

Health Information Technology Oversight Council Health IT Policy & Program Updates

February 2023



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Health IT Policy

HITOC Updates

House Bill 4150 (2022) Community Information Exchange (CIE) Legislative Report, Contact: hitoc.info@odhsoha.oregon.gov

House Bill (HB) 4150 directs HITOC to convene one or more groups to explore strategies to accelerate, support, and improve secure, statewide community information exchange (CIE) and provide recommendations to the legislature in a draft and a final report.

In their December 8 meeting, HITOC reviewed materials from the CIE Workgroup in preparation for the HB 4150 (2022) Final Report due to the legislature on January 31, 2023. These materials built on the CIE Workgroup's preliminary recommendations, including additional recommendations for governance of statewide CIE, and considerations for privacy and security of statewide CIE. The final report will be released by January 31, 2023.

The draft report, submitted on September 9, 2022, brings together the preliminary recommendations developed by the CIE Workgroup between April and July 2022, HITOC's comments on the recommendations, and findings from surveys and interviews with community-based organizations (CBOs). Please see below for links to the Draft Report and the executive summary:

- [House Bill 4150 Draft Report: Supporting Statewide Community Information Exchange](#)
- [Executive Summary: House Bill 4150 Draft Report](#)

For additional details on the report see the Community Information Exchange (CIE) section below.

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

Strategic Plan Update: Areas HITOC will explore under the Strategic Plan Update include Community Information Exchange (CIE), statewide Health Information Exchange (HIE), patient access to data, Electronic Health Record

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 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 & Analytics Infrastructure \(OHITAI\)](#) staffs HITOC and the Oregon Health IT Program.

(EHR) adoption and implementation, public health, and more. As part of this work HITOC chartered two workgroups, the HIE and CIE Workgroups. See below sections for additional information on their work.

Community Engagement

Community engagement opportunities for HITOC's Strategic Plan Update will be coming soon! The goal of these efforts is to ensure that communities are engaged, invited, and supported to identify challenges and offer solutions for health IT that will improve user experiences and assist Oregon in health system transformation efforts and eliminating health inequities by 2030. Engagement with impacted communities will be a key focus in 2023. Details around the work ahead and planned phases will be discussed at the [February 2 HITOC meeting](#).

HITOC February Meeting

HITOC's next meeting is [February 2](#) from 12:30-3:30. Members will hear an update on Oregon's 1115 Medicaid Waiver and some will participate in a panel on how the Waiver will impact their organizations and related to health IT. Members will also review the plan for engaging community in the Strategic Plan Update, receive an update on the work from the HIE Workgroup, discuss the final House Bill 4150 report, and receive an update on Oregon legislative session and bills related to health IT.

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

The HITOC-chartered [CIE Workgroup](#) met monthly from March to November 2022. The CIE Workgroup brought together individuals representing Oregon's diverse landscape of community, health care, and social services partners to provide recommendations on strategies to accelerate, support, and improve CIE across the state. The CIE Workgroup's vision is that all people living in Oregon and their communities have access to CIE that creates seamless trusted, person-centered connections and coordination to meet people's needs, support community capacity, and eliminate siloes to achieve health equity. Workgroup recommendations have informed the HB 4150 legislative reports, and will inform HITOC's Health IT Strategic Plan for Oregon and OHA efforts. For more information on CIE please see the [OHA CIE Website](#).

The CIE Workgroup developed recommendations and considerations in six key areas between April and November 2022 to inform the HB 4150 Final Report, which will be presented to the legislature by January 31, 2023. The CIE Workgroup's Recommendations being incorporated into the HB 4150 Final Report include:

- [Recommendations: Support for CBOs to Participate in CIE](#)
- [Recommendations: Support for Additional Partners to Participate in CIE](#)
- [Recommendations: OHA and Oregon Department of Human Services \(ODHS\) Roles in CIE](#)
- [Recommendations: Statewide CIE Data Program](#)
- [Considerations: Privacy and Security of Statewide CIE](#)
- [Recommendations: Governance of Statewide CIE](#)

The [HB 4150 Draft Report](#) was submitted on September 9, 2022, and contains preliminary recommendations developed by the CIE Workgroup between April and July 2022.

