

# VITL Vermont Health Care Provider Survey Summary Report



Castleton

Polling Institute

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## Executive Abstract

- Castleton Polling Institute conducted a survey on behalf of VITL among healthcare providers licensed in Vermont between May 20 and June 22, 2016. There were 388 responses.
- Overall, a plurality of respondents (44%) indicated that they have not heard of VITL.
- Only 11% of respondents indicated that they receive clinical data (such as lab results) into their EHR from VITL.
- The majority of respondents are not currently users of VITLAccess (78%).
- For those providers currently using VITLAccess, noteworthy data was captured related to VITLAccess usage patterns. Write-in comments provide insight into possible areas for VITL improvement.
- For both current users and non-users of VITL data, the majority of providers indicated that clinical results into their EHR would or does improve their quality of care (with 76% of users indicating somewhat or greatly and 67% of non-users indicating that clinical data would somewhat or greatly improve their quality of care).
- Other questions about future technologies provide insight into strategic areas of focus for VITL. Real-time notification of patient admission and discharge being of most interest to providers.

## Executive Summary

Vermont Information Technology Leaders (VITL) contracted with the Castleton Polling Institute to conduct a survey of health care providers about their use of and feedback on electronic health records (EHR), VITLAccess, and other provider-related technologies. A total of 388 completed surveys were received from licensed health care providers in the state of Vermont. The four-page survey was administered via postal mail. Responses were collected between May 20 and June 22, 2016.

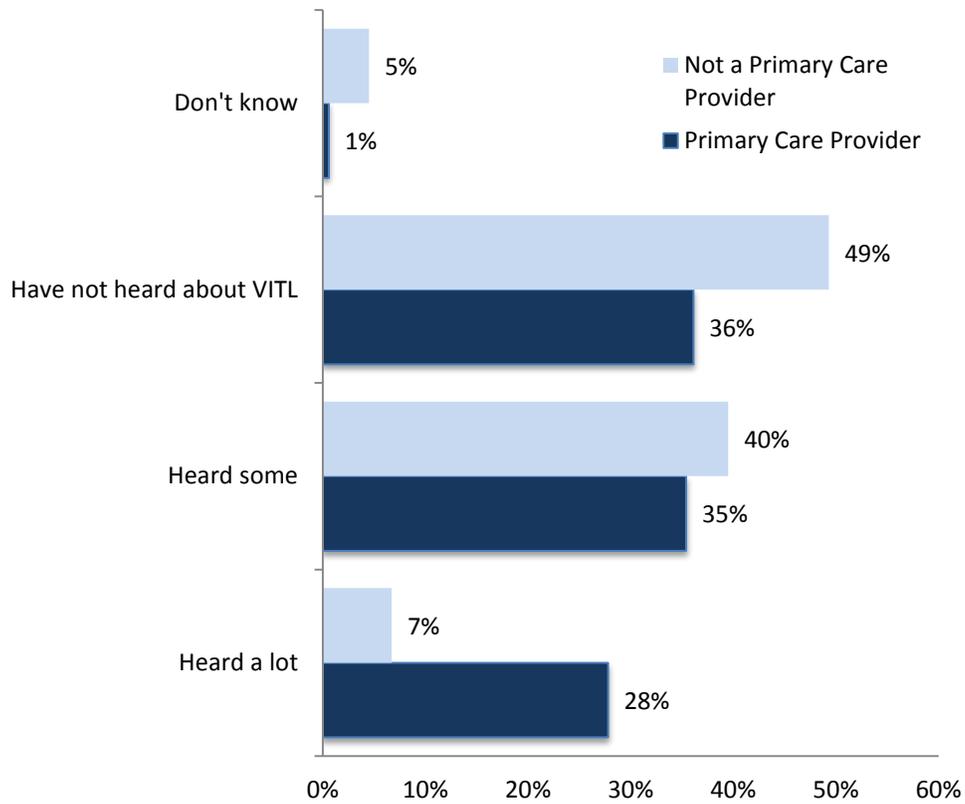
The details represented below are highlights of the findings. Additional information on the methodology and full responses can be found in subsequent sections of this report.

Throughout the questionnaire high proportions of respondents indicated “don’t know” and “unsure” responses. Due to the informative nature of these responses, these options were not coded as missing values, but rather are presented as substantive responses for each item.

### *Knowledge of VITL*

- Overall, a plurality of respondents (44%) indicated that they have not heard of VITL. Figure 1 displays knowledge of VITL by primary care status.

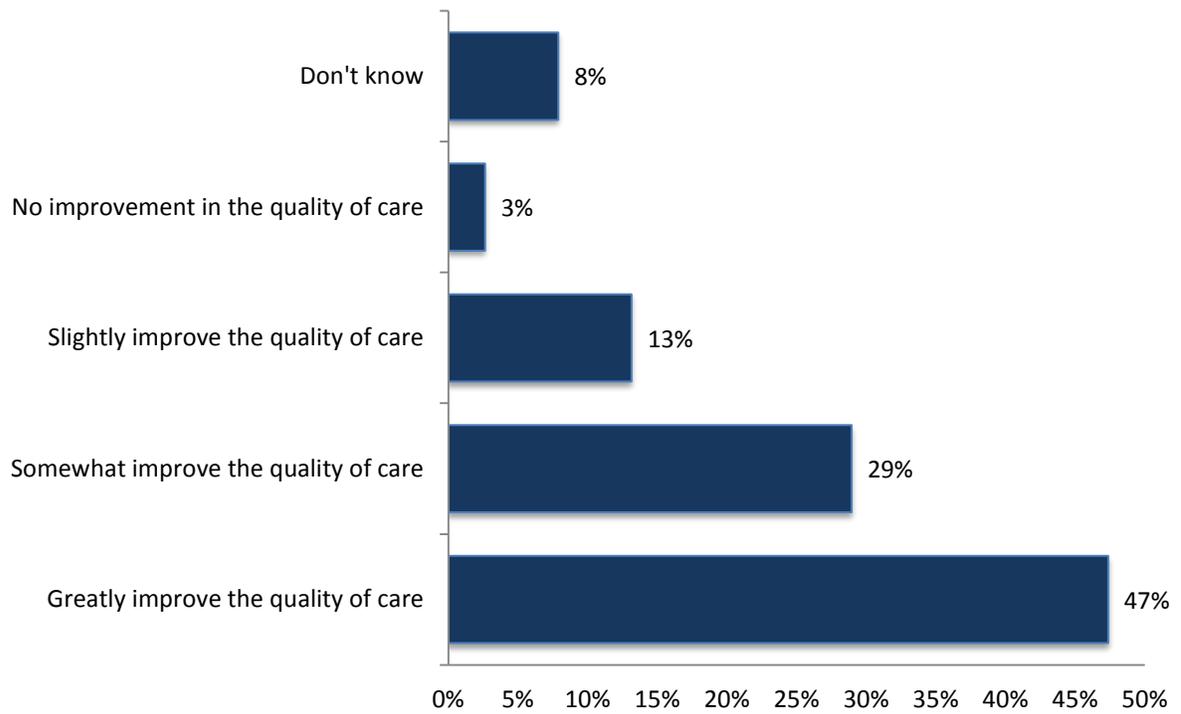
**Figure 1. Knowledge of VITL by Primary Care Status  
(n=381)**



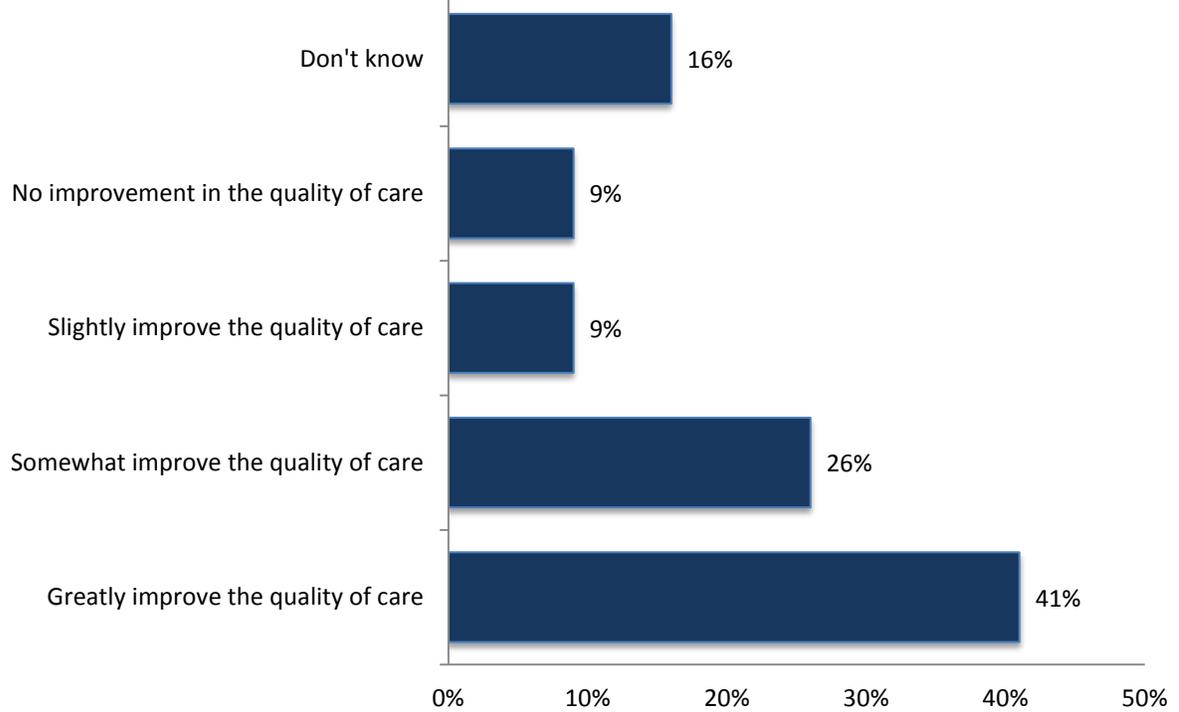
*VHIE Data*

- A small number of respondents (11%) indicated that they receive clinical results from VHIE into their EHR.
- Figure 2 displays improvement to quality of care for those who receive data from VHIE. Figure 3 displays the perceived improvement in quality of care for those who do not currently receive data from VHIE.

**Figure 2. Of Those Who Receive Data from VHIE, Improvement to Quality of Care (n=38)**



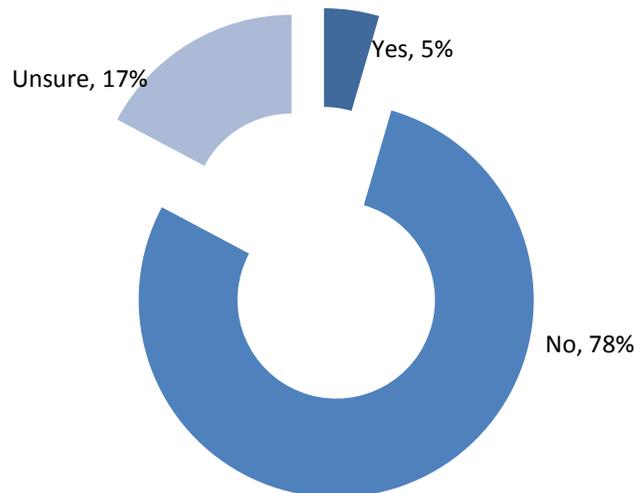
**Figure 3. Of Those Not Receiving Data from VHIE, If Clinical Results Were Available in EHR, Perceived Improvement in Quality of Care (n=315)**



*Users of VITLAccess*

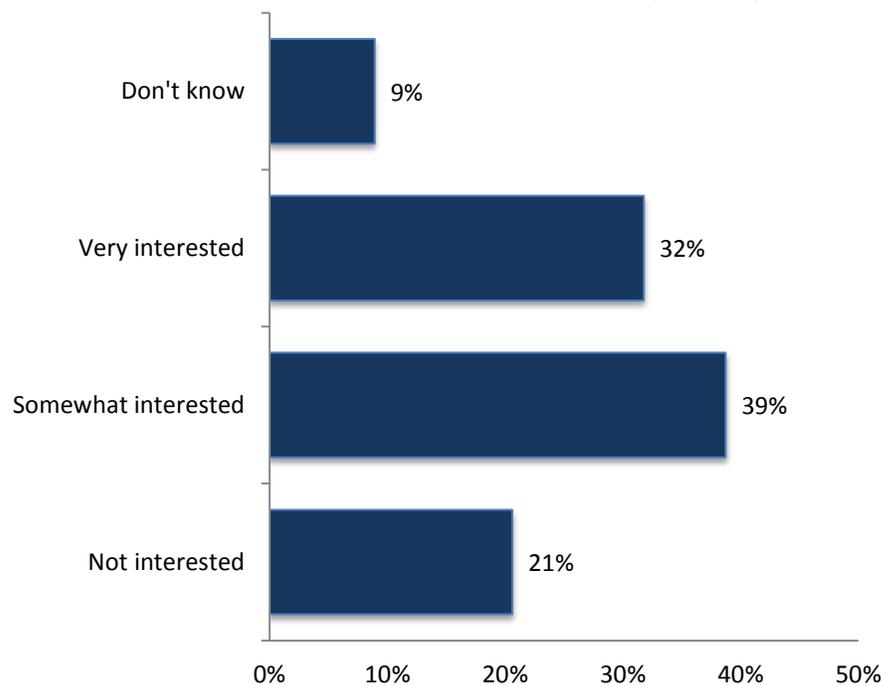
- The majority of respondents are not currently users of VITLAccess (78%). However, 17% of respondents indicated that they were unsure whether or not they were current users of VITLAccess.

**Figure 4. Currently Using VITLAccess (n=377)**

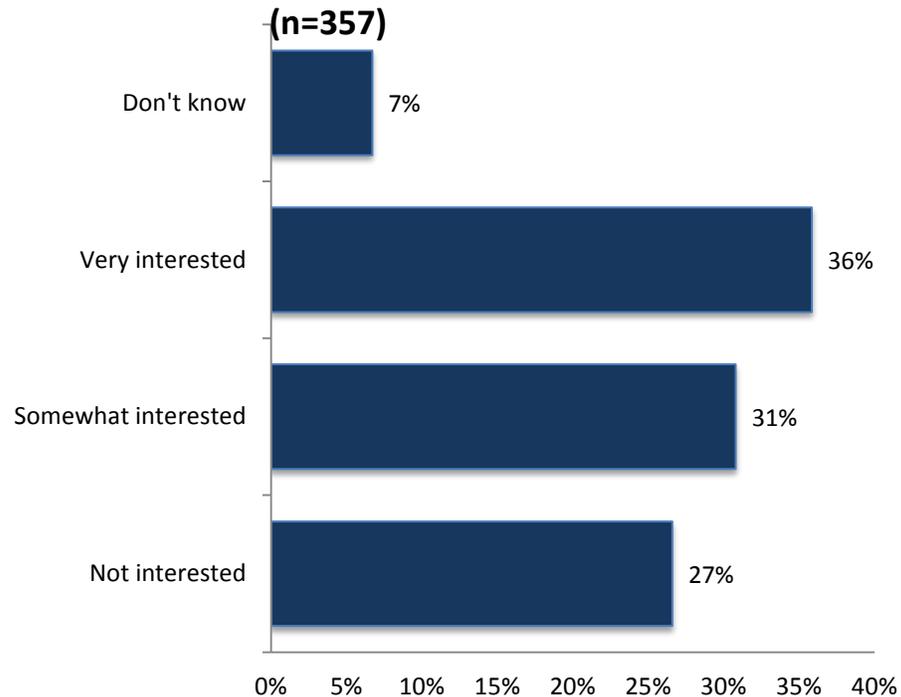


- A plurality of users of VITLAccess (n=17) have logged into the system sometime in the last year or more (41%). Twenty-nine percent of users have logged in during the last week.
- The majority of VITLAccess users (76%) use VITLAccess with a few patients or on a select basis.
- VITLAccess users found the information to be helpful most or some of the time (53%).
- The information selected as most useful for treating patients is laboratory results (selected by 71% of users), followed by transcribed reports (selected by 53% of users), and medication history (selected by 35% of users).
- A plurality of users (41%) would definitely not use VITLAccess if payment was required for use.

**Figure 5. Of Those Who Do Not Currently Use VITLAccess, Interest in Medical Information (n=359)**



**Figure 6. Of Those Who Do Not Currently Use VITLAccess, Interest in Prescription Information**



#### *Future Technologies Feedback*

- Over ¼ of respondents (26%) indicated that the ability to receive real-time notifications of admissions or discharges from hospitals or other admitting facilities would greatly improve the quality of care they are able to provide patients.
- Forty-six percent of providers would use real-time notifications with some or almost every patient.
- Eleven percent of respondents indicated communication with patients via secure texting platform would greatly improve their quality of care.
- Thirty-four percent of providers would communicate via secure texting platform with some or almost every patient.
- A plurality of providers (42%) were unsure if their practice regularly receives Blueprint for Health Profiles. Twenty-three percent indicated they regular receive the profiles.
- Thirty-seven percent of providers indicated participation as one of the Vermont accountable care organizations. However, 33% indicated being unsure about participation.

#### **Methods**

The Vermont Health Care Provider Survey was conducted by Castleton Polling Institute from May 20 through June 22, 2016 on behalf of the Vermont Information Technology Leaders (VITL). Castleton Polling Institute received funding from VITL to conduct the survey.

The survey was created by Castleton Polling Institute in consultation with VITL. The survey was a self-administered, paper form. Participants were sent the survey via postal mail. The survey packet included a cover letter, a postage-paid business reply envelope, and the survey. A reminder survey packet was mailed approximately 15 days after the initial packet. A copy of the survey, initial cover letter, and reminder cover letter can be found in Appendix A.

The frame for the sample was compiled from the State of Vermont's license databases (downloaded on May 5, 2016). All active license holders for physicians, nurse practitioners, physician assistants, PhD-level psychologists, and Masters-level psychologists whose mailing address is in Vermont, New Hampshire, New York, Maine, Massachusetts, Rhode Island, Connecticut, or Quebec were included in the frame (N=5,093). A random sample, stratified proportionally by each license type was pulled. The final sample (N=3,000) included 2,058 physicians, 414 nurse practitioners, 192 physician assistants, 225 PhD-level psychologists, and 111 Masters-level psychologists. The sample included providers with mailing addresses in each of the 14 Vermont counties as well as the neighboring areas. The use of a probability-based sample design (i.e., a random sample) allows for the results to be able to be generalized to the population. In this case, the use of the State's databases of licensed practitioners was expected to be complete and nearly up-to-date as the list is maintained for administrative purposes.

Data collection closed on June 22, 2016 with 388 of completed surveys returned. Responses were received from provider mailing address in all 14 Vermont counties and neighboring areas. Similar proportions of physicians assistants, PhD-level psychologists and Masters-level psychologists responded as exist in the population (within +/- 1%). A slightly higher proportion of nurse practitioners responded (20% versus 14%) and a slightly lower number of physicians responded (62% versus 69%). Although a non-response analysis was not conducted, a face-value review of responses suggests surveys were received from a broad selection of providers working throughout the state of Vermont. The overall margin of sampling error for the total number of responses is +/- 4.8% at the 95% confidence level for a 50/50 distribution. Results looking at sub-groups of respondents will be less precise and have a larger margin of sampling error.

