



Jewish Family & Children's Service

Providing care, help and healing to those in need

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Unconnected Healthcare Providers Health Information Exchange (HIE) Grant Program

Funding Opportunity Number: 2012-ASET-HIE-01

Arizona Department of Administration

Arizona Strategic Enterprise Technology Office

Grant Application

Lead Organization: Jewish Family & Children's Service

President and CEO: Michael R. Zent, Ph.D. (Executive Sponsor)

602- 279-7655

Michael.zent@jfcsaz.org

Date: November 16, 2012

Amount Requested: \$100,000

Grant Contact: Grants Manager: Jane Eeley (for Application Completion)

602-567-8384

Jane.eeley@jfcsaz.org

1. Project Description and Partner Relationship/Collaborative Structure

a. Introduction

Jewish Family & Children's Service (JFCS) is submitting this grant application in collaboration with Maricopa Integrated Health System (MIHS), with JFCS as the fiscal agent on the proposed project. JFCS has a goal to develop a health information infrastructure that includes an electronic health record and shared health information for behavioral health recipients and their primary care and behavioral health providers. JFCS wants to address the behavioral health needs and the serious multiple co-occurring health problems of its shared patients. JFCS would like to facilitate improved physical health care for JFCS patients not currently connected with a primary care provider and improved behavioral health care for MIHS patients needing mental health care but not currently connected with a behavioral health provider.

JFCS is proposing to develop the exchange of health information between MIHS and itself to improve treatment and care coordination for a highly vulnerable population of adults experiencing co-morbidity, i.e. patients with serious multiple behavioral health and physical health problems. Specifically, JFCS is requesting support for a three stage information technology project: Stage 1 – planning and implementation of first stage of Uni-directional Direct Exchange: Query/Fax with MIHS (point-to-point exchange); Stage 2 – planning and implementation of robust Bi-directional Exchange with MIHS; Stage 3 – participation in Community-based Behavioral Health Information Exchange (HIE). This proposal focuses on the Office of the National Coordinator (ONC) health information priority #3: "Facilitating transitions of care by sharing patient care summaries across unaffiliated organizations."

