March 27, 2020

Don Rucker, M.D.
National Coordinator for Health Information Technology
U.S. Department of Health and Human Services
200 Independence Avenue, SW
Washington, DC 20201

Re: Draft 2020-2025 Federal Health IT Strategic Plan

Dear Dr. Rucker,

The College of Healthcare Information Management Executives (CHIME) is pleased to submit comments on the *Draft 2020-2025 Federal Health IT Strategic Plan*, which proposes an outcomes-focused roadmap to facilitate the interoperability of health care data for use by patients and their caregivers.

CHIME is a professional organization that represents more than 3,200 Chief Information Officers (CIOs) and other senior healthcare IT leaders. CHIME enables its members and business partners to collaborate, exchange ideas, develop professionally and advocate for the effective use of information management to improve the health and care in the communities they serve. CHIME members are responsible for the selection and implementation of clinical and business systems that are facilitating healthcare transformation through technology. Our members represent some of the earliest and most prolific adopters of electronic health records (EHRs) and other health IT resources. Our mission is, "To advance and serve healthcare leaders and the industry improving health and care globally through the utilization of knowledge and technology."

CHIME appreciates the opportunity to lend our perspective as ONC refines the goals, objectives, and strategies for coordinating the federal government's efforts to make individual's health care data more accessible to them and their caregivers, as well as, continuing to facilitate the transition to value-based with more transparency and accountability. The healthcare sector has evolved significantly to help shape, adapt and adopt technology to support key healthcare goals around the exchange of information, privacy, and security. While we have achieved tremendous progress, many gaps and challenges persist alongside new and emerging ones for the health care industry, providers, and patients.

CHIME supports the draft plan's overall goals and applauds the commitment to advancing these while maintaining the focus on reducing provider burden. We also believe ONC appropriately focuses on outcomes areas where you believe measurable progress is needed rather than detailed strategies around how to achieve specific health IT or technical issues. As the ONC continues to guide and coordinate the federal government's health IT efforts, we seek to ensure the strategic plan reflects the diversity of needs across the care continuum and seizes the opportunity to establish clear guidelines that are harmonized across federal programs and with the private sector. Below we identify our key recommendations and more detailed feedback is enclosed.

Our top recommendations for modifications to the draft strategy include:

- **Lead, address, _and_ support.** ONC should revise the plan to position your office, and where appropriate other federal agencies, to drive a vision and lead the work towards the draft goals. The current draft plan often emphasizes passive strategies with a "supporting" role rather than active

efforts to address problems that continue to impede interoperability, the shift to value-based care and patient and provider empowerment. There is an urgent need for coordination: a persistent gap in standards in some areas and proliferation in others, and a clear desire for harmonization in the public and private sectors underpins our recommendation.

- **Harmonize standards across federal agencies.** Federal agencies should commit to adopt and use a common set of standards for health IT. By setting this example, federal agencies will guide industry best practices by osmosis.
- **Incorporate strategies that address the entire care continuum.** The plan should specify that the goals, objectives and strategies apply in all care settings, especially for long-term, post-acute care, behavioral health which are still not adequately incorporated into federal health IT workstreams. The draft plan as written, overemphasizes primary and hospital / acute care settings and does not address the integral role and diverse needs of other care settings, where most care occurs. Of utmost importance is the patient. We must address self-management and the needs of personal health data with multiple care teams through a patient's journey.
- **Include cybersecurity objectives.** There is an urgent need to strengthen cybersecurity in the health IT sector over the course of the next strategic plan. ONC should incorporate more explicit objectives and strategies to address the cybersecurity threats. Objectives should be comprehensive from standards, vendor alignment thru education and workforce development.
- **Establish clear expectations for industry.** ONC must set the pace of the federal agencies' efforts to establish clear parameters and expectations for the collective healthcare industry to follow as it relates to an individual's health care data. The federal plan should also address strategies for the federal government to harness or collaborate with health IT industry leaders outside of government as health technologies evolve and new issues emerge. We believe innovation partners and support of incubator-like environments are one of the key investments to bend the cost curve, engage patients and improve outcomes for all Americans.
- **Advance changes to support health IT's role in value-based care**. The plan should address revenue cycle management and tax code changes, as well as harmonization of privacy rules at the state and national levels necessary for providers to make the shift from fee-for Service to Value-based care models. Providers and payers seek to accelerate value-based care models. In order to do so, organizations – providers and payer alike - are increasingly prioritizing use of health IT tools in all areas of workflow.
- **Incorporate payers and accrediting entities throughout the plan.** Payers, standards developers and accrediting entities (The Joint Commission for example) are critical to ensuring a coordinated and comprehensive approach to use of health IT. ONC must integrate these stakeholders into the objectives and strategies and minimize variation in order to achieve consolidation and reduction in administrative overhead in healthcare.
- **Maintain provider burden reduction focus.** As ONC revises and works to finalize this plan, we urge you to maintain the commitment to reducing provider burden.

