



**Health Information Technology Advisory Council
Meeting Minutes | April 20, 2023**

Meeting Date	Meeting Time	Location
April 20, 2023	1:00 pm – 3:00 pm	Zoom Meeting Recording

Members

Joseph Quaranta (Co-Chair)	R	Josh Scalora, DDS	R	Patrick Charmel	R
Sumit Sajnani, OHS HITO (Co-Chair)	R	Josh Wojcik, OSC (Sandra Czunas)	R	Dr. Alan Kaye	X
Gui Woolston, DSS	X	Ted Doolittle, OHA	R	Dina Berlyn	R
Elizabeth Taylor, DMHAS	R	Kelly Sinko Steuber, OHS (Krista Moore)	R	Cassandra Murphy	R
Nicole Taylor, MD, DCF	R	David Fusco	R	Dr. Susan Israel	X
Sharonda Carlos, DOC (Kirsten Shea)	R	Nicolangelo Scibelli	X	Mark Gildea	R
Jody Terranova, DPH	R	Dr. Patricia Checko	R	Rebecca McLearn, AHCT	R
Mark Raymond, CIO	R	Lisa Stump	R	Dr. Michael Crain	R

Supporting Leadership & Other Participants

Amy Tibor, OHS	R	Vasi Gournaris, OHS	R	Jenn Searls, Connie	R
Jeannina Thompson, OHS	R	Adrian Texidor, OHS	R	Heidi Wilson, Connie	R

In accordance with current FOIA statutes re: meetings held by solely by electronic means: R=attended remotely, IP=attended in person

Topic	Responsible Party	Time
Welcome and Call to Order	Dr. Joseph Quaranta	1:02 PM
<p>The regularly scheduled meeting of the HITAC was held virtually on Thursday, April 20, 2023. Dr. Quaranta welcomed members and called the meeting to order at 1:02 p.m. Upon roll call, it was determined a quorum was present. Ms. Tibor announced a new member, Dr. Michael Crain, who replaces Dr. Bill Petit as the Minority House Leader appointment. Ms. Tibor thanked Dr. Petit for his time and expertise and welcomed Dr. Crain, who then introduced himself.</p>		
Public Comment	Dr. Joseph Quaranta	1:05 PM
<p>No public comments were made.</p>		
Council Action: Approval of Minutes: March 16, 2023	Dr. Joseph Quaranta	1:06 PM
<p>Dr. Quaranta requested a motion to approve the March 16, 2023 minutes. A motion was made (Checko) and seconded (Raymond). There was no discussion. Minutes were unanimously approved.</p>		
Community Based Organizations and Social Service Agencies Initiative	Sumit Sajnani, HITO & Carol Robinson, CedarBridge Group	1:08 PM
<p>Mr. Sajnani stated that the ideas and concepts being presented are initial and intended to begin a discussion and solicit ideas; the presentation is a high-level current landscape of Community Information Exchange (CIE) nationally and within CT, and was curated from preliminary discussions held with Connie, United Way of Southeastern Connecticut, Find Help, Unite Us, and CRISP. Other stakeholders and CBOs will also be engaged, including 211. Mr. Sajnani stated that currently there is no state level repository or directory around Social Determinants of Health (SDoH) data, and no repository around CBOs and the referrals they receive. The plan is to determine whether an opportunity exists. The presentation will be followed up with a concept document.</p> <p>Key highlights from Ms. Robinson’s presentation included:</p> <ul style="list-style-type: none"> • Overview of the state and national CIE landscape. • Discussion on impact of SDoH vs. health care services on a person’s overall lifetime health outcomes. 		

- CBOs are at the center of providing services. Providers engage CBOs as coordinated care team members and address social needs to improve health outcomes. Coordinated care and whole-person care is around combining health care and social service data.
- The verb definition of CIE includes closed loop referrals, provider directories, Master Person Index, analytics, shared care plan, consent management.
- Overview of national standards and how they're developing.
 - SIREN is an organization founded out of University of San Francisco and was the hub organization in first conducting research around social determinants and health equity, and how health is influenced by social determinants. SIREN launched the Gravity Project which brought together stakeholders to develop standard data sets, also referred to as "Z codes", for EHRs. These codes are used to capture SDoH data. The Gravity Project is focusing initially on three areas in standardizing data sets: food insecurity, housing instability and quality, and transportation access. There is a partnership with standards development organization, HL7, to develop an SDoH implementation guide.
- Overview of the content within the 5-Year Statewide Health IT Plan which focuses on CIE:
- Overview of CIE current activities in CT, including:
 - Connie's launch of eReferral service for CBOs
 - Two leading organizations in terms of data sharing and support for CBOs, in CT, includes: Find Help and Unite Us
 - Several other activities underway include those set up by United Way of Central and Northeastern Connecticut, the Eastern Connecticut Health Collaborative, the Connecticut Children's Center for Care Coordination, and 2-1-1 Connecticut
- Examples of barriers/challenges identified during recent stakeholder conversations include missed connections, system problems, and a need for better options.
- Examples of other states' and regional approaches.

