

Health IT Policy

Federal Law and Policy Updates

Federal Interoperability and Patient Access Final Rules, Contact: Marta.M.Makarushka@dhsosha.state.or.us

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 Office of the National Coordinator for Health Information Technology's (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 & Medicaid Services (CMS) [Interoperability and Patient Access Final Rule](#), focused on patient access to EHI and interoperability.

These rules significantly impact EHI exchange requirements across the health care continuum. Additional information can be found on the [Office of Health IT \(OHIT\) federal rules webpage](#).

New USCDI v3 and Standards Bulletin Released, Contact: Ashley.Ashworth@dhsosha.state.or.us

ONC published the latest [Standards](#) with the new [Draft United States Core Data for Interoperability \(USCDI\) v3](#), including 20 new data elements and 2 new data classes to advance health IT for improved care, reduced inequities, and stronger public health reporting. ONC is also seeking feedback on which data classes and elements should be included in the final USCDI v3. Public feedback accepted on the [ONC Draft USCDI v3 website](#) until April 30, 2022. ONC plans to release the final USCDI v3 this summer.

TEFCA, Contact: Ashley.Ashworth@dhsosha.state.or.us

ONC and the Sequoia Project, the Recognized Coordinating Entity (RCE), recently announced the publication of the Trusted Exchange Framework and Common Agreement (TEFCA), marking the beginning of the implementation phase. Also available is the TEFCA Health Level Seven (HL7) Fast Healthcare Interoperability Resource (FHIR) Roadmap, which outlines how TEFCA will accelerate the adoption of FHIR-based exchange across the industry.

The RCE will host a series of webinars to help those interested in TEFCA understand how it works. [Visit the RCE's webpage](#) to learn more, find current resources, and register for upcoming webinars. Learn more from ONC [here](#).

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 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.

Oregon Law and Policy Updates

The **2022 Oregon Legislative Session** ended March 4. While this was an exceptionally busy session for health topics, one bill directly impacts the OHA Office of Health IT's current work. A complete report on bills and budget items expected to most significantly impact the health of Oregonians and the work of OHA is available [here](#).

House Bill 4150 (2022): Requires HITOC, with OHA staff support, to convene group(s) to explore options to accelerate, support and improve secure, statewide Community Information Exchanges (CIEs). The bill requires HITOC to submit a draft report to the interim committees of health and human services by 9/15/2022 and a final report by 1/31/2023 on findings of the group(s) and recommendations for legislative changes, if any. This work aligns with the CIE Workgroup chartered by HITOC (see the Oregon Health IT Program: Programs and Initiatives section below for details).

Oregon 2022-2027 Medicaid 1115 Demonstration Waiver, Contact: 1115Waiver.Renewal@dhsoha.state.or.us

OHA submitted the Medicaid 1115 Demonstration Waiver [final application](#) on 2/18/2022 to CMS for a new five-year Medicaid waiver for years 2022 through 2027. The waiver is also known as the [1115 Demonstration](#). The purpose of the waiver is to reform our state's Medicaid program, the Oregon Health Plan (OHP). OHP delivers health care to people who have low income.

A federal waiver creates an opportunity for OHP to:

- Build on our state's health care transformation success, and
- Create a more equitable system.

For more information, see the [Medicaid 1115 Demonstration Waiver Application webpage](#).

HB4212 REALD Provider Reporting, Contact: OHAREALD.Questions@dhsoha.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 the [REALD for Providers webpage](#).

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](#). Collection for phase 3 providers starts January 1, 2022.

House Bill 3159 (2021) requires OHA to adopt rules and standards and establish a timeline for health care providers and health insurers to collect REALD and sexual orientation and gender identity (SOGI) data from all patients, clients, or members (not just COVID-19 encounters) and report that data to OHA at least annually. OHA will build a REALD/SOGI data collection system for this data reporting. More information about the implementation of HB 3159 can be found [here](#).

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

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 electronic health record (EHR) and health information exchange (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 were focused on CCO HIT Roadmaps and Data reporting:

- CCO 2.0 HIT Data Reporting: OHIT supported CCOs’ 2021 Health IT Data Collection and Reporting efforts. This included developing a survey (in partnership with CCOs) that was distributed to CCO contracted provider organizations to collect EHR and HIE information that will be used to inform CCO HIT Roadmaps and HITOC’s strategic plan work. A summary will be made available in June.
- CCO Updated HIT Roadmaps:
 - CCO 2022 Updated Health IT Roadmaps are due to OHA by the end of April. These documents include progress and planned strategies to support EHR and HIE adoption, as well as HIT to support social needs screening and referrals for addressing SDOH needs.
 - OHA has prepared a draft summary of strategies included in CCO Updated 2021 HIT Roadmaps, which will also be used to inform HITOC. A [summary of EHR strategies](#) was presented at the November 4, 2021 HITAG meeting and a [summary of HIE strategies](#) was presented at the March 10, 2022 HITAG meeting. Meeting materials and recordings can be found [here](#).

HITOC Strategic Plan and Annual Priorities, Contact: Ashley.Ashworth@dhsoha.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 of 2020, 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 resumed Strategic Plan Update work, kicking-off at the August 5th HITOC meeting. Following that meeting, HITOC discussed the proposed process for updating the Strategic Plan as well as primary topic areas. Areas HITOC will explore under the Strategic Plan Update include CIE, statewide HIE, patient access to data, EHR adoption and implementation, public health, and more.

