



AGENCY FOR HEALTH CARE ADMINISTRATION

STATE OF FLORIDA

IDEAL TO BE STATE RECOMMENDATIONS & ROADMAP

HEALTH INFORMATION EXCHANGE (HIE) STUDY

northhighland.[®]

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SECTION 1 EXECUTIVE SUMMARY

The Agency for Health Care Administration (AHCA) contracted with the North Highland Company (North Highland) to conduct an assessment of the health information exchange (HIE) landscape throughout Florida as defined in AHCA RFQ No. 002-17/18. As part of the HIE Study, North Highland has conducted “As Is” and “To Be” assessments, along with the development a five-year Roadmap detailing the key steps and tasks needed to work toward achieving the ideal, desired future state of HIE in Florida. The [As Is Assessment](#) details the current state of HIE in Florida, while this To Be Assessment details North Highland’s assessment of the ideal To Be future state of HIE in Florida, as well as a five-year Strategic Roadmap.

HIE facilitates access and retrieval of patient health information and clinical data to provide safer, more timely, efficient, effective, and patient-centered care. HIE provides the capability to electronically move clinical information among disparate healthcare information systems, while maintaining the meaning of the information being exchanged. HIE is also used by public health and other health and human services agencies to assist in the analysis and management of the populations they serve.

North Highland developed and deployed a variety of methods and strategies to conduct the To Be assessment, including stakeholder engagement, information gathering, and research analysis. In order to gain insight and perspective on the ideal future state of HIE , the HIE Study, including this To Be assessment, engaged as many stakeholders as possible from across Florida’s health care community. These stakeholders represented the following six established groupings: Associations, Health Care Facilities, Vendors, Providers, Payers, and Government Agencies with the primary focus centered on Patients. Information was collected through strategic visioning sessions, one-on-one stakeholder interviews, electronic surveys, and a Request for Information (RFI). The assessment’s approach, methods, and stakeholder engagement are further discussed in **Section 2**.

Key observations from an environmental scan of the current policy and HIE technology landscape are presented in **Section 3**. The insights presented reflect a market scan of current and existing trends as well as the information provided by vendors responding to the AHCA RFI.

Key observations and insights gathered for the To Be assessment were used holistically to develop the definition for the vision and ideal state of HIE in Florida. The ideal state was defined with robust input and collaboration from stakeholders across all six stakeholder groupings. This vision, definition, and goal for the ideal future state of HIE in Florida is presented in **Section 4**.

Section 5 outlines the Strategic Initiatives developed to address, and work together toward, accomplishing the Strategic Objectives. This section provides details about these three Strategic Initiatives, their recommendations, and the associated key tasks and activities that should be undertaken to address the gaps, barriers, and continuances identified in the As Is assessment’s findings. This section also presents Action Plans developed to assist in the development, implementation, and accomplishment of each Strategic Initiative. The Action Plans contain an overview and outline of the key

tasks and activities associated with each. These Action Plans also provide a high-level overview of avoidable risks, success enablers, financial considerations, and affected stakeholders.

Section 6 outlines the five-year Strategic Roadmap, which should be used to help guide the development, implementation, and accomplishment of each Strategic Initiative (as presented in Section 5). This future state Roadmap helps to lay the strategic foundation to close the gaps, remove the barriers, and enhance the continuances identified by stakeholders in the As Is assessment.

The defined ideal future state of HIE in Florida, in coordination with the Strategic Initiatives, Action Plans, and Strategic Roadmap, work together to outline a unified vision for HIE in Florida over the next five years.

SECTION 2 INTRODUCTION

A. BACKGROUND

Signed into law in 2009, Section 4201 of the American Recovery and Reinvestment Act (ARRA) provides funding support for the adoption and use of certified electronic health records (EHRs) through the U.S. Department of Health and Human Services. The Health Information Technology for Economic and Clinical Health (HITECH) Act was enacted as part of the ARRA in 2009 to promote the adoption and Meaningful Use of health information technology (HIT) through the Medicare and Medicaid Electronic Health Record (EHR) Incentive Programs.

AHCA is authorized by the Florida Legislature to promote and foster HIT systems through the administration of the Medicaid EHR Incentive Program. This statutory authority has allowed AHCA to develop a statewide health information network, known as the Florida HIE, and to promote a variety of health information technology and exchange initiatives among Florida's providers and hospitals. While AHCA currently governs the Florida HIE, this assessment encompasses the entire HIE landscape throughout Florida, including but not limited to the Florida HIE.

In order to qualify for the Medicaid EHR Incentive Program funding, each state developed and periodically updates a State Medicaid Health Information Technology Plan (SMHP). The SMHP includes an assessment of the level of HIT and HIE activities in the state, a description of the readiness of the healthcare community to use HIT meaningfully, and a strategic and operational plan to implement the Medicaid EHR Incentive Program. As part of the 2010 assessment of HIT/HIE activities, the State of Florida contracted with Well-Florida Council, Inc., to conduct an environmental assessment that surveyed the readiness of hospitals and providers in Florida to participate in the Medicaid EHR Incentive Program.

As a result of AHCA RFQ No. 002-17/18, the North Highland Company (North Highland) has been contracted pursuant to State Term Contract No. 973-000-14-01, to conduct a study of the HIE environment throughout Florida (HIE Study) in order to update the environmental assessment section of the SMHP and to inform future roadmaps for HIE in the State of Florida. The findings and recommendations from the HIE Study will ultimately inform future development of public and private HIE, HIT, and interoperability initiatives in the State of Florida.

B. PURPOSE

For the HIE Study, North Highland was asked to assess the As Is State, define the ideal To Be State, and create a five-year roadmap of strategic initiatives that lead to the ideal state of HIE in Florida. This document details North Highland's recommendation of the ideal To Be State and associated five-year roadmap for HIE in Florida.

C. APPROACH

North Highland’s approach took into consideration the time and activities required to deliver a comprehensive HIE Study, inclusive of insight from stakeholders across Florida’s health care community, while also meeting an aggressive timeline for study completion with inter-dependent work streams. An overview of the approach and project phases for the HIE Study is shown in **Exhibit 2-1**.

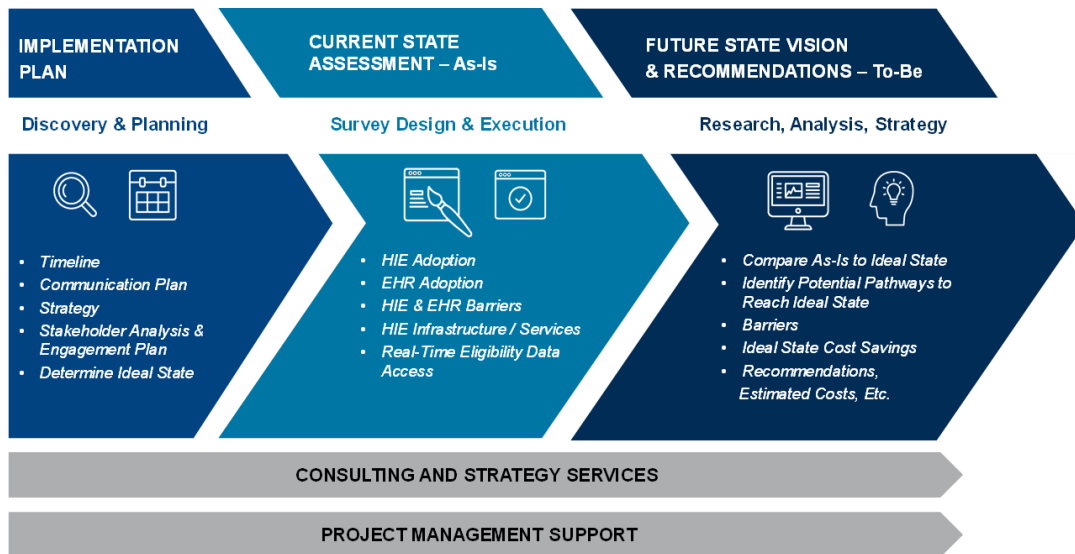


Exhibit 2-1: HIE Study Approach Overview

1. Information Gathering & Research

North Highland worked with AHCA to identify a list of necessary documentation, key stakeholders, and a representative grouping of contacts across multiple stakeholder groups. Relevant policies, procedures, processes, and documentation from varying entities were also gathered, including:

- AHCA’s 2015 SMHP Assessment¹
- The Office of the National Coordinator for Health Information Technology (ONC) draft Trusted Exchange Framework and Common Agreement (TEFCA)²

¹ Florida Agency for Health Care Administration, “Florida State Medicaid Health Information Technology Plan (SMHP, Inclusive of Updates through 12/31/15, v. 5.0”, December 2015.

² The Office of the National Coordinator for Health Information Technology (ONC), Office of the Secretary, United States Department of Health and Human Services, “Draft Trusted Exchange Framework and Common Agreement (TEFCA)”, January 2018. Available at: <https://beta.healthit.gov/topic/interoperability/trusted-exchange-framework-and-common-agreement>

- [ONC’s Interoperability Roadmap](#)³
- [ONC’s Strategic Health IT Plan](#)⁴
- [Florida Strategic and Operational Plan for State Health Information Exchange Cooperative Agreement Program](#)⁵
- [State Consumer Health Information and Policy Advisory Council documentation](#)⁶
- [Health Information Exchange Coordinating Committee \(HIECC\) documentation](#)⁷
- [HIE Legal Work Group documentation](#)⁸

This material was leveraged to supplement the data collected from internal and external one-on-one interviews, visioning sessions, working group sessions, and electronic surveys.

2. Working Group Sessions

Upon contract execution, North Highland held kick-off meetings with AHCA team members to discuss project logistics, identify key stakeholders, and assess HIE barriers and opportunities. North Highland held ongoing, collaborative working group sessions and workshops with AHCA project sponsors and stakeholders throughout the HIE Study.

3. Strategic Visioning Sessions

North Highland conducted two strategic visioning sessions – one with internal AHCA and Florida Department of Health (DOH) stakeholders, and the second with members of the HIECC and other key HIE stakeholders. These sessions were used to begin defining the strategic vision, goals, objectives, and key initiatives for HIE across Florida over the next five years. Establishing this long-term vision with input across stakeholder groups at the onset of the project allowed North Highland and AHCA to define the current understanding of a desired future state. This understanding led to more informed stakeholder engagement and established a baseline for identifying gaps, barriers, and opportunities.

North Highland documented the output from these Strategic Visioning Sessions in a Strategy Articulation Map, described in **Section 4**, which served as key input for the Ideal State component of the

³ The Office of the National Coordinator for Health Information Technology (ONC), Office of the Secretary, United States Department of Health and Human Services, “Connecting Health and Care for the Nation: A Shared Nationwide Interoperability Roadmap, Version 1.0”, October 2015.

⁴ The Office of the National Coordinator for Health Information Technology (ONC), Office of the Secretary, United States Department of Health and Human Services, “Federal Health IT Strategic Plan 2015-2020”, September 2015.

⁵ The Office of the National Coordinator for Health Information Technology (ONC), Office of the Secretary, United States Department of Health and Human Services, “State Health Information Exchange Cooperative Agreement Program: Florida Health Information Exchange Strategic and Operational Plan Profile”; Florida Center for Health Information and Transparency, 2016 Annual Report.

