

Vermont Health Information Exchange
Data Governance Council Meeting

June 25th, 2024

Agenda

- General Reminders
- Domain Updates
 - Social Determinants of Health Data Governance [*Will Dempsey*]
- Federated Team Updates
 - Engagement and Enablement Team [*Maurine Gilbert*]
 - Data Integration Team [*Jennifer Starling*]
- Public Comment

General Reminders

- Material posted to website:
 - [Vermont Health Information Exchange Data Governance | Health Data](#)
 - [Data Governance Council Charter \(vermont.gov\)](#)
- Agreed upon meeting frequency: every 6 weeks
- Mode: in person (Waterbury state complex) and online (MS teams)

Domain Updates

Social Determinants of Health Data Governance

Accomplishments

- State accepted Brilljent's final SDOH Data Governance Plan; closeout activities started.
- SDOH Data Governance Domain Team met to develop documentation: values/goals, governance structure, procedures, membership, scope, data access, consent process, and data security.

Timeline

- Brilljent work will be completed by 7/1 and that contract will close out.
- The SDOH Data Governance Documentation will take 1-2 months, with two meetings/month.

Key Deliverables

- Stakeholder engagement plan (*complete*), Execute stakeholder engagement plan (*complete*), Data governance outline (*complete*), Data Governance Plan DED (*complete*), Draft Data Governance Plan (*complete*), Final Data Governance Plan (*complete*), closeout activities (*in progress*), and SDOH Data Governance Documentation (*in progress*)

Engagement and Enablement Team

KPIs

The workgroup has developed a set of key performance indicators (KPIs) to measure and track impact of health information exchange in Vermont over time. These include:

Number of providers, by provider type, exchanging data

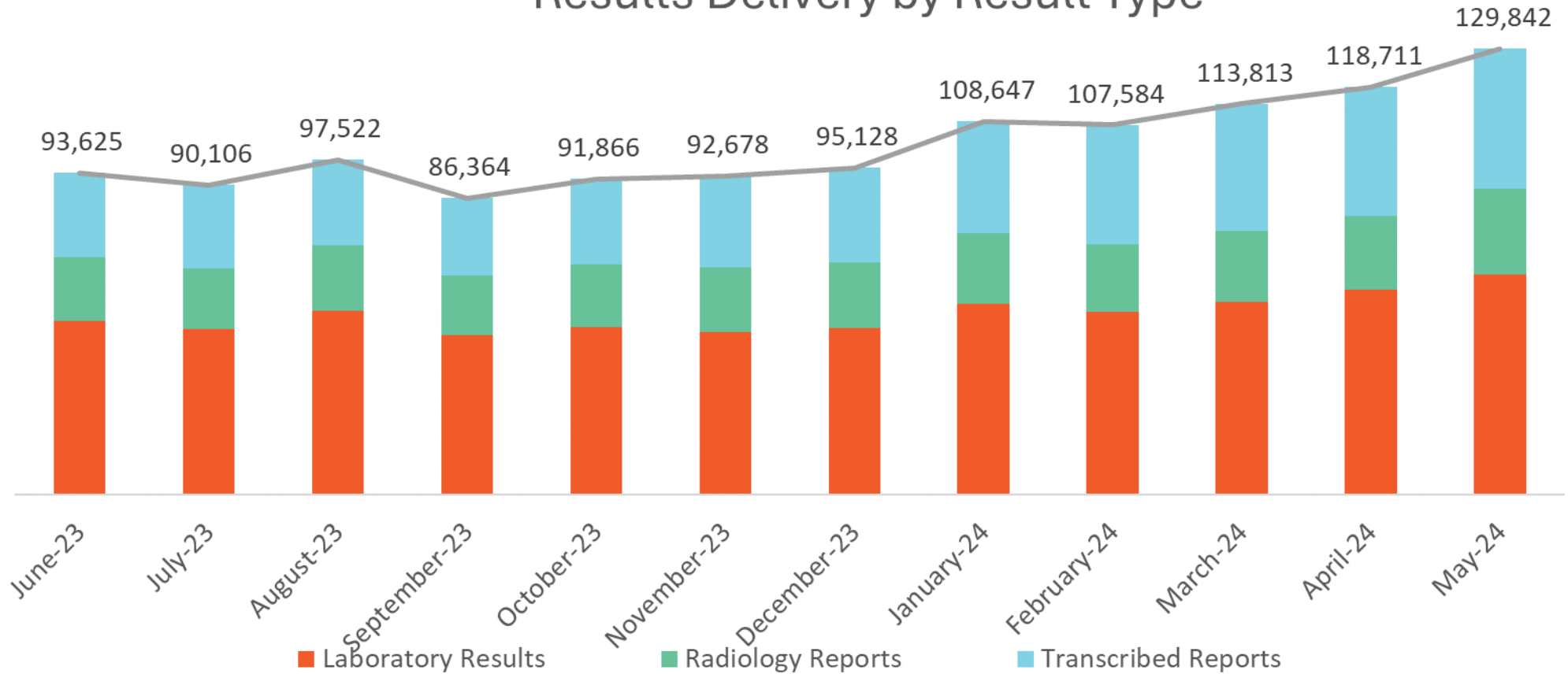
Number of results delivered through the health information exchange, and number of providers receiving results

