



## HIT Policy Committee Strategy & Innovation Workgroup Final Transcript March 4, 2015

### Presentation

#### Operator

All lines bridged with the public.

#### Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology

Thank you, good morning or good afternoon everyone this is Michelle Consolazio with the Office of the National Coordinator. This is a meeting of the Health IT Policy Committee's Strategy and Innovation Workgroup. This is a public call and there will be time for public comment at the end of the call. As a reminder, please state your name before speaking as this meeting is being transcribed and recorded. I'll now take roll. Jennifer Covich?

#### Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative

Here.

#### Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology

Hi, Jennifer. David Lansky? Brian DeVore?

#### Brian DeVore – Director of Strategy & Healthcare Ecosystem Intel Corporation

I'm here.

#### Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology

Hi, Brian. George Hripcsak?

#### George Hripcsak, MD, MS, FACMI – Department of Biomedical Informatics – Columbia University NYC

Here.

#### Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology

Hi, George.

**George Hripcsak, MD, MS, FACMI – Department of Biomedical Informatics – Columbia University NYC**  
Hi.

**Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**  
Jamie Ferguson? John Halamka? John Houston?

**John Houston, JD – Vice President & Associate Counsel – University of Pittsburgh Medical Center**  
Here.

**Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**  
Hi, John. John Derr? Jonathan Nebeker? Lots of Johns. Kelvin Baggett? Kyna Fong? Mark Savage?

**Mark Savage, JD – Director of Health Information & Technology Policy & Programs – National Partnership for Women & Families**  
Here.

**Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**  
Hi, Mark.

**Mark Savage, JD – Director of Health Information & Technology Policy & Programs – National Partnership for Women & Families**  
Hello.

**Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**  
Michael Painter? Paul Tang? Richard Platt? Sandra Hernandez?

**Sandra R. Hernandez, MD – President & Chief Executive Officer – California HealthCare Foundation**  
Here.

**Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**  
Hi, Sandra.

**Sandra R. Hernandez, MD – President & Chief Executive Officer – California HealthCare Foundation**  
Hi.

**Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**  
And from ONC do we have Gretchen Wyatt?

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**  
Yes, here.

**Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**

Hi, Gretchen. Is anyone else on from ONC?

**Matthew Swain, MPH – Program Analyst, Office of Planning, Evaluation and Analysis – Office of the National Coordinator for Health Information Technology**

Hi, it's Matt Swain.

**Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**

Hi, Matt. With that I'll turn it over to you Jennifer.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Great.

**Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**

We have kind of a small group today.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay.

**Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**

Christine have you joined yet?

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

Yes, I'm on.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Oh, great.

**Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**

Thanks for joining.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Well, welcome everybody, thanks for joining today. If you want to take a look at the agenda we've got a lot to get through today. So, we should jump right in. At the last committee meeting, policy meeting, David and I did present the recommendations and I think we went over that at our last meeting, which was two weeks ago now, three weeks ago. And as a result of that we did draft a letter, a joint letter, working with Christine Bechtel and her committee.

So, what we wanted to do today was spend the majority of the time today going through that letter and going through the draft recommendations and if the Workgroup is okay with those we will go ahead and present those on March 10<sup>th</sup> to the Policy Committee.

We also have on the agenda today that I guess ONC or Gretchen is going to give us a high-level overview of the public comment summary and I was hoping we could just get through that piece of the agenda first so we could save the majority of the time today to go through the recommendations. So, Gretchen I'm going to screw up the agenda order a little bit and ask you to go through the public comment summary first.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Thanks, Jen, if we can fast forward then to slide nine I think in the deck to sort of get people up to speed on it that would be helpful. Let's see, yeah, next one, okay. Just so that everybody knows the public comment period for the strategic plan has closed but the public comment period for the interoperability roadmap is still going strong.

So, if you have additional comments about interoperability which is the goal two of the strategic plan that's your venue to go to [healthit.gov](http://healthit.gov) and to comment there and we are working very closely with the folks on the staff and with our federal partners to make sure that we're, you know, assessing comments on that and wrapping those back into the strategic plan as well.

So, you know, while our public comment period for the plan has closed that does not mean that the discussion part and the evaluation part has closed by any stretch of the imagination. So, that's another venue in case anybody had, you know, additional thoughts that they'd like to present to ONC and to the federal partners.

Overall, we were really surprised, I think I had mentioned this on our last call, just the level of interest and attention paid to the strategic plan was quite surprising to us, you know, it was more on the level of what one would see for like an NPRM or some other type of rulemaking process, we got over 400 comments and, you know, while a lot of those were from organizations we were really surprised by how many individuals commented on the plan whether they did so as, you know, commenting, you know, just as person or on behalf of their organization it was phenomenal and very thoughtful comments as well.

We do have them available so that if anybody wants to scroll through them they are more than welcome to, you know, obviously, they're public comments, so that you can see the weight and the heft of what was presented. Some of those are going to be letters and some of them are just thought captures that are there.

We'd say that probably one of the most interesting thing was that a lot of the comments focused on many of the same issues that were brought up both by the Strategy and Innovation Workgroup and by the Consumer Workgroup and we are in the process right now of evaluating all those comments during, you know, what are the recommendations that people have put forth, where do they think that we, you know, missed the boat or, you know, gap analysis and things like that. So, if we can go to the next slide we'll tell you just how we were...how we were processing all of this information.

Right now as a team we are going through all of these and identifying, again, you know, where are the areas within the goals and objectives where people have recommendations, what are some of the themes of areas that we should be emphasizing more or emphasizing less and trying to identify what some of the next steps are.

So, we will be sharing this information both with our ONC programmatic folks and policy developers and with our federal partners because there were an awful lot of recommendations for various agencies to be engaged in certain areas and this is great input for us it sort of helps us not just with the planned development but this is something that's really critical to both this Workgroup and to Christine's Workgroup the Consumer Workgroup, what about the implementation of the plan, you know, this is not just a paper document or, you know, a web-based document but how are we actually putting this into, you know, programmatic development policy, evaluations and tweaking and making this truly a live document by changing the way that we do business as a government and also in how we reach out to our stakeholders.

One of the most fascinating things is that there have been definitely new groups that through their contribution to the public comment period said, we would like to participate, we would like to be more engaged in conversations in activities with the federal government. So, this is something that we will be following up with whether it's, you know, putting people in touch with various partners to say they'd like to be engaged in new pilot programs or new innovative methods of exploring, you know, how Health IT works and where it could be applied more effectively or, you know, just getting some information from these people that we hadn't heard from before. So, it really was a fascinating process for us.

So, if we could go into the next slide, sort of give you a summary here, a lot of this was, you know, general consensus issues, some people were commenting just, you know, about the mission of the federal government, what some of the visions we had for the strategic plan and ways to tweak that.

There is definitely some discord. One of the reasons why we're not sharing some of the level of detail in the comments is that there are conflicting recommendations and we are assessing, you know, just exactly which path forward we should be taking, different views as far as what the role of government is, you know, where you...and it's one thing that you expect with rulemaking in general, some people say we're not moving fast enough in certain areas, some say we're moving too fast in others and trying to identify, you know, where we can align these recommendations, where some of these things we can either apply ourselves better with better coordination with our partners to speak better about what it is that we're doing and where is it that we actually do need to change some of the activities that we're engaged in.

Some of the comments are very, very specific to like the EHR incentive program or to other documentation that we have and so we will be sharing that of course with CMS and our other partners just in case they have not heard those specific comments through their rulemaking processes, but they're not things that will probably be reflected in the final plan when we do put that out simply because they're too specific.

As we explained to the committee way back in November or December when we first talked about this, the strategic plan we are trying to keep rather high-level to sort of give an overview of where it is that we'd like to go over the next few years and not get into the specifics of every single program that relates to the strategic plan.

What we recommend folks do and we had said this back in December, folks might remember, look at some of those rulemaking that will be coming down the pike and I'm not talking just about MU 3 but other activities that our various partners are doing. Think about, you know, how DoD is implementing DHMSM, look at what FTC is putting out as far as the Internet of things those are the things that are wrapped back into the strategic plan at a higher level. So, some of those specific goals and activities that are related to the National Prevention Strategy, Health Security Strategy, Disparities Reports and things like that are reflected in a higher level within the strategic plan and not at the detail level. But as those other documents evolve we will then be wrapping those back into the strategic plan.

And so that's where the outreach that we have with our federal partners and with our FACAs are so critical. We are hearing loud and clear that, you know, obviously we did not get everything correct in the strategic plan but we are trying very hard to take not just the recommendations from the public but specifically from this Workgroup and from the Consumer Workgroup, from the Policy Committee and the Standards Committee how do we need to, you know, both message what it is that we're doing better and tweak what it is that we're doing a little bit better.

So, it's been quite an experience that's definitely the message that I'd like to get everyone to understand that, you know, the comments have been very, very productive both in how we think about planning in general but also in how we can better engage with the public.

So, next slide gives you sort of a flavor of the various folks that have been contributing to the public comment process. We've obviously got...if we can go to the next slide, which is slide 12, this sort of gives you a general idea of who the comments have been received from to date really runs a gamut.

You would think of course of various provider organizations and commenters in the vendor space but we received an awful lot of information from folks outside of our normal audience organ procurement was an interesting one, EMRs, excuse me first line providers were a huge group that started commenting on the plan back in I think late December, it was interesting to see that, and research organizations, state-based organizations lots of folks that we had not heard of in public comments in the past.

