

Health Care Cabinet

Five-Year Statewide Health IT Plan Development Presentation

September 21, 2021



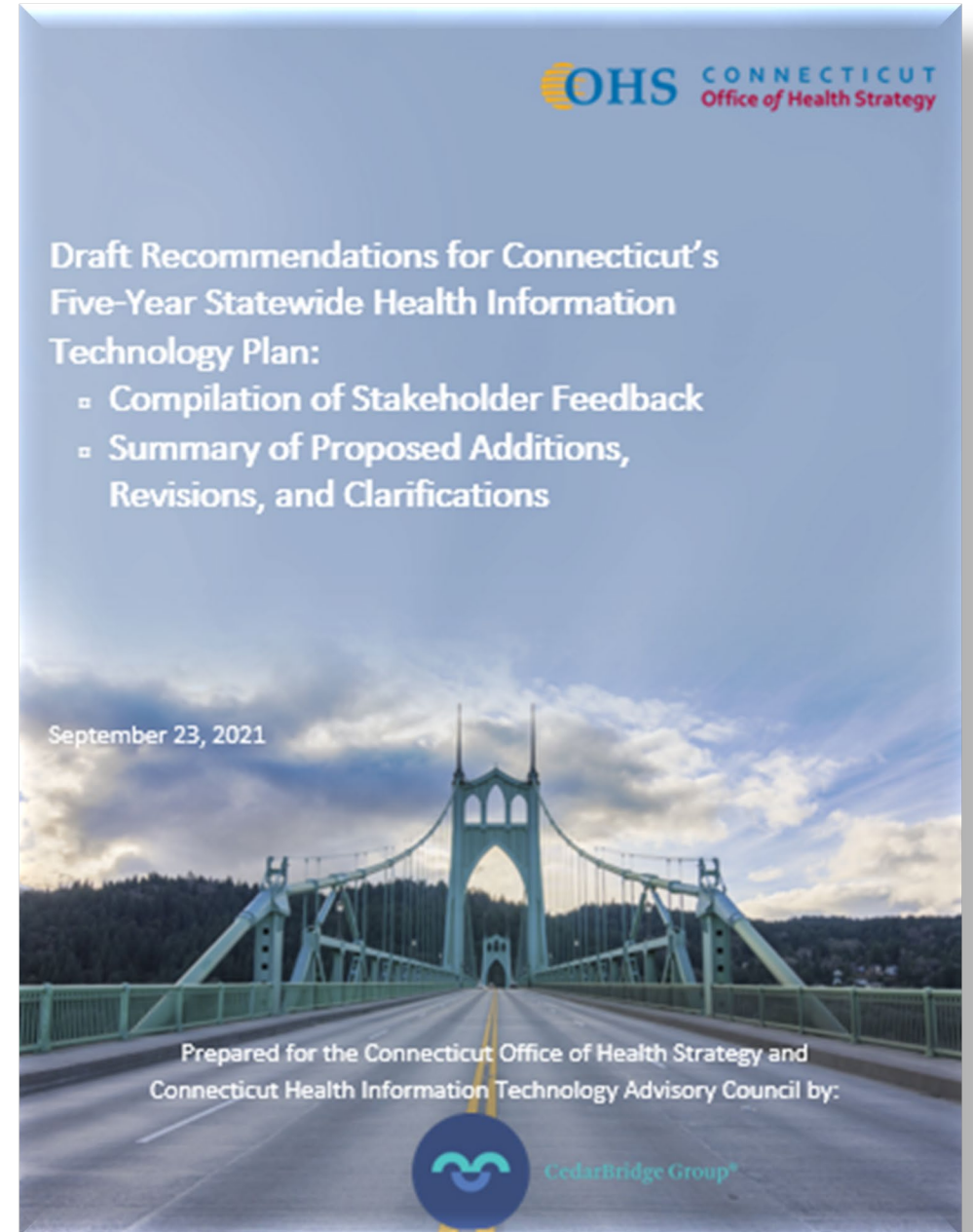
Five-Year Statewide Health IT Plan Development

Environmental Scan Recommendations:
Summary of Feedback Report

Implementation Planning Discussion
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Environmental Scan and Draft Recommendations - Summary of Feedback Report

