

Minnesota's Personal Health Record for Long Term Services and Supports Demonstration (funded by a CMS TEFT Grant)

## Minnesota eLTSS Pilot Approach 02/11/2016

## **OBJECTIVES**

- High-level discussion on our thought process
- How we adapted ONC documents and came up with tools to help communicate and get information from our providers
- Share our process of working with the Collaborative to gather information in a structured manner
- Share some early work product from the Collaborative





#### WE HAVE GREAT PARTICIPANTS!







#### **INTERESTED AND ENTHUSIASTIC**

- They are very interested and enthusiastic
  - Most of that is due to who they are as a community
  - We selected their community because they were "all in" for eHealth
- We went through all the participating organizations and settings last week
  - Bottom line: we're collecting data from 10 organizations and 18 settings!
- They have "day jobs"
- They are busy serving patients and beneficiaries
- They respond well to concrete, tangible, well-defined data collection requests and tools





#### **DATA-DRIVEN DISCOVERY**

- Our participants are EXPERTS at defining and delivering CB-LTSS services
- They LIVE with their data they know it and depend upon it
- Best way to get in the game was to dive into the data FIRST...
  - They're on solid ground regarding their data
  - This will help build awareness of our larger objectives as they sift through the data
- Going right for the data elements FIRST allows us to see what sub-domains (and Domains) were important to them by what was selected
- And then we worked our way back up through the User Story...
  - And then Objectives and Measures...





#### DATASET SUGGESTION TEMPLATE V1.0

	۵	В	С	D	E	F	G	н
eľ	TSS Pilot Dataset Suggest	_	<u> </u>		L	T	9	
	/: 12/20/15 12:50	liono						
	12,20,15 12,00							
	Your organization name:			1				
	5							
	Provider Data Legend:	Code	Code Description	Setting Descript	ion			
		1	In EHR/HIT/Data System	{Setting 1, e.g. S	NF)			
		2	On paper, NOT in Data System	{Setting 1, e.g. S	NF)			
		3	In EHR/HIT/Data System	{Setting 2, e.g. H	lospice)			
			On paper, NOT Data System	{Setting 2, e.g. H	lospice)			
		etc.	{add more codes for additional	settings				
		Subdomain 💌	Coded Element 💌	Provider Data 🔻				
_			Employment status	1 (example)	Select from List	LOINC		Employment Status
er	son Information	Work			Y/N			If Not Employed, Would you like to be employed? (ISSUE/GOAL)
	son Information	Work	Employment Benefits		Y/N	NCI caDSR		Do you receive sick leave?
. CI	son mornation		Indicator		1/18	Nercabon		bo you receive sick reave:
е	son Information	Work	Length of time in job	2 (example)	Free Text	SNOMED CT		Number of Months Employed
		Work	Income paid weekly	-(champie)	Free Text	SNOMED CT		Wages (Weekly/Biweekly/Monthly)
			Income paid monthly					······································
Per	son Information		Work hours per week		Free Text	LOINC		Number of Hours Worked (Weekly)
)er	son Information	Work			Free Text			Number of Hours Worked (Biweekly)
	Dataset Suggestions	+				: •		

