

AGENCY-SPECIFIC PLAN FOR THE NATIONAL QUALITY STRATEGY

Office of the National Coordinator for Health Information Technology (ONC)

| Program | Description | NQS Priorities* | | | | | | Current-Year Activities | Metrics | Future-Year Plans** | Vision/End Goals |
|--------------------------|--|-----------------|--------|--------|--------|--------|--------|--|---|---|---|
| Beacon Community Program | The Beacon Community Program demonstrates how health IT investments and Meaningful Use of Electronic Health Records (EHRs) advance the vision of patient-centered care, while achieving better health and better care at lower costs. ONC selected and provided grants to 17 communities throughout the United States that had already made inroads in the development of secure, private, and accurate systems of EHR adoption and health information exchange. | 1 ✓ | 2 ✓ | 3 ✓ | 4 ✓ | 5 ✓ | 6 ✓ | <ul style="list-style-type: none"> Ensure that at least 13 Beacon Communities show improvement on two focus measures with at least 1% improvement over baseline. Launch the Beacon Nation project, hosted by the Hawaii Beacon Community. The Beacon Nation project's goal is to spread best practices and lessons learned in using health IT to support population health improvement efforts and extend the lessons of the 17 Beacon Communities to other pioneering communities across the country. Study Beacon Communities' results to better understand the linkages between payment, health IT, and outcomes, and share findings with the Center for Medicare & Medicaid Innovation. | This program tracks the number of engaged physicians in Beacon Community interventions, the number of patients touched, and the number of focus measures improving over baseline. | <ul style="list-style-type: none"> Disseminate nationally program-wide successes and lessons learned (P2, Goal 3), (P3, Goal1), (P4, Goal 3), (P6, Goal 2). Continue to identify the IT-enabled clinical interventions and reporting tools that support accountable care (P2, Goal 3), (P3, Goal 1), (P4, Goal 3), (P6, Goal 2). Advance engagement with Beacon Communities and "sister communities" or organizations (P2, Goal 3), (P3, Goal1), (P4, Goal 3), (P6, Goal 2). Continue to promote and disseminate resource materials and tools related to health IT adoption and implementation (P2, Goal 3), (P3, Goal1), (P4, Goal 3), (P6, Goal 2). | <ul style="list-style-type: none"> Further the sustainability of Beacon Community interventions that support better care and better health at lower costs with health IT-enabled care delivery. Enact Beacon Nation Change Packages. Promote national awareness and implementation of Beacon-like, IT-enabled interventions to support three aims: <ol style="list-style-type: none"> Build and strengthen health IT infrastructure and exchange capabilities within communities to pursue sustainable health care quality and efficiency. Translate investments in health IT to measureable improvements in cost, quality, and population health. Develop innovative approaches to performance measurement, technology, and care delivery to accelerate evidence generation for new approaches. |

