

2011 Annual Report

THSA



TEXAS HEALTH SERVICES AUTHORITY

VISION

To enhance health care quality and effectiveness for all patients, the health care sector should be supported by an infrastructure made up of interoperable, electronic health records composed of standardized, structured data elements that are exchanged among authorized health care organizations and providers across secure regional and statewide networks.

MISSION

The Texas Health Services Authority will promote and coordinate the development of a seamless electronic health information infrastructure to improve the quality, safety, and efficiency of the Texas health care sector while protecting individual privacy.

Texas made significant strides to support statewide health information exchange and meaningful use of electronic health records in 2011.

The Texas Legislature created the Texas Health Services Authority (THSA) in 2007 as a public-private partnership, legally structured as a nonprofit corporation, to promote and coordinate the development of electronic health information exchange (HIE) in Texas. A 13-member Board of Directors, appointed by the Governor with the advice and consent of the Texas Senate, governs the THSA.

In 2011, the THSA, in partnership with the Texas Health and Human Services Commission (HHSC), continued to take a leadership role in supporting improvement in the quality, safety, and efficiency of patient care through the use of HIE by health care providers in order to ensure that the right information is available to the right care providers at the right time.

A number of key goals were reached in 2011 in regard to the following strategies to support statewide HIE in Texas:

- ◆ Establishment of a Local HIE Grant Program to partially fund the planning, development, and operations of local and regional HIE networks utilizing federal grants received pursuant to the American Recovery and Reinvestment Act;
- ◆ Facilitating HIE capabilities in the Texas rural “white space,” counties of the state not served by Local HIEs through the provision of connectivity services by Health Information Service Providers (HISPs); and
- ◆ Development of general state-level operations to support a transparent and collaborative governance structure to coordinate the implementation of HIE in Texas through the development of policies and guidelines, as well as through provision of certain state-level shared services.

The THSA Board of Directors and staff are dedicated to implementing a fiscally conservative and cost-effective approach to implementation of statewide HIE in Texas. We believe implementation of the three key HIE strategies outlined above will enable improvements in the quality and efficiency of the Texas health care sector by establishing an HIE infrastructure for the entire state.

Edward Marx
Board Chair

Tony Gilman
Chief Executive Officer

2011 BOARD MEMBERS



From left to right: Jennifer Rangel, Judy Powell, David Fleege, Fred Buckwold, Edward Marx (Chair), Matthew Hamlin (Treasurer), Darren Rodgers, Stephen Yurco, William Phillips. Not pictured above: Thomas Erlinger, Kathleen Mechler (Vice Chair)

Background

Origin and Structure

The Texas Health Care System Integrity Partnership, which was convened pursuant to Executive Order RP-61, recommended the creation of the THSA.

House Bill 1066 formally created the THSA in 2007 to support improvement of the Texas health care system by promoting and coordinating HIE and health information technology throughout the state to ensure that the right information is available to the right health care providers at the right times.

The THSA is structured as a public nonprofit corporation governed by a board appointed by the Governor with the advice and consent of the Texas Senate.

Status and Meetings

In March 2010, the HHSC received an award from the federal Office of the National Coordinator (ONC) for funding through the State HIE Cooperative Agreement Program. The purpose of this program, created through the American Recovery and Reinvestment Act, is to fund state planning and implementation of electronic health information networks to support higher quality, safer, and more efficient health care. Texas' allotment through this program is \$28.8 million over the four years of the program. Of this allotment, Texas was authorized to use up to \$1 million to develop strategic and operational plans to guide the establishment and operation of

these electronic health information networks. Texas is authorized to use the remaining \$27.8 million for implementation of the state's strategic and operational plans.

The HHSC is serving as the fiscal agent for this funding and the THSA, under contract with HHSC, is responsible for developing and implementing the HIE strategic and operational plans for the state of Texas.

In 2011, the THSA managed an open and transparent collaborative process by establishing a Collaboration Council and subject matter task forces that met monthly to gather advice and develop consensus among key stakeholders in the planning and implementation of Texas statewide HIE. Over 200 individuals are participating in the THSA's collaborative process.

The THSA Board of Directors held public meetings in February, May, August, and December 2011 to review options developed by Collaboration Council and task force members, provide and receive feedback, and give direction on the strategic and operational plans and other matters.

Additional information on the Collaboration Council, task forces, and THSA board meetings in 2011 can be found online at www.thsa.org/events.aspx.

