

Health IT Advisory Council

August 15, 2019



Agenda

Agenda Item	Time
Welcome and Call to Order	1:00 pm
Public Comment	1:05 pm
Review and Approval of Minutes – May 16, 2019 and July 18, 2019	1:10 pm
Update on SUPPORT Act (HR 6, Section 5042)	1:15 pm
Update on IAPD Status	1:45 pm
Overview of APCD Data Privacy and Security Subcommittee Final Report	2:00 pm
Update on Consent Policy Design Group	2:15 pm
Update on HIE Entity	2:30 pm
Overview of Healthscore CT Website	2:45 pm
Wrap-up and Meeting Adjournment	2:50 pm

Welcome and Call to Order

Public Comment

(2 minutes per commenter)

Review and Approval of:

May 16, 2019 and July 18, 2019 Meeting Minutes

Update on SUPPORT Act (HR 6, Section 5042) Planning

Allan Hackney, Office of Health Strategy

H.R.6 – SUPPORT for Patients and Communities Act

H. R. 6

One Hundred Fifteenth Congress
of the
United States of America

AT THE SECOND SESSION

Began and held at the City of Washington on Wednesday,
the third day of January, two thousand and eighteen

An Act

To provide for opioid use disorder prevention, recovery, and treatment, and for other purposes.

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. SHORT TITLE; TABLE OF CONTENTS.

(a) SHORT TITLE.—This Act may be cited as the “Substance Use–Disorder Prevention that Promotes Opioid Recovery and Treatment for Patients and Communities Act” or the “SUPPORT for Patients and Communities Act”.

(b) TABLE OF CONTENTS.—The table of contents of this Act is as follows:

Sec. 1. Short title; table of contents.

TITLE I—MEDICAID PROVISIONS TO ADDRESS THE OPIOID CRISIS

- Sec. 1001. At-risk youth Medicaid protection.
- Sec. 1002. Health insurance for former foster youth.
- Sec. 1003. Demonstration project to increase substance use provider capacity under the Medicaid program.
- Sec. 1004. Medicaid drug review and utilization.
- Sec. 1005. Guidance to improve care for infants with neonatal abstinence syndrome and their mothers; GAO study on gaps in Medicaid coverage for pregnant and postpartum women with substance use disorder.
- Sec. 1006. Medicaid health homes for substance-use-disorder Medicaid enrollees.
- Sec. 1007. Caring recovery for infants and babies.
- Sec. 1008. Peer support enhancement and evaluation review.
- Sec. 1009. Medicaid substance use disorder treatment via telehealth.
- Sec. 1010. Enhancing patient access to non-opioid treatment options.
- Sec. 1011. Assessing barriers to opioid use disorder treatment.
- Sec. 1012. Help for moms and babies.
- Sec. 1013. Securing flexibility to treat substance use disorders.
- Sec. 1014. MACPAC study and report on MAT utilization controls under State Medicaid programs.
- Sec. 1015. Opioid addiction treatment programs enhancement.
- Sec. 1016. Better data sharing to combat the opioid crisis.
- Sec. 1017. Report on innovative State initiatives and strategies to provide housing-related services and supports to individuals struggling with substance use disorders under Medicaid.
- Sec. 1018. Technical assistance and support for innovative State strategies to provide housing-related supports under Medicaid.

