

“Opt-Out” is the Wrong Solution for the VHIE

Interests at Stake

- Vermonters’ have a basic right to control how their private health information is shared.
- The public must trust VHIE for it to succeed.
- Obtaining and processing patient consent places an administrative burden on providers.
- The VHIE needs a high participation rate to succeed.

Providers Lack the Ability to Process Patient Consent

- Current low “opt-in” rates are partially due to providers struggling to obtain and process patient consent.
- If providers and VHIE cannot effectively manage patient “opt-ins”, there is no reliable evidence to suggest that they could handle patient “opt-outs.”

Don’t We Need Opt-Out” to Allow Doctors to See a Patient’s Health Information in an Emergency?

- No. There is currently a “break-the-glass” provision that allows doctors to access patient health records when a patient is unable to provide consent in an emergency even if the patient has not opted in.

There are Solutions to Increase VHIE Participation Available

- Solutions currently being implemented increase patient participation in the VHIE, reduce provider burden, and protect patient rights.
- A known problem with VHIE is the number of duplicate records. The VHIE is actively addressing this issue and has reduced the number of duplicate records by 60% in five months (598,464 to 234,889).
 - Fewer duplicate records means a more useful VHIE, which will likely increase providers obtaining and processing patient consent.
 - This will likely result in higher participation rates.
 - The VHIE wins, providers win, and Vermonters win.
- When providers are under time pressure, the processing of patient consent can be burdensome. To reduce this burden on providers, VHIE implemented an electronic consent delivery system. In 5 months, this intervention resulted in the VHIE “opt-in” rate doubling.
 - This intervention increased VHIE participation, lowered provider burden, and respected the rights of Vermonters to control how their private health data is shared.

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