

# VHCURES Data Linkage Request Form

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GREEN MOUNTAIN CARE BOARD

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**FORM INSTRUCTIONS**

**Introduction**

The Vermont legislature authorized the collection of eligibility and claims data for Vermont residents to enable the Green Mountain Care Board (GMCB) to carry out its statutory duties that include determining the capacity and distribution of existing resources; identifying health care needs and informing health care policy; evaluating the effectiveness of intervention programs on improving patient outcomes; comparing costs between various treatment settings and approaches; providing information to consumers and purchasers of health care; and improving the quality and affordability of patient health care and health care coverage. (18 V.S.A. § 9410) The GMCB can make the VHCURES data set available to the extent permitted by the Health Information Portability and Accountability Act (HIPAA) and other pertinent state and federal laws and regulations.

The claims and eligibility data available under a data use agreement can be broadly grouped into three lines of business including commercial, Medicaid, and Medicare. The GMCB has independent discretion to make decisions regarding the use and disclosure of commercial insurer data. The Department of Vermont Health Access (DVHA) and the GMCB share discretion with respect to the Medicaid data subset. DVHA must approve the use and disclosure of Medicaid data and must sign the Data Use Agreement (DUA) for authorized users of the Medicaid data subset. Per an agreement with the federal Centers for Medicare and Medicaid Services (CMS), the Medicare data subset is available only to Vermont State Agencies and entities performing research that is directed and partially funded by the State of Vermont. CMS has granted GMCB independent discretion to make decisions regarding the use and disclosure of the Medicare data subset by Vermont state agencies.

The GMCB must approve all requests from state agencies and other organizations to link the VHCURES data with other identifiable data sources or any other data sources that could be used to reidentify individuals in the VHCURES data set.

Data Governance Council

The GMCB chartered the [Data Governance Council](#) (DGC) to oversee the stewardship of VHCURES including the development and revision of principles and policies to guide decisions on data use and

## VHCURES Data Linkage Request Form

disclosure. The DCG supports the GMCB decision-making process for applications requesting use, disclosure, and redisclosures of VHCURES data.

### Data Linkage Request Process

This Data Linkage Request Form (DLRF) must be filed by agencies and organizations with DUAs wanting to link the VHCURES data with any identifiable record-level data sources (records with personally identifying information (PII)) or other data sources that could result in the identification of individuals in the VHCURES data set. DVHA will review requests for linkages that include Medicaid data. The GMCB must approve all requests for these linkages before the linkages are performed by data users. Unauthorized linking of VHCURES data with other data sources without prior approval of the GMCB could result in forfeiture of the DUA. Entities responsible for disclosures of VHCURES data with PII will be subject to civil and criminal sanctions under applicable state and federal laws and regulations.

Requestors (Vermont state agencies or non-state entities with VHCURES DUAs) must provide a list of data sources to which the VHCURES data would be linked and identify which data sources include personally identifiable information including the specific identifiers within those data sources.

The Principal Investigator (PI) identified on the DUA must ensure that Individual User Affidavits (IUAs) are filed with GMCB for all data users involved in the data linkage project who have not already filed IUAs under the DUA. When signing the IUA, each data user attests to understanding the appropriate use and disclosure of the data set and agrees to comply with the requirements.

If after reviewing the DLRF GMCB disapproves any data linkages, the GMCB will provide a written explanation to the requesting organization holding the DUA identifying the reasons for denying any data linkages.

### General Instructions

Requestors must complete all required sections of the DLRF and submit an electronic copy of the completed request form, including all attachments, to [gmcldata@vermont.gov](mailto:gmcldata@vermont.gov)

Incomplete forms will not be reviewed until the requestor has provided all required information. A checklist is provided to help ensure that your form is complete. For questions about the data linkage request process, contact [gmcldata@vermont.gov](mailto:gmcldata@vermont.gov)

### Definitions

**Agent:** Means any individual or entity (e.g., a contractor, subcontractor, grantee, or subgrantee) acting on behalf of the Authorized User and subject to the Authorized User's control or accessing the Data Set on behalf of the Authorized User.

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**Authorized User:** The Authorized User (AU) is an organization or agency that is applying or has obtained a data use agreement (DUA). The AU signatory on the DUA has the authority to sign legally binding agreements on behalf of the organization or institution.