So, we will be processing all of this information and hopefully getting back to you not at our next meeting which is next week, but I would say as we start getting deeper into, you know, where we're going with the work plan for the Policy Committee bringing some of these comments that we've received on both the strategic plan and on the roadmap back to this Workgroup for discussion about how that will impact the Policy Committee's work plan as well.

So, that said, I'll just stop here and ask anybody if you have any questions about the public comment process, the comments themselves I said, you know, we won't be sharing those quite yet, but, you know, what the next steps are for both ONC and for the Workgroup happy to address those now.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Gretchen can you just confirm, so there is really no role for this group in terms of reviewing these or that's a separate process?

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Yes, it's definitely a staff thing.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

The same sort of thing with any rulemaking process that's our role as staff to assess these and for us to just bring back the general, you know, thematic areas if they will impact your work, it's more just so that you're aware of them.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Your role...

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

So, the Workgroup...

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Yeah.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

So, the Workgroup doesn't have to do anything?

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

No you guys are off the hook on that one which is good.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay, great, questions for Gretchen?

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

Gretchen its Christine Bechtel...

**John F. Derr, RPh – Health Information Technology Strategy Consultant – Golden Living, LLC**

John, I have a question.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay?

**John F. Derr, RPh – Health Information Technology Strategy Consultant – Golden Living, LLC**

Why are called ineligible? This is long-term post-acute care, behavioral health, etcetera.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Well...

**John F. Derr, RPh – Health Information Technology Strategy Consultant – Golden Living, LLC**

Why are we ineligible?

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

You're an ineligible for the Meaningful Use Program so the folks that are not currently being paid for the use of Health IT tools within the EHR Incentive Program. If you look at goal one in the strategic plan when we're talking about ubiquitous use of Health IT it's not just about EHRs that we were talking about but how do we get everyone across the healthcare spectrum using information, you know, that has been digitized and shared electronically.

So, a huge focus of folks is not just those within, you know, that are currently considered eligible for the Meaningful Use Program but wrapping in all those providers who are ineligible for those payments and also being punished.

**John F. Derr, RPh – Health Information Technology Strategy Consultant – Golden Living, LLC**

Right and I understand that, but, you know, ONC and everybody has always said, now since January of last year we're all inclusive, we're not going to do the eligible hospitals and eligible professionals but we're all part of this spectrum together.

I just...you know I represent long-term post-acute care and behavioral health and most of these things and just having us listed as ineligible I don't think helps us to be part of the whole thing that's all.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

That's a good message, John, I appreciate that. It's just how we internally bucket things right now, but, you know, again the words we use matter and for us to continue to use that phrase is probably not helping by any stretch of the imagination so that's a good message to hear.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

That's a great comment, John.

**John F. Derr, RPh – Health Information Technology Strategy Consultant – Golden Living, LLC**

Thank you.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Christine, you had a question?

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

I did, thanks, Gretchen just a sort of fundamental question back to your comments on the slide about the counts and the number of individuals and the number of organizations.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Yes?

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

I'm not...I just want to clarify how you guys are counting and I'm going to pick on Jen Covich because she knows I like her, but if Jen sends a letter and she signs it Jennifer Covich, President, CEO of the eHealth Initiative, are you counting Jen as an individual or as an organization because she's writing on her organization's letterhead?

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Well, this gets towards Mark Savage, so I'm going to wrap both of guys into this, because in Mark's letter he said, okay, don't just count me, count all of our organizations too and there are 23 of us, so we did, you know, so that's why we said, you know, around 400.

We definitely, you know, we didn't weight anybody saying, you know, here's somebody that a coalition and so therefore, you know, we need to take them...you know, that they're more important than anybody else, everybody is important whether it's one individual or somebody representing, you know, let's say a professional organization that has 38,000 members, you know, we didn't count it 38,000 times but, you know, we definitely didn't sit there and say, you know, oh, we only heard from one consumer, you know, we heard, you know, loud and clear that lots of these folks are interested in things.

So, you know, as far as number crunching that's one reason why we kept it kind of loose in that regard, but, you know, we definitely...if that many people signed onto a letter than we definitely realize that this is something that's critical.

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

Well, you're touching on the concern that I'm wanting to just double check on which is in the past, you know, speaking for consumers and kind of from the Consumer Workgroup, when we would send in letters where, you know, we had 12 organizations or 25, or whatever sign on we would count it as one organization still, which is not...like that totally defeats the purpose and is contrary to some original guidance we got, you know, several years back. So, I just wanted to double check on that. But, what I'm actually asking is...your answer is not really clear to me, so...

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Okay.

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

And you just used Mark Savage, so if Mark sends a letter it's on National Partnership Letterhead, is he counted as an individual or is he counted as an organization?

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Well, let's put it this way, both and I know that sounds kind of crazy. If Mark had sent in a letter, you know, just I'm Mark and this is my interest in commenting and we did get one of those from a member of the Consumer Workgroup, then we counted them as an individual.

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

...

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

But we also, you know, counted it as an organization and as an organization that said, you know, here are these 23 other folks as part of our organization or our coalition also, you know, would like to be counted in this. This is where, you know, it sort of fits both sides.

So, you know, when it gets down to the wire we will say, you know, we got significant input from these folks and it's more, as we start dicing this it's more not the number crunching but what is it that's being emphasized and, you know, we put the emphasis on, wow lots of folks have said that we need to do this and that's where, you know, we would then go back and say was it just one...you know, more of like, you know, the value of what they're proposing instead of how many folks proposed that. We use that number as like the secondary review, did we hear, you know, that...

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

I get it.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Lots of folks needed that.

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

Okay.

**John F. Derr, RPh – Health Information Technology Strategy Consultant – Golden Living, LLC**

And this is John Derr again and I don't want to pile on but we had the same thing, because the LTPAC and Health IT Collaborative sent something in and it represents home care, hospice care, SNFs, ALFs, IRFs in all about 20 different organizations. So, we just want to...so I agree with what everyone else has said.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Right. I mean, and so I would say that, you know, in that space I would say that the LTPACs and folks along those lines, the emergency providers, you know, that we heard from both organizations and individuals in that space, same thing with consumers.

So, you know, as a resounding success as far as that goes that is both at the individual level and the organizational level that, you know, the message got through loud and clear.

And as we go through the assessment and all of this we will definitely be taking those messages into consideration in the next iteration of the plan.

**John F. Derr, RPh – Health Information Technology Strategy Consultant – Golden Living, LLC**

Thank you.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Great, so much Gretchen. Thanks for the team, all of your hard work I know it's really tedious to go through all those comments so we appreciate all the work that you've done there.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Well, just so the folks know, thank you, you know, it was quite...I mean the difference between the last plan and this plan has been like phenomenal. I think that there were maybe 50 or 60 comments on the last plan and that was considered, you know, groundbreaking and to go from that, a level of magnitude higher was astonishing to us.

We were pleased to see it, I mean, this is a good sign that people really want to see Health IT used effectively to get towards better health and that people are engaged in making sure that things are done, you know, transparently and we will take that into account.

All of our public reporting will be on the website. I got stuck doing the public reporting for the last plan, so I know where we have to do better. But we need people to keep our feet to the fire to make sure that we're doing the right thing.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

All right, thank you.

**Matthew Swain, MPH – Program Analyst, Office of Planning, Evaluation and Analysis – Office of the National Coordinator for Health Information Technology**

And this is Matt Swain I just want to add that it's time consuming but I wouldn't consider it tedious, there have been a lot of insightful comments from various different organizations.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Right.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Good, great, well I'm glad that you guys are enjoying it. So, all right, well let's move on because we do have a lot to get through.

As I mentioned before we're going to go through and discuss the recommendations on the Federal Health IT Strategic Plan specifically we're going to be I guess combining our comments with the Consumer Workgroup. So, there was significant synergies and overlap and commonality really between our recommendations and the Consumer Workgroup.

So, we have invited Christine Bechtel to join us today as well for part of the discussion as we go through the recommendations and Christine I don't know if you wanted to say anything before we get into it?

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

Just thanks for having me and I agree with Jen that there is a lot of alignment between what the Consumer Workgroup said and your Workgroup. So, I'm looking forward to diving into discussion with you.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay, so everyone should have a copy of the draft letter in hand and we're going to go through the slides which...at a high-level talk through some of those comments. So, maybe we could back the slides up to, I don't know which number it is exactly, back to the beginning. Okay, great, all right.

So, let's just jump right in here. And we'll just go through this page by page so we'll start with the first four bullets; these are about the strategic plan and around the collect, share, use framework. There was a lot of discussion in this group and we recommended that rather than emphasizing this collect, share, use framework that we focus on the individual and consumers really as part of a health improvement plan. Any comments on that? I think that was pretty overwhelmingly supported in our discussions.

Okay, the plan's focus should be on how to build a culture of shared person-centered health and care goals and how federal policies, programs and regulations will support individuals, providers and community partners to meet these goals.

Federal actions should unambiguously show how they facilitate and reinforce the triple aim. And the end state is not a Health IT infrastructure but rather the widespread effective use of information to support health and healthcare. So, really not focused on technology for technology's sake but focused on improving health. So, let me just stop here and see what comments the group has. If there is language there that you disagree with or are there things that you think we should add to these specific points?

