

Health Information Exchange (HIE) Strategic Plan 2023-2027 (2023 Update)



AHS

Agenda

- Goals of the Health Information Exchange
- Steering Committee Composition
- Components of the Health Information Exchange
- Ecosystem – Unified Health Data Space
- 2023 Accomplishments
- Strategic Plan

Goals of the Health Information Exchange:



Create 1 health record for every person



Better health outcomes



Improved healthcare operations



Use data to enable investment and policy decisions

HIE Steering Committee

★ New from last year

VOTING MEMBERS

Kristin McClure - Chair
(Agency of Human Services)



Emma Harrington
(VAHHS)



★ **Eric Schultheis**
(Health Care Advocate)



Jessie Hammond
(Vermont Dept. of Health)



Vacant
(OneCare Vermont)



Victor Morrison
(Person Advocate)



Sandy Rouse
(Central Vermont Home Health and Hospice)

Jimmy Mauro
(BCBS of VT)



Mary Kate Mohlman
(Bi-State Primary Care)

Simone Rueschemeyer
(Vermont Care Partners)



Helen Labun
(Long Term Care Advocate)



John Saroyan
(Practice Innovation Lead)



★ **Rick Dooley**
(Independent Providers)



★ **Kana Zink**
(Health Equity Expert)



NON-VOTING MEMBERS

Beth Anderson
(VITL)



Emily Wivell
(Agency of Digital Services)



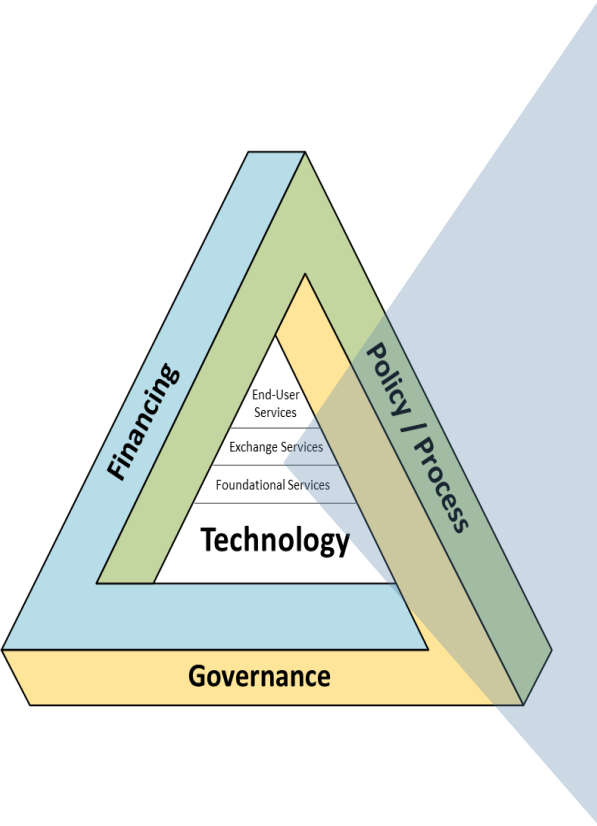
Kathryn O'Neil
(Green Mountain Care Board)



★ **James LaRock**
(Privacy Expert)



HIE Ecosystem: Four components



End-User Services		
Reporting Services	Notification Services	
Analytics Services	Consumer Tools	
Care Coordination Tools	Patient Attribution & Dashboards	
Exchange Services		
Data Extraction & Aggregation		Data Access
Interoperability	Data Quality	Data Governance
Foundational Services		
Identity Management	Consent Policy & Management	
Security	Provider Directories	

What?: The Unified Health Data Space (UHDS)

