

State HIT Activities

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Alabama	Prescription drug database	Alabama legislature approved creating the database in 2004	Started with federal grant money. Maintained with \$10 fee practitioners pay each year as part of obtaining their controlled substance registration certificates.	Privacy concerns from patients but state law put limits on use of information.			As of Dec. 7 th 2007, 943 practitioners had signed up to use the system, as had 266 pharmacists and 130 representatives of law enforcement agencies. Between January 2006 and September 2007, medical regulatory boards ran 1,881 queries on the database. Practitioners had accessed the system more than 26,000 times to check on patients. Pharmacists had used the database more than 3,900 times.
Alaska							
Arizona	Arizona Health-e Connection	Non-profit, public-private partnership formed in 2007 to facilitate HIE and HIT in the state	EO 2005-25 supported by eHealth Initiative Foundation AZ RTI contract (HISPC) for \$350,000 State funded \$1.5 million in health IT grants to rural communities \$12 million Medicaid	Health-e Connection Roadmap: recommend standing committee of the Board related to Consumers	http://www.azhec.org/	<u>Board of Directors</u> <i>Designated Directors (at large)</i> Debra Nixon Partners in Quality (Consumer Representative)	Arizona Health-e Connection Summit held March 20, 2007 to discuss progress on implementation of Roadmap

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	<p>E-Prescribing initiative decreed by Executive Order issued by Governor Janet Napolitano</p> <p>Yuma Regional Medical Center creating a RHIO to enable health information exchange among health care providers</p>	Ariz. Health e-Connection and executive branch agencies will lead promotion of e-Rxs	<p>Transformation Grant to develop a statewide HIE</p> <p>Grant from the AZ Government Information Technology Agency</p>	Goal is to reduce mistakes and associated costs. Will help prevent adverse drug “events” from mistakes.		<p>RHIO will comprise YRMC, the Yuma County Health Department, Regional Center for Border Health and Sunset Community Health Center</p>	Currently (5/6/08) less than 3% of AZ health care providers use any form of e-prescribing
Arkansas							
California	CalRHIO	Not-for-profit entity formed in 2006	<p>\$4.65 million from mostly private sources</p> <p>CA RTI contract (HISPC) for \$350,000</p>	24 member board includes consumer and privacy advocates; safety net provider; hospital, health plan, medical group leaders; employer representative; non-voting state and federal government reps	http://www.calrhio.org/	<p><u>Board of Directors</u> <i>Chair</i> Molly Coye, M.D., CEO, Health Technology Center <i>Members</i> Linda Ackerman, attorney, staff counsel, Privacyactivism.org Don Crane, CEO, California Association of Physician Groups Duane Dauner, president, California Hospital Association Joe Dunn, CEO, California Medical Association</p>	<p>CalRHIO sponsors statewide Summit meetings to share strategy, priorities, research, and experiences and to educate and engage stakeholders</p> <p>Agenda, proceedings, and findings are available on the website</p> <p>The last summit was held June 21, 2007</p>

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						<p>Seth Fearey, vice president and COO, Joint Venture: Silicon Valley Network</p> <p>Patrick E. Fry, president and CEO, Sutter Health</p> <p>Lark Galloway-Gilliam, executive director, Community Health Councils, Inc.</p> <p>Jennie Chin Hansen, board member, AARP</p> <p>Don Holmquest, CEO, CalRHIO</p> <p>Ronald W. Jimenez, M.D., associate medical director, clinical informatics, Santa Clara Valley Health and Hospital System</p> <p>Charles Kennedy, M.D., vice president, Clinical Informatics, WellPoint, Inc.</p> <p>Robert Klein, M.D., associate executive director, The Permanente Medical Group, Northern California</p> <p>Peter Lee, president and CEO, Pacific Business Group on Health</p> <p>Chris Ohman, president and CEO,</p>	

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						California Association of Health Plans Tom Priselac , president and CEO, Cedars Sinai Tom Williams , executive director, Integrated Healthcare Association Mark Windisch , senior advisor, L.A. Care Health Plan <i>Ex-Officio Members</i> Lesley Cummings , executive director, Managed Risk Medical Insurance Board Cindy Ehnes , director, California Department of Managed Health Care Jeff Flick , regional administrator, Centers for Medicare and Medicaid Services Region IX Jo Ellen Hyland Ross , president and CEO, Lumetra	
California	Legislation – AB1298	N/A	N/A	California residents must be notified when their electronic medical information or health insurance information has been exposed; prevents any company that holds	California Office of Information Security and Privacy Protection (www.oispp.ca.gov) Governor Schwarzenegger's order on digitizing medical information 7/24/06 (http://gov.ca.gov/index.php?/executive-order/2616/)	Amends several existing privacy laws. Data breach notification law now includes unencrypted medical histories, information on mental or physical conditions, and medical	Signed 10/14/07; effective 1/2/08

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	<p>California Clinical Data Project: CALINX Standards</p> <p>“Tools for Quality” program creating electronic registries – stepping stone to more comprehensive HIT systems</p>	<p>Created by CA HealthCare Foundation. Management, promotion and support transferred in late 2007 to Integrated Healthcare Association.</p> <p>33 clinics throughout state given matching funds of up to \$40,000 each to support software systems to help doctors and</p>	<p>Grants from the CA HealthCare Foundation, Blue Shield of CA Foundation, the Community Clinics</p>	<p>electronic personal health records from disclosing that information w/out consent</p> <p>Clinics receiving money serve the uninsured and low income and the goal is to improve chronic disease care.</p>	<p>All information can be found on the IHA website.</p>	<p>treatments and diagnoses, as well as unencrypted insurance policy or subscriber #s, any applications for insurance, claims histories and appeals. Breach must include a CA resident’s name, but not SS# to require notification. Law applies to state agencies and any company doing business w/Californians, even if not headquartered in the state.</p> <p>Goal is to develop and implement laboratory and pharmacy data standards through CA to facilitate data integration into clinical information systems.</p>	<p>Currently 6 health plans, 200 provider organizations, and two national labssend and receive data using CALINX standard. CALINX pharmacy has achieved critical mass of adoption. CALINX lab is gaining ground. Hope both plans will be adopted across the state in 2008.</p>

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	<p>Legislation: AB 211, SB 541</p> <p>State issued \$6mill in HIT grants as part of \$50mill grant package made with PacifiCare Health Systems when it merged with UnitedHealth Group in 2005</p>	<p>nurses track patients.</p> <p>Introduced by Assemblyman Dave Jones (D-Sacramento) and Senator Elaine Alquist (D-Santa Clara). Latter bill supported by the California Hospital Assn. Sponsored by Department of Public Health and likely to win signature of Governor.</p>	<p>Initiative, The CA Endowment, and Kiser Permanente Southern CA Region totalling \$4.5mill.</p>	<p>First bill protects patient privacy; created new state Office of Health Information Integrity (OHII, within the CA HHS Agency) with power to review plans and violations and assess fines of up to \$250K against people who violate patient privacy. Companion Senate bill would allow fines of up to \$250K against health care providers in the case of breaches.</p> <p>Funding aims to help underserved communities develop telemedicine and EHR system and improve access to other health services</p>		<p>Requires hospitals to draft plan to safeguard patient information and allows for fines up to \$250K against people and health care providers who violate patient privacy</p>	<p>Bills won final passage on both houses of the Legislature by Aug. 31st 2008. Awaiting Governor's signature which is dependent on passing of state budget.</p>
Colorado	Colorado Health Information Exchange – now part of Colorado Regional Health Information	Non-profit organization incorporated in March 2007	<p>\$5 million AHRQ State-Regional Demonstration Grant</p> <p>Contracts with eHealth Initiative</p>	1 of 6 standing Board Committees includes Consumer Advisory Council	http://www.corhio.org/	<p><u>Board of Directors</u> <i>Chair</i> Donna Lynne, Kaiser Permanente <i>Members</i> Forrest M Cason,</p>	<p>Board meets monthly</p> <p>Next meetings are scheduled for Oct. 25, 2007; Nov. 29, 2007; and Dec. 27, 2007</p>

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	<p>Organization</p> <p>Colorado Health Institute</p>	<p>Nonprofit organization established in 2002 by 3 foundations (Caring for Colorado, Rose Community, The Colorado Trust) to provide objective health information for Colorado decision-makers in the public and private sectors</p>	<p>Foundation & AHRQ Colorado Foundation planning grant</p> <p>InformationLink grant to explore population-based data exchange and the involvement of public health</p> <p>CO RTI contract (HISPC) for \$375,000</p>	<p>Constituents include state policymakers, health planners, business & nonprofit communities, advocacy & consumer groups, health care providers, foundations, media, and the public</p>	<p>www.coloradohealthinstitute.org</p>	<p>PhD, Treasurer Arja Adair, Jr., Colorado Foundation for Medical Care (ex-officio [EO]) Rosemary Bakes-Martin, MS, MPH, El Paso Dept. Public Health and Environ. Les Berkowitz, Technology & Corporate Law B. Ned Calonge, MD, MPH, CO Dept. of Public Health and Environment (EO) Lynn Dierker, RN, Foundation of Research & Education of AHIMA Pam Hanes, PhD, Colorado Health Institute Marjie Harbrecht, MD, Colorado Clinical Guidelines Collaborative Joan Henneberry, Colorado Dept of Health Care Policy & Financing (EO) James Hertzel, Alumni Consulting Group International, Inc. Gerry Lewis-Jenkins, COPIC Companies Michael Locatis,</p>	

