



April 3, 2015

Karen DeSalvo, MD, MPH, MSc  
National Coordinator  
Office of the National Coordinator for Health IT  
Department of Health and Human Services  
200 Independence Ave, SW  
Washington, DC 20201

Dear Dr. DeSalvo:

On behalf of Healtheway, we are pleased to provide written comments to ONC in response to the Interoperability Roadmap, Connecting Health and Care for the Nation A Shared Nationwide Interoperability Roadmap DRAFT Version 1.0. We commend ONC's efforts to put forward a vision and strategy for interoperability to enable a learning health system. It is apparent that careful thought and consideration were given in writing the document, reflecting feedback provided by industry over the past year. We appreciate the opportunity to share comments based on our extensive real-world implementation experience supporting two, large-scale interoperability initiatives (the eHealth Exchange and Carequality); and we look forward to maintaining an open dialogue with ONC as the road map is finalized.

Healtheway is the only non-profit organization with a public mission that convenes industry and government working to address challenges to achieve secure, interoperable nationwide health information exchange. We have assembled, through our initiatives, and our engagement with government and industry, acknowledged experts who are able to identify the critical barriers to interoperability and design new processes to make HIE work on a national level. We are a neutral body, inclusive of diverse stakeholders, which allows us to create workable solutions to overcome real-world data exchange problems. As a nonprofit 501 (c) 3 organization operating in the public interest, our public-private governance process insures transparent oversight of this work.

The practical application of Healtheway's endeavors:

- Enables consensus agreement on the policies and standards required to reduce barriers to data exchange
- Advances development and continued support for HIE governance frameworks
- Provides services that enable HIE networks to interoperate

Healtheway's work takes the form of two independent initiatives, each having its own mission, governance, membership and structure. Healtheway currently supports:

- The eHealth Exchange is the country's largest and fastest-growing nationwide health information exchange network. Today, the eHealth Exchange connects more than 30% of all US



hospitals, 4 federal agencies, including Veterans Administration, Social Security Administration, Department of Defense, Centers for Medicare and Medicaid Management, and more than 10,000 medical groups who provide care and services to more than 100 million patients. The eHealth Exchange is a prime example of a public-private endeavor that has an open, transparent, inclusive, nimble and responsive governance process, and has thrived in a rapidly changing health IT environment.

- **Carequality** is a public-private collaborative with a large, diverse group of stakeholders and existing health IT data sharing networks and exchange to build consensus on how to accelerate seamless health information exchange by enabling connectivity among different data sharing networks. Carequality has, through an open, transparent, multi-stakeholder process developed a set of universal and customizable principles for trust that establish a minimum set of expectations among data sharing networks to share health information. Efforts are under way to pilot and roll out this national-level interoperability framework, which will address many of the issues contemplated in the governance proposal in the road map. More than seventy different organizations across the health IT ecosystem are involved in Carequality's work.

## General Comments

Over the past several weeks, Healthway has been working closely with healthcare community colleagues to respond to ONC's call to action for health IT stakeholders to come together to establish a coordinated governance process for nationwide interoperability. The group included more than a dozen organizations, such as CHIME, DirectTrust, EHRA, Carequality, HIMSS, IHE USA, among others.

As a member of the group, Healthway shares ONC's observations that healthcare transformation to a Learning Health System in the U.S. requires interoperable healthcare information exchange that supports a sophisticated level of care coordination. In order to achieve the Learning Health System in the future, organizations must develop trust among stakeholder groups, and a collaborative spirit between the stakeholders and the federal government without a top-down process, dominated by the federal government and with very prescriptive requirements. Instead, ONC and other federal agencies should be active partners with the private sector in governance across the various domains, such as standards development, testing and other areas.

Multiple organizations, and existing and potentially new governance processes, are essential to orchestrate all the components together to arrive at the necessary interoperability capabilities that must be shared as part of a consistent set of basic interoperability capabilities. No single network, organization or process will be able to provide and manage the interoperability life cycle.

We, therefore, do not foresee a unitary and monolithic governance process. Instead, we envision there will be a set of processes that require some coordination but largely can operate independently as long as the overall scope, focus, and direction are well understood and shared. We urge ONC to work with stakeholders to establish such a lean coordination framework with a focused approach to support a small set of high-value use cases that can substantially benefit from improved interoperability. At the



same time, prioritization should in no way hinder industry and market efforts to develop and implement standards and technologies for other uses cases or needs.

As we review the draft Interoperability Roadmap, we are concerned by any implication that the various initiatives underway are a problem to be solved. We see all of this current, work as an immensely valuable resource to be leveraged, and as a reflection of the different domains within interoperability.

We pledge our support to advancing interoperability that engages the patient through coordinated, collaborative, and complementary actions by the public and private sector efforts. A coordinated approach that takes advantage of the efforts already underway will provide the level of sophistication needed to meet the data sharing and health information exchange requirements of a *Learning Health System*.

## **Leverage the Market**

Healtheway agrees with the ten guiding principles for nationwide interoperability that ONC defines in the road map. Leveraging the market, existing health IT infrastructure, and the work of existing interoperability initiatives, will help accelerate nationwide efforts, without disrupting the significant progress already achieved.

There are a number of existing initiatives which address different aspects of interoperability, and which are making substantial progress. We encourage ONC to engage in existing open, transparent, public-private initiatives, such as Carequality, which are already convening diverse stakeholders throughout the health IT ecosystem. Carequality, for example, has already facilitated consensus and is implementing nationwide rules of the road that will serve as the underpinnings for nationwide interoperability that will support many if not all of the use cases contemplated in the interoperability road map. Leveraging open, transparent, inclusive, public-private initiatives such as Carequality would jump-start ONC's strategy and build upon the existing momentum.

