

## Supplemental Q&A for the HIE Onboarding Program

***Note: Statements made in this Q&A document are not binding upon OHA. Prospective proposers are cautioned that the official RFP, when released, may be different from the drafts described here, and after released will change only by written addenda issued by OHA.***

**Q: Would an HIE that subcontracts its onboarding work to another HIE be eligible for this Program?**

A: Potentially, yes. The program as currently conceived does not exclude an HIE entity simply because it does not directly operate HIE services.

The program as currently conceived is open to entities whose businesses include establishing policies for health information exchange, providing governance for health information exchange, and providing services for health information exchange. This requirement does not exclude entities that provide services for health information exchange via subcontracting.

However, please note that the above requirement is one of many requirements that entities must meet. Thus, while providing services via subcontracting does not automatically exclude an entity from participating in the program, meeting one requirement does not guarantee eligibility.

Prospective proposers may want to consider issues of administrative costs and complexity, alignment among HIEs, and degree of control over onboarding priorities.

**Q: Would HIEs be required to provide meaningful financial support to any new participant, even a large hospital or health system that may be relatively well-resourced?**

A: No. The requirement to provide meaningful financial support will be limited to those new participants who face barriers. Specifics of that requirement will be developed during contract negotiation.

**Q: Should Region 1 as shown in the HIE Onboarding Informational Webinar be split up?**

A: Yes. The current regional map splits the Region 1 identified in the HIE Onboarding Informational Webinar into two separate regions: Region 1 (Central Oregon; Crook, Deschutes, and Jefferson Counties; Pacific Source—Central Oregon) and Region 2 (Hood River/The Dalles; Hood River and Wasco Counties; Pacific Source—Columbia Gorge). The other regions have been renumbered accordingly.

The current regional breakdown is as follows:

Region Number	Region Name	Counties	CCO
1	Central Oregon	Crook, Deschutes, and Jefferson	Pacific Source – Central Oregon
2	Hood River/The Dalles	Hood River and Wasco	Pacific Source – Columbia Gorge
3	Eastern Oregon	Baker, Gilliam, Grant, Harney, Lake, Malheur, Morrow, Sherman, Umatilla, Union, Wallowa, and Wheeler	Eastern Oregon Coordinated Care Organization
4	Eugene/Springfield	Lane	Trillium Community Health Plan
5	Northern Coast	Clatsop, Columbia, and Tillamook	Columbia Pacific Coordinated Care Organization
6	Portland Metro	Clackamas, Multnomah, Washington	Family Care, Inc. Health Share of Oregon
7	Albany/Corvallis	Benton, Linn, and Lincoln	Intercommunity Health Network
8	Salem	Marion and Polk	Willamette Valley Community Health
9	Southern Coast	Coos and Curry	Western Oregon Advanced Health LLC AllCare Health Plan
10	Roseburg	Douglas	Umpqua Health Alliance
11	Southern Oregon	Jackson, Josephine, and Klamath	AllCare Health Plan Cascade Health Alliance Jackson Care Connect Primary Health of Josephine County
12	Yamhill	Yamhill	Yamhill Community Care Organization

**Q: Will OHA require any specific accreditation or standards for HIEs?**

A: No. However, OHA will take into account any accreditation or use of standards that increases the value of HIE services when evaluating HIEs' proposals. Participating HIEs will be expected to engage with ongoing statewide efforts around interoperability for health information exchange, including the use of standards.

**Q: Will support be available for work completed prior to contract execution?**

A: No. OHA will not provide funding for any work completed prior to contract execution.

**Q: Will support be provided prior to completion of milestones?**

A: All support provided will be milestone-based. Specific milestones and support amounts will be determined during contract negotiation.

**Q: How many contracts does OHA plan to award?**

A: OHA may award one or more contracts. OHA may, at its discretion, elect to cap the number of Contracts awarded.