Medicaid Transformation Demonstration Project Health Information Technology Strategic Roadmap

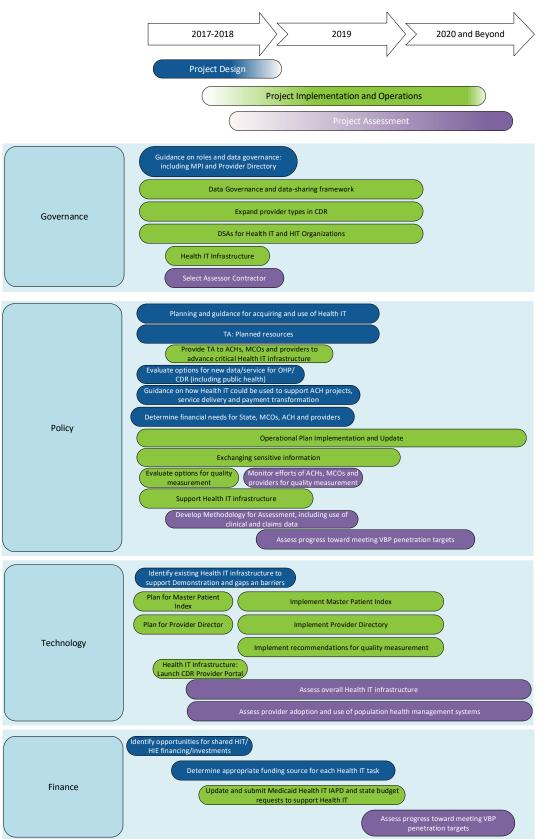
Introduction

The Washington State Medicaid Transformation Demonstration is a five-year agreement between the state and the federal government that provides up to \$1.1 billion in federal investment for regional and statewide health system transformation projects that benefit Apple Health (Medicaid) Clients. Achieving health system transformation for Washington State will require the use of interoperable health information technology (Health IT) and health information exchange (HIE). Interoperable Health IT¹ and HIE² have the potential to improve the quality, continuity, coordination, and safety of patient care, while at the same time reducing unnecessary and costly services. Furthermore, the use of these technologies will help facilitate the State's broader goals of moving toward value-based purchasing.

This Health IT Strategic Roadmap identifies activities necessary to advance the use of interoperable Health IT and HIE across the care continuum in support of the programmatic objectives of the Demonstration. The Roadmap divides efforts into the three phases of the Demonstration: Project Design, Project Implementation and Operations, and Project Assessment, and articulates the role the State, Medicaid Managed Care Organizations, providers and Accountable Communities of Health (ACH) have in advancing Health IT and HIE. In addition to this Roadmap, the State has created an Operational Plan that details the first 16 months (remainder of 2017 and 2018) of activities that provide actionable steps to advance Health IT and HIE in support of the Demonstration. The Operational Plan is appended to this document and will be revised quarterly to reflect progress and document next steps. The Operational Plan will be updated in 2018 to provide the details for 2019 and annually mid-year for the details of the following year. The following diagram highlights the key elements of the strategic roadmap and operational plan:

¹ Health Information Technology is the range of technologies to store, share, and analyze health information, including clinical and claims related data

² Health information exchange is the electronic exchange of health information to facilitate delivery system and payment transformation, care coordination and improved health outcomes



Washington Health IT/HIE Roadmap

Background

Washington State understands the role of and need for interoperable Health IT and HIE to enable the efficient exchange and use of health information, a foundational requirement to achieving the triple aim. In 2009, the Washington State Legislature passed Substitute Senate Bill 5501 to accelerate the secure electronic exchange of high-value health information within the state. This legislation resulted in the designation of OneHealthPort as the lead HIE organization. Subsequently, a clinical data repository (CDR) was created to address some of the challenges with interoperability.

