Health IT Advisory Council

October 20, 2022





Topics

Welcome & Call to Order

Public Comment

<u>Council Action</u>: Approval of Minutes: August 18, 2022

Connie Update

Behavioral Health Provider Engagement Update

Race, Ethnicity and Language (REL) Implementation Progress Update

Announcements & General Discussion

<u>Council Action</u>: Wrap Up & Meeting Adjournment



Welcome and Call to Order



Public Comment

(2 minutes per commenter)



Approval of Meeting Minutes: August 18, 2022



Connie Update

Health IT Advisory Council October 20, 2022

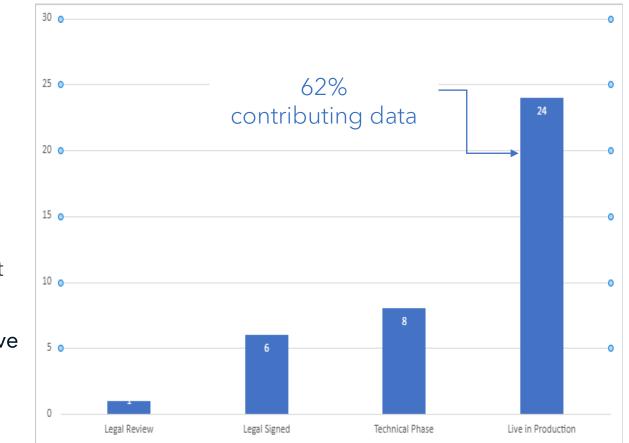
Jenn Searls, Executive Director





Highlights: Hospital Connections

- Hartford HealthCare
 - Live with CCDs
- Yale New Haven
 - Labs in development
- Stamford Hospital
 - Live with ADTs
- CT Hospice
 - ADT & CCD in development
- Gaylord Hospital
 - > ADT & TRN 10/18 Go Live
- Masonicare
 - ADT in development







Other Onboarding Highlights

- Athena Hub
 - 7 practices in development for ADT & CCD
- > 309 Data Feeds
- 712 Data Sharing Agreements signed
 - 40 new in September
 - > 52 in process
- > 3.8M Unique Patients

