



# Michigan Health Information Technology Commission

November 19, 2024

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# Hybrid “Housekeeping” Guidelines



## Access

- **This meeting is being recorded.**
- For members calling into the meeting and unable to use web-based meeting features, an open comment period will be offered at the end of the meeting.
- **If at any time you have accessibility or technical issues during the meeting,** please contact [StantonT4@michigan.gov](mailto:StantonT4@michigan.gov)
- **Web cam video display is reserved for commissioners and presenters.**



## Interacting

- **The group chat will be monitored and utilized throughout the meeting.** Any questions or comments raised in the group chat will be read aloud.
- Unless otherwise specified, **all attendees (besides the presenter) will be muted during a presentation.** This rule will reduce background noise or “feedback.”
- **Please identify yourself by stating your name before you begin speaking.** This will assist us in keeping accurate meeting minutes.
- **Please be sure to mute yourself after you are done speaking,** this will reduce feedback during the meeting.



## Public Participation

- Except for the public comment period, **public participants should remain muted unless invited to speak by the commission.**
- Per the Michigan Open Meetings Act, disclosing your identity in this meeting is not required.
- The public comment period will be accessible for multiple modalities at the end of the meeting.
- For those attending in person, please fill out a blue comment card and we will call on you during the public comment period.

# Agenda

Item	Facilitator(s)	Time
<p><b>1. Commission Business</b></p> <ul style="list-style-type: none"> <li>a. Quorum</li> <li>b. Welcome, Introductions, and Announcements</li> <li>c. Approve Meeting Minutes</li> <li>d. 2025 Meeting dates – Feb 11; May 13; Aug 12; Nov 18</li> </ul>	HITC Chairs	<p>1:00 pm - 1:10 pm</p> <p>10 minutes</p>
<p><b>2. HIT Roadmap</b></p> <ul style="list-style-type: none"> <li>a. HIT Roadmap Tracker Highlights</li> <li>b. MiHIN Board Update</li> <li>c. MI High-Speed Internet Update</li> <li>d. Training &amp; Technical Assistance Update</li> <li>e. Public Health Data Modernization Update</li> <li>f. CIE Advisory Committee Update</li> </ul>	<ul style="list-style-type: none"> <li>a. MDHHS</li> <li>b. Commissioner Tyus</li> <li>c. Commissioner Robinson</li> <li>d. Commissioner Sasy</li> <li>e. MDHHS, MiHIN</li> <li>f. Commissioner Ebersole-Wood, Commissioner Tyus</li> </ul>	<p>1:10 pm – 2:10 pm</p> <p>1 hour</p>
<p><b>3. Open Discussion</b></p> <ul style="list-style-type: none"> <li>a. 2024 Annual Report</li> </ul>	HITC Chairs	<p>2:10 pm – 2:50 pm</p> <p>40 minutes</p>
<p><b>4. Public Comment</b></p>	HITC Chairs	<p>2:50 pm – 3:00 pm</p> <p>10 minutes</p>
<p><b>5. Adjourn</b></p>		

# 1. Commission Businesses

A. Quorum

B. Welcome, Introductions, and Announcements

C. Approve Meeting Minutes

D. 2025 Meeting Dates:

- February 11
- May 13
- August 12
- November 18

## 2. HIT Roadmap

- a. HIT Roadmap Tracker Highlights
- b. MiHIN Board Update
- c. MI High-Speed Internet Update
- d. Training & Technical Assistance Update
- e. Public Health Data Modernization Update
- f. CIE Advisory Committee Update



Led by: MDHHS, Commissioner Tyus, Commissioner Robinson, Commissioner Sasy, MDHHS, MiHIN, Commissioner Ebersole-Wood, Commissioner Tyus



# HIT Roadmap Initiatives



Identify  
Champions  
and Empower  
Leaders



Enhance  
Health Data  
Utility



Address  
Michigan's  
Digital Divide



Improve  
Onboarding  
and Technical  
Assistance









Protect Public  
Health



Adopt  
Standards for  
Social Care  
Data Fields

# 2023 Annual Report Recommendations

	 Identify Champions and Empower Leaders	 Enhance Health Data Utility	 Address Michigan's Digital Divide	 Improve Onboarding and Technical Assistance	 Protect Public Health	 Adopt Standards for Social Care Data Fields
Advance Social Care Data Standards and Governance	✓	✓				✓
Promote HIE and CIE Incentives		✓				
Strengthen Statewide HIE Accountability		✓			✓	
Expand Broadband Access	✓		✓		✓	✓
Support Technical Assistance and Training	✓	✓	✓	✓	✓	✓
Advocate for Patients and Consumers	✓	✓	✓	✓	✓	✓



# Tracking progress:

## 1. Identify champions and empower leaders

INITIATIVE: Identify champions and empower leaders	Lead	Status				
		Plan	Build	Implement	Evaluate	Improve
<b>1A:</b> Drive implementation of roadmap	MDHHS					
<b>1B:</b> Refresh state health IT governance	MDHHS					





# Tracking progress:

## 2. Enhance health data utility

INITIATIVE: Enhance health data utility	Lead	Status				
		Plan	Build	Implement	Evaluate	Improve
<b>2A:</b> Build on the success of health information exchange in Michigan	MDHHS/MiHIN			→		
<b>2B:</b> Promote standards and secure infrastructure	MDHHS/MiHIN			→		
<b>2C:</b> Build data exchange that is consumer-centric and mediated by each resident	MDHHS/MiHIN			→		



# Tracking progress:

## 3. Address Michigan's digital divide

INITIATIVE: Addressing the digital divide	Lead	Status				
		Plan	Build	Implement	Evaluate	Improve
<b>3A:</b> Support digital connectivity efforts	MiHI/MDHHS					
<b>3B:</b> Pursue strategic partnerships that enable greater federal, state, and private investments in connectivity	MiHI/MDHHS					



