



DEPARTMENT OF HEALTH & HUMAN SERVICES

Office of the Secretary

Office of the National
Coordinator for Health
Information Technology
Washington, D.C. 20201

AUG 17 2007

Kevin J. Martin, Chairman
Federal Communications Commission
Wireline Competition Bureau
445 12th Street, SW
Washington, DC 20554

Dear Chairman Martin:

The U.S. Department of Health and Human Services (HHS) Office of the National Coordinator for Health Information Technology (ONC) was pleased to learn of the Federal Communications Commission's (FCC) rural health care funding program to enhance public and non-profit health care providers' access to advanced telecommunications and information services. We understand a pilot program will provide funding to support the construction of state or regional broadband networks and services provided over the networks. Your program aligns well with the President's goal of the widespread adoption of electronic health records (EHRs) in the country by 2014.

HHS and Health Information Technology

HHS is the United States government's principal agency for protecting the health of all Americans and providing essential human services, especially for those who are least able to help themselves. The department includes more than 300 programs, covering a wide spectrum of activities, such as health research; disease prevention; and medical preparedness for emergencies, including potential terrorism and health information technology.

In 2004, the President issued an Executive Order (EO) announcing his commitment to the use of health information technology (health IT) to reduce medical errors, increase efficiency, and provide better information for consumers and physicians. In particular, the President called for the widespread adoption of EHRs and for health information to follow the consumer. A key element in the national health IT agenda is the creation of a Nationwide Health Information Network (NHIN). The NHIN's vision is to become a "network of networks" whereby state and regional health information exchanges and other networks that provide health information services work together, through common architectures (services, standards and requirements), processes, and policies to securely exchange information.

Together, the FCC's program for broadband connectivity among health care providers and the NHIN's provision of critical patient information to clinicians at the point of care will enable vital links for disaster preparedness and emergency response, improve healthcare, population health, and prevention of illness and disease. With that in mind, it is important that organizations participating in the FCC pilot program use their resources in a manner that is consistent with the health IT initiatives being promoted by HHS.

We recommend, as further articulated in the subsequent pages, that the pilot program funding awards include information about using health IT consistent with national programs in several areas: health IT standards; certification of EHRs, personal health records (PHRs), and networks; the NHIN architecture;

the National Resource Center for Health Information Technology; the implementation of the Pandemic and All-Hazards Preparedness Act (PAHPA); and, the Public Health Information Network (PHIN).

Health information technology standards

Data and technical standards are the foundation to interoperability between systems and the vision of the nationwide health information network. Interoperability, in this instance, means the ability of different information systems, software applications and networks to communicate and exchange information in an accurate, secure, effective, useful, and consistent manner. Harmonization means the function of developing, reconciling, setting and maintaining of standards required to achieve interoperability of the structure and content of health care data, information, or concepts that are usefully exchanged or provided between and among care providers and public health authorities, and the interchange methods used to facilitate these exchanges. Competing standards, gaps in standards, lack of standards adoption, and a lack of specificity in the use of standards have made standards harmonization and systems implementation difficult, information flow problematic, and has helped to create an unstable environment for investment in clinical systems.

In 2006, the Health Information Technology Standards Panel (HITSP) was established to be a multi-stakeholder coordinating body designed to provide the process within which affected parties can identify, select, and harmonize standards for communicating health care information throughout the health care spectrum. The HHS Secretary's acceptance and planned recognition of certain HITSP Interoperability Specifications as health IT standards are in the March 1, 2007 edition of the Federal Register. Additional information about HITSP may be found at the web site: www.hitsp.org

We recommend that, where feasible, applicants selected for the FCC pilot program use health IT systems and products that meet recognized interoperability standards. Information about such standards can be found at the following resources:

1. Executive Order 13410 - Promoting Quality and Efficient Health Care in Federal Government Administered or Sponsored Health Care Programs (See Federal Register document at Attachment A and web site <http://www.whitehouse.gov/news/releases/2006/08/20060822-2.html>)
2. Notice of Availability: Secretarial Acceptance and Planned Recognition of Certain Health Information Technology Standards Panel (HITSP) Interoperability Specifications for Health Information Technology (See Federal Register document at Attachment B and web site <http://www.hhs.gov/healthit/standards/recognition/>)

Use of certified health information technology products

For many clinicians, incorporating an EHR into their practice is a daunting task; there are over 300 EHR products from which to choose; most are costly alternatives to their current business practice, and all will disrupt their current workflows. Further, EHRs pose special risks to small and rural providers, for whom resources are particularly scarce or not shared with other institutions.

In 2006, ONC funded an initiative, as a key part of the HHS health IT plan, for the development and evaluation of a certification process that would require that certified EHR products meet a set of criteria for functionality, security, and interoperability recognized by the Secretary of HHS. The Certification Commission for Healthcare Information Technology (CCHIT) is a non-profit, voluntary organization

with public and private sector representation established to certify health IT products. The CCHIT's efforts are designed to: reduce the risk of health IT investment by physicians and other providers; ensure a minimum level of interoperability or compatibility of health IT products; assure payers and purchasers can provide incentives for EHRs where the investment will address systems needs that can improve quality; and protect the privacy of patients' personal health information. CCHIT certifies health IT products such as EHRs, PHRs, and the network components through which they interoperate and share information. Additional information about CCHIT may be found at the web site www.cchit.org

We recommend that, where feasible, applicants selected for the FCC pilot program use certified health IT products. Information about such certified products can be found at web site (<http://www.hhs.gov/healthit/certification/background/>).

