

[HHS Wants Patients to Have Seamless, Free Access to their Health Data](#)

New efforts would require healthcare entities to offer immediate electronic access by 2020 and to make shopping for care easier with price transparency.

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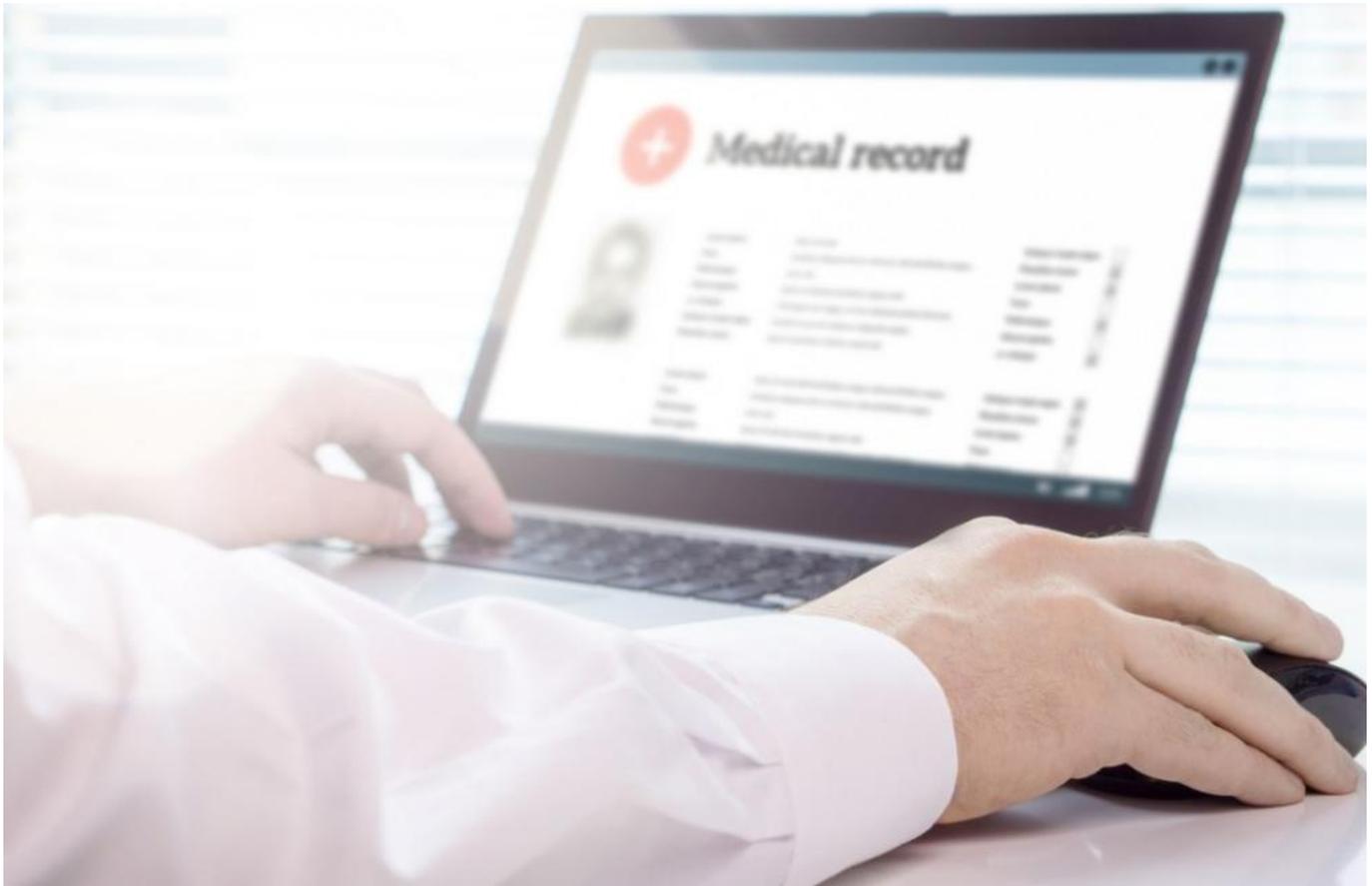


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The [Health and Human Services](#) Department proposed new rules to increase interoperability of electronic health information by providing patients with secure access to all their medical data, allowing them to move freely from provider to provider and to benefit from innovative health mobile apps.

