

**ILHIE
COMMITTEE OF THE WHOLE
MEETING**

September 24, 2014

10:30 AM



- Welcome
- Roll Call
- Approval of Previous Minutes
- Preview of Board Meeting
 - Budget & Finance Committee
 - ILHIE RHIO Realignment Concept
- Public Comment
- Adjourn



ILHIE AUTHORITY BOARD MEETING

September 24, 2014
12:00 PM



- Welcome
- Roll Call
- Approval of Agenda
- Approval of Meeting Minutes [**action item**]



ILHIE Chair Report

Dave Holland



ILHIE Executive Director Update

Raul Recarey



Strategic Planning – ILHIE RHIO Realignment Concept

Raul Recarey

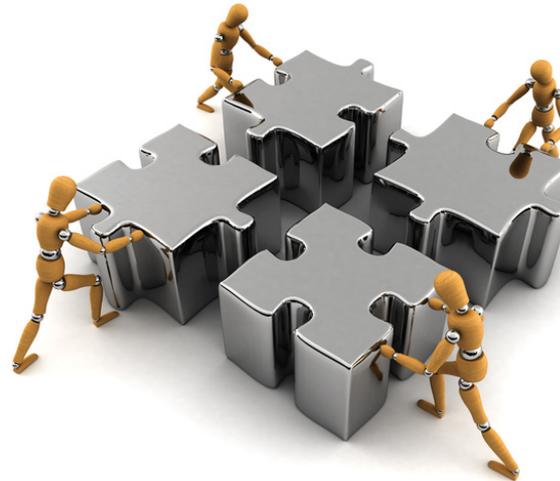


Idea for Board Thoughts and Comments

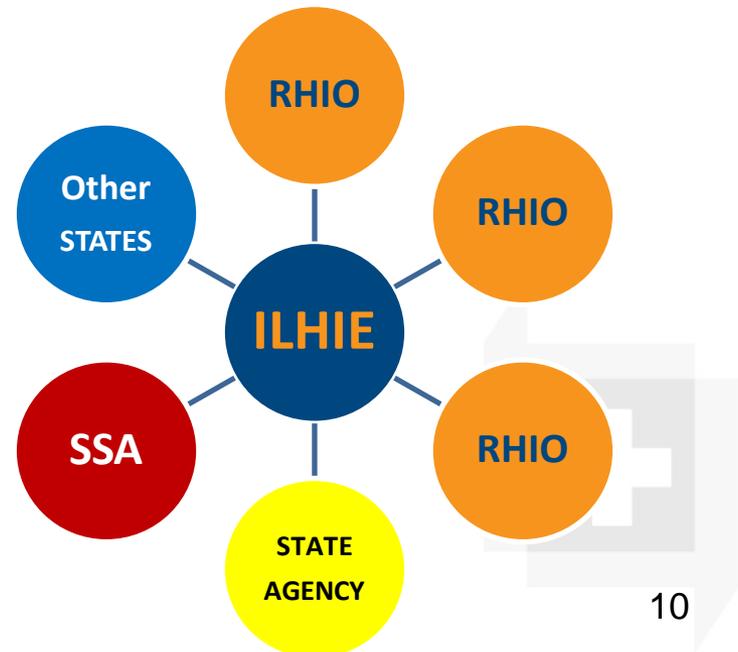


- Our current format is fostering competition, not synergy.
- This competition is increasing costs, not reducing it.
- Provider market sees RHIO and ILHIE costs as duplicative.
- **Together** may be a better way to arrive at our destination.

So what's the idea?



- Restructure ILHIE only as the network hub – RHIOs would become the “last mile” for all services.
- ILHIE connects networks – RHIOs connect providers.
- ILHIE continues and expands sister agency connectivity.
(Example: **Public Health**)



- Lack of alignment has created market confusion and a hesitancy to connect to any HIE.
- Realignment would reduce uncertainty and encourage connectivity.
- Increased market certainty results in more connections, greater volume and creates a single point of connection to all providers in IL.
- A central/single point of connection to all providers is attractive to payers, who then participate via a **PMPM** fee.

3 Steps needed for Success

1. Obtain acceptance for the plan from RHIOs.
2. Obtain acceptance for the plan and firm commitments from Payers.
3. Obtain formal approval of the plan from this board.



What would ILHIE need to do?

- Stop connecting providers directly – work exclusively* with existing HIOs.
- Make RHIO connectivity to ILHIE at very low or no cost to RHIOs.
- Establish pre-agreement with payer community.

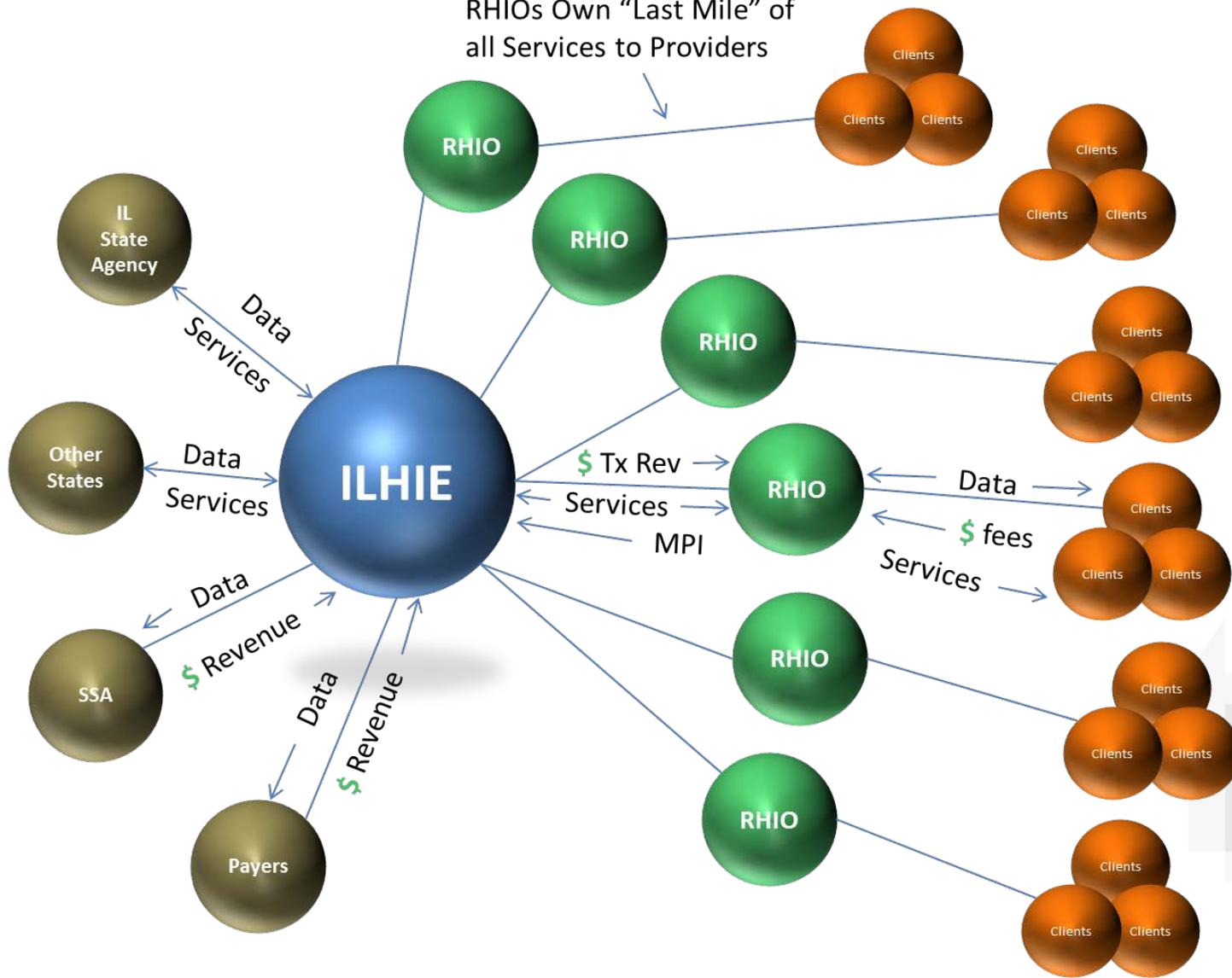
***Likely grandfathering of existing direct connections**

