

Health Information Technology Commission
Minutes

Date: Thursday November 18, 2010
1 – 4:00pm

Location: MDCH
1st floor Capital View Bldg
Conference Room B&C
201 Townsend Street
Lansing, Michigan 48913

Commissioners Present:

Greg Forzley, M.D. – Chair
Janet Olszewski
Toshiki Masaki – Vice Chair
R. Taylor Scott, D.O.
Larry Wagenknecht, R.Ph.
Tom Lauzon
Mark Notman
Phyllis Mellon

Commissioners Absent:

Kimberly Ross – Jessup
Robin Cole
Joseph Hohner
Robert Paul
Dennis Swan

Staff:

Beth Nagel – MDCH
Laura Rappleye - MDCH
George Boersma – MDIT
Kurt Krause - MDCH

Guests:

Dennis Smith – UPHP
Kimberly Lynch – Altarum
Cindy Schnetzler
Cnythia Green Edwards
Monique Field – Wiener Assoc.
John Hazewinkel – MSU
Nancy Walker - Beaumont
Alicia Brown – Relware
Ana E. Garcia - MHIMA

Chuck Bonner - ATT
Jeff Shaw - MHI
Mindy Richards - ChangeScape
Andrea Judd - ChangeScape
Dana Green - Covisint
Heidi Hoyles - Oracle
Clare Tanner - MPHI

Minutes: The regular monthly meeting of the Michigan Health Information Technology Commission was held on Thursday, November 18, 2010 at the Michigan Department of Community Health with eight Commissioners present including the Chair and Vice Chair and four absent.

A. Welcome

B. Review and Approval of 9-16-10 meeting minutes

- Minutes of the 9-16-10 meeting were approved and will be posted to the HIT Commission website following this meeting.

C. 2011 HIT Commission Schedule

- The HIT Commission adopted the proposed 2011 meeting schedule, which keeps to the third Thursday of every month. With one exception, January 2011, the meetings will be at MDCH in the Capital View Building. The January meeting will be held at the Michigan Public Health Institute in Okemos, MI.
- Beth Nagel provided a reminder that the December 2010 HIT Commission meeting is canceled.
- The Commissioners discussed potential agenda items for 2011 and asked for presentations on HIT implications in accreditation requirements, sub-state HIE progress, healthcare reform, and Meaningful Use requirement progress.

D. Update on the MiHIN Strategic and Operational Plans

- Beth Nagel provided an update on the status of the MiHIN Strategic and Operational Plans. The Plans have not yet been approved by the Office of the National Coordinator (ONC).
- On October 15 the ONC provided a letter to MDCH asking for additional data on sub-state HIE capabilities, standards in use, coverage areas and number of providers in each sub-state HIE coverage area. The letter also asked for additional details on the MDCH public health connectivity and the implementation timeline.
- An amendment to the MiHIN Strategic and Operational Plans was submitted to the ONC on November 2, 2010 that addresses the ONC questions. Internal review of the amendment was done on November 12 and with final review scheduled around Thanksgiving.
- Beth Nagel will keep Commissioners updated if any new information is available.
- Beth Nagel also gave a update on the progress toward setting up the MiHIN Shared Services governance entity. The critical steps that remain all hinge on ONC approval of the Strategic and Operational Plans.

E. Update on M-CEITA Progress

- Kimberly Lynch provided an update for Dr. Mazhar Shaik, Executive Director of M-CEITA, who was unavailable. Lynch gave an update on the progress of Michigan's Regional Extension Center.
- Lynch reported that 512 Michigan providers have signed up to use M-CEITA services with 105 providers meeting the first milestones. This makes Michigan the number one state in the Midwest and fourth overall nationwide.
- Lynch described the M-CEITA outreach strategy and gave an overview of the types of services that are being developed.

