



Transforming Clinical Data Exchange in Rhode Island:

CTC-RI Launches New Technical Assistance Initiative

Rhode Island is entering into a new era of healthcare data exchange! To prepare providers for this transition, the Care Transformation Collaborative of Rhode Island (CTC-RI), in partnership with the Executive Office of Health and Human Services (EOHHS), has launched a comprehensive technical assistance initiative to support Accountable Entities (AEs) in transitioning to a more robust, electronic clinical data exchange (ECDE) system.

Why This Matters

Historically, AEs have relied on self-reported data to meet quality reporting requirements. With the new ECDE model, Rhode Island is shifting toward automated, validated data feeds that reduce administrative burden, improve data quality, and align with national quality standards. By 2026, AEs will be required to submit data through the new Current Care health information exchange (HIE). This technical assistance effort is aligned with national strategies that aim to promote interoperability, increase data sharing capabilities, and streamline performance measure reporting.



CTC-RI's Role

With guidance from stakeholders representing organizations influencing the AE program, CTC-RI will provide tailored support to AEs and practices, helping them meet new ECDE expectations and improve clinical quality performance and obtain shared savings. The initiative focuses on both system-level planning and hands-on support at the practice level. In addition to CTC-RI program staff, the project will be supported by consultants Elaine Fontaine and Marna Maurice, both of whom bring extensive knowledge and expertise in clinical quality reporting and EMR optimization.

Key components of the initiative include:

- **Planning and Coordination:** Convening an ECDE Planning Committee with stakeholders from managed care organizations, HIE vendors, AE leadership, and state agencies to guide activities.
- **Landscape Assessments:** Conducting regional and state-level reviews to understand current ECDE readiness, challenges, and opportunities.
- **Performance Scorecards:** Developing tools to compare self-reported and electronic data performance, identifying practices with the greatest potential for improvement.
- **Customized Technical Assistance:** Offering “lighter touch” peer learning opportunities and “deeper dive” practice-level support, including workflow optimization, data quality, and validation strategies.
- **Interface Transition Support:** Assisting practices in transitioning from the current Quality Reporting System (QRS) to the HIE platform.
- **Quality Improvement Planning:** Creating individualized plans to address performance gaps and meet NCQA Data Aggregator Validation (DAV) standards.

Timeline for Kick-Off

The initiative officially begins in September 2025 with the establishment of the ECDE Planning Committee and with AE and practice outreach beginning in late 2025. Customized technical assistance, including “lighter touch” learning opportunities and “deeper dive” practice optimization, will roll out through 2025 and into 2026 to align with the state’s planned transition schedule.



Looking Ahead

This initiative represents a bold step forward for Rhode Island's healthcare data infrastructure. With CTC-RI's support, this initiative will provide AEs with technical support to succeed in the new ECDE environment and align with the state's health transformation goals.

As Rhode Island embraces a more integrated and data-driven healthcare system, this work will unlock opportunities for improved population health outcomes, reduced costs, and a stronger foundation for quality care. Together, we are laying the groundwork for a healthier, more connected state!





Q&A

WITH EOHHS



VOICES FROM STATE LEADERSHIP

To bring this vision to life, we sat down with EOHHS' Olivia King, Associate Director of Health Information Technology, to hear her perspective on what this initiative means for Rhode Island, the opportunities ahead, and how providers can prepare for this important transition.



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EOHHS has been working for several years to promote the capabilities of the AEs to electronically transmit clinical data to contracted Managed Care Organizations. What does this mean for primary care in Rhode Island?

Electronic clinical quality measurement (eCQM) or its idealized cousin digital quality measurement (dQM) allows primary care payments to be derived from outcomes instead of specific services with a higher degree of confidence. The more we can enhance our electronic quality reporting processes, the more we can shift to payment models that reward providers for good clinical care even for the most complex patients.

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What unique primary care issues and data challenges does this project address?

It can be very frustrating for providers to feel that the work they're doing is not accurately reflected in the payments they receive. The core of this project is ensuring that the data transmitted to MCOs for performance measurement is an accurate reflection of that work, which will allow dialogue to focus on real clinical outcomes and not discrepancies in perspective.

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What do providers need to know about work underway, what's to come, and how this will impact practices in the future?

The electronic health record landscape has changed tremendously in the past 10 and even 5 years. System capabilities for interoperability have been advancing rapidly, and with that comes increased federal expectations for care coordination and for reporting. I expect practices will see increasing interoperability requirements from all sides — Medicaid, Medicare, commercial plans, and UDS. Getting ahead of the curve now and establishing good data quality practices will save you a lot of grief in the future.