

Health IT Policy

Federal Law and Policy Updates

ONC Health Interoperability Outcomes 2030, Contact:
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The Office of the National Coordinator (ONC) has launched a new project called “Health Interoperability Outcomes 2030.” ONC is looking for input on what outcomes you would like to see. Later this fall, ONC intends to publish a prioritized set of health interoperability outcomes that align with ONC’s vision for interoperability and the 2020-2025 Federal Health IT strategic Plan.

Submissions will be accepted through July 30, 2021 and can be [submitted here](#).

Learn [more here](#).

Federal Interoperability and Patient Access Final Rules, Contact:
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On May 1, 2020, the U.S. Department of Health and Human Services (HHS) published two health information technology (IT) final rules requiring implementation of new interoperability policies; the [ONC 21st Century Cures Act Final Rule](#), supporting seamless and secure access, exchange, and use of electronic health information (EHI), and the Centers for Medicare and Medicaid Services (CMS) [Interoperability and Patient Access Final Rule](#), focused on patient access to electronic health information (EHI) and interoperability.

As of April 5, 2021, to comply with the ONC Cures Act Information Blocking final rule provisions, providers must provide patients with access to their EHI (the data set forth in the [United States Core Data for Interoperability](#), or USCDI, standard), upon patient request. Information blocking provisions also apply to making patient information available to other providers, payers, public health agencies, and others that have proper authorization and make requests for treatment or other permitted purposes under [applicable law](#). In addition, HIEs/HINs and developers of certified health IT are required to exchange all USCDI v1 data elements, assess current practices for information blocking and adjust as necessary, and ensure they utilize widely-accepted and -adopted standards to exchange data. See [ONC Fact Sheet](#) for information about the eight exceptions to the information blocking provisions.

What is HITOC?

The Oregon Legislature created the [Health Information Technology Oversight Council \(HITOC\)](#) to ensure that health system transformation efforts are supported by health information technology. HITOC is a committee of the [Oregon Health Policy Board \(OHPB\)](#), which sets policy and provides oversight for the Oregon Health Authority (OHA), including OHA’s health system transformation efforts.

HITOC has six responsibilities:

1. Explore health IT policy
2. Plan Oregon’s health IT strategy
3. Oversee OHA’s health IT efforts
4. Assess Oregon’s health IT landscape
5. Report on Oregon’s health IT progress
6. Monitor federal health IT law and policy

HITOC brings stakeholders and partners across Oregon together for centralized policy work, strategic planning, oversight of health IT efforts, and landscape/policy assessment, so health IT efforts are more coordinated. HITOC also provides health IT expertise to OHPB and to Oregon lawmakers so they are informed about health IT in Oregon when they make policies and laws about health.

OHA’s [Office of Health IT \(OHIT\)](#) staffs HITOC and the Oregon Health IT Program.

As of May 1, 2021, CMS modified Conditions of Participation (CoPs) to require hospitals, including psychiatric and Critical Access Hospitals, to send electronic admission, discharge, and/or transfer event notifications to the patient's primary physician, primary care group practice, and/or other physician or group practice identified by the patient.

By July 1st, CMS-regulated payers are required to (1) implement a standards-based API that allows patients to easily access their claims, encounter, and clinical information through third-party applications of their choosing, and (2) make provider directory information publicly available via a standards-based API.

OHA Support for Implementing Federal Interoperability and Patient Access Final Rules, Contact:

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The Oregon Health Authority (OHA) has several efforts underway to support Oregon stakeholders in implementing these new rules. Since October 2020, OHA:

- Hosted three webinars: recordings, materials, and additional resource can be found on the [Office of Health IT final rules webpage](#).
- Hosted work sessions with CCOs and DCOs for further clarification on priority rule requirements.
- Is partnering with the HIT Commons to host a Payer Interoperability Collaborative for CCOs, DCOs, and Medicare Advantage plans to focus on alignment and implementation of the CMS Interoperability and Patient Access Rules.

To build off this work, OHA, in partnership with [HIT Commons](#), will be holding a Payer Interoperability Collaborative (PIC) with CMS-regulated payers (CCOs, DCOs, and Medicare Advantage Plans) to focus on the alignment and implementation of the CMS Interoperability and Patient Access Rules. The PIC will be held monthly (on the second Tuesday) through December 2021 starting with a **June 8th 1:30-3pm meeting**. This will be a forum for CCOs, DCOs, and Medicare Advantage plans to share knowledge and challenges, and opportunities for alignment in data sharing around the CMS requirements. If interested in participating, please [register here](#).