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	<p>Legislation: <u>Chapter 282, CO S 196</u></p> <p><u>Chapter 319, CO H 1346</u></p>			<p>Requires the committee to pursue an interstate compact among western states to create internal state health information technology and health information exchange programs with the goal of connecting and exchanging information between the</p> <p>Concerns managed care in the Medical Assistance Program. Section (3) Subject to</p>		<p>State of Colorado, Chief Information Officer (EO) Lynn Parry, MD, Colorado Medical Society Sandy Peif, VP, Client Strategy Arnold Salazar, Colorado Health Partnerships, LLC Steven J Summer, Colorado Hospital Association Lee Thielen, Consultant, Public Health</p> <p>Creates HIT Advisory Committee</p> <p>Provides for telemedicine reimbursement in the State's Medical Assistance Programs for home health care services or home and community base services that are otherwise eligible for reimbursement under the program.</p>	<p>Enacted 05/24/2007</p> <p>Enacted 05/29/2007</p>

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	<u>Chapter 296, CO S 74</u>			<p>the approval of the state board, a PIHP agreement may also provide for an increase in the fee paid to the contractor in an amount reasonable calculated to cover the costs of collecting and maintaining the medical records of recipients through an electronic medical records system.</p> <p>Calls for the Health Care Task Force to make recommendations for... an interoperable, statewide electronic health information exchange , including but not limited to: (I) privacy and security concerns; (II) the benefits to public medical assistance programs participating in an electronic health information exchange; (III) accessibility of electrocardiogram tracings by emergency treatment facilities; (IV) priorities for implementing a</p>		Creates the emergency access to health information demonstration program	Enacted 05/25/2007

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				<p>statewide electronic health information exchange to improve health care safety, quality, and cost-effectiveness; (V) how western states can leverage resources and influences to advance regional and national electronic health information exchanges; and (VI) the benefits of an electronic health information exchange for Colorado's health care reform efforts.</p> <p>The task force is to solicit information from an independent nonprofit organization established to facilitate the availability of a statewide electronic health information exchange; public and private health care providers from diverse geographic areas of the state; business interests; and consumers.</p>			
Connecticut	Legislation: <u>Chapter 185, CT S 1484</u>					Sec. 24. (NEW) (Effective July 1, 2007) eHealth Connecticut shall be	Enacted 07/10/2007

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						designated the lead health information exchange organization for the state of Connecticut for the period commencing July 1, 2007, and ending July 1, 2012. The Commissioner of Public Health shall contract with such organization to develop a state-wide health information technology plan, which includes development of standards, protocols and pilot programs for health information exchange.	
Delaware	Delaware Health Information Network	Non-profit organization created by State Legislature	\$5 million AHRQ State-Regional Demonstration Grant	<p>Consumer Advisory Committee – 1 of 2 committees of the Board of Directors</p> <p>As a joint initiative between private, federal and state funds, a \$3,000,000 appropriation shall be utilized to support the development of an interoperable network to exchange clinical information among all healthcare providers across the state to</p>	http://www.dhin.org/	<p><u>Consumer Advisory Committee</u></p> <p><i>Chair</i> Joann Hasse, DHIN Board of Directors; League of Women Voters</p> <p><i>Members</i> Sherry Eshbach, Division of Public Health Patricia Hartmannsgruber, MLS, Delaware Academy of Medicine Mary Howell, General Public</p>	

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	Legislation: <u>DE S 155</u>			<p>improve patient outcomes and patient-provider relationships. The system shall be designed to allow patient clinical information to be shared across all healthcare facilities and organizations and across public and private sectors.</p> <p>§2523. Exemptions. Nothing in this chapter may be construed to prevent: (g) a pharmacist in this State from dispensing</p>		<p>Janet Kramer, MD, Retired Physician General Public James Lafferty, Mental Health Association in Delaware Pam Maier, Delaware House of Representatives Rita Marocco, NAMI-DE Cathy McKelvey, Kent County Faith Community Brian Olson, La Red Health Center LaVaida Owens-White, Interfaith Health Ministries Brian Posey, AARP Liz Shantz, State Council for Persons with Disabilities Joshua Vaught, Casscells Orthopaedics & Sports Medicine Calvin L. Young, UAW Community Healthcare Initiative</p> <p>This bill replaces and updates the current pharmacy chapter of Title 24, including provisions relating to objectives, licensure,</p>	Enacted 7/24/07

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				a valid non-controlled prescription drug pursuant to a prescription received via electronic transmission from a practitioner's office to the prescription department of the dispensing pharmacy.		examination, reciprocity, complaints, grounds for discipline, hearings, and sanctions.	
District of Columbia	Regional Health Information Organization	Collaboration of 6 DC-based community health centers: Whitman-Walker Clinic, So Others Might Eat, La Clinica del Pueblo, Mary's Center for Maternal and Child Care, Bread for the City, and Family and Medical Counseling Service.	\$11mill in grants from District officials	Purpose is to better gather, coordinate and share personal healthcare information of the district's poorest of the poor and its homeless population			Expected to go live in Dec '08.
Florida	Florida Health Information Network (FHIN)	Non-profit organization created by Governor-led Health Information Infrastructure Advisory Board	<p>\$3.5 million in State funding for local/ small-scale information exchange projects</p> <p>FL RTI contract (HISPC)</p> <p>Push to offer grants totaling \$9mill was killed last year. New bill introduced in April '08 by Rep. Grimsley was approved by House</p>	<p>Consumers targeted for active engagement in FHIN</p> <p>State Consumer Health Information and Policy Advisory Council HIT Committee will be formed in Fall of 2007</p> <p>Currently no consumer representative serving on the Board, but a number of members represent consumers' interests in developing</p>	<p>http://ahca.myflorida.com/dhit/index.shtml</p> <p>South Florida Health Information Exchange executive director Dr. Kate Callahan</p>	<p><u>Governor's Health Information Infrastructure Advisory Board</u></p> <p><i>Chair</i> W. Michael Heekin</p> <p><i>Members</i> Carmen Aceves-Blumenthal, Pharmacist, McKesson Medication Management Robert G. Brooks, MD, FSU College of Medicine Ronald R. Burns,</p>	The first HIT Committee meeting expected in the first part of 2008

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	State gave PDAs to participating providers in Medicaid programs to enable them to perform such actions as viewing patient medication history,		<p>but has not been funded. Regional exchanges left to fend for themselves.</p> <p>State documented savings of \$40/person per month in 2006 – total savings to Medicaid of \$25 million</p>	<p>statewide health information network</p> <p>South Florida Health Information Initiative will develop an organization structure inclusive of health care provider, payer, IT, consumer, advocacy, and business community in Miami-Dade and surrounding counties</p> <p>SFHIE finishing final details of Tri-County Uninsured Patient Information Exchange linking emergency room via a common Web—based portal. Targeting uninsured patients for e-records to result in most efficient improvement in care / returns.</p>		<p>DO, Florida Osteopathic Medical Association Raymond F. Caron, MD, Pediatrician Brian O. Coleman, DMD, Omega Dental Group Jeannette W. Ekh, BlueCross BlueShield of Florida Peter D. Greaves, HCA, Inc. Kevin S. Kearns, Health Choice Network Rhonda M. Medows, MD, Georgia Department of Community Health Linda E. Moody, PhD, University of South Florida James S. "Sandy" Phillips, Perot Systems Corporation Robert G. Reese, CSC Consulting, Global Health Solutions</p>	

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	<p>sending prescriptions to pharmacies and being alerted to potentially adverse drug interactions.</p> <p>The Greater Ocala Health Information Trust to use PatientKeeper to provide Web portal for physicians and an integration platform</p> <p>Legislation: <u>HB 1155</u></p>			<p>408.0611 Electronic prescribing clearinghouse.--</p> <p>(1) It is the intent of the Legislature to promote the implementation of electronic prescribing by health care practitioners, health care facilities, and pharmacies in order to prevent prescription drug abuse, improve patient safety, and reduce unnecessary prescriptions. To that end, it is the intent of the Legislature to create a clearinghouse of information on electronic prescribing to convey the process and advantages of</p>		<p>Keeps initial financial burden low for the HIE by using single monthly fee the gradually increases rather than up front costs.</p> <p>Prohibits sale, manufacture, alteration, delivery, uttering, or possession of counterfeit-resistant prescription blanks for controlled substances with intent to injure or defraud; specifies circumstances under which pharmacist who dispenses controlled substances by mail is exempt from certain requirements governing patient ID; requires ACHA to monitor & report on implementation of electronic prescribing, etc</p>	<p>The HIE hopes to have software up and running in late Sept or Oct '08</p> <p>Enacted 6/15/07</p>

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				electronic prescribing; to provide information regarding the availability of electronic prescribing products, including no cost or low-cost products; and to regularly convene stakeholders to assess and accelerate the implementation of electronic prescribing.			
Florida	Big Bend RHIO					Covers a 20-county area around Tallahassee	Closer to going live. RHIO is currently testing its system and enabling access to patient data.
Georgia	<p>Georgia Office of Health Information Technology and Transparency / IT advisory board</p> <p>Chatham County Safety Net Planning Council; East Georgia Healthcare Center, Swainsboro; Sumter Regional Hospital; Washington County Regional Medical Center and</p>	<p>Approved by the Georgia Community Health Department</p> <p>Projects will be overseen by the Health Information Technology and Transparency Advisory Board and the GA Dept of Community Health</p>	<p>About \$4.8 million in grants</p> <p>\$800,000 in matching state grants to develop health information exchange</p>	<p>Transparency website for consumers.</p> <p>State plans to promote use of electronic health records and electronic prescribing</p>	<p>Rhonda Medows, commissioner of the community health department</p>	<p>Sumter Regional and Washington County Regional will develop electronic medical record. East Georgia Health will create e-prescribing. Chatham County</p>	

