Ride the Coaster of Change at the Annual IT Conference!

When you think about or are at work, do you feel like you are on a roller coaster? There are so many changes happening in health care and technology is changing at the speed of light. Combine the two together and just when you think you are getting your head around it, the bottom drops out and you are zooming down the biggest hill you have ever ridden. It then takes a sharp left turn and a sharp right and back up another hill. You can feel the roller coaster now!

That is why the NJAMHAA IT Project picked this year’s theme for our annual IT conference to be a roller coaster. For one day, we hope to help smooth the ride and give you important information on Health Information Technology. To help your agency serve its clients better, you need to understand not just the nuts and bolts of computers and software, you also need to understand how your IT system will work throughout your organization. Staff with expertise in other areas also need to understand IT and how they will incorporate technology in their workdays. There is something for everyone at this conference, whether you are an IT professional, a performance improvement or quality assurance professional, finance expert, executive level staff or a peer.

It’s all about Health Information Technology. It’s about Meaningful Use. It’s about Compliance and Audits. It’s about Business Continuity and Disaster Recovery (How well did you survive Super storm Sandy?). It’s about learning what you must do when your data has been breached and who you need to notify and why. It’s about learning whether you have actually had a breach or not, and the tools to get you on your way. It’s about showing off new technologies and approaches in treating depression and using Interactive Communication Technologies to assist in recovery from substance use. And there’s even a session on data interoperability and exchange...something that everyone will need to do, whether it’s with insurers, Health Information Offices, laboratories, other providers, or even with the future Administrative Services Organization that the state will engage. We even have a veteran executive who will divulge the secrets of how to implement an electronic clinical record system and what you need to avoid in order to succeed.

[Continued on Page 10]
Another year has begun, and hopefully it will be a far departure from the tragedies and hardships caused by our last two major weather events late last year. They will be storms to remember, for sure. Personally, I was fortunate in that my home was spared, and we all physically survived the aftermath; albeit, we sustained about $90,000 in property damage and I don’t even live at the shore. But, the fear and anxiety experienced that night don’t seem to be subsiding.

makes me want to do my job all that much more, to help those providers out there with their technology decisions, which I know, in the long run, will allow them to assist more clients and treat them more effectively.

And one of the ways we do that is by offering an annual IT conference where we bring in experts from all over the country to provide instructional and educational opportunities for improving the way we do things. See our cover story this issue for more details. But what I can say, is that I promise it is an event you won’t want to miss! Registration is open now, so don’t delay. Get signed up and we’ll make sure you have a great time, in addition to a fabulous learning experience!

Hope to see you all on March 5th at the IT Conference, “Riding the Coaster of Change: Strap Yourself In”.

Peace and God bless,
June

My heart goes out to those who lost everything, including those who lost loved ones who were stuck in the flood waters and did not make it out. Nothing can replace a lost life.

Sometimes, when the wind blows, I feel as though it’s all going to happen again, trees crashing through buildings and fences, and then I realize, perhaps it’s a symptom of PTSD. So many people I have chatted with over the past several months have felt the same. We have a fear of the wind that we just never had before, and for me, it keeps me up at night when I hear it howling. So I can only imagine how others are feeling and the mental health needs they must have. I am very grateful to work in such a wonderful and compassionate safety-net system. It
Groupme: Communication Solutions in Crisis Situations

The recent devastation of Hurricane Sandy left New Jerseyans in a difficult situation. After the initial destruction of the storm itself, power and the Internet were offline for many people for a week or more. Cell towers were often intermittent and travel was not always possible, owing to blocked roads. One agency’s solution to this was to use Groupme

https://groupme.com/sms – a free service which allows group texting. While many phones will allow you to send a text to multiple people, they cannot see each other’s replies. With Groupme, you create a group of cell phone numbers, and your group has its own phone number. Each participant in the group can send a text to the group phone number, which is then forwarded to everyone in the group. The effect is similar to a chat room, but on cell phones instead of a PC.

There are many cross-platform messenger programs for smartphones, but Groupme uses regular SMS (text messaging), so a smartphone is not necessary. All that is required is a phone that can send and receive texts – which most phones today are capable of doing.