**Mark Savage, JD – Director of Health Information & Technology Policy & Programs – National Partnership for Women & Families**

Jen, this is Mark Savage, I think I agree with them. I think the last three points are especially important and in some ways seeing it here in this bullet point form captures the sentiment even more powerfully than the four page letter. So, I think that this kind of a framework as a part of the presentation on March 10<sup>th</sup> can be very helpful.

**Michael W. Painter, JD, MD – Senior Program Officer – Robert Wood Johnson Foundation**

This is Mike Painter, I totally endorse that. The bullets are great. I didn't really glean that from, you know, an admittedly quick scan of the letter. So, if the letter could emphasize these points that would be wonderful.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay maybe we do that up front, okay.

**John F. Derr, RPh – Health Information Technology Strategy Consultant – Golden Living, LLC**

This is John Derr and sometimes...a lot of times when I go out they just kind of focus on the...it's early in the morning and I only had 3 hours of sleep, long plane flight, that they focus on the technology and sometimes I put the word "clinical" you know it is widespread effective use of digitized to support and improve clinical healthcare and putting the word "clinical" sometimes along with technology sort of gets the people to focus on that because I think the legislation even states the object of this is improved clinical outcomes.

**Mark Savage, JD – Director of Health Information & Technology Policy & Programs – National Partnership for Women & Families**

This is Mark, if I could jump in, I think that's true and I think we're also looking at non-clinical settings such as the care and health that happens in home settings or in community settings and making that a part of it as well that's sort of captured in the letter. So, I wonder if that means just leaving it as is not having to add clinical and non-clinical but just leaving it as is.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Well, John, let's go through and see if maybe that's addressed in more detail as we go through here.

**John F. Derr, RPh – Health Information Technology Strategy Consultant – Golden Living, LLC**

Okay.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Is that okay?

**John F. Derr, RPh – Health Information Technology Strategy Consultant – Golden Living, LLC**

I have no problem I just...

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay.

**John F. Derr, RPh – Health Information Technology Strategy Consultant – Golden Living, LLC**

I'm all right.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Because I think Mark is right it is in there. I don't know that it's not in the first four bullets but I believe it is in there definitely, but let's check as we go through.

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

Hi, Jen, it's Paul Tang, I just wanted to let you know I joined five minutes late but I also like this...the four bullets and just stating what we've been saying all along but in a very clear fashion. Thanks.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Great, all right, well, we'll definitely emphasize those up front. Other comments on the first four bullets that are really the framework and focus for the plan?

**Sandra R. Hernandez, MD – President & Chief Executive Officer – California HealthCare Foundation**

I'm pretty comfortable, this is Sandra, I'm pretty comfortable with them. I think it captures a lot of different conversations that have gone on and it seems pretty well balanced to me.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay, great. Okay, why don't we go ahead and move to the next slide. All right, this is about articulating a pathway to evolve toward a new paradigm specifically an interactive learning system, creating health equity for consumers and providers, improving patient, family caregiver experience; I know a lot of individuals on the Workgroup had comments and concerns about that.

Accommodating a pluralistic data and care delivery environment. Working with the private sector. And explicitly showing how federal agencies are going to lead and guide the adoption of a new information sharing framework. And then finally, that the plan must hold federal partners accountable with regular transparent reporting on their progress towards these goals. Comments?

**Mark Savage, JD – Director of Health Information & Technology Policy & Programs – National Partnership for Women & Families**

Jen, this is Mark Savage, the word pluralistic in front of data it actually seems like it's a good word but it also seems relatively new. The plan itself talks about traditional and non-traditional data sources. Maybe I'll just throw it out there, will people understand what the word pluralistic means, will they understand that it means things like clinical data but also social determinants of health and community resources when they're reading this...

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

So, are you...

**Mark Savage, JD – Director of Health Information & Technology Policy & Programs – National Partnership for Women & Families**

If folks on the phone think they will than that's...then leave it as is.

**George Hripcsak, MD, MS, FACMI – Department of Biomedical Informatics – Columbia University NYC**

Yeah, I think it's just saying that pluralistic data would normally be a bad thing not a good thing.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

So, do we want to change that language?

**Michael W. Painter, JD, MD – Senior Program Officer – Robert Wood Johnson Foundation**

...

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

It sounds like it could be confusing to people.

**Michael W. Painter, JD, MD – Senior Program Officer – Robert Wood Johnson Foundation**

Yeah, it's confusing, what do we think we mean by it? It's Mike Painter.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

So, Mark do you have a proposal or a replacement?

**Mark Savage, JD – Director of Health Information & Technology Policy & Programs – National Partnership for Women & Families**

Well, I'm actually...I don't...

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Just remove it.

**Mark Savage, JD – Director of Health Information & Technology Policy & Programs – National Partnership for Women & Families**

If it were me I'd probably say traditional and non-traditional because I think that will be clear, but I also...it may not be really an issue for these slides if it's the letter that's going to the Policy Committee. So, I'm not trying to create a semantic discussion...

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Right.

**Mark Savage, JD – Director of Health Information & Technology Policy & Programs – National Partnership for Women & Families**

That isn't really important I was just throwing out the observation.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

I'm looking in the letter now to see, it does say, yeah it's this exact language. The plan should identify an architecture to accommodate a pluralistic data and care delivery environment.

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

What's wrong with...

**Michael W. Painter, JD, MD – Senior Program Officer – Robert Wood Johnson Foundation**

So, do we actually...sorry, Mike Painter here, do we actually mean data from a wide range of sources?

**George Hripcsak, MD, MS, FACMI – Department of Biomedical Informatics – Columbia University NYC**

Yes.

**Michael W. Painter, JD, MD – Senior Program Officer – Robert Wood Johnson Foundation**

Yeah.

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

So, what's wrong with just what Mark said which is it includes multiple datasets and including x, x and x?

**Michael W. Painter, JD, MD – Senior Program Officer – Robert Wood Johnson Foundation**

There you go.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay. Gretchen do you have that change?

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Yes.

**John Houston, JD – Vice President & Associate Counsel – University of Pittsburgh Medical Center**

That's in place of pluralistic?

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

Yeah.

**John Houston, JD – Vice President & Associate Counsel – University of Pittsburgh Medical Center**

Okay.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Good catch. Other comments?

**Mark Savage, JD – Director of Health Information & Technology Policy & Programs – National Partnership for Women & Families**

And not to lose sight of the fact that I think that was intended to go over to the care delivery environment too, that we have a diverse care delivery environments “plural.”

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

This is Gretchen, quick question, do you want to...you know, instead of saying, multiple datasets get at the information instead of data, I know that we’ve had conversations about that in the past so it’s not just, you know, sharing information, sharing the actual data points but it’s like the whole picture. Does that matter?

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

It sounds like the point is more about that we have diverse care environments, is that what we’re trying to get at Mark? And...

**Mark Savage, JD – Director of Health Information & Technology Policy & Programs – National Partnership for Women & Families**

Well, that’s what I was mentioning but I think Gretchen’s point is right as well that people say it’s not the data per se it’s whether it’s useful, it’s the information that’s conveyed by the data.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

All right.

**Mark Savage, JD – Director of Health Information & Technology Policy & Programs – National Partnership for Women & Families**

So, I think Gretchen had the right point, I don’t whether...how much of that needs to be captured here, but I think she has the correct point.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay.

**Mark Savage, JD – Director of Health Information & Technology Policy & Programs – National Partnership for Women & Families**

But to your question, Jen, yes my earlier comment was also about that there are many different care delivery environments that we’re trying to embrace.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay. All right, so Gretchen maybe we can work both those points into there.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Got it.

**Brian DeVore – Director of Strategy & Healthcare Ecosystem Intel Corporation**

Can you explain the 5<sup>th</sup> bullet, I'm a little slow today, but maybe I'm just not reading it correctly.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Work with the private sector to identify government data sources that support improvement in public health goals. I believe this was part of our discussion about, you know, that the federal government has a wealth of information and different data sources that could be used to improve health and that perhaps the private sector could help the government identify what sources of data they have or...I think it was just about really collaborating. But it sounds like that's not clear?

**Brian DeVore – Director of Strategy & Healthcare Ecosystem Intel Corporation**

Well, maybe it is, maybe I just need some refreshing of what we talked about. It sounds like you want more open...

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Sharing, yeah.

**Brian DeVore – Director of Strategy & Healthcare Ecosystem Intel Corporation**

Sharing of government data, maybe there is a way to clarify.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Brian, this is Gretchen, this was from your folk's conversation around...

**Brian DeVore – Director of Strategy & Healthcare Ecosystem Intel Corporation**

Yeah, I know.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Goal five and so just so that the rest of the folks know, in the plan we're talking about, you know, releasing datasets, you know, and this is from the opendata.gov and I think what Brian and his team were talking about was not just, you know, releasing these datasets but work with the private sector to identify what the right datasets are that could actually foster innovation. So, we can, you know, tweak that so that we get that message from the goal five discussion a little bit better shared in that bullet point.

**Brian DeVore – Director of Strategy & Healthcare Ecosystem Intel Corporation**

Yeah, I like what you just said better than what you have written here but I'm not sure how you shorten it.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

The right data sources you said to support innovation, okay.

**Brian DeVore – Director of Strategy & Healthcare Ecosystem Intel Corporation**

Innovation and improvement in public health goals, yeah.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay, all right.

