



Pennsylvania eHealth Initiative 2009 Strategic Plan Final Report

**Approved by
PAeHI Board of Directors
June 17, 2009**

Pennsylvania eHealth Initiative
www.paehi.org

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2009 Strategic Plan Final Report
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Executive Summary

This 2009 Pennsylvania eHealth Initiative (PAeHI) Strategic Plan has grown out of the concerted efforts of many committed volunteer healthcare professionals who, for more than four years, have rallied in support of PAeHI's mission to enable the use of information technology to improve healthcare quality and efficiency and ensure patient safety for all Pennsylvanians; and ensure secure, confidential access to health information to enable individuals and communities - and their care providers - to make the best possible health decisions.

Building on the PAeHI's first strategic plan "Connecting Pennsylvanians for Better Health: Recommendations from the Pennsylvania eHealth Initiative" (April 25, 2007), this Strategic Plan calls on PAeHI to reach for a higher level of commitment and leadership in driving and measuring the meaningful use of health information technology in Pennsylvania. In January 2009, PAeHI held a two-day strategic planning retreat with representatives from fifty leading healthcare stakeholders from across the state. In consultation with the PAeHI Board of Directors, retreat participants, and virtual contributors, a core PAeHI Strategic Plan Development Team was formed. Their efforts led to the development of a new strategic plan around three strategic and tactical themes for PAeHI: **Leadership Forum**, **Balanced Scorecard** (Best Practices and Reporting Metrics) and **Communications/Education**. Under this plan, PAeHI will:

- ✓ Facilitate widespread adoption of HIT and HIEs throughout Pennsylvania by: identifying and addressing key challenges and barriers to utilizing health information technology; and researching and highlighting promising and appropriate applied technology-enabling healthcare delivery and community health, and innovative adoption of HIT.
- ✓ Promote the establishment of regional HIEs by supporting established collaborative HIEs and fostering and assisting instituting new ones at a regional level.
- ✓ Convene the diverse array of potential providers, state governmental and consumers of HIE services to establish common measures and standards for HIE-related value-added services.
- ✓ Use a balanced scorecard methodology to evaluate and report on the progress of health information technology in Pennsylvania.
- ✓ Use a balanced scorecard methodology to monitor and measure its own organizational performance.

- ✓ Communicate and educate regarding health information technologies and their developments from a comprehensive and unique collaborative vantage point.

The following pages describe in greater detail PAeHI's role in fostering the widespread meaningful use of health information technology in Pennsylvania. Building on this Strategic Plan, PAeHI's leadership and diverse membership have begun work on creating PAeHI's first operating plan - a roadmap for achieving PAeHI's strategic goals, which will be updated on an annual and recurring basis. PAeHI's operating plan will describe elements such as the governing structure, vision, mission, population characteristics, and an overview of specific programs/initiatives, required resources and a timeframe for deliverables. Together, PAeHI's Strategic and Operating plans will constitute a "living document" which will allow for the organization to better plan for and successfully help shape and adapt to the future of healthcare in Pennsylvania.

I. Introduction

The Pennsylvania eHealth Initiative (PAeHI) is Pennsylvania’s electronic health information leader. PAeHI is a broad statewide coalition (non-profit) of health care stakeholders (public/private partnership) dedicated to fostering the adoption and implementation of standards-based electronic medical records across the state and to enable the timely and efficient sharing of patient information by means of health information exchange for the benefit of all Pennsylvanians.

II. PAeHI Mission and Values

The Pennsylvania eHealth Initiative (PAeHI) was created in 2005 as a voluntary, public-private, non-profit coalition to bring together Pennsylvania’s healthcare and Business stakeholders to develop a vision and a plan for the future of health information technology and the secure exchange of health information in Pennsylvania. The Hospital & Healthsystem Association of Pennsylvania, the Pennsylvania Medical Society, and Quality Insights of Pennsylvania provided early leadership and financial support. Governed by a representative board of directors, PAeHI offers a neutral forum for the health IT community to work together for a common mission—to improve patient care through the effective use of Health Information Technology (HIT).

PAeHI Mission Statement:

“The mission of the corporation is to: (a) Enable the use of information technology to improve healthcare quality and efficiency and ensure patient safety for all Pennsylvanians; (b) Ensure secure, confidential access to health information to enable individuals and communities to make the best possible health decisions.”

PAeHI is committed to fulfilling its mission as guided by the following principles:

Guiding Principle 1: Patients come first.

Guiding Principle 2: Consumer privacy, security and confidentiality are paramount.