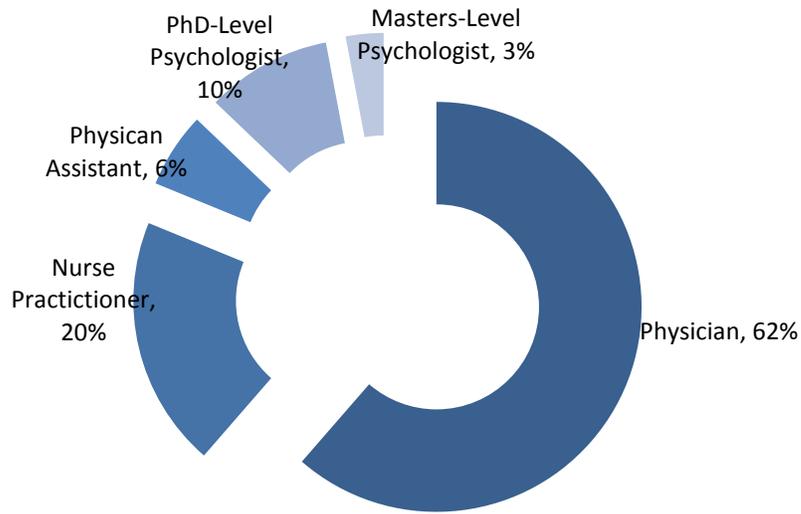
The data presented throughout this report is not weighted or adjusted for any design effect. Returned surveys were data entered via a double entry process to reduce entry error. Minimal data cleaning was conducted on the data set. Users of the data should note that as with all self-administered surveys, respondents do not always comply with skip pattern instructions. Discrepancies will exist in the dataset due to respondent error. Additionally, the open-ended responses are presented as written with no corrections for spelling or grammar.

Additional information or questions about the methods used to collect the Vermont Health Care Provider Survey can be obtained by contacting the Castleton Polling Institute via email at [polling@castleton.edu](mailto:polling@castleton.edu).

## Details about Responders to the Survey

Of the 388, respondents the majority (62%) were licensed as physicians. Figure 7 displays the type of license held by respondents.

**Figure 7. License Type (n=388)**



When asked in what type of practice setting respondents worked, the most frequently selected option was an independent practice (34%). The question allowed for respondents to select multiple responses. The majority (86%) only selected a single response. Physicians were the most common type of provider to select multiple responses, with the most common combinations of responses being a combination of hospital, hospital-owned practices, and/or independent practice.

When asked if the respondent was a primary care provider 42% indicated that they were. The majority (92%) of respondents indicated that their job function was best described as a clinical practice.

## Descriptive Tables for All Variables & Respondents

### list Type of license

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 Physician	239	61.6	61.6	61.6
	2 Nurse Practitioner	78	20.1	20.1	81.7
	3 Physician Assistant	22	5.7	5.7	87.4
	4 PhD-Level Psychologist	37	9.5	9.5	96.9
	5 Masters-Level Psychologist	12	3.1	3.1	100.0
	Total	388	100.0	100.0	

### Q1A At what type of practice do you work - Hospital

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 Not Selected	286	73.7	73.7	73.7
	1 Selected	102	26.3	26.3	100.0
	Total	388	100.0	100.0	

### Q1B At what type of practice do you work - Hospital owned practice

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 Not Selected	282	72.7	72.7	72.7
	1 Selected	106	27.3	27.3	100.0
	Total	388	100.0	100.0	

**Q1C At what type of practice do you work - Independent owned practice**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 Not Selected	258	66.5	66.5	66.5
	1 Selected	130	33.5	33.5	100.0
	Total	388	100.0	100.0	

**Q1D At what type of practice do you work - Federally qualified health center**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 Not Selected	342	88.1	88.1	88.1
	1 Selected	46	11.9	11.9	100.0
	Total	388	100.0	100.0	

**Q1E At what type of practice do you work- Some other type of practice**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 Not Selected	345	88.9	88.9	88.9
	1 Selected	43	11.1	11.1	100.0
	Total	388	100.0	100.0	

**Q2 Are you a primary care provider**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 Yes	159	41.0	41.6	41.6
	2 No	223	57.5	58.4	100.0
	Total	382	98.5	100.0	
Missing	System	6	1.5		
Total		388	100.0		

**Q4 Which of the following best describes your job function**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 Clinical practice	340	87.6	91.6	91.6
	2 Hospital management	6	1.5	1.6	93.3
	3 Practice management	5	1.3	1.3	94.6
	4 Educational	6	1.5	1.6	96.2
	5 Other	14	3.6	3.8	100.0
	Total	371	95.6	100.0	
Missing	System	17	4.4		
Total		388	100.0		

**Q5 Have you hear of VITL or Vermont Information Technology Leaders**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 Heard a lot	59	15.2	15.3	15.3
	2 Heard some	145	37.4	37.7	53.0
	3 Have not heard about VITL	169	43.6	43.9	96.9
	4 Don't know	12	3.1	3.1	100.0
	Total	385	99.2	100.0	
Missing	System	3	.8		
Total		388	100.0		

**Q6 Does your organization contribute clinical data to the Vermont Health Information exchange (VHIE)**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 Yes	77	19.8	20.0	20.0
	2 No	96	24.7	24.9	44.9
	3 Unsure	212	54.6	55.1	100.0
	Total	385	99.2	100.0	
Missing	System	3	.8		
Total		388	100.0		

**Q7 Does your organization receive clinical results (e.g., lab results, pathology reports) from the VHIE into your Electronic Health Record (EHR)**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 Yes	40	10.3	10.6	10.6
	2 No	157	40.5	41.6	52.3
	3 Unsure	180	46.4	47.7	100.0
	Total	377	97.2	100.0	
Missing	System	11	2.8		
Total		388	100.0		

**Q8 If clinical results from other health care organizations, such as laboratory results, were available in your EHR, how much would it improve the quality of care you are able to provide your patients**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 Greatly improve the quality of care	140	36.1	42.2	42.2
	2 Somewhat improve the quality of care	84	21.6	25.3	67.5
	3 Slightly improve the quality of care	27	7.0	8.1	75.6
	4 No improvement in the quality of care	29	7.5	8.7	84.3
	5 Don't know	52	13.4	15.7	100.0
	Total	332	85.6	100.0	
Missing	System	56	14.4		
Total		388	100.0		

**Q9 How does the availability of clinical results from other health care organizations, such as laboratory results, in your EHR improve the quality of care you are able to provide your patients**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 Greatly improve the quality of care	86	22.2	40.6	40.6
	2 Somewhat improve the quality of care	38	9.8	17.9	58.5
	3 Slightly improve the quality of care	18	4.6	8.5	67.0
	4 No improvement in the quality of care	18	4.6	8.5	75.5
	5 Don't know	52	13.4	24.5	100.0
	Total	212	54.6	100.0	
Missing	System	176	45.4		
Total		388	100.0		

**Q10 Are you currently using the secure provider portal to the VHIE, known as VITLAccess, to access statewide medical information about your patients**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 Yes	17	4.4	4.5	4.5
	2 No	295	76.0	78.2	82.8
	3 Unsure	65	16.8	17.2	100.0
	Total	377	97.2	100.0	
Missing	System	11	2.8		
Total		388	100.0		

**Q11 When was the last time that you logged on to VITLAccess**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	2 Within the last week	5	1.3	13.2	13.2
	3 Within the last month	3	.8	7.9	21.1
	4 Sometime in the last year or more	11	2.8	28.9	50.0
	5 Unsure	19	4.9	50.0	100.0
	Total	38	9.8	100.0	
Missing	System	350	90.2		
Total		388	100.0		

**Q12 What is the frequency with which you use VITLAccess to find information about your patients**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 Almost every patient that I see	1	.3	3.0	3.0
	3 A few patients	6	1.5	18.2	21.2
	4 On a very select basis, when a patient has special circumstances	12	3.1	36.4	57.6
	5 Don't know	14	3.6	42.4	100.0
	Total	33	8.5	100.0	
Missing	System	355	91.5		
Total		388	100.0		

**Q13 When using VITLAccess, how often do you find information that is helpful for the immediate treatment of your patient**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	2 Most of the time	3	.8	9.1	9.1
	3 Some of the time	9	2.3	27.3	36.4
	4 Rarely	3	.8	9.1	45.5
	5 Never	6	1.5	18.2	63.6
	6 Don't know	12	3.1	36.4	100.0
	Total	33	8.5	100.0	
Missing	System	355	91.5		
Total		388	100.0		

**Q14A What patient information available through VITLAccess is most useful to you in treating your patients - Patient demographics**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 Not Selected	388	100.0	100.0	100.0

**Q14B What patient information available through VITLAccess is most useful to you in treating your patients - Patient encounter data (e.g., admit, discharge or transfer)**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 Not Selected	380	97.9	97.9	97.9
	1 Selected	8	2.1	2.1	100.0
	Total	388	100.0	100.0	

**Q14C What patient information available through VITLAccess is most useful to you in treating your patients - Patient problem lists**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 Not Selected	380	97.9	97.9	97.9
	1 Selected	8	2.1	2.1	100.0
	Total	388	100.0	100.0	

**Q14D What patient information available through VITLAccess is most useful to you in treating your patients - Laboratory Results**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 Not Selected	370	95.4	95.4	95.4
	1 Selected	18	4.6	4.6	100.0
	Total	388	100.0	100.0	

**Q14E What patient information available through VITLAccess is most useful to you in treating your patients - Transcribed reports (e.g., radiology, ED discharge notes, etc.)**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 Not Selected	374	96.4	96.4	96.4
	1 Selected	14	3.6	3.6	100.0
	Total	388	100.0	100.0	

**Q14F What patient information available through VITLAccess is most useful to you in treating your patients - Medication history**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 Not Selected	377	97.2	97.2	97.2
	1 Selected	11	2.8	2.8	100.0
	Total	388	100.0	100.0	

**Q14G What patient information available through VITLAccess is most useful to you in treating your patients - Care summaries (Continuity of Care documents).**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	0 Not Selected	379	97.7	97.7	97.7
	1 Selected	9	2.3	2.3	100.0
	Total	388	100.0	100.0	

**Q15 Today, VITLAccess is offered to Vermont clinicians at no cost. Would you continue to use VITLAccess if you had to pay to use it**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 I would definitely continue to use it, even if I had to pay for the service	1	.3	2.9	2.9
	2 I might use it if the cost is reasonable	7	1.8	20.0	22.9
	3 I would definitely not use it if I had to pay for the service	18	4.6	51.4	74.3
	4 Don't know	9	2.3	25.7	100.0
	Total	35	9.0	100.0	
Missing	System	353	91.0		
Total		388	100.0		

**Q17 How interested are you in using a secure provider portal to the VHIE, with a patient's consent, to access statewide medical information about a patient**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 Not interested	76	19.6	20.4	20.4
	2 Somewhat interested	145	37.4	39.0	59.4
	3 Very interested	119	30.7	32.0	91.4
	4 Don't know	32	8.2	8.6	100.0
	Total	372	95.9	100.0	
Missing	System	16	4.1		
Total		388	100.0		

**Q18 How interested are you in using a secure provider portal to the VHIE, with a patient's consent, to access your patient's prescription fill information (including controlled substances)**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 Not interested	97	25.0	26.2	26.2
	2 Somewhat interested	116	29.9	31.4	57.6
	3 Very interested	133	34.3	35.9	93.5
	4 Don't know	24	6.2	6.5	100.0
	Total	370	95.4	100.0	
Missing	System	18	4.6		
Total		388	100.0		

**Q19 Today, VITLAccess is offered to Vermont clinicians at no cost. Would your interest level change if you had to pay to use VITLAccess**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 I would still be interested, even if I had to pay for the service	16	4.1	4.4	4.4
	2 I Might be interested, but only if the cost is reasonable	102	26.3	27.8	32.2
	3 I would definitely not be interested if I had to pay for the VITLAccess	162	41.8	44.1	76.3
	4 Don't know	87	22.4	23.7	100.0
	Total	367	94.6	100.0	
Missing	System	21	5.4		
Total		388	100.0		

**Q20 If you received real-time notifications when your patient is admitted or discharged from a hospital or other admitting facility, how much would it improve the quality of care you are able to provide your patients**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 Greatly improve the quality of care	96	24.7	25.6	25.6
	2 Somewhat improve the quality of care	122	31.4	32.5	58.1
	3 Slightly improve the quality of care	61	15.7	16.3	74.4
	4 No improvement in the quality of care	68	17.5	18.1	92.5
	5 Don't know	28	7.2	7.5	100.0
	Total	375	96.6	100.0	
Missing	System	13	3.4		
Total		388	100.0		

**Q21 If you received real-time notifications when your patient is admitted or discharged from a hospital or other admitting facility, how frequently would you use this service**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 With almost every patient that I see	104	26.8	27.7	27.7
	2 With some patients that I see	69	17.8	18.4	46.1
	3 With a few patients	42	10.8	11.2	57.3
	4 On a very select basis, when a patient has special circumstances	54	13.9	14.4	71.7
	5 I wouldn't use this service	60	15.5	16.0	87.7
	6 Don't know	46	11.9	12.3	100.0
	Total	375	96.6	100.0	
Missing	System	13	3.4		
Total		388	100.0		

**Q22 If you or your care team were able to communicate with your patients through a secure texting platform during specified hours, how much would it improve the quality of care you are able to provide**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 Greatly improve the quality of care	40	10.3	10.7	10.7
	2 Somewhat improve the quality of care	105	27.1	28.2	38.9
	3 Slightly improve the quality of care	57	14.7	15.3	54.2
	4 No improvement in the quality of care	102	26.3	27.3	81.5
	5 Don't know	69	17.8	18.5	100.0
	Total	373	96.1	100.0	
Missing	System	15	3.9		
Total		388	100.0		

**Q23 If you or your care team were able to communicate with your patients through a secure texting platform during specified hours, how frequently would you use this service**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 With almost every patient that I see	30	7.7	8.0	8.0
	2 With some patients that I see	96	24.7	25.5	33.5
	3 With a few patients	31	8.0	8.2	41.8
	4 On a very select basis, when a patient has special circumstances	76	19.6	20.2	62.0
	5 I wouldn't use this service	94	24.2	25.0	87.0
	6 Don't know	49	12.6	13.0	100.0
	Total	376	96.9	100.0	
Missing	System	12	3.1		
Total		388	100.0		

**Q24 Does your practice receive Blueprint for Health Practice Profiles on a regular basis**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 Yes	87	22.4	23.1	23.1
	2 No	132	34.0	35.0	58.1
	3 Unsure	158	40.7	41.9	100.0
	Total	377	97.2	100.0	
Missing	System	11	2.8		
Total		388	100.0		

**Q25 How useful is the Blueprint for Health Practice Profile information in the treatment of your patients**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 Very useful	13	3.4	9.9	9.9
	2 Somewhat useful	30	7.7	22.9	32.8
	3 Slightly useful	25	6.4	19.1	51.9
	4 Not at all useful	18	4.6	13.7	65.6
	5 Don't know	45	11.6	34.4	100.0
	Total	131	33.8	100.0	
Missing	System	257	66.2		
Total		388	100.0		

**Q26 Is your practice a participant in one of the Vermont accountable care organizations**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 Yes	137	35.3	36.8	36.8
	2 No	112	28.9	30.1	66.9
	3 Unsure	123	31.7	33.1	100.0
	Total	372	95.9	100.0	
Missing	System	16	4.1		
Total		388	100.0		

**Q27 How useful are the analytics provided to you by your accountable care organization in the treatment of your patients**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 Very useful	2	.5	1.2	1.2
	2 Somewhat useful	36	9.3	21.4	22.6
	3 Slightly useful	30	7.7	17.9	40.5
	4 Not at all useful	29	7.5	17.3	57.7
	5 Don't know	71	18.3	42.3	100.0
	Total	168	43.3	100.0	
Missing	System	220	56.7		
Total		388	100.0		

**Q29 Are you willing to be contacted by Vermont Information Technology Leaders  
for follow-up questions regarding your answers to this survey**

		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1 Yes	88	22.7	25.2	25.2
	2 No	261	67.3	74.8	100.0
	Total	349	89.9	100.0	
Missing	System	39	10.1		
Total		388	100.0		

## Open-Ended Responses for All Respondents

**Q10TH At what type of practice do you work - Other**

	Count
1099 FOR A MANAGEMENT GROUP IN 1 HOSPITAL	1
ACADEMIC HEALTH CENTER	1
ACADEMIC HOSPITAL	1
ACADEMIC MEDICAL CENTER	1
ACADEMIC MEDICAL PRACTICE	1
AFFILATED WITH OTTER CREEK ASSOC	1
BLOOD BANK	1
BRATTLEBORO RETREAT	1
CMHC 25 YRS NOW SEMI RETIRED	1
COLLEGE COUNSELING CENTER	1
COLLEGE HEALTH SERVICE	1

**Q10TH At what type of practice do you work - Other**

	Count
COMMUNITY MENTAL HEALTH	2
COMMUNITY MENTAL HEALTH CLINICAL IN DESIGNATED AGENC	1
CRITICAL ACCESS HOSPITAL	1
DEPARTMENT OF CORRECTION-CONTRACTOR	1
DESIGNATED MENTAL HEALTH AGENCY	1
DISABILITY EXAMS	1
EMERGENCY MEDICINE	1
EXCLUSIVELY AT A NURSING HOME	1
FREE CLINIC	2
FREE STANDING PSYCHIATRIC HOSPITAL	1
HOME HEALTH	1
HOSPITAL-BASED INDEPENDENT PRACTICE	1
I AM IN A SABATICAL - DON'T SEE PATIENTS	1
INSURANCE COMPANY	1
LABORIST IN WASHINGTON	1
LOCUMS	1
LOCUMS PHYSICIAN IN HOSPITAL	1
LONG-TERM CARE	1
MEDICAL CENTER - ACADEMIC	1
NAVY CLINIC IN NEWPORT RI	1
NON-PROFIT CLINIC	1
NON-PROFIT HEALTH CENTER	1

**Q10TH At what type of practice do you work - Other**

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	Count
OPIOID TREATMENT PROGRAM	1
RESIDENTIAL PSYCH	1
RESUME M.M + CELLS	1
STATE DEP OF HEALTH CLINICS	1
STATE OF VT - HEALTH	1
STATE VETERANS HOME	1
SURGICAL ASSISTANT INDEMD	1
UNITED STATES ARMY RESERVES NURSE CORP	1
UNIVERSITY COUNSELING CENTER	1
VA	2
VA CLINIC	3
VA CLINICAL	1
VA OUTPATIENT CLINIC	1
VETERANS ADMIN OUTREACH CLINIC	1

**Q3 What is your specialty**

---

	Count
ADDICTION MEDICINE	1
ADDICTION/CHRONIC PAIN	1
ADULT ANP / WOMEN'S HEALTH	1
ANESTESIOLOGY	1
ANESTHESIA	3

### Q3 What is your specialty

---

	Count
ANESTHESIOLOGY	1
CARDIOLOGY	5
CARE COORDINATOR CHRONIC HOME TELEHEALTH CARE	1
CHILD ADOLESCENT PSYCHIATRY	1
CHILD PSYCHIATRY	3
CHILD PSYCHOLOGY	1
CHILD/ADOLESECENT PSYCHIATRY	1
CLIN. PSYCH AND ADDICTIONS	1
CLINICAL NEUROPSYCHOLOGIST	1
CLINICAL PSYCHOLOGY	10
COMMUNITY LTC	1
CRITICAL CARE MEDICINE	1
CRNA	1
DERMATOLOGY	3
DEVELOPMENTAL PEDIATRICS	1
EM	1
EMERG. MED.	1
EMERGENCY	1
EMERGENCY (MEDICAL DEPARTMENT)	1
EMERGENCY MED	2
EMERGENCY MEDICINE	11
ENT	1