TITLE II—MEDICARE PROVISIONS TO ADDRESS THE OPIOID CRISIS

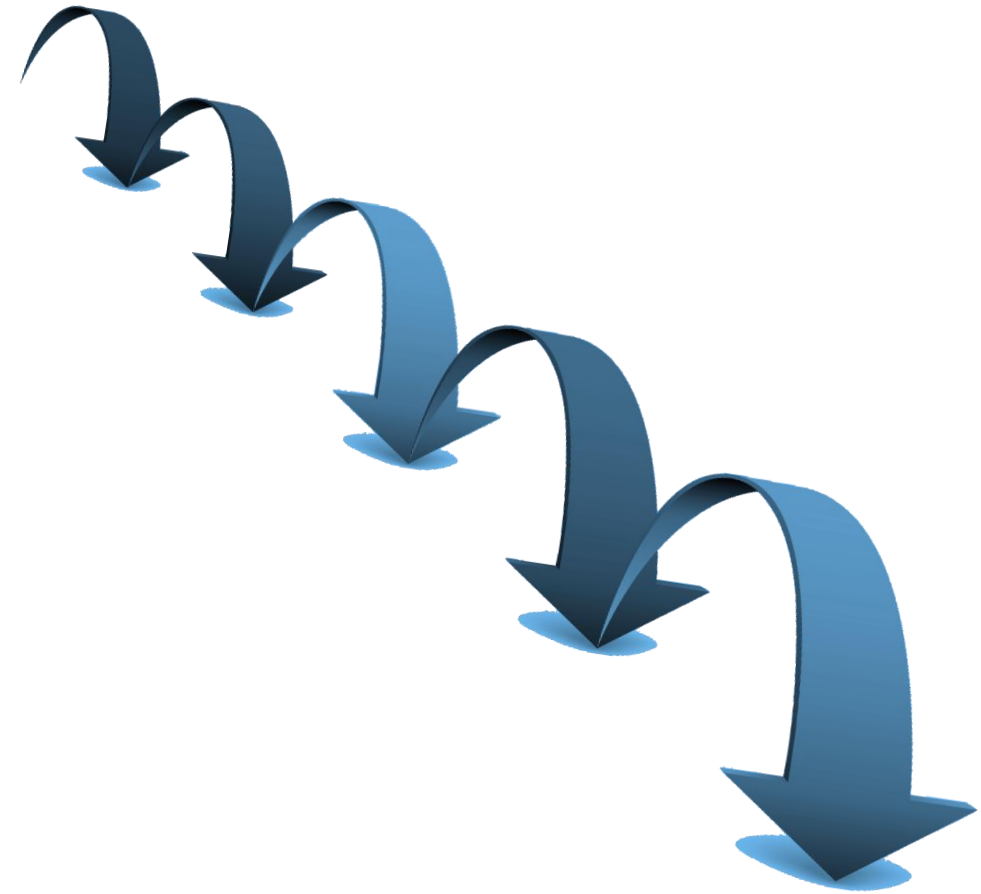
- Sec. 2001. Expanding the use of telehealth services for the treatment of opioid use disorder and other substance use disorders.
- Sec. 2002. Comprehensive screenings for seniors.
- Sec. 2003. Every prescription conveyed securely.
- Sec. 2004. Requiring prescription drug plan sponsors under Medicare to establish drug management programs for at-risk beneficiaries.
- Sec. 2005. Medicare coverage of certain services furnished by opioid treatment programs.
- Sec. 2006. Encouraging appropriate prescribing under Medicare for victims of opioid overdose.

- *Improved access to long-term treatment*
- *Focus on opioid over-prescribing*
- *Tracking synthetic opioids*
- *Expansion of access to medication-assisted treatment*
- *Community support services*
- *Resources for research and education*



Planning Process

- ✓ Establish OHS and DCP leadership group
 - Background data gathering
 - Draft of straw man
 - Communication with CMS
- ✓ Establish multi-agency planning group
 - Review opportunities
 - Establish priorities
 - Identify list of potential projects
- Proposal Development
 - ☐ Team
 - DSS
 - OHS
 - DCP
 - Support by CedarBridge Group
 - ☐ Parameters
 - Planning
 - Funding request
 - Timing
- Submit funding request to CMS



Update on Current Progress and Next Steps

- Active collaboration with other New England states, including Rhode Island
- Funding request will focus on necessary support for planning activities, as well as any activity required to ensure PDMP is "qualified" per the federal legislative requirements
- Small team of OHS and DCP staff are developing the initial proposal, with CedarBridge facilitation and support (target: August 30th)
- Funding request document will be drafted by CedarBridge Group, with guidance from DSS (Target: September 13th)
- Health IT Advisory Council to review funding request (Target: September 18th Advisory Council meeting)
- DSS will submit the funding request (Target: September 27th)

