Mark Masselli: This is Conversations on Healthcare. I am Mark Masselli.

Margaret Flinter: I am Margaret Flinter.

Mark Masselli: Margaret, the White House has been telegraphing the appointment of Donald Berwick for a number of weeks and the president made a recess appointment putting Dr. Berwick and is the head of the center for Medicare and Medicaid services. This appointment has caused some consternation on both side aisle, but Dr. Berwick has many other supporters throughout the industry. Just so our listeners will know recess appoints are in the purview of the president when congress is out of session. The president has the ability to do that and the appointment lasts through the president's term. Margaret, thoughts on the appointment of Dr. Berwick?

Margaret Flinter: I think it's a great idea, he suddenly enjoys the support of almost the healthcare community and I would have preferred that it was done through the usual process I think the country would have benefited from those open hearings, but you know they were likely to be long and protected and largely about whether or not he really believes in rationing healthcare. That opposition has been unfilled for years at this point. It was just too large and too important to let it go and fill any longer. There is too much to do – initiatives.

Mark Masselli: And you know they will hear him soon as he will be up on the hill testifying and they can ask him all the questions that they like at that time.

Margaret Flinter: That's right. But you know there was the second big development and that's with the office of the national coordinator. He has finally released the long awaited definition of meaningful use of electronic health records.

Mark Masselli: What is that term meaningful use? I know it's about electronic health records and I know it's important to the industry and I think there has been a lot of opaqueness around that phrase. Can you illuminate our listeners on that?

Margaret Flinter: Right, it's a kind of phrase that's clear as mud to those people who are not in healthcare but a couple of important points. One, this is legislation which took recovery fund moneys and said we will reimburse practices across the country and importantly Mark not just physicians but dentists, nurse practitioners, nurse midwives, physician assistants, we will reimburse practices for the cost of implementing electronic health records but these can't be electronic health records that merely turn the paper chart into an electronic chart. Meaningful use means that you are able to communicate with other sources of care, exchange information to do that in a secure and private environment and to really thus improve on-care coordination and quality and safety. And I thought it

was particularly interesting that meaningful use now includes that we report on specific quality measures. They did not assign that list of people. They provided a long menu so a practice can select which ones are most important to their practice but I think that's all good news.

Mark Masselli: And we have a fusion of meaningful use in terms of technology and data today.   Our guest is Todd Park Chief Technology Officer for the Department of Health and Human Services, who joins us today.   Todd's been working to develop technologies and services to help our healthcare system working with optimal potential. There is a lot going on over at HHS with Todd's spearheading new healthcare innovations.   We have discussed the new healthcare website healthcare.gov the opening government initiative, where HHS is making vast stores of data available and we will hear from Todd today as he talks about it. He is quite enthusiastic about liberating data.

Margaret Flinter: And I think we hear the expression super cool more often from partly from Todd than we generally hear from senior federal officials. No matter what the story here all of our shows on our website chcradio.com you can subscribe to iTunes to get the show regularly downloaded or visit us at chcradio.com.   We would like to announce too, we doubled our broadcasting power of the last 20 years or so here at WESU, we are now broadcasting at 3000 watts.

Mark Masselli: Let us know if you have feedback about that or anything else you have heard on the show, e-mail us at chcradio.com, we would love to hear from you.   Before we speak with Todd Park, let's check in with our producer Loren Bonner with headline news.

Loren Bonner: I am Loren Bonner with this week's headline news, the centers for Medicare and Medicaid and the Office of the National Coordinator for Health Information Technology announced the long awaited rules that healthcare organization must adhere to if they are to qualify for the financial incentives under Medicare and Medicaid's meaningful use of electronic health records.   The Obama Administration believes the implementation of this technology would deliver better care and give consumers more control over their healthcare not to mention lower costs. Dr. David Blumenthal, the National Coordinator for Health Information Technology has full confidence that this will be the future for healthcare professional and will successfully lead our healthcare system into the 21st century.

Dr. David Blumenthal: I suddenly believe that it is just a matter of time before clinicians in hospitals become the leaders of this effort to improve information system in the United States and the reason is that using information is a core clinical competency for professionals in healthcare.   We are only as good in treating patients as the information we have.

Loren Bonner: The final rule defines meaningful use and clarifies the requirements clinicians must satisfy to earn the financial incentives for adopting electronic health records. Dr. Donald Berwick who is just sworn in on Monday as a new administrator for CMS puts it into perspective.