⁶ State Consumer Health Information and Policy Advisory Council documentation available at:

<http://www.fdhc.state.fl.us/SCHS/CommitteesCouncils/chis.shtml>.

⁷ Health Information Exchange Coordinating Committee (HIECC) documentation available at:

<http://www.fhin.net/committeesAndCouncils/hiecc.shtml>

⁸ HIE Legal Work Group documentation available at: <http://www.fhin.net/committeesAndCouncils/lwg.shtml>

HIE Study. Findings from these sessions also informed the development of the five-year Strategic Roadmap.

4. Stakeholder Identification & Grouping

The successful outcome of any project relies on engaging the right people, at the right time, and providing them with the right information. Given the timeline and geographical constraints of the project, interviewing every entity within Florida’s health care community was not feasible. Thus, the North Highland and AHCA project teams worked together to identify key stakeholders and group them into six categories as shown in **Exhibit 2-2**. The goal of this analysis was to determine the best approach for engagement, the most impactful groupings, and how stakeholders would best provide input for the HIE Study from their unique perspectives.

Table 1 lists the stakeholders which were engaged as part of the HIE Study, broken down by stakeholder grouping.

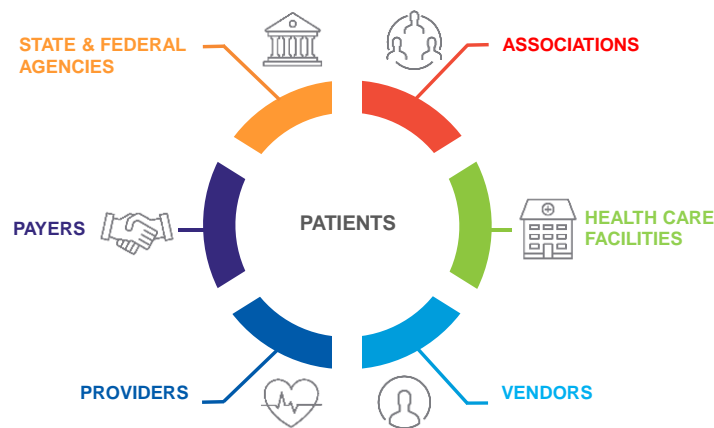


Exhibit 2-2: HIE Study Stakeholder Groupings

The following definitions describe each stakeholder grouping as they pertain to this study:

Associations: Organizations representing a segment of the health care community and promote the views, beliefs, and policies benefiting that constituency.

Health Care Facilities: Facilities providing direct, multi-disciplinary health care services, such as Hospitals and Hospital Systems, Long-term Post-Acute Care facilities, Behavioral Health Centers, and Community Health Centers, among others.

Payers: Public and private health insurance companies and health plans.

Providers: A licensed health care professional who provides physical or behavioral health care in a medical setting, such as physicians, nurse practitioners, physician assistants, and other licensed health care practitioners.

State & Federal Agencies: Government entities at the state and federal level including, but not limited to, AHCA and the Centers for Medicaid and Medicare Services (CMS).

Vendors: A person or company who develops and offers specific technical solutions for purchase by a health care provider or facility, especially as it relates to EHR and HIE technology, software, and support services.

State & Federal Agencies	Associations	Providers	Health Care Facilities	Payers	Vendors
Agency for Health Care Administration (AHCA)	American Association of Retired Persons (AARP)	Community Health Centers Alliance	Baptist Health System	Florida Blue	Audacious Inquiry (Ai)
Centers for Medicare and Medicaid Services (CMS)	American College of Osteopathic Family Physicians	County Health Departments	BayCare Health System	Molina Healthcare	Availity
Florida Department of Children and Families (DCF)	Florida Academy of Family Physicians (FAFP)	Health Choice Network	DaVita	Palm Beach Accountable Care Organization	CommunityHealth IT
Florida Department of Corrections (FCD)	Florida Alcohol and Drug Abuse Association (FADAA)	Meridian Behavioral Health Center	Florida Hospital – Adventist Health Systems	Sunshine State Health Plan	Florida Accountable Care Services (FACS)
Florida Department of Health (DOH)	Florida Assisted Living Association (FALA)	Pediatric Associates	HCA Healthcare	Wellcare Health Plans	HIE Network
Office of the National Coordinator for Health Information Technology (ONC)	Florida Association of Accountable Care Organizations (FLAACOs)	Tampa Vein Treatment	Martin Health System		Reunion Care
	Florida Association of Community Health Centers (FACHC)		Memorial Healthcare System		Strategic Health Intelligence (SHI)
	Florida Association of Health Plans (FAHP)		Nemours Children’s Hospital		SureScripts
	Florida College of Emergency Physicians (FCEP)		Orlando Health		Tampa Bay Regional Health Information Organization
	Florida Council for Community Mental Health (FCCMH)		Sarasota Memorial Hospital		The Sequoia project (eHealth Exchange and Carequality)

State & Federal Agencies	Associations	Providers	Health Care Facilities	Payers	Vendors
	Florida Health Care Association (FHCA) Florida Hospital Association (FHA) Florida Pharmacy Association (FPA) Florida Rural Health Association (FRHA) LeadingAge Florida Florida Medical Association (FMA) Florida Osteopathic Medical Association (FOMA)				

Table 1: Stakeholders Engaged for HIE Study

5. Methods

North Highland and AHCA collaborated to determine the best strategy and methods to engage the stakeholders identified in each of the groupings. The primary methods of engagement and information collection were: electronic survey, one-on-one interviews, and an environmental scan. **Exhibit 2-3** provides an overview of the primary methods used to complete the HIE Study. Details about the Electronic Surveys and many of the Stakeholder Interviews can be found in the As Is assessment. This To Be assessment draws from the information and insights collected in the As Is assessment, while collecting further information through an Environmental Scan.

	ELECTRONIC SURVEY	INTERVIEWS	ENVIRONMENTAL SCAN
WHAT?	<ul style="list-style-type: none"> • Questions to identify user preferences, attitudes, and opinions • Qualitative or quantitative • Representative of larger samples 	<ul style="list-style-type: none"> • In depth conversation in person or over the phone • Qualitative • Insight into behaviors and thoughts 	<ul style="list-style-type: none"> • Request for Info (RFI) and a review of literature and federal guidelines • Qualitative and Quantitative • Description of service offerings
WHEN?	<ul style="list-style-type: none"> • Feedback on satisfaction with a product, service, or experience • High level understanding of users 	<ul style="list-style-type: none"> • Understanding of user needs, pain points, behaviors, and attitudes • Participants or topic is more sensitive in nature 	<ul style="list-style-type: none"> • Wide span of audiences and possible respondents • Tighter timeframe and budget than other qualitative methods
PROS?	<ul style="list-style-type: none"> • High-level, baseline information, quickly and at a low cost • Quicker analysis, providing statistics • Findings are representative of a large sample – less risky decision-making 	<ul style="list-style-type: none"> • More in depth conversation with users • Open ended questions – can get to the Why behind thoughts and actions 	<ul style="list-style-type: none"> • Feedback from a larger, possibly undefined sample than interviews • Open ended questions/conversations • Allows gaps in knowledge to become apparent
CONS?	<ul style="list-style-type: none"> • Limited depth of information - no understanding of the why behind preferences, attitudes, or opinions • Survey design and sampled population can influence results 	<ul style="list-style-type: none"> • Typically more time intensive and costly than electronic surveys • Smaller sample size – recruiting the right participants is key • Output not statistical or numbers based 	<ul style="list-style-type: none"> • Can be time consuming and costly • Can raise information not pertinent to study

Exhibit 2-3: HIE Study Methods

a. Electronic Survey

North Highland developed and distributed an electronic survey to health care providers, facilities, and payers to help capture quantitative insight on the current state of HIE in Florida. The survey proved to be a core tool in gathering insight on the current state by examining the practice of electronically exchanging health information among different provider, facility, and payer types in Florida.

b. Stakeholder Interviews

North Highland conducted one-on-one interviews with key internal and external stakeholders identified in partnership with AHCA project sponsors. Interviews were conducted in two ways: in-person and telephone interviews.

Interviews consisted of a one-hour discussion with an agenda customized to each participant and their perspective and engagement level with HIE technologies and services. Stakeholders were encouraged to be open and honest and the discussion often evolved past the initial topics. Below is a sample of interview questions.

- Describe your role and interaction with HIE. How do you fit into the HIE landscape in Florida?
- Do you currently use HIE? If not, why not? Barriers? Challenges?
- Barriers that you had to overcome when implementing your HIE?
- If applicable, what type of HIE technology do you use?
- If applicable, what type of data are you exchanging?
- If applicable, what was the value proposition for you to adopt/implement HIE?

- What do you think is the current state of HIE in Florida? Level of adoption/utilization?
- Do you feel that your partners/peers understand what HIE is, and is not?
- What hesitations, if any, are you hearing from your partners about sharing information with each other and/or other providers, hospitals, or payers?
- What is your view on a statewide Master Patient Index?
- What are your thoughts around central data repositories? Data aggregation?
- How could HIE help to combat the Opioid Epidemic in Florida?
- In your opinion, are there any policy/regulatory barriers that exist which inhibit HIE?
- Are you aware of any best practices currently being done in other states?
- What should AHCA’s role be in the HIE landscape?
- What do you think is currently working well about the HIE landscape in Florida? What would help move HIE forward?

Table 2 presents the list of one-on-one and group interviews conducted for the HIE Study.

Date	Stakeholder Grouping	Stakeholder Detail
1/12/2018	Association	American Association of Retired Persons (AARP)
12/7/2017	Association	Florida Academy of Family Physicians (FAFP)
12/12/2017	Association	Florida Alcohol and Drug Abuse Association (FADAA)
12/14/2017	Association	Florida Assisted Living Association (FALA)
12/14/2017	Association	Florida Association of Community Health Centers (FACHC)
12/12/2017	Association	Florida Council for Community Mental Health (FCCMH)
12/12/2017	Association	Florida Health Care Association (FHCA)
12/14/2017	Association	Florida Pharmacy Association (FPA)
12/7/2017	Association	Florida Rural Health Association (FRHA)
12/7/2017	Association	Leading Age Florida
1/2/2018	Health Care Facility	Adventist Health System
1/3/2018	Health Care Facility	Baptist Health System
1/16/2018	Health Care Facility	BayCare Health System
1/2/2018	Health Care Facility	Florida Hospital
12/20/2017	Health Care Facility	Martin Health System
12/15/2017	Health Care Facility	Memorial Healthcare System
12/14/2017	Health Care Facility	Nemours Children’s Hospital
12/15/2017	Health Care Facility	Orlando Health
12/13/2017	Health Care Facility	Sarasota Memorial Hospital
12/12/2017	Payer	Florida Blue (Blue Cross and Blue Shield of Florida)
12/8/2017	Payer	Molina Healthcare
12/21/2017	Payer	Palm Beach Accountable Care Organization
12/13/2017	Payer	Sunshine State Health Plan
12/15/2017	Payer	Wellcare Health Plans
12/6/2017	Provider	Community Health Centers Alliance

Date	Stakeholder Grouping	Stakeholder Detail
12/13/2017	Provider	Health Choice Network
12/8/2017	Provider	Meridian Behavioral Health Center
12/15/2017	Provider	Pediatric Associates
12/8/2017	Provider	CommunityHealth IT
1/9/2018	State & Federal Agencies	Agency for Health Care Administration (AHCA)
1/9/2018	State & Federal Agencies	Centers for Medicare and Medicaid Services (CMS)
1/10/2018	State & Federal Agencies	Florida Department of Children and Families (DCF)
12/6/2017	State & Federal Agencies	Florida Department of Health (DOH)
1/9/2018	State & Federal Agencies	Office of the National Coordinator for Health Information Technology (ONC)
12/20/2017	Vendor	Availity
12/11/2017	Vendor	Florida Accountable Care Services (FACS)
12/6/2017	Vendor	HIE Networks
1/12/2018	Vendor	Reunion Care
1/3/2018	Vendor	Strategic Health Intelligence (SHI)
12/14/2017	Vendor	SureScripts
12/11/2017	Vendor	Tampa Bay Regional Health Information Organization (RHIO)
12/20/2017	Vendor	The Sequoia Project (eHealth Exchange and Carequality)

Table 2: Stakeholder Interview Participants

c. Environmental Scan

North Highland complemented the electronic survey and stakeholder interviews with a review of the HIE landscape nationally and in other states. This research included a Literature Review, additional Stakeholder Interviews, and a Request for Information (RFI) issued by AHCA to the HIE Vendor community. The methods and outcomes of the Environmental Scan are outlined in **Section 3**.

