

Delaware Health Information Network
Town Hall
Wednesday, March 13, 2019
11:00 a.m. – 12:00 p.m.

Conference Room
107 Wolf Creek Boulevard
Suite 2
Dover, DE 19901

Meeting Minutes

Purpose

To keep our public informed.

Agenda

What we are doing

What we will be doing

What should we be doing (public feedback)

I. CURRENT Activities Update:

DHIN continues working on two big projects, both the technology refresh and the Health Care Claims Data Base.

Community Health Record:

Since our last call, there have been several changes. We have found a number of issues with some being showstoppers and we do have a concern about the remaining schedule. Our original plan was for DHIN to continue testing internally through February and then to engage our data sender stakeholders with approximately a week and half of testing on their part.

During testing for the new CHR, DHIN ran into too many showstoppers to continue testing and have the project completed by the end of March 2019. Therefore, we have extended our contract with Medicity through June 30, 2019. Our plan is to have all show stopping issues fixed by the end of March. During the first week in April, we will continue internal testing to ensure that all show stoppers have been resolved. Once confirmed, DHIN will ask the hospitals/stakeholders to engage in user acceptance testing for a two-week period. A one-week breather to fix any additional issues found and then bring stakeholders back for a second week of user acceptance testing. Data senders will return the third week to continue user acceptance testing. Assuming there are no remaining issues or show stoppers, we will begin by rolling out the project to real world users in May, with the intention of rolling the CHR out in four waves and separating each roll out with one week.

Healthcare Claims Data Base:

The initial work to stand up the HCCD was funded through the State SIM Grant which ended on January 31, 2019. We are now in the period where we need to begin drawing on the state appropriation to support the on-going work of the data claims base until we can generate a customer base.

DHIN has been working with Freedman Healthcare, a consulting company with excellent qualifications for this type of work. There are currently nineteen state mandated multi-payer claims data bases and an additional ten operating on a voluntary submission basis. Freedman has worked with all and we are pleased to say that Delaware is among the group. In addition to Freedman, we are working with our technical partners MedicaSoft as part of new platform for DHINs technology stack.

When DHINs grant expired, we were able to leverage the State SIM Grant which carried us through January 2019. Once the SIM Grant ended, the State provided a one-time \$2M appropriation allowing DHIN to continue work on the Claims Data Base. DHIN had specific conditions which were required and met. DHIN now has the Claims Data Base fully implemented and operational. The tools are in place that are needed to provide reporting and data extract, in addition to all the data stored.

The original statute passed in 2016 required four lines of business to be mandatory reporters:

1. Medicaid: Includes the MCOs in addition to DMMA which will provide us with the Medicaid Fee for Service Information
2. Medicare: Ensuring Medicare Advantage carriers submit data and also receive Medicaid fee for service data directly from CMS. There is a process to apply for permission to acquire Medicare data. Once CMS realized we would be storing data in the cloud, DHIN filed an amendment to the application. Our application was approved and DHIN is the first entity that CMS has granted permission to store Medicare data in the cloud.
3. All qualified health plans on the Insurance Marketplace
4. State Employee Group Health Insurance Plan

Of the required four lines of business, they come from seven commercial carriers plus CMS for the Medicare data. DHIN has six years of data; once received, it will go through a very detailed validation process.

AmeriHealth has executed the data submission and use agreement. We also continue to on-board the new mandatory reporters that were mandated in the SB227 which was passed late in the last Legislation Session.

DHIN/Freedman have several demos of the HCCD scheduled. One will be a Lunch & Learn at Legislative Hall showing a fully implemented and fully operational Healthcare Claims Data Base which will only get stronger as additional data is brought in to populate.

II. ONGOING Activities Update:

DATA Senders:

DHIN continues on-boarding a few smaller data senders and working with additional stakeholders on individual projects.

MOST Registry:

DHIN has gone live with the DMOST Registry. A registry for end of life orders which can be created in the final six months of life for end of life care. This is a medical order rather than advanced directive (legal document). We are working with the hospitals to upload the DMOST form that has been created.

DHIN is also working with CRISP, Maryland HIE, to expand the type of data we are exchanging between Delaware and Maryland. We are currently working on exchanging clinical data, lab results, CCDs, radiology reports, etc. all of which will enhance our data in the CHR. We have been in discussion with HSX, but recently found out they are not yet ready.

III. Comments:
None

Next Town Hall is scheduled for April 10, 2019 @ 11:00 a.m.