

Meeting Date	Meeting Time	Location
July 15, 2021	1:00 pm – 3:00 pm	Zoom Meeting Recording

Participant Name and Attendance

Cour	icil Members						
Josep	h Quaranta (Co-Chair)	Х	(Adam Prizio)	X	Lisa Stump		
			Ted Doolittle, OHA				
Victo (Co-C	ria Veltri, Interim OHS HITO hair)	X	Stacy Beck		Patrick Charmel		X
Joe S	tanford, DSS	Х	Robert Rioux		Alan Kaye, MD		Х
Elizat	eth Taylor, DMHAS	Х	David Fusco	X	Dina Berlyn		Х
Cindy	Butterfield, DCF	Х	Nicolangelo Scibelli	X	Cassandra Murphy		
•	ert Richeson for) onda Carlos, DOC	X	Patricia Checko	X	Chuck Podesta		
Vane	ssa Hinton, DPH	Х	Kimberly Martone, OHS	X	Ken Ferrucci		
Denn	is C. Mitchell, DDS	Х	William Petit, MD		Pareesa Charmchi Good	win	X
Mark	Raymond, CIO	Х	Jeanette DeJesus		Dr. Susan Israel		Х
Sandı	ra Czunas, OSC	Х	Robert Blundo, AHCT				
Supp	orting Leadership						
Tina l	Kumar, OHS	Х	Terry Bequette, CedarBridge	X	Tom Agresta, MD, UCon	n Health	X
Carol	Robinson, CedarBridge	Х	Kassi Miller, CedarBridge		Alan Fontes, UConn AIM	S	X
Vatsa	lla Pathy, CedarBridge	X	Craig Jones, CedarBridge				
Agen	ıda						
	Торіс		F	Respon	sible Party	Time	
1.	Welcome and Call to O	rder		Dr. Joe	Quaranta, Co-Chair	1:00	PM
	The regularly scheduled Thursday, July 15, 2021		eting of the Health Informatio webinar.	n Tech	nology Advisory Council	was held	l on
	Dr. Quaranta welcomed	d cou	incil members and called the r	neetin	g to order at 1:00 p.m.		
2.	Public Comment		1	Attend	ees	1:02	PM
	There was no public co	mme	ent.				
3.	Review and Approval o	of Mi	nutes June 17, 2021 (Council	Members	1:05	PM
	The review and approve	al of	the meeting minutes was post	tponed	to later in the meeting.		
4.	Advanced Planning Do Update	cum		-	equette, ridge Group	1:10	PM
	 meeting presentation her Highlights of the An overv 	<u>e</u>). e pre view	dge Group, provided the Adva sentation included: of funding requests being pre and role of HITAC			te (<u>see</u>	



	 Medicaid Enterprise System (MES) funding parameters Current funding requests – initiatives and costs The Council discussed the presentation. There was a question about CRISP and whether what is being built would be a model and a clone of the state of Maryland's. It was stated that CRISP is the technology backbone, and the technology and functionality is what will be implemented in Connecticut as Connie. A concern was expressed about how much time has been spent on finding one to do and that the pace did not move a little faster. There was also a question about why there is no longer outside funding for onboarding providers, how much was used for this year, and whether providers are fully subscribed. It was noted that for this year there was approximately 9.9 million in technical assistance dollars that could be drawn down on. A milestone-based program has been implemented. The breakdown of the dollars for what has been distributed and the dollars amount yet to be distributed can be shared. It was noted that the amounts will not be fully subscribed to the \$9.9 million level and important for the Council to see the numbers. There was a suggestion to share with the Council how much money was subscribed, where funds went, and the costs to onboard providers.
	presentation, please see the meeting recording link below.
	https://ctvideo.ct.gov/ohs/HITAC_Mtg_Recording_071521.mp4 Review and Approval of Minutes June 17, 2021 Council Members
	At this time, member attendance was taken by roll call. It was determined that a quorum
	 had been established. Dr. Quaranta asked for a motion to approve the June 17, 2021, Health IT Advisory Council meeting minutes. Mark Raymond created the motion. Victoria Veltri seconded. There was no discussion. The minutes were approved.
5.	Health Information Exchange Strategies from Other StatesCarol Robinson, CEO, Vatsala Pathy, Senior Director, CedarBridge Group1:35 PM
	 Carol Robinson of the CedarBridge Group presented on the Health Information Exchange Strategies from Other States. A definitional guide of sustained permanence of Connie's HIE Services was provided. It was noted that HITAC serves an important, ongoing advisory role per Connecticut General Statute 17b-59a(3)(c) A few of the policies, incentives, regulations, requirements, strategies, and services supported by stakeholders and offered by HIEs in other states was provided. There was a question regarding the bidirectional aspect and whether other states have total patient access as is required under the Connecticut statute. It was mentioned that some research and comparative analysis could be done over time during this planning process. Comments were made in the Zoom chat feature (see comments here).



