



# 2020 Annual Report

**OCHIN**





A driving force for health equity

**OCHIN Headquarters**

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[www.ochin.org](http://www.ochin.org)





Dear Members and Colleagues,

**As I look back on a year unlike any other, I am immensely proud and humbled by what OCHIN and our members and partners accomplished in 2020.** Two public health crises, COVID-19 and structural racism, are changing the face of health care as we know it and laying bare the struggles experienced by many of the patients served across the OCHIN Collaborative. The importance of the work we do, and our leadership for equity, has never been more clear.

2020 marked OCHIN's 20th anniversary, and I am grateful for all those who have contributed to OCHIN's innovative vision, growth, and impact as the needs of the Collaborative have changed over time. Over the years, the OCHIN story has been a complex one to tell, but COVID and today's racial justice movement change that. We have found our collective voice, and the ways we drive health equity are now more markedly seen as life and death, justice versus disparity.

There is no greater example of how OCHIN lives the values of our 20-year history than how we have responded to COVID-19. We met the pandemic head-on with the rapid move to embrace virtual care across the Collaborative—almost overnight—to improve access and keep clinicians, clinic staff, and patients safe. Using our network data, we are helping to illuminate the disproportionate impact of COVID-19 on underserved communities, as well as address other systemic barriers to creating a more just and resilient health care system.

As we expand our virtual nationwide health care system to serve more communities, we continue to develop tools to support providers on the frontlines, wherever they are, and to advocate for policies that close the digital divide. Together, we are forming a vision for a post-COVID future that is healthier and more equitable.

I do not say lightly what an incredible impact you all have had on the positive outcomes we saw this year, despite the hardships. We have faced insurmountable challenges at rapid speed, and I am filled with awe and gratitude, as an unprecedented year comes to a close, how we have faced these challenges together. There's much more work to be done to dismantle systemic racism, and we must accelerate our efforts to drive meaningful and lasting change in this country. I look forward to continuing this important work with you.

Thank you, as always, for everything you do.

