



HITSAC

HIT/MITA Program Activities – Update

December 15, 2011



Agenda

- HIT/MITA PMO
- Work In Progress
- MITA Care Management business area
- MITA Member Management business area
- Provider Incentive Program
- Wrap-up



HIT/MITA PMO

- Procurement of Project Office services
 - CACI awarded contract



HIT/MITA PMO

Initiatives

- Data sharing committee
 - Draft report prepared
 - Committee meeting held on 12/13/11
- HHR IT Strategic Planning committee
 - Rollout of plan in discussion



Work in Progress

Technical Infrastructure

- VITA leading effort
- Two chartered projects
 - SOA Enterprise
 - Enterprise Data Management (EDM)
 - Person standards
 - Organization standards
- Projects in planning phase
- Currently lacking contracts to finalize requirements
 - IBM technical staff



Work in Progress

Commonwealth Authentication Service

- DMV leading effort
- Integrated with Enterprise Data Management product
- Currently lacking contracts to finalize requirements
 - IBM technical staff
- Project suspended until:
 - IBM Technical Staff available
 - EDM development environment available



MITA Care Management

Overview

- Three conference calls held with CMS on cost allocation
 - Funding document needs to better separate HIT projects from Eligibility and Enrollment (E&E) projects.
 - HIT must be cost allocated – Federal share lower
 - E&E comes under the Federal cost allocation waiver
- Primary area for HITSAC attention



MITA Care Management

Project list

Service/interface	Description
HIT funding: Rhapsody Connectivity (RC)	DCLS and VDH use Rhapsody products to manage their IT development, test, and production environments. This project will establish connectivity between Rhapsody at DCLS and VDH and the VITA enterprise environment, to allow for interoperability between DCLS, VDH and Commonwealth IT systems.
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.
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.
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.



MITA Member Management

- MITA Member Management
 - Phase I
 - No member management projects
 - Phase II
 - Replacement of the eligibility systems with the government-owned Michigan transfer system
 - Budget package submitted
 - Effort to prepare RFP has started



Provider Incentive Program

- Administrative contract
 - Awarded to CGI
 - Contract sent to CMS for approval
- VHIT REC sole-source contract
 - Document is in CMS clearance process (results in approval letter being sent)
- Implementation activities begin once contracts executed
- Program launch targeted for May 2012



Wrap-up

- Questions?