Health Information Technology Oversight Council
Updates on Health IT Policy and Efforts

Health IT Policy

Federal Law and Policy Updates

Federal Interoperability and Patient Access Final Rules, Contact: Marta.M.Makarushka@dhsoha.state.or.us

On May 1, 2020, the U.S. Department of Health and Human Services (HHS) published two health information technology (IT) final rules requiring implementation of new interoperability policies; the ONC 21st Century Cures Act Final Rule, supporting seamless and secure access, exchange, and use of electronic health information (EHI), and the Centers for Medicare and Medicaid Services (CMS) Interoperability and Patient Access Final Rule, focused on patient access to electronic health information (EHI) and interoperability.

As of April 5, 2021, to comply with the ONC Cures Act Information Blocking final rule provisions, providers must provide patients with access to their EHI (the data set forth in the United States Core Data for Interoperability, or USCDI, standard), upon patient request. Information blocking provisions also apply to making patient information available to other providers, payers, public health agencies, and others that have proper authorization and make requests for treatment or other permitted purposes under applicable law. In addition, HIEs/HINs and developers of certified health IT are required to exchange all USCDI v1 data elements, assess current practices for information blocking and adjust as necessary, and ensure they utilize widely-accepted and -adopted standards to exchange data. See ONC Fact Sheet for information about the eight exceptions to the information blocking provisions.

As of May 1, 2021, CMS modified Conditions of Participation (CoPs) to require hospitals, including psychiatric and Critical Access Hospitals, to send electronic admission, discharge, and/or transfer event notifications to the patient's primary physician, primary care group practice, and/or other physician or group practice identified by the patient.

As of July 1st, CMS-regulated payers are required to (1) implement a standards-based API that allows patients to easily access their claims, encounter, and clinical information through third-party applications of their choosing, and (2) make provider directory information publicly available via a standards-based API.

What is HITOC?

The Oregon Legislature created the Health Information Technology Oversight Council (HITOC) to ensure that health system transformation efforts are supported by health information technology. HITOC is a committee of the Oregon Health Policy Board (OHPB), which sets policy and provides oversight for the Oregon Health Authority (OHA), including OHA's health system transformation efforts.

HITOC has six responsibilities:

1. Explore health IT policy
2. Plan Oregon's health IT strategy
3. Oversee OHA's health IT efforts
4. Assess Oregon's health IT landscape
5. Report on Oregon's health IT progress
6. Monitor federal health IT law and policy

HITOC brings stakeholders and partners across Oregon together for centralized policy work, strategic planning, oversight of health IT efforts, and landscape/policy assessment, so health IT efforts are more coordinated. HITOC also provides health IT expertise to OHPB and to Oregon lawmakers so they are informed about health IT in Oregon when they make policies and laws about health.

OHA's Office of Health IT (OHIT) staffs HITOC and the Oregon Health IT Program.

OHA Support for Implementing Federal Interoperability and Patient Access Final Rules, Contact: Marta.M.Makarushka@dhsoha.state.or.us

The Oregon Health Authority (OHA) support for Oregon stakeholders in implementing these new rules includes:

- Hosted three webinars: recordings, materials, and additional resource can be found on the [Office of Health IT final rules webpage](#).
- Hosted work sessions with CCOs and DCOs for further clarification on priority rule requirements.
- Partnering with the [HIT Commons](#) to host a monthly Payer Interoperability Collaborative (PIC) for CCOs, DCOs, and Medicare Advantage plans to focus on alignment and implementation of the CMS Interoperability and Patient Access Rules. See page 6 for more information.

ONC Health Interoperability Outcomes 2030, Contact: Marta.M.Makarushka@dhsoha.state.or.us

The Office of the National Coordinator (ONC) has launched a new project called "Health Interoperability Outcomes 2030." ONC is looking for input on what outcomes you would like to see. Later this fall, ONC intends to publish a prioritized set of health interoperability outcomes that align with ONC's vision for interoperability and the 2020-2025 Federal Health IT strategic Plan. [Submissions were](#) accepted through July 30, 2021. Learn [more here](#).

FCC Emergency Broadband Benefit, Contact: Lisa.A.Parker@dhsoha.state.or.us

The Emergency Broadband Benefit is a temporary FCC program to help households struggling to afford internet service during the pandemic. This new benefit will connect eligible households to jobs, critical healthcare services, virtual classrooms, and so much more. Eligible households include Oregon Health Plan members.

For more information, see the [FCC webpage](#).

