



OCHIN

2018 Annual Report

Enabling a healthier future for every community.

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Dear Members and Colleagues,

2018 was an inspiring year for our Collaborative, against a backdrop of rapid policy and technology changes in our industry. The work that you do—and OCHIN's support for your work—has never been more important. You continue to increase access and improve the health of millions of the nation's most vulnerable, and the OCHIN Collaborative continues to increase impact in service to underserved communities nationwide.

OCHIN welcomed 11 new organizations to our hosted EHR this year—including our largest contract yet—expanding our footprint across the U.S., including three new states: Colorado, Connecticut, and New York. In 2018, we had more patient encounters logged on our hosted EHR systems than in our first eight years combined.

We're using technology for good; reaching and improving care for low-income and rural patients. In 2018, we made gains in data exchange and integration to better coordinate patient care, and we expanded access in rural and underserved areas through broadband network connectivity and telehealth. We're connecting community health centers across the U.S. to each other and to the broader delivery system.

Together, we're learning what works when it comes to caring for complex, often marginalized patients. We're sharing what we learn across the Collaborative, with other health center networks across the country, and with state and federal lawmakers. We significantly expanded our research operations in 2018 and advanced our government relations efforts, which we formally established in 2017. We're starting to see our impact on policy, and we will continue to learn, think big, and push boundaries to catch laws and practices up with technology.

In the coming year, we anticipate an increasing need among health centers in keeping up with the demands and challenges of modern health care and treating complex patients. OCHIN will meet this need head-on. There is growing urgency that we—and the populations we serve—not be left behind by the larger system around us. OCHIN will continue to push for policies and programs around telehealth, interoperability, and other key issues that expand access and reflect the best science and care. I look forward to building on the success of 2018 toward a healthier future in every community.

I could not be prouder of what we have accomplished together. Thank you all for everything you do.

Sincerely,

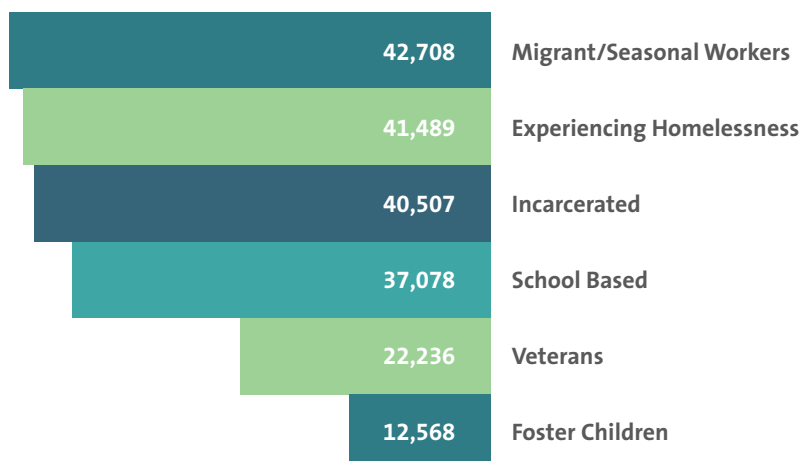
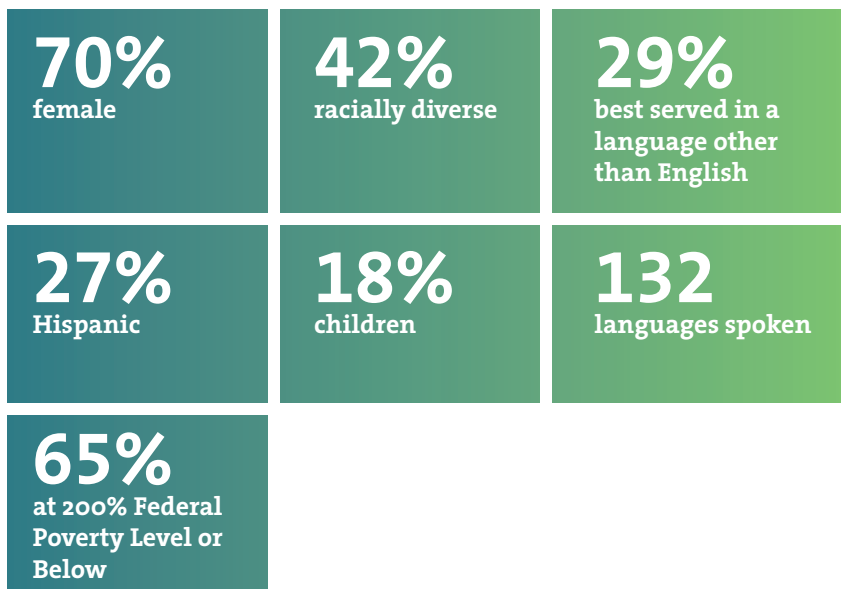
A handwritten signature in black ink, appearing to read 'AS', with a long, sweeping horizontal line extending to the right.