### Q3 What is your specialty

---

	Count
ER	2
FAMILY NURSE PRACTITIONER	1
FAMILY PRACTICE	1
FORENSIC, NEUROPATHOLOGY	1
FP	1
GASTROENTEROLOGIST	1
GASTROENTEROLOGY	1
GENERAL SURGERY	2
GERIATRICS	1
GIM AND HOSPITALIST MED.	1
GYN	2
GYNECOLOGIC ONCOLOGY/GYNCOLOGY	1
GYNECOLOGY	1
HEM/ONC	1
HEMATOLOGY	1
HOME/ONC	1
HOSPITALIST	3
HOSPITALIST/INTERNAL MED.	1
INFECTIOUS DISEASES	2
INT. MEDICINE	1
INTERNAL MED	1
INTERNAL MEDICINE	8

### Q3 What is your specialty

---

	Count
INTERNAL MEDICE	1
MD PEDS/EMERGENCY	1
MIDWIFERY	1
NEONATOLOGY	1
NEUROLOGY	3
NEUROSURGERY	2
NURSE-MIDWIFERY	1
NURSE-MIDWIFERY OB/GYN	1
OB-GYN	1
OB/GYN	4
OBGYN	1
OCC MED	1
OCCUPATIONAL HEALTH	2
OCCUPATIONAL MEDICINE	1
ONCOLOGY	2
OPHMOLOGY	1
OPHTHALMOLOGY	4
ORTHO	1
ORTHO SURG	1
ORTHOPAEDIC SURGERY	2
ORTHOPAEDICS	1
ORTHOPEDIC SURGERY	2

### Q3 What is your specialty

---

	Count
ORTHOPEDICS	3
ORTHORPEDICS	1
OTHOPAEDIC SURGERY	1
OTOLARYNGOLOGY	1
PA HOME/ONC	1
PAIN MANAGEMENT	2
PAIN MEDICINE	1
PALLIATIVE CARE	1
PATHOLOGY	2
PEDIATRIC & MATERNITY MEDIC	1
PEDIATRIC NEUROLOGY	1
PEDIATRICS	5
PEDIATRY	1
PEDS ENDO	1
PHEUMOTOLOGY	1
PLASTIC SURGERY	2
PM&R	1
PODIATRY	1
PSYCH	1
PSYCH - MENTAL HEALTH	1
PSYCHIATRIC MENTAL HEALTH NURSE PRACTITIONER	1
PSYCHIATRY	22

**Q3 What is your specialty**

---

	Count
PSYCHIATRY CLINICAL INSTRUCTOR	1
PSYCHIATRY MENTAL HEALTH	1
PSYCHIATRY/ADDICTION MED	1
PSYCHOLOGIST	1
PSYCHOLOGY	11
PSYCHOTHERAPY	2
PSYHCOLOGY, CLINICAL	1
PULMONARY	1
PULMONORY + CRITICAL CARE	1
RADIAL ONCOLOGY	1
RADIOLOGY	3
RADIOLOGY (DIAGNOSTIC)	1
RHEUMATOLOGY	1
SURGERY GENERAL	1
TRAUMA ACUTE CARE SURGERY	1
UROLOGY	4
VASCULAR SURGERY	1
WOMEN'S & REPORDUCTIVE	1

**Q4OTH Which of the following best describes your job function-other**

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	Count
ACADEMIC- 70% RESEARCH, 30% CLINICAL	1
BEHAVIORAL HEA IP+OP	1
CLIN. & EDUCATION ALTHO I ALSO AM UVM EMPLOYED	1
CLIN. PRACTICE AND HIGH ED SEMI RETIRED	1
CMO	1
CONSULTANT	1
CONSULTING	1
DIRECTOR OF A PROGRAM AT VA	1
DISABILITY EXAMS	1
HOME HEALTH: MANAGEMENT OF SERVICES	1
LABORATORY PATHOLOGIST	1
MEDICAL DIRECTOR TISSUE BANK	1
NH/PALLIATIVE CARE	1
NO CLINICAL PRACTICE AT THIS TIME SEMI RETIRED	1
NP	1
NURSING HOME	1
OFF RIGHT NOW	1
PA	1
PARTIME SOME CLINICAL, MOST EDUCATIONAL	1
SKILLED NURSING AND REHABILITATION MANAGEMENT	1
SURGICAL ASSISTANT	1

**Q16 What could be done to make VITLAccess more useful for you**

	Count
DON'T KNOW AT THIS TIME	1
FASTER LEAD TIMES!	1
HAVE ALL INFORMATION AVAILABLE. OFTEN TIMES IT IS NOT VHIIE	1
HAVE IT TRULY INTEGRACE WITH OUR EMR OR AT LEAST A "BUTTON" FROM WITHIN OUR EMR THAT WOULD ALLOW ACCESS WITHOUT HAVING TO SIGN INTO "ANOTHER SYSTEM" I DON'T EVEN KNOW HOW TO GET IN WHAT MY PASSWORD IS - ALREADY HAVE TO USE PRISM & ALLSUSSCRIPTS CAN'T ADD ANOTHER SYSTEM.	1
I DON'T THINK THE SYSTEM IS WORKING AT ALL - THERE IS A NEVER ANYTHING AVAILABLE WHEN I LOOK FOR IT!	1
I STOPPED USING IT. IT WASN'T WORKING. IF THERE HAS BEEN A CHANGE, IT WAS FUNCTIONAL OR INTEGRATED IN MY HOSPITALS EMR, IT WOULD BE GREAT.	1
IF IT INCLUDED DATA FROM AMC. ITS FASTER TO CALL FOR DATA AT OUTSIDE AREA HOSPITALS	1
IF MORE LOCATIONS OBTAINED PT AUTHORIZATIONS TO ENABLE THE ACCES TO INFORMATION. EVEN WITH A SIGNED AUTHORIZATION WE HAVE BEEN UNABLE TO OBATAIN INFORMATION.	1
IT WOULD BE HELPFUL TO INFORM THE PUBLIC THAT THE REAL PURPOSE OF VITL IS NOT TO HELP PATIENTS GUT TO ADVANCE THE FINANCIAL INTERESTS OF THIRD PARTLY PAYERS.	1
N/A - MILITARY PRACTICE OUT-OF-STATE	1
NOHTING THAT I AM AWARE OF SINCE I DON'T RECALL ASURING IT YET.	1
ON THE WHOLE I THINK WAY TOO MUCH CONFIDENTIAL INFO ON CLIENTS/PATIENTS IS AVAILABLE VIS TECHNOLOGY!	1
PTS HAVE TO OPT OUT INSTEAD OF OPT IN	1
RELIABLE ACCESS TO PHYSICIAN NOTES/DISCHARDE SUMMARIES	1
TELL CLINICANS ABOUT IT.	1

THE CCD ARE ALMOST USELESS. THEY ARE LONG + THE ESSENTIAL INFORMATION ABOUT THE PATIENT IS BURIED WITHIN IT, IT TAKES FOREVER TO LOAD AND VIEW - HAS MOSTLY BEEN WORKERS CLINICALLY	1
WAS GIVEN SIGN IN HAD PASSWORD. DIDN'T USE, TROUBLE SIGING IN AND DID NOT FOLLOW UP	1
WE NEED TO REENGAGE IN USING THIS	1

**Q28 What additional types of clinical data analytics would help you with the treatment of your patients**

	Count
LOT OF DIAGNOSES - DIAGNOSES INCLUDING HT CATHS, MRIS , CT SCANS, ETC.	1
1. REGION-WIDE RX HISTORY WOULD SUPPIEMENT VT. RX. MONITORING DATA 2. RARELY MED LAB/NOTE DATA NOR ACCESIBLE BY FAR (ER PRACTICE)	1
A STATE WIDE ACUTE CARE DATABASE WOULD BE INTERESTING TO FOLLOW PATIENTS THROUGH THE CARE CONTINUM, ESPECIALLY IN SETTINGS WITH ONLY PART TIME SURGICAL COVERAGE.	1
A TRULY INTEGRATED SYSTEM THAT MEETS THE NEEDS OF SMALLER HEALTH ENTERS WOULD BE THE MOST HELPFUL THIS WORK FEELS LIKE VERY SMALL CHANGES IN A HUGE COMPLEX SYSTEM	1
ABLILTY TO AFFORD PRISM SO CAN COMMUNICATE UVM	1
ACCESS TO ACCURATE GENERAL INFO SUCH AS H&P FROM REFERRAL SOURCES	1
ACCESS TO IMAGINING ONLINE LIST OF PROVIDERS DATA FROM NEW YORK STATE	1
ACCESS TO PRENATAL RECORDS FROM OTHER PROVIDERS	1
CLINICAL DATA ANALYTICS?	1
CODES WHICH WOULD PAY ME FOR TIME SPENT ON COLLATERAL SERVICES INCLUDING PROFESSIONAL CONSULTS WITH OTHER HEALTH PROVIDERS OF MY CLIENTS	1

**Q28 What additional types of clinical data analytics would help you with the treatment of your patients**

	Count
COMPARISONS TO OTHER PRIMARY CARE PRIMARY CARE PRACTICES IN ACHIEVING PRACTICE GOALS SUCH A % DISBATIC PATIENTS SEEN AT LEAST TWICE PER YEAR; % ADULTS UP TO DATE WITH TETNUS SHOTS, OR PNEMONIA SHOT FOR ADULTS GREATER THAN 65 YEARS OLD. WE CAN RUN OUR OWN REPORTS BUT IT WOULD BE NICE TO COMPARE WITH OTHER PRACTICES.	1
COPIES OF PRIOR PSYCHOLOGICAL REPORT LAB DATA X RAYS, SCANS DISCHARGE SUMMARIES FROM OTHER FACILITIES CONSULTATION REPORTS	1
DETAILED HISTORIES AND DIAGNOSIS/PLANS WITH ACTUAL FREE FORM DICTATRY NOT THE CHECKLISTS + LISTS THAT THE EMR PROVIDES. INSURANCE COMPANIES MALPRACTICE AMBULANCE CHASERS, ATTORYNEYS, BILLING DEPARTMENTS + LARGE RESEARCH UNIVERSITIES LOVE EMR - PATIENTS + FULL-TIME CLINICAL PHYSICIANS, NOT SO MUCH LESS DEPENDENCE OF COMPUTERS + ELECTRONICS WOULD BE BETTER.	1
DISCHARGE MEDICATION LISTS WHEN A PATENT LEAVES A HOSPITAL	1
DOESN'T APPLY I PRACTICE IN MONTREAL	1
DON'T KNOW	2
DON'T KNOW NEW TO VERMONT.	1
DON'T KNOW THAT ANY OF THIS APPLIES TO MY PSYCHOLOGY PRACTICE	1
EXPANDED VPMS SERVICES TO A NATION-WIDE DATAT BASE. LIVE UPDATED MED LIST ACROSS SPECIALTIES.	1
GIVEN THAT I AM AN INDEPENDENT PRACTITIONER IN PRIVATE PRACTICE, I'M INTERESTED IN LEARNING ABOUT EMAIL SECURITY THAT IS AFFORDABLE & USER FRIENDLY FOR THE RECIEVERS OF MY EMAILS GIVEN THAT MANY OF THE PEOPLE I CONTACT I DO SO ON AN INFREQUENT BASIS.	1
HAVING ACCESS TO PRESCRIPTIONS TO CONTROLLED SUBSTANCES OUT OF THE STAT OF VT	1

**Q28 What additional types of clinical data analytics would help you with the treatment of your patients**

	Count
I AM A PATHOLOGIST. IF I COULD SEE WHICH TESTS HAVE ALREADY BEEN ORDERED I MIGHT BE ABLE TO IMPROVE TEST UTILIZATION, ESPECIALLY FOR EXPENSIVE TESTS. THE REQUIRMENT OF INDIVIDUAL PATIENT CONSENT MAKES THIS UNDOALBE.	1
I AM SORRY-I DON'T THINK THAT, AS A CLINICAL PSYCHOLOGIST IN PRIVATE PRACTICE, I'M YOUR TARGET AUDIENCE. BUT I TRIED TO BE HELPFUL.	1
I DON'T KNOW WHAT YOU MEAN BY "CLINICAL DATA ANALYTICS" SOUNDS LIKE JARGON	1
I HAVE MOSTLY DONE LIMITED PERIOD LOECUMS WORK IN MULTIPLE STATES, COME HAS BEEN OFFICE-ONLY PRIMARY CARE, BUT OTHERS HAVE INCLUDED EMERGENCY MED, OCCUPATIONAL MED, PSYCH. HS IN-PT URGENT -CARE COVERAGE (PSYCH W/ BACK + MEDICAL) URGENT - CARE CLINIC MED, AND CORRECTIONAL MED - THE LAST INCLUDING IN VT, NONE OF THSE EXCEPT PRIMARY CARE, FIT MOST OF THE QUESTIONS, NOR DO MOST FIT THESE PRACTICING ELSEWHERE, TO THE EXTENT THAT SOME QUESTIONS ARE NOT VT SPECIFIC, I AM NOW SEMI-RETIRED AND DOING ONLY ISOLATED DAYS + WEEKENDS FOR OTHER ORGANIZATIONS, SO HAVE I, LITTLE OR NO SENSE HOW THEY WOULD BE AFFECTED OR WHETHER INTERESTED.	1
I WILL NEVER LINK INTO ANY ELECTRONIC MEDICAL RECORD SYSTEM. IT'S UNETHICAL BECAUSE I CAN'T CONTROL WHO HAS ACCESS AND IT IS UNETHICAL TO EXPOSE MY PATIENTS TO HARMFUL THIRD-PARTY INFLUENCES.	1
I WORK WITHIN THE VA MEDICAL SYSTEM. I DOUBT I COULD TAKE ADVANTAGE OF THIS	1
I WOULD LIKE TO HAVE ACCESS TO DFC/STATES ATTORNEYS OFFICE IN SEXUAL HARMERS AND THEIR PERFORMACE ON PROBATION, FURLOUGH, ETC. MY TX POPULATION IS THE ADOLESCENT GROUP--THERE IS NO TRACKING OF THESE ABUSES IN THE DCF SYSTEM.	1
IF THIS SYSTEM REALLY WORKED, IT WOULD BE HELPFUL. SO FAR, IT HASN'T	1
INTEGRATED NEW ENGLAND/VT PRESCRIPTION MONITORING PROGRAM	1
LAB RESULTS	1

**Q28 What additional types of clinical data analytics would help you with the treatment of your patients**

	Count
LABS +PX, AS ABOVE	1
LABS NOTES MAGERG	1
LINK TO PHARMACY TO SEE MEDICATIONS WITH FILL DATES & REFILL	1
LISTS OF EVERY PATIENT SEEN IN ER OTHER ONCE A MONTH TO TINY TO TARGET WHO ON "HIGHEST" COST PATIENTS ARE...	1
MEDS, TEST RESULTS AND CONSULTS BY OTHER PRACTICES. ANY PAIN MEDICATION CONTRACTS AS WELL.	1
MORE FEEDBACK FROM PSYCH VISITS/COUNSELLING	1
MY MAIN WISHES ARE: 1. TO BE ABLE TO GET LABS FROM UVMMC PUT INTO MY EHR (PRACTICE FUSION) 2. TO BE ABLE O SEND HEALTH RECORDS ELECTRONICALLY TO UVMMC & OTHER HOSPITALS WHEN MY PT IS ADMITTED.	1
N/A	1
NARCOTIC USE MONITORING IMAGING PROCEDURES. LAB PROCEDURES.	1
NONE	5
NONE I AM A PATHOLOGIST I DO NOT INIVALUABLE WITH PATIENTS	1
NONE WOULD BE APPLICABLE TO TYPE OF CONSULTATION MY COMPANY USES.	1
NONE.	2
NOT APPLICABLE TO MY PRACTICE	1
NOT SURE	3
NOT THAT I AM AWARE OF.	1
NOTHING	1
PAST MEDICAL HISTORY MEDICATIONS OLD OPERATIVE REPORTS.	1
PATIENT REGISTRY DISEASE SPECIFIC W REPORTING ABILITY	1

**Q28 What additional types of clinical data analytics would help you with the treatment of your patients**

	Count
PMD H+P	1
PROBLEM LIST MEDICATION LISTS PRESCRIPTION TRACKING LAB RESULTS HISTORY	1
PROVIDER LEVEL DATA ON QUALITY METRICS	1
REAL-TIME, FULLY INTERGRATED, ALL-SOURCE CLINICAL, LABORATORY, READILOGRAHIC TESTING, AND PRESCRIPTION INFORMATION EMBEDDED IN OUR CURRENT EMR (NOT A STAND-ALONE APPLICATION). - ABLITIY TO QUARY DATABASE AND GENERAL REPROTS AND REGISTRIES FOR MY PATIENTS BASED ON DISEASE, MEDICATIONS, LAB RESULTS, OR OTHER CLINICAL PACMENTS.	1
RETURN TO PAPER CHARTS	1
SEE #31	1
SINCE WE ARE HOSPITAL OWNED THE PROVIDERS DON'T GET TO CHOOSE ANY OF THIS, AND WE KNOW NEXT TO NOTHING ABOUT ANY BLUEPRINT DATA OR OTHER DATA.	1
STREAMLINING INFORMATION FLOW. HAVING HARDWARE AND SOFTWARE CONSISTENTLY WORKING PROPERLY	1
THE CONTROLLED SUBSTANCE PIECE WOULD BE MOST HELPFUL. LAB DATA ALSO. WE HAVE FEMALES WHO LIKE TO USE LABS CLOSER TO THEIR HOMES.	1
THE CURRENT DATA REFLECTS POORLY ON THE REAL INFO OF THE PATIENTS	1
THE DATA WE GET IS GOOD BUT NO TIMELY. WOULD BE BETTER TO GET QUARTERLY REPORTS FROM PRIOR QUARTER TO REALLY IMPACT CHANGE	1
THERE IS ALREADY TOO MUCH INFORMATION BOMBARDING ME DAILY. NO TIME.	1
THESE ARE NOT HELPFUL. THEY ARE ANNOYING AT BEST AND DISTRACTION FROM CLINICAL CARE AT WORST. THE TECHNOLOGY IS STILL TO WEAK TO BE HELPFUL.	1
TO ADD THOSE ABILITIES MENTIONED WOULD BE A GOOD START	1
TOO SPECIFIC TO PAIN & FUNCTION FOR VITL. ANALYTICS AROUND OPIOID USE, ADDICTION, UNINTENTIONAL OVERDOES WOULD BE HELPFUL	1

