VITL Presentation
to Green Mountain Care Board

March 13, 2019

Mike Smith, President & Chief Executive Officer
Frank Harris, Strategic Technology Advisor
Robert Turnau, Chief Financial Officer
Andrea De La Bruere, Director of Client Services
Carolyn Stone, Director of Operations

Agenda

- Introductions

- Governance & Operations Update

- Technology Update

- Financial Update

Governance & Operations Update

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What a Difference a Year Makes!

- A lot of successes but future challenges to overcome as well. In terms of organizational changes this past year:
  - We have stabilized operations and finances. We are in the process of reestablishing credibility. Our focus in 2019 is VITL's future sustainability.
  - The organizational structure has been flattened.
  - New board members have been added.
  - We redesigned the committee structure of the board to include four standing committees: executive, finance, audit and technology.
  - We are reaching out to other health care organizations to discover ways to collaborate and coordinate with technology purchases.
  - State HIT Plan is in place and guiding decision making.

Technology Update

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Shared Technology Services Program

- Joint effort to share key components of health information exchange technology.

- Participants:
  - DVHA
  - Capitol Health Associates/Blueprint
  - OneCare Vermont
  - VITL/VHIE
  - HealthInfoNet

- Focus
  - Interfacing technology
    - Interface engine architecture – Rhapsody
    - eClinicalWorks hub
  - Patient matching - Master Patient Index (MPI)
  - Terminology Services

What Are the Objectives?

- Best in class patient matching, synchronized across the architecture

- Improved terminology services capability
  - Implementation scope guided by state and ACO data priorities

- Improved interfacing capability
  - Support for direct Web services
    - Version 3 HL7 standard
    - Lighter implementation requirements (especially for small HCOs)
  - eCW hub capability
  - CHA/Blueprint gets the development capability they need
  - Sensitive data is supported, protected, and routes only where it belongs. Customers can trust the solution.

Future Platform Study Status

- RFI developed and released.

- Developed evaluation criteria and scoring methodology.

- Tally:
  - Considered 35 vendors
  - Requested RFI response from 14
  - 4 withdrew
  - 10 responses received

- Team is currently reviewing responses and scoring.

- Approach is to ensure that future platform fits with shared technology choices (MPI, Terminology Services, Interfacing).

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Data Cleanup

- In 2018/2019 VITL's primary focus has been on cleaning data coming in the front door of databases, with an external MPI and terminology services (shared services) and at the point of origin (connectivity criteria).

- In 2019, more focus will be dedicated to clean up the data that is already in existing databases.

- VITL's drive to reduce the number of duplicate records is two-fold. We anticipate that by year end, the database cleanup effort coupled with substantial reduction of duplicate records, will result in the total number of duplicates to be below 20% of total unique patient records.

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Data Cleanup (Continued)

- We have been successful in reducing duplicate records.
  - In June 2018 we identified 598K duplicate records in the Medicity/Health Catalyst Interoperables database and by the end of December we had reduced that number to 236K.

- VITL discovered that vendor-based matching rules were not properly deployed.
  - In response, we have corrected this and redeployed the matching rule, plus have begun to once again run tools to reduce the duplicate records. We expect to be at 189K by end of December.

- With the implementation of the external MPI, future vendor surprises should be eliminated.

Financial Update

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Revenue

	FY17 Audited	FY18 Audited	FY19 Budget	FY19 7 Mths
Core Grant	$ 4,125,156	$ -		
Core Contract	-	3,890,469	1,932,780	1,939,780
APD Contract	744,332	1,459,544	638,166	644,305
CY19 Contract	-	-	2,374,054	275,187
SIM Contract	862,173	-	-	-
Other State Contracts	-	167,485	42,000	59,200
State/Federal Grants & Contracts	5,731,661	5,517,497	4,987,000	2,918,472
Program Service Fees	1,194,640	999,116	1,018,760	557,369
Conference Fees	208,218	-	-	-
All Other Revenue	43	1,383	-	1,670
Total Revenue	$ 7,134,562	$ 6,517,997	$ 6,005,760	$ 3,477,511

VITL completed 100 % of our FY19 1st half deliverables including the completion of 61 of new and replacement interfaces

