

2025 CCO Health Information Technology (HIT) Roadmap

Contract or rule citation	Exhibit J, Section 2
Deliverable due date	April 30, 2025
Submit deliverable via:	CCO Contract Deliverables Portal

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CCO: Advanced Health

Date: 4/3/2025

Health IT Partnership

Please attest to the following items.

a.	⊠ Yes □ No	Active, signed HIT Commons MOU and adheres to the terms.				
b.	⊠ Yes □ No	Paid the annual HIT Commons assessments subject to the payment terms of the HIT Commons MOU.				
c.	☐ Yes ☐ No ☑ N/A	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)				
d.	⊠ Yes □ No	Participated in an OHA HITAG meeting, at least once during the previous Contract year.				

1. CCO Data for 2025 SDOH Social Needs Screening and Referral Measure

CCO must submit information collected from the following 2025 Social Determinants of Health: Social Needs Screening and Referral Measure, Component 1 elements. Please select the checkboxes indicating whether you have included the data/information with your Health IT Roadmap submission:

a.	⊠ Yes □ No	Element 3 : Systematic assessment of whether and where screenings are occurring by CCO and provider organizations, including whether organizations are screening members for (1) housing insecurity, (2) food insecurity, and (3) transportation needs.
b.	⊠ Yes □ No	Elements 6 and 7 : Identification of screening tools or screening questions in use by CCO and provider organizations, including available languages and whether tools and questions are OHA-approved or exempted.
c.	⊠ Yes □ No	Element 13 : Environmental scan of data systems used in the CCO's service area to collect information about members' social needs, refer members to community resources, and exchange social needs data.

2. (Optional) Overview of CCO Health IT Approach

This will be read by all reviewers. This section is optional but can be helpful to avoid repetitive descriptions in different sections. 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).

Advanced Health's primary focus in its Health Information Technology (HIT) strategy is to identify key points of care where member engagement is highest. In response to organizational shifts in 2024, including several entities exploring new EHR vendors, Advanced Health is actively monitoring these transitions. A major priority has also been the comprehensive collection and analysis of EHR system data from all behavioral health providers and clinics within the network.

3. Support for EHR Adoption, Use, and Optimization

A. Support for EHR Adoption, Use, and Optimization: 2024 Progress and 2025-26 Plans

Please describe your 2024 progress and 2025-26 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.
- Include plans for collecting missing EHR information via CCO already-existing processes (e.g., contracting, credentialling, Letters of Interest).
- Select the boxes that represent strategies pertaining to your 2024 progress and 2025-26 plans.
- 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 2024 and/or will implement in 2025-26 to support EHR adoption, use, and optimization among contracted physical, oral, and behavioral health providers in support of care coordination include:
 - A title and brief description
 - Which category(ies) pertain to each strategy
 - The strategy status
 - Provider types supported
 - A description of 2024 progress, including:
 - accomplishments and successes (including number of organizations, etc., where applicable)
 - challenges related to each strategy, as applicable

Note: Where applicable, information in the CCO Health IT Data Reporting File should support descriptions of accomplishments and successes.

- o (Optional) An overview of CCO 2025-26 plans for each strategy
- Activities and milestones related to each strategy CCO plans to implement in 2025-26

Notes:

- Four strategy sections have been provided. <u>Please copy and paste additional strategy sections as needed</u>. 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 continuing a strategy from prior years, please continue to report and indicate "Ongoing" or "Revised" as appropriate.
- If CCO is not pursuing a strategy beyond 2024, note 'N/A' in Planned Activities and Planned milestones sections.
- If CCO is implementing a strategy beginning in 2025, please indicate 'N/A' in the progress section for that strategy.
- If preferred, you may choose to submit a separate document detailing each strategy's activities and milestones.

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: 14%								
Behavioral Health: 69%								
Oral Hea	Oral Health: 0%							
Briefly d	lescribe	e CCO plans for collecting missing	EHR info	rmatio	n via CCO existing processes			
Advance informati sent and was previould be	In 2024, emails, phone calls and physical visits to any healthcare organization that manages more than 20% of Advanced Health members to gain a stronger HIT relationship. Phone calls provided the least amount of information, it was hard to get connected to the right person. Email had the most success rate, 16 emails were sent and 10 were replied back, with the focus on where Advanced Health getting EHR and HIT information that was previously unknown. 2 of which were interested in getting more information on what was available and how it could benefit them. In 2025, the focus will be on getting behavioral health provider EHR information. This will be done in collaboration with Advanced Health's behavioral health team. The focus solely on behavioral health providers is decided on the							
Strategy Using the	catego e boxes	ory checkboxes		•	luring 2024 and plan to implement during			
Progress			Progress					
	\boxtimes	EHR training and/or technical assistance	\boxtimes	\boxtimes	7. Requirements in contracts/provider agreements			
\boxtimes		Assessment/tracking of EHR adoption and capabilities			8. Leveraging HIE programs and tools in a way that promotes EHR adoption			
\boxtimes		3. Outreach and education about the value of EHR adoption/use		\boxtimes	9. Offer hosted EHR product			
	\boxtimes	Collaboration with network partners	\boxtimes	\boxtimes	10. Assist with EHR selection			
		5. Incentives to adopt and/or use EHR			11. Support EHR optimization			
		Financial support for EHR implementation or maintenance		\boxtimes	12. Other strategies for supporting EHR adoption (please list here): Continue to understand EHR improvement plans across Coos and Curry Counties			
		view of CCO approach to support sical, oral, and behavioral health						
Strategy 1 title: Assessment/tracking of EHR adoption and capabilities 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 integrating the said tool the healthcare organization utilizes. Strategy categories: Select which category(ies) pertain to this strategy								
☐ 1: TA	⊠ 2 :	Assessment ☐ 3: Outreach ☐ 4: 0	Collaborati	on 🗆				

