



OREGON
HEALTH
AUTHORITY

Health Information Technology Oversight Council (HITOC) Information Session

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Introductions

- Laurel Moffat (she/her), HITOC Lead Analyst
- Shannon Cengija (she/her), Health IT Policy Analyst
- Marta Makarushka (she/her), Health IT Policy & Program Manager

- Attendees, please introduce yourself in the chat. Please include your:
 - Name
 - Pronouns
 - Representation – which communities or organizations do you represent?

Agenda

- What is health IT and HITOC?
 - HITOC's responsibilities
 - The role of a HITOC member
 - Committee procedures and requirements
 - HITOC's strategic plan
- 



What is health IT & HITOC?

Health IT Tools in HITOC's Scope: EHRs and Patient Portals



Electronic health records (EHRs): A digital version of a patient's health record, or "chart". EHRs are real-time, patient-centered records that make information available instantly and securely to authorized users.

- Most Oregon physical health providers have certified EHRs
- Numbers are lower for behavioral and oral health providers, smaller clinics and individual providers, and providers in rural areas



Patient portals: A secure online website that gives patients convenient, 24-hour access to personal health information from anywhere with an internet connection. Patients can view test results, notes from recent doctor visits, discharge summaries, medications, etc.

- Over 2/3 of patients use their physical health portals

Health IT Tools in HITOC's Scope: HIE and CIE



Health information exchange (HIE): Exchanging health information electronically between separate systems like EHRs. It also refers to organizations that facilitate the electronic sharing of health information between systems.

- Providers treating the same person have the information they need and can work together
- Gaps exist in HIE that create burdens for patients, providers and others



Community information exchange (CIE): A network of partners using technology to share information to connect people to the social services and supports they need. Functions must include a shared resource directory, closed loop referrals, and consent.

- There are two CIE vendors with a current presence in Oregon: Unite Us/Connect Oregon and Findhelp/Healthy Klamath Connect

Health IT Oversight Council (HITOC)

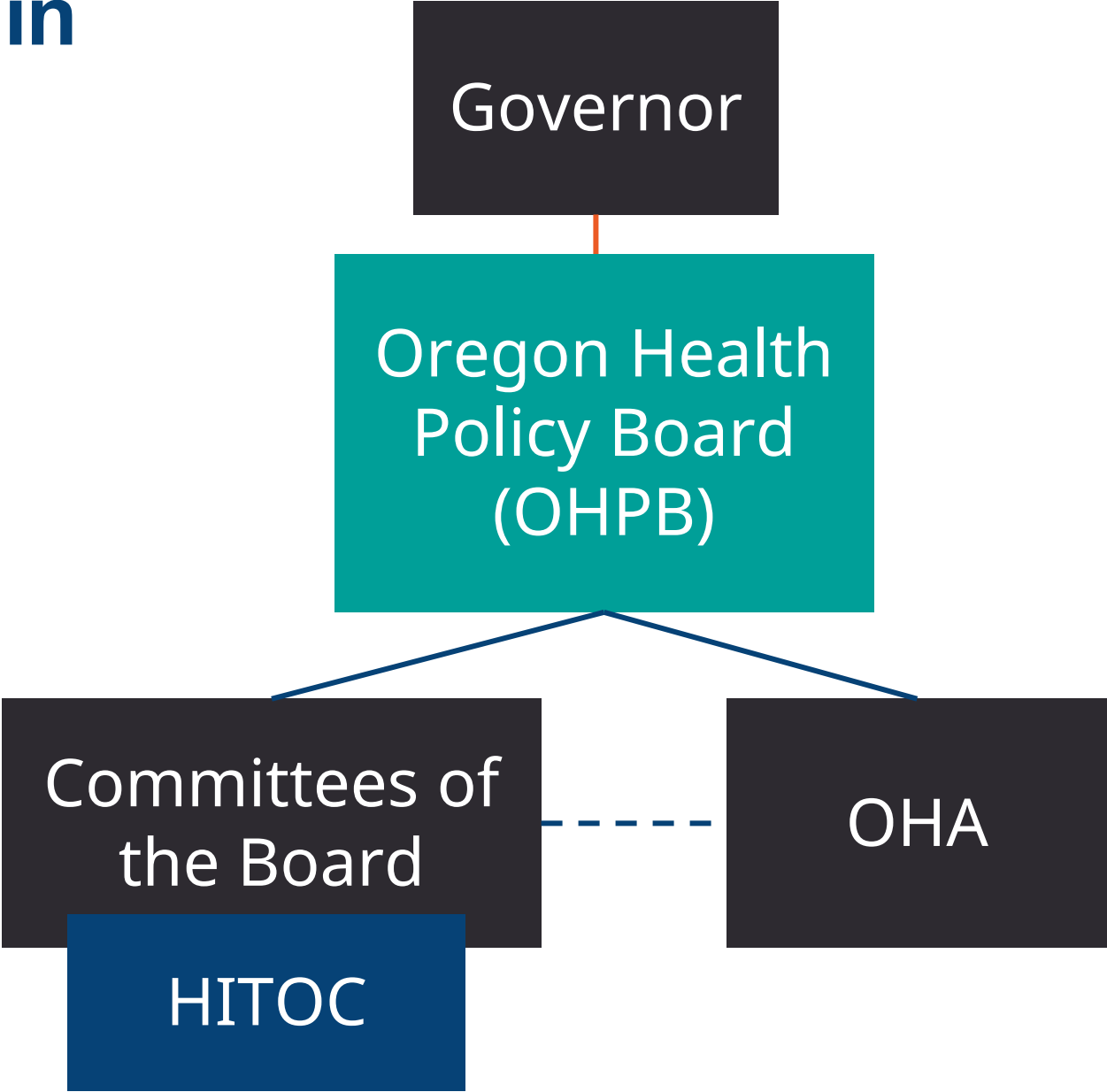
- The Oregon Legislature created HITOC in 2009 to ensure health system transformation efforts are supported by health IT. HITOC is a committee of the Oregon Health Policy Board.

