

Michael K. Smith, interim president and CEO, VITL,
Legislative Testimony for 3-6-19

Oh, what a difference a year makes!

Last year VITL and the State of Vermont were struggling with what to do with the Vermont Health Information Exchange. Everyone agreed, including the Legislature, that change was necessary. So there has been much change in just a year.

Since last year VITL has:

- VITL established a strategic plan
- VITL developed ways to make it easier for providers to access and view information through the VHIE using their own electronic health record
- VITL continued its efforts on data quality improvement, meeting key milestones
- VITL implemented a technology roadmap
- In conjunction with the HIE steering committee established Connectivity Criteria
- VITL bylaws and board membership criteria were updated, and new board members and a new committee structure were approved

- VITL reviewed its financial operations, finalized its FY 2018 financial audit report and significantly reduced its budget going forward—to the tune of \$1 million in just two fiscal years with another \$500k of reduced state funding in 2020.

Last year the Legislature mandated a workplan to address deficiencies outlined in a consultant's report. I am please to report that the requirements of that workplan have been meant. In fact, a third-party evaluation illustrated that the SOV and VITL have either completed or were making sufficient progress to meet the requirements in the workplan mandated by the Legislature.

And there is more to accomplish, and I will get into that in a minute.

But first, what does VITL do? VITL is the exclusive operator of the Vermont Health Information Exchange which is the repository of health information from multiple sources throughout the state of Vermont. We move important patient information electronically and put it in the hands of treating providers. The goal with the exchange is to have health information follow the patient in Vermont no matter what provider they may

see and to enhance health care reform in Vermont.

Therefore:

- VITL delivers over 1.3 million lab results, results, radiology reports and other reports annually directly to providers EHRs
- VITL connects to and maintains over 1,000 interfaces with providers, sending patient clinical data to and from those providers and processing over 139 million data messages annually.
- Approximately 690K immunizations sent to the Immunization Registry that are extracted directly from an EHR's then sent to the Department of Health. (most efficient way of transmitting immunization data)
- And we deliver quality patient clinical data to assist in health care reform efforts to OneCare Vermont, Blueprint for Health, and Vermont's Medicaid Chronic Care Initiative.
- We delivered more than 35 million messages to support event notification services so providers know when their patients receive medical care.

Last year we made a concerted effort to make progress in two fundamental areas: 1) stabilize operations; and 2)

reestablish credibility. And in my estimation, we have made significant progress in each of these areas.

This year we are focused on sustainability and our strategic plan looks at how to make ourselves sustainable in a future.

We need to focus on:

- Seek ways to continually improve data quality
- Expand our accessibility to data
- Diversify our revenues
- Ride the wave of innovation
- Maintain a skilled workforce
- And make smart technology choices

Regarding smart technology choices we need to look across multiple health care organizations to collaborate and coordinate technology purchases. And that is what we are doing now with a project that involves the Blueprint for Health, OneCare, and VITL. For the first time in 13 years, we are looking at how we can jointly purchase and maintain two major software purchases that meet each organizational need but can be shared between all three organizations. It is an exciting project that has great potential and we are trying to figure out the operational details as we speak.

In addition, we need to look at how we can design our technology so that I don't burn out our employees when they try to maintain it. So smart technology choices are an important element of our future.

In order to continue our progress that we have made in the state of Vermont in the area of health information exchange there are still policy decisions that need to be addressed in order to provide greater efficiencies and effectiveness of operations.

- The first: Vermont's consent policy needs to change to lessen the burden on providers and patients, while ensuring patient privacy. Currently only 39 percent have agreed to have their health records accessible to all treating providers under Vermont's "Opt-In" policy. We have testified before the Green Mountain Care Board urging to change the policy to mirror the restrictions under HIPAA the Federal Health Insurance Portability and Accountability Act or what other states prefer which is a 'Opt-Out' provision where a patient can opt not to be in the health information exchange be the default policy would be that medical records would be included in the VHIE where they could be accessed by treating providers. Frankly, the state of Vermont will never

achieve the highest level of functionality in its health information exchange without a change in policy. It was something I didn't recognize in 2006 when I was involved in establishing VITL and the VHIE, and it is something I would have done differently if I was in the same position today.

- Secondly: the HIT fund sunset provision should be moved to a three-year event rather than an annual event. Currently, the Health Information Technology fund has an annual sunset provision and the Legislature needs to renew this fund every year. This creates instability in the funding mechanism for VITL. A review can be done annually by the Legislature, but the sunset provision could be moved to a three-year event instead of annually to provide more stability in the funding mechanism for VITL.
- Continue support of the statewide strategic HIE plan.

Obviously, there is much detail into what I have described in this update to the Legislature and I am happy to answer any questions that you may have.