

Health IT Advisory Council

December 15, 2022



Agenda

Topics

Welcome & Call to Order

Public Comment

Council Action: Approval of Minutes: October 20, 2022

Council Action: Review and Approve 2023 Regular Meeting Schedule

Connie Standing Update

Connie Consumer Outreach Engagement

HITAC Strategic Planning Activities

Other HITAC Updates

Announcements & General Discussion

Council Action: Wrap Up & Meeting Adjournment

Welcome and Call to Order

Public Comment

(2 minutes per commenter)

Approval of Meeting Minutes: October 20, 2022

Review and Approve 2023 Regular Meeting Schedule

2023 HITAC Schedule

3rd Thursday of the month

1:00 – 3:00 p.m.

Zoom



Regular HITAC Meeting Dates

January 19th

February 16th

March 16th

April 20th

May 18th

June 15th

July 20th

August 17th

September 14th

October 19th

November 16th

December 21st

Connie Update

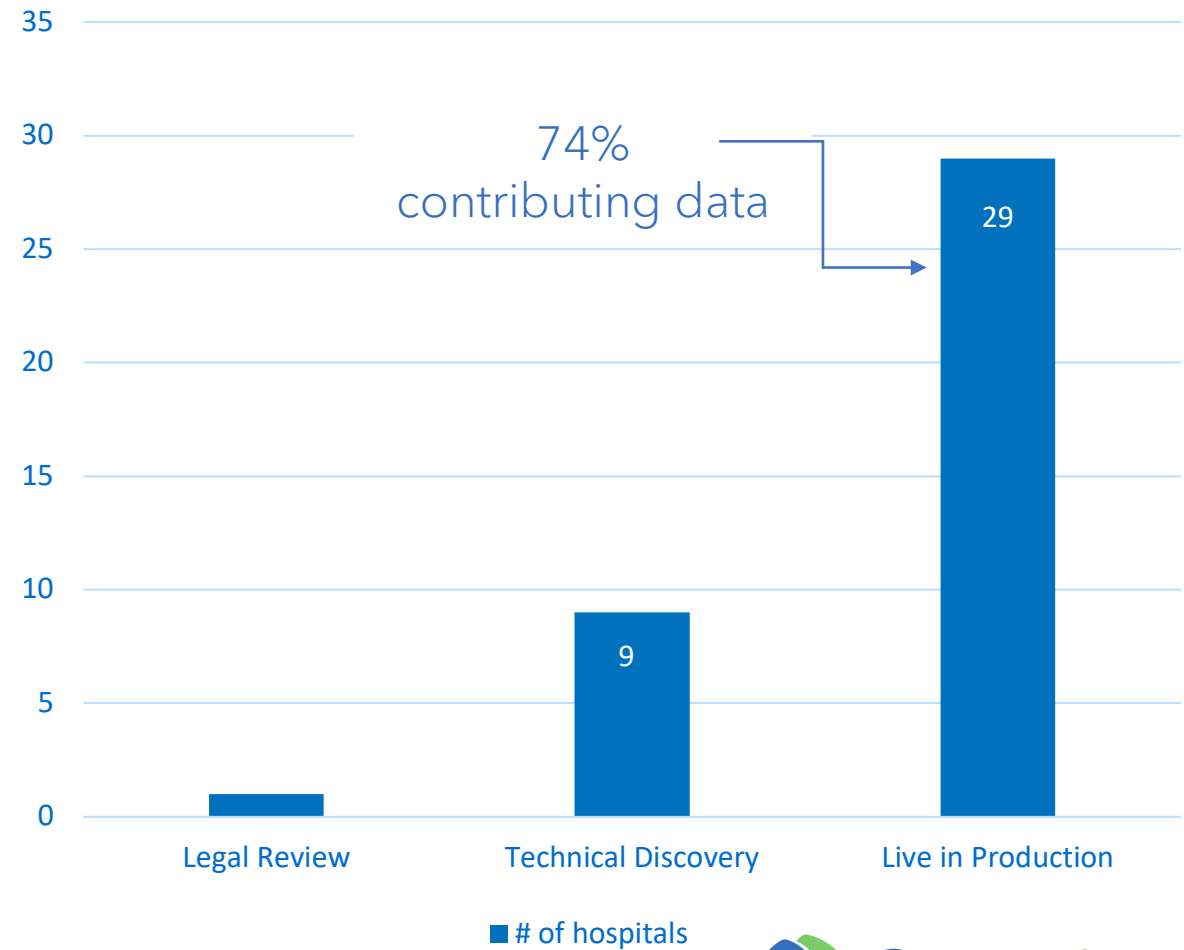
Health IT Advisory Council
December 15, 2022

