



## Telehealth Workgroup Minutes

Office of Health Information Technology  
James R. Thompson Center, 100 W Randolph, 2-201  
December 13th, 2011; 10:00 AM  
877.402.9757 / PC 4269321

### Participants (in-person and via phone):

Name	Organization
Laura Zaremba	Office of Health Information Technology (OHIT)
Mary McGinnis	OHIT
Ian Bertorelli	OHIT
Bob Flider	Partnership for a Connected Illinois (PCI)
Glenn Groesch	Southern Illinois University (SIU)
Sunil Hazaray	American Telemedicine Association (ATA)
Nancy Kaszak	University of Illinois
Joshua Sarver	SIU
Pat Schou	Illinois Critical Access Hospital Network
Deborah Seale	St. Louis University
Kathy Webster	Loyola University Medical Center
Bob Wesley	SIU
Wesley Valdes	Intermountain Health Care

**Laura Zaremba (Laura)** took roll call and made introductions. She then brought to the work group's attention that **Wesley Valdes (Wes)** was taking a position at Intermountain Healthcare in Utah and would be stepping down as chairperson of the work group. She offered to chair the meeting up to the agenda point about the chair transition; no members objected.

**Bob Wesley (Bob)** motioned to approve the minutes of the previous meeting. **Joshua Sarver (Josh)** seconded and the minutes were approved.

**Laura** gave an update on the Illinois Health Information Exchange (ILHIE), announcing that the first ILHIE service, ILHIE Direct, will be launched before the end of the calendar year. ILHIE Direct is a secure messaging solution that will be available to Illinois providers trying to meet the clinical exchange requirements of Meaningful Use. **Laura** explained that the service is intended for those Illinois providers registered for incentive payments that currently have no method to electronically exchange information outside of their entities, but since ILHIE Direct is the first statewide service being offered OHIT expects that many additional uses beyond meeting the Meaningful Use core objective will be developed. The ILHIE website will host an explanation of the service, as well as tutorials on registration and usage. Since OHIT is leveraging federal funds provided to build out the state's HIE infrastructure, this service will be offered to Illinois providers at no cost through the end of the 2012 calendar year in an effort to facilitate information exchange and assist providers in meeting Meaningful Use. **Laura** expects that secure messaging could be used for telehealth services and said that she was looking forward to hearing the group's thoughts on ILHIE Direct.

Applauding the service as a great first step, **Sunil Hazaray (Sunil)** asked if ILHIE Direct supported the secure transmission of data or was restricted to messaging. **Laura** explained that it could be used to send data such as patient care summaries, referral, and lab results in an unstructured form or as structured data generated from an EHR. She noted that the service's "beauty and limitation" was its simple functionality as a transport mechanism: providers do not have to be sophisticated users to begin exchanging, but ILHIE Direct does not

offer any of the data aggregation or other features that the ILHIE core services being implemented in 2012 will offer.

**Laura** opened the meeting up for discussion about the transition of the work group chair. **Wes** announced that **Sunil** offered to assume the chair position and expressed his approval and support in the absence of any objections. **Wes** and **Sunil** sat down at the mHealth summit and went over some high-level primary goals regarding the ILHIE Authority, as well as various papers that were in process and had been put forward already. **Bob** announced that in a discussion between himself, **Josh**, and **Glenn Groesch (Glenn)**, **Glenn** had expressed interest in the role. **Bob** wondered if **Sunil** would be willing to develop a specific relationship with **Glenn** in the proceedings of the work group. **Wes** raised the possibility of **Sunil** and **Glenn** co-chairing and asked if the work group found that acceptable. **Bob** expressed approval. **Pat Schou (Pat)** agreed, adding that **Sunil's** knowledge and experience and **Glenn's** work in the Illinois telehealth community would be an excellent combination. **Laura** echoed these sentiments, and since there did not seem to be any objections from work group members, she suggested that the work group entertain a motion to have **Sunil** and **Glenn** proceed as co-chairs. **Bob** raised this motion and **Pat** seconded it. **Sunil** said that he looked forward to working with **Glenn** and reiterated that the combination his telehealth experience and **Glenn's** knowledge of telehealth activities in the state would be productive; **Glenn** agreed. **Laura** requested that, prior to the work group meetings, **Sunil** and **Glenn** decide which one of them would perform the functions of the chair during the meeting, and also requested that they set up protocol for informing OHIT if the chairperson will be absent from a meeting so arrangements can be made to make the meeting possible. **Sunil** agreed, adding that a meeting between **Glenn**, **Ian Bertorelli (Ian)**, and himself would allow them to clearly coordinate meetings and prepare minutes. Both **Glenn** and **Ian** concurred. **Mary McGinnis (Mary)** said that OHIT would set the transitional meeting up and listed future agendas and the current meeting time as topics of discussion.

The meeting moved on to open discussion. **Wes** gave the group an update on research initiatives being undertaken by the ATA and National Institutes of Health (NIH). The ATA Research Task Force will be creating a research agenda stating the status of telehealth research and identifying weak/strong areas. This agenda will be presented at the ATA's annual meeting with the hope that it will influence how research is done over the course of the next year. The NIH's efforts, centralized between the Clinical and Translational Science Awards (CTSA) programs, are focusing on facilitating research by collecting validated measurement tools and developing a process for the validation of new measurement tools. As more and more researches in and out of state pursue telehealth research given the wealth of grant money being issued, they will be encouraged to use these validated tools so studies can easily be compared against each other and the overall quality of research will be enhanced.