Guiding Principle 3: Multi-stakeholder collaboration is needed to implement achievable and measurable initiatives in order to show early progress and value.

III. Strategic Planning—2007 and 2009

In 2007 PAeHI began its first strategic planning process which culminated in the publishing of *Connecting Pennsylvanians for Better Health: Recommendations from the Pennsylvania eHealth Initiative* (April 25, 2009), a blueprint for moving both the organization and healthcare forward in Pennsylvania. In the same year, Governor Rendell introduced his “Prescription for Pennsylvania” legislative proposal, in which the need for extending health information technology was highlighted:

“...Electronic health records are known to reduce errors by making patient information more complete and available to healthcare providers in a more timely manner, so quicker and more accurate decisions can be made...The Chronic Care Model must include...tracking clinical information of individual patients and a population of patients to help guide the course of treatment, anticipate problems and track problems...”

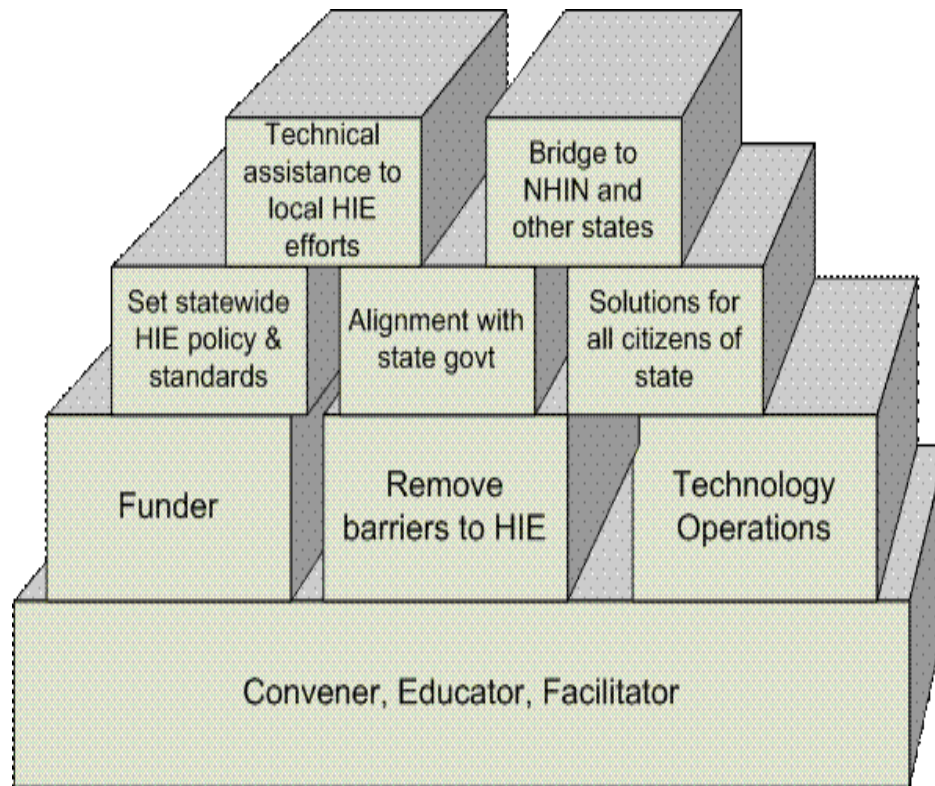
Also in 2007, in the Pennsylvania General Assembly, Senator Rob Wonderling (R-Montgomery) introduced Senate Bill 8, which sought to create the Medical Safety Automation Fund to provide matching grants to healthcare providers and local health information organizations to implement electronic health systems that improve healthcare quality, reduce medical errors, and advance the delivery of patient-centered medical care.

PAeHI’s 2007 strategic planning process concluded, in concert with both state and federal championing of electronic health records, that the adoption and evolution of the electronic health record was paramount in promoting HIT overall and ultimately realizing a future of healthcare in Pennsylvania in which:

- The process of delivering care was improved.
- Healthcare data was moved out of “silos” and exchanged among authorized users in a systematic way.
- Aggregated patient data were used to continuously improve the quality of care and assure patient safety.
- Pennsylvania citizens were empowered by having a personal health record that would be part of an overall network of information resources.

Collaborative Role of PAeHI

In 2006, the Foundation for Organization Research and Education (FORE) of AHIMA identified characteristics, and models for state level efforts and provided consensus recommendations and guidance. The PAeHI board acknowledged these potential roles (see diagram at top of next page) within its report “Connecting Pennsylvanians for Better Health”.



