Approved 11/12/2014

MINUTES OF THE SEPTEMBER 24, 2014 MEETING OF THE GOVERNING BOARD OF THE HEALTH INFORMATION EXCHANGE AUTHORITY

The Board of Directors ("Board") of the Illinois Health Information Exchange Authority ("Authority"), pursuant to notice duly given, held a meeting on September 24, 2014 at approximately 12:00 p.m., at the State of Illinois JRTC, 2-025, 100 West Randolph, Chicago, Illinois 60601 with telephone conference call capability.

Appointed Members Present:	Ex-Officio Members Present:
1. Mr. David Holland, Chair	1. GOHIT- Ms. Laura Zaremba (Phone)
2. Mr. Raul Recarey	2. HFS-Director Julie Hamos (Phone)
3. Dr. Bruce Wellman	3. DPH-Ms. Mary Driscoll
4. Dr. Bechara Choucair	
5. Dr. Nancy Newby	

Welcome and Call To Order

Mr. David Holland, Chair of the Board of the Authority, called the meeting to order.

Roll Call

Ms. Kerri McBride, Secretary of the Board, confirmed the presence of the Members of the Board as indicated above. She also confirmed the ability of those participating by phone to hear clearly.

Ms. McBride introduced Ms. Mary Driscoll, the new representative from the Illinois Department of Public Health (IDPH), replacing Mr. David Carvalho, who has retired. Ms. McBride noted that the Department of Insurance has not yet appointed its new representative. On Mr. Holland's invitation, Ms. Driscoll introduced herself as the Division Chief for Patient Safety and Quality at IDPH. Her division interacts regularly with ILHIE on various technology initiatives, and is very interested in gaining future access to electronic health record data for public health use purposes.

Approval of Agenda

Mr. David Holland discussed the contents of the agenda. No changes or additions were requested. The agenda was approved unanimously by the appointed members present.

Approval of July Meeting Minutes

Minutes from the prior meeting of the Board of the Illinois Health Information Exchange Authority, held on July 23, 2014, were circulated prior to the meeting. A reading of the minutes was waived, and a motion to approve the minutes as presented was made and approved. The minutes were approved unanimously by the appointed members present.

ILHIE Authority Chair Report

Mr. Holland began his report by introducing the realignment proposal to be discussed in Mr. Recarey's presentation, stating that such proposal represents a different way of thinking by ILHIE and a potential change in direction. Mr. Holland remarked that this proposal is consistent with the changing HIE landscape throughout the country. He also noted that the RHIOs are supportive of this direction. Mr. Holland concluded by stating that a strategic decision by a public organization benefits greatly from informed public comment. He invited the public to participate and speak at the present meeting as well as other meetings by related organizations to help ILHIE reach the best decision for the people of Illinois.

ILHIE Authority Director Update

Mr. Raul Recarey started his report by discussing the ILHIE Authority realignment proposal, a new model to support the common goal of fostering and promoting health information exchange. Mr. Recarey observed that the current format is inadvertently fostering competition, which disperses resources, creates market uncertainty (hesitancy to connect with any HIE considering the multitude of options), and duplicative costs for providers (providers see RHIO and ILHIE costs as duplicative). Under the realignment proposal, ILHIE would be restructured as the network hub for the State (connect networks), while RHIOs would become the "last mile" for all services (connect providers). ILHIE would in turn be able to concentrate its efforts in cementing and expanding State agency connectivity, which increases the value of the ILHIE network. The realignment would therefore generate a more efficient and effective use of resources.
A goal of the proposal would be to reduce the costs of connectivity to the providers by shifting some of the costs to the payors. A central point of connection to all providers is attractive to payors, which could participate via a per member per month (PMPM) fee or other payment formula to be identified. To commence this process, ILHIE Authority would need to : (1) obtain acceptance of the plan by the RHIOs, (2) obtain acceptance and firm commitments from payors, and (3) obtain approval of the plan from the Board. Mr. Recarey asked for authorization to move forward in exploring this new direction and work toward creating the conditions that would make the proposal feasible.