Jenn Searls, Executive Director



Highlights: Hospital Connections

- **Hartford HealthCare**
 - Live with CCDs
 - RAD & TRN in development
- **Yale New Haven**
 - Live with CCDs
 - Labs in development
- **Stamford Hospital**
 - Live with ADTs, RAD & TRN
- **CT Hospice**
 - ADT live
 - CCD in development
- **Gaylord Hospital**
 - ADT & RAD Live
- **Masonicare**
 - ADT Live
 - TRN & CCD in development



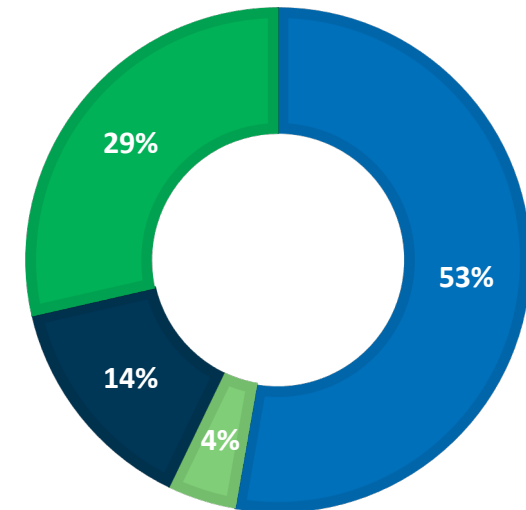


Other Onboarding Highlights

- Athena Hub
 - 10 practices live with ADT & CCD
- 333 Data Feeds
- 759 Data Sharing Agreements signed
 - 32 New in November
 - 47 in Process (Negotiation Stage)
- 3.93 M Unique Patients