F. Update on the Medicaid EHR Incentive Program

- Cynthia Green-Edwards from MDCH Medicaid provided an overview of Michigan's activities to implement the Medicaid Electronic Health Record Incentive Program.
- Green-Edwards walked the Commission through all the steps that MDCH will take to begin the new program including interfacing with the National Level Registry and completing the State Medicaid Health IT Plan for federal approval.
- This presentation also provided an overview of the State of Michigan Health Information Exchange that will connect the state of Michigan health related systems with the broader HIE initiatives in the state.
- Green-Edwards also detailed the addition of a Health IT office within MDCH Medicaid to focus on all of the Health IT initiatives that directly involve Medicaid.

G. Sub-State HIE Presentation from the Upper Peninsula Healthcare Network

- Dennis Smith, President and CEO of the Upper Peninsula Health Plan, gave an overview of the history, current status and future vision of the Upper Peninsula Health Care Network or UPHIE.
- Smith provided the technical architecture and details of the data inputs and data outputs that are a part of the UPHIE. Smith discussed the successes and barriers to HIE in the Upper Peninsula of Michigan as well as the many points of collaboration statewide.

H. Special Remarks

- Commission Chair, Greg Forzley, M.D., noted that this was the last meeting of 2010 and therefore the last meeting with MDCH Director Janet Olszewski. Forzley thanked Olszewski for her leadership in the MiHIN and on the HIT Commission. All other Commissioners present offered special remarks to thank Director Olszewski.
- Olszewski thanked the Commission for their service and critical input to MDCH and Michigan citizens. Olszewski encouraged the Commission to continue strong leadership in the years to come.

I. HIT Commissioner Updates

- Commissioner Taylor Scott, D.O., updated the Commission on the annual Michigan Osteopathic Association meeting where Health IT was a central topic of discussion.
- Janet Olszewski provided a brief overview on the typical changes that occur during a government transition including how the recent elections have changed the composition of the Michigan Legislature.


J. Public Input

- John Hazewinkel from MSU noted that there are four community colleges that have received funding from the Office of the National Coordinator to work on Health IT workforce Development

- Nancy Walker from Beaumont noted that she will miss Janet Olszewski's leadership and support for Health IT. Walker also asked how MDCH will accommodate ICD 10 updates.
- Cynthia Green Edwards from MDCH offered to connect with Walker to provide an update on how MDCH is updating ICD 10.
- Monique Field from Wiener and Associations offered congratulations to Janet Olszewski as she moves on to the next steps in her career.

K. Adjourn


- Meeting Adjourned at 3:05pm



Michigan HIT Commission Meeting

November 18, 2010


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Agenda


- A. Welcome
- B. Review and Approval of 9-16-10 meeting minutes
- C. 2011 HIT Commission Schedule
- D. Update on the MiHIN Strategic and Operational Plans, MiHIN Governance Board
- E. Update on the progress of M-CEITA
- F. Update on the Medicaid EHR Incentive Program
- G. Sub-State HIE Presentation from the Upper Peninsula Health Care Network
- H. Special Remarks
- I. Commissioner Updates
- J. Public Comment
- K. Adjourn

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C. 2011 HIT Commission Schedule

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Proposed 2011 Schedule

- All meetings keep the “third Thursday” pattern
- All meetings scheduled for 1-4pm
- All meetings with one exception are held at the Capital View Building 1st Floor conference room



Proposed 2011 Schedule

- January 20, 2011 (MPHI, Interactive Learning Center, Main Conference Room)
- February 17, 2011
- March 17, 2011
- April 21, 2011
- May 19, 2011
- June 16, 2011
- July 21, 2011
- August 18, 2011
- September 15, 2011
- October 20, 2011
- November 17, 2011
- December 15, 2011



2010 Reminder

- **Reminder:** the December 2010 meeting is canceled.
- Next meeting is January 2011



Topics of Interest for 2011

- MiHIN Implementation
- M-CEITA progress
- State of Michigan Public Health Meaningful Use requirements
- Medicaid EHR Implementation
- 2011 HIT Innovation & Leadership Awards
- Others?
 - Healthcare reform?
 - Other state HIE models/progress?
 - Continued Sub-state HIE presentations?
 - E-Prescribing?



