

Federal and State Policy Drivers toward Local Cross-Sector Data Sharing

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Federal & State Policy Drivers toward Local Cross-Sector Data Sharing

The Gravity Project and Emerging National Policy Drivers for SDOH Data Exchange

211 San Diego's CIE California Forum 🌀 August 25, 2022

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Digital Health Strategy & Policy, Savage & Savage LLC

Standardizing Social Determinants of Health Data for Use

- SDOH domains, e.g., food insecurity, housing insecurity, transportation insecurity
- SDOH activities, e.g., screening, diagnosis, goals setting, and interventions
 - Scan, identify, develop, validate
- Coded value sets
 - LOINC, SNOMED CT, ICD-10, CPT
- Consensus voting by public collaborative
- Submission to coding stewards
- HL7 FHIR Implementation Guide for clinical care
 - Development, testing (Connectathons, Pilots), balloting and publishing
 - Future use cases and guides for social care, quality measurement, population & public health, community services, research, etc.
- Reference Implementation, Community Engagement, Web/Smartphone Apps

USCDI v2 + Gravity Project's next steps

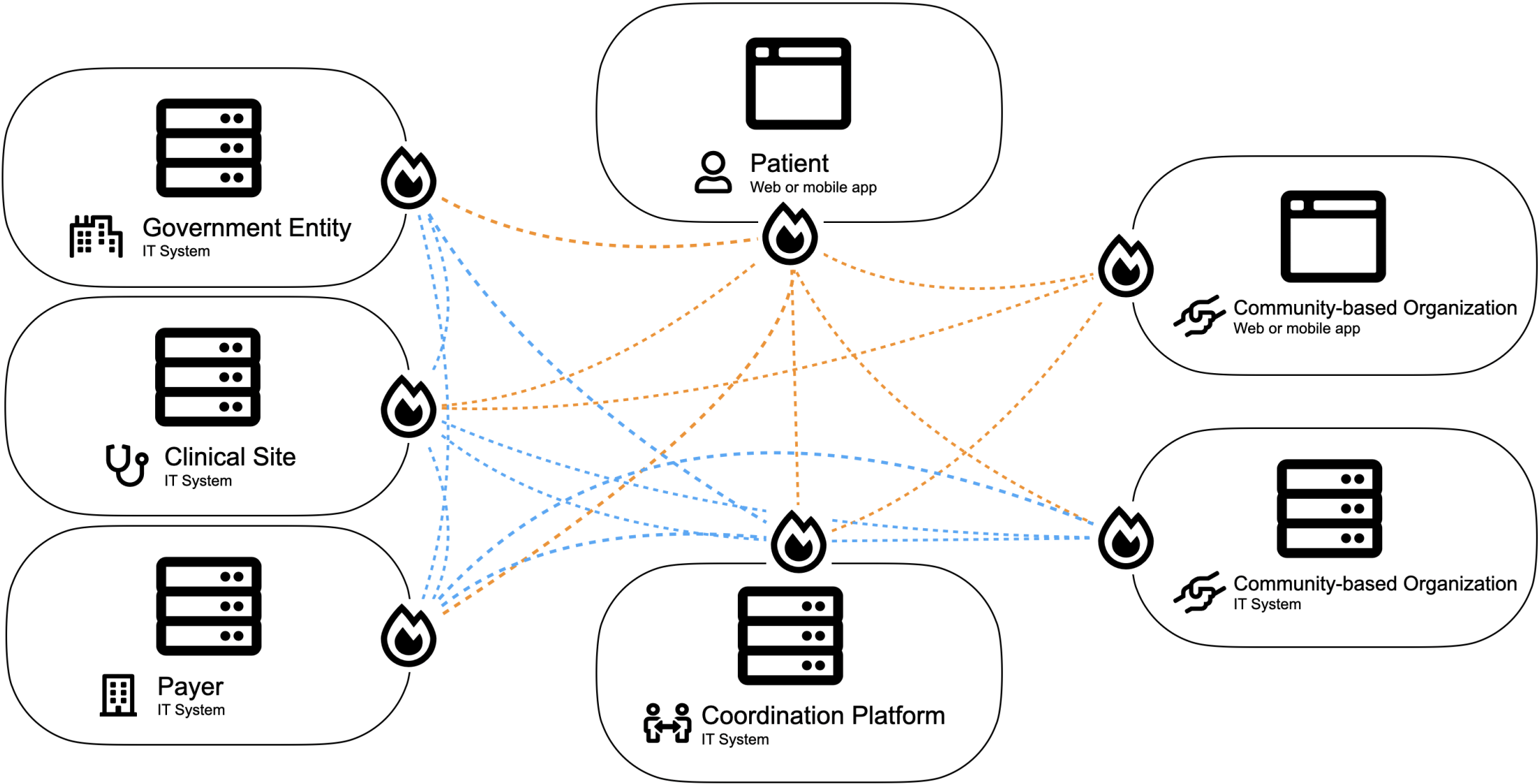


FHIR Implementation Guides (IG) / Use Cases (UC)	Activities / Data Elements	Domains for each Activity**	Code Systems / Value Sets
