

Committee Name: Health Information Exchange (HIE) Steering Committee	Committee Chair: Ena Backus
Meeting Goals: 1. Introductions – Old and New Members 2. Committee Operations – Website Review and Charter 3. VHIE Update 4. Review 2021 Focus Areas and Subcommittee – 2021 Interface Priorities (VITL) 5. Wrap Up	Mtg. Facilitator: Emily Richards Mtg. Recorder: Marie Bernier Where: Virtual Meeting
	Conference Room: none
	Date: February 22, 2021 Time: 10:30am – 12:00pm
<input type="checkbox"/> May contain Confidential/Exempt information	Teams Meeting Information: +1 802-552-8456, 134416320#

Attendees (Present Bold) Non-Voting Member in Italics			
Name	Title	Name	Title
Ena Backus, Chair	Director of Health Care Reform, AHS	Simone Rueschemeyer	Executive Director, Vermont Care Network
Tracy Dolan/Jessie Hammond	Deputy Commissioner, DMH	Vacant	Blueprint for Health
Katelyn Muir	Data Quality Specialist, OCV	Beth Anderson	<i>CEO, VITL</i>
Emma Harrigan	Vermont Association of Hospitals and Health Systems	Sarah Kinsler	<i>Health Care Project Director, The Green Mountain Care Board</i>
Georgia Maheras	Bi-State Primary Care Association	Kristin McClure	<i>Chief Data Officer, ADS</i>
Jimmy Mauro	Director of Provider Reimbursement and Analytics, Blue Cross Blue Shield of Vermont	Emily Richards	<i>Program Director, HIE</i>
Laura Pelosi	VHCA Policy & Regulatory Affairs	Mahesh Thopasridharan	<i>Project Manager, HIE</i>
Sandy Rousse	CEO, CVHHH	Marie Bernier	<i>Executive Assistant, HIE</i>

Non-Committee Members present			
Name	Title	Name	Title
Carolyn Stone	Director of Operations	Ron Werner	CO Finance, AHS

Mary Kate Mohlman	Health Services Researcher, Blueprint	Tom Weigel	Medical Director, DMH
Rick Stevenson	Portfolio Manager, DVHA	Maurine Gilbert	Director of Client Engagement, VITL
Tim Tremblay	Data Analytics, Blueprint for Health	Sarah Lindbergh	Director of Health Systems Data Analytics, GMCB
Heriberto Troche	Medicaid Operation Admin, PIP/AHS	Bill Froberg	Lead Enterprise Architect, AHS
Bechir Bensaid	Program Manager, ADS/HIE	Joe Liscinsky	MMIS, DVHA
Michelle Sawyer	Medicaid Operation Admin, PIP/AHS	Alyson Krompf	Director of Quality, DMH
Dan Chase	Enterprise Architect, MMIS & IENE	Mike Smith	Secretary, AHS
Mort Wasserman	Retired Med School Professor		

	Agenda Item	Schedule
I.	Introductions – Old and New Members	10:30 – 10:40
II.	Committee Operations – Website Review and Charter	10:40 – 11:15
III.	VHIE Update	11:15 – 11:30
IV.	Review 2021 Focus Areas and Subcommittee – 2021 Interface Priorities (VITL)	11:30 – 11:45
V.	Wrap-Up	11:45 – 12:00

	Agenda Topic	Topic Facilitator	NOTES <i>(notes are provided in italics and blue)</i>	Action Items
I.	Welcome & Introductions	Ena Backus/Emily Richards	<i>Ena and Emily welcomed the group to the first official meeting of 2021. They called for group introductions and reviewed the agenda.</i>	
II.	Committee Operations – Website Review and Charter	Emily Richards	<i>Emily previewed the HIE Steering Committee website so members would know where meeting materials, minutes, member bios, and educational resources are kept. Emily then gave a brief background of the HIE Steering Committee, its purpose, mission, and vision, and lastly, she reviewed the Charter, and meeting logistics (see here, pages 1-6.).</i>	The Consumer Representative role on the Committee is still vacant. Please send any ideas for someone who could fill this role to Emily. Review the Charter and provide feedback to Emily no later than March 12 th .
III.	VITL Update	Beth Anderson, Carolyn Stone,	<i>Beth Anderson, CEO, reviewed Vermont's information Technology Leaders (VITL)'s highlights from CY20, which included</i>	

