



Data Element Mapping Subcommittee

Meeting Minutes:

SUBJECT:	HIT Workgroup May Minutes	DATE:	May 19, 2016
ATTENDEES:	Scott Carrell, Michael Farley, Sheila Pugatch, Cale Coyle, Linda Rowe, Rick Turner, MD, Janica Hardin, Denette Dresback, Scott Smith, MD, Chanda Sundara	LOCATION:	450 W State Street, 7 th Floor, Room 7A, Boise
Teleconference:	Ashish Virmani, Amy Osborne, Kevin Martin, Ann Watkins, James Corbett, Ashutosh Tripathi, Michael Gaul		
Members Absent:	Tina Voves, Lance Hatfield, Kathy Turner, Cathy Libby, Tom Rosenthal, Michael Ide, Paul Castronova, Peggy Evans, PhD, Richard Rainey, MD, Gregg Shibata, Jim Johnston, Marc Chasin, MD, Brad Ericson, Andrew Baron, MD, Tim Gordon		
IDHW Staff	Cynthia York, Burke Jensen, Alexa Wilson		
Office of the Attorney General:	N/A		
Guests:	Diane Kelly, SeAnne Safaii- Waite, MD, Janet Reis, Kaylee Leavitt		
STATUS:	Draft 6/13/2016		

Summary of Motions/Decisions:

Motion:

Dr. Rick Turner moved to accept the minutes of the February 18, 2016, March 17, 2016, and April 21, 2016 Health Information Technology (HIT) Workgroup as prepared.

Michael Farley seconded the motion.

Outcome:

Motion carried.

Agenda Topics:

Minutes of the February 18, 2016, March 17, 2016, and April 21, 2016 HIT Workgroup meetings were accepted as prepared.

Agenda Topics

Welcome, Roll Call, Agenda Review, Approval of Meeting Minutes – *Janica Hardin, HIT Workgroup Co-Chair*

- Janica Hardin welcomed the group and announced that Chanda Sundara will be taking the place of Zach Hodges as a member of the HIT Workgroup representing Qualis Health. Additionally, Ashutosh Tripathi will be taking the place of Peter Sorensen and Tom Barrieau representing Blue Cross of Idaho.
- Ms. Hardin welcomed a few guests to the meeting including the SHIP state evaluation team from the University of Idaho and Boise State University.
- Ms. Hardin provided an update of the content presented during the April HIT Workgroup meeting. Some highlights included the creation of a use cases subcommittee, defining attribution methodology, Idaho Health Data Exchange (IHDE) legal/agreements review, defining a metric life cycle, and defining data needs.

Review of Draft HIT Flow Diagrams – *Janica Hardin, HIT Workgroup Co-Chair*

Clinical Quality Measures Lifecycle -

- Ms. Hardin presented the Clinical Quality Measure (CQM) Life Cycle document.
- This document's purpose is to define the process for each Clinical Quality Measure as it is introduced.
- There was extensive discussion regarding potential changes to the document.
- It was suggested that changing the layout of the life cycle to a circular form rather than a list form would allow for better understanding by the intended audience.
- Other suggestions included altering the language to ensure clarification by clinics and stakeholders.
- It was determined that of the three flow diagrams presented, this one is most appropriately suited for public distribution.

Connections Workflow -

- Ms. Hardin presented the Clinical Quality Measure Connections Workflow document.
- The purpose of this diagram is to show the process of activities from SHIP Operations, IHDE, HealthTech Solutions, and each clinic for establishing a clinic EMR connection to IHDE for clinical quality reporting.
- Some of the discussions included potentially using a Gantt chart to convey time, color coding to designate the responsible party for the task, clarifying terms on the chart, defining baseline data, and connecting this Workflow document so that it aligns with the corresponding steps in the CQM Life Cycle document.
- While this flow chart is helpful for SHIP Operations and the HIT Workgroup in understanding its story, members suggested that it would be too complex for public sharing.

Health Data Flow -

- Ms. Hardin presented the SHIP Patient Data Flow Chart.
- This diagram provides a depiction of the sources of PHI data, the process flow of patient data, and what level of data various users of the HealthTech Solutions dashboard and the IHDE clinical portal will be able to access.
- There was extensive discussion among the group surrounding this flow chart. Several important points that were discussed include:
 - While the SHIP project initially envisioned for the data analytics dashboard to provide clinic users a patient level drill-down using data supplied solely by his or her own clinic, the workgroup suggested that the patient level view should provide all information tied to that patient for that measure, regardless of which clinic organization supplied the data (clinic view vs. holistic view of the patient measure data).
 - IHDE will examine its privacy policy and this recommendation with its legal counsel to ensure there are no legal barriers to this holistic view of data sharing for the data analytics.
 - The Workgroup also advocated for the development of an attribution methodology to attribute (or assign) a each patient to one clinic.

- Workgroup members suggested starting first with the preferred attribution methodology that HealthTech has implemented or used in the past. Members also suggested looking at the CMS attribution methodology.
- The Ship Operations team will follow up with HealthTech and IHDE on patient attribution.

HIT Updates

Data Element Mapping Subcommittee Update – Burke Jensen, SHIP Operations

- This was a planned agenda item that was not discussed during the meeting due to time constraints.

Use Cases Subcommittee Update – Janica Hardin, HIT Workgroup Co-Chair

- This was a planned agenda item that was not discussed during the meeting due to time constraints.

Development of Use Cases for HealthTech Analytics Reports – Janica Hardin, HIT Workgroup Co-Chair

- This was a planned agenda item that was not discussed during the meeting due to time constraints.

Wrap Up – Janica Hardin, HIT Workgroup Co-Chair

- Ms. Hardin thanked the group for attending and called the meeting to a close.

Timeline and Next Steps –

There being no further business Janica Hardin adjourned the meeting at **5:03pm**