

ALASKA MENTAL HEALTH TRUST AUTHORITY

HEALTH INFORMATION TECHNOLOGY and
AKAIMS ADVISORY COMMITTEE MEETING

Teleconference

September 28, 2012
10:05 a.m.

Taken at:
The Frontier Building
3601 C Street, Suite 880
Anchorage, Alaska 99503

OFFICIAL MINUTES

Trust staff:

Katie Baldwin-Johnson

Others participating:

Melissa Stone, DBH; Shane Welch, YKHC; Dan Kantak, FMS-IT; Karin Schaff, Volunteers of America; Michelle Baker, Southcentral Foundation; Jerry Jenkins, Anchorage Community Mental Health; Mark Haines-Simeon, DBH; Kelly Shanklin, Fairbanks CMHC; Paul Cartland, HCS-HIT; Michael Walker, DBH; Tom Chard, ABADA (via telephone); Steve Sundby, Cordova Community Medical Center; Becky Kinney, FEI Systems (via telephone); Cecelia Johnson, Ketchikan Indian Community (via telephone); Kimberly Paulsrud, Family-Centered Services of Alaska; Richard Hall, ANTHC.

PROCEEDINGS

MS. BALDWIN-JOHNSON welcomes all and begins by going around the room with introductions. She acknowledges and appreciates Mr. Hall coming with short, last-minute notice, and adds that he came highly recommended because of his background with the Tribal Health System. She states that Johanna Darrough will be representing the Alaska Primary Care Association. She moves on to a review of the agenda and a quick overview of the minutes from the July 30, 2012 meeting. She asks for any comments, feedback or corrections. There being none, she moves on to the issues discussed around privacy, adding that since the last meeting some of them have been addressed, some are in motion, and others will be overseen by this committee which will be looking at the AKAIMS system.

MR. KANTAK asks if Thor Ryan could come back and explain the security plan for AKAIMS.

MS. BALDWIN-JOHNSON replies that that is a valid recommendation, and he will be brought back into the mix. She adds that he was not available today. She moves on to the Meaningful Use Summit stating that AHEN has posted their presentations from the summit on their Web Site, adding that there might be some useful information there and encourages all to look at them. She moves on to updates and a review of the Discussion List.

MR. HAINES-SIMEON states that the first three related to privacy, the degree of 42 CFR compliance, HIPAA compliance, and encryption. He adds that he connected with Becky and received the updated version, but has not had a chance to go through it. He states that the system is compliant for HIPAA, for 42 CFR and is compliant relative to industry standard of encryption, adding that determining placement of that information in a publicly accessible way is the key.

MS. BALDWIN JOHNSON asks Mr. Jenkins for any thoughts about accessing or placement.

MR. JENKINS replies that there was a discussion last time about the coverage by 42 CFR, and adds that if there is reciprocal documentation that says that the Division, Department or whoever is certified 42 CFR, that should be sufficient.

MR. HAINES-SIMEON adds that the Division has been working in conjunction with the Attorney General's office and the Anchorage Community Mental Health Center around the development of a standardized Business Associate Agreement, BAA, for AKAIMS users. He continues that it may be done this week.

MS. STONE states that it would be helpful to have on the agenda for next month to review that BAA and have the AG on to talk about it.

MR. JENKINS states that there actually should be two BAAs, one for minimal dataset users; and one used as an EHR. He adds that this one is the minimum.

MS. BALDWIN-JOHNSON moves on to a discussion about technical assistant resources to agencies specifically around privacy and security. She states that this was identified as a potential opportunity to receive some technical assistance and to share resources.

MS. STONE states that Chris Sheehan, IT manager at Sea View, thought it would be helpful if there was an opportunity for the IT managers or coordinators to get together and agreed to facilitate the first meeting. She adds that 15 to 20 agencies responded that they would be interested in having their IT folks get together periodically in a teleconference to share issues, concerns and resources. She continues that this is an opportunity for the providers to get together and show what they know, acknowledge what they do not know, and where they have gaps. She states that because of legal issues, it is meant to be a leaderless group and is not meant for anyone to be advising this group because of legal issues. She adds it is not meant to be the State advising providers on how to do business. She continues that it is a test or a trial.

