



**Board of Directors Meeting**

**Meeting Location: Phone Call Only**

**July 11, 2017**

**4:00-6:00 pm**

**Call-in number: (866)-906-9888; Passcode – 6850751#**

**Agenda**

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|-------------------|--|--|
| I.                | Consent Agenda   | Bruce Bullock, MD                        |
|                   | • Approval of Minutes from May 30, 2017 Board Meetings |  |
| II.               | State of Vermont/DVHA                                  | Emily Yahr                               |
| III.              | Secondary Use of Data                                  | John K. Evans, Mike Gagnon & Anne Cramer |
| Executive Session |  |  |
| IV.               | Presidents Update                                      | John K. Evans                            |
| V.                | Financial Update                                       | Bob Turnau                               |
| VI.               | Next Meeting: Annual Meeting Phone Call                |  |
|                   | • September 20 <sup>th</sup> 12-1pm                    |  |
| VII.              | Adjourn Board  | Bruce Bullock, MD                        |

Vermont Information Technology Leaders, Inc.



Meeting Date: July 11, 2017

Location: Conference Call

Attendees:

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| <input type="checkbox"/> Adam Buckley, MD              | <input checked="" type="checkbox"/> Bruce Bullock, MD (phone) | <input checked="" type="checkbox"/> Richard Slusky (phone)     | <input checked="" type="checkbox"/> John K. Evans        | <input checked="" type="checkbox"/> Richard Elmore (phone) |
| <input checked="" type="checkbox"/> Jerry Ford (phone) | <input checked="" type="checkbox"/> Don George (phone)        | <input checked="" type="checkbox"/> Paul Harrington (phone)    | <input checked="" type="checkbox"/> Joel Benware (phone) | <input checked="" type="checkbox"/> Amy Putnam (phone)     |
| <input type="checkbox"/> Todd Moore                    | <input checked="" type="checkbox"/> Mike Del Trecco (phone)   | <input checked="" type="checkbox"/> Rep. Lori Houghton (phone) |  |  |

Staff: Robert (Bob) Turnau; Mike Gagnon; Kristina Choquette; Judith Franz; Frank Harris; & Heidi Banks

Others: Anne Cramer, Esq., PPEC; Emily Yahr, DVHA; Dr. Gary Ozanich, Health Tech Solutions; Dawn Gallagher, Health Tech Solutions; Kim Norby, Health Tech Solutions; April Smith, Health Tech Solutions; Kathy Frye, Health Tech Solutions; & Robert DiPalma, Esquire, Paul Frank & Collins PC

Topic	Presentation	Discussion and Action	By Whom or When
Meeting convened	Dr. Bruce Bullock convened the meeting at 4:05 pm		
Consent Agenda	<ul style="list-style-type: none"> <li>Dr. Bullock called for approval of the May 30, 2017 Board meeting minutes.</li> </ul>	<p><b>Motion:</b></p> <ul style="list-style-type: none"> <li>To accept the minutes from the May 30, 2017 Board meeting.</li> </ul>	<p><b>Motion:</b> Don George; 2<sup>nd</sup> – Amy Putnam; Abstained - Mike Del Trecco; <b>Approved</b></p>
State of Vermont/DVHA	<ul style="list-style-type: none"> <li>Emily Yahr, Director of Health Information Technology Program (HIT) at the Department of Vermont Health Access (DVHA), introduced herself and provided an overview of the evaluation the State is conducting of the HIT Plan, the HIT fund and VITL.</li> </ul>	<ul style="list-style-type: none"> <li>While most people have probably read the legislation (Act 73 The Technology Report) Emily would like to answer any questions and explain the process to the VITL Board. She is the lead from the State on the evaluation.</li> <li>Emily briefly reviewed the legislation and the reasons this statute was enacted.</li> <li>Paul Harrington said it sounds like this is inward focused, Vermont centric analysis. Will there be any best practices nationally and what ONC and other HIE's are doing nationally to compare and contrast what Vermont is doing?</li> <li>Emily stated that one of the reasons HealthTech Solutions (HTS) was chosen is that they have been in collaboration with the Office of the National Coordinator (ONC) and the Centers for Medicare &amp; Medicaid Services (CMS) on a number of different projects and all of their staff are coming directly from various state offices around the country. Additionally, they are highly regarded across the nation in terms of their understanding of HIT/HIE, how it is evolving and where CMS is going.</li> <li>Emily then gave a quick review of the Request for Proposal (RFP) process and how they selected HTS.</li> </ul>	

