

# IXTF Hearing

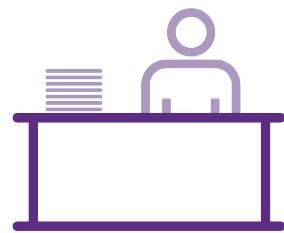
May 6th

## BARRIERS TO INTEROPERABILITY



### 1. Regulatory Fear (Particularly Around Patient Consent)

Need to clarify that (1) HIPAA allows for data exchange for the purpose of treatment, and (2) which states have patient consent laws that supersede HIPPA



### 2. Compliance Driven Innovation

EHRs product roadmaps are dominated by regulation (MIPS, formerly MU3 represents 95% of a competitors product roadmap!) instead of by the market



### 3. Lack of Proper Market Forces

Fee for service medicine doesn't demand clinical interoperability. In fact, hospitals we've tried to interoperate with often purposely keep data out of the official "legal record"

The HIT industry is currently aiming to solve interoperability problems in spite of these barriers

<b>Barriers</b>	<b>Detail</b>	<b>Industry Collaborative</b>
<b>Technical</b>	No way to identify patients in other care settings without point-to-point interfaces	 commonwell HEALTH ALLIANCE
<b>Technical</b>	Improving CCDA spec beyond MU2 validators (i.e. treat hidden meds differently)	 commonwell HEALTH ALLIANCE
<b>Legal/Governance</b>	Legal/governance complexity around the sharing of clinical data	 carequality