

# Rhode Island HIT Steering Committee

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September 21, 2023

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# Agenda

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- Welcome & Introductions
- Review of the Minutes
- Project Updates
- Discussions:
  - Project Dashboard Review
  - CurrentCare Data Connectivity
- Public Comment
- Next Steps and Next Meeting

# HIT Steering Committee: Monthly Project Status (September 2023)

Project	Scope	Vendor	Funding Period	Recent Highlight
Quality Reporting System (QRS)	State-led	IMAT Solutions	Ends SFY 2024	USCDI standards, Depression screening, measure and SDOH measure were discussed at the August ECDE meeting. KIDSNET data for Lead measure and immunizations successfully being imported into IMAT. The DAV process is officially underway.
Community Resource Platform (CRP)	State-led	Unite Us	Ends SFY 2024	EHR Integration (Athena) with Prospect implementation project underway. Discussions with DHS continue regarding the potential usage of the Unite Us platform in Refugee Assistance program. Referral activity continues to grow. Over 409 organizations, with a total of 892 programs, are now part of the Unite RI network.
Health Information Exchange (HIE)	Statewide	RIQI	Approved through SFY 2023	Butler Hospital facility-identified alerts for discharges will go live later this month; providers must be listed with a Direct address in NPPES and patient must consent to the notification in order to receive an alert. RIQI is also developing an AE attribution report for admissions with planned go-live in September 2023.
Demographic Data Standardization	State-led	N/A	CDC Grant Ends May 2024	15 practices have been selected to participate in the Demographic Data Collect Pilot. Orientation kick-off took place on August 23 <sup>rd</sup> and practices are currently performing a Baseline Needs Assessment. The webinar series will begin on October 10 <sup>th</sup> .
Behavioral Health Record-Sharing	Statewide	N/A	N/A	The Mental Health Care Coordination bill S719 was signed into law by Governor McKee. Further dissemination is being planned.

# Rhode Island HIT Steering Committee Project Dashboard



Olivia King, EOHHS

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# Meeting Attendance

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- 6 members have left the committee. The committee is working to replace several vacancies.
- Members have attended meetings on average of 46% so far this year.
- Meetings have had an average attendance of 57 people (members and interested parties) per meeting this year.

# Community Resource Platform (CRP)

**Project Phase:**  
Implementation

**Background:** Adoption of an e-referral system to help address social determinants of health (SDOH). EOHHS issued a Request for Proposals and contracted with Unite Us in May 2021 to implement a statewide social services e-referral platform to be accessed by Accountable Entities for Medicaid beneficiaries.

**Funding Source:** HSTP & CMS  
**Funding Period:** YR 3 (4/29/24)

## Vendor: Unite Us

### Project Objectives:

- Promote community health and well-being through strengthened collaboration of partners offering a wide array of services.
- Improve organizational capacity through accurate referrals and access to data on local service delivery.
- Track the outcomes of all referrals and services delivered.
- Identify gaps in services to proactively address barriers to care and increase health equity.

### Key Risks

- Potential slow adoption by users

### Ongoing Meetings

- UniteRI Sync (Monthly)
- UniteRI Community Information Session (Monthly)

### Point of Contact

- Kash Basavappa  
([Kash.Basavappa.CTR@ohhs.ri.gov](mailto:Kash.Basavappa.CTR@ohhs.ri.gov))

Recent Highlights	Next Steps / Upcoming Activities
<ul style="list-style-type: none"> <li>• Discussions with Refugee Assistance program(s) within DHS on implementing the Unite Us platform in process</li> <li>• Prospect-Athena-EHR Integration discussions underway.</li> <li>• Unite Us and EOHHS are continuing to work with various RIDOH programs to determine potential use cases for additional onboarding</li> <li>• Discussions held with LTSS programs and United Way to review Resource Directories strategies.</li> <li>• United Way Resource Directories integration completed.</li> </ul>	<ul style="list-style-type: none"> <li>• Continue to work with individual Accountable Entities on integration timelines, barriers, next steps</li> <li>• Continuing discussions with other state agencies on how best to extend the Unite Us platform for the state</li> <li>• Complete Prospect-Athena-EHR Integration.</li> <li>• Finalize CRP project sustainability discussions.</li> </ul>

