



STATE OF CONNECTICUT

DEPARTMENT OF PUBLIC HEALTH

OFFICE OF COMMISSIONER

September 11, 2009

David Blumenthal, MD, MPP
National Coordinator for Health Information Technology
Department of Health and Human Services
200 Independence Avenue, S.W.
Washington, DC 20201

Dear Dr. Blumenthal:

The State of Connecticut Department of Public Health (DPH) is pleased to submit this letter of intent to apply for the Department of Health and Human Services Office of the National Coordinator for Health Information Technology's funding opportunity # EP-HIT-09-001 entitled, State Health Information Exchange Cooperative Agreement Program (CFDA# 93.719). Connecticut's application is referred to as the State of Connecticut Health Information Technology and Exchange Development Project (the Project).

State of Connecticut Health Information Technology and Exchange Development Project

Total Amount of Expenditures: \$8,000,000

Project Summary:

The DPH intends to expend Project funds to:

- Develop and implement a robust statewide health information exchange network;
- Develop and implement a grants-in-aid program to support initiatives that demonstrate and promote "meaningful use" best practices within the provider community;
- Develop governance capacity by establishing and filling dedicated health information positions, including the Health Information Coordinator position; and
- Leverage and coordinate the multiple current and health information exchange initiatives locally, statewide and regionally.

As explained in greater detail below, the Project will enhance and facilitate the sustainability of the needed infrastructure in the governance, policy, business, technical and financial domains to allow for the secure electronic exchange and consequent use of health information to improve the quality and coordination of care. The Project will promote public interest by increasing the quality of care and patient safety, by improving access to and the coordination of care, and by reducing the costs of care through the development of a statewide HIE network. Funds will be used to leverage the considerable progress made statewide and by local and regional members of the HIE community.

Current Landscape:

At the state level, DPH has been designated by statute as the governance entity responsible for ensuring that HIE capacity will be developed with appropriate oversight and accountability. The Connecticut General Assembly passed Public Act No. 07-2 in the 2007 legislative session. "*An Act Implementing the Provisions of the Budget Concerning Human Services and Public Health*" authorized the DPH to contract



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for the development of a Statewide Health Information Technology Plan. The Connecticut State Health Information Technology Plan (the Plan) was issued on July 1, 2009 (see attached). The Plan was developed through an extensive information gathering process involving many of the key stakeholders in Connecticut and provides a roadmap to transform the state healthcare system. The Plan includes recommendations on the implementation of health information technology and information exchange in the state, descriptions of current regional and statewide approaches to using health information exchange, and an overview of the technical standards for health information technology established by the Certification Commission for Healthcare Information Technology. While Connecticut's Plan is consistent with the ONC planning guidance, we are requesting funds to continue both strategic and operational planning activities and implementation efforts.

On July 8, 2009, Governor Rell signed Public Act 09-232, "An Act Concerning Revisions to Department of Public Health Licensing Statutes." Section 75 of the Act designated the DPH as the lead health information exchange organization for the state. DPH was tasked with the implementation and periodic revision of the Plan and the development of standards and protocols for privacy in the sharing of health information. The legislation also established a health information technology and exchange advisory committee (the Advisory Committee). This statewide governance structure is discussed in greater detail below.

In implementing the Project, DPH and the Advisory Committee will engage those external stakeholders who developed the Plan, and will reach out to other stakeholders in the state, regional and federal HIT communities. Participating state agency stakeholders will include the Connecticut Departments of Information Technology, Social Services, and Consumer Protection, as well as the Office of Policy Management, Office of Health Care Access, Office of the Attorney General, Governor's Office, Lieutenant Governor's Office and the Office of the Health Care Advocate. Additional stakeholders will include health care providers, consumers, academia, hospitals, pharmacies, community health centers, school-based health centers and various provider associations.

The Project will leverage and coordinate the variety of previous and ongoing local and regional HIE initiatives. DPH and the Advisory Committee will conduct an extensive survey of past, present and current HIE initiatives throughout the region as part of the Project. DPH and the Advisory Committee will use their statutory and convening authorities to identify and coordinate these various local and regional efforts. The DPH and the Advisory Committee will also develop and implement a grants-in-aid program to support and identify "meaningful use" best practices across the provider community.

Regionally, a New England collaboration among key eHealth leadership is underway, with representation from Massachusetts, Vermont, Maine, New Hampshire and Rhode Island, as well as Connecticut. Monthly meetings are anticipated and areas of possible collaboration include:

- Development of education curricula for providers and future workforce;
- Creation of informational resources on various CCHIT certified vendor systems;
- Harmonization of privacy policies; and
- Sharing of best practices and lessons learned.

