

Michigan Health Information Technology Commission

The Michigan Health Information Technology Commission is an advisory Commission to the Michigan Department of Health and Human Services and is subject to the Michigan open meetings act, 1976 PA 267, MCL 15.261 to 15.275

June 2020 Meeting Agenda

| Item | Presenter(s) | Time |
|--|---------------------------|------------|
| Welcome and Introductions | Trevor Youngquist (MDHHS) | 5 minutes |
| Commission Business A. Review of 2/25/2019 Minutes | Chair | 5 minutes |
| 3. MDHHS Update | Trevor Youngquist (MDHHS) | 5 minutes |
| 4. May Update Overview A. Health Information and Management Systems Society (HIMSS) B. Jackson Community Medical Record (JCMR) C. Michigan Health Information Network (MiHIN) | Various | 20 minutes |
| 5. Update on HIT Roadmap | CedarBridge Group | 60 minutes |
| 6. Public Comment | | |
| 7. Adjourn | | |



1. Welcome and Introductions

Trevor Youngquist (MDHHS)



Virtual Meeting "Housekeeping"

To maintain an enjoyable virtual meeting environment for all, we will be using the following "housekeeping" guidelines:



This meeting is being recorded. The recording will be uploaded to the MDHHS HIT Commission web page.



Web cam video display has been disabled for this meeting.



If at any time you have accessibility or technical issues during the meeting, please contact youngquistt1@michigan.gov or jacksonc47@michigan.gov

Virtual Meeting "Housekeeping"

To maintain an enjoyable virtual meeting environment for all, we will be using the following "housekeeping" guidelines:



Unless otherwise specified, all attendees (besides the presenter) will be muted during a presentation. This rule will reduce background noise or "feedback." All commissioners will be unmuted after each presentation for questions/discussion.



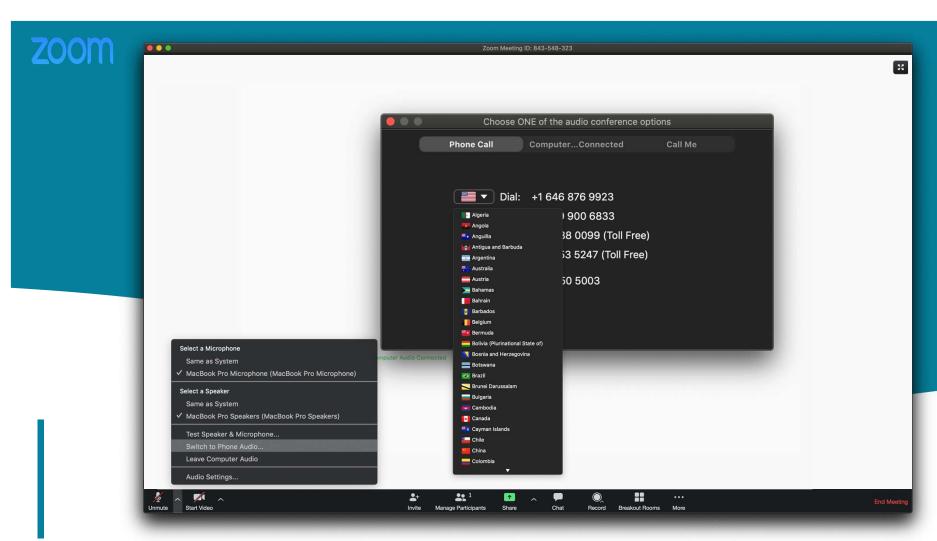
If you would like to speak during a presentation, please "raise your hand" (directions on next slide). The host will call on whoever has a raised hand to unmute them and allow them to speak.



The group chat will be monitored and utilized throughout the meeting. At the end of presentations, any questions or comments raised in the group chat will be read aloud for the presenter to respond/consider.

