



State of New Hampshire

Health Information Exchange Planning and Implementation Project

Project Kickoff

November 2, 2009

v1

Today's Meeting

- Purpose
- Objectives
- Agenda
- Deliverables / Outcomes

Purpose and Objectives

- ❑ The purpose of today's meeting is to present the proposed approach to the New Hampshire Health Information Exchange Planning and Implementation (NH HIE PI) project to all project stakeholders and interested parties.

- ❑ The objectives of today's meeting are
 - to provide background for the NH HIE PI project,
 - to perform a high level review of the project,
 - What it is
 - What it is going to do
 - How it is going to do it
 - How everyone will participate in it
 - How long it will take
 - to answer questions you may have, and
 - to describe what is going to happen next.

Agenda

- | | | |
|---|----------------------------------|-------------------|
| ❑ Welcome and Review Today's Meeting | Bill Baggeroer | 2:00 PM - 2:10 PM |
| ❑ NH Health Information Technology and Exchange | Commissioner Toumpas | 2:10 PM - 2:20 PM |
| ❑ NH HIE Planning and Implementation Project – Project Overview | Bill Baggeroer
Patrick Miller | 2:20 PM - 3:30 PM |
| ❑ Questions and Answers | Bill Baggeroer | 3:30 PM - 3:50 PM |
| ❑ Wrap Up | Bill Baggeroer | 3:50 PM - 4:00 PM |

Deliverables / Outcomes

- General Understanding of Health Information Technology and Exchange
- General Understanding of the Federal Vision and Approach to HIT HIE
- Understanding of State of New Hampshire Position Regarding HIT and HIE
- Understanding of the ARRA HITECH Act and Its Relation to this Project
- Understanding of the NH HIE Planning and Implementation Project
- Understanding of Your Role in the NH HIE Planning and Implementation Project
- Understanding of the Next Steps



State of New Hampshire

Health Information Exchange Planning and Implementation Project

Project Overview

October 29, 2009

v1

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Background

Definitions

Abbr	Term	Definition
EHR	Electronic Health Record	An electronic record of health-related information on an individual that conforms to nationally recognized interoperability standards and that can be created, managed, and consulted by authorized clinicians and staff across more than one health care organization.
EMR	Electronic Medical Record	An electronic record of health-related information on an individual that can be created, gathered, managed, and consulted by authorized clinicians and staff within one health organization. An EMR provides the underlying data for an EHR, but it is not transmitted among organizations and usually is more robust than an EHR.
PHR	Personal Health Record	An electronic application through which individuals can maintain and manage their health information (and that of others for whom they are authorized) in a private, secure, and confidential environment.
HIT	Health Information Technology	The application of information processing involving both computer hardware and software that deals with the storage, retrieval, sharing, and use of health care information, data, and knowledge for communication and decision making.
HIE	Health Information Exchange	The electronic movement of health-related information among organizations according to nationally recognized standards.
HIO	Health Information Organization	An organization that oversees and governs the exchange of health-related information among organizations according to nationally recognized standards.

American Recovery and Reinvestment Act – Funding for Health IT

Medicare (CMS)

- Incentives for Professionals
- Incentives for Hospitals

Medicaid (CMS)

- Incentives for Professionals
- Incentives for Hospitals

State HIE Cooperative Agreement Program (ONC)

HIT Regional Resource Centers Program (ONC)

Broadband (Commerce and Rural Utilities Service)

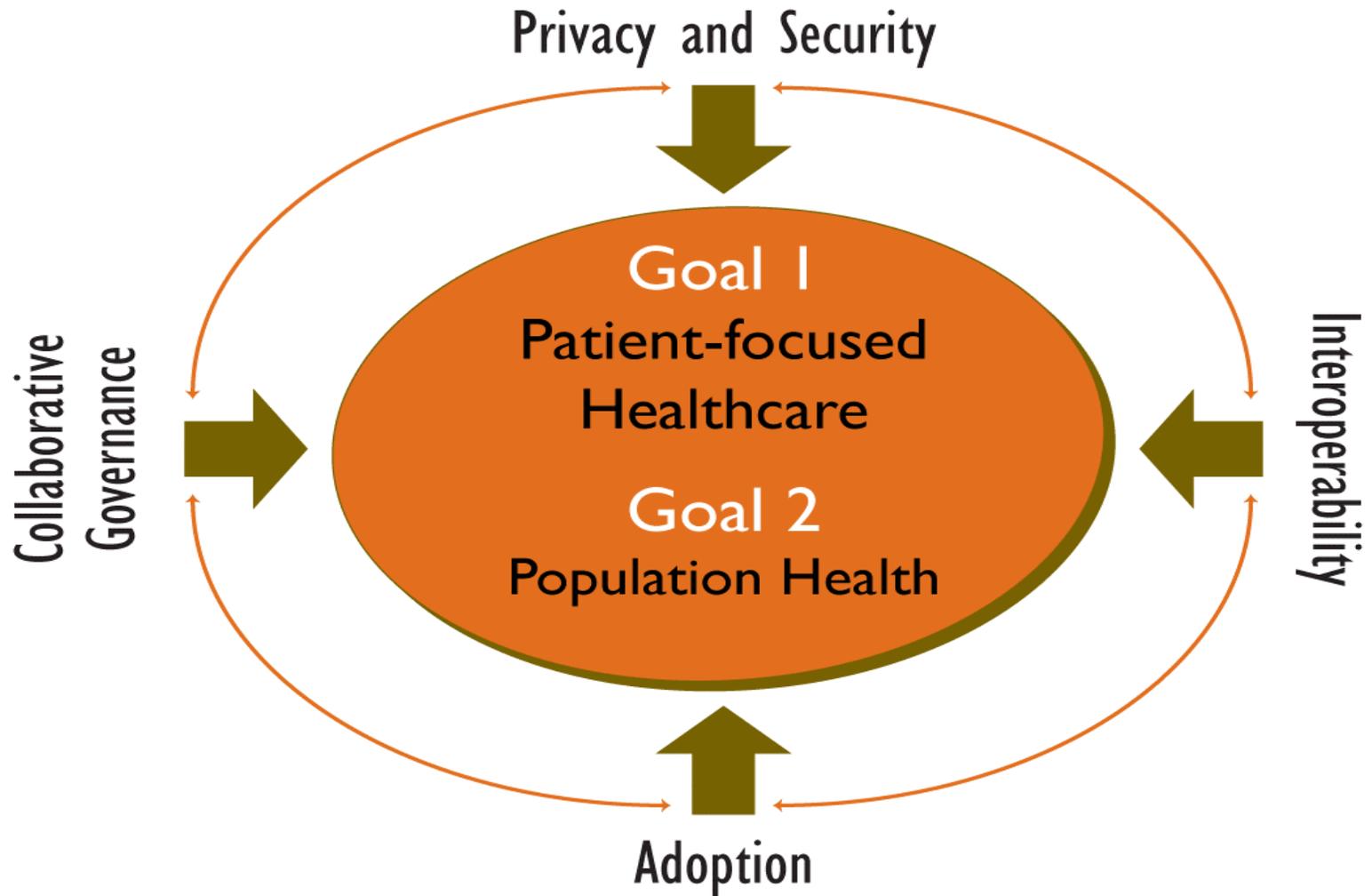
Federal Vision

“To improve the quality of our health care while lowering its cost, we will make the immediate investments necessary to ensure that, within five years, all of America’s medical records are computerized.

