

Meeting of the RI AHRQ Health IT Project Steering Committee

April 24, 2008 ♦ 7:00am – 9:00am

Robinson C. Trowbridge Center at Kent Hospital ♦ 10 Health Lane ♦ Warwick, RI

MEETING MINUTES

MEETING ATTENDEES (*indicates participation by teleconference)

Steering Committee

- Bryan Barrette, RI Department of Health
- Virginia Burke, RI Health Care Association
- Carole Cotter, Lifespan, Co-Chair
- Gary Croteau, South County Hospital
- Yul Ejnes, MD, RI Medical Society
- Jim Feeney, East Side Clinical Laboratory
- Bill Florio, BCBS of Rhode Island
- Steve Foley, Prov. Community Health Ctrs
- John Landers, RI Dept. of Administration
- Pat Moran, Hospital Association of RI
- Christopher Novak, RI Assoc of Facilities and Services for the Aging
- Paul Oates, United Health Networks
- Cedric Priebe, MD, Care NE, Co-Chair
- John Young, RI Department of Human Svcs

Management Committee

- Laura Adams, Rhode Island Quality Institute
- Rebekah Gardner, Quality Partners of RI
- Deidre Gifford, MD, Quality Partners of RI
- Stephanie Kissam, RI Department of Health
- Stacy Paterno, Clarendon Group
- Laura Ripp, Consultant, Project Staff
- Patrick Vivier, MD, Ph.D., Brown University
- Judy Wright, Rhode Island Quality Institute
- Amy Zimmerman, RI Department of Health

Other Attendees

- Areina Cabezas, RI Department of Health
- Mary Ellen Casey, Quality Partners of RI
- Dave Hemendinger, Lifespan, TSG Chair
- Nina Lennon, Rhode Island Quality Institute
- Beth Perry, EDS
- Ashraf Hannah, EDS
- Reid Coleman, MD, Lifespan
- Trey Reeves*, InterSystems

MEETING PURPOSE

To communicate project updates, review and discuss and consider select HIE deliverables for approval, and discuss the HIE Enrollment plan.

AGENDA

- | | |
|-------------|--|
| 7:00 – 7:05 | 1. Call to Order, Welcome and Introductions
<i>Carole Cotter, Lifespan, Steering Committee Co-Chair</i> |
| 7:05 – 7:10 | 2. Consideration for Approval: 3/27 Meeting Minutes
<i>Carole Cotter, Lifespan, Steering Committee Co-Chair</i> |
| 7:10 – 7:35 | 3. Project Update*
<i>Carole Cotter, Lifespan, Steering Committee Co-Chair</i> |
| 7:35 – 8:00 | 4. POSSIBLE VOTE: Consideration of Recommendations to Approve Policy and Technical Deliverables*
<i>Carole Cotter, Lifespan, Steering Committee Co-Chair</i> |
| 8:00 – 8:30 | 5. Review and Discuss HIE Enrollment Plan*
<i>Cedric Priebe, MD, Care New England, Steering Committee Co-Chair</i> |
| 8:30 – 8:45 | 6. Introduce New Policies*
<i>Cedric Priebe, MD, Care New England, Steering Committee Co-Chair</i> |
| 8:45 - 8:55 | 7. Review Steering Committee Membership*
<i>Cedric Priebe, MD, Care New England, Steering Committee Co-Chair</i> |
| 8:55 - 9:00 | 8. Recap Next Steps and Adjourn
<i>Cedric Priebe, MD, Care New England, Steering Committee Co-Chair</i> |

MEETING SUMMARY

1. Call to Order, Welcome and Introductions

Carole Cotter, Steering Committee Co-Chair, opened the meeting at 7:04 a.m. and welcomed the group.

2. Consideration for Approval: 3/27 Meeting Minutes

Meeting minutes were not available for consideration.

ACTION

Action Item:

Consideration of the March 27, 2008 meeting minutes will be deferred until the May meeting.

3. Project Update

The updates to the Steering Committee included the following topics:

- Status of Policy / EDS Deliverables and Project Schedule
- Recap of April TSG Meetings and Next Steps RE: Participation Solution
- Overview of HISPC Multi-State Consent Collaborative contract
- Update on outcome of focus groups; HIE name, Authorization Form/Brochure
- Status of HIE Legislation and related activities

Major points of discussion:

➤ **Status of Policy / EDS Deliverables and Project Schedule**

Laura Ripp reviewed the project schedule noting that the project remains behind the baseline schedule; however, progress continues on both technical and policy development fronts. The policy deliverable titled Role-Based Permissions for the RI HIE was approved by HEALTH on March 27, 2008. The technical deliverable titled: Data Conversion Requirements (D15) was approved by HEALTH on March 31, 2008. After technical review of critical policies and reconciliation with the functional requirements for the HIE system, the Technical Solutions Group (TSG) fully accepted the EDS Final Functional Requirements Deliverable (D7) on April 23rd. Approval by the TSG of HIE functional requirements is a major milestone in the project.

The next effort in policy development has been focused has on Consumer Enrollment in the HIE and related Authorization documents, Complaints and Grievances, and Response to Breach of the RI HIE.