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| Clinical Decision Support (CDS) | CDS provides clinicians, staff, patients, or other individuals with knowledge and person-specific information, intelligently filtered or presented at appropriate times, to enhance health and health care. CDS encompasses a variety of tools to enhance decisionmaking in the clinical workflow. | 1 | 2 | 3 | 4 | 5 | 6 | <ul style="list-style-type: none"> Develop a Quality Improvement Strategy that focuses on using Clinical Quality Measures (CQMs) and CDS to improve care. Create decision aid tools in the Clinical Decision Support enabled Quality Improvement for Meaningful Use (CDS4MU) project, under a contract with the Health IT Research Center (HITRC) program. Develop a standard way to create and share CDS interventions through health eDecisions. Construct innovative ways to deliver CDS and improve health IT usability through the Strategic Health IT Advanced Research Projects (SHARP) program. | ONC created a pilot CDS sharing repository (please see Standards and Interoperability for additional metrics). | <ul style="list-style-type: none"> Provide guides for CDS implementation aligned to the National Quality Strategy priorities (P1, Goal 3), (P2, Goal 1), (P2, Goal 2), (P4, Goal 3). Develop CDS interventions that are aligned with the Million Hearts Initiative and appropriate electronic CQMs (P4, Goal 3). Coordinate public and private CDS activities and promote knowledge sharing (P1, Goal 3), (P2, Goal 1), (P2, Goal 2), (P4, Goal 3). | <ul style="list-style-type: none"> Expand use of CDS to support increased quality of care and enhanced health outcomes; decreased errors and adverse events; and improved efficiency, cost-benefit, and provider and patient satisfaction. |
| Clinical Quality Measures (CQMs) Development Program | Electronic CQM development program builds measures and makes open-source tools available that leverage EHRs for quality and public health reporting that align to the National Quality Strategy. | 1 | 2 | 3 | 4 | 5 | 6 | <ul style="list-style-type: none"> Develop a Quality Improvement Strategy that focuses on a plan to use CQMs and CDS to improve care. Build open-source tools to support vendors, providers, hospitals, and data intermediaries to calculate and report quality measures. Begin building Stage 3 Meaningful Use CQMs. Promote the use of CQM reporting tools, including Cypress and popHealth (Cypress is a testing tool of EHRs' ability to calculate Stage 2 Meaningful Use CQMs and popHealth is a tool for providers and vendors to implement summary quality reporting). Collaborate with the Centers for Medicare & Medicaid Services (CMS) to build measures for eligible hospitals and professionals treating adults and children. Work with HHS's Office of the Secretary to improve measures by reducing errors and expediting measure-release timeframes. | This program measures the number of EHR products certified for CQMs, the number of known installations of the popHealth tool, and the number of de novo CQMs developed by end of 2013 (target: 5 CQMs completed). | <ul style="list-style-type: none"> Complete building of Stage 3 Meaningful Use CQMs (P1, Goal 3), (P3, Goal 3), (P4, Goal 3). Create additional testing infrastructure for vendors, hospitals, providers, and others to test measure calculations against a reference implementation (P1, Goal 3), (P3, Goal 3), (P4, Goal 3). Release the Measure Authoring Tool (MAT) to the open-source development community (P1, Goal 3), (P3, Goal 3), (P4, Goal 3). Incorporate additional CQMs into open-source solutions (P1, Goal 3), (P3, Goal 3), (P4, Goal 3). | <ul style="list-style-type: none"> Assure high reliability of electronic CQMs through robust tools for vendors, data intermediaries, and others. Provide low-cost tools to providers for viewing CQM results. |

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| Consumer eHealth Program | The Consumer eHealth Program supports the empowerment of consumers to improve their health and health care through health IT. This program increases consumer access to health information, enables consumers to take action based on their health information, and shifts ways of thinking so consumers feel comfortable asking for their health information and providers encourage their patients to use eHealth tools to manage their care. | | ★ | ✓ | | | | <ul style="list-style-type: none"> Monitor implementation of Stage 2 Meaningful Use requirements for EHRs that enable providers to “view, download, and transmit” data to patients. (Consumers will be able to see their health information, share it with others, and export their data from EHRs into apps and technologies). Develop a standard set of technical specifications for the “Blue Button” that will allow consumers to designate a place where they would like any personal health information updates to go. Collaborate with Blue Button Pledge Program participating organizations to provide consumers with secure, electronic access to health records in a usable format, and to educate them about how to access and use this information to improve their health. | This program tracks the percentage of physicians and hospitals with the capability for patients to view online, download, or transmit information from their health record and the percentage of Americans who have been given electronic access to any part of their health care record. | <ul style="list-style-type: none"> Enable patients to grant access to caregivers as proxies to help them manage their health information (P2, Goal 1), (P2, Goal 3). Develop policies and technology standards that enable consumers to transmit information securely to their clinicians (P2, Goal 1), (P2, Goal 3). Maximize the appeal of Blue Button through alliances with diverse consumer audiences to increase interest in data downloads and sharing (P2, Goal 1), (P2, Goal 3). Explore emerging health/ system issues and their policy impacts for consumers, including big data/aggregation, personalized medicine, and genomics (P2, Goal 1), (P2, Goal 2). | <ul style="list-style-type: none"> Increase consumer access to useful and meaningful health IT tools that enable consumers to take action in their health care. Enable consumers to act as partners in their health care with the support of eHealth tools. |

