

# Electronic Consent Management Quarterly Call

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September 12, 2023

# Objectives

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- ▶ Provide updates on electronic consent management (ECM) project and key milestone dates.
- ▶ Provide updates on various policies, tools, and resources.
- ▶ Solicit input from provider community regarding:
  - ▶ Early system user
  - ▶ Ongoing stakeholder, partner, and provider engagement
  - ▶ Communications

# Agenda

## Topic/Activity

Welcome

- HCA Introductions
- Objectives
- Agenda/Logistics

ECM Updates

- Recap of ECM Project Objectives and Timeline
- Recap of Primary Solution Requirements
- Updates since May 2023

ECM Diagram Overview

Provider Outreach

Early System User Opportunity

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General Q & A

Suggested topics for next quarterly call

Next Steps

# Electronic Consent Management Project Updates

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Linda Reeder

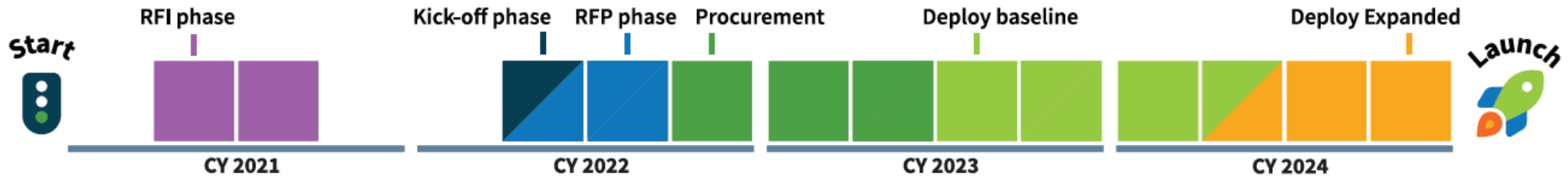
# Project Objectives

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- ▶ To define and deploy an electronic consent management solution that:
  - ▶ Facilitates patient-authorized exchange of sensitive data
  - ▶ Is scalable, secure, sustainable, and meets provider needs
- ▶ First use case
  - ▶ Consent to enable exchange of substance use disorder (SUD) data

# Project timeline

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## Timeline Milestones

- 1 ECM Vendor announced: Q1 2023
- 2 Deployment Kickoff with Vendor: Q3 2023
- 3 Go Live with Baseline Solution: Q2 2024
- 4 Expanded Solution deployment: Q3-Q4 2024

# Updates/Accomplishments

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- ▶ Funding documents approved by CMS
- ▶ Awarded \$255,000 from OCIO/WATech Innovation and Modernization Grant
- ▶ Contract with solution vendor (CodeSmart/Midato Health) approved by CMS
- ▶ Implementation Kickoff scheduled for Sept 21

# Two phase approach

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## ▶ Baseline solution

- ▶ Essential functionality such as creation, modification & revocation of consents (with version history)
- ▶ Intuitive navigation and search capability, compliance with all applicable laws, alerts, tracking
- ▶ Reports and dashboards for HCA and providers
- ▶ Electronic signature for client and third parties, guardians, and parents (if indicated)
- ▶ Audit functionality (e.g., logins)
- ▶ One to two languages other than English
- ▶ Option for OCR scanning
- ▶ Interoperability with one EHR instance



# Two phase approach (cont.)



## ▶ Expanded solution

- ▶ Deploy a more complete solution to address additional:
  - ▶ Use cases
  - ▶ Client populations
  - ▶ Modes of system access
  - ▶ Interoperability with other systems or functional components
- ▶ Explore client consent self management
- ▶ Determine priorities with providers, state agencies, solution vendor, partners, and other stakeholders

# Essential technology

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- ▶ A flexible architecture solution that is scalable and accommodates future state business needs
  - ▶ Cloud-based system
  - ▶ Support role-based access
  - ▶ Interoperable with many systems and solutions (e.g., EHR) using standards-based technology
  - ▶ Comply with all state, federal, and industry-standard security protocols and laws (incl data retention policies)
  - ▶ Operational reporting and analytics
  - ▶ Successful completion of OCS Security Design Review (SDR)
  - ▶ Successful completion of CMS Outcome Based Certification

# Part 2 NPRM monitoring

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- ▶ Notice of proposed rulemaking (NPRM) to revise 42 CFR Part 2 issued November 2022 by HHS/OCR and SAMHSA
- ▶ NPRM would implement provisions of Section 3221 of the Coronavirus Aid, Relief, and Economic Security (CARES) Act
  - ▶ Requires HHS to bring Part 2 in greater alignment with certain aspects of HIPAA
- ▶ HCA submitted agency wide response & is monitoring

# Next Steps

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- ▶ Begin workflow/configuration sessions (sprints)
- ▶ Continue Provider/Partner/Stakeholder outreach
- ▶ Continue work on Security Design Review (SDR)
- ▶ Continue preparations for the CMS Outcomes Based Certification milestones
  - ▶ Operational Readiness Review (ORR) - before go-live
  - ▶ Certification Review (CR) – 6 months after go-live



