Sustainability In a Time of Transition and Uncertainty

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MIIC Program Manager/IT Unit Supervisor
MN.IT Services@ MN Department of Health

American Immunization Registry Association (AIRA) Conference
October 7, 2013
Topics

• Status of Current Operations

• Strategy for Sustainability

• Plan for Unexpected Events

• Predict the Future
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• Predict the Future
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
- Diana Jaeger
- Jeri Lindauer
- Steve Felton
- Linda Luebchow
- Aaron Bieringer
- Karen White
- Priya Rajamani
- Erin Roche
- Planner (VACANT)

Data Quality Analysts/Data Load Staff
- Steve Felton
- Linda Luebchow

Planning Team
- Karen White
- Priya Rajamani
- Erin Roche

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 2013 Budget*

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<tr>
<th></th>
<th>317*</th>
<th>Sentinel Site*</th>
<th>PPHF*</th>
<th>Medicaid**</th>
<th>OHIT/3013</th>
<th>2013 Total</th>
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<td>Regional grants</td>
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</table>

*Does not include travel, supplies, PC’s, some smaller contracts

**Administered through Minnesota’s Department of Human Services solely for regional registry grants
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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
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)
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
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
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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

• 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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