

**Delaware Health Information Network  
Town Hall  
Wednesday, April 14, 2021  
11:00 a.m. – 12:00 p.m.**

Zoom Conference Call

**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 and Updates:**

DHIN has received validation of secure best practices with HITRUST effective December 31, 2020. Dr. Lee thanked the team for all their hard work and commitment to attaining our recertification.

DHIN is currently accepting applications for a Security Manager. Additional information on this position is available on our website: [www.dhin.org](http://www.dhin.org).

**SFTP:**

DHIN would like to give a heartfelt thanks to all those who jumped on our need to migrate our SFTP server to the cloud. Though we already had plans for this project, it was expedited to meet our suppliers shut-down deadline of March 2021. All DHIN partners who sent data to the SFTP server or who go to our server to pick up data were impacted. Again, thank you for your continued support in completing this project on time.

**COVID-19 Update/Public Health:**

DHIN continues working with Public Health on several projects, including Contact Tracing. Erica Hutchinson is working on feeds to the system to include data about hospital status, ensuring those patients do not receive calls from Contact Tracers.

**PHR:**

Our work with DHIN's Personal Health Record (PHR) continues. DHIN has received funding from Public Health to support converting the PHR into a mobile application. In connection with our Consent Management Tool, we believe the PHR can be the channel where patients are able to direct themselves without going through their healthcare provider, complete consent registration to let us know what data they want shared and with whom they want it shared. Enrollment continues to grow as we are currently over 18,000 users. The PHR is now available as a mobile app on both Apple and Android platforms under Health Check Connect.

**Consent Management Tool:**

DHIN continues work to implement a Consent Management Tool which will be in production by the end of June 2021. This project will be completed in phases.

Phase I: V1 will be a very basic, a minimal and viable product based on information from the sending organization.

We will be looking at two consent levels, Part II data, Substance Use Disorder data that is covered by 42CFR Part 2 data regulations will be either global which allows patient data to be shared by everyone who is involved in their care **or** do not share my data with anyone other than my provider or anyone on my care team.

In FY22, we will continue developing and enhancing the tool on an even more granular level to include other sensitive information such as reproductive information and HIV status, etc.

Identifying the information will be based on the sending organization(s). Though for the immediate future, the only Part 2 data we anticipate receiving will be from the Division of Substance Abuse and Mental Health (DSAMH).

Patients will be able to establish their consent preferences through the PHR. Patients will not only log into the PHR to see their data but can also view the consent tool and at any time change their settings. Along with enrichment of data, DHIN will be honoring privacy and consent around the more sensitive data, ensuring Behavioral Health organizations that they can safely and confidentially send their data to DHIN knowing we will proceed in accordance with all Federal regulations.

DHIN is excited as this will open the doors to receiving additional data from Behavioral Health organizations; an important first step in enriching the value of the data services that DHIN offers. DHIN has enabled Event Notification for DSAMH and in the process of on boarding them as a data sender. DSAMH will be sending DHIN ADT's and Care Summaries for patients that present to them. Our first Part 2 provider and the first Part 2 data that we will be receiving in our network.

DHIN is also working with member hospitals on the new requirements for CMS as part of Condition of Participation in Medicare. A hospital/Emergency Room Department that admits, discharges, or transfers a patient must be able to send a notification to their primary care provider or anyone that the patient designates that a copy of the discharge/transfer has taken place and has been sent. DHIN already provides ENS and a few minor tweaks to our auditing requirements will enable hospitals to produce evidence that they have complied to the CMS requirements.

**HCCD:**

The Healthcare Claims Data Base is an important service adding to the many services that we currently offer. DHIN is in the process of working on several projects for DMMA, State Employee Benefits Program, Healthcare Commission and Public

Health. DHIN is also in discussion with several hospitals on their required reporting needs. All projects are being approached through various perspectives. The HCCD is a very rich resource; data is received from eleven different streams. The data comes in structured and as we do the work, we are adding enhancements, all of which takes time. We are also finding that the users of the Claims Data are not just payers or researchers. A customer portal is available as we can identify and de-identify a data set and place the data in the customer portal. Data can then be broken down into specific requests.

We also have several public facing reports derived from our claims that can be accessed through our website: [www.dhin.org](http://www.dhin.org). Reports on DHIN's website will be updated/posted on a quarterly basis.

**Master Patient Index (MPI):**

DHIN is moving to the cloud and upgrading to a more current version of the IBM InfoSphere product which has additional capabilities. DHIN is currently in the testing phase and will begin the migration on May 23, 2021. There will be a brief period of downtime with our system, but we will be communicating with those that will be impacted throughout the transition.

**Office 365/Internal Project:**

Though the migration from our on-site to Microsoft Exchange server to Office 365 has been on DHIN's roadmap

However, it has continued to be moved in priority due to other critical projects.

The Cyber Security & Infrastructure Security Agency put out a notice to all federal agencies there has been a zero-day vulnerability identified in the on-site Microsoft exchange server. All federal agencies using on-site exchange servers must immediately shut them down.

DHIN had a few issues with email transfers to Office 365; however, our main issue has been transferring calendars from the old to the new. Any reoccurring events entered into the old calendar, were not transferring to the new calendar. The invites that were transferred to the new calendar are not allowing us to edit any changes. It has been more than a painful process and we are still feeling anxiety as to whether our calendars are current. DHIN is bringing this to your attention to ensure that you are included in any invites that already exist and any future invites. Should you have any questions/concerns, or if we have not been responsive to an email, please feel free to reach out to Ali @ 302-678-0220 or text to 302-463-0160.

**II. ON-GOING Activities Update:**

DHIN has been in recent conversation with the Division of Professional Regulations regarding an implementation of a connection between the DHIN CHR and the Prescription Drug Monitoring Program which is designed to track the dispensing of controlled prescriptions. Division of Professional Regulation has a federal grant that enables them to connect to EHRs.

**Sunset Committee:**

In 2019, the Sunset Committee approved the continuation of our work. Out of the work that was completed/submitted there were five proposed legislative updates. DHIN has received word from the Sunset Committee that two of those bills have been introduced.

**SB 88:** An Act to Amend Title 16 of the Delaware Code Relating to the Delaware Health Information Network and the Protection and Use of Information.

**SB 87:** An Act to Amend Title 16 Of the Delaware Code Relating to Anatomical Gifts and The Delaware Health Information Database.

More information can be found for both Senate Bills at <https://legis.delaware.gov/>

**Pennsylvania Patient & Providers Network (P3N):**

DHIN continues working with our counterparts in Pennsylvania on a Data Exchange Agreement. Providing greater opportunities for Delaware patients who seek care outside of their home state and for the benefit of the members of Pennsylvania Patient and Provider Network (P3N), Certified Health Information Organizations (HIOs) and the members of out-of-state health information exchanges (HIEs) that share patients with Pennsylvania.

**Five-Year Strategic Plan:**

DHIN's work with Maestro on our Five-Year Strategic Plan is just about complete and will be presented at our Board of Directors Meeting on April 20<sup>th</sup>. Once this plan is approved, an Executive Summary will be viewable on our website. We feel that Maestro has provided an incredibly thorough and thoughtful analysis of the industry and current market drivers:

**III. Public Comment:**

None

Next Town Hall: May 12, 2020