

Health Policy and Analytics Division Kate Brown, Governor



500 Summer Street, NE Salem, OR 97301

February 2, 2022

Chair Williams, Vice Chairs Ruiz and Scharf, committee members,

Thank you for the opportunity to testify before your committee about HB 4150, the bill directing the Health Information Technology Oversight Council (HITOC), with support of staff from the Oregon Health Authority (OHA), to convene group(s) on community information exchange (CIE). I am following-up with additional information to address questions raised by House Human Services committee members related to OHA's <u>CIE Workgroup</u>.

CIE Workgroup and HITOC Membership and Supplemental Interviews

In late 2021, OHA recruited for CIE Workgroup members with an emphasis on subject matter expertise, health equity experience, and lived and cross cultural experience. Priorities included: representation across the types of organizations impacted by CIE; expertise in health equity, technology, social services, and health care sectors; geographic diversity of membership; and a priority on members with lived experience relevant to addressing social determinants of health and health equity and those with cross-cultural experience with communities likely to be impacted by health inequities. OHA staff reviewed the 38 applications received with the HITOC chair, vice chair, and two HITOC members who will serve as liaisons to the CIE Workgroup. HITOC approved the proposed slate in December 2021.

The <u>CIE Workgroup Membership</u> includes 15 members and two HITOC liaisons who represent diverse professional backgrounds as well as diverse lived and cross-cultural experiences, and includes representation from all regions of Oregon. In particular, the workgroup includes members with the following experience:

- Working in community-based organizations, federally qualified health centers, 211info, coordinated care organizations, local public health agencies, and health systems;
- Working with immigrants, refugees, people of color, Native Americans, monolingual non-English speakers, deaf and hard of hearing, and incarcerated youth;
- Work that focuses on sexual and domestic violence, housing/houselessness, health equity, behavioral health, oral health, and public assistance programs;
- Information technology expertise, including privacy and security expertise, informatics, data, and research;
- Although the application did not request demographic information, members shared lived experiences identifying as Black, Latinx, person of color, and LGBTQIA; and
- Some shared lived experiences such as being raised in poverty and using public assistance programs.

The CIE Workgroup will make recommendations to HITOC and OHA on strategies to accelerate, support, and improve CIE across the state. HITOC will review the recommendations of the CIE Workgroup and prepare a report. HITOC is tasked with setting goals and developing a strategic health information technology plan for the state, as well as

monitoring progress in achieving those goals and providing oversight for the implementation of the plan. <u>HITOC members</u> are appointed by the Oregon Health Policy Board and reflect the geographic and demographic diversity of Oregon, and include representation across health care, social services, and public health sectors; consumers; and privacy and information technology experts.

<u>Supplemental interviews:</u> In addition to CIE workgroup members, OHA will engage a health equity consultant to conduct interviews with community-based organizations (CBOs), especially those serving culturally and linguistically specific populations, and other perspectives needed to inform the CIE workgroup's efforts. Interviews will be important to bring perspectives from CBOs who would receive referrals through a CIE to deliver social services such as food, housing, and transportation. Interviews will seek to identify opportunities and challenges for CBOs related to CIE and strategies to address issues and assist CBOs in participating in CIE. The input from these interviews will inform the CIE Workgroup's discussion and recommendations to HITOC. OHA will seek input to identify potential CBOs and individuals to interview and are interested to hear from the committee and public on this.

Scope of CIE and relation to other records like medical and school records and potential duplication with 211 services

CIEs are web-based platforms that help organizations connect people to resources like social services. The primary purpose of CIEs is to search for resources in a centralized directory, refer individuals to services, and be able to identify the outcome of the referral. CIEs can be used by various types of organizations and integrated into their electronic health record or other technology tools to improve workflow for the user. CIEs are not designed to share records from one system to another, such as medical records or school records.

The tools provided in CIEs typically include:

- Shared resource directories: Users can search for available local resources, including services provided in a person's preferred language, in one centralized place.
- Screening: Questionnaires help users identify a person's needs and can help determine eligibility for a particular service or program.
- Closed loop referrals: Referring organizations can see when a person is connected to services from receiving organizations. For example, a health care provider can make a referral for rental assistance for a family in their care. The organization providing rental assistance receives the referral in the CIE platform, meets with the family and provides rental assistance, and reports back through the CIE to the provider that the need has been met. This is a distinguishing feature of CIE.
- Reporting: Users can analyze data and produce reports, such as assessing how many referrals have been made for different services and how many referrals resulted in needs being met.

CIEs are currently implemented across many communities in Oregon led by coordinated care organizations and health systems, with the participation of community-based organizations, social services, clinics, and local public health authorities and other groups. Oregon's 211info is actively involved in CIE efforts in Oregon and is represented as a member of the CIE Workgroup.

State role in CIE and privacy and security

OHA is examining statewide CIE as a foundational tool for addressing the social determinants of health and eliminating health inequities. However, OHA has not determined the best role for

the state to play related to CIE, and is convening the CIE Workgroup, in part, to identify how state strategies may accelerate, support, and improve CIE.

State involvement could take many forms:

- State involvement can support **statewide coordination and governance**, as well as **public accountability and transparency** as this important infrastructure develops.
- OHA has many **programs that could benefit from directly participating in CIE** and has opportunities to **leverage federal matching funds** for Medicaid participation. It is unlikely that the Workgroup would recommend that the state develop a new technology given the footprint and investment in CIE in nearly all communities across the state.
- State investments may be needed to support CBOs participating in CIE and bring along those who may otherwise be left behind, like rural areas and smaller culturally and linguistically specific CBOs.
- Finally, state agencies, policymakers and communities have an interest in the data gathered by CIE efforts. Access to aggregated CIE data at the statewide and regional levels can provide insights into what is working and where there is more work to be done to meet the social determinants of health needs across all communities.

<u>Privacy and security</u>: State involvement in CIE brings a strong commitment to security and privacy of information. CIE platforms are modern systems that use methods for user authentication and network security, including controls on who can view information. Any state funding or procurement for CIE would include privacy and security expectations for potential vendors or partners. Privacy and security are key components of all work under HITOC and will be an important component of the CIE Workgroup.

Please let me know if there is any additional information I can provide.

Sincerely,

~ KNA

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