<ul style="list-style-type: none"> • SDOH Clinical Care IG • SDOH Public Health UC • SDOH Social Care UC* • SDOH Quality Measurement UC* • SDOH Population Health IG* • SDOH Research IG* 	<ul style="list-style-type: none"> • SDOH Assessments • SDOH Problems/Health concerns • SDOH Goals • SDOH Interventions • Consent • Outcomes* • Data aggregation* • Accounting for Care* • Health insurance* 	<ul style="list-style-type: none"> • Food Insecurity • Housing Instability • Homelessness • Inadequate Housing • Transportation Insecurity • Financial Insecurity • Material Hardship • Employment Status • Educational Attainment • Veteran Status • Psychological Stress • Social Connection • Intimate Partner Violence • Elder Abuse • Health Literacy • Health Insurance Coverage Status • Medical Cost Burden Beyond mid-2022 <ul style="list-style-type: none"> • Digital Inequity/Access, Digital Literacy* • Neighborhood: Food Access,* • Neighborhood Safety* • Minority Stress* • Measures of Discrimination/Bias* • Adverse Childhood Experiences* • Protective Factors* 	<ul style="list-style-type: none"> • LOINC <ul style="list-style-type: none"> ▪ Assessments ▪ Goals ▪ Outcomes (e.g., quality measures) • SNOMED-CT <ul style="list-style-type: none"> ▪ Problems/Health concerns (clinical) ▪ Goals ▪ Interventions (clinical) • ICD-10-CM <ul style="list-style-type: none"> ▪ Problems/Health concerns (claims/risk stratification/data aggregation) • CPT/HCPCS <ul style="list-style-type: none"> ▪ Interventions (claims)

*Under consideration

**List not exhaustive for 2022 and beyond. Domains are grounded in then-Institute of Medicine's "Capturing Social and Behavioral Domains in Electronic Health Records" (2014).

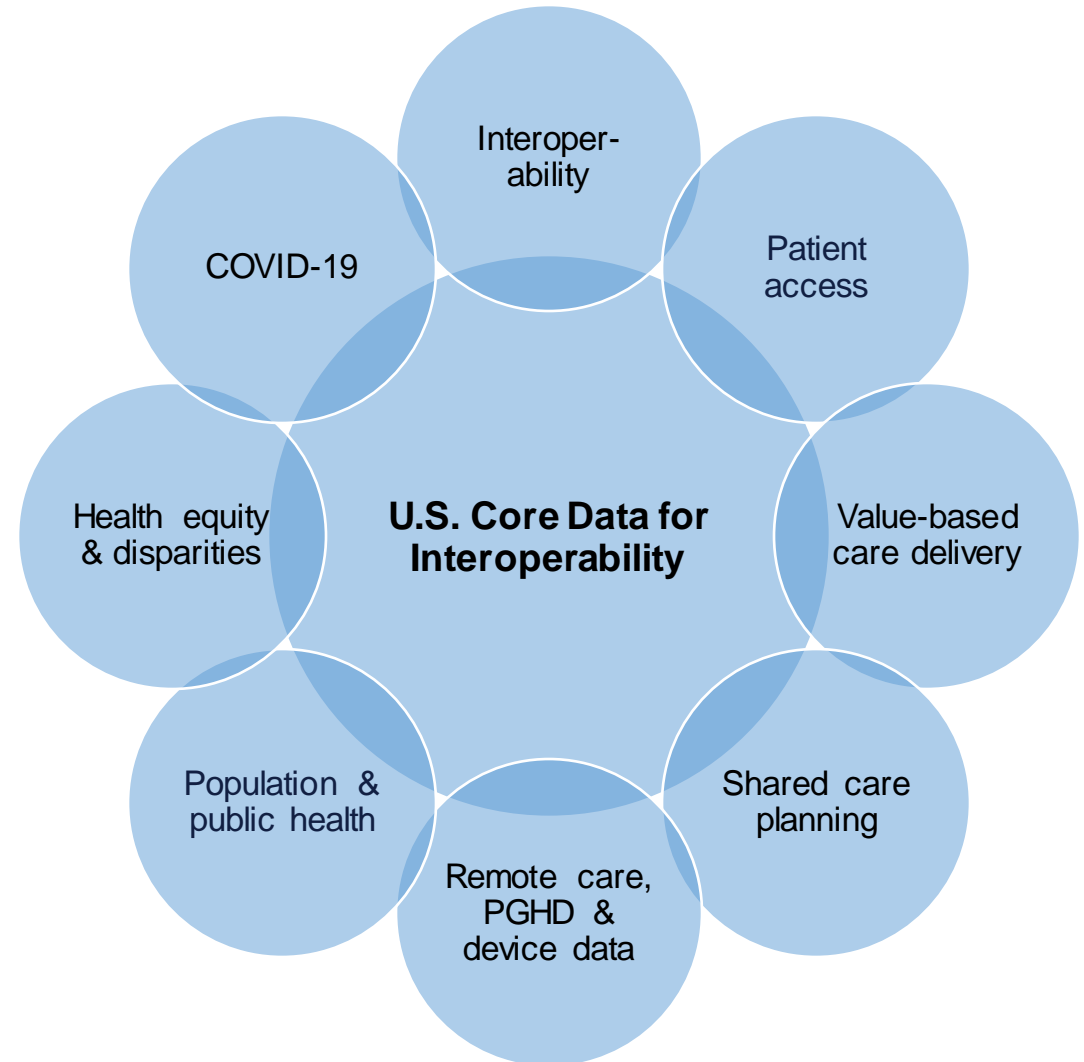
SDOH Clinical Care Implementation Guide STU 2



