

**EHEALTH COUNCIL
December 10, 2007
1:30 PM - 4:30 PM**

Nebraska Educational Telecommunications, 1800 N. 33rd, Board Rm., 1st Floor, Lincoln

Video Conference Sites:

Alliance: Alliance Learning Center-Rm. 123, 1750 Sweetwater St.

North Platte: Educational Service Unit #16, 1221 W. 17th, Distance Learning Room

Omaha: UNMC (University of Nebraska Medical Center), University Hospital –

MINUTES

MEMBERS PRESENT:

Daniel Griess, Box Butte General Hospital, Alliance (Alliance site)
Dennis Berens, Department of Health and Human Services, Office of Rural Health
Joni Cover, Nebraska Pharmacists Association
Dr. Kimberly Galt, Creighton University School of Pharmacy and Health Professions
Donna Hammack, Nebraska Statewide Telehealth Network and St. Elizabeth Foundation
Steve Henderson, Office of the CIO
Alice Henneman, University of Nebraska-Lincoln Extension in Lancaster County
Ron Hoffman, Jr., Mutual of Omaha (Omaha site)
Ken Lawonn, NeHII and Alegent Health (Omaha site)
Dr. Keith Mueller, UNMC College of Public Health (Omaha site)
Nancy Shank, Public Policy Center
Mary Steiner, Dept of Health and Human Services, Finance and Support, Medicaid
September Stone, Nebraska Health Care Association
Dr. Delane Wycoff, Pathology Services, PC (North Platte site)
Henry Zack, HDC 4Point Dynamics

MEMBERS ABSENT: Susan Courtney, Blue Cross Blue Shield; C.J. Johnson, Southeast Nebraska Behavioral Health Information Network and Region V Systems; Jim Krieger, Gallup; Harold Krueger, Western Nebraska Health Information Exchange and Chadron Community Hospital; Jeff Kuhr, Three Rivers Public Health Department, Fremont; David Lawton, HHSS, Public Health Assurance; Senator Mick Mines, Nebraska Legislature; Kay Oestmann, Southeast District Health Department; John Roberts, Nebraska Rural Health Association; and Marie Woodhead (representative for Congressman Jeff Fortenberry)

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

Dr. Galt called the meeting to order at 1:30 p.m. Roll call was taken. A quorum existed to conduct official business. It was stated that the meeting announcement was posted on the NITC Web site and on the Nebraska Public Meeting Calendar on Oct. 18, 2007. The agenda was posted on November 28, 2007. A copy of the Nebraska Open Meetings Act was posted on the south wall.

APPROVAL OF OCTOBER 9, 2007*

Mr. Berens moved to approve the [October 9, 2007 minutes](#) as presented. Mr. Henderson seconded the motion. All were in favor. Motion passed by unanimous voice vote.

PUBLIC COMMENT

There was no public comment.

NEW BUSINESS

Relationships with Vendors—Co-Chairs

Donna Hammack arrived at the meeting.

Dr. Galt prepared and read the following statement regarding the eHealth Council's stance regarding vendors:

“Inherent in the charge to the eHealth Council for the State of Nebraska are public and private health care needs and concerns of the states citizens. As such, the council will need to be aware of both public programs and services that are actively engaged in eHealth within the state. The council is respectful of the boundaries and responsibilities of the charge to the citizens. The council will work to conduct its deliberations so that it does not, or is not perceived as interfering with the normal business practices. It is the council's position that:

- ◆ Private business entities will generally not be invited for vendor product marketing presentations at a council meeting, unless a specific aspect of the innovation or service is deemed of educational value to the council's work to meet its' charge.
- ◆ A mechanism for vendor listings should be considered at future actions of the eHealth Council as the need is deemed.”

It was decided that including the statement in the minutes was sufficient.

Ideas for Further Action--Kim Galt

Kim Galt asked members to routinely submit ideas for further action to the co-chairs and Ms. Byers.