Health Information Exchange (HIE) Workgroup, Contact: Luke.A.Glowasky@dhsosha.state.or.us

HITOC chartered the HIE Workgroup in April 2022 to provide recommendations to HITOC and OHA on strategies to accelerate, support, and improve HIE across the state. Recommendations should reflect perspectives from all interested parties and partners, specifically including those serving communities that face health inequities. The HIE Workgroup recommendations will inform HITOC's HIT Strategic Plan for Oregon and other OHA efforts. See the goals and full scope in the [HIE Workgroup Charter](#). For more information on HIE, see the [HIE Overview](#) and the OHA [HIE Workgroup website](#).

HIE Workgroup staff and its HITOC liaison last presented to HITOC in December 2022 on the progress of the Workgroup. The Workgroup is proposing to submit its recommendations to HITOC via a set of five concept papers: 1) the statewide vision for HIE and accompanying topics; 2) connecting the entire care team; 3) advancing population health tools; 4) social determinants of health (SDOH) use cases of HIE; and 5) additional considerations related to consumers, privacy and security, and data integrity. The Workgroup will continue to update HITOC on its progress on these concept papers during its future meetings.

At its December 16 meeting, the HIE Workgroup dove more deeply into the concept paper on the statewide vision for HIE, an acknowledgement of the state's goals around health equity and how HIE impacts these, and the topic of HIE governance. The Workgroup also discussed how to best present the present state of HIE in Oregon to a broad audience and will continue working through those issues.

In its first meeting of 2023 on January 13, the HIE Workgroup discussed the concept paper on connecting the entire care team which would focus on addressing gaps in HIE adoption and use—including behavioral health and oral health participation; and the concept paper on consumers awareness and use of HIE, privacy and security, and data integrity. The next HIE Workgroup meeting will be on February 17, 2023 – meeting information will be posted on the [OHA HIE Workgroup website](#).

Health IT Landscape and Environmental Scan, Contact: Marta.M.Makarushka@dhsosha.state.or.us

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, reporting priorities and strategic planning. Refer to [the 2022 HITOC Report on Oregon's Health IT Landscape](#) for more information.

CCO Health IT Roadmaps and Support, Contact: Marta.M.Makarushka@dhsosha.state.or.us

Coordinated Care Organizations (CCOs) are contractually required to maintain an OHA-approved Health IT Roadmap. CCOs are required to submit an annual updated Health IT Roadmap to OHA reporting the progress made on the HIT Roadmap from the previous year, as well as plans, activities, and milestones detailing how they will support contracted providers in future Contract Years. Starting in 2022, CCOs are also required to submit data files reporting on EHR and HIE adoption by contracted providers.

CCOs submitted 2022 Health IT Roadmaps and data files to OHA at the end of April. These documents include 2021 progress and 2022-24 planned strategies to support EHR and HIE adoption, as well as HIT to support social needs screening and referrals for addressing SDOH needs. OHA completed its review and notified CCOs in July whether Roadmaps were approved or if any revisions were needed. All 2022 HIT Roadmaps have been approved; redacted Roadmaps are posted on OHA's [CCO Health IT Advisory Group \(HITAG\) website](#) (see HITAG website for reporting templates/guidance, 2021 Roadmaps). OHA is in the process of summarizing 2022 HIT Roadmaps, which will be used to inform HITOC and OHA efforts. HITAG's next meeting is February 10th 9 am – 12 pm and will focus on summaries of CCO efforts to support HIE for Care Coordination and Hospital Event Notifications and health IT to support SDOH needs.

Oregon Health IT Program: Partnerships, Programs and Initiatives

HIT Commons, Contact: Luke.A.Glowasky@dhsosha.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 (OHLIC) 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](#) (fka 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 Collective Platform subscription that includes use by CCOs, Oregon Department of Human Services programs, Tribal clinics, and other Medicaid care coordinators.

