Annual Report to the Legislature

Office of Health Information Technology 2019 Annual Report















Contents

>>	Ex	cutive summary	4
	>>	Health IT and health system transformation: vision and goals	. 5
	>>	What is health information exchange?	. 5
>>	Se	tion 1: Health IT policy work	. 7
	>>	Staff Oregon's Health IT Oversight Council	. 7
	>>	Convene and educate	. 7
	>>	Assess and report on Oregon's health IT progress	. 8
	>>	Develop and advise on health IT policy	. 8
>>	Se	tion 2: Oregon Health IT Program	. 9
	>>	Oregon Health IT Program: Partnerships	. 9
		» HIT Commons	. 9
		Emergency Department Information Exchange (EDie)/ PreManage integration	. 9
		>> Prescription Drug Monitoring Program Integration initiative	10
		Oregon Provider Directory adoption and spread	11
		Oregon Community Information Exchange activities	11

» Oregon Health IT Program: Programs				12	
		>>	Medicaid PreManage subscription	12	
		>>	Clinical Quality Metrics Registry	12	
		>>	Oregon Provider Directory	12	
		>>	Health Information Exchange Onboarding Program	13	
		>>	Medicaid Electronic Health Records (EHR) Incentive Program and OMMUTAP	13	
		>>	Flat File Directory for Direct secure messaging	14	
>>	Ad	ldit	ional highlights	15	
	>>	Ве	ehavioral Health Scan Report	Health Scan Report	
	>>	Ke	ey results	15	
		>>	HITOC Behavioral Health HIT Workgroup recommendations	15	
>>	Co	ncl	lusion	17	

Executive summary

The Oregon Health Authority (OHA) is transforming Oregon's health care system by improving the lifelong health of Oregonians; increasing the quality, reliability and availability of their care; and lowering or containing the cost of care, so it's affordable for everyone.

Health information technology (IT) is key to health system transformation. The core of Oregon's transformation efforts is the coordinated care model, which relies on health IT to succeed. To give a few examples, health IT:

- Helps providers securely gather, store and share patients' clinical data so they can work together to provide care
- Helps track and report on quality measures, which support efforts to hold the health care system accountable for delivering high quality care, and
- Helps CCOs, health insurance companies and providers analyze data to identify disparities and patients who need more care to allow targeted efforts to improve health.

Coordinating health IT efforts at the state level can help make sense of the many moving parts, such as changing technology and standards, evolving health IT needs that often conflict, "digital divides" that disadvantage critical providers, opportunities to leverage federal funding or to centralize or coordinate health IT efforts, the need for help navigating complex federal and state privacy laws, and more.

To ensure a coordinated health IT approach across the state, Oregon's Legislature created the Health IT Oversight Council (HITOC), and OHA created the Office of Health IT. OHA's Office of Health IT staffs HITOC, conducts other health IT policy work and operates the Oregon Health IT Program. The Oregon Health IT Program brings millions of federal dollars to Oregon for health IT programs and partnerships that support health system transformation.

Health IT and health system transformation: vision and goals

Oregon's Health Information Technology Oversight Council's (HITOC) charter sets 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 the care Oregonians receive 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 personcentered, 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, and to incentivize improved health outcomes. Policymakers and others also use aggregated data and metrics 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.

— From Oregon's Strategic Plan for Health IT/HIE (2017–2020), available at <u>healthit.oregon.gov</u>

What is health information exchange?

Health information exchange means sharing health information electronically. Some examples include tools that:

- Send electronic messages about a patient's care from one provider to another, such as Direct secure messaging.
- Help emergency departments (EDs) and primary care providers coordinate care by sending notifications when a patient comes to the ED. One example is the Emergency Department Information Exchange (EDie) and PreManage.
- Store information so all of a patient's providers can see their relevant health information, such as a regional health information exchange.
- Help providers find their patients' information in other clinics' records so patients don't have to wait for records to be faxed.