By not competing, ILHIE becomes revenue-producing
*partner with RHIOs.



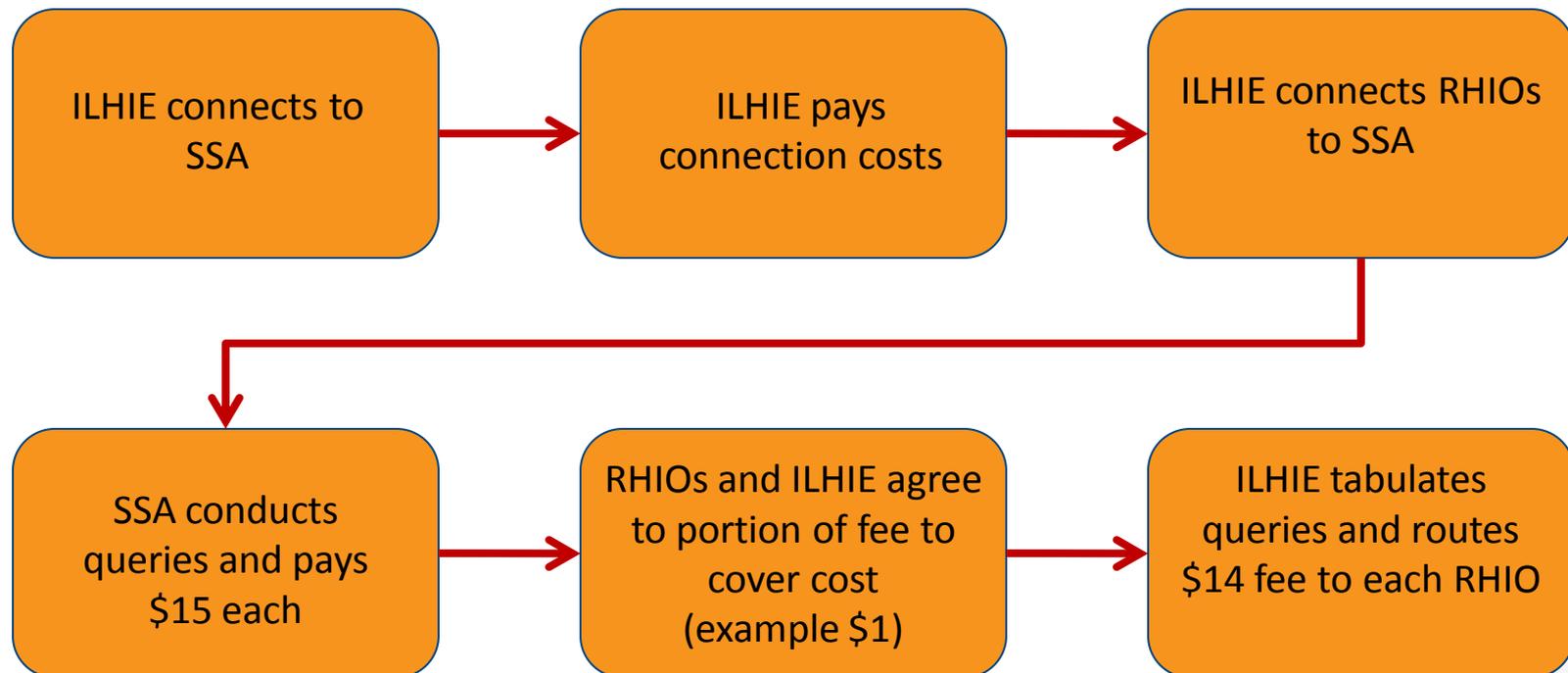
Reorganizing HIE in Illinois

RHIOs Own "Last Mile" of all Services to Providers



Example 1 of RHIOs as “Last Mile”

Connection to the Social Security Administration(SSA):



What would RHIO's need to do for this to work?

1. Agree to participate in ILHIE as state MPI.
2. Agree to expand original geographic boundaries.
3. Need new group (or expanded functionality of an existing group) to provide inexpensive services to small provider groups.
4. Assist with selling the value proposition to Payer community.



3 IMPORTANT POINTS TO REMEMBER

1. This is only an idea being explored for feasibility at this point, no assurance it will work.
2. Until a RHIO-ILHIE alliance can show a value proposition to Payers, Payers won't pay.
3. Even if successful, there may be a “ramp up” on:
 - a) Timing
 - b) Amount of Payer participation

