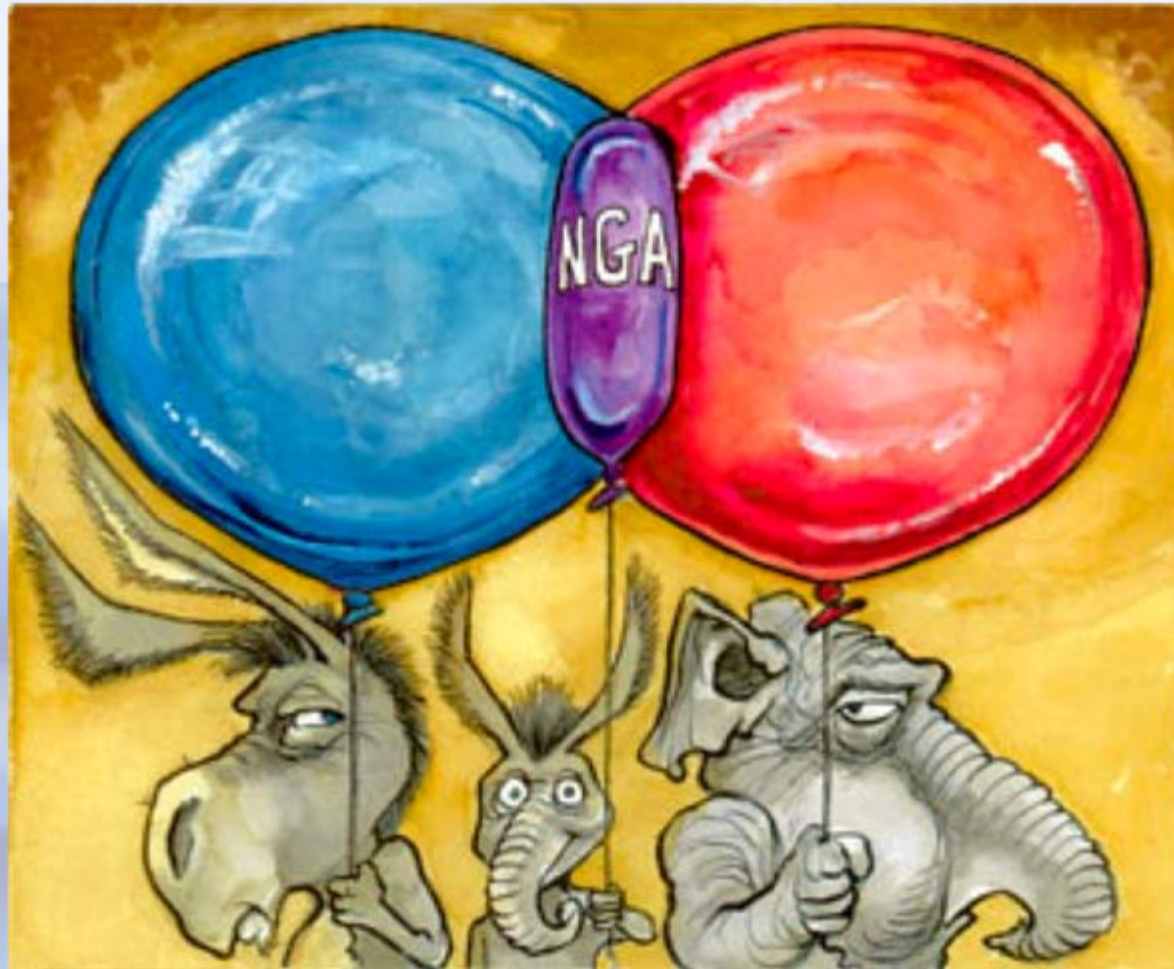


Health IT Policy and The States

The HIT Symposium at Massachusetts Institute of Technology
Marriott Boston Cambridge
Ree Sailors
NGA, Center for Best Practices
July 2, 2009

National Governors Association



The Economist, March 2006



NGA Center for
BEST PRACTICES

Why a State Alliance for e-Health?

❖ Relevant state roles for HIT adoption

- Regulate the insurance market
- License and oversee health professionals and facilities
- Purchase and fund health care services and coverage under Medicaid and other programs
- Provide legal protections for consumers and others
- Set the regulatory and legal environment on health record privacy and other relevant issues
- Provide direct funding for public good

❖ States are experienced in reform

- They are practically focused
- Experiences in interstate coordination
- Very interested and actively engaged on health issues

