



Vermont Health Care Innovation Project HIE/HIT Work Group Meeting Minutes

Pending Work Group Approval

Date of meeting: Friday, October 2, 2015, 11:00am-1:00pm, 4th Floor Conference Room, Pavilion Building, 109 State Street, Montpelier.

Agenda Item	Discussion	Next Steps
1. Welcome and Introductions	Simone Rueschemeyer called the meeting to order at 11:02am. A roll call attendance was taken and a quorum was present.	
2. Review and Acceptance of August Meeting Minutes	Simone Rueschemeyer entertained a motion to approve the August meeting minutes. Ken Gingras moved to approve the minutes by exception. Mike Gagnon seconded. The minutes were approved with two abstentions.	
3. VHCIP Reorganization	<p>Georgia Maheras discussed the VHCIP Reorganization.</p> <ul style="list-style-type: none"> • The Core Team voted to move forward with project reorganization at their August meeting. We have begun the transition by crafting new, combined workplans for each new work group, as well as soliciting membership for the new groups from current members. Workplans and participant list for new work groups are being reviewed by staff and co-chairs. The Core Team will receive these at their next meeting, in October. Project leadership is working hard to ensure full integration of the members and workplans of the Population Health and DLSS Work Groups. • This is the last meeting of this group as the HIE/HIT Work Group – the group will transition to the Health Data Infrastructure Work Group for its October 21st meeting. • The Core Team will also review and vote on draft Year 3 milestones in October, which will help us build Year 3 workplans. We hope to have a draft Year 3 workplan for every group in December for review. • Please reach out to Georgia with comments, questions, or concerns about the transition to the new governance structure. <p>The group discussed the following:</p> <ul style="list-style-type: none"> • Mike Gagnon asked whether we have a plan for completing the remaining deliverables. Georgia responded that our Year 2 Milestones remain mostly unchanged. Our 2016 milestones are up for discussion at the Core 	

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	<p>Team in October – but current drafts build on previous commitments and discussions, without any brand new projects. The reorganization realigns our governance with our milestones. Mike noted that our initial workplan included some items we haven’t addressed yet, and asked what this group’s role will be in proposing new projects and keeping up to date on existing projects. Georgia commented that sustainability of existing projects will be a big conversation project-wide in 2016. For projects that were overly ambitious or less well-defined in Vermont’s initial application, we’re revising milestones to ensure our goals are realistic for our remaining time period. Simone added that as we plan work group agendas, the Work Group’s leadership team references the workplan to ensure we’re not letting</p>	
<p>4. Brief Project Updates: Telehealth, SCÜP, DLSS Technical Assessment, Data Inventory</p>	<p><i>Telehealth (Sarah Kinsler):</i> RFP for telehealth pilots was released on September 18th; bid period closes on September 23rd. Total amount available is just over \$1 million; will fund one or more pilots. Bid review team is assembled.</p> <p><i>SCÜP (Larry Sandage):</i> Technical requirements are gathered. Project team is talking with solution providers in the coming weeks, including VITL, MMIS Care Management, and others. Technical proposal is about 50% complete; project is on track for early November.</p> <p><i>LTSS Assessment Report (Sarah Kinsler):</i> Draft report under review by SOV, is nearly complete. Hope to send to Georgia next week for finalization.</p> <p><i>Data Inventory (Sarah Kinsler):</i> Project re-launched in August. Contractor is working to complete second phase inventory of prioritized data sources and is developing findings and recommendations for final report.</p>	
<p>5. VITL/ACO Gap Remediation Status Update</p>	<p>Kristina Choquette and Mike Gagnon presented on VITL’s ACO Gap Remediation work. (Attachment 5)</p> <ul style="list-style-type: none"> • Some vendors are more challenging to connect with than others – eClinicalWorks, for example. VITL is having increased success connecting with a few major vendors, including EPIC, and improving quality of information. ONC is also increasing scrutiny of vendors that are particularly hard to work with or engaging in information blocking (or price gauging) to push them to participate. • Data quality improvement “sprints” are decreasing the amount of missing data, but the VHIE is also normalizing data within HIE workflow – terminology services are critical for this and support downstream analytics. • ACO data is only part of total VHIE data. • Still need to improve: identity matching (may add Master Patient Index in addition to Medicity). • VITL has exceeded 2015 goals for the total number of organizations connected, though it has not yet met goals around the number of beneficiaries with data flowing. Connecting a few large organizations (UVMCC) with whose systems VITL has had challenges would significantly increase the number of beneficiaries with data flowing; also, organizations subject to 42 CFR Part 2. • ACO Gateways: Good progress toward CHAC gateway. • Increased transmission of Continuity of Care Documents (CCDs) significantly compared to 2014. 	

