

About the Health Information Technology Oversight Council – HITOC

The Health Information Technology Oversight Council (HITOC) was created by the passage of HB 2009 within the Oregon Health Authority. The Council is comprised of eleven individuals appointed by the governor, and is charged with developing and implementing a statewide strategic plan for electronic health information exchange, coordinating public and private efforts to increase adoption of electronic health records, setting technology standards, ensuring privacy and security controls, and creating a sustainable business plan to support meaningful use of health information technology to lower costs and improve quality of care.

Upcoming Events:

HITOC Meeting

Thursday, Feb. 2, 2012
1 p.m. to 5 p.m.
Portland State Office Bldg.
Rm 1D
800 NE Oregon St.
Portland, OR

HITOC Retreat

Wednesday, March 7, 2012
9 a.m. to 5 p.m.
Eola Viticultural Center
215 Doaks Ferry Road NW
Salem, OR

HIE Services Implementation Now Under Way

Direct will provide secure one-on-one exchanges of patient information

After nearly two years of planning and policy development, health information exchange services in Oregon are now in the implementation stage. Contractor Harris Corp. has gotten the go-ahead to develop the first phase of work, with the goal of making the initial services available to users in late March.

First up will be a Direct Web Portal, which will allow enrolled participants the ability to securely send and receive electronic health information to and from any other enrolled participant. Direct should be online and tested during early March, and opened for general availability after March 22.

Planning for Phase II HIE is underway and could add the query or lookup of patient records through Master Patient Index Record Locator services, EHR-to-EHR health information exchange, connectivity to federal systems such as the VA and SSA, and interface connectivity among Public Health, health insurance exchange, Medicaid and other state systems.

Oregon Long-Term Care Providers See Health IT Benefits

Survey indicates, though, that EHR use hindered by cost, training

Survey results show that Oregon's long-term care community is interested in adopting technology to improve care delivery. The Office of Health Information Technology conducted this survey to assess current technology adoption in the long-term care community and found that most facilities use some type of technology, but only 30% have adopted electronic health records (EHR). The main barriers to adoption are the cost of implementation and the required staff training.

Of the respondents who do not use EHR technology (70%), many believe an EHR would decrease errors (62%), improve resident care (58%) and quality monitoring (51%), and increase efficiency (55%). These perceived benefits were validated by respondents using EHR technology (30%) who reported the same factors are the most important reasons to adopt EHR technology in the long-term care setting.

Respondents indicated that the majority of health information exchange is done with paper or fax, even among providers with EHR technology in place. Despite the low level of electronic information sharing, there is a clear interest within the long-term care community to expand technology to improve care coordination.

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Medicaid EHR Incentive Program Continues to Support EHR Adoption Across the State

Oregon's Medicaid EHR Incentive Program continues to show strong enrollment. At last count, 187 eligible providers have received a total of \$3.97 million in incentive payments; 29 hospitals have received a total of \$22.29 million.

For eligible providers, the **deadline to apply for a 2011 payment is February 29, 2012**. If a provider does not currently have access to the Oregon Health Plan Provider Web Portal, it may take up to 4-6 weeks for portal access to be processed. See www.medicaidehrincentives.org.gov for information on how to apply.

OCHIN O-HITEC Update: Provider Assistance Has Surpassed Original Targets

OCHIN O-HITEC, Oregon's Regional Extension Center (REC) for Health IT, has surpassed the goal of its 2009 federal grant award by signing on more than 2,700 Oregon primary care providers. Participants receive help selecting, implementing and effectively using EHR technology to improve patient care and reduce costs.

Of those 2,700 providers, 61 percent are already utilizing an EHR in a sophisticated way. And 10 percent of that group have already achieved the first stage of a three-stage federal process to meaningfully use an EHR and qualify for federal incentives (up to \$64,000 per Medicaid-eligible provider or up to \$44,000 per Medicare-eligible provider). O-HITEC anticipates that many more providers will qualify in the first quarter of 2012. Although they are not a part of those counted as eligible providers under the REC grant, medical specialists in Oregon are also benefitting from membership in O-HITEC by receiving the same critical EHR adoption and usage services.

