

VITL Quarterly Update to the Green Mountain Care Board

August 15, 2022



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Overview

Highlights

- A new patient education campaign was launched to provide opportunities for individuals to learn how their data is shared
- The transition from the legacy VHIE platform was completed by the June 30 contract expiration
- Implemented 32 public health interfaces and 25 replacement interfaces through June 30
- Projected FY22 Year End financial performance remains strong
- Quarterly metrics are included and represent activity to June 30

Patient Education

Patient Consent Education

- Patient education campaign launched in June 2022
- Featuring paid placement on Facebook, Instagram, YouTube
- Goal is views, awareness
- Messaging focuses on how health data is shared
- Posts and videos link to website with more information and opt-out and record request options

Sample social post:



The image shows a sample social media post from Vermont Information Technology Leaders, Inc. (VITL). The post features a white background with a blue border. At the top left, there is a logo for VITL and the text "Vermont Information Technology Leaders, Inc." followed by a sub-headline: "Your medical records can now be shared between your doctors, hospitals, pharmacists and clinics, helping keep you healthy across VT." The main content area contains a stylized orange and black stethoscope icon in the top right corner. Below the icon, the text reads "4 steps to understanding medical record sharing" in a bold, black, sans-serif font, with a green circular arrow icon to the right of the word "sharing". At the bottom of the post, there is a footer with the text "VTHEALTHINFO.COM Vermont Health Information Exchange Powered by VITL" and a "Learn More" button. In the bottom right corner, there are social media engagement metrics: "208" (with Facebook and YouTube icons), "20 Comments", and "15 Shares".

Project Updates

Collaborative Services: MedicaSoft Update

- Transition from legacy platform complete
 - All data contributor interfaces transitioned to VITL interface engine from the legacy platform
 - Results Delivery contracting complete, and transition underway with minimal client impact
 - Direct Messaging contracting complete and transition underway
 - Roll out of new VITLAccess clinical portal complete
- Reporting Database enhancements and performance tuning in progress

Additional CY22 Project Updates

- Priority #1 – Expanding public health interfaces.
 - 32 new laboratory and immunization interfaces built through June 30
 - Enhancing electronic laboratory reporting interface(s) to include monkeypox results
- Priority #2 – Custom clinical data delivery to Medicaid for the purpose of payer compliance with federal interoperability rules
- Additional projects in progress for fall delivery
 - Patient Application Programming Interface (API) planning
 - Technical design for Social Determinants of Health (SDOH) data ingestion
 - Bi-Directional Immunization query and retrieve technical design

Financial Update

May 2022 Fiscal Year to Date Performance Statement of Activities

	Current Period	Current Period Budget	Current Period Budget Variance	YTD	YTD Budget	YTD Budget Variance
Revenue						
Contract Revenue	567,138	524,831	42,307	8,880,967	10,408,502	(1,527,535)
Program Fees	18,030	50,144	(32,114)	232,789	362,219	(129,430)
Other Income	1,078	686	392	4,945	7,546	(2,601)
Total Revenue	586,246	575,661	10,585	9,118,701	10,778,267	(1,659,566)
Personnel Costs						
Salaries & Wages	169,817	219,519	(49,702)	2,135,048	2,414,707	(279,659)
Fringe Benefits	67,574	85,556	(17,982)	869,873	941,119	(71,246)
Total Personnel Costs	237,391	305,075	(67,684)	3,004,921	3,355,826	(350,905)
Materials/Serv Expenses						
Network Expenses	93,028	45,172	47,856	389,116	577,626	(188,510)
Software	245,047	282,008	(36,961)	2,778,200	2,932,519	(154,319)
Outside Support	113,184	219,387	(106,203)	1,805,198	2,453,324	(648,126)
Education & Outreach	4,557	13,333	(8,776)	41,882	77,817	(35,935)
Travel	1,628	556	1,072	2,965	19,444	(16,479)
Supplies	644	5,537	(4,893)	8,229	52,878	(44,649)
Occupancy	2,010	11,810	(9,800)	112,635	136,087	(23,452)
Telecom	3,007	5,612	(2,605)	46,146	54,279	(8,133)
Insurance	7,841	8,565	(724)	87,034	94,283	(7,249)
Other	5,753	12,000	(6,247)	90,066	112,270	(22,204)
Training/Prof. Develop.	2,412	2,782	(370)	53,175	119,726	(66,551)
UFF Contract Costs	0	0	0	161,263	0	161,263
Total Materials/Serv Expenses	479,111	606,762	(127,651)	5,575,909	6,630,253	(1,054,344)
Total Expenses	716,502	911,837	(195,335)	8,580,830	9,986,079	(1,405,249)
Change in Net Assets	(130,256)	(336,176)	205,920	537,871	792,188	(254,317)

