

**Michigan Health Information Technology Commission
2007 Report to the Michigan Legislature
Per PA 137-2006**

Introduction:

In May 2006, the Michigan Legislature passed and the Governor signed Public Act 137-2006, which created the Michigan Health Information Technology (HIT) Commission as an advisory commission within the Michigan Department of Community Health (MDCH).

The 13-member HIT Commission was appointed in August of 2006. The current membership includes:

- Robin Cole of Detroit is appointed to represent consumers for a term expiring August 3, 2011.
- Gregory Forzley, M.D., of Grand Rapids is appointed to represent doctors of medicine for a term expiring August 3, 2011.
- Joseph Hohner of Canton is appointed to represent nonprofit health care corporations for a term expiring August 3, 2010.
- Toshiki Masaki of Canton is appointed to represent purchasers and employers for a term expiring August 3, 2009.
- Kimberly G. Ross of Dewitt is appointed to represent pharmaceutical managers for a term expiring August 3, 2008.
- Mark Notman, Ph.D., of East Lansing is appointed to represent schools of medicine in Michigan for a term expiring August 3, 2009.
- Janet Olszewski of Williamston, director of the Michigan Department of Community Health, is appointed for a term expiring August 3, 2008.
- Thomas Lauzon of Shelby Township is appointed to represent health plans or other third party payers for a term expiring August 3, 2010.
- Jeanne Strickland of Brighton is appointed to represent hospitals for a term expiring August 3, 2009.
- Teri Takai of Troy, director of the Michigan Department of Information Technology is appointed for a term expiring August 3, 2008.
- Larry Wagenknecht, R. Ph., of Haslett is appointed to represent pharmacists for a term expiring August 3, 2010.
- Robert Paul of Novi, is appointed to represent members of the health information technology field for a term expiring August 3, 2010.
- R. Taylor Scott, D.O., of Williamston is appointed to represent doctors of osteopathic medicine and surgery for a term expiring August 3, 2011.

In PA 137-2006 it is stated that the Commission must meet quarterly. The HIT Commission met for the first time in October 2006 and agreed to convene again in December 2006 and schedule monthly meetings in 2007. In total, the Commission met nine times in 2007.

Overview of 2007 Activities:

At the December 2006 meeting the Michigan Health Information Network (MiHIN) report, *Conduit to Care*, was presented to the HIT Commission. The HIT Commission used this report as their strategic plan for expanding the creation and adoption of Health Information Exchange (HIE) throughout the state.

To begin implementation of the MiHIN strategic plan, the HIT Commission worked to develop criteria and guidelines for providing grants to regions in Michigan to begin or implement HIEs. The HIT Commission provided recommendations to MDCH on the development of a Request For Proposals. The HIT Commission was represented on the evaluation committee for the proposals and voted in the selection of successful bidders. The request for proposals was released in December 2006 and proposals were evaluated in February 2007.

The Regional HIE projects began in June 2007 with 70 of Michigan's counties being awarded funding for planning or implementation of an HIE. The HIT Commission is involved in these projects and has been receiving regular updates on the status of goals and accomplishments.

The HIT Commission developed criteria, deliverables and work plan for a MiHIN Resource Center to assist and serve as a single conduit for information, education and support for Michigan's fledgling HIEs. The HIT Commission provided recommendations to MDCH in developing a Request For Proposals for the MiHIN Resource Center. The HIT Commission was represented on the evaluation committee for the proposals and voted in the selection of a successful bidder. The request for proposals was released in December 2006 and proposals were evaluated in January 2007.

The MiHIN Resource Center began operations in June 2007. The HIT Commission is represented on the advisory board of the MiHIN Resource Center, which sets the goals, tasks and policies for the Resource Center.

In January 2007, the HIT Commission held educational sessions in four regions of the state. The goal of the educational sessions was to raise awareness of the MiHIN strategic plan and generally introduce the principles of HIE to statewide stakeholders and consumers. Education sessions were held in Grand Rapids, Lansing, Gaylord and Detroit.

Throughout January to April 2007, the HIT Commission provided guidance to MDCH as the department submitted proposals for several HIT and HIE grant opportunities including: the Federal Communications Commission Rural Health Program, the Medicaid Transformation Grants, the Center for Disease Control and Prevention Biosurveillance and HIE grant, and the Office of the National Coordinator for HIT National Health Information Network II grants.

The HIT Commission provided input and guidance into work of the Michigan Health Information Privacy and Security Collaboration (HISPC), a grant program awarded to MDCH from the National Governor's Association and the federal Department of Health and Human Services. With the Commission's participation, HISPC has completed an in-depth assessment of Michigan's privacy and security laws, policies and practices as it relates to barriers to the electronic exchange of health information. In December 2007, the HIT Commission reviewed the findings of HISPC and recommended policy and code changes to MDCH that will eliminate barriers and promote adoption of HIE and HIT as well as strengthen consumer protection.

In October 2007, the HIT Commission engaged in a strategic planning session to identify issues that need further research and recommendations from the Commission. The issue list formed the Commission's agenda for 2008, as outlined below.

Overview of Activities Scheduled for 2008:

The agenda for the HIT Commission in 2008 is to tackle major issues that are barriers to the adoption of HIE and HIT in Michigan. Each issue will be researched by MDCH and the MiHIN Resource Center. An issue briefing will be presented to the Commission to allow for careful and thorough discussion from which the Commission can make a specific recommendation to MDCH concerning each area.

With input from the regional HIE projects, the HIT Commission has identified these initial topics, including:

- Identify areas of Michigan legislation that can be amended or created to support HIE and HIT adoption and use
- Identify areas of federal legislation that must be amended or created to support HIE and HIT adoption and use
- Developing value propositions for statewide HIE and HIT stakeholders
- Creating and maintaining a Statewide Master Patient Index
- Creating and maintaining a Statewide Master Provider Index
- Identification and implementation of national and statewide standards
- Identify solutions for interoperability between regional HIEs
- Recommend strategies for consumer education and involvement in HIE and HIT
- Develop a plan to use metrics and measures to determine success of HIE
- Identify ways that HIT and HIE can be used to support the use of Evidence Based Practices throughout the healthcare system

The HIT Commission will make recommendations on other issues and topics as necessary. The HIT Commission will maintain the MiHIN strategic plan with updates reflecting the Commission's recommendations to MDCH. The HIT Commission will continue to be involved in the Regional HIE projects and will continue to provide guidance to the MiHIN Resource Center.