#### 9.2.1 ACTORS, ACTIVITIES AND SYSTEMS

A	В	C	D	E	F	G
ELTSS Pilot A	Actors, Activities and Syste	ems - V2.0				
Rev: 01/14/16	09:50					
his references	User Story 2, provided in the ON	C's eLTSS Use Case.				
Please complet	te a separate worksheet for each	Setting represented at your org	anization (e.g. "LB Homes" and "Skilled Nursing Facility"), if you have more	than one Setting.		
	Organization Name	Setting Name (if more than one				
	Primary Actor Role	Secondary Actor Role (if one)			Suggested System(s)	Your System(s)
	Determine your Primary Actor	IF you believe you have a		Activities You Perform	This is the anticipated	For your Primary Actor Role,
	Role and describe how you see	Secondary Actor Role,		For your Primary Actor Role, provide a very brief	system name you might	provide your system Name
	your Organization acting in	describe how you see your		description of how you might perform each	use to perform these	and a very brief description of
Actor	this Role	Organization acting in this	Activities	activity, if at all. It's OK to say you don't, too.	Activities	the system you use.
Beneficiary /			Access eLTSS plan			
Advocate			Authorize eLTSS plan Access		- "Beneficiary System"	
(daughter)			Modify "non-regulated"/functional sections of eLTSS plan		- beneficiary system	
(daughter)			Approve modifications/updates to eLTSS plan			
eLTSS Plan			Access eLTSS plan			
Facilitator /			Authorize eLTSS plan access		- "Case Management	
Steward			Modify "non-regulated"/functional sections of eLTSS plan		System"	
Steward			Approve modifications/updates to eLTSS plan			
CB-LTSS			Receive eLTSS plan		- "LTSS Service Provider	
Provider			View eLTSS plan		System"	
Provider			Execute eLTSS plan services and supports		system	
Clinical and			Receive eLTSS plan			
Institutional-			Propose modifications		- "EHR System"	
based Provider			Review eLTSS plan components		- chr aystem	
uased Provider			Send modified clinical record reflecting proposed changes to eLTSS plan			
			Receive and review eLTSS plan		- "Payer System"	
Payer			Authorize updated services within eLTSS plan		- "LTSS/Case	
			Send notification		Management	
				i		i
4 F	Actors Activities and S	Systems Base Flow	Base Flow Visual Depiction 🕒	4		
DY				COUNT: 0		+

#### 9.2.2 BASE FLOW BY STEP/ACTOR

	Α	В	С	D	E	F	G	
1	eLT	SS Base Flow - V2.0						
2	Rev:	01/14/16 09:50						
3								
4	This	references User Story 2, provided	in the ONC's eLTSS Use Case.					
5								
6	Pleas	e complete a separate worksheet	for each Setting represented at	your organization (e.g. "LB Homes" and "Sk	illed Nursing Facility"), if you	have more than one Setting	•	
7								
8		Organization Name	Setting Name (if more than on	e)				
9								
10								
23								
							Description of the "Event/Description" step	
							For each Step that matches YOUR Primary Actor	
-						- · · · · ·	Role, add a very brief description of how you	
		Actor	Role	Event/Description	Input(s)	Output(s)	perform the "Event/Description" provided	-
25			Plan Access Plan Modifier	Access plan	eLTSS plan	eLTSS plan		
	2	Beneficiary / Advocate	Plan Modifier	Modify "non-regulated"/ functional section of plan	eLTSS plan	Modified eLTSS plan		
26	3	eLTSS Plan Facilitator / Steward	Plan Modifier	Modify plan services and access control	ol TSS plan	Modified eLTSS plan		
27	3	ellos Fiant actitator y steward		with beneficiary approval	ecros plan	Mourried et 135 prair		
	4	eLTSS Plan Facilitator / Steward	Plan Sender	Submit/share updated plan elements for	Modified eLTSS plan	Modified eLTSS plan		
28				review & service authorization	mounica ceros pian	mounica cerso pian		
	5	Paver	Plan Access, Review		Modified eLTSS plan	Modified eLTSS plan		-
29		*		elements				
	6	Payer	Plan Service Authorization	Authorize service modifications and	Modified eLTSS plan	Modified eLTSS plan		
30				send notification of authorization				
	7	CB-LTSS Provider	Plan Viewer	View plan, provide service(s) based on	Modified eLTSS plan	Modified eLTSS plan		
31				plan				
	8	Clinical and Institutional-based	Plan Access and Review	Review relevant eLTSS components with	Beneficiary Electronic	Beneficiary Electronic		
32		Provider		beneficiary	Health Record	Health Record		-
	•	Actors Activities and	Systems Base Flow	Base Flow Visual Depiction 🕘	: •			Þ
REA	DY _	·				COUN	r:o ⊞ 🗉 <b>⊡ -↓</b> ++	89%