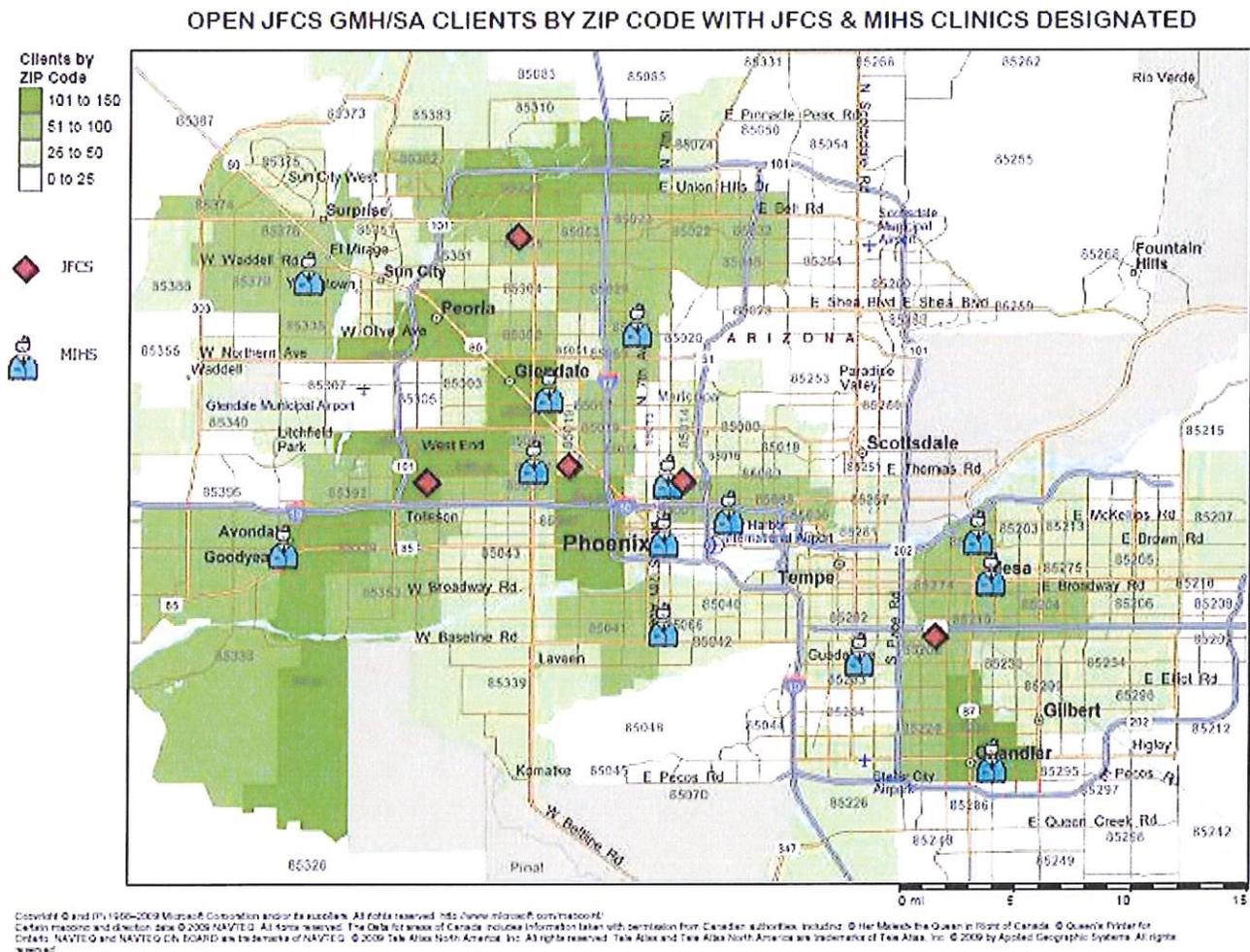
b. Partnership

Jewish Family & Children's Service is a non-profit, non-sectarian organization founded in 1935, whose mission is to strengthen the community by offering high quality behavioral health and social services to children, families and adults of all ages throughout Maricopa County. Through the provision of specialized programs in behavioral health, geriatrics, prevention, and family violence, JFCS strives to: assist individuals to improve their ability to cope with difficult life circumstances, assist parents to improve their emotional health and effectiveness as parents, and increase individuals' support systems and connections to community resources. JFCS' services are provided without regard to age, gender, faith, ethnicity, family size or income. Last year, the agency as a whole served over 34,000 persons throughout Maricopa County, with over 350 staff. In 2012, JFCS' four Behavioral Health clinics and In-Home Older Adult Counseling (Behavioral Health) Program with 235 staff served over 18,000 low-income persons - children, youth (including foster care youth) and adults, among whom 32% represented minorities.

Maricopa Integrated Health System (MIHS), as the largest health care safety net for the citizens of Maricopa County, has a strong legacy of delivering high quality care. As the State's only public health care system, MIHS has provided primary and specialty health care services to all members of the community for 135 years, regardless of their ability to pay. MIHS provides leadership in patient care, education and research throughout Maricopa County, and has recently become the principal academic affiliate of the University of Arizona College of Medicine – Phoenix. The flagship campus features Maricopa Medical Center. MIHS also home to the Arizona Burn Center, 10 ambulatory outpatient clinics located throughout Maricopa County, the HIV-specialty McDowell Healthcare Center, the Refugee Women's Health Center and the Comprehensive Healthcare Center specialty clinic. MIHS realizes close to 20,000 inpatient admissions and 300,000 outpatient visits annually. MIHS is the health care safety net for the people of Maricopa County. Many patients face major challenges such as lack of health insurance,

complex medical problems and difficult socioeconomic situations. Seventy-four percent of all MIHS patients are ethnic minority with nearly sixty percent being specifically Hispanic.

JFCS is partnering with MIHS because MIHS is a Federally-Qualified Health Center Look-Alike and its clinics are located in proximity to JFCS clinics. MIHS doctors serve as the assigned primary care physician for many of JFCS patients. Additionally, MIHS uses an electronic medical record and its philosophy is community-focused consistent with that of JFCS. Finally, both organizations share a strong commitment to integrated care. Please see map below regarding proximity of MIHS clinics to JFCS clinics.

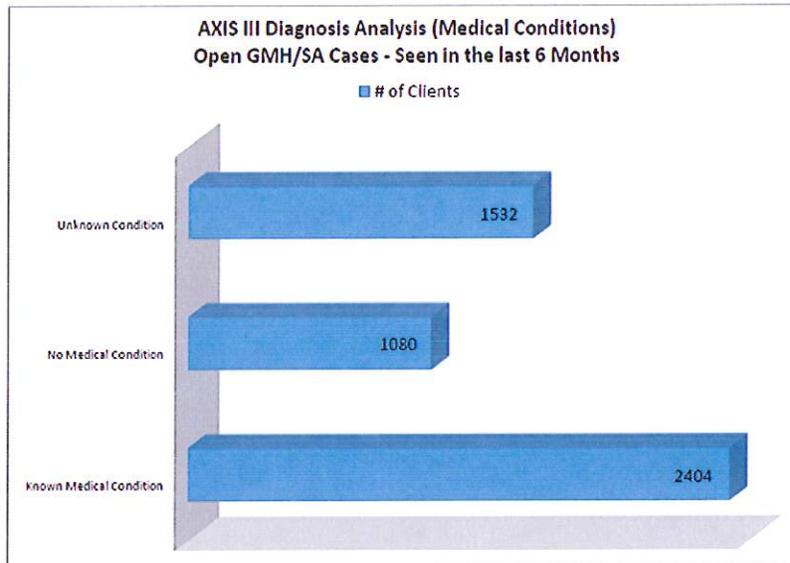


c. Target Population

The focus of this application is on a low-income population in Maricopa County who are adults with mental and substance abuse disorders. Many of the individuals in this group have both mental and medical conditions. Studies examining the association between specific medical and mental disorders in nationally representative samples have found high rates of co-morbidity; mental health disorders are rarely the only health problem. These conditions are so severe that when combined with serious health problems, such persons die approximately twenty-five years earlier than the general population.

A recent review of JFCS data indicated that among its caseload of General Mental Health and Substance Abuse adult patients (GMH/SA), at least 2000 - 3000 patients have a current medical condition. This proposed project focuses on those patients. JFCS recognizes that achieving the goals of health care reform of improved quality and efficiency will require focusing on subgroups most at risk for high costs

and poor quality of care. Persons with co-morbid mental and medical conditions represent such a population. The chart below indicates that almost half of JFCS' patients have a known medical condition and for an additional fifteen hundred their medical condition is not known but warrants investigation.



d. Organizational Capacity (JFCS and MIHS)

JFCS has been administering diverse programs through funding from many governmental, corporate, foundation and private funding sources since its inception in 1935. Last year, JFCS managed approximately 30 funding sources. JFCS' management team has extensive experience in ensuring compliance with contractual obligations for a variety of funding sources. JFCS is independently audited each year and complies with state and federal regulations. JFCS' Accounting Department of seven staff utilizes the state-of-the-art Navision software. Business Intelligence staff provide regular program reports, and for this proposed initiative will provide data for monitoring and reporting the number of transitions. Transitions will be tracked by number of Continuity of Care Documents (CCD's) shared. Data sharing through CCD is estimated for 2000 to 3000 patients/patients with co-morbid conditions who authorize data exchange from their records.

