# Sustainability In a Time of Transition and Uncertainty

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# Topics

- Status of Current Operations

- Strategy for Sustainability

- Plan for Unexpected Events

- Predict the Future

# Topics

- **Status of Current Operations**

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# Minnesota Immunization Information Connection (MIIC)

- In operation since 2002

- One of the six sentinel sites funded for 2013-2017

- Annual operating budget approximately $2.4 million

- Staffing:
  - IIS manager
  - Assistant manager
  - Planner (vacant)
  - Research scientist
  - Seven technical staff
  - Central IT support
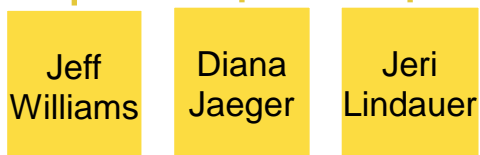  - HP Enterprise Services – software vendor

# MDH MIIC/IT Unit

*As of September 2013*

**Emily Emerson**
*MIIC Manager*
*IT Unit Supervisor*

- MIIC application project manager
- Oversee MIIC development, maintenance, and operations
- Oversee all MIIC grants, projects, and policies
- Supervise and direct the MIIC/IT Unit

## Application Developers

**Jeff Williams**
- Alternate access/Web Services
- Technical data exchange support
- Application developer

**Diana Jaeger**
- QA application
- Technical data exchange support
- Application developer

**Jeri Lindauer**
- Technical support for vaccine ordering in MIIC
- Application developer

## Data Quality Analysts/ Data Load Staff

**Steve Felton**
- Lead MIIC Help Desk
- IT support for metro providers
- Daily MIIC testing
- QA Support
- Ongoing QA

**Linda Luebchow**
- MIIC Help Desk
- IT support for multi-regional & outstate providers
- Vital loads
- WI data loads

**Aaron Bieringer**
- MIIC Help Desk
- IT support for multi-regional
- FluSafe IT Support
- Business analyst

## Planning Team

**Karen White**
- CDC Sentinel Site grant
- Adding vaccines to MIIC
- Ad-hoc queries

**Priya Rajamani**
- CDC EHR-IIS grant
- MN e-Health liaison (meaningful use)

**Erin Roche**
- Assistant MIIC Manager
- Strategic planning and work plan
- CDC Immunization grant
- Regional contracts

**Planner (VACANT)**
- Lead MIIC communications
- Quarterly monitoring reports
- Regional Invoice processing

## MDH MIIC Help Desk

- Secondary support for MIIC users
- User login help
- Problems with MIIC functions, reports not working
- Questions about functionality
- Requests for immunization histories from the public

health.miichelp@state.mn.us
800-657-3970 or 651-201-5503

MIIC

# MIIC 2013 Budget*

| | 2013* | | | | | |
|---|---|---|---|---|---|---|
| | 317* | Sentinel Site* | PPHF* | Medicaid** | OHIT/3013 | 2013 Total |
| Regional grants | $435,639.00 | $0.00 | $0.00 | $375,000.00 | $0.00 | $810,639.00 |
| HP Contract | $200,000.00 | $20,000.00 | $75,000.00 | $0.00 | $200,000 | $495,000.00 |
| Personnel | $341,251.00 | $81,012.00 | $283,126.00 | $0.00 | $0.00 | $705,389.00 |
| Fringe | $108,518.00 | $25,762.00 | $90,034.00 | $0.00 | $0.00 | $224,314.00 |
| Indirect | $93,118.00 | $37,675.00 | $73,334.00 | $0.00 | $5,950.00 | $210,077.00 |
| Total | $1,178,526.00 | $164,449.00 | $521,494.00 | $375,000.00 | $205,950.00 | $2,445,419.00 |

*Does not include travel, supplies, PC's, some smaller contracts
**Administered through Minnesota's Department of Human Services solely for regional registry grants

MIIC

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# Decrease reliance on vendor

- First, we truly appreciate and value our vendor staff from HP Enterprise Services

- If funding were no issue…if centralization of IT services had not happened…we would not be discussing this!