MS. BALDWIN-JOHNSON states that one of the other items identified at the last meeting was the recognition that there has not been a focus on HIPAA or 42 CFR with the provider agencies, the grantees, and the possibility to have some sessions at the next Change Agent Conference focused on this.

MR. HAINES-SIMEON states that has been included as a component of the agenda, and resources are being shaped and assigned to each of those agenda items.

MS. STONE states that the venue has been secured at the Hilton for December 12 and 13, 2012, for the Change Agent Conference.

MS. BALDWIN-JOHNSON recognizes Becky Kinney and asks her to talk about what some of the other states are doing.

MS. KINNEY states that she received documentation from other states that fall into, basically, three categories. She begins with HIMSS, which is a great source of information for HIPAA security and privacy. She continues that they have a variety of toolkits available; stating that one of them has to do with the risk assessment. She adds that providers in other states are using this. She states that she has forwarded an overview of some of these and the template. She continues that she also forwarded a sample copy of their BA agreement from another state. She states that one of the things the other states are doing is documenting the different security roles that are in with AKAIMS, and then typing that to the specific HR role in the provider agency. She adds that she sent a number of documents showing the detail that people at the state level are going at to facilitate that.

MS. BALDWIN-JOHNSON thanks Ms. Kinney and asks for any questions.

MR. CHARD asks if anyone at FEI has done any surveys of the 25 states that are using the system how far along they are in the process.

MS. KINNEY replies that Hawaii is a leader in doing this and states that she can provide contact information. She adds that they are very willing to share and discuss. She continues that Oregon is also at the forefront, as is Idaho. She states that those three states are the shining stars.

MS. BALDWIN-JOHNSON moves on to Mr. Cartland regarding secure messaging.

MR. CARTLAND states that he went to AHEN and there is now an entity agreement for the DSM solution. He continues that a provider who is a sole practitioner can sign up for a DSM address and a DSM service. An organization, DHSS, can sign an agreement for all of their users. He adds that then it is the organization's responsibility to maintain the list of who should and who should not have direct e-mail addresses. He states that the hope is this answers the issues that were of concern.

A discussion ensues on exploring linking the direct messaging to the application side of AKAIMS and clarification on how it works.

MS. BALDWIN-JOHNSON thanks all and moves on to the topic of remote access. Before that, she calls a break.

(Break.)

MR. WALKER states that AKAIMS is a web-based application that is accessible from anywhere. He continues that if there is an Internet connection, an address and log-in credentials, the system can be gotten into. He states that the first task was to change the application so that when an agency was curious about the activities of a staff person, they could look at that account and see what IP address was dialed in from. He adds that this took place about four weeks ago, and agencies are not aware of it. He continues that it was the first of many steps that need to be addressed to allow agencies to take a more positive measure of control over from where their folks log in.

MS. STONE asks how that will be communicated.

A discussion ensues on the subject of how to communicate, and then goes into technical details.

MS. BALDWIN-JOHNSON thanks all and moves on to item 5 on the agenda.

MR. HAINES-SIMEON goes to the DBH portal Web site, moves to the lower box that says Initiatives and then clicks on HIT and AKAIMS Advisory Committee. He states that the intent is to have a repository of information relative to each of the meetings. He continues that resources specific to the topics have been placed at the bottom. He adds that the intent is just to create a space for folks to be able to easily access the information as well.

MS. STONE asks to bring this to the attention of the providers at the ABHA meeting.

MR. HAINES-SIMEON asks for any suggestions.

MS. BALDWIN-JOHNSON states that it has been brought up as a possibility to pull from the minutes here, extract the questions and answers, and create a Q and A document that could be posted that summarizes the progress made in resolving some of the questions so folks do not have to dig through all the minutes to get there. She adds that it is an option to move forward, but has not yet happened.

MS. STONE asks to post the PowerPoint from the webinar on Tuesday.

MR. HAINES-SIMEON states that it is the intent to use this site aggressively to communicate with whoever will access it.

MS. STONE suggests other explanations or documents.

MS. BALDWIN-JOHNSON asks for a place for announcements.

