

November 4, 2005

Ms. Karen Ignagni
President and Chief Executive Officer
America's Health Insurance Plans
601 Pennsylvania Avenue, NW
South Building, Suite 500
Washington, DC 20004

Dear AHIP:

We would like to address and comment upon the emerging trend by AHIP members to launch personal health records, or PHRs. We understand that it is the intent of health plan PHR projects to make it possible for physicians and/or patients to view personal health data via a Web site. These data are stored electronically in health plan databases, and may not now be easily accessible to practices. They include such items as demographics, encounter information, laboratory results, and prescription drug and medication information.

Access to these informational stores is potentially very useful to physicians and other clinicians engaged in care management in the practice setting. They may also help populate a personal health record that is used by patients to improve continuity of information flow between providers leading to better quality, safer, and more efficient medical care. However, **interoperability** of these PHRs is a very critical "must have" component for their use by physicians.

We urge AHIP to assure that a **single standard** for the content and message structure is utilized in PHR projects initiated by its diverse health plan members. A single national standard is necessary to avoid the great problems that will arise should there be multiple data formats for PHRs originating from different health plans. We must avoid the situation in which multiple proprietary and non-standard PHRs are launched by AHIP members. This could increase administrative tasks of re-typing and hand-entering data in the physician's office and clinics, and might actually introduce new opportunities for error and confusion rather than contribute to their reduction.

Undoubtedly, electronic health records (EHRs) will be an important source, and in many cases the primary source, for PHRs. Much of the data required for a portable PHR that can be utilized by patients to improve continuity of information as they move through the health care system, will be contained in their doctor's or clinic's EHR and available for this use. Similarly, and regardless of the source of the contained data, it can be expected that patients and consumers will increasingly present their PHRs in electronic format to medical practices, emergency rooms, and other health care providers. Thus, it is vital that we advocate the requirement for interoperability between PHRs and EHRs.

PHRs that conform to a **single standard** will enable **interoperability**, which allows for the data sets to be read and interpreted by both people and computer systems, permitting data to flow from health plan to medical practice computer, or portable storage device to computer system. This increases efficiencies by reducing time spent completing paper forms and copying data to and from incompatible software programs by hand entry.

We believe that it would be a small but meaningful breakthrough towards improvement in convenience, quality, and patient safety, if consumers were able to carry with them, and/or have accessible to them from a Web site, their core personal summary health information, such as demographics, a list of problems and diagnoses, current medications, immunization history, allergies, and the like. The “personal health record” that is portable and electronic could make health care much more user-friendly and do so in a relatively short period of time. The use of a **single standard** in the PHR construct will allow for patients and providers to automate the exchange and sharing of the information contained in it.

We invite AHIP to join us in supporting a single standard that will enable PHR and EHR interoperability as anything less will lead to chaos, confusion, and increased inefficiencies.

Should you have questions or wish to discuss items addressed in this correspondence, please call the office of Trevor Stone, Manager, Private Sector Advocacy at the American Academy of Family Physicians at (913) 906-6000, ext. 4178.

Sincerely,

American Academy of Dermatology Association
American Academy of Family Physicians
American Academy of Neurology
American Association of Clinical Endocrinologists
American Association of Oral and Maxillofacial Surgeons
American College of Foot and Ankle Surgeons
American College of Obstetricians & Gynecologists
American Osteopathic Association

Enclosure