Expanding upon the blocks and roles, outlined above, PAeHI accepted in their 2006 report, the planning process has expanded upon the “blocks” to include the findings and functions from the outcome of its 2009 Planning Process. Further, through the 2007 strategic planning process, PAeHI identified the following key foundational roles that it would assume to promote increased adoption of HIT and HIE:

1. Identify opportunities for Pennsylvanians to use health IT and HIE to improve healthcare.
2. Educate the public providers and policy makers regarding the benefits and challenges of health IT and HIE.
3. Assist in the coordination of health IT efforts among Pennsylvania healthcare stakeholders.
4. Identify opportunities to coordinate with and benefit from federal initiatives.
5. Develop statewide consensus on established and emerging standards (e.g. data, communications and reporting).
6. Work with providers, payers, policy makers to define business cases (including return on investment) for health IT and HIE.

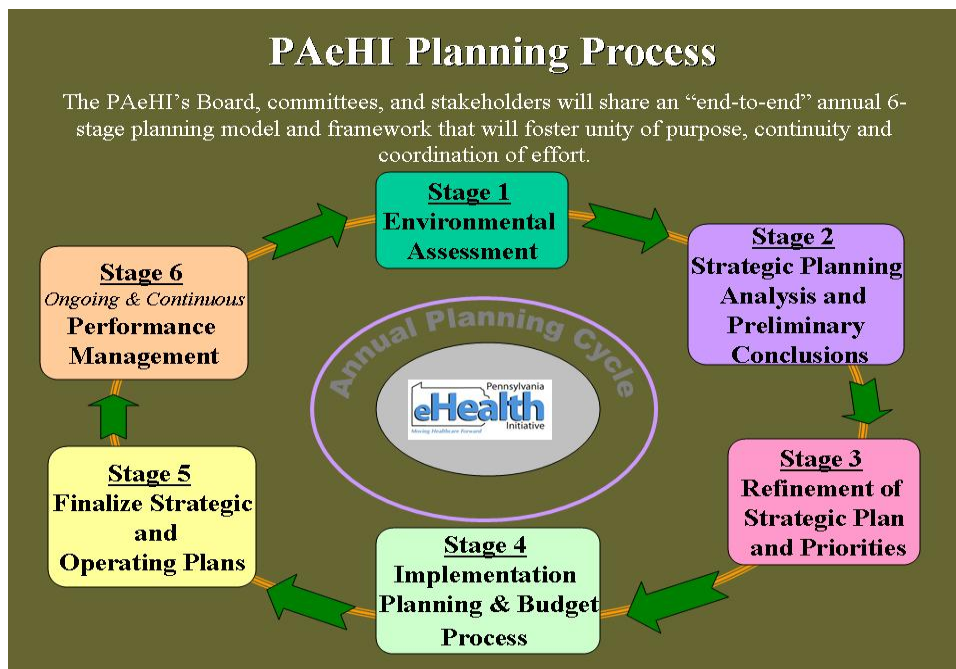
IV. Strategic Planning Committee and Stakeholder Participation

By the end of 2008, while PAeHI had many accomplishments in its short history, the organization determined that it would do well to consider how it might build on its work to date and make more significant gains. This message was resoundingly reiterated in interviews with our Board members and stakeholders conducted in the fall of 2008.

As PAeHI prepared for 2009, the Board appreciated that we are entering an exciting era that offers unprecedented opportunity. The Obama Administration has publicly declared a commitment to health technology as an essential ingredient of effective, inclusive healthcare, demonstrated boldly through the HITECH Act in February 2009. Further, health care organizations are being affected by a downturn in the US and global economy, and the growing population of senior adults in the US. Both are contributing tremendous strains on healthcare in the US.

Thus, PAeHI initiated a second strategic planning process intended to provide a blueprint for how the organization could take its work to a new level and thoughtfully and assuredly exploit the opportunities, yet address the challenges unfolding in healthcare. The following graphic depicts PAeHI’s “end-to-end” strategic planning process that features the participation and consensus of PAeHI stakeholders.

(The timeline and description of PAeHI’s 2009 strategic planning process is provided in this document’s appendix.)



V. Strategic Functions and Goals

PAeHI's 2009 strategic planning process resulted in establishing the following strategic functions and goals:

Strategic Function 1: Leadership and Coordination

Theme: Facilitate widespread adoption of effective HIT and sustainable HIEs in Pennsylvania.

Goals: PAeHI seeks to accelerate the use of effective HIT in Pennsylvania and will be the catalyst for supporting, identifying and establishing collaborative activities around regional HIEs.