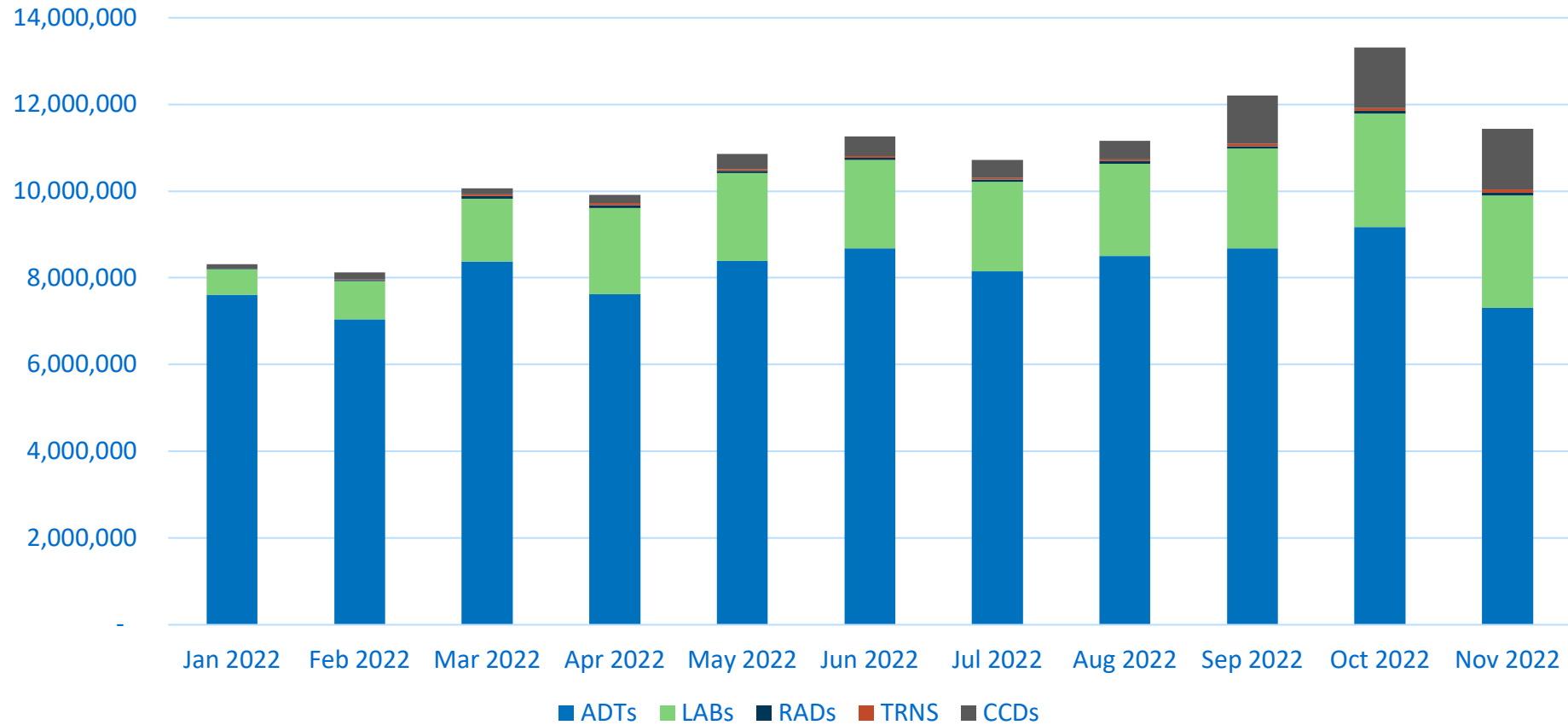
ORGANIZATION TYPES

■ Ambulatory ■ Hospital ■ Post Acute/Long Term ■ Other





Connie Data





Data Access

Monthly Metrics from Insights												
Service	November 2022	October 2022	September 2022	August 2022	July 2022	June 2022	May 2022	April 2022	March 2022	February 2022	January 2022	December 2021
<input type="checkbox"/> Portals and InContext App <ul style="list-style-type: none"> <input type="checkbox"/> Manual Queries <input type="checkbox"/> Connie 												
HIE Portal	502	406	444	405	287	242	210	264	217	51	33	
InContext App	1,020	1,325	920	995	1,109	570	707	645	198	41	57	
<input type="checkbox"/> Automated API Calls								21	28	25	45	
<input type="checkbox"/> Encounter Notification Service	138,089	112,333	84,721	34,952	10,171	11,931	8,350	2,906	766	1,292	546	
<input type="checkbox"/> PDMP/PMP	3	6	6		4	5	4	18	20	3		
<input type="checkbox"/> Image Exchange		11	12	13	18	6	9	13	35	4		

Connie Updates





Connie in the wild!

- CT MGMA Best Practices Symposium
- Leading Age Conference
- National Association of Social Workers – CT Chapter meeting

Questions?



Connie Consumer Outreach

HITAC Meeting

December 2022



Project Overview





Background

The Connie team is working with CommunicateHealth (CH) to develop a patient-centered communication outreach plan, with a goal of educating patients about what Connie is, the benefits of Connie, the choices that patients have, and building patients' trust.



Project Overview: Progress to-date

Environmental scan (finalizing)

- Literature review
- Communications materials

Formative research and message testing (in progress)

- Focus groups
- Key informant interviews

Environmental Scan: Overview





Environmental Scan Overview

CH is conducting an environmental scan of communication materials from other HIEs and published literature about HIEs. This scan informs the focus group discussions with patients and in-depth interviews with health care providers, staff, and others, as well as considerations for the communication plan.



Objectives

The objectives of the environmental scan are to explore:

- How materials explain the benefits and risks of enrolling in HIEs (i.e., key messages)
- Strategies and best practices HIEs have used in their patient communications
- Whether communications from HIEs have influenced patient engagement
- Patient preferences, needs, concerns, and challenges related to accessing HIEs and patient portals



Drivers of Patient Engagement

- **Perceived benefits**, like the increased quality of care, more convenience, reduced healthcare costs, and improved understanding of their own health
- **Trust**, which stems from factors like familiarity with participating healthcare organizations and transparency about privacy policies
- **Patient-provider relationship**, including quality of communication



Patient Preferences and Interests

- Having access to **disclosures** about what type of data is available, who accesses it, and who shares it
- Having the option to give access on a **temporary and need-to-know basis** — that is, their information isn't shared unless required for their care
- Having the ability to remove **sensitive health information** from their records (e.g., HIV status, substance use)
- Understanding the **terms of their consent** and **HIE security measures, sharing procedures, and privacy terms**



Patient Concerns and Questions

- Some patients have concerns about the HIE **technology**. For example, they may be concerned about technical challenges related to accessing their health data through the HIE or prefer face-to-face interactions with providers.
- Patients have concerns about **misuse of their health information**. For example, patients may worry about fraud and discrimination (e.g., in hiring).



Benefits of Enrolling in HIE's

Most patient-facing materials name the benefits of HIEs. Most commonly, materials note that HIEs:

- **Improve the quality of care** — like by allowing for better coordination between providers or helping providers review new patients' health history before the first visit
- **Help in an emergency care setting** — where there might not be time to communicate a full medical history, for example
- **Save time and money** — like by preventing duplicate tests and procedures and eliminating unnecessary paperwork
- **Prevent medical errors** — by calling out potential harmful drug interactions or allergies for providers, for example



Data Sharing

Most HIE websites or patient-facing materials address the privacy and security of data sharing. For example, they might:

- Show a list or map of participating providers and name their responsibility to inform patients when data is shared
- Name what information is — and is not — included in shared health records (e.g., substance abuse, diagnoses)
- Explain how health information will — and will not — be used (e.g., for medical purposes or marketing)
- State patient rights under HIPAA
- Give patients options to see how their information appears in the HIE and a record of who has accessed it



Environmental Scan: Communication Strategies and Practices



Patient-Friendly Consent

A patient section of a website explains the benefits of HIEs in plain language.

User-friendly consent forms are available in different languages, found in a section clearly titled Forms.

Home For Patients For Providers Services FAQs About Us News & Events COVID-19


What is NC HealthConnex?

