Vermont Health Information Exchange
Data Governance Council Meeting

April 2nd, 2024

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Agenda

- General Reminders
- Legislative Updates
- Domain Updates
  - Social Determinants of Health Data Governance [Will Dempsey]
  - Health Care Workforce [Heri Troche]
- Federated Team Updates
  - Data Integration Team – Data Completeness [Kristina Choquette]
- 42 CFR Part 2 – SAMHSA Rule Overview and Q&A [John Wallace]
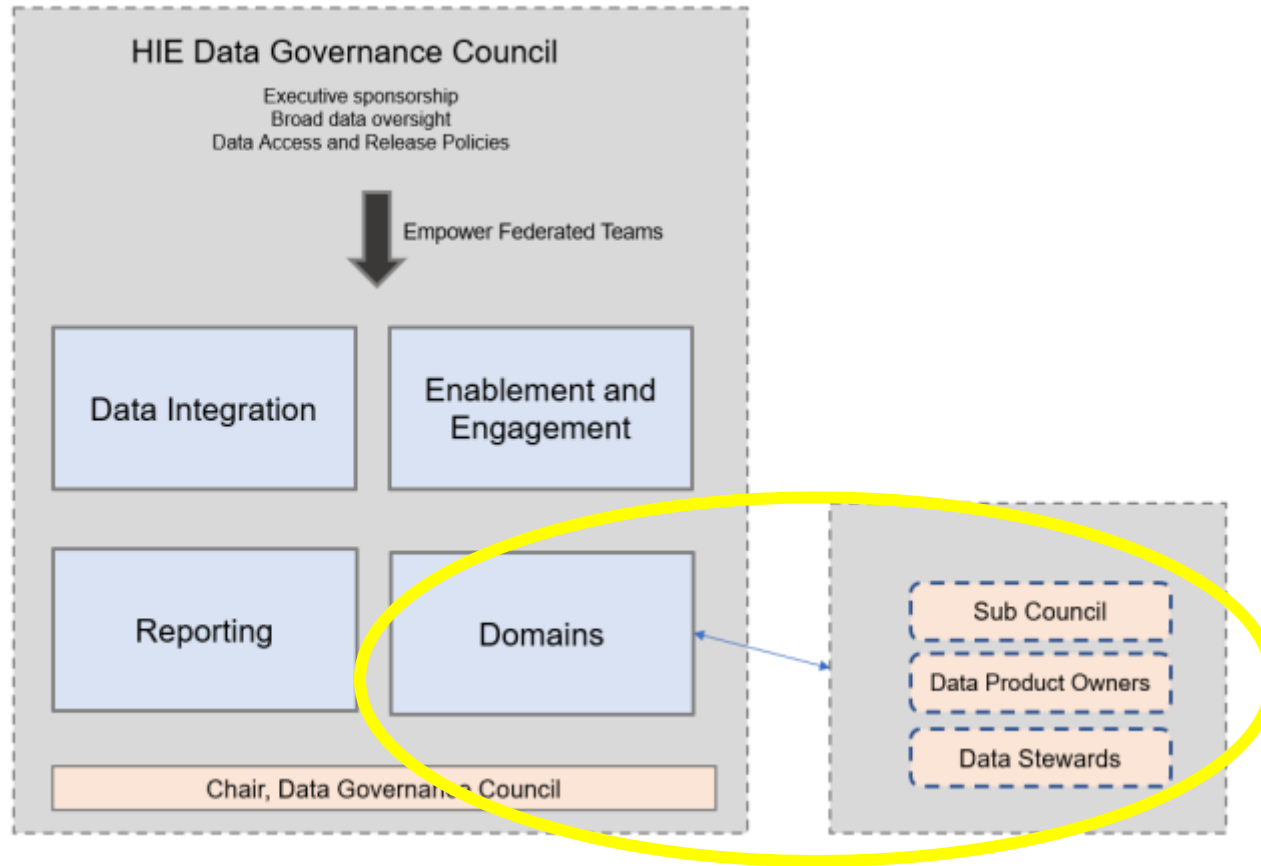- Public Comments

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General Reminders

- Material posted to website:
  - [Vermont Health Information Exchange Data Governance | Health Data](#)
  - [Data Governance Council Charter (vermont.gov)](#)

- Agreed upon meeting frequency: every 6 weeks

- Mode: in person (Waterbury state complex) and online (MS teams)

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Legislative Updates

- H.121

- Others?

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Domain Updates

Key Items

- Domain teams provide updates and recommendations to the HIE Data Governance Council.

- HIE Data Governance Council - provides support, feedback, guidance, and ultimately votes to approve/not approve / request changes to Domain recommendations

- 4 Active Domain Teams
  - 42 CFR Part 2
  - Social Determinants of Health
  - Medicaid
  - New: Healthcare Workforce

Social Determinants of Health Update

Accomplishments

- Briljent submitted their draft Data Governance Plan, the State reviewed and provided feedback. Briljent is working on updating the deliverable.