Health care providers, private health insurance companies, Medicaid coordinated care organizations, health systems, hospitals, clinics and others use health information exchange to manage their businesses and take care of patients.

Patients, families and caregivers benefit from health information exchange because all of a patient's providers can see their health information. As a result, there are fewer delays, better coordination and fewer repeated tests.

Health information is private and protected by law. Protecting patient privacy and ensuring security is foundational to health information exchange efforts.

Section 1: Health IT policy work

Staff Oregon's Health IT Oversight Council

OHA's Office of Health IT staffs Oregon's Health IT Oversight Council (HITOC) (https://go.usa.gov/xV7uj). HITOC, mandated by the Oregon Legislature [HB 2009 (2009) and updated in HB 2294 (2015)], is a committee of the Oregon Health Policy Board (OHPB). It advises OHA, OHPB, the Oregon Legislature and Oregon's U.S. senators and representatives on health IT issues related to health system transformation. The council is responsible for:

- Exploring health IT policy
- Planning Oregon's health IT strategy
- Overseeing OHA's health IT efforts
- Assessing Oregon's health IT landscape
- · Reporting on Oregon's health IT progress, and
- Monitoring federal health IT law and policy.

In partnership with HITOC's chair and vice-chair, the Office of Health IT plans HITOC's meetings, develops meeting content, analyzes data and drafts reports, recruits guest speakers, manages the member nomination process, and handles administrative work associated with HITOC.

Convene and educate

OHA's Office of Health IT brings together stakeholders and partners from across the state. Staff provide information about health IT issues and give opportunities for people to learn from each other, share best practices, and inform OHA about health IT needs. The Office of Health IT strives to ensure everyone has a voice in OHA's health IT work and brings people together to address shared challenges.

Assess and report on Oregon's health IT progress

OHA's Office of Health IT gathers information about Oregon's health IT progress, including public and private efforts, to inform OHA's, HITOC's, OHPB's and the Oregon Legislature's health IT policy work. HITOC advises OHA on its assessment and reporting efforts.

Develop and advise on health IT policy

OHA's Office of Health IT plays a role in health IT policy by supporting health IT programs, OHA and other state agencies. For example, we developed the health IT policies reflected in the CCO 2.0 contracts. We also conduct rulemaking when needed, such as rules for the Medicaid Electronic Health Record Incentive Program. Finally, we provide advice on health IT policy, including analysis of policies, laws and administrative rules that relate to health IT; we also monitor state and federal health IT laws, policies and efforts.

Section 2: Oregon Health IT Program

The Oregon Legislature established the Oregon Health IT Program to advance health IT efforts across Oregon (HB 2294, 2015). The Office of Health IT operates the program, which brings federal funding to Oregon to support health IT efforts. The program supports both Medicaid and the private sector. It currently includes both programs and partnerships that promote health IT in Oregon.

Oregon Health IT Program: Partnerships

HIT Commons

HIT Commons is a public/private partnership designed to accelerate and advance health information technology adoption and use across the state, leverage public and private investments, and expand access to high value data sources (see "Emergency Department Information Exchange (EDie) PreManage integration" and "Prescription Drug Monitoring Program Integration Initiative" sections below). HIT Commons is co-sponsored by the Oregon Health Leadership Council (OHLC) and OHA. HIT Commons is jointly funded by OHA, hospitals and health plans.

Emergency Department Information Exchange (EDie)/ PreManage integration

In 2015, OHA partnered with OHLC to launch the Emergency Department Information Exchange (EDie) in Oregon. EDie provides real-time notifications that allow emergency department (ED) physicians to identify patients with complex care needs who frequently use the emergency room. EDie brings critical information to the ED team's attention. This information relates to past hospital and ED visits and care recommendations from the patients' own health care teams; the goal is to reduce avoidable hospital utilization and improve health outcomes. **All Oregon hospitals with EDs use EDie.**

PreManage complements EDie, pushing hospital event data to health care organizations outside the hospital. Notifications inform providers, health plans, coordinated care organizations (CCOs) and health systems when their patients or members are seen in an emergency department or hospital. These notifications allow practitioners to intervene in real time, if needed, with individuals who are high utilizers of emergency department services. The result is improved communication and information sharing between hospitals, providers, CCOs and health plans to provide higher quality care to patients. HIT Commons supports adoption and spread activities for PreManage.

