
FEHB Program Carrier Letter

All Carriers

U.S. Office of Personnel Management
Insurance Services Programs

Letter No. 2008 -16

Date: October 9, 2008

Fee-for-service [11] Experience-rated HMO [11] Community-rated HMO [12]

SUBJECT: HIT and Transparency Report for 2008

The Office of Personnel Management's (OPM) annual call letter to Federal Employees Health Benefits (FEHB) Program carriers was issued March 11, 2008. In that letter, we advised we would recognize FEHB plans demonstrating best practices in health information technology (HIT) and transparency by highlighting the plan names in our Guide to Federal Benefits (Guide) and on OPM's web site. In June, we asked carriers to submit reports on HIT and Transparency initiatives.

We thank you for submitting the reports on a timely basis. We used the information in the reports to evaluate your plan for placement of your plan's name in the Guide and on our website as an FEHB Program leader in HIT and Transparency. We also consolidated plan responses into a Program-wide report highlighting FEHB Program best practices. Attached is a copy of our Program-wide report along with our Guide language listing the names of FEHB Program leaders in HIT and Transparency. Please use this information to benchmark your plan's progress against overall FEHB Program best practices and make adjustments to your programs where deficiencies are noted.

Significant progress has been made by many plans over the past several years. Some now offer state-of-the-art personal health records (PHRs) and excellent price/cost and quality transparency information and tools on their websites. We continue to encourage you to expand your HIT and transparency initiatives and to make more information and tools available to Federal employees, retirees and their families.

We also offer the following recommendations to further your progress in HIT and transparency.

FEHB health plans should continue to:

- Upgrade their health information technology systems using recognized interoperability standards so plan PHRs can accept more granular clinical data as provider adoption of electronic health records (EHR) increases. See recognized interoperability standards at <http://hitsp.org/> . See EHR vendor certification criteria at <http://www.echit.org/>.
- Increase the amount of personal health information (PHI) that is automatically populated in PHRs to make them easier to use and less labor intensive to create and update.

- Move away from view-only PHRs by allowing members to add supplemental information and increase functionally.
- Configure PHRs to allow members to access their information in one organized location on plan websites.
- Increase the interactivity and functionally of PHRs and Transparency tools.
- Promote PHR and Transparency tools on the plan's home website.
- Display HIPAA compliant Privacy notices prominently along with PHRs and Transparency tools.
- Continue to collaborate with industry organizations recognized for their quality and cost transparency initiatives, such as the National Committee for Quality Assurance (NCQA), Utilization Review Accreditation Commission (URAC), Leapfrog Group, Joint Commission on The Accreditation of Healthcare Organizations (JCAHO), National Quality Forum, Hospital Quality Alliance (HQA), and the Ambulatory Quality Alliance (AQA).

We will continue to monitor the progress of all FEHB health plan HIT and Transparency initiatives.

Please e-mail Michael W. Kaszynski, Senior Policy Analyst, Strategic Human Resources Policy at Michael.Kaszynski@opm.gov if you have any questions regarding this letter or the attached report.

Sincerely,

Kay T. Ely
Associate Director
Human Resources Products and Services

Attachment