

HIE Objectives & 2018-2019 Tactical Plan

The objectives below describe *what* the State needs to achieve the goals of HIE, allowing planning for *how* progress will be made toward each. The objectives are aspirational milestones and the Tactical Plan that follows provides a checklist of tasks to be done in 2018-2019 in pursuit of these objectives and goals. Although each objective is listed in connection with a specific goal, most objectives will further all three HIE goals.

Goal: Create One Health Record for Every Person

To ensure data is available to providers when they need it, the system requires that each person have an electronic health record, often referred to as a Longitudinal Health Record. This record must include a complete, historical view of care that spans transitions of care and insurance carriers and which is secure and confidential yet accessible, under reasonable permissions, to each person and their designated care team, including relatives and friends. Viewing the health record should not add additional burden to provider operations. To support this goal, the State and its partners strive to:

- Define the requirements (what must be included) of a Longitudinal Health Record.
- Create an easy-to-navigate Longitudinal Health Record for all people accessing Vermont's health system.
- Empower people to participate in their care by providing them access to their secure and complete health record.
- Provide a straight forward mechanism for managing personal data sharing preferences.
- Further real-time exchange of health records to support direct care, care coordination, and efficient transitions of care.
- Remove policy, process, and economic barriers to ensure complete health data follows the person and are not "stuck" in information silos.
- Support adoption and use of electronic health records and other technologies across the full spectrum of care delivery.

Goal: Improve Health Care Operations

Health care delivery and management in Vermont relies on and requires an array of data sets to support an ever-expanding need for analysis of health system's performance. Today, the needed data acquisition and aggregation are supported unevenly and inconsistently, and the burden often falls more heavily on smaller practices. To fully support health systems in using real data to bolster operations, the State and its partners strive to:

- Define the priority elements (information) required to support health system reporting and analysis.
- Integrate data sources to seamlessly represent a person's entire health profile into one record for those measuring care systems and providing care and services.
- Provide designated health care organizations and programs with high quality, reliable data to support measurement and reporting needs of various groups and users.

Goal: Use Data to Enable Investment and Policy Decisions

The information required for data-informed delivery and management is produced in a learning cycle where care delivery provides data that is in turn used for population-wide analysis. Data becomes a tool to support action, whether focused on creation of public policy or investments in resources or programs. To bolster the health system's ability to learn and improve, the State and its partners strive to:

- Integrate systems and coordinate stakeholder efforts in support of continuous improvement goals.
- Provide policy makers and health system stakeholders with aggregate data to support evaluation and program decision making.
- Support health care organizations and programs with access to aggregate data to inform investment decisions that maximize use of limited resources and promote positive health outcomes.

2018-2019 Tactical Plan

A tactical plan translates strategy into achievable actions that support long-term goals. Vermont's HIE Tactical Plan will be developed annually and constantly monitored and refined by the HIE Steering Committee. The HIE Tactical Plan identifies actions related to maturing all core services and furthering the three HIE goals across the dimensions of: Governance, Technology, Policy/Process and Financing. An accountable party is assigned to each tactic to ensure it is clear who is responsible for which aspects of the work.

The 2017 Vermont Evaluation of Health Information Technology Activities Report demonstrated that, most stakeholders feel that it's essential to have HIE services. To ensure that the HIE activities in 2018-2019 instills trust in stakeholders, and set HIE efforts on a solid, strategic path, the Tactical Plan is focused on achievability and setting a strong foundation for future growth and development.

The 2018-2019 Tactical Plan focuses on enhancing foundational and exchange services in support of future and existing end-user services. The specific focus for 2018 and 2019 is:

- Establishing the permanent governance model for the HIE
- Incremental progress in:
 - Consent management
 - Data quality
 - Identity management
- Initiating long-term, sustainable financial planning
- Overseeing the 2018-2019 plan and developing a 2020 plan, including a technical roadmap

Considering the importance of strategic, incremental progress, the Tactical Plans below are intentionally written as check-lists as a simple mechanism for tracking the completion of necessary work.