**Brian DeVore – Director of Strategy & Healthcare Ecosystem Intel Corporation**

And if nobody else agrees I'm happy with what's here, I'm just again, a little slow today.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

All right, other comments on this page? What about the plan to hold federal partners accountable with regular transparent reporting on progress towards goals? I know we talked about that a lot in our initial conversations with the Workgroup. Do people feel like that's strong enough and gets at the issue?

**John F. Derr, RPh – Health Information Technology Strategy Consultant – Golden Living, LLC**

This is John Derr again, on that one and also on point four that we just talked about, you know we give the CMS a lot of information in the MDS assessment and the OASIS assessment, and the FIMs assessment, and that, but most of that is used to sort of regulate us and I think it could be used a lot more in giving us more guidelines on best practices. So, I'm all for point four and then hold it. I don't think the holding them accountable is a pretty strong word, but, you know, working together as partners on better care rather than penalty care would be very nice.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay.

**Michael W. Painter, JD, MD – Senior Program Officer – Robert Wood Johnson Foundation**

Yeah, this is Mike Painter here, I'm sort of confused...I mean, I like the...I mean, we all like accountability but I'm just sort of confused about what that actually means, I mean, isn't congress holding them accountable but who else is really holding them accountable? I don't really understand that mechanism. And what are we suggesting there?

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

I don't know that it was anyone specific who would hold them accountable but rather that there would be clear goals and transparent reporting on how they were progressing toward those goals. I don't know if the intention was that there would be a group to hold them accountable. I don't know if others have thoughts.

**Brian DeVore – Director of Strategy & Healthcare Ecosystem Intel Corporation**

Yeah the planning can't hold anybody accountable; somebody has to be the conductor.

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

Well, isn't the conductor, at least from the...

**Brian DeVore – Director of Strategy & Healthcare Ecosystem Intel Corporation**

You might want to just call that out, I mean, you'll get pushback if they don't like it but it's either...

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

It's Christine, from the Consumer Workgroup we did comment on some related things here and Jen's right Mike it wasn't, you know, here's the mechanism, it was more, how do we create transparency because there is such a huge array of federal programs that are tapped into in the strategic plan many of which have budget allocations associated with them. So, how do we get a sense...how can stakeholders monitor the process and particularly we were thinking of consumer organizations and start to see the impact of, you know, a federal investment.

But also there was a real sense in the strategic plan that while the plan itself was focused on federal actions there was definitely a sense of like we're all in this together and we need to focus on some collective actions and so that kind of, you know, transparent reporting helps to point stakeholders and particularly we were thinking of consumer organizations in the direction of understanding where they can plug in, how they can plug in, what progress is being made, where the gaps are, how they might support gap filling things like that.

**Michael W. Painter, JD, MD – Senior Program Officer – Robert Wood Johnson Foundation**

I see, so maybe like the federal partners would hold themselves accountable to the public by these channels.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Yes.

**Michael W. Painter, JD, MD – Senior Program Officer – Robert Wood Johnson Foundation**

Right?

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Yes, I think that's a...so maybe Gretchen we can flip that around a little bit so the focus of that sentence is actually on transparent reporting.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Got it.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay, okay that's really helpful, nice. All right, any other comments on this page before we move on?

**Mark Savage, JD – Director of Health Information & Technology Policy & Programs – National Partnership for Women & Families**

Jen, I had a thought but let me ask a process thought, this is Mark Savage, the process thought first, how...do you want us to be talking about sort of wordsmithing these slides or just asking about it more conceptually?

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

I think if you have specific concerns or words that you don't feel comfortable with I think we should definitely get that out now.

**Mark Savage, JD – Director of Health Information & Technology Policy & Programs – National Partnership for Women & Families**

Okay, but what I...

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

If it's just kind of editing then I think you can probably give those comments to Gretchen.

**Mark Savage, JD – Director of Health Information & Technology Policy & Programs – National Partnership for Women & Families**

Leave it to you to decide. The very beginning, the advocate in me wants to say, design and build a new paradigm rather than articulate a pathway to evolve toward a new paradigm.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay, okay, okay.

**Michael W. Painter, JD, MD – Senior Program Officer – Robert Wood Johnson Foundation**

While we're on this theme, the first bullet...I would just advocate for being specific about which learning system we're talking about and maybe sort of pitching the idea of it's a learning health system.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay, that's a great catch, yeah, we should be specific there. So, Gretchen, learning health system and designing and building instead of articulating.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Got them.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay, all right. Mark any other wordsmithing?

**Mark Savage, JD – Director of Health Information & Technology Policy & Programs – National Partnership for Women & Families**

No.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

You sure, it's okay, it's good, I think these are all good comments so it's worthwhile to go through them. All right, let's go the next page here and this is identified gaps and areas for emphasis for the plan. And these came out of a number of the Subgroups.

So, including strategies to address health and Health IT disparities to achieve better equity, integrating public health and social determinants of health into the Health IT ecosystem and into health improvement efforts and then providing clear guidance on a privacy framework, specifically establishing how information can be shared not just what can't be shared and how to harmonize federal and state laws. So, there is a lot here to chew on.

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

Jen's it Christine...

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Yes?

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

Can I just jump in for a second? So, just from a Consumer Workgroup perspective two comments, one is it's not clear, and I think it is probably a little bit clearer in the letter as opposed to the slides, but I just want to be sure, this slide is called identified gaps and areas for emphasis, but slide three actually identified some other...like in particular coming from our Workgroup one big gap which is this bridge building, you know, kind of connection between some of the objectives around building a culture of shared person-centered health and care goals.

So, there are just some things on slide three that I felt like might be here, because we want to make sure that the recommendation our Workgroup made on that new bridging objective it's meant to be very practical and specific, and tangible not, you know, big picture conceptual, so it would be great to have it here as well. So, that's my first comment.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay.

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

My second comment is the privacy framework, our Workgroup didn't quite talk about the points as you guys have here more so we talked about the gaps in the framework specifically with respect to places like PHRs and devices, and others areas where consumers might be aggregating data from multiple sources but once I drop it, you know, take it out of my doctor's portal, because he or she is HIPAA covered, and drop it into a PHR then it's a totally different privacy framework that governs that data, it's no longer HIPAA, it's like FTC stuff and that is very concerning for consumers, so that piece I think needs to be reflected here.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

So, Christine are you suggesting we add that detail into the letter?

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

Yeah, I mean, you know, again it depends on how you...if this is one single unified set of recommendations, yes, absolutely.

If the Consumer Workgroup's letter is going forward separately as well then it's up to you guys as a Workgroup to do that, but it's hard to imagine nobody being concerned about that large of a gap in the fabric of our privacy policy.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Christine, we were...when we put these slides together we were thinking more of just, you know, the what crossed over with both of the Workgroups instead of specific recommendations between each thinking that both the letters would go through.

So, maybe what we need to do is ask Paul what would be most useful for the Policy Committee's discussion next week if we want to include like the most salient points from each Workgroup in this recommendation letter or is it, you know, that we'll review both of them.

I mean, I know as staff we're definitely looking at both of the recommendations, but as far as the Policy Committee discussion what will be most fruitful for them.

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

So, this is Paul, I thought the goal was to have it joint. Is that your question?

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Well, yeah, that is the question, do you want just one set of recommendations that consolidates everything and not some of the specific areas, because there were some that were very relevant to the Consumer Workgroup that, you know, had not been discussed by the Strategy and Innovation Workgroup and then like Christine had said earlier, and I don't remember exactly when this conversation was, but Christine had said there are some things that, you know, the Strategy and Innovation Workgroup had talked about that, you know, the Consumer Workgroup never even looked at really, because they were focused more on the consumers role in all of this.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

The way that we...

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

So, do you want one big bucket or do you want here's the issues that both groups thought were important to focus on and then, you know, there is also some additional stuff from each Workgroup that also is relevant.

**Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**

This is Michelle, I think you need to do the latter Gretchen, because the letter comes from the Policy Committee it doesn't come from the Workgroup.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Okay.

**Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**

So, you can present both ideas and where there are differences of opinions possibly at the Policy Committee and then get agreement from them that those things should be included in the letter.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Okay.

**Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**

But, just remember the letter comes from the Policy Committee.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Right and that's what I thought, I just wasn't sure, you know, what the level of detail was that we needed to include in there. So, it's the most important pieces for each Workgroup that gets consolidated together as a recommendation for the Policy Committee to weigh in on and then send their letter to, the transmittal letter, to the National Coordinator, correct?

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

I disagree strongly with that approach just based on where this conversation is today because the Consumer Workgroup spent considerable time making very specific comments relative to...

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Right.

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

Objectives, you know, number one, strategy six, you know, do this change, this whatever, so if that is not being vetted by this group I don't want to lose that work and so...and I don't see that it looks like that specific level...we had a lot more detail than you guys did.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Right.

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

I mean, I don't think...

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Right and that's why I thought I would include it as, you know, and here's more detail.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

We are, yeah...

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

So, Michelle and Paul...

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

I mean that's basically...if you guys look at the letter, the first paragraph of the actual letter it says that separate draft recommendations from each Workgroup are included with this joint recommendation. So, yes, they are supposed to be at the end.

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

So, I'm fine with that, I just wanted to make sure that if it's one...so coming back to my original comment, if it's one cover letter and two...that's essentially summarizing the one Workgroup which is the Strategy and Innovation Workgroup's recommendations then I think it does need to reflect some of high-level points from the Consumer Workgroup so that the Consumer Workgroup's comments don't just end up being an appendix, footnote to this, if that makes sense.