#### **OBJECTIVES AND MEASURES (EXAMPLES)**

1	eLT	SS Pilot Objectives and	d Measures - Round One (April)				
2	Rev:	12/21/15 20:00					
3					Quantitat	tive means w	e can measure it
4		Organization Responding:			Qualitati	ve is valuable	, but harder to measure
5							
6	Orga	nization Objectives - What ar	re your Organization's Objectives for participating i	n this eLTSS Pilot?			
7	ID	Objective Title	Description	Measure	Quant or Qual	Unit of Measure (for Quant)	Goal
8	1	eLTSS Form Prototype	Create a form from our data that are on the eLTSS list.	The Form gets created	Quant	Yes or No	Yes
9	2	Org awareness of eLTSS	Use the Pilot to inform our Org about LTSS data sharing opportunities	Exposure of the concept beyond the core team	Qual		Hold a Lunch 'n Learn education session
10	3						
11	4						
12	5						
13							
14	Colla	borative Objectives - What d	lo you see as the Objectives for the Community Co	llaborative for part	icipating i	n this eLTSS F	Pilot?
						Unit of	
					Quant or	Measure	
15	ID	Objective Title	Description	Measure	Qual	(for Quant)	Goal
16	1	eLTSS Data Map	Map the eLTSS Data found at each Organization	The map gets created	Quant	Yes or No	Yes
	2	eLTSS Data Sharing	eLTSS Data shared between Organizations	Each Org shares eLTSS data with	Quant		Two transfers per Org; one sent, one received
17	•	Form <b>Examples</b>	÷	lanother		l∩rø ∶ ∢	i
REA	DY						

## FUTURE CODES

A	В	С	D	E	F	G	Н	I	J
eL	ISS Pilot Dataset Suggestion	s - Template V	3.0						
Rev	: 01/24/16 14:30								
	Your organization name:	PioneerCare							
	Provider Data Legend:	Data Code	Code Description	Setting De	escription	1	Future Code	Setting Name	
		1	In PCC	Skilled Nu	irsing Fa	cility	1	Skilled Nursing Fa	acility
		2	On paper, NOT in PCC	Skilled Nu	irsing Fa	cility	2	Assisted Living	
D		3	In PCC	Assisted L	iving				
1		4	On paper, NOT in PCC	Assisted L	iving				
2									
3									
				Data	Future			_	
4 ID	Domain 💌	Subdomain 📃 💌	Coded Element	🔽 Code 🔽	Code 🔻	An wer Type 💌	Vocabulary 💌	Additional Not	Exemplar Question
1	Person Information	Work	Employment status	2		S-lect from List	LOINC	Medicare	Employment Status
								Secondary	
5								questionaire	
2	Person Information	Work				Y/N			If Not Employed, Would you like to be
5									employed? (ISSUE/GOAL)
3	Person Information	Work	Employment Benefits			Y/N	NCI caDSR		Do you receive sick leave?





#### **MISSING DATA ELEMENTS**

272	258	Cross-Cutting Sub-domains	Issues							N/A
	259	Cross-Cutting Sub-domains	Interventions	Procedure / Intervention				SNOMED CT	2015 NPRM	N/A
273			(Technology)					362956003		
274										
275				Dataset Co	oding 2 - Mi	ssing Da	ta Elements			
276										
277	Ente	r data elements that you work with	but are not in the	table above.						
278										
279	Do y	our best to fill in Domain and Subdo	main from the cho	ices above. Describe the Data	Element su	ccinctly;	Use Additional N	otes to further	describe it. Enter	Data Code(s).
280										
281		Provider Data Legend:	Data Code	Code Description	Setting De	scriptio	้า			
282			1	In PCC	Skilled Nu					
283			2	On paper, NOT in PCC	Skilled Nu	rsing Fa	cility			
284			3	In PCC	Assisted L	iving				
285			4	On paper, NOT in PCC	Assisted L	iving				
286										
287										
					Data					
288	ID	Domain	Subdomain	Data Element Description	Code				Additional Notes	
289	1									
290	2									
291										
292										
293	5									
	~									