Number of individual clinical portal users with a chart access

Average number of data contributing providers that a Vermonter visits for care (this KPI is in development)

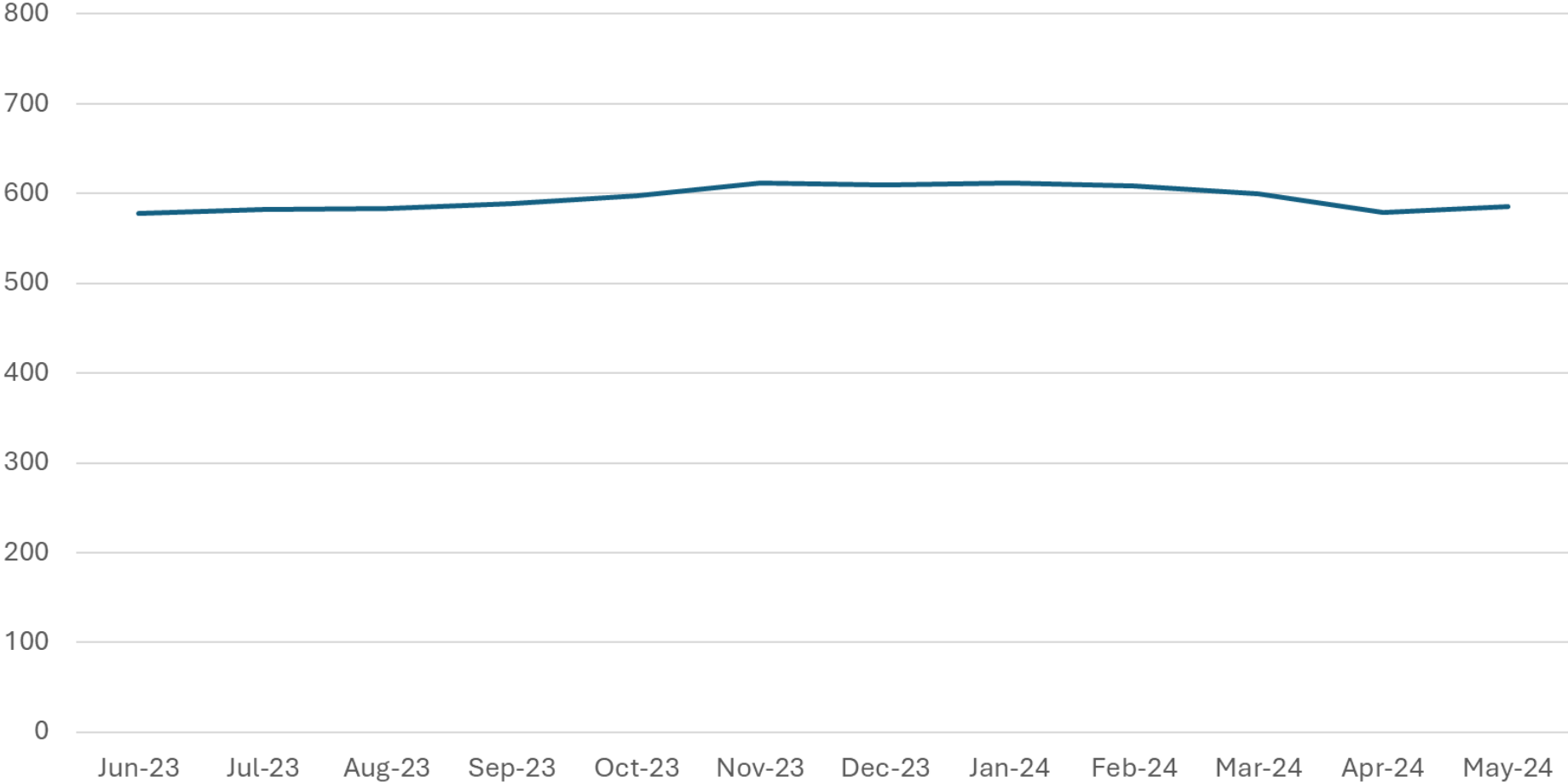
Vermont Health Information Exchange Participants	Contribute Data	Access Data
<i>Hospitals (including all Vermont hospitals and a border hospital, along with their inpatient and ambulatory services, emergency departments, and owned specialty and primary care practices)</i>	16	16
Vermont Federally Qualified Health Centers	11	10
Independent Specialty and Primary Care Practices	31	63
Home Health Agencies	5	7
Nursing Homes and Long-Term Care Facilities	0	5
Pharmacy Chains and Independent Pharmacies	11	1
Laboratories (State and Commercial)	14	0
Departments of the State of Vermont	2	3
Designated Mental Health Agencies and Specialized Services Agencies	0	11
Emergency Medical Services	0	48
Payers	0	2

