



**Health Information Technology
Advisory Council**

May 16, 2024

AGENDA

HEALTH INFORMATION TECHNOLOGY ADVISORY COUNCIL – APRIL 2024

TOPIC	PRESENTER
Welcome & Call to Order	Dr. Joseph Quaranta, Co-chair
Public Comment	Members of Public
Minutes Approval: April 18, 2024	Chair & Council Members
Legislative Update	Cindy Dubuque-Gallo
HIE Regulations Update	Sumit Sajnani, HITO, Co-chair
HIE Accomplishments towards Statutory Goals	Jenn Searls, Executive Director, Connie
Update on State of CT AI Policy	Mark Raymond, CIO
Announcement and Meeting Adjournment	Dr. Joseph Quaranta, Co-chair

Public Comment

(2 minutes per commenter)

Approval of Minutes: April 18, 2024

Legislative Update

Cindy Dubuque-Gallo, OHS

HIE Regulations Update

Sumit Sajnani, HITO & Tyra Peluso, OHS

HIE Legislative Progress

SBI Changes Impacting HIE

- 1) Provider Waivers
- 2) No exchange of patient records if consent required
- 3) Provider liability protections
- 4) Timeframes for providers to complete connection and begin participation
- 5) Creates a working group to make recommendations regarding regulations, policies and procedures for the HIE
- 6) Expansion of HITAC membership

HIE Legislative Progress

HIE Legislative Status Update

SBI Legislation mandate impacting RAS:

Sec. 23. (Effective from passage) (a) Not later than September 1, 2024, the executive director of the Office of Health Strategy shall establish a working group to make recommendations to the office regarding the parameters of the regulations to be adopted by, and any policies and procedures to be implemented by, the office pursuant to subsection (d) of section 17b-59e of the general statutes, as amended by this act. Such recommendations shall include, but need not be limited to (1) privacy of protected health care information, (2) cybersecurity, (3) health care provider liability, (4) any contract required of health care providers to participate in the State-wide Health Information Exchange, and (5) any statutory changes that may be necessary to address any concerns raised by the working group.

Special Recommendations Working Group construct:

- Time-limited with recommendations due no later than January 1, 2025
- Consists of not more than 15 members

HIE Legislative Progress

Regulations Advisory Subcommittee Members* Formalized

Members:

Chair, Sumit Sajnani;
Legal Director, Antony Casagrande
Dr. Susan Israel
Dr. Patricia Checko
Dr. Byron Kennedy
Gary Archambault
DSS-Tentative/TBD

SME/Consultant to RAS: Attorney Richard Gold

Meeting Schedule being developed

Meetings may include additional interested stakeholders, including but no limited to: SRWG Members and Guest Speakers



Connie Accomplishments

Health IT Advisory Council
May 16, 2023

Jenn Searls, Executive Director



Connie's Consumer Mandate

“empower **consumers** to make effective health care decisions, promote patient-centered care, improve the quality, safety and value of health care, reduce waste and duplication of services, support clinical decision-making, keep confidential health information secure and make progress toward the state's public health goals.” C.G.S.A. § 17b-59d(a)



Connie's Stakeholder Mandate

“assist the state, health care providers, insurance carriers, physicians and all stakeholders in empowering consumers to make effective health care decisions, promote patient-centered care, improve the quality, safety and value of health care, reduce waste and duplication of services, support clinical decision-making, keep confidential health information secure and make progress toward the state's public health goal” C.G.S.A. § 17b-59g(a)



Who Are Connie's Constituents?

Connie is required by law to empower:

- Consumers

Connie is required by law to assist:

- State of Connecticut
- Health Care Providers and Physicians
- Insurance Carriers



Direction from the Legislature

- Allow real-time, secure access to patient health information and complete medical records across all health care provider settings
- Provide patients with secure electronic access to their health information
- Allow voluntary participation by patients to access their health information at no cost
- Support care coordination through real-time alerts and timely access to clinical information
- Reduce costs associated with preventable readmissions, duplicative testing and medical errors
- Promote the highest level of interoperability
- Meet all state and federal privacy and security requirements
- Support public health reporting, quality improvement, academic research and health care delivery and payment reform through data aggregation and analytics
- Support population health analytics
- Be standards-based
- Provide for broad local governance

C.G.S.A. § 17b-59d



Focus Today

Stakeholder mandate to assist health care providers and physicians

- Allow real-time, secure access to patient health information and complete medical records across all health care provider settings
- Support care coordination through real-time alerts and timely access to clinical information

