

Project Description

Scope: In Phase 3 of the HISPC project, the Intrastate and Interstate Policy Options Collaborative member states Ohio, Illinois, North Carolina, and California conducted an analysis of issues affecting both the intrastate and interstate exchange of health information. California and North Carolina were the primary states charged with the intrastate component and they based their analysis on a series of clinical use cases. Ohio and Illinois were charged with identifying potential legal mechanisms that could be enacted to resolve barriers to the exchange, including electronic, of health information among states that have conflicting state laws governing consent to use or disclose health information.

Upon reviewing the findings of the collaborative, ONC and RTI have offered the Collaborative a project extension accepting the recommendation to further pursue development of the Interstate Compact mechanism. According to the Council of State Governments, Interstate Compacts represent an opportunity for multi-state cooperation, reinforcing state sovereignty and avoiding federal intervention. The emergence of broad public policy issues that cross jurisdictional boundaries present new governing challenges to state authorities. Compacts enable the states – in their sovereign capacity – to act jointly and collectively, generally outside the confines of the federal legislative or regulatory process while respecting the view of Congress on the appropriateness of joint action.

Unlike federal actions that impose unilateral, rigid mandates, compacts afford states the opportunity to develop dynamic, self regulatory systems over which the party states can maintain control through a coordinated legislative and administrative process. Compacts enable the states to develop adaptive structures that can evolve to meet new and increased challenges that naturally arise over time. In the last 75 years, more than 150 compacts have been created, most since the end of World War II. On average, a state today belongs to 25 interstate compacts.

For purposes of this extension phase the Collaborative will:

- Identify and define the components of an Interstate Compact for the exchange of health information
- Recommend the guiding/operational principles of the compact
- Develop a set of assumptions to serve as a guide to the research
- Identify the parties required to inform the development of the compact
- Recognize the constraints and limitations of the compact

The end result of this effort will be a roadmap to serve as an action plan for furthering the development of compact language and increase the understanding of the effort involved to bring such an agreement to fruition. By recognizing the need for reciprocity between participating states of existing consent management practices, the Compact will not require harmonization of consent policies and practices governing health information exchange in HIOs.

The following role definitions are being applied to the resources assigned to this project:

Project Sponsor	Office of the National Coordinator
Project Owner	RTI.
Project Manager	Ohio HISPC Project Team
Stakeholders	State legislative bodies State agencies Consumer health advocate groups Health care providers Health information organizations
Team Members	Working project team members from Ohio, Illinois, and North Carolina who will analyze, and design the processes for development. This includes collaborating with teams to develop high level overview of compact designs and models, and partnering with team members to identify appropriate opportunities for further development of the compact