Sincerely,

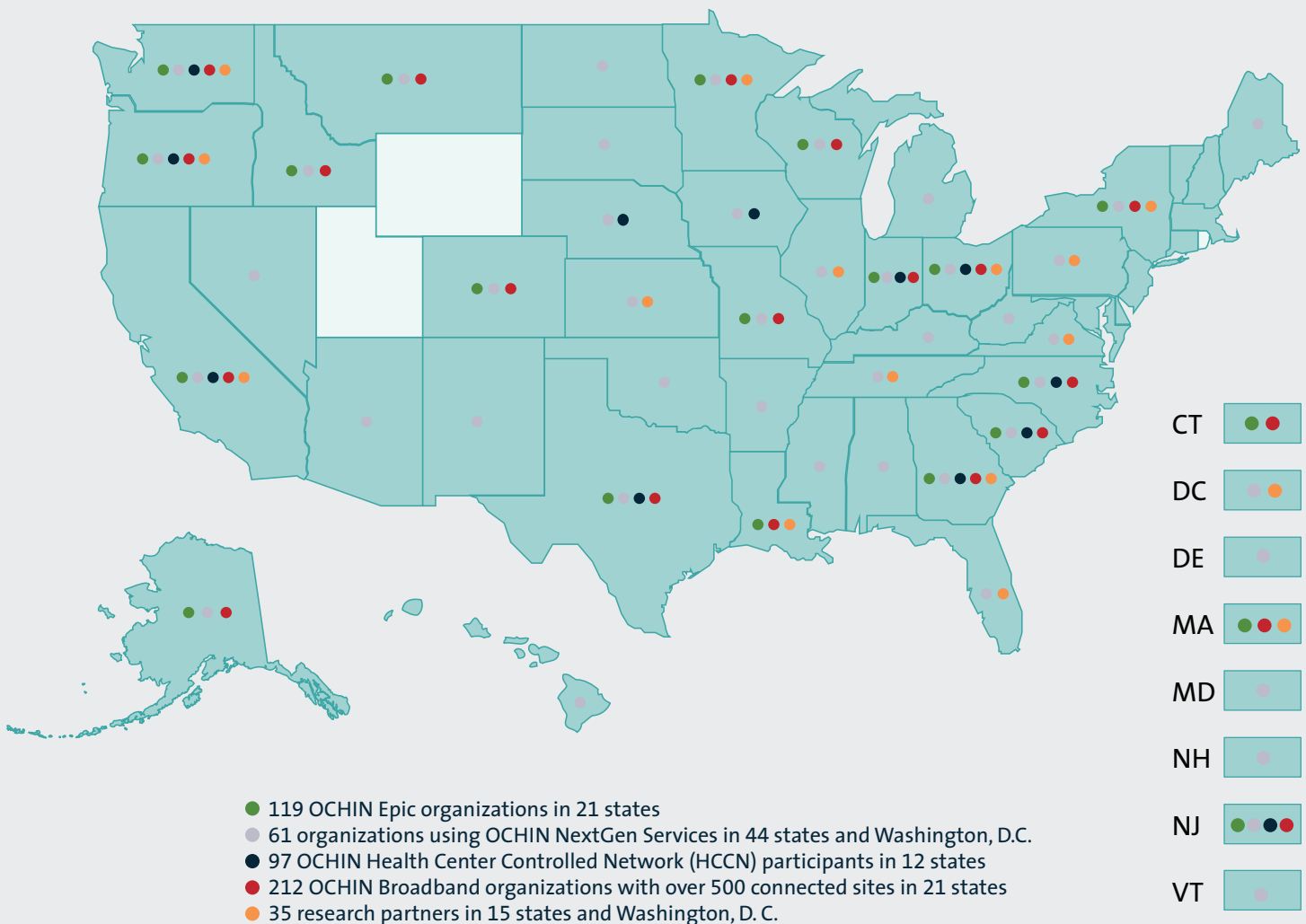


Abby Sears, CEO

# Our Members

To transform care delivery and advance health equity on a national scale, OCHIN provides leading-edge technology, data analytics, research, and support services to more than 500 community health care sites, reaching 5.5 million patients at community health centers, public health departments, corrections facilities, school-based health centers, and more. We strengthen the entire U.S. health care system by partnering to close the gap in health for individuals and communities negatively affected by racism or other structural inequities, so everyone has a fair opportunity to achieve their full health potential.

OCHIN Supports over 500 community health care sites in 47 states





## Virtual Support and Go-Live Model

In the face of the COVID-19 pandemic, OCHIN shifted all of our support and services to a virtual model to protect the health of our staff as well as our members and their patients. This includes conducting EHR implementations and Go-Lives with new members virtually, where we have traditionally been onsite. This new virtual implementation and support model is proving very effective for OCHIN and our members, and we continue to expand our virtual offerings.



*"Many of our providers have said to me, they can't imagine taking care of their patients during the pandemic without being on Epic. And we are quickly figuring out ways to use Epic to address the health inequities that have plagued our communities for so many years."*

—Ralph Silber, CEO of CHCN,  
San Leandro, CA

### MEMBER STORY

#### La Clínica de La Raza, Oakland, California

When California issued a shelter-in-place order six weeks before La Clínica, the largest of the CHCN health centers, was scheduled to go live on OCHIN Epic, the health center's leadership decided to move forward with the original Go-Live date and do all training virtually. La Clínica and OCHIN found that smaller virtual class sizes allowed for more interaction and the at-elbow support feel that OCHIN prides itself on. The implementation was a success and the virtual model also saved La Clínica approximately \$300,000 on travel for training and Go-Live support.