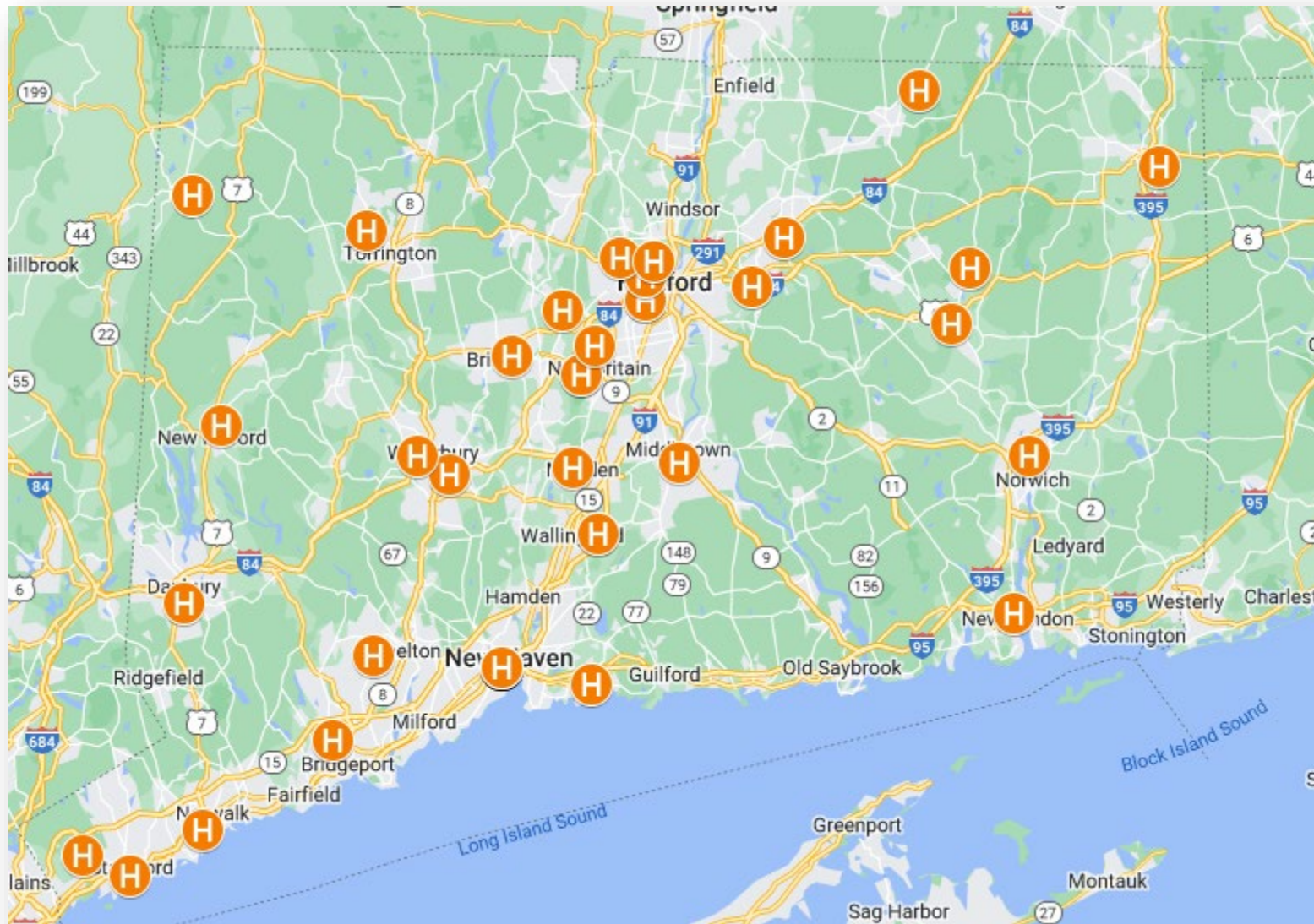
Empower consumers

- Provide patients with secure electronic access to their health information
- Allow voluntary participation by patients to access their health information at no cost

