ASTP Assistant Secretary for Technology Policy

HHS Human Services and Interoperability

Office of Policy

October 2024

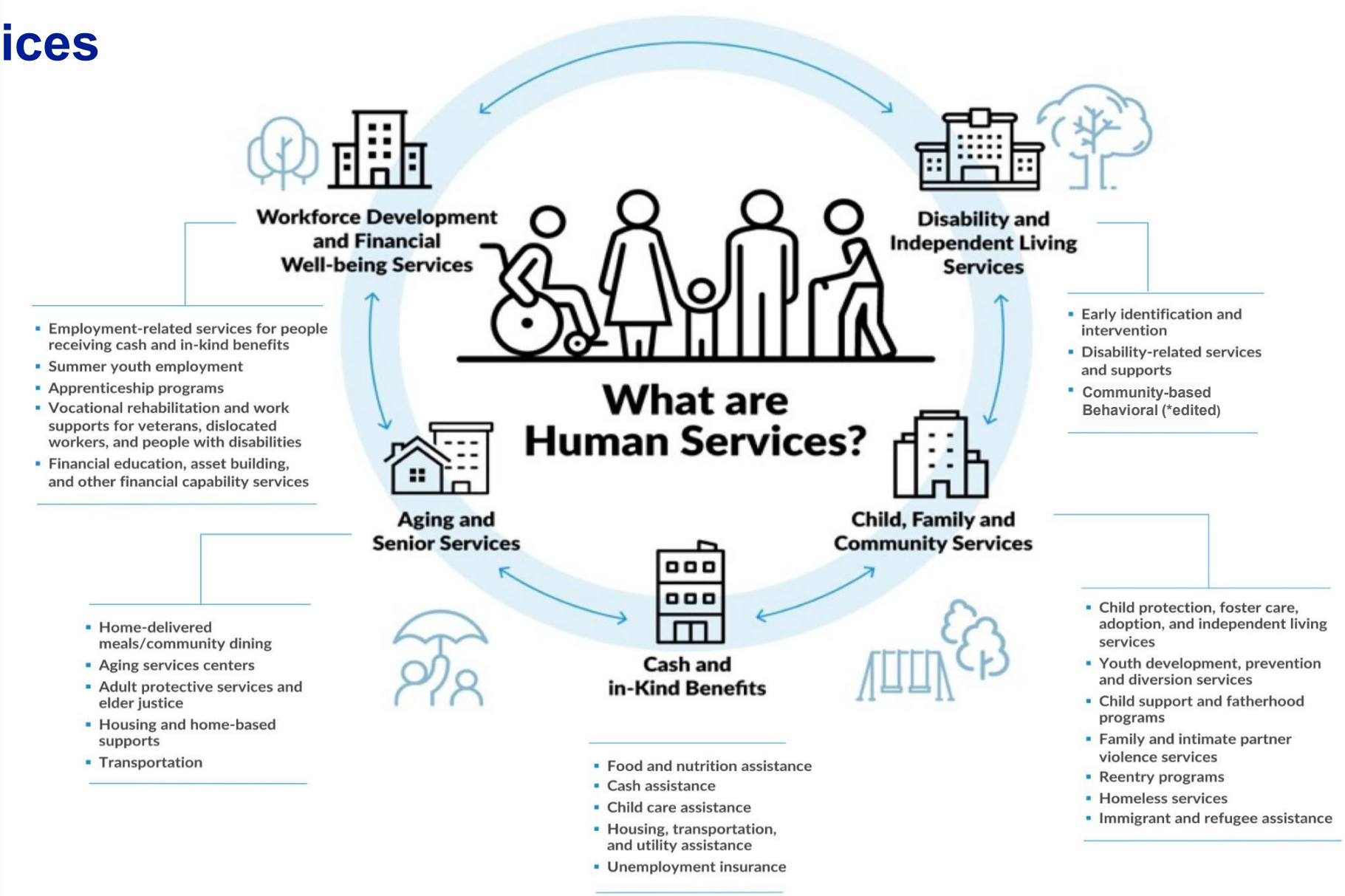
HHS Data Strategy

Priority 4: Enable Whole-Person Care Delivery by Connecting Human Services Data

- Align investments, requirements, and policy levers
- Develop data standards
- Launch interoperability pilots

***Aspiration**: Real-time, relevant data and data-driven insights are available to human services practitioners, health care providers, facilities/programs, and state, Tribal, local, and territorial governments to establish a whole-person and whole-family view of wellness and needs; seamlessly connect people with needed support services; proactively predict future needs and better address them at an individual and system level; effectively manage programs and facilities; evaluate the effectiveness and value of service provision at a local and macro level; and more equitably and efficiently plan and allocate resources.*

