

Health IT Policy

HITOC Updates

HITOC Strategic Plan and Annual Priorities, Contact:
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***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 input to inform the strategic plan. Strategic Plan Update efforts were placed on hold due to the pandemic, until August 2021.*

Areas HITOC will explore under the Strategic Plan Update include Community Information Exchange (CIE), statewide Health Information Exchange (HIE), patient access to data, Electronic Health Record (EHR) adoption and implementation, public health, and more. As part of this work HITOC chartered two workgroups, the HIE and CIE Workgroups. For additional information on their work see the Oregon Health IT Program: Partnerships, Programs and Initiatives section below.

HITOC's next meeting is [August 4](#) from 12:30-3:30 and will focus on reviewing draft legislative recommendations from the CIE Workgroup which will also feed into the Strategic Plan Update. Members will hear updates from both the HIE and CIE Workgroups and will be discussing proposed legislative concepts and additional legislative priorities.

Community Information Exchange (CIE) Workgroup,

Contact: Hope.Peskin-Shepherd@dhsosha.state.or.us

The HITOC-chartered [CIE Workgroup](#) began meeting monthly in March 2022. The CIE Workgroup brings together individuals representing Oregon's diverse landscape of community, health care, and social services partners to provide recommendations on strategies to accelerate, support, and improve CIE across the state. The CIE Workgroup's vision is that all people living in Oregon and their communities have access to community information exchange that creates seamless trusted, person-centered connections and coordination to meet people's needs, support community capacity, and eliminate siloes to achieve health equity. Workgroup recommendations will inform the HB 4150 legislative reports, HITOC's Health IT Strategic Plan for Oregon and OHA efforts. See the goals and full scope in the [CIE Workgroup Charter](#). For more information on CIE please see the [OHA CIE Website](#).

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.

The CIE Workgroup developed Preliminary Recommendations in four areas between April and July 2022 to inform HITOC's draft report to the legislature due September 15, 2022 as required under House Bill 4150 (2022). These may be revised by the Workgroup prior to HITOC's final report to the legislature due January 31, 2023. Preliminary recommendations include:

- [Preliminary Recommendations: Support for Community-based Organizations \(CBOs\) to Participate in CIE](#)
- [Preliminary Recommendations: Support for Additional Partners to Participate in CIE](#)
- [Preliminary Recommendations: OHA and Oregon Department of Human Services \(ODHS\) Roles in CIE](#)
- [Preliminary Recommendations: Statewide CIE Data Program](#)

The next CIE Workgroup [meeting](#) will be August 16, 2022. The meeting will focus on the CIE community engagement survey and interviews conducted with CBOs. Please see below for additional key dates related to HB 4150 and the CIE Workgroup:

- Aug. 4: HITOC meeting to finalize recommendations for draft report
- Sept. 15: HITOC submits draft report to the legislature for HB 4150
- Nov. 15: CIE Workgroup meeting to finalize recommendations to HITOC for final report
- Dec. 8: HITOC meeting to finalize recommendations for final report
- Jan. 31, 2023: HITOC submits final report to the legislature for HB 4150

Health Information Exchange (HIE) Workgroup, Contact: Luke.A.Glowasky@dhs.ohs.state.or.us

HITOC chartered the HIE Workgroup in April 2022 to provide recommendations to HITOC and OHA on strategies to accelerate, support, and improve HIE across the state. Recommendations should reflect perspectives from all interested parties and partners, specifically including those serving communities that face health inequities. The HIE Workgroup recommendations will inform HITOC's HIT Strategic Plan for Oregon and other OHA efforts. See the goals and full scope in the [HIE Workgroup Charter](#). For more information on HIE, see the [HIE Overview](#) and the OHA [HIE Workgroup website](#).