Results Delivery by Result Type

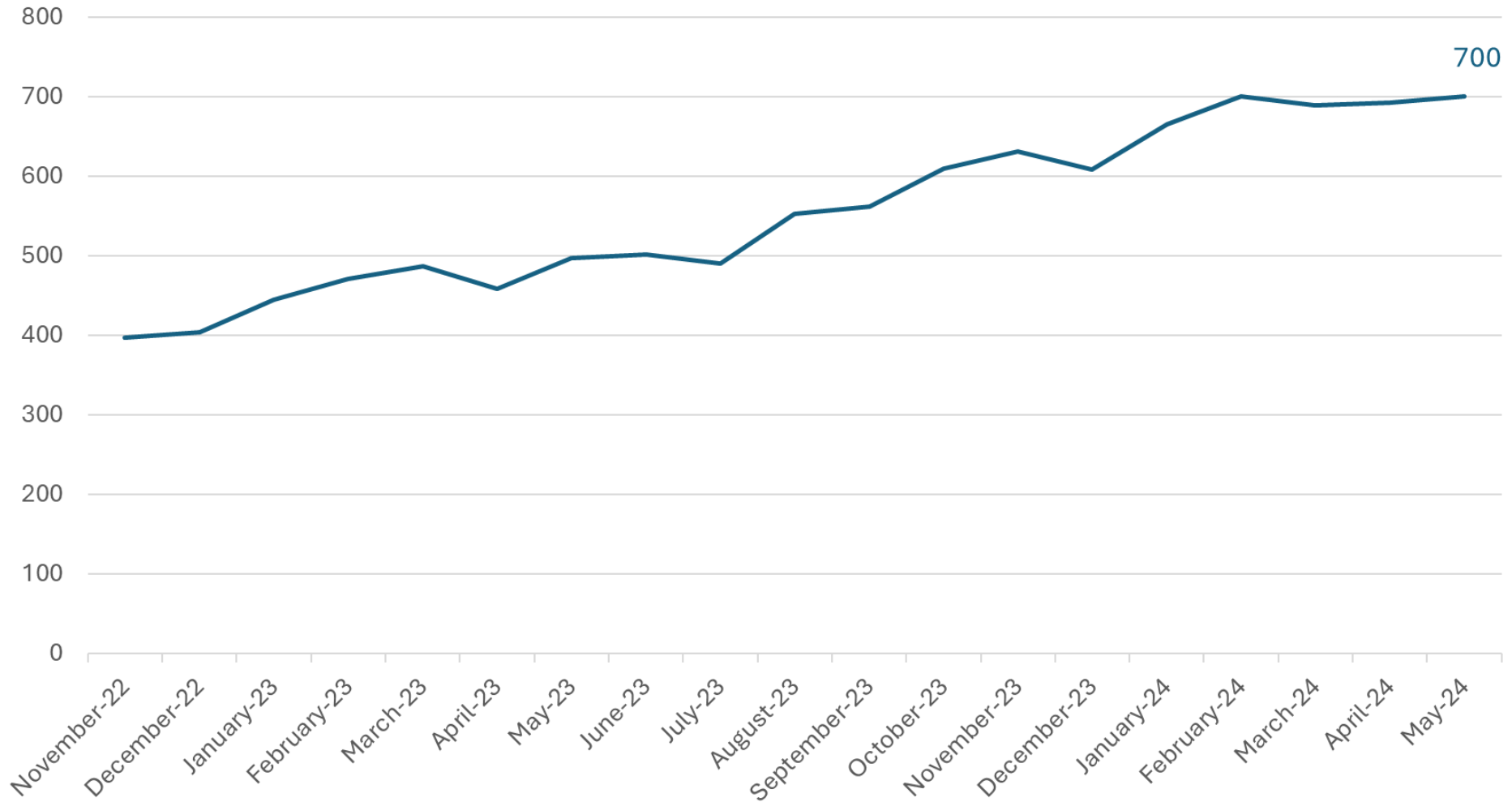


Number of providers receiving results = 586

Number of Providers Receiving Results in their EHRs



Number of Unique Users with a Chart Access



KPI in Development

- Working to create a new KPI that will demonstrate the need for data sharing across health care organizations
- The KPI will seek to specify **the average number of data contributing organizations where a Vermonter receives care**
- The final KPI is dependent on technical feasibility of this measurement, which VITL is currently exploring with its vendors

Data Integration Team

Data Integration Team

June Update:

- Person matching “MPI” KPI Dashboards - *completed*
- Data Onboarding KPI Dashboards - *completed*
- Dashboard Frequency: Quarterly
- Dashboard Output: Graphs & Tables

Coming in August:

- Data Completeness Dashboards update

Data Onboarding - Review

Data Onboarding Phases

- Initiation & Exploration - Obtain HCO vendor technical resources, complete documentation with HCO and their vendor
- Evaluation & Connection - Analysis of the data samples and implementation of the connection
- Go-Live - Average number of days from Initiation phase to Go-Live Phase

Interface Domains

- Admission, Discharge, Transfer (ADT) - Patient demographics, visit information and patient state
- Laboratory results (LAB) - Laboratory test results from a laboratory information system (LIS) to a healthcare provider's electronic health record (EHR)
- Continuity of Care Document /Summaries (CCD) - Comprehensive visit summary information about new or updated notes or documents
- Radiology results (RAD) - Radiology reports from radiology departments or imaging centers
- Transcriptions (TRANS) - Transcribed reports such as clinical encounters or assessments from spoken medical dictation
- Telehealth (TELEHEALTH) - Home health monitoring data (vitals, blood glucose levels, height, weight, pulse oximetry)
- Vaccination Update (VXU) - Vaccination information

Complexity

- Complexity is based on several factors including connectivity capability, HIE interface scoring, and HCO and vendor readiness
 - Low Complexity - Standard implementation expected with minimal configuration
 - Medium Complexity - Standard implementation expected, additional data analysis and configuration may be needed
 - High Complexity - The implementation is standard but broader data analysis and configuration may be needed

Data Onboarding Dashboards

What: measure the average days per quarter to complete each phase, by domain and by complexity