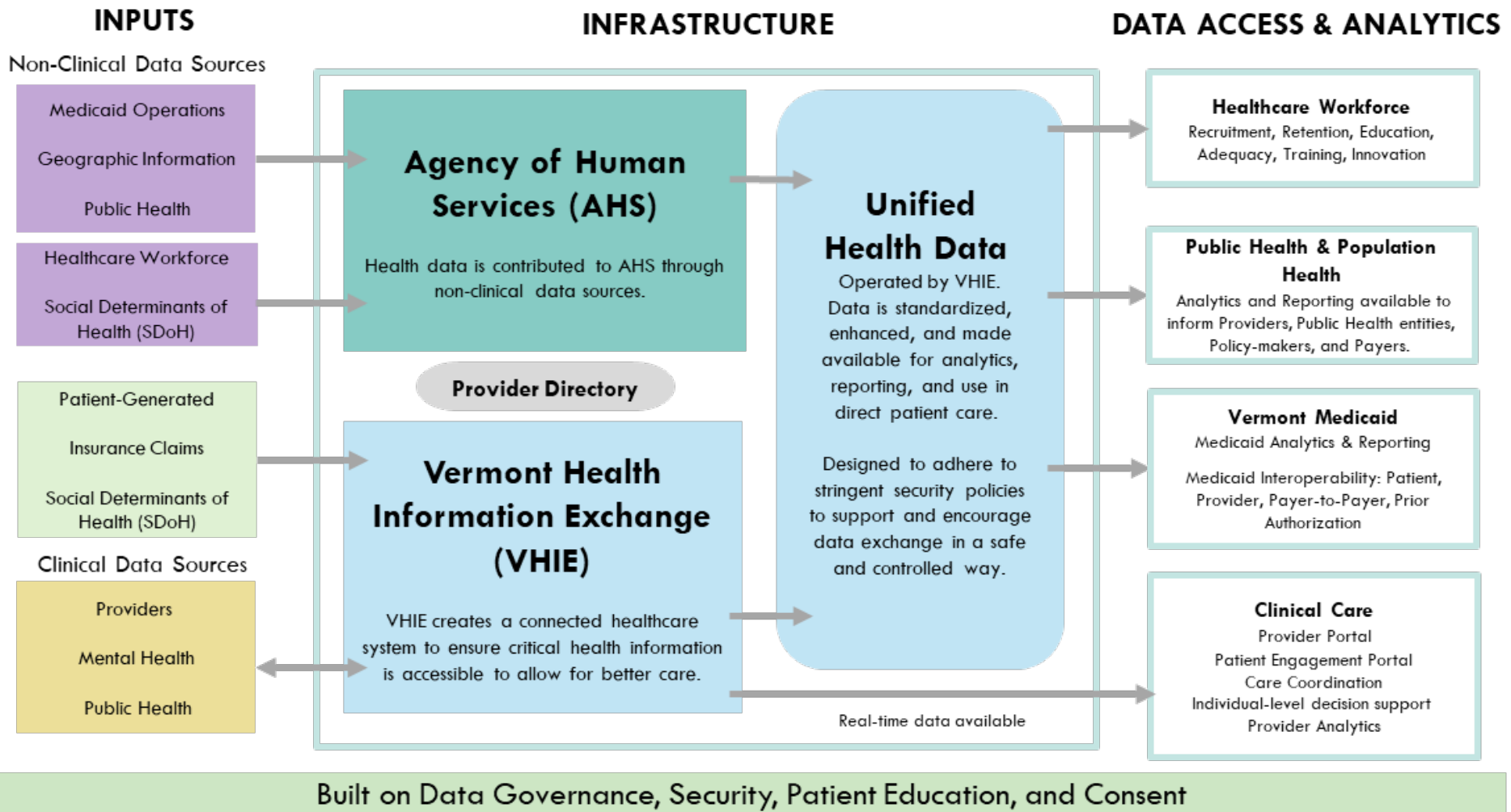
- The Unified Health Data Space (**UHDS**) is a collaborative initiative to streamline data services required to improve healthcare in Vermont.
- Costs/usage of technology will be shared among participants to avoid duplicative efforts and purchases.
- UHDS is an integral part of reform efforts supporting a broad spectrum of healthcare stakeholders/uses;
 - ✓ Point of Care (Providers)
 - ✓ Quality (ACO Provider Networks, Payers)
 - ✓ Policy Evaluation & Regulation (GMCB, Healthcare Reform, Blueprint)
 - ✓ Patients (Personal Health Responsibility)
 - ✓ Population Health (Health Equity, Public Health)
- UHDS will provide those with authorized access to needed information to key stakeholders in the healthcare arena including:
 - **Clinical** data
 - **Mental Health and Substance Use Disorder** data
 - **Claims** data
 - **Social Determinants of Health (SDoH)** data.

Why?: The Case For The UHDS To Enable Value Based Care in VT

1. As performance-based and risk-based reimbursement programs continue to drive health reform initiatives, the value of having an accurate, up-to-date, and complete health data becomes more and more critical.
2. VHIE is the engine to collect, normalize, and exchange health data and enables it to be transformed into actionable and meaningful insights for patient care.
3. The information is used for preventive care, evidence-based disease management, population health management, physician alignment, clinical integration, and participation in various reimbursement programs.
4. When complete, the VT Unified Health Data Space (UHDS) will include tools for comprehensive population health management including:
 - Point of care decision support
 - Patient engagement and outreach
 - Predictive modeling and risk assessment
 - Care gap analysis
 - Roll-up and drill-down outcomes reporting
 - Care management and coordination.

