



2026 CCO Health Information Technology Roadmap

Contract or rule citation	Exhibit J, Section 2
Deliverable due date	April 30, 2026
Submit deliverable via:	CCO Contract Deliverables Portal

Please:

1. Submit a Microsoft Word version of your Health IT Roadmap using the template and
2. Use the following file naming convention for your submission:
CCOname_2026_HealthIT_Roadmap

For questions about the CCO Health IT Roadmap, please send an email to CCO.HealthIT@odhsoha.oregon.gov

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Instructions and expectations

Please refer to the instructions for each section of the following Health IT Roadmap Template and respond to all of the required questions using the blank spaces below each question. Topics and specific questions where responses are not required are labeled as **optional**. The template includes questions across the following five topics:

1. Health IT partnership
2. Support for EHR adoption, use and optimization
3. Use of and support for HIE for care coordination and hospital event notifications
4. Health IT to support social determinants of health (SDOH), including but not limited to social needs screening and referrals
5. Other health IT questions (optional section)

Each required topic includes the following:

- Narrative sections to describe your 2025 strategies, progress, accomplishments/successes, and barriers
- Narrative sections to describe your 2026-2029 plans, strategies, and related activities and milestones

Narrative responses should be concise and specific to how your efforts support the relevant health IT area. OHA is interested in hearing about your progress, successes, and plans for supporting providers with health IT, as well as **any challenges/barriers experienced**, and how OHA may be helpful. CCOs are expected to support physical, behavioral, and oral health providers with adoption of and access to health IT. That said, CCOs' Health IT Roadmaps and plans should:

- ✓ be informed by the CCO's Data Reporting File

- ✓ be strategic, and activities may focus on supporting specific provider types or specific use cases
- ✓ include specific activities and milestones to demonstrate the steps CCO expects to take

Review the Health IT Roadmap Guidance for additional detail on filling out this template.

Notes:

- As part of OHA's digital accessibility effort, the 2026 Roadmap materials are formatted differently than in past years, but the content is familiar. **CCOs are encouraged to check the "Navigation Pane" box in the View tab of Microsoft Word to help with navigation of this document.** If you have any concerns or challenges with using the new template, please email CCO.HealthIT@odhsoha.oregon.gov to troubleshoot.
- Four strategy sections have been provided for each section of the template. Please copy and paste additional strategy sections as needed. When adding additional strategy reporting sections, please be sure to copy and paste the strategy section from the same part of the Roadmap (checkboxes differ section to section and so will be incorrect if copied and pasted from other parts of the Roadmap).
- Feel free to delete any unused strategy sections (e.g., if CCO only includes three strategies, fourth strategy section can be deleted).
- If CCO is not pursuing a strategy beyond 2025, note "N/A" in the Planned Activities and Planned Milestones sections.
- If CCO is implementing a strategy beginning in 2026, please indicate "N/A" in the progress section for that strategy.
- If CCO is continuing a strategy from prior years, please continue to report and indicate "Ongoing" or "Revised" as appropriate.

CCO Name: Advanced Health

1. Health IT partnership

Please attest to the following items.

- a. CCO has an active, signed HIT Commons MOU and adheres to the terms.**

☒ Yes

☐ No

- b. CCO paid the annual HIT Commons assessments subject to the payment terms of the HIT Commons MOU.**

☒ Yes

☐ No

- c. CCO served, if elected, on the HIT Commons governance board or one of its committees.** (Select N/A if CCO does not have a representative on the board or one of its committees.)

☐ Yes

☐ No

☒ N/A

- d. CCO participated in an OHA Health IT Advisory Group (HITAG) meeting at least once during the previous Contract Year.**

☒ Yes

☐ No

2. (Optional) Overview of CCO health IT approach

Please provide an overview of CCO’s internal health IT approach/roadmap as it relates to supporting care coordination, including risk stratification. This might include CCO’s overall approach to investing in and supporting health IT, any shift in health IT priorities, etc. Any information that is relevant to more than one section would be helpful to include here and referenced as needed (rather than being repeated in multiple sections). **This will be read by all reviewers.**

Click or tap here to enter text.

3. Support for EHR adoption, use and optimization

A. Support for EHR adoption, use and optimization: 2025 progress and 2026-29 plans

Please describe your 2025 progress and 2026-29 plans for supporting increased rates of EHR adoption, use, and optimization in support of care coordination, and addressing barriers among contracted physical, oral, and behavioral health providers. In the spaces below (in the relevant sections), please:

- Report the number of physical, oral, and behavioral health organizations without EHR information using the Data Completeness Table in the OHA-provided CCO Health IT Data File (e.g., “Using the OHA-provided Data Completeness Table, 10 physical health, 22 oral health, and 14 behavioral health organizations lack EHR information”). CCOs are expected to use this information to inform their strategies. Where applicable, information in the CCO Data Reporting File should support descriptions of accomplishments and successes.
- Include plans for collecting missing EHR information via CCO already-existing processes (e.g., contracting, credentialling, Letters of Interest).

- Provide an overview of CCO's approach to supporting EHR adoption, use, and optimization among contracted physical, oral, and behavioral health providers in support of care coordination.
- **For each strategy** CCO implemented in 2025 and/or will implement in 2026-29 to support EHR adoption, use, and optimization among contracted physical, oral, and behavioral health providers in support of care coordination include:
 1. A title and brief description
 2. Which category(ies) pertain to each strategy
 3. The strategy status
 4. Provider types supported
 5. A description of 2025 progress, including:
 - i. Accomplishments and successes (including number of organizations, etc., where applicable)
 - ii. Challenges related to each strategy, as applicable
 - iii. How the strategy supports each type of provider selected
 6. (Optional) An overview of CCO 2026-29 plans for each strategy
 7. Activities and milestones related to each strategy CCO plans to implement in 2026-29

Using the Data Completeness Table in the OHA-provided CCO Health IT Data Reporting File, **report on the number of contracted physical, oral and behavioral health organizations *without* EHR information.**

Physical Health Providers without EHR information: 5/32 16% | Behavioral Health Providers without EHR information: 24/37 65% | Oral Health Providers without EHR information: 0/5 0%

Briefly describe CCO plans for collecting missing EHR information via CCO existing processes.

2026 will be a continuation of 2025's strategy of focusing on filling in all of the behavioral health provider EHR data. This will consist of making calls directly to each clinic and re-evaluate the best ways to communicate to the smaller provider organizations.

Complete list of strategy categories

Please review the list of strategies below that you may have employed during 2025 and/or plan to implement during 2026-29. Check the applicable boxes for each strategy and describe your progress/plans in the sections below.

1. EHR training and/or technical assistance
2. Assessment/tracking of EHR adoption and capabilities
3. Outreach and education about the value of EHR adoption/use
4. Collaboration with network partners
5. Incentives to adopt and/or use EHR
6. Financial support for EHR implementation or maintenance
7. Requirements in contracts/provider agreements
8. Leveraging HIE programs and tools in a way that promotes EHR adoption

9. Offer hosted EHR product
10. Assist with EHR selection
11. Support EHR optimization
12. Other strategies for supporting EHR adoption

(Optional) **Overview of CCO approach to supporting EHR adoption, use, and optimization among contracted physical, oral, and behavioral health providers in support of care coordination.**

Click or tap here to enter text.

Strategy 1 title: Assessment/tracking of EHR adoption and capabilities

Brief description: Advanced Health is interested in contracted healthcare organization's EHR adoption and capabilities because it impacts the utilization of any HIE tool that is offered. What this means is that if the EHR that the facility is utilizing has a tool, or a similar tool to one of the HIE tools listed below, we make note that it may be harder for them to adopt an HIE tool. When it is identified that they have their own tool that they use, we address them "adopting" the tool differently. For these organizations to remain active participants when contracted with them, if they have a HIE tool, Advanced Health goal pivots to integrate the said tool the healthcare organization utilizes.

Strategy categories: Select which categories pertain to this strategy

- ☐1: TA ☒2: Assessment ☐3: Outreach ☐4: Collaboration
- ☐5: Incentives ☐6: Financial support ☐7: Contracts ☐8: Leverage HIE
- ☐9: Hosted EHR ☐10: EHR selection ☐11: Optimization
- ☐12: Other:

Strategy status:

- ☒ Ongoing ☐ New ☐ Paused ☐ Revised ☐ Completed
☐ Ended/retired/stopped

Provider types supported with this strategy:

- ☒ Across provider types **OR** specific to:
☐ Physical health ☐ Oral health ☐ Behavioral health

Progress (including previous year accomplishments/successes and challenges with this strategy):

Review of previous years', other CCO's HIT Roadmaps to identify any strategies that may support Advanced Health's current strategies to track and assess EHR adoption and capabilities. Using the HIT roadmaps allows Advanced Health to reach out to other CCOs to learn from lessons learned. Advanced Health's CITO continues to reach out to other CCO's technical contacts to learn about how they support and track EHR/HIT and internal IT security tools

All PCPCH and FQHC's have EHRs and 24,848 members are seen at PCP offices with EHRs. There are two facilities on the Exempt Tab that have members assigned (Total of 442 members). There are also a total of 1804 unassigned members due to the timing of the report.