In the April meeting HITOC will review a charter and proposed membership slate for an HIE Workgroup, review potential strategic and legislative levers, and review the proposed vision statement. The CIE Workgroup held its first meeting on March 15 and the next meeting will be April 19. See the Oregon Health IT Program: Programs and Initiatives section below for more information.

Oregon Health IT Program: Partnerships

HIT Commons, Contact: Luke.A.Glowasky@dhsoha.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 (OHLIC) 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](#) (fka 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 Collective Platform subscription that includes use by CCOs, Oregon Department of Human Services programs, Tribal clinics, and other Medicaid care coordinators.

- The HIT Commons [EDIE Steering Committee](#) met on February 25, 2022. Topics of discussion included review of quarterly EDIE analytics dashboards; product and support updates from Collective Medical; a new use case queue management process used by HIT Commons; discussion of emerging use cases including assigned-unseen patients functionality, multi-drug resistant organism flags, and HEDIS Transitions of Care (TRC) Metric support; and updates on previously identified integration use cases including the HERO Kids Registry, and Jails and Housing data. Materials from that meeting are available [here](#). The Committee's next meeting is April 22, 2022.

Public Health Data Sharing Workgroup

HIT Commons, in partnership with OHA, has convened a Public Health Data Sharing Workgroup to discuss and assess efforts to integrate public health data into HIT or HIE systems, and make policy and operational recommendations to HIT Commons and OHA. Workgroup membership includes representation from OHA's Public Health Division, payers/CCOs, health systems, and providers.

HIT Commons and OHIT staff are meeting with OHA Public Health Division leadership to explore public health data sharing priorities that the Workgroup should focus on moving forward. The broader workgroup will likely be reconvened later in 2022.

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](#).

- 20 new organizations went live with PDMP integration in Q4 2021.
- The PDMP Integration Steering Committee met on October 14, 2021. Topics of discussion included PDMP Integration metrics, Q3 2021 progress on integrations, updates from Public Health PDMP staff, and new reporting functionality available to prescribers and clinical leaders. The Committee will meet on April 14, 2022.

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 sharing statewide COVID-19 positive case data to users of EDIE and the Collective platform, and to clinical and health plan/CCO users of Reliance eHealth Collaborative's [Community Health Record](#).
- COVID-19 vaccine data reports are now shared weekly with CCOs for their members. Additionally, COVID-19 vaccine data are flowing into EDIE/the Collective Platform and to the Reliance HIE. 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. Pfizer and Modern third doses are now included in both data feeds.

- Oregon efforts to integrate Public Health COVID-19 data into HIT and HIE will be discussed and assessed at meetings of the Public Health Data Sharing Workgroup referenced above.

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

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. To learn more, see the [OHA CIE webpage](#).

HITOC chartered the CIE workgroup and recruited members in October-November 2021. The CIE Workgroup brings together individuals representing Oregon’s diverse landscape of community, health care, and social services partners to help advance health equity by providing recommendations on strategies to accelerate, support, and improve CIE across the state. Workgroup recommendations will inform HITOC’s Health IT Strategic Plan for Oregon and OHA efforts. At their first meeting in March, the CIE Workgroup reviewed their purpose and timeline, the definition of CIE, and had initial discussions on the Workgroup’s vision for CIE. The next [meeting](#) will be April 19, 2022. See the goals and full scope in the [CIE Workgroup Charter](#). For more information on CIE please see the [CIE Issue Brief](#) and the [OHA CIE Website](#).

In 2022 OHA plans to conduct CIE interviews with individuals, community-based organizations (especially those who serve specific culturally and linguistically specific populations), and other interested parties to hear the challenges and barriers they face, and identify opportunities to help in their adoption and participation in CIE. The overall information will be presented to the CIE workgroup and HITOC to inform recommendations and the HITOC Strategic Plan Update.

Medicaid EHR Incentive Program Contact: Marta.M.Makarushka@dhsosha.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.

At program end a total of \$213,415,388 in federal incentive payments were disbursed to 60 Oregon hospitals and 3,865 Oregon providers. The program started September 2011 and ended December 31, 2021. Successes of the program include:

- 3,865 providers across 589 clinics received a total of \$137.8 million
 - 813 providers completed all six years of the program (21% of providers)
 - 54 providers across nine Tribal Health clinics received more than \$1.3 million
 - Providers at 69 Federally Qualified Health Centers/Rural Health Clinics received payments
 - More than 100 Naturopaths and 3 Pediatric Optometrists were able to participate in the program
 - Although behavioral health providers were not eligible for the program, providers at 20 behavioral health clinics were able to receive payments, which further supported the integration of behavioral health with physical health.
- 60 hospitals received \$75.5 million. Fifty-five hospitals completed all three years of participation (92%).

HIE Onboarding Program Contact: Marta.M.Makarushka@dhsosha.state.or.us

Oregon's [HIE Onboarding Program](#) leveraged 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 included 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 concluded September 30, 2021, with the sunset of federal funding. Provider participation in the program was voluntary and required CCO involvement. By the end of the Program, over \$2.4 million had been spent successfully connecting 72 unique entities (109 individual sites), including: 11 behavioral health practices, four oral health clinics, 50 critical physical health entities, and seven major trading partners (hospital/health system/major referral center). The [HIE Onboarding Closure Summary](#) provides a program wrap up summary with more information about who this program served and lessons learned.

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).

Program Contact

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

Get involved with Oregon Health IT

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