Meeting Date	Meeting Time	Location
July 27, 2018	1:00 – 2:30 PM	Meeting Location (Webinar Option):
		Conference Rm. 2A, 450 Capitol Avenue
		Hartford, CT 06106

Committee Members							
Patricia Checko, Ph.D., Chair	Χ	Sheryl Turney, MS		Kun Chen, Ph.D.	X		
Robert Blundo	Χ	Kristen McClain, JD/MBA	Χ	Lisa Freeman			
Miriam Delphin-Rittmon, Ph.D.		Henry Jacobs, MD/JD		Michael Fields	X		
Justin Peng, MPH	Χ	Anthony Dias, MBBS, DPM, MPH	Χ				
Supporting Leadership							
Kelsey Lawlor, OHS	X						

Agei	nda								
	Topic	Responsible Party	Time						
1.	Welcome & Call to Order	Patricia Checko	1:00 PM						
2.	Public Comment	Attendees	1:05 PM						
	There was no public comment.								
3.	Review and Approval of the March 16, 2018 Minutes	Committee Members	1:10 PM						
	Patricia Checko asked for a motion to approve the minutes from the Special Meeting of the DRC on March 23,								
	2018. Michael Fields made the motion to approve, Justin Peng seconded the motion. The motion passed								
	unanimously with no additions or abstentions.								
4.	Data Release Process Review	Rob Blundo	1:15 PM						
	Robert Blundo went over the general rules and guidelines that the Committee is charged with following when								

Robert Blundo went over the general rules and guidelines that the Committee is charged with following when evaluating each application (see slide #6).

While waiting for the Yale New Haven Health Center team to arrive, the Committee discussed issues they planned to raise with the applicants. Michael Fields stated that he had a question regarding the request to identify payer information and how that would support their goals within the parameters within the application. Patricia Checko responded that she also fails to see why they need access to this information. If, however, they have a plan to reach out to those groups/providers/payers to collaborate on how they can better coordinate care between themselves, then she feels it would be a reasonable request. Rob Blundo added that many of the researches tend to ask initially to receive all the data or information available because it is riskier to have to come back at a later date to ask for more. He was curious to see how much that played a role in their application process.

In terms of the size of this request, Patricia Checko stated that it's hard to tell the scope the applicant is looking for based on their application. If the APCD had to differentiate between a YNHHS provider and an outside provider, would this be a big task for the APCD staff? Rob Blundo stated that he believes YNHHS would provide a list of billing NPIs which would not be an unreasonable amount of additional work. Many other requests have required some form of filtering.

Patricia Checko stated that one of the biggest issues she had with this application was trying to define the population of interest. The application is asking for a one-year period worth of any event(s) that involve YNHHS and or Yale Medical School system. Anthony Dias added that after reading the application, he felt the need for more clarity on the breadth of the health system itself, to better understand exactly what it entails.

5. Application Review and Discussion: Yale New Haven Health Center and Yale School of Medicine

Lisa Stump/Kate Dangremond

1:20 PM

Lisa Stump gave a brief overview of the goals for this data request. As YNHHS works to improve and enrich their capacity for population health management and cost of care management, they believe that understanding a patient's entire care journey is critically important. While YNHHS is a large entity, not all of a patient's care is provided by their clinicians or at their facilities. Through this research they hope to be able to establish some retrospective view for each of the patients they see, as well as some prospective view around their care once they leave the YNNHS. They believe that claims data will help provide some bread crumbs to where patients go before and after care, and they will be able to better coordinate and improve quality with this information. Kate Dangremond added that this also adds to population management and how they design the work that they're doing so as to be responsive to the needs of the population and community. APCD data would supplement their current data sets from EPIC.

Rob Blundo asked if YNHHS had used administrative claims data in the past. Kate Dangremond and Lisa Stump answered that they have their own claims data from their employee health plan, as well as their Medicare ACO data.

Patricia Checko asked what Yale's the population of interest is. Lisa Stump answered that they are interested in Yale patients seen in the last year. Rob Blundo asked for clarification on how YNHHS would want to identify this set of data that is being requested. Lisa Stump indicated that provider IDs across facility types would be sufficient.

Lisa Stump asked if Medicaid claims are being released yet. Rob answered that data is still being collected, and there will be another application review process to receive that information. Rob updated everyone that the Memorandum of Agreement between the Office of Health Strategy and the Dept. of Social Services is finalized, and they are targeting November to begin those data releases.

Rob asked for more clarity about the data filtering/identification process, and asked YNHHS to describe what the identification of an event would be within the parameters of their request. Lisa indicated that any claim for a patient 6 months prior and 3 months post an event would be requested. Rob recommended that the timeframe for the data request be modified to allow for pre/post window with adequate claims runout. Lisa agreed.

