



**Board of Directors Meeting Minutes
March 18, 2015**

Members Present: Karen Bell, MD, Art Blank, , Donald Krause, MD, Kevin Lewis, Dick Marston, Ken McCall, Peter Mills, Michelle Probert, Stephen Sears, MD, Paul Stein, Ann Sullivan, Carol Timberlake, Skip White, and Jay Yoe

Staff Present: Shaun Alfreds, Kim Bustamante, Alice Chapin, and Dev Culver

Excused: Lynn Duby, Kyle Johnson, Rod Prior, MD

Topic	Discussion/Decision	Action	Person Responsible
Consent Agenda 1) Minutes	<ul style="list-style-type: none">• Annual Board Meeting minutes-January 21, 2015• Board Meeting minutes-January 21, 2015• HIN Executive Committee Meeting minutes-February 18, 2015	<ul style="list-style-type: none">• Approved minutes without discussion	
Business Agenda 1) Nomination of Andy Crowder	<ul style="list-style-type: none">• Motion to accept Bill Caron's resignation from the Board of Directors.• Art Blank asked the Board members if there were any concerns or discussion around Andy Crowder's nomination, there being none, the motion to accept the nomination was made.• Due to the conflict of MaineHealth/Franklin Health and the direct reporting of Ralph Johnson to Andy Crowder, Ralph Johnson has also resigned from the Board. Mr. Johnson will remain active with HealthInfoNet as a member of the Business Development Advisory Committee.	<ul style="list-style-type: none">• Motion to accept, with regret, the resignation of Bill Caron and Ralph Johnson.• Nomination of Andy Crowder to the HIN Board of Directors was unanimously approved.	

<p>2) Committee Reports</p>	<ul style="list-style-type: none"> • Ann Sullivan updated the Board members on the new structure of the Consumer Advisory Committee. There will be more online meetings and two meetings per year. There may be more ad hoc meetings as project arise. • Ann also reviewed the Blue Button project's progress-248 people have downloaded their continuity of care document-that is 33% of the targeted population. • Review and approval of the minutes of the Consumer Advisory Committee Meeting February 25, 2015 	<ul style="list-style-type: none"> • Motion to accept committee reports as presented are approved. 	
<p>3) Operating Financials</p>	<ul style="list-style-type: none"> • Review and adoption of December 2014 and January 2015 Operating Financials: • HIN finished the 2014 fiscal year with an increase in Net Assets of \$163K, exceeding the Board-approved annual budget by \$52K. Cash remains strong as is expected to continue throughout 2015. New receivable and deferred revenue line items have been incorporated to reflect activity in the new business line for analytics. HIN received donated software due to our nonprofit status in the amount of \$32K. This has been recognized in licenses on the Balance Sheet. \$50K in commission is also included for GE software resale. Contract revenue variances that were not a result of timing included the following: <ul style="list-style-type: none"> ○ \$500K in REC milestone pass-through payments were not achieved. ○ MeCDC was unable to secure additional HIE funds for MaineCare PCMH in the amount of \$478K. • January 2015 statements were also presented for discussion and approval. January is the beginning of a new fiscal year and reflects the new Board-approved budget. The month closed with an increase of \$79K in net assets. A large increase of \$695K in cash and \$738K in deferred subscription fees is due to the timely receipt of payments for participant 	<ul style="list-style-type: none"> • Motion to accept the December 2014 and January 2015 Operating Financials as presented are approved. 	

	<p>agreements. HIN included a request to The Davis Foundation in the annual budget in the amount of \$129K to help support development of a statewide strategy for shared care planning and was awarded \$50K. There were no variances of concern.</p> <ul style="list-style-type: none"> • MacPage completed field work for the annual financial audit the week of March 9. There were no issues of concern and the audit is now going through their internal review process. MacPage is currently working on the Form 990. Both the annual financial audit and Form 990 will be presented to the Board in May. 		
4) Update on FY 2015 Operating Budget	<ul style="list-style-type: none"> • HIN Organizational Structure <ul style="list-style-type: none"> ○ Shaun Alfreds reviewed HIN's staffing needs due to the recent turnover. He reviewed the new organizational chart and explained the new structure. Dev noted that HIN offered supervisory roles to key personnel to report up to the management team. ○ Dev reviewed the Communication/Marketing position that is open due to Amy Landry's departure. ○ Shaun reviewed how this new structure impacts the budget. • Revenue & Cost Reduction Opportunities <ul style="list-style-type: none"> ○ Shaun updated Board on the CDC contracts and ONC grants in detail. The Executive Committee had previously agreed that HIN not pursue the ONC grant. 		
5) Executive Director Report & Operations Status Updates	<ul style="list-style-type: none"> • Volume and Usage Summary Dev Culver briefly reviewed the utilization statistics, the total patients accessed and the notifications sent. We are seeing a large amount of data being sent to NNEACC. Dev let the Board know about moving information to the payers. Dev entertained questions around statistics. • Dev reviewed the 2014 Operational Goals and how HIN did for the year. LTC will continue to be on HIN's radar. 		
6) HIN Strategic Planning Action Plan Activities	<ul style="list-style-type: none"> • Dev noted that the strategic action plan will start appearing in the Board packets on a regular basis. Dev let the Board know that HBI and the Wonder Group will be here next week to discuss selling the HBI product in China-HIN will get a commission on that sale. 		

<p>7) Anthem Breach</p> <p>8) Meeting Adjourned</p>	<ul style="list-style-type: none"> • Dev let the members know about a pending transaction between the Social Security Administration and HIN on disability determination. • Dev also let the members know about early conversations with New Hampshire representatives concerning the possibility of HIN standing up a private statewide HIE in that State. • Dev reviewed HIN's security practices- <ul style="list-style-type: none"> ○ Encrypts all data at rest and in motion ○ The clinical data lives separately than the patient identifying information ○ User access requires three factor authentication ○ HIN maintains security monitoring for traffic both inbound and outbound through the firewall – Anthem did not monitor outgoing data. ○ HIN pays to be attacked – penetration tests done by a third party organization twice a year • Dev reviewed the monthly Executive Summary from Systems Engineering • HIN has upgraded its cyber insurance policy. <p>The meeting was adjourned at 3:55 p.m.</p>		
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