



Meeting Information	
Date, Time & Location:	Thursday, August 18, 2022, 9 AM PST
Meeting Facilitator(s):	Bill Liu and Dr. Salek

Attendee	Attendee
<input checked="" type="checkbox"/> Bill Liu	<input checked="" type="checkbox"/> Dr. Sara Salek
<input checked="" type="checkbox"/> Grace Clark	<input type="checkbox"/> Jennifer Nye
<input checked="" type="checkbox"/> Nailah Harrell	<input checked="" type="checkbox"/> Dan Porter
<input checked="" type="checkbox"/> Dr. Gastfriend	<input checked="" type="checkbox"/> Lydia Langston
<input checked="" type="checkbox"/> Dr. Orras	<input checked="" type="checkbox"/> Sarah Swonder
<input checked="" type="checkbox"/> Julia Kissel	<input checked="" type="checkbox"/> John Kivela
<input checked="" type="checkbox"/> Lauren Prole	<input checked="" type="checkbox"/> Rhonda Alsobrook

Agenda:

Target goals for today's meeting:

1. Continue and resolve discussion on screening requirements with CO-Triage
2. Make further progress reviewing the levels of integration and CONTINUUM's data dictionary
3. Review how CONTINUUM elements are presented in the EHR and determine next steps required in order to make a final decision

Compare current screening requirements and questions to ASAM Co-Triage:

1. Share feedback on Co-Triage self-paced training

Continue data dictionary review:

1. How are elements from CONTINUUM presented in the EHR?
2. What essential elements are needed across all state providers?
3. EHR feedback: loop in Nextgen (and other EHR representatives?) to solicit feasibility and feedback

Continue level of integration discussion:

- Information pulled back will duplicate re-entry
- Is there continued modification based on provider needs?
 - Can specify if you want more integration
- Can any additional elements from the EHR be pulled back?
 - Each HER is different
 - How would we standardize data pull-back across all EHRs



- Would be complex and time consuming
- No matter what, EHRs must meet option 1 (minimum dataset) at least
- Option 4 will pull back everything
 - Options 3 and 4 both pull back the comprehensive dataset
 - Is it necessary?
 - David: doesn't make sense to integrate all the data
 - Recommends starting with options 1 or 2
 - Option 2: Intermediate dataset
 - Inclusive of the option1 elements
 - You want your users to be familiar with the interface
 - Could you pull back additional data elements once you choose the intermediate dataset?
- Nextgen has already met option 1
 - They do have the capability to meet option 2
 - Terros interested in option 2
- When we give the integration information to the EHRs, they will/should be familiar with turning the clinical language into the code
 - Any additional questions, they can reach out to ASAM/FEI to go through it in greater detail
- There may be programs that might not have an EHR integrated
 - There is the WITS AZ option for providers with no additional option
 - EHR lite option managed by FEI systems
 - State of AZ is currently paying for this alternative option

Action Items:

- Talk with EHR vendors about what option 2 would look like from a timing perspective and cost perspective?
- ASAM will organize meeting with providers and Nextgen to discuss intermediate dataset integration
- Bill will send outreach to AdvancedMD
 - Keep Dr. George Orras in the loop
- Next week: if it works for Nextgen, then we can leverage that time
 - Otherwise, we can discuss ASAM Co-Triage vs. non-ASAM assessment