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	Extended Care Facility, Sandersville Gov. Sonny Perdue issued Executive Order creating Georgia Rx Echange	Participation agencies include GA Dept of Community Health, Dept of Juvenile Justice, Dept of HR and Dept of Corrections. All coordinated by SCH's Office of HIT and Transparency		Provide coordinated care for patients receiving HC in public funded HC programs. Provide essential and timely Rx drug info to HC professionals treating patients.		implements both an EMR and e-prescribing.	
Hawaii	Quality Healthcare Alliance Health Information Exchange Network	Non-profit consortium	\$80,000 funding pool and in-kind support from founding members \$500,000 AHRQ implementation grant	Board includes patient/consumer representative and Medicare/Medicaid representatives			
Idaho							
Illinois							
Indiana	Indiana Health Information Exchange Indiana Network for Patient Care	Nonprofit organization created in 2004 Multiparty datasharing agreement developed by Regenstrief Institute (not-for-profit research organization affiliated w/ Indiana Univ.)	\$5 million AHRQ State-Regional Demonstration Grant eHealth Initiative Foundation Ambulatory Care Quality Alliance pilot project Connecting for Health Consortium, funded by Markle and RWJF		http://www.ihie.com/ Jenny Siminski 317-644-1724 jsiminski@ihie.com	<u>Board of Directors</u> <i>Officers</i> Vincent Caponi (Chairman), CEO, St. Vincent Health Thomas Inui, MD (Vice-Chairman), President & CEO, Regenstrief Institute David Johnson (Secretary-Treasurer), CEO, BioCrossroads <i>Board</i> D. Craig Brater, MD , Dean, Indiana University School of	In 2007, Saw number of providers using services jump 55% and an increase in number of hospitals in its network. Distributed first Quality Health First program reports to providers and health plans. IHIE added four more hospitals to its network

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			\$2.5 million contract from ONC (NHIN II)			<p>Medicine</p> <p>Robert Brody, CEO, St. Francis Hospital and Health Centers</p> <p>Virginia Caine, MD, Commissioner, Marion County Health Department</p> <p>David Cook, MD, At-large</p> <p>William Corley, CEO, Community Health Network</p> <p>Wayne DeVeydt, Executive Vice President & CFO, WellPoint, Inc.</p> <p>Gregory Larkin, MD, President, Indianapolis Medical Society</p> <p>Daniel Evans, CEO, Clarian Health Partners</p> <p>Matthew Gutwein, CEO, Health & Hospital Corp. of Marion County</p> <p>Ed (Ned) Lamkin, MD, At-large</p> <p>Honorable Bart Peterson, Mayor, City of Indianapolis</p> <p>Kenny Stall, MD, President, Indiana State Medical Association</p> <p>Judy Monroe, MD,</p>	

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	<p>Legislation: <u>Public Law 111, IN S 551</u></p> <p>HB 1342</p>			<p>Establishes the Indiana Health Informatics Corporation for the purpose of ensuring and improving the health of the citizens of Indiana by encouraging, facilitating, and assisting in the development and operation of a statewide system for the electronic exchange of health care information and other health informatics functions in Indiana.</p>		<p>Commissioner, Indiana State Department of Health</p> <p>The corporation shall define a vision for a statewide health information exchange system to electronically exchange health care information between entities in a health care system; prepare a plan to create a statewide health information system; encourage, facilitate, and assist in the development of the statewide health information exchange system; respond to changes in the market related to a statewide HIE. Calls for compliance with HIPAA</p> <p>As a condition for licensure, health providers must, not later than January 1, 2010, use an electronic health records system that meets certain requirements for purposes of billing and receipt of claim</p>	<p>Enacted 05/02/2007</p> <p>Pending as of 4/4/08</p>

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						payment for services rendered by the health provider	
Iowa							
Kansas	<p>Governors Commission on Healthcare Cost Containment</p> <p>Kansas Health Information Exchange Commission</p>	<p>Established in Dec. 2004</p> <p>Established by Governor in Feb. 2007</p>	EO 04-14 supported by eHealth Initiative Foundation	Commission consists of no more than 20 members representing the provider community, consumers, business community, health plans, government, IT experts, health policy experts	http://www.khpa.ks.gov/QandI/default.htm	<p><u>HIE Commission</u> <i>Co-Chairs</i> Jeff Ellis, Lathrop and Gage Karen Braman, Preferred Health Systems <i>Members</i> Tom Bell, Kansas Hospital Association Jennifer Brull, MD, Prairie Star Family Practice Helen Connors, KU Center for Healthcare Informatics Joe Davison, MD, West Wichita Family Physicians Diana Hilburn, Via Christi Health Systems, Inc. Jackie John, RN, Great Plains Health Alliance Maren Turner, AARP Kansas Ken Mishler, Kansas Foundation for</p>	

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	State incorporated e-prescribing systems into Medicaid EHRs.					<p>Medical Care Marci Nielsen, Kansas Health Policy Authority Sandy Praeger, Kansas Insurance Commissioner Howard Rodenberg, Kansas Dept. of Health and Environment Kristi Schmitt, ARNP, Finney County Health Department Bob St. Peter, MD, Kansas Health Institute Bill Thornton, MGP Ingredients Bill Wallace, Blue Cross Blue Shield Kansas</p> <p>Providers can go to web-based portal to see Medicaid Rx drug claims data for their patients, as well as information about the state Medicaid drug formulary.</p>	
Kentucky	Louisville Health Information Exchange			Plan to use health record bank to collect, store and facilitate access to medical information for residents open a health records account.			Currently developing a request for proposals for one or more vendors to collaborate, build and operate health record bank

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				Model allows for patients to control who accesses their information.			
Louisiana	Louisiana e-Health Initiative	Volunteer, non-profit, unincorporated group of healthcare and IT professionals	eHealth Initiative Foundation – work now integrated with broader Gulf Coast project				
	Hurricane Katrina Information Network and Digital Health Information Recovery Project for the State of Louisiana		Contract from HHS/ONCHIT to develop HIE LA RTI contract (HISPC) Medicaid Transformation Grant				
	Gulf Coast Health IT Task Force		eHI Foundation				
	Setting up electronic medical billing records for school-based health centers in the greater New Orleans region	Louisiana Public Health Institute (?)	2 grants: \$745,000 from RWJ Foundation and \$222,952 from W.K. Kellogg Foundation	System will help reduce medical errors, let other doctors and clinics know of treatments, and make sure doctors can get those records for students who change schools or have to be evacuated b/c of a disaster.		System will be installed in at least 12 school-based centers that provide health and mental health services to at least 14,000 students around the metro area. System will let school-based clinics collect bills they are owed, making them more self-sufficient.	
	Louisiana Health First, created by	Advised by Medicaid reform committee,	The department is required to avail	Authorizes the Department of Health		Creates a medical home system of care	Enacted 07/06/2007 Department currently

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	legislation: <u>Act 243, LA S 1</u> , part of the state's Health Care Reform Act of 2007	overseen by LA Health and Hospitals Department. Committee includes representatives from the LA Assoc. of Health Plans, LA Hospital Assoc. LA Public Health Institute, LA State Medical Society, LSU Health System and other healthcare groups.	itself of any public and private funding available to implement health information technology. Section 978.4. Funding The provisions of this Chapter shall be budget neutral or subject to an annual appropriation of the legislature.	and Hospitals to develop and implement a health care delivery system for Medicaid recipients and low-income uninsured citizens. Uses provider-service network that offers integrated system of care to Medicaid beneficiaries.		that shall be known as Louisiana Health First. To fully participate in Louisiana Health first providers must adopt health information technology as defined in the bill.	designing the federal waiver applications necessary to implement a LA Health First PSN demonstration project.
Maine	HealthInfoNet	Non-profit corporation created to launch clinical data sharing project	ME RTI contract (HISPC) ME Legislature approved funding to initiate pilot program for online patient record exchange, prior to going statewide (June 2007) \$1 million from Maine Health Access Foundation RWJF funding to participate in Information Links project	Consumer Advisory Committee – standing committee of Board responsible for reviewing and advising on policies/ procedures related to the confidentiality of clinical data and privacy protection for patients	Trish Riley, special assistant to Gov, on HealthInfoNet board Kala Ladenheim, CEO of Maine Center for Public Health http://www.hinfonet.org/	Consumer Advisory Committee: Shenna Bellows , Maine Civil Liberties Union John Branscombe , Maine Network For Health Clifford Ginn, Esq. , Maine Disability Rights Center Jean Gulliver , Consumer, Falmouth Pamela Haney , Maine Health Information Management Association George Hill , Family Planning Association of Maine Jaye Martin , Legal	Consumer Advisory Committee meetings are held every other month Next mtgs. scheduled for Oct. 25, 2007 and Dec. 6, 2007 Mtg. agenda and notes available on website Consumer survey and 8 focus groups conducted by Critical Insights (Public Opinion Research Firm) to gauge statewide opinion of the health information

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	<p>Federal judge struck down new state law that would have restricted the sale of physician drug prescription data, adhering closely to an opinion issued by a federal court in NH</p> <p>Legislation: <u>Act 203, H 765</u></p>					<p>Services for the Elderly, Inc. Neill Miner, National Alliance for the Mentally Ill Sue Stableford, University of New England Health Literacy Center Kawika Thompson, University of Maine System Hugh Tilson, M.D., Ph.D., Maine Center for Public Health</p> <p>An Act To Expand the Definition of Health Care Facility under the Maine Health and Higher Educational Facilities Authority Act Adds the following language to the definition of a health care facility. “a</p>	<p>exchange system</p> <p>Enacted 05/04/2007</p>

