

Michigan Health Information Technology Commission

February 22, 2022

The Michigan Health Information Technology Commission is an advisory Commission to the Michigan Department of Health and Human Services and is subject to the Michigan open meetings act, 1976 PA 267, MCL 15.261 to 15.275

Virtual "Housekeeping" Guidelines



Access

- This meeting is being recorded.
- For members calling into the meeting and unable to use web-based meeting features, an open comment periods will be offered at the end of the meeting.
- If at any time you have accessibility or technical issues during the meeting, please contact WelchMaraharM@michigan.gov



Interacting

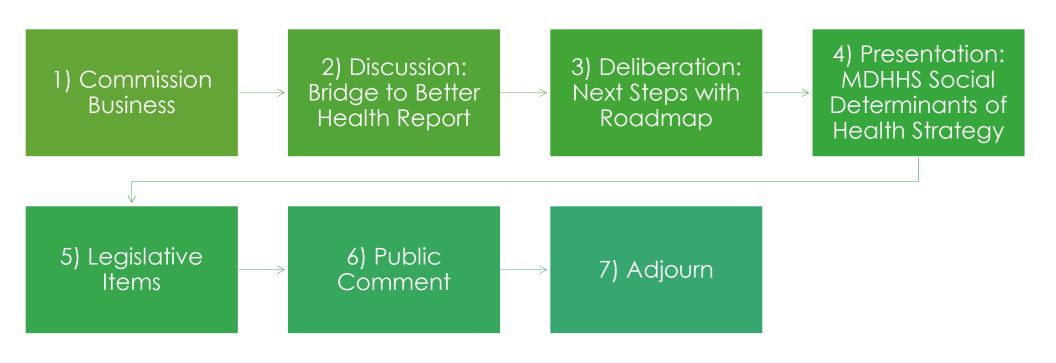
- Web cam video display is reserved for commissioners and presenters.
- The group chat will be monitored and utilized throughout the meeting. Any questions or comments raised in the group chat will be read aloud.
- Unless otherwise specified, all attendees (besides the presenter) will be muted during a presentation. This rule will reduce background noise or "feedback."



Public Participation

- Except for the public comment period, public participants should remain muted unless invited to speak by the commission.
- Per the Michigan Open Meetings Act, disclosing your identity in this meeting is not required.
- The public comment period will be accessible for multiple modalities at the end of the meeting.

February 2022 Meeting Agenda



1. Commission Business

A. Quorum
B. Welcome and Introductions
C. Co-Chair Election
D. Approve Meeting Minutes

Led by: Chair



2. Discussion

Bridge to Better Health Report: Michigan's Five-Year Health IT Roadmap

Led by: MDHHS Policy, Planning, and Operational Support Administration



Key Informants: Highlights from Engagement



500+ individual stakeholders engaged



300+ Michigan organizations engaged



250+ registrants for online virtual forums



50+ key informant oneon-one interviews



300+ survey responses received



Over 40 hours of facilitated virtual sessions dedicated to receiving public comment





Evolution of Michigan Health IT Strategic Policy

Conduit to Care Report Principles

- Consumer privacy, security and confidentiality is paramount
- Clinical data will only be initially utilized for the clinical care process
- The delivery of health care is local; therefore, health information initiatives at the regional level are critical
- Multi-stakeholder collaboration is needed to implement achievable and measurable initiatives in order to show early progress and value.

Bridge to Better Health Report Principles

- Identify champions and empower leaders
- Enhance health data utility
- Work to address Michigan's digital divide
- Improve onboarding and technical assistance programs
- Protect public health
- Adopt standards for social care data



Summary of Final Draft Public Comments Received



Access to core services

- Broadband accessibility must be a top priority, especially in rural areas and for EMS
- Onboarding and technical assistance must be catered to improving health IT usability



Community based organizations

- Long-term funding strategies are needed to stand up communityclinical efforts, especially for CBOs
- Sharing social care data must focus on increasing access to community resources

Data quality and interoperability

- Health IT efforts must demonstrate better health and outcomes to be prioritized
- Improving existing infrastructure is vital, especially as new technologies continue to emerge

What's ahead?