Advise health IT
strategy and policy

Monitor health IT
landscape

Develop state
health IT strategic
plan

HITOC within Oregon



Health Equity Definition


OHA established the goal of eliminating health inequity by 2030

- Oregon will have established a health system that creates health equity when all people can reach their full health potential and well-being and are not disadvantaged by their race, ethnicity, language, disability, age, gender, gender identity, sexual orientation, social class, intersections among these communities or identities, or other socially determined circumstances.
- Achieving health equity requires the ongoing collaboration of all regions and sectors of the state, including tribal governments to address:
 - The equitable distribution or redistributing of resources and power; and
 - Recognizing, reconciling and rectifying historical and contemporary injustices.



HITOC's Responsibilities

Statute: HITOC's Responsibilities (ORS 413.301-08)

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
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1: Explore health IT policy

- Explore emerging health IT topics via discussions, staff reports, presentations, engagement and listening sessions, and panels
- Charter workgroups as needed. Past examples:

Community
Information
Exchange (CIE)
Workgroup

Health Information
Exchange (HIE)
Workgroup


Behavioral Health
Health IT
Workgroup

2: Plan Oregon's health IT strategy

Formal planning recommendations

- Lead community engagement to inform strategies
- Decide where to focus Oregon health IT efforts
- Develop Strategic Plan (with OHPB oversight)

Informal planning

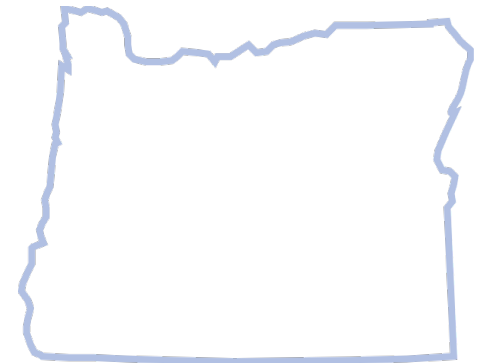
- Plan detailed strategy for efforts in the approved Strategic Plan
 - HITOC may also charter work groups to help plan strategy
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3: Oversee OHA's health IT efforts

- HITOC's oversight role
 - Provide a forum for public transparency
 - Support alignment between efforts and with Strategic Plan
 - Assess effectiveness
- Accomplished by
 - Receiving reports & presentations
 - Providing advice and guidance related to efforts

4: Assess Oregon's health IT landscape

- Guide OHA staff's landscape assessment efforts, including
 - Analyzing existing data sources
 - New scan efforts
 - Partner engagement
- Receive reports during HITOC meetings