# Provider Outreach

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# Early System User Opportunity

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- ▶ ECM solution will go live in Q2 2024
- ▶ Early System Users:
  - ▶ Possible opportunity to help with final workflow discussion and training (TBD)
- ▶ No cost to providers or other system users
- ▶ Training will be available for all system users
- ▶ Providers will work with HCA and the solution vendor for staff access

Contact [econsent@hca.wa.gov](mailto:econsent@hca.wa.gov) for a 1:1 call

# Early System User Opportunity

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- ▶ Criteria to be a System User
  - ▶ Any provider type
  - ▶ May or may not have an EHR
  - ▶ Organizational leadership support
  - ▶ Attend free HCA training on system use and onboarding staff
- ▶ Baseline Participation
  - ▶ Help with workflow sessions, testing, and reviewing training
    - ▶ View only thru portal
    - ▶ Scan documents in
    - ▶ Direct data entry for consents in the portal
    - ▶ EHR interoperability pilot

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# Resources

- ECM webpage
  - [hca.wa.gov](https://hca.wa.gov)
  - [Factsheet](#)
  - [FAQ \(updated Sep 23\)](#)
- ECM email address
  - [econsent@hca.wa.gov](mailto:econsent@hca.wa.gov)
- Substance Use Disorder Information Guide
  - [hca.wa.gov](https://hca.wa.gov)

## What is Electronic Consent Management?



Electronic consent management (ECM) is a cloud-based software solution which will house consents to share sensitive data (e.g. substance use disorder, research, sexually transmitted infection data). It is not intended to store HIPAA general consents for treatment. ECM will be free to use and is meant to replace paper-based consents or integrate with current electronic consent practices by enabling data exchange that will be compliant with 42 CFR Part 2 and other relevant statutes.

If you are interested in learning more or using the system, contact HCA at [econsent@hca.wa.gov](mailto:econsent@hca.wa.gov).

### What data will be collected?

Health records will not be stored by HCA or the ECM vendor. The system will only store consents to share data, which can be updated or revoked as needed.

### Why is this happening?

Providers face significant administrative challenges managing consents due to time and cost. ECM will foster more complete and coordinated care.

### Who does it affect?

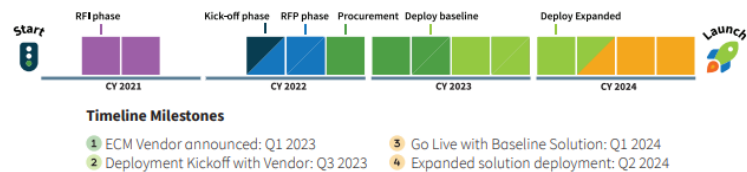
HCA will focus on storing consents to enable Substance Use Disorder (SUD) data exchange first. Behavioral health providers and others that serve SUD clients or exchange SUD data will benefit. In future project phases, consents to exchange other types of sensitive data will be added. HCA is prioritizing data exchange for Apple Health (Medicaid) clients. ECM is one of HCA's Tech Modernization projects.

### How does this benefit me as a medical provider or health organization?

Main benefits of the ECM solution for providers and other organizations include:

- Access to client data in times of crisis which is crucial to address substance use disorder (SUD) issues.
- A reduction in provider administrative burden related to consent.
- A reduction in the number of incomplete, noncompliant, and redundant consents.
- Fewer barriers for those who provide vital services to Washington's most vulnerable residents.
- Access to a consent solution that will be adaptable and sustainable, yet flexible throughout its lifespan.
- A decrease in the time it takes to share relevant information between providers.

### When is this happening?





# FAQ

- ▶ Is the use of ECM mandatory?
  - ▶ No
- ▶ How user friendly is the interface, for clinics and/or potentially for clients?
  - ▶ The vendor has designed a simple to use web portal with all required elements to create a complete consent.
- ▶ What does the consent form look like?
  - ▶ We are working with our vendor to design and showcase this form at a future call.
- ▶ Do users have to log into a separate portal to use the system or can they access it through their existing EHR?
  - ▶ For the Baseline Solution, most users will need to sign into a separate web portal to log into the ECM. However, if EHRs are interoperable with the electronic consent management system, providers could access the system through their existing EHR utilizing single sign on. For the Baseline Solution, HCA intends to work with one provider and their EHR vendor on an interoperability pilot. Additional providers can access via their EHR during the Expanded Solution deployment in a later phase of the project, assuming their vendor is able to accommodate this work.
- ▶ Will the ECM accommodate any consent form/consent?
  - ▶ The first use case will be SUD consents only. However, we do intend to add additional types of consents in the future.
- ▶ Do consents get auto-deleted after they expire?
  - ▶ Consents will be deactivated after they expire. Retention policies will be in compliance with applicable state and federal law.

# Next Steps

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- ▶ Next quarterly in January 2024
- ▶ Continue partner, stakeholder, and provider engagement



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