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	Legislation: <u>ME HB 1009, LD 1440</u>			Software prohibition. Beginning January 1, 2008, a person may not sell or distribute in the State computer software that influences or attempts to influence a prescribing decision of a prescriber to prescribe a certain drug or that directs a patient to a certain pharmacy. Features of computer software that are prohibited include, but are not limited to, pop-up and other advertisements, instant messages and economic incentives that are triggered by or in specific response to a selection, act or other input or designation of pharmacy by the prescriber or an agent of the prescriber. This		nonprofit statewide health information network incorporated in the State for the purpose of exchanging health care information among licensed providers in the State”	Enacted 6/20/2007

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	Court battle btw state and data-miners over law controlling the protection of Rx information containing patient-identifiable and prescriber-identifiable data			<p>subsection does not apply to in-house equipment provided within a hospital for use by prescribers and the hospital pharmacy or to information provided to a prescriber about prescription drug formulary compliance, patient care management or pharmacy reimbursement.</p> <p>Patient privacy protections at stake</p>			An appeal of the case has been stayed pending the outcome of the appeals court decision in similar NH case as of 8/08
Maryland	Health care groups vying for \$250,000 grant from state to develop system for sharing patient information electronically		\$250,000 State Grant	<p>System could reduce medical errors and improve communication between providers and insurers.</p> <p>Multiple retirement communities in collaboration with other health care organizations,</p>			Grant money could be allocated by the early summer, and a system could be in place as early as 2009.

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	Legislation: <u>MD H 979</u> establishing HIX pilot project to be operated by the MD-DC Collaborative		Hospitals may apply to the state health services cost review commission for a one-time award through rate adjustment to provide partial compensation for the cost of developing a data interface necessary for participation in the collaborative.	including hospitals, insurers, doctors and pharmacists.		Requires the Maryland Health Care Commission and the State Health Services Cost Review Commission to ensure the pilot project address privacy, security, economic interoperability issues and establishes appropriate policies and protections in these areas.	
Massachusetts	<p>Massachusetts Health Data Consortium (MHDC)</p> <p>MA-SHARE</p> <p>Massachusetts eHealth Collaborative (MAeHC)</p>	<p>Formed in 1978 by state public and private healthcare organizations</p> <p>Formed in 2003 as wholly owned subsidiary (sole member LLC) of MHDC</p> <p>Non-profit formed in 2004</p>	<p>\$3.4 million in grants from stakeholders; eHealth Initiative Foundation; AHRQ; Markle Foundation</p> <p>\$50 million from BCBS of MA to fund demonstration project</p>		http://www.maehc.org/		3 hospitals selected to pilot program which will bring computer software and training to communities to create a medical records system linking the hospital and its affiliated

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	<p>Greater Newburyport eHealth Initiative (aka Wellport ?)</p> <p>Massachusetts Prescription Reform Coalition</p>	<p>Subsidiary of Mass Health</p> <p>Created by Health Care for All; members include AARP, MassPIRG, AHA, American Stroke Association, BCBS of MA, and Neighborhood Health Plan</p>		<p>Coalition objectives:</p> <ol style="list-style-type: none"> 1) Prohibit gifts from drug makers to health care professionals who prescribe drugs. 2) Ban data-mining 3) Create a drug education program to provide unbiased information to physicians. <p>Bruce Auerbach of the MA Medical Society challenged slate of proposed revisions to HIPAA, including privacy rules regarding medical information. Medical society is</p>		<p>In collaboration with Lower Merrimack Valley Physician Hospital Organization, Anna Jaques Hospital and Whittier Independent Practices Association.</p>	<p>doctors.</p> <p>System to begin next year where patients can opt-in (or out) to have medical records etc put online and made available to other physicians and specialists.</p>

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				defending patient consent.			
Michigan	<p>Michigan Health Information Network (MiHIN)</p> <p>Michigan Health Information Technology Commission</p>	<p>Gov. Granholm initiative (PA 137-06)</p> <p>Dept. of Community Health and Dept. of Information Technology lead agencies</p> <p>Partnering w/ CyberMichigan, a division of Altarum Institute, Ann Arbor, Mich.</p>	\$4.5 million in state funding to create infrastructure for healthcare information exchange		<p>Michigan Dept. of Community Health or Karen Bantel, President, CyberMichigan</p> <p>http://www.mihin.org/</p> <p>http://www.michigan.gov/mihin</p> <p>http://www.michigan.gov/mdch/0,1607,7-132-2946_44257---,00.html</p>	<p><u>2007 Health Information Technology Commissioners</u></p> <p>Robin Cole, COO, Pro Care Health Plan, Inc. (consumer representative)</p> <p>Dr. Gregory Forzley, Medical Director of Informatics, Saint Mary's Health System</p> <p>Joseph Hohner, Vice President & CIO, Blue Cross Blue Shield of Michigan</p> <p>Toshiki Masaki, Public Policy Manager, Ford Motor Company</p> <p>Dr. Mark Notman, Associate Professor, Executive Director of Administrative Services, Chief Technical Officer, Michigan State University College of Osteopathic Medicine</p> <p>Janet Olszewski, Director, Michigan Department of Community Health</p> <p>Robert Paul, COO & President, Compuware</p> <p>Thomas Lauzon,</p>	<p>Initial planning meeting held 12/14/2005</p> <p>MiHIN HIE Grant Recipients Meeting held Sept. 21, 2007</p> <p>Next quarterly meeting for MiHIN HIE Grant Recipients scheduled for Jan. 16, 2008</p> <p>Grants awarded on 8/20/08 to two organizations to help them set up part of a statewide electronic network for the secure exchange of patient medical information. Latest grant awards mean that every county in the state is either panning or implementing a regional HIX</p> <p>First regional network scheduled to come online in Jan 2009. Entire system scheduled to be up and running in 2-5</p>

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						Vice President/CIO, Health Plan of Michigan Jeanne Strickland , Chief Compliance Officer, University of Michigan Health System Teri Takai , Director, Michigan Department of Information Technology Larry Wagenknecht , CEO, Michigan Pharmacists Association	years.
Minnesota	Minnesota Health Data Institute Minnesota e-Health Advisory Committee Minnesota Community Measurement	Public-private partnership to collect health data Established by law [Minn.Stat. 62J.495] to advise the state health commissioner on health information, including security and patient privacy Non-profit group established to collect, analyze and publish provider performance information	State funding Served as the steering committee for the MN RTI contract (HISPC) eHealth Initiative Foundation	State Health Department raising consumer awareness through state health status reports/goals for improvement, hospital reporting of adverse events, etc. In final RTI report, workgroups have specific recommendations regarding patient consent, including modifying state's patient consent laws to reflect use of electronic information exchange	Jim Chase, CEO of Minnesota Community Measurement Mary Kennedy, former State Medicaid Director Minnesota Privacy and Security Project www.health.state.mn.us/e-health/mpsp/index.html Minnesota e-Health Initiative www.health.state.mn.us/e-health/index.html	2 of 5 MN e-Health Workgroups have consumer focus: <u>Communication, Education & Collaboration</u> <u>Co-chairs:</u> Helen Hg Marketing & Communications Manager, Charities Review Council Bonnie Westra Assistant Professor, University of Minnesota, School of Nursing <u>Privacy & Security</u> <u>Co-chairs:</u> Laurie Beyer-Kropuenski Director, Public	<u>Recent State Activities:</u> Legislature approved \$14 million to establish IT grant and loan program for providers and communities to put HIT systems in place State establishing uniform electronic transaction standards for health plans and providers doing business with state State Medicaid agency awarded \$2.8 million HHS Transformation grant to establish IT system

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	<p>By 2009, state employee health plan will require all in-network pharmacies to accept e-prescribing. By 2011, all network providers must e-prescribe.</p> <p>Legislation: <u>Chapter 147, MN H 1078</u></p>			<p>Updates the states health privacy laws to allow for record locator services and for the electronic submission of consent. Establishes penalties for providers and health information exchanges that release a patient records without proper authorization.</p> <p>Updates health records law to allow for the use of record locator services (RLS). RLS are liable for</p>		<p>Information Policy Analysis, Department of Administration James Golden Director, Division of Health Policy Minnesota Department of Health</p> <p>Creates revolving account and loan program for interoperable electronic health record systems. Requires all group purchasers and health care providers to electronically exchange, in a standard form the following: eligibility, claims, payment and remittance advice.</p>	<p>for communications between primary care providers, patients, and state</p> <p>Enacted 05/25/2007. The uniform standards must be developed by January 1, 2009, with a status report on the development of these standards submitted to the legislature by January 15, 2008. Requires all hospital and health care providers to have interoperable electronic health records systems by January 1, 2015.</p>

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	Legislation: <u>Chapter 148, MN H 548</u>			inappropriate disclosures of patient information. RLS are required to keep an audit log of providers accessing a patient information. Allows for providers to submit patient consent electronically.		The Minnesota State Colleges and Universities Board of Trustees (MnSCU), in collaboration with the commissioner of employee relations may establish an enterprise-wide pilot project to provide consumer-owned electronic personal health records to MnSCU employees and all participants in the state employee group insurance program.	Enacted 05/25/2007
Mississippi	State gave PDAs to participating providers in Medicaid programs to enable them to perform such actions as viewing patient medication history, sending prescriptions		State estimates that program costs about \$35,000/month, but has saved around \$1.2 mill/month in prescription drug costs and nearly \$27,000/month in foregone				