Internet service was offline after the storm, so email was no longer an option. Many staff did not have power or Internet at their homes. The Groupme account made it possible for staff to communicate in real time and keep operations running. Staff that did not have agency-provided phones were able to use their personal phones without the need for prior configuration – they could just be added to the group and start sending and receiving messages.

Groupme was not a perfect solution. It was never designed to be HIPAA compliant, so staff could not discuss protected health information over it. It also did require its users to have their phones charged and receiving a signal. All the same, it worked superbly well to keep this agency operating during very difficult times.

Start a group with just one click

Your name
NJAMHAA
Your mobile number
(###) ###-####
Start group

Group Messaging
Start groups with the people already in your contacts. When you send a message, everyone instantly receives it — it’s like a private chat room that works on ANY phone.

Groupme: Communication Solutions in Crisis Situations

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The rapid proliferation of mobile phones and text messaging offers unprecedented opportunities to potentially improve the health of the U.S. population and reach traditionally underserved groups. The Task Force identified innovative health text messaging programs that currently exist or are in development. Below are descriptions of these programs. This list is not comprehensive, but highlights key activities by the U.S. Department of Health and Human Services (HHS) in health text messaging and mobile health.

I. HEALTH TEXT MESSAGING PROJECTS

Maternal and Child Care

A. Text4Baby: Winner of a 2010 HHS Innovates award, the “text4baby” program is a public-private partnership that provides pregnant women and new mothers with free health text messages. HHS’ role has been to ensure evidence-based non-commercial messages and to evaluate the program. The results of the HHS evaluation are expected to be available in 2013.

- [http://www.text4baby.org/](http://www.text4baby.org/)

HHS Contact: Audie Atienza, PhD (audie.atienza@hhs.gov)

B. TXT4Tots: The Health Resources and Services Administration (HRSA) is collaborating with the American Academy of Pediatrics to develop a text message library on nutrition and physical activity, based on the Bright Futures Guidelines for Health Supervision of Infants, Children, and Adolescents. The message library will be used for future programs targeting the parents of children ages 1-5 years and will also be made publicly available and posted on HealthData.gov.

HHS Contacts: Yael Harris, PhD (YHarris@hrsa.gov); Sabrina Matoff-Stepp, PhD (SMatoff-Stepp@hrsa.gov)

II. TOBACCO CONTROL

A. SmokeFreeTXT: The National Cancer Institute’s (NCI) Tobacco Control Research Branch (TCRB) has designed SmokeFreeTXT as a free mobile smoking cessation service designed for teens and young adults across the United States. The service is an extension of the core smoking cessation website, www.smokefree.gov, which consistently reaches between 70,000 and 100,000 visits on a monthly basis. TCRB developed and launched the SmokeFreeTXT initiative as part of a larger project to target and tailor cessation resources to teens and young adults who want to quit. The SmokeFreeTXT program delivers tips, motivation, encouragement and fact based information via unidirectional and interactive bidirectional message formats.

- [http://smokefree.gov/smokefreetxt](http://smokefree.gov/smokefreetxt)

HHS Contact: Erik Augustson, PhD, MPH (augustse@mail.nih.gov)

B. QuitNowTXT: TCRB has also developed an interactive text messaging library and delivery algorithm for adults in the United States who wish to quit smoking. The QuitNowTXT messages offer tips, motivation, encouragement and fact based information in unidirectional and bidirectional interactive formats. This message library is free and publicly available.


HHS Contact: Erik Augustson, PhD, MPH (augustse@mail.nih.gov)

C. SmokeFreeMoms: SmokeFreeMoms is a cross-HHS coordinated pilot project focused on providing pregnant women who wish to quit smoking with personalized, interactive and evidence-based health text messages. HHS partners include the Centers for Disease Control and Prevention (CDC), Substance Abuse & Mental Health Services Administration (SAMHSA), National Institutes of Health (NIH), and U.S. Food and Drug Administration (FDA). The SmokeFreeMoms text message library will be made publicly available and posted on HealthData.gov.

HHS Contact: Sanjay Koyani, MPH (Sanjay.Koyani@fda.hhs.gov); and Carol Crawford, PhD, (cjy1@cdc.gov)
D. Health Alerts On-the-Go: CDC’s health information is now accessible through mobile devices. Visit m.cdc.gov on your mobile phone or PDA for information on seasonal flu, H1N1 flu, public health emergencies, and more. This site is designed to be easily read and navigated from mobile devices and will soon feature even more health and safety topics.

