

Health Information Exchange Coordinating Committee (HIECC) Meeting Minutes

Date: September 20, 2018 **Time:** 10:00 a.m. – 12:00 p.m.

Location: GoToWebinar

Members Present: Nikole Helvey for Secretary Senior; Craig Dalton; Melanie Brown-Woofter; Tab Harris; Tom Herring; Jarrod Fowler; Michael Jackson; Ricky Gomez for Alex Romillo; Terry Fuller for Gay Munyon; Marie Ruddy; Dennis Saver, M.D.; Kim Streit; and Kimberly Tendrich.

Agency Staff Present: Stephanie Clarke, Kim Davis-Allen, Dylan Dunlap; Heidi Fox, Carrie Gaudio, Pamela King, Suzanne Kirayoglu; Brenda Phinney, Dana Watson, and Chris Wilkey.

Additional Presenters: Bruce Culpepper, Florida Department of Health; Aaron Parsons, Audacious Inquiry.

Interested Parties Present: Ivy Barnes, Intesse Consulting and Advisory Services; Robert Beck and Tanya Jackson, Pin Point Results; Kendall Brown, South Florida Health Information Management Systems Society; Evan Carter, Audacious Inquiry; Chris Jenkins, Vynca health; Susan Langston, Leading Age; Julie Mangus and Jacques Sberro, Department of Veterans Affairs; Helen Pak-Harvey, Infor; Aliya Aaron, AMR Healthcare Consulting; Lecia Behenna, Florida Hospital Association; Rosa Blanco-Herrera, Envision Healthcare; Jennifer Lloyd, Florida Senate; Jan Paterson; Ganesh Persad, Memorial Healthcare System.

Meeting Materials: Agenda; Previous Minutes (6/28/2018); Florida HIE Services Update Presentation; Office of HIE Metrics Presentation; Outreach Report Presentation, Agency and Department of Health (DOH) HIE Initiative Updates Presentation, Florida HIE Strategic Planning Presentation, Draft HIECC Mission and Responsibilities Document. Copies of meeting materials are posted on: http://www.fhin.net/committeesAndCouncils/hiecc.shtml

Call to Order and Roll Call:

Ms. Nikole Helvey called the meeting of the Health Information Exchange Coordinating Committee (HIECC) to order at 10:00 a.m. and welcomed members.

Agency Updates

Ms. Helvey gave updates for the Agency for Health Care Administration (Agency). Overall preparations for next session have begun including Agency budget requests and legislative proposals. The Agency is preparing for upcoming administration transition. The Agency



continues active monitoring of the tropics and response to storms. Ongoing implementation of emergency power rules and tracking facility progress continues. Planning continues for the Agency enterprise information systems that support Medicaid.

The Agency is completing preparations for the roll-out of the newly contracted managed care plans. The first public webinars were held last week and communications will begin going to enrollees in coming weeks. Phases will be rolled out by region. More information is available from Medicaid on their website(s).

Many activities continue regarding implementation of the Regulatory Reform bill from last session, including the implementation of the Nursing Home and Assisted Living Facility emergency power rules.

The Agency is re-convening a panel to review Nursing Home quality standards related to the Governor's Gold Seal program.

The Pediatric Cardiac Technical Advisory Panel is a joint effort between two bureaus, and Agency staff have been supporting weekly meetings, as well as several subcommittees. The Panel is nearing finalization of their recommendations for rules around quality standards and transparency requirements for pediatric cardiac surgery programs in the state. Their next full panel meeting will be in-person on October 2nd in Tampa. More information is available on their website: http://ahca.myflorida.com/SCHS/PCTAP/index.shtml.

The detailed planning process with contracted consulting organization for the modernization of our facility discharge data collection systems was complete. The team is moving forward with the next steps, including identifying potential funding, and ensuring alignment with larger Agency enterprise initiatives.

Implementation of the pricing transparency initiative is ongoing. Data collection from the health plans has started and the Agency is working through data specifications, and answering important policy questions.

New and updated outreach materials have been developed for FloridaHealthFinder.gov. Routine and individually scheduled webinars are available to share information about a number of FloridaHealthFinder.gov enhancements, including the addition of:

- Emergency power plan information on facility profiles (NHs and ALFs);
- Expiration date for Health Care Clinic exemptions;
- Indicator of change in ownerships relative to regulatory and legal actions; and
- Hospice measures.

