

2022 Comprehensive Five-Year Update to the Health Information Exchange Strategic Plan & 2023 Connectivity Criteria

Staff Review

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December 14, 2022

Process Reminder



- **October 31:** AHS submitted HIE Plan and Connectivity Criteria to GMCB.
- **November 16:** AHS and VITL present HIE Plan and Connectivity Criteria; Board requests changes to HIE Plan.
- **December 9:** Resubmission of HIE Plan.
- **December 14:** Staff recommendation to GMCB on HIE Plan and Connectivity Criteria; potential Board votes.

Special public comment period:
November 3 through December 2.

Public Comment



- We received one public comment from a member of the GMCB's General Advisory Committee related to need for statewide data sharing among facilities, which we shared at the 11/14 Board meeting.
- We did not receive any other public comment.

Staff Recommendations



1. Approve 2022-2027 HIE Strategic Plan.
2. Approve Connectivity Criteria for 2023.

Review and approve Health Information Exchange Strategic Plan (HIE Plan) *previously known as the Health Information Technology (HIT) Plan*

- 18 V.S.A. § 9351(a):
- “The Plan shall
 - be revised annually and updated comprehensively every five years to provide a strategic vision for clinical health information technology.”
 - include the implementation of an integrated electronic health information infrastructure for the sharing of electronic health information among health care facilities, health care professionals, public and private payers, and patients.”
 - include standards and protocols designed to promote patient education, patient privacy, physician best practices, electronic connectivity to health care data, access to advance care planning documents, and, overall, a more efficient and less costly means of delivering quality health care in Vermont.”

GMCB Oversight of Connectivity Criteria



Review and approve Connectivity Criteria

- Under 18 V.S.A. § 9352(i)(2), Vermont Information Technology Leaders (VITL) must “establish criteria for creating or maintaining connectivity to the State’s health information exchange network” and provide those criteria to the Board by March 1 each year.

GMCB Oversight of HIE



18 V.S.A. § 9351 (a)(2):

- The Board shall “approve, reject, or request modifications to the Plan within 45 days following its submission; if the Board has taken no action after 45 days, the Plan shall be deemed to have been approved.”

18 V.S.A. § 9375 (b)(2)(A):

- The Board shall “Review and approve Vermont’s statewide Health Information Technology Plan pursuant to section 9351 of this title to ensure that the necessary infrastructure is in place to enable the State to achieve the principles expressed in section 9371 of this title [Principles for Health Care Reform].”

18 V.S.A. § 9375 (b)(2)(B):

- The Board shall “Review and approve the criteria required for health care providers and health care facilities to create or maintain connectivity to the State’s health information exchange as set forth in section 9352 of this title. Within 90 days following this approval, the Board shall issue an order explaining its decision.”

GMCB Review Criteria for HIE Plan



Eight criteria/questions were used by GMCB to review and analyze the Health Information Exchange Plan.

1 Is the HIE Plan consistent with the HIT Plan requirements of 18 V.S.A. § 9351? Does the strategic vision in the five-year comprehensive update align with the intent of the Plan as described in 18 V.S.A. 9351?

HIT Plan Requirements in 18 V.S.A. § 9351



Support statewide use of electronic health information in patient care, health care policymaking, clinical research, health care financing, and continuous quality improvements	Addressed through goals and described in various sections of the Plan. ✓
Educate the general public and health care professionals about the value of an electronic health infrastructure for improving patient care	Addresses need through description of structure/process. ✓
Ensure the use of national standards for the development of an interoperable system	Plan guided by standards. ✓
Propose strategic investments in equipment and other infrastructure elements	Describes investments through current and future funding options and development VHIE as health data utility. ✓
Recommend funding mechanisms for the ongoing development and maintenance costs of a statewide health information system	Current funding described, comments on future funding options. ✓
Incorporate the existing health care information technology initiatives to the extent feasible in order to avoid incompatible systems and duplicative efforts	Describes the need for continued strategic solutions to streamline, increase efficiency, reduce redundancy through investment in new technologies. ✓
Integrate the information technology components of the Blueprint for Health, Master Patient Index, other Medicaid management information systems, and any other information technology initiatives	Plan does address integration efforts around Blueprint for Health, MPI, MMIS and other initiatives. ✓
Address issues related to data ownership, governance, and confidentiality/security of patient information	Plan recognizes these areas are necessary to address as vision expands, detailed strategy to be developed. ✓

2 Is the HIE Plan consistent with the Principles for Health Care Reform in 18 V.S.A. § 9371, and will it help achieve the State's health reform goals?

Yes. Plan broadly aligns in a variety of ways with the principles for health care reform.

VHIE goals support improvements in health care delivery, health outcomes, enriched health care data collection and analysis.

3 Is the HIE Plan consistent with other relevant legislation?

The Plan speaks to efforts toward these goals.