This will cut waste, eliminate red tape, and reduce the need to repeat expensive medical tests. But it just won’t save billions of dollars and thousands of jobs; it will save lives by reducing the deadly but preventable medical errors that pervade our health care system.”



Federal Health IT Goal Model



Why is HIE Important?

Quality and Safety

- E.g. - ADEs & increased clinical knowledge

Administrative Efficiency and Cost Reduction

- E.g. - 90% of 30B transactions are fax, mail, phone

Longitudinal Medical Record

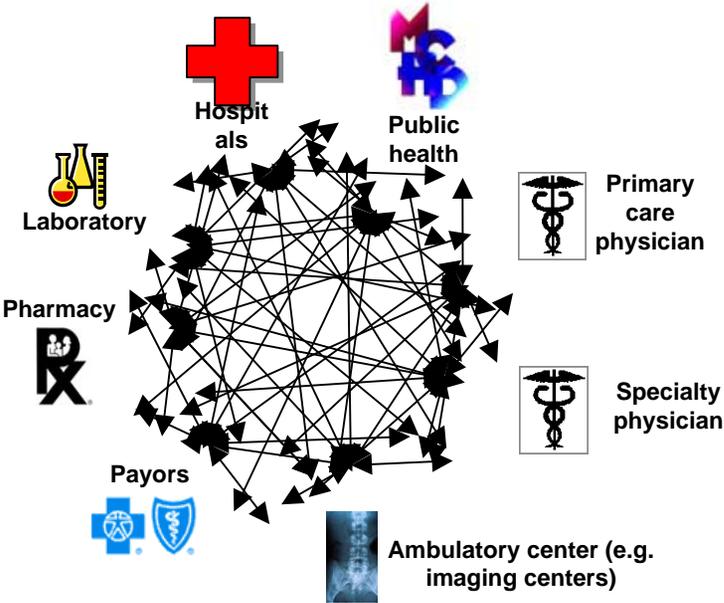
- E.g. - Ability to see across provider settings and portability

Public Health

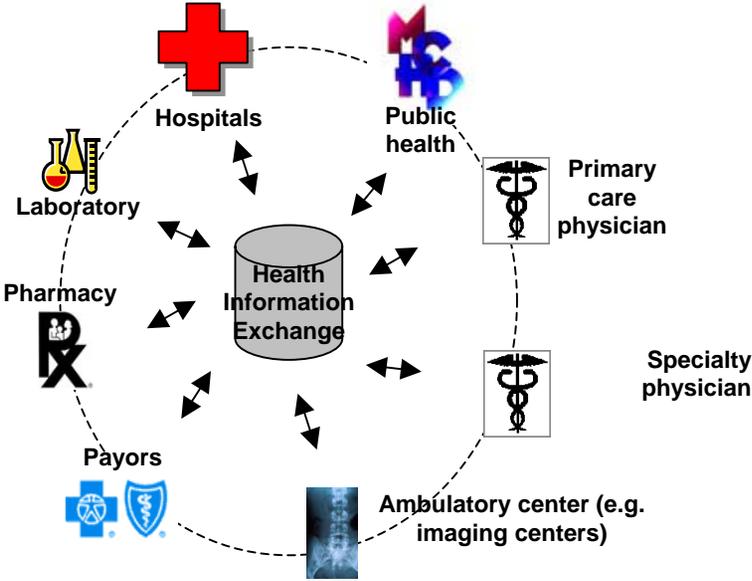
- E.g. - Disease surveillance & reporting

