Health Information Exchange/Health-IT Update to the Green Mountain Care Board

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Overview

- New DVHA Staff Introductions
- Health Information Exchange (HIE) Consent Policy
- 2019 HIE Steering Committee
- VITL/DVHA Contract Update
- HIE Program Update

HIE Consent Policy

- Legislative Discussion
- Next Steps

HIE Steering Committee Proposed Consent Implementation Process

- 1. DVHA proposes a draft consent policy.
- 2. DVHA facilitates stakeholder workgroups to determine how best to implement policy; stakeholder workgroups result in a recommendation.
 - Stakeholders include the HCA, ACLU, disability advocates, provider and patient representatives, and others
- 3. The HIE Steering Committee reviews the stakeholder workgroup recommendation and maps out how to successfully implement a change in the consent policy.
- 4. The GMCB reviews/approves the consent policy and the implementation strategy as part of the Health Information Technology Plan.
- 5. DVHA, in consultation with the HIE Steering Committee, reports to stakeholders, the General Assembly, and the GMCB frequently as plans are developed and executed.

Guiding Principles for Implementation

- Build on the consent policy management successes of other states and systems
- Prioritize patient education and access to information
- Work to reduce or limit burden associated with consent management and envelop changes to processes into broader consent management practices
- Respect existing state and federal law regarding sharing of specific types of health data
- Honor consent preferences that have already been expressed by Vermont patients
- Assess feasibility of different consent management practices and plan implementation strategies accordingly (e.g., consent collected and transmitted by health providers, self-service consent management, consent transmitted by payers)

2019 HIE Steering Committee - Membership

Name	Role	Organization / Population Represented	
Michael Costa	Chair / Voting Member	Vermont's Agency	
Tracy Dolan	Voting Member	Vermont's Department of Health	
Jimmy Mauro	Voting Member	Blue Cross Blue Shield of Vermont Payer Representative	
Simone Rueschemeyer	Voting Member	Vermont Care Partners Mental Health & Substance Use Representative	
Georgia Maheras	Voting Member	Bi-State Primary Care Association Primary Care Representative	
Emma Harrigan	Voting Member	Vermont Association of Hospitals and Health Systems Hospital Care Representative	
Linda Leu	Voting Member	A person who engages with the health care system	
Tyler Gauthier	Voting Member	OneCare Vermont Accountable Care Organization Representative	
Beth Tanzman	Voting Member	The Blueprint for Health Program	
Sarah Kinsler	Non-Voting Member	The Green Mountain Care Board	
Andrew Laing	Non-Voting Member	The Agency of Digital Services	
Emily Richards	Operational Support / Non- Voting Member	The Department of Vermont Health Access' Health Information Exchange Unit	
Michael Smith	Non-Voting Member	VITL, Vermont's Health Information Exchange Operator	

HIE Steering Committee

- 2019 Committee Goals:
 - In Progress: Assess potential changes in the State's consent policy and the Steering Committee's related action
 - In Progress: Conduct an assessment of the State's data governance efforts and define the Steering Committee's role in relation to existing work
 - In Progress: Evaluate HIE proposals, current work, and the HIE Plan implementation
 - In Progress: Draft a *Technical Roadmap* that reflects a 3-5 year investment and growth strategy related to key HIE strategic objectives
 - Not Started: Develop the 2020 version of the Financing/Sustainability Model
 - Not Started: No later than November 1: update the HIE plan with the evaluation results, *Technical Roadmap*, Financing/Sustainability Model, items left unaddressed in 2019, and tactical plans for 2020

Technical Roadmap - Plan of Engagement

- DVHA hired national experts to support development of HIE Technical Roadmap.
 - Their approach is to develop an actionable roadmap that balances known immediate needs with future changes.
 - They will work with the HIE Steering Committee to develop the guiding principles for a minimally disruptive evolution that focuses on safeguarding investments in data, continually advancing HIE applications, and avoiding vendor lock-in.
- The Roadmap development process includes:
 - Project Management
 - Local and National Research
 - Stakeholder Planning & Engagement
 - Iterative Roadmap Development

VITL/DVHA Contract Update

Maintenance & Operations

- Operations of the VHIE System (Systems Management)
- Identity Management
- Data Access
- Consent Management
- Data Extraction and Aggregation
- Security
- Operational Goals:
 - Further automate the consent management process, increasing the number of records with consent documented to 42%
 - Reduce duplicate records in the VHIE by 20% from the December 1, 2018 baseline (40% reduction in 2018)

System Development and Enhancements

- Data Access
 - Increase the number of providers with direct access to data in the VHIE via direct query (cross community access) and/or single sign on from the EHR to the VHIE provider portal
- Data Extraction and Aggregation
 - Maintain/increase interface connections
 - Develop connectivity "work plans" with each health care organization to target increased Connectivity Criteria tiers
- Data Quality
 - Deploy new terminology services and integration engine tools in collaboration with HIE partners

End-User Services				
Reporting Services	Notification Services			
Analytics Services	Consumer Tools			
Care Coordination Tools	Patient Attribution & Dashboards			

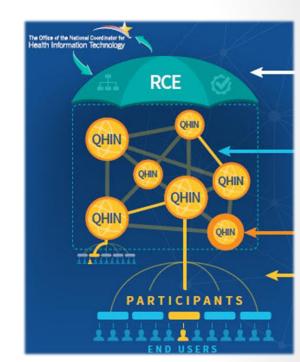
Exchange Services					
Data Extraction & Aggregation			Data Access		
Interoperability	Data Quality		Data Governance		
Foundational Services					
Identity Management		Consent Policy & Management			

Security

Provider Directories

HIE Program Update

- HITECH funding opportunities expire in late 2021 DVHA is working to transition from HITECH to MMIS
- Proposed CMS/ONC rules have the potential to drive interoperability and simplify patient access to records. The rules reinforce the Trusted Exchange Framework and Common Agreement (TEFCA)
 - CMS aims to create a national HIE hub with regional inputs. Impacts on state's work are not fully known.
- Partnerships are expanding
 - Vermont is partnering with Maine to develop a shared services model.
 - The shared services model is supported through a collaboration of the Blueprint for Health, VITL, and OneCare Vermont.
 - NE states are exploring strategies for maximizing data collection through prescription drug monitoring systems and sensible connections to HIEs and the feeding electronic health record systems.



Questions?