Arizona Health Care Cost Containment System:

Arizona Health-e Connection Accomplishment Report

July 2007 – June 2009

Table of Contents

Executive Summary

Since July 1, 2007, Arizona Health-e Connection (AzHeC) has worked with the Arizona Health Care Cost Containment System (AHCCCS) as part of a Medicaid Transformation Grant intended to facilitate the development and implementation of public and private health information exchange (HIE) and health information technology (HIT) initiatives. The activities funded through this grant closed at the end of December 2009 and AHCCCS has requested that AzHeC provide a description of the accomplishments funded as part of Agreement Number YH08-0020 and Amendment #1 to YH08-0020.

To satisfy that request, AzHeC is pleased to present this report that details the support services, products and accomplishments it completed as related to:

- Development of standards/standard terms, conditions & agreements
- Awareness and education, including educational literature
- Communications and outreach plan
- Website development
- Partnerships
- Requirements and technical assistance
- Grant proposals and business opportunities
- Staffing, operations and travel
- Coordination with AHCCCS

Finally, this report is meant to fulfill the requirement that AzHeC "provide two progress reports to AHCCCS to be included with the report AHCCCS provides to the Centers for Medicare and Medicaid on the expenditure and outcome of the Medicaid Transformation grant."

AzHeC has enjoyed working with AHCCCS during the past two years and looks forward to future opportunities for growth and collaboration.

I. Development of Standards: Standard Terms, Conditions & Agreements

AzHeC convened working groups to facilitate the development of standards for HIT and HIE components, specifically:

- Provider registration data for HIE participation
- HIE data use
- Exchange and privacy protection
- Electronic health record (EHR) format and data standards
- Master patient index or other record locator services

It also convened working groups to establish recommended standard terms and conditions and related template documents for:

- HIE provider and health data source participation
- Business associate agreements for data use
- Exchange and privacy protection

These working groups include community based stakeholders and consist of a Clinical/Technical Committee and a Legal Committee. Various subcommittees were formed under the Clinical/Technical Committee. All committees and subcommittees are detailed below.

Clinical/Technical Committee

AzHeC created a Clinical/Technical Committee comprised of providers, chief information officers, chief medical information officers and other subject matter experts from throughout Arizona. This committee is governed by a charter, the mission of which is:

The AzHeC Clinical/Technical Committee is committed to improving health care in Arizona by supporting HIT and HIE efforts around the state. The committee will promote and/or endorse EHR system functionality as well as system interoperability standards. To assist and guide the health care community, the committee will work with other AzHeC committees to communicate and coordinate this information to ensure successful exchange of data.

The entire charter is attached in Appendix A.

The Clinical/Technical Committee met on a regular basis and was charged with vetting a variety of technical issues before presentation to the Board and served as a technical forum for further coordination, development and consensus on HIT and HIE issues statewide. Subcommittees within the Clinical/Technical Committee that worked on specific topic areas included a Security Subcommittee, an EHR Standards Subcommittee, a Laboratory Descriptors Subcommittee, a HIE Coordination Subcommittee and an Interoperability Standards Subcommittee.

Meeting minutes and updates are included as Appendix A.

Security Subcommittee
A security subcommittee was formed under AzHeC in order to work on the Health Information Security and Privacy Collaboration (HISPC) - Arizona Health Privacy Project for 2008, described below. The charter of this committee is:

Purpose
The Security Subcommittee will address the technical security requirements necessary to ensure safe and protected use of electronic health information. In addition, the subcommittee will address standards as they relate to technical security requirements. The Security Subcommittee will have specific goals and objectives for each type of security architecture they will be addressing. This will include authentication, audit, authorization and access for the HIO.

Goal
The goal of the Security Subcommittee is to inform stakeholders as well as regional health information organizations (RHIOs) and Health Information organizations (HIOs) in Arizona and other states of the effective use of security standards and architecture that relate to HIE security. Further, the Security Subcommittee will inform stakeholders of costs that may be prohibitive as well as the risk factors involved with each level of security as authentication, audit, authorization and access are explored.

Objectives
- Leverage work already completed by the Arizona Government Information Technology Agency (GITA), at the national level and in other states for security architecture.
- Review policies and procedures defined by the Arizona Health Privacy Project (AHPP) Legal Committee to ensure the technical standards conform to these policies and procedures.
- Determine appropriate use cases for accessing the HIO.
- Using the National Institute for Standards and Technology (NIST) Electronic Authentication Guideline (EAG), evaluate associated risk with the different levels of security architecture.
- Review cost of the different levels of the security architecture.
- Recommend standards for use in developing security architecture.

HISPC - Arizona Health Privacy Project

The Security Subcommittee is affiliated with the Health Information Security and Privacy Collaboration (HISPC), a national project established in 2006. The HISPC project was funded by the Agency for Health Care Research and Quality (AHRQ) in 2006 with 34 participating states, including Arizona. The purpose of this collaboration is to assess variation in organization-level business practices in order to identify specific practices that may pose challenges, as well as practices that facilitate interoperable exchange. This, in turn, will allow states to identify and propose practical solutions to barriers while preserving privacy and security requirements as defined by stakeholders and in applicable federal and state law.

In 2006, Arizona's GITA received $350,000 to participate in the HISPC project. In 2008, an additional $414,000 was awarded to the agency to participate on a multi-state collaborative to address standards for HIE.

While AHCCCS funds did not contribute to HISPC products, the work did help set the foundation and contributed substantially toward AHCCCS-funded projects, thus, why it is briefly mentioned in this report.

HISPC - Arizona Health Privacy Project Phase One
During Phase One of the HISPC project, Arizona performed outreach to over one hundred stakeholders in the medical community in order to focus on business practices that pose as barriers to HIE. Once the barriers were identified, solutions were evaluated to those barriers and implementation plans were proposed. The Legal Committee worked on legislation that could be proposed to remedy legal barriers to HIE and also worked on model policies and procedures for provider access to the HIO and an enforcement policy for inappropriate access to the HIO.

HISPC - Arizona Health Privacy Project Phase Two
Under the second phase of HISPC, Arizona received a contract through RTI International and the Office of the National Coordinator to work on a multi-state collaborative called the "Adoption of Standards Collaborative (ASC)." The ASC's main goal was to establish a "National Health Bridge: Basic Policy Requirements for Authentication and Audit" for providers to access electronic health information across state lines. The other participating states in this collaborative were Colorado, Connecticut, Maryland, Nebraska, Ohio, Oklahoma, Utah, Virginia and Washington.

Through GITA, Arizona took on the role of co-chair as well as becoming a member of the National Steering Committee for the HISPC collaborative work. This work greatly contributed to additional projects completed under the AHCCCS funding, particularly the Guide to Adoption of Uniform Security Policy, which impacted the AHCCCS HIE Security Policy. The following products developed under HISPC, Phase Two can be found in Appendix A:

- Recommended Minimum Policy Requirements for Privacy and Security
- Overview of Basic Authentication Concepts Useful to Health Information Organizations
- Guide to Adoption of Uniform Security Policy

EHR Standards Subcommittee
This subcommittee, formed to encourage broader EHR and e-prescribing adoption, had the following objectives:

- Prioritize categories of data that are most important to exchange between EHRs and other HIT/HIE infrastructure (i.e., lab results, radiology, medication history, etc.).
- Compile these data categories, as well as minimum internal functions, into an ideal set of minimum EHR functionalities for Arizona providers. These functionalities will also include e-prescribing and the support of accepted standards for e-prescribing.
- Determine EHR vendors that meet the minimum functionality as determined by the subcommittee, and endorse these vendors.
- Consider the possibility of ASP model EHR solutions.
- Consider products that may be ideal for certain size or specialty physician organizations.
- Establish processes for publishing the technical standards and endorsement process for the vendor community.
- The subcommittee will either negotiate discounts with these accredited EHR systems or possibly issue a request for proposal (RFP) and have multiple awards for approved EHR systems.
- Consider negotiating discounts with third party vendors (i.e., contracting or implementation service organizations) for Arizona providers.

