

Successful Private-Public Collaboration in e-Health

The Minnesota Immunization Information Connection

Minnesota e-Health Summit

June 23, 2005



Key Points

- The value of public health information systems in e-Health
- Purpose and benefits of the Minnesota Immunization Information Connection (MIIC)
- Future directions for MIIC as part of e-Health

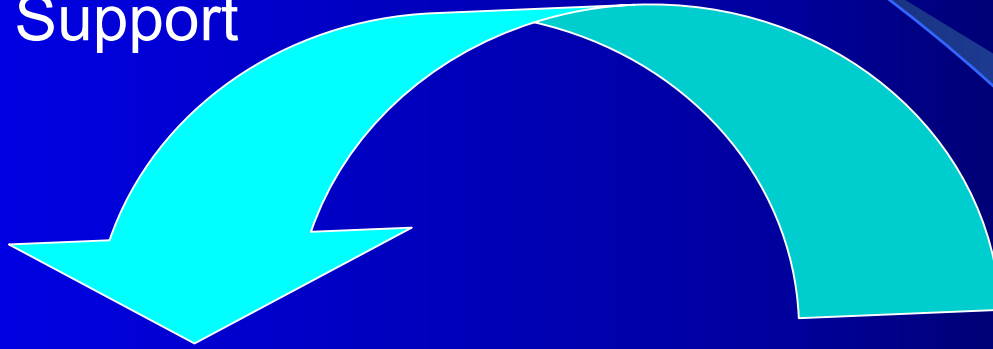


What does Public Health bring to the party?



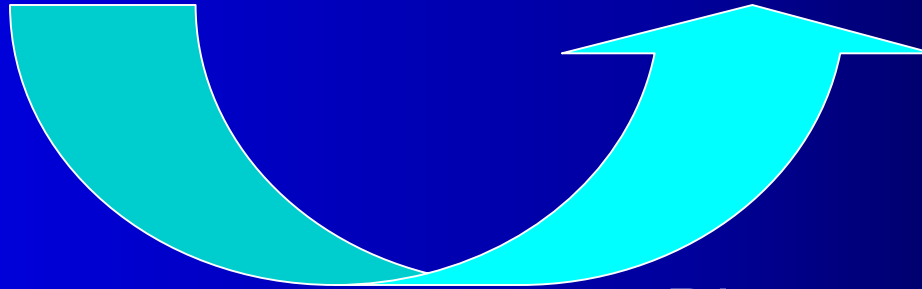
Public health in e-Health data exchange

Decision Support



Clinical Care

Public Health



Disease/event reporting

Minnesota Immunization Information System (MIIC)



Controlling vaccine-preventable diseases by consolidating immunization records and providing decision support to clinicians.



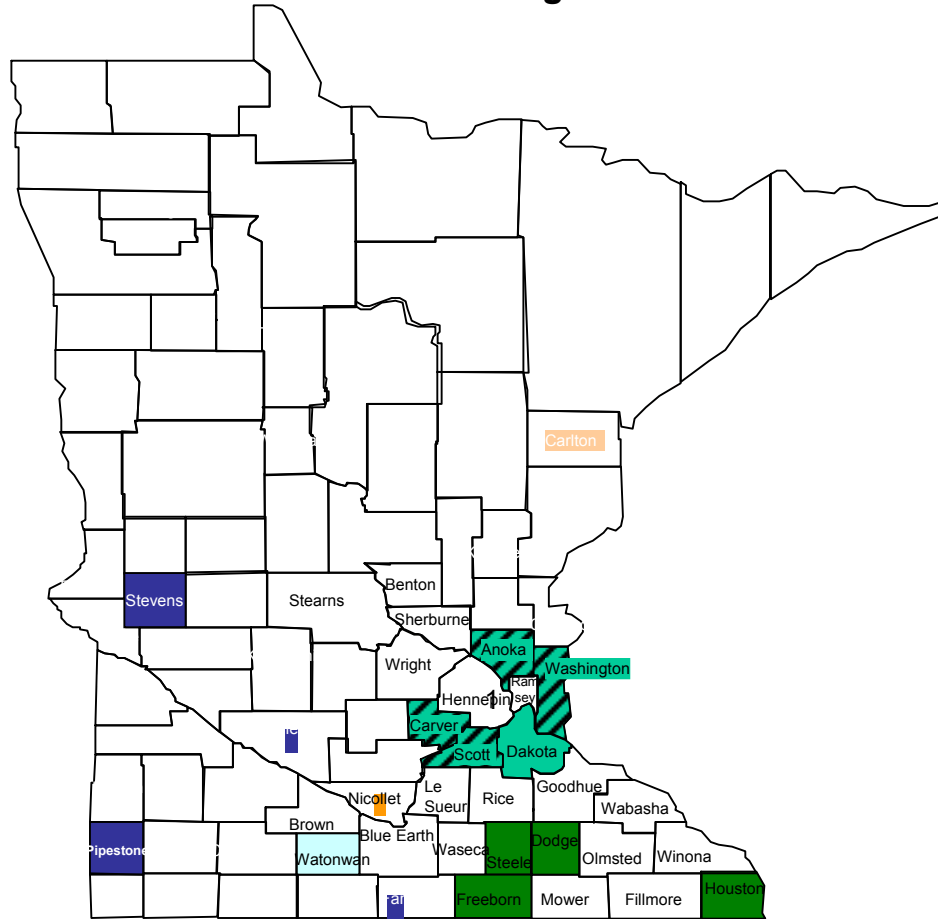
Vision: To establish an effective, comprehensive and sustainable immunization information system in Minnesota that:

- rapidly and securely shares accurate and complete information among providers;
- protects the privacy of individuals;
- recognizes the partnership roles of patients, providers, health plans, schools, and public health;
- uses appropriate levels of technology.



Minnesota Immunization Information Connection

A statewide network of regional immunization services



 **Central Minnesota Immunization Connection (CMIC)**

 **Communities Caring for Children (CCC)**

 **Community Health Information Collaborative (CHIC)**

 **ImmuLink/Metro Registrar**

 **Immtrack**

 **Southeast Minnesota Immunization Connection (SEMIC)**

 **Southwest Minnesota Immunization Information Connection (SWMIIC)**

Benefits of MIIC

- Consolidates a person's immunizations into a single record, no matter where the shots were given.
- Provides patient-specific decision support on immunizations due or overdue.
- Enables schools to access immunization histories without having to call parents and clinics.
- Provides reminders and recall notices.
- Helps prevent over-immunization.



Benefits of MIIC *(cont)*

- Generates reports for HEDIS and for internal QA/QI purposes.
- Supports adherence to immunization practice standards.
- Facilitates introduction of new vaccines and changes in the vaccine schedule.
- Determines a community's overall susceptibility to preventable disease.



Client Information
VFC Eligible: No

Client Name (First - MI - Last)	DOB	Gender	Mother's Maiden	Tracking Schedule	Chart #
PATIENT J. JONES	12/15/2004	M	DOE	CDC/ACIP	
Address					
Comments					