SECTION 3 ENVIRONMENTAL SCAN

An environmental scan of current and emerging trends in public policy and technology innovations was conducted to help inform the future state of HIE in Florida. The environmental scan's approach encompasses both an internal and external view of the HIE landscape.

The following approach and methods were used to conduct the environmental scan:

- **Stakeholder Interviews:** North Highland interviewed stakeholders with a depth of knowledge and expertise about the HIE landscape. These interviews identified general themes and common trends shaping the political and technological landscape.
- **Request for Information:** A Request for Information (RFI) was issued by AHCA to assess current capability offerings and uncover emerging trends and potential barriers. RFIs are commonly used by state agencies to gather information and input from vendors in the marketplace. AHCA issued a Request for Information (RFI) on December 12, 2017 tailored towards the HIE vendor community. The RFI included questions to assess current and potentially available HIE solution offerings and services, implementation considerations, and input on an environmental scan of emerging trends. This RFI allowed for a Q&A response and was available for 25 days to allow respondents adequate time to submit their responses.⁹ Vendors' feedback on current and emerging trends in the HIE landscape were requested from respondents and have been incorporated into the market scan assessment.
- **Literature Review:** North Highland leveraged available literature to identify trends in both the healthcare and technology landscapes that may affect HIE in Florida over the next five years. A literature review of existing academic and industry publications and best practices in other states was conducted to supplement the observations and information gathered by the Request for Information (RFI) and stakeholder interviews.

A. POLICY LANDSCAPE

The future of U.S. healthcare will involve extensive coordination across the full continuum of care. The ability to access patient information is the cornerstone of that coordination and the secure, efficient, and effective sharing and use of electronic health information will be a key component of health care delivery system reform.

⁹ AHCA RFI 005 17/18: Health Information Exchange Study, published and publicly posted on the Vendor Bid System, was open for responses between December 12, 2017 and January 5, 2018. Available at: http://www.myflorida.com/apps/vbs/vbs.www.ad_r2.view_ad?advertisement_key_num=137258.

Recent legislative and regulatory changes at the federal level have caused significant shifts in the HIE landscape nationwide. Below is an overview of the key policy trends currently influencing and affecting the HIE landscape across the state and country.

Value Based Care and Managed Care Models: Legislative and regulatory changes at the federal level surrounding health care payment and delivery models have caused significant shifts in the HIE landscape nationwide. Recent federal legislation, such as the Medicare Access and CHIP Reauthorization Act of 2015 (MACRA),¹⁰ 21st Century Cures Act,¹¹ and Medicare Shared Savings Program (MSSP),¹² have and will continue to drive the creation of new and expanded data standards, exchange requirements, and specifications across a growing number of data sources and organization types. In addition, legislative and regulatory changes to the Medicare program, such as the IMPACT Act, will also influence the standards and requirements for HIE and interoperability.

Florida's transition to a Medicaid Managed Care model has placed further emphasis and need for the enablement of HIE across the state in order to achieve and measure the benefits of such a model. Value-based care and managed care models aim to improve patient outcomes while reducing costs by paying for coordinated care across providers. The ongoing national shift toward value-based and managed care delivery and payment models is changing the healthcare landscape and this outcomes-focused health management approach is increasing the need for data exchange and interoperability across the continuum of care.

Federal Funding for HIE: Federal funding sources for HIE initiatives are also changing. In recent years, CMS has shifted focus from provider adoption and meaningful use of EHRs to the adoption and use of HIE. With the scheduled expiration of the EHR Incentive Program at the end of 2021, CMS has indicated that funding for HIE initiatives may be more appropriate through funds made available to advance Medicaid Enterprise System (MES) transformations and Eligibility and Enrollment (E&E) federal financial participation funding, which can offer 90:10 matching funds for design and development costs and a 75:25 matching funds for ongoing maintenance and operations costs.¹³ Like HITECH funding, states can leverage these existing CMS funding sources to implement solutions such as master person indexes,

¹⁰ Medicare Access and CHIP Reauthorization Act of 2015, Public Law No: 114-10 (04/16/2015).

<https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/Value-Based-Programs/MACRA-MIPS-and-APMs/MACRA-MIPS-and-APMs.html>

¹¹ 21st Century Cures Act, Public Law No: 114-255 (12/13/2016).

¹² CMS Medicare Shared Savings Program. <https://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/sharesavingsprogram/index.html>

¹³ CMS Letter to State Medicaid Directors RE: Availability of HITECH Administrative Matching Funds to Help Professionals and Hospitals Eligible for Medicaid HER Incentive Payments Connect to Other Medicaid Providers, SMD# 16-003(February 29, 2016).

provider directories, identity proofing and management, and recipient access to claims information within their Medicaid systems enterprise.

National Standards for Interoperability: Current national HIE Solutions (like the eHealth Exchange, Carequality, and CommonWell, among others) utilize existing national interoperability standards, while leveraging varied governance structures. In an effort to align the policy of national solutions, ONC has developed and recently released the long-awaited draft of the Trusted Exchange Framework and Common Agreement (TEFCA). TEFCA is a set of voluntary standards for exchange drafted by the ONC, under the direction of the 21st Century Cures Act, with the aim of creating a more uniform set of standards and expectations around exchange. The goal is to help support and achieve a higher level of Health Information Interoperability nationwide. Draft TEFCA standards were released for public comment in early 2018.¹⁴ The finalized version of the TEFCA standards, and its impact on the HIE landscape, will be something to monitor going forward.

Combatting the Opioid Crisis: The ongoing opioid abuse epidemic has sparked interest and efforts to better track and monitor the prescription of controlled substances in real-time. In Florida, the Prescription Drug Monitoring Program (PDMP) plays this role. This market scan found that some states are updating state laws and policies to help facilitate more fully integrated systems, connecting existing controlled substances monitoring databases and portals with clinicians' EHRs and existing HIT, in a more seamless way. Some states have also enabled real-time access to such information by emergency room physicians, EMTs, and public safety personnel to better combat the opioid epidemic using data and analytics as well as machine learning-type solutions. Some states are updating the scope and mission of PDMP initiatives to more holistically address the burgeoning opioid crisis. State trends, along with recent legislative efforts in Florida, should continue to be monitored.

Health Consumerism and Patient Access: The delegation of data control to the individual patient is another emerging trend in the health care marketplace. As health care reform continues, it is likely that the individual will be asked to take more responsibility for their health status. According to the Secretary of HHS, HIE has the opportunity to play a role with individual patients by providing the stewardship and access for individuals' personal health data.

Medicaid Information Technology Architecture (MITA): Since CMS issued its modularity guidance to states, the Medicaid Management Information System (MMIS) market has been changing and innovating. The implementation of MITA 3.0 maturity initiatives in states' MMIS will have an ongoing impact on the standards and requirements for HIE as well as the interoperability and integration of data sharing between government agencies and among health care stakeholders.

¹⁴ The deadline for public comments on the Draft Trusted Exchange Framework was February 20, 2018.

Presently, AHCA is in the process of transforming the Florida MMIS and the Florida Medicaid Enterprise Systems (MES), which is the group of systems that execute Medicaid administrative processes, into a modular environment in alignment with MITA guidelines and requirements. The transformation of Florida’s MES MMIS to a modular system will be completed in a multi-year project with the first stage currently underway.

The scope and vision for Florida’s MES MMIS transformation project includes:

- **Technology:** Moving toward fully integrated, flexible, and modern systems that are interoperable across government agencies
- **Process:** Automating and standardizing current operations
- **People:** Providing a best-in-class user experience, providing comprehensive and concise information enabling consumers and providers to make the best decision for their healthcare
- **Governance:** Shared governance structures to drive better outcomes for all consumers

Florida’s MES MMIS transformation project is a significant undertaking and will have enterprise-wide impacts on how Medicaid, public health, eligibility, and public assistance systems in Florida interact technically and operationally. In this way, the MES MMIS transformation project will provide opportunities to help Florida toward the ideal future state of HIE, and it should be actively monitored and incorporated in efforts going forward.

B. MARKET SCAN

1. Emerging HIT Trends

Policy changes and technological innovations in the global marketplace are the driving forces behind current and emerging trends in the health care and HIE technology space. In response to the previously mentioned regulatory and policy changes, the HIE technology industry is shifting more toward solutions that can accommodate changing standards and requirements as well as new and expanded data sources and connections. **Table 3** provides a high-level overview of how health care policy shifts have, and will continue to shape and drive trends in the HIE technology marketplace.

Health Care Trend	Description
Accountable Care Organizations	Passing financial risks and reward onto providers creates a need for deeper and advanced analytics capabilities. Emphasis on increased coordination and effective management of outcomes/performance data through advanced analytics with focus on reducing waste and duplication.

Health Care Trend	Description
Value Based Care	The coordination of care needed to provide value based care has led to a rising need to proactively measure and manage desired outcomes through real time, accessible, and analytically-focused data. Emphasis on integrating data, transforming data into analytics, and analytics-enabled decision-making capabilities.
Retail Analytics in Health Care	There is a rise in the use of Retail Analytics to measure provider and Health Plan performance using traditional retail metrics. Rising demand for technologies that allow for layering different data sources to derive predictive or prescriptive insight at the individual consumer level. Emphasis on technology infrastructures and governance structures needed to enable this, such as a centralized data repository and data governance.
Consumerism in Health Care	Health Care Consumerism is a rising and ongoing movement that advocates patients' involvement in their own healthcare decisions and greater access to their data. Emphasis on greater integration of patient's health records, provider data, and other information to provide such access and involvement.

Table 3: Healthcare-Driven Technology Trends

The market scan also found that the HIE technology landscape and HIE-related technologies are shifting and increasingly moving toward solutions and offerings that feature the following traits and attributes:

- Flexibility
- Workflow embedment
- Patient-centric services
- Real-time data access and analytics
- Cloud-based services
- Open- and API-based interfaces
- Integration of many types of data sources
- Data-enabled performance management and data exchange that enables outcomes-based decision making
- Standardization of exchange

Table 4 presents select HIE technology trends that were identified during the market scan analysis and the benefits they may potentially provide to the HIE community in meeting emerging needs.