Additional Subcommittees formed and supported under the AHCCCS funds included the following:

Laboratory Descriptors Subcommittee
This ad hoc subcommittee was formed with the dual goal of creating high level lab descriptors and developing a policy recommendation for AHCCCS and Southern Arizona Health Information Exchange (SAHIE) to limit display of information to non-sensitive, non-controversial labs.

HIE Coordination Subcommittee
This subcommittee, formed to coordinate strategies between HIOs in Arizona, had the following objectives:

- Ensure that developing HIOs in the state are communicating, especially as it relates to adopting interoperable technical and process standards.
- Assess, adapt and adopt additional standards (security, privacy, etc.) as necessary for adoption by all Arizona HIOs. This assessment could result in a need for addendums to be created for such standards.
- Develop (as necessary) and stay compliant with appropriate legal and regulatory standards. All legal and regulatory work will be addressed in coordination with the Arizona Health-e Connection Legal Committee.
- Identify other entities that may store patient data (i.e., PHR, public health, etc.) and determine what particular standards may need to be accomplished.

This subcommittee also monitored the HIE certifications being developed by both Certification Commission for Health Information Technology (CCHIT) and Electronic Healthcare Network Accreditation Commission EHNAC, as national certification would impact Arizona HIOs.

Interoperability Standards Subcommittee
This subcommittee, formed to endorse appropriate interoperability standards for use in the state, had the following objectives:

- Determine which standards should be used for specific data transfer between entities (conduct an assessment of what standards are currently being used by vendors as part of this analysis and determination).
- Once standards are determined, develop implementation profiles for these standards to be used by Arizona entities.
- Create policies (or leverage those created by other AzHeC committees) for managing and exchanging information.
- Educate the community (including vendors) as to which standards are suited for various tasks.
- Ensure consistency and eliminate any conflicts between this objective and the encouragement of broader EHR adoption.

Legal Committee

During the AHCCCS grant period, a foremost priority of the Legal Committee was to develop standard terms and conditions as well as model policies as a part of the HISPC – Arizona Health Privacy Project, described above. For further information on standards and policies development, see the presentation "Arizona Common Framework" in Appendix A. Additionally, the Legal Committee oversaw the development of a legislative package that is currently moving through the Arizona State Legislature. Finally, the Legal Committee participated in work featured in section VII of this report, including the creation of a model HIE participation agreement that was adopted by AHCCCS/AMIE as well as other HIOs such as SAHIE.

This committee is chaired by Kristin B. Rosati, Esq., a partner in the law firm of Coppersmith Schermer & Brockelman PLC. Her practice concentrates in clinical research, EHR, health information privacy (HIP) and security and consent issues. Ms. Rosati is a member of the American Health Lawyers Association (AHLA) Board of Directors, Chairs the AHLA Quality Council and is immediate past Chair of AHLA's Health Information and Technology Practice Group. She was a member of the National Governors Association State Alliance for e-Health, Health Information Protection Task Force.

Legal Committee Products
Products from this group, presented wholly in Appendix A, are as follows:

Consent and Privacy Issues/Consent White Paper
Work to identify legal issues that constituted barriers to HIE adoption in Arizona, including participant consent concerns was the main goal of the Legal Committee. The work included gathering information on the experiences of other states in handling participant consent, identifying and analyzing options for addressing this issue and developing a white paper to guide future activity in this area.

> *White Paper - Consumer Consent for HIE: An Exploration of Options for Arizona's HIOs*
> This white paper discusses a fundamental policy challenge that every HIO must make in establishing its operations: whether and how to seek consumer consent to exchange a consumer's health information through the HIO. The white paper explores in detail that this is a difficult issue to resolve because different stakeholders in the health care community—consumers, health care providers, HIO administrators and others—often have different and sometimes strongly held beliefs about this issue. In addition, decisions about consumer consent will impact the way an HIO's technology is structured and some of those decisions may be too difficult or expensive to implement.

Proposed Legislative Package
The Legal Committee and AzHeC Legal Counsel Kristen Rosati and Beth Schermer developed a proposed legislative package in the fall of 2008. This proposal was presented to the AzHeC Board, but deferred one more year (to the 2010 Legislative Session), to ensure its inclusion of a consent policy that is reflective of Arizona clinicians and consumers. Concern was expressed that very little consumer outreach had been done to date. Other states that have performed consumer outreach activities found it extremely helpful and strategic in the development of both consent policy and overall direction.

- AzHeC staff sought pro bono legal assistance from the Board to assist with this further legislative package development and associated consumer outreach. Blue Cross Blue Shield (BCBS) of Arizona responded and worked closely with AzHeC staff to conduct focus groups in eight town hall settings between April 29 and June 17, 2009 in the Arizona communities of Surprise, San Luis (two sessions in the Yuma area), Marana (Tucson area), Arizona State University (two sessions), Flagstaff and Tempe. The focus groups had a total of 177 participants, all Arizona residents, with a statistical error rate of ±6.2 % at a 90% confidence level on the accompany survey. Focus group topics included protecting privacy and security, EHRs, HIOs and Consumer Controlled Health Records (CCHRs). The majority of the focus group project was funded by BCBS of Arizona; however, AHCCCS funding also contributed.

Key elements that AzHeC anticipates will be addressed in the final legislative package include:

- Removing statutory barriers to HIE
- Removing requirements for "written in ink," "written" records, etc.
- Disclosure of medical records by providers to health information organizations (HIOs)
- Redisclosure of medical records
- Clarifying at what point externally-sourced information becomes part of a provider's record
- Ensuring rigorous privacy and security of consumers' health information
- Access (who can; and how)
- Authorization (who is; and how)
- Consumer Consent
- Opt-in, Opt-out, No-consent, where consent is executed
- Regulation of HIOs`
- "Safe Harbor" for health care providers using HIE in good faith
- Expanding computer tampering statutes to include unauthorized access to HIOs and health care providers
- Provision/release of state immunization registry data through HIOs
- Provision/release of lab results through HIOs
- Provision/release of communicable disease information through HIOs
- Health care provider access to patient directives
- Considering use of HIOs for public health purposes, such as disease, pandemic and bioterrorism surveillance
- Consumers' access to a copy of their information available through HIOs
- Consumers' right to amend their information available through a HIO
- Ensuring HIOs follow fair information practices
- Providing a statutory baseline of required HIO policies
- Ensuring participation in HIOs is voluntary for health care providers
- Considering position of HIOs relative to the subpoena process
- Enforcement, including injunction actions and penalties, for HIOs' violations of statutes

This legislative package is currently moving through the 2010 legislative session.

Model HIE Policies
Through a process that engaged broad stakeholder involvement and the Legal Committee, model HIE policies were developed, including policies on patient consent and notice, registration and authentication, data use, data submission and auditing and compliance. See this document in Appendix A.

II. Awareness & Education

One of AzHeC's three key areas of focus is to serve as an educator and statewide clearinghouse for information. As such, AzHeC provides educational opportunities throughout the year to increase the awareness and knowledge of various health information infrastructure, technology and exchange topic areas. AzHeC staff and representatives also present at local, state, regional and national events on all facets of HIT and HIE.

As part of its Communication and Outreach Plan (detailed in Section VIII), AzHeC developed and now executes HIE and HIT awareness initiatives and education for its consumers/beneficiaries, members and health care and HIT professionals, as described below.

Consumers

AzHeC leverages a variety of methods for reaching consumers and beneficiaries, including a website, media exposure (print and broadcast), marketing documents and journal articles. It also created the Consumer Advisory Council, an avenue through which AzHeC can engage consumers in Arizona's health information infrastructure (HII), HIT and HIE initiatives.