GUIDING PRINCIPLES

PATIENT CENTRIC

The patient and consumer should be the focus of all other efforts in health information technology. Patient control and ownership of personal health information must be protected and patient privacy must be respected. Health information technology has great potential to benefit health outcomes for consumers but not at the risk of violating personal privacy.

LEVERAGE EXISTING RESOURCES

To the maximum extent possible, Texas will leverage existing resources and coordinate with other health information technology and HIE initiatives, such as the Medicaid electronic health record incentive payment program, other state agency HIE initiatives, HIE initiatives developed and administered by private payers, and local/regional HIE initiatives.

Summary of Key State HIE Achievements in 2011

Below is a summary of the key activities undertaken in 2011 by the THSA, in partnership with HHSC, to implement the Texas HIE strategic and operational plans.

Supporting the Development of HIE Infrastructure in Texas Getting the Job Done...

THSA and/or HHSC

...established a new Local HIE Grant Program administered by the HHSC with support from THSA and released a Request for Applications to provide partial funding for the initial planning, development, and operations of local community-supported HIE networks across Texas;

...entered into contracts with sixteen (16) local HIEs to develop Business and Operational (B&O) Plans for the operation of HIE in their communities. Funding under the program was distributed according to the number of hospitals and physicians each HIE committed to connect. The HIEs, as a whole, committed to connect 80-90% of all hospitals and physicians in Texas;

... supported the development of measures to provide significant accountability from the local HIEs funded. HIEs were required to obtain Letters of Commitment or Statements of Interest from at least 40% of the providers the HIE had committed to connect in its initial application. This process is intended to ensure that the HIEs have sufficient support from local providers through the development of services that support the unique needs of the providers and patients in each HIE's community;

...created local HIE profile sheets to provide clear and consistent information on each HIE, including regions to be served, provider populations targeted, HIE missions, and other structural information;

... developed and administered a robust audit process to validate provider commitments, identify duplicates, and reconcile commitments to multiple HIEs to maintain budget certainty for the program;

...issued program guidance on HIE provider commitments, reporting requirements and updates on development of B&O Plans, and governance process and funding match requirements;

...approved B&O Plans for the Integrated Care Collaboration and Healthcare Access San Antonio, and provided tentative approval of plans submitted by Paso del Norte HIE, North Texas Accountable Healthcare Partnership, Greater Houston HIE, Montgomery County HIE, Southeast Texas Health Systems, FirstNet Exchange, RioOne, and iHealth Trust;

...released a Request for Qualifications and conducted an extensive response evaluation process before qualifying five (5) organizations as HISPs to provide lite HIE connectivity services, primarily through secure messaging, to hospitals and physicians in the primarily rural areas of Texas that lack a HIE. Texas is one of the first states to support the development of a competitive HISP marketplace; and

...released a Request for Information to identify all organizations in Texas that offer or intend to offer secure messaging solutions that support the Federal Direct Project transport protocols.

GUIDING PRINCIPLES

MARKET-BASED

Market-based solutions should be sought whenever possible. In the case of health information technology, there is a large and growing body of research suggesting that there is economic value to be recognized at every stage in the evolution of the electronic health information infrastructure. With respect to health information technology, government participation should generally be limited to catalyzing relevant markets, facilitating collaborations, easing regulatory burdens, and assisting in the appropriate alignment of incentives.

FOCUS ON REGIONAL SOLUTIONS

Regional solutions that fit within the statewide framework should be pursued whenever possible. Every region of Texas is different and should be given the freedom to fit into the emerging electronic health information infrastructure in the most appropriate way.

Supporting the Development of HIE Policies, Guidelines, and Procedures

Doing what we said we would do...

THSA and/or HHSC

...developed HIE interoperability guidance to identify technology standards, including reference guides and policies, to support vendor neutrality and ensure statewide and federal program interoperability;

...contracted with the University of Houston Health Law and Policy Institute to develop a series of reports on privacy and security issues, including a primer on state and federal privacy laws and regulations, and white papers on consent, trust agreements, and security policies;

...initiated the development of a state-level trust agreement and privacy and security policies and procedures to serve as the legal framework for secure exchange in Texas; and

...educated stakeholders on health information privacy and security legislation approved by the 82nd Texas Legislature (House Bill 300).

Supporting an Open and Transparent Governance Structure

Reaching out and listening to Texans...

