January 28, 2018

Donald Rucker, M.D.
National Coordinator for Health Information Technology
Office of the National Coordinator for Health Information Technology
Department of Health and Human Services
330 C Street SW, Floor 7
Washington, DC 20201

RE: Strategy on Reducing Burden Relating to the Use of Health Information Technology (IT) and Electronic Health Records (EHRs)

Dear Dr. Rucker:

On behalf of the National Association of County and City Health Officials (NACCHO), I write to provide comment on the Office of the National Coordinator for Health Information Technology (ONC) Strategy on Reducing Burden Relating to the Use of Health IT and EHRs. NACCHO is the voice of the nearly 3,000 local health departments across the country. These city, county, metropolitan, district, and tribal departments work every day to protect and promote health and well-being for all people in their communities.

NACCHO appreciates the effort by the agency to reduce burden in the use of health IT while maximizing its potential for sharing information in an appropriate, interoperable, and secure manner. Health IT and EHRs, layered with federal investments in areas such as immunization registries, syndromic surveillance, and electronic case reporting, have increased the ability for clinicians to quickly share health information that better enables local health departments to promote, protect, and preserve health in our communities. While local health departments have made substantial progress toward implementing their own health IT systems, limited funds for full implementation and engagement of local health departments have posed challenges in progress toward optimal interoperability among health IT systems.

In context of these circumstances, NACCHO supports efforts and attention to the resources necessary to make data capture and sharing as efficient as possible. NACCHO also promotes local health department involvement with state and federal partners to improve interoperability across health information systems. NACCHO encourages the ONC to support the development of interoperable information systems to support business processes, as well as bi-directional communication with clinical care facilities and local health departments. Relying on outdated systems will expose local health departments to cumbersome inefficiencies and unnecessary risks. Systems that are not interoperable will lead to delays in taking actions to protect the public’s health. These delays can increase the incidence and severity of disease and increase the cost and staff time necessary for health departments and their partners to effectively respond.
NACCHO offers the following comments related to the strategy and recommendations outlined in the report.

**Strategy 2: Inventory reporting requirements for federal health care and public health programs that rely on EHR data to reduce collection and reporting burden on clinicians. Focus on harmonizing requirements across federally funded programs that impact a critical mass of health care providers.**

*Recommendation 1: The Department of Health and Human Services (HHS) should convene key stakeholders, including state public health departments and community health centers, to inventory reporting requirements from federally funded public health programs that rely on EHR data. Based on that inventory, relevant federal agencies should work together to identify common data reported to relevant state health departments and federal program-specific reporting platforms.*

NACCHO supports this approach and urges that local health departments be included as key stakeholders for this recommendation. Local health departments are on the front lines alongside clinicians to enable the health and well-being of the people they serve. Furthermore, reporting requirements are primarily defined at the state and local level. In order to decrease the reporting burden, state and local public health jurisdictions will need to be heavily engaged to inform these requirements. As local health departments are integral to data collection and reporting, it is critical that national discussions and subsequent harmonization efforts take into account the perspectives of those agencies.

*Recommendation 2: HHS should continue to work to harmonize reporting requirements across federally funded programs requiring the same or similar EHR data from health care providers to streamline the reporting process across state and federal agencies using common standards.*

While data standards are critical to reporting data elements and streamlining data reporting, NACCHO emphasizes that harmonization should consider the needs of different programs and ensure programs’ perspectives are adequately represented. This can help all stakeholders determine with health departments how to better address and overcome barriers to harmonization. This is particularly important for entities like local health departments who were largely not included in the Health Information Technology for Economic and Clinical Health (HITECH) Act health IT funding streams and who require funding in order to implement a common standards-based approach among public health agencies. Additional resources for local public health, along with partnerships between local health departments and their state and federal partners, would allow for a fully integrated public health information system.

NACCHO appreciates the efforts of the ONC to gather input on the strategy to reduce burden in the use of health IT. NACCHO looks forward to continuing to collaborate with ONC as a partner in this effort. If you have any questions, please contact Eli Briggs, Senior Director of Government Affairs at ebriggs@naccho.org or 202-507-4194.

Sincerely,

Lori Tremmel Freeman, MBA
Chief Executive Officer