- A detailed *Summary of Feedback Report* is available with your meeting materials
- Report summarizes feedback received through public comments, interactive webinars, and from OHS workgroups incl. HITAC
- Today's discussion will highlight key feedback and proposed incorporation of feedback for the Five-Year Statewide Health IT Plan
- Discussion on sequenced implementation of each Health IT Plan element identified in recommendations



Public Comment and Feedback on Draft Recommendations

145 Comments Received from 38 Stakeholders

3 Interactive Feedback Webinars

- ✓ 25 attendees

Public Comment Period (July 14th – Aug. 13th)

- ✓ 35 public comments received from 8 organizations/ individuals

HITAC and OHS Workgroup Meetings

- ✓ June & July HITAC meetings
- ✓ Medication Reconciliation and Polypharmacy Committee July meeting
- ✓ Primary Care Workgroup & Community Health Subgroup

State Agency Meetings

- ✓ Department of Public Health
- ✓ Office of Policy & Management
- ✓ Department of Consumer Protection
- ✓ Department of Social Services

Connie Meeting

- ✓ Executive Director

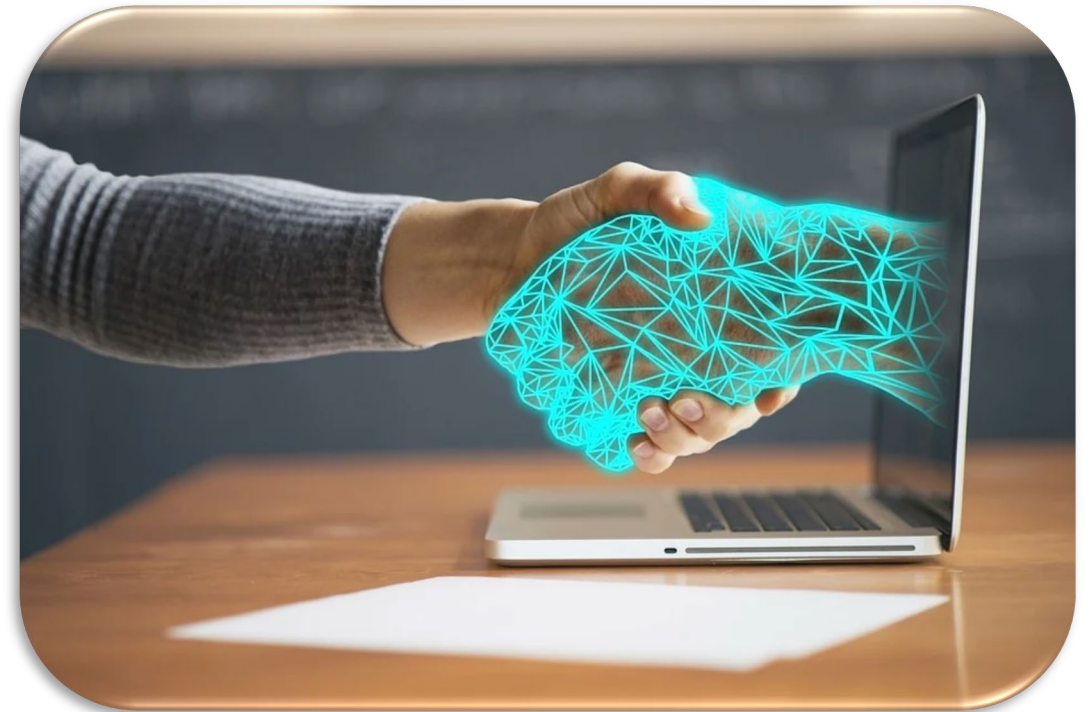
General Feedback on Draft Recommendations



- A. Ensure all recommendations explicitly incorporate principles for whole person-centered care and reflect “Patients as the North Star”
- B. Add consumer/patient representation on all proposed workgroups and committees
- C. Add provider education, oversight, and monitoring protocols to prevent information blocking by healthcare entities*
- D. Prioritize consumer access to their own health information through development of a consumer-facing portal within the Connie infrastructure