Purpose and Goals

Washington State is undertaking an innovative and ambitious agenda through the Demonstration to advance coordination of care and improve patient outcomes that will be supported, in part, through its use of the CDR and additional activities identified in this Roadmap. The purpose of the Roadmap is to identify the broad goals of how Health IT and HIE will support the Demonstration, recognizing that the more detailed tasks are identified, expanded upon, and tracked in the accompanying operational plan. The Roadmap is built on the following goals:

- Develop policies and procedures to advance the widespread use of interoperable Health IT and HIE across the care continuum;
- Coordinate at the regional and statewide level to ensure that interoperable Health IT and HIE efforts are shared and identified best practices are shared throughout the state;
- Improve coordination and integration among behavioral health, physical health, and Home and Community Based Services (HCBS) providers, as well as community-level collaborators;
- Support the acquisition and implementation of interoperable Health IT particularly for providers who are ineligible for the Electronic Health Record (EHR) incentive program;
- Encourage use of clinical and claims data by the State, ACHs, payers, and others to support a variety of health improvement activities as represented by ACH project plans;
- Develop or expand the critical infrastructure needed to facilitate population health management, including prescription drug monitoring, disease registries and electronic lab reporting;
- Support the electronic exchange of interoperable clinical health information, using standards identified in Interoperability Standards Advisory (ISA);

- Support the development and use of a Medicaid enterprise master patient index and comprehensive provider directory strategy to facilitate more efficient information exchange;
- Align with the Washington State Health IT & HIE Strategy; and
- Ensure the roadmap provides guidance & alignment throughout the duration of the Demonstration, as well as beyond the Demonstration's end date.

Demonstration Health IT Framework

The work of the Health IT Strategic Roadmap is intended to align with the Demonstration's three phases of work: design, implementation and operations, and assessment. These phases are cyclical, with project assessment feeding into future project design. Activities described in this document require work by the State and the ACHs to assemble the infrastructure, develop policies and procedures, and implement incentives to advance the use of Health IT and HIE in support of broader Demonstration activities. As described in this document, these phases support, and are consistent with, the three project stages (design, implementation and operations, and assessment) in the State's approved DSRIP Planning Protocol. This framework recognizes the varying levels of interoperability that exist among regions and providers in the state, allowing regional efforts to advance Health IT and HIE in coordination with the broader statewide approach.

Project Design

Initial phase August to December 2017

During the project design phase, the State will engage and collaborate with ACHs, providers, payers, OneHealthPort, and other stakeholders to develop and disseminate the tasks and deliverables (which will inform the Operational Plan) to advance the use of Health IT for population health management.

This phase will identify the gaps and opportunities to advance in the Health IT and HIE infrastructure, policies and procedures, and incentives necessary to facilitate population health management. ACHs will be expected to identify payers (including Medicaid MCO payers) and providers (e.g., physical health, behavioral health, long-term services and supports, and other community-based services/providers) to collaborate with the State and other stakeholders to assist in and inform the development of the Operational Plan.

The State will provide guidance to the ACHs on how Health IT and HIE elements will be required for incorporation in the ACH project plans and what resources will be made available to support project implementation. ACHs will incorporate this guidance into their project plans to be submitted in November.

Task	Additional Description	Proposed Due Date
The State will engage and collaborate with ACHs, providers, payers (including Medicaid MCOs), OneHealthPort, and other stakeholders to develop and disseminate an Operational Plan	 The Operational Plan will address the following topics: <u>Governance:</u> Roles of stakeholders Data governance Health IT governance Policy: Shared policies and technical standards for secure Health IT and HIE systems Performance measures related to the adoption and use of Health IT and HIE Technology: Types of and how population health management systems that could be used to support: ACH projects, service delivery and payment transformation, and quality and performance management Gaps and barriers Einance Determine financial needs for State, MCOs, ACHs and providers Determine appropriate funding source, including role of Medicaid Financing (IAPDU-SPA-Waiver) 	2017
The State will develop and disseminate guidance for planning, acquisition and use of Health IT and HIE The State will identify technical assistance needs to assist in the acquisition, adoption, implementation, and use of Health IT and	 <u>Policy:</u> This guidance will include interoperable HIT and HIE to support ACH activities <u>Finance:</u> Opportunities for shared HIT/HIE financing/investments <u>Policy:</u> State will develop and make available to ACHs TA resources for HIT/HIE activities in support of Demonstration activities. TA resources may include assistance related to: 	2017 -2018 2017 - 2018 (initially and ongoing through 2020)
and use of Health IT and HIE. The State will notify ACHs of these planned resources. The State will determine the need, and if so how and when, to integrate key Medical, clinical, and public	 resources may include assistance related to: Billing IT and HIT applications; Vendor evaluation and selection criteria; Workflow considerations; and Use of the CDR Policy: This data will potentially include: Assessment and care plan data; and Public Health data such as: 	2020) 2017-2018