Strategy status: ☑ Ongoing ☐ New ☐ Paused ☐ Revised ☐ Completed	d □ 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 <u>accomplishments/successes</u> and <u>challenges</u> 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. Advanced Health does have EHR information for 100% of PCPCH, FQHC, and RHC. 89% of members assigned to PCP Organizations have a certified, documented EHR – this number is caused by a clinic being in the exempt column. 16 provider facilities were reached out to, with 10 provider facilities responding. Many providers were interested in learning more about HIT tools – will continue educating and outreaching on information						
through 2025.						
(Optional) Overview of 2025-26 plans for this strategy:						
Planned Activities	Planned Milestones					
Conduct in-person/virtual meetings/interviews with	1. Q2 – Q4 2025					
contracted behavioral healthcare organizations to	2. Q3-Q4 2025					
understand gaps and challenges with their current EHR systems. There are a total of 27 EHR status unknown in	3. Q3 2025					
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.						
Contact the 2 unknown vendor oral health providers to						
gain information as to what EHR they are utilizing.						
gair information as to what Erric they are daileing.						
Strategy 2 title: Understand EHR plans across Coos and Curry/ C	outreach and education about the value of					
EHR adoption/use						
Brief description: Advanced Health has many different provider typ	es, and each type has unique needs in an					
EHR. While we have a high adoption rate of EHRs, there are always						
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 category(ies) pertain to this strategy						
☐ 1: TA ☐ 2: Assessment ☐ 3: Outreach ☐ 4: Collaboration	• • • • • • • • • • • • • • • • • • • •					
☐ 7: Contracts ☐ 8: Leverage HIE ☐ 9: Hosted EHR ☐ 10: EHR se	election ☐ 11: Optimization ☐ 12: Other:					
Strategy status:						

Revised							
Progress (including previous year accomplishments/successes and challenges with this strategy): 2 local hospitals moved to EPIC, one in Coos and one in Curry County. Advanced Health's CITO continued to reach out via email, in person meetings, and phone calls. Coptional) Overview of 2025-26 plans for this strategy: Planned Activities 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 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 Strategy categories: Select which category(les) 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:	□ Ongoing □ New □ Paused □ Revised □ Completed □ Ended/retired/stopped						
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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 2025-26 plans for this strategy:
Advanced Health continues to offer funding opportunities

Planned Activities

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.

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. 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?

5. 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: 2024 Progress & 2025-26 Plans

Please describe your 2024 progress and 2025-26 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:

- 1. Select the boxes that represent strategies pertaining to your 2024 progress and 2025-26 plans.
- 2. 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.
- <u>For each strategy</u> CCO implemented in 2024 and/or will implement in 2025-26 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. Provider types supported
 - 5. A description of 2024 progress, including:
 - i. <u>accomplishments and successes</u> (including number of organizations, etc., where applicable)
 - ii. challenges related to each strategy, as applicable
 - 6. (Optional) An overview of CCO 2025-26 plans for each strategy
 - 7. Activities and milestones related to each strategy CCO plans to implement in 2025-26

Notes:

- Four strategy sections have been provided. Please copy and paste additional strategy sections as needed. 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 continuing a strategy from prior years, please continue to report and indicate "Ongoing" or "Revised" as appropriate.
- If CCO is not pursuing a strategy beyond 2024, note 'N/A' in Planned Activities and Planned milestones sections.
- If CCO is implementing a strategy beginning in 2025, please indicate 'N/A' in the progress section for that strategy.
- If preferred, you may choose to submit a separate document detailing each strategy's activities and milestones.

Strategy category checkboxes (within CCO)

Using the boxes below, please select which strategies you employed during 2024 and plan to implement during 2025-26. Elaborate on each strategy and your progress/plans in the sections below.

Progress	Plans		Progress	Plans	
	\boxtimes	Care coordination and care management	\boxtimes	\boxtimes	4. Enhancements to HIE tools (e.g., adding new functionality or data sources
	\boxtimes	Exchange of care information and care plans	\boxtimes	\boxtimes	5. Collaboration with external partners
	\boxtimes	3. Integration of disparate information and/or tools with HIE		\boxtimes	Risk stratification and population segmentation

