Vermont Information Technology Leaders, Inc.

FY2017 Budget Presentation
February 4, 2016
Meeting Objectives

• Presentation of VITL’s value and planned activities.

• Review for approval VITL’s core activities and budget for FY2017.
FY2017 Environmental Factors

- Vermont Health IT Fund sunset provision (6/30/2017)
- Vermont all-payer waiver status
- Revised Vermont Health IT Plan
- HCO consolidation
- EHR industry consolidation
- Big data trends
- Meaningful Use Stage 3
- CommonWell Health Alliance
- Evolving technical exchange standards
- ONC 10-year interoperability roadmap
VITL Value and Planned Activities

- VHIE Operations and Expansion
- Point of Care Services
- Clinical Data Management Services
- Data Quality Services
- Internal Business and Operations
- Financial Outlook
VITL: Delivering Value

VITL - Delivering Value

Vermont Health Information Exchange (VHIE)

- Improving the health of Vermonters
- Improve the quality of care and the patient experience
- Reduce the rate of growth of cost of healthcare
VHIE Operation and Expansion

Vermont Health Information Exchange

- Hospitals
- Primary & Specialty Care (includes FQHCs)
- Home Health & Hospice
- Mental Health
- Nursing Homes
- Laboratories
- Medication History Service

Data Contributor
Data Receiver
Both Contributes and Receives

Clinical Data Repository
Consent Module
Record Locator Service
User Directory
Master Patient Index
Disaster Recovery

Clinical Data Warehouse

- Accountable Care Organizations
- VT Dept. of Health Immunization
- VT Blueprint for Health
VHIE: Ongoing Activities

- Information security and privacy.
- Maintenance of existing connections.
- VHIE software licenses and hosting.
- VHIE software and system upgrades.
- VHIE provider services.
- Modify or replace connections due to EHR changes.
- External client technical support services / helpdesk.
- Internal support services.
In a recent interview with Dr. Adam Buckley, chief information officer for The University of Vermont Health Network, he described the challenges in connecting disparate health IT systems.
VHIE: New Activities

- VHIE New Connectivity (Discovery -> Implementation):
  - Additional interfaces with existing contributors: CCD interfaces from remaining hospitals
  - Traditional interface connections with new providers: Admit Discharge and Transfer, laboratory results
  - Connection with new types of data: physiological data from home health agencies
  - eHealth Exchange Compliant (Sequoia Project) connections: Department of Veterans Affairs Medical System

- VHIE Operational Efficiency Improvements:
  - Person and beneficiary (MPI) matching: 3rd party evaluation
  - Consent (Automated consent, Substance Abuse Treatment consent, More detailed audits):
    - Improved implementation consistency
    - 42 CFR Part 2

- Designates alignment with VHITP Initiatives
Interface Counts by Fiscal Year
(Includes new and replacement interfaces)

Approximately 40% of all interfaces are replacements for existing interfaces
VITL: Improving the Health of Vermonters
Lamoille County Mental Health

In this video, Lamoille County Mental Health staff describe how they use VITLAccess to improve services for their clients.

Video Clip
Point of Care Services

- Provider Portal (VITLAccess)
- Event Notification (PatientPing)
- Patient / Provider Texting (Pilot)
- Secure Provider Communications (VITLDirect)
- Health IT Consulting
# VITLAccess: 2015 Status

## VITLAccess Subscriber Statistics:

<table>
<thead>
<tr>
<th>Category</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of healthcare locations</td>
<td>100</td>
</tr>
<tr>
<td>Number of authorized users</td>
<td>1,932</td>
</tr>
<tr>
<td>Number of patient data queries performed</td>
<td>162,359</td>
</tr>
<tr>
<td>Number of data elements per query</td>
<td>6.9</td>
</tr>
<tr>
<td>Number of patient data queries per user</td>
<td>84</td>
</tr>
</tbody>
</table>

## Consumer Consent Statistics:

<table>
<thead>
<tr>
<th>Category</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Percent of consumers who have given consent</td>
<td>96.0%</td>
</tr>
<tr>
<td>Percent of consumers who have declined to give their consent</td>
<td>4.0%</td>
</tr>
</tbody>
</table>
VITL: Improving Quality of Care

Vermont Health Information Exchange (VHIE)

- Improve the quality of care and the patient experience
- Reduce the rate of growth of cost of healthcare
  - Clinical Data Management
  - Health IT Consulting
  - Data Quality
- Improving the health of Vermonters
  - Correct Diagnosis
  - Reduce Medical Errors
  - VITLAccess (medication history)
  - VITLAccess
  - Dr. Lockridge Video
  - Patient / Provider Texting
The Costs of a Misdiagnosis