ONC Publishes the USCDI Version 2, Contact: Lisa.A.Parker@dhsoha.state.or.us

ONC published the United States Core Data for Interoperability Version 2 ([USCDI v2](#)) on July 13, 2021. The USCDI v2 helps to standardize data elements, providing a roadmap to improve interoperability of health data for patients, providers, and other users. [ONC's July 2021 Standards Bulletin](#) is to help explain the v2 data elements and describes ONC's vision for future expansion through v3.

Health IT and Health System Transformation: Vision and Goals

HITOC set out a vision for health IT-optimized health care, along with three goals. These guide OHA's health IT work.

Vision:
A transformed health system where health IT efforts ensure that the care Oregonians received is optimized by health IT.

Goal 1: Share Patient Information Across the Care Team
Oregonians have their core health information available where needed, so their care team can deliver person-centered, coordinated care.

Goal 2: Use Data for System Improvement
Clinical and administrative data are efficiently collected and used to support quality improvement and population health management, incentivize improved health outcomes. Aggregated data and metrics are also used by policymakers and others to monitor performance and inform policy development.

Goal 3: Patients Can Access Their Own Information and Engage in Their Care
Individuals and their families access, use and contribute their clinical information to understand and improve their health and collaborate with their providers.

Oregon Law and Policy Updates

Oregon 2021 Legislative Session, Contact: Lisa.A.Parker@dhsoha.state.or.us

Oregon's 2021 legislative session concluded in late June. The [Oregon Health Authority's 2021 Legislative End-of-Session Report](#) summarizes key health-related legislation that passed. For a summary on the status of introduced health IT-related bills, see the HITOC August 2021 [meeting materials](#).

Oregon 2022-2027 Medicaid 1115 Demonstration Application, Contact:
1115Waiver.Renewal@dhsoha.state.or.us

Oregon is applying to the Centers for Medicare & Medicaid Services (CMS) for a new 1115 Medicaid waiver for the years 2022-2027. The deadline to submit the application is December 2021. Medicaid is a state and federal program. The Oregon Health Plan (OHP) is the name of Oregon's Medicaid program.

The 1115 Medicaid waiver allows OHA to expand who is covered by OHP, pay for health care differently, and implement other reforms. The overall goal for the next waiver is to advance health equity in our state. Under that umbrella, there are four goal areas:

- Creating an equity-centered system of health
- Expanding access to coverage
- Encouraging smart, flexible spending through global budgets; and
- Reinvesting savings in across systems to promote equity

On June 1, 2021, OHA released a series of draft concept papers of high-level policy areas under consideration for inclusion in our 1115 Medicaid waiver. The policy papers, which flow from feedback OHA has received from stakeholders and the public, are summaries of the areas in which OHA plans to focus to develop proposals to the federal government for new approaches to create a more equitable and responsive Medicaid system. Building health equity in Oregon's Medicaid program is the unifying theme of the policy concept papers. Below you will find a cover memo along with the four policy papers.

- Introduction to OHA's strategies - cover memo
   - Concept 1: Ensuring access to coverage for all people in Oregon
   - Concept 2: Creating an *equity-centered* system of health
   - Concept 3: Encouraging smart, flexible spending
   - Concept 4: Reinvesting government savings across systems

OHA has invited the public to provide input on these concept papers and their themes in a variety of settings. Upcoming meetings include:
- Oregon Health Policy Board (OHPB): August 3, 2021 8:30 – 12:00
- Medicaid Advisory Committee (MAC): September 22, 2021 9:00 – 12:00

There are multiple opportunities to take part in the process!
- You are welcome to attend any meeting to provide feedback or to email comments or questions at any time to 1115WaiverRenewal@dhsoha.state.or.us
- For a complete list of public meeting dates, prior meeting materials, and additional resources and information, please visit the 1115 Waiver webpage.

HB4212 REALD Provider Reporting, Contact: Karen.Hale@dhsoha.state.or.us or
OHAREALD.Questions@dhsoha.state.or.us

Oregon's House Bill 4212 (2020) requires health care providers to collect race, ethnicity, language, and disability (REALD) data for all COVID-19 encounters. After collection, providers must report this data to OHA with COVID-19 disease reporting. For more information, see: https://www.oregon.gov/oha/OEI/Pages/REALD-Providers.aspx

In 2021, OHA convened lessons learned meetings for Phase 1 provider organizations to support REALD implementation. OHA also published the first COVID-19 REALD report.

