

Board of Directors Meeting Meeting Location: VITL – 1 Mill Street, Suite 249, Burlington – Stratton Conference Room November 27, 2017 4:00-6:00pm

Call-in number: (866) 906-9888; Pass code: 6850751#

Agenda

l.	Consent Agenda a. Approval of Minutes from September 25, 2018 meetings	Bruce Bullock MD
II.	Interim President's Report	Michael Smith
III.	Strategic Plan Update	Michael Smith
IV.	Financial Update	Robert (Bob) Turnau
٧.	Updated Bylaws	Elizabeth Miller, Esq.
VI.	Work Plan Update	Kristina Choquette
VII.	Next Meeting: December 18 th , 2018 (conference call)	
/III .	Adjourn Board	Bruce Bullock MD

Vermont Information Technology Leaders, Inc.

Location: Conference Call

Meeting Date: November 27, 2018

Attendees:				
		Susan Besio	Bruce Bullock, MD	Mike Del Trecco
Mary Beth Eldredge	⊠ Richard Elmore	Tom Evslin	Leah Fullem	
☐ Todd Moore	☐ Mark Nunlist, MD	Amy Putnam	□ Richard Slusky	Michael K. Smith

Staff: Kristina Choquette, Robert (Bob) Turnau, and Joshua Cheney

Other: Elizabeth Miller, Esq., Dunkiel, Saunders, Elliott, Raubvogel & Hand

Topic	Presentation	Discussion and Action	By Whom or When
Meeting convened	Bruce Bullock, MD convened the meeting at 4:05 pm.		
Consent Agenda	Bruce Bullock, MD called for approval of both sets of September Minutes.	 Motion: To accept the minutes from the September 25th VITL Annual meeting and VITL Board Retreat meetings with requested change: Update Tom Evslin's name to Tom not Thomas on the afore mentioned minutes. 	 Motion: Mike Del Trecco; 2nd Joel Benware; Abstain: Leah Fullem, Susan Besio Approved
Interim President's Report	 Mike Smith provided an update on the following topics. Contracts 	 The CY19 contract with the State of VT is almost complete. The contact is for 4.8 million dollars. VITL is on track to meet its objectives in the 2018 contract. VITL has renegotiated our contract with PatientPing and made the following changes: VITL will no longer pay for our logo to appear on their website; the exclusivity clause was removed; The threshold of what qualifies as a payment was lowered potentially increasing the revenue from PatientPing by an additional \$20,000-\$30,000. 	
	o Personnel	 Director of Technology Position: Leadership has 2 Skype interviews scheduled; Leadership to review all resumes to be sure a potential candidate didn't get overlooked. Kristina Choquette will be leaving VITL effective January 15th. Mike will not be filling the Chief Operations Officer position, and instead, a midlevel project 	