JFCS is one of the largest behavioral health providers that directly controls its own Information Technology resources. JFCS has a well-established IT capability and a robust client database system through NextGen software which JFCS has customized for behavioral health. NextGen is the second largest medical software system and one of the largest outpatient Electronic Health Record (EHR) vendors in the country. JFCS had recognized the need for electronic health records for behavioral health in the late 1990's and began using NextGen in 1999. JFCS has already implemented features like e-prescribing, electronic laboratories, and electronic signatures. JFCS also has over eighty accounts with GSI Healthcare for Direct Exchange. JFCS is working with NextGen on a peer to peer solution to address the interoperability between Epic and NextGen systems.

JFCS' relationship with NextGen is unique in that JFCS has developed behavioral health templates within NextGen. JFCS has fully developed a behavioral health knowledge base that is largely customized specifically to AZ Department of Health (ADHS) requirements. NextGen recognizes JFCS as a leader in behavioral health IT. Because of the relationship with NextGen, JFCS has access to technical expertise at the national level that supports the ongoing sharing of information across health providers.

JFCS was one of the first behavioral health agencies to register for incentives under the Medicaid Electronic Health Record Incentive Program in Arizona. JFCS has recognized the necessity for the capacity to exchange health information to be well positioned for new health care contracts under health care reform, consistent with its business objectives. Outcome-based care, patient-centered medical homes and care coordination will all be requirements for health care business going forward and all necessitate health information exchange. Accountable Care Organizations, for example, will require integrated care with coordination and data exchange. The recently released Request for Proposal (RFP) for the Regional Behavioral Health Authority requires integrated services (physical health and behavioral health integration), care coordination and strong information exchange capabilities, beginning with a new contract in early 2013. It is critical that behavioral health providers who plan to sub-contract with the successful bidder, including JFCS, are prepared for health information exchange to meet the requirements demanded by the Arizona Department of Health Services. JFCS envisions full capacity for sustained and robust participation in electronic information exchange. JFCS wishes to capitalize on its IT progress, and specifically, now to grow the relationship with MIHS in this area.

JFCS is also familiar with the requirements for Health Information Exchanges (HIE) and how these are currently being developed and implemented. JFCS is involved with a network of behavioral health providers interested in the implementation of a Community-Based Behavioral Health Information Exchange. Stage 3 of the proposed work plan focuses on the development of JFCS' participation in that effort. The network will use a NextGen product ("Community Health Solutions") that is a Hub/Spoke, Centralized Model that offers: Clinical Data Reporting; Community Chart for Patients; Master Patient Index; Provider Portal; State Certification of Data; Interface Simplification; and Referral Management. The goal is to use HIE technology to enhance quality care and patient safety through improved clinical data communication in a variety of ways, with access to both health and behavioral health patient data. The intent is to collaborate on an ongoing basis with Health Information Network of AZ (HINAZ.) MIHS will partner with the Community-Based Health Information exchange at a later date.

JFCS has its own information technology resource which is called *Topaz Information Solutions*. *Topaz IT Solutions*, an Arizona-based company with twelve years of behavioral health and social service content developed in NextGen that is specific to Arizona business, is providing consultation to the network on the HIE and specifically on NextGen's "Community Health Solutions" product. Topaz is a licensed reseller of NextGen software and has ten clients in Arizona. Topaz is the technical resource which will be helping with this effort. JFCS is taking the lead in putting together the Community-Based Behavioral Health Information Exchange and will be installing and implementing software to perform health information exchange functions.

MIHS has converted to an Electronic Medical Records (EMR) system called Epic which is an integrated Health Information Technology (HIT) system. The Epic EMR has the building blocks for developing sophisticated tracking and reminder systems such as health maintenance alerts and best practice alerts. These alerts can quickly bring key information to the attention of the patient care team and be tailored to enhance MIHS' goal of providing a Patient Centered Medical Home (PCMH) in a way that leverages the time of the patient's care team. Epic improves the health and wellness of the community served by MIHS through carefully selected, planned and integrated business and technology transformation.

MIHS was one of the first health care systems to demonstrate the value of a statewide Health Information Exchange with the demonstration project AIME. MIHS is working with HINAZ to enable any patient care to be documented and available across the HINAZ network, with the patient's consent and maintaining HIPAA privacy of the patient's confidentiality. MIHS values this form of interoperability and exchange of information to benefit the patient, engage patients and families, enhance care coordination, and improve population and public health.

2. Project Work Plan: (Planning & Implementation Combined)

ACTIVITY	ACTIVITY DETAIL	PARTY	DUE DATE
Stage 1 –Uni-Directional -Query/Fax			
NextGen (NG) - Generate CCD	Configure medical summary utility for each server	JFCS	15-Jan
Configure Connection	JFCS to MIHS Epic Care Everywhere connection	Epic/NG	31-Jan
Attend HIE Marketplace Orientation/Project Kick-Off		JFCS	18-Jan
Batch Generation of CCD & Fax	Configure EHR Connect to generate Continuity of Care Document (CCD) on a nightly basis. JFCS will use batch FAX to send CCD to MIHS. Can we limit what patients we generate CCD for?	JFCS/ NG	28-Feb
Testing			
NG generate CCD		JFCS	28-Feb
Fax NG CCD to MIHS		JFCS	28-Feb
MIHS process CCD	Confirm process @ MIHS successful. Test send/receive/consumption of CCD from JFCS to MIHS.	MIHS	15-Mar
JFCS process CCD	Process CCD - confirm data is correct. Test query/receive/consumption of CCD MIHS to JFCS	JFCS	15-Mar
Quality Assurance	Does the system meet desired performance, reliability, security	JFCS/MIHS	31-Mar
Training	Team training workflow and Technology.	JFCS/MIHS	31-Mar
OUTCOMESTage 1 - Uni-Directional data exchange operational: JFCS → MIHS (“push” and “pull”)			
Stage 2 - Bi-Directional Exchange			
Dependent on NG Version upgrade		NextGen	31-Jan
NextGen Development	NG engineers will complete development of query response from version 5.7	NextGen	31-Jan
Configure Query Connections	Epic to NextGen query. Revalidate NextGen to Epic query.	NG/Epic	15-Feb
Modify Workflow	Modify workflow - no longer processing fax.	JFCS/MIHS	28-Feb
Testing			
MIHS process CCD	Confirm process @ MIHS successful. Test send/receive/consumption of CCD from JFCS to MIHS.	MIHS	28-Feb
JFCS process CCD	Process CCD - confirm data is correct. Test query/receive/consumption of CCD MIHS to JFCS	JFCS	28-Feb
Quality Assurance	Does the system meet desired performance, reliability, security	JFCS/MIHS	
Pilot	Pilot process with selected sites	JFCS/MIHS	31-Mar
Training	Team training workflow and technology.	JFCS/MIHS	31-Mar
Selected Site Rollout		JFCS/MIHS	
Quality Assurance	Confirm workflows, processes & documentation	JFCS/MIHS	
Go Live	Full site rollout	JFCS/MIHS	15-May
Training	Team training workflow & technology	JFCS/MIHS	
Live with sites		JFCS/MIHS	

