



Metropolitan Portland Health Information Exchange Metropolitan Healthcare Environment

Results and Reports Retrieval System

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Metropolitan Portland Area Health Care Environment Updated February 20, 2007¹

Metropolitan Portland Area and Demographics

The metropolitan Portland area includes the three county area surrounding Portland, Oregon with a population of 1.57 million. Portland is the largest city in Oregon and is the major economic center in Oregon. The Tri-County area includes Clackamas, Multnomah and Washington counties, situated at the northern end of the Willamette Valley with 3.2% of the State's land area and 42.5% of Oregon's 3.69 million population.

Tri-County: Area and Population, July 2006

	Area (square miles)	Population (July 2006) ²
Clackamas County	1,879	367,040
Multnomah County	465	701,545
Washington County	727	500,585
Tri-County Total	3,071	1,569,170
State of Oregon	96,002	3,690,505
Tri-County % of Oregon	3.2%	42.5%

The Tri-County area is the major part of the Portland-Vancouver Metropolitan Statistical Area (MSA) which also includes Yamhill County in Oregon and Clark County in the State of Washington. This description of the metropolitan Portland health care environment focuses on the Tri-County area without Yamhill and Clark Counties considered.

	Ages < 18	Ages 18-	Ages 65+	Total	%
		64			
Clackamas County	89,864	236,406	40,770	367,040	23.4%
Multnomah County	155,818	474,770	70,957	701,545	44.7%
Washington County	134,862	321,822	43,900	500,585	31.9%
Tri-County Total	380,544	1,032,999	155,627	1,569,170	100.0%
Tri-County Age % of Total	24.3%	65.8%	9.9%	100.0%	
State of Oregon Age %	23.6%	63.9 %	12.5%	100.0%	

Tri-County Area: July 2006 Population Distribution²

The proportion of the population aged 65 and over is much lower in the metropolitan Portland area than for the State of Oregon and United States.

Tri-County Health Plan Coverages

Health plan coverage data is reported by a number of public agencies for regulatory, public policy and administrative purposes. The collective reports provide useful information about health coverages but are difficult to directly describe a local

¹ Prepared by Witter & Associates. Questions or comments should be addressed to David Witter at <u>witterdave@aol.com</u>.

² Center for Population Research, Portland State University July 2006 population estimates.

market like the Tri-County area. The reports include primary, secondary and dual coverages of some persons as well as some double counting of some groups. An estimate of the Tri-County coverage from these reports (with multiples coverages) is shown in the following table.

Estimated in councy nearth an coverages betwee nonin able Reports, say 2000							
	Ages < 18	Ages 18-64	Ages 65+	Total	% of		
					population		
Uninsured, no coverage ⁴	47,949	202,468	1,089	2,51,506	16.0%		
Medicare⁵	#	33,314	154,382	187,696	12.0%		
OHP/Medicaid via FCHPs ⁶	71,205	38,317	6,517	116,039	7.4%		
OHP/Medicaid via FFS, other ⁷	10,269	14,036	7,190	31,495	2.0%		
13 Oregon Domestic Insurers ⁸	207,939	565,069	66,491	839,499	53.5%		
10 Largest Foreign Insurers ⁹	40,957	111,300	19,568	171,825	11.0%		
92 Smaller Foreign Insurers	8,924	24,250	7,715	40,889	2.6%		
Self-insured Coverage Estimate ¹⁰	77,246	209,912	#	287,158	18.3%		
Other Non-Reporting Insurers ¹¹	unknown	unknown	unknown	unknown			
Oregon Department of Corrections		524	7	531	0.0%		
Oregon Veterans ¹²	60	82,228	47,878	130,166	8.3%		
Total Reported Lives	464,549	1,281,418	310,837	2,056,804	131.1%		
Ratio to Tri-County Population	122.1%	124.0%	199.7%	131.1%			

Estimated Tri-County Health Plan Coverages Derived from Public Reports, July 2006³

Assumed to be insignificant and is treated as zero.

Individuals in the Medicare Advantage program are reported twice, once under Medicare and once under the insurer categories since the recipients receive their coverage through a Medicare Advantage participating health plan rather than directly through Medicare. Traditional Medicare enrollees with a supplemental Medicare coverage plan are also counted twice since they have primary and secondary/supplemental coverage. Several of the OHP/Medicaid fully capitated health plans (FCHPs) are insurance companies resulting in a double counting of those enrollments. Medicaid also covers some Medicare individuals if they meet certain

³ Analysis of reported data from various sources, including allocation estimates of some statewide data to determine the Tri-County estimates.

