



# commonwell<sup>®</sup>

## HEALTH ALLIANCE

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# Our Vision

We are an independent, not-for-profit trade association **open to all HIT suppliers** and others devoted to the simple notion:

- + That **health data should be available** to individuals and providers **regardless of where care occurs** and;
- + That provider **access to this data must be built-in** to HIT at a reasonable cost for use by a broad range of health care providers and the people they serve

# Membership is significant and growing

## Interoperability for the Common Good

**70%+**  
of acute EHR

**24%+**  
of ambulatory EHR

Market leaders in lab, long-term care, retail pharmacy and more

### Founding



### Contributor



### General



Source: SK&A, a Cegedim Company and KLAS

"EHR Vendor Market Share by Physician Size" SK&A. January 2015.

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Initial Service Provider



# CommonWell Timeline

In 2013 we announced our intent and built a real-world service

2013

- Launched Alliance
- Built Service

In 2014 we productized the service and began scaling membership

2014

- Deployment
- Opened Membership

In 2015 we're deploying nationally and increasing our scope.

2015

- 5,000 Provider Sites
- New Use Cases

# Components of a functional data exchange model

## Value Proposition

**What is the problem being solved?**

**Does solving it create value relative to costs?**

## Solution

**Does the technology + policy actually work?**

**Does it solve the intended problem for the intended users?**

## Distribution

**Can customers access your solution?**

**Can customers interact with your solution?**

## User Experience

**Does the user want to use the solution?**

**Is the solution simple, easy, intuitive?**

# CommonWell Health Alliance: our initial use case

## Value Proposition

What is the problem being solved?

Does solving it create value relative to costs?

- Person-centric data
- Query & retrieve
- Documents & data
- Reasonable cost
- All of healthcare, nationally

## Solution

Does the technology + policy actually work?

Does it solve the intended problem for the intended users?

- Person-centric architecture
- Single interface
- Active central-broker services (RLS, etc.)
- Standards to lower cost and broaden availability

## Distribution

Can customers access your solution?

Can customers interact with your solution?

- Vendor-led organization
- Access built into HIT
- National roll-out

## User Experience

Does the user want to use the solution?

Is the solution simple, easy, intuitive?

- Built into workflow – no swivel chair
- Changing the patient-provider experience
- Soliciting greater input from users directly

# Favorable conditions enabled CommonWell to emerge

## Incentive alignment

- Evolving payment models that required the exchange of data
- MU2 incentives to adopt standards and exchange data
- Political will of the founders, members and subscribers

## Meaningful consequences

- Potential repercussions (hard + soft) associated with data blocking
- Importance of interoperability in government contracting

## Building blocks

- Broadly-adopted reusable standards, e.g., CCD, FHIR, XDS, etc.
- Policy precedents for health information exchange, e.g., HIPAA, BAAs, etc.

## People

- Inspired and dedicated individuals who know they can affect change
- CEOs who believe in the vision and mission

# Recommendations

## 1. Strengthen the building blocks:

- Tighten certification of formatting standards (CCDA, FHIR)
- Provide guidance on those areas of HIPAA that create the most confusion

## 2. Simplify certification by leveraging a transcendent truth: Real-World Data Exchange > Interoperability + Certification

## 3. Provide strong and focused guideposts for behavior:

- Make actual data exchange a condition of participation in federal programs
- Treat data blocking harshly: technical challenges, historical business practices, relative business priorities are all legitimate causes of illiquidity – the fact that some vendors (and some providers) exploit these points of friction is *unethical*

## 4. Let innovation thrive: no pre-conceived or pre-determined set of strategies is going to succeed





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**References**

[www.commonwellalliance.org](http://www.commonwellalliance.org)

Community blog:

[www.commonwellalliance.org/blog](http://www.commonwellalliance.org/blog)

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