

DISTRICT OF COLUMBIA HEALTH INFORMATION EXCHANGE POLICY BOARD MEETING



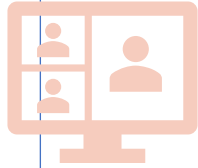
January 25, 2024 | 3:00 PM – 5:00 PM



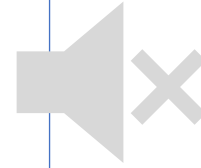
THIS MEETING IS BEING RECORDED

Department of Health Care Finance | Remote Meeting

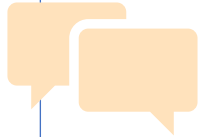
Virtual Meeting Processes



To increase engagement, turn on your video



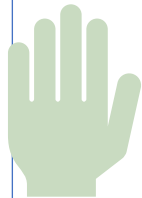
Mute your microphone upon entry, and until you are ready to speak



Use the chat function to introduce yourself: ***Name, Title, Organization***



Putting your phone on hold, due to an incoming call, may disrupt the meeting



If you have comments or questions, please use the '***Raise Hand***' feature and speak clearly



Voting on a recommendation will require you to say: **Your name followed by either 'aye', 'nay', or 'abstain'**

Agenda

01

Welcome and Call to Order

- Meeting Processes
- Roll Call
- Announcement of Quorum
- 2024 Slate of Meetings & Expectations for Board Members and Attendees
- Conflict of Interest Forms
- DHCF Staff 1-1 Meetings
- New Member Announcements

02

Subcommittee Reports & 2024 Workplans

- HIE Stakeholder Engagement
- HIE Policy
- HIE Operations, Compliance, Efficiency

03

Update on Behavioral Health Data in the DC HIE

- Presentation of finalized CCD parsing strategy and SUD suppression code set developed through the CRISP Behavioral Health Subcommittee
- Update and discussion on HIE connectivity at the DC Stabilization Center

04

Enhancing the DC HIE Stakeholder Experience

- HealthTech Solutions review current state of DC HIE outreach and data quality
- Future directions for the DC HIE to operationalize SMHP

05

DC HIE and Division of Digital Health Updates

- DC HIE Designated Entity Updates
- HCBS Digital Health Outreach & Technical Assistance (TA) New Milestone 7 Incentive
- DC HIE Infrastructure & Connectivity: DC HIE Interagency Data Use Workgroup updates

06

Public Comments

07

Next Steps/Adjournment

Roll Call and Announcement of Quorum



HIE Policy Board Announcements

Introductions



Allocated Time: 3:00 - 3:10 PM (10 mins.)

Upcoming Policy Board Meetings

- This year, the Policy Board will meet once in-person to encourage networking, consensus-based decision making, and strategic discussions related to HIE policy and governance.
- To ensure quorum, Board members are required to attend in-person meetings this year.
- All meetings will be recorded regardless of venue.

Remote

On WebEx

- January 25, 2024
- April 18, 2024
- July 18, 2024

In-Person

DHCF Offices

- October 17, 2024

Policy Board Member Forms and Requirements

Conflict of Interest Forms

Ethics Training from DC's Board of Ethics and Governmental Accountability (BEGA)

- *A training schedule will be posted on BEGA's website and shared with all Board members.*

Meetings with DHCF staff

- *Feedback on HIE Policy Board processes and procedures, governance items, and other trends that the Board must discuss.*

DC HIE Policy Board Conflict of Interest Process

ARTICLE XIV Board Bylaws

Members of the Board shall protect the needs of the District and ensure transparency around business, financial, and/or personal interests that may lead to direct, unique, pecuniary, or personal benefit.



Each Board member shall sign and submit a conflict of interest disclosure form during their term:

- Upon joining the Board
- Annually
- Prior to any new business transactions that may pose a conflict
- Immediately upon becoming aware of a potential conflict



Board Chair shall review all declarations of conflict of interest



Board Chair shall report back any findings to the Board at a regular meeting or special meeting

Welcome – New Members!



Dr. Rahul Bhat

Medical Provider



Dr. Ayanna Bennett

*DC Department of
Health*

Welcome – New DHCF Staff!

Joe Weissfeld



Director, Health Care Reform and
Innovation Administration

Subcommittee Reports & 2024 Workplans



Allocated Time: 3:10 - 3:30 PM (20 mins.)

HIE Stakeholder Engagement Subcommittee

Drs. Yavar Moghimi and Mary Awuonda

Allocated Time: 3:10 – 3:15 PM (5 mins.)

HIE Stakeholder Engagement Subcommittee

Co-Chairs: Drs. Yavar Moghimi and Mary Awuonda

Mission: To provide recommendations to the HIE Policy Board on:

- Strategies to promote the value of the HIE through discussions and forums with identified stakeholders
- The SMHP measurement framework and priorities

Purpose: Gain and maintain stakeholder engagement for long-term operational and financial sustainability of health information exchange in the District

Stakeholder Engagement Subcommittee Update

1. HCBS Interoperability Program - Milestone 7: Updates from eHealthDC representatives about the Health Home Care Based Services (HCBS) Promoting Interoperability Program, especially the addition of Milestone 7 and its implications.
2. CRISP DC Winter Provider Directory Campaign: Introduction of the new winter campaign for the Provider Directory tool by CRISP DC, focusing on innovative features and expected outcomes.
3. CRISP DC Newsletter & User Engagement Strategy: CRISP DC's new user engagement strategy, including the launch of a quarterly newsletter and soliciting feedback on its content.

