



POLICY ADVISORY COMMITTEE MEETING MINUTES
Wednesday, May 18, 2011
2:30 – 4:30 p.m.
Wisconsin Hospital Association

13 COMMITTEE MEMBERS PRESENT

Matthew Stanford (Chair)
Julie Bartels (Vice Chair)
Daniel Barr
Elise Braun
Claudia Egan
John Hartman, MD
Kathy Johnson
Norma Lang
Michelle Leiker
Craig Samitt, MD
Peg Schmidt
Denise Webb
Kelly Wilson

4 MEMBERS ABSENT

Jared Adair
Jerry Halverson, MD
Catherine Hansen
Lori Mueller

1 GUEST PRESENT

Kim Pemble

2 STAFF PRESENT

Jean Doeringsfeld
Kim Drone

CALL TO ORDER

Mr. Stanford called the meeting to order at 2:35 p.m.

APPROVAL OF MINUTES

The Policy Advisory Committee approved the minutes from the meeting held on April 21, 2011.

BOARD UPDATE

Ms. Doeringsfeld provided an update from the last WISHIN Board meeting. Mr. Stanford had presented WISHIN's plan on the consent model, and the Board's direction was to move forward with the plan.

RFP

A document defining a health information service provider (HISP) and a health information exchange (HIE) was provided to the Policy Committee. HIE is the transmission of healthcare data among facilities, organizations, and agencies according to national standards. A HISP is a health internet service provider, and describes a function for the management of security and transport for Direct exchange. It was recommended all HISPs have a binding legal agreement with the sender or receiver of the directed exchange of personally identifiable information.

Mr. Pemble said the concept of implementations of HIEs have existed for 15 years. The challenge is standards continue to evolve and new HIEs are established. Ms. Doeringsfeld said WISHIN will offer an interface for providers that don't have encrypted email but want to send Direct messages. The users could create their own confidentiality messages to attach to the messages they send, or WISHIN could automatically attach a notice.

Dr. Hartman said it could be a breach of HIPAA if protected health information (PHI) is sent to the wrong recipient. Ms. Egan asked what technology is being used in the event that happens. Ms. Doeringsfeld said a HISP has a secure certificate authority on the sending and receiving ends, and the message is encrypted. Ms. Webb stated there is a provision in HIPAA with incidental release. Ms. Schmidt said there is an exception when the message is within your organization. Dr. Samitt asked if there are any disadvantages to automatically attaching a privacy notice. Ms. Egan said if the message is sent to a closed group, the enforceability of having a privacy notice is low. The message should instruct receivers of what actions should be taken if they aren't the intended recipient.

Ms. Doeringsfeld said WISHIN will plan to request the functionality to attach a confidentiality notice. Mr. Stanford asked if there should be the option to turn off providers attaching a notice. Dr. Halverson said it would be easier to have that option at the WISHIN level; however, there is more protection at the provider level. Ms. Leiker said the costs will increase with advanced functionality and it would be harder to participate in WISHIN.

Ms. Doeringsfeld said WISHIN plans to have the technical requirements document in a RFP framework template by June 2 for Phase 1 services, Direct HISP services, and a provider directory for query of Direct addresses. Ms. Webb said a list serve was created for vendors to subscribe to WISHIN. Ms. Wilson said it is valuable to establish legal terms in the RFP, since a bidding vendor has more incentive to agree to terms at the beginning.

HISP Qualification

Ms. Doeringsfeld led a discussion on Phase 1 RFP participation agreements. The first participation agreement is the HISP agreement, which WISHIN will contract with other HISP vendors to qualify them in the state of Wisconsin. The second agreement is the User Agreement between the participants and WISHIN for using HISP and HIE services. An example was provided of Rhode Island Quality Institute's (RIQI) materials. RIQI is qualifying HISPs, EHR vendors, and HIEs. RIQI requires vendors to offer low-cost pricing to providers in the state, and matches Rhode Island providers to vendors.

