

Health Information Technology Advisory Council DRAFT Meeting Minutes

October 20, 2022

Me	eting Date		Meeting Time	Locatio	on				
Octo	ober 20, 2022		1:00 pm – 3:00 pm	Zoom N	<u>leeting</u>	g Recording			
Jose	ph Quaranta (Co-Chair)	R	Josh Wojcik, OSC (San	dra Czuna:	s) R	Lisa Stump			X
	it Sajnani, OHS HITO Chair)	R	Ted Doolittle, OHA (A	dam Prizio) R	Patrick Charme	I		X
Gui	Woolston, DSS	R	Kelly Sinko Steuber, C Moore)	HS (Krista	R	Dr. Alan Kaye			R
Elizabeth Taylor, DMHAS Nicole Taylor, MD, DCF		X	Robert Rioux		Х	Dina Berlyn			R
		X	David Fusco		R	Cassandra Murphy			R
Shar	ronda Carlos, DOC	Х	Nicolangelo Scibelli		R	Dr. Susan Israel			R
Den	nis C. Mitchell, DPH	R	Dr. Patricia Checko		X	Mark Gildea			R
Mar	k Raymond, CIO	R	Dr. William Petit		R				
Josh	Scalora, DDS	R	Jeanette DeJesus		Х				
Sup	porting Leadership & Oth	er Pa	rticipants						
Amy	/ Tibor, OHS	R	Olga Armah, OHS		R	Jenn Searls, Co	nnie		R
Jacq	ueline Pellerin, OHS	R	Adrian Texidor, OHS		R				
			R =	= Attended	Remo	tely; IP = In Perso	on; X = Did r	not atte	nd
Age	nda								
	Торіс			F	Respoi	nsible Party		Time	
1.	Welcome and Call to Or	der			Dr. Jos Co-Ch	eph Quaranta air)		1:01	ΡN
	The regularly scheduled me	-				•		•	
	Thursday, October 20, 202						eting to ord	er at 1:()5
	p.m. It was decided to tabl	e the	roll call and approval of	minutes to	o later	in the meeting.			
2.	Public Comment			C	Dr. Jos	eph Quaranta		1:02	ΡN
	No public comments were	made				•		1	
3.	Council Action: Approva	l of N	/linutes: August 18, 20		Dr. Jos Memb	eph Quaranta & ers	8	1:05	ΡN
	Dr. Quaranta requested a r the motion. The motion w		••		•		•	ond mac	Je
	Connie Update			J	enn S	earls, Exec Dir.,	Connie	1:06	ΡN
4.	Ms. Searls presented a progress update on key Connie activities; highlights included:								
4.	•	gress	update on key Connie a	activities; h	highligh	its included:			

development with the Athena Hub for ADT & CCD feeds. Connie is currently receiving 309 data feeds.

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Connie has signed more than 700 data service agreements with 40 new agreements in September and 52 agreements in process. As of October 19, 2022, there is currently 3.8 million unique patient records in Connie's master patient index.

Ms. Searls discussed upcoming projects for use cases for Connie including dental records, advanced directives and emergent imaging used in stroke care.

Projects under development include Patient Access and Affirmative Consent.

- Connie is working with a vendor to work on an API gateway to configure access through 3rd party apps to allow patients to see their personal health data.
- Also, under development is how to enable Behavioral Health 42 CFR Part 2 program providers to facilitate affirmative consent for patients. 42 CFR Part 2 programs can share data with Connie. Data remains locked in a secure vault until affirmative consent is registered. Pilot program to proceed before broader scale roll out.
- Organizations continue to be onboarded for projects regarding Image Share and eReferral.

Ms. Searls also discussed InContext updates developed from shareholder inquiries to provide updates to Connie.

Connie continues to proceed with discussions with State partners from the following agencies:

- DSS HCBS ARPA Program develop tools from HCBS providers.
- Department of Corrections Inmate medical history and plan of care while incarcerated.
- Office of the Chief Medical Examiner Facilitate death investigations.
- Department of Public Health DPH Lab, Emergency Services Department

Dr Kaye asked a question regarding unique patient records within the index. Ms. Searls stated that 93% of patients in index have a CT residence. Mr. Raymond asked a question regarding the college student population, whether separate outreach. Ms. Searls stated that FERPA and HIPAA may interfere with incoming information. Dr. Petit asked a question regarding locked BH health records. Ms. Searls stated that data in the secure vault needs to be released by both the patient and provider. Dr. Quaranta asked a question regarding the Athena Hub and the providers regarding the amount of work required. Ms. Searls stated that the Athena technicians worked with the Connie technicians to set up the connections. Dr. Kaye asked a follow-up question regarding college students as to which we can communicate with other HIE's in other states.

5.Behavioral Health Provider Engagement UpdateAmy Tibor, OHS1:34 PMMs. Tibor provided a brief background on the behavioral health engagement, it's purpose and process. Ms.
Tibor stated that the engagement began with several information sessions to educate providers about the
requirement for behavioral health providers to connect with Connie by May 3, 2023. Information sessions are
underway prior to future listening sessions with specific provider groups. 550 invitations have been sent to BH
provider organizations. The first session was held yesterday at noon. As of Oct. 19, 130 participants had
registered and approximately 60 providers attended the first session. Ms. Tibor stated that the questions
received so far were very broad in nature and will help inform the listening sessions. A final report and
recommendations will be drafted and shared with HITAC.Mr. Sajnani commented that the first information sessions was as informative for OHS as it was for the
providers. Mr. Sajnani mentioned that several questions came up about patient confidentiality, security and
bias concerns of patient information.

Mr. Raymond requested to have a specific lens regarding confidentiality and privacy in the final report.

6.	Race, Ethnicity and Language (REL) Implementation	Adrian Texidor, OHS	1:50 PM
	Progress Update		

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Mr. Texidor presented an update on REL implementation plan progress. Key highlights included:

- General background on PA 21-31 § 11.
- An overview of efforts made since the last presentation to HITAC in August 2022
 - A total of four convenings have been held with state agencies with monthly meetings scheduled to go forward.
 - OHS is developing a REL Implementation Guide 2.0
 - The REL Yale/Eric Convenings have concluded resulting in an objective that 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.
 - A REL paper-based forms workgroup has been formed to develop solutions to collect REL information on paper-based forms. Paper-based forms do not easily allow for the granular collection of REL data and that relevant systems need to be updated to match the new standard and report out.
 - OHS has finalized the stakeholder registry and data systems registry of systems that are impacted.
- OHS is developing a REL Implementation Guide 2.0 The implementation plan covers five domains related to activities to meet the REL standards. OHS is asking for advice from the committee as to the targeted timeline for implementation.

Mr. Sajnani provided further information regarding the statute requiring the collection of REL data. OHS is asking for advice from the committee as to the targeted timeline for implementation.

Dr. Kaye questioned whether there is a requirement to get this plan operational. Mr. Sajnani responded that OHS is looking for a good faith effort to move in this direction. The statute does not state that providers and agencies must comply by a specific date. The collection of REL data is voluntary on the part of the patient and should not impede a patient from receiving services.

The floor was opened for questions and comments.

10.	Announcements and General Discussion	Dr. Joseph Quaranta	2:11 PM
	There were no announcements or general discussion.		
11.	Council Action: Wrap Up and Meeting Adjournment	Dr. Joseph Quaranta	2:13 PM

Upcoming Meeting Dates: November 17, 2022

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