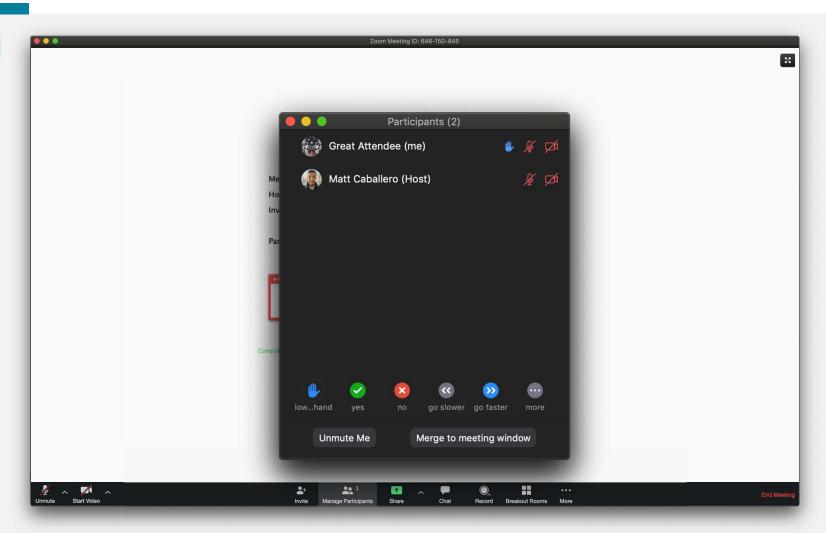


For members calling into the meeting and unable to use meeting features described above, an open comment periods will be offered at the end of the meeting.



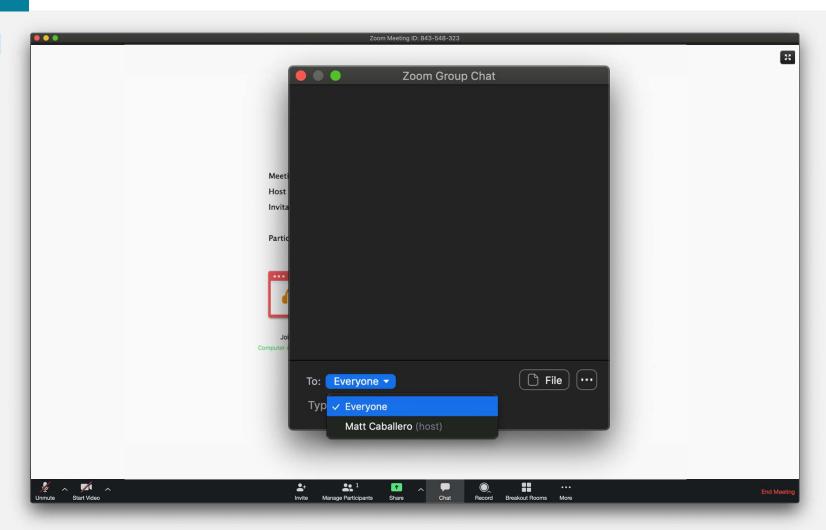
Audio Options in Zoom Meetings – Setting Computer/Phone

zoom



"Raising Hand" and Unmuting – Setting Your Status

zoom



Using the Group Chat – Interacting with "Everyone"

2. Commission Business

Chair



3. MDHHS Update

Trevor Youngquist (MDHHS)



MDHHS Update

Updates from the previous meeting:

- MDHHS continues to develop its data strategy, and it will seek to align with the HIT roadmap
- 2. The Michigan Health Endowment Fund grant work will be done by the CedarBridge Group, under a contract finalized in March. Welcome CedarBridge!

Into the future:

- 1. The HIT Commission will continue to convene virtually.
- 2. How are we doing hosting virtual HIT Commission meetings? Please send feedback to youngquisttl@michigan.gov



4. May Update Overview



A. Health Information Management Systems Society (HIMSS)



B. Jackson Community Medical Record (JCMR)



C. Michigan Health Information Network (MiHIN)



5. Update on HIT Roadmap





Our Next Hour With You....