⁴ Oregon Office of Health Policy and Research, Oregon Population Survey estimates for August/September 2006.

⁵ Centers of Medicare and Medicaid Services, Medicare coverage data for July 2004 and 2005 estimated forward to July 2006.

⁶ Oregon Health Plan/Medicaid data for July 15, 2006 for enrollment covered through Fully Capitated Health Plans (FCHPs).

⁷ Oregon Health Plan/Medicaid data for July 15, 2006 for enrollment in Fee for Service (FFS) and other coverages.

 ⁸ Oregon Insurance Division data for domestic (Oregon incorporated) reportable health plans July 2006.
⁹ Oregon Insurance Division data for foreign (incorporated elsewhere) reportable health plans, July

^{2006.} ¹⁰ Estimate of self-insured coverage from Health Insurance in Oregon, draft January 2007 report, Oregon Insurance Division.

¹¹ Coverage for some out-of state company employees or retirees would not be subject to reporting to the Oregon Insurance Division. No source of information is available to estimate this category but it is assumed to be small.

¹² United State Department of Veterans Affairs data for September 30, 2005.

criteria. Some insurers provide stop-loss coverage to employer self-insured plans that results in double counting the same lives.

In addition to these identified issues, some families have primary coverage through more than one employer-supported health plan.

The results of the 2006 Oregon Population Survey provide the latest estimates of insurance coverages, as shown in the following table.

statemae nearth coverages, oregon ropatation salvey, sammer 2000								
	Ages < 18	Ages 18-64	Ages 65+	Overall				
Uninsured, no coverage	12.6%	19.6%	0.7%	15.6%				
Just one health plan	84.1%	71.1%	39.3%	70.2%				
More than one health plan	3.3%	9.3%	60.0%	14.2%				

Statewide Health Coverages, Oregon Population Survey, Summer 2006

Health Plan Risk Bearing: The primary responsibility for the payment of services for Medicare Advantage enrollees and Medicaid enrollees covered through a Fully Capitated Health Plan (FCHP) is shifted from Medicare and Medicaid to the health plan. The health plans receive a premium-like payment for the covered services. The insurer or FCHP health plan bears the risk for any differences in the premiums they receive and the payments they make to providers. The effective coverage burden on the various types of health plans can be approximated by eliminating identifiable double counting, secondary/supplemental coverages, and discounting the impact of dual coverages among insurers as shown in the following table.

Estimated Tri-County Effective Coverage Burden Among Health Plan Types, July 2006

	Ages < 18	Ages 18-64	Ages 65+	Total	% of
					population
Uninsured, no coverage	47.949	202,468	1,089	251,506	16.0%
Medicare	#	27,969	83,353	111,322	7.1%
FCHPs for OHP/Medicaid	71,205	38,317	6,517	116,039	7.4%
OHP/Medicaid for FFS, other	10,269	12,240	40	22,549	1.4%
13 Oregon Domestic Insurers	160,565	480,828	58,545	699,938	44.6%
10 Largest Foreign Insurers	27,156	81,321	6,083	114,560	7.3%
92 Smaller Foreign Insurers	2,206	6,607	-	8,813	0.6%
Self-insured Coverage Estimate	61,194	183,249	#	244,443	15.6%
Other Non-Reporting Insurers	unknown	unknown	unknown	unknown	
Oregon Veterans	Ignored	Ignored	Ignored	Ignored	
Total Tri-County Population	380,544	1,032,999	155,627	1,569,170	100.0%

Assumed to be insignificant and is treated as zero.

The costs for health care provided to the 15.8% uninsured represents a burden on the entire community that is distributed to other payers via cost-shifting. Similarly, payments by Medicare or Medicaid that are below costs are distributed to other payers via the cost shifting. This table also reflects that substantial portions of the coverage burden and risk for Medicare and Medicaid are placed with insurers and FCHPs.

Health plans

The largest insurance plans operating in the Tri-County area are reflected in the following table along with the June 2006 covered lives for the entire state. Data is not available to estimate the number of covered lives for each health plan in the Tri-County area.