**Data Custodian:** The data custodian is responsible for the establishment and maintenance of physical and technical safeguards to prevent unauthorized access to and use of the data set. Agencies and organizations may designate multiple data custodians for different departments and programs. The data custodian(s) typically coordinate the receipt of the approved data set from GMCB's data consolidation vendor. The principal investigator may also be the data custodian. External agents approved by the GMCB through this Data Rediscovery Request Form to receive the data set or custom extracts must identify and file contact information for their data custodian(s) with the GMCB.

**Institutional Review Board (IRB):** An institutional review board (IRB), also known as an independent ethics committee (IEC), ethical review board (ERB), or research ethics board (REB), is a committee that has been formally designated to approve, monitor, and review biomedical and behavioral research involving humans.

**Personally Identifiable Information (PII):** The term PII refers to information that can be used to distinguish or trace an individual's identity, either alone or when combined with other personal or identifying information that is linked or linkable to a specific individual. The definition of PII is not anchored to any single category of information or technology. Rather, it requires a case-by-case assessment of the specific risk that an individual can be identified. It is important to recognize that nonPII can become PII whenever additional information is made publicly available when combined with other available information.

Source: <https://www.gsa.gov/reference/gsa-privacy-program/rules-and-policies-protecting-pii-privacyact>

**Principal Investigator (PI):** The Principal Investigator (PI) means the individual designated by the Authorized User to be responsible for ensuring compliance with all the restrictions, limitations, and conditions of use and disclosure specified in the VHCURES DUA. The PI may delegate technical responsibility to other personnel for the establishment and maintenance of security arrangements to prevent unauthorized access to and use of the data.

**Requestor:** The requestor is the Vermont state agency, organization, or entity requesting authorization from the GMCB to re-disclose the VHCURES data available under the data use agreement (DUA) to an external agent to perform work directed and funded by the Requestor. External agents may include contractors, subcontractors, grantees, sub-grantees, and other types of entities as identified by the GMCB.

**Research:** A systematic investigation, including research development, testing, and evaluation, designed to develop or contribute to generalizable knowledge.

**State Entity:** Vermont agencies, contractors, or other organizations performing work directed and partially financed by the State of Vermont.

**DLRF Checklist (For use by the Requestor. Requestors must include all required attachments and applicable optional attachments)**

**Completed Form**

- Section 1:** Data Linkage Project Description Including External Data Sources
- Section 2:** Linkage Data Management Plan
- Section 3:** Data Linkage Project Team
- Section 4:** Signatures

**Required Attachments**

- Attachment 1:** If this linkage project requires a redisclosure of VHCURES data to an external agent (contractor, subcontractor, grantee, sub-grantee), you must file a VHCURES Data Redisclosure Request Form unless one has already been filed and approved by the GMCB.
- Attachment 2:** If applicable to this data linkage request, attach Institutional Review Board approval document pertaining to the project for which the VHCURES data would be linked with other identifiable data sources.
- Attachment 3:** Other materials that may be requested by the GMCB for reviewing this form.

## DATA LINKAGE REQUEST FORM

### Section 1: Data Linkage Project Description

Describes the project for linking VHCURES DUA with data sources with personally identifiable information or with other data sources that could result in identifying individuals in the VHCURES data set. Answer every question in this section. If a question does not apply to the project, indicate that the item is "Not Applicable." Do not leave a question blank or the form will be deemed incomplete.

#### 1-1. Overview of VHCURES Linkage Project

<b>DATA USE AGREEMENT INFORMATION FOR REQUESTOR</b>
DUA Identifier (Assigned by the GMCB to the DUA): <b>DVHA 2018-DUA</b>