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	to pharmacies and being alerted to potentially adverse drug interactions.		hospitalizations.				
Missouri	State incorporated e-prescribing systems into Medicaid EHRs. Nixon's Prescription Drug Access Technology Initiative	Grant program initiated by Attorney General Jay Nixon	\$630,000 to be given out in grants to local health organizations	Goal is to implement necessary technology to coordinate Rx needs of low-income state residents with free and reduced-cost programs already available from manufacturers and others	Attorney General's website: ago.mo.gov	Providers can go to web-based portal to see Medicaid Rx drug claims data for their patients, as well as information about the state Medicaid drug formulary.	Currently accepting grant applications and working with local health organization to determine most efficient means to implement technology.
Montana							
Nebraska	Nebraska Information Technology Commission eHealth Council	Created on Feb. 22, 2007 to facilitate discussions among eHealth initiatives in the state and to make recommendations on how the state should promote the adoption of eHealth technologies	Work on NE RTI contract (HISPC) coordinated by Council	Members of Council represent consumers	http://www.nitc.state.ne.us/eHc/index.html	eHealth Council <i>State of Nebraska/ Federal Government</i> Steve Henderson , Office of the CIO Senator Mick Mines , Nebraska Legislature Dennis Berens , HHSS, Office of Rural Health Marie Woodhead , representing Congressman Jeff Fortenberry <i>Health Care Providers</i>	Next Council mtg scheduled for Dec. 10, 2007 Agenda and minutes posted on website

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						Daniel Griess , Box Butte General Hospital, Alliance Dr. Delane Wycoff , Pathology Services, PC Dr. Harris A. Frankel (alternate) Joni Cover , Nebraska Pharmacists Assoc. September Stone , Nebraska Health Care Assoc. John Roberts , Nebraska Rural Health Assoc. <i>eHealth Initiatives</i> Donna Hammack , Nebraska Statewide Telehealth Network and St. Elizabeth Foundation Ken Lawonn , NeHII and Alegent Health Harold Krueger , Western Nebraska Health Information Exchange and Chadron Community Hospital C.J. Johnson , Southeast Nebraska Behavioral Health Information Network and Region V Systems <i>Public Health</i> David Lawton , HHSS, Public Health	

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						<p>Assurance</p> <p>Jeff Kuhr, Three Rivers Public Health Department, Fremont</p> <p>Rita Parris, Public Health Association of Nebraska, alternate</p> <p>Kay Oestmann, Southeast District Health Department</p> <p>Shirleen Smith, West Central District Health Department, North Platte, alternate</p> <p>Dr. Keith Mueller, UNMC College of Public Health</p> <p><i>Payers and Employers</i></p> <p>Steve Grandfield, Blue Cross Blue Shield</p> <p>Ron Hoffman, Jr., Mutual of Omaha</p> <p>Mary Steiner, HHSS Finance and Support, Medicaid</p> <p><i>Consumers</i></p> <p>Nancy Shank, Public Policy Center</p> <p>Alice Henneman, University of Nebraska-Lincoln Extension in Lancaster County</p> <p>Jim Krieger, Gallup</p> <p><i>Resource Providers, Experts, and Others</i></p> <p>Henry Zach, HDC</p>	

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						4Point Dynamics Kimberly Galt , Creighton University School of Pharmacy and Health Professions	
Nevada	Legislation: <u>Chapter 423, NV S 536</u>			HIPPA covered entities that transit individually identifiable health information in compliance with HIPPA provisions are exempt from more stringent state laws. The bill also allows individuals to opt out of electronic transmission of individually identifiable health information with an exceptions for Medicaid and SCHIP patients and when required by HIPPA or state law.			Enacted 06/13/2007
New Hampshire	New Hampshire Health Care Interconnectivity Project NH Connects for Health NH Citizen's Health Initiative	Created by the Governor in 2005	eHealth Initiative Foundation NH RTI contract (HISPC) for \$350,000	Vision for NH Health Care Information Technology and Exchange in 2014	http://www.steppingupnh.org	Anthem Blue Cross Blue Shield helping practitioners adopt e-prescribing by offering	Expect use of HIT/HIE up and running by 2014.

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	<p>State of NH revised its medical records law to better encompass electronic health record exchange while maintaining privacy rights.</p> <p>E-mail system to schedule appts, renew Rx's and communicate directly with doctors online at Frisbie Memorial Hospital in Rochester, NH</p> <p>Legislation: <u>NH HB</u></p>			<p>recognizes the interrelationships and importance of patient privacy, patient safety and public health.</p> <p>Requires certain things</p>		<p>access to discounted wireless plan, free e-prescribing software and free PDAs</p> <p>Officials say that Web portal could help alleviate the more than 1500 calls daily with questions on appts, Rx's, directions and other topics</p>	<p>Hoping to achieve goal of bringing together payors, providers, employers and citizens by Oct. 2008.</p> <p>As of May 28, NH doctors have immediate access to medical records and histories of Anthem Blue Cross and Blue Shield patients via computers or cell phones if they are signed up for its e-Rx program</p>

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	<u>134</u>			<p>when e-prescribing; allows a patient to receive a paper prescription instead of an oral or electronic one, requires electronic prescriptions to include a minimum set of data, electronic prescribing must not interfere with a patient's freedom to choose a pharmacy, prohibits electronic prescribing software from attempting to influence a prescriber's decision at the point of care.</p> <p>Prohibits the use of prescription information for any purpose other than the transmission of prescriptions, prescription refills, and clinical information displayed to the prescriber or pharmacist by entities that have access to the data solely for the purpose of transmitting or facilitating the transmission of prescriptions between the prescriber and the</p>			

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	Court battle btw state and data-miners over law controlling the protection of Rx information containing patient-identifiable and prescriber-identifiable data			pharmacy. Patient privacy protections at stake			Appeals panel waiting to rule on whether a trial court erred in April 2007 when it struck down a state law on free-speech grounds.
New Jersey							
New Mexico	Legislation: <u>NM HB 428</u>					Amends the New Mexico Telehealth Act to the New Mexico Telehealth and Health Information Technology Commission Act. Expands the focus of the commission to include health information technology. The bill also defines health information technology and adds a member from the health information technology industry to the commission.	Enacted 03/13/2007
New York	Health Information Exchange of New York	Founded by Iroquois Healthcare Alliance and the NY Health Plan Assoc; Board of Directors consists only of providers and	NY State Dept. of Health	To start sharing information by summer 2008; no consumer involvement	<u>www.hixny.org</u>		HIXNY in discussion with Adirondack Regional Community Health Information Exchange re: sharing data between the 2

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	Brooklyn Health Information Exchange	the NY Health Plan Assoc. Not-for-profit regional health information organization		Planning to develop patient-specific joint-care plans that will minimize number of visits and procedures.	Walter Fahey, vice president and CIO for Maimonides Medical Center and technical advisor to BHIX Irene Koch, executive director of BHIX Decided to use a “provider-by-provider” consent process rather than a “universal consent” process for enrollment. Will encompass Maimonides Medical Center, Kingsbrook Jewish Medical Center, Rutland Nursing Home, Elderplan, First to Care Home Care, MJCG Home Care, Metropolitan Jewish Geriatric Center, Shorefront Jewish Geriatric Center and Home Care, Sephardic Skilled Nursing and Rehabilitation Center, Visiting Nurse Service of New York and the 1199 SEIU	Using Initiate Patient software from Initiate Systems, Inc.	exchanges Expected to begin operations July ‘08
	Primary Care Information Project	NYC Health Department	\$30 million from NYC and \$30 million from state and federal gov’ts \$3.2 million grant from NY state supports e-health records initiative \$5 million from CDC and the Agency for Healthcare Research and Quality help evaluate it.	Extensive safeguards – including ability of a patient and doctor to see who has gained access to the records and to lock certain data behind a firewall so it can be seen only by the PCP	Software vendor: eClinicalWorks Dr. Thomas R. Frieden, NYC health commissioner		200 doctors with 200,00 patients have committed to using the system and city hopes to have 1,000 doctors with 1million patients using it by the end of 2008

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	<p>Public-private partnership of NY eHealth Collaborative and the DOH to run statewide collaborative process of HIT projects</p> <p>Bronx Regional Health Information Organization (Bronx RHIO) – 6 hospitals and HC institutions able to update and</p>	All projects will be evaluated by the HIT Evaluation Consortium	<p>City will underwrite part of expense for eligible doctors (those with at least 30% of patients either uninsured or on Medicaid), paying for licenses, on-site training, tools to use the software, and two years of maintenance and support.</p> <p>State awards \$105mill in grants (each btw \$1mill and \$10mill) to 19 leading community-based HIT projects</p> <p>Funded by member health orgs and NYS DOH grant.</p>	<p>Goals: Linking Medicaid data to interoperable EHRs, linking EHRS to NY State Immunization Registry, helping NYers have greater control over and access to their personal health information, and implementing quality measurement and reporting capabilities.</p> <p>Patient consent is required. Information protected by security software and only accessible to authorized users.</p>	Projects receiving grants: Bronx RHIO, Brooklyn HIX, Champlain Valley Physicians Hospitals Medical Center , Greater Rochester RHIO, Health Information Alliance of Syracuse, HIXNY, Hudson River Healthcare, Interboro RHIO, Long Island Patient eXchange, NYC DOH and Mental Hygiene, Parker Jewish Institute for Health Care and Rehabilitation, Southern Tier and Central NY HealthLink, Sunset Park Health Council, Taconic Health Information Network and Community (THIN) RHIO Inc. and Western New York Clinical Information Exchange (WNYCIE)	All projects required to participate in statewide collaboration process to align development of policies and technical approaches to ensure implementation of infrastructure and advance the HIT agenda.	<p>NY eHealth Collaborative released draft recommendations that describe how patient consent should be obtained before a patient's health information is exchanged electronically between entities participating in a regional health information organization (RHIO). The recommendations are part of a <u>draft white paper</u> released for public comment, developed by NYeC's privacy and security workgroup.</p>