	Oregon -	Oregon-based
	Statewide	(domestic) or
	covered lives	foreign
Regence Plans	710,130	Domestic
Kaiser Permanente	401,604	Domestic
Providence Health Plans	212,677	Domestic
ODS Health Plan	172,430	Domestic
Lifewise Health Plan	124,094	Domestic
Health Net Health Plans	106,260	Domestic
Connecticut General Life Insurance	94,834	Foreign
Aetna Life Insurance Company	80,124	Foreign
Pacificare of Oregon	47,871	Domestic
Great-West Life & Annuity Insurance Co.	47,413	Foreign

Largest Insurance	Plans in Orego	n Onerating in	Tri-County Area ¹³
Largest insurance	r tans in Orego	n operating in	Infounty Area

Fully-capitated health plans (FCHP) play a major role in serving the OHP, Medicaid and CHIP populations. Medicaid/OHP clients may also be served through a fee-forservice (FFS) program and a primary care case management (PCCM) program. Five of Oregon's fifteen FCHPs operate primarily in the Tri-County area as reflected in the following table.

Fully-capitated Health Plans (FCHP) serving Oregon¹⁴

<u> </u>	
Oregon - Statewide	Tri-County
covered lives*	covered lives
100,155	80,747
16,011	9,679
15,475	14,972
6,333	6,327
5,741	4,315
143,715	116,040
133,392	27
277,107	116,067
90,122	18,975
9.815	1,862
377,044	136,904
	covered lives* 100,155 16,011 15,475 6,333 5,741 143,715 133,392 277,107 90,122 9.815

* excludes 29,358 State-wide enrollees in special programs.

¹³ Oregon Insurance Division data for June 2006.

¹⁴ Office of Medical Assistance Program data for July 15, 2006.

Hospitals and Health Systems

Kaiser Permanente, Legacy, Providence and OHSU are the largest health systems in the Tri-County area. Each system operates one or more hospitals, a network of clinics and/or physician practices, and other healthcare services. Kaiser Permanente and Providence also operate health plans. Adventist, Tuality, and Willamette Falls operate hospitals and other healthcare services. Kaiser, Tuality and Providence systems operate FCHPs as shown above. Hospital operating statistics for the thirteen hospitals in the Tri-County area are shown in the following table.

Hospital	Available	Inpatient	Emergency	Other			
	Beds	Discharges	Room Visits	Outpatient			
	Dec.	_		Visits*			
	2005						
Adventist Medical Center	214	10,388	41,687	282,958			
Kaiser Sunnyside Medical Center	182	13,410	30,374	71,543			
Legacy Emanuel Hospital & Health Center	400	18,350	44,992	169,060			
Legacy Good Samaritan Hospital & Medical Center	262	13,328	32,315	159.176			
Legacy Meridian Park Hospital	133	6.942	29,550	100,611			
Legacy Mount Hood Medical Center	81	4,783	37,214	67,082			
Oregon Health Sciences University Hospital	443	25,069	31,603	576,738			
Physicians Hospital	39	443		2,982			
Providence Milwaukie Hospital	56	3,322	25,760	140,273			
Providence Portland Medical Center	374	22,720	52,171	1,016,140			
Providence St Vincent Medical Center	482	31,422	65,296	692,202			
Tuality Healthcare	135	6,202	40,781	80,173			
Willamette Falls Hospital	91	5,767	25,315	58,828			
Total Tri-County Area	2,892	162,146	457,058	3,417,766			

2005 Tri-County Hospital Operating Statistics¹⁵

*Does not include physician or other visits not directly part of the hospital.

Physicians and Other Clinicians

The Kaiser and Regence provider directories show that the Tri-County area is served by over 5,800 clinician providers with nearly 4,000 practicing physicians, nearly 700 nurse practitioners, physician assistants, midwives and nurse anesthetists, over 900 social workers and counselors, and 300 other providers. An unknown number of additional physicians and other clinician providers are employed by county health departments and other safety net clinics.

The following two tables show the distribution of clinicians by specialty categories. The first table shows the type of clinicians within the specialty categories. The second table shows combined 4,633 physicians, nurse practitioners, physician assistants, midwives, and nurse anesthetists by size of the practice organization or clinic in which they practice.

¹⁵ Analysis of Oregon Office of Health Policy and Research 2005 DataBank data.