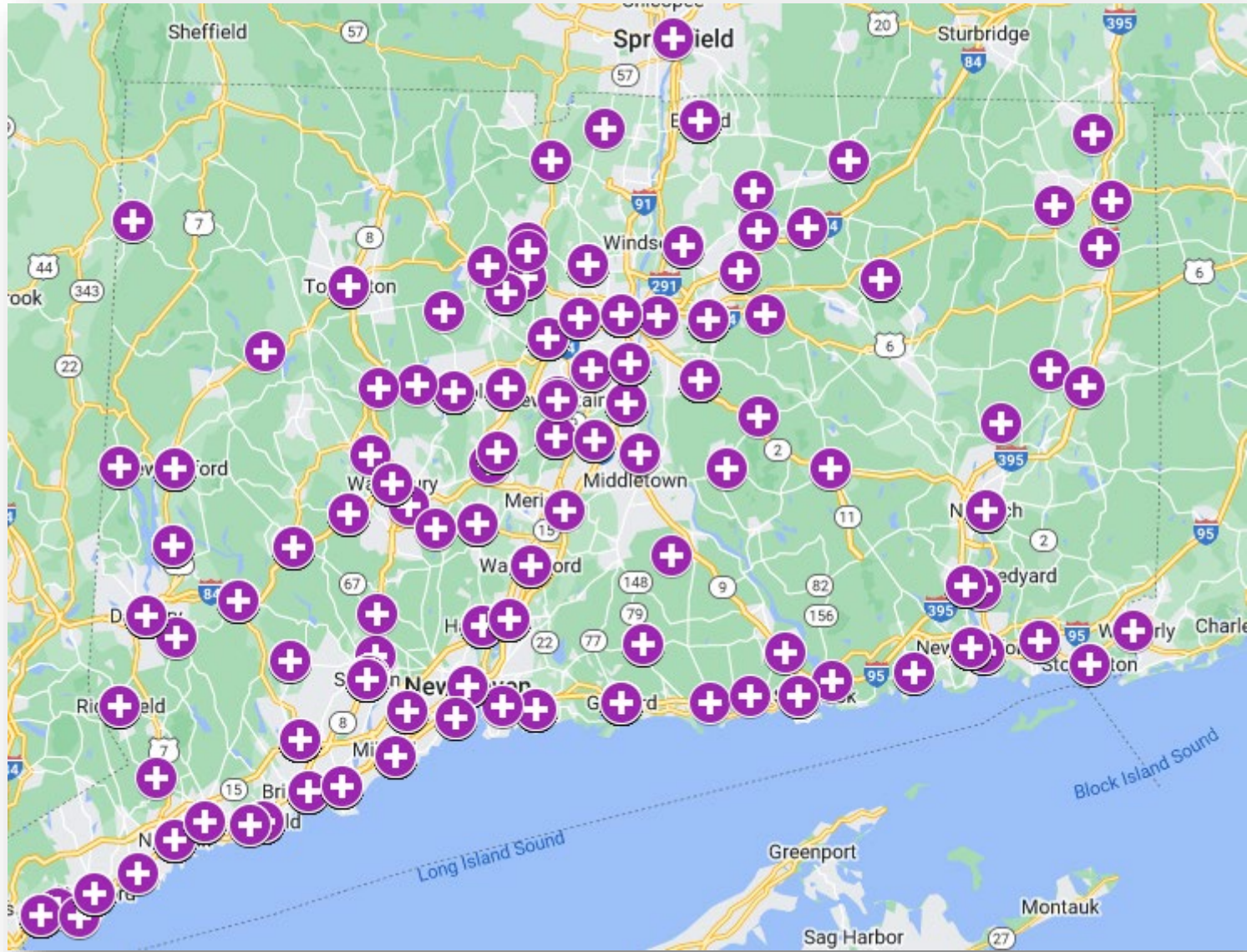
Support Public Health Reporting



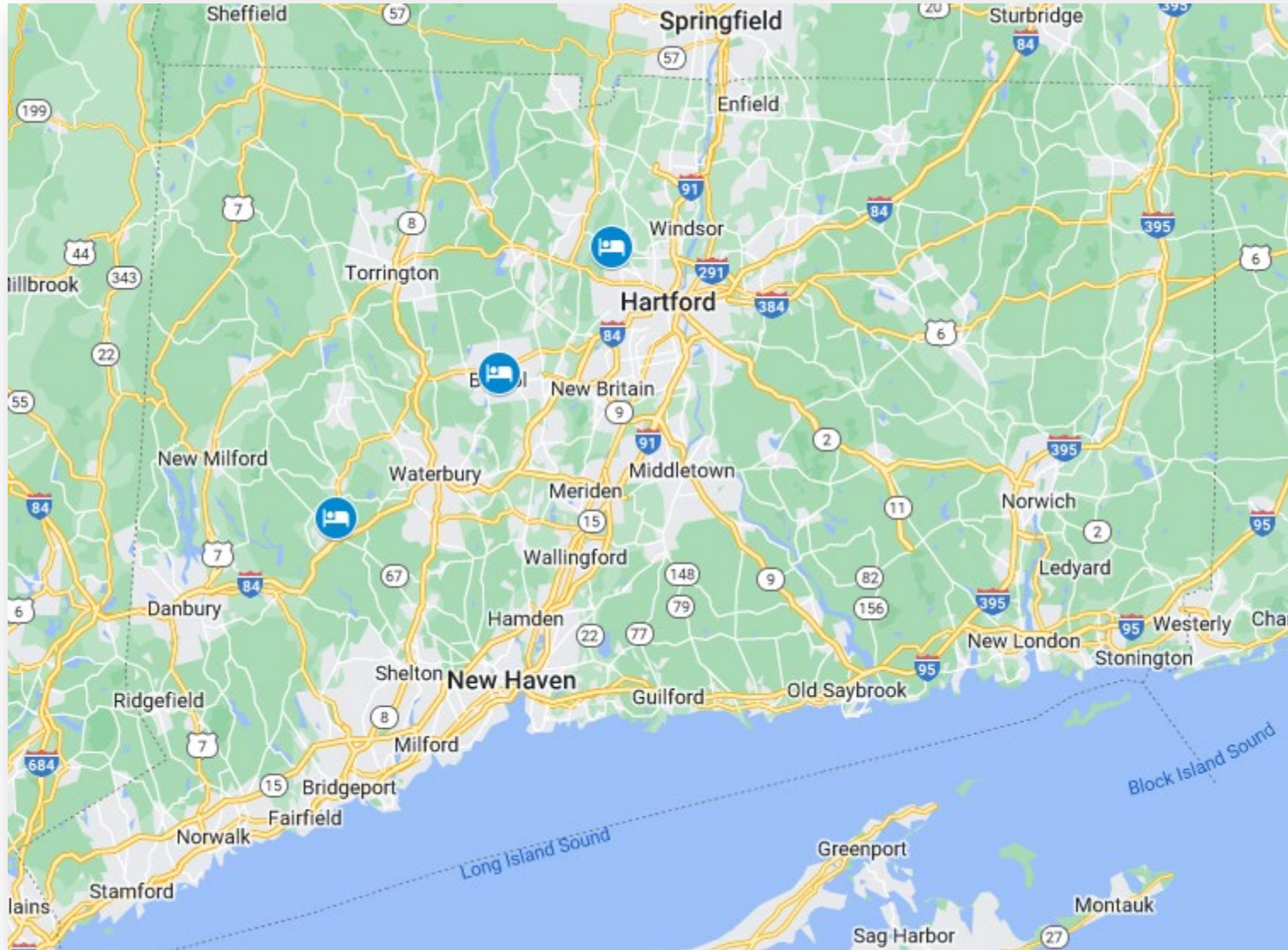
**Real-Time Secure Access and
Complete Medical Records
Across All Health Care Provider
Settings**