- http://www.cdc.gov/mobile/

HHS Contact: Carol Crawford, PhD (ccrawford@cdc.gov)

Emergency Response and Preparedness

A. Text Alert Toolkit: The HHS Office of the Assistant Secretary for Public Affairs (ASPA), the Office of the Assistant Secretary for Preparedness and Response (ASPR), and CDC have developed a text message library for emergency response and preparedness. The messages, for voluntary use by state and local authorities, provide the public with reliable, credible and timely health information. Currently, the library has information on hurricanes and floods. Future plans include adding CBRNE (chemical, biological, radiological, nuclear, explosion) messages.

- http://emergency.cdc.gov/disasters/psa/textmessages.asp
- Also, the page with the text messages and PSAs: http://emergency.cdc.gov/disasters/psa

HHS Contact: Ira Dreyfuss (Ira.Dreyfuss@hhs.gov)

III. OTHER NOTABLE MOBILE HEALTH (MHEALTH) PROJECTS

Asthma/Respiratory Disease

A. Asthmapolis/ONC Beacon Community Collaboration: This project is being launched by the CDC, the North Carolina Beacon Community and Asthmapolis, a company that provides GPS inhaler and mobile phone applications for patients with asthma. The program will also allow asthma patients to enroll in a text messaging program that will follow them after discharge.


HHS Contact: Aaron McKethan, PhD (Aaron.McKethan@hhs.gov)

Diabetes Education

A. Diabetes mHealth Initiative: This project is a collaborative effort between the HHS Office of Minority Health, American Association of Diabetes Educators (AADE), AT&T, and Baylor University to investigate the use of smartphones’ secure video streaming by demonstrating live clinician/community health worker-directed diabetes self-management education courses. These courses, accompanied by text prompts/reminders, will be offered in areas with a shortage of healthcare providers. The results of this study are expected to be available in 2012.

- See: http://minorityhealth.hhs.gov/templates/content.aspx?ID=9109&lvl=1&lvlID=10

HHS Contact: Commander David Dietz (David.Dietz@hhs.gov)

The rapid proliferation of mobile phones and text messaging offers unprecedented opportunities to potentially improve the health of the U.S. population and reach traditionally underserved groups.

Privacy/Security Research

A. mHealth Privacy and Security Consumer Research: The HHS Office of the National Coordinator for Health Information Technology (ONC) is conducting focus group research to identify and explore the attitudes and preferences of a diverse sample of consumers with respect to the communication of health related information on mobile phones and devices, including text messaging.

HHS Contact: Joy Pritts, JD (Joy.Pritts@hhs.gov)

Domestic Violence/Sexual Abuse Prevention

A. Apps Against Abuse Developer’s Challenge: HHS partnered with the White House to launch the Apps Against Abuse Developer’s Challenge. This national competition called upon technology developers to create innovative applications that offer young adults ways to connect with trusted friends in real-time to prevent abuse and violence from occurring. This application is a first step in encouraging young adults to take an active role in the prevention of dating violence and sexual assault.


HHS Contact: Audie Atienza, PhD (audie.atienza@hhs.gov)
Does your agency get its Microsoft software from TechSoup? If not, why not and if you do did you know that there have been several changes to the program that make it easier to get products and now you can get a larger variety and quantity? This article briefly explains why you would want to take advantage of this great program, what Microsoft offers besides software that you may not be taking advantage of and what changes have been made to the amount and type of software you can get.

First, here is a description of TechSoup in case you are not familiar with it: TechSoup is a nonprofit organization that focuses on making technology available to nonprofits and libraries. Through its website, www.techsoup.org, TechSoup offers many learning resources, such as informative articles, free webinars, blogs and forums that you can post in once you sign up for an account. TechSoup also has products available for nonprofits. These products are either free because they were donated by major corporations or offered at a huge discount. TechSoup charges a small administrative fee to distribute these products. They have more than 400 products from more than 40 partners. To participate in this program and to be able to obtain products, you must first sign up your agency for an account at TechSoup by going to https://home.techsoup.org/Pages/registration.aspx. Each partner offers its products to nonprofits with special eligibility rules and limits on quantity and frequency of orders. Once enrolled, you will need to review each company’s rules. This will allow you to determine if your organization qualifies for the products and if so, how much can be ordered.