1. PAeHI will facilitate widespread adoption of HIT and HIEs throughout Pennsylvania by:
 - a. Identifying and addressing key challenges and barriers to utilizing health information technology.
 - b. Researching and highlighting promising and appropriate applied technology-enabling healthcare delivery and community health, and innovative adoption of HIT.
2. PAeHI will promote the establishment of regional HIEs by supporting established collaborative HIEs and fostering and assisting instituting new ones at a regional level. PAeHI has documented potentially over thirteen HIE efforts occurring in Pennsylvania in varying stages of development or maturing in different levels for different purposes. The PAeHI will be the central function to identify and foster HIEs in Pennsylvania.
3. PAeHI will be a multi-stakeholder organization (e.g. representing providers payers, employers, consumers, vendors state government) with statewide collaborative capability to promote the creation and use of HIEs and HIE services.

Strategic Function 2a: Balanced Scorecard – Statewide Activity

Theme: Monitor and measure HIT/HIE progress and adoption in Pennsylvania

Goals: Through its efforts under the Leadership and Coordination function, PAeHI will advance the deployment and use of health information technology and health information exchanges in Pennsylvania. However, it is also important to reveal the extent to which Pennsylvanians are benefiting from widespread and diverse investments in HIT/HIE and EHRs occurring in the state. Thus, PAeHI will leverage its work to advance HIT and HIE adoption to both monitor the diffusion of health technology in Pennsylvania and to measure its impact.

PAeHI will apply the balanced scorecard methodology to evaluate and report on the progress of health information technology in Pennsylvania. The organization will engage its membership and stakeholders in establishing metrics for measuring HIT/HIE adoption and performance. PAeHI intends to issue its first balanced scorecard report in January 2011.

PAeHI will issue a “Balanced Scorecard for HIT and HIE Performance in Pennsylvania” providing analysis framed by the following perspectives:

- *Patient and Community*
 - Studies reveal that Americans support the use of electronic medical records - despite reservations about privacy and security - because they believe this technology will assist their physician in managing their care. As Pennsylvanians become increasingly aware of health information technology, it will be important to understand what they expect of HIT and the extent to which these expectations are being met. PAeHI will engage its board, stakeholders and committees to accomplish these goals.
 - Health information exchange promises not only to facilitate communication among providers and clinical services, but also could yield insight into the health of populations and communities. It is worth examining how HIT/HIE may be ushering in a new era of public health in Pennsylvania. The PAeHI is currently working collaboratively with the Governor’s Office of Health Care Reform and the Health Department. The PAeHI is the only advisory program named by the Pennsylvania Health Information Exchange (PHIX). The Governor’s office, General Assembly and the Department of Health each have formal representation on the PAeHI board and committees.
- *Financial*
 - The economic return of HIT/HIE in the United States is an unfolding story. Healthcare institutions report varying amounts of cost savings as a result of implementing HIT. Still, there can be no doubt of the importance of describing the economic and non-economic benefits and costs of HIT/HIE in Pennsylvania.
- *Operational*
 - As HIT/HIE develops and expands in Pennsylvania, it will be important to describe the extent to which the vision of connectivity is being realized.
 - Pennsylvania will also need to comply with Federal performance indicators for HIT/HIE.
- *Development and Continuous Quality Improvement*
 - While technology is not the solution for all problems and challenges in healthcare, through technological innovations and operational improvements it can do an increasingly better job at solving the problems for which it’s suited.
 - Additionally, some challenges in healthcare will persist and new needs may emerge. Pennsylvanians will want to understand how HIT/HIE continues to evolve to meet the demands of the changing healthcare environment.

Strategic Function 2b: Balanced Scorecard – Organizational Management

PAeHI will also use the balanced scorecard tool to monitor and measure its organizational performance. The organization will use its balanced scorecard not only for internal management, but also to help the PAeHI communicate its value and significance in Pennsylvania. PAeHI will establish organizational performance metrics in the following areas:

- *PAeHI Members and Stakeholders*
 - PAeHI's strategic planning process reiterated the strong interest PAeHI members and stakeholders have in the organization. PAeHI does not take this interest for granted. Rather, PAeHI will continually cultivate member and stakeholder support and involvement as the organization aggressively pursues its mission to improve the health of Pennsylvanians by promoting the advancement of effective HIT/HIE.
- *Financial*
 - Funds paid to PAeHI are investments in the organization's mission and its service to Pennsylvanians. PAeHI's Board of Directors and staff will surely continue to manage resources to ensure that the organization is well-equipped to deliver programs and services now and in the future. PAeHI will secure sufficient and sustainable funding and demonstrate how these funds are used effectively.
- *Operational*
 - As PAeHI's portfolio of activities and programs develops, the organization will continue to set and strive to exceed standards of operational efficiency and programmatic effectiveness.
- *Continuous Improvement*
 - Organizations that remain vibrant and responsive to community needs and environmental changes are ones that continue to learn and to improve on their work. Continuous improvement is already a trait in PAeHI's corporate DNA. PAeHI will express this trait fully as it implements and refines its processes for monthly management review and annual operations planning.

