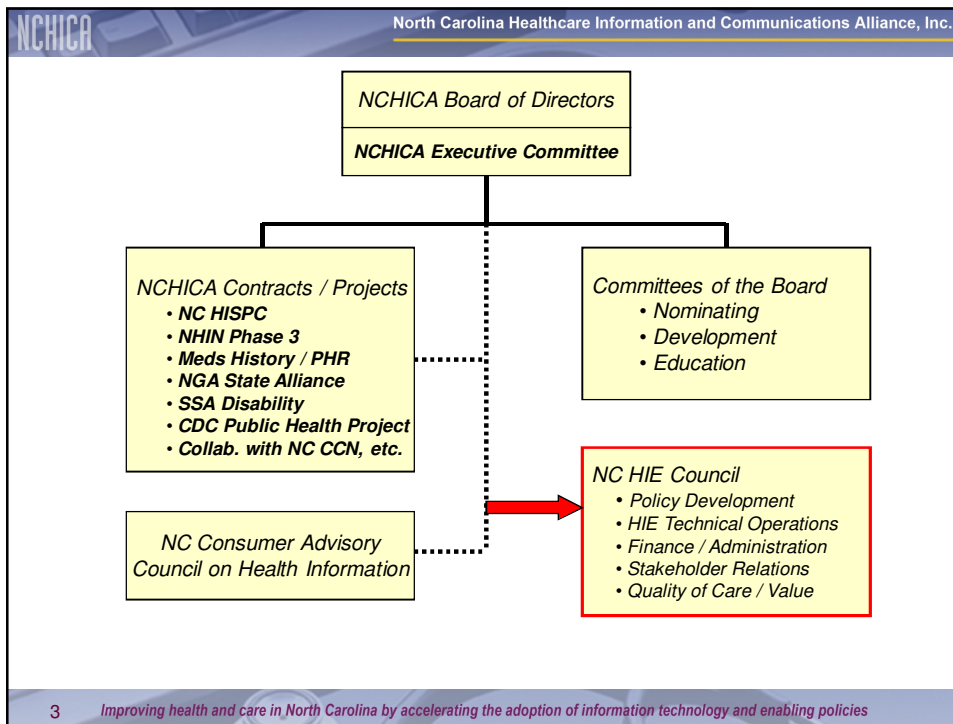


NC HIE Council

NCHICA
Research Triangle Park, NC
March 24, 2009

NC HIE Council Committee Reports

NCHICA Board of Directors
Research Triangle Park, NC
March 24, 2009

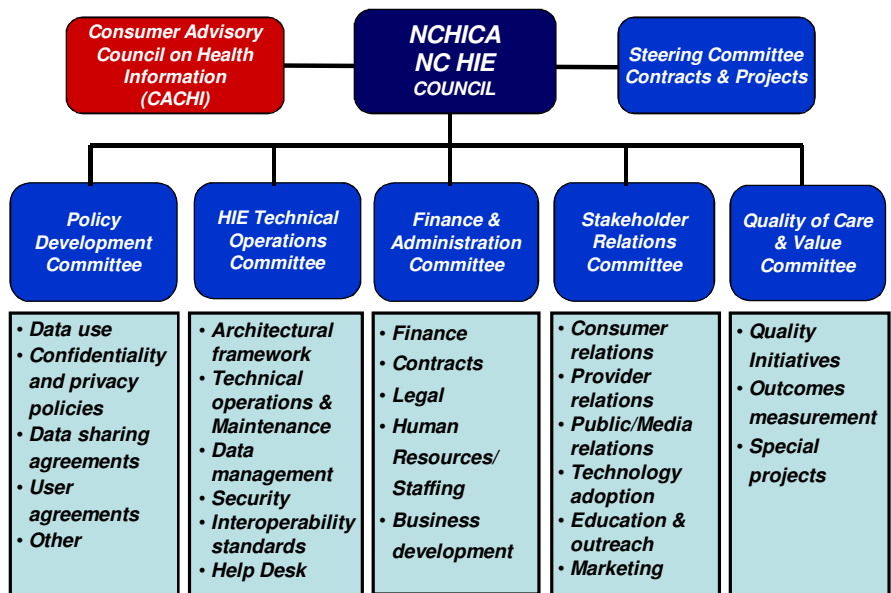


- NCHICA North Carolina Healthcare Information and Communications Alliance, Inc.
- ### NC HIE Council Membership
- North Carolina Consumer Advisory Council on Health Information
 - North Carolina Medical Society
 - NCHA (the North Carolina Hospital Association)
 - North Carolina Nurses Association
 - North Carolina Health Information Management Association
 - North Carolina Association of Pharmacists
 - North Carolina State Health Director or his/her designee
 - North Carolina State Chief Information Officer or his/her designee
 - Local Health Depts appointed by the NC Assn. of Local Health Directors
 - NC Office of Emergency Medical Services
 - NC Association of Free Clinics
 - NC Division of Medical Assistance (Medicaid)
 - NC Division of Mental Health/Developmental Disabilities/ Substance Abuse Services
 - NC Association of Health Plans
 - Representative of private-sector behavioral health
 - Representative of long-term care / nursing homes
 - Representative of ancillary services: laboratory
 - Representative of ancillary services: radiology
 - Representative of the NC Institute of Medicine
 - Representative of the NCHICA CIO Roundtable who also is a member of NC HIE
 - Two (2) at-large members appointed by the Board of Directors of NCHICA
 - Representative of a Healthcare Information Exchange Service Provider
 - (Other candidate sectors: Local Public Health, Dentistry, Community Health Centers, etc.)
- 4 Improving health and care in North Carolina by accelerating the adoption of information technology and enabling policies

NCHICA Board Approved NC HIE Council Charter

- **Article I – Mission**