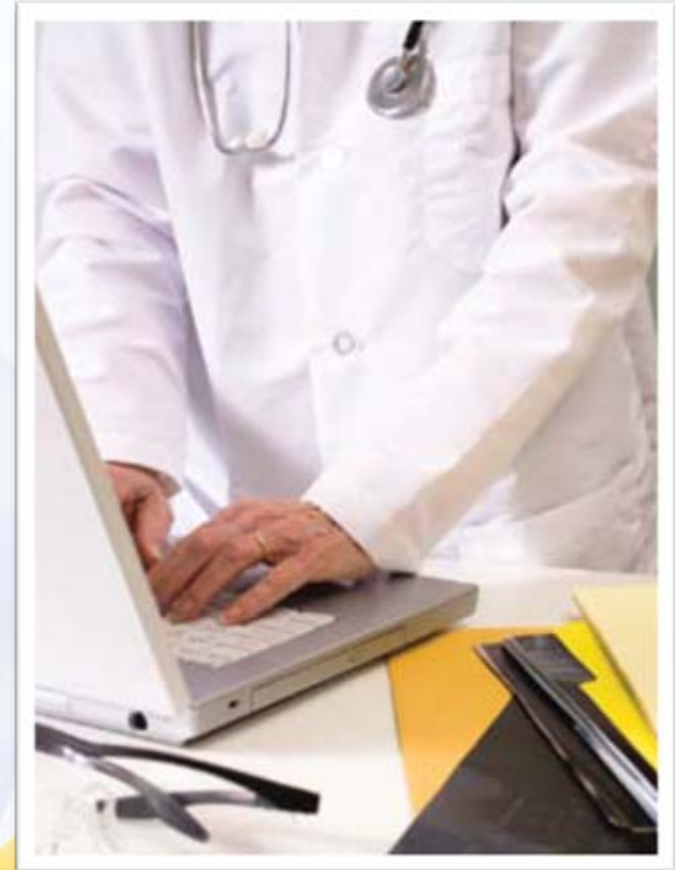
Membership

❖ Voting Members- (13)

- Governor Phil Bredesen, TN (Co-Chair)
- Governor Jim Douglas, VT (Co-Chair)
- 2 Attorneys General
- 2 State Insurance Commissioners
- 4 State Legislators
- 2 Former Governors
- 1 State Health Official

❖ Advisory members (7)

- State health policymakers
- Relevant private sector members
- Technical experts



Recommendations for Advancing e-Health in States

Provide leadership and political support for e-health efforts

Promote the use of standards-based technology

Engage consumers to use HIT in managing their health

Address privacy and security

Streamline the licensure process to enable cross-state e-health

Develop workforce and agency capacity



Overall State Role No Matter What – Ongoing Oversight & Assurances

- Ensuring the privacy and security of citizens' electronic health information no matter what entity or entities operate the exchange, and
- Assuring providers, patients, and insurers that health information exchanges will operate in a sustainable, dependable, and efficient manner through fair and equitable charges placed on participants.



Roles for the States post HITECH

- Preparing or updating the state roadmap for HIE adoption;
- Engaging stakeholders;
- Establishing a state leadership office;
- Preparing state agencies to participate;
- Implementing privacy strategies and reforms;
- Determining the HIE business model;
- Creating a communications strategy; and
- Establishing opportunities for health IT training and education

Challenging Politics

- Brokering of already deployed assets
- Moving from pockets to statewide and beyond
- Consensus vs. Direct Intervention
- Mergers and Acquisitions

Preparing or Updating the State's Roadmap for HIE Adoption

- State Plans are specifically mentioned in HITECH
- Growing from pockets of activity to whole state and interstate
- Many states with plans already were pre-HITECH
- First formal submissions to Federal government
- Governors accountable for ARRA spending

Engaging Stakeholders

- Role familiar to states
- Often only entity that can pull everyone together (anti-trust issues for some)
- Both convener and participant
- Stakeholders both within and outside of government
- Maintaining the “public good” in the

Establishing a State Leadership Office

- Coordination within government
- Coordination with private sector
- Coordination with other HITECH & ARRA areas: broadband, Tribes, Community Health Centers, School-based Health Centers
- Endorsement and Oversight of State Designated Entities
- Integration with Larger Health Care Reform Efforts



Preparing State Agencies to Participate

- Medicaid Agency
 - Meaningful Use
 - Eligibility for incentive payments and adoption reimbursements
- Public Health
 - Disease surveillance
 - Emergency Preparedness
 - Population Health
- Possible role in Loan Program



Implementing Privacy Strategies and Reforms

- Ensuring the privacy and security of citizens' electronic health information no matter what entity or entities operate the exchange(s)
- Building public trust and confidence
- Tackling issues related to interstate transfers of health information
- Training for new State AG responsibilities related to enforcement of HIPAA provisions

Determining an HIE Operational & Business Model

- Transitions and Modifications
- Government-led electronic health information exchange,
- Electronic HIE as a public utility with strong state oversight, and
- Private Sector-Led Electronic HIE with Government Collaboration

Creating a Communications Strategy

- Consumers
 - Host town-hall meetings, webcasts, and other forums – seek input
 - Develop culturally and linguistically targeted materials
 - Tailor materials for special populations i.e., foster care, mental health, and special needs
 - Encourage and support the use of technologies—such as e-prescribing and PHRs—that build public experience in using EHRs.
- Providers
 - Privacy and security
 - How health IT and HIE will improve their practice and offer benefits

Establishing Opportunities for Health IT Training & Education

- Physicians, clinics, nurses, hospitals, and office managers must have guidance in reengineering workflow to ensure ongoing use and exchange
- Encourage educational institutions, particularly their community college system, and nonprofit groups to coordinate with the regional extension center program
- Ensure complete access to both rural and urban providers
- Incorporate training into statewide plans

Questions?

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