Health Information Exchange Steering Committee Meeting February 22, 2021

Today's Agenda

- Introductions New Members and Old
- Committee Operations
 - Website Review
 - Charter
- VHIE Update
- Review 2021 Focus Areas & Subcommittee Plans
 - 2021 Interface Priorities (VITL)

Introductions

Name, Organization	Role	Voting
Ena Backus, AHS Office of Health Care Reform	Chair	Voting
Interim: Katie Muir, OneCare VT	ACO Representative	Voting
Simone Rueschemeyer, Vermont Care Partners	Mental Health & Substance Use Representative	Voting
Georgia Maheras, Bi-State Primary Care Assoc.	Primary Care Representative	Voting
Kristin McClure, Agency of Digital Services	Technologist	Voting
Tracy Dolan (interim: Jessie Hammond), Dept. of Health	Public Health Representative	Voting
Beth Anderson, VITL	HIE Representative	Non-Voting
Jimmy Mauro, Blue Cross Blue Shield	Payer Representative	Voting
Vacant	Consumer Representative	Voting
Emma Harrigan, VT Hospital Association	Hospital Care Representative	Voting
Sandy Rouse, Central VT Home Health & Hospice	Home Health Representative	Voting
Laura Pelosi, Long Term Care Advocate	Long Term Care Representative	Voting
TBD, Blueprint for Health Program	Practice Innovation Lead – Blueprint for Health	Non-Voting
Sarah Kinsler, GMCB	Green Mountain Care Board	Non-Voting
Emily Richards, AHS Office of Health Care Reform	HIE Program Representative	Non-Voting

Committee Operations

- Purpose of the HIE Steering Committee
 - 1. Serve the needs of HIE users by advancing HIE use cases;
 - 2. Strengthen the relationship between authority and accountability; and
 - 3. Engage a broad range of stakeholders in strategic planning and oversight activities.

- The Steering Committee's Vision & Mission
 - Vision: To enable health information exchange that promotes quality health care in Vermont.
- Mission: To work across organizations and disciplines to create and endorse a shared view of the definition, purpose, and goals of HIE in Vermont.

Committee Operations

- The HIE Steering Committee will:
- Support development, execution, and oversight of Vermont's HIE Plan.
- Continue to grow and evolve the HIE Steering Committee to best meet the State's needs.
- Support the Department of Vermont Health Access (DVHA) and other stakeholders in focusing HIE investments to align with statewide HIE goals.
- Support development of processes and policies that enable achievement of statewide HIE goals.
- Engage stakeholders in the Steering Committee's work.
- Committee Assignment: Review the Charter and Provide Feedback no Later than March 12

Committee Logistics

- Meetings are Held the 4th Monday of the Month (virtually until otherwise noted)
- Subcommittee Meetings are Scheduled Separately
- Meeting Materials are Posted on the Committee's <u>Website</u> and Included in Meeting Invitations
- Draft Materials May Be Distributed by Email Directly to Committee Members
- Need Assistance? Contact Emily Richards and/or Marie Bernier



Agenda

- CY20 & CY21
- Collaborative Services
- COVID
- Annual Report
- Consent & Sensitive Data
- VHIE Data Access



CY20 Highlights

- Collaborative Services Phase 1: Rhapsody, Term Atlas, Verato Master Patient Index
- Collaborative Services Phase 2: selected new platform and began implementation
- Managed the transition to an opt-out consent model on 3/1 and education programs
- Responded to needs for COVID data, including
 - VDH: VITLAccess, daily hospitalization reporting with data quality work
 - 12 new locations for test results
 - 53 new locations for immunizations
 - 19 EMS agencies on VITLAccess
- Provided patient data to UVMMC during the cyberattack
- Stakeholder engagement around sharing sensitive and mental health treatment data
- Expanded data provided to OCV, including new payer contract
- Security upgrades



CY21 Development Deliverables

New Platform

- Platform live
- Blueprint extracts delivered
- Transition of interfaces
- Information Blocking
- Consent
- New Data Types
 - Ingest Medicaid claims
 - Requirements for sensitive data and social determinants of health

Data Access & Public Health

- Public Health/ COVID response
- Expanding data collection and access
- Provider Portal
- Meaningful Use and Security Risk Assessment Consulting
- Emergency response
- Data Quality partner with Bi-State
- Data Governance