SHORT-TERM

2022-2027 Health IT Roadmap

Aligned priorities

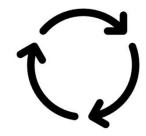
Assessed capabilities

Plan for regulations

New partnerships







Ensure continued maturity

Establish process for iterative updates

Effective use of scarce funding

Continually assess outcomes





Next steps

- Is further discussion and revision needed?
- Are there any concerns to address before adopting?
- Is the current version of the report ready to adopt?





3. Deliberation Next Steps with Roadmap

Led by: Chair



Charting the road ahead: beginning work on the roadmap



- · Are there any committees or advisory groups that need to form early to support implementation?
- What legislative action is needed to support implementation? How could planning for that work begin?
- What success metrics or status reports are needed to inform the commission and public on progress?
- How would the commission like to proceed in partnering with the Michigan High-Speed Internet (MiHI) Office?

4. PresentationMDHHS Social Determinants of Health Strategy

Led by: MDHHS Policy, Planning, and Operational Support Administration





SOCIAL DETERMINANTS OF HEALTH (SDOH) STRATEGY

Michigan's Roadmap to Healthy, Resilient Communities

Ninah Sasy, MSA, BS Director, Policy and Planning

Social Determinants of Health

Social Determinants of Health are the conditions in which people are **born, grow, live, work,** and **age** that shape health.

Source: "About Social Determinants of Health," World Health Organization, accessed December 12, 2019, http://www.who.int/social_determinants/sdh_definition/en/

Healthcare access and quality Social and community context Neighborhood and built environment quality



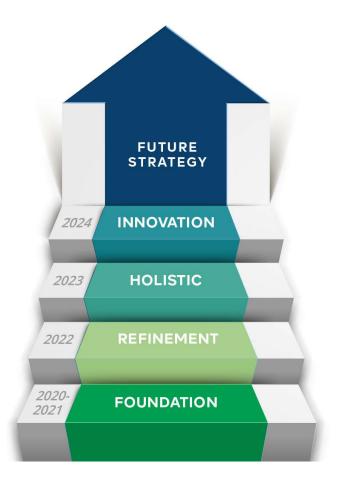
MDHHS Social Determinants of Health Strategy



Improve the health and social outcomes of all Michigan residents while working to achieve health equity by eliminating disparities and barriers to social and economic opportunity



Steps to Building the SDOH Strategy



INNOVATION: MDHHS develops cross-cutting solutions that support community-driven initiatives. Proposals for Change and grant applications will reflect these efforts.

HOLISTIC: MDHHS continues to build a robust Strategy through engagement of stakeholders throughout Michigan. Collaboration will support a holistic approach.

REFINEMENT: MDHHS aligns activities in the 2020 Strategy to develop focus areas and strategic objectives. The key is alignment and process improvement.

FOUNDATION: MDHHS developed activities to support social determinants of health efforts and COVID-19 response efforts.

MDHHS 2022 Social Determinants of Health Strategy Focus Areas



HEALTH EQUITY means that everyone has a fair and just opportunity to be as healthy as possible.

- Robert Wood Johnson Foundation

HOUSING STABILITY means that all people, at all times, have physical, social, and economic access to safe, sufficient, and secure housing that meets their needs for a healthy life.

FOOD SECURITY means that all people, at all times, have physical, social, and economic access to sufficient, safe, and nutritious food that meets their food preferences and dietary needs for an active and healthy life.



The intersection between focus areas



Many people experiencing housing instability and food insecurity live in under-invested neighborhoods and end up living in areas that lack additional resources, including healthy housing, good schools, quality healthcare, employment opportunities, and nutritious, affordable food. As the strategy progresses, connections between the focus areas and additional social determinants of health will be explored to guide future efforts.