Questions & Discussion

Update on IAPD Status

Joe Stanford, Department of Social Services

Overview of APCD Data Privacy and Security Subcommittee Recommendations

Dawn Bonder, CedarBridge Group

APCD Data Privacy & Security (DPS) Subcommittee

- A review of applicable data privacy, data security, and data release policies and procedures is required to ensure incorporation of OHS' APCD requirements and strategy considerations.
- Charge of the DPS Subcommittee
 - Review APCD privacy, security, and data release policy practices from other states
 - Review current or anticipated concerns from data recipients, OHS staff, etc.
 - Review and revise existing APCD policies to reflect the changes necessitated by Public Act 17-2, as amended by Public Act 18-91
 - Present recommendations to the APCD Advisory Group for review and affirmation

Subcommittee Members

- Dr. Robert Scalettar (Chair) – RES Health Strategies / Access Health CT Board Member
- Ted Doolittle – Office of the Healthcare Advocate
- Matthew Katz – Connecticut State Medical Society
- Joshua Wojcik – Office of the State Comptroller
- Pat Checko – Representing the Data Release Committee
- James Iacobellis – Connecticut Hospital Association
- Bernie Inskeep – United Health Group
- Krista Cattanach – Aetna
- Dr. Victor Villagra – University of Connecticut Health, Health Disparities Institute

The Support Team

State of Connecticut

Allan Hackney - Office of Health Strategy
Health Information Technology Officer

Adrian Texidor – Office of Health Strategy
Health Information Technology Program Manager

Tina Kumar – Office of Health Strategy
Consumer Information Representative

Rob Blundo – Access Health CT (*until 6/30/19*)
Director, Technical Operations & Analytics

CedarBridge Group

Carol Robinson
Michael Matthews, MPH
Chris Robinson
Mark Hetz, MBA
Dawn Bonder, JD
Sheetal Shah, MPH

Overview of Meeting Schedule / Workplan

Meeting Goal & Focus	Meeting Materials
<p>Meeting #1 (April 26, 9am – 10am) – Kick-off and Orientation</p> <ul style="list-style-type: none"> Review and discuss project charter Discuss proposed process/workplan for achieving desired outcomes Orientation on Environmental Scan and current policies and procedures for data privacy / release 	<ul style="list-style-type: none"> Existing data privacy policies and procedures Environmental Scan of other APCD initiatives
<p>Meeting #2 (May 3, 9am – 10am) – Consider Current State of Data Privacy Policies</p> <ul style="list-style-type: none"> Evaluate current APCD data privacy policies Consider new APCD policies to enhance program’s effectiveness and efficiency 	<ul style="list-style-type: none"> Draft decision criteria Evaluation matrix
<p>Meeting #3 (May 17, 9am – 10am) – Consider Current Data Release Practices</p> <ul style="list-style-type: none"> Evaluate current data release policies and procedures Consider new policies/procedures to enhance effectiveness and efficiency Examine potential for APCD data to support approved use cases 	<ul style="list-style-type: none"> Existing data release policies and procedures Application summary
<p>Meeting #4 (May 31, 9am – 10:30 am) – Review Privacy Policy & Recommendations</p>	<ul style="list-style-type: none"> Draft recommendations
<p>Meeting #5 (June 14, 9am – 10:30 am) – Review Privacy Policy & Recommendations</p>	<ul style="list-style-type: none"> Draft recommendations
<p>Meeting #6 (June 28, 9am – 10:30 am) – Review Privacy Policy & Recommendations</p>	<ul style="list-style-type: none"> Draft recommendations
<p>Meeting #7 (July 12, 9am-10am) – Finalize Recommendations</p>	<ul style="list-style-type: none"> Finalize recommendations