ILHIE Executive Director Update

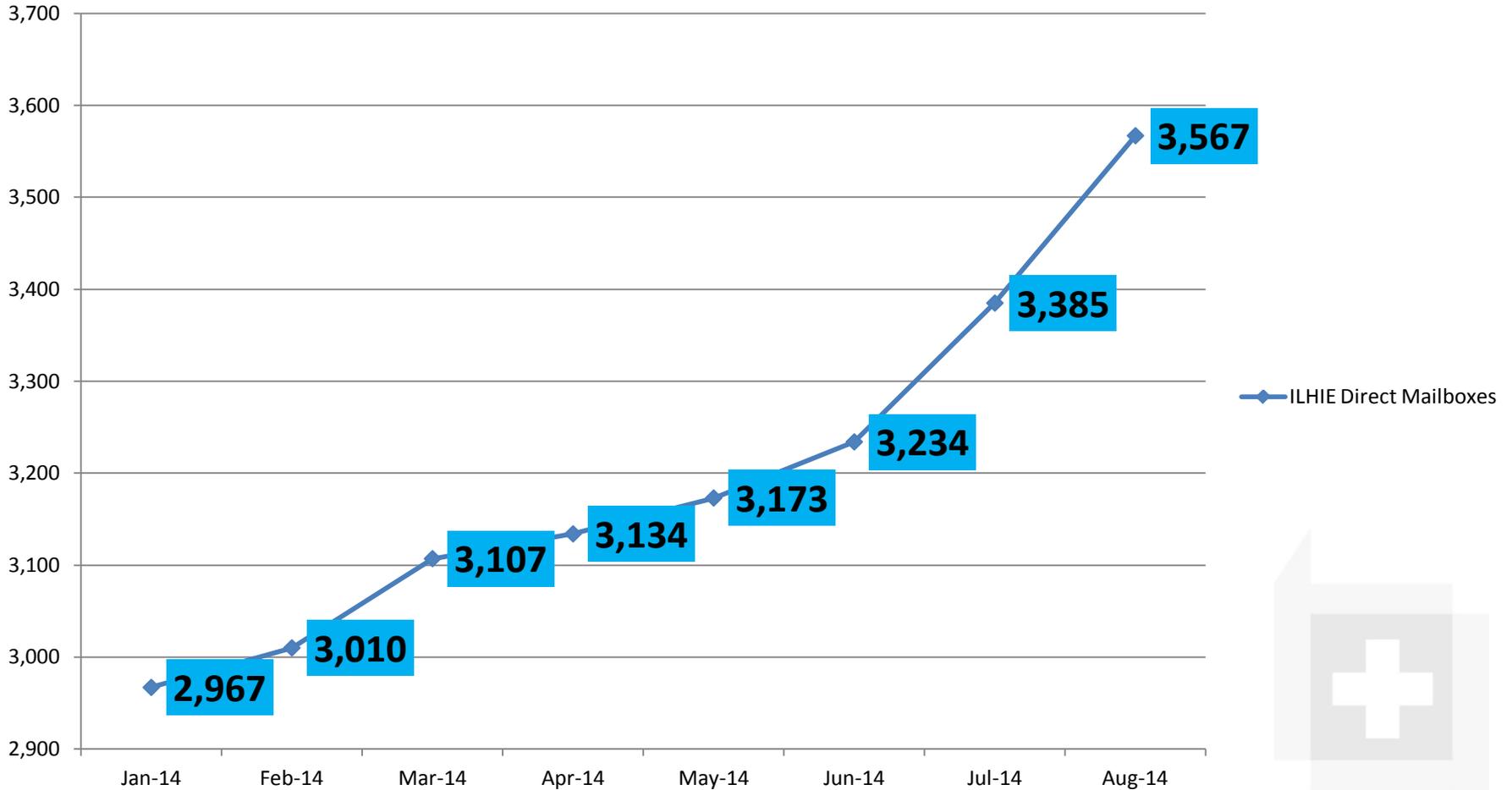
ILHIE IMPLEMENTATION



ILHIE Direct Implementation



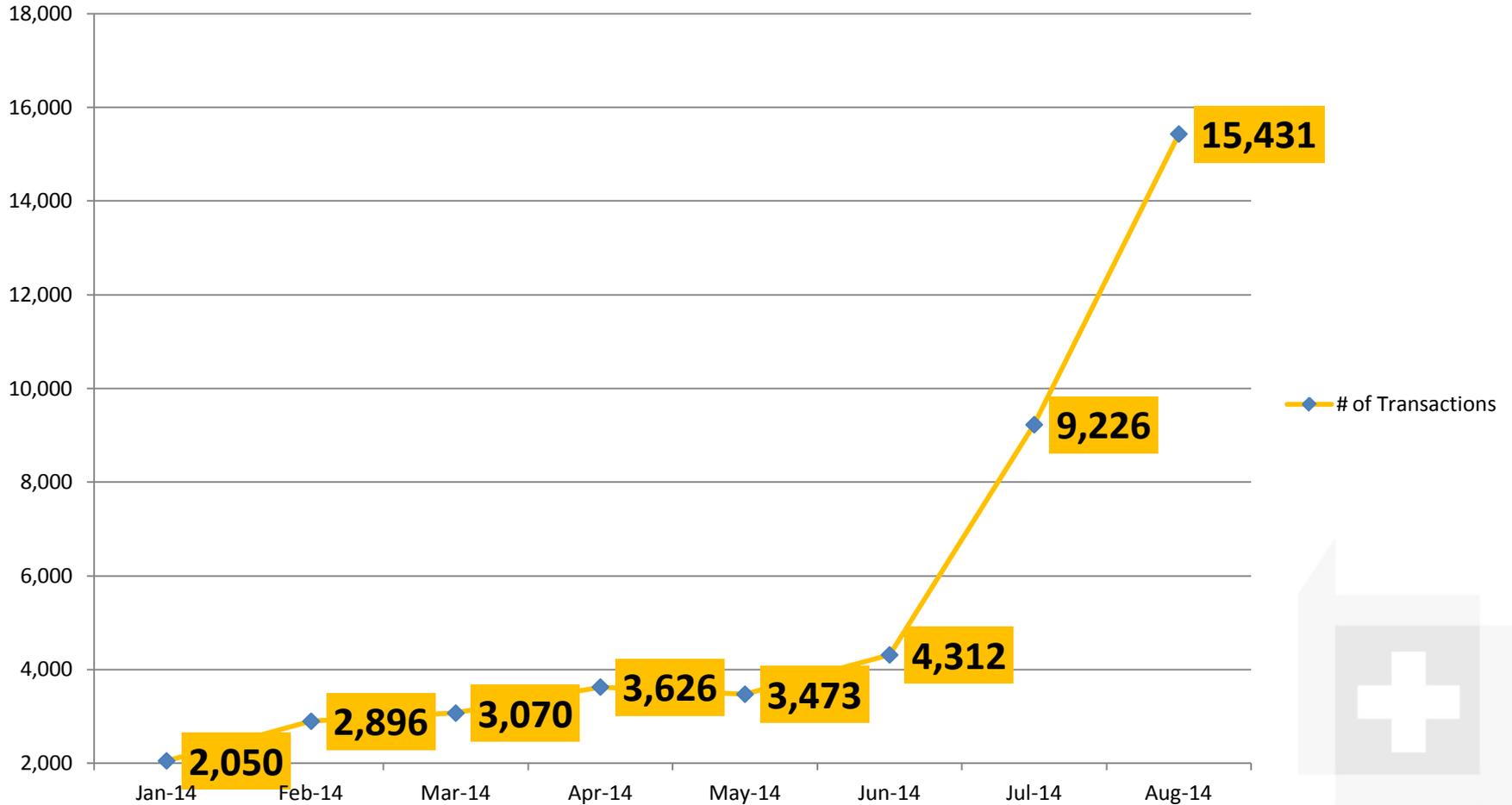
Total ILHIE Direct Mailboxes (cumulative)



ILHIE Direct Implementation



ILHIE Direct Transactions Per Month (not cumulative)