Quality Assurance	Confirm workflows, processes & documentation	JFCS/MIHS	
Outcome Stage 2 - Bi-Directional data exchange operational: JFCS ↔ MIHS			
Stage 3 - HIE			
Community Based HIE	Availability of Community Based Behavioral Health Information Network	Topaz	1-Apr
Identify JFCS configuration needs		JFCS	31-Mar
Interface Programming	NextGen	NG	31-Mar
Modify Workflow	Modify workflow - include HIE.	JFCS	30-Apr
Mid-Grant Report	Financial; Business Intelligence; IT Reports	JFCS	30-Apr
Testing			
JFCS process data	Confirm processing - confirm data is correct. With this technology we should be able to retrieve/consume CCD data including discrete data elements.	JFCS	31- May
Quality Assurance	Does the system meet: desired performance, reliability, security	JFCS	15-Jun
Training	Team training workflow and technology.	JFCS	30-Jun
OUTCOME Stage 3 - Community Behavioral Health Exchange operational (multi-directional) – JFCS has hardware and software in place- able to retrieve/consume CCD data including discrete data elements			
Final Report	Financial; Business Intelligence; IT Reports	JFCS	31-July

Staff for this project are:

JFCS

Kevin Rhode, Director of Information Technology – Director of proposed project/Project Lead
Javier Favela, Chief Financial Officer – Financial management and grant accounting
Devon Echols, Director, Topaz Solutions –Business intelligence (contracted)
NextGen staff – to be engaged for configuration as well as specific interface development in all stages

MIHS

Mike Totherow, Executive Director Enterprise Applications - MIHS executive input, policy, and IT direction.
Matthew Johnson, Application Architect - Health Information Exchange Subject Matter Expert
Glessie Brown, Int. Mgr. Release of Information Contractor - implement centralized Fax exception processing
Peter Tjeerdsma & Jim Halsey, Ambulatory App. Coord. Consultants – implement configuration changes to facilitate Epic CCD exchange
Doug Oscarson, Orders Application Coord. - implement configuration for RightFax and BizFax integration services within Clinic
Michael Brown, Senior Interface Engineer - implementing interface requirements
Joel Warners, EpicCare Ambulatory Training Specialist –Training of clinic staff on CCD integration
Tamra Wolfer, Provider Educator - Education and Training of providers on CCD integration
Robert McGuire, Epic ASAP Application Coordinator – Building applications and training for ED
Brianne Trackey, Epic ASAP Application Coordinator – Building applications and training for ED
Brenda Robinson, Epic Ambulatory Application Coord. – Building applications/training of Ambulatory Dept.
Vicky Valdiviezo, Prelude/Cadence Application Coordinator – Build applications and train registration staff

JFCS and MIHS are utilizing *Basecamp* for communication purposes to ensure full sharing of information including progress on activity timeline and process outcomes. *Basecamp* is project management software for online collaboration.

3. Line Item Budget

Revenue	JFCS ASET	JFCS MATCH	MIHS ASET	MIHS MATCH	Total
ASET Grant	50,000	0	50,000	0	100,000
Private Contributions	0	25,000	0	0	25,000
MIHS Internal Contribution	0	0	0	65,073	65,073
Total Revenue	50,000	25,000	50,000	65,073	190,073
Expense					
Salaries	20,000	18,570	21,282	15,203	75,055
Benefits	3,200	2,971	6,439	3,329	15,939
Payroll Taxes	1,640	1,523	0	0	3,163
Other Employee Related	0	0	0	0	0
Consultants/Contracted Services	0	0	5,404	8,361	13,765
Travel	0	0	0	2,555	2,555
Equipment	0	0	16,875	35,625	52,500
Software	25,160	1,936	0	0	27,096
Supplies	0	0	0	0	0
Other Expenses	0	0	0	0	0
Total Expense	50,000	25,000	50,000	65,073	190,073
Net Surplus/(Deficit)	0	0	0	0	0

Multi-Organization Request	100,000
Total Match	90,073
Total Project	190,073

4. JFCS Budget Narrative:

Salaries & Fringe Benefits: Jewish Family & Children's Service, Inc. (JFCS) is requesting funding for services to be performed by the Information Technology Director in order to meet the needs and requirements set forth in the work plan:

<u>Position</u>	<u>Project</u>		<u>Project AMT</u>	<u>ASET</u>	<u>Match</u>
	<u>FTE</u>	<u>Rate of Pay</u>			
Director, IT	0.40	46.3582	38,570	20,000	18,570

Benefits include medical, dental, retirement, life insurance, and long-term disability. Costs represent 16% of salaries or \$6,171 of which JFCS is requesting \$3,200 be funded through the ASET grant and the remaining \$2,971 be matched by private contributions.