(Optional) **Overview of 2026-29 plans for this strategy:**

Click or tap here to enter text.

Planned activities and milestones

Enter planned activities and milestones for this strategy in the table below. Please add or delete lines as needed.

Planned activities	Planned milestones
1. Conduct in-person/virtual meetings/interviews with contracted behavioral healthcare organizations to understand gaps and challenges with their current EHR systems. There are a total of 27 EHR status unknown in Advanced Health's behavioral health network, and the goal is to contact each of the 27 in 2025. a. Resources and tools provided to organizations undergoing gaps and challenges may look different depending on the challenges they are going through. It may look like connecting providers with other providers that may be going through the same difficulties or may have overcome them. 2. Review previous years', other CCO's HIT Roadmaps to identify any strategies that may support Advanced Health's current strategies to track and assess EHR adoption and capabilities. Using the HIT roadmaps will allow Advanced Health to reach out to other CCOs to learn from lessons learned.	1. Q2 – Q4 2025 2. Q3 - Q4 2025 3. Q3 2025

Planned activities	Planned milestones
3. Contact the 2 unknown vendor oral health providers to gain information as to what EHR they are utilizing.	

Strategy 2 title: Understand EHR plans across Coos and Curry/ Outreach and education about the value of EHR adoption/use

Brief description: Advanced Health has many different provider types, and each type has unique needs in an EHR. While we have a high adoption rate of EHRs, there are always plans in the works for facilities that want to change their EHRs. With the high adoption rate of EHRs among physical health providers, we do have a few outliers that do not have EHRs.

Strategy categories: Select which categories pertain to this strategy

- ☐1: TA ☐2: Assessment ☒3: Outreach ☐4: Collaboration
☐5: Incentives ☐6: Financial support ☐7: Contracts ☐8: Leverage HIE
☐9: Hosted EHR ☐10: EHR selection ☐11: Optimization
☐12: Other:

Strategy status:

- ☒Ongoing ☐New ☐Paused ☐Revised ☐Completed
☐Ended/retired/stopped

Provider types supported with this strategy:

- ☒Across provider types **OR** specific to:
☐Physical health ☐Oral health ☐Behavioral health

Progress (including previous year accomplishments/successes and challenges with this strategy):

Advanced Health’s CITO continued to reach out via email, in person meetings, and phone calls. The focus in 2025 was to contact all Behavioral Health providers. The biggest obstacle was getting ahold of some of the providers due to the fact that they are one or two provider clinics that don’t have a front desk/office manager to answer calls or emails. 24 phone calls were made, and 1 was returned. However, the provider that returned the call was interested in PCC and Reliance HIE information.

(Optional) **Overview of 2026-29 plans for this strategy:**

Click or tap here to enter text.

Planned activities and milestones

Enter planned activities and milestones for this strategy in the table below. Please add or delete lines as needed.

Planned activities	Planned milestones
1. Meet with contracted organizations technical and operational teams to understand if there are any planned EHR conversions. The types of providers that will be prioritized will be any contracted organization that holds a PCP panel, major hospitals, and behavioral health organizations. 2. Using the data file, identify and prioritize what organizations/providers do and do not have EHRs or HIT tools	1. Minimum of 2 quarters a year for years: 2025-2026 2. Ongoing throughout 2025-2026

Planned activities	Planned milestones
based on number of members served. a. The focus will be on closing the gap with behavioral health providers. Questions that will be asked include “What barriers does adopting an EHR pose for you,” “Can we help connect you to others that have EHRs that can help work through those barriers” and “Have you had any EHR conversations with any vendors or potential partners?” The answers to these questions can guide how we support them in EHR adoption going forward. This strategy and strategy 1 above, align and follow the same process.	

Strategy 3 title: Financial support for EHR implementation or maintenance

Brief description: Advanced Health provided financial support for EHR maintenance costs

Strategy categories: Select which categories pertain to this strategy

- ☐1: TA ☐2: Assessment ☐3: Outreach ☐4: Collaboration
☒5: Incentives ☒6: Financial support ☐7: Contracts ☐8: Leverage HIE
☐9: Hosted EHR ☐10: EHR selection ☐11: Optimization
☐12: Other:

Strategy status:

- ☒ Ongoing ☐ New ☐ Paused ☐ Revised ☐ Completed
☐ Ended/retired/stopped

Provider types supported with this strategy:

- ☒ Across provider types **OR** specific to:
☐ Physical health ☐ Oral health ☐ Behavioral health

Progress (including previous year accomplishments/successes and challenges with this strategy):

Advanced Health has continued utilizing the process created in 2023. The process for determining the level of financial support begins with a proposal from the requesting facility listing out initial costs, ongoing costs, impact of project, and what their financial request is. Once this proposal is made to Advanced Health, the CEO, CFO, and CITO analyze what impact the financial request makes on Advanced Health's finances, compares project to other HRS projects that have been requested, and what impact the EHR change makes on what size member population based off of previous claims data.

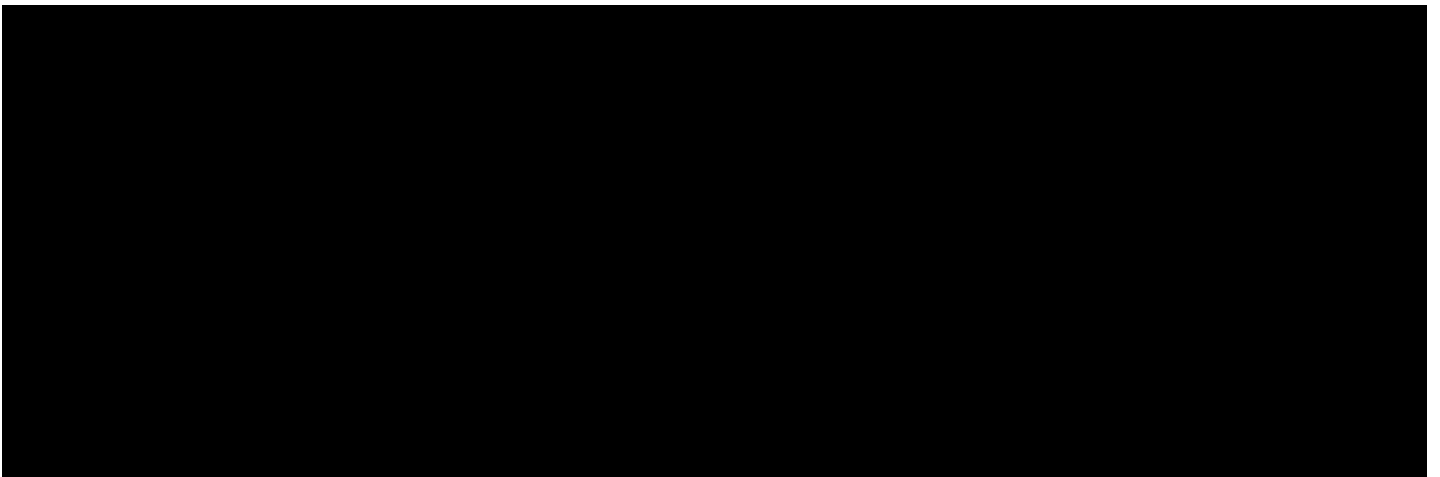
(Optional) **Overview of 2026-29 plans for this strategy:**

Click or tap here to enter text.

Planned activities and milestones

Enter planned activities and milestones for this strategy in the table below. Please add or delete lines as needed.

Planned activities	Planned milestones
1. Financial support will be provided in future years if needed. a. Analysis will be completed (based on process created in 2023) on any proposals for EHR support.	A. 2026



Strategy 5 title: Build CCO Quality Metric Reporting Internally

Brief description: Advanced Health's Quality and Analytics teams have been working to build CCO Quality Metric Reporting Internally to enhance reporting ability.

Strategy categories: Select which categories pertain to this strategy

- ☐1: TA ☐2: Assessment ☐3: Outreach ☒4: Collaboration
☐5: Incentives ☐6: Financial support ☐7: Contracts ☐8: Leverage HIE
☐9: Hosted EHR ☐10: EHR selection ☒11: Optimization
☒12: Other: CCO Quality Metrics

Strategy status:

- ☐Ongoing ☒New ☐Paused ☐Revised ☐Completed
☐Ended/retired/stopped

Provider types supported with this strategy:

- ☒Across provider types **OR** specific to:
☐Physical health ☐Oral health ☐Behavioral health

Progress (including previous year accomplishments/successes and challenges with this strategy):

Advanced Health previously used a different, external tool for CCO Quality Metrics reporting. During 2025, Advanced Health's Analytics department was able to build out all metrics with internal and external (EHR) data to enhance visibility into data.

(Optional) **Overview of 2026-29 plans for this strategy:**

Review current reports with Clinics to enhance what data they need to be able to meet metrics. These reports will be available, near real time (data is received weekly), for providers via Tableau portal. Each clinic will receive credentials to view their own data, with security being tight with who has access and reports on activity in the Tableau server being reviewed monthly.

Planned activities and milestones

Enter planned activities and milestones for this strategy in the table below. Please add or delete lines as needed.

