



eHHR Program

HITSAC Update

October 18, 2012

David E. Mix, PMP, MBA
eHHR Program Director





eHHR Program

Agenda

- Program Office Highlights
- Funded Projects
- Partially Funded Projects
- Remaining Funding Challenges
- Provider Incentive Program
- Wrap-up



eHHR Program

Program Office Highlights

- Preparing for IV&V effort
- Preparing for Eligibility Modernization contractor
- Investigating options for public facing program website
- Elaborating on Disaster Recovery environment needs and requirements
- Working to initiate funded projects
- Accomplishments
 - Program Oversight Committee meeting monthly
 - Coordinating activities for creation of a DSS program office
 - Completed CMS Stage Gate review on August 6, 2012
 - Initial communication on program distributed to local agencies on October 4, 2012
 - Monthly communications planned and in progress (newsletter)
 - DSS held public kickoff for CommonHelp (customer portal) in Fairfax on October 10, 2012



eHHR Program

Program Office Highlights (Cont'd)

- Data Sharing Workgroup
 - Working on an Enhanced-Memorandum of Understanding (E-MOU) with OAG
 - Working on consent language for customer applications
 - CommonHelp (DSS customer portal)
 - Paper applications
 - Working on data sharing issues



eHHR Program

Program Office Highlights (Cont'd)

- Funding
 - ARRA/HIT Federal Funding Stream
 - On budget
 - Working issues and risks
 - MMIS Enhanced funding for Eligibility and Enrollment systems
 - Conditionally approved by CMS
 - Working to address remaining conditions
 - HIT healthcare specific service/interface projects are problematic for federal funding assistance



eHHR Program

Funded Projects

- VITA is managing the SOA and EDM projects and will report on the status separately
- DMV is managing the Commonwealth Authentication Service (CAS) project and will report on the status separately
- Eligibility Modernization Projects
 - DSS is managing the Eligibility Modernization Projects
 - Virginia Case Management System (VaCMS)
 - External business rules engine development
 - Document Management Imaging Systems (DMIS)
 - CommonHelp enhancements (customer portal)
- Other Eligibility Modernization Projects
 - PMs have been identified; acquisition in progress



eHHR Program

Funded Projects

Eligibility Modernization Project

- Draft Contract is in external review phase
 - Active procurements can't be discussed
- CMS conditional approval on funding
 - Full amount initially requested has been approved
 - Revised funding request is being prepared
 - Working to clear remaining conditions
 - Conditions do not impede use of funding



eHHR Program

Funded Projects

Other Eligibility Modernization Projects

| Service/interface | Description |
|--|--|
| E&E Funding: Death Reporting Interface (DRI) | The DRI project implements a data exchange and messaging interface between the VDH death reporting systems and the enterprise environment. The project upgrades existing VDH death reporting systems to national standards using implementation guides approved by HITSAC. In addition, the enhanced services support an event subscription model where the death event is published to a subscriber list. This allows any authorized subscriber to receive electronic death notifications, so medical plan enrollments can be terminated according to policy. With the event subscription model, any death report can be leveraged to trigger automated coordinated service responses to the event. |
| E&E Funding: Birth Reporting Interface (BRI) | The BRI project implements a data exchange and messaging interface between the VDH birth reporting systems and the enterprise environment. The project upgrades existing VDH birth reporting systems to national standards using implementation guides approved by HITSAC. In addition, the enhanced services support an event subscription model where the birth event is published to a subscriber list. This allows any authorized subscriber to receive electronic birth notifications, so the child can be enrolled in the parents' medical plan automatically. With the event subscription model, any birth report can be leveraged to trigger automated coordinated service responses to the event. |
| HIT Funding: Immunization Registry Interface (IRI) | The IRI project implements a data exchange and messaging interface between the VDH Immunization Registry and the enterprise environment. The project upgrades existing VDH Immunization Registry systems to national standards using implementation guides approved by HITSAC. The interface supports meaningful use requirements. |
| E&E funding: Rhapsody Connectivity (RC) | VDH uses Rhapsody products to manage their IT development, test, and production environments. This project will establish connectivity between Rhapsody at VDH and the VITA enterprise environment to allow for interoperability between VDH systems needed to support the Eligibility Modernization effort. |



eHHR Program

Remaining Funding Challenges

HIE related

| Service/interface | Description |
|--|--|
| HIT funding: Rhapsody Connectivity (RC) | DCLS uses Rhapsody products to manage their IT development, test, and production environments. This project will establish connectivity between Rhapsody at DCLS and the VITA enterprise environment to allow for interoperability between DCLS and the HIE. |
| HIT Funding: Syndromic Surveillance Interface (SSI) | Syndromic surveillance is the analysis of medical data to detect or anticipate disease. The SSI project implements a data exchange and messaging interface between the VDH Syndromic Surveillance systems and the enterprise environment. The project upgrades existing VDH Syndromic Surveillance systems to national standards using implementation guides approved by HITSAC. The interface supports meaningful use requirements. |
| HIT Funding: Electronic Lab Reporting Interface (ELRI) | The ELRI project implements a data exchange and messaging interface between the DCLS laboratory reporting systems and the enterprise environment. The project upgrades existing DCLS electronic lab reporting to national standards using implementation guides approved by HITSAC. The interface supports meaningful use requirements. |

Note: For these HIT projects, CMS requires a cost allocation model that includes HIE and/or other payers. Since these services/interfaces are exclusive to healthcare and do not come under the OMB A-87 circular cost allocation waiver, an approach to dealing with funding is needed. This topic has been under discussion.



eHHR Program

Provider Incentive Program

- Program (soft) launch on 7/23/12
- Official (public) launch on 8/1/12
- Incentives paid to date

| | |
|------------------------|------------------------|
| Eligible Hospitals | \$12,434,182.03 |
| Eligible Professionals | \$4,451,172.00 |
| Total | \$16,885,354.03 |



eHHR Program

Wrap-up

- Questions?