

## Community Health Data Exchange Projects Governance Matrix

	Legal Entity	Board/Committee Structure	Board Members	Entities Represented
<p><b>Indiana Health Information Exchange (IHIE)</b></p>	<p>A not for profit 509(a)3 not for profit support organization.  <a href="http://www.lachp.org/pdfs/Health-eLA/20-House%20Committee%20on%20Ways%20and%20Means-Marc%20OverhageMD-Indianapolis%20Indiana.pdf">http://www.lachp.org/pdfs/Health-eLA/20-House%20Committee%20on%20Ways%20and%20Means-Marc%20OverhageMD-Indianapolis%20Indiana.pdf</a></p> <p>IHIE is a non-profit company incorporated in the state of Indiana on February 24, 2004 .  <a href="http://www.ihie.com/origins.htm">http://www.ihie.com/origins.htm</a></p> <p>Backed by a unique collaboration of Indiana health care institutions:  <i>Regenstrief Institute</i>- The institute is a 501(c) 3 not-for-profit, conducting state and regional demonstrations.  <a href="http://www.mc.vanderbilt.edu/vcbh/ds/st_hit_rndtbl/03_best_practices.htm">http://www.mc.vanderbilt.edu/vcbh/ds/st_hit_rndtbl/03_best_practices.htm</a></p> <p><i>ICareConnect, Inc</i> - exempt from federal taxation under the IRS 501(c)3 ruling.  <a href="http://www.nonprofitdata.com/organization-details.phtml?cmd=161633073">http://www.nonprofitdata.com/organization-details.phtml?cmd=161633073</a></p> <p><i>BioCrossroads, Inc.</i>- information not available.  <b>(TAB 1)</b>  <a href="http://www.fdhc.state.fl.us/dhit/pdf/Marc_Overhage.pdf">http://www.fdhc.state.fl.us/dhit/pdf/Marc_Overhage.pdf</a></p>	<p>Divisional Model            -Centralized management  <a href="http://www.hsrnet.net/nhii/materials/governance_paper.doc">http://www.hsrnet.net/nhii/materials/governance_paper.doc</a></p> <p>INPC is governed by a Management Committee, which is empowered to make day-to-day operational and policy decisions that are consistent with the agreement.  <a href="http://waysandmeans.house.gov/hearings.asp?formmode=view&amp;id=1655">http://waysandmeans.house.gov/hearings.asp?formmode=view&amp;id=1655</a></p>	<p><b>Board of Directors:</b>  <b>Officers:</b>            -Vincent Caponi (Chairman)            CEO, St. Vincent Health            -Thomas Inui, MD (Vice-Chairman)            President &amp; CEO, Regenstrief Institute            -Charles E. Schalliol (Secretary-Treasurer) CEO,            Bio Crossroads  <b>Board:</b>            -D. Craig Brater,            MD Dean, Indiana University School of Medicine            -Robert Brody            CEO, St. Francis Hospital and Health Centers            -Virginia Caine,            MD Commissioner, Marion County Health Department            -David Cook,            MD At-large            -William Corley            CEO, Community Health Network            -Marc Duerden,            MD President, Indianapolis Medical Society            -Daniel Evans            CEO, Clarian Health Partners            -Matthew Gutwein            CEO, Health &amp; Hospital Corp. of Marion County            -EH (Ned) Lamkin,            MD At-large            -Honorable Bart Peterson Mayor,            City of Indianapolis            -Kenny Stall,            MD President, Indiana State Medical Association            -Gregory Wilson,            MD Commissioner, Indiana State Department of Health  <a href="http://ehr.medigent.com/assets/collaborate/2005/04/02/Case%20study_IHIE_MO_FINAL.doc">http://ehr.medigent.com/assets/collaborate/2005/04/02/Case%20study_IHIE_MO_FINAL.doc</a></p>	<ul style="list-style-type: none"> <li>· Bio Crossroads</li> <li>· City of Indianapolis</li> <li>· Clarian Health Partners</li> <li>· Community Hospitals of Indianapolis</li> <li>· Health &amp; Hospital Corp. of Marion County</li> <li>· Indiana State Department of Health</li> <li>· Indiana State Medical Association</li> <li>· Indiana University School of Medicine</li> <li>· Indianapolis Medical Society</li> <li>· St Francis Hospital and Health Centers</li> <li>· St Vincent Health</li> <li>· Regenstrief Institute</li> <li>· Wishard Health Services  <a href="http://ehr.medigent.com/assets/collaborate/2005/04/02/Case%20study_IHIE_MO_FINAL.doc">http://ehr.medigent.com/assets/collaborate/2005/04/02/Case%20study_IHIE_MO_FINAL.doc</a></li> </ul>

