

Introduction

The Health Information Exchange (HIE) Onboarding Program is designed to support care coordination by advancing the exchange of information across Oregon’s Medicaid provider network. Priority Medicaid providers include behavioral health, oral health, critical physical health and others. The Program leverages 90 percent federal funding to support the initial costs of connecting (onboarding) priority Medicaid providers to community-based HIEs. Later phases of the program may include the onboarding of long-term services and supports, social services, as well as other providers. OHA has contracted with Reliance eHealth Collaborative (Reliance) for this program. The Program will run through September 2021.

The [Health Information Technical Advisory Group](#) provides oversight and guidance for the Program.

Timeline

The program launched in January 2019. OHA estimates that the Program will run through September 30, 2021.

Funding and Funding Requirements

The Program is funded by the Centers for Medicare & Medicaid Services (CMS) with 90 percent federal funds under the Health Information Technology for Economic and Clinical Health (HITECH) Act, which is available through 2021. State funds make up the remaining 10 percent, with approved funding for the 2017-19 and 2019-21 biennia.

As of February 2016, HITECH funds may be used to support HIE onboarding (connecting) of providers and hospitals eligible for federal electronic health record (EHR) incentive payments (“eligible providers”) and those Medicaid providers who are not eligible providers (including behavioral health, long term care, corrections, etc.).

Onboarding must connect the new Medicaid provider to an eligible provider and help that eligible provider meet federal “meaningful use” requirements. The new Medicaid provider being onboarded does not need an EHR to participate; for example, connections through Reliance’s web portal to the Community Health Record will also be available.

How Does the Program Work?

Reliance will onboard priority Medicaid physical, behavioral, and oral health providers, according to a work plan developed in consultation with Medicaid partners. CCOs will be involved in determining whether providers in their region participate in the Program and provide input on annual work plan development. To participate in the Program, CCOs must have a data, funding, or governance relationship with Reliance.

Providers who participate will receive financial support from the HIE, as well as financial support from OHA to offset or partially offset their administrative onboarding costs. OHA will pay Reliance to support the initial costs of new connections to the HIE.

While the current contractor is Reliance, OHA reserves the right to re-open the RFP to potentially add additional community-based HIEs to the Program.

Specific Providers to be Onboarded

The Program is voluntary and can help providers who, in the past, may have been unable to connect to an HIE due to financial or other barriers, as well as providers who have previously been ineligible to receive federal financial support for health information technology.

The first phase of the Program will focus on supporting integrated care: behavioral health, oral health, and physical health. This also includes Major Trading Partners such as hospitals, labs, etc.

Phase I Priority Medicaid Providers	
Provider Type	Specific Providers Covered
Behavioral health	Community Mental Health Programs, Certified Community Behavioral Health Centers, Behavioral Health Homes, Assertive Community Treatment teams, mobile crisis teams, and other state-licensed behavioral health organizations
Oral health	Clinics and providers serving Medicaid members, including those contracted with managed care entities and those serving fee for service (i.e., open card) populations
Critical physical health	Medicaid providers who participate in: Patient-Centered Primary Care Homes, Federally Qualified Health Centers (FQHC), Rural Health Centers, Comprehensive Primary Care Plus, tribal health, equity-focused/culturally specific clinics, and county corrections health
Major Trading Partners	Major trading Partners include hospitals, health systems, multi-specialty clinics, laboratories and radiology, especially those that affect the value of HIE for smaller and rural/frontier providers

Stakeholder Input

The Program was developed after extensive engagement with a variety of stakeholders, including OHA stakeholder groups, like the Health Information Technology (HIT) Oversight Council, the HIT Advisory Group (with Medicaid Coordinated Care Organization representatives), and the HIT/HIE Community and Organizational Panel.

OHA also formed a short-term advisory group of stakeholders across the state to inform program development. OHA met individually with stakeholders from corrections, long-term services and supports, behavioral health, social services, frontier providers, supported housing, and others. OHA interviewed eight states with similar programs about best practices. Finally, OHA received helpful input through a request for information open to organizations operating an HIE in Oregon.

To get the latest information about the Program, as well as information about program development and stakeholder involvement, please visit our [website](#).

Stay Connected

You can find information about HITOC at <https://www.oregon.gov/oha/HPA/OHIT-HITOC/Pages/index.aspx>. 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 (ohit.info@state.or.us).

Program Contact

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Get involved with Oregon Health IT

Office of Health Information Technology: HealthIT.Oregon.gov

Join the listserv: bit.ly/2VYgoDB

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