Current PreManage users include:

- All of Oregon's CCOs and most major Oregon health insurance companies
- Many behavioral health organizations
- The Oregon State Hospital (in phased rollout)
- All Oregon dental care organizations
- Four Tribal clinics
- All type B Area Agency on Aging and Aging and People with Disability district offices
- Department of Human Services' Office of Developmental Disabilities Services offices
- Nearly half of Oregon's skilled nursing facilities

Prescription Drug Monitoring Program Integration initiative

Accurate and timely Prescription Drug Monitoring Program (PDMP) information at the point of care reduces inappropriate prescriptions, improves patient outcomes and promotes informed prescribing practices. The PDMP Integration initiative connects EDie, health information exchanges (HIEs), electronic medical/health records and pharmacy management systems to Oregon's PDMP Registry. PDMP data can now go directly into prescriber and pharmacist health IT for "one-click" access to controlled substance prescription data, eliminating the need to access a separate web portal. HIT Commons launched a statewide subscription for

Accessing PDMP data used to take a tremendous amount of my time! I found it frustrating, and I didn't go into the site that often. And, to add insult to injury, it seemed like every time I tried to access the site, my password expired, so more clicks and more time was required to log on to my email, request a new password, and then log back in to the site. Today it takes one click and 1/3 of a second! It was worth the wait."

- Seldon Saks, MD, Injury Specialists of Oregon

PDMP data integration into health IT in spring 2018. Oregon's PDMP Registry is administered by OHA Public Health.

More than 10,600 prescribers across 142 organizations have integrated access to Oregon's PDMP data, either through their EDie alerts or through one-click access at the point of care. Seven pharmacy chains (across 367 sites) are also live.

Oregon Provider Directory adoption and spread

OHA is working with HIT Commons to help adopt and spread the Oregon Provider Directory (OPD) (see full program description on page 12). During the initial implementation, known as a soft launch, select organizations in Central Oregon will use the OPD to support their own organization's provider directory data use cases (e.g., finding providers for care coordination, exchanging health information and supporting data quality management activities). By the end of the soft launch, participants will be able to show where and how the OPD brings value and, ultimately, signal readiness for broader statewide use.

Current soft launch participants include a health plan, hospital system, federally qualified health center (FQHC), dental care organization and independent practice association. Additional participants in the Central Oregon area are also being engaged. The soft launch began in September 2019.

Oregon Community Information Exchange activities

HIT Commons is beginning new work in the evolving landscape of social determinants of health (SDOH). Earlier this year, the HIT Commons Governance Board directed HIT Commons staff to begin exploring and developing an Oregon Community Information Exchange (Oregon CIE). In general, CIEs include a data repository of shared community resources that connects health care, human services and social services partners to improve communities' health and well-being. A technology platform supporting a CIE could provide many functions, including statewide social services directory, shared risk assessment capabilities, real-time closed loop referral management, collaborative care plans, and standardized outcomes and data analysis.

HIT Commons staff conducted an environmental scan this spring to determine what efforts are underway in Oregon and how other states are approaching health care and SDOH integration. In summer 2019, HIT Commons selected two distinct efforts to move forward:

- HIT Commons working with stakeholders to assess opportunities and development of a roadmap for alignment of statewide CIE efforts, and
- Oregon Health Leadership Council (OHLC) working in partnership with Kaiser/Thrive Local to engage Portland and other early adopters to develop a phase 1 CIE effort.