**Q28 What additional types of clinical data analytics would help you with the treatment of your patients**

	Count
UNFORTUNATELY, THE VA'S EHR DOESN'T COMMUNICATE WITH ANY SYSTEMS OTHER THAN VA + DOD	1
UNSURE	4
UNTIL OUR MAIN EHR'S MORE EFFICIENT EFFECTIVE MORE IS NOT NECESSARILY HELPFUL	1
VERMONT MEDICAL MARIJUANA REGISTRY	1
WAY TO EASILY MEASURE CLINICAL OUTCOME TO TX/CARE PLANS.	1
WE ALREADY HAVE A PATIENT PORTAL WHICH WORKS WELL. WE WOULDN'T NEED ANOTHER FROM VITL	1
WE ALREADY HAVE A WAY OF ACCESSING CONTROLLED SUBSTANCE INFO ONLINE, AND PHARMACY INFO VIA THE EMR	1
WE ARE GETTING READY TO RETIRE AT THE END OF MAY---	1
WHEN PATIENT IS SEEN BY HIS/HER PCP CLINICAL NOTES	1
WORK @ HOSPITAL ER. ACCESS TO PATIENT RECORDS WOULD IMPROVE PATIENT CARE	1
WOULD LOVE TO BE ABLE TO USE REGISTRIES BASED ON DIAGNOSES - ALREADY TO OULL UP REFILLS ETC.	1
X-RAYS AND OTHER DIAGNOSTIC STUDIES	1
Total	388

**Q31 Please use the space below to provide any feedback or comments**

	Count
+/- 20% PRODUCTIVIES LOSS WITH EMR	1
AGAIN, THE CCDS ARE HUGE, CUMBERSOME = ALMOST UNREADABLE THERE IS STILL NO GOOD INTERFACE PA IMMUNIZATION WITH VITL	1
ALTHOUGH I LIVE IN VERMONT. I PRACTICE IN NH. I DO SEE MANY VT PATIENTS	1
APPRECIATE YOUR CONTACT - VERY GOOD SURVEY. MOST IMPORTATLY IS COENDIMATION OF CARE FOR PT- WORK AT THE VA MED. CENTER IN WRJ WHICH HAS A GREAT EMS - ACCESS ALL OTHER VA'S WOULD BE HELPFUL TO ACCESS OTHER PROVIDERS / HOSPITALS NON VA	1
AS A LOCUMS ONCOLOGIST WHO HAS WORKED IN BENNINGTON + RUTLAND I WAS UNAWARE OF THIS SERVICE. LIKELY THE BIGGEST AID WOULD BE LAB + IMAGING RESULTS + RECENT MEDICATIONS. I APOLOGIZE THAT MY ANSWERS AREN'T TOO HELPFUL DUE TO MY LIMITED WORK IN VERMONT	1
AS A PROVIDER THE PROBLEM IS GETTING TO BE TOO MUCH INFORMATION, A ONE PAGE DISCHARGE SUMMARE HAS UNIFIED TO 50 PAGES - WHO HAS TIME TO USE 50 PAGES FOR SPATTERING OF USEFUL INFORMATIVE AS THE FOLLOW UP PROVIDER.	1
AS ABOVE - SEMI RETIRED W/ MEDICAL DISABILITY. DO NOT SEE PATIENTS AT THIS TIME. TEACH IN A MEDICAL STUDENT COURSE PSYCHIATRIC INTERVIEWING W/ MY PATIENT AT DHMC	1
AS I AM IN THE LATE YEARS OF CLINICAL PRACTICE WITH A V. SMALL CASE LOAD AND W LIMITED TECH SAVVY, IT IS UNLIKELY I WILL BE COMPELLING CANDIDATE FOR VITL INVOLVMENT...AGE 77/50+ YEARS CLINICAL PRACTICE. BEST WISHES	1
AS PARTIME PHSCICIAN AT UNMMC, CAN'T ANSWER ALL QUESTION. HOWEVER, I THINK ACCESS TO DATA FROM OUTSIDE FACILITIES IS EQUAL GOAL. USE GET SOME NOW BUT I DON'T KNOW IF THOUGH VITL. ALSO WITHOUT DATA FROM YOU YOUR, MISS MUCH ON MANY PATIENTS	1
AS STATED - DOUBT THAT VA SYSTEM WOULD ALLOW	1
ASK A PSYCHOLOGIST THIS SERVICE IS NOT USEFUL TO ME	1

**Q31 Please use the space below to provide any feedback or comments**

	Count
BLUE PRINT VITLA MEANINGFUL (LESS) USE WASTE OF OUR TIME - WE NEED THAT TIME TO SEE PATIENT. OUR HEALTH CTR HAS ALWAYS BEEN A MEDICAL THORNE. WE DIDN'T NEED THIS EXTRA LAYER	1
CARE COORDINATION COOLLABORATION ARE IMPORTANT!	1
CURRENTLY WORKING IN STATE OF WASHINGTON. I ANTICIPATE OPENING A PART TIME PRACTICE IN SPRINGFIELD, VT. IN THE NEXT FEW MONTHS	1
DON'T KNOW	1
E.M.R. IS NOT LIVING UP TO THE ONLY BENEFIT TO PATIENTS + PHYSICIANS THAT IT COULD PROVIDE - AVAILABILITY OF USEFUL RECORDS (I NEED TO SEE ACTUAL CT + MRI SCANS NOT JUST REPORTS. ALSO THE RECORDS ARE OFTEN NOT SUEFUL BECAUSE THE STUTS EMR DICTATES HOW OUR PROVIDERS (MOSTLY NOT PHYSICIANS IN PRIMARY CARE) PRACTICE...A BIG LIST FULL OF COPY +PASTE WITH NO DETAILS OF HISTORY +NO EVIDENCE OF EXPLANATION OF THOUGHT PROCESS JUST A LIST FOR DT. + PLAN.	1
EMR IN SEVEARL ADD TO TIME INEFFICIENCY OF HEALTH CARE & HAVE NOT LIVED UP TO THE POTENTIAL BENEFIT. SYSTEMS ARE TOO SLOW & COMBERSOME.	1
FEDERAL GOVERNMENT DOES NOT ALLOW THIS USE	1
FORTUNATELY, OUR OFFICE MANAGER + CLINICAL CARE COORDINATORS DO MOST OF THE WORK FOR ME!	1
HOSPITALIST PRACTICE - NO OUT-PATIENT FOLLOW UP IN MY JOB.	1
I AM A CLINICAL PSYCHOLOGIST LICENSED IN VT, BUT MOST OF MY WORK IS IN MA - I'M NOT SURE IF I'M THE APPROPRIATE ACHIEVE FOR THIS SURVEY.	1
I AM A CRNA AND AS SUCH PROVIDE CARE TO SURGICAL OB, AND EMERGGENCY PATIENTS. MOST OF THESE ISSUES DO NOT PERTAIN TO THE CARE I PROVIDE.	1
I AM A DUAL CITIZEN US/CANADIAN WHO PRACTICES OB-GYN IN MONTREAL MCGILL UNIVERSITY HEALTH COMPLEX I HAVE A VALID ACTIVE VERMONT LISCENSE PRACTICES THERE	1
I AM A MASTER'S LEVEL PSYCHOLOGIST IN A VERY SMALL PRIVATE PRACTICE NEARING RETIREMENT	1

**Q31 Please use the space below to provide any feedback or comments**

	Count
I AM A ONE PERSON PRACTICE. I HAVE FOUND THE ADVANCES OF TECHNOLOGY PROVIDING AN IDEALIZED CONNECTEDNESS BUT THE IMPLEMENTATION IS FILLED WITH OBSTACLES. TIME AND LEAVING TO UTILIZE IT EFFECTIVELY AND STILL SURVIVE ARE GREAT CHALLENGES.	1
I AM ABLE TO ACCESS RECORDS FROM PATIENTS OF HOSPITAL OWNED PRIMARY CARE PRACTICES, AND OF PATIENTS SEEN AT UVMMC VIA PRISM. THIS GREATLY IMPROVES CARE, ESP VS PATIENTS SEEN AT DARTMOUTH WHOSE RECORDS I CAN'T ACCESS ELECTRONICALLY.	1
I AM NEW TO VT SO JUST LEARNING ABOUT RESOURCES. THIS SOUNDS HELPFUL EXCEPT THAT WER DO NOT HAVE AN EHR. WORKING ON IT!	1
I AM NOT AT ALL CLEAR WHAT INFO YOU ARE LOOKING FOR OR FROM WHOM	1
I AM NOT INTERESTED IN THIS SERVICE, ONLY BECAUSE OF THE TYPE OF WORK MY COMPANY DOES AND MY POSITION AS A CONSULTANT. I WOULD IMAGINE THIS SERVICE WOULD BE HELPFUL TO OTHERS IN THE FIELD THOUGH!	1
I AM OPPOSED TO THE EMR IN GENERAL. I FEEL THAT IT IS AN INTRUSION IN MY PATIENT INENTIONS, AND MOST PATIENTS HAVE NO INTERST IN THE DATA THE IS PROVIED. IT DOES NOTHING TO REDUCE THE COST OF HEALTH CARE IN THE USA - THAT MUST BE ACOMPLISHED BY KIDDING THEMSELVES. THE EXPENSIVE ADMINISTRATION OVERLAY OF THE PRIVATE INSUREANCE INDUSTRY.	1
I AM PART TIME CLINICIAN HOPE TO RETIRE IN A YEAR OR 2 THANKS	1
I AM SEMI RETIRED I ASSIST THE ORTHO SURG	1
I BELIEVE THIS WAS ALREADY DONE LAST MONTH. THE DOCTOR WAS NOT THE ONE WHO FILLED THIS OUT. (NO EMR AT THIS OFFICE.)	1
I CURRENTLY WORK FOR A HOSPITAL PRACTICE IN LITTLETON, NH SO I AM UNCLEAR IF NH HAS A SIMILAR ORGANIZATION TO VITL	1
I DO EVALUTAIONS FOR DEPT. OF DISABILTY ONCE A MONTH. THIS IS NOT REALLY APPLICABLE TO ME BUT SOUND GREAT. I USED TO WORK FOR A LARGE INSTITUTION WHICH EMR WITH INSTANT ACESS TO LAB + XR	1
I DO NOT PRACTICE IN VT.	1

**Q31 Please use the space below to provide any feedback or comments**

	Count
I DO NOT USE EHR WOULD BE HELPFUL TO ASK THAT AT BEGINNING OF SURVEY	1
I DO OCCUPATIONAL HEALTH - W/C CARE.	1
I DON'T PRACTICE IN VT BUT SEE A FAIR NUMBER OF VT PTS.	1
I HAVE YET TO PROVIDE SERVICES IN VT DUE TO MONTHS OF WAITING FOR PROVIDER ENROLMENT TO GREEN MOUNTAIN CARE. THUS, I AM NOT PRESENTLY ENGAGE WITH PCPs OR REFERRAL SOURCES	1
I KNOW OUR HOSPITAL HAS A RELATIONSHIP WITH VITL. I DON'T THINK THE GENERAL PC 'DOCS' KNOW MUCH ABOUT VITL, CERTAINLY NOT THE PEDIATRICIANS	1
I ONLY WORK 2 DAYS/WEEK AT MOUNTAINVIEW NURSING HOME	1
I PRACTICE IN MONTREAL. I HOLD A VERMONT LICENSE IN CASE I CHOOSE TO DO LOCUMS IN VERMONT	1
I THINK IT IS A GREAT IDEA! SHOULD LOWER THE COST IN ELIMINATING REPEAT TESTING	1
I THINK IT IS DISHONEST TO REPRESENT VITL AS FACILITATING CLINICAL CARE WITHOUT DISCLOSING HOW THIRD PARTIES CAN ACCESS THE DATA TO ADVANCE THEIR INTERESTS. SELFISH THIS POLL IS BIASED.	1
I THINK THE HIE IS A GREAT IDEA, BUT I HAVE NO IDEA HOW TO CONNECT.	1
I THINK THIS APPLIES MAINLY TO PEP/PRACTICES THAT ARE MEDICAL VS MENTAL HEALTH. ESP. SOLO PRACTITIONERS -IN MY VS HOSPITAL WORK HERE IS ESSENTIAL + GREAT IN PVT MENTAL HEALTH PRACTICE FEELS VERY DIFFERENT FOR A NUMBER OF REASONS	1
I UNDERSTAND THE INITIATIVE, BUT BEING AN UNPAID BETA TESTER OF TECHNOLOGY DURING TIME THAT IS BETTER SPENT CARING FOR PATIENTS IS A CONCERN.	1
I USED "I DON'T KNOW" WHEN I WAS UNSURE I COULD EXPLAIN IT TO ANYONE, THOUGHT I KNOW MORE THAN NOTHING.	1

**Q31 Please use the space below to provide any feedback or comments**

	Count
I WORK FOR A LARGE ORGANIZATION AS A RADIOLOGIST. CLEARLY HELPFUL TO HAVE ACESS TO OUTSIDE PT INFORMATION WHEN INTERPRETING SOME STUDIES. DATA NEEDS TO BE OBTAINED BY MY ORGANIZATION NOT BY ME PERSONALLY + RESIDE IN OUR EMR WHERE I CAN EASILY ACCESS IT.	1
I WORK FOR UVM MED CTR AND DON'T REALLY KNOW HOW THEY DECIDE WHAT TO OFFER US. EPIC HAS BEEN CHALLENGING.	1
I WORK FOR UVM SO I AM SURE THEY ARE INVOLVED IN THIS SOMEHOW?	1
I WORK IN NY. MY TIME IN VT IS AS A SKI-DOC @ STRATTON.	1
I WORK LOCUM TENENS IN 2 EMERGENCY ROOMS IN VT	1
I WORK ONLY INFREQUENTLY IN THE ED IN VT. I PRIMARILY WORK IN NH	1
I WORK VERY LITTLE IN VT AS A P.A. ER PROVIDER. I USE RX MONITORING IN VT + NY. I USE NY'S HIXNY REGULARLY	1
I WOULD BE HAPPY TO SEE THE THINGS IN THIS SURVEY IMPLEMENTED. THAT WOULD BE A GOOD START.	1
I WOULD ONLY BE INTERESTED IN TECHNOLOGICAL SERVICES THAT ARE INTUITIVE & USER FRIENDL . I AM NO TECHNOLOGICALLY SAVVY & DON'T HAVE THE TIME TO TRY & FIGURE THINGS OUT.	1
I'M A HOSPITAL O.R. BASED NURSE ANESTHETIST WHOS IS NOT A PRIMARY CARE PROVIDER, WHO DOES NOT ADMIT PATIENTS AND THIS NOT RELEVANT TO MY PRACTICE.	1
I'M LICENSED IN VT BUT OUR FQHC IS LOCATED IN NH WITH A SMALL SATALITE CLINIC IN CANAAN VT. THESE PATIENTS RECEIVE LABS ERE IN NH AND SO NOT CLEAR IF VHCE WOULD HAVE A SIGNIFICANT IMPACT ON A PRACTICE	1
I'M SORRY TO BE UNINFORMED ABOUT THIS. I WILL BE SEEKING INFO FROM MY ORGANIZATION ABOUT OUR PARTICIPATIONS - THANKS	1
INFORMATION IS GOOD WHN IT'S ACCURATE, THOROUGH, TIMELY AND ACCESSABLE. I WOULD LIKE TO GO TO SLEEP AND WAKE UP IN 20 YRS WHEN THE 1\$&??^@ SOFTWARE ENINGEERS HAVE FIGURED IT OUT.	1

**Q31 Please use the space below to provide any feedback or comments**

	Count
INTEGRATION INTO EMR IS VITAL/CRITICAL ALREADY I LOG INTO THE EMR THE VACCINATION REGISTER THE OPIATE REGISTRY THE LACK OF INTEGRATION SEVERELY IMPACTS CARE.	1
IT WOULD BE A REAL BOON TO ELECTRONICALLY LINK THE VA TO THE CIVILIAN COMMUNITY OF PROVIDES	1
JUST BEGAN WORKING IN VERMONT - SO I KNOW NOTHING OF THIS PROGRAM	1
LENGTHY - I HAVE A BUSY PRACTICE.	1
MANY OF QUESTIONS ABOVE - RESPONSES CONTROLLED MORE BY MD/MANAGER I WORK FOR	1
MANY OF THESE QUESTIONS DON'T PERTAIN TO MY PRACTICE IN PATHOLOGY	1
MAYBE MY OFFICE STAFF SOMEONE AT RRMV COULD ENLIGHTEN MY OFFICE	1
MINE IS AN INDEPENDENT PSYCHOLOGY PRACTICE. I ACCESS MY CLIENTS' MEDICAL PROFESSIONALS WHEN INDICATED FOR CLIENT WELL BEING.	1
MUCH OF THE PATIENT DIRECT COMMUNICATION TECHNOLOGIES HAVE LITTLE APPLICATION IN MY SPECIALTY (E.M.) THE ABOVE AND PRACTICE PROFILE ANALYTICS SEEM BETTER SUITED AND APPLICABLE TO THE PRIMARY CARE SETTING.	1
MY PRACTICE IS IN NYS FOR NOW. WHEN I SWITCH - I WILL USE ALL SERVICES	1
MY PRACTICE IS MOSTLY TO PREPARE INDEPENDENT MEDICAL EXAM REPORTS THUS MOST OF THIS SURVEY DOES NOT APPLY	1
MY PRACTICE IS NOT IN VERMONT.	1
N/A	2
NEW TO VERMONT, APRN LICENSE DIFFICULT TO GET IN RELATION TO OTHER STATES	1
NO COMMENTS.	1
NO TIME AVAILABLE NO TECHNOLOGY AVAILABLE. WILL CALL DOCTOR WHEN NEED AISES. I ASK CLIENT TO ASK DOCTOR TO DO TESTS AND I FOLLOW UP	1

**Q31 Please use the space below to provide any feedback or comments**

	Count
NO TIME TO UTILIZE A SPARATE VHIE . IT NEEDS TO FLOWS TO EHR	1
NONE	1
NONE OF THESE SERVICES ARE RELEVANT TO ANY CLINICAL PRACTIC OF PSYCHOLOGY (OUTPATIENT PSYCHOTHERAY)	1
NOT SURE WHAT THIS ALL MEANS!	1
NOT VERY APPLICABLE TO ME IN ANETHESIA	1
NOTED IN QUESTIONS. THERE IS ALREADY NOT ENOUGH TIME TO DO THE EVER INCREASING DATA ENTRY WHICH IS DISTRACTING FROM PATIENT CARE. MAKING DATA ACCESS, INPUT, AND FLOW SREAMLINED, EFFICIENT + UNIFORM FROM INSTITUTION TO INSTITUTION IS NEEDED.	1
OUR CURRENT EMR NOTIFIES THE PRACTICE OF ED VISITS, ADMISSIONS & D/C. WE CAN ACESS AL PT'S MEDICATIONS I'M NOT SURE HOW VITLACCESS OR VHIE WOULD BE OF ADDITIONAL BENEFIT.	1
OUR OFFICE DOES NOT HAVE ELECTRONIC HEALTH RECORDS. WE ARE A SMALL PRIVATE PRACTICE AND THE COST TO TRANSFER OUR PAPER CHARTS TO HER IS NOT REASONABLE!	1
OUR ORGANIZATION WILL BE REENGAGING IN THE VERY NEAR FUTURE. WE HAVE LOST TOUCH W/VITL AND WILL NOW HAVE STAFF RECONNECTING. OUR SURVEY REFLECTS THAT WE HAVE ACCESS BUT ARE NOT USING THE SYSTEM IN A MEANINGFUL WAY	1
PATIENTS HAVING TO OPT INTO THE PROGRAM MAKES IT OF LITTLE USE TO ME. SORRY. WE DON'T HAVE TIME OR RESOURCES TO EXPLAIN THE PROGRAM / SIGN PEOPLE UP.	1
REALLY N/A TO MY SPECIALITY	1
RETIRING AT END OF JULY '16	1
SEXUAL ABUSE OF CHILDREN IS THE PRIMARY DELIBERATE DAMAGING EVENT TO THOUSANDS OF VT CHILDREN. THERE IS NOT A CONTINUUIUM OF CARE OFR THE HARMERS. THERE IS NOT ANY TRACKING OF THEIR SUCCESS AFTER IDENTIFIED BY DCF. THIS IS AN INSTITUTIONAL NEGLECT ISSUE!!!	1