CedarBridge Group introductions and presentation

- Overview of planning activities for 5-Year Health IT Roadmap
- Roadmap Steering Committee (RSC) engagement recommendations
- Highlights of Draft Roadmap Charter
- Environmental scan/stakeholder engagement methods and timeline
- Association Partner strategy

HITC discussion/feedback

HITC approval of Roadmap approach (with incorporation of feedback)

The CedarBridge Project Team



Carol Robinson CEO



Jamal Furqan Consultant



Pete Robinson Consultant



Branden Pearson Project Manager



Dawn Bonder Managing Director



Terry Bequette Consultant



Sheetal Shah Consultant



Don Ross Project Director



Vatsala Pathy Consultant



Kate Kiefert Consultant

Health IT Roadmap Planning Progress



Health IT Roadmap Planning Activities To-Date



April 2020

- Drafted Project Charter
- Drafted Project Schedule
- Began Drafting Interview Guides
- Began Drafting Stakeholder-Specific Surveys
- Established RSC Meeting Schedule

- Held RSC Meeting
- Drafted May HITC Presentation Slides
- Coordinated with
 Behavioral Health
 Transformation Team
- Began Drafting Stakeholder List

- Held RSC Meeting
- Drafted Environmental Scan Methods and Timeline
- Drafted 1-page Communication Handout
- Continued to Build the Stakeholder List
- Developed Strategies for Interactive Webinars
- Today: Presenting Roadmap Approach; Will Incorporate HITC's Feedback into the Plan

March 2020

Held Kick-off Meeting

Roadmap Steering Committee Recommendations for Engaging Stakeholders



Recommendation #1: Create a 1-page Handout to Inform Stakeholders

Call to Action: Health Information Technology Roadmap

The governor-appointed Michigan Health Information Technology (HIT) Commission, in partnership with the Michigan Department of Health and Human Services (MDHHS), has been awarded a grant from the Michigan Health Endowment Fund¹. In the coming months, the HIT Commission will develop plans to engage stakeholders across the state to inform a Michigan 5-Year HIT Roadmap. The Roadmap will:

- Guide prioritization and governance of the public/private investments made in Michigan's health IT and health information exchange (HIE) infrastructure
- Advance the State's goals, including health improvement and healthcare transformation
- Extend the work of the State's 2006 HIT Roadmap, the Conduit to Care Report
- Set the vision for expanded data services that will provide meaningful insights to inform clinical care, drive population health improvements, and engage individuals in their own health and care with connected social support services.

The Roadmap is expected to be completed by Spring 2021, with a synthesis of stakeholders' views on the "current state" and "desired future state" of HIT and HIE services in Michigan, and actionable recommendations for Michigan policymakers, healthcare and community organizations, state and local government agencies, and information technology service providers. A primary focus of the Roadmap is centered on identifying strategies for better meeting the needs of individual patients, clients, caregivers, and

WE NEED YOUR PARTICIPATION

This project requires cross-cutting stakeholder collaboration to ensure the current capabilities, challenges, and aspirations are captured to inform the desired future state vision.

- Beginning in late June, and continuing through early 2021, the consulting firm <u>CedarBridge Group</u> will be reaching out to stakeholders across the state with invitations to participate in interactive "focus group" webinars, electronic surveys, and individual/small group interviews. The engagement and environmental scan activities will be conducted through remote conferencing technology to protect the health of all participants during the COVID pandemic.
- Your feedback is welcomed, valued, and needed! The HIT Commission is actively working to identify stakeholders to engage for input. If you do not see your organization or sector represented in outreach plans, please inquire or comment at public HIT Commission meetings.