Patricia Checko asked YNHHS if one of their main goals of this project is to improve primary care specialty and hospital-based services as an ACO, why then do they need provider IDs for providers outside of their system. Lisa responded that they are interested in creating a more clinically-integrated network and building strong partnerships with organizations outside of YNHHS and in the community. They believe this will elevate care for the populations and communities they serve. There are both internal and external opportunities for improvement with access to this information. It could identify trends and patterns in gaps in care that can be mitigated. Kate Dangremond added that YNHHS and Yale Medical School have a coordinated care network across the areas they serve and hope to bolster that work with this data.

Patricia Checko asked where the Community Health Centers fit into the YNHH system. Kate Dangremond answered that they work very closely with Community Health Centers and work with them day to day on quality improvement, transitions of care, care management, etc. Lisa added that going back to the electronic medical records, Fair Haven Health Center chose to partner/contract with YNHHS and now Cornell-Scott Health Center is doing the same. This, in addition to the New Haven Primary Care Consortium gives more access to a patient's longitudinal health record.

Michael Fields asked for clarity on YNHHS's request for payer ID information. Kate Dangremond answered that they thought being able to see trends and patterns in care across Medicaid and commercial populations would help eliminate gaps or discrepancies. Lisa added that they feel telehealth is going to be an increased part of how YNHHS delivers care, and if a preponderance of patients using that service are largely attributed to one payer population, that gives YNHHS better information as to how to work with those organizations to serve the needs of the patients.

Rob indicated he understood the importance of getting the claims and analyzing what's happening outside of the YNHHS. He asked if there is an equal amount of importance on identifying the providers providing that outside care. Lisa Stump answered that if it turns out that, for example, a large number of diabetic patients from one practice are super utilizers of the Emergency Department, YNHHS would want to reach out to that group to figure out how they can better collaborate to reduce those instances. She emphasized the holistic nature of their interest in looking at the whole surrounding ecosystem.

Patricia Checko asked if YNHHS would be sharing with other providers that they are planning to do this. Lisa and Kate answered that they certainly wouldn't hide this, however, they would envision reaching out with this information when there are specific use-cases that can be addressed through collaboration. Patricia Checko cautioned that it could lead to uncomfortable conversations and it would be important to be thoughtful. She stated that it might make the members feel more comfortable if there was a commitment to addressing findings in a community-centered way. Rob added importance of taking into consideration there is no intent to de-identify the data and violate the HIPAA rules the APCD is held to.

Rob Blundo asked if YNHHS was planning on incorporating rate and reimbursement information into their cost of care analysis. Lisa answered they do not want to use the data to understand the rates of other entities. They are interested in data as an aggregate, like a heat map, to identify ways they can collaborate with other entities.

Kun Chen asked YNHHS if they'd be looking at claims and events during the pre and post time periods that occur at and outside of the YNHHS. Lisa confirmed that this is correct.

Justin Peng asked if we want to see a list of general actions that may be taken by YNHHS after they've had a chance to review the data. Rob answered that there are two safeguards regarding this in the application: one is that the application requires the applicants provide the opportunity/alert the HITO to review the results and how the data will be utilized, and two, the goals and uses listed in this application are the only ones that can be executed by the applicant. Justin asked if there is enough information or language in this application to assuage the committee's concerns. Rob answered that this is the first step to drafting a data use agreement. Rob also added that the applicant can specify action that they will not engage in as part of their application, which the data use agreement will then bind them to. The committee agrees that this is an appropriate approach and Rob will include such language to be approved by the AHCT legal team during the contractual process.

Patricia Checko asked if YNHHS's IRB sees this research as research on humans. Lisa answered that this would fall under quality improvement.

Patricia Checko asked who will be able to see the data. She was concerned about the Total Cost of Care Steering Committee. Lisa stated that this committee would only be seeing final reports. Only the members of the data analytics team would be able to see the data. They each sign confidentiality agreements, and Lisa will provide a list of all individuals to Rob as part of the security safeguards.

6. Final Votes Robert Blundo 1:35 PM

Patricia Checko asked the committee for a motion to approve the YNHHS application with the following stipulations:

- YNHHS and Yale Medical School will not use the data to influence rate setting or reimbursement related information with providers or carriers in the region
- There is an intent to identify gaps and areas of improvement and to outreach with other providers in the region for coordination to improve quality and outcomes

Rob Blundo made the motion to approve the motion with the two stipulations, Michael Fields seconded the motion. The motion passed unanimously with no abstentions.

7. Adjournment Robert Blundo 1:45 PM

Pat Checko requested a motion to adjourn at 1:45pm. Michael Fields made the motion, Justin Peng seconded. The motion passed unanimously, and the meeting was adjourned.

Meeting information is located at: http://portal.ct.gov/Office-of-the-Lt-Governor/Health-IT-Advisory-Council---APCD-Advisory-Group