Website

AzHeC developed its website, www.azhec.org, to serve as an information portal for its consumers and HIT stakeholders alike. It provides details about AzHeC and its committees; news and press; events; state programs; membership; HII, HIT and HIE; e-prescribing; EHRs; PHRs; and privacy and security. Its features and content are more comprehensively detailed in Section IX.

Media Exposure

Press Releases

AzHeC maintains a media presence through print and broadcast avenues. AzHeC maintains a list of AzHeC and partner organizations' press releases on its website. A list of release dates and headlines follows; entire AzHeC releases are provided in Appendix B.

Date	Headline
02/25/09	Southern Arizona HIE chooses Wellogic for HIE and SaaS Solutions
03/20/07	Governor Leads Health Care Innovation Summit: Health-e Connection Expands 'Roadmap'
08/28/07	Executive director named to guide statewide health information technology effort
12/11/06	$1.5 Million Grants To Go To Rural Health Care Facilities: Grants Will Promote Implementation of the Health-e Connection Roadmap
09/01/05	Governor Creates Arizona Health-e Connection Roadmap: Committee to Focus on Reducing Health Care Costs, Secure Exchange of Information

Print and Online Media Coverage

Recent print and online media coverage for AzHeC, links to which can be found on http://www.azhec.org/newsPress.jsp, include:

Date	Headline	Publication/Organization
02/26/09	Arizona groups survey public attitudes on HIE	Government Health IT - a HIMSS Publication
11/12/08	Medicare selects four companies where beneficiaries can maintain their personal health records	CMS Office of Public Affairs
11/13/08	Arizona picked for Google health-file experiment	The Arizona Republic
10/02/07	NHIN Watch Perspective: Arizona Health-e Connection on a roll	NHINWatch.com
08/29/07	Big goal: Link all health files electronically	The Arizona Republic
09/27/06	Goal Is EHR. Path Is State by State.	New York Times
04/06/06	Arizona Seizes Initiative with 'Health-e Connection' Project	Knowledge@W.P.Carey

Broadcast Coverage

In 2008, AzHeC was featured on Channel 12 as part of the "Call 12 For Action" segment hosted by Dave Cherry. Both interviews featured Brad Tritle, AzHeC Executive Director:

- An April 30 segment described EHRs, including their benefits. The appearance also invited consumers to the AzHeC Summit, an event that shared information about EHRs records and personal health records (PHRs).
- A December 16 segment focused on PHRs and the Medicare pilot program.

Marketing Documents

To broaden understanding of AzHeC and HIT, documents detailing facts about AzHeC, HIT benefits and key terms, and other important HIT and HIE information, were created. Additionally, through the HISPC project, AzHeC was able to leverage consumer materials developed by other states to share with Arizona audiences, namely the Consumer Advisory Council. Finally, the development of the AzHeC website involved reviewing hundreds of documents in the current marketplace to determine which resources are the most credible and useful to healthcare stakeholders. This selection of resources provides additional value to AzHeC's stakeholders. These documents include:

AzHeC documents:
1. AzHeC Fact Sheet
2. Benefits of HIT
3. Key HIT Terms
4. Membership Value Document
5. Supporter Value Document
6. Top 25 e-Prescribers in Arizona
7. Consumer Consent Whitepaper
8. Model Health Information Exchange Participation Agreement
9. EAzRx Overview

Non-AzHeC documents:
10. Medicare eRx Incentives Guide
11. eHealth Initiative Clinician's Guide to eRx

12. eHealth Initiative eRx Best Practices & Lessons Learned
13. eRx: Why Now?
14. eRx in AZ Progress Report
15. Executive Order 2008-21: Patient Safety and e-Prescribing Initiative
16. Connecting Physicians & Pharmacists to Improve the eRx Process
17. An eRx Primer
18. The ROI Behind eRx
19. eRx – Current Issues and the Road Ahead
20. HIMSS eRx Fact Sheet
21. eRx: Toward Maximum Value Rapid Adoption
22. Standalone eRx: Ready or Not?
23. Arizona DOQ-IT Vendor Search Worksheet
24. How to Select an Electronic Health Record System
25. EHR Systems Selection: Selected Resources
26. Organizing Your Efforts: How get an EMR effort started
27. ONC HIT Regional Extension Program Draft Description
28. HISPC Executive Summary

The above documents are available on the AzHeC website and included in Appendix B.

Journal Articles
As one strategy to raise awareness among various health care professional groups in Arizona, AzHeC has published journal articles in association publications, including:

- Arizona Osteopathic Medical Association (Spring 2009)
- Arizona Geriatrics Society Journal (Spring 2009)

Copies of these articles are included as Appendix B.

Consumer Advisory Council
The charge of the AzHeC Consumer Advisory Council is to advise the AzHeC Board, by providing a forum for consumer comment, education and the development of consumer stakeholder consensus on principles, standards and initiatives relating to the electronic transfer of personal health information as it relates to AzHeC activities.

The Consumer Advisory Council's goal is to reflect the demographic breadth of Arizona by calling on individuals from all walks of life. We are especially looking to engage consumers who are not employed within the health care industry. Responsibilities of council members will include, but are not limited to:

- Review of information about the organization, basic concepts of health information infrastructure terminology, new developments in the HII market and other relevant activities, including project marketing materials.
- Attendance at Consumer Advisory Council meetings, to be held once a month.
- Active participation in council discussions and activities.
- Assistance with distribution of information to the greater population.

An overview of this council is included in Appendix B.

AzHeC Members & Stakeholders

To reach and educate its members and other relevant stakeholders in the HIT arena, AzHeC conducts Forums, Webinars and Summits.

Forums

Member Forums are offered on a regular basis, include several components and are open to AzHeC members as well as any other health care stakeholders. Typically scheduled in the evenings, the Forums begin with a light dinner and networking opportunity. The program includes a brief update on AzHeC activities, followed by a feature presentation. These Forums offer AzHeC members and other interested stakeholders an opportunity to learn about a key HIT and/or HIE topic of interest. A list of previously-conducted Forums follows:

Date	Topic
May 27, 2009	*Update on the Federal Stimulus Package Activity and AzHeC Business Plan Development – Brad Tritle, CIPP, AzHeC Executive Director* *Nursing Informatics, Critical to Health-e Connection* – Dr. Judith Effken, PhD, RN, FACMI, FAAN *Panel on Arizona Nursing Informatics* – Moderator: Dr. Effken; Panelists: Sandra Dinwiddie, RN, BSN, BGS, Informatics Project Leader, St. Joseph's Hospital, Phoenix; Chris Geer, RN, BSN, AzNA member; Candace Larson, RN,BSN, Clinical IT Project Manager, Scottsdale Healthcare Osborn; and Denise Link, PhD, FNAP, RNP, Associate Dean, Clinical Practice & Community Partnerships, Arizona State University College of Nursing and Healthcare Innovation
August 11,2009	*Brief Update on HIT Federal Stimulus & Arizona's Stimulus Approach- Brad Tritle, CIPP, AzHeC Executive Director* *Implementing Electronic Health Records in a Small Practice* – Moderator: Kenneth Adler, MD, Arizona Community Physician; Panelists: Tiffany Nelson, MD and Dan Nelson, Desert Ridge Family Physicians; Joe West, Pinnacle Peak Physicians; John Lin, MD, Sunrise Urology

Webinars

Member Webinars are offered on a regular basis on topics that are timely and of extreme interest to our members. These may include providing members with access to existing national presentations or exclusive presentations that are customized to the AzHeC audience. A list of previously-conducted Webinars follows:

Date	Topic
Jan 2008	Health Capable: The HealthCard, presented by founder Dr. Dan Claud, MD
April 2008	Gauging the Progress of the National Health Information Technology Initiative:

	Perspectives from the Field (a California Health Care Foundation published report), provided by report author Bruce Merlin Fried, Esq.
July 2008	Connecting Consumers: Common Framework for Networked Personal Health Information, by Josh Lemieux of the Markle Foundation and Connecting for Health
October 2008	Oregon HISPC: Consumer Outreach for HIE
April 2009	HISPC Provider Education
October 2009	CCHIT: New Certification Structure, presented by Chairman, Mark Leavitt

Summits

Since 2007, AzHeC has held an annual Summit that brings together health care stakeholders, providers, employers and consumers from around the state to learn about national HII progress, updates on Arizona initiatives and new developments in the HII industry at large. The Summit has attracted from 350 to over 500 attendees since its inception and is the only statewide conference on HII, HIT, and HIE.

