

A network diagram background consisting of various sized blue circles (nodes) connected by thin white lines (edges). Some lines are solid, while others are dashed. The nodes are scattered across the blue background, creating a complex web-like structure.

# VITL Quarterly Update to the Green Mountain Care Board

November 16, 2022



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# Overview

- Achievements since last update
- Upcoming contract & anticipated budget update
- Financial update and staff retirement

# Contract Update

- Exploring, with Agency of Human Services team, the opportunity to shift contract year to align with State and VITL fiscal years (June 30) to enable more accurate planning and budgeting
- As a result, we anticipate a six-month extension to our current (calendar year 2022) contract to run from January-June 2023
- Contract draft has been submitted to Centers for Medicare and Medicaid Services for review
- We expect to come with a budget amendment request in February

# Anticipated Contract Extension Deliverables

- Maintenance & Operations flat from CY22 (half year)
- Up to \$300k for 40 additional data connections (interfaces)
- \$300k for work toward providing deidentified data for public health
- \$180k for Designated Mental Health Agencies to submit 42 CFR Part 2 (substance use disorder) data
- \$200k to design and implement ability to capture and protect 42 CFR Part 2 data
- \$100k to continue work to integrate Social Determinants of Health data
- \$50k to build connections for providers to query the Immunization Registry
- \$150k to contract with Bi-State's Vermont Rural Health Alliance

# Public Education

# Public Education Campaign

- Continuing our commitment to public education about how data sharing works, how it helps, and every Vermonter's options
- June – September 2023 education campaign – direct outreach to Vermonters
  - YouTube, Facebook, Instagram
  - Messaging focused on how health data is shared
  - Statewide campaign, all age groups
  - 4.3 million video plays on Facebook and Instagram
  - 555,000 video views on YouTube

# Projects Update



# Contract Year 2022 Projects Update

- Accessing new data (interfaces)
  - Coordinating with Department of Health (VDH) to prioritize and build interfaces to collect laboratory and immunization data
  - Working with health care organizations to rebuild connections when electronic health records (EHRs) are replaced
- Providing custom clinical datasets to Medicaid to enable their compliance with the CMS Interoperability and Patient Access final rule
- Building a connection to VDH's Immunization Registry and enabling the ability for providers to directly query it to access patient immunization data
  - VHIE configuration and testing complete, pilot planning with one hospital underway

# Contract Year 2022 Projects Update

- Planning design and implementation of a Fast Healthcare Interoperability Resource (FHIR) Application Programming Interface (API) to expand data access
- Working with the AHS team to ingest Social Determinants of Health (SDOH) data collected by the Vermont Chronic Care Initiative (VCCI)
- Continuing work to enhance reporting infrastructure to make custom datasets available for stakeholders
- Efforts underway to upgrade platform to latest FHIR standard
- Updates to the clinical portal are underway – medication fill history, query for national data

# Security Update

# Update on the Security Life Cycle

Key initiatives over the last quarter:

- Review and update of VITL's security policies – core alignments with NIST Special Publication 800-53 and MARS-E
- Researching and developing new security and resilience for remote working environments
- Update to the Cybersecurity Awareness and Training program and rollout of automated training
- Continuous improvement of the monitoring capabilities of our Security Incident and Event Monitoring (SIEM)
- Annual renewal of cybersecurity insurance
- Annual penetration test contracted and scheduled



# Financial Update

# Financial update

- Fiscal Year 2022 audit (July 1, 2021 – June 30, 2022)
  - Final work is wrapping up, will be presented with our next update
  - Final performance is expected to be better than anticipated
- Fiscal Year 2023 (July 1, 2022 – June 30, 2023)
  - Year to date performance through September 30 follows
  - Based upon the projected contract extension, we expect to need to present a budget update for review in February 2023