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DUA Agency or Organization Name: <b>Department of Vermont Health Access</b>
DUA Project Name (As stated in the DUA application or DUA): <b>Department of Vermont Health Access Analysis and Evaluation of Programs, Procedures, Benefits, and Payment Structures</b>
DUA Authorized User Signatory Name & Title: <b>Cory Gustafson, Commissioner, Department of Vermont Health Access</b>
DUA Principal Investigator Name & Title (if different from Authorized User): <b>G. Matthew Snodgrass, Health Services Researcher</b>
Data Linkage Project Lead's Name and Title (Contact managing the data linkage project for the organization with the DUA): <b>G. Matthew Snodgrass</b>
Brief Description of the Data Linkage Project (Summary of subsections 1-2-1 and 1-2-2): <b>The purpose of the requested linkage is to continue matching data from Department of Corrections (DOC) and data from the Vermont Clinical Registry (VCR) to VHCURES data in the same manner that is currently done under the existing DUA. The proposed linkage is to support ongoing Blueprint for Health program evaluation, quality improvement, and payment implementation work.</b>
Linkage Project Start Date: <b>Effective Date of the MOU</b>
Linkage Project End Date (Indicate if the project will be ongoing for the term of the DUA): <b>End Date of the MOU</b>
Does the linkage project require redisclosure of VHCURES data to an external agent?  ( ) No- Skip the External Agent Information Section below.  ( <b>X</b> ) Yes- Complete the External Agent Information section below. <b>You must file a VHCURES Data Redisclosure Request Form</b> or already have had the data redisclosure approved by the GMCB.
<b>EXTERNAL AGENT INFORMATION</b>
External Agent's Project Lead- Name and Title (External agent to whom VHCURES data would be redisclosed for the to support the data linkage project): <b>Karl Finison, Director of Analytic Development</b>
External Agent's Organization or Company Name:  <b>Onpoint Health Data</b>

## 1-2. Description of Data Linkage Project

*Answer the following questions about the project that requires linkage of VHCURES data with other data sources.*

- 1-2-1. Summarize the purpose and objectives of the proposed research requiring linkage of VHCURES data with other data sources.

The purpose of the requested linkage is to continue matching data from DOC and data from the VCR to VHCURES data in the same manner that is currently done under the existing DUA. The proposed linkage is to support ongoing Blueprint for Health program evaluation, quality improvement, and payment implementation work. As discussed with Green Mountain Care Board staff, the Blueprint wishes to link certain data with VHCURES data on a regular basis to support these ongoing efforts. With this request, the Blueprint seeks to link identifiable DOC data and data from the VCR to VHCURES data.

With the linkage facilitated by this request, Blueprint anticipates utilizing DOC data to examine the relationship between opioid use disorders, medication-assisted treatment, and the likelihood of involvement with the correctional system. Another potential use of the linked DOC data will be the development of profiles describing the functioning of the delivery system for medication-assisted treatment. It is expected that this work will be disseminated through publicly available profiles and presentation to key stakeholders including executive- and legislative-branch leadership.

Similarly, VCR data will be linked to allow the Blueprint to conduct quality improvement, payment implementation, and evaluation of Blueprint initiatives. For example, for the purposes of quality improvement and payment implementation, the Blueprint twice annually publishes practice-level and health service area-level profiles that contain several "hybrid" measures that requires linking of both claims and clinical data at the individual level. The Blueprint also anticipates potentially using linked clinical data in future iterations of its annual PCMH evaluation published in its annual report.

- 1-2-2. List and describe identifiable record-level data source(s) (records with personally identifiable information (PII)) you are planning to link with VHCURES data. List all personally identifiable information in the external data sources that would be linked with the VHCURES data. Explain the matching methodology for linking the data. If the VHCURES records could become identifiable during the linkage process, explain how the identity of individuals and their PHI will be protected from potential opportunities for disclosure.

As is currently done, Onpoint will continue to link VHCURES data with data from the VCR and DOC. Data from both the VCR and the DOC contain individually identifying record-level data. The DOC provides Blueprint with data from its Offender Management System, this data includes the following potentially identifying data elements: first name, last name, middle initial, date of birth, self-reported social security number, and address. The VCR contains the following potentially identifying information: first name, last name, date of birth, gender, and address. Onpoint receives VCR and DOC data via SFTP and saves the data securely on an encrypted drive. Prior to the linkage process, Onpoint hashes first name, last name, middle initial, and social security number. When linking VCR and DOC data to VHCURES, Onpoint uses a hierarchical process in which VHCURES members can be linked on varying combinations of data elements (e.g. hashed



first name, hashed last name, date of birth). Prior to linking DOC and VCR data to VHCURES, the original files containing live identifiers are destroyed.

1-2-3. Explain whether the proposed linkage project was review and approved by an Institutional Review Board (IRB). If yes, attach the IRB approval document as Attachment 2 to this form.

Generally, DVHA's evaluation activities are not subject to IRB approval. (<http://humanservices.vermont.gov/boards-committees/irb/how-do-i-know/>) DVHA's research and evaluation activities are subject to the approval of the head of the Agency, Department, division or office within the Agency of Human Services.