So, if that means that this Workgroup has to sign off on that then hopefully everybody will read that but that was not the process that we went through. So, maybe we can kind of clarify some of this off line, I hate to take up too much time on the call, but I just want to make sure that the Consumer Workgroup's comments don't get, you know, only included in an appendix after thought but at the same time aren't totally subject to both groups coming together to get agreement on every single thing. There is something in the between I would hope that we could find a happy medium.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Well, I don't think we want to lose all that detail because I know that our Subgroup had a lot of detail as well. So, I think we definitely want to include more detail at the end, but, you know, begin it with this overall framework and overall recommendation. So, we don't want to lose that Christine I agree.

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

Yeah, great.

**Mark Savage, JD – Director of Health Information & Technology Policy & Programs – National Partnership for Women & Families**

This is...

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

So, I would love to add those two points that I made with respect to this specific slide we're talking about.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay.

**Mark Savage, JD – Director of Health Information & Technology Policy & Programs – National Partnership for Women & Families**

So, this is Mark, I think that's right the whole, when we get to the, sort of the restructuring the Strategy and Innovation Workgroup was talking about person-centered care and that really should be here on this slide as well and I think, I don't remember our Workgroup, Strategy and Innovation Workgroup, talking about this privacy element so much as being something that's either a gap or an area for emphasis.

But the point that Christine makes is, in my mind, clearly a gap that does need addressing before we...in the process of going towards a learning health system, how do you build in PHRs, how do you build in mobile access that kind of thing. So, I'm not sure where the...as written where this third bullet came from if somebody could help me with that.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Well, I guess the question is, is it agreeable as the third bullet, I mean, I'm not sure exactly of the whole...I can't backtrack all of the bullets, but...

**Mark Savage, JD – Director of Health Information & Technology Policy & Programs – National Partnership for Women & Families**

Well, I think I would say HIPAA tells you how you can share information, there is some question about whether people are following it. Is that an area of emphasis? It has been around. Is it a gap? I don't think it's a gap. There is, in my opinion, there is some work to be done on harmonizing federal and state laws but I don't know that we've talked about that as a Workgroup and I don't know that given the other things that we are lifting up for a strategic plan to get us to a learning health system I don't know that this is one of the three things I would be mentioning as the identified gap and area for emphasis. However, the ones that Christine mentioned I think are worth lifting up.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay.

**Michael W. Painter, JD, MD – Senior Program Officer – Robert Wood Johnson Foundation**

Is it a...Mike here, I'm not entirely following...I mean, are you...is it just not your priority or...I mean, I'm not really picking this up as a...I'm not carrying the banner for this I'm just curious about the comment, is it not your priority or you disagree with the notion of trying to do it or it just seems like a gargantuan task that's impossible or what's the concern?

**Mark Savage, JD – Director of Health Information & Technology Policy & Programs – National Partnership for Women & Families**

This is Mark, I think for me privacy and security are important it's that there is a lot of, there is a lot that is already out there and done. And here we have a slide that's lifting up gaps and areas for emphasis. I'm not sure why it's on this slide as written.

**John Houston, JD – Vice President & Associate Counsel – University of Pittsburgh Medical Center**

Could I...this is John Houston, can I suggest that what we're trying to still deal with is the issue of sensitive information which still I don't think is resolved.

**Michael W. Painter, JD, MD – Senior Program Officer – Robert Wood Johnson Foundation**

And not to lose John's point but, Mike Painter here again, I mean, just coming off...we're about to release our data for health listening series report and it is what it is, but that was...this privacy area is an enormous area of concern for the public and it isn't in any way resolved it just keeps coming up. So, I can...it's not problematic to me to have it identified as an area for emphasis or an identified gap. Whether the sub-bullets are the right ones that's open for discussion I guess.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Yeah.

**Mark Savage, JD – Director of Health Information & Technology Policy & Programs – National Partnership for Women & Families**

This is Mark; I think John's point about sensitive information is very useful, I think that is...I agree that is an area where work needs to happen.

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

And just to be clear, it's Christine again, I agree with Mike Painter, I agree with the sensitive health information but I just didn't want folks to think that was the only major gap area, I think it's one of them, but our group anyway was just very concerned about what happens when we put our health data in not provider portals and how the privacy framework that governs those spaces really changes. So, that was what came out of our group.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay, so...

**John Houston, JD – Vice President & Associate Counsel – University of Pittsburgh Medical Center**

This is John Houston again; it might be informative though to add a second sub-bullet that speaks to the tension around sensitive information. So, to add a third bullet or...

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Would that help Mark?

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

Well...

**Mark Savage, JD – Director of Health Information & Technology Policy & Programs – National Partnership for Women & Families**

If you inserted the word "sensitive" in front of establish how sensitive information maybe that's what this is getting at.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay.

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

Or actually, I think, this is Paul; I think Christine's point is I don't know that we have a privacy framework for covered entities which is HIPAA. We almost have a...we don't have a privacy framework for all else which importantly, and I'm not sure consumers understand this, doesn't cover let's say these things called PHRs or other places that are not under the control of a covered entity.

So, I wonder if you inadvertently...when you say how sensitive information you inadvertently narrow the scope tighter than you actually want to?

**John Houston, JD – Vice President & Associate Counsel – University of Pittsburgh Medical Center**

That's why I think adding a third sub-bullet...

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

Right, exactly right. So, I think there is a bullet that Christine mentioned which is, it's not all about just where we normally think of privacy i.e., associated with providers, it is a broader privacy around health information...actually maybe that's the point, it's a privacy framework around health information wherever that is in today's world, which is very different from 1996 and then the other point that John mentioned is and we need to also deal with sensitive health information wherever it goes.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

So, could we put that in there Paul under the third bullet, provide clear guidance on a broader privacy framework?

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

Yeah, that's how I would read Christine's...

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay.

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

Suggestion.

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

Yeah, we don't need to make up the language in this particular case, Paul you are absolutely on point, and we have language from the consumer letter that you guys can list.

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

Yeah. So, I think what the strength of vis-à-vis the earlier discussion about what gets included per Michelle's point it is one letter that goes to, in this case it's ONC, and what we're doing is what's really been nice so far with the slides is how much agreement about the overarching comments, and they've been clear and I think that's what people have been saying, so that's really helpful because you asked this clear overarching comment about the approach taken with the existing draft.

In addition you have a number of more detailed both reactions and recommendations privacy happens to be one of them and other things that are mentioned in the consumer response. Some of the details, I think Christine, could be safely put in the appendix not meaning it's discounted, but that's where you find a lot of the details but we want to capture a lot of the major points which are not just those that we've covered so far, but will go into things that the Consumer Workgroup spent time on or the Strategy Workgroup spent time on that are in later parts of this letter. Is that fair?

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Yeah, I think that makes a lot of sense. Christine are you good?

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

Yes, I think that sounds good.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay. All right, so, let's move on to the next slide, slide six and this is about the restructuring. There were a lot of comments about the plan needing some, here I guess it says, significant plan restructuring primarily emphasizing the importance of a person-centered health and wellness, aligning this with other national health planning activities and I think Gretchen you mentioned that there is a lot of alignment with some national prevention strategies and some other groups so pulling that out more.

And leveraging Health IT so individuals, providers, community-based organizations can partner together to identify, align to and achieve patient goals. So, this is actually a big recommendation here, restructuring the plan. So, let's talk about this and see if there are any concerns or I think we had agreement on this pretty significantly, but thoughts on the language?

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

Well, this is Christine...

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

Well and you might want to go the...I think it's the next slide where you go about...

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Yes.

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

Talk about the two overarching.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Yes.

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

So, I think that's what you mean by restructuring.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Yes.

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

Not tear up but reframe.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Right, thank you. So, if you go to the next slide you can see, so this is really about improving the health and well-being of individuals and communities and under those, you know, identifying Health IT goals within those public health goals, identifying what relevant federal information and data is needed to achieve those goals, making that information relevant and useable to people so it can impact health and developing policies that facilitate the safe acquisition, sharing and use of health data.

So, Paul is right, we're not ripping this up and creating something new but we're reframing it in a different light. And then the second piece there is about building a culture of individual, provider and community health partnerships to achieve shared health and care goals. And this...I think Christine was this...some of this is from your work?

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

Yeah, yeah the second piece the “build a culture of individual, provider, community partnership to achieve shared health and care goals” that came from us and so I was just sitting here looking at this slide trying to figure out are we saying the entire plan gets restructured under two big picture, you know, areas or I'm not sure how they connect to each other.

But from a consumer...from the Consumer Workgroup just to give you some context, we felt like the structure of the plan had consumers under like goal three objective one that was it, but yet if you looked across a lot...all of the other goals and many of the other objectives there were places where consumers needed to be reflected and so we were trying...we had two real recommendations around the structure of the plan, one was in all of the goals and objectives consumers have a role and that role needs to be clear because the health system has been predominately, you know, run by providers and plans, and others, and so people tend to forget that.

One example of that is actually on this slide which is a great example, objective four, on the left side; develop public policies that facilitate safe acquisition, sharing and use of health data. I would think that our Workgroup would have said, by consumers and providers, I don't care about the order, but just to really call out consumers in that. So, that was one recommendation we had.