History

Add Immunization

Edit Client

Reports

Print

Print Confidential

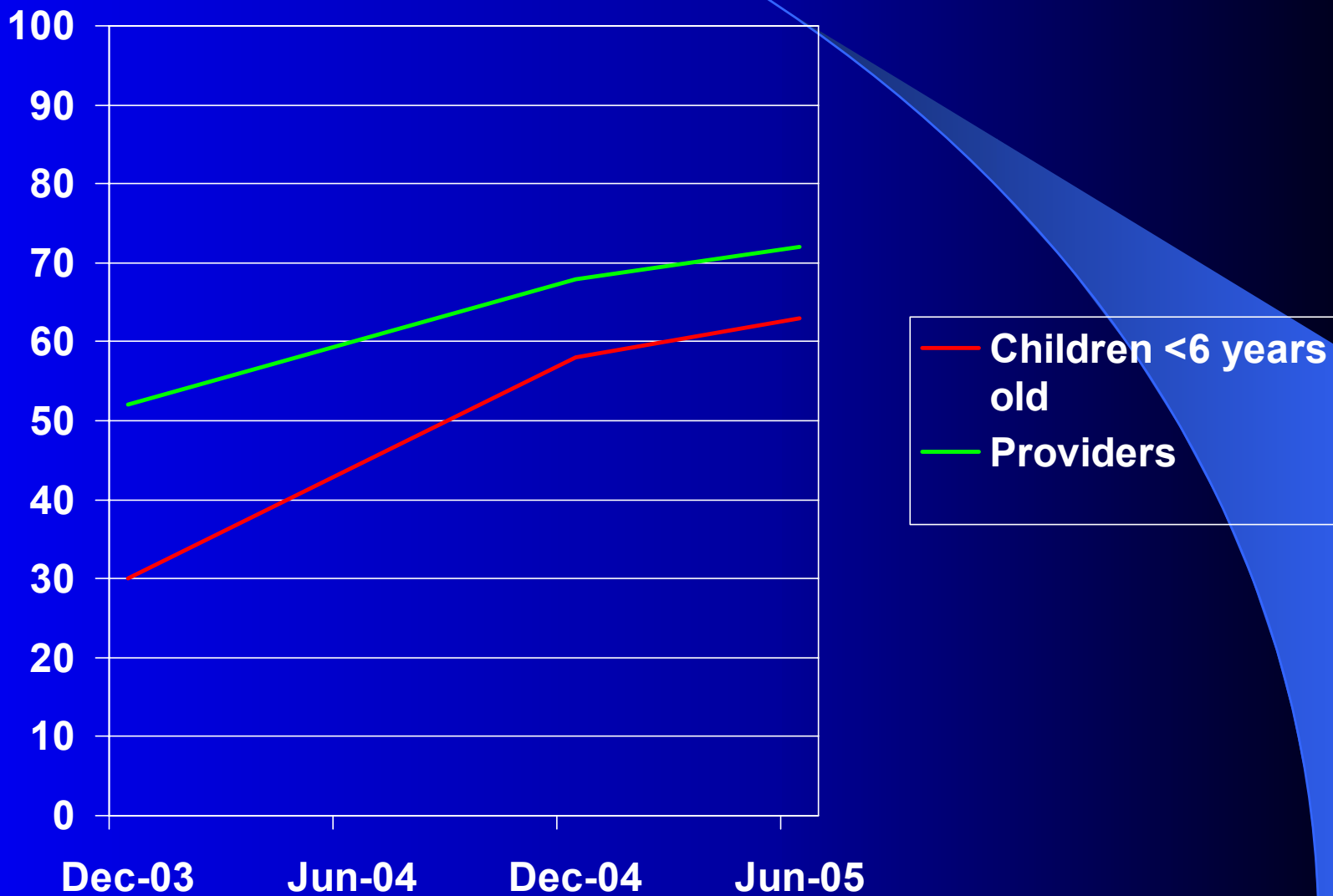
Vaccine Group	Date Administered	Series	Trade Name	Owned?	Reaction	Hist?	Edit
DTP/aP	03/18/2005	1 of 5				Yes	
	05/19/2005	2 of 5				Yes	
HepB	12/16/2004	1 of 3				Yes	
	03/18/2005	2 of 3	Comvax ®			Yes	
Hib	03/18/2005	1 of 3	Comvax ®			Yes	
Pneumo-PCV7	03/18/2005	1 of 4				Yes	
	05/19/2005	2 of 4				Yes	
Polio	03/18/2005	1 of 4				Yes	
	05/19/2005	2 of 4				Yes	

Current Age: 6 months, 5 days
Vaccines Recommended by Selected Tracking Schedule

Add Selected

Select	Vaccine Group	Earliest Date	Recommended Date	Overdue Date	Latest Date
<input type="checkbox"/>	DTP/aP	06/16/2005	07/19/2005	08/19/2005	12/15/2011
<input checked="" type="checkbox"/>	HepB	06/01/2005	06/15/2005	07/15/2006	
<input checked="" type="checkbox"/>	Hib	04/15/2005	04/15/2005	06/18/2005	12/15/2009
<input type="checkbox"/>	MMR	12/15/2005	12/15/2005	04/15/2006	
<input type="checkbox"/>	Pneumo-PCV7	06/16/2005	07/19/2005	08/19/2005	12/15/2009
<input type="checkbox"/>	Polio	06/16/2005	07/19/2005	07/15/2006	
<input type="checkbox"/>	Varicella	12/15/2005	12/15/2005	07/15/2006	12/15/2017

Percent of Providers and Children in MIIC



Future Directions for MIIC

- >95% of providers and 95% of children 0-5 years in MIIC by 2008
 - Currently at 72% of providers and 63% of children.
- Implementing real-time, 2-way HL7 exchange between MIIC and EMR's
 - MIIC would provide histories and decision support to the EMR
- Participation in RHIO's



For more information

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Section

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