

To: Members of the House Committee on Human Services

From: State Representative Maxine Dexter, M.D., House District 33

Date: January 11th, 2022

Subject: LC 028

Chair Williams, Vice-Chairs Scharf and Ruiz, and Members of the Committee,

For the record, my name is Dr. Maxine Dexter, State Representative for House District 33. Thank you for your time today.

As a state legislator, physician and mother, I have a vision for our future as Oregonians -- one where every Oregonian has access to high-quality, affordable, *coordinated* and compassionate care. A future where continuity of *whole-person* care, inclusive of social health, is the norm. A future where a clinician, social worker or case worker is equally able to write a referral not just for healthcare services but also, housing or childcare subsidies, SNAP benefits, job training, and whatever other supports the person in their office is eligible for, using a state-wide, universal electronic Community Information Exchange (CIE) platform.

This future is possible and it will only happen if we plan for and create it.

I am a clinician old enough to remember the importance of legible handwriting as it prevented calls back from nurses and pharmacists and led, when poor, to many unnecessary medical errors. Electronic Health Records (EHRs) have been proven to increase quality, clarity, access and information sharing. I am an absolute believer in using EHR systems and I have seen the important ways the information these systems gather help us improve quality of and access to care for people while also allowing us to track how resources are being used and where they are making the most impact on health.

Healthcare can be optimally delivered when care team members are able to see a patient's clinical and social history, no matter where they present for care. Currently, healthcare organizations use different electronic health records (EHRs) that don't necessarily communicate, leading to uncoordinated and often redundant or incomplete care. This needs to change.

Social determinants such as education, safe housing, access to nutritious foods, job opportunities and income have far more impact on health outcomes than the medical system <sup>1</sup>. Currently, our lack of coordination between social and medical services results in Oregonians not getting the holistic care they need to be healthy.

An integrated community information exchange with a statewide electronic health record system is critical to being able to deliver people-centered care that integrates their social, emotional and physical health needs. A closed-loop electronic referral system will streamline application for and access to services that meets multiple needs at once in a low-barrier way <sup>2</sup>. It will also allow state agencies to see how effectively services are being accessed by Oregonians across the state, increasing transparency and accountability for state investments. Development of a statewide community information exchange is a key step towards social and health equity as well as reliable and efficient delivery of services across Oregon.

<u>LC 28</u> Instructs the Oregon Health Authority's Health Information Technology Council to convene a stakeholder group, the <u>Community Information Exchange Workgroup</u>, to explore options to bring this vision to reality in a confidential and secure way. This LC directs them to make 2023 legislative recommendations by September 2022. The <u>Workgroup Charter</u> has specific information on its scope and guiding principles.

I am deeply grateful to our remarkable panelists who join me today in sharing not just this vision, but how we bring it to reality in Oregon. Our panel, in speaking order is:

Leong Koh, MD; President and CEO, Northwest Permanente Susan Otter, State Coordinator for Health Information Technology at Oregon Health Authority Carly Hood-Ronick, Executive Director, Project Access NOW

The ability for medical and community resource systems across the state to electronically share information and referrals will revolutionize how effectively and efficiently we can care for every Oregonian. We continue to see this desperate need every day as we navigate the impacts of COVID-19 on our state and we must set a clear path to a better future. This bill is simply the start of the planning process, and I humbly ask for your support today.

Sincerely,

Representative Maxine Dexter, M.D.

House District 33 (NW Portland and NE Washington County)

<sup>&</sup>lt;sup>1</sup> Atriga, S. & Hinton, E. "Beyond Health Care: The Role of Social Determinants in Promoting Health and Health Equity," from *Kaiser Family Foundation*,

https://www.kff.org/racial-equity-and-health-policy/issue-brief/beyond-health-care-the-role-of-social-determinants-in-promoting-health-and-health-equity/

<sup>&</sup>lt;sup>2</sup> Palabindala, V., Pamarthy, A., & Jonnalagadda, N. R. (2016). Adoption of electronic health records and barriers. *Journal of community hospital internal medicine perspectives*, 6(5), 32643. https://doi.org/10.3402/jchimp.v6.32643