MEMBERS PRESENT:
Marsh Morien, Co-Chair
Dr. Delane Wycoff, Co-Chair
Wende Baker
Kevin Borcher
Jason Davis, Alt. for September Stone
Joel Dougherty
Marty Fattig
Alice Henneman
Ken Lawonn
Sharon Medcalf
Greg Schieke
Nancy Shank
Max Thacker, Alt. for Carol Brandl

ABSENT: Vivianne Chaumont, Susan Courtney, Senator Annette Dubas, Congressman Fortenberry, Kim Galt, Harold Krueger, Jenifer Roberts-Johnson, Kay Oestmann, John Roberts, and Patrick Werner

ROLL CALL, NOTICE OF POSTING OF AGENDA, NOTICE OF NEBRASKA OPEN MEETINGS ACT POSTING
The meeting was called to order at 1:38 p.m. Roll call was taken. There were 11 members present. A quorum existed to conduct official business. The meeting notice was posted to the NITC and Public Meeting websites on Oct. 11, 2013. The agenda was posted on Oct. 28, 2013.

APPROVAL OF MAY 1, 2013 MINUTES*

Mr. Lawonn moved to approve the May 1, 2013 minutes as presented. Ms. Medcalf seconded. All were in favor. Motion carried by unanimous voice vote.

PUBLIC COMMENT
There was no public comment.

Mr. Dougherty and Ms. Henneman arrived to the meeting.

PROVIDER SATISFACTION SURVEY
Lina Lander, University of Nebraska Medical Center

Copies of the provider satisfaction report conducted by the UNMC evaluation team (Lina Lander, Daniel Lomelin, Marsha Morien, Gary Cochran, Harlan Hayes, and Don Klepser) were distributed to council members. Dr. Lina Lander reported on the survey results. Over 5,000 healthcare providers in Nebraska were surveyed about their satisfaction with health information exchange. Survey respondents identified cost and lost productivity during implementation as perceived barriers to health information exchange. Respondents identified accessing a comprehensive list of the patient’s medications, accessing a comprehensive list of the patient’s allergies, and viewing lab results from other providers as the most important functionalities for inclusion in a health information exchange. Over three times as many NeHII users reported being satisfied, compared to being dissatisfied. The information from the survey will help NeHII prioritize future functionality.
PUBLIC HEALTH USE CASES FOR HIE

Dr. Anne O'Keefe, Douglas County Health Department; Kathy Cook, Lincoln-Lancaster County Health Department

Health departments are responsible for reporting diseases for monitoring and intervention purposes. Generally, reports from providers and labs are received electronically. Cases then need to be confirmed which involves a good deal of investigation. NeHII has helped tremendously with Douglas County Health Department's investigative efforts. Ms. Cook reported that in Lincoln-Lancaster County, NeHII is being used by only a handful of providers, but NeHII is useful for tracking information on Lancaster County patients who have been treated in the Omaha area. It would be good to have more physicians participating in NeHII. Both Dr. O'Keefe and Ms. Cook are working on additional public health use cases utilizing NeHII.

Michelle Hood, Department of Health and Human Services (DHHS)

Ms. Hood works with data exchange and electronic lab reporting. The Department of Health and Human Services is working with physicians and other health care providers to submit their immunization data electronically. Many labs are already submitting reports of reportable diseases electronically. The Department of Health and Human Services also receives syndromic surveillance data from several hospitals and has started receiving data from a few ambulatory providers. Some states are using BioSense for their syndromic surveillance reporting. This is an open-source, cloud-based system sponsored by the CDC. BioSense is a good solution for states without an existing syndromic surveillance system. The Nebraska Department of Health and Human services is using the Essence System developed by John Hopkins University. The Nebraska Department of Health and Human Services and NeHII are in discussions about submitting syndromic surveillance data through NeHII.

DISCUSSION/UPDATES ON EHEALTH TOPICS

Direct—Deb Bass, NeHII and Wende Baker, eBHIN. Deb Bass gave a presentation on NeHII’s planned Direct implementation. Optum will be serving as the HISP. Optum is still awaiting certification from Direct Trust.

