

The Path Forward for Health Information Exchange in Vermont

Submitted to Vermont's House Health Care Committee by DVHA on January 11, 2018

Background

Section 15 of Act 73 of 2017 required the Secretaries of Administration and Human Services to submit the Health Information Technology Report to the General Assembly on November 15, 2017. HealthTech Solutions (HTS) conducted a state-wide study of Vermont's Health Information Exchange (HIE) and Technology landscape. The evaluation set forth five key findings:

1. Health information exchange is expensive and difficult for all states.
2. HIE systems are essential.
3. Vermont is not organized in a way that increases its chances for success.
4. Stakeholders lack confidence in VITL and do not feel the State has provided sufficient direction.
5. There is clear room for improvement.

Overall, the report illustrated stakeholder's parallel need for HIE and their desire to see it improved.

HTS recommended specific actions that Vermont should take to improve the situation. The Administration is committed to addressing the identified issues and following the recommendations in the evaluation report. Specifically, the State's approach to improvement involves (1) implementing a model for oversight, operations, and decision-making that makes the State's goals and needs clear and clearly tied to a credible HIT plan as required by statute, and (2) partnering with VITL to implement the report's recommendations, which assures that VITL focuses on its core mission. We believe this approach, guided by transparency, will create a better opportunity to capitalize on the promise of HIE in health care reform, best steward the taxpayer dollars invested in HIE, and maximize the value of the State's current HIE investments.

Improved Oversight, Operations and Decision-Making

The State has not set a clear direction for HIE in the past. In November, per the HTS report, the State established a Health Information Exchange (HIE) Steering Committee made up of 10 representatives from across the care continuum to help the State set clear goals. Specifically, the HIE Steering Committee is charged with developing a state-wide HIE Strategic Plan that will guide all State HIE investments and projects. The staff of DVHA's HIE Unit is responsible for working with partners to execute the strategic plan.

Once complete, the HIE Strategic Plan will be used to inform all work called for in DVHA's contracts with VITL and other HIE partners. Performance measures that support achievement of goals defined in the Strategic Plan will be tied to payment-based deliverables.¹

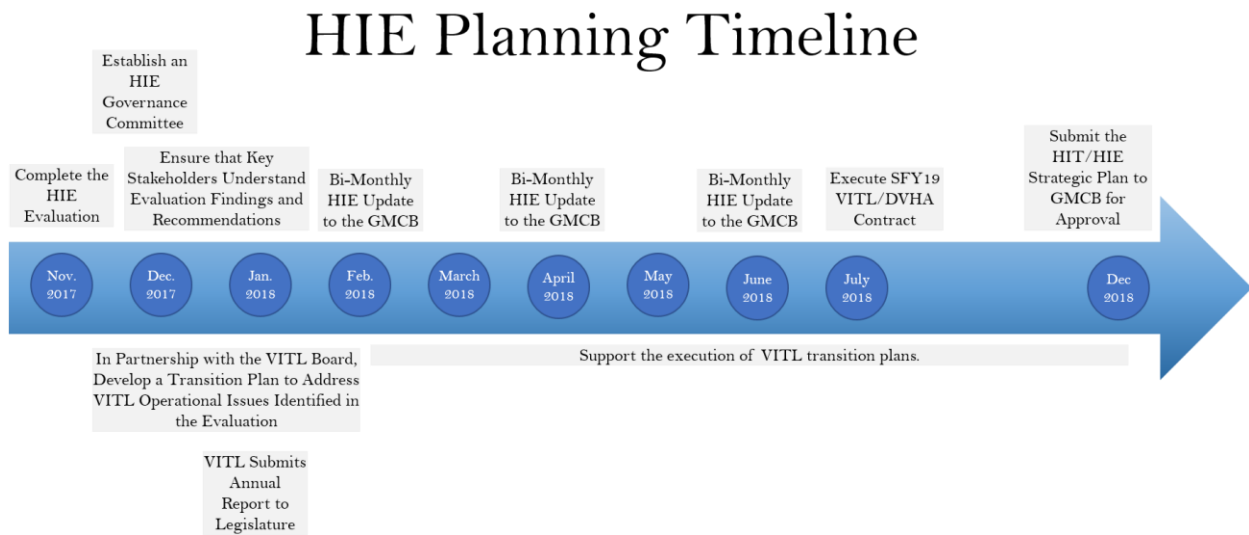
Pursuant to 18 V.S.A § 9375, the Green Mountain Care Board is responsible for the final approval of the State's HIE plan (named: Vermont's statewide Health Information Technology Plan). The Board has asked DVHA to provide bi-monthly updates on progress through the end of the fiscal year.

¹ DVHA transitioned its financial relationship with VITL from a grant to a deliverable based contract starting on July 1, 2017.

Achieving VITL’s Core Mission through Partnership

The Health Information Technology Report identified core capabilities that Vermont’s Health Information Exchange (VHIE), operated by VITL, must achieve to meet the basic exchange needs of Vermont’s healthcare system. The State intends to direct its investments toward establishing a solid, credible HIE foundation.

DVHA is working with the VITL Board Chair, select members of the VITL Board, and interim leadership of VITL to develop a plan to address the operational issues identified in the evaluation report, and create a clear, sustainable direction for our partnership. This group has been meeting weekly since December, and will continue to do so until a clear direction is agreed upon and documented.



Statutory Review

There are several State statutes that guide how HIE is funded, planned for and operated in Vermont.

| Current Statute | Considerations Given the HTS Report |
|--|---|
| 18 V.S.A. § 9351 and 18 V.S.A. § 9352 Health Information Technology Plan and VITL Annual Plan | <ul style="list-style-type: none"> Consider naming the HIE Steering Committee as the group responsible for annual updates to the strategic plan. Replace references to “Secretary of Administration” with the “HIE Steering Committee.” Potentially require VITL’s annual plan to be submitted as a part of the annual update to the Health Information Technology Plan to ensure compliance with statutory reporting obligations. Consider naming legislative committees charged with Health Information Technology Plan oversight. |
| 18 V.S.A. § 9352 VITL Board | <ul style="list-style-type: none"> Encourage the VITL Board to include HIE end users in membership. |
| 32 V.S.A. § 10301 Health-It Fund | <ul style="list-style-type: none"> Consider requiring that the use of Fund dollars must directly align with activities outlined in the Health Information Technology Plan. Contemplate extending the life of this Fund beyond one year and require that annual expenditures match average annual receipts to encourage sustainable budget planning. |