VITL Presentation to the House Health Care Committee February 4, 2016

John K. Evans, President & CEO

Agenda

- Calendar Year 2015 Accomplishments
- Looking Ahead to the Remainder of FY2016 and FY2017
- Summary and Wrap-up

2015 Summary

- 48,000 Vermont patients have provided consent for treating providers who use VITLAccess to view their statewide medical information.
- 2,000 Vermont providers have used VITLAccess to obtain information on 23,000 of the 48,000 patients that have provided consent.
- Vermont's accountable care organizations now use data from the VHIE to perform analytics, and to track progress of their performance measures for over 115,000 beneficiaries.
- The Blueprint for Health is improving the quality and effectiveness of care delivered at patient centered medical homes using data supplied by the VHIE.
- As a result of working with VITL, Vermont Care Partners (16 agencies providing services for developmental disabilities, mental health conditions and substance use disorders) has improved the quality of data collected by their member agencies.

2015 Summary (continued)

- The Vermont Department of Health is receiving electronic immunization data from 121 (71 new in 2015) providers across the state using VITL's new data management and reporting capabilities.
- Network security is being enhanced to meet the standards of the National Institute of Standards and Technology (NIST), the highest level of security requirements that exist in the health care industry.
- The quality of clinical data in the VHIE is being continuously improved at the source, at the network level, and by providing data quality score cards to contributing organizations.

What are the Benefits to Patients?

During December, VITL conducted video interviews with key stakeholders and asked them a series of questions.

Here's what they said when asked how the work that VITL does benefits patients in Vermont.





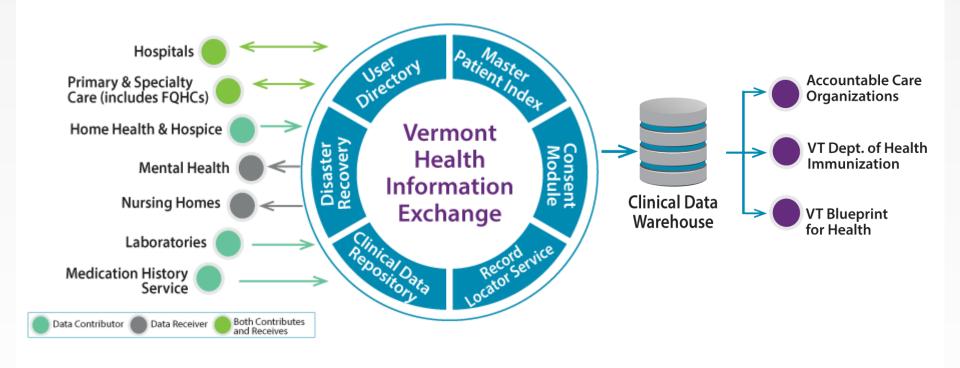




2015 Review

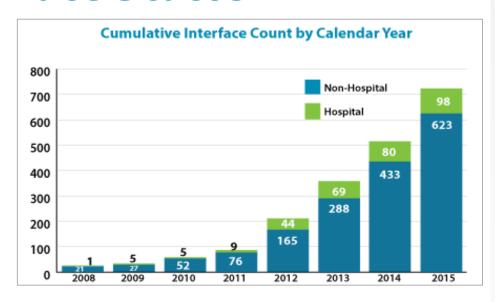
- HIE Operations and Expansion
- Clinical Data Management Services
- Point of Care Services
- Data Quality Services
- Best Practices

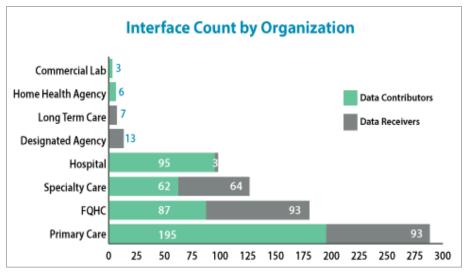
VHIE Operational Summary



VHIE Interface Status

- All VT hospitals connected and providing clinical data.
- All FQHC's are connected.
- 120 other primary and specialty care.
- 5 VNAs and 3 labs sending data.
- 121 connections to VDH Immunization Registry
- Care Summary (CCD) from three hospitals (including UVM MC)





Message Type	# Messages (CY 2015)
Admit / Discharge / Transfer	44,705,638
Lab / Path Results / Radiology / Transcribed Reports	14,127,842
Continuity of Care	1,013,828
Immunizations	539,051
Lab Orders	23,235
Grand Total	60,409,594