			7. Other strategies for supporting HIE access or use (please list here):			
List and briefly describe tools used by CCC) for care coord	lination a	and timely hospital event notifications			
Point Click Care (PCC) (formerly known as C Hospital Event Notifications. We are also utilizing PCC's algorithm.						
Activate Care is our internally utilized Care Coorganized using this platform. We currently have utilizing the platform. This platform allows us to invite outside professional and community merour members.	ve our Care Coo o create encomp	rdination assing ca	and Intensive Care Coordination Teams are plans for our members. Our teams can			
Reliance HIE is a health information exchange our disparate systems to increase the visibility information (such as lab values) is being integral.	into member he	alth inforr	mation. Currently, Reliance clinical			
Unite Us is a community information exchange Curry County Organizations can send close lo		Health ha	as partnered with to ensure Coos and			
Tableau is a reporting tool used internally in A Advanced Health's members.	dvanced Health	to provide	e risk stratification information on			
(Optional) Overview of CCO Approach to us	ing HIE for care	coordin	ation and hospital event notifications			
Strategy 1 title: Enhancements to HIE tools (edisparate information and/or tools with HIE *Ad Integration of disparate information and/or tool impacts the other strategy.*	dvanced Health	combined	enhancements to HIE tools and			
Brief description: Advanced Health's goal is to stop shop for retrieving information regarding r	_	•	ols as possible to create more of a one			
Strategy categories: Select which category(is						
☐ 1: Care Coordination ☐ 2: Exchange of			Integration of disparate information			
	aboration 🗌 6: F	Risk stratif	ication & population segmentation			
☐ 7: Other:						
Strategy status:		-4-4	7 Funda d/astina d/atau na ad			
	•		Ended/retired/stopped			
One major plan for 2024 was to enhance the conditional Advanced Health is going to work with Activate system.	are plans in Acti	vate Care	e. There are a few diverse ways that			
2024 the member enrollment and lab data inge 2024 due to technical difficulties on Activate C		n 2024. T	his changed from going live in 2023 to			
In 2024, it was discovered that a few of our da Reliance, and the data feed owners have beer active. This crosses over into 2025.						
Optional) Overview of 2025-26 plans for this strategy:						

Adding another data feed planned is to integrate the assigned Primary Care Provider from internal data sources (Quantum Choice) into Activate Care. Advanced Health is working with Advantage Dental to integrate care team data such as the member's primary dental provider (PDP) and dental care coordinator into each member's Care Profile. Utilize the lab data ingestion from Reliance to create triggers in ActivateCare. This has been a goal for a few years, the integration with this data went live in 2024, however was not consistent as there were some issues with ingesting the data. These have been worked out, and ICC is working on building internal processes to be able to digest the information the platforms can assist. Integrate Risk Score from internal calculation to ActivateCare to trigger ICC Intervention. Currently ICC can view Risk Scores built in internal Tableau Dashboard built by internal Analytics and then cross reference ActivateCare. Conversation with ActivateCare to integrate just the risk score and date of the risk score into the member care profiles. Planned Activities Planned Milestones 1. Utilize results from Reliance to trigger events 1. Q4 2025 for care coordination events for Intensive Care 2. Q1 2026 Go Live Coordination team in Activate Care Q1 2026 Go Live 2. Integrate Advantage Dental Data into Activate Care to enhance the care plan 3. Integrate assigned Primary Care Provider from internal data sources into Activate Care 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 category(ies) 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 & 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): 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 likely hood of successful care coordination. (Optional) Overview of 2025-26 plans for this strategy: Utilize the ADT feed from PCC to ActivateCare to trigger ICC intervention. Planned Activities **Planned Milestones** 1. Continued use of Collective Medical and 1. Ongoing 2025-2026 2. Q4 2025 - Q1 2026 ActivateCare to view HENs. 2. Utilize HENs to trigger ICC intervention with members in ActivateCare 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 category(ies) 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 & population segmentation

□ 7: Other:								
Strategy status:								
☑ Ongoing ☐ New ☐ Paused ☒ Revised ☐ Completed ☐ Ended/retired/stopped								
Progress (including previous year accomplishments/suc	• • • • • • • • • • • • • • • • • • • •							
Advanced Health reviewed multiple platforms that can pre-	ovide Risk Stratification based off the rules listed in the							
Care Coordination requirement, and after evaluation and								
Analytics Team could take the data sources and create the	•							
(Optional) Overview of 2025-26 plans for this strategy								
Build Risk reporting in external facing Tableau for Clinics	and Providers to use – go live towards end of 2025 and							
training in 2026.								
Integrate the internally created Risk Scores with ActivateCare to populate directly on each member's care profile. By integrating this information, the ICC team will have more of a fully encompassed care profile and will assist them in closing gaps.								
Planned Activities Planned Milestones								
 Disseminate Risk Reports via Tableau, 	1. Q4 2025							
including training on how to access and utilize	2. Q4 2025							
tableau reports.								
Integrate Risk Stratification with ActivateCare								
	1							

B. Supporting Increased Access to and Use of HIE Among Providers: 2024 Progress & 2025-26 Plans

Please describe your 2024 progress and 2025-26 plans for supporting increased access to and use of HIE for care coordination and timely hospital event notifications for <u>contracted physical</u>, <u>oral</u>, <u>and behavioral health providers</u>. Please include any work to support clinical referrals between providers. In the spaces below (in the relevant sections), please:

- Select the boxes that represent strategies pertaining to your 2024 progress and 2025-26 plans.
- 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 OHAprovided 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.
- (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 2024 and/or will implement in 2025-26 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:
 - a. A title and brief description
 - b. Which category(ies) pertain to each strategy
 - c. Strategy status
 - d. Provider types supported
 - e. A description of 2024 progress, including:
 - i. <u>accomplishments and successes</u> (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

Note: Where applicable, information in the CCO Health IT Data Reporting File should support descriptions of accomplishments and successes.

- f. (Optional) An overview of CCO 2025-26 plans for each strategy
- g. Activities and milestones related to each strategy CCO plans to implement in 2025-26

Notes:

- Four strategy sections have been provided. <u>Please copy and paste additional strategy sections as needed</u>. 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 continuing a strategy from prior years, please continue to report and indicate "Ongoing" or "Revised" as appropriate.
- If CCO is not pursuing a strategy beyond 2024, note 'N/A' in Planned Activities and Planned milestones sections.
- If CCO is implementing a strategy beginning in 2025, please indicate 'N/A' in the progress section for that strategy.
- If preferred, you may choose to submit a separate document detailing each strategy's activities and milestones.