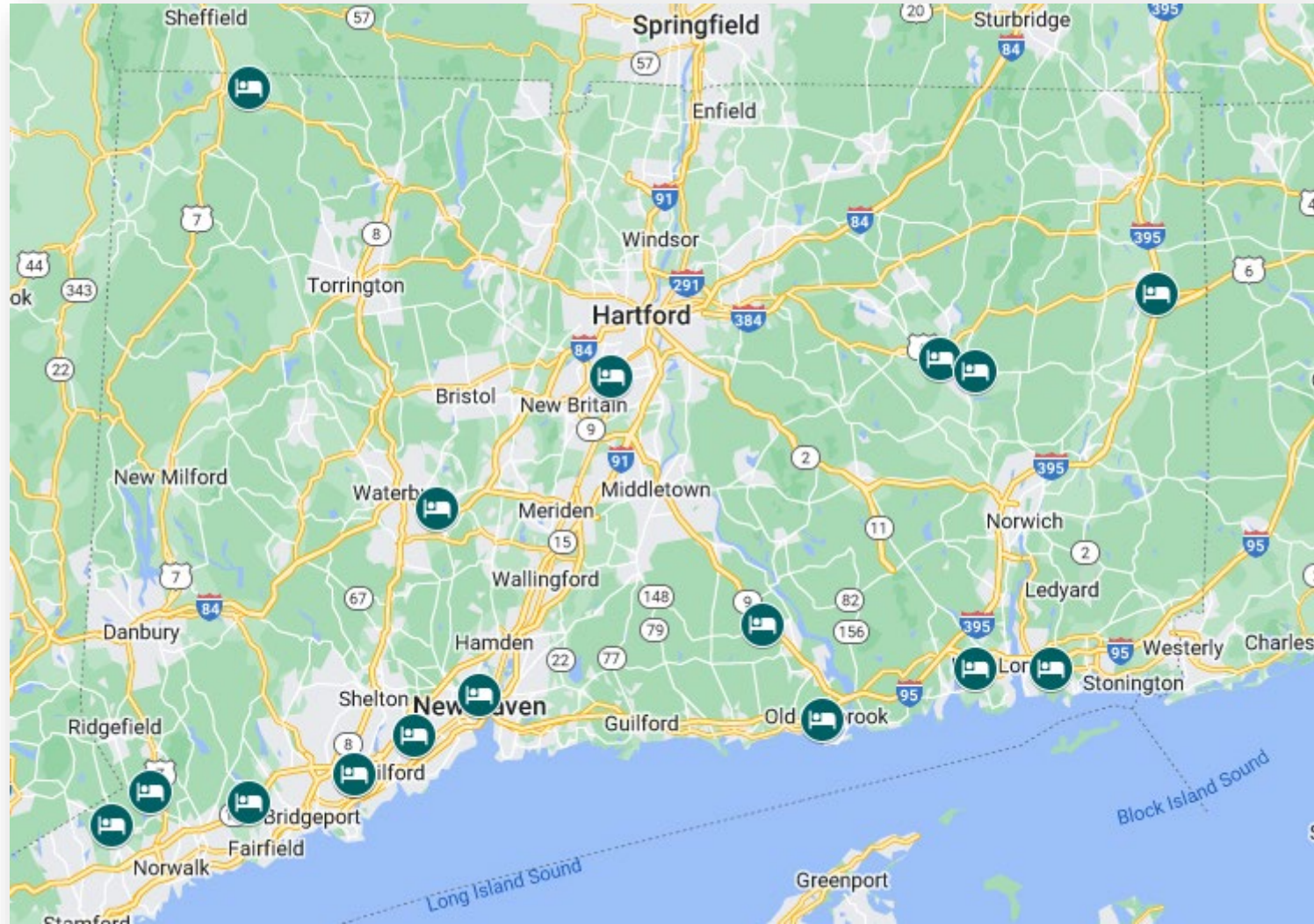
HOSPITALS



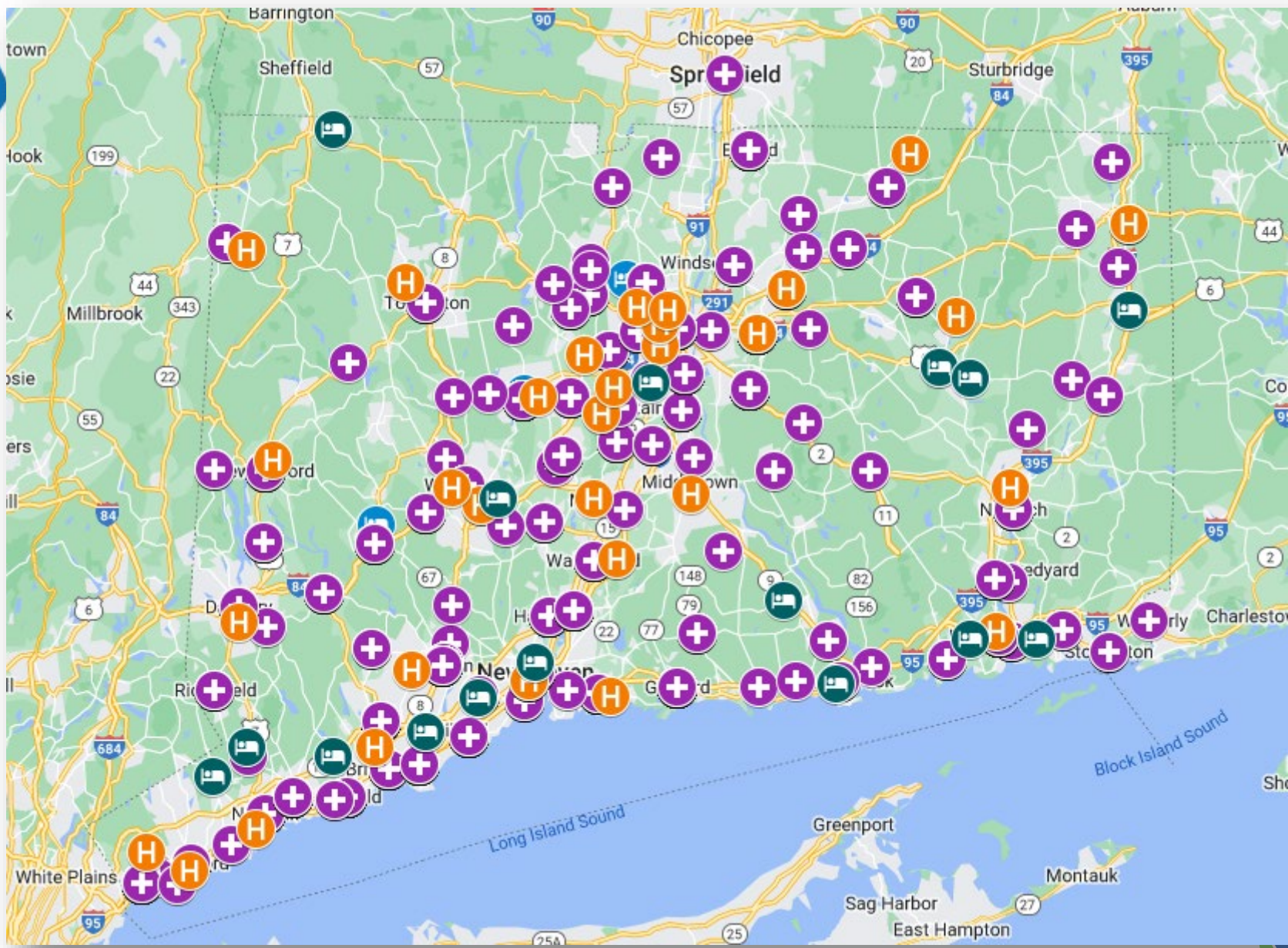
MEDICAL PRACTICES



SKILLED NURSING FACILITIES



SKILLED NURSING FACILITIES (Pending)