Incorporating General Feedback on Draft Recommendations

- A. “Patients as the North Star”: implementation details more explicitly addressing *how* activities will produce value for patients and families
- B. Add consumer representation on proposed workgroups:
 - ✓ HHS Patient Centered Services Collaborative
 - ✓ State Agency Data Collaborative
 - ✓ HITAC HIE Sustainability Workgroup
 - ✓ HITAC SDoH Screening & Data Design Group
 - ✓ Public Health Interoperability Workgroup
- C. Prevent information blocking: added to recommendations on Connie for OHS to conduct education campaign and monitor compliance
- D. Patient access to their health info.: added recommendation for Connie to prioritize development of patient portal without fees or other barriers





Elements of the Health IT Plan

HIE /Connie

- Prioritize patient portal use case in Connie
- Sustainability Workgroup chartered by HITAC
- Educate stakeholders and monitor compliance with Information Blocking Rules
- Survey for ADT notification preferences
- Evaluate use of Connie for centralized VBP and reporting functions

Social Determinants of Health

- Evaluate SDoH screening tools and pilot social needs screening and data mapping processes for community information exchange (CIE)
- Align with national standards
- Integrate race, ethnicity, and language data with a Health Equity Dashboard
- Invest in IT infrastructure and staffing for community-based organizations

Interagency Data Sharing

- Implement standard legal agreements for interagency data sharing
- Establish HHS Person-Centered Services Collaborative
- Establish best practices for interagency data sharing
- Evaluate centralized public health gateway Evaluate interface technology to support interoperability

Behavioral Health IT Challenges

- Listening sessions with behavioral health providers on EHR/HIE adoption challenges
- State agency educational campaign
- State-funded technical assistance
- Financial incentives for data exchange and quality reporting

Best Possible Medication History

- Explore expansion of Prescription Drug Monitoring Program (PDMP) and other medication fill data sources
- Establish single sign-on capabilities to PDMP
- Develop a Best Possible Medication History (BPMH) service in Connie

Health Information Privacy

- Video series on information sharing
- Educational materials for providers on consent management
- Town hall meetings to facilitate consumer engagement
- Establish Patient Health Information Protection Office

Strategies for Widespread Use and Sustainability of Connie



Feedback

1. With few exceptions, stakeholders support a public utility management model of master patient and provider demographic information
 - Connecticut Hospital Association (CHA) challenged the recommendation of a “public utility model, suggesting the strategy would require fees on providers
2. Stakeholders agree that analytics would be a good use case for Connie’s sustainability
3. Support for data exchange among community-based organizations and social services agencies
4. CHA disagreed with recommendation for a single ADT notification system
5. Some disagreement around where a public health gateway should be hosted (Dept. of Public Health vs. Connie)
6. Connie should engage users in comprehensive design and testing processes for services on the platform

Strategies for Widespread Use and Sustainability of Connie



HITAC HIE Sustainability Workgroup

- Provide advice to the OHS Executive Director and the HITO.
- Evaluate sustainability strategies of long-standing HIEs nationwide
- Develop a comparative analysis showing where savings are accrued across domains,
- Recommend executive, legislative, agency, and program-level actions

Value-Based Care Data Strategies and Support

- OHS to engage ACOs and primary care workgroup
- Evaluate Connie as a centralized clinical quality measurement and reporting service
- Support providers’ participation in value-based payment models

Survey on ADT Notification Systems

- Conducting a survey of users assessing satisfaction with current system
- Consider a Request for Information process to evaluate options for connecting multiple notification systems through a master data management service with application program interfaces (APIs).

ONC Information Blocking Final Rule

- OHS to conduct a provider education campaign
- Encourage greater portability and interoperability of patient health information.
- Should be followed by clear guidelines for how compliance with the information blocking rules will be monitored and enforced.

