

Delaware Health Information Network
Town Hall
Wednesday, April 10, 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 major projects, both the technology refresh and the implementation and on-going operations Health Care Claims Data Base.

CHR Update:

Since our last meeting, DHIN has found issues with our new CHR and realized that we would not be cleared to continue with our original deployment plan. Therefore, we did extend our contract with Medicity for three more months. A revised deployment plan allowing us extra time for issue corrections and testing. DHIN has cleared all showstopper issues that were uncovered during DHIN's internal testing. We are now in the process of testing with our stakeholders from hospitals, labs and data sending organizations.

Stakeholder testing will take place in the next two weeks and we will then take a week for issue mitigation. Anything uncovered during these two weeks of testing will have the opportunity to work with Ai on correction of those issues; returning another week of stakeholder testing to validate that all issues have been corrected.

If all goes well, we will begin rolling the new CHR out to users during the first week of May 2019. The CHR will be rolled out in four waves, starting with a small number of practices. Another week of testing for issue mitigation during the first Phase of the roll-out. Waves two, three and four will be significantly larger; the largest hospitals will be included in the final wave which will be in the second week of June 2019. Testing will continue through the end of June 2019 when everyone will be transitioned over to the new CHR.

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 six years of validated data from most of the payers who are required to submit data. However, there are a few exceptions, each payer that submitted data, ended up with data qualifying issues that required resubmission. Most resubmissions have been completed, a few are currently in the process of validating resubmitted files and we are waiting for an additional few on resubmission. We are also waiting on the influx of additional submissions from the commercial plans that were not originally required to submit data to the Healthcare Claims Data Base which will begin submitting in July 2019.

We currently have data on over half of Delaware residents which will allow us to start creating reports on specific areas of interest. Data can be stratified by plan, line of business, age, gender, geographic location within the state, etc. In addition, we have reports that will enable us to receive frequency of ICD codes, top conditions on what claims are being submitted and the ability to look at top costs. Also for the top pharmaceuticals claims submitted by volume of claims and by total cost.

Working with the State Benefit Office on data extract to enable them to evaluate the creation of network excellence for high cost elective procedures. In addition, we are in discussion with working on a potential project with Public Health on the health outcomes in specific neighborhoods which have higher than recommended levels of certain compounds in their drinking water.

Our first request which was submitted to the HCCD Committee for evaluation was denied. The request came from an out of state commercial entity that did not give a good description of what they were going to do with the data.

DHIN has been demonstrating the HCCD to various audiences throughout Delaware to include the Healthcare Commission, Secretary of Health and Social Services and we held a luncheon at Legislative Hall for all those interested. On May 1st, DHIN along with the University of Delaware will host an event Making Health Data Useful at the University of Delaware's STAR Complex, which also coincides with DHIN's 12th Anniversary.

II. ON-GOING Activities Update:

DMMA: DHIN continues working with DMMA on a proposal enhanced by federal financial participation. If approved, it will be five years of matching funds giving us the opportunity to stretch the \$2M appropriation funded by the State. We anticipate the final decision to be made in June 2019.

Westside: DHIN is currently working to on-board Westside Healthcare to submit care summaries at the conclusion of each encounter.

Tech Refresh: We also continue to do background work on our technology refresh to replace some components, other than the community health record that we need to be transition.

AmeriHealth: DHIN is also working with payers, an All Payer Working Group that is being led by AmeriHealth. The committee will address how payers can maximize the value they are getting from DHIN.

FY20: DHIN has also begun our cycle of Strategic Planning for FY20 for our goals, our work plan and our budget for the upcoming year

Sunset Review: Delaware's Legislative Oversight and Sunset Law, provides for the periodic legislative review of state agencies, boards, and commissions. The purpose of review is to determine if there is a public need for an entity and, if so, to determine if it is effectively performing to meet that need. Generally, an entity cannot be reviewed more than once every six years. The Committee is responsible for guiding the review process. JLOSC is a bipartisan committee comprised of ten legislators. Five senators are appointed to serve on the Committee by the Senate President Pro Tempore and five representatives are appointed by the Speaker of the House. DHIN's review is scheduled for Monday, April 15, 2019, and is open to the public. Should any of our stakeholders have comments that they would like to share, whether good or bad, please feel free to join us at Legislative Hall on Monday, April 15th at 6:00 p.m.

III. Public Comment:

Q: Kate Dudek, Christiana: Do you get provider charges from claims in the HCCD?

A: We are getting financial aspects of the claims. There are restrictions on what can and cannot be released and to whom it can be released. The HCCD Committee was stood up and evaluates the requests for data. The Committee has the rights to approve or deny the application request. There are four state agencies that must have access: Public Health, Medicaid, Healthcare Commission and OMB/State Employee Benefits. Other entities that would like access to the data must complete an application for the HCCD Committee to consider.

C: Stacey Schiller, DHIN: There will be a dedicated section for the HCCD on DHIN's web-site. We are also in the process of converting the demonstrations that we have been doing into a format we can share as well.

Next Town Hall is scheduled for June 12th at 11:00 am