Additionally, AzHeC works collaboratively with its partner organizations, which include the American Medical Informatics Association (AMIA), the Arizona chapter of the American Health Information Management Association (AzHIMA) and the Arizona chapter of the Healthcare Information & Management Systems Society (AzHIMSS), to identify state counterparts in the Western region to whom to market the Summit. The 2009 Summit was the first year where AzHeC reached out to states outside of Arizona. In 2010, it hopes to build on the success of 2009 and reach even more Western states attendees through its collaborative marketing efforts.

A spreadsheet detailing the expenses, gross income and net revenue for each of the past three years is included as Appendix B; highlights for each Summit follow.

2007 Summit: "HIE and Deployment of HIT, A Progress Report on the AzHeC Roadmap"
This Summit was held at the Hyatt Phoenix on March 20, 2007. It was managed by AHCCCS staff, prior to any official AzHeC staff being hired. Sponsors were AHCCCS & Schaller Anderson (Platinum $25,000), Ingenix (Gold $10,000) and Sonora Quest Laboratories (Silver $5,000). This Summit included approximately seven table top exhibits, was attended by approximately 400 members and had net revenue of $39,177.37.

2008 Summit: "AzHeC Summit"
Held May 2-3, 2008 at the Phoenix Convention Center, this Summit was a statewide event, where AzHeC more than doubled the number of sponsors and exhibitors over the previous year. Sponsors were Schaller Anderson (Platinum $30,000), UnitedHealthcare/Ingenix and Sonora Quest Laboratories (Gold $15,000) and Cerner, Microsoft Health Services Group and 3M (Silver $7,500). It had 18 exhibitors ($2,500 each) and seven non-profit/association partners ($500 each, although some were complimentary). With approximately 400 attendees, the 2008 Summit's net revenue was $46,399.17.

2009 Summit: "Western States Health-e Connection Summit & Trade Show"

2009 marked the first year that the Summit was a regional, standalone trade show event. It featured over 50 booths, which is an almost-triple increase from 2008. Sponsors were Schaller Anderson (Platinum $30,000), UnitedHealthcare/APIPA/Optum Health and Sonora Quest Laboratories (Gold $15,000) and Medicity, Allscripts and California Health Care Foundation (Silver $7,500). It had 38 exhibitors ($2,500 each) and 12 non-profit/association partners ($500 each, although some were complimentary). With approximately 500 registrants, the 2008 Summit's net revenue was $126,334.99.

Health Care & HIT Professionals

In addition to the Summits, AzHeC reached health care and HIT professionals via presentations that covered a variety of topics including an AzHeC Overview, the Roadmap Process, e-Prescribing Basics, and Statewide Coordination, among others. Audiences included physicians/providers, specialty groups, governments (state, city and county), education providers, hospitals and symposium/conference attendees. These presentations allowed AzHeC to build relationships with key groups related to or with an interest in HIT in Arizona, including AzHIMA, AzHIMSS, the Arizona Medical Group Management Association (AzMGMA), and AMIA, as well as a number of professional associations. A list of presentations is as follows:

Date	Event & Location	Title of Presentation	Presenter
2007	2007 CSG Innovations Awards Program Winner!	AzHeC	
2007	SAHIE Adoption Workgroup, Tucson	AzHeC	Brad Tritle
05/15/07		AzHeC	Eric Dean
05/30/07	AZ Digital Government Summit	AzHeC	Brad Tritle (GITA)
06/04/07		AzHeC	Brad Tritle (GITA)
09/17/07	Council of State Governments - West, Jackson Hole, WY	AzHeC	Brad Tritle
10/16/07	Tribal Regional HIO	Roadmap Process	Brad Tritle
10/17/07	AZ Managed Care Quality Enhancement Program	AzHeC Overview	Brad Tritle
11/03/07	AZ Osteopathic Medical Association	AzHeC	David Landrith
11/05/07	AHIMA State Level HIE Conference, Washington, DC	AzHeC	Brad Tritle
11/07/07	HIMSS Virtual Conference	AzHeC	Brad Tritle
11/09/07	AZ Council of Human Services Providers	AzHeC	Brad Tritle
11/13/07	Council of State Governments, Oklahoma City, OK	AzHeC	Brad Tritle
11/16/07	Arizona Health Information Executives (AZHIE); Arizona hospital CIOs	AzHeC	Brad Tritle
11/26/07	Maricopa Integrated Health System Leadership	AzHeC	Brad Tritle
11/30/07	Tri-Agency Tribal Consultation	AzHeC	Brad Tritle
12/03/07	Colorado/DHHS Region 8 Health IT Symposium, Denver, CO	AzHeC	Brad Tritle

12/04/07	Colorado/DHHS Region 8 Health IT Symposium, Denver, CO	Governance: Then & Now	
01/15/08	Arizona Healthcare Finance Management Association – Phoenix luncheon	AzHeC: An Introduction From Executive Order to Not-for-Profit	Brad Tritle
02/22/08	Arizona Health Information Executives Update	AzHeC	Brad Tritle
03/01/08	AZ Health Education Centers	Statewide Coordination: Private-Public Partnership	Brad Tritle
03/12/08	American College of Medical Genetics, Phoenix, AZ	Statewide Coordination: Private-Public Partnership	Brad Tritle
03/14/08	AzHIMSS	AzHeC	Brad Tritle
04/09/08	Mayo Clinic Scottsdale	AzHeC	Brad Tritle
04/24/08	Accelerated Evening MBA Program, WP Carey School of Business, ASU	AzHeC	Brad Tritle
05/02/08	AzHeC 2nd Annual Summit, Phoenix, AZ	Arizona in Action- HIE Panel	Brad Tritle
05/02/08	AzHeC 2nd Annual Summit, Phoenix, AZ	AzHeC Organizational Update	Brad Tritle
06/26/08	Mayo Clinic Scottsdale	AzHeC	Brad Tritle
06/30/08	Attorney General's Office & Other State Officials	AzHeC e-Health Update	Brad Tritle
07/19/08	CSG West, Anchorage, Alaska	One State's Model for Implementing Health Information Technology: Challenges and Opportunities	Brad Tritle
07/27/08	20th Annual Southwest Regional Nurse Practitioner Symposium, Flagstaff, AZ	AzHeC	Brad Tritle & Melissa Rutala
08/27/08	ASU College of Nursing	AzHeC	Brad Tritle
09/25/08	State Alliance for e-Health, Crystal City, VA	Roadmap Overview	Brad Tritle
09/26/08	State Alliance for e-Health, Crystal City, VA	AzHeC	Brad Tritle
10/04/08	Arizona State Association of Physician Assistants (ASAPA) Fall Conference, Tempe, AZ	e-Prescribing Basics for Health Care Providers	Brad Tritle, Melissa Rutala, Mark Wallace, MD
10/08/08	AzMGMA Monthly Meeting, Central Valley, Phoenix, AZ	AzHeC: Moving Towards a Connected Practice	Eric Thomas
10/09/08	AzMGMA Monthly Meeting, West Valley, Phoenix, AZ	AzHeC: Moving Towards a Connected Practice	Melissa Rutala
11/11/08	AzMGMA Monthly Meeting, East Valley, Phoenix, AZ	AzHeC: Moving Towards a Connected Practice	Melissa Rutala
11/14/08	AzMGMA Monthly Meeting, Central, Tucson, AZ	AzHeC: Moving Towards a Connected Practice	K. Bharathan, PhD

