

**IKK Registry Workgroup Teleconference
DRAFT Minutes
June 27, 2007**

The teleconference commenced at 9:05am CDT.

Chris Steege shared preliminary results of a survey she is conducting among her constituents' regarding their concerns and their preferred remedies for overcoming barriers to providing immunizations and participating in WebIZ. So far, only 4 of 12 respondents had never heard of the KS WebIZ/registry, but all had a very positive impression. Among all respondents, a commonly identified barrier for participation in the registry is the larger issue related to the cost disincentives inherent in providing immunization services. Another problem that was identified by more than one respondent was the need for 'dual entry' of immunization encounters, which providers find burdensome and unnecessarily time-consuming; this led to the suggestion that KS WebIZ needs to develop interfaces with practice management systems that eliminate the need for dual entry because, without it, private providers are less likely to participate in the registry. Based on these preliminary results, the Workgroup members suggested some ideas that should be incorporated into the Action Plan:

- Education is key: KAAP will work with KDHE to send out information packets, coordinate conference/meeting presentations.
- Involve providers to serve as advocates for registry/KS WebIZ.

The majority of the teleconference focused on the desirability of and best way to combine Action Items into 'logical' initiatives (i.e., determined by who's responsible/involved, the target group, specific actions, and the timing of the actions). As a result of this discussion, the Workgroup identified 4 initiatives that incorporate elements of the 12 previously proposed Action Items, which break down as follows:

NEW, IMPROVED ACTION ITEM I: *KS WebIZ Strategic Plan* comprising:

- Old Action Item (1) Develop a focused, prioritized KSWebIZ implementation strategy
- Old Action Item (2) Develop a long-term KSWebIZ management plan
- Old Action Item (3) Clarify short- and long-term resource needs for expanding and sustaining a comprehensive KSWebIZ implementation plan

NEW, IMPROVED ACTION ITEM II: *Provider Education* comprising:

- Old Action Item (4) Educate and increase targeted providers' awareness of the benefits of participating in KS WebIZ
 - a) Continue/expand statewide presentations on registry status and future plans to stimulate enrollment, participation, and use

- b) Investigate allowing non contributing providers to have access to KSWebIZ (for example, providers whose patients receive immunizations at the local health department)

NEW, IMPROVED ACTION ITEM III: *Reducing Provider Disincentives*
comprising:

- Old Action Item (5) Reduce disincentives for private providers to offer vaccination services and to participate in KSWebIZ
 - a) Develop and implement training approaches for providers on managing and using KSWebIZ interfaces
- Parts of Old Action Item (7) Conduct a survey/census of providers' practice-management systems currently in use in Kansas
- Parts of Old Action Item (8) Stimulate demand for practice-management systems with KSWebIZ-compatible features
- Parts of Old Action Item (9) Develop a plan to retain existing KSWebIZ participants
 - a) Continue/expand end-user groups to discuss their uses of the registry, identify problems, and advise KDHE on problem-resolution and ongoing development of the registry
 - b) Continue/expand newsletter to end-users
 - c) Continue/expand incorporating user requests into updates of KSWebIZ
 - d) Select and convene an ongoing advisory group of stakeholders to review KSWebIZ use and advise on further KSWebIZ development
 - e) Conduct a user satisfaction/suggestion survey annually; Report on results and update survey participants on plans of action to address concerns
 - f) Monitor KSWebIZ HELP desk usage to insure that KDHE has adequate staffing to address user requests in a timely manner
 - g) Explore technology solutions to help KSWebIZ users convene virtually through list servs, teleconferences, etc
- New Action Item (suggested by Kathy Kroupa) regarding the need to investigate electronic HL7 interfaces with the Registry by private providers, LHDs, insurance companies, etc.

NEW, IMPROVED ACTION ITEM IV: *Providing Provider Incentives* comprising:

- Old Action Item (6) Develop a targeted, comprehensive program of incentives for vaccination providers to participate in KSWebIZ
- Parts of Old Action Item (7) Conduct a survey/census of providers' practice-management systems currently in use in Kansas
- Parts of Old Action Item (8) Stimulate demand for practice-management systems with KSWebIZ-compatible features

- Parts of Old Action Item (9) Develop a plan to retain existing KSWebIZ participants
 - a) Continue/expand end-user groups to discuss their uses of the registry, identify problems, and advise KDHE on problem-resolution and ongoing development of the registry
 - b) Continue/expand newsletter to end-users
 - c) Continue/expand incorporating user requests into updates of KSWebIZ
 - d) Select and convene an ongoing advisory group of stakeholders to review KSWebIZ use and advise on further KSWebIZ development
 - e) Conduct a user satisfaction/suggestion survey annually; Report on results and update survey participants on plans of action to address concerns
 - f) Monitor KSWebIZ HELP desk usage to insure that KDHE has adequate staffing to address user requests in a timely manner
 - g) Explore technology solutions to help KSWebIZ users convene virtually through list servs, teleconferences, etc
- Old Action Item (10) Continue to enhance reports available from KSWebIZ
 - a) Survey existing KSWebIZ participants for suggestions of standard reports that would be useful to most providers
 - b) Develop standard reports based on provider survey
 - c) Provide ad hoc reporting capability for KSWebIZ users
 - d) Provide ability for KSWebIZ participants to export all report results into digital formats (.csv, .txt, etc)
 - e) Investigate feasibility of allowing KSWebIZ interface users to have direct access to KSWebIZ for enhanced reporting not available through the interface user's CMS

Finally, although there was general agreement that using the registry as a tool in creating 'virtual medical homes' for vaccination-eligible children was consistent with the long-term goal of the IKK initiative, the members felt that the technical, legal, and operational challenges inherent in this effort were outside the scope (and timeline) of the Registry Workgroup's Action Plan. Therefore, we agreed to express support for this idea, but to not include it as a specific action item.

To carry this work forward, several workgroup members volunteered (or were nominated, with Paul to follow up with them to determine their willingness and availability) to take lead responsibility to complete KHI's Action Item forms (or some adaptation thereof), as follows:

- I) JOHN RULE
- II) CHRIS STEEGE
- III) KDHE staff
- IV) KATHY KROUPA

If possible, we've asked each of these team leaders to draft their respective Action Item form and distribute them to all Workgroup members PRIOR to our next meeting on July 11, 2007, at which time we agreed to discuss and refine these drafts.

The teleconference adjourned at 10:05am CDT.