



February 3, 2015

Representative Mitch Greenlick
Chair, House Committee on Health Care
900 Court St. NE, H-493
Salem, OR 97301
By email: Rep.MitchGreenlick@state.or.us

Re: Letter of support for H.B. 2294

Dear Representative Greenlick:

On behalf of Oregon's 62 hospitals and the patients they serve, the Oregon Association of Hospitals and Health Systems (OAHHS) would like to express its support for H.B. 2294, which will enable the Oregon Health Authority (OHA) to support health system transformation by updating the statutes of Oregon's health information technology (HIT) program, and ensuring oversight of HIT progress in Oregon through the HIT Oversight Council.

Oregon has long been a national leader in the adoption and use of health information technology such as electronic health records (EHRs). Oregon hospitals and health systems spend substantial resources in acquiring these tools and adapting care delivery to use technology to support operations and patient care. With the advent of the federal Health Information Technology for Economic and Clinical Health (HITECH) Act and its Meaningful Use incentives, EHR adoption has increased across Oregon. These programs have contributed more than \$300M in federal funding to Oregon hospitals and providers, and as of 2014, all Oregon hospitals and more than 6,000 Oregon providers are using certified EHRs. Despite this, there are still significant barriers to optimizing these tools. Many EHRs struggle to securely share information effectively, complicating health information exchange and resulting in operational silos that lead to inefficient care, unnecessary costs, and confusion for patients.

H.B. 2294 would allow the OHA to provide or support statewide health information technology services that align with investments made by hospitals and health systems, fill gaps where they exist, and support new models of care coordination, accountability, and payments or incentives based on outcomes. It is important that these investments focus on improving connectivity between existing systems, not duplicating efforts and investments already adopted by hospitals and health systems. The Emergency Department Information Exchange (EDIE) effort is a successful example of a partnership between OAHHS, the OHA, Oregon Health Leadership Council and others to support state-level technology services that is making a difference for our hospitals today. EDIE provides meaningful, actionable,

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timely information on high-utilizing patients in the emergency room. H.B. 2294 would ensure that OHA can participate formally and efficiently in partnerships such as EDIE in the future.

OHA has the unique ability to leverage federal matching funds for the implementation of other important state-level health IT services such as a statewide provider directory. Oregon hospitals and health systems are enthusiastically anticipating this service, which would improve out-of-network referrals and health information exchange, reduce administrative burdens, and create important infrastructure to support analytics and quality reporting. H.B. 2294 provides the flexibility and transparency OHA needs to successfully see these efforts through and adapt them to an ever-changing health care landscape.

H.B. 2294 enables OHA to impose fees on entities and individuals to use the services it develops under the legislation in order to pay for the cost of administering state-level health IT services. Continuing a dialogue with industry on the amount of the fees, which would be established and adjusted by rule, is important to ensure that the services are affordable to all hospitals.

OAHHS supports H.B. 2294 and looks forward to partnering with OHA on these important efforts ahead. Please do not hesitate to contact me if I may assist you.

Sincerely,



Robin J. Moody
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