

DHIN Update for Delaware Health Care Commission

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Chief Executive Officer
June 2, 2022*



*Empowering
data-driven decisions*

Outline

Strategic Plan – progress in Year 1 (FY22)

Other FY22 Accomplishments

DHIN's Commitment to Best Practices

Work Planned for FY23

Major Themes of DHIN's Five-Year Strategic Plan

Maintain our relevance in a value-based payment market

- New sources and types of data
- High quality data (complete, standardized)
- Access to analytics

Strengthen our ties to the State

- Explore new relationships (DEMA, DSAMH, others)
- Re-energize the “public” in our statutory status as a “public-private partnership”

Ensure business sustainability and value-based pricing of our services

Maintain and leverage our current strengths and advantages

- Neutral, trusted not-for-profit
- Face-to-face relationships – our stakeholders and customers are also our neighbors
- Large and comprehensive repository of well-curated clinical and claims data

Strategic Theme 1: New Sources/Types of Data

New Data Types

Delaware Digestive Care – endoscopy reports

DSAMH – Behavioral Health and “Part 2” data

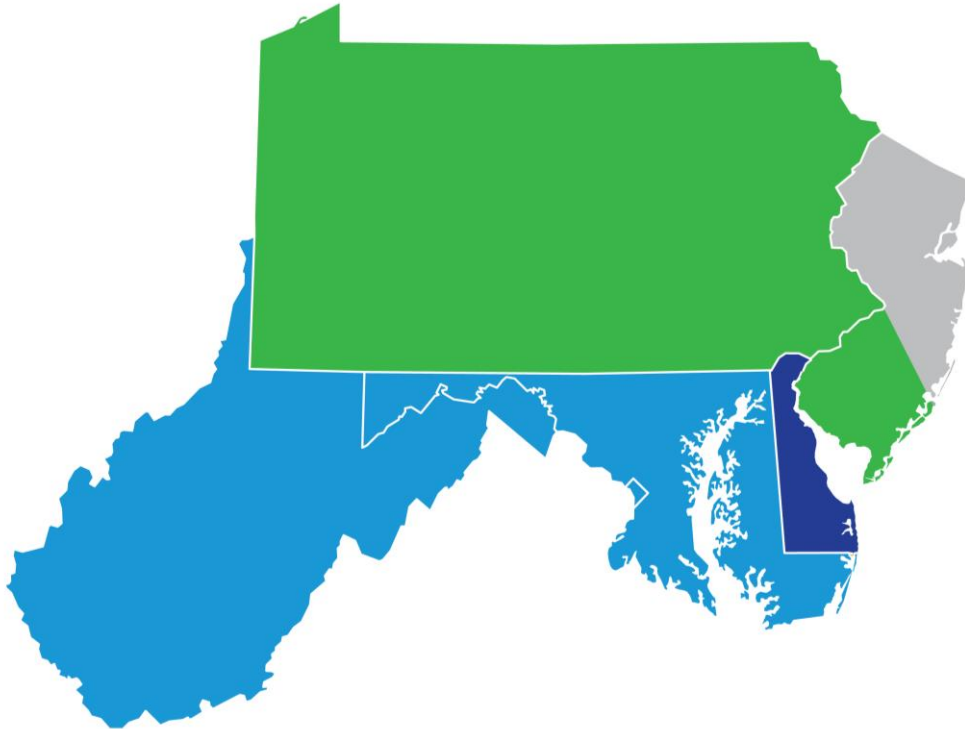
New Data Sources

Encompass Health – first rehab hospital – ADTs now; clinical data to follow

33 Skilled Nursing Facilities – ADTs and care summaries

P3N – ADTs on Delawareans from across all of Pennsylvania

Geographic Sources of DHIN Data (Clinical)



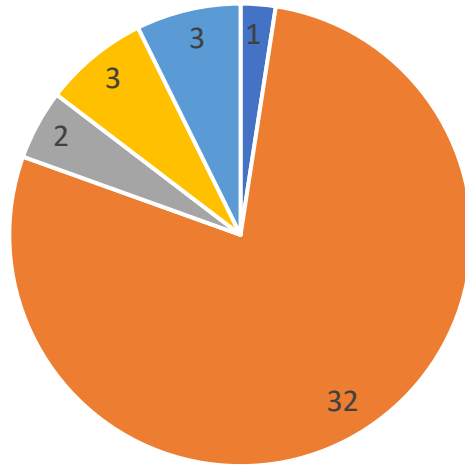
All Data for patients (DE)

Encounter Information on Delawareans (PA, Southern NJ)

