

Committee Name: HIE Steering Committee	Committee Chair: Jenney Samuelson
Meeting Goals: 1) Welcome 2) HIE Collaborative Services Update 3) Consent Evaluation Plan 4) Tactical Plan Prioritization 5) Wrap-Up	Mtg. Facilitator: Naomi Hahr Mtg. Recorder: Stacy DeSisto Where: AHS – WSOC
	Conference: Cherry B Conference Rm/Call in Code:
	Date: Time: 10:30am – 12:30pm
<input type="checkbox"/> May contain Confidential/Exempt information	Skype Meeting Information:

Attendees (Present Bold) <i>Non-Voting Member in Italics</i>			
Name	Title	Name	Title
Jenney Samuelson, Chair	Deputy Commissioner, DVHA	Beth Tanzman	Executive Director, Blueprint for Health
Tracy Dolan	Deputy Commissioner, AHS	<i>Mike Smith</i>	<i>VITL, Vermont's Health Information Exchange Operator</i>
Tyler Gauthier	OneCare Vermont	<i>Liora Alschuler</i>	<i>Project Executive, Lantana</i>
Emma Harrigan	Vermont Association of Hospitals and Health Systems	<i>Sarah Kinsler</i>	<i>Health Care Project Director, The Green Mountain Care Board</i>
Linda Leu	Representing a person who engages with the health care system	<i>Andrew Laing</i>	<i>Chief Data Officer, ADS</i>
Georgia Maheras	Bi-State Primary Care Association	<i>Emily Richards</i>	<i>Program Director, HIE/HIT</i>
Jimmy Mauro	Blue Cross Blue Shield of Vermont	Naomi Hahr	<i>Program Manager, HIE/HIT</i>
Simone Rueschemeyer	Executive Director, Vermont Care Network	<i>Marie Bernier</i>	<i>Executive Assistant, HIE/HIT</i>

Non-Committee Members present			
Name	Title	Name	Title
Amerin Aborjaily	Associate General Counsel, GMCB	Mary Kate Mohlman	Health Services Researcher, Blueprint for Health
Katelyn Muir	Data Specialist, OneCare Vermont	Carolyn Stone	Director of Operations, VITL

	Agenda Item	Topic Facilitator	Schedule
I.	Welcome	Hahr	10:30
II.	HIE Collaborative Services Update	Carolyn Stone, VITL	10:30 – 10:40
III.	Consent Evaluation Plan	Mary Kate Mohlman	10:40 – 11:05
IV.	Tactical Plan Prioritization	Lantana/Velatura	11:05 – 11:15
V.	Wrap Up	Hahr	11:15 – 12:30

	Agenda Topic	Topic Facilitator	NOTES <i>(notes are provided in italics and blue)</i>	Action Items
I.	Welcome	Hahr	<i>Naomi welcomed the group to the sixteenth meeting.</i>	
II.	HIE Collaborative Services Update	Stone	<p><i>The Collaborative Services Project has 3 main areas of focus</i></p> <ul style="list-style-type: none"> <i>a) Master Patient Index (MPI); Selected vendor is Verato. One of the main objectives of Collaborative Services includes providing an Identity Management or Universal Master Patient Index (UMPI) that can be applied as a unique identifier for every patient in the state of Vermont regardless of where they obtained health care. Planned go live: Dec 1, 2019</i> <i>b) Terminology Services (tag data availability). Terminology services will be applied at the interface engine, which allows all data types, including sensitive data, to be queued, parsed, processed, and routed to only appropriate destinations. Planned go live: Apr 1, 2020</i> <i>c) Rhapsody Integration Engine (to provide a common entrance for all interface healthcare data)</i> <p><i>These three main areas of focus are considered Phase 1. Phase 1 is anticipated to be complete by the end of the year - by end of Q1 next year. Phase 2 is a future data platform. Currently, there is a self-made data warehouse paralleled by the clinical registry. The goal is to create one platform for the information; that can also accept sensitive data. Target completion date for phase 2 is January 2021.</i></p>	

III.	Consent Evaluation Plan	Mohlman	<p><i>The legislature asked for the state to “identify a methodology for evaluating the extent to which the public outreach regarding the VHIE, consent policy, and opt-out processes has been successful” and asked, “Can Vermonters meaningfully consent to whether or not their health care providers are able to view their health information available through the Vermont Health Information Exchange” – from these inquiries came the Consent Evaluation Plan, including the formation of a Committee.</i></p> <p><i>Mary Kate Reviewed the three-factored approach to the evaluation plan. Included in the plan is the development of an evaluation committee that adjusts surveys to reflect an ‘opt out’ world and who are determining: have we worded survey questions correctly? Are we asking the right questions? What are we missing? Etc. Data collection by the evaluation committee will piggy-back off existing surveys (not generating new ones). And finally, identify and access data sources that we may not currently be aware of.</i></p> <p><i>An invitation is extended to the Steering Committee members to connect Mary Kate with any persons who should be considered for the evaluation committee. Would like to convene the new committee by November 2019.</i></p>	<p><i>Connect any person who may be a good fit for the Evaluation Committee with Mary Kate.</i></p>
IV.	Tactical Plan Prioritization	Alschuler	<p><i>The steering committee, led by Alschuler, did an exercise to chart the level of priorities. They determined near term (next 12-18 months) scope, tactics and priorities. Committee discussed each tactic in the list & rated them high/medium/low priority.</i></p> <p><i>The Steering Committee recognized tactics that may be out of scope for the group, and future consideration of the role of HIE among the various activities in the state is necessary. During discussion, key points were made that duplication of work is ongoing, and we should assess the scope of what role the HIE Steering</i></p>	

			<i>Committee/VITL should play in such efforts, if any.</i>	
V.	Wrap-up		<i>The next meeting is scheduled for October 16, 2019.</i>	