

# **VITL Update**

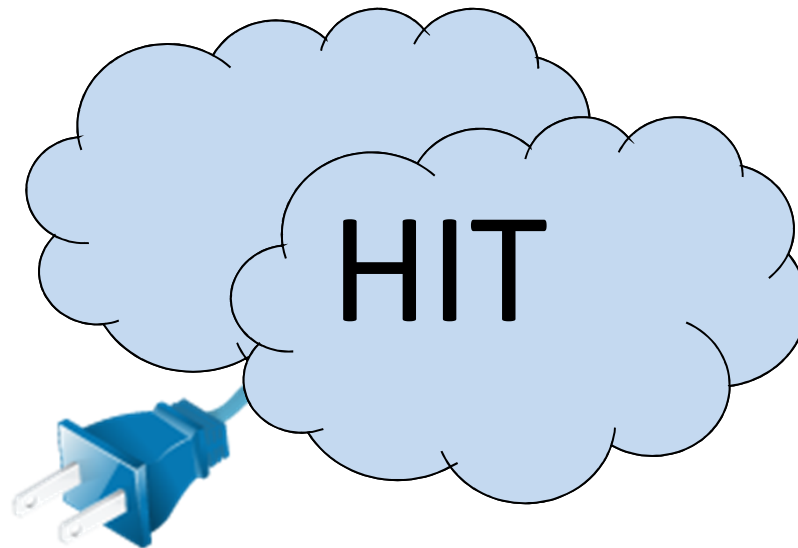
Senate Health & Welfare Committee

February 7, 2013

Presenter: John K. Evans MHA, FACHE  
President/CEO



HIT = anything with a keyboard,  
screen, and plug...



**Medicaid  
Management  
Information  
Systems  
(MMIS)**

**Health  
Benefits  
Exchange  
(HBE)**

**Integrated  
Eligibility  
(IE)**

**Health  
Services  
Enterprise  
(HSE Platform)**

**Health  
Information  
Exchange /  
Blueprint IT  
(HIE/BP IT)**

# VISION FOR VITL

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- Develop and leverage the health information network for Vermont to:
  - Exchange health care information needed by providers and other organizations to improve the delivery of care
  - Support the clinical data reporting, measurement and performance requirements of current health reform initiatives: Blueprint & Accountable Care Organizations
  - Ensure alignment of VITL's resources and technology with emerging health care reform goals
  - Achieve financial sustainability by demonstrating value, quantifying value and seeking compensation for that value



# Overview

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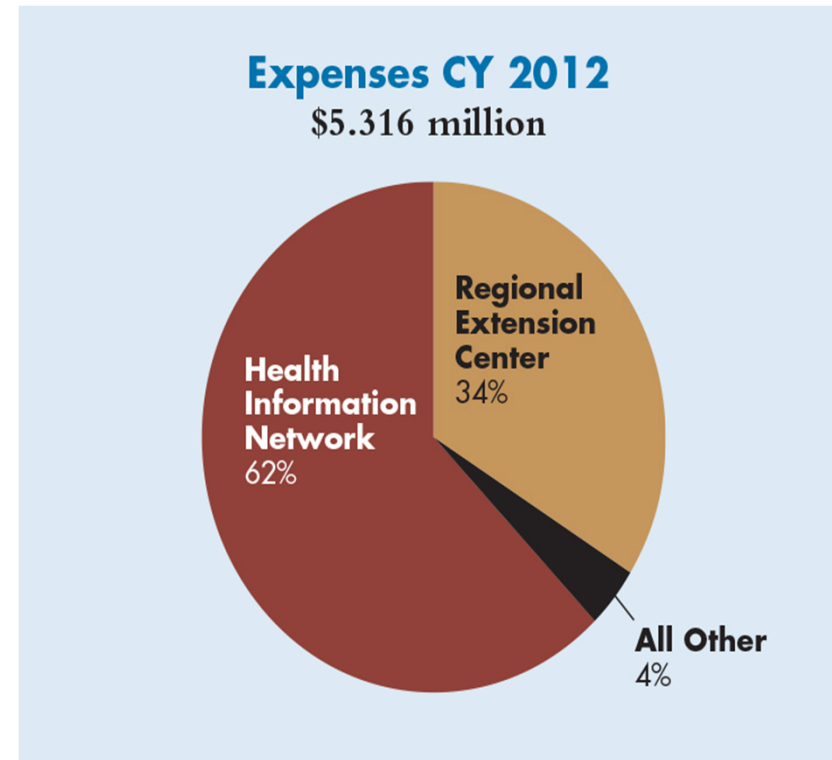
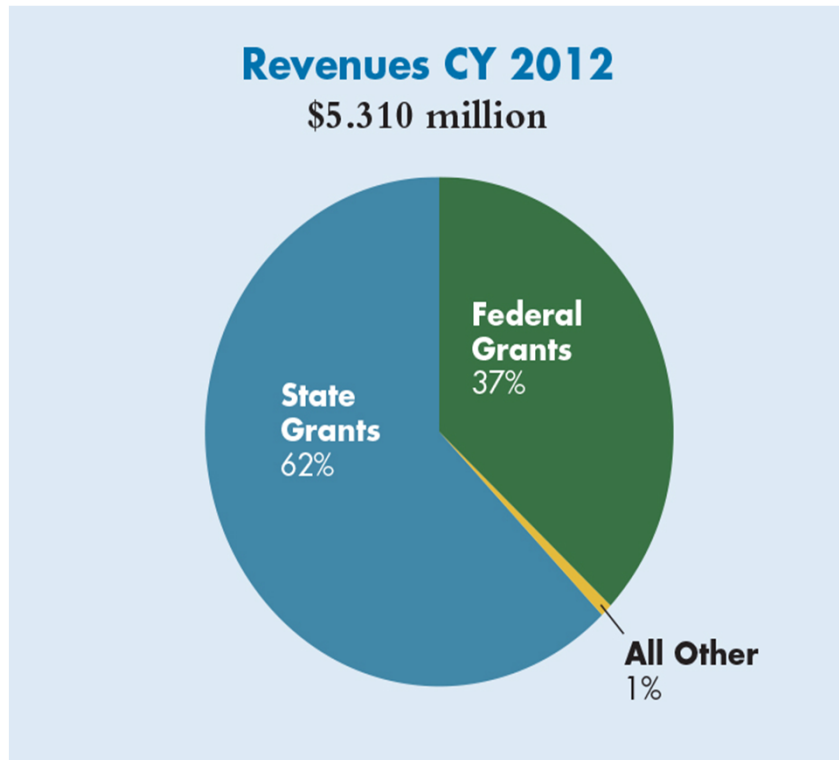
- 501c(3) not for-profit
- 12 member board
- Staff of 23
- Offices in Burlington and Montpelier
- Health Information Exchange network and Regional Extension Center for Vermont





# Calendar 2012 Revenues & Expenses

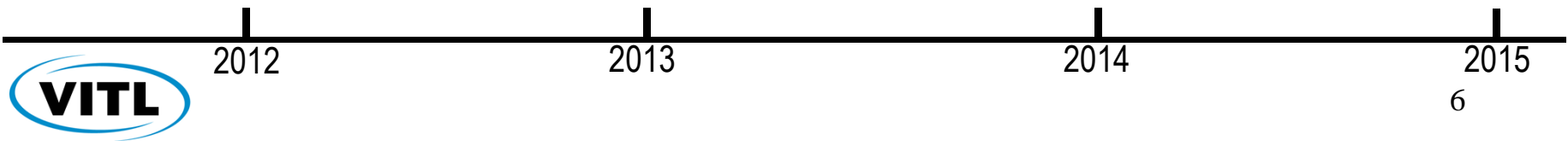
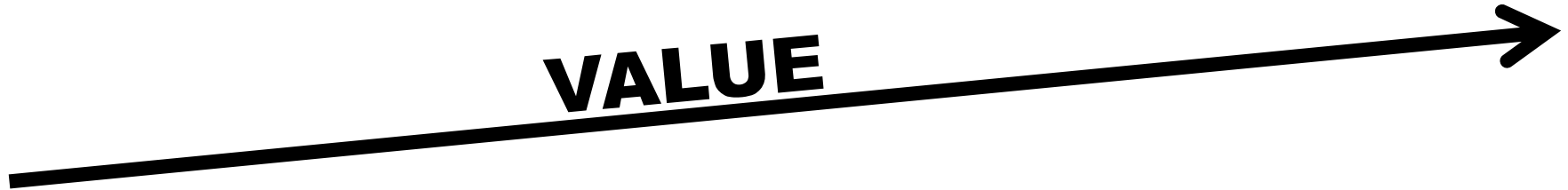
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**Minimum  
Data  
Set**

