



AMERICAN ACADEMY OF
ORTHOPAEDIC SURGEONS

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February 20, 2018

Office of the National Coordinator (ONC) for Health Information Technology
U.S. Department of Health and Human Services
330 C St SW, Floor 7
Washington, DC 20201
Via email to exchangeframework@hhs.gov

RE: Draft Trusted Exchange Framework and Common Agreement Comments

On behalf of over 34,000 orthopaedic surgeons and residents who comprise the membership of the American Association of Orthopaedic Surgeons (AAOS), we are pleased to provide comments on the Draft Trusted Exchange Framework and Common Agreement (TEFCA). The AAOS applauds the ONC's ongoing work on the common set of principles for trusted exchange and minimum terms and conditions for trusted exchange.

AAOS strongly supports the development of interoperability standards for all EHRs. We also support the development of appropriate standards for meaningful use of electronic health records by government agencies and private carriers which balance the needs of patients and their families, physicians and their staff, and regulators. Finally, we believe these standards should be collaboratively developed by physicians through their professional organizations in cooperation with government agencies. The process should emphasize the requirements for the highest level of quality patient care while recognizing the limits and clinical specialty focus of physicians who use the systems.

Transparency

We support that proposed Qualified HINs should voluntarily make terms and conditions for participating in their network easily and publicly available via their website. We support Qualified HIN's privacy practices be published, current, and made publicly available. We suggest establishing the need for an audit log that is maintained by the data owner, where the record of source is kept, that tracks where the data was sent, who requested the information, and what information was sent.

Cooperation and Non-Discrimination

We are highly encouraged with the proposal that Qualified HINs and their participants should practice data reciprocity. We support the standards outlined because physicians need to be able to see and integrate certain key pieces of a patient's demographics and health history into their electronic health records from other sources to provide more comprehensive care. The deficit in many locations is that home health agencies, skilled nursing facilities, hospices, long-term care facilities, and others may or may not have electronic medical records. Often, if they do, the

systems do not talk to each other due to the local system build. The systems are locally configured and not turnkey systems on the market.

Security and Patient Safety

We appreciate the proposal that where possible, standard nomenclatures should be used and be exchanged in a data format that is consumable by a receiving system, such as the C-CDA or via FHIR Application Programming Interfaces (APIs). AAOS supports open APIs for the bidirectional free flow of data. However, we are concerned how this will be implemented and strongly suggested that implementation be multi-stakeholder, including Qualified Clinical Data Registries (QCDRs).

Data-driven Accountability

AAOS encourages the exchange of multiple records for a cohort of patients at one-time in accordance with Applicable Law to enable identification. The ability to exchange multiple patient records at one time, rather than potentially performing hundreds of data pulls or pushes for a panel of patients is beneficial for QCDRs in providing accurate reports and defining quality measures.

Thank you for your time and consideration of the American Association of Orthopaedic Surgeons' suggestions on implementation of trusted exchange framework and common agreement provisions. We appreciate ONC's continued efforts to engage stakeholders to achieve nationwide interoperability.

Sincerely,

A handwritten signature in black ink, appearing to read "Wilford K. Gibson". The signature is written in a cursive, somewhat stylized font.

Wilford K. Gibson, MD,
Chair, AAOS Council on Advocacy

Cc: Thomas E. Arend, Jr., Esq., CAE, CEO, AAOS
William O. Shaffer, MD, Medical Director, AAOS