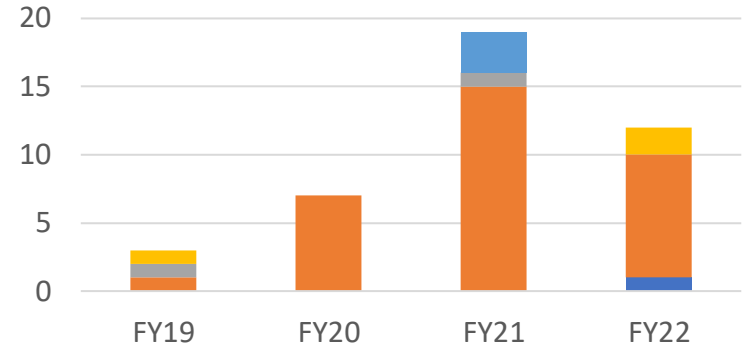
Encounter and Care Data for Delawareans (MD, DC, WV)

Strategic Theme 2: Strengthen our Ties to the State

Health Care Claims Data Projects

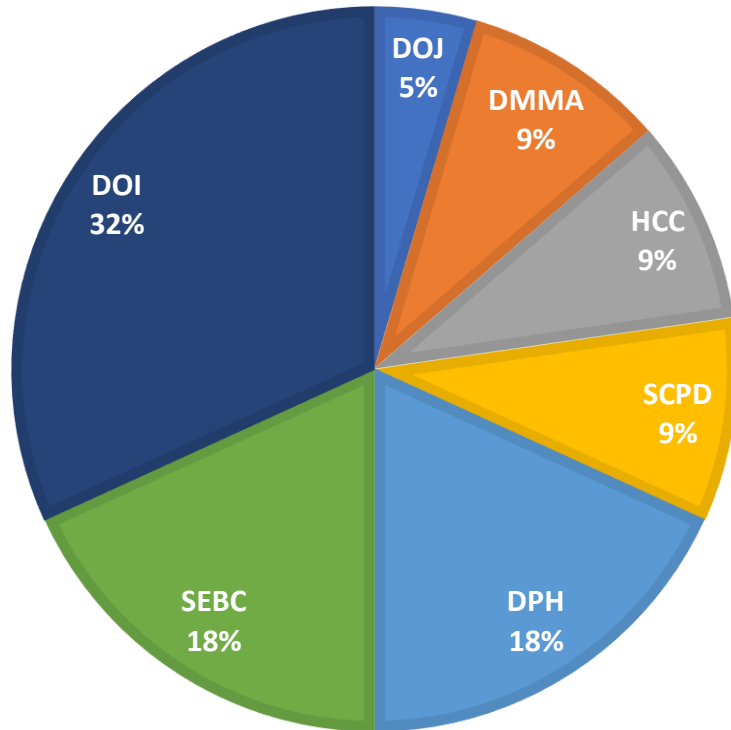


- Commercial Research Partner
- Delaware State Agency
- DHIN Data Partner
- Federal Government Agency
- INBRE



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Claims Projects For State Agencies (75% of all HCCD Projects)



Notable Projects:

- Child death review (CDRC)
- Rate of HPV vaccines in children 11-12 years old (DMMA)
- CostAware (HCC)
- Traumatic Brain Injury (SCPD)
- COVID & underlying conditions (DPH)
- RAND Hospital Transparency Study (SEBC)
- Trends in cost & utilization (DOI)

Strategic Theme 3: Business Sustainability; Value Study

DHIN's margin over the past six years has been 1% -- we are not for profit

DHIN is a “public instrumentality” vs a 501c3 – carries both advantages and disadvantages

Not a State Agency – any State funding must be through a contract with a State agency, or a special appropriation (eg the appropriation to fund the startup of the HCCD)

We've had contracts with Public Health, DSAMH, DMMA and HCC in FY22

Contract with DMMA has secured 90/10 Federal Financial Participation for the HCCD

Strategic Theme 3: Business Sustainability; Value Study

Not a 501c3 – as such, we don't qualify for many charitable grants, including those available for purposes of COVID relief

Received a small ARPA grant that will let us onboard SUN Behavioral Health in FY23

Received a Highmark Blueprint grant to sustain the DMOST registry for two more years

COVID hit the hospitals hard financially, and they provide roughly half of DHIN's operational revenue – they are now seeking cost reductions and assurance of value for all expenditures