One of the more popular partners is Microsoft. Over the past few years, Microsoft has changed its program with TechSoup and most recently, it has completely revamped its program. Through TechSoup, Microsoft offers a wide variety of its products. To be eligible for Microsoft products, your organization must be a 501(c)(3) organization and meet other requirements. To verify that your organization qualifies, check online at http://www.techsoup.org/stock/ restrictions.asp#ms. Most organizations servicing mental health and substance use treatment communities do qualify. When you place your order for Microsoft software, you will receive an e-mail from TechSoup with instructions to sign up for an account with Microsoft’s Volume Licensing Service Center (VLSC). Microsoft’s VLSC is where you will have an account to track your software licenses and product keys. Unlike purchasing individual software with a CD/DVD and license for each individual item, with VLSC, you can order one physical set of CD/DVDs or download the software. A license key will be available in your account to install the
product on as many computers for which you purchased licenses. With VLSC, Microsoft offers several benefits in a program called Software Assurance. Software upgrades are one benefit: If the software you have ordered is upgraded within two years of your purchase, you can receive a free upgrade for licensed software. Software Assurance also offers Microsoft E-Learning courses and gives employees the opportunity to purchase software for home at rock bottom pricing.

For more detailed information on VLSC go to http://www.techsoup.org/stock/Microsoft/volume_getstart.asp.

Time Restrictions
Once your organization is registered with TechSoup and qualifies for the Microsoft program, you will next need to understand the product ordering process. Microsoft has certain allotments of product that you can purchase in a two-year period starting when you place your first order. Within that two-year period, you can place as many orders as you want up to the quantity limits set. After two years, the cycle is reset and you can then order products with the limits zeroed out and start a new two-year cycle once the order is placed.

Quantity Restrictions
Microsoft has organized its product offerings into title groups, which are made up of products that serve the same purpose. For example, in the Office Suite title category, versions of Office 2007, 2010, 2013 Pro and standard are listed. In the Windows Desktop title group, Windows XP, Vista, Windows 7 and Windows 8 are listed with 32 and 64 bit versions available. This list is available for download in a PDF at: http://home.techsoup.org/stock/Documents/ms_titlegroups.pdf. During its two-year cycle, an organization can request products from up to 10 title groups. For title groups that contain applications that run on an individual computer (like a desktop or laptop PC), there is a 50-license maximum. For title groups that contain client access licenses or other licenses that provide for connection to or management of a server, there is also a 50-license maximum. For server products, there is a five-product maximum, regardless of title group.

Since Microsoft has enhanced its program with TechSoup, you can save thousands of dollars when purchasing Microsoft products. Please use the links below to learn more about this program and go to www.techsoup.org for information about many other products you can purchase. If you have questions about TechSoup’s offers or problems with your account, or need any other type of assistance, contact Ricci Powers, a representative familiar with NJAMHAA members, at rpowers@techsoupglobal.org or call 415-633-9341.

Useful Links
- For examples of company orders and to better understand quantity limits, use this link and go to the bottom of the page: http://www.techsoup.org/stock/microsoft/guidelines.asp
- Use this link to access a tool for checking your organization’s eligibility: http://home.techsoup.org/pages/EligibilityQuiz.aspx
- If your organization needs additional product beyond the limits of the TechSoup program, go to: http://www.microsoft.com/licensing/licensing-options/for-industries.aspx#tab=4
- For information on Microsoft grants, free software, help and training, go to: http://www.microsoft.com/nonprofit
- Use this link to access five quick video tutorials on the Microsoft donation program: http://www.techsoup.org/learningcenter/software/webinars/page13168.cfm?cg=sp
Tablets for Your Organization: Yes or No?

Tablets have always been around, but really took off with the release of Apple’s iPad in 2010. Android tablets followed up shortly afterwards. Many people have tablets at home and enjoy them a great deal. Should you be looking at tablets in your organization?

The answer, in most cases, is “not yet”.

Most agencies run Microsoft networks. Microsoft is a standard in business. It also makes its software available for nonprofits very inexpensively through channels like TechSoup. As a result, your agency probably has a server running some type of Microsoft server operating system (OS), desktops and laptops running Windows XP or Windows 7, and software like Word and Excel.