# FY23 Performance through September 30

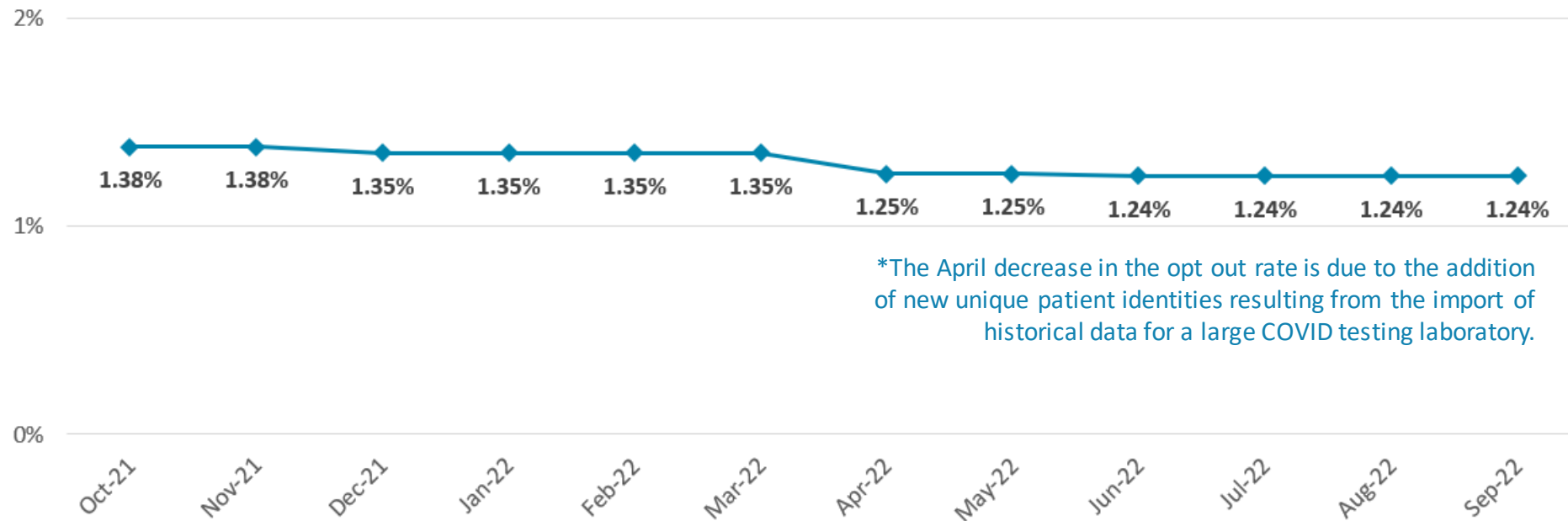
- **Revenues** are below budget due to:
  - Shifts in project priorities and timing of deliverables
  - Unrecognized revenues deferred in FY22
- **Expenses** are also below budget, largely due to shifts in project priorities and timing

	YTD	YTD Budget	YTD Budget Variance
<b>Revenue</b>			
Contract Revenue	2,042,329	3,324,840	(1,282,511)
Program Fees	39,626	35,923	3,703
Other Income	13,260	2,250	11,010
<b>Total Revenue</b>	<b>2,095,215</b>	<b>3,363,013</b>	<b>(1,267,798)</b>
<b>Personnel Costs</b>			
Salaries & Wages	477,337	662,409	(185,072)
Fringe Benefits	209,028	274,719	(65,691)
<b>Total Personnel Costs</b>	<b>686,365</b>	<b>937,128</b>	<b>(250,763)</b>
<b>Materials/Serv Expenses</b>			
Network Expenses	104,816	146,806	(41,990)
Software	694,227	887,304	(193,077)
Outside Support	437,012	626,050	(189,038)
Education & Outreach	6,054	35,875	(29,821)
Travel	774	18,750	(17,976)
Supplies	2,022	3,225	(1,203)
Occupancy	6,510	6,430	80
Telecom	9,607	11,175	(1,568)
Insurance	28,497	40,729	(12,232)
Other	17,259	12,500	4,759
Training/Prof. Develop.	31,883	53,922	(22,039)
UFF Contract Costs	0	0	0
Loss Provision	0	0	0
<b>Total Materials/Serv Expenses</b>	<b>1,338,661</b>	<b>1,842,766</b>	<b>(504,105)</b>
<b>Total Expenses</b>	<b>2,025,026</b>	<b>2,779,894</b>	<b>(754,868)</b>
<b>Change in Net Assets</b>	<b>70,189</b>	<b>583,119</b>	<b>(512,930)</b>