Stakeholder FY 24 Workplan

Goals	Timeframe
<p><u>Goal #1: Identify and inform ways to improve stakeholder engagement in the District's HIE initiatives and to promote the value of health information exchange and of advancing along the SMHP HIT Framework to District stakeholders.</u></p> <ul style="list-style-type: none"> • Utilize stakeholder map to develop personas that clearly outline meaningful engagement for each HIE stakeholder. • Strategize on building relationships with CBOs, Behavioral Health, and HCBS providers based on existing networks and collaborations. • Develop targeted messaging promoting the value of HIE to stakeholders. <ul style="list-style-type: none"> • Collaborate with CRISP DC partners to craft new educational/communication resources • Conduct audit of CRISP DC website • Inform the development of minimum educational benchmarks for Designated HIE entity educational efforts 	<p>December 2023 – October 2024</p>
<p><u>Goal #2: Identify and recommend educational outreach initiatives in response to regulatory changes</u></p> <ul style="list-style-type: none"> • Keep abreast of regulatory changes that affect the HIE and/or HIE tools. Work with Policy Subcommittee to identify impact of changes per stakeholder. • Inform educational strategies on use of the HIE in support of the District's Value Based Payment. • Collaborate with HIE Policy Board subcommittees to provide feedback on any educational materials or recommendations regarding the usability of the HIE to ensure that materials are responsive to the needs of the targeted stakeholder(s). 	<p>December 2023 – October 2024</p>
<p><u>Goal #3: Recommend feedback to DHCF on evaluation measures, outcomes measures, and DC Digital Health Core Competencies.</u></p> <ul style="list-style-type: none"> • Collaborate with DHCF to provide feedback on HIE evaluation measures • Collaborate with DHCF to inform initial work on developing outcomes measures related to the use of the DC HIE • Collaborate with DHCF to provide feedback on the Digital Health Core Competencies measurement framework, confirm target measures of success and define if applicable. 	<p>December 2023 – October 2024</p>
<p><u>Long-Term/ Regular Subcommittee Activities</u></p> <ul style="list-style-type: none"> • Conduct stakeholder summits, forums, and/or webinars to promote the implementation and adoption of the HIE and related use cases. • Conduct outreach with payers and providers to identify use cases related to payment incentives. • Collaborate with CRISP DC in supporting CRISP DC communications with stakeholders. • Work collaboratively with HIE Policy Board subcommittees, updates to the HIE final rule, and other regulatory changes that impact various stakeholder. 	

HIE Policy Subcommittee

Mr. Justin Palmer

Allocated Time: 3:15 – 3:20 PM (5 mins.)

HIE Policy Subcommittee

Chair: Justin Palmer

Mission: Provide counsel and recommendations on public policy initiatives that encourage participation in and the sustainability of the DC HIE to the DC HIE Policy Board and its Subcommittees

Purpose: The subcommittee guides the implementation of a leading HIE framework and facilitates the exchange of health information that supports public health and community health in the District of Columbia. The subcommittee assists the District in staying nimble and proactive with respect to its policy positions, while remaining aligned with federal, regional, and local policy issues.

HIE Policy Subcommittee Update

- Educational Materials & Information Blocking: Developing and distributing educational materials to stakeholders about information blocking rules and their implications
- Policy Updates and TEFCA: Updates on recent regulatory changes and details around the first set of Qualified Health Information Networks (QHINs) under the TEFCA framework

FY24 Policy Subcommittee Workplan

Activities	Timeframe
Goal 1: Ensure DC HIE policy alignment and compliance with relevant provisions of the 21st Century Cures Act <ul style="list-style-type: none"> • Provide guidance and best practices related to local implementation of 21st Century Cures Act provisions, including TEFCA, QHIN, Information Blocking, and Patient Access • Collaborate with HIE Policy Board subcommittees to develop educational materials (factsheets, FAQs, etc.) to provide updates on any provisions that impact the HIE, its tools and functions, or any HIE stakeholders. • Monitor local and federal regulatory activities/implementation affecting the Registered and Designated HIEs. • Ensure educational opportunities for the DC HIE Policy Board and HIE Policy Board Subcommittees on relevant provisions of the 21st Century Cures Act • Draft recommendations to HIE Policy Board 	December 2023 – October 2024
Goal 2: Review and inform development of policy guidance or other policy recommendations for new HIE initiatives <ul style="list-style-type: none"> • Define policy implications for HIE Initiatives such predictive analytics, electronic clinical decision supports, and HIE tools that require input of new data. • Understand the implications of HIE participation for non-traditional provider types and their access to the DC HIE • Keep abreast, determine impact, and define policy implications of regulatory and legislative trends related to DC HIE Initiatives, including SUD Consent Management, granular consent, public health data interoperability, and other initiatives. • Provide guidance to clarify the processes surrounding data access for Medicaid value-based payment initiatives. • Draft recommendations to HIE Policy Board 	December 2023 – October 2024
Goal 3: Ensure coordination with the HIE Policy Board subcommittees and other stakeholders interested in utilizing the HIE and its tools to identify and address policy implications of ongoing work, and make recommendations to the full HIE Policy Board <ul style="list-style-type: none"> • Create a process for other subcommittees to bring questions and recommendations to the policy subcommittee for evaluation and guidance • Inform a process for policy subcommittee review of any District agencies that create DC HIE-related policies to ascertain impact on HIE tools and functions • Draft recommendations to HIE Policy Board 	December 2023 – October 2024
Long-Term/ Regular Subcommittee Activities <ul style="list-style-type: none"> • Communicate regularly with each subcommittee on current activities, including ensuring policy subcommittee representation at regular subcommittee meetings • Review any applicable proposed rules and/or RFIs related to HIE and draft public comment. • Work collaboratively with HIE OCE, CRI, and Stakeholder Engagement subcommittees on updates to the HIE final rule, policy implications of regulatory or legislative trends, and to draft policy guidance. 	

Operations, Compliance, Efficiency (OCE) Subcommittee

Ms. Gayle Hurt

Allocated Time: 3:20 – 3:30 PM (10 mins.)

Operations, Compliance, and Efficiency Subcommittee (OCE) Subcommittee Update

- **Chair**: Ms. Gayle Hurt
- **Mission**: Ensure consistent operations within the DC HIE and facilitate the establishment of standards for the DC HIE entities that reflect best practices by providing recommendations to the HIE Policy Board
- **Purpose**: The purpose of the subcommittee is to advise, monitor, and improve the community standards for HIE operations in the District

OCE Subcommittee Update

Glossary & Practices:

- Updated DC HIE Glossary and best practices for HIE entities.