**Q31 Please use the space below to provide any feedback or comments**

	Count
SINCE I ONLY WORK WITH DECEASE TISSUE DONOR. THIS DOESN'T PERTAIN TO MY PRACTICE	1
SUSPECT THIS CLINICAL SETTING (4000/YR ER CENSUS) IS TOO SMALL TO MAKE GOOD USE OF STATEWIDE (ACD, ETC) DATA MINING. - ER'S MED SIMPLE, SWIFT ACCESS TO "MOST RECENT MIL DATA - OFTEN CAN NOT BE HAD EASILY, BUT FAX FROM LARGE HOSPITALS IS REALLY SUFFICIENT.	1
THE BIGGER NEED I HAVE IS THE ABILITY TO SEAL NOTES, LETTERS & OTHER INFO REFERRING TO CARE PROVIDERS SERVED IN THE EMR. SECOND THRU THE EMR-BILL OF QUALITY [?] EN & MV	1
THE CREATORS OF THIS SURVEY MAKES 2 ASSUMPTIOS THAT RESULT IN ALL MY NA'S +/OR THOSE OTHERS, 1) ALL VT LICENSE PROVIDERS ARE PRACTICING IN(OR VERG CLSOE TO) VT. 2)ALL SUCH PROVIDERS HAVT TYPICAL (MORE OR LESS) DR. PATIENTS, OU-PT TYPE RELATIONSHIPS. I LIVE IN ME, BUT HAVE KEPT UP MY VT LICENSE IN CASE WE MOVE BACK TO BECAUSE OVER THE PAST 9 YEARS.	1
THE CURRENT IT SYSTEM IS INSANE. TO HAVE ISOLATED SYSTEMS (I.E. DHMCJ, UVMC, CVMC) ALL WITH DIFFERENT DATA ON THE SAME PATIENT IS VERY POORLY THOUGHT OUT. PLEASE TRY TO DEVELOP A PATIENT CENTRIC SYSTEM, NO A PROVIDER CENTRIC SYSTEM.	1
THE GREATEST CHALLENGE IS THAT THERE ARE TO MANY PLATFORMS RATHER THAN ONE UNIFORM SERVICE THAT ALL MPS IN ONE STAT CAN UFC UNTIL ONE BECOMES DOMINANT. IT REMAINS VERY INCONVENIENT TO WORK THROUGH SEVERAL	1
THE NEED FOR INDIVIDUALIZED PATIENT CONSENT IS A MAJOR LIMITING FACTOR IN A REFERAL SETTING WHERE YOU HAVE MULTIPLE PROVIDERS CARING FOR EACH PATIENT. THIS IS PARTICULARLY TRUE FOR THE INPATIENT SETTING.	1
THE SHEER TIME/EFFORT FOR DATA COLLECTION STYMIES THE TIME FOR PATIENT CARE. THE POOR , POOR EMR STATUS MAKES THE AN VERY DIFFICULT - THANKS FOR TRYING.	1

**Q31 Please use the space below to provide any feedback or comments**

	Count
THE TEXTING PLATFORM MAKES ME NERVOUS AS I FEEL AS THOUGH WE WOULD RECEIVE A NUMBER OF PICTURES WITH THE HOPES OF A ONLINE DIAGNOSIS. IN THE MAJORITY OF CASES IT IS VERY IMPORTAT TO SEE THE PATIENT IN PERSON SO I AM CAUTIOUS WHEN CONSIDERING A WAY TO FURTHER SEPARATE IN PERSON COMMUNICATION.	1
THERE IS LITTLE CHANCE PATIENT'S CLINICAL INFO. CAN BE SHARED WITH OTHER PROVIDERS WHILE THEY ARE INCARCERATED.	1
THIS IS JUST MORE PALARER. THERE ARE SO MANY USELESS BEAUCRATIC REQUIREMENTS AND INFO. I HAVE NO TIME FOR PATIENTS. THAT'S WHAT I NEED. MORE TIME FOR MY PATIENTS. NOT USELESS B.S.	1
THIS SHOULD BE A FREE SERVICE BECAUSE IT'S JUST ANOTHER BUSINESS TAKING MONEY OUT OF HEALTHCARE OTHERWISE	1
UNLESS YOU INCLUDE DHMC IN YOUR CLINICAL INFO, HAVING ACCESS VISUAL NOT BE HELPFUL	1
USE ALTHA AS OUR MILITARY/DOD EHR.	1
UVM MEDICAL CENTER ALREADY PROVIDES AUTOMATIC COMMUNICATION WHEN MY PATIENTS ARE ADMITTED OR DISCHARED. - WHILE VITL IS POSITIONED AS AN EXCHANGED, RATHER THAN A DATABASE, THE POWER OF A STATEWIDE DATATBASE LINKING CLINICAL AND ADMINISTRATIVE DATA AT THE PATEAL LEVEL IS TREMENDOUSLY AND WOULD BE SUPPORTIVE TO UNDERSTANDING THE NEEDS AND IMPACTS OF REFORM EFFORTS.	1
VERY IMPORTANT FOR SAFE TRANSFERS FROM HOSPITAL TO CTL/REHAB AND HOME FOR TIMELY COMMUNICATION.	1
VITL ABILITY TO DELIVER ON THE INTERCONNECTIVITY OF STATEWIDE PRACTICES HAS BEEN A COMPLETE FAILURE	1
VITL IS A TOTAL WASTE OF MONEY - JUST SUPPORTING ANOTHER VT BUREAUCRACY AT THE EXPENSE OF PATIENTS!	1
VITL IS LIKE PLANNING PATIENT MEDICAL INFORMATION AT THE END OF YOUR DRIVEWAY TO A COFFE CAN. HUMOR SYSTEM	1

**Q31 Please use the space below to provide any feedback or comments**

	Count
VITL NEEDS BETTER PROMOTION. I KNOW LITTLE ABOUT IT.	1
WE ALREADY RECEIVE NOTIFICATION WHEN ANY OF OUR PTS ADMITTED TO THE OFFILIATED HOSPITAL NNC. THE DIFFICULT DRIVEN WHEN PTS ARE RX OR UVM MEDICAL CENTER OR ELSEWHERE	1
WE HAVE BEEN UNSUCCESSFUL WITH SVMC TO LINK LABS THRU VITL AND OUR EMR (PCC FROM WINOOSKI). WE STILL GET LAB/XRAY/ER/HOSP RECORD DOWNLOADS FROM THEM THRU A COMPUTER LINK BU THEN WE HAV TO INPUT INTO EMR. FRUSTRATING THERE IS NO AN IN HOUSE LEAD LINK TO VDH REGISTRY.	1
WE NEED A STATEWIDE SYSTEM THAT WORKS	1
WE WAITED YEARS FOR THE VITL LINK SO LABS FROM OUR LOCAL HOSPITAL COULD GO DIRECTLY TO OUR EMR. UNFORTUNELTY, THE FORMATTING OF THE DATA THROUGH THE LINK WAS HARDER TO READ/SIFT THROUGH FOR DATA AND MADE IT HARDER TO RELAY RESULTS TO PATIENTS THEN OUR PRIOR SYSTEM SO WE STOPPED USING IT.	1
WHILE HAVING AN ACCURATE MEDICAL HISTORY IS EXTREMELY IMPORTANT TO A PSYCHOLOGIST, THE DAY-TO-DAY MEDICAL INF LESS SO. KNOWING THAT A PATIENT HAS BEEN HOSPITALIZED WOULD BE USEFUL.	1
WHY ARE YOU KEEPING IT A SECRET?	1
WORK A VERY LIMITED NUMBER OF HOURS COVERING A BIRTHING CENTER - PATIENTS. IF I WERE A FULL TIME PROVIDER TRYING TO COORDINATE PATIENT INFO AND CARE THIS WOULD BE VERY INTERESTING.	1
YOU ALREADY TALKED TO MY STAFF 20-30 MINUTES EACH RECENTLY	1

## Responses by Primary Care Provider Status (n=382)

**Q1A At what type of practice do you work - Hospital \* Q2 Are you a primary care provider Crosstabulation**

		Q2 Are you a primary care provider			
			1 Yes	2 No	Total
Q1A At what type of practice do you work - Hospital	0 Not Selected	Count	146	136	282
		% within Q2 Are you a primary care provider	91.8%	61.0%	73.8%
	1 Selected	Count	13	87	100
		% within Q2 Are you a primary care provider	8.2%	39.0%	26.2%
Total		Count	159	223	382
		% within Q2 Are you a primary care provider	100.0%	100.0%	100.0%

**Q1B At what type of practice do you work - Hospital owned practice \* Q2 Are you a primary care provider Crosstabulation**

			Q2 Are you a primary care provider		
			1 Yes	2 No	Total
Q1B At what type of practice do you work - Hospital owned practice	0 Not Selected	Count	105	171	276
		% within Q2 Are you a primary care provider	66.0%	76.7%	72.3%
	1 Selected	Count	54	52	106
		% within Q2 Are you a primary care provider	34.0%	23.3%	27.7%
Total	Count		159	223	382
	% within Q2 Are you a primary care provider		100.0%	100.0%	100.0%

**Q1C At what type of practice do you work - Independent owned practice \* Q2 Are you a primary care provider Crosstabulation**

		Q2 Are you a primary care provider			
			1 Yes	2 No	Total
Q1C At what type of practice do you work - Independent owned practice	0 Not Selected	Count	102	151	253
		% within Q2 Are you a primary care provider	64.2%	67.7%	66.2%
	1 Selected	Count	57	72	129
		% within Q2 Are you a primary care provider	35.8%	32.3%	33.8%
Total		Count	159	223	382
		% within Q2 Are you a primary care provider	100.0%	100.0%	100.0%

**Q1D At what type of practice do you work - Federally qualified health center \* Q2 Are you a primary care provider Crosstabulation**

		Q2 Are you a primary care provider			
			1 Yes	2 No	Total
Q1D At what type of practice do you work - Federally qualified health center	0 Not Selected	Count	124	213	337
		% within Q2 Are you a primary care provider	78.0%	95.5%	88.2%
	1 Selected	Count	35	10	45
		% within Q2 Are you a primary care provider	22.0%	4.5%	11.8%
Total		Count	159	223	382
		% within Q2 Are you a primary care provider	100.0%	100.0%	100.0%

**Q1E At what type of practice do you work- Some other type of practice \* Q2 Are you a primary care provider Crosstabulation**

		Q2 Are you a primary care provider			
			1 Yes	2 No	Total
Q1E At what type of practice do you work- Some other type of practice	0 Not Selected	Count	144	195	339
		% within Q2 Are you a primary care provider	90.6%	87.4%	88.7%
	1 Selected	Count	15	28	43
		% within Q2 Are you a primary care provider	9.4%	12.6%	11.3%
Total		Count	159	223	382
		% within Q2 Are you a primary care provider	100.0%	100.0%	100.0%

**Q4 Which of the following best describes your job function \* Q2 Are you a primary care provider Crosstabulation**

		Q2 Are you a primary care provider			
		1 Yes	2 No	Total	
Q4 Which of the following best describes your job function	1 Clinical practice	Count	142	193	335
		% within Q2 Are you a primary care provider	94.7%	89.4%	91.5%
	2 Hospital management	Count	1	5	6
		% within Q2 Are you a primary care provider	0.7%	2.3%	1.6%
	3 Practice management	Count	3	2	5
		% within Q2 Are you a primary care provider	2.0%	0.9%	1.4%
	4 Educational	Count	1	5	6
		% within Q2 Are you a primary care provider	0.7%	2.3%	1.6%
	5 Other	Count	3	11	14
		% within Q2 Are you a primary care provider	2.0%	5.1%	3.8%
Total		Count	150	216	366

% within Q2 Are you a primary care provider	100.0%	100.0%	100.0%
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**Q5 Have you hear of VITL or Vermont Information Technology Leaders \* Q2 Are you a primary care provider Crosstabulation**

		Q2 Are you a primary care provider			
		1 Yes	2 No	Total	
Q5 Have you hear of VITL or Vermont Information Technology Leaders	1 Heard a lot	Count	44	15	59
		% within Q2 Are you a primary care provider	27.8%	6.7%	15.5%
	2 Heard some	Count	56	88	144
		% within Q2 Are you a primary care provider	35.4%	39.5%	37.8%
	3 Have not heard about VITL	Count	57	110	167
		% within Q2 Are you a primary care provider	36.1%	49.3%	43.8%
	4 Don't know	Count	1	10	11
		% within Q2 Are you a primary care provider	0.6%	4.5%	2.9%
Total	Count	158	223	381	

% within Q2 Are you a primary care provider	100.0%	100.0%	100.0%
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**Q6 Does you organization contribute clinical data to the Vermont Health Information exchange (VHIE) \* Q2 Are you a primary care provider Crosstabulation**

		Q2 Are you a primary care provider			
		1 Yes	2 No	Total	
Q6 Does you organization contribute clinical data to the Vermont Health Information exchange (VHIE)	1 Yes	Count	55	22	77
		% within Q2 Are you a primary care provider	34.8%	9.9%	20.3%
	2 No	Count	33	62	95
		% within Q2 Are you a primary care provider	20.9%	27.9%	25.0%
	3 Unsure	Count	70	138	208
		% within Q2 Are you a primary care provider	44.3%	62.2%	54.7%
Total	Count	158	222	380	
	% within Q2 Are you a primary care provider	100.0%	100.0%	100.0%	

**Q7 Does your organization receive clinical results (e.g., lab results, pathology reports) from the VHIE into your Electronic Health Record (EHR) \* Q2 Are you a primary care provider Crosstabulation**

			Q2 Are you a primary care provider		
			1 Yes	2 No	Total
Q7 Does your organization receive clinical results (e.g., lab results, pathology reports) from the VHIE into your Electronic Health Record (EHR)	1 Yes	Count	30	9	39
		% within Q2 Are you a primary care provider	19.6%	4.1%	10.5%
	2 No	Count	62	94	156
		% within Q2 Are you a primary care provider	40.5%	42.9%	41.9%
	3 Unsure	Count	61	116	177
		% within Q2 Are you a primary care provider	39.9%	53.0%	47.6%
Total		Count	153	219	372
		% within Q2 Are you a primary care provider	100.0%	100.0%	100.0%

**Q8 If clinical results from other health care organizations, such as laboratory results, were available in your EHR, how much would it improve the quality of care you are able to provide your patients \* Q2 Are you a primary care provider Crosstabulation**

		Q2 Are you a primary care provider			
		1 Yes	2 No	Total	
Q8 If clinical results from other health care organizations, such as laboratory results, were available in your EHR, how much would it improve the quality of care you are able to provide your patients	1 Greatly improve the quality of care	Count	61	79	140
		% within Q2 Are you a primary care provider	46.9%	39.5%	42.4%
	2 Somewhat improve the quality of care	Count	34	50	84
		% within Q2 Are you a primary care provider	26.2%	25.0%	25.5%
	3 Slightly improve the quality of care	Count	10	16	26
		% within Q2 Are you a primary care provider	7.7%	8.0%	7.9%
	4 No improvement in the quality of care	Count	9	20	29
		% within Q2 Are you a primary care provider	6.9%	10.0%	8.8%
	5 Don't know	Count	16	35	51
		% within Q2 Are you a primary care provider	12.3%	17.5%	15.5%

Total	Count	130	200	330
	% within Q2 Are you a primary care provider	100.0%	100.0%	100.0%

**Q9 How does the availability of clinical results from other health care organizations, such as laboratory results, in your EHR improve the quality of care you are able to provide your patients \* Q2 Are you a primary care provider Crosstabulation**

		Q2 Are you a primary care provider			
		1 Yes	2 No	Total	
Q9 How does the availability of clinical results form other health care organizations, such as laboratory results, in your EHR improve the quality of care you are able to provide your patients	1 Greatly improve the quality of care	Count	48	38	86
		% within Q2 Are you a primary care provider	53.9%	31.7%	41.1%
	2 Somewhat improve the quality of care	Count	16	21	37
		% within Q2 Are you a primary care provider	18.0%	17.5%	17.7%
	3 Slightly improve the quality of care	Count	5	12	17
		% within Q2 Are you a primary care provider	5.6%	10.0%	8.1%
	4 No improvement in the	Count	7	11	18

	quality of care	% within Q2 Are you a primary care provider	7.9%	9.2%	8.6%
	5 Don't know	Count	13	38	51
		% within Q2 Are you a primary care provider	14.6%	31.7%	24.4%
Total		Count	89	120	209
		% within Q2 Are you a primary care provider	100.0%	100.0%	100.0%

**Q10 Are you currently using the secure provider portal to the VHIE, known as VITLAccess, to access statewide medical information about your patients \* Q2 Are you a primary care provider Crosstabulation**

		Q2 Are you a primary care provider			
			1 Yes	2 No	Total
Q10 Are you currently using the secure provider portal to the VHIE, known as VITLAccess, to access statewide medical information about your patients	1 Yes	Count	14	3	17
		% within Q2 Are you a primary care provider	9.0%	1.4%	4.6%
	2 No	Count	123	169	292
		% within Q2 Are you a primary care provider	79.4%	77.5%	78.3%

	3 Unsure	Count	18	46	64
		% within Q2 Are you a primary care provider	11.6%	21.1%	17.2%
Total		Count	155	218	373
		% within Q2 Are you a primary care provider	100.0%	100.0%	100.0%

**Q11 When was the last time that you logged on to VITLAccess \* Q2 Are you a primary care provider Crosstabulation**

			Q2 Are you a primary care provider		
			1 Yes	2 No	Total
Q11 When was the last time that you logged on to VITLAccess	2 Within the last week	Count	4	1	5
		% within Q2 Are you a primary care provider	17.4%	6.7%	13.2%
	3 Within the last month	Count	2	1	3
		% within Q2 Are you a primary care provider	8.7%	6.7%	7.9%
	4 Sometime in the last year or more	Count	11	0	11
		% within Q2 Are you a primary care provider	47.8%	0.0%	28.9%

	5 Unsure	Count	6	13	19
		% within Q2 Are you a primary care provider	26.1%	86.7%	50.0%
Total		Count	23	15	38
		% within Q2 Are you a primary care provider	100.0%	100.0%	100.0%

**Q12 What is the frequency with which you use VITLAccess to find information about your patients \* Q2 Are you a primary care provider**  
**Crosstabulation**

		Q2 Are you a primary care provider			
		1 Yes	2 No	Total	
Q12 What is the frequency with which you use VITLAccess to find information about your patients	1 Almost every patient that I see	Count	1	0	1
		% within Q2 Are you a primary care provider	4.8%	0.0%	3.0%
	3 A few patients	Count	4	2	6
		% within Q2 Are you a primary care provider	19.0%	16.7%	18.2%
	4 On a very select basis, when	Count	11	1	12

	a patient has special circumstances	% within Q2 Are you a primary care provider	52.4%	8.3%	36.4%
	5 Don't know	Count	5	9	14
		% within Q2 Are you a primary care provider	23.8%	75.0%	42.4%
Total		Count	21	12	33
		% within Q2 Are you a primary care provider	100.0%	100.0%	100.0%