➤ **Recap of April TSG Meetings and Next Steps RE: Participation Solution**

The TSG conducted two meetings in April which were focused on the technical review of HIE policies and confirmation of HIE functional requirements. The TSG approved the Consumer Enrollment in the HIE Policy with changes, the Temporary Authorization Policy and the Final Functional Requirements Deliverable.

Amy Zimmerman updated the group on progress made regarding EDS/ISC negotiations for the expanded scope of work related to the HIE Participation Solution. After several

iterations of pricing and further reductions in the cost proposal, the State believes the terms for moving forward with the EDS/ISC proposal are workable and a decision has been made to move forward with building the Participation Gateway and Solution. Ms. Zimmerman requested the support of the Steering Committee for this decision. Carole Cotter asked if the funding was available in the current budget to pay for the solution. Amy Zimmerman noted that reserve funds will be made available.

ACTION

Action Item: Staff will provide a budget update at the next meeting.

➤ **Overview of HISPC Multi-State Consent Collaborative contract**

Laura Ripp directed the group to the one-page summary of the Rhode Island State-Level Project for the Health Information Security and Privacy Collaboration (HISPC). This one year contract will explore the consent requirements for interstate health information exchange. Rhode Island is expected to benefit and contribute by including the consent requirements for the RI HIE, as well as requirements under state law, in the 11-state analysis to be performed by the project. The ultimate deliverables include a Consent & Disclosure Analysis Tool and a resulting Reference Guide documenting a sample of interstate authorization requirements. The RI HIT Project Steering Committee will oversee the RI state-level activities on this project.

➤ **Update on outcome of focus groups; HIE name, Authorization Form/Brochure**

Stacy Paterno noted that focus groups narrowed in on a single name and concept boards on the selected name and logo. The HIE Authorization Form will be completely reworked based on very negative focus group feedback. In general, the legal nature of the form and some of the wording and concepts are overwhelming to consumers and it is believed that this will have a significant negative effect on enrollment decisions. Work to revise the Enrollment Form is underway by Clarendon.

➤ **Status of HIE Legislation and related activities**

Nina Lennon updated the group on the status of the RI HIE Act of 2008. She distributed an outreach document that tracked the communication effort around the legislation. Advocacy Solutions and the RIQI Public Affairs Committee are working to incorporate amendments to the legislation and the attention to the bill by the Senate is viewed as a positive sign of their interest. A final version of the legislation should be available in the next few weeks.

Dr. Reid Coleman asked about the nature of the proposed amendments and if there were any other bills that RIQI was tracking. Ms. Lennon noted that there were no substantive changes in the HIE legislation that the Dennigan task force bill is of interest and its progress will be tracked.

4. POSSIBLE VOTE: Consideration of Recommendations to Approve Policy and Technical Deliverables

The following motions were presented for Steering Committee consideration and vote of approval, where applicable.

- a) Accept the policy deliverable titled: **Consumer Enrollment in the RI HIE** with the following changes as identified by the TSG on April 23, 2008:

Modify Enrollment Policy Element #2 to read as follows:

To enroll, a consumer must complete an HIE Enrollment and Authorization Form. This form provides identifying information and a valid signature. The HIE will not activate or revoke a patient enrollment profile until a valid authorized signature is in the possession of the RHIO. (continue as written . . .)

DISCUSSION: Dr. Reid Coleman asked if the policy changes need to be reviewed by the Policy & Legal Committee. A. Zimmerman noted that the changes are not in contradiction with the policy intent and, in fact, strengthens the risk management position of the policy.

Dr. Priebe noted a potential challenge with Policy Element #5 relative to agents of the HIE that may perform enrollment activities through “various enrollment channels”. L. Ripp noted that a related functional requirement has been added by the TSG to enable a “pending” function to allow the HIE to enable consent flags in the system upon receipt of signed enrollment forms. The group agreed to move forward with the proposed change to the policy language as written in the motion.

ACTION

DECISION: The Steering Committee moved to second the motion and conducted a vote that resulted in all members of the voting quorum voting in favor with one abstention. The Enrollment Policy was approved as written with changes as specified by the TSG.

- b) Accept the Technical Solution Group (TSG) recommendation for approval of **EDS Deliverable D7: Final Functional Requirements** (with the additions as identified by the TSG and EDS on April 23, 2008).

DISCUSSION: Dr. Reid Coleman initiated a discussion about the cost burden for the Data Submitting Partners (DSPs) that may be inherent in acceptance of the functional requirements. L. Ripp noted that specific performance parameters for any DSP and HEALTH (or the designated RHIO) will be described in Data Sharing Agreements to be executed between HEALTH/RHIO and a DSP prior to any live data exchange; this contract will provide an opportunity for DSPs to assess the specific cost burden to their organization prior to participation.

ACTION

DECISION: The Steering Committee moved to second the motion and conducted a vote that resulted in all members of the voting quorum voting in favor. The Final Functional Requirements document was approved as written with changes as specified by the TSG.

POST MEETING NOTE: It should be noted that Steve Foley and Jim Feeney were contacted after the meeting to collect their votes on both decisions as described above. These votes are reflected in the final tally as recorded above.

