

**Health Information Technology Commission**  
**Minutes**

**Date:** Thursday, January 19, 2012  
1 – 4:00 p.m.

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

**Commissioners Present:**

Greg Forzley, M.D. – Chair  
Toshiki Masaki – Vice Chair  
David Behen  
Mark Notman  
Dennis Swan  
Larry Wagenknecht, R.Ph.  
Joseph Hohner  
R. Taylor Scott, D.O  
Michael Chrissos, M.D.  
Olga Dazzo

**Commissioners Absent:**

Tom Lauzon

**Staff:**

Beth Nagel – MDCH

**Guests:**

Deb Mosher  
Cynthia Green Edwards  
Bill Corser  
Dana Green  
Jackie Rosenblatt  
Angela Vanker  
George Peterman  
Harry Levins  
Patty Houghton  
Cindy Buege  
Kaitlin Reed  
Jason Werner  
Jim Bowen

Andrea Walrath  
Ashley Leece  
Cindy Schnetzler  
John Hazewinkel  
Jeff Shaw  
Tim Pletcher  
Denny Olmstead  
Paul Groll  
Virginia Gibson  
Sharon Leenhouts  
Bonnie Wilkins

**Minutes:** The regular monthly meeting of the Michigan Health Information Technology Commission was held on Thursday, January 19, 2012 at the Michigan Department of Community Health with ten Commissioners present including the Chair and Vice Chair.

#### **A. Welcome**

1. HIT Commission Chair, Greg Forzley, M.D. welcomed the Commissioners and the guests.

#### **B. Review and Approval of 12-15-11 meeting minutes**

1. Minutes of the 12-15-11 meeting were approved and will be posted to the HIT Commission website following this meeting.

#### **C. Dashboard for MI HIT Initiatives**

1. **Updated Dashboard:** Beth Nagel gave an overview of the changes made to the MI HIT Dashboard based on the recommendation of the Commission at the previous meeting. The main change was adding a line graph summarizing the longitudinal trends for each program.
2. **Discussion: Modifications and/or Revisions:** The HIT commission asked for each program's end date and goal data to be listed in order to measure the effectiveness of the program. Nagel agreed and will incorporate into the dashboard. The Commission also suggested that each program should give thought to an updated goal for number of providers utilizing sub-state HIEs and for the EHR incentives. It was suggested that MiHIN's Provider Index can possibly assist with the baseline numbers of providers that are in the state and actively practicing.

#### **D. Medicaid EHR Incentive Program Update**

1. **Update on Progress:** Cynthia Green-Edwards, Director Office of Medicaid HIT, provided an update on EHR incentive program. Edwards reported on the payments made for providers in MI as of 1/17/2012; \$9,633,334 worth of payments was made to eligible providers and \$50,102,952 was made to eligible hospitals. Edwards then explained the recruiting process and barriers for the program that they are currently working through. The program will also work with MiHIN to secure CMS funding for MiHIN, and plans to collaborate with State Hospitals, Mental Health and Veteran Home for EHR. Edwards also reported that CMS representative Nick Blake visited this past month and was extremely impressed with Michigan's HIT programs level of collaboration.
2. **Data Analysis of HIT Impact:** Beth Nagel noted that in late 2011 the HIT Commission discussed developing long-term measures that could be tracked to indicate the impact of HIT in Michigan. Nagel said that Medicaid, at the same time, had plans for a similar project using Medicaid data. Nagel suggested that the HIT Commission evaluate Medicaid's efforts before pursuing a separate initiative to capture HIT measures. Nagel asked Edwards to explain the Medicaid process for this project. Edwards commented that effectively measuring HIT activity requires the establishment of baselines. Work is already underway on establishing ePrescribing baselines with data collected by the Data Warehouse. Edwards provided examples of potential baselines to measure HIT activity and asked the Commission for baseline suggestions that MDCH can establish to measure HIT activity.