In this potential realignment, ILHIE would become a revenue-producing partner with RHIOs. To make this work, the RHIOs would need to: (1) agree to participate in ILHIE state-wide Master Patient Index (MPI); (2) agree to offer expanded ability to cover larger areas in the State, than their original geographic boundaries; (3) create a new group, or expanded functionality of an existing group, to provide inexpensive services to small provider groups (right now, Illinois does not have an inexpensive solution to cover small provider groups as it exists in other states), (4) assist ILHIE with selling the value proposition to the payor community.
In concluding his presentation on the realignment proposal, Mr. Recarey stated that there are three important points to remember. First, he pointed out that this proposal should be viewed as an idea being explored for feasibility. Second, until RHIO-ILHIE finalize an alliance and show a value proposition to payors, payors will not agree to pay. Finally, even if successful, there may be a "ramp up" on: a) timing and b) amount of payer participation, which would require some payment by the RHIOs.. Although ILHIE may not be required to ask for "ramp up" dollars,

there may be a period where ILHIE may have to require some payment from participants and RHIOs s to fund its network operations before being completely "free."
Dr. Bechara Choucair asked Mr. Recarey to comment on how popular this model is among other regional and state HIEs across the country. Mr. Recarey answered that this is an emerging model and that Michigan, and possibly New York, are operating in a very similar way. Texas is also exploring this option. Mr. Recarey noted that this direction supports the emerging accountable care organizations.

Dr. Bruce Wellman asked how existing MPI records will be integrated in the network and what the related costs would be. Mr. Recarey explained that the ILHIE Authority MPI reconciliation team is ramping-up its operations and working within the budget approved by this Board. Ms. Mary Driscoll noted that the MPI would have value also with respect to existing data sets that are collected by State agencies, like IDPH and the Department of Human Services. She stated that this would be a tremendous amount of meaningful information that could be merged and gathered. Mr. Recarey agreed with Ms. Driscoll stating that the MPI has been identified as the greatest value ILHIE can bring to other State agencies.
Mr. Recarey continued with a discussion of the current state of ILHIE implementation, explaining the content of the relevant slides in his power point presentation and noting among other things, the upward trend in ILHIE Direct mailboxes; that ILHIE has completed 14 Integrated Direct implementations; and that there is also an upward trend in clinical setting transactions.

Legal update

Ms. Kerri McBride announced that on August 25, Governor Quinn signed HB5925 into law, and it is now PA 98-1046. PA 98-1046 aligns several Illinois laws with HIPAA requirements to facilitate sharing of health information. It aligns the AIDS Confidentiality Act and Genetic Information Privacy Act. The new law allows accountable care entities to share data for health care coordination, which will help keep their costs down. The Clinical Laboratory and Blood Banks Act was also modified so that the requesting provider can ask that the result be sent to someone other than the requesting provider, which also facilitates better and more timely care. Ms. McBride concluded her report by stating that PA 98-1046 will be effective on January 1, 2015.

Budget and Finance Committee Report

The Budget and Finance Committee met prior to the Board meeting and discussed a new reporting format to predict revenues in addition to costs and reviewed/updated the fiscal policies to reflect current needs and expansion of activities. The members of the Board discussed the revisions to the ILHIE Authority Fiscal Policies Manual. After discussion by the Board, Mr. Holland brought Resolution 2014-12 to modify the Fiscal Policies Manual. He noted that the Resolution was circulated to the Board in advance of the meeting and invited Ms. McBride to read the text of the Resolution into the record. A motion to adopt the Resolution was duly made and carried unanimously by the appointed Board members present.

Advisory Committee Report

Ms. McBride provided an update on behalf of the Advisory Committee. The Advisory Committee met last month and appointed an ADT workgroup to discuss notifications and determine which notifications could be developed taking into consideration the type of format providers would like to see. The work group had its first meeting and there will be additional meetings to which the public is invited to participate.

Regional HIE Update

Charles Cox reported for MCHC- Metro Chicago HIE, including the fact that they have 31 hospitals live on their exchange. There are currently 7,000 direct users and this number will expand in the near future. MCHC is expanding the clinical information that is traded and starting to populate their database with such information. Mr. Cox stated that MCHC fully supports the realignment proposal presented by Mr. Recarey.

Joy Duling of CIHIE advised that CIHE is continuing to operate and working on the interface business and signing up new providers. Ms. Duling noted that some of their stakeholders are indicating to their partners their intention to do business through CIHIE. This will allow CIHIE to reach out to part of the community that was not involved to date. Ms. Duling stated that CIHIE supports and is very excited to participate in the discussion of the new realignment proposal.

Mike Williams from Northern Illinois Health Information Exchange was not present to give a report.

Steve Lawrence from LincolnLand and Illinois Health Exchange Partners was not present to give a report.

Phil Wasson from Tri Rivers was not present to give a report.

Regional Extension Center Update

Representatives from CHITREC and ILHITREC were not present to give a report.

Public Comment

The floor was opened for comments from the public, and no comments were made.

Adjourn

It was noted that the next scheduled Board meeting was November 12, 2014. The meeting was adjourned.

Minutes submitted by Carolina Salvia Persico