

Michigan Health Information Technology Commission
Minutes for the May 2018 Meeting

Date: Tuesday, May 22, 2018
1:00 p.m. – 2:57 p.m.

Location: Grand Conference Room
South Grand Building
333 South Grand Avenue
Lansing, Michigan 48933

Commissioners Present:

Thomas Simmer, M.D., Co-Chair
Rod Davenport, Co-Chair
Norman Beauchamp, M.D. (Phone)
Jill Castiglione (Phone)
Michael Chrissos, M.D. (Phone)
Rozelle Hegeman-Dingle
Irita Matthews
Patricia Rinvelt
Randall Ritter (Phone)
Orest Sowirka, D.O. (Phone)

Commissioners Absent:

Meredith Harper
Karen Parker

Staff:

Meghan Vanderstelt
Phil Kurdunowicz
Erin Mobley

Attendees:

Kim Bachelder
Megan Piotrowski
Michelle Fejedelem
Shreya Patel
George Bosnjak
Kevin Brooks
Umbrin Ateequi

Bruce Maki
Zach Corben
Philip Vigas
Forest White
Greg Mieden
Mahshid Abir, M.D.
Jared Welehodsky

Jen Stokely
Dave Schneider
Jason Werner
Emmalilly Hoxsie
Drew Murray
Jon Newpul

Minutes: The regular meeting of the Michigan Health Information Technology Commission was held on Tuesday, May 22, 2018, at the South Grand Building with 10 Commissioners participating in person or by phone.

A. Welcome and Introductions

1. Policy Division Director Meghan Vanderstelt called the meeting to order at 1:00 p.m.

2. Ms. Vanderstelt asked commissioners to introduce themselves and share any updates since the last time the commission convened. The commissioners did not have any updates to share at this time.

B. Commission Business

1. Ms. Vanderstelt asked commissioners to review and consider approving the minutes from the February 27, 2018 meeting.
 - a. Commissioner Patricia Rinvelt made a motion to approve the minutes as corrected, which was seconded by Commissioner Rozelle Hegeman-Dingle.
 - b. Ms. Vanderstelt asked if there was any objection to approving the minutes. Seeing none, she noted the minutes had been approved unanimously.

C. HIT/HIE Update

1. HIT Commission Dashboard. Ms. Vanderstelt asked the commissioners to review the May 2018 HIT Commission Update. The PowerPoint slides for this presentation will be made available on the website after the meeting.
 - a. Ms. Vanderstelt noted that there is currently a prioritization of IT projects related to the budgetary shortfall for Fiscal Year 18. She stated most of the projects affected are funded through APDs and that there is a concern that there will not be enough General Fund match available for all projects. She will keep the HIT Commission updated.
2. Update on 2017 Resolutions. Phil Kurdunowicz
 - a. Standard Consent – Mr. Kurdunowicz informed the commission that MDHHS published Version 4.1 of the standard consent form in February. He also noted that Version 4.1 is fully compliant with the amended Michigan Mental Health Code as well as 42 CFR Part 2.
 - i. He stated that MDHHS is developing Version 5.0, which will focus on improving readability. He noted that MDHHS is currently soliciting feedback from Consent Form Workgroup and will also be piloting the form with Community Mental Health Service Programs in June.
 - ii. Commissioner Tom Simmer inquired if we will be piloting useability or include some sort of evaluation of the number of transactions. Mr. Kurdunowicz stated that the initial focus is on accessibility but also noted that the department is open to including that information as part of their studies.
 - b. Definition of Coordination of Care – Mr. Kurdunowicz conveyed to the commission the department is confronting some challenges with adopting one definition for coordination of care due to federal regulations. However, MDHHS also noted that MDHHS is committed to assessing how the term is used in different areas in the department and identify possibilities for alignment. He noted they are working with subject matter experts in three areas of the department and will provide an update at a future HIT Commission meeting.
 - i. Commissioner Simmer recommended creating a table to identify what the various definitions of coordination of care are.