Agenda Item D: Update on the MiHIN Strategic and Operational Plans, MiHIN Governance Board

Beth Nagel

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Overview

- Strategic and Operational Plan Status
- Governance Progress
- Governance Next Steps



Strategic and Operational Plan Status

- October 15 letter from ONC with additional data needed
 - Sub-state HIE capabilities
 - Sub-state HIE coverage areas
 - Number of providers covered by an HIE
 - Sub-state HIE standards
 - State of Michigan Public Health connectivity
 - Implementation timing



Sub-State HIE Coverage in MI

	Area of Michigan	Number of Providers	Proportion of Michigan
Jackson Community Medical Record	South Central	405	1.30%
Capital Area RHIO	Central	1,200	4.10%
Upper Peninsula Health Care Network	Upper Peninsula and Upper lower	850	2.80%
Michigan Health Connect	West, Upper Lower, Central	13,000	44.80%
my1HIE	Southeast, central	18,000	62%
South East Michigan Health Information Exchange (SEMHE)	Southeast	15,000	51.70%
TOTAL COVERED WITH HIE OPTIONS		48,455*	
TOTAL PROVIDERS IN MI		29,000	

*Many providers fall into the service area of multiple sub-state HIEs and therefore have more than one option



Lab Results Delivery in MI

	Currently Providing the Delivery of Structured Lab Results to Provider EHRs	If no, what quarter of 2011 will this be provided? (quarter & year)	How is it/How will it be provided?	Standards in use/Planned to use
Jackson Community Medical Record	Yes		Secure messaging and interface engine	HL7, IHE and LOINC Planned for Q3 2011
Capital Area RHIO	Yes		Secure messaging and interface engine	HL7, LOINC
Upper Peninsula Health Care Network	No	Q2 2011	Secure messaging and interface engine	HL7, LOINC
Michigan Health Connect	Yes		Secure messaging and interface engine	HL7, LOINC planned for Q1 2011
my1HIE	Yes		Secure messaging and interface engine	HL7, LOINC, SNOMED
South East Michigan Health Information Exchange (SEMHE)	No	Q3 2011	Secure messaging and interface engine	XDS-A, XDS-B - LOINC SNOMED planned for Q3 2011

MDCH

Care Summaries in MI

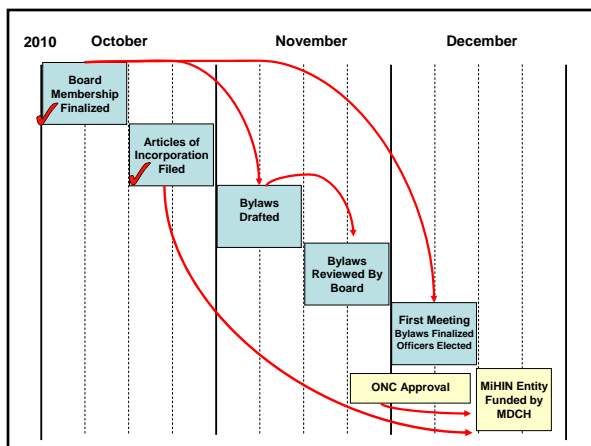
	Currently Providing the Exchange of Patient Care Summaries	If no, what quarter of 2011 will this be provided? (quarter & year)	If yes, what Vendor. If you are not able, what steps are needed?
Jackson Community Medical Record	Yes		Using Integrated Healthcare Solutions
Capital Area RHIO	No	Q3 2011	Working with vendor - Axoloti - to generate patient care summary specifications consistent with Meaningful Use.
Upper Peninsula Health Care Network	No	Q2 2011	Currently in the vendor selection process. Implementing a contractual requirement to meet stage 1 meaningful use in 2011
Michigan Health Connect	Yes		Using Medicity
my1HIE	Yes		Using Covisint & Wellcentive
South East Michigan Health Information Exchange (SEHIE)	No	Q3 2011	Received 2nd round Beacon Award, and SSA contract - in the planning stage for vendor selection for this functionality. Will have contractual requirements to ensure vendor meets stage 1 meaningful use in 2011.

