

House Bill 3040

Sponsored by Representative DEXTER (at the request of OCHIN)

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 **as introduced**.

Requires coordinated care organizations to share claims and encounter data with provider regarding patients that provider contracts with coordinated care organization to serve.

A BILL FOR AN ACT

1
2 Relating to coordinated care organization sharing of patient information with contracted providers;
3 amending ORS 414.607.

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

5 **SECTION 1.** ORS 414.607 is amended to read:

6 414.607. (1) The Oregon Health Authority shall ensure the appropriate use of member informa-
7 tion by coordinated care organizations, including the use of electronic health information and ad-
8 ministrative data that is available when and where the data is needed to improve health and health
9 care through a secure, confidential health information exchange.

10 (2)(a) A member of a coordinated care organization must have access to the member's personal
11 health information in the manner provided in 45 C.F.R. 164.524 so the member can share the infor-
12 mation with others involved in the member's care and make better health care and lifestyle choices.

13 **(b) A coordinated care organization that contracts with a community provider to manage**
14 **the care of a patient of the coordinated care organization shall share with the community**
15 **provider, or an electronic health records vendor of the community provider, all claims and**
16 **encounter data within the coordinated care organization's control regarding all of the**
17 **patient's care, services or treatment from other providers that was paid for or reimbursed**
18 **by the coordinated care organization.**

19 (c) As used in this subsection, "community provider" includes:

20 **(A) A community health center or safety net clinic as defined in ORS 413.225.**

21 **(B) A federally qualified health center.**

22 (3) Notwithstanding ORS 179.505, a coordinated care organization, its provider network and
23 programs administered by the Department of Human Services for seniors and persons with disabili-
24 ties shall use and disclose member information for purposes of service and care delivery, coordi-
25 nation, service planning, transitional services and reimbursement, in order to improve the safety and
26 quality of care, lower the cost of care and improve the health and well-being of the organization's
27 members.

28 (4) A coordinated care organization and its provider network shall use and disclose sensitive
29 diagnosis information including blood-borne infections and other health and mental health diagnoses,
30 within the coordinated care organization for the purpose of providing whole-person care. Individ-
31 ually identifiable health information must be treated as confidential and privileged information sub-

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 ject to ORS 192.553 to 192.581 and applicable federal privacy requirements. Rediscovery of
2 individually identifiable information outside of the coordinated care organization and the
3 organization's providers for purposes unrelated to this section or the requirements of ORS 413.032,
4 414.572, 414.598, 414.605, 414.632, 414.638 or 414.655 remains subject to any applicable federal or
5 state privacy requirements.

6 (5) This section does not prohibit the disclosure of information between a coordinated care or-
7 ganization and the organization's provider network, and the Oregon Health Authority and the De-
8 partment of Human Services for the purpose of administering the laws of Oregon.

9 (6) The Health Information Technology Oversight Council shall develop readily available infor-
10 mational materials that can be used by coordinated care organizations and providers to inform all
11 participants in the health care workforce about the appropriate uses and limitations on disclosure
12 of electronic health records, including need-based access and privacy mandates.

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