For additional information or resources about the HIT Roadmap update process, please contact:

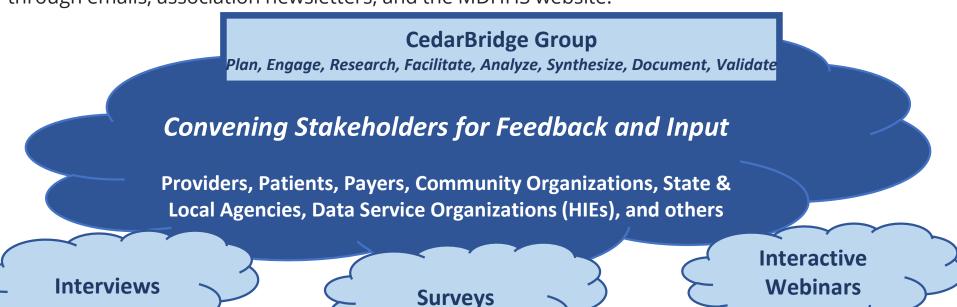
Create a concise 1-page document describing the process to develop the 5-Year Health IT Roadmap

Use as a reference document for engaging stakeholders

Adapt for MDHHS webpage and social media postings

Recommendation #2: Develop Virtual Engagement Strategies

Due to the pandemic, CedarBridge will conduct stakeholder engagement activities virtually, working with associations to engage members in survey and webinar participation; conducting individual and small group interviews with key informants through Zoom, and communicating with stakeholders through emails, association newsletters, and the MDHHS website.



Recommendation #3: Consider Organizational Needs, Levels of Maturity in Using Health IT/HIE, and Varying Ways Stakeholders Will Contribute to the Roadmap

Examples

Consumers/patients, long term care providers, social service organizations, behavioral health providers, rural health clinics

- Identify barriers to adoption and use of health IT and HIE
- Document receptiveness and preferences for clinical usage
- Identify opportunities for engaging patients/clients through digital health technology
- Identify needed policies, communication strategies, and education/training supports

Hospitals and health systems, PCMH/FQHCs, payers, and public health systems

Identify care coordination needs and gaps

Identify health delivery system issues and opportunities

- •Identify ways to increase public health reporting and lower provider burdens for reporting
 - •Identify barriers and solutions to interoperability and data sharing

HIEs, state agencies, health IT professional groups

- Identify solutions to help solve funding/sustainability challenges
- Identify ways to better leverage and govern current and future investments
- Engage in feasibility discussions for desired future state concepts for 5-Year Health IT Roadmap

Recommendation #4: Put a Strong Focus on Gathering Patient Perspectives

FOCUS ON ENGAGING AND INCORPORATING PATIENT/CONSUMER VIEWPOINTS

Partner with community advisory organizations and advocacy groups to engage individuals and gather patient perspectives on how health IT and HIE could:

- Improve care
- Improve experience of care
- Improve health outcomes
- Lower costs of care

Analyze variations of consumer perspectives, based on affiliations with various consumer groups, for example:

Do geographic, racial, ethnic, or other variations in the membership or constituencies represented by groups result in differing levels of understanding, priorities, preferences, etc., health IT / HIE?



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for

Recommendation #5: Conduct a One Question Survey Related to Health IT and HIE During the COVID-19 Pandemic

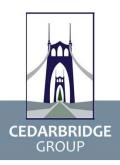
A One question survey presents an early opportunity – a "teaser" – to engage organizations in the development of the Michigan 5-Year Health IT Roadmap

RSC members suggested a question could be focused specifically on how health IT might help address racial disparities in the health outcomes for COVID-19 infections and related conditions

CedarBridge and MDHHS have contemplated this recommendation and would like for the HITC to provide input on how to make this initial stakeholder engagement endeavor most useful

We will come back to this a little later in the meeting....