- Emily asked the members of HTS to introduce themselves:
  - HealthTech Solutions is based in Frankfurt Kentucky and currently has contracts in over 21 states. In addition, they also have contracts with federal agencies. Currently working with the states of Connecticut, Maine, Colorado, Oregon and Georgia on projects like the Vermont project. Most of their staff have been involved in high tech HIE/HIT activities.
  - Dr. Gary Ozanich is the lead evaluator on this project. He is also the National Co-Chair of the HIMSS Interoperability and HIE Workgroup, past National Chair of the HIMSS National Exchange Committee and has worked on a number of different work groups and committees dealing with interoperability to consumer engagement.
  - Dawn Gallagher said that prior to joining HTS she was the Director of the Office of the State Coordinator in the Meaningful Use Program in Maine, also the State's representative to the Board of the State's HIE. She has about 30 years of experience with state and federal agencies. She is an attorney and an adjunct professor of law.
  - Kim Norby is the former HIT Coordinator for the State of Iowa and the former Executive Director for Iowa's HIE. Kim has been a hospital Chief Information Officer (CIO) at a critical access hospital and the CIO/Chief Financial Officer (CFO) for a group of physical therapy clinics. Kim is the subject matter expert for the project.
  - April Smith was the original Development and Operations Manager for the Kentucky HIE and has worked for several other HIEs. She has had a lot of project management background and will be functioning as the project manager on this project.
  - Kathy Frye is the project director for the evaluation.
- HTS then discussed the methodology and the research areas they will be using to conduct the evaluation.
- They will be looking at a temporal component to the analytics to analyze not only the status of VITL and the HIE as it is, as well as, what it should/will be in the future. Will be looking at the past, current and the future.
- HTS is in good shape to look at VITL's infrastructure and the state of the state.
- There will be a three-phase approaches in the evaluation: information gathering, analytics and then validation.
- Will be using multiple approaches to the information gathering phase: one on one structured interview using research questions which will be conducted in person or on the phone to identify common themes as well as potential issues; conducting focus groups; and technical expert

