

Colorado's eHealth Commission Charter and Bylaws

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CHARTER AND BYLAW APPROVAL

Role	Team Member's Name	Date	Signature or Initials
Director, OeHI	Carrie Paykoc		
Statewide Health IT Coordinator	Carrie Paykoc		
HCPF Project Coordinator	Micah Jones		
Commission Chair			

1. Document Purpose

The purpose of this Charter is to provide an overview of the Commission’s mission, historical context, membership structure, governance, and bylaws. As referenced in this document:

- The “Office” refers to the Office of eHealth Innovation (OeHI)
- The “Commission” refers to the eHealth Commission.
- The “Organization” collectively refers to both

This document is intended for public and private sector stakeholders enabling Colorado’s Health Information Technology initiatives, and open to anyone who wants to learn more about the eHealth Commission.

2. Overview

The role of the eHealth Commission is to provide advice and guidance to the Office of eHealth Innovation on advancing Health IT in Colorado. The Commission shall support the implementation of the State’s Health IT strategy and interoperability objective by setting goals for Health IT programs and creating a process for developing common policies and technical solutions.

As needed, workgroups can be formed to focus on priority projects or topic areas. They are intended to provide input, facilitate information sharing, share expertise, generate ideas, vet feasibility of new approaches, and enable community stakeholders to participate in statewide policy decisions. The need for workgroups will be determined by a consensus of the Office of eHealth Innovation and the Commission.

3. Membership

The eHealth Commission will be made up of nine to 15 volunteers appointed by the Governor including those with experience and knowledge in:

- primary health care delivery
- behavioral health care delivery
- health insurance
- non-profit Health IT-related community organizations
- interoperability and data exchange
- consumer engagement in health care
- health care quality measures

The Commission will include private sector and consumer representation, along with the public sector, ensuring a holistic approach to the future of Health IT in Colorado. The Commission will advise and provide recommendations to the Office in furthering Colorado’s Health IT goals, and provide oversight

and assistance with project prioritization including oversight of project implementation. With the completion of [Colorado's Health IT Roadmap](#), the Commission will serve as a governing board for the implementation of Health IT projects focusing on stakeholder engagement and accountability.

Commission members can expect to commit a minimum of two hours a month for the Commission meeting with additional time as necessary for material review, workgroup membership, and/or ad hoc meetings as appropriate.

As outlined in the Executive Order, membership will expire on a rotating basis to allow for new members while at the same time maintaining continuity. All members agree, as a direct or indirect member of the Commission, to be committed to working in a respectful and collaborative manner.

3a. Meeting Schedule

The eHealth Commission will meet on a monthly basis with the goal of the meeting to further the goals and objectives of the Organization. The Organization has the ability to adjust meeting types and frequency as needed.

Workgroups will meet on a schedule determined by Workgroup members.

4. Tasks and Responsibilities

In addition to advising and providing recommendations to the Office, the Commission, in conjunction with the Office of eHealth Innovation, will be the guiding body for the implementation of Health IT projects. [Colorado's Health IT Roadmap](#) will be used to identify priority projects. To further successful implementation of projects, the following principles will apply:

- Continual review of identified priorities
- Implementation strategies for Health IT projects
- Coordination among agencies, stakeholders, and others in identifying and maximizing resources including solutions, project management, and expertise
- Serve as a champion for identified projects guiding them through planning and implementation and providing Commission updates
- Provide subject matter expertise for procurement of solutions
- Review of project plans to ensure that the Office is achieving Health IT goals
- Provide an accountability mechanism throughout the project lifecycle focusing on meeting timelines, fiscal responsibility, and satisfying the tasks to achieve Health IT goals including benefit and value realization

5. Voting and Bylaws

Because the Commission intentionally represents a diverse group of stakeholders, there must be a formal process by which decisions are made including those related to the prioritizing of projects, allocation of resources, and overall Health IT goals. The following outlines the steps in that process:

1. There is not a minimum number of Commission members that must be in attendance to conduct and/or host the meeting.
2. Member voting may be conducted via voice voting, electronic voting, or show of hands.
3. QUORUM TO CONDUCT A VOTE: 80% of the appointed Commission members (excluding vacancies) must be present (in person, by telephone (considered in person), or by submission of an electronic vote) to represent a quorum before the Commission can vote on any issue within its authority.
 - a. To determine if a quorum is present, the members will be counted within the first 15 minutes of the meeting start. If members leave or arrive late it could impact whether a quorum is present and therefore the ability to vote on issues.
 - b. To count an electronic vote for the purpose of *establishing a quorum*, the matter(s) to be voted on at the meeting must have been formally submitted for an electronic vote and electronic votes received prior to the start of the meeting.
 - c. For meeting minutes, approval can be given by simple majority (no minimum percentage required).
4. APPROVAL OF A MATTER: For any matter other than meeting minutes, 80% of Commission members must approve the matter. For example: There are 10 Commission members; eight (8) are present (enough for a quorum) – all eight (8) (80% of Commissioner members) must approve the matter for it to pass.
 - a. Votes can be given either in person or electronically. Electronically is defined as email or survey tool.
 - b. To count an electronic vote for the purpose of *approving a matter*, the matter must have been formally submitted for an electronic vote and electronic votes received prior to the start of the meeting.
5. 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 members excluding abstaining voters. For example: There are 10 Commission members, all 10 are present, two (2) are abstaining leaving a total of eight (8) Commission members. 80% of the eight (8) would have to affirm the matter for it to pass.