- However, as 2013 MIIC budget shows, vendor support is a significant part of budget
  - Fortunate in 2013 to have two additional sources of funding: PPHF grant for interoperability work and OHIT/3013 funds (support from e-Health office for interoperability/meaningful use work), both of which are projected to end soon

# Staff Development

- Transitioning development and on-going support of the IIS software to state staff

- State MIIC IT staff have contributed to vaccine ordering enhancements and some reports
  - Complex configuration
  - Some software/hardware outdated

- Web services support primarily by MIIC IT staff

- Servers have always been run by MDH central IT

- Requires training time

MIIC

# Staff Training

- Building HL7 message expertise in-house
  - Training: HL7 101 webinar
  - More staff to attend AIRA Standards and Interoperability Steering Committee meetings

- All IT staff very familiar or getting familiar with HL7
  - Could indicate level of expertise needed in position description

- Promoting participation in new projects/exploring ideas:
  - Web services support, DQA tool – new services all initiated and to be supported by MIIC IT staff
  - Delegated time for exploring ideas: Interoperability & Data Quality project (comparing flat files & HL7 as part of onboarding)

# Make the most of vendor $$$

- Strategic Planning 2012
  - Aligned with immunization program strategic planning
  - Identified areas for changes/enhancements
  - Prioritized enhancements
- Created work plan for 2014
- Establish Change Board
  - Reviews new changes
  - Approves changes to work plan
    - Change Board staff:
      - Immunization Program Manager
      - IIS Manager
      - IIS Assistant Manager
      - Outreach Supervisor (Adult/Adolescent)
      - Clinical Services Supervisor (VFC program, AFIX)

MIIC

# Increase Stature in State e-Health Landscape

- Southeast Minnesota Beacon Project

- Regional Extension Center

- MDH Office of Health Information Technology

- MDH Meaningful Use Work Group

- State Quality Reporting group

# Increase Visibility and Promote MIIC with Providers

- Continued support and promotion of an embedded view of MIIC within an EHR
  - Alternate Access
  - HL7 bi-directional exchange (Stage 3 Meaningful Use)

- Implement a MIIC Champion Program
  - Identified in our 2012 strategic planning