Policy Collaboration:

- Partner with subcommittees on HIE rule updates and EHI exchange trends.

Analytics & Care Transitions TEPs:

- Introduced DC Medicaid's Medication Adherence Prediction Model.
- Enhanced Pharmacy Report and medication adherence metrics.
- Standardizing allergy and vital signs data in EHRs.
- Pediatric data considerations: length, head circumference, and raw values

FY 24 OCE Subcommittee Workplan

Activities	Timeframe
Goal 1: Develop data and documentation benchmarks for accuracy, timeliness, and completeness to improve patient outcomes <ul style="list-style-type: none"> Develop a list of data elements for exchange among participating organizations and the Designated HIE entity for the following topics: Transitions of Care (discharge from hospital), Behavioral Health and SUD, and SDOH Review data sets to ensure alignment with national standards such as USCDI. Draft recommendations to HIE Policy Board. 	December 2023 – August 2024
Goal 2: Review and Recommend updates to baseline operational and benchmark performance and data quality standards <ul style="list-style-type: none"> Develop a data quality scorecard to grade incoming/received CCDs (data at rest) to aid in quality improvement Analyze and recommend national best practices on HIE data quality. Draft recommendations to HIE Policy Board on HIE performance. 	December 2023 – July 2024
Goal 3: Enhance DC HIE usability through targeted HIE improvements based on stakeholder feedback. <ul style="list-style-type: none"> Analyze baseline display of data elements in within the CRISP DC platform to recommend improvements Develop data access/use scenarios, use cases, or tip sheets to aid HIE end users Draft recommendations to HIE Policy Board on HIE performance. 	December 2023 – July 2024
Goal 4: Review and provide recommendations on requirements for registered and designated HIE entities as outlined in the HIE final rule and other DHCF guidance <ul style="list-style-type: none"> Review HIE Rule, HIE Registration and Designation requirements, and other guidance to inform any required updates to the registration and designation renewal process. Advise on edits to existing registration and designation documents, including FAQs, application documents, and any relevant information on DHCF’s website. Draft recommendations to HIE Policy Board. 	August 2023 – October 2024
Long-Term/ Regular Subcommittee Activities <ul style="list-style-type: none"> Review DC HIE Glossary and provide recommendations on any updates to terms and definitions. Recommend updates to the set of best practices for the District’s registered and designated HIE entities. Work collaboratively with HIE Policy and Stakeholder Engagement subcommittees on updates to the HIE final rule and evaluate industry trends related to electronic health information exchange. 	

Update on Behavioral Health Data in the DC HIE



Allocated Time: 3:30 – 4:20 PM (50 mins.)

Finalized CCD Parsing Strategy and SUD Suppression Code Set

Ms. Nichole Sweeney

Ms. Adrienne Ellis

CRISP DC

Allocated Time: 3:30 – 3:45 PM (15 mins.)

CRISP Shared Services SUD Code Set: Mixed Site CCD and Analytics Data Parsing

What: Code set to be used by CRISP DC for **PopHealth Analytics** and **CCD parsing** from facilities that **provide minimal SUD services ONLY**, e.g. an FQHC.

Why: Historically, CRISP Shared Services utilized a proprietary SUD code list from a vendor. **This was not cost effective and prohibited transparency, so CSS developed the solution below.**

How: Starting in January 2024, CRISP Shared Services affiliates used a sensitive code list developed through review of code lists by a multi-state, interdisciplinary committee, and specialized subcommittee. The list will be continually updated on an annual basis by a CSS workgroup which will include DC membership.

- Representation on the Behavioral Health Committee from DC included members of DHCF, DBH, AmeriHealth and Gerald Family Care
- Two District representatives from DHCF and AmeriHealth were also on the Behavioral Health Task Force that dedicated extra time to developing the sensitive code list for the larger BH committee approval in partnership with the CSS CMO

Impact: The change **is very minimal for HIE users**, and analysis shows that the amount of data being restricted with the new CSS SUD code list is almost identical to the amount of data parsed with the proprietary list used historically.

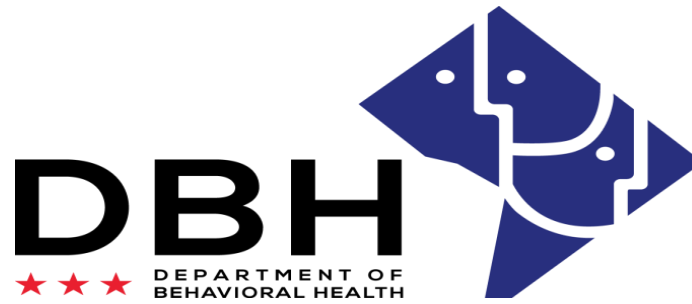
Overview of DC Stabilization Center

Dr. Jean Moise

Department of Behavioral
Health

Allocated Time: 3:45 – 4:00 PM (15 mins.)

Advancing Towards Systems Redesign



DC Stabilization Center

1/25/24

DC Stabilization Center Launch: *October 30, 2023*



Addressing the Opioid Public Emergency

- The District of Columbia Stabilization Center (DCSC) exemplifies Mayor Bowser's priority and commitment to provide District residents with the opportunity to receive the right care, from the right provider, at the right time to address their Substance Use needs.
- The Department of Behavioral Health (DBH) developed the DCSC in partnership with Community Bridges, Inc. , as a new, critical enhancement to our existing Substance Use Continuum of Care.
- Community Bridges, Inc. operates the facility under the close monitoring and oversight of the Department of Behavioral Health.