Tablets either run iOS (for Apple’s iPads) or Android. Neither OS can run the software you’ve already purchased. They cannot be joined to a Microsoft domain, and accessing network drives is a frustrating procedure. Office Suites for both iOS and Android are available, but aren’t quite at the level of Microsoft Word yet. If your network uses Group Policies to manage PCs and users, note that these policies do not yet work on tablets.

There’s also the user interface to consider. The touch screen of a tablet suits casual use very well, but writing a long document on a piece of glass isn’t much fun. It’s possible to get a keyboard and mouse for a tablet, but at that point, you’d have spent less money on a small laptop.

A strength of tablets is e-mail – they do send and receive e-mail very well. Both iOS and Android can sync with Exchange. However, with client-based solutions like Outlook or web-based solutions such as Outlook Web Access, laptops can compete with them just as well.

Tablets are very good at surfing the web, so if your IT infrastructure is all web-based, then tablets might well be a possibility. Hosted solutions are becoming more popular every day, so there might be an option for tablets if your agency is moving in that direction.

At some point, tablets will have a much larger role in your agency’s infrastructure. Keep an eye on Microsoft’s next version of its tablet, the Surface. It will integrate into Microsoft’s networking and include the Office Suite. That time is not quite here yet. Unless you’re intending to change quite a bit from the network drives and Office documents that most agencies use, laptops are a better use of your IT budget.
The Internet has changed our lives in countless ways. One way is that it is now possible to listen to radio stations from all over the world right from your desktop.

No expensive shortwave equipment or complicated setups – just open your web browser and there you are.

However, here’s a good question: Should you?

Streaming radio is very bandwidth intensive. Rates of 128 to 512 kilobytes per second are commonly used. While that may not seem like much, it can add up quickly. Five or six people all listening to different Internet radio stations can quickly use up your agency’s bandwidth and bring things to a crawl. If you’re commonly hearing complaints that “the computers are slow”, Internet radio may well be the culprit.

There are several ways to control use of Internet radio. The first is administrative. All organizations should have policies detailing acceptable use of the Internet. Sometimes a word is all that is required.

There are also technical ways to block Internet radio. Unfortunately, it simply isn’t point-and-click easy. Blocking by domain name is one way to keep users from getting on the most common radio sites like Pandora and Spotify. This can get unwieldy as users shift to radio stations’ websites, most of which offer a ‘Listen Live’ option.

OpenDNS is a free option that does offer some Internet filtration, including radio. It does require some initial setup. A third option is the use of an appliance or software, which sits in between your internal network and the Internet. A couple examples are Barracuda’s Webfilter appliance and Untangle software. Users’ requests are sent through this type of device, which approves or denies them. While this is the best way of blocking Internet radio (and all unwanted Internet use), it does involve the expense of the device, and updates, and requires someone to administer it.

Your agency ought to consider Internet radio in its acceptable Internet use policy. Your employees will certainly want to use it. Unfortunately, preventing Internet use is just not as easy as clicking on a button.

HHS Issues Final Rule to Amend and Strengthen HIPAA

On January 17, 2013, The U.S. Department of Health and Human Services released the final omnibus rule to strengthen the privacy and security protections for health information established under the Health Insurance Portability and Accountability Act of 1996 (HIPAA).

This long-awaited rule was a requirement outlined in the American Recovery and Reinvestment Act of 2009 to strengthen the patient privacy and security for the advent of electronic health records adoption and the electronic exchange of clinical health information.

This extensive 563-page omnibus rule includes a number of updates that significantly enhance the original HIPAA privacy security rules. Among its provisions, the rule:

- Includes new limits on how patient information can be disclosed for marketing and fundraising activities.
- Expands many of the requirements for business associates who receive protected health information.
- Expands the penalties to $1.5 million for each HIPAA violation.
- Strengthens and clarifies the breach notification requirements.
- Streamlines patient authorization for research purposes.
- Makes it easier for parents and others to share proof of children’s immunizations.

Covered entities and business associates had 180 days from the date the rule was released (July 17, 2013) to modify and to modify contracts and comply with this final rule.

https://www.federalregister.gov/public-inspection
The conference will kick off with an exciting keynote by Peggy Smedley, host of a weekly Internet radio show, publisher of Connected World magazine, and expert and advocate of M2M (machine to machine) technology.