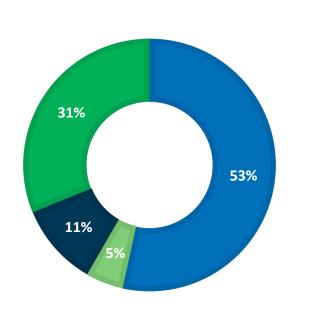
ORGANIZATION TYPES

Post Acute/Long Term

Other

Hospital

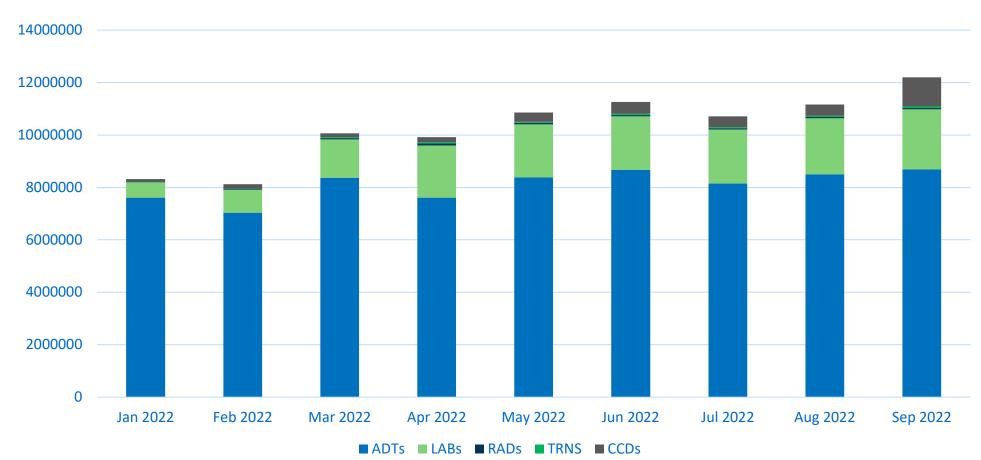
Ambulatory







Connie Data







Data Access

Monthly Metrics from Insights $\uparrow \downarrow \downarrow \downarrow \downarrow$											76
Service	September 2022	August 2022	July 2022	June 2022	May 2022	April 2022	March 2022	February 2022	January 2022	December 2021	November
Portals and InContext App											
Manual Queries											
🗆 Connie											
HIE Portal	444	405	287	242	210	264	217	51	33	44	
InContext App	920	995	1,109	570	707	645	198	41	57	53	
Automated API Calls						21	28	25	45	49	
Encounter Notification Service	84,721	34,952	10,171	11,931	8,350	2,906	766	1,292	546		
PDMP/PMP	6		4	5	4	18	20	3			
Image Exchange											
⊞ Total Image Views by HIE of Image Source	12	13	18	6	9	13	35	4			



Other Updates



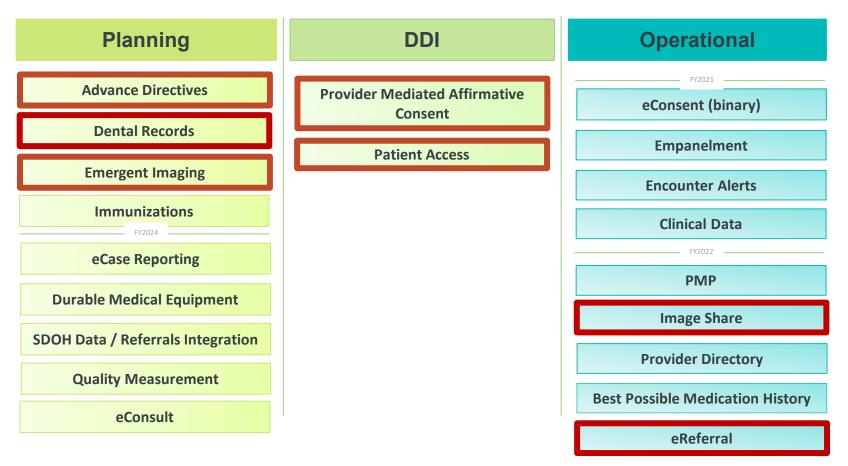
Connie in the wild!

- Behavioral Health Partnership Oversight Council meeting
- Office of Health Strategy Behavioral Health Provider Information Sessions
- NE HIMSS HIE Conference (today)
- CT Academy of Family Physicians Symposium (October 25 – 25)





Connie Current Use Case Status







Projects in Planning

Dental Records

- Investigating dental data formats and standards
- Determining meaningful data for display for dental and other health care providers

Advance Directives (AD)

- Can we parse AD flags from CCDs?
- Are there AD tools already in use in CT?

Emergent Imaging

- Working with SOCSAC to develop onboarding plan
- Configuration in Connie this quarter





Projects under Development

Patient Access

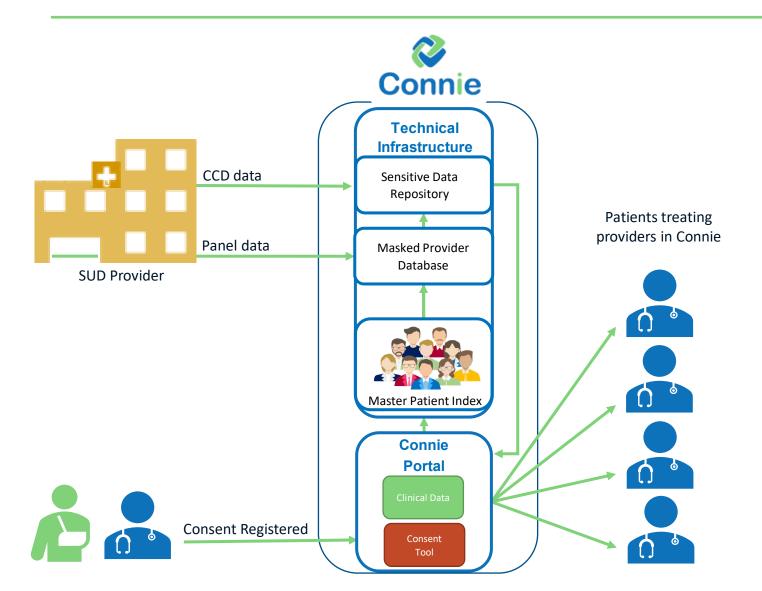
- API gateway configured for access
- 3rd party vendor
 - Patient ID validation
 - App registration gateway

