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| <p style="text-align: center;">Private Sector Stakeholder Commitments Pledge “Connect for Care”</p> |
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CommonWell Health Alliance Pledge

We share the principle that to achieve an open, connected care for our communities, we all have the responsibility to take action. To further these goals, we are pledging to the following commitments to advance interoperability among health information systems enabling free movement of data, which are foundational to the success of delivery system reform.

Three interoperability commitments:

1. *Consumer access: To help consumers easily and securely access their electronic health information, direct it to any desired location, learn how their information can be shared and used, and be assured that this information will be effectively and safely used to benefit their health and that of their community.*

CommonWell perspective: From inception, CommonWell has always been about putting the consumer at the center of health data exchange. We have built a person-centric infrastructure for nationwide health data exchange.

- Our mission is to make person-centered interoperability a ubiquitous and low-cost national utility available to all individuals and the people who care for them.
- We are committed to enabling these consumers and caregivers to access this information for care and treatment, as desired and authorized by the individual.
- Our APIs will enable a broad array of tools and applications – including but also far beyond the EHR – that help consumers and their caregivers to easily and securely access electronic health information regardless of where care occurs.

2. *No Blocking/Transparency: To help providers share individuals’ health information for care with other providers and their patients whenever permitted by law, and not block electronic health information (defined as knowingly and unreasonably interfering with information sharing).*

CommonWell perspective: We have built the technology and associated policies that break down the barriers to interoperability and mitigate the technological and operational silos that block the flow of electronic health information.

- We are already demonstrating this commitment by enabling millions of transactions to flow across the thousands of provider sites that are already live on our network, with thousands more to go live throughout this year and the next.
- As new tools, apps, and applications connect to our infrastructure, a broader array of caregivers across the care continuum – including consumers, providers, social workers, EMTs, medical technicians, and other authorized caregivers – will be able to securely and immediately access the data that has been denied from them due to the operational barriers of the past.

3. *Standards: Implement federally recognized, national interoperability standards, policies, guidance, and practices for electronic health information, and adopt best practices including those related to privacy and security.*

CommonWell perspective: We have built a functioning vendor-neutral network that scales interoperability nationally, and operationalizes federal and industry-recognized standards for interfaces, transactions, data, policies and practices.

- We are already demonstrating our commitment by leveraging standards recognized in Meaningful Use and from public/private collaborative efforts, including several of those developed by ONC, the S&I Framework, the Argonaut Project, HL7, IHE, W3C, and others.
- We will adopt the applicable best practices, including but not limited to those related to privacy and security, in order to facilitate safe and secure sharing of electronic health information.
- As an innovator building a real-world functioning service, CommonWell is committed to utilizing technologies that enable person-centric information exchange. At times, these technologies may precede *federal recognition*, but are nonetheless objectively appropriate technologies to achieving our mission. For example, we started utilizing FHIR DSTU1 in 2013, more than a year before it became a federally recognized standard. We subsequently contributed our learnings to inform the subsequently-recognized FHIR DSTU2 standard.
- Whether federally recognized or not, we publish our specifications to the public domain, so that they can be reused and improved upon by the healthcare community. Our mission is to operationalize person-centered data exchange nationwide, regardless of where care occurs.