Strategy category checkboxes (supporting providers)

Using the boxes below, please select which strategies you employed during 2024 and plan to implement during 2025-26. Elaborate on each strategy and your progress/plans in the sections below.

Progress	Plans		Progress	Plans	
	\boxtimes	HIE training and/or technical assistance			6. Integration of disparate information and/or tools with HIE
	\boxtimes	Assessment/tracking of HIE adoption and capabilities			7. Requirements in contracts / provider agreements
		Outreach and education about value of HIE			Financially support HIE tools and/or cover costs of HIE onboarding
\boxtimes	\boxtimes	Collaboration with network partners			9. Offer incentives to adopt or use HIE
		5. Enhancements to HIE tools (e.g., adding new functionality or data sources)			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 repatient access final rules (please list	•	nts relate	d to federal interoperability and
		12. Other strategies for supporting	HIE acce	ss or use	(please list here):

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.

(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

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:

Measure	Physical Health		Behavioral Health		Oral Health		
	Org count	Rate	Org count	Rate	Org count	Rate	
Number of organizations (denominator)	2	28		39		5	
HIE for care coordination excluding PointClickCare	12	43%	38	97%	4	80%	
Hospital event notifications (PointClickCare)	17	61%	36	92%	4	80%	
HIE for care coordination including PointClickCare	12	43%	36	92%	4	80%	

Strategy 1 title: Assessment/tracking of HIE adoption and capabilities/HIE training and/or technical assistance 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 category(ies) 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 last year, however Advanced Health gained knowledge on the interviews that were completed. 10 behavioral health providers were reached out to during 2024, 5 behavioral health providers responded and participated in an interview/conversation. They are small 1 or 2 provider clinics, that don't have the technical expertise available.	
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□ 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 last year, however Advanced Health gained knowledge on the interviews that were completed. 10 behavioral health providers were reached out to during 2024, 5 behavioral health providers responded and participated in an interview/conversation. They are small 1 or 2 provider clinics, that don't have	important when implementing new HIE tools. By understanding what tools are already being used, Advanced
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Progress (including previous year <u>accomplishments/successes</u> and <u>challenges</u> with this strategy): This strategy made little movement last year, however Advanced Health gained knowledge on the interviews that were completed. 10 behavioral health providers were reached out to during 2024, 5 behavioral health providers responded and participated in an interview/conversation. They are small 1 or 2 provider clinics, that don't have	Provider types supported with this strategy:
This strategy made little movement last year, however Advanced Health gained knowledge on the interviews that were completed. 10 behavioral health providers were reached out to during 2024, 5 behavioral health providers responded and participated in an interview/conversation. They are small 1 or 2 provider clinics, that don't have	☑ Across provider types OR specific to: ☐ Physical health ☐ Oral health ☐ Behavioral health

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, ArcadiaAny HIE, findhelp, Activate Care, and Connect Oregon.

Advanced Health's CITO has been working with OHLC on input on developing Health IT Playbook that would help provide a straightforward guide that can be shared with healthcare partners.

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 2025-26 plans for this strategy:

Advanced Health CITO to work with small 1 or 2 provider clinics on providing the expertise on bringing in HIT tools.

1. During the interviews about EHR (in the section 1. 2025-2026 above) we are also discussing their tools or 2. 2025 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-Q32025 focus on Behavioral Health Providers due to the growing need of Behavioral Health data to be accessed by Physical Health and vice versa (Minimum of 3 interviews per guarter). c. Q1 2025-Q2 2025 Focus on Oral **Health Providers** 2. Continue working with OHLC on providing feedback on Health IT Playbook 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 category(ies) 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): There were also two major hospitals that upgraded their EHRs to EPIC in 2024. With the upgrades complete, there has been a renewed interest in connecting with Reliance. (Optional) Overview of 2025-26 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 Planned Milestones Active data feed connections are fixed. 1. Q2 2025 2. Work with contracted organizations on 2. Q4 2025 90% Members assigned to PCP Orgs implementing Reliance HIE. with data connection or utilizing the portal or a. This includes Reliance HIE and both with Reliance (This goal is the same as Advanced Health identifying which 2024, as we were not able to meet it in 2024). 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. b. Provide financial support, regarding implementation costs, for any

Planned Milestones

Planned Activities

organization that moves to integrate with Reliance			
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 category(ies) 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 ☐ 0	Completed ☐ Ended/retired/stopped		
Provider types supported with this strategy: ⊠ Across provider types OR specific to: □ Physical hea	alth □ Oral health □ Behavioral health		
Progress (including previous year <u>accomplishments/successes</u> and <u>challenges</u> with this strategy): Advanced Health has been working with Clinics and Hospital to improve access to Hospital Event Notifications (HENs) (current PCC rates: 39% 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. 10 behavioral health providers were reached out to in 2024, with a response of 5. Due to personnel changes, Advanced Health's CITO and Behavioral Health Director were not able to onboard any behavioral health facilities in 2024. It will be resumed in 2025.			
(Optional) Overview of 2025-26 plans for this strategy : The 3 rd goal is duplicative of 2024's goal due to personnel changes, it had to be paused. This is projected to be picked back up in Q3 2025.			
Planned Activities 1. Continued outreach and education about the value of HENs 2. Reach out to non-engaged Clinics to identify obstacles to utilizing PointClickCare 3. Advanced Health's CITO and Behavioral Health Director to work together to onboard 4 behavioral health facilities	Planned Milestones 1. 2025-2026 2. Q2-Q4 2025 3. Q3-Q4 2025		
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 even notifications among your contracted providers			
The continued barriers are bandwidth and understanding of HIT tools.			
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?			

