OeHI
Office of eHealth Innovation
eHealth Commission

Meeting Minutes

February 12, 2020 | 12:00pm to 2:00pm | 303 E 17th Ave. Rm 11ABC

Type of Meeting	Monthly eHealth Commission Meeting
Facilitator	Jason Greer
Note Taker	Kristi LaBarge, Adam Wolf
Timekeeper	Jason Greer
Commission Attendees	Perry May; Dana Moore; David Mok-Lamme; Wes Williams (by proxy); Chris Underwood; Michele Leuck; Jason Greer; Carrie Paykoc; Chris Wells; Art Davidson; Michelle Mills (by proxy); Alex Pettit; Ann Boyer; Rachel Dixon; Morgan Honea

Minutes

Call to Order

- Reviewed agenda.

Approval of Minutes

- January minutes approved

OeHI Announcements
Carrie Paykoc, Director, Office of eHealth Innovation, eHealth Commission Members

- Introduction of new eHealth Commissioners
    - o Alex Pettit, Chief Technology Officer, Governor's Office of Information Technology
    - o Perry May, Deputy Executive Director of Health Facilities, Colorado Department of Human Services
    - o David Mok-Lamme, Senior Community Research Analyst, Rocky Mountain Health Plans
    - o Ann Boyer has agreed to stay on the commission until we find a consumer voice replacement – thank you Ann!
- OeHI posted for an executive administrative assistant position, and has received 62 applications so far. We will be reaching out to candidates soon to fill this much-needed role
- Projects and funding
    - o Year 3 of capital budget has been approved by the Joint Technology Committee
- March eHealth Commission meeting will be hosted remotely due to high attendance at the HIMSS conference in Orlando. The March meeting will also be the first using Zoom as the audio/visual vendor.
- Project status/Capital IT Budget
    - o Has been updated based on feedback from Commissioners around budget numbers that didn't seem to line up. Presenting these numbers is challenging because some money rolls over for a number of years (capital IT) and some must be spent in the year it's allocated (operations). Another challenge is separating out what's been spent, vs. what's been allocated to be spent in

contracts. To confuse matters further, we are continually updating our funding requests, so there's a difference between what we have allocated today vs. what we expect to be allocated to various projects in future years.

o Overall, OeHI estimates we are 85% on track from a project progress and budget perspective, but we do need some approval of funding to get us to 100%

New Business

National and State Priorities-Roadmap Steering Discussion Cont.
Chris Wells, Colorado Department of Public Health and Environment
Carrie Paykoc, Director, Office of eHealth Innovation
Perry May, Deputy Executive Director of Health Facilities, CDHS

Presentation from Colorado Department of Public Health and Environment (CDPHE)

- Wildly Important Goals (WIGS).
    o Reduce ozone from 83 parts per billion to 80 ppb by June 30, 2020.
    o Decrease the obesity rate from 22.9 to 22.6% by June 30, 2020.
        ▪ There has been a huge uptrend in calories in the food supply coinciding with the adult obesity rate over the past many years.
    o Decrease the rate of children that participate in WIC and have obesity from 7.5% to 7.25%.
    o Reverse the trend of decreasing vaccinations in kindergarteners.
    o Reduce the suicide rate. Looking into links between drugs and other efforts.
        ▪ The largest group that is vulnerable to suicide is middle age men.
        ▪ Majority of the current funding around suicide prevention focuses on teens, not adults, so we have to find a way to reach these other at-risk populations
    o 100% of new technology applications will be virtually available to customers, anytime anywhere again by June 30.