Dr. Hartman said this is the concept of a vendor being the HISP as opposed to an organization. For example, since Dean uses Epic, would the contract be with Epic or Dean? The Rhode Island model is aimed at vendors. Ms. Doeringsfeld said the user agreement is designed to go between the HISP and the provider. Ms. Webb said if the system is Direct-enabled, it could complete a type of Direct messaging. Mr. Stanford asked if this will be similar to a web portal with mail. Ms. Doeringsfeld said it could be established through web mail to send a Direct message, an encrypted email system, or connecting their EMR.

Ms. Leiker asked if additional functionality will be needed for EHR vendors, since they would need to pay for additional functionality. Ms. Doeringsfeld said there are no incentive payments for EMR vendors, but they would need to update their system to support HIE to stay current.

Mr. Stanford asked if there any requirements to exchange information between HISPs in a particular timeframe. Ms. Doeringsfeld said qualifying HISPs requires them to connect with WISHIN, which broadens the network and directories. Ms. Doeringsfeld said WISHIN will qualify HISPs to ensure interoperability, and provider directory sharing and a BAA agreement will be required for the HISP agreement.

Ms. Doeringsfeld said that the RIQI example notes a \$2-million liability limit, and she was not sure if that is the accurate number for WISHIN. Mr. Pemble said WHIE is currently shopping for liability insurance for the exchange. Ms. Doeringsfeld said these agreements are needed by September for Phase 1, and should be finalized by July.

WORK PLAN

Ms. Doeringsfeld provided the work plan for the Policy Committee. Ms. Webb asked if the Phase 1 Rapid Deployment Workgroup is responsible for Phase 1 and 2 HISP qualification materials. Ms. Doeringsfeld said the agreements for each phase are different. Mr. Stanford said if WISHIN can use summer interns, the date could be moved up.

Mr. Stanford said WISHIN needs a list of items to seek outside counsel on. Ms. Doeringsfeld said WISHIN would appreciate it if the committee could draft it. Mr. Stanford said WISHIN's outside legal counsel could be used to create this document. Ms. Webb said she is concerned about WISHIN's legal counsel creating it, and the main issue is to create a participation agreement.

Ms. Egan said liability issues are not being decided until October. Ms. Doeringsfeld said the Phase 2 participation agreement will be different from Phase 1 since HIE services are being offered only in Phase 2. Additional services will be offered, and User Agreements will need to be changed. The Rapid Deployment Workgroup needs to start participation agreements for Phase 1.

Mr. Stanford said considering the timeframe with liability issues, each section cannot be reviewed by this committee. Mr. Stanford said it is important for this committee to provide input and let WISHIN's attorneys figure out how to protect their assets. Ms. Webb said that is the reason why WISHIN will have insurance. Dr. Hartman said that would be a great benefit to add and would help with liability.

Ms. Doeringsfeld said the consent management delivery dates can be moved out as long as there is time to review and it can pass legislatively through committees by November. Ms. Webb said more meetings should be scheduled or interns should be used if the committee is willing to work on legislation. Ms. Egan said she has an intern who could help the committee. Mr. Stanford said there is a framework already in place to get this done. Ms. Egan said she would volunteer to work on it. Ms. Bartels said WHIO has worked on a number of contentious issues and that it is important to build a process that stakeholders agree with.

Ms. Wilson said the opt-out option and HIPAA harmonization should be discussed at the July meeting. Ms. Webb said a workplan needs to be created and stakeholders need to be engaged. Ms. Doeringsfeld said that a plan and a rough draft should be ready for the June committee meeting. Ms. Bartels said she has a process for multi-stakeholder decision making process around controversial issues.

Denise has agreed to lead the Rapid Implementation Workgroup, and Ms. Schmidt agreed to join until Phase 2. Ms. Leiker and Ms. Wilson will lead the Liability Issues Workgroup. Ms. Hansen and Ms. Johnson will lead the Interstate Exchange Workgroup. Ms. Egan and Ms. Schmidt will lead the Phase 2 Participation Agreement Workgroup. Mr. Stanford will lead the Internal Policy Workgroup if no one else volunteers. Ms. Webb said she will reach out to the Policy and Technical Committees for volunteers.

Mr. Stanford asked for an approval of the workplan. Ms. Doeringsfeld said the date will be changed for the Phase 1 Communications agreement.

Moved and seconded to approve the workplan.