### 1-3. VHCURES Data for Linkage with Other Data Sources

Indicate the VHCURES data files that would be linked for this project.

File Type	Commercial Insurers	Medicaid <sup>1</sup>		Medicare <sup>2</sup>	Data Subset Specifications: Date Range and Gender, Age, Other Cohorts as applicable. <sup>3</sup>
Medical Eligibility-VT Residents	X	X		X	2007 - present
Medical Claims-VT Residents	X	X		X	2007 – present
Medical Eligibility- 5% National Sample	Not applicable	Not applicable		X	2007 – present
Medical Claims- 5% National Sample	Not applicable	Not applicable		X	2007 – present
Pharmacy Eligibility	X	X		Not applicable	2007 – present
Pharmacy Claims	X	X		Not applicable	2007 – present
<u>Medicare Part D Event</u> - VT Residents	Not applicable	Not applicable		X	2007 – present

<sup>1</sup> The Department of Vermont Health Access (DVHA) must approve uses and disclosure of Medicaid data..



Medicare Part D Event- 5% National Sample	Not applicable	Not applicable		X	2007 – present
Medicare <u>MEDPAR</u>	Not applicable	Not applicable		X	2007 – present

<sup>2</sup> Medicare data may only be used for research directed and partially funded by the state of Vermont.

<sup>3</sup> Refers to Custom Extracts defined under Definitions in this form supporting the data stewardship principle of using the “minimum necessary” data to support the stated research purpose of the project.

## Section 2: Linkage Data Management Plan

Section 2 relates to the policies and procedures to ensure the proper management of VHCURES data that may include personally identifiable information after being linked with other data sources. The GMCB recognizes the applicability of best practices for information security and privacy used in the CMS Data Privacy Safeguard Program (DPSP)<sup>1</sup>. Respond to every question about the technical and administrative safeguards over the data.

<sup>1</sup> “Data Privacy Safeguard Program Information Security and Privacy Best Practices” listed under Additional Resources published on <https://www.resdac.org/resconnect/articles/158>

### 2-1. Physical Possession and Storage of Data Files

2-1-1. Describe how the Principal Investigator and project leads will maintain an accurate and timely inventory of the users and locations of VHCURES data and any derived files that may contain personally identifiable information.

All data linked under this request will be linked by Onpoint, the Green Mountain Care Board’s (GMCB) VHCURES data custodian. DVHA and Onpoint will ensure a minimum necessary approach to access control of the data. At a maximum, 4 DVHA staff members and 6 Onpoint analysts will have temporary access to the data while it’s being worked with. The sensitive elements within the data files will be hashed upon receipt by Onpoint and the exposed elements encrypted. PII and/or PHI exposure will be limited to a maximum of 10 users and will be temporary while the data is being hashed/encrypted. Onpoint’s Information Security Program is HIPAA-compliant and HITRUST certified and follows data security best practices. Data residing in Onpoint’s systems will be protected by role-based and user access controls and always encrypted in motion and at rest. Access to sensitive data fields, such as identifiers, will be encrypted and redacted leveraging Oracle’s Advanced Security Option (ASO) during all phases of data management except for when needed on a very limited basis. User access is terminated immediately when no longer necessary and all user accounts across Onpoint’s systems are reviewed monthly. Audit logging of access to sensitive data is captured indefinitely. Multiple failed access attempts to the database are logged and real-time alerts are sent to the security team.

2-1-2. Describe any training that linkage project staff have had on protection of sensitive data with personally identifiable information protected health information, and other sensitive financial, economic, and personal information.

DVHA will ensure all State staff interacting with the linked dataset have successfully completed AHS HIPAA Training. Onpoint conducts annual, in-person security awareness training with a security expert as well as annual HIPAA privacy training with a specialized HIPAA attorney. New employees are required to take the security training upon hire. Regular security emails are circulated to all staff to keep them abreast of any new threats.

2-1-3. Describe the protocol that would be followed by the linkage project staff to report and mitigate a breach in the security of data with personally identifiable information.