NC HealthConnex is a secure computer system for doctors, hospitals and other health care providers to share information that can improve your care. The system links your key medical information from all of your health care providers to create a single, electronic patient health record.

How does it work?

NC HealthConnex helps health care providers quickly access the information they need to make more informed decisions about your care, especially in an emergency. Health care providers already share patient health records through fax, email and mail when needed for your care. NC HealthConnex makes receiving information easier, faster and more secure. Without using NC HealthConnex, health care providers see only the information they have entered into your medical record. However, with NC HealthConnex, they see a more complete record, enabling them to provide you with the best care possible.

What does it mean to be part of NC HealthConnex?



As a patient, it means having peace of mind when visiting a new health care provider whose office participates in NC HealthConnex. If your information has been uploaded before, your new provider will be able to access that data. This means they can spend less time taking down your history and spend more time treating you. NC HealthConnex helps improve health care through:

- Better coordination between health care providers
- Fewer medical errors
- Improved patient safety and health outcomes
- Fewer repeat tests and procedures
- Less paperwork
- Reduced health care costs
- Faster identification and reporting of public health threats

Formulario de inscripción de CurrentCare

Nombre _____ Segundo nombre _____ Apellido _____
 () _____
 Nombre anterior _____ Teléfono* _____
 () _____
 Domicilio (no se aceptan apartados de correo) _____ Móvil* _____
 Ciudad _____ Estado _____ Código postal _____ Fecha de nacimiento _____ Masculino Femenino Transgénero
 Dirección de correo electrónico (Obligatorio para ver su propio registro) _____

SI **Quiero acceder a mis propios registros médicos.****
 Recibirá un correo electrónico de bienvenida con instrucciones para activar la cuenta.
 Al marcar la casilla "SI", se creará una cuenta de CurrentCare for Me para la dirección de correo electrónico informada anteriormente.

OBLIGATORIO: Escoja solamente UNA de las siguientes opciones a quien se le puede revelar la información de salud:

OPCIÓN N.º 1: TODOS MIS MÉDICOS, LO QUE INCLUYE LAS SITUACIONES DE EMERGENCIA Y MI PLAN DE SALUD SEGÚN LO PERMITA LA LEY.
 Autorizo a uno y todos los proveedores o las organizaciones de salud que me estén tratando actualmente o me puedan tratar en el futuro, o estén involucrados en la coordinación de mi atención médica y mi plan de salud según lo permita la ley, a acceder a cualquiera y toda mi información de salud mediante CurrentCare.

OPCIÓN N.º 2: SOLO SITUACIONES DE EMERGENCIA Y MI PLAN DE SALUD SEGÚN LO PERMITA LA LEY.
 Autorizo a cualquiera y todos los proveedores o las organizaciones de salud que me estén tratando actualmente o me puedan tratar en el futuro a acceder a mi información de salud a través de CurrentCare solo en una emergencia o por un evento no programado y de manera transitoria y mi plan de salud, según lo permita la ley.

OPCIÓN N.º 3: ALGUNOS DE MIS MÉDICOS, EN LAS SITUACIONES DE EMERGENCIA Y MI PLAN DE SALUD SEGÚN LO PERMITA LA LEY.
 Autorizo a los siguientes proveedores u organizaciones de salud a acceder a mi información de salud a través de CurrentCare y a mi plan de salud según lo permitido por la ley. (Si selecciona esta opción, solo los proveedores u organizaciones que usted elija podrán acceder a su información en situaciones de emergencia. Complete la información solicitada a continuación).

Si seleccionó la **OPCIÓN N.º 3** anterior, complete esta sección:

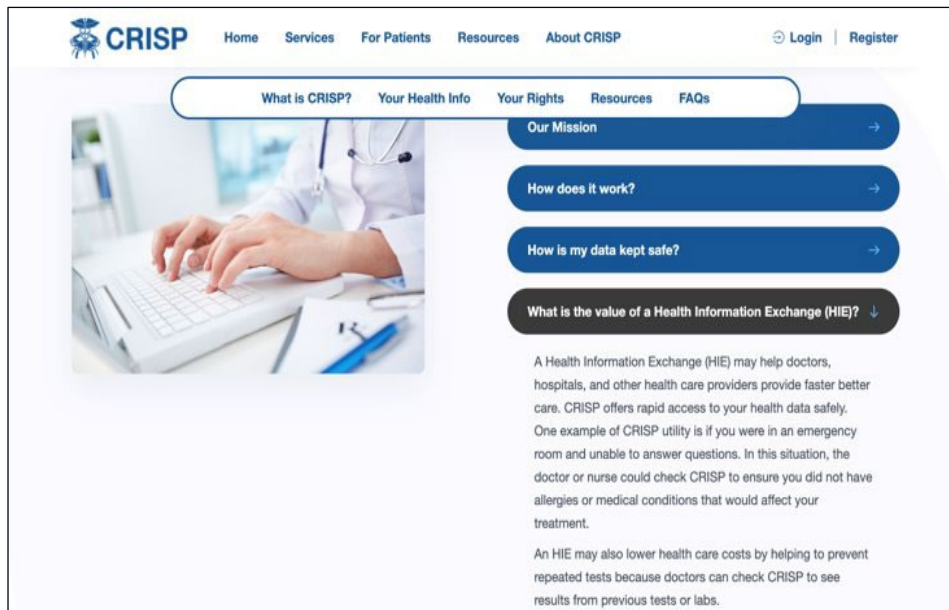
Nombre de la organización del proveedor _____
 Domicilio del proveedor _____ Ciudad _____ Estado _____ Código postal _____
 Nombre de la organización del proveedor _____
 Domicilio del proveedor _____ Ciudad _____ Estado _____ Código postal _____

