For Immediate Release

HL7 Endorses Collaborative Response to ONCHIT RFI,
Issues Additional Input on Standards and Policies to Achieve Interoperability

ANN ARBOR, Mich.—February 11, 2005 — Health Level Seven (HL7), one of the world’s most prolific healthcare standards developers, recently joined 12 other healthcare stakeholders in a collaborative response to the Request for Information (RFI) issued by the Office of the National Coordinator for Health Information Technology (ONCHIT) to learn how widespread interoperability of health information technologies and health information exchange could be achieved through a National Health Information Network (NHIN).

“Health Level Seven is pleased to be a part of the unprecedented collaborative, coordinated by the Connecting for Health organization, which proposed a Common Framework for the National Health Information Network,” said HL7 Board Chair Mark Shafarman. “Although we endorse the consensus response the collaborative developed and submitted, HL7 has additional input relevant to Standards and Policies to Achieve Interoperability.”

That input was delivered to ONCHIT in a letter dated January 18, 2005. The following is an excerpt from the cover letter that accompanied the HL7 response.

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HL7 Version 2 is widely accepted and implemented by the industry and supported by most healthcare system vendors. It has been applied on a regional and national scale by the crafting of “hardened” specifications, analogous to implementation guides, which simplify the negotiations inherent in most interface implementations. In the short term this approach to interoperability is recommended because it leverages existing widely installed versions of the HL7 standard. In the long term, however, Version 3 provides a methodology that will make semantic interoperability more achievable and rigorous, especially for the highly complex clinical information required to support detailed evaluation and improvement of quality, safety and effectiveness in healthcare.

HL7 has shifted the bulk of its development efforts from Version 2, focused on syntactic interoperability or messaging, to Version 3 and the tenets of scalable semantic interoperability. With the formal binding of standard vocabularies to

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standard models, and a flexible document architecture, HL7 Version 3 represents a mechanism for the exchange of “understandable” information able to be reused in multiple application contexts at the highest common level of shared meaning - semantic interoperability.

The HL7 Development Framework (HDF) is a process for developing use cases and establishing requirements for information exchange whose adoption will lead to semantic interoperability on the National Health Information Network. Once the use cases are stable, the HDF can also establish semantic interoperability among the various standards with domain intersects in a given profile; in essence “standardizing the standards.”

“We believe this approach will facilitate the ultimate viability and efficacy of the National Health Information Network,” Shafarman said.

The Collaborative response can be viewed in its entirety at: http://www.hl7.org/Library/General/Collaborative_RFI_Responsefinal.pdf.

The HL7 additional response specific to Standards and Policies to Achieve Interoperability can be found in its entirety at: http://www.hl7.org/Library/General/HL7Q14-18_final.pdf.

About HL7
Founded in 1987, Health Level Seven, Inc. (http://www.HL7.org/) is a not-for-profit, ANSI-accredited standards developing organization dedicated to providing a comprehensive framework and related standards for the exchange, integration, sharing, and retrieval of electronic health information that supports clinical practice and the management, delivery and evaluation of health services. HL7’s more than 2,000 members represent approximately 500 corporate members, including 90 percent of the largest information systems vendors serving healthcare.

HL7’s endeavors are sponsored, in part, by the support of its benefactors: Booz Allen Hamilton, Inc.; Capgemini; Centers for Disease Control and Prevention (CDC); Documentum; Eclipsys Corporation; Eli Lilly & Company; the Food and Drug Administration; GE Medical Systems; Guidant Corporation; HIMS Solutions, Inc.; IBM; IDX Systems Corporation; InterSystems Corporation; Kaiser Permanente; McKesson Provider Technologies; Microsoft Corporation; Misys Healthcare Systems; NHS National Programme for IT; NICTIZ National ICT Institute for Healthcare in The Netherlands; Oracle Corporation; Partners HealthCare System, Inc.; Pfizer, Inc.; Philips Medical Systems; Quest Diagnostics Inc.; Science Applications International Corporation; Siemens Medical Solutions Health Services; the U.S. Department of Defense; Military Health System; the U.S. Department of Veterans Affairs; and Wyeth Pharmaceuticals.

International affiliates have also been established in 27 countries throughout the globe including Argentina, Australia, Brazil, Canada, China, Croatia, Czech Republic, Denmark, Finland, France, Germany, Greece, India, Ireland, Italy, Japan, Korea, Lithuania, Mexico, The Netherlands, New Zealand, Poland, Spain, Switzerland, Taiwan, Turkey and the United Kingdom.

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