



COLORADO

FY 2024-2025

Joint Technology Committee

Rural Connectivity Project Update

Social Health Information Exchange Presentation

December 11, 2023



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Office of eHealth Innovation



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Lt. Gov. Dianne Primavera

Rural Connectivity Progress and Plans

- **100%:** Identified Critical Access Hospitals and Rural Health Clinics have been connected to the statewide health information exchange network.
- **28%:** Identified Independent Providers have been connected
- The Community Analytics Platform (CAP) has been developed and is now available to the entire rural community
- **\$100,000** for Hospitals, **\$20,000** for Clinics: Ongoing incentive funding provided to participants
- **61%** of total funds spent/encumbered

Focus for Continued Efforts:
Independent rural health practices → where most rural patients and visitors receive care

Improved coordination results in:

- Better experience for patients
- Lower burden for providers
- Cost savings for all Coloradans

Social Health Information Exchange



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Colorado Prescriber Tools – 90/10 Federal Match to Build

Phase I: OpiSafe (Jan 2021)

- Helps prescribers prevent misuse/abuse of opioids, benzos, controlled substances
- 5,250+ allocated licenses
- +16% reduction in inappropriate use just in Year 1!

Phase I: Affordability (June 2021)

- Shares real-time Rx benefit info, affordability hierarchy empowering prescribers to be part of solution
- Automates prior authorizations and prescriptions
- Improves patient and provider service experience

Phase II (SHIE): Patient Health Supports for Providers, Care Managers and Community Workers - In Process

- State programs like WIC (CDPHE), SNAP and TANF (CDHS), Housing Vouchers (DOLA)
- Medicaid and Commercial payer programs like: prenatal support, diabetes/case management
- Community supports to address social determinants of health, like food banks, homeless shelters
- Awarded bid. Initial build set to begin fall/winter 2023

Prescriber Tools/SHIE Directly Supports Big Boulders Projects

- **Access:** facilitate access to care and supports for underserved populations
- **Promote health equity:** behavioral health, maternity, prevention
- **Transform behavioral health**
- **Improve care for people with disabilities and older adults:** home and community based services through American Rescue Plan Act; and those in nursing homes as well
- Invest in the front end of the health curve by addressing **social determinants of health**
- **Advance value based payments to reward quality, equity, access, affordability**
- **Innovate tools to help providers and others be part of the solution:** eConsults, Prescriber Tools (including SHIE), cost and quality indicators
- **Modernize how Medicaid delivers care:** Accountable Care Collaborative Phase III
- **Mission alignment: access, quality, equity, affordability**

Why social health?

- Social determinants of health are connected to many avoidable health outcomes, risks and increased use of costly healthcare services:
 - Emergency visits
 - Re-admissions
 - Emergency transportation
 - Difficulty managing chronic conditions
 - Worse outcomes for people who are living with diabetes, HIV, following strokes

Research has shown that social factors are more than *twice as impactful* on individual health than clinical care.

SHIE Can Support Social Health

- **For people:**
 - Reduced time spent on own case management
 - Streamlined access to care
- **For providers:**
 - Connect people to resources in their community more quickly
 - Spend less time on paperwork