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, etc)?

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

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

6. Health IT to Support SDOH Needs

A. CCO Use of Health IT to Support SDOH Needs: 2024 Progress & 2025-26 Plans

Please describe CCO 2024 progress and 2025-26 plans for using health IT <u>within your organization</u> to support social determinants of health (SDOH) needs, including but not limited to screening and referrals. In the spaces below (in the relevant sections), please:

- Select the boxes that represent strategies pertaining to your 2024 progress and 2025-26 plans.
- List and describe the specific health IT tool(s) you currently use or plan to use for supporting SDOH
 needs. Please specify if the health IT tool(s) have closed-loop referral functionality (e.g., Community
 Information Exchange or CIE).
- (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 2024 and/or will implement in 2025-26 for using health IT within the CCO to support SDOH needs, including but not limited to screening and referrals, include:
 - 1. A title and brief description
 - 2. Which category(ies) pertain to each strategy
 - 3. Strategy status A description of 2024 progress, including:
 - i. accomplishments and successes (including number of referrals, etc., where applicable)
 - ii. challenges related to each strategy, as applicable
 - 4. (Optional) An overview of CCO 2025-26 plans for each strategy
 - 5. Activities and milestones related to each strategy CCO plans to implement in 2025-26

Notes:

- Four strategy sections have been provided. <u>Please copy and paste additional strategy sections as needed</u>. 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 continuing a strategy from prior years, please continue to report and indicate "Ongoing" or "Revised" as appropriate.
- If CCO is not pursuing a strategy beyond 2024, note 'N/A' in Planned Activities and Planned Milestones sections.
- If CCO is implementing a strategy beginning in 2025, please indicate 'N/A' in the Progress section for that strategy.
- If preferred, you may choose to submit a separate document detailing each strategy's activities and milestones.

Strategy category checkboxes (within CCO)

Using the boxes below, please select which strategies you employed during 2024 and plan to implement during 2025-26, within your organization. Elaborate on each strategy and your progress/plans in the sections below.					
Progress	Plans		Progress	Plans	
\boxtimes		Implement or use health IT tool/capability for social needs screening and referrals			7. Use data for risk stratification
		2. Enhancements to CIE tools (e.g., new functionality, health-related services funds forms, screenings, data sources)			Use health IT to monitor and/or manage contracts and/or programs to meet members' SDOH needs
		Integration or interoperability of health IT systems that support SDOH with other tools			9. Use health IT for CCO metrics related to SDOH
		4. CCO leads problem solving efforts and collaboration with their partners			10. Education/training of CCO staff about the value and use of health IT to support SDOH needs
		5. Care coordination and care management			11. Participate in SDOH-focused health IT convenings, collaborative forums, and/or education (excluding CIE governance)
		Use data to identify members' SDOH experiences and social needs			12. Participate in CIE governance or collaborative decision-making
	13. Other strategies for adoption/use of CIE or other health IT to support SDOH needs within CCO (please list here):				
	☐ ☐ 14. Other strategies for CCO access or use of SDOH-related data within CCO (please list here):				
List and to screer			CO for s	upportin	g SDOH needs, including but not limited
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 category(ies) pertain ☐ 1: Implement/use health IT ☐ 2: Enhancements ☐ 3 ☐ 6: Data to ID SDOH ☐ 7: Risk stratification ☐ 8: Ma ☐ 11: Convenings ☐ 12: Governance ☐ 13: Other ac	3: Integration ☐ 4: Collaboration ☒ 5: Care coordination anage contracts ☒ 9: Metrics ☐ 10. Education/training		
Strategy status:	Completed		
New □ Paused □ Revised □ Completed □ Ended/retired/stopped Progress (including previous year accomplishments/successes and challenges with this strategy): Over 2024, Advanced Health continued to monitor the processes used to manage HRSN related referrals using Unite Us CIE, including completeness of referrals (PRAPARE screenings completed or attached), correct program and benefit types, etc.), timeliness of acceptance/management of incoming referrals and time from initial referral to loop closure. Additionally, Advanced Health continued to continuously educate the current HRSN provider network, onboard new community organizations and build workflow for upcoming benefits as they launched throughout 2024.			
In anticipation of the required data reporting for the Socia 2025, Advanced Health worked with Unite Us to ensure member matched data feeds.			
Advanced Health customer service department completes a Health Risk Assessment (HRA) with each member each year and will also field member calls to assess for social health needs. Identified needs through either of these processes will result in referrals to appropriate internal and/or external resources. If there are identified significant SDOH needs, member could be referred internally to the Intensive Care Coordination team and/or the customer service lead could request a flex fund to meet the member's more immediate SDOH needs. This work is done in ActivateCare. Advanced Health worked with ActivateCare to ingest the full member eligibility file. The Intensive Care Coordination (ICC) Team and Customer Service (CS) Team is now be able to document all HRA on any member without having to manually create the member in ActivateCare. This will enhance reporting ability and workflow processes.			
(Optional) Overview of 2025-26 plans for this strategy: Ongoing efforts for interoperability between Reliance, Activate Care and Unite Us will continue. Advanced Health would like to see new programs utilize the Unite Us platform for both internal and external referrals including other levels of care coordination. [long term goal end of 2025]			
1. Continuously onboard new Community Benefit Organizations and health care providers to the Unite Us platform 2. Integrate Reliance and UniteUs to enhance data integration 3. Integrate UniteUs and Activate Care to enhance our care plan information in Activate Care with the referrals in the community. 4. Advanced Health plans to review the Unite Us provider network for gaps in services and work with community partners to identify and onboard organizations that meet the identified gaps. 5. Build HRSN benefit worklows specific to the Nutrition benefit.	Planned Milestones 1. Q4 2024 2. 2025 3. 2025 4. Q3 2025 5. Q1 2025 ongoing- Q2 2025 6.		