Technology/Trend	Potential Benefits
Modularity	<ul style="list-style-type: none"> Access to best of breed and increased innovation Increased vendor competition Faster realization of module specific benefits
Web Services	<ul style="list-style-type: none"> Standardizes communications for data exchange and processing services Reuse improves processing consistency
Service Oriented Architecture	<ul style="list-style-type: none"> Increased processing consistency Reuse of technical and business services Faster, lower cost application maintenance
Cloud-Based Technologies	<ul style="list-style-type: none"> Reduced security vulnerability and administration Faster disaster recovery/business continuity Reduced infrastructure and hosting cost Increased scalability to increase capacity
Open Application Programming	<ul style="list-style-type: none"> Reduces complexity for modules to reuse proprietary processing services Reduces dependence on proprietary services
Commercial Off-the-Shelf Technologies	<ul style="list-style-type: none"> Faster implementation of standardized processing Evolving product capabilities Development and maintenance costs leveraged by multiple customers

Table 4: Select HIE Technology Trends

2. Market Solutions

While health information technology, including HIE, will continue to change, evolve, and innovate over the coming years, the following HIE solutions were identified in the responses to the Request for Information (RFI) by some stakeholders as being of particular interest for exploration going forward.

a. Master Patient Index (MPI)

A Master Patient Index (MPI) is used to accurately match patient information and health records across health care settings, providers, and geographies to obtain a fuller picture of that patient’s health record. MPIs play a foundational role in many of the HIE solutions available. Several different types of patient matching algorithms can be developed, including probabilistic, deterministic, and referential matching. Several traditional MPI solutions are currently being offered in the marketplace and include more flexible MPI options, such as cloud-based (SaaS) MPIs and Enterprise MPIs (EMPI) that can either operate as a standalone MPI or augment existing MPI structures.

b. Alerting and Notification Services

Alerting services provide real-time notifications to payers, providers, and care teams when a patient has an admission, discharge, or transfer health care event. The market scan found that alerting services in

the HIE marketplace are moving toward enabling two-way notifications across a larger set of health care providers and settings, including hospitals other than the admitting site, Emergency Departments, Skilled Nursing Facilities, Home Health Agencies, and other healthcare facilities. This expansion allows for patient follow-up and improved health outcomes in the appropriate care settings (e.g., prevention of unnecessary hospital readmissions). Such services enable real-time patient identification and event tracking to support risk assessment, care team aggregation, and provider collaboration across the health care continuum. To support this functionality, these alerting services required some form of data aggregation or a data repository.

The market scan found a trend towards specialization. Several specialty HIE services targeted the unique needs of long-term, post-acute care patients and facilities. As an example, solutions exist which allow providers to track and receive information about their patients in post-acute setting. By allowing more proactive patient management to especially at-risk populations, this functionality helps improve post-acute outcomes and reduce spending.

Another trend uncovered from the market scan was the use of bidirectional exchange, utilizing notifications as triggers for communication. Some of the services identified provide two-way care coordination between the care team and the admitting site so that they can align resources, apply timely interventions, and provide patient-centric care.

c. Central Data Repository (CDR)

Centralized data repositories (CDRs) are used to aggregate and combine clinical information from multiple EHRs across organizations and communities, and other types of information (such as claims data from payers and patient-generated data from devices), to form and provide a comprehensive, longitudinal patient record. CDRs observed in the marketplace included those using the data repository model or servicing a data repository held elsewhere. CDRs offer Platform as a Service and Software as a Service (PaaS/SaaS) models, among others. Additional applications and services can be enabled by a CDR, such as risk assessment, advanced analytics, population health management, and real-time decision support at the point of care.

d. HIE Integration Services

The current marketplace offers a variety of health information technology and system integration services across the continuum of care. Several solutions offer vendor agnostic, third-party integration of HIE solutions with currently deployed HIEs.

Of note, HIE integration solutions for controlled substances monitoring have emerged in the marketplace. Vendors offer a suite of PDMP solutions tailored to a states' prescription drug monitoring system to integrate it with a provider's existing HIT systems to improve workflow integration and provide the state with end-to-end visibility into the existing system and database. An example of such a solution is embedding controlled substances data and alerts directly into the patient chart or pharmacy point-of-sale interface using open APIs, and other modern standards, such as FHIR.

SECTION 4 IDEAL FUTURE STATE

The vision and definition for the ideal future state of HIE in Florida was developed with robust input and collaboration with stakeholders from across the state and is inclusive of all stakeholder groupings. As discussed in **Section 2**, the definition and vision for the ideal state of HIE in Florida was developed through Strategic Visioning Sessions which were inclusive of all stakeholder groupings. From the Visioning Sessions, it was evident that there is an inconsistent vision for HIE in Florida, often varying between stakeholder groupings. Stakeholders expressed a desire to create a common vision to help drive HIE initiatives and increase adoption and utilization of HIE activities across the state. Throughout the HIE Study, common ideals were identified to craft a unified vision for HIE in Florida.

A. DEFINING THE IDEAL STATE

Exhibit 4-1: HIE Ideal State defines and details the vision for the ideal state of HIE in Florida. This ideal state, in coordination with the Strategic Initiatives, Action Plans, and five-year Roadmap included in this document, work together for a unified vision for the ideal state of HIE in Florida.

The categories comprising the HIE Ideal State and Vision, as shown in **Exhibit 4-1**, are defined as follows:

- **Vision of HIE in Florida:** The statement that defines the core purpose of the organization. It is used to inspire change, is long-term in nature, and is easily understood and communicated, but never fully realized.
- **Mission of HIE in Florida:** The statement that defines what should be accomplished. The mission statement is not abstract, it should be a tangible view of the future state.
- **Goal of HIE in Florida:** What must be achieved to successfully realize the vision.
- **Strategic Objectives:** Specific outcomes associated with the goal expressed in measurable terms.
- **Strategic Initiatives:** Planned actions, or steps, the Agency must take to achieve the goals and strategic objectives.

Vision of HIE in Florida	Mission of HIE in Florida	Goal of HIE in Florida	
Ensure the health and well-being of individuals and communities through the use of technology and relevant health information that is accessible when and where it matters most.	Better Health Care for All Floridians	For electronic personal health information to be available where and when it is needed across organizational, vendor, and geographical boundaries for patient care and public health.	
Strategic Objectives			
Increase Access Improve access to the right information, by the right people, at the right time	Decrease Cost & Complexity Reduce the costs and complexities that serve as natural barriers to entry and expansion of exchange	Employ Interoperability Employ the ability of various technology systems and software to communicate, exchange data, and use the information that has been exchanged	Improve Culture Evaluate, understand, and engage shifts in stakeholders' attitude towards technology to embrace its capabilities, agility, and full span of benefits
Strategic Initiatives			
Structure Statewide HIE Governance	Motivate & Encourage Exchange	Increase Awareness and Engagement	
A structured governance representative of all HIE stakeholders will establish confidence in the process and programs, and proactively address cultural issues that exist within the healthcare landscape.	Leveraging existing health information exchange capabilities, capacity, and resources to curate opportunities to accelerate HIE in Florida.	Combat misinformation and create awareness of actual HIE capabilities and benefits. Strategically and proactively communicate and engage stakeholders to achieve understanding, buy-in, and enthusiasm.	

Exhibit 4-1: HIE Ideal State

B. DEFINING THE STRATEGIC OBJECTIVES

The Strategic Objectives included in **Exhibit 4-1: HIE Ideal State** were identified as the core components and outcomes that must be measurably achieved to reach and obtain the ideal state of HIE in Florida. The four Strategic Objectives are defined as follows:

1. Increase Access

The Increase Access strategic objective focuses on stakeholders having access to the right information, by the right people, at the right time so that they are able to provide better health care to all Floridians.

2. Decrease Cost & Complexity

The Decrease Cost and Complexity strategic objective focuses on creating a critical mass of willing stakeholders seamlessly participating in the exchange of electronic information and realizing sustainable long-term value for unique operating models that results in better health care for all Floridians.

3. Employ Interoperability

The Employ Interoperability strategic objective focuses on stakeholders leveraging the capabilities of various technology systems and software to communicate, exchange data, and use the information that has been exchanged in order to provide better health care for all Floridians.

4. Improve Culture

The Improve Culture strategic objective focuses on stakeholders' embracement of technology capabilities, agility, and full span of benefits to actively and openly exchange health information with internal and external stakeholders in order to provide better health care for all Floridians.

C. DEFINING THE STRATEGIC INITIATIVES

The Strategic Initiatives presented in **Exhibit 4-1: HIE Ideal State** were developed to address, and collectively work toward achieving the Strategic Objectives (as detailed in Section 4.B.). Strategic Initiatives are action-oriented recommendations and plans for the key tasks and activities that should be done to generate measurable outcomes that help accomplish the Strategic Objectives. The three Strategic Initiatives are defined as follows:

1. Motivate & Encourage Exchange

Leverage existing health information exchange capabilities, capacity, and resources to curate opportunities to accelerate HIE in Florida.

2. Structure Statewide HIE Governance

Optimize a structured governance representative of all HIE stakeholders to establish confidence in the process and programs, and proactively address cultural issues that exist within the healthcare landscape.

3. Increase Awareness & Engagement

Combat misinformation and create awareness of actual HIE capabilities and benefits. Strategically and proactively communicate and engage stakeholders to achieve understanding, buy-in, and enthusiasm.

SECTION 5 RECOMMENDATIONS

In this section, each Strategic Initiative (as presented in Section 4.C) is outlined in further detail with the achievable recommendations and associated key tasks that will collectively address the gaps, barriers, and continuances identified in the As Is assessment.

Action Plans were also created to assist in the development and implementation of the recommended key tasks and activities. Each Action Plan contains a summary and high-level outline of the key tasks and activities associated with the Strategic Initiative, as well as, avoidable risks, success enablers, financial considerations, and affected stakeholders.

A. MOTIVATE & ENCOURAGE EXCHANGE

The Motivate and Encourage Exchange Strategic Initiative seeks to help achieve the vision and goal for HIE in Florida by *leveraging existing* health information exchange capabilities, capacity, and resources to *curate opportunities to accelerate* HIE in Florida.

This initiative works toward the Ideal State by addressing the following Strategic Objectives (as defined in the **Exhibit 4-1: HIE Ideal State**):

- Employ Interoperability
- Decrease Cost and Complexity
- Increase Access

The following categories of tools, policy levers, and best practices were identified as means to accomplish this strategic initiative:

- Existing regulatory authorities
- Inter-agency agreements
- Funding opportunities
- Leveraging existing programs, resources, and technologies
- Collaborative efforts across the government landscape

1. Action Plan - Overview

The Action Plan outlines the key tasks that should be considered and incorporated in any plans or efforts made toward accomplishing a strategic initiative. The Action Plan, shown in **Exhibit 5-1**, highlights the core components and critical considerations for efforts focused on, and related to, leveraging existing health information exchange capabilities, capacity, and resources to curate opportunities to accelerate HIE in Florida. An Action Plan was developed based on the As Is current state assessment of the gaps, barriers, and continuances, and related remedies.

Goal: Motivate & Encourage Exchange

This Action Plan is focused on working to achieve the vision and ideal state for HIE in Florida by leveraging existing health information exchange capabilities, capacity, and resources to curate opportunities to accelerate HIE in Florida.