Frequency: Quarterly, starting in October 2024

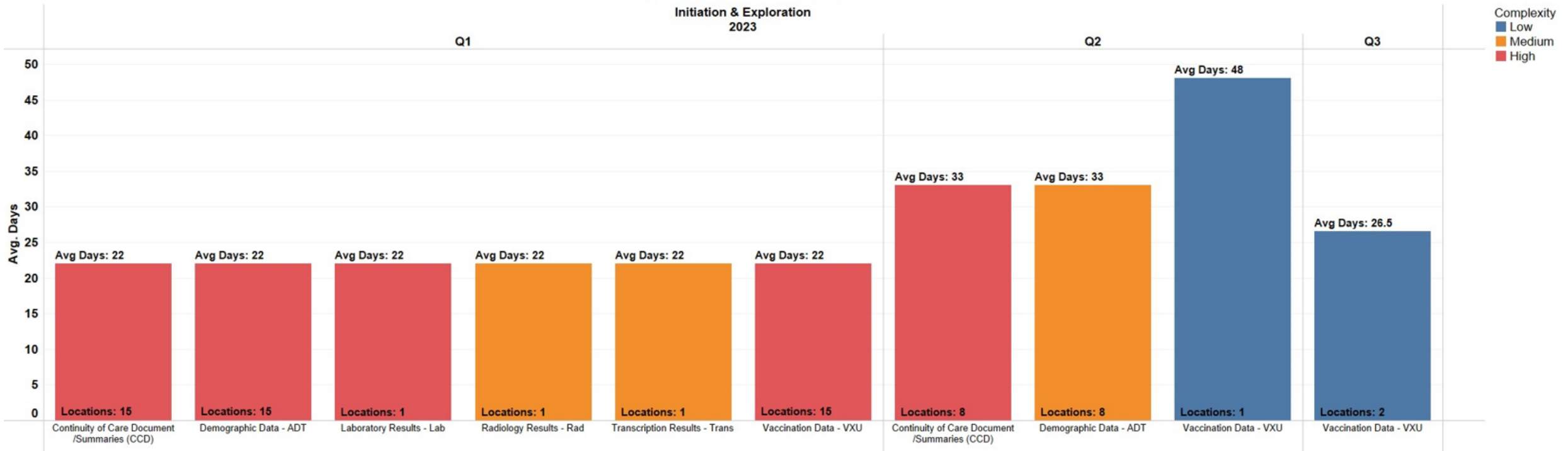
Output: 1 Summary Table and 3 Graphs

1. Initiation and Exploration Phase Graph
2. Evaluation & Connectivity Phase Graph
3. Go Live Phase Graph

Phase	Domain	Date (Month of Completion)	Complexity	Avg Days
Evaluation & Connection	ADT	3/31/2023	High	27
Evaluation & Connection	CCD	3/31/2023	High	27
Evaluation & Connection	LAB	3/31/2023	High	27
Evaluation & Connection	RAD	3/31/2023	Medium	27
Evaluation & Connection	TRANS	3/31/2023	Medium	27
Evaluation & Connection	VXU	3/31/2023	High	27
Initiation & Exploration	ADT	3/31/2023	High	22
Initiation & Exploration	CCD	3/31/2023	High	22
Initiation & Exploration	LAB	3/31/2023	High	22
Initiation & Exploration	RAD	3/31/2023	Medium	22
Initiation & Exploration	TRANS	3/31/2023	Medium	22
Initiation & Exploration	VXU	3/31/2023	High	22
Evaluation & Connection	VXU	5/31/2023	Low	19
Initiation & Exploration	ADT	6/30/2023	Medium	33
Initiation & Exploration	CCD	6/30/2023	High	33
Initiation & Exploration	VXU	6/30/2023	Low	48
Evaluation & Connection	ADT	7/31/2023	Medium	33
Evaluation & Connection	VXU	8/31/2023	Low	49
Initiation & Exploration	VXU	8/31/2023	Low	38.5

Data Onboarding Graph - *Example*

Calendar Year 2023 Onboarding KPI by Phase Completed Initiation & Exploration
 Health Care Organization (HCO) Count: 5
 HCO Location Count: 26
 HCO Interface Count: 67



The graph above represents the average days per quarter in the first three quarters of 2023 required to complete the Initiation & Exploration Phase by domain and by complexity. Work domains (message types) vary each quarter, so not all domains are completed in every quarter

Person Matching - Review

Metric Definition

- Metrics are reported as both patient counts and percentages. The denominator for all metrics is the total number of Vermonters.

Matching Impacts

- Vermonters is defined as a patient in the MPI in the past 3 years with a Vermont address from a Vermont HCO
- VCCI Medicaid Matched is the count of Vermont Chronic Care Initiative (VCCI) patients who are successfully matched with a Vermont HCO
- Singleton Vermonters are patients who do not match to any other HCO within the community

Matching Quality

- Match Review Rate - when multiple HCOs submit different demographics on the same chart, the MPI alerts that this maybe a single patient and creates a queue for manual review to link the two charts, which is performed by VITL staff.

Example: Patients with limited demographics.

- Un-match Review Rate is when a single HCO submits demographics on a patient chart, the MPI alerts that there maybe two different patients documented on a single chart. This prevents messages processing until the chart is manually reviewed

Examples: Name Changes, Adoptions, Chart Errors

*For Matching Quality metrics, we analyze all matches and mismatches across VHIE transactions, with the denominator the total number of Vermonters, as all demographics could potentially be Vermonters.