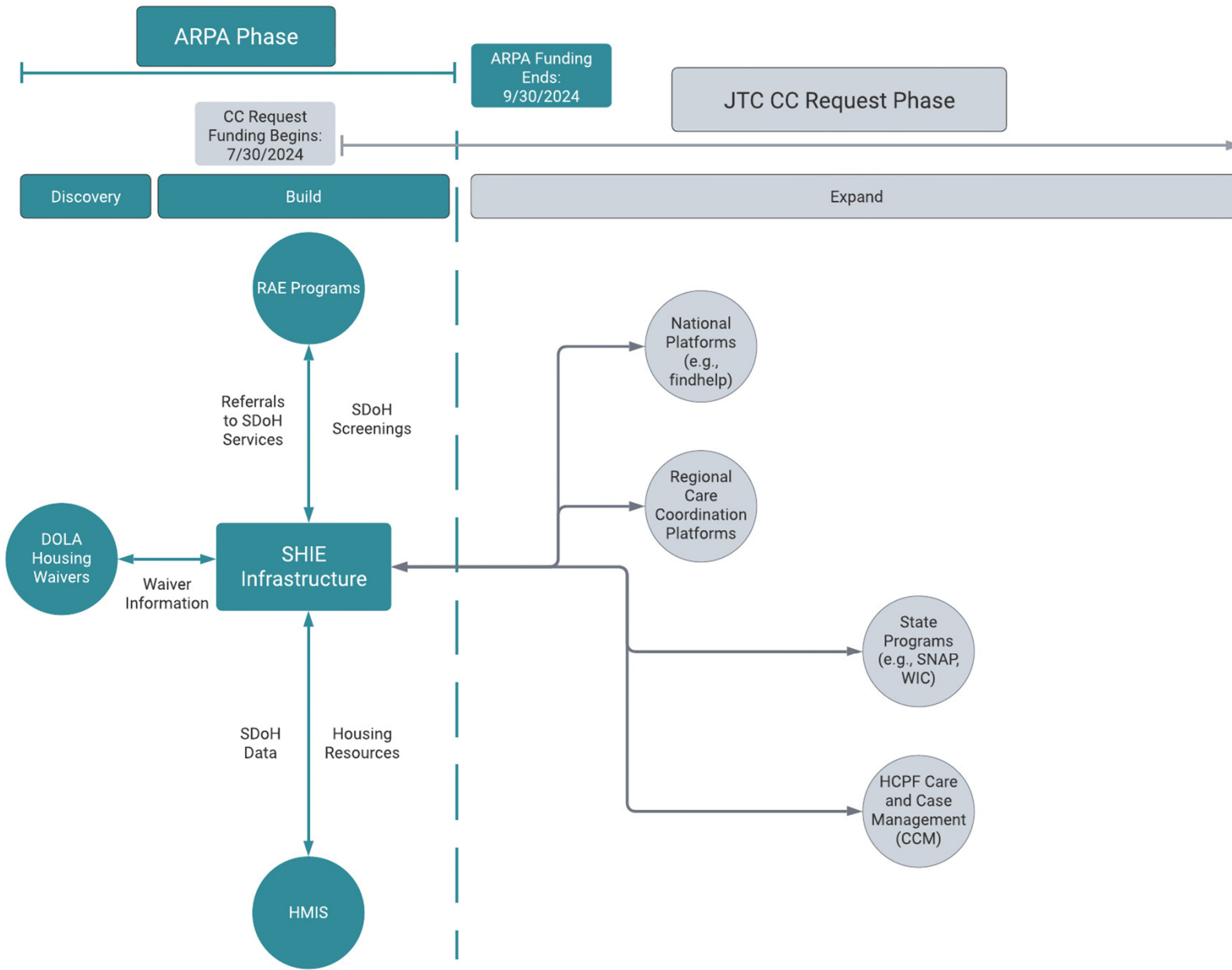
Progress & Opportunities

SHIE So Far:

- 3 regional proofs of concept in 2019-2020
- Requirements gathering 2021-2022
- Initial infusion of American Rescue Plan Act (ARPA) Home and Community Based Services (HCBS) funding to build initial foundation (complete September 30, 2024)
- Planned Request for Applications (RFA) for Community-Driven Infrastructure, 2024

Focus for Continued Efforts:

- Expansion beyond initial foundation
- Inclusion of state benefits programs
- Referrals to health improvement programs
- Extension to private payer systems



SHIE Project: Funding Request

What s the funding for?

Term-Limited FTE (5.5)	\$638,448
OIT Staff (2.0)	\$549,328
Contract Costs	\$9,318,557
5% Contingency	\$525,317
Total Request	\$11,031,650

Funding Sources

State General Fund	\$1,539,359
Federal Match	\$9,492,291
Total Request	\$11,031,650

Questions?