Roadmap Charter Highlights



Project Goals, as Outlined in Draft Roadmap Charter

- Assess the "current state" of health IT initiatives in Michigan, examining stakeholders' views of HIE/CIE business and technology services, including policies, regulations, sustainability strategies, technical assistance and user education/training needs, communications, and more.
- **Develop vision for the "desired future state" for health IT and HIE/CIE services** to meet the needs of Michigan's Health IT Strategic Plan as was done in the 2006 *Conduit to Care Report* and its 2010 update, identifying policies, governance, operational and technical improvements, opportunities for creating efficiencies across entities, and developing innovative partnerships.
- Align the Roadmap with the Governor's 5-Year Priorities for MDHHS by leveraging health IT strategies to:
 - improve maternal and infant health outcomes
 - integrate and share data on social determinants of health to reduce health disparities and social inequities
 - improve data sharing with local communities to respond to lead exposure risk; and
 - develop robust performance management tools that support the agency's focus on evidence-based decision making.
- Produce strategies to ensure that all providers become connected to a health information exchange and encourage processes that ensure patient health data is readily available for providers at the point of care, pursuant to ONC and the Centers for Medicare and Medicaid Services (CMS) regulations.
- Establish a framework for clear communication, governance and central planning for state agencies and statewide partners for expanding and utilizing HIE/CIEs.
- Lay the groundwork for maximizing local community utilization of, and benefit from, existing investments in the State of Michigan health IT infrastructure and HIE tools such as the MDHHS Master Person Index (MPI), the MiHIN Provider Director (PD), MiHIN attribution service (i.e. the Active Care Relationship Service [ACRS]), and other in-state HIE infrastructure.

A Roadmap is a Guide; Technology Evolves; Engaging Stakeholders is Ongoing

Michigan Health IT Roadmap and Sustainability Plan

Identify and engage providers, payers, state agencies, social service organizations, employers, associations, labs, pharmacies, universities, and advocacy groups across Michigan in planning for and governance of health IT investments

Seek stakeholder feedback on draft recommendations to confirm priorities and value propositions for health IT investments, policies, and governance of shared services across

Collect input from stakeholders across domains through interviews, focus groups, roundtables, and electronic surveys on their current and desired future state for data services and electronic data exchange in Michigan

Synthesize viewpoints on current state and desired future state for health IT investments, policies, and governance of data services and interoperable data exchange in Michigan

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domains in Michigan

High Level Timeline for Roadmap Development Process



September 2021

Final Draft Roadmap for HITC and MDHHS acceptance/approval

- Draft Roadmap with recommendations for HITC consideration
- Present draft Roadmap to HITC
- Conduct feedback process to validate stakeholder support for Roadmap
- Make necessary revisions



- Engage Stakeholders in Environmental Scan
- Review historical documents
- Synthesize input
- Ensure "directional correctness" with guidance from RSC
- Update HITC

Roadmap Engagement Methods and Timelines



Environmental Scan Methods and Timeline

| Stakeholder Sectors | Time Frame | Discovery Modes |
|---|------------------|--------------------------|
| Lt. Governor's Health Equity Initiative | TBD | TBD |
| All Stakeholders: "One Key Question" | Q3 2020 | Electronic Survey |
| Consumers / Clients / Patients | Q3 2020 | 2 Interactive Webinars |
| HIE Management | Q3 2020 | Phone Interviews |
| HIE Management (validate) | Q1 2021 | Phone Interviews |
| HIMSS & Health IT Professional Groups | Q3 2020 | 1-2 Interactive Webinars |
| Behavioral Health Providers with Partner Association(s) | Q3 2020 | Electronic Survey |
| Behavioral Health Providers | Q3 2020 | 2-3 Interactive Webinars |
| LTPAC with Partner Associations (including HCBS groups, AAA's, etc.) | Q3 2020 | Electronic Survey(s) |
| LTPAC Providers | Q3 2020 | Interactive Webinars |
| | | Electronic Survey & |
| Hospitals/ Health Systems through MHA Partnership | Q3-Q4 2020* | 1-2 Interactive Webinars |
| Key Informant Hospitals | Open Invitation* | Phone Interviews |
| | | Electronic Survey & |
| Ambulatory Provider Groups with Partner Associations (MPCA, MCRH, MSMS, MAFP, MDA) | Q3-Q4 2020 | 1-2 Interactive Webinars |
| Key Informant Ambulatory Provider Groups | Q4 2020 | Phone Interviews |
| | | Electronic Survey & |
| EMS with Partner Associations (MAAS, MiEMSPA) | Q3-Q4 2020* | 1-2 Interactive Webinars |
| Key Informant EMS providers | Q4 2020* | Phone Interviews |
| | | Electronic Survey, |
| Social Service Organizations through Michigan Community Action partnership | Q3 2020* | 1-2 Interactive Webinars |
| Key Informant Social Service Organizations | Q4 2020* | Phone Interviews |
| MDHHS Public Health Programs/Systems (IIS, ECR, MDSS, State Lab) | Q3-Q4 2020* | Phone Interviews |
| Local PH officials with Partner Associations (MPHA, MALPH) | Q3-Q4 2020* | Electronic Survey |
| Key Informant Local Public Health Officials | Open Invitation* | Phone Interviews |
| State/Local Agencies (Various Departments of MDHHS, LARA, DTMB, DOE, Office of Great Start, Corrections, Courts etc.) | Q3-Q4 2020 * | Phone Interviews |
| QIOs/CHIRs/ACOs | Q3 2020 | 1-2 Interactive Webinars |
| Key Informant QIOs/CHIRs/ACOs | Q4 2020 | Phone Interviews |
| Key Informant Health Plans | Q3 2020 | Phone Interviews |
| University Programs (Nursing, MD, Pharmacy, Veterinarian) | Q3-Q4 2020 | Phone Interviews |
| Commercial Labs**, Pharmacies, Radiology Groups | Q4 2020 | Phone Interviews |