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Expenses

	FY17 Audited	FY18 Audited	FY19 Budget	FY19 7 Mths
Labor Cost	$ 2,588,565	$ 2,151,808	$ 2,079,523	$ 1,176,283
Fringe Related Costs	1,274,580	1,028,130	863,864	476,306
Personnel Related Expenses	3,863,145	3,179,938	2,943,387	1,652,589
Health Catalyst (f.n.a. Medicity)	1,153,884	1,030,451	1,071,954	587,711
Information Technology	777,121	509,133	1,019,921	274,187
Consultants	197,953	81,393	74,780	13,465
Occupancy	216,806	224,586	196,564	135,224
Legal & Accounting	184,207	147,658	174,399	201,585
Education & Outreach	102,843	10,939	14,642	2,941
Insurance	97,530	100,551	104,100	61,792
Prof. Dev. & Travel	124,651	61,131	33,185	15,167
Telecommunications	64,285	61,621	64,857	33,386
All Other	125,032	93,998	116,435	57,224
Contingency	-	-	100,000	-
Total All Expenses	$ 6,907,457	$ 5,501,399	$ 5,914,224	$ 3,035,270
Change in Net Assets	227,105	1,016,598	91,536	442,241

VITL's 2nd half FY19 expenses projected to be greater than 1st half FY19

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Balance Sheet

	FY17 Audited	FY18 Audited	FY19 Budget	FY19 7 Mths
Cash	886,850	1,579,370	1,246,369	2,591,913
Accounts Receivable	1,052,872	1,231,418	1,310,963	787,013
WIP	-	26,514	-	-
Prepaid Expenses	241,922	134,307	87,389	129,501
Total Current Assets	2,181,644	2,971,608	2,644,721	3,508,427
Property and Equipment	258,937	357,522	459,463	357,522
Less Accumulated Depreciation	(209,397)	(249,602)	(321,938)	(279,674)
Net Property and Equipment	49,540	107,920	137,525	77,848
Other Assets	11,281	12,781	11,281	12,781
Total Assets	2,242,465	3,092,310	2,793,527	3,599,056
Accounts Payable	355,745	203,128	387,153	365,235
Accrued Salaries and Taxes	20,180	-	-	-
Accrued Vacation	156,045	165,088	168,099	148,672
Deferred Revenue	12,910	12,910	12,910	62,911
Refundable Advances	131,187	131,187	-	-
Total Current Liabilities	676,067	512,312	568,162	576,818
Net Assets	1,563,398	2,579,997	2,225,365	3,022,237
Total Liabilities and Net Assets	2,239,465	3,092,310	2,793,527	3,599,056

VITL is in a strong financial position
To deal with future funding reductions

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Additional Slides

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Shared Technology Services Status

- Group has chosen a terminology services capability:
    - Term Atlas –developed by the Maine HIE, HealthInfoNet (HIN).
    - Great opportunity to collaborate with HIN.

- Narrowed the field of MPI vendors to two.

- Looking at two possible routes to expand interfacing capability with Rhapsody, the interface engine VITL currently uses:
    - Hosted by HIN, or
    - Rhapsody as a Service (RaaS), cloud-based service provided by Rhapsody.

Recent Security Accomplishments

- Conducted annual comprehensive security assessment with CynergisTek.
  - Working with security governance group on new plan of action and milestones – setting improvement agenda for the coming year.
- Conducted penetration testing.
  - We do this annually, and test for vulnerabilities quarterly.
- Encrypted HDM data.
- Implemented two-factor authentication for email.
- Implemented new encrypted email capability.
- Shredded disk drives for decommissioned IT equipment.
- Conducted new process of testing staff for knowledge of security policies after required review.

