

**ND HIT Steering Committee/Stakeholder Group
Health Information Exchange (HIE) Work Group**

Leadership
Chair (Steering Committee member): Darrell Vanyo (BCBSND)
Co-Chair(Stakeholder Group member): Chad Peterson

Work Group Members:
 Darrell Vanyo; Rob Beattie, MD; Terry Dwelle; Lisa Feldner; Carolyn Gaarder; Chad Peterson; Ken Gilles; Julia Gochenour; Mark Grove; Ray Gruby; Craig Hewitt; Cathy Houle, MD; Dorette Kerian; Doug Kjos; Don Larson; Jon Linnell; Darin Meschke; Jeff Shallman; Marin Swofford; Mark Waind; Marlys C. Knell; Howard Anderson; Robert Heidt

Overall Purpose of the Work Group:
Focus not only on HIE from one agency to another, but also internally within the facilities themselves.

- Things to look at to promote HIT:**
1. **electronic health record**
 2. **statewide patient identifiers**
 3. **e-prescribing**
 4. **personal health records**
 5. **telemedicine**
 6. **state-wide immunization – be able to access through their current system**
 7. **standardization/interoperability – infrastructure**
 8. **practice management system**
 9. **payer/provider information exchange (real-time exchange)**
 10. **surveillance of things other than just immunology (meds, allergies, chronic conditions, etc.)**
 11. **billing system for local public health units**
 12. **integrated formulary**

Goal 1: Obtain some early successes

Objective 1.1: Statewide Immunization – Upload/Download to Electronic Medical Records System			
<i>Action Steps</i>	<i>Target Date</i>	<i>Stakeholder Contribution</i>	<i>Desired Outcome</i>

ND HIT Steering Committee/Stakeholder Group Health Information Exchange (HIE) Work Group

Initially implement this for MeritCare	EOY 2007	• Craig Hewitt, Darrell Vanyo	MeritCare's satisfaction that immunization data is accessible and updateable via their current HER system.
Objective 1.2: Expand for consumer use			
<i>Action Steps</i>	<i>Target Date</i>	<i>Stakeholder Contribution</i>	<i>Desired Outcome</i>
Provide inquiry capability into the immunization data by schools, agencies, and individuals	EOY 2008	• Darrell Vanyo, Terry Dwelle, others?	System inquiry that is tested and operational (even if it is not entirely rolled out)
		•	
Objective 1.3: Expand for medications and other registries			
<i>Action Steps</i>	<i>Target Date</i>	<i>Stakeholder Contribution</i>	<i>Desired Outcome</i>
Select and implement at least one other registry type	EOY 2008	• Terry Dwelle, others?	Implementation of one new registry(i.e. diabetes, cancer etc.) similar to the statewide immunization system
		•	
Objective 1.4: Possibly provide incentive through reimbursement for telemedicine			
<i>Action Steps</i>	<i>Target Date</i>	<i>Stakeholder Contribution</i>	<i>Desired Outcome</i>
Find out if providing reimbursement for telemedicine is something that should be sought after.			
Goal 2: Set a mandatory date of conversion to EHRs for North Dakota (like MN)			
Objective 2.1: Expand real time claims adjudications capabilities			
<i>Action Steps</i>	<i>Target Date</i>	<i>Stakeholder Contribution</i>	<i>Desired Outcome</i>
		•	
		•	
		•	
		•	
		•	
Objective 2.2: Expand formulary/e-prescribing integration			
<i>Action Steps</i>	<i>Target Date</i>	<i>Stakeholder Contribution</i>	<i>Desired Outcome</i>
		•	
		•	
		•	

ND HIT Steering Committee/Stakeholder Group Health Information Exchange (HIE) Work Group

		•	
		•	
Objective 2.3:			
<i>Action Steps</i>	<i>Target Date</i>	<i>Stakeholder Contribution</i>	<i>Desired Outcome</i>
		•	
		•	
		•	
		•	
Goal 3:			
Objective 3.1:			
<i>Action Steps</i>	<i>Target Date</i>	<i>Stakeholder Contribution</i>	<i>Desired Outcome</i>
		•	
		•	
		•	
		•	
		•	
Objective 3.2:			
<i>Action Steps</i>	<i>Target Date</i>	<i>Stakeholder Contribution</i>	<i>Desired Outcome</i>
		•	
		•	
		•	
		•	
		•	
Objective 3.3			
<i>Action Steps</i>	<i>Target Date</i>	<i>Stakeholder Contribution</i>	<i>Desired Outcome</i>
		•	
		•	
		•	
		•	
		•	