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| Health Information Exchange | Health information exchange allows health care professionals and patients to access and securely share a patient's vital medical information electronically. There are many health care delivery scenarios driving the technology behind the different forms of health information exchange available today. Health information exchange can support care coordination, patient engagement, effective prevention, and safety. | ✓ | ✓ | ✓ | ✓ | ✓ | | <ul style="list-style-type: none"> • Monitor implementation of Meaningful Use requirements for EHRs that enable providers to share health care data and advance clinical processes. These include health information exchange, e-prescribing of lab results, and electronic transmission of patient care summaries across multiple settings. • Continue implementation of the ONC State Health Information Exchange Program to support States' efforts to rapidly build capacity for exchanging health information across the health care system both within and across States. The program supports 56 States and territories. | <p>This program tracks the following measures:</p> <ul style="list-style-type: none"> • Percentage of community pharmacies that are capable of exchanging health information electronically • Percentage of office-based physicians who are electronically sharing any patient health information with other providers • Percentage of office-based physicians who are electronically sharing patient information with hospitals with which they are not affiliated or ambulatory providers outside their office/group • Percentage of physicians who are electronically sharing patient information using a Summary Care Record • Percentage of non-Federal acute-care hospitals that are electronically exchanging patient health information with hospitals or ambulatory providers outside of their system • Percentage of non-Federal acute-care hospitals that are electronically sharing clinical/ summary care records with hospitals or ambulatory providers outside their system | <ul style="list-style-type: none"> • Encourage breakthrough innovations for health information exchange that can be leveraged widely through ONC's State Health Information Exchange Program, including scalable solutions related to privacy and security requirements, Medicaid and State public health programs coordination, tracking of Meaningful Use health information exchange capabilities in States, meeting gaps in capabilities, and ensuring consistency with national standards (P1, Goal 1), (P2, Goal 3), (P3, Goal 1), (P3, Goal 3), (P6, Goal 2). | <ul style="list-style-type: none"> • Increase electronic health information exchange across the health care system. |

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| Health IT Patient Safety Program | ONC's Health IT Patient Safety Program aims to promote the health care industry's use of health IT to make care safer and to continuously improve the safety of health IT. | ✓ | | | | | | <ul style="list-style-type: none"> • Publish the Health IT Patient Safety Action & Surveillance Plan. • Establish this program and a cross-Agency steering committee on health IT patient safety. • Collaborate with CMS Survey and Certification to train surveyors and use health IT to assist in investigations. • Encourage developers to establish a code of conduct for patient safety. • Oversee Meaningful Use regulations requiring eligible hospitals and professionals to use EHRs for computerized physician order entry (CPOE), medication lists, allergy lists, and problem lists. • Develop health IT safety guides for hospitals and physicians to use in assessing and mitigating health IT safety risks. | TBD | <ul style="list-style-type: none"> • Implement the Health IT Patient Safety Action & Surveillance Plan (P1, Goals 1, 2, and 3). • Continue to use Meaningful Use and standards and certification criteria regulations to advance patient safety and health IT safety (P1, Goals 1, 2, and 3). • Support the implementation of 2014-Edition Standards and Certification Criteria regulatory requirements that health IT developers use quality manufacturing practices and user-centered design in developing their products (P1, Goal 3). • Collect complaints and conduct surveillance related to health IT safety through ONC-Authorized Certification Bodies (ACBs) (P1, Goal 3). • Incorporate AHRQ Common Formats into EHRs to make it easier for providers to report adverse events using EHRs (P1, Goal 1), (P1, Goal 2), (P1, Goal 3). | <ul style="list-style-type: none"> • Safer health care. |