Affirmative Consent

 Enabling 42 CFR Part 2 Program Providers who are able to filter SUD data to facilitate affirmative consent through Connie



Affirmative Consent Technical Solution Workflow







Onboarding Projects

Image Share

 Any organization that is in the process of or has completed their RAD feed

eReferral

- Provider to Homecare (behavioral health, home nursing, caretaker and companion services)
- Piloting with organizations currently sending/receiving faxed referrals





Filter defaults to hiding home agency data for InContext App users

- Filter tool that can be switched off for users if they want to see all data
- For Connie Portal users, the default is off.

InContext Updates

ENCO	JNTERS HEALTH RECORDS	STRUCTURED DOCUMENTS	IMMUNIZATIONS			
ALL HOS	PITAL OUTPATIENT					
All Encounte	rs					Q III =
Date	Source			Patient Class	Discha	FILTERS RESET
2022-09-30	ККІ			Ambulatory	-	
2022-09-28	Western Maryland Hospital			Inpatient	-	Date (From)
2022-09-28	Western Maryland Hospital			Inpatient	-	Date (To)
2022-09-28	Western Maryland Hospital			Inpatient	-	
2022-09-27	DCH			Emergency	-	_ Source
2022-09-23	DCH			Inpatient	HSC	_ Patient Class
2022-09-23	DCH			Inpatient	HSC	
2022-09-16	Western Maryland Hospital			Inpatient	-	Discharge Disposition
2022-07-20	TIDALHEALTH			Ambulatory	-	Enterprise
2022-05-09	Bristol Health			Emergency	-	
2022-04-06	Greater Baltimore Medical Associates			Ambulatory		Hide Home Facility Data
2022-03-16	ENS_AVNTCLIN			Ambulatory		
2022-03-16	ENS AVNTCLIN			Ambulatory	-	





InContext Updates

Conditions subtab under new SDOH tab displayed using ICD-10 Codes from ADTs to Identify Social Determinants of Health (z-codes)

Z55: Problems related to education and literacy	Z60: Problems related to social environment
Z56: Problems related to employment and unemployment	Z62 Problems related to upbringing
Z57: Occupational exposure to risk factors	Z63: Other problems related to primary support group, including family circumstances
Z58: Problems related to physical environment	Z64: Problems related to certain psychosocial circumstances
Z59: Problems related to housing and economic circumstances	Z65: Problems related to other psychosocial circumstances

← HIE InContext			F	ANNA CADENO emale Nov 16, 1						
	CON	DITIONS								
CLINICAL DATA	Conditions							Q	ш	÷
MEDICATION MANAGEMENT	Date 🗸	Source		Z-Code	Description					
	2021-07-22	University of MD UMMC UMMS		Z63.8	Other specified problems related to primary suppor	t group				
	2021-01-06	University of MD UMMC UMMS		Z63.4	Disappearance and death of family member					
SOCIAL NEEDS DATA					Rov	vs per page:	25 👻	1-2 of 2	<	>
🖸 рмр 19										



InContext Updates

Once eReferrals begin, other providers will be able to see if their patient has been referred to homecare services and the status of the referral.

- The view is not dependent on who initiated the referral
- Even though the eReferral process is conducted only in the Connie Portal, portal and InContext users have access to Referral History as read only

← HIE InContext			ANNA CADENCE Female Nov 16, 1981			•••	•
	CARE TEAM	REFERRAL HISTORY					
CLINICAL DATA	Referral History				Q	 ÷	
	Date of Referral	Source	Program Name	Status	Last Updated		
	2021-12-02	_	Test Program Name 1	Pending	2021-12-02		
CARE COORDINATION	2021-12-16	—	Test Program Name 2	Pending	2021-12-16		
SOCIAL NEEDS DATA	2021-12-16	_	MCOTester	Pending	2021-12-16		
	2021-12-20	_	PIMR	Pending	2021-12-20		
🖄 РМР 20	2021-12-20	_	PIMR	Pending	2021-12-20		