The floor was open for questions. A conversation took place regarding an existing initiative within CHA. Mr. Charmel suggested talking with those who built the infrastructure, which is high performing in a number of communities throughout the state. Mr. Sajnani indicated that we'd want to learn from all the work that's been done and determine if there is something that can be leveraged or built further upon and collaborate on. He stated that this work is in its initial phase; and we'd want to bring partnerships together. Mr. Charmel further remarked about CBOs being under-resourced, and there being a bigger conversation that needs to take place. Ms. Checko recommended employing a design group. Mr. Sajnani stated that two tasks should be initially performed: 1) conduct inventory of stakeholders and further communications, and 2) determine how to set up the group to give recommendations on moving forward. Mr. Raymond inquired about privacy and confidentiality, and the consent component of the work, commenting that he is curious about where technology fits into this in ways that protect individual privacies.

The full presentation is available on the OHS website: <https://portal.ct.gov/OHS/HIT-Work-Groups/Health-IT-Advisory-Council/Meeting-Materials/April-20-2023>

Race, Ethnicity and Language (REL) Implementation Update	Adrian Texidor, OHS	1:35 PM
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Mr. Texidor presented a REL update, key highlights included:

- General progress update on REL implementation in accordance with PA 21-35, and implementation activities across impacted agencies:
 - OHS continues to convene a forum for state agencies.
 - 10 agencies working to update respective systems, including OHS. Nine out of 10 agencies are in the initiation phase, and one has fully implemented REL within their EHR system.
 - Overview of challenges identified during agency forums.
 - Overview of OHS progress in upgrading systems and next steps.
- Update on Yale/ERIC convenings:
 - Phase 2 of convenings began in December with goal of guiding action on a one-year collaborative action plan to the standardization of REL data, including an overarching objective and five strategic priorities for continued collaborative action.
 - By Nov 2023, providers across CT will be ready to implement standardized, granular, self-reported REL data collection in alignment with PA 21-35, with tools to assist in doing so.
 - Three workgroups were established.
- Summary of initial proposed federal changes, and OMB Statistical Directive No. 15 (SPD 15):
 - SPD 15 is the directive enabling the collection of comparability of race and ethnicity data across federal datasets.

<ul style="list-style-type: none"> ○ PA 21-35 directs OHS to periodically review any changes to the federal standard categories for REL, according to the census, and the OMB's SPD 15. New changes are slated for release in summer 2024. ○ Overview of proposed changes. ○ Federal public comment period on the proposed changes is open until April 27. <p>Overview of anticipated modifications that will be incorporated into Version 3.0 of the REL implementation plan, a process and timeline.</p>		
Connie Update	Sumit Sajnani, HITO and Jenn Searls & Heidi Wilson, Connie	1:55 PM
<p>Mr. Sajnani opened the presentation with an update regarding communications by various provider groups, and actions taken by OHS and Connie in response. Mr. Sajnani emphasized that OHS and Connie are not on opposite sides when it comes to patient privacy. The ultimate decision maker on whether or not an individual is in Connie is the individual, and at any point, for any reason at all, if an individual chooses not be in Connie, that is their decision, and they can certainly opt-out.</p> <p>Key highlights from Ms. Searls presentation:</p> <ul style="list-style-type: none"> ● Update on onboarding and outreach progress – a main concern that has been communicated is around cost, specifically the cost from provider EMR vendors for connecting to Connie. Connie is assessing options to lessen the cost and unburden providers. ● A general monthly and weekly activity update, including opt-out, user activity, alerts, etc. ● Status update on existing use cases. ● Upcoming behavioral health community forums to address questions on data sharing, privacy and security, legal agreements and connecting to Connie. ● Connie has engaged a new PR and communication firm, Insenna. Ms. Searls provided high level project plan. ● A new state agency focused newsletter has been started. <p>Ms. Searls introduced Heidi Wilson who presented on the roadmap to patient access, key highlights included:</p> <ul style="list-style-type: none"> ● Overview of rules/laws associated with establishing patient access to Connie, including ONC interoperability/info blocking rules and requirements identified in CGS §17b-59d. ONC requires all HIEs to enable patient access using an API. Several goals/requirements are identified in CGS 17b-59d. ● Connie initially created a patient access task force to review the rules, assess existing technical capabilities, and design a policy framework and guardrails. ● Patient and family advisory committees engaged, and themes developed out of feedback. ● Overview of three phases/approaches over FY's 23, 24 & 25, which includes patient access through a 3rd party app, ability for patients to request a PDF of medical history, and development of a patient portal. ● A timeline for each of the major phases. <p>Dr. Quaranta commented on the importance of the topic, noting that a regular cadence should be included as part of the Connie update when there is information worth sharing with HITAC.</p>		
Announcements & General Discussion	Dr. Joseph Quaranta	2:56 PM
No announcements made.		
Council Action: Wrap Up and Meeting Adjournment	Dr. Joseph Quaranta	2:56 PM
Dr. Quaranta requested a motion to adjourn the meeting. A motion was made (Stump). The meeting adjourned at 2:56 PM.		

Upcoming Meeting Date: May 18, 2023

All meeting information and materials are published on the OHS website located at:
<https://portal.ct.gov/OHS/HIT-Work-Groups/Health-IT-Advisory-Council>