

Committee Name: HIE Steering Committee	Committee Chair: Jenney Samuelson
Meeting Goals: 1) Welcome & introductions 2) Reflecting on 2019 3) 2020 Discussions: Goals, Comm. Authority, Meeting Outline & Data Priorities 4) VITL: Update on Coll. Services Project 5) Wrap-Up	Mtg. Facilitator: Emily Richards Mtg. Recorder: Marie Bernier Where: AHS – WSOC
	Conference: Cherry
	Date: February 24, 2020 Time: 10:30am – 12:30pm
<input type="checkbox"/> May contain Confidential/Exempt information	Skype Meeting Information: none

Attendees (Present Bold) <i>Non-Voting Member in Italics</i>			
Name	Title	Name	Title
Jenney Samuelson, Chair	Deputy Commissioner, DVHA	Beth Tanzman	Executive Director, Blueprint for Health
Tracy Dolan	Deputy Commissioner, AHS	<i>Beth Anderson</i>	<i>VITL, Vermont's Health Information Exchange Operator</i>
Tyler Gauthier	OneCare Vermont	<i>Sarah Kinsler</i>	<i>Health Care Project Director, The Green Mountain Care Board</i>
Emma Harrigan	Vermont Association of Hospitals and Health Systems	<i>Kristin McClure</i>	<i>Chief Data Officer, ADS</i>
Georgia Maheras	Bi-State Primary Care Association	<i>Emily Richards</i>	<i>Program Director, HIE</i>
Jimmy Mauro	Blue Cross Blue Shield of Vermont	<i>Naomi Hahr</i>	<i>Program Manager, HIE</i>
Simone Rueschemeyer	Executive Director, Vermont Care Network	<i>Marie Bernier</i>	<i>Executive Assistant, HIE</i>

Non-Committee Members present			
Name	Title	Name	Title
Richard Terricciano	Enterprise Architect, DVHA	Heather Skeels	Health Data Operations, Bi-State
Carolyn Stone	Director of Operations, VITL	Katlyn Muir	Data Quality Specialist, OneCare

	Agenda Item	Schedule
I.	Welcome & Introductions	10:30 – 10:40
II.	Reflecting on 2019: 2020 Goals, Committee Authority, 2020 Meeting Outline and Presentation Requests	10:40 – 11:30
III.	2020 Discussions: Goals, Comm. Authority, Meeting Outline & Data Priorities	11:30 – 11:35
IV.	VITL: Update on Collaborative Services Project Meeting Evaluation	11:45 – 12:25
V.	Wrap Up: Meeting Evaluation and Planning for March	12:25 – 12:30

	Agenda Topic	Topic Facilitator	NOTES <i>(notes are provided in italics and blue)</i>	Action Items
I.	Welcome & Introductions	Richards	<i>Emily and Jenney welcomed everyone to the kickoff meeting for 2020. Everyone introduced themselves around the room.</i>	
II.	Reflecting on 2019	Samuelson	<i>After the conclusion of the 2019 Steering Committee session, Emily met with many of the Committee members individually to reflect on the year and discuss areas of improvement for the 2020 Committee session. The reflections on these conversations and the associated mitigation steps are detailed in the meeting materials.</i>	
III.	2020 Discussions: Goals, Committee Authority, Meeting Outline & Data Priorities	Samuelson	<p><i>In short, the 2020 HIE Steering Committee goals are as followings (for a full description of goals, please see slide 7 here).</i></p> <ol style="list-style-type: none"> <i>1. Continually improve operations by enabling the Collaborative Services Project's success,</i> <i>2. Leverage HIE Governance structure to update consent policies and monitor consent policy implementation.</i> <i>3. Articulate how the Committee's actions support system-wide HIE sustainability.</i> <i>4. Update the HIE Plan by November 1, 2020.</i> <p><i>Discussion of 2020 Goals</i></p> <ul style="list-style-type: none"> <i>• Phase II of Collaborative Services is newer to the group – we will need to spend more time on this</i> <i>• Phase III of Collaborative Services includes policies/procedures, financing structure, and governance (the pillars that bolster IT development)</i> 	

