Health Information Technology Oversight Council (HITOC) Report to the Oregon Health Policy Board

February 4, 2020

Susan Otter, Director of HIT, OHA
Erick Doolen, HITOC Chair
Amy Henninger, MD, HITOC Vice Chair



Items for today

- Brief background on HITOC and 2019 Progress
- HITOC Strategic Plan Update Process
- HITOC Recommended 2020 Workplan
- HITOC Membership Changes Recommended Slate
- Request OHPB Action



Brief Background on HITOC and 2019 Progress



Oregon's Health IT Strategic Plan

- OHA is transforming the health care system; the core of those efforts is the coordinated care model
- The coordinated care model relies on health IT to succeed
- Coordinating health IT efforts at the state level is important because there are so many moving parts
- HITOC is charged with creating a statewide strategic plan for health IT in Oregon



How does health IT support the coordinated care model?

Health IT helps		
Consumers/patients, their families, and their caregivers	Get access to their own health information and participate in their care	
Providers	Securely gather, store, and share patients' clinical data so the care team can work together to provide care	
Providers	Track and report on quality measures, which support efforts to hold the health care system accountable for delivering high-quality care	
CCOs, health plans, and providers	Analyze data to identify disparities and identify patients who need more care to allow targeted efforts to improve health	



OHPB's Responsibilities Re: HITOC

- Charter HITOC
- Set HITOC's priorities
- Appoint HITOC's members and decide length of terms
- Consider HITOC's recommendations and take action when appropriate



HITOC's Responsibilities

The Oregon Legislature created HITOC to ensure health system transformation efforts are supported by HIT. HITOC's responsibilities under the law/charter are to:

- Explore HIT policy
- Plan Oregon's HIT strategy
- Oversee OHA's HIT efforts
- Assess Oregon's HIT landscape
- Report on Oregon's HIT progress
- Monitor Federal HIT law and policy



Vision/Goals for HIT-Optimized Health Care

Vision: A transformed health system where HIT efforts ensure that the care Oregonians receive is optimized by HIT.

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, and 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 to Their Own Health Information

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

Policy Priorities and HITOC's Goals

Health System Transformation Policy Priority*	Health IT Goal/Area	
Increase access to health care	Goal 1: Share patient information across the care	
Enhance care coordination	team Goal 3: Patients can access their own information and engage in their care	
Children's Health		
Cost Containment	Goal 2: Use data for system improvement	
Pay for outcomes and value		
Measure progress		
Improve health equity		
Shift focus upstream; Address the social determinants of health	Emerging area: Health IT supports social determinants of health and health equity	

^{*}From OHPB's Action Plan for Health and workplan; italics represent 2019 OHPB Priority areas

HITOC's 2019 Progress

HITOC Role	2019 HITOC Work	
Explore HIT Policy Areas	 SDOH and health IT; HIT Commons: Community Information Exchange Health Equity Definition and health IT Health IT and patient engagement 	
Plan HIT Strategy	 Behavioral health HIT workplan 2021 Strategic Plan Update - planning 	
Oversee OHA's HIT Efforts	 Launched in 2019: Clinical Quality Metrics Registry Oregon Provider Directory HIE Onboarding Program CCO 2.0 HIT Roadmaps 	
Assess HIT Landscape, Report on Progress	 Major work in HIT Data reporting on EHR and HIE progress HIT Commons: Community Information Exchange Environmental Scan 	
Monitor Federal Policy	Federal proposed interoperability rules; Trusted Exchange Framework	
HITOC Membership	 Oriented new members, who significantly increased HITOC's consumer representation and diversity Updated HITOC bylaws to allow for leadership development 	

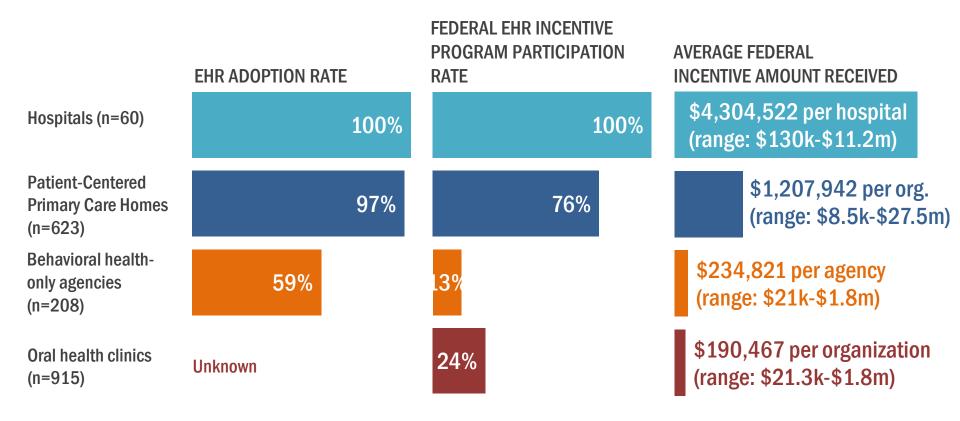
Health IT Progress: Key Areas

- Providers are using electronic health records (EHRs or EMRs) at high rates overall
- Health information exchange options have grown significantly
- Health IT supports value-based payment
- Health IT can help address social determinants of health



OREGON EHR ADOPTION IS VERY HIGH OVERALL, BUT DIGITAL DIVIDES EXIST.