THSA and/or HHSC

...conducted four (4) public THSA Board of Directors meetings;

...established a collaborative process to support input from multiple stakeholder groups into the strategy and policy for HIE deployment in Texas. This included the formation of a Collaboration Council and five (5) subject-matter task forces; and

...conducted seven (7) Collaboration Council and seven (7) rounds of task force meetings on technical architecture, data standards, privacy and security, and consumer and provider engagement. Approximately 200 individuals are participating in THSA's collaborative process.

Supporting State-Level Operations

Keeping it lean and focused...

THSA and/or HHSC

...opened and furnished a THSA office;

...added four FTEs to address policy, legal, administrative, and technical needs;

...presented and participated in multiple conferences, panels and advisory boards to provide updates on statewide HIE to key stakeholders; and

...initiated the process of developing a new THSA website to serve as a marketing and communications tool for the promotion of Texas HIE.

STRATEGY #1: LOCAL HIE GRANT PROGRAM

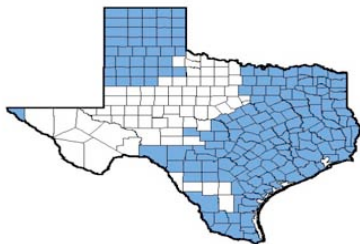
PROGRAM SUMMARY AND PURPOSE

HHSC awarded sixteen grants through the Local HIE Grant Program to support new or expanding community HIEs. The program was created to partially fund the planning, development, and operations of local or regional HIE networks. Grants were awarded to qualifying HIEs to:

- Develop a business and operational plan for upgrading or implementing HIE infrastructure to deliver core HIE services and to implement required policies and standards;
- Upgrade or implement HIE infrastructure to deliver core HIE services and implement policies and standards; and
- Monitor and evaluate HIE impact to inform sustainability planning.

Supporting the Development of Local HIE Networks

Program Details



Prior to 2011, several HIE initiatives had already independently developed strategies to coordinate and improve care in local Texas markets. The HHSC and the THSA on the foundation of these efforts in 2011 by implementing a Local HIE Grant Program to provide partial funding for the planning, implementation, and operations of local HIE initiatives and networks. The Local HIE Grant Program is being administered by HHSC with support from THSA. HHSC released a Request for Applications (“RFA”) in December 2010 and made resulting planning grant awards to 16 HIEs. The map to the left depicts the geographic coverage that will be supported through the Local HIE Grant Program. The awardees are committing to connect 45,197 physicians (or 92%

of all Texas physicians) and 556 hospitals (or 88% of all Texas hospitals).

The organizations listed below conducted a planning process and submitted a B&O Plan to the THSA and HHSC. The THSA reviewed and made recommendations to HHSC on all program reports and B&O Plans submitted by the HIEs, and participated in calls with the HIEs based on those recommendations. THSA also conducted three audits of letters of commitment the HIE reported having received from providers, and consulted with the HHSC on program guidance to be issued to the HIEs on various issues related to the grant program.

Program Awardees

Coalition of Health Services (Amarillo)	Health Information Network of South Texas (Corpus Christi)
Montgomery County HIE	North Texas Red River HIE (Gainsville)
FirstNet HIE (Tyler)	HIE Southeast Texas (Beaumont)
North Texas Accountable Health Care Partnership (Dallas/Fort Worth)	Rio Grande Valley HIE (Harlingen)
Greater Houston HIE	Integrated Care Collaboration (Austin)
Northeast Texas HIE (Texarkana)	Rio One Health Network (Edinberg)
Healthcare Access San Antonio	iHealth Trust (Houston)
Paso del Norte HIE (El Paso)	Southeast Texas Health System (Goliad)

Program Resource Links

- [Local HIE Grant Program RFA](#)
- [Local HIE Profile Sheets](#)
- [Approved B&O Plans](#)

STRATEGY #2: WHITE SPACE CONNECTIVITY

PROGRAM SUMMARY AND PURPOSE

The THSA established a marketplace of qualified HISPs to provide lite HIE connectivity services to physicians and hospitals located in counties that do not have a local HIE, otherwise referred to as the “White Space” in Texas. These HISPs must provide the electronic capabilities for the transmission of all clinical transactions necessary for meaningful use of electronic health records in accordance with recognized federal and state standards. Initially, this includes the transmission of clinical care summaries and lab results.