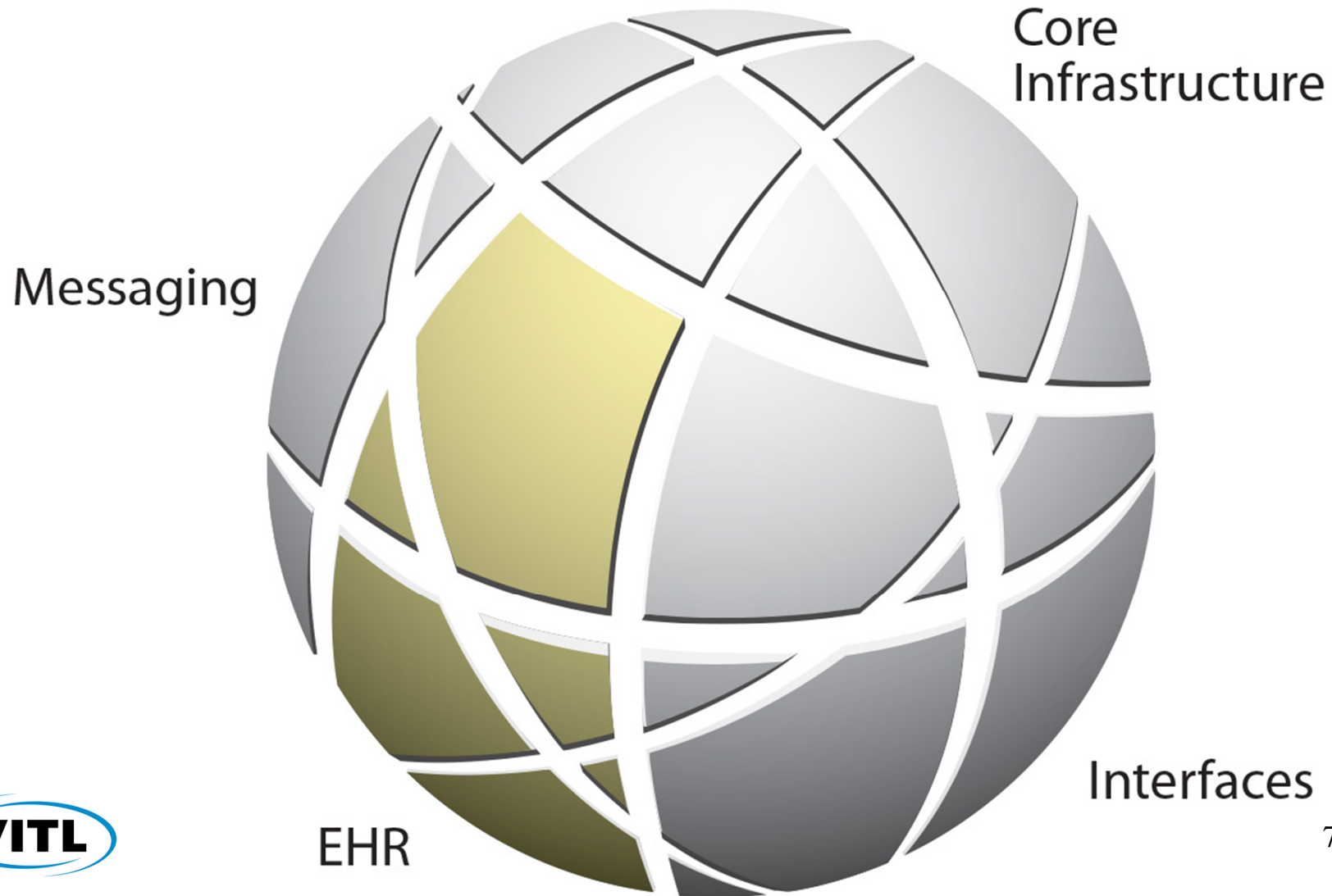
- Patient Demographics
- Lab Test Results
- Radiology Reports
- Clinical Summaries
- Medications
- Pathology Reports
- Radiology Images

**VALUE**

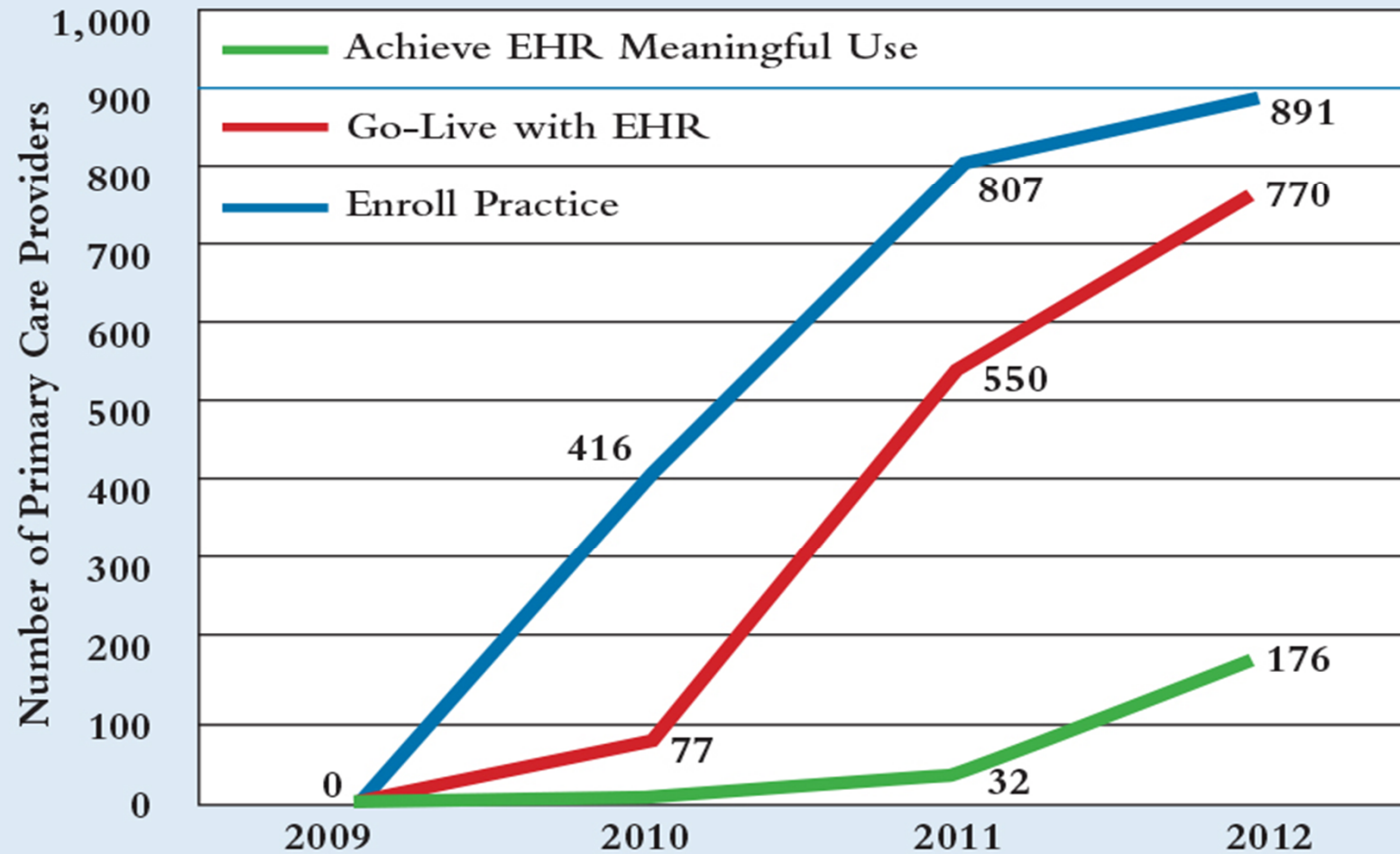


# Health Information Network: EHR Component

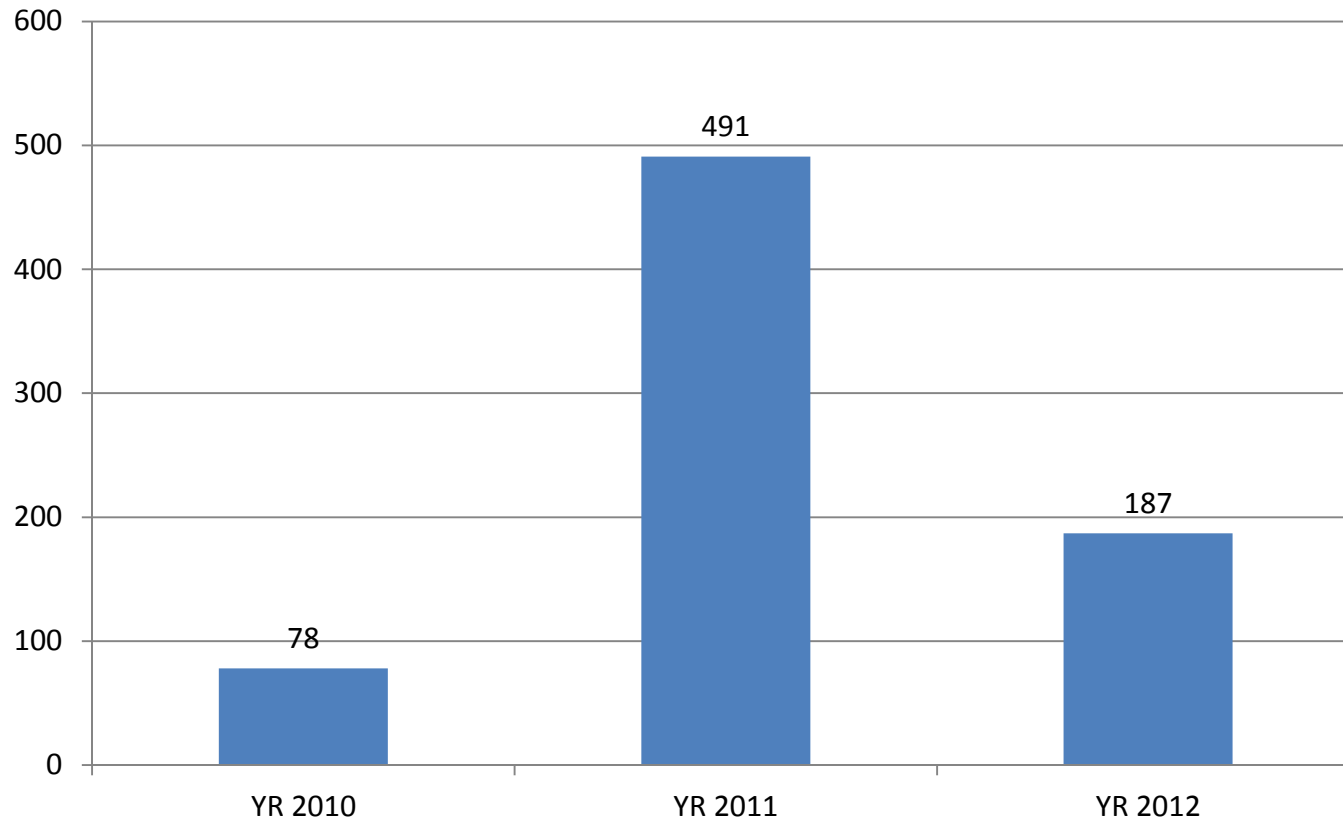
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## VITL's Regional Extension Center Achievements with Primary Care Providers