District of Columbia Stabilization Center (DCSC)

35 K Street NE, Washington, DC 20002

Direct Access Line: (202) 839-3500

<https://dbh.dc.gov/service/dc-stabilization-center>

<https://dcstabilizationcenter.com/>



Key Features

- Voluntary, free of charge to all adults (18 and over) who meet medical eligibility criteria
- 24/7/365 medical / crisis and sobering services
- Low-barrier, compassionate, person-centered stabilization and crisis services
- 16 - 23 hr Observation beds; & 6 - Extended stay beds (up to 3 days) for observation and treatment of complex cases
- Individuals can be referred by provider, FEMS, MPD, family / friend or walk in
- Addresses Social Determinants of Health



DCSC Services

- Peer Counseling and Recovery Coaching appropriate to consumer's needs and readiness to change
- Harm Reduction services and supports
- Care management and coordination post discharge
- Navigation, linkages and referrals to housing, transportation, social services, and other supports
- Provides alternative disposition to first responders for people under the influence of substances and persons presenting in crisis



DCSC Services, contd.

- Medical Screening and Clearance / Stabilization / Support Services
- Addressing Consumers' immediate personal care needs
- Comprehensive diagnostic assessment for mental health, substance use disorders, and co-occurring conditions
- Medication Assisted Treatment (MAT)
- Referrals to appropriate ASAM level of treatment and recovery



HIE Connectivity at the DC Stabilization Center

Ms. Stephanie Brown

CRISP DC

Allocated Time: 4:00 – 4:20 PM (20 mins.)

DC HIE Participation & Data Sharing


- CRISP DC is engaged with Community Bridges and their EHR Vendor for HIE Connectivity
- ADTs are being shared to the HIE sensitive document repository
- CCD data sharing is currently being scoped and scheduled with the EHR vendor

Targeted Provider Support & Training

- CRISP DC in partnership with the experts at eHealthDC are providing support to Community Bridges for onboarding to the HIE
- Community Bridges has been given a live virtual training and provided with recorded HIE trainings that will be assigned to all staff members in their company's virtual training portal
- Training and support from the CRISP DC and eHealthDC teams is ongoing to ensure the seamless implementation of the HIE and the consent tool in the Community Bridges workflows

Importance of Capturing SUD Consent

- All data from 42cfr Part 2 SUD providers, **both ADT and CCD** data, are stored in sensitive document repositories when sent to the CRISP DC HIE.
 - The functionality to release CCDs upon consent is live NOW
 - The functionality to release ADTs upon consent is live NOW
 - This functionality went live this month (Jan. 2024)
 - Minor configurations to our data repository are being completed now to release ADTs from organizations who shared them before this month.
- **This data will not be viewable within the HIE to any members of the care team until an explicit patient consent is signed using the CRISP DC consent tool.**
- Upon the completion of a consent form, **both SUD ADTs and CCDs** will be **viewable** in the HIE to all members of the care team.
- **Any member of the care team can register patient consents** to share their SUD data through the HIE, it is not restricted to SUD providers who are sharing the data.



CRISP DC

The CRISP DC Consent Tool will allow you to see SUD Data in the HIE

Over 50 behavioral health organizations are now sharing data with the DC HIE.

Why should I register patient consents?
Once consent is registered for a patient, you and other members of the patient's care team will be able to see any data related to the patient's SUD treatment in the HIE.

Why is this so important?
With explicit patient consent, all HIE users have the ability to see this additional data which creates a more holistic patient health record.

To learn more about how this tool could be valuable to your organization, please register by clicking the button below to attend **tomorrow's** January [Consent Tool Webinar](#).

Wednesday, January 10th at 12:00PM

Should your team be unable to attend, recordings will be available on [our website](#). If you'd like to schedule a training session for your team outside of the scheduled webinar options, please reach out to CRISP DC's project lead, Abby Lutz, via abby.lutz@crisphealth.org.

Wed. Feb. 14 – 12PM **Thurs. March 14 – 12PM**

Keep an eye out in your inbox, all HIE users are receiving email invitations to these webinars as all HIE users can register consents!

Discussion

- What are some strategies for driving the number of consents that are captured in the HIE and therefore enable viewing of data across care partners?

DC HIE and Division of Digital Health Updates



Allocated Time: 4:20 – 4:50 PM (30 mins.)

DC HIE Designated Entity Updates

**Ms. Stephanie
Brown**
CRISP DC

Allocated Time: 4:20 – 4:30 PM (10 mins.)

