



Rhode Island HIT Steering Committee

January 16, 2024

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Agenda

- Welcome
- Review of the Minutes
- Discussions:
 - A. OHIC Demographic Data Standards Work Group: Recommendations
 - B. Regional Health Information Organization Update
- Public Comment
- Next Steps and Next Meeting

All-Payer Claims Database Data Release Review Board

- The APCD DRRB is looking for additional members willing to serve on the board.
- [All-Payer Claims Database Data Release Review Board Website](#)
- If you are interested, please reach out to Arneris Rojas (Arneris.Rojas.CTR@ohhs.ri.gov)

OHIC Demographic Data Standards Work Group: Recommendations

January 16, 2025

OHIC Demographic Data Standards Work Group Background

- OHIC convened the Demographic Data Standards Work Group six times between May and October 2024 to provide recommendations to the Office of the Health Insurance Commissioner on insurer guidance for standardized data collection related to:
 - race and ethnicity
 - language
 - disability status
 - sexual orientation
 - gender identity
 - sex
- The final recommended data standards are summarized on the following slides.

The aims of the Work Group were as follows:

- Facilitate the **advancement of meaningful quality measure stratification** for application in future value-based contracting.
 - OHIC's Measure Alignment Work Group expressed concerns that a lack of common demographic data standards was impeding progress towards meaningful quality measure stratification and health equity improvement.
- **Assist insurers in satisfying an OHIC regulation** regarding obtaining demographic data.
 - The regulation requires health insurers to obtain demographic data for at least 80% of their members by January of 2025.

The Work Group considered the following guiding principles throughout the process:

- Data standards should **align with an existing** or developing standard (state and/or federal).
- Data standards should reflect **current terminology and best practices** for collecting demographic data, while recognizing that these will evolve.
- Data standards **should improve the ability to identify and intervene on health equities.**

Recommendation: Race and Ethnicity (modified OMB with largest RI populations)

What is your race and/or ethnicity?

Select all that apply and enter additional details in the spaces below.

American Indian or Alaska Native: _____

Asian

- Asian Indian
- Cambodian
- Chinese
- Filipino
- Korean
- Laotian
- Another group: _____

Black or African American

- African American
- Cape Verdean
- Haitian
- Jamaican
- Nigerian
- Liberian
- Another group: _____

Hispanic or Latino

- Colombian
- Dominican
- Guatemalan
- Mexican
- Puerto Rican
- Salvadoran
- Another group: _____

Middle Eastern or North African

- Egyptian
- Iranian
- Lebanese
- Moroccan
- Palestinian
- Syrian
- Another group: _____

Native Hawaiian or Pacific Islander

- Chamorro
- Fijian
- Marshallese
- Native Hawaiian
- Samoan
- Tongan
- Another group: _____

White

- English
- French
- German
- Irish
- Italian
- Portuguese
- Another group: _____

I prefer not to answer

I don't know

Recommendation: Language (AHRQ)

In what language do you want us to speak to you?

Choose one.

- English
- Spanish
- Portuguese
- American Sign Language
- Cape Verdean Creole
- I prefer not to answer
- I speak a different language: _____

Recommendation: Disability (Modified HHS – including other responses)

1. Are you deaf or do you have serious difficulty hearing?

- Yes
- No
- I prefer not to answer
- I don't know

2. Are you blind or do you have serious difficulty seeing, even when wearing glasses?

- Yes
- No
- I prefer not to answer
- I don't know

3. Because of a physical, mental, or emotional condition, do you have serious difficulty concentrating, remembering, or making decisions? (5 years old or older)

- Yes
- No
- I prefer not to answer
- I don't know

4. Do you have serious difficulty walking or climbing stairs? (5 years old or older)

- Yes
- No
- I prefer not to answer
- I don't know

5. Do you have difficulty dressing or bathing? (5 years old or older)

- Yes
- No
- I prefer not to answer
- I don't know

6. Because of a physical, mental, or emotional condition, do you have difficulty doing errands alone such as visiting a doctor's office or shopping? (15 years old or older)

- Yes
- No
- I prefer not to answer
- I don't know

Recommendation: Sexual Orientation (modified National LGBTQIA+ Health Education Center)

Do you think of yourself as:

Choose one.