**Wes** then congratulated **Deborah Seale (Deb)** on her new position at St. Louis University. He addressed his own relocation to Intermountain Healthcare, saying that although he was moving, he would be pursuing the same agenda, strategy, and concepts that he was in Illinois and would remain open as a resource to the group if they had questions or required information.

**Glenn** asked how **Wes's** presentation of the work group's Recommendations paper was received by the ILHIE Advisory Committee. **Wes** described his presentation, saying he gave brief overarching description of telehealth and its role in HIE. He highlighted the work group's understanding that while the discussions surrounding HIE usually focus on data points, telehealth allows knowledge to be shared between two parties and that this is the strongest form of exchange. He thought the recommendations were received well, and although there

were not any questions at the time of the presentation, **Wes** received follow-up inquiries from committee members afterwards.

**Laura** commented on the recommendations, stressing how helpful it was to document specific use cases moving forward into core service implementation. She asked the group members if any of them attended the initial whiteboard session that OHIT had with its technology implementation vendor, InterSystems. **Pat** replied that she had not, but said that her colleague, Mary Ring, thought it was successful and expressed appreciation that OHIT provided a setting for that kind of open discussion. **Laura** explained that the purpose of the sessions is to bring a greater level of specificity to the initial use cases that the ILHIE will support, to bring a greater level of specificity to how the core and peripheral services will facilitate these cases, and to assist in continuing to develop the services in a way that is responsive to the needs of stakeholders, providers, and patients. She added that since the ILHIE's implementation will be incremental, the whiteboard sessions will serve as the primary conduit for disseminating that information into the public domain and getting feedback from users. There are two more sessions scheduled, (January 10<sup>th</sup> and February 20<sup>th</sup>), and after those sessions they will continue on quarterly through the multi-year implementation process. **Laura** encouraged any work group member interested in getting on the distribution list for the whiteboard session to email Saroni Lasker. She then reiterated how important it is to have use cases documented in forms like the work group's Recommendations to the ILHIE Advisory Committee so that they may be factored in as the work plan is developed during these whiteboard sessions.

**Wes** asked if the members had any additional comments. **Deb** asked him if he was planning to stay on as a member of the work group after he stepped down from the chair position. He replied his initial expectation for additional free time at his new position was optimistic; unfortunately, balancing his work at Intermountain and participating in the work group is too challenging. **Laura** and other members thanked him for serving as chair and helping to establish the group and promised to reach out to him as a resource going forward. **Wes** in turn thanked the group for their efforts and everything that he has learned from them.

**Sunil** suggested that **Wes** attend the transitional meeting discussed earlier to lend his historical perspective and invited any other work group members interested in the meeting to get in contact with himself or Glenn. **Wes** said he would be happy to do so.

**Laura** then noted that the work group represented the ground forces of telehealth in Illinois and asked **Glenn** and **Sunil** if, in light of this, they envisioned the group becoming a forum to highlight telehealth activities in Illinois in 2012. **Sunil** said yes, adding that the Center for Medicare and Medicaid Services (CMS) announced in November that they are spending a billion dollars on the Healthcare Innovation Challenge grants. He expressed confidence that some of these grants will be awarded to parties in Illinois and identified an opportunity to track their progress for this purpose. **Pat** asked if **Laura** was suggesting highlighting these kinds of projects on the state website, which she confirmed. **Pat** suggested that the work group find four or five projects in the next few months to for which to develop web content. **Mary** concurred, articulating that this effort would be aligned with OHIT's intention to build out the website and do more outreach. She raised examples of other states' web sites that showcase stories like these, pointing out that highlighting how the projects touch the lives of patients and their families makes the narrative personal and allows people to understand the difference that telehealth makes in any number of care settings. **Sunil** commented that a similar effort undertaken by the ATA a few years ago yielded rich dividends. **Wes** asked if the web content would be placed in the Telehealth Work Group page on the ILHIE site; **Laura** confirmed. **Bob Flider (Bob)** said that PCI was very interested in bringing attention to positive developments and new opportunities happening as a result of connectivity. He expressed a desire to work together and possibly use some of PCI's personnel to publicize stories on the real-life benefits

of work currently being done. **Glenn** raised the likelihood of these programs already having case studies that they could potentially share with the group. These case studies could outline some "lessons learned" that the group could pass on to the ILHIE Authority and ILHIE Advisory Committee. **Mary** noted that OHIT has had some very successful webinars in 2011 and plans to continue them going forward; these could potentially be a venue for presenting stories, activities, and lessons learned. She also stressed the importance of showcasing the collaborative efforts going on in the state.

**Wes** asked if there were any additional comments from the members. Upon hearing none, he asked if there were any comments from members of the public. There were no comments.

**Laura** asked if a date had been set for the next meeting. **Mary** said it was scheduled for January 3rd. The work group members unanimously decided to push the meeting back. **Mary** noticed that a week from the original meeting date was the day of the next whiteboard session, so she suggested that the meeting be pushed back to the 17th. The group unanimously agreed to reschedule the meeting to that date.

**Wes** adjourned the meeting.