The second was this idea that there is...you know it's not just about providers in goal two and consumers in goal three, there is a real bridging that needs to happen that can replace that outdated sort of mental paradigm of the doctors are over there and the consumers are over there but really kind of get to this notion of partnership and that partnership happens in areas like care planning and shared decision making, and PGHD, and, you know, all of the things that you see listed on the right side of the slide.

And we felt like there was an opportunity with respect to what you see as objective seven for quality measurement and payment of incentives to begin to be aligned around those shared goals and therefore create some parsimony in quality measurement and reporting because if you're oriented not just around patient goals, those are driving the discussion, but really are orienting around goals where everybody is agreeing this is a good goal and it's an achievable goal then you can start to align policy levers to drive towards those and that will create some parsimony. So, hopefully that helps give you some context.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay. Comments?

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

One comment. Our overarching comment was about going to a person-centered and we certainly have a lot of patient terminology in here.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Yes, good point Paul. So, Gretchen can we replace that patient language?

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Yes, definitely and...as to...when we're talking about the reframing so instead of the restructure getting at what Paul was talking about, so if we could back up a slide just to get to that one that would be helpful.

So, just to make sure that when we're putting this forth next week, Christine, do you...I was just trying to figure out how we could explain that both groups wanted to see something different in how the plan was restructured. Do you want me to sort of get at...instead of just here's the restructure that was recommended, give more of that background in this slide so that it makes it clearer for the discussion?

I'm just trying to make sure that we're...so the policy group will not look at this and say, you know, what is this supposed to be.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Well, I think, Gretchen that we both agree that we need to link this to some national health goals. So, that's really the overall...that's the...I think that both groups agree with in terms of restructuring. So, linking it to some overall health goals and targets and I think all of Christine's...the Consumer Workgroup stuff falls under there. Because all of that work is about achieving those health targets.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Okay, what I'm thinking here and Christine I just want to make sure that I'm doing this correctly, talking about the bridge that you were explaining and what's the bulk of a lot of the work in the Consumer Workgroup's recommendation talking about that here that, you know, it's not just the leveraging part but focusing on the partnership and, you know, to get to shared decision making means that a lot of how delivery itself is changing that that's what the plan needs to be focusing on is, you know, how do we get to the shared part of that. Is that what you want to be emphasizing here?

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

Yeah, it is the shared part. I think the challenge we're facing is as a Workgroup we said, I agree with Jen completely, we said two things, one is the plan is anchored in a framework which is collect, share, use that is centered on data and infrastructure.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Right.

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

We said it needs to be centered on people and it should be connected to an existing health policy rubric and we didn't say what that is but it's a such as triple aim, you know, kind of a thing so that people can align to it.

So, we then...we stopped short of...we said if you're keeping the structure you have then there is a new goal area that you can then align and take from other areas and build under that and that was the emphasis on the shared but we didn't say, you know, that's the only way to do it or, you know, here's how we should restructure the entire plan. So, I think that's part of where I'm struggling.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Okay.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Maybe Gretchen if you take the right column off and put it on a different slide because I don't think its equivalent so maybe you just need to break up slide seven into two slides.

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

I have another sort of communication framing suggestion.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Okay.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Yeah, please.

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

Potentially, instead of leading with "you need to restructure this."

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Right.

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

Which is how it's coming across here, we say, you know, acknowledging the importance of person-centered health we would like to align with the national health planning activities and leverage, and create partnerships between the healthcare side and the community-based organizations that's...now that's setting me up. Then we say, one way to do this is to reframe the objectives that are in the plan in the following ways, boom.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay.

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

And in fact having them both on the same gives you visibility of saying, well they're basically saying two things we're about health and well-being of individuals and communities and figure out how to create partnerships and I find that they've put all our objectives in those two buckets that makes sense to me.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay.

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

I think that's potentially a better way of easing into this constructive recommendation.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

I like that. Workgroup comments, thoughts, does that make sense to people?

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

I'm so glad this is going to be a transcript I can't write fast enough.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Do people feel okay with that, so changing slide six instead of just saying plan restructuring, talking about, acknowledging the importance of person-centered health and talking about the way we're, you know, aligning that with national health planning and then moving into the next slide with the two, I don't know what we're calling them, they're not objectives, but improving the health and well-being of individuals and communities and partnerships.

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

So, maybe those are goals and then you have these objectives.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Right, right.

**Mark Savage, JD – Director of Health Information & Technology Policy & Programs – National Partnership for Women & Families**

This is Mark, I don't know if this...I think this is consistent with what Paul is saying but it seems like there is a way in which what we want combines the two columns it's not a choice between one or the other it's that...

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Right.

**Mark Savage, JD – Director of Health Information & Technology Policy & Programs – National Partnership for Women & Families**

The specifics on the right-hand side are essential in the more generalized objectives as they're worded on the left-hand side.

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

It's interesting that I think the right-hand side really does have a lot more to do with care.

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

Yes it does, and it's Christine, and it did by design because that's how the system manifest for consumers. So, I think, you know, again we're going to...we either have to figure out how to blend and integrate our recommendations more structurally in my opinion or we just need to say, here's what they are which is, you know, Strategy and Innovation said this and Consumer said this it is an "and" they're not mutually exclusive, but, you know, this is a public comment process so it's kind of...I mean, I hate to say it Gretchen, but it's a little but up to ONC to figure out is it a complete restructuring, is it a tweaking, you know, how do you do this, what are you guys comfortable with, you know that better than I think we do. So, I just want to throw that option out there that we just simply communicate what they are.

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

I think there's an opportunity Christine to provide a suggestion to help the communication...I don't know what the communication asset of this plan. I actually think that if it were put under the goal of worrying about health and healthcare of individuals and communities, and that combines sort of the two sets of objectives, then that's something congress would understand better than just saying we need to make data systems interoperable. And I would include the public in that as well.

I thought one of the ideas that both groups had or maybe a little bit more on the strategy's side was to sort of reframe the way we communicate how this relates to people in the country and then how it is a motivational goal for the IT infrastructure that would support that...

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Right.

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

And that's an important missing link I think we have and that was I thought what was behind what people were saying collect, use and share or collect, share and use doesn't quite help translate that to the American people or congress. So, if we just leave it to individual comments we may miss an opportunity to communicate the connect-the-dots piece.

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

Right, so, I think...I agree with you completely, where I'm falling down a little bit though conceptually and maybe it's just because I haven't been part of your Workgroup conversation is that we as a Workgroup completely agree collect, share, use needs to be replaced and I think the Workgroup would have been delighted to say it should be replaced with improve the health and well-being of individuals and communities.

So, but that is...the structure of the plan though as written is that it's grounded in a framework so you could plop this in, which would be a huge improvement, but then it's got goals and then objectives, and then strategies, and so what we tried to do was to fit within the current structure and say that a goal level, you know, something at the level of a goal is this build a culture of individual, you know, blah, blah, blah, but the improve the health and well-being to me is not a goal level thing it is a framework, here's what we're trying to do. So, the goals are, at least in the current plan, are things like expand, adoption and advance, you know, strengthen healthcare delivery and so that's how we came into this building this culture goal. Does that help?

Because, I think...I'm not sure if what you're suggesting...where the goal is here versus the objectives. Are you suggesting a new goal on the left side with these objectives under it or are you really saying that the improve health and well-being is the framework that replaces collect, share and use in which case what's left here are they objectives or goals? Like that's where I think I'm falling down.

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

It turns out that the improve health and well-being was a goal, it was goal number four and we just thought that didn't look like the other one and yet it seemed like a really good organizing goal or aspirational goal around which you could build both objectives and strategies to achieve that and that just gives everybody a nice true north to look towards.

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

Right.

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

And again, a way to communicate, well what do you guys, I mean, interoperability that seems like a long word, why do you want this, well it's for this.

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

Yeah, no, I mean, I don't disagree with you I'm just...I'm not, you know, again, since it is already a goal, so let's say your...I think you're suggesting elevate it to the organizing.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Yes.

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

Right.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Right, yes.

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

Which we completely agree with but now I don't know how to interpret the things that you have listed underneath that organizing principle your calling them objectives here, are you saying they replace the goals as new goals in the plan?

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

So, maybe that's...okay, so I hear what you're saying. So, yeah, we want to elevate improve the health and well-being of individuals and communities that would be the overall framework...

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

Yeah...

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

With the idea in that framework being you would have to know what health goals you were aligned with, you would have to know what information you needed and you're basically trying to impact health by using that information.

So, they're not really...I hear what you are saying, so we have them as objective one, nothing, three and four. So, yes, they're not...they don't line up the same way that the current plan has objectives there. So, maybe we just take that out and explain what we mean by that new framework. I see what you are saying.

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

Yeah, so that's helpful Jen. So, what I'm hearing you say is this is an organizing framework and here is why, you know, here's like why we think this and what we think it means, but then I think what we're looking at on this slide seven is your apple on the left and our like, you know, not even a fruit on the right...

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Right, right, right.

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

Okay, so we're saying here is a new goal and take some of the objectives out of the existing goals and put them in, you know, at that level, but as a Workgroup we were still operating in the current structure.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Right, right.

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

...okay, so if that's right...

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Right.

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

Then I think that these are two totally separate conversations and yes of course our Workgroup completely agrees and made the same recommendation which is orient this around health and well-being.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Right, okay, so I do think we need to separate out...so Paul I like what you said about, you know, on slide six, so clarifying this, acknowledging that person-centered...I think that makes sense and then seven we'll pull that...Christine how can we rephrase that though?