- 3. Discussion: Commission Input:** The HIT Commission discussed the issues involved with ePrescribing and controlled substances that may skew the baseline of ePrescribing. The HIT Commission also suggested Edwards use the 10 years of history in the Data Warehouse to track new trends relating to HIE and improving care. With this information, the HIT Commission can give more input on suggested baselines for HIE activity. Overall, the HIT Commission suggested keeping the analysis simple at first and allowing the flexibility to be more specific in the later stages of analysis. The HIT Commission also suggested that the other HIT initiatives that are tracking data should be brought into the conversation on what should be analyzed.

#### **E. MiHIN Shared Services Update**

- 1. Report on Progress & Forecast of Activity:** Tim Pletcher, Executive Director of MiHIN, provided the update on MiHIN activity. Pletcher reported that phase one public health reporting is on schedule to meet January 31, 2012 operation capability and planning for phase two of the public health reporting use cases is underway. Pletcher also reported MiHIN will begin focusing on the use case of an ADT (Transition of Care) Pilot. The MiHIN is also working on important security and legal documents with each organization that may contribute to MiHIN.
- 2. Discussion: Input back to MiHIN:** The Commission asked if Pletcher had any push back on the standardized versions of user agreements. Pletcher answered that the customization will be reflected in use case documentation, not user agreements. HIT Commission commended the MiHIN progress and also suggested that they recognize the leaders that have done significant work in HIT and HIE community that have brought MI to this point.

#### **F. FCC Rural Broadband Project**

- 1. Review of Program:** Harry Levins, MPHI Project Manger, provided an update on the FCC Rural Broadband Pilot Project. Levins reported that Broadband Infrastructure is a necessity for the implementation of MiHIN, Sub-State HIEs, SoM HIE, and Meaningful Use of EHRs. Levins explained the goal is to bring internet access to providers in rural and tribal areas. Levins continued to explain the difficulty in the FCC administrative rules is a continuous risk for the Pilot and slows the progression of the Pilot. While waiting for the administrative rules to clear, Levins reported on three network projects that coincided with the FCC Pilot Project: Project 1 Thumb Rural Health Network (TRHN), The Statewide Network, and The Private Fiber Networks for Hospital Systems.
- 2. Progress in MI:** Michigan Pilot Program Summary consist of three projects that include 78 sites linked in statewide network including the thumb, 4 hospital networks consisting of 34 sites, with more sites being added.

#### **G. M-CEITA**

- 1. Follow-Up from December Meeting:** Andrea Walrath from Altarum provided an update on the M-CEITA program. Walrath reported on the

progress made by M-CEITA in following up on the issues raised at the December meeting. Walrath shared detailed consumer satisfaction surveys from M-CEITA clients and broke the data out by specific M-CEITA service providers. Walrath noted that challenges occurred most when there was an M-CEITA staff turnover in a provider practice. Walrath noted that it is also clear from the survey that providers are looking for more expertise on specific products. Walrath also noted that M-CEITA completed its biannual review with the ONC, and is hoping for a favorable outcome.

2. **Presentation from Sub-Contractor: MPRO:** Jackie Rosenblatt from MPRO gave the update on the M-CEITA work conducted by MPRO. Rosenblatt discussed MPROs territory, the number of providers they have worked with, MPROs contributions to the statewide milestones, and the methods that MPRO uses to engage and train providers. Rosenblatt also described the ways that MPRO has been working with the other Recovery Act HIT programs in Michigan. Angela Vanker of MPRO discussed the recognition program that MPRO has employed to incentivize their successful practices. Vanker also provided highlights of MPRO customer feedback.

#### **H. Commissioner Updates**

1. None

#### **I. Public Comment**

1. Beth Nagel announced the departure of Laura Rappleye from the State of Michigan and thanked her for hard work in the HIT/HIE community

#### **J. Adjourn**

1. Meeting Adjourned at 3: 41 p.m.