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	<p>The group discussed the following:</p> <ul style="list-style-type: none"> • Heather Skeels suggested leveraging the UCCs to support this work at the community and practice level. Kristina responded that VITL is working with the Blueprint to maximize opportunities to connect with providers and emphasize the benefits of participation in sprints. 	
<p>6. Vermont Health Information Technology Plan (VHITP) Briefing</p>	<p>Richard Terriciano and Mosaica Partners (Laura Kolkman) presented on the Vermont Health Information Technology Plan (VHITP) project. (Attachment 6)</p> <ul style="list-style-type: none"> • VHITP provides direction for future HIT investments. • Significant stakeholder involvement: Project steering committee includes many HIE/HIT Work Group members; broader stakeholder group also provided input into plan visioning sessions. (Transparent and inclusive process is a key principle of VHITP.) • Interim project findings: Developed through visioning sessions, stakeholder interviews, and other stakeholder feedback mechanisms. Four areas of findings: health care; health information technology; connectivity/VITL; other. • Project status: Stakeholder input gathered (forums, interviews, surveys), with initial opportunities planned. Stakeholders will also have opportunities to review the draft plan before it is finalized. <p>The group discussed the following:</p> <ul style="list-style-type: none"> • The plan covers 3-5 years and will be updated annually, though some elements may not be complete at the end of 3-5 years. Laura noted that the plan needs a place to live to ensure it is updated and continues to be relevant. The plan is currently the statutory responsibility of the Agency of Administration, which has delegated this to responsibility to DVHA – the Green Mountain Care Board will have increasing involvement going forward. Mosaica will recommend a continued public-private advisory group going forward. • Mike Gagnon asked whether State systems like MMIS are included in the plan. Laura responded that the plan isn't specific to State projects – it highlights how systems work together. • The short timeline for the plan means initiatives will need to be prioritized. Laura responded that there is a process for prioritizing projects and initiatives based on stakeholder input, State priorities, and lessons from other states. 	
<p>7. Public Comment</p>	<p>There was no additional public comment.</p>	
<p>8. Next Steps, Wrap-Up, and Future Meeting Schedules</p>	<p>Next Meeting: Thursday, October 21, 2015, 9:00-11:00, 4th Floor Conference Room, Pavilion Building, 109 State Street, Montpelier.</p>	

Ken Gingras 1^o
 Mike Gagnon 2^o
 - Motion to approve by exception
 - Mtn carried - 2 abstentions