Strategic Function 3a: Communication and Education - Statewide Activity

Theme: Build on and use PAeHI's intellectual capital and expertise to create a communication and education enterprise that informs healthcare stakeholders in Pennsylvania and fosters their participation in HIT/HIE and in PAeHI activity.

PAeHI has established an enviable reputation for providing timely and thorough information about developments in the HIT/HIE arena. The organization enjoys a growing audience for its quarterly All-Committee meetings and whitepapers.

This illustrates the fact that as result of its relationships and work with stakeholder organizations and individuals, state and federal officials, and national policy organizations, PAeHI can communicate and educate about health information technologies and their developments from a unique vantage point. PAeHI has had successful collaborations with a number of leading professional IT organizations including HIMSS, AHIMA and TECHQuest. Thus, utilizing its collaborations and convener role, PAeHI can offer opportunity for information and knowledge exchange among stakeholders in Pennsylvania.

Strategic Function 3b: Communication and Education - Marketing

Theme: PAeHI must continue to be a visible and accessible organization in Pennsylvania. This can only be accomplished if the organization maintains a robust communication and marketing enterprise.

Goals: PAeHI will build on the capabilities of its Communication and Education Committee which has the following goals:

1. Educate stakeholders about the benefits of utilizing healthcare information technology (HIT) (including but not limited to EMRs, EHRs, PHRs and Registries) and electronic health information exchange (HIE) to provide safer, higher quality care.
2. Develop the capacity and recognition to be the statewide resource for objective, accurate information about HIT.
3. Facilitate broad awareness of locally sponsored initiatives with exchange of ideas leading to a common vision for statewide HIE.
4. Serve as a resource to PAeHI to develop and approve promotional materials and presentations to ensure appropriate quality and consistency.

VI. Development towards an Operational Plan

PAeHI's operational plan will provide an overview of the organization's work and resource requirements. It will describe elements such as the governing structure, vision, mission, population characteristics, and an overview of specific programs/initiatives, required resources and a timeframe for deliverables. PAeHI will review its strategic plan and create an operational plan consistent with it annually.

PAeHI will leverage its committee and stakeholder members' work together with the Board and Executive Director and staff to accomplish the goals and objectives outlined in the annual operating strategy. Strategic planning is a continuous process for PAeHI that does not end at the development of our plan. Rather, that is the beginning of the process.

Those PAeHI Board, committees, and staff responsible for the achievement of key strategies in the 2009 plan will be engaged in the process of further developing the necessary components to implement the operational plan. They will identify specific actions to implement the strategies, timeframes for key milestones, resources needed, and measures of achievement.

Appendix A. Strategic Planning Process Timeline

February 2008 - Pursuant to the objectives stated in “Connecting Pennsylvanians”, and at the request of the Governor’s Office of Health Care Reform, PAeHI publishes two white papers on HIE Sustainability and EHR/eRx Adoption, respectively

March 2008 - The first Statewide HIE, the PHIX Program, created by Governor Rendell Executive Order

May 2008 - First PA Healthcare IT Advocacy Day sponsored by HIMSS, co-sponsored by PAeHI and other organizations

August 2008 - S.M.A.R.T Goals Exercise begins with standing committees under the direction of marketing & planning consultant firm AdAbility

September 2008 - Board votes to create Strategic Planning Committee, Ellen Marshall and Mark Jacobs named Co-Chairs

October - December 2008 - Board and Stakeholder Interviews conducted on the impact and strategic direction of PAeHI, summary reports issued AdAbility (Stakeholders) and Ellen Marshall (Board)

January 15 & 16, 2009 - Two-day Strategic Planning Retreat with four dozen total attendees, hosted by HAP, with “Question-Thinking” Presentation and facilitation by Dr. Marilee Adams, included presentations, group deliberations and idea/solution identification.