Strategy 2 title: Enhancements to CIE tools (e.g., adding new functionality, health-related services funds forms, screenings, data sources) Brief description: Integrating Activate Care with new data sources. Building custom HRSN forms in Unite Us for ease of HRSN service referrals.			
Strategy categories: Select which category(ies) pertain to this strategy ☐ 1: Implement/use health IT ☐ 2: Enhancements ☐ 3: Integration ☐ 4: Collaboration ☐ 5: Care coordination ☐ 6: Data to ID SDOH ☐ 7: Risk stratification ☐ 8: Manage contracts ☐ 9: Metrics ☐ 10. Education/training ☐ 11: Convenings ☐ 12: Governance ☐ 13: Other adoption/use: ☐ 14: Other SDOH data:			
Strategy status:			
	Completed		
Progress (including previous year <u>accomplishments/successes</u> and <u>challenges</u> with this strategy): HRSN Specific custom forms based on OHA requirements were created in late 2023. With the launch of each new type of HRSN benefit, the form and referral processes have been updated to capture the required information. Additionally, in 2024, Advanced Health engaged with Unite Us in discussions to build an innovative way to capture time spent for each member on Outreach & Engagement efforts. These discussions are ongoing.			
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.			
(Optional) Overview of 2025-26 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.			
1. Continue discussions with UniteUs on building an innovative way to capture time spent for each member on Outreach & Engagement efforts 2. Investigate with UniteUs to determine if there is a way to get data sent from UniteUs into Activate Care and Reliance HIE. 3. Monitor completeness of custom HRSN referral form in Unite Us. 4. Audit of HRSN required documentation for referrals sent using Unite Us platform	Planned Milestones 1. Q3, Q4 2025 2. 2025 3. Q2, Q3, Q4, 2025 4. Ongoing throughout 2025		
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 category(ies) pertain to this strategy ☐ 1: Implement/use health IT ☐ 2: Enhancements ☐ 3: Integration ☐ 4: Collaboration ☐ 5: Care coordination ☐ 6: Data to ID SDOH ☐ 7: Risk stratification ☐ 8: Manage contracts ☐ 9: Metrics ☐ 10. Education/training ☐ 11: Convenings ☐ 12: Governance ☐ 13: Other adoption/use: ☐ 14: Other SDOH data:			
Strategy status: ☑ Ongoing ☐ New ☐ Paused ☐ Revised ☐ Completed ☐ Ended/retired/stopped			
Progress (including previous year <u>accomplishments/successes</u> and <u>challenges</u> with this strategy):			
(Optional) Overview of 2025-26 plans for this strategy:			

Planned Activities

- 1. CITO to continue participate in HITOC
- CITO to participate in any future CIE workgroups either as a member (if approved) or as public

Planned Milestones

- 1. 2025-2026
- 2. 2025-2026

B. CCO Support of Providers with Using Health IT to Support SDOH Needs: 2024 Progress & 2025-26 Plans

Please describe your 2024 progress and 2025-26 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 needs, including but not limited to screening and referrals. In the spaces below, (in the relevant sections), please:

- Select the boxes that represent strategies pertaining to your 2024 progress and 2025-26 plans.
- 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. Please specify if the
 tool(s) have screening and/or closed-loop referral functionality (e.g., CIE).
- (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.
- <u>For each strategy</u> CCO implemented in 2024 and/or will implement in 2025-26 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:
 - a. A title and brief description
 - b. Which category(ies) pertain to each strategy
 - c. Strategy status
 - d. Provider types supported
 - e. A description of 2024 progress, including:
 - 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
 - f. (Optional) An overview of CCO 2025-26 plans for each strategy
 - g. Activities and milestones related to each strategy CCO plans to implement in 2025-26

Notes:

- Four strategy sections have been provided. <u>Please copy and paste additional strategy sections as needed</u>. 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 continuing a strategy from prior years, please continue to report and indicate "Ongoing" or "Revised" as appropriate.
- If CCO is not pursuing a strategy beyond 2024, note 'N/A' in Planned Activities and Planned milestones sections.
- If CCO is implementing a strategy beginning in 2025, please indicate 'N/A' in the progress section for that strategy.
- If preferred, you may choose to submit a separate document detailing each strategy's activities and milestones

Strategy category checkboxes (supporting providers)

Using the boxes below, please select which strategies you employed during 2024 and plan to implement during 2025-26 to support contracted providers and CBOs with using health IT to support SDOH needs. Elaborate on each strategy and your progress/plans in the sections below.