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| Health IT Certification Program | The Health IT Certification Program provides assurance to providers and other purchasers that an EHR offers the necessary technological capability, functionality, and security to help them meet the Meaningful Use requirements under the CMS EHR Incentive Programs. | ✓ | ✓ | ✓ | ✓ | | | <ul style="list-style-type: none"> • Maintain the Certified Health IT Product List (CHPL), which provides the authoritative, comprehensive listing of certified EHR products. • Conduct conformance testing, certification, and technical workshops for 2014-Edition Standards and Certification Criteria. | <p>This program records the following measures:</p> <ul style="list-style-type: none"> • Number of unique certified EHR products • Number of complete EHR ambulatory and inpatient certified products • Number of modular EHR ambulatory and inpatient-certified products | <ul style="list-style-type: none"> • Begin preparing for conformance testing, certification, and technical workshops for future iterations of standards and certification criteria (P1, Goal 3), (P2, Goal 3), (P3, Goal 1), (P3, Goal 3). | <ul style="list-style-type: none"> • Enable market confidence in health IT to perform the necessary technological capability, functionality, and security. |
| Health IT Innovation | Through research grants and challenges, ONC promotes the development of innovative solutions to meet a variety of challenges. The Strategic Health IT Advanced Research Projects (SHARP) program supports innovative research to address well-documented problems that impede the adoption of health IT. ONC's health IT developer contests focus on innovations that support the use of health IT to improve health care. | ✓ | ✓ | ✓ | ✓ | | | <ul style="list-style-type: none"> • Advance research on facilitating information exchange and modularity in health care organizations and improving the overall quality of health care by leveraging existing EHR data to generate new, normalized, structured data. • Conduct health IT developer contests focusing on innovations that clear hurdles related to the achievement of widespread health IT adoption and Meaningful Use that improves quality, safety, and efficiency of care. | <p>ONC tracks the following measures:</p> <ul style="list-style-type: none"> • Number of products and artifacts from the SHARP program that are available in the open-source community or implemented commercially • Number of innovation challenges • Number of participants in the innovation challenges • Number of innovation companies using MU standards <p>ONC also develops granular data element standards to support learning health care system.</p> | <ul style="list-style-type: none"> • Implement the learning health care system roadmap (P2, Goal 3), (P3, Goal 3), (P6, Goal 2). | <ul style="list-style-type: none"> • Create fundamental improvements along critical areas toward a high-performing, learning health care system by translating innovative solutions into health IT products and services. |