- Lesbian
- Gay
- Straight or Heterosexual
- Bisexual
- Queer
- Pansexual
- I prefer not to answer
- I use a different term: _____
- I don't know / Questioning
- I don't know what this question is asking me

Recommendation: Gender Identity (modified EOHHS SOGI Work Group recommendation)

What is your gender identity?

Choose one.

- Man (Boy)
- Woman (Girl)
- Transgender Man (Boy)
- Transgender Woman (Girl)
- Nonbinary or Gender Fluid
- I don't know / Questioning
- I prefer not to answer
- I use a different term: _____
- I don't know what this question is asking me

Recommendation: Sex (modified EOHHS SOGI Work Group recommendation)

What was your sex assigned at birth?

Choose one.

- Male / AMAB (Assigned Male at Birth)
- Female / AFAB (Assigned Female at Birth)
- Intersex
- X
- I prefer not to answer

Next Steps and Discussion

- Staff submitted these demographic data standard recommendations to the Office of the Health Insurance Commissioner. Next steps are forthcoming.
- **Do you have feedback on the feasibility of implementing these demographic data standards?**

Questions?

Regional Health Information Organization Update

Scott Young, RIQI

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Transition Health Check

Infrastructure/Portal Build	
Interfaces and Integrations Build	
Operation & Process Management	
Communication and Onboarding	
Policy, Procedures, and Compliance	
Existing Contracts Renewal	
Data Archive Strategy	



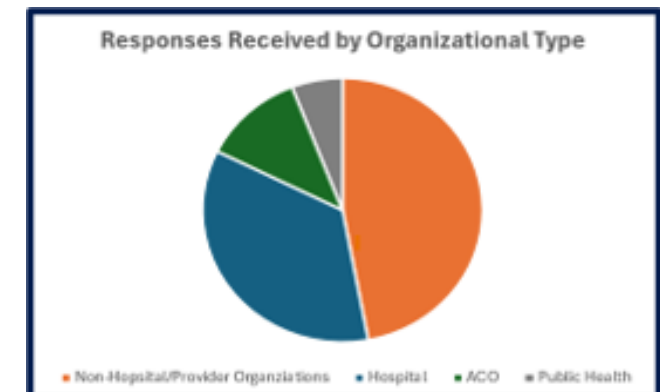
HIE Value Add Opportunities Survey and Ranking

Survey Analysis

- Survey on Value-Add Opportunities distributed to gather input from clinical and community stakeholders
- Identified 20 priority use cases across the following areas:
 - Care Coordination
 - Quality Reporting
 - Population and Public Health Initiatives
- Received 17 responses from clinical, administrative and quality staff

Input gathered from:

Clinical Advisory Committee (CAC)
Hospitals and Hospital Systems
Accountable Care Organizations (ACOs)
Provider Groups and Organizations
Public Health Agencies



Top-5 Survey Value Add Opportunities

Transition of Care (ToC)

Standardize Transition of Care (ToC) summary documents from hospital ER and inpatient encounters to display essential data elements

eConsults and eReferrals

Centralized platform for secure and efficient communication between providers (PCPs) for specialists' consultation and referrals

Include Smart Flags and Alerts

Include Smart Flags and ED alerts within the EHR, such as A1c over 8, substance use disorder, depression, congestive heart failure, and nonfatal drug overdose

Electronic Quality Reporting

Electronic Clinical Quality Measures to demonstrate compliance or supplemental Data Extracts for HEDIS, MIPS reporting to meet performance metrics for reimbursements or incentives

Population Health Dashboards

Population Health Dashboards and Reports enabling data-driven decisions and high-risk patient identification

Feedback from Clinical Advisory Committee

- The Committee agreed on the five identified top projects.
- Upon ranking, the top two projects selected were:
 - Transition of Care (ToC)
 - eConsult and Referrals
- An additional opportunity identified by the committee: **Accepting Patients Platform-** Patients and providers can find which PCPs and specialists are accepting patients