6.	Findings and Draft Recommendations for	Vatsala Pathy, Senior Director,	1:55 PM
	Connecticut's Five-Year Statewide Health IT Plan	CedarBridge Group	
	Vatsala Pathy, of CedarBridge, presented on the fi	ndings and draft recommendations for	
	Connecticut's Five-Year Statewide Health IT Plan.		
	 The draft recommendations are intended t 		
	The Connecticut General Statute requires t		
	environmental scan (eScan) is the first step		an.
	 The process and timeline for the Statewide It was mentioned that some revisions have 		ana sinaa
	It was mentioned that some revisions have the last HITAC meeting. The Council discuss		
		for Widespread Use and Sustainability of	
		d Strategies to Address Social Determin	
	Health	J	
	 Recommendation 3: Service Cod 	ordination and Data Integration Across S	tate
	Agencies		
		loption of Electronic Health Records and	I HIE
	Services by Behavioral Health Pr		anactad
	Through Connie	sible Medication History HIE Service, Cor	inected
		rmation Privacy to Protect Individuals a	nd
	Families		
	 Next steps were reviewed and include a 30 webinars, finalize the recommendations and 		e feedback
	prioritization plan, establish an interagency		ons related
	to state agencies, and finalize implementat	ion plan with consideration of sustainat	oility
	strategies timing. There was a suggestion to	o utilize existing state structures rather	than
	creating a new interagency workgroup.		
	 Council members made comments in the Z 		
	a suggestion that the language on HIE shou patient should be represented in all aspect	-	
	changes would be made to the language to		iy salu the
	Dr. Quaranta thanked Ms. Pathy for the in-depth p		l, for more
	information please see the link below.		
	https://ctvideo.ct.gov/ohs/HITAC Mtg Recording	<u>071521.mp4</u>	
7.	Connie Update	Jenn Searls, Executive Director	2:15 PN
	 John Soprie procented the Constant data 	Connie	
	 Jenn Searls presented the Connie update. 		



 Connie reached out to the Consumer Advisory Council a participate on the Patient Access Task Force. Adam Prizi Advocate was recently added to the committee. There was no discussion on the presentation. Dr. Quaranta thanked Ms. Searls for the presentation, for more below. <u>https://ctvideo.ct.gov/ohs/HITAC Mtg Recording 071521.mp4</u> 8. Announcements & General Discussion Dr. Joe Counce Dr. Quaranta opened the floor for announcements and g There was no additional announcements or discussion. 9. Wrap up and Meeting Adjournment
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 Connie is continuing the work of technical onboarding with the provided and shared. It was noted that there are 32 new signers this month of to the next stage and phase of technical onboarding. Work has started with a Patient Access Task Force to de requisite technology and, to figure out the technology to Connie reached out to the Consumer Advisory Council and the provided and share to the Consumer Advisory Council and the provided and the technology to Consider the technology to Consider the technology and the technology to Consider the technology to Consider the technology to Consider the technology and the technology to Consider the technology and the technology to Consider the technology to Consider the technology to Consider the technology and the technology to Consider the technology and the technology to Consider the technology to Conside

Meeting information is located at: https://portal.ct.gov/OHS/HIT-Work-Groups/Health-IT- Advisory-Council