

Bridging Information and Care Work Group Charge 2025-2026

DRAFT 11/7/2025

Work group charge

The purpose of this work group is to provide expert input on actions to advance the sharing and use of health and health-related information to support individual health care and public health in Minnesota. Interoperability and other health data exchange activities play an important role in bridging information and care and will be a key focus of this work group. The work group will also serve as the forum to discuss and respond to any related issues from the e-Health Advisory Committee, the Minnesota Department of Health, other state agencies, and care partners.

Context

The goal of interoperability and health data exchange is to help make health information available, when and where it is needed, to improve the quality and safety of health and health care. In Minnesota, many efforts are underway to help achieve the secure electronic exchange of clinical information between organizations using nationally recognized standards.

Minnesota's approach has been to support a market-based strategy that allows health information organizations (HIOs) and other HIE service providers to bring innovation and initiative to the state, while maintaining state government oversight to ensure fair practices, sustainability and compliance with state and federal privacy, security and consent protections.

In recent years, federal and national efforts have greatly advanced health data exchange throughout the state and country. The development, adoption and increasing use of the Trusted Exchange Framework and Common Agreement™ (TEFCA) is a nationwide framework for health information sharing (). TEFCA is intended to remove barriers for sharing health records electronically among healthcare providers, patients, public health agencies, and payers.

Although TEFCA is gaining momentum and other interoperability and health data exchange mechanisms are widely used, gaps remain particularly for exchange between organizations using the Epic EHR and non-Epic using organizations, and between non-Epic users. This work group is charged with identifying opportunities and strategies to increase the electronic exchange of health information in Minnesota to enhance the use of information to bridge and support both individual and public health.

Key activities and tentative timeline

December 2025 - February 2026

- Review and provide input on environmental scan/status of current data sharing environment in Minnesota, including, but not limited to, the following:
 - Transitions of care and care coordination across the health ecosystem paying particular attention to specialists, long-term care and other smaller providers
 - Public health data reporting and case management
 - Health-related social needs information and referrals
- Review and discuss past efforts and lessons learned on root causes for the lack of interoperability in Minnesota
- Develop inventory of use cases where exchanged information is supporting care and where there are gaps and/or challenges

March - April 2026

- Prioritize use cases, with an initial focus on high priority use cases, and identify opportunities to address gaps
- Learn about and discuss options for information sharing and use/reuse including health information organizations (HIOs), community information exchanges (CIEs), TEFCA -QHINs, health data utilities (HDUs), networks of networks, and other examples
- Review strategies used by other states to address information sharing needs and identify strategies that could be adapted for use in Minnesota

April - May 2026

- Develop recommendations that are trusted and sustainable to meet identified needs to bridge information and care including, but not limited to:
 - Support for entirety of health ecosystem, specifically smaller, independent providers including specialty clinics, long-term and post-acute care, pharmacies, and others
 - Getting organizations connected for health information sharing (consider options such as a Minnesota HIO, Qualified Health Information Network (QHIN- TEFCA), Minnesota Department of Human Services Encounter alerting service (EAS) or other)

Ongoing related activities

- Monitor and respond to rulemaking, policy, and other federal and state government activities (e.g., progress of TEFCA implementation and QHIN use, and CMS - Make Health Tech Great Again initiative)

- Provide updates to the Minnesota e-Health Advisory Committee.

Deliverables

Any materials created are expected to be widely shared and used by the Minnesota e-Health Advisory Committee, the Minnesota Department of Health, and other local and state partners.

- Complete an inventory of assets, successes and information sharing needs (e.g., not able to get information, information not easily useable) and identify ways to address unmet needs.
- Recommend actions that are trusted, practical, achievable, and sustainable to address the information sharing needs identified in the inventory, ensuring that any recommended actions align with, federal, and state-level activities.

Timeframe and expectations

Meetings will begin by December 2025 and every 4-6 weeks thereafter. All members of the community and advisory committee are welcome to join the work group.

Work group participants are expected to:

- Attend and participate in work group meetings and activities.
- Review meeting materials and be prepared to contribute insights and expertise; engage your network as needed to provide additional expertise.
- Bring the perspective of the represented stakeholder group (for AC members) and/or your expertise to discussions and decision-making.
- Act as the liaison between work group and related groups or partners, sharing reports and information as directed.
- Keep the statewide interests of the Initiative foremost in decisions and recommendations, in particular health equity.
- Communicate with others in a professional manner.

Leadership

Co-chairs:

Steve Johnson

Laura Topor

University of Minnesota

Granada Health

MDH lead staff:

Anne Schloegel

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Definitions

Health information organization (HIO)- An HIO is an organization that oversees, governs, and facilitates health information exchange among health care providers that are not related health care entities as defined in Minnesota Statutes, section 144.291, subdivision 2, paragraph (i), to improve coordination of patient care and the efficiency of health care delivery.

The Minnesota Department of Health issues Certificates of Authority to operate in Minnesota as an HIO to qualified organizations in accordance with all of the duties and privileges afforded to such HIOs pursuant to Minnesota Statutes, chapter 62J, sections 498-4982.

<https://www.revisor.mn.gov/statutes/cite/62J.498>

Qualified Health Information Network (QHIN)- to the extent permitted by applicable SOP(s), a Health Information Network that is a U.S. Entity that has been Designated by the RCE and is a Party to the Common Agreement countersigned by the RCE. Source: Common Agreement Version 2.0 and Participant/Subparticipant Terms of Participation Version 1.0

(https://rce.sequoiaproject.org/wp-content/uploads/2024/08/TEFCA-Glossary_August-2024.pdf)

Trusted Exchange and Common Agreement (TEFCA)- The overall goal for the Trusted Exchange Framework and Common Agreement™ (TEFCA™) is to establish a universal floor for health care information technology (health IT) interoperability across the country. <https://rce.sequoiaproject.org/>

Centers for Medicare and Medicaid Services - Make Health Tech Great Again initiative

Focus is on two broad areas: promoting a CMS Interoperability Framework (<https://www.cms.gov/health-technology-ecosystem/interoperability-framework>) to easily and seamlessly share information between patients and providers and increasing the availability of personalized tools so that patients have the information and resources they need to make better health decisions. <https://www.cms.gov/priorities/health-technology-ecosystem/overview>