Other Opportunities

(sorted from largest score to smallest)

- **Identify health disparities-** Integrates data across multiple service settings to help identify health disparities
- **Electronic Case Reporting-** Automated reporting to public health agencies on behalf of the providers such as Cancer registry
- **Birth/Death Notifications to vital records-** Notifications from hospitals/SNFs to RIDOH vital records upon birth or death
- **Social Determinants of Health (SDOH)-** Assessments of SDOH with a closed referral loop within CurrentCare
- **Notifications of deceased in vital records-** Notify organizations when their members are deceased in RIDOH vital records
- **Non-opioid directives-** Store, display & alert providers about non-opioid directives (patients' refusal to all opioid medication)
- **Advance Directives or MOLST-** Collecting and sharing Advance Directives or MOLST within CurrentCare
- **Integrate PACS images-** Integrate images within CurrentCare to allow for direct viewing of high-quality radiology images
- **Accepting Patients Platform-** Patients and providers to find which PCPs and specialists are accepting patients
- **Prior Authorization (PA)-** Streamline Prior Authorization (PA) process through CurrentCare Integration
- **ACI/Corrections Discharge Notifications-** Notify attributed Medicaid providers (AEs) of ACI discharges for their members

Transition of Care (ToC)

Description: Enhance the HIE infrastructure to receive Transition of Care (ToC) standard summary documents, including key data elements from hospital visits, and deliver them to community providers through the clinical portal and notification services.

Value: Informed decision-making, and improved coordination of care

eConsults and eReferrals

Description: Provide a platform within the clinical workflow for secure and efficient communication between healthcare providers, for both electronic consultation with specialists and referrals to specialists or Community-Based providers