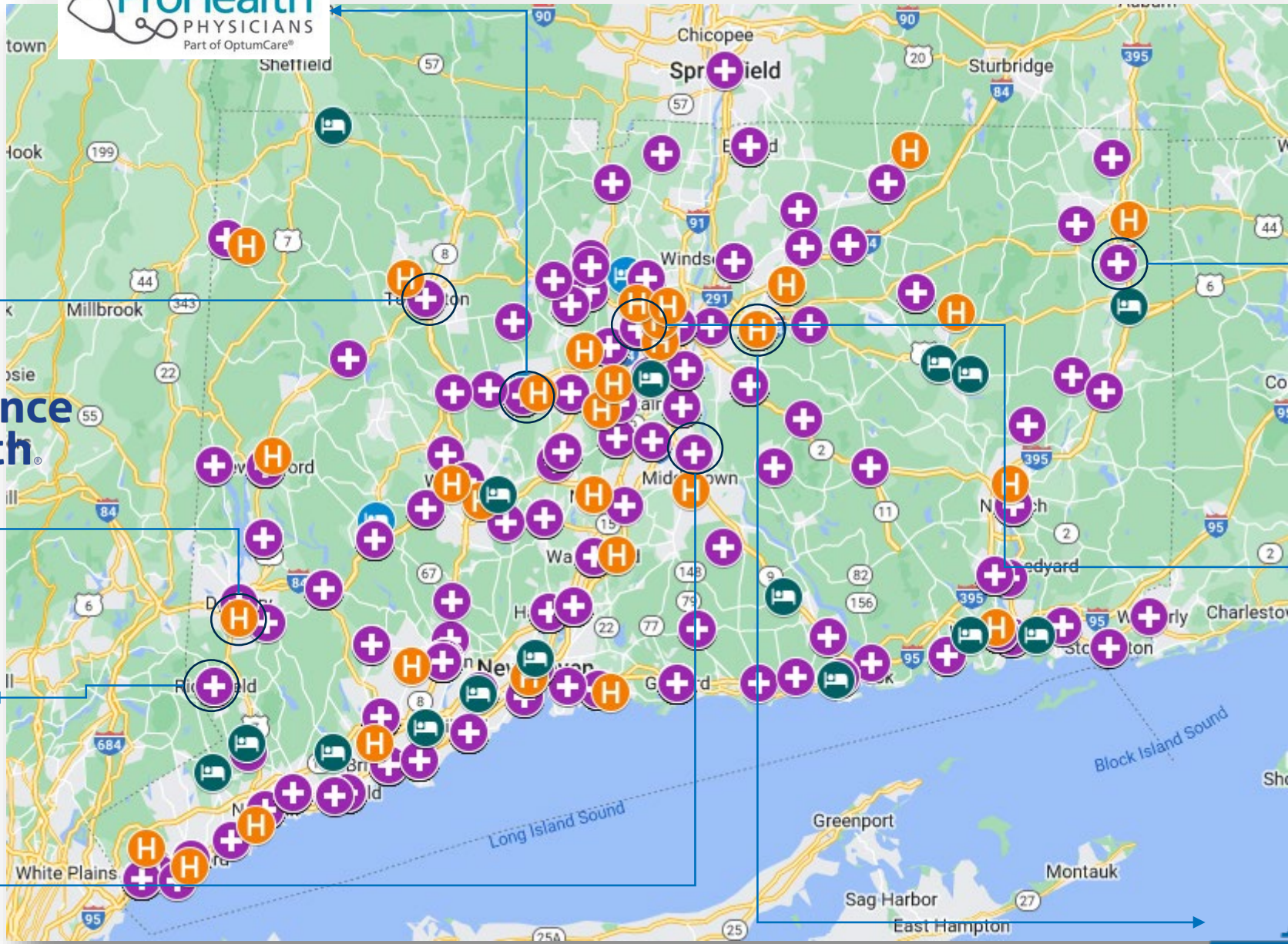
ProHealth[™]
PHYSICIANS
Part of OptumCare[®]



Nuvance Health[®]

JUST HEALTH
FAMILY MEDICINE

ABH
Creating Solutions Together[®]



United Services, Inc.

