

VHI Annual Report

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Agenda

1

Who Is VHI?

2

Major Initiatives Over the Past Year

3

Priorities for Next Year

Who is VHI?

Introduction to VHI

Virginia Health Information

- Independent 501(c)(3) nonprofit serving Virginia since 1993
- Unbiased, public-private partnership focused on transparency
- Governed by a Board of Directors representing state agencies, healthcare providers, payers, consumers and business leaders
- Administers Virginia healthcare data **reporting, collection and exchange** to include (but not limited to):
 - Statewide Health Information Exchange (HIE)
 - All-Payer Claims Data
 - Hospital Discharge Data
 - Annual Licensure & Utilization Data



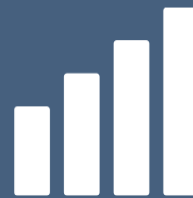
Scan to learn more about VHI's programs and partnerships

What We Do at VHI



Policy Enablement

Administering statewide programs and supporting public policy



Data Analytics & Reporting

Collecting, validating and transforming healthcare data



Health Information Technology

Enabling secure information exchange and interoperability

Partnerships Across Virginia

Government • Healthcare Providers • Payers • Communities

How VHI Has Evolved

Hundreds of organizations now use data VHI collects, exchanges and reports

	1993	Today
Programs	1	~10
Records exchanged per day	~2,500	~6 million
Organizations sharing data	Hospitals	Hospitals, health plans, physician practices, nursing homes, PBMs and drug manufacturers

Today, VHI serves as a statewide resource supporting informed policy, better care and greater transparency.

The Value Of Virginia-Focused Partnership



Local expertise

Focus on Virginia priorities and relationships that help turn data into action.



Trusted intermediary

Bring public and private partners together to share information with confidence.



Public accountability

Use private-sector innovation while maintaining clear governance and data rights.



Public Partners



vhi



Healthcare Partners

Shared information supports decisions that serve the Commonwealth

Highlights from this Year

What I said last year...

Expand data collection to address unmet needs

Modernize our website and key reports, including RX Pricing

Enhance existing programs for faster delivery and linkage



vhi Virginia Health Information

Note: The testing tool also provides warning messages that may improve the file content but are not critical structure errors.

1.2 USCDI Standards

The technology vendor requires facilities to share data that meets the latest USCDI standards. The USCDI is a standardized set of health data classes and constituent data elements for nationwide, interoperable health information exchange.

Please refer to <https://www.healthit.gov/isa/united-states-core-data-interoperability-uscdi> for complete details regarding USCDI standards and latest requirements.

1.3 Clinical Terminology Systems

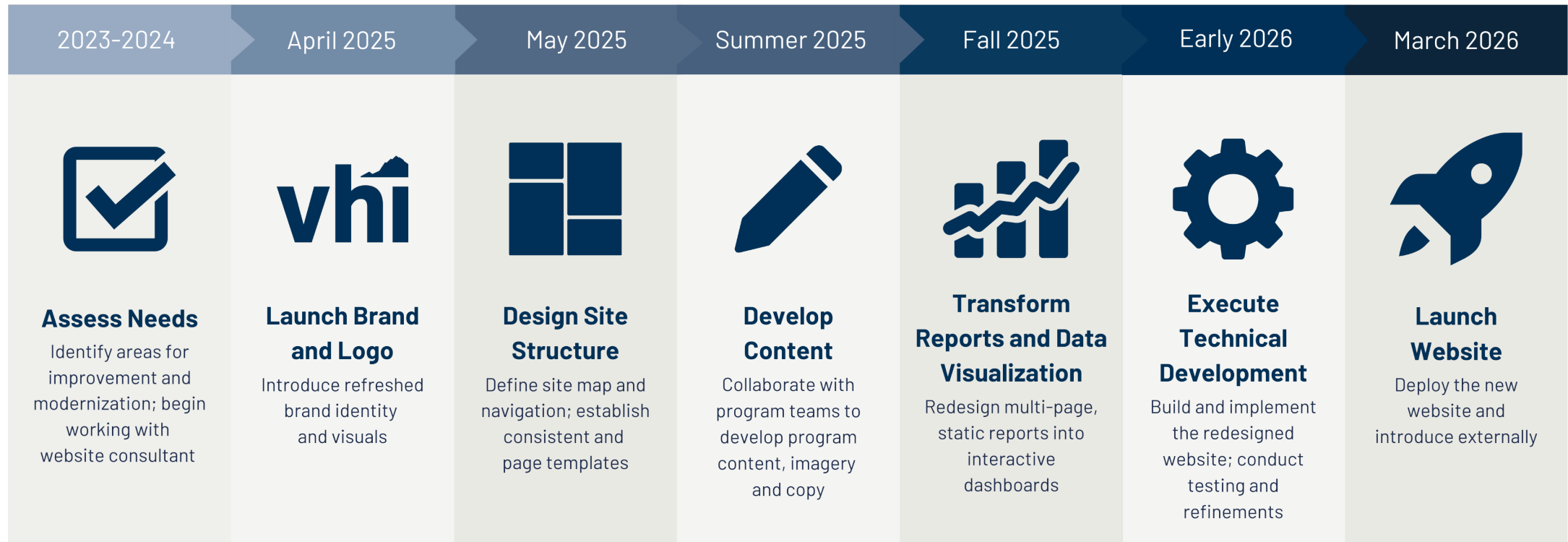
Standard terminology provides a foundation for interoperability by improving the effectiveness of information exchange. See below for some of the common terminology standards used in health information and technology. See [Appendix](#) for additional information regarding the most common terminology systems.

