne Byers to prepare a charge to the work group and a timeline.   Ms. Byers suggested starting out with six-month time frame.   That could be adjusted if necessary to meet deadlines for stimulus funding opportunities.

The meeting was adjourned.

Minutes taken by Anne Byers, Nebraska Information Technology Commission