## Outcomes/Deliverables:

Timeline						End Date	% PHASE COMP	% COMP	OVERALL HEALTH			
Q1 23	Q2 23	Q3 23	Q4 23	Q1 24	Q2 24	4/30/24	98%	60%	SCOPE	SCHEDULE	BUDGET	
Year 3 Contract Extension 4/29		EHR Integrations				Risks		<ol style="list-style-type: none"> <li>1. Limited uptake at certain AEs without supported EHR integration</li> <li>2. API not always available from Unite Us - Limits integration with other potential referral feeder platforms</li> </ol>				
Add additional RIDOH/DHS Programs												
RIDOH Family Visits Referrals												
Success Targets/Metrics Established												
United Way Resource Directories Integration												
Establish new relationships with CBOs												

# Quality Reporting System (QRS)

**Project Phase:**  
Implementation

**Background:** The QRS is a data aggregator from multiple sources to support quality reporting and was designed to potentially reduce the number of interfaces requested from clinical sites. The initiative is sponsored by the Executive Office of Health and Human Services for the State of Rhode Island (EOHHS-RI). IMAT Solutions was selected as the vendor for the QRS by competitive procurement and was identified as the solution to provide a single source of data to support multiple quality initiatives, including the Accountable Entity (AE) program.

**Funding Source:** HSTP & CMS  
**Funding Period:** YR3 (9/30/23)

## Vendor: IMAT Solutions

### Project Objectives:

- Provide single source of data to support multiple quality initiatives including the Accountable Entity (AE) program
- Serve as central aggregator for multiple data sources (clinical, claims, other)
- Leverage single interface for multiple reporting requirements and create efficiencies, reducing administrative burden for all parties
- Reduce need for chart reviews

### Ongoing Meetings

- AE/MCO Quality Workgroup
- Electronic Clinical Data Exchange Working Group

### Point of Contact

- Kash Basavappa ([Kash.Basavappa.CTR@ohhs.ri.gov](mailto:Kash.Basavappa.CTR@ohhs.ri.gov))
- Liv King ([Olivia.King@ohhs.ri.gov](mailto:Olivia.King@ohhs.ri.gov))

Recent Highlights	Next Steps / Upcoming Activities
<ul style="list-style-type: none"> <li>• Data Submission log created for DAV – 16 clusters identified.</li> <li>• Measures updates for 2023 nearing completion.</li> <li>• Added additional exclusion criteria to new Lead Measure.</li> <li>• KIDSNET for Lead and Development Screening measures received.</li> <li>• EHR-Data Standards discussions/decisions with ECDE Subgroup</li> </ul>	<ul style="list-style-type: none"> <li>• Complete 2023 measure updates</li> <li>• Complete Lead and Development Screening measures development</li> <li>• Start DAV certification process</li> <li>• Complete import of all immunization data from RICAIR</li> <li>• QRS Website revisions/enhancements</li> <li>• Finalize USCDI requirements with the ECDE Subgroup</li> </ul>

## Outcomes/Deliverables:

Timeline						End Date	% PHASE COMP	% COMP	OVERALL HEALTH		
Q1 23	Q2 23	Q3 23	Q4 23	Q1 24	Q2 24	9/30/23	80%	50%	SCOPE	SCHEDULE	BUDGET
		DAV Certification				<b>RISKS</b>	<ol style="list-style-type: none"> <li>1. Availability of practice resources to perform measure validation checks</li> <li>2. Quality of CCD Data from EHRs</li> </ol>				
	Annual Measures Updates										
Lead and Development Screening Measures Implementation											
	Add All RICAIR Immunization Data										
			QRS Website Modifications								
	ECDE Subgroup Meetings										

# Health Information Exchange (HIE)

Project Phase:  
Maintenance

Budget/Funding Source:  
Multi-payer PMPM  
Funding Period: SFY23

**Background:** The Rhode Island Quality Institute (RIQI) serves as the State’s Regional Health Information Organization (RHIO), also referred to as the State Designated Entity (SDE) for Health Information Exchange (HIE). In this capacity, RIQI operates the statewide HIE, CurrentCare. Operating as a centralized statewide HIE, CurrentCare offers a longitudinal clinical viewer, called CurrentCare Viewer; bi-directional interfaces into provider EHRs; other data feeds; and an analytics environment for reporting, public health purposes, and other use cases.