- It is the mission of the North Carolina Health Information Exchange Council (NC HIE Council) to enable the timely and secure exchange of electronic health information for the purposes of improving the quality, safety and efficiency of healthcare and the overall health of residents. The NC HIE Council will undertake this mission by planning, establishing standards and advocating for the creation of a Health Information Exchange for North Carolina that connects with the nationwide health information network. This will be done, wherever possible, by adopting existing standards and policies & procedures. With the support of NCHICA, the NC HIE Council may help to create and arrange to operate the actual exchange, or manage it through contracts with outside technical providers.
- The NC HIE will engage healthcare stakeholders to facilitate the above objectives and deliverables and may hire staff and/or contract with third parties to supplement these efforts. Success will be measured by the utility of these activities and deliverables to residents and NC healthcare stakeholders.



Policy Development Committee

Liaisons: Dave Dillehunt & Kris-Shae McCall

- Membership
 - 57 individuals on distribution list
- Topics Addressed (with NCHICA Legal Work Group)
 - HISPC & NHIN
 - Consent Policies
 - Agreements (DURSA & IOA)
 - Revisited original Charter
- Next Topics
 - Stimulus Privacy and Policy Issues
- Meetings
 - Average attendance monthly 15-20
 - Next Meeting: March 25th 11:00 – 1:00 @ NCHICA

HIE Technical Operations Committee

Liaisons: Ron Mitchell & Mary Jo Nimmo

- Membership
 - 54 individuals on distribution list
- Topics Addressed
 - Charter - Enabler for statewide HIE Architecture
 - Five sub-cmtes meeting weekly
- Next Topics
 - Overall Architecture, Patient & Provider ID, Clinical Data
- Meetings
 - Ongoing meetings
 - Next Meeting: 4/3 8:00 – 10:00 @ NCHICA

Finance & Administration Committee

Liaisons: [Lanier Cansler] & Phred Pilkington

- Membership
 - 44 individuals on distribution list
- Topics Addressed
 - Guide development of NC HIE Sustainability Plan
- Next Topics
 - Regional Sustainability Planning
 - Strategic Planning for HIE across NC
- Meetings
 - Average attendance monthly 8-15
 - Next Meeting: March 25th 2:00 – 4:00 @ NCHICA

