

Health IT Policy

Federal Law and Policy Updates/Changes, contact:

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Draft Federal Health IT Strategic Plan – now available for comment

The Department of Health and Human Services, led by the Office of the National Coordinator for Health Information Technology (ONC), released the draft 2020-2025 Federal Health IT Strategic Plan (plan) for public comment. This plan, which was developed in collaboration with over 25 federal organizations, is intended to guide federal health information technology (IT) activities. Specifically, this plan explains how the federal government intends to use health IT to:

1. Promote Health and Wellness;
2. Enhance the Delivery and Experience of Care;
3. Build a Secure, Data-Driven Culture to Accelerate Research and Innovation; and
4. Connect Healthcare and Health Data through an Interoperable Health IT Infrastructure.

Comments are due March 18, 2020.

CMS and ONC Interoperability Rules – not yet finalized

In 2019, [ONC proposed a new rule](#) to support seamless and secure access, exchange, and use of electronic health information (EHI). The proposed rule is designed to increase innovation and competition by giving patients and their healthcare providers secure access to health information and new tools, allowing for more choice in care and treatment. It calls on the healthcare industry to adopt standardized application programming interfaces (APIs), which will help allow individuals to securely and easily access structured EHI using smartphone applications. Finally, to further support access and exchange of EHI, the proposed rule implements the information blocking provisions of the Cures Act. The rule proposes seven exceptions to the definition of information blocking.

The Centers for Medicare & Medicaid Services (CMS) also released a [proposed interoperability rule](#) in 2019. That rule would require insurers participating in CMS-run programs like Medicare, Medicaid, and the federal Affordable Care Act exchanges to have the capability to give patients electronic access to their personal health information at no cost.

Both rules are anticipated to be released in early 2020.

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 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 stakeholders and 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.

Trusted Exchange Framework and Common Agreement (TEFCA) - www.healthit.gov/TEFCA

HHS is implementing the Trusted Exchange Framework and the Common Agreement (TEFCA), which will outline a policy and technical approach to enable nationwide exchange of electronic health information across disparate health information networks (HINs). The development of the TEFCA is mandated by the 21st Century Cures Act.

For a variety of stakeholders — including patients, providers, developers, and HINs — the TEFCA is designed to provide a single on-ramp to nationwide connectivity that can support secure electronic health information exchange.

- Draft 2 of the Trusted Exchange Framework and Common Agreement (TEFCA), released on April 19, 2019, outlines a common set of principles, terms, and conditions to support the development of a Common Agreement that would help enable nationwide exchange of electronic health information (EHI) across disparate health information networks (HINs).
- In September 2019, ONC awarded a cooperative agreement to The Sequoia Project to serve as the Recognized Coordinating Entity (RCE) to develop, update, implement, and maintain the Common Agreement and the Qualified Health Information Networks Technical Framework.

Landscape and Environmental Scan, Contact:

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OHA's Office of HIT (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.

In December 2019, staff presented a [2019 Health IT Report to HITOC](#) which summarizes what is known about Oregon's EHR and HIE landscape, including key health IT concepts and HITOC considerations. This report supports HITOC's data-related responsibilities and helps inform HITOC's 2020 strategic planning work.

Past work includes a Behavioral Health HIT/HIE Scan Report based on survey and interview data. See [Behavioral Health HIT Workgroup](#) for more information.

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.

HITOC Strategic Plan and Annual Priorities, Contact:
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The current [HITOC HIT 2017-2020 Strategic Plan](#) was approved by the Oregon Health Policy Board OHPB in October 2017 and provides a roadmap for Oregon's HIT work ahead, including strategies for a "network of networks" approach to statewide health information exchange and the HIT Commons public/private partnership model of governance.

2021 Strategic Plan Update: In 2020, HITOC will update Oregon's strategic plan for health IT for 2021 and beyond. HITOC's strategic plan is for everyone in Oregon, not just Medicaid/Oregon Health Plan. Its statewide strategies include state agencies, hospitals, health systems, CCOs and health insurance companies, clinicians and clinic staff, technology partners, consumers/patients, and more.

Your input on where HITOC should stay the course and where adjustments are needed is critical.

Between February and April, HITOC will seek stakeholder input through public comment, a series of listening sessions, and other outreach. HITOC's Strategic Planning retreat will be held in June, and the draft updated plan is expected to be presented to the Oregon Health Policy Board for approval by the end of 2020. See [HITOC 2021 Strategic Plan Update website](#) for more information.