Abby Sears, CEO

Improving Outcomes for Vulnerable Patients

The movement toward health equity is critically necessary to build a healthier future. OCHIN's technology and collective expertise are helping providers improve care and health outcomes for the nation's most vulnerable and complex patients.

Our members' patient population includes over **5.1 million** patients seen in the last three years.



Health Outcomes:
Our Members Are
Doing Critical Work



43

organizations exceeded the HP2020 target for Controlling High Blood Pressure, as did the Collaborative-wide average



50%+

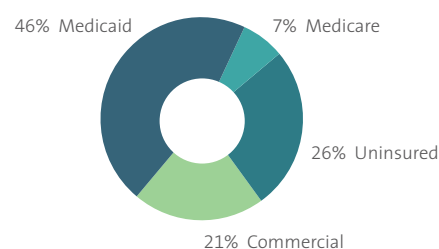
of OCHIN health centers improved Colorectal Cancer Screening rates, and the Collaborative is performing better than FQHCs nationally



50%

of OCHIN health centers improved diabetes control, while national FQHC performance has trended negatively over the past few years

PAYER MIX



MEMBER STORY: CHILDHOOD IMMUNIZATION

Lynn Community Health Center, Lynn, MA

Protecting patients against vaccine-preventable disease is a priority at Lynn Community Health Center (LCHC) in the coastal city of Lynn, Massachusetts. In addition to the comprehensive primary care, behavioral health, and other specialty care services provided to a patient population that is over 90% in poverty, 80% minorities, and more than half best served in languages other than English, LCHC has a robust immunization program that recently took over the City of Lynn's Immunization Clinic.

LCHC has the highest childhood immunization rates in the OCHIN Collaborative, and Vaccine Program Coordinator Gabriela Garcia uses a combination of reports from OCHIN Epic and its interface with the state's immunization registry to stay vigilant about patients' vaccine needs. Using these tools and implementing strategies like standing immunization orders and elbow support for nursing staff, LCHC improved its childhood immunization rate by nearly 9% in 2018.

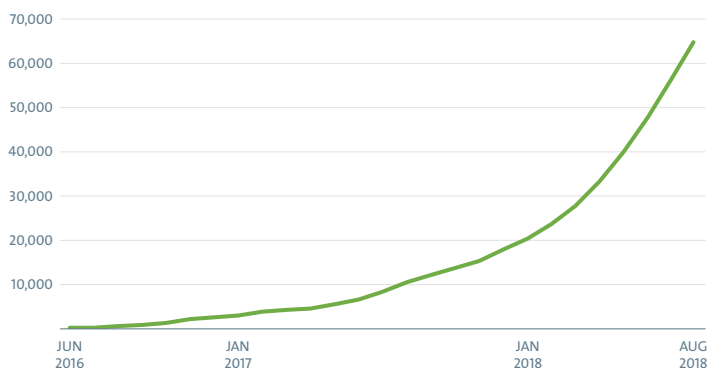


Addressing Social Determinants to Improve Health

Social determinants of health (SDH) and social risk factors such as poverty, lack of education, minority status, homelessness, and lack of social support profoundly impact health and are critical drivers of persistent health inequities. OCHIN and our partners are studying how best to collect, integrate, and use patient-reported and community-level SDH data in primary care, and how care teams can use their EHR to better coordinate care for complex patients.

We developed SDH screening tools in our hosted EHRs to collect this critical patient information, and our members have recorded SDH data for 52,879 unique patients. Having this data at their fingertips, providers can consider crucial social risk factors to make more informed decisions when delivering care. Through the EHR they can refer patients to community resources that can help them overcome some of their barriers to good health.

