

## Health IT Policy

### Federal Law and Policy Updates

**Federal Interoperability and Patient Access Final Rules**, Contact: [Marta.M.Makarushka@dhs.ohha.state.or.us](mailto:Marta.M.Makarushka@dhs.ohha.state.or.us)

*On May 1, 2020, the U.S. Department of Health and Human Services (HHS) published two health information technology (IT) final rules requiring implementation of new interoperability policies; the Office of the National Coordinator for Health Information Technology's (ONC) [21st Century Cures Act Final Rule](#), supporting seamless and secure access, exchange, and use of electronic health information (EHI), and the Centers for Medicare and Medicaid Services (CMS) [Interoperability and Patient Access Final Rule](#), focused on patient access to EHI and interoperability.*

These rules significantly impact EHI exchange requirements across the health care continuum, including:

- As of April 5, 2021, providers must provide patients with access to their electronic health information upon patient request.
- As of May 1, 2021, hospitals are required to send electronic admission, discharge, and/or transfer event notifications to the patient's primary care other physician identified by the patient.
- As of July 1st, CMS-regulated payers are required to (1) implement a standards-based application programming interface (API) that allows patients to easily access their claims, encounter, and clinical information through third-party applications of their choosing, and (2) make provider directory information publicly available via a standards-based API.
- Beginning January 1, 2022 CMS-regulated payers are required to exchange certain patient clinical data at the patient's request, allowing the patient to take their information with them as they move from payer to payer over time to help create a cumulative health record with their current payer.
  - On September 15, 2021, CMS published three [FAQs](#) which explain that CMS will not take enforcement action on these provisions of the final rule until future rulemaking is finalized.

**OHA Support for Implementing Federal Interoperability and Patient Access Final Rules**, Contact: [Marta.M.Makarushka@dhs.ohha.state.or.us](mailto:Marta.M.Makarushka@dhs.ohha.state.or.us)

Oregon Health Authority (OHA) support for Oregon health care organizations in implementing these new rules includes:

### What is HITOC?

The Oregon Legislature created the [Health Information Technology Oversight Council \(HITOC\)](#) to ensure that health system transformation efforts are supported by health information technology. HITOC is a committee of the [Oregon Health Policy Board \(OHPB\)](#), which sets policy and provides oversight for the Oregon Health Authority (OHA), including OHA's health system transformation efforts.

HITOC has six responsibilities:

1. Explore health IT policy
2. Plan Oregon's health IT strategy
3. Oversee OHA's health IT efforts
4. Assess Oregon's health IT landscape
5. Report on Oregon's health IT progress
6. Monitor federal health IT law and policy

HITOC brings partners across Oregon together for centralized policy work, strategic planning, oversight of health IT efforts, and landscape/policy assessment, so health IT efforts are more coordinated. HITOC also provides health IT expertise to OHPB and to Oregon lawmakers so they are informed about health IT in Oregon when they make policies and laws about health.

OHA's [Office of Health IT \(OHIT\)](#) staffs HITOC and the Oregon Health IT Program.

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- Hosted three webinars: recordings, materials, and additional resource can be found on the [Office of Health IT \(OHIT\) final rules webpage](#).
- Hosted work sessions with coordinated care organizations (CCOs) and dental care organizations (DCOs) for further clarification on priority rule requirements.
- Partnering with the [HIT Commons](#) to host a monthly Payer Interoperability Collaborative (PIC) for CCOs, DCOs, and Medicare Advantage plans to focus on alignment and implementation of the CMS Interoperability and Patient Access Rules. See page 6 for more information.

**ONC Health Interoperability Outcomes 2030**, Contact: [Marta.M.Makarushka@dhsosha.state.or.us](mailto:Marta.M.Makarushka@dhsosha.state.or.us)

*ONC has launched a new project called “Health Interoperability Outcomes 2030.” ONC is looking for input on what outcomes you would like to see. Later this fall, ONC intends to publish a prioritized set of health interoperability outcomes that align with ONC’s vision for interoperability and the 2020-2025 Federal Health IT strategic Plan. [Submissions were](#) accepted through July 30, 2021. Learn [more here](#).*

**ONC Publishes the USCDI Version 2**, Contact: [Lisa.A.Parker@dhsosha.state.or.us](mailto:Lisa.A.Parker@dhsosha.state.or.us)

