

Collaborative For Universal Health

P.O. Box 80566
Rancho Santa Margarita, CA 92688-0566
Phone (949) 713-5500
Facsimile (949) 713-5501

March 25, 2011

Ms. Anita Massey
North Carolina Health Information Exchange (NC HIE)
c/o Anita.Massey@NC.gov

RE: RFC # 201101-01

Respondent Organization: Collaborative For Universal Health (C4UH)
Respondent Names: Directors: Stephen Carson, MD & John Odden
Respond Email Address: John.Odden@gmail.com

Dear Ms. Massey:

- We are responding to NC HIE's Request for Comments regarding Core HIE Services and Value-added HIE Services in fulfillment of NC HIE's Strategic and Operational Plans. NC HIE appears well positioned to immediately deploy HHS ONC Direct Messaging to operate both Core HIE and Value-added HIE Services for the benefit of Critical Access Hospitals, rural providers and other underserved populations ("Underserved Providers") despite diminishing funding and the following challenges: Underserved Providers cannot support the up-front costs nor can they sustain or maintain the cost of brand name HIE solutions.
- While HHS ONC Cooperative Agreement awardees struggle to include Underserved Providers, they are challenged with operating Direct Messaging compliant with Direct Project Reference Implementation open source software.
- Although traditional HIE vendors claim to be able to deliver "gateway services" that are fully compliant with Direct Messaging, the required timelines and actual costs to construct, validate and operate gateway services are highly problematic.

C4UH is uniquely positioned to help the NC HIE to download, configure and operate Direct Messaging Reference Implementations from the ONC open source library. C4UH can also provide fully supported virtual machine images of Direct Messaging, which are installed by clicking a link in an e-mail, entering a personal user ID and password and immediately accessing Direct Messaging services.

As a not for profit organization, C4UH is proud of its ability to help NC HIE to collaborate with your regional stakeholders to implement a **simple, cost effective and sustainable** solution.

We would welcome the opportunity to discuss NC HIE's objectives and the related value offered via the Direct Open Source Reference Implementations. Thank you for your consideration.

Best regards,

John Odden

John Odden, Director
949.842.2468 Mobile

Stephen Carson, M.D.

Stephen Carson, M.D., Director
858.349.1830 Mobile

Attachment

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Response To: Request for Comments Input on Requirements for North Carolina's Statewide Health Information Exchange Services

1. INTRODUCTION –	<i>Understood & Fully Compliant</i>
1.1. Overview –	<i>Understood & Fully Compliant</i>
1.2. Dates and Times –	<i>Understood & Fully Compliant</i>
1.3. Submission Instructions –	<i>Understood & Fully Compliant</i>

2. BACKGROUND –	<i>Understood & Fully Compliant</i>
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3. GUIDANCE ON PREPARATION OF COMMENTS –	<i>Understood & Fully Compliant</i>
3.1. General Comments –	<i>Understood & Fully Compliant</i>

C4UH is capable of fulfilling all HHS requirements for Direct Messaging using the Direct Open Source reference specifications using typical add-on desktop or data center software.

C4UH is pleased to provide the following descriptions of our current capabilities in HIE development, activation and operations:

- a) Platform currently in use or development
 - ONC's Direct Project offers both Java and .NET reference implementations. Either version may be affordably downloaded and operated on existing computer resources. C4UH is able to wrap a Direct Open Source reference implementation into a MokaFive LivePC. The resulting virtual software image may be sent to any user in any setting, where the LivePC may be activated with a user's previously established User ID and Passcode.
- b) Types and number of entities with whom our organization currently exchanges data
 - The C4UH approach allows each stakeholder to use ONC's Direct Messaging HIE methodology to exchange encrypted data with any authorized provider. Our approach does not allow any vendor to hold, de-identify, sell or manipulate HIE data and thus eliminate any of the traditional concerns of community stakeholders.
- c) Current types of data exchanged
 - There is no Direct Messaging data exchanged data between the HIE and provider. Instead, our approach is to simply allow the NC HIE to specify the format for desired provider's Direct Messaging address, which then appears like any other e-mail address. NC HIE simply provides C4UH with terms and conditions for federation of Direct Addresses for access by other stakeholders. C4UH establishes links to support this essential "Cross Credentialing" and providers still use Push Mode messaging to control their engagement with NC HIE. It helps that most Direct Messaging use cases and User Stories fully support typical approaches to operationalizing Direct Messaging provider Push Mode HIE. C4UH does not exchange, sell or otherwise manipulate NCHIE user directory information. We simply function as a trusted operations partner to activate Direct Services within NC HIE as required.

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3.2. Suggestions –

Understood & Fully Compliant

C4UH applauds the efforts of the NC HIE Clinical and Technical Work Group in developing a requirements matrix for a traditional prime vendor HIE solution. The NC HIE Clinical and Technical Operations Work Group's current matrix of statewide HIE requirements (*NCHIE RFP Requirements_2011-02-28.xls*) properly reflects the range of issues and recommendations relevant to prime vendor HIE. While the nuances of prime vendor HIE solutions are analyzed, a very simple RFP can activate ONC Direct Messaging across the NC HIE service area without encumbering major funding. Less than \$35,000 will enable significant numbers of providers and volumes of Direct Messaging.

For those interested in providing more detailed comments on specific attributes of our expected requirements for HIE services, please consider the following questions:

- a) What types of clinical functions would be helpful for the statewide HIE to support?
 - This is properly resolved by the NC HIE Clinical and Technical Work Group. Direct Messaging embraces all clinical functions.

- b) What Core and Value-added HIE services are of the most value to your organization and why?
 - HIE services have no extra "value" to C4UH. ALL transactions are served with a consistent high level and compliant encryption.

- c) If you anticipate exchanging data with NC HIE's statewide services, how would you expect to request information? Additionally, how would you present information you received from statewide HIE services to your users?
 - C4UH does not issue requests or worry about user interface or presentation layer concerns. Providers use Direct Messaging and interact directly and privately with other providers as they mutually agree.

- d) Among the Statewide HIE requirements currently being considered by the NC HIE Clinical and Technical Operations Work Group, are there any modifications, additions you would suggest?
 - We defer to the NC HIE Clinical and Technical Work Group. Direct Messaging simply activates Provider Control Push Mode messaging when and where desired or required.

Patients should be enabled to "own and control" their own identity. The patient is very much the centerpiece of any HIE. A Patient Registry should be an integral part of the Core NC HIE Services. Both forthcoming Accountable Care Organizations and Patient Centered Medical Home activity will directly encourage patient participation to increase compliance while also helping to reach Meaningful Use benchmarks. The NC HIE should openly recognize patient participation via a Patient Registry from the on-set so the NC HIE message is dynamic, informing all community sectors about future participation.

The privacy and security concerns will only escalate as the bar is raised for Identity Management, Authentication and Consent Management functions that will be requested of patients in order to receive documented care and to share PHI. By incorporating a Patient Registry and communicating such early on, the NC HIE can help set a positive tone for patient awareness and involvement during the trust building, exchanging health information process.

We strongly recommend a non-profit, open standards-based, non-commercial solution for Direct Messaging and Patient Registry, such as C4UH, can deliver to NC HIE stakeholders.