

Health Information Technology Oversight Council

Thursday, October 6, 2011

1:00 pm - 5:00 pm

Council and Ex-officio Members Present: Robert Rizk, Dave Widen, Greg Fraser, Bill Hockett, Bob Brown
Council Members Participating by Phone: Steve Gordon (Chair), Brian DeVore, Mel Kohn, Sharon Stanphill
Council and Ex-officio Members Absent: Bridget Barnes, Judy Mohr-Peterson,
Guests Present: Carolyn Lawson (CIO of DHS/OHA), Sean Kolmer (Governor Kitzhaber's Office)
Staff Present: Carol Robinson, Kahreen Tebeau, Oliver Droppers, Dave Witter, Steve Johnson, Dave Witter, Luke Glowasky (phone), Chris Coughlin

Welcome, Opening Comments, and Approval of Minutes – Steve Gordon (Chair)

Refer to meeting materials: "September 8, 2011 HITOC Minutes"

- **Action:** In response to Steve Gordon's request, Greg Fraser made the motion to approve HITOC's July meeting minutes. Bill Hockett seconded the motion, which HITOC passed unanimously.

Health System Transformation, Work Group and Process – Sean Kolmer

Refer to slides 4-7

- All four workgroups have discussed health information technology (HIT) and health information exchange (HIE), and how these tools can best support Coordinated Care Organizations (CCO).
- HITOC members emphasized the need to educate CCO Work Groups and staff on HIT, HIE and electronic health records (EHRs) technology.
- Carol Robinson will present to the CCO Metrics Work Group on Oct. 17th.
- The Metrics Work Group would like background information on feasibility among proposed metrics and HIT that might help support data collection and reporting activities.

Public Comment (Dr. Saslow)

- I respectfully disagree and believe the CCO process is in jeopardy. From my vantage point, the communications between state government and academia is broken. The academic arena is a great intellectual resource.

Meeting Objectives and Updates – Carol Robinson

Refer to slides 8-15

- Staffing Updates
 - Steve Johnson introduced as the HIE Program and Manager Rhonda Warnack introduced as the Office of Health IT Project Manager
- AIM Conference
 - HITOC members provided positive feedback to staff on the first annual AIM conference held September 14, 2011.
 - HITOC encouraged staff to go into more detail next year and to focus outreach on providers and consumers.
- Oregon e-Health Pledge
 - Continue to move the Oregon e-Health Pledge forward and find meaningful uses
- Administrative Simplification
 - A companion guide to simplify administrative and financial transactions has been adopted into rule by the Department of Consumer and Business Services (DCBS).
 - The Department of Medical Assistance Programs (DMAP) is moving quickly to update their systems.
- Markle Foundation Advisory Committee
 - Carol Robinson serves as a member of this committee and is part of the planning process for Markle's framework for HIT.
- Technology RFP
 - OHIT is actively negotiating with Harris Corporation.

Medicaid EHR Incentive Program Report – Lisa Parker

Refer to slides 16-18

- The Medicaid EHR Incentive Program launched September 26, 2011.

<ul style="list-style-type: none"> • The program is on track to deliver the first Medicaid incentive payment in October. • Medicaid numbers: <ul style="list-style-type: none"> ○ 36 hospitals with the intent to apply ○ 3 hospitals have submitted applications ○ 284 providers have the intention to apply ○ 75 providers have submitted applications • MHIT program will facilitate a webinar on the enrollment process to help providers and hospitals in Oregon.
<p>Consent Policy & Rule-making Process – Chris Coughlin & Kahreen Tebeau</p>
<p>Refer to slides 19-21</p> <ul style="list-style-type: none"> • HIO Panel supported HITOC’s decision to defer the consent policy implementation. • The Legal & Policy workgroup also supported the decision and decided to form a subcommittee to reexamine the consent policy. • HITOC directed the subcommittee to focus on how to implement the opt-out consent model. • Staff will report to the Consumer Advisory Panel in late October.
<p>Break</p>
<p>ONC HIE Program Status Briefing – Carol Robinson</p>
<p>Refer to materials: “ONC HIE Program Status Briefing Oct. 2011.”</p> <p>Refer to slides 28-63</p> <ul style="list-style-type: none"> • The Office of the National Coordinator for Health IT (ONC) will receive a report on our progress in ONC’s three priority areas: e-prescribing, electronic lab reporting and care summaries. • ONC asked that Oregon purpose a fourth priority area. • Staff is recommending HITOC consider quality as the fourth priority area.
<p>Quality Corp – Mylia Christensen</p>
<p>Refer to slides 30-62</p> <ul style="list-style-type: none"> • Focusing on quality is an opportunity to bridge the divide between process and outcomes. • Question: Is Quality Corp using clinical data to track outcomes? Answer: We are working with a potential partner in central Oregon to fast track this work and extract clinical data from EHRs. We hope to have something moving next year. • Question: Will Quality Corp be using HIE to collect quality data or will it also be creating measures to show the benefit of HIE? Answer: Both. • HITOC asserted that the quality work would align with the CCOs and health transformation. • Action: Dave Widen moved that HITOC purpose their fourth priority area be quality and affordability. Robert Rizk seconded the motion, which HITOC passed unanimously.
<p>Workgroup and Panel Reports – Carol Robinson, Dave Witter</p>
<p>Refer to materials: “HIO Survey”</p> <p>Refer to slides 23-27</p> <ul style="list-style-type: none"> • Staff distributed a survey to member of the HIO Panel =earlier in October. The survey will inform updates to Oregon’s strategic plan on HIE
<p>Looking Forward</p>
<p>Refer to slides 64-65</p> <ul style="list-style-type: none"> • HITOC confirmed the first Thursday of each month is a good meeting time. • A retreat in 2012 will be scheduled after new HITOC members are confirmed by the Senate.
<p>Public Comment</p>
<p>Mike Saslow: The CCO workgroups do not fully understand the importance of HITOC’s work in achieving their collective goal.</p>