Approaches to Address Focus Areas

Alignment

MDHHS partners with state agencies and other stakeholders on existing initiatives related to focus areas to connect programs and for a greater impact in communities



Improvement

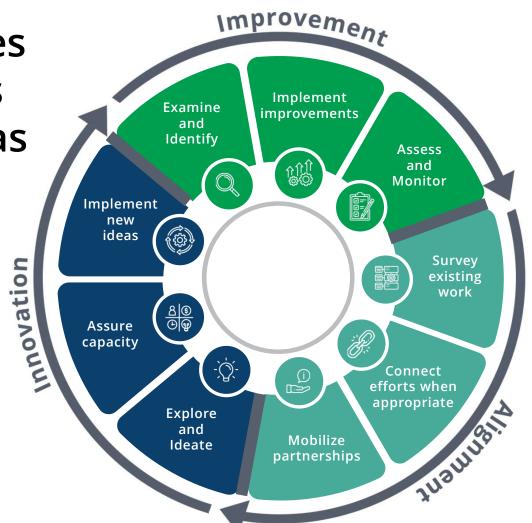
MDHHS program areas identify opportunities to improve current policies/ programs, prioritizing items that are connected to focus areas- process and qualitative improvements

Innovation

New innovative initiatives and cross-cutting policies are proposed that would involve collaboration across MDHHS administrations, state agencies, and with local stakeholders to address upstream prevention



Approaches to Address Focus Areas





Building bridges for collaboration

- COVID-19 Racial Disparities Task Force Recommendations
- HIT Commission
- Poverty Task Force
- Michigan State Housing Plan
- LARA Low Income Workgroup
- State agency partners including MSHDA, MDE, LEO, LARA, and EGLE
- Local and community partners
- Health Care Organizations

A greater impact

Improved health and economic benefit



Housing Stability Priorities



Supporting populations made vulnerable to housing instability



Holistic approaches to healthy housing



Addressing housing access for people experiencing homelessness





Supporting people made vulnerable to housing instability

Solutions to housing stability will require interventions tailored to people and communities disadvantaged by policies, practices, and systems.

2022 strategies to support vulnerable populations:





Holistic approaches to healthy housing

Supporting healthy and stable housing requires a holistic approach, which includes strategies that incorporate lead mitigation, weatherization, and potable water access, as well as opportunities for alignment with strategies identified within Michigan's Statewide Housing Plan, including the removal of additional hazardous materials (including carbon, radon, asbestos, and mold) and energy efficiency.

2022 strategies to support healthy housing:

HS-5

Address the gaps in lead inspection and abatement service availability to increase the volume of lead- safe housing in Michigan and reduce child lead exposure.

HS-6

Expand weatherization efforts to improve energy efficiency, reduce the cost burden of utilities, and increase the volume of safe, weatherized homes in Michigan.

HS-7

Improve potable water access to ensure a healthy home environment for improved hygiene, improved access to clean water, and improved sanitation.



Addressing housing access for people experiencing homelessness

Preventing and reducing homelessness by expanding eviction diversion programs and increasing and aligning resources to increase access to housing for people experiencing homelessness and people who are precariously housed.

2022 strategies to support addressing homelessness:

HS-8

Build and expand technology solutions that increase care coordination, benefits access, and access to housing resources for people experiencing homelessness.

HS-9

Develop tools to identify and prioritize people with high medical needs who are experiencing homelessness to more quickly connect them with the most appropriate housing resource.

HS-10

Leverage long-term resources to sustain local eviction diversion programming and supports.

Food Security Priorities





Supporting people made vulnerable to food insecurity



Streamlining processes to improve access to food benefits



Alignment on key food security reforms



Supporting people made vulnerable to food insecurity

Solutions to food security will require interventions tailored to people and communities disadvantaged by policies, practices, and systems.