* Al enviar un número de teléfono a RIZQ, usted acepta que un representante de RIZQ pueda comunicarse con usted al número suministrado, posiblemente mediante tecnología automatizada (incluidos los mensajes de texto o SMS) o con un mensaje pregrabado. El consentimiento para comunicarse con usted al número de

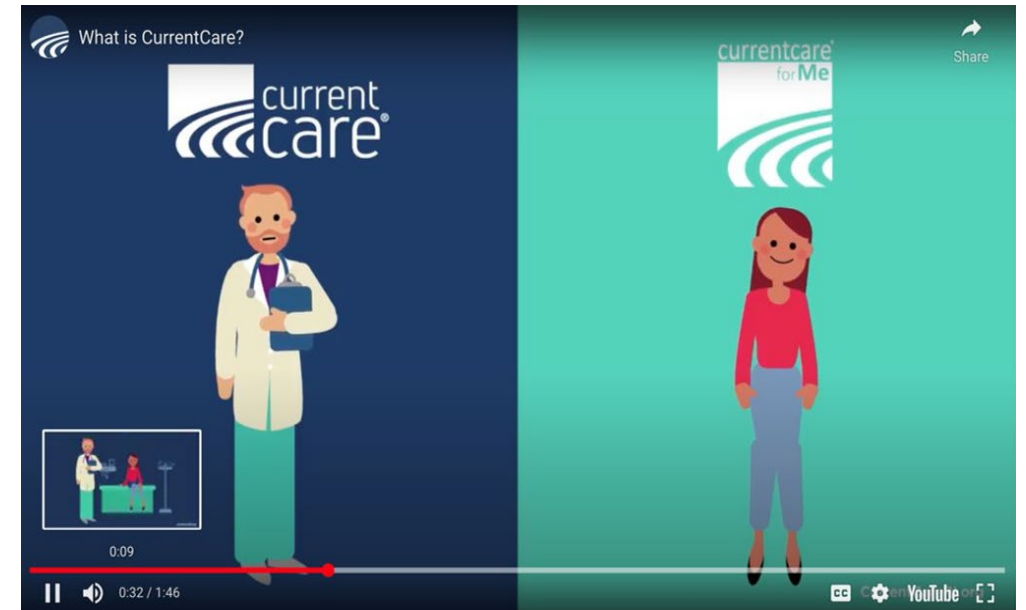


Patient-Friendly Design

This HIE site has a navigation menu at the top as you scroll and provides jump links to specific topics of interest.



An animated video featured on the HIE homepage outlines the benefits and access points for patients and providers.



Explaining HIE's

In patient-facing materials, some HIEs aim to clearly explain what HIEs are and how they work by:

- **Starting with the basics** — like by explaining HIEs, EHRs, health information technology, health information organizations, and protected health information
- **Providing additional resources** — like links to HealthIT.gov webpages, videos, or HIPAA compliance documents
- **Outlining different use cases for HIEs** — like how individual patient data feeds into population health reporting data

