



# State of Connecticut Health Information Technology Advisory Council Session #3

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November 19, 2015



- Introductions
- Public Comment
- Review and Approval of 10/15/15 Meeting Minutes
- Appointments Update
- Election of Co-Chair
- Review Previous Action Items
- CSG Experience Overview
- Preliminary Conceptual Plan
- Review PA 15-146 HIE Vision
- HIE Requirements Review, Brainstorming, and Prioritization
- Solicitation Approach (RFI, RFP, etc.) including Activities/Timelines
- Governance Structure
- Examples of Successful HIEs
- Wrap Up and Next Steps

# Public Comment



**CSG**  
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Solutions

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Description	# Appointed	# Remaining
Four members appointed by the Governor	1	4
Two members appointed by House Representative Speaker	0	2
One member appointed by Senate Majority Leader	0	1

## ➤ Election of Co-Chair

#	Description	Assigned To	Follow Up Date
1	Provide CSG contract to Council members	Dr. Tikoo	10/26/2015
2	Prioritize HIE goals	HealthIT Advisory Council	11/19/2015
3	Develop a vision for CT's HIE	CSG	11/19/2015
4	Prioritize HIE requirements/functionality	HealthIT Advisory Council	11/19/2015
5	Provide more details regarding other states' HIE costs	CSG	12/17/2015
6	Conduct an environmental scan to identify successful HIEs	CSG	11/19/2015
7	Determine best method to obtain information from successful, operating HIEs (release RFI, visit state HIEs...) and include RIQI as one of these HIEs	HealthIT Advisory Council	11/19/2015
8	Schedule additional Council meetings	Dr. Tikoo	11/19/2015
9	Provide HIE timeline showing parallel activities	CSG	11/19/2015

# Introduction to CSG



**CSG**  
Government  
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*Your trusted adviser in government program modernization.*