*ONC published the United States Core Data for Interoperability Version 2 ([USCDI v2](#)) on July 13, 2021. The USCDI v2 helps to standardize data elements, providing a roadmap to improve interoperability of health data for patients, providers, and other users. [ONC’s July 2021 Standards Bulletin](#) is to help explain the v2 data elements and describes ONC’s vision for future expansion through v3.*

## Oregon Law and Policy Updates

**Oregon 2021 Legislative Session**, Contact: [Lisa.A.Parker@dhsosha.state.or.us](mailto:Lisa.A.Parker@dhsosha.state.or.us)

Oregon’s 2021 legislative session concluded in late June. [OHA’s 2021 Legislative End-of-Session Report](#) summarizes key health-related legislation that passed. For a summary on the status of introduced health IT-related bills, see the HITOC August 2021 [meeting materials](#).

**Oregon 2022-2027 Medicaid 1115 Demonstration Application**, Contact: [1115Waiver.Renewal@dhsosha.state.or.us](mailto:1115Waiver.Renewal@dhsosha.state.or.us)

*Oregon is applying to the CMS for a new Medicaid 1115 Demonstration waiver for the years 2022-2027. The deadline to submit the application is February 2022. Medicaid is a state and federal program. The Oregon Health Plan (OHP) is the name of Oregon’s Medicaid program.*

## Health IT and Health System Transformation: Vision and Goals

HITOC set out a vision for health IT-optimized health care, along with three goals. These guide OHA’s health IT work.

### Vision:

A transformed health system where health IT efforts ensure that the care Oregonians received is optimized by health IT.

### Goal 1: Share Patient Information Across the Care Team

Oregonians have their core health information available where needed, so their care team can deliver person-centered, coordinated care.

### Goal 2: Use Data for System Improvement

Clinical and administrative data are efficiently collected and used to support quality improvement and population health management, incentivize improved health outcomes. Aggregated data and metrics are also used by policymakers and others to monitor performance and inform policy development.

### Goal 3: Patients Can Access Their Own Information and Engage in Their Care

Individuals and their families access, use and contribute their clinical information to understand and improve their health and collaborate with their providers.

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The waiver allows OHA to expand who is covered by OHP, pay for health care differently, and implement other reforms. The overall goal for the next waiver is to advance health equity in our state. Under that umbrella, there are four actionable sub-goal areas:

- Maximizing OHP coverage
- Stabilizing transitions to minimize disruptions in care
- Encouraging smart, flexible spending for health equity
- Targeted health equity investments

Starting in June, OHA released a series of draft concept papers of high-level policy areas under consideration for inclusion in the waiver. The policy areas flow from feedback OHA received from interested partners and the public. Creating a more equitable healthcare system in Oregon's Medicaid program is the unifying theme of the policy concept papers. To find the draft policy concept papers and policy concept summaries, please follow this [link](#).

There are multiple opportunities to take part in the process!

- Email comments or questions at any time to [1115WaiverRenewal@dhsosha.state.or.us](mailto:1115WaiverRenewal@dhsosha.state.or.us)
- Attend any meeting to provide feedback. For a complete list of public meeting dates, prior meeting materials, and additional resources and information, please visit [Oregon's Medicaid 1115 Demonstration Waiver webpage](#).

**HB4212 REALD Provider Reporting**, Contact: [Karen.Hale@dhsosha.state.or.us](mailto:Karen.Hale@dhsosha.state.or.us) or [OHAREALD.Questions@dhsosha.state.or.us](mailto:OHAREALD.Questions@dhsosha.state.or.us)

Oregon's House Bill 4212 (2020) requires health care providers to collect race, ethnicity, language, and disability (REALD) data for all COVID-19 encounters. After collection, providers must report this data to OHA with COVID-19 disease reporting. For more information, see the [REALD for Providers webpage](#).

In 2021, OHA convened lessons learned meetings for Phase 1 provider organizations to support REALD implementation. OHA also published the first [COVID-19 REALD report](#).

[House Bill 3159](#) was signed this legislative session, which will require OHA to adopt standards and establish a timeline for health care providers and health insurers to collect REALD and sexual orientation and gender identity (SOGI) data from patients, clients, or members.