Planned activities	Planned milestones
1. Continue to fine tune internal reports with Quality and Analytics to ensure reports are straightforward for partners. 2. Build out CCO Quality Metric Reports on Externally available Tableau portal for providers/clinic contacts to access to get near live reports (data is received from Clinics weekly) 3. Add more EHR integrations from larger clinics	A. Q1-Q3 2026 B. Q3-Q4 2026 C. Q3-Q4 2026

B. EHR support barriers

Please describe any barriers that inhibited your progress to support EHR adoption, use, and/or optimization among your contracted providers.

One of the biggest obstacles, that does not have a solution, is bandwidth. Advanced Health is one of the smaller CCOs, the number of employees is smaller than others, for that reason Advanced Health employees wear many different hats. Advanced Health's largest Clinics and Hospitals all use certified EHRs (please see Data File). We have been included in conversations of struggles that Clinics and/or Hospitals have with their EHRs/EHR Vendors. Most struggles we find are caused by vendor's ability to produce. Bandwidth issues exist not only for Advanced Health, but also for the clinics and Hospitals in Coos and Curry County.

C. OHA support needs

How can OHA support your efforts to support your contracted providers with EHR adoption, use, and/or optimization?

Create a funding stream for CCOs to tap into to provide incentives and payment for organizations interested in adopting HIE tools or enhancing EHRs.

4. Use of and support for HIE for care coordination and hospital event notifications

A. CCO use of HIE for care coordination and hospital event notifications: 2025 progress and 2026-29 plans

Please describe your 2025 progress and 2026-29 plans for using HIE for care coordination, including risk stratification, AND timely hospital event notifications **within your organization**. In the spaces below (in the relevant sections), please:

- List and describe specific tool(s) you currently use or plan to use for care coordination, including risk stratification, and timely hospital event notifications.
- (Optional) Provide an overview of CCO's approach to using HIE for care coordination and hospital event notifications.
- **For each strategy** CCO implemented in 2025 and/or will implement in 2026-29 for using HIE for care coordination, including risk stratification, and hospital event notifications within the CCO include:
 1. A title and brief description
 2. Which category(ies) pertain to each strategy
 3. Strategy status
 4. A description of 2025 progress, including:
 - i. **Accomplishments and successes** (including number of organizations, etc., where applicable)
 - ii. Challenges related to each strategy, as applicable
 5. (Optional) An overview of CCO 2026-29 plans for each strategy
 6. **Activities and milestones** related to each strategy CCO plans to implement in 2026-29

Complete list of strategy categories (within CCO)

Please review the list of strategies below that you may have employed during 2025 and/or plan to implement during 2026-29. Check the applicable boxes for each strategy and describe your progress/plans in the sections below.

1. Care coordination and care management
2. Exchange of care information and care plans

3. Integration of disparate information and/or tools with HIE
4. Enhancements to HIE tools (e.g., adding new functionality or data sources)
5. Collaboration with external partners
6. Risk stratification and population segmentation
7. Other strategies for supporting HIE access or use

List and briefly describe tools used by CCO for care coordination and timely hospital event notifications. The use of these tools should also be included in the applicable HIE strategies below.

Point Click Care (PCC) (formerly known as Collective Medical) is a cloud-based platform that we utilize to view Hospital Event Notifications. We are also utilizing Collective Medical to view risk scores for members based on PCC's algorithm.

Activate Care is our internally utilized Care Coordination Tool. All care coordination activities are tracked and organized using this platform. We currently have our Care Coordination and Intensive Care Coordination Teams utilizing the platform. This platform allows us to create encompassing care plans for our members. Our teams can invite outside professional and community members (per the member's consent) to assist with care planning for our members.

Reliance HIE is a health information exchange platform that Advanced Health has been working with to integrate our disparate systems to increase the visibility into member health information. Currently, Reliance clinical information (such as lab values) is being integrated with Activate Care member Care Profiles.

Unite Us is a community information exchange that Advanced Health has partnered with to ensure Coos and Curry County Organizations can send close looped referrals.

Tableau is a reporting tool used internally in Advanced Health to provide risk stratification information on Advanced Health's members.

(Optional) Overview of CCO approach to using HIE for care coordination and hospital event notifications

Click or tap here to enter text.

Strategy 1 title: Enhancements to HIE tools (e.g., adding new functionality or data sources)/Integration of disparate information and/or tools with HIE
Advanced Health combined enhancements to HIE tools and Integration of disparate information and/or tools with HIE because in doing either of those two strategies, it impacts the other strategy.

Brief description: Advanced Health's goal is to integrate as many HIT tools as possible to create more of a one stop shop for retrieving information regarding members/patients.

Strategy categories: Select which categories pertain to this strategy

- ☐ 1: Care coordination ☐ 2: Exchange care information
☒ 3: Integration of disparate information ☒ 4: HIE tool enhancements
☐ 5: Partner collaboration ☐ 6: Risk stratification and population segmentation
☐ 7: Other:

Strategy status:

- ☒ Ongoing ☐ New ☐ Paused ☒ Revised ☐ Completed
☐ Ended/retired/stopped

Progress (including previous year accomplishments/successes and challenges with this strategy):

The lab data ingestion from Reliance has been useful, however the strategy has been revised to not use it to create triggers as it can overwhelm the internal process that has been created and successful.

Risk Scores from internal calculation to ActivateCare went live end of 2025 and have been very beneficial for Advanced Health's referral coordinator with assigning members to either a Traditional Healthcare Worker (THW) or a RN Care Coordinator.

Integrating member's primary care dental provider has been put on pause; Advanced Health may build an internal Tableau Dashboard for the information, however it will not be integrated into ActivateCare in 2026. There is an internal use case to determine if using this data will be beneficial.

(Optional) **Overview of 2026-29 plans for this strategy:**

Click or tap here to enter text.

Planned activities and milestones

Enter planned activities and milestones for this strategy in the table below. Please add or delete lines as needed.

Planned activities	Planned milestones
1. Integrate assigned Primary Care Provider from internal data sources into Activate Care	1. Q1 2026 Go Live

Strategy 2 title: Care Coordination and Care Management

Brief description: Care Coordination teams utilize Point Click Care (formerly known as, Collective Medical) and Activate Care to view HENs (Hospital Event Notifications).

Strategy categories: Select which categories pertain to this strategy

- ☒ 1: Care coordination ☐ 2: Exchange care information
- ☐ 3: Integration of disparate information ☐ 4: HIE tool enhancements
- ☐ 5: Partner collaboration ☐ 6: Risk stratification and population segmentation
- ☐ 7: Other:

Strategy status:

- ☒ Ongoing ☐ New ☐ Paused ☐ Revised ☐ Completed
- ☐ Ended/retired/stopped

Progress (including previous year accomplishments/successes and challenges with this strategy):

This strategy continues the exact same as previous year's strategy as it is ongoing, with one minor change. Advanced Health's ICC continues to utilize Point Click Care to complement Activate Care. For more of a direct route to hospital event information, ICC staff also utilize Collective Medical to receive hospital event notifications. Staff also write Care Guidelines, update Care Team and member contact information, to improve the likelihood of successful care coordination. The other part of this strategy was to use the HENs to trigger ICC intervention with members, however, this has been put on pause as Advanced Health ICC have been using the newly integrated risk scores in ActivateCare.

(Optional) **Overview of 2026-29 plans for this strategy:**

Planned activities and milestones

Enter planned activities and milestones for this strategy in the table below. Please add or delete lines as needed.

Planned activities	Planned milestones
1. Continued use of Collective Medical and ActivateCare to view HENs.	1. Ongoing 2026-2027

Strategy 3 title: Risk Stratification and Population Segmentation

Brief description: Advanced Health utilizes internal Analytics to build Risk Stratification following Care Coordination Risk Stratification requirements.

Strategy categories: Select which categories pertain to this strategy

- ☒1: Care coordination ☐2: Exchange care information
- ☐3: Integration of disparate information ☐4: HIE tool enhancements
- ☐5: Partner collaboration ☒6: Risk stratification and population segmentation
- ☐7: Other:

Strategy status:

- ☒Ongoing ☐New ☐Paused ☐Revised ☐Completed
- ☐Ended/retired/stopped

Progress (including previous year accomplishments/successes and challenges with this strategy):

In Q4 of 2025, internally calculated Risk Scores were successfully integrated into ActivateCare. The ICC team have been utilizing these scores to help prioritize higher risk members, and assign members based on need.

(Optional) **Overview of 2026-29 plans for this strategy:**

Advanced Health's IT and Analytics teams are working to make Member Risk Reports available to providers and outside care coordinators as needed through an externally facing Tableau Server.

Planned activities and milestones

Enter planned activities and milestones for this strategy in the table below. Please add or delete lines as needed.