The HIE Workgroup had its second and third meetings in June and July, respectively. The Workgroup has initially focused on brainstorming potential areas where state policy or legislation could support the vision of HITOC and the Workgroup, and initial legislative considerations around HIE for the HB 4150 September 15, 2022, HITOC report to the legislature. These considerations will be shared with HITOC for review at its August meeting. The Workgroup has developed a vision statement for HIE in Oregon and associated short-term strategies recommended for further study. The next meeting will be August 26, 2022 – meeting information will be posted on the [OHA HIE Workgroup website](#).

Health IT Landscape and Environmental Scan, Contact: Marta.M.Makarushka@dhs.ohs.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.

2022 Health IT Report to HITOC: OHIT revised the 2019 Health IT Report for HITOC to include 2021-collected data and Key Concept updates. Highlights from this [2022 Health IT Report](#) were presented at the June HITOC meeting. The 2022 report included CCOs' 2021 health IT data collection and reporting efforts that collected EHR and HIE information from CCO-contracted provider organizations. In addition, a more detailed presentation is planned for a HITOC education session in September.

CCO Health IT Roadmaps and Support, Contact: Marta.M.Makarushka@dhs.ohs.state.or.us

Coordinated Care Organizations (CCOs) are contractually required to maintain an OHA-approved Health IT Roadmap. CCOs are required to submit an annual Updated Health IT Roadmap to OHA reporting the progress made on the HIT Roadmap from the previous year, as well as plans, activities, and milestones detailing how they will support contracted providers in future Contract Years. Starting in 2022, CCOs are also required to submit data files on EHR and HIE adoption by contracted providers.

CCOs submitted Updated Health IT Roadmaps and data files to OHA at the end of April. These documents include 2021 progress and 2022-24 planned strategies to support EHR and HIE adoption, as well as HIT to support social needs screening and referrals for addressing SDOH needs. OHA completed its review and notified CCOs in July whether Roadmaps were approved or if any revisions needed. Once approved, Roadmaps will be posted on OHA's [Health IT Advisory Group \(HITAG\) website](#) (see the website for reporting guidance, last years' Roadmaps). OHA will summarize information about CCOs' health IT progress and strategies after all Roadmaps are finalized, which will also be used to inform HITOC.

Oregon Health IT Program: Partnerships, Programs and Initiatives

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.

- In April 2022, HIT Commons chartered the EDIE Notification Advisory Committee (ENAC), a group of ED clinicians from various Oregon hospitals. The purpose of ENAC is to provide HIT Commons with a consistent source of broad-based input into the content, format, and generation criteria for EDIE ED notifications in support of reducing avoidable ED utilization, improving patient care, improving transitions of care and other key initiatives/use cases. As end users of EDIE notifications, this group brings important perspective on the types of information that are valuable to them in notification at the point of care. The ENAC has met twice in 2022 and will meet quarterly moving forward.
- The HIT Commons [EDIE Steering Committee](#) met on June 24, 2022. Topics of discussion included review of quarterly EDIE analytics dashboards; a review of new HIT Commons' produced EDIE Hospital Value Reports to be used to facilitate conversations with hospital leadership around EDIE, review the data provided in EDIE, and identify opportunities for improvement; and a presentation from PacificSource Community Solutions on their initiative to integrate pharmacy claims data into the Collective Platform to support clinics that care for pediatric asthma patients. Materials from that meeting are available [here](#). The Committee's next meeting is August 26, 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 program staff 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](#).

- 39 new organizations went live with PDMP integration in Q2 2022.

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 shared weekly with CCOs for their members. Additionally, COVID-19 vaccine data is 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, Moderna, and Johnson & Johnson first and second boosters are now included in both data feeds.

Policy Resources

Federal Law and Policy

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

ONC published the [United States Core Data for Interoperability \(USCDI\) v3](#), including 20 new data elements and two new data classes to advance health IT for improved care, reduced inequities, and stronger public health reporting.

