

# Office of eHealth Innovation

## Standard Operating Procedures

February 26, 2016

Standard Operating Procedures for the Office of eHealth Innovation (OeHI)

DOCUMENT INFORMATION

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STANDARD OPERATING PROCEDURES APPROVAL

Approvals

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## 1. Document Purpose

The purpose of this document is to define the standard operating procedures (SOPs) related to the Office of eHealth Innovation. These SOPs will address specific areas of focus such as the eHealth Commission and work groups, Procurement and Communications. If additional areas of focus are required, they will be added to this document as necessary.

## 2. eHealth Commission and Work Groups

The eHealth Commission for the Colorado State Office of eHealth Innovation is authorized under the Governor’s Executive Order B 2015-008. The Standard Operating Procedures in this section apply to the commission and work groups of the commission. These Operating Procedures may be amended at any time in accordance with the decision-making procedures outlined in this document.

### 2.1 Activity Cycle of the Commission

The commission will, in general, follow a monthly cycle of activities that coincide with its monthly meeting schedule.

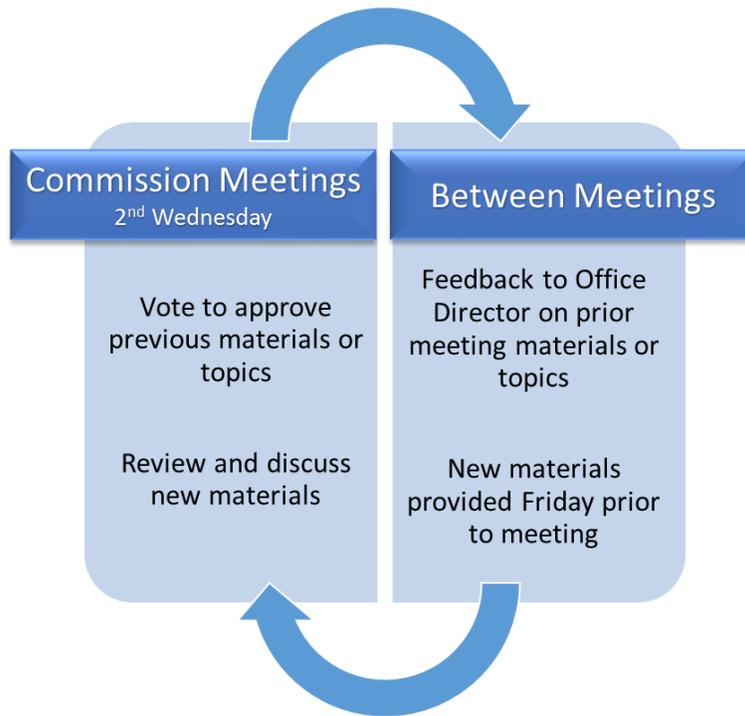


Figure 1. Monthly Activity Cycle

## 2.2 Elections Process

Officers of the commission shall consist of a Chair and Vice Chair or Co-Chairs selected from members of the commission.

### 2.2.1 Nomination Process and Eligibility to Stand for Chair or Vice Chair

Nominations may be submitted by any member of the commission. Nominations must be sent to the Director of the Office of eHealth Innovation and received at least one week in advance of elections. Candidates are eligible for election when they have been nominated by a commission member and they have confirmed to the Director that they accept the nomination.

### 2.2.2 Election of Chair and Vice Chair

Officers of the commission shall be selected by consensus or by a majority vote as defined in section 2.3.3 if consensus cannot be reached. The officers shall serve for a one-year term of office beginning on the date they are elected.

### 2.2.3 Duties of the Chair and Vice Chair

The chair or co-chairs shall preside over the meetings, including coordination of meeting agendas with the State's designated staff. The chair, or consensus of the commission, may create standing or temporary workgroups to examine, investigate, and inquire into subjects of interest to the commission. The chair retains full rights and responsibilities to participate in deliberations and votes of the commission. The vice chair shall, in the absence of the chair, perform all duties of the chair at the meeting. In the absence of the chair and vice chair, members present may select a temporary chair to preside at the meeting.