CY21 VITL Projects

- Strategic Planning
- Sustainability model
- Stakeholder engagement
- Outreach / story-telling
- OCV data reporting (2021 contract executed in December)
- Interoperability event notification for hospitals



Collaborative Services Project Update

- An updated project schedule was published in December, which adjust for delays in the project but still allows us to meet the key deliverables on time
 - Blueprint clinical data extract delivered Mid April
 - First Medicaid Claims file ingested to Production July
 - Provider Portal live in Production July
 - OneCare Vermont reporting Late 2021
- Contractors with expertise in Fast Healthcare Interoperability Resources (FHIR) have been brought onboard to supplement staff focused on COVID-related work and accelerate testing



Status and Next Steps

- Finish testing the clinical data repository and resolve any issues impacting the first deliverable for Blueprint.
 - Second round of testing and issue resolution underway
- Complete terminology code mapping for the Blueprint extract
 - Currently ~70% complete.
- Continue validation and testing of the reporting database and new data model.
- Complete integration of Terminology Services.
 - Currently ~70% complete.



COVID-19 Related Data and Reporting

Reporting

- Daily COVID-19 Hospitalization report to the VT Department of Health (VDH) to inform local response and support reporting to US Health and Human Services.
- Continued ad hoc reporting for the Vermont Department of Health to support planning efforts.

Provider Portal

- VDH Epidemiology team continues to use the provider portal for case investigations.
- VITL continues to onboard EMS teams across Vermont to obtain data on patients they are treating and transporting.



COVID-19 Test & Immunization Data

- Building interfaces to commercial testing laboratories to collect COVID test results for VDH
 - 12 Live, 7 in Test, 9 getting started
 - Processed over 700,000 COVID-19 test results in 2020!
- Building interfaces to Pharmacies to collect records for the Immunization Registry
 - 57 new locations live, 71 in Test
- New interfaces built to convert text file data to HL7 data to support sources that cannot produce HL7 formatted messages.





Vermont Health Information Exchange 2020 Annual Report



Consent Update

- Opt out rate remains steady
- Planning more provider and patient education to begin in March 2021



Sensitive Data Sharing Project Progress

Project to explore consent model for sharing substance use disorder treatment data and other sensitive data via the VHIE

Phase 1: Designing policies and procedures – underway

- Engaged advisory group
- Focus groups and interviews underway, including representation from independent practices, hospitals, Federally Qualified Health Centers, Designated Agencies, and provider associations
- Recruiting for additional stakeholder engagement including patients
- Documented business requirements, solution design and policies and procedures
- Waiting for implementation guidance for CARES Act changes to 42 CFR Part 2

Phase 2: Pilot planned for late 2021

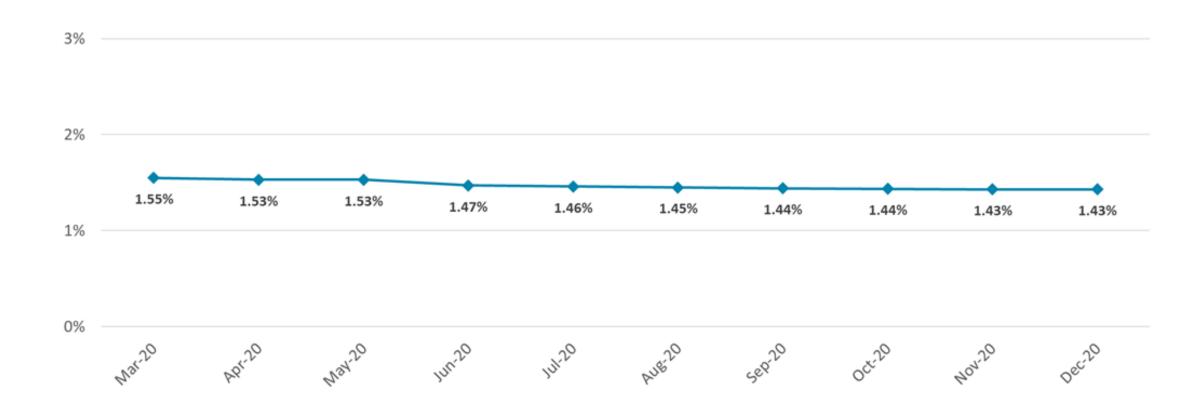
- Aiming for a Designated Agency, a Federally Qualified Health Center, a specialty treatment setting
- Iterate with feedback from providers, staff, patients