Specialty Category Physicians NP/PA/ Social Other Total							
specially calegoly					ΤΟΙΔΙ		
	MD/DO	CNM/CRNA	Workers,	Providers			
		(2)	Counselors	(3)			
Primary Care (1)	997	336			1,333		
Medicine Specialties,	682	18	6		706		
Dermatology, Neurology							
Pediatrics & Specialties	158	10			168		
Obstetrics & Gynecology	246	70			316		
Emergency Medicine,	150	20			170		
Urgent Care, Hospitalists							
Laboratory & Imaging	268			7	275		
Surgery & Specialties	657	28	1		686		
Anesthesiology	309	122			431		
Ophthalmology, Optometry,	209	1		211	421		
Otolaryngology							
Mental Health, Addiction	198	78	903	7	1,186		
Medicine							
Other Specialties	69	7	4	76	156		
Total	3,943	690	914	301	5,848		

Tri-County Physician and Other Clinician Providers by Specialty (August 2006)¹⁶

(1) Includes family medicine, general practice, geriatrics, internal medicine practitioners.

(2) Includes nurse practitioners, physician assistants, midwives, nurse anesthetists.

(3) Includes optometrists, opticians, physical therapists, podiatrists, etc.

Specialty Category Over 25 10 - 24 5 to 9 2 to 4 Single Total MD						
specially earcesoly	Providers	Providers	providers	Providers	Providers	DO NP PA
			p			CNM CRNAs
Primary Care (1)	805	140	102	99	187	1,333
Medicine Specialties,	426	99	50	46	79	700
Dermatology, Neurology						
Pediatrics & Specialties	138	18	7	1	4	168
Obstetrics & Gynecology	198	23	42	17	36	316
Emergency Medicine,	149		12	4	5	170
Urgent Care, Hospitalists						
Laboratory & Imaging	131	53	56	17	11	268
Surgery & Specialties	316	50	90	86	143	685
Anesthesiology	362	6	23	6	34	431
Ophthalmology, Optometry,	109	14	19	28	40	210
Otolaryngology						
Mental Health, Addiction	91	14	10	6	155	276
Medicine						
Other Specialties	37	4	18	7	10	76
Total	2,762	421	429	317	704	4,633

Tri-County Physician, Nurse Practitioner, Physician Assistant, Midwife and CRNA Clinicians by Practice Specialty and Size of Total Practice (4) (August 2006)

(4) Total practice size includes all types of providers

¹⁶ Analysis of physicians and other providers listed in provider directories on Kaiser Permanente and Regence BluseCross BlueShield websites, accessed August 10 to September 13, 2006. These data exclude physicians, nurse practitioners, physician assistants and other providers employed by county health departments and other safety net clinics.

Over 50% of these 5,800 clinician providers are associated health systems or group practices with 25 or more total providers. About 58% of physicians and two-thirds of NP/PA/CNM/CRNAs are associated with groups with 25 or more total providers. The distribution of clinicians among the largest practice organization is shown in the following table.

Practice Size and largest	Physicians	NP/PA/	Social	Other	Total
Practice Organizations	MD/DO	CNM/CRNA	Workers,	Providers	
		(2)	Counselors	(3)	
Kaiser Permanente	628	212	96	59	995
Oregon Health Science Univ	781	120	18	6	925
Providence organizations	220	31			251
Oregon Anesthesiology Grp	172				172
Legacy organizations	100	31	2		133
The Oregon Clinic	91	25			116
Portland Clinic	53	2	2	2	59
Womens Healthcare Assoc	34	9			43
Adventist organizations	41			1	42
Virginia Garcia Health Cntr	23	10			33
Pacific Medical Group	26	6			32
NW Cancer Specialists	27	3			30
California Emergency Phys.	29				29
Broadway Medical Clinic	27				27
Eye Health Northwest	21			5	26
Pacific Cataract & Laser Inst.	6	9		11	26
The Childrens Clinic	23	2			25
Subtotal - over 25 providers	2,302	460	118	84	2,964
6 Groups with 20-24 providers	96	30			126
23 Groups with 10-19 providers	253	42	17	4	316
74 Groups with 5-9 providers	379	50	19	11	459
166 Groups with 2-4 providers	288	29	41	72	430
Solo practitioners	625	79	719	130	1,553
Total	3,943	690	914	301	5,848

Tri-County Physician and Other Clinician Providers by Practice Size (August 2006)

(2) Includes nurse practitioners, physician assistants, midwives, nurse anesthetists.

(3) Includes optometrists, podiatrists, physical therapists.