## 2.3 Meetings

### 2.3.1 Scheduling

Regular meetings of the commission will be held on a monthly basis, on the second Wednesday of each month. Special meetings may be called by the chair or by vote of the commission with at least one month prior notice. Meetings will be held in person at the Colorado Department of Healthcare Policy and Financing, unless otherwise designated, and will include an option for teleconference.

### 2.3.2 Agenda

An agenda shall be provided at least 3 days in advance of all commission meetings and will generally follow the outline below:

- a. Call to Order
- b. Attendance / Roll Call
- c. Approval of Meeting Minutes
- d. Old Business
- e. New Business
- f. Time for Public Comment
- g. Adjourn

### 2.3.3 Voting

- a. 80% of the appointed commission members must be present at the meeting in person or by teleconference to represent a quorum before the commission can vote on an issue within its authority.
- b. The commission will strive for consensus, but will adopt a decision-making process that requires a resolution or other formal action to be passed by at least 80% of appointed commission members, excluding vacancies, with a quorum being present at time of vote.
- c. In the event of an absence, an absentee vote may be submitted to the chair in advance of the meeting.
- d. In the event of a conflict of interest, a member may abstain his or her vote. In such case, the required approval is 80% of the appointed commission excluding abstaining voters.
- e. Member voting may be conducted via open ballot, voice voting, or show of hands.

### 2.3.4 Meeting Procedures

- a. The meetings of the eHealth Commission and its work groups will be open to the public and comply with the provision of Colorado's Open Meetings laws.
- b. Meetings shall be conducted generally in keeping with Robert's Rules of Order, but shall be as informal as circumstances permit.
- c. The chair or vice-chair shall preside over the meetings.
- d. The agenda or order of business may be changed by the chair or by a majority vote of the commission members present.
- e. All meetings of the commission shall be retained in appropriate minutes, which shall be considered unofficial until approved by the commission at the following meeting.
- f. The minutes and all meeting materials shall be retained on the Office of eHealth Innovation website as the complete and accurate record of the meeting proceedings.

### 2.3.5 Code of Conduct

- a. All members should adhere to the behavioral guidelines identified in the Member Agreement.
- b. If a member is believed to have violated the Member Agreement, the chair should be notified, or the Director of the Office, to determine the appropriate course of action.
- c. No individual member shall make a statement of policy outside commission or work group meetings that purports to be that of the commission unless the commission has approved a member to do so.
- d. No member shall be prohibited from stating his or her personal opinions during commission meetings, provided they are clearly identified as such.
- e. Where possible, members are advised to expressly state their opinions as representative of their organizations, or that of their professional subject matter expertise.
- f. All outside requests (e.g. media) for information or comments shall be directed to the Director of the Office of eHealth Innovation.

### 2.3.6 Work Groups

- a. Work groups may be established only by vote of the commission.
- b. Work group members shall be appointed by the chair.
- c. Work groups established:
  - i. Shall act in an advisory capacity to the commission.
  - ii. Shall elect a chair by majority vote.
  - iii. Shall fix times and places of meetings.
  - iv. Shall follow the guidelines outlined in these Operating Procedures.

## 2.4 Commission and Work Group Effectiveness

The relationship that team members have with each other can influence the success of teams. Research shows that improving team member interactions can increase the chance for business strategies to succeed.

### 2.4.1 Member Agreement

The eHealth Commission and work group members shall adhere to the Member Agreement outlined below and agreed upon in the Organizational Charter.

## Member Agreement



*As a direct or indirect member of the Office of eHealth Innovation, I am committed to interacting in the following manner:*

1. Considering the opinion of others, along with my own.
2. Working with colleagues in a collaborative manner.
3. Relating to others with an open mind by assuming good intent.
4. Consensus-building; making decisions with others.
5. Jointly responsible for completing tasks.
6. Reacting calmly when in disagreement.
7. Engaging respectfully to resolve conflict.
8. Engaging in creative problem solving; assuming that there is more than one “right” way of moving forward.
9. Co-creating solutions.
10. Completing the onboarding package, using innovation techniques, and upholding the ways of working.