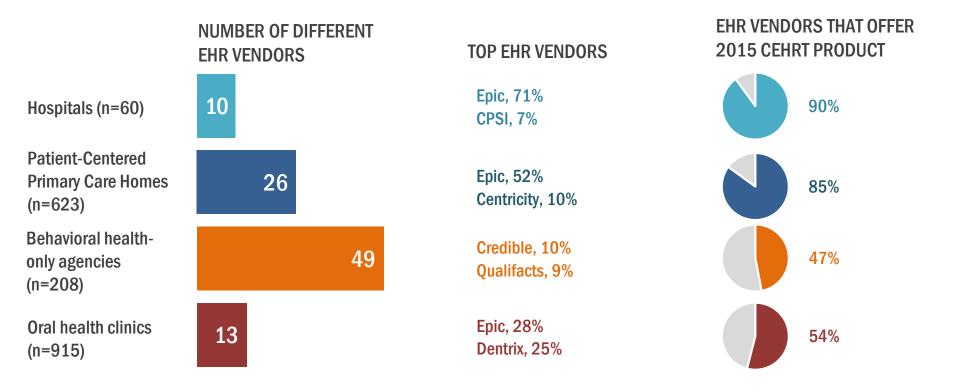






OREGON EHR ADOPTION IS VERY HIGH OVERALL, BUT DIGITAL DIVIDES EXIST.







Electronic health information sharing, or health information exchange (HIE), is central to Oregon's health reform objectives of high quality, coordinated care and paying for value instead of volume.





IN THE PAST 5 YEARS, OREGON HAS SEEN UNPRECEDENTED GROWTH IN HIE.



2014	2019	2019	
Emergency Department Information Exchange (EDie) implementation just beginning	hospital and emerge	rations have real-time access to ncy department event notifications n hospitals in Oregon and its	
Primary method for moving care summaries is Direct secure messaging or EHR-based tools	provider groups have	th systems, and their affiliated on-demand access to care heir patients receive outside their	
Five regional HIEs (one in development) cover about 40% of Oregon counties; limited services available		ailable in half of Oregon's counties nt role in their communities	
Virtually no electronic data sharing among different provider types, with fax being the primary method		d oral health providers are using HIE; tant patient information with ders	



IN THE PAST 5 YEARS, OREGON HAS SEEN UNPRECEDENTED GROWTH IN HIE.

2014 2019

Virtually no connections among disparate networks

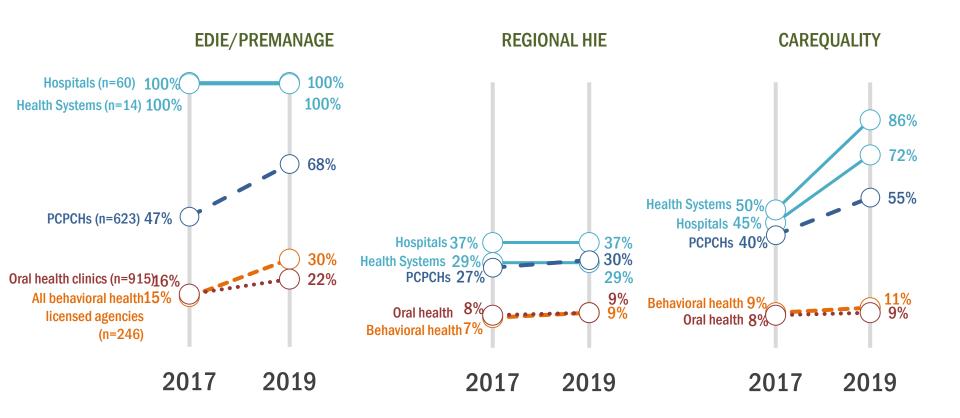
Providers use multiple HIE networks; some have connected to each other