Key Tasks & Considerations

- **Optimize Federal Funding** – Continue to explore, identify, and prioritize potential federal funds with opportunities to assist entities and organizations in overcoming difficult barriers and gaps.
 - 90:10 matching funding
 - Legislative appropriations and procurement authority
- **Align Incentives & Behaviors** – Explore potential incentive programs and funding opportunities that incentivize and support the adoption and meaningful utilization of HIE.
 - Pilot programs
 - Community and vendor partnerships
- **Intra- and Inter-Agency Collaboration** – Structure collaboration within, and among, state government agencies, particularly public health and health and human services-related agencies.
 - Public Health and DOH Collaboration
 - Medicaid-related Agency Collaboration
- **Leverage Existing HIE Capabilities** – Explore and identify opportunities to leverage and enhance existing HIE capabilities and capacity to provide additional value.
 - National HIE Platforms & Real-time Notifications
 - Care Coordination
 - Syndromic Surveillance Activities
 - Opioid Overdose Alerting
 - Emergency Preparedness

Avoidable Risks

- Differing levels of HIE knowledge across stakeholders can yield varying desires for collaboration and coordination
- Duplicative efforts related to parallel work within AHCA and across other government agencies

Success Enablers

- Strong organizational leads and support of such efforts across the landscape/system
- Pilots are easily implemented and properly managed
- Initiatives proactively address existing cultural issues

Stakeholder Considerations

- Associations
- Health Care Facilities, including Behavioral Health and Long-Term Care facilities
- Patients
- Payers, including Medicaid Managed Care and Commercial
- Providers, including physicians and pharmacists
- State and Federal Government Agencies
 - State Agencies
 - AHCA
 - DOH
 - APD, DCF, DJJ, DOC, DOEA
 - Federal HHS Partners
 - CMS, ONC
- Technology Vendors

Financial Considerations

- Capacity and timing of Federal funding opportunities
- Additional internal administrative resources potentially required
- Potential outsourced business process or IT capability support
- Potential funding coordination needed across revenue streams and authorities
- Adaptability of existing procurement and funding distribution processes and procedures

Milestones/Timeline

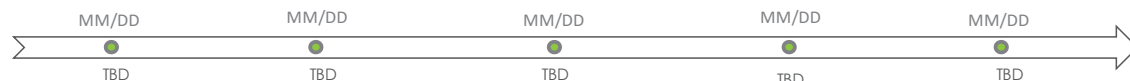


Exhibit 5-1: Motivate & Encourage Exchange Action Plan

2. Action Plan – Key Tasks

The following section provides a detailed discussion of the Key Tasks and Considerations presented in **Exhibit 5-1: Motivate and Encourage Exchange Action Plan**.

a. Optimize Federal Funding

A key task for this strategic initiative is the continued and enhanced exploration, identification, and development of opportunities for federal funding, particularly 90:10 matching funds for HITECH initiatives. Given federal regulatory shifts, these efforts should be more aggressively pursued, particularly as traditional funding for HIE initiatives under the EHR Incentive Program phases out over the next three years. A concerted and dedicated effort to identify and monitor existing and potential funding sources from across Federal HHS Agencies should be started as a way to optimize and leverage existing resources to promote the goals and vision of HIE in Florida. Additionally, AHCA should continue and enhance its promotion of existing funding opportunities, such as those to assist with HIE onboarding and integration efforts.

Exploration, identification, and development of funding opportunities should be pursued to assist specific types of entities that face unique gaps and barriers to HIE adoption and/or utilization. One example includes exploring incentives and funding opportunities to support larger entities' establishing and providing connections for smaller entities in their communities to their networks of existing connections.

Legislative appropriations and any procurement authority needed at the state level, is an important component to securing the requisite matching funds and authorities, needed to support such opportunities. Working with and across stakeholders, government agencies, and legislative leadership in the development of new funding opportunities will increase understanding, buy-in, and enthusiasm for such efforts, which will increase the likelihood of subsequent funding and implementation.

b. Align Incentives and Behaviors

Motivating and directly encouraging exchange can be a powerful tool when working to increase stakeholder buy-in, adoption, and utilization of HIE. Incentivizing the desired behavior (i.e., adoption and utilization) can be accomplished through several mechanisms, such as policy levers, regulatory measures, financial incentives and penalties, and even through community recognition. The behaviors and the incentives needed to best motivate each stakeholder grouping will differ throughout the healthcare community; therefore, the design, definition, and selection of such behaviors and incentive structures should be carefully crafted in a transparent and accountable manner.

A key task is the exploration for the potential use of pilot program projects and community partnerships that incentivize HIE adoption and/or utilization or address specific barriers. For

example, working with an EHR vendor to create interfaces to simplify Public Health reporting or level of care assessments for their subscribers. Another option for exploration is the potential for localized pilot projects and community or vendor partnerships that help to alleviate the technical/IT resource-related barriers to interoperability faced by smaller entities. This could include leveraging local hospital systems' IT resources and sharing with providers in their communities and other shared services concepts. The development of a statewide awards program to publicly recognize and celebrate individual healthcare facilities, vendors, and provider groups for tangibly supporting and advancing HIE and interoperability (e.g., deploying new solutions, financing connections to local providers, assisting others, especially smaller entities, in getting connected, etc.) can be a lower-cost option to help motivate and encourage exchange and leverage AHCA's role as regulator to award these individuals.

c. Intra- and Inter-Agency Collaboration

A critical task in achieving the goal and vision for HIE in Florida will be meaningful Intra- and Inter-Agency Collaboration. Concerted efforts should be undertaken to develop, support, and maintain meaningful communication, coordination, planning, and alignment among and between HHS and public health-related government agencies. Without this, it will be challenging to truly leverage existing capabilities and resources in ways that most efficiently meet and advance the goals of HIE. By identifying, aligning, and leveraging existing, in-flight, and planned initiatives across agencies, the state can not only more effectively support and advance the goals of HIE, but a myriad of other worthy goals across the state government landscape.

Department of Health (DOH) Collaboration: Specific opportunities for DOH Collaboration include leveraging the existing Interagency Agreement (MOU) between AHCA and DOH to support, promote, and fund public health efforts and initiatives that increase integration, interoperability, and enhanced connectivity between the states' public health programs and technologies with the health care community, such as public health reporting and surveillance programs, the PDMP, and County Health Departments.

Key tasks also include actively engaging, collaborating, and keeping apprised of strategic planning efforts surrounding HHS and public health-related agency technologies and/or interoperability efforts to ensure that HIE stakeholders' needs are met by such plans and projects. Additionally, inclusion of the stakeholders who interact with these agencies' systems in the design and execution of such modernization efforts will improve the efficacy and results from such efforts. Additionally, there is potential to add emergency preparedness and related efforts to the scope of the existing MOU to further facilitate the collaborative efforts between AHCA and DOH in emergency and disaster response situations.

Medicaid-related Agency Collaboration: Aside from specific collaboration with DOH, AHCA should work to engage and develop long-term, ongoing collaborative efforts with other Medicaid and health and human services-related agencies, such as the Department of Children and Families (DCF), the Department of Elderly Affairs (DOEA), and the Agency for Persons with Disabilities (APD). For example, the ongoing MES MMIS transformation project provides an opportunity for Medicaid-related Agencies to collaborate to leverage the inter-agency integration and interoperability efforts and to build upon and strengthen collaboration and coordination between state agencies long-term.¹⁵ Additionally, existing interagency agreements could be leveraged and optimized to support the goals of inter-agency collaboration and alignment as well.¹⁶

The concept of establishing or leveraging a committee, or workgroup, with representation from all HHS and public health-related government agencies, to advise on the development of initiatives and identification of funding sources, as referenced in Section 5.2.a., should be explored to assist with these efforts. Doing so would help support and promote the alignment of such initiatives with existing projects. It would also promote opportunities for such efforts to be optimized to meet common goals, which would make them more impactful for all of these agencies and would help create efficiencies across the state government landscape.

An important part of intra- and inter-agency collaboration is achieving an enterprise-wide information management strategy when exploring and/or pursuing opportunities to leverage and/or enhance existing HIE capabilities, such as those falling under the Florida HIE, as they are relevant to the MES MMIS transformation project and the Medicaid Enterprise as a whole. Examples of the components within an enterprise-wide information management strategy include: Data Governance; Master Data Management; Data Quality and Integrity; Meta Data Management; Analytics; Reporting; Data Security and Privacy; Data Sharing and Integration; and, Data Standards.

d. Leverage Existing HIE Capabilities

Leveraging established and existing HIE capabilities and services to enhance their value to stakeholders is another method of motivating and encouraging exchange in support of the vision and mission for HIE in Florida. Regularly surveying stakeholders who interact with existing systems and services is a key task in leveraging existing capabilities and finding opportunities to

¹⁵ A potential opportunity is for the inclusion and representation of a HITECH resource as part of the MES MMIS transformation project's interagency and interoperability efforts.

¹⁶ For example, Ch. 408.302, *F.S.*

improve efficiencies and/or add value. One way to enhance the value of existing capabilities across the board is to analyze and map the stakeholder experience with existing services, also known as journey mapping, in order to find improvements and opportunities within existing technologies and systems. Such processes identify quick ways to improve existing capabilities.

While this study has worked to identify the current state of HIE capabilities and capacity, it is equally important for AHCA to build upon these recent surveys and assessments to further deepen understanding of current capabilities and capacity when developing and identifying potential opportunities. This will be a critical component in creating effective and cost-efficient solutions.

The current Florida HIE efforts underway can provide an important foundation for some of the potential opportunities identified in the To Be assessment. Existing functionality of the Florida HIE should be continued and built upon, and includes:

Enabling National HIE Platforms: The Florida HIE's ongoing efforts to create and enable a State Gateway and 'on-ramp' connection to the national query-based HIE, the eHealth Exchange, was identified as a key opportunity to leverage existing infrastructure to increase adoption of HIE in Florida. These efforts to promote interoperability through National HIE platforms should continue. Stakeholders mentioned the ongoing National HIE efforts as a feasible solution to more easily connect the regions across Florida with one another without disrupting regional HIE preferences and health information technologies already in use in these areas.¹⁷ The State Gateway to the eHealth Exchange can also be utilized to facilitate access to clinical information in a declared emergency.

Real-time Notifications: Real-time encounter notification through the Florida HIE's existing Encounter Notification Service (ENS) was mentioned by stakeholders as an easily deployed care coordination tool in a variety of healthcare environments. Exploring opportunities where the existing ENS infrastructure could be leveraged to further enable and enhance real-time notification and access to clinical information by providers, payers, and public health and emergency personnel is encouraged.

¹⁷ The State Gateway is a connection to the eHealth Exchange, developed and maintained by a third-party vendor, intended to serve as an intermediary for organizations that do not wish to connect directly to the eHealth Exchange. Organizations connected to the State Gateway will be able to exchange data with both eHealth Exchange nodes and other State Gateway nodes.

i. Opportunities for Enhancement

The following were identified as opportunities for enhancement of existing HIE capabilities falling under Florida HIE's purview.