- SNOMED International, Systematized Nomenclature of Medicine Clinical Terms (SNOMED CT®)
- Current Procedural Terminology (CPT®), as maintained and distributed by the American Medical Association, for physician services and other health care services
- Healthcare Common Procedure Coding System (HCPCS), as maintained and distributed by HHS.
- For technology primarily developed to record dental procedures: Code on Dental Procedures and Nomenclature (CDT), maintained and distributed by the American Dental Association, for dental services.
- Optional: International Classification of Diseases ICD-10-PCS 2021

Acceptable code systems by CCD section.

Name	OID	Procedure s	Functiona l status	Menta l status	Immunization s	Result s	Vital sign s	Problem s	Encounter s
CPT-4	2.16.840.1.113883.6.12	✓	-	-	-	-	-	-	✓
CVX	2.16.840.1.113883.6.59	-	-	-	✓	-	-	-	-

Website Redesign Process



The Previous Website

Navigation Challenges

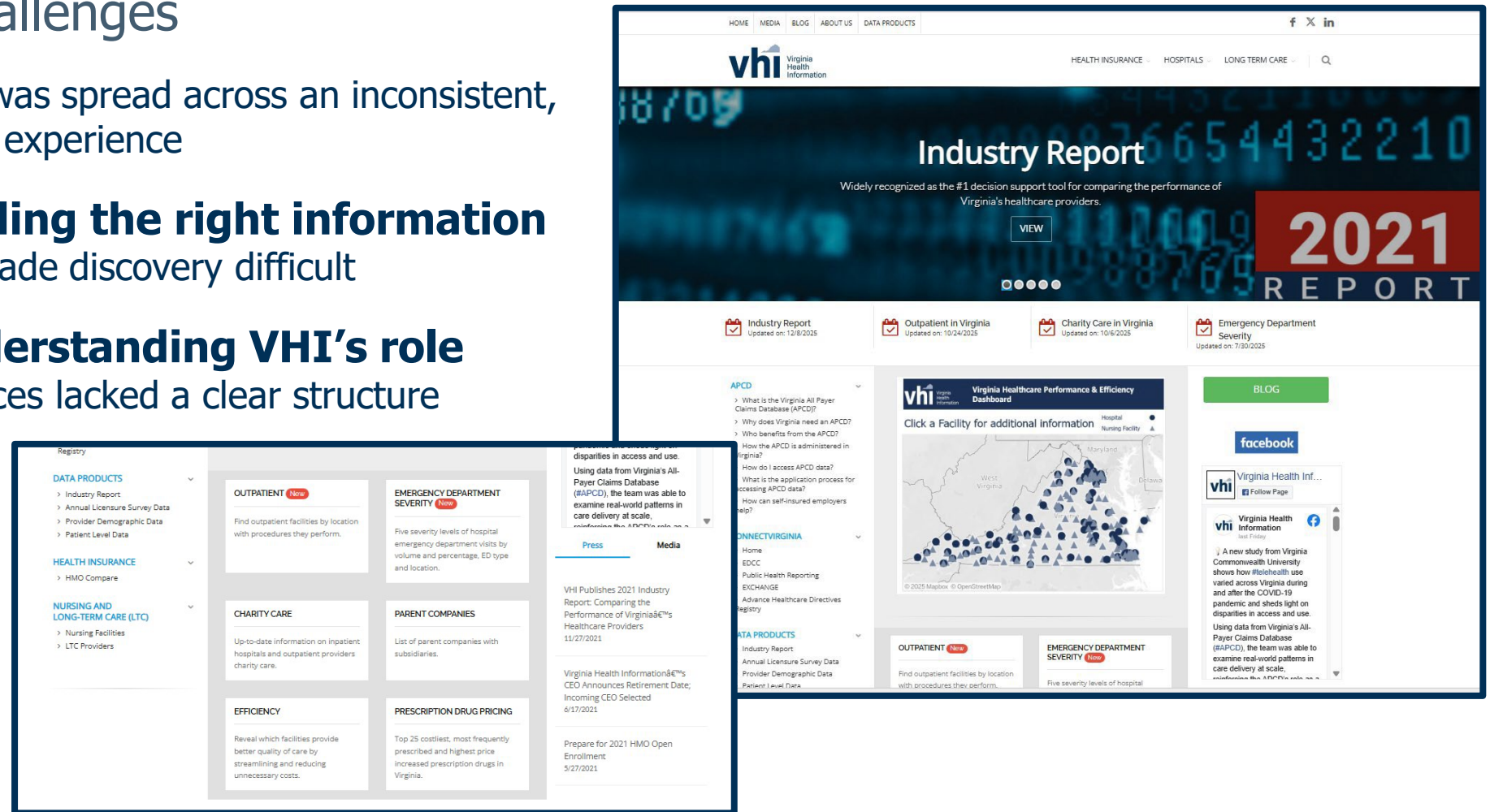
Useful information was spread across an inconsistent, difficult-to-navigate experience

