

Health Information Exchange Coordinating Committee Meeting Minutes

Meeting Date: August 21, 2015

Time: 10:00 a.m. – 12:00 p.m.

Location: **Go to Meeting Webinar**
Agency for Health Care Administration
Bldg.3, Florida Center Conference Room
2727 Mahan Drive
Tallahassee, FL 32308

Members Present: Secretary Dudek, Chair; Craig Dalton; Jarrod Fowler; Mike Hansen; Tab Harris; Tom Herring; Michael Jackson; Kevin Kearns; Alex Koster for David Milov, MD; Dennis Saver, M.D.; Kim Tendrich; Karen van Caulil, Ph.D.; and Mary Pat Moore for Wences Troncoso.

Members Absent: Bill Bell; Ronald Burns, D.O.; Peter Kress; Gay Munyon; and Hal Perlman.

Staff Present: Jaime Bustos, Evan Carter; Stephanie Clarke, Dylan Dunlap, Carrie Gaudio, Heidi Fox, Milly Hardin, Nikole Helvey, Pam King, Molly McKinstry, Aaron Parsons, Brenda Phinney, Haley Priest, Mary Schrenker, Carolyn H. Turner, and Dana Watson

Interested Parties Present: Amy Beaven, Board of Governors, State University System; Gigi Cowart, Project Manager, Harris Corporation; Gloria Deckard, Florida International University; Mitesh Desai, University of Central Florida Regional Extension Center; Erika Marshall, Florida Department of Health; James McFaddin; Cal Popovich, Tampa Bay HIE; Rebecca Poston, Florida Department of Health; Jaime Pickle, Medicity; Lisa Stotz, Harris Corporation; Christopher Sullivan, Image Research; Ken Whittemore, Surescripts; Alyson Widmer, University of Florida Health

Meeting Materials: Agenda, Minutes, Event Notification Service (ENS) Presentation, Patient Look-Up (PLU) User Group Report, Quarterly Florida Health Information Exchange (Florida HIE) Report/Plan and Presentation, Outreach Update, E-Prescribing of Controlled Substances Report; Overview of RFI Responses, Meaningful Use Report

Copies of meeting materials are posted at: <http://www.fhin.net/committeesAndCouncils/hiecc.shtml>

Call to Order, Agency Updates, and Roll Call: Secretary Elizabeth Dudek called the meeting of the Health Information Exchange Coordinating Committee (HIECC) to order at 10:00 a.m. She welcomed members.

Ms. McKinstry gave the Agency for Health Care Administration (Agency) update. She indicated that the next Going Digital symposium would be held September 29, 2015 in St. Petersburg, Florida. She encouraged members to assist in outreach through their contacts.

Ms. McKinstry reported on the Commission on Healthcare and Hospital Funding. The next meeting of the Commission will be August 31, 2015 in Orlando, Florida. Information collected by the Commission is available on the Commission website: <http://healthandhospitalcommission.com/index.shtml>.

Ms. Heidi Fox conducted the roll call.

Review and Approval of Minutes: Ms. Fox asked the committee to review the minutes from the May 29, 2015, meeting. There were no corrections. She asked for a motion to approve the minutes which were unanimously approved.

Previous Action Items: Ms. Carolyn Turner reviewed action items from the previous meeting:

1. The Agency will report Direct Messaging metrics for sponsored and non-sponsored users.
2. The HIECC will collect success stories from Participants as available.
3. The Agency will review the illustrated use cases to determine whether the CCD supports the use case.

Regarding action item 1, Direct Messaging active accounts were reviewed. In June, there were nine sponsored accounts and seven non-sponsored accounts. In July, there were ten sponsored accounts and five non-sponsored accounts that were active. The sponsored accounts generated 3017 messages and the non-sponsored accounts generated 110 messages. She indicated staff would continue to report these statistics going forward.

For action item 2, Pam King will provide success stories during the outreach update later this meeting. Regarding action item 3, the illustrated use cases were reviewed and introductory remarks clarified.

Event Notification Service Update: Mr. Aaron Parsons presented on the status of the Event Notification Service (ENS). The ENS enables alerts of health care encounters from hospitals and other health providers to health plans that subscribe to the service. The alerts enable improved coordination of care to reduce readmissions and direct non-urgent care to the primary care provider. He noted that participation in ENS as a data source was one of the requirements for hospitals to receive LIP funding in fiscal year 2014-2015 and continues to be a requirement for LIP funding in FY 2015-2016. He reported that there are 206 participating hospitals in ENS as a data source. There are no Florida HIE fees for data sources.

Mr. Parsons indicated that the Agency is outreaching to health plans and accountable care organizations (ACO) to subscribe to the service. He reported that four health plans and one ACO are actively receiving ENS alerts: WellCare Health Plans, Sunshine State Health Plan, Molina Healthcare and Integral Quality Care. Mr. Parsons reported 44,955 notifications to these subscribers in July 2015. He reported that the Palm Beach ACO has recently submitted their subscription agreement.