FCC Emergency Broadband Benefit, Contact: Lisa.A.Parker@dhsoha.state.or.us

The Emergency Broadband Benefit is a temporary FCC program to help households struggling to afford internet service during the pandemic. This new benefit will connect eligible households to jobs, critical healthcare services, virtual classrooms, and so much more. Eligible households include Oregon Health Plan members.

For more information, see the [FCC webpage](#).

Health IT and Health System Transformation: Vision and Goals

HITOC set out a vision for health IT-optimized health care, along with three goals. These guide OHA's health IT work.

Vision:

A transformed health system where health IT efforts ensure that the care Oregonians received is optimized by health IT.

Goal 1: Share Patient Information Across the Care Team

Oregonians have their core health information available where needed, so their care team can deliver person-centered, coordinated care.

Goal 2: Use Data for System Improvement

Clinical and administrative data are efficiently collected and used to support quality improvement and population health management, incentivize improved health outcomes. Aggregated data and metrics are also used by policymakers and others to monitor performance and inform policy development.

Goal 3: Patients Can Access Their Own Information and Engage in Their Care

Individuals and their families access, use and contribute their clinical information to understand and improve their health and collaborate with their providers.

ONC Releases Draft USCDI Version 2 and SVAP Approved Standards for 2020, Contact:

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ONC released the Draft United States Core Data for Interoperability Version 2 ([Draft USCDI v2](#)) on January 12, 2021. The Draft USCDI v2 is the result of wide-ranging public input into the elements that should be included to enhance the interoperability of health data for patients, providers, and other users. ONC accepted public comment through April 15, 2021.

The ONC approved Standards Version Advancement Process (SVAP) versions for 2020 went into effect in the ONC Health IT Certification Program beginning March 12, 2021. Under SVAP, health IT developers can incorporate newer versions of health IT standards and implementation specifications used in certified health IT and update systems for their customers without undergoing certification testing again.

[Learn more about the SVAP](#)

Oregon Law and Policy Updates

Oregon 2022-2027 Medicaid 1115 Demonstration Application, Contact:

1115Waiver.Renewal@dhsosha.state.or.us

Oregon is applying to the Centers for Medicare & Medicaid Services (CMS) for a new 1115 Medicaid waiver for the years 2022-2027. The deadline to submit the application is December 2021. Medicaid is a state and federal program. The Oregon Health Plan (OHP) is the name of Oregon's Medicaid program.

The 1115 Medicaid waiver allows OHA to expand who is covered by OHP, pay for health care differently, and implement other reforms. The overall goal for the next waiver is to advance health equity in our state. Under that umbrella, there are four goal areas:

- Creating an equity-centered system of health
- Expanding access to coverage
- Encouraging smart, flexible spending through global budgets; and
- Reinvesting savings in across systems to promote equity

On June 1, 2021, OHA released a series of draft concept papers of high-level policy areas under consideration for inclusion in our 1115 Medicaid waiver. The policy papers, which flow from feedback OHA has received from stakeholders and the public, are summaries of the areas in which OHA plans to focus to develop proposals to the federal government for new approaches to create a more equitable and responsive Medicaid system. Building health equity in Oregon's Medicaid program is the unifying theme of the policy concept papers. Below you will find a cover memo along with the four policy papers.

- Introduction to OHA's strategies - [cover memo](#)
 - Concept 1: [Ensuring access to coverage for all people in Oregon](#)
 - Concept 2: [Creating an equity-centered system of health](#)
 - Concept 3: [Encouraging smart, flexible spending](#)
 - Concept 4: [Reinvesting government savings across systems](#)

OHA will be discussing these concept papers and their themes in a variety of settings. The public is invited to give input on the papers at meetings such as:

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- Health Equity Committee (HEC): June 10, 2021 12:00 – 2:00
 - Medicaid Advisory Committee (MAC): June 30, 2021 9:00 – 2:00

There are multiple opportunities to take part in the process!

- You are welcome to attend any meeting to provide feedback or to email comments or questions at any time to 1115WaiverRenewal@dhsosha.state.or.us
- For a complete list of public meeting dates, as well as additional resources and information, please visit the [1115 Waiver webpage](#).