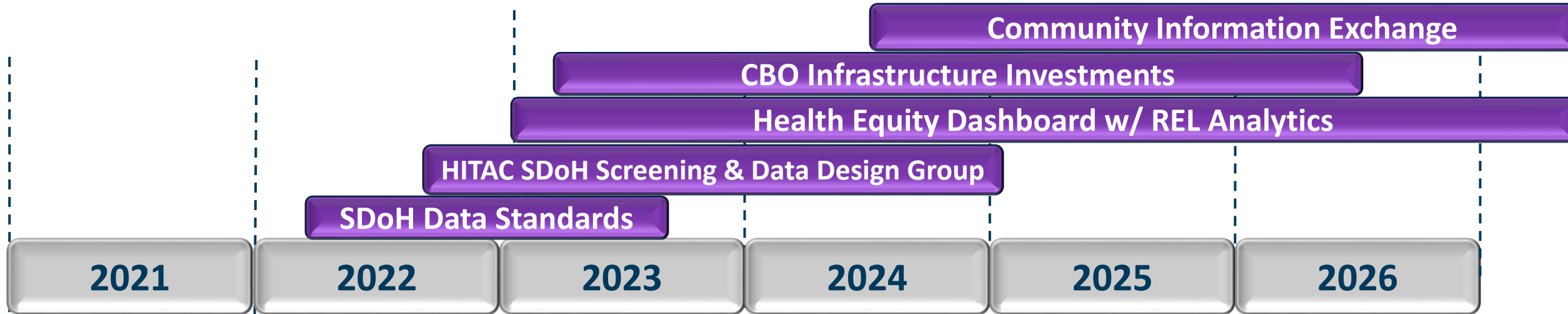
Systems and Strategies to Address Social Determinants of Health



Feedback

1. Staunch support for increased state funding and technical support of community-based organizations.
2. Desire to maintain flexibility in in administering social needs screening tools, but stakeholders generally supported standardization of SDoH data to make data actionable and measurable.
3. Intensive community-level engagement will be required for CIE planning, along with meaningful opportunities for involvement
4. Varying preferences for which existing technologies to leverage for CIE development; hospitals prefer expanding the Unite Connecticut referral management platform, other stakeholders would prefer to explore using Connie or United Way 211
5. Incorporate the ability to collect patients' insurance status and geocoded residential address, along with Race, Ethnicity, Language (REL) data, and develop a Health Equity Dashboard

Systems and Strategies to Address Social Determinants of Health



SDoH Data Standards

- Align with efforts to develop national standards
- Examples: The Gravity Project , SIREN

Infrastructure and Staffing Investments

- Ensure adequate funding for hiring and training personnel to manage and operate technology assets
- Provide funding for ongoing education and technical assistance to ensure a technically competent workforce.

Health Equity Dashboard

- Facilitate broad collection of REL data
- Develop holistic strategy to address health disparities
- Create a Health Equity Dashboard to understand prevalence of specific health disparities
- Evaluate the effectiveness of interventions

HITAC SDoH Screening & Data Design Group

- Analyze current screening tools in use in Connecticut
- Evaluate technology options for mapping similar data elements to common standards
- Engage stakeholders to consider available options
- Develop proof-of-concept pilots

Community Information Exchange

- Explore the development of a community information exchange
- Leverage state resources: Connie, Health Enhancement Communities, Unite Connecticut, the Homeless Management Information System, and 2-1-1 Referral Directory

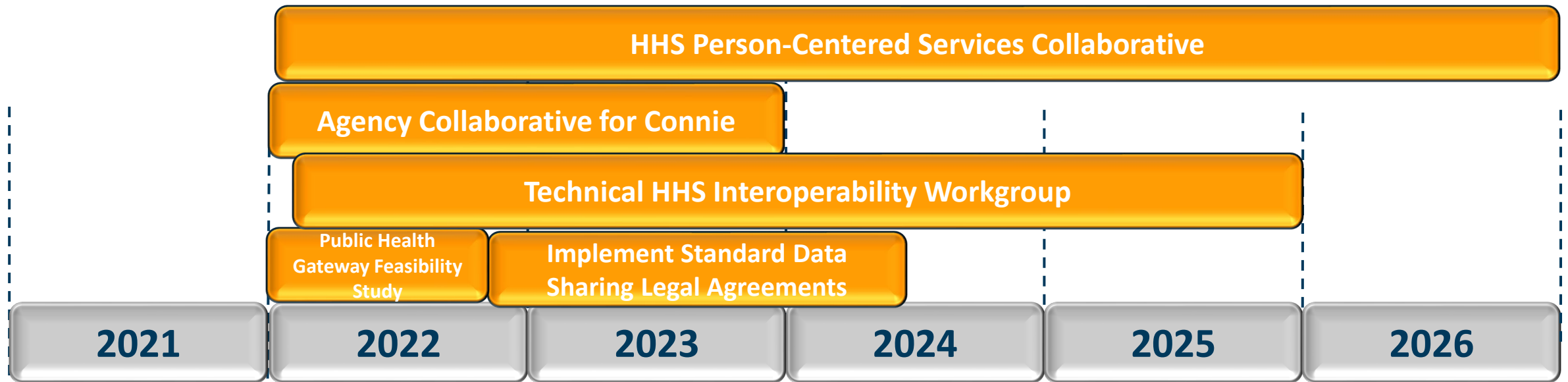
Service Coordination and Data Integration Across State Agencies