Mr. Parsons indicated that as of September 1, 2015, home health agencies may subscribe to the ENS service. The home health agencies will sign the subscription agreement and pay fees to participate. He noted that the home health agencies must have or obtain patient consent to include patients in the panel to receive ENS alerts. The pilot will be evaluated after the first participants are in production prior to further expansion.

Ms. McKinstry asked whether home health agencies had expressed interest which Mr. Parsons affirmed.

PLU User Group Report: Ms. Carrie Gaudio gave the PLU User Group report on behalf of Mr. Davidson James. The PLU User Group met July 30, 2015. She reported that the PLU User Group received status updates from the nodes, Harris team, and the Agency. Harris reported that broadcast queries are acceptable within the eHealth Exchange and would be meeting with Healthix, a New York based organization, to discuss any technical issues for exchange. The Agency reported that RFI responses were being analyzed and would be reported to the HIECC at its August meeting. The Florida International University (FIU) evaluation team reported on plans for an employer benefit managers webinar and survey being conducted in coordination with the Florida Health Care Coalition. Florida HIE participants were requested to participate in a study of patient matching being conducted by an FIU graduate student.

There were no questions about the report.

Quarterly HIE Plan & Report: Ms. Gigi Cowart, Harris Project Manager, presented the quarterly HIE report through July 2015, and planning through October 2015.

Ms. Cowart reported the June monthly metrics for Direct Messaging and ENS metrics through July. Regarding PLU deployments, Ms. Cowart noted that Tampa Bay HIE went live in May. The Harris team worked with other organizations in various stages of the on-boarding process. These include Community Health Systems Professional Service Corporation (CHSPSC), Community Health IT, Florida Accountable Care Services, and the Department of Health (DOH). She said that DOH is currently focusing on public health querying.

Ms. Cowart reported on PLU transactions. She reported 566 successful patient discovery queries and 360 documents retrieved in April 2015. Production nodes include Atlantic Coast HIE, Bethesda Health, Broward Health, Florida Hospital/Adventist Health Systems, Martin Health System, Orlando Health, Senior Home Care, Strategic Health Intelligence (SHI), and UF Health.

Ms. Cowart presented the project plan for next quarter. Florida HIE project plans through October 2015 will continue ENS deployment activities for subscribing health plans, ACOs, and home health agencies. She indicated the team would

be working with Palm Beach ACO to initiate their deployment and anticipated the deployment of AvMed during the upcoming quarter. PLU on-boarding activities will continue to complete scheduled deployments.

Mr. Tab Harris asked about the drop in PLU transaction during the quarter. Ms. Lisa Stotz explained that Florida Hospital/Adventist Health Systems reduced their use of pre-fetching during this period resulting in fewer queries. Individual clinicians continue to query.

Outreach Update: Ms. Pamela King presented an update of outreach activities. Outreach activities include events, tours, webinars and conference calls with increasing use of social media and graphics on the website. She noted the Tallahassee Going Digital symposium was held in June which was well received.

Ms. King encouraged everyone to attend the next symposium to be held September 29, 2015 in St. Petersburg. This is a public meeting open to all interested parties at no charge with the event topics presented in panel format. The symposium will begin at 12:30 pm and end at 5:15 pm. Attendees were encouraged to register on the Florida HIE website as seating is limited.

As requested by HIECC members, Ms. King presented success stories gathered from Florida HIE participants. She indicated that emergency department physicians are a driving force in the use of the patient look-up service. She shared a story from an emergency department physician that used PLU to identify a case of malingering of a Department of Corrections patient. Integral Quality Care is using ENS to initiate coordination of care for special populations such as perinatal care and patients with more than 10 prescriptions per month. She reported that the Veterans Administration is testing their ability to share data with the Florida Direct Messaging Service and the Sarasota County Health Department is using the service to send patient referrals.

Ms. King was asked if dollars savings had been quantified by Florida Hospital/Adventist. She indicated that she would inquire further.

E-Prescribing of Controlled Substances: Mr. Ken Whittemore reported on the status of the electronic prescribing of controlled substances (EPCS) in Florida. He reported that as of June 2015, 73 percent of pharmacies are EPCS enabled and 0.9 percent of active prescribers are EPCS enabled. Florida is similar than the national statistics for adoption (2.4%) although somewhat lower. He indicated that EPCS is not included in meaningful use which is one of the reasons adopted has been slow.

Mr. Whittemore introduced a video that explains the steps for becoming enabled for EPCS consistent with Drug Enforcement Administration (DEA) regulations. The video is available at: <http://surescripts.com/products-and-services/e-prescribing-of-controlled-substances>.

HIECC members and staff discussed how to promote EPCS in Florida with Mr. Whittemore. Mr. Schrenker asked about whether vendors give adequate support to provider and Mr. Whittemore responded that he was not aware of problems with most vendors. He noted that not all electronic health record systems are EPCS enabled. Surescripts has created a certification guide for vendors and requires a third party audit. Mr. Whittemore was asked about other states where adoption is higher. Mr. Whittemore said that New York adoption is higher with 12% of practitioners enabled. E-prescribing including EPCS is mandated there next year.