Planned activities	Planned milestones
1. Disseminate Risk Reports via Tableau, including training on how to access and utilize tableau reports.	1. Q4 2026

B. Supporting increased access to and use of HIE among providers: 2025 progress and 2026-29 plans

Please describe your 2025 progress and 2026-29 plans for supporting increased access to and use of HIE for care coordination and timely hospital event notifications for **contracted physical, oral, and behavioral health providers**. Please include any work to support clinical referrals between providers. In the spaces below (in the relevant sections), please:

- List and describe specific HIE tool(s) you currently or plan to support or provide for care coordination and hospital event notifications. CCO-supported or provided HIE tools must cover both care coordination and hospital event notifications. Please include an overview of key functionalities related to care coordination.
- Report the number of physical, oral, and behavioral health organizations that have not currently adopted HIE tools for care coordination or do not currently have access to HIE for hospital event notifications using the Data Completeness Table in the OHA-provided CCO Health IT Data File (e.g.,

“Using the OHA-provided Data Completeness Table, 10 physical health, 22 oral health, and 14 behavioral health organizations lack EHR information”). CCOs are expected to use this information to inform their strategies. Where applicable, information in the CCO Data Reporting File should support descriptions of accomplishments and successes.

- (Optional) Provide an overview of CCO’s approach to supporting increased access to and/or use of HIE for care coordination and hospital event notifications among contracted physical, oral, and behavioral health providers.
- **For each strategy** CCO implemented in 2025 and/or will implement in 2026-29 to support increased access to and/or use of HIE for care coordination and hospital event notifications among contracted physical, oral, and behavioral health providers include:
 1. A title and brief description
 2. Which category(ies) pertain to each strategy
 3. Strategy status
 4. Provider types supported
 5. A description of 2025 progress, including:
 - i. **Accomplishments and successes** (including the number of organizations of each provider type that gained access to HIE for care coordination tools and HIE for hospital event notifications as a result of your support, where applicable)
 - ii. Challenges related to each strategy, as applicable
 6. (Optional) An overview of CCO 2026-29 plans for each strategy
 7. **Activities and milestones** related to each strategy CCO plans to implement in 2026-29

Complete list of strategy categories (supporting providers)

Please review the list of strategies below that you may have employed during 2025 and/or plan to implement during 2026-29. Check the applicable boxes for each strategy and describe your progress/plans in the sections below.

1. HIE training and/or technical assistance
2. Assessment/tracking of HIE adoption and capabilities
3. Outreach and education about value of HIE
4. Collaboration with network partners
5. Enhancements to HIE tools (e.g., adding new functionality or data sources)
6. Integration of disparate information and/or tools with HIE
7. Requirements in contracts/provider agreements
8. Financially support HIE tools and/or cover costs of HIE onboarding
9. Offer incentives to adopt or use HIE
10. Offer hosted EHR product (that allows for sharing information between clinics using the shared EHR and/or connection to HIE)
11. Other strategies that address requirements related to federal interoperability and patient access final rules
12. Other strategies for supporting HIE access or use

List and briefly describe tools supported or provided by CCO that facilitate care coordination and/or provide access to timely hospital event notifications.

HIE tools must cover both care coordination and hospital event notifications. The use of these tools should also be included in the applicable HIE strategies below.

Point Click Care (PCC) (formerly known as Collective Medical) is a cloud-based platform that we utilize to view Hospital Event Notifications. We are also utilizing Collective Medical to view risk scores for members based on PCC's algorithm.

Activate Care is our internally utilized Care Coordination Tool. All care coordination activities are tracked and organized using this platform. We currently have our Care Coordination and Intensive Care Coordination Teams utilizing the platform. This platform allows us to create encompassing care plans for our members. Our teams can invite outside professional and community members (per the member's consent) to assist with care planning for our members.

Reliance HIE is a health information exchange platform that Advanced Health has been working with to integrate our disparate systems to increase the visibility into member health information. Currently, Reliance clinical information (such as lab values) is being integrated with Activate Care member Care Profiles.

Unite Us is a community information exchange that Advanced Health has partnered with to ensure Coos and Curry County Organizations can send close looped referrals.

Tableau is a reporting tool used internally in Advanced Health to provide risk stratification information on Advanced Health’s members. It will be available to externally for providers and care coordinators in 2026.

(Optional) **Overview of CCO approach to supporting increased access to and/or use of HIE for care coordination and hospital event notifications among contracted providers**

Click or tap here to enter text.

Using the Data Completeness Table in the OHA-provided CCO Health IT Data Reporting File, **report on the number of contracted physical, oral, and behavioral health organizations that *do not* currently have access to an HIE tool for care coordination or for hospital event notifications:**

Physical Health Providers that do not have access to an HIE tool: 15/32 47% |

Measure	Physical Health		Behavioral Health		Oral Health	
	Org count	Rate	Org count	Rate	Org count	Rate
Number of organizations (denominator)	32		37		5	
HIE for care coordination excluding PointClickCare	17	53%	1	3%	1	20%
Hospital event notifications (PointClickCare)	12	38%	3	8%	1	20%
HIE for care coordination including PointClickCare	17	53%	3	8%	1	20%

Behavioral Health Providers that do not have access to an HIE tool: 34/37 92% |

Oral Health Providers that do not have access to an HIE tool: 4/5 80%

Strategy 1 title: Assessment/tracking of HIE adoption and capabilities/HIE training and/or technical assistance Understanding what tools healthcare organizations are currently being used or needed is important when implementing new HIE tools. By understanding what tools are already being used, Advanced Health teams can better support any technical assistance that may be needed.

Brief description: Understanding what tools healthcare organizations are currently being used or needed is important when implementing new HIE tools. By understanding what tools are already being used, Advanced Health teams can better support any technical assistance that may be needed.

Strategy categories: Select which categories pertain to this strategy

- ☐ 1: TA ☒ 2: Assessment ☒ 3: Outreach ☒ 4: Collaboration
- ☐ 5: Enhancements ☐ 6: Integration ☐ 7: Contracts ☐ 8: Financial support
- ☐ 9: Incentives ☐ 10: Hosted EHR
- ☐ 11: Other (requirements):
- ☐ 12: Other:

Strategy status:

- ☒ Ongoing ☐ New ☐ Paused ☐ Revised ☐ Completed
- ☐ Ended/retired/stopped

Provider types supported with this strategy:

- ☒ Across provider types **OR** specific to:
- ☐ Physical health ☐ Oral health ☐ Behavioral health

Progress (including previous year accomplishments/successes and challenges with this strategy):

This strategy made little movement again due to the fact that these smaller providers are 1 or 2 provider clinics, and they don't have office managers or employees answering phone calls. They have voicemails that they check weekly and try and return calls. 24 phone calls were made, and 1 was returned. However, the provider that returned the call was interested in PCC and Reliance HIE information.

Advanced Health's CITO plans to share out the OHLC Playbook when reaching out to healthcare organizations.

The amount of HIE/EHR tools that are available to healthcare organizations and our internal departments include Reliance, PointClickCare, Epic Care Everywhere, Epic CareLink, Carequality, Commonwell, eHealth Exchange, Arcadia, Any HIE, findhelp, Activate Care, and Connect Oregon.

EHRs have tools built in HIE tools that healthcare organizations sometimes prefer to use, so with Advanced Health's team understanding those tools, we can figure out how best to support our partners. With the amount of HIE tools available, blindly implementing tools without understanding the processes of our partners can be detrimental to our goals of implementing and supporting HIE tools.

As a CCO, we want to come as a collaborator, not as a group pushing software that may not be necessary to their processes. As we learn more about their processes, we are able to determine if implementation or integration is supportive of their processes.

(Optional) **Overview of 2026-29 plans for this strategy:**

Click or tap here to enter text.

Planned activities and milestones

Enter planned activities and milestones for this strategy in the table below. Please add or delete lines as needed.

Planned activities	Planned milestones
1. During the interviews about EHR (in the section above) we are also discussing their tools or need for tools to support better Care Coordination a. Integrating tools as needed by providers or organizations to provide more of a one stop shop for more complete patient information. b. Q2 – Q3 2026 focus on Behavioral Health Providers due to the growing need of Behavioral Health data to be accessed by Physical Health and vice versa. c. Q4 2026 Focus on Oral Health Providers 2. Begin using OHLC’s Health IT Playbook	1. 2026 2. Q3 – Q4 2026

Strategy 2 title: Financially supporting HIE tools, offering incentives to adopt or use HIE, and/or covering costs of HIE onboarding

Brief description: Advanced Health has budgeted to help support any one-time costs for facilities to adopt Reliance as the HIE. This is offered to all contracted healthcare facilities.

Strategy categories: Select which categories pertain to this strategy

- ☐1: TA ☐2: Assessment ☐3: Outreach ☐4: Collaboration
- ☐5: Enhancements ☐6: Integration ☐7: Contracts ☒8: Financial support
- ☐9: Incentives ☐10: Hosted EHR
- ☐11: Other (requirements):
- ☐12: Other:

Strategy status:

- ☒Ongoing ☐New ☐Paused ☐Revised ☐Completed
- ☐Ended/retired/stopped

Provider types supported with this strategy:

- ☒Across provider types **OR** specific to:
- ☐Physical health ☐Oral health ☐Behavioral health

Progress (including previous year accomplishments/successes and challenges with this strategy):

This strategy made no movement in 2025 due to internal bandwidth. Meetings with Reliance were scheduled to be picked back up Q1 2026.

