

Testimony
Information Technology Committee
January 11, 2012
North Dakota Department of Health

Good morning, Chairman Weisz and members of the Information Technology Committee. My name is Kirby Kruger and I am the Director of the Division of Disease Control of the North Dakota Department of Health. I am here today to provide an update regarding the North Dakota Immunization Information System (NDIIS) Enhanced Interoperability project.

Based on the third quarter report, this project is 17.8% under budget and 42.1% behind schedule. The schedule variance is due to several factors, including a federally imposed completion date which prevented the project from submitting a more realistic baseline schedule. However, the primary cause of the reported schedule variance was the project's inability to create a stable integration with the pilot provider, Altru, and their electronic medical record (EMR) system. After several failed go-live attempts, we are happy to announce that the North Dakota Immunization Information System is able to receive data directly from the Altru Health Systems EMR. A lessons learned exercise following the pilot indicated one of the key issues in this effort was the requirement to utilize HL7 2.5.1 standards. We later learned that this has been an inhibiting factor for many states and the grantor has since authorized our project to create interoperability utilizing HL7 2.3.1 standards.

HL7 standards have become the national standard for the electronic exchange of health information. Since the inception of HL7 messaging, there have been several iterations. The most current target iteration is HL7 2.5.1. Nearly all the electronic health record systems operating in the nation are using version 2.3.1 or an earlier version.

The lessons learned exercise resulted in several scope changes targeted at making future integrations with providers less complex and more efficient. Many of the lessons learned were resolved via the creating of an on-boarding deliverable, which moves many of the key aspects of the project to the forefront of the project allowing them to be resolved early on. Another major scope change is the creation of an automated testing tool, which will allow providers and EMR vendors to send test messages and receive responses, allowing them to resolve many issues prior to formal testing. These improvements, along with the incorporation of HL7 2.3.1 capabilities, have positioned the project to begin working with the remaining high-volume immunization providers in early 2012.

Two additional scope additions will improve the overall sustainability of the project. The first, a technical improvement, will create a secure transport system identified as SOAP over HTTPS. This has been identified by technical experts as the recommended framework. The final scope addition includes participating with the North Dakota Health

Information Network to create a gateway to the North Dakota Immunization Information System. This will allow those providers who participate in the network to submit and access immunization records in lieu of a secondary integration with the NDIIS.

The strategy moving forward will be to work with up to four providers concurrently throughout the first two quarters of 2012. Integration with the North Dakota Health Information Network will occur during July/August 2012. The grantor has informed the project team that they will be accepting extension requests in May 2012 for up to one year. While we have not yet been approved for an extension, it is the intent of the project team to re-plan and re-baseline the project with more realistic timelines. The re-planning effort is targeted for completion by January 31, 2012.

Finally, I think it is worth mentioning that there were several states that were awarded grants for similar projects. Nearly every state has encountered technical difficulties. Our success with Altru Health System's EMR using HL7 2.5.1 has made us one of the first states in the nation to achieve interoperability using HL7 2.5.1.

This concludes my testimony. I am happy to answer any questions you may have.