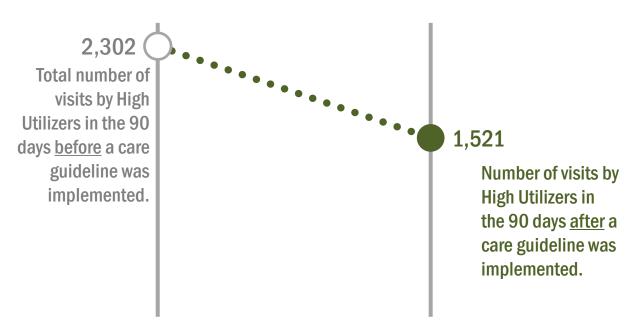
Although Oregon's Prescription Drug Monitoring Program (PDMP) was launched in 2011, there was no EHR integration Providers can access opioid prescription data more easily; providers with health IT integration access it at much higher rates

Health IT for population management is in its infancy; value-based payment is not a major part of Oregon's landscape

Providers use clinical data entered, stored, and shared by health IT to better manage populations and target interventions. This also supports the dramatic increase in value-based payment arrangements.







Before Care Guideline Creation

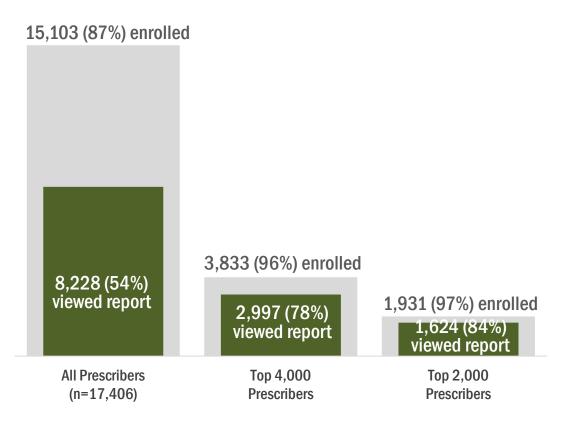
After Care Guideline Creation



PROVIDERS CAN ACCESS OPIOID PRESCRIPTION DATA MORE EASILY; PROVIDERS WITH HEALTH IT INTEGRATION ACCESS IT AT MUCH HIGHER RATES.



PDMP enrollment is increasing among top prescribers.



Prescribers and pharmacists can now access Prescription Drug Monitoring Program (PDMP) information within their health IT

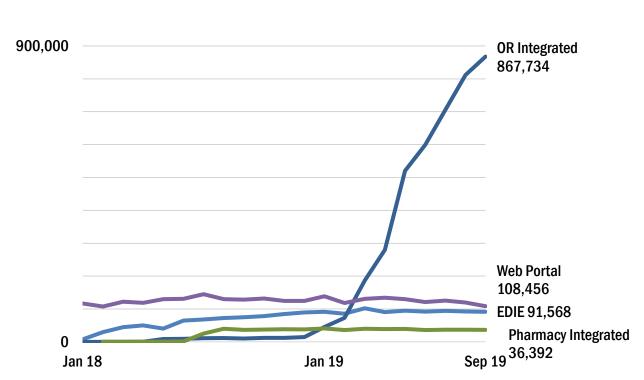
LIVE WITH INTEGRATED PDMP ACCESS

Total Prescribers	10,656
Prescribers - EDie	700
Prescribers – EHR and HIE	9,956
Pharmacy Chains	7
Pharmacy sites	367



PROVIDERS CAN ACCESS OPIOID PRESCRIPTION DATA MORE EASILY; PROVIDERS WITH HEALTH IT INTEGRATION ACCESS IT AT MUCH HIGHER RATES.





Due to their automation, query rates via integrated EHRs/HIT have increased significantly.

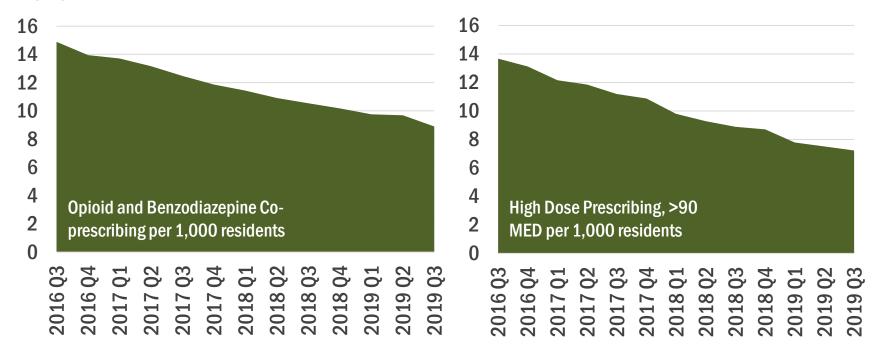
These high rates of automated queries yield significantly higher rates of data available to providers at the point of care.