Transition to Health Information Exchanges

Point to Point Interfaces

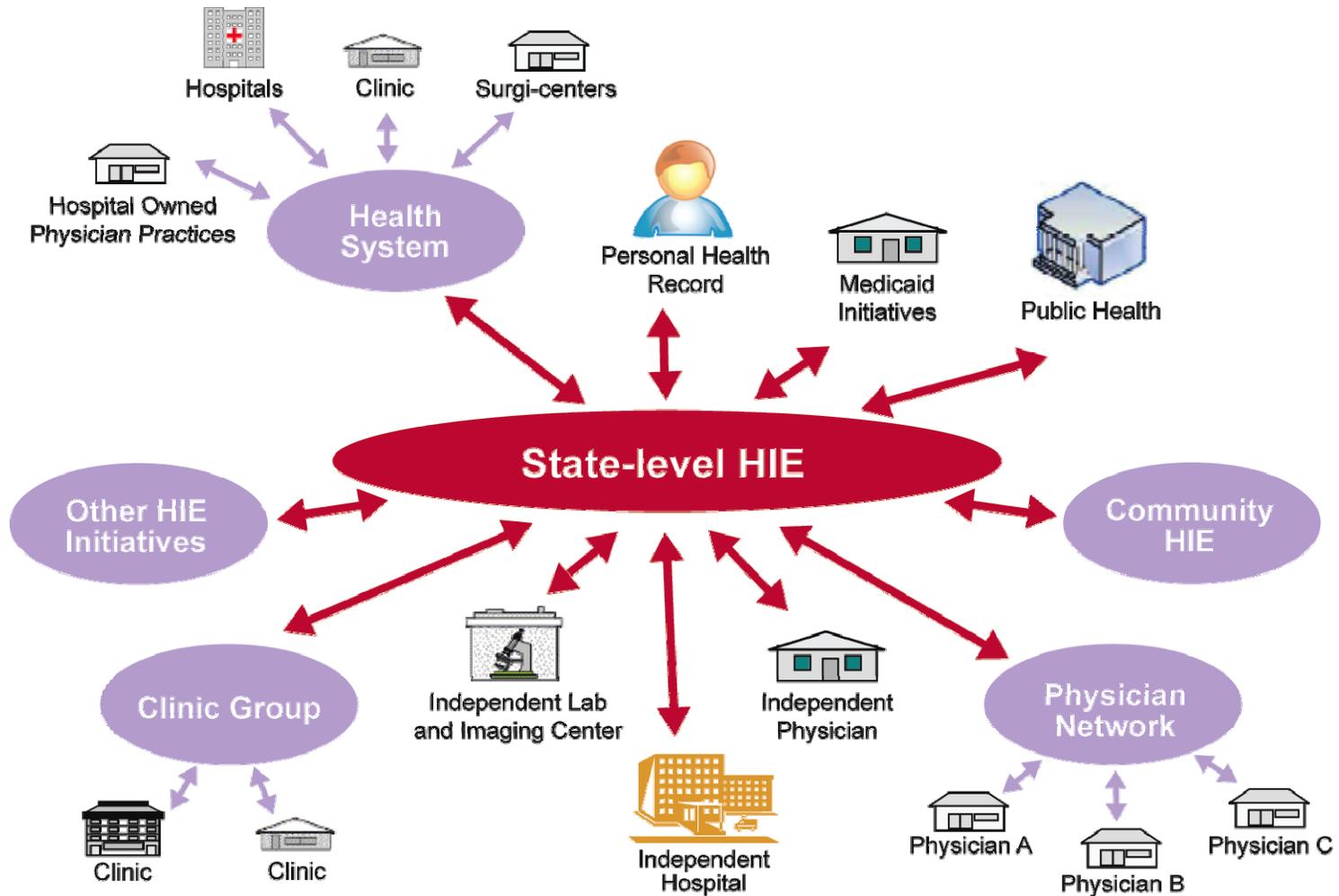


Health Information Exchange Model



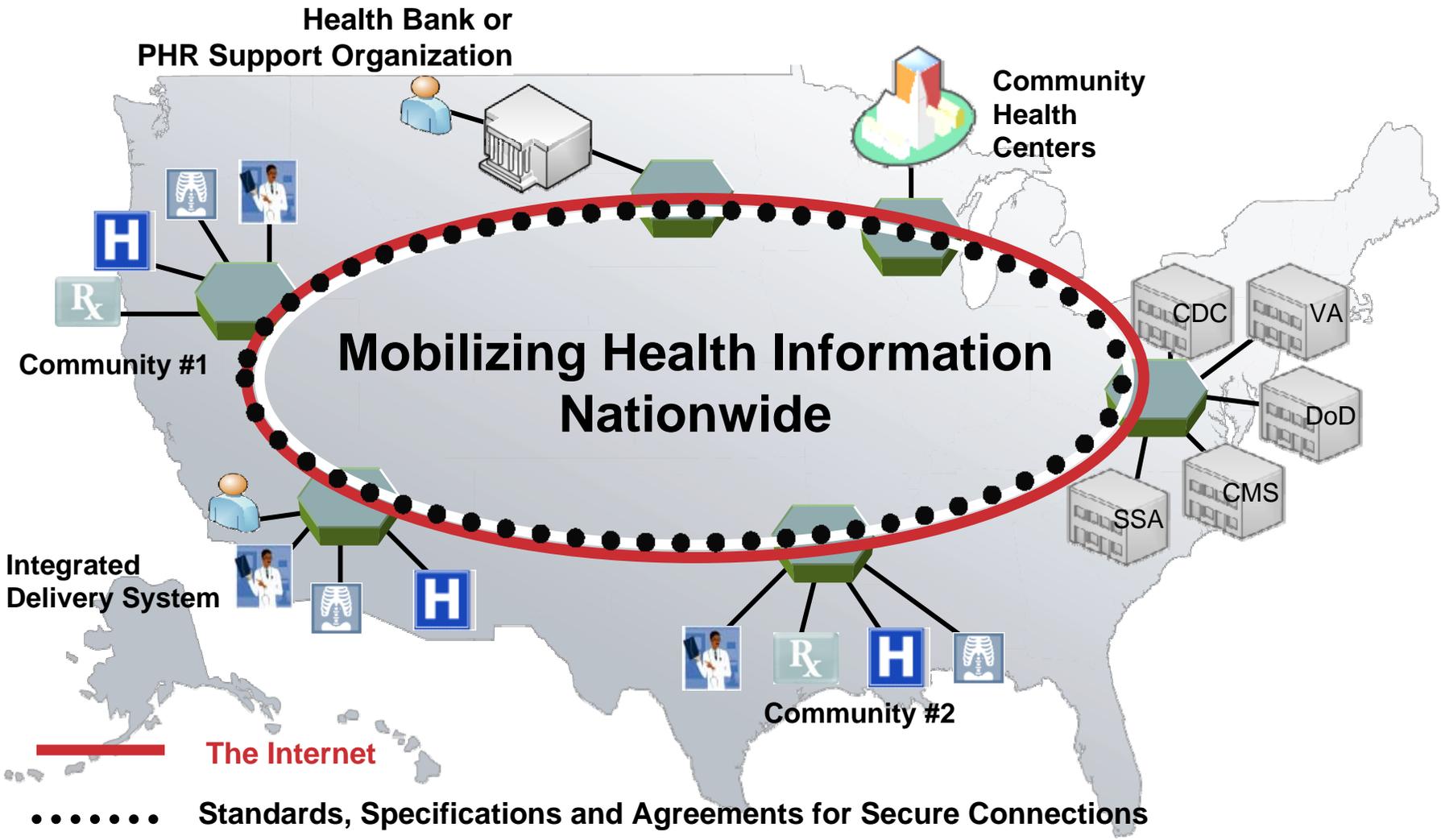
Source: IHIE

State-Level HIE Concept



Source: Camilla Hull Brown, *Strategies for Tomorrow, Inc.*, 2008

Nationwide Health Information Network (NHIN)



Technology Standards

HITSP – Healthcare Information Technology Standards Panel

(Develops the use cases)



CCHIT – Certification Commission for Healthcare Information Technology

(EMR platforms)

Summary of Federal Efforts that are Enabling Widespread HIE

- ❑ Supporting adoption and effective implementation of EHRs by providers
- ❑ Establishing the necessary infrastructure for secure HIE
- ❑ Driving quality improvements through Meaningful Use of Certified EHR Technology
- ❑ Advancing the NHIN

State HIE Initiatives

❑ New England HIE Activities

- HealthInfoNet (ME)
- VITL (Vermont)
- Formerly MA Share moving to MTC Now (Massachusetts)
- RI Quality Institute (Rhode Island)

