



## **ILHIE Advisory Committee**

### **Meeting Minutes**

### **September 11, 2012**

#### **Attendance**

| <b>Year 1 Appointees</b> |   |                 |
|--------------------------|---|-----------------|
| <b>Name</b>              | <b>Organization</b>                                     | <b>Location</b> |
| Stanley Krok (Co-Chair)  | Ann & Robert H. Lurie Children's Hospital               | Chicago         |
| Bill Odman (Co-Chair)    | St. Mary's Good Samaritan Hospital                      | Telephone       |
| Hayes Abrams             | Blue Cross Blue Shield (HCSC)                           | Telephone       |
| Gail Amundson            | Quality Quest for Health; Central Illinois HIE          | Chicago         |
| Phillip Burgess          | Illinois Board of Pharmacy                              | Telephone       |
| Carla Evans              | UIC School of Dentistry; U IL Medical Center            | Chicago         |
| Patrick Gallagher        | Illinois State Medical Society                          | Chicago         |
| Terri Jacobsen           | Metropolitan Chicago Healthcare Council, MCHIE          | Telephone       |
| Stasia Kahn              | Fox Prairie Medical Group; User Centric Inc.            | Chicago         |
| Marvin Lindsey           | Community Behavioral Healthcare Association of Illinois | Springfield     |
| Kim Sanders              | Southern Illinois University Carbondale                 | Telephone       |



|                     |   |           |
|---------------------|---|-----------|
| Patricia Schou      | Illinois Critical Access Hospital Network (ICAHN) | Telephone |
| Esther Sciammarella | Chicago Hispanic Health Coalition                 | Chicago   |

| <b>Year II Appointees</b> |                                  |                 |
|---------------------------|----------------------------------|-----------------|
| <b>Name</b>               | <b>Organization</b>              | <b>Location</b> |
| Richard Baer              | Performant Financial Corporation | Telephone       |
| Dr. Larry Kosinski        | Illinois Gastroenterology Group  | Chicago         |
| Derrick Wallery           | Marque Medicos                   | Telephone       |

| <b>State of Illinois Employees</b> |  |                 |
|------------------------------------|--|-----------------|
| <b>Name</b>                        | <b>Organization</b>                              | <b>Location</b> |
| Laura Zaremba                      | Illinois Office of Health Information Technology | Chicago         |
| Mark Chudzinski                    | Illinois Office of Health Information Technology | Chicago         |
| Mary McGinnis                      | Illinois Office of Health Information Technology | Chicago         |
| Diego Estrella                     | Illinois Office of Health Information Technology | Chicago         |
| Danny Kopelson                     | Illinois Office of Health Information Technology | Chicago         |
| Dia Cirillo                        | Illinois Office of Health Information Technology | Chicago         |
| Sanjay Patel                       | Illinois Office of Health Information Technology | Chicago         |



|                 |   |         |
|-----------------|---|---------|
| Saro Loucks     | Illinois Office of Health Information Technology          | Chicago |
| Sonia Bhagwakar | Illinois Office of Health Information Technology (Intern) | Chicago |
| Gia Alonzo      | Illinois Office of Health Information Technology          | Chicago |

| <b>Invited Guests</b> |  |                 |
|-----------------------|--|-----------------|
| <b>Name</b>           | <b>Organization</b>  | <b>Location</b> |
| David E. Miller DDS   | Illinois Office of Health Promotion, Department of Public Health | Chicago         |
| Nelida Smyser-DeLeon  | Illinois Department of Human Services                            | Chicago         |

**Roll Call and Introduction**

**Mark Chudzinski**, General Counsel of the Office of Health Information Technology (OHIT), opened the meeting of the Advisory Committee (“Committee”) of the Illinois Health Information Exchange Authority on September 11 at 1:05 pm, hosted at the State of Illinois J.R. Thompson Center in Downtown Chicago, with a telephone conference call-in number and video connectivity with 2200 Churchill, Building A, 2<sup>nd</sup> floor, Springfield, Illionis. It was noted that notice of the meeting and the agenda were posted on the OHIT website and at the Chicago meeting location no later than 48 hours prior to the meeting. Roll was taken, and the ability of those attending by telephone to hear and participate was confirmed. Stan Krok the Committee Co-chair and CIO of Ann & Robert H. Lurie Children’s Hospital, welcomed the Committee members and members of the general public, who would be welcome to address the Committee during the Public Comments portion of the Agenda at the conclusion of the meeting.

**Introduction to New Members**



Stan Krok asked the Year II Appointees to take a few minutes and introduce themselves to the rest of the Committee. Richard Baer, Dr. Larry Kosinski, and Derrick Wallery introduced themselves.

### **Approval of Minutes**

Committee members Stasia Kahn and Patrick Gallagher approved the minutes from the June 13, 2012 ILHIE Advisory Committee Meeting.