Supporting Connectivity in Rural Texas

Program Details

The THSA established a marketplace of qualified HISPs to provide lite HIE connectivity services to physicians and hospitals located in counties that do not have a local HIE, otherwise referred to as the “White Space” in Texas. A health information service provider, or HISP, is an organization that supports the secure transport, on behalf of the sending or receiving organization or individual of structured or unstructured data (e.g., simple text and PDF, semi-structured text, and highly structured messages and documents) by adhering to federal technical standards and operational policies as well as additional THSA imposed requirements as included in the THSA agreement with HISPs.



The HISPs qualified to participate in the marketplace must provide the electronic capabilities for the transmission of all clinical transactions necessary for meaningful use of electronic health records in accordance with recognized federal and state standards. Initially, this includes the transmission of clinical care summaries and lab results.

There are about approximately 160 hospitals and 3000 physicians located in the Texas White Space counties. Currently, \$2 million in total funds is available to support the White Space strategy. All HISPs participating in the marketplace are eligible to receive a subsidized payment from the THSA based on the number of eligible hospitals and physicians located in the identified White Space counties (see map on the left) that each HISP is able to connect. The subsidy, or voucher, is in the amount of \$400 per White Space physician connected and \$5000 for each White Space hospital connected.

The voucher is intended to act as a subsidy, and the HISPs may not charge participating physician or hospitals for any services until the voucher funds have been expended on those services. However, once those funds have been expended, HISPs may charge physicians and hospitals directly for their services, in accordance with the HISP's published pricing available on the THSA website.

Program Resource Links

- [White Space Program](#)
- [White Space RFO](#)
- [White Space Fact Sheet and Q&A](#)

STRATEGY #3: GENERAL STATE-LEVEL OPERATIONS

SUMMARY AND PURPOSE

To support a transparent and collaborative governance structure to coordinate the implementation of HIE in Texas, develop policies and guidelines, and provide state-level shared services.

Supporting State-Level Governance, Planning, and Technical Services

Strategy Detail

The THSA, in partnership with the HHSC, is supporting state-level operations to enable the establishment and operations of HIE capacity statewide. This includes administration of the THSA and the implementation of the governance structure developed in the planning process, which includes the establishment of a Collaboration Council and task forces. This governance structure is being used to identify core HIE services, with an initial priority focus placed on electronic prescribing, receipt of structured lab results, and electronic exchange of clinical summaries. Over time, additional services may be pursued based on value to patients and providers, as well as any services required by federal meaningful use Stage 2 and Stage 3 requirements as they are published.

State-level operations will also include establishing and maintaining required policies and standards for health information organizations (HIOs) or regional health information organizations (RHIOs). This includes establishing and maintaining interoperability and technical standards, financial and business practices, and a process for developing and maintaining privacy and security policies. The THSA recognizes that privacy and security standards are a high priority for state lawmakers and will serve as a resource in state-level policy development. HHSC is committed to studying the privacy needs of Texas citizens to aid in the development of policies for the state that will respect the public's desires.

Finally, the state-level HIE strategy includes the development and administration of a statewide evaluation and sustainability plan, and the development of state-level shared services.

Statewide Policy Guidance - Development and Approval Process

The THSA has formed several stakeholder task forces to monitor ongoing developments related to HIE capabilities including data standards, security, and technical architecture, and to provide input to the THSA Collaboration Council on common policies and procedures, standards, technical approaches, and shared services. The Collaboration Council's role is to help provide oversight of the implementation of HIEs within the state and provide recommendations to the THSA Board of Directors. The Board of Directors will consider the policies and other recommendations developed through this collaborative process and issue Statewide Policy Guidance to local HIEs and other contractors as necessary to support a common and consistent technical, privacy, security, and legal framework for HIE in Texas. Statewide policy guidance may be issued on an interim basis by HHSC for state funded local HIEs if necessary. Guidance developed through this process will be reviewed on a regular basis.