## CSG GOVERNMENT SOLUTIONS “AT-A-GLANCE”

### BUSINESS:

Government Operations Consulting

### HEADQUARTERS:

Chicago, IL

### YEAR FOUNDED:

1997

### EMPLOYEES:

250

### CHIEF EXECUTIVE:

John Walsworth

### SERVICE OFFERINGS:

Program Modernization Strategy & Planning

Project Assurance Services

### PROGRAM EXPERTISE:

Healthcare

Human Services

Child Support

Unemployment Insurance

Revenue / Tax

Motor Vehicles

### CLIENTS:

40 state governments

U.S. Department of Health and Human Services

U.S. Department of Labor

Large municipal governments

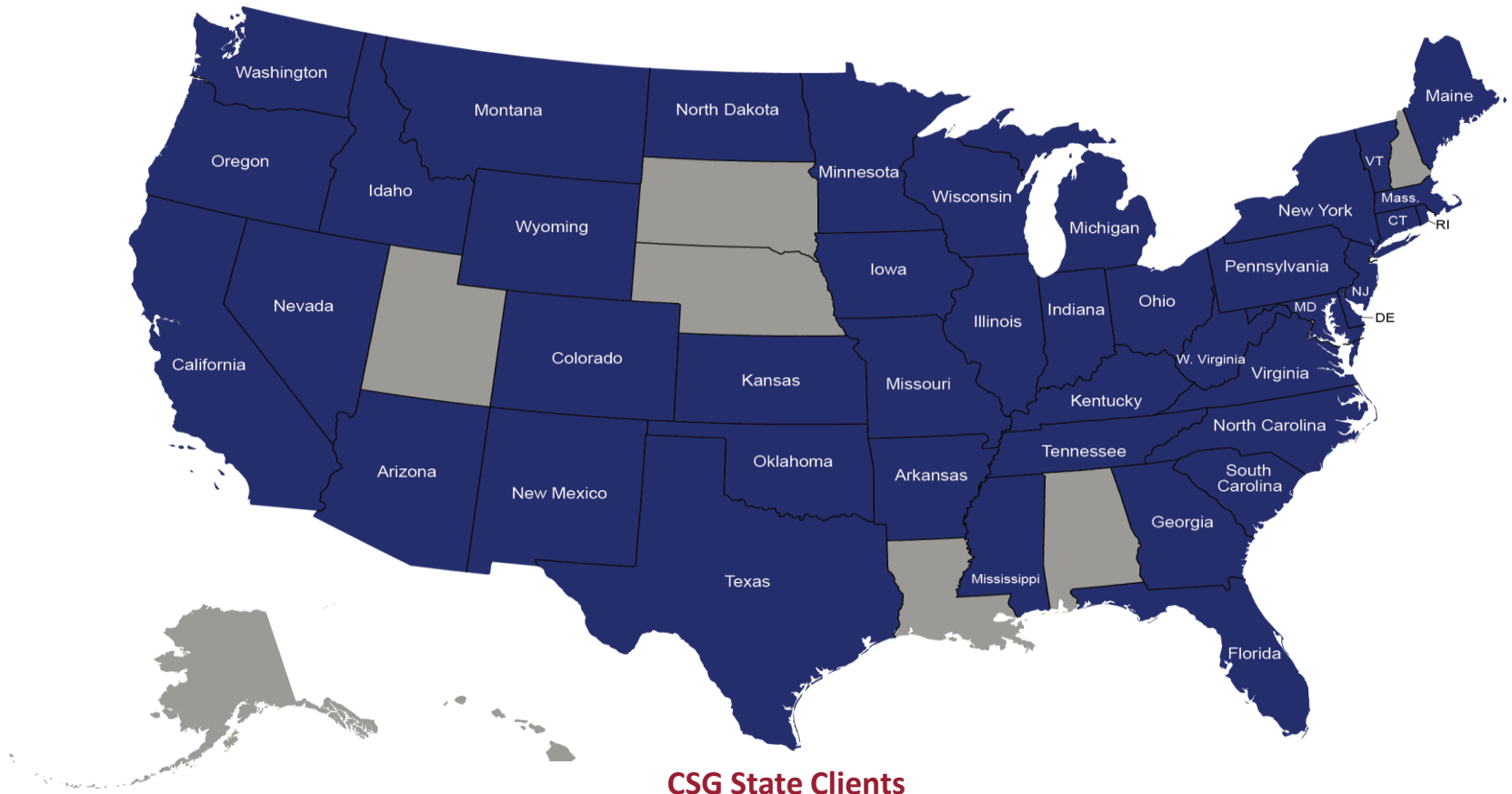
### Strategy and Planning

- Enterprise Architecture
- Business Process Reengineering
- Requirements Definition
- Procurement Support
- APD Development

### Project Assurance Services

- Independent Verification & Validation
- Project Management Office
- Organizational Change Management
- Software Testing Support
- Privacy & Security

CSG has provided modernization services to government clients in these great states





## Health Information Technology Related

<p><i>Client:</i> UConn Health  <i>Project:</i> Facilitation Services to Establish the HIT Governance Structure</p>	<p><i>Services:</i> Strategy and Planning</p>
<p><i>Client:</i> Illinois Framework  <i>Project:</i> Health Information Exchange IAPD Development</p>	<p><i>Services:</i> Strategy and Planning</p>
<p><i>Client:</i> Oregon Health Authority (OHA)  <i>Project:</i> QA Services for OHA HIT/HIE Portfolio Project</p>	<p><i>Services:</i> Strategy and Planning</p>
<p><i>Client:</i> Illinois Framework  <i>Project:</i> Enterprise HIT Governance Structure</p>	<p><i>Services:</i> Strategy and Planning</p>
<p><i>Client:</i> Oklahoma Health Authority  <i>Project:</i> Centralized, Enterprise Project Management Office</p>	<p><i>Services:</i> Strategy and Planning</p>
<p><i>Client:</i> Pennsylvania  <i>Project:</i> Data Warehouse Planning</p>	<p><i>Services:</i> Strategy and Planning</p>
<p><i>Client:</i> Mississippi  <i>Project:</i> ITS Statewide Information Systems Consulting</p>	<p><i>Services:</i> Strategy and Planning</p>
<p><i>Client:</i> Nevada  <i>Project:</i> Affordable Care Act Consulting Services</p>	<p><i>Services:</i> Strategy and Planning</p>
<p><i>Client:</i> Maryland  <i>Project:</i> AHRQ Medicaid Health IT Workshop</p>	<p><i>Services:</i> Strategy and Planning</p>
<p><i>Client:</i> Northern Arizona Regional Behavioral Health Authority (NARBHA)  <i>Project:</i> Technical Assistance, Gap Analysis, Procurement Planning &amp; Support Services</p>	<p><i>Services: Strategy and Planning</i>  <i>Project Assurance Services</i></p>
<p><i>Client:</i> CIGNA Government Services  <i>Project:</i> Acquisition of Technical Applications</p>	<p><i>Services:</i> Strategy and Planning</p>