## Highlights and Impacts

# 21K

providers supported at over 500 care delivery sites nationwide

# 5.5M

patients served by OCHIN members in 47 states

# 2.2M

patients served by OCHIN HCCN participants across 12 states

# \$12M

UDS Quality Improvement awards to OCHIN members and HCCN participants

# 97%

HCCN participants received UDS Quality Improvement awards

# 89%

HCCN participants hold PCMH recognition, receiving \$4.1M



#### EPIC CONNECT ACCREDITATION

OCHIN is one of just eight organization to achieve this accreditation



#### EPIC GOLD STARS LEVEL 10

OCHIN is the first and only organization to achieve Level 10 two years in a row



#### EPIC HONOR ROLL

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



#### NCQA PCMH PREVALIDATED

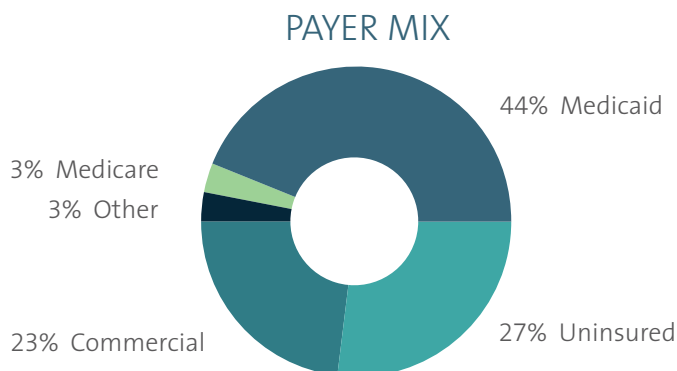
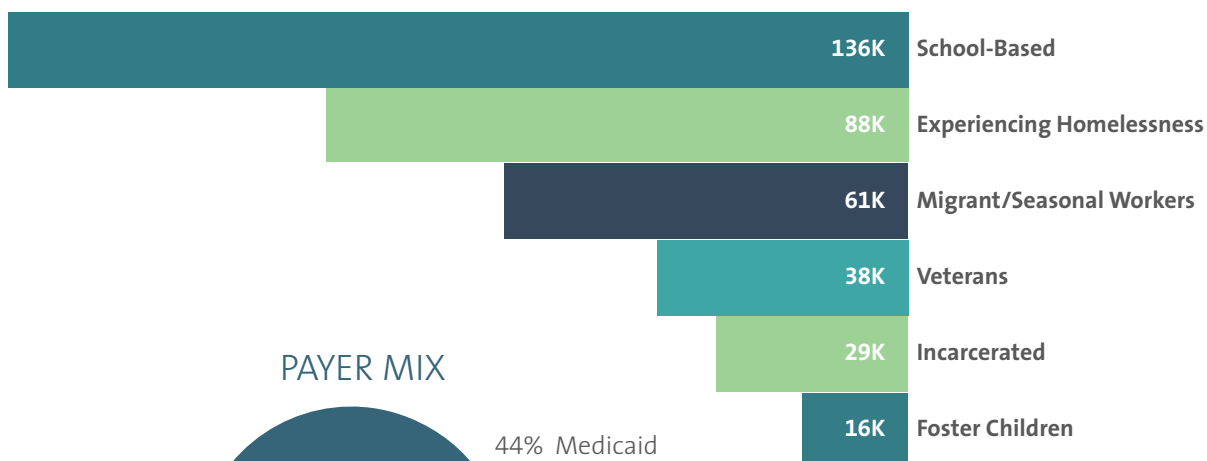
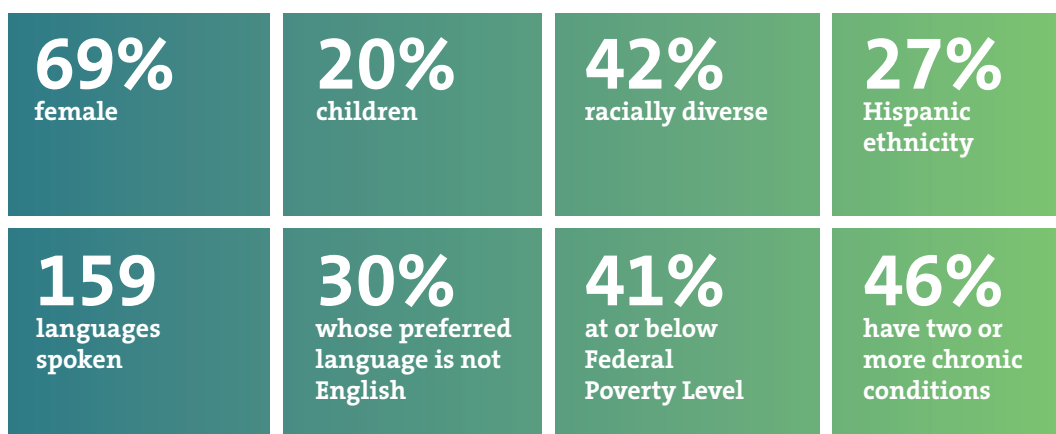
OCHIN is a prevalidated vendor in NCQA's Patient-Centered Medical Home Recognition program



# Improving Health Equity and Care Quality

Advancing health equity is critical to building a healthier future for every community. OCHIN is helping providers improve access and health outcomes for the nation's most historically marginalized and medically complex patients, including those who face systemic racism and other political, social, or economic barriers to care and good health.

Across EHR platforms, our members' patient population includes over 5.5 million patients seen in the last three years.