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Figure 2. Member Agreement, Office of eHealth Innovation Organizational Charter

2.4.2 Member Behaviors

The following table is intended to serve as a sample of behavioral characteristics that will enable the success of decision-making processes required for the Commission and Work Groups. Advisable behaviors have been outlined in green.

<b>Team Member Behaviors</b>				
<b>Team Member Activities</b>	<b>Passive Behaviors</b>	<b>Dominant Behaviors</b>	<b>Independent Behaviors</b>	<b>Interdependent Behaviors</b>
<b>Decision Making</b>				
Participation	Defers to others	Makes decisions for others	Makes decisions without others	Makes decisions with others
Opinion	Keeps opinions to self	Disregards others' opinions	Considers only own opinion	Considers own & others' opinions
<b>Completing Tasks</b>				
Responsibility	Uses less effort	Takes on more tasks than needs to	Personally responsible	Jointly responsible
Work Style	Follows others' lead	Leads whenever possible	Works alone	Collaborates
<b>Resolving Problems</b>				
Reaction	Ignores or downplays	Overreacts	Identifies own contribution	Reacts calmly and nonjudgmentally
Ownership	Defers action to others	Solves problems for others	Solves own part	Supportive of others
<b>Conflict Resolution</b>				
Approach	Avoids conflict	Creates conflict	Confronts conflict	Resolves conflict fairly
Expectations	Expects to lose	Expects to win regardless of cost to others	Expects to win	Expects everyone to win
<b>Relating to Others</b>				
Attitude	Puts self down	Arrogant	Closed-minded	Open-minded
Respect	Allows disrespectful behavior	Disrespectful of others	Insists on respect	Confronts those disrespectful of others

Figure 3. Team Member behavior patterns, from *Improving Organizational, Team, and Personal Effectiveness*, The North Highland Company, 2016.

### 3. Communications Plan

The following section will define, in detail, the communications and stakeholder plan and approach for the Office of eHealth Innovation.

[placeholder]

## 4. Procurement Process

The following section will outline the procurement process that must be followed for the Office of eHealth Innovation.

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# Appendix

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## Appendix A: 2016 Inaugural eHealth Commission Appointees

<p><b>For terms expiring February 1, 2017</b></p> <ul style="list-style-type: none"> <li>• Alexis Sgouros of Greenwood Village, to serve as a consumer engaged in health care</li> <li>• James Reed Holder of Englewood, to serve as a representative of health insurance providers</li> <li>• William Frank Stevens of Littleton, to serve as the designee of the Governor’s Office of Information Technology</li> <li>• Christopher Stewart Wells of Denver, to serve as the designee of the Department of Public Health and Environment</li> <li>• Herb Wilson of Westminster, to serve as the designee of the Department of Human Services</li> </ul>
<p><b>For terms expiring February 1, 2018</b></p> <ul style="list-style-type: none"> <li>• Gregory Charles Reicks of Grand Junction, to serve as a representative of primary health care providers</li> <li>• Dana Eugene Moore of Greenwood Village, to serve as a representative of health care facilities</li> <li>• Marc Lassaux of Clifton of Clifton, to serve as a representative of non-profit, health IT related community organizations</li> <li>• Kendall Paul Alexander of Greeley, to serve as a representative of behavioral health</li> <li>• Morgan Gray Honea of Colorado Springs, to serve as a member with expertise in operability and data exchange</li> </ul>
<p><b>For terms expiring February 1, 2019</b></p> <ul style="list-style-type: none"> <li>• Jason Greer of Boulder, to serve as a member with expertise in health care quality measures, appointed;</li> <li>• Mary Anne Leach of Castle Rock, to serve as a member with expertise in digital health, appointed;</li> <li>• Michelle Mills of Parker, to serve as a representative of primary health care providers, appointed;</li> <li>• Chris Underwood of Evergreen, to serve as the designee of the Department of Health Care Policy and Finance, appointed.</li> </ul>