Other Laboratories, Imaging Practices and Ambulatory Surgery Centers

Tri-County area hospitals and health systems are major providers of laboratory and imaging services and operate ambulatory surgery centers. The major laboratories, imaging centers and ambulatory surgery center independent of the Tri-County hospitals and health systems include:

Laboratories:

Laboratory Corp of America Quest Diagnostic Services (Metwest Inc) Oregon Medical Laboratory (PeaceHealth) SmithKline Beecham Clinical lab Imaging Centers and Imaging Practices: Body Imaging PC Center for Medical Imaging LLC Diagnostic Imaging NW PC **Diagnostic Radiologists EPIC** Imaging Medical Imaging Group of Hillsboro **OHSU Medical Group** Portland Clinic Portland Medical Imaging The Radiology Group PC Trauma Specialists LLP **Tualatin Imaging PC Surgery Centers** Center for Specialty Surgery LLC East Portland Surgery Center LP Eye Health Eastside Surgery Center Futures Outpatient Surgery Center Gastro Endoscopy Center **Gresham Station Surgery Center** NGC Endoscopy Services **Oregon Outpatient Surgery Center** Pacific Digestive Endoscopy Center (Pacific Digestive Associates) Portland Clinic The Endoscopy Center at West Hills Gastro LLC The Oregon Clinic Tigard Surgery Center (Westside Surgery Center LLC)

Safety Net Providers and Community Clinics

Six of Oregon's twenty-three Federally Qualified Health Centers (FQHC) are located in the Tri-County area provide substantial amounts health care to the poor and disadvantaged.

	Number of Locations	Clients	Visits	% OHP,
				Uninsured% ¹⁸
Recognized FQHCs				
Central City Concern	7 in Portland			
- Old Town Clinic		3,168	7,271	43%,57%
Clackamas County Health	3 in Clackamas County	11,070	29,230	14%, 71%
Department				
Multnomah County Health	56 in Multnomah County	60,366	284,430	44%, 48%
Department				

Tri-County FQHC Safety Net Clinics¹⁷

¹⁷ Multnomah County data from 2005 Annual Report, other data from Oregon Primary Care Association website for an unidentified recent year, probably 2003 or 2004.

¹⁸ Oregon Primary Care website for an unidentified recent year, probably 2003 or 2004.

	Number of Locations	Clients	Visits	% OHP, Uninsured% ¹⁸
Native American Rehabilitation Association	4 in Portland	1,795	14,225	55%, 32%
Outside In	1 in Portland	3,106	6,562	12%, 88%
Virginia Garcia Memorial Health Center	5 locations in Washington & Yamhill Counties	14,619	57,223	40%, 52%
Yakima Valley Farm Workers Clinic	2 in Portland, 4 outside Tri-County area			
FQHC Look Alike				
OHSU Richmond Clinic	1 in Portland			

OCHIN: OCHIN is a 501 (c)(3) not-for-profit organization that supports safety-net clinics serving non-insured and under insured patients. OCHIN's mission is to promote health through the effective use of information and information technology to support the medically underserved.

OCHIN provides administrative services to 18 partner organizations in 100 locations with more than 2,500 end users in private and public health centers located in both rural and urban settings in Oregon and California. As a collaborative, OCHIN goal is to provide these services more efficiently and effectively than would be possible by individual organizations. Tri-County participating organizations include the Clackamas County Public Health Department, Multnomah County Health Department, OHSU Richmond Clinic and Virginia Garcia Memorial Health Center.

OCHIN was founded in 2000, initially as a department of CareOregon, to address concerns about the impact of an information technology gap in the field of health care as it applies to the underserved and underinsured populations. OCHIN provides a shared set of services using Epic practice management and electronic health record software to participating OCHIN clinics that can share client health records across multiple organizations, each patient has one health record, regardless of how many safety-net clinics are in the OCHIN collaborative. Safety net patients receive improved continuity of care and health outcomes while creating a rich aggregate database for research. OCHIN serves as a Organized Health Care Arrangement (OHCA), recognized in HIPAA privacy rules that allows multiple covered entities who participate in joint activities to share protected health information about their patients in order to manage and benefit the joint operations.

Tri-County Employment

The Tri-County area has 50.8% of the State's employment in private firms compared to 42.5% of the State's population.

	Oregon	Tri-County	% of Oregon	% of Tri-
				County
Private firms	1,428,628	725,049	50.8%	87.1%
Local government	185,093	78,563	42.4%	9.4%
State government	63,210	14,736	23.3%	1.8%
Federal government	28,865	14,267	49.4%	1.7%
Total employment	1,705,795	832,616	48.8%	100.0%

Oregon and Tri-County Covered Employment, Second Quarter 2006¹⁹

Largest Tri-County Employers: Four of the six largest employers in the Tri-County area are the major health care delivery systems with over 42,000 employees in the Portland area.