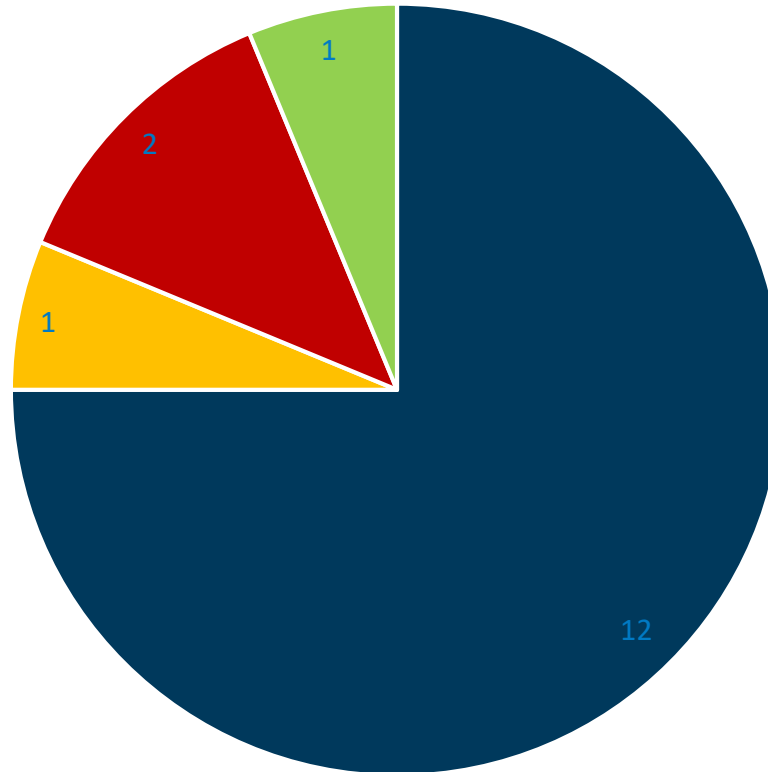
Environmental Scan Trends and Observations

- The environmental scan highlighted the need for states to be cognizant of the levels of stakeholder trust, confidence, and commitment to an APCD program
- Trust of stakeholders is essential in order to find consensus positions on data collection and on data availability for a variety of purposes
 - Trust in APCD data quality
 - Trust in accuracy of data reports from APCD program
 - Trust in the processes used to develop policies and procedures for the APCD program
 - Trust in the application of policies and procedures by the APCD program
 - Trust in the fairness of APCD data availability and data use policies and procedures
- As trust and confidence of stakeholders in an APCD program builds, new opportunities for expanding the use of APCD data can be considered
- As additional uses of APCD data are accepted by stakeholders, the value of APCD data will be more apparent, and support for funding of an APCD program will increase

Value = Sustainability

Application Disposition Overview

*15 applications received to date



■ Approved ■ Not Approved ■ Scheduled for DRC Review ■ Submitted to APCD

Deep-Dive Review of Existing Policy

Green – keep as is
 Red – delete
 Blue – move to procedure document
 Orange – discuss in more detail

As approved by the Board of Directors on February 18, 2016

Access Health CT

All-Payer Claims Database (APCD) Privacy Policy and Procedure

1. Purpose of Policy.

a. APCD Legislative Mandate and History. Public Act 13-247 enabled the Exchange's creation of the Connecticut All-Payer Claims Database ("APCD"). Pursuant to Public Act 13-247, various Data Submitters are required to report healthcare information to the Exchange for inclusion in the APCD. The Act allows the Exchange: (i) to utilize healthcare information collected from Data Submitters to provide healthcare consumers in Connecticut with information concerning the cost and quality of healthcare services that allows such consumers to make more informed healthcare decisions; and (ii) to disclose Data to state agencies, insurers, employers, healthcare providers, consumers, researchers and others for purposes of reviewing such Data as it relates to health care utilization, costs or quality of healthcare ~~services~~.

b. Purpose of the Policy. The purpose of this Policy is to ensure the integrity, security and appropriate use and disclosure of Data. ~~More specifically, this Policy sets forth the process and procedure by which the Exchange will accept, review and evaluate applications from third parties requesting access to the Data in a manner consistent with the Act.~~