UNIFIED HEALTH DATA SPACE

Built on Data Governance, Security, Patient Education, and Consent



2023 Key Accomplishments

Goal	Current Status (Oct 2023)	Outlook for Dec 2023 Status	On Track
Establish Data Governance for each data type and stakeholder use of it			Yes
HIE Data Governance	100%	100%	Yes
Part2 Data Governance (domain)	100%	100%	Yes
Social Determinants of Health Data Governance (domain)	10%	30%	Yes
Focus on clinical data (completeness, quality, and standardization)			Yes
Data Standardization	70%	100%	Yes
Medicaid Data Access and Aggregation (MDAAP) Program Design and Planning	80%	100%	Yes
Funding Structure			Yes
Cost Benchmarking Analysis	100%	100%	Yes
Action Plan to implement Recommendations	80%	100%	Yes
Establish new / additional interfaces to increase the richness of data			Yes
Provider connections/interfaces	90%	100%	Yes
Part 2 Data - all Designated Agencies are connected to the HIE	50%	100%	Yes
Development work to start for HIE to serve as the Medicaid Data Warehouse			No
VITL to be operator of Unified Health Data Space (data warehouse)			Procurement
Enhance accessibility for Stakeholders			Partial
Stakeholder access expanded through existing VITL data warehouse	0%	0%	No
Application Program Interface (API) for access to data	50%	65%	Yes
Identify two use cases for SDoH and enable end to end implementation of it			Partial
Social Determinants of Health Data Governance Strategic Roadmap	10%	30%	Yes
Oregon Pediatric Improvement Project and Social Autopsy Implementation - delayed data warehouse	10%	10%	No
Integrate Department of Health data into the HIE			Yes
Bi-directional Exchange Pilot	100%	100%	Yes
VDH-VHIE Integration Strategy	75%	100%	Yes

• Funding

- ✓ Continued funding sustainability

• Governance

- ✓ HIE Data Governance Council and structure in place
- ✓ 42 CFR Part 2 (Substance Use Disorder data)– formed and governance completed
- ✓ Social Determinants of Health – formed and ongoing

• Technology

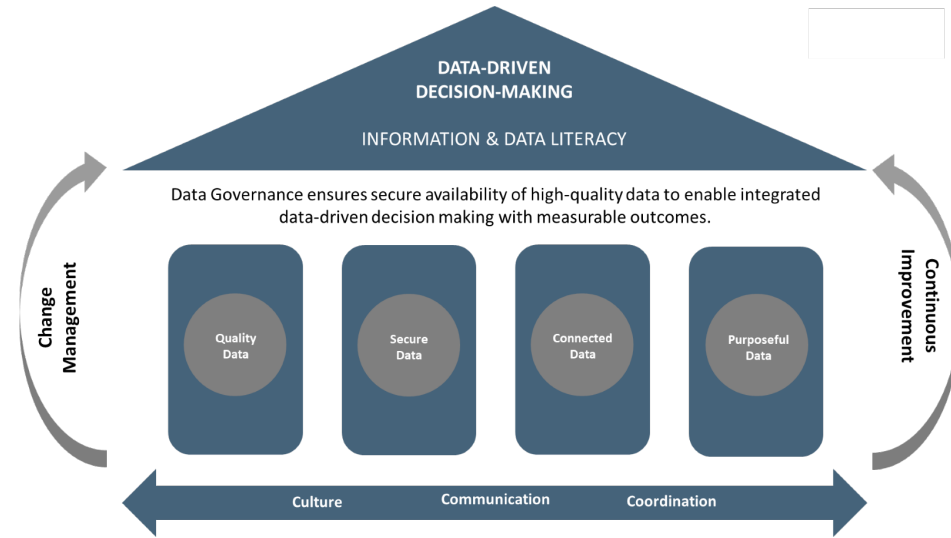
- ✓ Connected all Designated Agencies to the HIE
- ✓ Completed connection for National Health Exchange

• Policy / Process

- ✓ Provided Vermonters with electronic patient health data education
- ✓ Launched incentive program to connect providers to health system electronically
- ✓ Implemented bi-directional exchange of immunization data for providers
- ✓ Initiated Public Health and HIE Integration Strategy, ongoing