TOTAL Salaries and Fringe Benefits: \$47,904 (\$24,840 - ASET / \$23,064 - JFCS Match)

Travel: No travel budgeted for this project.

Equipment: No equipment budgeted for this project.

Software: JFCS' software vendor is Topaz Information Solutions, LLC who is an authorized reseller of NextGen. It is projected that JFCS will need to install NextGen interfaces and upgrade to the latest version of EHR software (Version 5.7) in order to be able to successfully generate and consume (bi-directional) CCD/CCR & HL7 transactions. Interfaces and implementation hours to upgrade NextGen is projected to cost \$27,096. JFCS is requesting that \$25,160 be funded by ASET and the remaining amount of \$1,936 be matched through private contributions.

Supplies: No supplies budgeted for this project.

Consultants/Contracted Services: No professional contracted services budgeted for this project.

Other: No professional contracted services budgeted for this project.

In-kind match: JFCS will use private contributions to fund the required \$25,000 of the grant. As described in the narrative above, \$23,064 of the IT Director's salary and fringe benefits and \$1,936 of software & implementation services will be matched using secured private contributions by JFCS.

4. MIHS Budget Narrative:

MIHS Staff

Position	Hours on project	MIHS Budget Salary	MIHS Match Salary	MIHS Budget Benefits	MIHS Budget Match	Activities to be performed
Executive Director Enterprise Applications	30	\$0	\$2,681.10	\$0	\$454.80	MIHS executive input, policy input, IT direction
Application Architect	92	\$2,706.64	\$2,706.64	\$460.92	\$460.92	Health Information Exchange Subject Matter Expert
Orders Application Coordinator	46	\$690.92	\$690.92	\$230.46	\$230.46	Implementing configuration changes for RightFax and BizFax integration services within the Clinic
Sr. Interface Engineer	160	\$3,816.00	\$3,816.00	\$801.60	\$801.60	Implementing interface requirements
EpicCare Ambulatory Training Specialist	320	\$9,512.44	\$752.56	\$3,564.80	\$0	Education and training of clinic staff on CCD integration
Provider Educator	68	\$1,417.46	\$1,417.46	\$378.76	\$378.76	Education and training of providers on CCD integration
Epic ASAP Application Coordinator (2)	70	\$1,119.05	\$1,119.05	\$389.90	\$389.90	Building applications and training for Emergency Departments
Epic Ambulatory Application Coordinator	60	\$1,495.50	\$1,495.50	\$334.20	\$334.20	Building applications and training of Ambulatory Departments
Prelude/Cadence Application Coordinator	50	\$523.50	\$523.50	\$278.50	\$278.50	Building applications and training of front office registration staff
TOTAL	896	\$21,281.51	\$15,202.73	\$6,439.14	\$3,329.14	

Contractors & Consultants:

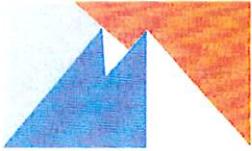
Name – Contractor / Consultant	Hours on Project	MIHS Budget Salary	MIHS Match Salary	MIHS Budget Benefits	MIHS Budget Match	Activities to be performed
Glessie Brown (Contractor)	92	\$960.00	\$880.00	\$0	\$0	Responsible for implementing centralized Fax exception processing, Review and approval of exchange of health information
Peter Tjeerdsma – Consultant	40	\$2,250.00	\$3,741.00	\$0	\$0	Informatics Application Operations Analyst; Migrate build for multiple EPIC modules; Implement configuration changes to facilitate CCD exchange
Jim Halsey – Consultant	39	\$2,194.75	\$3,740.00	\$0	\$0	Epic Ambulatory, Inpatient Orders, Order Transmittal and Inpatient Clinical Documentation, and Ambulatory and Inpatient Build; End user support; Epic certifications for Ambulatory and Inpatient care
TOTAL	171	\$5,404.75	\$8,361.00	\$0	\$0	

Travel

Contractor	# of Days	Hotel	Per Diem	Air fare	TOTAL for Match
Peter Tjeerdsma	3	\$110*3 = \$330	\$55*3 = \$165	\$705	\$1,200
Jim Halsey	3	\$110*3 = \$330	\$55*3 = \$165	\$705	\$1,200
Glessie Brown – Mileage	\$0.555 per mile; 20 miles per day; 14 days = \$155.00	\$0	\$0	\$0	155.00
TOTAL		\$660	\$330	\$1,410	\$2,555.00

Equipment

Component	MIHS Budget	MIHS Match	Total
HINAz Infrastructure Costs	\$1,875.00	\$5,625.00	\$7,500.00
HINAz Interface Set-up	\$15,000.00	\$30,000.00	\$45,000.00
TOTAL	\$16,875.00	\$35,625.00	\$52,500.00



**MARICOPA
INTEGRATED
HEALTH SYSTEM**

Count on us to care.

