

Issue highlights:

- [HITOC February Meeting](#)
- [CIE to Support Oregon's 2022-2027 1115 Medicaid Waiver](#)
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HITOC Updates

HITOC's work is guided by Oregon's Strategic Plan for Health IT, 2024-2028, which the committee developed to provide high-level priorities and direction for health IT. The [Strategic Plan](#) is available on the [HITOC website](#).

HITOC Meetings and Annual Priorities, Contact:

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February Meeting

HITOC's next meeting is February 6 from 12:30 to 3:30 p.m. and will be virtual. HITOC will finalize the 2025 HITOC Workplan, hear updates on state and federal health IT priorities for 2025, and hear updates on the 2025 Oregon legislative session. HITOC will learn about state and federal guidance for the use of artificial intelligence (AI) and discuss implications for health IT, starting conversations that are slated to continue into the April 2025 meeting.

December Meeting

The previous HITOC meeting was in December 2024. Members provided input on CCO procurement. They then reviewed and provided input on the draft 2025 HITOC Workplan and discussed priority actions for 2025.

Oregon Health IT Program: Partnerships, Programs, and Initiatives

CCO Health IT Roadmaps and Support, Contact:

Colleen.Rawson@oha.oregon.gov

Coordinated Care Organizations (CCOs) are contractually required to maintain an OHA-approved Health IT Roadmap. CCOs are required to submit an annual Health IT Roadmap to OHA reporting the progress made from the previous year, as well as plans, activities, and milestones detailing how they will support contracted providers in future contract years. As of 2022, CCOs are also required to submit data files reporting on EHR and HIE adoption by contracted providers.

In March, CCOs will submit their 2025 Health IT Roadmaps and Data Reporting Files to OHA. CCOs will report the progress they made in 2024 to support EHR and HIE adoption, access, and optimization, and use of health IT to support SDOH needs,

What is HITOC?

The Oregon Legislature created the [Health Information Technology Oversight Council \(HITOC\)](#) to ensure that health system transformation efforts are supported by health information technology (IT). HITOC is a committee of the [Oregon Health Policy Board \(OHPB\)](#), which sets policy and provides oversight for the Oregon Health Authority (OHA), including OHA's health system transformation efforts.

HITOC has six responsibilities:

1. Explore health IT policy
2. Plan Oregon's health IT strategy
3. Oversee OHA's health IT efforts
4. Assess Oregon's health IT landscape
5. Report on Oregon's health IT progress
6. Monitor federal health IT law and policy

HITOC brings partners across Oregon together for centralized policy work, strategic planning, oversight of health IT efforts, and landscape/policy assessment, so health IT efforts are more coordinated. HITOC also provides health IT expertise to OHPB and to Oregon lawmakers, so they are informed about health IT in Oregon when they make policies and laws about health.

OHA's [Office of Health IT & Analytics Infrastructure \(OHITAI\)](#) staffs HITOC and the Oregon Health IT Program.

including social needs screening and referrals. They will also share their planned strategies to further these efforts in 2025-26.

OHA will release a summary of the 2024 Health IT Roadmap submissions that will continue to inform HITOC and OHA efforts, especially as they relate to activities in Oregon's Strategic Plan for Health IT, 2024-2028. HITAG discussed the [summary of the 2024 Support for EHR adoption, use, and optimization](#) section in the October 24, 2024 meeting, and the [summary of the 2024 Use of and support for HIE](#) section at the January 23, 2025 meeting.

Meeting recordings, redacted 2024 Health IT Roadmaps, and reporting templates/guidance are posted on OHA's [CCO Health IT Advisory Group \(HITAG\) website](#). HITAG's next quarterly meeting is April 24, 2025, from 1 to 4 p.m.

Community Information Exchange (CIE), Contact: Hope.Peskin-Shepherd@oha.oregon.gov

OHA's CIE team monitors the CIE landscape, provides educational information, analyzes policies, and develops and implements strategies that support CIE efforts in Oregon. OHA's CIE work is also guided by HITOC's Strategic Plan and the CIE Workgroup's [House Bill 4150 \(2022\) Legislative Report](#).

CIE to Support Oregon's 2022-2027 1115 Medicaid Waiver

The 2022-2027 1115 Medicaid Waiver, approved by the Centers for Medicare & Medicaid Services (CMS), allows Oregon to pilot first-in-the-nation Medicaid changes. Oregon will receive \$1.1 billion in federal funds to create a more equitable, culturally and linguistically responsive health care system, support continuous health coverage and improve health outcomes. Visit the [1115 Medicaid Waiver webpage](#) for general information.