“With VITLAccess, my staff can search the entire state records and come up with information that is important for a patient. VITLAccess has streamlined our office activities and it’s definitely improved the care of our patients”

Leslie Lockridge MD
Northeast Kingdom Hematology/Oncology

Video Clip
## VITLAccess

### Ongoing
- Increase VITLAccess Subscribers
  - Increase pace of VITLAccess onboarding (Profile, Enroll and Launch)
  - End user training and education
  - Patient consent training
  - Single sign on with one hospital EHR

### New Activities
- Increase VITLAccess utilization by current subscribers through additional education & training:
  - Webinars
  - Sharing use cases
  - Promoting best practices
- Increase utilization in new healthcare segments:
  - Independent mental health providers
  - Dentistry
  - Pharmacy
  - VCCI

- Designates alignment with VHITP Initiatives
VITL: Supporting Transitions in Care

Vermont Health Information Exchange (VHIE)

- Improving the health of Vermonters
- Improve the quality of care and the patient experience
- Reduce the rate of growth of cost of healthcare

- Point of Care
- Clinical Data Management
- Transitions of Care
  - Event Notification System
  - Patient Texting
  - Secure Provider Communications
- Health IT Consulting
- Data Quality

- PatientPing
- Pilot Program
- VITLDirect
## Point of Care Services: New Activities

### Event Notification Service
**PatientPing**

- **Current Activities:**
  - Maintain ADT data feed (with consent)
  - Support roll-out to provider community

- **New Activities:**
  - Continued maintenance and support

### Patient-Provider Texting
**Pilot Underway**

- **Current Activities:**
  - Supporting pilot program.

- **New Activities:**
  - Lead generation for patient texting vendor
VITLDirect

• Current Subscriber Organizations:
  • Northeastern Vermont Regional Hospital
  • Northwest Medical Center
  • Southwestern Vermont Medical Center
  • The University of Vermont Medical Center Post-Acute Organizations
    o Burlington Health and Rehab
    o Green Mountain Nursing Home
    o Vermont Department of Corrections
    o Wake Robin

• New Activities:
  • None planned
VITL: Health IT Consulting

- Vermont Health Information Exchange (VHIE)
  - Improving the health of Vermonters
    - Improve the quality of care and the patient experience
      - Point of Care
      - Clinical Data Management
      - Health IT Consulting
      - Data Quality
      - Assist providers in IT Adoption
      - Meaningful Use Stage 2 and 3
  - Reduce the rate of growth of cost of healthcare
Health IT Consulting

Ongoing

- General Health IT Consulting:
  - Technical solution consulting
  - Security Risk Assessment
  - Workflow assessments
  - Meaningful Use consulting for eligible professionals: MU 2
- Source data quality consulting:
  - Vermont Care Network data quality project: Stage 2
  - Blueprint Sprint data quality projects
  - ACO data gap remediation

New Activities

- Strategic Health IT Consulting:
  - Technical solution consulting
  - Connectivity criteria
  - Security Risk Assessment
  - Workflow assessment
  - Meaningful Use consulting for eligible professionals: MU2 and MU3
- Source data quality consulting:
  - Vermont Care Network data quality project: Stage 3
  - Blueprint Sprint data quality projects
  - ACO data gap remediation: Phase 2

- Designates alignment with VHITP Initiatives
VITL and the Blueprint for Health

Vermont Health Information Exchange (VHIE)

- Improving the health of Vermonters
- Improve the quality of care and the patient experience
- Reduce the rate of growth of cost of healthcare

- Point of Care
- Clinical Data Management
- Blueprint Clinical Data Registry
- Health IT Consulting
- Data Quality

- Improved patient management by Community Health Teams and use of data for Practice Profiles.
"VITL is an incredibly important strategic partner to the Blueprint program. The vision of a continuously improving health system depends on having timely and accurate data, and our teams have developed the ability to collect high quality data from medical record systems all across the state. VITL has helped to make this a reality in Vermont."

Craig Jones MD, Director
Vermont Blueprint for Health
Clinical Data Management Infrastructure: Ongoing Activities

- Data warehouse maintenance and operations:
  - Infrastructure maintenance.
  - Completion and maintenance of Admission, Discharge and Transfer (ADT) data gateway for PatientPing event notification system.
- Specialized interface services:
  - Maintenance of existing gateways:
    - Blueprint for Health Clinical Registry.
    - Vermont Department of Health Immunization Registry.
  - ACO gateways and data marts.
  - Maintenance of Continuity of Care Documents (CCD) Query to UVMMC.

