



May 28, 2024

Micky Tripathi, PhD, MPP  
National Coordinator for Health Information Technology  
U.S. Department of Health & Human Services (HHS)  
Office of the National Coordinator for Health Information Technology (ONC)  
330 C Street, SW, Floor 7  
Washington, DC 20201

*RE: Draft 2024-2030 Federal Health IT Strategic Plan*

Dear Mr. Tripathi:

We at ADVION are pleased to comment on the *Draft 2024 – 2030 Federal Health IT Strategic Plan*, which was released on March 27, 2024.

ADVION (formerly NASL – the National Association for the Support of Long Term Care) is the leading association representing the providers of ancillary care and services and products that serve the long term and post-acute care (LTPAC) sector. ADVION members include rehabilitation therapy companies; providers of clinical laboratory services and portable x-ray/EKG; suppliers of complex medical equipment and other specialized supplies; and health information technology (health IT) companies that develop and distribute full clinical electronic medical records (EMRs), billing and point-of-care health IT systems and other software solutions serving the majority of LTPAC providers (*i.e.*, assisted living, home health agencies (HHAs), inpatient rehabilitation facilities (IRFs), long term care hospitals (LTCHs) and skilled nursing facilities (SNFs)). In addition, ADVION is a founding member of the Long Term & Post-Acute Care Health Information Technology (LTPAC Health IT) Collaborative and has worked for nearly two decades to advance health IT issues by encouraging coordination among provider organizations, policymakers, vendors, payers and other stakeholders. We also have contributed to comments that are being submitted by the LTPAC Health IT Collaborative on the draft health IT strategic plan.

### **Overarching Comments**

ADVION applauds the US Department for Health & Human Services' (HHS') Office of the National Coordinator for Health Information Technology (ONC) for its leadership in coordinating a federal health information technology (health IT) strategic plan that reflects the diverse interests of

more than 25 federal agencies. We celebrate the collective progress made by the federal government, industry and healthcare stakeholders in identifying and using common health IT standards such as the US Core Data for Interoperability (USCDI) and the Fast Healthcare Interoperability Resources (FHIR) Application Programming Interfaces (APIs).

**ADVION supports the four overarching goals and objectives outlined in the [Draft 2024 – 2030 Federal Health IT Strategic Plan](#), including: 1) Promote Health & Wellness, 2) Enhance the Delivery & Experience of Care, 3) Accelerate Research & Innovation and 4) Connect the Health System with Health Data. We fully agree that the federal government can foster systemic improvements in health and care by aligning its health IT policies, programs, and investments. Achieving these laudable goals requires collaborative efforts from government, industry and healthcare consumers to implement the appropriate health IT standards, tools and policies needed to improve care, and access to care.**

Those of us in the long term and post-acute care (LTPAC) sector have focused on person-centered, holistic care since the inception of the Medicare program. We are pleased to see the rest of the healthcare system embrace the principles we value – supporting individuals by delivering the right care at the right time. We understand that advancements in health IT, interoperability and greater collaboration and exchange of individual health information are critical to delivering the right care at the right time in the future and achieving crucial efficiencies to alleviate the current strain on our nation’s healthcare system and the caregivers who deliver care every day.

Despite ADVION’s and our IT member companies’ involvement in federal health IT initiatives and rulemaking, the health IT systems and solutions developed for and used by the LTPAC sector are not always perceived to be as sophisticated as those existing today. Health IT in LTPAC settings is being integrated into clinical practice to collect and track quality measurements, conduct medication management, guide appropriate patient assessment and support effective clinical decision-making. Most of our IT member companies facilitate the electronic exchange of health information through initiatives such as Carequality, CommonWell and most recently, as part of the federal government’s Trusted Exchange Framework & Common Agreement (TEFCA). We are proud that our IT member companies not only follow many health IT standards named in ONC’s Certification Program and *Interoperability Standards Advisory (ISA)*, but some also have products certified under the ONC Certification Program. Importantly, these achievements have occurred *without* the federal incentive funding that has bolstered electronic health record (EHR) systems used by hospitals and physician offices.