FCC Rural Health Care Pilot Grant Update—Dan Griess and Harold Krueger

Mr. Griess gave a brief update on the FCC Rural Health Care Pilot Grant received by the Nebraska Rural Health Care Network, a consortium of nine hospitals in the Panhandle. The \$19 million grant is for three years and requires a 15% match. The grant will fund the development of an 800 mile fiber loop. The Nebraska Rural Health Care Network is working on a new model for supplying the match after their original proposal for the match was not approved.

UNMC PERSONAL HEALTH RECORD—Marsha Morien, Project Leader, UN Center for Biosecurity, College of Public Health

UNMC launched its personal health record project in January 2007. Over 3,000 students were invited to participate in the program. There are 112 students currently participating.

What is a PHR? PHRs have the following attributes:

- Individuals decide which part of their PHR can be accessed – By whom and how long
- Information from one's lifetime
- Information from all healthcare providers
- Accessible from any place at any time
- Private and secure
- Individuals can see who entered each piece of data, where it was transferred from, and who has viewed it.
- Permits easy exchange of information with other health information systems and health professionals

HDC PHR4me Solution (www.phr4me.com) is a secure web portal. It allows patients to create and maintain their personal and family health information. Providers may with patient consent access and update a patient's relevant medical information and visit information.

PHR4me includes the following information categories:

- Demographics & Insurance
- Related Parties & Emergency Contacts
- Patient & Family History (Chronic Conditions)
- Life Style / Habits / Directives
- Laboratory Test Results
- Allergies
- Immunizations
- Medications

PHR next steps include:

- Electronic transfer of laboratory test results to the PHR
- Expansion of sites
- Subset of UNO student population
- Subset of state government employees
- Qualitative Research

Research on the program will focus on answering the following questions:

- What are students' perceptions about personal health information (PHIM)?
- What distinguishes individuals who have adopted or are ready to adopt personal health information management from those who are not interested in adopting the behavior?
- What motivates individuals to practice personal health information management?
- What are anticipated barriers and concerns to personal health information management?

NGA STATE ALLIANCE FOR EHEALTH AND THE INFORMATION COMMUNICATION AND DATA EXCHANGE TASK FORCE—Dr. Steve Hinrichs

Dr. Hinrichs wanted to clarify that he and Ms. Morien have no financial interest in the company or any entity involved with University of Nebraska Medical Center's PHR projects.

Dr. Hinrichs gave an overview of the NGA State Alliance for eHealth and the Health Information Communication Data Task Force. The Task Force has made recommendations regarding Medicaid and is developing additional recommendations which will be presented to the members of the State Alliance for eHealth next year. Dr. Hinrichs identified several keys to health IT adoption including standards, employee benefit programs/insurance, Medicaid, and patient/client registries.

The task force is examining a number of issues including:

- What are the roadblocks to make a statewide patient/client registry happen?
- What will it take to improve intra-state exchanges? The most likely result will be that states need a coordinating body.
- What will it take to improve inter-state exchanges?
- What is the need to provide resources and funding for eHealth initiatives?
- How can we monitor eHealth activities? The recommendation will most likely be that states should review and monitor the purchase of an electronic health care system.
- Are standards for an eHealth systems and electronic records doable and needed?

Dr. Hinrichs suggested the following areas be considered by the eHealth Council:

- Exchanging laboratory data
- Marrying PHRs with electronic exchange
- Leveraging Medicaid and employee health benefits
- Developing a statewide patient/client registry

Dr. Hinrichs invited members to contact him if they would like to discuss any of the issues presented. Ms. Byers will send members Dr. Hinrichs' contact information.

State Alliance for eHealth Reports:

- ◆ [Health Information Communication and Data Exchange Task Force Report:](#)
- ◆ [Health Information Protection Task Force Report | Appendix B.2](#)
- ◆ [Health Care Practice Task Force Report \(October 3, 2007\)](#)
- ◆ [Health Care Practice Task Force Report \(August 15, 2007\)](#)

HISPC UPDATE

[**AHRQ/RTI National HISPC Update And Nine-State Collaborative Proposal— Anne Byers**](#)

Dr. Lawton and Ms. Byers have been working on a nine-state collaborative proposal to address the adoption of standard business practices regarding health information security and privacy, especially those concerning authentication and audit. RTI and the Office of the National Coordinator have provided feedback and comments for revision of the proposal. The proposal will also include some funding for the Nebraska HISPC to continue addressing privacy and security issues. The submission deadline is December 21. Collaboratives will be notified in January.

