

January 29, 2024

Dear Chair Lyons Members of the Vermont Senate Committee on Health and Welfare,

I am writing regarding S.173, an act relating to the collection, sharing, and selling of consumer health data.

VITL is designated to operate the Vermont Health Information Exchange (VHIE), a secure, statewide data network that gives health care organizations in Vermont the ability to electronically exchange and access their patients' health information in order to improve the quality, safety, and cost of patient care. In support of this work, we serve as a business associate of many Vermont health care providers. This allows us to collect, match, and standardize patient data from health care organizations across the state, including hospitals, primary and specialty care providers, and Federally Qualified Health Centers. It further enables us to make that data available to participating health care organizations on behalf of those organizations to inform providers' point-of-care decisions; to improve and reform care; and to support public health efforts in service of all Vermonters. The foundation of our work is the security of patient data and ensuring appropriate access to that data. This includes honoring patients' rights and preferences.

We support the intent of the proposed bill. However, we respectfully request that the exemptions identified in the proposed bill be expanded to include VITL. The exemptions outlined in § 1899c 5(a) include an exemption for covered entities and business associates. Currently, all of the data VITL collects is considered protected health information (PHI), which we obtain as a business associate of covered entities across the state. However, the Health Information Exchange Strategic Plan (HIE Strategic Plan), as prepared by the Agency of Human Services and approved by the Green Mountain Care Board, contemplates future plans to incorporate health data that is generated by individuals (e.g. through remote health monitoring devices), and submitted directly to VITL by those individuals. Patient generated data received by VITL would be incorporated into the individual's longitudinal health record. Because VITL is not a covered entity, this data would not be considered protected health information. Having to manage data received directly from individuals in a manner that is different from how we secure their health data that we receive from their providers would enter additional complexity and cost to VITL's operations, and could create confusing expectations for individuals. As VITL would incorporate this data into existing health records, VITL would protect this data under the same rigorous standards and requirements in which we secure the PHI we currently steward. The health data that is submitted to VITL is maintained following the security and privacy requirements set out by the Health Insurance Portability and Accountability Act of 1996 (HIPAA), the Services Agreements we enter into with the covered entities that submit data to VITL, and the Protocols for Access to Protected Health Information on the VHIE that are included in the HIE Strategic Plan.

Thank you for considering the requested exemption. Please do not hesitate to contact me if you have any questions or would like additional information.

Sincerely,

Beth Anderson

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