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| Health IT Regional Extension Centers (RECs) | Health IT RECs are powerful change agents for health care and help providers achieve Meaningful Use of EHRs, supporting quality improvement and/or transformation goals that align to the National Quality Strategy (NQS). | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | <ul style="list-style-type: none"> Support providers through RECs in achieving Meaningful Use of EHRs, including more than 31,000 medical practices, 133,000 primary care providers (PCPs) equating to 43% of PCPs, 49% of all nurse practitioners; 56% of rural PCPs, 83% of Federally Qualified Health Centers (FQHCs), and approximately 45% of Critical Access and small hospitals that have 50 beds or less. Support providers through RECs in achieving Meaningful Use of EHRs, including outreach and education, EHR support (such as working with vendors, or helping providers choose a certified EHR system), and technical assistance in implementing health IT and using it in a meaningful way to improve care. Help 1,200+ hospitals and rural providers implement and meaningfully use EHRs through a Rural and Critical Access Hospital Community of Practice. Establish the Health IT Vanguard program that consists of providers and their office staff who are using health IT to improve health outcomes. Help providers leverage Meaningful Use to support programs including the Advanced Primary Care demonstration, the Comprehensive Primary Care Initiative, and Medicare Shared Savings Program Accountable Care Organizations (ACOs) initiatives through CMS. Support FQHCs and other providers through RECs to leverage their Meaningful Use work with medical home (Patient-Centered Medical Homes or PCMH) and disseminate success stories. Support electronic lab reporting, immunization reporting and syndromic surveillance of Meaningful Use public health measures. Make information available to providers and practice managers on leading practices and lessons learned on implementing health IT through HealthIT.gov. | <p>These centers track the following measures:</p> <ul style="list-style-type: none"> Number of REC providers demonstrating Meaningful Use (2013 target: from 25,000 to 85,000) Number of REC-partnered Critical Access and small rural hospitals (50 beds or less) demonstrating Meaningful Use (2013 target: 660 CAHs and small rural hospitals) Number of states/public health jurisdictions receiving electronic lab reports, accepting transactions for immunization reporting, and syndromic surveillance. | <ul style="list-style-type: none"> Continue to support providers in becoming Meaningful Users of EHRs (P1, Goal 1), (P1, Goal 3), (P2, Goal 3), (P3, Goal 1), (P3, Goal 3), (P4, Goal 3), (P6, Goal 2). Continue to align RECs investments to help providers leverage achievement of Meaningful Use as an opportunity to participate in additional quality improvement programs such as Accountable Care Organizations, PCMH, Comprehensive Primary Care Initiative, and Million Hearts (P1, Goal 1), (P1, Goal 3), (P2, Goal 3), (P3, Goal 1), (P3, Goal 3), (P4, Goal 3), (P6, Goal 2). Increase the number of REC providers participating in and meaningfully improving care through quality improvement and innovation initiatives (P1, Goal 1), (P1, Goal 3), (P2, Goal 1), (P3, Goal 1), (P4, Goal 3). Increase the number of States/public health jurisdictions receiving electronic lab reports, accepting transactions for immunization reporting, and syndromic surveillance (P3, Goal 3). | <ul style="list-style-type: none"> More than 200,000 eligible professionals and 2,000 eligible hospitals demonstrate Meaningful Use of EHRs. More than 1,000 Meaningful Use Vanguards (MUvers) serving as champions and Health IT Vanguards for Meaningful Use and additional quality improvement programs. Demonstrate through clear metrics that Public Health is an active partner in meaningful use data exchange. Support providers to implement information exchange tools and protocols so they are positioned for Meaningful Use Stage 2. Demonstrably achieve the three-part aim (better care, healthy people/ healthy communities, and affordable care) via REC-supported providers. The National Learning Consortium (NLC) will continue to build an evolving body of knowledge and resources to support health care providers and health IT professionals working toward the implementation, adoption, and meaningful use of EHR systems. |

