

April 1, 2014

Karen DeSalvo, MD National Coordinator for Health Information Technology Department of Health and Human Services 200 Independence Avenue, S.W. Washington, DC 20201

Dear Dr. DeSalvo:

This transmittal letter presents the recommendations of the Health IT Policy Committee as approved on March 11, 2014. Draft recommendations were prepared by the meaningful use workgroup (MU WG) with input and feedback from the Health IT Policy Committee (HITPC), Health IT Standards Committee, professional associations, and members of the public.

Meaningful Use Workgroup Charge

The meaningful use workgroup was charged with providing recommendations to the HITPC on how to define Meaningful Use Stage 3.

Background

Since February 2012, the meaningful use workgroup held over 125 public meetings to discuss Meaningful Use Stage 3. A request for comment (RFC) was released in November 2012. There were 606 responses received from a diverse mix of stakeholders. These comments were used to inform and update the workgroup's recommendations.

The workgroup also held or participated in a number of hearings on the following topics: patient generated health data, clinical documentation, implementation and usability, care planning - advanced directives, lessons learned from accountable care organizations, and stage 2 experience from providers and vendors related to the transition of care and the view, download, transmit objectives.

Additional feedback was also solicited from vendor organizations (e.g., EHRA) to understand the development work needed to implement the recommendations.

Standards maturity feedback was sought from the Health IT Standards Committee throughout the workgroup's progress towards recommendations.

The final recommendations from the meaningful use workgroup represent a balance of perspectives from across HIT stakeholders.

Recommendations

The meaningful use workgroup presented draft recommendations to the Health IT Policy Committee on February 4, 2014, and final recommendations on March 11, 2014. The recommendations aim to balance the realities of the current state of the market with the goal of using HIT to improve outcomes. It has been difficult to strike this balance, but for the most part, HITPC members felt that the MU WG was successful. A few HITPC members felt that the recommendations could overly burden providers, while others felt that the recommendations did not go far enough to enable the use of the HIT to improve outcomes. The HITPC approved the recommendations are embodied in the attached Word document that includes the concerns of a few HITPC members, as well as objectives that were considered for inclusion but were ultimately removed from the final set of recommendations.

While the MU WG recommendations were approved by the HITPC, the MU WG plans to continue to solicit data and feedback so they can further improve the recommendations when it responds to the NPRM in the fall. The MU WG is planning a listening session in May 2014 where they will invite the public and HIT stakeholders to share their feedback. A task force has also been established on the HIT Standards Committee to provide additional feedback related to the maturity of standards and the development effort needed for implementation. All of this feedback will be consolidated in response to the Meaningful Use Stage 3 NPRM published by CMS.

In addition to the MU WG Meaningful Use Stage 3 recommendations, a number of other HITPC workgroups have also provided recommendations and are included as attachments.

We appreciate the opportunity to provide these recommendations to inform the development of Stage 3 of Meaningful Use.

Sincerely yours,

/s/

Paul Tang Vice Chair, HIT Policy Committee

Attachments: Stage 3 Recommendations

- Meaningful Use Workgroup
- Privacy and Security Tiger Team
- Information Exchange Workgroup
- Quality Measure Workgroup