		<p>panels (in effect conduct a virtual focus group).</p> <ul style="list-style-type: none"><li>• Seven distinct stakeholder groups have been identified:<ul style="list-style-type: none"><li>○ Legislators</li><li>○ HIT oversight and planning</li><li>○ End users</li><li>○ Legal and finance</li><li>○ Information technology</li><li>○ Information technology planning</li><li>○ Policy and planning</li></ul></li><li>• The assessment will not look back as much as it will be focused on the current state and the future both short and long term and at a lot of different levels. They will look at meaningful use as the stage that moves toward value based purchasing or systems. The desire is to come away with some really good recommendations that are not only qualitative but quantitative in nature.</li><li>• John Evans asked to what extent will HTS versus NuHarbor be reviewing VITL's technical architecture, security, compliance and interoperability platform.</li><li>• Emily said that the architectural assessment that is being conducted by the Agency Digital Services will be the main look at the HIE architecture. If there are any blanks that HTS feels they need filled in, they will go back to VITL or one of the technical expert panels for this information. Will also be incorporating a security assessment into the technical architecture assessment being conducted by the Agency of Digital Services.</li><li>• John then asked if HTS will be engaging with entities such as Medicity, for example, who is VITL's major HIE vendor.</li><li>• Emily said this was a really good question as they have not talked about Medicity but they should.</li><li>• Dr. Bullock said this sounds like a thorough process but would like to know how the report will come back to VITL. Will there be an opportunity to review the report before it is submitted?</li><li>• Emily said that they are still sorting out some of the details but it is the State's intention that individuals will have the opportunity to review information that you weighted in on before it is finalized.</li><li>• The contract the SOV has with HTS states that HTS will provide the State with three different draft reports in advance of the final report. Those draft reports will cover different topics depending upon what areas HTS can delve into with the constrained timing.</li><li>• The State is administering this report but it is the State's hope that HTS will work in an unbiased, third party way to represent the entirety of what is going on now and in the future of health information exchange for the state of Vermont.</li><li>• Emily then said as interviews are scheduled and we are able to take</li></ul>	
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		<p>advance of your time and expertise we will absolutely run the findings by your before they become a final report.</p> <ul style="list-style-type: none"> <li>• John said it will be critically important that VITL’s Health Data Management infrastructure be included in HTS report as this is unique to other HIEs. It is important for HTS to have an understanding of why this was done, how it was constructed, what it delivers and what it is intended to solve with the variety of health care reform needs.</li> <li>• To close, Emily said that if any one feels that there is important and relevant information that has not been provided to HTS please contact her directly. Or you can reach out to HTS directly.</li> <li>• Emily Yahr, Dr. Gary Ozanich, Dawn Gallagher, Kim Norby, April Smith, and Kathy Frye left the meeting at 4:40pm.</li> </ul>	
<p>Secondary Use of Data</p>	<ul style="list-style-type: none"> <li>• Anne Cramer, Esq., John K. Evans &amp; Mike Gagnon provided and overview and framework going forward regarding the secondary use of data.</li> </ul>	<ul style="list-style-type: none"> <li>• John stated that VITL has spent the last year and a half wrestling with the secondary use of data and then gave a little background.</li> <li>• Anne said that when the State first requested receiving information for the Vermont Chronic Care Initiative (VCCI) staff, the approach was from the point of view that VCCI staff should have access through VITLAccess as if they were treating providers. This is contrary to VITLs agreements with each of its participating providers. As well as contrary to the consent policy that has been approved by the Secretary of Administration and the Green Mountain Care Board.</li> <li>• As most of the Board is aware, VITL has to work within the scope of the VHIE Services agreement and the Business Associates Agreement.</li> <li>• With the new Administration, we have been able to have a broader discussion.</li> <li>• VITL has two frameworks in which to make data available.</li> <li>• One framework is under the specific instructions under policies of the VHIE.</li> <li>• The second framework is as each organization is providing data to the VHIE and contracting with VITL to provide various services, there is the opportunity for each organization to direct VITL to provide access to its data to the State.</li> <li>• The tactic we think is more appropriate for VITL to provide access to the VCCI staff is through a deliberate process of reaching out to each organization to ask if they agree and permit the VCCI staff have access to information with regards to Medicaid beneficiaries participating in VCCI.</li> <li>• This can be done through an amendment to the VHIE order form.</li> <li>• The VHIE order form could also be used to provide de-identified data for other purposes.</li> <li>• A conversation has been had with UVM MC and they are more comfortable with providing access this way.</li> <li>• When you use VITLAccess to access the VHIE you are representing that you have a provider/treating relationship with the</li> </ul>	

		<p>patient/individual for whose information you are accessing.</p> <ul style="list-style-type: none"> <li>• Paul Harrington participating in a call with John and Anne a few weeks earlier and said this conforms with HIPPA and state law. All that is needed is simply an amendment to VHIE Services agreement/order form</li> <li>• Anne confirmed.</li> <li>• This agenda item is being provided to the Board for informational purposes only and is not an action item.</li> <li>• Anne Cramer left the meeting at 4:53 pm.</li> </ul>	
<p>President's Report</p>	<ul style="list-style-type: none"> <li>• John provided an update on the following topics: <ul style="list-style-type: none"> <li>○ FY17 Deliverables</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• John reviewed a chart that showed the percentage completed of FY17 deliverables for the various contracts/grants as follows: <ul style="list-style-type: none"> <li>○ Capitol Health Associates Contract (BPCR) 99% complete</li> <li>○ DVHA Grant 85% complete</li> <li>○ IAPD (State/Federal Contract) 100% complete</li> <li>○ OneCare Vermont Contract 100% complete</li> <li>○ State Innovation Model Contract 31204 Amend 1 89% complete</li> <li>○ All contracted deliverables have been completed.</li> <li>○ Remaining balance of work for Capitol Health Associates, DVHA and SIM contracts are the year-end status report due July 17, 2017.</li> </ul> </li> <li>• FY17 Key Projects: <ul style="list-style-type: none"> <li>○ Interfaces: <ul style="list-style-type: none"> <li>▪ Surpassed 1,000 interfaces (1,112; 20% increase over FY16)</li> <li>▪ UVM inpatient &amp; ambulatory CCDs</li> </ul> </li> <li>○ Established connection to the Veterans Affairs Lifetime Electronic Health Record</li> <li>○ DAIL Home Health Project: <ul style="list-style-type: none"> <li>▪ All capable VT Home Health and VNAs pushing data to the VHIE (14 CCD &amp; 13 ADT)</li> <li>▪ Launched VITLAccess (11)</li> <li>▪ Completed scope to connect to 2 Agencies to receive data from home monitoring devices</li> </ul> </li> <li>○ Medicity: <ul style="list-style-type: none"> <li>▪ Improved VITLAccess performance from 5 seconds to &lt; .5 seconds</li> <li>▪ Capability for organizations to electronically submit patient consent to the VHIE (Required by 4 hospitals including UVM MC)</li> </ul> </li> <li>○ VITLAccess: <ul style="list-style-type: none"> <li>▪ 115% increase in patient data queries (increased from 278,285 to 597,329)</li> <li>▪ 56% increase in patient data queries per user</li> <li>▪ 56% increase in number of patients who have given consent</li> <li>▪ 2,935 subscribers; 38% increase in FY17</li> </ul> </li> </ul> </li> </ul>	