Statement of Activity Notes

- This Statement reflects fiscal year performance through May 31 – fiscal year end is June 30
- YTD Revenue is \$1,660K below budget, largely due to the deferral of revenues that was not accounted for in the budget
- YTD Expenses are \$1,405K below budget due to lower spending on network, software, and outside support
- Unfulfilled (UFF) Contract Costs are costs that were deferred in FY21 and recognized when the work was completed in FY22

May 2022 Fiscal Year to Date Performance

Balance Sheet

ASSETS	
Current Assets	
Cash	5,242,997
Billed Receivable	1,597,505
Unbilled Receivable	1,068,563
Other Current Assets	135,246
	8,044,311
Non Current Assets	
Fixed Assets	312,761
Accumulated Deprecation	-242,871
Other Non Current Assets	3,510
	73,400
Total Assets	8,117,711
LIABILITIES & EQUITY	
Current Liabilities	
Accounts Payable	770,874
Accrued Expenses	329,253
Deferred Revenue	1,507,020
	2,607,147
Retained Earnings	
Retained Earnings	5,510,564
Total Liabilities & Equity	8,117,711

As of May 31:

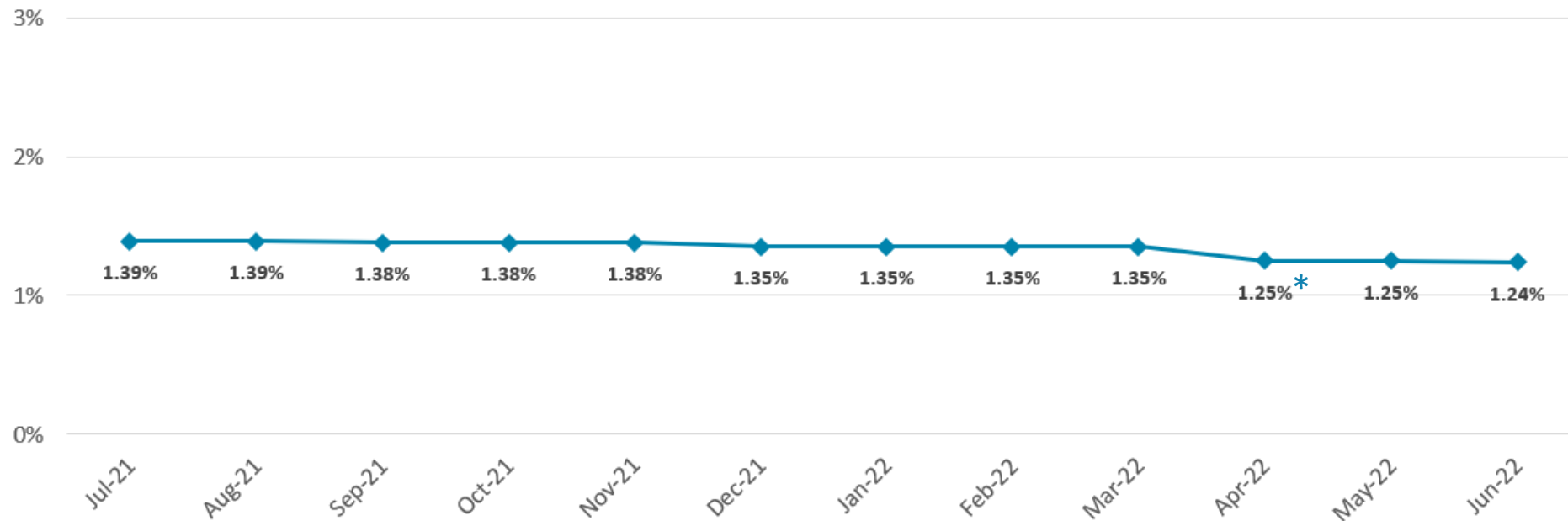
- Cash equaled \$5.2 or 162 days
- Accounts Payable and Accrued Expenses totaled \$1.1M
- Deferred revenue related to September 30 milestones equaled \$1.5M