22% of prescribers are clicking on and viewing PDMP reports when a query returns PDMP data for a patient being seen. Access to PDMP data at the point of care supports providers making informed prescription decisions for improved patient outcomes.



OREGON HAS SEEN A DECREASE IN RISKY PRESCRIBING.

Rates of co-prescribing and high-dose prescribing have decreased by nearly 50% since 2016.





LOOKING AHEAD FOR BEHAVIORAL HEALTH AGENCIES



Behavioral health organizations need EHRs that meet their unique information capture and management needs. These EHRs must be interoperable and support behavioral health reporting requirements, such as electronic metrics reporting.

Support needs identified in the Workgroup report:

Navigating the EHR vendor landscape

HIT education

Shared learning opportunities

Financial incentives

EHR market analysis

Support from larger, better resourced organizations



THE ROAD AHEAD

HITOC's strategies must consider HIE gaps and the complex, fluid HIE environment.

- The high cost of EHRs contributes to lower EHR adoption rates for smaller organizations, so these organizations tend to have less access to HIE through nationwide query-based networks.
- Oregon providers, across the board, typically need multiple HIE tools to meet all their HIE needs.
- There are limited HIE options available today for complex care coordination.
- 42 CFR Part 2 remains a barrier to exchange, due to perceptions and the regulation itself.
- Major changes at the federal level will affect Oregon stakeholders over the next five years.



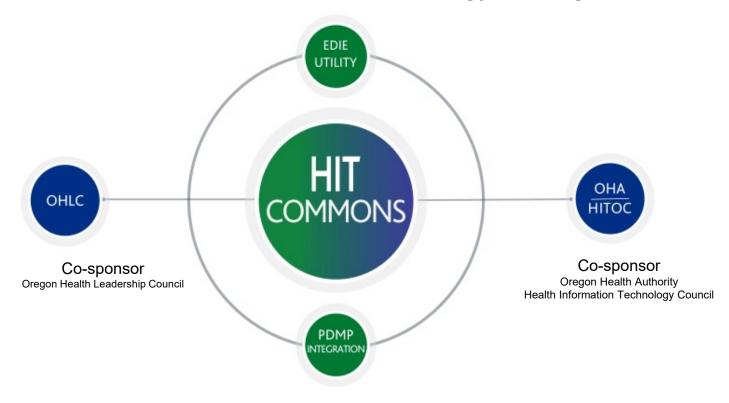
Progress Highlight: HIT Commons

- HIT Commons is a public/private partnership to govern high priority, statewide HIT Initiatives with OHA as public sponsor.
- Mission: to accelerate and advance Health Information Technology adoption and use across the state.
- Build off Oregon's history of successful collaboration such as EDie/PreManage.
- Intended to help connect existing HIT systems, support statewide solutions.
- OHA is voting member of Board and provides significant funding via state and federal funding opportunities.



HIT Commons

A shared public/private governance partnership to accelerate and advance health information technology in Oregon



EDIE—Emergency Department Information Exchange PDMP – Prescription Drug Monitoring Program

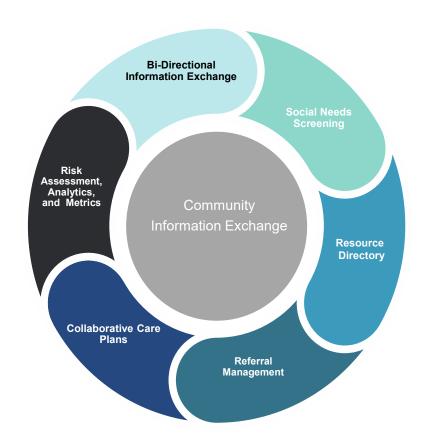


HIT Commons: Community Information Exchange

- Oregon health system transformation to address social determinants of health (SDOH):
 - Oregon Health Policy Board focus
 - CCO 2.0 SDOH requirements
 - HB 3076 Community Benefit (SDOH floor for hospital/clinic spend)
 - HIT Oversight Council's strategic planning work
- Oregon health systems and communities starting to invest in SDOH infrastructure
- Collaborative work could ensure that efforts are pooled and standardized to accelerate progress, reduce variation and improve effectiveness

Working Definition: Oregon Community Information Exchange (CIE)

- A CIE connects health care, human and social services partners to improve the health and well-being of communities and address health disparities and health equity
- A bi-directional CIE Technology
 Platform could provide many functions, including statewide social services directory, shared risk assessment capabilities, real-time closed loop referral management, collaborative care coordination, and standardized metrics, and data analysis.



Note: this is a working definition in a rapidly evolving space.



