Delaware Health Information Network
Town Hall
Wednesday, September 11, 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:**

HCCD:
Delaware received approval from CMS on the funding proposal submitted to cover development of additional capabilities of the database to support Medicare – in particular. CMS requires a signed contract between DMMA and DHIN regarding the particulars - deliverables and timeline.

Payers continue sending monthly data to the Healthcare Claims Data base. Our hope is that by the end of September/October, we will have data from commercial plans fully validated and in the data warehouse available for reporting. Medicare data is available for reporting; however, the data is only to be used for what Medicare allows. Several entities are accessing data for one purpose or another. Some lengthy.

Our summer intern, from the University of Delaware, began work on a chronic disease dashboard. Not quite completed, but would allow us to select from a list of chronic diseases.

Working on project with CDC demonstrating the usefulness of an HIE that have both clinical and claims data for public health surveillance and potentially detailed research projects that would help identify various diseases and the environment.

In addition, DHIN is in exploratory conversations with Health & Social Services (HSS) for use of claims data.

<u>The Community Health Record:</u>
DHIN continues transitioning to the new CHR with 15 issues currently open. Most are specifically related to the User Management Tool, which adds and removes users from the system. DHIN is waiting on Ai to make the necessary changes that will allow the practices to continue managing work on their end.

<u>Single Sign-On (SSO):</u>
SSO is in place at CCHS as we continue working with Nanticoke. Nanticoke's SSO viewing works and results can be seen. Since Nanticoke allows multiple patient charts to be opened in their Cerner Power Chart EMR, we were experiencing an error related to keeping the patient in context. In order to refresh the results on a previously opened chart, we determined that the user just needs to click the home button, which is an improvement on what we previously had with Medicity SSO.

<u>Imaging:</u>
DHIN continues working on imaging with both Nanticoke and St. Francis. We are able to view St. Francis images in our Cert CHR, but are working through three remaining issues prior to moving this into production.

<u>DMOST:</u>
We are currently working on patient access to their file, which will allow patients to rescind their original DMOST request.

II.　　　　**ON-GOING Activities Update:**
HITRUST: Continuing with recertification process.

CHR: Enhancements

DHIN/DHIN: Expanding our data exchange to include ADT's, clinical data and CCDs based on the zip code of where the patient lives.

Dashboards: Several dashboards are in the works to include one that will provide access to consumers for high-level de-identified reports data from the Claims Data Base and internal monitoring of our system & services.

Working on implementing a consent registry, which will allow patients to manage consent on who can see their data

We are in conversations with Delaware Division of Substance Abuse and Mental Health (DSAMH). DSAMH is implementing Cerner as their EHR and plan to go live in January. They are looking at several DHIN services to include receiving alerts when one of their patients has been seen at another location.

Also in discussion with various insurers on a pilot project for electronic prior authorization for specific procedures.

DHIN would like to attain national work connectivity and interoperability for all Delaware stakeholders. The 21ˢᵗ Cures Act required ONC to develop a trusted framework and common agreement for nationwide health data to help accelerate medical product development and bring innovations and advances to patients who need them faster and more efficiently.

ONC has awarded a cooperative agreement to The Sequoia Project to serve as the Recognized Coordinating Entity (RCE) to develop, update, implement, and maintain the Common Agreement and the QTF. ONC and The Sequoia Project will finalize the Trusted Exchange Framework and Common Agreement (TEFCA) framework that will include the common agreement.

Data Senders:
Continue to on-boarding smaller labs and data senders.

Working with CCHS on the ability to pull a 24-month bulk of historical data.

The Newborn Screening (NBS) project with DHIN and Public Health is back on track: Data will be sent to DHIN from Nemours/PerkinElmer for Dried Blood Spot screening and from DPH for Early Hearing Detection and Intervention screening. Data will be viewable in CHR combing the screening. There will be two project statements created to cover the initiative. The project statement for Nemours/PerkinElmer screening data will be first since DPH has other priorities at this time.

III.   **Public Comment:**
         None

Next Town Hall: December 11, 2019