



AMERICAN ACADEMY OF
ORTHOPAEDIC SURGEONS

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October 16, 2018

Department of Health and Human Services
Office of the National Coordinator for Health Information Technology
Attention: EHR Reporting Program Request for Information
Mary E. Switzer Building
330 C Street, S.W.
Washington, D.C. 20201

Submitted electronically via <http://www.regulations.gov>

Subject: EHR Reporting Program Request for Information

On behalf of over 34,000 orthopaedic surgeons and residents represented by the American Association of Orthopaedic Surgeons (AAOS), we appreciate the opportunity to provide comments on the Office of the National Coordinator for Health Information Technology (ONC) Request for Information regarding the establishment of the Electronic Health Record (EHR) Reporting Program, published in the Federal Register on August 24, 2018.

AAOS believes, when properly designed and utilized, health information technology (health IT), such as EHRs, Personal Health Records (PHR)s, e-prescribing (eRx), and secure messages can improve patient safety, increase clinical efficiency, reduce costs, provide for the seamless transfer of vital patient information, and allow physicians to better utilize their time and expertise treating patients. The establishment of the EHR Reporting Program should have these same goals in mind and strive toward these outcomes.

Data Reported by Health IT Developers versus End-Users:

What types of reporting criteria should developers of certified health IT report about their certified health IT products: That would be important to use in identifying trends, assessing interoperability and successful exchange of health care information, and supporting assessment of user experiences?

Certified health IT products interface with many other health IT applications. One such example are Qualified Clinical Data Registries (QCDR)s, which regularly communicate with certified health IT products and provide additional detailed information about patients, procedures and medical devices that may not be routinely collected by EHRs, administrative, or claims data. As more physicians become interested in using these registries to improve patient care, greater consideration and importance is placed on the ability for a certified health IT product to work seamlessly with these applications.

AAOS believes it should be a requirement of ONC certification, that a certified EHR product share data with clinician-led QCDRs to ensure registries have efficient and cost-effective access to clinical outcomes data. This will go a long way toward preventing EHR vendors from blocking or impeding such access. Additional reporting criteria should require developers and vendors of certified health IT products to provide detailed information on compatibility with other health IT products, like QCDRs. A compatibility rating could also be developed based on feedback from physicians and other users of certified health IT products and their ability to interface with other health IT applications.

Health IT Developer-Reported Criteria:

If you have used the certified health IT product data available on the ONC Certified Health IT Products List (CHPL) to compare products (e.g., to inform acquisition, upgrade, or customization decisions), what information was most helpful and what was missing?

Greater clarity on certified health IT products is critical. As mentioned in ONC's Report to Congress on Health Information Blocking in April 2015, ONC found that providers are left to compare and shop in "a marketplace that is opaque and in which acquirers often lack up-front information." The establishment of a new EHR Reporting Program for ONC certified health IT products presents a golden opportunity to meaningfully address this issue, improve transparency, increase competition, and raise the standard for health IT developers and vendors.

AAOS thanks ONC for soliciting input in this area and recommends the following:

1. Certified Health IT Products List (CHPL) should be more consumer and physician-centric
 - One of the main issues with the current CHPL is that it contains limited, yet arcane information that is geared towards developers instead of consumers and physicians who will be using a given product. The CHPL has the potential to be an important resource and location for impartial data, despite an otherwise nebulous health IT marketplace.
 - The CHPL currently contains everything from the Certification Edition, CHPL Product Number, and Developer Name, to more detailed information like the Accessibility Standard, Functionality Tested, and Safety Enhanced Design (SED) specifications. While these are important and useful from a technical perspective, they are not consumer or physician-centric, and do not address the main considerations that drive why a consumer or physician may choose to purchase one product over another. More important considerations for a purchasing physician might be: How much does this product cost? How long will it take to implement this new product into my practice? How much time does it take to train staff on this product? How quickly will staff become comfortable with this product? How much time will it take me to complete specific tasks using this product vs. another? How do other physicians and peers rate this product? How easily am I able to switch to another product if needed? Does this product have compatibility with other products? Collecting this information through reporting will help ensure that the CHPL can become a universal, well-recognized tool for aiding consumers and physicians in purchasing the best product for their patient and practice needs.
 - The CHPL does not identify user interface performance and/or user interface issues that may exist with respect to EHRs. Oftentimes, EHRs can have user interface issues that make clinical work cumbersome and are not intuitive for physicians. Incorporating this

information within the CHPL could be very useful for consumers and physicians when making appropriate decisions for selecting EHRs and other health IT products.

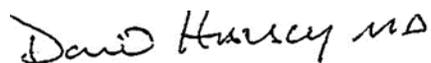
2. Create a comprehensive, continuous feedback loop for assessing certified health IT products

- Another issue with the current CHPL list is that it provides a very static picture of a certified health IT product. While the CHPL provides the certification date, there is no mention of any improvements that a certified health IT product may have made in following years, or additional features incorporated. Additionally, as mentioned above, information currently displayed is not comprehensive and user-specific. One step ONC could take is to develop a quarterly, annual, or biannual survey of certified health IT products with respect to security; interoperability; usability and user-centered design; conformance to certification testing; and other categories as appropriate to measure the performance of certified EHR technology, which could then be posted to the corresponding certified health IT product listing and made comparable on the CHPL. Surveys from existing users could help inform which products are performing better, and assist prospective consumers and physicians more accurately assess the usefulness of a product. Some measures that the survey could collect, and report include the average number of clicks to perform a specific task, and the average amount of fields required to enter to complete a specific task.

AAOS supports ONC efforts to improve reporting and transparency of certified health IT products and thanks ONC for soliciting input on this important issue. Opportunities exist to improve clarity and transparency in the health IT marketplace, but it must come with input from physicians, who are the ultimate users of many of these applications. By incorporating physicians throughout these discussions, it will ensure that health IT can successfully reduce physician burden while enhancing clinical decisions that are best suited for patient and practice needs.

Thank you for your time and consideration of the American Association of Orthopaedic Surgeons comments on the ONC: Request for Information regarding the establishment of the Electronic Health Record (EHR) Reporting Program. If you have any questions on our comments, please do not hesitate to contact William Shaffer, MD, AAOS Medical Director by email at shaffer@aaos.org.

Sincerely,



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