CUMULATIVE SDH SCREENS



64K

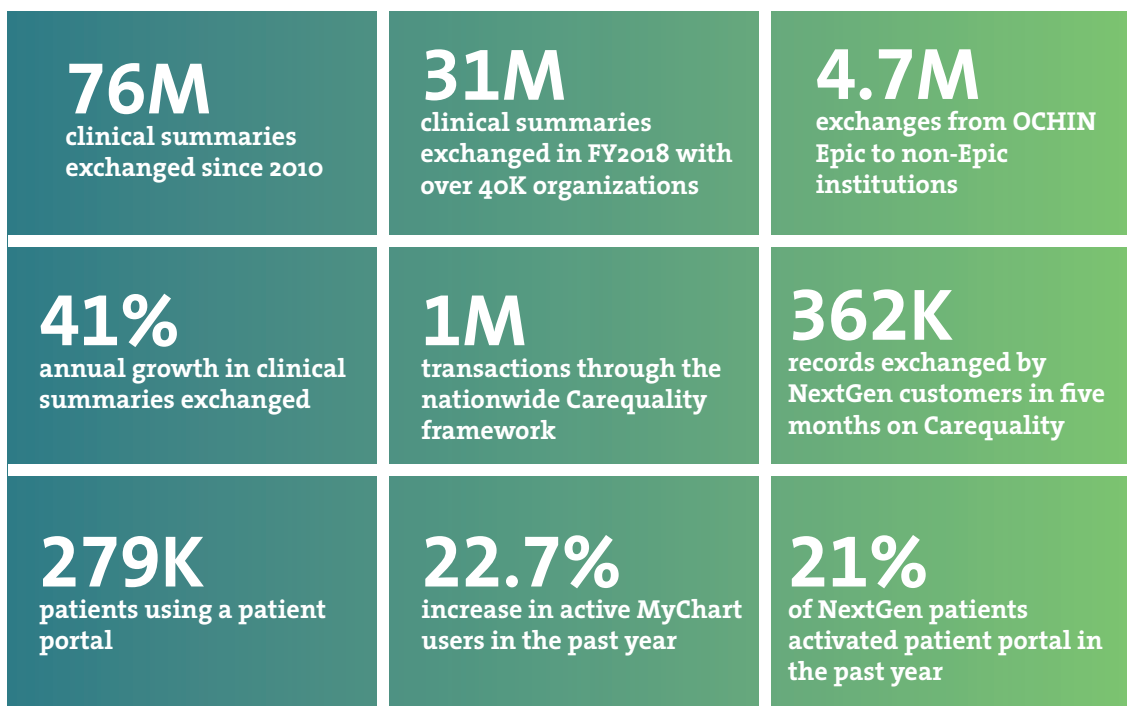
SDH screenings conducted

53K

patients screened for SDH

Care Coordination and Integration

Having a complete picture of a patient's health care—across the spectrum of settings—helps providers deliver better care. OCHIN is a leader in moving data to the point of care where it can improve clinical decision making.



Leading the Way on Health Information Exchange

The OCHIN Collaborative has exchanged over 76 million clinical summaries since 2010—31 million in the past year—to organizations on a variety of EHR platforms. This means providers on the OCHIN network, regardless of setting or location, have a patient's complete medical records at their fingertips so they can provide safer, more coordinated care. OCHIN has also been working closely with Carequality, DirectTrust, and eHealth Exchange to expand national frameworks to support bi-directional data exchange and electronic health record interoperability.

In 2018, we established a partnership with Netsmart and LifeWorks Northwest, a provider of behavioral health and addiction treatment

services, to enhance data sharing through Carequality. This collaboration helps connect patients' behavioral and physical health and gives providers the data they need at the point of care to drive better outcomes.

OCHIN also worked throughout 2018 to reform 42 CFR Part 2 to allow providers appropriate access to patient substance use information that is essential to coordinated whole-patient care. While Congress did not ultimately include this in their 2018 Opioid Package, OCHIN and our partners continue to work on this important issue.



