



*90 Years of Caring for Children—1930–2020*

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April 1, 2020

Don Rucker, MD

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 of the 2020-2025 Federal Health IT Strategic Plan

Dear Dr. Rucker:

The American Academy of Pediatrics (AAP), a non-profit professional organization of more than 67,000 primary care pediatricians, pediatric medical subspecialists, and pediatric surgical specialists dedicated to the health, safety, and well-being of all infants, children, adolescents, and young adults, appreciates the opportunity to comment on the Office of the National Coordinator for Health Information Technology's (ONC) draft of the 2020-2025 Federal Health IT Strategic Plan.

The draft 2020-2025 Federal Health IT Strategic Plan defines the federal government's health IT mission as improving the health and well-being of individuals and communities using technology and health information that is accessible when and where it matters most, while envisioning a system that uses information to engage individuals, lower costs, deliver high quality care, and improve individual and population health. The AAP is committed to the meaningful adoption of HIT for improving the quality of care for children, and appreciates the efforts being taken by ONC and other federal agencies to ensure thoughtful coordination around interoperability of health information.

Although supportive of the overall goal to make healthcare more transparent, accountable, and accessible, while preserving the patient-provider relationship, the Academy offers the following comments and recommendations on Goals 1, 3, and 4 in the draft of the 2020-2025 Federal Health IT Strategic Plan.

**Goal 1: Promote Health and Wellness**

For value-based care to be successful for pediatric populations, the AAP believes there must be agreement between all stakeholder payers to prioritize the value of prevention. Currently, the focus of payers is on cost savings for managing and mitigating chronic disease. But in order to promote greater population health, we must also prioritize prevention, early identification, and intervention. Unfortunately, this is currently undervalued in all payment models for pediatric care.

Additionally, the Academy would encourage that the final 2020-2025 Federal Health IT Strategic Plan address the roll of information technology in achieving equity in healthcare and reducing healthcare disparities. It should also incorporate a stronger emphasis on identifying and addressing social determinants of health through IT, beyond just access to broadband internet.

### **Goal 3: Build a Secure, Data-Driven Ecosystem to Accelerate Research and Innovation**

The Academy strongly urges ONC and other federal partners to consider privacy issues related to exchanging health information for pediatric patients. Parents may make decisions for minor children that, at the age of majority, the children are not comfortable with or which may have privacy implications in the future. Examples can include parents' sharing of their child's health information on social media sites or usage of unsecure applications. As a result, this information may be connected back to the child (i.e.: targeted digital advertisements or mailings) or their data may be compromised without their knowledge until years later. There needs to be precautions taken to ensure that children are not at risk for exploitation and identity theft if parents share information through unsecure mechanisms such as applications.

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

With increased information availability, conflicting data will arise as a result of imperfections in data conversion and import practices. AAP recommends that ONC implement a data provenance standard that will allow all stakeholders to see the data origin source. Patients and providers alike, when faced with conflicting information, must be able to easily determine where the data originated from so they can assess which is more likely to be accurate based on levels of trust information or go to the original source to verify. All of this must be based on better standards and protection for privacy issues.

In order to truly put patients first, the Academy also continues to strongly recommend the development of a unique patient identifier for each child at birth as a long-term solution to patient matching and to better support interoperability of patient-specific data. Without implementation of a national patient identifier, there will continue to be additional costs to the system and errors in patient matching that will be difficult to eliminate.

### **Additional Comments:**

The AAP notes that the improvements outlined in this plan will come with a financial cost and encourages ONC to directly address who will bear the costs, as it could impact some of the most underserved populations and areas of the country. It is becoming increasingly difficult for small and independent provider practices to continue to innovate. When more stringent, costly requirements related to physician use of technology are implemented, it can force smaller provider practices to make incredibly difficult financial decisions or close. Ultimately, this may leave patients without care.

The AAP appreciates the opportunity to provide comments and recommendations on the draft 2020-2025 Federal Health IT Strategic Plan. If you have any questions on our comments, please contact Patrick Johnson in our Washington, DC office at 202/347-8600 or [pjohnson@aap.org](mailto:pjohnson@aap.org).

Sincerely,



Sara H. Goza, MD, FAAP  
President

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