Foundational Components, 2018-2019		
Accountable Party	Area of Focus	Activity
HIE Steering Committee	HIE Governance	<ul style="list-style-type: none"> <input type="checkbox"/> Establish an HIE Steering Committee <input type="checkbox"/> Annually, engage stakeholders in the development of a Strategic Plan for the GMCB's review/approval by November 1 <input type="checkbox"/> Develop an HIE technical road map and sustainability model to be included in the HIE Plan and built upon every year thereafter <input type="checkbox"/> Create an evaluation method for overseeing and measuring progress in implementation of HIE strategic plans and the effectiveness of the HIE Governance Model <input type="checkbox"/> Evaluate statewide data governance efforts and design a data governance model appropriate for the State's HIE Steering Committee <input type="checkbox"/> Work with stakeholders to assess potential changes in the State's Consent policy and support the production of a Consent Report per Act 187 of 2018
VT Legislature and GMCB	HIE State Policy: Consent and Connectivity	<ul style="list-style-type: none"> <input type="checkbox"/> Legislature: Pass Act 187 of 2018 to continue momentum in HIE activities and enhance oversight and accountability <input type="checkbox"/> Legislature: Consider the Consent Report and potential adjustments to current statute and/or policies, if deemed necessary <input type="checkbox"/> GMCB: Review VITL's budget and updated Connectivity Criteria and consider ways to enforce consent management and adherence to Connectivity Criteria through existing regulatory framework <input type="checkbox"/> GMCB: Review and approve the annual HIE Strategic Plan
VHIE (VITL)	HIE State Policy: Consent and Connectivity	<ul style="list-style-type: none"> <input type="checkbox"/> Work with stakeholders to identify priority data sets to further develop the tiered Connectivity Criteria to drive improved data quality and patient matching in the VHIE; provide the Connectivity Criteria to the GMCB for approval annually (in 2018 Connectivity Criteria is included in the HIE Plan) <input type="checkbox"/> Review policy allowing payers access to health data for administrative and operational uses <input type="checkbox"/> Evaluate the organization's consent management processes to mitigate the technical and administrative burden of transmitting consent
DVHA	HIE Federal Policy	<ul style="list-style-type: none"> <input type="checkbox"/> Monitor changes to federal policy (e.g., H.R.6082- Overdose Prevention and Patient Safety Act; 21st Century Cures - TEFCA) and communicate impacts to the HIE Steering Committee to support informed planning
VT Legislature	Financing	<ul style="list-style-type: none"> <input type="checkbox"/> Extend HIT-Fund and approve the DVHA HIE program budget
HIE Steering Committee	Financing	<ul style="list-style-type: none"> <input type="checkbox"/> Review available funding sources, inventory needs and develop a sustainability model
DVHA	Financing	<ul style="list-style-type: none"> <input type="checkbox"/> Obtain federal HIE development funds <input type="checkbox"/> Manage the State HIE budget (including the HIT Fund) in alignment with goals and initiatives outlined by the HIE Steering Committee and in accordance with State and federal law <input type="checkbox"/> Contract for services in service of the strategic direction set forth by the HIE Steering Committee

Foundational Services, 2018-2019		
Accountable Party	Area of Focus	Activity
VHIE (VITL)	Consent Management	<ul style="list-style-type: none"> <input type="checkbox"/> Further automate the consent management process, increasing the number of records with consent documented to at least 42% in 2019 (35% in 2018)
VHIE (VITL)	Security	<ul style="list-style-type: none"> <input type="checkbox"/> Adhere to HIE NIST security standards <input type="checkbox"/> Conduct an annual third-party security assessment and develop a mitigation plan, if necessary, to address items identified in assessment <input type="checkbox"/> Partner with the Agency of Digital Services to manage security matters; hold a monthly meeting and adhere to industry reporting standards
DVHA	Security	<ul style="list-style-type: none"> <input type="checkbox"/> Work with the Agency of Digital Services to ensure that all HIE contracts include industry-driven security measures and real oversight protocols
VHIE (VITL)	Identity Management	<ul style="list-style-type: none"> <input type="checkbox"/> Reduce duplicate records in the VHIE by 60% (40% in 2018; 20% in 2019) <input type="checkbox"/> Assess shared identity matching tools and report to HIE Steering Committee on results, and if deemed appropriate, procure and implement new identity matching tool(s) <input type="checkbox"/> Ensure that existing patient matching services are effective and operational seven days a week and 24 hours a day with 94% average monthly uptime
Blueprint for Health – Clinical Registry	Identity Management	<ul style="list-style-type: none"> <input type="checkbox"/> Enhance the Vermont Clinical Registry's record matching capabilities to support the Women's Health Initiative, Hub & Spoke program, and Blueprint Practices
Agency of Digital Services (ADS)	Other	<ul style="list-style-type: none"> <input type="checkbox"/> Complete the information, technical, and business dimensions of the State's Architectural Assessment of the VHIE to support effective VHIE operational planning and the HIE Steering Committee's understanding of the VHIE