Our Products

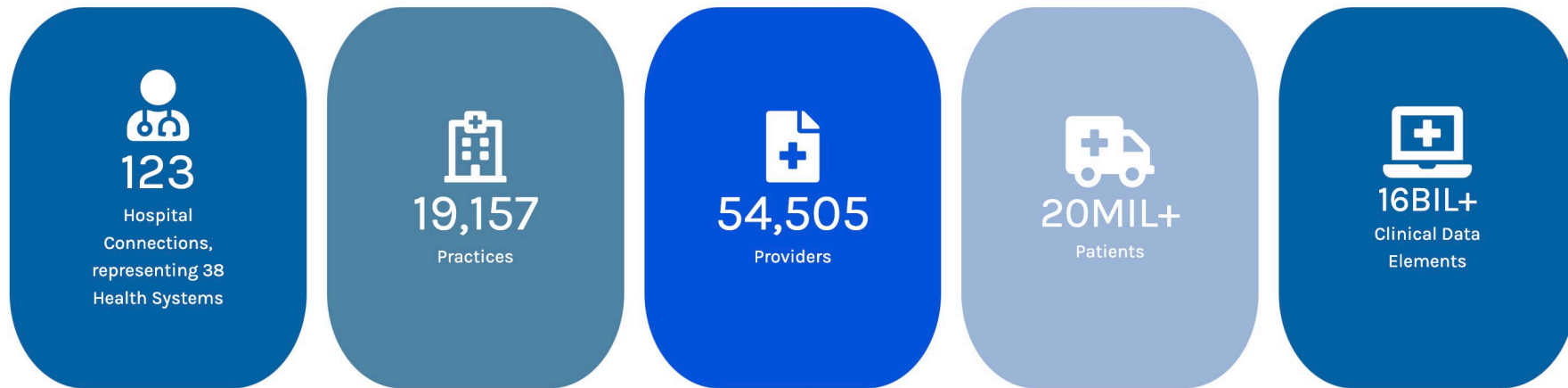
OneCare	PopCare	GovCare
<ul style="list-style-type: none">✓ Access patient data quickly and securely✓ Trend lab data to understand the full story of the patient✓ Search clinical results data by keyword✓ Customize your electronic delivery options	<ul style="list-style-type: none">✓ Track where patient care is delivered✓ Receive discrete data on your population✓ Support quality metric efforts✓ Manage patient's transition of care	<ul style="list-style-type: none">✓ Leverage clinical data to improve the health of all citizens in the state✓ Remove hurdles to participate in public health case reporting forms✓ Eliminate separate connection to the state for public reporting efforts



Normalizing HIE's

Some patient-facing communications include content intended to normalize HIEs by:

- **Noting that providers are already sharing patient information**
- **Giving a “by-the-numbers” look** — like stating the number of patients and providers enrolled in the HIE, states with HIEs, or years the HIE has been active



Indiana Health Information Exchange

Environmental Scan: Recommendations





Environmental Scan Recommendations

In the upcoming formative research task, focus on exploring how Connecticut patients think and feel about HIEs, any concerns or misperceptions they hold, and their top information needs.

- Consider including draft messages in formative research sessions. This will allow us to gauge initial reactions related to perceived relevance and credibility.

Prioritize clear communication and health literacy best practices in the communication strategy to promote patient empowerment and build trust.

- For example, in patient-facing materials, use plain language, a conversational tone, and visual cues — like headings and bullets — to allow for easy scanning.

Discuss options for communicating about patient consent and privacy permissions — as these tend to be key barriers to HIE participation.

Project Next Steps



Project Next Steps

- Complete formative research and message testing (*in progress*)
- HITAC member invitations
 - Join a feedback session
 - Recommendations



Thank You!



HITAC Strategic Planning Activities

*Sumit Sajnani, HITO,
Amy Tibor, & Olga Armah, OHS*

HITAC Strategic Planning Activities

- HITAC Strategic Activities (within 5 Year Plan)
 - 2022 Status Update & 2023 Prioritization Process
- All Payer Claims Database
 - 2022 Update & 2023 Strategic Planning



HITAC Strategic Planning

2022 Status Update

- Background
 - Five-Year Statewide Health IT Plan submitted to CGA Feb. 2022 (6 focus areas & approx. 25 total activities)
 - As part of the role of HITAC, members asked to prioritize activities *to begin in 2022* through a survey tool
 - Four priorities identified

Role of HITAC

The role of HITAC is to advise the OHS Executive Director and the Health Information Technology Officer in developing priorities and policy recommendations to advance the state's health information technology and health information exchange efforts and goals.

HITAC Strategic Activities

Priorities identified by HITAC to begin in 2022

Support behavioral health providers in the adoption of EHR and HIE Services

- Develop an educational campaign for BH provider and patients on the benefits and risk of health information exchange, focusing on ways to ensure data privacy while making sure the individual's care team can access the right information at the right time to provide the best care possible.

Improve service coordination and data sharing across state HHS agencies

- Establish a workgroup for technical interoperability of HHS data systems including development standards (Interagency HHS data sharing).

Establish electronic data standards to facilitate development of integrated electronic health information systems

- Develop a HITAC Standards Advisory Committee to provide recommendations on statutory changes needed relative to data standards.

Sustain and increase use of the HIE (Connie)

- Evaluate how best to optimize Connie for public health data exchange and seek ways to use Connie's services to improve data availability and reporting to state-operated data systems, positioning the entity to deliver on its value proposition. Look to make Connie infrastructure a shared public utility service.

HITAC Strategic Activities: 2022 Status Update

2022 Priority

Establish workgroup for technical interoperability of HHS data systems (HHS Interagency Data Sharing)

Progress

- HHS Interagency Workgroup was established & met during 1st&2nd quarters 2022 as part of Person-Centered Services Collaborative
- Presentations on cross-agency data initiatives, including:
 - 2GEN – Benefit Cliffs (OPM)
 - 500 Familiar Faces (DMHAS)
 - Preventing ACES Data 2 Action Grant (OEC)
 - myCT (DAS/Bits)
- Individual agency level discussions
- Discussed three use case development projects
 - Interagency ID Management (EMPI)
 - Consent Management
 - Interagency Standards
- Concept document drafted

Develop a HITAC Standards Advisory Committee

- Race, Ethnicity & Language (REL) Data Standards
- REL Implementation Plan
- Committee (?)