Saint Francis Hospital
Trinity Health

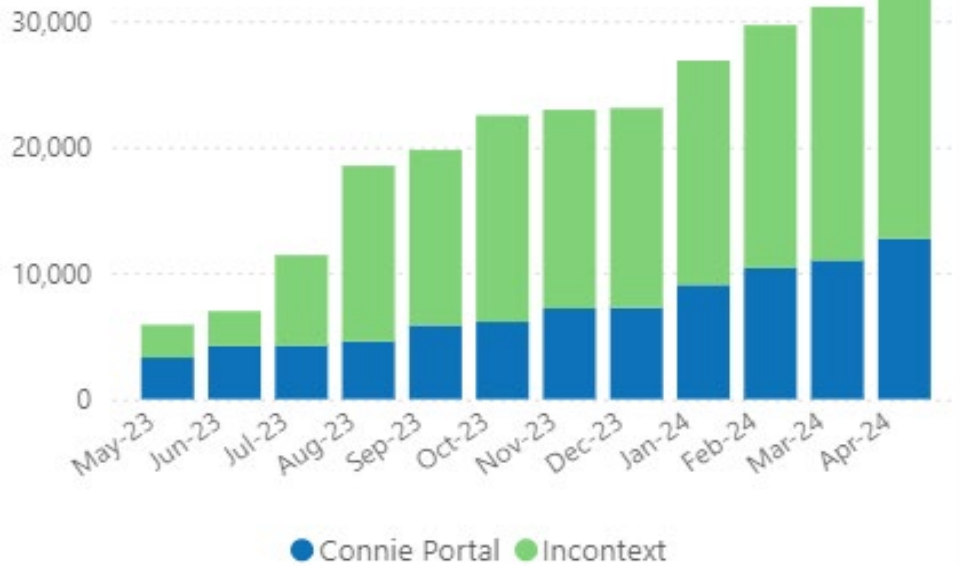
UCONN
SCHOOL OF MEDICINE

**Family Medicine
Center at
Asylum Hill**

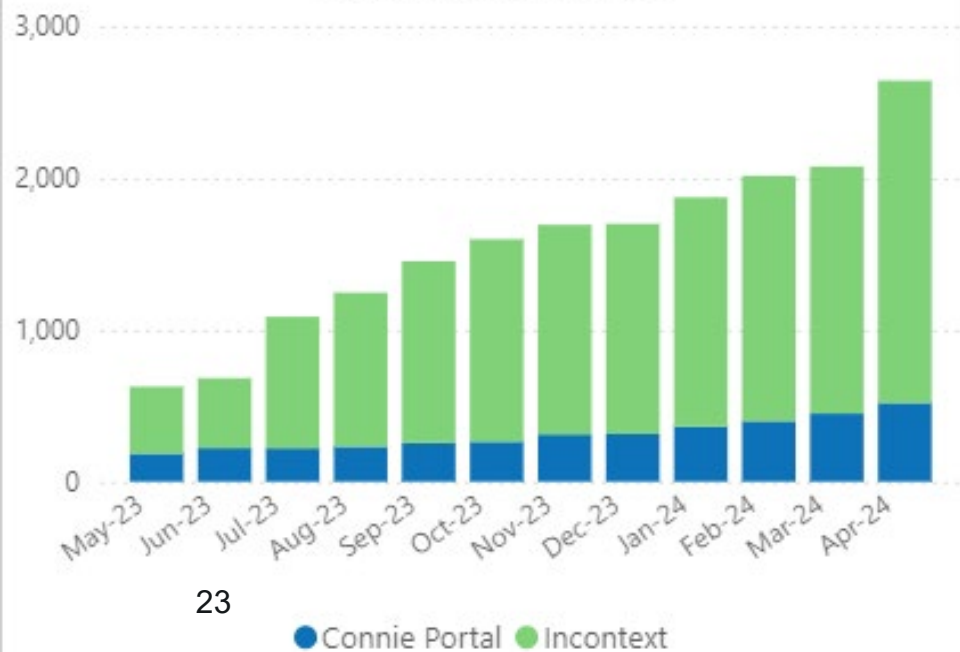
99 Woodland Street

ECHN
Eastern Connecticut Health Network

Connie Queries

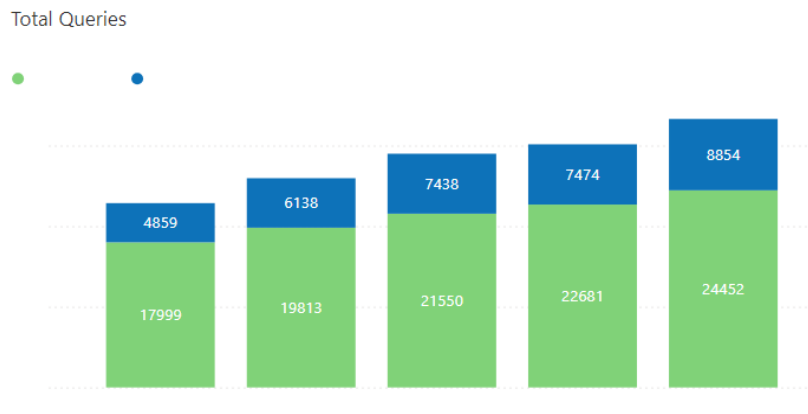


Connie Unique Users



Connie Outreach & Engagement Q3 Goal Progress

- Webinars/Meetings:
 - 2 Quarterly webinars
 - Prospective Orgs
 - Connected Organizations
 - PointClickCare Webinar for SNFs
 - CT Assoc. of Family Physicians (CAFP) Board Mtg.
- 6 in-person trainings/meetings so far Q3
- Bristol Hospital Area Outreach and Onboarding:
 - Up to 7 new organizations using portal and increasing their utilization. Goal 10 by end of Q3
- Outreach Focus:
 - Nuvance Area Provider Organizations who have not yet connected with Connie



- Prospective Pharmacies
- SNFs
- SONE Prospective Provider Organizations

**Empower
Consumers**





Access to data

Phase I

- Opt-out process developed and implemented
 - connect.org/opt-out
 - ~6,300 patients have opted out
- Collect data from participating organizations

