eHEALTH COUNCIL

March 6, 2020 9:30-11:30 a.m. CT
Nebraska Hospital Association, Board Room
3255 Salt Creek Circle
Lincoln, NE 68504

MINUTES

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

Mr. Fattig called the meeting to order at 9:30 a.m. There were eight voting members present at the time of roll call. A quorum existed to conduct official business. Meeting notices were posted on the State of Nebraska Public Meeting Calendar and NITC websites on February 25, 2020. The meeting agenda was posted on Feb. 26, 2020. A copy of the Nebraska public meeting law was available on the table by the projector.

Members Present: Kevin Borcher, Gary Cochran (video conferencing, non-voting), Kevin Conway, Marty Fattig, Cindy Kadavy (video conferencing), Dave Palm, Todd Searls (video conferencing, non-voting), Brian Sterud, Heather Wood, and Bridget Young.

Members Absent: Kathy Cook, Jan Evans (tried to connect via video conferencing, but was unable to participate), Dr. Jim McClay, Ashley Newmyer, Jina Ragland, and Anna Turman

APPROVAL OF OCTOBER 15, 2018 MINUTES*

There were no corrections to the minutes. Mr. Palm moved to approve the minutes as corrected. Ms. Wood seconded.

Roll call vote: Borcher-Yes; Conway-Yes; Fattig-Yes; Kadavy-Yes; Palm-Yes; Sterud-Yes; Wood-Yes; and Young-Yes. Results: Yes-8, No-0, and Abstained-0. Motion carried.

NOMINATION OF NEW MEMBER

Dr. Larra Petersen-Lukenda is no longer with the DHHS Division of Medicaid and Long-Term Care. She has recommended that Allison Wisco represent the DHHS Division of Medicaid and Long-Term Care on the eHealth Council. Kevin Borcher moved to approve her nomination. Dr. McClay seconded.

Roll call vote: Borcher-Yes; Cochran-Yes; Cook-Yes; Fattig-Yes; McClay-Yes; Newmyer-Yes; Palm-Yes; Ragland-Yes; Wood-Yes; and Young-Yes. Results: Yes-10, No-0, and Abstained-0. Motion carried.

NEHII UPDATE*
Kevin Conway, NEHII

NEHII has continued to add data-sharing participants with 20 general acute hospitals, 41 Critical Access Hospitals, two children's hospitals, and 153 ambulatory clinics sharing data. Two specialty hospitals—OrthoNebraska and Madonna Rehabilitation Hospital—are in progress. NEHII is also working to include long-term care facilities as data-sharing participants. Five facilities will be going live soon with an additional 15 facilities in progress.

Data currently available includes:

- Clinical data extract which includes approximately 3.6 million patient records
- All medications data
- Payor eligibility files

In the near future, claims data from CMS (through the Qualified Entity program), social factors, and other payor claims data will be available.

NEHII's enterprise data governance addresses four areas:

- Compliance/HIPAA
- Technical Aspects
- Operational
- Information Technology Infrastructure Library (ITIL)/IT service management (ITSM)
- Policy

NEHII is transitioning to a new health information exchange platform in 2020. The new Intersystems platform will be able to ingest greater amounts and types of data. It will support API integration.

NEHII's analytics capabilities are increasing. NEHII is the first HIE to be HEDIS-certified in 12 measures. The NCQA measure certification allows NEHII data to be considered a valid "other date source" for HEDIS reporting. With Quasi-Qualified Entity Status, NEHII can analyze Medicare Parts A, B and D claims data on behalf of QCDR-participating providers. As a Qualified Clinical Data Registry (QCDR), NEHII can report to the QPP/MIPS for connected providers.

PDMP AND SUPPORT ACT UPDATE
Kevin Borcher, NEHII

PDMP and Support Act projects include:

- Sharing PDMP data with contiguous states
- Workflow Integration
- Electronic prescribing
- Real-time PDMP reporting
- Data analytics
- Infrastructure
- Administrative considerations
- Neonatal Abstinence Syndrome
- Multi-state APD opportunities

OTHER UPDATES

Rural Broadband Task Force
Anne Byers, Nebraska Information Technology Commission

The Rural Broadband Task Force submitted its report to the Legislature in late October. The task force may be considering forming a subcommittee on telehealth. Ms. Byers asked members if they had any recommendations on possible panelists for a future task force meeting or thoughts on forming a subcommittee. Members felt that the biggest barrier to telehealth was the need for better broadband especially in rural areas. Mobile broadband is also an issue in many areas. Until the lack of broadband availability in many rural areas is addressed, members recommended waiting to form a telehealth subcommittee.

DATA GOVERNANCE WORK GROUP CHARTER AND NEXT STEPS

The Data Governance Work Group has not met. Members are still interested in discussing this issue. Several groups are working on data governance. The NHA is working on a data governance. The Department of Health and Human Services has formed a data governance group. Ashley Newmyer is the Chief Data Strategist. LB 1183, introduced by Senator Arch, would create the Health Information Technology Board which may have some data governance responsibilities. NEHII is also working on data governance. Council members agreed to invite representatives of these groups to talk about data governance activities at the next eHealth Council meeting.

ACTION ITEM

Members agreed to continue the eHealth Council's current action item on data governance.

ADJOURNMENT

The meeting was adjourned.