# EHEALTH COUNCIL

April 1, 2011, 9:30 PM CT – 12:00 PM noon CT Lincoln: Nebraska Educational Telecommunications, 1800 N. 33rd, Board Rm., 1st Floor Omaha: UNMC, Durham Research Center Room 1006\* **MINUTES** 

#### MEMBERS PRESENT

Wende Baker (Lincoln site) Joyce Beck (Hebron) Vivianne Chaumont (Lincoln site) Joni Cover (Lincoln site) Joel Dougherty (Lincoln site) Donna Hammack (Lincoln site) Rama Kolli, Alt. for Susan Courtney (Lincoln site) Ken Lawonn (Omaha Site) Sue Medinger (Lincoln site) Marsha Morien (Omaha Site) Greg Schieke (Lincoln site) Lianne Stevens (Lincoln site) Patrick Werner, Alt. for Steve Urosevich (Lincoln site) Delane Wycoff (North Platte)

**MEMBERS ABSENT:** Senator Annette Dubas, Congressman Jeff Fortenberry, Kimberly Galt, Alice Henneman, Harold Krueger, Kay Oestmann, John Roberts, Nancy Shanks

Guests and Staff: Anne Byers, Lori Lopez Urdiales, Deb Bass, and Chris Henkenius

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

The meeting notice was posted to the NITC and Public Meeting Website on March 22, 2011. The agenda was posted on March 25, 2011.

#### **APPROVAL OF SEPTEMBER 13, 2010 MINUTES**

Mr. Lawonn pointed out that his last name was misspelled in the NeHII update section.

Mr. Hammack moved to approve the <u>September 13, 2010 minutes</u> with the noted correction. Ms. Baker seconded. Roll call vote: Baker-Yes, Beck-Yes, Chaumont-Yes, Kolli-Yes, Cover-Yes, Dougherty-Yes, Hammack-Yes, Lawonn-Yes, Medinger-Yes, Morien-Yes, Schieke-Yes, Stevens-Yes, Werner-Yes, and Wycoff-Yes. Results: Yes-14, No-0, Abstain-0. Motion carried.

# **PUBLIC COMMENT**

There was no public comment.

#### MEMBERSHIP (Renewals and New Members)

The terms of several members were up for renewal, including Lianne Stevens, September Stone, Ken Lawonn, Sue Medinger, Marsha Morien, Vivianne Chaumount, and Greg Schieke. Laura Meyers, Nebraska Statewide Telehealth Network, was nominated as a new member. NITC staff is waiting to hear from the Lt. Governor's Office regarding the legislative and congressional memberships.

Ms. Cover moved to approve the slate of membership renewals and the nomination of Laura Meyers. Mr. Dougherty seconded. Roll call vote: Wycoff-Yes, Werner-Yes, Stevens-Yes, Schieke-Yes, Morien-Yes, Medinger-Yes, Lawonn-Yes, Hammack-Yes, Dougherty-Yes, Cover-Yes, Kolli-Yes, Chaumont-Yes, Beck-Yes, and Baker-Yes., Results: Yes-14, No-0, Abstain-0. Motion carried.

# UPDATES FROM RELATED INITIATIVES

**NeHII.** Deb Bass reported that NeHII currently has 1200 users. There has been an increase in eprescribing. A letter of understanding has been signed with the State of Wyoming to provide services. Discussion meetings with Medicaid have been going well. The exchange of immunization data is in the testing phase. Membership is expanding to include chiropractors. Two pharmacies in Omaha have signed participation agreements. NeHII's annual meeting will be held on July 21<sup>st</sup> in North Platte. Council members were invited to attend.

**eBHIN.** Wende Baker distributed the BHIN Fact Sheet Winter 2010/2011. Equipment has been purchased and applications have been installed. Cooperative testing will be done. Great partnerships have been developed with non-profit organizations. This last quarter the project has been working on referral capabilities. In May, training will be developed and will hopefully occur in late spring.