- Consumer access
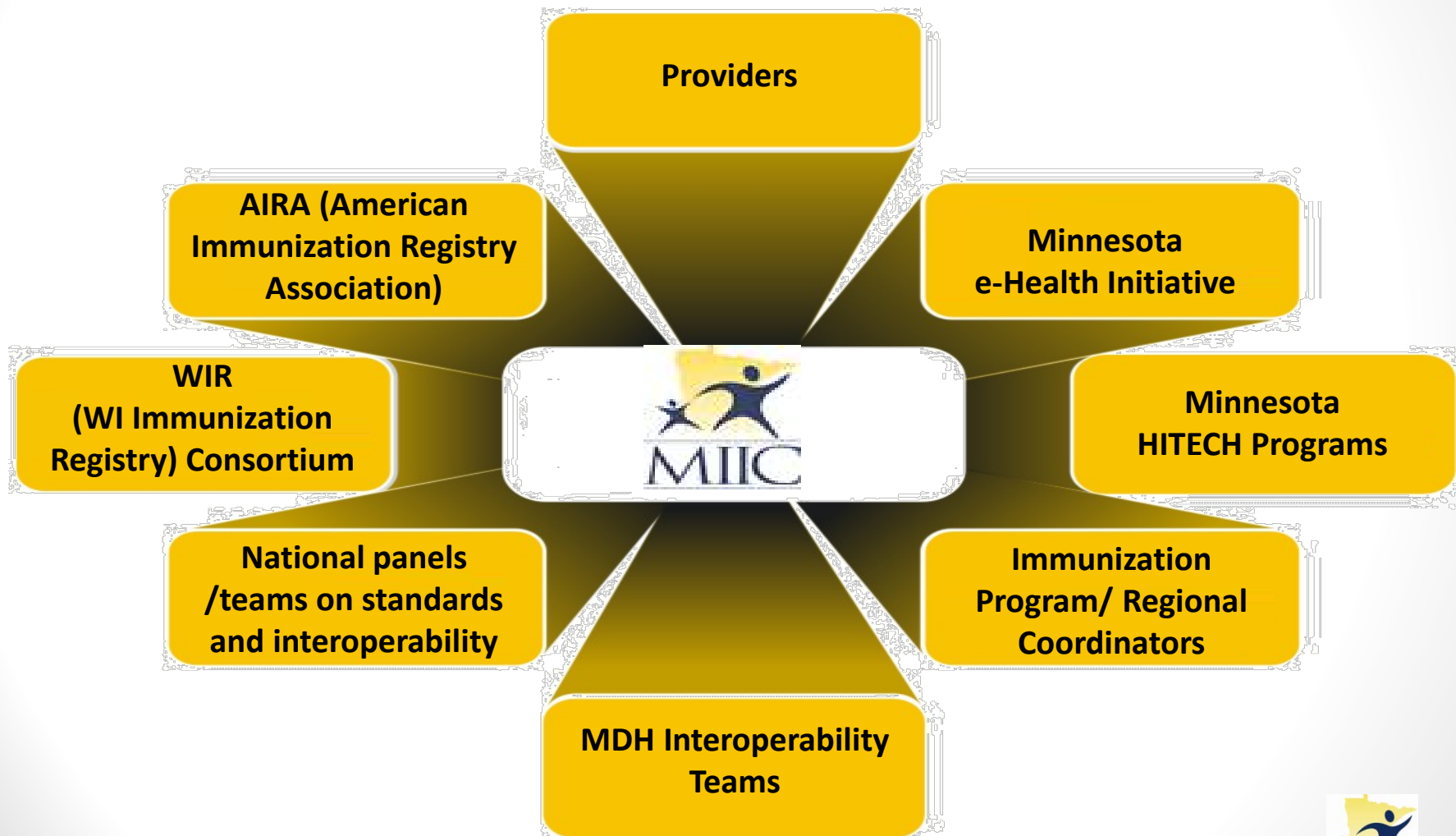  - Determine solution
  - Marketing to consumers

MIIC

# Increase Visibility and Promote MIIC with Providers
*Continued...*

- Promote MIIC as **the** immunization data resource for our state

- New reports
  - Adult assessment
  - Adult reminder/recall

- Conduct stakeholder meeting on bi-directional exchange
  - Confusion in state on what this means
  - IIS knows what it can do
  - Providers don't always know the EHR will need coding changes

# Partnerships/Collaborations

# Topics

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MIIC

# Plan for Unexpected Events

- Prepare for challenges to the current opt-out consent model
  - Minnesota has strict data practices laws with equally as paranoid citizens privacy groups

- Pharmacy legislation may require pharmacies/pharmacists to report to IIS

- IT Centralization
  - Security application scanning
    - Tool that looks for vulnerabilities in software
  - Technical standards
    - May dictate standards your IIS doesn't meet/have
  - May or may not embrace open source technologies

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- **Predict the Future**

# Predict the Future

- Re-think how users use the IIS data
  - Push reports from IIS to users
  - Focus on getting data to users in as easy a format as possible

- Eliminate or change little-used features or functions
  - Do more design/screen shots in-house
    - Let vendor focus on coding
    - This would entail building in-house analyst support
  - Monitor highly used reports

- School and child care immunization laws/reporting
  - Determine how IIS can best support

- Complete data will become a requirement
  - If all providers are submitting all shots, then LPH can focus efforts on pockets of need and high-risk areas

# Predict the Future
## *Continued….*

- Keep track of evolvement of meaningful use and interoperability requirements
  - Active involvement in national and local efforts/workgroups

- Evolving HIE landscape
  - Pulse on how HIE (Health Information Exchange) organizations are developing, the functionality gained by them and their market to gauge impact on IIS
  - Monitor role of IIS in the new landscape

- Continuous monitoring and evaluation
  - Be able to easily provide statistics and stories that highlight the value of your IIS

# For More Information

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