eHealth Commission

March 14, 2018 | 12:00pm to 2:00pm | HCPF Conf Rm ABC

Type of Meeting	Monthly Commission Meeting
Facilitator	Michelle Mills, Chair
Note Taker	Brendan Soane
Timekeeper	Michelle Mills, Chair
Commission Attendees	Ann Boyer, Adam Brown (on phone), Mary Anne Leach, Michelle Lueck, Michelle Mills, Sarah Nelson, Carrie Paykoc, Chris Underwood, William Wheeler, Wesley Williams, Tania Ziegler

Minutes

Call to Order

- Michelle Mills called the meeting to order as Chair of the eHealth Commission

Roll Call and Introductions
- Attendance does not constitute quorum.

Approval of Minutes
- February minutes cannot be confirmed.

Review of Agenda –Michelle Mills, Chair

Announcements

OeHI Updates
Mary Anne Leach, Director Office of eHealth Innovation
- OeHI met with the Joint Budget Committee and is awaiting approval of new budget ask.
- Michelle L: Are there any anticipated barriers to budget approval?
  o Mary Anne: Likely not, but we did get an interesting question about how our work relates to gun control. We emphasized that our work is about health data and will not be used to collect data on guns.

Carrie Paykoc, State Health IT Coordinator
- OeHI is in the process of developing the definition and philosophy of care coordination in Colorado so we can determine what solutions we should advance. To secure 90% match, we will get into IAPD edits.

Policy Updates
Chris Wells, Director of the Office of eHealth and Data, CDPHE
- House Bill 18-1006: New born screening program currently in appropriations committee. We should know more by next month.

New Business

SIM eCQM Update
Barbara Martin (*Director, SIM*) and Ako Quammie (*HIT Program Manager, SIM*)
- Medicare and Medicaid have begun requiring electronic CQM data as of the beginning of this year.
- SIM has been working since last summer with HIEs to develop reporting solutions. We are developing a project management plan with our OIT partners – how can we as state agencies come together to make this work? OIT has been helpful so far in this process.
- We are interested in establishing an eCQM Data Governance Committee

- SIM will fund automated extraction of field level data from SIM practices EHRs for eCQM calculation and validation. This investment will: synthesize data feeds from other sources to ensure accurate calculation of eCQM numerators and denominators, provide technical assistance and data validation expertise to SIM practices, report data to CMS to help providers meet quality targets and succeed in value-based payment.
- Practices with connections to HIEs will be easier to connect, and the state will potentially be able to send data back to HIEs.
- For visuals and for more information, please see the March eHealth Commission meeting presentation here.
- Carrie: Jon Gottsegen is hosting a meeting with MuleSoft if you want to learn more about how the health exchange software might work.

   Comments
- Dr. Wheeler: how frequently are practices sending information?
   - o Ako Quammie: SIM reports quarterly, but it could happen on a case-by-case basis. We would potentially extract nightly.
- Michelle Mills: Will practices have the ability to pull data that's not just numerator and denominator?
   - o Ako Quammie: Potentially.
- Dr. Wheeler: Regarding eligibility information, could that be sent back to practices through the state enterprise service bus?
   - o Ako Quammie: The technical infrastructure will be there.
   - o Chris Underwood: There would potentially be HIPAA problems involved.
- Michelle Mills: Does SIM have pricing models worked out?
   - o Barbara Martin – We are working on it.
   - o Mary Anne Leach – OeHI's budget could potentially contribute.
- Barbara Martin: We do not want to build something that will send us down a rabbit hole, which is why we are focusing on numerator/denominator data but not limiting infrastructure.
- Michelle Mills: This will ease burden on provider.
- Barbara Martin: Data governance is a challenge, so we must build a unique data governance committee.
- Barbara: All HIEs have a sophisticated data governance structure, so we just want to be able to work with them in a way that doesn't need to upset that structure.
- Barbara: The biggest concern is how payers will use data.
- Barbara: Currently we have an application open for the Data Governance Committee – pilot structure that we will evaluate – please let me know if the Commission has any recommendations of people to talk to.
- Carrie Paykoc: What we are trying to do with SIM is to establish a committee before there is software in place. Are there any recommendations from the Commission?
   - o Michelle Lueck: It's a good idea to have a platform that's adaptable. The government structure has to be adaptable over time also. It's a difficult time because we are building something and transitioning, so we must be deliberate. Will the eHealth Commission eventually oversee what SIM does?
      - ▪ Mary Anne: There is a Data Governance initiative in the Roadmap, so we can work in tandem with SIM.
      - ▪ Michelle Lueck: We must be very tactical in how we approach this.
- Ako: The technical infrastructure will be there to use in other forms, but now the priority is to get data to Medicaid.
- Mary Anne: We want to build this on existing infrastructure because we don't want this to be OeHI's purview.

Colorado Health IT Roadmap
Mary Anne Leach and Carrie Paykoc
- Master Patient Index: See meeting slides for more information
- Mary Anne Leach: Before public comment period, we will need an analysis of how many duplicates identities there are which will help inform RFP.

- Mary Anne (to Adam Brown): We will want to talk with you about how Anthem's MPI is set up to inform our RFP.

  Comments
- Wes Williams: With the current design of the MPI, what is that path for being able to use this for undocumented people of Colorado?
  - We have a virtual eMPI, but that is a good point. It will be a good use case.

Joint Agency Interoperability Project
Sarah Nelson, CDHS Business Technology Director
- JAI seeks to make data available to right person, at right time, for the right reason. We do not want to remove data from the source or create a stored linked client identity record. This will allow us a singular view of our clients receiving services through multiple programs using different IT systems and providing decision supports based on that view. Ultimately, it will allow us to deliver services in a more effective and efficient manner.
- For more information, see meeting slides.

  Comments
- Carrie Paykoc: There is some momentum to work with Jon Gottsegen and the enterprise service bus. Clinica or Mental Health Denver could request information.
- Dr. Wheeler: how powerful are analytics if there are no patient identifiers?
  - Sarah Nelson: Researchers have a need for longitudinal data, so we will need to work out logistics over time. Maybe a third party stores the data.
- Dr. Wheeler: one of our frustrations is that with trending aggregated data you don't know how your populations have changed over time.
- Mary Anne Leach: social determinants of health will be an important part of this.

10.10.10
Jeffrey Nathanson, President 10.10.10
- Cities Health Program, 10 Wicked Problems in Health, May 7-17
- Introduces Kelly Duncan from 10.10.10: Get in touch with kelly@101010.net if you are interested in being a validator.
- Save the Date May 7, 4:00 PM for introduction of the CEOs.

For next month:
Carrie Paykoc will send out email about relevant bills.
SIM application for data governance committee due 3/15.
Let Carrie know if there are any agenda items for next month.