

Health Information Exchange (HIE) Use Case Design Group Meeting Minutes

Meeting Date	Meeting Time	Location – Zoom Web Conference
October 11, 2017	2:30 – 4:00pm ET	Webinar link: https://zoom.us/j/657371924 Telephone: (646) 558-8656 OR (408) 638-0968 Meeting ID: 657 371 924

Design Group Members					
Stacy Beck	X	Gerard Muro, MD	X	Jake Star	X
Patricia Checko, DrPH, MPH	X	Mark Raymond	X	Lisa Stump, MS, RPh	
Kathy DeMatteo	X				
Design Group Support					
Michael Matthews, CedarBridge	X	Allan Hackney, HIT PMO	X	Mark Schaefer, SIM PMO	
Carol Robinson, CedarBridge	X	Dino Puia, HIT PMO	X	Faina Dookh, SIM PMO	
Chris Robinson, CedarBridge	X	Kelsey Lawlor, HIT PMO		Kate Hayden, UConn	X
Greg Petrossian, CedarBridge	X			Tom Agresta, UConn	X
Johanna Goderre, CedarBridge	X			Kate Steckowych, UConn	
				Alan Fontes, UConn	X

Session 11 Minutes		
	Topic	Notes
1.	Comments on 10/4/17 Minutes	<ul style="list-style-type: none"> The meeting summary from 10/4/17 was approved.
2.	Review Meeting Schedule	<ul style="list-style-type: none"> The Design Group meeting schedule was reviewed. There were no additional revisions leading up to the final recommendations to be delivered to the Health IT Advisory Council Meeting in October.
3.	Review Accepted Rollout of Use Cases	<ul style="list-style-type: none"> The wave one use case summary was reviewed and accepted. The wave two use case summary was reviewed and accepted. The use case rollout sequencing strategy was reviewed and accepted. It was asked when governance would need to be implemented during the rollout. Governance will be part of the year one activities, but such recommendations are out of scope for the HIE Use Case Design Group (DG). Governance will need to be in place for all shared services before introduction of patient health information (PHI) data. The goal is to stand up a governing body for the HIE entity that will make continued recommendations and approve sequencing over the subsequent years.
4.	Business Model Discussion	<ul style="list-style-type: none"> The overview of the business model was presented. Sustainability considerations were defined as financial costs borne by the HIE use case supporting technology, as well as implementation costs for entities that will connect and leverage services. The DG is not tasked with detailing the financial sustainability of each use case, but will discuss the conditions of each use case within the Connecticut (CT) landscape as a path forward to HIE sustainability.

Health Information Exchange (HIE) Use Case Design Group Meeting Minutes

		<ul style="list-style-type: none">• HIE expenses were discussed from the viewpoint of an overall data exchange schematic to outline costs for core services architecture, use case services, support services, governance, and general operations. The schematic also includes a data exchange hub that is envisioned to interface with national networks.• It was discussed that technology solutions supporting use cases will create tangible value for stakeholders and the cost will be incremental as they are spread across various use cases. It was emphasized that the full cost to implement each use case will be skewed as core services and technology solutions will overlap. • An excerpt from John Glaser, Ph.D. was reviewed to highlight the fact that HIE sustainability has been an obstacle since 2006.• Benefits of an HIE, as outlined by the Office of the National Coordinator for Health Information Technology, were reviewed to highlight the advantage of overcoming such obstacles.• Studies regarding impact analysis of HIEs were discussed as lacking in the past, but are now emerging to help quantify benefits and sustainability factors.• Julia Edler-Milstein, Ph.D. was spotlighted as a researcher focusing on HIE performance, impact, and sustainability.• A study by American Health Information Management Association was discussed regarding HIE readiness for demonstrating return on investment.• A case study was presented that detailed the Social Security Administration’s use of HIE services to automate their paper process of disability determination. The case study reported reduction of turnaround time by 35% and created revenue streams for HIEs and other stakeholders (paid by the SSA).<ul style="list-style-type: none">○ It was discussed that funding avenues, similar to the SSA case study, demonstrate the wide variety of use cases that could become billable for an HIE and benefit multiple stakeholders.• A study reporting evidence of reduced Medicare spending due to the implementation of an HIE was discussed.• A study on facilitating clinical research through an HIE was highlighted for its ability to provide value to multiple stakeholders as an emerging use case.• Clinical research was emphasized as becoming a potential component of HIE sustainability as it would deliver tremendous value to medical researchers with funding, assuming adequate
--	--	--

**Health Information Exchange (HIE) Use Case Design Group
Meeting Minutes**

		<p>consent, privacy, and data use and access policies and procedures were in place.</p> <ul style="list-style-type: none"> • A study by the Healthcare Information and Management Systems Society on funding models of HIEs prescribed a subscription model. A majority of HIEs employed subscription fees for HIE technology services based on a sliding scale, measured by health system factors such as per-member-per-month or number of hospital beds. • The network effect based on Metcalf’s law of exponential benefit was discussed as a motive to increase membership of HIE services to drive value from various stakeholders. • The role of state legislature and their relationship to a state-wide HIE was discussed as an important enabler, but is challenged by limited demand of services and financial sustainability barriers. This is similar to the role of policy makers that must incentivize data exchange and interoperability rather than solely relying on vendors to spearhead such change. • The concept of a data economy was discussed to view data as an asset with potential of monetization for interoperability efforts.
5.	Driving to Sustainability	<ul style="list-style-type: none"> • A summary of driving factors to financial sustainability was reviewed. Design Group members suggested adding the following bullet points to the list: <ul style="list-style-type: none"> ○ “Privacy, security, and confidentiality must be present in all systems and services” – this addition was approved. ○ “System must be designed for optimal ease of use” – this addition was approved. • Implementing rigorous measures of value were discussed to aid marketing of HIE services. It was stated that the measurement of value propositions is often an afterthought, but must be a core focus during planning efforts to successfully implement. Engaging researchers such as Adler-Milstein to aid in measuring value was considered.
6.	Meeting Wrap-up and Next Steps	<ul style="list-style-type: none"> • Next steps were reviewed in preparation of delivering final recommendations to the Health IT Advisory Council. • Design Group members were offered the opportunity to present these recommendations to the Advisory the Council and provide input throughout the presentation. • Feedback from the Council will be incorporated into a final recommendations document and distributed via email for Design Group review during the week of 10/23/17. • The approved final recommendations document would then be delivered to the HIT PMO. This process was approved.