

April 3, 2015

Karen B. DeSalvo
National Coordinator for Health Information Technology
Department of Health and Human Services
200 Independence Ave, S.W.
Washington, D.C. 20201

Re: ONC proposed draft: Connecting Health and Care for the Nation, a Shared Nationwide Interoperability Roadmap

Dear Coordinator DeSalvo:

The National Transitions of Care Coalition (NTOCC) appreciates the opportunity to comment on the proposed Office of the National Coordinator for Health IT (ONC) Nationwide Interoperability Roadmap.

NTOCC is a non-profit organization of leading multidisciplinary health care organizations and stakeholders dedicated to providing solutions that improve the quality of health care through stronger collaboration between providers, patients, and family caregivers. The organization was formed in 2006 to raise awareness about the importance of transitions in improving health care quality, reducing medication errors, and enhancing clinical outcomes among health care professionals, government leaders, patients, and family caregivers.

NTOCC offers the following comments for your consideration:

NTOCC Applauds ONC for Recognizing the Importance of Health IT for Coordinated Care

As you are well aware, patients—particularly the elderly and individuals with chronic or serious illnesses—face significant challenges when moving from one care setting to another within our fragmented health care system. Poor communication during these transitions can lead to confusion about the patient’s condition and appropriate care, duplicative tests, inconsistent patient monitoring, medication errors, delays in diagnosis, and lack of follow through on referrals. These failures create serious patient safety, quality of care, and health outcome concerns.

As ONC seeks to create a trusted environment for collecting, sharing, and using electronic health information, NTOCC would like to offer its expertise as a group of individuals from across the care continuums who are committed to improving transitions of care for patients and their families. One of NTOCC’s seven essential elements is the importance of information transfer. For care transitions to improve, communication infrastructure must include timely feedback and feed-forward of information by utilizing specific communication models that support consistent and clear communication among healthcare practitioners and caregivers.

NTOCC believes that the capacity for health information technology (HIT) to improve communication and information sharing will help address the threats to safety and quality of care during care

transitions. In order for HIT to make a difference in transitions of care, the technology must incorporate several crucial elements, including standardized processes, mandatory performance measures, and established accountability for these processes among the health care providers coordinating a patient's care. NTOCC believes that interoperability among the various technology systems—such as the administrative systems, medical record systems, diagnostic tools, transcription, and security, and others—is critical for effective transitions of care. Without addressing each step, the promise of HIT's effect on overall transitions of care improvement will not be realized.

As such, NTOCC strongly supports ONC's goal to leverage HIT to increase the quality of health care while lowering the cost of health care. ONC's goal of "ensuring providers and individuals can send, receive, find and use a basic set of essential health information" by 2017 aligns with NTOCC's goal of improving transitions of care across the health care spectrum.

NTOCC has long advocated that central to ensuring an effective transition from one care setting to another is the communication of clear, accurate, and timely information between providers, patients, and family caregivers. In today's health system, most patients and family caregivers are not encouraged to play an active role when a transition in their care occurs, even though they are often the only constants throughout the transition. NTOCC strongly believes that patients and family caregivers should be empowered to take an active role when a care transition takes place. To do this, patients and family caregivers must have the necessary information and tools to effectively manage their own health. Making health information available to patients within 24 hours ensures that patients and their caregivers can work with their providers to make timely and accurate decisions about their follow up care.

NTOCC encourages ONC to carefully consider the needs of the patient and caregivers as they move through the care continuum. NTOCC appreciates the focus of empowering individuals as a principle of interoperability and agrees that patient centered care requires the patient to have the tools to effectively manage their healthcare. However, as ONC creates interoperability for our patients who have chronic conditions, interoperability among providers is also vital. Another one of NTOCC's seven essential elements is the shared accountability across providers and organizations. Examples of this include a clear and timely communication of the patient's care plan from one health care provider to the next. There should always be a health care provider responsible for the care of the patient and electronic health records could play a large role in moving this forward. There should be a clear transition from one health care professional to the next with clear places of accountability across the different levels of care.

NTOCC appreciates the Agency's attention to these important issues and shares your commitment to improving outcomes for patients, especially the chronically ill, as the nation transitions to a fully interoperable health it system. Please consider us as a resource on any of the topics discussed above and thank you for the opportunity to provide these comments. Should you have any questions or need further clarification please contact Jessica Layson at JLayson@vennstrategies.com.

Sincerely,



Cheri Lattimer

Executive Director