



Spokane County MEDICAL SOCIETY

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MEDICAL INFORMATICS COMMITTEE MEETING MINUTES September 3, 2009

The SCMS Medical Informatics Committee met at 6:45 am on September 3, 2009 in Room 265 at the Deaconess Health and Education Center. Those present included Darin Neven, Sam Palpant, Torney Smith, David Henzler, Jac Davies, Glen Stream, Daniel Engle, and Stefan Humphries. George McAlister was staff.

CALL TO ORDER / APPROVAL OF AUGUST 6, 2009 MINUTES

The meeting was called to order at 6:52 a.m. It was moved, seconded and passed to approve the minutes of August 6, 2009.

1. NMIS Conference

INHS (through Jac Davies) has offered to extend a complementary registration to this year's Northwest Medical Informatics (NMIS) Symposium for all the members of the Spokane County Medical Society Informatics Committee. The NMIS conference, to be held at the Davenport Hotel, is scheduled for September 10-11, with pre-conference workshops scheduled for September 8-9.

2. Follow-Up Doug Weeks' Medication Reconciliation Pilot Study

Dr. Humphries reported that Doug Weeks is continuing to compile data and will be on the agenda in November to present his findings. As a reminder, Inland Northwest Health Services (INHS) received funds from the Washington State Health Care Authority to explore possible solutions for inaccurate or unavailable medication information often seen in the ambulatory care setting. One of the Medication Reconciliation project's first steps was to survey physicians and mid-level practitioners (who have prescribing authority) about the scope of the problem.

3. ARRA/HCA Updates

Two specific HITECH priority grant programs were announced to lay the groundwork for meaningful use of electronic health records (EHRs). These programs are meant to offer assistance to health care providers in the selection and incorporation of EHRs into clinical practice, and to assure that statewide information exchange is developed to achieve nationwide connectivity across the health care system. The first grant program, the Health Information Technology Extension Program, will fund dozens of Health Information Technology Regional Extension Centers across the country. The regional extension centers will hopefully, offer hospitals and clinicians hands-on technical assistance to support meaningful use of certified EHR systems. The second grant program will help states and qualified State Designated Entities (SDEs) to develop or align the necessary policies, procedures and network systems to assist electronic information exchange within and across states, and ultimately throughout the health care system. The Washington State Health Care Authority (HCA) was mandated by Governor Gregoire to become the lead coordinating agency for a statewide plan. INHS has submitted a proposal to work with other Washington State organizations as "lead agencies" in a regional extension center. There has been a huge response to these funding requests.

4. Update: Spokane/Regional Physician Practice Use of EMR Subcommittee

The Chair of this subcommittee, Sonny Varadan, was not able to attend. An update will be provided at the next meeting. There was a brief discussion on GE Centricity and GE's commitment to help clients meet "meaningful use" requirements. At present the meaningful use criteria haven't been completely defined and the final version may not be available until the first quarter of next year. One question asked was who will decide if an office is compliant with the meaningful use criteria? While programs will attempt to put EMR's in areas where they don't presently exist, there must also be an effort to bring existing EMR's into full use and compliance.

5. Update: Health Information Exchange Subcommittee

This subcommittee met last month. Dr. Humphries asked if Committee Members and HIE Subcommittee members were interested in a meeting with Phil Eucker of GE Healthcare during the NMIS

conference to discuss GE's HIE and MQIC. He has offered a breakout session for our Informatics Members or the Subcommittee, depending on interest. Dr. Humphries proposed meeting at the close of the NMIS conference on Friday, September 11 at lunchtime. In reviewing GE's HIE Services AutoDemo at

http://www.gehealthcare.com/usen/hit/images/flash/GEH_HIE_Autodemo_final_sml.htm Dr. Humphries noted that there was no mention of radiology, probably the biggest "data hog." Unfortunately, HIE still depends on regional approaches and the focus is on linking these regional efforts into a common state infrastructure. Unknown is what's going on at the federal level regarding interoperability. At present many federal agencies are moving to develop a health information exchange network through a shared National Health Information Network (NHIN)-Connect Gateway. The NHIN-Connectivity program will begin with an existing interagency health information exchange effort, the Bidirectional Health Information Exchange between the departments of Defense and Veterans Affairs. A second phase will include the Social Security Administration, Veterans Affairs and other agencies that need to retrieve medical records from outside providers. The federal government is pushing this option to be used at the local level (using The Continuity of Care Document (CCD) specification, an XML-based markup, as the standard to specify the encoding, structure and semantics of a patient summary clinical document for exchange). One of the questions that invariably arises is "if you purchase an HIE product, how do you pay for it?" Would patients be willing to pay for this service? HIE also isn't all about technology but a lot about behavior and change...enabling business to become more productive and efficient.

.There being no further business, the meeting was adjourned.

Respectfully submitted by the individual whose name appears below:

Stefan Humphries, Chair