Live in-meeting poll from Commissioners to determine priority areas of focus

- Focus Areas-Highest to Lowest, Commissioner Poll results.
    1. Mental health Services/Suicide Prevention.
    2. Cost control- Meds, Hospital Utilization, Health Care Costs.
    3. Support rural providers. Maternal/ Child Health/ and foster kids.
    4. Opioid and SUD Abuse Prevention.
    5. Aging, Advanced Directives/LTSS/IDD, Services and Supports.
    6. Food Security.
    7. Homeless/Housing Instability.
    8. Reducing Recidivism Rates.
- Input from Commissioners
    o If we chose one of the focus areas, and directed all of our efforts towards that goal, could we make some real progress?
    o Warning to not fall into the trap of directing our funding towards a small population that has significant needs and missing out on opportunities to affect more lives.

- o These focus areas and WIGs are very important, but we have extremely important infrastructural progress that must be made to ensure long-term success of the Roadmap initiatives.
- The Lt Governor's offices clarified that the OeHI director Carrie Paykoc was requested to create WIGs for Commission, which is Governor-appointed.
- Suggestions from the Commissioners
  - o Caution against this poll being the only guide line, because not all stakeholders are at the table, and each commissioner has their individual perspectives on what is important relative to the organizations they work in outside of the Commission
  - o Important to know other agencies' priorities as well that are not represented on the Commission
  - o For any endeavors, it is important to utilize what is already established, and not start fresh unless that's the most efficient option

Presentation from Colorado Department of Human Services

- Primary update is that the Governor has put in place a Behavioral Health Task Force
- 3 subcommittees sit beneath it:
  - o State Safety Net
  - o Children's Behavioral Health
  - o Long Term Competency
- Listening sessions revealed that a primary concern across the state is challenges with patients getting timely access, or access at all, to necessary services.

Colorado's Health IT Roadmap Update-eHealth Commission Review/Approval

Carrie Paykoc, Director, Office of eHealth Innovation.
Jason Greer, Co-Chair eHealth Commission.

- Notification of edits to the recently refreshed Health IT Roadmap
  - o New letter of endorsement for the Lt Governor & Governor
  - o A new executive summary incorporating the work of the Office of Saving People Money on Health Care
  - o Background section with administrations' priorities
- Substantive changes to the workstreams and initiatives were not made
- Commission passes a motion to accept and approve changes to Health IT Roadmap

Colorado Health Observation Regional Data Service (CHORDS)

Paul Presken, Senior Consultant, Colorado Health Initiatives
Dr. Bill Burman, Executive Director, Denver Public Health

- CHORDS
  - o Is a regional distributed data network that uses EHR data to support public health evaluation and monitoring efforts.
  - o Employs the same type of data that would exist in an HIE but the data is distributed between multiple data providers.

- The CHORDS Network
  - Data partners are CORHIO, CCMCN, CU Anschutz, among others.
  - Users are researchers and public health professionals across health care and behavioral health
  - Governance from Colorado Health Institute (CHI)
- CHORDS Data
  - Approximately three million patient records, with patient data from 2011-2018
  - Geocoded home addresses
  - Diagnosis codes
  - Lab test results
  - Behavioral health screening
  - Social determinants of health
- Round trop from data request to result is approximately 2 weeks.
- Ability to look at he macro level vs micro level
  - Macro, the entire city of Denver.
  - Micro, the information on a single neighborhood.
  - Interactive and detailed maps are available on the CHORDS website.
- CHORDS prides itself on being able to assure data providers that their information is safe has been critical.
- Current Colorado Health Foundation grant funding ends at the end of 2020.
- Would the Commission acknowledge the efforts and contributions of data partners and supporting organizations?
  - The Commission will consider about support in a future meeting once the entire Commission has an opportunity to dig a bit deeper into CHORDS.
- Future applications
  - CHORDS could be helpful in gathering information on targeted areas with limited funding.
  - A tool such as CHORDS could provide crucial data in determining if people are saving money on health care.

Public Comment

- Does identity matching occur for CHORDS, and is there a standard for the social determinants of health?
  - Matching does occur, but there is not a standard set outside of CHORDS for how that is done, and CHORDS uses assisted data.

Closing Remarks

- Reminder that March's eHealth Commission meeting will not have an in-person component. Remote dial-in only.