2022 strategies to support vulnerable populations:

FS-1

Strengthen and make it easier for families to connect to the existing food and nutrition safety net, including FAP/SNAP and WIC.

FS-2

Capture information on areas and conditions of food insecurity statewide to enable strategic decision making.

FS-3

Increase awareness and utilization of food and nutrition programs for older adults.



Supporting people made vulnerable to food insecurity

Solutions to food security will require interventions tailored to people and communities disadvantaged by policies, practices, and systems.

2022 strategies to support vulnerable populations:

FS-4

Continue to expand on the innovative and collaborative efforts to provide food benefits that were implemented in response to the COVID-19 pandemic.

FS-5

Implement initiatives targeting racial injustice and inequity in food and nutrition.



Streamlining processes to improve access to food benefits

An inward look at MDHHS programs and policies that support food security. Process and quality improvement efforts are needed to best serve Michigan residents.

2022 strategies to streamline processes:

FS-6

Remove immediate and systemic barriers to access for food and cash assistance programs through process and program improvements.

FS-7

Improve the MI Bridges platform to make the application and renewal process easier and more intuitive.

FS-8

Increase cross-enrollment rates in public assistance programs through outreach and barrier mitigation.



Alignment on key food security reforms

Community, local, and state partnerships allow us to reach communities and provide enhanced support. Alignment of efforts with existing stakeholders and exploring opportunities with other partners is vital to ensure that programs are connected for a greater impact.

2022 strategies to streamline processes:

FS-9

Identify additional opportunities to align with recommendations from the Michigan Food Policy Council and the Michigan Poverty Task Force.

FS-10

Leverage public-private partnerships and local coalitions to address systemic food access issues.

Health Equity Priorities



Supporting populations made vulnerable to adverse health outcomes



Improving MDHHS-driven equity programs and policies



Strengthening community engagement to support community-driven initiatives





Supporting people made vulnerable to adverse health outcomes

MDHHS will focus efforts on supporting populations made vulnerable to adverse health outcomes by tailoring interventions to people and communities that have been historically disadvantaged by policies, practices, and systems. This includes enhanced efforts to identify populations made vulnerable to adverse health outcomes.

2022 strategies to support vulnerable populations:

HE-1

Analyze quality and complete integrated data sets to measure the effects of policies and programs that address inequities.



Improving MDHHS-driven equity programs and policies

Efforts to advance health equity within the Department are led by the Office of Equity and Minority Health (OEMH), within the Office of Race, Equity, Diversity, and Inclusion (REDI), and enhanced by recommendations from statewide task forces, including the Department of Labor and Economic Opportunity's (LEO) Poverty Task Force and the Coronavirus Racial Disparities Task Force. The Policy and Planning Office seeks to integrate existing efforts to advance health equity within the SDOH Strategy, align efforts with statewide agencies, and integrate equity recommendations into all MDHHS programs and policies.

2022 strategies to improve MDHHS-driven equity programs and policies:

HE-2

Align efforts with statewide agencies and health equity partners to coordinate efforts and collate resources.

HE-3

Integrate recommendations from statewide task forces and entities supporting the advancement of health equity.

HE-4

Implement an Equity Impact Assessment that will guide the decision-making process for evaluating the potential impacts of existing and future policies and programs.



Strengthen community engagement to support community-driven solutions

The strategy will place an extraordinary emphasis on engaging with residents to develop policies and funding that supports community-driven solutions. Michigan regions are diverse and therefore need community-driven strategies and targeted policies to support the needs of each community. Cross-sector collaboration at the state and community level allows us to develop robust and targeted strategies.

2022 strategies to strengthen community engagement:

HE-5

Engage benefits recipients and community members to obtain experiential knowledge to improve opportunities and services provided.

HE-6

Build community capacity by supporting local efforts that improve regional collaboration and integration of social care into healthcare delivery.