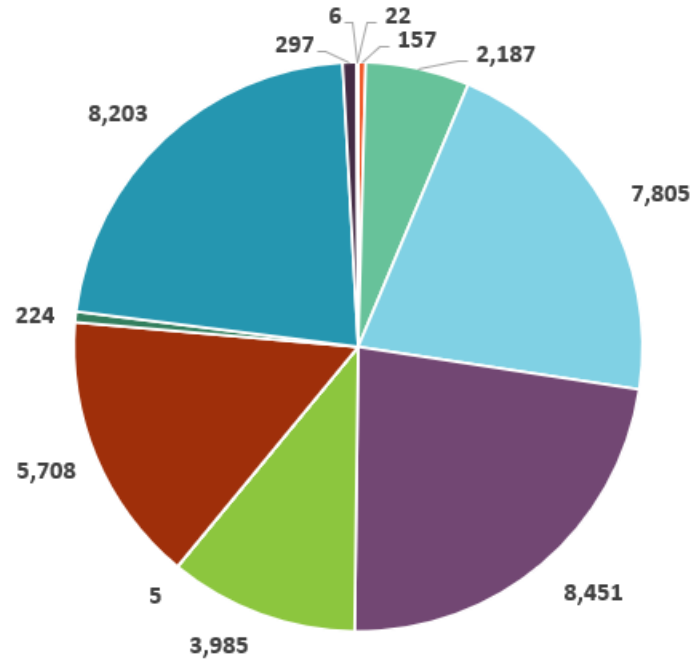
# Quarterly Metrics



## Percent of Vermont Patients Opted Out of the VHIE

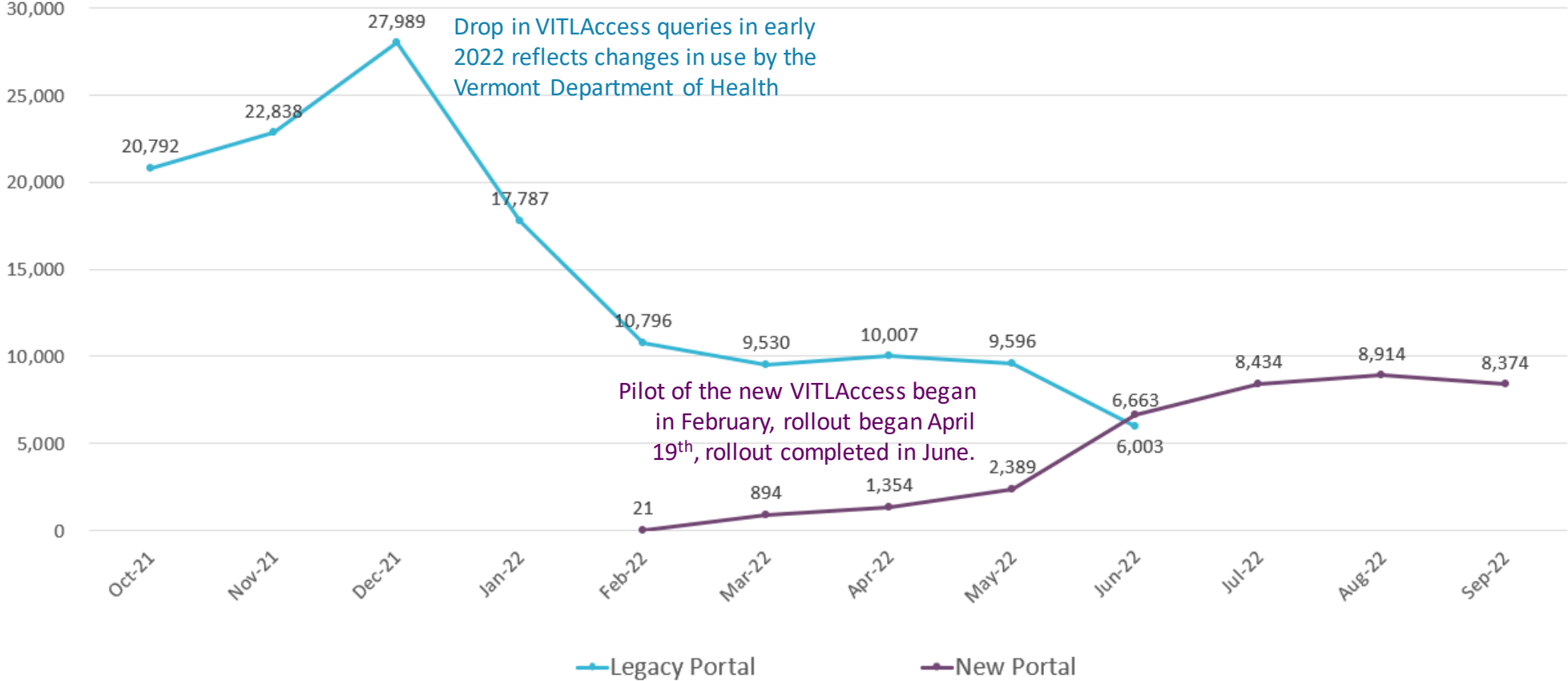


## New VITLAccess Queries by Organization Type January 2022 - September 2022



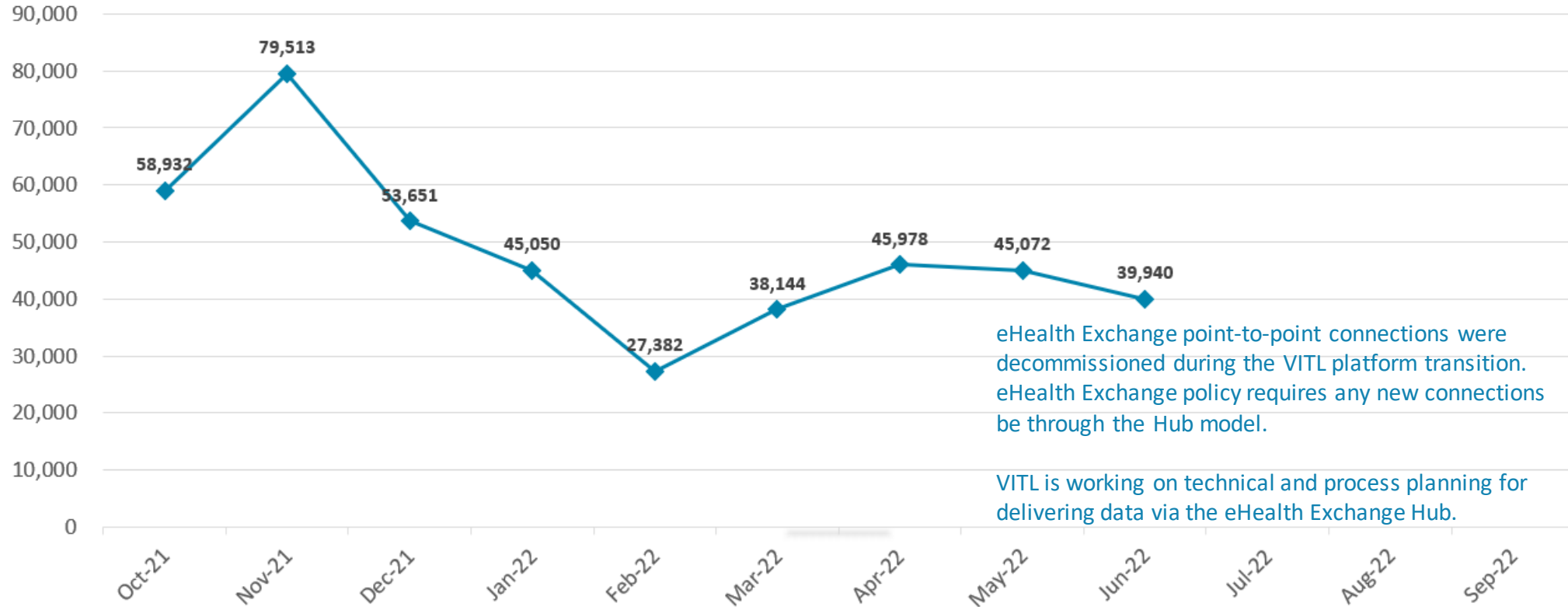
- Community Health Center: 157
- Designated Agency: 2,187
- Emergency Services: 7,805
- Federal/State Agency: 8,451
- Federally Qualified Health Center: 3,985
- Home Health Agency: 05
- Hospital Owned Practice: 224
- Hospital: 5,708
- Retail Pharmacy: 06
- Independent Practice: 8,203
- Specialized Services Agency: 22
- Long-Term Care: 297