Dr. Donald Berwick: I really like the phrase "meaningful use", the word "meaningful." I have been thinking meaningful to whom, it's meaningful to a care, meaningful to the patients and meaningful to the people who help the patients. I know about that a lot from my work in the past 20 years trying to improve healthcare watching hospitals and physicians and nurses and the communities to get to use modernize technology.

Loren Bonner: The final rule was a company by a second rule which set standards, implementations, specifications and certification criteria for EHR technology in an effort to help clinicians in hospitals ensure their purchases will deliver the value the rule is designed to drive. Overall the final rule gives eligible health professionals and hospitals great flexibility in meeting meaningful use. Last year's recovery act authorized CMS to provide a reimbursement incentive for physician and hospital providers who demonstrate the meaningful use of an electronic health record. The incentive payments ranging from $44,000 to $64,000 per physician over five years begin in 2011 and gradually phase down before penalties for non-EHR use are applied in 2015. The final rule announcement comes right after two recently issued HHS rules at the end of June ONC published a final rule establishing a temporary certification program for health information technology. And last week the office for civil rights announced a proposed rule that would strengthen and expand privacy, security and enforcement protections under the Health Insurance Portability and Accountability Act of 1996. As part of this process, HHS is establishing a nationwide network of regional extension centers to assist providers and adopting and using EHR technology in a meaningful way.

Margaret Flinter: Today on Conversations on Healthcare we are exploring how technology can improve America's health. Even before a healthcare reform was signed into law the Department of Health and Human Services was working to advance the culture of innovation and create a community of collaborators. The department has been busy at work these last few months with a lot to show for it. Let's turn now to our interview with Todd Park who can tell us more.

Mark Masselli: This is Conversations on Healthcare, today we are speaking with Todd Park Chief Technology Officer of the Department of Health and Human Services. Welcome Todd, you come to the department in 2009, you bring a wealth of expertise in health and technology to this administration. You are cofounder of Athenahealth and co-led its development into an organization recognized as innovative and socially oriented health information technology company. The Obama Administration clearly is one that believes in the power of technology to improve the health of individuals and also the role of data to

empower communities to become healthier. Can you share with us sort of the strategic priorities of your new office as Chief Technology Officer?

Todd Park: Absolutely, there are really three primary priorities that have emerged for my work and the work of the people I work with at HHS on technology and data and how to improve health. The first is what I will call open government. The second is the implementation of the Affordable Care Act and the third is actually advancing a culture of innovation at HHS. So just very briefly the first open government is in response to the president's directive to all federal agencies to become more transparent participatory and collaborative, so a key part of open government is something we are calling the community health data initiative which is a new effort that we launched recently where HHS is basically publishing a ton of data online about the national state, regional and county level public health and healthcare performance, smoking rates, obesity rates and determinants of health like access to healthy food, etc. And basically encouraging innovators from across the country public and private innovators to take the data and turn into super cool applications for consumers and for providers and for policy makers to make better decisions that can help improve health. So that's actually been very, very exciting. The second part which I will just briefly talk about, implementation of the Affordable Care Act and one of the latest pieces of work there that I have been involved with is the launch of healthcare.gov, which is a new consumer oriented site that we launched on July 1st, that's the first site that enables consumers to search an inventory of both public and private healthcare adoption. Then the third priority is advancing a culture of innovation HHS. And this is actually and potentially the most fundamental priority because it's really how we are achieving successes on the government front and implementation of the Affordable Care Act Fund. You know the top priority of the department is to really mobilize the talent within the department and link it to talent by the department to get exciting things done like the community healthy initiatives, and various aspects of implementation of the Affordable Care Act.

Margaret Flinter: Well we have watched and appreciated your passion and enthusiasm for each element of those and we have questions and interest about each of them but let me start if I can by picking up on the community health data initiatives.

Todd Park: Sure.

Margaret Flinter: We are an organization that like tens of thousands of organizations around the country submit data to the federal government quite a bit of it, we are federally qualified health center. And we are particularly interested in the ability that the initiative holds as a promise to take all that massive amounts of data and make it readily accessible to help communities and we watch the official launch, we are deeply impressed with the range of innovators and technology entrepreneurs who stepped up with contributions. We

immediately run out and explore the Asthmapolis application for instance to help kids and adults with asthma and it really seemed to represent a new social consciousness about the need and value of transparency in making data held by the federal government useable and accessible to the public. And where can we expect that to go beyond the community health data initiative.