VHCIP HIE Work Group Member List

Roll Call: 10/2/2015

Member		Member Alternate		Minutes	Telehealth	SCUP Request
First Name	Last Name	First Name	Last Name			Organization
Susan	Aranoff ✓	Tela	Torrey	joined late		AHS - DAIL
Joel	Benware					Northwestern Medical Center
Richard	Boes					DII
Jonathan	Bowley					Community Health Center of Burlington
Shelia	Burnham					Vermont Health Care Association
Mike	DeiTrecco					Vermont Association of Hospital and Health Systems
Ken	Gingras ✓	Julie	Tessler			Vermont Care Network
Leah	Fuller ✓	Greg	Robinson			OneCare Vermont
Michael	Gagnon ✓	Kristina	Choquette			Vermont Information Technology Leaders
Daniel	Galdenzi	Kelly	Lange			Blue Cross Blue Shield of Vermont
Joyce	Gallimore ✓	Kate	Simmons	A		CHAC
Emma	Harrigan ✓	Kathleen	Hentcy			AHS - DMH
Paul	Harrington ✓					Vermont Medical Society
Lucas	Herring ✓					AHS - DOC
Kevin	Kelley					CHSLV
Kaili	Kuiper ✓	Julia	Shaw			VLA/Health Care Advocate Project
Steven	Maier	Jennifer	Egelhof			AHS - DVHA
Arsi	Namdar					Visiting Nurse Association of Chittenden and Grand Isle Counties
Brian	Otley ✓					Green Mountain Power
Darin	Prail	Dan	Smith			AHS - Central Office
Amy	Putnam					DA - Northwest Counseling and Support Services
Paul	Reiss					Accountable Care Coalition of the Green Mountains
Sandy	Rousse ✓	Peter	Cobb			Central Vermont Home Health and Hospice
Simone	Rueschemeyer ✓	Ken	Gingras			Vermont Care Network
Heather	Skeels ✓	Kate	Simmons			Bi-State Primary Care
Richard	Slusky ✓	Pat Kelly	Jones	Marked	A	GMCB
Chris	Smith ✓	Lou	McLaren			MVP Health Care
Eileen	Underwood ✓					AHS - VDH
	28		16			

#15 Q ✓

VHCIP HIE Work Group Participant List

Attendance:

10/2/2015

C	Chair
IC	Interim Chair
M	Member
MA	Member Alternate
A	Assistant
S	VHCIP Staff/Consultant
X	Interested Party

First Name	Last Name		Organization	HIE
Susan	Aranoff	<i>here</i>	AHS - DAIL	S/M
Joanne	Arey		White River Family Practice	A
Ena	Backus		GMCB	X
Susan	Barrett	<i>here</i>	GMCB	X
Joel	Benware		Northwestern Medical Center	M
Richard	Boes		DII	M
Jonathan	Bowley		Community Health Center of Burlington	M
Jon	Brown		HSE Program	X
Martha	Buck		Vermont Association of Hospital and Health Systems	A
Shelia	Burnham		Vermont Health Care Association	M
Narath	Carlile			X
Kristina	Choquette	<i>here</i>	Vermont Information Technology Leaders	MA
Peter	Cobb		VNAs of Vermont	M
Amy	Coonradt		AHS - DVHA	S
Alicia	Cooper		AHS - DVHA	S
Diane	Cummings	<i>here</i>	AHS - Central Office	S/MA

Becky-Jo	Cyr		AHS - Central Office - IFS	X
Mike	DelTrecco		Vermont Association of Hospital and Health Systems	M
Chris	Dussault		CVAA	X
Jennifer	Egelhof		AHS - DVHA	MA
Nick	Emlen		DA - Vermont Council of Developmental and Mental Health Serv	M
Gabe	Epstein		AHS - DAIL	S
Karl	Finison		OnPoint	X
Jaime	Fisher		GMCB	X
Erin	Flynn		AHS - DVHA	S
Paul	Forlenza		Centerboard Consultingt, LLC	X
Leah	Fuller	phone here	OneCare Vermont	M
Michael	Gagnon		Vermont Information Technology Leaders	M
Daniel	Galdenzi		Blue Cross Blue Shield of Vermont	M
Joyce	Gallimore	phone	Bi-State Primary Care/CHAC	M
Lucie	Garand		Downs Rachlin Martin PLLC	X
Christine	Geiler		GMCB	S
Al	Gobeille		GMCB	X
Stuart	Graves		WCMHS	X
Ken	Gingras	here	Vermont Care Network	MA
Mike	Hall		COVE	X
Emma	Harrigan	phone phone	AHS - DMH	M
Paul	Harrington		Vermont Medical Society	M
Kathleen	Hentcy		AHS - DMH	MA
Lucas	Herring	phone	AHS - DOC	M
Jay	Hughes		Medicity	X
Craig	Jones		AHS - DVHA - Blueprint	X
Pat	Jones		GMCB	S/MA
Joelle	Judge	here	UMASS	S
Kevin	Kelley		CHSLV	M
Sarah	Kinsler	here	AHS - DVHA	S
Kaili	Kuiper	here	VLA/Health Care Advocate Project	M
Kelly	Lange		Blue Cross Blue Shield of Vermont	MA
Charlie	Leadbetter		BerryDunn	X
Carole	Magoffin	phone	AHS - DVHA	S