2. Definitions

a. "Act" means Connecticut General Statutes Sections 38a-1090 and 38a-1091, ~~as~~ amended from time to time.

b. "Advisory Group" shall mean the All-Payer Claims Database Advisory Group established pursuant to the Act.

c. "APCD" means the Connecticut All-Payer Claims Database established by the Act, and created and maintained by the Exchange.

d. "APCD Personnel" means those Exchange employees, agents and contractors (other than the contractor responsible for receiving healthcare information from the Data Submitters) whom the Executive Director

Dawn Bonder
 Add citation for legislation authorizing the APCD to move from Exchange to OHS.

Dawn Bonder
 Consider adding language re: balance of protection data privacy and security and meeting legislative mandate in a manner that maximizes the opportunity to derive value from APCD data.

Dawn Bonder
 All definitions will be changed to reflect shift from Exchange to OHS Oversight and the Executive Director to the Health Information Technology Officer ("HITO").

Dawn Bonder
 Add citation for legislation authorizing move from Exchange to OHS.

- Line-by-line evaluation of existing Privacy Policy and Procedures
- Subcommittee members discussed and analyzed the policy purpose, Committee composition, data application process, data release process, data use, and disclosure

Final Recommendations

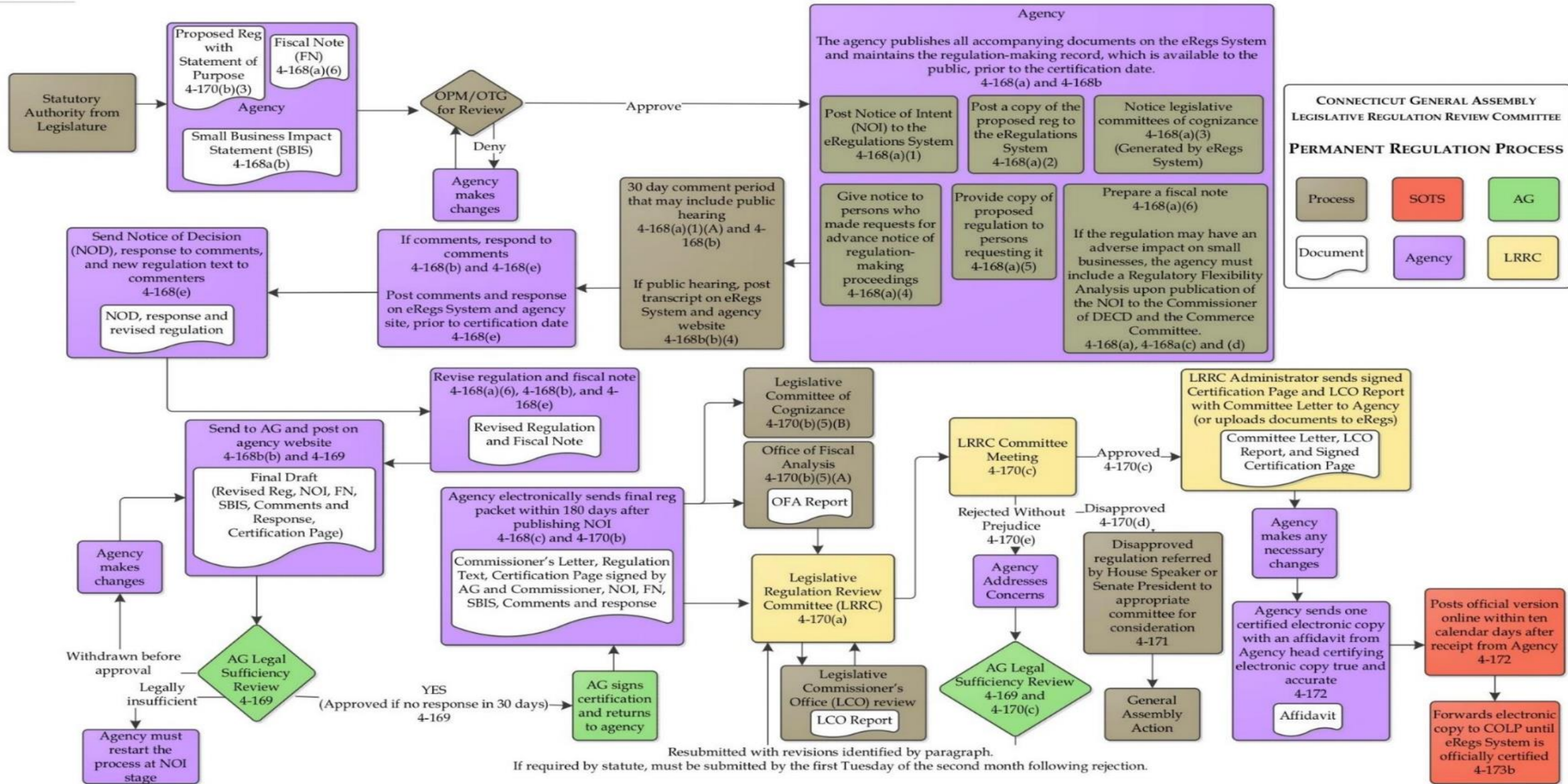
Changes to the revised Privacy Policy and Procedures include:

- Purpose of Policy
- Additions, deletions, and modifications to definitions, titles, roles, and responsibilities
- Data Release Committee Composition
- Coordination between the DRC and APCD Advisory Group
- APCD Advisory Group annual evaluation of the DRC
- Removal of processes and procedures from the policy and creation of OHS processes and procedures

APCD Advisory Group Meeting – August 8, 2019

- Affirmed recommendations of the Data Privacy and Security Subcommittee
- Added Chair of DRC as a member of the APCD Advisory Group
- Acknowledged the topics for future discussion

CT Regulatory Process



Topics for Further Discussion

- The DPS Subcommittee recommended further discussion of the following topics by the APCD Advisory Group:
 - Types of APCD data released
 - Participation in national consortiums
 - Data Privacy and Security Subcommittee charge moving forward

Questions & Discussion

Consent Policy Design Group

Allan Hackney, Office of Health Strategy

The Consent Policy Design Group

- Stacy Beck, RN, BSN* – Anthem / Clinical Quality Program Director
- Pat Checko, DrPH* – Consumer Advocate
- Carrie Gray, MSIA – UConn Health / HIPAA Security Officer
- Susan Israel, MD – Patient Privacy Advocate / Psychiatrist
- Rob Rioux, MA* – CHCACT / Network Director
- Rachel Rudnick, JD – UConn / AVP, Chief Privacy Officer
- Nic Scibelli, MSW* – Wheeler Clinic / CIO

* Health IT Advisory Council Member

The Support Team

State of Connecticut

Allan Hackney

Health Information Technology Officer

Chair, HIT Advisory Council

Sean Fogarty, HIT Program Manager

Tina Kumar, HIT Stakeholder Engagement

CedarBridge Group

Carol Robinson

Michael Matthews, MSPH

Ross Martin, MD, MHA

Chris Robinson

Velatura

Tim Pletcher, DHA, MS

Lisa Moon, PhD, RN

Consent Policy Design Group Update

- Meetings held on July 9 and July 13
- Review of trust framework by HITO
- Review of Use Case Factory
- Discussion of intersection of use cases and consent policy
- Upcoming:
 - Further discussion with HITO regarding trust framework and use cases
 - Discussion of process and structure of consent policy development
 - Scheduling of future meetings

Questions & Discussion

Update on HIE Entity

Allan Hackney, Office of Health Strategy

Overview of Healthscore CT Website

Adrian Texidor, Office of Health Strategy

Contact:

Media related inquiries: Juliet Manalan, Communications Director, OHS

Juliet.Manalan@ct.gov

Additional questions: Stephanie Burnham, SIM, OHS Stephanie.Burnham@ct.gov

Wrap up and Next Steps

Contact Information

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General E-Mail, HITO@ct.gov

Health IT Advisory Council Website:

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