## Vermont Primary Care Provider (PCP) EHR Go Live by Year

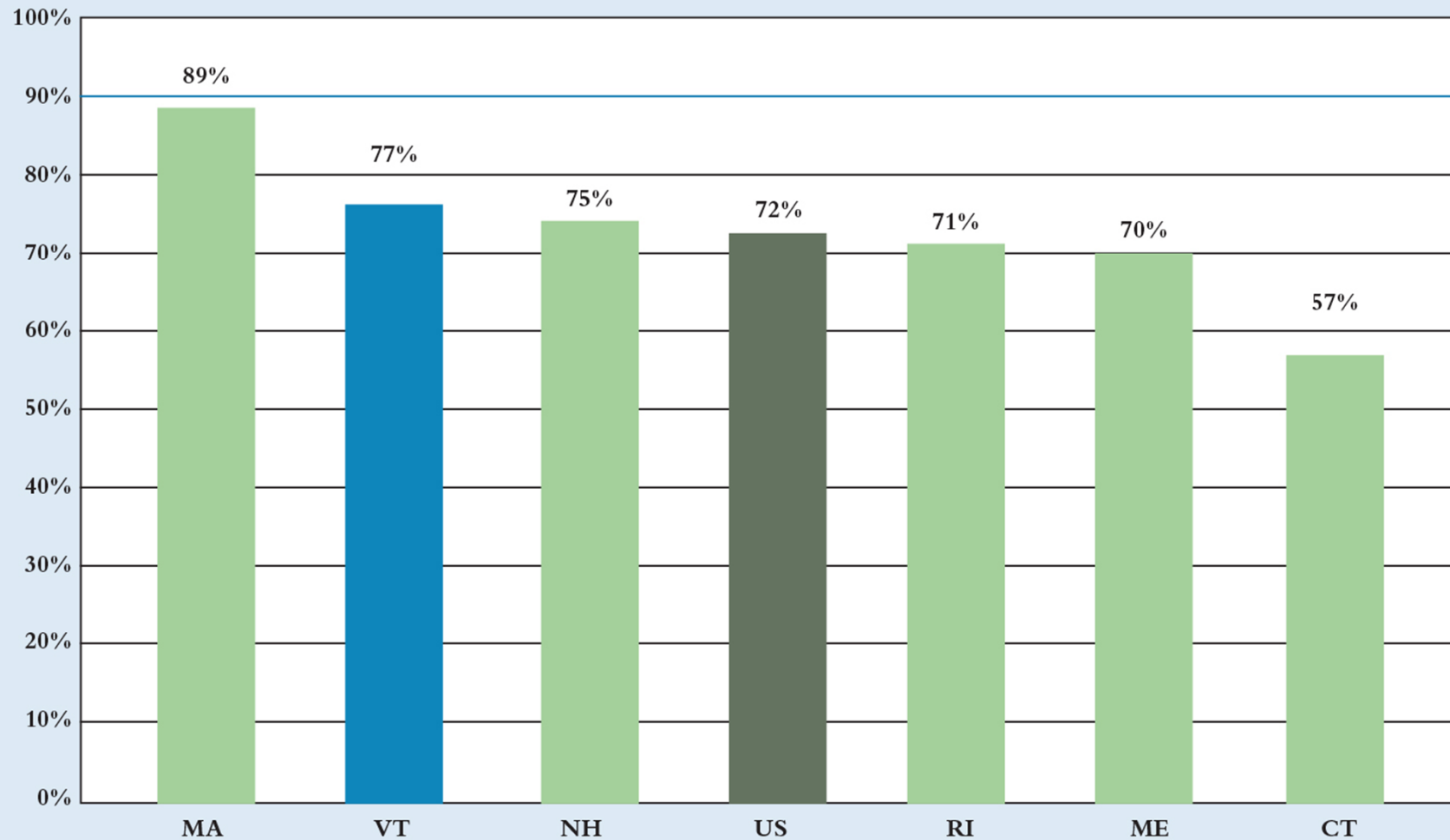


All PCP:  $756/991 = 76\%$

Using VITL for EHR Assistance PCP:  $776/909 = 85\%$



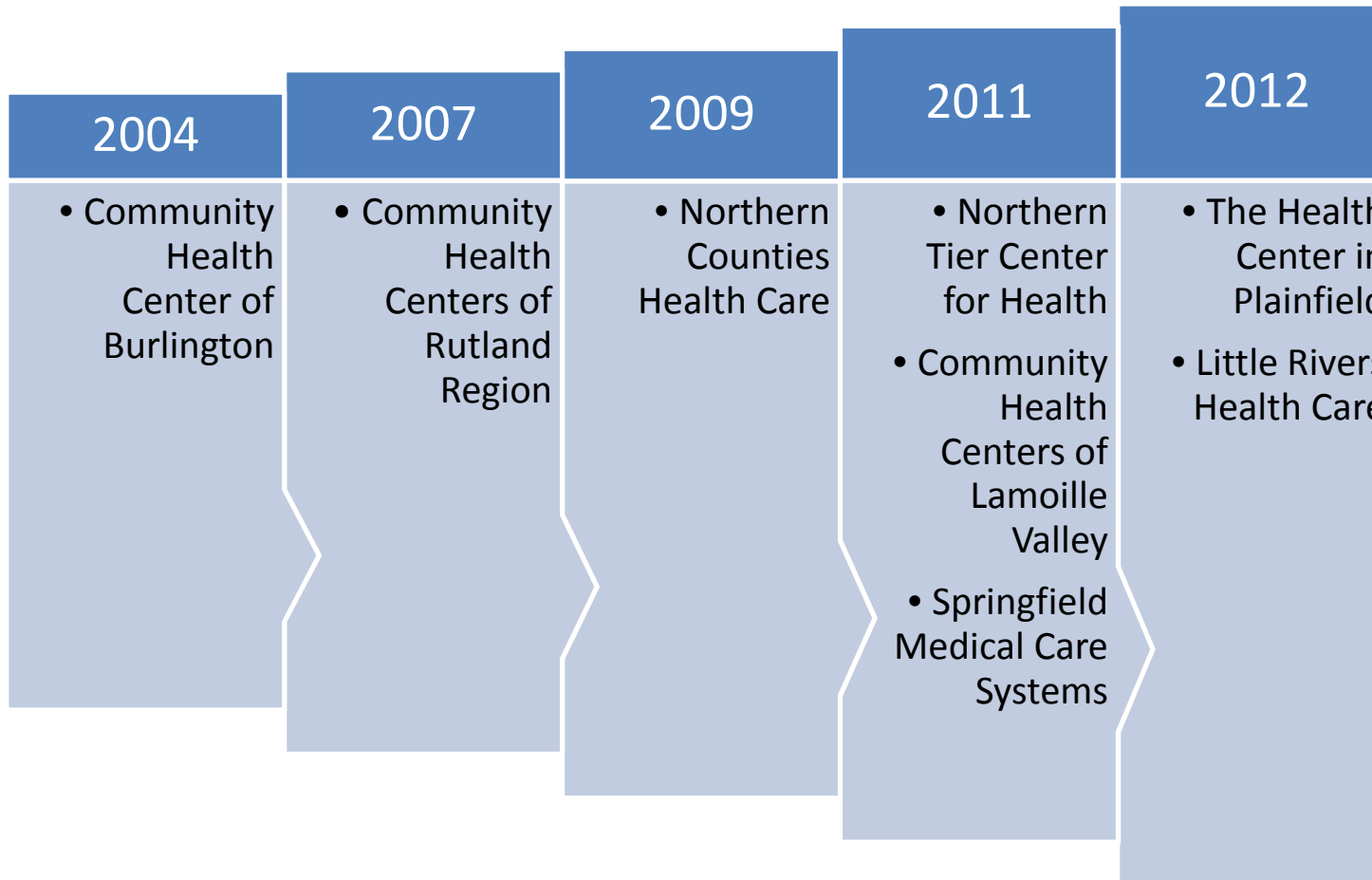
## Office-based Physicians Using EHRs in New England, December 2012