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Meaningful Use and Security Risk Assessment Consultations
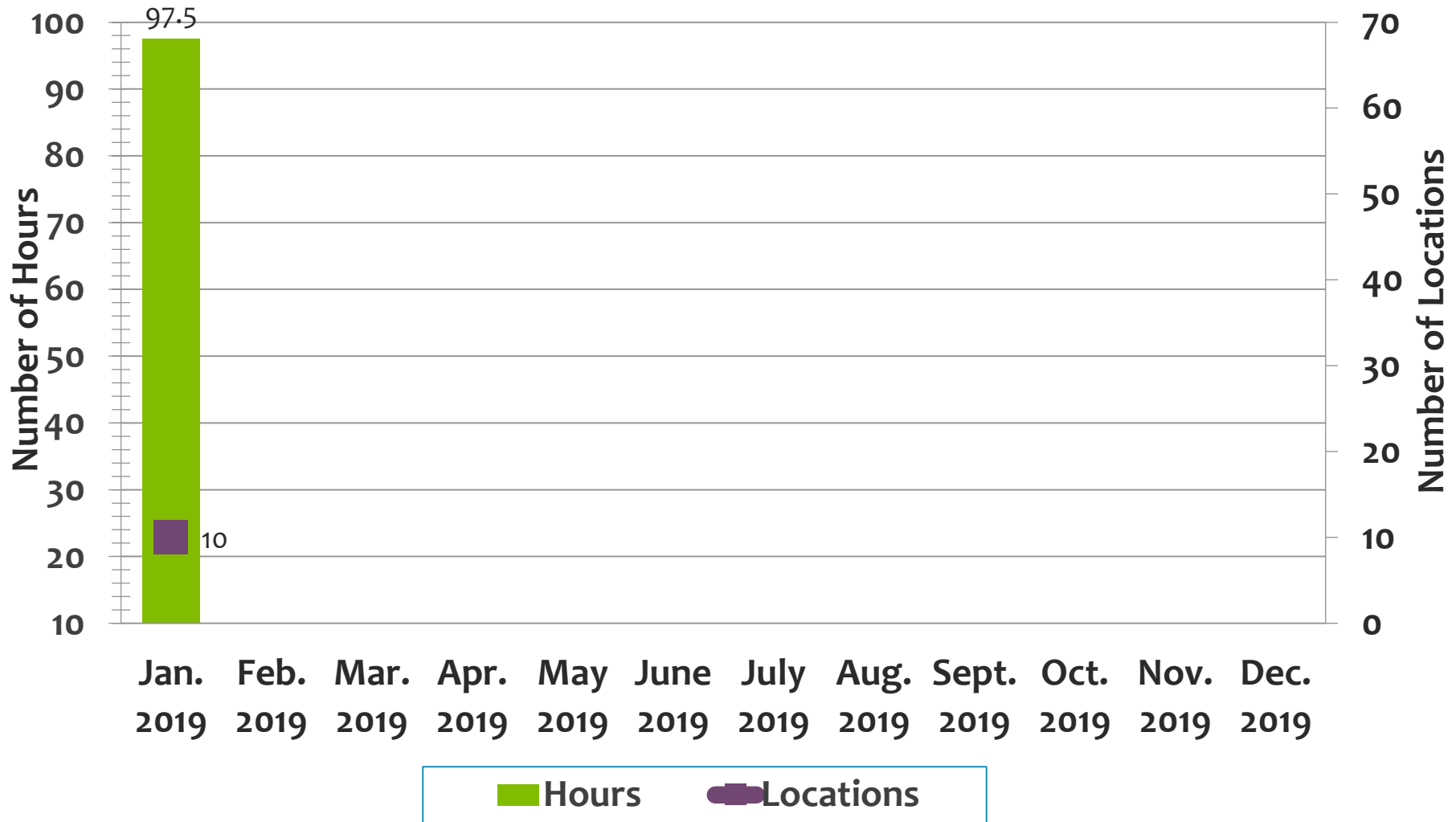
Percent of Vermont Patients Providing Consent
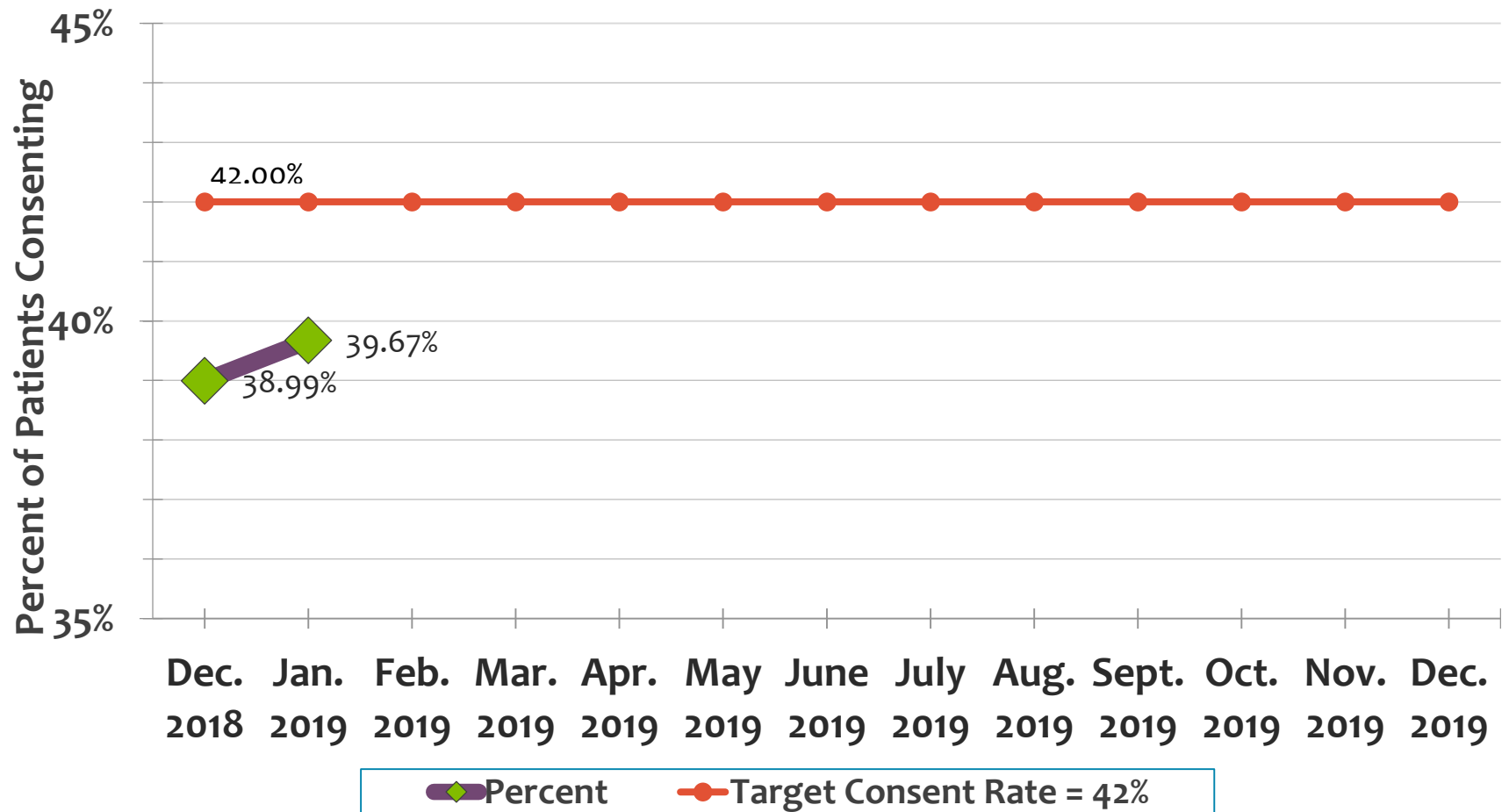
Connectivity Update