Stakeholder Relations Committee

Liaisons: Sally Cameron & Regina Crawford

- Membership
 - 43 individuals on distribution list
- Topics Addressed
 - Charter
 - Engaging entities and individuals
 - Education for meaningful EHR Adoption
- Next Topics
 - Outreach to Potential Partners
 - Education & Regional Extension Centers
- Meetings
 - Next meeting April 1, 3:00 – 5:00 @ NCHICA

Quality of Care & Value Committee

Liaisons/Leaders: Dr. Ed Ermini, John Kessler & Sue West

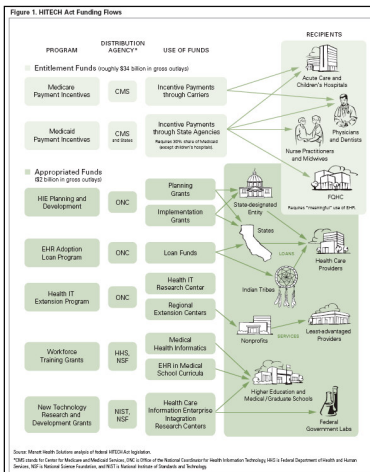
- Membership
 - 23 individuals on distribution list
- Topics Addressed
 - Charter & leadership
 - Electronic medical records needed for quality measures
 - Clinician leadership in HIE
 - Coordination with other NC quality initiatives including the North Carolina Healthcare Quality Alliance
- Next Topics
 - Intersection between federal stimulus bill and NC priorities related to health care quality
- Meetings
 - Next meeting April 2, 5:30 – 6:30 online / TC