ILHIE Integrated Direct Implementation

- Completed Integrated Direct Implementations (14)
 - Alexian Bros. Medical Center
 - Carle Foundation
 - Elmhurst Hospital
 - Hammond Henry Hospital
 - Kirby Hospital
 - LaRabida Hospital
 - Loretto Hospital
 - Loyola University Health System
 - Lurie Children's Hospital (in production pilot phase)
 - Memorial Hospital, Belleville
 - Clinics Memorial Hospital, Belleville
 - NorthShore University Health System (4 hospitals)
 - Roseland Hospital
 - Sarah Bush Lincoln Hospital



ILHIE Integrated Direct Implementation

- Integrated Direct Implementations in Process (9)
 - Bethany Methodist Hospital
 - Kish Health*
 - Marianjoy Rehabilitation Hospital*
 - Massac Memorial Hospital*
 - Memorial Hospital, Chester*
 - Mendota Hospital*
 - Morris Hospital*
 - St. Margaret's Hospital
 - Southern Illinois Healthcare

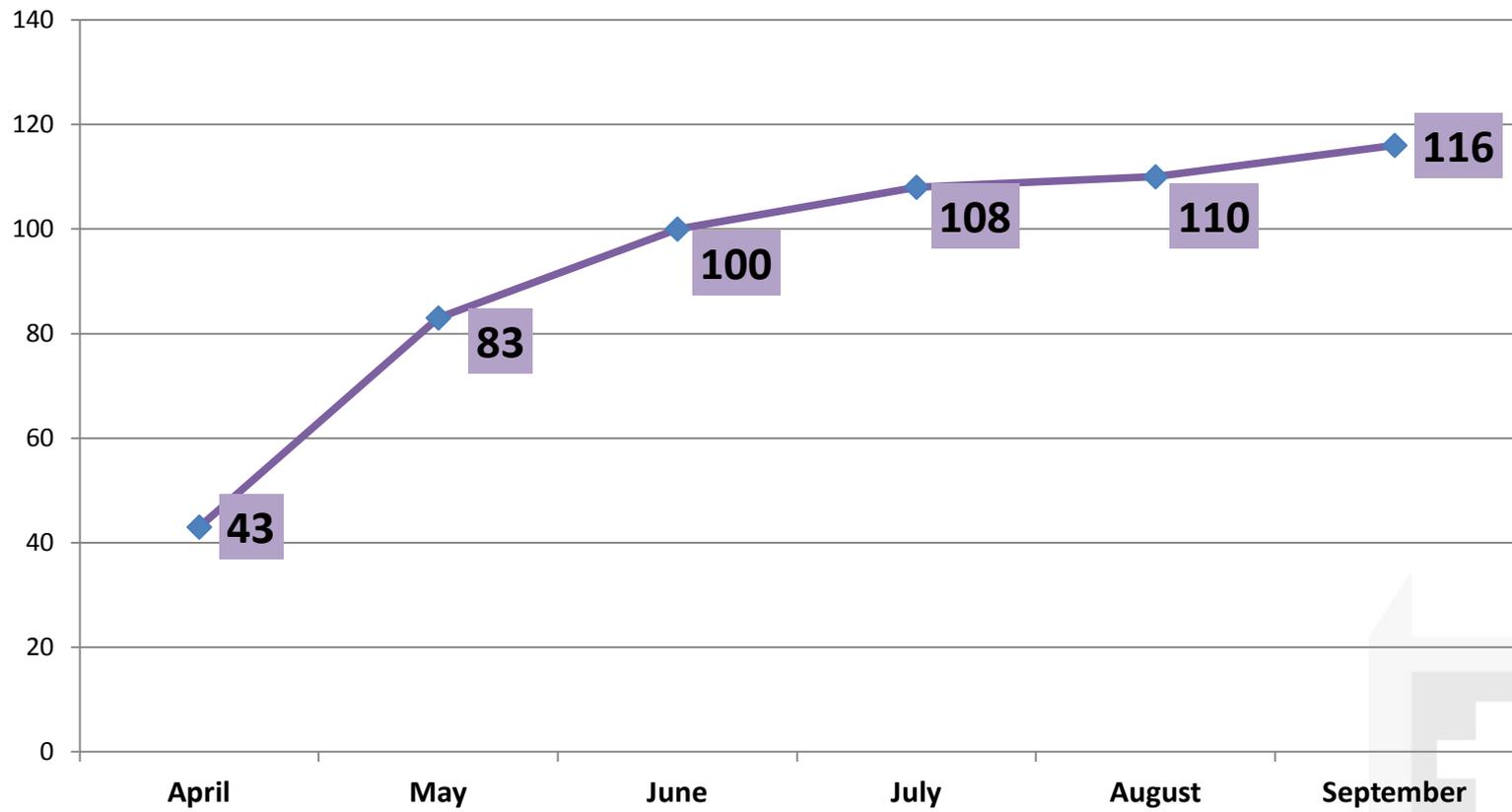
*Within a week of project completion

ILHIE Direct Top 10 Users – August 2014

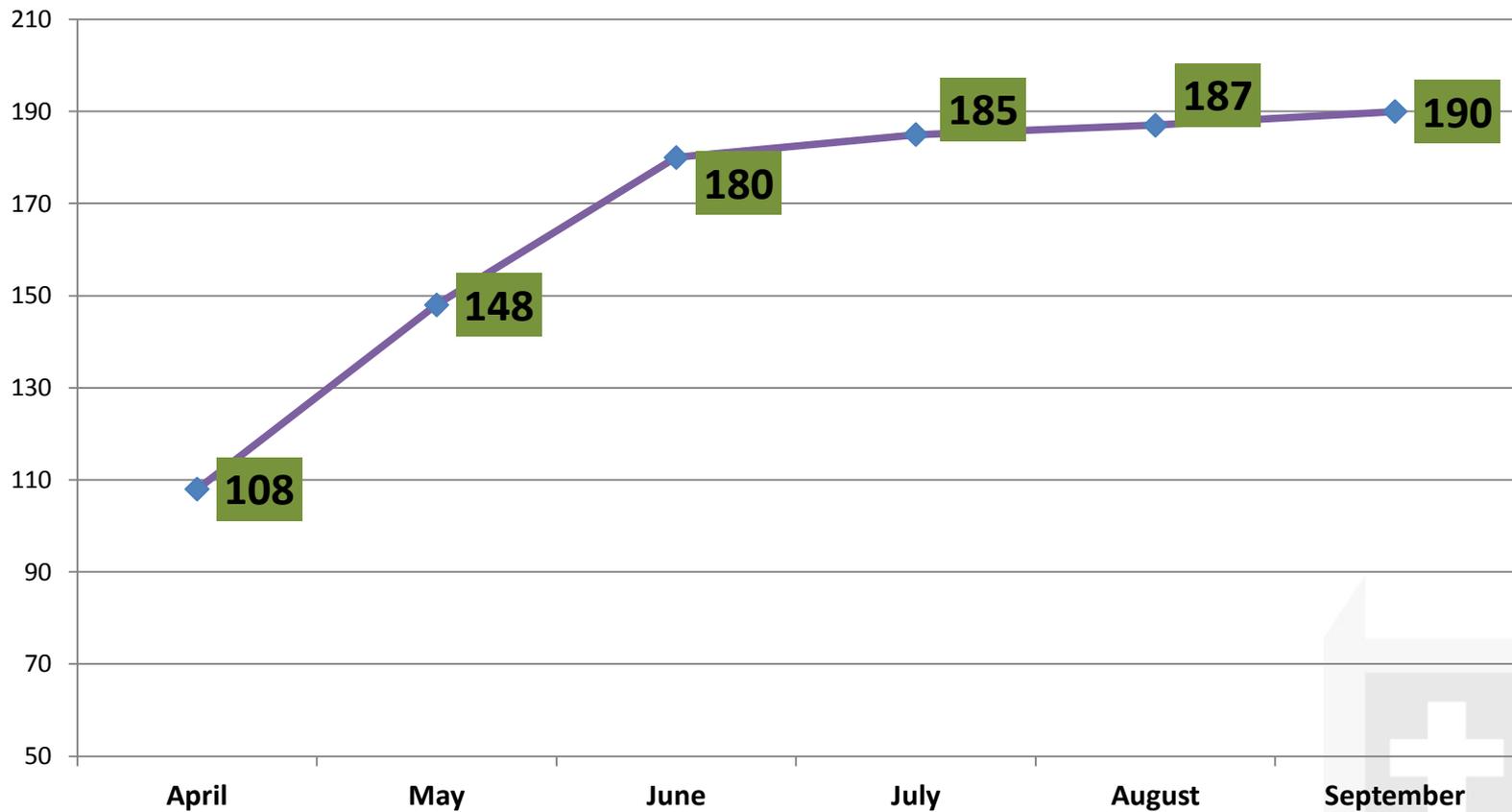
DIRECT USER	TRANSACTIONS
1. Memorial Hospital, Belleville*	3,930
2. Clinics of Memorial Hospital, Belleville*	3,867
3. NorthShore University Health System*	802
4. Sarah Bush Lincoln Hospital*	618
5. Alexian Brothers Medical Center*	456
6. Elmhurst Memorial Hospital*	307
7. Illinois Health Insurance Marketplace	299
8. Health Resource Solutions	268
9. Northwestern Lake Forest Hospital	254
10. Lexington Health	223

