

**Vermont Health Care Innovation Project
2016 Health Data Infrastructure Work Group Workplan**



	VHCIP Objectives	Work Group Supporting Activities	Target Date	Endorsements/ Dependencies	Approving Entities	Status of Activity	Measures of Success
Expand Connectivity to HIE							
1	<i>Gap Remediation</i> Remediate data gaps that support new payment and care models, as well as quality measurement needed to support those models, as identified in gap analyses (ACO and LTSS Gap Analyses).	If funds approved by Steering Committee and Core Team, support continued data connectivity technical support to ACO member organizations; receive regular reports on progress.	Ongoing		Steering Committee; Core Team	In progress, additional work proposed.	Connections of ACO Member Health Care Organizations increased.
2		If funds approved by Core Team, develop data remediation plan for gaps identified in LTSS technical assessment. Launch Data Gap Remediation for non-MU providers, including LTSS providers (dependent on funding approval by Core Team); receive regular reports on progress and provide input to support incorporation of these activities into VHCIP Sustainability Plan.	January 2016/ Ongoing		Core Team	Proposed.	LTSS organization connections to the VHIE improved.
Improve Quality of Data Flowing into HIE							
3	Engage in work flow improvement activities at provider practices to improve the quality of the data flowing into the VHIE. These will be identified in gap analyses and analytics, including the LTSS gap analysis.	If funds approved by the Steering Committee and Core Team, support continued workflow improvement activities at provider practices to improve the quality of the data flowing into the VHIE as identified in gap analyses; receive regular reports on progress.	January-December 2016			In progress.	ACO Member data quality improved. DLTSS provider data quality improved.
4	Continue data quality initiatives with the DAs/SSAs.	If funds approved by Core Team, support continued workflow improvement activities at Designated Mental Health Agencies (DAs) as identified in gap analyses; receive regular reports on progress.	January-December 2016			In progress.	DA/SSA data quality improved.
Telehealth							
5	<i>Telehealth Implementation</i> Launch a fully accessible telehealth program as defined in Telehealth Strategic Plan.	Support implementation of 12-month telehealth pilots; receive regular reports on progress.	January-December 2016	Release of telehealth RFP, select pilot projects, launch pilots.		Ongoing.	Technical assistance provided.
6		Collect telehealth program lessons learned for incorporation into VHCIP Sustainability Plan.	December 2016				

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Data Warehousing							
7	Research data warehousing needs; develop cohesive strategy for warehousing solutions supporting practices in care transformation; identify solutions for data registry and warehousing needs; implement solutions.	<i>DA/SSA Data Repository:</i> Support improved integration of the DA/SSA data through the development and implementation of the VCN Data Repository.	Ongoing			In progress.	DA/SSA Data Repository developed and deployed.
8		Support development of a cohesive strategy for warehousing/data analytics systems, selection of solutions, and implementation of solutions.	January-April 2016			In progress.	Project plan developed and initiation of the project begun.
9		<i>Clinical Registry:</i> Support migration of the DocSite to the VITL infrastructure.	January 2016			In progress.	DocSite license migrated and implementation beginning.
Care Management Tools							
10	Engage in discovery, design and testing of shared care plan IT solutions, an event notification system, and uniform transfer protocol.	<i>Shared Care Plan:</i> As appropriate, support procurement and implementation of an electronic solution to create and maintain shared care plans across community providers.	January-December 2016			In progress.	Shared Care Plan solution identified and potentially deployed depending on the identified outcomes.
11	Create project plans for each of these projects and implement as appropriate, following SOV procedure for IT development.	<i>Uniform Transfer Protocol:</i> As appropriate, support procurement and implementation of an electronic solution to share uniform transfer protocols during care transitions.	January-December 2016			In progress.	Universal Transfer protocol solution identified and deployed.
12		<i>Event Notification System:</i> As appropriate, support procurement of a system to improve communication in the transition of care process among providers. Provide information on clinical events such as hospitalizations or discharges to providers.	November 2015-December 2016			In progress.	Communications during care transitions improved through ENS.
General Health Data							
13	<i>HIE Planning</i> Identify HIE connectivity targets; provide input into HIT Plan.	Provide comment on HIT Plan.	January-March 2016			In progress.	Comments provided.
14		Discuss connectivity targets for 2016-2019 and make a recommendation to the Steering Committee and Core Team.	January-June 2016			Proposed.	Connectivity targets identified, documented, and recommended.
15		Discuss a) Informed Consent and general confidentiality issues and b) Federal rules contained in 42 CFR Part 2 Confidentiality Protections.	January-December 2016			Not yet started.	Informed Consent and 42 CFR Part 2 discussed.

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Ongoing Updates, Education, and Collaboration							
16	Reporting on all milestones in the Health Data Infrastructure focus area; review DLSS and Population Health activities and recommendations.	Review one-page monthly status updates for all Health Data Infrastructure work streams.	Monthly			Ongoing.	Written and verbal monthly updates on all payment models.
17	Review 2016 Health Data Infrastructure Work Group Workplan.	Review and discuss draft workplan, developed with DLSS and Population Health staff and co-chair input.	January 2016				Workplan finalized.
18	Coordinate and collaborate with other VHCIP Work Groups on other activities of interest.	Identify activities of interest and establish mechanisms for regular coordination and communication with other work groups.	Ongoing	Coordinate to identify activities of interest and establish regular communication (Other VHCIP Work Groups).		Mechanisms established for monthly co-chair meetings and work group reports to Steering Committee.	Well-coordinated and aligned activities across VHCIP.
19		Provide updates to other work groups on Health Data Infrastructure Work Group activities.	Ongoing			Ongoing.	
20		Obtain regular updates from other work groups.	Monthly	Obtain regular updates on work groups' progress as appropriate.		Ongoing.	
21	Provide input into VHCIP Population Health Plan and Sustainability Plan.	Review and comment on VHCIP Population Health Plan Draft.	Late 2016	Plan outline or draft developed by Population Health Work Group.	Population Health Work Group; Steering Committee; Core Team	Not yet started.	Work Group input incorporated into VHCIP Population Health and Sustainability Plans.
22		Review and comment on VHCIP Sustainability Plan Draft.	Late 2016	Plan outline or draft developed by project leadership.	Core Team	Not yet started.	
23	Contribute to VHCIP Webinar Series.	Contribute topic, speaker, and moderator suggestions for VHCIP's optional monthly educational webinars for staff and participants.	Ongoing			Not yet started.	Monthly webinars conducted on staff- and participant-developed topics.