

Meeting Minutes

Project: Alaska Infrastructure Technology Plan

Workgroup Session 5

Stakeholder Workgroup

02/13/2018

9:00 am-12:00 pm AKST

Conference Line: 1-907-269-3000; Code: 802 719 699

Workgroup attendee's

Name	Organization	Attendee
Erin Aklestad	Alaska eHealth Network (AeHN)	NP
Jessica Oswald	Providence Hospital	IP
Mike Hirst	Southcentral Foundation	IP
Connie Beemer	Alaska State Hospital and Nursing Home Association (ASHNHA)	IP
Nancy Merriman	Alaska Primary Care Association (APCA)	T
Kevin Munson	Mat-Su Behavioral Health	T
Chad Jensen	LaTouche Pediatrics	IP
Rick Driscoll	REACH, Inc.	NP
Joe Furrer	GCI	NP
Dave Branding, PH.D.	Juneau Alliance for Mental Health	T
Joyce Douglas	DHSS - FMS-IT	T
Simon Taylor	DHSS - FMS-IT	T
Shaun Wilhelm	DHSS - DBH	IP
Ulf Petersen	DHSS -SDS	NP
Dana Penner	DHSS - OCS	T
Margaret Brodie	DHSS - HCS	IP
Heidi Lengdorfer	DHSS - DPH	T
Heidi Wailand	Alaska Mental Health Trust Authority	No longer a member
Michael Baldwin	Alaska Mental Health Trust Authority	IP
Natasha Pineda	DOA	NP
Deb Erickson	DHSS – Commissioner's Office	NP
Stewart Ferguson	Alaska Native Tribal Health Consortium (ANTHC)	NP
Laura Young	Alaska eHealth Network	IP
Bill Pearch	Alaska eHealth Network	IP
Preston Simmons	Providence Hospital	IP

IP=In-Person; A=Absent; T=Telephone

Meeting Highlights/Topics:

- **Recap past sessions**
- **Review HIE functionality Prioritization Results**
- **Coordinated Care Demonstration Project Update**
- **Accountable Services Organizations update**
- **Other Medicaid Initiatives Coming in 2018**

Identified Barriers

- **Limited of functionality within the current HIE, AeHN**
- **Integration of data, how to share data and make it usable**
- **How to share and coordinate Behavioral Health (BH) data that is compliant with 42 CFR Part 2**
- **Consent model**
- **How to track and monitor referrals when systems do not share data**
- **BH providers are lacking technology, no EHR, many paper based patient files**
- **No current data warehouse that could provide data to providers if it was staff with trained support staff to do mapping and assist provider network in how to make use of the available data**
- **Lack of electronic signature**
- **Lack of data governance and data standardization**
- **Cost of integration**

Identified Use Cases

1. The ability to refer a patient to a service provider, receive an acknowledgment of acceptance, status updates and outcome report.
2. Enrolled providers to have access to the same data analytic tools, predictive modeling tools and base data that will be available and used by future utilization management entity.

Identified Gaps & Concerns

1. With the start of the Emergency Department Information Exchange (EDIE) tool rollout, providers are just starting to receive ADT data, how to account for improvements outside of Accountable Services Organization (ASO) or Coordinated Care Demonstration (CCD) projects.
2. Need to determine how to measure the impact of ASO and CCD on small practices. If they are asked to spend more time with each patient, and potentially less reimbursements, could these providers suffer financially or be forced out of the Medicaid Program.
3. Work force development, current BH waiting list and difficulties in finding placements.
4. What attribution method will be used within the ASO model to connect patients to providers?
5. Short term shared savings may allow providers to participate in pilots or demonstration projects, but if those savings are not on-going will the changes be sustainable at the provider level?
6. Need to develop an approach to standardize and integrate data.
7. Providers will need the same data analytics and interpretive logic that the ASO will use.
8. No infrastructure exists to manage the care of individuals with co-morbidities for physical and behavioral health.
9. The tracking and monitoring of referrals is a manual and labor-intensive process. Need to develop a referral tool to improve the process.
10. With ASO and CCD projects there will be new reporting requirements for providers which may require technology changes and increased staff time. How can reporting be streamlined to minimize cost and staffing?

Action Items

Action Item	Assigned	Status	Capture Date	Requested by Due Date
Meeting Minutes	HTS	Completed	2/13/2018	Prior to Next Workgroup
Development of Workgroup 6 (Data Management and Interfaces) Meeting Materials	HTS	In Progress	2/13/2018	Prior to Workgroup 6