VITL is currently working with organizations on the CY19 DVHA interface priority list to utilize the Connectivity Criteria.

This involves the following tasks:

- Introducing the Connectivity Criteria to organizations.

- Completing Baseline Connectivity Criteria Assessments (Tier 1).

- Having the organization identify the common data set elements (Tier 2) they are documenting in their EHR.

- Validating the data elements they document are making it into the electronic messages and into the VHIE during the interface testing phase.

- Creating work plans for the organizations and vendor(s) to use as a guide to meet the minimum common data set elements of Tier 2 Connectivity Criteria for the VHIE and its stakeholders.

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Connectivity Criteria: New & Replacement Interfaces as of January 31, 2019

- Target of 89 work plans by the end of calendar year 2019.

- Currently there are 67 work plans in progress.

- If a Health Care Organization is connected to the VHIE they meet Tier 1 of the Connectivity Criteria.

- We are currently evaluating live organizations to see if they meet Tier 2 and will develop work plans to assist them as necessary.
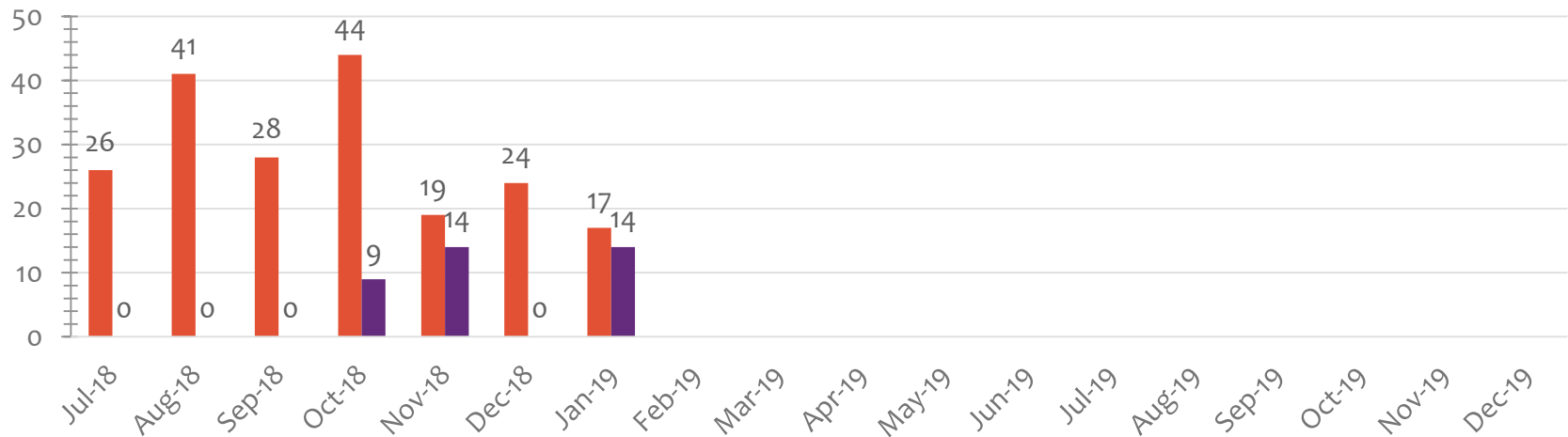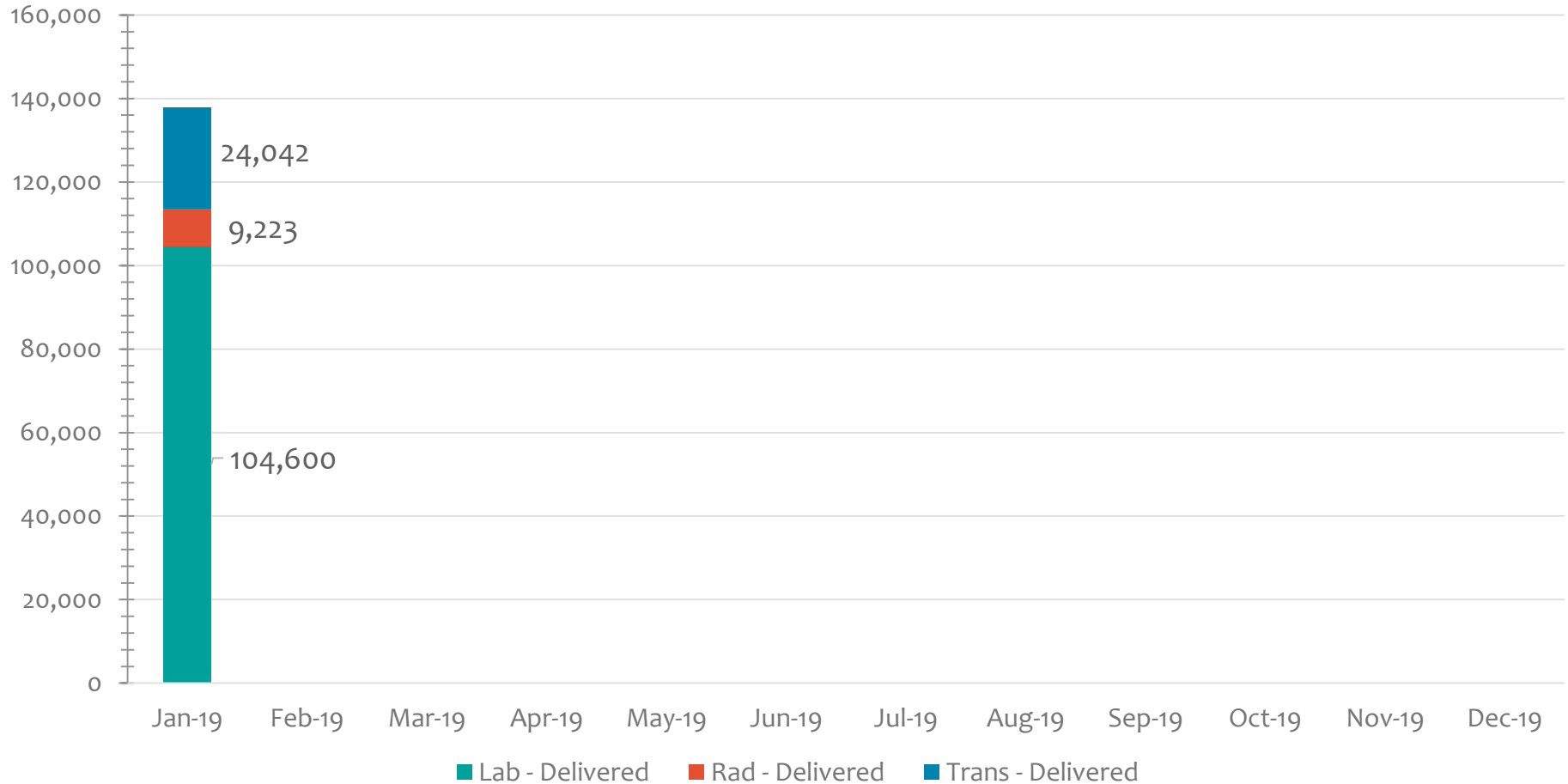
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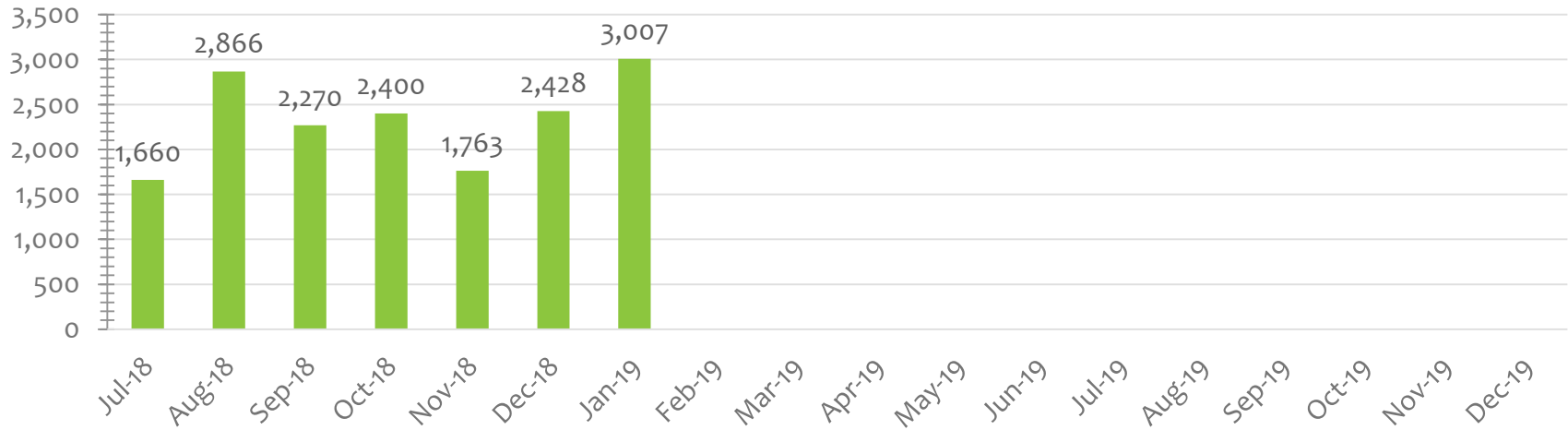
Point of Care: Utilization

Point of Care: Utilization

Provider Results Delivery

Number of providers receiving results in January 2019 = 525