



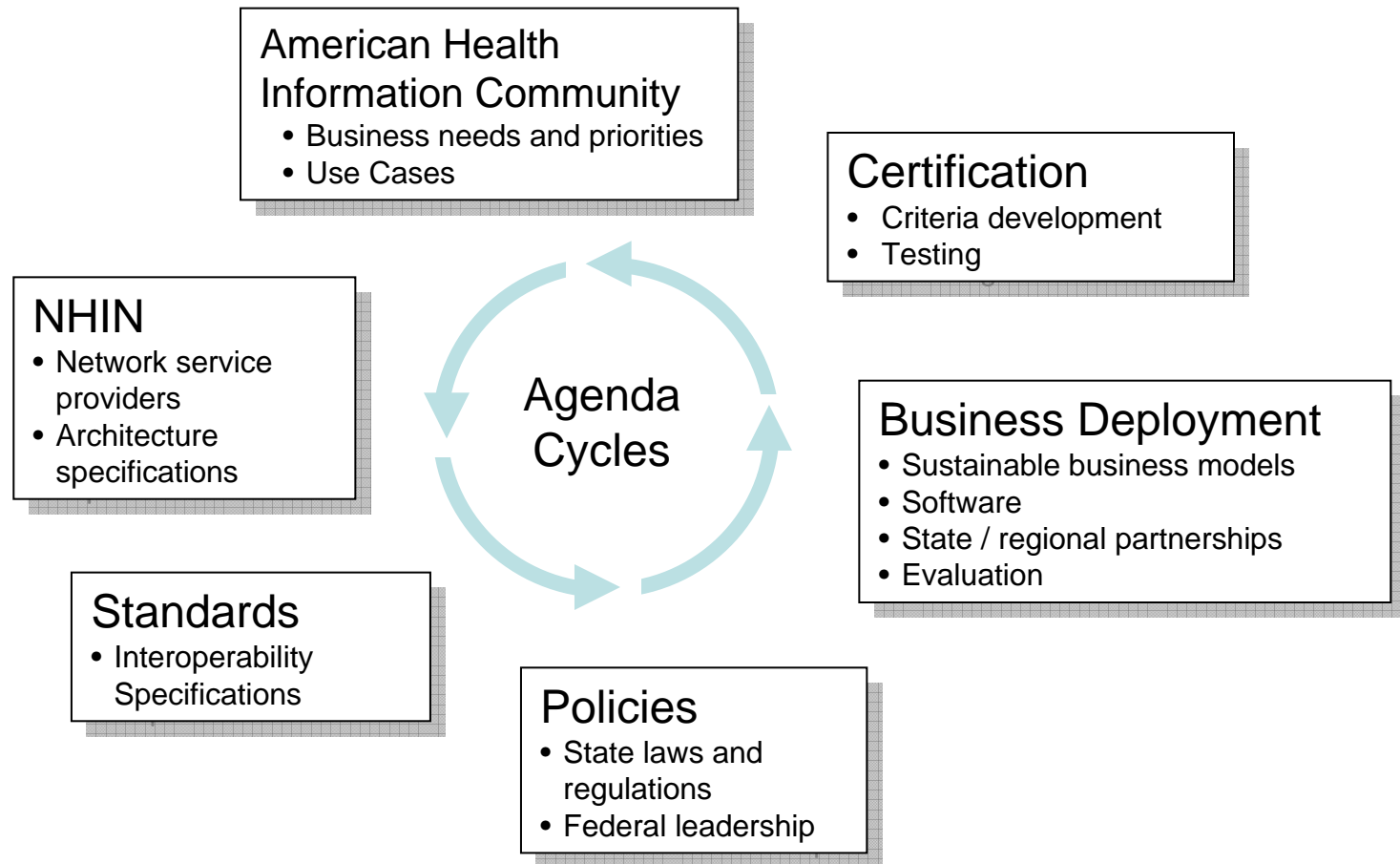
The United States National Health IT Agenda

State and Regional Health Information Exchanges

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***Office of the National Coordinator for Health
Information Technology
Department of Health and Human Services***

The National Health IT Agenda



American Health Information Community Priorities

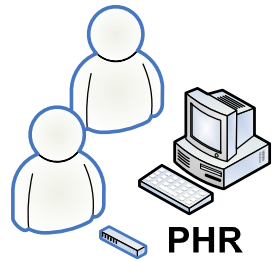
- 2006:
 - EHR – Lab Results
 - Consumer Empowerment – Registration and Medication History
 - Biosurveillance
- 2007:
 - Emergency Responder – EHR
 - Consumer Access to Clinical Information
 - Medication Management
 - Quality
- 2008 (Possible):
 - Personalized Health Care
 - Remote Monitoring
 - Remote Consultation
 - Public Health Case Reporting
 - Response Management
 - Referrals and Transfer of Care

A Network of Networks

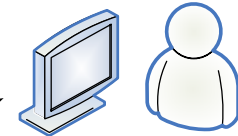
- Connect:
 - Providers (EHR's) and Consumers (PHR's)
- Interconnect:
 - State, regional, and non-geographic health information exchanges
 - Networks oriented to specific functions
- No national identifier, national data store or centralized systems at the national level
- Common “inter-network architecture” - standards, services, and requirements, processes and procedures
- Market for network services providers
- Secure foundation for growth and innovation