# VITLAccess Queries by Month



# Queries of the VHIE via eHealth Exchange

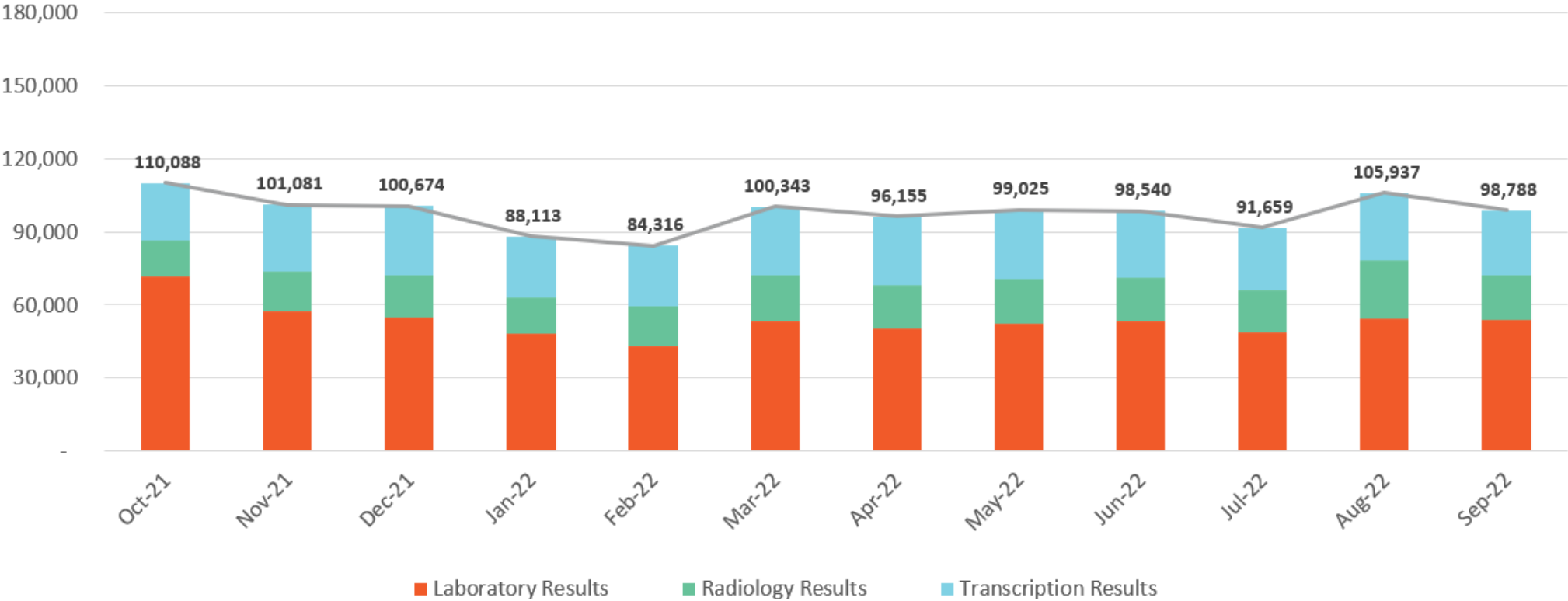
(University of Vermont Medical Center, Veterans Affairs, Department of Defense)



eHealth Exchange point-to-point connections were decommissioned during the VITL platform transition. eHealth Exchange policy requires any new connections be through the Hub model.

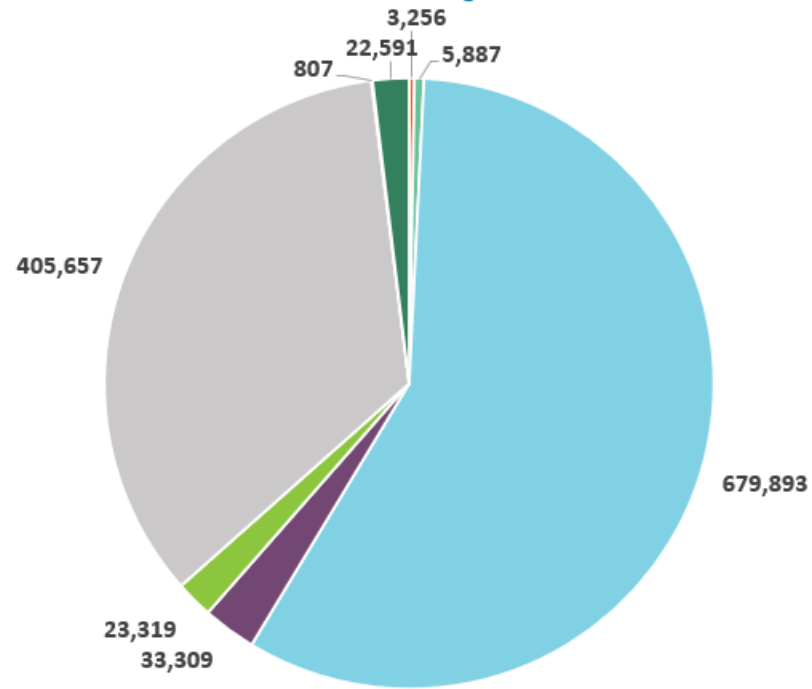
VITL is working on technical and process planning for delivering data via the eHealth Exchange Hub.

# Results Delivery by Result Type



Number of providers receiving results = 592

## Results Delivery by Receiving Organization Type October 2021 - September 2022



- Designated Agency: 3,256
- Hospital: 33,309
- Long-Term Care: 807

- Federal/State Agency: 5,887
- Hospital Owned Practice: 23,319
- Rural Health Center: 22,591

- Federally Qualified Health Center: 679,893
- Independent Practice: 405,657

# 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