Civitas Networks for Health

The largest network of its kind in the country, Civitas Networks for Health represents local health innovators sharing and using data to improve outcomes.

Our Guiding Principles

- ✔ We believe the best solutions come from data informed, multi-stakeholder input.

- ✔ We strive for win-win solutions recognizing that change is required by all.

- ✔ The status quo of our health care system is not acceptable in terms of its quality, safety or cost.

- ✔ We commit to advancing health equity for all.

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Our **Mission**

Civitas Networks for Health convenes **action-oriented thought leaders** and implementers at the local, regional, state, and national level. To achieve our mission, we drive cross-sector, multi-stakeholder, and data-informed initiatives by:

✔ Increasing collaboration and shared learning within and across communities that use data to ensure better health outcomes and drive health equity.

✔ Educating public and private entities regarding the benefits, functions, and roles of Health Information Exchanges (HIEs), All-Payer Claims Databases (APCDs), Regional Health Improvement Collaboratives (RHICs), and combined organizations.

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Providing Critical Services

The COVID-19 pandemic has shown us more than ever before just how critical local health care and public health response is in our country.

HIEs' and RHICs' knowledge gained during this public health crisis has and will continue to transform the ability to support public health and provider organizations for the current pandemic and future pandemics. These entities have the trust of their community partners and are able to quickly identify solutions to complex problems.

Health Information Exchanges (HIEs)

HIEs provide technology for the secure digital exchange of data by medical, behavioral, and social service providers to improve the health of the communities they serve. HIEs can be statewide, regional and community; government-run, for-profit and nonprofit; large and small; and hybrids that involve collaborations among diverse organizations.

Regional Health Improvement Collaboratives (RHICs)

A RHIC provides a neutral, trusted mechanism through which the community can plan, facilitate, and coordinate the many different activities required for successful transformation of its healthcare system. A RHIC does not deliver healthcare services directly or pay for such services.
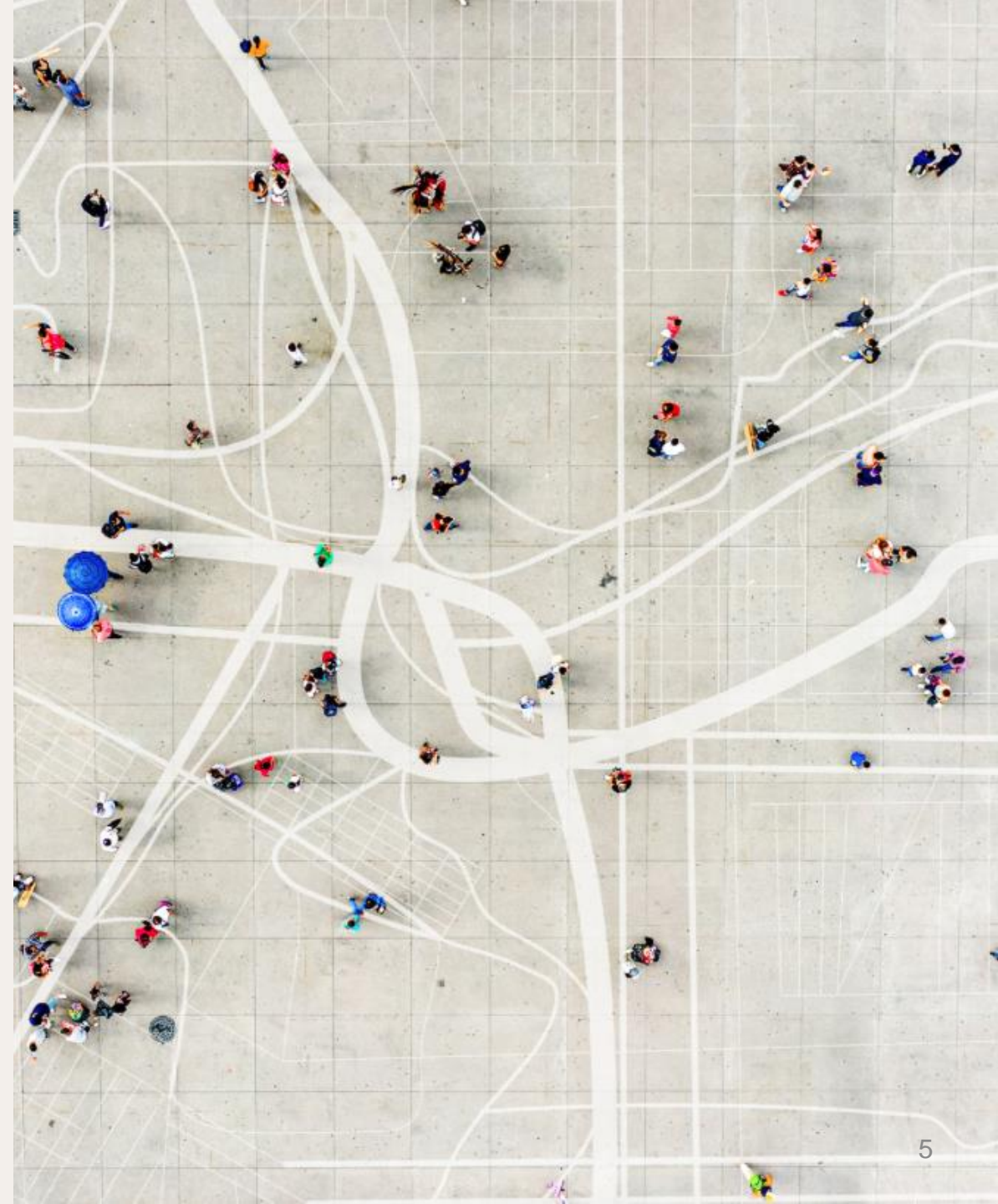
Health Data Utilities