Human Services

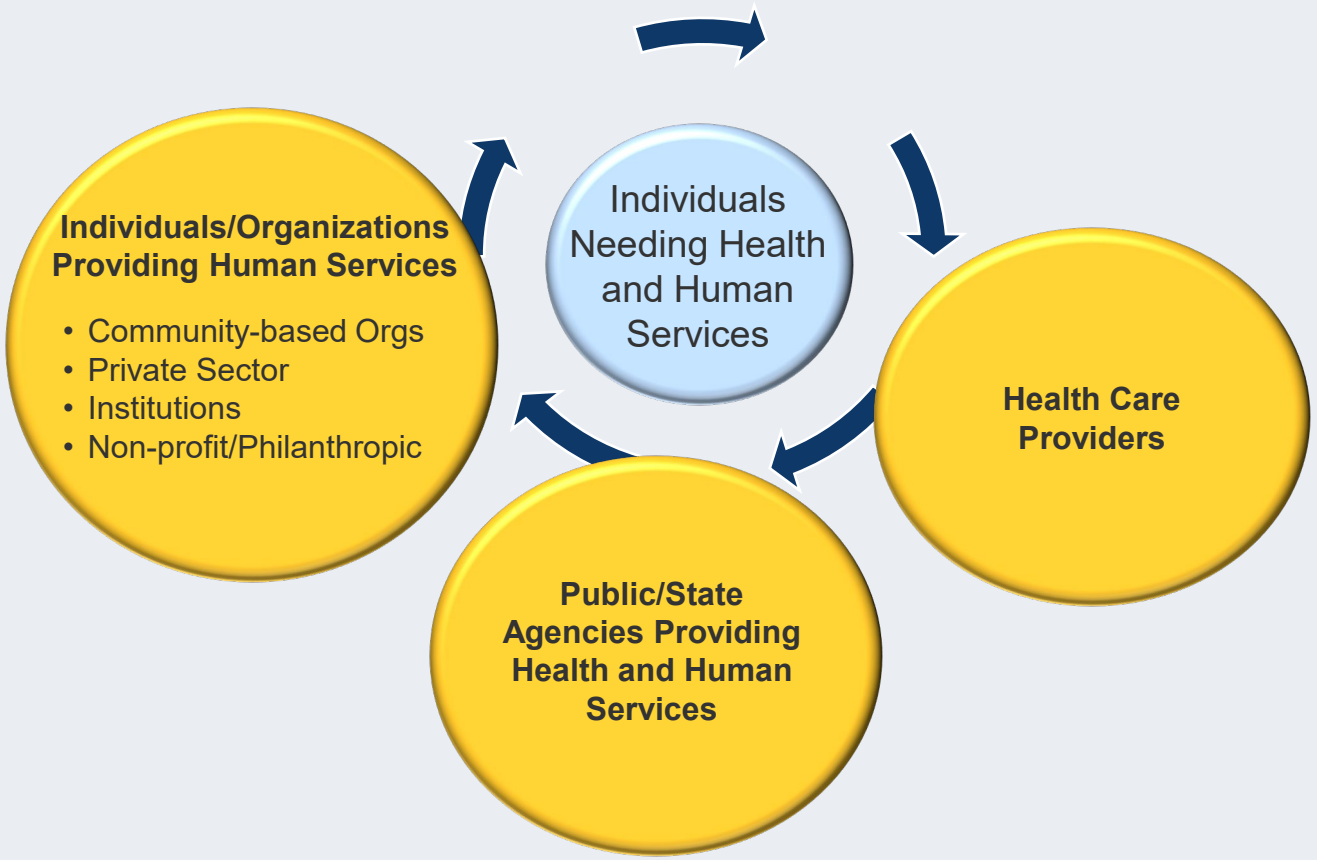


Source: Urban Institute. What Are Human Services, and How Do State Governments Structure Them?