February 2009 - Strategic Plan Development Team and volunteer “Group of 70” convened to review the results from the strategic planning retreat and describe

PAeHI Strategic Plan Development Team Goal: *Identify the unique contribution(s) that PAeHI can make to the well being of all Pennsylvanians by enabling all healthcare stakeholders to improve their use of healthcare information and knowledge.*

Unique PAeHI Contributions/Roles Identified by Team:

1. *Leadership and Coordination*—PAeHI needs to clearly establish itself as the forum for all healthcare stakeholders to solve health information technology-related adoption and use problems locally and across the state
2. *Balanced Score Card*—PAeHI needs to develop the plan from which we are going to move healthcare forward in Pennsylvania and measure progress.
3. *Communication and Education*—PAeHI need to educate healthcare providers and consumers on the value of electronic health records and health information exchange.

March 2009 - Pursuant to “Connecting Pennsylvanians” objectives, PAeHI publishes third white paper on Privacy & Security of HIE in PA; PAeHI receives its formal 501(c)(3) designation from the IRS

April 29, 2009 - Draft Strategic Plan issued

June 2009 - Strategic Plan to be released

July 2009 - PAeHI **Operational Plan** to be released

Appendix B. Actions/Outcomes Report

1	2	A	B	D	E	F	G	
	1				Accountable Party	Timeline Months		
	2	ACTION OUTCOME REPORT				Timeline Weeks	1	2
	3							
	9	GOAL 1 : PAeHI seeks to accelerate the use of effective HIT in Pennsylvania and will be the catalyst for supporting, identifying and establishing collaborative activities around regional HIEs.						
	10	1 PAeHI will facilitate widespread adoption of HIT and HIEs throughout Pennsylvania						
	11	Identify and addressing key challenges and barriers to utilizing health information technology						
	12	Research and highlight promising appropriate applied technology-enabling healthcare delivery and community health, and innovative adoption of HIT.						
	13	2 PAeHI will be a catalyst for the establishment of regional HIEs by supporting established collaborative HIEs and fostering and assisting instituting new ones at a regional level						
	14	3 PAeHI will be a statewide neutral organization with statewide collaborative capability to bring the diverse array of potential providers and consumers of HIE services to the table to establish common standards for HIE-related value-added services						
	15	Strategic Function 2.0: Balanced Scorecard - Statewide Activity						
	16	<i>PAeHI needs to develop the plan from which we are going to move healthcare forward in Pennsylvania and measure progress.</i>						
	17	PAeHI Board						
	17	Goal 1 : PAeHI will catalyze the deployment and use of health information technology and health information exchanges in Pennsylvania.						
	18	1						
	19	2						
	20	Goal 2 : PAeHI will leverage its work to advance HIT and HIE adoption to both monitor the diffusion of health technology in Pennsylvania and to measure its impact. Issue first Statewide report in 2011						
	21	1						
	22	2						
	23	Goal 3 : PAeHI will apply the balanced scorecard methodology to evaluate and report on the progress of health information technology in Pennsylvania. The organization will engage its membership and stakeholders in establishing						
	24	1 Patient and Community						
	25	2 Financial						
	26	3 Operational						
	27	4 Development and Continuous Quality Improvement						
	28	Strategic Function 2.1: Balanced Scorecard - Organizational Management						
	29	<i>PAeHI will also use the balanced scorecard tool to monitor and measure its organizational performance.</i>						
	29	PAeHI Board						
	30	Goal 1 : PAeHI will use its balanced scorecard not only for internal management, but also to help the PAeHI communicate its value and significance in Pennsylvania. PAeHI will establish organizational performance metrics in						
	31	1 PAeHI Members and Stakeholders						
	32	2 Financial						
	33	3 Operational						
	34	4 Continuous Improvement						
	35	Strategic Function 3.0: Communication and Education- Statewide Activity						
	36	<i>Build on and use intellectual capital and expertise to create a communication and education enterprise that informs stakeholders and fosters their participation in HIT/HIE</i>						
	37	1 Use PAeHI's intellectual capital and expertise to create a communication and education enterprise that informs healthcare stakeholders in PA and foster HIE Activity						
	38	Strategic Function 3.1: Communication and Education and Marketing						
	39	<i>Continue to be a visible and accessible organization in PA. This can only be accomplished if the organization maintains a robust communication and marketing enterprise</i>						
	40	Goal 1 : PAeHI will build on the capabilities of its Communication and Marketing Committee which has the following goals						
	41	1 Educate stakeholders about the benefits of utilizing healthcare information technology (HIT) (including but not limited to EMRs, EHRs, PHRs and Registries) and electronic health information exchange (HIE) to provide safer, higher quality care						
	42	2 Develop the capacity and recognition to be the statewide resource for objective, accurate information about HIT						
	43	3 Facilitate broad awareness of locally sponsored initiatives with exchange of ideas leading to a common vision for statewide HIE						
	44	4 Serve as a resource to PAeHI to develop and approve promotional materials and presentations to ensure appropriate quality and consistency.						
	45	Operationalizing - Straw Man Model						
	46	Goal 1 : Create a Tactical Identity with Phase I Staffing						

Appendix C. Glossary

AHIMA – American Health Information Management Association – **AHIMA** provides medical records professionals with educational resources and programs.