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	<p>view electronic medical records of patients who sign up to participate. An additional 22 borough hospitals, health centers, nursing homes and home health service orgs will be able to view records and eventually will be able to contribute medical records such as lab results and new Rx's.</p> <p>New Democratic Coalition and Mayor Bloomberg unveiled roadmap to guide efforts to achieve a fully interoperable HIT exchange by 2018 with adoption by at least 75% of providers – pushing Congress for appropriate legislation</p> <p>NY state considering accrediting its RHIOs</p>			<p>Every info request by a user will be tracked. With InfoX providers will not have to depend on patient's memory or contact other busy health-care providers for up-to-date records.</p>		<p>Feasibility and evaluation project linked to 5yr, \$200mill project to develop an interoperable health information infrastructure, which</p>	

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	<p><u>AB 11690.</u></p> <p><u>AB 9807; SB 6807</u></p>					<p>includes implementing an EHR system and the Statewide Health Information Network for New York (SHIN-NY)</p> <p>Allows for electronic prescription and filling of controlled substances when in compliance with this act and federal regulation. The bill details the requirements for electronic prescription and filling of controlled substances</p> <p>The bill enacts major components of legislation which are necessary to implement the state fiscal plan for the 2008-2009 state fiscal year. The Commissioner in consultation with the New York Chapter of the American College of Physicians and Primary Care Physicians shall establish two medical home demonstration programs one in</p>	Pending as of 6/08

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	<p><u>SB 6808</u></p> <p><u>SB 8083</u></p>					<p>Nassua County and the other in Onondaga County to evaluate the effectiveness of the medical home concept. Use of health information technology to support the management and coordination of care provided to patients is one characteristic that should be looked at in establishing the program.</p> <p>Allows for providers who meet certain standards set by the Department of Health to receive supplemental payments for the increased cost of the use of electronic health records. To receive the payments a provider must have an operational electronic health record systems and a set percentage of his or her patients must be on Medicaid or uninsured.</p> <p>The bill establishes care coordination pilot programs. The care</p>	Enacted 4/23/08

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						<p>coordination pilot must include the use of health IT to support the provision of patient care. Calls for the establishment of various payment demonstration models in Medicaid to encourage participation in care coordination that is patient-centered and holistic in approach. Among the items to be considered: Support for telehealth expansion for at-home care and enhanced rates for providers with electronic medical records.</p>	<p>Enacted 4/23/08</p> <p>Pending as of 9/3/08</p>
North Carolina	NC Healthcare Information and Communications Alliance (NCHICA)	Membership organization established in 1994	<p>NC RTI contract (HISPC) for \$1.5 million</p> <p>Membership dues and in-kind member donations</p> <p>Contract awarded Oct. 5, 2007 from ONC (NHIN II)</p>	<p>Consumer Advisory Council on Health Information – subgroup of NCHICA formed in 2006</p> <p>Theme of NCHICA’s 13th Annual Conference and Exhibition, held Sept. 24-26, 2007, was “Cultures in Transition: Healthcare Consumers, Providers</p>	<p>W. Holt Anderson, CEO of NCHICA</p> <p>www.nchica.org</p>	<p><u>Consumer Advisory Council:</u> Co-chairs Linda Goodwin, Duke Sherrie Cannoy, UNC Greensboro</p>	<p>Consumer Advisory Council meets monthly to help NCHICA explore HIT issues from a consumer's perspective</p> <p>Next mtg. scheduled for Nov. 15, 2007</p> <p>Mtg. agendas and minutes available on website</p>

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North Dakota	Legislation: <u>ND H 1021</u> - creates a health information technology steering committee					Section 9. North Dakota health information technology steering committee. The North Dakota health information technology steering committee consists of the state health officer or the state health officer's designee, the governor or the governor's designee, the executive director of the department of human services or the executive director's designee, individuals appointed by the governor to represent state government interests, and individuals appointed by the state health officer to represent health information technology stakeholders.	Enacted 05/02/2007
Ohio	Greater Cincinnati Health Council Health Improvement	50-year old membership org. of hospitals and health systems operating in southern OH, northern KY, southeastern IN Non-profit subsidiary	 Aligning Forces lead	 Board has broad cross-	Dr. Lisa Simpson at Cincinnati Children's Hospital in the CHIP quality coalition Dr. Gerry Fairbrother, on performance measurement & improvement issues Dee Ellingwood, Sr. VP Planning &	 Current projects	

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	Collaborative of Greater Cincinnati	of the Council	agency for Cincinnati	section of community leaders (i.e., banks, providers, Procter & Gamble, non-profits such as United Way)	Business Development, Cincinnati Children's Hospital Medical Center; Chair-elect of the Greater Cincinnati Health Council Barbara Edwards, former State Medicaid Director http://www.gchc.org/ http://www.the-collaborative.org/ http://www.healthbridge.org/	include obesity reduction and prevention of low birth weight	
	HealthBridge	Regional health data clearinghouse established by the Council to share patient information (lab, radiology and transcribed notes) among participating physicians, hospitals, and nursing homes					
	Health Policy Institute of Ohio	Established by 8 Ohio foundations to serve as the “neutral convenor” of various stakeholders to explore how Ohio should encourage more use of HIT and exchange of health information	OH RTI contract (HISPC) for \$350,000 eHealth Initiative Foundation	Strategic Roadmap – recommends ensuring appropriate privacy & security protections; Final report to RTI identifies educating consumers on value of HIT against perceived risk of privacy and security breaches HISPC contract calls on participating states to bring together people from diverse stakeholder groups to: 1) assess organization-level business policies, practices and	www.healthpolicyohio.org/OHHIT/Index.html http://hispc.pbwiki.com/ HISPC project team includes: Bill Hayes, Project Executive; Bill Mitchin;; Stephanie Jursek; Philip Powers; Mary Crimmins; Socrates Tuch	Envisions working with neighboring states, like KY, to make interstate HIE possible since patients often cross the Ohio River to get care	
	Health Information Partnership Advisory Board	EO 2007-30S signed by Gov. on Sept. 17, 2007; expect non-profit organization will be formed to develop operational plan from					

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	<p>5th Annual Ohio Health Information Technology and Exchange Summit 10/27/08</p> <p>Governor Strickland issues HIT Executive Order</p>	recommendations made in strategic roadmap developed by HPIO and in plan issued by Ohio HISPC		<p>state laws that affect HIX within the state</p> <p>2) work closely with RTI, NGA, and other states and territories to exchange info and experiences regarding interoperable HIX barriers and best practices</p> <p>3) identify and propose practical solutions that protect privacy and security of HIX and permit interoperable HIX</p> <p>4) develop plans to implement solutions within the state and, if applicable, at the federal level</p>			
Oklahoma							
Oregon	Electronic Health	Oregon Department of	Two year \$5.5	At four meetings in	Greg Wenneson, project manager		Project expected to be

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	Records “Bank” for all Medicaid patients	Human Services	million federal grant to foster meaningful changes to Medicaid program	<p>January 2008 in Salem, Ore., companies with health records and electronic information exchange knowledge demonstrated their products and services for the public. At the end of demonstrations, the public could ask questions and make recommendations.</p> <p>When using the HER bank, patients will be able to access their personal health info through a secure Web site.</p>			<p>online by fall 2009.</p> <p>First request for proposals regarding the best way to integrate bank into providers’ existing EHR systems expected to go out to vendors around May.</p>
Pennsylvania	PHIX Governance Structure created by Executive Order by Gov. Rendell. Purpose: “is to perform activities necessary to develop, implement and manage a state-wide health information exchange, and other health information technology initiatives”	PHIX will have an executive director who will report to the CIO in the Governor’s Office of Administration.	Governor’s proposed budget for upcoming fiscal year includes request for \$4.8mill in initial funds for PHIX.				Office expects this year to issue request for proposals to select vendors to build and operate exchange
Rhode Island	Rhode Island Quality Institute (RIQI)	Non-profit coalition founded in 2001	<p>\$5 million AHRQ State-Regional Demonstration Grant</p> <p>\$96,000 contract</p>	One of five workgroups focused on engaging consumers	<p>Laura Adams, President & CEO of RIQI</p> <p>www.rqi.org</p>	<p><u>Consumer Advisory Committee:</u></p> <p><i>Co-Chairs</i></p> <p>Marti Rosenberg, Ocean State Action</p>	Meetings of the Consumer Advisory Committee held every second Tuesday of the month

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			from RWJF to develop standards for data exchange	<p>Consumer Advisory Committee to encourage consumer participation in the design and development of the HIE Initiative and educate patients on the benefits of data exchange</p> <p>Public relations consultants have conducted focus groups and consumer outreach to determine how best to target, inform, and engage consumers</p>		<p>Fund</p> <p>Mary Jones, Health Care Consumer <i>Members</i></p> <p>Ray Anderson, Health Care Consumer</p> <p>Ray Bandusky, Rhode Island Disability Law Center</p> <p>Deb DeBare, Rhode Island Coalition Against Domestic Violence</p> <p>Jackie Dowdy, Neighborhood Health Plan of Rhode Island</p> <p>Elizabeth Earls, Rhode Island Council of Community Mental Health Organizations</p> <p>Hon. Catherine Graziano, American Association of Retired Persons (AARP)</p> <p>Rick Harris, National Association of Social Workers, RI Chapter</p> <p>Mary Jones, Chair, Providence Community Health Center Board</p> <p>Lauren Nocera, Thundermist Health Center</p> <p>Katherine Patenaude, Rhode Island Parent</p>	Consumer Advisory Committee working with Legal & Policy Committee to develop standards and guidelines that define how patient-consumers will be able to control access to their health information