## MEMBER STORY

### South Boston Community Health Center, Boston, Massachusetts

South Boston Community Health Center (SBCHC) has developed some innovative tools and approaches to navigate the pandemic and ensure all patients receive the care they need. Cheralyn Johnson, Director of Quality Improvement at SBCHC, created a COVID-19 symptom tracker flowsheet in OCHIN Epic to inform proactive outreach to infected and at-risk patients, who are then screened for social determinants of health, like housing and food insecurity, in order to provide assistance or referrals to community services. The deidentified patient data on these COVID symptoms and the flowsheet will also be combined with other data and analyzed for an observational study about COVID-19 symptoms in the outpatient setting to benefit the entire OCHIN Collaborative.

### Identifying Racial Disparities in Patient Records

COVID-19 has demonstrated the importance of accurately matching patients to their health record data in real time—for contact tracing, treatment of acute cases, and eventually vaccination. OCHIN research helped uncover racial and other disparities related to patient matching during the pandemic. Based on the duplicate and mismatched records one would expect to see due to their respective proportion of the OCHIN patient population, our team found that:

**Black and Hispanic/  
Latino patients  
have almost twice  
the expected rate  
of duplicate and  
mismatched records**

**Migrant and seasonal  
workers have almost  
twice the expected rate**

**Those experiencing  
homelessness or  
housing instability  
have almost three  
times the expected  
rate**

**Patients in the  
corrections system have  
over three times the  
expected rate**



OCHIN presented this data at a virtual Capitol Hill meeting to draw attention to these disparities, and to encourage national strategies to improve accuracy and inclusivity in health data and delivery for all patients.



## Addressing Social Determinants of Health

OCHIN is a national leader in advancing screening techniques and standardizing data collection to better understand patients' Social Determinants of Health (SDH). Our members have used our integrated tools to conduct SDH screenings for over 300,000 patients, giving providers and researchers deeper insight into how these external factors affect both patient and population health. And with integrated social service resource locators (SSRL) added this year, OCHIN members can now connect patients directly to community resources for additional support.

Patient SDH data in OCHIN Epic includes:

Address	Social Isolation	Food Security
Race/Ethnicity	Intimate Partner Violence	Primary Language
Financial Resource Strain	Housing	Income/FPL
Physical Activity	Housing Quality	Health Literacy
Stress	Transportation	Sexual Orientation/ Gender Identity
Depression	Utilities	



### MEMBER STORY

#### Virginia Garcia Memorial Health Center, Hillsboro, Oregon

When an outreach worker at Virginia Garcia Memorial Health Center identified an unemployed patient with serious health conditions who was at risk of losing housing in just four days, they utilized the Unite Us SSRL to help identify potential support in the patient's home area. The Unite Us SSRL was made available to the outreach worker via OCHIN Epic EHR, thanks to a pilot project funded by Kaiser Permanente, and expedited the process of securing emergency rental assistance for the patient—even over a holiday weekend. "I think the process gave the patient trust in the system, that it could actually work for them," the outreach worker said. "It gave them control in the process."

# Moving and Using Data to Improve Care

Patient health depends on an entire community of health care providers being connected by integrated technology to help coordinate whole-person care. OCHIN advocates and builds tools for a more interoperable health care system that allows information to flow safely and securely between patients, their providers, and relevant public health agencies or social services. Single, accurate patient health records enable holistic medical treatment, seamless coordination with specialty care, real-time public health reporting, and integrated follow-up or referral services.



"It is a beautiful solution for a complex patient in an unusual time."

—Kim Cardoso, CNM, NP  
LifeLong Medical Care

## MEMBER STORY

LifeLong Medical Care,  
Berkeley, California

In Alameda County, California, health center providers can now offer more holistic care for "Barbara," a pregnant woman who is experiencing homelessness, while expecting her first child. Using OCHIN Epic EHR for the first time, clinicians across various clinics have been able to coordinate labs and ultrasounds for Barbara without duplication and share the results via the EHR. "Now we can accommodate our patient wherever she is staying at the time," said Kim Cardoso, CNM, NP, who provides care to Barbara as a nurse practitioner at LifeLong Medical Care, "and she can follow her own care via her cell phone. It is a beautiful solution for a complex patient in an unusual time."