HB4212 REALD Provider Reporting, Contact: Karen.Hale@dhsosha.state.or.us or OHAREALD.Questions@dhsosha.state.or.us

Oregon's House Bill 4212 (2020) requires health care providers to collect race, ethnicity, language, and disability (REALD) data for all COVID-19 encounters. After collection, providers must report this data to OHA with COVID-19 disease reporting. For more information, see: <https://www.oregon.gov/oha/OEI/Pages/REALD-Providers.aspx>

In 2021, OHA convened lessons learned meetings for Phase 1 provider organizations to support REALD implementation. OHA also published the first [COVID-19 REALD report](#).

[House Bill 3159](#) is being considered this legislative session, which would require health care providers and health insurers to collect REALD data from patient, client or member as well as data on sexual orientation and gender identity (SOGI).

Landscape and Environmental Scan, Contact: Marta.M.Makarushka@dhsosha.state.or.us

OHA's Office of Health IT (OHIT) engages in ongoing environmental scan activities to inform health IT efforts and ensure strategies and programs address evolving needs. OHIT continues compiling data across the agency and other sources to serve various purposes, such as informing HITOC's progress monitoring, program oversight, and reporting priorities. Past work includes:

- A [2019 Health IT Report](#) to HITOC which summarizes what is known about Oregon's EHR and HIE landscape, including key health IT concepts and HITOC considerations. This report supports HITOC's data-related responsibilities and helps inform HITOC's strategic planning.
- A Behavioral Health HIT/HIE Scan Report based on survey and interview data. See [Behavioral Health HIT Workgroup](#) for more information.

In 2021, OHIT's efforts will focus on CCO HIT Roadmaps and Data reporting:

- OHIT is supporting CCOs' 2021 Health IT Data Collection and Reporting efforts. This includes developing a survey (in partnership with CCOs) that CCOs can distribute to their contracted provider organizations to collect EHR and HIE information that will be used to inform HITOC's strategic plan update work.
- CCOs annual Health IT Roadmaps were due to OHA by end of March 2021. These documents include progress and strategies to support EHR adoption, HIE, and HIT needed for value-based payments. Updated HIT Roadmaps are currently under review. A summary of CCO efforts is expected late 2021, which will also be used to inform HITOC.

HITOC Strategic Plan and Annual Priorities, Contact: Susan.Otter@dhsosha.state.or.us

[Strategic Plan Update](#): At the beginning of 2020, HITOC began efforts to update the Oregon HIT Strategic Plan. In February and March, OHA conducted a series of public listening sessions and collected helpful input to inform the

strategic plan. Given the pandemic's impact on the healthcare system, remaining listening sessions were canceled and Strategic Plan Update efforts were placed on hold. HITOC will resume Strategic Plan Update work fall 2021.

[House Bill 3039](#) is being considered this legislative session, which would direct HITOC's strategic planning efforts to explore technology, funding, incentives, and policy options for statewide community information exchange (CIE), statewide health information exchange (HIE), patient access to data, and incentivizing electronic health records (EHR) adoption.

Annual priorities: HITOC reported on 2020 progress and 2021 annual priorities at the February Oregon Health Policy Board (OHPB) retreat. Priorities include Health IT needed to support COVID response and recovery, Strategic Plan Update work, and further work related to health IT and social determinants of health and health equity.

Membership: In late March 2021, HITOC released a Call for Nominations for new members and those interested in joining future workgroups. [Applications](#) are open on a rolling basis until filled. HITOC plans to present a slate to the OHPB for approval in July. For more information, please see the [recruitment webpage](#).

Oregon Health IT Program: Partnerships

HIT Commons, Contact: Luke.A.Glowasky@dhsosha.state.or.us

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

EDie and the Collective Platform (formerly known as PreManage)

The [Emergency Department Information Exchange \(EDie\)](#) allows Emergency Departments (EDs) in real-time to identify patients with complex care needs who frequently use the emergency room for their care. [The Collective Platform](#) (aka PreManage) is a companion software tool to EDie. The Collective Platform brings the same real-time hospital event notifications (ED and Inpatient Admit, Discharge, and Transfer [ADT] data) to those outside of the hospital system, such as health plans, CCOs, providers, and care coordinators. OHA supports a Medicaid PreManage Subscription that includes use by CCOs, Oregon Department of Human Services programs, Tribal clinics, and other Medicaid care coordinators.