Largest Employers of Portland Metro Area, 2005²⁰

	Number of	Business Sector
	Employees	
Intel Corp	16,740	Electronic manufacturing
Providence Health System	14,639	Health care and insurance
Oregon Health & Science University	11,500	Health care, higher education, research
Fred Meyer Stores	8,500	Retail
Kaiser Foundation Health Plan of the NW	8,221	Health care
Legacy Health System	8,196	Health care
City of Portland	7,996	Local government
Nike Inc	7,648	Athletic footwear and apparel
State of Oregon	7,180	State government
Beaverton School District	5,000	Education
Wells Fargo	4,873	Financial services
Greenbrier Companies, Inc	3,972	Transportation manufacturing
Portland Community College	3,515	Education
Freightliner LLC	3,500	Transportation manufacturing
Portland State University	3,420	Higher education
United Parcel Service	3,400	Parcel delivery services
US Bank	3,196	Financial services
Bonneville Power Administration	2,959	Utility
Portland General Electric	2,750	Utility
Target Corp	2,387	Retail
PacifiCorp	2.372	Utility
Tektronix	2,000	Electronic manufacturing

 ¹⁹ Oregon Employment Division, OLMIS Covered Employment and Wages, Second Quarter, 2006.
²⁰ Portland Business Journal, 2007 Book of Lists, data used with permission.

Oregon and Tri-County Health Care Spending Estimates

Approximately \$20 billion of health care expenses were incurred in Oregon in 2006 with about \$8.5 billion in the Tri-County on a population proportional basis.

Estimated Oregon & Tri-County Personal Health Care Expenditures, 2006				
	Oregon	Tri-County at 42.5% of		
	Statewide	Statewide Estimate		
Hospitals	\$7,019 million	\$2,983 million		
Physicians	\$5,925 million	\$2,518 million		
Other Professional Services	\$839 million	\$357 million		
Dental Services	\$1,433 million	\$609 million		
Home Health care	\$227 million	\$96 million		
Prescription Drugs	\$1,609 million	\$684 million		
Other Non-Durable Medical Products	\$550 million	\$234 million		
Durable Medical Products	\$300 million	\$128 million		
Nursing home Care	\$995 million	\$423 million		
Other Personal Health Care	\$1,131 million	\$481 million		
Total Personal Health Care Expenditures	\$20,028 million	\$8,513 million		

Estimated Oregon & Tri-County Perso	onal Health Care	Expenditures, 2006 ²¹
		Tot Country of 12 EV/ of

²¹ Inflation adjusted estimates based on Center for Medicare and Medicaid Services 2004 data for Oregon Personal Health Care Expenditures, All Payers, 1980-2004 and projected inflation adjustments for National Health Expenditure Amounts and Annual Percent Change by Type of Expenditure: Selected Calendar Years 1999-2015.

Background, Sources, Related Documents Appendix A

The MPHIE Mobilization Planning effort was commissioned and financed by the Oregon Business Council's Health Information Exchange Leadership Group. The project leadership team (Tiger Team) provided oversight and leadership in guiding the development of the planning included:

Andrew Davidson, Oregon Association of Hospital and Health Systems Janice Forrester, PhD, The Regence Group Dick Gibson, MD, PhD, MBA Providence Health Systems & Legacy Health Systems Jody Pettit, MD, Oregon Health Care Quality Corporation & Office for Oregon Health Policy and Research

The Mobilization Planning effort was staffed by Oregon Health Care Quality Corporation. Staff and sub-contractors who contributed to various portions of this report include:

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The Mobilization Planning effort builds upon the report to the Oregon Business Council (OBC) Data Exchange Group titled "Oregon Health Information Exchange Options" dated May 15, 2006 available at <u>http://www.q-corp.org/q-corp/images/public/pdfs/OR%20HIE%20Options.pdf</u>.

The Mobilization Planning effort report relies on a number of sources of information including published studies, publications and reports of major organizations involved in health information exchange, and information collected from other regional health information organizations (RHIOs) and health information exchanges (HIEs) and interviews and discussion with clinicians and other stakeholders in the community.

Key Mobilization Planning documents include

- MPHIE Final Report
- Metropolitan Portland Area Health Care Environment.
- MPHIE Technology Plan.
- MPHIE Privacy and Security Assessment.
- MPHIE Governance Plan.
- MPHIE Business Plan.
- MPHIE Operations Plan.