



IMPROVING YOUR CARE THROUGH THE EXCHANGE OF HEALTH INFORMATION

## *Pennsylvania eHealth Partnership Advisory Board Meeting Minutes*

May 3, 2019

---

### **PA eHealth Partnership Advisory Board Meeting Date and Location**

Meeting Date: Friday, May 3, 2019  
Meeting Time: Call to order: 10:05 A.M. Adjournment: 1:59 P.M.  
Meeting Location: Keystone Building Forest Room  
400 North Street, Harrisburg, PA 17120

### **Roll Call**

#### **Advisory Board Members**

David F. Simon (Chair), Consumer Representative  
Paul McGuire (Vice-Chair), COO Quality Life Services  
Meagan Barbour, Policy Director, Department of Insurance (**Substitute**)  
**Excused** – Alison Beam, Insurance Commissioner Designee  
Sarah Boateng, Secretary of Health Designee  
Martin Ciccocioppo, Secretary of DHS Designee  
Pamela E. Clarke, House-Appointed HIO Representative  
Joseph Fisne, Senate-Appointed HIO Representative  
Scott Frank, Insurer Representative  
**Excused** – Jennifer B. Haggerty, Home Care or Hospice Representative  
Dr. Brian Hannah, Hospital Representative  
Dr. Timothy Heilmann, Physician or Nurse Representative  
Julie Korick, Underserved Representative  
**Excused** – Minta Livengood, Consumer Representative  
Dr. Michael A. Sheinberg, House-Appointed HIO Representative

#### **Department of Human Services**

Elizabeth Bahn, Program and Fiscal Manager, PA eHealth  
Kathleen Beani, Human Services Program Specialist, PA eHealth  
Terri Lynn Brown, Administrative Officer, PA eHealth  
Nora Carreras, Special Advisor to the Secretary, Office of the Secretary  
Martin Ciccocioppo, Director, PA eHealth  
Rhonda Dolen, Research & Operations, PA eHealth  
Dana Kaplan, HIT Coordinator, Promoting Interoperability Program  
Aleissa McCutcheon, Bureau of Information Systems

#### **Health and Human Services Delivery Center**

Allen Price, Project Manager, Bureau of Information Systems  
Kay Shaffer, Business Relationship Manager, Bureau of Information Systems

#### **Guests in Attendance**

Dr. Mark Crider, Executive Director and Professor of Nursing, Harrisburg University  
Tara Gensemer, Practice Support Specialist, Pennsylvania Medical Society  
Laval Miller-Wilson, Executive Director, Pennsylvania Health Law Project  
Phyliss Szymanski, Director, ClinicalConnect Health Information Exchange (Phone)

## **PA eHealth Advisory Board Minutes**

May 3, 2019

### **Call to Order**

Chair David Simon called the meeting to order at 10:05 A.M. and welcomed all the participants. He announced that the meeting was being recorded to assist with minutes' preparation. Mr. Martin Ciccocioppo took roll call.

### **Review of February 22, 2019 Meeting Minutes**

The members voted to approve the February 22, 2019 meeting minutes as distributed.

### **PA eHealth Partnership Advisory Board Draft Bylaws and Vice-Chair Election**

The Bylaws were reviewed, and the Advisory Board voted to adopt them.

By unanimous vote, Paul McGuire was elected as Vice-Chair of the Advisory Board.

### **PA eHealth Partnership Program Updates**

Mr. Ciccocioppo presented PA eHealth Partnership updates and provided copies of the slide deck to all attendees. It has taken time to get through the 2019 IAPD projects approval process. There has been no public announcement yet about HIO Onboarding grant RFA 19-18. All five HIOs applied for it and all were notified of the results. A total of 3.5 million dollars was awarded for 49 inpatient facilities, 25 of which are long-term care (LTC); and for 70 outpatient facilities, comprised of Ambulatory and FQHC facilities, as well as Home Health Agencies. A few smaller entities that do not have an electronic health record (EHR) will be onboarded through HIO provider portals.

DHS Procurement will soon be issuing award letters in response to the Public Health Gateway (PHG) Onboarding RFA. There is a good opportunity for this work to get done by September 30, 2019. Ms. Pamela Clarke asked about bi-directional sharing of immunization data through PHG, given the current measles/mumps epidemic. The PHG is currently facilitating bi-directional interoperability with the Pennsylvania State Immunization Information System (PA-SIIS) both with grant-funded and non-grant-funded connections/onboardings, and Ms. Sarah Boateng advised that the Department of Health is working to get additional providers connected to the immunization registry. The KeyHIE grant agreement for mammography image-sharing of Medicaid patients is fully executed. Mr. Joseph Fisne advised that this is the 1<sup>st</sup> year of the grant and it is in testing. The larger purpose of the grant award is to show the other HIOs that image sharing across an HIO can be done.