## FY2020 Highlights

# 159M

clinical summaries exchanged since 2010

# 44.1M

clinical summaries exchanged in FY2020

# 10.5M

exchanges with non-Epic partners

# 4K+

non-Epic exchange partners

# 7M

transactions through the nationwide Carequality framework

# 20

connections to state immunization registries (12 bidirectional)

# 26K

exchanges with the Social Security Administration

# 59K

exchanges with the Department of Veterans Affairs

# 143K

eCR messages triggered by COVID-19 events in first four months



## Improving Health Equity with Real-Time COVID-19 Data

OCHIN and Epic partnered in the early days of the pandemic to rapidly implement—in just three days—Electronic Case Reporting (eCR) across 20 states. eCR streamlines secure data sharing between clinics and public health agencies to help better understand where the virus is spreading, who is at greatest risk, and how to respond most effectively. Agencies reported that receiving reports earlier via eCR helped accelerate reporting and contact tracing in several pandemic hot spots.

Because it is integrated with the rest of a patient's EHR, eCR Now gives public health authorities a more complete picture of the pandemic in relation to other important factors like racial/ethnic demographics, housing status, and comorbidities or chronic conditions. This allows for a better understanding of the effect of COVID-19 on medically complex and historically underserved patients, helps quantify the pandemic's disproportionate effect on communities of color, and enables sharing aggregate anonymous race and ethnicity data with policymakers, reporters, and researchers nationwide to help call out and address systemic inequities.



*"When you are on Medicaid, you end up using multiple systems. The OCHIN EHR has a way of bridging people's health experience. The EHR gave me better information to make decisions about my health. OCHIN's EHR is one place, one system that helps people no matter where they are."*

*"Access to records help us begin to tell a reliable story about who you are versus a story that is informed by systemic racial profiling and exclusion. The OCHIN EHR makes people better providers when they have access to information about patients that tell the whole story."*

—Cecelia Beckwith, Retired Nurse Practitioner,  
OCHIN Patient Engagement Panel Member

## Years of Advocacy Lead to Turning Point for Patient Care



After years of advocacy by a coalition of national partners, including OCHIN, Congress updated 42 CFR Part 2 as part of the CARES Act in response to the COVID-19 crisis. Reforming this rule closes an important gap in our nation's health care system by aligning the laws that govern substance use records with HIPAA regulations around the exchange of medical records between providers, with informed patient consent. This will vastly improve health care coordination and help ensure that patients receiving behavioral health treatment have access to the best possible care.

# Expanding Access to Care

OCHIN's goal is to level the technology playing field, so all patients have access to the same standard of care. We innovate and provide last-mile technology solutions that expand access to high-quality, affordable health care in rural and historically marginalized communities. This includes a wide range of virtual services and technical support that help close the digital divide by increasing adoption of cost-effective, culturally appropriate technology among community health care providers and the patients they serve.

## Growth of Our Nationwide Network

**\$4M**

FCC Healthcare Connect subsidies to members

**\$2M**

in custom telehealth support subsidized through COVID-19 Telehealth Program

**75%**

of OCHIN members adopted video visits with patients through MyChart

**10x**

increase in MyChart Video Visits from March to May 2020

**427K**

patients using the MyChart patient portal

**44%**

increase in active MyChart users in FY2020

This year OCHIN added several new member organizations, expanding our virtual nationwide network to support more health care providers in more otherwise underserved communities. Many of our members have also experienced growth—opening new clinics in new communities and states, and offering additional services like dental and pharmacy to improve access for their patients—and OCHIN supports their growth with integrated tools and services for coordinated, patient-centered care.



*"This partnership supports integrated care using Epic for medical, dental—and soon pharmacy—services; easily transferring information on health and social services to the providers who need it, keeping patients engaged in their care, and allowing us to quickly move to telehealth services amidst the pandemic. Our partnership with OCHIN brings the best technology and tools to our providers and patients, no matter where they are, driving equity and better health in every community."*

—Mike Gifford, President and CEO of  
Vivent Health, Milwaukee, WI



## Rapid Telehealth Deployment During the Pandemic

In the first 30 days of the pandemic, OCHIN accelerated nearly half of all members providing primary care onto virtual visits to increase patient access while keeping patients, providers, and clinic staff safe from COVID-19. The Collaborative greatly increased use of video visits, asynchronous eConsults, and other telehealth models in response to the pandemic. As the number of in-person patient visits dropped, many OCHIN members were able to compensate and swiftly return to pre-COVID visit volumes by delivering care virtually using integrated telehealth tools for medical, dental, and behavioral health services.