(Optional) **Overview of 2026-29 plans for this strategy:**

Advanced Health would like to see 90% of members assigned to PCP organizations with data connection or utilizing the portal or both with Reliance. The goal was chosen because of the impact having access to an HIE is to a clinic. Where our members are most seen, we want the tools available.

Planned activities and milestones

Enter planned activities and milestones for this strategy in the table below. Please add or delete lines as needed.

Planned activities	Planned milestones
1. Work with contracted organizations on implementing Reliance HIE. a. This includes Reliance HIE and Advanced Health identifying which organizations would benefit the most from implementation and which organizations Advanced Health would benefit from being live with Reliance HIE. i. Reliance HIE will provide education sessions available to Advanced Health clinics, hospitals, and providers. 2. Provide financial support, regarding implementation costs (to include costs from the EHR or Reliance), for any organization that moves to integrate with Reliance	A. Q4 2026 90% Members assigned to PCP Orgs with data connection or utilizing the portal or both with Reliance (This goal is the same as 2025, as we were not able to meet it in 2025 due to internal obstacles).

Strategy 3 title: Outreach and education about the value of Hospital Event Notifications

Brief description: Advanced Health's teams provide education on utilizing HENs as needed to partners, providers, and healthcare organizations. Some EHRs have HENs (EDIE) integrated with their EHR, such as EPIC and Cerner. Advanced Health's major clinics and Hospitals utilize EPIC and Cerner EHRs.

Strategy categories: Select which categories pertain to this strategy

- ☐1: TA ☐2: Assessment ☒3: Outreach ☒4: Collaboration
- ☐5: Enhancements ☐6: Integration ☐7: Contracts ☐8: Financial support
- ☐9: Incentives ☐10: Hosted EHR
- ☐11: Other (requirements):
- ☐12: Other:

Strategy status:

- ☒Ongoing ☐New ☐Paused ☐Revised ☐Completed
- ☐Ended/retired/stopped

Provider types supported with this strategy:

- ☒Across provider types **OR** specific to:
- ☐Physical health ☐Oral health ☐Behavioral health

Progress (including previous year accomplishments/successes and challenges with this strategy):

Advanced Health has been working with Clinics and Hospital to improve access to Hospital Event Notifications (HENs) (current PCC rates: 38% physical, 8% behavioral, and 20% oral). PCC is the primary software used for clinics to access

HENs. There was minimal growth, but during the interviews it we determined clinics/providers don't understand the benefit of having these tools. Working with OHLC on the Health IT Playbook will be largely beneficial for future interviews. The obstacles for this strategy aligns with rural communities and small provider organizations not having the personnel. Advanced Health's CITO and Behavioral Health Director will be working together with the Chief Medical Officer to come up with a new strategy to get this information. Conversations with Credentialing were had in Q4 2025 to create a strategy on getting proper contacts to communicate with on these projects.

(Optional) **Overview of 2026-29 plans for this strategy:**

Click or tap here to enter text.

Planned activities and milestones

Enter planned activities and milestones for this strategy in the table below. Please add or delete lines as needed.

Planned activities	Planned milestones
1. Continued outreach and education about the value of HENs a. Using engagement reports of currently connected organizations to engage or re-engage. 2. Reach out to non-engaged Clinics to identify obstacles to utilizing PointClickCare	1. 2026-2027 2. Q2-Q4 2026 3. Q3-Q4 2026

Planned activities	Planned milestones
a. Ensuring to inform providers if there are costs, Advanced Health will work with the providers to cover and make sure they are not burdensome. 3. Advanced Health's CITO and Behavioral Health Director to work together with the CMO to identify a new strategy on get information. a. Along with credentialing to get better contact information for organizations.	

Strategy 4 title: Implementation of Interoperability

Brief description: Advanced Health is currently in the final stages of a strategic transition of its interoperability infrastructure, moving from the legacy vendor EDIFICS to 1UpHealth to better meet evolving federal standards. This transition includes the sunsetting of EDIFICS services effective April 30, 2026, and the implementation of a comprehensive FHIR-based platform through 1UpHealth. The new strategy focuses on achieving full compliance with CMS-9115-F and preparing for the January 1, 2027, requirements for CMS-0057-F, including the Prior Authorization and Provider Access APIs

Strategy categories: Select which categories pertain to this strategy

☐1: TA ☐2: Assessment ☐3: Outreach ☐4: Collaboration

☒5: Enhancements ☒6: Integration ☐7: Contracts ☐8: Financial support

☐9: Incentives ☐10: Hosted EHR

☐11: Other (requirements): [Click or tap here to enter text.](#)

☒12: Other: Integration of disparate information enhancements

Strategy status:

☒Ongoing ☒New ☐Paused ☐Revised ☐Completed

☐Ended/retired/stopped

Provider types supported with this strategy:

☒Across provider types **OR** specific to:

☐Physical health ☐Oral health ☐Behavioral health

Progress (including previous year accomplishments/successes and challenges with this strategy):

Successfully entered an agreement with 1UpHealth in late 2025 to provide CMS-9115-F and CMS-0057-F services. Automated nightly data extracts have been established using Python scripts and Windows Task Scheduler with projected 04/30/2026 go-live date. **This strategy is marked as new/ongoing as this is the first time reporting it in the HIT Roadmap, however, Advanced Health has worked with EDIFECS and now moving to 1UpHealth in 2024 and 2025.**

(Optional) **Overview of 2026-29 plans for this strategy:**

[Click or tap here to enter text.](#)

Planned activities and milestones

Enter planned activities and milestones for this strategy in the table below. Please add or delete lines as needed.

Planned activities	Planned milestones
1. Finalize 1UpHealth implementation for CMS-9115-F Patient Access.	A. Decommission EDIFECS vendor by April 30, 2026.
2. Develop and finalize inbound data transfer processes for Prior Authorization API.	B. Implement Prior Authorization API by January 1, 2027.
3. Launch Payer-to-Payer Data Exchange with explicit member opt-in.	C. Enable Payer-to-Payer Data Exchange by January 1, 2027.
4. Develop mechanism for members to opt-out of the Provider Access API.	D. Provider Access API operational by January 1, 2027.

C. HIE for care coordination barriers

Please describe any barriers that inhibited your progress to support access to and use of HIE for care coordination and/or timely hospital event notifications among your contracted providers.

The continued barriers are bandwidth (at CCO and at healthcare organizations) and understanding of HIT tools (which the playbook will hopefully help with).

D. OHA support needs

How can OHA support your efforts to support your contracted providers with access to and use of HIE for care coordination and/or hospital event notifications?

One way for OHA to support our efforts is to find funding that can be applied to CCOs to help do the work for providers/organizations. A lot of our organizations

and providers locally, don't have the bandwidth or man power to do a lot of this work. Especially in our behavioral health organizations. Those organizations are 1 or 2 people, and they are providers most of the time. They don't have front desk or technical support.

E. CCO access to and use of EHRs

Please describe CCO current or planned access to contracted provider EHRs. Please include which EHRs CCO has or plans to have access to including how CCO accesses or will access them (e.g., Epic Care Everywhere, EpicCare Link, etc.), what patient information CCO is accessing or will access and for what purpose, whether patient information is or will be exported from the EHR and imported into CCO health IT tools.

Which EHRs does CCO have or will have access to and how does or will CCO access them (e.g., Epic Care Everywhere, EpicCare Link)?

Advanced Health has access to EpicCare Link for two clinics and three hospitals, and read only access to a local clinic/hospital Cerner.

What patient information is CCO accessing or will CCO access and for what purpose?

Quality department for chart review or metric validation for Postpartum, SDOH, Language Access, and Glycemic Index metrics.

Is/will patient information being/be exported from the EHR and imported into CCO health IT tools? If so, which tool(s)?

We receive EHR data for Quality Metric reporting via a SFTP set up with 4 clinics. Internal Quality Metric Reporting is done using SQL and Tableau.

5. Health IT to support SDOH

A. CCO use of health IT to support SDOH: 2025 progress and 2026-29 plans

Please describe CCO 2025 progress and 2026-29 plans for using health IT **within your organization** to support social determinants of health (SDOH), including but not limited to screening and referrals. In the spaces below (in the relevant sections), please:

- List and describe the specific health IT tool(s) you currently use or plan to use for supporting SDOH. **For listed tools, include an explanation of their use/role in the strategy descriptions.**
- (Optional) Provide an overview of CCO's approach to using health IT within the CCO to support SDOH needs, including but not limited to screening and referrals.
- **For each strategy** CCO implemented in 2025 and/or will implement in 2026-29 for using health IT within the CCO to support SDOH, including but not limited to screening and referrals, include:
 1. Title and brief description
 2. Which category(ies) pertain to each strategy
 3. Strategy status
 4. Description of 2025 progress, including:
 - i. **Accomplishments and successes** (including number of referrals, etc., where applicable)
 - ii. Challenges related to each strategy, as applicable
 5. (Optional) Overview of CCO 2026-29 plans for each strategy

6. Activities and milestones related to each strategy CCO plans to implement in 2026-29

Complete list of strategy categories (within CCO)

Please review the list of strategies below that you may have employed during 2025 and/or plan to implement during 2026-29. Check the applicable boxes for each strategy and describe your progress/plans in the sections below.

