

To: House Committee on Health Care  
From: Jessa Barnard, Executive Director, Vermont Medical Society  
Date: April 25, 2019  
RE: Support for VHIE Policy Change to Opt-Out

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The Vermont Medical Society is the State's largest physician membership organization, representing approximately 2,000 physicians, physician assistants and medical students of all practice types and locations. **VMS supports the change in policy for Vermont's Health Information Exchange from patient "opt-in" to patient "opt-out,"** as recommended in the Act 187 Report prepared by the Department of Vermont Health Access.<sup>1</sup>

**VMS Supports the change to an opt-out policy for the following reasons:**

- 1. Improved patient care.** The promise of the VHIE is to make patient records available to clinicians across care locations in order to improve individual patient care, reduce duplication of services, and address population-health needs. As stated in the Act 187 report, whether the VHIE is useful to clinicians depends first and foremost on whether they have access to the records of a high proportion of Vermonters. Low records availability means that when clinicians log in, they are unlikely to see their patient data and then become even less likely to access the VHIE again in the future. While there is no universal agreement about what proportion of patient participation is enough to make the VHIE robust, under the opt-in consent policy, the number remains short of what is necessary - about 39% as of the drafting of the Act 187 Report. DVHA found that under opt-out, records of approximately 2/3 of patients would be accessible.
- 2. Reduced administrative burden on clinicians.** One of the reasons for low patient participation in the VHIE is that the current burden sits with clinicians to obtain patient consent from every Vermonter before his/her data can be viewed by other clinicians. Due to the labor-intensive and manual process of gathering separate written consent under the opt-in policy, clinician offices vary in their ability to ask for and operationalize the consent process from patients. Our understanding is that VITL and other state partners can implement a robust opt-out system that allows patients autonomy to express their preference for data sharing and takes physician practices out of the middle.
- 3. Opt-in reflects the preference of the vast majority of Vermonters.** Of the 217,397 Vermonters who have been asked whether they wanted to participate as of late December 2018, 95.2% indicated by express written consent that they want their records accessible in the VHIE by clinicians who may have occasion to treat them.

In addition to these three primary reasons for VMS' support, VMS also agrees with the findings of the Act 187 Report that security is not reduced by a change in the consent policy and that data from other state health information exchanges reflects that exchanges are most successful with an opt-out policy. **We share the interpretation that the change to an opt-out policy could be determined by the Green Mountain Care Board, and respectfully request that the Committee communicate support for the Board making such a determination.**

Thank you for considering VMS' position and please let me know if you have any further questions.

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<sup>1</sup> <https://legislature.vermont.gov/assets/Legislative-Reports/DVHA-Report-VHIE-Patient-Consent-Policy.pdf>. See also DVHA presentation to the Green Mountain Care Board, January 9, 2019: <https://gmcboard.vermont.gov/sites/gmcb/files/updated%20Act%20187%20of%202018%20%28GMCB%20Presentation%2001-09-2019%29.pdf>