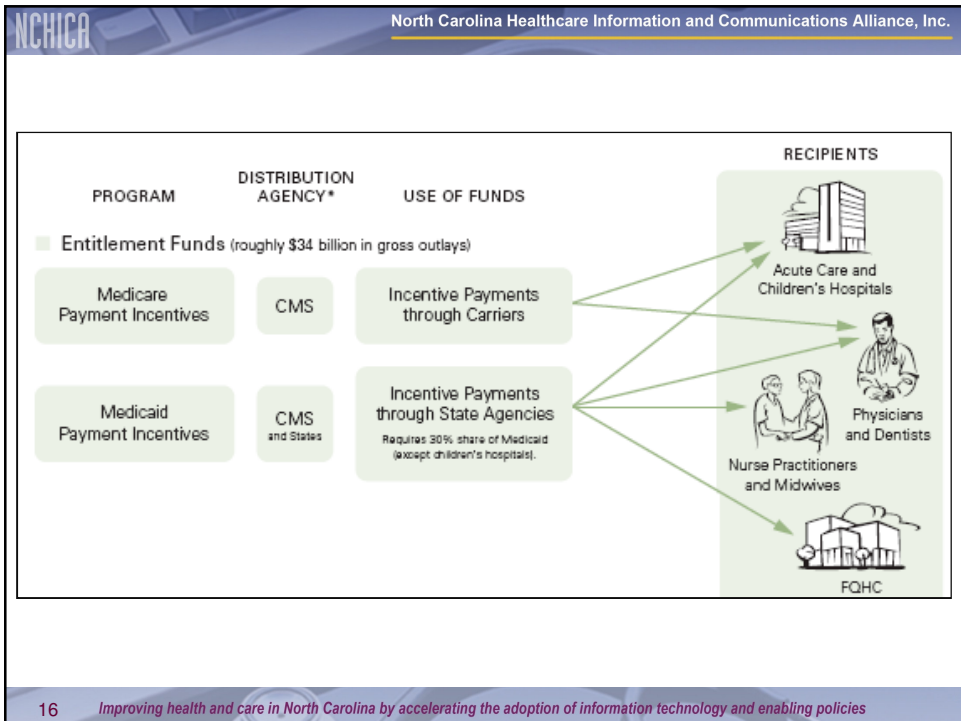
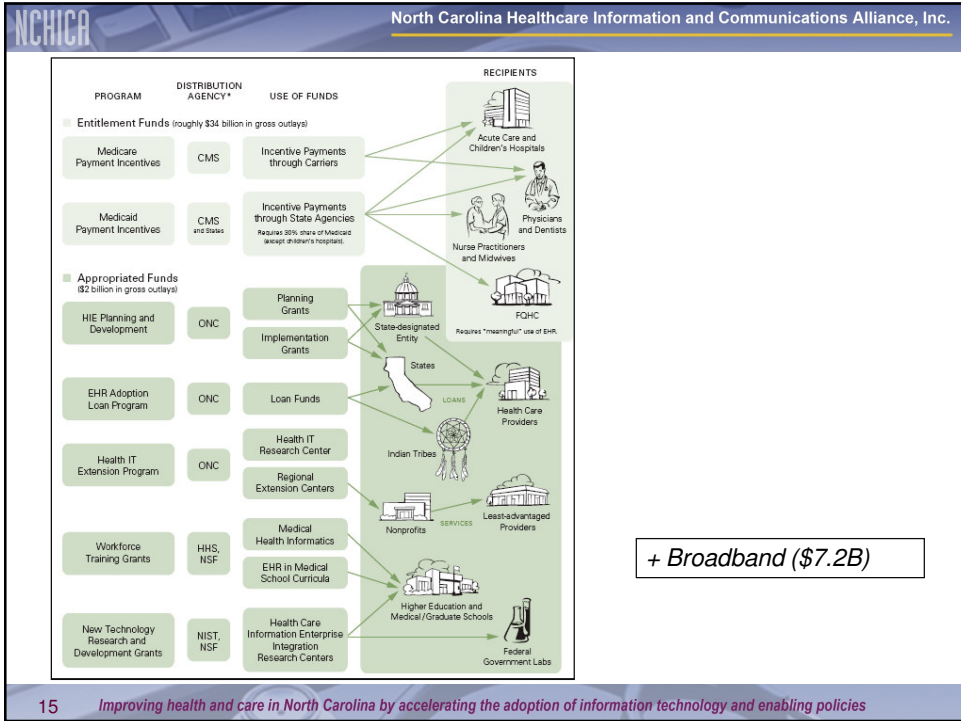
Conclusions

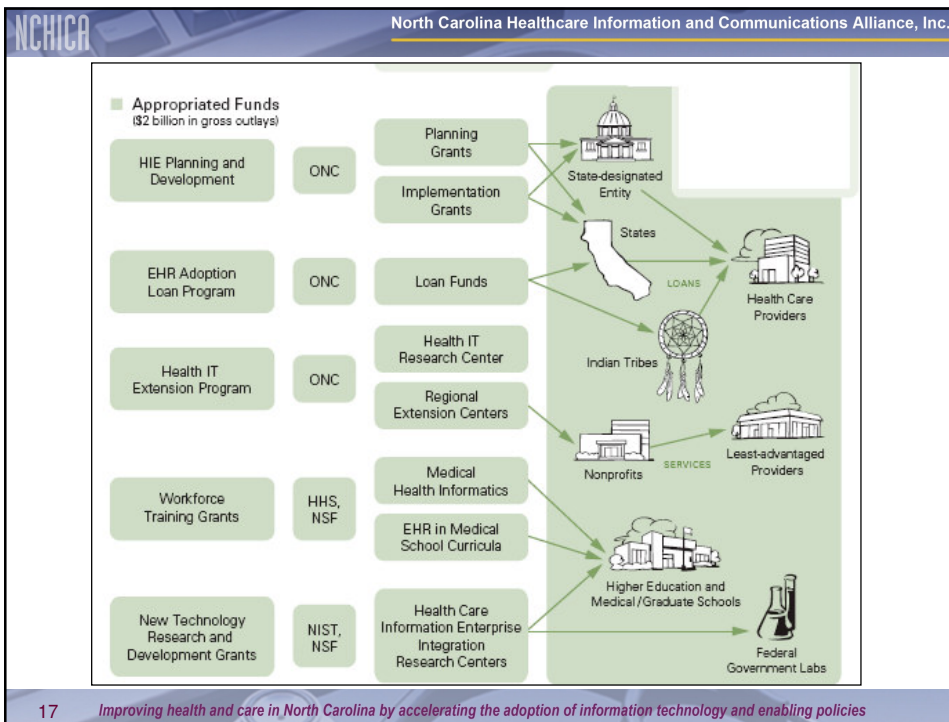
- Committees are Operational and most effective when given specific tasks
- Membership Openings:
 - NC Hospital Association
 - NC Association of Health Plans
- HIE Council and Committees are in place to assist with an NC HIE structure that could be supported by the Governor