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	Legislators have introduced RI Health Information Exchange Act of 2008			Security measures through the act will ensure patients are aware of the exchange and have given permission to share their data. Also ensures that the exchange is voluntary for both providers and patients, who will have the right to terminate participation at any		<p>Teachers Association Marti Rosenberg Ocean State Action Fund Curtis Spence Health Care Consumer Vivian Weisman Rhode Island Parent Information Network Karen Williams Health Care Consumer Staff Laura Adams Rhode Island Quality Institute Christine Heenan Clarendon Group Allison Kerbel Clarendon Group Stacy Paterno Clarendon Group Amy Zimmerman Rhode Island Department of Health</p> <p>Legislation addresses privacy and security issues of an information exchange under development by RIQI.</p>	Enacted 06/21/2007

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	<p>Legislation: <u>RI S 1085</u></p> <p><u>HB 7409, SB 2679</u></p>			time. Consumers also will be able to obtain reports of what info has been shared and who is accessing it, as well as notices of security breaches.		<p>RESOLVED, That this General Assembly of the State of Rhode Island and Providence Plantations hereby affirms the need to transition from a paper-based medical system to an electronic-records system;</p> <p>Establishes a state-wide health information exchange (HIE) under state authority. Patients and health care providers shall have the choice to participate in the HIE. The executive office of health and human services shall enforce the provisions of the chapter and have regulatory authority over the HIE.</p> <p>The Rhode Island health information</p>	Enacted 7/10/08

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	<u>HR 7909</u>					<p>organization shall run the HIE and shall create and enforce policies for the exchange of confidential health data as required by the bill.</p> <p>Create the Electronic Health Records Task Force, a 23-member special legislative commission, to study and promote the interoperability of all aspects of electronic health record use in the state. The task force is to report to the General Assembly no later than Jan. 6, 2009, and is set to expire on March 6, 2009.</p>	Enacted 7/5/08
South Carolina	Legislation: <u>SC S 610</u>			<p>Section 44-117-320. (A) A practitioner may electronically transmit a prescription to a pharmacy if all of these conditions are met:</p> <p>(1) A valid practitioner/patient relationship must exist...</p> <p>(3) The prescription</p>		<p>Authorizes and establishes procedure for e-prescribing including contents of the prescription, acceptable methods of electronic prescription transmission, criteria and safeguards for the electronic equipment utilized to electronically transmit prescription, patients confidentiality, and</p>	Adopted 6/13/2007

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				<p>must be transmitted by the authorized practitioner or the practitioner's designated agent to the pharmacy of the patient's choice, and the prescription must be received only by a pharmacy, with no intervening person or entity having access to view, read, manipulate, alter, store, or delete the electronic prescription prior to its receipt at the pharmacy....</p> <p>(5) The prescription must have the practitioner's electronic or digital signature or key code.</p>		sanctions for violations.	
South Dakota							
Tennessee	Governor's eHealth Advisory Council	Governor Bredesen initiative; estab. by EO 35 to coordinate ehealth initiatives across the state, focusing on creation of electronic health records		Council's 16 members include providers, health plans, an HIE, purchasers (business and the state Medicaid agency) and one consumer (real estate broker)	<p>Andrea Gelzer, our CIGNA funder, is on the Governor's eHealth Advisory Council</p> <p>http://www.tennesseeanytime.org/ehealth</p>	<p>Governor Bredesen is also the co-chair of the NGA eHealth State Initiative</p> <p><u>eHealth Advisory Council:</u> <i>Chairman</i> Antoine Abdallah Agassi, Director/Chair State of Tennessee eHealth Council <i>Members</i></p>	Dell Study (conducted by Zogby) on Consumer Readiness for EHRs published June 27, 2007

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						Peter Dudley Greaves, HCA Healthcare, Senior Enterprise Architect Denise D. Wood, FedEx Corporation, Corporate Vice President and Chief Information Security Officer David H. Sensibaugh, Eastman Chemical Company, Director of Integrated Health Marlin Clifford Chapman, Nissan North America, Director of Human Resources, Compensation and Benefits Linda Eskind Rebrovick, Dell, Vice President Health Care Dr. William R. Stead, Vanderbilt University Medical Center, Associate Vice Chancellor for Health Affairs & Chief Information Officer David C. Guth, Centerstone, Chief Executive Officer & Co-founder Dr. David R. Reagan, Carespark RHIO, Chairman of the Board	

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						James H. Quillen , VA Medical Center, Chief of Staff Alan Leon Hill , Innovation Valley Health Information Network, Executive Director ClearPath Group, President & CEO Robert Steven Gordon , Mid-South eHealth Alliance, Former Chairman of the Board Baptist Memorial Health Care, Executive Vice President & Chief Administrative Officer Jana Lynn Skewes , Shared Health, President & CEO Bradley Steven Karro , Caremark Rx, Inc., Executive Vice President Vicky Gregg , BlueCross BlueShield of Tennessee, President & CEO Dr. Winnie Ruth , State of Tennessee, Bureau of TennCare, Chief Network Officer Dr. Andrea D. Gelzer , CIGNA HealthCare, Senior	

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	<p>State incorporated e-prescribing systems into Medicaid EHRs</p> <p>4 hospital collaboration calling for health information exchange</p>				<p>Dr. Reginald Coopwood, chief executive of Metro General and leader of the effort.</p>	<p>Vice President Clinical Public Affairs Elisa D. Parker, Pilkenton Real Estate Co., Affiliated Real Estate Broker</p> <p>Providers can go to web-based portal to see Medicaid Rx drug claims data for their patients, as well as information about the state Medicaid drug formulary.</p> <p>Participants: St Thomas and Baptist Hospitals, Metro General, Vanderbilt and HCA Inc.'s TrStar Health Sytem</p>	<p>Representatives still have to decide types of data to exchange and other issues.</p>

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Tennessee	MidSouth eHealth Alliance (Memphis RHIO)	Non-profit, provider network in Memphis area	<p>\$5 million AHRQ State and Regional HIT grant</p> <p>\$8.7 million in State Appropriations</p> <p>\$750,000 in technical support provided by Vanderbilt</p>	<p>Consumer-Business Coalition</p> <p>Consumer oriented one-pager explaining who they are and what they do, including privacy and security issues</p> <p>Opt-out on hospital level; hospital notices of privacy and practice provide info to consumers about MSeHA – 97% opt in; of those opting out, > # of non-inner city; NPP written on 8th grade level</p> <p>No plans for capability of consumer</p>	http://www.midsoutheha.org/	Tom Duarte, Executive Director	Currently has 18 mos of data from 1 Million patient records (800,000 distinct patients); focus is on ‘frequent fliers’ and facilitating their involvement in a ‘medical home’; new focus will be on communicating more broadly to the public through 2 step process: 1) Engaging providers 1 st since pts will come to them with ?s and 2) Helping consumers see the value of HIE

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				interaction with RHIO/technology			
Tennessee	CareSpark (RHIO headquartered in Kingsport)	Not-for-profit organization formed in 2005 to explore ways to share health information securely, efficiently and cost effectively	\$2.68M contract awarded Oct. 5, 2007 from ONC (NHIN II) \$250,000 grant from Governor's HIT Council	Board of Directors Committees for Technology; Outcomes & Evaluations; Marketing & Communications; Finance; Clinical; Population Health Workgroup; Personnel	http://www.carespark.com/		Conducted general survey of patient attitudes in Oct. 2006
Tennessee	Shared Health	Public/private health information exchange	\$1.6M federal grant awarded Sept. 7, 2007 from HRSA to deploy MTRHIN		http://www.sharedhealth.com/		
Tennessee	Middle Tennessee Rural Health Information Network (MTRHIN)	Developed and managed by TN Dept. of Health, TN Hospital Assoc., and Community Health Network (not-for-profit corporation)					
Tennessee	Innovation Valley Health Information Network (IVhin)	Non-profit collaborative of local consumers, physicians, hospitals, employers, payers & other healthcare providers	\$100,000 grant from Governor to assess readiness to connect to statewide eHealth network Funding from Patient Safety Institute (\$985,000) and	Board of Directors includes consumer, physician, provider, at-large advocates and an advisory board <u>Consumer Advocates:</u> Merritt Smith , Retired Business	http://www.innovationvalley-hin.org/index.php		Consumer survey available on website

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	Legislation: <u>TX S 11</u>			<p>the information maintained or received by the agency;</p> <p>(2)ensure the security of personally identifiable information and the protection of personally identifiable information from inappropriate release;</p> <p>SECTION 12.03. (a) The department, for the primary purpose purposes of establishing and maintaining a single repository of accurate, complete, and current immunization records to be used in aiding, coordinating, and promoting efficient and cost-effective childhood communicable disease prevention and control efforts, shall establish and maintain a childhood immunization registry. The department by rule shall develop guidelines to:</p> <p>(1) protect the</p>		<p>standards for the secure electronic sharing of information between participating agencies. This pilot program expires September 1, 2013.</p> <p>Relating to homeland security and protection of the public, including protections against human trafficking; providing penalties</p>	Enacted 06/06/2007