- ii. Ms. Vanderstelt informed that the three areas being studied will identify where “care coordination” is defined in policy, contract, or statute.
- iii. Mr. Kurdunowicz acknowledge the importance of the feedback from the commission and also indicated that some recommendations for remedying discrepancies could be available by the next HIT Commission meeting.
- c. Quality Reporting – Ms. Vanderstelt informed the Physician-Payer Quality Collaborative (PPQC) has received survey responses on how Medicaid Health Plans are participating in the pilot of the CQM use case. She stated that the managed care plans have been focused on zeroing in on key measures to align regions together across payers. She also noted that these efforts have initially focused on Medicaid but may expand beyond Medicaid in Fiscal Year 19. She stated there is an opportunity of further alignment with other plans in the PPQC. Ms. Vanderstelt stated Tom Curtis from MSA will be invited to present at a future HIT Commission meeting.

D. MDHHS Response to the Opioid Crisis – Jared Welehodsky, MDHHS, Policy, Planning and Legislative Services Administration

1. The PowerPoint slides for this presentation will be made available on the website after the meeting.
2. Mr. Welehodsky informed the commission that the department is tracking five key data points: (1) all drug deaths; (2) all opioid deaths; (3) opioid prescriptions, (4) neonatal abstinence syndrome cases; and (5) people in substance use disorder treatment for opioids or heroin. He also noted that there has been a significant increase in total overdose deaths and opioid related deaths in the past five years.
3. Mr. Welehodsky informed the commission that the department launched an opioid addiction resources website to assist consumers and prescribers. He also noted that the department launched a statewide public awareness campaign in 2017, which is also funded through 2019. He also indicated that the department is implementing newly passed legislation related to (1) a Standing Order for Naloxone, (2) Medical School Curriculum and (3) Opioid Treatment Consent Form. He also noted that the Substance Abuse and Mental Health Services Administration awarded a two-year State Targeted Response (STR) Grant in April 2017 to MDHHS to be used for prevention, treatment and recovery.
4. The HIT Commission held a brief question and answer period regarding treatment centers, NAS concerns, and provider concerns regarding not having access to emergency refill prescription resources.
5. Mr. Welehodsky will provide a copy of the Opioid Treatment Consent form to the commissioners.

E. Opioid Data Analytics: Supporting the Strategy – Dave Schneider, MDHHS, Medical Services Administration

1. The PowerPoint slides for this presentation will be made available on the website after the meeting.

2. Dave Schneider informed the HIT Commission about the Medicaid Innovation Accelerator Program (IAP), which is a collaboration between the Center for Medicaid and CHIP Services (CMCS) and the Center for Medicare and Medicaid Innovation (CMMI). He noted that the goal of the collaboration is to build state capacity and support ongoing innovation in Medicaid. He stated Michigan submitted an Expression of Interest application to leverage IAP resources to introduce delivery system and payment reforms that more effectively identify individuals with a substance use disorder (SUD), expand coverage for effective SUD treatment, and enhance SUD practices delivered to beneficiaries.
3. Mr. Schneider described what the department's progress to date and next steps for this initiative. He stated the team will continue to meet even after the cohorts end in September. Mr. Schneider stated he will keep the HIT Commission updated.
4. The HIT Commission held a brief question and answer session regarding building data sources for diagnoses and other major risk factors.

F. System for Opioid Overdose Surveillance (S.O.S.) – Mahshid Abir, M.D., MSc

1. The PowerPoint slides for this presentation will be made available on the website after the meeting.
2. Dr. Mahshid Abir provided background information on the development of S.O.S. She informed the commission that more people in America die from drug overdoses than car accidents. She also noted that the University of Michigan Injury Center, the Acute Care Research Unit, and the University of Michigan Transportation Research Institute are collaborating on developing and piloting a real-time S.O.S. in Washteanw County. She also noted that the S.O.S. project is funded by the Center for Disease Control and Prevention and the National Drug Control Center and that funding is renewed on an annual basis.
3. Dr. Abir informed S.O.S. can only be used for surveillance and cannot be used for research. She stated it allows public health and law enforcement to continuously track and monitor statewide trends in opioid overdoses, which can support the allocation of resources in real-time.
4. The HIC Commission held a brief question and answer session regarding concerns of duplicative systems.

G. HIT Commission Next Steps

1. Ms. Vanderstelt stated that the next meeting is scheduled for September 25, 2018 at 1:00 p.m. The meeting will be held in the South Grand Conference Room.

H. Public Comment

None

I. Adjourn

1. Ms. Vanderstelt adjourned the meeting at 2:54 p.m.