2023 Governance Key Accomplishments

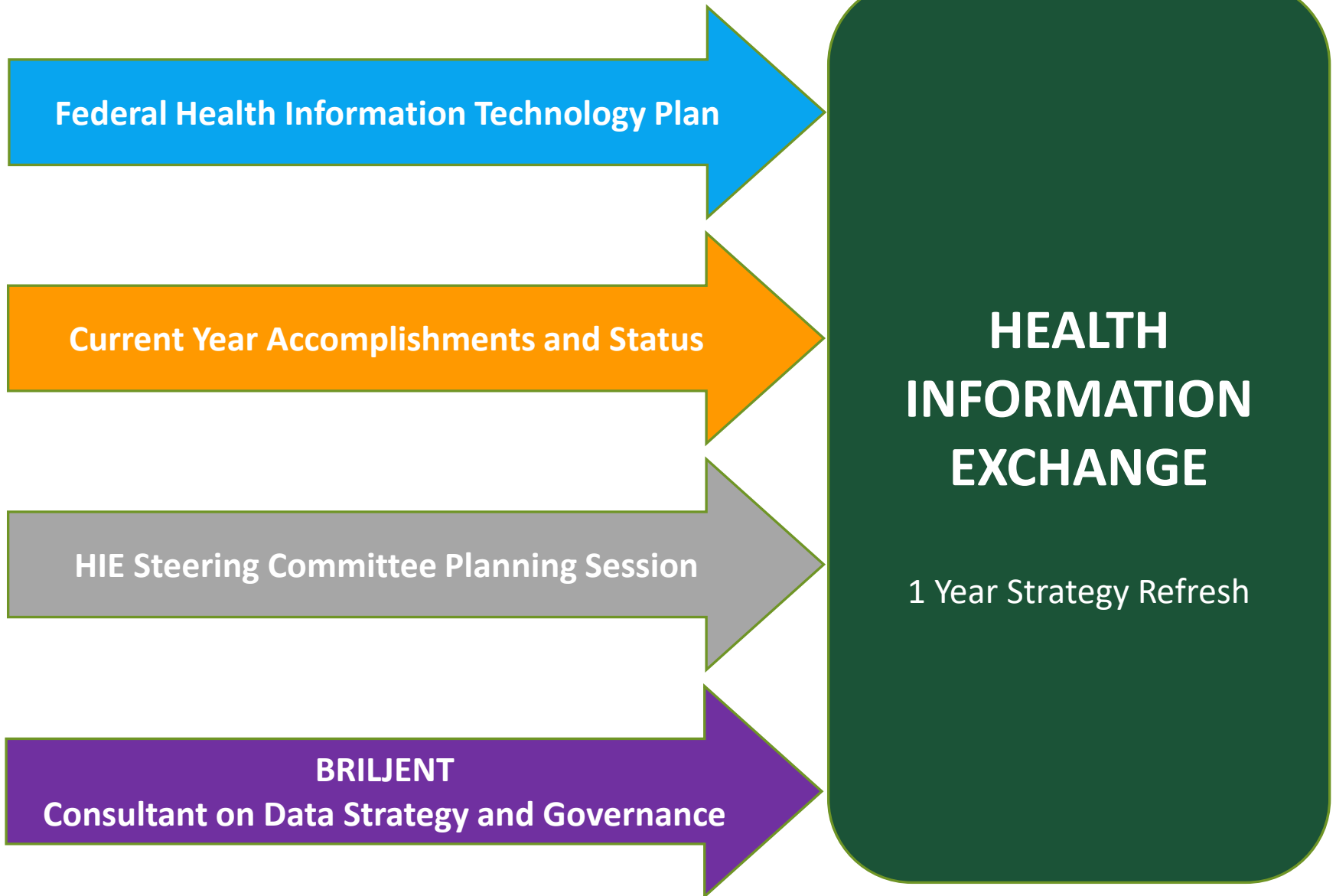
- ✓ Formation, structure, and ongoing operations of **HIE Data Governance Council**
- ✓ Formation and completion of **42 CFR Part 2** Domain Data Governance (major milestone)
- ✓ Formation and ongoing design of Social Determinants of Health (**SDoH**) Data Governance
- ✓ Bi-State provided **health data literacy education** to their community health centers
- ✓ VITL continued its commitment to provide **Patient Education**
- ✓ HIE Data Governance Council plans to host **open meetings** starting in January 2024.
- ✓ All HIE Data Governance **materials** can be found on our website at:
 - [Vermont Health Information Exchange Data Governance | Health Data](#)