### **Ethics Training and Open Meetings Act Training**

Mark Chudzinski informed the Committee of their obligations to complete a yearly Ethics Training, and the training for the Open Meetings Act.

### **ILHIE Update**

**Laura Zaremba**, Director of the Illinois Office of Health Information Technology (OHIT), gave the Committee an update on the Illinois Health Information Exchange (ILHIE). Ms. Zaremba stated that most of the work that OHIT has been doing over the summer has to do with the Data Security and Privacy Committee, and the Behavioral Health Integration Project.

Ms. Zaremba also told the group that the next ILHIE Authority Board Committee is September 19<sup>th</sup> and several key action items will be decided on at that meeting. ILHIE's phase one implementation (Direct secure messaging) surpassed 900 registrants. There is around 15% usage and work is being done to increase usage, including developing use cases.

Much work is being done around the stage two implementation (the ILHIE), including the MPI, test partners, and the public health node.

Ms. Zaremba mentioned the White Space Grants which are promoting white space connectivity to the ILHIE. Full proposals are expected in October. These grants are focused on providers working in underserved populations and locations in the State. More information can be found in the link below.

<http://www2.illinois.gov/gov/HIE/Documents/WhiteSpace%20LOI%20RequestFINAL.pdf>

### **Importance of Exchange of Health Records in Dentistry (David Miller/Carla Evans)**



**Dr. Carla Evans**, Professor and Head, UIC Department of Orthodontics and **Dr. David Miller**, Chief, Division of Oral Health, Illinois Department of Public Health gave a presentation about why adoption of electron health exchange would be

**Dr. Evans** stated that there are some major impediments to Dentists adopting electronic health exchange. One is the lack of interoperability of EHRs geared toward oral health that connect to the internet. Other impediments are that Dentists use images that whose order must remain after transfer, the late adoption of SNOMED, and that Dentists use software only for billing not for treatment codes.

**Dr. Evans** pointed out that Dentists prescribe up to 12% of all opiates, and a large amount goes to people who are going from dentist to dentist to get more prescriptions, so a “real time” exchange of prescription information would be helpful in preventing abuse.

Dentists also need access to health records, because sometimes patients aren’t very accurate with their medical history, and knowledge of past health is important when dealing with oral surgery and prescribing medications.

**Dr. David Miller** explained that HIE is important to oral health and overall medical health.

Poor oral health is often an indication of other systemic diseases and is important in deciding which way to practice dentistry to better serve the patient and the staff.

A study was done in Chicago which exposed the over use of the emergency room to address oral health conditions. At the emergency room all that a physician can usually do is prescribe medication for pain or infection.

Oral Health Plan Three will be released in about a month and Electronic Health Exchange will be included in the action plan. **Dr. Miller** would like to use the technology that exists now to address the underserved communities and make it usable for Dentists.

#### **Q & A**

**Dr. Larry Kosinski** asked what the major impediments to Dentists adopting Electronic Health Exchange are.

**David Miller** stated that there had been an overall resistance to adopting technology within the dental community. He feels this is changing for the better, due to public demand and the changing demography of providers.



**Dr. Evans** stated that another big problem is that the vendors have not developed software that is inclusive to dental providers.

**Ms. Zaremba** stated that OHIT has had experience and success in getting providers not normally included in HIE engaged in exchange through the BHIP program and feels there are certainly strategies that could be targeted toward Dental providers to get them onboard.

**Mary McGinnis (OHIT)** extended an invitation to Dr. Evans and Dr. Miller to set up a future meeting with OHIT and engage a strategy for HIE acceptance within the oral health community.

**Stan Krok** asked whether there was certified software available to dentists that is certified and reasonably priced.

**Dr. Evans** replied that there were two software programs available but they do not meet the stimulus requirements. The meaningful use measures are not compatible with dental care either.

**Stan Krok** stated that his hospital has a dental department and the EHR system does not work for the billing codes the dentists use, nor the special imaging used by dentists. The basic document they use for Medical Doctors has worked just fine as far as integrating medical and dental care at the hospital.

### **Behavioral Health Integration Project (BHIP) Update**

**Dia Cirillo**, Behavioral Health Integration Project (BHIP) Manager, presented a Power Point on the BHIP work done thus far. BHIP work is being performed under a \$600,000 federal grant to integrate behavioral health into the Illinois Health Information Exchange (ILHIE). Present behavioral health consent laws in Illinois are far more stringent than HIPAA and make the electronic exchange of health information very difficult and near impossible to adopt. Several behavioral health provider summits were held in June of 2012 to gather information on what providers need in terms of health exchange to provide better care, and what they are willing to share. This information in turn was shared with the Data Security and Privacy Committee which has been receiving testimony from stakeholders from varying communities in order to make informed decisions on how consent laws need to be changed.