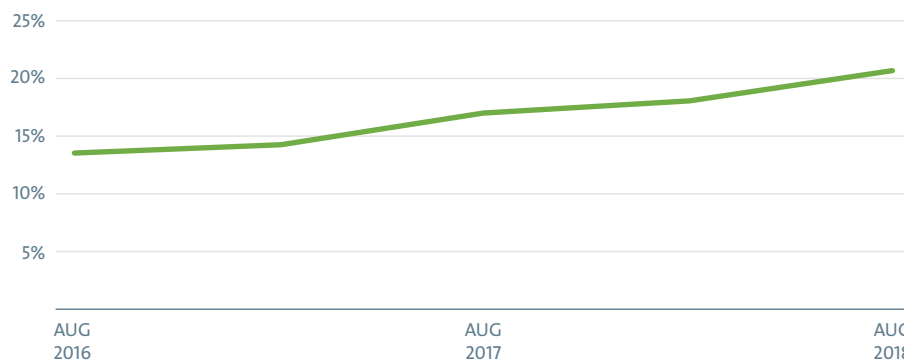
MEMBER STORY: PATIENT ENGAGEMENT

Desert AIDS Project, Palm Springs, CA

The Desert AIDS Project (DAP) provides primary care, dentistry, behavioral health, social services, low-cost STI testing, and free HIV and hepatitis screenings to 4,000 patients across California's Coachella Valley—many of them low-income, food insecure, or otherwise underserved, and more than half impacted by HIV/AIDS. Seeing the potential of patient portals to improve care, and knowing that Pew research found that low-income patients are more likely than affluent ones to manage their health care through apps on smartphones, DAP MyChart Coordinator Curtis Quach led an initiative to increase adoption and effective use of the OCHIN MyChart patient portal.

DAP was an early adopter of OCHIN MyChart and has one of the highest rates of use among the OCHIN Collaborative. More than half of DAP's patients are using OCHIN MyChart to request appointments, refill prescriptions, check lab results, and message their providers. In the last year alone, DAP has seen a 10% improvement in usage among its patients, and under Quach's direction continues to refine protocols to support best practices that advance the health care Quadruple Aim. "Using MyChart is not enough," he says, "it is important that we use it well."

PATIENT PORTAL ADOPTION INCREASING COLLABORATIVE-WIDE



20.6%

Patient portal adoption
(hosted Epic and NextGen)

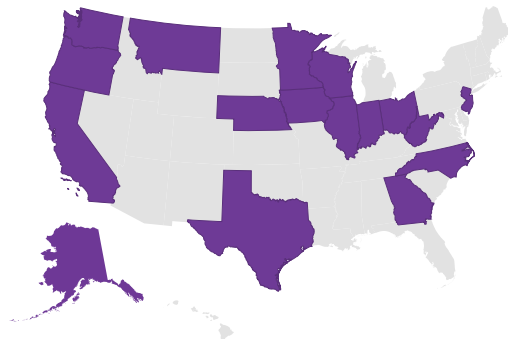
Our Members

OCHIN's members serve the most vulnerable populations in a number of settings—including community health centers, free clinics, school-based health centers, correctional facilities, and more—to improve health and access to care for underserved communities.

OCHIN Supports Over 500 Organizations Nationwide and Growing

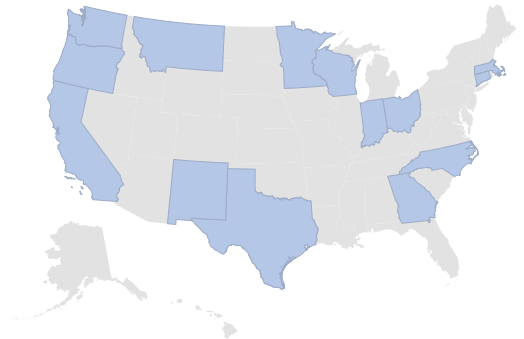
3 Health Center Controlled Networks (OCHIN, PTSO, and—new in 2018—administration of Central Valley Collaborative's HCCN grant) supporting 77 health centers

400+ Organizations using OCHIN services and support

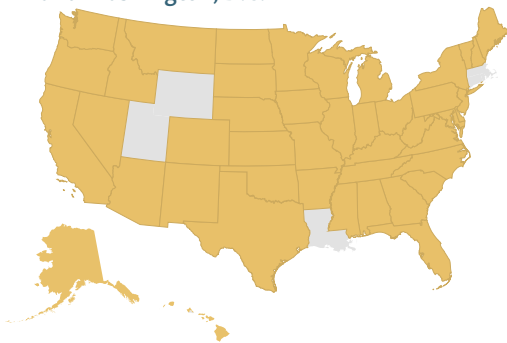


107 OCHIN Epic organizations in 16 states

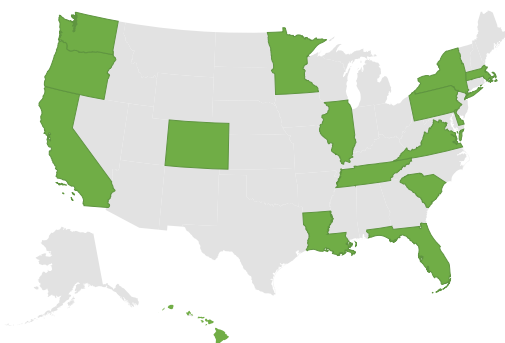
165 OCHIN Broadband organizations with
461 connected sites in 14 states



