

Vermont Health Information Exchange and VITL Overview

For the Green Mountain Care Board

November 16, 2022



About VITL

- VITL operates the Vermont Health Information Exchange, in accordance with Vermont Statute 18 V.S.A. § 9352:

(c)(1) Health information exchange operation. VITL shall be designated in the Health Information Technology Plan approved by the Green Mountain Care Board pursuant to section 9351 of this title to operate the exclusive statewide health information exchange network for this State. The Plan shall determine the manner in which Vermont's health information exchange network shall be managed. The Green Mountain Care Board shall have the authority to approve VITL's budget pursuant to chapter 220 of this title.

- Nonprofit organization founded in 2005
- Board members represent hospitals, health care providers, health technologists, payers, and businesses across Vermont

VITL's Mission & Vision

VITL's **mission** is to securely aggregate, standardize, and share the data needed to improve the effectiveness of health care for Vermonters.

VITL's **vision** is to be a leader in collaboratively delivering actionable data that leads to better health.

Part of a new [Strategic Framework](#) introduced in 2021

What is Health Information Exchange?

- Health information exchange (HIE) encompasses two related concepts:
 - Verb: The appropriate and confidential electronic exchange of clinical information among authorized organizations
 - Noun: An organization with agreed-upon operational and business rules that provides services to enable the electronic and secure sharing of health-related information
- Electronic exchange of clinical information allows doctors, nurses, pharmacists, other health care providers, and patients to access and securely share a patient's vital medical information electronically — improving the speed, quality, safety, coordination, and cost of patient care.

Source: The Office of the National Coordinator for Health Information Technology

Benefits of Health Information Exchange

Patients	<ul style="list-style-type: none">• Do not have to request and carry their records from provider to provider• Better care as their providers have more complete information
Providers & Provider Organizations	<ul style="list-style-type: none">• Access to a more complete patient records to support care delivery, inform care coordination, and reduce duplicate tests• Data from other providers is accessible in their electronic health record (not faxed)• Hub for efficient data sharing, delivering data to partners such as community providers and public health• Source of patient data during planned or unplanned system downtime
Public & Private Payers	<ul style="list-style-type: none">• Access to data to support operations such as case management, prior authorization, and potentially quality measurement
Public Health	<ul style="list-style-type: none">• Access to patient information for case investigations and public health programs• Aggregation of immunization and laboratory data
Population Health	<ul style="list-style-type: none">• Data to support operations and measurement of health reform and population health initiatives

What the Vermont Health Information Exchange Does

- **Collects, matches, and standardizes** patient data in real time from health care providers caring for Vermonters to create one longitudinal record for each person
- **Serves as a hub** for efficient data sharing, eliminating the need to build and maintain multiple point-to-point connections
- **Protects patient data** through robust security practices and ensuring appropriate access to data
- **Makes data available** to inform:
 - Patient care
 - Quality improvement
 - Health care reform
 - Public health activities
 - Population health initiatives
 - Case management

Building One Longitudinal Record to Ensure Meaningful, Usable Data

VITL does not just move data. Extensive work is done to match, standardize, and translate data received to make it comparable and usable.

- Patient consent preferences rigorously maintained and applied
- Connectivity criteria set baseline for submission
- Robust master patient index for patient matching (>96%)
- Map local data to standard codes
- Terminology services to translate incoming messages
- Data stored in the FHIR data structure

Data Contributors

Count	Contributor
15 (all)	Vermont hospitals, plus Dartmouth Health <i>Includes inpatient and ambulatory services, emergency departments, specialty and primary care practices</i>
11 (all)	Vermont Federally Qualified Health Centers
32	Independent specialty and primary care practices
6	Home health agencies
12	Pharmacy chains and individual pharmacies
17	Labs – state and commercial
1	State agency

- New and replacement connections (interfaces) for data contribution are funded through the State contract.
- Connections are prioritized with the HIE Steering Committee Connectivity Criteria Subcommittee.
- Connectivity Criteria defines tiered requirements for data contribution.

The Data in the Vermont Health Information Exchange

- Admission, discharge, and transfer (ADT) messages
- Laboratory results
- Radiology reports
- Transcribed reports – including many types of notes
- Immunization messages
- Home health data
- Continuity of Care Documents (CCDs)

Accessing VHI Data

150 organizations use VITL's data access services.

Data is available through:

- The **VITLAccess clinical portal**, accessible by web browser
- **Delivered into electronic health records**
 - Currently delivering laboratory results, radiology reports, and transcribed reports
 - Under development: APIs and SMART on FHIR to deliver more data types directly into EHRs or to in-EHR apps
- **Event notification**
- **Custom reporting and analytics**

VHIE Data Delivery

Data contributors benefit from the delivery of their data, via the Vermont Health Information Exchange, to a variety of stakeholders. This streamlines required data submission and reporting for providers and informs public health and population health efforts. Data is delivered to:

- Other clinicians and organizations that provide care
- Vermont Department of Health
- OneCare Vermont
- Vermont Blueprint for Health
- Vermont Chronic Care Initiative

How Data Sharing is Authorized

- Since March 2020, the Vermont Health Information Exchange has been an opt-out health information exchange
- VITL enters into data use agreements with contributing organizations that specify how the data may be used, in accordance with State and Federal law, HIPAA, and the *Protocols for Access to Protected Health Information on VHIE* included in the Health Information Exchange Strategic Plan
- VITL is committed to educating the public about data sharing and their options, and to honoring decisions to continue sharing or opt-out
 - Currently 98.8% of people's records are viewable, 1.2% have chosen to opt-out

Protecting Patient Data

The foundation of our work is the security of patient data and ensuring appropriate access to that data. This includes honoring patients' rights and preferences.

