

## Health IT Policy

**Federal Law and Policy Updates/Changes, contact:**

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### **2020 Quality Payment Program Final Rule Overview: MIPS Highlights**

The Center for Medicare and Medicaid Services (CMS) launched the Quality Payment Program in 2017 and has since updated the Merit-based Incentive Payment System (MIPS) and Advanced Alternative Payment Models (APMs) tracks. [The Quality Payment Program Final Rule](#) for calendar year 2020 updates both MIPS and Advanced APMs tracks, including the Promoting Interoperability Performance Category.

### **2020 Updates to the Child and Adult Core Health Care Quality Measurement Sets**

CMS' Center for Medicaid & CHIP Services have updated the [2020 Core Set of children's health care quality measures for Medicaid and the Children's Health Insurance Program \(CHIP\) and the Core Set of health care quality measures for adults enrolled in Medicaid](#).

**Landscape and Environmental Scan, Contact:**

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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.

OHIT developed a 2019 Health IT Report to HITOC which summarizes what is known about Oregon's EHR and HIE landscape, including key health IT concepts and HITOC considerations. This report supports HITOC's data-related responsibilities and helps inform HITOC's 2020 strategic planning work. It will be presented at the December HITOC meeting.

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

## What is HITOC?

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

HITOC has six responsibilities:

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

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

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

**HIT Strategic Plan and Annual HITOC Priorities**, Contact:

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The [HITOC HIT 2017-2020 Strategic Plan](#) was approved by the Oregon Health Policy Board in October 2017 and provides a roadmap for Oregon's HIT work ahead, including strategies for a "network of networks" approach to statewide health information exchange and the HIT Commons public/private partnership model of governance. In February 2019, OHPB approved HITOC's major 2019 priorities (under the approved Strategic Plan): exploratory work in social determinants of health/health equity and patient engagement, next steps for statewide health information sharing ("network of networks") efforts (includes physical, behavioral, oral, and other information), wrapping up planning for behavioral health and HIT work, showing Oregon's HIT progress via dashboards and milestones (2019 Health IT Report to HITOC), and potentially updating the Strategic Plan in fall 2019. Ongoing priorities include continued oversight work on partnerships/programs and new landscape assessment as appropriate.

The work to update the Strategic Plan will begin in 2020.

**Behavioral Health HIT Work**, contact:

[Kristin.M.Bork@dhsosha.state.or.us](mailto:Kristin.M.Bork@dhsosha.state.or.us) and [Jessica.I.wilson@dhsosha.state.or.us](mailto:Jessica.I.wilson@dhsosha.state.or.us)

As part of the ongoing behavioral health work, the [Behavioral Health \(BH\) HIT Workgroup's](#) November meeting focused on the OHA effort to modernize the Compass system, which includes required reporting for behavioral health providers in Oregon. Workgroup members heard a presentation on the efforts to streamline reporting requirements and provided input on their challenges and what they would like to see moving forward. This meeting responded to a direct recommendation that came out of the BH HIT Survey, previous meetings of the workgroup, and the workplan that was developed to respond to these recommendations.

In addition, OHIT submitted a concept for technical assistance provision to substance use disorder providers around EHR and HIE as part of the OHA SAMHSA Block Grant application this fall. The grant was approved and work will begin this winter to define the technical assistance program, with input from the Behavioral Health HIT Workgroup. Work under the grant is anticipated to begin in the summer of 2020.

## 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.

## Oregon Health IT Program: Partnerships

**HIT Commons** Contact: [Brittany.J.Matero@dhsosha.state.or.us](mailto:Brittany.J.Matero@dhsosha.state.or.us)

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

See below for more information about the HIT Commons initiatives, as well as work to support the Oregon Provider Directory and new work in the evolving landscape of social determinants of health (SDOH)—including conceptual development of an Oregon Community Information Exchange—to connect the health care and social services sectors. For more information see the [HIT Commons](#) website.

### ***EDie/PreManage***

The [Emergency Department Information Exchange \(EDie\)](#) allows Emergency Departments (EDs) in real-time to identify patients with complex care needs who frequently use the emergency room for their care. In addition to utilization alerting, EDIE also provides succinct but critical information to ED physicians, such as: security alerts, care guidelines entered by the patient primary care home, and contact information for case managers. All hospitals with emergency departments (excepting the VA) in Oregon are live with EDie. PreManage is a companion software tool to EDie. PreManage brings the same real-time hospital event notifications (ED and Inpatient Admit, Discharge, and Transfer (ADT) data) to those outside of the hospital system, such as health plans, Medicaid coordinated care organizations (CCOs), providers, and care coordinators.

EDie and PreManage are in use statewide and adoption for PreManage continues to grow.

All of Oregon's CCOs receive hospital notifications through PreManage. Most major Oregon health plans are using PreManage, as well as all of Oregon's Dental Care Organizations and 4 tribal clinics. Behavioral health continues to be a major category of PreManage users. All Type B Area Agencies, Aging and Aging

## HITOC's Current Work Groups

### **Health IT/Health Information Exchange Community and Organizational Panel**

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

### **Behavioral Health HIT Workgroup**

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

### **Network of Networks Technical Definitions Group**

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

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& People with Disabilities, and Developmental Disabilities District offices are now using PreManage through the Oregon Department of Human Services.