1. Implement or use health IT tool/capability for social needs screening and referrals
2. Enhancements to CIE tools (e.g., new functionality, health-related services funds forms, screenings, data sources)
3. Integration or interoperability of health IT tools to systems that support SDOH with other tools
4. CCO leads problem solving efforts and collaboration with their partners
5. Care coordination and care management
6. Support HRSN services
7. Use data to identify members' SDOH experiences and social needs
8. Use data for risk stratification
9. Use health IT to monitor and/or manage contracts and/or programs to meet members' SDOH needs
10. Use health IT for CCO metrics related to SDOH
11. Education/training of CCO staff about the value and use of health IT to support SDOH needs
12. Participate in SDOH-focused health IT convenings, collaborative forums, and/or education (excluding CIE governance)

13. Participate in CIE governance or collaborative decision-making
14. Other strategies for adoption/use of CIE or other health IT to support SDOH needs within CCO
15. Other strategies for CCO access or use of SDOH-related data within CCO

List and briefly describe health IT tools used by CCO for supporting SDOH needs, including but not limited to screening and referrals. The use of these tools should also be included in the applicable SDOH strategies below.

Point Click Care (fka. Collective Medical) is a cloud-based platform that we utilize to view Hospital Event Notifications. We are also utilizing Point Click Care (fka. Collective Medical) to view risk scores for members based on their internally produced risk scores. **Activate Care** is our internally utilized Care Coordination Tool. We currently have our Care Coordination and Intensive Care Coordination Teams utilizing the platform. This platform allows us to create encompassing care plans for our members. Our teams can invite collaborators outside the organization to assist with care planning for our members. **Reliance HIE** is a health information exchange platform that Advanced Health has been working with to integrate our disparate systems to increase the visibility into member health information. **UniteUs** is a community information exchange that Advanced Health contracted with in 2022. This platform is utilized for sending and receiving referrals. Advanced Health utilizes UniteUs to send Social Determinants of Health (SDOH) referrals for members.

(Optional) **Overview of CCO approach to using health IT within the CCO to support SDOH needs, including but not limited to screening and referrals.**

Advanced Health promotes the use of the PRAPARE SDoH screening tool throughout the provider network for the purpose of identifying Social needs that

can be addressed by community partners. Advanced Health also promotes the reduction of over screening for SDoH by establishing workflows for community partners to see current screenings in Unite Us prior to completing a new screening and sending a SDoH Referral.

Strategy 1 title: Care coordination and care management of individual members/ Integration or interoperability of HIT systems that support SDOH with other tools

Brief description: Advanced Health currently utilizes Activate Care and UniteUs for addressing SDoH and care management for Advanced Health members

Strategy categories: Select which categories pertain to this strategy

- ☒1: Implement/use health IT ☒2: Enhancements ☐3: Integration
☐4: Collaboration ☒5: Care coordination ☒6: Support HRSN
☐7: Data to ID SDOH ☐8: Risk stratification ☒9: Manage contracts
☐10: Metrics ☐11: Education/training ☐12: Convenings
☐13: Governance ☐14: Other (adoption/use):
☐15: Other (SDOH data):

Strategy status:

- ☒Ongoing ☐New ☐Paused ☐Revised ☐Completed
☐Ended/retired/stopped

Progress (including previous year accomplishments/successes and challenges with this strategy):

Over 2025, Advanced Health continued to monitor the process of HRSN referrals using the Unite Us CIE Platform including adapting to ongoing rule changes

related to completeness of referrals and review periods. Education to current external users of the platform included these changes as well as best practices for using the CIE platform to promote closed loop referrals for social needs. Advanced Health also worked closely with Unite Us to build workflows for the upcoming Nutrition benefits expected to launch in Q2 of 2026. Advanced Health's customer service department successfully leveraged Unite Us for SDoH related referrals during the Health Risk Assessment (HRA) collection process throughout 2025, resulting in increased referrals for HRSN benefits.

(Optional) **Overview of 2026-29 plans for this strategy:**

Advanced Health plans to review existing workflows for efficiency and accuracy of data tracking. Collection of end-user feedback and technical assistance offerings to partner organizations will be ongoing. Additionally, Advanced Health plans to continue efforts to identify additional social service organizations for onboarding the platform. Additional organizations will help to make the platform value added to help with future recruitment. The Advanced Health Care Coordination team, housed within the Customer Service department plans to start accepting referrals for low to mid- level care management via Unite Us in 2026 and beyond. This is an impactful step as it increases access to care management and creates pathways for external partner organizations and members self-referrals. Advanced Health teams, in collaboration with Unite Us will work to develop a plan to ensure that this proposed referral pathway is easily identified on our website, messaged to member and partner organizations, and that internal workflows appropriately triage and route incoming referrals.

Planned activities and milestones

Enter planned activities and milestones for this strategy in the table below. Please add or delete lines as needed.

Planned activities	Planned milestones
1. Continuously onboard new Community Benefit Organizations and health care providers to the Unite Us Platform. 2. Continuously assess Unite Us provider network for gaps in services and work with community partners to identify and onboard organizations that meet the identified gaps. 3. Refine HRSN workflows for all implemented benefits in Unite Us platform. 4. Build messaging and workflows for Unite Us referrals for Advanced Health's Care Coordination team.	1. Ongoing 2026 2. Ongoing 2026 3. Q4 2026 4. Q3 2026

Strategy 2 title: Enhancements to CIE tools (e.g., adding new functionality, health-related services funds forms, screenings, data sources)

Brief description: Building custom HRSN forms in Unite Us for ease of HRSN service referrals.

Strategy categories: Select which categories pertain to this strategy

☐1: Implement/use health IT ☒2: Enhancements ☐3: Integration

☐4: Collaboration ☐5: Care coordination ☐6: Support HRSN

☐7: Data to ID SDOH ☐8: Risk stratification ☐9: Manage contracts

- ☐10: Metrics ☐11: Education/training ☐12: Convenings
- ☐13: Governance ☐14: Other (adoption/use): [Click or tap here to enter text.](#)
- ☐15: Other (SDOH data): [Click or tap here to enter text.](#)

Strategy status:

- ☒Ongoing ☐New ☐Paused ☐Revised ☐Completed
- ☐Ended/retired/stopped

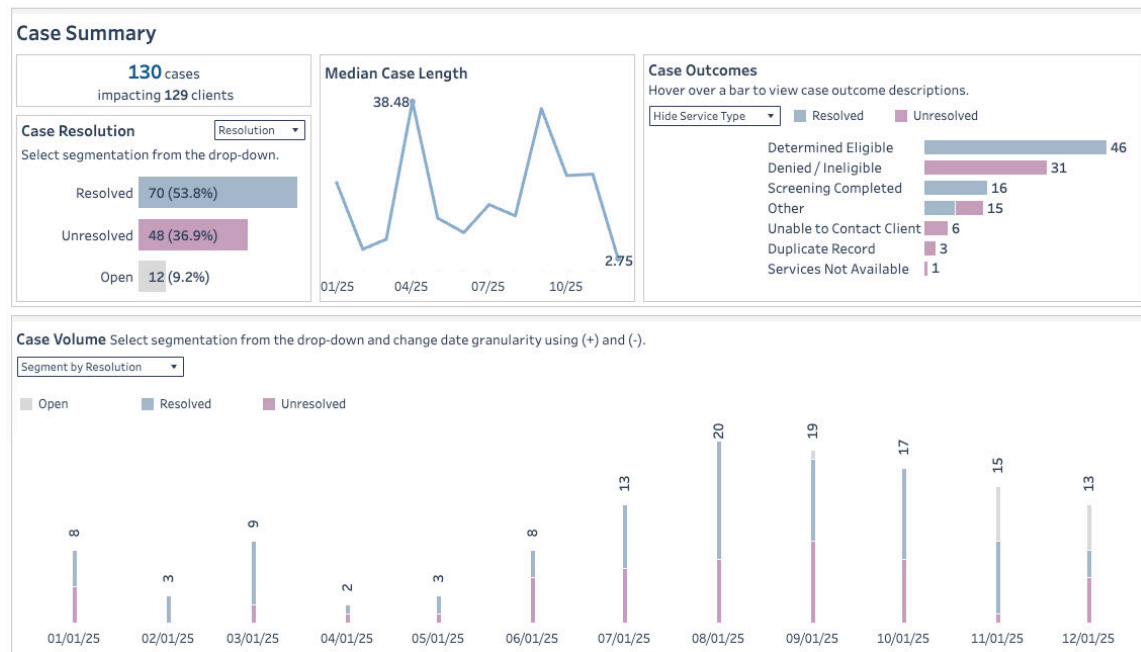
Progress (including previous year accomplishments/successes and challenges with this strategy):

In anticipation of the HRSN Nutrition benefit launch in early 2025, Advanced Health worked with Unite Us to ensure that the USDA six item short form screening for food insecurity tool was available for referring organizations to complete along with their HRSN Nutrition referral.