DC HIE Designated Entity Updates

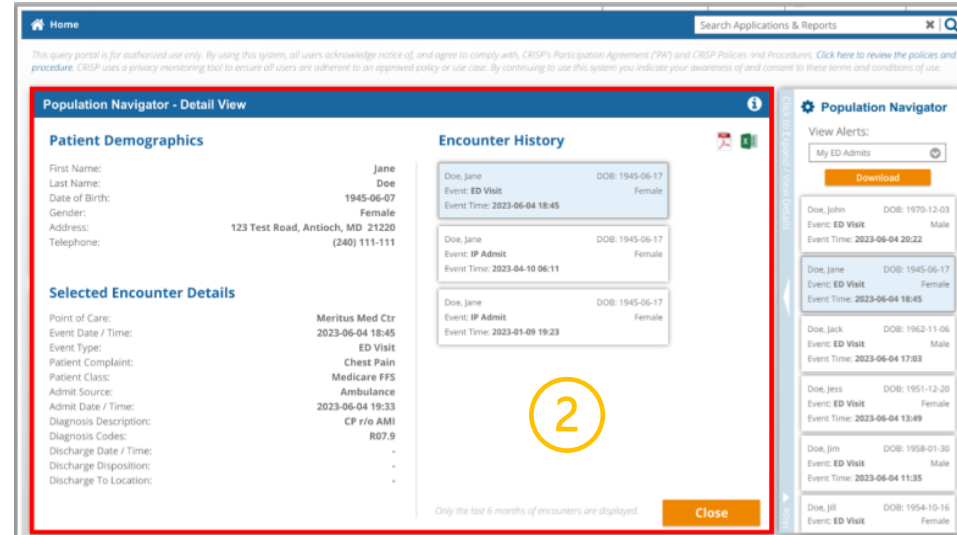
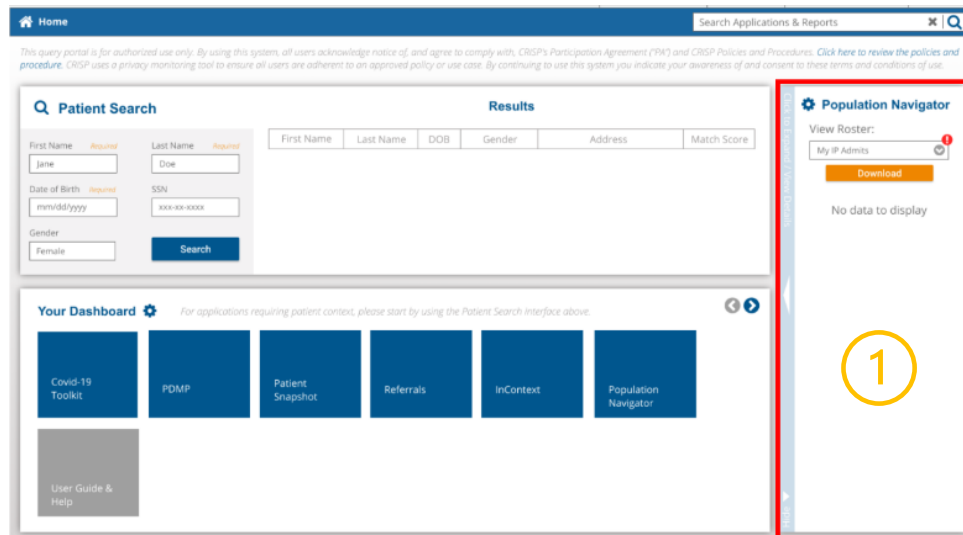
- CRISP Shared Services has recently contracted with South Carolina to provide HIE infrastructure (similar to how CSS began their work with Connecticut).
- CRISP DC will continue to support DHCF-funded efforts on Health-Related Social Needs, SUD consent, HIPAA Authorization, Advance Care Planning and Technical Assistance in partnership with subgrantees such as DCPCA and DCHA.
- CRISP DC is implementing a quarterly newsletter (winter, fall, spring and summer). Please look for this winter's newsletter in your inboxes soon!
- <https://crispdc.org/webinars/> is constantly updated with out public webinar schedule are we work to support all organizations in transforming their workflows to expand their use of the HIE to coordinate care.

Introducing Population Explorer – New Notification Service

- CRISP Shared Services developed an in-house encounter notification delivery system and front facing User Interface, Population Explorer to replace ENS PROMPT.
 - Enhanced User Interface
 - Near real time encounter alerts
 - Customized Filtering of alerts
 - Continuous Improvement
- CRISP-DC's Migration from ENS PROMPT to Population Explorer will occur in three waves beginning in March
 - Initial Pilot: March 2024- Twenty Pilot organizations
 - Wave 1: April 2024- Ambulatory Organization
 - Wave 2: May2024- Ambulatory Organizations
 - Wave 3: June 2024- Payors, Federally Qualified Health Centers, Hospitals
- CRISP-DC will engage and capture qualitative and quantitative feedback through
 - One on One Interviews for insights on Population Explorer Features and user experience
 - Poll users during training on important and urgent features
 - Utilize feedback for additional technical assistance and to update training materials/collateral

Population Explorer Features

1. Panel Selection & Notification Display- After logging into the DC Portal, users will view a widget pane, on the right side of the screen containing encounter notifications
2. Detail View- Contains additional information about the notification- Patient Demographics, Encounter Details, Up to Six Months of the Patient's Encounter History
3. Launch with Context- DC Portal Users can launch into other applications (Clinical Information) for the patient from a notification



Population Explorer Features

The screenshot displays the Population Explorer application interface. At the top, there is a navigation bar with a 'Home' link and a search bar labeled 'Search Applications & Reports'. Below the navigation bar, a disclaimer states: 'This query portal is for authorized use only. By using this system, all users acknowledge notice of, and agree to comply with, CRISP's Participation Agreement ("PA") and CRISP Policies and Procedures. Click here to review the policies and procedure. CRISP uses a privacy monitoring tool to ensure all users are adherent to an approved policy or use case. By continuing to use this system you indicate your awareness of and consent to these terms and conditions of use.'

The main content area is divided into several sections:

- Population Navigator:** A sidebar on the left with a 'Table' tab selected. It lists six patients with their names, DOBs, genders, event types, and event times.
- View Roster:** A dropdown menu set to 'My ED Admits', with 'Download' and 'Configure Rosters' buttons.
- Patient Demographics:** A section showing details for Jane Doe, including her first and last name, date of birth (1945-06-07), gender (Female), address (123 Test Road, Antioch, MD 21220), and telephone number ((240) 111-111).
- Selected Encounter Details:** A section showing details for a specific encounter, including the point of care (Meritus Med Ctr), event date and time (2023-06-04 18:45), event type (ED Visit), patient complaint (Chest Pain), patient class (Medicare FFS), admit source (Ambulance), admit date and time (2023-06-04 19:33), diagnosis description (CP r/o AMI), diagnosis codes (R07.9), discharge date and time, discharge disposition, and discharge to location.
- Quick Filter:** A search bar with a placeholder 'Type to select' and a plus icon.
- Saved Filters:** A search bar with a placeholder 'Type to select' and an 'Apply' button.
- Current Filters:** A section showing active filters: 'Point of Care: Meritus Medical Ctr' and 'Encounter Type: ED Visit', each with a minus icon to remove it.
- Buttons:** 'Clear Filters' and 'Save Current Filter' buttons are located at the bottom right of the filter section.