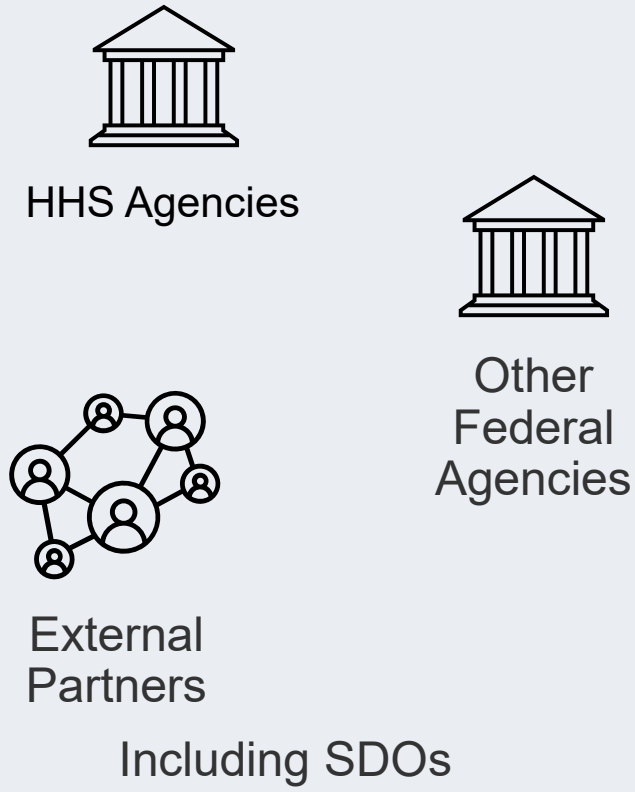
NOTE: (*edited) to correct "Commbehavioral health unity-based"

Vision: Deliver integrated and streamlined services through improved data access and sharing

Future State of Data Exchange



Driving a supportive data sharing environment



HHS Data Strategy: Drive data interoperability between health and human services

Goals and Objectives: Short, Medium, Long-term

Goal 1 - IDENTIFY: Identify and prioritize data sharing opportunities to improve human services delivery

Assess needs to inform where human services interop can support whole-person care and more efficiency in the human services ecosystem.

- Establish Human Services Interoperability Sprint Team
- Conduct landscape analysis to:
  - Identify top 3-4 priorities where data can advance whole-person care
  - Identify data sources, standards, technology, governance solutions to support identified priorities

Goal 2 - ADVANCE: Advance human services exchange and interoperability through HHS levers

Advance human services data exchange through existing regulatory and/or policy levers and cooperative agreements.

- Map Department policy, funding, technical assistance levers in support of identified data exchange priorities
- Deploy available levers (cooperative agreements, TA, policy requirements, existing standards)
- Identify where new standards may be required, develop and pilot
- Address potential concerns, such as privacy, security, governance
- Begin early demonstrations and refine policies for expanded use across programs

Goal 3 - SCALE: Roll out use cases, policies, and tools to drive interoperability at scale

Drive uptake using new regulatory, policy levers, and cooperative agreements, and scale pilots.

- Identify and advocate for expanded funding, authorities, programs to reach full impact
- Expand from pilots to full scale deployments of standards, exchanges, platforms, etc.
- Fully leverage all authorities, funding requirements, to reach all relevant programs
- Move to sustainable operations

ENGAGE: Engage external community

EVALUATE

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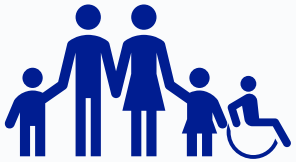
Sample use case:



*Family of five, including an infant, a toddler, and a school-aged **child with a disability**. Both parents are struggling with **SUD and mental health challenges**. The **child welfare system** is involved. The family receives multiple public benefits to support meeting their basic needs.*

Providers who need to coordinate and share information:

- Parents' physical health providers
- Parents' behavioral health providers
- Maternal home visitor
- Child welfare caseworker
- State benefits caseworker
- CBO Navigator
- School system
- Elementary school child's therapists and disability service providers
- Child care providers for the infant and toddler

Programs involved:

- Child welfare
- Medicaid
- SNAP
- WIC
- TANF
- MIECHV
- CCDF/Head Start
- State SUD services
- State disability services
- Public school system
- Rental vouchers
- LIHEAP/LIHWAP

Data sharing needs:

- Care coordination for parents and children
- Screening, referral, and warm handoffs for all services
- Child welfare system monitoring and appropriate supports/ interventions at the right time and right amount

Data Gaps/Barriers:

- Case data not collected in electronic systems, not standardized
- No data sharing connections between provider or state program systems to share case information
- Nuanced data sharing preferences (desire to restrict sharing of certain information and with certain parts of the system) not captured, no central governance process to manage approved sharing
- Multiple applications for programs, different definitions and requirements, data not shared on the back end
- Lack of state-level visibility into full range of services provided, geography of provider network, for planning and delivery design

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Action Items

GOAL 1 - IDENTIFY: Identify and prioritize data sharing opportunities to improve human services delivery

- Launch HS Interop Sprint Group
- Continue landscape analysis and inventory of existing authorities, policy tools, resources to drive interoperability
- Identify HHS use cases, needs, and priorities
- Engage external community on priorities
- Crosswalk needs to existing ecosystem infrastructure
- Integrate and align HHS efforts into the HS Interop Work Plan and Communication Plan

Next Steps

1. Identify workstreams (and other STAFF/OPDIVs)

2. Identify external engagement opportunities

3. Next meeting: HHS Interop Sprint Team