

May 14, 2009

3:00-4:00 pm

Conference Call

HIT Steering Committee

Facilitator: Lynette Dickson

Note taker: Kylie Nissen

Attendees:

Present

**denotes appointed Steering Committee member*

- *Lynette Dickson, Center for Rural Health
- *Lisa Feldner, ND State CIO
- *Barb Groutt, ND Health Care Review, Inc.
- *Doug Kjos, ND Health Care Review
- *Ray Gruby, Gruby Technologies
- *Dana Halvorson, Senator Conrad's Office
- *Bruce Levi, ND Medical Association
- *Chad Peterson, Northwood Deaconess Health Center
- *Nancy Willis, St. Alexius
- *Kimber Wraalstad, Presentation Medical Center
- *Craig Hewitt, Meritcare
- Kylie Nissen, Center for Rural Health
- Art Bakke, ND ITD/Information Security
- Tim Blasl, NDHA
- Rochelle Hadland in for Tami Wahl, Governor's Office

Called in – not able to attend

- *Laurie Peters, ND Health Information Management Association

Not Present

- *Janis Cheney, AARP
- *Terry Dwelle, ND Department of Health
- *Mark Grove, Great Plains Clinic
- *Cathy Houle, MD West River Health System
- *Chip Thomas, ND Health Care Association
- *Darrell Vanyo, Blue Cross Blue Shield
- *Jenny Witham, Dept of Human Services

Minutes

Agenda Item: SB 2332 Overview

Discussion:

The final 3 weeks of the legislative session was critical to the success of this Bill. The Conference Committee members (Sens. Lee, Robinson, Dever, and Reps. Skarphol, Weisz and Hollman) acknowledged, valued and were supportive of the information and recommendations provided on behalf of the Steering Committee. Information was requested by legislators on a daily basis which they thoughtfully used to inform their final decision. **Thank you to all** for the responsiveness in providing information which was critical in the successful passage of this bill. Special thanks to Nancy Willis, Craig Hewitt, Lisa Feldner, Jenny Witham, June Herman, Janis Cheney, Dan Kelly and Lynette Dickson who were available on a daily basis for the final three weeks. A special thanks to Dana Halvorson in Sen. Conrad's office for her lightening speed us informed with regard to the federal stimulus package.

Basic Components of the Bill:

1. **Establish a Health Information Technology Office.** (Appropriation - \$350,000-biennium) The HIT Office will be located within ITD. This was a change from the original Bill where the HIT office was located in the Department of Health. Dr. Dwelle and Lisa Feldner are both comfortable with this collaborative model. ITD currently has a director level FTE available and has similar working models (Criminal Justice Information Sharing Board and Education Technology Council) which a Director is hired by and reports directly to a Board/Council, just as the HIT Director will report directly to the Advisory Committee. ITD works with these groups on their budgets and provides some administrative support.
2. **Establish an Advisory Committee** based on the current HIT Steering Committee structure with a 'broad public-private stakeholder representation'. No particular number was included in the Bill however, every effort will be made to assure a committee size that is reasonable and appropriate. The current Steering Committee was formed based on recommendations from other state's level HIE initiatives.
3. **The Bill includes \$8 million that will be made available for the required state match, to compete for the federal stimulus opportunities.** As far as we know to date, the first opportunity will be for a state grant (5:1 match) to establish a loan program for the purchase of EHR to be awarded in January 2010. Next, will be three years of state grants (competitive) available for HIE – we don't know how HIE is being defined – (2011-10:1, 2012- 7:1, 2013 5:1 match). The whole dollar amount, \$8 million, was put in the Bill so that the Advisory Committee would have digression on how much to use toward each state grant opportunity once all the details have been published.
4. **Establish a state loan program not tied to the stimulus funds.** Since the federal stimulus opportunities are appealing, it was concerning to only have all state funds tied to the risk of receiving a federal grant. Although grants would be more favorable for health care facilities, legislators were not in favor of a state grant program but legislators would not agree to that. Therefore, it was suggested that a state loan program, NOT tied to the stimulus, be established to assist health care entities who are ready get moving forward. (A quick email survey during the Session, of rural hospitals revealed that nearly \$10 million in no or low interest loans could be used, ranging from \$100,00-\$400,000). The legislators agreed to make available \$ 5 million; *however, this is contingent upon the general fund revenue in the Bank of North Dakota for July-Sept. 30, 2009 exceeding \$22.5 million.* It was felt that this would most likely not be a problem and that the funds will be available.
5. **This bill has an emergency clause.**

Agenda Item: Transition to Advisory Committee

Discussion:

Recommendations for the Advisory Committee: Dr. Dwelle, Lisa Feldner, and Lynette will set up a meeting to discuss the process for moving forward with establishing the Advisory Committee.

