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Coordinator, Office of the National Coordinator for Health Information Technology
Chair, Health IT Policy Committee

Paul Tang, MD, MS
Chief Innovation and Technology Officer, Palo Alto Medical Association
Vice Chair, Health IT Policy Committee

Jacob Reider, MD
Chief Medical Officer, Office of the National Coordinator for Health Information
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Chair, Health IT Standards Committee

John D. Halamka, MD, MS
Chief Information Officer, Beth Israel Deaconess Medical Center
Vice Chair, Health IT Standards Committee

Dear Drs. DeSalvo, Tang, Reider and Halamka:

As the federal Health IT (HIT) Policy and Standards Committees conduct their October 15 joint meeting, the eHealth Initiative (eHI) wants you to be able to consider and leverage our innovative, important and impactful work on the eHI [2020 Roadmap](#), discussed in more detail below. This work both supports and expands on your Committees' discussion themes about how to better connect health and care, as well as successfully transitioning to an interoperable HIT infrastructure. We stand ready to be called upon by your Committees to review and comment on new policy and technology ideas. As you know, eHI is a valuable partner in driving private sector consensus. We look forward to working together with you to advance the cause of better health care for all Americans.

As you may know, this year eHI brought together the most influential leaders from across the healthcare spectrum --including over 150 C-level executives and some of America's leading policy experts -- to help solve critical national issues related to health data use and technology. Ongoing inputs from these discussions are embodied in our *2020 Roadmap*. This evolving document will be refined over the next six months and outlines key multi-stakeholder Health IT imperatives in the areas of:

- Clinical and Business Motivators
- Data Access & Privacy

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You can view the [Recommendations from Executive Summit](#) here. Specific to your discussions this week, **we feature in this letter some key observations and draft recommendations of the 2020 Roadmap Interoperability Workgroup below.** I want to emphasize that Roadmap deliberations are midcourse. However, these draft recommendations provide insight about multi-stakeholder priorities with national significance.

2020 Roadmap and Interoperability's Future

Suggested Short-term Strategic Tasks

The following were suggested as potential tasks for the eHI *2020 Roadmap* Interoperability Workgroup to tackle:

- Better define the business case(s) and value of interoperability;
- Drive industry-wide consensus on how to measure and quantify current and future interoperability states;
- Identify needed interoperability use cases, champions and private sector role in driving development;
- Identify public and private sector roles in interoperability;
- Outline a interoperability public education campaign;
- Explore innovative private sector operational test processes, tools and harnesses;
- Emphasize to government that certification and meaningful use should be focused around interoperability, patient engagement and aligning quality measures;
- Ask in terms of interoperability, what data should be available everywhere, regardless of where the patient is and which of these elements can the market drive? Recognize that such data is used for primary and secondary purposes and that the data element must be standardized to support both.

eHI's *2020 Roadmap* Interoperability Workgroup participants generally agreed that healthcare in the future will be:

- Personalized;
- Patient-centered;
- Socially networked;
- Mobile, sensed and wireless;
- Supported by sophisticated, big data analytics;
- Customized via an individual's unique genetic profile; and
- Based increasingly on patient-reported and open-source data that travels across global boundaries.

Given that the *2020 Roadmap* is forward-looking, eHI's *2020 Roadmap* Interoperability Workgroup participants outlined some fundamental outcomes could be enabled by the future of interoperability:

- *A patient-centric healthcare system* in which patients have easy electronic access to their data and data can follow them across healthcare encounters regardless of location or institution;

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- Open, secure, *standards-based exchange that has demonstrated value*;
- True *interorganizational interoperability*;
- Increased ability to *meaningfully access and use data*;
- An *acceleration of personalized medicine* and a reduction in the time required to move from practice to evidence that can be shared across the healthcare system; and
- Effective *global data transfer*, particularly for purposes of research.

A goal of our most recent discussion on September 4 was to draft an initial set of principle-based recommendations that will be integrated into the interoperability section of the eHI *2020 Roadmap*. These consensus recommendations developed by the Interoperability Workgroup and presented at the eHI Executive Summit are below:

- Both the government and private sector have critical roles to play in interoperability. The private sector needs to become more engaged in solving interoperability challenges, particularly in the area of standards development and testing to ensure that data follows the patient for clinical and health purposes. Government needs to continue to be active in providing guidance and benchmarks that raise the bar in almost all building block areas of health care.
- Nationwide interoperability should be defined in terms of the interoperability functions that should be universally available, such as automation of key exchange processes.
- Patients' control of their data can help to overcome some existing barriers to interoperability, such as privacy and system integration issues.
- Tactical approaches to resolving state variation in privacy laws should be examined.

2020 Roadmap Workgroups will meet later this fall and convene again at the **2015 Annual Conference on February 4-5** in Washington. During this time, overarching Roadmap deliberations will focus on:

- Identifying key resources the federal and state governments need;
- Private sector actions needed to implement recommendations identified by the Roadmap (People, Process, Technology);
- Identifying what levers the private sector can pull to make it happen; and
- Identifying areas where the private sector still needs to build consensus.

All discussions will be built around how to drive a more effective, patient-centric health care system.

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In closing, we would be happy to answer questions or provide more information regarding the *2020 Roadmap* and what is detailed in this letter. The eHealth Initiative looks forward to working with you on a truly public-private sector effort to improve health care delivery in this country.

Sincerely,

//signed//

Jennifer Covich Bordenick
Chief Executive Officer
eHealth Initiative and Foundation