- Expanded view- Shows the current notification lists, detail view and access additional functionality:
- Create and Manage Filters
- Configuring Rosters
- Downloading up to 5000 rows of encounter notifications

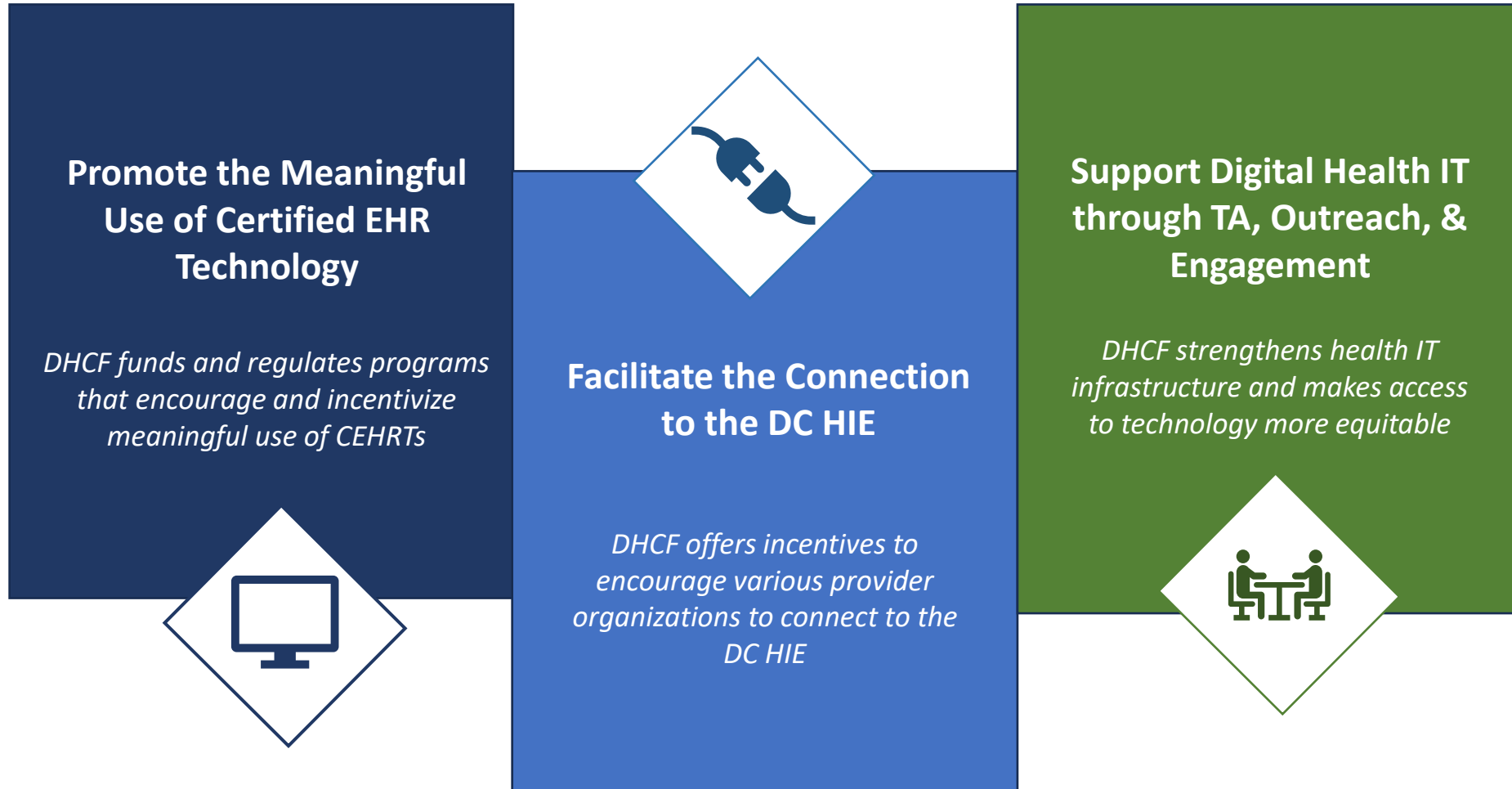
HCBS Digital Health Outreach & Technical Assistance

Eduarda Koch

DHCF

Allocated Time: 4:30 – 4:40 PM (10 mins.)

DHCF Digital Health Outreach and Technical Assistance



Digital Health Outreach and TA programs support a more integrated and accessible person-centered system in the District

New Milestone 7: Training & Engagement Mandatory Requirements

Goal: Enhance EHR and HIE adoption and meaningful use to streamline practice workflows, improve health information exchange (HIE) data integrity and quality, and facilitate community building among District providers to enable better patient outcomes.



GENERAL HCBS PI MILESTONE 7 MANDATORY REQUIREMENTS

- ☐ Appoint a primary representative, the "Digital Health Champion," to serve as an in-house expert for the provider organization (Required to attend all HIE & EHR trainings), a secondary representative may also be assigned
- ☐ Complete all EHR and HIE Training and Engagement Requirements **by March 29, 2024**



EHR TRAINING AND ENGAGEMENT MANDATORY REQUIREMENTS

- ☐ Attend and actively participate in the "**Best Practices for Improving EHR Data Quality**" eHealthDC EHR Training
- ☐ Complete at least 2 additional hours of EHR training provided by eHealthDC and/or vendor (Training must be started after December 1, 2023) **OR** Engage in at least 1 eHealthDC Learning Community (Requires active participation via video conferencing)



HIE TRAINING AND ENGAGEMENT MANDATORY REQUIREMENTS

- ☐ Attend and actively participate in the "**I'm Connected to the HIE; Now What?**" eHealth DC HIE Training
- ☐ Attend at least 1 additional HIE Webinars from the eHealth DC HIE Webinars list