Nebraska HISPC Update— Dennis Berens

The eHealth Council has established the Health Information Security and Privacy Committee (HISPC) 2. Mr. Berens distributed notes on the work group. The HISPC 2 has established education and legal work groups. He stated he is very pleased with the work group's progress so far. His number is 471-2337 if anyone would like more information.

[**OVERVIEW OF PLANNING PROCESS FOR STATEWIDE TECHNOLOGY PLAN AND PLANNING CONSIDERATIONS**](#) - Anne Byers

The NITC is charged with developing a statewide vision and strategic plan to guide investments in information technology and also adopts standards and guidelines. Senator Annette Dubas will be replacing Senator Mick Mines on the NITC and the eHealth Council.

The NITC (with input from councils and staff) reviews and approves strategic initiatives. Each advisory council is charged with developing action plans. The NITC Advisory Councils are the Technical Panel, Community Council, eHealth Council, Education Council and the State Government Council. The NITC approves the statewide technology plan.

The eHealth Council plan of work will be incorporated into the plan as the eHealth action plan. Each strategic initiative may have its own unique planning cycle which doesn't quite fit the NITC's annual planning cycle. Some initiatives may have a plan to develop a plan. Plans may include an opportunity track.

Council members and staff are often involved in the implementation of the action plans. Collaboration with other entities is also often required. Policy recommendations approved by the NITC are handled officially through Lt. Governor Sheehy.

The Council may make recommendations that will require funding or legislative action to implement. A number of dates to keep in mind for possible legislative or budgetary actions were identified:

April—Last opportunity for introducing legislation to conduct an interim study or to hold a public hearing

Mid-July to early August— Agency budget requests are being developed.

Oct—eHealth Council should approve recommendations requiring funding or legislative action

Nov—eHealth Council should present recommendations requiring funding or legislative action to the NITC.

Dec.1—Lt. Governor Sheehy can present recommendations to the Legislature and the Governor.

DEVELOPING A PLAN OF WORK — Co-Chairs

Members reviewed the charge to the eHealth Council:

- Reviewing the current status of healthcare information technology adoption by the healthcare delivery system in Nebraska;
- Addressing potential security, privacy and other issues related to the adoption of interoperable healthcare information technology in Nebraska;
- Evaluating the cost of using interoperable healthcare information technology by the healthcare delivery system in Nebraska;
- Identifying private resources and public/private partnerships to fund efforts to adopt interoperable healthcare information technology;
- Supporting and promoting the use of telehealth as a vehicle to improve healthcare access to Nebraskans; and
- Recommending 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.

Members discussed ideas for future study and/or action. Dr. Mueller commented on the need to evaluate both the costs and the benefits of using interoperable healthcare information technology. He also commented that the user needs to be kept in mind. Ms. Shank and Mr. Griess stressed the importance of developing a sustainable business model. Ms. Hammack mentioned that the policies and regulations regarding acceptable use of telehealth systems supported by the Universal Service Fund Rural Health Care Program is a barrier to the utilization of telehealth in the State. Ms. Byers will work with Ms. Hammack to develop a proposed action plan dealing with this issue. Ms. Byers will also work with Mr. Berens and Dr. Lawton to develop a proposed action plan for the HISPC committee and workgroups.

It was agreed that members should send their ideas and input to Ms. Byers by January 11th. These will be shared at the next council meeting.

Although ideally all councils will have their action items fully developed prior to the NITC's next meeting, Mr. Henderson mentioned that the NITC would most likely be accommodating if a council needed more time to fully develop action items.

CONCLUDING COMMENTS

Dr. Galt thanked the members for attending and encouraged them to give considerable thought to the council's charge and action items.

NEXT MEETING AND ADJOURN

With no further business, Dr. Galt adjourned the meeting at 4:00 p.m.

Meeting minutes were taken by Lori Lopez Urdiales and reviewed by Anne Byers and the council co-chairs.