# Tracking progress:

## 4. Improve onboarding and technical assistance

INITIATIVE: Improving onboarding and technical assistance	Lead	Status				
		Plan	Build	Implement	Evaluate	Improve
<b>4A:</b> Sponsor onboarding at higher levels of statewide leadership	MDHHS					
<b>4B:</b> Support the continued implementation of telemedicine	MDHHS					



# Tracking progress:

## 5. Protect public health

INITIATIVE: Protect public health	Lead	Status				
		Plan	Build	Implement	Evaluate	Improve
<b>5A:</b> Accurate and timely information in public health systems	MDHHS/MiHIN					
<b>5B:</b> Support quality improvement of resident care	MDHHS/MiHIN					
<b>5C:</b> Bolster public health preparedness systems	MDHHS					

# Public Health Data Modernization

Michigan Health I.T. Commission Meeting, 2024 Q4

11/19/2024

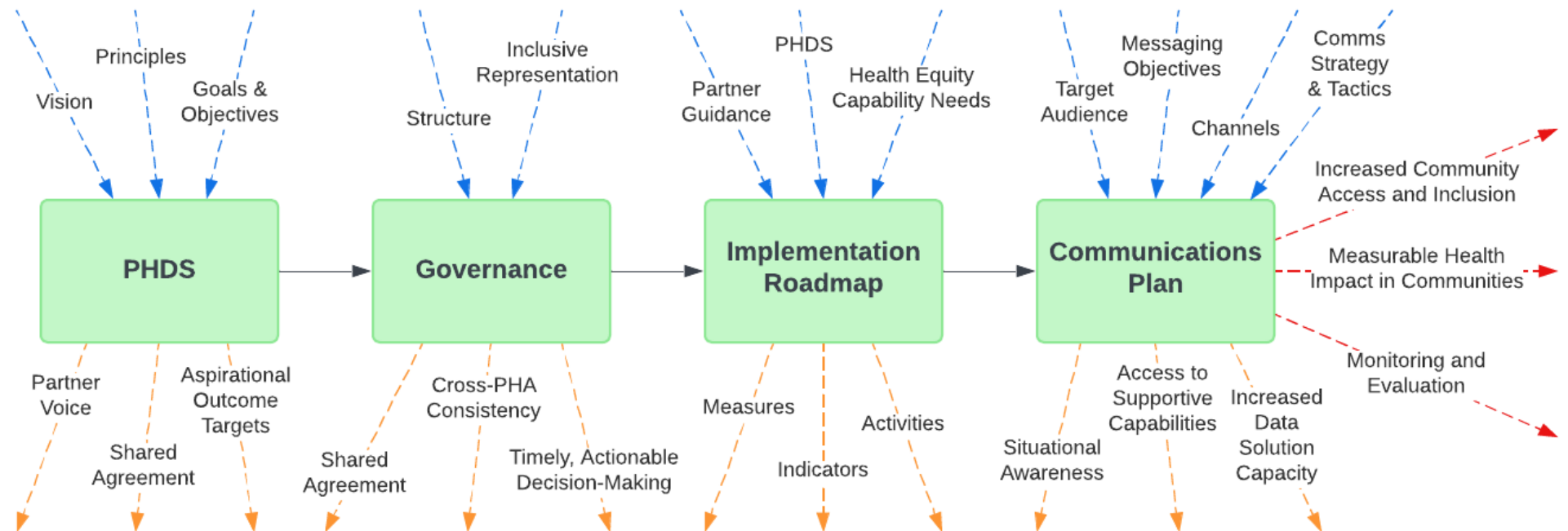
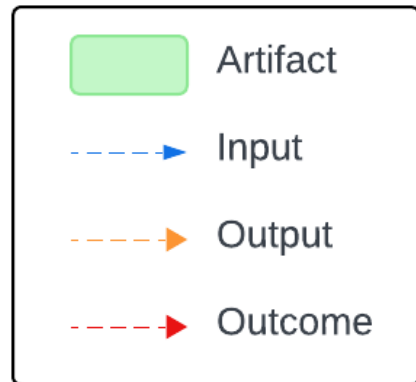


# Public Health Data Strategy (PHDS) Vision

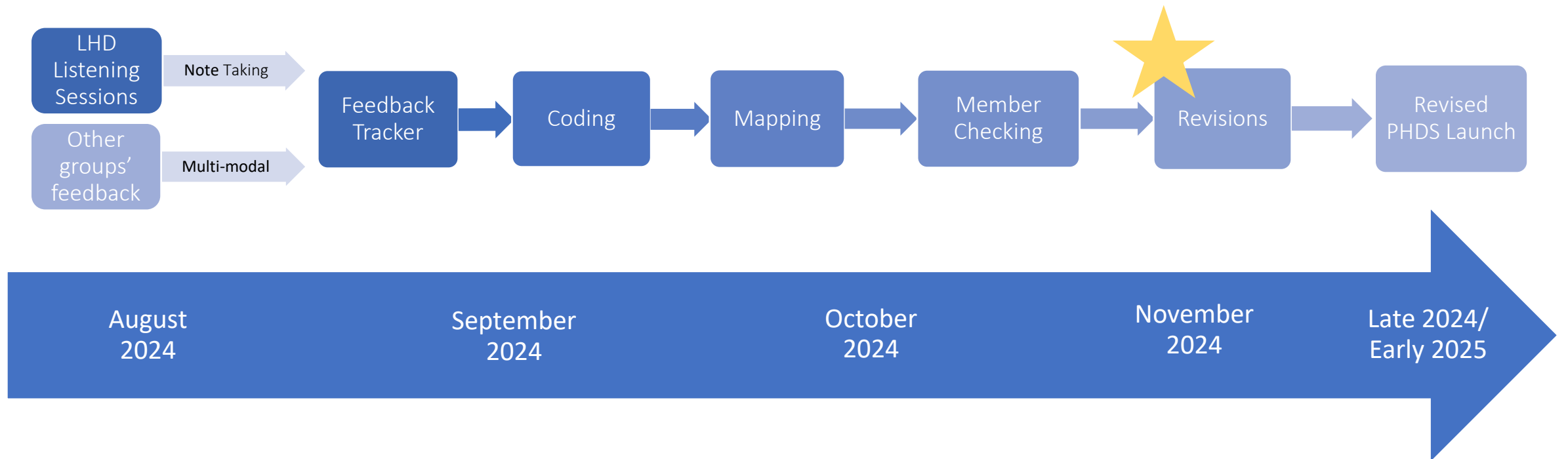
The PHDS envisions a responsive, nimble public health data ecosystem planned in an inclusive manner<sup>1</sup> that enables the collection, sharing, and use of diverse public health data to improve health equity<sup>2</sup> in the State of Michigan.