Connie State Partner Projects

DSS HCBS ARPA Program

- DSS has signed data sharing agreement
- 3-year initiative to develop tools for HCBS providers

Department of Corrections

- DOC has signed data sharing agreement
- Understand inmate's medical history to develop plan of care during incarceration and share data with inmate's providers upon release

Office of the Chief Medical Examiner

- OCME has signed data sharing agreement
- Facilitate death investigations

Department of Public Health

• DPH Lab, Emergency Services Department



Questions?



Behavioral Health Provider Engagement Update

Amy Tibor, OHS



Behavioral Health Provider Engagement Update

Background

- Priority in Five Year Statewide Health IT Plan & prioritized by HITAC to begin engagement process in 2022
- Series of stakeholder meetings held to define best approach
- Information Sessions designed to benefit providers, administers, information technology and organizational compliance officers in BH settings

Where we are now (Information Sessions)

- Existing public relations vendor utilized for support in planning, facilitating, and synthesizing data to inform report
- > Invitations sent to approx. 550 BH provider organizations
- 3 sessions scheduled
- As of Oct 19, approx. 130 registered

Next Steps

- Listening Sessions
- Final report & recommendations



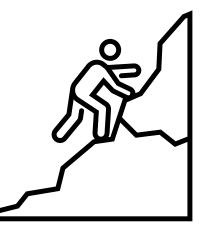
Race, Ethnicity and Language (REL) Implementation Progress Update

Adrian Texidor, OHS



REL Mandate: Efforts Since August 2022

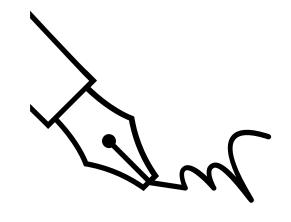
- Ideation on REL Implementation Guide 2.0
- OHS held two more convenings with State Agencies—total of 4
- Concluded the REL Yale / Eric Convenings
 - Resulting Objective: By October 2023, providers across Connecticut will be ready to implement standardized, granular, self-reported REL data collection in alignment with PA 21-35, with tools to assist in doing so.
- REL Survey
 - Two purpose: high-level inventory of mandated reports including data elements and specific challenges faced by healthcare providers with implementing the new standard
 - Sent to 33 organizations within CT
 - OHS received 8 surveys
 - 3 Organizations reported challenges;
 - > 1 reported no challenge in moving to the new standard



