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| Office of Health Information Technology |  |
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**Health Information Technology Oversight Council**

**Call for Nominations**

Purpose:

The Oregon Health Authority is seeking nominations for the Health Information Technology Oversight Council (HITOC), the policy, strategy and oversight body for health IT in Oregon. HITOC, which was created by legislation (HB 2009) in 2009, is being reformed and will begin meeting under its new mandate in September 2015 and will report to the Oregon Health Policy Board.

We are looking for motivated leaders to help us tackle important issues. The field of health IT is constantly evolving, which is challenging for our Oregon health care entities that must make real-world business decisions and investments. Patients are also gaining increased access to their own health information and it is increasingly important to ensure they can easily navigate these systems to better engage in their own care. The work of HITOC will allow for a forum to define strategies, remove policy barriers, provide transparency and accountability, and measure progress toward achieving “health IT-optimized health care.”

The three goals of health IT-optimized health care:

* Providers have access to meaningful, timely, relevant, actionable patient information to coordinate and delivery “whole person” care;
* Systems (health systems, CCOs, health plans) effectively and efficiently collect and use aggregated clinical data for quality improvement, population management and incentivizing health and prevention. In turn, policymakers use aggregated data and metrics to provide transparency into the health and quality of care in the state, and to inform policy development;
* Individuals and their families access their clinical information and use it as a tool to improve their health and engage with their providers.

Background:

HITOC was established in 2009 as part of House Bill 2009 that established OHA and the Oregon Health Policy Board. At that time it was a body of 11 Governor-appointed, Senate confirmed citizens tasked with a broad range of duties and rule-making authority on health IT for the state. Shortly after the passage of House Bill 2009, the American Recovery and Reinvestment Act (ARRA) was passed at the federal level, which included substantial new provisions for health IT in the Health Information Technology for Economic and Clinical Health (HITECH) Act, such as the newly established Electronic Health Record Incentive Programs (also commonly known as “meaningful use”).

In June 2015, House Bill 2294 passed, which amended House Bill 2009 by bringing HITOC under the Health Policy Board. Under this new framework, the Health Policy Board will determine the membership of HITOC and will receive regular reports from HITOC on the HIT/HIE efforts occurring across the state. The new duties of HITOC are to:

1. Identify and make specific recommendations related to health information technology to the Oregon Health Policy Board to achieve the goals of the health system transformation.
2. Regularly review and report to the board on the Oregon Health Authority’s health information technology efforts, including the Oregon Health Information Technology program, toward achieving the goals of health system transformation.
3. Regularly review and report to the board on the efforts of local, regional and statewide organizations to participate in health information technology systems.
4. Regularly review and report to the board on this state’s progress in the adoption and use of health information technology by health care providers, health systems, patients and other users.
5. Advise the board or the Oregon Congressional Delegation on changes to federal laws affecting health information technology that will promote this state’s efforts in utilizing health information technology.

Members:

As mandated by HB 2294, the Oregon Health Policy Board is responsible for ensuring that HITOC has broad representation of individuals and organizations that will be impacted by the Oregon Health Information Technology Program. This includes diverse representation among health care stakeholders (e.g. providers, hospitals, health plans and coordinated care organizations (CCOs), and consumer advocates); diverse users of health IT systems (e.g. Epic and non-Epic users); and diverse geographical representation. *Please note: Technology vendors are not eligible to apply.*

We are looking for members who can provide health IT expertise in areas such as:

* Health care delivery
* Quality improvement;
* Analytics;
* Health informatics;
* Security and privacy;
* Behavioral or mental health;
* Dental health;
* Health information exchange;
* Consumer/patient advocacy

OHA anticipates that HITOC will periodically call both short-term and recurring work groups and subcommittees on particular topics. OHA may use this Call for Nominations to identify possible members for these groups. These groups will be tasked with developing work products to be approved by HITOC and also the Oregon Health Policy Board. We are looking for enthusiastic, informed participants for these groups.

**Interested in HITOC or its work groups?  Please complete a nomination application (see below) by July 8, 2015. Applications can be submitted to Justin Keller:** **justin.keller@state.or.us****.**

**If you are not able to participate in HITOC, but would like to stay informed about OHA’s health IT work, please click the link to our website:** [**http://oregon.us2.list-manage.com/subscribe?u=24ce6599e0616dc2d3e3ba25d&id=d749a107e0**](http://oregon.us2.list-manage.com/subscribe?u=24ce6599e0616dc2d3e3ba25d&id=d749a107e0)

**Or provide the following information to Kim Mounts:** **kimberly.mounts@state.or.us**

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| Name: |  |
| Title: |  |
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Logistics:

* **Commitment** – terms are anticipated to be staggered initially, ranging from 1-3 years. HITOC has no anticipated end date.
* **Meetings** – Meetings are anticipated to last between 3-4 hours and HITOC will meet at least quarterly. The location of meetings will alternate between Salem and Portland. All meetings of HITOC and its committees will be public meetings and will be broadcast through webinar/conference line.

Resources:

* [Health IT Business Plan Framework](https://healthit.oregon.gov/Initiatives/Documents/HIT_Final_BusinessPlanFramework_2014-05-30.pdf) – In fall 2013, OHA convened a health IT Task Force to synthesize stakeholder input and develop an HIT/HIE strategic plan that charts a path for statewide efforts over the next several years.

Staff Contact:

* Susan Otter, Director for Health Information Technology, Office of Health Information Technology, OHA, susan.otter@state.or.us
* Justin Keller, Policy Analyst, Office of Health Information Technology, OHA, justin.keller@state.or.us

**Nomination Application**

**Due July 8, 2015 to Justin Keller:** Justin.keller@state.or.us

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| Name: |  |
| Title: |  |
| Organization: |  |
| Address: |  |
| Email: |  |
| Phone: |  |

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| Please check all that apply: |
|[ ]  I am interested in serving on HITOC |
|[ ]  I am interested in serving on a future HITOC work group. OHA anticipates that HITOC will periodically call both short-term and recurring work groups and subcommittees on particular topics.  |
|[ ]  Please select all of the following subject areas you are interested in:

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|[ ]  Health Information Exchange |[ ]  Law & Policy |
|[ ]  Interoperability |[ ]  Finance |
|[ ]  Analytics |[ ]  Governance |
|[ ]  Security & Privacy |[ ]  Consumer Advocacy |

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1. What perspectives would you represent as a member of HITOC (e.g. organization type, geographic region, your role, any subject matter expertise such as behavioral health, etc.)?
2. Please describe your relevant experience and how it would benefit the HITOC (e.g. security/privacy, health informatics, health care delivery, quality improvement, electronic health records, health information exchange, etc.)?
3. Have you served on HITOC in the past or on one of its subcommittees/work groups?
4. Why are you interested in participating in HITOC?
5. Can you commit to attending quarterly half-day meetings and to reviewing materials prior to meeting?
6. Please describe any other experience serving on a committee, board, or collaborative group to which you were a contributor.
7. Is there anything else you would like us to know that may be relevant to serving on HITOC?