PA eHealth is on the verge of connecting our 5<sup>th</sup> HIO, Central PA Connect HIE (CPCHIE), to the P3N. It will also be the first EPIC-based HIO to connect to the P3N. The Department of Corrections (DOC) is operating in a test environment with P3N, onboarding to the P3N as a state agency is progressing well. The DOC's electronic health record (EHR) system goes across twenty-five facilities and their onboarding target of August 2019 will be supported by IAPD funding for this year.

This year, the Hospital Quality Incentive Program (HQIP) is focused on Emergency Departments (EDs) participating in the statewide notification service, with the goal of participation in the P3N statewide ADT Service. This incentive program is largely responsible for many additional acute EDs onboarding to the ADT Service.

HealthShare Exchange (HSX) has had problems with P3N connectivity. Their connection to the P3N been down the past 6 weeks. Dr. Heilmann asked Ms. Clarke about HSX connectivity in relation to the opioid crisis, and she provided an explanation of the process. The P3N Health Information Exchange Trust Community Committee (HIETCC) had a discussion during the last meeting on the Office of the National Coordinator for Health Information Technology (ONC) Trusted Exchange Framework and Common Agreement (TEFCA) which was released as a draft in 2018, and ONC has issued a second draft. Mr. Ciccocioppo explained the goals and framework principals of TEFCA.

## **PA eHealth Advisory Board Minutes**

May 3, 2019

He then explained the Qualified Health Information Network (QHIN) Technical Framework (QTF) and its technical functionality. Chair Simon wanted to better understand the role the P3N plays regarding TEFCA. Mr. Ciccocioppo advised that TEFCA does not exist today. It is the Administration's goal to have a more seamless, robust national health information exchange. We want the P3N to become a QHIN, which would enable us to provide all these services. Today, patients cannot directly query the P3N. They can use the portal in KEYHIE and LGH, but patients are not certain they are querying the whole clinical data repository. That would be a new P3N requirement. There will be a discussion later today about re-procuring the P3N infrastructure.

PA eHealth Partnership Program is preparing for replacement of the IBM Watson Health Infrastructure that we currently rely on, as the contract will expire on April 30, 2021. We need to think about which capabilities should be built into that procurement. PA eHealth is positioned at the state level, just as the Common Agreement would envision. We don't currently have connectivity to the rest of the country. That is a key discussion among the HIO Community, other stakeholders and DHS. The Board asked a question about TEFCA and the ONC proposed rule and was advised that the topic would be discussed later this afternoon. Mr. Ciccocioppo did provide a definition of a Recognized Coordinating Entity (RCE) and what roles the RCE and ONC will play in how the Common Agreement works.

### **Health Information Exchange Trust Community Committee (HIETCC) Leadership Discussion**

Ms. Clarke advised the Board that she would speak on behalf of HealthShare Exchange (HSX), as Mr. Daniel Wilt is no longer part of their organization. She explained what HIETCC is, and how HIOs and their members function. Mr. Fisne added that HIOs are working for the betterment of the community. Ms. Clarke explained the origins of the HIETCC and its charter. She then provided examples of topics and issues HIETCC covers at their meetings, and Chair Simon thanked PA eHealth for providing a copy of HIETCC's most recent meeting minutes. Ms. Clarke then gave an overview of the P3N network, including query, and noted they are trying to expand patient access through the P3N. Ms. Clarke concluded by acknowledging Ms. Szymanski's contributions to this presentation.

Chair Simon appreciated this presentation and asked how the Board and HIETCC can best coordinate their efforts going forward. Ms. Clarke offered to bring the Board's recommendations and concerns to HIETCC. Mr. Fisne suggested putting it onto a dashboard. Chair Simon would like to have a Board member look at HIO issues and best practices. Mr. Fisne suggested rotating this effort through the HIOs. Ms. Clarke then made a motion stating that a copy of HIETCC's meeting minutes (after their internal approval) would be provided to the Advisory Board on a regular basis. The motion was seconded, and all members agreed.

### **Highlights of Proposed FFY 2020 Internal Advance Planning Document (IAPD)**

The Department of Human Services (DHS) may want to include the Resource Referral Tool in the FFY2020 IAPD. It is not in the internal review process, but there is a steering committee working on it. Ms. Dana Kaplan spoke about current projects proposed for continuing in the IAPD.

