

Updates





ONBOARDING STATUS UPDATE

66 Live Organizations

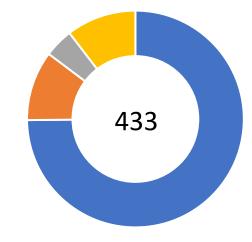
- Up from 46 last month
- 6 DMHAS facilities, 8 BH providers, 3 FQHCs
- Hartford Healthcare, Yale New Haven Health System
- SONE, ProHealth
- 8 practices through CT Health Link
- 37 independent practices
- 14 live feeds and another 89 pending for LabCorp/Quest data to be shared with Connie.

165 Signed Organizations

• 35 more in the last month

> 100+ In Queue

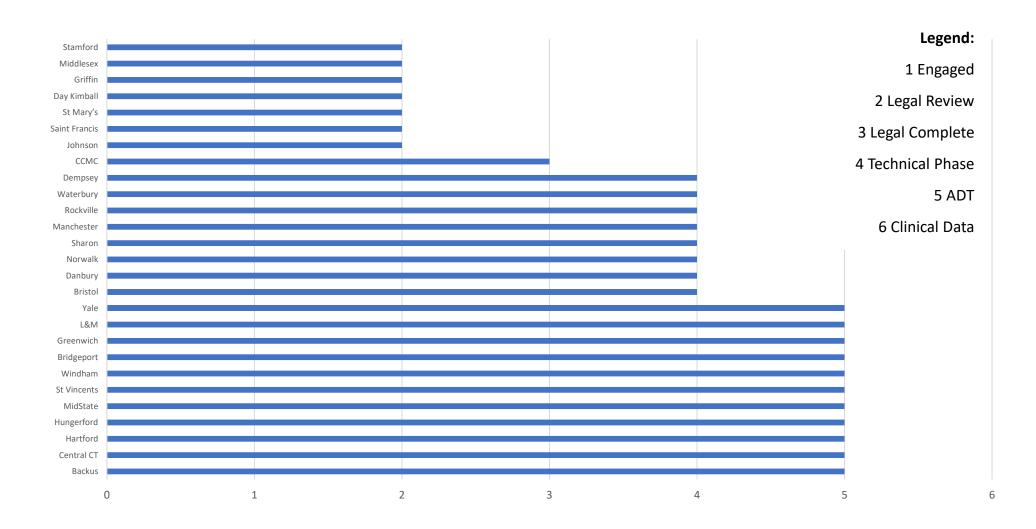
- 26 organizations expressed interest in Connie and newly entered the pipeline within the last month
- 17 new contracts in negotiation



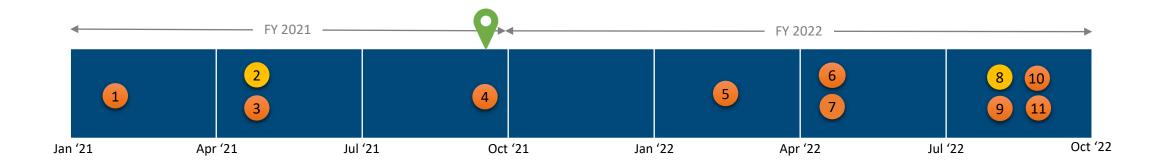




HOSPITAL ONBOARDING STATUS UPDATE



USE CASE TIMELINE



	FY 2021		FY 2022		
1	Encounter Alerts* (Project Notify)	5	Image Exchange	9	Best Possible Medication History
2	eConsent (Binary)	6	eReferral	10	Advance Directives
3	Clinical Data	7	Provider Directory Access	11	Immunizations
4	PDMP	8	eConsent (Provider Mediated Affirmative Consent)		



FY 2021 Use Cases

- **Encounter Alerts:** Connie supports the delivery of real-time admission, discharge, and transfer (ADT) alerts to treating providers and care coordinators whenever a Medicaid beneficiary has a hospital encounter. This use case is to expand to all providers (Q2 FY22). Providing alerts on clinical events supports timely transitions of care.
- Clinical Data: Electronically sending and receiving clinical information such as patient care summaries, labs, radiology reports, or ADT messages improves and facilitates care coordination efforts.
- PDMP: Connie participants will have visibility into the Connecticut's statewide Prescription Monitoring and Reporting System (CPMRS) through Connie's provider portal or their own EHR/EMR. Reviewing the PDMP before prescribing certain medications is required by law. This use case helps to streamline the workflow for providers.



