

Technology Committee Minutes 02-17-10

There was a general discussion on HIS, EMR, and meeting meaningful use
A gap analysis between HIS and meaningful use has been done with public health business processes identified. Analysis was done through South Central Partnership

HIS has numerous gaps that need to be completed in order to meet meaningful use

- Question is how we acquire the system components needed to complete a certified EMR?
- Net Smart is/are has developed additional add on modules for HIS that will close the gaps with HIS to meet meaningful use
- Committee believes the Association should work to identify means of making this happen.
- Will be asking Net Smart to attend meeting in March if Possible

Issues for health departments to consider who are looking at independently looking at purchasing an EMRs

1. No interface with HIS and independent EMR can occur. This will require double data entry at the health department.
2. Some EMR's may not meet meaningful use criteria and will need to be certified
3. There could be significant benefit in costs, maintenance, and support by pursuing group purchase possibility
4. HIS is a Netsmart product and interface, certification etc. should be easier process

Brief discussion among pilots. There have been significant improvements in the last 2-3 months although some reports are still pending. Tom Bridges emphasized that counties will need a dedicated FTE on HIS in the health departments.

Joy Reed

Need to carefully review the checklist that will be sent out. Connectivity at the local level has been a major concern

An IT checklist will be sent out to the first wave in advance of go live. It will be reviewed modified as needed and then sent out to all Health Departments

Joy emphasized that pilots are **not** to be seen as a resource for go live! They have dealt with being a pilot for a long time and cannot be expected to field calls from other health departments.

There will be a meeting with the vendor 4 weeks prior to go live for the first wave to review go/no go list. At that point a decision will be made to proceed or delay.

Joy believes the significant improvements seen in the system progress are a result of new leadership with the vendor

Sarah Brooks is coming back to lead the transition team

Due to issues with clinical functionality it is recommended that health departments not use that piece of HIS during go live, improvements to that component will be coming later.