Challenge: Finding the right information

Menu and search made discovery difficult

Challenge: Understanding VHI's role

Programs and services lacked a clear structure



A Clear Front Door to VHI

Designed with Users in Mind

Structure: Organized by VHI's mission

Collecting, Connecting, Reporting

Menu: Organized by action

Exchange Information, Analyze Data, Explore Reports

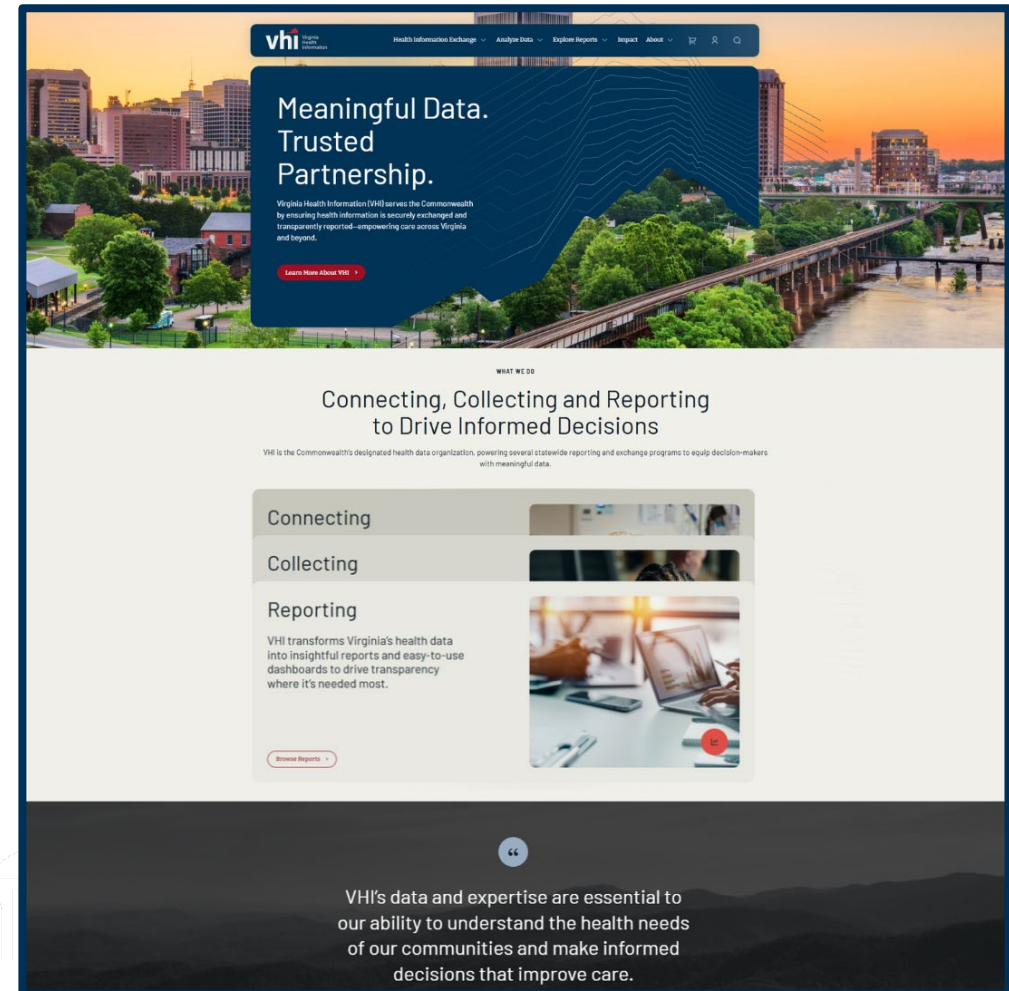
Impact: Tells the VHI story

Added features explaining the "why" behind VHI



www.VHI.org

Find exchange services,
datasets and public reports



Distance to Delivery in Virginia

A Clear View of Geographic Access
To Childbirth Services

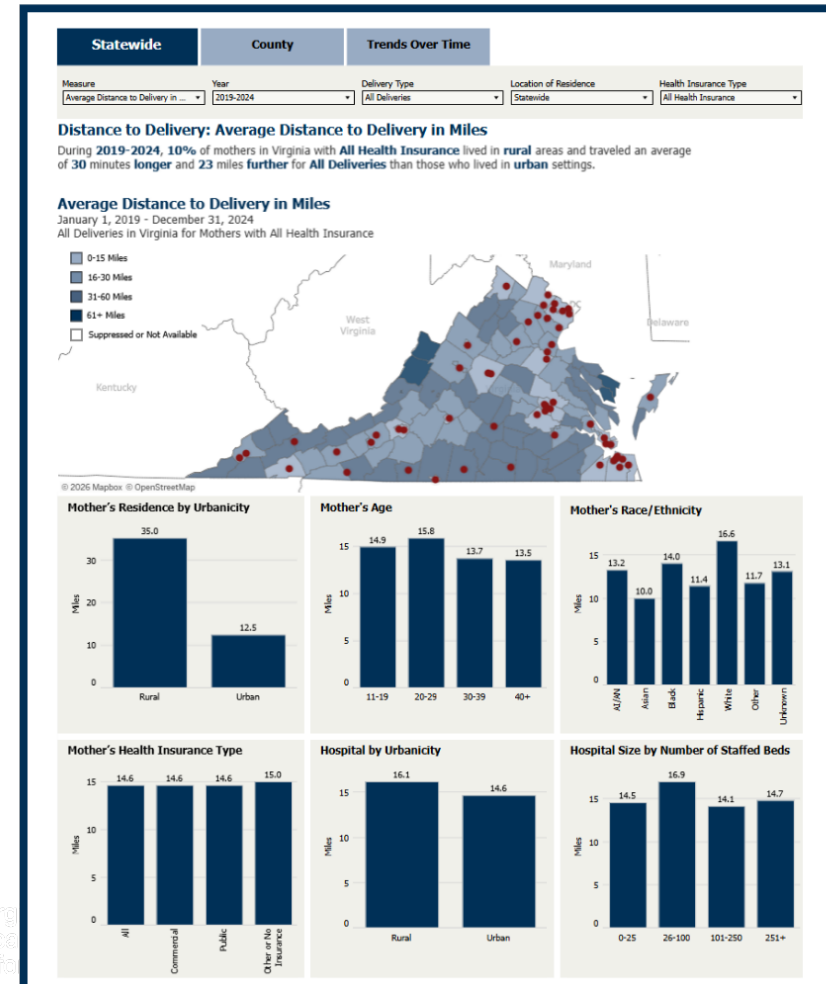
2019 – 2024
Hospital Discharge Data

Travel Burden

Explore estimated distance and travel
time from residence to delivery hospital

Differences Across Communities