VHIE Data Access

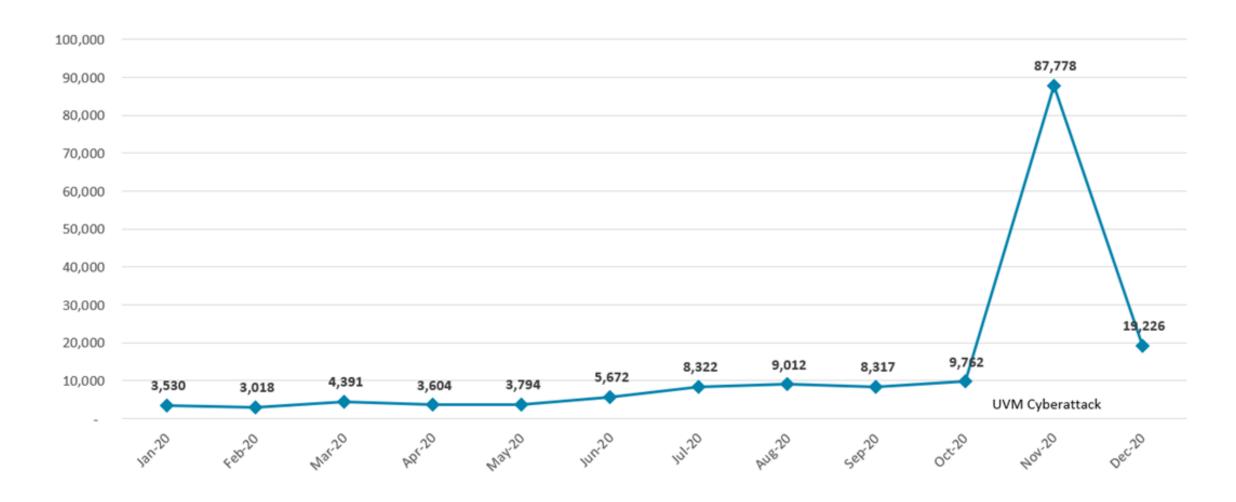


Percent of Vermont Patients Opted Out of the VHIE





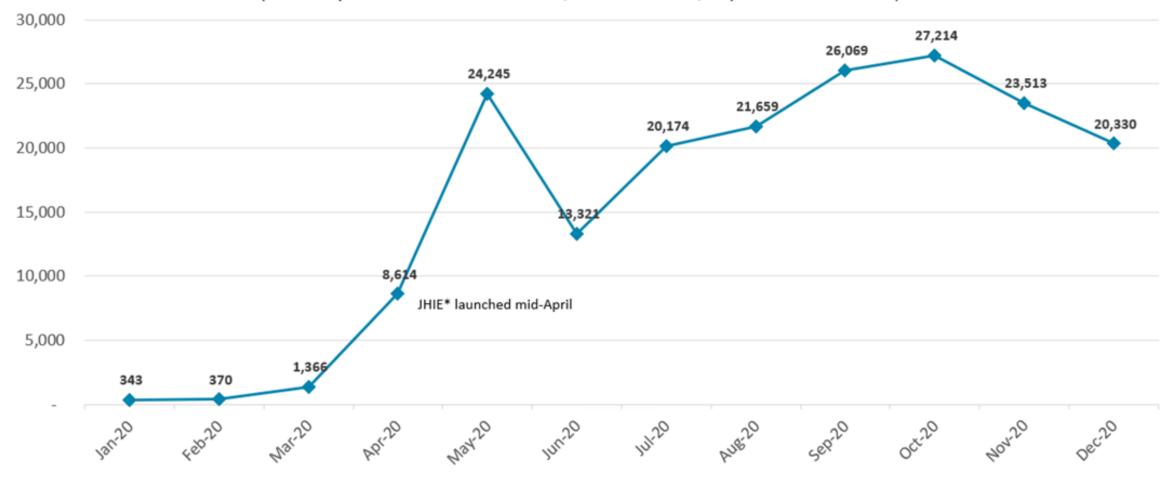
2020 VITLAccess Queries by Month





Queries of the VHIE via eHealth Exchange

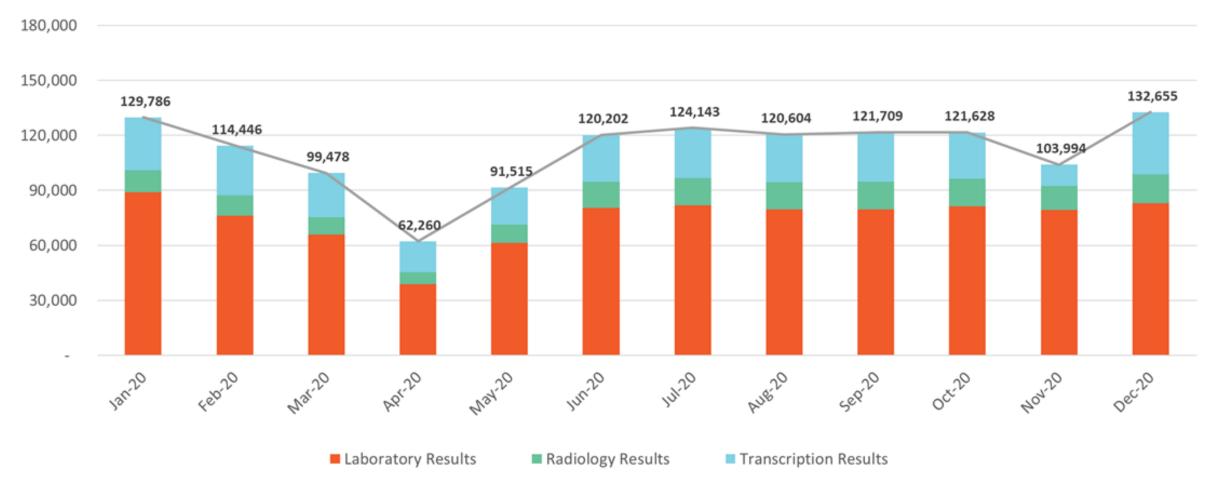
(University of Vermont Medical Center, Veterans Affairs, Department of Defense)



^{*} In April, the US Department of Veterans Affairs (VA) and the US Department of Defense (DoD) launched a joint health information exchange (JHIE) that aims to improve interoperability between the two agencies and their healthcare partners.



Results Delivery by Result Type



Number of providers receiving results = 568



- 1. Catalyzing the Progress Made in the COVID-19 Response
- 2. Complying with New Federal Interoperability Rules
- 3. Continuing to Support the Collaborative Services Project
- 4. Evolving Statewide Governance

Catalyzing the Progress Made in the COVID-19 Response

Action:

- Provide epidemiology team access to provider portal for case investigations
- Built and maintain daily hospitalization reporting, with data quality work, to support federal reporting and capacity planning
- Building interfaces to laboratories to collect COVID test results for VDH
 - 12 Live, 7 in Test, 9 getting started
 - Processed over 700,000 COVID-19 test results in 2020
- Building interfaces to pharmacies to collect records for the Immunization Registry
 - 57 new locations live, 71 in Test
- Custom population-level reports to support immunization planning
- EMT Teams Newly Using VITLAccess for Emergency Response
- Death Registry Feed to VHIE

Policy:

- State's VHIE Data Access Policy Updated to Include VDH Access
- Emergency Rule Allows for COVID-Specific Data Access by VDH Staff
- Proposed Bill Would Allow Bi-Directional Exchange between VHIE and Immunization Registry
 - State law currently prevents VDH from sharing immunization data with the VHIE

Proposed Work for the Steering Committee: Aid in the development of a strategy to further leverage existing health data infrastructure, like the VHIE, to support public health management