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| Health IT Standards and Certification Criteria | Health IT standards and certification criteria assure hospitals and health care professionals that the EHR systems they adopt can perform required functions for the CMS EHR Incentive Programs. | 1 ✓ | 2 ✓ | 3 ✓ | 4 ✓ | 5 ✓ | 6 ✓ | <ul style="list-style-type: none"> Monitor implementation of EHRs to achieve Meaningful Use requirements. Begin developing and obtaining public input to inform subsequent editions of health IT standards and certification criteria. | <p>The following metrics are tracked:</p> <ul style="list-style-type: none"> Percentage of eligible hospitals receiving Meaningful Use incentive payments Percentage of eligible professionals receiving Meaningful Use incentive payments Percentage of eligible primary care professionals receiving Meaningful Use incentive payments Percentage of office-based physicians, primary care physicians, and non-Federal acute care hospitals that have adopted basic EHRs | <p>Adopt health IT standards and certification criteria to enable future Meaningful Use requirements and support:</p> <ol style="list-style-type: none"> More rigorous health information exchanges (P1, Goal 1), (P2, Goal 3), (P3, Goal 1), (P3, Goal 3), (P6, Goal 2) Increased electronic transmission of patient care summaries across multiple settings (P1, Goal 1), (P2, Goal 3), (P3, Goal 1), (P3, Goal 3), (P6, Goal 2) Patient engagement with online health information (P2, Goal 3) Clinical quality measures (CQMs) and Clinical Decision Support (CDS) (P1, Goal 3), (P2, Goal 1), (P2, Goal 2), (P3, Goal 3), (P4, Goal 3) | <ul style="list-style-type: none"> Promote the spread of EHRs to improve health care and reduce costs. Use EHRs to increase patient access to self-management tools. Achieve the NQS long-term goals and priorities through EHRs. |
| Health IT Workforce Development Program | ONC's Workforce Development Program aims to guide providers and facilities in using health IT effectively to manage patient care and improve communications and information sharing. | 1 ✓ | 2 ✓ | 3 ✓ | 4 ✓ | 5 | 6 | <ul style="list-style-type: none"> Develop publicly available training materials for adult learners that address new payment models initiated under the Affordable Care Act, particularly patient-centered medical home models. | <p>ONC tracks the following measures:</p> <ul style="list-style-type: none"> Number of students enrolled in health IT training programs at Community College Consortia participants Cumulative number of students completing health IT training programs at Community College Consortia participants | <ul style="list-style-type: none"> Develop the nation's capacity to train 10,500 professionals per year in health IT competencies (P1, Goal1), (P2, Goal 3), (P3, Goal 1), (P5, Goal 3), (P6, Goal 2). | <ul style="list-style-type: none"> Evolve the health IT workforce program to coordinate national efforts to support the evolving workforce needs of the health IT industry, including team-based care and care coordination. |

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| Prescription Drug Monitoring Program (PDMP) and EHRs | The Enhancing Access to Prescription Drug Monitoring Programs (PDMP) Project is managed by ONC in collaboration with the Substance Abuse and Mental Health Services Administration (SAMHSA), Centers for Disease Control and Prevention (CDC), and the Office of National Drug Control Policy (ONDCP). The project provides resources to support the integration of PDMP access through the use of EHRs and community pilots. | | | ✓ | ✓ | | | <ul style="list-style-type: none"> Develop a resource center for communities to help incorporate electronic PDMP data into prescriber/dispenser workflow and make publicly available. Complete pilots that test standardized methods for integrating PDMP data into EHRs as part of clinical workflow and publish results of these pilots. | The PDMP Program and EHRs track how timeliness in electronic access increases for prescribers and dispensers to PDMP data to inform clinical decisions, and the impact on clinical decisions for opioid prescriptions. | <ul style="list-style-type: none"> TBD | <ul style="list-style-type: none"> Reduce the number of prescription drug-related deaths in the United States. |

