



Meeting Minutes

Project: Alaska Infrastructure Technology Plan

Workgroup Session 3

Stakeholder Workgroup 09/19/2017 9:00 am-12:00 pm AKST Conference Line: 1-907-269-3000; Code: 802 719 699

Name	Organization	Attendee
Erin Aklestad	Alaska eHealth Network (AeHN)	IP
Jessica Oswald	Providence Hospital	IP
Mike Hirst	Southcentral Foundation	Т
	Alaska State Hospital and Nursing Home	
Connie Beemer	Association (ASHNHA)	IP
Nancy Merriman	Alaska Primary Care Association (APCA)	IP
Kevin Munson	Mat-Su Behavioral Health	IP
Chad Jensen	LaTouche Pediatrics	IP
Rick Driscoll	REACH, Inc.	
Joe Furrer	GCI	
Dave Branding, PH.D.	Juneau Alliance for Mental Health	IP
Joyce Douglas	DHSS - FMS-IT	IP
Simon Taylor	DHSS - FMS-IT	Т
Shaun Wilhelm	DHSS - DBH	IP
Ulf Petersen	DHSS -SDS	
Dana Penner	DHSS - OCS	IP
Margaret Brodie	DHSS - HCS	IP
Heidi Lengdorfer	DHSS - DPH	IP
Heidi Wailand	Alaska Mental Health Trust Authority	Р
Natasha Pineda	DOA	Т
Deb Erickson	DHSS – Commissioner's Office	
Stewart Ferguson	Alaska Native Tribal Health Consortium (ANTHC)	А

IP=In-Person; A=Absent; T=Telephone

Meeting Highlights/Topics:

- Telemedicine/Tele-monitoring
- Registries
- Care Management

Identified Barriers

- Bandwidth speed and cost to citizens
- Number of assessment tools, length of assessment questionnaires, and limited ability to share meaningful data between entities
- Data validity issues and lack of standards in data
- Limited tools to monitor care plan adherence



Identified Use Cases



1. Care Management:

- Desire for a single reporting tool for eCQMs
- Potential to map various assessment/screening tools data elements, or domains to a state level central repository which will improve the access and ability to share data across providers and programs
- Discussion for the potential introduction and utilization of a single state level screening tool and care management module
- State currently moving towards an online interRAI Assessment Tool for Long Term Care Services and Supports (LTSS)
- Tools should be automated and all for stored data to be utilized for predictive and data anayltic modelings
- ADT alerts received in near real time, via associated providers through their EHR
- Data collected via state level repositiory supports clinical level dash boards with relevant information to identify gaps in care and support expedited improvement for patient care

2. Registries:

- Automation of EHRs, the HIE, and Claims data to feed registries
- State level consent registry established

3. Telehealth or telemonitoring:

- State level infrastructure established to support telemedice
- Desire to utilize a PHR to enable self reporting by patients. A PHR is currently available in the HIE.
- Provides are interested in or starting remote monitoring programs to monitor patient vitals and screen patients. There are data governance issues to resolve to identify which data becomes part of the legal patient record to avoid over crowding of meaningless data and to encourage provider participation

Identified Gaps & Concerns

- 1. Telehealth: Speed of bandwidth, cost of connectivity to individuals' home and small practices, software is device agnostic and may not be user friendly
- 2. Telehealth infrastructure which is fully HIPPA compliant
- 3. Telehealth technical support for users both at the physician's side and patient side
- 4. Remote monitoring collects far more data than physicians are comfortable adding as part of the legal patient record
- 5. The ability to tie assessment screenings to multiple family members, if appropriate, i.e. an assessment completed for one family member identifies a social determinate of health, that information populate across each household member identified as potentially impacted
- 6. Length of needs assessments hinder their usefulness; a streamlined compressed tool may prove more useful
- 7. Care management data is not standardized
- 8. Lack of data governance and data dictionary





- 9. MPI needs to be more accurate
- 10. EDIE tool planned for utilization in multiple hospitals, need path forward to support broader utilization

Action Items

Action Item	Assigned	Status	Capture Date	Requested by Due Date
Meeting Minutes	HTS	Completed	09/27/17	Prior to Next Workgroup
Development of Workgroup 4 Meeting Materials	HTS	In Progress	09/27/17	Prior to Workgroup 4