	<b>Voting/ Decision Making</b>	<b>Financial Arrangement/ Grant Funding</b>	<b>Operating Model/ Vendor</b>	<b>Participant Agreement/ Contract</b>
<p><b>Indiana Health Information Exchange (IHIE)</b></p>	<p>-Each Participant, the Contractor, and each Subcontractor shall be entitled to exercise one vote on decisions made by the Committee.</p> <p>-The holders of a majority of the eligible votes which may be voted on the business to be transacted at such meeting shall constitute a quorum.</p> <p>-A vote of 80% of the votes constituting the quorum shall be necessary for the transaction of any business at the meeting.</p> <p><a href="http://ccbh.ehealthinitiative.org/communities/community.aspx?Section=108&amp;Category=164&amp;Document=61">http://ccbh.ehealthinitiative.org/communities/community.aspx?Section=108&amp;Category=164&amp;Document=61</a></p>	<p>IHIE has used both grant funding and a transaction charge as described below:</p> <p>The sustainable funding model is based on charging 40 cents per testing facility transaction. This approach was taken when a study found that the average cost to the provider was 80 cents per lab result prior to electronic delivery, and it was calculated that the provider cost would be reduced by 50 percent. With 50 million lab results a year, this resulted in a significant source of funding. (<a href="http://www.coloradohealthinstitute.org/publications/HIT_White_Paper.pdf">http://www.coloradohealthinstitute.org/publications/HIT_White_Paper.pdf</a>)</p> <p>A grant from Biocrossroads and prepaid fees from some of the hospitals provided start-up funds. The business model for IHIE's clinical messaging service is that data sources such as laboratories and radiology centers pay fees for IHIE to deliver results to providers. <a href="http://ehr.medigent.com/assets/collaborate/2005/04/02/Case%20study_IHIE_MO_FINAL.doc">http://ehr.medigent.com/assets/collaborate/2005/04/02/Case%20study_IHIE_MO_FINAL.doc</a></p> <p>Indiana received \$9.3 million in grants that will be used to promote the use of health information technology (HIT) to provide better quality and more affordable healthcare for Americans. It is the second highest overall grant total in the nation from the recent disbursement of \$139 million in grants and contracts by the Agency for Healthcare Research and Quality.</p> <p>The Indiana Health Information Exchange (IHIE) will play a key part in the development and implementation of these projects. <a href="http://www.biocrossroads.com/inthenews/HITgrantsFINAL.pdf">http://www.biocrossroads.com/inthenews/HITgrantsFINAL.pdf</a></p>	<p>NHII 2004- Governance Track Background Paper (TAB 2): Developing the in-house capability to sub-contract or conduct projects internally. <a href="http://64.233.187.104/search?q=cache:xYBs m7S5qKwJ:www.hsrnet.net/nhii/materials/governance_paper.pdf+&amp;hl=en">http://64.233.187.104/search?q=cache:xYBs m7S5qKwJ:www.hsrnet.net/nhii/materials/governance_paper.pdf+&amp;hl=en</a></p> <p>Vendor: Regenstrief developed their own.</p> <p><b>IHIE Data Elements Exchanged:</b></p> <p><u>Statewide:</u>  Vital statistics  Newborn screening  Immunizations  Lead  Reportable conditions  Sentinel hospitals  ISDH laboratory</p> <p><u>Regional:</u>  Hospitalizations  Emergency room visits  Hospital laboratory results  Hospital pathology results  Hospital radiology results  Hospital medications</p> <p><u>County:</u>  Immunizations  Primary care visits  MCHD laboratory  <a href="http://www.fdhc.state.fl.us/dhit/pdf/Marc_Overhaige.pdf">http://www.fdhc.state.fl.us/dhit/pdf/Marc_Overhaige.pdf</a></p>	<p>1998 version of INPC participant agreement (TAB 3): <a href="http://ehr.medigent.com/assets/collaborate/2004/03/14/1998%20INPC%20Participants%20Agreement.pdf">http://ehr.medigent.com/assets/collaborate/2004/03/14/1998%20INPC%20Participants%20Agreement.pdf</a></p>

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<p><b>Santa Barbara County Care Data Exchange (SBCCDE)</b></p>	<p>In February 2004 the SBCCDE incorporated as an independent, non-profit organization, governed by a board of directors comprised of individuals from participating organizations. (<a href="http://sbccde.org/bginfo.htm">http://sbccde.org/bginfo.htm</a>)</p> <p>501 (c) 3 -Tax Exempt Status (<a href="http://ehr.medigent.com/assets/collaborate/2005/04/02/Santa%20Barbara%20HIT%20Summit%20West%2004.pdf">http://ehr.medigent.com/assets/collaborate/2005/04/02/Santa%20Barbara%20HIT%20Summit%20West%2004.pdf</a>)</p> <p>Runs as a partnership between public and private health care organizations within Santa Barbara County. (<a href="http://www.pophealth.wisc.edu/uwphi/education/HIT_inst.pdf">http://www.pophealth.wisc.edu/uwphi/education/HIT_inst.pdf</a>)</p>	<p>Divisional Model: <b>(TAB 4)</b> -Centralized management (<a href="http://www.hsmnet.net/nhii/materials/governance_paper.doc">http://www.hsmnet.net/nhii/materials/governance_paper.doc</a>)</p> <ul style="list-style-type: none"> <li>Care Data Exchange Council - The project's governing body is comprised of a senior administrator from each anchor organization and the medical director of the County Public Health Department. The Council meets monthly to develop communication strategy, and address legal and business issues.</li> <li>Care Data Alliances - The Alliances are comprised of multiple organizations who are information trading partners working together to implement common solutions. Each Alliance agrees on and coordinates data sharing goals and facilitates overall technology deployment and implementation. The Alliances have agreed to use the same technical standards and business rules, which will make data sharing easier within and among the other Alliances.</li> <li>Technical Advisory Committee (TAC) - The TAC includes technical representatives from each Care Data Alliance. It meets monthly to review functional and technical requirements for data sharing, integration strategies to optimize existing systems, and implementation priorities based on system capabilities.</li> <li>Clinical Advisory Committee (CAC) - The CAC includes physician leaders from each Care Data Alliance plus members-at-large. It develops functional usability requirements and develops strategy for adoption by physician offices. The broad goal of the Santa Barbara Care Data Exchange network is to allow collaboration among organizations, while allowing each organization to achieve its unique strategic priorities. (<a href="http://www.chcf.org/documents/ihealth/SantaBarbaraFSWeb.pdf">http://www.chcf.org/documents/ihealth/SantaBarbaraFSWeb.pdf</a>)</li> </ul>	<p>Mr. Phillip Greene, COO, Santa Barbara Regional Health Authority Chairman, SBCCDE</p> <p>Mr. Paul Jaconette, CFO, Sansum-Santa Barbara Medical Foundation Clinic Treasurer, SBCCDE</p> <p>Mr. Dan Herlinger, Consumer &amp; Business Advocate Secretary, SBCCDE</p> <p>Dr. George Hiester, President, MidCoast IPA, Board Member, SBCCDE</p> <p>Mr. Roger Heroux, COO, Santa Barbara Public Health Department Board Member, SBCCDE</p> <p>Dr. Owen Stormo, Cottage ER Physician Board Member, SBCCDE</p> <p>Mr. Alberto Kywi, CIO, Cottage Health Systems Board Member, SBCCDE</p> <p>Mr. Jim Raggio CFO, Lompoc Valley Community Healthcare Organization Board Member, SBCCDE</p> <p>Ms. Sue Anderson, CFO, Marian Medical Center Board Member, SBCCDE (<a href="http://ehr.medigent.com/assets/collaborate/2005/04/02/Santa%20Barbara%20HIT%20Summit%20West%2004.pdf">http://ehr.medigent.com/assets/collaborate/2005/04/02/Santa%20Barbara%20HIT%20Summit%20West%2004.pdf</a>)</p>	<ul style="list-style-type: none"> <li>Santa Barbara Regional Health Authority (SBRHA)</li> <li>Santa Barbara Department of Public Health</li> <li>Sansum-Santa Barbara Medical Foundation Clinic</li> <li>Cottage Health System</li> <li>Catholic Health Care West Marion Medical Center</li> <li>MidCoast IPA</li> <li>The Lompoc Valley Community Health Care Organization</li> <li>Santa Barbara Medical Society</li> <li>Pueblo Radiology</li> <li>Unilab Corporations</li> <li>University of California Santa Barbara</li> <li>Veterans Health Administration (<a href="http://www.chcf.org/documents/ihealth/SBCCDEInterimReport.pdf">http://www.chcf.org/documents/ihealth/SBCCDEInterimReport.pdf</a>)</li> </ul>