Environmental Scan Reveals Multiple Players Active in CIE



http://www.orhealthleadershipcouncil.org/wp-content/uploads/2019/09/Oregon-CIE-Environmental-Scan-August-31-2019.pdf



Aligning CIE Streams of Work

- HIT Commons: Oregon CIE Advisory Group
 - Developing a Statewide CIE Roadmap by end of 2020
- Oregon Health Leadership Council (OHLC)
 - Working in partnership with early adopters to develop a coordinated CIE implementation with Unite Us (vendor)
- OHA's Office of Health IT
 - Convening an internal OHA/Dept of Human Services CIE workgroup
- HITOC
 - Strategic Plan Update stakeholder input



CIE Advisory Group: Key Topics

Social needs screeners/assessments Resource directories Community & Community Based Organization (CBO) engagement strategies Privacy & legal agreement structure or best practices Metrics, reporting, evaluation Workflows & learning collaboratives

Recommended HITOC Priorities for 2020 and Strategic Plan Update Process



Proposed 2020 Major HITOC Priorities

- Strategic Plan Update, Stakeholder Engagement
 - Health information exchange, system improvement/value-based payment, patient engagement
 - Emerging area: social determinants of health and Community Information Exchange
 - Emerging area: health IT and health equity
- Landscape/policy work
 - Exploratory work with Public Health and health IT
 - CCO 2.0 Health IT Roadmaps, EHR/HIE data
- Federal rule/policy changes and sustainability
- Oversight work: partnerships and programs
 - Behavioral health HIT Workplan



Exploring Social Determinants of Health and HIT

- HIT is critical to OHA's SDOH work
 - To assess an individual's SDOH needs
 - To coordinate care between providers and SDOH organizations
 - To manage referrals for addressing SDOH
 - To use SDOH data for risk modeling, population management
- 2020 HITOC work:
 - Support for HIT Commons Community Information Exchange efforts
 - Stakeholder input and Strategic Plan work



Exploring Health Equity and HIT

- HITOC's work includes:
 - Input and reflection on Health equity definition
 - Coordination with Health Equity Committee
 - Understanding how EHRs standards match to REAL-D
 - Clinical Quality Metrics Registry future capacity to track patientlevel data
 - Oregon Provider Directory captures demographic information
 - Further exploration of connection between health IT and health equity



Strategic Plan Update: HIT to support Health System Transformation

Health System Transformation Policy Priority*	Health IT Goal/Area	
Increase access to health care	Goal 1: Share patient information across the care	
Enhance care coordination	team Goal 3: Patients can access their own information and	
Children's Health	engage in their care	
Cost Containment		
Pay for outcomes and value	Goal 2: Use data for system improvement	
Measure progress		
Improve health equity	Emerging area: Health IT supports social determinants of health and health equity	
Shift focus upstream; Address the social determinants of health		

^{*}From OHPB's Action Plan for Health and workplan; italics represent 2019 OHPB Priority areas

Strategic Plan Update: Centered on Goals

Health IT Goal/Area	Description
Goal 1: Share Patient Information Across the Care Team	Oregonians have their core health information available where needed so their care team can deliver personcentered, 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, and 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 Health Information and Collaborate 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
Emerging Area: Health IT supports social determinants of health and health equity	

Strategic Plan Update: Process



- Join a listening session in person or by phone. Register at go.usa.gov/xpzy2.
- Submit a written comment (Feb. 1 Apr. 30) at go.usa.gov/xpzVt
- Stay up to date at our website go.usa.gov/xpeQc



Strategic Plan Update: 2020 Stakeholder Listening sessions

February:

- Technology Partner Listening Session
- Tribal/OHA Monthly Meeting
- Oral Health Listening Session

March:

- CCO Listening Session
- Consumer Listening Session
- HIT Commons Governance Board Meeting
- Community Information Exchange Advisory Group Meeting

April:

- Behavioral Health Listening Session
- General Listening Session



OHPB ACTION: 2020 HITOC Priorities

Action: Are these the right priorities for HITOC in 2020?

- Strategic Plan Update, Stakeholder Engagement
 - Health information exchange, system improvement/value-based payment, patient engagement
 - Emerging area: social determinants of health and Community Information Exchange
 - Emerging area: health IT and health equity
- Landscape/policy work
 - Exploratory work with Public Health and health IT
 - CCO 2.0 Health IT Roadmaps, EHR/HIE data
- Federal rule/policy changes and sustainability
- Oversight work: partnerships and programs
 - Behavioral health HIT Workplan

HITOC Membership – Proposed Changes



Learn more about Oregon's HIT/HIE developments and Subscribe to our email list!

www.HealthIT.Oregon.gov

HITOC

www.oregon.gov/oha/HPA/OHIT-HITOC

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Supplemental Materials for Report to Oregon Health Policy Board, February 4, 2020