Ms. McKinstry suggested engaging health plans to support EPCS as a cost savings to them. Mr. Michael Jackson indicated that the Florida Pharmacy Association has been notifying pharmacists whenever a major health system becomes EPCS enabled. They would like more information about Florida organizations engaged in EPCS as it occurs.

Overview of Responses to RFI: Ms. Fox presented highlights of responses to the Agency's Request for Information about interest in operation of the Florida HIE and options going forward. The RFI was posted on June 29, 2015 with a deadline of July 22, 2015.

Responses were received from Cognizant/InterSystems, Harris/Audacious Inquiry, Medicity, NetDirector, Nitor Group, Orion/Uber Operations, Strategic Health Intelligence, Utah Health Information Network, Vorro Health, Well Florida/Relay Health and ZeOmega. Availity and Mosaica declined to respond to the RFI.

Ms. Fox reviewed the highlights of the responses. The majority of respondents proposed a change to a centralized architecture with several suggestions for a centralized database, master patient index and provider portal. Some respondents suggested use a cloud based exchange with the potential to reduce operating costs. Several respondents suggested offering the ENS to health care providers and some respondents suggested adding Continuity of Care Documents delivery. Several respondents suggested use of an opt-out approach for patient consent. There was general support for standing up a not-for-profit entity to govern the Florida HIE.

Ms. Fox explained that the Agency would be meeting with vendors to get clarification of their responses. There needs to be more discussion of costs and details regarding governance. She asked members to send ideas or any questions to ask the vendors. Staff will be meeting with vendors individually in September. She indicated that there would be more discussion of the vendor responses at the next HIECC meeting.

Mr. Tab Harris offered the assistance of Florida Blue. In response to his question, Ms. Fox explained that the vendor proposed lower costs referred to the cost of the HIE platform.

Meaningful Use Report: Ms. Mary Schrenker gave a status report on the Medicaid EHR Incentive Program. She reported that as of July 31, 2015, 7097 eligible professionals and 177 eligible hospitals have received incentive payments. Total payments to eligible professionals were \$180,582,585 and total payments to hospitals were \$307,664,366.

Ms. Schrenker indicated that the Medicaid meaningful use progression has been completed by 152 hospitals. As of July 31, 2015 there were 1,107 remaining eligible professional program year 2014 applications in the review process. She reported that 24 hospitals and 21 eligible professionals have attested to Stage 2.

Ms. Schrenker gave an overview of proposed rules issued by the Centers for Medicare and Medicaid Services (CMS) and the Office of the National Coordinator for Health Information Technology (ONC) earlier this year. ONC published the stage 3 certification of health information technology rule which broadens the applicability of the certification to a variety of practice settings. CMS published the Stage 3 proposed rule and 2015 program year proposed rule. The 2015 program year rule proposes shortening the 2015 reporting period to 90 days. Stage 3 would begin in 2018 and require certification to the 2015 edition.

Ms. Schrenker noted that many advocacy groups have requested a delay for Stage 3. There are concerns about provider and hospital readiness for Stage 3 measures and also issues regarding interoperability.

Ms. Fox asked whether EPCS is required in stage 3 and Ms. Schrenker indicated she would research. Ms. McKinstry asked about stage 3 issues. Ms. Schrenker indicated that there were concerns with the higher thresholds proposed for stage 3. Ms. Turner noted that there are concerns about patient engagement thresholds that require patient initiated activities to meet the measure.

Agency Program Updates: Ms. Turner gave a brief update on other HIE related activities.

Program metrics have been updated on www.FHIN.net including production and onboarding PLU and ENS participants, transactions, and covered beds. Direct Messaging participating organizations and transactions are also updated monthly.

The Agency participates in several national HIE organizations to monitor interstate HIE opportunities including the Southeast Regional Collaboration for HIT and HIE (SERCH), The Sequoia Project (formerly Healthway), National Association for Trusted Exchange (NATE) and DirectTrust.

The Agency is receiving state-level statistics from Surescripts and Emdeon enabling tracking of Florida quarterly e-prescriptions and e-prescribers. Using this data, the e-prescribing rate in Florida for Q2 2015 was 60.2% down from Q4 2014 at 61.1% and Q1 2015 at 63.9%. Ms. Turner indicated this is probably a temporary fluctuation of data as the general trend is steadily upward. The percent of licensed physicians who e-prescribed in Q2 2015 was 68% up from 67% in Q1 2015. The metrics exclude prescriptions for controlled substances due to low rates of e-prescribing.

Ms. Turner noted that the Advisory Council is meeting as a webinar on September 18, 2015 at 1:00 pm. The Tampa Bay Going Digital symposium is September 29, 2015 in St. Petersburg. She announced that the next HIECC meeting is tentatively scheduled for November 20, 2015.

Meeting Summary, Next Steps, and Adjourn: Ms. Fox reviewed the action items from the meeting:

- 1) HIECC members may send Carrie Gaudio questions for RFI respondents and to request the RFI document.
- 2) Pam King will request more information from Florida Hospital/Adventist to quantify the impact of their participation in the Florida HIE.

Adjournment: There being no further business to discuss, the committee adjourned at 11:30 a.m.