Ms. Baker stated that behavioral health information programs are subject to 42 CFR Part 2 privacy requirements. With patient consent, behavioral health information can be exchanged between providers using Direct secure messaging. There are three challenging case scenarios. First, behavioral health medical home providers are an option, but most clients are of lower income levels and cannot afford to enroll in a medical home environment. These clients most likely will use the acute behavioral health care system. Ms. Baker is working on getting a behavioral health service referral from for clients who may be eligible for a medical home. When the health center identifies and diagnoses a patient, the FQHC may qualify them for a medical home setting. Secondly, Ms. Baker is working with VA on a pilot program for homeless veterans with behavioral health issues. When a veteran enters into a behavioral program, they would be connected with the VA to provide medical home treatment. The third case scenario involves those in the correctional system. When there is continuity of care from discharge from the correctional system to a medical health and medical home, individuals are less likely to return to the correctional system. The project will be doing these use cases next year to see how they will work.

Patient Engagement—Deb Bass, NeHII. Ms. Bass provided a presentation on NeHII’s consumer engagement efforts. Consumers can opt-in or opt-out and can change their status as often as they wish. NeHII has developed several promotional tools:

- Connect the Docs campaign
- Ax the Fax Campaign
- YouTube video (http://connectnebraska.net/)
- NeHII Website (www.nehii.org)
- NeHII consumer microsite
Alice Henneman suggested embedding the video on the website. After viewing a video on Youtube.com, viewers see a mosaic of related videos. NeHII may not want to be associated with these videos. Council members asked about what is known about those opting out of NeHII. Patients opt out of NeHII for a variety of reasons, including not understanding what an HIE does. Providing information to non-English speaking patients presents a challenge. The project does not have bilingual staff. It was recommended to check into what it would cost to have a separate video in Spanish. Marsha Morien informed the Council that UMNC is completing a consumer satisfaction study of health information exchange. There will be a report to the eHealth Council at a later date.

- **E-Prescribing of Controlled Substances.** An official letter is being drafted by the Board of Pharmacy to SureScripts indicating that e-prescribing controlled substances is permissible. Requirements for e-prescribing controlled substances include the use of two-factor authentication. It was recommended that the e-Prescribing Work Group reconvene to address e-prescribing of controlled substances.

**MEMBERSHIP**

Mr. Fattig moved to approve the membership nomination of Max Thacker on the eHealth Council. Ms. Medcalf seconded. All were in favor. Motion carried by unanimous voice vote.

**ACTION ITEMS FOR NITC STATEWIDE TECHNOLOGY PLAN AND BROADBAND PLAN**

There were no recommended changes to the action items for the NITC Statewide Technology Plan and the broadband plan.

Mr. Schieke moved to approve the action items for the NITC Statewide Technology Plan or the Broadband Plan. Mr. Fattig seconded. All were in favor. Motion carried by unanimous voice vote.

Mr. Fattig was asked to testify before the United States Senate Finance Committee about the challenges of implementing electronic health records on July 24. His testimony can be found at [http://www.finance.senate.gov/imo/media/doc/Fattig%20Testimony%20Final%20Copy.pdf](http://www.finance.senate.gov/imo/media/doc/Fattig%20Testimony%20Final%20Copy.pdf). The HIT Policy Committee is currently working on Stage 3 of Meaningful Use.

The kickoff meeting for the state broadband plan is tomorrow, November 1st, at 1526 K Street in Lincoln. The development of a state broadband plan is one component of the Nebraska Public Service Commission’s broadband mapping and planning grant. The Nebraska Public Service Commission has partnered with the University of Nebraska-Lincoln, Department of Economic Development, AIM Institute and the NITC on planning activities. The state broadband plan will build on regional broadband plans. The plan will likely focus on four areas: economic development, digital literacy/adoption, broadband availability and affordability, and agriculture. Education and healthcare are being addressed by the NITC Education and eHealth Councils. Their action items can be incorporated into the state broadband plan.

Dr. Wycoff encouraged council members to feel free to contact one of the co-chairs or Ms. Byers if they have any agenda items for the next meeting.

**ADJOURN**

With no further business, the co-chair adjourned the meeting at 3:05 p.m.

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