HITAC/ONC Testimony – The Sequoia Project, Inc

- Introduction
- The Sequoia Project, Inc. Mission
 - Advance health information technology interoperability for the public good
- During this presentation, we will provide background and insights to HITAC for potential recommendations to ONC

Background: PULSE and PULSE COVID

- Sequoia worked with the ONC and Audacious Inquiry to establish the PATIENT UNIFIED LOOKUP SYSTEM FOR EMERGENCIES (PULSE) in response to the need for a tool for volunteer clinicians and others to have relevant and timely access to health information to support those displaced from their homes or seeking care in alternative sites during declared emergencies.
- PULSE COVID was created after identifying public health data needs during the pandemic: patient demographics, admitting information, comorbidities, ventilator usage, and other key pieces of clinical information in order to facilitate patient monitoring, case management and care coordination.
- PULSE AND PULSE COVID are currently connected to the eHealth Exchange as a national network and now more broadly to other health information networks via the Carequality Interoperability Framework



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Maximize and leverage existing information technology infrastructure during declaring emergencies:

- Enable public health access to information via existing health information networks

Address impediments to information sharing with public health

- Public health needs access to real time patient level clinical data from HIPAA covered entities for treatment, care coordination, case management and surveillance in order to address the COVID-19 emergency
- Public health should be able to leverage existing health information networks which use IT standards adopted by ONC, such as the C-CDA
- Provider organizations must abide by the HIPAA minimum necessary requirements for public health disclosures need assurance that clinical data contained in C-CDAs and other electronic documents can be released for public health purposes
- Health care providers need assurance that sending a C-CDA, equivalent electronic document or related electronic data to public health is consistent with the minimum necessary requirements under HIPAA
 - Facilitates timely sharing of information with public health
 - Reduces burden on health care organizations allowing them to utilize existing infrastructure



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• The Recommendation: Encourage OCR to amend existing guidance regarding public health disclosures:

General Considerations: Except when required by law, or for treatment disclosures, a covered entity must make reasonable efforts to limit the information used or disclosed under any provision listed above to that which is the "minimum necessary" to accomplish the purpose for the disclosure. 45 CFR 164.502(b). During the duration of the COVID-19 Public Health Emergency, the submission of a C-CDA, equivalent electronic document or related electronic data will meet the minimum necessary threshold for a public health disclosure.

Address immediate and long-term needs to support the public health mission during an emergency:

- Immediate deploy PULSE COVID to public health authorities requires little/no lift
- Long term- ONC convenes technology providers, HINS, public health, related associations, etc. to focus efforts on evaluating public health systems and address gaps in infrastructure and systems
- Continue to evaluate information sharing policy impediments

A National Emergency Warrants a National Response