[House Bill 3159](#) was signed this legislative session, which will require OHA to adopt standards and establish a timeline for health care providers and health insurers to collect REALD and sexual orientation and gender identity (SOGI) data from patients, clients or members.

Landscape and Environmental Scan, Contact: Marta.M.Makarushka@dhsoha.state.or.us

OHA's Office of Health IT (OHIT) engages in ongoing environmental scan activities to inform health IT efforts and ensure strategies and programs address evolving needs. OHIT continues compiling data across the agency and other sources to serve various purposes, such as informing HITOC's progress monitoring, program oversight, and reporting priorities. Past work includes:

- *A [2019 Health IT Report](#) to HITOC which summarizes what is known about Oregon's EHR and HIE landscape, including key health IT concepts and HITOC considerations. This report supports HITOC's data-related responsibilities and helps inform HITOC's strategic planning.*
- *A Behavioral Health HIT/HIE Scan Report based on survey and interview data. See [Behavioral Health HIT Workgroup](#) for more information.*

In 2021, OHIT's efforts will focus on CCO HIT Roadmaps and Data reporting:
- CCO 2.0 HIT Data Reporting: OHIT is supporting CCOs' 2021 Health IT Data Collection and Reporting efforts. This includes developing a survey (in partnership with CCOs) that CCOs can distribute to their contracted provider organizations to collect EHR and HIE information that will be used to inform HITOC's strategic plan update work.
- CCO Updated HIT Roadmaps: CCOs' annual Updated Health IT Roadmaps were due to OHA by end of March 2021. These documents include progress and strategies to support EHR adoption, HIE, and HIT needed for value-based payments. OHA has completed an initial review of the Updated HIT Roadmaps and has approved some, while requesting additional information from CCOs on others. OHA anticipates all CCOs will have an approved Updated HIT Roadmap by October 1, 2021. A summary of CCO efforts is expected late 2021, which will also be used to inform HITOC.

HITOC Strategic Plan and Annual Priorities, Contact: Ashley.Ashworth@dhsoha.state.or.us

Strategic Plan Update: *At the beginning of 2020, HITOC began efforts to update the Oregon HIT Strategic Plan. In February and March, OHA conducted a series of public listening sessions and collected helpful input to inform the strategic plan. Given the pandemic's impact on the healthcare system, remaining listening sessions were canceled and Strategic Plan Update efforts were placed on hold.*

HITOC will resume Strategic Plan Update work this summer starting with a kick-off meeting at the August 5th HITOC meeting. House Bill 3039 was considered this legislative session but was not passed. It would have directed HITOC to explore technology, funding, incentives, and policy options for statewide community information exchange (CIE), statewide health information exchange (HIE), patient access to data, and incentivizing electronic health records (EHR) adoption. HITOC will consider exploring these areas under the Strategic Plan Update.

Annual priorities: HITOC reported on 2020 progress and 2021 annual priorities at the February Oregon Health Policy Board (OHPB) retreat. Priorities include Health IT needed to support COVID response and recovery, Strategic Plan Update work, and further work related to health IT and social determinants of health and health equity.

Membership: On July 6, 2021 OHPB approved the appointment of 5 new members and renewal of 5 members to HITOC. The new members fill important gaps in oral health, social determinants of health, public health, rural health, and academic perspective. As well as adding racial and ethnic representation and maintaining geographic diversity. Their terms will begin August 5. Welcome to Dr. Manu Chaudhry, Dr. David Dorr, Carly Hood-Ronick, Abdisalan Muse, and Diane Tschauner! HITOC roster >

Seats remain open to fill additional gaps in representation. Applications are open on a rolling basis until filled For more information, please see the recruitment webpage.

Oregon Health IT Program: Partnerships

HIT Commons, Contact: Luke.A.Glowasky@dhsoha.state.or.us

The HIT Commons is a public/private collaboration to coordinate investments in health IT, leverage funding opportunities, and advance HIE across the state. HIT Commons is co-sponsored by the Oregon Health Leadership Council (OHLC) and OHA, and is jointly funded by OHA, hospitals, health plans and CCOs. For more information see the HIT Commons website.

EDie and the Collective Platform (formerly known as PreManage)

The Emergency Department Information Exchange (EDie) allows Emergency Departments (EDs) in real-time to identify patients with complex care needs who frequently use the emergency room for their care. The Collective Platform (aka PreManage) is a companion software tool to EDie. The Collective Platform brings the same real-time hospital event notifications (ED and Inpatient Admit, Discharge, and Transfer [ADT] data) to those outside of the hospital system, such as health plans, CCOs, providers, and care coordinators. OHA supports a Medicaid PreManage Subscription that includes use by CCOs, Oregon Department of Human Services programs, Tribal clinics, and other Medicaid care coordinators.