**Maricopa Medical Center
Maricopa Integrated
Health System**
2601 E. Roosevelt
Phoenix, Arizona 85008
Tel (602) 344-5011

Desert Vista Hospital
570 W. Brown Road
Mesa, AZ 85201

Behavioral Health Annex
2619 E. Pierce St.
Phoenix, AZ 85008

Family Health Centers:
Avondale
950 E Van Buren
Avondale, AZ 85323
480 344-6800

Chandler
811 S. Hamilton
Chandler, AZ 85225
480 344-6100

Comprehensive Health Center
2525 E. Roosevelt St.
Phoenix, AZ 85008
602 344-5011

El Mirage
12428 W. Thunderbird
El Mirage, AZ 85335
623 344-6500

Glendale
5141 W. Lamar
Glendale, AZ 85301
602 344-6700

Guadalupe
5825 E. Calle Guadalupe
Guadalupe, AZ 85283
480 344-6000

Maryvale
4011 N. 51st Ave
Phoenix, AZ 85031
623 344-6900

McDowell
1144 E. McDowell Rd, Ste 300
Phoenix, AZ 85008
602 344-8550

Mesa
59 S. Hibbert
Mesa, AZ 85210
480 344-6200

Seventh Avenue
1407 S. 7th Ave
Phoenix, AZ 85007
602 344-6600

South Central
33 W. Tamarisk
Phoenix, AZ 85041
602 344-6400

Sunnyslope
934 W. Hatcher
Phoenix, AZ 85021
602 344-6300

November 5, 2012

Mr. Kevin J. Rhode
Director, Information Technology
Jewish Family and Children's Services
4747 North 7th Street, Suite 100
Phoenix, AZ 85014

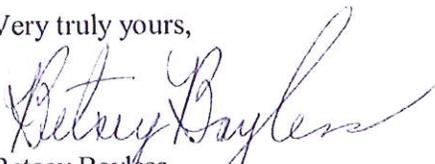
Dear Mr. Rhode,

On behalf of Maricopa Integrated Health System (MIHS), I would like to express my support for the Arizona Strategic Enterprise Technology (ASET) Unconnected Healthcare Providers Health Information Exchange (HIE) Grant Program. This project will promote the exchange of valuable health information between MIHS and Jewish Family and Children's Services (JFCS) and enhance the care provided to those most at-risk in our community.

MIHS is the largest healthcare safety net for citizens of Maricopa County, having provided services to low-income and ethnically diverse residents for 135 years. Our medical providers and affiliated staff utilize a multi-disciplinary team approach to treatment and collaborate closely with referring physicians, outpatient treatment teams from behavioral health agencies and other health care professionals. As our two organizations experience a high number of care transitions, grant funding through ASET will facilitate the exchange of health information in a timely and more efficient manner. Connecting JFCS behavioral health physicians with MIHS primary care providers is a great enhancement to the coordination of complete healthcare for these patients.

MIHS is a committed partner and will remain an engaged participant and collaborator in achieving the goals of the project. We look forward to working with Jewish Family and Children's Services believe that our organizations possess the professional reputation needed to make this grant successful.

Very truly yours,



Betsey Bayless
President and Chief Executive Officer
Maricopa Integrated Health System

Information Technology Executive

Proven Senior IT executive and USMC Veteran with a proven combination of leadership skills and technical expertise. Leverages IT as a strategic investment to drive business value. A champion for the use of IT to drive and enable business alignment and process simplification. Known for a collaborative approach and partnering with executive leadership to define IT strategy and use technology to transform and simplify business processes. Certified project manager (PMP) with significant record of delivering complex enterprise-level projects and measurable results. Recognized for leadership and problem solving with ability to function effectively on strategic and tactical levels simultaneously.

Employment History

Jewish Family & Children's Service (JFCS) • Phoenix, AZ

2009 - Present

Non-profit, non-sectarian organization providing quality behavioral health and social services to children, families and adults throughout Maricopa County.

Director, Information Technology

Report directly to the CEO/President. Overall responsibility for the IT strategy and operations of \$30M behavioral health / social services agency (8 sites affecting over 31,000 individuals annually) utilizing the NextGen EMR and EPM. Plan, coordinate, direct, and design all operational activities of the IT department, as well as provide direction and support to leverage IT strategic investments to drive business value and enhance mission-critical business operations. Provide vision and leadership for developing and implementing information technology initiatives across all areas of the organization. Collaborate directly with the executive management team and decision makers in other departments to identify, recommend, develop, implement, and support cost-effective technology solutions for all aspects of the organization. Determine strategic product and service vendor relationships and manage ongoing partnerships.

- Upgraded the IT organization - hired new staff and lead efforts toward defining corporate program office and project management structures, processes, and resource alignment.
- Defined IT roadmap – 3 year systems strategy as well as 12-month operational and staffing plans.
- Implemented IT Governance procedures - Defined strategy and successfully implemented IT Controls to improve department capability to respond and track projects as well as service requests.
- Improved communication between business and IT by establishing business planning council where top decision makers meet quarterly with IT staff and prioritize initiatives.
- Restructured network infrastructure - Increased bandwidth 100% and reduced cost 21%.
- Upgraded aged user equipment – reduced average inventory age from 8 years to 3 years.

Topaz Information Solutions LLC • Phoenix, AZ

2009 - Present

A NextGen value added reseller (VAR) – JFCS owns 50% and is the managing partner. JFCS owns and develops a custom behavioral health knowledge base within the NextGen product and began selling this content in 2008.

Director, Information Technology

Same as JFCS - oversee the streamlined operation of the IT department and to ensure it aligns with the business objectives of the organization. Develop and manage application portfolios for each department and to attain all IT service level agreements for the user community within the organization.

- Develop and grow staff to effectively address the needs of a growing Topaz client base. Client base expanded 450% over 3 years.
- Successfully stabilized team after growing from 3 members to over 15 in 3 year period (400% growth).
- Defined strategy and leveraged local and national resources to implement point to point information exchange between behavioral health (NextGen) system and local large hospital (Epic) system.
- Lead technology efforts in developing a sustainable community based health information exchange (HIE) for the behavioral health community. Improve treatment and care coordination for highly vulnerable patient population.

 Capital Group Companies • Scottsdale, AZ

1997 - 2009

Software Quality Automation Engineer / Technical Analyst (2007 – 2009)

Provided technical support for test team tools and processes. Facilitated test strategy and plan development. Incorporated industry standard test techniques, strategies and processes. Developed custom solutions supporting test, business and system process quality.

Programmer / Analyst (1997 – 2007)

Provided software solutions based on defined problems, requirements, and business need. Generated new or modified existing applications to meet stated business requirements. Provided on call support for nightly processing.