Person Matching Dashboards

What: Measures the match rates and quality of populations across Vermont

Frequency: Quarterly, starting in October 2024

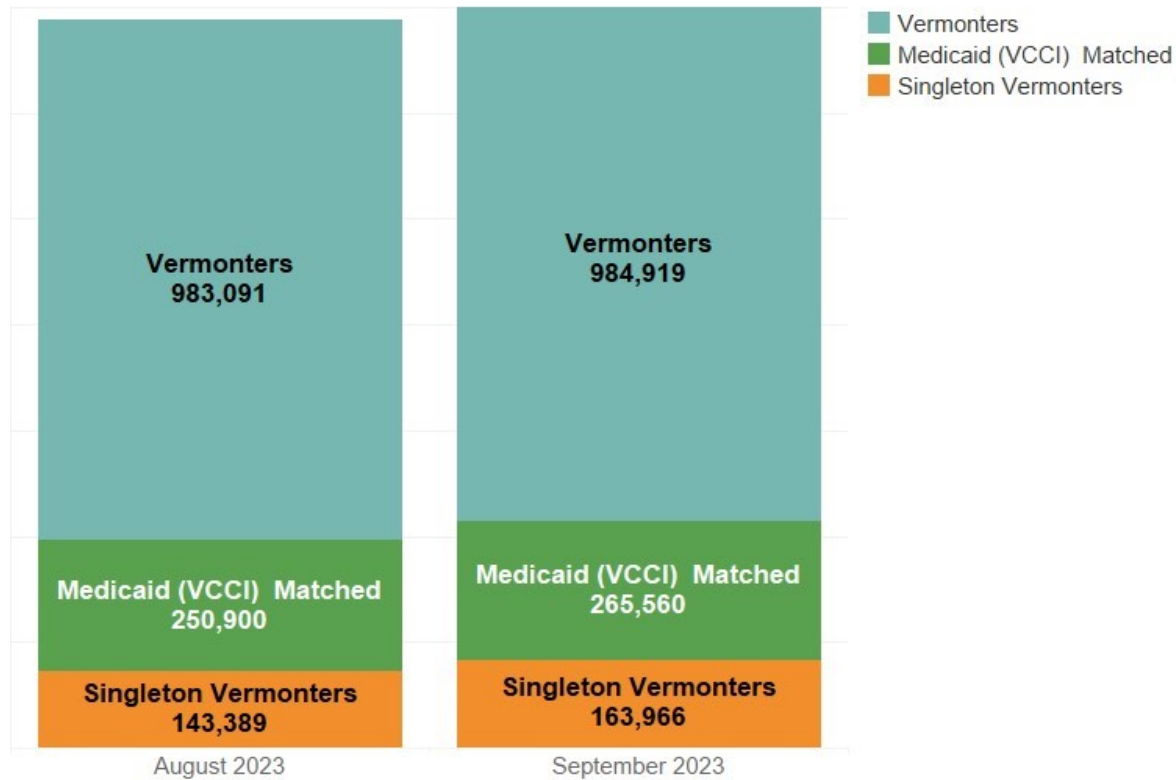
Output: 1 Summary Table and 2 Graphs

1. Matching Impacts Graph
 - Vermonters, Medicaid Matched, Singleton Vermonters
2. Matching Quality Graph
 - Match Review Rate, Un-match Review Rate

KPI	Date (MPI KPIs)	# of Patient Records	% of Patient Records
Unique Vermonters in last 3 years MPI	8/31/2023	983,091	100.00%
Singleton Vermonters	8/31/2023	143,389	14.59%
Match Review Rate	8/31/2023	833	0.08%
Unmatch Review Rate	8/31/2023	5,023	0.51%
VCCI Medicaid Matched	8/31/2023	250,900	25.52%
Unique Vermonters in last 3 years MPI	9/30/2023	984,919	100.00%
Singleton Vermonters	9/30/2023	163,966	16.65%
Match Review Rate	9/30/2023	677	0.07%
Unmatch Review Rate	9/30/2023	4,203	0.43%
VCCI Medicaid Matched	9/30/2023	265,560	26.96%

Person Matching Dashboards - *Examples*

Calendar Year 2023
KPI for Matching Impacts
Total Vermonters & Vermont Singletons



Calendar Year 2023
KPI for Matching Data Quality:
MPI Chart Reviews