MR. JENKINS replies that once the template for the business associate agreement is received, it will be done.

MS. BALDWIN-JOHNSON for anything else. There being none, she asks Mr. Chard to share thoughts on the sharing of information and harnessing some of the provider organizations to disseminate some of the information.

MR. CHARD states that when the HIT-AKAIMS group was started it grew out of providers' concerns of where AKAIMS is today and where it is headed tomorrow. He continues that the group has done an outstanding job of identifying some of the issues for the evolution of AKAIMS. He adds that he does not want the concerns of some of the current AKAIMS users to go by the wayside. He states that it might be helpful to develop a survey for AKAIMS users and stakeholders that gets into more specific information about some of the frustrations, concerns, the things that are going well and some things that are not going so well. He adds that this may produce some really good information that can be used to inform and educate and maybe correct some of the things that are going wrong, and highlight some of the things that are going right. He talks about developing a committee to design the survey and bring it back to this committee.

MS. STONE states that she is absolutely in favor of this.

MS. BALDWIN-JOHNSON asks for some volunteers, and recognizes Karin Schaff, Steve Sundby, and states that Tom Chard is leading it.

MR. WALKER states that a few years ago some software to specifically build surveys was purchased and will see if it is available for the group.

MR. CHARD asks that if anyone has any additional items to be included in the survey to keep him informed, and thanks all.

MS. BALDWIN-JOHNSON moves on to the AKAIMS matrix committee, stating that the preliminary effort to understand the user types and to categorize information has begun. She states the need to identify some agencies that are using AKAIMS as a minimal dataset to help identify the issues and to make sure their perspective is captured. She asks Kelly Shanklin to be involved in this whole thing.

MS. SHANKLIN agrees.

MS. BALDWIN-JOHNSON states that when the survey is completed it will help flesh out some concrete data which will lead to the development of some action plans.

MR. JENKINS explains that minimal dataset is driven by grant agreement and the grant agreement states that to do the grant Medicaid needs to be done. He states that, from a provider's perspective, there is concern about security and privacy, as is with the Division and the Department. He adds the need for security and privacy, and if there are incidents, the need to report them. He states that even with a minimal dataset, a QA process is needed to make sure that the process is being done correctly. He continues to the ISA which is a special fund for kids and adult services. He adds that its requirements are different from the minimal dataset, more intense but is not a full-fledged ECR because it does not include everyone. He continues, explaining the issues and challenges involved. He explains the vendor relationship, the obligation, and the need to access the data and the need to make sure it is protected. He moves on to the billing process which needs to be a closed-loop revenue cycle. He adds that service authorization is necessary for billing.

MS. SCHAFF asks how accreditation fits in if AKAIMS uses a clinical electronic record and how to meet all the accreditation standards that change all the time.

MR. WALKER asks to work on that with them.

MS. STONE states that this process is to identify what the issues are and figure out how to direct people to the answer. She continues that John Locke, who coordinates national accreditation issues, needs to connect to this conversation.

MS. BALDWIN-JOHNSON moves on to the need for a meaningful-use subcommittee with the element of expertise to inform the group.

MS. STONE clarifies that it would be a subgroup to be informed and then inform this group about whatever is going on. She states that the meaningful-use committee would be interested in more than just AKAIMS because there are users who do not have AKAIMS, such as some in the tribal system.

A short discussion ensues.

MR. CHARD recommends that the meaningful-use committee specifically try to draw in those providers that are billing Medicare and/or using the professionals that might have more of an interest in being keyed into this sooner rather than later.

MS. BALDWIN-JOHNSON states that this committee supports a subcommittee that will be addressing meaningful use, and will figure out who will be on the subcommittee. She moves on to thoughts on some strategies to use to move into AKAIMS. She asks how the committee would like to approach the next couple of meetings. She thinks that folks want to get into looking at the issues, start clarifying what is legitimate and what is not, and what can be addressed to improve.

After discussion, it was determined to first wait for the survey.

MS. BALDWIN-JOHNSON wraps up, asking about dates for the next couple of meetings. She points out the last few days in November and asks Sandy to see who is available and go from there. She thanks all.

(Meeting adjourned at 1:00 p.m.)