Our vision is that health data always follows the person

We are an independent, not-for-profit trade association open to all HIT suppliers and others devoted to the simple notion:

+ That health data should be available to individuals and providers regardless of where care occurs and;

+ That provider access to this data must be built-in to HIT at a reasonable cost for use by a broad range of health care providers and the people they serve
Our Member Organizations span the care continuum

<table>
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<tr>
<th>Founding</th>
<th>Contributor</th>
<th>General</th>
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<tbody>
<tr>
<td>&gt;2/3 of acute EHR</td>
<td>&gt;1/3 of ambulatory EHR</td>
<td>Leaders in post-acute care, imaging, patient portals, lab, retail pharmacy and more</td>
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Source: KLAS and SK&A, a Cegedim Company

2016 Hospital EMR Market Share, May 2016. © 2016 KLAS Enterprises, LLC. All rights reserved. [www.KLASresearch.com](http://www.KLASresearch.com)

We are solving a hard problem

Ask patients to remember their clinical history + Request a fax

Know where patient has been + Get the data within the workflow
We enable single-interface access to a person-centric network

CommonWell Services

+ Person Enrollment
+ Record Location
+ Patient Identification & Linking
+ Data Query & Retrieval

Trusted & Secure
Built into the provider workflow

All this happens while ensuring:
• No clinical data shown without the human validation step.
• Linked locations have access to data on future visits.
• Providers see the documents natively in their EHR.
Industry standards and public specifications

Patient Registration
- REST
- MLLP
- FHIR
- HL7 Msg

Person Enrollment
- REST
- W3C
- FHIR
- HL7

Matching & Linking
- REST
- W3C
- FHIR
- HL7

Query & Retrieve
- XCA
- XDS.b
- REST
- W3C

XCA Profile
XDS.b Profile
CCDA & FHIR

http://www.commonwellalliance.org/specifications
We’re live at 4,700+ sites, with another 3,200+ signed

http://www.commonwellalliance.org/providers

Acute
Ambulatory
Critical Access
Rehab
Skilled Nursing
Home Health
Patient Portal
Ambulance
Anatomic Path.
Fed / State Auth.
HIE
Imaging
Etc.
How an HIE entity could participate

How to collaborate with CommonWell:
1. Encourage CommonWell adoption where there are gaps in health data exchange in your community / region / State
2. Join CommonWell. Create and drive adoption of new use cases.

How to succeed alongside CommonWell:
1. Create local data exchange utility that a national patient-centered fabric like CommonWell cannot create, e.g., connectivity aimed at local population health initiatives
2. Focus on local care initiatives and programs, and leverage CommonWell as one tool to achieve those programs, e.g., leverage CommonWell fabric to enable a larger program focused on a local high-utilizer population
Membership vs. Subscription

Membership
- Members of all classes may attend and actively participate in Committees and Working Groups
- Members of all classes have the right to submit proposed revisions or proposals for Specifications and other artifacts
- Have access to generally available technical support and documentation
- Gov’t, NPOs and NGOs can join the Alliance as “General Members” ($2,500/year)

Subscription
- “Subscription” refers to actual participation in exchange on the network
- Our Subscription Fee Schedule is designed for HIT vendors such as EHRs, PHRs, etc. May or may not make sense for all types of Members and will be examined and extended when needed
- As HIEs and providers actively participate as Members, we expect to evolve approaches that are reflective of the operational realities