For more information, see: http://www.orhealthleadershipcouncil.org/currently-in-development/.

Oregon Health IT Program: Programs

Medicaid PreManage subscription

Since 2016, OHA has sponsored a Medicaid subscription to PreManage for CCOs, state programs and other Medicaid-serving organizations. CCOs have the opportunity to extend the subscription, at their own cost, to their contracted clinics (physical, behavioral and oral health). Currently, all Oregon CCOs participate in the Medicaid PreManage subscription and 14 of 15 CCOs have extended the subscription to their key clinics.

Clinical Quality Metrics Registry

The <u>Clinical Quality Metrics Registry (CQMR)</u> collects electronic clinical quality measures to improve data collection and efficiency for provider reporting. With the increasing adoption of EHRs, Oregon has new opportunities to measure and improve the quality of care. Using EHR data improves the ability to measure outcomes — for example, measuring whether a diabetic patient's blood sugar levels were controlled rather than simply whether they were tested. The CQMR will enable more efficient collection and use of this important quality data.

The program is funded through 90 percent federal match and initially supports Medicaid-related reporting. Over time, the CQMR may support additional programs to enable a "report once" strategy, where providers could send data to the CQMR to meet requirements for multiple reporting programs and thus reduce administrative burdens. The CQMR launched in early 2019 to collect these measures for Oregon's Medicaid EHR Incentive Program and support reporting to CMS for the Comprehensive Primary Care Plus (CPC+) and Merit-Based Incentive Payment System (MIPS) programs. OHA is onboarding CCOs to the CQMR to prepare for 2019 CCO incentive measures reporting.

Oregon Provider Directory

The Oregon Provider Directory (OPD) will serve as Oregon's directory of accurate, trusted provider data for health organizations such as clinics, hospitals, coordinated care organizations, health plans and state agencies to use. The data will include provider names, practice locations and contact information, which includes health information exchange addresses. By making this data available, the OPD will support care coordination, health information exchange and administrative efficiencies. The OPD will also serve as a resource for heath analytics — ultimately improving patient care. Data stewards will oversee management of the data to ensure that it maintains initial and long-term quality information. The program is funded through 90 percent federal match and will initially support Medicaid-related organizations. A soft launch of the OPD began in September 2019. HIT Commons is supporting OPD adoption and spread activities.

Health Information Exchange Onboarding Program

The Health Information Exchange (HIE) Onboarding Program supports care coordination by advancing information exchange across Oregon's Medicaid provider network. Community-based health information exchanges (HIEs) can help hospitals, primary care, specialty, behavioral health and dental providers share information about patients they treat in common, to support care coordination. Costs to connect and onboard providers can be prohibitive; this new federal funding will help remove barriers. CCOs will choose whether their geographic regions should participate in the program. They will collaborate with OHA, the community-based HIE and providers on onboarding decisions. OHA has contracted with Reliance eHealth Collaborative for this program. Participation is voluntary. Each provider will make the business decision about whether onboarding is right for their organization.

The program leverages 90 percent federal funding to support the initial costs of connecting (onboarding) priority Medicaid providers to a community-based HIE. Priority Medicaid providers include behavioral health providers, oral health providers, critical physical health providers and others.

The program launched and began implementation in early 2019. As of December 2019, six CCOs are participating, and more information about participating entity numbers will be available in 2020.

Medicaid Electronic Health Records (EHR) Incentive Program and OMMUTAP

The Medicaid EHR Incentive Program provides incentive payments to eligible health care professionals and hospitals to support EHR adoption and use. Incentives are available for adopting and demonstrating the "meaningful use" of certified EHR technology. Program Year 2016 was the last year to start the multi-year incentive program, which runs through 2021. **More than 8,400 Oregon clinicians and all**

61 Oregon hospitals have received incentives through the Medicaid or Medicare EHR incentive programs, totaling approximately \$532 million.

