

Health Information Technology Oversight Committee

February 4, 2010

1 – 5 pm

Portland State Office Building

Council Members Present:

Bill Hockett, Dave Widen, Brian DeVore, Robert Rizk, Greg Fraser MD, Steve Gordon MD, Rick Howard, Sharon Stanphill, Bridget Haggerty, Marie Laper, Bob Brown

Council Members Absent:

None

Strategic Workgroup Members Present:

Brian Ahier (via phone), Robert Thomson (via phone), Russell Hargrave, Vaughn Holbrook

Staff:

Susan Otter, Carol Robinson, Joan Lockwood, Oliver Droppers, Dept of Justice Attorney General Micky Logan, Jeanene Smith MD (via phone), Dave Witter, John Hall, Chris Coughlin, Julie Harrelson, Dawn Bonder, Mindy Montgomery

Review of Agenda and Proposed Outcomes

Minutes of the January meeting will be presented at the March meeting.

Updates (0:04:36.99)

State HIE Cooperative Agreement: The Agreement has not yet been delivered from ONC. A posting of the Federal Registry yesterday noted REC money will be finalized in February. We expect to be in the first round of cooperative agreements and are confident it will come through. We have brought on staff which will be funded through ONC. Thanks to assistance from some of your organizations, we have a consultant team that's up to speed and working closely with us. We continue on our timeframe.

Medicaid HIT Planning Advanced Planning Document (P-APD): Oregon provided our document to Region 10 on Feb 24 and expect rapid approval and expect rapid approval. We have an excellent proposal in front of CMS. Susan Otter is primary author and leading the coordination for the HITOC team with the Medicaid HIT planning team. Aaron Karjala is leading the Medicaid HIT planning team. With the P-ADP and the Cooperative Agreement from ONC, Oregon will have two plans that present a united, integrated view of our State. (See meeting materials for draft P-APD)

Regional Extension Center: OCHIN, working with OHSU, has been notified they will be in the first round of funding. HITOC will be working and collaborating with OCHIN as they develop REC services. We are meeting with OCHIN leadership and will be bringing information forward as we align strategy.

Other Funding Announcements:

- Three Oregon institutes have received Social Security Administration (SSA) grants to set up

pilot projects to accelerate the disability claims process. Of 15 awards, OR is receiving three.

- Community Colleges and Workforce. Working with our 10-state region, Oregon put in a collaborative application. Portland Community College will be the lead entity and will be working with several other community colleges within Oregon.

Discussion:

- Question: Has HITOC presented to the Oregon Health Authority? Carol Robinson: I presented to the Health Policy Board and gave an update of HITOC activity. The Board is very interested in ensuring the integration of Medicaid HIT and State HIE (HITOC) planning. HITOC reports to the Health Authority and the Governor's Office and expects to give regular updates to the Health Policy Board.

Privacy, Security and the HISPC project (0:18:03.49)

Linda Dimitropoulos, PhD, Sr. Director, Health Services Research Program, RTI Consultation (via Webinar, see slides)

- **Health Info Security and Privacy Collaboration (HISPC).** Linda Dimitropoulos presented a series of Power Point slides; narration is available on the meeting recording.

Dawn Bonder, Policy Advisor to Governor Kulongoski, formerly Oregon HISPC Project Director (see slides)

- **OR Health Information Privacy and Security Collaboration Project (Oregon HISPC):** June 2006 – July 2009. Dawn Bonder presented slides on this project.

Discussion:

- Question about exchange issues related to border states and hospitals serving out-of-state patients. Answer: States may connect to each other directly or to NHIN.
- Question: What materials should we review to be most effective? Linda/Dawn: Depends on priority areas. See HISPC Action and Implementation Manual.
- Question: Did the principles adopted by HISPC in 2006 carry forward? Answer: The Markle principles have carried forward as the recommended policies for Oregon. They will be revisited as part of the HITOC planning process within the Legal and Policy domain.
- Question: What was the most controversial thing that came up when talking with folks around the HISPC project? Answer: The project gave legitimacy to talking about privacy, helped open up talk. People are really worried about their health information being used against them and medical ID theft. In OR there is no overarching consumer watchdog group. How do you build a system to minimize risk?
- Question: Is there a national trend toward a particular privacy model? Answer: Not sure, however, one interesting trend is regardless of whether states have an opt in or opt out model, they are generally getting about 96% participation. These decisions are typically based on community values. Success with HIE rests with consumer acceptance and trust.
- Question: What are the legal implications for Oregon between opt in and opt out? Answer: These implications will be outlined in detail as part of the planning process during the Strategic Workgroup and HITOC meetings around the Legal and Policy domain. There will need to be clear communication of the risks and benefits to the consumer in any opt in or opt out system.