	TechnologyLegislative Agenda	 manager will be hired. That new person will report to the three directors. Bob Turnau will be on Medical leave for six weeks beginning December 10, 2018. VITL has sent an RFI to gather information about our technology needs. An RFP will be issued if the findings of the RFI justify it. VITL is exploring ways to move to a cloud-based data storage. The priorities for the session will be: 1. changing the consent policy to an opt out policy. 2. seeking consistent, reliable funding in the form of approval of the HIT fund for more than one year. (3-5years) 3. Define VITL's role in Vermont's Health Care Reform initiatives. 	
Strategic Plan Update	Mike Smith provided an update on the following:	 VITL has committed to having a board approved Strategic Plan in place by December 2018. The plan is a hybrid between a strategic and tactical document. Discussion around the document including some members of the board would like to see the items prioritized. There was also discussion about who VITL's main audience is. Dr. Bullock would like to have some conference calls to continue the discussion if necessary. 	
Financial Update	Robert "Bob" Turnau gave an update of VITL's financials. Audit	 Revenue was \$32K off plan or -6% lower for the month for September. Year to date revenue for September continues to lag (-\$132K) when compared with the budget. The timing of when interfaces are completed (-\$111K) paces year to date revenue. Management expects that it will achieve the budgeted revenue for the first half of the fiscal year (our current contractual obligations) by December 31st, 2018. Expenses for September were \$34K lower than plan or 7%. Year to date total expenses for September 2018 are \$143K lower than budget. Primary drivers are lower personnel related expenses (-\$23K), consulting (-\$32K), data security (-\$55K), legal/accounting (-\$21K) and network services/maintenance (-\$23K). This is a temporary situation, as management expects the pace of expenditures to pick up as new technology projects get underway. Cash fell by \$106K in September and at the end of the month totals \$1,847K. The cash on hand represents 114 days of cash. The decrease in cash driven primarily by the increase in receivables. Total liabilities decreased by \$126K due to the retirement of the liability due to DVHA for FY17 grant billing from crediting this amount against a September invoice. Overall, working capital increased modestly as current assets decreased by \$69K, while current liabilities decreased by \$126K. VITL's FY18 audit was conducted by Gallagher, Flynn & Company, LLP. The final version of the audited financials will be sent to the Audit Committee for 	
Dylaws Undete	Lin Millon novisored the	review and then approval by the board at the December meeting.	
Bylaws Update	Liz Miller reviewed the proposed updates to VITL's bylaws.	Liz stated that the updates suggested at the September meeting have been made. Motion:	Motion: Todd

		 To accept the bylaws as presented. The Board thanked Liz for her work on the By-Law revisions. 	More; 2 nd Tom Evslin; All Approved.
Work Plan Update	Kristina provided an update of the DVHA / VITL Work Plan	As of November 1, 2018, the following items are: Completed: The 2017-2018 HIE Steering Committee worked to develop a consensus-driven, state wide strategic plan to support investment in and management of health information exchange efforts. Per 18 V.S.A. § 9351, the state-wide plan was delivered to the GMCB on November 1. The 2017- 2018 HIE Steering Committee proposed a permanent governance model within the state-wide HIT strategic plan. The proposed governance model will be established in January/February of 2019. On behalf of the HIE Steering Committee, DVHA facilitated an "HIE (HIT) Plan Roadshow" to engage stakeholders in the planning process, build a community-wide understanding of the new HIE governance model, and support current and future planning efforts. More information on the Roadshow is included as an Appendix to the HIE (HIT) Plan. Complete and Ongoing: The HIE Steering Committee addressed financing and sustainability issues in the recently submitted HIE (HIT) Plan. See pages 13, 24 and 35 in the HIE (HIT) Plan. These issues will be continually addressed by the HIE Steering Committee in 2019 and in future iterations of the HIE Plan. In Progress: DVHA and VITL are developing the CY19 contract. VITL has reduced the funding request by \$500k as planned. The scope and budget of the contract were finalized on 11/1/18 to allow for CMS' required 60-day review period. Patient consent as of 9/30/2018 is over the 35% target at 37.55%, and work is ongoing. VITL is concluding its testing of one hospital's ability to transmit patient consent electronically, thereby reducing provider and staff burden to manually update consent in the VHIE. Note: 93% of patient have data in the VHIE; only 37% have given consent for their data to be shared. VITL is concluding its testing with one hospital to integrate the access of VHIE data within the organization's electronic health record (EHR) in early November 2018. The other hospital's testing has been rescheduled to better align with their vendor availability to res	

Next Meeting		The report established that DVHA and VITL have made satisfactory progress to date and are on track in addressing the recommendations from the 2017 Evaluation Report. The evaluation was submitted to the legislature and GMCB on October 2, 2018. DVHA presented the evaluation results to the GMCB on October 17, 2018. DVHA continues work to engage stakeholders in the process of developing a report on Vermont's consent policy. DVHA will present progress and engage the public in a conversation about the consent policy at a GMCB in mid-December. Next meeting: December 18, 4-5 pm, as a phone call	
Adjournment	Bruce Bullock, MD adjourned the meeting at 5:25 pm		

Joshua E. Cheney, Executive Assistant VITL