Important to note, although the Advisory Committee will have final decision making authority the work ahead will be a collaborative process supported by the six stake holder work groups. The workgroups, especially HIE and Standards will need to meet very soon to develop/confirm the state HIT/HIE strategic plan, which is required to complete for the federal dollars.

TASK: Schedule meeting as soon as possible.

Agenda Item: Develop position description for HIT Director

Discussion:

A position description will need to be developed. The committee gathered some sample position descriptions from MT, NE, and MN when we were working on the original Bill with Sen. Lee. These will be used as a starting point.

Lynette will compile a draft and meet with a small group to finalize; once finalized the position will be advertised through the appropriate channels. Lisa mentioned that the position can be advertised anywhere that the Committee suggests.

TASK: Develop and finalize HIT Director position description.

Agenda Item: Standards Work Group Established

Discussion:

Alex Todorovic from Altru Health System IS Department volunteered to Chair the Standards work group. This group has already met twice. The committee has a few gaps in representation, but they are looking to fill those gaps. Alex reported that the group may complete their initial work by August. The Standards work group will work closely with the HIE work group.

Agenda Item: HIE Work Group (small group) - Schedule face to face working meeting to develop a Draft- State HIT/HIE Plan

Discussion:

Need to set a date to meet. Craig's administrative support person (Judy Erickson) is working on finding a date to meet in Carrington or via teleconference as soon as possible.

Agenda Item: Other

Discussion:

Conference Committee members – These key legislators worked very hard to learn about HIT, the state needs the stimulus etc. for this Bill. We would like to do something on behalf of the Steering Committee to thank them. They are allowed to receive a gift up to \$60. Bruce Levi (NDMA) and Barb Groutt (ND Healthcare Review) volunteered to provide the needed funds to support a thank you gift for the six Conference Committee members. Lynette and Nancy will work with them to move this forward.

Sheila Peterson currently serves as the Stimulus coordinator for the ND OMB. She attended a meeting in DC about the stimulus package, the final week of the Leg. Session. She attended one of the final Conference Committee meetings and was very helpful in sharing with Steering Committee members in attendance and legislators the information she learned. For the most part, we (Steering Committee) were on the right track in our work the past 2-3 years. It was refreshing to hear from her Check list of what states need to have in place, that much of what the Steering Committee has discussed/completed worked on is on track. There is still a lot of work ahead, but we do have a number of items in place or at least started.

Once the national plan from the ONC is released (end of this week) we will use this to model our state plan fits within the recommendations/requirements. The state plan should be started within the next 30 days.

Until the Advisory Committee is established and HIT Director is hired, the Steering Committee will continue to meet/work together to accomplish the necessary tasks so we don't lose ground for putting the State in a position to compete for the federal stimulus funds.

TASK: Purchase gifts and send them to the Conference Committee members.

Next Conference Call

Thursday, June 4, 2009

3:00 – 4:00 pm CST

UPCOMING TELECONFERENCE - FEDERAL LEGISLATION, HEALTH IT AND SLHIE

Topic: *Overview of the Federal Economic Stimulus Legislation and Implications for State-level HIE Efforts*

Guest: *William Bernstein, Manatt Health Solutions*

Date: *Monday, February 9, 2009*

Time: *2:00 – 3:00PM Central (A Live Meeting Appointment will be sent separately!)*

As you know, legislation with significant impact on Health IT adoption and HIE is rapidly advancing through the federal Congress with expectations for mid-February passage. States are pressing to understand the implications of this legislation in light of their current state-level HIE efforts. William Bernstein, a principle with Manatt Health Solutions, is working closely with key states and will present a timely review of the key aspects of the legislation and its current status. He will help facilitate a discussion among Forum members to identify shared questions, issues and opportunities related to the legislative priorities, strategies and resources that may become available.

We hope that you will join in this important discussion as we also consider next steps in how the Forum can help support state's efforts. Attached for your consideration is an earlier assessment prepared by Manatt that will be updated verbally during the teleconference with the most current developments as of next week. Mark your calendar! I will send a live meeting request [separately!](#)

* SHARE YOUR STATE-LEVEL ANALYSES

We are eager to synthesize analyses from states regarding potential implications for their state-level HIE development efforts and appreciate your sharing these as much as possible. If they are in a form to share with me prior to next week's teleconference, I will compile the key points to help frame our discussion. We will also continue to bring you updates as the federal strategies and legislation evolve.

* ARCHIVED WEBINAR AVAILABLE

If you missed last week's highly informative Webinar, it is archived and available for you and your colleagues to watch and hear.

State Health Policy to Advance Health IT: An Overview of State Legislative Strategies

Broadcast on January 28, 2009

Following is the link for the seminar replay:

www.vcall.com/replay then enter your name and e-mail address and the replay # **2146002900**, to view the archive.

This seminar uses Internet streaming audio, which requires Flash – you can download Flash at: (note long link please be sure to copy all to your browser) <http://www.adobe.com/shockwave/download/download.cgi/>

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