Hospital Interface Status

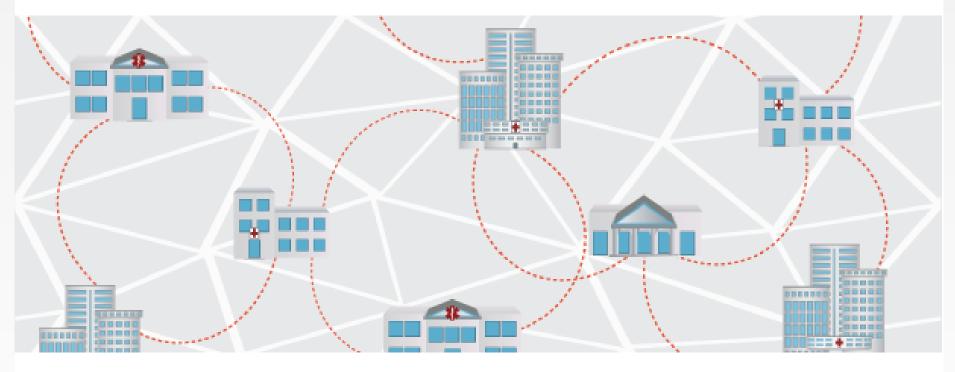
(New in 2015 interfaces are shown in orange)

	Interfaces						
Vormant Hamitale	Patient Demogr	Laboratory Results	Results	Panscribed	Pathology Reports	Immuniza.	Continuity of Care Document
Vermont Hospitals	7 0	~ &	₹	*		_ ~	/ 0 &
Brattleboro Memorial Hospital		•	•		•		
Central Vermont Medical Center	•	•	•	•	•	•	
Copley Hospital	•	•	•	•	•	•	
Gifford Medical Center	•	•	•	•	•	•	
Grace Cottage Hospital		•	•	•	•	•	•
Mount Ascutney Hospital	•	•	•	•	•	•	•
North Country Hospital	•	•	•	•	•		
Northeastern VT Reg. Hospital	•	•	•	•		•	
Northwestern Medical Center	•	•	•	•	•	•	
Porter Medical Center	•	•	•	•	•	•	
Rutland Reg. Medical Center	•	•	•	•	•	•	
Southwestern VT Medical Center	•	•	•	•	•	•	
Springfield Hospital	•	•	•	•		•	
The UVM Medical Center	•	•	•	•	•	•	•
Regional Hospitals							
Cottage Hospital (Woodsville, NH)		•					
Dartmouth-Hitchcock Medical Ctr	•	•			•	•	
Samaritan Hospital (Troy, NY)		•					

Clinical Data Management Infrastructure: 2015 Accomplishments

- The VHIE is designed for point of care decision making.
- Health care reform initiatives depend on clinical data for analytics and population health management.
- The data warehouse was completed in 2015 to extract and organize data from the VHIE in a manner suitable for analytics.
- Current Uses:
 - OneCare Vermont population health
 - Community Health Accountable Care population health
 - Blueprint for Health Clinical Registry
 - Vermont Department of Health Immunization Registry

Point of Care Services



Provider Portal (VITLAccess)

Event Notification (PatientPing)

Patient / Provider Texting (Pilot)

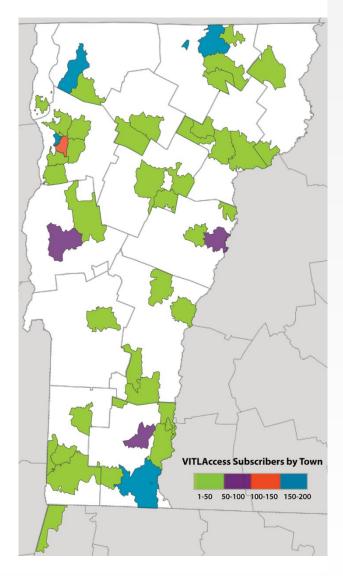
Secure Provider Communications (VITLDirect)

Health IT Consulting



VITLAccess: 2015 Status

VITLAccess Subscriber Statistics:	
Number of healthcare locations	100
Number of authorized users	1,932
Number of patient data queries performed	162,359
Number of data elements per query	6.9
Number of patient data queries per user	84
Consumer Consent Statistics:	
Percent of consumers who have given consent	96.0%
Percent of consumers who have declined to give their consent	4.0%



Lamoille County Mental Health

In this video, Lamoille County Mental Health staff describe how they use VITLAccess to improve services for their clients.





Point of Care Services: 2015 Activities

Event Notification Service PatientPing

- Access to automatic notifications to all members of a care team for transitions of care.
- Provided in partnership with PatientPing, Inc.
 - VITL provides ADT data feed (with consent) to PatientPing.
 - PatientPing offers subscription based services to providers.
- First year subscriptions are subsidized through SIM.

Patient-Provider Texting Negotiations underway

- Negotiations underway with a Vermont based patient-toprovider texting service.
- VITL would generate business leads for the services provider.
- Service provider would contract separately with providers.
- Pilot program is underway in Vermont



VITLDirect: 2015 Status

VITLDirect Subscriber StatisticsNumber of organizations using VITLDirect9Number of VITLDirect user IDs79

Current Subscriber Organizations:

- Northeastern Vermont Regional Hospital
- Northwest Medical Center
- Southwestern Vermont Medical Center
- The University of Vermont Medical Center Post-Acute Organizations
 - Burlington Health and Rehab
 - Green Mountain Nursing Home
 - Vermont Department of Corrections
 - Wake Robin



Health IT Consulting: 2015 Activities

- General Health IT Consulting:
 - Technical solution consulting
 - Security Risk Assessment
 - Workflow assessments
- Meaningful Use consulting for eligible professionals: MU 2
 - Included eligible professionals at DA's
- Source data quality consulting:
 - VCN data quality project
 - Blueprint Sprint data quality projects
 - ACO data gap remediation

"We were almost paralyzed by the huge task of getting ready for meaningful use. VITL helped us break the process down into manageable and understandable steps."