Member Self-Referrals:

Cases Activity

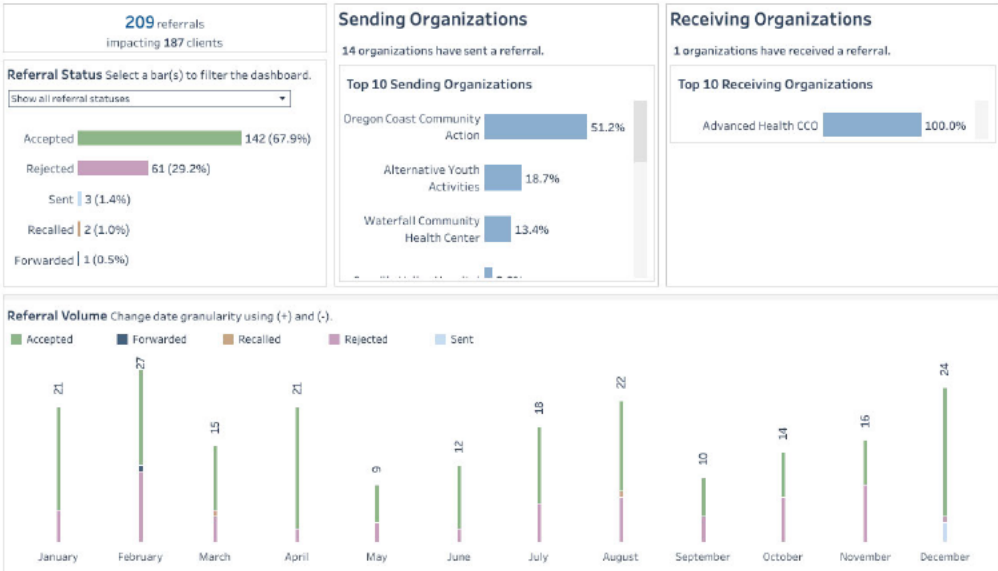
Monitor the cases within your network.



Network Partner Referrals to Advanced Health:

Referrals

Learn more about the referral activities between network organizations.



(Optional) **Overview of 2026-29 plans for this strategy:**

Advanced Health plans to monitor the use of the custom HRSN referral form for completeness and identify areas for improvement in education or information collected. Advanced Health plans to reconcile reporting from Unite Us against approved referrals to confirm complete records for each authorized HRSN service.

Planned activities and milestones

Enter planned activities and milestones for this strategy in the table below. Please add or delete lines as needed.

Planned activities	Planned milestones
1. Continue discussions with UniteUs on building an	1. TBD as Advanced Health is restructuring in Q3 2026 2. Ongoing throughout 2026

Planned activities	Planned milestones
innovative way to capture time spent for each member on Outreach & Engagement efforts 2. Monitor completeness of custom HRSN referral form in Unite Us. 3. Audit of HRSN required documentation for referrals sent using Unite Us platform	3. Ongoing throughout 2026

Strategy 3 title: Engage in governance of CIE

Brief description: Advanced Health's Chief Information and Technology Officer (CITO) participates in many workgroups regarding CIE

Strategy categories: Select which categories pertain to this strategy

- ☐1: Implement/use health IT ☐2: Enhancements ☐3: Integration
☐4: Collaboration ☐5: Care coordination ☐6: Support HRSN
☐7: Data to ID SDOH ☐8: Risk stratification ☐9: Manage contracts
☐10: Metrics ☐11: Education/training ☐12: Convenings
☒13: Governance ☐14: Other (adoption/use):
☐15: Other (SDOH data):

Strategy status:

- ☒Ongoing ☐New ☐Paused ☐Revised ☐Completed

☐ Ended/retired/stopped

Progress (including previous year accomplishments/successes and challenges with this strategy):

Advanced Health's CITO attends HITOC meetings as possible based on scheduling. It has been a great resource to stay on top of other CIE projects in Oregon.

(Optional) **Overview of 2026-29 plans for this strategy:**

Click or tap here to enter text.

Planned activities and milestones

Enter planned activities and milestones for this strategy in the table below. Please add or delete lines as needed.

Planned activities	Planned milestones
1. CITO to continue participate in HITOC	A. Year Long, 2026
2. CITO to participate in any future CIE workgroups either as a member (if approved) or as public	B. Year Long, 2026

B. CCO support of providers with using health IT to support SDOH: 2025 progress and 2026-29 plans

Please describe your 2025 progress and 2026-29 plans for **supporting** community-based organizations (CBOs), social service providers in your community, and **contracted physical, oral and behavioral health providers** with using health IT to support SDOH, including but not limited to screening and referrals. In the spaces below (in the relevant sections), please:

- List and describe the specific tool(s) you currently or plan to support or provide to your contracted physical, oral, and behavioral health providers, as well as social services and CBOs. **For listed tools, include a description of their use/role in the strategy descriptions.**
- (Optional) Provide an overview of CCO's approach to supporting contracted physical, oral, and behavioral health providers, as well as social services and CBOs with using health IT to support social needs, including but not limited to social needs screening and referrals.
- **For each strategy** CCO implemented in 2025 and/or will implement in 2026-29 to support contracted physical, oral, and behavioral health providers, as well as social services and CBOs with using health IT to support social needs, including but not limited to social needs screening and referrals, include:
 1. Title and brief description
 2. Which category(ies) pertain to each strategy
 3. Strategy status
 4. Provider types supported
 5. Description of 2025 progress, including:
 - i. **Accomplishments and successes** (including the number of organizations of each provider type that gained access to health IT to support SDOH needs as a result of your support, where applicable)
 - ii. Challenges related to each strategy, as applicable
 - iii. How the strategy supports each type of provider selected
 6. (Optional) Overview of CCO 2026-29 plans for each strategy
 7. **Activities and milestones** related to each strategy CCO plans to implement in 2026-29

Complete list of strategy categories (supporting providers)

Please review the list of strategies below that you may have employed during 2025 and/or plan to implement during 2026-29. Check the applicable boxes for each strategy and describe your progress/plans in the sections below.

1. Sponsor CIE for the community
2. Enhancements to CIE tools (e.g., new functionality, health-related services funds forms, screenings, data sources)
3. Integration or interoperability of health IT tools to support SDOH
4. Training and/or technical assistance
5. Support referrals between CBOs and clinical providers
6. Support HRSN service providers
7. Financial support to adopt or use health IT that supports SDOH (e.g., incentives, grants)
8. Support payments to CBOs through health IT
9. Requirements to use health IT in contracts/provider agreements
10. Track or assess CIE/SDOH tool adoption and use
11. Outreach and education about the value of health IT to support SDOH needs
12. Support participation in SDOH-focused health IT convenings, collaborative forums and/or education (excluding CIE governance)
13. Support participation in CIE governance or collaborative decision-making
14. Other strategies for supporting adoption of CIE or other health IT to support SDOH needs
15. Other strategies for supporting access or use of SDOH-related data

List and briefly describe health IT tools supported or provided by CCO that support SDOH needs, including but not limited to screening and referrals.
The use of these tools should also be included in the applicable SDOH strategies below.

Activate Care is our internally utilized Care Coordination Tool. We currently have our Care Coordination and Intensive Care Coordination Teams utilizing the platform. This platform allows us to create encompassing care plans for our members. Our teams can invite collaborators outside the organization to assist with care planning for our members. **Reliance HIE** is a health information exchange platform that Advanced Health has been working with to integrate our disparate systems to increase the visibility into member health information. **Unite Us** is a community information exchange that Advanced Health contracted with in 2022 and was fully implemented in Q1 2023. This platform is utilized to conduct SDOH screenings, sending and receiving appropriate referrals.

(Optional) **Overview of CCO approach to supporting contracted physical, oral, and behavioral health providers, as well as social services and CBOs with using health IT to support social needs, including but not limited to social needs screening and referrals.**

Click or tap here to enter text.

Strategy 1 title: Sponsor CIE for the community

Brief description: Advanced Health has contracted with UniteUs in a way that supports all our contracted healthcare facilities and Community Based Organizations to utilize UniteUs for no cost to the facility.

Strategy categories: Select which categories pertain to this strategy

☒ 1: Sponsor CIE ☐ 2: Enhancements ☐ 3: Integration ☐ 4: TA/training

- ☐5: Clinical/CBO referrals ☐6: Support HRSN ☒7: Financial support
- ☐8: Payments ☐9: Contract requirements ☐10: Track use
- ☐11: Outreach/education ☐12: Convenings ☐13: Governance
- ☐14: Other (adoption/use): [Click or tap here to enter text.](#)
- ☐15: Other (SDOH data): [Click or tap here to enter text.](#)

Strategy status:

- ☒Ongoing ☐New ☐Paused ☐Revised ☐Completed
- ☐Ended/retired/stopped

Provider types supported with this strategy:

- ☒Across provider types **OR** specific to:
- ☐Physical health ☐Oral health ☐Behavioral health ☐CBOs
- ☐Social services

Progress (including previous year accomplishments/successes and challenges with this strategy):

Advanced Health continues to work with Unite Us to onboard key organizations in our service area to manage SDOH and HRSN referrals. Advanced Health continues efforts to onboard new organizations to the Unite Us platform for SDOH and Health Related Social Needs referrals. Advanced Health has a team that works with UniteUs in monthly meetings to identify potential use cases for UniteUs and organizations that are not actively utilizing UniteUs. UniteUs also communicates back with Advanced Health on any organizations that are not actively utilizing UniteUs or not engaging back on adoption.