❑ New Hampshire HIE Activities

- HIT HIE Vision and Principles
- HIT HIE Strategic Plan
- Survey

Vision for NH Health Care Information Technology and Exchange in 2014

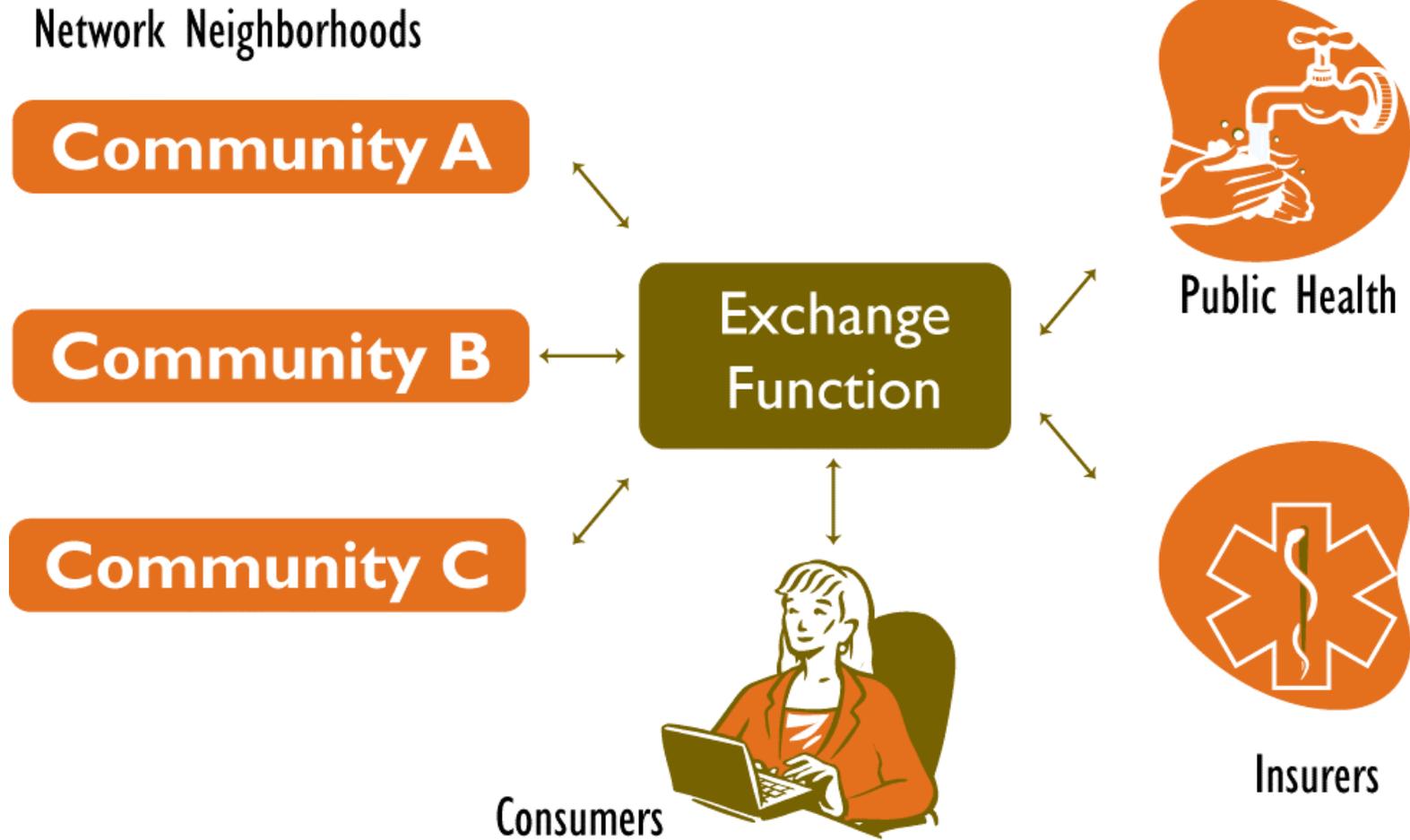
...there is a need to recognize the interrelationships and importance of patient privacy, patient safety, and public health....the following vision for HIT/HIE for 2014:

- Private and Secure
 - A patient's personal health information will be secure, private, and accessed only with patient consent or as otherwise authorized or required by law.
- Promotes Quality, Safety, and Efficiency
 - HIT and HIE will serve as vehicles to promote quality and patient safety, increase efficiencies in health care delivery, and improve public health;
- Electronic
 - All health care providers will use a secure, electronic record for their patients' personal health information;
- Accessible
 - All patients will have access to a secure, electronic, and portable health record;
- Equitable
 - HIT will be a vehicle to support equitable access to health care services.

NH HIT HIE Strategic Plan - Connect Local Communities



NH HIT HIE Strategic Plan - Connect Across Communities



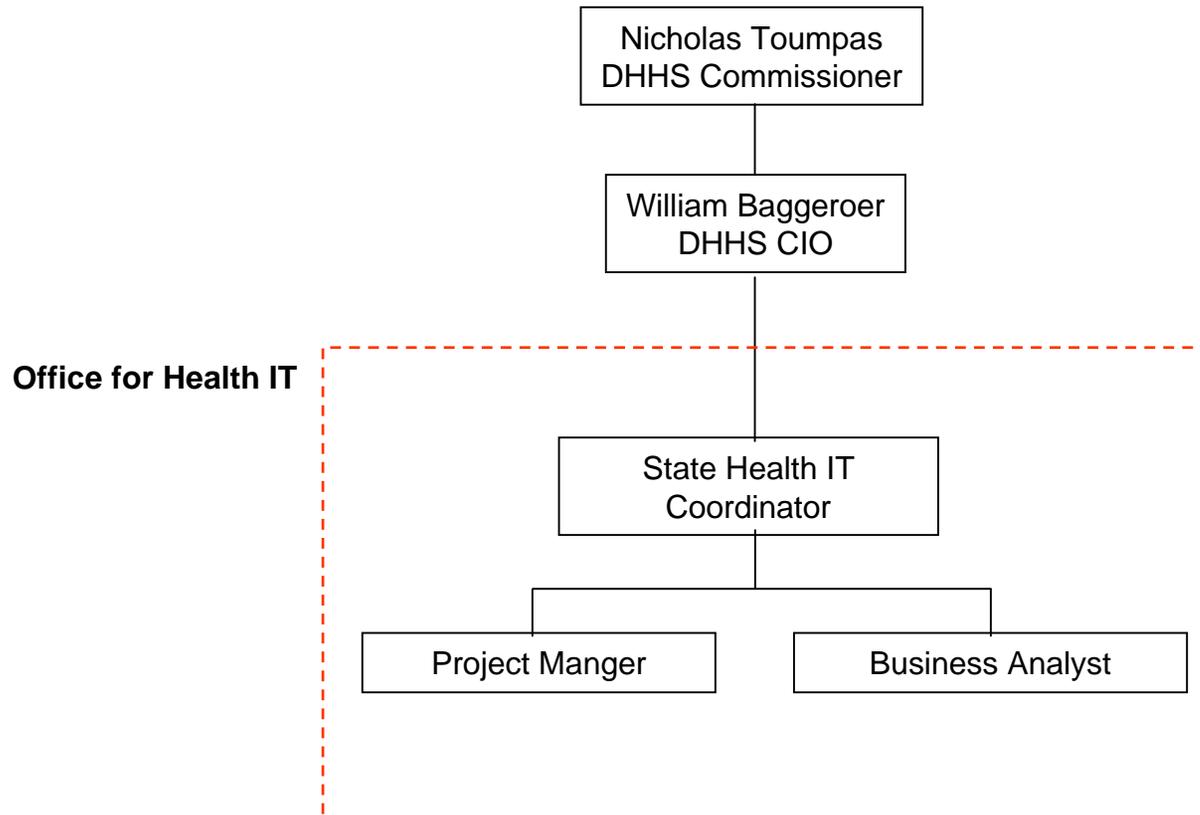
State HIE Cooperative Agreement Program – New Hampshire