11/20/08	Health Guide America	AzHeC and Health Guide America: The Consumer Role in HIE	Brad Tritle
11/21/08	AzMGMA Monthly Meeting, North-Northwest, Tucson, AZ	AzHeC: Moving Towards a Connected Practice	K. Bharathan, PhD
12/03/08	Arizona Employer Leadership Meeting, Ritz Carlton Phoenix	AzHeC: Moving Towards a Connected Practice	Brad Tritle
12/09/08	AHCCCS Event, Phoenix Airport Marriott, Phoenix, AZ	Reducing the Escalation of Health Care Costs and Improving the Quality of Health Care in Arizona	Brad Tritle
12/22/08	eHealth Initiative E-Prescribing Webinar	The Basics of E-Prescribing/Implementing E-Prescribing in AZ	Melissa Rutala
01/21/09	Health and Human Services Committee Arizona House of Representatives	Arizona Health-e Connection	Brad Tritle
01/21/09	ADHS Primary Care Program Contractors' Meeting	Arizona Health-e Connection and EAzRx: Smoothing the Road to E-Prescribing	Brad Tritle, Melissa Rutala
02/02/09	Arizona Rural and Public Health Policy Forum	Arizona Health-e Connection and EAzRx: Smoothing the Road to E-Prescribing	Brad Tritle
02/28/09	Southwest Clinical Pharmacy Seminar	E-Prescribing Part 1: Getting Started	Brad Tritle Mindy Rasmussen Terri Warholak
02/28/09	Southwest Clinical Pharmacy Seminar	E-Prescribing Part 2: Lessons Learned-Advanced Implementation	Brad Tritle Mindy Rasmussen Terri Warholak
02/28/09	Southwest Clinical Pharmacy Seminar	Overview of E-Prescribing	Mindy Rasmussen
03/01/09	Southwest Nephrology Conference	Arizona Health-e Connection and EAzRx: Smoothing the Road to E-Prescribing	Brad Tritle Mindy Rasmussen
03/18/09	T-Health Business Forum, Phoenix, AZ	Achieving Health IT Interoperability" Definitions and Standards	Brad Tritle

03/19/09	Maricopa Association of Governments Technology Advisory Group (MAGTAG), Phoenix, AZ	Arizona Health-e Connection	Brad Tritle
03/25/09	Arizona State Senate Healthcare and Medical Liability Reform Committee, Phoenix, AZ	Arizona Health-e Connection	Brad Tritle
04/22/09	ARRA Opportunities for Clinicians Pima County Medical Society, Tucson, AZ	Arizona Health-e Connection	Brad Tritle
04/24/09	Arizona Osteopathic Medical Association House of Delegates, Phoenix, AZ	Arizona Health-e Connection	Brad Tritle
05/05/09	National Council for Prescription Drug Programs, Scottsdale, AZ	The Future of E-Prescribing	Melissa Rutala
05/07/09	Community Health Center Collaborative Ventures Meeting, Phoenix, AZ	Arizona Health-e Connection and Community Health Centers: Partners for eHealth	Brad Tritle
05/20/09	TimeOut, Phoenix, AZ (Arizona seniors care manager community)	Health Care System Transformation: HIPAA and Health Information Technology	Brad Tritle
05/27/09	The 6th Annual Conference for Long Term Care Professionals: Roadmaps to Resources for Senior Industry Professionals , Phoenix, AZ	Arizona Health-e Connection: Federal and State e-Health Overview	Brad Tritle
05/28/09	GITA	Arizona Health-e Connection An Introduction for GITA Executives	Brad Tritle
06/11/09	Phoenix Country Club, Phoenix, AZ	HIT Federal Stimulus Opportunities: A Lunch & Learn Presentation	Brad Tritle
06/19/09	Case Management Society of America, Phoenix, AZ	Arizona Health-e Connection	Brad Tritle

Additionally, AzHeC's website, more fully detailed in Section IX, also provides a great deal of content relevant to health care and HIT professionals.

III. Partnerships

AzHeC was tasked with establishing and sustaining public and private partnerships to support HIE and EHR development and implementation. This was accomplished by developing AzHeC itself as a public-private partnership and facilitating EHR/HIE development with other organizations. AzHeC began by crafting detailed business plans and Strategic Direction documents, presented in whole as Appendix C and described below.

AzHeC Development as a Public-Private Partnership

AzHeC is a not-for-profit organization whose mission is to lead Arizona's establishment of HIE and adoption of HIT. Initially, AzHeC was a state-led initiative called upon by the Governor to comprehensively review issues and develop recommendations. In order to bring AzHeC out of the state government and form a nonprofit public-private partnership, several milestones were accomplished.

First, bylaws that would govern the organization were developed by legal counsel and written based upon the recommendations of the original Roadmap Governance Committee. The organization was incorporated in January 2007 and the bylaws were adopted by the initial Board of Directors at their first meeting. Within the first six months, the AzHeC Board of Directors developed and agreed upon three main strategic directions on which they wanted the organization to focus initially.

At a high level, these strategic directions include:

- Information clearinghouse/education outreach
- Standards/rules setting body
- HIT and HIE infrastructure

Since the hiring of its first executive director, AzHeC has been dedicated to the strategic directions above and has tailored its activities and approaches accordingly. Please refer to the business plan and Strategic Direction document for more details on these activities and approaches. Because of its efforts, AzHeC is now directed by a very diverse, private-public partnership dedicated to refining the recommendations and facilitating implementation.

EHR/HIE Development with Other Organizations

Based on its Strategic Direction document, AzHeC identified how to sustain HIO development by working with the following organizations:

SAHIE

The concept of a RHIO for Southern Arizona got its formal start in early 2006. SAHIE grew from four initiating institutions in Phase One to now over 30 member organizations including hospitals, group practices, community physicians, health plans, diagnostic service organizations, the business community and county administrations in Southern Arizona, as well as agencies of the State of Arizona. The mission is to improve the access, quality and safety of health care while reducing or stabilizing costs in Southern Arizona through the deployment of a regional, financially self-sustainable HIO. SAHIE is currently in the final stages of organizational and technology design and has selected the HIE vendor, Wellogic.

Arizona Medical Information Exchange (AMIE)
AHCCCS, Arizona's single Medicaid agency, was awarded a Medicaid Transformation grant on January 25, 2007 to develop and implement an electronic web based HIO to give all Medicaid providers instant access to patients' health information at the point of care. The Federal funds are being used to support the planning, design, development, testing, implementation and evaluation of Arizona's first functional HIO, the Arizona Medical Information Exchange (AMIE).

The AMIE Proof of Concept was launched on September 29, 2008. Although AMIE continues to operate, the Proof of Concept ended on December 29, 2008. An in-depth evaluation and findings report of all aspects of the Proof of Concept was completed by the University of Arizona in April of 2009. The AMIE Proof of Concept enabled 39 AMIE certified and credentialed AHCCCS registered clinicians to identify patients, locate their relevant medical information and view individual patient records. AHCCCS does not use, collect or store the clinical data; AMIE simply provides the means for clinicians to locate and view information available from health care facilities participating in AMIE, for treatment purposes only. The "proof of concept" included:

- Hospital discharge summaries (from Maricopa Integrated Health System, St. Joseph's Hospital and Medical Center and selected Banner Health facilities)
- Laboratory test results (from Sonora Quest Laboratories)
- Medication history (from Managed Care Pharmacy Consultants)

Arizona's Purchasing & Assistance Collaborative for Electronic Health Records (PACeHR)
PACeHR (pronounced "pacer") was launched to accelerate EHR adoption, improve quality, safety and efficiency and promote a community of information sharing. Targeting small and medium-sized practices, PACeHR aims to leverage economies of scale, strategic partnering and the power of web-based technologies to assure that every clinician in Arizona will have access to an affordable, interoperable, CCHIT-certified, web-based EHR solution, support and related products and services. The selection process for PACeHR's inaugural products was completed in the fall of 2009. Proposals from EHR companies that responded to the request posted were reviewed by an expert panel that included representatives from Arizona's provider organizations. To date, two vendors have been selected - e-MDs and Noteworthy Medical Systems. Additionally, AzHeC plans to work with PACeHR in developing the Arizona Regional Extension Center.