Enhanced Care Coordination: A key opportunity identified by stakeholders was the continued exploration and pursuit of opportunities to leverage the Florida HIE's ENS to further meet stakeholder needs. To provide additional value to ENS subscribers, efforts to enhance care coordination, such as expanding the ENS subscriber base to different types of providers like LTPAC facilities, should be continued and expanded. Expansion and diversification of ENS data sources should also continue to be explored. Other options mentioned by stakeholders include leveraging ENS to provide alerts to AHCA on Medicaid patients' hospital encounters, and potentially leveraging the existing ENS Master Patient Index (MPI) to cover additional lives enrolled the Medicaid program. Currently, the ENS MPI provides identity management resolution for 75% of Medicaid Managed Care lives.

Coordinate with Syndromic Surveillance Activities: Another potential option mentioned by stakeholders was to leverage existing ENS infrastructure to enhance the syndromic surveillance activities falling under the purview of the Department of Health (DOH). DOH currently receives data feeds from Hospitals for Syndromic Surveillance purposes. ENS could be leveraged by DOH to compliment this data for specific use cases, such as: automated birth reporting for newborn screening; reporting newborn heart defects; Zika reporting; and, re-engagement into care for patients with HIV and other chronic diseases, among other disease specific use cases.

Opioid Overdose Alerting: The existing ENS infrastructure could be leveraged to provide opioid overdose notifications. Utilizing ADT data provided by hospitals to identify reportable cases of opioid overdose as soon as a diagnosis is coded would enable near real-time notifications of overdoses. Real-time overdose notifications to identify overdose-related complaints or specific markers, could then be routed to a pre-specified recipient that an overdose likely occurred.

Emergency Preparedness: There is potential to leverage the Florida HIE's existing infrastructure to support Emergency Preparedness efforts and help facilitate Emergency Preparedness and Response by enabling real-time access to health information in emergency situations. Given the hurricane-prone nature of Florida, stakeholders expressed significant interest in finding ways to provide these types of services during emergency and disaster situations. The following are specific opportunities where enhanced capabilities could support and facilitate emergency and disaster response efforts:

- a. **Family Reunification Efforts:** Existing ENS capabilities could be leveraged to search for information about the location of missing persons during an emergency. Such Family Reunification efforts would give authorized emergency response personnel remote access to a temporary statewide hospital census during declared emergencies. For

example, in Florida during Hurricane Irma, ADTs were aggregated to create a temporary repository for locating missing persons who may have been registered in an Emergency Department or admitted to a hospital. As part of this effort, authorized personnel at shelters and other locations could enter data into the system, further facilitating location of missing persons.

- b. **Patient Unified Lookup Service for Emergencies (PULSE):** Building on existing eHealth Exchange (and State Gateway) connectivity, PULSE is an opportunity to provide authorized emergency response personnel and health care providers remote access to clinical records during declared emergencies. PULSE is designed to provide the interconnectivity to enable provider organizations and healthcare professionals to query and view patient documents during disaster situations and federates queries and patient document requests to all those connected to it.

The key tasks and activities outlined in this section lay the foundation to begin moving forward with the Motivate and Encourage Exchange Strategic Initiative. **Section 6** details a Roadmap which can be leveraged as a guide when planning and scheduling the initiation and management of the initiative. Timelines are approximate and should be reevaluated as needed based on resource capacity and other constraints/opportunities.

B. STRUCTURE STATEWIDE HIE GOVERNANCE

The Structure Statewide HIE Governance Strategic Initiative seeks to help achieve the vision and goal for HIE in Florida by *optimizing* structured statewide governance representative of all HIE stakeholders to *establish confidence* in the process and programs, and *proactively address* cultural issues that exist within the healthcare landscape.

This initiative works toward the Ideal State by addressing the following Strategic Objectives (as defined in the **Exhibit 4-1: HIE Ideal State**):

- Decrease Cost and Complexity
- Employ Interoperability
- Improve Culture
- Increase Access

The following categories of tools, policy levers, and best practices were identified as means to accomplish this strategic initiative:

- Existing relationships, leadership, and partnerships across the HIE community
- Existing statutory and regulatory authority
- Inter-agency agreements
- Existing governance structures
- Convening and facilitating stakeholders

1. Action Plan – Overview

The Structure Statewide HIE Governance Strategic Initiative Action Plan was developed based on the As Is Assessment of the gaps, barriers, and continuances, and remedies relevant to this initiative.

This Action Plan outlines the key tasks that should be considered and incorporated in any plans or efforts made toward accomplishing a strategic initiative. This Action Plan, shown below in **Exhibit 5-2**, highlights the core components and critical considerations for efforts focused on, and related to, creating an enhanced statewide governance structure surrounding HIE in Florida.

Goal: Structure Statewide HIE Governance

This Action Plan is focused on optimizing structured statewide governance, representative of all HIE stakeholders, to establish confidence in the process and programs, and proactively address cultural issues that exist within the healthcare landscape.

Key Tasks & Considerations

- **Assess & Define HIE Governance Roles** – Assess and define the role of governance in guiding and giving direction to HIE initiatives across the state of Florida.
 - *Define role types: Accountability, Advisory, and Advocacy*
 - *Consider and assess types of governance boards: Informational, Advisory, Mixed, and Decision Making*
- **Optimize Existing HIE Governance Structure** – Enhance existing statewide governance structures to better meet the needs, gaps, and barriers identified by stakeholders.
 - *Engage stakeholders to enhance existing governance structures and ad hoc workgroups: HIECC, Legal Work Group, and HIE Alliance*
 - *Update and modify Governance responsibilities, processes, policies, procedures, and membership as necessary*
 - *Clearly articulate Governance Structure, Roles, and Expectations to achieve stakeholder understanding, buy-in, and enthusiasm surrounding statewide HIE governance*
 - *Use Organizational Change Management to incorporate optimizations into existing workflows and business processes as appropriate*

Avoidable Risks

- Committee activities competing with existing responsibilities of key members
- Not achieving the balance between the right number of stakeholders and the right type of stakeholders needed
- Without clearly defined roles, processes, and appropriate/dedicated follow-through, this initiative is unlikely to succeed

Success Enablers

- True representation of all stakeholders
Demonstrating collective buy-in from all stakeholders will be a key first step toward engaging stakeholders and building trust across the HIE landscape
- Leveraging governance members to broaden the reach and effectiveness of other HIE initiatives
- Transparency, accountability, and clarity throughout all governance activities

Stakeholder Considerations

- Associations
- Health Care Facilities, including Behavioral Health and Long-Term Care facilities
- Patients
- Payers, including Medicaid Managed Care and Commercial
- Providers, including physicians and pharmacists
- State and Federal Government Agencies
 - State HHS Agencies
 - AHCA, DCF, DOH, DJJ, DOC, DOEA, APD
 - Federal HHS Partners
 - ONC, CMS
- Technology Vendors

Financial Considerations

- Funding of HIE Strategic Roadmap initiative and activities
- Additional internal administrative resources potentially required
- Funding for additional resource needs, or specialty resource needs
- Funding related to travel and other engagement-related costs

Milestones/Timeline

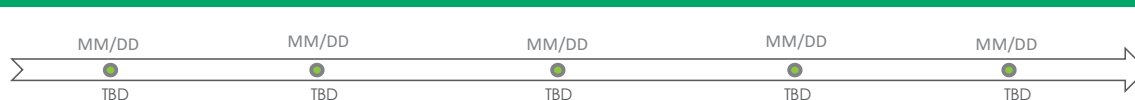


Exhibit 5-2: Structure Statewide HIE Governance Action Plan

2. Action Plan - Key Tasks

The following section provides a detailed discussion of the Key Tasks and Considerations presented above in **Exhibit 5-2: Structure Statewide HIE Governance Action Plan**.

a. Assess & Define HIE Governance Roles

This key task addresses the holistic evaluation and strategic planning process for determining and defining the types and scopes of roles statewide HIE governance structure(s) should have in guiding and providing direction to HIE initiatives across the state of Florida. Governance structures can take a variety of forms, but they should be dictated by and formed around the roles that the governance body has been tasked to fulfill.

Below is an overview of the existing statewide HIE governance structures identified during the HIE Study, and current roles, responsibilities, and membership composition:

State Consumer Health Information and Policy Advisory Council:¹⁸ State Consumer Health Information and Policy Advisory Council is established by Florida Statute¹⁹ to assist the Agency in reviewing the comprehensive health information system, including the identification, collection, standardization, sharing, and coordination of health-related data, fraud and abuse data, and professional and facility licensing data among federal, state, local, and private entities and to recommend improvements for purposes of public health, policy analysis, health information exchange and transparency of consumer health care information. The composition, representation, and functions of the Advisory Council are established by Florida Statute, as described in Ch. 408.05(6), *F.S.*, and Ch. 408.061, *F.S.*

According to Florida Statutes, Chapter 408.05(6), the Advisory Council's duties and responsibilities include, but are not limited to, the following:

1. To develop a mission statement, goals, and a plan of action for the identification, collection, standardization, sharing, and coordination of health-related data across federal, state, and local government and private sector entities.
2. To develop a review process to ensure cooperative planning among agencies that collect or maintain health-related data.
3. To create ad hoc issue-oriented technical workgroups on an as-needed basis to make recommendations to the council.

¹⁸ <http://ahca.myflorida.com/SCHS/CommiteesCouncils/chis.shtml>

¹⁹ Ch. 408.051(6), *F.S.*

Health Information Exchange Coordinating Committee (HIECC): HIECC is one of the ad hoc issue-oriented technical workgroups formed under the statutory authority of the Advisory Council.²⁰ HIECC provides guidance to the Agency as it develops and implements specific programs for the statewide health information exchange network, the adoption of electronic health record systems, and ensuring the privacy and security of health information.

The following is a list of the groups represented by the current membership of the HIECC:

- AHCA and Florida Medicaid
- Associations supporting HIE/EHR
- Clinical Informatics organizations
- Consumer Populations
- Health Insurance Plans and Companies
- HIT Privacy and Security Law organizations
- Hospitals Utilizing HIE/EHR
- Physicians Utilizing HIE/EHR
- Regional Health Information Exchanges

Health Information Exchange Legal Work Group: The Legal Work Group is a sub-group under the HIECC. The Legal Work Group meets to discuss general topics relating to legal policies for health information exchange including provisions of a participation agreement and other subscription agreements for health information exchange.²¹

The following is a list of the groups represented by the current membership of the Legal Work Group:

- AHCA
- Florida Department of Health
- Associations representing health care facilities
- Legal representatives and law firms with expertise in health information technology
- Associations representing health care professionals
- Associations representing Community Health Centers and Community Mental Health Centers

HIE Alliance: The HIE Alliance was convened in early 2018 by independent organizations connecting to or planning to connect to the eHealth Exchange. It serves as an informal alliance of community stakeholders coming together to guide the course of health information exchange in Florida. The Alliance supports policy alignment and builds best practices between participants,

²⁰ <http://www.fhin.net/committeesAndCouncils/hiecc.shtml>

²¹ <http://www.fhin.net/committeesAndCouncils/lwg.shtml>

and helps support and solidify Florida's unified presence in the national and state HIE landscape by bringing together Florida organizations utilizing the eHealth Exchange and other HIE platforms that support interoperability. The group is comprised of regional HIEs, hospital systems, and other provider groups with HIEs committed to the pursuit of interoperability.

Types of Governance Roles

There are a variety of roles that a statewide public HIE governance structure could assume. Most can be fitted into the following broad categories:

1. Accountability Role

The Accountability category refers to oversight and regulatory-type governance roles. Direct oversight, direction, evaluation, and approvals of HIE initiatives would fall under this category.