 Burlington Air Express (BAX Global) • Irvine, CA

1996 - 1997

Senior Programmer / Analyst (1996 – 1997)

Provided software solutions based on analysis of stated business requirements. Communicated plans and progress successfully to stakeholders.

 Southern Wine & Spirits • Cerritos, CA

1994 - 1996

Programmer / Analyst

- Designed and maintained Natural 2 (ADABAS) and COBOL application systems - Accounts Receivable, Billing, Inventory, Purchasing, and Order Entry systems.
- Production Support - Analyzed and resolved nightly processing errors and issues.

 United States Marine Corps • Camp Pendleton, CA

1988 - 1994

Programming Chief

- Maintained/Developed custom supply applications and reports using Natural 1 (ADABAS) for the USMC West Coast Supply System.
- Developed and managed team of 5 to 7 person programming staff.
- Maintained systems and provided security administration (LAN and Mainframe systems).

Small Systems Specialist

- Managed the maintenance and service of several hundred PC's.
- Trained end users in the effective use of Office Automation software.
- Maintained high levels of customer service, quality assurance, and distribution of locally developed systems and applications.

Education

Degree

Jones International University • Denver, CO

- Masters of Business Administration – Project Management.

University of Phoenix • Phoenix, AZ

- Bachelor of Science in Business – eBusiness.

Certifications

HL7 International

- **HL7 ELearning Course** - Intro to Vocabulary, Intro to the world of standards, XML and UML, Intro to HL7 V2.x data types and ACK, Intro to V2 XML, Intro to HL7 V3, V3 Data types and XML, Model to Message, Intro to CDA, CDA R2 Basic Architecture: Header, Body and Entries,

College of Healthcare Information Management Executives (CHIME)

- **Healthcare CIO Bootcamp** (October 2012) - The Healthcare CIO Boot Camp is an intensive 3 ½ day education program offered by the College of Healthcare Information Management Executives (CHIME) taught by a faculty of healthcare CIO thought leaders. Combining presentations, small group discussions, case studies, and interactive problem solving, participants learn the real-world skills necessary to become a successful healthcare CIO.
- **Certified Healthcare Chief Information Officer (CHCIO)** – Examination planned for 2013.

Health Information Management Systems Society (HIMSS)

Certified Professional in Healthcare Information and Management Systems (CPHIMS) – examination planned for March 2013.

ITIL Foundation

Examination four foundation level completed with SMME (May 2012).

Project Management Institute

Project Management Professional (PMP) – Credentialed in June 2009, current certification valid through 2015.

State of Arizona – Certified Project Manager

Certified state government project manager – Certified by the Government Information Technology Agency (GITA) - July 2009.

Health Information Technology Professional (HITPRO)

Implementation Manager – Successfully completed the examination on 8/31/2011.

Management of Clinical Information Technology (MCIT) Certification

Gateway Community College MCIT program (2010 through 2011).

- Health Information Technology Training
- Clinical Technology Consulting
- Health Information Technology Implementation Support
- Health Information Technology Technical Support
- Practice Workflow and Information Management Redesign
- Implementation Management

Community Service

Crusader Charity Group, Inc. • Scottsdale, AZ

2008 to Present

Vice President

Establish and implement organizational policies, goals and procedures. Develop working relationships with similar local community charity groups. Develop relationships with local businesses in support of fund raising and awareness efforts.

- Speaking at events to raise awareness of child abuse in the local community.
- Coordinating activities of board members, standing committees, and volunteers.
- Coordinating and planning charity events.
- Establish working relationships with community organizations.
- Expand efforts into foster care system.

Michael Totherow

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My background is in information systems management, development and transformation. I have worked primarily in forward thinking environments, using my skill in technology deployment, network administration, and web technology to provide a productive environment to support the practices of my employers. This has involved understanding how they work; understanding what technology can do to support their business practices; and working closely with management to insure that the technology investments are fully realized.

I have strong writing and interpersonal skills, an analytical mind, and I know how to bring the best work and ideas out of technical staff. I am well versed regarding current technologies, adept at learning new concepts and applying them in a manner consistent with particular business needs. This set of technical and interpersonal skills provides me with the background to effectively employ technology to support a healthy, productive environment.

Maricopa Integrated Health System (MIHS) (Phoenix, Arizona)

1/07 - Present

Director, IT Business & Project Management

MIHS is the safety-net health care provider servicing greater Maricopa County with one Hospital, one psychiatric facility, the nationally recognized Arizona Burn center, Trauma center, fifteen ambulatory clinics and one comprehensive healthcare center. As the Director of IT Business & Project Management, I oversee all capital and operating projects. My responsibilities have included technology planning, project specification, project management, solution design evaluation, business process improvement, strategic prioritization and project execution. My current scope of authority has expanded as the ARK Director overseeing one program manager, five project managers and forty team members to implement the system-wide transformation to an electronic medical records system, Epic Corporation, over the course of five years within 3 phases. The ARK is MIHS's first multi-million dollar, multi-year project defining a new beginning for the Emergency Department, Perioperative Department, and the fifteen ambulatory clinics go-lives beginning in October of 2009, rolling out in waves through the end of May 2010. Phase I was delivered on-time, under-budget and included expanded scope of medication reconciliation for all care providers across all services. Phases II and III will focus on inpatient and all medical records repositories to be paperless by 2013.

Arizona Department of Administration (Phoenix, Arizona)

4/03 – 12/06

Chief Technology Officer

The Department of Administration is the central organization providing State agencies with policy, programs and services ranging from human resources, accounting and payroll to fleet management, facilities management and data center operations. As the Chief of Technology for the ADOA, my role is to ensure consistent, effective operations of those services through existing and evolving business technology. Agencies depend upon ADOA for meeting their back office needs enabling the fulfillment of their agency's mission. My responsibilities have included directing the technology planning, project specification, project management, solution design and information architect. In addition, I add value to the organization through the continual evaluation of operations with the eye on using technology to better serve the business process.