- As of July 9, 2021, COVID-19 positive case data from OHA's Oregon Pandemic Emergency Response Application (Opera), the state's COVID-19 case investigation system, is being shared with all users of the Collective Platform. A flag is visible on a patient's record if they had a confirmed positive COVID-19 test result in the last 42 days. This information is also included in EDie notifications across 63 Oregon hospitals. More information about this initiative is available here. See the COVID-19 Data Sharing Initiative section below for more information on COVID-19 data sharing.
- The HIT Commons EDIE Steering Committee met on June 25, 2021. Topics of discussion included product and support updates from Collective Medical, EDIE/Collective Platform use cases under development, ED utilization dashboards and updates on the HIT Commons/OHA effort to re-energize Assertive Community Treatment (ACT) team utilization of the Collective Platform. Materials from that meeting are available here. The Committee's next meeting is August 27, 2021.

HITOC's Current Work Groups

Health IT/Health Information Exchange Community and Organizational Panel

This group is composed of representatives from a variety of organizations across Oregon that are implementing or operating cross-organizational health IT and health information exchange programs. Members share best practices, identify common barriers to progress, and explore opportunities for collaboration.

Behavioral Health HIT Workgroup

This group was chartered in 2018 to recommend strategies to support health IT for behavioral health providers. Recommendations are included in OHA's *Report on Health Information Technology and Health Information Exchange Among Oregon's Behavioral Health Agencies*. The group oversees OHA's Behavioral Health HIT Workplan and is convened as needed to inform specific initiatives such as OHA's Confidentiality Toolkit and technical assistance learning collaboratives. It is composed of a broad representation of types of behavioral health stakeholders across Oregon.

Payer Interoperability Collaborative

As noted above, OHA has partnered with HIT Commons to hold a Payer Interoperability Collaborative (PIC) to support CMS-regulated payer implementation of the Federal Interoperability and Patient Access Final Rules. This is a forum for CCOs, DCOs, and Medicare Advantage plans to share knowledge and challenges, and an opportunity to align around the CMS data sharing requirements.

The meetings are held monthly on the second Tuesday; the next meeting is **August 10th at 1:30pm**. If interested in participating please send an email to Courtney@orhealthleadershipcouncil.org requesting an invitation.

Public Health Data Sharing Workgroup

HIT Commons, in partnership with OHA, has convened a Public Health Data Sharing Workgroup to discuss and assess efforts to integrate public health data into HIT or HIE systems, and make policy and operational recommendations to HIT Commons and OHA. Workgroup membership includes representation from OHA's Public Health Division, payers/CCOs, health systems, and providers.

- The kick-off meeting took place on July 15th, and the group plans to meet monthly through the end of 2021.

Oregon's Prescription Drug Monitoring Program (PDMP) Integration Initiative

Oregon's PDMP Integration initiative connects EDie, Reliance eHealth Collaborative health information exchange (HIE), EHRs, and pharmacy management systems to Oregon's PDMP. HIT Commons is overseeing the PDMP Integration initiative with guidance from the Oregon PDMP Integration Steering Committee and in coordination with OHA's Public Health PDMP program. For more information see the HIT Commons website.

- 24 new organizations went live with PDMP integration in Q2 2021.
- House Bill 2074 was passed by the 2021 Oregon Legislative Assembly. This bill increases annual PDMP fees from $25 to $35 and is critical to maintaining continued operations and support of the PDMP Integration initiative.
- The PDMP Integration Steering Committee met on July 8, 2021. Topics of discussion included updates to the group's charter, PDMP Integration metrics, Q1 2021 progress on integrations, updates from Public Health PDMP staff, and new reporting functionality available to prescribers and clinical leaders. The Committee's next meeting is October 14, 2021.

Oregon Health IT Program: Programs and Initiatives

COVID-19 Data Sharing, Contact: Luke.A.Glowasky@dhsoha.state.or.us

OHA is collaborating with partners on several initiatives to share COVID-19 data in support of response and recovery efforts.

- OHA is now sharing COVID-19 positive case data to users of EDie and the Collective platform, and to clinical and health plan/CCO users of Reliance eHealth Collaborative's Community Health Record.
- COVID vaccine data reports are now shared weekly with CCOs for their members. Additionally, COVID-19 vaccine data are flowing into EDie/the Collective platform and to the Reliance HIE. Collective platform COVID Vaccine Population Reports allow for quickly identifying members who have received no vaccine, as well as identifying the manufacturer and dose of vaccines that have been administered.

