



# HIE Use Case Design Group

*A Design Group of the Connecticut Health IT Advisory Council*

August 9, 2017 | 2:30 – 4:00 pm

Session #6

Facilitated by CedarBridge Group



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GROUP

# Agenda

<b>Welcome / Roll Call</b>	Michael Matthews	2:30 PM
<b>Comments on 8/2/17 Minutes</b>	Design Group Members	2:32 PM
<b>Review Meeting Schedule</b>	Michael Matthews	2:34 PM
<b>Use Case Discussion</b> <i>1. Medical Orders</i> <i>2. Bundle Management</i> <i>3. CHA Dose Registry</i>	Design Group Members	2:35 PM
<b>Review and Discuss Outline of Use Case Prioritization Criteria</b>	Michael Matthews and Design Group Members	3:15 PM
<b>Meeting Wrap-up and Next Steps</b>	Michael Matthews	3:55 PM

# Comments on 8/2/17 Minutes

# Meeting Schedule

Milestones/Deliverables	Planned Dates
Session 1: Kick-Off Meeting	6/27/17
Session 2: Review Use Cases (Part 1)	7/12/17
Session 3: Review Use Cases (Part 2)	7/19/17
Present update to Health IT Advisory Council	7/20/17
Session 4: Review Use Cases (Part 3)	7/26/17
Session 5: Review Use Cases (Part 4)	8/2/17
<b>Session 6: Review Use Cases (Part 5) and Prioritization Criteria of Use Cases</b>	<b>8/9/17</b>
Session 7: Review Final Use Cases (Part 6); Apply Prioritization Criteria	8/16/17
Present update to Health IT Advisory Council	8/17/17
Session 8: Select “Top 10” Use Cases; Discuss Final Prioritization Criteria	8/23/17
Session 9: Validate Value Propositions, Implementation Priorities, and HIE Services Needed to Enable Priority Use Cases	8/30/17
Session 10: Draft Recommendations	9/6/17
<b>Present Report and Recommendations to Health IT Advisory Council</b>	<b>9/21/17</b>

# Use Case Inventory and Library

# Use Case Inventory: Part 1

*Session #2 (July 12)*

Use Case	Review
1. Electronic Quality Measurement System (eCQMs)	7/12/17
2. IIS (Submit)	7/12/17
3. IIS (Query)	7/12/17
4. Advance Directives	7/12/17
5. Opioid monitoring and support services	7/12/17
6. Wounded warriors	7/12/17

# Use Case Inventory: Part 2

*Session #3 (July 19)*

Use Case	Review
7. Longitudinal health record	7/19/17
8. Emergency department super-utilizers	7/19/17
9. Medication reconciliation	7/19/17
10. Care Coordination	
- Referral management	7/19/17
- Transitions of care	7/19/17
- Clinical encounter alerts	7/19/17
- <i>Care plan sharing</i>	7/26/17

# Use Case Inventory: Part 3

*Session #4 (July 26)*

Use Case	Review
11. POLST / MOLST	7/26/17
12. Disability determination	7/26/17
13. Life insurance underwriting	7/26/17
14. Image exchange	7/26/17



# Use Case Inventory: Part 4

*Session #5 (August 2)*

Use Case	Review
15. Population health analytics	8/2/17
16. Public health reporting	8/2/17
17. Lab results delivery	8/2/17
18. Social determinants of health	8/2/17
19. Research / clinical trials	8/2/17
20. Patient portal / personal health record	8/2/17
21. Patient-generated data	8/2/17

# Use Case Inventory: Part 5

*Session #6 (August 9)*

Use Case	Review
22. Medical orders / order management	8/9/17
23. Bundle management	8/9/17
24. CHA Dose registry	8/9/17

## Two Updates:

- *It was decided that the “Data Integration and Reconciliation” use case should be incorporated into the “Longitudinal Health Record” use case.*
- *The “Registries” use case was removed and added to the ongoing list of HIE Services.*