HITOC's Current Work Groups

Workgroups will reconvene summer 2021.

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

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

[Behavioral Health HIT Workgroup](#)

This group was chartered in 2018 to recommend strategies to support health IT for behavioral health providers. Recommendations are included in OHA's [Report on Health Information Technology and Health Information Exchange Among Oregon's Behavioral Health Agencies](#). The group oversees OHA's Behavioral Health HIT Workplan and is convened as needed to inform specific initiatives such as OHA's [Confidentiality Toolkit](#) and technical assistance learning collaboratives. It is composed of a broad representation of types of behavioral health stakeholders across Oregon.

- OHA, HIT Commons, and Collective Medical partnered to bring statewide COVID-19 vaccination information from the state’s ALERT Immunization registry into EDie/the Collective platform. As of April 27, 2021, population reports are available via the platform for all CCO and health plan users, which allow for quickly assessing members who have received no vaccine, as well as identifying the manufacturer and dose of vaccines that have been administered. A press release with more information about this initiative is available [here](#). See COVID-19 Data Sharing Initiative below for more information on COVID-19 Data Sharing.
- The HIT Commons [EDIE Steering Committee](#) met on April 23, 2021. Topics of discussion included EDIE/Collective platform use cases under development, ED utilization dashboards and progress towards 2021-2023 EDIE Utility success metrics. Materials from that meeting are available at this [link](#). The Committee’s next meeting is June 25, 2021.

Payer Interoperability Collaborative

OHA and [HIT Commons](#) will be holding a Payer Interoperability Collaborative (PIC) on the implementation of the CMS Interoperability and Patient Access Rules starting with a [June 8th 1:30-3pm meeting](#). Please see “OHA Support for Implementing Federal Interoperability and Patient Access Final Rules” section on page 2 for more details.

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

Oregon’s PDMP Integration initiative connects EDie, Reliance eHealth Collaborative health information exchange (HIE), EHRs, and pharmacy management systems to [Oregon’s PDMP](#). HIT Commons is overseeing the [PDMP Integration initiative](#) with guidance from the Oregon PDMP Integration Steering Committee and in coordination with OHA’s Public Health PDMP program. For more information see the [HIT Commons website](#).

- 21 new organizations went live with PDMP integration in Q1 2021.
- House Bill 2074 has been introduced this legislative session at the request of OHA. This bill increases annual PDMP fees from \$25 to \$35 and is critical to maintaining continued operations and support of the PDMP Integration initiative.
- The PDMP Integration Steering Committee met on April 8, 2021. Topics of discussion included PDMP Integration metrics, Q1 2021 progress on integrations, updates from Public Health PDMP staff, and new reporting functionality available to prescribers and clinical leaders. The Committee’s next meeting is July 8, 2021.

Oregon Health IT Program: Programs and Initiatives

COVID-19 Data Sharing, Contact: Luke.A.Glowasky@dhsoha.state.or.us

OHA is collaborating with partners on several initiatives to share COVID-19 data in support of response and recovery efforts.

- OHA is now sharing COVID-19 positive case data to emergency departments through EDie, and to clinical users of Reliance eHealth Collaborative’s [Community Health Record](#).
- House Bill 3057 passed and was signed in May 2021, which allows COVID-19 positive case data to be shared from Public Health to entities like CCOs and health plans for care coordination purposes. HIT Commons and OHA are poised to share COVID-19 data to all Collective Platform users’ organizations,

including CCOs, health plans, clinics, and others. OHA is also coordinating with Reliance to enable sharing with their CCO and health plan users.

- COVID vaccine data reports are now shared weekly with CCOs for their members. Additionally, COVID-19 vaccine data are flowing into EDie/the Collective platform. Collective platform COVID Vaccine Population Reports allow for quickly identifying members who have received no vaccine, as well as identifying the manufacturer and dose of vaccines that have been administered. OHA is also coordinating with Reliance to enable sharing with their users.

Community Information Exchange (CIE), Contact: Hope.Peskin-Shepherd@dhsoha.state.or.us

Community information exchange (CIE) is a network of healthcare and human/social service partners using a technology platform with functions such as a shared resource directory, “closed loop” referrals, reporting, social needs screening, and other features to electronically connect people to social services and supports. CIEs are developing rapidly across the state with two main CIE vendors: [Aunt Bertha](#) and [Connect Oregon](#) (Unite Us). To learn more, see the [OHA CIE webpage](#).