- HIT Commons hosted an in-person Learning Collaborative for CCO and Dental Care Organization (DCO) partners focusing on the Collective Platform on December 2, 2022. The Collaborative featured keynote speaker Dr. Liz Powers MD, MHA, Chief Integration Officer at Winding Waters Community Health Center in Enterprise, who presented on and lead a discussion around effective strategies and future needs for implementing value-based payment in Oregon. Collective Medical/PointClickCare staff presented updates and upcoming functionality and features for 2023, which led into a deep working discussion between participants around relevant Collective Platform use cases.
- The HIT Commons [EDIE Steering Committee](#) met on December 9, 2022. Topics of discussion included soliciting for suggested updates to the Committee charter, including discussion of updating the Committee's name to better reflect its scope in coordinating efforts statewide around Collective Medical/PointClickCare tools; updates on an upcoming new ambulatory clinic pricing/sponsorship model being developed collaboratively with Collective, HIT Commons, OHA, and other partners; updates on priority EDIE/Collective Use Cases in development; a demo of new Collaborative Insights functionality that will allow multiple members of a patient's care team to collaborate on important care guidelines added in the Collective Platform; and finalizing the Committee's priorities for 2023. Materials from that meeting, including the current HIT Commons priority EDIE/Collective Use Case list are available [here](#). The Committee will move from bi-monthly to quarterly meetings in 2023. The next meeting is March 17, 2023.

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

Oregon's PDMP Integration initiative connects EDIE, Reliance eHealth Collaborative 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](#).

- Use of the popular PDMP Integration initiative continues to grow with 15 new organizations going live in Q4 2022, bringing the total number of Oregon facilities accessing the PDMP registry via Integration to over 1,400, and the total number of active prescribers to over 20,900. Additional information including a list of participating organizations can be found in the [Q4 2022 PDMP Integration Implementation Report](#).

Federal and State Policy Updates

Federal Law and Policy Contact: Ashley.Ashworth@dhsosha.state.or.us

See past [HIT Policy and Program Updates](#) for news on federal health IT policy, updates to standards and guidance, including the Trusted Exchange Framework and Common Agreement (TEFCA) efforts.

Comment Opportunity: Proposed Federal Rule changes re: Confidentiality of Substance Use Disorder Patient Records

The U.S. Department of Health & Human Services (HHS) is seeking public comment on proposed rule changes to Confidentiality of Substance Use Disorder Patient Records regulations.

- The regulations at 42 CFR part 2 ("Part 2") protect the confidentiality of substance use disorder (SUD) treatment records. Confidentiality protections help address concerns that discrimination and fear of

prosecution deter people from entering treatment for substance use disorder.

- These changes are in response to requirements under the 2020 Coronavirus Aid, Relief, and Economic Security (CARES) Act, which requires HHS to align aspects of Part 2 with HIPAA rules and the HITECH Act. The CARES Act also requires HHS to update HIPAA Notice of Privacy Practices requirements to address Part 2 protections and individual rights.
- Specifically, the proposed rule increases coordination among providers in treatment for substance use challenges and increases protections for patients concerning records disclosure to avoid discrimination in treatment.

HHS encourages all stakeholders, including patients and their families, health plans, health care providers, health care professional associations, consumer advocates, and government entities, to submit comments. For more information, see the [announcement](#) and [fact sheet](#), review the [proposed rule](#) and [submit comments](#) by January 31, 2023.

Comment Opportunity: Proposed Federal Rule change re: Access to Health Information and Improving the Prior Authorization Process

The Centers for Medicare & Medicaid Services (CMS) issued a proposed rule that would improve patient and provider access to health information and streamline processes related to prior authorization for medical items and services. The rule proposes requiring certain payers to implement an electronic prior authorization process, shorten the time frames for certain payers to respond to prior authorization requests, and establish policies to make the prior authorization process more efficient and transparent.

The rule also proposes to require certain payers to implement standards that would enable data exchange from one payer to another payer when a patient changes payers or has concurrent coverage, which is expected to help ensure that complete patient records would be available throughout patient transitions between payers.

Finally, the rule also includes requests for information on:

- Standards for social risk factor data,
- The electronic exchange of behavioral health information among behavioral health providers,
- Improving the exchange of medical documentation between certain providers in the Medicare Fee-for-Service program,
- Advancing the Trusted Exchange Framework and Common Agreement (TEFCA), and
- The role interoperability can play in improving maternal health outcomes.

For more information, see the [announcement](#) and [fact sheet](#), review the [proposed rule](#) and [submit comments](#) by March 13, 2023.