Note minimum-required fields



#### HOMEWORK #4 – MN PLAN ELEMENTS

A	В	с	D	E     F     G     H     I     J       Data Elements not found in the ONC Dataset Suggestions							
7		Data	set Coding 3 - Minnesota LTSS	Data Eleme	nts not f	ound in the ONC	Dataset Sugge	stions			
8											
9 The ta	able below represents an analysis o	of the fields contai	ned in the Minnesota Commu	nity Suppor	t Plan (C	SP), the Minnes	ota Coordinate	d Services and Suppor	rt Plan (CSSP), and		
0 the M	linnesota MnCHOICES Assessment	•									
1											
2 As you	u did with the first Dataset Coding	exercise, identify	all the data elements you need	l/work with	for each	setting in your	organization b	using one or more co	odes below in the Data Code colur		
3											
)4	Provider Data Legend:	Data Code	Code Description	Setting De	escription	n					
)5		1	In EHR/HIT/Data System	Skilled Nu	irsing Fac	cility - PCC					
6		2	On paper, NOT Data System	Skilled Nu	irsing Fac	cility					
)7		3	In EHR/HIT/Data System	Assisted L	iving Fac	ility - PCC					
8		4	On paper, NOT Data System	Assisted L	iving Fac	ility					
9											
•	Repeated Field?" value). 136 field	s in the CSP/CSSP (	to not appear to have any corre	esponding i	iciu in a	ie eerss standar	u exemplar Da				
.1				Data			Repeated				
.1 .2 ID D		Subdomain	Data Element Description		Item #	Field Type	Repeated Field?	Additional Notes			
1 2 ID 0 3 1			Data Element Description Assessment ID	Data	ltem # 011	Field Type Text	Repeated Field?				
1 2 ID 0 3 1 4 2		Subdomain	Data Element Description Assessment ID Assessment Date	Data	ltem # 011 012	Field Type Text Date	Repeated Field? N N				
1 2 ID 0 3 1 4 2 5 3		Subdomain	Data Element Description Assessment ID	Data	ltem # 011	Field Type Text	Repeated Field?	Additional Notes			
11 12 ID I 13 1 14 2		Subdomain	Data Element Description Assessment ID Assessment Date	Data	ltem # 011 012	Field Type Text Date	Repeated Field? N N	Additional Notes			
1 2 ID 0 3 1 4 2 5 3		Subdomain	Data Element Description Assessment ID Assessment Date	Data	ltem # 011 012	Field Type Text Date	Repeated Field? N N	Additional Notes Additional Notes List the Level of Care the person			
1 2 ID 0 3 1 4 2 5 3		Subdomain	Data Element Description Assessment ID Assessment Date	Data	ltem # 011 012	Field Type Text Date	Repeated Field? N N	Additional Notes Additional Notes List the Level of Care the person meets in order to			
1 2 ID 0 3 1 4 2 5 3		Subdomain	Data Element Description Assessment ID Assessment Date New/Reassessment	Data	Item # 011 012 013	Field Type Text Date Text	Repeated Field? N N	Additional Notes			
1 2 ID 0 3 1 4 2 5 3 1		Subdomain	Data Element Description Assessment ID Assessment Date	Data	ltem # 011 012	Field Type Text Date	Repeated Field? N N	Additional Notes			
1 2 ID 0 3 1 4 2 5 3 1		Subdomain	Data Element Description Assessment ID Assessment Date New/Reassessment	Data	Item # 011 012 013	Field Type Text Date Text	Repeated Field? N N	Additional Notes List the Level of Care the person meets in order to qualify for a program or service included			
1 2 ID 0 3 1 4 2 5 3		Subdomain	Data Element Description Assessment ID Assessment Date New/Reassessment	Data	Item # 011 012 013	Field Type Text Date Text	Repeated Field? N N	Additional Notes			
2 ID C 3 1 4 2 5 3 4		Subdomain	Data Element Description Assessment ID Assessment Date New/Reassessment	Data	Item # 011 012 013	Field Type Text Date Text	Repeated Field? N N	Additional Notes List the Level of Care the person meets in order to qualify for a program or service included in this plan. If no level of care, list			
1 1 2 1D C 3 1 4 2 5 3 5 4 4 6 6 6 6 6 6 6 6 7 7 7 7 7 7 7 7 7 7		Subdomain	Data Element Description Assessment ID Assessment Date New/Reassessment	Data	Item # 011 012 013 014	Field Type Text Date Text	Repeated Field? N N N	Additional Notes			
1 2 ID 3 1 4 2 5 3		Subdomain	Data Element Description Assessment ID Assessment Date New/Reassessment	Data	Item # 011 012 013	Field Type Text Date Text	Repeated Field? N N	Additional Notes List the Level of Care the person meets in order to qualify for a program or service included in this plan. If no level of care, list			