Source: CDC/NCHS, National Ambulatory Medical Care Survey, December 2012



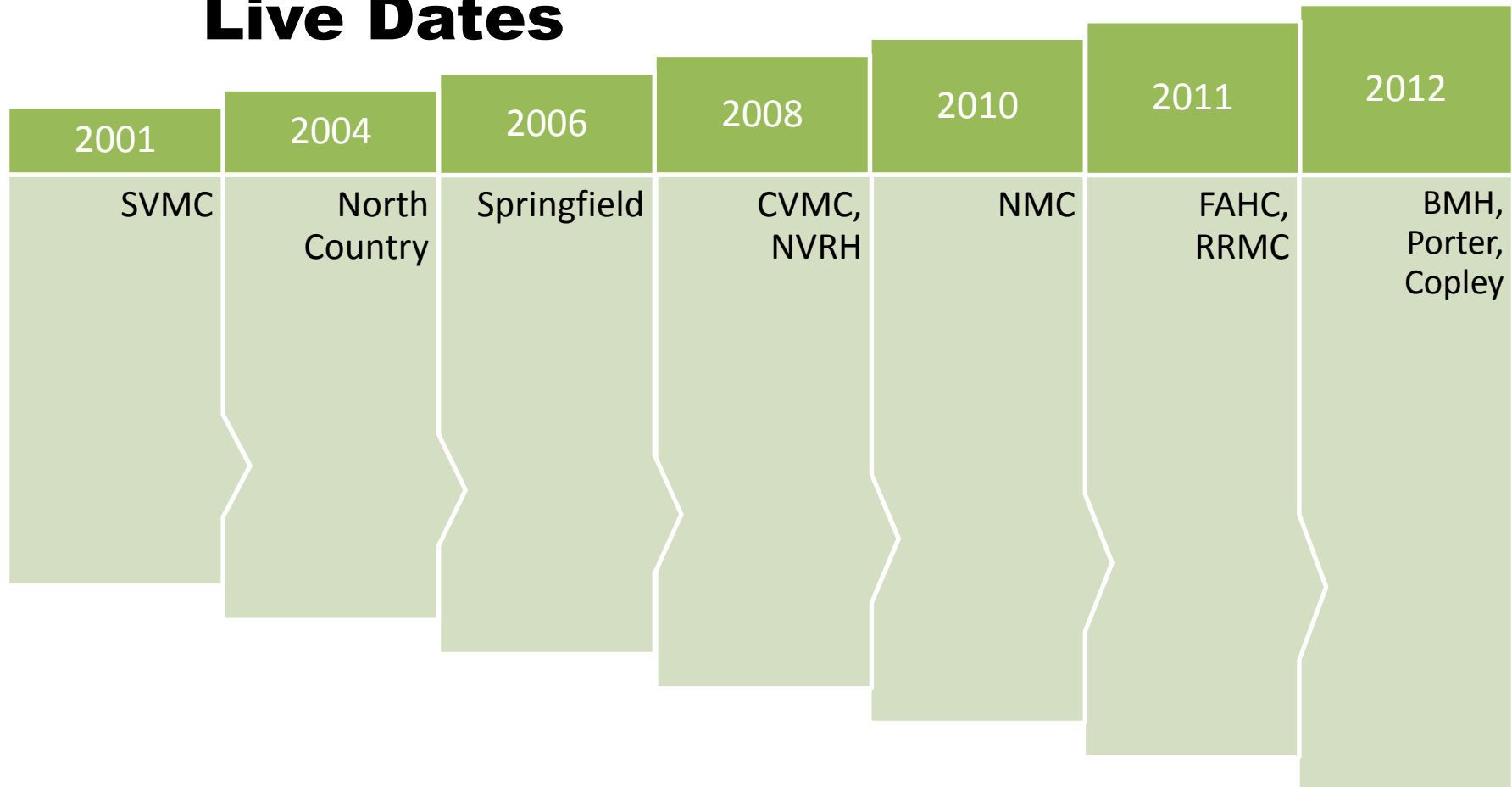
# FQHC EHR Go-Live Dates



Source: VITL vForce database



# Hospital Ambulatory EHR Go-Live Dates

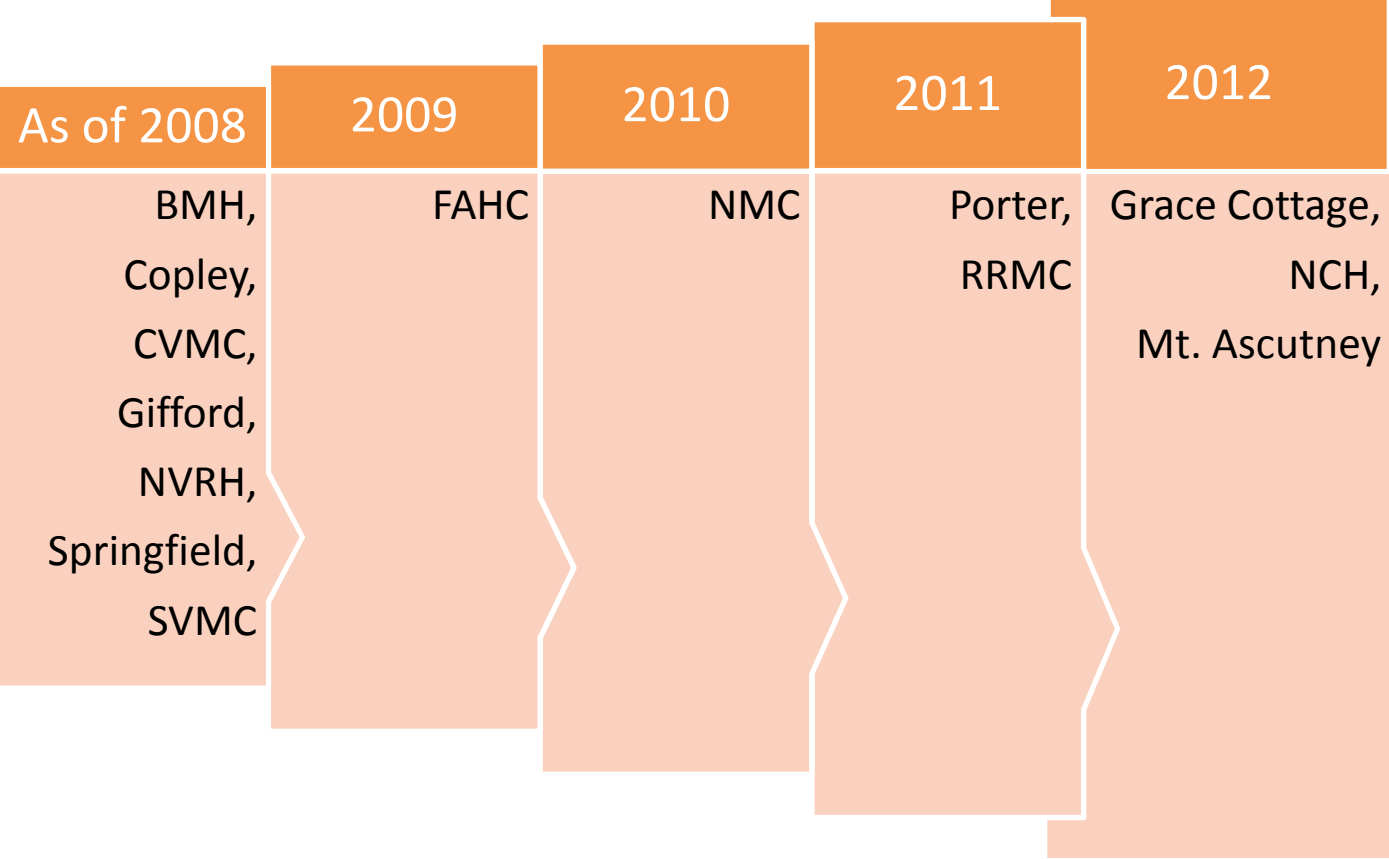


2013 Projected: Gifford, Grace Cottage, Mt. Ascutney





# Hospital Inpatient/HIS EHRs Go-Live Dates



**Minimum  
Data  
Set**

- Patient Demographics
- Lab Test Results
- Radiology Reports
- Clinical Summaries
- Medications
- Pathology Reports
- Radiology Images

**VALUE**

**EHR's**

- Primary Care
- Hospitals
- FQHCs
- Mental Health,  
Home Health,  
Long Term Care,  
Specialists, Other  
Providers

Key:

- Operational
- Anticipated



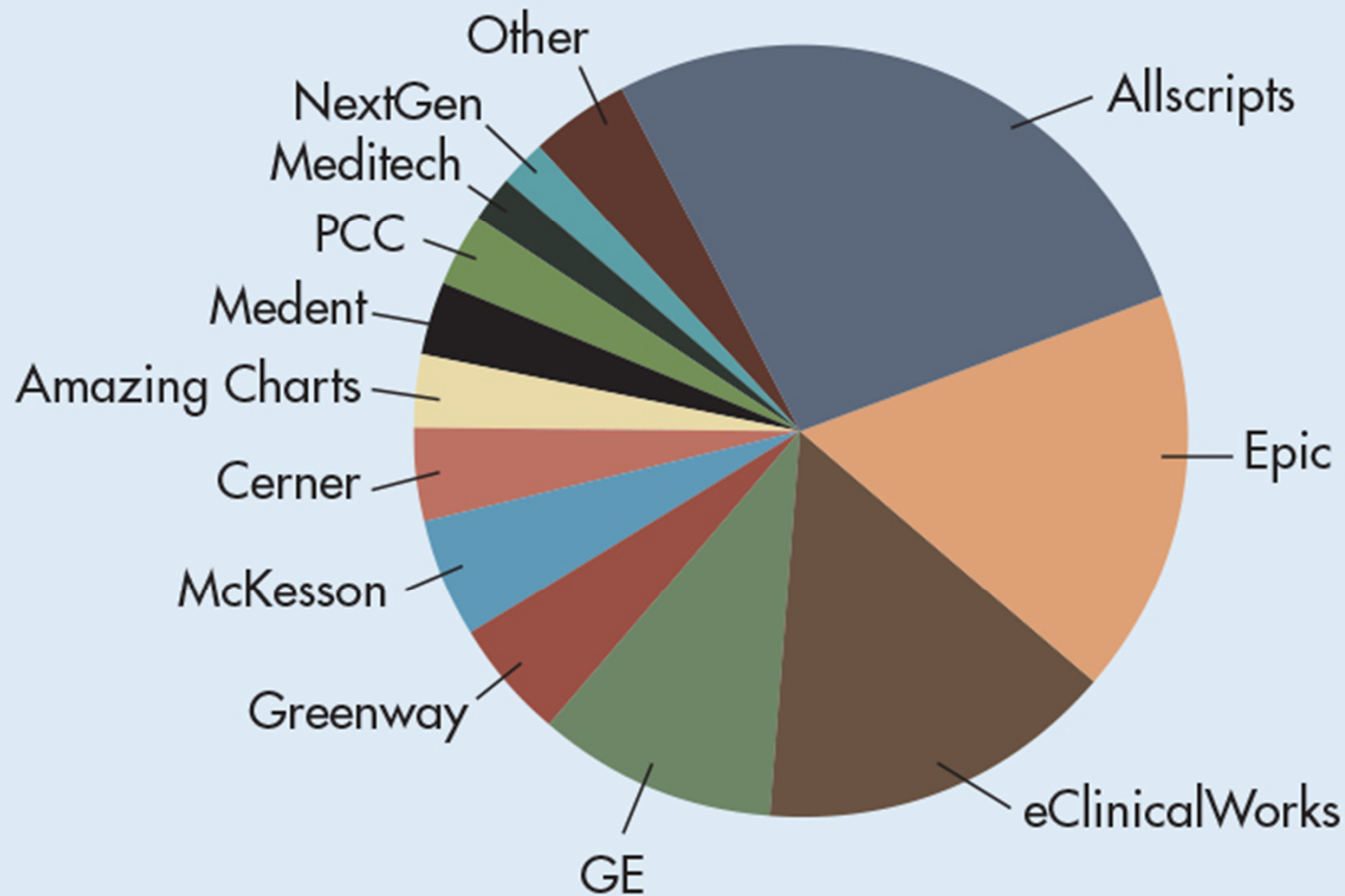
2012

2013

2014

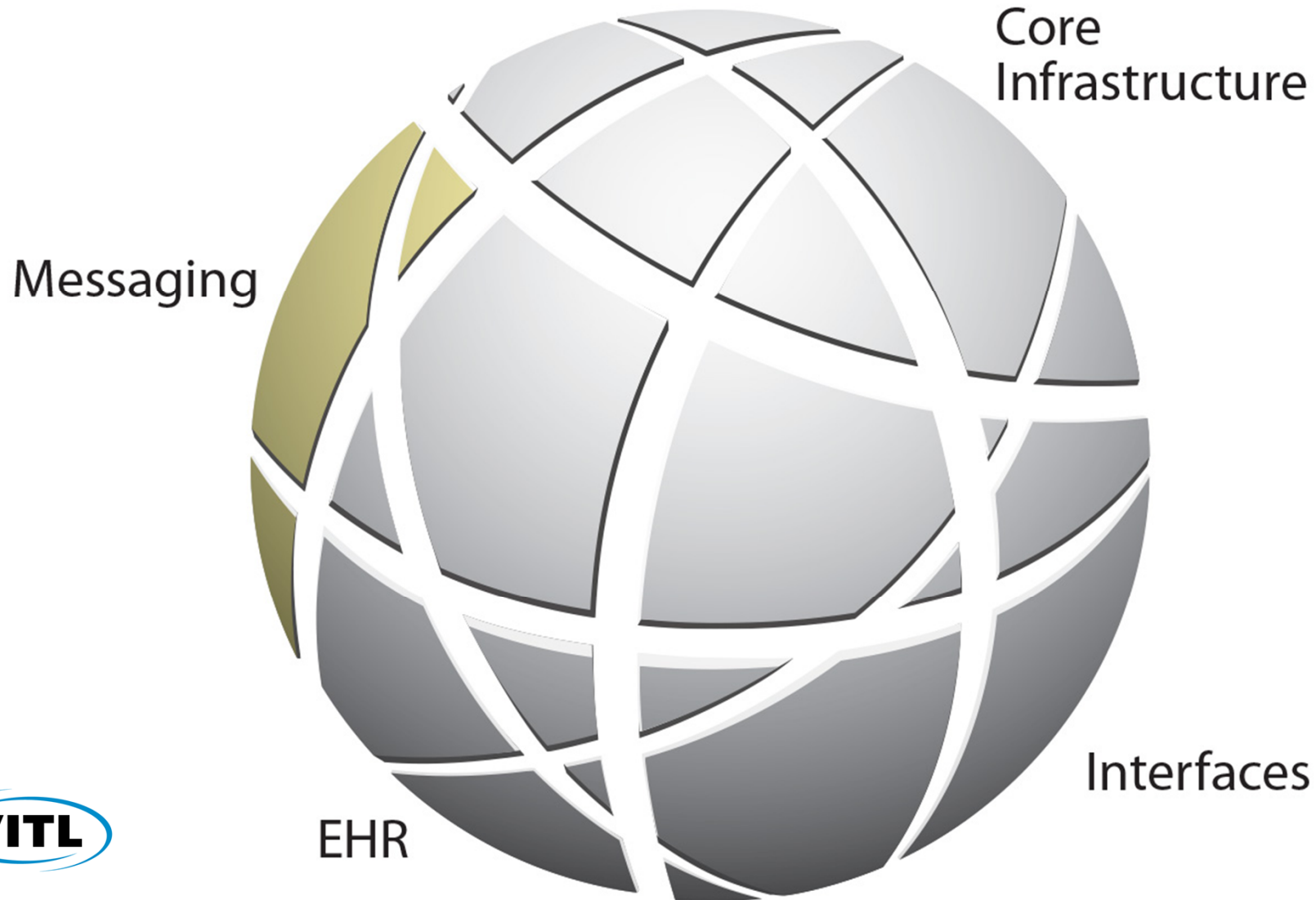
2015

# Primary Care EHR Installations in Vermont



# Health Information Network: Messaging Component

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# VITL Direct (as of Jan 2013)

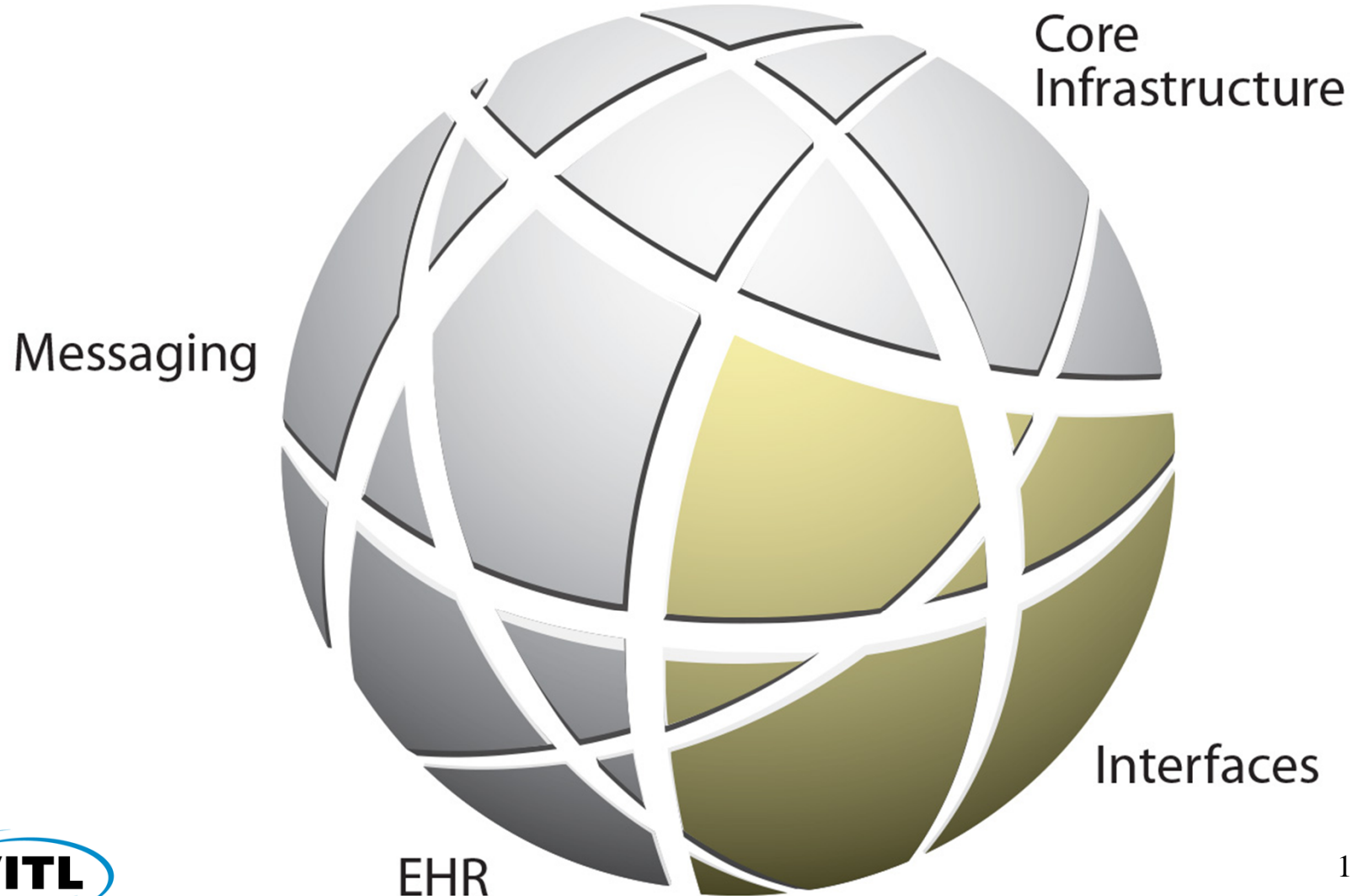
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- 38 organizations
  - Primary care, dentists, eye care, mental health, home health
- 72 users
- Opportunities
  - State of Vermont to provide service to Blueprint Community Health Teams
  - Opportunities for “packaging” with other capacities to improve coordination of care between providers
  - Vermont hospitals to expand service in Hospital areas
  - Vermont Assembly of Home Health and Hospice Agencies