This data ecosystem is integral to support public health initiatives targeting origins of public health threats at individual, community, and institutional levels.

# Model of Approach



# Public Health Data Strategy Feedback Timeline





# Strategy Background

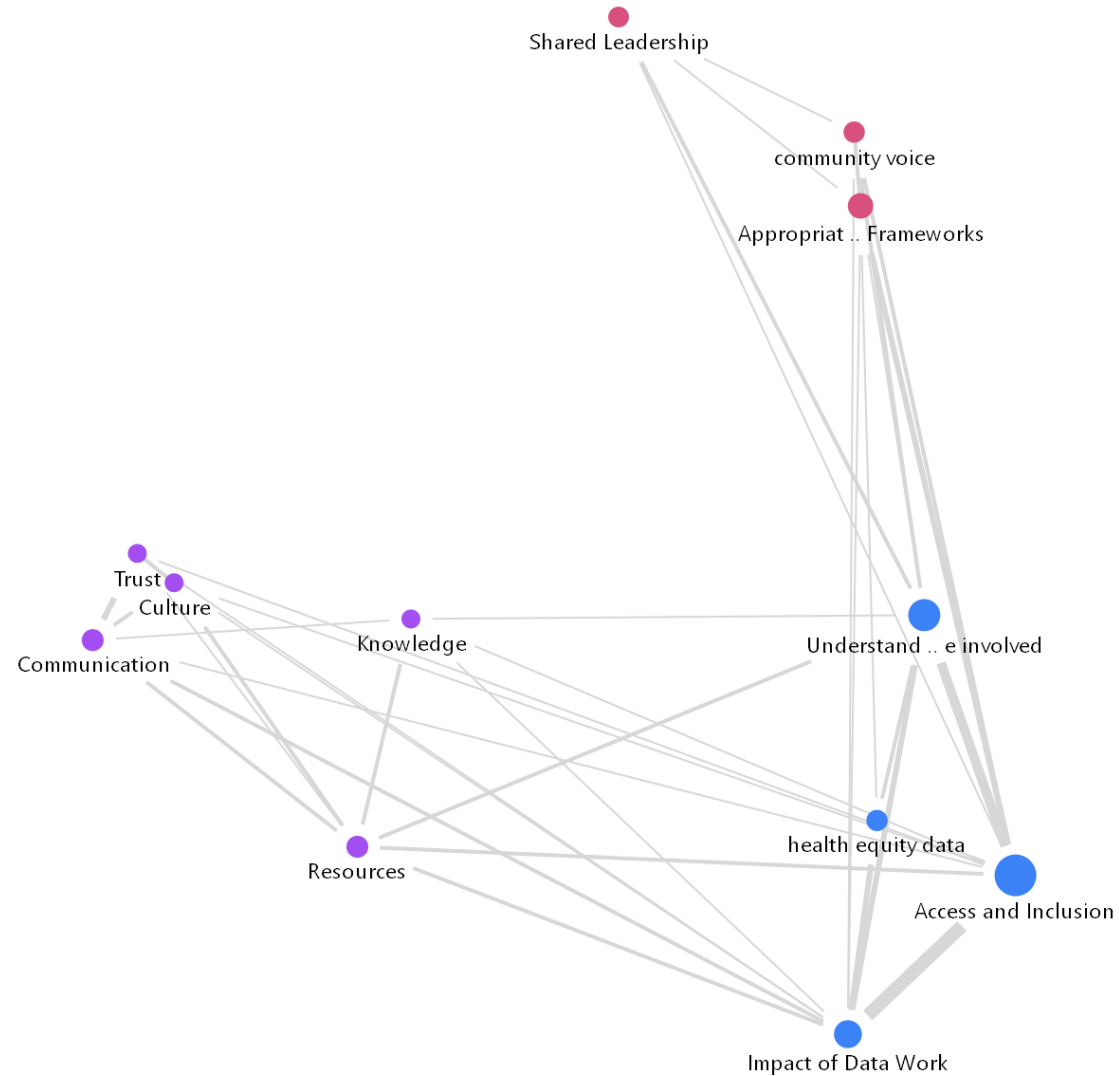
## What's The Intended Result



- Goals and objectives focus on **challenging MDHHS** to do its part in improving the public health data ecosystem<sup>1</sup>
- The PHDS focuses on desired **outcomes**, not implementation approach
- PHDS should **result** in better **collective governance** of data solution decision-making that is **representative of a broader public health coalition.**

<sup>1</sup> The network of resources, processes, and technology that our collective 'we' uses to collect, store, analyze, and share data.

# What We Heard



# Next Steps

- Key Message = Enable an equity-centered data ecosystem undergirded by access, inclusion, shared leadership in data solutions governance, and minimized points of entry to MDHHS-house data
- Revise draft PHDS to represent key pillars
  - Goals reframed from themes identified in feedback
- Curate PHDS-Dependent Discrete Artifacts
  - Implementation Activity Roadmap (e.g., consolidated data ecosystem)
  - Governance Charter
  - Communications Plan

## Initiative #5: Protect public health

### Description

Greater access by public health entities to electronic health information and case reporting data will enable end users with high quality, bidirectional population health information. The capabilities enabled by this data sharing would ensure centralized data access and streamlined reporting in public health crises and ease the administrative burden experienced by local public health departments and providers due to manual data entry, redundant reporting, and difficulty querying public health data systems.