National use cases that depend on USCDI: USCDI with SDOH data serve myriad needs simultaneously

- **California's Data Exchange Framework**

- Interoperability
- Patient access
- Value-based care delivery
- Shared care planning
- Remote care, PGHD, device data
- Health equity and disparities
- Social determinants of health
- COVID-19
- Patient safety
- Public and population health
- Precision medicine
- Research
- API/app ecosystem
- Digital quality measures



Join the Gravity Project!

Learn More

<https://confluence.hl7.org/display/GRAV/Join+the+Gravity+Project>

- Terminology Public Workgroup meets bi-weekly on Thursdays' 4:00 to 5:30 pm ET.
- SDOH FHIR IG Workgroup meets weekly on Wednesdays' 3:00 to 4:00 pm ET.

- Submit SDOH domain data elements (especially for Interventions):
<https://confluence.hl7.org/display/GRAV/Data+Element+Submission>

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CalHHS Data Exchange Framework



August 25, 2022

Agenda

Background

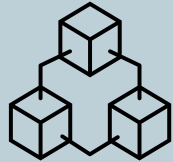
What is AB133 and the DxF?

Timeline

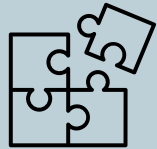
Implications for
CBOs/Social Services

Open Questions

Background



Efforts ongoing to break down silos and expand data exchange in California's health system



Patchwork of voluntary data sharing agreements (DSAs) and community and program-specific agreements

