Achieving Interoperability that Supports Care Transformation

A Report of the American Hospital Association Interoperability Advisory Group

American Hospital Association®

Executive Summary

Hospitals and health systems around the country have made the transition to using electronic health records (EHRs). Now that we have large amounts of health information in electronic form, providers and policymakers are turning their eyes to the next goal of ensuring that the data can be easily and securely shared – also known as interoperability.

Hospitals and health systems cannot collect and share data across settings of care as easily as they want to, or without expensive and cumbersome work-arounds. At the same time, they face increasing needs to better understand their patients' conditions and care patterns to successfully manage new models of care such as accountable care organizations. In all endeavors to share information, they must maintain secure systems. For their part, federal officials are concerned that the $30 billion invested in the Medicare and Medicaid EHR Incentive Programs has been wasted if the data cannot be shared easily.

The AHA formed the Interoperability Advisory Group (IAG) to better understand member priorities for information sharing, barriers to interoperability and specific actions that the public and private sectors could take to move forward.

The 24 members of the IAG represent a range of facilities from critical access hospitals to large academic medical centers, and from stand-alone hospitals to large integrated health systems. The group includes information technology, clinical and administrative leaders. The group deliberated over six months via conference calls, individual outreach and a one-day, in-person meeting.

Priorities for Information Sharing. While the data collected during the course of caring for patients may have many secondary uses, such as research, the IAG emphasized the need to focus first on ensuring that we can efficiently and effectively gather, share and use health information for its primary purposes:

(1) To support care and patient engagement.

(2) To support new models of care.

Barriers to Interoperability. As detailed in this report, the members of the IAG identified multiple barriers to interoperability that fall into three categories – insufficient infrastructure, technology challenges and unresolved policy issues.

Actions to Improve Interoperability. Creating a truly interoperable health information system will require action by both the private and public sectors. The detailed actions recommended by the IAG are described in the report and summarized in the table on page iii. In general:

• Hospitals, health systems and other providers must identify their priorities and make it clear to vendors that they want efficient and affordable information sharing.

• Vendors must take actions to enhance interoperability in support of the priorities set by hospitals, health systems and other providers. They must align their business case with the needs of their customers, so that information can be shared efficiently and effectively, without repeated and expensive "tolls" for creating interfaces and completing transactions.

Summary of Actions to Improve Interoperability

Private Sector Actions

Hospitals, health systems and other providers must identify their priorities and make it clear to vendors that they want efficient and affordable information sharing. Providers must:

- Set an expectation that vendors adhere to standards.
- Identify the highest priority information sharing activities (or "use cases") they want their health IT systems to support.
- Contribute their requirements for testing as the end-users of health IT systems.
- Invest in standardizing care processes and use of systems.
- Actively identify and share lessons learned and best practices.

Vendors must take actions to enhance interoperability in support of the priorities set by hospitals, health systems and other providers. They must align their business case with the needs of their customers so that information can be shared efficiently and effectively, without repeated and expensive "tolls" for creating interfaces and completing transactions. Vendors must:

- Commit to consistent use of standards and implementation specifications, participate in testing, and provide documentation on adherence to standards.
- Share expertise during development of standards, implementation specifications, and use cases.
- Be more transparent about technical solutions.
- Align their business case with the needs of their customers.

To be viable, health information exchanges (HIEs) must be able to share data across their organizations to create a network of networks.

- HIEs have begun to coordinate, but the work is not yet complete.

A multi-stakeholder group would foster further collaboration.

- Given the many actors involved in supporting health information exchange, a multi-stakeholder group may be needed to drive progress on interoperability.

Public Sector Actions

The federal government must continue to support advances in interoperability, but with a laser tight focus on standards, certification, and testing. This focused approach will ensure that EHRs and other health IT tools deploy standards to efficiently share information to support care, patient engagement and new models of care. The federal government must:

- Focus interoperability efforts on accelerating exchange of data currently collected.
- Improve certification, based on more robust testing.
- Create and support robust testing tools to ensure systems conform to standards that support interoperability.
- Increase public reporting on how vendors support interoperability and information sharing.
- Lead selection of standards, including continued development and maturation of needed standards.
- Actively support adoption of standards by providers.
- Address patient identification and matching.
- Rely on existing polices and the incentives of new models of care to encourage information sharing by providers.
- Adopt a reasonable timeline for change.

State governments should be discouraged from establishing unique requirements that increase variation in standards and policies because variability diminishes the ability to share information across state lines.

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- The federal government must continue to support advances in interoperability, but with a laser tight focus on standards, certification and testing. This focused approach will ensure that EHRs and other health information technology (IT) tools deploy standards to efficiently share information in support of care, patient engagement and new models of care.

- State governments should be discouraged from establishing unique requirements that increase variation in standards and policies because variability diminishes the ability to share information across state lines.

Achieving the vision of health information that can be easily shared to inform care, engage patients and support new models of care will take hard work on the part of every actor. Through collaborative efforts focused on the highest priority actions, however, progress can be made.

The full report can be found at: http://www.aha.org/content/15/1507-iagreport.pdf

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