Recent highlights:

- Hospitals who have integrated EDie into their electronic health record (EHR) may now include PDMP data (see below) in their EDie alerts.
- Hospitals who receive EDie notifications via fax now receive a Physician Order for Life Saving Treatment (POLST) as a print out along with the EDie notification. PreManage users may request POLST forms in their portal for their assigned patients.
- PreManage began to roll out to Skilled Nursing Facilities across Oregon in 2019. More than 80 out of nearly 200 are live.

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

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

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

- 10,656 prescribers across 191 organizations have integrated access to Oregon's PDMP data—either through their EDie alerts, or through one-click access at the point of care (EHR or HIE), retail pharmacy chains (across 366 sites) and 1 rural pharmacy are also live.
- Risky prescribing practices are also changing, including prescriptions for longer than a 7-day supply of opioids. Quarter 2 2019 compared to Q2 2018 showed a 45% reduction in the # of patients receiving 8 to 13-day supply of opioids and 27% reduction in the # of patients receiving 14+ day supply.
- Interstate data sharing is established with PDMPs in Idaho, Kansas, Nevada, Texas, North Dakota, and Washington (WA for web portal only). Alaska, Wyoming and California are in progress.
- A streamlined process to initiate PDMP Integration is available through the HIT Commons. Interested health care organizations can start the process at the [PDMP Integration website](#).

Legislative updates and the latest PDMP implementation reports can now be found on the [HIT Commons website](#).

### ***Oregon Community Information Exchange Activities***

The HIT Commons is beginning new work in the evolving landscape of social determinants of health (SDOH). Earlier this year, the HIT Commons Governance Board directed HIT Commons staff to begin exploration and conceptual development of an ***Oregon Community Information Exchange (Oregon CIE)***. In general, CIEs include a data repository of shared community resources that connects health care, human and social services partners to improve the health and well-being of communities. A technology platform supporting a CIE could provide many functions, including statewide social services directory,

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shared SDOH assessments, real-time closed loop referral management, collaborative care plans and standardized outcomes and data analysis.

This spring, HIT Commons staff conducted an environmental scan to determine what efforts are underway in Oregon and how other states are approaching healthcare and SDOH integration. In Summer 2019, two distinct efforts were selected to move forward:

- HIT Commons standing up an Oregon CIE Advisory Group to work with stakeholders to develop of a roadmap for alignment of statewide CIE efforts. This group begins meeting in December 2019.
- Oregon Health Leadership Council (OHLC) working in partnership with Kaiser/Thrive Local to engage early adopters to develop a coordinated CIE implementation.

HITOC discussed the environmental scan findings at its August 2019 meeting, and will receive further updates as this work progresses. For more information, see:

<http://www.orhealthleadershipcouncil.org/currently-in-development/>

OHA supports HIT Commons CIE Advisory Group efforts as well as internal OHA/DHS coordination to ensure alignment between CIE and other state SDOH work.

## Oregon Health IT Program: Programs

**Medicaid EHR Incentive Program** Contact: [Jessica.L.Wilson@dhs.ohs.state.or.us](mailto:Jessica.L.Wilson@dhs.ohs.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 November 2019, more than \$205 million in federal incentive payments have been dispersed to 60 Oregon hospitals and 3,834 Oregon providers. The program ends in 2021.

**Oregon Provider Directory** Contact: [Karen.Hale@dhs.ohs.state.or.us](mailto:Karen.Hale@dhs.ohs.state.or.us)

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

[The Provider Directory Advisory Committee](#) provides stakeholder input and oversight to OHA's development of this program.

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

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**Clinical Quality Metrics Registry** Contact: [Katrina.M.Lonborg@dhsosha.state.or.us](mailto:Katrina.M.Lonborg@dhsosha.state.or.us)

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

The CQMR launched in early 2019 to collect eCQMs for the 2018 program year for the Medicaid EHR Incentive Program and support eCQM reporting to CMS for the CPC+ and MIPS programs. Starting in 2020, the CQMR will support eCQM reporting for the CCO incentive measures. Over time, other quality reporting programs could use the CQMR as well, which will support OHA's goal of streamlining and aligning quality metric reporting requirements and reducing provider burden.

Currently, CQMR program staff are engaged in onboarding CCOs, providing a communications toolkit, scheduling webinars, and updating written training materials to help users get ready for reporting that is due in the first quarter of 2020.

**HIE Onboarding Program** Contact: [Kristin.M.Bork@dhsosha.state.or.us](mailto:Kristin.M.Bork@dhsosha.state.or.us)

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

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

**Direct Secure Messaging Flat File Directory** Contact: [Karen.Hale@dhsosha.state.or.us](mailto:Karen.Hale@dhsosha.state.or.us)

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

As of October 2019, the Flat File Directory includes more than 18,300 Direct addresses from 24 interoperable, participating entities who represent more than 895 unique health care organizations (primary care, hospital, behavioral health, dentistry, FQHC, etc.).

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## 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@dhsosha.state.or.us](mailto:hitoc.info@dhsosha.state.or.us)).

## Program Contact

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## Get involved with Oregon Health IT

Office of Health Information Technology: [HealthIT.Oregon.gov](http://HealthIT.Oregon.gov) | Join the listserv: [bit.ly/2VYgoDB](https://bit.ly/2VYgoDB)