OCHIN's two broadband consortia, OCHIN Broadband Network Services and the California Telehealth Network (CTN) each received \$1 million in funding through the FCC's COVID-19 Telehealth Program to help expand virtual care programs in response to the pandemic. In addition to affordable broadband, this funding enabled OCHIN and CTN to provide access to critical equipment for telehealth and remote patient monitoring that enhanced options for virtual and field-based care delivery across our network.



*"A big thanks to our partners at OCHIN for helping us get virtual visits launched in under two weeks. Proud of the team working around the clock to get this live to help protect our most vulnerable patients, along with launching our rapid screening stations. I would compliment OCHIN on their decision to pre-build the technical interfaces required for virtual visits and for their attention to the usability aspects for both providers and patients. This essentially made our implementation turnkey and we were able to go live in two days."*

—Max Janasik, CEO of One Community Health,  
Hood River, OR



## OCHIN Advocacy in the Face of COVID-19 Challenges

In the span of a few weeks, OCHIN effectively advocated for changes to federal and state policies limiting access to telehealth and drove efforts to expand payment for virtual services to remove barriers faced by community-based clinics. Influencing state and national coalitions to prioritize coverage for historically marginalized and underserved communities, we secured a range of changes at the federal and state levels to expand access and reimbursement for telehealth services as well as licensure flexibilities enabling clinicians to help with surge conditions nationwide.



## MEMBER STORY

### Laguna Beach Community Clinic Laguna Beach, California

With OCHIN's support, the Laguna Beach Community Clinic, which serves low-income, uninsured, and homeless patients in Laguna and its surrounding counties, was able to scale its virtual care services in response to COVID-19 from a monthly average of less than 100 virtual visits before the outbreak to more than 2,000 in March and more than 6,000 in April 2020. "In crisis, you have to adapt, and when the dust settles, it's going to change medicine, including what we can offer our patients moving forward," said Dr. Jorge Rubal, a family medicine physician that serves as the CEO of the Laguna Beach Community Clinic.



**60x**

increase in virtual visits at Laguna Beach in April 2020 compared to pre-COVID



## MEMBER STORY

### Clackamas Health Centers, Portland, Oregon

When COVID-19 arrived in Oregon, Portland-based Clackamas Health Centers transitioned to a remote care model for its primary care clinics and focused on new behavioral health priorities, such as talking about suicide in relation to the pandemic and providing continued screenings and follow-up for at-risk patients. Working with OCHIN, the community health center was able to leverage tools like Epic Chat to improve cross-team care coordination and MyChart bulk text activation to enhance patient outreach and engagement in their personal safety plans.





## MEMBER STORY

### Roanoke Chowan Community Health Center, Ahoskie, North Carolina

To continue seeing their low-income patients who don't have internet access at home—about half their patient population—Roanoke Chowan CHC repurposed Kindle devices from its school-based health care during the pandemic. CEO Kim Schwartz says, “We signed up for just such a time as this.”



*“I am excited for OCHIN to use this [FCC] funding to bring its national resources to communities that need access to technology and quality health care. OCHIN is sensitive to rural communities that need that last mile connection. These additional resources will expand access—not only within our current network—for a deeper impact toward quality access for all and help bridge some of the social determinants, like transportation barriers and lack of smartphone access, surrounding the inequities experienced by BIPOC communities.”*

—Kim Schwartz, CEO of Roanoke Chowan Community Health Center, Ahoskie, NC

## MEMBER STORY

### King County Public Health, Seattle, Washington

Public Health Seattle & King County was an early responder to the COVID-19 pandemic in one of the nation's first hotspots and worked alongside OCHIN from the very first positive case in Washington. The County partnered with OCHIN to deploy the OCHIN Epic EHR platform into new COVID-19 field sites, recovery centers, and isolation and quarantine sites to ensure that patients received the best possible care by enabling providers to effectively manage intake, assessment, bed assignments, care, and discharge, just like a traditional hospital setting.

“OCHIN gave us the functionality we needed to provide care when fielding inpatient like functionality,” said King County Compliance Officer Kristi Korolak. “I think we were forward thinking bringing [these sites] up on Epic, because as our clinical care needs evolved it put us in better position to have tools and documentation to support patient care. Given the scope and magnitude of this disease, more readily sharing information for treatment and patient access to records is an upstream improvement.”

# Transforming Care

We partner to advance research, clinical best-practices, and public policies that address high cost, structural racism, and other systemic inequalities in health care. OCHIN's unique data resources and real-world investigations inform a growing body of research designed to improve health care delivery and drive more equitable health outcomes nationally. From medical decision support tools at the point of care to rapid data analysis for quality improvement, we are helping clinics nationwide transform the way care is delivered. And as a Medicare Qualified Entity, OCHIN's quality improvement work also supports efforts to understand and reduce the overall cost of health care in our system.

