



“Connect for Care” Pledge

The Healthcare Leadership Council shares the belief that to achieve an open, connected care for our communities, we all have the responsibility to take action. To further these goals, we are pledging to the following commitments to advance interoperability among health information systems enabling free movement of data, which are foundational to the success of delivery system reform.

Three interoperability commitments:

1. **Consumer access**: To help consumers easily and securely access their electronic health information, direct it to any desired location, learn how their information can be shared and used, and be assured that this information will be effectively and safely used to benefit their health and that of their community.

The Healthcare Leadership Council has long supported consumer access to their electronic health information. The active, involved consumer is an important step toward improved health outcomes and better value in healthcare.

2. **No Blocking/Transparency**: To help providers share individuals’ health information for care with other providers and their patients whenever permitted by law, and not block electronic health information (defined as knowingly and unreasonably interfering with information sharing).

In 2014, the CEOs of the Healthcare Leadership Council declared their opposition to technology products that block or otherwise inhibit health information exchange. We support efforts by policymakers to address products that intentionally block the sharing of information, or that create structural, technical, or financial impediments or disincentives to the sharing of information.

3. **Standards**: Implement federally recognized, national interoperability standards, policies, guidance, and practices for electronic health information, and adopt best practices including those related to privacy and security.

The members of the Healthcare Leadership Council believe that any interoperability incentives should be technology neutral and measured through outcomes, rather than based on the adoption or use of specified technologies. We support the creation and use of national standards as a means to facilitate the accurate and timely sharing of critical health information. The creation of standards must not undermine the creation and deployment of new and innovative technologies.



STATEMENT ON INTEROPERABILITY AND EXCHANGE OF PATIENT INFORMATION

The Healthcare Leadership Council (HLC) has long served as the innovative voice of healthcare in the United States. HLC members recognize the increasing importance of efficient, timely transfer of patient information throughout the healthcare system, enabling care to be delivered to the patient more quickly and guided by meaningful data. We believe in a future in which health organizations work not as “silos” of information, but as an interoperating health system using shared data to accelerate progress in medicines, technologies, and healthcare delivery.

HLC CEOs, who are leaders in every healthcare field, have agreed upon the need for an interoperable health IT infrastructure that takes shape in a way that is both beneficial to consumers and workable for industry. It is our hope that these recommendations support the work of Congress, the administration, and other organizations working to create the health system of the future.

- We believe that policymakers should **encourage exchange of material and meaningful health data** through the use of technologies and applications that enable bidirectional and real-time exchange of health data currently residing in electronic health record (EHR) systems (e.g., open and secure API technology).
- Policymakers should also use appropriate authority to **certify only those EHR technology products that do not block or otherwise inhibit health information exchange**. The HHS Office of the National Coordinator should decertify “Meaningful Use” products that intentionally block the sharing of information, or that create structural, technical, or financial impediments or disincentives to the sharing of information.
- The federal government, in collaboration with the private sector, should **build on current and emerging best practices in patient identification and matching** to identify solutions to ensure the accuracy of every patient’s identity, and the availability and accessibility of their information, absent lengthy and costly efforts, wherever and whenever care is needed.
- Any interoperability **requirements or incentives should be “technology neutral” and focused on outcomes**—active interoperation between and among systems—rather than on adoption or use of specified technologies. It is critical that future policies do not stifle potential innovations in health system connectivity.