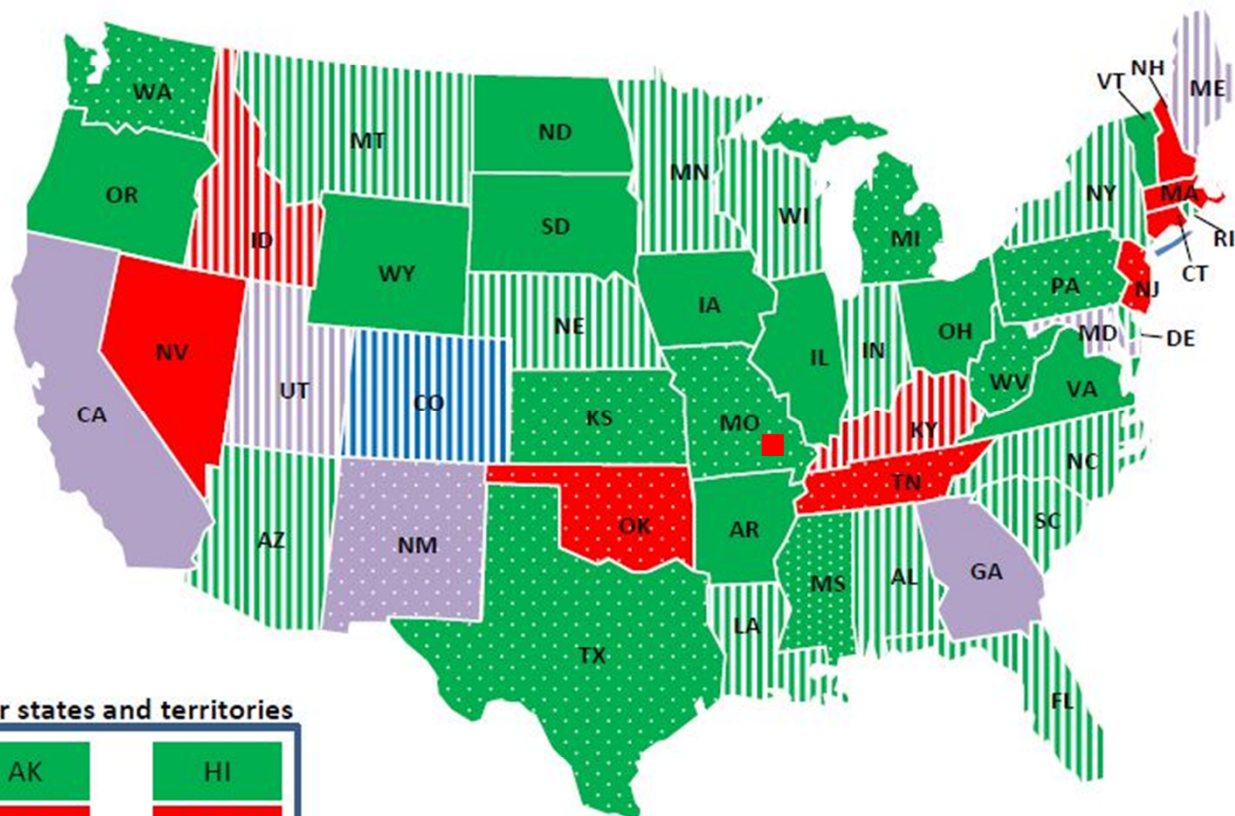


# Health Information Network: Interface Component

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# Exchange Status as of Q3 2012



### Directed Exchange Color Legend

- Directed exchange mechanisms broadly available
- Directed exchange mechanisms available in regions
- Directed exchange mechanisms being piloted
- Directed exchange mechanisms not available

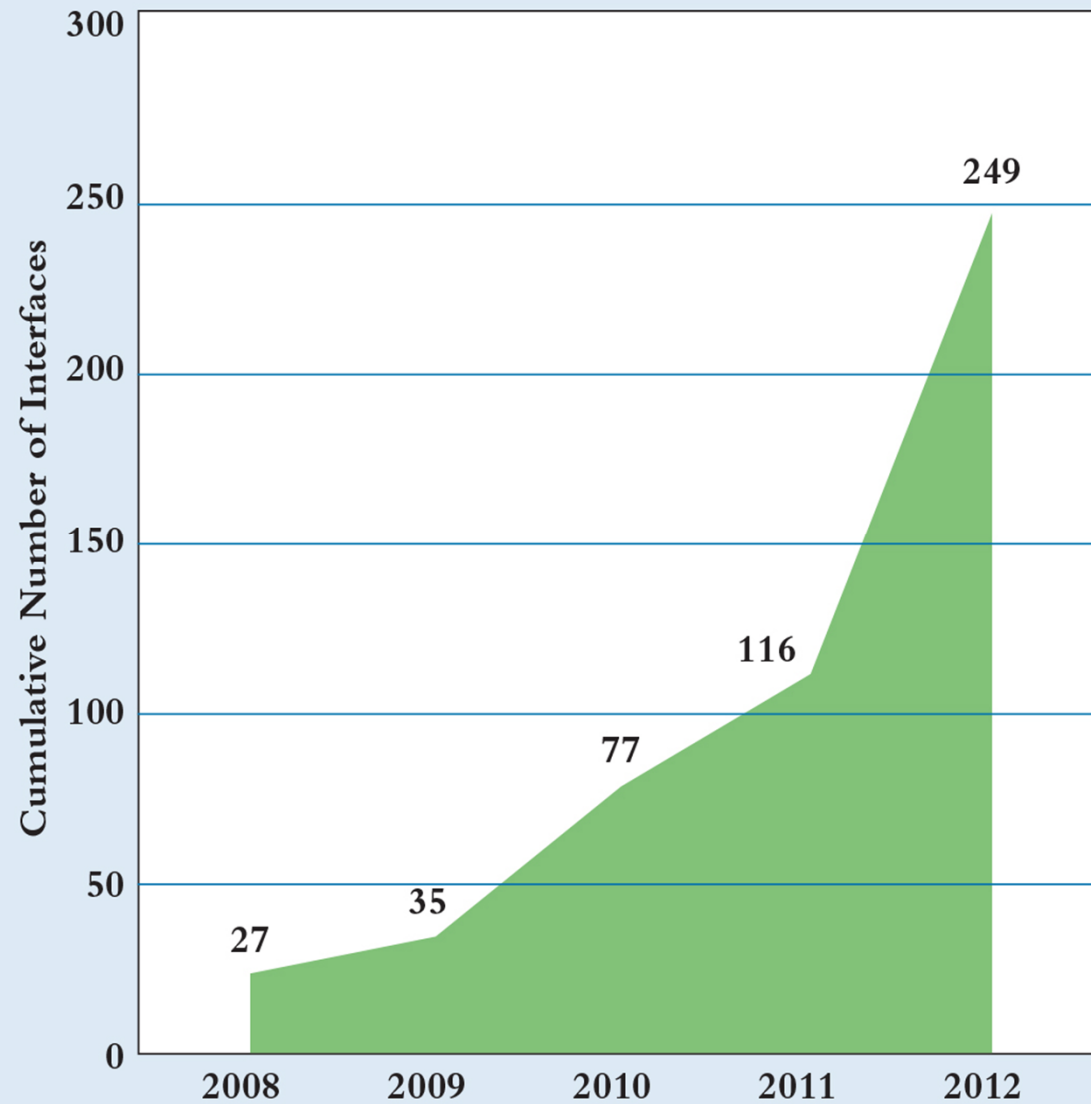
### Query-Based Exchange Pattern Legend

- Query-based exchange mechanisms broadly available
- Query-based exchange mechanisms available in regions