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KEY:

Consumer-oriented

Technology-Oriented

Provider-oriented

Community-oriented

Government-oriented

Payer-oriented

Other

*Flexibility will be needed due to COVID impacts

Potential Association Partners

Community Mental Health Association of Michigan

Michigan Association of Air Medical Providers

Michigan Association of Ambulance Services

Coordination Committee

Michigan National Emergency Number Association (NENA)

Michigan EMS Practitioners Association (MiEMSPA)

Area Agencies on Aging of Michigan

Health Care Association of Michigan

Michigan Oral Health Coalition

Michigan Association of Health Plans (MAHP)

Michigan Center for Effective IT Adoption (MCEITA)

Michigan Rural Council

Michigan Osteopathic Association

Michigan Council of Nurse Practitioners (MiCNP)

Michigan School Nurse Association

Michigan Association for Local Public Health

Mental Health Association in Michigan (MHAM)

Michigan Association of Fire Chiefs

Michigan Emergency Medical Services

Michigan State Firemen's Association

Michigan Health and Hospital Association

Michigan Commission on Services to the Aging

Michigan HomeCare and Hospice Association

Michigan Dental Association

Michigan Pharmacists Association

Michigan Center for Rural Health

Michigan Public Health Institute (MPHI)

Michigan Community Health Worker Alliance

Michigan Primary Care Association (MPCA)

Michigan Academy of Family Physicians (MAFP)

Michigan Public Health Association (MPHA)

Michigan Sheriff's Association

CEDAREMISHIBATION OF Counties

HITC Discussion: Input and Feedback Needed

CedarBridge believes input is best sought before substantive effort goes into a work product, and feedback is best provided on works-in-progress. This small, but important distinction will be referenced throughout the Roadmap development process.

We need input today on:

One Question Survey

We need feedback today on:

Environmental Scan/ Stakeholder Engagement Approach

Draft Roadmap Charter (document attached to meeting materials)

Association Partner List

We need ongoing feedback on:

Stakeholder List (Also included with meeting materials)

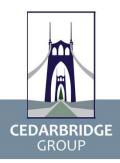
We would like to have HITC approval today on the draft documents and approach, with our commitment to incorporate your feedback prior to launching stakeholder engagement activity in the environmental scan.

Navigating Successful Virtual Meetings with Group Discussions

A few tips to help us be successful:

- We will unmute the lines of Commission members unless there is distracting background noise.
- Please identify yourself when you speak.
- Use the "Raise Hand" button to ensure we know you want to speak, but don't feel like you need to wait to be called upon.
- Feel free to also use the Chat function if that works better for you– we will read those comments out loud.
- Everyone's viewpoints are important and everyone's participation is valuable.
- The work of the Commission is ever more important during this pandemic and virtual meetings can be challenging. Patience, good manners, empathy, a little sprinkling of humor will be appreciated if technical challenges occur, or if a barking dog or the neighborhood ice cream truck is heard during a call.