2023 Policy/Process Key Accomplishments

- ✓ Implementation of Bi-directional exchange of Immunization Data - very positive response from Providers (immunization directly into their electronic health records)
- ✓ Design of Strategic Roadmap for better integrating Public Health and the Health Information Exchange (HIE) for improved public health insight and better use of resources
- ✓ All Designated Agencies connected to the HIE
- ✓ Comply with Act 167 – required claims / clinical integration recommendation in the HIE Strategic Plan
- ✓ Agreed upon approach for Vermont providers and providers in neighboring states who request information for treatment purposes through the national data exchange (eHealth exchange) to receive that information through the HIE

Strategic Planning Process



2024 HIE Strategic Items

GOAL	FOUNDATIONAL	VALUE BASED CARE MGT	FOCUS ON HEALTH EQUITY	CREATE 1 HEALTH RECORD FOR EVERY PERSON	BETTER HEALTH OUTCOMES	IMPROVED HEALTHCARE OPERATIONS	USE DATA TO ENABLE INVESTMENT AND POLICY DECISIONS
Ongoing support for Data Governance .	✓		✓				
Patient education and ongoing support of Health Data Literary. Provider outreach for HIE awareness.	✓		✓				
Focus on data completeness, quality, and standardization . Connect more providers to the the HIE through provider incentive payments.	✓	✓	✓	✓	✓	✓	✓
Enable HIE to adopt analytics to empower individuals, address patients' full range of health needs, and facilitate better health outcomes for individuals and communities.	✓	✓	✓		✓	✓	✓
Focus on cost for maintenance and operations.	✓						
Capability for care coordination and referral management .		✓	✓		✓	✓	
Strategic Roadmap for Social Determinants of Health		✓	✓				
Integrate Dept of Health data into the HIE.			✓	✓	✓		
Explore options to provide technical support to rural providers/smaller practices .	✓		✓	✓		✓	
Ongoing Technology Enhancements: Promote portability of EHI through standards-based APIs and inclusion of Provider Directory .	✓						

*Each item to have action plan developed by January 2024

Backup

HIE KPIs / Metrics

1. Uptime: 24 hours / 7 days a week uptime of 94% (moving to 99.9% in 2024)
2. Growth of Interfaces: 2024 - 15% total increase, ~200-250 new connections
3. Security Compliance Reports - Monthly
4. Outcomes Based Certification Metrics (App E)

Metric	Jan-23	Feb-23	Mar-23	Apr-23	May-23	Jun-23	Jul-23	Aug-23	Sep-23
Direct Care/Care Coordination									
Number of VITLAccess User Accounts	2,259	2,304	2,307	2,396	2,303	2,296	2,445	2,507	2,564
Number of Organizations using VITLAccess	232	232	233	233	241	246	270	271	273
Number of Potential Organizations that could use VITLAccess	1,578	1,577	1,577	1,577	1,577	1,577	1587	1,592	1,594
Number of Patient Queries through VITLAccess	10,545	11,061	12,669	12,274	14,525	14,445	12,932	14,761	13,959
Number of Medicaid patient records transmitted from the VHIE to the Medicaid care coordination tool	601,628	532,633	604,471	923,172	628,977	575,795	539,820	576,896	547,048
Direct Care/Care Coordination: Event Notification									
Number of event notifications (ADT) messages sent to PatientPing through VHIE connection	3,343,842	2,973,819	3,353,817	3,006,123	3,368,299	3,350,516	3,108,088	3,509,976	3,290,381
Master Patient Index: Percent Medicaid Match Rate	98.19%	98.18%	98.23%	98.22%	98.24%	98.23%	98.22%	98.19%	98.17%
Direct Care/Care Coordination: Electronic Results									
Number of LAB messages captured in the VHIE	551,061	501,320	578,501	528,510	564,992	560,881	538,661	582,420	556,447
Number of RAD messages captured in the VHIE	80,746	74,681	83,837	76,872	84,395	83,457	76,906	86,611	81,094
Number of TRANS messages captured in the VHIE	391,503	357,870	400,653	369,035	399,728	392,198	368,576	404,308	387,270
Public Health									
The percent of total immunization messages (VXU) received by the Immunization Registry from the VHIE	77%	77%	85%	85%	85%	89%	89%	89%	91%
The percent of total death records transmitted from Death Registry to VHIE	100%	100%	100%	100%	100%	100%	100%	100%	100%
LAB messages captured in the VHIE and transmitted to the Public Health Authority (Mpox & Covid)	3,037	2,559	3,438	2,298	992	517	415	742	2,434