***Integrated Direct**

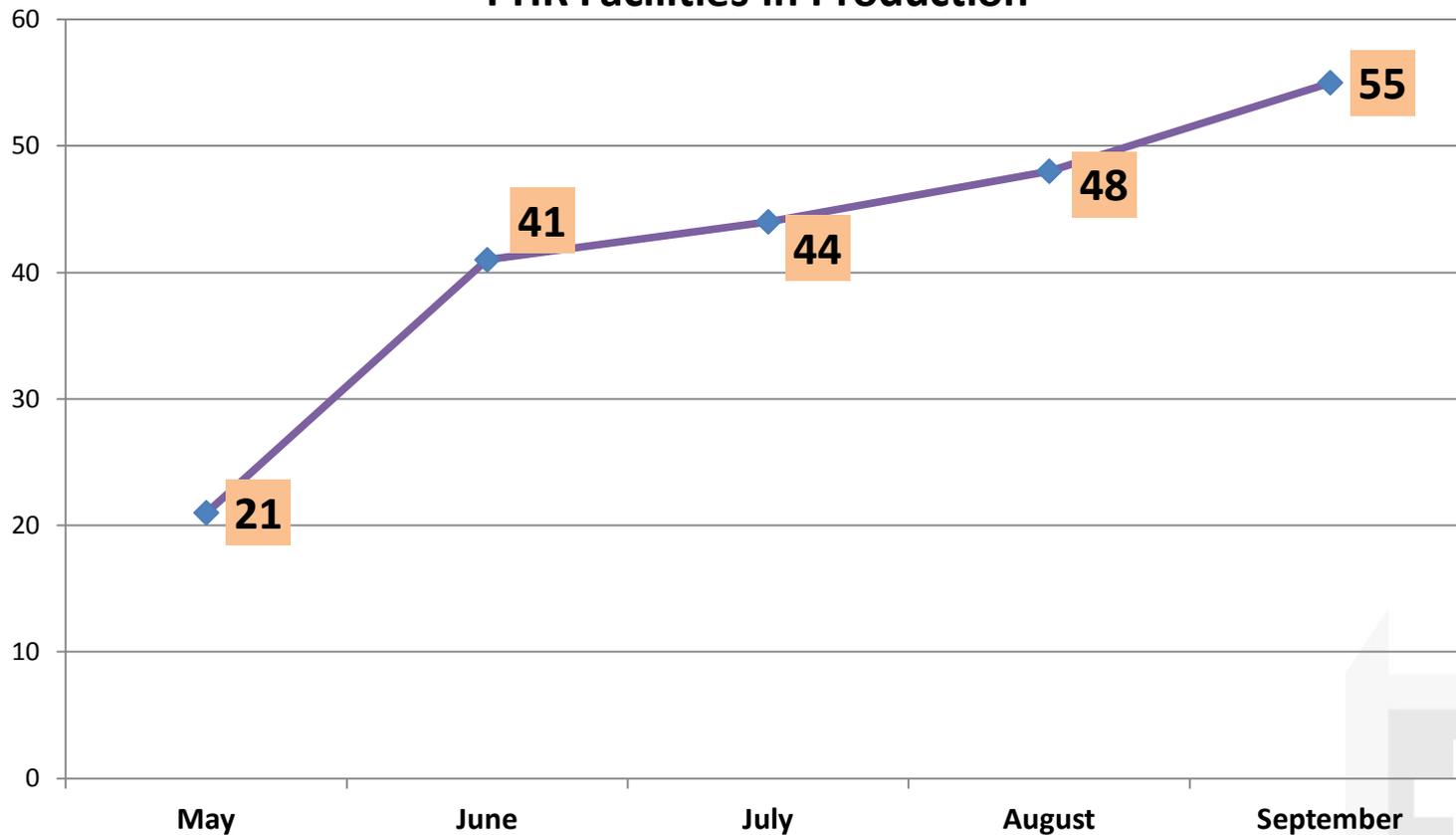
PHR Conduit Agreements



Connected PHR Facilities

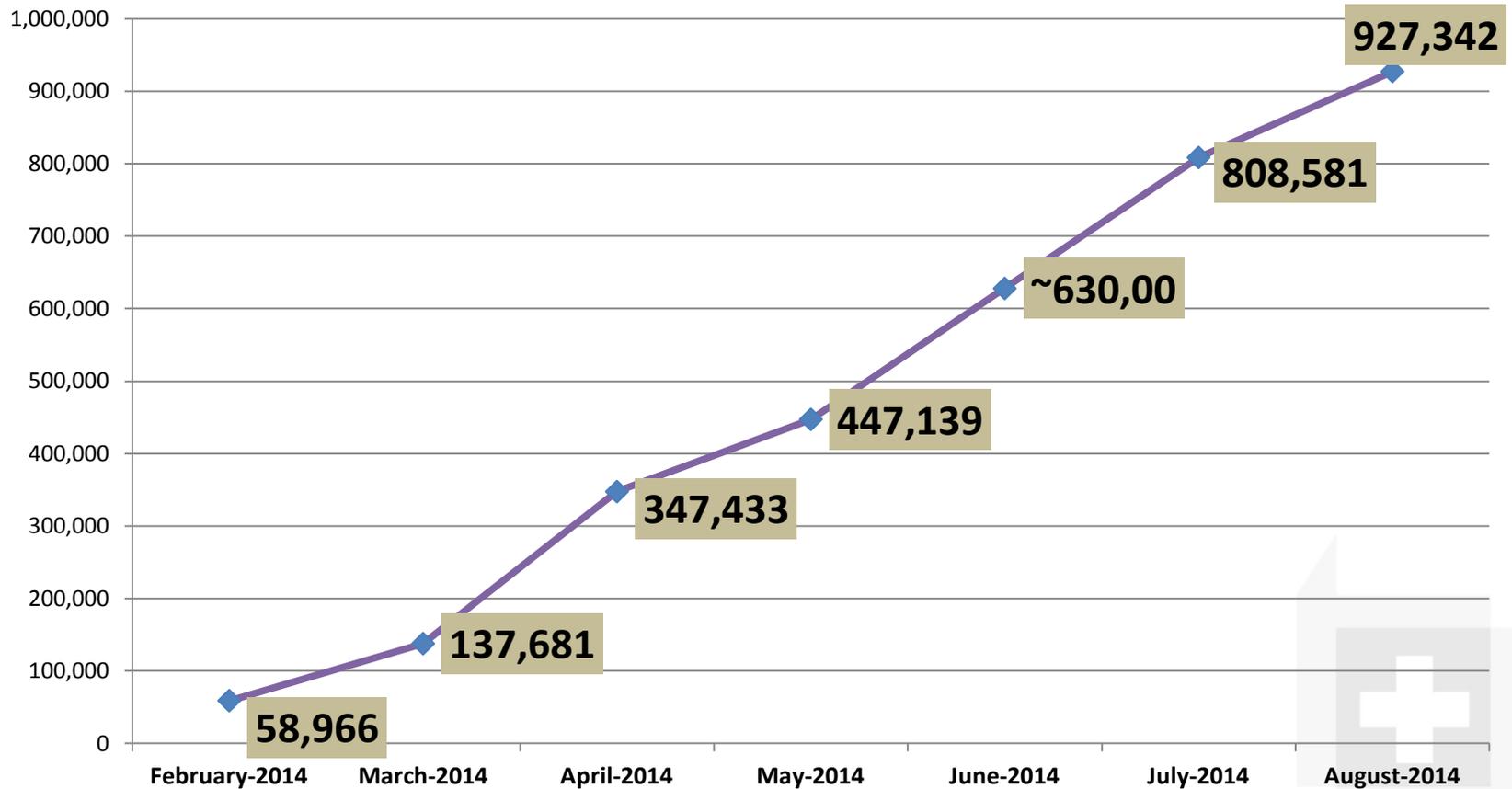


PHR Facilities in Production*



*Not including 37 Cook County Syndromic Feeds

Total PHR Transactions



Current ILHIE Pipeline for Connectivity

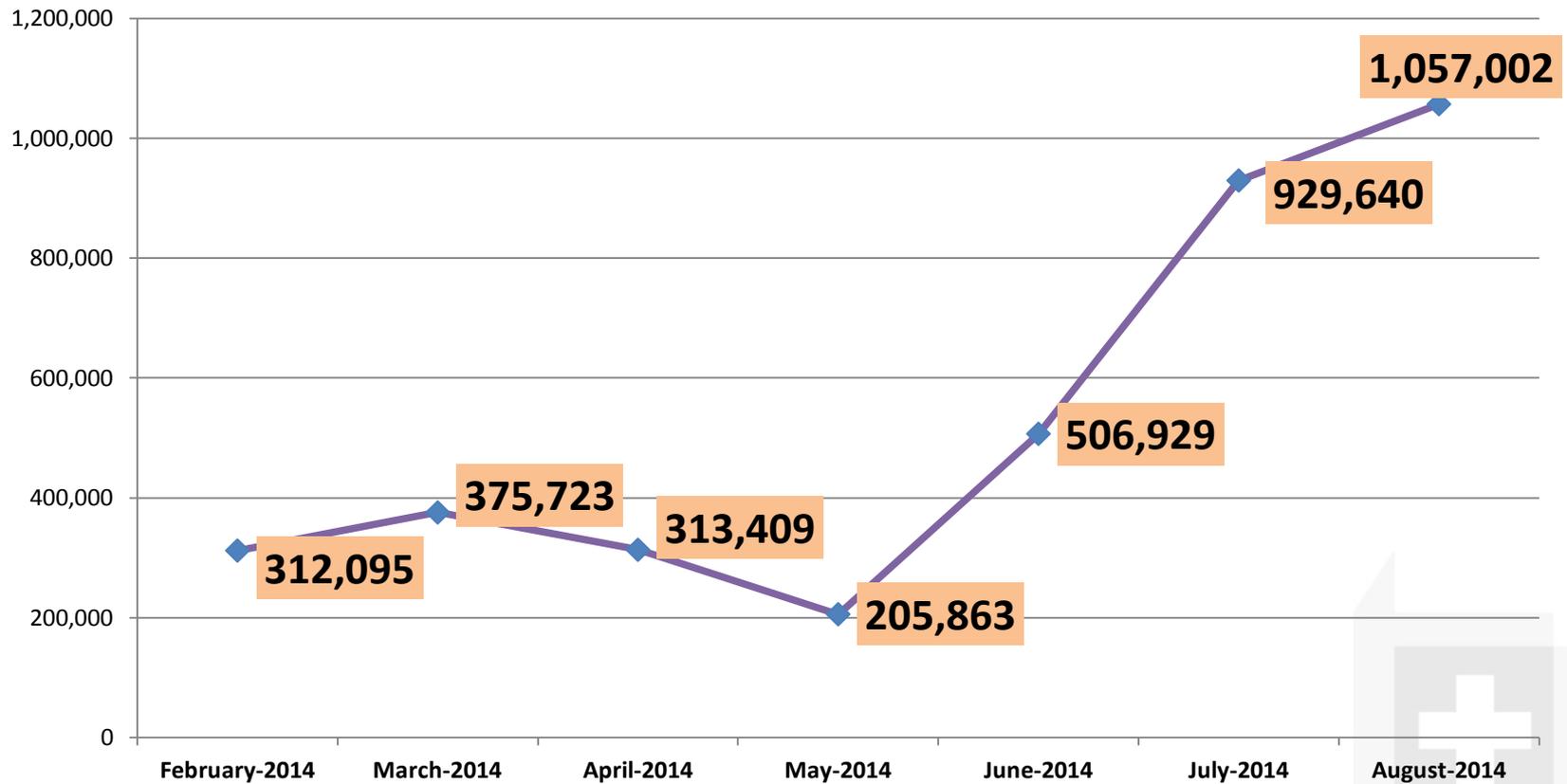
#	Organization	Type of Organization	EHR/HIE	Type of Connection
1	Missouri Health Connection (MHC)	State HIE	ISC	ILHIE Connect State-to-State Connectivity
2	Loyola Health System	Hospital System	Epic	1) Integrated Direct ✓ 2) ILHIE Connect
3	Vista Hospital	Hospital	Cerner	ILHIE Connect
4	UIC Hospital	Hospital	Cerner	ILHIE Connect
5	Central Illinois Health Information Exchange (CIHIE)	Regional HIE	ICA	ILHIE Connect HIE-HIE Exchange
6	Lurie Children's Hospital	Large Hospital	Epic	1) Integrated Direct ✓ 2) ILHIE Connect
7	NorthShore Health System	Hospital System	Epic	1) Integrated Direct ✓ 2) ILHIE Connect
8	Metro Chicago Health Information Exchange (MCHIE)	Regional HIE	Sandlot	ILHIE Connect HIE-HIE Exchange