FY 2022 Use Cases

- Image Exchange: Enables providers to access core and emergent images at the point of care for patients. Includes access to images with reports from the Connie portal, enabling providers to compare images across multiple locations, and allows for transfer of external images to local PACS. This will lay the foundation for facilitating the exchange of emergent images to stroke centers within the Connie portals.
- **eReferral:** Appointment and other information regarding the referral are transferred electronically between health care providers. Providers at each participating organization will be able to arrange formal clinical referrals with providers at other participating organizations through the HIE.
- **Provider Directory Access:** Provider Directory allows healthcare staff to search for specific providers and find details— languages spoken, facility locations, contact information, and specialties. Conversely, searches can be made based on desired qualifications (i.e., search for a specific specialty or language spoken). This service supports the ability for healthcare staff to better manage case information, including treatment plans, care team, and referrals.
- **Best Possible Medication History:** an accurate and complete list (or as close as possible) of medicines the patient is currently taking. BPMH is foundational for any efforts to reconcile medications.
- Advanced Directives: Advance Directives are legal documents that convey a person's healthcare preferences to be used during times of incapacitation. Advance Directive Registry stores the existence and location of a document but not the document itself. Patients, providers, and health systems will, at a minimum, gain efficiency in a labor-intensive process of acquiring and storing advance directives.
- **Immunizations:** An immunization information system (ISS) provides bi-directional communication between the state immunization registry and healthcare providers using the HIE.

USE CASE WORK PLAN FY 2022

Priorities for Implementation

	Oct '21 Nov '2	21 Dec '21 Jan '22	Feb '22 Mar '22 Apr '22	May '22 Jun '22 Jul '22	Aug '22 Sep '22	
Image Exchange	UCWG	Configuring	Piloting		Implementation	
eReferral	UCWG	Configuring	Piloting	Implemer	Implementation	
Provider Directory Access	Configuring		Piloting	Implementation		
Best Possible Medication History	UCWG		Configuring		Piloting	
Advance Directives		Design		Configuring	Piloting	
Immunizations		Design		Configuring	Piloting	



Patient Tools

- **eConsent:** enables patients to Opt-Out of having their health record shared through Connie. To date, we have less than 2000 people who have opted out. (FY21)
- eConsent (Provider Mediated): Facilitates affirmative consent by patients through the provider, enabling SUD providers to share data protected by 42 CFR Part 2 through the HIE. (FY22)
- **eConsent (Patient Mediated):** Patients are directly able to apply their own affirmative consent for share data protected by 42 CFR Part 2 through the HIE. (FY23)
- Patient Data Access: Consistent with federal guidance and requirements regarding Information Blocking and Patient Access, Connie will provide FHIR-based APIs for providing consumers access to their health information via mobile devices. This approach provides privacy and security for patient information while enabling a consumer-friendly approach to such information in a manner of which they are already familiar. (FY23)



USE CASE WORK PLAN FY 2022

Patient Tools

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eConsent	Implementation		
eConsent (Provider Mediated)	Configuring	Piloting	Implementation
Patient Data Access	UCWG	Configuring	Piloting
eConsent (Patient Mediated)		Design	Piloting



Planning

- Stroke Registry/Network: Allows immediate access to critical stroke cases that may require transfer for specialized care at a primary or comprehensive stroke center. Images are available before read and are shared to a platform utilized by a group of specialized stroke clinicians for transfer or further analysis.
- Electronic Case Reporting: Automated, real-time, bidirectional exchange of case report information between EHRs and public health agencies for case investigation and follow up. HIEs can screen existing data flows with providers to identify reportable conditions and automatically send electronic reports of those conditions to the Centers for Disease Control and/or State epidemiologists.
- **eConsult:** asynchronous, consultative, provider-to-provider communications within a shared electronic health record (EHR) or through an HIE. Accessible from a provider portal and the InContext app.
- Quality Measurement: Clinical data available through HIEs can be combined with claims data to better identify performance and gaps in care. A statewide electronic system for clinical quality measurement will enable providers and encourage payers to more efficiently participate in value-based payment models.