Community Access Program of Arizona and Mexico (CAPAZ-MEX)
The primary goal of CAPAZ-MEX is to improve the health status of the medically-underserved populations by building and strengthening the infrastructure for a continuum of care (medical, dental and mental health)—from prevention to tertiary care. The Regional Center for Border Health and the Yuma County Health Consortium are working to create and share information among the Yuma County and San Luis Rio Colorado, Sonora, Mexico medical/social services providers. This program will support data sharing, inter-agency referrals, allow service utilization tracking and expand the use of shared service applications such as the Continuity of Care Record (CCR). CCR is a standardized dataset to ensure consistent data content focusing on the most important elements of continuity of care.

IV. Requirements & Technical Assistance

AzHeC, through its Clinical/Technical Committee (described more fully in Section I) and working with the AHCCCS HIE project team, facilitated review and comment on the AHCCCS HIE and EHR user and system requirements and shared technical assistance.

AzHeC participated on the AHCCCS Steering Committee for the Health Information Exchange & Electronic Health Record (HIeHR) Utility Project from 2007-2009. This project's main product included the development of the AMIE. Funding for this project resulted from a Medicaid Transformation grant of $11.7 million awarded to AHCCCS on January 25, 2007. AzHeC's participation included contributing to discussions and providing technical knowledge on project and spending planning, operational planning and legal and policy recommendations.

AzHeC also worked with consultants whose work and products were provided to AHCCCS in the form of technical assistance and information.   Working with Business Networks International, Inc. (BNETAL), a health IT security contractor with the Centers for Disease Control and Prevention (CDC) Public Health Network, AzHeC and BNETAL provided AHCCCS with a review of AHCCCS' overall architecture as well as a presentation on HIE standards. The presentation can be found in Appendix D.

Additionally, AzHeC worked with consultant Jon Melling to publish a report on the process referred to as "Roadmap Strategic Realignment" or "Roadmap 2.0" that took place from mid-May to mid-August 2008. The purpose of the report was to briefly present the findings and recommendations that evolved from the Strategic Realignment process and reflect the findings that pointed toward a stronger statewide organization role. The full report can be found in Appendix D.

V. Grant Proposals & Business Opportunities

AzHeC collaborated with AHCCCS and other HIE and HIT organizations, both public and private, on grant proposals and business opportunities to foster HIE and HIT expansion.

Grant Proposals

UnitedHealthcare

AzHeC received a one-time, $100,000 grant from United Healthcare (UHC) in mid-2008 to support the establishment of a statewide electronic prescribing (e-prescribing) initiative, now known as EAzRx.

EAzRx was founded in early 2008 as a statewide initiative to foster the adoption and utilization of e-prescribing. Co-chairs and a steering committee were established prior to the receipt of the UHC funding and the UHC grant facilitated a variety of valuable activities which will have a lasting effect on the adoption of e-prescribing statewide. AzHeC also moved forward on several activities once the UHC funding was awarded.

Grant-funded activities included establishing a work plan of strategies and tactics approved by the EAzRx Steering Committee, identifying the need for an e-prescribing utilization team and funding a business plan for such, performing surveys and studies on providers relative to e-prescribing , tracking e-prescribing metrics, identifying challenging areas for specific future activity (e.g., community health centers) and a great deal of education of physicians, nurses, nurse practitioners, physician assistants and pharmacists regarding e-prescribing and EHRs (as well as HIE and PHRs).

In summary, the grant award from UnitedHealthcare has been instrumental in pushing forward e-prescribing in Arizona, including doubling the percentage of e-prescribing transactions from 2008 to 2009.

This grant proposal, as well as additional supporting documents, is attached as Appendix E.

AHRQ

The Agency for Healthcare Research and Quality (AHRQ) is the lead Federal agency charged with improving the quality, safety, efficiency and effectiveness of health care for all Americans. As one of 12 agencies within the Department of Health and Human Services, AHRQ supports health services research that will improve the quality of health care and promote evidence-based decision making. AzHeC has presented the following project abstract to AHRQ with the goal of securing $1.2 million in funding:

The long-term goal of this project is to increase the rate of e-prescribing adoption among community health centers (CHCs) to improve health care quality, safety, efficiency and outcomes for medically underserved populations in the state of Arizona. The purpose of this project is to identify and reduce barriers to successful implementation and use of e-prescribing in Arizona CHCs. This project will evaluate changes in quality, efficiency and safety of e-prescribing within the CHCs.

In Arizona, CHCs provide health care services to low income and minority populations, especially in rural and medically underserved areas. The majority of CHCs operate one or two central facilities that are linked to satellite health clinics and are typically distributed over urban and remote geographic areas.

Like most contemporary health care organizations, CHCs recognize the value of e-prescribing, but of the six CHC study participants, only one has implemented it. E-prescribing eliminates interpretation errors caused by poor handwriting, improves provider efficiency, reduces pharmacist inquiries for clarification and leads to an overall improvement in patient safety and health outcomes. Despite the availability of free and low cost e-prescribing software applications, the adoption of this emerging technology by CHCs has been slow.

The project team will evaluate the structure and process characteristics of health care delivery within six CHCs that may result in improvement in health outcomes. This three-year project has four specific aims.

- Support the implementation of e-prescribing in CHCs and pharmacy systems in medically underserved areas. The project team will help CHCs identify barriers and provide solutions, including technical assistance. AzHeC will serve as a resource to CHCs in the implementation process. Surescripts, an e-prescribing transaction clearinghouse and AHCCCS, will provide data to accurately measure and monitor the e-prescriptions written by providers at each CHC. The evaluation will examine perceptions of efficiency for refill requests and changes in provider attitudes toward e-prescribing over time.
- Assess the effect of e-prescribing on the quality of care within the CHCs. Observations at the CHC pharmacies will evaluate the incidence and nature of prescriber-generated medication problems of e-prescriptions compared to conventionally delivered prescriptions. Other quality metrics to be evaluated include the incidence of duplicate therapy, medication adherence and persistence to essential medications.
- Evaluate the effect of adding diagnostic information to e-prescription orders that are reviewed and dispensed by CHC pharmacists. Observers will measure the incidence of problematic prescription orders for e-prescription orders with and without corollary patient diagnosis information.
- Develop and disseminate e-prescribing best practices to health care providers in AZ and nationally. AzHeC will make project information and results available on their website and will produce a series of educational outreach programs.

Business Opportunities
AzHeC has several avenues for generating both business and revenue beyond grant funding:

- Summits are tremendously successful as they simultaneously expand AzHeC's mission and make money. To-date, annual revenues are as follows:
  - 2007: $39,177.37
  - 2008: $46,399.17
  - 2009: $126,334.99
  - 2010: $200,000 (projected)
- AzHeC submitted a successful proposal to Noridian Administrative Services (Arizona Medicare administrative company) to perform beneficiary outreach for the Medicare PHR Choice pilot program. The agreement between AzHeC and Noridian is enclosed as Appendix E.

- As an extension to the State of Arizona two-year contract with HISPC, AzHeC was awarded funds for provider outreach for work conducted from April to July 2009. Total funds awarded were $4,320.

VI. Staffing, Operations & Travel

As part of its agreement with AHCCCS, AzHeC secured staff, office space, supplies and other resources (including travel) necessary to support its mission and to provide support services.

Staff

Between July 2007 and June 2009, AzHeC hired an Executive Director, Associate Director and Communications and Marketing Manager, more specifically described below.

Executive Director: Brad Tritle, CIPP
Brad Tritle was selected by a cross section of Arizona health care leaders to serve as AzHeC's first executive director in August of 2007. Prior to AzHeC, Tritle's career has been a unique blend of community leadership at the nexus of technology and economic development, combined with actual technology development and marketing efforts for both the private and public sectors.

