

THINC RHIO, Inc.

Taconic Health Information Network and Community

THINC RHIO Annual Meeting of the Board of Directors
October 29, 2008, 6:30pm-8:30pm

Board Members Present: Mike Duffy, Chair
Mark Foster
Gene Heslin
Paul Kaye
Arthur Levin
Art Nizza

Non-Board Members Present:

A. John Blair, III; Susan Stuard, Asha Upadhyay

Meeting materials: 1) Meeting agenda, 2) October 2008 meeting minutes, 3) Proposed THINC Board of Directors Meeting schedule for 2009, 4) THINC project update report November 2008

I. PUBLIC SESSION

A) APPROVAL OF OCTOBER 29, 2008 MEETING MINUTES

Mike Duffy, Chair, asked for a motion to approve the minutes of the October 1, 2008 meeting of the Board of Directors. A motion was made and seconded and the minutes were unanimously approved.

B) 2009 THINC BOARD MEETINGS

Ms. Stuard informed the Board that as per the proposed schedule, there would be nine Board meetings held in 2009. She asked the Board members if there were any objections. Gene Heslin asked if the September board meeting is after Labor Day. Susan Stuard said that it is before Labor Day holiday weekend. Mike said we will go with this proposed schedule and if there are problems with attendance on any of the proposed dates, we can reschedule the meeting.

C) THINC PROJECTS UPDATE

Susan Stuard gave an update on the following projects:

- **HEAL 1**

THINC received the no-cost extension on its HEAL 1 grant, extending the grant to July 31, 2010. Dr. Blair informed the Board that MedAllies has signed a contract with HealthQuest to implement electronic health records (EHRs) for 171 providers over the next ten months. Implementation will begin immediately. Dr. Blair said that MedAllies is ramping up to support this implementation and training the current staff. MedAllies will continue to recruit other practices in parallel. Gene Heslin asked how many practices MedAllies can handle implementing at the same time. Mike Duffy suggested that MedAllies could hire people temporarily for this work.

THINC has not received payment for the 7th and 8th quarter vouchers submitted to NYS DOH. In response to a significant effort to get information on this from NYS DOH we did receive an opinion on the status of the voucher payments. They have agreed to pay for the Q7 voucher for \$6,500. But for the Q8 Voucher which totals \$416,000, NYS DOH has disallowed \$357,500 and agreed to pay \$58,500.

There are two issues cited in the accompanying correspondence from NYS DOH. The first issue is with 19 Westchester Health Associates (WHA) implementations for a total of \$123,500. NYS DOH cited media clippings that seemed to imply that WHA already had an EHR and, therefore, NYS DOH noted that THINC's request for reimbursement under the grant was not eligible. THINC will respond to NYS DOH to clarify that WHA did not have an EHR before this HEAL 1 installation and THINC has received a letter from WHA management to corroborate that statement.

The second issue is with 36 provider implementations at Hudson River Healthcare (HRH), totaling \$234,000. As background, HRH was awarded a HEAL5 grant to support its eClinicalWorks implementation. In its application, HRH was careful to delineate that the HEAL5 funds would not be used for the software licenses or the MedAllies implementation costs that THINC would voucher for under HEAL1 contract. Even though the expenses are completely separate and distinct, the NYS DOH HEAL office stated that because HRH is being funded under HEAL5 for these EHR implementations THINC is not eligible for reimbursement under its HEAL 1 grant. The HEAL office did note, however, that THINC may count these implementations toward its 1,000 license implementation goal. Anne Nolon, Paul Kaye, and Tom Sexton at HRH have offered to assist THINC in arguing this issue but Ms. Stuard is not sure if THINC will prevail with NYS DOH.

Gene Heslin asked if we should hire a lobbyist to help with this issue. Mike Duffy asked if there is any documentation in HEAL5 around this. Susan Stuard said no. Mike Duffy asked if we sent NYS DOH a document clearly defining our position. Susan Stuard said she is preparing this response. Mike Duffy recommended that THINC fight this decision and if we lose we can hire a lobbyist. Susan Stuard said that she is working with HRH's CFO, Tom Sexton on preparing an explanation and is doing a conference call with him and Pat Hale from NYS DOH tomorrow to discuss. Susan Stuard noted that the disallowance presents a significant cash flow problem for MedAllies for the next two to three quarters.