	Voting/ Decision Making	Financial Arrangement/ Grant Funding	Operating Model/ Vendor	Participant Agreement/ Contract
<p><b>Santa Barbara County Care Data Exchange (SBCCDE)</b></p>	<p>Each organization on the counsel gets one vote and meets monthly to determine the business and operating policies of the SBCCDE, set priorities for the SBCCDE expansion, develop communication strategies, and address legal and business issues. (<a href="http://www.chcf.org/documents/ihealth/SBCCDEInterimReport.pdf">http://www.chcf.org/documents/ihealth/SBCCDEInterimReport.pdf</a>)</p>	<p>The SBCCDE began in 1999 with a \$10 million grant from the California Healthcare Foundation, which was matched by community organizations and an additional \$5 million from CareScience, the software systems partner that was selected to implement the network. (<a href="http://www.coloradohealthinstitute.org/publications/HIT_White_Paper.pdf">http://www.coloradohealthinstitute.org/publications/HIT_White_Paper.pdf</a>)</p> <p>Public/grant funding for startup costs Large stakeholders and/or data contributors</p> <ul style="list-style-type: none"> <li>• Community hospitals</li> <li>• Reference laboratory</li> <li>• Community medical groups</li> <li>• Large companies with high employee base</li> <li>• Private health plans</li> <li>• State plans</li> <li>• Pharmacy companies</li> <li>• Local tax support</li> </ul> <p>(<a href="http://ehr.medigent.com/assets/collaborate/2005/04/02/Santa%20Barbara%20HIT%20Summit%20West%2005_04.pdf">http://ehr.medigent.com/assets/collaborate/2005/04/02/Santa%20Barbara%20HIT%20Summit%20West%2005_04.pdf</a>)</p>	<p>NHII 2004- Governance Track Background Paper: Developing the in-house capability to sub-contract or conduct projects internally. <a href="http://64.233.187.104/search?q=cache:xYBs m7S5qKwJ:www.hsrnet.net/nhii/materials/governance_paper.pdf+&amp;hl=en">http://64.233.187.104/search?q=cache:xYBs m7S5qKwJ:www.hsrnet.net/nhii/materials/governance_paper.pdf+&amp;hl=en</a></p> <p>Vendor: CareScience</p> <p>SBCCDE Data Elements Exchanged: CareScience built a comprehensive set of uniform Web service transactions including patient demographics, lab results, medical tests and pharmacy orders. (<a href="http://www.coloradohealthinstitute.org/Documents/HIT_White_Paper.pdf">http://www.coloradohealthinstitute.org/Documents/HIT_White_Paper.pdf</a>)</p> <p>SBCCDE is comprised of nine local health care organizations, a regional health plan, the Santa Barbara County Public Health Department, three community hospital systems and regional laboratory and pharmacy data providers. <a href="http://www.sbccde.org/bginfo.htm">http://www.sbccde.org/bginfo.htm</a></p>	<p>The User Agreement is the document that governs the use of the CDE, including data use and disclosure policies compliant with HIPAA privacy regulations as well as CA law. All participants sign the agreement. (<a href="http://ccbh.ehealthinitiative.org/profiles/documents.aspx?Section=123&amp;Category=158&amp;Document=103&amp;Page=122">http://ccbh.ehealthinitiative.org/profiles/documents.aspx?Section=123&amp;Category=158&amp;Document=103&amp;Page=122</a>)</p> <p>SBCCDE 2002 User Agreement (Agreement between User and CareScience) (<b>TAB 5</b>) <a href="http://ehr.medigent.com/assets/collaborate/2004/04/01/SBCCDE%20User%20Agreement_2002.pdf">http://ehr.medigent.com/assets/collaborate/2004/04/01/SBCCDE%20User%20Agreement_2002.pdf</a></p>