Milestone 7 Incentive Value: \$10,000

New Milestone 7: Training & Engagement

Training/Webinar Options

eHealthDC EHR Trainings	eHealthDC HIE Webinars
<ul style="list-style-type: none"> ● Best Practices for Improving EHR Data Quality (Required) <ul style="list-style-type: none"> ○ Highlight functionality to see report of what is being sent to CRISP within EHR ○ What data is reportable to CRISP ○ Cover data points that make a good ADT ○ Cover data points that make a good CCD ○ Improving SDOH Collection: Transmitting z codes via ADT/CCD (Top z codes to be collected) ● Care Coordination <ul style="list-style-type: none"> ○ Possibility of accepting ENS notifications in EHR (view within EHR, and workflow to view on CRISP) ○ Share patient data to HIE via patient chart/EHR ○ Understanding consent to share in CRISP vs consent to share in EHR ○ Expectations of what others will see in HIE ○ Implications of frequency of uploading Panels to HIE ● Security Awareness & Privacy <ul style="list-style-type: none"> ○ HIPAA Best Practices ○ Implementing EHR timeout procedures ○ Implementing timely locking of encounter notes ○ Securely storing patient information ○ Mitigating Security Risk (e.g., Social Engineering, Password Best Practices, Identifying phishing emails) 	<ul style="list-style-type: none"> ● I'm Connected to the HIE, Now What?! Webinar (Required) <ul style="list-style-type: none"> ○ What encounter data does my organization share, and where can other members of the patient's care team members locate it within the HIE? ○ What clinical data does my organization share, and where can other members of the patient's care team locate it within the HIE? ○ How EHR documentation affects what is available in the HIE ● Consent Tool Webinar <ul style="list-style-type: none"> ○ What is the Consent Tool within CRISP? ○ How to capture consumer consent as apart of provider workflow ● Advance Care Planning Tool Webinar <ul style="list-style-type: none"> ○ How to access and upload advance care plans for consumers in CRISP ● Social Needs Screening Tool Webinar <ul style="list-style-type: none"> ○ How to capture social needs assessments within CRISP, and where the assessments appear within CRISP for other providers to view ○ How to refer patients to different CBO programs based on their needs within CRISP ● PopHealth/Analytics Webinar <ul style="list-style-type: none"> ○ Different reports available within the PopHealth Tool ○ Reports currently underway for provider availability, as well as what kind of measures can be possible using this tool
Learning Communities	
<p>eHealth DC learning communities are intentionally developed office hour sessions designed to build upon the knowledge gained from the <i>Best Practices for Improving EHR Data Quality</i> EHR training & the <i>I'm Connected to the HIE, Now What?! HIE</i> training. These learning communities are designed to promote knowledge sharing amongst participants and will require ongoing interaction and active participation among attendees.</p>	

New Milestone 7: Training & Engagement Training Schedule

To complete HCBS Promoting Interoperability (PI) Program Milestone 7 Training requirements you must complete the following trainings:

1. Best Practices for Improving EHR Data Quality + (at least 2 additional hours of EHR Training by vendor or eHealthDC **OR** participate in at least 1 eHealthDC Learning Community)

AND

2. I'm connected to the HIE, Now What? + (at least 1 additional HIE Training)

Date	Training	Training Type
January 17	I'm Connected to the HIE, Now What?	REQUIRED HIE Training
January 26	Best Practices for Improving EHR Data Quality	REQUIRED EHR Training
January 30	Best Practices for Improving EHR Data Quality	REQUIRED EHR Training
February 6	Advance Care Planning	HIE Training
February 8	Consent Tool	HIE Training
February 13	PopHealth/Analytics	HIE Training
February 16	Security and Privacy	EHR Training
February 20	Care Coordination	EHR Training
February 21	I'm Connected to the HIE, Now What?	REQUIRED HIE Training
February 23	Best Practices for Improving EHR Data Quality	REQUIRED EHR Training
February 27	Best Practices for Improving EHR Data Quality	REQUIRED EHR Training
February 28	Social Needs Screening Tool	HIE Training
February 29	eHealth DC Learning Community	Learning Community
March 5	Advance Care Planning	HIE Training
March 7	Consent Tool	HIE Training
March 12	Care Coordination	EHR Training
March 13	I'm Connected to the HIE, Now What?	REQUIRED HIE Training
March 15	Security and Privacy	EHR Training
March 19	PopHealth/Analytics	HIE Training
March 22	Best Practices for Improving EHR Data Quality	REQUIRED EHR Training
March 26	Best Practices for Improving EHR Data Quality	REQUIRED EHR Training
March 27	Social Needs Screening Tool	HIE Training
March 28	eHealth DC Learning Community	Learning Community

New Milestone 7: Notices of Intent to Participate *

Provider Cohort	Participating Providers	Submitted M7: Intent to Participate
Adult Substance Abuse & Rehab Services (ASARS)	12	12
Department on Disability Services (DDS)	21	18
Housing Support Services (HSS)	7	7
Long-term Services and Support (LTSS)	9	6
Mental Health & Rehabilitation Services (MHRS)	44	44
Total	93	87