- MDCH**
- ### Strategic and Operational Plan Status
- Amendment returned November 2
 - Final stages of review
 - Internal review with Deputy National Coordinator on Friday, November 12
 - Needs to be reviewed by Dr. Blumenthal
 - Only 8 plans are approved nationwide

MDCH

MiHIN Governance Update

- MDCH**
- ### Governance Progress
- ✓ Information Session – July 15
 - ✓ Solicit Nominations – July 15
 - ✓ Nominations Due – July 29
 - ✓ Determine Eligibility – by August 6
 - Sub Committee of HIT Commission
 - ✓ HIT Commission Recommendation – Aug 19
 - ✓ Organizations will appoint individual – Sept. 13
 - ✓ Background Information gathering – Sept. 24
- 16



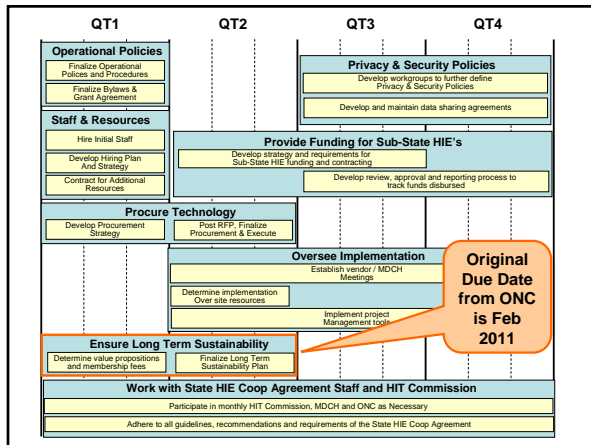
- MDCH**
- ### Background Information Collection
- Per recommendation to MDCH at 8/19 HIT Commission
 - Background forms went to every individual that was nominated to determine:
 - Contact Information
 - Professional History
 - Conflict of Interest

MDCH

Board Composition

Sub-State HIEs		
1	Jackson Community Medical Record	Rick Warren
2	Michigan Health Connect	Patrick O'Hare
3	MyHIE	John Vismara
4	Capital Area RHIO	Tom Bres
5	Southeast MI	Helen Hill
6	Upper Peninsula	Dennis Smith
Payers		
1	Blue Cross Blue Shield of Michigan	Joe Hohner
2	Priority Health	Jim Slubowski
3	MAHP	Chris Pike
State of Michigan		
1	Michigan Medicaid	Cynthia Edwards Green
2	Michigan Public Health	Jim Collins
3	HIT Commissioner	Larry Wajenkecht

- MDCH**
- ## Background Information Collection
- Findings: No areas of concern or conflicts exist with the initial representatives.
 - HIT Commission recommended that *“that no single organization, company or affiliates thereof are represented more than once on the MiHIN Shared Services Board.”*
 - Finding: While there are representatives on the board who have employers that are affiliated with employers of other board members, in these circumstances the representatives were elected to represent community initiatives that contain more members than the representative's employer.



MDCH

Agenda Item E: Update on the progress of M-CEITA

Dr. Mazhar Shaik

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MDCH

Agenda Item F: Update on the Medicaid EHR Incentive Program

Cynthia Green-Edwards

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HIT Commission Update
November 18, 2010

Cynthia Green-Edwards, Director
Office of Medicaid Health Information Technology

Medicaid EHR
INCENTIVE PROGRAM

Agenda



- ↳ Medicaid EHR Incentive Program Update
 - ↳ State Medicaid HIT Plan
- ↳ SoM HIE Update
- ↳ HIT Changes in Medicaid
 - ↳ Office of Medicaid Health Information Technology
- ↳ Questions

State Medicaid Agency Responsibilities under ARRA



1. Administer the incentive payments to Eligible Professionals (EPs) and hospitals
2. Conduct adequate oversight of the EHR incentive program
3. *Pursue initiatives to encourage adoption of certified EHR technology to promote health care quality and the exchange of health care information*

Medicaid EHR Incentive Program

Incentive Payments to Providers



Before We Can Make Payments



1. Successfully interface with federal registration system (NLR)
2. Have approval from CMS for State Medicaid HIT Plan
3. Process in place for accepting provider attestations
4. Process in place for paying EHR incentive payments to providers
5. Have proper audit and oversight

Successfully interface with federal registration system (NLR)



- ↳ We will receive a feed from the federal registration system (NLR) with Michigan Medicaid providers
- ↳ Exchange several other administrative interfaces
- ↳ Testing is on-going and should be complete in December 2010.