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<p><b>MA-SHARE (Simplifying Healthcare Among Regional Entities)</b></p>	<p>MHDC- Is a non-profit, private 501(c)(3) membership corporation, established in 1978 by the state's major public and private health care organizations. (<a href="http://www.mahealthdata.org/members/2004_MembershipBrochure.pdf">http://www.mahealthdata.org/members/2004_MembershipBrochure.pdf</a>)</p> <p>MA-SHARE began formal operations in May, 2003. <a href="http://www.mahealthdata.org/ma-share/mission.html">http://www.mahealthdata.org/ma-share/mission.html</a></p>	<p>Inception: The MA-SHARE Advisory Committee (the "Committee") is an ad hoc committee of the Board established under the authority of the Bylaws of the MHDC Consortium. The MHDC Board has directed that the Chairman of the Board of Directors shall serve as Chairman of the MA-SHARE Committee and that the Chairman shall establish rules of order and methods of procedure governing the operation of the Committee. (<a href="http://ehr.medigent.com/assets/collaborate/2004/03/30/MA-SHARE%20Rules%20and%20Procedures%20(Sept03).pdf">http://ehr.medigent.com/assets/collaborate/2004/03/30/MA-SHARE%20Rules%20and%20Procedures%20(Sept03).pdf</a>)</p> <p>Currently: MA-SHARE is operated by a 10-member Board of Managers appointed by the MHDC Board of Directors. MA-SHARE also convenes a community-based Advisory Committee as an ad hoc committee for the purpose of advising and assisting in planning efforts. The Board of Managers includes two directors and the Chief Executive Officer of MHDC. The remaining membership is comprised of user/customer organizations which will purchase services from MA-SHARE, including major health plans, provider organizations and state government. <a href="http://www.dwt.com/practc/hit/RHIO/05-05_MA_SHARE.htm">http://www.dwt.com/practc/hit/RHIO/05-05_MA_SHARE.htm</a></p> <p>MA-SHARE Organizational Chart: <b>(TAB 6)</b> <a href="http://www.mahealthdata.org/forums/events/2005/AM_0422/slides/20050422_Stowe.pdf">http://www.mahealthdata.org/forums/events/2005/AM_0422/slides/20050422_Stowe.pdf</a></p>	<p><b>MA-SHARE Advisory Committee &amp; Executive Sub-Committee</b> <i>NOTE: Asterisk (*) indicates member of the Executive Sub-Committee</i></p> <p><b>1 seat for the Chairman of the Board, Massachusetts Health Data Consortium</b></p> <ul style="list-style-type: none"> <li>▪ Gordon Vineyard, MD, President of the Massachusetts Health Data Consortium (*)</li> </ul> <p><b>1 seat for the CIO Forum of the Massachusetts Health Data Consortium</b></p> <ul style="list-style-type: none"> <li>▪ John Halamka, MD, CIO, CareGroup Healthcare System and CIO, Harvard Medical School</li> </ul> <p><b>3 seats representing hospitals in Massachusetts</b></p> <ul style="list-style-type: none"> <li>▪ Wendy Warring, Executive Vice President, UMass Memorial HealthCare</li> <li>▪ John Glaser, PhD, CIO, Partners Healthcare System (*)</li> <li>▪ Dale Lodge, CEO, Winchester Hospital (*)</li> </ul> <p><b>3 seats representing health plans in Massachusetts</b></p> <ul style="list-style-type: none"> <li>▪ Nancy Leaming, President, Tufts Health Plan (*)</li> <li>▪ Tom Hawkins, MD, Director, eHealth Strategies, Harvard Pilgrim Health Care</li> <li>▪ Carl Ascenzo, CIO, Blue Cross Blue Shield of Massachusetts (*)</li> </ul> <p><b>3 seats representing physicians in Massachusetts</b></p> <ul style="list-style-type: none"> <li>▪ Thomas Sullivan, MD; President, Massachusetts Medical Society (MMS) (*)</li> <li>▪ Lawrence Garber, MD; Medical Director for Informatics, Fallon Clinic, Worcester, MA</li> <li>▪ Eugenia Marcus, MD; Pediatric Healthcare at Newton-Wellesley Hospital, Newton, MA</li> </ul> <p><b>3 seats representing State Government</b></p> <ul style="list-style-type: none"> <li>▪ Peter J. Quinn, CIO &amp; Director, Information Technology Division, Commonwealth of Massachusetts</li> <li>▪ Stephanie Lovell, First Assistant Attorney General, Commonwealth of Massachusetts</li> <li>▪ Steven Kadish, Undersecretary, Executive Office of Health and Human Services, Commonwealth of Massachusetts (*)</li> </ul> <p><b>3 seats for other healthcare organizations in Massachusetts</b></p> <ul style="list-style-type: none"> <li>▪ Phil Magnusson, CEO, Visiting Nurses Associations of New England</li> <li>▪ Paula Griswold, Executive Director, Massachusetts Coalition for the Prevention of Medical Errors</li> <li>▪ Dan Haron, R.Ph.; Vice President, Pharmacy &amp;</li> </ul>	<p>MA-SHARE Advisory: Committee 1 seat for the Chairman of the Board, Massachusetts Health Data Consortium</p> <p>1 seat for the CIO Forum of the Massachusetts Health Data Consortium</p> <p>3 seats representing hospitals in Massachusetts UMass Memorial HealthCare</p> <p>3 seats representing health plans in Massachusetts</p> <p>3 seats representing physicians in Massachusetts</p> <p>3 seats representing State Government</p> <p>3 seats for other healthcare organizations in Massachusetts</p> <p>5 "other" seats (representing employers, academia, technology association, the state legislature and consumers)</p>

Professional Affairs, Brooks Pharmacy  
**5 "other" seats (representing employers, academia, technology association, the state legislature and consumers)**

- **Employer:** Judith A. Roberts, Director, Risk Management and Insurance, Bull HN Information Systems, Inc. (representing the Massachusetts Healthcare Purchaser Group)
- **Academia:** Paul Cleary, PhD, Professor, Health Care Policy, Harvard Medical School
- **Technology Association:** Mitchell Adams, Executive Director, Massachusetts Technology Collaborative
- **State Legislator:** Senator Richard Moore, Chairman, Joint Committee on Health Care
- **Consumer:** Thomas A. Farrington, Founder and President, Prostate Health Education Network

(<http://www.mahealthdata.org/mashare/leadership.html>)