Completed ILHIE Connections

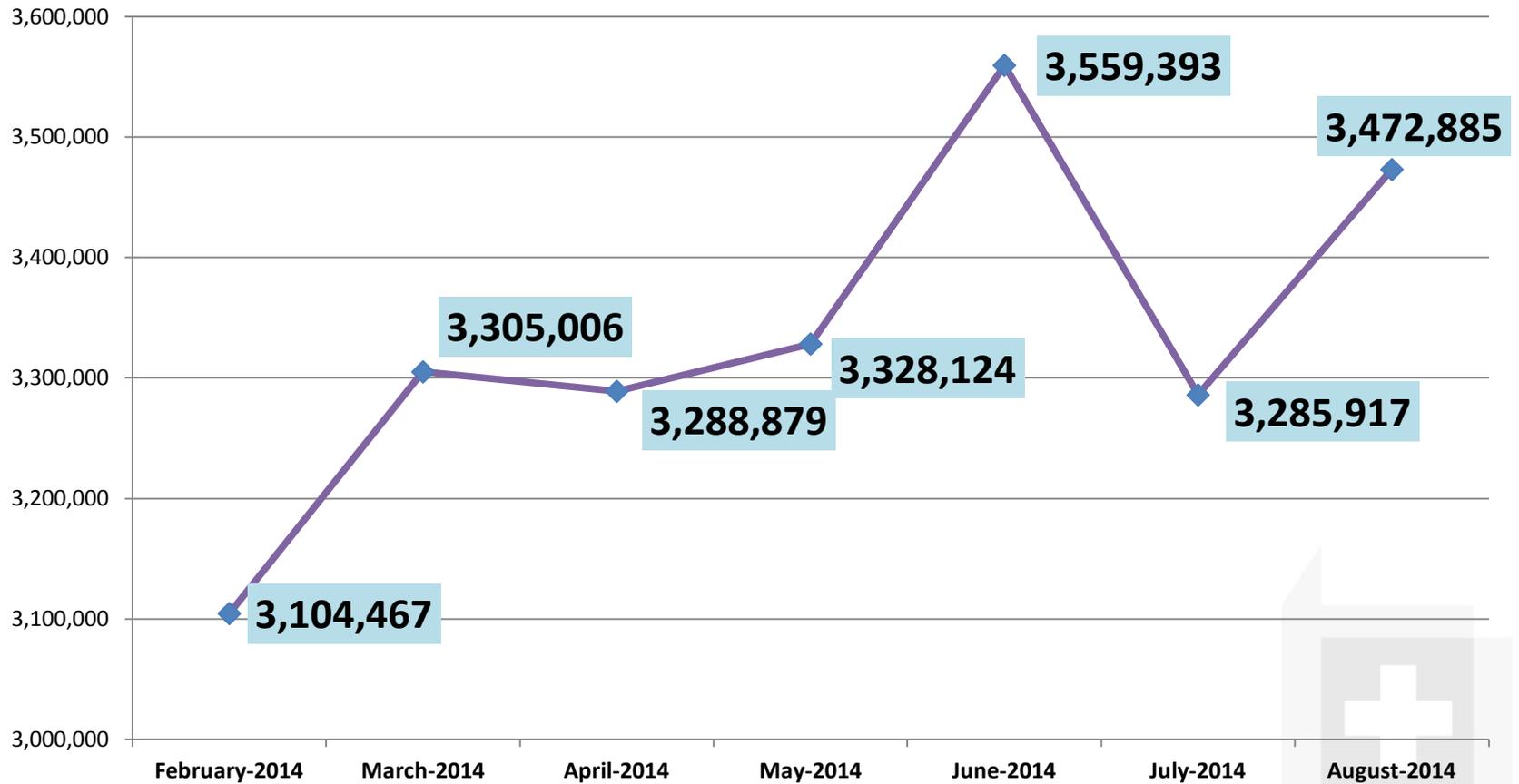


#	Organization	Type of Organization	EHR/HIE	Type of Connection	Go Live Date
1	Healthcare and Family Services (HFS)	State Agency	N/A	Base MPI Feed	Sep 2013
2	Illinois Department of Public Health Reporting (IDPH)	State Agency	N/A	Public Health Reporting	Sep 2013
4	Five (5) Alliance Sites	FQHCs	GE Centricity	MPI Demographic Feed	Dec 2013
3	SIHIE (12 Entities)	Regional HIE	NextGen	MPI Demographic Feed	Jan 2014
5	Loyola Health System (2 Hospitals)	Hospital System	Epic	MPI Demographic Feed	June 2014
6	Franklin, Paris, Fairfield & Clay Hospitals (4 Hospitals)	CAHs	HMS	MPI Demographic Feed	June 2014