The AHCA Incident Reporting System (AIRS) Annual Report module was launched earlier this year, and the deadline was extended for submitting facilities. The Agency is currently developing module 3 for Liability Claims reporting for ALFs, which is near completion and currently in User Acceptance Testing.



The upcoming State Consumer and Health Information Policy Advisory Council meeting is scheduled for September 26th in Gainesville.

The National Association of Health Data Organizations (NAHDO) annual conference is scheduled for October 9-12th, and Agency representatives from Medicaid and Florida Center will attend.

Ms. Helvey also noted that the Agency has entered into an agreement with the Department of Health (DOH) to provide recipient information for Medicaid individuals who are dependent on electronic medical equipment and health services, as part of the emPOWER project.

Review and Approval of Minutes

Mr. Tab Harris moved for approval of the minutes from the July 28th, 2018 meeting of the HIECC, with Mr. Tom Herring seconding. The minutes were approved.

Florida HIE Services Update

Mr. Aaron Parsons reported on current Florida Health Information Exchange (HIE) activities. The Encounter Notification Service (ENS) now has 215 hospital data sources, covering 95% of all acute care beds in Florida. ENS sends real time notice of patient hospital encounters to 56 subscribers, including 22 Accountable Care Organizations (ACOs), 14 health plans, 27 provider practices (including 13 Community Health Centers and 14 other primary care and specialty practice), and 5 health systems (including over 50 hospitals). There are over 8 Million lives now covered by ENS. All of the Medicaid Managed Care Plans are now ENS subscribers. Over 800,000 notifications are delivered to subscribers per month to support better care coordination. These metrics show substantial growth in the service both annually, and within the previous quarter.

Mr. Parsons updated the HIECC members on recent enhancements to ENS functionality. The latest version of ENS was deployed in early July. Enhancements include expanded configuration options and notification triggers, offering the ability for a subset of notifications to be sent to specific providers within a subscriber's organization. These enhancements also allow for improved formatting options (HL7, C-CDA, and ORU). System performance enhancements allow for faster panel loading and notification delivery updates. The latest version of the PROMPT interface was deployed this month, and includes new user administration tool for creating and managing accounts, as well as the capability to do notes entry.

Mr. Parsons reported that Ai renewed its contract with Inpriva to offer Direct Messaging services. Inpriva will continue to offer DirectTrust accredited messaging services to Florida providers, and Ai will pay for existing accounts used by organizations subscribed to ENS.

Mr. Parsons reported that Ai replaced the legacy Aurion gateway with a new CONNECT gateway, allowing for CCD query exchange over the national eHealth Exchange network.



Program Metrics Update

Ms. Carrie Gaudio reported on metrics from other programs under the purview of the Office of HIE. The Medicaid Electronic Health Record (EHR) Incentive Program is currently processing 2017 program year applications. Stage 3 of Meaningful Use will become mandatory in 2019. Payment information for the program was reviewed.

Ms. Gaudio reported on the Agency's tracking of Electronic Prescribing (ePrescribing) in Florida. The metrics are regularly updated on www.FHIN.net, with data coming from Change Healthcare and Surescripts. The data are used to compare Florida to national ePrescribing averages, and include information about ePrescribing of Controlled Substances (EPCS).

A chart was presented showing the number of e-prescribing health care professionals increased slightly between March 2018 and June 2018. There were 9.6 Million e-prescriptions at the end of the second quarter of 2018, for a 9.9% decrease from March 2018 and the estimated e-prescribing rate was 73.1% of all prescriptions. A look back to metrics for 2014 through 2017, shows the average second quarter seasonal decrease in e-prescriptions was 6.1% across the last four years. By the end of each year, this Q2 decline is recovered and there is an overall rate increase for the year. Ms. Gaudio asked if any of the members had ideas about the potential cause of this seasonal and temporary decline.

Mr. Michael Jackson noted that changes in Health Plan and prescription coverage might have an impact on these numbers, as well as recent opioid control changes. Mr. Dalton inquired if this seasonal decline aligns with general prescription rates.