# Use Case Inventory: Part 6

*Session #7 (August 16)*

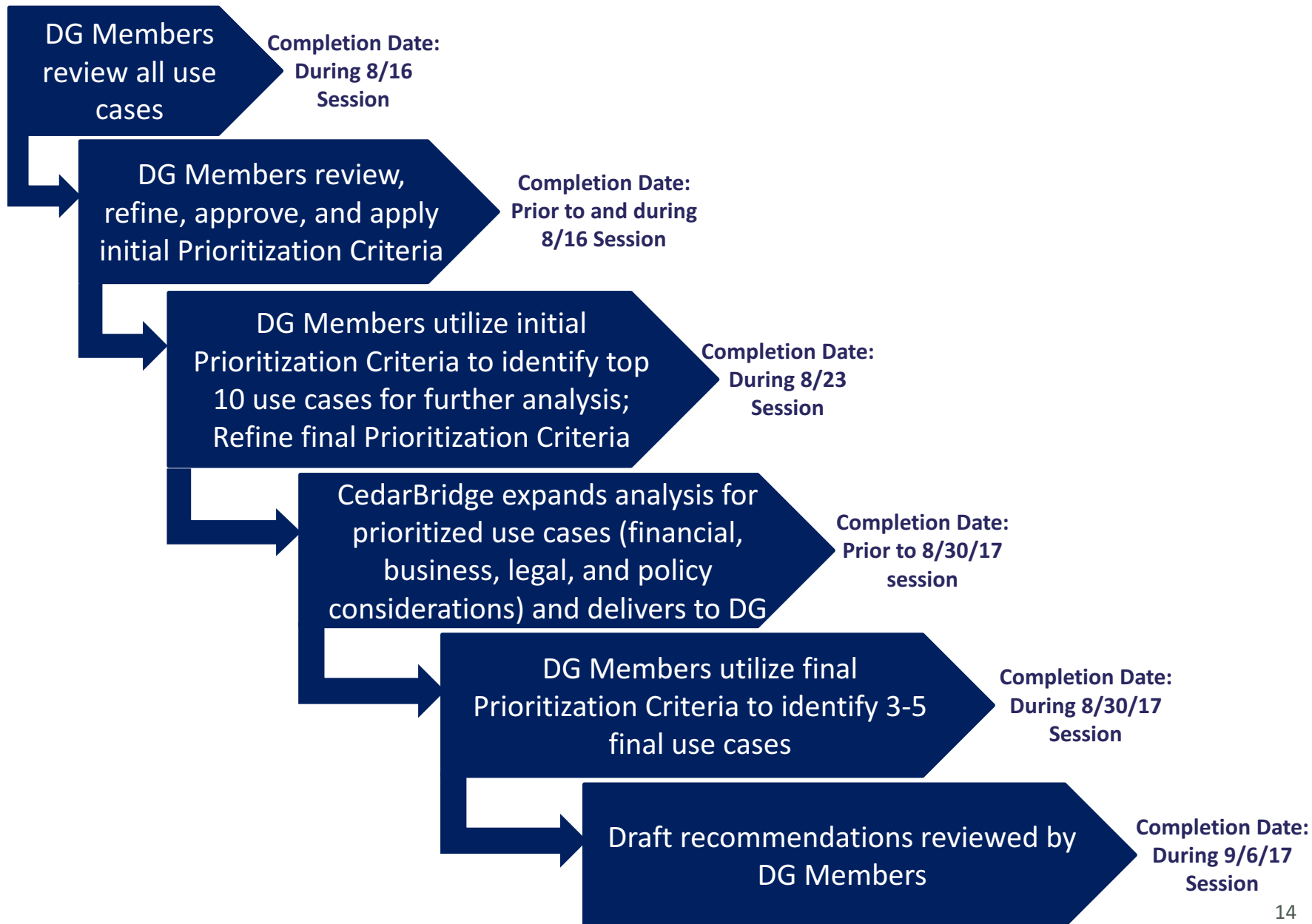
Use Case	Review
25. Emergency Medical Services (EMS)	8/16/17
26. Lab orders	8/16/17
27. Genomics	8/16/17
28. eConsult	8/16/17
<i>Any additional use cases</i>	8/16/17

# Use Case Discussion

# Use Case Prioritization Criteria

*Review and Discuss*

# Process of Use Case Prioritization & Finalization



# Initial Use Case Prioritization Criteria

## Prioritization Criteria

### 1. Value for Patients and Consumers

- Patient-centeredness
- Allows for patient preference, choice, and convenience
- Improves care coordination across continuum
- Enable entire care team to participate in a patient's care
- Improves patient safety

### 2. Value for Other Stakeholders (providers, community orgs, payers, employers, etc.)

- Define ROI, financial return, and value proposition for each stakeholder
- Alignment with organization goals and business requirements for stakeholders
  - Enable participation in value-based payment models
  - Improved access to information to improve clinical decision-making and care coordination
- Enable community organization and providers of social services

### 3. Workflow Impact

- Defined impact to clinical staff's workflows (positive or negative)
- Defined impact to administrative staff's workflows (positive or negative)
- Accessibility and level of effort

### 4. Ease of Implementation

- Implementation readiness / use case maturity
- Procurement process
- Speed of implementation (quick win)
- Complexity of business processes
- Timeline for realizing value proposition

# Initial Use Case Prioritization Criteria

## Prioritization Criteria

### 5. Integration, Maintenance, and Technical Assistance

- Define resource requirements necessary to support implementation and integration(s), including technical assistance and maintenance

### 6. Prerequisite Services

- Define services and infrastructure that is necessary to support use cases (basic care map, type of payload, type of transport, DURSA, technical and security standards, etc.)

### 7. Scalability

- Stand-alone use case vs. cluster (e.g. care coordination and longitudinal health record)
- Leverage HIE service as core component / infrastructure to support multiple use cases

### 8. Crosswalk to eCQM

- Alignment with eCQM business and functional requirements

### 9. Existing Infrastructure / Resources

- Does existing infrastructure meet the needs of stakeholders?
- Governance of existing infrastructure / resources
- Scalability of existing infrastructure / resources



# Next Steps

- Final Use Case Library Development (EMS, Lab Orders, Genomics, and eConsult)
- Refine and Update Prioritization Criteria – for approval on 8/16/17
- Next Meeting: Wednesday, August 16 at 2:30pm EDT



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