Ms. Smedley is known for her expertise in educating business professionals and consumers about the latest technological advances shaping the lives of all individuals. She will discuss how connected devices are changing the workplace and our personal lives.

As always, we will be running workshops the rest of the day. As noted before, these sessions are not just for IT staff. Be sure to show other experts in your organizations the agenda and have them attend with you. The workshops will be:

Workshop A – New Jersey Medicaid EHR Incentive Program for Eligible Professionals– Am I Eligible? Presenter: NJ-HITEC

New Jersey’s Regional Extension Center. What is the NJ Medicaid EHR Incentive Program? Am I eligible? How much are the incentive dollars? What exactly am I committing to? Come find out all you need to know about the NJ Medicaid Electronic Health Record (EHR) Incentive program for eligible professionals and what it means to attest to A/I/U for year 1.

Workshop B - The Three A’s of a Successful Audit: Accountability, Accessiblility, and Affordability Presenters: Jenna Tine, LCSW, Vice President, Behavioral Health Services, Goodwill Industries of Greater NY & NJ; David Buciferro, Senior Advisor, Foosthold Technology and former Director of Psychiatric Rehabilitation at the New York State Office of Mental Health.

A funder walks into your agency to gauge how her dollars are being spent. Her evaluation depends on how well these three words apply: Accountability—how efficiently your staff is serving people in need; Accessibility—how easily you can report on what your stakeholders want to know; and ultimately, Affordability—how you’re making the most of your resources. Your method of documentation is the key to getting an “A” on your audit. This session offers specific strategies for using technology and metrics to help agencies operate more efficiently and economically while improving their quality of person-centered care. Electronic documentation is becoming critical to any agency’s survival, but a common fear of administrators is that the transition required would take time away from clients. On the contrary, an electronic record provides transparency on multiple levels, creating more time for clients and enhancing the value of the agency to funders.

Workshop C - HITECH BREACH - Control Healthcare Compliance Presenter: Gerry Blass, President and CEO, Blass Consulting & Compliance.

Discover electronic tools to determine risk and breaches. Automate the management and documentation of healthcare and HIPAA compliance activities with enterprise collaboration, notifications, and reporting.

Workshop D - How to Have a Successful ECR Implementation: Essential Considerations Presenter: Gail Lawson, CEO, Sound Behavioral Health (CT).

This workshop will provide an overview of the critical issues to be considered by agency staff when planning an Electronic Clinical Record (ECR) implementation. Both the clinical and IT aspects of a successful implementation will be discussed. Workshop participants will be able to identify the staffing and technical resources necessary to complete a successful ECR implementation; the importance of defining work processes and workflows in a successful ECR implementation; and the key components of an implementation plan suitable for their agencies’ ECRs.

Workshop E - HIPAA, HITECH and How to Stay Out of Jail! Presenter: Helen Osinskiwalski, Esq.

Attendees will learn from the presenter’s legal expertise on HIPAA, HITECH and what it means to become and remain compliant.

Workshop F - Interactive Communication Technologies (ICTs) Presenters: Andrew Isham, Director of Development for ACHESS, University of Wisconsin-Madison and Sharon Hicks, COO, Community Care Behavioral Health Organization and Board Member of U2 Interactive.

Discover two leading online therapy applications for cognitive behavioral therapy (CBT; “Beating the Blues”) and substance abuse recovery (ACHESS). Come prepared...
to discuss and debate how these types of technologies can be best integrated into traditional service delivery settings. Understand how online therapy and mobile technology options are changing the service delivery landscape. Learn how computer based CBT software and mobile apps were implemented. Hear about the outcomes of the people who have used online therapy programs and mobile apps for recovery.

**Workshop G – Meaningful Use 2014: Stage 1 and Stage 2 – What will change, what will remain the same, how can I begin to prepare now?** Presenter: Mary Givens, Meaningful Use Program Manager, Qualifacts Systems, Inc. The final 2014 rules approved this summer bring with them the Stage 2 rules, as well as some changes to Stage 1. Join us to learn more about what will change or remain the same in stage 1, what will be required in stage 2, and what you can do to begin preparing for 2014.