Examples of potential governance activities that would fall under the Accountability category include:

- Oversight of Florida HIE activities and execution
- Oversight of Florida Center strategic plans and execution
- Establish stakeholders' confidence in the process and programs
- Evaluation and roadmap/strategy refreshes

2. Advisory Role

The Advisory role category refers to governance roles where recommendations for improvements and changes in support of new initiatives are solicited from members. Proposals and work products are submitted for review and input, but not necessarily approval. This Advisory role would primarily be involved in guiding HIE initiatives across the state of Florida, rather than directing them and has less accountability and oversight authority than the Accountability role.

Examples of potential governance activities that would fall under the Advisory category include:

- Review, input, and informal sign-off on a common definition for HIE
- Provide recommendations for specific initiatives
- Support and advise on dedicated projects

3. Advocacy Role

The Advocacy role category refers to roles where those in governance leadership roles serve as the champions for the work. They help promote, grow, and strengthen new and ongoing efforts and builds stakeholder support, buy-in, and enthusiasm within their own relationship networks and communities for such efforts where recommendations for

improvements and changes in support of new initiatives are solicited from members. Proposals and work products are submitted for review and input, but not necessarily approval. While the Advocacy role does not directly involve oversight or guidance roles, some form of accountability or advisory-type role must be incorporated into the governance structure to produce effective advocacy roles within it.

Examples of potential governance activities that would fall under the Advocacy category include:

- Build trust among stakeholders by identifying and tackling cultural issues
- Leveraging members to ‘push out’ HIE initiatives and efforts (e.g., members can push out to broader audience and cast wide net for outreach and engagement efforts)
- Help build and expand HIE Champions network and partnerships
- Engage communities, and leverage relationships and resources to support and build confidence in efforts
- Support and advocate for legislative proposals, appropriations, funding requests, etc.

It is important that all three of categories of roles be considered when evaluating, assessing, and determining the appropriate and optimal structure for statewide governance of HIE in Florida. Best practice dictates that governance structures should have some blend and combination of all three types of roles, in addition to strong leadership and adequate staffing resources and capacity to follow through on the roles given to members of the governance structure.

Types of Governance Boards

Governance structures can include varying types of governing bodies that are comprised of a variety of roles. **Exhibit 5-3** below categorizes common governance board types and outlines the key responsibilities, pros, and cons of each. AHCA should assess and identify where their current governance structure falls based on current responsibilities and characteristics, and compare that with the optimized, or ideal, governance structure they determine is most appropriate for statewide HIE governance boards going forward.

	INFORMATIONAL	ADVISORY	MIXED	DECISION MAKING
KEY RESPONSIBILITIES & CHARACTERISTICS	<ul style="list-style-type: none"> Agenda is informational only; limited visibility/knowledge of true decision needs No advice provided No decisions made Decision making is independent of participation on board Limited/no representation of key stakeholders for enterprise decisions 	<ul style="list-style-type: none"> Act as sounding board Advisory committee provides a perspective on key decisions Offer nonbinding advice Project or topic oriented Flexible in membership and duration Usually includes Subject Matter Experts 	<ul style="list-style-type: none"> Combination of decision making and advising members (voting/non-voting) Often 51% of vote is controlled by one key decision maker May include Subject Matter Experts to provide point expertise on specific topic 	<ul style="list-style-type: none"> Group has high understanding of the organization and is deeply vested in it Typically includes senior management May include independent members
PROS	<ul style="list-style-type: none"> Maximum flexibility for decision maker Lowers number of barriers for decision maker 	<ul style="list-style-type: none"> Decision maker is able to receive advice from experts Minority opinion is represented 	<ul style="list-style-type: none"> Maximum flexibility in types of topics and diversity membership 	<ul style="list-style-type: none"> Strong sense of accountability Strong link between strategy and operations
CONS	<ul style="list-style-type: none"> Decisions often made without full organizational buy-in Low accountability for outcomes Decisions may be misaligned with HQ objectives 	<ul style="list-style-type: none"> Decisions are often made without full organizational buy in Limited accountability 	<ul style="list-style-type: none"> Division of roles and responsibilities may result in power struggle/low buy in 	<ul style="list-style-type: none"> Less diverse and representative input




Exhibit 5-3: Common Types of Governance Boards

b. Optimize Existing HIE Governance Structure

Optimization and enhancement of the existing HIE governance structure is an important part of facilitating movement toward the ideal state of HIE in Florida. The existing governance structures, such as the HIECC, Legal Work Group, and HIE Alliance, should be leveraged when evaluating options to optimize and enhance the governance structure, and any changes should also be done in accordance with existing statutory and regulatory authorities.

The organizational structure of statewide HIE governance should be designed to maximize stakeholder engagement and improve perception and awareness of HIE. The governance structures outlined in **Exhibit 5-3** should be considered and used to determine how to most effectively enable efficient decision-making and collaboration. Enhanced governance structures should leverage existing stakeholders and relationships to get stakeholder input. Beyond the governing bodies identified in this study, other key stakeholders should be engaged in finding the most optimal model. Such a structure could include additional or modified ad hoc issue-based or technical workgroups or informal, community-led governance efforts. Keeping in mind that structure determines function.

Once options have been identified and vetted by stakeholders, a key task would be the revision and updating of the Governance structure’s purpose and responsibilities, where the governance structure(s)’ responsibilities, policies, procedures, and membership composition are documented and defined. Transparency, clarity, accountability, and flexibility are important features to consider when updating and revising this documentation.

AHCA could further leverage this document(s) as a uniform vehicle to provide more clarity on the role of HIECC or other committee membership. In addition, the Agency should look for regular opportunities where the governance structure's responsibilities can be clarified and better communicated to its membership to ensure uniform understanding of their role and expectations as a member of that governance structure.

The following are some general recommendations and sample activities to explore when looking to further increase the engagement by the governance bodies and their membership:

- Meet once a year in person to specifically discuss strategic vision and review effectiveness of the governing body;
- Establish more formal accountability roles within each governing board, if applicable;
- Continue and enhance public forums and testimony on current topics related to HIE, particularly those addressing cultural issues;
- Create ownership over specific projects or community relationships to maximize stakeholder engagement; and,
- Leverage representative governing bodies to further communicate and advocate for HIE implementation.

Another key task for this Strategic Initiative will be the organizational change management efforts surrounding any revision or optimization of the current governance structures. Such efforts will work to ensure that stakeholders and members of the governance entities understand and buy-in to the optimization and that these optimizations are accounted for and integrated in to existing processes and workflows internal to the Agency. It is important to keep in mind that a lack of cultural buy-in, poor execution, and poor planning are the three primary roadblocks and top reasons for the failure of optimization and transformation efforts.²² Therefore, strategic planning for an optimized governance structure is critical, and stakeholder buy-in, both internal and external to the Agency, will play an important role in achieving this strategic initiative. Stakeholder engagement, education, outreach, and buy-in will be critical to the success of statewide HIE governance, and strategic communications with stakeholders and internal resources will be key.

The key tasks and activities outlined in this section lay the foundation to begin moving forward with the Structure Statewide HIE Governance Strategic Initiative. **Section 6** details a Roadmap that can be leveraged as a guide when planning and scheduling the initiation and management of the initiative. Timelines are approximate and should be reevaluated as needed based on resource capacity and other constraints/opportunities.

²² North Highland Company, Global Industry Survey, 2017.

C. INCREASE AWARENESS AND ENGAGEMENT

The Increase Awareness and Engagement Strategic Initiative seeks to help achieve the vision and goal for HIE in Florida by *combatting misinformation* and creating awareness of actual HIE capabilities and benefits, as well as *strategically and proactively communicating and engaging* stakeholders to *achieve understanding, buy-in, and enthusiasm*.

This initiative works toward the Ideal State by addressing the following Strategic Objectives (as defined in the **Exhibit 4-1: HIE Ideal State**):

- Decrease Cost and Complexity
- Improve Culture

The following categories of tools, policy levers, and best practices were identified as means to accomplish this strategic initiative:

- Existing relationships and communications channels
- Leveraging existing programs, resources, and educational events
- Information aggregation and promotion
- Educational outreach
- Convening and facilitating discussion
- Feedback and assessment tools

1. Action Plan – Overview

This Action Plan outlines the key tasks that should be considered and incorporated in any plans or efforts made toward accomplishing the Increase Awareness and Engagement Strategic Initiative. The Action Plan, shown in **Exhibit 5-4**, highlights the core components and critical considerations for efforts focused on, and related to, creating awareness and strategically communicating and engaging with HIE stakeholders across Florida.

This Action Plan was developed based on the current state assessment of the gaps, barriers, and continuances, and remedies relevant to the Increase Awareness and Engagement Strategic Initiative.

Goal: Increase Awareness and Engagement

This Action Plan is focused on combatting misinformation and creating awareness of actual HIE capabilities and benefits, as well as strategically and proactively communicating and engaging stakeholders to achieve understanding, buy-in, and enthusiasm.

Key Tasks & Considerations

- **Stakeholder Management** – Robust stakeholder engagement management and planning to address cultural issues and meet identified stakeholders’ needs.
 - Enhance Stakeholder Engagement Plan
 - Build HIE Champions Network
- **Strategically Communicate** – Strategically communicate and engage stakeholders to achieve understanding, buy-in, and enthusiasm.
 - Enhance Communication Plan
 - Expand distribution and maximize reach
- **Educational Clearinghouse** – Create a publicly available, user-friendly clearinghouse of valuable HIE information and educational resources for all stakeholders.
 - Identify and feature Use Cases, business cases, and testimonials that demonstrate the value proposition/ROI of HIE tailored different stakeholder groups
 - Identify and aggregate existing resources and toolkits
 - Provide updates and materials related to funding opportunities, technical guidance, standards for exchange, and State and Federal laws/regulations, as appropriate
 - Continue educational outreach and programming

Avoidable Risks

- Providing stakeholders with the wrong level of information that does not meet their organizational needs
- User-friendly, easy to find, the right balance among competing priorities
- Failing to keep the Educational Clearinghouse repository meaningfully up-to-date

Success Enablers

- Tailoring information to meet stakeholder needs and continually soliciting feedback from stakeholders
- Creating a standard rhythm for communication will encourage stakeholders to expect and prioritize updates about HIE
- Leveraging existing relationships, resources, and Agency assets

Stakeholder Considerations

- Associations
- Health Care Facilities, including Behavioral Health and Long-Term Care facilities
- Patients
- Payers, including Medicaid Managed Care and Commercial
- Providers, including physicians and pharmacists
- State and Federal Government Agencies
 - State HHS Agencies
 - AHCA, DCF, DOH, DJJ, DOC, DOEA, APD
 - Federal HHS Partners
 - ONC, CMS
- Technology Vendors

Financial Considerations

- Funding for additional resource needs, or specialty resource needs
- Secure long-term funding source to support initiatives
- Ensure adequate resource capability and capacity
- Funding related to travel and other engagement-related costs
- Additional internal administrative resources potentially required

Milestones/Timeline

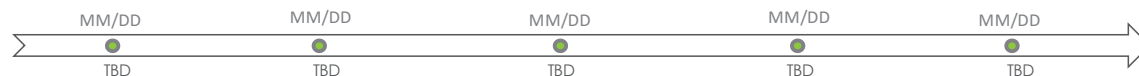


Exhibit 5-4: Increase Awareness and Engagement Action Plan

2. Action Plan - Key Tasks

The following section provides a detailed discussion of the Key Tasks and Considerations presented above in **Exhibit 5-4: Increase Awareness and Engagement Action Plan**.

a. Stakeholder Management

A key task for this strategic initiative is continuing, enhancing, and building upon the concerted efforts and strategic planning surrounding stakeholder management. Stakeholder management is the overarching umbrella that includes stakeholder identification, engagement, and relationship building activities necessary to create, strengthen, and maintain an effective and productive stakeholder network. Current and planned stakeholder engagement efforts, such as those under the AHCA 2018 HIT Outreach Plan,²³ should be continued and further enhanced to optimize results towards the ideal state and to increase the efficacy of existing resources.