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| Standards and Interoperability (S&I) | ONC works on the development and harmonization of health IT standards that support technology critical to the development and success of a fully functional nationwide health IT ecosystem. ONC curates standards and specifications that support interoperability and ensures that they can be assembled into solutions for a variety of health information exchange scenarios. | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | <ul style="list-style-type: none"> Support implementation of the Direct Project by the private sector (Direct Project is a set of standards, policies, and services that enable simple, secure transport of health information between authorized care providers). Participate in the eHealth Exchange and support continued growth of the community of participants (eHealth Exchange is a group of Federal agencies and non-Federal organizations that came together under a common mission and purpose to improve patient care, streamline disability benefit claims, and improve public health reporting through secure, trusted, and interoperable health information exchange). Through the S&I framework, the health IT community is convened to prioritize, develop, and harmonize the standards and specifications that enable interoperable health information exchange through activities such as creating specifications and certification criteria for capturing structured data; allowing simple access to reports and data within an EHR; focusing on patient data portability standards; and determining best practice for formatting of the information for Blue Button. Work with Federal partners on the Federal Health Architecture (FHA) (FHA is responsible for supporting Federal efforts to deploy health IT standards and ensuring that agencies can seamlessly exchange health data). | <p>ONC tracks the following measures:</p> <ul style="list-style-type: none"> Number of participants in the S&I framework and implementation and testing platform Number of covered lives represented in aggregate by the organizations participating in eHealth Exchange Number of applicants (per period or cumulative) whose applications/ transactions were handled electronically using MU, S&I framework, and FHA standards Number of priority-use cases (e.g., public health reporting) for which S&I activities lead to availability of new revised voluntary consensus standards (annual and/or cumulative) <p>ONC created a CDS content standard and a CDS implementation guide. ONC will develop or identify technical standards and pilots to support integration of PDMP programs into EHR systems.</p> | <ul style="list-style-type: none"> Support implementation and testing infrastructure for vendors, hospitals, providers, and others to test standards against a reference implementation (P1, Goal 1), (P2, Goal 3), (P3, Goal 1), (P3, Goal 3), (P6, Goal 2). Create additional technology standards that enable consumers and providers to transmit information securely (P2, Goal 3). | <ul style="list-style-type: none"> Achieve better care and better health at lower costs. Establish an integrated health IT infrastructure that uses standardized building blocks to support providers, Federal agencies, and consumers. Develop a modular portfolio of standards and services that serve as the technical building blocks for an optimized health care system. Demonstrate EHR reporting and integration for providers, consumers, and Federal agencies for use in clinical decisionmaking, disease tracking, and quality measurements of care. |

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Appendix A. National Quality Strategy Priorities and Long-Term Goals

| # | Priority | Long-Term Goals (Recommended by the National Priorities Partnership) |
|---|--|--|
| 1 | Making care safer by reducing harm caused in the delivery of care. | <ol style="list-style-type: none"> 1. Reduce preventable hospital admissions and readmissions. 2. Reduce the incidence of adverse health care-associated conditions. 3. Reduce harm from inappropriate or unnecessary care. |
| 2 | Ensuring that each person and family are engaged as partners in their care. | <ol style="list-style-type: none"> 1. Improve patient, family, and caregiver experience of care related to quality, safety, and access across settings. 2. In partnership with patients, families, and caregivers—and using a shared decisionmaking process—develop culturally sensitive and understandable care plans. 3. Enable patients and their families and caregivers to navigate, coordinate, and manage their care appropriately and effectively. |
| 3 | Promoting effective communication and coordination of care. | <ol style="list-style-type: none"> 1. Improve the quality of care transitions and communications across care settings. 2. Improve the quality of life for patients with chronic illness and disability by following a current care plan that anticipates and addresses pain and symptom management, psychosocial needs, and functional status. 3. Establish shared accountability and integration of communities and health care systems to improve quality of care and reduce health disparities. |
| 4 | Promoting the most effective prevention and treatment practices for the leading causes of mortality, starting with cardiovascular disease. | <ol style="list-style-type: none"> 1. Promote cardiovascular health through community interventions that result in improvement of social, economic, and environmental factors. 2. Promote cardiovascular health through interventions that result in adoption of the most important healthy lifestyle behaviors across the lifespan. 3. Promote cardiovascular health through receipt of effective clinical preventive services across the lifespan in clinical and community settings. |
| 5 | Working with communities to promote wide use of best practices to enable healthy living. | <ol style="list-style-type: none"> 1. Promote healthy living and well-being through community interventions that result in improvement of social, economic, and environmental factors. 2. Promote healthy living and well-being through interventions that result in adoption of the most important healthy lifestyle behaviors across the lifespan. 3. Promote healthy living and well-being through receipt of effective clinical preventive services across the lifespan in clinical and community settings. |
| 6 | Making quality care more affordable for individuals, families, employers, and governments by developing and spreading new health care delivery models. | <ol style="list-style-type: none"> 1. Ensure affordable and accessible high-quality health care for people, families, employers, and governments. 2. Support and enable communities to ensure accessible, high-quality care while reducing waste and fraud. |