Todd Park: Yeah, so actually we are now engaged in the next phase of the community health data initiative, which is very exciting. Everyone was very, very encouraged by as you said the explosion of innovation that we witnessed on June 02 in terms of what people are able to do in a 90-day stand, since you released the initial set of data. So what we are actually planning to do is going forward with two things. One, HHS plans to release even more data and do so on a continuous stream. I think one milestone that's very exciting is that in December of this year we are going to be releasing the HHS Health Indicators Warehouse which will be a new public website where you can spill on to your heart's content, a whole mass of data and expanded sort of data, national, state, regional and county level performance on public health and healthcare indicators and determinants of health, included in the warehouses is actually going to be an inventory proven interventions, proven programs that communities across the country have engaged in, then it helped to actually move a needle on indicators like smoking which is also very exciting and all this information be updated on an ongoing basis that the warehouse website will allow all the state to be not just craft and charted and sliced and diced but actually download for free. It will be exposed through web services or other applications, websites can hook into the data and automatically invoke it and the functions of their own websites and applications. And on top of that you know we just got plan to release more and more data over time including data that goes beyond just national, regional, local health performance but also data can help individuals and communities improve their performance. So for example later this year we are going to releasing and downloadable xml format a dataset of FDA, drug, device and food recalls which could power a whole host of very innovative uses and applications.

Mark Masselli: You know I wanted to talk a little bit about that culture of innovation you were talking about before and clearly you are not only technologist but you are in the liberation movement in some ways that I notice that Google has that data liberation front where engineers in Google are trying to free data to get it out there and certainly you are engaged in the data of the people, by the people and for the people at the department we are excited about that, and you know the innovation awards that you briefly touched on is really trying to tap into the pulse of workers there. Well, how are you stimulated outside of the awards, what's the sort of on the ground cultural change that you are trying to bring to the hundreds of thousand of workers who work in the department around this process of innovation and freeing of data.

Todd Park: Yeah it's a terrific question, I mean the thing that I and others are really trying to do is basically recognize and reward risk taking innovation as

something that is fundamentally important to HHS something that you actually would advance your career at HHS. You know I think there are ton of innovative people at HHS, you know that's been my observation experience thus far. You know I haven't personally done the community health data initiative, I haven't personally built healthcare.gov that was built, those initiatives were built and driven by incredibly talented teams of people I found here. And my observation would be that you know if HHS can find a way which we are doing more and more to pull those teams innovators together to celebrate them to earn them with the air cover and the path forward to be everything they can be. Now, HHS is capable of doing just amazing things in really short spans of time. And celebrating those people making them rock stars, people want to be those people when they grow up, that's really I think the way to change the culture. It's not actually the right way to go to you know if for example to add, you know as the 87th criterion that we do people's appeals annually and add the criterion to be innovative, like that would not be the right way to go. The right way to go is instead to say, look you know, if you are innovator you will become a rock star, you will do incredibly cool things to the world, we are going to encourage that and make everyone else want to be like you.

Margaret Flinter: You know you have talked about healthcare.gov a couple of times, which was launched on July 01, the site is certainly the first of its kind, offers consumers the unique opportunity to shop around for and insurance plan which best meets their needs but this is not your grandmother is shopping around for health insurance. You have incorporated a Twitter Feed to distributed information on policies and YouTube videos to explain the laws and benefits so, what do you think the response has been so far? Have you been able to track the demographic of people who are looking at it and do you see this as a really fundamentally kind of radically different way to engage people and the power approaches in their health insurance?

Todd Park: We do, you know we actually had a ton of consumer input that helps shape the creation of the site. We had 18 focus group discussions with about 73 different folks, individuals who are insured and uninsured, small business owners, basically asking them what they would want in a site like healthcare.gov. And what they said is that you know they wanted something that didn't resemble any traditional government site, when that was intelligible and understandable was when I would be focused on the consumer and that actually enabled them to navigate a very complicated insurance marketplace with ease you know in a way that was jargon free and that really thought like the site was on a look out for them. And that's exactly what we then endeavored to do. I think the best compliments that we have gotten are from consumers, who basically say you know our consumers are able to say this looks nothing like a government website. Yeah, because it is truly 18.30_____ it is really easy to use and navigate. And one thing we are actually very excited about is the fact that we have gotten a tremendous amount of input into the site going forward from this feed back bubbles, these yellow feedback bubbles you distribute throughout the

site where we basically say was this page useful to you, yes or no, and if no, and if yes what do we do to actually make it better, we have got a ton of feedback from users and through those bubbles and we are already donning that into what we plan to do with website going forward.