The Centers for Medicare and Medicaid Services and the Office of the National Coordinator for Health Information Technology issued the rules Feb. 11.

The rules broadly require that patients' electronic access to their health information be made available at no cost. But ONC and CMS aligned additional provisions and proposals to make this data even more usable and to ensure healthcare providers have the standardized requirements and technology to drive the change.

CMS and Data

Specifically, CMS is [proposing](#) that Medicaid, the Children's Health Insurance Program, Medicare Advantage plans and qualified health plans in the federally facilitated exchanges be required to provide enrollees with "immediate electronic access to medical claims and other health information electronically by 2020," according to the statement.

As part of a "patient-centered healthcare" model, CMS wants to require that these healthcare providers adopt open data-sharing technologies so that patients can move between plans and providers with their data at ease. This would make transition of care seamless, allow information to follow the patient and reduce redundancies in procedures and testing.

CMS also proposed to publicly report providers or hospitals that are "information blocking," or limiting the availability, disclosure and use of electronic health information. Currently, providers must attest to whether they are information blocking by answering a series of questions. If the answer to any of those questions indicates information blocking, HHS wants to make that public, hoping this deters providers and clinicians from doing so.

Plus, CMS' proposes to the healthcare delivery system fall in line with the [MyHealthEData](#) initiative by enforcing a seamless flow of health information, making it easier for patients and providers to access health information and releasing this data to researchers.

"By requiring health insurers to share their information in an accessible, format by 2020, 125 million patients will have access to their health claims information electronically," said CMS Administrator Seema Verma in a statement.

On a Feb. 11 press call about the proposed rules, Verma encouraged every healthcare provider to continue finding new ways to empower patients by making it easy for them to understand their own healthcare information and increasing price equality transparency.

ONC, Interoperability APIs and Price Transparency

ONC is [proposing](#) that the healthcare industry adopt standardized application programming interfaces to keep health information access secure and to provide patients with new tools that allow them to access structured and unstructured electronic health information formats on mobile devices.

“We are requiring standards-based application program interfaces (APIs); that is the underlying foundation of getting patients their medical record so that they control it, and control it in a modern, app, smartphone kind of way. And we put in a lot of provisions to ensure security and privacy for patients,” said Don Rucker, the national coordinator for health IT, on the press call.

The ONC rule also asks for comments on pricing information that could be included as part of a patient’s electronic health information so the public can see what they are paying for healthcare. All of these tools, according to Rucker, could also allow patients to “shop for and coordinate their own healthcare,” he said in the written statement.

“We have heard a lot of concerns that the interoperability is technically there, but because of pricing strategies and shutting down market competition, those APIs are not effectively available,” Rucker said. So the ONC’s proposed rule would establish a reasonable set of pricing structures to improve transparency.

Rucker refers to two kinds of transparency here. The first is transparency of the product — in this case, the care a patient is receiving. Rucker compares this to reviews when online shopping. The second is pricing information, so part of ONC’s interoperability proposed rule is a request for information.

“It turns out that getting pricing information transparent is very complicated and has a huge structure to it from decades of regulation, and we are exploring how to unlock that information and empower the American public on that,” Rucker said. HHS is dedicated to getting patients to the point where they are in control of their medical records and are shopping for care.

Working Together

ONC’s and CMS’ rules align — CMS proposes that healthcare entities must use the same advanced API standards as those proposed by ONC, as well as a set of content and vocabulary standards of clinical data classes.

But this interoperability doesn’t stop at patients being able to access all their health data from one provider to the next. With all this data, patients can benefit from the 1,500 app developers that are building new tools for patients to be able to put their data in one place, understand the data and increase engagement around their own health, according to Verma. Tools like prescription reminders, preventative care tips and apps that help organize medication are a few of the possibilities. And, of course, patients will be able to provide all this data to new providers, improving patient care.

If patients chose to donate their data and complete medical records to researchers, it can “spur a new wave of innovation in healthcare treatment,” Verma said.

HHS hopes these changes and combined proposed rules strengthen interoperability in the healthcare industry and health IT infrastructure across systems, patients and providers, and enable seamless and secure access to patient electronic healthcare information.

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