



April 28, 2014

Dr. Karen DeSalvo, National Coordinator for Health Information Technology  
Office of the National Coordinator for Health Information Technology  
Hubert H. Humphrey Building  
200 Independence Avenue SW  
Washington, DC 20201

**RE: Request for Public Comment on Voluntary 2015 Edition Electronic Health Record (EHR) Certification<sup>1</sup>**

Dear Dr. DeSalvo:

I am writing on behalf of the Alliance for Home Health Quality and Innovation (the "Alliance") in response to the request for public comment on the **Voluntary 2015 Edition Electronic Health Record (EHR) Certification notice of proposed rulemaking**. The Alliance appreciates the opportunity to provide comments on EHR certification, specifically as such certifications will relate to long term and post-acute care (LTPAC).

The Alliance is a non-profit 501(c)(3) organization with the mission to lead and support research and education on the value of home health care to patients and the U.S. health care system. Working with researchers, key experts and thought leaders, and providers across the spectrum of care, we strive to foster solutions that will improve health care in America. We are a membership based organization comprised of home health care providers, both not-for-profit and proprietary, and other organizations dedicated to improving patient care and the nation's healthcare system. For more information about our organization, please visit: <http://ahhqi.org/>.

The Alliance supports development of EHR certification standards and believes that interoperability with LTPAC provider EHR systems should be included in these standards. The Alliance has two recommendations regarding certification and ultimate adoption of EHRs: (I) the priority in EHR certification should be the ability to exchange standardized, interoperable clinical information; and (II) adoption of certified software could be driven by heightening the standards for hospital and eligible physicians' exchange of electronic information with outside providers.

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<sup>1</sup> Voluntary 2015 Edition Electronic Health Record (EHR) Certification Criteria; Interoperability Updates and Regulatory Improvements; Proposed Rule, 79 Fed. Reg. 10,880 – 946 (Feb. 26, 2014) <http://www.gpo.gov/fdsys/pkg/FR-2014-02-26/pdf/2014-03959.pdf>

**I. In developing EHR software certification standards, the critical standard should be interoperability.**

While there are a number of important facets in EHR certification, interoperability should stand at the forefront of the discussion on EHR certification standards. Interoperability provides the greatest value in pushing HIT at the national level. Part of this rests on the idea that interoperability promotes hospitals, eligible professionals, and LTPAC settings to share the responsibility of information exchange. Therefore, it is interoperability that will most likely drive change that can improve care and lower costs through HIT.

Incomplete information hinders the ability to achieve care coordination and achieving improvements in care transitions throughout our health care system. The electronic exchange of standardized data between and among eligible providers and professionals and LTPAC providers is critical to improving care coordination across the spectrum of care. The Alliance agrees with Terry O'Malley's statement to the ONC Certification and Adoption Work Group that, "the electronic exchange of standardized, interoperable clinical information between different IT platforms becomes the essential tool for care integration between and among acute and LTPAC providers."

Key data elements, such as those originally identified through the Massachusetts IMPACT project and other national organizations and initiatives, have been developed. These data elements can be used as a starting point for national standards for transitions of care and longitudinal coordination of care. These data elements include key demographic information, such as race, ethnicity, and languages spoken by the patient.<sup>2</sup> Some have projected that the HL7 Domain Analysis Work Group, the ONC Longitudinal Coordination of Care Work Group, ASPE, and others have nearly completed the final stages of HL7 ballot reconciliation for these data elements which will be available for reference as certification standards early in 2014. EHR certification for hospitals, eligible professionals, and LTPAC sites should include the capacity to send and receive these standardized data elements to support transitions and care coordination.

The Alliance recommends requiring interoperability with LTPAC provider EHRs as a standard for meaningful use eligible provider and professional EHRs. Likewise, LTPAC provider EHR certification should include interoperability with other LTPAC providers and with meaningful use eligible providers and professionals as a standard. Standardizing the exchanged pieces of data would improve transitions of care regardless of the originating site's IT software. Both requiring and standardizing EHR interoperability can improve patient care across all settings.

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<sup>2</sup> Over time, we should consider updating these data elements to include other pieces of critical information relating to health literacy and other aspects of care delivery, including data on home visits.

**II. Additionally, the Alliance supports the Home Care Technology Association of America's (HCTAA) recommendation to the HIT Certification/Adoption Workgroup that ONC strengthen requirements for the electronic exchange of the summary care record by hospitals and eligible professionals with outside providers.<sup>3</sup>**

As it currently stands, the 2014 EHR Criterion, which stipulates only 10% of summary care records are required to be transmitted electronically, is too conservative. We would instead encourage the percentage of summary care records exchanged by hospitals and eligible professionals electronically be increased to support the extension of the standard to LTPAC providers. Currently, the low percentage does not support the ability of Stage 2 Meaningful Use to function as a tool for LTPAC settings. Without an increase in the electronic data shared by hospitals and related providers and LTPAC settings such as home health, the opportunity for better communication amongst settings, and thus improved care coordination is limited.

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In conclusion, the focus of certification standards should be on the long-term goal of achieving seamless health information exchange across the spectrum of care, which includes home health care and other long-term and post-acute care providers. By requiring the ability to exchange standardized data between hospitals and eligible professionals and PAC providers, we will support dramatic improvements in quality of care.

Should you have any questions about the Alliance's comments, please contact me at (202) 239-3671 or [tlee@ahhqi.org](mailto:tlee@ahhqi.org).

Sincerely,

/s/

Teresa L. Lee, JD, MPH  
Executive Director

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<sup>3</sup> Health Care Technology Association of America: Comments Regarding Voluntary Long-Term Post-Acute Care (LTPAC) Electronic Health Record (EHR) Certification Program (Dec. 12, 2013) [http://www.healthit.gov/FACAS/sites/faca/files/121213\\_Brennan\\_Utterback\\_HCTA\\_Testimony.pdf](http://www.healthit.gov/FACAS/sites/faca/files/121213_Brennan_Utterback_HCTA_Testimony.pdf)