Any security incident will be reported to the DVHA contacts contained in this document and in accordance with the contract and BAA between DVHA and OnPoint. Policy governing the reporting of security incidents by Onpoint is specified in the contract and BAA between DVHA and Onpoint. The BAA between DVHA and Onpoint is available at your request. Additionally, Onpoint maintains an Incident Response Plan which is reviewed annually. Onpoint Health Data's Information Security Program, a comprehensive policy document which includes sub-policies for access control, encryption, risk management, contingency planning, personnel security, network security, workstation security, server security, physical security, and other aspects of information security management. The document is reviewed annually and can be made available.

2-1-4. What actions will be taken to physically secure the data files that may contain PII during or following the linkage? This includes files on servers, local workstations, and hard media.

All data linkages conducted under this request will be conducted by Onpoint, the VHCURES data custodian. All data in transit and at rest is encrypted and only accessible to only the necessary individuals. Files are encrypted using PGP encryption and data residing in the Oracle database resides on encrypted disk as well as is protected using Oracle's Advanced Security Option (ASO). No workstations contain sensitive data and if removable hard media is used, it would only contain PGP encrypted files. Onpoint also has a secure perimeter to its network with controls including but not limited to, redundant firewalls, load balancers, intrusion detection and prevention systems and reverse proxies. There is a Data Loss Prevention (DLP) system installed that monitors and blocks the potential, unauthorized movement of sensitive data.

2-1-5. Please explain if there is any plan to transmit, store, or transfer the data set or any derived files following the linkage between files outside the continental United States.

DVHA does not intend to transmit, store, or transfer the data set or any derived files outside the continental United States.

## 2-2. Data Sharing, Electronic Transmission, Distribution

2-2-1. Describe what the policies and procedures will be for sharing, transmitting, and distributing the VHCURES data set and any derived files that may include PII with members of the linkage project team.

Linking of data will be done using hashed identifiers and will be conducted only by the GMCB's data custodian, Onpoint. Onpoint will only distribute reports containing aggregated data on behalf of Blueprint. Sharing, transmitting and distributing the VHCURES data does not occur for this project. Data is received over SFTP to Onpoint Health Data using their Solar Winds Serv-U Secure Managed File Transfer system.

2-2-2. The GMCB's preferred method of transmission of the data files is through a secure File Transfer Protocol (SFTP) transmission. If you anticipate requesting or transferring files for this linkage project via encrypted hard media, please explain the reasons that SFTP is not an option.

DVHA and its contractor, Onpoint, are happy to use SFTP transmission of data.

2-2-3. Describe methods for tracking, monitoring, and auditing access and use of the VHCURES data set or derived extracts of the data set in use for this data linkage project.

All access to sensitive data within the Onpoint database is logged for auditing purposes. All SQL statements are logged along with the person performing them. Logs are stored separately from the database.

2-2-4. Describe the policies and procedures and procedures that will be used to define data access privileges for individual users of the data, including the project leads, data custodians, analysts and researchers, and IT support.

All data access will be controlled by Onpoint, the VHCURES data custodian. Onpoint will grant access to sensitive data on an as-needed basis only. Sensitive data elements are redacted using Oracle's Advanced Security Option (ASO) for all queries except when absolutely necessary. All data permission requests are reviewed by a data owner at a Director level and all reviewed by the Chief Information Officer.

2-2-5. Explain your technical safeguards for data access (which may include password protocols, log-on/log-off protocols, session time out protocols, and encryption for data in motion and data at rest).

Onpoint's technical safeguards for data access include:

- Data is always encrypted in motion and at rest.
- Workstations lock automatically after 10 minutes.
- VPN sessions are logged off after 12 hours.
- Password policies and controls are in place to enforce complex passwords, password expirations after 90 days, password age, etc. Onpoint could make their password policies available upon request.

2-2-6. If additional copies of the VHCURES data used in this linkage project will be housed in separate locations, please describe how the data will be transferred to these locations.

Additional copies of the VHCURES data used in this linkage project will not be created

## 2-3. Completion of Research Tasks and Data Destruction

2-3-1. Describe how the PI for the DUA will complete the Certificate of Data Destruction for the data and derived files used in this linkage project will be deleted, destroyed or rendered unreadable upon completion of the project.

Upon request, Onpoint would complete the Certificate of Data Destruction after data destruction is complete. We use data and media sanitization and destruction processes consistent with NIST special publication 800-88.

2-3-2. Describe the policies and procedures that will be used to protect the data and derived files from this linkage project when individual members of the project team terminate their participation in this project.

