

**Delaware Health Information Network
Executive Committee Meeting
Friday, December 8, 2016
10:00 a.m. –11:30 a.m.**

In-Person

**Westside Family Healthcare
300 Water Street, Suite 200
Wilmington, DE**

Meeting Minutes

I. CALL TO ORDER

Randy Gaboriault called the meeting to order at 10:02 a.m.

II. APPROVAL of September 30, 2016 MINUTES

Bill Kirk motioned for the minutes to be accepted as presented. Donna Goodman seconded the motion. Minutes were approved unanimously.

III. Management Reports

FY17 DHIN Goals

Successfully execute grant outcomes/spend down:

As of October, DHINs spend down on the first grant was thirty-nine percent. DHINs ONC grant officer was on site December 5th and December 6th and ONC is very satisfied with DHINs execution of the grant. The second grant has just started; therefore, there is currently no spend down.

One of DHINs target groups was Long Term and Post-Acute Care Organizations. Progress has been extremely slow and there has been little/no traction in engaging these organizations. DHINs grant officer stated that all HIEs are having the same issues with their LTPAC Organizations. ONC has proposed targets and metrics to remove LTPAC from the grant funding and apply those funds to assist with standing up the health claims data base.

DHIN has exceeded goals for both ENS and CCD exchange; as we continue adding more.

The supplemental grant involves on-boarding additional organizations to send ADTs, emphasizing inter-state exchange. We are in the process of onboarding two additional walk-in clinics as data senders, Newark Emergency Care and Ambient Care.

For a number of hospital affiliated walk-in clinics, DHIN is already receiving ADTs; however, they are not always uniquely identified as a walk-in clinic. We are working with hospitals to ensure they are receiving notifications and alerts when their patients are seen at the clinics.

DHIN continues pursuing an agreement with HSX (Health Share Exchange for the five southeastern counties of Pennsylvania) for inter-state exchange. The agreement with NJSHINE has been signed and we will have a kick-off within the next month. DHIN has also been in discussion with Utah and Florida; in addition to West Virginia, which is supported by CRISP.

DHIN continues contract discussions with American Well to send records of Christiana's Telehealth encounters.

Develop Governance and Technical Specs in Support of a Claims Database:

Meredith Stewart-Tweedie has been working on the by-law changes to address the governance.

DHIN's intent is to retain Freedman Consulting; Freedman has worked with sixteen All-Claims Data Bases. We are asking them to advise us on:

- Suitability of the IMAT platform to house the claims database
- Technical specifications for file formats and frequency of submissions
- Staffing plan
- Development of an SOW or an RFP

Achieve HITRUST Security Certification:

DHIN is on track to have all documentation completed for HITRUST certification by the end of December. Through March, we will work to address any deficiencies that have been identified. DHIN's application for certification will then be reviewed and we can expect notification of certification no later than June 2017.

Develop Required Provider Scorecard V2 Functionality and Four Releases:

DHIN has had difficulty receiving correct files from the payers on all releases. Version 2, Release 3 has been delayed due to incorrect data from Highmark files. We anticipate Release 3 will be out in mid-December and Release 4 is scheduled for February 2017.

During the December DCHI Executive Session, the committee will be deliberating on the future path of the scorecard.

DHIN Roadmap Tasks for FY17

- DHIN has hired Stacey Schiller as the Director of Marketing
- We are currently evaluating resumes for an Integration Analyst with Mirth Certification
- DHIN has a viable candidate for a Clinical Informaticist and are currently negotiating salary
- DHIN is also working on the position description for a Chief Innovation Officer; Randy Gaboriault has offered to advise DHIN on a recruiter that we can work with during the hiring process

Staff Development:

One of our goals is to have the entire staff certified in Information Technology Infrastructure Library (ITIL). The management team attended and passed the first session in November. There will be two additional sessions in February and March.

A Management Retreat is scheduled in early February to strategize the implementation of ITIL principles within a small organization and to outline a multi-year staff development plan.

Segmented Customer and Stakeholder Communications:

DHINs Leadership Summit is scheduled for December 16th at the Chase Center, and we will follow up with individuals in face-to-face meetings. In addition, DHIN representatives have already met with the Medical Society leadership; and are working on scheduling with the Population Health units of hospitals and key legislators.

Stand Up Formal Portfolio Management:

We are currently exploring technology tools and what would be the best path for DHIN moving forward. Gartner is assisting in determining what tools would be appropriate for an organization of our size.

Begin Technology Refresh Activities:

DHIN will not be going out with an RFP to replace Medicity; we are not looking for a single vendor solution. DHIN is breaking down activities in components, controlling the data flow, control of the data and receiving the backlog of historical data; within the next few months we should be receiving all of our historical data into an environment where we can control it. We have spent several years methodically repointing the interfaces to go through Mirth before reaching Medicity. Our pilot of Mirth Results has been very successful; DHIN will be upgrading hardware, contracting with Mirth, and creating a project plan to replace all EMR interfaces from Medicity to practice EMRs by the time our current contract with Medicity ends on June 30, 2018.

Once we receive data, we will make it available in our analytics platform. However, if we want to replace Medicity as the community health record, we will need a data repository independent of Medicity. As part of our work with consumer engagement and standing up the state wide provider portal, we will be standing up a central clinical data repository in the AWS GovCloud to communicate through fire APIs allowing us to communicate with the data through APIs to feed any other application.

Miscellaneous

Contract negotiations with United Health Care are progressing, but moving slowly. They have acknowledged they must pay and have accrued the funds, but will not pay until the contract is final.

CIGNA may be ready to execute an agreement for their members in Delaware.

This will be the last year for Highmark's contribution to DHIN. However, a recent conversation with Tim Constantine led us to the proper point of contact at Highmark enabling us to discuss the services that DHIN can provide to Highmark.

The outcome of DHINs FY16 Financial Audit will be presented to the Board of Directors at the January meeting.

IV. DHIN By-Laws:

The revision of DHINs By-Laws will also be referred to the Board of Directors at the January meeting and will be forwarded to each member approximately two weeks prior.

V. Other: Renewal of DCHI Board Member Terms

Jan Lee presented the names of three DCHI Board Members requesting renewal of their terms for an additional three years: Traci Bolander, Mid-Atlantic Behavioral Health; Alan Greenglass, Christiana Care Quality Partners; and Kathy Janvier, Delaware Technical Community College.

Dr. Lawless motioned for the approval for the renewal of terms. Tom Trezise seconded the motion. Renewal of DCHI Board member terms was unanimously approved.

VI. Next Executive Committee Meeting:

The next Executive Committee Meeting will be held on March 24th @ 10:00 a.m.

VII. Adjourn: Meeting was adjourned at 11:37 a.m.

Attendance

Executive Committee Members Present

Randy Gaboriault
Donna Goodman
Rich Heffron
Bill Kirk
Dr. Stephen Lawless
Meredith Stewart-Tweedie
Tom Trezise

DHIN

Jan Lee
Monica Horton
Ali Charowsky