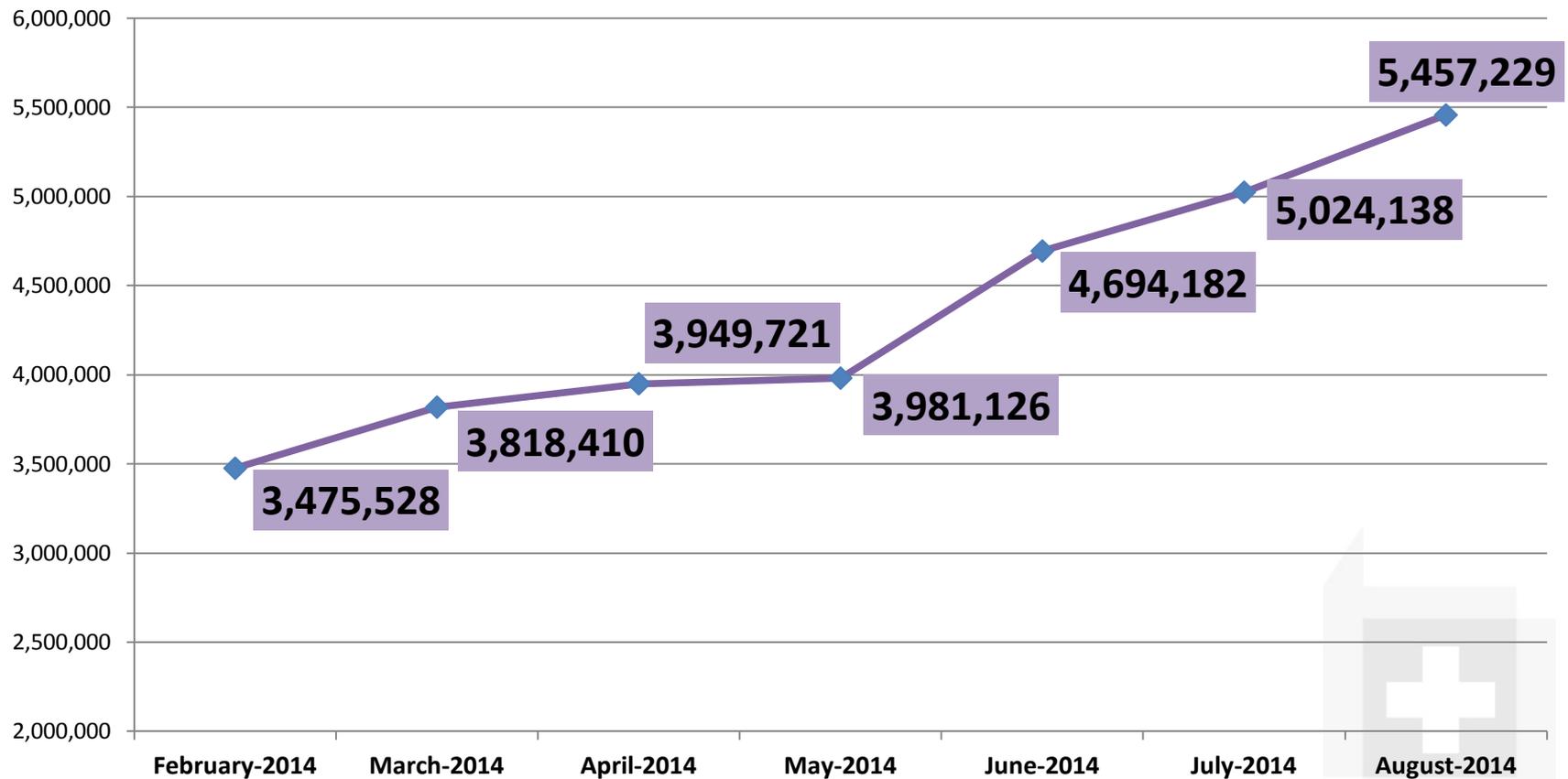
Total Clinical Setting Transactions



Total HFS Transactions



Total Transactions All Feeds



- On August 25, Governor Quinn signed HB5925 into law.
- PA 98-1046 aligns several Illinois laws with HIPAA requirements to facilitate sharing of health information:
 - AIDS Confidentiality Act
 - Genetic Information Protection Act
 - Clinical Laboratory and Blood Banks Act
- PA 98-1046 will be effective on January 1, 2015.

Budget and Finance Committee Report

Thomas Nowak



Revision to ILHIE Authority Fiscal Policies Manual

- *Account Collection Procedures* replacing *Write-Off Authorization Procedures and Allowance for Doubtful Accounts.*



Financial Activity

Thomas Nowak
ILHIEA Treasurer



INCOME STATEMENT February 10 - June 30, 2014

REVENUES	
Federal Funding	\$5,223,880
Direct Messaging & Interest Income	\$105,579
TOTAL REVENUES	\$5,329,459

EXPENSES	
Staff Salaries	\$446,115
Staff Employer Contributions	\$294,112
ISC Contract Expenses	\$1,031,648
Other Expenses	\$79,390
TOTAL EXPENSES	\$1,851,265
NET INCOME	\$3,478,194

INCOME STATEMENT February 10 - June 30, 2014

ISC CONTRACT EXPENSE DETAIL

MPI Synchronization Projects (Five HL7 Connections to Hospitals)	\$377,872
Implementation Support Services	\$302,400
Data Center Operations	\$300,000
Direct Secure Messaging Mailboxes, HER Integration, and Support Services	\$51,376
TOTAL CONTRACT EXPENSE	\$1,031,648



ILHIE FINANCIAL UPDATE



BALANCE SHEET as of June 30, 2014

ASSETS	
Cash Fund	\$4,559,639
Accounts Receivable	\$38,082
TOTAL ASSETS	\$4,597,721

LIABILITIES	
Accounts Payable	\$1,118,448

EQUITY	
Total Equity	\$3,479,273
TOTAL LIABILITIES & EQUITIES	\$4,597,721

FINANCIAL HIGHLIGHTS AS OF JUNE 30, 2014

INCOME STATEMENT FOR FEBRUARY 10 - JUNE 30, 2014

- Maximum \$5,223,880 earned from the federal grant
- Staff Salaries & Contributions = \$740,227
- ISC Contract Expense = \$1,031,648
- HR Support = \$32,852 (\$10,951/ month which started in April)
- Net Income = \$3,478,194

BALANCE SHEET

- Cash Funds available for use = \$4,559,639
- Accounts Receivable = \$38,082
- Accounts Payable = \$1,118,448

ILHIE FINANCIAL UPDATE



INCOME STATEMENT JULY 1- AUGUST 31, 2014

REVENUES	
Direct and Integrated Direct Funding	\$115,440
Interest & Misc. Income	\$3,269
TOTAL REVENUES	\$118,709

EXPENSES	
Staff Salaries	\$183,092
Staff Employer Contributions	\$123,229
HR Support	\$22,272
Other Expenses	\$22,697
TOTAL EXPENSES	\$351,290

NET INCOME	(\$232,581)
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ILHIE FINANCIAL UPDATE



BALANCE SHEET AS OF AUGUST 31, 2014

ASSETS	
Cash Fund	\$3,236,285
Accounts Receivable	\$97,896
TOTAL ASSETS	\$3,334,181

LIABILITIES	
Accounts Payable	\$87,244

EQUITY	
Total Equity	\$3,246,693
TOTAL LIABILITIES & EQUITIES	\$334,181

FINANCIAL HIGHLIGHTS AS OF AUGUST 31, 2014

INCOME STATEMENT FOR JULY 1 – AUGUST 31, 2014

- Staff Salaries & Contributions = \$306,321
- HR Support = \$22,272
- Net Income = (\$232,581)

BALANCE SHEET:

- Cash Funds available for use = \$3,236,285
- Accounts Receivable = \$97,896
- Accounts Payable = \$87,489

ILHIE Advisory Committee Update



Regional HIE Updates



MCHIE

SIHIE

LLHIE/IHEP

NIHIE

CIHIE

TriRivers Health Partners



Regional Extension Center Updates



CHITREC

ILHITREC



PUBLIC COMMENT



Next Meeting: November 12, 2014
in Chicago, IL