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

You mean the new goal? Well, I think it's totally different. I think, so what I'm hearing you say, again I'm only probably 85% sure I'm getting right, is your piece on the left side of slide seven in the transmittal letter belongs with the content on slide three.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

And slide six.

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

And, yes.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

So, Paul's whole thing about acknowledging the importance of person-centered health, aligning this with health planning all of that belongs with what's on the left side of slide seven.

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

Yes.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Wherever we want to put that and state that this is really the framework we think we should...

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

Yes.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Work within. Okay.

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

Yes and then the piece on...

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

And then what do we with yours on the right side?

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

It stands on its own and it is to say...because I'm not...I did not see anything in here from your Workgroup that says you guys tried to pull apart the goals or add new objectives and we did.

So what we did here...so I think it's like next slide we're also suggesting that there is an additional goal here underneath which you can subsume, it's not like a whole bunch of new activities but it is...there are a couple of new things and it is a reframing. There is this new goal and here is what it is but that's at the goal level not at the framework level.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Could we put that, Christine, back in, what was that slide, gaps and areas of emphasis?

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

Yes.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Could we put that back there?

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

Yes, that's...yes that is...

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay.

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

That was the comment that I was trying to raise earlier.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay, okay, all right, I think I've got you.

**Mark Savage, JD – Director of Health Information & Technology Policy & Programs – National Partnership for Women & Families**

This is Mark, I don't know if this is helpful, but it seems like that in light of the overall idea that we need to frame this around person-centered health and care and communities that in some ways the recommendation from the Consumer Workgroup also is not just a single goal but it's an overall structure and you could also re-label each of those as goals. The reason I'm saying this is because the thought of taking what's in the right-hand column building a culture and just saying it's a single goal I think misses the point of lifting it up.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

No, I don't...yeah, I don't think we're saying it's a single goal, I think we're saying it's an area of emphasis or whatever on slide five. So, adding it as a major area of emphasis or where it says gaps which we're going to rename I think.

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

Well, let's talk about what we mean by a goal, it's Christine again...

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Yeah.

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

The Consumer Workgroup added this as a goal and by goal I mean that it's, you know, if you look at page eight of the strategic plan it lists, you know, the five goals, but what we're saying is it's a goal that fits between goals three and four...okay.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay.

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

Is that better, hopefully, I don't know what that was about, but the Policy Committee was really supportive of this goal and what we said as a group was that it fits between goal three and four, and that some of the objectives that you find in various places but particularly in goal three and four could be pulled out of existing goal three and four and put into this new additional goal.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay.

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

Then we could...those objectives are on care planning, share decision making, those are already in the proposed plan.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay.

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

And then there is this new piece around sort of quality measurement and payment stuff aligning to them. So, without going back to the Consumer Group and seeing if they're comfortable...I mean, it's not like an area of emphasis, this is actually a new goal with...recommendation.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay.

**George Hripcsak, MD, MS, FACMI – Department of Biomedical Informatics – Columbia University NYC**

This is George, you know, another choice is to make the letter two pages instead of four pages and we've agreed on the importance of health and of patient focus and that's clear to me and that message comes out clearly, everything else is becoming a salad to me right now and I'm thinking of all the time we've spent building all those, just as Christine said, on our side building all those recommendations...

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Right.

**George Hripcsak, MD, MS, FACMI – Department of Biomedical Informatics – Columbia University NYC**

Specific recommendations about what to do with vendors and what to do with standards that it's kind of getting buried in a four page document that feels like that's where the meat is when the meat is really perhaps more in the individual Workgroup letter.

So, maybe we make this a two page letter that just does this summary that we were just talking about now that kind of says it needs to be reframed...

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Right.

**George Hripcsak, MD, MS, FACMI – Department of Biomedical Informatics – Columbia University NYC**

Make health important, make patients important and don't go into much more detail, don't be so prescriptive as much as in the draft that you sent around and then go straight to the two Workgroup documents and let's not try to merge them because it's another three months to merge them.

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

Yeah, I have to say, it's Christine, that was the approach I was hoping we were taking. I do think that is a far easier approach and so the question I was asking earlier was, it would be better to sort of summarize the key and most important points from...so kind of calling attention...but rather than saying, here are these two appendixes we just have...it's all sort of one piece with a one or a two page cover and here's what both...

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

I think...yeah, I think we're all saying the same thing, I mean, I think that was what Paul was saying earlier as well, Paul, you can speak for yourself, but...

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

Well if that's the case then I don't think we have to worry about putting...

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Yeah.

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

The right side of this slide necessarily...all of the objectives and whatever in there...

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Gotcha.

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

Except the one sentence that says “and also” and because remember...there are two other places in the previous slides that point to it and also there is a new, you know, new goal that the Consumer Group has recommended and this is what it is and there is more detail in a couple of pages from now that’s fine.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay, I think that makes sense. Is anyone not comfortable with that approach? Okay, Paul are you still there?

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

I am.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Does that sound right to you or helpful?

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

I’m not sure I see the difference, but...

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

I think it’s the same...I think it’s...I think we’re on the same page.

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

Okay.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay.

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

So, next slide then, right?

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Next slide, which I think is the last slide. Was there one after this? No. Okay. All right, so, I guess Gretchen we’ve got some work to do.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Yes, just if I can ask a really quick question here. So, is the idea that we're going to take George's concept of just cutting the letter down to two pages and say, these are the areas of agreement and by the way here's the rest of the information and read up on that, that's what we're going to be presenting to the Policy Committee, is that the objective here?

**George Hripcsak, MD, MS, FACMI – Department of Biomedical Informatics – Columbia University NYC**

Well, I wouldn't...

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

I think it's kind of...yeah, not quite, I mean, I think it's the way that we've kind of got the letter framed already is that here are the areas where we agree overall recommendations, the joint recommendation, overall framework and focus, you know, we think this is the way it should be re-framed, you know, these are some areas where we think we need more emphasis. I mean, I think it's still, you know, somewhat what we've got there and then, you know, some more...and then the specifics from each group.

**George Hripcsak, MD, MS, FACMI – Department of Biomedical Informatics – Columbia University NYC**

So, I think Paul was more positive, this is George, Paul was more positive, because when you say it's where we agree implies there are a bunch of areas we don't agree. There are not areas where we don't agree.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Right.

**George Hripcsak, MD, MS, FACMI – Department of Biomedical Informatics – Columbia University NYC**

We haven't even looked at the other areas. So, I would just say, we believe that the overall...I think pretty much what Paul said almost verbatim, the overall...

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Yeah.

**George Hripcsak, MD, MS, FACMI – Department of Biomedical Informatics – Columbia University NYC**

Scheme looks like this...

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Right.

**George Hripcsak, MD, MS, FACMI – Department of Biomedical Informatics – Columbia University NYC**

And that's what we put in those two pages. The reason I say two instead of four is to try to take some of the details out and then as Christine is saying, don't look at the appendices as extra, you know, superfluous detail and then we've done work on this and here is what we recommend from these two vantage points.

And then it's up to the...because we're not going to...we're not supposed to be rewriting it, we're supposed to be commenting on it, so here are our comments from two vantage points but from one...well, I don't know it's like one vantage point from the point-of-view of being more health focused and patient focused but then looking at different aspects of the strategic plan.

So, I'd look it all as one thing, we all agree on everything it's just that here's one view of it from one group of people and here is another view of it from another group of people and we pretty much came to the same high-level conclusion as Paul said.

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

I...

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

So, we've had some overarching recommendations which both groups support and we have more details in the following areas.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Right, yeah. So, Christine I don't think you have to worry about being an appendix or it's all part of the same...

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

...thank you.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay, all right, so Gretchen why don't we...we can rework the letter a little bit in the slides for next week.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Yes, I'm...

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

...okay, how am I going to pull this all together...

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay, I mean, I don't think it's a lot of change really I think we're just reframing it a little bit and shortening it a little.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Okay, all right, well yeah, I think that's true and I think like what George was talking about it's...that's not the way that the letter was supposed to read it was more like, you know, here's some stuff that was pulled from each of those other sections so that, you know, you knew what to look for in each of those "appendices" it wasn't that there was disagreement between the two it was more just "here's one place to find all that information."

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Well, and this is what we both support.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Yeah.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Because I think, you know, we want to make that point...

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Right.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

That both groups support this, overall.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Right, okay and this gets to my question originally to both Paul and Michelle is, you know, how do we make...how do we boil this down so that the Policy Committee has something to react to. So, that's where, you know, we'll make sure that we pull out the right pieces for next week.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay. All right and then Gretchen what happens after next week? So, we present this on the 10<sup>th</sup> and then what?

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Well and that's...I'm going to talk to Michelle and find out what's going on...you know, you all are asking me questions I don't necessarily know the answer to...

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Or Michelle, yeah.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Yeah, so let's ask Michelle what the next thing is. So, on the 10<sup>th</sup> there will be, you know, the final recommendations presented to the Policy Committee so that's why I'm making sure that we have the formatting and what needs to be focused on in that to go to the Policy Committee and then the Policy Committee is going to discuss all this and chew over it and then do their own recommendation, you know, back to the National Coordinator on where the plan should be changed or modified or whatever and then, you know, the staff will take that recommendation and work on the re-draft of the strategic plan.