Dr. Gene Heslin said that THINC partnered with several hospitals in HEAL7 applications and noted that THINC could encounter similar this same conflict with HEAL 7 awards. Asha will check on the letters of support for Kingston, St. Benedictine and St. Francis hospitals. Art Nizza suggested that as a work around, if it would be possible to decrease THINC's award and increase HRH's award. Susan Stuard said she will speak to Office of Health Information Technology Transformation (OHITT) about this tomorrow and that we should explore all avenues. Mike Duffy recommended that THINC and its partners be careful in choice of words such as "implementations" in our future proposals.

- **NHIN2**

Susan Stuard reported that this project is moving along on target.

- **CDC HIE**

Susan Stuard reported that this project is moving along on target.

- **P4P/Medical Home**

THINC received notice from NYS DOH that there will be a 6% reduction (\$112,000) in grant funding for this project due to cuts in the New York State budget. THINC elected to take the cut from the incentive pool for a reduction in incentive match of \$1.5million to just under \$1.4 million. The health plans have been informed about this reduction.

Dr. Blair informed the board that MedAllies has signed its contract with ViPS, the data aggregator for the project. ViPS will analyze claims data for the participating six health plans and, from these data, will calculate quality measures on a per physician basis. In addition, we will be able to calculate individual physician utilization and roll this up by evaluation group (medical home vs. non-medical home) to see how the groups compare. This utilization roll-up is important because it will show if the medical home intervention resulted in cost saving which, in turn, will drive health plan incentives in the future.

- **NYS DOH- HEAL 5 - SHINNY and CIS**

The HEAL 5 project is proceeding on target. The project work plans and budgets will be submitted on October 31, 2008 to NYS DOH. We will be submitting a voucher for the first quarter early in November. The Office of Health Information Technology Transformation (OHITT) at NYS DOH will be managing the HEAL5 project.

C) THINC COMMITTEES REPORT

The THINC Privacy and Consumer, Public Health, and Quality and Clinical Committees met on October 23, 2008.

PRIVACY and CONSUMER COMMITTEE

There are two new members that have been added to the Privacy Committee. They are Sue Wilson from Sullivan Medicine and Tim Cleary, the Chief Privacy Officer for HealthQuest.

The Privacy Committee goals are: 1) to review and make recommendations for THINC's privacy policy infrastructure, 2) to prepare educational and training programs as required by the HEAL 5 grant. The Committee discussed the Committee composition and recruitment and also reviewed a brief overview of NYS DOH's Health Information Security and Privacy Collaboration white paper.

PUBLIC HEALTH COMMITTEE

We are undertaking basic education about public health use case within the CDC-HIE and HEAL5 projects. The chair position for this Committee is still unfilled.

QUALITY and CLINICAL COMMITTEE

We are pleased to have a lot of participation from the health plans on this Committee. Several health plans have assigned two or three people to participate on the Committee. The Committee is currently working on the issue of attribution logic, or how we tie patients to physicians for the purpose of quality reporting. The Committee is also working on coordinating a uniform process for administering the incentive payments. Dr. Mark Foster asked how many members of the Committee are primary care physicians. Ms. Stuard noted that there are several physicians on this Committee. Dr. Foster suggested that THINC create have an offline mechanism to vet the quality metrics and medical home plans with physicians.

E) NEW BUSINESS

Dr. Heslin said that Dianne Koval sent him information about how CMS was going to use e-prescribing. He said that Medco and Express Scripts are only accepting faxes. It was decided that Dr. Blair, Dr. Foster and Dr. Heslin will take this discussion offline.

Dr. Foster said that the physician practices need a security breach policy in place. The Federal Trade Commission has issued a set of “red flag” security requirements with a compliance data of November 1, 2008 which will affect physicians and hospitals. It will not impact THINC because THINC does not meet the definition of a creditor set forth in the regulation.

A motion was made, seconded and approved to adjourn the public meeting and the Board reconvened in Executive Session.