



Planned Parenthood  
Federation of America



Planned Parenthood Action Fund

February 6, 2015

**VIA ELECTRONIC SUBMISSION**

Dr. Karen De Salvo  
National Coordinator  
Office of the National Coordinator for Health Information Technology  
U.S. Department of Health and Human Services  
Hubert Humphrey Building  
200 Independence Avenue, SW  
Washington, DC 20201

RE: Federal Health IT Strategic Plan 2015-2020

Dear National Coordinator Dr. DeSalvo:

Planned Parenthood Federation of America (“Planned Parenthood”) and Planned Parenthood Action Fund (PPAF) are pleased to submit these comments in response to the publication of the Federal Health IT Strategic Plan 2015-2020. Planned Parenthood recognizes the importance of integrating health information technology (health IT) into health care delivery processes and supports the goals, objectives, and priorities identified in the Federal Health IT Strategic Plan 2015-2020. We commend the Office of the National Coordinator for Health Information Technology (ONCHIT) for producing a report that reflects the evolution of health care and for emphasizing the role health IT plays in facilitating health information exchange, health care delivery, and reform.

Planned Parenthood is the nation’s leading women’s health care provider and advocate and a trusted, nonprofit source of primary and preventive care for women, men, and young people in communities across the United States. Every year, Planned Parenthood’s approximately 700 health centers provide affordable birth control, lifesaving cancer screenings, testing and treatment for sexually transmitted infections (STIs), and other essential care to nearly three million patients. Planned Parenthood is committed to improving access to quality, affordable health insurance coverage and care.

Emerging technologies have real potential for improving health care access and delivery by helping people take better control of their health and by assisting providers in their efforts to better serve the community. We commend ONCHIT for producing five important goals in this updated strategic plan: 1) ensuring the adoption of health IT, 2) securing and sharing interoperable information, 3) strengthening health care delivery, 4) advancing patient-centered health and focusing on many different populations, and 5) advancing research and innovation within the field of healthcare. For key areas of the plan, we provide recommendations for how ONCHIT’s can better address challenges faced by both consumers and providers in leveraging the power of technology to improve access to quality health care.

***We encourage ONCHIT to recognize, communicate, and address the operational and technical challenges—faced by a range of providers and patients—around adopting and using health IT, particularly challenges around the current EHR Incentive Payment Program. Specifically, we urge ONCHIT to document the lessons learned about the implementation and impact of the Health Information Technology for Economic and Clinical Health Act (HITECH), as a part of informing future policy and practice.***

We appreciate ONCHIT's continued interest in expanding the adoption of health IT (Goal 1), including the focus on adoption and implementation outcomes with respect to Medicaid and Medicare incentive payments. Though the Medicare and Medicaid Meaningful Use (MU) Electronic Health Record (EHR) Incentive Payment Program is administered by the Centers for Medicare and Medicaid (CMS), ONCHIT has helped shape the impact of the MU program—while also providing support, resources, and technical assistance for the adoption of health IT more broadly. Accordingly, ONCHIT plays a valuable role in moving the conversation around innovation forward and we encourage to the agency to elevate the challenges and limitations of the MU program, including limitations with respect to which providers qualify to participate.

Currently, there are significant challenges to qualifying for and participating in the MU program—including the limited range of providers and organizations that can qualify and the financial costs associated with adoption, implementation, and training prior to participating in or qualifying for the program. We urge ONCHIT to recognize, communicate, and address the existing challenges to participation in the incentive programs and to use those lessons to guide the development of any new HIT programs. In order to do so, we recommend that ONCHIT document the various challenges faced in implementing the MU program. As a part of this, ONCHIT should focus on establishing better clarity about those providers that are unable to qualify for the MU program and the communities that are impacted as a result. We also recommend that ONCHIT work to broadly track telehealth adoption across provider types, payors, geographies, and populations. This data could be used to assess the overlap between telehealth and general health IT (EHRs, for example) and inform an understanding of where gaps exist.

It is important to note that the use of Regional Extension Centers (RECs) has been beneficial to a range of public and private health care providers, reinforcing that such programs can continue to bolster the adoption and implementation of EHRs and other technologies. As a part of the strategic plan process, we recommend that ONCHIT consistently highlight the role of the RECs and address the potential for increased financial assistance so that they have the opportunity to leave a larger footprint in facilitating EHR adoption.

***To achieve the widespread advancement of secure and interoperable health information (Goal 2), it is important that ONCHIT spearhead a meaningful and thorough process around protecting patient privacy and confidentiality. This is especially important for information that may be shared as a part of a health information exchange.***

It is important that the health information exchange and other data collection portals have the necessary privacy protections in place so that health information about patients, as well as information about providers, is not compromised. Informed consent, HIPAA protections, data encryption techniques, and patient opt-in approval provisions are particularly important when data is collected through various digital devices and then transferred to the health information exchange. Similarly, it is important that privacy protections are in place for provider information.

***In order to strengthen health care delivery overall (Goal 3) and advance innovation (Goal 5), it is important that ONCHIT highlight the negative impact of current barriers to effective use of telehealth to improve health care access and outcomes.***

To garner more interest and support for using telehealth and mobile health technology, it is essential that ONCHIT help to build more understanding around the negative impact of artificial and unnecessary barriers to the effective use of telehealth (including requirements around eligible originating sites, eligible providers who can practice, and acceptable technologies). Reimbursing providers that use a wide variety of technologies and telehealth delivery models—such as audio, video, store and forward, and mobile technologies—would help meet the needs of more individuals and populations.

***In order to advance the health needs of individuals and communities (Goal 4), ONCHIT should support federal and state telehealth programs that focus on diverse populations and communities (including women) and support a variety of services, including routine, preventive care.***

There are opportunities for ONCHIT to lead the way by providing investments in telehealth that would support both preventive and chronic care services to populations of all ages. ONCHIT has a real opportunity to craft a path forward that encompasses the unique health care needs of a range of people, including women and young people. The reality is that many telehealth programs (including home health programs) have focused on meeting the needs of chronically ill and elderly populations. Yet, studies suggest that younger populations are interested in accessing telehealth as well—and that there are potential cost savings generated by providing preventive and acute care services via telehealth. In fact, American Well conducted a survey which found that there was demand for telehealth services (online video visits) across young women ages 18 to 34.<sup>1</sup> Specifically, the survey findings show that 42% of women (ages 18 to 34) are interested in accessing birth control from a provider online.

We thank you for the opportunity to provide these comments. If you have any questions, please do not hesitate to contact me at 202-973-4800.

Respectfully submitted,

A handwritten signature in black ink, appearing to read "Dana Singiser". The signature is written in a cursive, flowing style.

Dana Singiser  
Vice President of Public Policy and Government Relations  
Planned Parenthood Action Fund  
Planned Parenthood Federation of America

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<sup>1</sup> American Well. (December 2014). Telehealth Index: 2015 Consumer Survey. Retrieved from: [http://cdn2.hubspot.net/hub/214366/file-2353913962-pdf/TelehealthConsumerSurvey\\_eBook\\_NDF\\_Pages.pdf?submissionGuid=e923bb8b-0ac3-4bd4-befe-df9365d78a55](http://cdn2.hubspot.net/hub/214366/file-2353913962-pdf/TelehealthConsumerSurvey_eBook_NDF_Pages.pdf?submissionGuid=e923bb8b-0ac3-4bd4-befe-df9365d78a55)