Health-care Information Sharing
Pilot
Initial Findings
Pilot Strategy

- Developed a Workgroup to collect information on Health-care Initiatives

- Collected data and conducted analysis using the following criteria:
  - Initiative Trends - Are there multiple efforts doing the same type of thing?
  - Funding - Is there a trend in who is funding more - how is this helping Health-care information sharing?
  - Initiative leader - Is there commonality in who is driving consolidation and information sharing?
  - Challenges - What are the challenges that the majority of the initiatives share?
  - Successes – Can we leverage one or more initiatives for building the foundation on health-care sharing?
  - Stove-piping - Is possible to see that the successful initiatives only helped a small part of the entire industry?
  - Technology and Standards - Is a certain type of technological solution being used the most in the industry?
Initial Findings
Observations: General

• There are a number of SOA related healthcare activities in the Federal sector
  • This may be a potential area of redundancy and duplication
  • Most of the SOA activities are in the federal space.

• Several standards being used in the industry, with no specific trends noted so far.

• There is no “standard” framework being used in capturing health data to ensure standard organization of information

• Integrated health systems (for example Kaiser Permanente) has implemented a system-wide HER in some regions. In those areas physicians have used such consultations to reduce the number of unnecessary office visits.
Observations: Specific

- **Personal Healthcare Records (PHR)**
  - "PHR" means different things to different people. There is NO universally accepted definition.
  - New PHR capabilities are appearing in the market faster than policymakers can decide how this technology should play a role in health care.
  - We must learn from the initial successes and failures of PHR implementations. This will refine our understanding of how best to deploy PHRs over the next five years so they improve personal and public health.

- **Implementing Health IT Systems**
  - The ability of health IT systems to speed the exchange of data and expand the amount of information that is shared also increases the risk that the confidentiality of personal health care information could be compromised.
  - Efforts to clarify and update federal and state laws regarding privacy are well under way, but the final form of those laws is uncertain—another factor that could be constraining the widespread adoption of health IT