Health Current
Clinical Advisory Council
Charter

Purpose
The Health Current Clinical Advisory Council provides a clinical and workflow perspective to Health Current as it procures and implements technical services related to its statewide health information exchange (HIE). This Council is responsible for the development of recommendations regarding the use of health information technologies and information to improve workflow and clinical decision making.

Roles & Responsibilities
- Provide input into annual updates of Health Current’s Strategic and Tactical Plans.
- Provide clinical leadership in the evaluation, selection, implementation and use of health information technology (HIT) and health information exchange (HIE) technologies.
- Engage stakeholders to promote the adoption of HIT and HIE technologies.
- Review, evaluate, and advise the Health Current Board of Directors (Board) and management regarding:
  - The long-term strategic goals and objectives
  - The near-term and long-term data quality issues, practices, and goals and objective
  - Strategies and tactics for market research and market outreach to encourage the rapid adoption of Health Current’s products and services
  - Strategies and tactics that encourage additional clinical participation in HIE
- Monitor and evaluate scientific, clinical, technical and regulatory trends and provide strategic advice and recommendations regarding the same.
- Review, evaluate, and advise the Board and management regarding
- Review such other topics as delegated to the Council from time to time by the Board.

Council Membership
Any Health Current Participant organization in good standing may nominate a qualified representative from their organization to participate as a member of the Clinical Advisory Council. Nominations will be considered for membership by the Health Current Nominating Committee, which will make the final recommendation for Council membership to the Health Current Board of Directors. Members shall include licensed practitioners from physical health, behavioral health, dental health, substance abuse treatment, and long-term, post-acute care organizations or other individuals with related experience/knowledge.

Conflict of Interest Policy
The Health Current Conflict of Interest Policy requires that each Council member disclose fully any relationships that could result in an actual or potential conflict between the person’s personal interests and the interests of Health Current. Each Council member must complete an Annual Conflict of Interest Disclosure Statement in order to remain in good standing. Failure to comply may result in removal from the Council.
**Council Size**
The Council will consist of 10-15 members or as otherwise directed by the Board of Directors.

**Council Term Length & Limits**
Council membership terms will be two (2) years, provided Council member is a representative of Health Current Participant that remains in good standing throughout the term. Members may serve consecutive, or non-consecutive, terms with no limit.

The initial Council will be established such that term lengths are staggered.

**Council Meetings**
The Council is expected to meet six (6) times per year and each meeting will be scheduled for 90 minutes. The frequency and length of meetings may be adjusted based on the business of the Council. In-person attendance at the Health Current office in Phoenix is encouraged, but telephonic and webinar participation will be available.

**Council Chair**
The Chair of the Clinical Advisory Council shall be a representative of the Council and will be elected by the Council. The Chair shall preside at the meetings of the Council. The term of the Chair will be one (1) year; the Chair may serve consecutive terms without limitation. The Council by a majority vote may remove the Chair.

**Council Vice Chair**
The Vice Chair of the Clinical Advisory Council shall be a representative of the Council and will be elected by the Council. The term of the Vice Chair will be one (1) year; the Vice Chair may serve consecutive terms without limitation. In absence of the Chair, the Vice Chair shall preside at the meetings of the Council. In the event the Chair is unwilling or unable to serve the entire term and during any interim period between Chairs, the Vice Chair shall assume the Chair’s responsibilities as Interim Chair until a new Chair is elected by the Council. The Council by a majority vote may remove the Vice Chair.

**Executive Sponsor**
The Health Current Chief Executive Officer will identify a member(s) of the Executive Management team who will serve as sponsor to the Council.

**Meeting Agenda**
The Executive Sponsor will be responsible for preparing and distributing the agenda and supporting documentation to the Council members prior to the Council meeting. The agenda will prescribe the order in which the Council conducts business.

**Meeting Minutes**
The Executive Sponsor will be responsible to ensure the documentation and distribution of minutes for each meeting.

**Quorum**
A majority of the number of Council members shall constitute a quorum for any meeting of the Council. Representatives may not vote by proxy or designate a different individual to represent them at a Council meeting; such individuals will be considered as guests and will be allowed to participate in the meeting due to the representative’s absence but will not be allowed to vote.

**Approval Requirements**
A majority of the Council members in attendance at a Council meeting at which a quorum is present shall be necessary for approval of any action by the Council.