BREAK

Beacon Grant Process (1:44:53.03)

Bob Brown presented a report on the process used by the HITOC Beacon application subcommittee to review applicants' requests for state letters of support. The subcommittee included HITOC members Bob Brown, Rick Howard, and Dave Widen.

- Subcommittee reported that they reviewed the summaries of all of the grant applicants in Oregon. Six applications were presented and all were given letters of support. The committee observed there is a range of maturity and readiness in communities in the application of HIE.
- The application information was informative for the planning process and timeline and could be used in planning regarding readiness; to help communities tackle technology; identify where assistance is needed; and suggest consulting support. These applications are useful in development of gaps analysis and strategy.

Discussion:

- It was noted sometimes the right incentives bring about results, create conversations and collaborations. HITOC might think about incentives on table to give reason to do HIE.
- Question about geographical aspects of the grants. Answer related to defining areas by zip code.
- Question about any common threads noticed in applications. Answer related to presence of a subset of a community attempting to impact health outcomes.
- An April meeting of Local Health Information Organizations including Beacon Applicants will be scheduled.

HITOC Strategic Planning Discussion (2:06:31.95)

Reconfirming HITOC Principles. Refer to the slide "Reconfirming: Guiding Principles for HITOC" was tentatively adopted 11/5/09 and is under review.

- Action: Staff will change the fourth bullet to read "privacy" instead of "confidentiality"
- Action: Staff will propose wording to rephrase the third bullet to reflect that solutions must meet standards where such standards exist, or to the effect that solutions will not counter established standards.

Update on HIE/HIT Environment. The issue of continuing funding was raised, and the need to spend strategically. Questions about the technological architecture were raised, noting that funding and technology are inter-related.

State Plan Roadmap- Julie Harrelson

- See Attachment 7, the outline/table of contents for Oregon's State Strategic and Operational Plan and the list of deliverables.
- John Hall gave examples of possible configurations for technical infrastructure. His plan is to present options to HITOC for conversation, deliberation, decision.
- Discussion followed on terminology, i.e., is HIE a verb and/or a noun? It was suggested that terminology will become obvious as the group moves through the process. In the meantime, this question will be presented to the workgroup with a recommendation back to the HITOC at its March meeting.

Update on Oregon Environment- Dave Witter, Susan Otter, John Hall

Environmental Scan

- The original scan did not include all payer all claims database. HB2009 established transparency. If it is known where claim originated, the point of service is known and therefore

more information can be derived. Is there a way to merge information from multiple healthcare plans? This is the underpinning for the master index.

EHR Survey:

- Referring to the EHR report, which highlights EHF functionalities. Oregon rates of adoption are much higher than national rates. 65% have some kind of EHR. Lot of clinicians are close to meeting full national criteria but are not close to clear and significant use. There are additional requirements to make EHR useful.

HIE Survey and Gaps Analysis

- We have received six HIE surveys and one PACS survey, and staff will be following-up to gather the remaining responses
- We plan to look at information we've gathered and look for gaps, regions that don't have a structure for HIE, providers that have HIE but are not engaged in HIE, those who are adopting, gaps in what's being used, what's being planned, 2011 coming. Status of HIE in state will influence the plan development.

Strategic Workgroup- Julie Harrelson

- Information was presented on the strategic workgroup process and the first workgroup meeting
- There is an overall sense of wanting to be in sync with national effort; have a multi-faceted point of view to leverage, implement, make process iterative; able to change decision as landscape adjusts.
- In the first discussion on governance debate, there was a lively discussion, looking at other states for models. MN has a governing body as part of the State, purely regulatory. NY has a public utility type plan; it is not a state body.
- The dates of future meetings were reviewed and it was noted that the planning process can't be a completely linear process for addressing the domains. Workgroup meetings will be available by webinar open to HITOC members. Public webinars are being scheduled as outreach.

Public Comment Opportunity (03:31:32.34)

Written testimony provided by Chris Apgar. Copies are available to the public upon request.

Adjourned at 4:50 pm.