Focus of Michigan's SMHP



- ↳ Encouraging the Adoption of EHRs
 - ↳ Incentive program, working with M-CEITA, provider outreach and training, etc.
- ↳ Increasing the Interoperability of State Systems to Support Meaningful Use & HIE
 - ↳ Enhancing & connecting state systems (SoM HIE)
- ↳ Encouraging and Facilitating HIE in Michigan
 - ↳ Medicaid funding for MiHIN and sub-state HIEs

SMHP Status



- ↳ First draft reviewed by CMS
- ↳ 1st version submitted to CMS for approval
 - ↳ Next 2-3 business days
 - ↳ SMHP will be a "living document" and updated as needed
- ↳ Implementation funding request (HIT I-APD)
 - ↳ Early December
 - ↳ 100% federal funding for incentive payments
 - ↳ 90% federal funding for everything else

EHR Incentive Processes



- ↳ Process in place for accepting provider registration, attestations and making payments
- ↳ New module in CHAMPS
- ↳ Registration Process
 - ↳ EP - late January
 - ↳ Hospital - mid-February
- ↳ Publish Program Policy
 - ↳ EP - early December
 - ↳ Hospital - mid-December

Have Proper Audit & Oversight



- ↳ At registration providers will be check for:
 - ↳ Current and valid license
 - ↳ Not sanctions by the Michigan Bureau of Health Professions
 - ↳ Do you appear on the state or federal death lists
 - ↳ Not sanctions by Medicare or Medicaid
- ↳ Program integrity will follow-up with audits

Before We Can Make Payments



- | | |
|--|-------------|
| 1. Successfully interface with federal registration system (NLR) | Early Dec. |
| 2. Have approval from CMS for State Medicaid HIT Plan | In progress |
| 3. Be capable of accepting provider attestations | Late Jan. |
| 4. Be capable of paying EHR incentive payments to providers | February |
| 5. Have proper audit and oversight | Ongoing |

State of Michigan (SoM) HIE

Enhancing and Connecting State Systems



SoM HIE Purpose



- ↳ Support Meaningful Use and HIE
- ↳ Improve SoM systems interoperability
 - ↳ Adopt national standards
- ↳ Leverage technology investments made by other programs and departments
- ↳ Provide health care providers with a single secure connection to all SoM systems
- ↳ Assist in tracking and verifying provider meaningful use status

SoM HIE Features

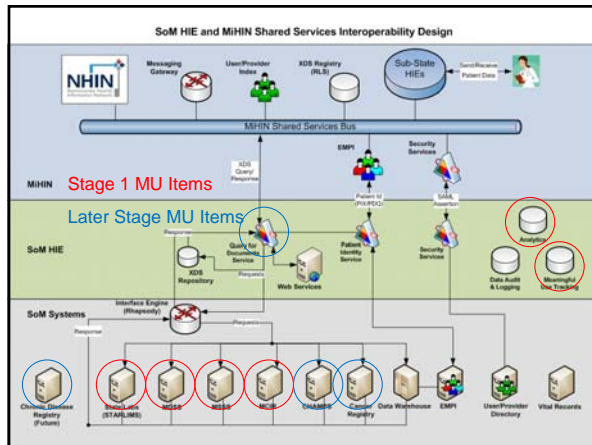


- ↳ SoM HIE will have some core functionality that all connected systems can use:
 - ↳ Master Person Index
 - ↳ Leveraging new MPI from Data Warehouse
 - ↳ Provider Index
 - ↳ Leveraging licensing database and single sign on
 - ↳ Security and audit logging, messaging, XDS & analytics
- ↳ It will help facilitate tracking and verifying providers' meaningful use status

