

Health Information Technology Oversight Council

Thursday, December 1, 2011

1:00 pm - 5:00 pm

Council and Ex-officio Members Present: Steve Gordon (chair), Dave Widen, Bill Hockett, Bob Brown, Ellen Larsen, Carolyn Lawson

Council Members Participating by Phone: Robert Rizk, Greg Fraser, Sharon Stanphill, Bridget Barnes

Council and Ex-officio Members Absent: Judy Moore-Peterson, Brian DeVore, Mel Kohn

Guests Present: Janet Hofmeister (Harris Corp.)

Staff Present: Carol Robinson, Dave Witter, Steve Johnson, Dave Witter, Chris Coughlin, Tom Wunderlich, Ronit Zusman, Kate Lonborg, Mindy Montgomery, Rhonda Warnack, Lisa Parker

Welcome, Opening Comments, and Approval of Minutes – Steve Gordon (Chair)
Refer to meeting materials: “November 3 rd HITOC Minutes” <ul style="list-style-type: none">• Action: In response to Steve Gordon’s request, Robert Rizk made a motion to approve the minutes from November 3rd HITOC meeting. Dave Widen seconded the motion, which HITOC passed unanimously.
Meeting Objectives and Updates – Carol Robinson
Refer to slides 2-8 Refer to meeting materials: “Meeting summary - Consent Implementation Subcommittee Nov. 10, 2011” <ul style="list-style-type: none">• HIE Services RFP Update<ul style="list-style-type: none">○ Intent to award was issued to Harris Corporation.○ Contract negotiations are scheduled to occur in December.• Consent Implementation Subcommittee Update<ul style="list-style-type: none">○ Question: What is the outcome of these meetings? Answer: The Subcommittee is analyzing how to implement the consent policy to ensure it is effective and meaningful to consumers, while keeping it manageable for providers.• Office of National Coordinator for Health IT (ONC) Conference Update (Nov. 16-18)<ul style="list-style-type: none">○ ONC’s second Program Information Notice (PIN) will be issued soon and will focus on the annual update to the Strategic and Operational Plans.• New HITOC Appointments:<ul style="list-style-type: none">○ Carolyn Lawson, CIO, Oregon Health Authority and Oregon Department of Human Services○ Ellen Larsen, RN, Director, Hood River County Health Department
Medicaid EHR Incentive Program Report – Lisa Parker
Refer to slides 9-14 <ul style="list-style-type: none">• Oregon’s Medicaid Electronic Health Record (EHR) Incentive Program has issued a total of \$5.5 million in incentive payments.• The program is continually looking for opportunities to increase education and outreach.• Question: What does your office do to monitor progress and implementation of EHR technology? Answer: An applicant must submit paperwork to verify they meet the technology requirements. The program will also have an audit process.
Phase 1 and 2 HIE Services – Carol Robinson and John Hall
Refer to slides 15-22 <ul style="list-style-type: none">• Phase 1: To offer simple and foundational Direct messaging electronic health information exchange (HIE) services to all providers in the state of Oregon• Phase 2: To leverage and augment Phase 1 services with capability that allows for more sophisticated types of HIE and supports the needs of health information organizations, coordinated care organizations (CCOs) and accountable care organizations.• Question: What is Phase 2? Answer: Phase 1 focuses on Direct and pushing information. Phase 2 will likely include a more advanced provider directory and a query based service that adds more value. <p>Harris provided a brief demonstration of Florida’s Health Information Exchange (HIE) product</p> <ul style="list-style-type: none">• Harris demonstrated how Florida is utilizing Direct-messaging HIE to improve the newborn

screening process that previously relied heavily on faxes.

- Question: Can you filter the provider directory search results by local providers? Answer: There are specialty and city filters available.
- Question: Will offering the web-based tool take away the incentive for providers to adopt electronic health record (EHR) technology? Answer: We don't believe so and anticipate this low barrier option will motivate providers to adopt EHR technology.
- Question: What will it cost to participate in Phase 1? Answer: It is unclear at this time and we are exploring financing options.

Discuss and confirm advice and input to Oregon Health Policy Board – Carol Robinson & Tom Wunderlich

Refer to materials: "HIT Language in Draft CCO Proposal Outline 1," "HITOC Discussion Summary for HPB review," "Memo to HPB – EHR Granularity and Statutory Restrictions"

Refer to slides 23-26

- The Oregon Health Authority (OHA) Director's Office requested a condensed version of the HIE and health information technology (HIT) recommended language to include in the CCO proposal.
- HITOC members agreed with the proposed language and asked for minor revisions.
- Question: Can the public comment on the CCO proposal? Answer: Comments will be accepted by the Oregon Health Policy Board and by the legislature.
- Carol Robinson will present this proposed language on HIE and HIT to the Oregon Health Policy Board on December 13, 2011.

BREAK

Oregon law and disclosure of lab results to patients – Carol Robinson & Chris Coughlin

Refer to materials: "Summary of ORS 438.430 and workgroup panel feedback," "Meeting Summary – Oct. 27 Consumer Advisory Panel," "Meeting Summary – Nov. 14 Labs Stakeholder Committee"

Refer to slides 28-32

- HITOC stakeholder groups submitted differing feedback to HITOC regarding an Oregon law (ORS 438.430) that requires laboratories to wait seven-days before releasing test results to patients directly if the ordering provider has not explicitly granted authorization for the lab to do so.
- HITOC members discussed the feedback and determined a recommendation to change the law was out-of-scope and beyond HITOC's statutory authority.
- HITOC asked staff to communicate their discussion and decision to the stakeholder groups that provided input.

Long Term Care Survey Results – Carol Robinson & Dave Witter

Refer to materials: "Long Term Care Survey Summary"

Refer to slides 33-42

- HITOC reviewed the survey summary highlights and discussed the importance of improving EHR technology adoption in the long-term care community.
- Question: What percentage of long-term care residents are eligible for Medicaid? Answer: A large percentage of Oregon's Medicaid dollars are used by the long-term care community.

Public Comment

- Mike Saslow: The long-term care survey results are not surprising. We need to work with the long-term care community to improve adoption of health information exchange and electronic health record technology.
- Scott Zacks: The long-term care community wants to have accurate health information about their patients and Direct-messaging is a great mechanism to meet their need.
- Andy Smith: Requested that HITOC consider engaging the behavioral health community and perform an environmental scan to assess technology adoption.