VERMONT MEDICAL SOCIETY RESOLUTION

Patient Portals

Adopted October 25, 2014

Whereas, A Patient Portal is a secure online website that gives patients convenient 24-hour access to personal health information from anywhere with an internet connection; and

Whereas, Using a secure username and password, patients can view health information such as recent physician visits, schedule appointments, request refills on medications, look at lab results and communicate with their physicians in a confidential and secure manner; and

Whereas, Achieving Meaningful Use (MU) Stage 2 standards for patients to electronically view, download and transmit health information requires that more than 50 percent of all unique patients seen by the eligible provider (EP) during the EHR reporting period are provided timely (available to the patient within 4 business days after the information is available to the EP) online access to their health information; and

Whereas, MU Stage 2 also requires that more than 5 percent of all unique patients seen by the EP during the EHR reporting period view, download, or transmit to a third party their health information and the MU criteria allows a health information exchange (HIE) to help providers meet this patient engagement goal; and

Whereas, in a patient portal future state, the Fletcher Allen Informatics Group recommends using standardized release conventions across all medical staff, allowing patients to see the actual ICD-9 term used in their problem lists, make all possible historic results available at the time the patient activates an account (imaging studies will have secondary reads and child abuse screens filtered out), auto release Tier 1 and 2 labs instantly, auto release Tier 3 labs, pathology, imaging and cardiology results within 72 hours, and having radiology reports for secondary reads, child abuse screens and notes always blocked; and

Whereas, In order to qualify for MU Stage 2 incentive payments, each eligible hospital and eligible provider have established patient portals using different release conventions and separate log-in requirements; and

Whereas, There are statewide and regional patient portal initiatives around the country, including building a statewide or regional patient portal function on top of their HIE; and

Whereas, Vermont Information Technology Leaders (VITL) already has much of the data needed to establish a statewide system of secure access to patient information; now therefore be it

RESOLVED, The VMS will join eligible hospitals and eligible providers in working with VITL in order to explore building a statewide patient portal function on top of the Vermont Health Information Exchange Network; and be it further
RESOLVED, The VMS will urge VITL to consider also serving as an aggregator for existing patient portals and that VITL create a secure single log-in function in order to allow patients to easily access all their relevant information.