CCO Community Advisory and Council Meeting Monday, March 23rd Zoom

Minutes

Present: Tara DaVee, Drake Eubanks, Caitlynn Haterass, Karen Hall, Val Haynes, Rick Kincade, Silverio Mogart, Char Reavis, Carla Tazumal, Michelle Thurston, Jocelyn Warren, Cindy Williams

- 1. Call Meeting to Order Meeting opened by Caitlynn Hatteras, Co-Chair.
- 2. Public Comment: No public comment
- 3. Introductions and Welcome Caitlynn Hatteras, Co-Chair.
- 4. Approve Minutes no corrections, members voted to approve the minutes.
- 5. COVID-19 Reports and Questions: Jocelyn Warren, Lane County Health manager reported on the situation with COVID-19 in Lane County. While Lane County is not seeing many cases, everyone is urged to follow the State directives in order to stay safe. Jocelyn reported that Lane County was working with the cities to create a plan for vulnerable populations, including the unhoused. Members were advised to limit their interactions, wear masks, wash hands frequently.
- 6. CCO Reports

Debi Farr and Amanda Cobb reported for Trillium. Trillium employees working from home for near future. COVID response includes addressing immediate healthcare needs relating to COVID and creating a resource page for community partners and on our website.

 Health IT Discussion- Leah Edelman shared a PowerPoint from the Oregon Health Authority presenting the Strategic Plan for Health IT – the next 5 years. Members shared their experiences.

Goal One: Share patient information across the care team

- Information often doesn't follow patients from one provider to another or from on type of provider to another
- Frustration around having to share "everything" again after making a change in provider, even in the same group
- Information about disability often doesn't seem to transfer, so, for example, a Deaf patient gets phone calls instead of a text or email. This makes it hard to establish care.
- Different providers use different systems, so they don't seem to talk to each other.

Goal 2: Use data for system improvement

- Challenges of different systems not collected or measuring data the same way.
- Would like to see data collected in a standard fashion and used to give feedback on what is working.

• Barriers could be standardizing data collection and incentive for providers to do so.

Goal 3: Patients can access their own information and engage in their care.

- Patient portals can be useful, but every provider system has a different portal, so hard to keep track.
- Often families are not linked in portals so have a different portal for each person- would be good to only have to look in one portal.
- Hard to remember passwords ad keep track of how to access, especially for older adults, those with intellectual disabilities and people for whom English is a second language.
- Would like to see one easy app that accesses all care, available in different languages, reminds the patient about needed services, has a "ask a nurse" type function and is easy to navigate.
- **8.** Next Meeting- meetings will be held by Zoom for the foreseeable future. If you have problems accessing or using Zoom, please contact Leah. The CAC will meet on April 27th.

Oregon's Strategic Plan for Health IT The next 5 years

Consumer Listening Session 03/10/2020

This meeting is being audio recorded and will be posted on our website.



What is health IT?

Health IT means the technology your health care providers use to organize, share, retrieve your health information.

Some examples include...



Electronic health/medical records: the digital version of your paper chart



Health information exchange tools: sharing patient information between different providers treating the same person



Patient portals attached to provider electronic health records - where you can look up your health information, see test results, message providers, etc.



What is the strategic plan?







OHA is transforming the health care system; the core of those efforts is the coordinated care model. The coordinated care model relies on health IT to succeed.

Coordinating health IT efforts at the state level is important because there are so many moving parts.



Oregon's Health IT Oversight Council (HITOC) is charged with creating a statewide strategic plan for health IT in Oregon.



Health IT goals

Vision: a transformed health system where health IT efforts ensure that care Oregonians receive is optimized by health IT

- **a b 1**. Share patient information across care team
- 2. Use data for system improvement



3. Patients can access their own health information and collaborate in their care



Emerging area: Health IT supports social determinants of health and health equity



Health IT goals support policy priorities

Health IT Goals Health System Transformation Policy Priorities

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- ✓ Increase access to care
- ✓ Enhance care coordination



- ✓ Pay for outcomes and value
- ✓ Measure progress



- ✓ Improve health equity
- ✓ Shift focus upstream

Health IT in Oregon



13

Providers are using electronic health records at high rates overall Health information exchange options have grown significantly

Health



CCOs and providers are investing in Health IT to support analytics and value-based payment



Oregonians are using patient portals to view their data and message their providers, some have multiple patient portals

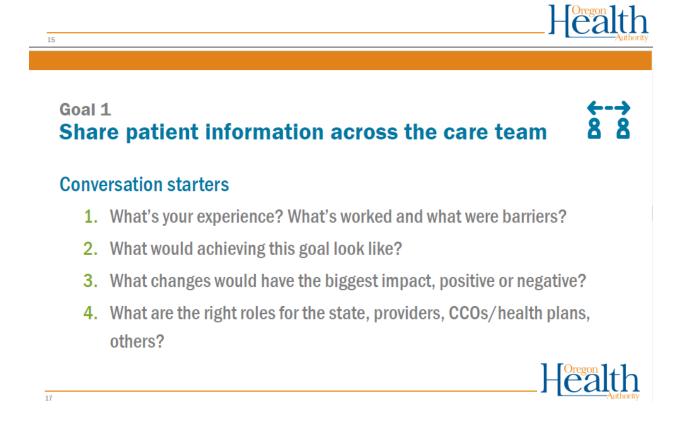


14

Providers are asking patients about social determinants of health, and making referrals to social services

Goal 1 Share patient information across the care team ⁶ ³ ⁸

Oregonians have their core health information available where needed, so their care team can deliver person-centered, coordinated care.

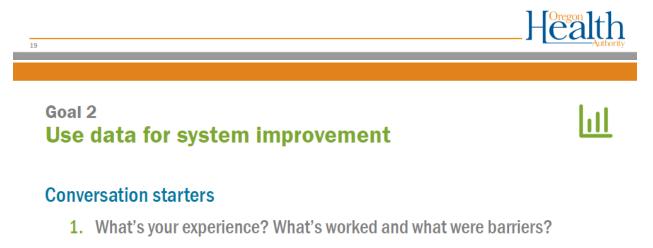


Goal 2 Use data for system improvement

Details

Clinical and administrative data are efficiently collected and used to support quality improvement and population health management, as well as to incentivize improved health outcomes.

Aggregated data and metrics are also used by policymakers and others to monitor performance and inform policy development.



- 2. What would achieving this goal look like?
- 3. What changes would have the biggest impact, positive or negative?
- 4. What are the right roles for the state, providers, CCOs/health plans, others?



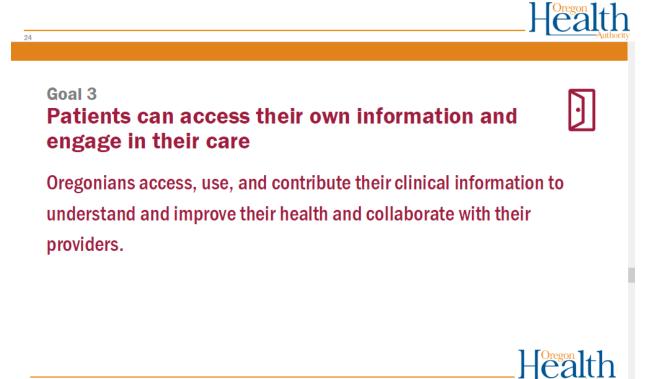
21

Goal 3 Patients can access their own information and engage in their care



Conversation starters

- 1. What's your experience? What's worked and what were barriers?
- 2. What would achieving this goal look like?
- 3. What changes would have the biggest impact, positive or negative?
- 4. What are the right roles for the state, providers, CCOs/health plans, others?



22