A joint letter of intent to collaborate across New England is being finalized. DPH will also reach out to eHealth leadership in New York to develop similar collaborative relationships.

Domain Capacities:

Governance Capacity:

Connecticut's HIE governance structure is specifically defined in state statute. Effective July 8, 2009, Public Act 09-232, Section 75 designated the DPH as the lead health information exchange organization

for the state. DPH was tasked with the implementation and periodic revision of the Plan and the development of standards and protocols for privacy in the sharing of health information.

Section 76 of the Act establishes a health information technology and exchange advisory committee (the Advisory Committee) consisting of twelve members, including the Lieutenant Governor and eleven appointees representing medical research organizations, health plans, federally qualified health centers, primary care physicians, hospitals, consumers, private business and pharmacists. In addition, the Act appointed the Commissioners of Public Health, Social Services (the Medicaid agency), Consumer Protection, Health Care Access and Information Technology, and the Secretary of the Office of Policy and Management and the Healthcare Advocate as ex-officio, non-voting members.

The Advisory Committee will advise the Commissioner of Public Health regarding implementation of the Plan and will develop appropriate protocols for HIE and electronic data standards to facilitate the development of a statewide, integrated electronic health information system. In addition, the Advisory Committee will examine and identify specific ways to improve and promote HIE in the state, including, but not limited to, identifying both public and private funding sources for health information technology. Finally, the Advisory Committee will advise the Commissioner regarding the development and implementation of a health information technology grant program which may, within available funds, provide grants-in-aid to eligible institutions for the advancement of health information exchange and health information technology in this state.

The DPH, as lead HIE organization for the state, will collaborate with and support the Advisory Committee to provide oversight and accountability of all health information activities, including the convening of stakeholders, implementation and revision of the state plan, the establishment and oversight of subcommittees in each of the five domains, the establishment of grants-in-aid programs to promote best practices for “meaningful use” and the development, implementation and sustainability of the statewide HIE. All DPH and Advisory Committee HIE activities will be transparent and open to the public. Transcripts of all Advisory Committee meetings will be posted on the DPH web page. Mandatory annual reports to the Office of the Governor and the Legislative committees of cognizance will also be posted.

Per statute, the Advisory Committee will hold its inaugural meeting on or before November 1, 2009. Appointments to the Advisory Committee are underway, and will be completed on or before October 1, 2009.

Legal and Policy HIE Capacity:

While Connecticut has not been on the forefront of implementing trust agreements, significant research regarding current policies, laws and barriers has been completed. The Health Information Security and Privacy Collaborative Initiative provided a systematic approach to public health information exchange by assessing policies and state laws affecting health information exchange, identifying and proposing practical solutions, and developing a detailed plan to implement these solutions in Connecticut. Their research assessed variations across business entities, identified barriers to legitimate flow of electronic health information, proposed solutions and developed a proposed plan of action. Legal and policy barriers were identified, solutions proposed and a plan of action developed that was drawn upon in the Plan. Memorandums of understanding between sister state agencies regarding the sharing of certain data have been completed and can be modified. In addition, memorandums of agreements with outside contractors for State efforts including on-line licensing, physician profile, e-prescribing, and more have been adopted.

As part of the Plan, legal and policy guidance and recommendations for a statewide Health Information Exchange Network (HIEN) have been identified. The development of an operational plan per the Project will result in the adoption of standards for information exchange policies and business agreements along

with establishing an identity management and authentication system to ensure accountability and appropriate use of the HIEN by the health care workforce.

The Advisory Committee and DPH will identify areas where guidance is lacking and adopt privacy policies and procedures to ensure further development of trust agreements and harmonize legal and policy requirements. Further policy development will document appropriate access to clinical data when entities terminate data-sharing relationships, as well as document state regulations and licensing requirements when sending health information electronically across state lines. In addition, Connecticut will work with neighboring states to address interstate HIE issues while protecting consumer interests.

Business and Technical Operations Capacity:

While the Plan identifies a number of barriers to the development of business and technical operations capacity, DPH and the Advisory Committee will develop strategies that will increase HIE adoption in the state through the development of a fully operational plan. While it is anticipated that some responsibilities for the business and technical operations will fall to a contracted entity implementing the technical services needed for HIE, overall responsibility will continue to reside with the DPH and the Advisory Committee. In addition, the DPH will coordinate its technical support activities with the state's Medicaid agency and the designated Regional Extension Center.