So, I mean, you know, I don't mean to sound...to belittle this whole process but it's like, okay, remember the Policy Committee is the one who is going to be putting a final letter that goes back and, you know, what shape that takes I don't know, I need to find out from both Paul and from Michelle what that is. I suspect a lot of it will be what the recommendation that is presented to the Policy Committee with a little bit of tweaks but I don't know that for sure.

So, that said, then I think that that's the end of, you know, the road as far as commenting on the plan and we move to the next phase, which is because of the areas that were identified as gaps or weaknesses or areas that, you know, more information was needed that's a development of the work plan and some of those activities. So, it's not that, you know, that the Strategy and Innovation Workgroup is going to be monitoring the plan and all that we'll be providing information as to look, we need more detail on such and such.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

But the next steps are basically let's get a work plan together for the Policy Committee and present that.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay. Do we have another meeting set after...

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

We do on the 9<sup>th</sup> and that's another thing, it's like I'm wondering if that's too early, you know, because I would think that the Policy Committee would say, yeah, we flag x, y and z as things that we think we need to drill down into, so, you know, I don't know if that's the right time for Strategy and Innovation Workgroup to meet, it might be too early, but again, need to talk to staff to see exactly what it is that we do there.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

So we can get started on that work plan stuff.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

So, why don't we...we'll work on the letter, we'll work on revising the slides here. Do we have time to send it around to the group before the 10<sup>th</sup> are we allowed to do that?

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

I think it's just as fast as we can get it pulled together...

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

To get everybody to weigh in and Christine that includes you since this will be, you know, the joint recommendations. So, you know, again, I think if we're keeping it very high-level with all the detail remaining in each of the Workgroup's recommendations I don't think that should be as problematic, you know, I've got good notes on where we needed to change these slides so this would be the basis of things, but we'll finesse it and not get into, you know, how to merge the reframing aspect like Christine said just leave that to staff to try to figure out instead of trying to mash it together and get everybody to agree on it.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay, so why don't we regroup after this and we can go through the notes and rework it a bit and then we can send it around to the Workgroup...

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Yes.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Once it's revised.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Yes, Paul does sound logical...I mean, because obviously this is the first time I've done something like this, so does that meet the needs of the Policy Committee?

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

Yes, usually the Policy Committee largely adopts what's recommended with certain comments and so adjustments are made after the meeting.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Well, that's my question...

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Yeah.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

So, the Strategy and Innovation Workgroup and the Consumer Workgroup are going to be presenting a joint set of recommendations to the Policy Committee next week then you folks work your magic on whatever it is that you do...

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

Right.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

And send a letter to the National Coordinator on, you know, what the final recommendations are.

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

Right.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

So, I just want to make sure, you know, but whatever we present here is there going to be like a large amount of work that the Policy Committee is going to be doing to those recommendations to turn around that final transmittal letter or...

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

Well that's what I was...

**Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**

No, so this is Michelle...

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

Yeah.

**Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**

So, typically, sorry Paul, so typically these are as close to final as possible especially because both groups have already presented to the Policy Committee.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Okay.

**Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**

So, they both have already gotten feedback which has been integrated in what we discussed here. You also did a lot of the work by trying to identify the areas where there is consensus in the groups. So, I don't imagine, I could be wrong, that there will be too much discussion at the Policy Committee but the Policy Committee will need to vote and approve the recommendations, they might have a few tweaks but I think they really be tweaks and so the letter that we put together here probably won't change significantly based upon the meeting. Now somebody could surprise me and could, you know, completely disagree, but typically, especially having already presented once to the committee there won't be too many changes made.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Okay.

**Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**

Then once we get approval then we'll put together a transmittal but the transmittal doesn't sound like it will change much.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Okay, okay so that said, basically then like getting at what everybody was talking about let's make sure that the emphasis is on, you know, the areas of agreement and the overarching agreement areas and then the level of detail is not necessarily what we're putting into the recommendations is that correct? Because that's in each of the...

**Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**

So, the recommendations that will get presented will be much like the slides that were shared today and then as George mentioned I do think like a two page letter would be great to share with the committee.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Okay.

**Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**

But we can follow-up off line Gretchen.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

Okay, yeah, all right, thank you, thank you.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay.

**Gretchen Wyatt, MA – Policy Analyst, Office of Policy & Planning – Office of the National Coordinator for Health Information Technology**

I'm not trying to make it more difficult, honest I just want to make sure that, you know, we're giving the Policy Committee what it needs that's all I want.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Oh, no I think we all appreciate that, yeah, okay, all right. Are there any other comments or questions before we see if there are any public comments?

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

Maybe one comment about the more detailed recommendations. So, I know the Consumer Workgroup has a very detailed matrix, I don't remember whether they're organized in themes and whether the themes could be somehow highlighted so at least the committee understands what the Workgroup was trying to accomplish by the tweaks to the words. Do you see what I'm saying? Because in a sense the Policy Committee is being asked to approve everything including the detailed recommendations that are going to go to ONC.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Christine?

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

I'm sorry; I heard about every fourth word of that I was hoping it wasn't for me.

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

I remember you having a very detailed edit in your matrix and are they organized by themes like you're saying, oh, we need to substitute person from patient that's a theme people can understand and they don't really need to go through all of the places you've changed that but have you organized it so people can agree to all the themes or the principles your suggesting in the detailed edit?

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

I'm not sure...I heard the question this time; I don't think I understand the question, you mean in the grid that we did from the Workgroup?

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

Right.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

How is your matrix organized? Is it organized by goal or around themes?

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

No it is organized around the charge of our Workgroup which is individual consumer empowerment number one, number two that partnership between consumers and providers, and then number three, you know, how consumers...how do we elevate their voices to support health system transformation. So, it's organized according to those three themes but under each of those three areas it's got a box and a heading that's very clear what we're about to say and then a paragraph that communicates our comment. So, it's a fairly easy read but it is about six pages.

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

Okay, so, if the committee is going to approve the inclusion of those, that matrix, in the letter then probably you need to distribute it ahead of time so people have at least a chance to read those even if it's not discussed...

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

Yes.

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

And so I guess what I was looking for is, is there a way to summarize why did you propose edits if those things were there already what's the substance of the edit without having to go through each edit, just trying to give people a way of, you know, agreeing.

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

So, we did present detail and we gave a draft letter already to the Policy Committee when we did the presentation...

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

Right.

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

With David and Jen, so it is not new and nothing has changed. I think there was one thing that I need to go back through my notes that somebody recommended we make a change from the Policy Committee, so it's...for us the only new piece would be the one or two page, you know, sort of summary and areas where we're aligned, but I can...I think it's a judgment call, if you want me to go through the detail, I did the detail last time and I, you know, it can get a little bit tedious but I can do it again. So, we already have that slide deck and you can look at that and I can redo it if you want, but we already got a lot of good feedback that folks mainly really liked it.

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

Okay.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay.

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

I would just include it with the...if it's going to be included in the transmittal letter than I'd include it in the briefing materials for the committee so they have a chance to look at it before they vote.

**Christine Bechtel, MA – President – Bechtel Health Advisory Group**

Absolutely.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay. Any other questions or comments before we move on? Okay, so, we're going to present next week and then the next meeting is the 9<sup>th</sup> I believe and then Michelle are there any comments we need to take?

**Public Comment**

**Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**

We need to open up the lines. Operator can you please open up the lines for public comment?

**Caitlin Chastain – Junior Project Manager – Altarum Institute**

If you are listening via your computer speakers you may dial 1-877-705-2976 and press \*1 to be placed in the comment queue. If you are on the phone and would like to make a public comment please press \*1 at this time.

**John Houston, JD – Vice President & Associate Counsel – University of Pittsburgh Medical Center**

Hey, this is John Houston, while we're waiting, does this mean we are or not meeting on the 9<sup>th</sup>?

**Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**

This is Michelle, just looking at the schedule I think...so we have a meeting on March 9<sup>th</sup> and then April 2<sup>nd</sup> so I think we might work with the Chairs to find a meeting in between so it's not so soon after the Policy Committee and not so long until the April meeting.

**John Houston, JD – Vice President & Associate Counsel – University of Pittsburgh Medical Center**

Thank you.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

So, I think we can assume we're not going to meet next week is that...

**Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**

Most likely, yes.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

The 9<sup>th</sup>, okay.

**John Houston, JD – Vice President & Associate Counsel – University of Pittsburgh Medical Center**

Thank you.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Okay, all right.

**Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**

And it looks like we have no public comment. So, I know there was a little bit of confusion of process at the end here, so we'll work to update all of the documents and share that with this Workgroup and Consumer Workgroup before we present to the Policy Committee or Christine, David and Jennifer present to the Policy Committee next week and we'll take it from there.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Great, all right.

**John Houston, JD – Vice President & Associate Counsel – University of Pittsburgh Medical Center**

Thank you.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**

Well, thank everybody for your time today.

**Paul Tang, MD, MS – Vice President, Chief Innovation & Technology Officer – Palo Alto Medical Foundation**

Thank you.

**John Houston, JD – Vice President & Associate Counsel – University of Pittsburgh Medical Center**  
Thank you.

**Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**  
Thanks, everyone.

**Mark Savage, JD – Director of Health Information & Technology Policy & Programs – National Partnership for Women & Families**  
Thank you.

**Michael W. Painter, JD, MD – Senior Program Officer – Robert Wood Johnson Foundation**  
Bye-bye, thanks.

**Jennifer Covich Bordenick, MA – Chief Executive Officer – eHealth Initiative**  
Bye.