

INFORMATION SYSTEMS ADVISORY COMMITTEE

Alaska Native Tribal Health Consortium

Anchorage, Alaska

August 22-23, 2000

ACTION ITEMS

APPROVED: May 23-24, 2000 meeting minutes.

ACTION: *ISAC Membership*, a memo will be distributed to the different groups outlining how items can be brought to ISAC's attention. This process will be included in the ISAC Work Plan as well.

APPROVED: *ISAC Term of Office*, ISAC will adopt a fixed date option for renewal of ISAC membership, with flexibility in renewing membership.

ACTION: *Clearinghouse Use*, recommendation made that clearinghouses be used for third-party billing as needed.

ACTION: *Security*, recommendation made that Areas use one of the top three anti-virus vendors to standardize PC anti-virus software being used by the Areas nationwide.

ACTION: *Policy Issues-Internet Gateway*, recommendation made that a single gateway be used.

ACTION: *Caché*, a communications document will be drafted outlining Caché efforts, with distribution to Area and Service Unit Directors.

ACTION: *Telecommunication/RPMS*, a recommendation will be made to the NCEOs that Areas implement an information management structure.

ACTION: *Budget Formulation*, request made for ISAC to draft a letter of support outlining the methodology for the \$50 million funding level.

ACTION: *ITA Five-Year Plan*, ISAC members to review the ITA Five-year Plan and provide comments to Russ Pittman, Director of ITSC, IHS Albuquerque Area, by August 31, 2000.

ACTION: *PSGs*, recommendation made for an ISAC member to be appointed to represent a subcommittee to bring issues to ISAC's attention. Current PSGs will be reviewed for grouping the various applications; i.e., PSG roles in regard to executive, revenue, etc.

ACTION: *Recommendation Development*, see following pages for the seven recommendations developed by ISAC members on August 23, 2000.

ACTION: *ISAC Annual Work Plan*, ISAC Charter elements will be incorporated into the ISAC Work Plan drafted by Co-Chair Keith Longie. The revised Work Plan will be distributed to members for review, with the final draft completed by the end of the fiscal year.

ACTION: *ISAC Strategic Plan*, ISAC will complete a year-end report by the end of the third quarter, listing accomplishments for the year and next fiscal year's work.

ACTION: *ISAC Member Participation*, ISAC Co-Chairs to follow-up on a replacement for Pat Knox and check on participation by the Great Lakes Inter-Tribal Council representative at future meetings.

DRAFT FINAL RECOMMENDATIONS**Wednesday, August 23, 2000****Telecomm Internet Gateway Recommendation:**

The ISAC recommends that the IHS maintain a limited number of justifiable gateways to the Internet. Currently, secured gateways exist at the Tucson Area, National Programs - Albuquerque, and HQE. Additional gateways can be added provided that they meet the security requirements, management needs, and provide cost benefits to the users. Additional gateways would be locally funded and managed (at the Area/SU/Tribe) and certified by DIR for security and architecture prior to activation and re-certified periodically.

In anticipation of future demand (telemedicine, video conferencing, voice over IP, etc.) a complete network analysis is recommended. This analysis will include the development of a telecommunications five-year plan and identify potential cost saving opportunities. Complete cost-benefit analysis should be done for each network change/expansion.

\$82.2 Million Recommendation:

There are serious unmet needs within the national Information Technology infrastructure. Additional funding is needed to provide adequate information technology support to the I/T/U for quality healthcare, third-party reimbursements, congressional reporting and correcting deficiencies. The ISAC has reviewed, discussed, and supports the DIR proposed funding increase of \$82.2 million over a five-year period in order to improve infrastructure, billing efforts, and patient care software.

