

Alabama One Health Record®  
Commission Meeting  
Minutes

May 4, 2015

Attendees

Commissioner Azar (Medicaid)  
Rosemary Blackmon (ALAHA)  
Paul Brannan (Medicaid)  
Bobby Hooks (Medicaid)  
Bobby McDaniel (Medicaid)  
Dr. Robert Moon (Medicaid)  
Meghan Youngpeter (Medicaid)

Teleconference

Lisa Brand (BCBSAL)  
Tracy Davis (Hand Arendall)  
Mary Finch (ALPHCA)  
Doug McIntyre (BCBSAL)  
Dr. Dan Roach (USA)

Commissioner Azar opened the meeting and thanked everyone for their attendance. Paul Brannan then gave an introduction and background of himself. Paul has served the Medicaid Agency for over 20 years, working as MMIS Coordinator and Agency Privacy Officer. Paul now serves as the Director for One Health Record and Governor appointed State HIT Director.

Paul opened the HIE discussion with an update on where One Health Record is today. The East Alabama Medical Center (EAMC) pilot has been expanded and now includes 8 counties that surround the East Alabama Region. Outreach efforts continue in the EAMC pilot regions, and One Health Record is working to hire two additional outreach staff to aide in these efforts. We are currently in the process of onboarding seven hospitals and 100 + clinics. We are also working with seven different EHR vendors. Bobby Hooks was recently hired as the new full time implementation manager for Alabama One Health Record.

One Health Record is also working to build up the HIE infrastructure. Two additional staff members have been hired to work on building and maintaining the HIE infrastructure. One Health Record plans to optimize the Microsoft Azure environment for the anticipated demand of connections. EtransX has helped to drastically reduce the connection time for hospitals and clinics. The software also allows One Health Record to standardize the connection, making the process easier for the EHR vendors. Another advantage of EtransX is its ability to allow for transition among HIE vendors. For example, if the current HIE vendor, Truven Health Analytics, were to be replaced in the future, eTransX would allow the new HIE vendor to reengage all previously established connections instead of requiring every single connection to be redone.

Paul gave a brief overview of the RCO efforts and the goals of the HIE moving forward. One Health Record's plan as it relates to RCOs is to connect to all RCO providers, provide quality metrics, and enhance provider value. One Health Record would like to also add value components in order to increase the value to the providers (immunization, labs, imaging, etc.). Paul emphasized the importance of ensuring optimum security and usefulness for all HIE services. Paul also encouraged feedback regarding any concerns, comments, questions, etc.

One Health Record has secured funding for FY15 and FY16, \$5.3 million for 2015 and \$5.5 million for 2016. The East Alabama Pilot will have grant funds available until December 31, 2015, and One Health Record will continue to utilize these funds for assisting interface connections for clinics and hospitals in the East Alabama Region. The North Alabama HIE (NAHIE) in Huntsville also received grant funds from the State in order to assist in the cost of the connection between NAHIE and One Health Record.

One Health Record is not a Medicaid specific service. While our primary focus has initially been focused on Medicaid recipients, we continue to offer our services to non-Medicaid providers and others across the state.

Paul stressed to importance of building relationships and establishing connections among the various EHR vendors. This is a heavy lift and One Health Record is asking for help from everyone. Any push we can give these vendors to participate increases the overall success of the HIE. We are currently working to establish a “happy median” in the pricing structure for connections to these vendor systems. (e.g. volumes discounts, etc.). Moving forward, 1115 Waiver monies are being requested to help offset the cost of these connections.

A draft HIE RFP was sent out to all members and should be treated as confidential. Paul has encouraged feedback and input from Commission Members. The RFP could possibly be released as early as next fall. Our current contract with Truven will expire on June 30, 2015. We may possibly be able to extend this contract for an additional year following June 2015, which would allow us to release a RFI and possibly revise our current draft RFP. Paul has asked Commission Members to nominate individuals to vet our RFP, particularly regarding the functionality requirements (Section II-Scope of Work). All nominations must be somewhat flexible with their time and preferably have some expertise surrounding the HIE and its services. Please submit all nominations to Paul Brannan ([paul.brannan@medicaid.alabama.gov](mailto:paul.brannan@medicaid.alabama.gov)).

#### Questions/Comments

Rosemary Blackmon- What does the new RFP entail? If Truven wins would they just tweak their software, who owns what? **If Truven is replaced, One Health Record will keep the data, but the system is Truven's.**

Is there a way to write into the RFP that the vendor should build some of the connectivity cost into their solutions, since One Health Record will have done much of the work already? **It is a possibility.**