# Health IT Roadmap Alignment

## Initiative #5, Objective

B:

Support quality  
improvement of  
resident care

Activity 5B-1: Enhance data services that build capacity for more complete insight into utilization, quality improvement, and evidence-based intervention design.

- The commission and MDHHS will continue to engage stakeholders to assess the business needs and feasibility of population health evaluation systems that would meet the goals in this activity.
- The commission and MDHHS will pursue funding and advocate for statewide resources that allow greater business insights and analysis into resident whole-person wellness and population health outcomes.

# Health IT Roadmap Alignment

<p><b>Initiative #5, Objective C:</b></p> <p><b>Bolster public health preparedness systems</b></p>	<p>Activity 5C-1: Provide extensive training and education for local public health agencies and other key stakeholders.</p> <ul style="list-style-type: none"><li>• In alignment with Initiative #4, the commission and MDHHS will pursue funding opportunities and a technical assistance program framework to enable this activity and its goals.</li></ul> <p>Activity 5C-2: Modernize state public health systems and improve functionality for syndromic surveillance, vital records, disease registries, and electronic lab reporting systems.</p> <ul style="list-style-type: none"><li>• MDHHS will pursue and maximize the impact of funding that modernizes and integrates its public health data systems.</li><li>• The commission and MDHHS will prioritize HIE use cases and health IT capabilities that optimize public health system interoperability.</li></ul>
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# MiHIN Update

Health Information Technology Commission  
2024 Q4 Meeting  
11/19/2024

Adam Giroux, MPH  
Program Director  
Population Health and Quality



# Modernizing Infrastructure to Support Population Health and Public Health in Michigan

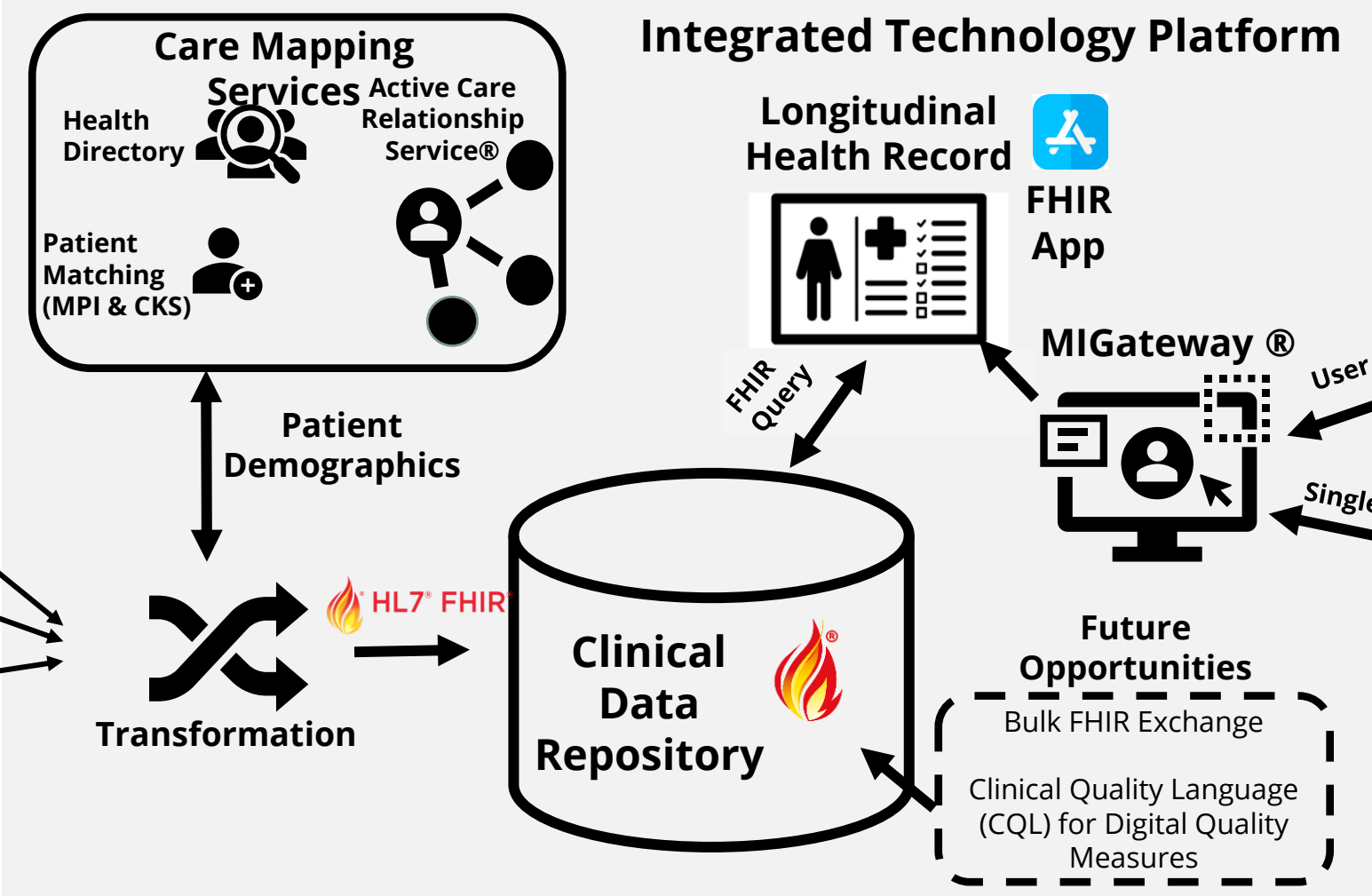
- Integrated Technology Platform Update
  - Clinical Data Repository with HL7 Fast Healthcare Interoperability Resources (FHIR) Capabilities
- Expanding beyond patient attribution and message routing
  - How the Active Care Relationship Service<sup>®</sup> (ACRS<sup>®</sup>) can support Population Health and Patient Context



# Integrated Technology Platform Update

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# Integrated Tech Platform with FHIR Enabled Clinical Data Repository



# Active Care Relationship Service® (ACRS®) Update

- ACRS Overview
- ACRS for Population Health and Patient Context

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# Active Care Relationship Service® (ACRS®)

Linking patients with the providers who care for them

Let's providers and covered entities **declare active care relationships** with patients by submitting patient rosters to MiHIN

**Accurately routes information** to alert providers in active care relationships with patients (e.g., Admission, Discharge, Transfer Notifications, medication reconciliation, etc.)