- ❑ State HIE Cooperative Agreement announced – 08/20/09
 - Funding and a framework for HIE
- ❑ Letter of Intent submitted to ONC – 09/11/09
 - Designated Entity to apply for grant – NH Department of Health and Human Services
- ❑ Notification of Federal allocation of \$5.5M – 09/22/09
 - Over four years
 - Expectation that most of effort will be in first two years
- ❑ Application submitted to ONC – 10/16/09
- ❑ New Hampshire Health Information Exchange Planning and Implementation Project begins – 11/02/09
- ❑ Expected award announcement – 12/15/09
- ❑ Expected initial funds received – 01/15/10

Office for Health IT and State Health IT Coordinator

- ❑ States are encouraged by ONC to establish an Office for Health IT and the role of State Health IT Coordinator.
- ❑ Office of Health IT
 - *Given the provisions of ARRA and HITECH, states should create a leadership structure to manage at least four phases of HIE implementation—planning, HIE deployment, EHR adoption, and sustained use—as well as the transitions between the phases. The leadership structure should coordinate across publicly funded programs such as Medicaid, interact with the private sector, oversee the dissemination and use of HITECH funds, work with planning and implementation groups (including stakeholders), and ultimately ensure the operation of the exchange. This leadership structure (referred to here as the “Office for Health IT”) should be the voice of the state on these issues and the key point of interface with private stakeholders and public agencies at the state, local, and federal levels.*
- ❑ State Health IT Coordinator
 - *We envision the **State Health IT Coordinator** to be a high-level government official that coordinates with other high-level government officials, for example, the State Medicaid Director or the other officials responsible for pertinent public health programs. This individual will need the level of authority to be able to work effectively within state government, with representatives of other states, and with other public and private sector stakeholders to foster the secure movement of health information across the healthcare system.*

New Hampshire Office for Health IT Organization Chart



Purpose, Scope and Objectives

Purpose and Scope

□ Purpose

- The purpose of The New Hampshire Health Information Exchange Planning and Implementation (NH HIE PI) project is to plan and implement a capability to exchange electronic health information among healthcare entities using the project framework of the HITECH State Health Information Exchange Cooperative Program.

□ Scope

- The project consists of
 - Defining and prioritizing an HIE capability for the State of New Hampshire
 - Creating an HIE Strategic Plan and an HIE Operational Plan to achieve that capability
 - Implementing an initial HIE capability
- Healthcare entities participating in the project include stakeholders involved with the health of New Hampshire citizens, including healthcare providers, health plans, healthcare researchers, healthcare purchasers, patients and consumers, Governor's office, state legislature and the state's Departments of Health and Human Services, Insurance and Information Technology. These stakeholders may be users of the HIE.
- Health information to be processed by the HIE may include all clinical and population health information for which interoperability standards are defined, including hospital, primary care, specialist, psychiatric, pharmacy, laboratory and imaging information.

Purpose and Scope (continued)

□ Scope (continued)

- HITECH funding for the project ends 09/30/13. The extent to which and HIE will be implemented within the project will be determined by what can be accomplished by 09/30/13. An on-going sustainability strategy will be implemented during the project to operate, maintain and expand the HIE after the project has ended.
- One of the key requirements under the HITECH State Health Information Exchange Program, is that the project must address the five domains listed below:
 - Governance – public entity, public utility or private-public entity
 - Finance – sustainable operation
 - Technical Infrastructure – technical architecture, hardware, software, ...
 - Business and Technical Operations – people, organization, roles, responsibilities, rules, ...
 - Legal and Policy – privacy, security, state laws, polices, trust agreements, ...
- Other requirements under the HITECH State Health Information Exchange Program include:
 - Environmental Scan
 - HIE Development and Adoption
 - HIT Adoption (*encouraged but not required*)
 - Medicaid Coordination
 - Coordination of Medicare and Federally Funded, State Based Programs
 - Participation with federal care delivery organizations (*encouraged but not required*)
 - Coordination of Other ARRA Programs

Objectives

❑ Project Objectives

- To create an HIE Strategic Plan for the State of New Hampshire that is accepted by the ONC and NH stakeholders
- To create an HIE Operational Plan for the State of New Hampshire that is accepted by the ONC and NH stakeholders
- To implement an initial HIE capability involving some healthcare providers sending and receiving some types of health information transactions.