**Vendor: Rhode Island Quality Institute (RIQI)**

**Project Objectives**

- Improve Interoperability
- Increase Use / Adoption
- Improve the Usability and Utility
- Leverage HIE for Public Health
- RHIO accountability and sustainability

**Key Risks**

- Medicaid funding is dependent on the annual State budget approval
- Provider participation is voluntary

**Ongoing Meetings**

- HIE Advisory Commission (Bimonthly)
- RIQI Advisory Committees (Bimonthly)

**Point of Contact**

- Liv King ([Olivia.King@ohhs.ri.gov](mailto:Olivia.King@ohhs.ri.gov))

**Recent Highlights**

- RHIO Deliverables (Q4 2022 – Q2 2023)
  - Provider Adoption and Use
    - 587 – New users enrolled in CurrentCare Viewer
    - 48 - Organizations with active users (login 11+ times/month)
    - 23 - Organizations with active low usage (less than 11 times/month)
    - 118 - Organizations with zero activity (includes bi-directional interface orgs)
    - 537,058 actively enrolled patients in CurrentCare
    - 15 new data sharing partners
  - Standardized medication list in production
  - Printing Issue resolution resolved

**Next Steps / Upcoming Activities**

- Accelerate opt-out consent technical, operational and compliance efforts, including upgrading MPI software by early 2024
- Add missing discharge summaries, imaging results and BH data
- Connect with additional SNFs for CCDs and ADTs
- Provide AE provider attribution reports to psych discharge planners

**Outcomes/Deliverables:**

Clinical Data Exchange	2023 Q1	2023 Q2
Percent of healthcare sites that log in to CC Viewer 11+ times per month	22.4%	26.2%
Number of ADT notifications sent	122,393	126,781
Ratio of log-ins to users of Care Management Dashboards per month	5:1	4:1
Public Health and Quality Reporting	2023 Q1	2023 Q2
Count of non-hospital lab reportable disease results sent to NEDSS through the HIE per month	726	0
Number of lab results sent to the QRS per month	589,493	575,263

Oct 2022	% Complete	% Standardized
Problem (SNOMED-CT)	99.7%	77.2%
Medication (RXNorm)	172%	96.6%
Discharge Dispo. (CMS)	58.9%	96.2%
Race (CDC)	83.4%	98.3%
Ethnicity (CDC)	72.1%	99.9%
Gender (HL7)	100.0%	100.0%
Primary Language (HL7)	70.5%	0.13%
Sexual Orientation (HL7)	0.0%	0.0%



# CurrentCare Data Connectivity



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Scott Young, RIQI

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# Next Steps & Next Meeting



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October 19, 2023 at 4:00 PM

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# Appendix



# HIT Steering Committee Projects

## Committee's Goals

- ❑ Facilitate decision-making on state-led and state-wide projects, to create awareness by multiple groups of stakeholders about existing and new HIT initiatives, and to make policy or programmatic recommendations.
- ❑ Promote communications of decision-making and activities to the public
- ❑ Build trust (organically)
- ❑ Communicate openly, transparency
- ❑ Understand that their authority is what the group give themselves, and that their scope is what they define it to be
- ❑ Promote shared accountability
- ❑ Identify value propositions for all involved
- ❑ Report out to the health cabinet and external stakeholders
- ❑ The group can propose policy changes to the health cabinet, if applicable
- ❑ Private sector members can propose policy changes to the legislature, if they desire