## Primary Uses

- Message Routing
- View Active Care Team
- Authorize Access to PHI
- Document Discovery (CCDA)

# Widespread Adoption

540 ACRS patient roster senders

sending over 780 patient rosters monthly

creating more than 32 million patient attributions (relationships)

representing over 7100 organizations and facilities

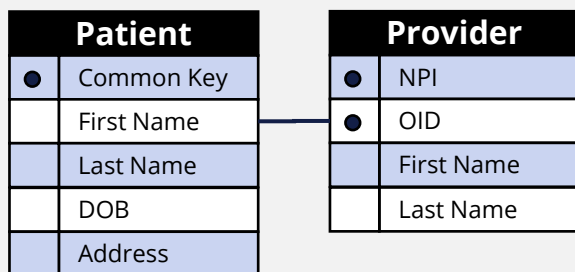


# The Evolution of ACRS®

## Patient Attribution Service

### 1<sup>st</sup> Generation ACRS

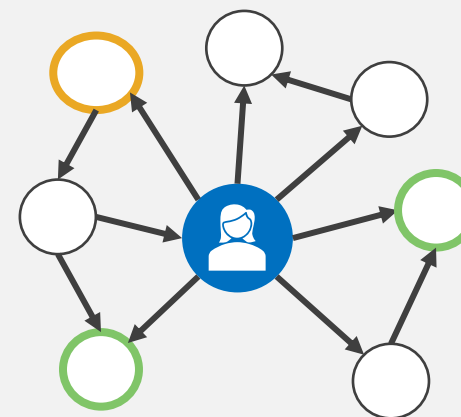
Purpose built relational data base designed to capture and expose care team relationships captured in attribution files and ADT's for message routing.



## Patient Attribution Service + Patient/Population Health Context Service

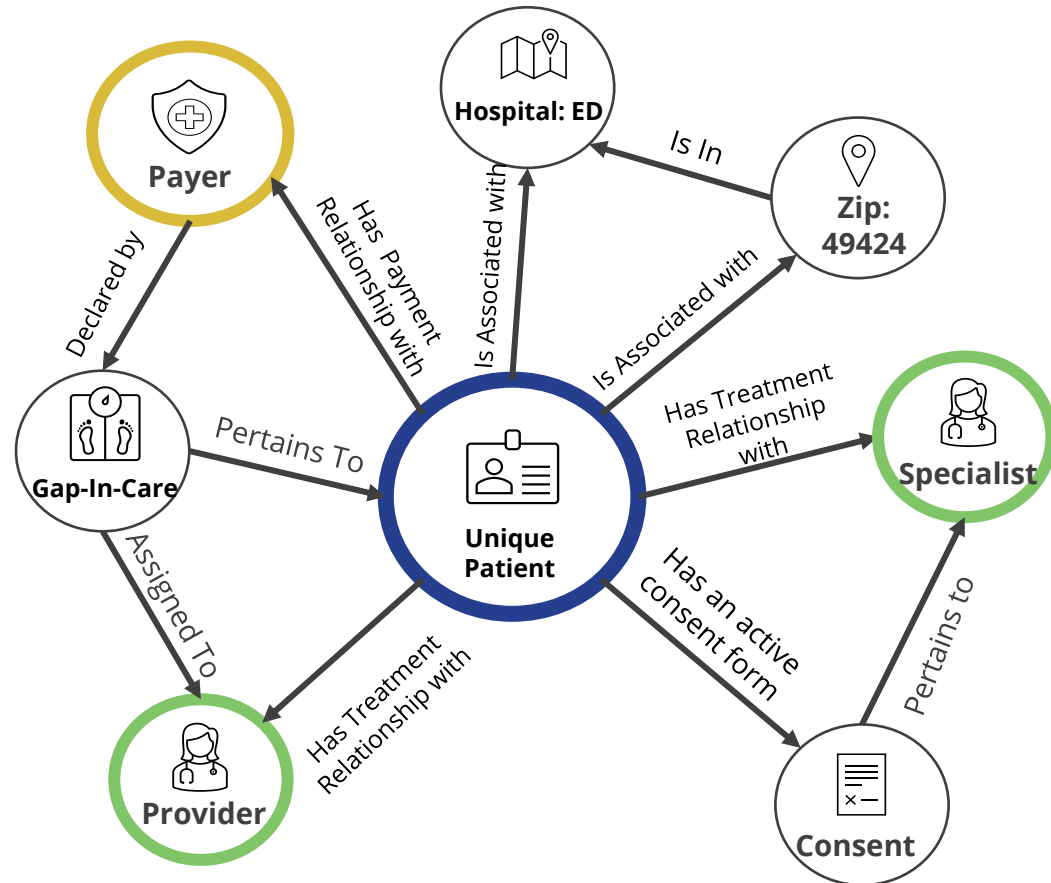
### 2<sup>nd</sup> Generation ACRS

Refactored architecture to a graph data model enables a Patient Centered Care Map



# ACRS for Population Health and Patient Context

# ACRS as a Patient Centered Care Map



## Objects

Real-world objects like **patients, providers** and **organizations** and abstract concepts like **zip codes, dates, risk scores, social needs** and many others.