Karen Martell, Manager of Health Information and Billing, NCSS



Data Quality Services: 2015 Activities

- Data Quality at the Source
 - The Vermont Care Network project established a foundation for good data quality at member organizations.
 - VITL and the Blueprint for Health continued their collaboration to improve data quality at primary care locations across the state.
 - The ACO data quality project ensured that data are available for sufficient number of patients.
- Data Quality In the Network
 - Clinical data is extracted from Continuity of Care Documents to fulfill ACO performance measures.
- Data Quality Score Cards
 - Internal status reports have been developed to complete these projects.



- Complete
- Accurate
- Consistent

Best Practices: Ongoing Activities

- Cybersecurity Threat Detection and Intrusion Prevention
- Financial Cost Accounting Methodology / Evaluation
- DII Independent Technology Review
- Education and Outreach
 - Provider education programs for VITL services
 - VITL Communications (Newsletters, Annual Report, etc.)
 - VITL Summit '15
- Strengthening internal processes:
 - Quality Assurance
 - Architectural Review Board
 - Change Control Management
 - Project Management (PMBOK)



Why is VITL's Work Important?

During December, VITL conducted video interviews with key stakeholders and asked them a series of questions.

Here is what they said about why VITL's work is so important.





Supporting Health Care Reform in 2015

"VITL is an incredibly important strategic partner to the Blueprint program. The vision of a continuously improving health system depends on having timely and accurate data, and our teams have developed the ability to collect high quality data from medical record systems all across the state. VITL has helped to make this a reality in Vermont."

Craig Jones MD, Director
Vermont Blueprint for Health



VITL's Commitments in 2016

- Improve connectivity by adding new types of clinical and social data and new sources to the VHIE.
- Leverage clinical data management capabilities to support health care reform initiatives.
- Increasing VITLAccess use by current subscribers, while adding new subscribers.
- Improve the completeness, accuracy and consistency of data using terminology services and score cards.
- Measuring the impact of VITL's services on health care in Vermont.

2016 VHIE and Clinical Data Management

VHIE New Connectivity:

- Additional interfaces with existing contributors: EHR vendor changes and more CCD interfaces.
- Traditional interface connections with new providers: Admit Discharge and Transfer, laboratory results.
- Connection with new types of data: physiological data from home health agencies.
- eHealth Exchange Compliant (Sequoia Project) connections: Department of Veterans Affairs Medical System.

Clinical Data Management

- Specialized MPI for warehouse
- Data marts for CHAC and Healthfirst.
- Clinical data reporting and data quality Score cards for health care organizations.
- Specialized interface services:
 - Substance Abuse Data Filter for FQHCs
 - Connection to Vermont Chronic Care Initiative (VCCI)



2016 VITLAccess and Data Quality

VITLAccess:

- Increase VITLAccess users and queries per encounter:
 - Webinars
 - Sharing use cases
 - Promoting best practices
- Increase utilization in new health care segments:
 - Independent mental health providers
 - Dentistry
 - Pharmacy

Data Quality Services

- At the source:
 - VCN Stage 2
- In the network:
 - Deploy terminology services
- Score cards:
 - HCO data quality reporting
 - VDH Immunization data validation
 - Client specific reporting and analytics



VITL Impact Assessment

- Value Proposition: VITL's interventions (results delivery, consulting and point of care services) are improving quality and reducing costs.
- Objective: Quantify how healthcare expenditures, utilization, quality, and clinical outcomes are influenced by VITL's interventions.
- Methodology: Based on Blueprint study methodologies*
- Interventions and their impacts:
 - Resource repurposing
 - Staff collaboration
 - Consent to view
 - Lab results delivery
 - Data quality
 - Clinical Queries
- Planned Intervention Results: January June 2016
 - ❖ Jones, MD, et al. Vermont's community-oriented all-payer medical home model reduces expenditures and utilization while delivering high quality care. Pop Health Mgmt: 0:0 2015



Why is This Taking So Long?

- The current health care delivery system is fractured and operates in silos. It takes a long time to get all of the pieces working together.
- Health IT systems are not compatible and there is no commercial advantage for companies to interoperate.
- IT systems must continually evolve to meet changing needs and require continuous investment.
- Investments in new infrastructure drive ongoing operating costs (20-40% of initial cost in annual operating costs).
- Vermont is further along than most states and investments are starting to return real benefits.
- Even small improvements in cost-avoidance for unnecessary health care services will yield large savings down the road.

Why is This Taking So Long?

During December, VITL conducted video interviews with key stakeholders and asked them a series of questions.

Here is what they said about the reasons why health care reform is taking so long.



Questions?