## OCHIN Research and Innovation



**50**

Active research projects  
in FY2020



**\$8.3M**

Awarded in FY2020



**35**

Research partner  
organizations nationwide



**53**

Participating member  
organizations



**20**

Publications in leading  
scientific journals



**46**

Presentations  
and posters

OCHIN continues to work closely with the Patient-Centered Outcomes Research Institute (PCORI) through the OCHIN-led ADVANCE Collaborative, whose ADVANCE research data warehouse surpassed 6 million individual patients this year.



**6M**  
patients



**160**  
health  
systems



**30**  
states



**1,443**  
clinics

## Driving Equity for Complex Patients

In July, The Journal of the American Board of Family Medicine published findings from OCHIN's Health Systems Demonstration Project on the potential benefits of adjusting provider performance metrics to account for patients' medical complexity and higher levels of social risk facing those who typically seek care in community health center settings. The study's findings underscore the vital importance of addressing social determinants of health to reduce national health disparities and improve individual patient outcomes, and they suggest that community health centers and other providers who care for populations with greater social complexity may benefit from adjustments to their performance metrics and reimbursements, particularly in an era of value-based payment.





## Analyzing COVID Testing and Preventive Care

OCHIN and research partner Oregon Health & Science University were awarded \$7.2 million from the National Institutes of Health to implement cancer prevention strategies for primary care settings through our BRIDGE-C2 Center. With the Center, our researchers conducted rapid analysis of COVID testing and preventive care delivery in the early stages of the pandemic. Our findings demonstrate the vital role community health centers play in access to testing; differences in positive testing by race, ethnicity, language, and insurance; and large-scale deferral of preventive care delivery in the initial months of the pandemic.



## Connecting on a National Level

OCHIN provides our members with opportunities to work with national leaders at the Centers for Disease Control and Prevention (CDC) on projects that explore OCHIN data to help improve reporting systems and address the needs of community health centers (CHCs), in partnership with the National Association of Community Health Centers (NACHC). For example, under one of these projects, the Million Hearts project, OCHIN has explored data on statin control in high-risk populations and used it to create, test, and monitor tools that improve reporting and clinical workflows, ultimately helping our members better prevent cardiovascular disease. In connecting OCHIN to national leaders, this partnership helps OCHIN maintain high-level content and provide quality improvement support to our members, while simultaneously ensuring that the CHC perspective and needs are considered when developing new quality measures at the national level.



## Using Rapid Data Analysis for Clinical and Operational Improvement

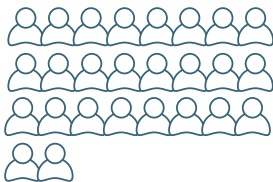
OCHIN continues to put the data, insights, and experiences of our network to work for members and the patients they serve in our mission to advance health equity. In addition to our ongoing research and quality improvement efforts, this year we grew our Evaluation and Analytics team, creating new roles to help translate key insights into rapid data-driven action. New evaluation activities are expediting clinical and operational improvement across the network and enhancing existing programs, like our OCHIN HCCN High Performers Project, which launched in 2017. Most importantly, these new insights help OCHIN build the case for closing health care gaps and driving health equity on a national scale through evidence-based policy engagement, inclusive research, innovative programs, products, and services.

# Workforce

**522**  
employees

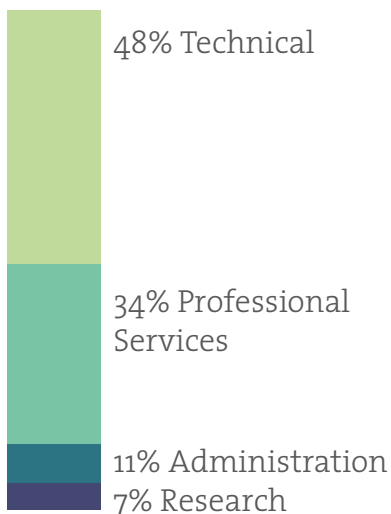
**66%**  
female

**38**  
states



**26**  
high school &  
college interns

## Staff Functions



# Board of Directors

## Board Officers



**Chair**  
Vanetta Abdellatif  
Alcora Foundation,  
Seattle, WA



**Secretary**  
John Saultz, MD  
Oregon Health &  
Science University  
Portland, OR



**Treasurer**  
Phil Lamb  
Retired from U.S. Bank  
Bend, OR



**Immediate Past Chair**  
Denise Honzel  
Honzel Health Care  
Consulting  
Camas, WA

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Bill Adams, MD  
Boston HealthNet  
Boston, MA