Mr. Tritle has led private companies in technology development and business development - ranging from LCD projection to telecommunications networks and software applications. This experiences ranges from serving as president of an Arizona startup firm to running specific technology and business development efforts for both U.S. and Japanese firms. He has also worked twice in the office of the Arizona State CIO - first leading Arizona's broadband policy efforts and secondly on HIE and HIT and state web portal initiatives.

In the 1990's, much of Mr. Tritle's career was focused on international activity, ranging from promotion of Arizona products for export to Asia, to developing and managing international partnerships and projects and marketing Arizona as a location for foreign direct investment – successfully attracting projects worth hundreds of millions of dollars, which subsequently employed hundreds of Arizonans.

Mr. Tritle holds a Bachelor of Arts with Honors in Asian Languages and an Asian Studies Certificate from Arizona State University. He is one of fourteen Certified Information Privacy Professionals in Arizona, a certification awarded by the International Association of Privacy Professionals.

Duties and Responsibilities
- Leads work to conceptualize, develop and implement projects and initiatives that promote, support and synthesize the work of HIT and HIE regarding related topics and strategies. Designs and manages activities to link HIE partners to their colleagues in the field and to policymakers. Identifies innovative activities and thinkers in the field. Initiates and develops new ideas to expedite implementation strategies. Oversees the development and implementation of a strategic plan for the organization.
- Integrally involved in development and direction of communications, development, strategic planning, budgeting and other aspects of organization management. Staffs Executive Committee and Board of Directors.
- Develops and implements a sustainable business plan to support the core and collaborative work of AzHeC, subject to approval by the Board of Directors. Develops a budget to provide the financial capacity to sustain the work of the organization, subject to approval by the Board of Directors. Operates office initially as sole employee and selects, hires and manages a small staff as budget permits, in consultation with Board of Directors.

- Plays a central role in identifying and initiating programmatic priorities. Defines scope and develops strategic plan of action for major areas of work, including new ventures, as well as for specific programs and products. Responsible for day-to-day management of major projects. Oversees the development and maintenance of a statewide HIE/HIT Resource Center.
- Actively pursues opportunities to speak and write articles about HIE and AzHeC activities. Writes reports, newsletter articles and other pieces to communicate about the work of AzHeC. Responds to press inquiries. Conceptualizes and develops long-range strategies for sharing information on health issues, policy developments and best practices with both HIE partners and policymakers.
- Plays a lead role in representing AzHeC at public functions and maintaining relations with HIE/HIT partners. Works with other organizations in the health, policy and philanthropic communities on collaborative projects of interest. Acts as liaison to government staff and the research and policy communities.
- Identifies and cultivates new sources of support for AzHeC activities. Works with the Board of Directors to develop and implement the organization's broader fundraising strategies.
- Responsible to the AzHeC Board of Directors. Consults with and directs the activities of staff and contracted specialists.

Associate Director: Melissa Rutala, MPH

Melissa Rutala joined AzHeC as Associate Director in November 2007, after having served as both a Consultant and Health Policy Analyst at the Deloitte Center for Health Solutions and Deloitte Consulting, LLP in Washington, D.C. While at Deloitte, Ms. Rutala worked extensively on several Medicaid, price transparency and cost-saving initiatives with organizations to include the U.S. Department of Health and Human Services, the National Governors Association and the Wisconsin Medicaid Program. She was a contributor and interviewer for the Deloitte Center for Health Solution's publication Health Care Price Transparency: A Strategic Perspective for State Government Leaders.

Prior to her work with Deloitte, Ms. Rutala was Associate Director of Programs - Medicine Programs - at Envision EMI. At Envision, Ms. Rutala organized forums on Medicine and Nursing for 8500 high school students. Her activities included managing sixteen faculty advisors, recruiting 250 temporary staff, researching and developing curriculum and organizing and managing expenditures.

Ms. Rutala gained additional experience in both training and curriculum development while at Envision, as well as coordination of the review of medical residency training programs for UNC Hospitals in Chapel Hill, North Carolina.

Ms. Rutala holds a Masters in Public Health from George Washington University with a concentration in health policy and a Bachelor of Arts from the University of North Carolina, Chapel Hill.

Duties and Responsibilities

- Manages and executes all activities in preparation for the annual Summit, including, but not limited to, speaker confirmation and coordination, marketing, event registration, sponsor and exhibitor confirmation and coordination, coordination of volunteer pre-event and during event.
- Manages miscellaneous projects as assigned by the executive director. One example of such is management of EAzRx, the statewide e-prescribing initiative.

- Coordinates organization's committees, including scheduling of meetings, distribution of agenda and related documents prior to meeting, recording and distribution of meeting minutes and other related activities as assigned.
- Assists executive director with all logistics regarding Board of Directors and Executive Committee. Includes, but is not limited to, assisting with agenda preparation, meeting minutes, related documentation and meeting scheduling.
- Handles all human resources and general office management activities. Includes, but is not limited to, employee benefits management, office furniture and supply acquisition and coordination and payroll administration coordination with external payroll vendor.
- In absence of Communications and Marketing Manager, responsible for website development and go live, website upkeep, creation and coordination of weblog, creation and dissemination of organizational marketing collateral, etc.
- Presents on various HIT topics at local, regional, state and national conferences, when topic related to specialty or when executive director unavailable.

Communications & Marketing Manager: Brenda Bryan, MA
Ms. Bryan has well over 10 years experience in communications, including seven years in the health arena. Prior to joining AzHeC in October 2009, Ms. Bryan served as a communications consultant to the North American Quitline Consortium, a membership-based organization comprised of publicly-funded tobacco cessation quitlines in North America. Prior positions include communications director, Diversity Wellness; director, Coalition for a Tobacco Free Arizona; and communications director, Valley of the Sun United Way.

Ms. Bryan holds a Bachelor of Arts in mass communication from Anderson University and a Masters in Administration with a health sciences concentration from Northern Arizona University.

Duties and Responsibilities

- The Communications and Marketing Manager is responsible for planning, organizing and executing the Communications/Public Relations Program, including communications support for multiple HIT initiatives.
- Supports Executive Director and Associate Director on major projects as they relate to meetings and communications utilizing appropriate project documentation, tracking and measurement tools.
- Gathers and processes industry related information from a variety of sources including national experts, news stories, magazines and journal articles, special studies, governmental reports, industry studies, etc.
- Working with the Executive Director, the manager coordinates the production and production scheduling of newsletters, magazine, conference brochures and related collaterals.
- Develops and writes original articles of interest both independently and in concert with the Executive Director and members of the Board, as requested.
- Proactively develops systems to contact and submit newsworthy articles and items of interest to the press, trade publications and industry contacts.
- Prepares marketing, news and related materials for trade conferences.
- Assists senior leadership with various presentations to key internal and external audiences.
- Assists senior leadership with planning and execution of events, such as presentations, community forums and annual conference, including management of events, as necessary.

- Creates and executes email campaigns and website promotion.
- Manages and maintains AzHeC website, including ongoing review and updating of content, as well as creation of new content.
- Manages and expands existing weblog (blog) program, including recruitment and management of blog authors.
- Determines scope, priority and deadline for projects including assisting budget and tracking use.
- Manages and expands Speakers Bureau.
- Performs other related duties as assigned.

Operations

For more information on how AzHeC utilized funds from AHCCCS to support its operations, please refer to Section X: Budget.

Out-of-State Travel

In support of much of the work under this grant, AzHeC staff conducted travel out-of-state for networking purposes, to present at various national conferences and meetings and attend conferences and meetings to gather important information relevant to HIT in Arizona. Please see the budget located in Section X for detailed costs on out-of-state travel.