	<b>Voting/ Decision Making</b>	<b>Financial Arrangement/ Grant Funding</b>	<b>Operating Model/ Vendor</b>	<b>Participant Agreement/ Contract</b>
<b>MA-SHARE</b>	<p>The MA-Share Advisory Committee shall neither have nor exercise any direct power.</p> <p>At any meeting of the MA-SHARE Committee, the presence of one-half of the Committee Members qualified to vote shall constitute a quorum. The continued presence of a quorum is presumed unless the Chairman or a Committee Member declares the lack thereof upon noticing the absence of a quorum.</p> <p>Action by the Committee may be taken or authorized by an affirmative majority vote of the Committee Members present and qualified to vote, taken at a meeting duly called and at which a quorum is present.</p> <p>Any action to be taken by the Committee may be accomplished without a meeting if all the Committee Members qualified to vote on the particular matter consent to the matter in writing. Such written consent shall be filed with the records of the meeting, and shall be deemed for all</p>	<p>- \$400K eHealth Collaborative Connecting Communities for Better Health grant  - \$1.1M Year 2 funding secured – BCBSMA and Partners provider leadership grants  (<a href="http://www.mahealthdata.org/forums/events/2005/AM_0422/slides/20050422_Stowe.pdf">http://www.mahealthdata.org/forums/events/2005/AM_0422/slides/20050422_Stowe.pdf</a>)</p> <p>Seed Funding to MHDC to form MA-SHARE: Two healthcare organization in the state, Partners Healthcare System and BCBSMA, agreed to make a lead grant of \$35,000 each to the MHDC Consortium to this important new project. (<a href="http://www.mahealthdata.org/ma-share/mission.html">http://www.mahealthdata.org/ma-share/mission.html</a>)</p>	<p>The MA-SHARE operating model is generally conceived as that of a facilitator and incubator, in which projects exploring healthcare data connectivity will be undertaken in order to develop, pilot and demonstrate new healthcare information technologies across communities and enterprises. (<a href="http://www.mahealthdata.org/ma-share/mission.html">http://www.mahealthdata.org/ma-share/mission.html</a>)</p> <p>NHII-Governance Track Background Paper: Using the existing capability of stakeholders or collaborators.  <a href="http://64.233.187.104/search?q=cache:xYBsm7S5qKwJ:www.hsrnet.net/nhii/materials/governancepaper.pdf+&amp;hl=en">http://64.233.187.104/search?q=cache:xYBsm7S5qKwJ:www.hsrnet.net/nhii/materials/governancepaper.pdf+&amp;hl=en</a></p> <p>Vendors: Zix Corporation and CSC</p> <p>Zix Corporation developed and hosts the web application  -Searches are done simultaneously across each data source  - Two steps – eligibility, then DDH retrieval  <a href="http://www.medrecinst.com/conferences/seminar/mar05/proceedings/PDFs/033005%20EHR%20NYC.pdf">http://www.medrecinst.com/conferences/seminar/mar05/proceedings/PDFs/033005%20EHR%20NYC.pdf</a></p> <p>CSC is developing below for MA-SHARE:  - Record Locator Service (RLS)  – Allows participants to publish standard “pointers” to their health records and to find health records from other data sources  -Clinical Data Exchange (CDX)  – Gives participants the ability to send and retrieve standard HL7-based health messages or records with other participants</p>	<p>MA-SHARE Operating Plans and Procedures: <b>(TAB 7)</b>  <a href="http://ehr.medigent.com/assets/collaborate/2004/03/30/MA-SHARE%20Rules%20and%20Procedures%20(Sept03).pdf">http://ehr.medigent.com/assets/collaborate/2004/03/30/MA-SHARE%20Rules%20and%20Procedures%20(Sept03).pdf</a></p> <p>MA-SHARE – Pilot Hospital Service Agreement DRAFT: <b>(TAB 8)</b>  <a href="http://ehr.medigent.com/assets/collaborate/2005/02/07/SAMPLE%20MA%20SHARE%20Hospital%20Contract%20template_02_04_05.doc">http://ehr.medigent.com/assets/collaborate/2005/02/07/SAMPLE%20MA%20SHARE%20Hospital%20Contract%20template_02_04_05.doc</a></p>

purposes a unanimous vote of the Committee Members taken at a meeting.

<http://comhealth.org/PDFs/MA-SHARE%20Rules%20of%20Order%20and%20Operating%20Procedures.pdf>

- Rx Gateway  
– Allows interested participants to route electronic prescriptions and perform other pharmacy-related tasks more effectively.  
[http://www.mahealthdata.org/forums/events/2005/AM\\_0422/slides/20050422\\_DeBor.pdf](http://www.mahealthdata.org/forums/events/2005/AM_0422/slides/20050422_DeBor.pdf)

MA-SHARE Clinical Data Exchanged (**TAB 9**):  
Physician Notes  
Problem List  
Radiology Results  
Lab Test Results  
Medical Dx and Procedures  
Drug Claims  
<http://ehr.medigent.com/assets/collaborate/2004/03/30/MA-SHARE%20Vision.pdf>

	Legal Entity	Board/Committee Structure	Board Members	Entities Represented
<p><b>Rhode Island Quality Institute (RIQI)</b></p>	<p>A not-for-profit corporation established in 2002 as a multi-stakeholder coalition.  <a href="http://ehr.medigent.com/assets/collaborate/2004/11/24/RIHII%20Executive%20SummaryFINAL001.pdf">http://ehr.medigent.com/assets/collaborate/2004/11/24/RIHII%20Executive%20SummaryFINAL001.pdf</a></p>	<p>22 Board Members/ 4 on Executive Committee  <a href="file:///C:/Documents%20and%20Settings/araujo/Local%20Settings/Temporary%20Internet%20Files/Content.IE5/3XB9K0QD/1033,4,Structure">file:///C:/Documents%20and%20Settings/araujo/Local%20Settings/Temporary%20Internet%20Files/Content.IE5/3XB9K0QD/1033,4,Structure</a></p>	<p><b>Officers of the Board</b>  Chairman: George Vecchione, Lifespan Corporation  President: Laura Adams, Rhode Island Quality Institute  Vice Chair: John Hynes, Esq., Care New England Health System  Vice Chair: James E. Purcell, Acting President and Chief Executive Officer</p> <p><b>Board of Directors</b>  -Frank X. Basile, MD, University Medicine Foundation  -Richard Besdine, MD, Brown Medical School  -Nitin S. Damle, MD. South County Internal Medicine  -Yul Ejnes, MD, Rhode Island Medical Society  -Stephen Farrell, CEO, UnitedHealthCare of New England  -Lt. Governor Charles Fogarty, Chair, Long-Term Care Council  -David Gifford, MD, Quality Partners of Rhode Island  -Jane Hayward, Managing Director, Office of Health and Human Services.  -Mark D. Jacobs, MD, President and CEO, Coastal Medical  -Jeffrey C. Johnson, The Beacon Mutual Insurance Company Vice President, Community Relations  -Mary Jones, Consumer  -Chris Koller, RI Health Insurance Commissioner  -Donald E. Letendre, Pharm.D, Univ. of Rhode Island College of Pharmacy  -Pamela McCue, RN, Rhode Island State Nurses Association  -Marcia Petrillo, CEO, Quality Partners of Rhode Island  -Edward Quinlan, President, Hospital Association of Rhode Island  -Marti Rosenberg, Executive Director, Ocean State Action  -Sheldon Whitehouse, Esq., Attorney at Law</p>	<ul style="list-style-type: none"> <li>• Blue Cross and Blue Shield of Rhode Island</li> <li>• Brown Medical School</li> <li>• Care New England Health System</li> <li>• Hospital Association of Rhode Island</li> <li>• Lifespan Corporation</li> <li>• Neighborhood Health Plan of Rhode Island</li> <li>• Quality Partners of Rhode Island</li> <li>• Rhode Island Department of Health</li> <li>• Rhode Island Department of Human Services</li> <li>• Rhode Island Lieutenant Governor</li> <li>• Rhode Island Medical Society</li> <li>• Rhode Island State Nurses Association</li> <li>• UnitedHealthCare of New England</li> <li>• University of Rhode Island College of Pharmacy</li> </ul> <p><a href="http://ehr.medigent.com/assets/collaborate/2004/11/24/RIHII%20Executive%20SummaryFINAL001.pdf">http://ehr.medigent.com/assets/collaborate/2004/11/24/RIHII%20Executive%20SummaryFINAL001.pdf</a></p>