Progress	Plans		Progress	Plans	
\boxtimes	\boxtimes	1. Sponsor CIE for the community			7. Support payments to CBOs through health IT
		2. Enhancements to CIE tools (e.g., new functionality, health-related services funds forms, screenings, data sources)			Requirements to use health IT in contracts/provider agreements
		Integration or interoperability of health IT systems that support SDOH with other tools			Track or assess CIE/SDOH tool adoption and use
		4. Training and/or technical assistance	\boxtimes		10. Outreach and education about the value of health IT to support SDOH needs
		5. Support referrals from CBOs to clinical providers and/or from clinical providers to CBOs			11. Support participation in SDOH- focused health IT convenings, collaborative forums and/or education (excluding CIE governance)
		6. Financial support to adopt or use health IT that supports SDOH (e.g., incentives, grants)			12. Support participation in CIE governance or collaborative decision-making
		13. Other strategies for supporting adoption of <u>CIE or other health IT</u> to support SDOH needs (please list here):			
	☐ 14. Other strategies for supporting access or use of <u>SDOH-related data</u> (please list here):				
List and	List and briefly describe health IT tools supported or provided by CCO that support SDOH needs,				

including but not limited to screening and referrals.

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

Throughout 2024, Advanced Health continuously built and refined the referral process for community partners referring to HRSN services as each new benefit launched. Advanced Health also continued to offer technical assistance in the way of education, detailed workflow documents, referral readiness check lists and one on one education to new and existing community connector organizations. Ongoing monitoring of referrals for completeness, and timeliness of acceptance and loop closure helped to identify areas for additional education and further refinement of the workflow.

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 category(ies) pertain to this strategy □ 1: Sponsor CIE □ 2: Enhancements □ 3: Integration □ 4: TA Assessment □ 5: Clinical → CBO referrals □ 6: Financial support □ 7: Payments □ 8: Contract requirements □ 9: Track use □ 10: Outreach/education		
☐ 11: Convenings: ☐ 12: Governance ☐ 13: Other adoption/use: ☐ 14: 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 ☐ Social Services ☐ CBOs		
Progress (including previous year accomplishments/successes and challenges with this strategy): Throughout 2024, discussions with local contracted providers and community benefit organizations about the Health Related Social Needs benefit and the planned use of Unite Us as a referral pathway hinged on the fact that the platform was sponsored in full by Advanced Health and that organizations did not have to pay to use it. This made adoption a relatively easy decision for small Community Benefit Organizations who struggled with funding for fundamental programs. The success of early adopters of Unite Us can be attributed to this.		
(Optional) Overview of 2025-26 plans for this strategy:		
Advanced Health will continue to work with Unite Us to onboard key organizations in our service area to manage SDOH and HRSN referrals. Advanced Health plans to continue 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		
Planned Activities Planned Milestones		
 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). 2025-2026 2025-2026 		
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 category(ies) pertain to this strategy		
☐ 1: Sponsor CIE ☐ 2: Enhancements ☐ 3: Integration ☐ 4: TA Assessment ☒ 5: Clinical ← → CBO referrals		
☐ 6: Financial support ☐ 7: Payments ☐ 8: Contract requirements ☐ 9: Track use ☐ 10: Outreach/education		
☐ 11: Convenings: ☐ 12: Governance ☐ 13: Other adoption/use: ☐ 14: 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 ☐ Social Services ☐ CBOs		
Progress (including previous year <u>accomplishments/successes</u> and <u>challenges</u> 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		

(0.0 N = 1			
(Optional) Overview of 2025-26 plans for this strategy:			
This has been placed on pause due to changes in our local			
Planned Activities	Planned Milestones		
Re-evaluate strategy	1. Q4 2025		
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 networ	·		
Brief description:			
Advanced Health's behavioral director, ICC team, CITO, and	d 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 category(ies) pertain to t			
☐ 1: Sponsor CIE ☐ 2: Enhancements ☐ 3: Integration			
☐ 6: Financial support ☐ 7: Payments ☐ 8: Contract requir			
☐ 11: Convenings: ☐ 12: Governance ☐ 13: Other adoption	n/use: 14: Other SDOH data:		
Strategy status:			
\square Ongoing \square New \square Paused \boxtimes Revised \square Com	pleted Ended/retired/stopped		
Provider types supported with this strategy: $\ oxtimes$ Across p	rovider types OR specific to:		
☐ Physical health ☐ Oral health ☐ Behavioral health	☐ Social Services ☐ CBOs		
Progress (including previous year accomplishments/succes	ses and challenges with this strategy):		
Combining Strategy 3 & 4 from previous Roadmap			
At the close of 2024, Advanced Health had 44 providers using	•		
Health continued the practice of obtaining end user feedback	k throughout the year as well utilizing monthly and		
quarterly meetings with CBOs and UniteUs. (Optional) Overview of 2025-26 plans for this strategy:			
•	and United to for antimization of the platform amount		
Advanced Health will continue to collaborate with end users our provider network. Ongoing efforts to train new and existi			
to the relationship Advanced Health's Director of Social Dete			
UniteUs. Advanced Health has monthly meetings with Unite			
needed. UniteUs and Advanced Health's Director of Social Determinants of Health work to identify any			
riceded. Chiledo and Advanced Health's Biledon of Coolai Beterminante of Health Work to identify any			
Continued education sessions are planned for 2025 with all partners willing to work together on UniteUs. All			
partners are able to provide feedback to any Advanced Health employee regarding UniteUs, regardless if there			
are meetings/education sessions scheduled. Advanced Health's Director of Social Determinants of Health actively			
asks for feedback on UniteUs during education sessions.			
Planned Activities	Planned Milestones		
UniteUs and Advanced Health are working	1. 2025-2026		
collaboratively on ensuring clinical providers have	2. Monthly meetings with UniteUs throughout		
access to training and education on UniteUs and	2025-2026		
how it can benefit the organization.	Utilizing check-ins with CBOs done by		
Continued collaboration for engagement and	various departments such as Customer		
training for the Unite Us platform.	Service, ICC, and Director of Social		
Continue end user feedback mechanism to fine tune the platform when pessible	Determinants of Health 2025-2026		
tune the platform when possible. 4. Identify unmet needs and engage organization	Monthly meetings with UniteUs throughout		
who can meet those needs to join the Untie Us	2025-2026		
network of providers.			