Annual priorities: In February 2020, HITOC will report to the [Oregon Health Policy Board](#) on 2019 progress and proposed 2020 priorities, including Strategic Plan update work, and further work related to HIT and social determinants of health and health equity.

Behavioral Health HIT Workplan, contact:
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As part of the ongoing behavioral health work, the [Behavioral Health \(BH\) HIT Workgroup's](#) November 2019 meeting focused on the OHA effort to modernize the Compass system, which includes required reporting for behavioral health providers in Oregon. Workgroup members heard a presentation on the efforts to streamline reporting requirements and provided input on their challenges and what they would like to see moving forward. In February 2020, the Workgroup will give input on the scope for technical assistance to substance use disorder providers around EHR and HIE, under federal SAMHSA block grant funding.

HITOC's Current Work Groups

[Health IT/Health Information Exchange Community and Organizational Panel](#)

This group is composed of representatives from a variety of organizations across Oregon that are implementing or operating cross-organizational health IT and health information exchange programs. Members share best practices, identify common barriers to progress, and explore opportunities for collaboration.

[Behavioral Health HIT Workgroup](#)

HITOC chartered this group in 2018 to prioritize the recommendations in OHA's [Report on Health Information Technology and Health Information Exchange Among Oregon's Behavioral Health Agencies](#). The workgroup's recommendations were presented to HITOC in December 2018 and added to the Report as an addendum. HITOC requested the workgroup continue in 2019. It is composed of a broad representation of types of behavioral health stakeholders across Oregon.

[Network of Networks Technical Definitions Group](#)

HITOC chartered this group in 2018 to do exploratory work on the Network of Networks concept (see [Statewide HIE 101](#)). It is composed of HCOP and HITOC members, plus several other stakeholders. It advises OHA about technical issues related to the planned Network of Networks, including foundational concepts, definitions, and landscape issues.

Oregon Health IT Program: Partnerships

HIT Commons Contact: Brittney.J.Matero@dhsosha.state.or.us

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

EDie and the Collective Platform (formerly known as PreManage)

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. In addition to utilization alerting, EDie also provides succinct but critical information to ED physicians, such as: security alerts, care guidelines entered by the patient primary care home, and contact information for case managers. All hospitals with emergency departments (excepting the VA) in Oregon are live with EDie.

The Collective Platform (aka PreManage) is a companion software tool to EDie. PreManage 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, Medicaid coordinated care organizations (CCOs), providers, and care coordinators. In Oregon, Physician Orders for Lifesaving Treatment (POLST) forms are available to view for clinics, Skilled Nursing Facilities (SNFs), payers, and hospitals who receive EDie alerts through paper/fax.

EDie and the Collective Platform are in use statewide and adoption for Collective continues to grow. All of Oregon's CCOs receive hospital notifications through the Collective Platform, as are most major Oregon health plans, all of Oregon's Dental Care Organizations, and 4 tribal clinics. Behavioral health continues to be a major category of Collective users. All Type B Area Agencies, Aging and Aging & People with Disabilities, and Developmental Disabilities District offices are now using Collective.

Recent highlights:

- 66% of Oregon's hospitals are receiving PDMP data (see below) within their EDie alerts.
- PreManage began to roll out to Skilled Nursing Facilities across Oregon in 2019. 93 out of nearly 200 are live.

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

Oregon's PDMP Integration initiative connects EDie, regional health information exchanges (HIEs), EHRs, and pharmacy management systems to [Oregon's PDMP](#), which includes prescription fill information on controlled substances, and is administered by OHA's Public Health Division. HIT Commons is overseeing the [PDMP Integration work](#) with guidance from the Oregon PDMP Integration Steering Committee and in coordination with OHA's Public Health PDMP program. Legislative updates and the latest PDMP implementation reports can now be found on the [HIT Commons website](#).

PDMP Integration capabilities went live in summer of 2017 and the statewide subscription funding officially launched through the HIT Commons in Spring 2018. Recent highlights include:

- 20,461 (this number cannot be deduplicated and may reflect duplicate prescriber counts) prescribers across 158 organizations have integrated access to Oregon's PDMP data— either

through their EDie alerts, or through one-click access at the point of care (EHR or HIE), 7 retail pharmacy chains (across 368 sites) and 1 rural pharmacy are also live.

- 6.6% reduction in acute opioid prescribing since 2018. Interstate data sharing is established with PDMPs in Idaho, Kansas, Nevada, Texas, North Dakota, and Washington (WA for web portal only). Alaska, Wyoming and California are in progress.