# **Early Homework Results**





### **ORGANIZATION OBJECTIVES**

				Quantor	Unit of Measure	
ID	Objective Title	Description	Measure	Qual	(for Quant)	Goal
1	eLTSS Form Prototype	Create a form from our data that are on the eLTSS list.	The Form gets created	Quant	Yes or No	Yes
2	Create data list	Identify shareable data with HIPAA restrictions	Data is identified	Quant	Yes or No	Yes
3	Create form prototype	Create a form with data we can release	Form is created	Quant	Yes or No	Yes
4	Org education	Use form and pilot project to inform our organization of data sharing opportunities	Share information with treatment team	Qual		Provide information within staff meeting
5	Increase Person Centered Planning	Continue to enhance service planning with person centered concepts	Care Plans show person centered focus	Qual		Train all staff
6	Org awareness of eLTSS	Use the Pilot to inform our Org about LTSS data sharing opportunities	Exposure of the concept beyond the core team	Qual		Hold education session
7	Review internal documentation system	Review ongoing use of SSIS and/or PhDoc with varying caseloads	# staff moved	Quant		2 assessment staffed moved into PhDoc
8	DHS data in PHR	PHR is used to share information between beneficiary and providers.	PHR has data from DHS	Quant	Yes or No	Authorized users can view information
9	Establish a PHR for Waivered Consumers	Create a form from our data that are on the eLTSS list.	The Form gets created	Quant	Yes	Yes





### **COLLABORATIVE OBJECTIVES**

				Quant or	Unit of Measure	
ID	Objective Title	Description	Measure	Qual	(for Quant)	Goal
1	eLTSS Data Map	Map the eLTSS Data found at each Organization	The map gets created	Quant	Yes or No	Yes
2	eLTSS Data Sharing	eLTSS Data shared between Organizations	Each Org shares eLTSS	Quant	# of	Two transfers per Org; one sent,
			data with another		transfers per	one received
					Org	
3	Community Collaboration	Work together with participating healthcare	eLTSS data is	Qual		Improved patient outcomes at
		providers to ensure program success, healthcare	successfully shared			lower cost
		needs coordinated				
4	eLTSS Data map	Create information list/map of what can be	List/map gets created	Quant	Yes or no	List which describes information
		shared between organizations				that can be shared and that which
						cannot due to privacy limitations
5	HIE advancement in our	continue use of HIE technology we've worked	ID email addresses to	Quant		begin more exchange of eLTSS
	collaborative	toward and have access to to continue more use	access points at each			data electronically
		of this	provider			
6	eLTSS Data	eLTSS Data shared between Organizations and	Each Org shares eLTSS	Quant		understand the data each other
	Sharing/Communication	increased communication	data with another			has and how they have it stored
7	ID missing data	Compare what is needed to what is being	List of missing data	Quant	Missing data	Only capture data needed to meet
		captured.	elements			beneficiary need
8	ID duplication of data	Data requirements from other regulations that	List of regulations to be	Quant	List	List provided to ONC to work with
	collection	add to the burden of provider work	addressed			other federal agencies.
9	Leadership	Provide input to the ONC on what is practical for	Feedback to ONC	Qual	Participation	Input provided to ONC.
		use at the care delivery level			and input	
10	eLTSS community sharing	Public forum to inform interested parties of our	One community event	Quant	Yes or No	Yes
		work				