❑ Outcome Objectives

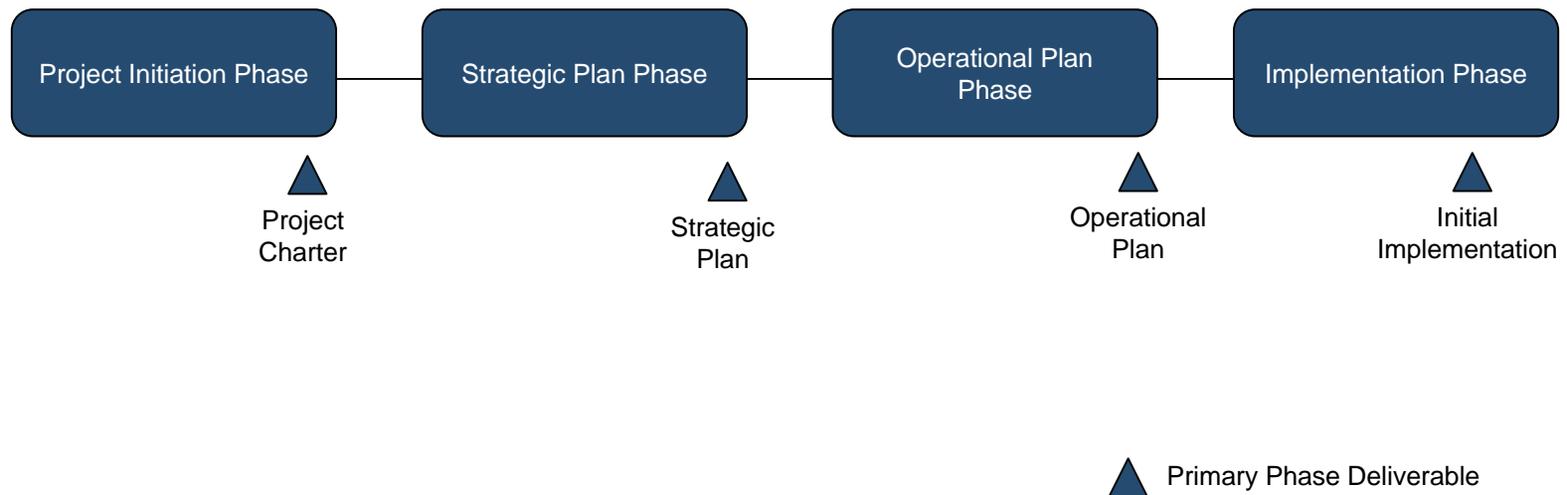
- To improve the quality of healthcare and patient safety for all NH citizens.
- To reduce the overall costs of providing healthcare services.
- To improve the quality of patient information and reduce the number of deaths due to medical errors.
- To reduce the amount of paper transaction and put more quality information at the point of service.
- To deliver better access to care regardless of the location of the patient throughout the state.
- To have consumer access to the portfolio of healthcare service and information.

High Level Approach

High Level Approach

A four-phased approach will be performed.

The **Project Initiation Phase** consists of project planning and preparation activities including the creation of a **Project Charter** that clearly documents the purpose, scope, objectives, approach, deliverables and governance of the project. The **Strategic Plan Phase** consists of describing the target HIE and addressing the five domains described earlier in a **Strategic Plan**. The **Operational Plan Phase** determines more specifically how the Strategic Plan will be achieved and is documented in an **Operational Plan**. The **Implementation Phase** will implement an initial HIE capability for New Hampshire. The **Initial Implementation** will consist of a few healthcare providers and transaction types. Once operational, additional providers, users and transaction types will be phased in.



Mid Level Approach and Deliverables

Phase 1: Project Initiation

□ Approach

- Complete the HITECH State HIE Cooperative Agreement application process.
- Establish a project Steering Committee and Leadership Team.
- Engage Stakeholders.
- Establish an Office for Health IT within the New Hampshire Department of Health and Human Services.
- Complete Survey of health information technology and exchange current capability, plans and interest among New Hampshire health care providers.
- Perform a review of HIE capacity in neighboring states.
- Perform a high spot review of leading HIE vendor options available and in use today.
- Inventory related projects and initiatives with New Hampshire and in neighboring states that this project should coordinate and collaborate with.
- Establish Sub-Teams to address the domains of the Strategic Plan.
- Perform and RFP process to select the Consulting Partner.
- Perform High-Level Review of Legislative Needs to Promote Adoption of HIE.
- Create Project Charter
- Approve Project Charter

Phase 1: Project Initiation (continued)

□ Deliverables

- Value Propositions and Requirements for each stakeholder group [xls]
- Directory of Healthcare Providers in New Hampshire [xls]
- Survey results of health information technology and exchange current capability, plans and interest among health care providers in New Hampshire [doc]
- Summary of HIE capacity in neighboring states [doc]
- Summary of leading HIE options available in the market [doc]
- Inventory of related projects [xls]
- Preliminary Sub-Team charters [doc]
- RFP to select a Consulting Partner [doc]
- Staffed Office for Health IT including the State HIT Coordinator
- List of legislative changes needed for adoption of HIE [xls]
- Project Charter [ppt]

Phase 2: Strategic Plan

□ Approach

- Determine HIE model for New Hampshire- buy, build or reuse; functional architecture.
- Support HIT adoption – ensure establishment of Regional Extension Center for New Hampshire.
- Coordinate with Medicaid HIT Plan and Implementation – determination of meaningful use for HITECH incentives; Medicaid HIT HIE objectives; coordination of overlapping planning needs (e.g., surveys, focus groups etc.).
- Coordinate with Medicare and Federally Funded, State Based Programs.
- Coordinate with Public Health – CDC and PHIN; objectives for public health use of HIE.
- Coordinate with other ARRA Programs – broadband; other.
- Address all legal / policy matters – privacy and security, state laws, policies and procedures, HIE trust agreements.
- Define HIE Governance Model.
- Determine HIE Financial Model for Sustainable Operation and perform required financial accountability and reporting.
- Determine HIE Technical Architecture.
- Develop Consulting Partner Contract.
- Perform required financial accountability and reporting.

Phase 2: Strategic Plan (continued)

□ Approach (continued)

- Create Communication Plan – define methods, tools and techniques to inform all stakeholders of HIE activities; request feedback; enable dialogues track.
- Create Communication Schedule – schedule and track communications.
- Create NH HIE Strategic Plan.
- Approve NH HIE Strategic Plan.

□ Deliverables

- HIE Model for New Hampshire [ppt]
- Establishment of a Regional Extension Center for New Hampshire
- Medicaid HIT Plan and Implementation Coordination and Support Summary [doc]
- Medicare and Federally Funded, State Based Programs Coordination and Support Summary [doc]
- Public Health Coordination and Support Summary [doc]
- ARRA Programs Coordination and Support Summary [doc]
- Privacy and Security Summary [doc]
- State Laws Analysis and Recommendations [xls]
- HIE Policies and Procedures Summary [doc]
- HIE Trust Agreements Summary [doc]
- HIE Governance Model Summary [doc]

Phase 2: Strategic Plan (continued)

□ Deliverables (continued)

- HIE Financial Model for Sustainable Operation Summary [doc]
- HIE Technical Architecture Summary [doc]
- Consulting Partner Contract [doc]
- Financial Reporting [doc, xls]
- Communication Plan [doc]
- Communication Schedule [xls]
- NH HIE Strategic Plan [doc]

Phase 3: Operational Plan

□ Approach

- Create Project Schedule – detail activities and tasks against time line.
- Coordinate with other ARRA Programs – including Regional Extension Centers, workforce development initiatives, broadband mapping and access.
- Coordinate with other States – this could include developing collaborative agreements in anticipation of using or interfacing with HIEs operating in other states.
- Develop HIE Governance Model.
- Create HIE Business Plan – detail cost estimates, staffing plans, transaction estimates, finding estimates, financial polices / procedures / controls.
- Adopt and Support Standards for Interoperability and Integrate with Certifications.
- Develop HIE Technical Architecture.
- Develop HIE Business and Technical Operations Plan – utilization of neighboring states' HIEs; strategies to combine with and/or integration with other HIEs.
- Develop Legal / Policy Requirements – privacy and security, state laws, policies and procedures, HIE trust agreements; privacy and security harmonization.
- Create NH HIE Operational Plan.
- Approve NH HIE Operational Plan.