Exchange Services, 2018-2019		
Accountable Party	Area of Focus	Activity
VHIE (VITL)	Data Extraction & Aggregation	<ul style="list-style-type: none"> <input type="checkbox"/> Increase the number of health care organizations contributing to the VHIE that meet Tier II Connectivity Criteria standards <input type="checkbox"/> Establish new or replacement interfaces (connections) feeding data from EHR systems to the VHIE <input type="checkbox"/> Provide end users (OneCare Vermont, Blueprint for Health, Health Department, etc.) with data feeds to meet their unique data usage needs <input type="checkbox"/> Enable use of EHRs by providing Meaningful Use and Security Risk Assessment consultation to providers participating in the Medicaid EHR incentive program
Vermont Care Partners	Data Extraction & Aggregation	<ul style="list-style-type: none"> <input type="checkbox"/> Collaborate with Designated Agencies in the procurement of EHR systems that support value-based payment and data sharing for mental health, SUD, and developmental disabilities. Data is to be aggregated in the Vermont Care Network data repository.
Blueprint for Health	Data Extraction & Aggregation	<ul style="list-style-type: none"> <input type="checkbox"/> Develop the Clinical Registry to manage sensitive SUD data aggregation and exchange in support of the Hub/Spoke program <input type="checkbox"/> Explore data aggregation opportunities for statewide screening and referral programs
GMCB	Data Extraction & Aggregation	<ul style="list-style-type: none"> <input type="checkbox"/> Enhance VHCURES by upgrading to current standards, anticipating state data needs, and resolving analytical challenges present in the system
VHIE (VITL)	Data Quality	<ul style="list-style-type: none"> <input type="checkbox"/> Develop a data quality mitigation plan, as a component of the organization's strategic plan, in consultation with the HIE Steering Committee with a focus on improving quality and volume of specific data points related to health system goals <input type="checkbox"/> Pilot the implementation of a terminology services tool (Health Language) and measure the impact on the quality of specific lab transmission across 25 health care organization; report to DVHA and the HIE Steering Committee on the achieved impact <input type="checkbox"/> Execute a data quality initiative to increase the quality and volume of data points included in the Connectivity Criteria Tier II data set <input type="checkbox"/> Work with partners such as the Blueprint for Health, Bi-State Primary Care Association and OneCare VT to implement source-directed data quality initiatives <input type="checkbox"/> Modify the Connectivity Criteria in collaboration with the GMCB, the HIE Steering Committee, and other key stakeholders to further enhance the quality of data exchange through the VHIE
Blueprint for Health	Data Quality	<ul style="list-style-type: none"> <input type="checkbox"/> Continue to manage the Blueprint Sprint process to support data quality remediation at the source (health care organization) <input type="checkbox"/> Partner with OneCare Vermont and Bi-State Primary Care Association to develop a statewide data quality remediation model
VHIE (VITL)	Data Access	<ul style="list-style-type: none"> <input type="checkbox"/> Evaluate data access preferences with end users and focus on development of the preferred data access method <input type="checkbox"/> Implement single sign on to VITLAccess from EHR systems and/or cross community access (direct query and retrieve of some data within the VHIE) in accordance with the State's prioritized list <input type="checkbox"/> Maintain and expand use of VITLAccess and the pharmacy benefit manager medication history query and view service based on user interest
VHIE (VITL)	Data Governance	<ul style="list-style-type: none"> <input type="checkbox"/> Begin development and implementation of a data governance model leveraging methods currently implemented by the GMCB and Agency of Human Services to align health data management practices across the State
VHIE (VITL)	Interoperability	<ul style="list-style-type: none"> <input type="checkbox"/> Explore methods for bi-directional data exchange with public health registries; provide the HIE Steering Committee with recommended strategies <input type="checkbox"/> Maintain existing data feeds (Clinical Registry, Public Health Registries, OneCare VT, AHS' Care Management Solution, etc.), explore methods for enhanced data exchange
ADS	Interoperability	<ul style="list-style-type: none"> <input type="checkbox"/> Provide an HIE enterprise architecture recommendation to the HIE Steering Committee to support development of a technical roadmap

End-User Services*, 2018-2019		
Accountable Party	Area of Focus	Activity
One Care Vermont	Care Coordination & Analytics	<input type="checkbox"/> Leverage federal and state support to develop care coordination and analytics tools that support direct care, measurement and system improvement <input type="checkbox"/> Utilize the data feed from the VHIE to support analysis of All Payer Model implementation
VHIE (VITL)	Notification Services	<input type="checkbox"/> Route data to Patient Ping and other event notification services used by VT providers
Blueprint for Health	Analytics	<input type="checkbox"/> Enhance the Clinical Registry to support data analytics needs related to Hub/Spoke, the Women's Health Initiative and other statewide initiatives <input type="checkbox"/> Perform health program analysis based on claims data united with clinical data aggregated in the Clinical Registry
Bi-State Primary Care Association	Analytics	<input type="checkbox"/> Aggregate clinical and claims data in data visualization tool (Qlick Sense) and use to support a Model for Improvement effort with Federally Qualified Health Centers statewide <input type="checkbox"/> Train stakeholders how to leverage analyzed health data for practice improvement
Dept. of Health	Analytics	<input type="checkbox"/> Procure a forecaster tool for the Immunization Registry to improve clinicians' ability to obtain real time and forecasted immunization data and support public health reporting.
Dept. of Health	Consumer Tools	<input type="checkbox"/> Maintain the public health reporting portals available to VT providers
VHIE (VITL)	Secure Messaging	<input type="checkbox"/> Provide the VITLDirect secure, point to point messaging service based on customer need and use

*As noted previously, the ultimate value to users is evident in Exchange and End-User services. However, tier one (Foundational) is required to enable tiers two and three (Exchange and End-User Services). While it may be ideal to have the foundation set before moving on to higher tiers, End-User Services have evolved in recent years out of necessity. However, the End-User Services that exist today will be enhanced as Foundational and Exchange Services become more effective over time.