SoM Systems



- ↳ Medicaid Systems
 - ↳ CHAMPS (MMIS)
 - ↳ Data Warehouse
 - ↳ MPI
- ↳ Public Health Systems
 - ↳ MCIR
 - ↳ MDSS
 - ↳ MSSS
 - ↳ State Labs
- ↳ Other Systems
 - ↳ Single Sign On (SSO)
 - ↳ Bureau of Health Professions licensing database
 - ↳ Vital Records
 - ↳ Cancer Registry
 - ↳ Chronic Disease Registry (Future)



HIT Changes in Medicaid

Organizing for Meaningful Use



Office of Medicaid Health IT




Tasked with insuring that all Medicaid systems are integrated with all other relevant systems and interoperable with current federal standards.

- ↳ Medicaid Information Technology Architecture (MITA)
- ↳ HIE Interoperability standards
 - ↳ HL7, IHE, XDS, etc.
- ↳ Master Person Index (MPI) & Provider Index (PI)

Office of Medicaid Health IT




- ↳ Coordinating:
 - ↳ Medicaid HIE activities
 - ↳ MIHIN
 - ↳ SoM HIE
 - ↳ Medicaid Data Warehouse
 - ↳ Sharing Medicaid information and data
 - ↳ Security, document management, etc.
- ↳ Overseeing:
 - ↳ EHR Incentive Program
 - ↳ MPI



Questions?

www.MichiganHealthIT.org



Agenda Item G: Presentation from the
Upper Peninsula Health Care Network

Dennis Smith


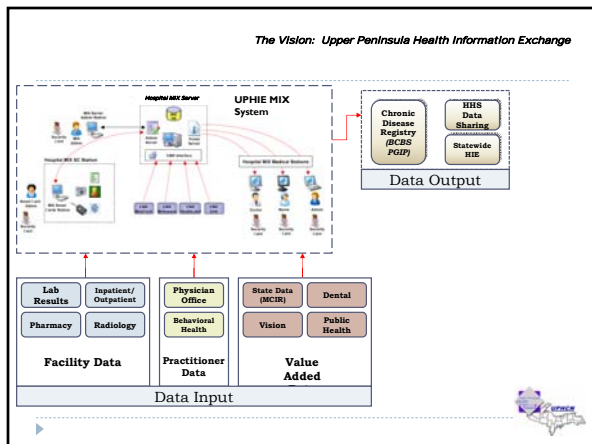
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Upper Peninsula Health Care Network - UPHIE

HIT Commission Presentation
November 18, 2010


UPHIE History

- ▶ August 2009, deployed pilot phase of MIX System at 5 UP facilities
- ▶ Deployment Goals
 - ▶ Establish and test a system for the secure exchange and storage of electronic health records from various EMR systems across a network of 14 UP hospitals
 - ▶ Establish a method of populating EMR data into the system
 - ▶ Conduct usability testing to ensure data accuracy
 - ▶ Evaluate the capabilities and functionality of the system

UPHIE Pilot Project Status

- ▶ **Successes**
 - ▶ Pilot system live at 5 UP facilities
 - ▶ Interface development completed at 2 facilities and ongoing interface testing is being conducted
 - ▶ Interfaces are being developed at the remaining 3 pilot sites
- ▶ **Barriers**
 - ▶ Lack of cooperation from EHR vendors on providing a cost effective interface solution
 - ▶ Lack of human resources at facilities due to numerous EHR implementation projects




Collaboration

- ▶ Member of MiHIN Substate HIE Group
- ▶ Contracted with Altarum for providing M-CEITA services in the Upper Peninsula and Northern Lower 4 counties
- ▶ MiHIN Executive Committee member
- ▶ M-CEITA Governance Committee member




Future




Agenda Item H:
Special Remarks

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Agenda Item I:
Commissioner Updates

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Agenda Item J:
Public Comment

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Agenda Item K:
Adjourn

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