Oregon's 2022-2027 [1115 Medicaid waiver](#) requires using closed loop referrals to support the delivery of [health-related social needs \(HRSN\)](#) services, including housing, nutrition and climate-related supports, and outreach and engagement. CIE supports this waiver requirement and helps efficiently connect people with the services and resources they need, which helps eliminate health inequities.

A new resource is available for HRSN Service Providers or community partners interested in learning more about participating in CIE: the [CIE Opportunity for HRSN Service Providers and Community Partners](#) flyer. It describes how CIE can help with HRSN services, functions beyond HRSN services, how to connect to a CIE system, and more. For more detailed information about CIE and the waiver, see the [CIE to Support Oregon's 1115 Medicaid Waiver Informational Brief](#).

OHA plans to procure CIE to support Oregon's Medicaid Open Card program to meet the closed loop referral requirements under the waiver and may procure more than one vendor in this process. Use of CIE for closed loop referrals will be phased in during the 1115 waiver implementation. OHA has no plans to disrupt the current CIE environment or Medicaid coordinated care organizations' (CCOs) CIE contracts.

OHA is also working with Oregon Health and Science University to interview CCOs on technical assistance gaps and appropriate roles for OHA and plans to coordinate with CCOs to support community-based organizations with CIE adoption. More input was also gathered at the December CCO CIE HRSN Work Session.

CIE Governance Exploration

OHA contracted with Portland State University's Oregon Consensus Program for an independent assessment of community and partner readiness for a CIE governance process. These neutral consultants interviewed partners and held several focus groups in summer of 2024. Results show interest among partners in community-driven CIE governance that centers the perspectives and priorities of community-based organizations; scope and structure of a community-driven governance process would need to be developed collaboratively. For the full assessment see: [Oregon Consensus: Community Information Exchange Governance Readiness Assessment](#).

Health IT Landscape and Environmental Scan, Contact: Colleen.Rawson@oha.oregon.gov

OHA's Health IT team engages in ongoing environmental scan activities to inform health IT efforts and ensure strategies and programs address evolving needs. OHA's Health IT team continues compiling data across the agency and other sources to serve various purposes, such as informing HITOC's progress monitoring, program oversight, reporting priorities and strategic planning. Refer to the [2022 HITOC Report on Oregon's Health IT Landscape](#) for more information.

HIT Commons, Contact: Luke.A.Glowasky@oha.oregon.gov

HIT Commons is a public-private collaborative in Oregon that makes strategic community investments in health IT as a public good, by advancing statewide adoption of tools that promote health and social health-related data interoperability. HIT Commons is co-sponsored by the Oregon Health Leadership Council (OHLIC) and OHA, and is jointly funded by OHA, hospitals, health plans and CCOs. For more information, see the [HIT Commons website](#).

PointClickCare Platform (formerly known as EDIE and Collective Medical)

The PointClickCare (PCC) platform includes the tools formerly known as the [Emergency Department Information Exchange \(EDIE\)](#) and the [Collective Medical platform](#). The platform allows emergency departments (EDs) in real-time to identify patients with complex care needs who frequently use the emergency room for their care. PCC brings the same real-time hospital event notifications (ED and Inpatient Admit, Discharge, and Transfer [ADT] data) to those outside of the hospital system, such as health plans, CCOs, providers, and care coordinators. OHA supports a PCC platform subscription that includes use by CCOs, Oregon Department of Human Services programs, Tribal clinics, and other Medicaid care coordinators.

The [HIT Commons Users Advisory Group \(HUAG\)](#) met on December 13, 2024. Staff facilitated a round robin discussion, asking participants to reflect on health IT and data sharing work their organizations undertook in 2024 and potential ways that HIT Commons can support efforts in 2025. HIT Commons will consider this feedback as it develops projects and use cases to pursue. Materials from HUAG meetings are available [here](#). The next meeting will be in March 2025.

In December 2024, [PCC announced](#) its intention to join the Trusted Exchange Framework and Common Agreement (TEFCA) with Kno2 as its designated Qualified Health Information Network (QHIN). PCC will be able to query certain TEFCA participants (and respond to queries from them) for structured care summaries through the Kno2 QHIN. See the Assistant Secretary for Technology Policy's (ASTP's) [TEFCA website](#) for more information about TEFCA.