# HIE Preliminary Conceptual Plan



- Introduction/Background
- HIE Vision
- HIE Goals
- Governance Structure
- HIE Functionality
- High Level Budget
- Financial Sustainability Model/Plan
- Development of Stakeholder Value Proposition
- Alignment with Federal HealthIT Strategic Plan (2015-2020)
- Activities and Timeline

# PA 15-146 HIE Vision



“There shall be established a State-wide Health Information Exchange to empower consumers to make effective health care decisions, promote patient-centered care, improve the quality, safety and value of health care, reduce waste and duplication of services, support clinical decision-making, keep confidential health information secure and make progress toward the state’s public health goals.”



# PA 15-146 Requirements



- **Goal 1: Advance Person-Centered and Self-Managed Health**
  - ✓ **Objective A:** Empower individual, family, and caregiver health management and engagement
  - ✓ **Objective B:** Foster individual, provider, and community partnerships
- **Goal 2: Transform Health Care Delivery and Community Health**
  - ✓ **Objective A:** Improve health care quality, access, and experience through safe, timely, effective, efficient, equitable, and person-centered care
  - ✓ **Objective B:** Support the delivery of high-value health care
  - ✓ **Objective C:** Protect and promote public health and healthy, resilient communities
- **Goal 3: Foster Research, Scientific Knowledge, and Innovation**
  - ✓ **Objective A:** Increase access to and usability of high-quality electronic health information and services
  - ✓ **Objective B:** Accelerate the development and commercialization of innovative technologies and solutions
  - ✓ **Objective C:** Invest, disseminate, and translate research on how health IT can improve health and care delivery
- **Goal 4: Enhance Nation's Health IT Infrastructure**
  - ✓ **Objective A:** Finalize and implement the Nationwide Interoperability Roadmap
  - ✓ **Objective B:** Protect the privacy and security of health information
  - ✓ **Objective C:** Identify, prioritize, and advance technical standards to support secure and interoperable health information and health IT
  - ✓ **Objective D:** Increase user and market confidence in the safety and safe use of health IT products, systems, and services
  - ✓ **Objective E:** Advance a national communications infrastructure that supports health, safety, and care delivery

Public Act	Council Identified Requirements	Federal HealthIT Strategic Plan - Goals
<p>Allow real-time, secure access to PHI and complete medical records across all health care provider settings</p>	<ul style="list-style-type: none"> <li>✓ Assure patient records are never discarded</li> </ul>	<ul style="list-style-type: none"> <li>✓ Advance Person-Centered and Self-Managed Health</li> <li>✓ Transform Health Care Delivery and Community Health</li> <li>✓ Foster Research, Scientific Knowledge, and Innovation</li> <li>✓ Enhance Nation's Health IT Infrastructure</li> </ul>
<p>Provide Patients with secure electronic access to their health information</p>	<ul style="list-style-type: none"> <li>✓ Real or near real-time; automatic sharing of health records that is not reliant on the will of the user</li> <li>✓ One system and a single way for health care providers to access (vs. multiple systems and passwords)</li> </ul>	<ul style="list-style-type: none"> <li>✓ Advance Person-Centered and Self-Managed Health</li> <li>✓ Transform Health Care Delivery and Community Health</li> <li>✓ Foster Research, Scientific Knowledge, and Innovation</li> <li>✓ Enhance Nation's Health IT Infrastructure</li> </ul>



Public Act	Council Identified Requirements	Federal HealthIT Strategic Plan - Goals
<p>Allow voluntary participation by patients to access their health information at no cost</p>	<ul style="list-style-type: none"> <li>✓ No or low cost to patients, which will require a funding stream</li> </ul>	<ul style="list-style-type: none"> <li>✓ Advance Person-Centered and Self-Managed Health</li> <li>✓ Transform Health Care Delivery and Community Health</li> </ul>
<p>Support care coordination through real-time alerts and timely access to clinical information</p>	<ul style="list-style-type: none"> <li>✓ PHI can be shared across all providers (hospitals, walk-in clinics, emergency rooms, physician offices, etc.)</li> <li>✓ The patient must have the ability to choose what medical information goes to which providers, including which providers they do not want to receive their information</li> <li>✓ Patient-centered</li> </ul>	<ul style="list-style-type: none"> <li>✓ Advance Person-Centered and Self-Managed Health</li> <li>✓ Transform Health Care Delivery and Community Health</li> <li>✓ Foster Research, Scientific Knowledge, and Innovation</li> </ul>