Patient Opt-Out Form

First Name* Middle Name Last Name*

Email Primary Phone Number* Secondary Phone Number

Date Of Birth* Male Female Other/I Do Not Wish To Disclose

Address Line 1* Address Line 2

City* ZIP Code*

Reason for Opting Out

If this form is submitted by someone other than the person named above, the person submitting the form hereby certifies that he/she is acting as (CHECK ONE):

Parent Legal Guardian Other

I would like to be notified of my participation choice in the following way (choose one)

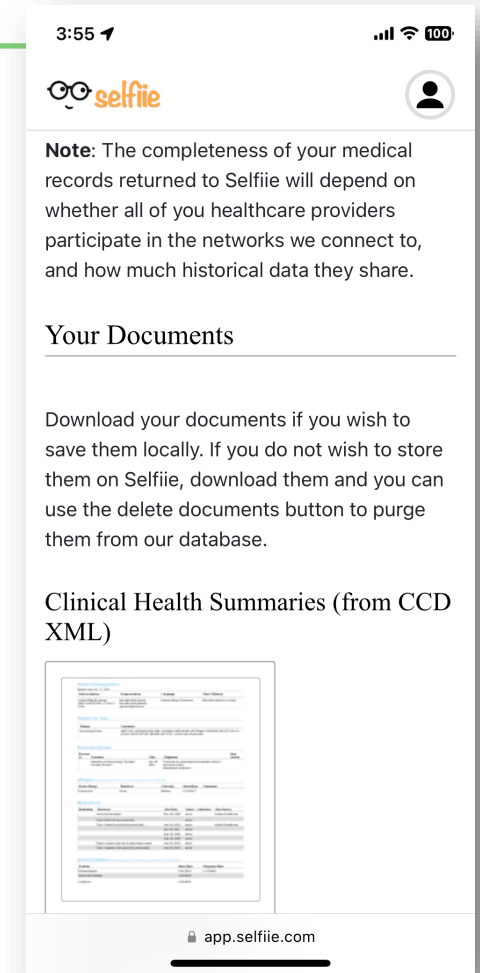
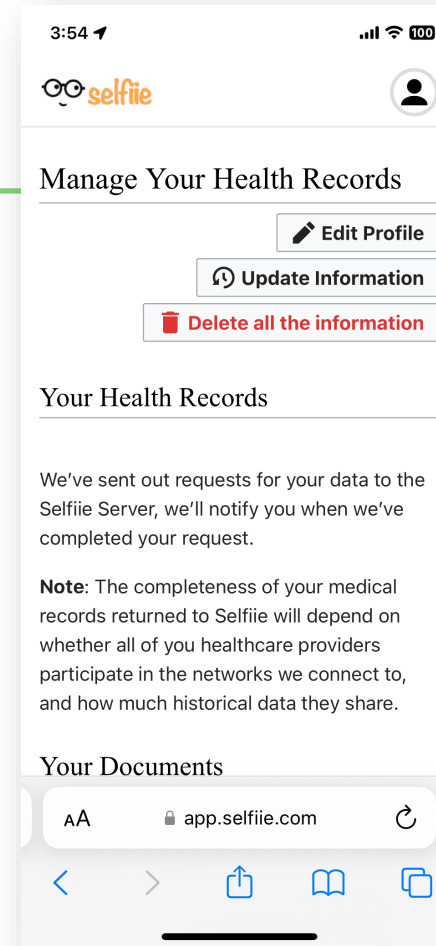
Email Phone Letter Text Message No Notification



Access to data

Phase II

- Respond to patient access queries via Carequality





Access to data

Phase III

- Build a patient portal
 - Targeting October go-live
- Create Patient & Family Advisory Council
 - Summer meeting being scheduled

The screenshot displays a patient portal interface for David Cross, 51 years old. The dashboard is organized into several sections:

- Header:** Includes a search bar for patient education, settings, and the user's name (DAVID).
- Profile:** Shows the patient's name (DAVID CROSS), age (51 years old), and an option to edit social history.
- Medical History Grid:**
 - Visits:** 15 visits, including a visit to HOUSTON GENERAL H... on Jul 11, 07:00 AM.
 - Lab Results:** 169 results, including a Glu test of 220 mg/dL on Jul 9, 2021.
 - Medications:** 4 medications, including Lisinopril 20 MG Oral T... taken every day.
 - Immunizations:** 5 immunizations, including Pfizer-BioNTech COVI... on Oct 17, 03:30 PM.
 - Conditions:** 10 conditions, including Diabetic foot ulcer ass... with a severity indicator.
 - Allergies:** 1 allergy, including simvastatin with a severity indicator.
- Vital Signs Grid:**
 - Procedures:** 1 procedure, including a Pulmonology Report on Feb 16, 12:00 PM.
 - Blood Pressure:** 14 readings, including 120/80 mmHg on Jul 11, 2021.
 - Heart Rate:** 14 readings, including 78 beats/min on Jul 11, 2021.
 - Respiratory Rate:** 11 readings, including 14 breaths/min on Mar 15, 2023.
 - Temperature:** 14 readings, including 100.7 °F on Jul 11, 2021.
 - Weight:** 14 readings, including 241 lb 13.55 oz on Jul 11, 2021.
- Health Tips:** A section titled "Vitalgo: Find Others Who Share Your Journey" with a WebMD Health link.

At the bottom of the dashboard, there are links for Contact us, FAQs, Privacy Policy, and Terms and Conditions.