May 2022 Fiscal Year to Date Statement of Cash Flow

	FY22 YTD May
Cash Flows from Operating Activities	
Cash receipts:	
Contracts	\$ 8,290,280
Programs	\$ 601,075
Interest Income & Other	\$ 12,831
Total	<u>\$ 8,904,186</u>
Cash disbursements:	
Health Catalyst/Verato/Medicasoft	\$ (1,966,381)
Collab Services - Cureous, Consultants	\$ (1,845,094)
Payroll (Net Pay & PR Taxes)	\$ (2,389,744)
Fringe Expense	\$ (571,793)
All Other	\$ (1,360,030)
Total	<u>\$ (8,133,042)</u>
Cash Flow increase / (decrease)	<u>\$ 771,143</u>
Cash Balance as of June 30, 2021	<u>\$ 4,471,854</u>
Cash Balance as of May 31, 2022	<u>\$ 5,242,997</u>

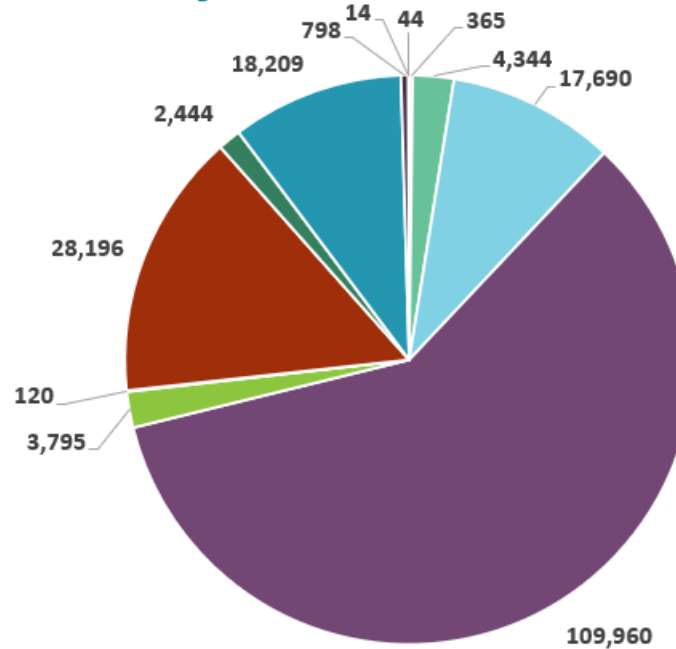
Quarterly Update

Percent of Vermont Patients Opted Out of the VHIE



* The April decrease in the opt out rate is due to the addition of new unique patient identities resulting from the import of historical data for a large COVID testing laboratory.
(Please note the April rate was incorrectly reported in our last update, it has been corrected in this chart.)

