September 13, 2019

The Honorable Donald Rucker, MD,
Office of the National Coordinator for Health Information Technology
U.S. Department of Health and Human Services
330 C St. SW, Floor 7
Washington, DC 20201

Submitted electronically via: http://www.healthit.gov

RE: 2019 Interoperability Standards Advisory

OCHIN appreciates the opportunity to submit the following comments in response to the request to address the Office of the National Coordinator’s (ONC’s) Interoperability Standards Advisory (ISA). We applaud the ONC’s effort to drive interoperability of electronic health information across the nation and coordinate the identification and assessment of interoperability specifications and standards. OCHIN also supports the e-framework and search capability of the 2019 ISA.

OCHIN is a 501(c)(3) not for profit community-based health information technology (HIT) collaborative. We are the largest Health Resources and Services Administration (HRSA) Health Center Controlled Network (HCCN) in the country, supporting 96 health centers in our network. We also deliver best-in-class electronic health record (EHR) technology to 112 organizations on our hosted Epic platform. We operate two national broadband consortia, the Oregon Health Network and California Telehealth Network, as well as the California Telehealth Resource Center, advancing virtual care and telehealth for the safety net.

OCHIN’s mission is to pioneer the use of health information technology (HIT) in caring for the medically underserved. As such, OCHIN serves community health centers (CHCs), including Federally Qualified Health Centers (FQHCs), rural and school-based health centers, safety-net providers, and public health and correction facilities across the nation. OCHIN’s comments are through the lens of the members we serve.

OCHIN Supports:
- Coordination between federal agencies to agree upon a gold standard for testing standards and specifications;
- Using a qualitative approach to determine adoption level of a particular standard;
- Creating and implementing specification requirements for vendors;
- Continuing to build the Trusted Exchange Framework and Common Agreement (TEFCA) to maturity and the associated QHIN structure; and
- Focusing funding on highly mature standards for FQHCs and small clinics.
OCHIN Overall Technical Suggestions on ISA:

Nationally Align Standards

ONC’s interoperability standards are critical to the exchange and measurement of data for clinical, public health, and research purposes. OCHIN believes these standards serve as a baseline through which the ONC can coordinate with CMS and HRSA to create a single set of national standards for measuring all health information. Currently, there are different standards for the CCDA, QRDA, and OMAP which should become more aligned.

The CCDA is also not comprehensive enough. Having each agency with conflicting or compounding measurements or standards for interoperability adds burden and reduces the efficiency of data collection and exchange. OCHIN strongly urges ONC to work together with all other agencies collecting or assessing health data to create a single unified set of standards through which all health providers, payers, and HIT entities can exchange and use data.

OCHIN also wants to acknowledge the inclusion of “Applicable Security Patterns for Consideration” in the ISA. Alignment with interoperability standards with the key security considerations continues to grow in importance, and continually updating this information will be important to enhancing the value of the ISA. We also recommend including links to educational resources provided by the National Institute of Standards and Technology (NIST) as best practices for specific implementations.

Focus on and Fund Mature Standards

Organizations that serve patient populations in the safety net greatly benefit from seamless interoperability but often must resort to lower-cost solutions. These entities also have lower staffing resources and funding for training to implement modifications to the EHR to meet standards. Federally qualified health centers (FQHCs) and small clinics rely on production standards as opposed to emerging standards to be able to drive them to scale. A variety of emerging standards tend to give providers with smaller margins pause, especially where there is no funding offered to assist with adoption.

To allow these smaller and federally supported clinics to meet the same standards as all other providers, implement a minimum specification requirement and ensure federal and state agencies and organizations are only using production and highly qualified standards. The utilization of “In Development” or “Balloted Draft” standards often receive funding to help push adoption, but we recommend funding instead be reserved for more mature standards. Only once a standard is highly adopted (level medium/high) and in final maturity level should funding be provided. We recommend the government look at funding tied to get to scale, and limit funding for draft standards to ensure FQHCs and small clinics are not left behind.

Qualitatively Measure Use

OCHIN is concerned with the admittedly anecdotal nature of the adoption levels within the ISA. The conclusion does not reflect the individual variance of the specification, implementation, or even revision being implemented.¹ We suggest taking a qualitative approach to determine which version is in use and its level of use, and recommend continuing the valuable discussion held at the ONC Interoperability Workshop around metrics and measurement. Variance allowed under the written

¹ “understanding that the designation is a generality or “best guess” and not a pre-defined measured value.”
standards contributes to increased customization for implementations and this increases resource requirements and cost for what is expected by providers to be out of the box functionality.

**Push National Frameworks**

OCHIN continues to advocate for the widespread use of national frameworks standards and adoption, and as ONC continues to update the TEFCA, we highly recommend using the ISA and the TEFCA to continue to push for vendors to establish a connection into the national frameworks either independently or through Carequality, eHealth Exchange, and the Commonwell Alliance. Streamlining the adoption of national frameworks will also allow for the automation of reporting and data collection to reduce provider burden and improve reporting and research capabilities.

We applaud the ONC for the evolution of the TEFCA and ONC’s decision to award the Sequoia Project as the Recognized Coordinating Entity (RCE). OCHIN looks forward to assisting to further formulate the TEFCA framework through a safety net lens and to participate as the safety net network.

**Additional Comments**

- We support the ISA Reference Edition, as this date specific version of the ISA is helpful to reference in contract negotiations with vendors and other entities.
- The search function by Federal Requirement was a great addition which we applaud.
- OCHIN utilizes the ISA to review the maturity and applicability of a standard for implementation at scale. We look at solutions that are:
  - Federally Required
  - Standards Process Maturity Level of “Final”
  - Implementation Maturity Level of “Production”
  - Adoption Level of “medium-high or above”
- Although we appreciate the links to the Interoperability Proving Ground (IPG), we are concerned the IPG does not always provide clear information on the challenges of implementing these standards to the value proposition that resulted from leveraging the standard.

We appreciate your consideration of our comments. Please contact Jennifer Stoll at stollj@ochin.org should you have any questions.

Sincerely,

Jennifer Stoll  
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