

SustiNet Health Partnership

Health Information Technology Advisory Committee

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Health Information Technology Advisory Committee Regular Meeting

April 16, 2010
Meeting Minutes

Teleconference Participants: *Marie Smith, Co-chair; Jeffrey Asher; Alex Hutchinson; Enrique Juncadella; Judith Fifield; John Brady; Alexis Fedorjaczenko; Tonya Hazley; Marama Pramanik; Jill Zorn*

Office of the Healthcare Advocate: *Michael Mitchell*

Absent: *Mark Boxer, Co-chair; Angelo Carraba; Pam Cucinelli; Meg Hooper; Jeffrey Kramer; Jamie Mooney; Steve O'Neill; Victor Villagra; Jody Bishop-Pullan; Ryan O'Connell; Bob Tessier; Darlene Kish-Thompson; Rob Aseltine; Joel Cruz*

Marie Smith opened the teleconference by welcoming all Committee members. The minutes from the 3/19/10 meeting were approved by all.

Marie spoke of the recent SustiNet Board of Directors/Co-chairs retreat. Stan Dorn of the Urban Institute, who is acting as a consultant for SustiNet, provided an overview of the impact of the federal healthcare reform bill on SustiNet. He clarified that federal law tackles insurance reform issues but SustiNet goes beyond that to drive healthcare delivery reform. Stan identified three key areas that SustiNet addresses specifically: HIT, patient centered medical homes and incentives for care quality. His presentation will be posted on the SustiNet website.

Marie said that a template will be developed by the Board to assist all Committees with structuring reports in the same format. The template will be available by 4/21/10. The format will be based on key questions for legislative and policy recommendations and will also include other essential topics and current thoughts about those topics. In structuring the template, the workplan and charge to the Committee will be kept in mind. Between 4/21 and 5/23, each Committee will complete the template and share it among other Committee co-chairs. On 6/1, all co-chairs will meet to present templates to the Board for feedback. Between 6/1 and 7/1, reports will be completed for submission to the Board by 7/1. It was learned in the retreat that there will be support staff available to assist with writing reports. Marie will send the working framework and deadlines to Committee members. She said that the Committees will be constituted through the end of the year as the Board finalizes its report to the Legislature. There may be a need for the Board to communicate with co-chairs and Committees during this time. Marie said that she doesn't expect to hold formal meetings, but there may need to be conference calls or meetings to answer questions the Board may have after 7/1.

Jeff Asher said that eHealth CT recently received funding to purchase EHRs and will be assisting many practices around the state. He asked if this would be taken into consideration for the final report, and asked what was left for this Committee to work on. Marie said that eHealth CT's role will be factored into the charge to the Committee. The

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Committee will note all state HIT activities being done, comment on them and incorporate them into the final work product. The charge can be clarified and updated to reflect current state activities. Marie said the charge focuses on SustiNet, which includes legislative and/or policy recommendations that the Committee will continue to work on. Marie said that SustiNet allows CT to be bold and progressive, with the expectation that commercial players in the marketplace will broaden their thinking.

Marie provided updates on three recent state-level HIT activities.

1. DPH received ARRA funds (\$7.3 million) to develop, implement and sustain a statewide HIE.
2. Senate Bill 403, an act concerning HIT, which would establish CT eHealth Authority as a quasi-public agency for HIT and HIE in the state, is pending.
3. eHealth CT was awarded \$5.75 million for a statewide HIT Regional Extension Center.

Marie added that it's important for this Committee to be aware of these activities and address them concretely in the work product. Alex Hutchinson said that things have solidified in the past month, with eHealth's designation as the extension center and DPH assuming responsibility for establishing an HIE. He asked if eHealth CT was going to be the designated authority serving as both the exchange and the extension center. Marie said this is still being discussed and there is nothing definite yet.

In the discussion on workgroup updates, Marie said that she has gotten a sense from workgroups that they feel they are late in their efforts. She assured Committee members that things are progressing on schedule, and that it makes sense to write reports using the forthcoming template guidelines. It has been felt all along by Board members and co-chairs that technology issues should not be leading strategy, but rather that strategy should lead technology issues. Marie said the two Committees that will influence this Committee's work the most are Healthcare Quality and Provider Advisory and Patient Centered Medical Home, so reading their templates will assist with this Committee's recommendations.

Alex reported for the logistics workgroup, saying that recently he spoke with someone from a large primary care group that is in the midst of transitioning to HIT. This group has learned that there is substantial instability in the vendor marketplace; this is a major issue. They had begun implementing EMR through practice management software, only to learn six months after they began the transition that their provider is moving to a whole new platform due to an acquisition. They have been told that it will be supported for an indefinite period of time, that it will not be enhanced, and that it doesn't meet certification requirements. This Committee needs to be aware of such problems as strategies are being planned for engaging providers to make an investment.

There were no other workgroup reports given. Jeff said that he doesn't belong to a workgroup but would be interested in belonging to the group addressing financing.

Marie spoke of the Health IT Strategic Framework, a recent draft from the Office of National Coordination for HIT. She felt it would be valuable for Committee members to read. It contains strategic themes, with goals, principles and objectives for each theme. This document is available here:

<http://www.ct.gov/sustinet/lib/sustinet/committeeformation/hit/onchitstrategicframework20100401.pdf>

She also recommended reviewing the Statewide HIT Plan from DPH, which is available here:

http://www.ct.gov/dph/lib/dph/state_health_planning/hit/final_version_-_connecticut_state_health_it_plan.pdf

Regarding next steps, Marie recommended that upcoming meetings be in-person rather than teleconferences. John Brady suggested finding a better time for meetings as participation has been sparse. Jeff offered meeting space at CHEFA. Marie also said that now is the time to invite speakers to attend. She mentioned asking Scott Cleary from eHealth CT to speak again, focusing on the plan for the HIT Regional Extension Center. She also mentioned inviting a representative from the HIT and HIE Advisory Committee from DPH to learn of current activities. Jeff recommended contacting Warren Wollschlager from DPH.

Meeting was adjourned.

Next meeting will be 4/30/10 from 1:00 – 3:00 pm.