On April 29, 2021 OHA held an informational webinar to explore what CIE is, how it may be valuable, and to hear about successes and challenges faced. Representatives from AllCare CCO, Project Access Now, Cascade Health Alliance, and Sky Lakes Medical Center shared their experiences using CIE. Materials can be found on the [CIE webpage](#).

As mentioned above, House Bill 3039 is being considered this legislative session, which would direct HITOC’s Strategic Planning Efforts to explore technology, funding, incentives, and policy options for statewide community information exchange (CIE) as well as other topics.

Medicaid EHR Incentive Program, Contact: Jessica.L.Wilson@dhsoha.state.or.us

The [Medicaid EHR Incentive Program](#) (also known as the Promoting Interoperability Program) offers qualifying Oregon Medicaid providers federally funded financial incentives for the adoption or meaningful use of certified electronic health records technology. Eligible professional types include physicians, naturopathic physicians, pediatric optometrists, nurse practitioners, certified nurse-midwives, dentists, and physician assistants in certain settings.

As of May 2021, more than \$211 million in federal incentive payments have been dispersed to 60 Oregon hospitals and 3,857 Oregon providers. Between April and May 2021, 82 providers received \$697,000 in incentive payments. The program sunsets December 31, 2021.

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

The [Oregon Provider Directory \(OPD\)](#) supports accurate, trusted provider data and care coordination, HIE, administrative efficiencies, and health analytics. [The Provider Directory Advisory Committee](#) provides stakeholder input and oversight to OHA’s development of this program. The OPD went live in September 2019 in a soft launch in Central Oregon.

Due to COVID-19, in March 2020 OHA paused soft launch engagement activities. In December 2020, The [Governor’s proposed 21-23 budget](#) did not include funding for the OPD. Since that time, OHA staff have been working internally to explore other sources of funding while work on the OPD is currently paused.

Clinical Quality Metrics, Contact: Katrina.M.Lonborg@dhsoha.state.or.us

The [Clinical Quality Metrics Registry \(CQMR\)](#) service was suspended at the end of 2020. OHA remains committed to the goals of collecting robust clinical data on outcomes measures to support health system transformation. For more information, please see these [FAQs](#).

Educational webinar: Quality measures and FHIR: In February 2021, OHA partnered with OHSU's Care Management Plus team to offer a free educational webinar on FHIR and electronic clinical quality measures. If you missed it, the [slides](#) and [recording](#) are posted to the [CCO Metrics TAG](#) page.

Health Information Exchange (HIE) Onboarding Program, Contact: Jessica.L.Wilson@dhsoha.state.or.us

Oregon's [HIE Onboarding Program](#) leverages significant federal funding to increase Medicaid providers' capability to exchange health information by supporting the initial costs of connecting (onboarding) priority Medicaid providers to community-based HIEs. Priority Medicaid providers include behavioral health, oral health, critical physical health, and others. Reliance eHealth Collaborative was selected through an RFP process. The HIE Onboarding Program launched in January 2019 and ends June 30, 2021.

OHA has approved Reliance to onboard providers contracted with nine CCOs, covering 14 Oregon counties. See <http://reliancehie.org/hieonboarding/> for more information. As of May 2021, there are 13 behavioral health practices, 4 oral health clinics, 49 critical physical health entities, and 5 major trading partners (hospital/health system) participating in the Program. Between April and May 2021, 9 new entities were onboarded. The Program ends June 30, 2021.

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

The Flat File Directory assists organizations using Direct secure messaging by providing a listing of participating organizations' Direct secure messaging addresses, enabling health information exchange across Oregon.

As of May 2021, the [Flat File Directory](#) includes more than 18,000 Direct addresses from 25 interoperable, participating entities who represent 900 unique health care organizations (primary care, hospital, behavioral health, dentistry, FQHC, etc.).

Stay Connected

You can find information about HITOC at our [website](#). Meetings are open to the public and public comments are accepted at the end of each meeting or in writing to the HITOC Chair and Vice-Chair in care of OHA (hitoc.info@dhsoha.state.or.us).

Program Contact

Health Information Technology Oversight Council: hitoc.info@dhsoha.state.or.us

Get involved with Oregon Health IT

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