

January 18, 2005

Office of the National Coordinator Health Information Technology
Department of Health and Human Services
Attn: NHIN RFI Response
Hubert H. Humphrey Building, Room 517D
200 Independence Avenue, SW
Washington DC 20201

RE: Development and Adoption of a National Health Information Network

Dear Dr. Brailer:

Thank you for the opportunity to comment on how widespread interoperability of health information technologies and health information exchange can be achieved.

The organizations participating in the Consumer-Purchaser Disclosure Project collectively represent more than 100 million American health care beneficiaries. They are committed to ensuring that all Americans will be able to select hospitals, physicians, physician groups/delivery systems, and treatments based on public reporting of nationally standardized measures for clinical quality, consumer experience, equity, and efficiency by January 1, 2007. The Disclosure Project serves as a change agent to ensure that the goal of publicly reported comparative performance information will be achieved. We believe that increased transparency about the performance of health care providers will foster quality and efficiency improvement at every level of the health care system by enabling (1) consumers to use valid performance information to choose providers and treatments, (2) purchasers to build performance expectations into their contracts and benefit designs, and (3) providers to act on their desire to improve, supported with better information.

We believe, as you do, that there is a compelling public interest for a NHIN to exist and offer the following comments in response to the November 15th *Federal Register* notice:

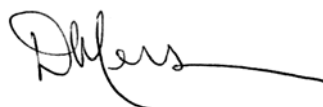
- We strongly endorse Goal 3, Strategy 2 of the ONCHIT strategic plan, which states: "Consumers should have the ability to select clinicians and institutions based on what they value and the information to guide their choice, including but not limited to, the quality of care providers deliver."
- The NHIN and regional health information organizations must be organized in ways that allow for the potential provision of data for provider measurement purposes, that is, data that are non-identifiable as to patients but are identifiable as to providers, to the appropriate entities and with appropriate permissions for producing aggregate measures of provider performance.
- Governance structures and rules and procedures should be developed to ensure that consumers' needs are met for standardized performance information to guide their provider choices.

Again, thank you for the opportunity to comment. Please contact either of us should you have any questions.

Sincerely,



Peter V. Lee
President and CEO
Pacific Business Group on Health



Debra L. Ness
President
National Partnership for Women & Families