Supplemental Materials

- 2020 Health Information Technology Oversight Council (HITOC) Draft Work Plan (p. 2)
- HITOC Key Strategies Summary: 2017, 2019, 2021 (p.3-4)
- 2021 HITOC Strategic Plan Update 2020 process and Current Goals/Strategies (p.5-8)
- HITOC Membership Proposed Changes (separate attachment)

Reference materials:

- 2019 HITOC Data Report, HIE Overview, HIE in Oregon: Tale of Two Worlds;
 www.oregon.gov/oha/HPA/OHIT HITOC/Documents/2019HITReport HIEOverview TwoWorlds Combined.pdf
- HIT Commons: Community Information Exchange Environmental Scan and CIE Advisory Group: http://www.orhealthleadershipcouncil.org/oregon-community-information-exchange-ocie/

Other background materials:

- Oregon HIT Programs and Partnerships (overview):
 https://www.oregon.gov/oha/HPA/OHIT-HITOC/Documents/101 Office of Health IT.pdf
- HITOC Overview: https://bit.ly/2Wfxeh2
- HIT Roles: HITOC, HIT Commons, OHA, OHPB: https://www.oregon.gov/oha/HPA/OHIT-HITOC/Documents/Health IT Roles OHBP-OHA-HITOC-HITCommons.pdf
- HITOC Behavioral Health HIT Workgroup Report and Scan (Resources section of webpage): https://bit.ly/2DuRyUl
- Oregon's Strategic Plan for Health Information Technology (HIT) and Health Information Exchange (2017-2020): https://bit.ly/2CsrDer

Get involved with Oregon Health IT

Office of Health Information Technology: <u>HealthIT.Oregon.gov</u>

Join the listserve: bit.ly/2VYgoDB

Supplemental Materials for Report to Oregon Health Policy Board, February 4, 2020



HITOC 2020 Draft Work Plan Areas

Strategic work:

- 2021 Strategic Plan Update and stakeholder/partner engagement
- Next steps for Health equity and health IT
- Next steps for Patient engagement through health IT
- Evolution of Health Information Exchange: Networks of networks efforts
- Potential OHPB Priority Topics (e.g., Cost Growth Target)

Exploratory and Policy Context

- Exploratory work: Public health and health IT
- Impacts of the <u>new federal interoperability rules</u>, <u>Trusted Exchange Framework and Common Agreement (TEFCA)</u>
- Changing health IT funding: Sustainability for HIT work
- Landscape assessment: CCO 2.0 Health IT Roadmaps and EHR/HIE Data

Oversight

 Continued oversight of current health IT programs/partnerships and Behavioral Health HIT workplan

HITOC 2019 Major Bodies of Work

- Exploratory work in social determinants of health and <u>Community Information Exchange</u> concept
- Preliminary work in health equity (definition and the role of health IT)
- Exploratory work in patient engagement and health IT
- Next steps for statewide health information sharing efforts, including review of <u>proposed</u> <u>federal policy</u>
- Wrap up planning for behavioral health and HIT work adopted BH HIT Workplan
- Launched several efforts: <u>Clinical Quality Metrics Registry</u>, <u>Oregon Provider Directory</u>, <u>HIE Onboarding Program</u>, CCO 2.0 HIT Roadmaps
- Major work on <u>2019 HITOC Data Report</u> on EHR and HIE progress
- Prepare for HITOC Strategic Plan Update
- HITOC membership orientation to new members, updated bylaws re: leadership development

Note: Ongoing priorities include continued oversight work on partnerships/programs

^{*}Full HITOC 2020 Draft Workplan: https://www.oregon.gov/oha/HPA/OHIT-HITOC/Documents/2020HITOCWorkPlan_Draft.pdf

Supplemental Materials for Report to Oregon Health Policy Board, February 4, 2020



