



Health Information Technology

Meeting Minutes:

SUBJECT:	HIT Workgroup June Minutes	DATE:	June 16, 2016
ATTENDEES:	Michael Farley, Michael Gaul	LOCATION:	No Physical Meeting Location – Conference Call and Screen Cast Only
Teleconference:	Shelly Bewick, Scott Carrell, Cale Coyle, Marty Glen, Janica Hardin, Michael Ide, Kevin Martin, Amy Osborne, Linda Rowe, Dr. Scott Smith, Chanda Sundara, Ashish Virmani, Elizabeth Wimble		
Members Absent:	Paul Castronova, Dr. Marc Chasin, Denette Dresback, Brad Ericson, Dr. Peggy Evans, Tim Gordon, Lance Hatfield, Jim Johnston, Cathy Libby, Sheila Pugatch, Dr. Richard Rainey, Tom Rosenthal, Gregg Shibata, Ashutosh Tripathi, Kathy Turner, Dr. Rick Turner, Tina Voves		
IDHW Staff	Burke Jensen, Casey Moyer, Alexa Wilson, Ann Watkins		
Office of the Attorney General:	N/A		
STATUS:	Final 7/21/2016		

Summary of Motions/Decisions:

Quorum was not established, all motions were deferred until next meeting

Agenda Topics:

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

- Janica Hardin welcomed members and completed the roll.
- Burke Jensen noted that due to the lack of quorum, the approval of May's meeting minutes would be deferred to the July meeting.
- Ms. Hardin gave an overview of the agenda and no additional items were added.

Workgroup Membership Review – Janica Hardin, HIT Workgroup Co-Chair

- Ms. Hardin presented the SHIP Health IT Scope document.
 - This document includes information on the two SHIP goals related to IT, as well as the role that the IHC plays in the collection and analysis of selected quality measures. Also included in the document is the number of IHDE connections and clinical quality measures (CQMs) reported broken down by grant year, as well as a proposed timeline for reporting the CQMs. It was noted that this timeline still needs to be approved by CMMI.
 - Additionally, the Health IT scope document shows the projected CQM list for grant years 1-3. Year 1 measures have been chosen and finalized, while the measures for years 2 and 3 need to be reviewed and refined before they are confirmed.
 - One of the purposes of this document is to help workgroup members determine whether the workgroup members are the best fit for the workgroup or if there are others that should be participating. The membership list for the HIT Workgroup will be sent out via email for feedback regarding potential changes to add members or remove members.
- Ms. Hardin presented the Anticipated Health IT Timeline document which depicts the work surrounding Year 1 measures and the anticipated timing for the work to be completed.
 - Timeline items include:
 - The HIT Workgroup and CQM Workgroup will coordinate through this grant year to determine the measures for Year 2.
 - The initial meeting of the Uses Cases Subcommittee – July 2016
 - IHDE Connection Sprints – the first one will be July – September and the second one will be October - December.
 - The release of the first CQM reports – expected in November and December.
 - Baselines will be established following the release of the CQM Reports.

HIT UPDATES

- **Follow-Up Items from May HIT Workgroup Meeting – Janica Hardin, HIT Workgroup Co-Chair**
 - One of the visuals presented at the last meeting was the Clinical Quality Measure (CQM) Life Cycle. Edits were made to the document and presented to members.
 - This visual shows the different steps involved in producing a CQM and using it in quality improvement trend analysis.
 - Additionally, it depicts the iterative process that could be repeated for the same CQM as well as for each new CQM that is introduced.
 - Ms. Hardin discussed the SHIP Connections Workflow presented at the last workgroup meeting.
 - After taking into consideration all of the suggested edits and due to the complexity of this document, it has been decided that it will be kept as an internal reference for use by the HIT Workgroup only and therefore will not be publicly displayed. It hasn't been updated and will only be updated if needed for internal reference.
 - Ms. Hardin discussed the Patient Data Flow Chart presented at the last meeting.
 - This document will be updated once the patient attribution methodology has been finalized. It will be presented in the future upon completion.
- **Data Element Mapping Subcommittee Update – Burke Jensen, SHIP Operations**
 - Mr. Jensen provided an update on the work being done by the Data Element Mapping Subcommittee. He mentioned that Chanda Sundara, co-chair of the subcommittee, as well as himself, facilitated a discussion in the last Behavioral Health Integration (BHI) Workgroup in regards to the “adherence to antipsychotic medications for individuals with psychotic diagnosis” measure.
 - While this may be a worthy measure, the data collection methodology relies on prescription data and oftentimes the individuals with the psychotic diagnosis may not actually be taking the prescription that they fill at the pharmacy.
 - The possibility of revising or changing this measure all together was discussed due to the issues surrounding data collection of the antipsychotic medication measure.