## Relationships

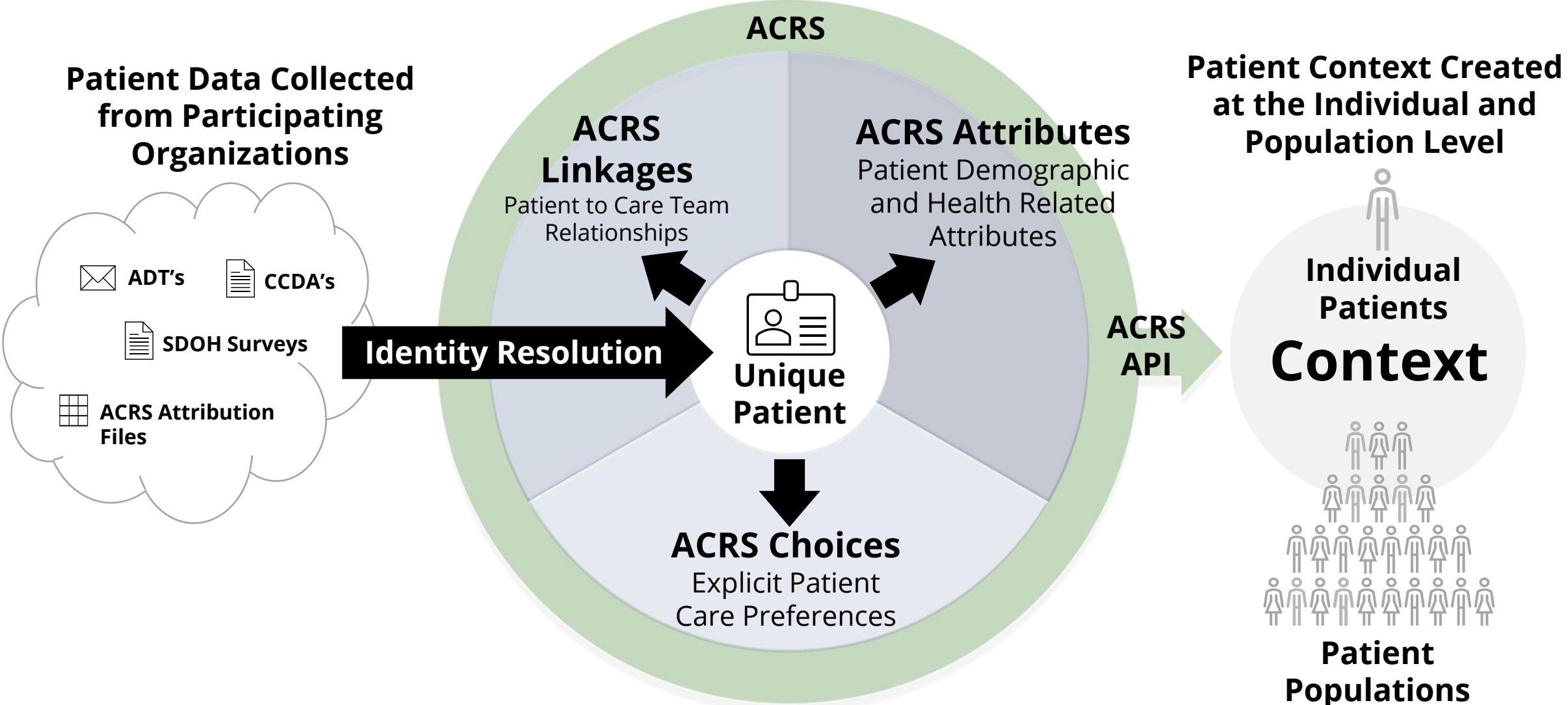
A logical association between two objects – **Provider A *cares for* Patient B; Patient B *lives in* Zip Code 49424**

## Semantics

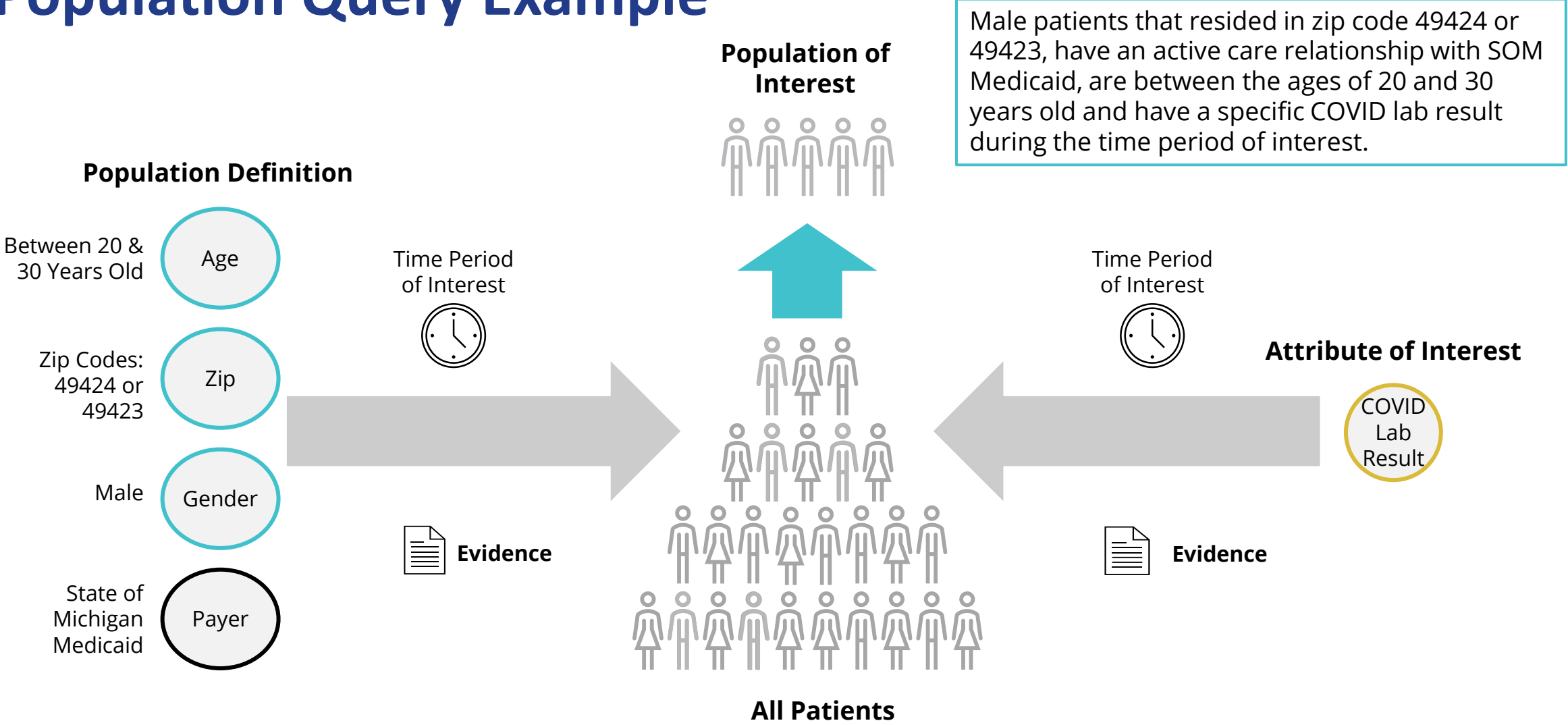
Indicates the meaning of objects and relationships – **Provider A *has a treatment relationship with* Patient B; Provider A *is a Primary Care Physician***