Oregon's Medicaid Meaningful Use Technical Assistance Program (OMMUTAP) helped Oregon's eligible Medicaid providers adopt and use certified EHR technology and meet requirements for federal EHR incentive programs. The program ended May 2019. **OHA launched** The program is important to us, both to recognize the great work of all our providers and staff, and for the financial reimbursements we receive that help support our services."

- Housecall Providers

OMMUTAP in 2016 through a contract with OCHIN and enrolled 1,589 clinicians at 374 Oregon clinics.

Flat File Directory for Direct secure messaging

Direct secure messaging is a HIPAA-compliant, secure method for exchanging any protected health information. Providers and hospitals commonly use it to send transition of care summaries. The Flat File Directory is Oregon's combined address book for Direct secure messaging addresses, allowing participants to find or "discover" Direct addresses outside their own organizations. It contains more than 17,600 addresses across 24 entities that represent more than 895 unique health care organizations.

Additional highlights

Behavioral Health Scan Report

In late 2019, the Office of Health IT released its Behavioral Health Scan Report and recommendations from the HITOC Behavioral Health HIT Workgroup. The goal of the scan was to better understand the needs and challenges that behavioral health providers face when it comes to the adoption and use of health IT and health information exchange. The scan included an online survey and a series of in-depth interviews.

Key results

- Most behavioral health agencies are investing in health IT. However, the systems often do not adequately support the full spectrum of behavioral health's health IT/HIE needs.
- Most behavioral health agencies need to exchange information with other entities; however, few are doing so using modern electronic methods.
- In addition to resource barriers, privacy and security concerns are a top barrier to electronic information exchange.
- Data analytic tools and capabilities are necessary for improved patient care, reporting and practice management.

HITOC Behavioral Health HIT Workgroup recommendations

- 1. Support BH agencies without an electronic health record (EHR) or with an insufficient EHR to adopt an EHR, including:
 - » Develop a list of preferred EHR vendors to help support the EHR adoption/ upgrade decision making process.*
 - » Promote hospital/health systems' support for behavioral health EHR adoption/upgrade.

Note: Workgroup strongly supports financial support and incentives for BH agencies as well; federal and state incentives are proposed but not initiated.

^{*} These recommendations were identified as foundational to other efforts to support HIT/HIE among BH.

- 2. Continue existing work on health information exchange (HIE) and bolster with additional strategies, including:
 - » Encourage larger organizations, hospitals and health systems to connect and contribute patient data to an HIE (e.g., community health record).
 - » Connect health IT systems to lower the effort required to access patient information across organizations (e.g., fewer clicks)[†]
 - » Provide information sharing guidance and support related to privacy and security (e.g., 42 CFR Pt 2, HIPAA).* †

Note: Workgroup strongly supports current work to provide access to HIE for BH providers, including PreManage and HIE Onboarding Program.

- 3. Support improved understanding of health IT/HIE, including:
 - » Provide health IT/HIE education.*
 - » Create shared learning opportunities across a variety of topic areas (e.g., EHR adoption and use, HIE connectivity and use, data analytics/business intelligence, privacy and security).
 - » Assess landscape of EHRs/HIE.* †
- 4. Modernize state reporting systems to allow for improved interoperability with EHRs/HIE and data reporting back to agencies.[†]

^{*} These recommendations were identified as foundational to other efforts to support HIT/HIE among BH.

[†] OHA work is underway in these areas.

Conclusion

Health IT tools and infrastructure are integral to Oregon's health system transformation efforts. The Oregon Health Authority's Office of Health IT will continue to focus its work to ensure providers, patients and their families, and systems can access the information they need to securely and efficiently help in the treatment and care management of all Oregonians.



You can get this document in other languages, large print, braille or a format you prefer. Contact the Office of Health IT at 503-373-7859 or email the Office of Health IT at OHIT.info@dhsoha.state.or.us. We accept all relay calls, or you can dial 711.