Status of HITOC Key Strategies: 2017, 2019, 2021

	Concept	Planning	Operational	Suspended	Ended	ı
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	Status in 2017	Status: end of 2019	Status by end of 2021		
Support for Electronic Health Record (EHR) Adoption/Use					
Medicaid EHR Incentive	Operational	Operational	Ends 2021 as planned		
Program (MEHRIP)	since 2011				
Oregon Medicaid	Operational	Ended May 2019 as			
Meaningful Use Technical	since 2016	planned			
Assistance Program					
(OMMUTAP)					
Promote EHR Comparison		Concept – engage Oregon	Engage Oregon		
Tool from Office of the		stakeholders in input to	stakeholders in planning –		
National Coordinator for		ONC	2020/2021		
HIT			Promote launch - 2022		
Implement Core HIT Infrastru	ıcture				
Oregon Common	Planning	Suspended - 2018			
Credentialing Program					
(OCCP)					
Oregon Provider Directory	Planning	Soft-Launch - Fall 2019	Ongoing operations,		
(OPD)			expanded functionality to		
			support statewide use		
HIT Commons: adoption	Concept	Supporting OPD soft	Ongoing support TBD		
& spread support: OPD		launch - 2019-2020			
Flat File Directory for	Operational	Operational	Transition to OPD - 2020		
Direct secure messaging	since 2014				
addresses					
Clinical Quality Metrics	Planning	Initial launch for MEHRIP -	Ongoing operations,		
Registry (CQMR)		Jan. 2019, Launch for CCO	expanded functionality		
		incentives - late 2019	(e.g., using enrollment		
			data for multi-payer uses)		
Spread Health Information E	_ <u> </u>				
CareAccord	Operational	Ended mid-2017			
	since 2011				
HIE Onboarding Program	Planning	Launched - Jan 2019	Ends 2021 as planned		
OHA's PreManage Medicaid	Launched 2016	Operational	Ongoing operations		
Subscription					
Network of Networks for	Concept	Planning			
Statewide HIE					





	Status in 2017	Status: end of 2019	Status by end of 2021
		(on hold awaiting federal	
		TEFCA and rulemaking)	
Expanding Interoperability -	Federal 2-year		
ONC Cooperative	HIE grant,		
Agreement (subrecipient:	ended July 2017		
Reliance)	as planned		
Behavioral Health	Concept	Finalized - late 2019	Ongoing updates
Information Sharing Toolkit			
(42 CFR Part 2)			
Shared Governance and High			
HIT Commons	Planning	Operational since 2018	Ongoing operations
Emergency Department	Operational	Operational (under HIT	Ongoing operations
Information Exchange	since 2015	Commons since 2018)	
(EDie)/PreManage			
Prescription Drug	Planning	Operational since 2018	Ongoing operations
Monitoring Program			
(PDMP) Integration			
initiative		Concert	CIF Doodway 2020
Oregon Community		Concept	CIE Roadmap - 2020
Information Exchange			Implementation of CIE
(CIE)			Roadmap - 2021
Other: Policy and Data work		Planning - 2018	All 2020 LUT Boodmans
CCO 2.0: HIT Roadmaps		Draft CCO HIT Roadmaps	All 2020 HIT Roadmaps approved - spring 2020;
		submitted with RFA – April	Annual Update - spring
		2019	2021
		Most CCO 2020 HIT	2021
		Roadmaps approved –	
		Dec. 2019	
CCO 2.0: HIT Data on	Concept	Planning	Baseline HIT data
EHR/HIE use by clinic			reported - fall 2020,
,,			Annual Update - spring
			2021
HITOC Data reporting, data	Planning	2019 HITOC Data report on	Ongoing data reporting
"dashboards"		EHR/HIE	
Behavioral Health HIT work	Behavioral	BH HIT Workgroup report	Ongoing work and BH HIT
	Health HIT	– 2018,	workgroup
	Environmental	OHA BH HIT Workplan -	
	Scan	2019	

The Oregon Health Authority and Health IT: Strategic Plan 2021 Update



What is Oregon's strategic plan for health IT?

OHA is transforming the health care system, and the core of those efforts is the coordinated care model. The coordinated care model relies on health IT to succeed. Coordinating health IT efforts at the state level is important because there are so many moving parts. Therefore, the Oregon legislature charged HITOC with creating a statewide strategic plan for health IT for everyone in Oregon.

Health IT helps...

Consumers/patients, their families, and their caregivers: Access their own health information and participate in their care

Providers: Securely gather, store, and share patients' clinical data so the care team can work together to provide care; track and report on quality measures, which supports efforts to hold the health care system accountable for delivering high-quality care

CCOs, health plans, and providers: Analyze data to identify disparities and find patients who need more care to allow targeted efforts to improve health

Oregon and Health IT: Quick Orientation

Providers are using EHRs/EMRs at high rates overall. Electronic health records or electronic medical records (EHR/EMR) support patient care and patient access to their own information (via patient portals); the data they gather supports care coordination, value-based payment, and population management.

Status: Overall EHR adoption rate is higher than the national average, number of providers using more advanced EHRs is growing, "digital divides" remain

Health information exchange options have grown significantly. HIE securely moves health information between organizations, supporting care coordination, value-based payment, and population management.

Status: EDie/PreManage (Collective platform) have been a standout success, national networks provide access to care summaries, regional HIEs and other efforts support CCOs and communities, no single tool can meet all needs, "digital divides" remain

Health IT supports value-based payment. CCOs and providers need health IT tools and processes to manage value-based payment arrangements.