Public Act	Council Identified Requirements	Federal HealthIT Strategic Plan - Goals
Promote the highest level of interoperability	<ul style="list-style-type: none"> <li>✓ Single point of entry for all (providers, patients, state agencies, and other stakeholders)</li> <li>✓ Integrated with provider's EMRs so providers can easily work with the data provided by the HIE</li> <li>✓ "One-stop shopping"</li> </ul>	<ul style="list-style-type: none"> <li>✓ Foster Research, Scientific Knowledge, and Innovation</li> <li>✓ Enhance Nation's Health IT Infrastructure</li> </ul>
Meet all state and federal privacy and security requirements	<ul style="list-style-type: none"> <li>✓ Some information cannot be shared with the HIE and other providers, such as behavioral health information. The HIE needs to adhere to such privacy rules</li> <li>✓ Patients must have ability to opt-out</li> <li>✓ Provide de-identified data to assist in achieving public health goals</li> </ul>	<ul style="list-style-type: none"> <li>✓ Advance Person-Centered and Self-Managed Health</li> <li>✓ Enhance Nation's Health IT Infrastructure</li> </ul>

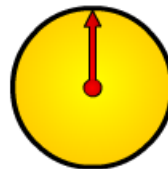
Public Act	Council Identified Requirements	Federal HealthIT Strategic Plan - Goals
<p>Reduce costs associated with preventable readmissions, duplicative testing and medical errors</p>		<ul style="list-style-type: none"> <li>✓ Transform Health Care Delivery and Community Health</li> <li>✓ Foster Research, Scientific Knowledge, and Innovation</li> <li>✓ Enhance Nation's Health IT Infrastructure</li> </ul>
<p>Support public health reporting, quality improvement, academic research and health care delivery and payment reform through data aggregation and analytics</p>	<ul style="list-style-type: none"> <li>✓ SIM initiative has long range strategies that include developing value-based payment structures. Having an automated, timely way to collect patient data would assist in the creation of provider quality scorecards.</li> <li>✓ Assist the SIM initiative to have a HIE that more quickly provides data to payers (health insurance companies) rather than wait for claims data</li> </ul> <p><i>*Note: Some members stated that PA 15-146 did not envision giving insurers access to HIE data</i></p>	<ul style="list-style-type: none"> <li>✓ Foster Research, Scientific Knowledge, and Innovation</li> </ul>

Public Act	Council Identified Requirements	Federal HealthIT Strategic Plan - Goals
Be standards-based	<ul style="list-style-type: none"> <li>✓ Be as standards-based as possible</li> </ul>	<ul style="list-style-type: none"> <li>✓ Advance Person-Centered and Self-Managed Health</li> <li>✓ Transform Health Care Delivery and Community Health</li> <li>✓ Foster Research, Scientific Knowledge, and Innovation</li> <li>✓ Enhance Nation's Health IT Infrastructure</li> </ul>
Support population health analytics	<ul style="list-style-type: none"> <li>✓ Use the HIE as a disease registry (there are separate disease registries in CT, but it would be helpful to have the information in one place)</li> <li>✓ Share data across CT social systems to assist in addressing population health issues, such as health disparities</li> <li>✓ Provide de-identified data to assist in achieving public health goals</li> </ul>	<ul style="list-style-type: none"> <li>✓ Transform Health Care Delivery and Community Health</li> <li>✓ Foster Research, Scientific Knowledge, and Innovation</li> <li>✓ Enhance Nation's Health IT Infrastructure</li> </ul>

Public Act	Council Identified Requirements	Federal HealthIT Strategic Plan - Goals
<p>Provide for broad local governance that:</p> <ul style="list-style-type: none"> <li>✓ Includes stakeholders, including, but not limited to, representatives of the Department of Social Services, hospitals, physicians, behavioral health care providers, long term care providers, health insurers, employers, patients and academic or medical research institutions</li> <li>✓ Is committed to the successful development and implementation of the Statewide HIE</li> </ul>	<ul style="list-style-type: none"> <li>✓ Include and involve community providers and consumers</li> <li>✓ Is cognizant of large systems and small providers to assist in the exchange of health information</li> </ul>	<ul style="list-style-type: none"> <li>✓ Advance Person-Centered and Self-Managed Health</li> <li>✓ Transform Health Care Delivery and Community Health</li> <li>✓ Foster Research, Scientific Knowledge, and Innovation</li> <li>✓ Enhance Nation's Health IT Infrastructure</li> </ul>