Goal 1: Promote Health and Wellness

Objective 1a: Improve individual access to health information

A foundational concept for the draft strategic plan is to enable individuals to access, share and utilize their health information with their caregivers, if they wish. This draft objective, however, does not acknowledge that different strategies and resources are needed across the care continuum. CHIME urges ONC to revise the language in this objective and its strategies to incorporate the full care continuum, including long-term and post-acute care settings. Moreover, the plan and the individual agency work that flows from it, must consider that certain provider types have received incentives to adopt and use electronic health records (EHRs) and other health IT tools, while others have not.

Additionally, we urge ONC to revise the plan to include strategies that address the variability in needs, fluency and gaps for education and resources across the care continuum. For example, providers and consumers need education on the use of application programming interfaces (APIs). Those who have

resources will continue to be better situated to understand these critical health IT concepts unless there is a proactive strategy to continuously tackle these gaps in knowledge and resources for lesser-resourced providers. An investment in industry education sets a tone of consistency which is incredibly important for the patient/consumer.

Objective 1b: Advance health and safety practices through health IT

ONC's draft plan acknowledges that we have not yet realized health IT's full potential to improve overall population health and promote safety. We agree with ONC's statement and urge the office to develop a comprehensive plan that incorporates the full spectrum of tools and resources that are needed to accelerate this movement. Components of this plan could include KPIs, data standards, recommended workflows, education and training.

We recommend that this objective include strategies to align with revenue and tax policies and incentives. For example, ONC should include a strategy to advance revenue cycle management and coordination, including Medicare/Medicaid reimbursement models. Specifically, address how revenue flow can support the transition to value-based care. A strategy to analyze use of care coordination billing codes and monitoring use of health IT technologies (e.g. patient and provider reporting of health IT use) can inform whether additional reimbursement changes are needed to incentivize use of health IT to achieve these goals. Similarly, this objective should include a strategy to assess an individual's personal investment in promoting their health behaviors, which is consistent with trends in adoption and overarching goals to empower patients (e.g. use of flexible savings accounts).

Objective 1c: Integrate health and human services information

CHIME supports the objective to integrate health and human services information. While we agree with the strategies ONC listed, we recommend that ONC make the following changes:
- Specify that providers, industry and other interested entities require standards for the assessment of social determinants of health (SDoH) to ensure this information can be meaningfully incorporated into her functionality: documentation, reporting, interoperability and analytics/reporting. We appreciate that the U.S. Core Data for Interoperability (USCDI) can provide a glide path for this. V.1 of the USCDI recently adopted by ONC as a new standard does not include SDOH, therefore, we recommend ONC prioritize this in the next version and drive a strategy to harmonize standards around SDOH.
- With other federal agencies, expand, reinforce and support strategies that allow for improved data capture and future support around SDoH needs for consumers.
- Expand the strategy to include development of incentives/charges to capture and integrate data that is needed for the social determinants of health. Simply attempting to capture data will leave out critical providers and entities that do not have aligned incentives and resources to engage in this effort.

Goal 2: Enhance the Delivery and Experience of Care

CHIME supports ONC's goal to enhance the delivery and experience of care. We urge ONC to broaden its objectives and strategies to incorporate the entire care continuum. Further, we recommend the federal plan address the need to assess the revenue cycle model, including Medicare and Medicaid reimbursement policies. Aligned and/or new incentive structures underpin this objective and are critical towards achieving objectives through the plan.

Objective 2a: Ensure safe and high-quality care through the use of health IT

We recommend the following changes to the strategies for this objective:
- We agree with ONC's strategy to "Optimize care delivery by applying advanced capabilities like machine learning, evidence-based clinical decision support, and smart dashboards and alerts." We believe, however, that to be successful, the federal plan must propose a bold strategy around

dissemination of information on effective health IT practices and tools that support the care and safety of patients. We call on ONC, working with the FDA, to lead and coordinate a strategy that will strike a careful balance between proprietary issues for new health technologies and facilitating access to care that is best for patients. Such a strategy should acknowledge and assign appropriate value for proprietary tools associated with machine learning.

- We recommend this objective include a strategy to drive federal agencies to align measurement definitions and specifications for data across the federal programs for clinical and administrative data. For example, the strategy should more explicitly link electronic clinical quality measure (eCQM) data work to other work on measures, such as the HEDIS measures. Our members also report that many measures are outdated and not supported by eCQMs.
- We furthermore urge ONC to revise the strategy to include the following, "Establish identity solutions that improve patient matching across data systems, which could include a Unique Patient Identifier (UPI.)" The federal government is best positioned to drive our nation towards a *solution* for identification of patients.
- We furthermore continue to believe more emphasis needs to be placed on the ability of providers' ability to be able to ingest data. To date, much of the focus continues to be on exporting data. This will better support the overall care continuum. We address this issue in depth on page 33 of the letter submitted to CMS and ONC in May of last year.

Objective 2b: Foster competition, transparency and affordability in healthcare

As previously noted, CHIME encourages ONC to make clear its objective and strategies apply to the entire care continuum, including long-term and post-acute care.