Discussion



Thank you!

For more information, please contact

Don Ross
(503) 351-6490

donald.ross@cedarbridgegroup.com





6. Public Comment

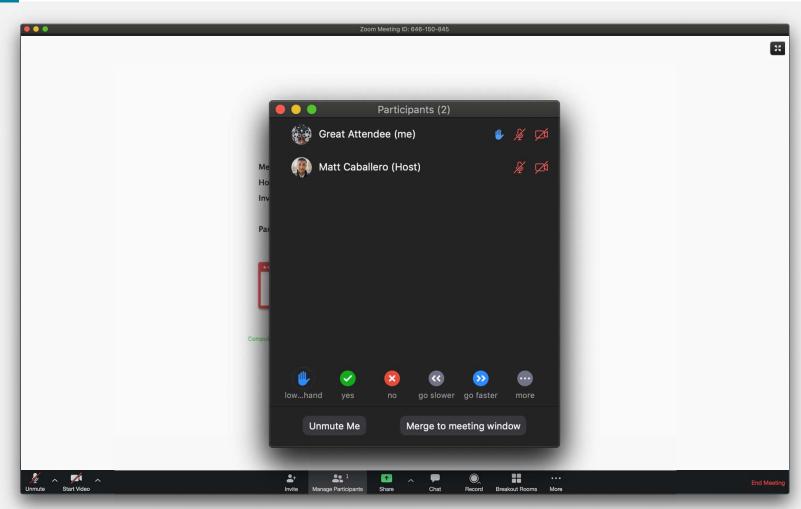


Public Comment Guidelines

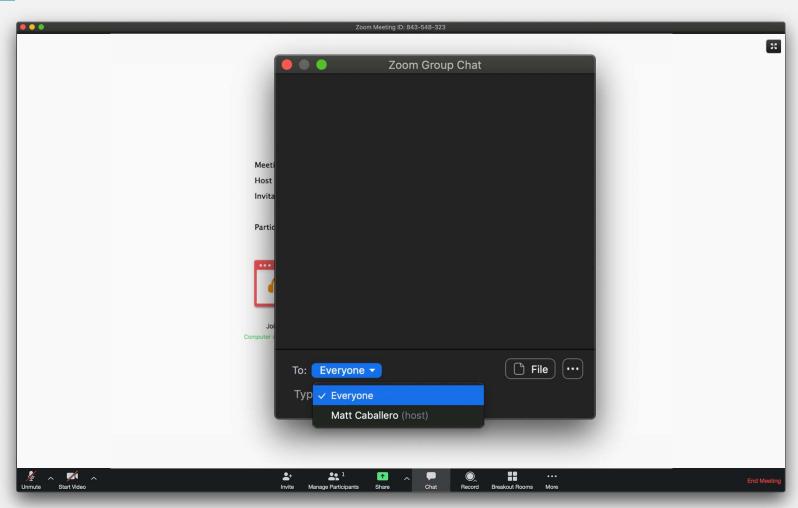
Public comment will be conducted in three ways. Please note, pursuant to the Michigan Open Meetings Act, at no point during public comment are you obligated to disclose your name or organization.

- 1. **Hand raising:** Zoom meeting attendees wanting to verbally share comments will raise "their hand" (directions on next slide). The host will call on each attendee with a hand raised, at which point they will share their comment.
- 2. Group chat: Zoom meeting attendees wanting to share a comment in the meeting group chat (directions on a later slide) will have their comments read aloud by the host at a designated time.
- 3. Open comment: Any remaining attendees unable to participate in the previous methods will be invited to share during a final open comment period





Please <u>"raise your hand"</u> at this time if you would like to comment The host will call on you when it is your turn to speak



Please leave a comment in the *group chat* now The host will read them aloud for the commission to hear

Open Comment Period

Please share a comment at this time if you have not had the opportunity already

If you would like to submit any other comments to be shared with the commission, please send a message to youngquistt1@Michigan.gov