**Workshop H - Business Contingency, Continuity, and Disaster Recovery** Presenter: Stevie Davidson, CPHIT, President & CEO, Health Informatics Consulting (HIC). Learn how HIC, a healthcare transformation firm, applies Enterprise Content Management (ECM) methodology disciplines. Discover the benefits of a comprehensive ECM approach consisting of Business Continuity Planning (mitigates and reduces business outage timeframes), Business Contingency Plans (systemic approach to restoring clients’ overall business operations), Disaster Recovery Plan (details restoration of clients’ hardware and applications), and Business Impact Analysis (asseses and assigns value to clients’ electronically stored information for budgetary purposes).

**Workshop I - Interoperability/Exchange of Health Data** Presenter: Curtis E. Goldhagen, Director, Technical Services, Tidgewell Associates. This workshop will address sharing health data between statewide systems of care (Enterprise System) and EHR applications, including increasing data reliability and reducing/eliminating redundant data entry for healthcare providers.

*Plus, meet vendors who have solutions to implement and enhance your health information systems! They are ready to get on that coaster with you and keep you strapped into your seat!*

**ABH Inc.** http://www.abhct.com
**Askesis Development Group** http://askesis.com
**Foothold Technology** http://www.footholdtechnology.com
**Insight Telepsychiatry, LLC.** http://www.cfgpc.com
**NJ-HITEC** http://www.njhitec.org
**Qualifacts Systems Inc.** http://www.qualifacts.com
**Tidgewell Associates, Inc.** http://www.taisoftware.com

**And more to come!**

*It should be an entertaining, educational and exciting conference with time to network with colleagues!*

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**For one day, we hope to help smooth the ride and give you important information on Health Information Technology. To help your agency serve its clients better.**

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What do the Amendments to the Federal Rules of Civil Procedure Mean?

The Federal Rules of Civil Procedure (FRCP) apply to any organization that has the potential to be involved in litigation in the U.S. Federal Court system. The amendments, which went into effect on December 1, 2006, mandate that companies be prepared for electronic discovery. The organizations must know where their data is, how to retrieve it, how to meet data requests and which data will not be subject to search.

What Organizations are Impacted?
Any organization in any industry that has the potential of being involved in litigation in the U.S. Federal Court system is impacted by the FRCP.

When Did the Amendments to the FRCP Go into Effect?
The amendments went into effect on December 1, 2006.

What Happens if an Organization Is Not Prepared for Litigation?
Organizations that do not have automated systems in place to help them effectively store, search and retrieve e-mail data in real-time face paying high costs for “rush job” discovery requests. In some instances, failure to produce the requested data in a timely fashion may even lead to the loss of a lawsuit.

One area of concern is e-mail. Over the years, e-mail has become the predominant tool for communication in agencies and the amount of e-mail has grown significantly. In order to comply with federal laws and to be able to deal with space issues, your organization may need to implement archiving rules. Microsoft Exchange has built in archiving tools; third-party archiving solutions are also available. Some are appliances, such as Barracuda’s Mail Archiver or Cloud solutions. Each has its pros and cons, depending on your agency’s needs.

But, what if employees are using a personal e-mail platform to conduct work business, instead of using the corporate resources that would be open to litigation? Does their personal e-mail and all conversations then become discoverable? It’s a good question, but it lends itself to the issue of transparency. Why does an employee have to hide work-related conversations? In June 2012, the Governor of New Mexico specifically issued a statement that all government employees were banned from using their own personal e-mail platforms to discuss work related matters. It goes to the issue of trust in government, and being open and transparent.

In January 2013, a Regional Chief of the Environmental Protection Agency (EPA) was accused of violating the “Open Records Act” because he conducted work business through his personal e-mail account. This comes on the heels of the outgoing EPA Administrator, who stood accused of conducting official business from a personal e-mail account. The agency was required to release the majority of her personal e-mails earlier in the month, after EPA officials came under fire for not being transparent.

Organizations should have policies that address the use of personal e-mail for work. There is no way for an organization to remain compliant with regulations by allowing this type of activity to go on, and it should be prevented and/or prohibited. An organization would never be able to respond to a request for e-Discovery on short notice and if it could, it would be extremely costly to go through yet more litigation just to be able to access communications from an employee’s personal e-mail account.

For more information and recommendations, reach out to the IT Project. We will be glad to help.