In support of this commitment, VITL:

- Continuously reviews and updates our security and recovery practices to ensure they align with best practices and mitigate the ever-changing threat landscape
- Ensures transparency about how VHIE data is shared
- Monitors and aligns to regulatory changes
- Maintains agreements and controls to ensure appropriate sharing of data

Respecting Patient Choices - Public Education Approaches



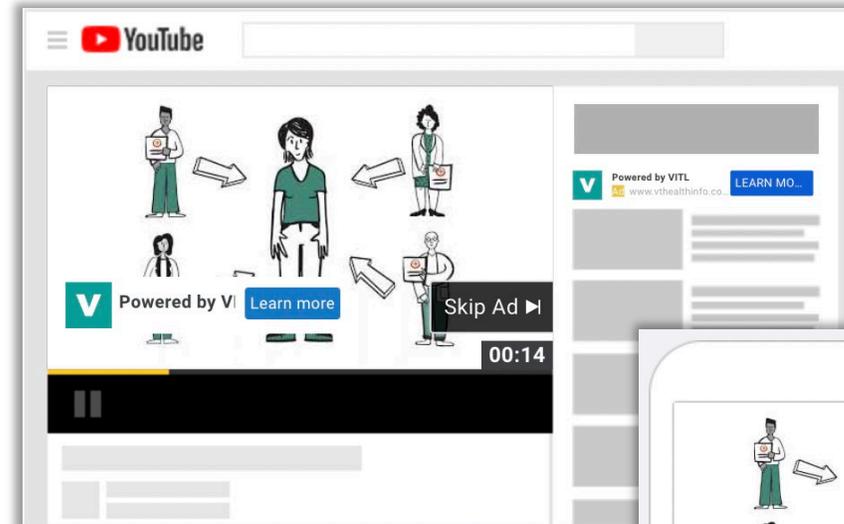
[Services](#) [About the VHIE](#) [For Patients](#) [About VITL](#)

VHIE Consent Education Toolkit

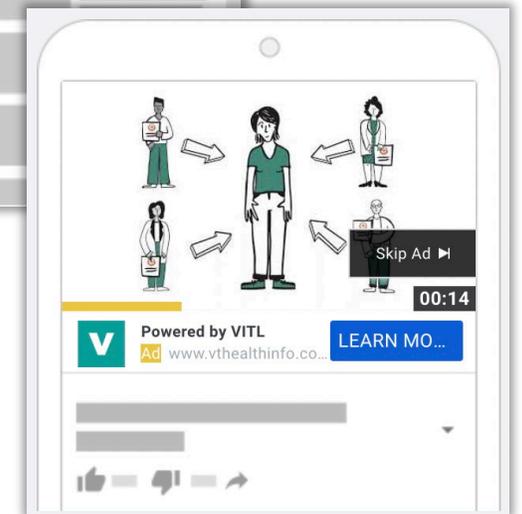
Thank you for your interest in helping inform Vermonters about the Vermont Health Information Exchange and everybody's options to participate or opt-out. You can help by sharing the following materials with your patients/clients/members.

Notice of Privacy Practices	Flier	Brochure
Poster	Blog Post or Newsletter	Social Post 1
Social Post 2	Social Post 3	NEW Social Post 4
NEW Social Post 5	NEW Social Post 6	NEW Sharable Video 1
NEW Sharable Video 2	Website for Patients	

Link to [toolkit for participants](#)



Link to [patient website](#)



How the Vermont Health Information Exchange is Funded

- The majority of VITL's current funding results from a contract with the Agency of Human Services (AHS)
 - Maintenance and Operations supports the ongoing operation of the VHIE
 - Design, Development and Installation supports the implementation of new functionality and capabilities
- Additional revenue is derived from custom reporting contracts, messaging services, and event notification services
- Continuing to explore long-term funding sustainability, including delivering on custom needs and innovation

New Partnerships with Public Health

- Covid created opportunities for HIEs to demonstrate real value in support of public health
 - Connecting with new testing sites for testing data
 - Collecting and deliver immunization records
 - Delivering daily reporting of hospitalizations, resource usage
 - Supporting case investigations and contact tracing
- New work includes:
 - Bi-directional Vermont Immunization Registry interface
 - Health equity
 - Expanded lab reporting (Monkeypox)
 - Strategic planning

Regional Collaboration

- Launched a collaboration of regional HIEs in 2022
 - HealthInfoNet in Maine (HIN)
 - The Rhode Island Quality Initiative (RIQI)
 - Vermont Information Technology Leaders (VITL)
- Together, we seek to
 - Share best practices and innovative thinking
 - Explore opportunities for joint initiatives
 - Access data from regional specialty centers

1,112,031

messages delivered to VDH reporting COVID-19 vaccinations

2,111,724

COVID-19 test results reported to VDH

2021 by the #s

98.65%

of patients sharing records

of patients opted out

1.35%

839

interfaces collecting data

72,402,830

messages received carrying health data

507

interfaces distributing data

532

clinicians receiving results in their electronic health records

1,452,655

results delivered to clinicians, including laboratory test results, radiology reports, and clinical notes and transcriptions

1,346

interfaces maintained

2,442

VITL Access users

724,045

patient record queries