Legacy VITLAccess Queries by Organization Type July 2021 - June 2022

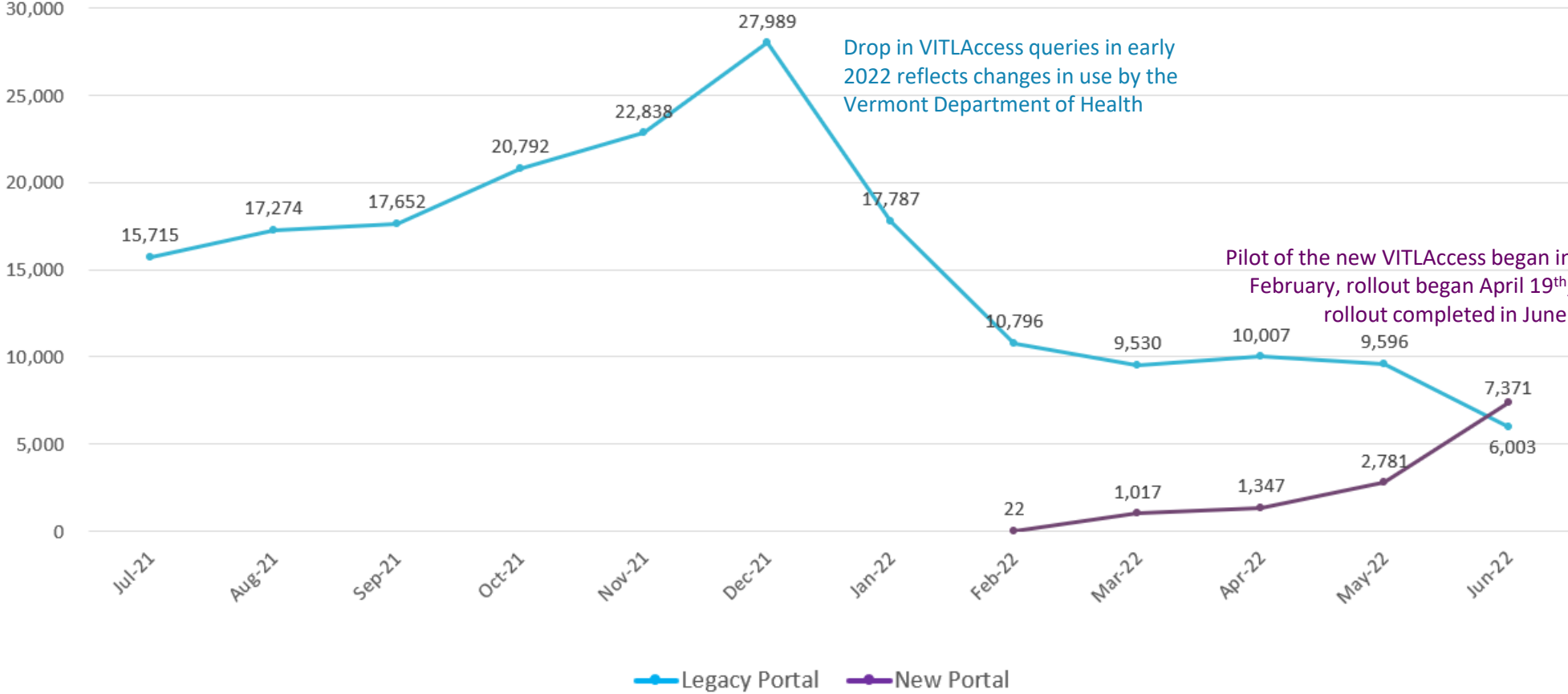


These numbers are for queries of the legacy VITLAccess clinical portal over the last year. They do not reflect activity on the new portal.

The pilot of the new clinical portal began in February, rollout began April 19th, and rollout completed in June.