The Outreach and Technical Assistance engagement with Quality Insights has largely been responsible for at least 25 providers coming back into the Promoting Interoperability Program. Quality Insights is planning several webinars for targeted providers, including one for each of the P3N certified HIOs, to discuss their services and capabilities. Ms. Clarke advised that her HIO would welcome the opportunity to be featured in a Quality Insights webinar where they could showcase their services that provide value to practices and would help them meet the PIP criteria. It is possible that 2,200 practices can come back for additional years, and we shared a list of those practices with the HIOs last September. Ms. Kaplan will provide a list of the respective regions and wants everyone to work together. Chair Simon asked about the size of each region, and Ms. Kaplan provided that information. Mr. Ciccocioppo explained how Quality Insights helps and supports practices applying for incentive dollars, noting each practice must be

## **PA eHealth Advisory Board Minutes**

May 3, 2019

capable of connecting to an HIO. Most of the practices don't understand this process; that is where Quality Insights comes in. They have already contacted every practice on the list. Chair Simon observed that this represents a tremendous change in outreach.

Ms. Sara Boateng brought up the topic of case reporting. It is in its infancy stage at the federal level. It is not a live registry at this point but is designed to streamline syndromic surveillance. Mr. Ciccocioppo explained the Allegheny County Health Department (ACHD) project, which is designed to leverage an open-source public health analytics and visualization software to crunch UPMC and AHN EHR data for Allegheny County residents. The intergovernmental agreement between DHS and ACHD is not yet fully executed, but we can provide an update on this project at the next meeting. We're supporting it because it is broad-based. Ms. Boateng noted that the Department of Health (DOH) would be interested in replicating this project.

Ms. Kaplan presented new projects proposed for FFY2020: these are a statewide care plan registry and a new grant program to support greater HIO and P3N interoperability with MA managed care organizations. Ms. Kaplan said the care plan registry will initially be for Medicaid patients. Mr. Laval Miller-Wilson was pleased to hear that Pennsylvania's 3 million Medicaid recipients could benefit from behavioral health and physical health MA MCOs having easier access to their patients' care plans. Ms. Kaplan said that once the care plan registry is implemented for MA patients, it will likely be made available for everyone. Mr. Ciccocioppo added that use of the P3N care plan registry will be voluntary, much like the advance directives registry that is being enabled with current-year IAPD funding. Mr. Miller-Wilson expressed interest in the advance directives registry and how it would play out. Regarding the MA MCO onboarding grants, Mr. Ciccocioppo advised that DHS required MA PH MCOs to join an HIO in 2018 and that Community Health Choices plans will likely be required to join an HIO in 2020 and BH MCOs in 2021. The process of onboarding payer members to an HIO is very different than onboarding provider EHRs to an HIO. To leverage their membership in HIOs to improve care coordination, the MA MCOs need customized interoperability solutions. The Advisory Board engaged in a robust discussion of how PA eHealth might structure the new HIO onboarding grant program. The members supported offering up to five (5), \$100,000, MA MCO interoperability grants in FFY 2020.

### **DHS Comments on CMS/ONC Proposed Interoperability Rules**

The deadline for comments CMS/ONC Proposed Interoperability Rules is today, May 3, 2019. The PA eHealth Partnership Program (PA eHealth) and the Office of Medical Assistance Programs (OMAP) have provided comments for DHS to submit. The CMS proposed rules require most providers and payers to enable Fast Healthcare Information Resource (FHIR) Application Programming Interface for the exchange of information with patients and each other. Mr. Ciccocioppo explained three provisions that impact providers, as well as information blocking language in the ONC proposed rule. CMS is not happy that some providers are failing to connect to HIOs to make their information available/ transparent. At some point, information blocking penalties will be pursued, as a fine of one million dollars (per occurrence). An overview of ONC's seven exceptions to information blocking was also presented.

From an interoperability standpoint, these proposed rules have an impact on PA eHealth and DHS as a payor. PA eHealth is requesting flexibility with FHIR versions that can be used to meet the new API requirement and OMAP is requesting reasonable implementation deadlines. PA eHealth also asked for federal support to improve patient matching and that health information exchange organizations be able to recover reasonable costs for providing interoperability services.

### **P3N Health Information Exchange Procurement**

Before speaking about this procurement, Mr. Allen Price gave several project updates: We are onboarding Central PA Connect HIE (formerly known as Lancaster General Health) and they officially go live in the next two weeks. The Department of Corrections (DOC) will be introduced to the HIETCC next

## **PA eHealth Advisory Board Minutes**

May 3, 2019

week. They are in the testing process and will go live in August. Mr. Price also explained the Statewide Health Information Exchange, IBM Watson Health Services to the P3N, the Provider Directory, Master Patient Index, Record Locator Service, Opt-Out Registry, Encounter Notification Service, and Advance Care Planning Documents Registry. IBM also provides the infrastructure that supports the P3N Admission, Discharge, Transfer (ADT) Service.

PA eHealth received a new Statement of Work (SOW) from IBM Watson for the Advance Care Planning Documents Registry. Ms. Clarke asked a question about Opt-Out. Ms. Rhonda Dolen explained the Opt-Out process, adding that we provide notification to the patient once a patient has been OPTED-OUT. It was also noted that we receive a feed of Medicaid patients from DHS.

