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The Honorable Alex M. Azar II Secretary United States Department of Health and Human Services 200 Independence Avenue, SW Washington, DC 20201

Dear Secretary Azar,

At a time when millions of patients' traditional medical care has been disrupted by the COVID-19 pandemic, thank you for finalizing new regulations from the Department of Health and Human Services (HHS) that will equip individuals with their own medical data and facilitate the sharing of that information with health care providers. With the ongoing COVID-19 outbreak, we are seeing historic shifts in the way healthcare is delivered—with more patients and providers relying on telemedicine to meet healthcare needs. The new regulations to promote data sharing play an essential role in ensuring continuity of care for patients and should be implemented without delay.

The Pew Charitable Trusts is a non-profit research and policy organization with several initiatives focused on improving the quality and safety of patient care. Pew's health information technology (health IT) initiative focuses on advancing the interoperable exchange of health data and improving the safe use of electronic health records (EHRs).

In 2016, Congress's landmark 21st Century Cures Act (Cures) tasked HHS with ensuring that patients and providers have more complete health information wherever and whenever they need it. Last month, both the Office of the National Coordinator for Health Information Technology (ONC) and Centers for Medicare and Medicaid (CMS) advanced Congress's goals by releasing regulations to improve interoperability—or the ability of EHRs and other health technology to communicate. Together these rules promote greater data exchange among health care providers and ensure that patients will have access to their personal medical records and claims data through application programming interfaces (APIs) on the device of their choosing, such as their smartphone. Specifically, the rules require the use of standardized APIs—tools that are often used across the internet and allow two systems to more seamlessly communicate with each other.

The COVID-19 pandemic gripping the nation underscores the importance of these regulations in enabling greater data exchange and providing patients with their information. For example, with mandatory stay-at-home orders and efforts to socially distance, patients lack the ability to go into a hospital or doctor's office to pick up their records. Additionally, patients may be seeing new clinicians via telehealth for the very first time due to restrictions on in person office hours or because of their symptoms. What these patients share is a greater need to have remote access and exchange of their health data to make more informed health care decisions.

HHS's new rules are essential in facilitating this connection through greater use of APIs, which help obviate the need for patients to get their records in person because they will be able to more easily get and share their records from a personal device. The rules also promote greater coordination of care among clinicians, including through enhanced patient matching and requirements on the sharing of data among clinicians. Similarly, greater access to their own data enables individuals to understand their symptoms, access appropriate care, and contribute their data for research, which may involve public health surveillance efforts in the future. Standard APIs could also facilitate the automated extraction of data from EHRs for direct reporting to public health registries, eliminating the need for paper forms.

ONC and CMS have rightly chosen timelines that both enable health technology vendors to update their systems as needed and promptly ensure greater data exchange. The API provisions of ONC's rule will be fully implemented two years after final publication of the regulations in the *Federal Register*, while the CMS timeline for API-based claims data exchange is set for January 1, 2021, nearly five years after Congress passed Cures. While these APIs may not be immediately available, any further delay in this timeline impedes critical benefits to patients and hinders our ability to use this technology to address further disruptions in the health care system.

Since Congress passed Cures in 2016, patients have waited long enough to gain access to data and ensure that their health care providers are better equipped with data to coordinate care. Therefore, we urge you to implement these rules without additional delay.

Thank you for your leadership in advancing interoperability. Should you have any questions or if we can be of assistance, please contact me at 202-540-6333 or bmoscovitch@pewtrusts.org.

Ben Moscovitch

Project Director, Health Information Technology

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