Mark Masselli: Today we are speaking with Todd Park, Chief Technology Officer of the Department of Health and Human Services. You know at our health center we have a saying that anecdotes divide us and data unites us, and on healthcare.gov you have really put together the right tools to allow people to compare data about quality of care of hospitals and other providers but it seems that to me that the limitation of the data is that it's only Medicare data and that's a frustration generally at the state level and trying to measure and compare and improve safety and quality. What's your strategy to take that enthusiasm, that focus, that making an official and effective elegant use of data and get all payers in the states engaged in the same process.

Todd Park: You are bringing the full circle back to the Community Health Data Initiative that's so exciting is that in addition to HHS making commitments to publish data for public use. We have actually been approached by a growing number of private sector organizations that want to do the same thing. And that would be wonderful because with more than just government provided data online with data from the you know the commercial sector etc. in a there is a whole panoply of data to play with they didn't have before and in the way that's really easy to use and that they can turn it into incredibly cool consumer apps, apps for doctors, apps for employers, applications for policy makers, and so I am very excited to see not just what we will do with healthcare.gov but actually what the world would do in terms of creation of innovative apps using our data and data of others.

Margaret Flinter: You have already have given us so much information about this innovations but we would like to ask our guests and perhaps especially you this question; when you look around the country and the world what do you see in terms of innovation and who should our listeners at Conservation be keeping an eye on?

Todd Park: I know a lot of people actually like to talk about the issues that we have got with healthcare and health in US and globally and they are a lot of issues but the thing that actually is even a greater force in my mind is the way of incredible people and incredible innovation energy being applied to solve those issues. It is actually impossible for me to articulate the full list in the time we have allotted to the people that inspired me but it's an incredibly long list, you know both actually in HHS, out side HHS, working in American Health Improvement working in Global Health Improvement, I mean it's astonishing tsunami I have created nationwide genius results oriented folks and they are the reason why I think we are going to really make a huge amount of headway in the

next decade on both national and global health issues. And why I am so optimistic about our future.

Mark Masselli: We will follow your Tweets, your blogs, your Facebook and all other means of communication and today we have been speaking with Todd Park, Chief Technology Officer of the Department of Health and Human Services. Thank you so much for joining us today. Each week Conversations highlights a bright idea about how to make wellness a part of our communities in everyday lives.

Margaret Flinter: This week's bright idea focuses on the growing movement within the healthcare community to improve the patient's quality of care and safety by increasing their healthy literacy. According to a recent CDC study 9 out of 10 adults struggle to follow typical medical advice. The main culprit, medical jargon and scientific terminology. Other most health experts call for material to be written out of 4th to 6th grade reading level, too often it's not and even then it maybe too complex for the average patient. The result patient's misunderstand their condition, incorrectly follow treatment regimens or don't understand why they need to follow this advice. And these mistakes really add up. A 2007 University of Connecticut study estimated that the annual cost of the healthcare system of low health literacy, $238 billion. Several new programs have emerged to address the problem. One from health wise, hosting online discussion with newly diagnosed patients called the virtual conversation. The interactive program walks patients through a thorough but straightforward explanation of their diagnosis and treatment plan. The program uses plain English and explains any medical terminology with a degree of consistency that's hard for busy providers to make time for. Health Wise offers these virtual conversations for over a dozen medical conditions from low back pain to diabetes to asthma. For instance at the Center For Spine Wellness at St. Lukes Health System in Boise, Idaho new patients are asked to use the virtual conversation program on back pain by asking patients about their symptoms and assessing the individual's answers, the program discusses issues such as medication, the anatomy of the back and strengthening exercises with the patient. The program has recently increased visibility and used in part to the new federal health literacy action plan which pushes for increasingly accessible medical language by simplifying confusing language, programs like Health Wise are cutting cost, reducing medical errors and improving quality of care across the country. Now that's a bright idea. This is Conversations on Healthcare, I am Margaret Flinter.

Mark Masselli: And I am Mark Masselli peace and health.

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