

GREEN MOUNTAIN CARE BOARD

Data Governance Council

June 6, 2023

2:00pm, via Microsoft Teams

Attendance (Voting Members)

Susan Barrett, Council Chair and Executive Director, GMCB

Sarah Kinsler, Director of Health Systems Policy, GMCB

Cathy Fulton, Executive Director, VPQHC

Kristin McClure, Chief Data Officer, ADS

Jessica Holmes, Board Member, Green Mountain Care Board (appointed during this meeting)

Jessie Hammond, Public Health Statistics Chief, VDH

(absent) Lauri Scharf, Manager of Informatics, Bi-State Primary Care Association

Others Present

Attendance report available upon request.

Call to Order, Chair's Report

Susan Barrett called the meeting to order at approximately 2:01 pm. Susan provided a brief update on Board activities.

Approve December Meeting Minutes

The Council voted (6-0) to approve the minutes from April 2023.

Staff Updates

Veronica provided an update on the VHCURES RFP. Bids are due on June 28, 2023. Kate provided an update on the HIE Plan amendment that was approved by the Board at its 5/31/2023 meeting. Kate shared that there was a meeting on May 31 to kick-off discussions on integration of data from VHCURES with data from VHIE. Cathy Fulton added that she sees this as a great opportunity to improve meaningful use of Vermont's health care data.

VDH Data Use Agreement Attachment D Amendment

Veronica explained that Attachment D for a DUA is the addendum for state agencies with replacement language for sub-agreements, insurance, defense and indemnity, etc. to make the DUA language work for a Vermont state agency. This proposed amendment will add a sub-section to the VDH's attachment D referencing allowing the Birth Information Network to access full date of birth in VHCURES and linkage with birth vital records. The law that establishes the BIN specifically grants permission to use VHCURES DOB. The council voted 5-0-1 to approve this amendment. Jessie Hammond recused.

VHCURES Rule Change

Russ McCracken shared that GMCB is proposing a change to the Data Release Rule to add a new Section to Section 9.201 that says "restricted" data under the rule may only be used or disclosed for certain specified permitted disclosures under HIPAA. This change brings use restrictions that were previously established through the GMCB's Data Use and Disclosure Manual, Application Process, and Data Use Agreement into the Rule itself so that the possible uses and disclosures of restricted data elements are clearly stated and established in Rule. The goal of the revisions is to put limitations on disclosure of "restricted" data into the rule. Russ also provided an overview of the Rulemaking process. Council members expressed a variety of questions and concerns and requested more time to contemplate this change. They asked for more information at the next meeting.

Council member questions and comments:

- How will this change impact the data integration efforts in the future?
- What is the impact to the minimum number of elements that would have to be included in the data sets to be integrated into the HIE for successful and accurate matching of records?
- How would this change in the Rule impact use of the data with an ACO or other entities engaged in health care reform activities, now or in the future, if they were to want to access claims through VHCURES? For an ACO, is there possibility it would get data through VHCURES versus directly through their contractual arrangements with payers and their provider networks as they do today?
- Would public health activities include quality improvement, evaluation and program monitoring projects? This might be part of stakeholder engagement to ensure we get a clear understanding of use cases today.
- Are we closing any pathways with this Rule change in accessing data elements that we need to do the job?
- Why limit access to exclude health care operations? What falls under the scope of operations versus research and public health? Need to consider these questions and use cases (current and potential future) for both VHCURES and VUHDDS.
- Would the Blueprint for Health's current activities be impacted, and what is risk for impact for future activities?
- Would like to better understand the vision for the next procurement of VHCURES in terms of new requirements and use cases.
- Would like to hear more about the stakeholder group and the process for engaging stakeholders. In addition to public hearings and engaging specifically with BCBS-VT and current data users, recommend adding AHS central office staff as a stakeholder.
- Want to see quality included as an essential health care activity.
- Need to take time to be thoughtful about this change because it may have broad implications.
- Recommend ensuring that current state agency users would not be affected by this change.
- We don't want to unintentionally prevent the good the state wants to do to improve health care for all Vermonters.
- This proposal needs more discussion, consideration, and a deeper understanding of the impacts before moving forward.

At the conclusion of this discussion the Council and GMCB agreed that staff will work on addressing the questions expressed today to discuss at the next Council meeting to see how it impacts Council sentiment about a revision to the Rule.

Public Comment

Eric Schultheis expressed appreciation for the past effort by GMCB to move operational activities out of Rule by using well-specified guidance instead, to reduce the need to revise Rules, which is a very lengthy process.

New Business

None.

Adjourn

The Council voted (6-0) to adjourn at approximately 3:32pm.

Next meeting is Tuesday August 1, 2023. This will be a virtual meeting via Microsoft Teams, although the large conference room at 144 State Street in Montpelier will also be available for anyone who wants to attend in person.