Oregon's Prescription Drug Monitoring Program (PDMP) Integration Initiative

Oregon's PDMP Integration initiative connects PCC, Reliance eHealth Collaborative, EHRs, and pharmacy management systems to Oregon's PDMP. HIT Commons is overseeing the [PDMP Integration initiative](#) with guidance from its HIT Commons Users Advisory Group and in coordination with OHA's Public Health PDMP program. Bamboo Health is the technology vendor for the PDMP system. For more information see the [HIT Commons website](#).

Use of the popular PDMP Integration initiative continues to grow. 41 new organizations launched integrations in Q4 of 2024, with 21,577 prescribers and 2,063 facilities in Oregon accessing the PDMP via PDMP Integration during that period. Additional information, including a list of participating organizations, can be found on the HIT Commons PDMP Integration website [here](#).

Federal and State Health IT Policy Updates

Federal Law and Policy, Contact: Laurel.Moffat@oha.oregon.gov

See past [Health IT Policy and Program Updates](#) for news on federal health IT policy and updates to standards and guidance, including the Trusted Exchange Framework and Common Agreement (TEFCA) efforts.

News

ASTP and The Sequoia Project Designate eClinicalWorks as QHIN

In January 2025, [the Sequoia Project](#), in partnership with ASTP, announced eClinicalWorks as the eighth Qualified Health Information Network (QHIN) under TEFCA. eClinicalWorks joins CommonWell Health Alliance, eHealth Exchange, Epic Nexus, Health Gorilla, Kno2, KONZA National Network, and MedAllies, and their customers in the TEFCA community. Read more about this story [here](#).

HHS Unveils AI Strategic Plan

In January 2025, the U.S. Department of Health and Human Services (HHS) released its [Artificial Intelligence \(AI\) Strategic Plan](#), setting a vision for how AI can revolutionize health care, human services, and public health. This comprehensive roadmap outlines the department's commitment to trustworthy, ethical, and equitable AI use.

The plan outlines four key goals:

1. Catalyzing health AI innovation and adoption to unlock new ways to improve people's lives
2. Promoting trustworthy AI development and ethical and responsible use to avoid potential harm
3. Democratizing AI technologies and resources to promote access
4. Cultivating AI-empowered workforces and organization cultures to effectively and safely use AI

HTI-2 and HTI-3 Final Rules Published

In December 2024, the Assistant Secretary for Technology Policy (ASTP) finalized two components of its August 2024 [proposed HTI-2 rule](#) (aka the Health Data, Technology, and Interoperability: Patient Engagement, Information Sharing, and Public Health Interoperability). The [HTI-2 Final Rule](#) finalizes new federal regulations for the Trusted Exchange Framework and Common Agreement (TEFCA). The [HTI-3 Final Rule](#) focuses on patient privacy, finalizing three exceptions to federal information blocking regulations. Components of the original HTI-2 proposed rule related to updating criteria for ASTP's Health IT Certification program, including adding public health and payer health IT systems to the program, have yet to be finalized in rule.

HHS Updates AI Use Case Inventory

ASTP updated the list of health care use cases for AI and automation for 2024. The list, updated annually since 2023, now includes 271 use cases, which can be found on the HHS AI Use Cases Inventory [website](#).

Annual Meeting Materials Available

Recordings of the December 2024 ASTP Annual Meeting [plenary sessions](#) are now available. Topics included AI in health care delivery, health equity, and USCDI+. The breakout session slides will be available later.

Comment Opportunities

Public Feedback: The Sequoia Project Privacy & Consent Whitepaper

[The Sequoia Project](#), which is the TEFCA Recognized Coordinating Entity, published the *Moving Toward Computable Consent: A Landscape Review* whitepaper. This whitepaper explains the importance of managing privacy and consent when sharing personal health information, scans the current landscape of challenges facing those entrusted with personal health information, enumerates existing solutions, and explores the strengths and deficiencies of these approaches. Public feedback on the paper may be submitted through Friday, February 21, 2025. The whitepaper and information on how to submit feedback are available [here](#).

Public Feedback: Draft USCDI v6

Draft United States Core Data for Interoperability Version 6 (Draft USCDI v6) is now available. Draft USCDI v6 seeks to advance health data in a way that will benefit users of health IT. The comment period for Draft USCDI v6 is open through April 14 at 11:59 PM ET via the [USCDI webpage](#).

Stay Connected

You can find information about HITOC at our [website](#). Meetings are open to the public. Public comments are accepted at the end of each meeting or in writing to the HITOC Chair and Vice-Chair in care of OHA (HITOC.INFO@odhsoha.oregon.gov).

Refer to past [Health IT Policy and Program Updates](#) to review previous health IT resources, historical state and federal updates, and more.

Program Contact

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