Independent Third Party Value Analysis

Over \$43 million in value provided annually

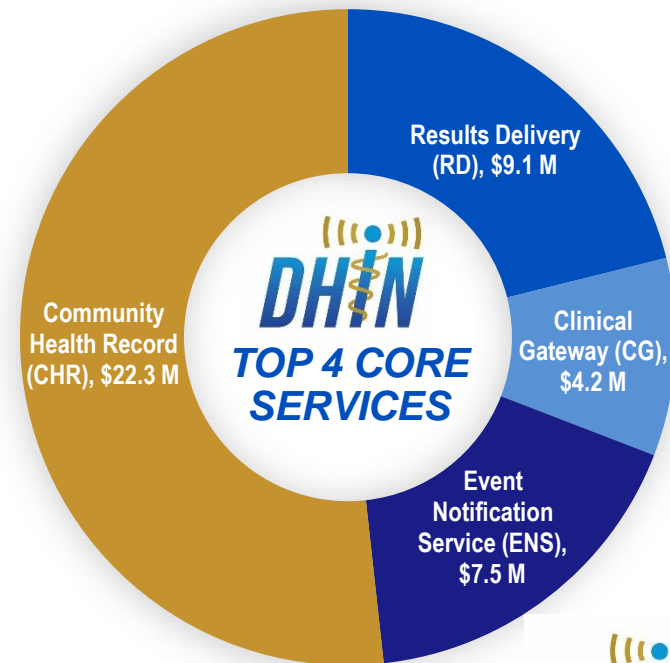
Community Health Record (CHR)

Results Delivery (RD)

Event Notification Service (ENS)

Clinical Gateway (CG)

With \$9-10M in annual operating revenue, DHIN core services return \$4 of value across the ecosystem for every \$1 in operating revenue



The Value Proposition

Community Health Record

One connection to the CHR saves time and resources.

Requesting & collecting information from multiple sources can require 5 to 10 minutes per chart accession.

The CHR is viewed 71,000 times per day with 180 daily views by the average ambulatory practice.

**Value to the ecosystem:
\$22.3M annually**

Electronic Results Delivery

11.9M clinical results delivered annually through DHIN results delivery services (FY20)

One connection to DHIN replaces 1,152 point to point interfaces.

**Minimum Annual DHIN
Impact on Interface
Development, Maintenance,
Data Normalization: \$9.1M**



The Value Proposition

Event Notification Service

Over 1M notifications annually of hospital/ED admissions/discharges

Supports timely follow up and care coordination; shown to reduce readmissions and ED visits

Value in reduction of Medicaid ED visits alone: \$7.5M annually

Clinical Gateway

Clinical data matched to patient panels and sent in bulk to the subscribing organization

A population management tool

Panel size of participating ACOs, payers, hospitals total ~ 1.6M members

Minimum Annual impact: \$4.2M in cost avoidance

Clinical Gateway Value cont'd

Six Month Pilot with Highmark:

- 47% improvement in member engagement rates
- 64% increase in Care Coordination Enrollment after member engagement
- Overall, 143% increase in Care Coordination Enrollment

Impact:

*Average savings per avoided ED visit:
\$1,600

Average cost per avoided hospitalization: **\$15,200

**Source: For a commercially insured individual under the age of 65, Consumer Health Ratings (2019)*

***Source: Agency for Healthcare Research and Quality (2019)*



Other FY22 Accomplishments

“CoP” Notifications

Epic SSO – in progress

Parse claims elements into CHR

Parse CCD elements into CHR

St Francis Epic Conversion – in progress

Numerous HCCD projects

Patient consent tool, v2

COVID support for Public Health

“DASH” – pilot school absentee notifications with Nemours and Colonial School District

Message Traceability

Aetna Payer bundle

Document DHIN architecture of all services

Disaster Recovery test

HITRUST Interim Cert

>100 hrs of manual work automated

Upgrade to FHIR R4

New DHIN regulations

New participation contracts



DHIN's Commitment to Best Practices



Best Practices in
Information Security
Management



Best Practices in iT
Service Delivery



Best Practices Business
Relationship Management

DHIN's 41 employees hold 185 certifications in ITIL & Business Relationship Management

Work Planned for FY23

Begin CHR replacement

HITRUST recertification

Expansion of data from Encompass

Onboard SUN Behavioral Health

**Onboard First State Orthopedics
(imaging reports)**

**Scale up school absentee reporting
("DASH")**

Ongoing HCCD projects

**Ongoing COVD work with Public
Health**

**Single Sign On (or similar) to CHR for
Epic EHR users**

St. Francis Epic conversion

**Syndromic Surveillance and
Electronic Lab Reporting to DPH
replacement for DERRS**

TidalHealth interface to DHIN

**Ongoing internal projects for
improved operational efficiency**

**Complete the distribution and
execution of updated participation
agreements**





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Q & A?