A chart was presented to show an average of electronic prescribing rates across all months, annual electronic prescribing rate, and the annual growth from 2007 through 2018. The eprescribing rate increased from 1.6% in 2007 to over 77.1% in 2018. The 2018 total reflects the seasonal decline, which brought down the overall 2018 rate by a few percentage points since the previous HIECC meeting.

A chart was presented to show the total approximate number of clear active licensed prescribing professionals in Florida as obtained from the Florida Department of Health's licensure database, along with the total active e-prescribers, and the percentage of licensed prescribers who were e-prescribers for months at the end of each quarter in 2018. This percentage increased by 1.5% over the last quarter, continuing the steady progress made in previous years.

Outreach Update

Ms. Pamela King reported on 2018 health IT outreach efforts. She reported that the Agency is participating in National Health IT Week (October $8^{th} - 12^{th}$), in partnership with National Health Information Management Systems Society (HIMSS). Activities will be held throughout the week to celebrate and educate, including a series of webinars, and presentations at the South



Florida HIMSS Integrate Conference and the Central North Florida HIMSS event. All activities are posted on www.florida-hie.net.

Ms. King reviewed outreach goals and accomplishments for 2018, noting that all outreach activity goals for 2018 have been accomplished. Ms. King also reviewed health IT outcome goals and accomplishments for 2018, and noted that the goal of covering 6 million patients on ENS has already been surpassed by 2 million this year so far, and this goal may be updated to reflect the rapid growth of the service. Other health IT outcome goals are on track for completion by the end of the calendar year, include obtaining new ENS subscribers, DOH utilization of Florida HIE Services, and increasing providers enabled to EPCS. Ms. King clarified that the goal of ENS Subscribing Organizations has been surpassed when counted by facility. Ms. Marie Ruddy requested clarification of how query exchange partners would be counted, and Ms. King explained that this goal was specifically related to connectivity through the Florida HIE State Gateway.

Mr. Chris Wilkey presented social media statistics for 2018 so far. He reported on substantial increases in followers on Twitter, Facebook, and LinkedIn, and in the amount of Agency posting, as well and increased post engagement. This increase in engagement is linked to an updated social media strategy, focusing on more frequent posting, image inclusion, and strategic usage of hashtags. He encouraged all HIECC members to follow the Agency on social media. Mr. Dalton asked how these numbers compare to those for other similar organizations. Mr. Wilkey noted that many metrics from other organizations may not be available for comparison, but he will look into identifying comparable organizations and metrics comparison.

Ms. Ruddy expressed that the Health IT Outreach team has done a great job with outreach efforts this year, and Mr. Herring seconded the sentiment.

Agency and DOH HIE Initiatives

Mr. Herring shared that the Agency and DOH have been in ongoing collaboration this year and expressed his excitement in the level of engagement and in the direction of efforts. He noted that while the team pursued only one HIE related project in 2017, eight initiatives have been pursued this year. Mr. Herring introduced Mr. Bruce Culpepper to give updates on these initiatives.

Mr. Culpepper explained that pursuit of county health department (CHD) connectivity to ENS is underway to promote more efficient patient care communication and transitions between community care partners. This project is initially focused on CHDs becoming data sources to ENS, with the longer term goal of CHDs receiving data through ENS as subscribers. The ENS Subscription Agreement is currently under review with the DOH legal department. Dr. Saver inquired about whether this data is needed by CHDs, given that they are not focused on providing clinical services. Mr. Herring explained that certain populations and critical care patients (e.g. patients with communicable diseases such as HIV and Tuberculosis) could be better served by obtaining information through ENS.



Mr. Culpepper noted that Children's Medical Services is currently using ENS to improve efficiency and care quality by promoting better care coordination between hospitals and providers for children in the program. As this project becomes more mature, DOH will look to collect outcome metrics and do analysis on quality improvements facilitated through ENS.

The Agency and DOH are continuing to work on facilitation of registry reporting through HIE. Syndromic Surveillance will be supported by ENS through the utilization of in-patient data. The ENS Subscription Agreement is currently under review by DOH for this use case. Conversations continue with the Brain and Spinal Cord Injury Program regarding the potential to leverage ENS to improve care coordination and oversight for their patients.