**Nebraska Statewide Telehealth Network.** Laura Roberts gave a report on the Nebraska Statewide Telehealth network. A written report was provided in the meeting materials. The network had over 2,500 consultations last year. The six-month report is being developed that is due in May. The project has been in discussions with Veterans Administration to provide services. Neighboring states have been contacted regarding a regional telehealth network effort. Discussions have also occurred with the FCC regarding grandfathering sites eligible for support from the universal service fund. Critical Access Hospitals are now represented on the Governing Committee.

**SENHIE.** Joyce Beck gave an update on SENHIE. A new EMR will go live on July 1. In July, testing for meaningful use will occur. Telehealth equipment has been installed in the emergency room. Project staff have been providing presentations and promoting electronic health records all across the country.

**Medicaid.** Vivianne Chaumount gave an update on the EHR incentive program being implemented by the Centers for Medicare and Medicaid Services (CMS). Under this program, states will distribute incentive payments to qualified Medicaid providers that adopt, implement or upgrade, and meaningfully use certified EHR technology. It is anticipated that Nebraska will submit its State Medicaid Health IT Plan (SMHP) this summer. In preparation, a survey of approximately 3,200 eligible professionals will be conducted. DHHS anticipates receiving CMS approval and beginning EHR Incentive program registration in late 2011. The Department of Health and Human Services has an <u>EHR Incentive Program</u> web page with more specific information and links about the incentive program.

**Wide River TEC, Greg Schieke.** Since the last Council meeting, the project has focused on the following activities:

- **Recruiting participants**. Currently primarily in rural settings, the project has 500 participants and over 100 clinics. The rural area is an ONC priority. The project is now working on urban participants. The goal is to reach 1,129 participants. Fees will be waived for priority providers.
- Working with critical access hospitals. In February, the project received funding to serve all critical access hospitals with meaningful use service.
- **Conducting educational events.** Quarterly, the project conducts events and a vendor fair is included. The next event will be combined with SIMRO in Omaha. After the Omaha event, the project will go out to a totally different part of Nebraska that has not been reached.
- Integrating EHR in health curriculum. The project is working with the University of Nebraska-Lincoln to provide grants for updating health curriculum. The second round of funding for instructors is now open. The project is offering an online accreditation training program for clients and partners of Wide River TEC at a cost of \$150 for each session.

**Metropolitan Community College.** Ms. Byers stated that the first group of students will graduate from Metropolitan Community College's health IT program. Ms. Morien stated that a colleague was participating in the program and was very pleased.

**OneWorld Community Health Center.** Joel Dougherty gave an update. Heartland Community Health Network serves five community health centers in Nebraska and Iowa. In regards to health information exchanged, the project continues to work with eBHIN and Wide River TEC.

#### UPDATES ON ONC PRIORITY AREAS

Updates on ONC priority areas (lab reporting, e-prescribing, summary care document, provider directory, and public health) will be covered in NeHII presentation. Members can ask questions for clarification during or after the presentation.

Ms. Bass reported that Erica Galvez, the ONC Project Officer assigned to Nebraska will be here in July to visit the project. In addition, site visits to other HIE projects will be conducted.

Ms. Byers participated in a meeting with the Department of Health and Human Services and the Veteran's Administration regarding sharing best practices. It was agreed to invite the VA to a future eHealth Council meeting.

#### **UPCOMING ACTIVITIES**

Anne Byers, Community I.T. Manager

In the next few months, Ms. Byers alerted the members that the Council will likely need to update the state eHealth plan as well as develop an evaluation plan.

#### CONSENT AND DISCLOSURE POLICIES TO ALLOW THE EXCHANGE OF DATA BETWEEN NEHII AND EBHIN, Deb Bass and Wende Baker

Copies of the NeHII Fact Sheet–March 2011 and the eBHIN Fact Sheet–Winter 2011/12 were distributed. Deb Bass gave an update on NeHII. NeHII has been a leader in health information exchange nationally.

**NeHII Opt-Out Statistics** 

- Opt-out rates have remained below 3% since the implementation of NeHII
- Intended for health care professionals access only
- For treatment, payment, and public health purposes
- Personal health information will not be sold

What Health Information Will Be Shared

- Lab and X-ray Results
- Medication and Immunization History
- Transcribed Diagnostic and Treatment Records
- Records of Allergies and Drug Reactions
- Other Clinical Reports Created After the Start Date of NeHII in 2009

Participating providers will generally not share records related to:

- Alcohol or Substance Abuse Treatment Programs
- Emergency Protective Custody Proceedings
- Predictive Genetic Testing Performed for Genetic Counseling
- HIV Testing
- STD Testing or Treatment of Minors Consented to by the Minor
- Mental Health Treatment in Iowa

However, information about test results may be available or referred to elsewhere in the record.

