



Health Information Exchange Strategic and Operational Plan Profile

Overview

Oregon's overall health information exchange (HIE) strategy is to leverage the variety of HIE activities within the state to expand exchange and help health care providers achieve meaningful use of their electronic health records (EHRs). These activities include Integrated Delivery Networks (IDNs) providing exchange to their members, EHR vendors offering HIE services, regional health information organizations, and commercial and hospital laboratories delivering results directly to EHRs and to a nationwide e-prescribe network. The State will provide policy and standards for privacy, security and interoperability, a toolkit including a data sharing agreement template and connectivity via NHIN Direct among the exchange efforts.

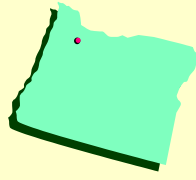
Model and Services

The State will provide a number of central services (Central Core HIE Services) to facilitate and enable directed communication of health information. The Central Core HIE Services include:

- Provider Directories – entity-level and individual-level directories of information providers in the state. Sufficient access to perform discovery and routing will be open to all providers and health information service providers (HISPs).
- Trust Services – digital certificate services for authentication to Central Core HIE Services and encryption, signing, and validation of information requests and messages.
- Messaging Services – NHIN Direct-compliant HISP services for transport of health information. Also includes capabilities to enable HIE participants who have or are adopting solutions compliant with NHIN Gateway specifications, such as NHIN CONNECT, to send and receive information.

These services will be provided initially by the State and later transferred to the SDE. As implemented by Oregon, the Central Core HIE Services will enable the services necessary for secured messaging between HIE participants such as health information organizations (HIOs), IDNs, hospitals, practices, and laboratories. The Health Information Technology Oversight Council (HITOC) and the Regional Extension Center (REC) are in discussions with EHR vendors to encourage them to implement the Direct standards that serve as the foundation for electronic messaging.

The State will develop an HIE Participant Qualification Program to ensure that all entities that are providing exchange services are being held to the same high standards of protecting personal health information and to ensure interoperability among the various HIE activities.



State:
Oregon

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Award Amount:
\$8,579,992

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<http://www.oregon.gov/OHPPR/HITOC>

Other Related ONC funding in Oregon:
Health Information Technology
Regional Extension Center (REC)
\$13,201,499



Highlights

- About 72% of ambulatory practices with EHRs have lab interfaces (covering 91% of physicians using EHRs). This translates to nearly 60% of all surveyed clinicians being in practices with EHRs that have an electronic lab interface.
- The state has nine developing health information exchange efforts which include vendor services and services offered to members within IDNs and HIOs. Five are operational or nearly operational.
- The interstate sharing of electronic health information is supported by the fact that Oregon's health care markets already extend across state borders through consumer choice, large hospital systems, health plans and current data-sharing agreements..



Meaningful Use

	<u>Landscape</u>	<u>Strategy</u>
<u>E-Prescribing</u>	<ul style="list-style-type: none"> 86% of pharmacies are registered with Surescripts. 96.5% of retail chain pharmacies are registered. 45% of independent pharmacies are registered. About 37% of all office-based physicians e-prescribe. 	<ul style="list-style-type: none"> Develop marketing plan to reach providers and pharmacies not currently e-prescribing. Convene a group of e-prescribing stakeholder representatives including retail, hospital and health system pharmacies to identify barriers to e-prescribing and develop strategies. Regularly monitor providers and pharmacies to determine ongoing adoption rates. Analyze adoption rates to make adjustments as necessary. Consider the payment structure for state reimbursement of providers for e-prescribing.
<u>Structured Lab Results</u>	<ul style="list-style-type: none"> 443 CLIA labs are targeted by the state to get providers to meaningful use (includes hospital, independent, FQHCs, rural health clinics and public health labs) More than 90% are able to deliver structured lab results. 	<ul style="list-style-type: none"> Improve EHR adoption as that will encourage lab to EHR interfaces. Develop provider marketing and communication plan. Identify key measures and track the efficacy of adoption strategies as part of Oregon's overall HIE efforts. The State will coordinate outreach, measurement and analysis efforts between HIOs, Oregon Public Health, and the Oregon State Public Health Laboratory. Through the HIE qualification program, the state will eventually require transaction and data standards for lab ordering and reporting including encouraging the use of LOINC/ELINCS. Provide secure messaging services for labs and providers who don't have other options. Convene an ongoing Laboratory Stakeholder Group that includes all the large labs as well as representatives from medium and small labs to identify and resolve issues related to lab HIE adoption/participation throughout the state. The State is exploring offering laboratory clearinghouse services that would standardize the transport, formatting, and coding of test results, allowing test results to be received via secure messaging services with consistent formats and codes.
<u>Patient Care Summary</u>	<ul style="list-style-type: none"> Only two IDNs currently provide patient care summary exchange services within their own networks. There are also two entities that won contracts with the Social Security Administration to provide summary of care records that are currently under implementation. Some of the HIOs within the state are beginning to implement these services but those services are not currently operational. 	<ul style="list-style-type: none"> The State will offer the core HIE services necessary for basic summary of care exchange to areas that do not have these services available. These core services include the HIE Registry and Provider Registry (which enables entity and individual lookups for addressing and routing), trust services necessary to ensure the security and fidelity of patient health information and messaging based transport services such that health information can be exchanged between providers regardless of HIO affiliation.



HIE Inventory

Standards		Quality Improvement	
Nationwide Health Information Network Exchange Specifications	X	Care Coordination	X
Nationwide Health Information Network CONNECT	X	Quality Reporting	X
Nationwide Health Information Network DIRECT	X	Behavioral Health Information Exchange	X
Plans to exchange with federal agencies or other states via Nationwide Health Information specifications	X	Lab Strategy	
Public Health		Translation services	
Electronic lab reporting of notifiable conditions	X	EHR interface	X
Syndromic surveillance	X	Policy strategy	X
Immunization data to an immunization registry	X	Order Compendium	
Patient Engagement		Bi-Directional	
Patient Access/PHR	X	Alignment with CLIA	X
Blue Button		E-Prescribing	
Patient Outreach	X	Medication History	X
Privacy and Security		Incentive or grants to independents	
Privacy and Security Framework based on FIPS	X	Plan for controlled substance	X
Individual choice (Opt In/Opt Out/hybrid)	Opt-out with exceptions	Set goal for 100% participation	
Authentication Services	X	Controlled substance strategy	
Audit Log	X	Care Summaries	
Administrative Simplification		Translation services	
Electronic eligibility verification	X	CCD/CCR Repository	
Electronic claims transactions	X	Directories	
Vendor		Provider Directory	X
Planning	X	Master Patient Index	
Core Services		Record Locator Services	
		Health Plan Directory	X
		Directory of licensed clinical laboratories	X

Information for this profile was obtained from the approved Operational and Strategic Plan submitted to the National Coordinator for Health Information Technology as a condition of the Health Information Exchange Cooperative Agreement. The complete plan can be downloaded at: <http://statehieresources.org/>