**Q13 When using VITLAccess, how often do you find information that is helpful for the immediate treatment of your patient \* Q2 Are you a primary care provider Crosstabulation**

		Q2 Are you a primary care provider			
			1 Yes	2 No	Total
Q13 When using VITLAccess, how often do you find information that is helpful for the immediate treatment of your patient	2 Most of the time	Count	3	0	3
		% within Q2 Are you a primary care provider	13.6%	0.0%	9.1%
	3 Some of the time	Count	7	2	9
		% within Q2 Are you a primary care provider	31.8%	18.2%	27.3%

4 Rarely	Count	3	0	3
	% within Q2 Are you a primary care provider	13.6%	0.0%	9.1%
5 Never	Count	2	4	6
	% within Q2 Are you a primary care provider	9.1%	36.4%	18.2%
6 Don't know	Count	7	5	12
	% within Q2 Are you a primary care provider	31.8%	45.5%	36.4%
Total	Count	22	11	33
	% within Q2 Are you a primary care provider	100.0%	100.0%	100.0%

**Q14A What patient information available through VITLAccess is most useful to you in treating your patients - Patient demographics \* Q2 Are you a primary care provider Crosstabulation**

			Q2 Are you a primary care provider		
			1 Yes	2 No	Total
Q14A What patient information available through VITLAccess is most useful to you in treating your patients - Patient demographics	0 Not Selected	Count	159	223	382
		% within Q2 Are you a primary care provider	100.0%	100.0%	100.0%
Total		Count	159	223	382
		% within Q2 Are you a primary care provider	100.0%	100.0%	100.0%

**Q14B What patient information available through VITLAccess is most useful to you in treating your patients - Patient encounter data (e.g., admit, discharge or transfer) \* Q2 Are you a primary care provider Crosstabulation**

			Q2 Are you a primary care provider		
			1 Yes	2 No	Total
Q14B What patient information available through VITLAccess is most useful to you in treating your patients - Patient	0 Not Selected	Count	154	220	374
		% within Q2 Are you a primary care provider	96.9%	98.7%	97.9%

encounter data (e.g., admit, discharge or transfer)	1 Selected	Count	5	3	8
		% within Q2 Are you a primary care provider	3.1%	1.3%	2.1%
Total		Count	159	223	382
		% within Q2 Are you a primary care provider	100.0%	100.0%	100.0%

**Q14C What patient information available through VITLAccess is most useful to you in treating your patients - Patient problem lists \* Q2 Are you a primary care provider Crosstabulation**

		Q2 Are you a primary care provider			
			1 Yes	2 No	Total
Q14C What patient information available through VITLAccess is most useful to you in treating your patients - Patient problem lists	0 Not Selected	Count	154	220	374
		% within Q2 Are you a primary care provider	96.9%	98.7%	97.9%
	1 Selected	Count	5	3	8
		% within Q2 Are you a primary care provider	3.1%	1.3%	2.1%
Total		Count	159	223	382

% within Q2 Are you a primary care provider	100.0%	100.0%	100.0%
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**Q14D What patient information available through VITLAccess is most useful to you in treating your patients - Laboratory Results**

**\* Q2 Are you a primary care provider Crosstabulation**

		Q2 Are you a primary care provider			
		1 Yes	2 No	Total	
Q14D What patient information available through VITLAccess is most useful to you in treating your patients - Laboratory Results	0 Not Selected	Count	145	219	364
		% within Q2 Are you a primary care provider	91.2%	98.2%	95.3%
	1 Selected	Count	14	4	18
		% within Q2 Are you a primary care provider	8.8%	1.8%	4.7%
Total		Count	159	223	382
		% within Q2 Are you a primary care provider	100.0%	100.0%	100.0%

**Q14E What patient information available through VITLAccess is most useful to you in treating your patients - Transcribed reports (e.g., radiology, ED discharge notes, etc.) \* Q2 Are you a primary care provider Crosstabulation**

			Q2 Are you a primary care provider		
			1 Yes	2 No	Total
Q14E What patient information available through VITLAccess is most useful to you in treating your patients - Transcribed reports (e.g., radiology, ED discharge notes, etc.)	0 Not Selected	Count	148	220	368
		% within Q2 Are you a primary care provider	93.1%	98.7%	96.3%
	1 Selected	Count	11	3	14
		% within Q2 Are you a primary care provider	6.9%	1.3%	3.7%
Total		Count	159	223	382
		% within Q2 Are you a primary care provider	100.0%	100.0%	100.0%

**Q14F What patient information available through VITLAccess is most useful to you in treating your patients - Medication history \***

**Q2 Are you a primary care provider Crosstabulation**

			Q2 Are you a primary care provider		
			1 Yes	2 No	Total
Q14F What patient information available through VITLAccess is most useful to you in treating your patients - Medication history	0 Not Selected	Count	151	220	371
		% within Q2 Are you a primary care provider	95.0%	98.7%	97.1%
	1 Selected	Count	8	3	11
		% within Q2 Are you a primary care provider	5.0%	1.3%	2.9%
Total		Count	159	223	382
		% within Q2 Are you a primary care provider	100.0%	100.0%	100.0%

**Q14G What patient information available through VITLAccess is most useful to you in treating your patients - Care summaries (Continuity of Care documents). \* Q2 Are you a primary care provider Crosstabulation**

			Q2 Are you a primary care provider		
			1 Yes	2 No	Total
Q14G What patient information available through VITLAccess is most useful to you in treating your patients - Care summaries (Continuity of Care documents).	0 Not Selected	Count	152	221	373
		% within Q2 Are you a primary care provider	95.6%	99.1%	97.6%
	1 Selected	Count	7	2	9
		% within Q2 Are you a primary care provider	4.4%	0.9%	2.4%
Total		Count	159	223	382
		% within Q2 Are you a primary care provider	100.0%	100.0%	100.0%

**Q15 Today, VITLAccess is offered to Vermont clinicians at no cost. Would you continue to use VITLAccess if you had to pay to use it \* Q2**

**Are you a primary care provider Crosstabulation**

			Q2 Are you a primary care provider		
			1 Yes	2 No	Total
Q15 Today, VITLAccess is offered to Vermont clinicians at no cost. Would you continue to use VITLAccess if you had to pay to use it	1 I would definitely continue to use it, even if I had to pay for the service	Count	0	1	1
		% within Q2 Are you a primary care provider	0.0%	8.3%	2.9%
	2 I might use it if the cost is reasonable	Count	6	1	7
		% within Q2 Are you a primary care provider	26.1%	8.3%	20.0%
	3 I would definitely not use it if I had to pay for the service	Count	12	6	18
		% within Q2 Are you a primary care provider	52.2%	50.0%	51.4%
	4 Don't know	Count	5	4	9
		% within Q2 Are you a primary care provider	21.7%	33.3%	25.7%
Total	Count	23	12	35	
	% within Q2 Are you a primary care provider	100.0%	100.0%	100.0%	

**Q17 How interested are you in using a secure provider portal to the VHIE, with a patient's consent, to access statewide medical information about a patient \* Q2 Are you a primary care provider Crosstabulation**

			Q2 Are you a primary care provider		
			1 Yes	2 No	Total
Q17 How interested are you in using a secure provider portal to the VHIE, with a patient's consent, to access statewide medical information about a patient	1 Not interested	Count	21	54	75
		% within Q2 Are you a primary care provider	14.2%	24.5%	20.4%
	2 Somewhat interested	Count	71	72	143
		% within Q2 Are you a primary care provider	48.0%	32.7%	38.9%
	3 Very interested	Count	45	74	119
		% within Q2 Are you a primary care provider	30.4%	33.6%	32.3%
	4 Don't know	Count	11	20	31
		% within Q2 Are you a primary care provider	7.4%	9.1%	8.4%
	Total	Count	148	220	368

% within Q2 Are you a primary care provider	100.0%	100.0%	100.0%
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**Q18 How interested are you in using a secure provider portal to the VHIE, with a patient's consent, to access your patient's prescription fill information (including controlled substances) \* Q2 Are you a primary care provider Crosstabulation**

		Q2 Are you a primary care provider			
		1 Yes	2 No	Total	
Q18 How interested are you in using a secure provider portal to the VHIE, with a patient's consent, to access your patient's prescription fill information (including controlled substances)	1 Not interested	Count	29	67	96
		% within Q2 Are you a primary care provider	19.7%	30.6%	26.2%
	2 Somewhat interested	Count	53	61	114
		% within Q2 Are you a primary care provider	36.1%	27.9%	31.1%
	3 Very interested	Count	55	78	133
		% within Q2 Are you a primary care provider	37.4%	35.6%	36.3%
	4 Don't know	Count	10	13	23
		% within Q2 Are you a primary care provider	6.8%	5.9%	6.3%

Total	Count	147	219	366
	% within Q2 Are you a primary care provider	100.0%	100.0%	100.0%

**Q19 Today, VITLAccess is offered to Vermont clinicians at no cost. Would your interest level change if you had to pay to use VITLAccess \***  
**Q2 Are you a primary care provider Crosstabulation**

		Q2 Are you a primary care provider			
		1 Yes	2 No	Total	
Q19 Today, VITLAccess is offered to Vermont clinicians at no cost. Would your interest level change if you had to pay to use VITLAccess	1 I would still be interested, even if i had to pay for the service	Count	4	12	16
		% within Q2 Are you a primary care provider	2.7%	5.5%	4.4%
	2 I Might be interested, but only if the cost is reasonable	Count	49	52	101
		% within Q2 Are you a primary care provider	33.6%	23.9%	27.7%
	3 I would definitely not be interested if I had to pay for the VITLAccess	Count	61	101	162
		% within Q2 Are you a primary care provider	41.8%	46.3%	44.5%
	4 Don't know	Count	32	53	85

	% within Q2 Are you a primary care provider	21.9%	24.3%	23.4%
Total	Count	146	218	364
	% within Q2 Are you a primary care provider	100.0%	100.0%	100.0%

**Q20 If you received real-time notifications when your patient is admitted or discharged from a hospital or other admitting facility, how much would it improve the quality of care you are able to provide your patients \* Q2 Are you a primary care provider Crosstabulation**

		Q2 Are you a primary care provider			
		1 Yes	2 No	Total	
Q20 If you received real-time notifications when your patient is admitted or discharged from a hospital or other admitting facility, how much would it improve the quality of care you are able to provide your patients	1 Greatly improve the quality of care	Count	45	50	95
		% within Q2 Are you a primary care provider	29.0%	23.1%	25.6%
	2 Somewhat improve the quality of care	Count	61	59	120
		% within Q2 Are you a primary care provider	39.4%	27.3%	32.3%
	3 Slightly improve the quality of care	Count	24	36	60
		% within Q2 Are you a primary care provider	15.5%	16.7%	16.2%

	4 No improvement in the quality of care	Count	16	52	68
		% within Q2 Are you a primary care provider	10.3%	24.1%	18.3%
	5 Don't know	Count	9	19	28
		% within Q2 Are you a primary care provider	5.8%	8.8%	7.5%
Total		Count	155	216	371
		% within Q2 Are you a primary care provider	100.0%	100.0%	100.0%

**Q21 If you received real-time notifications when your patient is admitted or discharged from a hospital or other admitting facility, how frequently would you use this service \* Q2 Are you a primary care provider Crosstabulation**

			Q2 Are you a primary care provider		
			1 Yes	2 No	Total
Q21 If you received real-time notifications when your patient is admitted or discharged from a hospital or other admitting facility, how frequently would	1 With almost every patient that I see	Count	53	50	103
		% within Q2 Are you a primary care provider	34.9%	22.8%	27.8%
	2 With some patients that I see	Count	37	32	69

you use this service	% within Q2 Are you a primary care provider	24.3%	14.6%	18.6%
3 With a few patients	Count	15	27	42
	% within Q2 Are you a primary care provider	9.9%	12.3%	11.3%
4 On a very select basis, when a patient has special circumstances	Count	18	35	53
	% within Q2 Are you a primary care provider	11.8%	16.0%	14.3%
5 I wouldn't use this service	Count	14	46	60
	% within Q2 Are you a primary care provider	9.2%	21.0%	16.2%
6 Don't know	Count	15	29	44
	% within Q2 Are you a primary care provider	9.9%	13.2%	11.9%
Total	Count	152	219	371
	% within Q2 Are you a primary care provider	100.0%	100.0%	100.0%

**Q22 If you or your care team were able to communicate with your patients through a secure texting platform during specified hours, how much would it improve the quality of care you are able to provide \* Q2 Are you a primary care provider Crosstabulation**

		Q2 Are you a primary care provider		
		1 Yes	2 No	Total
Q22 If you or your care team were able to communicate with your patients through a secure texting platform during specified hours, how much would it improve the quality of care you are able to provide	1 Greatly improve the quality of care	Count 12	27	39
	% within Q2 Are you a primary care provider	7.9%	12.4%	10.6%
	2 Somewhat improve the quality of care	Count 52	52	104
	% within Q2 Are you a primary care provider	34.2%	24.0%	28.2%
	3 Slightly improve the quality of care	Count 20	37	57
	% within Q2 Are you a primary care provider	13.2%	17.1%	15.4%
	4 No improvement in the quality of care	Count 35	67	102
	% within Q2 Are you a primary care provider	23.0%	30.9%	27.6%
	5 Don't know	Count 33	34	67
	% within Q2 Are you a primary care provider	21.7%	15.7%	18.2%

Total	Count	152	217	369
	% within Q2 Are you a primary care provider	100.0%	100.0%	100.0%

**Q23 If you or your care team were able to communicate with your patients through a secure texting platform during specified hours, how frequently would you use this service \* Q2 Are you a primary care provider Crosstabulation**

		Q2 Are you a primary care provider			
		1 Yes	2 No	Total	
Q23 If you or your care team were able to communicate with your patients through a secure texting platform during specified hours, how frequently would you use this service	1 With almost every patient that I see	Count	10	20	30
		% within Q2 Are you a primary care provider	6.5%	9.1%	8.0%
	2 With some patients that I see	Count	48	48	96
		% within Q2 Are you a primary care provider	31.4%	21.8%	25.7%
	3 With a few patients	Count	15	15	30
		% within Q2 Are you a primary care provider	9.8%	6.8%	8.0%
	4 On a very select basis, when	Count	26	49	75

	a patient has special circumstances	% within Q2 Are you a primary care provider	17.0%	22.3%	20.1%
	5 I wouldn't use this service	Count	28	66	94
		% within Q2 Are you a primary care provider	18.3%	30.0%	25.2%
	6 Don't know	Count	26	22	48
		% within Q2 Are you a primary care provider	17.0%	10.0%	12.9%
Total		Count	153	220	373
		% within Q2 Are you a primary care provider	100.0%	100.0%	100.0%

**Q24 Does your practice receive Blueprint for Health Practice Profiles on a regular basis \* Q2 Are you a primary care provider Crosstabulation**

			Q2 Are you a primary care provider		
			1 Yes	2 No	Total
Q24 Does your practice receive Blueprint for Health Practice Profiles on a regular	1 Yes	Count	68	19	87
		% within Q2 Are you a primary care provider	44.4%	8.6%	23.3%

basis	2 No	Count	34	96	130
		% within Q2 Are you a primary care provider	22.2%	43.6%	34.9%
	3 Unsure	Count	51	105	156
		% within Q2 Are you a primary care provider	33.3%	47.7%	41.8%
Total		Count	153	220	373
		% within Q2 Are you a primary care provider	100.0%	100.0%	100.0%

**Q25 How useful is the Blueprint for Health Practice Profile information in the treatment of your patients \* Q2 Are you a primary care provider Crosstabulation**

		Q2 Are you a primary care provider			
			1 Yes	2 No	Total
Q25 How useful is the Blueprint for Health Practice Profile information in the treatment of your patients	1 Very useful	Count	8	5	13
		% within Q2 Are you a primary care provider	10.1%	9.8%	10.0%
	2 Somewhat useful	Count	25	5	30

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		% within Q2 Are you a primary care provider	31.6%	9.8%	23.1%
	3 Slightly useful	Count	19	6	25
		% within Q2 Are you a primary care provider	24.1%	11.8%	19.2%
	4 Not at all useful	Count	12	6	18
		% within Q2 Are you a primary care provider	15.2%	11.8%	13.8%
	5 Don't know	Count	15	29	44
		% within Q2 Are you a primary care provider	19.0%	56.9%	33.8%
Total		Count	79	51	130
		% within Q2 Are you a primary care provider	100.0%	100.0%	100.0%

**Q26 Is your practice a participant in one of the Vermont accountable care organizations \* Q2 Are you a primary care provider Crosstabulation**

		Q2 Are you a primary care provider			
		1 Yes	2 No	Total	
Q26 Is your practice a participant in one of the Vermont accountable care organizations	1 Yes	Count	80	57	137
		% within Q2 Are you a primary care provider	51.9%	26.6%	37.2%
	2 No	Count	38	73	111
		% within Q2 Are you a primary care provider	24.7%	34.1%	30.2%
	3 Unsure	Count	36	84	120
		% within Q2 Are you a primary care provider	23.4%	39.3%	32.6%
Total		Count	154	214	368
		% within Q2 Are you a primary care provider	100.0%	100.0%	100.0%

**Q27 How useful are the analytics provided to you by your accountable care organization in the treatment of your patients \* Q2 Are you a primary care provider Crosstabulation**

		Q2 Are you a primary care provider			
			1 Yes	2 No	Total
Q27 How useful are the analytics provided to you by your accountable care organization in the treatment of your patients	1 Very useful	Count	1	1	2
		% within Q2 Are you a primary care provider	1.1%	1.3%	1.2%
	2 Somewhat useful	Count	26	10	36
		% within Q2 Are you a primary care provider	29.5%	12.7%	21.6%
	3 Slightly useful	Count	20	10	30
		% within Q2 Are you a primary care provider	22.7%	12.7%	18.0%
	4 Not at all useful	Count	16	12	28
		% within Q2 Are you a primary care provider	18.2%	15.2%	16.8%
	5 Don't know	Count	25	46	71
		% within Q2 Are you a primary care provider	28.4%	58.2%	42.5%

Total	Count	88	79	167
	% within Q2 Are you a primary care provider	100.0%	100.0%	100.0%

**Q29 Are you willing to be contacted by Vermont Information Technology Leaders for follow-up questions regarding your answers to this survey \* Q2 Are you a primary care provider Crosstabulation**

		Q2 Are you a primary care provider			
		1 Yes	2 No	Total	
Q29 Are you willing to be contacted by Vermont Information Technology Leaders for follow-up questions regarding your answers to this survey	1 Yes	Count	35	53	88
		% within Q2 Are you a primary care provider	25.2%	25.4%	25.3%
	2 No	Count	104	156	260
		% within Q2 Are you a primary care provider	74.8%	74.6%	74.7%
Total		Count	139	209	348
		% within Q2 Are you a primary care provider	100.0%	100.0%	100.0%

## Responses by Type of License Physician versus Nurse Practitioner (n=317)

**Q1A At what type of practice do you work - Hospital \* list Type of license Crosstabulation**

		list Type of license			
		1 Physician	2 Nurse Practitioner	Total	
Q1A At what type of practice do you work - Hospital	0 Not Selected	Count	169	60	229
		% within list Type of license	70.7%	76.9%	72.2%
	1 Selected	Count	70	18	88
		% within list Type of license	29.3%	23.1%	27.8%
Total		Count	239	78	317
		% within list Type of license	100.0%	100.0%	100.0%