*Numbers current as of 1.25.24

DC HIE Infrastructure & Connectivity

Mr. Nikhil Varma

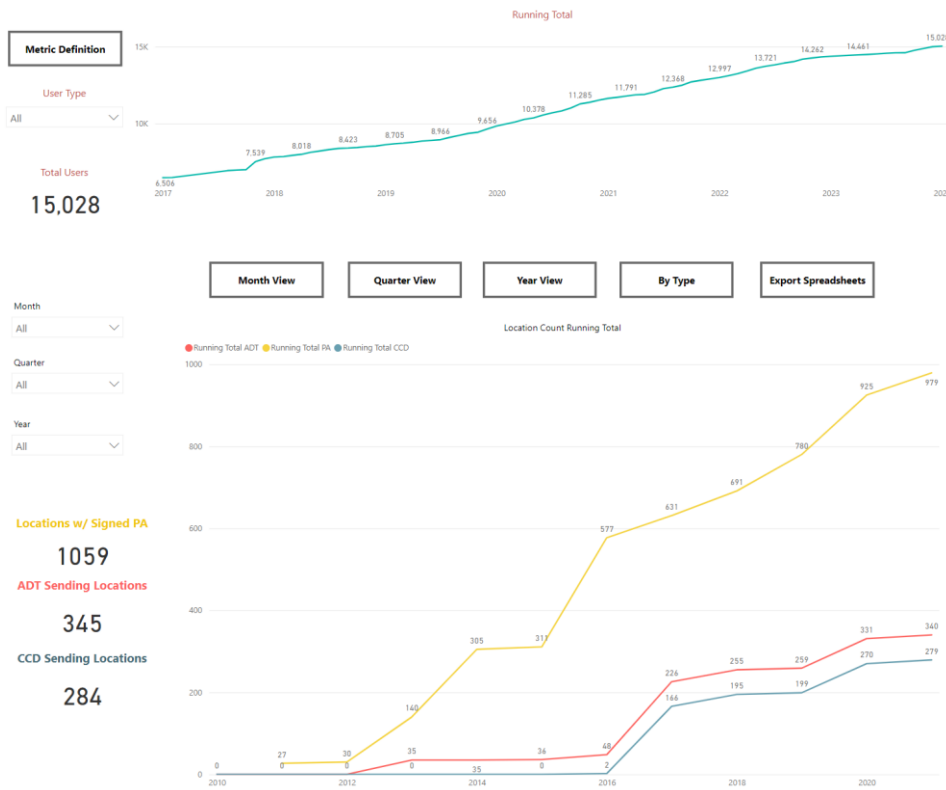
DHCF

Allocated Time: 4:40 – 4:50 PM (10 mins.)

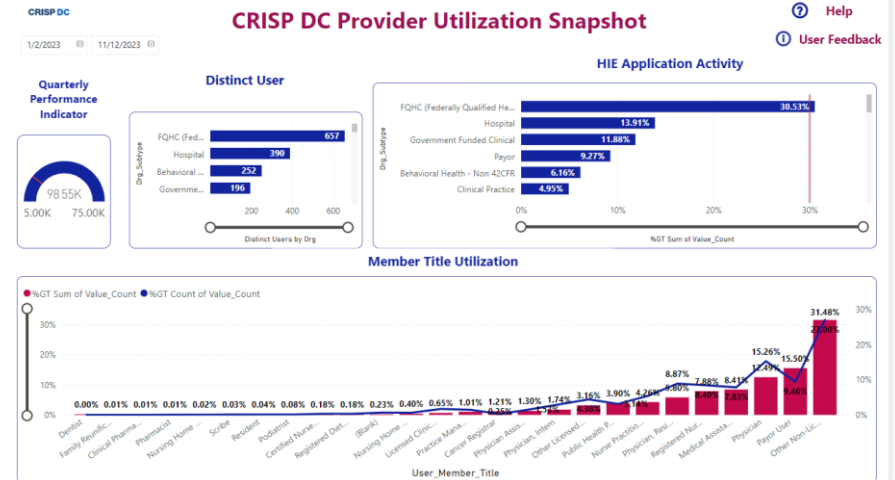
Enhancements to HIE Metrics

Current HIE Metrics

Metric 1: Number of Active DC CRISP Users



HIE Metrics In Development



Consolidate Utilization Measures:

- Aggregate and streamline existing utilization metrics for the CRISP DC portal.
- Aim to have a clear picture of portal usage patterns and feature preferences.

Develop Measures on Data Quality:

- Establish metrics to assess the accuracy, consistency, completeness, and relevance of data within the portal.
- Set guidelines for maintaining high data integrity and quality.

DC HIE Interagency Data Use Workgroup Update

1. Enabling access to notification services and other tools for all DBH-certified provider panels
 - Status: Reviewed Dec. 2024 and pending CRISP DC Clinical Committee approval

2. Enhancing the DC Health Cancer Registry with race and ethnicity data from the DC HIE.
 - Status: In Development - Initial scoping for data sharing

DBH Access to Clinical History to enable care coordination

DBH Encounter Notification and Clinical Data Access

Use Case Received: November 2, 2023; **Workgroup Review:** December 18, 2023

Submitted by: Jana Berhow, DC Department of Behavioral Health (DBH)

Use Case Description: DBH submitted two requests. The first was to enable access to clinical history and health system utilization through the DC HIE to better coordinate care. DBH-certified provider organizations have implemented EHR systems and connected to the CRISP DC HIE. As an oversight authority to support care coordination, DBH staff now need access to HIE tools that are populated with clinical data from DBH certified provider patient panels.

The second request was related to the ability to conduct individual look ups in the event of an emergency received from EOM. DBH is tasked with gathering clinical history and coordinating appropriate care for an individual in crisis. The workgroup determined that such emergencies qualify as a “break the glass” scenario.

Workgroup Decision: Use Case is Approved. DBH is the oversight and certifying authority for the organizations in question, thus for the purposes of care coordination, DBH staff should have access to HIE tools populated with data from all DBH-certified provider panels. Furthermore, emergency conditions qualify an HIE user to “break the glass” to view relevant clinical information to better coordinate appropriate care.

Next Steps: 1) Review by CRISP Clinical Committee at an upcoming meeting; and 2) Coordinate w/ DBH and CRISP to implement.

Enhancing the DC Health Cancer Registry with race and ethnicity data from the DC HIE

Cancer Registry Demographic Data

Use Case Received: July 6, 2023; **Workgroup Review:** July 10, 2023

Submitted by: Eva Reid and Alfreda Woods, Office of the Director and Community Health Administration, DC Health

Use Case Description: DC Health is requesting race and ethnicity data for any encounters related to persons diagnosed with or treated for benign tumors of the brain or central nervous system, or any malignant cancers. DC Health has a high volume of missing information related to race and ethnicity. Accurate recording of race/ethnicity data in registries is crucial for monitoring cancer trends and addressing cancer disparities among cancer survivors. These data elements are included in DC Municipal Regulation Rule 22-B215 – Monitoring and Reporting the Occurrence of Cancer.

Workgroup Decision: Use Case is Approved. Disclosure of requested data disclosure of the data is required under Rule 22-B215.

Next Steps:

- Coordination with DC Health and CRISP underway to scope and implement the use case.

Public Comments



Allocated Time: 4:50 - 4:55 PM (5 mins.)

Next Steps/ Adjournment



Allocated Time: 4:55 – 5:00 PM (5 mins.)

Upcoming HIE Policy Board Meeting

- **Date and Time:** April 18, 2024 from 3:00 pm to 5:00 pm ET
- **Location:** Remote (WebEx) meeting

Stay tuned for more information closer to the meeting date!