



THE SECRETARY OF HEALTH AND HUMAN SERVICES  
WASHINGTON, D.C. 20201

JUL 31 2007

Simon P. Cohn, MD, MPH  
Chairman  
National Committee on Vital and Health Statistics  
3311 Toledo Rd., Suite 2402  
Hyattsville, MD 20782

Dear Dr. Cohn:

Thank you for both your letter supporting the Consolidated Health Informatics (CHI) standards and your review and recommendation advancing the final set of these standards. I appreciate the effort put forth by the National Committee on Vital and Health Statistics (NCVHS) on the Functioning and Disability domains. I understand these recommendations include standards for patient/client assessments that include functional and disability content.

I believe you know the importance that I place on data and technical standards for the national health IT agenda. This work will help us achieve the vision of interoperable health IT systems with the benefits interoperability offers for improved prevention and care.

During 2006, I received the following three letters from NCVHS recommending the advancement of CHI standards:

- June 22, 2006 - Multimedia Domain
- September 13, 2006 - Allergy domain
- November 28, 2006 - Functioning and Disability domains

I accept your recommendation that I approve these standards for formal government adoption. I have forwarded these NCVHS recommendations to the Office of the National Coordinator for Health Information Technology (ONC). The Federal Health Architecture e-Gov program, managed by ONC, will coordinate the development of a Federal Register Notice indicating that these standards will be used by all Federal agencies in implementing new, and as feasible, when updating existing health information technology systems.

In response to your request for a use case on patient assessments, our current process supports recommendations for use cases from the American Health Information Community (AHIC).

The AHIC identifies and recommends use cases that the Department can submit to the Health Information Technology Standards Panel (HITSP) for the identification of interoperability standards needed in both the public and private sectors. To date, the CHI standards have been well received by the HITSP. In fact, CHI standards have formed the foundation for much of its work. I will forward NCVHS's recommendation to the AHIC EHR workgroup to be considered in its work as it identifies priorities for future use case development.

Thank you for your continued leadership and thanks to NCVHS for all of the hard work each of you has performed for the CHI initiative. Your efforts have played an important role in advancing the national health IT agenda. I look forward to your ongoing participation.

Sincerely,

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Michael O. Leavitt