Kevin Hart  
Kaiser Permanente  
Oakland, CA



Bob Marsalli  
Washington  
Association for  
Community Health  
Olympia, WA



Kim Schwartz  
Roanoke Chowan  
Community Health  
Center  
Ahoskie, NC



Brian Harris  
Shoshone, CA



Liz Gibboney  
Partnership HealthPlan  
of California  
Fairfield, CA



Denise Rodgers, MD  
Rutgers Biomedical  
and Health Sciences  
Newark, NJ



Marc Hackett  
Jane Pauley Community  
Health Center  
Indianapolis, IN



Gil Muñoz  
Virginia Garcia  
Memorial Health  
Center  
Hillsboro, OR



Mike Gifford  
Vivent Health  
Milwaukee, WI



Homer Chin, MD  
Retired from Kaiser  
Permanente NW  
Portland, OR



Pamela Riley, MD, MPH  
District of Columbia  
Department of  
Health Care Finance  
Washington, D.C.



Jean Polster  
Neighborhood Family  
Practice  
Cleveland, OH



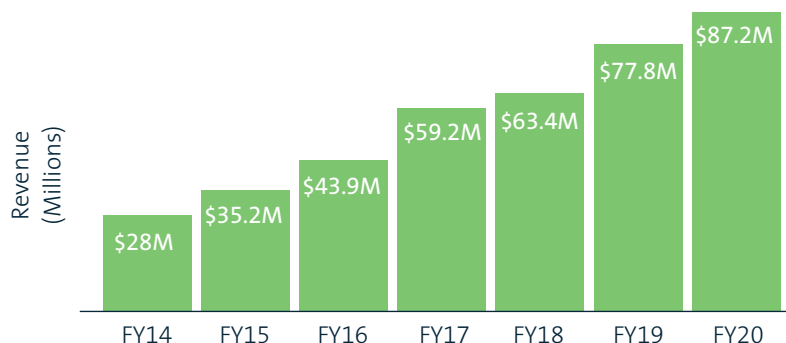
Tom Andriola  
University of California  
Oakland, CA

# Financials

OCHIN's growth allows us to improve access and health in more communities, strengthens our collective voice, and better positions us to lead the path toward health equity.

	2019	2020	CHANGE (2019-2020)	%
<b>REVENUE</b>				
Implementation fees	14,218,852	14,203,596	(15,256)	-0.11%
Member service fees	49,523,337	59,044,949	9,521,612	19.23%
Grants and contract revenue	14,033,566	14,007,884	(25,682)	-0.18%
TOTAL REVENUE	77,775,755	87,256,429	9,480,674	12.19%
<b>EXPENSES</b>				
Salaries and benefits	41,304,317	49,623,855	8,319,538	20.14%
Maintenance and support	13,979,096	17,055,569	3,076,473	22.01%
Administration	19,255,759	18,827,539	(428,220)	-2.22%
TOTAL EXPENSES	74,539,172	85,506,963	10,967,791	14.71%
<b>CHANGE IN NET ASSETS</b>	3,236,583	1,749,466	(1,487,117)	-45.95%
NET INCOME MARGIN	4.16%	2%		

## OCHIN's Growth





## Thanks to Our Partners and Funders

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OCHIN could not accomplish everything we do without the generous support of our foundation partners and funders. These relationships enable us to innovate on a larger scale for even more impact on communities nationwide.

AARP Foundation

Agency for Healthcare  
Research and Quality

APAC Oregon

Bill & Melinda Gates  
Foundation

Blue Shield of California

Boehringer Ingelheim

California Health Care  
Foundation

Centers for Disease  
Control and Prevention

Eli Lilly and Company

Federal Communications  
Commission

Food and Drug  
Administration

Health Resources and  
Services Administration

Intel

Kaiser Permanente

Merck

M.J. Murdock Charitable  
Trust

National Association  
of Community Health  
Centers

National Institutes of  
Health

Office of Population  
Affairs

Oregon Community  
Foundation

Patient-Centered  
Outcomes Research  
Institute

Robert Wood Johnson  
Foundation



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