## North Carolina Health Information Exchange Authority Advisory Board Meeting

## **MEETING MINUTES**

Date: March 2, 2023 Time: 2:00 p.m. – 4:00 p.m. Location: Virtual

### Attendees:

Dr. William G. Way (Chair) Donette Herring (Vice Chair) Christie Burris (NC HIEA Exec. Director) Carol Burroughs (GDAC Director) Regina Cucurullo (NC HIEA Legal Counsel) Michelle Hunt (NC HIEA, Speaker) Dr. Tammy Kiger Brent Lamm Stephanie Olson (DHHS designee) Dr. Richard Pro Paul Riker (Speaker) Carolyn Spence Jenell Stewart (Speaker) Anna Szamosi (NCDIT Legal Counsel) Secretary James Weaver (NC DIT Secretary) Lauren Wiggs

### 2:02 p.m. Welcome and Call to Order

## All Members & NC HIEA Staff

Meeting called to order by Chairman Way at 2:02 p.m.

### Housekeeping Items

Chairman Way reviewed the draft meeting minutes from the December 8, 2022, meeting at 2:05 PM. Vice Chair Donette Herring moved to approve the draft minutes; Brent Lamm seconded the motion, which passed unanimously.

Next Chairman Way called on the NC HIEA Executive Director to provide the operations update.

## 2:06 p.m. NC HIEA Update

Christie Burris provided an update to the Advisory Board focused on staffing, operational data connection and services metrics as well as a legislative update. Burris introduced newly hired DIT Deputy General Counsel Regina Cucurullo who will primarily support the NC HIEA and its Advisory Board with legal matters. She also announced that eight new positions have been created for which hiring

# Chairman Way

## **Christie Burris**

was underway. As part of that effort, the organizational structure was modified to create two assistant director positions to support the growing HIE. Jenell Stewart has been promoted to Assistant Director Health Analytics and External Services. Michael Crist will be the Assistant Director of Operations. Burris also reported to the board that she included five new positions in a budget expansion request for the 2023/34 Fiscal Year.

Additionally, Burris presented the planned Q1 & Q2 Activities for NC HIEA that include:

## Foundation:

- Promoting services and training to participants
- Continue educating about the HIE Act
- Planning upgrade of InterSystems HealthShare/HealthInsight
- Planning data quality dashboard and patient matching enhancements
- Performing documentation requirements for the NCQA DAV program

## Exchange Services:

- Continue building data connections with health care providers
- Complete pharmacy pilot, begin onboarding pharmacies
- Complete unidirectional data connection from State Lab
- Begin onboarding skilled nursing facilities

## Notifications:

- Continue onboarding participants
- Building maternal health alerts for ACURE4Moms to 20 participating practices

## **Population Health and Analytics:**

- Continue to enhance the Stroke registry to meet grant requirements
- Support the production of measures in the Standard Plan and Behavioral Health I/DD Tailored Plan Medicaid Measure Sets including:
  - Comprehensive Diabetes Care
  - Controlling High Blood Pressure
  - Screening for Depression and Follow-up

Burris also briefly discussed an overview of the participant survey results, to be discussed more in depth once more data analysis has been completed.

Burris provided a brief legislative update, reviewing three recently introduced bills:

- <u>HB196</u> DIT/Omnibus Law Changes. -AB
  - Moves dental and chiropractic providers to voluntary status
  - Adds two new board seats "A provider of Medicaid or other state-funded healthcare services that is connected to the Health Information Exchange Network"
- <u>SB 156</u> Medicaid Children & Families Specialty Plan
- <u>SB147</u> Update Reqs./Advance Health Care Directives

Additionally, Burris reported to the board that the update to the NC HIEA's Advisory Board report was submitted to the NC General Assembly on March 1, 2023, and the enforcement language was included as an attachment.

Regarding Q1 & Q2 activities, Chairman Way asked about the possibility of new patients being created when data is flowing from pharmacies and state lab. Burris responded that yes, a new patient could be created if they could not be linked to existing data already available in the HIE or if the HIE was not already aware of the patient in its master patient index.

There was a question around Opt-Out requirements. Burris informed the board that all participants, both full and submit only, have the obligation to educate patients of their right to opt-out or to rescind an opt out of having their information shared within the HIE Network.

Vice Chair Herring asked if the HIEA was working to address the burden of reporting data to PHPs? Burris responded that completing NCQA DAV is the first step towards alleviating that burden.

Next, Burris gave the Advisory Board an update on three Work Groups – Clinical Data User Group, Use Case Work Group and a review of status of the Research Work Group.

Chairman Way called on Dr. Richard Pro, Use Case Work Group Chair, to give a presentation on the Analytic Hierarchy Process, a technique for organizing and analyzing complex decisions that can be utilized for determining use cases for HIE.

Chairman Way asked Dr. Pro if the Use Case Work Group will define the values and the stakeholders. Dr. Pro answered that a representative sample of stakeholders, including special interests, would identify a list of values. Stakeholders would then evaluate the list of values using a pairwise comparison. Chairman Way pointed out this would require proposals to be well-articulated.

Vice Chair Herring asked how this process would help the Use Case Work Group

decide if a proposal should be supported? Dr. Pro answered the process would include pre-screening to identify and decline commercial requests. Scoring would facilitate comparison with the NC HIEA's mission and vision.

# 3:15 p.m. NCQA Data Aggregator Validation Program (Jenell Stewart, Michelle Hunt, NC HIEA)

Jenell Stewart provided an overview of the DAV program that the NC HIEA is seeking to participate in partnership with Medicaid and outlined the benefits of DAV to participating NC HIEA participants. Next, Michelle Hunt discussed the planning, preparation, and timeline of the program.

Vice Chair Herring asked if Medicaid was considering providing incentives to providers to improve the quality of data submitted to the HIE for the quality measure program? Stewart answered that she was aware of discussions, but preferred representatives from Medicaid to answer the question. There was discussion around inviting Medicaid to the next board meeting.

## 3:25 p.m. NC HealthConnex Upgrade Planning (Paul Riker SAS)

Paul Riker provided an overview to the board on the planning underway to upgrade the HIE's software (InterSystems HealthShare and HealthInsight). He discussed why the upgrade was needed and beneficial (enhancing the clinical portal, capabilities for claims data, improving infrastructure). He also discussed the upgrade approach and the anticipated timeline.

Chairman Way asked about downtime for the upgrade and Paul Riker responded that the last upgrade required around 12 hours of downtime.

### 3:35 p.m. New Business (Chairman Way)

Carolyn Spence asked if the NC HIEA is involved in Medicaid recertification? Christie Burris responded that Medicaid has not reached out to NC HIEA seeking support. Christie Burris will follow up with Medicaid.

The board would like to understand more about how the NC HIEA fits into TEFCA. Christie Burris commented that an overview of TEFCA will be added to the next meeting agenda.

Vice Chair Herring asked about NC HIEA involvement in the State Transformation Collaborative. Burris suggested having a representative present at the next board meeting in June.

### 3:42 p.m. Next Meeting – June 7, 2023, at 2 p.m. (in person)

3:44 p.m. Adjourn

Chairman Way sought a motion to adjourn the meeting at 3:44 p.m. Carolyn Spence made the motion, with a second by Lauren Wiggs. The motion passed unanimously.

Christie Burris

Christie Burris

**Executive Director** 

08/02/2023