Expansion of the Health Equity Focus Area



Utilizing data and analytics to understand and account for progress in addressing health disparities



Increasing health equity policy development



Explicitly addressing the impact of structural racism, marginalization, and discrimination





Data Strategy

Maximizing data to support social determinants of health and health equity efforts.

2022 strategies to maximize data:

DS-1

Analyze quality and complete integrated data sets to measure the effects of policies and programs that address inequities.

Through the Race & Ethnicity in Master Person Index (MPI), funded by the Michigan Health Endowment Fund, MDHHS strives to standardize and better aggregate how State agencies collect and report race, ethnicity, gender, gender identity, and sexual orientation data. The Master Person Index (MPI) uses a probabilistic algorithm to link and match data across the disparate MDHHS systems, creating a holistic view of an individual across the MDHHS Enterprise while also enforcing rigorous data privacy and security standards. The initiative seeks to design, develop and implement the addition of Race and Ethnicity values in the MDHHS Master Person Index.



Data Strategy

Maximizing data to support social determinants of health and health equity efforts.

2022 strategies to maximize data:

DS-2

Develop an interoperable infrastructure between health care and social care organizations through the establishment of a Closed-Loop Referral System.

Closed-Loop Referral System

As part of the of the 2022-2024 strategy, closed-loop referral policy and statewide recommendations will be developed through engagement across MDHHS and with statewide stakeholders. Effective closed-loop referral policy would support the efforts of the health equity, food security, and housing stability focus areas.

The No Kids Hungry Closed-Loop Referral Project in MI Bridges seeks to increase access to critical services for residents and improve the ability of community partners to serve residents in coordination with the Department.



Data Strategy

Maximizing data to support social determinants of health and health equity efforts.

2022 strategies to maximize data:

DS-3

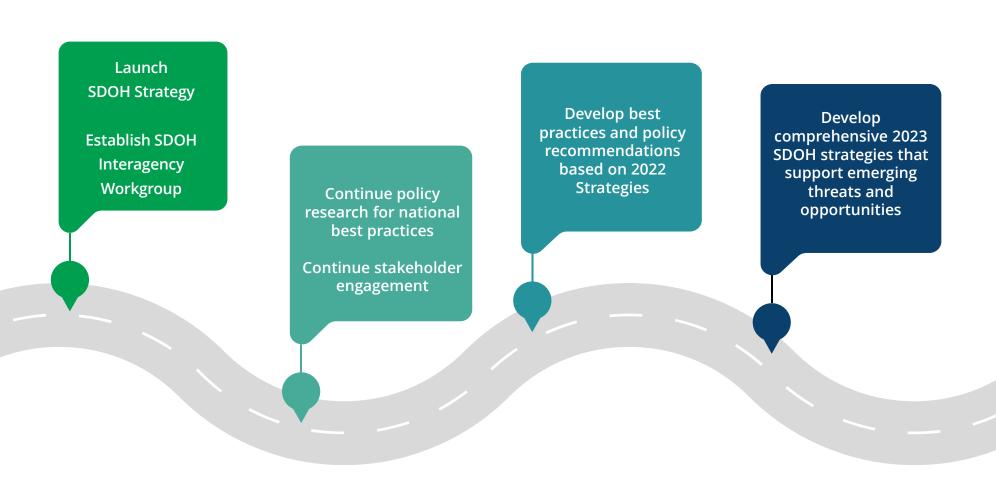
Implement a robust social determinants of health data strategy.

The SDOH Data Strategy outlines action steps that will be taken to improve data quality, produce complete data sets, and measure the effects of policies and programs.

DS-4

Develop capacity for regional collaboratives and academic institutions to evaluate community intervention strategies to end health disparities.

Proposed Next Steps for Michigan



Questions/Comments



5. Legislative Items

Led by: Chair



6. Public Comment



Public Comment Guidelines

Public comment will be conducted in three ways. Please note, pursuant to the Michigan Open Meetings Act, at no point during public comment are you obligated to disclose your name or organization.

