

HB2294: Oregon Health Information Technology (HIT) Program and HIT Oversight Council (HITOC)

Why is Legislation Needed for Health Information Technology (HIT)?

Oregon's current HIT statute (adopted in 2009), set forth a strategic, policy, and coordination role for OHA, and established the HIT Oversight Council (HITOC). HB2294 updates the HIT statute to account for changes since 2009:

- Significant HIT efforts are underway at OHA, funded by new, substantial federal investments.
- Partnerships are developing across health care stakeholders, including OHA, around statewide HIT efforts.

What does HB2294 do?

HB2294 has three major components:

1. Establishes the Oregon HIT Program within OHA.
 - Grants OHA authority to provide optional HIT services to support health care statewide (e.g., beyond the Medicaid program)
 - Authorizes fees to cover the costs of expanding OHA's HIT services. Fees would be charged to users of this program's services
2. Grants OHA flexibility in partnering with stakeholders and the ability to participate in partnerships or collaboratives that provide statewide HIT services, including:
 - Ability to vote on governance boards for such services, and
 - Ability to enter into agreements to support and provide funding for the appropriate Medicaid share of statewide HIT services.
3. Updates statute for Oregon's HIT Oversight Council (HITOC)
 - Aligns HITOC under the Oregon Health Policy Board and solidifies its role in providing strategic and policy recommendations and oversight on the progress of Oregon HIT efforts.

Why is HIT Important for Health System Transformation?

HIT provides the tools to share and analyze clinical data and patient outcomes, including:

- Sharing patient information between providers and care team members for care coordination;
- Analyzing health information in useful ways to manage populations and identify target populations for interventions;
- Supporting accountability by assessing the quality and impact of care on patients; and
- Tracking outcomes and metrics to enable alternative payment methods and quality incentives.

OHA's Health IT Highlights in Oregon

- **CareAccord®** – Supports a foundational level of health information exchange across Oregon.
 - Hospitals and providers across Oregon are enabling Direct secure messaging within their electronic health records to meet federal requirements.
 - [CareAccord](#) provides an even playing field by bringing the other members of the care team into electronic care coordination by offering Direct secure messaging.
- **Emergency Department Information Exchange (EDIE)** – Oregon Health Leadership Council partnered with OHA, Oregon Association of Hospitals and Health Systems, and others on the [EDIE Utility](#).
 - With the participation of nearly all Oregon hospitals, EDIE provides emergency departments (EDs) with key information on patients in real time who are high utilizers of ED services.
 - EDIE has contributed to significant reduction of ED utilization in Washington State.

Frequently Asked Questions on HB2294: Oregon Health Information Technology (HIT) Program and HIT Oversight Council (HITOC)

What HIT services are anticipated for the Oregon HIT Program?

OHA intends to provide two services under the Oregon HIT Program that would be broadly available to health care entities (including health systems, clinics, hospitals, health plans, CCOs, long term care, behavioral health, and other health care related entities) across Oregon:

- CareAccord® - Direct secure messaging for entities that face barriers to health information exchange.
- Provider Directory - will allow health care entities access to a state-level directory of provider, care team member, and clinic or facility information to support shared care delivery and coordination.

What types of standards are anticipated for the Oregon HIT Program?

Section 1(4) sets forth that OHA may establish and enforce standards for connecting to Oregon's HIT services

- OHA intends to promote interoperability (i.e., the ability of systems and technologies to work together) and ensure privacy and security by setting standards. Users of HIT services under the Oregon HIT Program will need to meet, or be working toward meeting, these standards.
- OHA will leverage federal and national standards that providers and technologies are already using.

What fees are anticipated for the Oregon HIT Program services?

Section 1(6) sets forth that OHA may charge fees to users of health IT services to ensure sustainability

- Services will be voluntary, and fees will be only be assessed for users of the services
- Fees would be developed for CareAccord® and the Provider Directory. These programs are largely funded by state and federal Medicaid funds. Fees are needed to cover the non-Medicaid uses and any enhanced services – and will be much lower than they otherwise would have been given the federal/state Medicaid investment.
- OHA will work closely with stakeholders to develop fees. OHA will need to go through a formal fee setting process, which would include legislative action and/or rule making.
- OHA will establish a Provider Directory Advisory Group, to help develop the Provider Directory fee structure and advise OHA on other program elements.

What partnerships are anticipated for the OHA?

Section 1(7) and 1(8) sets forth that OHA may participate in partnerships or collaboratives to carry out the goals of the Oregon Health IT Program.

- OHA anticipates opportunities for partnerships or collaboratives may evolve as health care stakeholders come together to address HIT needs they share in common.
- An example of this is the Emergency Department Information Exchange (EDIE) Utility which connects care teams to hospital information across the state. The EDIE Utility is a partnership between hospitals, commercial health plans, CCOs, and the OHA.

What will guide the Oregon Health Policy Board's appointment of HITOC members?

Section 4(1) sets forth that the Health Policy Board will:

- Appoint members who collectively have expertise, knowledge or direct experience in health care delivery, health information technology, health informatics and health care quality.
- Ensure there is broad representation on HITOC of individuals and organizations that will be impacted by the Oregon HIT Program.