	Voting/ Decision Making	Financial Arrangement/ Grant Funding	Operating Model/Vendor	Participant Agreement/ Contract
<p><b>Rhode Island Quality Institute (RIQI)</b></p>	<p>One Organization/ One Vote  <a href="file:///C:/Documents%20and%20Settings/araujo/Local%20Settings/Temporary%20Internet%20Files/Content.IE5/3XB9K0QD/1033.4.Structure">           (file:///C:/Documents%20and%20Settings/araujo/Local%20Settings/Temporary%20Internet%20Files/Content.IE5/3XB9K0QD/1033.4.Structure)         </a></p>	<p>Participation Fees of \$25,000 a year. Incentive payments based on community performance.  <a href="http://ehr.medigent.com/assets/collaborate/2004/11/24/RIHII%20Executive%20SummaryFINAL001.pdf">           (http://ehr.medigent.com/assets/collaborate/2004/11/24/RIHII%20Executive%20SummaryFINAL001.pdf)         </a></p>	<p>NHII-Governance Track Background Paper: Using the existing capability of stakeholders or collaborators.  <a href="http://64.233.187.104/search?q=cache:xYBsm7S5qKwJ:www.hsrnet.net/nhii/materials/governance_paper.pdf+&amp;hl=en">           http://64.233.187.104/search?q=cache:xYBsm7S5qKwJ:www.hsrnet.net/nhii/materials/governance_paper.pdf+&amp;hl=en         </a></p> <p>RIQI is a collaborative effort of independent and chain pharmacies across the nation to implement state-wide electronic connectivity between all retail pharmacies and all prescribers in the state.  <a href="http://ccbh.ehealthinitiative.org/communities/states.aspx?Location=Rhode+Island&amp;Record=41L">           http://ccbh.ehealthinitiative.org/communities/states.aspx?Location=Rhode+Island&amp;Record=41L         </a></p> <p>RIQI also serves as the governing body for the Rhode Island Department of Health's AHRQ Contract: State and Regional Demonstrations in Health Information Technology (HIT). The goal of the AHRQ HIT initiative is to create, implement and evaluate a Master Patient Index as the backbone of an interconnected information system putting the right information at the right time into the hands of the clinicians and their patients.  <a href="http://www.surescripts.com/feb11.htm">           http://www.surescripts.com/feb11.htm         </a></p> <p>Vendor: SureScript Systems, Inc.</p> <p>SureScripts Messenger™ Services allows physician office technology to link directly to established pharmacy software and facilitates the secure electronic transmission of patients' prescription information between physician practices and pharmacies.  <a href="http://www.surescripts.com/feb11.htm">           http://www.surescripts.com/feb11.htm         </a></p>	<p>Not available</p>

	Legal Entity	Board/Committee Structure	Board Members	Entities Represented
<p><b>North Carolina Healthcare Information &amp; Communications Alliance (NCHICA)</b></p>	<p>NCHICA is a North Carolina nonprofit corporation that has qualified as a publicly-supported, tax-exempt organization under Section 501(c)(3) of the Internal Revenue Code.  <a href="http://www.nchica.org/AboutNCHICA/CorpInfo/IntellProp.htm">http://www.nchica.org/AboutNCHICA/CorpInfo/IntellProp.htm</a></p> <p>Formed in 1994, NCHICA has been very active in the development of model privacy legislation, secure Internet technologies and clinical applications that require the innovative application of technology and communications.  <a href="http://www.keane.com/pressroom/press_releases/2000/20001206.html">http://www.keane.com/pressroom/press_releases/2000/20001206.html</a></p>	<p>Association Model with full time professional staff.</p>	<p><b>NCHICA Board of Directors</b></p> <ul style="list-style-type: none"> <li>-Rosemary B. Abell, RN * Keane, Inc.</li> <li>-Martha B. Adams, MD Duke University Health System</li> <li>-Barbara A. Archbold * IBM Corporation</li> <li>-Joseph Auriemma Siemens Health Services</li> <li>-Gary Bowers WNC Health Network, Inc.</li> <li>-Clyde L. Brooks, Jr, MD * ECU Brody School of Medicine</li> <li>-Sarah Brooks, MPA, RHIA NC DHHS Division of Information Resource Mgmt</li> <li>-Jon Brown Wake Forest University Baptist Medical Center</li> <li>-J. Steven Cline, DDS, MPH NC DHHS Division of Public Health</li> <li>-Mary A. Curran, RN, PhD, FNP UNC Charlotte</li> <li>-Janis L. Curtis Duke University Health System</li> <li>-David B. Dillehunt FirstHealth of the Carolinas</li> <li>-Tom K. Earnhardt, PA-C Cabarrus Family Medicine, PA</li> <li>-Jean T. Foster, RHIA NC Health Information Management Association</li> <li>-David I. Hopp, PhD Cato Research Ltd.</li> <li>-J.P. Kichak UNC Health Care System</li> <li>-Mr. David Kirby, BS, MS, CHPS Kirby Information Management Consulting</li> <li>-John Knox Carolinas HealthCare System</li> <li>-Patricia MacTaggart EDS</li> <li>-William Mattern, MD * UNC Health Care System</li> <li>-Katherine McGinnis Eastern AHEC</li> <li>-Jane Smith Patterson e-NC Authority</li> <li>-Derek Prentice, MD Blue Cross and Blue Shield of NC</li> <li>-Michael E. Samuhel, PhD Research Triangle Institute</li> <li>-Robert H. Seehausen, Jr. * Novant Health System</li> <li>-Robert W. Seligson NC Medical Society</li> <li>-Samuel S. Spicer, MD NC College of Emergency Physicians</li> <li>-Jerome L. Stracke * Visantis Healthcare Solutions</li> <li>-Susan Lillard Thomason, RHIA * Quintiles</li> </ul>	<p>NCHICA members include: hospitals and clinics, medical and dental practices, professional societies and nonprofit associations, national, state and local health agencies, health plans, law firms, healthcare and IT consulting firms/vendors, health education and training providers, pharmaceutical and research organizations.  <a href="http://ccbh.ehealthinitiative.org/profiles/NCHICA.msp">http://ccbh.ehealthinitiative.org/profiles/NCHICA.msp</a></p> <p><b>Member List:</b>  <a href="http://www.nchica.org/Membership/Members.asp">http://www.nchica.org/Membership/Members.asp</a></p>

Transnational Corporation

-Bradford B. Walters, MD, PhD \* NC Medical Society

-Samuel J. Warburton, MD \* Duke University Health System

-David L. Wellons \* BellSouth

(\*These Board members also serve on the NCHICA Executive Committee)

**Board Officers**

Chair- William Mattern, MD

President- Barbara A. Archbold

1st Vice President- Robert H. Seehausen, Jr.