Critical Infrastructure Protection (CIP) and Security Recommendations:

The ISAC endorses the planning approach initiated by the Critical Infrastructure Protection (CIP) team under the Chief Information Officer to address critical infrastructure protection issues. The plan will include outreach and awareness; the identification of critical Indian health assets; conducting vulnerability assessments; developing risk management plans; identifying needed equipment and software; testing and refinement; as well as other critical implementation issues. The elements of this approach include the following steps:

- Identify IHS Information Systems Security Program Requirements
 - Develop IHS Information Systems Security Policy
 - Assign Roles and Responsibilities
 - Develop IHS Information Systems Security Program Components
 - Conduct Systems Security Assessment
 - Implement the Certification and Accreditation Program
 - Establish Security Monitoring Program
 - Implement IHS Information Systems Security Program Components
- The ISAC also recognizes the need for stakeholder participation and recommends specific involvement of technical and program management representation from across the I/T/U.
 - The ISAC recognizes the need for consistent overall security policy guidance and recommends that a series of general security policies be developed. The policies developed should provide the flexibility to be adapted for use in health care programs operated by Tribal and Urban Indian organizations.
 - The ISAC endorses and recommends an enterprise-wide approach to selecting, acquiring, and implementing key technologies. For example,

- A cost-benefit analysis should be conducted for the purpose of determining an enterprise approach to virus protection. This should include appropriate technical and program management input.
- A similar approach should be taken in the adoption of a public key infrastructure.
- Other technologies will require the same selection process

Use of Clearinghouse for Third-Party Billing Recommendation:

The ISAC recommends the use of commercial clearinghouses and electronic lock boxes to streamline the business process:

1. Given the existence of a national contract with Envoy and their proven capability to function as a clearinghouse, the ITSC should focus its efforts on completing the integration and implementation of Envoy's electronic solution in the immediate future.
2. An acceptable IHS-Envoy solution would employ a point-to-point network-based architecture that integrates seamlessly with the existing RPMS Business Office applications for eligibility verification, claims submission and electronic posting of remittance advices.
3. As interfaces already exist with PNC Bank's lockbox services for the receipt and documentation of electronic deposits, the ISAC endorses and encourages the use of PNC Bank electronic lock boxes for all facilities.

PSG Template Recommendation:

PSG - Professional Specialty Group; advisory board that recommends software improvement, training programs and other technical aspects to the ITSC on needs.

Problem: A formal process for PSG's to communicate with the ISAC committee does not exist. ISAC recognizes that Professional Specialty Groups are an integral part of the process. The PSG's are critical because they provide the voice for end users.

Recommendation:

Item 11 in the Charter for ISAC states "The ISAC Co-Chairs will jointly establish meeting agendas. Issue papers should be submitted for consideration on the agenda in the format of background; issues/alternatives; financial costs, benefits, impacts; and recommendations. Agendas will be distributed to ISAC members at least 15 working days prior to the meeting."

1. PSGs submitting recommendations must demonstrate how the issue is related to the established ISAC priorities or why it should be considered as a priority for the following year.
2. Recommendations must be submitted to an ISAC member 30 days prior to the regularly scheduled ISAC meeting in order to be brought forward to the ISAC Co-Chairpersons for inclusion on the ISAC agenda.
3. ISAC will annually survey PSG's regarding determination of ISAC priorities.
4. Routine operational data or technology issues shall be coordinated through the Information Technology Service Center. However, if the issues are of a policy nature and have not been resolved through the ITSC, the issue may be considered by the ISAC.
5. ISAC meetings are open and welcome to visitors. However, ISAC may invite members of a PSG to make a presentation on issues.
6. The ISAC will reply to all PSG issues that have been considered by the ISAC. A written reply will be submitted to the PSG. Minutes of meetings are posted on the Indian Health Service ISAC Web Page.
7. The ISAC also recommends that the Indian Health Service circular regarding PSGs be reviewed and revised.

Information Management (IM) Committee Recommendation:

The ISAC recommends that all Service Units and Areas have in existence an Information Management (IM) committee, comprised of clinical, technical and administrative representatives, to discuss and make recommendations on information systems issues in support of I/T/U health programs.

The Telemedicine recommendation was tabled until next meeting.