5: Report on Oregon's health IT progress

- Report to OHPB annually
- Public reporting via
 - HITOC meetings
 - eNewsletter
 - HITOC website



6: Monitor federal health IT law and policy

- Monitor law/policy changes as part of HITOC meeting topics on emerging issues, and via the HITOC Policy & Program updates included with each meeting
- Provide advice and guidance on how OHA should respond
- Use HITOC meetings and OHA's Health IT eNewsletter to publicize engagement opportunities



The role of a HITOC member

Representing Oregon

- HITOC members serve **all** people in Oregon, regardless of the way they access (or don't access) health care (not just Medicaid/Oregon Health Plan).
 - You share your technical expertise and bring your lived experience and the perspective of your organization to HITOC, but you are not representing **only** your organization
 - If interests conflict, first responsibility is to the public
- HITOC members should strive to be neutral; avoid promoting or criticizing specific vendors/health care organizations unless it's directly relevant to HITOC's discussion.

HITOC members are public officials

- May not use/attempt to use position to get a financial benefit to self/relative/household member/business
- Must follow rules regarding gifts
- May need to file statement of economic interest
- May not use confidential information for personal gain
- Must disclose conflicts of interest
- Nepotism is prohibited
- Do not include HITOC membership in email signatures/business cards



See Module 6 of [Overview of Boards, Commissions, & Small Entities](#)

Public Meeting Information

- HITOC meetings are **public meetings**
 - Written communications, meeting materials, and other documents are public records
 - Meetings are open to the public
 - Meetings are recorded; recordings and minutes are posted online
 - Members of the public are allowed to comment during Public Comment period only, as meeting discussion is reserved for members





Committee procedures & requirements

HITOC General Info

- **Preparation:** typically 30 minutes to 1 hour per meeting
 - Materials emailed 1 week before meeting
 - Slides emailed day before
 - **Thursdays (even months)**
- **Compensation** included for committee travel (all members) and for committee work time (qualifying members)
- **Accessibility contact:** HITOC.INFO@odhsoha.oregon.gov or (503) 373-7859

2026 HITOC Dates

- Typical meetings are 12:30-3:30 p.m. and virtual:
 - August 6
 - October 8
 - December 3



Committee Compensation

- **Qualified members** of committees are entitled to compensation for official duties performed. You are a qualified member if:
 - You are not in full-time public service; and
 - You had an adjusted gross income in the previous tax year:
 - Of less than \$50,000, or
 - Of less than \$100,000, as reported on a joint income tax return.



Oregon's Strategic Plan for Health Information Technology 2024-2028

Vision

**Health IT empowers
individuals and communities
to reach their full health potential
and well-being.**



Goals



A. People can be actively involved in their care through access to health IT



B. Individuals' information is electronically available, exchanged securely and seamlessly




C. Health IT supports efficient and accurate data collection, sharing, and use



D. Health IT design, implementation, and use must center health equity

Principles

1. Health IT must advance **health equity** and avoid reinforcing or worsening inequities.
 2. **Privacy and security** of people's health information is expected.
 3. Ensure **individuals and communities understand how their data is stored, shared, and used** to provide transparency and grow trust.
 4. Leverage **existing resources and align** with national standards.
 5. Improve **efficiency** and avoid adding burden.
 6. Ensure efforts are **sustainable** with thoughtful intentional progress.
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Strategies

1	Strengthen engagement, access, and rights of patients and consumers
2	Close remaining EHR gaps
3	Spread HIE across the state
4	Support, accelerate, and improve statewide CIE efforts
5	Improve interoperability and encourage broad sharing of valuable data
6	Evolve governance of health IT efforts

Additional resources on the HITOC website:

- Committee charter and by-laws
- Strategic plan and annual workplan
- Links to join upcoming meetings
- Past meeting topics
- Work group materials and reports

<https://www.oregon.gov/oha/HPA/OHIT-HITOC/Pages/index.aspx>



Questions?

Apply today!

- [HITOC Member Recruitment Application](#)
- [Solicitud de membresía de HITOC](#)
- Email HITOC staff at HITOC.INFO@odhsoha.oregon.gov with any questions or support needs.

You can get this document in other languages, large print, braille or a format you prefer free of charge.

Contact HITOC staff at

HITOC.INFO@odhsoha.oregon.gov or 503-373-7859

(voice/text). We accept all relay calls.