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Office *of* Health Strategy

REL Implementation Guide Plan 2.0

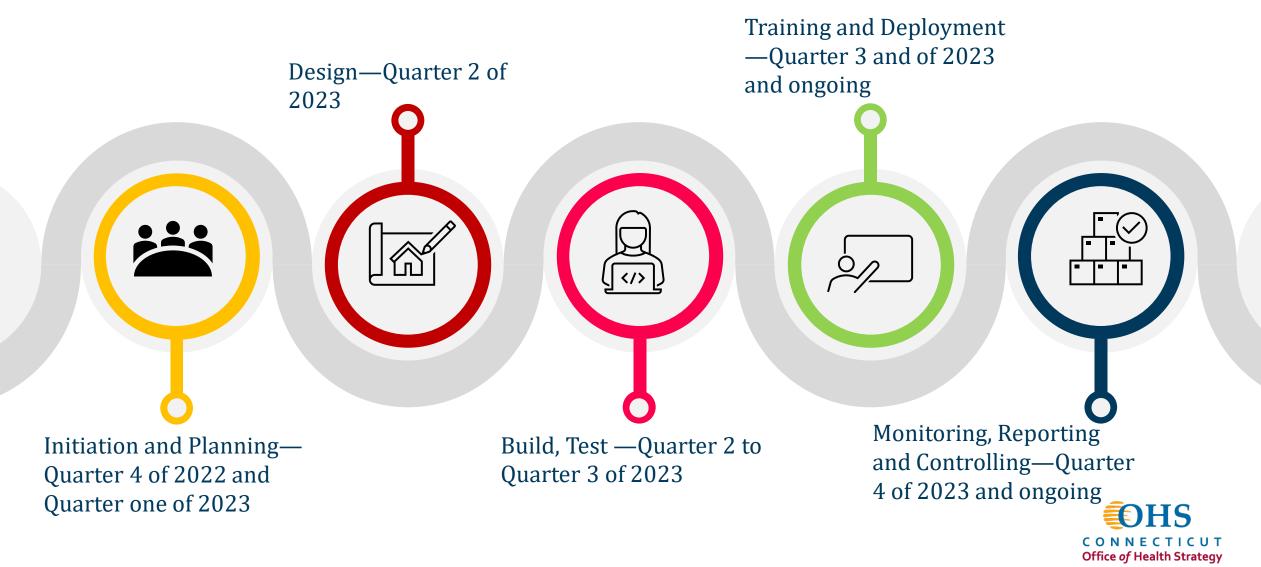


What will set this version apart from 1.0?

- Includes implementation plan
- Purpose of the REL implementation plan: provide broad implementation support to
 organizations on REL—including insurance status and disability status for those impacted
- OHS required to create implementation plan in consultation with consumer advocates, health equity experts, state agencies and health care providers, changes required by this section
- 5 Domains Covered
 - > Includes quarterly targets for organizations—looking for feedback on target dates

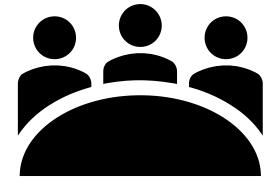


5 Implementation Plan Domains and Quarterly Goals for HITAC Feedback



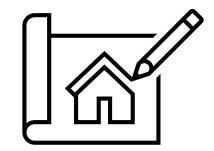
Initiation and Planning—Scope, Budget, Timeline

- Identify Stakeholders including executive sponsor, project manager, trainers, and developers
- Develop Use Cases for the Project
- Undergo Requirements building process:
 - Identification of data collection needs—what needs to be collected
 - ➢ Gap analysis of current state vs future state
 - Develop inventory of impacted IT systems,
 - Identify training needs,
 - Requirements Review and sign off by executive sponsor





Design



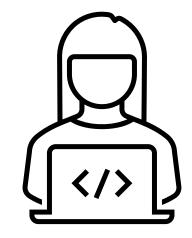
Based on Requirements

Development of data collection workflow (who will collect the data, when will the data be collected, how will the data be collected)
 IT system modifications—future state
 Data sharing and report generation



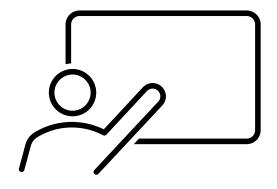
Build, Test

Execute technical upgrades
Execute UI upgrades
Test upgrades





Training and Deployment



Identify training cohort e.g., front office staff providers

- Training content includes:
 - Requirements of data collection
 - How race, ethnicity, and language are defined by the REL Standards
 - How to ask patients for REL data and explain why patient is being asked to provide this data in accord with culturally and linguistically appropriate standards

How to accurately capture patient responses including refusals to identify

Training programs will vary and utilize numerous methods:

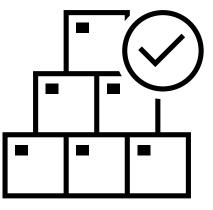
- Online learning module
- ➢In person training
- Deploy Solution



Monitoring, Reporting and Controlling

- Managing Data Quality
 - Adherence to new workflow and standards
 - Develop Data Validations centered on these questions: how does this data compare to the local demographic profile at the state and local level, does the data collected according to new standards align with historical trends?
 - Develop validation to ensure that the data is self-reported
 - Reporting REL data, disability and insurance status to the HIE





Next Steps

 Incorporates feedback provided today and feedback provided by additional stakeholders on the implementation plan
 OHS publishes the REL Data Standards and Implementation Guide 2.0



Announcements & General Discussion

Dr. Joe Quaranta & Council Members



Wrap Up and Meeting Adjournment

Upcoming Meetings

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November 17, 2022 December 15, 2022



Contact Information

OHS Contact for October 2022 HITAC Meeting

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