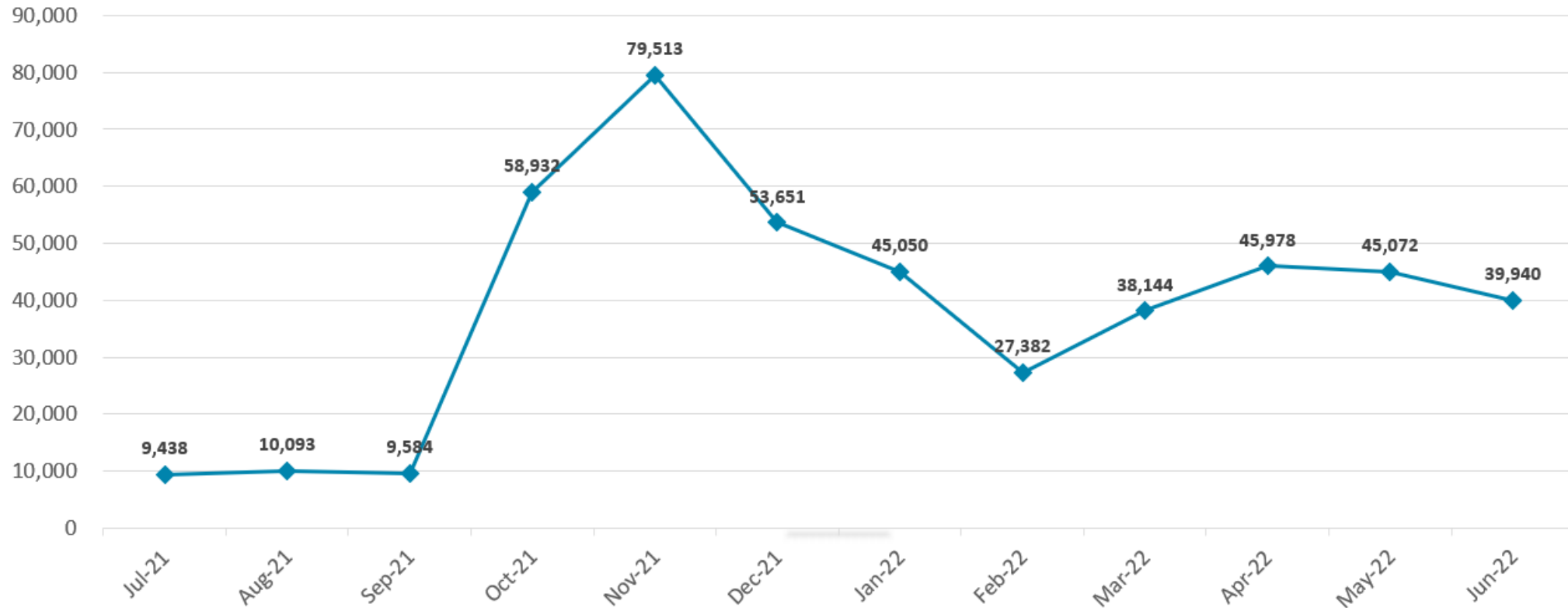
- Community Health Center: 365
- Federal/State Agency: 109,960
- Hospital: 28,196
- Long-Term Care: 798
- Designated Agency: 4,344
- Federally Qualified Health Center: 3,795
- Hospital Owned Practice: 2,444
- Retail Pharmacy: 14
- Emergency Services: 17,690
- Home Health Agency: 120
- Independent Practice: 18,209
- Specialized Services Agency: 44