Timeline

- Work is on schedule to be completed in mid-2024

Key Deliverables

- Stakeholder engagement plan (complete), execute stakeholder engagement plan (complete), data governance outline (complete), Data Governance Plan DED (complete), Draft Data Governance Plan (in progress)

Healthcare Workforce Data Center Update

Accomplishments

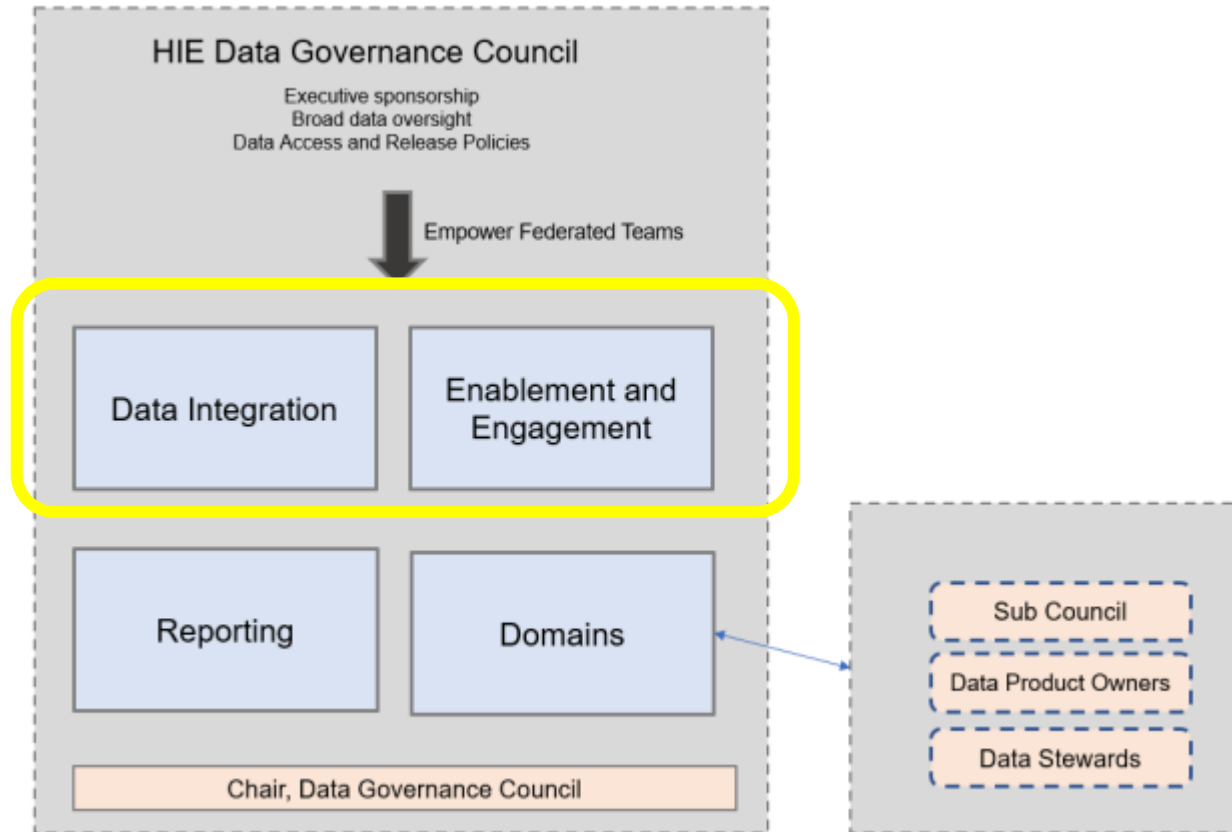- Phase 1: Research and planning – completed in March 2024)

Timeline

- Best practices report will be coming out mid April.
- Phase 2 Stakeholder engagement (April through July 2024) is in progress, planning underway. We are finalizing the list of stakeholder we plan to engage in the series.

Key Deliverables

- Stakeholder Engagement Plan will be delivered around Mid April. These deliverables will be shared with the HIE, AHS Health Care Reform Unit and GMCB Data Analytics team.

Federated Team Updates

Data Integration Team - Data Completeness

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Data Integration: Data Completeness

- What is it?
  - One health record for every Vermonter
  - The availability of two types of data from sources that contribute to a Vermonter's comprehensive health record
    - <u>Unstructured Data</u>: Free-entry text for human readability and use at the point of care
    - <u>Structured Data</u>: Discrete data elements standardized to industry code systems for use in analytics and reporting

- What is its purpose?
  - To support optimal care delivery and coordination

VITL's existing Data Completeness efforts

- Connecting new data sources and maintaining connections - "Interfaces"

- Matching Vermonters across the VHIE - "MPI"

- Publishing and maintaining minimum connectivity and data criteria
  – "VHIE Connectivity Criteria"

- Validating data availability, accuracy, and reliability with data sources during initial interface onboarding or remediation activities
  – "Data Validation"

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How do we measure Data Completeness?

- Existing VHIE Monthly Dashboards
  - MPI match rates
  - Connectivity Updates

- VHIE Key Performance Indicator (KPI)
  - Data Governance subcommittee – in progress

- Systematically evaluate data completeness in the VHIE
  - VHIE Data Completeness Plan - *proposed*

VHIE Data Completeness Evaluation

- VITL will evaluate structured data in the VHIE in comparison with key measures

- VITL will evaluate for

  - <u>Patient Availability</u>: Patient record found
  - <u>Data Availability</u>: Presence of data element(s)

- VITL will evaluate completeness by comparing data contributed by all sources comprising the person's comprehensive record in the VHIE

- Results of the evaluation should measure completeness

Data Completeness Evaluation Planning FY24

VITL will begin producing metrics that include descriptive statistics (at least counts of values in valid format) for the following three (3) clinical observation results:

- Blood Pressure
- Hemoglobin A1C
- Screening for Depression (Findings)

- VITL will:
  - Develop the process to perform the evaluation
  - Design and develop specifications to support the data evaluation
  - Design dashboards to measure data completeness

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Data Completeness Evaluation Implementation – FY25

- VITL will perform the evaluation

- VITL will develop and generate dashboards to measure completeness

- VITL will document the evaluation results and next steps to ensure continuous evolution of the Data Completeness Plan in FY26 and for repeatability

42 CFR Part 2 – SAMHSA Rule Overview and Q&A

- HHS – SAMHSA finalized Rule (2/8/24)

Federal Register :: Public Inspection: Confidentiality of Substance Use Disorder Patient Records

- Rule Overview and Q&A

Public Comments