Enhance Stakeholder Engagement Plan: Robust stakeholder engagement management and planning efforts should be continued and built-upon to address and focus on ameliorating existing cultural issues to meet stakeholders' needs as identified in the As Is Assessment. Key performance metrics and success factors should also continue to be identified alongside these planning efforts in order to measure progress in advancing stakeholder engagement efforts and to identify areas where current strategy and efforts need to be revisited and modified. The stakeholder engagement plan should be a flexible, living plan that is updated and revisited regularly.

A useful tool to enhance current stakeholder engagement and management efforts is stakeholder and influence mapping. Best practice dictates utilizing stakeholder mapping to better identify and understand the unique positions and needs of various groupings. For example, current and potential users of HIE are a stakeholder group positioned in an area of high impact and high interest opportunity to further promote and support efforts to increase HIE adoption and utilization across the state. Enhancing their buy-in for current and future initiatives will be a core component for the success of HIE statewide. Current stakeholder analysis can be leveraged by completing further influence mapping of the current and potential users of HIE. Mapping techniques can leverage existing communication channels and outreach by utilizing unique strategies for specific targeted groups through a more extensive understanding of HIE users and non-users/adopters.

Build HIE Champions Network: One easily implementable solution would be to more formally establish and build a network of "HIE Champions", or those who have successfully adopted and utilized HIE for their benefit, across the state of Florida. Building, maintaining, and leveraging this network will not only

²³ AHCA, "2018 Health Information Technology Outreach Plan", 2018.

increase educational outreach and stakeholder awareness with existing resources, it will also more effectively address cultural issues through the power of peer-to-peer connections. Options to leverage HIE Champions, such as convening and engaging stakeholders, hosting community roundtables, and sharing testimonials, should be aggressively pursued. The stakeholder mapping process would also be useful in identifying and strategically implementing such a HIE Champions Network as well.

b. Strategically Communicate

Continuing to strategically and proactively communicate and engage with stakeholders to achieve understanding, buy-in, and enthusiasm is a key task for this strategic initiative. Communication efforts should work to leverage and build upon the momentum created by this HIE Study and its results, using the recent stakeholder engagement to carry momentum forward to get more people more involved in HIE. Such momentum-building efforts should also include the promotion and communication of the newly defined vision and ideal state for HIE in Florida. Additional items to consider for future strategic communications include: communication of the common definition of HIE; upcoming funding opportunities; and communications surrounding national standards for exchange, as appropriate.

Enhance Communication Plan: Current communications and educational awareness outreach efforts and plans should be continued and further expanded, enhanced, and structured to optimize results and increase efficacy using existing resources. It will be important to create a rhythm for communication regarding HIE so that stakeholders expect and look forward to the Agency’s communications and updates with regular frequency. Key performance metrics should also be developed and implemented to measure progress in advancing stakeholder awareness and engagement efforts and to identify areas where the current strategy needs to be modified and adapted. The communications plan should be a dynamic document that is revisited and updated regularly.

Expand distribution and maximize reach: Taking an integrated approach to reaching HIE stakeholders, with a message that meaningfully communicates the value and vision for HIE in Florida, is a core component to strategically communicating with stakeholders.

Best practices for maximizing the reach of existing communication efforts include:

- Timely communications and information sharing;
- Clear, concise, and consistent messaging;
- Integration across communication channels;
- Consistent branding and visual appearance of communications;
- Establishing regularity and rhythm of communications;
- Leveraging trade associations and publications channels;
- Messaging and communications that are targeted and tailored towards specific HIE stakeholder groups and their information needs; and,
- Surveys and other assessment tools to gather feedback from existing subscribers.

Options to further leverage and maximize the Agency’s existing communications and distribution channels should be explored and pursued to enhance and increase the reach of such efforts using existing resources, particularly for non-Medicaid healthcare providers across the state. These efforts could include opportunities to further leverage and build upon Medicaid provider alerts and interested parties list, as well as, increase and enhance social media pushes.

While AHCA already utilizes a variety of traditional communication methods and vehicles, it could also explore other creative ways to increase the impact or appeal of their messaging, such as through rebranding efforts and other non-traditional media options like blogging.

c. Educational Clearinghouse

A key task identified for this strategic initiative is the development and creation of a publicly available, user-friendly centralized source of valuable HIE information and educational resources for stakeholders. To meet the needs, gaps, and barriers facing stakeholders, as identified in the As Is Assessment, such an educational clearinghouse should first focus on the identification, cultivation, aggregation, and promotion of:

- Use Cases, business cases, and testimonials that demonstrate the value/ROI of HIE, tailored for different stakeholder groups;
- Existing resources and toolkits, such as business case analysis tools;
- Updates and materials related to funding opportunities and State and Federal laws/regulations, as appropriate. For example, clarifications of the use of HIE beyond MU requirements;
- Updates and materials surrounding technical guidance and standards for exchange, as appropriate, leveraging the national umbrella of governance (e.g., ONC) as it works to promulgate regulations and guidance surrounding TEFCO and the 21st Century Cures Act, etc.; and,
- Continued educational outreach and programming, including webinars and educational events and seminars.

To ensure the efficacy of such an educational clearinghouse, it is important that it focus primarily on identifying and leveraging *existing* resources and keeping these resources up-to-date and easily accessible and usable by stakeholders and the public. A promising opportunity and recommendation would be to leverage the existing FloridaHealthFinder.gov website to host this educational clearinghouse. This website is an award-winning, already well-known and trusted government website that would be well positioned to host such an educational clearinghouse. Using the Florida Health Finder website would not only best leverage existing resources, it would also increase and maximize the reach and usability of the clearinghouse by healthcare providers and Florida consumers.

The efforts that are associated with developing and maintaining the clearinghouse should and could be used to build upon and enhance the other efforts mentioned in this report that seek to further build relationships and partnerships within the HIE community. In this way, the educational clearinghouse

could also serve to help support and advance the efforts of the other workstreams mentioned in this section, such as stakeholder management efforts.

The key tasks and activities outlined in this section lay the foundation to begin moving forward with the Increase Awareness and Engagement Strategic Initiative. **Section 6** details a Roadmap which can be leveraged as a guide in planning and management of this initiative. Timelines are approximate and should be reevaluated as needed based on resource capacity and other constraints/opportunities.

SECTION 6 FIVE-YEAR STRATEGIC ROADMAP

This section presents the five-year Strategic Roadmap for HIE in Florida necessary to move toward and accomplish the ideal future state of HIE in Florida. This Roadmap consists of a recommended set of activities for each Strategic Initiative, based on the Action Plans presented in **Section 5**, along with estimated timelines for completion.

This Roadmap, shown in **Exhibit 6-1**, may be used as a guide in the planning, sequencing, and management of each initiative's key tasks, activities, and milestones over the five-year timeframe. It is important to note that all estimates are in a rough order of magnitude for planning purposes, and dates and other attributes of these estimates may change as scope is refined prior to project initiation. It is recommended that the implementation of this Roadmap be iterative, with multiple workstreams being planned, implemented, and managed simultaneously to maximize the effect and success of the overall Roadmap.

HIE Proposed Roadmap (2018-2023)							
	2018 (FY17-18) (January 1 – June 30)	2018 (FY18-19) (July 1 – December 31)	2019 (FY18-19) (January 1 – June 30)	2019 (FY19-20) (July 1 – December 31)	2020 (FY19-20) (January 1 – June 30)	2020 (FY20-21) (July 1 – December 31)	2021-2023 (FY20-23) (January 1 – December 31)
0: Project Kick-off Activities	Roadmap Project Initiation						
	Define team needs and form Teams						
	Ongoing Benefits realization						
	Ongoing Project Management and Communications						
	Formal Project Kickoff ◆	Semi-annual roadmap review ◆	Semi-annual roadmap review ◆	Semi-annual roadmap review ◆	Semi-annual roadmap review ◆	Semi-annual roadmap review ◆	Semi-annual roadmap review ◆
1: Motivate and Encourage Exchange	Explore and enhance Community and vendor partnerships						
		Explore and develop potential recognition programs					
			Expand and develop Pilot programs				
				Maximize 90:10 matching funding			
				Continue, develop, and enhance MES MMIS Transformation Project Collaboration			
				Continue, develop, and structure ongoing Medicaid-related Agency Collaboration			
				Identify and Explore opportunities to enhance and/or leverage existing HIE capabilities			
				Secure Legislative appropriations and procurement authority			
				Continue and enhance Public Health Collaboration			
2: Structure Statewide HIE Governance		Asses and define governance roles, type, and structure					
			Revise and update Governance responsibilities				
				Clearly articulate Governance Structure, Roles, and Expectations			
				Perform Organizational Change Management to incorporate enhanced governance structure			
				Continue to engage stakeholders when working to enhance existing governance structures and ad hoc workgroups			
3: Increase Awareness and Engagement		Enhance Stakeholder Engagement Plan					<input type="checkbox"/> High Priority Activity
		Enhance Communication Plan					
			Identify, Enhance, and Build HIE Champions Network				
				Create a publicly available, user-friendly Educational Clearinghouse of valuable HIE information			
				Identify and feature Use Cases, business cases, and testimonials that demonstrate the value/ROI of HIE			
				Innovate and expand distribution and maximize outreach efforts			
				Identify and aggregate existing resources and toolkits, such as analysis tools, etc			
				Continue educational outreach and existing HIE educational programming			
				Enhance updates and materials related to funding opportunities, technical guidance, standards for exchange			

Exhibit 6-1: Five-Year Strategic Roadmap

SECTION 7 CONCLUSION

As collectively defined by HIE stakeholders across Florida, the vision for the ideal future state of HIE in Florida is to ensure the health and well-being of individuals and communities through the use of technology and relevant health information that is accessible when and where it matters most.

This To Be Assessment and Strategic Roadmap provides guidance on the ideal future state of HIE in Florida and helps to provide the pathway to move from the current state, as identified in the As Is Assessment, to the ideal future state of HIE across Florida. The recommendations provided in this document outline the opportunities for Florida to achieve this vision and address the gap, barriers, and continuances identified in the As Is Assessment.

Collectively, the findings, recommendations, and guidance presented in the To Be Assessment of the HIE Study, including the defined ideal state and vision of HIE in Florida, in tandem with the Strategic Initiatives, Action Plans, and the five-year Roadmap, will assist the Agency in working together with all stakeholders over the next five years toward the achievement of this unified vision for HIE in Florida.

SECTION 8 APPENDICES

1. HIE Five-Year Strategic Roadmap (large 11x17 PDF version)



180312-HIEStudy-To
BeRoadmap.pdf