Feedback

1. Need consent management protocols for sharing sensitive data between agencies and programs
2. Privacy and security protocols must adhere to state and federal regulations— more analysis is needed at the agency and program level
3. Build on, align with, and/or complement existing initiatives
4. All work on interagency data sharing must be highly coordinated with the Office of Policy and Management and the Connecticut Attorney General

Service Coordination and Data Integration Across State Agencies



Evaluate Public Health Gateway

- Survey providers and local health departments to determine the highest priority information systems for bidirectional connectivity through a gateway interface.
- Evaluate pros and cons for managing a gateway interface within DPH vs Connie.

Technical HHS Interoperability Workgroup

- Charter a technical workgroup
- Develop standards for state agencies when procuring new IT or updating legacy IT
- Focus on Dept. of Health first to meet federal interoperability requirements

HHS Person-Centered Services Collaborative

- Build on prior interagency initiatives
- Identify scenarios where individuals receive services from multiple agencies
- Conduct proof-of-concept pilots
- Develop consent management protocols

Standardized Data Sharing Legal Agreements

- Build on previous work
- Develop policies and repeatable processes to lower the barriers

Agency Collaborative on Connie

- State agency data collaborative to explore connections of agency data systems to Connie

Support Adoption of EHR and HIE Services by Behavioral Health Providers



Feedback

- Stakeholder feedback underscored the importance of understanding the concerns expressed by behavioral health providers during the environmental scan about the legal barriers to sharing behavioral health data in Connecticut, as well as understand patient perspectives around how data sharing may adversely impact patient trust of their behavioral health providers.

Support Adoption of EHR and HIE Services by Behavioral Health Providers



Behavioral Health IT / HIE Education Campaign

- Conduct listening sessions to understand unique challenges of BH providers and their patients, as they are considering adoption of EHR and HIE services
- Develop and implement an educational campaign for BH providers on the value of care integration, and value of data sharing to improve care
- Address privacy concerns and potential associated liability.

Financial Incentives for Behavioral Health Providers

Financial incentives for data exchange and quality reporting should be included in payer contracts, including those executed by self-insured employers and Medicaid.

Behavioral Health Technical Assistance and Training on Health IT

Funding from the state budget should be earmarked for technical assistance and ongoing training for behavioral health providers to support the transition to more integrated models of care where electronic closed loop referrals and bidirectional data exchange are required.

A Best Possible Medication History, Connected Through Connie



Feedback

1. Webinar participants expressed support for the exploration of medication fill data sources for a Best Possible Medication History use case in Connie
2. MRPC members indicated PDMP as a medication fill data source may be putting a solution before the necessary research that is required; additional research all medication fill sources is being conducted.
3. Connecticut Hospital Association supports exploring more complete medication fill data sources but cautioned against disrupting the PDMP's efficient functions.
4. One stakeholder expressed objections to the use of the PDMP for medication history data because the PDMP does not provide patients an opportunity to give consent or the ability to opt-out

A Best Possible Medication History, Connected Through Connie



Explore Medication Fill Data Sources

- Explore the expansion of the Connecticut PDMP to require submission of all prescription and medication fill data from pharmacies
- Explore additional or alternative medication fill data sources, including variability in data quality and completeness, timeliness, and cost.

Evaluate CPMRS Laws and Policies

When exploring expansion of the CPMRS a thorough and transparent evaluation of the current laws and policies governing access and use of CPRMS for law enforcement activities must be conducted to determine whether legal and/or policy changes are needed, including but not limited to consent requirements and the ability for individuals to opt-out.