health data with the	o Immunizations	
Clinical Data Repository	 Prescription drug monitoring 	

Project Implementation and Operations

Initial phase January 2018-

The project implementation phase will consist of implementing the Operational Plan, collaboratively addressing the Health IT and HIE gaps, aligning statewide initiatives, and positioning the ACHs and state for success in their programmatic objectives.

The Operational Plan will seek to identify and address gaps in Health IT and HIE, prioritizing the most important elements to support Health IT and HIE and ACH-proposed projects. The State will focus on several elements, including data governance and data sharing frameworks, facilitating HIE across multiple provider types, and developing a master patient index and statewide provider directory.

The State is also committed to ongoing alignment among all Health IT- and HIE-related activities within the state, including State Innovation Model efforts, Medicaid Health IT Plan, and Health IT Implementation Advanced Planning Document (IAPD).

During the project implementation phase, ACHs will assist the State in identifying critical gaps and will collaborate with providers, payers, and other stakeholders to develop and support the use of best practices in leveraging Health IT and HIE to support their transformation efforts.

Task	Additional Description	Proposed Due Date
The State will implement, review, update, and disseminate the Operational Plan	 <u>Policy</u>: The State, in collaboration with stakeholders, will: Annually update the Operational Plan and implement Accordingly Identify and share emerging best practices Identify and assist in resolving emerging issues; and Provide quarterly updates on progress on implementing the Operational Plan to CMS/ONC 	2017, 2018, 2019, 2020
State will support and advance critical HIT/HIE infrastructure	 The State will support several activities needed to advance the HIT/HIE infrastructure, including: <u>Governance:</u> The State will develop and disseminate guidance to the ACHs, payers and providers related to exchange of information, including data governance and data sharing framework 	2018

Task	Additional Description	Proposed Due Date
	• The State will develop and	
	disseminate guidance to the ACHs,	
	payers and providers related to	
	onboarding and registration of	
	additional provider types, including	
	expanding the provider types sending	
	and receiving content from the CDR	
	• The State will develop and	
	disseminate guidance to the ACHs,	
	payers and providers related to	
	establishing electronic health	
	information sharing agreements with	
	HIT/HIE organizations	
	Policy: This includes developing and	
	disseminating guidance and providing	
	TA to the ACHs, payers, providers, and	
	other stakeholders on the activities,	
	including the following:	
	• Supporting the onboarding of	
	additional providers to the CDR	
	Use of Consolidated Clinical	
	Document Architecture (C-CDA) in	
	electronic health information	
	exchange activities	
	• The State will develop and	
	disseminate guidance to the ACHs,	
	payers, providers, and other	
	stakeholders related to exchanging	
	sensitive information (e.g. SUD data)	
	<u>Technology:</u>	
	• Launching of the CDR provider portal	
	• Develop and/or purchase other	
	technology as identified and needed	
The State will disseminate	Policy: State will seek to align reporting	2018
information on efforts to	requirements to support and align with	
streamline Behavioral	HIE/HIT standards and support data	
Health reporting	use	
	State will disseminate information on	
	the results of the alignment effort,	
	including requirements	
The State will determine	Policy:	2018-2019
and implement the most	 Document gaps and barriers in 	
appropriate method for the	existing State infrastructure	
creation and management	 Identify work plan for developing a 	
of the Master Patient Index	Master Patient Index for use across	
	information systems (e.g. MMIS, OHP)	
	information systems (e.g. MMIS, OHP)	