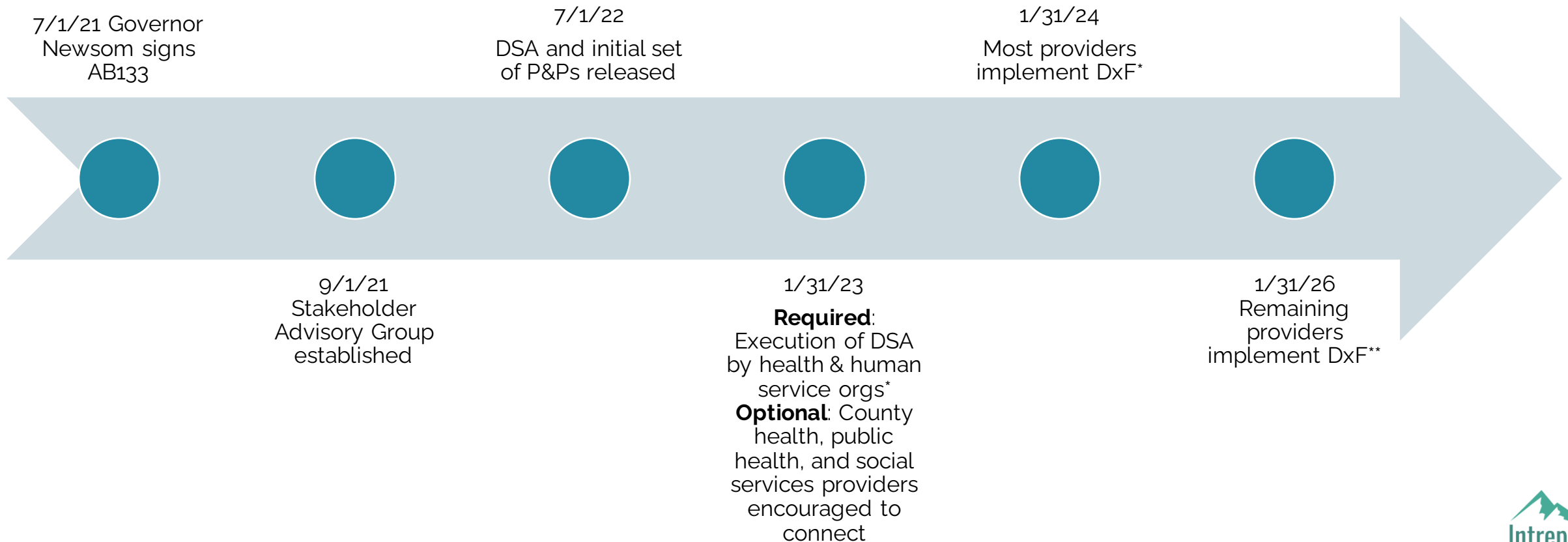


Historically, most state/national networks have focused on health data sharing among health providers/payers

AB133 and DxF

- What is AB 133?
 - Health omnibus trailer bill
 - Established a **data sharing mandate**, requiring certain entities to “exchange [in real-time] health information or provide access to health information to and from” other entities
 - Required California Health and Human Services (CalHHS) to develop the **Data Exchange Framework (DxF)**
- What is the DxF?
 - Single data sharing agreement (**DSA**) and set of policies and procedures (**P&Ps**) to govern health information exchange among health care entities and government agencies
 - County health, public health, and social services providers are **encouraged** to connect to the DxF but are not required to do so
 - It is NOT a new technology or centralized data repository (for now)
 - Information can be exchanged directly among providers/payers and through qualified health information organizations (**Qualified HIOs**)

Timeline



Implications for CBOs/Social Services

Privacy & Security

- Participants not covered under HIPAA must comply with HIPAA privacy & security requirements as if they were acting as a Business Associate
- All participants must have written privacy & security policies around use/disclosure of PHI/PII that are consistent with HIPAA and train all staff who have access to PHI/PII

Funding

- \$50 million in 2022-23 state budget for 2-year TA program for "small or under-resourced providers"

Considerations for Counties

- By 1/31/23, CAHHS will engage with the California State Association of Counties to promote the inclusion of county health, public health, and social services in the DxP
- It is not clear if counties will be designated as "health care organizations" (and therefore be required signatories)

Open Questions

- How will the data sharing requirements be enforced and overseen?
- How will data sharing intermediaries, or "qualified Health Information Organizations (HIOs)," be identified and monitored?
- How does the DxF impact CIE and other forms of cross-sector collaboration and data sharing?
- In their current form, do the DSA and associated P&Ps enable cross-sector data exchange?
- What is the relationship between the DxF and state programs such as CalAIM that are oriented toward community collaboration?

The state will need to clarify key questions via further P&Ps appended to the DSA and/or via "clean-up" legislation.

Contact Information



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Local Implementation Efforts: Alameda County

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Alameda County's Implementation

Social Health Information Exchange (SHIE)

Secure cross-sector data feeds

Robust record matching

Privacy rules for redisclosure



Data Exchange Services

Analytics

Applications

Community Health Record

Behavioral Health scheduling,
tracking, and reporting in County jail

Data Streams

Clinical

Medical and Behavioral Health Claims
(Health Plan)

Hospital and Clinic real-time alerts and
comprehensive care documentation

Emergency Medical Services

COVID Testing and Vaccination

Social

Homeless Management Information
System (HMIS)

Incarceration

Public Benefit Enrollment

Linking Clinical and Social Data and Providers

Technology

MATCHING is CRITICAL!!!

Programmatic subject matter expertise

Governance & Consent

Data Governance Committee

HIPAA Treatment, Payment and Operations (TPO) Exception

Shared Consent

- Non-HIPAA-covered data
- HIV Test Result data
- Social Support Providers
- Consent management registry

Engaging New Policy Opportunities

CalAIM

Managed Care Plan Data Exchange to meet eligibility determination needs

CBO billing for Housing Community Supports

Exploring expectations for Community Health Record use for cross-sector care coordination

Data Exchange Framework

Exploring SHIE's role to support partner data exchange requirements and goals



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