ADVION appreciates that the ONC recognizes that LTPAC, behavioral health and other providers did not benefit from the incentives provided under the *Health Information Technology for Economic & Clinical Health (HITECH) Act*. We understand that Congress – not the ONC – would need to

authorize similar investments for those deemed “ineligible” for *HITECH* funds to achieve parity with their colleagues in the acute and ambulatory care sectors. Furthermore, it is crucial to point out that skilled nursing facilities (SNFs) were never supported or incentivized under *HITECH* to adopt the technology that meets today’s needs, such as information blocking and other aspects of the proposed roadmap. This lack of support has created a significant gap for the populations and staff of these critical facilities. As these patients transition to hospitals, homes, rehabilitation centers and other care settings, this gap affects the information that can and should be shared, especially during one of the costliest periods of care for aging populations.

Setting aside the inequities around federal incentive funding, we believe that the ONC can mitigate some challenges that LTPAC providers face. The *HITECH Act* did more than provide health IT incentive funds for hospitals and physicians; it laid the foundation for ONC health IT policy and standards. While ADVION supports and encourages using ONC-developed and approved health IT standards, we believe that organizations that did not benefit from the federal infusion of *HITECH* funds should not be required to implement such standards and policies to the same extent as hospitals and physician offices that received *HITECH* funding. For example, standards needed to meet the Centers for Medicare & Medicaid Services’ (CMS’) definition of Certified Electronic Health Record Technology (CEHRT) may not be appropriate for EHRs serving LTPAC providers.

## **ADVION Recommendations**

**ADVION strongly recommends that the ONC and other federal agencies reevaluate the parameters used to advance health IT adoption beyond the four walls of hospitals and physicians’ offices.** Simply applying the constructs established to implement the *HITECH Act* and “Meaningful Use” (now “Promoting Interoperability”) to the rest of the healthcare system **will only further disadvantage providers and care settings that never received *HITECH* funds or other federal incentives.** Instead, the ONC should build on the *HITECH Act’s* success in creating a sea change among hospitals and physicians that now seek to share patient information.

The COVID-19 pandemic revealed the very real consequences of ignoring large swaths of the nation’s healthcare system for far too long. We appreciate the Biden Administration’s focus on addressing longstanding healthcare inequities, including our public health system. This focus, coupled with the success in building a nationwide infrastructure for health information exchange, will help improve access to vital health information for public health. Nonetheless, other challenges remain such as a lack of broadband service to connect rural areas to health information networks. These shortfalls also must be addressed.

As standards and technologies evolve, and as technology becomes more integral to federal health policy, there is an increasing need for the ONC and other federal agencies to harmonize federal

policies affecting innovation and business operations. Clear guidance and communication of federal health policy and related requirements for businesses operating in or serving the public sector are needed. **ADVION recommends that ONC leverage its vital role as coordinator – and perhaps as convener – to ensure that federal policies (and where possible, state policies affecting health IT) are harmonized.** The federal government, particularly the ONC, is uniquely positioned to tackle this monumental task. Without a common understanding across federal and state regulatory agencies about the use of health IT, decisions about which policy to follow or how best to resolve discrepancies between competing or conflicting laws, directives and guidance from various federal and state oversight agencies will be left to the whims of individual health IT developers.

ADVION agrees that greater sharing of health information may lead to new research and treatments. **ADVION recommends that the ONC emphasize cyber preparedness and resiliency commensurate with its increased attention to data sharing.** Like the pandemic's impact, the massive disruption caused by the ransomware attack on Change Healthcare revealed a tremendous need to prioritize integrating high-impact cybersecurity practices. It also revealed a dearth in health IT literacy among providers and healthcare consumers. **ADVION recommends that understanding data privacy and security and the measures necessary to protect individuals' health information should be a priority for federal agencies, providers and healthcare stakeholders. This priority should be reflected in the 2024 – 2030 Federal Health IT Strategic Plan.**

## Conclusion

ADVION stands ready to assist the ONC in its critical role. We encourage ONC to tap into the considerable expertise that LTPAC providers and vendors have in coordinating care and longitudinal care as we transition away from setting-specific models in favor of a more collaborative, patient-and-family-centric approach to healthcare delivery in the United States.

ADVION appreciates the opportunity to submit these comments for your consideration. Should you have questions or need additional information, please feel free to contact me at [Cynthia@ADVIONadvocates.org](mailto:Cynthia@ADVIONadvocates.org).

Sincerely,



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Executive Vice President