		<ul style="list-style-type: none"> <li>▪ Developed online automated onboarding tool</li> <li>○ 263 Security risk assessment, Meaningful Use consulting services &amp; general Health Information Technology (HIT) consulting services have been provided to client organizations.</li> <li>○ Client Satisfaction Surveys (Q1-Q3) <ul style="list-style-type: none"> <li>▪ “I trust VITL” weighted average score: 3.9 / 5</li> <li>▪ “I would recommend VITL” weighted average score: 4.1 / 5</li> </ul> </li> <li>○ Completed Vermont Care Partners Designated Agencies Data Quality Project (16 DAs &amp; SSAs)</li> <li>○ Implemented new server and infrastructure at TechVault (improve the performance of our Health Data Management infrastructure and provide additional storage capacity)</li> <li>○ OneCare Vermont <ul style="list-style-type: none"> <li>▪ Completed project to improve patient matching</li> <li>▪ Piloted Terminology Services with labs</li> <li>▪ Expanded VITLDirect to 5 organizations</li> </ul> </li> <li>○ Completed VITL Impact Assessment</li> <li>○ Agreements: <ul style="list-style-type: none"> <li>▪ Resolved FY15 questioned costs</li> <li>▪ Negotiated FY16 Indirect Cost Rate</li> <li>▪ Signed OneCare Vermont 3 Year Agreement</li> <li>▪ FY18 Agreements with State of VT executed</li> </ul> </li> <li>• Robert DiPalma joined the meeting at 5:00pm.</li> <li>• Kristina Choquette, Judith Franz, Mike Gagnon and Frank Harris left the meeting at 5:05 pm.</li> </ul>	
Executive Session		<ul style="list-style-type: none"> <li>• The Board went into Executive Session at 5:07 pm.</li> <li>• The Board came out of Executive Session at 5:29 pm.</li> </ul>	
Financial Update	<ul style="list-style-type: none"> <li>• Bob Turnau gave a financial update and reviewed the following topics: <ul style="list-style-type: none"> <li>○ Auditor’s Engagement</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>• JMM has been VITL’s auditors since 2011.</li> <li>• Final grant reconciliation dependent on completion of draft single audit.</li> <li>• The Finance Committee recommends that the Board approve JMM’s engagement letter.</li> <li>• Management recommends soliciting bids for FY18 audit.</li> <li>• Resolution <ul style="list-style-type: none"> <li>○ The Directors of Vermont Information Technology Leaders, Inc., a Vermont non-profit corporation (“VITL”), adopt the following resolution at a duly called meeting on July 11, 2017 at which a quorum was present: <ul style="list-style-type: none"> <li>▪ WHEREAS, VITL is required to have an annual audit.</li> <li>▪ WHEREAS, The VITL Board of Directors received an</li> </ul> </li> </ul> </li> </ul>	