Complying with New Federal Interoperability Rules

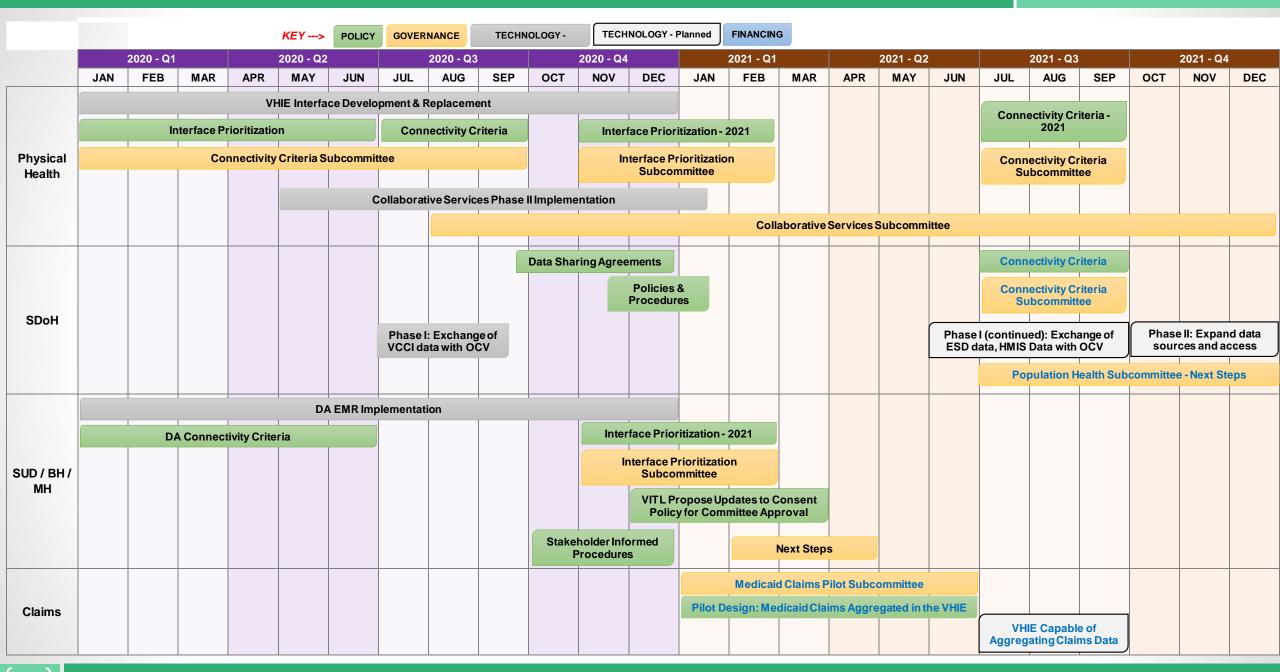
- In 2020, the Office of the National Coordinator (ONC) and the Center for Medicare and Medicaid Services (CMS) released final rules driving health care payers (insurers), health information exchanges, providers, and Information Technology (IT) developers to make data more accessible to people so they may take ownership of their care, and to the health care community so they can best coordinate and transition care.
- This year, these actors must begin complying with CMS' and ONC's new "interoperability rules".
- Proposed Work for the Steering Committee:
 - Stay apprised of how each actor required to comply with the new rules is doing so in Vermont.
 - Use that knowledge to aid in the development of this year's update to the state-wide health data strategic plan (HIE Plan).

Continuing to Support the Collaborative Services Project

- The Collaborative Services Project is a short-term project aimed at solidifying the VHIE's foundational capabilities to improve HIE services offered state-wide.
 - Phase I: Master Patient Index, Integration Engine, Terminology Services
 - Phase II: Data Warehouse
 - Phase III: Expanding Data Types Aggregated through the VHIE
- Proposed Steering Committee Work:
 - Through the Collaborative Services Subcommittee, continue to provide input to VITL in implementing Phase II
 and III of the Project and developing an IT Roadmap to illustrate how the new IT infrastructure will be used to
 meet the needs of health data users

Evolving Statewide Governance

- 2021 Subcommittees:
 - Collaborative Services
 - Connectivity Criteria
 - Interface Prioritization
 - Population Health (New)
 - Part II+ Group
 - Outcomes Based Certification (New)
 - VHIE/Medicaid Claims Pilot (New)



Evolving Statewide Governance: Outcomes Based Certification

What is OBC?

- Outcomes Based Certification (OBC) is a process by which CMS certifies a technical system based on outcome measures proposed by a state
- Once certified, the state can receive enhanced federal funding for system "operations"; to date federal funding has only been available for HIE development projects
- The VHIE is eligible for certification and the state intends to begin the certification process in early 2021

What's the role of the OBC Subcommittee?

• The OBC Subcommittee is an ad-hoc group gathered to aid the state in identifying measures that support certification and align stakeholders around VHIE measures of success/effectiveness

The Subcommittee met once and will meet again (2/26) before measures are presented to the Steering Committee and CMS in March.

