

David Blumenthal, MD, MPP
National Coordinator for Health Information Technology
Office of the National Coordinator
Department of Health and Human Services
Room 729D
200 Independence Avenue, SW
Washington, DC 20201

Dear Dr. Blumenthal:

The HIT Policy Committee (the Committee) is charged with recommending to the National Coordinator a policy framework for developing and adopting a nationwide health information technology infrastructure for the electronic exchange and use of health information technology. Therefore, the Committee is submitting to you recommendations that we finalized at our **August 14, 2009**, Committee meeting. At that meeting, the Committee heard presentations and received advice on a variety of topics from two of its Workgroups, the **Certification/Adoption Workgroup** and the **Information Exchange Workgroup**. After considerable discussion of those presentations and the Workgroups' input, the Committee agreed upon several recommendations, as described below.

The **Certification/Adoption Workgroup's** presentation pertained to certification criteria for electronic health records (EHRs) which are specified in the American Recovery & Reinvestment Act (ARRA) of 2009, and certain EHR functional requirements that support Meaningful Use objectives.

As background, ARRA authorized the Centers for Medicare & Medicaid Services (CMS) to provide a reimbursement incentive for eligible professionals and hospital providers who are "meaningful users" of certified electronic health records (EHRs). This incentive payment is anticipated to begin in 2011 and gradually decrease through 2014, after which providers are expected to have adopted and be actively utilizing an EHR in compliance with the "meaningful use" definition or they will be subject to financial penalties.

The Committee discussed the Workgroup's advice and reached several important decisions regarding a certification process, expansion of the process to improve its objectivity and transparency, and a proposed short-term certification transition plan. Based in part on the Workgroup's input, the Committee is submitting to you for your consideration the following.

RECOMMENDATIONS

We recommend that in defining the certification process for an electronic health record (EHR), the following objectives are pursued:

- 1. Focus certification on Meaningful Use.**
- 2. Leverage the certification process to improve progress on privacy, security, and interoperability.**
- 3. Improve the objectivity and transparency of the certification process.**
- 4. Expand certification to include a range of software sources, e.g., open source, self-developed, etc.**
- 5. Develop a short-term certification transition plan.**

The second set of recommendations originated from the Committee's **Information Exchange Workgroup**. During the August 14th meeting, the Committee considered the Workgroup's input, which focuses on those Meaningful Use objectives that require health information exchange. After lengthy discussion, the Committee decided on the following four high-level recommendations as they relate to health information exchange, and are submitting them to you.

RECOMMENDATIONS

- 1. Information exchange requirements:** The core information exchange requirements must be technology- and architecture-neutral, and apply to all participants seeking to demonstrate meaningful use to the Centers for Medicare & Medicaid Services (CMS).
- 2. Core requirements:** Consistent with the recommendations of the Certification/Adoption Workgroup, these core requirements should be focused on the capability to achieve meaningful use and include interoperability, privacy, and security.
- 3. Certification of interoperability components:** The federal government should certify EHR and health information exchange components on these core requirements to ease the burden on eligible professionals and hospitals for meeting and demonstrating adherence with meaningful use requirements.
- 4. Aligning federal and state efforts and bringing existing efforts into alignment:** Federal and state-government approaches should be complementary, and grants to states should require alignment with federal meaningful use

objectives and measures.

The Committee recommends that the National Coordinator accept (1) its Recommendations on certification and the certification process, and (2) its Recommendations focusing on those Meaningful Use objectives that require health information exchange. Further, the Committee requests that the National Coordinator recommend to the Secretary that the appropriate operating and staff divisions (OP/STAFFDIVs) within the Department be directed to consider how best to address and/or implement the Recommendations.

We fully appreciate your Office's and the Department's leadership role and efforts to advance widespread adoption of interoperable health information technology in the United States.

Sincerely,

Paul Tang
Vice Chair
Health IT Policy Committee