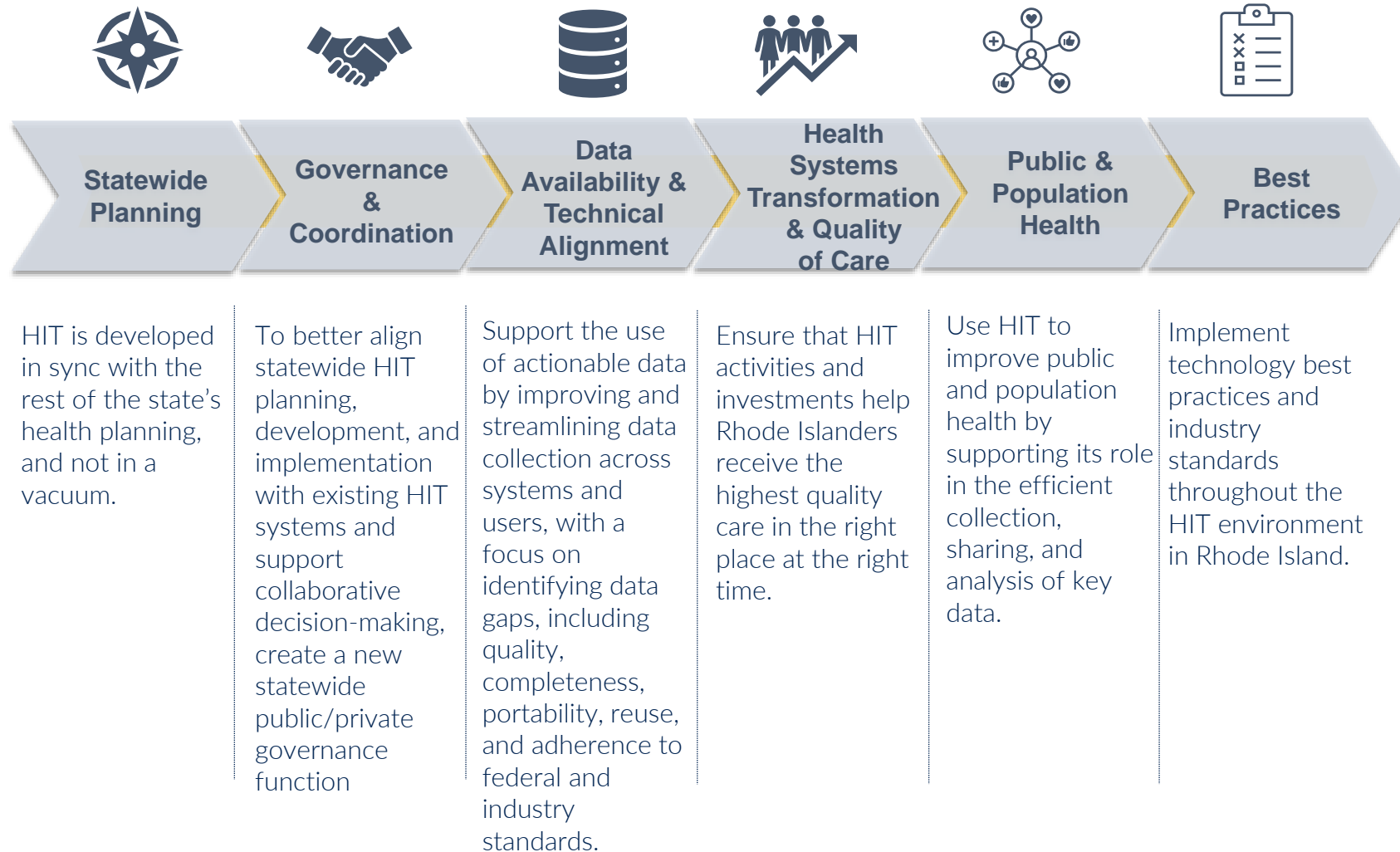
## Current Projects

- Community Referral Platform (CRP)
- Quality Reporting System (QRS)
- Electronic Case Reporting (eCR)
- Health Information Exchange (HIE)
- Race & Ethnicity Demographic Data Standardization

## Parking Lot

- CMS Interoperability – Federal Regulations
- Linking claims, clinical, and SDOH data
- Provider Directory
- UDS+ Electronic Measure Reporting
- Behavioral Health Record-Sharing