Georgia	Maheras	here	AOA	S
Steven	Maier		AHS - DVHA	S/M
Nancy	Marinelli		AHS - DAIL	X
Mike	Maslack			X
James	Mauro		Blue Cross Blue Shield of Vermont	X
Lee	McKenna		OneCare Vermont	
Lou	McLaren		MVP Health Care	MA
Jessica	Mendizabal		AHS - DVHA	S
Todd	Moore		OneCare Vermont	X
Stacey	Murdock		GMCB	X
Arsi	Namdar		Visiting Nurse Association of Chittenden and Grand Isle Counties	M
Mark	Nunlist		White River Family Practice	MA
Miki	Olszewski		AHS - DVHA - Blueprint	X
Brian	Otley	phone here	Green Mountain Power	C/M
Annie	Paumgarten		GMCB	S
Kate	Pierce		North Country Hospital	X
Luann	Poirer		AHS - DVHA	S
Darin	Prail		AHS - Central Office	M
Amy	Putnam		DA - Northwest Counseling and Support Services	M
David	Regan		GMCB	X
Paul	Reiss		Accountable Care Coalition of the Green Mountains	M
Greg	Robinson		OneCare Vermont	MA
Sandy	Rousse	phone	Central Vermont Home Health and Hospice	M
Beth	Rowley		AHS - DCF	X
Simone	Rueschemeyer	here	Vermont Care Network	C/M
Tawnya	Safer		OneCare Vermont	
Larry	Sandage	phone here	AHS - DVHA	S
Julia	Shaw	phone here	VLA/Health Care Advocate Project	MA
Kate	Simmons		Bi-State Primary Care/CHAC	MA
Heather	Skeels	here	Bi-State Primary Care	M
Richard	Slusky		GMCB	S/M
Chris	Smith	phone here	MVP Health Care	M
Angela	Smith-Dieng	here	VT Association of Area Agencies on Aging	X
Richard	Terricciano		HSE Program	X
Julie	Tessler		DA - Vermont Council of Developmental and Mental Health Serv	MA

Bob	Thorn		DA - Counseling Services of Addison County	X
Tela	Torrey		AHS - DAIL	MA
Matt	Tryhorne		Northern Tier Center for Health	X
Win	Turner			X
Sean	Uiterwyk		White River Family Practice	M
Eileen	Underwood	here	AHS - VDH	M
Beth	Waldman		SOV Consultant - Bailit-Health Purchasing	S
Julie	Wasserman		AHS - Central Office	S
Richard	Wasserman, MD, MPH		University of Vermont - College of Medicine	X
David	Wennberg		New England Accountable Care Collaborative	X
Spenser	Wepler		GMCB	S
Kendall	West		Bi-State / CHAC	X
Bob	West		BCBSVT	X
James	Westrich		AHS - DVHA	S
Bradley	Wilhelm		AHS - DVHA	S
Cecelia	Wu		AHS - DVHA	S
Gary	Zigmann		Vermont Association of Hospital and Health Systems	X
				100

Kelly Machee - GMCB - here