The two new data classes are:

- 1) Health Insurance Information, which allows for the capture and sharing of healthcare insurance coverage information in a standardized way. This data class includes seven new elements: Coverage Status, Relationship to Subscriber, Member Identifier, Subscriber Identifier, Payer Identifier, Group Identifier, and Coverage Type.
- 2) Health Status, which includes assessments of health-related matters performed during care that could identify a need or problem. The new data elements in this data class are Disability Status, Mental/Cognitive Status, Functional Status, and Pregnancy Status.

Additional data elements include but are not limited to:

- Laboratory data: Specimen Type and Result Status,

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- Medication data: Dose and Fill Status,
 - Demographic data: Related Person’s Name, Related Person’s Relationship, Date of Death, Occupation, Occupation Industry, and Tribal Affiliation.

The USCDI has expanded from 52 data elements in 16 data classes in version 1 to 94 data elements in 19 data classes in version 3.

TEFCA, Contact: Ashley.Ashworth@dhsoba.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. On July 11th the RCE released the [draft QHIN](#) Onboarding and Designation Standard Operating Procedure (SOP) for the Individual Access Services (IAS) Exchange Purpose and foreign ownership.

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](#).

HHS Issues Updated Privacy Guidance, Contact: Ashley.Ashworth@dhsoba.state.or.us

The Department of Health and Human Services (HHS) Office for Civil Rights (OCR) issued new guidance to help protect patients seeking reproductive health care, as well as their providers.

In general, the guidance does two things:

- 1) addresses how federal law and regulations protect individuals’ private medical information (known as protected health information or PHI) relating to abortion and other sexual and reproductive health care – making it clear that providers are not required to disclose private medical information to third parties; and
- 2) addresses the extent to which private medical information is protected on personal cell phones and tablets, and provides tips for protecting individuals’ privacy when using period trackers and other health information apps.

This guidance also addresses the circumstances under which the Health Insurance Portability and Accountability Act (HIPAA) Privacy Rule permits disclosure of PHI without an individual’s authorization. It explains that disclosures for purposes not related to health care, such as disclosures to law enforcement officials, are permitted only in narrow circumstances tailored to protect the individual’s privacy and support their access to health care, including abortion care. Specifically, the guidance:

- Reminds HIPAA covered entities and business associates that they can use and disclose PHI, without an individual’s signed authorization, only as expressly permitted or required by the Privacy Rule.
- Explains the Privacy Rule’s restrictions on disclosures of PHI when required by law, for law enforcement purposes, and to avert a serious threat to health or safety.

If you believe that a HIPAA-covered entity or its business associate violated your (or someone else’s) health information privacy rights or committed another violation of the Privacy, Security, or Breach Notification Rules, you may file a complaint at <https://www.hhs.gov/hipaa/filing-a-complaint/index.html>.

You can find more information on the new guidance [here](#).

Oregon Law and Policy

Oregon Legislation impacting Health IT

- [House Bill 4150 \(2022\)](#), Requires HITOC to report to the legislature on strategies to accelerate, support and improve statewide CIEs, Contact: Hope.Peskin-Shepherd@dhsoha.state.or.us
- [House Bill 4212 \(2020\)](#), REALD Provider Reporting: 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](#).
- [House Bill 3159 \(2021\)](#), Requires OHA to adopt rules and standards and establish a timeline for health care providers and health insurers to collect and report REALD and sexual orientation and gender identity (SOGI). More information about the implementation of HB 3159 can be found [here](#).

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

OHA submitted the Medicaid 1115 Demonstration Waiver [final application](#) earlier this year to the Center for Medicare and Medicaid Services (CMS) for a new five-year Medicaid waiver for years 2022 through 2027. The waiver, also known as the [1115 Demonstration](#), was temporarily extended through September while negotiations continue between the state and CMS. The purpose of the waiver is to reform Oregon'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.

Health IT can support concepts in the waiver related to [stabilizing transitions for OHP members](#), including supporting members transitioning from corrections, psychiatric, and foster care settings.

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

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@dhsoha.state.or.us).

Program Contact

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

Get involved with Oregon Health IT

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