# How Will ACRS® Create Context?

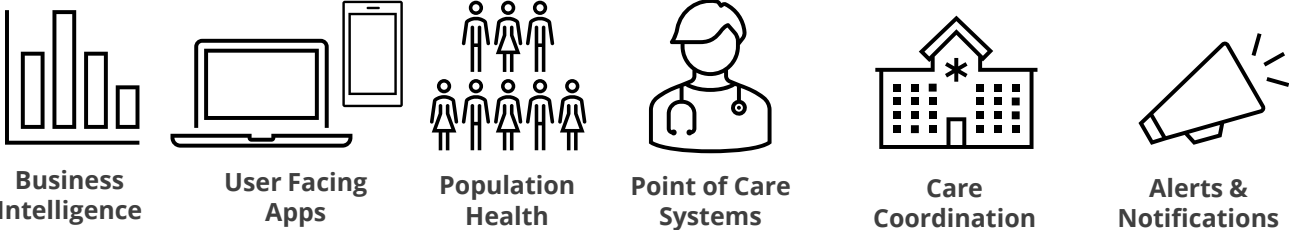


# Population Query Example

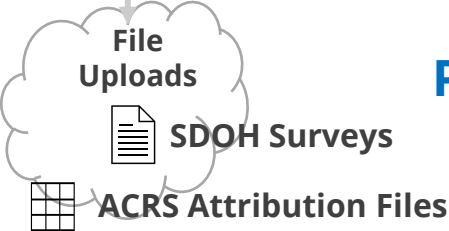
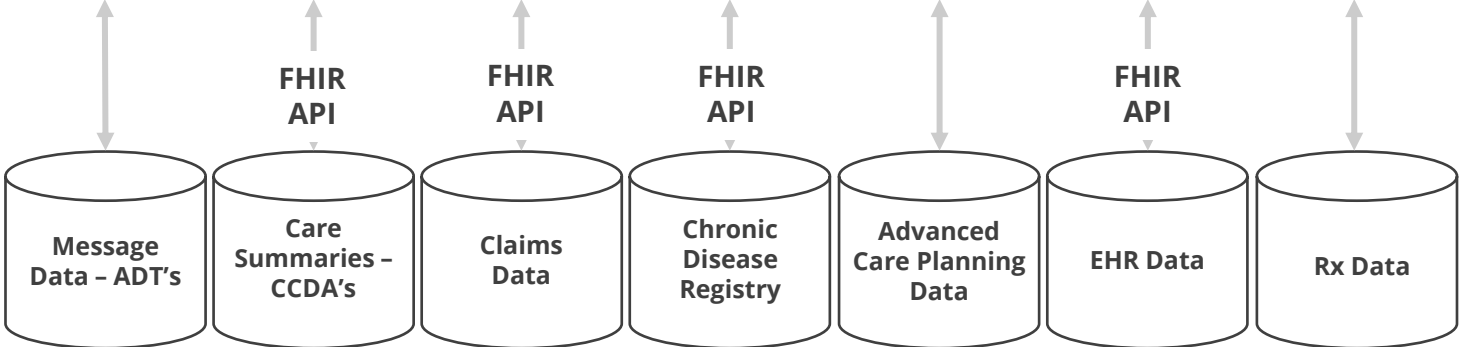
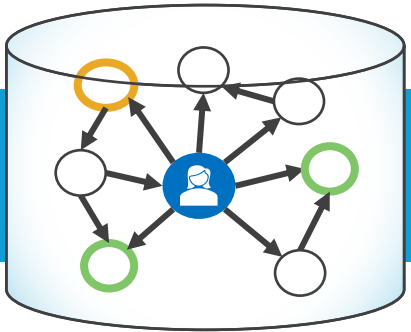