# Statewide HIT Roadmap - Strategies



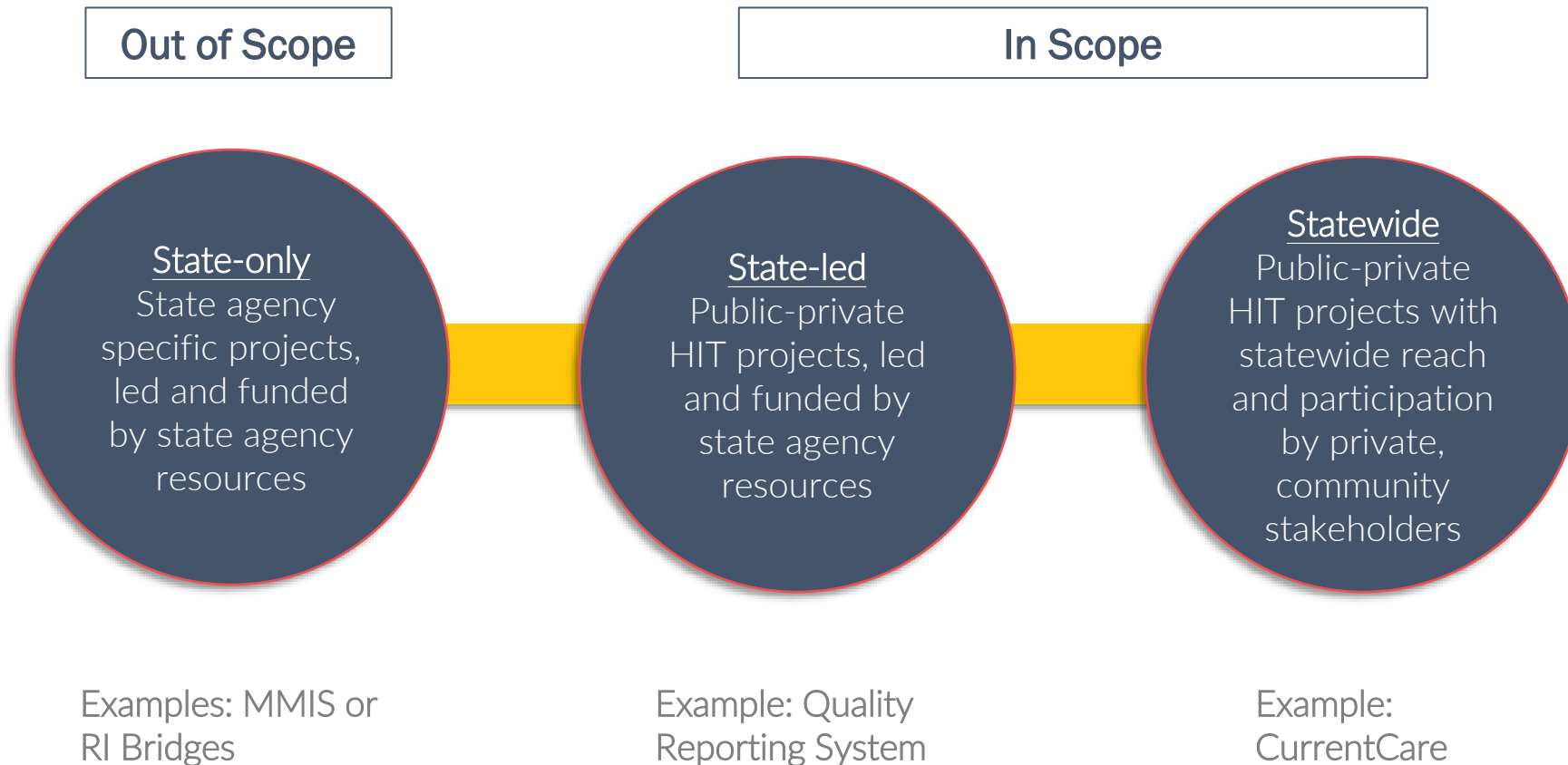
# Statewide HIT Roadmap

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## Goals

- ❑ Develop a new governance and coordination process to ensure statewide alignment
- ❑ Adopt an e-referral system to help address social determinants of health (SDOH)
- ❑ Improve and enhance CurrentCare, including a new opt-out consent policy to increase use
- ❑ Accessing and increasing data availability and sharing, including key demographic data such as race and ethnicity needed to address health disparities
- ❑ Enhance behavioral health records-sharing through aligned interpretation of regulations and stakeholder convening
- ❑ Continue the development of the Quality Reporting System (QRS)
- ❑ Continue work to improve information sharing during transitions of care, such as between hospitals, primary care practices, and skilled nursing facilities

# STEERING COMMITTEE SCOPE



## State-only Initiatives

Transitions of Care (TOC)

Prescription Drug Monitoring Program (PDMP)

Behavioral Health On-Line Database (RI-BHOLD)

Medicaid Enterprise System (MES) Modernization

RI Bridges