**Health Information Exchange (HIE) Workgroup**

**2022 Application**

**Due:** February 25, 2022

**Submit to:** HITOC.info@dhsoha.state.or.us

The Oregon Health Authority’s (OHA) [Health Information Technology Oversight Council (HITOC)](https://www.oregon.gov/oha/hpa/ohit-hitoc/pages/index.aspx) is seeking members for a new chartered Health Information Exchange (HIE) Workgroup.

**Application Deadline:**

Applications are open now through February 25, 2022. To apply, complete this application and submit via email to [HITOC.info@dhsoha.state.or.us](mailto:HITOC.info@dhsoha.state.or.us). If you are interested in applying but the timeline poses a hardship due to the ongoing COVID-19 pandemic, please let OHA staff know.

For questions or support completing an application, please contact Ashley Ashworth at [Ashley.Ashworth@dhsoha.state.or.us](mailto:Ashley.Ashworkth@dhsoha.state.or.us).

**HIE Workgroup Purpose:**

The HIE Workgroup is chartered to provide recommendations to HITOC and OHA on strategies to accelerate, support, and improve HIE across the state. Recommendations should reflect perspectives from all interested parties and partners, specifically including those serving communities who face health inequities. The HIE Workgroup recommendations will inform HITOC’s Health Information Technology (IT) Strategic Plan for Oregon and other OHA efforts.

See the goals and full scope in the draft [HIE Workgroup Draft Charter](https://www.oregon.gov/oha/HPA/OHIT-HITOC/Documents/HIECharter.pdf).

For more information on HIE please see the [HIE Overview](https://www.oregon.gov/oha/HPA/OHIT-HITOC/Documents/HealthInformationExchangeOverview.pdf).

**Background:**

Oregon has made significant strides as a state in digitizing health care information and adopting electronic health records (EHRs) to capture and share electronically health information relevant to patient care. An important downstream effort enabled by this accomplishment is the facilitation of information sharing between these EHRs and other electronic systems to ensure that the “right information is available to the right end user at the right moment”—which often occurs at the point of care.

As OHA seeks to eliminate health inequities due to structural racism and other factors, having accurate information at the point of care enables providers to give the best possible, culturally appropriate care and target interventions for Oregon’s most vulnerable populations.

Significant efforts to promote HIE have already occurred in Oregon. However, there are still many urgent needs to coordinate care and connect across sectors and systems that rely in part on improved HIE statewide, including more robust clinical data exchange at the individual and population levels. Behavioral health, oral health, post-acute care, and other sites of care do not have equitable access to robust EHRs. There are gaps in data flowing between the health care system and public health, human services such as child welfare, justice/corrections systems, county efforts, and others. Addressing such gaps would be valuable to providers as they continue to drive more whole-person care strategies with the patients they serve.

**Who we’re looking for:**

Representatives from Oregon’s diverse landscape of community and health care partners. We expect to have up to 12-15 representatives, including:

1. Representatives from multiple regions of the state including rural and frontier communities
2. Representatives of organizations that advocate for or serve communities who face health inequities
3. Consumers of health care/social services or representatives from organizations that advocate for consumers of health care
4. Representatives of health plans and Medicaid coordinated care organizations (CCOs)
5. Representatives of health care, such as health systems, hospitals, medical groups, clinics, and/or providers
6. Representatives of behavioral health, such as behavioral health providers or behavioral health organizations
7. Representatives of oral health, such as oral health providers or oral health organizations
8. Representatives of long-term care, such as skilled nursing facilities or long term post-acute care facilities
9. Representatives from tribal health
10. Representatives of organizations implementing or using HIE

In addition, up to two HITOC members will be designated to serve as HITOC liaisons to the HIE workgroup. State agency staff will be engaged in this work as determined by the workgroup.

*Technology vendors are not eligible to participate as HIE Workgroup members.*

**Meetings and Expectations:**

* Monthly meetings will begin in late spring 2022 and could run through the end of 2022.
* All meetings will be available virtually.
* Meetings will be open to the public and will include opportunities for public comment. Meeting materials and recordings will be posted on the [OHA HIE Workgroup website](https://www.oregon.gov/oha/HPA/OHIT-HITOC/Pages/HIEworkgroup.aspx).
* Members are expected to review materials ahead of the meeting and come prepared to discuss and participate.

**Other opportunities for engagement on HIE and health IT:**

OHA will engage external partners outside of the HIE Workgroup membership to inform the process and provide input to the HIE Workgroup’s discussions and recommendations.

