House Bill 4150 Draft Report: Supporting Statewide Community Information Exchange

Executive Summary

House Bill (HB) 4150 (2022) directs the Health Information Technology Oversight Council (HITOC) to convene one or more groups to explore strategies to accelerate, support, and improve secure, statewide community information exchange (CIE) and provide recommendations to the legislature in a draft report by September 15, 2022, and a final report by January 31, 2023. To fulfill these requirements HITOC chartered a CIE Workgroup and sought input from community-based organizations (CBOs) on CIE via interviews and a survey. CBOs deliver many needed services and supports to communities in Oregon and are critical partners who receive referrals through CIE to support social needs. This report reflects the work of the CIE Workgroup, community perspectives via CBO input, and HITOC comment.

Value of CIE and considerations: Supporting health equity and efficiency

When organizations use CIE, people get efficiently connected to resources they need, like food, housing, or transportation; to tell their story fewer times, reducing retraumatization; and a person-centered approach to meeting their needs.

Organizations benefit from CIE by improving care coordination across a variety of health and social service partners by sharing available resources, sending referrals, and "closing the loop" on referrals through a web-based tool.

Decision-makers, such as communities, organizations, health care, and policy makers can use data on existing community resources to understand needs, identify gaps, and **plan for future social services and supports.**

CIE Definition

A network of collaborative partners using a multidirectional technology platform to connect people to the services and supports they need.

- Partners may include human and social service, healthcare, and other organizations.
- Technology functions must include closed loop referrals, a shared resource directory, and informed consent.

However, these potential benefits require substantial investment of time and resources to achieve. Widespread and consistent CIE use is needed for success. In addition, implementing CIE in an under-resourced health and social care system will be difficult if the broader need for more services and resources is not also addressed.

Preliminary recommendations to the legislature

Overarching priorities: To ensure CIE efforts reach the ultimate goal of supporting health equity, this report details actionable steps to support health equity throughout each recommendation. The CIE Workgroup, CBO input, and HITOC aligned on several priorities:

- CIE requires investment in systems change, as well as building trust and relationships: Sustainable investment is essential to achieve the intended value of CIE.
- 2. **Support for CBOs is paramount**: CBOs are a priority partner for the success of CIE. CBOs must be supported in these efforts and at the table in decision making.

- Equity, accessibility, and person-centered: Ensuring health equity across CIE efforts
 necessitates prioritizing culturally and linguistically specific organizations. CIE needs to be
 person-centered and directed, and adequately address literacy, language, and digital
 access needs.
- 4. **Governance and alignment:** Inclusive and neutral statewide governance is needed.
- 5. Privacy and accountability: Privacy and security of data must be prioritized.

Community perspectives: CBOs are critical to the success of CIE and were actively engaged to inform this report. The following recommendations are summarized from surveys and interviews with **99** CBOs:

- 1. Offer robust funding to support CBO use of CIE
- 2. Promote **equity**, accessibility, and accountability
- 3. Advance privacy, data protections
- 4. Provide **technical assistance**, training, and education
- 5. Create a **statewide coordinating entity** to promote alignment across organizations, sectors, and systems
- 6. Prioritize **relationships**, communication, and engagement
- 7. **Align CIE efforts** with other systems level efforts that are crucial to ensuring health equity

CIE Workgroup recommendations: HITOC supports all recommendations from the CIE Workgroup and notes the significant alignment with the CBO community recommendations. **The CIE Workgroup recommends that legislation support:**

- 1. **CBO participation in CIE:** Support should include ongoing sustainable funding and grants, technical assistance, coordination and convening, and education.
- Additional partners to participate in CIE: Support should include sustainable funding, grants, and leveraging federal funding to offset costs; technical assistance; coordination and convening; and education. Additional partners could include behavioral, oral, and physical health organizations, local public health or county social services, safety net clinics, and others.
- 3. Oregon Health Authority (OHA) and Oregon Department of Human Services (ODHS) roles in statewide CIE efforts: These should include OHA and ODHS program use of CIE where appropriate, supporting neutral statewide governance, leveraging policy and contractual levers, supporting CBOs' and additional partners' participation in CIE, and supporting and participating in coordination.
- 4. A statewide CIE data program: This should include data governance, aggregation of data, datasets, technical assistance, dashboards and reports, and evaluation. The program should be guided by principles that center equity, transparency, neutrality, accessibility, accountability, security, and community/individual data ownership and decision-making.

Full report: https://www.oregon.gov/oha/HPA/OHIT-
HITOC/Documents/HB4150DraftReport.SupportingStatewideCIE.pdf