- c) The TSG has completed technical review of the RI HIE consent management solution proposed by EDS/ISC and agrees that:

“The current Participation Service and Participation Gateway proposal by EDS / InterSystems will meet the functional requirements of the participation service necessary to fulfill the consent requirements of the RI HIE. Considerations regarding contract and support costs are outside the scope of TSG responsibilities.”

DISCUSSION: Carole Cotter emphasized the limits to the scope of the TSG's review and the essential reliance on HEALTH to make contractual decisions regarding acceptance of the EDS/ISC proposal. Ms. Cotter noted that while there are assurances of short term funding to accomplish project goals, the ongoing cost and sustainability issues must be resolved in the future. A. Zimmerman asked for the group's support in moving forward with the EDS/ISC contract modification to implement the participation (authorization/consent) solution.

ACTION

DECISION: The group was comfortable relying on the technical assessment of the TSG and agreed to support HEALTH's decision to move forward with the EDS/ISC contract modification.

5. Review and Discuss HIE Enrollment Plan

Dr. Priebe asked Amy Zimmerman to review the document titled HIE Enrollment Goals, Criteria and Plan Development. Ms. Zimmerman provided an overview of the purpose of enrolling both patients and providers in the HIE and she reviewed the specific goals and criteria set forth in the summary document. She reviewed the tactical approach to enrollment including pre-enrollment of patients through various channels beginning in summer 2008. This will be followed by DSP participation to provide data in winter 2008 and end users (healthcare providers) going live in February 2009. This allows some lag time to populate the system prior to its use. She emphasized the importance of aligning enrollment, DSP and user strategies.

DISCUSSION: Dr. Coleman voiced his support for the aggressive goals, especially as they relate to targeting initial enrollment of Medicaid beneficiaries; however, he cautioned against setting goals that may be unachievable if reliant on the health service utilization patterns of Medicaid patients. Stephanie Kissam noted that the plan includes inquiries into Medicaid beneficiary enrollment options as well as a data collection component that will serve to help inform and align patient enrollment and pilot roll-out strategies. Dr. Priebe confirmed the intent for the Steering Committee to approve the Enrollment Criteria.

ACTION

Action Item: A vote on the enrollment criteria was deferred due to a lack of quorum of voting members who have had an opportunity to consider the Enrollment Plan document. The document will be discussed again at the May Steering Committee meeting.

6. Introduce New Policies

- **Temporary Authorization Policy.** Dr. Priebe introduced the Temporary Authorization Policy and reviewed all the policy elements. It was noted that policy comes before the group after vetting the elements with all other committees and that some of this review was performed by email exchange. As such, it was believed that the PLC may not have had an opportunity for full discussion of the policy in its final form and that additional time should be allowed for comment.

ACTION

DECISION: While it was agreed that the Temporary Authorization policy elements and intent have been accepted by all committees, a vote by the Steering Committee will be considered after formal confirmation of the policy by the PLC and internal legal review has been completed. The policy is slated to come before the Steering Committee for vote during the May meeting.

- **Complaints and Grievances Policy and Procedures.** Dr. Priebe introduced the Complaints and Grievances Policy and reviewed all the policy elements. A. Zimmerman noted the Professional Advisory Panel's (PAP) advise that the policy balance the reasonable approach for providers to address complaints directly and the role of the RHIO in managing complaints to full resolution. Dr. Deidre Gifford asked for clarity on the role of the provider in advising the patient to take the complaint to the RHIO versus the provider being responsible for sending the Patient Complaint Form to the RHIO. There was much discussion on the intent of this provision with the understanding that the policy currently supports the preference of provider practices to take initial action to clarify and resolve complaints.

ACTION

Action Item: The policy and procedures will be reviewed and refined again by staff and legal counsel in light of the feedback. The next iteration of the policy will be presented to the group for vote at the May Steering Committee meeting.

7. Review Steering Committee Membership

Dr. Priebe introduced the topic and recalled the RIQI Committee Membership policy requirement for an annual 65% attendance rate by voting Steering Committee members. Dr. Priebe referred the group to a chart analyzing stakeholder representation. Based on the attendance analysis, the Steering Committee Co-Chairs personally notified members with low attendance to determine their desire and ability to continue participation. This process resulted in three resignations from the Steering Committee: Janet Marcantonio, Maria Montanaro, and Dr. Fadya Al Rayess.

Dr. Priebe noted the intent to identify new Steering Committee members, especially persons with stakeholder perspectives that may be underrepresented. He asked the committee to forward any nominations to the Co-Chairs.

ACTION

Action Item: Staff will send out a notice to the current Steering Committee to request new member nominations and to emphasize the importance of regular meeting attendance, especially in light of the need for a voting quorum as the level of decision-making will be high into the foreseeable future.

8. Recap Next Steps and Adjourn

Dr. Priebe summarized possible agenda items for the next meeting including continued review and possible vote on the HIE Enrollment Plan, Temporary Authorization Policy, and Complaints and Grievances Policy and Procedures. The meeting was adjourned at 9:00 a.m.