HITAC Strategic Activities: 2022 Status Update

2022 Priority	Progress
<p>Sustainability & optimization of HIE (Connie)</p>	<ul style="list-style-type: none"> • Connie State Partner Projects: <ul style="list-style-type: none"> • DOC - technical kickoff held • DSS – Home & Community Based Services ARPA Program • OCME – onboarded to Connie to facilitate death investigations • DPH – DPH Lab, Emergency Service Dept. • State agency outreach • Strategic plan in development
<p>Behavioral Health Provider Engagement</p>	<ul style="list-style-type: none"> • Internal stakeholder meetings held • Information sessions conducted in October & November • Listening sessions are underway for January & February • Final report & recommendations is in development

Behavioral Health Provider Engagement Update

- Modified approach now includes meet & greets with various provider associations prior to listening session
- Meet & Greets (either held or scheduling in process)

- CT State Medical Society
- CT Academy of Family Physicians*
- CT Chapter of American Academy of Pediatrics
- CT Psychiatric Association
- National Association of Social Workers – CT Chapter
- CT Council of Child and Adolescent Psychiatry
- CT Counseling Association
- Connecticut Certification Board

*association members offer interventions to address BH concerns

- Listening sessions – January & February
 - Session #1 (confirmed for January)
 - CT Psychological Association
 - CT Association for Marriage & Family Therapists

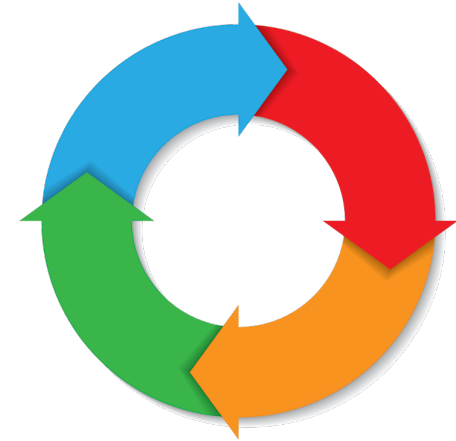
Behavioral Health Provider Engagement Update

- Key Topics
 - Interoperability – how patient data is currently shared
 - What is working well in the current state
 - Concerns in connecting to Connie (general, technical, confidentiality)
 - What is the data you find valuable in sending & receiving with other providers
- Final report with recommendations (targeted for March HITAC meeting)

HITAC Strategic Planning Activities

Process for Prioritization of 2023 Activities




- Survey Development (Goal: January)
- Results shared during January HITAC meeting
- Results & discussion will inform the 2023 key agenda items



All Payer Claims Database 2022 Update & 2023 Strategic Planning Process



Olga Armah, OHS

APCD Updates: 2022 Strategic Goals Update (1 of 2)

2022 Goal	Progress Notes	Status
Review and approve the APCD Advisory Group Charter	APCD Advisory Group charter ratified on 8/11/22 & shared with HITAC 8/18/22	
Establish a Denied and Dental Claims Workgroup to advise on Data Submission Guide amendments	APCD-Data Submission Guide Workgroup concluded its review and recommendations on August 4, 2022; Final report accepted by APCD-AG in August meeting	
Develop stakeholder engagement campaign to encourage self-insured employers to submit to CT-APCD	In process of gathering additional information to present to APCD-AG; To date, presentations have been made to APCD-AG and/or DRC by Washington State (Feb), NH (Apr), VT (Jul) & National APCD Council (Aug)	

 = Completed
  = In process
  = Guidance requested

APCD Updates: 2022 Strategic Goals Update (2 of 2)

2022 Goal	Progress Notes	Status
Develop data use case recommendations	Guidance from APCD-AG requested (priority data products) Please email staff with any input	
Review and approve updated APCD Policies & Procedures for data release	OHS has recently hired legal team who will begin process of reviewing P&Ps along with APCD Data Privacy & Security Subcommittee	

 = Completed  = In process  = Guidance requested

APCD Data Types & Years Available

The APCD comprises **medical, pharmacy, and dental*** claims information from enrollment and eligibility files

Payer Source	Claim Type	Years Available
Commercial** - Fully insured claims - State Employees & Retirees - Medicare Advantage (Medical only)	Eligibility/Enrollment Medical claims Pharmacy claims	1/1/2012 – 6/30/2022
Medicaid	Eligibility/Enrollment Medical claims Pharmacy claims	1/1/2015 – 6/30/2022
Medicare	Eligibility/Enrollment Medical claims Pharmacy claims	1/1/2012- 12/31/2019 1/1/2012 – 12/31/2018