2nd Vice President- Samuel J. Warburton, MD

Secretary- Susan Lillard Thomason, RHIA

Treasurer- Jerome L. Stracke

Assistant Secretary- Michael W. Hubbard

Assistant Treasurer -Gail Hinte

<http://www.nchica.org/AboutNCHICA/board.asp>

**Staff**

W. Holt Anderson, Executive Director, is responsible for the overall operations and strategic implementation of NCHICA goals. Holt oversees day-to-day functions, manages personnel and serves as a primary resource for members. He also coordinates and implements membership development strategies and programs.

Patricia McAulay, Administrative Coordinator, is responsible for the planning and coordination of all meetings and special events sponsored by the organization. Pat's duties also include administrative support for NCHICA day-to-day operations

Laura Ksycewski, Communications Coordinator, manages all internal and external communications. Laura's duties include writing and distributing the monthly electronic newsletter NCHICA Update, maintaining the NCHICA Web site, and producing publications and press releases.

<http://www.nchica.org/AboutNCHICA/contacts.htm>

	Voting/ Decision Making	Financial Arrangement/ Grant Funding	Operating Model	Participant Agreement/ Contract
<p><b>North Carolina Healthcare Information &amp; Communications Alliance (NCHICA)</b></p>	<p><b>Quorum.</b> If a class vote is required to approve an amendment to Articles of Incorporation or these Bylaws, the amendment shall be approved by the members of the class by two-thirds of the votes cast by the class or a majority of the votes entitled to be cast by the class on the amendment, whichever is less.</p> <p>Except as otherwise provided in these Bylaws, the Articles of Incorporation or the North Carolina Nonprofit Corporation Act, members shall not be entitled to vote on any matter, including, without limitation, the election of directors, amendments to the Articles of Incorporation or these Bylaws, a plan of merger, a proposed sale of assets other than in the ordinary course of business, or the proposed dissolution of the Corporation.</p> <p><a href="http://www.nchica.org/AboutNCHICA/CorpInfo/Bylaws.htm#Article4">http://www.nchica.org/AboutNCHICA/CorpInfo/Bylaws.htm#Article4</a></p>	<p><b>Corporate:</b> Corporations, partnerships, and other for-profit entities. (Dues are based on annual corporate revenues from healthcare-related business)</p> <ul style="list-style-type: none"> <li>i Revenues of \$500,000,000+ Annual dues: \$10,000</li> <li>ii Revenues of \$25,000,000 - \$499,999,999 Annual dues: \$5,000</li> <li>iii Revenues of \$5,000,000 - \$24,999,999 Annual dues: \$1,000</li> <li>iv Revenues of \$1,000,000 - \$4,999,999 Annual dues: \$500</li> <li>v Revenues of less than \$1,000,000 Annual dues: \$250</li> </ul> <p><b>Individual:</b> Individuals who wish to support NCHICA or who wish to be kept directly informed of NCHICA activities. Individuals in this membership category are non-voting members.</p> <ul style="list-style-type: none"> <li>i Individual not employed by an organization eligible for membership in any other category (i.e. retiree or not currently employed) Annual dues: \$250</li> <li>ii Individual affiliated with and sponsored by a professional association that is a member of NCHICA Annual dues: \$95</li> </ul> <p><b>Medical and Dental Practices:</b> Enterprises with physicians, dentists or other medically trained personnel that provide direct medical services and/or managed care services to patients</p> <ul style="list-style-type: none"> <li>i Professional organization/clinic with more than 25 physicians and/or other providers Annual dues: \$1,000</li> <li>ii Practice or clinic with 11 - 24 physicians and/or other providers Annual dues: \$500</li> <li>iii Practice or office with 10 or fewer physicians and/or other providers Annual dues: \$250</li> </ul>	<p>NHII-Governance Track Background Paper: Using the existing capability of stakeholders or collaborators.</p> <p><a href="http://64.233.187.104/search?q=cache:xYBsm7S5qKwJ:www.hsrnet.net/nhii/materials/governance_paper.pdf+&amp;hl=en">http://64.233.187.104/search?q=cache:xYBsm7S5qKwJ:www.hsrnet.net/nhii/materials/governance_paper.pdf+&amp;hl=en</a></p> <p>Within NCHICA's: NC Community Medication Management Project, clinicians will have access to web-based electronic medication histories from Pharmacy Benefit Managers, retail pharmacies and Medicaid. Rural Rockingham County, North Carolina was selected for this pilot project.</p> <p><a href="http://ccbh.ehealthinitiative.org/communities/state.s.aspx?Location=North+Carolina&amp;Record=141L">http://ccbh.ehealthinitiative.org/communities/state.s.aspx?Location=North+Carolina&amp;Record=141L</a></p>	<p>Membership application</p> <p><b>TAB 10</b></p> <p><a href="http://www.nchica.org/Membership/howtojoin/membership_printout.html">http://www.nchica.org/Membership/howtojoin/membership_printout.html</a></p>

**Nonprofit:** Nonprofit professional, charitable, scientific or educational organization that qualifies under section 501(c) of the Internal Revenue Code (not including Providers as defined above).

i Gross revenues/budgets of \$5,000,000+  
Annual dues: \$1,000

ii Gross revenues/budgets of \$1,000,000 - \$4,999,999 Annual dues: \$500

iii Gross revenues/budgets of less than \$1,000,000 Annual dues: \$250

**Provider:** (Other than physicians and dentists) Enterprises with medically trained personnel that provide direct medical services and/or managed care services to patients

i. Academic Medical Center and related teaching hospital(s) and clinic(s); or a hospital / hospital system with 401+ licensed beds, or; a managed care organization -Annual dues: \$5,000

ii Hospital with 251 - 400 licensed beds  
Annual dues: \$1,000

iii Hospital with 100 - 250 licensed beds  
Annual dues: \$500

iv Hospital with fewer than 100 licensed beds Annual dues: \$250

**Public Agency:** Federal, State, city, county agency or special governmental district (not including Providers as defined above).