**Q1B At what type of practice do you work - Hospital owned practice \* list Type of license Crosstabulation**

		list Type of license			
			2 Nurse Practitioner	Total	
			1 Physician		
Q1B At what type of practice do you work - Hospital owned practice	0 Not Selected	Count	164	51	215
		% within list Type of license	68.6%	65.4%	67.8%
	1 Selected	Count	75	27	102
		% within list Type of license	31.4%	34.6%	32.2%
Total		Count	239	78	317
		% within list Type of license	100.0%	100.0%	100.0%

**Q1C At what type of practice do you work - Independent owned practice \* list Type of license Crosstabulation**

		list Type of license			
			2 Nurse Practitioner	Total	
			1 Physician		
Q1C At what type of practice do you work - Independent owned practice	0 Not Selected	Count	170	63	233
		% within list Type of license	71.1%	80.8%	73.5%
	1 Selected	Count	69	15	84
		% within list Type of license	28.9%	19.2%	26.5%
Total		Count	239	78	317
		% within list Type of license	100.0%	100.0%	100.0%

**Q1D At what type of practice do you work - Federally qualified health center \* list Type of license Crosstabulation**

		list Type of license			
			2 Nurse Practitioner	Total	
			1 Physician		
Q1D At what type of practice do you work - Federally qualified health center	0 Not Selected	Count	212	64	276
		% within list Type of license	88.7%	82.1%	87.1%
	1 Selected	Count	27	14	41
		% within list Type of license	11.3%	17.9%	12.9%
Total		Count	239	78	317
		% within list Type of license	100.0%	100.0%	100.0%

**Q1E At what type of practice do you work- Some other type of practice \* list Type of license Crosstabulation**

		list Type of license			
			2 Nurse Practitioner	Total	
			1 Physician		
Q1E At what type of practice do you work- Some other type of practice	0 Not Selected	Count	214	67	281
		% within list Type of license	89.5%	85.9%	88.6%
	1 Selected	Count	25	11	36
		% within list Type of license	10.5%	14.1%	11.4%
Total		Count	239	78	317
		% within list Type of license	100.0%	100.0%	100.0%

**Q2 Are you a primary care provider \* list Type of license Crosstabulation**

			list Type of license		
			1 Physician	2 Nurse Practitioner	Total
Q2 Are you a primary care provider	1 Yes	Count	104	37	141
		% within list Type of license	44.3%	48.1%	45.2%
	2 No	Count	131	40	171
		% within list Type of license	55.7%	51.9%	54.8%
Total	Count		235	77	312
	% within list Type of license		100.0%	100.0%	100.0%

**Q4 Which of the following best describes your job function \* list Type of license Crosstabulation**

		list Type of license			
		1 Physician	2 Nurse Practitioner	Total	
Q4 Which of the following best describes your job function	1 Clinical practice	Count	204	71	275
		% within list Type of license	90.3%	93.4%	91.1%
	2 Hospital management	Count	6	0	6
		% within list Type of license	2.7%	0.0%	2.0%
	3 Practice management	Count	4	0	4
		% within list Type of license	1.8%	0.0%	1.3%
	4 Educational	Count	3	2	5
		% within list Type of license	1.3%	2.6%	1.7%
	5 Other	Count	9	3	12
		% within list Type of license	4.0%	3.9%	4.0%
Total		Count	226	76	302
		% within list Type of license	100.0%	100.0%	100.0%

**Q5 Have you hear of VITL or Vermont Information Technology Leaders \* list Type of license Crosstabulation**

		list Type of license			
			2 Nurse		
		1 Physician	Practitioner	Total	
Q5 Have you hear of VITL or Vermont Information Technology Leaders	1 Heard a lot	Count	47	9	56
		% within list Type of license	19.9%	11.5%	17.8%
	2 Heard some	Count	97	26	123
		% within list Type of license	41.1%	33.3%	39.2%
	3 Have not heard about VITL	Count	85	39	124
		% within list Type of license	36.0%	50.0%	39.5%
	4 Don't know	Count	7	4	11
		% within list Type of license	3.0%	5.1%	3.5%
Total		Count	236	78	314
		% within list Type of license	100.0%	100.0%	100.0%

**Q6 Does you organization contribute clinical data to the Vermont Health Information exchange (VHIE) \* list Type of license Crosstabulation**

			list Type of license		
			1 Physician	2 Nurse Practitioner	Total
Q6 Does you organization contribute clinical data to the Vermont Health Information exchange (VHIE)	1 Yes	Count	57	14	71
		% within list Type of license	24.1%	17.9%	22.5%
	2 No	Count	52	10	62
		% within list Type of license	21.9%	12.8%	19.7%
	3 Unsure	Count	128	54	182
		% within list Type of license	54.0%	69.2%	57.8%
Total	Count	237	78	315	
	% within list Type of license	100.0%	100.0%	100.0%	

**Q7 Does your organization receive clinical results (e.g., lab results, pathology reports) from the VHIE into your Electronic Health Record (EHR) \* list Type of license Crosstabulation**

			list Type of license		
			1 Physician	2 Nurse Practitioner	Total
Q7 Does your organization receive clinical results (e.g., lab results, pathology reports) from the VHIE into your Electronic Health Record (EHR)	1 Yes	Count	27	8	35
		% within list Type of license	11.7%	10.4%	11.4%
	2 No	Count	88	26	114
		% within list Type of license	38.1%	33.8%	37.0%
	3 Unsure	Count	116	43	159
		% within list Type of license	50.2%	55.8%	51.6%
Total	Count	231	77	308	
	% within list Type of license	100.0%	100.0%	100.0%	

**Q8 If clinical results from other health care organizations, such as laboratory results, were available in your EHR, how much would it improve the quality of care you are able to provide your patients \* list Type of license Crosstabulation**

		list Type of license			
		1 Physician	2 Nurse Practitioner	Total	
Q8 If clinical results from other health care organizations, such as laboratory results, were available in your EHR, how much would it improve the quality of care you are able to provide your patients	1 Greatly improve the quality of care	Count	89	37	126
		% within list Type of license	43.4%	52.9%	45.8%
	2 Somewhat improve the quality of care	Count	54	17	71
		% within list Type of license	26.3%	24.3%	25.8%
	3 Slightly improve the quality of care	Count	16	8	24
		% within list Type of license	7.8%	11.4%	8.7%
	4 No improvement in the quality of care	Count	11	3	14
		% within list Type of license	5.4%	4.3%	5.1%
	5 Don't know	Count	35	5	40
		% within list Type of license	17.1%	7.1%	14.5%
Total	Count	205	70	275	
	% within list Type of license	100.0%	100.0%	100.0%	

**Q9 How does the availability of clinical results from other health care organizations, such as laboratory results, in your EHR improve the quality of care you are able to provide your patients \* list Type of license Crosstabulation**

		list Type of license			
		1 Physician	2 Nurse Practitioner	Total	
Q9 How does the availability of clinical results form other health care organizations, such as laboratory results, in your EHR improve the quality of care you are able to provide your patients	1 Greatly improve the quality of care	Count	54	20	74
		% within list Type of license	40.9%	55.6%	44.0%
	2 Somewhat improve the quality of care	Count	30	6	36
		% within list Type of license	22.7%	16.7%	21.4%
	3 Slightly improve the quality of care	Count	12	2	14
		% within list Type of license	9.1%	5.6%	8.3%
	4 No improvement in the quality of care	Count	7	2	9
		% within list Type of license	5.3%	5.6%	5.4%
	5 Don't know	Count	29	6	35
		% within list Type of license	22.0%	16.7%	20.8%
Total	Count	132	36	168	
	% within list Type of license	100.0%	100.0%	100.0%	

**Q10 Are you currently using the secure provider portal to the VHIE, known as VITLAccess, to access statewide medical information about your patients \* list Type of license Crosstabulation**

			list Type of license		
			1 Physician	2 Nurse Practitioner	Total
Q10 Are you currently using the secure provider portal to the VHIE, known as VITLAccess, to access statewide medical information about your patients	1 Yes	Count	11	4	15
		% within list Type of license	4.8%	5.2%	4.9%
	2 No	Count	181	55	236
		% within list Type of license	78.7%	71.4%	76.9%
	3 Unsure	Count	38	18	56
		% within list Type of license	16.5%	23.4%	18.2%
Total	Count	230	77	307	
	% within list Type of license	100.0%	100.0%	100.0%	

**Q11 When was the last time that you logged on to VITLAccess \* list Type of license Crosstabulation**

		list Type of license			
		1 Physician	2 Nurse Practitioner	Total	
Q11 When was the last time that you logged on to VITLAccess	2 Within the last week	Count	2	2	4
		% within list Type of license	8.0%	33.3%	12.9%
	3 Within the last month	Count	2	0	2
		% within list Type of license	8.0%	0.0%	6.5%
	4 Sometime in the last year or more	Count	10	1	11
		% within list Type of license	40.0%	16.7%	35.5%
	5 Unsure	Count	11	3	14
		% within list Type of license	44.0%	50.0%	45.2%
	Total	Count	25	6	31
		% within list Type of license	100.0%	100.0%	100.0%

**Q12 What is the frequency with which you use VITLAccess to find information about your patients \* list Type of license Crosstabulation**

		list Type of license			
		1 Physician	2 Nurse Practitioner	Total	
Q12 What is the frequency with which you use VITLAccess to find information about your patients	1 Almost every patient that I see	Count	0	1	1
		% within list Type of license	0.0%	16.7%	3.7%
	3 A few patients	Count	4	1	5
		% within list Type of license	19.0%	16.7%	18.5%
	4 On a very select basis, when a patient has special circumstances	Count	10	1	11
		% within list Type of license	47.6%	16.7%	40.7%
	5 Don't know	Count	7	3	10
		% within list Type of license	33.3%	50.0%	37.0%
	Total	Count	21	6	27
		% within list Type of license	100.0%	100.0%	100.0%

**Q13 When using VITLAccess, how often do you find information that is helpful for the immediate treatment of your patient \* list**

**Type of license Crosstabulation**

			list Type of license		
			1 Physician	2 Nurse Practitioner	Total
Q13 When using VITLAccess, how often do you find information that is helpful for the immediate treatment of your patient	2 Most of the time	Count	1	1	2
		% within list Type of license	4.5%	16.7%	7.1%
	3 Some of the time	Count	7	0	7
		% within list Type of license	31.8%	0.0%	25.0%
	4 Rarely	Count	2	1	3
		% within list Type of license	9.1%	16.7%	10.7%
	5 Never	Count	2	2	4
		% within list Type of license	9.1%	33.3%	14.3%
	6 Don't know	Count	10	2	12
		% within list Type of license	45.5%	33.3%	42.9%
	Total	Count	22	6	28
		% within list Type of license	100.0%	100.0%	100.0%

**Q14A What patient information available through VITLAccess is most useful to you in treating your patients - Patient demographics \* list Type of license Crosstabulation**

		list Type of license			
		1 Physician	2 Nurse Practitioner	Total	
Q14A What patient information available through VITLAccess is most useful to you in treating your patients - Patient demographics	0 Not Selected	Count	239	78	317
		% within list Type of license	100.0%	100.0%	100.0%
Total		Count	239	78	317
		% within list Type of license	100.0%	100.0%	100.0%

**Q14B What patient information available through VITLAccess is most useful to you in treating your patients - Patient encounter data (e.g., admit, discharge or transfer) \* list Type of license Crosstabulation**

			list Type of license			
			1 Physician	2 Nurse Practitioner	Total	
Q14B What patient information available through VITLAccess is most useful to you in treating your patients - Patient encounter data (e.g., admit, discharge or transfer)	0 Not Selected	Count	233	78	311	
		% within list Type of license	97.5%	100.0%	98.1%	
	1 Selected	Count	6	0	6	
		% within list Type of license	2.5%	0.0%	1.9%	
	Total		Count	239	78	317
			% within list Type of license	100.0%	100.0%	100.0%

**Q14C What patient information available through VITLAccess is most useful to you in treating your patients - Patient problem lists \* list Type of license Crosstabulation**

			list Type of license		
			1 Physician	2 Nurse Practitioner	Total
Q14C What patient information available through VITLAccess is most useful to you in treating your patients - Patient problem lists	0 Not Selected	Count	235	76	311
		% within list Type of license	98.3%	97.4%	98.1%
	1 Selected	Count	4	2	6
		% within list Type of license	1.7%	2.6%	1.9%
Total		Count	239	78	317
		% within list Type of license	100.0%	100.0%	100.0%

**Q14D What patient information available through VITLAccess is most useful to you in treating your patients - Laboratory**  
**Results \* list Type of license Crosstabulation**

			list Type of license		
			1 Physician	2 Nurse Practitioner	Total
Q14D What patient information available through VITLAccess is most useful to you in treating your patients - Laboratory	0 Not Selected	Count	226	74	300
		% within list Type of license	94.6%	94.9%	94.6%
Results	1 Selected	Count	13	4	17
		% within list Type of license	5.4%	5.1%	5.4%
Total		Count	239	78	317
		% within list Type of license	100.0%	100.0%	100.0%

**Q14E What patient information available through VITLAccess is most useful to you in treating your patients - Transcribed reports (e.g., radiology, ED discharge notes, etc.) \* list Type of license Crosstabulation**

			list Type of license		
			1 Physician	2 Nurse Practitioner	Total
Q14E What patient information available through VITLAccess is most useful to you in treating your patients - Transcribed reports (e.g., radiology, ED discharge notes, etc.)	0 Not Selected	Count	229	76	305
		% within list Type of license	95.8%	97.4%	96.2%
	1 Selected	Count	10	2	12
		% within list Type of license	4.2%	2.6%	3.8%
Total		Count	239	78	317
		% within list Type of license	100.0%	100.0%	100.0%

**Q14F What patient information available through VITLAccess is most useful to you in treating your patients - Medication history \* list Type of license Crosstabulation**

			list Type of license		
			1 Physician	2 Nurse Practitioner	Total
Q14F What patient information available through VITLAccess is most useful to you in treating your patients - Medication history	0 Not Selected	Count	233	74	307
		% within list Type of license	97.5%	94.9%	96.8%
	1 Selected	Count	6	4	10
		% within list Type of license	2.5%	5.1%	3.2%
Total		Count	239	78	317
		% within list Type of license	100.0%	100.0%	100.0%

**Q14G What patient information available through VITLAccess is most useful to you in treating your patients - Care summaries (Continuity of Care documents). \* list Type of license Crosstabulation**

			list Type of license		
			1 Physician	2 Nurse Practitioner	Total
Q14G What patient information available through VITLAccess is most useful to you in treating your patients - Care summaries (Continuity of Care documents).	0 Not Selected	Count	236	75	311
		% within list Type of license	98.7%	96.2%	98.1%
	1 Selected	Count	3	3	6
		% within list Type of license	1.3%	3.8%	1.9%
Total		Count	239	78	317
		% within list Type of license	100.0%	100.0%	100.0%

**Q15 Today, VITLAccess is offered to Vermont clinicians at no cost. Would you continue to use VITLAccess if you had to pay to use it \* list**

**Type of license Crosstabulation**

		list Type of license			
		1 Physician	2 Nurse Practitioner	Total	
Q15 Today, VITLAccess is offered to Vermont clinicians at no cost. Would you continue to use VITLAccess if you had to pay to use it	1 I would definitely continue to use it, even if I had to pay for the service	Count	1	0	1
		% within list Type of license	4.3%	0.0%	3.3%
	2 I might use it if the cost is reasonable	Count	4	3	7
		% within list Type of license	17.4%	42.9%	23.3%
	3 I would definitely not use it if I had to pay for the service	Count	14	0	14
		% within list Type of license	60.9%	0.0%	46.7%
	4 Don't know	Count	4	4	8
		% within list Type of license	17.4%	57.1%	26.7%
Total		Count	23	7	30
		% within list Type of license	100.0%	100.0%	100.0%

**Q17 How interested are you in using a secure provider portal to the VHIE, with a patient's consent, to access statewide medical information about a patient \* list Type of license Crosstabulation**

		list Type of license			
		1 Physician	2 Nurse Practitioner	Total	
Q17 How interested are you in using a secure provider portal to the VHIE, with a patient's consent, to access statewide medical information about a patient	1 Not interested	Count	41	8	49
		% within list Type of license	18.1%	10.5%	16.2%
	2 Somewhat interested	Count	93	27	120
		% within list Type of license	41.2%	35.5%	39.7%
	3 Very interested	Count	73	34	107
		% within list Type of license	32.3%	44.7%	35.4%
	4 Don't know	Count	19	7	26
		% within list Type of license	8.4%	9.2%	8.6%
	Total	Count	226	76	302
		% within list Type of license	100.0%	100.0%	100.0%

**Q18 How interested are you in using a secure provider portal to the VHIE, with a patient's consent, to access your patient's prescription fill information (including controlled substances) \* list Type of license Crosstabulation**

		list Type of license			
		1 Physician	2 Nurse Practitioner	Total	
Q18 How interested are you in using a secure provider portal to the VHIE, with a patient's consent, to access your patient's prescription fill information (including controlled substances)	1 Not interested	Count	59	11	70
		% within list Type of license	26.3%	14.5%	23.3%
	2 Somewhat interested	Count	74	24	98
		% within list Type of license	33.0%	31.6%	32.7%
	3 Very interested	Count	80	35	115
		% within list Type of license	35.7%	46.1%	38.3%
	4 Don't know	Count	11	6	17
		% within list Type of license	4.9%	7.9%	5.7%
	Total	Count	224	76	300
		% within list Type of license	100.0%	100.0%	100.0%

**Q19 Today, VITLAccess is offered to Vermont clinicians at no cost. Would your interest level change if you had to pay to use VITLAccess**

**\* list Type of license Crosstabulation**

			list Type of license		
			1 Physician	2 Nurse Practitioner	Total
Q19 Today, VITLAccess is offered to Vermont clinicians at no cost. Would your interest level change if you had to pay to use VITLAccess	1 I would still be interested, even if i had to pay for the service	Count	11	3	14
		% within list Type of license	5.0%	3.9%	4.7%
	2 I Might be interested, but only if the cost is reasonable	Count	71	22	93
		% within list Type of license	32.0%	28.9%	31.2%
	3 I would definitely not be interested if I had to pay for the VITLAccess	Count	97	25	122
		% within list Type of license	43.7%	32.9%	40.9%
	4 Don't know	Count	43	26	69
		% within list Type of license	19.4%	34.2%	23.2%
Total	Count	222	76	298	
	% within list Type of license	100.0%	100.0%	100.0%	

**Q20 If you received real-time notifications when your patient is admitted or discharged from a hospital or other admitting facility, how much would it improve the quality of care you are able to provide your patients \* list Type of license Crosstabulation**

		list Type of license			
		1 Physician	2 Nurse Practitioner	Total	
Q20 If you received real-time notifications when your patient is admitted or discharged from a hospital or other admitting facility, how much would it improve the quality of care you are able to provide your patients	1 Greatly improve the quality of care	Count	57	25	82
		% within list Type of license	25.0%	32.5%	26.9%
	2 Somewhat improve the quality of care	Count	79	27	106
		% within list Type of license	34.6%	35.1%	34.8%
	3 Slightly improve the quality of care	Count	33	14	47
		% within list Type of license	14.5%	18.2%	15.4%
	4 No improvement in the quality of care	Count	39	11	50
		% within list Type of license	17.1%	14.3%	16.4%
	5 Don't know	Count	20	0	20
		% within list Type of license	8.8%	0.0%	6.6%
Total		Count	228	77	305
		% within list Type of license	100.0%	100.0%	100.0%