Staff with active IUAs are requested to notify the PI if they no longer need access to the VHCURES database or are leaving DVHA. In addition, the PI will periodically (quarterly or on a less frequent schedule as determined in cooperation with the GMCB) contact all staff with active IUA to request a description of current or planned projects or if they no longer need access to VHCURES data. The PI (or delegate) will notify the GMCB when a staff member leaves or no longer requires access to the VHCURES data. Should an individual Onpoint staff member no longer need access to sensitive data, their access would be revoked immediately and documented in Onpoint's ticketing system.

## Section 3: Data Linkage Project Team

### 3-1. Data Linkage Project Lead (From agency or organization with the GMCB VHCURES DUA)

Please provide contact information for the project lead for data linkage as identified in the table under 1-1 in this form.

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Name and Title of the Data Linkage Project Lead

G. Matthew Snodgrass, Health Services Researchers

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Project Lead's Agency or Organization Name

Department of Vermont Health Access – Blueprint for Health

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Street Address

NOB 1 South, 280 State Dr

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City	State	Zip
Waterbury	VT	05671

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Telephone 802.241.0392	Email matthew.snodgrass@vermont.gov
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### 3-2. Data Custodian(s) for Data Linkage Project

Please provide contact information for the data custodian(s) who will be storing and managing the VHCURES data set or derived files during and following the data linkage.

Name and Title of Data Custodian James Harrison, President and CEO		
Organization Onpoint Health Data		
Street Address 55 Washington Avenue		
City Portland	State ME	Zip 04101
Telephone (207) 430-0682	Email jharrison@onpointhealthdata.org	

Name and Title of Data Custodian		
Organization		
Street Address		
City	State	Zip
Telephone	Email	

Name and Title of Data Custodian		
Organization		
Street Address		
City	State	Zip
Telephone		Email

### 3-4. Individual Users

*List the anticipated individual data users for the data linkage project including internal agency/organization staff and contractors and subcontractors, grantees, and sub-grantees and their roles in the project. Signed IUAs for individual users must be filed prior to the VHCURES data linkage and anytime during the project. You are not required to file new IUAs for state employees or employees of non-state entities who have already filed IUAs under current VHCURES DUAs.*

Name	Organization	Project Role or Title
G. Matthew Snodgrass	DVHA	DVHA Project Lead/Health Services Researcher
Mary Kate Mohlman	DVHA	Health Services Researcher
Tim Tremblay	DVHA	Blueprint Data Analytics and Information Administrator
Drew Bennett	DVHA	Blueprint Data Analyst
Joanna Duncan	Onpoint Health Data	Director of Analytics & Operations
Karl Finison	Onpoint Health Data	Director of Analytic Development
Carolyne Conrad	Onpoint Health Data	Client Account Manager
David Jorgenson	Onpoint Health Data	Lead Health Data Analyst
Amy Kinner	Onpoint Health Data	Lead Health Data Analyst
Katherine Lydon	Onpoint Health Data	Senior Health Data Analyst
Sam Chick	Onpoint Health Data	Health Data Analyst

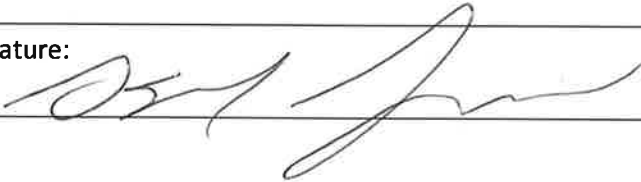
Katie Oberg	Onpoint Health Data	Health Data Analyst
Adam Bakopolus	Onpoint Health Data	Health Data Analyst
Pete Farnsworth	Onpoint Health Data	Senior Systems Developer & Database Architect

### Section 4: Signatures

All statements made in this application are true, complete, and correct to the best of my knowledge.

DUA Principal Investigator (Requestor)/Name: **G. Matthew Snodgrass**

Signature:



Date:

5/18/18

Data Linkage Project Lead Name (if different from Principal Investigator):

Signature:

Date:

### GMCB Processing Section For GMCB Use Only

VHCURES Data Linkage Project Request Form Deemed Complete:

DVHA Medicaid Data Linkage Approval Date (Applicable to Medicaid data):



**GMCB Data Linkage Approval Date/GMCB Initials:**

**Date Requestor Notified of Approval: Data**

**Linkage Denial Date:**

**Date Notified of Denial/GMCB Initials**

**Summary of reasons for denial:**

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