- Designates alignment with VHITP Initiatives
Clinical Data Management Infrastructure: New Activities

- Data marts for Community Health Accountable Care (CHAC) and Healthfirst.
- Basic clinical data analytics.
- Data quality dashboards.
- Specialized interface services:
  - Substance abuse data filter for FQHCs.
  - Connection to Vermont Chronic Care Initiative (VCCI).
- Specialized Master Person Index (MPI) for clinical data warehouse.
VITL: Supporting Population Health

Vermont Health Information Exchange (VHIE)

- Improving the health of Vermonters
- Improve the quality of care and the patient experience

- Reduce the rate of growth of cost of healthcare

- Point of Care
- Clinical Data Management
- Population Health Analytics
- Achieve Performance Measures

- Transitions of Care
- Health IT Consulting
- Data Quality
VITL and OneCare Vermont

In December, VITL conducted interviews with key stakeholders. Here is what Todd Moore said about the need for information sharing.

Video Clip
Reducing Cost by Improving Data Quality

- Vermont Health Information Exchange (VHIE)
  - Improve the health of Vermonters
  - Improve the quality of care and the patient experience
    - Point of Care
    - Clinical Data Management
    - Transitions of Care
    - Health IT Consulting
      - Data Quality
      - At the Source
      - VCN project
      - In the Network
      - Terminology Services
      - Mapping non-standard lab codes
  - Reduce the rate of growth of cost of healthcare
    - Score cards
Data Quality Services

- **At the source:**
  - *ongoing*
    - Next phase of VCN data quality project.
    - Blueprint data quality efforts.
  - *new*
    - Additional data quality consulting.

- **In the network:**
  - *ongoing*
    - Deploy terminology services.
  - *new*
    - Expand terminology services.

- **Score cards:**
  - *ongoing*
    - HCO data quality reporting.
    - VDH Immunization data validation.
  - *new*
    - Client specific reporting and analytics.
Budget Process

Inputs

Reviews / Negotiations

Agreements

DVHA

Board / Committees

Stakeholders

Vendors

DVHA

GMCB

SIM

ACO

Operating Grant
APD Contract
Other Contracts
### Funding Sources and Uses

<table>
<thead>
<tr>
<th>Funding Source</th>
<th>Use</th>
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</thead>
<tbody>
<tr>
<td>DVHA</td>
<td>VHIE operation, maintenance and expansion (note, this grows at up to 40% of development costs when such projects are mainstreamed)</td>
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<tr>
<td>OneCare Vermont</td>
<td>Shared VHIE maintenance</td>
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<tr>
<td>VHCIP / SIM</td>
<td>ACO development (overhead absorption)</td>
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<tr>
<td></td>
<td>• Gap Analysis &amp; Remediation</td>
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<tr>
<td></td>
<td>• Gateways</td>
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<tr>
<td></td>
<td>• Data Quality</td>
</tr>
<tr>
<td>APD</td>
<td>Project-specific Development (overhead absorption)</td>
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<tr>
<td></td>
<td>• VITLAccess Onboarding</td>
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<td></td>
<td>• Data Quality</td>
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<tr>
<td></td>
<td>• Single Sign-on</td>
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<tr>
<td></td>
<td>• 42 CFR Part 2</td>
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<td>• Cancer Registry</td>
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<td>• VPMS</td>
</tr>
<tr>
<td></td>
<td>• Provider Health IT Survey</td>
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</table>
Year-to-Year Expenses

Year-to-year Expense Comparison ($ M)

- **FY2015 Actual**: $7.3 M
- **FY2016 Forecast**: $7.1 M
- **FY2017 Proposed**: $7.8 M
## Timing

<table>
<thead>
<tr>
<th>Activity</th>
<th>Schedule</th>
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<tbody>
<tr>
<td>Input solicitation</td>
<td>Ongoing</td>
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<td>Projected budget amounts from DVHA</td>
<td>January, 2016</td>
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<tr>
<td>Projected budget amounts from SIM</td>
<td>March, 2016</td>
</tr>
<tr>
<td>VITL projects total costs</td>
<td>January – April, 2016</td>
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<tr>
<td>• Iterative process to match funding sources with activities</td>
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<tr>
<td>GMCB review of all activities and budget</td>
<td>February, 2016</td>
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<tr>
<td>GMCB approval of public portion of budget</td>
<td>April 1, 2016</td>
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<tr>
<td>Agreement(s) negotiated and drafted</td>
<td>February - April, 2016</td>
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<tr>
<td>Agreement finalized and routing at State</td>
<td>April 4, 2016</td>
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<tr>
<td>Signature</td>
<td>June 30, 2016</td>
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Questions?