Subcommittee members: Pat Jones, DVHA Payment Reform; Emma Harrigan, VAHHS; Georgia Maheras, BiState; MaryKate Mohlman, Blueprint for Health; Erin Carmichael, DVHA; Shelley Dimick, MMIS Certification Lead; Bechir Bensaid, ADS; Beth Anderson, Carolyn Stone, VITL

Evolving Statewide Governance: VHIE/Medicaid Claims Pilot

What is the VHIE/Medicaid Claims Pilot?

- A pilot to test the integration of claims data into the VHIE system.
- The pilot will focus on Medicaid claims data.
- VITL purchased a data management tool (Medicasoft) that has an established track record of integrating clinical and claims data.
- This year, the DVHA/VITL contract calls for the testing of an integrated clinical and claims data set.

What's the role of the OBC Subcommittee?

- To articulate the use cases for integrated clinical and claims data, with a focus on Medicaid claims.
- To aid VITL, and partners, in designing a technical solution for aggregating claims through the VHIE system.
- To identify any legal or data governance needs for aggregating claims data through a new system.
- To evaluate the pilot and aid in planning next steps.

The first subcommittee meeting is early March, and they will meet until the end of June, at a minimum.

Subcommittee members: Ena Backus, AHS; Lisa Schilling, DVHA; Sarah Lindberg, GMCB; MaryKate Mohlman, Blueprint for Health; Erin Flynn, DVHA Payment Reform; Katie Muir, OneCare VT; Carolyn Stone and Beth Anderson, VITL

Evolving Statewide Governance: Population Health Subcommittee

What is the Population Health Subcommittee?

 A group focused on advising VITL and other health data producers and aggregators on needed data sets to augment research and population health management efforts.

What's the role of the Population Health Subcommittee?

- In 2021, the subcommittee will chart a path forward for governing SDoH data in the VHIE system following the work done to share AHS data with OneCare VT using VHIE technologies (AIM grant).
- The subcommittee will benefit from new national data standards for clinical and claims data representing SDoH services.

The subcommittee will meet in the second half of the year.

Subcommittee members: Jimmy Mauro (or designee), BCBS; Georgia Maheras, BiState; MaryKate Mohlman, Blueprint for Health; Sarah DeSilvey (or designee), Gravity Project; TBD, OneCare Vermont; Adam Atherly, UVM Health Services; Emma Harrigan, VAHHS; Alison Krompf, DMH; Carolyn Stone, VITL

Interface Prioritization Subcommittee Update

Interface Prioritization Criteria

February 2021



Annual review and inclusion of new data types by Subcommittee

- The HIE steering committee asked for an annual review, an update to the prioritization criteria to accommodate the 3 new data types(MH/BH, Claims, and SDoH) and the inclusion of Fast Healthcare Interoperability Resources (FHIR) capabilities.
- **Sub Committee:** Bi-State, OneCare, the Vermont Department of Health and Blueprint representatives agreed to join VITL in an ad hoc subcommittee to come back to the larger group with a Criteria recommendation.



Where We Are Now

- Last years priorities got replaced by COVID needs for VT, however the Criteria last year mostly worked as expected!
- Sub Committee met in February to look at how best to roll in the new data types (Claims, Mental Health/Behavioral Health, and Social Determinants of Health (SDoH).
- The group also incorporated FHIR Capability of the EMR into the scoring.



New/Updated Categories for the Prioritization

- Changes to the Clinical Criteria are highlighted in Yellow
- Claims (New)

 – the group felt that having Claims be its own data type with its own scoring system and priority list made the most sense. This was due to a few factors:
 - Likely will be different resources working with Claims and Clinical and could be worked in parallel.
 - Potentially very different use cases
 - Completely different formats and frequency of data for Claim



New/Updated Categories for the Prioritization (con't)

- FHIR Capable new category was added for both Clinical and Claims scoring matrices.
- MH/BH Data group felt like this should be a data category within the existing clinical data prioritization.
- SDoH Data group felt like more information about what types of data are included in this, how it will be formatted, and the use cases for the data were needed before determining if it is separate like Claims or included into the Clinical category.



Review of Scoring/Applying the Criteria

- Included in the Spreadsheet
- There are a Key, Scoring Table and Interface Request tabs with example data for both Clinical and Claims.
- The example data is provided so everyone understands how the criteria and data points will look and function.



Wrap Up

- Next Meeting: March 22, 2021
 - Review Outcomes Based Certification Proposed Measures
 - Discuss Claims Pilot Plans
 - Meet the HIE Steering Committee Consultant
- Meeting Debrief: What do you need to be successful this year?