O-HITEC leaders say their success is due in part to relationships, such as those with education grant partner Oregon Health & Science University and statewide partnerships with organizations such as the Oregon Medical Association, Oregon Association of Family Physicians, the Oregon Rural Health Association, many Independent Physicians Associations and the state of Oregon. "I could not be prouder," said Abby Sears, CEO of OCHIN, the organization that oversees O-HITEC. "Strategic partnerships and dedicated, mission-driven staff members made our success possible."

In the next two years, in addition to helping providers adopt and implement EHRs, O-HITEC is offering services to help all providers optimize their use of EHRs. Services include online classes, one-on-one training, technical assistance, practice transformation and quality improvement. "The exciting work of health reform is just beginning and we are here to help providers to take full advantage of this extraordinary technology and the training to make it useful," said Clayton Gillett, O-HITEC Executive Director.

Long-term Care Survey

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The survey analysis also showed a strong interest among the long-term care community in adopting advance technologies, such as automatic fall detectors (66%), automated medication administration (60%), electronic vital sign monitoring (68%), remote patient monitoring capabilities (75%) and video conferencing (46%).

The survey was carried out in partnership with two of Oregon's LTC associations: Oregon Health Care Association and LeadingAge Oregon.

[ONC Blog](#) Lists Top 2011 Health IT Accomplishments

1. Launch of the Medicare and Medicaid EHR Incentive Programs: More than 1,500 EHRs have been certified; 154,362 eligible professionals and 2,868 eligible hospitals have registered with either of the EHR Incentive Programs; and more than 20,000 eligible professionals and 1,200 hospitals have already received their incentive payments from CMS, totaling \$1.8 billion so far.

2. Launch of DIRECT: During 2011, the Direct Project went from publishing its first set of consensus-approved specifications to testing in [pilots](#), to initial production implementation across vendor and state boundaries.

3. The National Quality Strategy: In March, HHS released the [National Quality Strategy](#) for health improvement, the first effort to create a national framework to help guide local, state, and national efforts to improve the quality care in the United States.

4. Launch of the Standards “Summer Camp”: This summer, 150 committed members of the Standards and Interoperability Framework Transitions of Care Initiative worked toward consensus on a single standard for transmitting care transitions data.

5. Spurring Health Information Technology Innovation: The Investing in Innovations (i2) Program is the first-of-its-kind government effort to use [prizes and challenges](#) to stimulate and accelerate the development of solutions to targeted health care problems.

6. Health Information Technology Workforce: As of October 2011, community colleges in an ONC program have graduated 5,717 health information technology professionals, with 10,065 more students currently in the training pipeline.

7. Breach Reporting and Increasing Security Awareness: HHS’s Office for Civil Rights (OCR) issued a [report to Congress](#) on breaches of unsecured protected health information.

8. Consumer eHealth Comes to the Fore: CMS and CDC issued proposed regulations that would make it easier for patients to access lab data, and developed tools to make it easier for consumers to understand how sensitive information held in personal health records may be used.

9. Regional Extension Centers Surpass their Goals: ONC has funded 62 [Regional Extension Centers \(RECs\)](#) nationwide.

10. Growth in the Adoption of EHRs: The percentage of non-hospital based physicians who have adopted a basic EHR has doubled from 17% in 2008 to 34% in 2011. Nearly 40% of primary care physicians have adopted an EHR.

Read more of ONC Director Farzad Mostashari’s thoughts on the [Health IT Buzz Blog](#).

Health Information Technology Oversight Council

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Health IT Focus of Feb. 15 Panel Discussion by SAO

The Software Association of Oregon (SAO) is holding a Health IT-themed evening focused on innovation in health care. The [Healthcare IT Innovation Series Event](#) will be February 15 from 6 p.m. to 9 p.m. at the OHSU Center for Health & Healing at South Waterfront in Portland.

The evening will feature a panel discussion and Q&A with OHSU’s Chief Medical Officer, Dr. Charles Kilo, and Eric Dishman, Director of Health Innovation and Policy for Intel’s Digital Health Group.

Following the launch of this series, SAO plans to add additional community building health care IT innovation events and programs, including the addition of a Healthcare IT Innovation Track to the 2012 Innotech Conference.

Articles of Recent Interest

- [\\$2.5 Billion in EHR Incentive Payments Issued in 2011](#) (Government Health IT online)
- [Survey Sheds Light on EHR Implementation by Mass. Physicians](#) (HealthImaging.com)
- [ONC Announces Patient Video Contest](#) (Health IT Buzz blog)