**Landscape and Environmental Scan**, Contact: [Marta.M.Makarushka@dhsosha.state.or.us](mailto:Marta.M.Makarushka@dhsosha.state.or.us)

OHA's OHIT engages in ongoing environmental scan activities to inform health IT efforts and ensure strategies and programs address evolving needs. OHIT continues compiling data across the agency and other sources to serve various purposes, such as informing HITOC's progress monitoring, program oversight, and reporting priorities. Past work includes:

- A [2019 Health IT Report](#) to HITOC which summarizes what is known about Oregon's electronic health record (EHR) and health information exchange (HIE) landscape, including key health IT concepts and HITOC considerations. This report supports HITOC's data-related responsibilities and helps inform HITOC's strategic planning.
- A Behavioral Health HIT/HIE Scan Report based on survey and interview data. See [Behavioral Health HIT Workgroup](#) for more information.

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In 2021, OHIT's efforts will focus on CCO HIT Roadmaps and Data reporting:

- CCO 2.0 HIT Data Reporting: OHIT is supporting CCOs' 2021 Health IT Data Collection and Reporting efforts. This includes developing a survey (in partnership with CCOs) that CCOs can distribute to their contracted provider organizations to collect EHR and HIE information that will be used to inform HITOC's strategic plan update work.
- CCO Updated HIT Roadmaps: CCOs' annual Updated Health IT Roadmaps were due to OHA by end of March 2021. These documents include progress and strategies to support EHR adoption, HIE, and HIT needed for value-based payments. OHA has completed an initial review of the Updated HIT Roadmaps and has approved some, while requesting additional information from CCOs on others. OHA anticipates all CCOs will have an approved Updated HIT Roadmap by October 29, 2021. Staff will prepare a summary of CCO efforts, which will also be used to inform HITOC.

**HITOC Strategic Plan and Annual Priorities**, Contact: [Ashley.Ashworth@dhsoha.state.or.us](mailto:Ashley.Ashworth@dhsoha.state.or.us)

*Strategic Plan Update: At the beginning of 2020, HITOC began efforts to update the Oregon HIT Strategic Plan. In February and March of 2020, OHA conducted a series of public listening sessions and collected helpful input to inform the strategic plan. Given the pandemic's impact on the healthcare system, remaining listening sessions were canceled and Strategic Plan Update efforts were placed on hold.*

HITOC resumed Strategic Plan Update work, kicking-off at the August 5<sup>th</sup> HITOC meeting. In that meeting, HITOC discussed the proposed process for updating the Strategic Plan as well as primary topic areas. Areas HITOC will explore under the Strategic Plan Update include community information exchange (CIE), statewide HIE, patient access to data, EHRs, public health, and more. At the October HITOC meeting, HITOC will begin developing a vision statement for the Strategic Plan and review a charter for a CIE workgroup.

Annual priorities: HITOC reported on 2020 progress and 2021 annual priorities at the February Oregon Health Policy Board (OHPB) retreat. Priorities include the Strategic Plan Update, health IT needed to support COVID response and recovery, and further work related to health IT and social determinants of health and health equity.

OHPB liaison: HITOC's OHPB liaison is transitioning from Kirsten Isaacson to John Santa. HITOC thanks Kirsten for being a supportive and engaged liaison and looks forward to welcoming John.

Membership: On July 6, 2021 OHPB approved the appointment of 5 new members and renewal of 5 members to HITOC. Their terms began August 5. Welcome to Dr. Manu Chaudhry, Dr. David Dorr, Carly Hood-Ronick, Abdisalan Muse, and Diane Tschauner! [HITOC roster >](#)

Seats remain open to fill additional gaps in representation. [Applications](#) are open on a rolling basis until filled. For more information, please see the [recruitment webpage](#).

## Oregon Health IT Program: Partnerships

**HIT Commons**, Contact: [Luke.A.Glowasky@dhsoha.state.or.us](mailto:Luke.A.Glowasky@dhsoha.state.or.us)

*The HIT Commons is a public/private collaboration to coordinate investments in health IT, leverage funding opportunities, and advance HIE across the state. HIT Commons is co-sponsored by the Oregon Health Leadership Council (OHLIC) and OHA, and is jointly funded by OHA, hospitals, health plans and CCOs. For more information see the [HIT Commons website](#).*

**EDIE and the Collective Platform (formerly known as PreManage)**

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The [Emergency Department Information Exchange \(EDIE\)](#) allows Emergency Departments (EDs) in real-time to identify patients with complex care needs who frequently use the emergency room for their care. [The Collective Platform](#) (fka PreManage) is a companion software tool to EDIE. The Collective Platform brings the same real-time hospital event notifications (ED and Inpatient Admit, Discharge, and Transfer [ADT] data) to those outside of the hospital system, such as health plans, CCOs, providers, and care coordinators. OHA supports a Collective Platform subscription that includes use by CCOs, Oregon Department of Human Services programs, Tribal clinics, and other Medicaid care coordinators.