[www.online-stopwatch.com](http://www.online-stopwatch.com)



# Solicitation Approach

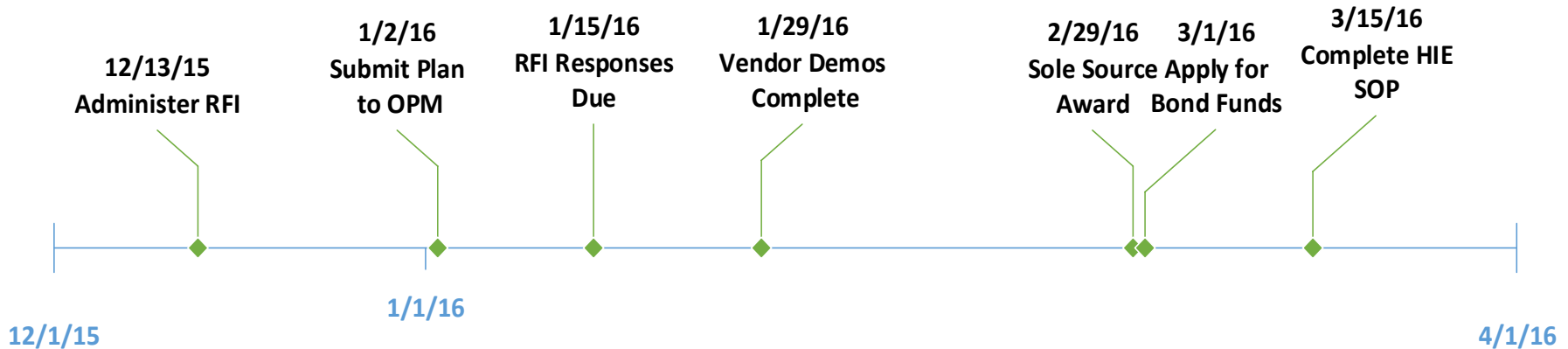




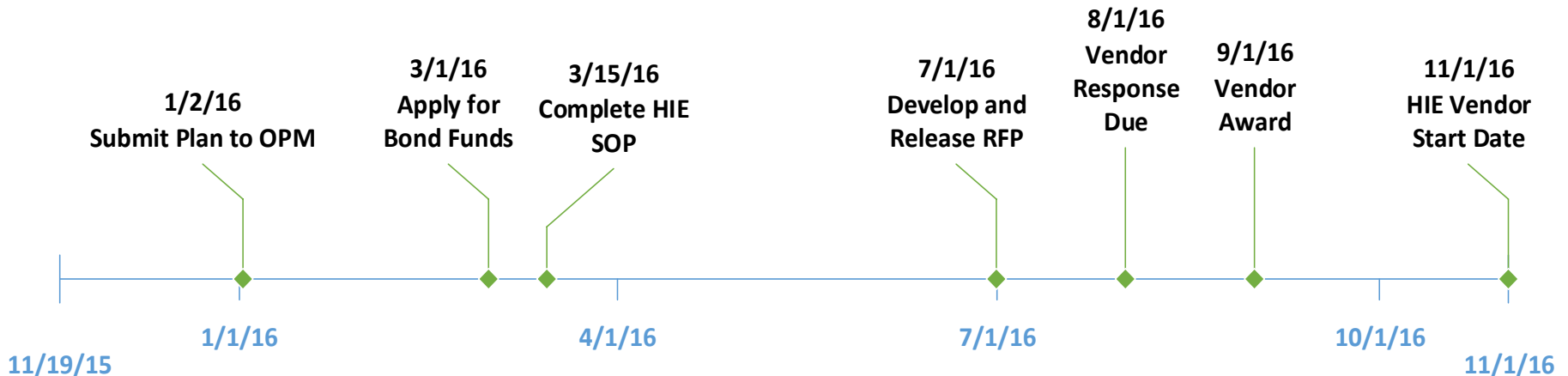
- Request for Information (RFI)
  - ✓ Seek information that is available via the landscape
  - ✓ Identify high-level requirements for solution providers to acknowledge
    - What requirements are available out of the box?
    - What requirements can be supported with modifications to the existing solution?
    - What requirements are not supportable with the solution?
  - ✓ Solution providers are invited to provide demonstration of services and capabilities
  - ✓ Evaluate the solutions and determine next steps
- Request For Proposals (RFP)
  - ✓ Formal solicitation process
  - ✓ Identify detailed requirements for solution providers' response
  - ✓ Conduct a formal evaluation process

- Do you have the staff and time commitment to write the RFI/RFP?
- Will you procure a vendor to finalize the SOP?
- Will you procure a vendor to write the RFP?
- What decisions need to be made to determine the solicitation approach?
- What time commitment can you make in support of the solicitation process?
- Do you need to have staff dedicated to ensure the success of the HIE?