FORE - Founded by the AHIMA Foundation was originally founded in 1962 as the Foundation of Record Education or FORE. Today, the AHIMA Foundation is working to be the pre-eminent foundation recognized for excellence in health information leadership, policy and research for the healthcare industry and the public. The Foundation operates under the values of philanthropy, innovation, leadership and integrity

EHR – Electronic Health Record is related information on an individual that conforms to nationally recognized standards and that can be created managed and consulted by authorized clinicians and staff across more than one health organization

HIE – A Health Information Exchange is the electronic movement of health-related information among organizations according to nationally recognized standards

HIMSS - The Healthcare Information and Management Systems Society (**HIMSS**) is a healthcare industry membership organization focused on the optimal use of healthcare information technology (IT) and management systems. Founded in 1961 with offices in Chicago, Washington D.C., Brussels, Singapore, and other locations across the globe, HIMSS represents more than 20,000 individual members, 46 chapters and over 350 corporate members that collectively represent organizations employing millions of people. HIMSS operates through advocacy and educational and professional development initiatives designed to promote information and management systems' contributions to ensuring quality patient care.

HIT – Health Information Technology. Recently, the Office of the National Coordinator (ONC) enlisted the National Alliance for Health Information Technology to craft standardized definitions for five key HIT terms: EMR, EHR, personal health record (PHR), health information exchange (HIE), and regional health information organization (RHIO). The hope is to facilitate further adoption of electronic technology and establish information sharing groups designed to improve the quality of healthcare, as well as ensure their success and prevent any further confusion.

TechQUEST - Since 1998, TECHQuest (formerly known as the Technology Council of Central Pennsylvania) has been at the forefront as the trade association of technology industry, helping lead public policy, planning and development of programs and services to help our members and partners. We will continue to explore ways and means to improve the climate for technology and innovation for the smallest and largest companies and organizations in Pennsylvania.

PHIX - Pennsylvania has laid the foundation for a statewide health information exchange that will support interoperable electronic health records and e-prescribing. Gov. Edward Rendell signed an executive order March 26, 2008 establishing the governance structure for the Pennsylvania Health Information Exchange (PHIX).

Appendix D. Acknowledgements

2008 and 2009 PAeHI Board Members

The success of the Pennsylvania eHealth Initiative is due in large measure to the strength, insights, diversity and leadership of its dedicated volunteer Board of Directors. The following is a list of the PAeHI Board members for 2008 and 2009 that began, and actively participated in, the development of the Initiative's 2009 Strategic Plan:

Martin J. Ciccocioppo, The Hospital & Healthsystem Assn. of PA, Vice President, Research
Kenneth D. Coburn MD, Health Quality Partners, President, CEO and CMO
Sharon L. Dorogy, The Children's Institute, Director of Information Systems
Sen. Mike Folmer, Pennsylvania State Senate, Majority Chair of the Senate Comm. & Tech. Cte.
Steve Fox, Post & Schell PC, Partner
Scott Gillam, Highmark Inc., Director, eHealth Systems
William "Buddy" Gillespie, WellSpan Health System, Vice President and CIO
F. Wilson Jackson III MD, Jackson Siegelbaum Gastroenterology, Owner
Mark J. Jacobs, WellSpan Health System, Director, Information Technology
Dan Jones, Quality Insights of Pennsylvania, Chief Operations Officer
Darlene M. Kauffman, Pennsylvania Medical Society, Associate Director, Payer Relations
Don Levick MD, Lehigh Valley Hospital, Physician Liaison Information Services
Philip W. Magistro, Governor's Office of Health Care Reform, Deputy Director
Ellen Marshall, Camden Area Health Education Center (AHEC), Deputy Director
Elliot Menschik MD PhD, HxTechnologies Inc., President and CEO
Jay Srini, University of Pittsburgh Health Plan, Chief Innovation Officer
Jean B. Stretton MD, Gateway Medical Associates, President
Robert Torres, PA Department of Health, Deputy Secretary of Administration
James M. Walker MD, Geisinger Health System, Chief Medical Informatics Officer
Anthony Wilson, Pennsylvania Department of Health, Special Assistant to the Secretary