Date	Event & Location	Reason for Travel	Attendee
October 2007	eHealth Initiative Annual Meeting, Washington, DC	Attended conference	Brad Tritle
November 2007	HISPC and State Level HIE Meetings, Washington, DC	Presented at both meetings	Brad Tritle
November 2007	Council of State Governments Conference, Oklahoma City, OK	Presented and received Innovations Award	Brad Tritle
December 2007	DHHS Region VII and Colorado HIT Roundtable, Denver, CO	Presented	Brad Tritle
January 2008	Site Visit to MedVirginia - SAHIE Vendor Finalist Wellogic, Richmond, VA	Reviewed SAHIE vendor finalist	Brad Tritle
February 2008	HIMSS Annual Conference, Orlando, FL	Attended conference	Brad Tritle and Melissa Rutala
July 2008	Council of State Governments Conference, Anchorage, AK	Presented	Brad Tritle
September 2008	IAPP Privacy Academy, Orlando, FL	Attended conference, privacy training, and obtained CIPP certification	Brad Tritle
October 2008	CMS National E-Prescribing Conference, Boston, MA	Attended and co-sponsored conference	Brad Tritle and Melissa Rutala
October 2008	California Privacy and Security Advisory Board and CMS Meeting, San	Met with CMS Region IX director and	Brad Tritle

	Francisco, CA and Sacramento, CA	attended conference	
November 2008	Healthcare IT Innovation Summit, Ohio State University, Columbus, OH	Attended conference	Brad Tritle
November 2008	State Level HIE Forum, Chicago, IL	Attended meeting	Melissa Rutala
December 2008	eHealth Initiative Annual Conference, Washington, DC	Attended conference	Brad Tritle and Melissa Rutala
March 2009	HISPC Conference, Bethesda, MD	Attended conference	Brad Tritle
April 2009	HIMSS Annual Conference, Chicago, IL	Attended conference	Brad Tritle, Melissa Rutala and Bronwyn Joplin

VII. Coordination with AHCCCS

AzHeC met with AHCCCS project staff, as well as GITA health IT staff on a regular basis from fall 2007 to summer 2009. These weekly meetings identified the priority for projects, specific products, timetables, proposed membership for designated working groups and status report requirements.

Model HIE Participation Agreement
AzHeC, in conjunction with Coppersmith Gordon Schermer & Brockelman PLC, prepared a Model HIE Participation Agreement as a guide to organizations considering HIE arrangements. This agreement, adopted by AHCCCS/AMIE as well as other HIOs such as SAHIE, was developed through convening stakeholders and negotiating the terms and conditions of the agreement. Written for use with data suppliers and health care providers, it outlines terms and conditions of participation, including:

- Definitions
- HIE obligations
- Health care provider obligations
- System operations
- Data provider obligations
- Compliance with laws; confidentiality
- Fees and payment
- Proprietary information
- Software license
- Electronic signatures
- Term and termination
- Limited warranties and disclaimers
- Limitation of liability; indemnification
- General provisions

Additionally, activities featured under Section IV: Requirements & Technical Assistance also served to provide coordination with AHCCCS, including occasional invitations to participate in the AHCCCS HIEeHR Project Steering Committee Meetings.

Lastly, around the areas of privacy and security, AzHeC in collaboration with Coppersmith Schermer & Brockelman PLC, reviewed the draft AHCCCS HIE security policy and provided feedback through the stakeholder consensus group that was assembled. AzHeC worked with AHCCCS to facilitate the development of security standards and policies needed for the AHCCCS Transformation Project Phase I launch in fall 2008. AzHeC coordinated constituent input for the development of these initial standards and policies to assist AHCCCS in adopting necessary standards and policies. As part of this process, AzHeC's Clinical/Technical Committee, described in Section I, served as a primary forum for identifying recommended security standards and policies for the AHCCCS Phase I project.

AzHeC and its Legal Committee also worked with the HIT e-health community to develop recommended security standards for HIT and HIE. This work included participation as a leader in Phase III of the HISPC project in 2008-2009. AzHeC worked with national and regional efforts to establish recommended

security standards and policies that maximized local, regional and national interoperability between electronic health information systems. A document outlining these policies is enclosed in Appendix A.

VIII. Communications & Outreach Plan

In 2009, AzHeC hired a communications consultant, Andrea Smiley, to develop a Strategic Communications Plan, presented in Appendix F. It was written with the goal of retaining support and garnering new interest and participation from those who do not yet subscribe to the promise of HIT. To support AzHeC's mission, this plan outlined the process to:

- Effectively define and communicate HIE and HIT to key publics to build confidence and support of this new direction in health care data collection, delivery and portability by reaching all identified key publics at least six times in the next six months with two-way symmetrical communications and public relations.
- Establish AzHeC as THE source in Arizona for credible, trustworthy and accurate information and discussion about HIE and HIT with all identified key publics by end of 2008 through effective branding efforts via two-way symmetrical communications, public relations and new media.
- Identify, build, nurture and retain a cadre of health care community leaders who will act as an echo chamber of support for AzHeC as well as HIT and HIE, in general, with peers, decision-makers, media and other leaders whose influence can help the organization achieve its organizational mission and goals.

IX. Website Development

AzHeC developed its website, www.azhec.org, launched in May 2007 with the objective of providing information and education relative to:

- HIE
- EHRs
- E-prescribing
- PHRs
- Privacy and security
- Arizona-specific information, to include descriptions and links to the AHCCCS HIeHR project and other Arizona projects

The website is used in conjunction with annual statewide educational Summits and ongoing educational sessions and is accessed by clinicians, consumers and other stakeholders. Screen shots of primary and secondary pages are located in Appendix G.

AzHeC worked with two primary vendors to complete this project. The Chatfield Group served as main developers for the website and E.B. Lane Interactive developed the creative structure and content for the website. Additionally, AzHeC contracted with an independent consultant, Byron Davies, who reviewed hundreds of EHR and e-prescribing docs to select the most accurate, credible and useful resources for the website. Since its development, AzHeC has continued to develop, refine and expand its website through the built-in content management system.

X. Budget

AzHeC, working with the funds granted by AHCCCS, spent a total of $872,660.40 as detailed below:

Category	Amount
Office Rent, Phone, Internet	$19,437.28
Travel (mileage reimbursement, in-state and out-of-state travel)	$33,906.36
Staffing (wages)	$395,028.27
Staffing (ERE)	$106,657.63
Legal	$70,384.83
Consulting	$145,593.34
Technology (website, web hosting, blog, office equipment, etc.)	$101,652.69
*TOTAL expenditures:	$872,660.40
Revenue from Non-AHCCCS Sources	$172,660.40
Revenue from AHCCCS	$700,000.00

*Other AzHeC revenue was generated to cover expenses above and beyond the $700,000 provided to AzHeC as part of the Medicaid Transformation Grant.

Conclusion

Through the funding provided by AHCCCS under the Medicaid Transformation Grant, AzHeC has been able to successfully convene Arizona health care leadership around the subject of HIT and HIE. To date, no other subject or organization has united these stakeholders in this way.

The initial funding from AHCCCS provided a foundation and allowed for the evolution of a business plan for sustaining this statewide collaborative activity beyond the receipt of AHCCCS funding. Currently, AzHeC's business plan includes membership, summit revenues and other grants and contract revenue. AzHeC has been asked to continue state leadership in the area of HIE planning and implementation and is currently able to maintain momentum, staff and collaboration through these additional funding sources.

AzHeC has been successful, through these grant monies, in achieving great strides in statewide HIE and HIT awareness and education, policy development, standards education and identification and, especially, in providing a forum for the continuing collaboration of multiple, often competing parties on HIE and EHR adoption.

AzHeC looks forward to continuing its close work with AHCCCS as both entities carry out their associated missions. With the passage of the American Recovery and Reinvestment Act of 2009, there are many opportunities to leverage the foundational work accomplished under this grant to achieve the desires of U.S. and Arizona health care stakeholders to achieve better quality care and financial efficiencies through HIT.