American Recovery and Reinvestment Act (ARRA)

An Unprecedented Opportunity: Using Federal Stimulus Funds to Advance Health IT in California







- NCHICA** North Carolina Healthcare Information and Communications Alliance, Inc.
- ## ARRA Healthcare Funding Priorities
- **Facilitate and Expand Electronic Health Information Exchange**
 - State or qualified State-designated entity
 - Matching begins in 2011
 - **Loans to Providers**
 - Competitive grants to eligible entities (State or Indian Tribes)
 - **Medicare Incentives for “Meaningful Use”**
 - Physicians & Hospitals
 - **Medicaid Incentives for “Meaningful Use” of Certified EHR**
- 18 *Improving health and care in North Carolina by accelerating the adoption of information technology and enabling policies*

ARRA Education & Research and Development

- **Education and Outreach**
 - Health Information Technology Regional and Extension Programs
 - Description due 90 Days after enactment
 - Academic Curricula – Integrating Certified EHR Technology
 - Grants to support
 - Medical Health Informatics Education Programs
 - With NSF to Expand Advanced Degree Programs
- **Research and Development**
 - Centers for Health Care Information Enterprise Integration
 - NIST and National Science Foundation

Estimate of Potential Stimulus Impact on NC

- | | |
|--|-------------|
| • Hospital Incentives for EHR - \$300M – \$400M | } (\$17.2B) |
| • Physician Incentives for EHR - \$396M – \$792M | |
| • HIE / HIT Competitive Grants – ? | (\$2B) |
| – Regional Extension Center - ? | |
| – EHR Adoption Loan Funds - ? | |
| • Broadband Infrastructure – Proposals | (\$7.2B) |
| • Workforce Training Grants - ? | (\$?) |
| – Medical Health Informatics - ? | (\$?) |
| – EHR in Medical School Curricula - ? | (\$?) |
| – Worker Training - ? | (\$250M) |
| • Comparative Effectiveness Research - ? | (\$1.1B) |
| • Community Health Centers - \$2.6M + ? | (\$2B) |
| • Prevention & Wellness (CDC) - ? | (\$1B) |
| • SSA - ? | (\$500M) |

SSA Business Case

9:00 – 1:30

March 22nd – 42 attendees

NC HIE Council
Research Triangle Park, NC
March 23, 2009

Goal & Expectations for SSA Business Case

NCHICA's Goal:

Alleviate the economic burden to beneficiaries and their families by expediting the flow of information and improving the efficiency of both the SSA and provider organizations.