Phase 3: Operational Plan (continued)

□ Deliverables

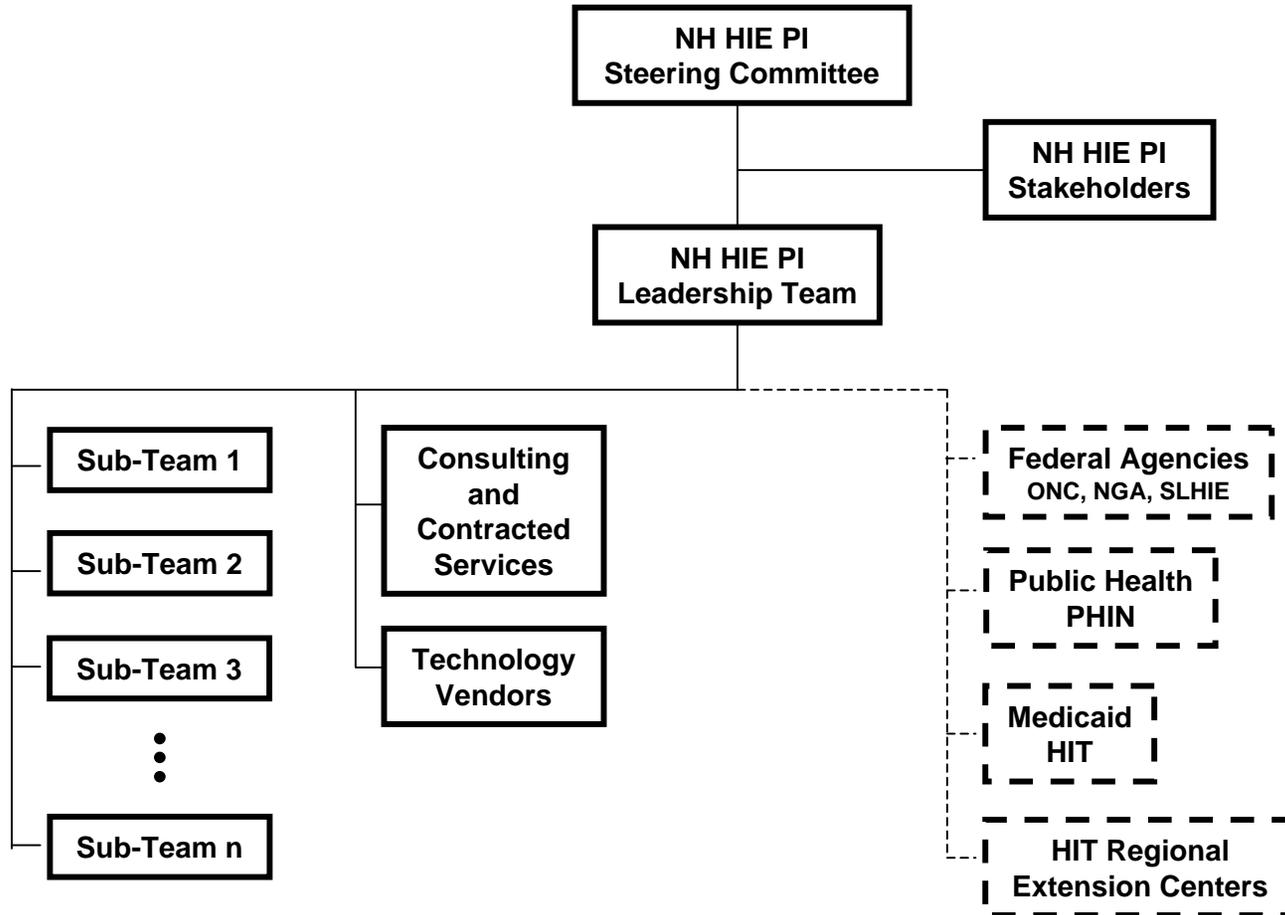
- Project Schedule [mpp, xls, ppt]
- ARRA Programs Updates – describe progress with Regional Extension Centers, workforce development initiatives, broadband mapping and access [doc]
- Collaborative Agreements with other State and/or other related documents [doc]
- HIE Governance Model – elaborated [doc]
- HIE Business Plan [doc]
- HIE Technical Architecture – elaborated [doc]
- HIE Business and Technical Operations Plan [doc]
- Legal / Policy Requirements [doc]
- NH HIE Operational Plan [doc]

Phase 4: Implementation

- ❑ The approach and deliverables of the Implementation Phase can not be determined until the Project Initiation, Strategic Plan and Operational Plan Phases are completed.
- ❑ A phased implementation approach by provider group / provider and transaction type is expected.
- ❑ The Implementation Phase will end when the HITECH Program funding stops – 09/30/13
- ❑ Implementation will continue well beyond the end of the project – as more and more users are connected and more and more transaction types are added.
- ❑ The extent and timing of connection to healthcare providers outside of New Hampshire or to a national network are unknown at this time.

Governance and Team

Project Governance Model



Steering Committee

❑ Members – DHHS Policy Team

- Nicholas Toumpas, DHHS Commissioner (Executive Sponsor)
- Mary Ann Cooney, DHHS Deputy Commissioner
- Kathleen Dunn, NH Medicaid Director
- Nancy Rollins, DHHS Associate Commissioner, Division of Community Based Services
- Jose Montero, NH Public Health Director

❑ Responsibilities

- Oversees the work performed within this project
- Receives progress reports during periodic Steering Committee meetings
- Is appraised of and addresses the project's critical needs, risks and issues
- Provides overall direction and guidance
- Defines and approves changes to project scope and approach
- Approves all key decisions and deliverables
- Eliminates roadblocks elevated by Leadership Team
- Executive Sponsor is the highest decision making authority for the project

Stakeholders

❑ Membership

➤ DHHS Stakeholders

- Office of the Commissioner
- Office of Medicaid Business and Policy (OMBP)
- Division of Public Health Services (DPHS)
- Division of Children, Youth and Families (DCYF)
- Division of Juvenile Justice Services (DJJS)
- Bureau of Elderly and Adult Services (BEAS)
- Bureau of Drug and Alcohol Services (BDAS)
- Bureau of Behavioral Health (BBH)
- Bureau of Developmental Services (BDS)
- New Hampshire Hospital (NHH)
- Glenclyff Home (GH)
- Office of Business Operations (OBS)
- Office of Operations Support (OOS)
- Office of Improvement, Integrity and Information (OIII)
 - HIPPA Privacy Officer
 - HIPAA Security Officer

