

September 11, 2019

The Honorable Lamar Alexander
Chair
Committee on Health, Education, Labor and
Pensions
428 Senate Dirksen Office Building
Washington, DC 20510

The Honorable Patty Murray
Ranking Member
Committee on Health, Education, Labor and
Pensions
525 Senate Hart Office Building
Washington, DC 20510

The Honorable Frank Pallone Jr.
Chair
Committee on Energy and Commerce
2125 Rayburn House Office Building
Washington, DC 20515

The Honorable Greg Walden
Ranking Member
Committee on Energy and Commerce
2322 Rayburn House Office Building
Washington, DC 20515

Dear Chairman Alexander, Ranking Member Murray, Chairman Pallone, and Ranking Member Walden:

On behalf of the undersigned organizations, we wish to commend your committees on passing the 21st Century Cures Act (Cures), which included provisions to grant patients, clinicians and health care providers greater access to, and improved use of, data in electronic health records (EHRs). Currently, the Office of the National Coordinator for Health Information Technology (ONC) is undertaking a process to fulfill Congress's vision by enabling easier extraction and use of health data from EHRs through application programming interfaces, or APIs. We urge you to support the approach ONC takes in their proposed regulations to help ensure that patients, providers and clinicians have more complete health information wherever and whenever they need it.

An integral component of Cures expands upon Congress' previous efforts to enhance nationwide interoperability, which is the capability of EHRs to exchange data. In Cures, Congress required ONC to develop new criteria for EHRs to make patients' medical information available via APIs, which are software tools that allow systems to request and deliver information to one another. APIs are the foundation to the modern internet; they allow travel websites to aggregate fares from different airlines and personal financial applications to pull data from an individual's accounts, among countless other everyday uses. Cures' directive to integrate APIs into EHRs will bring that same seamless information exchange into health care, granting patients access to their data, improving communication between providers, and giving clinicians additional decision support tools to enhance their ability to offer quality care.

To implement Congress's vision of integrating APIs into EHRs, ONC proposes to advance the use of standards to enable seamless communication among systems and increase the number of data elements available for exchange, thus equipping patients and clinicians with better and more usable information to inform care decisions. ONC achieves this by:

- **Requiring use of FHIR:** Many of the current challenges to system-wide interoperability can be traced back to a lack of standardization. ONC proposes to address this by requiring use of the Fast Healthcare Interoperability Resources (FHIR) standard, which can make it easier for systems to request specific patient information. Use of the standard would also prevent individual technology developers from implementing proprietary APIs that make it more difficult to exchange data. In finalizing the proposed rule, ONC should maintain its commitment to FHIR-based APIs. In addition, ONC should adopt the most recent version of the standard—called Release 4—as it is not expected to significantly change in future iterations for some time.
- **Identifying clear implementation guides:** Even when organizations use FHIR to communicate data, they may implement the standard in different ways; the resulting variation can inhibit

interoperability. To address these inconsistencies, ONC proposes to require the use of a guide that will provide constraints on how to implement FHIR, which will better ensure that different systems can communicate standardized data. The private sector is currently collaborating to ensure that these implementation guides are open-source and free to use, accelerating innovation while ensuring data liquidity. To meet Congress' interoperability goals, ONC should finalize the use of implementation guidance as a critical component of deploying standards-based APIs.

- **Increasing the data available:** ONC proposes expanding the EHR data that can be made available via APIs to eventually meet the statutory requirement of making “all data elements” accessible. These additional data elements can improve the quality, safety, and coordination of care. In the near term, ONC focuses on key information to help inform patient, provider and clinician decisions by ensuring that APIs can release core medical data—such as medication and problem lists—in addition to clinical notes, which clinicians use to describe the nuances of laboratory and imaging observations, treatment plans, and other aspects of care. ONC also proposes to have APIs make available data provenance, which describes the author and origination date of specific information. ONC should finalize the availability of this critical data to provide greater context needed by patients, providers, and clinicians.
- **Addressing future API needs:** In addition to expanding the data available through APIs, ONC also requests information on what additional capabilities APIs should have via subsequent rulemaking. For example, while APIs can help transmit data to patients and among different systems, many EHRs have not enabled write access, which is the ability to add information to a patient's record, rather than just being able to read—or view—it. As FHIR further develops and API adoption increases, ONC should explore the use of these write capabilities for the bidirectional exchange of information out of and into EHRs by third-party applications, including those used directly by patients.

Under the leadership of your Committees, Congress set a vision for nationwide interoperability so that patients could more easily get their data, clinicians could extract information from EHRs, and different systems could more readily communicate with each other. ONC's proposed regulations take important steps to meet that goal by relying on standards-based APIs that can enable the health care system to leverage the same internet-based tools that fuel innovation in other industries. We urge you to support ONC's approach that can improve the coordination, quality, and safety of care. Should you have any questions, or if we can provide any assistance, please do not hesitate to contact Ben Moscovitch, Project Director of the Health Information Technology Project at The Pew Charitable Trusts, at bmoscovitch@pewtrusts.org or (202) 540-6333.

Sincerely,

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American Academy of Neurology
American Health Information Management Association
American Medical Informatics Association
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