Connecting Health and Care for the Nation: A Shared Nationwide Interoperability Roadmap version 1.0

Calls to Action and Commitments for People and Organizations That Govern, Certify, and/or Have Oversight

Stakeholders include: Governing bodies and accreditation/certification bodies operating at local, regional, or national levels that provide a governance structure, contractual arrangements, rules of engagement, best practices, processes and/or assess compliance.

People who receive care or support the care of others		People and organizations that deliver care and services	
Organizations that pay for care		People and organizations that support the public good	
People and organizations that generate new knowledge, whether research or quality improvement		People and organizations that provide health IT capabilities	
People and organizations that govern, certify, and/or have oversight		People and organizations that develop and maintain standards	

Goal for 2015-2017
Send, receive, find and use priority data domains to improve health care quality and outcomes

Calls to Action are opportunities where this group of stakeholders can take the lead and commit to as participants. Calls to action are prioritized actions that support achievement of the milestones.

B. Shared-decision making, rules of engagement and accountability

B2.1 Public and private sector health IT stakeholders should establish shared-decision making process to address operational issues related to standards, services, policies and practices that enable interoperability, including agreement on a nationwide learning health system technical architecture, and establishing clear, consistent feedback between SDOs and implementers about implementation successes and limitations, as well as supporting non-certification related testing of technical standards.

B2.2 Participants in the shared decision making process should agree on a nationwide technical architecture for an interoperable learning health system.

B2.3 Federal agencies that provide or pay for health services should align their policies for interoperability with ONC's policy guidance.

B2.4 Existing and future data sharing arrangements between organizations should align with ONC's policy guidance.

B2.5 ONC, in collaboration with stakeholders, should define a policy framework for exchange of patient-generated health data and pilot it.

B. Shared-decision making, rules of engagement and accountability

B2.6 Participants in the shared decision making process should prioritize use cases based on a balance of national priorities and local needs.

B2.7 Participants in the shared decision-making process should work with ONC to establish metrics for monitoring and assessing nationwide interoperability and methods for data collection.

B2.8 The shared decision-making process should select standards for specific use cases/functions from ONC's most recent finalized Interoperability Standards Advisory (ISA) when the ISA contains relevant standards.

B2.9 Health IT developers, certification programs and governing bodies should look first to ONC's most recent finalized Interoperability Standards Advisory when making decisions about the standards they will use to enable specific interoperability functions and use cases.

D. Verifiable identity and authentication of all participants

D2.3 Health care industry stakeholders should begin leveraging the Federal Identity, Credential, and Access Management (FICAM) Roadmap and Implementation Guide for identity management standards and best practices.

D2.5 NIST, OCR, CMS, CDC, FDA and other stakeholders should collaborate regarding approaches for identity management, including HIPAA guidance for remote identity, authentication and access management.

F. Consistent understanding and technical representation of permission to collect, share and use identifiable electronic health information

F2.4 ONC, standards development organizations, technology developers and appropriate stakeholders should harmonize technical standards and implementation guidance for consistently capturing, communicating and processing Basic Choice across the ecosystem.

H. Consistent data semantics

H2.2 Public and private stakeholders should work with SDOs to define a standard approach to federated distribution of centrally maintained code sets, including ongoing support for publicly available, API-enabled repositories like the Value Set Authority Center (VSAC).

M. Health care directories and resource location

M2.3 Through public, transparent processes, stakeholders should prioritize the participants and services that are to be discoverable using resource location and identify a near-term goal for the first small set of resources to be included in initial implementations, such as Direct addresses, electronic service information, web addresses, and multiple practice locations.

Commitments are prioritized actions that stakeholders have publicly committed to fulfilling. Commitments support achievement of the milestones. The following is a list of commitments where federal agencies have committed to working with your stakeholder group. We look forward to working with you to achieve them.

C. Ubiquitous, secure network infrastructure

C3.2 ONC will work with payers to explore the availability of private sector financial incentives to increase the rate of encrypting, starting with discussions with casualty insurance carriers who offer cybersecurity

E. Consistent representation of authorization to access electronic health information

E3.1 ONC, in collaboration with stakeholders, will work to identify the technical standards and means by which a user's authority can be clearly represented among exchange partners.

E3.3 ONC will convene workshops or listening sessions on the types of electronic health information sharing that may be required, by role, to support value-based purchasing. A major goal of the workshops will be to evaluate how close the nation can come to achieving its interoperability goals through existing privacy rules.

F. Consistent understanding and technical representation of permission to collect, share and use identifiable electronic health information

F3.8 ONC will convene a group of industry stakeholders to determine if it is possible to create an open source mapping of the codes that capture clinical care to sensitive health conditions such as mental health. These mappings can serve as the foundation for common rules to be used by rules engines for determining what data may be shared based on individual permission.

H. Consistent data semantics

H3.1 ONC will promote and participate in collaborative processes to align SDOs and technology developers on the implementation and use of vocabularies, code sets, value sets and structure necessary to consistently represent and maintain the meaning of data elements associated with priority data domains across systems.

M. Health care directories and resource location

M3.3 ONC and other certification bodies will determine how to support provider directories through certification processes.