Assess the footprint of the network across geographies and service types.

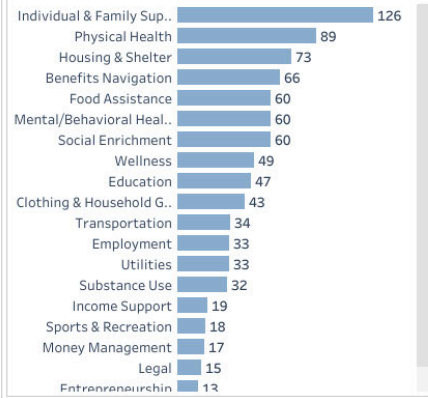
Assess the footprint of the network across geographies and service types.



Service Type Mix by Volume of Organizations

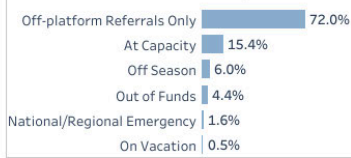
Click (+) service types below to expand service subtypes.

Organizations



Programs Not Receiving Referrals by Reason

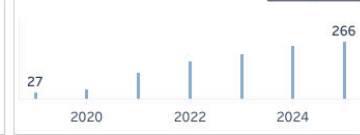
Select a bar to filter the dashboard by reason.



Organizations Added

Select a date range and level of granularity.

07/05/13 12/31/25 Annually

Organization Locations by States

Click or tap here to enter text.

Enter planned activities and milestones for this strategy in the table below. Please add or delete lines as needed.

Planned activities	Planned milestones
1. Monitor Unite Us provider network for adoption, identify gaps in services and collaborate with Unite Us on outreach efforts to onboard new organizations to fill the gap (continuation of 2023's comment on Implementation plan of onboarding CBOs).	A. 2026

Strategy 2 title: Support sending of referrals to clinical providers (i.e., to physical health, oral health, and behavioral health providers)

Brief description: Advanced Health has adopted Unite Us as the community information exchange. This is going to provide a platform for clinical providers, community-based organizations, and the CCO to better meet member needs.

Strategy categories: Select which categories pertain to this strategy

- ☐1: Sponsor CIE ☐2: Enhancements ☐3: Integration ☐4: TA/training
☒5: Clinical/CBO referrals ☐6: Support HRSN ☐7: Financial support
☐8: Payments ☐9: Contract requirements ☐10: Track use
☐11: Outreach/education ☐12: Convenings ☐13: Governance
☐14: Other (adoption/use):
☐15: Other (SDOH data):

Strategy status:

- ☐Ongoing ☐New ☒Paused ☐Revised ☐Completed
☐Ended/retired/stopped

Provider types supported with this strategy:

☒ Across provider types **OR** specific to:

☐ Physical health

☐ Oral health

☐ Behavioral health

☐ CBOs

☐ Social services

Progress (including previous year accomplishments/successes and challenges with this strategy):

****Sensitive**** The use of UniteUs by clinical providers to refer patients to community-based organizations (CBOs) was discussed; however, several challenges emerged. A primary barrier was that many clinical providers already use Electronic Health Record (EHR) systems with built-in referral capabilities, making the adoption of a separate referral platform like UniteUs operationally inefficient and redundant. It was paused in 2026, to resume in 2026.

(Optional) **Overview of 2026-29 plans for this strategy:**

There is an EPIC integration for OCHIN, St Charles, and Providence currently with UniteUs that will be investigated in 2026 to identify costs for integration for local clinics that are hosted by the above vendors.

Planned activities and milestones

Enter planned activities and milestones for this strategy in the table below. Please add or delete lines as needed.

Planned activities	Planned milestones
1. Investigate EPIC integration with UniteUs for local clinics	A. Q3-Q4 2026

Strategy 3 title: Outreach and education about the value of HIT adoption/use to support SDOH needs/ End user feedback mechanism and monitoring of the Unite Us network for gaps.

Brief description: Advanced Health's behavioral director, ICC team, CITO, and Director of Social Determinants of Health continue collaboration with Unite Us on education sessions on how to best utilize Unite Us (for providers and CBOs) to screen, identify and address SDOH.

Strategy categories: Select which categories pertain to this strategy

- ☐1: Sponsor CIE ☐2: Enhancements ☐3: Integration ☒4: TA/training
☐5: Clinical/CBO referrals ☐6: Support HRSN ☐7: Financial support
☐8: Payments ☐9: Contract requirements ☐10: Track use
☒11: Outreach/education ☐12: Convenings ☐13: Governance
☐14: Other (adoption/use):
☐15: Other (SDOH data):

Strategy status:

- ☒Ongoing ☐New ☐Paused ☐Revised ☐Completed
☐Ended/retired/stopped

Provider types supported with this strategy:

- ☒Across provider types **OR** specific to:
☐Physical health ☐Oral health ☐Behavioral health ☐CBOs
☐Social services

Progress (including previous year accomplishments/successes and challenges with this strategy):

Advanced Health will continue to collaborate with end users and Unite Us for optimization of the platform amongst our provider network. Ongoing efforts to train new and existing Unite Us users will continue. This is possible due to the relationship Advanced Health’s Director of Social Determinants of Health has built with the CBOs and UniteUs. Advanced Health has monthly meetings with UniteUs to identify any usage issues or training support needed. UniteUs and Advanced Health’s Director of Social Determinants of Health work to identify any new partners, new workflows, opportunities in the community and/or strategizing on how to get more members screened from the community for SDOH.

(Optional) **Overview of 2026-29 plans for this strategy:**

Click or tap here to enter text.

Planned activities and milestones

Enter planned activities and milestones for this strategy in the table below. Please add or delete lines as needed.

Planned activities	Planned milestones
1. UniteUs and Advanced Health are working collaboratively on ensuring clinical providers have access to training and education on UniteUs and how it can benefit the organization. 2. Continued collaboration for engagement and training for the Unite Us platform. 3. Continue end user feedback mechanism to fine tune the platform when possible. 4. Identify unmet needs and engage organization who can meet those needs to join the Untie Us network of providers.	1. Monthly meetings with UniteUs to identify what organizations may need the extra support throughout 2026 2. Monthly meetings with UniteUs throughout 2026 3. Utilizing check-ins with CBOs done by various departments such as Customer Service, ICC, and Director of Social Determinants of Health 2026 4. Monthly meetings with UniteUs to continue throughout 2026

C. Exceptions process if CCO requires CIE

Does your CCO require HRSN service providers to use CIE for HRSN closed loop referrals? If “Yes,” you are **required** to complete the rest of this section. If “No,” please continue to SDOH section D: Health IT to support SDOH barriers.

☐ Yes

☒ No

Describe your CCO’s exceptions process, including:

1. How this process is communicated to HRSN providers
3. How HRSN providers request an exception to your CCO’s CIE requirement
4. Your CCO’s process for how those requests are reviewed, decided and communicated to the provider

Click or tap here to enter text.

CCO exceptions requests from HRSN service providers

On the following page, use the table provided **OR** your own table formatted with the same columns to report exceptions requests. You may remove rows or add additional rows as needed. Responses to this question must include:

1. Provider name
2. NPI/Provider ID #
3. Date of request
4. Reason for request
5. Request decision and reason for decision if denied
6. Date decision was communicated to HRSN provider

Provider name	NPI/Provider ID #	Date of request	Reason for request	Request decision and reason for decision if denied	Date decision was communicated to HRSN provider
Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.
Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.	Click or tap here to enter text.

D. Health IT to support SDOH barriers

Please describe any barriers that inhibited your progress to support contracted physical, oral, and behavioral health providers, as well as social services and CBOs with using health IT to support SDOH needs, including but not limited to screening and referrals.

How to support clinics and providers to use CIE or integrating EHRs with CIE. And a 2026 update, Advanced Health will be restructuring some personnel internally.

E. OHA support needs

How can OHA support your efforts in using and supporting the use of health IT to support SDOH needs, including social needs screening and referrals?

Financial support to CCOs to support organizations to use external tools from the EHR. Support of the OHLC's HIT Playbook – making it available from OHA standpoint would help create a solid foundation that is the same across the board.

6. (Optional) Other health IT questions

The following questions are optional to answer. They are intended to help OHA assess how we can better support the health IT efforts.

- A. Describe CCO health IT tools and efforts that support **patient engagement**, both within the CCO and with contracted providers.

Click or tap here to enter text.

- B. **How can OHA support your efforts** in accomplishing your Health IT Roadmap goals?

Click or tap here to enter text.

- C. What have been your organization's **biggest challenges in pursuing health IT strategies**? What can OHA do to better support you?

Click or tap here to enter text.

- D. How have your organization's health IT strategies supported **reducing health inequities**? What can OHA do to better support you? If not already described above, how does your organization use REALD/SOGI data to support reducing health inequities? What has your organization learned about the impact on outcomes?

Click or tap here to enter text.

You can get this document in other languages, large print, braille or a format you prefer free of charge. Contact the Health IT Policy & Program Unit at CCO.HealthIT@odhsoha.oregon.gov or 503-373-7859. We accept all relay calls.

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