- CHIME also requests ONC strengthen and clarify the strategy, "Support efforts to merge administrative and clinical data streams to have real-time financial data at the point of care." The federal strategy cannot simply "support" these efforts and expect success. Instead, the strategy should articulate a federal initiative to develop and lead these efforts.
- Further, we urge ONC to add clarifying information for the scope of this strategy. For example, the plan should indicate if this "merger" encompasses long-term , ambulatory , home health services as well as alternative sites of care.

Objective 2c: Reduce regulatory and administrative burden on providers

CHIME welcomes the strategic initiative to reduce regulatory and administrative burden on providers over the course of the next strategic plan. Effective strategies must be broader and more comprehensive than those in the draft plan. Alignment among health monitoring and accrediting groups across federal and private activities could be one of the most effective strategies for minimizing administrative overheard in the health care sector.

- We urge ONC to revise the plan to encourage other health monitoring and accrediting groups to join federal agencies in the harmonization of data collection and reporting requirements. The monitoring and accrediting entities are highly engaged with health care providers throughout the care continuum. Health care providers spend vast resources meeting the differing requirements, often with the same goal of improved care delivery and outcomes for all. Significant improvements in efficiency could be achieved through alignment in the accreditation reporting and monitoring processes for all aspects of care delivery

Objective 2d: Enable efficient management of resources and a workforce confidently using health IT

CHIME members continue to report the market has not solved the issues that have longed plagued EHRs, and this dynamic remains a top issue for healthcare providers. To help address this, we urge ONC to strengthen its strategies to move beyond monitoring and promoting. Instead, ONC should develop and lead as well as monitor and address the impact of health IT on provider workflows and take specific positive steps to promote the use of evidence-based automated tools.

- ONC should clarify whether it is building upon its existing education and training platform or revamping it. Our members report that new education and training is needed in several areas, including analytics, payer/claims data, eCQMs, security and privacy.
- Additionally, one of the biggest sources of frustration remains the burden and cost identified by our members due to shifting federal deadlines. We urge ONC working with their federal partners to establish realistic timelines and to consider other overlapping mandates when setting deadlines. Alignment and unified communication will better serve the collective resources engaged and dedicated to improvement of heath.

Goal 3: Build a Secure, Data-Driven Ecosystem to Accelerate Research and Innovation

While CHIME fully agrees with this goal, we recommend ONC include an objective to establish guidelines and expectations for industry's use of health data.

Objective 3a: Advance individual- and population-level transfer of health data

- CHIME supports strategies to improve harmonization of data elements and standards. We also call on ONC to make clear that the federal government will establish the "rules of the road" for industry, including expectations for behaviors, expected variances and how governance, communication and accountability themes can be strengthen. .
- CHIME strongly supports the strategy, "Improve harmonization of data elements and standards by creating a common vocabulary set to improve the consistency, integrity, and quality of data and to enable data to be effectively shared between systems using APIs." With the expectation that the harmonization is universal for all aspects of care, including self-management by the patient/consumer.

Objective 3b: Support research and analysis using health IT and data at the individual and population levels
- While CHIME supports strategies to increase use of new technologies and analytic approaches, such an expansion must be accompanied by clear guidelines for sharing proprietary tools and best practices. Further, information generated by new technologies and analytics will only be useful if they are monitored, captured and used according to a set of standards.

Goal 4: Connect Healthcare and Health Data through an Interoperable Health IT Infrastructure

Objective 4a: Advance the development and use of health IT capabilities

As capabilities for health information access, exchange, and use continue to expand, the federal plan must address the needs across the care continuum. We urge ONC to revise the strategies under this objective to incorporate the full spectrum of providers, care settings and patient/consumer needs.

Objective 4c: Enhance technology and communications infrastructure

CHIME strongly supports the plan's focus on outcomes to enhance technology and communications infrastructure. The strategic plan appropriately seeks to address broadband and the challenges small and rural providers face. CHIME also supports the ongoing focus on expanding telehealth.

Objective 4d: Promote secure health information that protects patient privacy

- Strategy 2 reads, "Implement privacy and security mechanisms as appropriate to the sensitivity of the data to help protect individuals' health data, including multi-factor authentication and encryption embedded in APIs and other technologies." CHIME notes this strategy and others in the plan do not address the complex issues associated with consent management. Consent management is needed for sensitive health data yet EHRs generally do not appropriately manage this information. We recommend ONC invest in use cases to guide health care providers and industry on consent management matters.

- Strategy 4 states the federal government will, "Provide guidance and technical assistance on policies and regulations at the federal, state, and tribal level that pertain to the secure exchange of health information and enforce such rules." CHIME recommends ONC revise the strategy to address privacy protections and security measures for <u>all</u> holders of health information, not just those entities exchanging health information.

We appreciate the opportunity to comment. We look forward to continuing to be a trusted stakeholder in ensuring ONC and its federal partners establish a forward-looking plan to meet known challenges and emergent issues using effective strategies applicable to the entire care continuum. Should you have any questions about our letter, please contact Mari Savickis, Vice President of Public Policy, at mari.savickis@chimecentral.org.

Sincerely,

Russell P. Branzell, CHCIO, LCHIME
President and CEO
CHIME