- HIT Commons will host two upcoming educational webinars and a learning collaborative related to EDIE/Collective Platform and the broader care coordination network in Oregon. **October 18<sup>th</sup>, 11:00am-12:30pm**: HIT Commons Website Resources and Collective Community webinar. **November 15<sup>th</sup>, 11:00am-12:30pm**: Engaging and Onboarding Post-Acute Care Facilities webinar. **December 3<sup>rd</sup>, 9:00am-12:00pm**: Behavioral Health – State Strategies and Stakeholder Efforts learning collaborative. You can register for each event [here](#).
- The HIT Commons [EDIE Steering Committee](#) met on August 27, 2021. Topics of discussion included product and support updates from Collective Medical, EDIE/Collective Platform use cases under development, potential changes to the report that ED users see in EDIE notifications, and the possibility of HIT Commons convening an ED physician advisory committee in 2022. Materials from that meeting are available [here](#). The Committee's next meeting is October 22, 2021.

### **Payer Interoperability Collaborative**

As noted above, OHA has partnered with [HIT Commons](#) to hold a Payer Interoperability Collaborative (PIC) to support CMS-regulated payer implementation of the Federal Interoperability and Patient Access Final Rules. This is a forum for CCOs, DCOs, and Medicare Advantage plans to share knowledge and challenges, and an opportunity to align around the CMS data sharing requirements.

The meetings are typically held 1:30-3pm on the second Tuesday of the month; the next meeting is anticipated to be held **November 9<sup>th</sup> at 1:30pm**. If interested in participating, please send an email to [Courtney@orhealthleadershipcouncil.org](mailto:Courtney@orhealthleadershipcouncil.org) requesting an invitation.

### **Public Health Data Sharing Workgroup**

HIT Commons, in partnership with OHA, has convened a Public Health Data Sharing Workgroup to discuss and assess efforts to integrate public health data into HIT or HIE systems, and make policy and operational recommendations to HIT Commons and OHA. Workgroup membership includes representation from OHA's Public Health Division, payers/CCOs, health systems, and providers.

- The Workgroup had its second meeting on August 12<sup>th</sup> where draft data dashboards showing utilization of COVID-19 data in the Collective Platform were reviewed. The dashboards will be finalized at the next meeting in October and the Workgroup will shift to supporting a qualitative analysis of COVID-19 data integration with the Collective Platform. The group will continue to meet monthly at least through the end of 2021.

### **Oregon's Prescription Drug Monitoring Program (PDMP) Integration Initiative**

Oregon's PDMP Integration initiative connects EDIE, Reliance eHealth Collaborative health information exchange (HIE), EHRs, and pharmacy management systems to [Oregon's PDMP](#). HIT Commons is overseeing the [PDMP Integration initiative](#) with guidance from the Oregon PDMP Integration Steering Committee and in coordination with OHA's Public Health PDMP program. For more information see the [HIT Commons website](#).

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- 24 new organizations went live with PDMP integration in Q2 2021.
  - House Bill 2074 was passed by the 2021 Oregon Legislative Assembly. This bill increases annual PDMP fees from \$25 to \$35 and is critical to maintaining continued PDMP operations and support of the PDMP Integration initiative.
  - The PDMP Integration Steering Committee met on July 8, 2021. Topics of discussion included updates to the group's charter, PDMP Integration metrics, Q1 2021 progress on integrations, updates from Public Health PDMP staff, and new reporting functionality available to prescribers and clinical leaders. The Committee's next meeting is October 14, 2021.

## Oregon Health IT Program: Programs and Initiatives

### **COVID-19 Data Sharing**, Contact: [Luke.A.Glowasky@dhsoha.state.or.us](mailto:Luke.A.Glowasky@dhsoha.state.or.us)

OHA is collaborating with partners on several initiatives to share COVID-19 data in support of response and recovery efforts.

