

<u>Via Electronic Submission to: https://www.healthit.gov/topic/2020-2025-federal-health-it-strategic-plan</u>

March 18, 2020

Donald M. Rucker, M.D.

National Coordinator for
Health Information Technology

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

Re: Draft 2020-2025 Federal Health IT Strategic Plan

Dear Dr. Rucker:

On behalf of the membership of the Pharmacy Health Information Technology Collaborative (Collaborative), we are pleased to submit comments regarding the Office of the National Coordinator's *Draft 2020-2025 Federal Health IT Strategic Plan*.

The Collaborative has been involved with the federal agencies, including the Office of the National Coordinator (ONC) and the Centers for Medicare & Medicaid Services (CMS), developing the national health information technology (HIT) framework since 2010.

Pharmacists are users of health IT, and in particular, e-prescription and EMR (EHR) systems. The Collaborative supports the use of these systems, which are important to pharmacists in working with other health care providers to provide needed medications and transmit patient information related to overall patient care, transitions of care, immunization (historical and administered), immunization registry reporting, medication lists, medication allergies, allergy reactions, patient problem lists, smoking status, reporting to public health agencies, clinical decision support services/knowledge artifacts, drug formulary checking, and electronic prescribing.

The following are our comments regarding the *Draft 2020-2025 Federal Health IT Strategic Plan*.

Comments

Overall, the Collaborative is supportive of the proposed strategic plan. We do have some recommendations.

Goal 1: Promote Health and Wellness Objective 1a: Improve individual access to health information

The Collaborative supports Goal 1 and recommends that a strategy be included for Objective 1a regarding costs that individuals may incur for accessing their health information. Costs could be a potential barrier and limit access by individuals to their health information.

Objective 1c: Integrate health and human services information

The Collaborative recommends expanding the strategy "Strengthen communities' health IT infrastructure" to include bidirectional communication. The proposed strategy provides for the bidirectional secure exchange of data and appears not to address bidirectional communication. Exchanging data is not the same as communicating with the person transmitting the data. Health care providers need to be able to respond and communicate with each other electronically about the health data being exchanged through health IT systems. Incorporating bidirectional communication, and not just the bidirectional exchange of data, would help make health IT systems more interoperable.

Goal 2: Enhance the Delivery and Experience of Care Objective 2a: Ensure safe and high-quality care through the use of HIT

The Collaborative supports Goal 2 and recommends including a strategy to Objective 2a to specifically address machine learning (artificial intelligence). Machine learning is mentioned as part of the strategy, "Optimize care delivery by applying advanced capabilities." As artificial intelligence (AI) applications continue to be developed and evolve, it is crucial that the government's strategic plan provide direction, especially as agencies consider regulatory and non-regulatory approaches for the use of AI.

The Collaborative suggests that such a strategy include requiring AI applications that may be used in health care be designed using United States evidence-based guidelines and data. For pharmacists, this is particularly critical for clinical decision support (CDS) systems. AI applications should also be certified. Using United States evidence-based guidelines and data would help reduce some concerns about introducing bias that could produce discriminatory outcomes or decisions that undermine the public trust in AI. Patient safety should be among the top factors related to the AI tools that may be considered as part of this strategy.

Objective 2b: Foster competition, transparency, and affordability in health care

As stated in our comment for Objective 1a, the Collaborative recommends a strategy be included regarding costs that individuals may incur for accessing their health information. Costs could be a potential barrier and limit access by individuals to their health information. It is not clear whether the strategy, "Encourage pro-competitive business practices," addresses this issue. Clarification may be needed.

Goal 3: Build a Secure, Data-Drive Ecosystem to Accelerate Research and Innovation Objective 3a: Advance individual- and population-level transfer of health data

The Collaborative supports Goal 3 and recommends that either the strategy for "Improve harmonization of data elements and standards," under Objective 3a, be modified to include the participation of standard setting organizations or that a separate strategy be incorporated that states: Coordinate harmonization of data elements and standards with nationally recognized standard setting organizations.

Goal 4: Connect Healthcare and Health Data through an Interoperable Health IT Infrastructure

The Collaborative supports this goal and the proposed strategies.

The Pharmacy HIT Collaborative comprises the major national pharmacy associations, representing 250,000 members, including those in pharmacy education and accreditation. The Collaborative's membership is composed of the key national pharmacy associations involved in health information technology (HIT), the National Council of Prescription Drug Programs, and 14 associate members encompassing e-prescribing, health information networks, transaction processing networks, pharmacy companies, system vendors, pharmaceutical manufacturers, and other organizations that support pharmacists' services.

As the leading authority in pharmacy health information technology, the Pharmacy HIT Collaborative's vision and mission are to ensure the U.S. health IT infrastructure better enables pharmacists to optimize person-center care. Supporting and advancing the use, usability, and interoperability of health IT by pharmacists for person-centered care, the Collaborative identifies and voices the health IT needs of pharmacists; promotes awareness of functionality and pharmacists' use of health IT; provides resources, guidance, and support for the adoption and implementation of standards driven health IT; and guides health IT standards development to address pharmacists' needs. For additional information, visit www.pharmacyhit.org.

On behalf of the Pharmacy HIT Collaborative, thank you again for the opportunity to comment on the *Draft 2020-2025 Federal Health IT Strategic Plan*.

For more information, contact Shelly Spiro, executive director, Pharmacy HIT Collaborative, at shelly@pharmacyhit.org.

Respectfully submitted,

Shelly Spire

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