

National Governors Association State Alliance on e-Health

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System**

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National Vision of Health Information Exchange

1. Patient Information



Expression Arrays
(various tissues)

Hospital eventsadmission, surgery, recovery, discharge



Personal genomics



X-rays, MRI, mamograms, etc



Clinical Record



Analysis lab notes

The Charter of the NGA State Alliance for e-Health

To establish a consensus based, executive level body of state elected and appointed officials to collectively address state-level health information technology issues and challenges to interoperable electronic health information.

Co-Chaired by:

The Honorable Phil Bredesen, Governor of Tennessee

The Honorable Jim Douglas, Governor of Vermont

NGA State Alliance for e-Health Membership

Voting Members

- Steve Carter, Indiana Attorney General
- Jane Cline, West Virginia Insurance Commissioner
- Herb Conaway, New Jersey State Assemblyman
- Jim Geringer, Former Governor Wyoming
- Richard Moore, Massachusetts State Senator
- Hardy Myers, Oregon State Attorney General Hardy Myers
- Sandy Praeger, Kansas Insurance Commissioner
- Ken Svedjan, North Dakota State Representative

Advisory Members

- January Contreras, Arizona Health Policy Advisor Office of the Governor
- Brian DeVore, Intel Digital Group,
- Steve Palmer, Texas Healthcare Policy Council Office of the Governor
- Assoc. Professor Georgetown University, Joy Pritts, JD
- Marshall Ruffin, MD, Accenture
- Wayne Sensor, CEO Alegent Health
- David Sundwall, MD, Executive Director Utah Dept of Health
- Reed V. Tuckson, MD, Exec. VP UnitedHealth Group

State Alliance for e-Health

Specific Objectives

- ❑ Address barriers to health information exchange and adoption of health IT, while preserving privacy, security and consumer protections.
- ❑ Build consensus in seeking the harmonization of the variations in state policies, regulations, and laws, where appropriate, and develop standards and/or guidance for modifying such policies, regulations, or laws.
- ❑ Allow for dialogue among states that will fuel creativity and partnership among states and with the private sector in the area of HIT.
- ❑ Allow for the appropriate input of experts and other working on health IT endeavors to inform state policymaking.

State Alliance

Working Taskforces

- **Health Information Protection Taskforce** will address issues related to privacy and security of health information exchange.
- **Health Care Practice Taskforce** will assess state law barriers to practice of medicine as it relates to telemedicine, medical liability, and health information exchange.
- **Health Information Communication and Data Exchange Taskforce** will address governance of health information exchanges, financial sustainability, relationship between public payers and state level health exchanges, and integration with public health program information.

Health Information Communication and Data Exchange Taskforce Charge

Support the State Alliance on issues regarding the appropriate roles for publicly funded health program in interoperable, electronic health information (eHIE).

Develop and advance actionable policy statements, resolutions, and recommendations for referral to State Alliance to inform their decision-making process in addressing ways in which states can enhance Medicaid, State Children's Health Insurance Programs (SCHIP), employee health benefits, and public health through cooperative HIE activities with the private sector.

State Alliance Taskforce on Health Information Communication and Data Exchange

- Convened for first meeting May 15, 2007
- Taskforce is schedule to complete its work by November 2007
- Has met for two subsequent public meetings to hear presentations from industry experts on:
 - Medicaid/SCHIP role in HIE/EHR
 - CMS role in financing Medicaid/SCHIP HIE/EHR
 - Public Health and HIE
 - State Employees and HIE/EHR

Taskforce Membership

- ❑ Co Chair Rhonda Medows, Georgia
Commissioner Dept. of Community Health
- ❑ Patricia Anderson, Minnesota
Commissioner of Employee Relations
- ❑ Ann Boynton, California
Undersecretary For Health and Human Services
- ❑ Devore Culver, Exec. Director
HealthInfoNet
- ❑ Christine Dutton, Pennsylvania
Chief Counsel to Dept of Health
- ❑ Edward Ewen, MD Director of
Clinical Informatics Christiana Care Health System
- ❑ Gregory Farnum, President
Vermont Information Tech Leaders
- ❑ David Gifford, MD, Rhode Island
Director Dept. of Health

- ❑ Co-Chair Anthony Rodgers, Director
Arizona Health Care Cost Containment System
- ❑ Steven Hill, Administrator
Washington Health Care Authority
- ❑ Steven Hinrichs, MD, Nebraska
Director of Public Health Lab
- ❑ J. Michael Leahy, CEO Oregon
Primary Care Association
- ❑ Ruth Turner Perot, Exec. Director
Summit Health Institute for Research and Education
- ❑ Michele V. Romeo, CIO New Jersey
Division of Medical Assistance
- ❑ Will Saunders, President ACS
Heritage
- ❑ Teresa M. Takai, Michigan Director
of IT
- ❑ Alan E. Zuckerman MD, Pediatrics
Georgetown University Hospital

Taskforce Work Products

- ❑ Conduct a survey and analysis of state coverage programs that cover large populations and identify opportunities within these programs that states can utilize to further eHIE. This analysis will include an assessment of the following state programs:
 - State Medicaid and SCHIP
 - State employee health benefits
 - State Public Health
- ❑ Provide an overview of the landscape of current state action to support the creation and operation of electronic health information exchange networks.
- ❑ Provide findings and recommendation to the State Alliance on e-Health

Taskforce Work Plan

- ❑ Received and discussed presentations from experts on HIE/EHR, CMS, public health, and state employee benefit.
- ❑ Examine Medicaid's and state's role in health information exchange.
- ❑ Examine Federal role in HIE.
- ❑ Examine the role of public health and state employee benefit programs play in advancing e-health.
- ❑ Review survey results of State Medicaid Agencies provided by subcontractors Shaun Alfreds and Jay Himmelstein, University of Massachusetts, Center for Health Policy and Research.
- ❑ Develop and agree on findings and recommendations to be submitted to State Alliance on e-Health.

Areas for Finding and Recommendations

The taskforce will make findings and recommendations in the following areas as it relates to Health Data Exchange and Communication:

- ❑ Leadership/Governance
- ❑ Consumer's Role
- ❑ Financial and Contributory Responsibility
- ❑ Interoperability
- ❑ Structure and Current Approach

General Conclusions

- General Consensus that state Medicaid/SCHIP programs, Public Health and state employee benefit programs have a significant role in deployment and adoption of health data and communication exchange.
- Federal partners must step up in their role as well.
- The Governors of each state will have an important role in the encouraging and facilitating the development of state-wide and interstate health data exchange.