

CONNECTING FOR HEALTHSM

MARKLE FOUNDATION

A Public-Private Collaborative

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Dear Ms. Frizzera, Dr. Blumenthal, and Mr. Orszag:

An unprecedented investment of more than \$40 billion in health information technology (health IT) under the American Recovery and Reinvestment Act of 2009 has great potential to promote a new era of information-driven health care.

The pending federal rule on Meaningful Use is a rare opportunity to advance health IT in ways that improve health, increase the cost-effectiveness of care, protect privacy, and encourage innovation.

As the U.S. Department of Health and Human Services (HHS) prepares to publish its notice of proposed rulemaking on Meaningful Use to determine how providers and hospitals will qualify for health IT subsidies, the undersigned Markle Connecting for Health collaborators offer the following criteria for success based on our shared vision.

Markle Connecting for Health is a collaboration of leaders from more than 100 organizations, representing consumers, providers, insurers, industry, privacy experts and government. Our most basic agenda is to improve health and health care for patients and consumers through connectivity and information sharing,

while protecting privacy. This letter builds upon the following two broadly supported¹ Markle Connecting for Health public documents on Meaningful Use:

- [Achieving the Health IT Objectives of the American Recovery and Reinvestment Act: A Framework for ‘Meaningful Use’ and ‘Qualified or Certified’ EHR](#)² (April 30, 2009)
- [Collaborative Comments on Initial Meaningful Use Definition by HIT Policy Committee](#)³ (Released June 26, 2009, with the Center for American Progress and the Engelberg Center for Health Care Reform at Brookings)

Vision for Success of Meaningful Use

By 2015, a successful implementation of the Meaningful Use regulation would result in:

- Significant progress toward specific goals for improving health, the patient experience, and the cost-effectiveness of care — with new demands for results, transparency, and accountability.
- An alignment of value in the use and sharing of information to support better decision-making and more effective care processes across a broad range of actors using a broad range of technology solutions.
- Substantial efficiency gains and low-burden methods by which health care providers and hospitals may demonstrate their attainment of Meaningful Use criteria.
- Widespread enthusiasm for demonstrating improvements in care and outcomes that go beyond those necessary to qualify for financial payments, and sustained adoption and effective use of health IT beyond the initial stimulus period.
- A bolstered policy framework and oversight mechanisms to respect the privacy of patients’ protected health information (PHI).
- Innovations across several critical domains, including technology, care redesign, information policy, and payment for care.
- Technical requirements that respond to policy direction to prioritize basic protocols for secure exchange of information and make all required standards as simple, low-cost, and broadly implementable as possible.
- Consumer access to personal health information as a key metric for sustained Meaningful Use and as a means to elevate the consumer’s awareness and participation in meeting health reform goals.

Criteria for Success of the Meaningful Use Rule

To leverage Meaningful Use as a means to help achieve this vision for 2015, HHS should apply a set of strategic questions to its draft regulation:

¹ <http://www.connectingforhealth.org/arra/collaborators.html>

² Available online at: <http://www.connectingforhealth.org/arra/>

³ Available online at: http://www.markle.org/downloadable_assets/20090626_CollabCmtONC.pdf

1: Are there clear and achievable health and efficiency goals?

The goal of Meaningful Use under the Recovery Act is not the adoption of health IT as an end state, but rather to achieve clear health and efficiency objectives. The Achievable Vision for 2015, presented to the HIT Policy Committee⁴, is an excellent starting point that designates ambitious goals for these investments. The Meaningful Use Rule must set a trajectory of measurable targets toward a firm set of goals such as those in the Achievable Vision. In this effort, goals for health improvement should go hand-in-hand with goals for health care efficiency and cost-effectiveness.

2: Do the requirements motivate information use to improve health and cost-effectiveness of care?

Placing value on specific health improvements and cost-effectiveness targets will strengthen the need for sharing vital information in the care of patients. Several of the proposed measures will do this:

- Reducing the 30-day hospital re-admission rate.
- Reducing medication errors.
- Sharing care summary across transitions in care.
- Better management of hypertension.

In setting metrics, HHS should resist the temptation to impose too many prescriptive technology requirements. The most constructive part of the rule will define *what* needs to be achieved as opposed to precisely *how* systems must behave to achieve it.

3: Do the requirements foster patient engagement in reaching the Meaningful Use goals?

It is hard to imagine reaching significant health improvement goals without the support and participation of the American public. There is broad agreement that patient engagement should be a key component of Meaningful Use. At minimum, the individual's ability to request and obtain personal health information electronically should be supported in the requirements for "qualified or certified EHR technology" under the Recovery Act. The success of these investments will hinge not only on whether consumers have access to their personal health information but also on the extent to which consumers are engaged in meeting the broad health improvement and cost-effectiveness goals.

The requirements should not require a narrow process or deployment of a particular tool. Rather, technology and care redesign innovations should be encouraged to engage consumers more fully in planning and managing their care through a variety of approaches.

4: Do the requirements focus on information use and allow for ongoing innovation across a wide array of participants, rather than prescribing specific technology features?

The approach to standards must enable a wide array of providers with varying levels of IT adoption and support, from sophisticated integrated delivery systems to the physician in solo practice, to achieve the goals of Meaningful Use. Technology or standards requirements that are unnecessarily complex, or that fail to take

⁴ See "Meaningful Use Workgroup update [PPT - 1.63MB]" for June 16, 2009, meeting of the HIT Policy Committee at the following URL:
http://healthit.hhs.gov/portal/server.pt?open=18&objID=873878&parentname=CommunityPage&parentid=8&mode=2&in_hi_userid=11113&cached=true

into account the diverse needs of a wide spectrum of health care providers, can have the unintended consequence of narrowing participation. Care must be taken to avoid stifling alternatives or innovations that would otherwise propel more widespread adoption of health IT to improve health care quality and cost-effectiveness.

A Framework for Information Policy

Through years of collaboration tackling difficult health IT issues, Markle Connecting for Health has developed recommendations for a policy and technology approach rooted in a comprehensive framework of policies and distributed information systems that we view as a critical underpinning for successful implementation of the Meaningful Use regulation. These recommendations are described in detail in the Markle Common Framework for Private and Secure Health Information Exchange⁵ and the Markle Common Framework for Networked Personal Health Information.⁶

We are encouraged that the broad health IT policy and technology charge to HHS under the Recovery Act is highly consistent with the Markle Common Framework approach. In fact, the law strengthens privacy protections in a number of areas recommended in the Common Framework.

The link between policy goals and technology requirements can be either mutually reinforcing or in conflict. The HHS approach to standards, technology, and certification should be driven by policy objectives. To successfully implement Meaningful Use, HHS must use a comprehensive framework for privacy to develop guidance, technical requirements and regulations that clearly guide the implementation of the law. Participation will falter if consumers and health professionals do not trust that information will be handled appropriately within a robust privacy framework that includes effective enforcement.

Necessary ingredients for health IT to help improve health, reduce inefficiencies, protect privacy, and promote innovation include: deploying sound information policies, generating new evidence, improving transparency, engaging the public, and encouraging new approaches to technology, care delivery, and payment. Consumers, powered by information and information tools, should be an integral part of these new models.

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⁵ Available online at: <http://www.connectingforhealth.org/commonframework/index.html>

⁶ Available online at: <http://www.connectingforhealth.org/phti/index.html>

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