Stakeholders (continued)

❑ Membership (continued)

➤ Other Public Stakeholders

- NH Governor's Office
- NH State Legislature
- NH Department of Information Technology (DoIT)
- NH Department of Insurance (NHID)

➤ Private Stakeholders

- Hospitals
- Health Centers (FQHCs and look a likes)
- Mental Health Centers
- Behavioral Health Practitioners
- Nursing Homes
- Physicians and other practitioners
- Pharmacies
- Laboratories
- Imaging Centers
- Health Plans
- Healthcare / Clinical Researchers
- Employers
- Patients / Consumers

Stakeholders (continued)

❑ Responsibilities

- The stakeholders are the groups / organizations which are impacted by, or can impact, the outcomes of the project
- Includes users and others associated with the funding, design, implementation, use and operation of the HIE
- Represent their group's interests in the project
- Provide a communication channel between the project and the group they represent
- Review all project deliverables and decisions; provide feedback and input
- Participate on Sub-Teams

Leadership Team

❑ Membership (initial)

- Project Director - William Baggeroer, DHHS CIO – interim (future OHIT State HIT Coor.)
Project Manager - Paul Fleming, DHHS Project Manager – interim (future OHIT position)
- Business Analyst - Andrew Chalsma, OMBP (Medicaid) - interim (future OHIT position)
- Business Analyst - Brook Dupee, DPHS (Public Health) - interim (future OHIT position)
- Financial Administrator - Shanthi Venkatesan, OBO (Business Ops - ARRA Finance)
- Financial Analyst - Grant Beckman, OIII (Financial Manager)
- HIT HIE Researcher - Patrick Miller, UNH Institute for Health Policy and Practice

❑ Responsibilities

- Has day-to-day responsibility for project's success
- Determines the project's approach, deliverables and processes
- Plans and directs the work performed within this project
- Approves all decisions and deliverables; promotes key decisions and deliverables to Steering Committee for approval
- Addresses and resolves project's needs, risks and issues; escalates to Steering Committee
- Is accountable for compliance with federal grants and other regulations
- Oversees and directs sub-teams
- Oversees and directs consultants and contracted services
- Oversees and directs technology vendors
- Coordinates with other federal and state entities and projects

Leadership Team (continued)

❑ Leadership Team - Project Director

- Has primary responsibility for project
- Leads the Leadership Team
- Has financial responsibility and accountability for project
- Present status updates to Steering Committee and Stakeholders
- Present key deliverables and decisions to Steering Committee for approval and to Stakeholders for review, feedback and input

❑ Leadership Team - Project Manager

- Has primary responsibility for quality and timeliness of deliverables, status reporting, risk and issue management
- Responsible for overall project plan, schedule, quality and timeliness of deliverables, status reporting, risk and issue management
- Responsible for coordinating and integrating work of all sub-teams, consultants, contracted services and technology vendors

Leadership Team (continued)

❑ Leadership Team – Business Analyst

- Supports Project Director and Project Manager as needed
- Creates and maintains Project Communication Plan and Schedule
- Creates and supports the creation of project deliverables
- Assists with administrative task as needed, including
 - Creating meeting minutes
 - Scheduling and organizing meetings
 - Maintaining Project Documentation Library

❑ Leadership Team – Financial Administrator

- Identifies business models and public/private financial strategies to fund HIE
- Manages public and private financing for building HIE capacity and sustainability

❑ Leadership Team – Financial Analyst

- Responsible for budget, financial tracking and financial reporting, including ARRA 1512 Reporting
- Manages RFP, contracting and purchasing processes
- Assists sub-teams on financial related matters

❑ Leadership Team – Others as Needed

Sub-Teams

- ❑ Sub-teams are working groups formed as needed; possible examples include:
 - HIE Scope and Selection Team
 - HIE Legislative Team
 - HIE Privacy / Security Team
 - HIE Finance Team
 - HIE Governance Team
 - HIE Business and Operations Team
 - HIE Technical Team
 - Project Communications Team
- ❑ Membership
 - Members selected by Leadership Team from Stakeholder group and other stakeholders outside the project team as needed
 - Selection based on interest expressed from stakeholders plus assessed need by Leadership Team
 - Facilitated by Consulting Partner

Sub-Teams (continued)

❑ Responsibilities

- Each sub-team will define its mission in a Team Charter and assign responsibilities accordingly
- Team Charters may include the following items:
 - Team's purpose, scope and objectives
 - Approach and deliverables
 - Roles and responsibilities
 - Timeline and schedule

Consulting Services, Contracted Services and Technology Vendors

❑ Consulting Services

- Provide expertise to define HIE Planning effort
- Lead and/or facilitate sub-teams
- Write sub-team deliverables with sub-teams
- Write Strategic Plan and Operational Plan with Leadership Team and Stakeholders

❑ Contracted Services

- Provide staff augmentation as needed
- Possible roles include:
 - HIT HIE knowledge expert
 - Project management
 - Technical assistance
 - Project evaluation
 - Administrative assistance

❑ Technology Vendors

- To be selected by project team to provide HIE services for New Hampshire

❑ Interested Parties

- Individuals outside the project team who have expressed an interest to be informed as the project progresses

Coordination with Other Organizations and Initiatives

❑ Other Organizations and Initiatives

- Federal Agencies – ONC, NGA, SLHIE, etc.
- NH Public Health – Public Health Information Network (PHIN)
- NH Medicaid – HIT Plan
- HIT Regional Assistance Centers
- and more

Timeline

Wrap Up

❑ Achievement of Deliverables / Outcomes

- General Understanding of Health Information Technology and Exchange
- General Understanding of the Federal Vision and Approach to HIT HIE
- Understanding of State of New Hampshire Position Regarding HIT and HIE
- Understanding of the ARRA HITECH Act and It's Relation to this Project
- Understanding of the NH HIE Planning and Implementation Project
- Understanding of Your Role in the NH HIE Planning and Implementation Project
- Understanding of the Next Steps

❑ Next Steps

- Additional questions may be sent to...
- Project information will be posted on DHHS website, including presentations, deliverables, FAQs, etc.
- E-mail will be sent out to all stakeholders proposing sub-teams and request feedback and interest to participate.
- Team List will be e-mailed to project team members.
- Initial Steering Committee meeting will be scheduled.