While the participation of the State Medicaid agency on the Advisory Committee is mandated by statute, the DPH and the Medicaid agency have already established HIE coordination mechanisms. As providers prepare to adopt Electronic Health Records (EHR) systems or connect to the HIE, they will need resources and support to help them make informed decisions about the options available, lessons learned from other providers, and statewide specification standards necessary for interoperability. To help providers successfully integrate into the statewide HIE, providers will need information regarding statewide use and interoperability expectations, EHR system hosting options, implementation guides, training, and hands-on-technical support. Connecticut will conduct a technical assessment to provide an inventory of provider network capacity and access to broadband services. Results will be used to develop an infrastructure model that provides technological framework of the HIE for planning and implementation purposes which include key decisions that affect the approach to system interoperability, estimates for network capacity and bandwidth needs, privacy and security of the clinical data, and the amount of funding needed to launch and maintain an HIE.

In developing the Plan, the Plan Steering Committee and the Connecticut Hospital Association conducted a survey of all hospitals which solicited input regarding current and future HIT activities, HIE capabilities, level of spending on HIT initiatives, perceptions regarding HIE oversight, potential state involvement and opportunities and barriers to health IT/HIE adoption. A summary of the results can be found in Appendix H of the Plan. The Plan Steering Committee also conducted a survey of stake holders from the Connecticut health care system including Community Health Centers, physician groups, hospital leadership and state agency staff to identify baseline information on their current and future HIE capabilities and their perspectives on opportunities and barriers to HIT/HIE adoption. The Advisory Committee and State RHIO technical director hired through this cooperative agreement will use the results of these surveys as a baseline for determining the status of HIE initiatives in the State and conduct further research into HIE activities.

Technical Infrastructure Capacity:

The Plan provides information on the level of technical guidance, technical architecture and strategic initiatives necessary to enable interoperability within the existing technical infrastructure of the Connecticut healthcare system. Connecticut's Plan outlines guidance for the technical architecture including:

- Federated vs. centralized data repositories;

- Modular framework;
- Direct patient care domain technical architecture;
- State health agencies domain technical architecture;
- Healthcare system monitoring and evaluation domain technical architecture; and
- Connecticut state health information exchange technical architecture.

The Advisory Committee will review these recommendations to determine which technical infrastructure will be utilized for the development and implementation of the Project, including the integration of Medicaid management information systems. Mechanisms will be in place to ensure the integrity of data during the transmission, so that data sent from one clinical entity/physician to the next is not changed en route. To facilitate HIE, administrative, technical, and physical safeguards will be in place to ensure the security, confidentiality, integrity, and availability of information consistent with the provisions of the Health Information Portability and Accountability Act (HIPAA) and any applicable state laws. Moreover, the Advisory Committee will explore leveraging the state's purchasing power.

Research conducted by the Plan Steering Committee shows that approximately 10-15% of Connecticut physician practices have EMR systems. While many of Connecticut's healthcare providers and supporting organizations are not prepared to support health information exchange without a significant investment and upgrades to existing infrastructure, DPH will leverage the many ongoing regional and state efforts and resources that can advance HIE.

Finance Capacity:

Development of needed financial capacity to support the development, implementation and sustainability of the statewide HIE will be a major focus of the DPH and the Advisory Committee. Connecticut will determine the type of business structure and financing options most suitable for supporting a public-private, multi-stakeholder, collaborative governance of the Connecticut HIEN. It is envisioned that the costs and benefits of providing interoperable health information exchange across Connecticut will be distributed among the various groups of stakeholders, with the primary goals of identifying the qualitative and quantitative value proposition for each stakeholder group. The Project will support policy development efforts, gaining stakeholder support and understanding of the challenges and the need to develop financial models to bridge the time period between grant funds and reimbursement reform over the next five to ten years. While focusing primarily on financial issues that could provide revenue streams in the medium-term, it is recognized that financial incentives for better care will likely contribute to the long-term sustainability of the statewide health information strategy. In its role as a facilitator of funding, DPH will need to seek and obtain monies from a variety of sources and develop a strong business plan.

The Point of Contact for this grant application is Mr. Warren Wollschlager, Chief of the Office of Research and Development Branch at the DPH. He can be reached by phone at (860) 509.7104, via email at warren.wollschlager@ct.gov or by mail at 410 Capitol Avenue, MS # 51 ORD, P.O. Box 340308, Hartford, CT 06134-0308. Again, we thank you for this opportunity to apply and we look forward to improving health information exchange in the state.

Sincerely,



J. Robert Galvin, MD, MPH, MBA
Commissioner