

# VHCURES Data Submission

## Summary

Vermont statute 18 V.S.A. § 9410 requires the GMCB to protect the privacy of data in its All-Payer Claims Database (APCD). This statute also prohibits the public disclosure of any data that contains direct personal identifiers. GMCB proposes to repeal subsection (e) of 18 V.S.A. § 9410, which would allow the collection of direct identifiers (such as patient name) into the VHCURES secure database. The change would apply only to some data and only relates to the *submission of data*. Protections related to the *release of data* would remain unchanged.

### Green Mountain Care Board

The purpose of the Green Mountain Care Board is to promote the general good of the State by:

1. Improving the health of the population;
2. Reducing the per-capita rate of growth in expenditures for health services in Vermont across all payers while ensuring that access to care and quality of care are not compromised;
3. Enhancing the patient and health care professional experience of care;
4. Recruiting and retaining high-quality health care professionals; and
5. Achieving administrative simplification in health care financing and delivery.

18 V.S.A. § 9372

## What Data are Submitted to VHCURES?

The Vermont Health Care Uniform Reporting and Evaluation System (VHCURES) secure database contains medical and pharmacy claims and patient information. VHCURES data includes approximately 80 percent of commercially insured Vermont residents and 100 percent of Vermont's Medicaid and Medicare enrollees. The requirements for data collection are in GMCB's Administrative Rule 8.000.

## How are Data Submitted to VHCURES?

By state statute, commercial payers and Medicaid transform some data *before submission* to the VHCURES database through a process called *one way encryption*. This means that the data is changed to a secret code that cannot be reversed. This happens for data fields like name and social security number today. In contrast, Medicare data for Vermont residents are submitted to VHCURES without encryption, meaning that data fields like name and social security number are submitted as readable text. All submissions—whether they are encrypted or in clear, readable text—are sent over a secure connection called Secure File Transfer Protocol (SFTP). When files are received, security protocols are completed before the data are stored in the secured data warehouse.

## Why Change State Statute to Allow for the Collection of Direct Identifiers?

Repealing subsection (e) of 18 V.S.A. § 9410<sup>1</sup> would allow the collection of direct identifiers (also known as live identifiers or clear text data). This would allow GMCB to change the current requirements and enable data to be collected in a readable format. The change would allow GMCB to receive data from commercial payers and Medicaid like it currently does from Medicare (without a one-way encryption). This eases the burden on payers (submitters of data to VHCURES) since encryption requires extra steps in the data submission process. It would allow the GMCB to bring data together at a patient level to better carry out its regulatory duties. It would also allow the GMCB to join with other health data organizations across the state

<sup>1</sup>18 V.S.A. § 9410 (e) Records or information protected by the provisions of the physician-patient privilege under 12 V.S.A. § 1612(a), or otherwise required by law to be held confidential, shall be filed in a manner that does not disclose the identity of the protected person.

by using a common master patient index. A common index is critical to achieve the state's goal of having one health record per person across data systems.

## How Does This Change Help Vermonters?

Allowing the opportunity to receive direct identifiers will substantially improve the ability to bring data together across the state, which furthers the state's goal to support an integrated and non-redundant data system and supports richer analyses and research capabilities. For example, today, Medicaid must send data to multiple different recipients for various functions (e.g., VHCURES, OneCare Vermont, Vermont Information Technology Leaders). If VHCURES data includes direct identifiers, data sharing efficiency and quality of data would be improved for analysis and research.

## What Privacy and Security Protections are in Place?

State statute requires that the Board protect the privacy of these data; it incorporates protections from HIPAA (18 V.S.A. § 9410(h)(2))<sup>2</sup> and goes further by prohibiting *all* public disclosure of direct personal identifiers (18 V.S.A. § 9410h)(3)(D))<sup>3</sup>. VHCURES is additionally protected by a variety of security standards and certifications. VHCURES is certified by, or compliant with, the following: HITRUST, HIPAA and CMS Qualified Entity Certification Program, Service Organization Center 3 (SOC-3), National Institute of Standard and Technology (NIST), Certified Information Systems Security Professional (CISSP).

## How Does a Change Like This Impact Data Protections?

State statute continues to require that GMCB protect the privacy of these data. It prohibits public disclosure of *any* data that contain direct personal identifiers, even if allowed under HIPAA. So, current privacy protections would not change. Data users would still only have access to deidentified data. In addition, GMCB maintains Administrative Rules that govern data collection and authorized data release. GMCB also maintains a Data Governance Council, which is a committee of the Board responsible for overseeing GMCB's data stewardship program.

## Examples of Current Analyses Using VHCURES

Various GMCB Reporting

<https://gmcboard.vermont.gov/data-and-analytics/analytics-rpts>

Blueprint for Health Community Health Profiles

<https://blueprintforhealth.vermont.gov/community-health-profiles>

Article: Change in Site of Children's Primary Care

<https://www.annfamned.org/content/17/5/390.full>

Mental Health Related ED Claims for VT Children

[https://gmcboard.vermont.gov/sites/gmcb/files/documents/Pediatric%20MH%20ED%20Claims\\_Kasehagen%20%20Omland\\_9-19-2019.pdf](https://gmcboard.vermont.gov/sites/gmcb/files/documents/Pediatric%20MH%20ED%20Claims_Kasehagen%20%20Omland_9-19-2019.pdf)

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<sup>2</sup> [18 V.S.A. § 9410](#) (h)(2) *The collection, storage, and release of health care data and statistical information that are subject to the federal requirements of the Health Insurance Portability and Accountability Act (HIPAA) shall be governed exclusively by the regulations adopted thereunder in 45 C.F.R. Parts 160 and 164.*

<sup>3</sup> [18 V.S.A. § 9410](#) (h)(3)(D) *Notwithstanding HIPAA or any other provision of law, the comprehensive health care information system shall not publicly disclose any data that contain direct personal identifiers. For the purposes of this section, "direct personal identifiers" include information relating to an individual that contains primary or obvious identifiers, such as the individual's name, street address, e-mail address, telephone number, and Social Security number.*