- Additionally, Mr. Jensen and Ms. Sundara presented 9 CMS/PQRS measures related to the Behavioral Health field. There were extensive discussions on these measures, and it was decided to defer the topic to the next BHI Workgroup meeting.
- Screening for clinical depression, suicide risk assessment, and follow up after hospitalization for mental illness were the three measures that the BHI workgroup felt were the most actionable and the most beneficial to patients to report on.
- A final update from the Data Element Mapping Subcommittee was the scheduling of the next Clinical Quality Measures Workgroup.
 - Topics of discussion at the CQM meeting will include:
 - Recommended alignment of the childhood immunization, screening for clinical depression, and non-malignant opioid use measures with national CMS measures.
 - Discussing the CQM Workgroup's vision and intent for the remaining Year 2 & 3 measures. Are they the right measures for Idaho? Are there other measures that make more sense?
 - This meeting will take place at the end of June.
- **Timeline Updates** – *Burke Jensen, SHIP Operations*
 - Mr. Jensen noted that Ms. Hardin covered the HIT timeline earlier in the meeting. He reiterated two important points for workgroup members.
 - The clinics that are ready for connection with IHDE will be put into two main sprints. The first sprint is projected to begin at the end of June and will finish in September. The second sprint will begin in October and will finish in December.
 - The first set of CQM reports are projected to be released at the end of December/beginning of January. Once it has been determined that the report is an accurate reflection of the events taking place in the clinics, that will become the clinic's baseline report that can be tracked for quality improvement.
- **IHDE Readiness Assessment Update** – *Burke Jensen, SHIP Operations*
 - Mr. Jensen displayed a pie chart depicting the results of the readiness assessments with each of the 55 Cohort 1 clinics.
 - 35 of the 55 clinics are ready to establish a connection with IHDE.
 - 1 of the 35 has an EMR product barrier that has been elevated to the Office of the National Coordinator for Health Information Technology.
 - 12 clinic locations are currently undergoing a change in their EMR. Due to this change, connections with these clinics have been put on hold.
 - 3 clinic locations have a Behavioral Health filtering challenge from their EMR. This may be an education issue of what can and cannot be shared under HIPAA policy. There will be follow-up conversations with that clinic and its EMR.
 - The final 4 clinics locations have either not yet completed a readiness assessment, or there are concerns tied to privacy and policies with IHDE. These concerns and issues are being worked through as well.
- **Use Cases Subcommittee Update** – *Janica Hardin, HIT Workgroup Co-Chair*
 - Ms. Hardin updated the workgroup members on the work of the Use Cases Subcommittee.
 - The committee meetings are scheduled for July 11th and 12th. The main topics of discussion during these meetings will be defining the user roles and how they expect to leverage the data analytics solution.

Wrap Up – *Janica Hardin, HIT Workgroup Co-Chair*

- Ms. Hardin thanked the members for their time, and reiterated that the membership list will be sent out via email for feedback.
- Mr. Jensen also mentioned that SHIP will also be reaching out to the 55 clinics and their IT staff to see if they have interest in participation with the HIT Workgroup.

There being no further business Janica Hardin adjourned the meeting at **4:10pm**