Civitas' Emerging Definition

Health Data Utilities (HDUs) are statewide entities that **combine, enhance, and exchange electronic health data** across care and services settings for treatment, care coordination, quality improvement, and public and community health purposes. They enable specific, defined use cases, with extra protections to ensure patient privacy and appropriate data use.

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Health Data **Utilities**

How are HDUs different?

HDUs emphasize **multi-stakeholder** organizational, use case, and data **governance** with an emphasis on public health. Most will be designated non-profit organizations or independent state agencies. In all cases, state and stakeholder governance, oversight, and accountability is paramount. **HDUs are flexible and uniquely capable of meeting state-specific health data needs.**

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Necessary Conditions for HDUs

- **State policy levers** including incentives and/or mandates

- **Broad stakeholder participation**, connectivity, exchange, and community-level engagement

- Mature use cases in place for **Medicaid and public health**

- **Multistakeholder**, transparent corporate and data/network **governance**

- **High standards for data privacy and security** going beyond the baseline of state and federal laws

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HDUs Should Build on Existing Infrastructure

- Most states have **existing infrastructure** in place for clinical data exchange, including regional and statewide HIEs. This **technical and relationship infrastructure should be strengthened**.

- **States** without an organization or organizations capable of meeting HDU requirements **should be eligible to apply for a planning grant** to build these capabilities.

- Most states do not yet have interoperable infrastructure in place for collecting and sharing social care data. States should be eligible to apply for funding to **include social care data infrastructure and multi-sector data aggregation**.

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Sample Use Cases

Access

Query health records based on permitted purposes, including relevant public health data

Care Delivery

ADT/event notifications, alerting, lab results, prescription drug monitoring, imaging, overdose alerts

Social Care

Referral management, resource directories, social determinants of health referrals

Public Health

Enhancing immunization and other disease registries, facilitating reporting and notifiable conditions, heat maps, situational awareness

Consumer

Patient education, individual access, patient-generated data

Quality

Reporting, analytics, benchmarks, provider dashboards

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In Summary: What Can HDUs Do?

- HDUs **break down data silos**; they **combine data to enhance data.**

- HDUs **deliver data back to clinicians and other providers in the field**, engaged in care delivery, care coordination, and public health activities.

- They create **comprehensive data sets** that can enable communities to prepare, respond and make critical improvements in health, health care, public and community health.

- They **foster whole-person care** and **reduce provider burden** of additional reporting requirements.

- They **leverage existing infrastructure**, displaying the critical application and responsible use of federal funds.

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