National Health Information Network (NHIN) Architecture

An important step toward ensuring secure information exchange across the United States requires the development of a health IT architecture. Since the NHIN will be a "network of networks," this architecture is a critical component of making exchange possible. This work is being done collaboratively with other efforts led by ONC such as certification of networks, and standards harmonization for health information exchange, as well as Federal-specific activities being completed through the Federal Health Architecture program.

ONC's NHIN initiative has developed and is evaluating prototype architectures for a nationwide health information network that maximizes the use of existing resources, such as the Internet, to achieve widespread interoperability among software applications, particularly EHRs. These efforts are also intended to spur technical innovation for nationwide electronic sharing of health information in patient care and public health settings. The results will move the Nation toward the goals of having access to information that follows the consumer and support clinical decision-making by creating a usable architecture and environment for secure health information exchange.

ONC is continuing to build upon the initial NHIN architecture prototypes by moving to trial implementations. These trial implementations will directly engage state and regional health exchanges to implement core NHIN functionality. By the end of 2007, the trial implementations will be demonstrating inter-network health information exchange.

We recommend that, where feasible, the selected applicants support the NHIN architecture by coordinating their activities with the organizations performing trial implementations. Information about the architecture of the Nationwide Health Information Network can be found at web site <http://www.hhs.gov/healthit/healthnetwork/background/>.

National Resource Center for Health Information Technology

As part of our health IT initiatives, HHS's Agency for Healthcare Quality and Research (AHRQ) created the AHRQ National Resource Center for Health Information Technology (the National Resource Center) to help the health care community make the leap into the Information Age. In addition to providing technical assistance, the National Resource Center shares new knowledge and findings that have the potential to transform everyday clinical practice. AHRQ's National Resource Center is committed to advancing our national goal of modernizing health care through the best and most effective use of IT.

The AHRQ initiative on health IT is a key element to the nation's 10-year strategy to bring health care

into the 21st century by advancing the use of information technology. The AHRQ initiative includes grants and contracts in 41 states to support and stimulate investment in health IT, especially in rural and underserved areas. Through these and other projects, AHRQ and its partners will identify challenges to health IT adoption and use, solutions and best practices for making health IT work, and tools that will help hospitals and clinicians successfully incorporate new IT.

We recommend that, where feasible, applicants selected for the FCC pilot program use the resources available at the National Resource Center. Information about the National Resource Center can be found at web site www.healthit.ahrq.gov.

Implementation of the Pandemic and All-Hazards Preparedness act (PAHPA)

In December 2006 Congress passed, and the President signed, the Pandemic and All-Hazards Preparedness Act (PAHPA). PAHPA established the office of the Assistant Secretary for Preparedness and Response (ASPR) and designated it as the lead office responsible for public health and medical emergency preparedness and response within HHS. The legislation also establishes a number of related activities and initiatives, including several in the area of health IT.

PAHPA calls on HHS to leverage advances in information technology and information management to support faster, larger scale, more efficient, and higher quality detection of, response to, and recovery from public health emergencies. Specifically, the legislation focuses on three areas: development of a lucid strategy for biosurveillance (i.e., health monitoring) and other population health and public health emergency response situational awareness (e.g., critical response resources and needs, health care utilization and capacity and environmental threats) that draws on the best of existing efforts and represents meaningful nationwide capacity in 2008; establishment of an integrated network of State electronic systems for credentialing of health care providers so that provider information can be shared across jurisdictions in an emergency; and development of an inventory of telehealth initiatives that is relevant to improving the provision of quality health services during a public health emergency.

As mandated by PAHPA, ASPR and other HHS operating and staff divisions are currently working with the FCC on developing the telehealth inventory. We recommend that applicants selected for the FCC pilot program be made aware of the role of ASPR in coordinating public health emergency preparedness and response activities and of the relevant provisions of the PAHPA legislation, so that FCC and ASPR can leverage them as a resource for the telehealth inventory and for the implementation of other preparedness and response initiatives.

The Public Health Information Network

The Centers for Disease Control and Prevention's (CDC) Public Health Information Network (PHIN) is a national initiative to improve the capacity of public health to use and exchange information electronically across organizational and jurisdictional boundaries. The PHIN strives to improve public health by identifying and disseminating promising practices in the research and implementation of efficient, effective, and interoperable public health information systems.

The PHIN supports the exchange of critical health information between all levels of public health and healthcare by developing and promulgating requirements, standards, specifications, and an overall architecture in a collaborative, transparent, and dynamic way. In addition, CDC monitors the capability of state and local health departments to exchange information, advances supportive policy, provides

technical assistance to state and local health departments, and facilitates communication and information sharing within the PHIN community.

As eligible health care providers in this funding program include local health departments or agencies, including dedicated emergency departments of rural for-profit hospitals, where applicable and/or feasible, we recommend that applicants selected use resources available through CDC's PHIN and ensure interoperability with public health entities. Information about the Public Health Information Network can be found at the web site www.cdc.gov/phin.

FCC's program for broadband connectivity together with CDC's PHIN initiative will help assure that persons and organizations involved in public health will have consistent access to important health information for routine communications, emergency preparations, and during disasters and nationwide emergencies.

HHS wishes to continue collaborating with the FCC about our important initiatives and especially would like to schedule a meeting with the applicants selected for the FCC's rural health funding pilot project to provide them educational information about our health IT programs.

Thank you for giving us the opportunity to provide suggestions to achieve consistency with the health IT initiatives being promoted by HHS. If you have questions or if we can be of further assistance please contact Marc Weisman, Executive Director, of my office at (202) 690-7051.

Sincerely,



Robert M. Kolodner, MD
National Coordinator for Health Information Technology