47 OCHIN NextGen organizations
(5 hosted, 42 non-hosted) in 44 states
and Washington, D.C.



34 Research partners in 16 states
and Washington, D.C.



Highlights and Impacts

246

UDS Quality Improvement Awards totaling \$5.3M

92%+

of OCHIN hosted members recognized by HRSA
for Advancing HIT for Quality

10

OCHIN hosted members recognized as Health Center
Quality Leaders

82%

OCHIN FQHC members are PCMH recognized

1,831

Providers in the OCHIN Collaborative met
Meaningful Use in 2018



EPIC CONNECT ACCREDITATION

OCHIN is only the thirteenth
organization to achieve this
accreditation



GOLD STARS LEVEL 9

OCHIN is in the top 4% of all
Epic organizations for
cutting-edge EHR use



HONOR ROLL

OCHIN's Magna Cum Laude level
distinguishes us as a leader
in patient care

Improving Access

The technology we develop relies upon dependable broadband connectivity. OCHIN Broadband Network Services, including the California Telehealth Network, provides affordable, secure medical-grade broadband access to providers in rural and underserved areas.

OCHIN's Network Operations Center (NOC) monitors our network around the clock to help keep data safe. When an Oregon hospital was experiencing a cyberattack after hours, the OCHIN team identified the source of the attack and helped the hospital stop it and prevent a breach.



\$10.1M

FCC Healthcare
Connect
Subsidies to
Members



165

Organizations
using OCHIN
Broadband
Network Services



461

Active Sites
on the OCHIN
Broadband
Network



OCHIN Advocacy Helps Expand Broadband Subsidies for Clinics

When the FCC threatened in early 2018 to cut funding to its Healthcare Connect Fund retroactively by 17%, OCHIN jumped into action. Rural health centers across the U.S. rely on the FCC Healthcare Connect fund to help fund broadband network connectivity.

Working with Oregon Congressional lawmakers, and other delegations, policymakers, and stakeholders, we helped convince the FCC to not only restore funding, but also to increase the program's funding cap by \$180 million. Now more clinics can connect to high speed broadband that is essential to providing quality coordinated care.

"If it weren't for telemedicine, there just aren't any options available to get the care I need."



MEMBER STORY: TELEMEDICINE

Mayers Memorial Hospital District, Fall River Mills, CA

Javier struggled with diabetes on and off for the last 10 years but had never seen a specialist to help him manage his condition. It's hard to get an appointment at the nearest specialist, 70 miles from Javier's home in rural Northern California, and time off work was not an option. So he did his best to manage his diabetes at his primary care clinic until Michelle, a wound care nurse treating him at Mayers Memorial Hospital District, told him about their telemedicine program.

Javier started seeing an endocrinologist and registered dietician virtually over OCHIN's broadband network, while Telemedicine Coordinator Amanda sits with him. He is finally getting the specialty care he needs to successfully manage his diabetes. "I love that now I see the same person every time, and managing my diabetes is their specialty—it's what they do. It's nice to know that," Javier says. "If it weren't for telemedicine, there just aren't any options available to get the care I need."

Sharing Knowledge to Improve Care

OCHIN Research and Innovation



34

Active research projects
in FY 2018



\$4.8M

Awarded in FY 2018



34

Research partner
organizations nationwide



40

Participating member
organizations



15

Publications in
distinguished journals



67

Presentations
and posters

OCHIN's research, in collaboration with our members and partners, aims to improve the health of the underserved. We believe that through better understanding health care delivery, practice, and many other factors impacting health outcomes, we can inform better policy and help providers enhance care.

OCHIN's research is shaping the future of chronic disease management for vulnerable patients and leveling the playing field for those who treat them. The CV Wizard study, funded by the National Heart, Lung, and Blood Institute, is making available a proven cardiovascular disease management tool to clinics caring for the lowest-income patients, who could not otherwise afford it. The innovative CV Wizard helps identify high-risk patients and provides individualized treatment recommendations.