## Request for Information



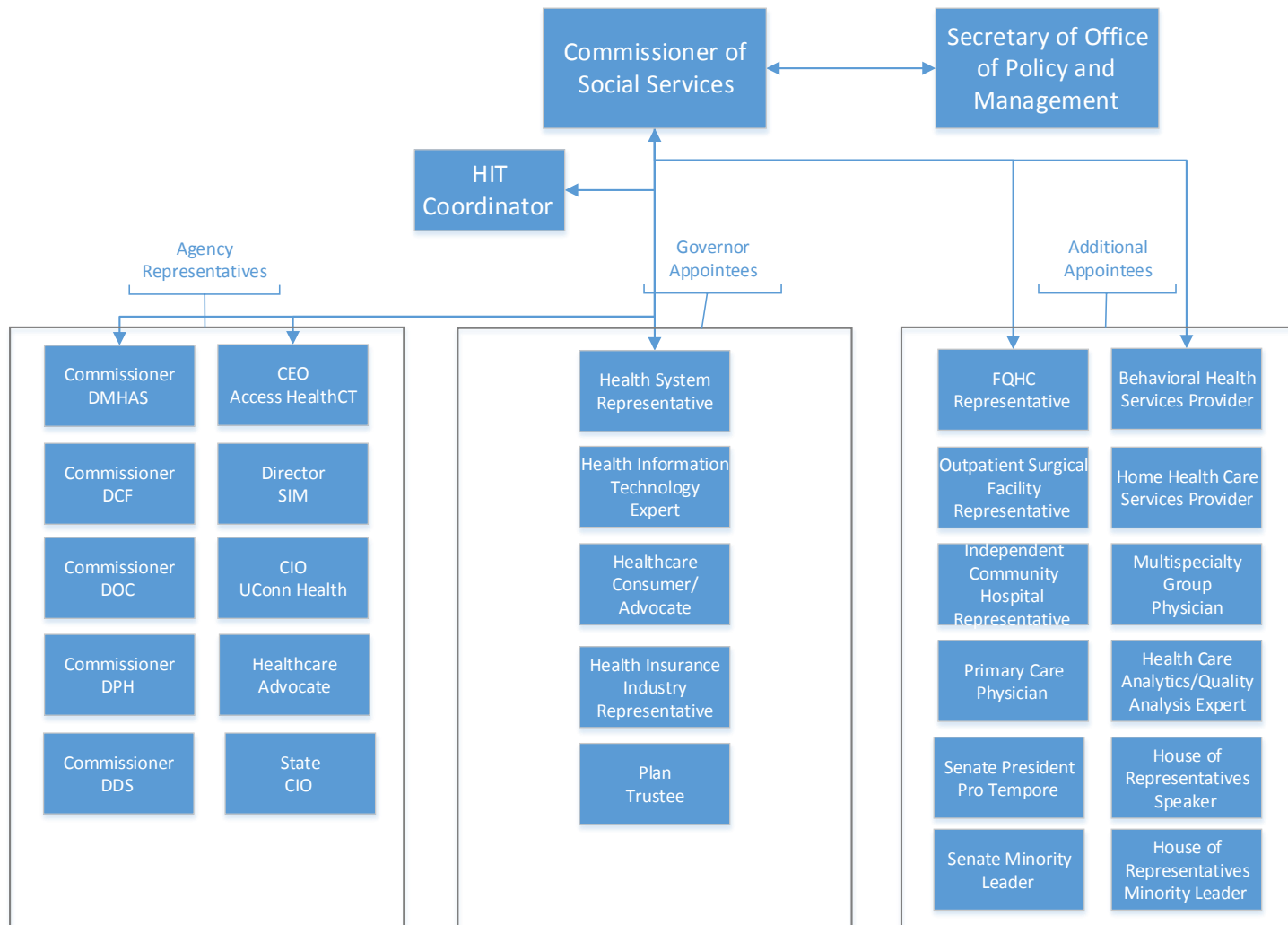
## Request for Proposals



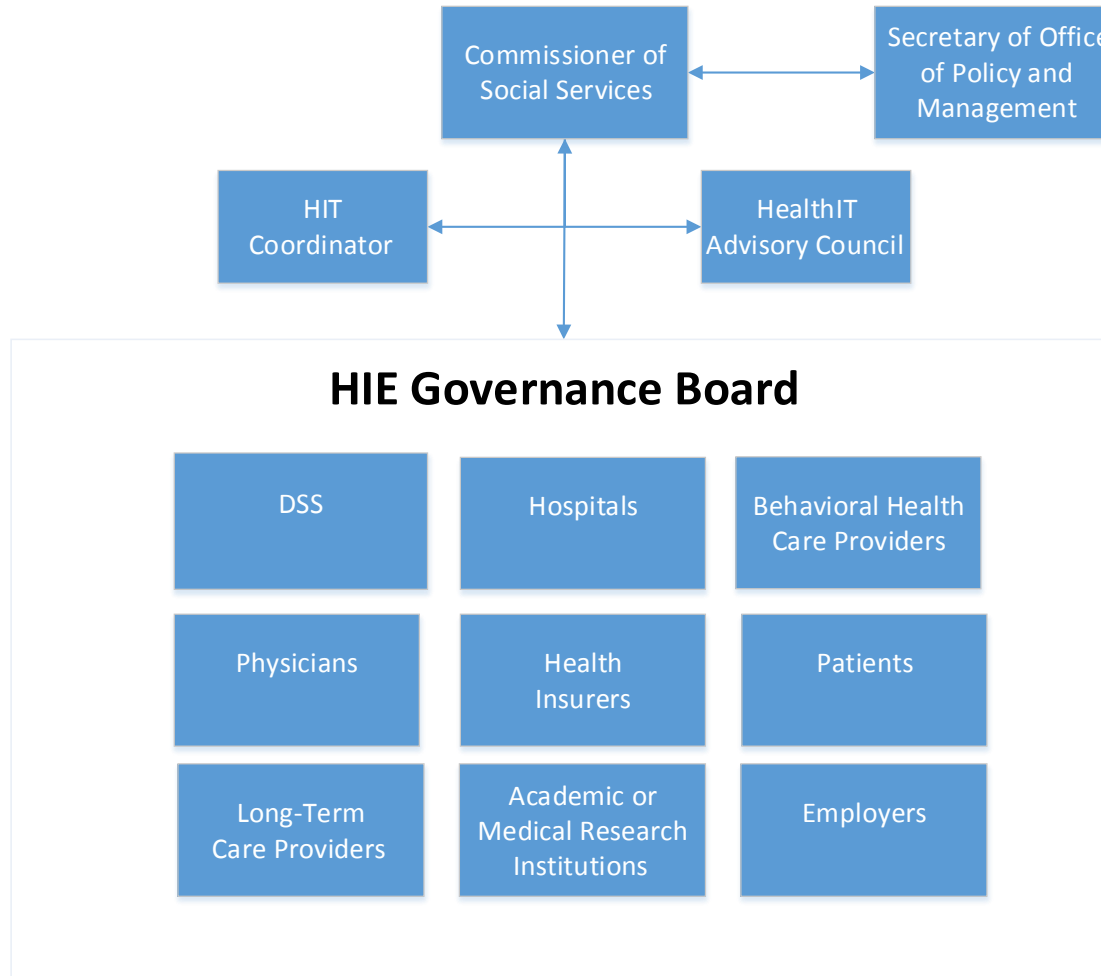
# Governance Structure



## Connecticut HealthIT Advisory Council Structure



## Connecticut Health Information Exchange Operational Governance Structure



# Examples of Successful HIEs



## ➤ Overview/Background

- HealthInfoNet is the lead entity responsible for Maine's HIE
- Live since 2009
- An independent, non-profit organization
- State-led HIE activities
- Population: 1.33 million
- Approx. 39 Hospitals/3,526 Physicians
- HealthInfoNet funding sources: State and Federal grants, Fees from products/services and Contracts

## ➤ Summary of Services and Functionality

- Consent Model: Opt-Out for general medical information AND Opt-In for certain behavioral health and HIV related information
- Statewide sharing of medical imaging
- Immediate access to clinical information (medication and encounter history, lab results, primary/secondary diagnoses/conditions, etc.)
- Centralized repository (data aggregation and analytic capabilities)

## ➤ Why was Maine successful?

- Pursued initiatives to promote exchange prior to State HIE Cooperative Agreement Program
- Focused heavily on establishing governance and stakeholder involvement
- Strong stakeholder participation (prior to HIE planning and implementation)
- Long history of engaging consumers, dating back to 2005; assembled a consumer stakeholder group which was also instrumental in developing the opt-out consent policy.