			<ul style="list-style-type: none"> • <i>The Collaborative Services project is intended to improve current operations and diversify data in the HIE.</i> • <i>Pertaining to monitoring implementation of the new consent policy, the Committee would like updates on the % of Vermonters who have chosen to opt-out.</i> • <i>Related to sustainability, the group discussed DVHA's focus on investing in shared infrastructure once, not duplicating investments. Also, Committee members underscored the importance of the Collaborative Services project enabling VITL to demonstrate the value of their services. Ideally, this effort will position VITL to demonstrate value across the 3 major use cases or goals outlined in the HIE Plan. A committee member also commented that the change in the consent policy should positively impact the VHIE's value to consumers. There was also discussion of the shifting federal funding landscape and DVHA staff agreed to bring back pertinent information to the sustainability discussions.</i> • <i>Related to Goal 4, updating the HIE Plan, the group agreed that stakeholder engagement may involve developing sub-committees to address things like IT procurement (already one in existence to support VITL's purchase of a master data platform) and Connectivity Criteria.</i> <p>• <i>Meeting Objectives for Winter/Spring (slide 8-10 here):</i></p> <ol style="list-style-type: none"> 1. <i>Review the status of the Collaborative Services project.</i> 2. <i>Review projects and proposals related to priority data types with subject-matter experts.</i> <ul style="list-style-type: none"> • <i>DVHA requested presentations from certain committee members to enable a shared understanding of efforts/in-flight work related to priority data types.</i> 	
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			<ul style="list-style-type: none"> • The group discussed the proposal for VCP to present on SUD/MH/BH and agreed that the focus should be on the activities around the DA/SSA EHR implementation and associated development of Connectivity Criteria for those entities. SUD providers span well beyond the DAs e.g., connection to “Hubs”. • The following discussion pertains to certain data types the Committee would like to see for 2020/21 (slide 11 here): <ul style="list-style-type: none"> • Decision point: approving priority data types for 2020/21 <ul style="list-style-type: none"> • Chair asked, do the four proposed data types (clinical, SUD/MH, claims, and social determinants of health) feel right to explore under Collaborative Services Phase II with the caveat that improving the quality and availability of “clinical” data is the #1 priority? All agreed. • Discussion of 20/21 Data Types – <ul style="list-style-type: none"> • One member suggested that claims do not constitute health data. Others disagreed noting that it would be too challenging to prove in roads into value based care without uniting clinical (EHR) data and claims data; also, both clinical and claims data are needed to understand a clinical experience. <ul style="list-style-type: none"> ▪ Some data types are more complicated to manage than others; claims could be a “win” as claims elements are already so well coded. ▪ The Committee needs to further consider what “health data” means as it pertains to health information. “Health information” as defined on page 2 of the 2018-2019 HIE Plan is as follows: “Administrative and clinical information created during care delivery which supports coordination of care, reimbursement, public health and quality reporting, analytics, and the policy and 	
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			<p><i>governance surrounding management of the health care system.”</i></p> <ul style="list-style-type: none"> ▪ <i>The group also discussed whether Policy should be added as a data type.</i> 	
IV.	VITL: Update on Collaborative Services Project Meeting Evaluation	Anderson/Stone	<ul style="list-style-type: none"> • <i>VITL Update on Collaborative Services Project and Connectivity Priorities</i> <ul style="list-style-type: none"> • <i>The group discussed the need to focus on both Tier II and Tier III connections – some suggested Tier II was sufficient at this time, but perhaps we should not connect practices at all if they can only meet Tier I. Note: VITL creates workplans with each organization to develop a plan to arrive at increased Tiers. Some organizations are connected because of immunization data, and may never move beyond Tier I.</i> 	<ul style="list-style-type: none"> • Action: To engage the Committee in setting connectivity priorities, OneCare and Blueprint representatives agreed to join VITL in an ad hoc subcommittee to assess this year’s proposal and come back to the larger group with a recommendation. <ul style="list-style-type: none"> ▪ To do this, Committee members asked VITL to provide information so they may understand the current state e.g., % of the population represented by each interface; connectivity criteria level; organization readiness; planned replacements or upgrades. ▪ Action: VITL was asked about the impact the Collaborative Services project would have on clinical data. They agreed to come back with predicated short-term impacts and opportunities offered by the new technology

				infrastructure and associated organizational processes.
V.	Wrap Up: Meeting Evaluation and Planning for March	Samuelson/Richards	<ul style="list-style-type: none"> • <i>Meeting Evaluation</i> <ul style="list-style-type: none"> • <i>Will take place at the end of each meeting to ensure we're on track and continually evaluating our next steps in service of achievement of annual goals.</i> • <i>To improve meetings, committee members suggested constructing the agenda to allow for more discussion time, sending out materials in advance to allow members to come prepared to engage in the agenda, and providing a physical parking lot to log discussion ideas for another time.</i> 	

Motion	Second	Passed	Failed