Value: Reduce cost, save time, and enhance quality of care for patients

Appendix

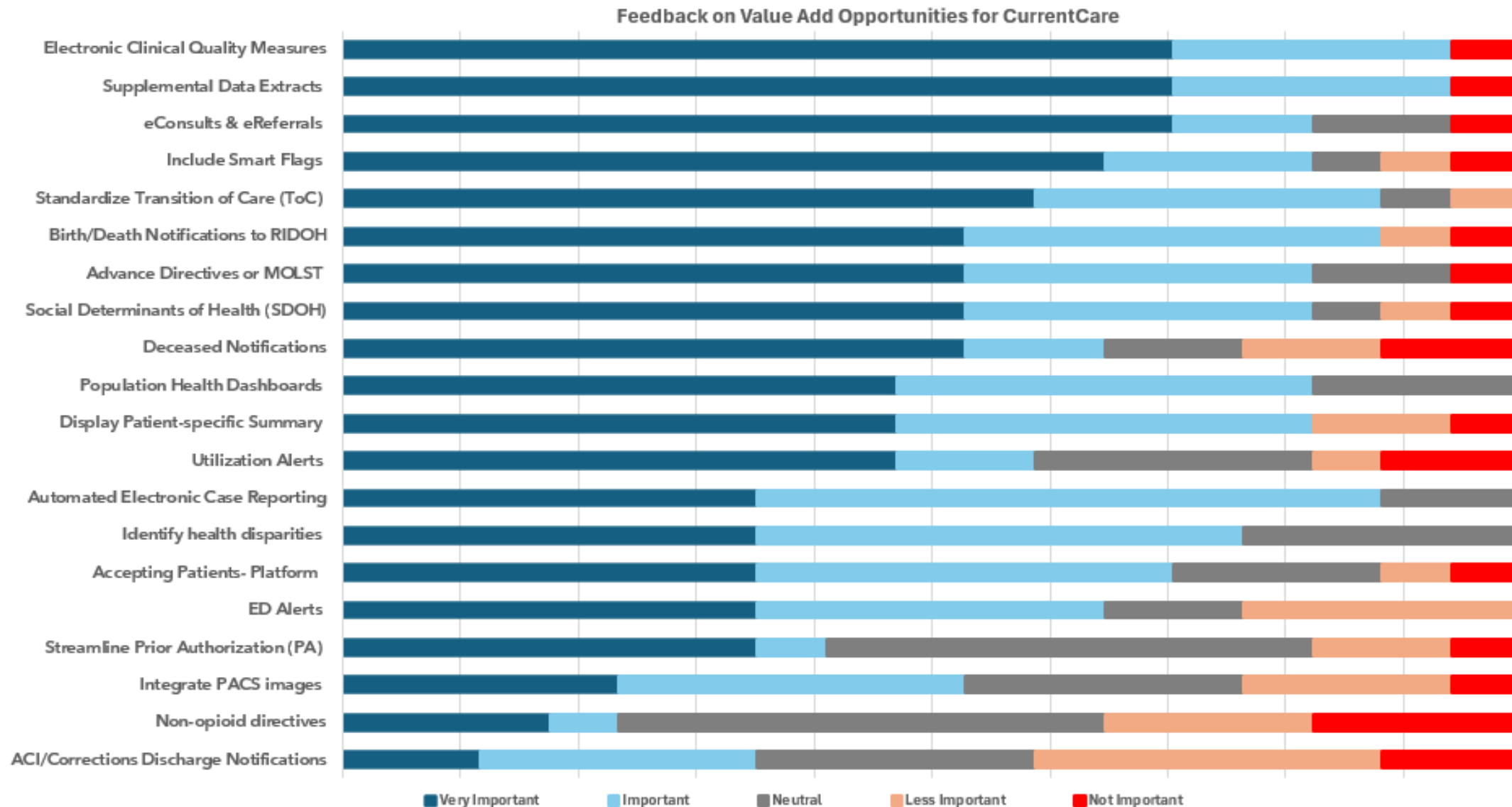
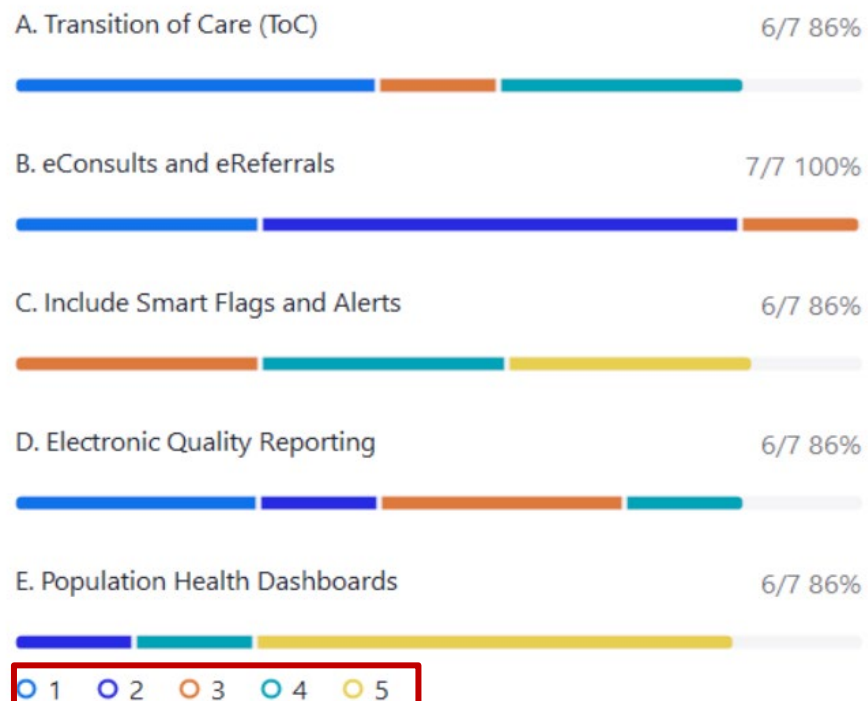


Figure 1. Display projects sorted from Highest Score to Lowest

Feedback from Clinical Advisory Committee

Top 5 Ranked Projects

Meeting poll ended | 1 question | 7 of 10 (70%) participated



Next Steps & Next Meeting



Thursday, March 20th at 4:00 pm

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