Resource Links

- Statewide Collaborative Policy Development Process
- [Texas HIE Interoperability Guidance](#)
- Texas Privacy and Security Primer and White Papers
 - ◆ [Primer - Medical Information Privacy Protections in Texas](#)
 - ◆ [Consent Options for HIEs in Texas](#)
 - ◆ [Recommendations for Texas Health Information Trust Agreements](#)
 - ◆ [Implementing Privacy and Security Standards in Electronic Health Information Exchange](#)

HIE Implementation Timeline: Key Activities and Tasks for 2010 - 2013

	CY 2010		CY 2011			
	Q3	Q4	Q1	Q2	Q3	Q4
General State-Level Services	Establish governance structure	Administer governance structure				
	Identify core HIE services	Monitor implementation of core HIE services				
		Establish required policies and standards for local/regional HIEs	Maintain policies and standards for local regional HIEs			
		Establish interoperability and other technical standards	Maintain interoperability and other technical standards			
Local HIE Grant Program	Develop and distribute RFA		Evaluate applications and made grant awards	Local HIE Planning		
White Space Coverage		Develop and distribute white space RFQ			Evaluate proposals and execute agreements with white space HISPs	

	CY 2012				CY 2013			
	Q1	Q2	Q3	Q4	Q1	Q2	Q3	Q4
General State-Level Services	Develop shared state-level services	Implement shared state-level services	Operate shared state-level services		Evaluate	Sustainability dialogue, development of sustainability model	Transition to sustainability	
Local HIE Grant Program	Local HIE implementation							
White Space Coverage	White space HIE implementation							

THSA Financials

Statement of Assets, Liabilities and Net Assets - Accrual Basis Unaudited Financial Statements as of September 30, 2011

ASSETS:	
Current Assets	
Cash in bank	\$ 1,090,350.89
Accounts Receivable	12,291.95
Total Current Assets	1,102,642.84
Property and Equipment	
Furniture	8,515.86
Computers and Equipment	11,062.86
Office Equipment	2,734.00
Less: Accumulated Depreciation	(3,175.77)
Total Property and Equipment	19,136.95
Other Assets	
Security Deposits	2,118.88
Prepared Insurance	1,321.50
Total Other Assets	3,440.38
Total Assets	\$ 1,125,220.17
LIABILITIES AND NET ASSETS:	
Liabilities:	
Accounts Payable	\$ 292.20
Credit Card	217.76
Total Current Liabilities	\$ 509.96
Other Current Liabilities	
HHSC Deferred Income	\$ 1,105,427.81
Total Liabilities	\$ 1,105,937.77
Net Assets:	
Net Assets Beginning of Year-Restricted	-
Net Assets Beginning of Year	3,017.31
Current Year Net Revenues	16,265.09
Total Net Assets	\$ 19,282.40
Total Liabilities and Net Assets	\$ 1,125,220.17

