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For Immediate Release

HL7 Releases Ballot for Personal Health Record Functional Model as a Draft Standard for Trial Use

The model contains requirements to protect the privacy and confidentiality of an individual’s personal health information.

ANN ARBOR, Michigan, U.S. – Nov. 5, 2007 – Health Level Seven (HL7), a preeminent healthcare IT standards development organization with broad international representation, today announced the release of a ballot to approve its Personal Health Record System Functional Model (PHR-S FM) as a Draft Standard for Trial Use (DSTU).

HL7 invites the public to vote on the PHR-S Functional Model to ensure that a broad range of industry stakeholders’ interests is considered. The voting period began November 2, 2007 and will continue through December 1, 2007. Members and non-members of HL7 can vote. There is an administrative fee for those who are not members of HL7. The model and the ballot package can be downloaded at www.hl7.org/ehr, after following the Online Balloting link.

The PHR-S FM defines a set of functions that may be present in PHR systems, and offers guidelines that facilitate health information exchange among different PHR systems and between PHR and EHR systems. The PHR-S FM can be applied to specific PHR models (stand-alone, web-based, provider-based, payer-based, or employer-based models). At the same time, the Functional Model is flexible enough to encourage product innovation.

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The PHR-S Functional Model serves a variety of purposes. “It can identify to consumers the important functions within a PHR system that can help them make better health decisions,” said Donald T. Mon, PhD, vice-president of practice leadership, American Health Information Management Association (AHIMA) and co-chair of the HL7 PHR Work Group. “The model also contains requirements to protect the privacy of the individual, and the confidentiality of personal health information.”

While the PHR-S FM is not yet a fully ANSI-accredited standard, a Draft Standard for Trial Use (DSTU) version allows the industry to work with a stable standard for up to two years while it is being refined into an ANSI-accredited version. During the period of trial use:

- Consumers can begin requesting such functionality when they select PHR systems for their use.
- Vendors can begin incorporating the model’s requirements into their products.
- Organizations that desire to provide certifications of PHR systems (such as the Certification Commission for Healthcare Information Technology) can begin considering these requirements for certification.

“This is the same approach that proved so successful for HL7 with the Electronic Health Record System Functional Model (EHR-S),” said Lenel James, CPHIT, CPEHR, MBA, HL7 EHR Technical Committee co-chair and senior project manager at Blue Cross and Blue Shield Association. “It provides a basis to unite developers around commonly shared core customer requirements, yet allows them to creatively solve the business problems while helping to shape the next generation of the HL7 standards. At the same time the PHR System Functional Model provides patients, their care givers, health care providers, vendors and payers a common basis for discussion on feature expectations.”

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In August 2007 the PHR-S FM was released for public comment and based on the comments received, the PHR-S Functional Model was enhanced and readied for release as a DSTU.

The HL7 EHR Technical Committee formed the PHR Work Group in 2005 in response to the growing awareness that personal health records might serve as a valuable tool to help consumers in making informed healthcare decisions. The input from all key stakeholders that comprised the work group, including providers, consumers, vendors, and payers, ensured a well-balanced functional model.

While an abundance of PHR systems exist in today’s market, the industry currently lacks a functional standard to which these systems may conform. HL7’s PHR-S may be the first industry standard to specify functionality for PHR systems.

For questions about the balloting process, contact Don Lloyd of HL7 at (734) 677-7777.

About Health Level Seven (HL7)

Founded in 1987, Health Level Seven, Inc. (www.HL7.org) is a not-for-profit, ANSI-accredited standards development 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 2,300 members represent approximately 500 corporate members, which include more than 90 percent of the information systems vendors serving healthcare.

HL7’s endeavors are sponsored, in part, by the support of its benefactors: Accenture; Centers for Disease Control and Prevention; Duke Clinical Research Institute (DCRI); Eclipsys Corporation; Eli Lilly & Company; Epic Systems Corporation; European Medicines Agency; the Food and Drug Administration; GE Healthcare Information Technologies; GlaxoSmithKline; -more-
IBM; Intel Corporation; InterSystems Corporation; Kaiser Permanente; McKesson Provider Technologies; Microsoft Corporation; Misys Healthcare Systems; NICTIZ National Healthcare; Novartis; Oracle Corporation; Partners HealthCare System, Inc.; Pfizer, Inc.; Philips Medical Systems; Progress Software Corporation-DataDirect Technologies Division; QuadraMed Corporation; Quest Diagnostics Inc.; Science Applications International Corporation; Siemens Medical Solutions Health Services; St. Jude Medical; Thomson Healthcare; the U.S. Department of Defense, Military Health System; the U.S. Department of Veterans Affairs; and Wyeth Pharmaceuticals.

Numerous HL7 Affiliates have been established around the globe including Argentina, Australia, Austria, Brazil, Canada, China, Colombia, Croatia, Czech Republic, Denmark, Finland, France, Germany, Greece, India, Ireland, Italy, Japan, Korea, Mexico, The Netherlands, New Zealand, Romania, Spain, Sweden, Switzerland, Taiwan, Turkey, United Kingdom, and Uruguay.

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