Compare rurality, locality, payer and
maternal characteristics



Prescription Drug Pricing Transparency



Redesigned Dashboard Planned **Fall 2026**

Compare Costs

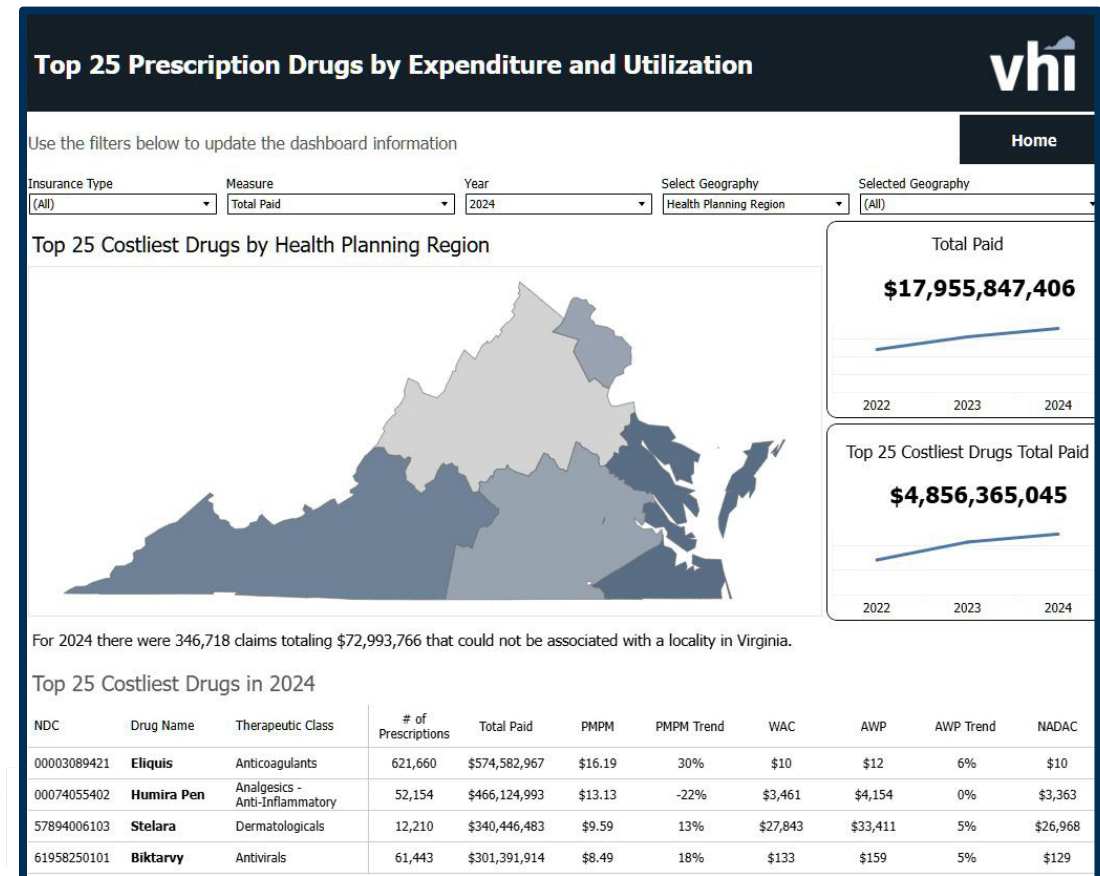
Wholesale acquisition costs, pharmacy acquisition costs and insurer payments

Identify Spending Drivers

Top 25 drugs by expenditure and use, plus leading therapeutic classes

Explore Variation

Filter by payer, geography and year and compare medications over time



A Broader View of Hospital & Outpatient Care

Expansion of Virginia's Patient Level Data Collection

Since 1993
Inpatient
Discharges



Inpatient
Discharges



Emergency
Department
Visits



Reportable
Outpatient
Procedures

Hospitals, ambulatory surgery centers and other reporting facilities

Implementation Underway

1

Onboard
New facilities



2

Process
New data submissions



3

Validate
Data quality



4

Prepare
Analytical files

More settings of care will support more complete utilization analysis

Expansion of the Health Coordination Network

Legislative changes to the Former “EDCC” Program

EDCC		→		Health Coordination Network
What changed		Previously (EDCC)		Now (HCN)
	Hospital scope	Emergency departments		Every hospital in Virginia
	Clinical information	Encounter alerts and care coordination information		Adds broader lab results, images and direct clinical documents
	Participation agreements	Exchange Trust Agreement		Master Services Agreement, Business Associate Agreement and program addendum

Broader clinical information supports care across settings

Modernizing the **All-Payer Claims Database**

First Major Vendor Transition



Stronger data quality

Upgrade data assessment to improve confidence in research-ready files.



