

**Connecting Communities Workgroup
June 25, 2013
Western States Consortium**

Co-chairs:

Laura Kolkman, Mosaica Partners (absent)
Craig Brammer, HealthBridge (absent)

Participants:

Mike Dittmore – Lewis and Clark HIE	Brian Lumadue – Siemens Healthcare
Janet Terry – Quality Health Network	Denise Webb – State of Wisconsin
Phil Tally – American Medical Association/Gulf Coast HIE	Crystal VanDeventer – Lincoln Land HIE
Sandy McDowell - VITL	Susan Olyha – MedVirginia
Barbara Hanrahan – AYKA Partners	Lynn O'Mara – Nevada DHHS
Matt Bonanno – WNC DataLink	Amy Sheide – 3M
Bob Hogan – Humana	Mike Squires – BluePrint Health IT
Michele Davidson – Walgreens	Rahul Jain – Greater New Orleans HIE
Anne Marie Robertson – Coastal Connect HIE	Rita Torkzadeh – Booz Allen Hamilton
	Vincent Nespoli – Quest Diagnostics

Meeting Summary:

This month's meeting of the Connecting Communities Workgroup featured Lynn O'Mara, State HIT Coordinator for Nevada and Interim Chair of the Western States Consortium presenting about the Western States Consortium.

Lynn O'Mara, Nevada State HIT Coordinator, Interim Chair of the Western States Consortium

The Western States Consortium (WSC) was formed through grant funding under ONC's State Health Policy Consortium Project. The Consortium initially focused on HIE governance to support interstate data exchange through Direct. Interstate exchange is particularly important for western states given geographic barriers and the large number of patients that cross state lines to receive healthcare. Direct was selected as an initial implementation case to work toward, acknowledging the need for more robust forms of exchange in the future.

The Consortium is comprised of eight core states, and has worked to resolve policy differences between states regarding privacy, security and data use. Participants sign a memorandum of understanding to commit to the policies developed by the Consortium. One such policy is that for entities sharing data, the laws governing exchange in their state apply, while for entities receiving and using that data, their state laws governing data use prevail.

Given the success of the Consortium in developing shared policies and practices, members have sought to extend the life of the group following the expiration of ONC funding. Several core members established the National Association of Trusted Exchange (NATE), which includes a formal governance body for further promoting interstate exchange. NATE is an independent non-profit organization based in Washington, DC. Six states have signed a memorandum of understanding to participate in NATE, and a number of other states have expressed interest as well. NATE's purpose is to provide states a national voice for HIE governance and features two primary components:

- Defining a governance entity role and its functions
- Defining accountabilities, oversight provisions, and protocols

The Consortium expects to release a report of its results in early July 2013.

Q&A

Q: Has the Consortium worked to increase HIE capacity building in rural areas or other areas with geographic barriers?

A: Though the Consortium is aware of these gaps, the group has not addressed this issue yet. It is certainly one of the "to-dos" that the group would like to address in the future. An important perspective to

remember is that economies vary across states. We need to think about how we can address disparities collaboratively, rather than having each state address the issue on its own. Likewise, we need to consider how to share resources for workforce development, rather than competing for them.

Q: In terms of HIE governance, do you have materials around roles and responsibilities, participation, or any other components that could help us build our state HIE's governance structure?

A: Our first document will be the report with some of our basic findings and recommendations to be published in early July. We hope to publish more specifically about our findings in the future. Thank you for your question, it reinforces one of our beliefs at NATE, which is that people would like everything documented and available to use.

Q: How do you see the WSC's efforts as they relate to the work of Healthway?

A: Healthway very recently approached us about how we could potentially work together. The CEO for NATE has been talking with Healthway, but I don't have an update right now. I expect we'll hear more at our second board meeting later this month.

Q: I'm still trying to get my head around all of these organizations looking at Direct, trusted exchange, etc. What is the difference between what NATE is doing and what an organizations like DirectTrust is doing?

A: DirectTrust is focused specifically on Direct secure messaging. NATE hopes to look not only at Direct, but also more robust exchange services when they eventually come online. Also, when data starts crossing state borders, other issues will arise. These could be policy issues, technical difficulties, etc. We see NATE as a group for states to go to solve these issues and figure out what needs to happen at a state-level to ensure interstate exchange. DirectTrust is more focused on individual or organizational users.

Q: That leads me to my next question...what is the difference between your work and Healthway?

A: Healthway isn't focused on state issues or represent the states. NATE is really about giving a voice to the states. From what we understand, Healthway doesn't really focus on how states can work together to resolve the issues between them.

Q: It seems there are two different issues being addressed, one by WSC/NATE and one by Healthway, yet they share the same overall goal of nationwide connectivity. I hope we aren't duplicating efforts.

A: Healthway has reached out to us, and we would have reached out to them if they hadn't already. We work with a lot of different groups, such as the Southeast Regional HIT-HIE Collaboration (SERCH), to collaborate and support one another. There are different perspectives and different needs, even if the end goal is the same.

Q: Can you touch on some of your future plans? Will you look at technical and interoperability issues as well?

A: Yes, we've already been asked by some of our members about these issues. With these kinds of issues, there might have to be some tweaking of state policies. We've looked at the model of the National Association of Insurance Commissioners and how they've collaborated to overcome technical hurdles. We want people to be able to stay within their state laws while still using practices that are compatible and complementary.

Next Steps:

Next Connecting Communities Workgroup meeting is July 23 from 2:00 – 3:00 pm ET. Topic TBD
eHI staff is putting together a high-level overview of the various workgroups, consortiums, and other efforts looking at HIE governance.

Register now for eHI's Forum on Data & Analytics and Data Exchange Summit.

2013 Data Exchange Survey is currently in the field. Please contact alex.kontur@ehealthinitiative.org if you have not received a link to the survey.