Support Public Health Reporting





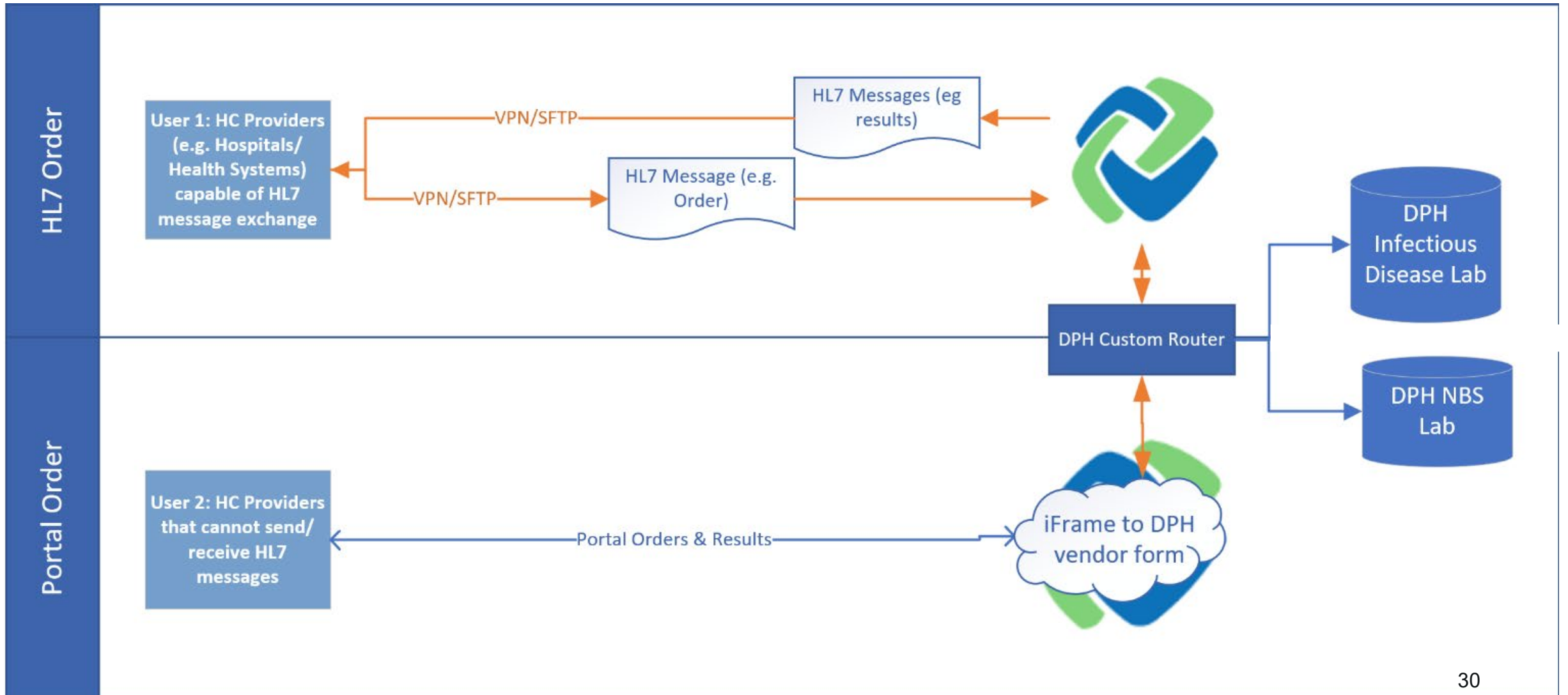
Department of Public Health Labs

LIMS Modernization efforts

Goals

- Paperless operations at lab
- Automate workflows and processes
- Integrate instruments results into LMS
- Implement Electronic Test Orders and Results (ETOR) – standards-based exchange to support interoperability
- Improve data availability for Public Health action by electronic reporting to DPH program systems

How Connie is helping





How Connie is Helping

- **Connie will route ETOR messages between hospitals and DPH**
 - Hospitals can utilize an existing connection with Connie to interface with the state lab.
 - DPH lab only needs one interface to/from Connie instead of multiple connections and interfaces per hospital.
 - This connectivity may enable future use case development between Connie and DPH.
- **Providers unable to build ETOR interfaces to DPH can log into Connie to electronically submit orders**
 - Providers would only need one set of login credentials to see their patients' clinical information in Connie and for ETOR
 - Connie may prepopulate orders with patient demographics to decrease manual data entry needs



Benefit to Connecticut

- **Decrease DPH's Administrative Burden and Cost** in maintaining individual connections to multiple hospitals.
- **Simplified Provider Connections** as they no longer need to establish connections with multiple entities or access various systems for manual entry of orders.
- **Efficiency through Automation:** decrease reliance on manual entry of orders, leading to improved accuracy and operational efficiency.
- **Modernizing Communication Channels:** eliminate the reliance on faxing results to systems that currently depend on manual data entry, ushering in a more streamlined and secure process.

Other Connie Updates





Technical Integrations

Q3 EHR HUB Goal Progress:

- 3/5 new EHR HUBs LIVE
 - DBC - ChiroQuickCharts
 - American Medical Solutions
 - MatrixCare - SNF Product

Q3 Integrations Goal Progress:

- 14/30 new orgs live
- Begin Pharmacy Integrations
 - Beginning with CVS, Walgreens, and COSTCO
 - Connecting with Pharmacy EHRs: PrimeRx & McKesson



Other Updates:

- 19 more SNFs in the queue for PCC and Matrixcare integrations
- On-going discussion with THofNE Leadership regarding emergency access-prior to TogetherCare migration

PARTICIPANT TESTIMONIAL



Tim Lishnak, MD

Asylum Hill Family Medicine Center Inc.

When our health record system recently experienced downtime, Connie was our lifeline. Not only did it enable us to access crucial patient information for both office visits and hospital care, but it also proved to be an incredibly useful and helpful system overall. Its extensive network of contributing organizations ensures reliable access to external patient data, making it an invaluable backup and a quick lookup tool for comprehensive patient care.



Questions?



Announcements & General Discussion

Dr. Joseph Quaranta &
Council Members

Meeting Adjournment