## ➤ Overview/Background

- Rhode Island Quality Institute (RIQI) administers the HIE, known as CurrentCare
- Live since 2011
- Independent, Not-for-profit
- More than 45% of Rhode Islanders enrolled
- Technology partnership with HealthShare Intersystems
- Population: 1.05 million
- Approx. 14 Hospitals/4,677 Physicians
- CurrentCare funding sources: Commercial insurers, State government, Federal Medicaid match (90/10); Value-Added Services, and Self-funded employers

## ➤ Summary of Services and Functionality

- Consent Model: Opt-In:
- Provider Directory- single repository “source of truth” for provider information
- Web-based access to up-to-date health information, including medical history, lab results, hospital/emergency room admissions and discharges
- Consumer accessibility to manage health data on both Portal and Mobile devices.
- Intelligent alerts with active analytics- such as hospital alerts
- Real-time care management dashboards and metrics such as hospital readmission analysis
- Shares behavioral (mental) health and substance abuse information

## ➤ Why was Rhode Island Successful?

- Broadening scope of CurrentCare - (data sharing partners and types)
- Maintains sustainability by expanding revenue generating services
- Support, such as grants and incentives, offered to providers for EHR purchase
- Built trust via performance transparency

## ➤ Overview/Background

- Launched in 2007
- An independent, public-private not-for-profit corporation.
- Technology platform provided by Medicity, Inc.
- Population: 935,614
- 7 Hospitals/2,300 Physicians
- DHIN funding sources: Payers, Federal Grant, Providers, Professional Services Income and Contributions

## ➤ Summary of Services and Functionality

- Consent Model: “All in” or “All out”
- Provider Registry
- Community master patient index (CMPI)
- Record locator service (RLS)
- Identity management
- Public health reporting
- 5 types of transactions (lab results, radiology reports, transcribed reports, pathology results, and hospital admission, discharge and transfer (ADT's)) are delivered via three methods (EMR interface, electronic inbox delivery, and printer delivery).
- Community health records
- Encounter Notification System (ENS)
- Continuity of Care Documents (CCDs)

## ➤ Why was Delaware successful?

- High level of penetration and adoption
- Continual expansion of services
- Strong Board of Directors
- Sustainability Plan has worked

## ➤ Overview/Background

- Launched in 2004
- A not-for-profit company
- Works hand in hand with the Regenstrief Institute
- Population: 6.59 million
- 106 Hospitals/25,000+ Physicians
- IHIE funding sources: Grants, Value-Added Services

## ➤ Summary of Services and Functionality

- Consent Model: No consent required
- Provides a “virtual patient record”
- “Indiana Network for Patient Care”: Provides repository of medical related images
- “Docs4Docs”- Offers clinical messaging service
- Chronic disease, preventative care and quality reporting service

## ➤ Why was Indiana successful?

- Strong sustainability business model: expand customer base markets, transition clinical repository from grant funded- to fee based, and enroll additional commercial payers
- Growing in market penetration
- Growing geographic range
- Continue to develop and deploy new services

- There are common traits found in successful HIEs that attributed to their achievements and lessons learned:
  - Built a strong governance structure, technical infrastructure and business model
  - Effective stakeholder engagement and communication
  - Create value-added services and products beyond health information exchange such as data analytics and healthcare billing, to increase revenue
  - Assure the solution is flexible and agile to support an incremental build out of the program
  - Learn from and follow the approach of other successful states

- **Build a Strong Infrastructure:**
  - Focus on assembling a governance structure and establishing stakeholder involvement early on
- **Communication is Key:**
  - Promoting the **value** of HIE is critical. Peak and maintain the interest of the provider community.
- **Sustainability:**
  - Plan to solve long-term challenges, such as sustainability, by incorporating value-added services that reach beyond health information to build revenue streams outside of grant funding
  - Ensure consensus around who is paying what share to maintain the solution

# Wrap Up and Next Steps



- **December 17, 2015 Meeting**
  - ✓ HIE Costs Based on Connecticut's approach
  - ✓ Review Draft HIE Preliminary Conceptual Plan
  - ✓ SES presentation

# Thank You!

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