

1 NATIONAL GOVERNORS ASSOCIATION
2 STATE ALLIANCE FOR E-HEALTH
3
4 QUARTERLY CONFERENCE
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8 Ritz-Carlton Hotel
9 1150 22nd Street, Northwest
10 Washington, D. C.
11
12 Friday, February 22, 2008
13 9:15 a.m.

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15 The meeting commenced, pursuant to notice, at
16 the Ritz-Carlton Hotel on Friday, February 22, 2008,
17 in Washington, D. C., at 9:15 a.m., Governors Phil
18 Bredesen and Jim Douglas, co-chairs, presiding.

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21 REPORTED BY:
22 Julie T. Richer

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1 P R O C E E D I N G S
2 GOVERNOR BREDESEN: All right. I'd like

3 to call to order today the meeting of the State
4 Alliance for e-Health and certainly, on behalf of
5 Governor Douglas and myself, welcome everybody to
6 this quarterly meeting. Today really is a
7 significant milestone, I think our first real
8 milestone in the State Alliance effort. We draw to
9 a close the first year of this effort, a period over
10 which 30 public meetings were conducted to try and
11 obtain the broadest possible perspectives on our
12 work. And today we're going to summarize that and
13 begin to lay out the work plan for the second year.

14 We held our first meeting here in
15 Washington a year ago. We gathered together,
16 obviously from various backgrounds and expertise and
17 different positions representing certainly both
18 public and private sectors around the table here.
19 We all shared the common goal of transforming health
20 and health care in our country using widespread
21 e-health information technology, electronic health
22 information storage, and really trying to bring to

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1 the health care sector some of the benefits of
2 technology that so many other economic sectors in
3 our country have benefited from over the years.

4 Our charge as the State Alliance is to
5 support states in achieving this goal. And over the
6 past year we've examined the challenges and, with
7 the support of task forces, tried to begin
8 identifying some solutions to help states with their

9 transformational efforts. We have, as you know,
10 tried very hard to come up with specific executable
11 kinds of ideas rather than a set of general
12 principles, and I believe that we are being
13 successful in that.

14 We covered a large range of issues related
15 to health IT, from health care practice issues,
16 obtaining things like licensure, privacy, security,
17 the role of state publicly funded programs in
18 promoting health IT. We will hear from the task
19 forces this morning on their last set of
20 recommendations for us to consider relating to these
21 issues.

22 The result of the first year's work, as we

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1 previously discussed, is the development of an
2 action-oriented report outlining some specific areas
3 and options that states can pursue to support health
4 IT adoption and development of electronic health
5 information interchange. I think it's become clear
6 to each of us that this is far more than a technical
7 issue. There are a lot of things that have to
8 happen.

9 Legislatively, there are a lot of policy
10 decisions that have to be made. Many of those are
11 in the domain of states and are properly to remain
12 there, and we are charged to provide some leadership
13 to the states in how we get the groundwork -- get
14 the ground plowed and get the groundwork done to

15 allow this area to flourish.

16 Before we dive too deeply into the day,
17 they've asked me to take the roll call this morning
18 to identify the members who are present. And after
19 I call your name, I would like to indicate -- just
20 indicate your presence.

21 Governor Jim Douglas.

22 GOVERNOR DOUGLAS: Here.

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1 GOVERNOR BREDESEN: Yeah. I can see that.
2 Attorney General Carter, I gather, is not
3 present. Is that correct? He's not present.

4 Commissioner Cline?

5 COMMISSIONER CLINE: Here.

6 GOVERNOR BREDESEN: Okay. Assemblyman
7 Conaway?

8 REPRESENTATIVE CONAWAY: Here.

9 GOVERNOR BREDESEN: Mr. DeVore?

10 MR. DE VORE: Here.

11 GOVERNOR BREDESEN: Governor Geringer?

12 GOVERNOR GERINGER: Here.

13 GOVERNOR BREDESEN: Representative Harrell
14 is not present, I believe, correct?

15 Okay. Senator Moore?

16 SENATOR MOORE: Here.

17 GOVERNOR BREDESEN: Hello, Senator.

18 Attorney General Myers?

19 MS. NOLAN: We expect him.

20 GOVERNOR BREDESEN: Is he --

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MS. NOLAN: We expect him.

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GOVERNOR BREDESEN: We expect him? Okay.

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1 Mr. Palmer?

2 MR. PALMER: Here.

3 GOVERNOR BREDESEN: Commissioner Kramer is

4 not here, I believe, as well.

5 Mr. -- Ms. Pritts?

6 MS. PRITTS: Here.

7 GOVERNOR BREDESEN: Dr. Ruffin?

8 DR. RUFFIN: Here.

9 GOVERNOR BREDESEN: Mr. Sensor?

10 MR. SENSOR: Here.

11 GOVERNOR BREDESEN: Dr. Sundwall?

12 DR. SUNDWALL: Here.

13 GOVERNOR BREDESEN: Now, I believe that

14 Representative Svedjan is not present, and

15 Dr. Tuckson is not present. And as a new voting

16 member, we're pleased to have the Honorable Tom

17 Vilsack, former governor of Iowa.

18 Tom, I'd like to welcome you to this.

19 Would you like to say something to the group.

20 THE HON. MR. VILSACK: Well, first of all,

21 I appreciate the opportunity to be with all of you,

22 and I certainly appreciate the work you've done to

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1 this point. Having read the material, I can tell

2 you that it's a far more complex set of issues than
3 I think most of us who are advocating for some kind
4 of system fully understand. So it's obvious that it
5 all takes time, and I appreciate all the work that
6 has already been done.