CPMRS SSO Sustainability in Connie

Single Sign-On (SSO) capabilities between Connie and CPMRS for ease of access to PDMP data has started with the integration underway.

Connie BPMH Workgroup

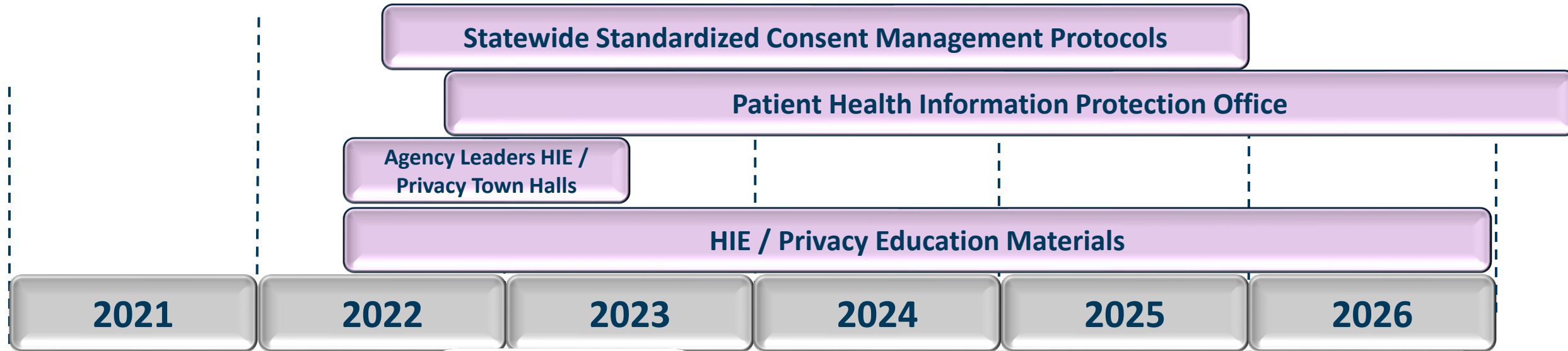
A Connie workgroup for the BPMH should integrate expertise from the MRPC and include leadership of the CPMRS program. The BPMH workgroup should have the opportunity to provide feedback to the CPMRS program on potential expansion of the PDMP to additional drug classes and drug types.

Health Information Privacy to Protect Patients and Families

Feedback

1. One stakeholder emphasized the need for more robust consumer engagement to identify the major concerns related to health IT and health information exchange.
2. A broad array of commenters reiterated their belief that most consumers do not know how or with whom their information is being shared.
3. Connie and state agencies must be transparent and consistent in any educational content being created around consent policies.
4. One commenter suggested the state play a central role in managing consent, especially as it relates to Connie.
5. While there were no objections to the establishment of a Patient Health Information Protection Office, two commenters questioned which state agency is the most appropriate home for the new office.

Health Information Privacy to Protect Patients and Families



HIE / Privacy Educational Materials and Media

Include educational materials and media directed toward providers to assist them in establishing consent management processes for sharing patient information, and best practices for talking to patients about providing informed consent and their health data rights.

Government Leaders HIE / Privacy Town Halls

Host town hall meetings with state government leaders providing information and education to members of the public on their rights to provide informed consent for the electronic sharing of their health information.

Patient Health Information Protection Office

- Appropriate funds through the legislature to establish the office.
- State policy for the use and disclosure of patient health information
- Monitoring, analyzing, and reporting on patient complaints around inappropriate disclosures.
- Enforcing penalties and fines

Standardized Consent Management Protocols

Propose legislation requiring providers to use consistent protocols for the collection of patient consent preferences, inclusive of the creation of statewide paper and electronic consent forms offering more granular consent options that includes the provider to whom consent is given, reason for consent and a timeframe

Implementation Timeline & Next Steps



Implementation Planning - Next Steps



- Establish interagency workgroup to fine tune recommendations related to state agencies
- Finalize implementation plan and consider timing of sustainability strategies
- Establish Health IT Plan implementation milestones and success metrics
- Draft Sustainability Plan Appendix
- Draft Compendium of Technical Standards, Policies, and Business Practices

Send us your ideas!

CedarBridge Group

Contact us:

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