**Q21 If you received real-time notifications when your patient is admitted or discharged from a hospital or other admitting facility, how frequently would you use this service \* list Type of license Crosstabulation**

		list Type of license			
		1 Physician	2 Nurse Practitioner	Total	
Q21 If you received real-time notifications when your patient is admitted or discharged from a hospital or other admitting facility, how frequently would you use this service	1 With almost every patient that I see	Count	69	25	94
		% within list Type of license	30.4%	32.5%	30.9%
	2 With some patients that I see	Count	44	15	59
		% within list Type of license	19.4%	19.5%	19.4%
	3 With a few patients	Count	23	11	34
		% within list Type of license	10.1%	14.3%	11.2%
	4 On a very select basis, when a patient has special circumstances	Count	25	11	36
		% within list Type of license	11.0%	14.3%	11.8%
	5 I wouldn't use this service	Count	36	9	45
		% within list Type of license	15.9%	11.7%	14.8%
	6 Don't know	Count	30	6	36

	% within list Type of license	13.2%	7.8%	11.8%
Total	Count	227	77	304
	% within list Type of license	100.0%	100.0%	100.0%

**Q22 If you or your care team were able to communicate with your patients through a secure texting platform during specified hours, how much would it improve the quality of care you are able to provide \* list Type of license Crosstabulation**

		list Type of license			
		1 Physician	2 Nurse Practitioner	Total	
Q22 If you or your care team were able to communicate with your patients through a secure texting platform during specified hours, how much would it improve the quality of care you are able to provide	1 Greatly improve the quality of care	Count	29	7	36
		% within list Type of license	12.9%	9.1%	11.9%
	2 Somewhat improve the quality of care	Count	64	29	93
		% within list Type of license	28.4%	37.7%	30.8%
	3 Slightly improve the quality of care	Count	32	12	44
		% within list Type of license	14.2%	15.6%	14.6%
	4 No improvement in the quality of care	Count	61	16	77
		% within list Type of license	27.1%	20.8%	25.5%

	5 Don't know	Count	39	13	52
		% within list Type of license	17.3%	16.9%	17.2%
Total		Count	225	77	302
		% within list Type of license	100.0%	100.0%	100.0%

**Q23 If you or your care team were able to communicate with your patients through a secure texting platform during specified hours, how frequently would you use this service \* list Type of license Crosstabulation**

		list Type of license			
		1 Physician	2 Nurse Practitioner	Total	
Q23 If you or your care team were able to communicate with your patients through a secure texting platform during specified hours, how frequently would you use this service	1 With almost every patient that I see	Count	21	2	23
		% within list Type of license	9.2%	2.6%	7.5%
	2 With some patients that I see	Count	62	27	89
		% within list Type of license	27.2%	35.1%	29.2%
	3 With a few patients	Count	21	7	28
		% within list Type of license	9.2%	9.1%	9.2%
	4 On a very select basis, when	Count	40	15	55
		% within list Type of license			

	a patient has special circumstances	% within list Type of license	17.5%	19.5%	18.0%
	5 I wouldn't use this service	Count	56	16	72
		% within list Type of license	24.6%	20.8%	23.6%
	6 Don't know	Count	28	10	38
		% within list Type of license	12.3%	13.0%	12.5%
Total		Count	228	77	305
		% within list Type of license	100.0%	100.0%	100.0%

**Q24 Does your practice receive Blueprint for Health Practice Profiles on a regular basis \* list Type of license  
Crosstabulation**

			list Type of license		
			1 Physician	2 Nurse Practitioner	Total
Q24 Does your practice receive Blueprint for Health Practice Profiles on a regular basis	1 Yes	Count	55	23	78
		% within list Type of license	23.9%	29.9%	25.4%
	2 No	Count	75	23	98

		% within list Type of license	32.6%	29.9%	31.9%
	3 Unsure	Count	100	31	131
		% within list Type of license	43.5%	40.3%	42.7%
Total		Count	230	77	307
		% within list Type of license	100.0%	100.0%	100.0%

**Q25 How useful is the Blueprint for Health Practice Profile information in the treatment of your patients \* list Type of license**  
**Crosstabulation**

		list Type of license			
			1 Physician	2 Nurse Practitioner	Total
Q25 How useful is the Blueprint for Health Practice Profile information in the treatment of your patients	1 Very useful	Count	7	5	12
		% within list Type of license	8.8%	15.2%	10.6%
	2 Somewhat useful	Count	19	7	26
		% within list Type of license	23.8%	21.2%	23.0%
	3 Slightly useful	Count	17	6	23
		% within list Type of license	21.3%	18.2%	20.4%

	4 Not at all useful	Count	12	3	15
		% within list Type of license	15.0%	9.1%	13.3%
	5 Don't know	Count	25	12	37
		% within list Type of license	31.3%	36.4%	32.7%
Total		Count	80	33	113
		% within list Type of license	100.0%	100.0%	100.0%

**Q26 Is your practice a participant in one of the Vermont accountable care organizations \* list Type of license**  
**Crosstabulation**

			list Type of license		
			1 Physician	2 Nurse Practitioner	Total
Q26 Is your practice a participant in one of the Vermont accountable care organizations	1 Yes	Count	99	28	127
		% within list Type of license	43.8%	35.9%	41.8%
	2 No	Count	68	14	82
		% within list Type of license	30.1%	17.9%	27.0%
	3 Unsure	Count	59	36	95
		% within list Type of license			

	% within list Type of license	26.1%	46.2%	31.3%
Total	Count	226	78	304
	% within list Type of license	100.0%	100.0%	100.0%

**Q27 How useful are the analytics provided to you by your accountable care organization in the treatment of your patients \* list Type of license Crosstabulation**

		list Type of license			
		1 Physician	2 Nurse Practitioner	Total	
Q27 How useful are the analytics provided to you by your accountable care organization in the treatment of your patients	1 Very useful	Count	1	0	1
		% within list Type of license	0.9%	0.0%	0.7%
	2 Somewhat useful	Count	22	10	32
		% within list Type of license	18.8%	29.4%	21.2%
	3 Slightly useful	Count	23	6	29
		% within list Type of license	19.7%	17.6%	19.2%
	4 Not at all useful	Count	23	4	27
		% within list Type of license	19.7%	11.8%	17.9%

	5 Don't know	Count	48	14	62
		% within list Type of license	41.0%	41.2%	41.1%
Total		Count	117	34	151
		% within list Type of license	100.0%	100.0%	100.0%

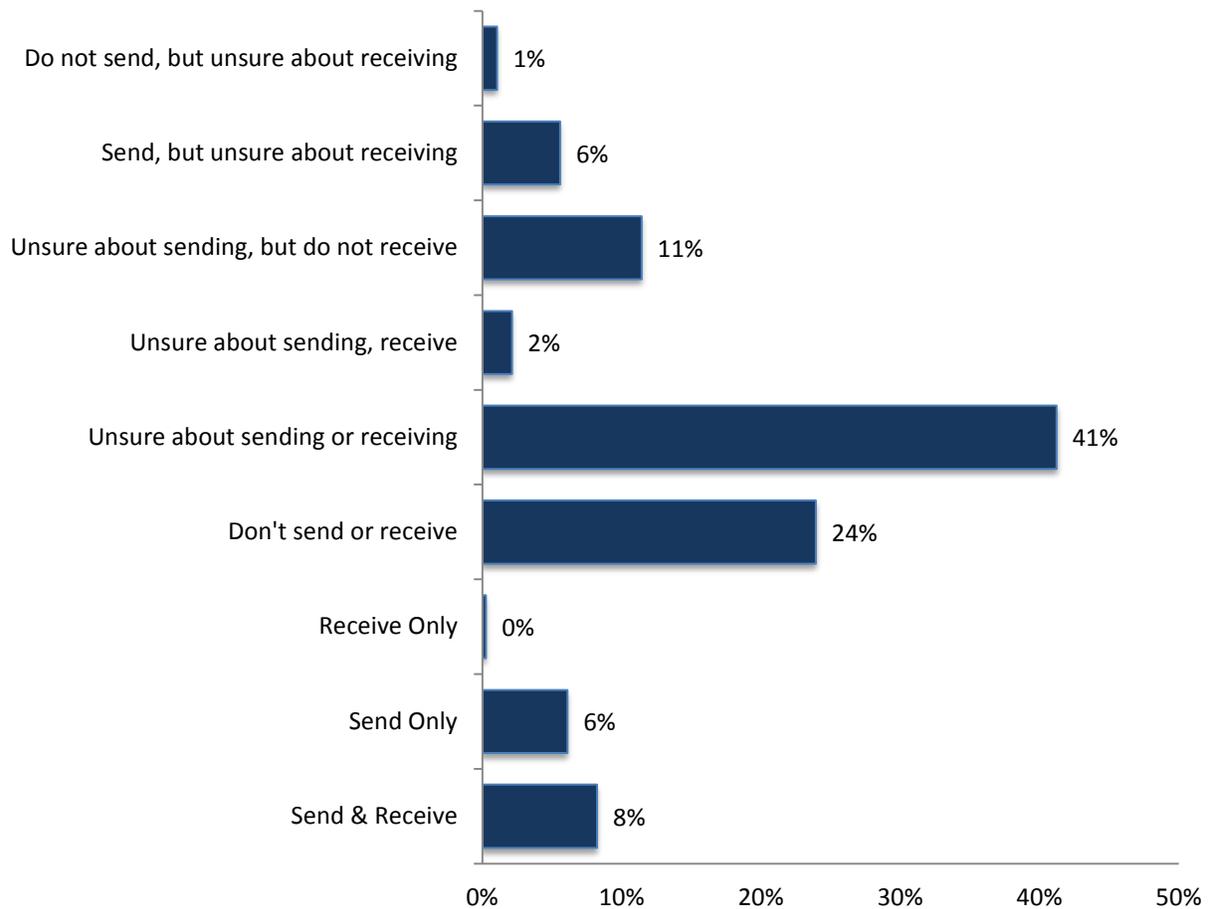
**Q29 Are you willing to be contacted by Vermont Information Technology Leaders for follow-up questions regarding your answers to this survey \* list Type of license Crosstabulation**

		list Type of license			
		1 Physician	2 Nurse Practitioner	Total	
Q29 Are you willing to be contacted by Vermont Information Technology Leaders for follow-up questions regarding your answers to this survey	1 Yes	Count	53	21	74
		% within list Type of license	24.7%	29.6%	25.9%
Total	2 No	Count	162	50	212
		% within list Type of license	75.3%	70.4%	74.1%
		Count	215	71	286
		% within list Type of license	100.0%	100.0%	100.0%

## VHIE Participants

Figure 8. displays the status of sending and receiving data through the Vermont Health Information Exchange (VHIE). It should be noted that a plurality of respondents (41%) are unsure whether or not their organization contributes or receives information from VHIE.

**Figure 8. Status of Sending or Receiving Data through VHIE  
(n=376)**



## Appendix A: Mailed Materials

### Vermont Health Care Provider Survey

To start, we're interested in knowing a bit about your practice to help us understand your responses.

1. At what type of practice do you work? *Select all that apply.*

- Hospital
- Hospital owned practice
- Independent practice
- Federally Qualified Health Center
- Some other type of practice (*please specify*):

2. Are you a primary care provider?

- Yes → *Go to question 4*
- No

3. What is your speciality?

4. Which of the following best describes your job function? *Select only one response*

- Clinical practice
- Hospital management
- Practice management
- Educational
- Other (*please specify*):

The Vermont Health Information Exchange (VHIE), which is operated by Vermont Information Technology Leaders, Inc. (VITL), allows for the secure exchange (with patient consent) of clinical patient data between providers.

5. Have you heard of VITL or Vermont Information Technology Leaders?

- Heard a lot
- Heard some
- Have not heard about VITL
- Don't know

6. Does your organization contribute clinical data to the Vermont Health Information Exchange (VHIE)?

- Yes
- No
- Unsure

7. Does your organization receive clinical results (e.g., lab results, pathology reports) from the VHIE into your Electronic Health Record (EHR)?

- Yes → *Go to question 9*
- No
- Unsure

8. If clinical results from other health care organizations, such as laboratory results, were available in your EHR, how much would it improve the quality of care you are able to provide your patients?

- Greatly improve the quality of care
- Somewhat improve the quality of care
- Slightly improve the quality of care
- No improvement in the quality of care
- Don't know

Go to  
question  
10

9. How does the availability of clinical results from other health care organizations, such as laboratory results, in your EHR improve the quality of care you are able to provide your patients?

- Greatly improves the quality of care
- Somewhat improves the quality of care
- Slightly improves the quality of care
- No improvement in the quality of care
- Don't know

10. Are you currently using the secure provider portal to the VHIE, known as VITLAccess, to access statewide medical information about your patients?

- Yes
- No → Go to question 17
- Unsure → Go to question 17

**Feedback about VITLAccess for Current Users**

11. When was the last time that you logged on to VITLAccess?

- Today
- Within the last week
- Within the last month
- Sometime in the last year or more
- Unsure

12. What is the frequency with which you use VITLAccess to find information about your patients?

- Almost every patient that I see
- Some patients that I see
- A few patients
- On a very select basis, when a patient has special circumstances
- Don't know

13. When using VITLAccess, how often do you find information that is helpful for the immediate treatment of your patient?

- Almost all of the time
- Most of the time
- Some of the time
- Rarely
- Never
- Don't know

14. What patient information available through VITLAccess is most useful to you in treating your patients? *Please select up to 3 options*

- Patient demographics
- Patient encounter data (e.g., admit, discharge, or transfer)
- Patient problem lists
- Laboratory results
- Transcribed reports (e.g., radiology, ED discharge notes, etc.)
- Medication history
- Care summaries (Continuity of Care documents)

15. Today, VITLAccess is offered to Vermont clinicians at no cost. Would you continue to use VITLAccess if you had to pay to use it?

- I would definitely continue to use it, even if I had to pay for the service
- I might use it if the cost is reasonable
- I would definitely not use it if I had to pay for the service
- Don't know

16. What could be done to make VITLAccess more useful for you?

→ Go to question 20

**For those who do not currently use VITLAccess**

17. How interested are you in using a secure provider portal to the VHIE, with a patient's consent, to access statewide medical information about a patient?

- Not interested
- Somewhat interested
- Very interested
  
- Don't know

18. How interested are you in using a secure provider portal to the VHIE, with a patient's consent, to access your patient's prescription fill information (including controlled substances)?

- Not interested
- Somewhat interested
- Very interested
  
- Don't know

19. Today, VITLAccess is offered to Vermont clinicians at no cost. Would your interest level change if you had to pay to use VITLAccess?

- I would still be interested, even if I had to pay for the service
- I might be interested, but only if the cost is reasonable
- I would definitely not be interested if I had to pay for the VITLAccess
  
- Don't know

**For All Providers, Future Technologies Feedback**

20. If you received real-time notifications when your patient is admitted or discharged from a hospital or other admitting facility, how much would it improve the quality of care you are able to provide your patients?

- Greatly improve the quality of care
- Somewhat improve the quality of care
- Slightly improve the quality of care
- No improvement in the quality of care
  
- Don't know

21. If you received real-time notifications when your patient is admitted or discharged from a hospital or other admitting facility, how frequently would you use this service?

- With almost every patient that I see
- With some patients that I see
- With a few patients
- On a very select basis, when a patient has special circumstances
- I wouldn't use this service
  
- Don't know

22. If you or your care team were able to communicate with your patients through a secure texting platform during specified hours, how much would it improve the quality of care you are able to provide your patients?

- Greatly improve the quality of care
- Somewhat improve the quality of care
- Slightly improve the quality of care
- No improvement in the quality of care
  
- Don't know

23. If you or your care team were able to communicate with your patients through a secure texting platform during specified hours, how frequently would you use this service?

- With almost every patient that I see
- With some patients that I see
- With a few patients
- On a very select basis, when a patient has special circumstances
- I wouldn't use this service
  
- Don't know

24. Does your practice receive Blueprint for Health Practice Profiles on a regular basis?

- Yes
- No → Go to question 26
  
- Unsure → Go to question 26





[Date]

«Primary\_Salutation»  
«Street\_Address»  
«Secondary\_Ad»  
«City\_Address», «ST» «Zip»

Dear «Primary\_Salutation»,

Vermont Information Technology Leaders (VITL), which operates and maintains the Vermont Health Information Exchange (VHIE), is requesting feedback from health care providers licensed in Vermont about the usefulness of the VHIE and other services provided by VITL in their work.

We are writing to ask for your help with a brief survey to understand what is beneficial to you in providing care for your patients. Regardless of whether or not you currently use the VHIE, we'd very much appreciate your willingness to share your opinions.

We know that your time is valuable, so we have made the survey as brief as we could. Your response is important; we know that only by hearing from nearly every provider contacted can we be confident in our results. Please complete the survey enclosed to the best of your ability and return it to the Castleton Polling Institute in the enclosed business reply envelope. You do not need to include postage.

If you have any questions about the survey, you may contact our partners at the Castleton Polling Institute, who are helping us collect this data. The Polling Institute at Castleton University can be reached by phone at 802-770-7040, or via email, [polling@castleton.edu](mailto:polling@castleton.edu).

We thank you in advance for your participation.

Respectfully,

A handwritten signature in black ink that reads "Robert A. Gibson". The signature is written in a cursive style with a large, prominent "R" and "G".

Robert Gibson  
VP of Marketing and Business Development  
Vermont Information Technology Leaders, Inc.

A handwritten signature in blue ink that reads "Amanda Richardson". The signature is written in a cursive style with a large, prominent "A" and "R".

Amanda Richardson  
Associate Director  
Castleton Polling Institute at Castleton University



[Date]

«Primary\_Salutation»  
«Street\_Address»  
«Secondary\_Ad»  
«City\_Address», «ST» «Zip»

Dear «Primary\_Salutation»,

A few weeks ago we mailed you a letter asking for your help with a survey on behalf of Vermont Information Technology Leaders (VITL) about the usefulness of the Vermont Health Information Exchange (VHIE) and other services.

If you have already completed the questionnaire, please accept our sincere thanks. If not, please help by completing the brief survey so we can better understand what is beneficial to you in providing care for your patients. We would like to hear from all health care providers whether or not you currently use the VHIE.

If you have any questions about the survey, you may contact our partners at the Castleton Polling Institute, who are helping us collect this data. The Polling Institute at Castleton University can be reached by phone at 802-770-7040, or via email, [polling@castleton.edu](mailto:polling@castleton.edu).

We are especially grateful for your feedback.

Respectfully,

A handwritten signature in black ink that reads "Robert A. Gibson". The signature is written in a cursive style with a large, prominent "R" and "G".

Robert Gibson  
VP of Marketing and Business Development  
Vermont Information Technology Leaders, Inc.

A handwritten signature in blue ink that reads "Amanda Richardson". The signature is written in a cursive style with a large, prominent "A" and "R".

Amanda Richardson  
Associate Director  
Castleton Polling Institute at Castleton University