

A-Engrossed
House Bill 3303

Ordered by the House April 6
Including House Amendments dated April 6

Sponsored by Representative DEXTER

SUMMARY

The following summary is not prepared by the sponsors of the measure and is not a part of the body thereof subject to consideration by the Legislative Assembly. It is an editor's brief statement of the essential features of the measure.

Establishes Community Information Exchange Board and specifies membership and duties.

A BILL FOR AN ACT

Relating to community information exchanges.

Be It Enacted by the People of the State of Oregon:

SECTION 1. (1) The Community Information Exchange Board is established.

(2) The board consists of 10 members who represent the geographic diversity of this state, appointed by the Director of the Oregon Health Authority, in consultation with the Director of the Housing and Community Services Department, the Early Learning System Director, the Director of Human Services and the Director of the Oregon Department of Emergency Management.

(3) At least six members must be from culturally and linguistically diverse organizations engaged in work to support the need for housing, health care, social services, education and emergency response.

(4) Members appointed to the board may not have a financial interest in a vendor of a community information exchange technology or platform.

(5) The board shall elect one of its members as chairperson and another as vice chairperson, for terms and with duties and powers necessary for the performance of the functions of the offices as the board determines.

(6) A majority of the members of the board constitutes a quorum for the transaction of business.

(7) The term of office of each member of the board is two years, but a member serves at the pleasure of the Director of the Oregon Health Authority. Before the expiration of the term of a member, the appointing authority shall appoint a successor whose term begins on January 1 next following. A member is eligible for reappointment. If there is a vacancy for any cause, the director shall make an appointment to become immediately effective for the unexpired term.

(8) A community-based member of the board is entitled to compensation and expenses as provided in ORS 292.495.

(9) Staff support for the board shall be provided by the Oregon Health Authority.

SECTION 2. (1) As used in this section and section 1 of this 2023 Act:

NOTE: Matter in **boldfaced** type in an amended section is new; matter *[italic and bracketed]* is existing law to be omitted. New sections are in **boldfaced** type.

1 (a) “Client” means an individual or family seeking a referral from or who is being re-
2 ferred by a provider for needed services and supports.

3 (b) “Community information exchange” or “exchange” means a network of collaborating
4 providers using a multidirectional technology platform, that includes a shared resource di-
5 rectory and closed loop referrals, to connect individuals and families to needed services and
6 supports such as food, housing, transportation and health care.

7 (c) “Provider” means:

8 (A) A social services agency;

9 (B) A community-based organization;

10 (C) A health care provider; or

11 (D) Any other entity participating in a community information exchange that provides
12 services or supports in a community.

13 (d) “Social services data” includes:

14 (A) Identifying information regarding clients;

15 (B) The name of a provider that is referring a client;

16 (C) Notes that may be entered into an electronic record by a provider regarding a client,
17 such as an evaluation or assessment of the individual’s or family’s needs;

18 (D) The name of an entity to which a client is referred;

19 (E) Whether a referral has been acted upon by the receiving entity;

20 (F) Outcomes of referrals; and

21 (G) Other information that may be used to pinpoint where additional or fewer resources
22 are needed.

23 (2) The Community Information Exchange Board established in section 1 of this 2023 Act
24 shall study community information exchanges and make recommendations on best practices
25 for the use of community information exchanges by:

26 (a) Exploring the sharing of social services data by providers;

27 (b) Identifying gaps in, needs for and barriers to the sharing of social services data by
28 providers;

29 (c) Identifying best practice elements and areas for improvement in systems that share
30 social services data so that the resources of this state may be directed to the systems iden-
31 tified as aligning with best practices;

32 (d) Identifying use cases for state programs to align with community information ex-
33 changes; and

34 (e) Identifying ways to support providers with training and capacity building through
35 funding, grants, technical assistance and other resources so the providers can utilize sys-
36 tems for sharing social services data.

37 (3) The work of the board shall be informed by the report of the stakeholder groups
38 convened by the Health Information Technology Oversight Council under section 1, chapter
39 10, Oregon Laws 2022.

40 (4) The board shall appoint the following work groups:

41 (a) A provider funding and support work group that shall:

42 (A) Identify sustainable funding and grants and technical assistance that will be needed
43 for community information exchanges;

44 (B) Identify gaps in and barriers to participation by providers participating in the sharing
45 of social services data; and

1 (C) Connect with existing regional health equity coalitions, as defined in ORS 413.256,
2 Early Learning Hubs designated under ORS 417.827, community advisory councils described
3 in ORS 414.575 and other local organizations, to inform the work of the board.

4 (b) A technical advisory committee consisting of technical experts and a geographic rep-
5 resentation of community information exchange technology vendors, to inform the board
6 concerning:

7 (A) Privacy and security of data;

8 (B) Technology systems; and

9 (C) Interoperability and national standards for the exchange of social services data.

10 (c) Other regional focus groups, work groups or committees the board determines nec-
11 essary to support the board's goals.

12 (5) The board shall implement a plan to measure the success of the community infor-
13 mation exchange in facilitating and coordinating client referral for services and supports and
14 annually report the plan and the findings under the plan, in the manner provided in ORS
15 192.245, to the committees or interim committees of the Legislative Assembly related to
16 early childhood and human services.

17 (6) All agencies of state government, as defined in ORS 174.111, are directed to assist the
18 board in the performance of the board's duties and, to the extent permitted by laws relating
19 to confidentiality, to furnish such information and advice as the members of the board con-
20 sider necessary to perform their duties.

21 **SECTION 3.** The Oregon Health Authority shall use information collected by and recom-
22 mendations of the Community Information Exchange Board under sections 1 and 2 of this
23 2023 Act to evaluate current community information exchanges within this state and publish
24 a list of the community information exchanges that align with the best practices determined
25 by the board.

26 **SECTION 4.** Sections 1 to 3 of this 2023 Act are repealed on June 30, 2028.

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