### Other states and territories

AK	HI
AS	CNMI
DC	PR
GU	USVI

## Interfaces Implemented Through 2012



*Note: Sites may have multiple interfaces.*





## Hospital Interface Status

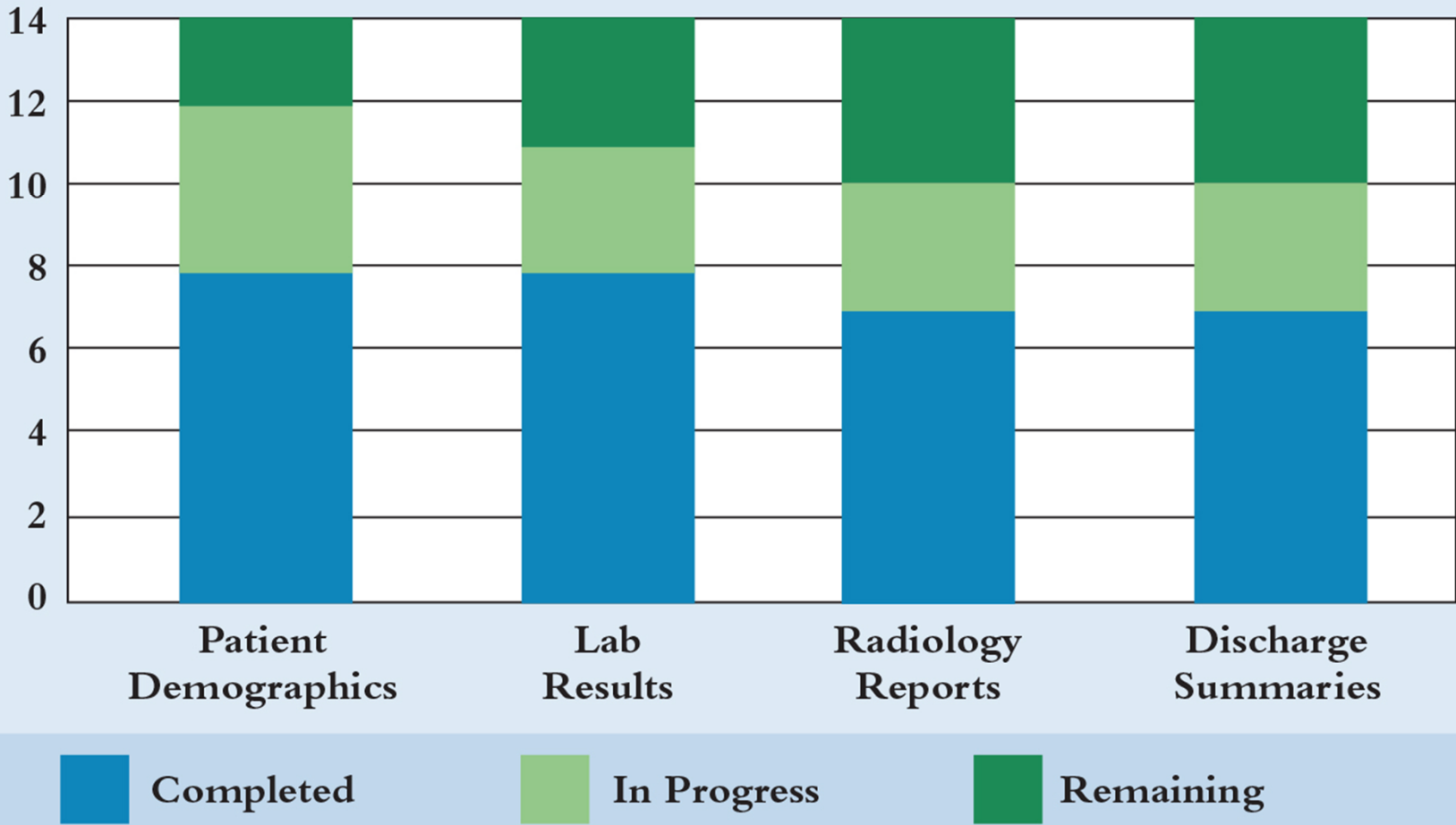
*As of January 15, 2013*

Vermont Hospitals	Patient Demographics	Lab Test Results	Radiology Reports	Discharge Summaries
Brattleboro Memorial Hospital	✔	✔	✔	✔
Copley Hospital	✔	✔	✔	✔
Central Vermont Medical Center	✔	✔	✔	✔
Fletcher Allen Health Care	✔	*	●	●
Gifford Medical Center	✔	✔	✔	✔
Grace Cottage Hospital	▶	▶	▶	▶
Mount Ascutney Hospital	▶	▶	▶	▶
North Country Hospital	▶	▶	▶	▶
Northwestern Medical Center	✔	✔	●	●
Northeastern Vermont Regional Hospital	●	●	●	●
Porter Medical Center	✔	✔	✔	✔
Rutland Regional Medical Center	✔	✔	✔	✔
Springfield Hospital	✔	✔	✔	✔
Southwestern Vermont Medical Center	●	*	●	●
<b>Other Hospitals</b>				
Dartmouth Hitchcock Medical Center	▶	▶	●	●

- ✔
**Complete** — *The interface is in production, and contributing data to the health information network.*
- \*
**Pre** — *The interface is in production in a pre-Medcity format, but data is not being stored.*
- ▶
**In Progress** — *The interface is being developed. It may be at any stage from the pre-work required of the organization, through the analysis, build, and testing prior to being moved to production.*
- **Hold** — *The organization is not actively working on the interface.*

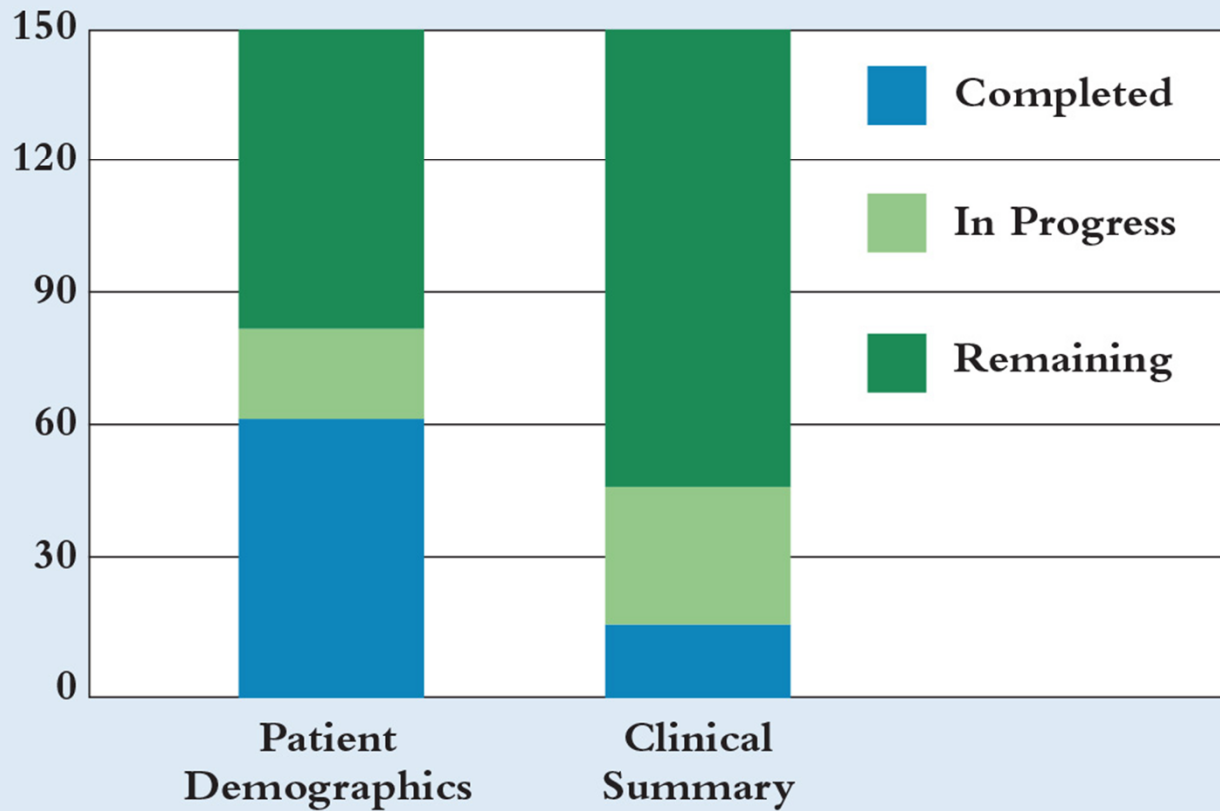


# Vermont Hospital Interface Development



# Primary Care Practice Interface Development

*(for sending data to the health information network)*



*Note: Among 150 primary care practices identified as Blueprint for Health participants*



**Minimum Data Set**

- Patient Demographics
- Lab Test Results
- Radiology Reports
- Clinical Summaries
- Medications
- Pathology Reports
- Radiology Images

**VALUE**

**EHR's**

- Primary Care
- Hospitals
- FQHCs
- Mental Health, Home Health, Long Term Care, Specialists, Other Providers

**Messaging**

- 66 Current Users
- Other Providers

**Interfacing**

- Hospitals
- Primary Care
- FQHCs
- Mental Health Facilities, Other
- Public Health
- Other HIE