VITLAccess Queries by Month

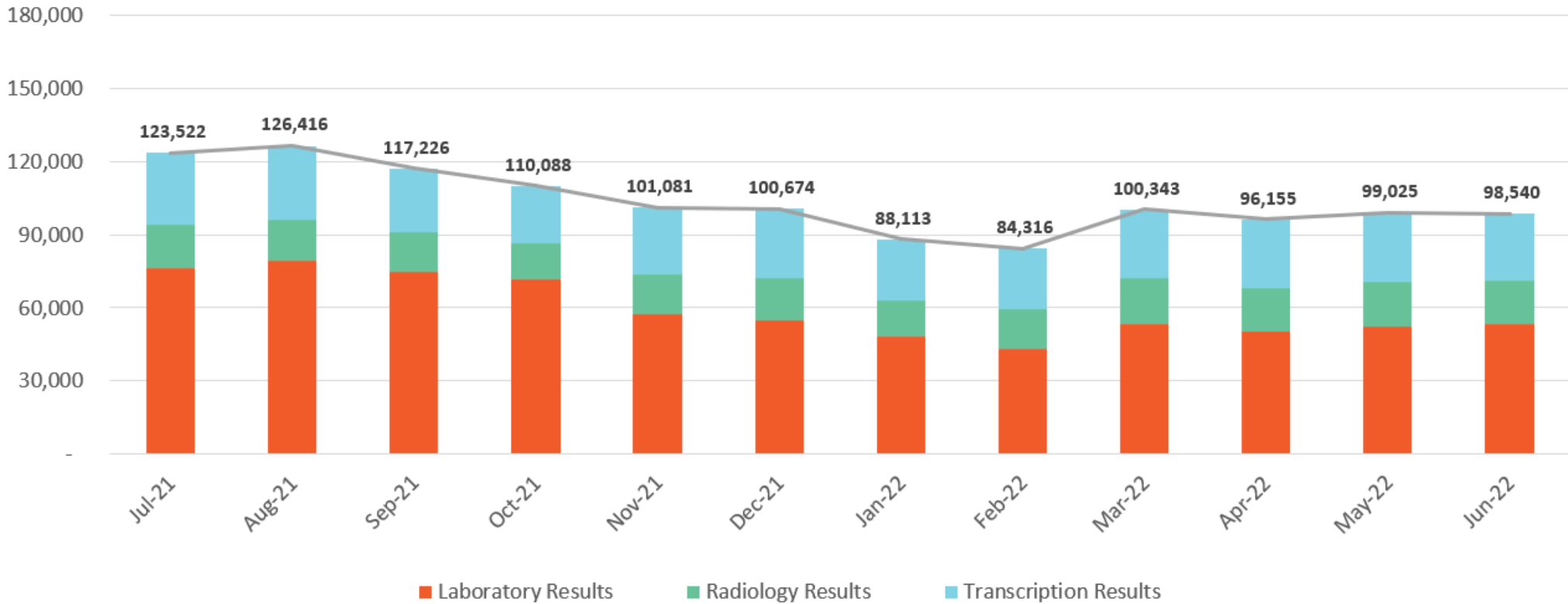


Queries of the VHIE via eHealth Exchange

(University of Vermont Medical Center, Veterans Affairs, Department of Defense)

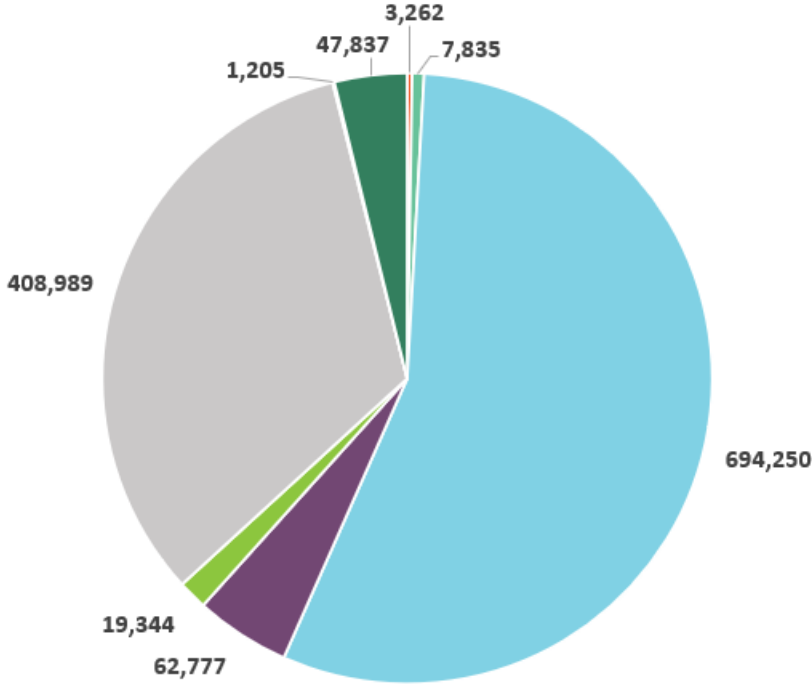


Results Delivery by Result Type



Number of providers receiving results = 600

Results Delivery by Organization Type July 2021 - June 2022



- Designated Agency: 3,262
- Hospital: 62,777
- Long-Term Care: 1,205

- Federal/State Agency: 7,835
- Hospital Owned Practice: 19,344
- Rural Health Center: 47,837

- Federally Qualified Health Center: 694,250
- Independent Practice: 408,989

Abbreviations

Abbreviations

ADS: Vermont Agency of Digital Services

AHS: Vermont Agency of Human Services

API: Application programming interface – a connection between computers or between computer programs

CMS: Centers for Medicare and Medicaid Services

CY: Calendar Year

DVHA: Department of Vermont Health Access

FHIR: HL7's Fast Healthcare Interoperability Resources data standard

FY: Fiscal Year (VITL's fiscal year begins on July 1)

HIE: Health Information Exchange

HITECH Act: Health Information Technology for Economic and Clinical Health Act

OBC: CMS' Outcomes Based Certification program, focused on ensuring projects receiving federal financial participation are meeting state and CMS needs (details were included in our November 2021 update)

OCV: OneCare Vermont

VDH: Vermont Department of Health

VHIE: Vermont Health Information Exchange

YTD: Year to Date