- OHA is sharing statewide COVID-19 positive case data to users of EDIE and the Collective platform, and to clinical and health plan/CCO users of Reliance eHealth Collaborative's [Community Health Record](#).
- COVID-19 vaccine data reports are now shared weekly with CCOs for their members. Additionally, COVID-19 vaccine data are flowing into EDIE/the Collective Platform and to the Reliance HIE. Collective platform COVID Vaccine Population Reports allow for quickly identifying members who have received no vaccine, as well as identifying the manufacturer and dose of vaccines that have been administered. Pfizer and Modern third doses are now included in both data feeds.
- Oregon efforts to integrate Public Health COVID-19 data into HIT and HIE will be discussed and assessed at monthly meetings of the Public Health Data Sharing Workgroup, convened by HIT Commons in partnership with OHA.

### **Community Information Exchange (CIE)**, Contact: [Hope.Peskin-Shepherd@dhsoha.state.or.us](mailto:Hope.Peskin-Shepherd@dhsoha.state.or.us)

Community information exchange (CIE) is a network of healthcare and human/social service partners using a technology platform with functions such as a shared resource directory, "closed loop" referrals, reporting, social needs screening, and other features to electronically connect people to social services and supports. CIEs are developing rapidly across the state with two main CIE vendors: [Aunt Bertha](#) and [Connect Oregon](#) (Unite Us). To learn more, see the [OHA CIE webpage](#).

On April 29, 2021 OHA held an informational webinar to explore what CIE is, how it may be valuable, and to hear about successes and challenges faced. Representatives from AllCare CCO, Project Access Now, Cascade Health Alliance, and Sky Lakes Medical Center shared their experiences using CIE. Materials and the recording can be found on the [CIE webpage](#).

OHA plans to engage external partners in 1) a HITOC chartered CIE workgroup (see HITOC section above, and 2) CIE focus groups/interviews with individuals, community-based organizations (especially those who serve specific culturally- and linguistically-specific populations), and other interested parties to hear the challenges and barriers they face, and identify opportunities to help in their adoption and participation in CIE.

### **Medicaid EHR Incentive Program**, Contact: [Jessica.L.Wilson@dhsoha.state.or.us](mailto:Jessica.L.Wilson@dhsoha.state.or.us)

[The Medicaid EHR Incentive Program](#) (also known as the Promoting Interoperability Program) offers qualifying Oregon Medicaid providers federally funded financial incentives for the adoption or meaningful use of certified

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*electronic health records technology. Eligible professional types include physicians, naturopathic physicians, pediatric optometrists, nurse practitioners, certified nurse-midwives, dentists, and physician assistants in certain settings.*

As of September 2021, more than \$212 million in federal incentive payments have been dispersed to 60 Oregon hospitals and 3,864 Oregon providers. Between August and September 2021, 100 providers received \$850,000 in incentive payments. The program sunsets December 31, 2021.

**HIE Onboarding Program**, Contact: [Jessica.L.Wilson@dhsosha.state.or.us](mailto:Jessica.L.Wilson@dhsosha.state.or.us)

*Oregon's [HIE Onboarding Program](#) leverages significant federal funding to increase Medicaid providers' capability to exchange health information by supporting the initial costs of connecting (onboarding) priority Medicaid providers to community-based HIEs. Priority Medicaid providers include behavioral health, oral health, critical physical health, and others. Reliance eHealth Collaborative was selected through an RFP process.*

The HIE Onboarding Program launched in January 2019 and ends September 30, 2021, when federal funding sunsets. Additional funding approved by the Oregon legislature allows the Program to continue into the fall, rather than end in June as anticipated.

OHA has approved Reliance to onboard providers contracted with nine CCOs, covering 14 Oregon counties. See [Reliance webpage](#) for more information. As of September 2021, there are 13 behavioral health practices, 4 oral health clinics, 57 critical physical health entities, and 4 major trading partners (hospital/health system) participating in the Program.

## Stay Connected

You can find information about HITOC at our [website](#). Meetings are open to the public and public comments are accepted at the end of each meeting or in writing to the HITOC Chair and Vice-Chair in care of OHA ([hitoc.info@dhsosha.state.or.us](mailto:hitoc.info@dhsosha.state.or.us)).

## Program Contact

Health Information Technology Oversight Council: [hitoc.info@dhsosha.state.or.us](mailto:hitoc.info@dhsosha.state.or.us)

### Get involved with Oregon Health IT

Office of Health Information Technology: [HealthIT.Oregon.gov](https://HealthIT.Oregon.gov) | Join the listserv: [bit.ly/2VYgoDB](https://bit.ly/2VYgoDB)