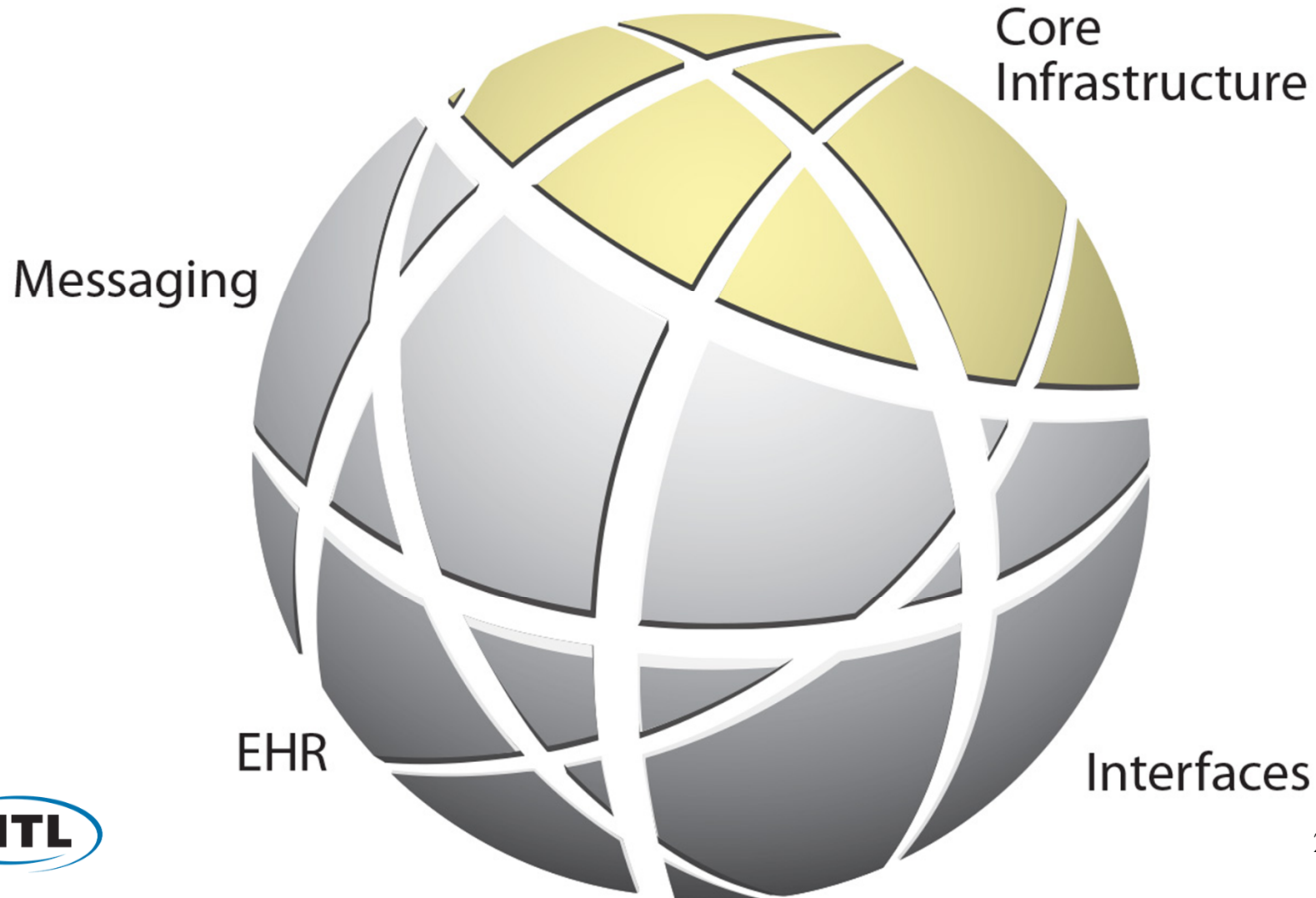
Key:

- Operational
- In Progress
- Anticipated

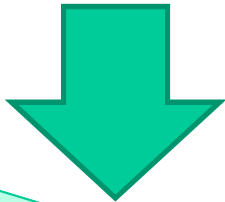


# Health Information Network: Core Infrastructure

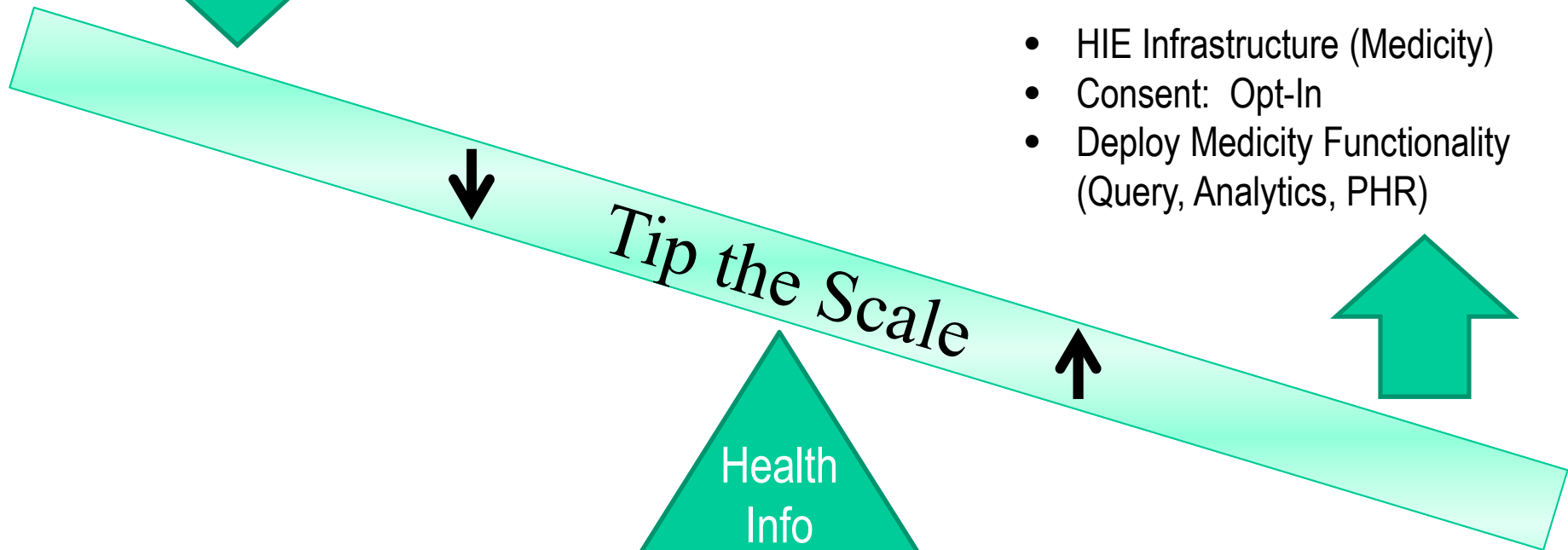
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- PCP EHR Adoption
- Hospital EHR Adoption
- FQHC EHR Adoption
- Interface Development (ADT/Lab)
- Additional Interfaces (CCD)



- Point of Care Decision Making
- Support Health Reform
- Blueprint
- ACO Development



- HIE Infrastructure (Medicity)
- Consent: Opt-In
- Deploy Medicity Functionality (Query, Analytics, PHR)






# Medicity Infrastructure

- Medicity
  - HIE company since 2000
  - State HIEs: 9
  - Regional HIEs: 12
  - Enterprise HIEs: 91

- Capabilities and Functions

- |   |  |   |  |
|---|--|---|--|
|    | Clinical Data repository                                 |    | Medication History                             |
|    | Consent Management                                       |    | Direct (secure messaging)                      |
|   | Master Person Index<br>(within and across organizations) |   | Transitions in Care module<br>(in development) |
|  | Record Locator Service                                   |  | Patient Portal                                 |
|  | Provider Portal/Query functionality                      |  | Secure Network                                 |
|  | Referral Management                                      |  | Disaster Recovery                              |



Key:  Operational  In Progress  
 Not Scheduled

**Minimum Data Set**

- Patient Demographics
- Lab Test Results
- Radiology Reports
- Clinical Summaries
- Medications
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- Radiology Images

**VALUE**

**EHR's**

- Primary Care
- Hospitals
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**Messaging**

- 66 Current Users
- Other Providers

**Interfacing**

- Hospitals
- Primary Care
- FQHCs
- Mental Health Facilities, Other
- Public Health
- Other HIE

- Transitions in Care Module
- Patient Portal

- Medication History

**Core Infrastructure**

- Master Person Index
- Clinical Data Repository
- Disaster Recovery
- VITL Direct

- Consent Management
- Query Functionality/ Provider Portal
- Referral Management

Key:

- Operational
- In Progress
- Anticipated

2012

2013

2014

2015



# Health Information Network: All Components

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# 2013 – 2015 Priorities

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- Accelerate Blueprint initiatives
- Assist Primary Care Providers achieve Meaningful Use: finish Stage 1, prepare for Stages 2 & 3
- Assist non-Primary Care Providers with EHR selection, adoption & implementation: mental health, home health, long term care, specialists, others
- Continue deploying the core infrastructure
- Accelerate Interfacing:
  - Hospitals
  - Ambulatory practices
  - FQHCs
  - Non-primary care providers
- Achieve Minimum Data Set level value
- Support ACO development and other applicable Health Reform initiatives
- Implement Consent Policy





**Questions?**