Task	Additional Description	Proposed Due Date
	Acquire / implement technology aclution based on work plan	
The State will determine and implement the most appropriate method for the creation and management of the Provider Directory	 solution based on work plan <u>Policy:</u> Document gaps and barriers in existing State infrastructure Identify work plan for developing a Provider Directory for use across information systems (e.g. MMIS, OHP) <u>Technology:</u> Acquire/implement technology solution based on work plan 	2018-2019
The State will evaluate options and draft recommendations for leveraging clinical and claims data to support needed quality measurement/analytic activities of the state, MCOs, ACHs, providers and payers.	 <u>Policy:</u> The state with stakeholder input will evaluate options for leveraging clinical and claims data to support needed quality measurement/analytic activities of the state, MCOs, ACHs, providers and payers. Based on the evaluation of options, the state will draft recommendations for leveraging clinical and claims data to support needed quality measurement/analytic activities of the state, MCOs, ACHs, providers and payers. 	2018
State will implement approved recommendations for leveraging clinical and claims data to support quality measurement/analytic activities of the state and will oversee the efforts of the Medicaid MCOs, ACHs and providers	 <u>Technology:</u> The State will implement approved recommendations for leveraging clinical and claims data to support quality measurement/analytic activities of the state 	
The State will use the HIT/HIE Strategic Roadmap and Operational Plan to update and align key documents and activities	 <u>Policy:</u> Based on the completion of the OP for 2017-2018, the state will update as needed SIM HIT documents; State Medicaid HIT plan; Health IT IAPD; and Medicaid EHR Incentive Program State initiated MACRA Advanced Alternative Payment models. 	2017 for 2017 and 2018

Task	Additional Description	Proposed Due Date
	 Based on the updated OP for 2019, the state will update as needed the same documents. Based on the updated OP for 2020, the state will update as needed the same documents. 	2018 for 2019
		2019 for 2020
The state will update and submit Medicaid Health IT IAPD and state budget requests to support implementation of Health IT, including interoperable HIE and services	 <u>Finance:</u> Prepare Implementation Advance Planning Document Update Prepare state budget requests 	As required

Project Assessment

Initial phase beginning January 2019

The project assessment phase will focus on assessing the direction of the Health IT and HIE in ACH projects and their utility in achieving the goals of the Demonstration. The assessment for each project will be tailored to the specifics of the project and will be conducted by an independent, external evaluator. Assessments will include a mix of qualitative and quantitative analysis, using a variety of data types including clinical, administration, and survey data.

Information obtained through these assessments will be made available to future project planning efforts to ensure any identified shortcomings are not repeated.

Task	Additional Description	Proposed Due Date
The State will contract with	This evaluator will perform the	2019
and support an	following:	
independent external	 Develop a methodology to 	
evaluator	qualitatively and quantitatively	
	assess the impact of the	
	Demonstration on delivery systems,	
	clinical care, health outcomes, and	
	costs;	
	 Assess overall Medicaid system 	
	performance under the DSRIP	
	program;	
	Assess overall Health IT	
	infrastructure;	
	• Assess progress toward meeting VBP	
	penetration targets;	
	• The State will oversee the efforts of	
	the Medicaid MCOs, ACHs and	
	providers;	

It is understood that the Health IT and HIE needs of the State and the ACHs are evolving, which will require both the Roadmap and the Operational Plan to be updated regularly. HCA will provide annual updates to the Health IT Roadmap to document changes in priorities and highlight progress made during the duration of the Demonstration. HCA will also provide reports and updated Operational Plan quarterly to document the progress towards completing activities identified in the Health IT Strategic Roadmap.