Mr. Price spoke about the various federal and state laws, regulations, and standard the P3N infrastructure must support. He reviewed a list of stakeholders and influencers that will rely on the P3N as well as system functions and features needed in the new system. Since the current IBM contract goes through April 2021, we are looking to finalize a new vendor contract and begin implementation in late-2020.

The Advisory Board members engaged Mr. Price and Ms. Kay Shaffer in a robust discussion around the procurement timetable, system requirements, and vendor qualifications. The members expressed support for moving ahead with the procurement and felt that the system requirements would support continued robust health information exchange in the Commonwealth.

Due to DHS procurement practices and requirements, PA eHealth staff was unable to comment on certain system specifications without confidentiality agreements in place. Procurement rules will soon require a blackout period be imposed.

### **P3N Vendor Services**

Mr. Price gave an overview of what transpired when HSX's connectivity to the P3N went down, and how it illustrates the need for better communication and resolution going forward.

### **Statewide Resource and Referral Tool**

Ms. Nora Carreras addressed the Advisory Board regarding plans for a new Statewide Resource and Referral Tool. She said that in concert with the development of a uniform assessment tool to identify social determinants of health (SDOH) such as food insecurity, access to transportation, child care access and housing, DHS is examining how we can better connect people to services that address their needs. Duplication of services can be counter-productive, delaying progress and causing frustration for the individual receiving services. That is why DHS wants to work with their community partners to explore development of a statewide online resource and referral tool that would allow for better communication and collaboration among service providers, provide up-to-date and informed recommendations for services and programs, track whether someone received the service to which they were referred, and monitor progress.

Through increased coordination across all entities serving an individual or family, DHS envisions a future in which:

- 1) Individuals' and families' needs are clearly and consistently assessed
- 2) Needs are met through the delivery of the right service at the right time, regardless of whether the service is provided by a state agency, local government, or community organization
- 3) Individuals and families, particularly those who are most vulnerable, have a strong relationship with a person who can help them navigate across systems and organizations.

This is what our clients need to help them stay on track for improved long-term health outcomes and success in education or the workforce. This is a multi-generational approach that will help state and

## **PA eHealth Advisory Board Minutes**

May 3, 2019

county agencies and health and social service providers make sure we are doing what we need to do to help our clients succeed.

Ms. Carreras is leading the Resource and Referral Tool initiative for the Secretary, having just come from that steering committee meeting to attend our meeting today. She presented to the Board an overview of this Tool, which is about to go into the Procurement process. The solution will likely be implemented in a geographically phased approach that will include many types of community organizations working closely with the Department of Health.

### **Stakeholder Engagement in this Initiative**

At the last Advisory Board meeting in February, Ms. Leesa Allen had explained the basic concept of this RFI, and Lancaster General Health is heavily involved in this initiative. Ms. Carreras said that DHS assembled an advisory committee which consists of the Department of Health (DOH), Geisinger, Ms. Alice Yoder of Lancaster General Health and others. This committee, composed of a large group of people, is divided into three subcommittees. Once the advisory committee agrees on a Tool, they will proceed. First, we need to know what services are being offered, what services people need and what services they are not receiving. Out of 23 vendors, 13 of them were invited to present demos to the committee. The next steps will include: Composition of the RFP, submission of a Committee report with recommendations; conversations with additional stakeholders, and feedback from state agencies, including DDAP, DMVA, and DOH.

Ms. Carreras asked for questions or comments about the Resource Referral Tool. Dr. Steinberg asked if there is an incentive to participate, and if any prices/costs have been determined. Ms. Carreras stated that we haven't spoken yet about a specific incentive. Also, some organizations feel vulnerable, so this may be a slow process. Dr. Heilman expressed hope that the initiative will be fully implemented before he retires, and Ms. Carreras appreciated the import of his comment. Mr. Fisne asked if marketing is available to different areas. Ms. Carreras advised that they met with MCOs early in the process and hope to have a pilot in 2020. This is a very competitive contract which is worth a lot of money. As for marketing, vendors go out to the community to build relationships and networks.

Ms. Kathleen Beani asked if additional stakeholders could join the committee and provide input, but the committee is already at full complement. There will be a 30-day comment period, during which the public can provide their feedback. Ms. Carreras concluded her presentation by noting that the Commonwealth has never undertaken a project of this magnitude, and the Resource Referral Tool initiative will bring Pennsylvania to the forefront of SDOH. She then provided her contact information to meeting attendees.

### **Public Comment**

There were no public comments.

### **Adjournment**

The meeting was adjourned at 1:59 P.M.

### **Next PA eHealth Partnership Advisory Board Meeting**

Friday, August 9, 2019, 10:00 A.M. – 2:00 P.M. in the Keystone Building Desert Room, 400 North Street, Harrisburg, PA 17120

**Minutes Approved:** August 9, 2019