C. Using Technology to Support HRSN Services

Please use this section to describe progress and plans to support use of technology for HRSN Services, particularly for closed loop referrals. Include work and strategies:

- 1. Within your organization to use technology to support HRSN Services and
- To support and incentivize HRSN Service Providers to adopt and use technology, particularly for closed loop referrals (such as grants, technical assistance, outreach, education, and engaging in feedback).

Note: If referring to a strategy already described elsewhere, please name the section and number, and ensure it is clear how the strategy supports use of technology for HRSN Services.

Within CCO: Specific progress and plans within CCO to adopt and use technology needed to facilitate HRSN Service provision, such as for closed loop referrals, service authorization, invoicing, and payment.

Progress (including previous year <u>accomplishments/successes</u> and <u>challenges</u> with this strategy): Advanced Health has been leveraging Unite Us CIE since the implementation of HRSN Climate (3/2024) as a pathway for HRSN referrals with an emphasis on standardized referral processes and referral loop closure. Throughout the course of 2024, Advanced Health worked closely with Unite Us to build workflow specific to each portion of the HRSN benefit in advance of their launch and to incorporate end user feedback for an improved end user experience.

In the early stages of Unite Us implementation, Advanced Health offered specific and frequent technical assistance to early adopters as well as Community Benefit Organizations who were hesitant to adopt. This technical assistance was offered in group settings for peer learning as well as one on one individual assistance on workflows and data capturing elements. Standardized workflow documents were also created and disseminated to Community Benefit Organizations who were expected to interact with HRSN regardless of their contracted status. Since that time, Advanced Health continues to offer technical assistance, outreach, education and engaging in feedback as directed by the current and prospective HRSN provider network. Feedback provided by engaged HRSN providers and community connectors has gone on to fuel enhancements to the Unite Us Platform.

Advanced Health also monitors timeliness of referral acceptance and completion of loop closure for organizations using the platform. Since the use of the platform is still in its infancy, this monitoring leads to additional focused education more so than penalties or incentives. With the data element requirement for the SDOH Screening and referral incentive measure in 2025, there is consideration for offering incentive funds to HRSN providers based on utilization of Unite Us or the rate of closed loop referrals. Discussions are in the initial stages for this.

Through continued engagement efforts, Advanced Health was able to add 12 new HRSN providers to the Unite Us network over the course of 2024 bringing the total from 32 to 44.

Advanced Health conducted outreach to adoption hesitant community organizations to better understand barriers to adoption. Through this process some barriers were mitigated through more in depth one on one education.

2025-27 Plans:

Advanced Health will continue to monitor the HRSN provider network for gaps and conduct focused outreach to potential new HRSN providers for contracting and adoption of the Unite Us platform.

Advanced Health plans to continue gathering user experience data to refine the referral pathway to ensure end user satisfaction.

Support for HRSN Service Providers: Specific progress and plans to support and incentivize HRSN Service Providers to adopt and use technology for closed loop referrals in 2025 and for Contract Years 2025-2027, such as grants, technical assistance, outreach, education, engaging in feedback, and other strategies for adoption and use.

Progress (including previous year <u>accomplishments/successes</u> and <u>challenges</u> with this strategy): Advanced Health was able to successfully outreach, educate and offer technical assistance to new and prospective HRSN providers throughout 2024, which in part lead to the additional 12 organizations added to the platform in 2024.

2025-27 Plans:

Advanced Health plans to investigate potential incentives for Unite Us adoption, utilization and referral loop closure rates using incentive pool dollars from the SDoH Screening and Referral measure.

D. Health IT to Support SDOH Needs 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.

The addition of another platform for community partners and healthcare providers to use is a barrier to progress. Additionally, the information obtained via Unite Us is duplicative but not identical to other existing programs used by social service organizations and/or Community Benefit Organizations which makes it more burdensome as there is no integration of these systems planned. Advanced Health is hopeful that the platform will reach a point where enough organizations/resources are listed to make use of the platform value added for community partners. Advanced Health plans to continue education and messaging of the benefits of Unite Us with the hopes of onboarding more organizations.

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?

Learning collaboratives for small CBOs who utilize UniteUs or other tools for SDOH.

7. Other Health IT Questions (Optional)

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.
- B. How can **OHA support** your efforts in accomplishing your Health IT Roadmap goals?
- C. What have been your organization's **biggest challenges** in pursuing health IT strategies? What can OHA do to better support you?

One of the biggest challenges in pursing health IT strategies began back with COVID. It's been tough on a rural community to bounce back from all of the challenges that COVID brought upon our community. These challenges include, but are not limited to: bandwidth and financial struggles of the community.

One way OHA could assist would be to provide grants or financial support in regards to EHR and HIT projects. While CCOs work to do their best with providing financial resources, it's not always possible due to the impact it could make on other services offered to members by Advanced Health.

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?