7 GOVERNOR BREDESEN: Thank you, Tom. And
8 certainly, although she's not here, I want to thank
9 Governor Jean Shaheen for participating in this
10 effort over the course of this last year. She
11 played an important role in this group. She is now
12 running for the U.S. Senate. We have her trained.

13 (Laughter.)

14 GOVERNOR BREDESEN: And she is now
15 launched on her path to that level. And as soon as
16 I get you two guys trained, we'll cut you loose. We
17 have a trapeze.

18 (Laughter.)

19 GOVERNOR BREDESEN: But we had a good
20 group this past year. There have been some small
21 changes in this coming year, but I think we're going
22 to have some real continuity in moving on forward.

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1 Jim?

2 GOVERNOR DOUGLAS: Well, Phil, thanks very
3 much. Thanks for your continuing leadership.

4 And I want to also welcome Tom Vilsack to
5 the Alliance. Phil and I had the chance to work
6 with Tom for four years when our tenures overlapped,
7 and we appreciate his thoughtfulness and intelligent

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8 approach to a lot of issues that we've confronted as
9 an association, and I know he's going to make a big
10 difference and contribution to this group.

11 So, Tom, welcome.

12 We're wrapping up our first year's work,
13 as Phil mentioned. We were in Nashville last fall
14 for our meeting after our high-level decision to go
15 to Vermont in July and Nashville a little later in
16 the year. That's why we're in charge here. We make
17 the important decisions and check the weather
18 patterns.

19 (Laughter.)

20 GOVERNOR DOUGLAS: But we were in
21 Nashville last time, and we accepted the
22 recommendations that were presented by the Health

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1 Care Practice and Health Information Communication
2 and Data Exchange taskforces, multiple in the second
3 case, about their important work. The
4 recommendations relate to ways to address some of
5 the licensure issues and barriers because of the
6 differences in licensure around the different
7 states, specifically dealing with the centralized
8 credentials verification service areas in which
9 publicly funded health programs like Medicaid can
10 play a role in helping information exchange.

11 Also at our last meeting we talked about
12 ways in which states can drive electronic
13 prescribing adoption. We asked our NGA staff to

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14 capture our deliberations and draft some language
15 that we can take a look at, potentially as to
16 recommendations as they work on achieving critical
17 mass in e-prescribing. Governor Bredesen and I have
18 taken a first crack at what our staff have put
19 together, and we'll share that with you later today.

20 Well, today's agenda will begin with
21 Dr. Bob Kolodner from the Office of the National
22 Coordinator for Health IT. We're pleased to have

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1 him with us once again to give us an update on what
2 we can expect to unfold this coming year, especially
3 with the major initiatives of the coordinator's
4 office, such as AHIC 2.0 and the National Health
5 Information Network trials. So we look forward to
6 this in just a few minutes.

7 Then the co-chairs of the State Alliance's
8 three taskforces are on the agenda to present their
9 final set of recommendations. They've been working
10 very hard, as Phil noted, over the past year to
11 support the work of this Alliance, and we really
12 appreciate their tremendous effort. Sometimes when
13 those of us on a group like this come together, we
14 may not fully appreciate the time and energy that
15 everyone else has put forth during the interim
16 period. We do understand that and appreciate it,
17 and we are grateful to everyone on the taskforces
18 for their service.

19 It really will be, I think, a very helpful
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20 action-based report that will lay out our
21 recommendations for states. The recommendations
22 that we adopt today will be part of our report to

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1 the states. Our NGA staff is working on drafting
2 that for us. We'll get a chance to take a look at
3 it and offer our comments and make sure that it
4 fairly and accurately reflects what the Alliance has
5 been discussing.

6 Then we're going to set our priorities for
7 the coming year, spending some time identifying what
8 the priorities are in the states on the topic of
9 health IT and health information exchange. We also
10 today have some guests from the National Conference
11 of Legislatures and the Health Management
12 Associates, who did a survey for us to discuss
13 states' activities in this area. And then at the
14 end of the day, we'll talk about our work plan and
15 identify what's most important to us as the Alliance
16 and how we best continue our work.

17 Before we invite Dr. Kolodner to join us,
18 I want to bring up one quick item of business for
19 your consideration. We received a request from the
20 Association of State and Territorial Health
21 Officials to consider our public health official,
22 who's currently sitting as a nonvoting member, to

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1 become a voting member of the Alliance. The theory,
2 as you know, is that state officials are voting
3 members, and those from the private sector are not.

4 And I'm not sure why we don't consider you
5 a state official, Dave, but I think that was an
6 oversight. Phil and I are certainly agreeable to
7 that, but we want to be sure that other members of
8 the Alliance are all right with that.

9 Not that we've had any real votes, have
10 we? I know -- other than by consensus over the past
11 year, but I think it is important for consistency to
12 have all state officials so empowered. So any
13 objection to elevating Dr. Sundwall to be a voting
14 member of the Alliance?

15 Second?

16 GOVERNOR DOUGLAS: All in favor, say
17 "aye."

18 (Several "aye" votes were cast.)

19 DR. SUNDWALL: Governor, thank you for not
20 calling for a negative vote. It would have been
21 humiliating.

22 (Laughter.)

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1 GOVERNOR DOUGLAS: Well, we do appreciate
2 your great work and your contribution on behalf of
3 all our health commissioners and directors from all
4 across the country.

5 Phil.

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GOVERNOR BREDESEN: Thank you.