Key Expectations / Improvements include:

- Reduce/eliminate snail-mail and fax
- Streamline collection/compilation of evidence
- Automate/supplement medical evidence “filtering”
- Automate the “evaluation/determination” process.
- Improve accounts receivable for providers

Why this is important to North Carolina

NC (FFY 07):

- **133,498** Disability Claims received by NC DDS
- Current average time to initial medical determination
 - **82.6** days for Title II (SSD – Social Security Disability)
 - **84.0** days for Title XVI (SSI – Supplemental Security Income)
- Individuals receiving benefits in NC
 - **324,095** Title II
 - **178,311** Title XVI
- **\$ 4,517,172,000** in annual benefits paid under SSA
- **SSI eligibility** triggers eligibility for state Medicaid benefits

NCHICA Community Reactions to Potential Benefits

"The SSA backlog is the number one issue for our constituency service offices."

Congressional Staff

"We keep these accounts [SSA applicants] as Medicaid pending and they sit on average in the AR one to three years."

Regional Medical Center







"According to our Finance folks they would love to see the turnaround of these claims move faster than the current paper based process."

Medical Records Department

Contracts Summary

NC HIE Council
Research Triangle Park, NC
March 23, 2009

Current Contracts

-  **Nationwide Health Information Network**

 - Five NC Providers active in Trial Implementations
 - \$4 M contract with ONC Sept 30, 2007 through Feb 27, 2009
 - NCHICA demonstration of Use Cases at December NHIN Forum
 - \$1 M Option Year 1 proposal for Feb 28, 2009 through Feb 27, 2010
 - “Moving Towards Production”
-  **Social Security Administration Disability Determination**

 - Value Case contracted under NHIN
 - Recruiting Providers for “Moving to Production” planning & implementation
-  **Healthcare Information Security and Privacy Collaborative**

 - \$477 K contract ends April 17, 2009
 - Inter Organizational Agreements
 - Consent Policy Options
 - Provider Education

NCHICA North Carolina Healthcare Information and Communications Alliance, Inc.

NHIN - NC HIE Participating Providers



Carolina NeuroSurgery & Spine
ASSOCIATES



FirstHealth
OF THE CAROLINAS



MORE-HEAD
MEMORIAL HOSPITAL



PINEHURST SURGICAL
excellence in practice





SOUTHERN PINES
WOMEN'S
HEALTH CENTER, PC


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NC HIE Demonstration Infrastructure for the NHIN









NC HIE solution includes compliant implementation of:

- Consumer Access to Clinical Information Use Case
- Electronic Health Record Use Case
- SSA Authorized Release of Information to a Trusted Entity
- NHIN Core Services

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North Carolina Healthcare Information and Communications Alliance, Inc.

North Carolina NHIN Participation

Demonstration Workflow

State Agency: Med Records, Labs, Background

SSA Field Office: Auth. To Release Medical Records, Demographic Information

SSA National Computer System: Med Records, Labs, Background, Claimant Electronic Folder

NHIN: Information Available About Claimant

Providers: MEDVIRGINIA (St. Francis Medical Center, Virginia University), NCHICA (Morehead Memorial Hospital, Carolina Neurosurgery & Spine Associates, Pinhurst Surgical, Southern Plains Women's Health Center Surgical, FirstHealth of the Carolinas), KAISER PERMANENTE (Kaiser Permanente, Naval Creek Medical Center)

DoD Demonstration Workflow

Providers: MEDVIRGINIA, care spark, NCHICA, Cherokee Indian Hospital, NC

NHIN: Information available about Wounded Warrior

Cherokee Indian Hospital, NC: Permission Search, Verify ID

Scenarios

PHR of CHOICE

Primary Care, Labs, Urgent Care, Hospital Stays, Surgeons

NCHICA NC HIE: Health Information Service Provider

NHIN

- Consumers receive and access clinical information
- Consumers create provider lists and establish provider access permissions
- Consumers transfer information from PHR to PHR

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North Carolina Healthcare Information and Communications Alliance, Inc.

NEXT STEPS

- Specific Assignments to Five Committees
 - Policy Development Committee
 - Technical & Operations Committee
 - Finance Committee
 - Stakeholder Relations Committee
 - Quality of Care & Evaluation Committee
- Membership Openings:
 - NC Hospital Association
 - NC Association of Health Plans

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Thank you