GMCB and AHS staff will continue to work together to identify strategic solution options for meaningful and secure data integration of claims and clinical data.

Sec. 4. Of Act 167 requires:

- continuation of work to create one health record for each person.
- data integration strategy in 2023 HIE Strategic Plan to merge and consolidate claims data in the Vermont Health Care Uniform Reporting and Evaluation System (VHCURES) with the clinical data in the HIE.

4 Does the HIE Plan incorporate national best practices and expertise as well as feedback from Vermonters, including key HIE constituents (VITL, State of Vermont HIE stakeholders, and other private HIE providers), health care providers, and individuals?

National Best Practice:

- The Plan does incorporate best practices around the development of Health Data Utilities, and addresses building on previous work around interoperability.

Stakeholders:

- Certain agency and provider stakeholders are members of the HIE Steering Committee. Work is underway to expand the stakeholder reach as well as to incorporate stakeholders in the development of the data governance structure for the Unified Health Data Space.
- An expanded range of stakeholders was involved in AHS's vendor interview process to develop the data strategy which informed the development of this Plan.

5 To what degree are privacy concerns and privacy protections addressed?

The Plan includes descriptions of current and planned for privacy and security protections including certifications and practices, such as:

- The VHIE has adopted the NIST Cybersecurity Framework (CSF) to manage its IT security risk.
- The establishment of a data governance council will include a privacy attorney/expert.
- The HIE Steering Committee will request representation from patient privacy advocates and IT privacy experts.
- The VHIE project management process includes provisions for privacy, security, and consent rules to be identified, gathered, included, implemented and validated.

6 How does the plan address and plan for increased capacity needs as the strategic vision expands?

- The Plan recognizes that the VHIE will continue to require enhancements to build on core technology components already in place. Examples provided include data marts, analytics and optimizing data useability.
- The Plan describes Vermont's current HIE structure and future planned enhancements.
- AHS, in consultation with the HIE Steering Committee, is responsible for administering the Plan, which includes designating VITL to operate the HIE, and overseeing the implementation of the HIE development of its standards and protocols, including the manner in which it is operated. (18 V.S.A. § 9351 and 18 V.S.A. § 9352)

7 Are the proposed strategies within the plan feasible, realistic, achievable during the timeframe covered by this plan (2023-2027)?

- The Plan includes description of feasibility assessment for envisioned VHIE enhancements.
- The Plan describes the use of Advance Planning Documents (APD) as required by Centers for Medicare and Medicaid services (CMS) for federally funded IT system projects. APDs describe the need for, feasibility of, projected costs and benefits of an information system or services acquisition.

8 How aligned is the Plan with current legal and technical constraints/considerations?

- Legal considerations are described throughout the Plan in the context of HIPAA, Business Associate Agreements (BAAs), state and federal privacy laws.
- Technical considerations are addressed throughout the Plan in the descriptions of technical infrastructure capabilities and planned enhancements. Ensuring the VHIE is positioned to be sustainable and scalable over the next few years the following areas are noted as key in terms of technology: ease of use; bidirectionality of data; data matching; analytics capabilities; system efficiencies; and tools.

Connectivity Criteria Review



Building on statutory requirements:

1 Are the proposed Connectivity Criteria in alignment with HIE Plan goals, and will they support implementation of the HIE Plan and achievement of the State's health reform goals?

Yes. This year's Connectivity Criteria remain aligned with the HIE Plans goals and structure, and are designed to support increased availability of high-quality data.



2 Are the proposed Connectivity Criteria sufficiently clear to be operationalized by VITL, the State of Vermont, and health care provider organizations?

Yes. These criteria were developed to expand providers' ability to submit and receive data from the VHIE. In September of 2022, The HIE Steering Committee approved the recommendation that the criteria remain unchanged for 2023 from that of 2022.



Board Duties



18 V.S.A. § 9351 (a)(2):

- The Green Mountain Care Board shall approve, reject, or request modifications to the Plan within 45 days following its submission; if the Board has taken no action after 45 days, the Plan shall be deemed to have been approved.

18 V.S.A. § 9375 (b)(2)(A):

- The Board shall “Review and approve Vermont’s statewide Health Information Technology Plan pursuant to section 9351 of this title to ensure that the necessary infrastructure is in place to enable the State to achieve the principles expressed in section 9371 of this title [Principles for Health Care Reform].”

18 V.S.A. § 9375 (b)(2)(B):

- The Board shall :Review and approve the criteria required for health care providers and health care facilities to create or maintain connectivity to the State’s health information exchange as set forth in section 9352 of this title. Within 90 days following this approval, the Board shall issue an order explaining its decision.”

Suggested Vote



1. Approve 2023-2027 HIE Strategic Plan (2022 update).
2. Approve Connectivity Criteria for 2023.