Oregon Community Information Exchange Activities

In general, Community Information Exchanges connect health care, human and social services partners to improve the health and well-being of communities. A technology platform supporting a CIE could provide many functions, including statewide social services directory, shared SDOH assessments, real-time closed loop referral management, collaborative care plans and standardized outcomes and data analysis. HIT Commons activities around CIE thus far have included:

- An environmental scan of CIE efforts underway in Oregon was completed in fall 2019.
- The HIT Commons has chartered an Oregon CIE Advisory Group to engage stakeholders statewide to discuss components of an effective CIE, assess opportunities for alignment of regional CIE efforts, and to develop a CIE Roadmap for Oregon by the end of 2020.

OHA supports HIT Commons CIE Advisory Group efforts as well as internal OHA/DHS coordination to ensure alignment between CIE and other state SDOH work. HITOC will receive an update at its February 2020 meeting on this work. For more information, see: <http://www.orhealthleadershipcouncil.org/currently-in-development/>

Oregon Health IT Program: Programs

Medicaid EHR Incentive Program Contact: Jessica.L.Wilson@dhsosha.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 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 February 2020, more than \$206 million in federal incentive payments have been dispersed to 60 Oregon hospitals and 3,834 Oregon providers. The program ends in 2021.

Oregon Provider Directory Contact: Karen.Hale@dhsosha.state.or.us

The [Oregon Provider Directory](#) will serve as Oregon's directory of accurate, trusted provider data. It will support care coordination, HIE, administrative efficiencies, and serve as a resource for health analytics. Authoritative data sources that feed the Provider Directory will be matched and aggregated and data stewards will oversee management of the data to ensure the Provider Directory maintains initial and long-term quality information. [The Provider Directory Advisory Committee](#) provides stakeholder input and oversight to OHA's development of this program.

The Oregon Provider Directory went live in September 2019 and is onboarding a small set of users in Central Oregon for a soft launch. **HIT Commons** is working with OHA staff and stakeholder volunteers to develop initial use case testing for the soft launch. Additional users will be added in later phases as data become more robust.

Clinical Quality Metrics Registry Contact: Katrina.M.Lonborg@dhsosha.state.or.us

The [Clinical Quality Metrics Registry \(CQMR\)](#) collects, aggregates, and provides electronic clinical quality measure (eCQM) data to meet program requirements and achieve efficiencies for provider reporting.

The CQMR is now live to collect eQMs for the Medicaid EHR Incentive Program and CCO incentive measures and to support eCQM reporting to CMS for the CPC+ and MIPS programs. Updated and new training materials and webinars are available to help users get ready for reporting that is due in the first quarter of 2020. The next enhancements planned for the CQMR involve using enrollment data to enable more robust filtering of eCQM data by payer. Over time, other quality reporting programs could use the CQMR as well, which will support OHA's goal of streamlining and aligning quality metric reporting requirements and reducing provider burden.

HIE Onboarding Program Contact: Kristin.M.Bork@dhsoha.state.or.us

Oregon's [HIE Onboarding Program](#) leverages significant federal funding to increase Medicaid providers' capability to exchange health information. The Program supports 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 to provide onboarding services through an RFP process. The HIE Onboarding Program launched in January 2019 and will end in fall 2021.

OHA has approved Reliance workplans to onboard providers contracted with eight current CCOs, covering 12 Oregon counties: AllCare Health Plan, Advanced Health, Cascade Health Alliance, Jackson Care Connect, PacificSource Central Oregon, PacificSource Gorge, Primary Health of Josephine County, and Umpqua Health Alliance. Reliance submitted and received approval for their 2020 work plan.

Direct Secure Messaging Flat File Directory Contact: Karen.Hale@dhsoha.state.or.us

The Flat File Directory assists organizations with identifying Direct secure messaging addresses across Oregon to support use of Direct, including to meet federal Meaningful Use requirements for sharing Transitions of Care summaries.

As of February 2020, the Flat File Directory includes more than 15,000 Direct addresses from 25 interoperable, participating entities who represent more than 850 unique health care organizations (primary care, hospital, behavioral health, dentistry, FQHC, etc.)

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@dhsoha.state.or.us).

Program Contact

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Get involved with Oregon Health IT

Office of Health Information Technology: HealthIT.Oregon.gov | Join the listserv: bit.ly/2VYgoDB