



**Relating to Clause:** Relating to health information technology

Section	Purpose
<b>Oregon HIT Program: Establishment and Sustainability</b>	
1(1)	Requires the Oregon Health Authority (OHA) to establish an Oregon Health Information Technology Program. This section also establishes the goals of the Program, which include supporting the coordinated care model and facilitating the exchange of health information.
1(2)	Allows OHA to become accredited to provide health IT services.
1(3)	Clarifies that OHA can enter into agreements or contracts with other providers of health IT services.
1(4)	Ensures that OHA can protect the integrity of state-level health IT services by establishing and enforcing standards for users of these services. OHA intends to use standards to promote interoperability and ensure privacy and security, and will leverage existing federal standards where possible.
1(5)	Allows OHA to participate in activities to enable or promote health information exchange between different systems, including activities across states. Includes participating in associations that support use of health information technology standards.
1(6)	Allows OHA to charge fees to users of Program services to ensure sustainability. Fees would be charged on entities that voluntarily use OHA’s health IT services.
<b>Oregon Health IT Program: Partnerships and Collaboratives</b>	
1(7)	OHA may enter into new or existing partnerships or collaboratives to carry out the goals of the Oregon Health IT Program.
1(7)(a)	OHA can act as a voting member on a governing body of a partnership or collaborative.
1(7)(b)	OHA can provide funding to the partnership or collaborative.
1(7)(c)	OHA can enter into agreements with partnerships or collaboratives with respect to participation and funding to establish roles and to protect the interests of the state.
1(7)(d)	OHA can transfer implementation or management of one or more services that are part of the OHA’s Oregon Health IT Program to a partnership or collaborative.
1(8)	For the purposes of participating in a partnership or collaborative, OHA is exempt from the Public Contracting code. OHA shall establish standards and procedures and specify the considerations to be applied to contracting and procurement activities to ensure appropriate use of this authority and for transparency and accountability.

<b>Health Information Technology Oversight Council (HITOC)</b>	
2	ORS 413.011, regarding the Oregon Health Policy Board, is amended to include working with the Health IT Oversight Council (HITOC) to foster health IT systems and practices that promote the coordinated care model and align health IT efforts across the state.
3	ORS 413.300, regarding definitions for health IT, is amended to add “health informatics,” edit the definitions for “electronic clinical decision support system,” and “interoperability,” and deletes several definitions.
4(1)(a)	ORS 413.301, regarding HITOC, is amended to require the Oregon Health Policy Board to determine terms of members.
4(1)(b)	The Health Policy Board will appoint HITOC members who collectively have expertise, knowledge or direct experience in health care delivery, health information technology, health informatics and health care quality improvement.
4(1)(c)	The Health Policy Board will ensure broad representation on HITOC of individuals and organizations that will be impacted by the Oregon Health IT Program.
4(2)	HITOC may establish advisory or technical committees and determine their membership, terms, and organization and appoint committee members.
4(3)	HITOC members are not entitled to compensation.
5	ORS 413.303 is amended to indicate that HITOC shall appoint its own chair for such term, duties and powers as the Health Policy Board determines.
6	ORS 413.308, regarding HITOC’s duties, is amended to remove all existing duties and replace them with the following (see below).
6(1)	HITOC will identify and make specific recommendations regarding health IT to the Health Policy Board to achieve the goals of the coordinated care model.
6(2)	HITOC will regularly review and report to the Health Policy Board on OHA’s health IT efforts, including those of the Oregon Health IT Program.
6(3)	HITOC will regularly review and report to the Health Policy Board on health IT efforts of organizations in the state.
6(4)	HITOC will regularly review and report to the Health Policy Board on progress of adoption and use of health IT in Oregon by providers, health systems, patients and other users.
6(5)	HITOC will advise the Health Policy Board or the Congressional Delegation on changes to federal laws that affect health IT efforts in Oregon.
7	Repeals ORS 413.302 and ORS 413.306 relating to HITOC.
<b>Operative dates</b>	
8(1)	Sections 1-7 of HB 2294 become operative July 1, 2015.
8(2)	OHA may take action to carry out provisions of Section 1-7 before the operative date of July 1, 2015.
9	Declares an emergency, HB 2294 becomes effective on passage.