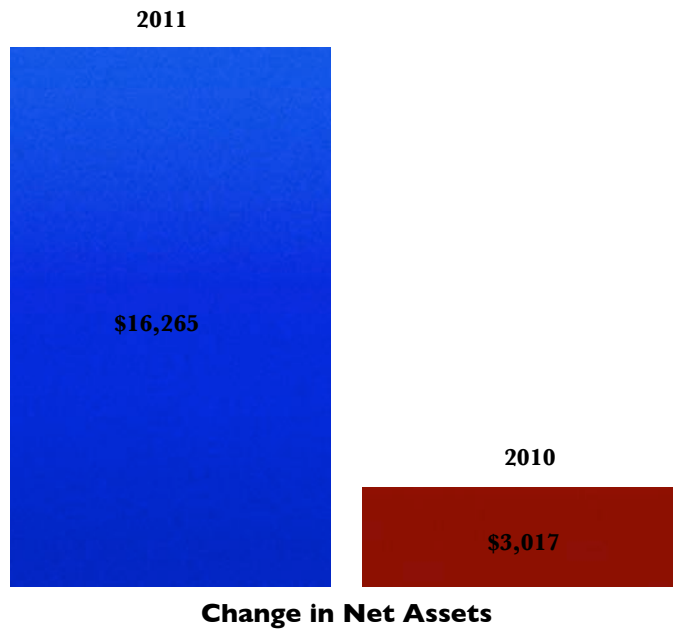
THSA Financials

Statement of Activities

Unaudited Financial Statements Year Ended September 30, 2011 and 2010

	2011	2010	Difference
REVENUES			
Health and Human Services ARRA Federal Grant	\$ 582,775.04	\$ 888,636.41	\$ 305,861.37
Interest Income	\$ 42.21	\$ 0.00	\$ 42.21
Donations	0.00	1,000.00	1,000.00
Total Revenues	582,817.25	889,636.41	306,819.16
EXPENSES			
Personnel Costs	272,810.00	57,321.20	215,488.80
Fringe Benefits	38,321.24	4,441.06	33,880.18
Travel	12,814.59	2,920.84	9,893.75
Office Space and Expenses	24,492.93	2,635.64	21,857.29
Supplies	3,273.89	812.19	2,461.70
Professional Services	55,259.36	16,541.54	38,717.82
Consultant Services	140,000.00	800,000.00	(660,000.00)
Depreciation Expenses	3,024.51	151.26	2,873.25
Communication	10,420.53	1,020.37	9,400.16
Insurance	5,578.20	0.00	5,578.20
Fees	556.91	775.00	(218.09)
Total Expenses	566,552.16	886,619.10	(320,066.94)
Change in Net Assets	16,265.09	3,017.31	13,247.78

2011 Net Assets



Frequently Asked Questions

What is health information exchange (HIE)?

The electronic movement of health-related information among organizations according to nationally recognized standards.

Why is Texas implementing HIE?

The American Recovery and Reinvestment Act (ARRA) provides incentives for eligible Medicaid and Medicare providers and hospitals to encourage adoption of electronic health records (EHRs). In order to fully qualify for these incentives, providers and hospitals must make “meaningful use” of the EHRs by exchanging clinical health data across secure networks. Implementing HIE statewide will help to ensure Texas providers and hospitals are eligible to receive billions in meaningful use incentive payments over the next decade. In the long-term, Texas has an opportunity to leverage technology to improve the quality, safety, and efficiency of the Texas health care sector while protecting individual privacy.

What is meaningful use?

The Center for Medicare and Medicaid Services has published a regulatory rule that provides guidelines to health professionals and hospitals on how to adopt and use electronic health records in a meaningful way to help improve the quality, safety, and efficiency of patient care.

How does HIE improve the quality, safety, and efficiency of health care?

Interconnecting clinical providers and patients through a secure, electronic system that ensures confidentiality through appropriate levels of patient consent will help to ensure providers have the right information at the right time. Access by authorized providers to existing clinical information about patients will enable physicians and other clinicians to provide better care, reduce duplicative tests, and avoid adverse drug events, among other things. Providers will also have access to up-to-date clinical research and new clinical guidelines to use when making medical decisions. Ultimately, patients will receive higher quality care and have access to additional information so that they can better manage their personal health care.

Who will pay for HIE after the end of the federal grant?

Texas is taking a market-based approach on how HIE is financed after the grant funding is expended. Future financing for HIE will be supported by health care stakeholders such as health plans, physicians, and hospitals, and will be determined based on the value HIE offers these stakeholders.

What about patient privacy?

Federal and state laws protect the privacy and confidentiality of patient health information. The THSA, with input from stakeholders and the Texas Legislature, will develop uniform policies and guidelines to protect the privacy and security of personal health information exchanged between authorized health care providers in Texas. The THSA believes the patient and consumer should be the focus of all other efforts in health information technology. Patient control and ownership of personal health information must be protected and patient privacy must be respected. Health information technology has great potential to benefit health outcomes for consumers, but not at the risk of violating personal privacy.

What is Texas' White Space Program?

The THSA established a marketplace of qualified HISPs to provide lite HIE connectivity services to physicians and hospitals located in counties that do not have a local HIE, otherwise referred to as the “White Space” in Texas. These HISPs must provide the electronic capabilities for the transmission of all clinical transactions necessary for meaningful use of electronic health records in accordance with recognized federal and state standards. Initially, this includes the transmission of clinical care summaries and lab results.

\$2 million in total funds is available to support the White Space strategy. All HISPs participating in the marketplace are eligible to receive a subsidized payment from the THSA based on the number of eligible hospitals and physicians located in the identified White Space counties that each HISP is able to connect. The subsidy, or voucher, is in the amount of \$400 per White Space physician connected and \$5000 for each White Space hospital connected. There are about 160 hospitals and 3000 physicians located in the Texas White Space counties.

Frequently Asked Questions

What counties comprise Texas' White Space region?