Mr. Culpepper reported that discussions continue to determine how to best leverage HIE for Emergency Medical Services. There is potential to leverage ENS data to populate the EMSTARS incident data dashboard more efficiently. Data from the EMSTARS system would also be of great benefit to ENS Subscribers to close care gaps for non-hospitalization incidents. He also noted that DOH is coordinating with the Agency on Emergency Preparedness efforts including an Emergency Census (to provide a temporary, searchable census for use by Emergency Response during declared emergencies), and the Patient Unified Lookup System for Emergencies (PULSE) which could provide query-based record look up during an emergency.

Mr. Culpepper reported on the progress of the emPOWER project, which involves the inclusion of Medicaid data into the HHS emPOWER system, which currently tracks electricity-dependent Medicare beneficiaries for preparedness and management in the event of an emergency. A Memorandum of Understanding has been developed between the Agency and DOH, and is currently under review.

The DOH continues to encourage safer prescribing of controlled substances and to reduce drug abuse through Florida's Prescription Drug Monitoring Program (PDMP). DOH is pursing integration with other states' PDMP registries (specifically Alabama and Kentucky) and to promote EHR interoperability with the PDMP registry (206 entities have been approved for integration thus far). The Agency continues to work to determine how these activities can be supported by the Florida HIE.

Florida HIE Strategic Planning

Ms. Heidi Fox reported on Florida HIE strategic planning activities, noting the adoption of recommendations from the HIE Study conducted by North Highland earlier this year. The Florida HIE is developing specific strategies and timelines, as well as prioritizing identified initiatives. Plans are focused on service enhancements, inter-agency collaboration, and increasing Health IT awareness.

Ms. Fox explained that current enhancements are centered around the expansion of existing service functionality, and the addition of new features in collaboration with participants. Future projects include the Emergency Census (with an initial focus on special needs shelters), a Record



Locator Service (leveraging ENS to locate records for query), the ability to route discharge summaries by leveraging eHealth Exchange connectivity for ENS participants, and the PULSE system for use during emergencies. Ms. Fox outlined a timeline for the Public Health collaborative initiatives identified by Mr. Culpepper.

Ms. Fox identified the ways the Florida HIE is currently supporting Medicaid through the utilization of existing service to enhance the ability of health plans and providers to coordinate care for Medicaid patients, as well as the utilization of funding from CMS to expand HIE to more Medicaid providers. She noted the potential to leverage the ENS master patient index (MPI) in the future to further support Medicaid.

Ms. Fox noted that another important component of the Florida HIE's strategy is to continue to increase awareness of health IT efforts statewide. This includes ramping up social media efforts, as well as providing enriched webinars designed for specific organization types and utilizing updated and engaging formats. In addition, the Florida HIE is working on strengthening organizational and community partnerships to maximize reach. As recommended in the HIE Study, the Agency continues to investigate ways to provide a Health IT Guide to educate the public on how Health IT can benefit both patients and providers.

HIECC Advisory Strategies

Ms. Fox initiated a discussion with HIECC members regarding the HIECC mission, committee scope, and organizational goals. She noted the need for enhanced member engagement in meeting content development. An updated Mission document was distributed to members for review and consideration.

Quarterly Inquiries - Ms. Fox specifically requested input on the following from members in the following areas:

- 1. Increasing Long-Term and Post-Acute Care engagement in HIE efforts
- 2. Development of new use cases for Florida HIE services
- 3. Promotion of ePrescribing of Controlled Substances
- 4. Increasing visibility of ongoing HIE efforts among providers

Dr. Saver provided feedback that financial assistance with the costs of ePrescribing of Controlled Substances could improve adoption.

Ms. Fox requested that members consider these inquiries and provide feedback to the Agency.

Next steps

The HIECC will meet again in December 2018.

New Action Items	Owner
Send Mr. Dalton a listing of upcoming outreach events	Agency Staff



Investigate how current social media efforts compare with other comparable organizations	Agency Staff
Investigate potential sources of funding for promotion of ePrescribing of controlled substances	Agency Staff
Consider Quarterly Inquiries and provide the Agency with feedback and suggestions	HIECC Members

With no further business to discuss, Mr. Dalton moved to adjourn, and Dr. Saver seconded, with no objections. The committee adjourned.