New Draft USCDI Available

ONC published the latest [Standards](#) with the new [Draft United States Core Data for Interoperability \(USCDI\) v4](#), including 20 new data elements in one new data class to advance health IT for improved care, reduced inequities, and stronger public health reporting. ONC is also seeking feedback on which data classes and elements should be included in the final USCDI v4. Public feedback accepted on the [ONC Draft USCDI v4 website](#) until April 17, 2023. ONC plans to release the final USCDI v4 in July 2023.

Oregon Law and Policy

Oregon Legislation Impacting Health IT

Oregon's 2023 legislative session began January 17, 2023. As of January 25, 2023, OHA's health IT staff is tracking multiple bills with health IT and/or HITOC impacts, including:

- [House Bill 2440](#), Requires an entity participating in CIE to access, use or disclose information consistent with authorization provided by an individual or personal representative of an individual.

- [Senate Bill 694](#), Dictates requirements for membership makeup for task forces and work groups, including representation from community and community based organizations, and organizations that serve historically underrepresented and marginalized communities; allows for member stipends when not otherwise compensated for service.
- [House Bill 2959](#), Establishes the Task Force on Health Care Services in Oregon Schools. Among other things, the Task Force will examine possible health record systems or solutions for schools, and OHA may be asked to assist with subject matter expertise in this area.
- [House Bill 2558](#) and [Senate Bill 704](#), Establish the Universal Health Plan Governance Board tasked with creating a plan for implementing a Universal Health Plan by 2027. The plan will need to identify IT infrastructure needed for overall Plan operations.
- [House Bill 2642](#), Requires practitioners to query Oregon’s PDMP before prescribing Schedule II-IV controlled substances starting in 2024. OHA’s partnership with HIT Commons to provide PDMP Integration into EHRs is the predominant method used by Oregon practitioners to access the PDMP, with 80% of queries driven by Integration as opposed to direct access to the PDMP web portal.
- [House Bill 3040](#), Requires CCOs to share claims and encounter data with contracted community providers or their EHR vendors for their covered patients. As introduced, community providers would include community health centers, safety net clinics, and federally qualified health centers.
- [Senate Bill 619](#), Requires organizations to provide certain data rights to consumers, including rights to know how their data is processed, to correct or delete data, and to opt out. Organizations must also place higher protections on “sensitive data” such as biometric data or for children’s data. This proposal grew out of Oregon’s Consumer Privacy Task Force.

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

On September 28, Oregon received federal approval to pilot first-in-the-nation changes to the state’s Medicaid program over the next five years. Under the agreement, Oregon will receive \$1.1 billion in new federal funds to address inadequate food, housing and other root-cause issues that lead to poor health for people and families struggling to make ends meet. The agreement between Oregon and the federal agency Centers for Medicare & Medicaid Services (CMS) renews Oregon’s current section [1115 Medicaid Demonstration Waiver](#) for the next five years (covering 2022 – 2027) and provides federal sign-off and funding to implement the new changes.

Health IT plays a critical role in supporting [approved changes in the waiver](#) related to stabilizing transitions for Oregon Health Plan members, including supporting members transitioning from corrections, psychiatric, and foster care settings. Health IT tools can also play an important role in supporting information sharing between health care and social services to capture health related social needs, referrals, and services.

For more information, see the [Medicaid 1115 Demonstration Waiver Application webpage](#).

Policy Resources

2022 Health IT Report to HITOC: OHIT revised the *2019 Health IT Report to HITOC* to include 2021-collected data and Key Concept updates. [2022 Health IT Report](#) highlights were presented at the [June HITOC meeting](#). The 2022 report includes an appendix summarizing results of a 2021 health IT survey conducted in partnership with the CCOs, including EHR and HIE information from CCO-contracted physical, behavioral, and oral health organizations. A more detailed review of the report was presented at the [Health IT Landscape HITOC education session](#) on September 22.

Refer to past [HIT Policy and Program Updates](#) to review previous health IT resources, historical state and federal updates, and more.

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@odhsoha.oregon.gov).

Program Contact

Health Information Technology Oversight Council: HITOC.INFO@odhsoha.oregon.gov

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