Opt-In to Opt-Out/eBHIN to NeHII:

- Greatest challenge: policy and consent agreements
- Plan to use NHIN Direct/Statewide Provider Directory from the EMR to the HIE
- Use case for data flow
- Approval by the Privacy/Security Committees
- Go live date planned Summer 2011

Wende Baker gave a presentation on eBHIN. Statistically persons with behavioral health disorders tend to die 25 years sooner than those without behavioral disorders. This statistic is what drives eBHIN's goals.

Background:

- eBHIN participants are behavioral health and alcohol/drug abuse treatment programs
- HIPAA applies
- More stringent 42 CFR Part 2 also applies
- The challenge: exchanging specially-protected B/H and alcohol/drug abuse program information through an electronic health information exchange

**Operating Features** 

- Based on centralized data repository and standardized patient record exchange
- Uses an opt-in platform
- HIPAA & 42 CFR Part 2 Compliant
- Utilizes software developed by NextGen Healthcare Information Systems HIE integrated with BH EMR
- EMR posted in the Certified Health IT Products List (CHPL)

Challenges:

- Privacy and Security most consistent concerns expressed -- skepticism about ability to meet standards
- Technical requirements extend design investments
- Limited funding base for Behavioral Health makes stakeholder investments scant

Successes:

- Standard authorization data set made a reasonable place to start
- Consent Development process has built stakeholder confidence in standards compliance
- Capital Investment ARRA and Regional BH Authority contributions have brought "buy-in" down and provided resources for development

Baird Holm is assisting the project with the consent form. BHIN wants the consent form to be understandable to the consumer.

# HEALTH INSURANCE EXCHANGE

J.P. Sabby, Nebraska Department of Insurance

There are currently 210,000 uninsured persons in the State of Nebraska.

Current Status of Federal PPACA (Patient Protection and Affordable Care Act)

- States are required to begin planning and implementation
- Current lawsuits pending- A final decision will need to be made by the U.S. Supreme Court. This may not occur soon
- Now seeking public input

Statutory Timeline for Exchange Creation

- Each state will have some type of an Exchange
- Secretary of Federal HHS must certify, by January 1, 2013, a state's plan to operate a qualified exchange
- If a state does not operate an Exchange, the federal government will operate it.
- Each state must have the Exchange operational by January 1, 2014
- Includes both individual market and small group market Exchanges (these may be combined)
- The Exchange must be self-sustaining by 2015

Discussion Points Our State Needs to Address:

- 1. How should exchanges be governed? Should they be run by a state agency, a nonprofit or a quasi private public partnership?
- 2. What can be done to make exchanges attractive to employers?
- 3. How should the exchanges fulfill their responsibility to make both descriptive and evaluative information available to consumers?

The Nebraska Department of Insurance is in the process of determining if this is feasible for Nebraska. DOI has conducted five <u>stakeholder meetings</u> across the state to get input. They are also conducting research to determine if there is a sound business model. An RFI (Request for Information) for IT has

been released. Mr. Sabby asked for names of persons who would be interested The Center for Medicare and Medicaid Services (CMS) as well as suggestions for reaching more citizens.

# **BROADBAND MAPPING AND PLANNING**

Ms. Byers reviewed the broadband maps and available layers of data. Service providers were not required to provide data, so not all providers are represented. Since the Nebraska and national maps are now available, more service providers have expressed interest in participating. National Broadband Map—<u>broadbandmap.gov</u> Nebraska Broadband Map—<u>http://broadbandmap.nebraska.gov/</u>

# ADJOURNMENT

With no further business, Ms. Byers adjourned the meeting at 11:50 a.m.

The meeting minutes were taken by Lori Lopez Urdiales and reviewed by Anne Byers, Office of the CIO/NITC.