Status: CCOs have developed Health IT Roadmaps that include plans for health IT and value-based payment which will support major growth in value-based payment arrangements under CCO 2.0; most CCOs, health plans, and providers will need to develop new health IT capacity to manage value-based payment

Health IT can help address social determinants of health. Health IT tools can support social needs assessments, risk scoring, and connect health care with social services.

Status: Providers are exploring using health IT to assess social needs; work is underway to explore options for community information exchange, connecting health care providers with social services; this area raises new challenges with technology, privacy, and care coordination

Gathering your input: health IT goals and question prompts

HITOC wants to hear your input on what strategies are going well and where Oregon needs to change course. Please look at the health IT goals below and reflect on how things are going. The optional question prompts below can help you organize your input, but you are not required to use them.

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.

Emerging area: Health IT supports social determinants of health and health equity.

Optional question prompts (all questions can be applied to all goals)

- 1. How is this going for you today?
- 2. What would achieving this goal look like?
- 3. Where are you experiencing impacts?
- 4. What has been most helpful?

- 5. Where are the biggest challenges/barriers?
- 6. What are the right roles for state, providers, CCOs/health plans, and others?
- 7. What changes would have the biggest positive impact? Biggest negative impact?

Submitting your input

- Register for a listening session (in person/webinar): go.usa.gov/xpzy2
- Submit written comment (Feb. 1 Apr. 30). We encourage written comments!: go.usa.gov/xpzVt
- Make a public comment at a HITOC meeting: go.usa.gov/xpJT8

Stay Connected

You can find more information about the strategic plan update at our website: go.usa.gov/xpeQc

Program Contact

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Join the listserv: bit.ly/2VYgoDB

Oregon's health IT goals advance health system transformation goals

Health System Transformation Policy Priority	Health IT Goal/Area	
Increase access to health care	Goal 1: Share patient information across the care team	
Enhance care coordination	Goal 1: Share patient information across the care team	
Pay for outcomes and value	Goal 2: Use data for system improvement.	
Measure progress	Goal 2: Use data for system improvement.	
Improve health equity	Emerging area: Health IT supports social determinants of health and health equity	
Shift focus upstream	Emerging area: Health IT supports social determinants of health and health equity	

Strategies for Oregon's health IT goals

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.

- Electronic health records (EHR/EMR)
 - Medicaid EHR Incentive Program go.usa.gov/xpzPn
 - Complete: Oregon Medicaid Meaningful Use Technical Assistance Program go.usa.gov/xpzPd
- Electronic health information exchange (HIE)
 - EDie/PreManage (Collective platform), including Medicaid Subscription bit.ly/2Quu6NJ
 - Prescription Drug Monitoring Program Integration initiative bit.ly/2FodEbn
 - Oregon Provider Directory and Flat File Directory go.usa.gov/xpzPz
 - HIE Onboarding Program go.usa.gov/xpzPJ
 - Network of networks for statewide HIE go.usa.gov/xpzPS
 - Planned: Behavioral Health Information Sharing Toolkit (42 CFR Part 2)
 - Complete: Expanding Interoperability ONC Cooperative Agreement
- Behavioral Health and Health IT Workplan: go.usa.gov/xpzPE
- Shared Governance: HIT Commons public/private partnership <u>bit.ly/37CNJsD</u>
- CCO 2.0 EHR and HIE support requirements go.usa.gov/xpJDR

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 1 work on EHRs and HIE is foundational

- Clinical Quality Metrics Registry go.usa.gov/xpumR
- Health IT Roadmaps for CCOs (ensuring health IT in place for value-based payment arrangements and population health efforts) go.usa.gov/xpJDR

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.

- Goal 1 work on EHRs and HIE is foundational
- CCO 2.0 Year 2 requirement for health equity plans: patient engagement with health IT go.usa.gov/xpJWc (p. 71)
- HITOC exploration of barriers and opportunities from consumer perspectives go.usa.gov/xpJWp (June 2019 HITOC)
- Complete: State Innovation Model (SIM) grant for OpenNotes

Emerging area: Health IT supports social determinants of health and health equity.

- HIT Commons: Exploration of Oregon Community Information Exchange (CIE) bit.ly/2QOiaW1
- Potential for EHRs to track demographic data to help identify disparities (ONE system tracks this data for OHP members) go.usa.gov/xpJWp (October 2019 HITOC)
- Clinical Quality Metrics Registry future capacity to track patient-level data go.usa.gov/xpumR
- Oregon Provider Directory captures demographic information go.usa.gov/xpJWp (October 2019 HITOC)
- Exploration of connection between health IT and health equity go.usa.gov/xpJWp (October 2019 HITOC)