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				<p>confidentiality of patients in accordance with Section 159.002, Occupations Code;</p> <p>(2) inform a parent, managing conservator, or guardian of each patient younger than 18 years of age about the registry;</p> <p>(3) require the written consent of a parent, managing conservator, or guardian of a patient younger than 18 years of age before any information relating to the patient is included in the registry; and</p> <p>(4) permit a parent, managing conservator, or guardian of a patient younger than 18 years of age to withdraw consent for the patient to be included in the registry ; and</p> <p>(5) determine the process by which consent is verified, including affirmation by a health care</p>			

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	<p>Texas Health Services Authority</p> <p>TX working on EHRs for foster care kids (under Medicaid), its criminal justice population, and mental health and substance abuse clients.</p>	Nonprofit, public-private organization	Not receiving public funds. Seeking grants and financial gifts with the goal of moving toward transaction fees later.	provider, birth registrar, regional health information exchange, or local immunization registry that consent has been obtained.		Designed to promote the seamless exchange of data	
Utah	Utah Health Information Network (UHIN)	Not-for-profit organization formed in 1992 to reduce health care costs through the use of electronic data interchange	<p>\$5 million AHRQ State and Regional HIT grant</p> <p>\$660,000 over 2 years in State funding</p> <p>Membership fees (providers) and per-claim transaction fees (payers)</p>	<p>Board of Directors, consists of 19 voting payer, provider, gov't and sponsor orgs.</p> <p>Executive Committee directs the Corporation and its activities</p> <p>Subcommittees include: Eligibility; Technical; OP Report; Standards; ID Card; Prenatal; Financial & Audit;</p>	www.uhin.com	Members include: Altius/Coventry; Deseret Mutual Benefit Admins.; Educators Mutual Insurance Assoc.; HealthInsight; IASIS; Selecthealth; Intermountain HealthCare; Mountain Star; Public Employees Health Program; Regence BCBS of Utah; First Health; Utah Hospitals	Next Board meeting scheduled for Nov. 7, 2007

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				<p>Claim Acknowledgment; Change Management</p> <p>cHIE Task Force</p> <p>No clear consumer involvement</p>		<p>& Health Systems Assoc.; Utah Dept. of Health; Utah Medical Assoc.; Univ. of Utah Health Sciences Center; Valley Mental Health; Workers Comp. Fund of Utah; State Farm; Utah State Insurance Dept.; State of Utah; Utah Medical Group Management Assoc.</p>	
Vermont	<p>Legislation: Act 70, VT H 229</p> <p>Legislation: Act 71, VT H 531</p>		<p>Section 7(d) For fiscal year 2008, the department of health shall provide a grant to the Vermont rural health alliance for the early implementation projects described in this section upon the approval by the commissioner and</p>	<p>The HIT plan shall: support the effective, efficient, statewide use of electronic health information; education the general public and health professionals; promote the use of national standards for the development of an interoperable system;</p> <p>Also calls for a medical home chronic care management project which calls for all PCPs participating to use HIT, which may include remote monitoring and patient registries, to monitor and track health status of patients and to</p>		<p>The Commissioner shall facilitate the development of a statewide HIT plan that includes the implementation of an integrated electronic health information infrastructure for the sharing of electronic health information.</p> <p>Calls for the development and implementation of a blueprint for health, including a five-year strategic plan. The blueprint must further the use of information technology.</p>	<p>Enacted 06/05/2007</p> <p>Enacted 06/05/2007</p>

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	Legislation: <u>VT S 115</u>		upon receipt of \$185,000.00 by the alliance of federal grant or other matching funds.	<p>provide patients with enhanced and convenient access to health care services.</p> <p>(d) No person shall sell, offer for sale, or distribute electronic prescribing software that advertises, uses instant messaging and pop-up advertisements, or uses other means to influence or attempt to influence the prescribing decision of a health care professional through economic incentives or otherwise and which is triggered or in specific response to the input, selection, or act of a health care professional or agent in prescribing a specific prescription drug or directing a patient to a certain pharmacy. This subsection shall not apply to information provided to the health care professional about pharmacy reimbursement, prescription drug</p>		An act relating to increasing transparency of prescription drug pricing and information	Adopted 6/9/2007

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	<p>Court battle btw state and pharmaceutical industry/data-miners over law controlling the protection of Rx information containing patient-identifiable and prescriber-identifiable data</p> <p>Vermont Health IT Trust Fund</p>	Vermont Secretary of Administration will manage the funds.	Subsidized by quarterly tax on all health insurers in the state. Health insurers can choose btw paying two-tenths of a percent of all health care claims for their VT members in the previous quarter or pay a fee based on a proportion of their overall claims in the past year. The effort is expected to raise an estimated \$32mill over the next 7 years.	<p>formulary compliance, and patient care management.</p> <p>Patient privacy protections at stake</p>		<p>Fund will provide stable source of funding for health care providers that want to install EHRs. Will also support operation of a statewide HIX and an advanced medical home project.</p>	<p>Closing arguments given in August '08</p> <p>First quarterly payment to the trust fund due on 10/1/08. EHR adoption is expected to increase to more than 50% over the next 5 years with help of the trust fund. As of mid July '08, only 13% of VT physician practices have EHR systems in place.</p>
Virginia							
Washington	Legislation: SB 5065 –create a Health Information Infrastructure	Health Care Authority				Purpose of board: “develop a strategy for the adoption and use of electronic [health]	

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	Advisory Board South Sound Health Communication Network		\$50K from the Health Care Authority to pilot a health record bank \$200K in federal funds to support development of health record bank	Technology will boost health care efficiency and quality and enable consumers to have more informed decisions with their health care provider	Rick MacCornack, Director	records and health” IT that can communicate with one another	Network already links 300 doctors, three hospitals and several laboratories in Pierce County and South King County Plans to unveil first complete health record bank in Washington state by Q2 2009 with automated process that deposits patient medical information into patient’s account
West Virginia							
Wisconsin	eHealth Care Quality and Patient Safety Board	Board created by EO 129 to develop recommendations for electronic health information infrastructure	WI RTI contract (HISPC)	Consumer Interests and Privacy – 1 of 5 advisory groups identified to implement eHealth Action Plan Consumer advocates only; no consumers on work group – sore spot among consumer advocates	http://ehealthboard.dhfs.wisconsin.gov/	<u>Consumer Interests Workgroup of eHealth Board</u> <i>Workgroup Chair</i> Catherine Hansen , Health Information Services, St. Croix Regional Medical Center <i>Workgroup Members</i> Betsy Abramson , Elder Law Attorney Patricia Flatley Brennan , UW School of Nursing & College of Engineering Nancy Davis , Ministry Health Care	Consumer Interests Workgroup Final Report issued Nov. 29, 2006 to inform the eHealth Board in the development of the eHealth Action Plan Implementation Summit for eHealth Action Plan held Mar. 25, 3007 No meetings of Consumer Interests and Privacy group currently scheduled

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						and Board of Directors of HIPAA Collaborative of Wisconsin Patricia Finder-Stone , Public Health Advocate Ken Germanson , Community Advocates Dianne Greenley , Disability Rights Wisconsin Jay Gold , MetaStar Chrisann Lemery , WEA Trust and Board of Directors of HIPAA Collaborative of Wisconsin Susan Manning , Independent Health Care Consultant, and Board of Directors of HIPAA Collaborative of Wisconsin Sadhna Morato-Lindvall , American Cancer Society Paul Smith , University of Wisconsin Department of Family Medicine <i>Workgroup Resources</i> Kathy Johnson , Privacy Officer, DHFS Greg Schneider , Winnebago Mental Health Institute Amy Wergin , Public	for 2007

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						Health Nurse Manager, Manitowoc County Health Department Ben Wollman , Community Advocates Workgroup Staff Alison Bergum , UW Population Health Institute	
Wisconsin	<p>Legislation (<u>Proposed Changes to WI Statutes</u> 146.82 and 146.83 to facilitate electronic health information exchange)</p> <p>Database for addictive painkiller prescriptions</p>	<p>N/A</p> <p>Medical Society of Milwaukee project.</p>	N/A	Discrete data (diagnosis, meds, dates of services, providers, etc.) can be shared without consent to facilitate care; narrative information may NOT be shared without consent	John Whitcomb Bill Kruger	<p>AODA info cannot be shared w/out consent under HIPAA, making it necessary to edit narrative info in case MH info is referenced – made Medical Records folks on the group allies of consumer advocates</p> <p>Legislation has support of Gov. Jim Doyle and adopts recommendations made in Dec. 2007 by an advisory board charge in 2005 with creating plan for adopting EMRs</p> <p>Limited to Milwaukee county and voluntary use by doctors. Hope to see legislation within a year or so that will mandate a statewide system.</p>	<p>Changes currently moving through rule-making</p> <p>Expect to launch database within about six months. Hope to combine it with effort to electronically link patients' medical information</p>

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	Wisconsin Health Information Organization (WHIO) and Ingenix collaborating to create statewide repository of health claims data			Initiative will provide insight for employers and consumers on value of health care services in the state	Julie Bartels, WHIO Exec Director John Stenson, Managing Principal of Ingenix's Consulting Businesses	WHIO will report on quality of care, measured against evidence-based treatment guidelines (based on national standards of care endorsed by NQF, NCQA and AQA etc) enabling WI health care provider groups to benchmark their results against their peers and identify areas of excellence and opportunities for improvement. Data will be provided from 5 commercial insurers and WI Medicaid program, and any other regional health care providers and payers willing to contribute.	throughout Milwaukee county in the future to the cost of a bout \$50,000 to be paid by the medical society. Announced 6/18/08. Pilot reports from database scheduled to launch in first quarter of 2009, with a broader rollout later in year
Wyoming							

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