Hand raising: Zoom meeting attendees wanting to verbally share comments will raise "their hand" (directions on next slide). The host will call on each attendee with a hand raised, at which point they will share their comment.

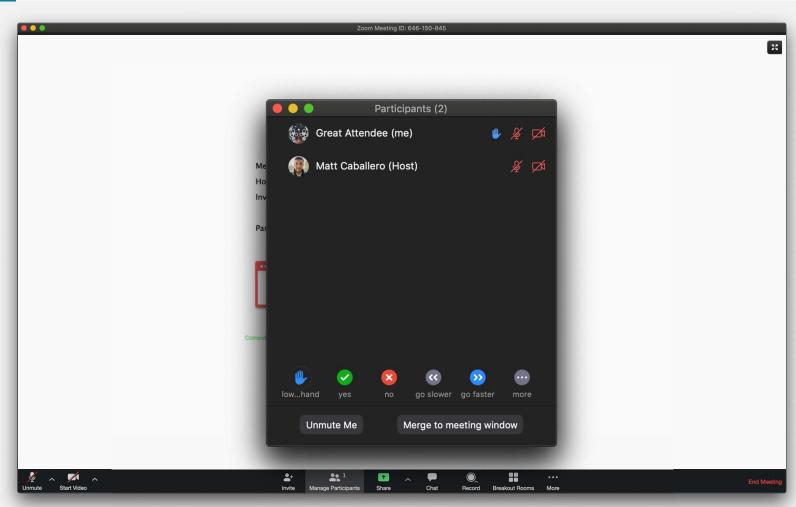


Group chat: Zoom meeting attendees wanting to share a comment in the meeting group chat (directions on a later slide) will have their comments read aloud by the host at a designated time.

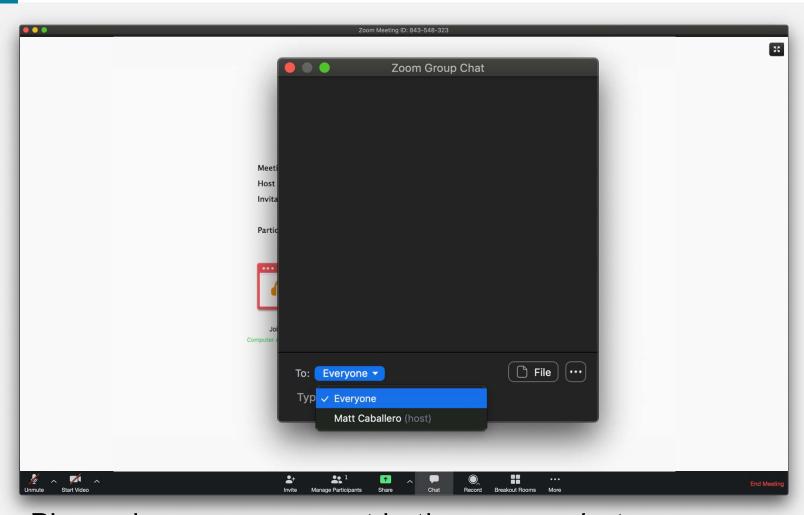


Open comment: Any remaining attendees unable to participate in the previous methods will be invited to share during a final open comment period





Please <u>"raise your hand"</u> at this time if you would like to comment The host will call on you when it is your turn to speak



Please leave a comment in the *group chat* now The host will read them aloud for the commission to hear

Open Comment Period

Please share a comment at this time if you have not had the opportunity already

If you would like to submit any other comments to be shared with the commission, please send a message to YoungquistTl@michigan.gov



7. Adjourn

Next Meeting: Tuesday, May 31, 2022 1:00 p.m. – 3:00 p.m.

Virtual Meeting

Please check the Health IT Commission web page as the meeting approaches for details