Strategic Plan Development Team

The Pennsylvania eHealth Initiative is indebted to Board members Ellen Marshall and Mark Jacobs for their foresight and leadership as co-chairs of PAeHI's Strategic Plan Development Team. Along with Ellen Marshall and Mark Jacobs, the following Strategic Plan Development Team members contributed many hours preparing for the 2009 Strategic Planning Retreat, synthesizing the input from the retreat participants and the virtual contributors, and drafting the 2009 PAeHI Strategic Plan Final Report:

Ellen Marshall, Camden Area Health Education Center (AHEC), Deputy Director **(co-chair)**

Mark J. Jacobs, WellSpan Health System, Director, Information Technology **(co-chair)**

Marilee Adams PhD, Inquiry Institute Inc., President and Chief Question Officer

Ron Brooks, Independence Blue Cross, Senior Network Medical Director

Howard Burde, Blank Rome LLP, Partner

Martin J. Ciccocioppo, The Hospital & Healthsystem Assn. of PA, Vice President, Research

Gus Kairys, Highmark, Inc., Vice President, Provider Relations

Elliot Menschik MD PhD, HxTechnologies Inc., President and CEO

Eddie "Day" Pashinski, Pennsylvania House of Representatives

David St. Clair, MEDecision, Founder and Chief Executive Officer

Mark Stevens, Pennsylvania eHealth Initiative, Executive Director

Jean B. Stretton MD, Gateway Medical Associates, President

Robert Torres, PA Department of Health, Deputy Secretary of Administration

James M. Walker MD, Geisinger Health System, Chief Medical Informatics Officer

2009 PAeHI Strategic Planning Retreat Participants

The Pennsylvania eHealth Initiative is especially grateful to these health care industry leaders for contributing their time and expertise to the Initiative's strategic planning effort and for participating in our two-day January 2009 Strategic Planning Retreat:

Sharon Abayasekara RPh, maxIT Healthcare LLC, Senior Consultant
Thomas Abendroth MD, Penn State Milton S. Hershey Medical Center, CIO
Patricia L. Bricker, Pennsylvania Academy of Family Physicians, VP of Practice Advocacy
Ronald J. Brooks MD, Independence Blue Cross, Senior Network Medical Director
Howard A. Burde, Blank Rome LLP, Partner
Gary Dugan MD, DuBois Regional Medical Center, Vice President Medical Affairs
Lammot du Pont, Manatt Health Solutions, Senior Manager
Patricia Epple, Pennsylvania Pharmacists Association, Executive Director
Scott Fairholm, Governor's Office of Administration, Deputy CIO Health & Human Services
Rhett R. Hintze, Affinity Group, Managing Director
John Jordan, dbMotion, Vice President of Sales
Augusta "Gus" Kairys, Highmark, Inc., Vice President, Provider Relations
Patrick Keating, Pennsylvania Department of Health, Director, Bureau of Info. Technology
Mark A. Miani MD, Executive Health Resources
Donna Manley, University of Pennsylvania, IT Senior Director
Erik Muther, Pennsylvania Health Care Quality Alliance, Executive Director
William J. O'Byrne, New Jersey Dept. of Banking and Ins., State Coordinator, Hlth. Info. Tech.
Dennis Olmstead, Pennsylvania Medical Society, Chief Economist & Vice President
Arthur C. Papacostas, Temple University Health System, VP of Computers & Info. Services
Rep. Eddie Day Pashinski, Pennsylvania House of Representatives
Jack D. Pond, Montgomery County I. T. S., Chief Information Officer
Andy Rosa, Comcast Corporation, Director, Health and Welfare Benefits
Christopher B. Rumpf MD, Capital BlueCross, Medical Director
Susan M. Salkowitz, Salkowitz Associates, Principal and Health Info. Systems Consultant
Carolyn F. Scanlan, The Hospital & Healthsystem Association of PA, President and CEO
Kim D. Slocum, KDS Consulting LLC, President
Laurie Anne Spagnola LSW, Children's Home of York, President
David St. Clair, MEDecision, Founder and Chief Executive Officer
Charlene S. Underwood MBA FHIMSS, Siemens Medical Solutions, Dir. Gov't & Ind. Affairs
Richard Wagner, Noteworthy Medical Systems, Inc., Sales Executive
Kent Whiting, Capital Blue Cross, Vice President, Information Technology

2009 PAeHI Strategic Planning Retreat Facilitators

Marilee Adams PhD, Inquiry Institute Inc., President and Chief Question Officer
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2009 PAeHI Strategic Plan Virtual Contributors

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