- Oregon efforts to integrate Public Health COVID-19 data into HIT and HIE will be discussed and assessed at monthly meetings of the Public Health Data Sharing Workgroup, convened by HIT Commons in partnership with OHA.

Community Information Exchange (CIE), Contact: Hope.Peskin-Shepherd@dhsoha.state.or.us

Community information exchange (CIE) is a network of healthcare and human/social service partners using a technology platform with functions such as a shared resource directory, "closed loop" referrals, reporting, social needs screening, and other features to electronically connect people to social services and supports. CIEs are developing rapidly across the state with two main CIE vendors: Aunt Bertha and Connect Oregon (Unite Us). To learn more, see the OHA CIE webpage.

On April 29, 2021 OHA held an informational webinar to explore what CIE is, how it may be valuable, and to hear about successes and challenges faced. Representatives from AllCare CCO, Project Access Now, Cascade Health Alliance, and Sky Lakes Medical Center shared their experiences using CIE. Materials can be found on the CIE webpage.

Medicaid EHR Incentive Program, Contact: Jessica.L.Wilson@dhsoha.state.or.us

The Medicaid EHR Incentive Program (also known as the Promoting Interoperability Program) offers qualifying Oregon Medicaid providers federally funded financial incentives for the adoption or meaningful use of certified electronic health records technology. Eligible professional types include physicians, naturopathic physicians, pediatric optometrists, nurse practitioners, certified nurse-midwives, dentists, and physician assistants in certain settings.

As of July 2021, more than $211 million in federal incentive payments have been dispersed to 60 Oregon hospitals and 3,857 Oregon providers. Between June and July 2021, 25 providers received $212,500 in incentive payments. The program sunsets December 31, 2021.

Oregon Provider Directory, Contact: Karen.Hale@dhsoha.state.or.us

The Oregon Provider Directory (OPD) program ended on June 30, 2021 due to federal and state budget changes . For more information, please visit the OPD website.

Clinical Quality Metrics, Contact: Katrina.M.Lonborg@dhsoha.state.or.us

The Clinical Quality Metrics Registry (CQMR) service was suspended at the end of 2020 and ended on June 30, 2021 due to federal and state budget changes. (For more information, please see these FAQs).

Health Information Exchange (HIE) Onboarding Program, Contact: Jessica.L.Wilson@dhsoha.state.or.us

Oregon's HIE Onboarding Program leverages significant federal funding to increase Medicaid providers' capability to exchange health information by supporting the initial costs of connecting (onboarding) priority Medicaid providers to community-based HIEs. Priority Medicaid providers include behavioral health, oral health, critical physical health, and others. Reliance eHealth Collaborative was selected through an RFP process.
The HIE Onboarding Program launched in January 2019 and ends September 30, 2021. Additional funding approved by the Oregon legislature allows the Program to continue into the fall, rather than end in June as anticipated.

OHA has approved Reliance to onboard providers contracted with nine CCOs, covering 14 Oregon counties. See [Reliance webpage](#) for more information. As of July 2021, there are 13 behavioral health practices, 4 oral health clinics, 52 critical physical health entities, and 5 major trading partners (hospital/health system) participating in the Program. Program ends September 30, 2021.

Direct Secure Messaging Flat File Directory, Contact: Karen.Hale@dhsoha.state.or.us

OHA will be ending the Flat File Directory service in August 2021.

The Flat File Directory (FFD) served as Oregon's address book for Direct secure messaging addresses since 2014. The purpose of the FFD was to enable participants to find or "discover" Direct addresses for providers outside their own organizations. In 2020, the Interoperability and Patient Access final rule from [CMS](#) established a requirement for providers to list and update their digital contact information in the National Plan and Provider Enumeration System (NPPES).

Stay Connected

You can find information about HITOC at our [website](#). Meetings are open to the public and public comments are accepted at the end of each meeting or in writing to the HITOC Chair and Vice-Chair in care of OHA (hitoc.info@dhsoha.state.or.us).

Program Contact

Health Information Technology Oversight Council: hitoc.info@dhsoha.state.or.us

Get involved with Oregon Health IT

Office of Health Information Technology: [HealthIT.Oregon.gov](#) **| Join the listserv:** [bit.ly/2VYgoDB](#)