1. **HIE Interviews**: If you are not able to participate in the HIE workgroup, you might be interested in HIE interviews. Interviews are a way to learn from organizations and individuals about HIE challenges, opportunities, promising strategies, and solutions that would help in their adoption and participation in HIE. OHA is especially interested in hearing from those that serve communities that face health disparities.
2. **Written comments**: OHA will develop concept papers later in 2022 that summarize the strategies under consideration for public input, prior to drafting the updated plan. Written comments on concept papers or any related health IT subject may be submitted at any time by emailing [HITOC.info@dhsoha.state.or.us](mailto:hitoc.info@dhsoha.state.or.us).
3. **HITOC membership**: HITOC also has member openings or will have other health IT committees or workgroups in the future.

If you are interested in participating in any of these activities, please email [HITOC.info@dhsoha.state.or.us](mailto:HITOC.info@dhsoha.state.or.us).

**HITOC HIE Workgroup**

**2022 Application**

**Due:** February 18, 2022

**Submit to:** HITOC.info@dhsoha.state.or.us

1. **General and Contact Information**

|  |  |
| --- | --- |
| Name: | Click or tap here to enter text. |
| Pronouns (optional): | Click or tap here to enter text. |
| Organization (if any): | Click or tap here to enter text. |
| Position at Organization: | Click or tap here to enter text. |
| City or County: | Click or tap here to enter text. |
| Email: | Click or tap here to enter text. |
| Phone: | Click or tap here to enter text. |

1. **Membership Representation**

**The charter specifically looks for representation across these areas. Please select the role(s) or area(s) you would like to represent as a workgroup member** (select all that apply)**:**

|  |  |
| --- | --- |
|  | Rural and frontier communities |
|  | Organization that advocates for or serves communities who face health inequities |
|  | Consumers of health care/social services or organizations that advocate for consumers of health care/social services |
|  | Health plans and Medicaid coordinated care organizations (CCOs)  Health care provider or clinic, health systems, hospitals, medical groups  Behavioral health, such as behavioral health providers or behavioral health organizations  Oral health, such as oral health providers or oral health organizations |
|  | Post-acute care  Tribal health  Organizations implementing or using HIE |
|  | Other (explain): Click or tap here to enter text. |
|  |  |

*Technology vendors are not eligible to participate as HIE Workgroup members.*

1. **Please answer the following questions:**
2. Why are you interested in participating in the HIE Workgroup?

Click or tap here to enter text.

1. Please describe your experience regarding care coordination, population health, data analytics, HIE technology, and/or other relevant experience that you would bring to the HIE Workgroup.

Click or tap here to enter text.

## **Health Equity Expertise** (See [OHA’s definition of health equity](https://www.oregon.gov/oha/EI/Pages/Health-Equity-Committee.aspx))

1. Please describe any knowledge or expertise you have with health equity.

Click or tap here to enter text.

1. If you are selected as a HIE Workgroup member, what opportunities do you see for the Workgroup to address health equity? Racial equity?

Click or tap here to enter text.

**Lived experience/Cross-cultural experience**

1. If applicable: Please describe any lived and/or cross-cultural experience you would like to share that may relate to the work of this Workgroup.

* This question refers to **self-reported identity**, such as race, ethnicity, language, disability, age, sex, gender identity, sexual orientation, social class, and intersections among these identities, or other socially determined circumstances that may impact health equity and an individual’s ability to reach their full health potential and well-being.
* **Lived experience** (Refers to one’s life experience based on self-reported identity,meaning someone who has personal knowledge about the world gained through direct, first-hand involvement in everyday events such as racism, houselessness, mental illness, etc.)
* **Cross-cultural experience** (Refers to one’s volunteer, personal, or professional experience with populations and communities different than their self-reported identity.)

Click or tap here to enter text.

1. **Is there anything else you would like us to know?**

Click or tap here to enter text.

Thank you for your interest in the HIE Workgroup. By sharing your time and experience with OHA, you can make a positive difference in the lives of people in Oregon.

1. **Please check if any of these also apply:**

|  |  |
| --- | --- |
|  | I am also interested in participating in HIE interviews to identify challenges, opportunities, promising strategies, and solutions that would help in adoption and participation in HIE. |
|  | HITOC also has member openings or will have other committees or workgroups in the future. Check this box if you are interested in learning more about these opportunities. |

Everyone has a right to know about and use Oregon Health Authority (OHA) programs and services. OHA provides free help. Some examples of the free help OHA can provide are:

* Sign language and spoken language interpreters
* CART (live captions)
* Written materials in other languages
* Braille
* Large print
* Audio and other formats

If you need help or have questions, please contact [ohit.info@dhsoha.state.or.us](mailto:ohit.info@dhsoha.state.or.usa) or (503) 373-7859. OHA will make every effort to provide services for requests on application and/or meeting materials.