# Linking Patient/Population Data Seekers with Data Sources through a Semantic Data Model

Patient/Population Data Seekers



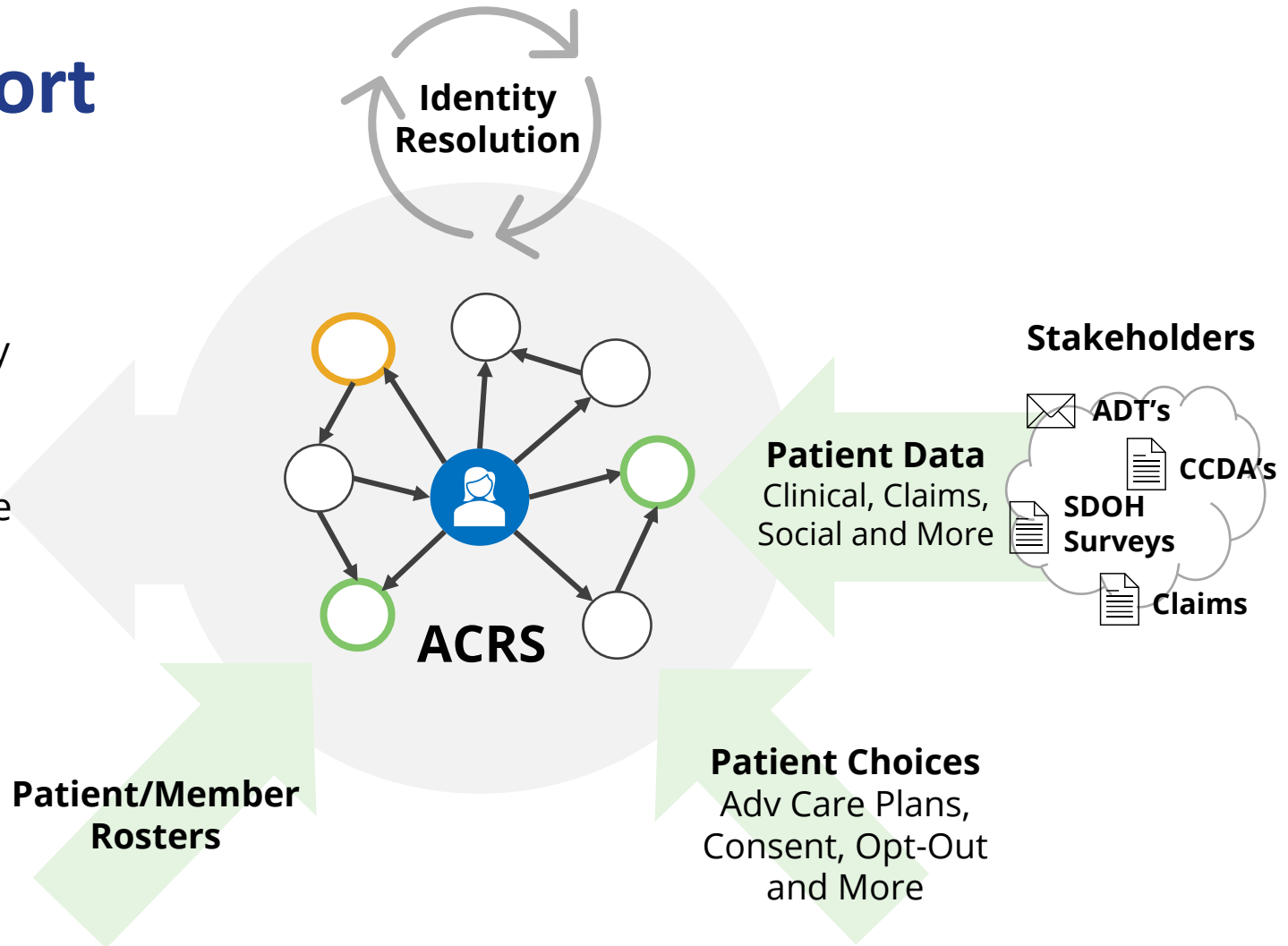
ACRS Semantic Data Model



Patient/Population Data Source Examples

# ACRS will be able to support

1. Discovery of care team attributions for message routing and query authorization
2. Discovery of current and historical care team relationships for patient data discovery and query across the ecosystem
3. Management of Patient Choice by tracking Consent, Advanced Care Plans, Opt-Out and more
4. Individual patient context queries
5. Patient population health management insight and analysis utilizing complex population-based queries



# Next Steps

- Deploying new ACRS data model into production in the new Integrated Technology Platform (Q1 2025)
- Initial focus areas being considered include
  - Applying data enrichment to message delivery using ACRS attributes (e.g. care team information, payer relationship, race/ethnicity demographics)
  - Statewide population/geographic level analysis to identify health care access gaps or in HIE data sharing/adoption
    - Example query → Population with acute hospital event but no evidence of a provider or payer relationship (no org is declaring a relationship via ACRS to MiHIN)

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# THANK YOU

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## LET'S CONNECT



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[@MiHIN](https://twitter.com/MiHIN)



[linkedin.com/company/mihin](https://linkedin.com/company/mihin)



# Tracking progress:

## 6. Social care data

INITIATIVE: Social Care data	Lead	Status				
		Plan	Build	Implement	Evaluate	Improve
<b>6A:</b> Develop policies to accompany new standards that promote easy sharing of social care information	MDHHS	➔				
<b>6B:</b> Support systems that promote better coordination and integration of services	MDHHS / MiHIN	➔				

# 3. Open Discussion

## A. 2024 Annual Report Development

Led by: HITC Chairs



# Annual Report Snapshot

## Purpose

- Requirement codified in the [Michigan Public Health Code Act 368](#)
- Tool to focus attention on specific opportunities or priorities within the six core initiatives of the Bridge to Better Health Roadmap







## Audience

- Chairpersons of the standing committees of the house of representatives and senate with jurisdiction over issues pertaining to community health and information technology
- House of representatives and senate appropriations subcommittees on community health and information technology
- Senate and house fiscal agencies

## 2024 Proposal

- Continue 2023 recommendations, with modifications or adjustments
- Consider additional recommendations

# 2023 Annual Report Recommendations

	 Identify Champions and Empower Leaders	 Enhance Health Data Utility	 Address Michigan's Digital Divide	 Improve Onboarding and Technical Assistance	 Protect Public Health	 Adopt Standards for Social Care Data Fields
Advance Social Care Data Standards and Governance	✓	✓				✓
Promote HIE and CIE Incentives		✓				
Strengthen Statewide HIE Accountability		✓			✓	
Expand Broadband Access	✓		✓		✓	✓
Support Technical Assistance and Training	✓	✓	✓	✓	✓	✓
Advocate for Patients and Consumers	✓	✓	✓	✓	✓	✓



# 4. Public Comment

Led by: HITC Chairs



# 5. Adjourn

Led by: HITC Chairs