* Collection to begin in 2023

**Anthem, Aetna, Cigna East, Cigna West, ConnectiCare, United Healthcare, HealthyCT, Harvard Pilgrim, Optum Health, Oxford, WellCare Health, eviCORE Healthcare, Express Scripts, Caremark

Reporting threshold – 3,000 members

2022 APCD DRC Approved Data Extracts & Aggregate

External Data Extracts & Aggregate

1. UConn School of Medicine – Suicide and Opioid prescribing and its consequences
2. Apperture, LLC – Medication adherence of CT persons diagnosed with three chronic disease conditions: asthma, diabetes, and cancer
3. Yale University School of Public Health – Study on HPV/Genital Warts
4. Federal Trade Commission – CT bordering state hospital merger investigation (**Friendly federal subpoena to State**)
- REFRESH** 5. Yale University – Study on population health total cost of care and care continuity enhancement
- NEW** 6. Yale University School of Public Health - Understanding Trends in Healthcare Use, Cost, and Outcomes for Populations with Chronic Conditions

2022 APCD Achievements & Initiatives

OHS & State Initiated Projects Supported by APCD Data

1. Outpatient RX drugs transparency mandate
2. Rand 4.0 employer-initiated study
3. Healthcare Cost and Quality Benchmarks & Primary Care Target Initiative (Data Use Strategy)
4. Health care service pricing and availability for Certificate of Need decision making **(18)**
5. In and out of network breast cancer screening utilization and cost for the commercially insured to support legislation
6. List of out of state health care providers servicing CT residents for Connie
7. Claims volume by product line to support Connie federal funding match analyses **(26% CMS cost share increased to 40%)**
8. Trauma activation fees (surprise billing) trends
9. Cost estimator – Phase 1 to be released soon
10. Pre-authorization legislative workgroup

2022 APCD Achievements & Initiatives

OHS & State Initiated Projects Supported by APCD Data

11. APCD Snapshot – online dashboard of summary data available e.g., data available, # of people insured from year to year, medical procedures performed, drugs prescribed, costs for health plans and consumers.
12. Legislatively mandated telehealth study (in progress, report due 1/31/2023)
13. Pre-authorization legislative workgroup

CT APCD Federal Funding - Update

- ❖ OHS continues to manage CT APCD without additional funding and limited analytic resources – **request for additional resources in the next budget cycle**
- ❖ Federal funding opportunity
 - No Surprises Act grant of \$2.5m over three years for states to establish or enhance APCD to support market transparency efforts and research
 - **Includes provisions to make it easier for self-insured employers to voluntarily participate in state APCDs**
 - **No new information on the funding**
 - **Still awaiting guidance from Federal Dept. of Labor about grant requirements**
- ❖ Secretary of Labor established a State APCD Advisory Committee (SAPCDAC) March –October 2021:
- ❖ Comprised of experts/representatives:

State APCD, health economist, Centers for Medicare & Medicaid Services (CMS), National Center for Health Statistics, Office of the National Coordinator for Health Information, HHS Office of the Civil Rights, Agency for Healthcare Research and Quality, Employer Sponsor of a Group Health Plan, Employee Organization Sponsor of a Group Health Plan, academic researcher, consumer advocate, Chair of APCD Council, and Assistant Secretary for Planning and Evaluation

APCD Strategic Planning – in development

- Guidance and Advisory Campaign / Council Engagement
 - HITAC, APCD Advisory Group & Data Release Committee
 - To encourage greater use
 - To encourage voluntary submission by ERISA plans
- Data collection
 - Dental & denied claims
 - Race, Ethnicity & Language
- Increased internal & external use
- Data quality and validation
 - Prioritize fields of value for policy
- Increase value utilization
 - E.g. provide fee waivers for certain categories of users

To request APCD data for research, policy development/evaluation, or decision-making related to health care services utilization, cost and quality, visit:

<https://portal.ct.gov/healthscorect/data-request>

OR

<https://portal.ct.gov/OHS/Services/Data-and-Reports/To-Access-Data>

Other HITAC Updates

*Sumit Sajnani, OHS HITO &
Amy Tibor, OHS*

Other HITAC Updates

- Annual OHS Health IT Report
 - Under development
 - Will be shared in January HITAC meeting
 - Due to CGA Feb 1
- Five-Year Statewide Health IT Plan
 - Statute reads updates made periodically; no changes anticipated to be made in 2023
- Advanced Planning Documents

Announcements & General Discussion

Dr. Joe Quaranta & Council Members

Wrap Up and Meeting Adjournment

Upcoming Meeting
January 19, 2022

Contact Information

OHS Contact for December 2022 HITAC Meeting

Amy Tibor

Amy.Tibor@ct.gov

OHS General Email

OHS@ct.gov

Health IT Advisory Council Website

<https://portal.ct.gov/OHS/HIT-Work-Groups/Health-IT-Advisory-Council>