

## DRAFT Federal Health IT Strategic Plan 2015-2020 Comment Form

**INSTRUCTIONS:** ALL comments will be identified as **Critical, Substantive or Administrative**. Comments not marked will be considered Administrative.

**Definitions:**

**Critical** - - indicates non-concurrence with the document until the comment is satisfactorily resolved; convincing support for critical comments must be provided.

**Substantive** - - indicates that a section in the document appears to be or is potentially unnecessary, incorrect, misleading, confusing or inconsistent with other sections; requires convincing support.

**Administrative** - - corrects what appears to be a typographical, format or grammatical error.

All comments must have a complete **recommended change** with a **complete rationale** provided.

Section/ page no.	Level Critical/ Substantive/ Admin	Recommended Change	Rationale
Overall	Admin	The IPO wants to ensure that the Strategic Plan is in sync with the new Interoperability Roadmap as the development of a new strategy to move toward greater interoperability and health information exchange across the entire health care field is one of the most significant issues facing our community. We applaud ONC for mentioning that implementation of the Roadmap will be necessary to advance the goals of the Strategic Plan, but we want these documents to be truly aligned.	Overall, many federal agencies will have a role in moving interoperability forward and it is appropriate that there are goals and objectives in the Plan focused on health information exchange. As ONC promulgates a new vision for interoperability, it is imperative that these ideas are consistent across these two documents. The IPO expects to submit detailed comments to ONC on the Roadmap, and we encourage ONC to incorporate the principles of the Roadmap into the Strategic Plan before each is finalized.

1A	Substantive	<p>Providers and IT professionals continue to strive to harness the power of IT to improve the experience of care, improve the health of populations, and reduce per capita health care costs. However, the IPO continues to hear from the providers and vendors about the challenges they are experiencing related to implementing meaningful use. Overall, The IPO strongly supports expanded flexibility to meet the meaningful use requirements in 2015.</p>	<p>Efforts already underway to assess and/or extend MU to broader audiences should be applied and without lessening the positive impact intended, easing the administrative burdens where feasible is supported.</p>
2C	Substantive	<p>The IPO notes that the ideas of doing a security risk assessment, assessing risk, and then mitigating risk are not mentioned in this objective, goal, outcomes, or the corresponding strategies.</p>	<p>It's reasonable to promote an added Strategy to Support sound practices such Risk Assessments and strong Risk Management efforts.</p>
3B	Substantive	<p>The IPO observes that the community needs to achieve a standardized procedure on respecting patient's rights, ensuring that the flow of information is appropriate, and the patient has provided authorization. The community needs to use the same data dictionary to ensure that there is alignment between providers and the ability to seamlessly exchange information is supported. Moreover, it is important to note that securing data from sources at sites outside the formal delivery system should be included in this objective, as the home care setting offers many opportunities in this area.</p>	<p>Much of this information does not fall under the purview of the Health Insurance Portability and Accountability Act (HIPAA) of 1996. The issue of data literacy is also important to consider as people have varying levels of technology literacy depending on their age and skillset.</p>

p. 10	Substantive	Define meaningful use	Meaningful use is not defined. Based on the dates associated with each of the 3 stages for meaningful use, and differing criteria for professionals and hospitals/CAHs, it is unclear what is necessary to meet the 3-year outcome. <a href="http://www.healthit.gov/providers-professionals/how-attain-meaningful-use">http://www.healthit.gov/providers-professionals/how-attain-meaningful-use</a>
p. 11-12	Admin	Double check with the DoD regarding involvement/commitment for measuring outcomes under Objective 1B and 1C	Just ensuring that there was not an oversight since DoD is listed on all other outcomes except for 1B and 1C. Specifically, DoD is not listed under any of the 1B outcomes, but is mentioned in the 2013 HHS Health IT Patient Safety Action and Surveillance Plan and other referenced documents and one would assume they would want to measure these outcomes.
p. 12	Substantive	Update the numbers referencing Americans with broadband access to be consistent with the new FCC definition of broadband access or generalize the statement without the mention of numbers.	In light of the FCC's recent redefinition of broadband ( <a href="https://www.google.com/search?q=broadband+redefined&amp;ie=utf-8&amp;oe=utf-8#q=broadband+redefined&amp;tbm=nws">https://www.google.com/search?q=broadband+redefined&amp;ie=utf-8&amp;oe=utf-8#q=broadband+redefined&amp;tbm=nws</a> ), fewer people meet the criteria and may affect how the 3 and 6 year goals will be achieved.
p. 21	Admin	Change "...particularly since the..." to "...particularly because the..."	"Since" denotes time, whereas "because" denotes an effect from the stated cause, or reason from the cause.