#### DATA ELEMENT HEAT MAP BY DOMAINS

2	Rev: 01/14/16 22:00										
3											
4	Cool Blue:	0-24	Warm Yellow:	24-49	Red Hot:	50+					
5											
			n Facilitator /								
5		Ste	ward	(	CB-LTSS Provid	er	Clinica	al and Instituti	onal-based Pro	ovider	Payer
7		Org 1	Org 2	Org 3	Org 4	Org 5	Org 6	Org 7	Org 8	Org 9	Org 10
8	Cross-Cutting Sub-domains	2	2	1			1	1			2
9	Family and Caregiver Information	21	21	4			4	3	30		14
0	Health, Wellness, and Rights	57	75	51			48	53	83		71
1	Person Information	59	63	41			35	49	44		46
2	Service Planning and Coordination	15	12	6			14	6	24		15
3		154	173	103	0	0	102	112	181	0	148
4	Percent of Total Elements:	59%	67%	40%	0%	0%	39%	43%	70%	0%	57%
15											





Rev: 0	1/14/16 22:00										
+											
5	Cool Blue:	0-10	VarmYellow:	11-14	Red Hot:	15+					
;											
		1	S Plan r / Stevard	CB-	LTSS Prov	ider	Clinical a	nd Institutio	onal-based	l Provider	Payer
;		Org 1	Org 2	Org 3	Org 4	Org 5	Org 6	Org 7	Org 8	Org 9	Org 10
Cross-	Cutting Sub-domains										
	bals	1	1				1	1			1
	erventions (Technology)										
	ues										
Pri	orities	1	1								
Un	its of Service			1							1
5 Family	and Caregiver Information										
	cess & Support Delivery	3	3						5		2
/ Co	mmunity Connections	9	9						11		3
) Fa	mily Information	6	6	4			3	2	7		6
) Inf	ormation & Planning	3	3				1	1	7		3
0 Health	, Wellness, and Rights										
I AD	)Ls/IADLs	17	18	14			12	15	15		18
2 He	alth	14	17	3			16	16	11		15
3 Me	edications	7	13	7			12	14	15		14
4 Ps	ychological Well-Being	1	3	9			3	1	9		4
5 Re	strictions	3	3	10					9		1
	ifety	8	8	6			3	2	11		10
7 Ve	ellness	7	13	2			2	5	13		9
	n Information								-		
	oice & Decision Making										2
	mmunity Inclusion	13	13	6			2	1	13		1
	mographics	21	21	18			21	20	17		20
	rson-Centered Profile	10	10	3			3	6	5		9
	lationships	1	3				1	1	3		1
	sidence	7	7	4			4	9	4		3
	If-Direction	3	4				3	1	1		7
	ork	4	5	10			1	11	1		3
	e Planning and Coordination										
	ersonal Finance Information	3	3	1			1		6		2
	rvice Coordination	4	1	1			3		6		5
0    Se	ervice Information	8	8	4			10	6	12		8

#### EARLY HEAT MAP THOUGHTS

#### Not to be relied upon

- Not all the data is in
  - Not all Organizations have turned in their homework, and...
  - ... we don't have all the data we're going to be gathering yet, so it's an incomplete picture
- Arbitrary groupings
  - Some Organizations have multiple settings future charts will have 18 subs
- Absolute number of data elements chosen do not represent relative value domain-to-domain, sub-domain-to-subdomain
- However, it's a useful gross metric that can be used to compare Actor-to-Actor, Setting-to-Setting
- We can see some Domains are of great interest (sheer number of Data Elements chosen





## **QUESTIONS?**