<http://www.nchica.org/Membership/howtojoin/dues.asp>

	Legal Entity	Board/Committee Structure	Board Members	Entities Represented
<p><b>Michiana Health Information Network (MHIN)</b></p>	<p>Michiana Health Information Network, LLC (MHIN), was incorporated in 1998.  <a href="http://www.mhin.com/web_abo_tutus/">http://www.mhin.com/web_abo_tutus/</a></p> <p>The Michiana Health Information Network, was created by the Saint Joseph Regional Medical Center and the South Bend Medical Foundation in 1998.  <a href="http://www.ihealthbeat.org/index.cfm?action=dspItem&amp;itemid=103186">http://www.ihealthbeat.org/index.cfm?action=dspItem&amp;itemid=103186</a></p> <p>MHIN is a community health information exchange utility that offers an electronic health record and other clinical information systems that enable physicians and other healthcare providers in the Michiana area to build longitudinal, person-centered medical records.  <a href="http://www.mhin.com/web_faqs/#5">http://www.mhin.com/web_faqs/#5</a></p>	<p>The HNS Group, a small consulting firm that specializes in assisting networks of health care providers in managing information, has been involved with MHIN from its beginnings. Several of the people who were instrumental in MHIN’s creation are now part of HNS and are working in other communities to improve the flow of information among health care providers.  <a href="http://ehr.medigent.com/assets/collaborate/2005/04/10/MHIN%20Case%20Study.doc">http://ehr.medigent.com/assets/collaborate/2005/04/10/MHIN%20Case%20Study.doc</a></p>		<p>Participants:</p> <ul style="list-style-type: none"> <li>Allied Physicians of Michiana (APOM)</li> <li>Allied Physicians Surgery Center</li> <li>Associates in Family Medicine</li> <li>Bluth &amp; Gerber Eye Care Center</li> <li>Bourbon Family Medicine</li> <li>Cardiology Associates, Inc.</li> <li>Cardiology Care, PC</li> <li>Cardiothoracic Surgery, PC</li> <li>Chapin Street Clinic</li> <li>Community Pulmonary Medicine</li> <li>Culver Academy Health Center</li> <li>Diagnostic Medicine, PC</li> <li>Dr. Bathrick</li> <li>Edison Lakes Urology</li> <li>Family Medicine of South Bend</li> <li>Four West Family Physicians</li> <li>General &amp; Vascular Surgery</li> <li>Holm Medical Clinic</li> <li>Houser-Norborg-MacGregor Medical Corp.</li> <li>Indiana Health Center</li> <li>Internal Medicine Associates</li> <li>Main Street Medical Group</li> <li>Marshall County Family Practice</li> <li>Marshall County OB/GYN</li> <li>Marshall County Pediatrics</li> <li>Memorial Maternal Fetal Medicine</li> <li>Michiana Gastroenterology</li> <li>Michiana Hermatology-Oncology, PC</li> <li>Midwest Cardiovascular Specialists</li> <li>Nephrology, Inc.</li> <li>North Central Neurosurgery</li> </ul>

Northern Indiana Oncology  
Associates, Inc.  
Northwest Family Medicine  
OB/GYN Associates of  
Northern Indiana, PC  
Orthopedic Medical Group  
Inc.  
Otorhinolaryngology  
Physical Medicine and  
Rehabilitation Specialists  
Plymouth Family and Internal  
Medicine  
Pulmonary Medicine  
Associates  
River Park Family Medicine  
Skyway Primary Care  
South Bend Clinic &  
SurgiCenter  
South Bend Neurology  
South Bend Orthopaedic  
Associates  
University Park Family  
Medicine  
University Park Podiatry  
Urology Associates of South  
Bend  
X-Ray Consultants, Inc.

	Voting/ Decision Making	Financial Arrangement/ Grant Funding	Operating Model/Vendor	Participant Agreement/ Contract
<p><b>Michiana Health Information Network (MHIN)</b></p>		<p>For Physicians: Viewing the clinical information from their office is free. It is sponsored by the organizations that enter the data.  <a href="http://www.mhin.org/data/docs/PowerChart_brochure_FINAL.pdf">http://www.mhin.org/data/docs/PowerChart_brochure_FINAL.pdf</a></p>	<p>NHII-Governance Track Background Paper: Contracting an entire function or project to a vendor.  <a href="http://64.233.187.104/search?q=cache:xYBsm7S5qKwJ:www.hsrnet.net/nhii/materials/governance_paper.pdf+&amp;hl=en">http://64.233.187.104/search?q=cache:xYBsm7S5qKwJ:www.hsrnet.net/nhii/materials/governance_paper.pdf+&amp;hl=en</a></p> <p>Vendor: MHIN has partnered with Cerner, the leading clinical software provider, to provide the PowerChart Electronic Medical Record System and also to give you access to all the options from Cerner's Millennium Health Network Architecture suite.  <a href="http://www.mhin.com/web_faqs/#5">http://www.mhin.com/web_faqs/#5</a></p> <p>MHIN's Electronic Health Record (EHR) is capable of storing discrete data, text, images, and voice from many provider sources -- including inpatient and outpatient laboratory results and radiology reports; reports from hospital service departments such as surgery, cardiac cath, and emergency services; medical records reports such as h&amp;ps and discharge summaries.  <a href="http://www.mhin.com/web_faqs/#5">http://www.mhin.com/web_faqs/#5</a></p> <p>For physicians, MHIN offers independence from hospitals, a safe place to store practice information, and the chance for direct input about priorities.  <a href="http://ehr.medigent.com/assets/collaborate/2005/04/10/MHIN%20Case%20Study.doc">http://ehr.medigent.com/assets/collaborate/2005/04/10/MHIN%20Case%20Study.doc</a></p> <p>MHIN Medical Information Trading Area:  <a href="http://www.mhin.org/data/docs/news/MHIN%20Presentaton_%20Ind%20Life%20Sciences%20Lunch%20Series%20-%20205-18-04.pdf">http://www.mhin.org/data/docs/news/MHIN%20Presentaton_%20Ind%20Life%20Sciences%20Lunch%20Series%20-%20205-18-04.pdf</a></p>	