We have replicated this process and methodology and plan to scale this model to pioneer other tools to manage diabetes, opioids, mental health, and other conditions that disproportionately affect safety net patients.

The OCHIN-managed ADVANCE Data Warehouse experienced significant growth in 2018. We are building the nation's foremost community laboratory for health outcomes, policy, and primary care research for underserved populations.

4,394,860 patients



132
health systems



24
states



1,109
clinics

1 of 9
research networks
in PCORnet 2.0

The Power of the Collaborative

The power of the OCHIN Collaborative lies in opportunities for our clinic members to learn from one another and build on each other's success to deliver better care in their communities.

OCHIN's 2018 Learning Forum was our biggest yet, bringing members from across the country together to share best practices and learn from OCHIN and their peers about strategies to improve access and health outcomes.

"We love the collaborative aspect. It's nice to be able to touch base with sites that already are doing services we are beginning to talk about implementing. I personally love the team approach."
—OCHIN member executive



2018 OCHIN Learning Forum Highlights

277

members in attendance

79

organizations represented

64

sessions on reporting, advanced charting, patient engagement, quality improvement, billing, and more

Arming Policymakers with the Best Evidence and Information

OCHIN shares our research findings and other learnings with policymakers in Washington, D.C. and states across the country to inform better health care policy, funding, and reimbursement decisions to better the health and lives of vulnerable populations.

This year, OCHIN's Research team concluded a study to identify and characterize the health disparities faced by youths living in foster care. We shared our findings with the Oregon Department of Human Services and Governor Kate Brown's team in Salem, Oregon to improve care for foster children in the state. This is just one example of how we're sharing knowledge to effect change.

OCHIN Board of Directors

Board Officers



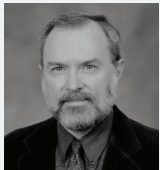
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Tom Andriola
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OCHIN Workforce

386
employees

25
states

67%
female staff



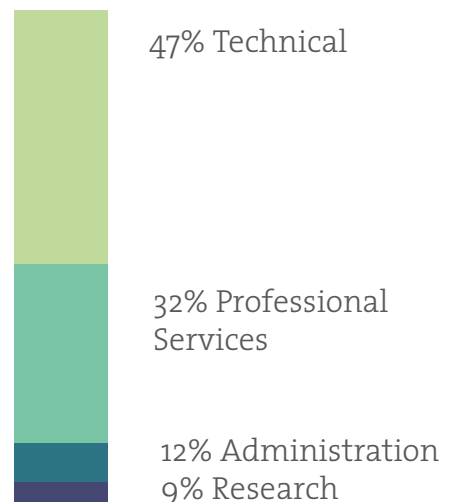
Oregon Business Magazine's
"100 Best Nonprofits to Work for
in Oregon" and "100 Best Green
Workplaces in Oregon"



19

high school & college interns

Staff Functions



Financials

200 out of 200,000 nonprofits that have started since 1975 have reached the \$50 million mark. OCHIN is proud to be among them.

(Source: Tracy Palandjian, Social Finance, August 2016)

	2017	2018	CHANGE (2017-2018)	%
REVENUE				
Implementation fees	6,808,465	7,681,407	872,942	13%
Member service fees	38,427,916	42,763,888	4,335,972	11%
Grant and contract revenue	13,959,757	12,984,294	(975,463)	-7%
TOTAL REVENUE	59,196,138	63,429,589	4,233,451	7%
EXPENSES				
Salaries and benefits	30,096,092	34,152,926	4,056,834	13%
Maintenance and support	11,638,041	13,063,541	1,425,500	12%
Administration	15,118,638	16,009,542	890,904	6%
TOTAL EXPENSES	56,852,771	63,226,009	6,373,238	11%
Net non-operating transactions	2,606,503	305,280	(2,301,223)	-88%
CHANGE IN ASSETS				
Earnings before interest, taxes, depreciation and amortization	12,280,918	8,432,232	(3,848,686)	-31%

Benefitting Our Community



GIVING TREE

\$5K donated to 5 families
with 10 kids



AMERICAN HEART ASSOCIATION

\$1,200 raised



OREGON FOOD BANK

3,772 meals &
\$1,195 donated



HURRICANE HARVEY AND CALIFORNIA WILDFIRE RELIEF FUND

150+ hours staff volunteer time
& \$9,430 raised

OCHIN

www.ochin.org