Andrews, Archer, Baylor, Borden, Brewster, Brown, Callahan, Clay, Coke, Coleman, Comanche, Concho, Cooke, Cottle, Crane, Crockett, Culberson, Dawson, Dimmit, Duval, Eastland, Ector, Erath, Fisher, Foard, Gaines, Glasscock, Hardeman, Haskell, Hood, Howard, Hudspeth, Irion, Jack, Jeff Davis, Jones, Kent, Kimble, Knox, La Salle, Loving, Martin, Maverick, McCulloch, McMullen, Midland, Mitchell, Montague, Nolan, Palo Pinto, Pecos, Presidio, Reagan, Reeves, Runnels, Schleicher, Scurry, Shackelford, Somervell, Stephens, Sterling, Stonewall, Sutton, Taylor, Terrell, Throckmorton, Tom Green, Upton, Ward, Wichita, Wilbarger, Winkler, Young, and Zavala.

What is a HISP?

A health information service provider, or HISP, is an organization that supports the secure transport of structured or unstructured data (e.g., simple text and PDF, semi-structured text, and highly structured messages and documents) on behalf of the sending or receiving organization or individual.

Why should an eligible hospital or physician consider using a HISP?

All HISPs qualified by the THSA offer simple and affordable secure clinical messaging solutions for the transport of clinical information between providers. The services offered by each qualified HISP enable hospitals and physicians to achieve federal HIE Stage 1 electronic health record meaningful use requirements by facilitating electronic lab results delivery and facilitating electronic exchange of patient care summaries across unaffiliated organizations.

Who pays for HISP services?

All HISPs participating in the marketplace are eligible to receive a subsidized payment from the THSA based on the number of hospitals and eligible physicians located in the identified White Space counties that each HISP is able to connect. The subsidy, or voucher, is in the amount of \$400 per White Space physician connected and \$5000 for each White Space hospital connected.

The voucher is intended to act as a subsidy, and the HISPs may not charge participating physician or hospitals for any services until the voucher funds have been expended on those services. However, once those funds have been expended, HISPs may charge physicians and hospitals directly for their services, in accordance with the HISP's published pricing available on the THSA website.

How were the HISPs qualified?

The THSA issued a Request for Qualifications (RFQ) with the expectation that we would receive responses from multiple HISPs, at least some of which were capable of serving all or a portion of the physicians and hospitals in the White Space counties.

Applications were evaluated for quality, cost, readiness, coverage, and stated willingness to deliver core services, implement required interoperability and privacy and security policies and standards, and participate in program evaluation. "Readiness" means that we expect that qualified HISPs are capable of supporting HIE services today, and particularly those services that are required to enable physicians and hospitals to achieve federal HIE Stage 1 meaningful use requirements: facilitating electronic lab results delivery and facilitating electronic exchange of patient care summaries across unaffiliated organizations.

HISPs' applications in response to the White Space RFQ were evaluated using a multi-step process. In the first step, a team of reviewers from THSA and HHSC reviewed each response against a list of requirements from the RFQ and scored each response based the extent to which the HISP appeared to be capable of meeting those requirements. The THSA and HHSC then issued clarifying questions to those prospective HISPs who appeared to be capable of meeting the threshold requirements. Based on the answers to those questions, certain prospective HISPs were selected to proceed to the final stages of the evaluation process, which included an interview, live demonstration, and a technical capabilities test. All qualified HISPs have signed a Uniform HISP Agreement with the THSA.



Looking Ahead to 2011

In 2011, the goals of the THSA focused on implementing statewide HIE by supporting planning for the development of local HIE networks, implementing a connectivity solution for rural providers, and by managing a collaborative and transparent governance process to develop key policies and procedures. THSA's focus in 2012 will be to support the following key strategies:

Governance and Administration

- Administer an open and transparent governance structure through the THSA Board of Directors.
- Administer and support the Collaboration Council and task forces as necessary to maintain existing policies and support coordination and development of consensus among stakeholders on future areas of policy development.
- Ensure financial and contract management and oversight.
- Support financial planning to support HIE sustainability following expenditure of all grant funding.

Technical Services

- Establish and maintain state-level shared services to support HIE-to-HIE connectivity, HIE-to-HISP connectivity, and gateway services to state level data sources and the Nationwide Health Information Network.
- Establish and maintain required policies and standards for local HIE networks and state-level HIE contracts, including privacy and security policies and interoperability and other technical standards.

Program Support

- Implement the White Space strategy and monitor HISP compliance with program requirements.
- Assist with ongoing monitoring of Local HIE Grant Program awardees and monitor program compliance.

Communications

- Ensure clear communication of THSA strategies to the public and stakeholders.

THSA STAFF

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