

MN e-Health Initiative

Vision & Goals



The vision for the Minnesota e-Health Initiative is to improve healthcare quality, increase patient safety, reduce costs, and improve public health through the accelerated and effective use of health information technology. The Minnesota e-Health Initiative seeks to:

- **Empower consumers** by supporting the development and adoption of personal health records;
- **Inform and connect healthcare providers** by promoting the adoption and use of interoperable Electronic Health Records and electronic health information exchange;
- **Protect communities and improve public health** by advancing efforts to use information technology to improve our ability to rapidly detect threats to a community's health; and to
- **Modernize the infrastructure** by adopting universal standards for health information exchange; revising state statutes and organizational policies to ensure strong privacy and security protection of health information; ensuring adequate private and public funding; and assessing and monitoring progress.

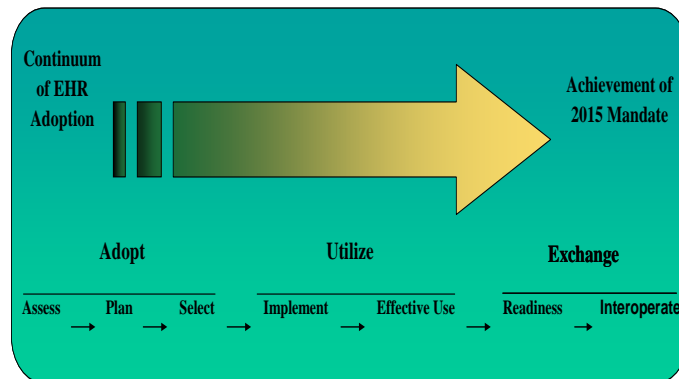
MN e-Health Advisory Committee

The Minnesota e-Health Initiative is a public-private collaborative guided by a 26-member Advisory Committee representing health care providers, payers, public health professionals, consumers and others.

Interoperable Electronic Health Record (EHR) Requirements by 2015

- Requirement for all hospitals and health care providers to have an interoperable electronic health records system in their hospital system or clinical practice setting by January 1, 2015.
- Requirement to develop a statewide plan to meet this goal, including uniform standards to be used for the interoperable system for sharing and synchronizing patient data across systems.
- The standards must be compatible with federal efforts [Minn. Stat. §62J.495].

Minnesota Model for Interoperable Electronic Health Records



The Minnesota Model from Minnesota's Statewide Implementation Plan of 2008 breaks achieving the 2015 mandate into manageable steps and applies across organizational settings.

Electronic Prescribing by 2011

- Effective January 1, 2011, all providers, group purchasers, prescribers, and dispensers must establish, maintain, and use an electronic prescription drug program. This program must comply with the applicable standards in this section for transmitting, directly or through an intermediary, prescriptions and prescription-related information using electronic media [Minn. Stat. §62J.497].

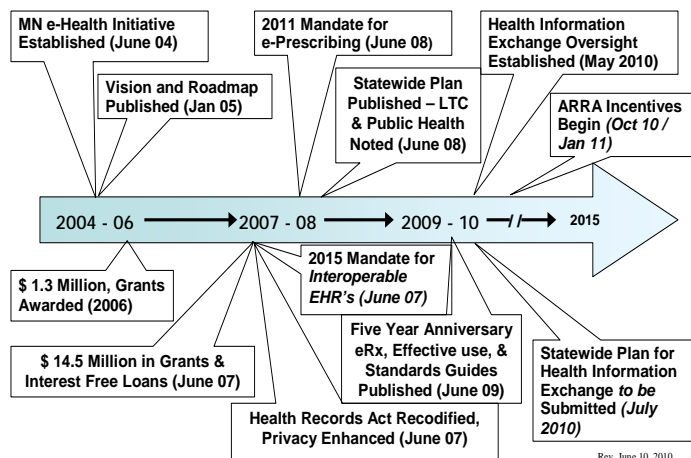
Other e-Health Requirements

- A revision and recodification of patient consent requirements that strengthen privacy and allow electronic information exchange [Minn. Stat. §§144.291-144.298].
- A requirement that amends the Health Care Administrative Simplification Act of 1994 (ASA) to require that all health care providers and group purchasers exchange health care administrative transactions electronically using standard data content and format by 2009 [Minn. Stat. §62J.536].
- The Health Information Exchange Oversight law which went into effect on July 1, 2010 establishes new certification requirements and state agency oversight for businesses conducting Health Information Exchange (HIE) in Minnesota law [Minn. Stat. §62J.498 – 62J.4982].

Progress to Date

Key Milestones

Minnesota e-Health Initiative 2004 - 2010



EHR Adoption Rate in Clinics

Percent of Clinics Adoption of EHRs (N=1121)	% (n)
EHR installed and in use by all/some areas of the clinic	67% (750)
Purchased/began installation of an EHR but not using	9% (101)
No EHR	24% (270)

Source: MDH, OHIT, 2010 MN HIT Ambulatory Care Clinic Survey

Collaborative MN Responses Submitted to Federal Agencies on ARRA-HITECH Regulatory Proposals

- Standards
- Privacy and Security
- Meaningful Use
- Health Information Exchange
- Quality Improvement and Reporting
- Regional Extension Centers
- Workforce and Training
- Population Health
- Research

Focus for 2010-2011

- Implement Strategic & Operational Plans for HIE
- Advise on implementation of federal ARRA-HITECH related programs in Minnesota
- Leverage meaningful use / federal resources to support the full range of stakeholders and settings in the Statewide Implementation Plan
- Provide input on national policy development on behalf of Minnesota stakeholders

- Encourage actions that support strong privacy and security practices
- Promote consumer focused information

MN e-Health Initiative Workgroups 2010-2011

- Adoption and Meaningful Use Workgroup
- Communications and Outreach Workgroup
- Health Information Exchange Workgroup
- Privacy, Legal and Policy Workgroup
- Standards and Interoperability Workgroup

Minnesota e-Health Resources

Minnesota Statewide Implementation Plan and Supplemental Guides

The Minnesota Statewide Implementation Plan: A Prescription for Meeting Minnesota's 2015 Interoperable Electronic Health Record Mandate.

<http://www.health.state.mn.us/e-health/ehrplan.html>

The Plan is designed to accelerate the adoption and effective use of interoperable EHRs, identify a model for achieving the 2015 mandate and provide links to planning and implementation tools

- [Guide 1: Addressing Common Barriers to EHR Adoption](#)
- [Guide 2: Standards Recommended to Achieve Interoperability in Minnesota](#)
- [Guide 3: A Practical Guide to E-Prescribing](#)
- [Guide 4: Effective use of EHRs](#)

Minnesota Strategic Plan for Health Information Exchange

provides Minnesota's strategic approach to enabling health information exchange with attention to five critical domains: governance, finance, legal/policy, technical infrastructure, and business and technical operations. <http://www.health.state.mn.us/e-health/hitech/ht070810hiesplan.pdf>

Minnesota Operational Plan for Health Information Exchange

provides Minnesota's approach to operationalize The Minnesota Strategic Plan for Health Information Exchange. <http://www.health.state.mn.us/e-health/hitech/ht071310hieoplan.pdf>

For more information

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