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|  | **SIM Data Infrastructure Subcommittee**  **Date: March 5, 2014**  **Time: 2:00-4:00pm**  **Location: MaineGeneral Health, Alfond Center for Health, Augusta** |

**Chair:** Katie Sendze, HealthInfoNet**,** [ksendze@hinfonet.org](mailto:ksendze@hinfonet.org)**, HIN Staff:** Shaun Alfreds, Gemma Cannon,Katelyn Michaud

**Member Attendance (A-Z):** Carrie Arseanault , Nancy Birkhimer , Michael DeLorenzo, Bruce Donlin, Dana Duncan, Wayne Gregersen, Rebecca Gagnon (for Holly Harmon), Ralph Johnson, Luke Lazure, Katherine Pelletreau, Chuck Pritchard

**Interested Parties:**  Amy Belisle, Cathy Cobb, Elsie Freeman, Jonathan Ives, Joanie Klayman, Chris Muffett, Sue Woods

**Members Absent:** Barbara Crowley, Dawn Gallagher, Karynlee Harrington, Patsy Leavitt, Margaret Longsworth, Joseph Riddick, Ann Sullivan

*Subcommittee documents available at***:** <http://www.maine.gov/dhhs/oms/sim/data-infrastructure/index.shtml>

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| **Agenda Item** | **Risk/concern discussed** | **Escalation to Steering (y/n)** |
| **N/A** | * None | N |
| **Agenda Item** | **Discussion Points and Decisions** | |
| **Welcome, Agenda overview, Consent agenda items** | * 1/8/14 minutes were adopted as is, will be posted * No February meeting was held | |
| **Project Updates** | * Behavioral Health RFP – Received 26 applications for 20 available slots; HIN staff will review applications in March and announce the awardees on 4/14/14 (slide date was a typo) * Personal Health Record/Blue Button Project – We received 4 RFIs. HIN staff reviewed and scored each RFI based on criteria DIS helped develop. HIN will be partnering with Eastern Maine Health System for the 12-month pilot set to begin in June 2014. Scoring template was presented. | |
| **Risk Mitigation** | * Katie presented the draft version of data infrastructure-related risks in the SIM risk mitigation document and reviewed the group’s role in risk mitigation (see slides). The group will provide strategic guidance to support risk mitigation and review relevant risks as they evolve over the life of SIM, advise on the mitigation plans etc., and support risk elevation to the Steering Committee as needed. * Suggestions/comments on the identified risks:   + BH clinicians/staff need help to understand “general medical” physical health information from those partner EHR records and how to integrate that data into the BH EHR systems; BH workforce education will need to focus on this. Elsie will be following up with Quality Counts on how this can be part of the BH Learning Collaborative scope of education. DIS can revisit this as the BH RFP work rolls out and progresses more.   + A risk to BHHO related to DIS is how will medical records we easily shared between PCMH/BHHOs by care managers, how can we support this work?   + It was determined that the draft risk presented today of “providers not being connected to the HIE” was not a risk at this time as it is not part of the funded activities under SIM scope.   + Add the Mental Health opt-in/revoke process as an additional risk to meeting the BH RFP objective. Without mental health opt-in/organizations sending MH data, quality measurement may be compromised.   + Track win and successes “not just the risks” | |
| **HIN Dashboard Analytics Demonstration** (HIN’s 4th SIM Objective in project plan) | * Shaun Alfreds introduced the deliverable and provided an overview of HIN’s Data Analytics Project known as “the Dashboard.” HIN is currently piloting the dashboard with 4 hospital/ambulatory systems in the state and will provide the tool to participants as an addition to their current service contract. As part of SIM, HIN will provide MaineCare with a dashboard designed to meet their needs using the same data governance procedures that exist today. * Comments/questions from DIS members:   + Where is the payer distribution (used in the Dashboard for providers today) data from? A: HIE data (not claims)   + MaineCare will be sending HIN claims data beginning in April for their members that will be included in the MaineCare dashboard for the first time   + Can MaineCare members opt-out of the HIE? A: Yes, but this could be influenced by a policy decision. Some states- Utah, do not allow their Medicaid members to opt-out of their HIE.   + Comment was made that: how MaineCare does or does not pay for psych hospital admissions in Maine could contribute to missing BH data in the Dashboard tool.   + HIN currently has the largest clinical data in Maine and we (as stakeholders) need to leverage that   + The dashboard has a lot of potential with payers in the state (MaineCare will be the first payer to have access to the HIE data under the scope of the SIM projects and data governance policies of HIN). | |
| **Agenda/Meetings beyond into late 2014** | * April meeting has been moved to Wednesday April 16th due to the Quality Counts Annual Conference on 4/2 * 2014 meeting schedule had been emailed to all DIS members. Katie will work on the 2015 schedule and email that out in a few months | |
| **Public Comment** | * No public comment | |

**New Actions**

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| **Agenda Item** | **Action Items** | **Status** | **Who** | **Due By** |
| **Risk Mitigation** | Katie will update the Risk Mitigation plan with input from the DIS members |  | Katie | 4/16 |
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