August 25, 2017

Don Rucker, M.D.
National Coordinator for Health Information Technology
U.S. Department of Health and Human Services
200 Independence Avenue, SW
Washington, DC 20201

Dear National Coordinator Rucker:

Thank you for the opportunity to provide comments on areas to prioritize when developing a trusted exchange framework that supports the interoperable exchange of health data to give clinicians and patients the information they need to make informed healthcare decisions. As the Office of the National Coordinator for Health Information Technology (ONC) develops this framework—as required by the 21st Century Cures Act passed into law last year—we urge you to consider how to address two critical aspects of interoperability: 1) patient matching and 2) challenges with data standardization.

The Pew Charitable Trusts is a non-profit research and policy organization with a number of initiatives focused on improving the quality and safety of patient care, facilitating the development of new medical products and reducing costs. Pew's health information technology initiative focuses on advancing the interoperable exchange of health data and improving the safety of electronic health records (EHRs).

Section 4003 of the 21st Century Cures Act (Cures) directs ONC to develop a framework to support the exchange of data among health information networks, which help healthcare providers share data about patients. This type of interoperability is often referred to as network-to-network exchange. Cures requires that this framework include policies around verifying users of networks, rules for the exchange of information among network participants, and guidance for determining when information should be shared. Effective exchange of information across networks, as envisioned in Cures, could benefit from advances in both patient matching and data standards.

Improvements to patient matching essential to interoperability

Patient matching is the ability to link a patient to his or her health records that may be held at multiple locations. Researchers have found match rates as low as 50 percent when matching across healthcare facilities.[1] As a result, patients and healthcare providers may lack critical data to inform care decisions due to the inability to correctly link an individual with his or her record.

Facilities treating the same patient may not all belong to the same data exchange network. When this occurs, facilities must be able to identify and locate their patients' records even when those

records are held by other organizations and in another network. Through improved matching across networks, healthcare facilities can obtain data on their patients to enable care coordination, integrate and reconcile data, and access relevant information to avoid duplication of tests and other services.

Pew is conducting research to better understand challenges with patient matching and evaluate solutions to this interoperability problem. For example, we are assessing whether the use of more detailed standards for demographic data—such as name and date of birth—could help enhance match rates. We are also examining whether individuals can be involved in matching their records. Similarly, we are conducting focus groups with patients and interviewing healthcare facilities to understand how they view patient matching, and their perspectives on biometrics and other unique identifiers that could be leveraged for matching.

As ONC develops a trusted exchange framework, we urge you to consider how to address patient matching between networks and collaborate with the private sector and research organizations on how to ensure that data transmitted can be matched to the right patients.

Effective use of standards critical to interoperability

In addition to patient matching, the use of data standards for clinical data elements—such as vital signs, medications or laboratory test results—can hinder interoperability. This can occur when one health IT system documents and shares information in a certain way, but receives that data from another system in a different manner or form. The data might be sent without key information—such as a drug's route or frequency of administration—or the receiving system may not know how to process or code that data, which could result in it being dropped or rendered unusable.[2]

Achieving the vision of nationwide exchange of information, including across networks, requires that healthcare organizations are able to receive and process the data. Addressing challenges associated with standards can foster more accurate and robust data sharing so that the information is both available and usable.

To help improve the standardization of data, Pew is examining how standardization affects interoperability. We are also identifying solutions to address challenges with data standards—including those that could be advanced by government or the private sector—to support the exchange of information.

The development of an exchange framework for network-to-network data exchange offers ONC an opportunity to underscore the importance of addressing data standardization as a critical aspect of interoperability. We urge you to consider the role of improved data standards in furthering the trusted exchange framework.

Conclusion

As ONC works with EHR vendors, health information networks, healthcare providers and other stakeholders to advance a trusted exchange framework, we urge you to consider the role of patient matching and data standards in facilitating interoperability. By prioritizing advances in these areas, ONC can help foster more accurate and robust data exchange—including as part of networks—to drive interoperability so that patients, their caregivers, and their healthcare providers have the information they need to coordinate care and make informed decisions.

Thank you for the opportunity to provide comments on a nationwide trusted exchange framework. Should you have any questions or if we can be of assistance, please contact me at 202-540-6333 or bmoscovitch@pewtrusts.org.

Sincerely,

Ben Moscovitch
Manager, Health Information Technology
The Pew Charitable Trusts

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[1] Genevieve Morris et al., "Patient Identification and Matching Final Report," Feb. 7, 2014, https://www.healthit.gov/sites/default/files/patient_identification_matching_final_report.pdf.
[2] The Pew Charitable Trusts "Patient Matching Errors Risk Safety Issues, Raise Health Care Costs" Fact Sheet. June 2017 , http://www.pewtrusts.org/en/research-and-analysis/fact-sheets/2016/11/electronic-health-records-patient-matching-and-data-standardization-remain-top-challenges.