Health Information Technology Oversight Council
April 11, 2013
3:00 – 4:00 pm

Council and Ex-officio Members by Phone: Greg Fraser (Interim Chair), Ellen Larsen, Bridget Barnes, Ken Carlson, Erick Doolen, Carolyn Lawson, Dave Widen, Mel Kohn
Council and Ex-officio Members Absent: Bob Brown, Judy Mohr-Peterson
Staff Present: Susan Otter, Matt Ausec, Karen Hale, Gwen Grams, Kate Lonborg, Pete Mallord, Emily Martinez, Mary Kukowski, Sharon Wentz, Dean Epperly, Alysha Johnson
Guests Present: Jeanene Smith

Welcome, Opening Comments, and Approval of Minutes – Jeanene Smith, Greg Fraser (Interim Chair)

Refer to meeting materials: slide 2

- Jeanene Smith, Office of Health Policy and Research (OHPR), announced Susan Otter as the HIT coordinator for Oregon and the director of HITOC and introduced Greg Fraser as the interim chair.

Refer to meeting materials: "January 10, 2013, Minutes"

- **Action**: In response to Greg Fraser's request, Ellen Larsen moved to approve the January 10, 2013, HITOC meeting minutes. Dave Widen seconded the motion, which HITOC passed unanimously.

HITOC Membership and Appointments – Susan Otter

Refer to meeting materials: slides 4-7

- Membership on HITOC currently consists of eight HITOC members. The three vacancies will be addressed in Fall 2013.
- HITOC meetings will be held quarterly for the remainder of 2013, during the HIE phase 2 planning process.

HIE Phase 2 Planning – Susan Otter

Refer to meeting materials: slides 8-15

- The action item from the Consumer Advisory Panel (CAP) discussion in January was to solicit new members. OHIT staff received a few responses, but is working with Bob and Dave on how to get more responses. More information will be forthcoming in the May HITOC meeting.
- Susan discussed the HIE phase 2 planning process and identified how HITOC will be involved. HIE Phase 2 planning will result in a multi-year framework that supports Oregon's Health System Transformation. Existing work by HITOC on the Strategic Operational Plans for HIE (SOP) will be leveraged and validated as the planning phase progresses.
- QUESTION: What is the role of HITOC members in the HIE Phase 2 planning process? ANSWER: HITOC will receive updates on the Phase 2 HIT/HIE process and provide input at HITOC meetings, particularly the May 2nd meeting. Role will likely include some HITOC members participating in stakeholder meetings as part of CCO listening tour, the Executive Level Task Force, and the CIO workgroup. Bring the framework that is developed through the stakeholder process back to HITOC in the September meeting for HITOC review.
- QUESTION: Why have a new task force? Opening up a task force brings in stakeholders and business partners who have not been part of HITOC, but are interested in being part of HIE planning. Some HITOC members will be part of the task force.
- QUESTION: Does HITOC have a future? ANSWER: Yes, the question is more what the scope is.
- Jeanene Smith added that the original HITOC role was around HIE. HITOC did a great job of getting us this far, and now need to look at what's next. Similar to changes in the role of the

Health Policy Board. There is an ongoing need for good thinking on policy.

- HITOC members expressed comfort in the HITOC role continuing to evolve as progress in planning moves forward with some expressing a wait and see approach.
- QUESTION: Will the Oregon's Strategic Plan (OSP) be updated afterwards as well? ANSWER: Good question; Good issue to discuss at September or November meeting to see what HITOC wants to do.
- QUESTION: Does the timeline meet the needs of CCOs? ANSWER: Framework will be done by end of summer. The task force will start in June with a model framework to work from. Idea is to wrap up pretty quickly in September and move forward to leverage funding from Centers for Medicare and Medicaid Services (CMS) and the Office of the National Coordinator (ONC).

Public Comment

Dr. Saslow urged that Harris and Mirth consider Practice Fusion's approach to supply templates for common disease processes. He identified that the HITOC public comment period has been extremely important and is glad to see the there is a full meeting in May. A disconnect exists between PERS and everything else, including HIE and noted there should be a voice for PERS on HITOC and CAP, and specifically around the Health Engagement Model (HEM) information that is being collected. The biggest question is regarding financial sustainability. It is not clear whether there is authority to establish an SDE under existing law or a tax like Vermont, or other source of funding to support HIE. He asked if there could be a separate working group to work with legislators on placeholder legislature to be ready for the E-Board to authorize events after 2013 session and before 2014 session.

Closing Comments – Susan Otter

- Susan reminded the group that the next HITOC meeting is in three weeks and for any questions, reach out to her or Matt Ausec, lead HITOC staff member.