Nationwide Health Information Network

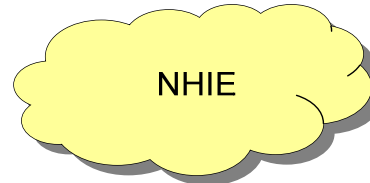
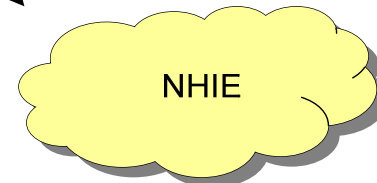
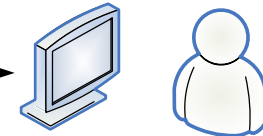
Consumers



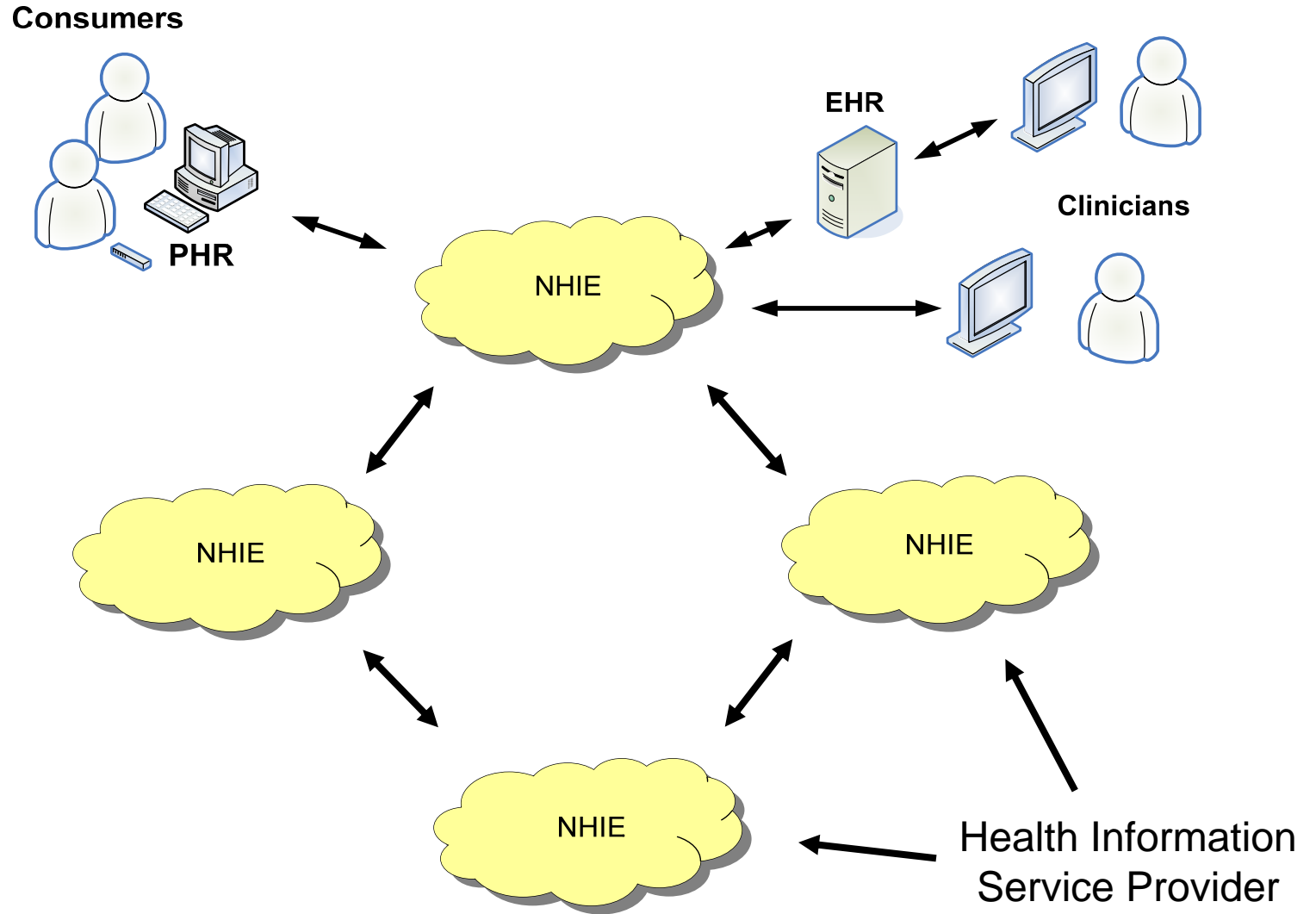
EHR



Clinicians



Health Information Service Provider



NHIE Core Services

- **Key Data Services**
 - Data delivery
 - Patient look-up in an NHIE and between NHIE's
 - Supporting access to data for secondary uses
- **Key User and Identity Management Services**
 - User identity proofing, authentication and authorization, or attest for connected organizations
 - Identity adjudication between NHIEs
- **Key Management Services**
 - System and trusted user protection
 - Emergency access (individual and community)

NHIE Core Services

U.S. DEPARTMENT OF HEALTH & HUMAN SERVICES
NATIONAL HEALTH INFORMATION STANDARDS

Key Consumer Services

- Identify a personal health record home
- Be supported in getting data there
- Search for other places where data about them exists
- Control who can access their personal health record
- View who has accessed their PHRs or made NHIE look-ups and how their data may have been disclosed
- Send change requests to data providers when they think the data are wrong
- Choose to *not* use network services