Broader data content

Add new data types to support a wider range of analytical questions.



More research options

Expand secure data-enclave options for researchers and approved projects.

APCD

Commercial
Medicaid
Medicare



Other data sources

Clinical, public health
and other approved
data sets



Linked analysis

Linking data with privacy
and governance safeguards

Stronger foundation for linked, multi-payer research

Supporting Research Across Virginia

Selected 2026 APCD Research Applications

Affordability & Payment

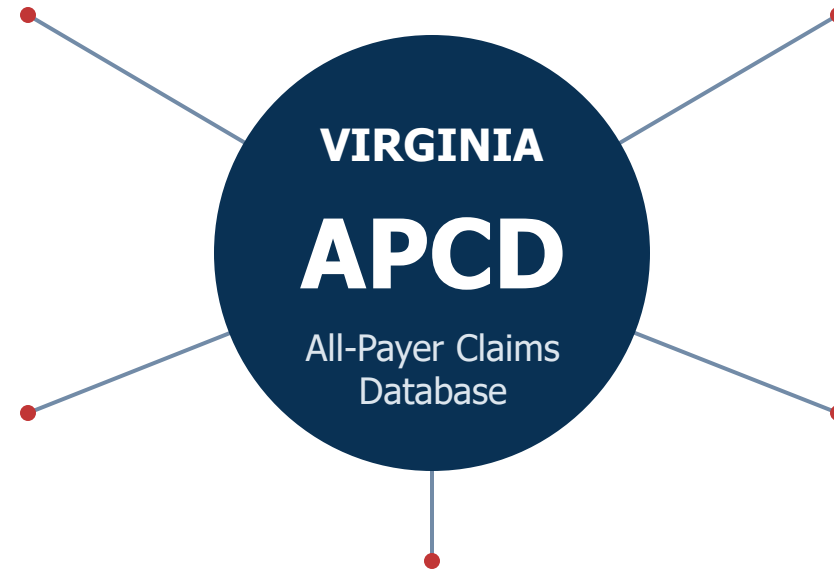
Medicaid/private preventive-care reimbursement benchmarks

JAMA Health Forum

Quality & Low-Value Care

High-risk NSAID prescribing and differences in utilization

American Journal of Managed Care



Access & Workforce

Primary-care investment and workforce composition

2026 Investment Report + Workforce Study

Market Structure & Delivery

Hospital–physician integration and healthcare utilization

Health Services Research

Population & Public Health

Climate and emergency department use

GeoHealth

Priorities for Next Year

Connecting Rural Providers to HCN

RHTP Provider Interoperability funding awarded

30–35

**Rural Practices and
Clinics Targeted
for Connection**

20–25 independent practices
Medical Society of Virginia

~10 free and charitable clinics
Virginia Association of Free
and Charitable Clinics



**Timely information when patients receive
care elsewhere.**

Planned project period: October 2026–September 2027

Existing statewide infrastructure with no ongoing HCN fees for onboarded clinics

Bridging Public Health Into HCN

Expanding HCN to Support Key Public Health Priorities



Enabling Public Health Use Cases

§ 32.1-276.12 expands HCN to specifically call out public health.



Growing Participation

HCN's 600+ participating facilities provide a strong foundation for public health activities.

PUBLIC HEALTH AREAS FOR DISCUSSION



Newborn
Screening



Maternal
Health



Sickle Cell
Disease



Hepatitis C



HIV



Office of the Chief
Medical Examiner
(OCME)

Supporting **Vulnerable Populations**

Proposed Analysis and Care-Transition Planning

Medicaid Redetermination

PROPOSED STUDY

How Do Coverage Transitions Change Healthcare Use?

Redetermination Cohort

vs.

Matched Comparison Cohort

Compare ED visits, admissions and readmissions before and after the event

Examine differences by coverage transition and region.

Youth Re-entry

SECTION 5121: PLANNING ONLY

Keep Health Information Available as Youth Return to the Community

Carceral Providers



Community Services Boards



Managed Care

Potential HIE role: share scanned or electronic medical history and required EPSDT records

Build on a platform used by all MCOs and most CSBs.

Consider VHI When:

-  You or your constituents need access to healthcare information.
-  New forms of healthcare data need to be collected or exchanged in the Commonwealth.
-  Transparency and reporting are needed around new healthcare topics.