For Immediate Release

Health Level Seven Publishes Personal Health Record System Functional Model (PHR-S FM) as a Draft Standard for Trial Use

PHR-S FM industry’s first draft of a technical standard to specify functionality for PHR systems.

ANN ARBOR, Michigan, U.S. – December 15, 2008 – Health Level Seven (HL7), a preeminent healthcare IT standards development organization with broad national and international representation, today announced that the HL7 Personal Health Record System Functional Model (PHR-S FM) has been published as a Draft Standard for Trial Use (DSTU) and is available for download from the HL7 website. The PHR-S FM defines the set of functions that may be present in PHR systems to create and manage an effective PHR. It also offers guidelines that facilitate health information exchange among different PHR systems and between PHR and EHR systems.

As a DSTU, the PHR-S FM allows the industry worldwide to work with a stable standard for up to two years while it is being refined into an American National Standards Institute-accredited version. During the DSTU period, consumers can begin requesting standards-based functionality when they select PHR systems for their use, vendors can begin incorporating the model’s requirements into their products and organizations that certify PHR systems can begin evaluating the model’s conformance criteria for certification testing purposes. The PHR-S FM has already proven a useful tool for the Certification Commission for Healthcare Information Technology (CCHIT). “We reviewed good work offered by several organizations, including HL7’s PHR-S Functional Model, as a reference for the Commission’s PHR Advisory Task Force recommendations and the PHR Work Group’s first draft of criteria now available for public comment,” said Jody Pettit, MD, staff leader of the Certification Commission for Healthcare Information Technology (CCHIT®) PHR work group. In addition to CCHIT, the Centers for Medicare and Medicaid Services has used components of the PHR-S FM as requirements for its PHR pilot demonstration projects.
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. The PHRS-S FM was developed with broad stakeholder input, resulting in a well-balanced and versatile functional model that can be applied across the continuum of care. “The PHR-S Functional Model is getting terrific traction in the industry,” says Donald T. Mon, vice president, AHIMA, and co-chair of the PHR Work Group. “Because the model can be adapted to a variety of care settings, a number of profiles are already under development as subsets of the Functional Model.”

**PROFILES DEVELOPED & UNDER DEVELOPMENT**

**PHR-S FM Provides Guidance to Health Authorities & Consumers**

Based on the PHR-S FM, the Health Authority-Based PHR System Profile represents an effort to derive the capabilities that are relevant for personal health record systems provided by health authorities. It provides a list of capabilities a health authority such as a county or state public health or behavioral health agency, should consider when selecting or developing a PHR-S. This Profile is descriptive of an actual health authority-based PHR-S currently deployed by more than 400 state, county, and city-based health authorities for their residents. The health authority departments include behavioral health, public health, and child welfare. These departments contract with Trilogy Integrated Resources for web-based services called Network of Care that includes a PHR called My Folder.

The profile is also intended for consumer use. According to Tom Trabin, PhD, MSM, deputy director of the Adult System of Care for Alameda County Behavioral Health Care Services in California, “The Health Authority-Based PHR System Profile provides information to the general public about PHR-S functions, their importance, and their uses to improve prevention, treatment coordination, and recovery. The profile also educates consumers regarding what functions they might consider accessing and using if their health authority offers a PHR, and what functions a health authority should request if it is considering selecting a PHR.”

The Health Authority-Based PHR System Profile is expected to be registered by the end of the year. All registered profiles are available to the public through a searchable registry at http://www.nist.gov/profileregistry.

**Payer-Linked Profile to Support Health Benefits Plans**

The Payer-Linked Profile conforms to the HL7 PHR-S Functional Model and is aimed at developing an HL7 Informational Functional Profile for personal health record (PHR) systems that are used between payers and their members. The profile provides essential general functions and specific conformance criteria that are important to include in any payer-linked system through which a member might access, store and communicate their healthcare information. The model is
meant to support all types of health benefits plans including medical, dental, vision, and pharmacy.

“Blue Cross and Blue Shield of Florida promotes consumer access to, and use of, Personal Health Records (PHR). The PHR [Functional Model can] play a valuable role in supporting the consumer to become engaged and informed in their management of their health and wellness.” said Lynn Monson, director, Health Information Technology, Blue Cross Blue Shield of Florida.

**Core Functions Profile**

The Core Functions Profile identifies core capabilities of personal health record systems. The Core Functions Profile can be used to:

- Promote a common understanding of essential PHR functions.
- Provide guidance to developers, vendors, users and other interested parties so that they can plan, evaluate, implement, or use core functions in PHR systems.
- Provide the necessary framework to drive the requirements and applications of next level standards, such as PHR content, coding, and information models.

“The PHR-S Functional Model and the Core Functions Profile were effective in helping a diverse group of payers, vendors, and others reach consensus and document the essential functions and criteria for their personal health record systems,” said Pat Van Dyke, HL7 EHR Work Group co-chair and director Privacy/Security/EDI, The ODS Companies (a Delta Dental Association member).

**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; Booz Allen Hamilton, Boston Scientific Corporation, Centers for Disease Control and Prevention; Duke Translational Medicine Institute (DTMI); Eclipsys Corporation; Eli Lilly & Company; Epic Systems Corporation; the Food and Drug Administration; GE Healthcare Information Technologies; GlaxoSmithKline; IBM; Intel Corporation; InterSystems Corporation; Kaiser Permanente; McKesson Provider Technologies; Microsoft Corporation; Misys Healthcare Systems; NHS Connecting for Health; NICTIZ National Healthcare; Novartis; Oracle Corporation; Partners HealthCare System, Inc.; Pfizer, Inc.; Philips Medical Systems; Progress Software; QuadraMed
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