Detailed information about the BHIP project can be found by accessing this link;  
<http://www2.illinois.gov/gov/HIE/Pages/BHIP.aspx>

### **Q & A**



**Dr. Stasia Kahn** pointed out that as a medical doctor she treats many patients that have behavioral health issues as well, so she feels it equally important to educate all the medical professions about the consent laws regarding exchange of behavioral health information, because it is confusing at best and most physicians are so overwhelmed by the current laws that they do not share behavioral health information.

**Dia Cirillo** informed the group the Metro Chicago HIE asked all their providers not to send them any behavioral health data because they cannot transmit it successfully while following current consent laws. It is critical that the mental health code be harmonized with HIPPA so physicians can share behavioral health data and improve health outcomes.

#### **Data Security and Privacy Committee (DSPC) Update**

**Mark Chudzinski**, General Counsel OHIT, presented a power point about the ongoing work by the Data Security and Privacy Committee (DSPC). Mr. Chudzinski began with a background on the process the DSPC follows and who the Chairman (Dr. Nick Panomitros ) and the other DSPC members are. Mr. Chudzinski then provided the Committee with information and dates of the DSPC hearings and deliberations. Mr. Chudzinski gave information and background about the Illinois Mental Health and Developmental Disabilities Code Act which is 40 plus years old and much more stringent than the Federal standard Health Insurance Portability and Accountability Act (HIPPA). After the ILHIE legal task force took on a thorough examination of the IMHDDCA, the DSPC has held several hearings which included stakeholders from numerous areas of the State and a good representative sample of consumers, providers and technology stakeholders provided testimony. The DSPC has had ongoing deliberations and the findings of these will be presented to the ILHIE Authority Board on the September 19<sup>th</sup> Board meeting.

The DSPC came up with five key preliminary findings and recommendations:

1. Incremental approach to implementation of ILHIE and the privacy & security policies which current technology enables
2. Harmonization of IL law with Federal law (e.g. HIPPA); amend IL laws
3. Encourage flow of PHI into HIE for HIE purposes, but provide patient privacy protection with patients being given “opt-out” choice for HIE participation.



4. Since PHI segmentation is currently not practical, launch the ILHIE with an “all-data-in or all-data-out” patient choice, but as technology matures, introduce more granular patient choices for what PHI patients wish to share with whom.
5. Adopt measures to build provider and patient trust in the ILHIE.

The difference between “opt-in” and “opt-out” consent was also illustrated in the presentation.

To see more detailed information on the DSPC hearings please access this link;  
<http://www2.illinois.gov/gov/HIE/Pages/DataSecurityandPrivacy.aspx> .

#### **Q & A**

**Esther Sciammarella** expressed concern that this is too complicated for the consumer.

**Mark Chudzinski** responded that it is complicated and that is why with legislation hopefully making this an “opt-out” system with exceptions, it would benefit providers and consumers. It is assumed that when a patient goes to a Doctor they wish to receive treatment and thus their information be entered into the HIE, unless for whatever reason they choose to “opt-out” and will be given an opportunity to do so. The “opt-out” system is what the DSPC is recommending to the Authority.

**Gail Amundson** from CIHIE stated that Central Illinois Health Information Exchange uses the “opt-out” model and less than .03% of patients choose to “opt-out”.

**Mark Chudzinski** stated that all four regional HIEs that testified during the DSPC hearings testified that they had chosen to “opt-out”. Thirty states have had to consider this have gone “opt-out” while only ten states have gone “opt-in”.

**Nelida Smyser-DeLeon** - DHS, asked how the smaller “mom & pop” medical business could afford to connect to the ILHIE.

**Mark Chudzinski** explained that Direct secure messaging is free for now, but will charge something in the future. This would be an affordable way for smaller medical businesses to connect to the ILHIE.

**Peter Ingram** noted that the “opt-out” model had a few exceptions.

**Mark Chudzinski** explained that there is a “break the glass” exception that can be used in instances of emergency or when the patient chooses to agree to a one time sharing of data. The information can be collected but not exchanged in the HIE, and if the patient changes their mind and wants to “opt-in” either long term or for a single use the information is there. If a patient chooses to “opt-out” completely and the information is not collected in the HIE, there will be no data to share.



## **ILHIE Communications Update**

**Danny Kopelson**, Communications Specialist, ILHIE Direct Project Manager, informed the members about Health IT week which is the week of September 10<sup>th</sup>. The Illinois Health Information Exchange (ILHIE), the Illinois Health Information Management Association (ILHIMA), and the Greater Chicago Chapter of the Healthcare Information Management Systems Society (GCC HIMMS) came to together and published a news release informing the public of the importance of adopting Electronic Health Information Exchange.

## **Public Comment**

There were no public comments.

## **Next Meeting**

October 2, 2012.

## **Adjourn**

Meeting adjourned at 2:57PM.

Minutes submitted by Saro Loucks.