## **Shared Governance and Coordination**

We agree that a shared governance model can enable stakeholders to make collective decisions. Prior to establishing a governance mechanism, however, we believe additional clarity is needed regarding what and who would be governed. For instance, does ONC wish to govern the data holders who request / receive data, the connections between data holders and networks, connections between networks, or all health information exchange?

In order to be effective, a governance process must be trusted. Trust develops when stakeholders feel represented and empowered and when they see that the governance process addresses their concerns. We do not believe that a top-down approach driven by the federal government, despite best intentions, can accomplish the level of public-private stakeholder engagement necessary.



In addition, we question whether the impediments to interoperability can be solved by governance or if other methods (e.g. convening, coordinating, communicating, etc.) would be more effective in the short-term and long-term. The groundwork for nationwide interoperability has already been laid through implementation of existing standards, pilots to support new and emerging standards, and a framework of data sharing network policies and trust arrangements, as well as interoperability frameworks to support sharing across networks. There is increasing convergence and coordination among existing interoperability initiatives (e.g. HER|HIE Interoperability Work Group, Healthway, etc.). We believe, that with ONC's leadership, these initiatives could be knitted together into a clear, cohesive, coordinated effort.

We believe that the broader health IT community should identify the specific capabilities which require uniformity at the national-level and coordinate and build consensus around those issues. The actual governance structure and process should be based upon the issues that warrant national-level coordination.

To that end, we recommend that ONC maximize its unique role to convene and coordinate across existing standards development organizations (SDOs) and interoperability initiatives to foster consensus on the specific issues that need to be addressed at a national-level. Then, ONC may assess whether those issues are best addressed by coordination, communication, engagement or governance.

## **Building Blocks to Support a Multitude of Use Cases**

We agree that interoperability objectives should be driven by high-value use cases, and offer those that have been the focus of our work. We suggest that the 56 use cases proposed for consideration in Appendix H of the Roadmap can be grouped and prioritized to be more achievable, reduce redundancy, and align with those use cases that Healthway, IHE, and others have identified as high-value. For example, many of the use cases would rely on underlying core functionality (e.g. request/receive, transmit, publish / subscribe) which could be used for a multitude of purposes, users and types of data. It may be helpful to group the use cases by function since multiple use cases could be enabled by a common set of underlying capabilities.

## **Patient Matching**

The ONC should encourage the use of a minimally acceptable set of standardized attributes for patient matching and then convene industry to identify a list of patient matching attributes. The list advanced in the Interoperability Roadmap is a good starting point, but needs further refinement. For example, it should be augmented with pediatric demographics to help with that vulnerable population. In addition, historical names should be added, phone number types are useful (e.g. work vs. mobile vs. home) in some approaches. Data quality issues must be addressed, as must data completeness issues. Finally, a holistic approach should be used that takes into account issues such as human workflow motivators which, if not considered, often result in suboptimal use of software systems.



The ONC should also recognize that it takes time to align health systems across organizational boundaries. The use of existing industry standards for patient matching trait exchange can make this alignment process easier and increase the rate of alignment.

There are a number of examples in large-scale production today (e.g. eHealth Exchange) where, in general, patient matching across organizational boundaries is working well. The ONC should include those within the Roadmap as a baseline to improve upon.

## **Certification and Testing**

We agree that stakeholders need assurance that the health IT systems that they purchase and/or use are interoperable. Equally important is having clear expectations regarding what level of testing and certification will actually result in interoperability. Today, there are several different, but complementary testing and certification programs. We would encourage ONC to leverage testing and certification programs supported by industry and to coordinate across these efforts to help align and address potential gaps. In addition, it would be beneficial to distinguish the different levels of assurance of interoperability.

In addition, we believe that interoperability can be aided when testing is based upon well-vetted standards, specifications, implementation guides, and test tools.

We do not believe that current testing tools are sufficient. Testing tools are a national priority that should be invested in by the ONC and stakeholders. We encourage ONC to convene work on a testing tool strategy to help ensure ONC sponsored test tooling efforts are part of a national ecosystem that minimizes duplication and assures there are not gaps. And finally, the ONC should encourage a closed loop process from testing to refinements of tooling to ensure incremental improvement of testing tools as new knowledge is gained.

## **Leveraging Incentives to Promote Interoperability**

A supportive business and regulatory environment can encourage interoperability. Ubiquitous interoperable exchange of health information will be fueled when incentives align, in particular changing payment models from fee-for-service to value-based care.

## **Summary Recommendations**

Healthway makes the following specific recommendations to ONC as we work collaboratively toward achieving the nation's interoperability objectives – safer, more efficient healthcare services in an environment where care delivery and payment models are evolving:

- Leverage the market, and engage in existing public/private, multi-stakeholder processes working on different aspects of interoperability. Each stakeholder group should have clearly defined roles,

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responsibilities, and deliverables, with government engaging and coordinating to ensure that we achieve our shared objectives.

- ONC should convene and coordinate among stakeholders to accelerate standards development efforts, as well as efforts to develop and maintain implementation guides. Properly coordinated, the collaborative and complementary actions of the public and private sector efforts will achieve a sophisticated level of interoperability.
- Federal involvement is welcomed and encouraged. Federal oversight should be limited to a thin layer of coordination, participation in standards development, and recognition of collectively developed solutions.

We strongly value the ability to share data across the care continuum. Working together with ONC and other federal partners, we can make great strides toward achieving interoperability.

Kind regards,



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Healthway, Inc.



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