		<p>and Maurine Gilbert, VITL</p>	<p><i>Collaborative Services Phase 1 & 2, managed the transition to an opt-out consent policy, responded to various needs that arouse from COVID-19, provided patient data to UVMMC during the cyberattack, stakeholder engagement, expanded data, and preformed security updates (for the full list of highlights, see page 9.)</i></p> <p><i>Beth reviewed the CY21 development deliverables which include, but are not limited to, going live on the new platform, transitioning of interfaces, information blocking, and new data types, etc. VITL has also expanded on data access, and public health responses due to COVID (see page 10 for full list of deliverables.)</i></p> <p><i>Lastly, Beth reviewed the CY21 projects for VITL which include strategic planning, sustainability engagement, continue stakeholder engagement, improve outreach, and continue to work on interoperability roles.</i></p> <p><i>Carolyn Stone, Director of Operations, gave an update on the Collaborative Services project noting the updated project schedule that was adjusted for delays related to the COVID response. VITL brought on contractors with expertise to help fill the gap in staffing since some were re-deployed due to COVID. Status and next steps for the new platform include wrapping up the testing of the clinical data repository, completing the terminology code mapping for the Blueprint extract, validating and testing the reporting database, and completing the integration of terminology services.</i></p> <p><i>Carolyn discussed the COVID-19 related data and reporting they are continuing to do which includes daily reporting to hospitals, the Vermont Department of Health and to the provider portal. VITL is also collecting and reporting data on COVID-19 tests and immunizations (refer to pages 14 & 15 for more thorough reporting information.)</i></p>	
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			<p><i>Maurine Gilbert, Director of Client Engagement, with VITL announced the completion of their 2020 Annual Report and encouraged members to look it over and provide feedback, if any. Next Maurine briefly reviewed VITL’s consent policy and added that there is still a steady stream of Vermonters who have opted-out. VITL plans to continue stakeholder engagement regarding the consent policy in March 2021.</i></p> <p><i>Maurine review the PartII+ work to develop processes for aggregating and exchanging sensitive clinical data. The project explores the consent model for sharing substance use disorder treatment data and other sensitive data through the VHIE. For phase one VITL has put together an engaged advisory group to hold focus groups and advisory groups, and they are looking to recruit additional stakeholders, including patients, to gather more information and feedback while waiting for the implementation guidance from the CARES Act changes to 42 CFR Part 2 data. Phase two of the project will include a pilot that is planned for late 2021 and VITL is looking to partner with a Designated Agency, a Federally Qualified Health Center, and a specialty treatment setting to implement this Pilot.</i></p> <ul style="list-style-type: none"> • <i>Discussion: Ena asked about other states who may have had success with implementing changes in their consent policies in lite of the new 42 CFR Part 2 data, and Maurine stated that VITL plans to reach out to states soon to gather ideas regarding implementation of these changes into the VHIE.</i> <p><i>Maurine presented the following graphs pertinent to VITL’s work (see complete graphs here on pages 21-23):</i></p> <ul style="list-style-type: none"> • <i>percent of Vermonters who have chosen to opt-out of the Consent Policy.</i> • <i>VITLAccess queries by month</i> 	
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			<ul style="list-style-type: none"> • <i>Queries of the VHIE via eHealth Exchange</i> • <i>Results delivery by result type</i> 	
IV.	Review 2021 Focus Areas and Subcommittee – 2021 Interface Priorities (VITL)	Emily Richards	<p><i>Emily reviewed the focus areas for 2021 and the proposed work of the Steering Committee related to each of the following focus areas (a full description of each Subcommittee and their proposed work can be seen here on pages 25-32.):</i></p> <ul style="list-style-type: none"> • <i>Catalyzing the progress made in the COVID-19 response</i> <ul style="list-style-type: none"> ○ <i>Proposed Steering Committee work: Aid in the development of a strategy to further leverage existing health data infrastructure, like the VHIE, to support public health management.</i> • <i>Complying with the new federal interoperability rules</i> <ul style="list-style-type: none"> ○ <i>Proposed Steering Committee work: 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).</i> • <i>Continuing to support the Collaborative Services project</i> <ul style="list-style-type: none"> ○ <i>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.</i> • <i>Evolving statewide governance</i> <ul style="list-style-type: none"> ○ <i>This will be done through the work of the following Subcommittees, which will meet</i> 	Please contact Emily or Marie if you have proposed additions to subcommittee groups. Note, subcommittee members do not have to be members of the HIE Steering Committee.

			<p><i>separately from the Steering Committee. Emily shared a roadmap detailing when the work of each Subcommittee will be underway (VHIE roadmap can be seen here on page 29.)</i></p> <p><i>Subcommittees include:</i></p> <ul style="list-style-type: none"> ○ Collaborative Services ○ Connectivity Criteria ○ Interface Prioritization (update included on pages 33-39, please note that changes made to the clinical criteria are highlighted in yellow) (Interface Prioritization Matrix) ○ Population Health (New) ○ Part II+ Group ○ Outcomes Based Certification (New) ○ VHIE/Medicaid Claims Pilot (New) 	
V.	Wrap-Up	Emily Richards	<p><i>The next Committee meeting is March 22, 2021 and the agenda is a review of the Outcomes Based Certification proposed measures, a discussion of the Claims Pilot plans, and meeting the HIE Steering Committee Consultant.</i></p> <p><i>Emily asked, what do Committee members need to be successful this year? Ideas included reporting on emergency orders that organizations found themselves implementing due to COVID and updated presentations on work of specific organizations similar to member presentations that were done in 2020.</i></p>	