Through the first two years at ADOA, I have been instrumental in the success of the agency's major achievements. I coordinated the department's resources and mitigated issues with the Human Resources Information System implementation, including technical solutions, procurement negotiations and stakeholder communications. As the state switched to self insure the state employee's medical plans, I coordinated, designed and implemented the primary communication vehicle, the benefitoptions.az.gov portal, to educate and assist the employees, retirees and university retirees through the plan's transformation to the new service model. The most recent accomplishment was the award of the state's telecommunications outsourced service

provider from the in-sourced disparate services within the agencies. This project, spanning the entire two years, continues to entail stakeholder persuasion, coordination and facilitation of technical and policy issues, the procurement process including evaluation chairman, and the establishment of a new program within ADOA under a governance model that facilitates stakeholder participation. This has provided me with vast experience and knowledge on the issues surrounding outsourced technology services from a contractual development, impacted services and programs, as well as business case evaluation and justification for the best interest of my employer, the State of Arizona.

Arizona Secretary of State (Phoenix, Arizona)
Chief Information Officer

2/98 – 4/03

The Office of the Secretary of State is responsible for business filings such as Uniform Commercial Codes and Partnerships; election information including results, lobbyists and campaign finance disclosures; as well as notary commissions and publication of the Administrative Code and Register. The role of Chief Information Officer for the Secretary of State is fittingly complicated in proportion to the duties and functions of the office. My responsibilities have included directing the technology of the office, project specification, project management and information architect. In addition, I am involved in bill drafting, summarization and review, lobbying for the office, committee consult on technical matters, rule writing, and policy development for state government.

As CIO I successfully raised the technical abilities of 48-person office environment by providing useful technology and strong support. This was accomplished by staying ahead of their business needs, and providing key technologies in a timely manner before they were aware what their needs were; and by demonstrating how the use of databases, information presentation, imaging and work flow management can improve effectiveness and create efficiencies in business operations. I formalized the procedures and layout for the web design and consequently administer the Internet content, policies and practices for comprehensive publication to the web.

I was responsible for the coordination of election reporting to the state. This involved the collaboration with fifteen county election and recorder's offices to coordinate electronic reporting of voter registration information and election night results. In the 1998 elections, I administered the successful implementation of transmitting real-time election results via the Internet as a secure extranet. Subsequently, we have used this technology to enable secure campaign finance reporting via the Internet and automated much of the office procedure in the process.

Working at the Secretary of State's office has allowed me to emphasize enabling electronic government statewide. This is more than pushing transactions to the web; it is the process of re-engineering the business process in government to create efficiencies through the use of technology. As co-chair of the Digital Government Working Group, we identified the hindrances to providing government service on-line and then formulated solutions to surpass those hurdles. We successfully ran legislation that set the foundation for meaningful electronic transactions to enable digital government.

The crowning achievement for the office, and my personal motivation, is the law surrounding electronic signatures. I have been around this subject since the beginning with the definition of electronic signature in statute, and subsequently in the development of the comprehensive policy and technology review for implementation. The instrumental passage of the Uniform Electronic Transactions Act in Arizona essentially equates electronic signatures to wet signatures for transactions. This provides the foundation in law to move past the hurdles of limitation in the real world today. This also has provided me with national exposure on the topics of electronic signatures, electronic notary and electronic government.

Brophy College Preparatory (Phoenix, Arizona)
Systems Administrator

7/94 - 2/98

Brophy provided an enriched environment for me to expand my skills relative to all facets of Information Technology. Though labeled as Systems Administrator, I ran a department of one, relying on contract services, a crowd of obedience disciples and long work weeks to run a 1400 user environment. Thus, I was responsible for all technology planning, budgeting, implementation, training, hardware and software support for the school. While there, I migrated from a mini-

mainframe environment to a PC based LAN. I worked with students, faculty, administrators, parents and private sponsorships to produce a technology rich learning experience, as well as an efficient business process. Literally, I did everything from pull wire through ceilings to negotiate vendor contracts and sell visionary ideas to prospective donors. These experiences dramatically increased my organizational and professional skills to plan, implement and deal with multitudes of people at varying levels of expertise to achieve business process objectives through technology.

Medisys Medical Computer Systems (Phoenix, Arizona)
Programmer's Aide

1982 - 8/93

Medisys Medical Computer Systems developed Accounts Receivable software for doctor's offices. Their product originated on Digital Equipment Corporation PDP-11 microcomputers written in Assembly language. I was involved with the office, but not employed, through the migration to Unix environments and C language. As an employed programmer's aide, I familiarized myself with the code, but my responsibilities were more towards customer service in the role of hardware troubleshooting and network/system administration for many of the doctor's offices nationwide. This is a service I still provide to them time to time.

Sunset Gardens Nursery (Glendale, Arizona)

1982 - Present

Of the more rewarding influences in my life is my father's retail plant nursery. Involved since I remember, my duties ranged from ditch digger to manager and accountant. What is most rewarding is the interaction with customers. I believe this interaction was the building block for development of strong interpersonal skills in technology. Plants to technology may seem a far stretch, but both objectives are relatively the same. Both involve the explanation of something where the client may believe they have knowledge, yet it is your job to steer them on the right course of action while maintaining a sense of ownership for the customer. Explanation with understanding is the key to keep customers returning, as it is with building confidence with technology.

University of Arizona (Tucson, Arizona)

1993

A resident of Phoenix, Arizona, nearly all my life, I enjoyed the benefits of the public school system. I went on to Tucson at the University of Arizona to receive my Bachelor of Science in Systems Engineering in 1993. Systems Engineering is based on traditional Industrial Engineering with an emphasis in technology to provide system-wide solution building.