ICF is pleased to submit comments to the "Health Technology Ecosystem" RFI, CMS-0042-NC (CMS-2025-0050-0031)

In an era of increasingly patient-centered care, the ability for individuals to securely access and share their own health information is paramount. For millions of Medicare beneficiaries, Blue Button 2.0 stands as a cornerstone of this empowerment. More than just a data-sharing tool, it is a vital piece of national healthcare infrastructure that fosters engagement, improves clinical decision-making, and drives innovation. As we look to the future of healthcare, the continued use and enhancement of APIs like, Blue Button 2.0, is not just a recommendation; it is a necessity for a more efficient, effective, and equitable system.

At its core, Blue Button 2.0 provides Medicare beneficiaries with direct, on-demand access to their complete claims data from Medicare Parts A, B, and D. This includes a four-year history of diagnoses, procedures, and medications. This transparency is transformative, shifting the beneficiary from a passive recipient of care to an active participant in their own health journey. With a few clicks, they can securely share this comprehensive health history with trusted third-party applications and, most importantly, with their doctors and other healthcare providers. This ability to easily and accurately share their information is crucial for overcoming the persistent challenge of fragmented health records, reducing the risk of redundant tests and procedures, and ensuring that every member of their care team has a holistic view of their health.

The platform is built on modern, secure technology. Utilizing the Health Level Seven (HL7) Fast Healthcare Interoperability Resources (FHIR) standard, Blue Button 2.0 ensures that data is structured and easily exchangeable between different systems. Beneficiary privacy and security are paramount, with robust authorization protocols that give individuals granular control over who can access their information and for how long. Recent updates, such as the implementation of time limits on data access, further enhance these privacy protections, giving beneficiaries even greater peace of mind.

The benefits of Blue Button 2.0 extend far beyond the individual beneficiary. It serves as a powerful engine for innovation across the healthcare landscape. For application developers, the standardized API provides a secure and reliable way to create new tools and services that can help beneficiaries manage their health, from medication adherence apps to platforms that facilitate communication with caregivers. This has fostered a vibrant ecosystem of third-party applications that offer a wide range of functionalities, giving beneficiaries more choices in how they utilize their health data.

For healthcare providers, Blue Button 2.0 is an invaluable clinical asset. By enabling patients to share their complete Medicare claims history, it provides a more comprehensive picture of a patient's health than a single electronic health record often can. This longitudinal view can lead to more informed diagnoses, better-coordinated care, and ultimately, improved health outcomes. It helps to bridge the information gap that can exist between different providers and care settings, a critical factor in managing chronic conditions and preventing adverse events.

Furthermore, Blue Button 2.0 is a vital resource for medical research. With beneficiary consent, researchers can access de-identified data to conduct studies that can lead to new treatments, a better understanding of diseases, and improvements in public health. This accelerates the pace of discovery and ensures that research is based on real-world evidence from a large and diverse population.

Blue Button 2.0 is a testament to the power of putting health information in the hands of the people it belongs to. It is a mature, secure, and actively evolving platform that empowers Medicare beneficiaries, enhances the capabilities of healthcare providers, and fuels a new wave of healthcare innovation. The recent government commitment to improving the user experience through new partnerships underscores its ongoing importance. To turn our collective vision of a truly patient-centered healthcare system into a reality, we must continue to champion and invest in foundational tools like Blue Button 2.0. It is a critical pathway to a future where all Americans are empowered to take control of their health.

While the Blue Button 2.0 API has been a groundbreaking step in providing Medicare beneficiaries with access to their claims data, developers envision a new generation of more powerful and personalized digital tools. To build these, they require access to a richer and more comprehensive set of data from the Centers for Medicare & Medicaid Services (CMS). Moving beyond the current offering of basic demographics, coverage, and claims information, developers have identified several key data domains that would unlock significant value for patients and their caregivers.

Additional Data Set Considerations:

1. Detailed Provider Information:

Currently, while claims data shows which providers a beneficiary has seen, it lacks crucial context. Developers are seeking API access to a comprehensive and up-to-date **Provider Directory**. This would include:

- **Provider Specialties and Sub-specialties:** Enabling patients to find new providers who meet their specific health needs.
- **Contact Information and Office Hours:** Facilitating easier communication and appointment scheduling.
- **Network Affiliation:** Helping beneficiaries understand which providers are in-network for their specific Medicare plan, including Medicare Advantage plans.
- **Telehealth Capabilities:** A critical piece of information in the modern healthcare landscape.

Value for Patients and Caretakers: With this data, applications could offer robust provider search tools, help patients build and manage their care teams, and simplify the process of seeking new or specialized care. For caregivers, it would streamline the coordination of appointments and services for their loved ones.

2. Granular Cost and Utilization Data:

While claims data provides a historical record of costs, developers need more forward-looking and detailed cost information to help beneficiaries navigate the financial complexities of healthcare. Key requests include:

- **Real-time, Patient-Specific Cost-Sharing Information:** This would allow applications to provide accurate estimates of out-of-pocket costs for specific services or procedures based on the beneficiary's plan.
- **Deductible and Out-of-Pocket Maximum Status:** Enabling patients to track their spending and anticipate future healthcare costs.
- **Procedure and Service Cost Estimates:** Similar to the cost transparency tools now available for some private insurance plans, this would empower beneficiaries to make more informed decisions about their care.

Value for Patients and Caretakers: These features would allow for the creation of powerful financial planning and management tools. Patients and their families could better budget for healthcare expenses, compare costs across different providers, and avoid unexpected medical bills.

3. Actionable Clinical and Quality Data:

Perhaps the most significant request from developers is the inclusion of clinical data. While claims data offers a glimpse into a patient's health journey, it lacks the clinical richness needed for truly impactful health management tools. Desired clinical data points include:

- **Problem Lists:** A consolidated list of a patient's health issues.
- **Allergies:** Critical for medication safety and care coordination.
- **Immunization Records:** Essential for preventive care and public health.
- **Basic Lab Results:** Allowing patients to track key health indicators over time.
- **Clinical Quality Measures:** Data on how well providers perform on specific quality metrics could help patients choose higher-quality care.

Value for Patients and Caretakers: Integrating clinical data would enable applications to provide a more holistic view of a patient's health. This could power medication adherence reminders, alert patients to potential drug interactions, provide personalized health insights, and facilitate more meaningful conversations with their doctors.

4. Patient-Generated Health Data (PGHD):

While not a direct CMS data source, developers are keen for the Blue Button 2.0 API to have the capability to **integrate patient-generated health data**. This would involve creating a standardized way for beneficiaries to connect data from their own devices, such as:

- **Blood pressure monitors**
- **Glucose meters**
- **Wearable fitness trackers**
- **Digital weight scales**

Value for Patients and Caretakers: This would empower patients to share a more complete picture of their health with their providers, leading to more personalized and proactive care. For individuals managing chronic conditions, the ability to seamlessly share their PGHD through a trusted application would be a significant step forward in their self-management capabilities.

In conclusion, while Blue Button 2.0 has laid a vital foundation, its evolution into a more comprehensive data source is critical for the next wave of patient-centric innovation. By incorporating detailed provider information, granular cost data, actionable clinical insights, and the ability to integrate patient-generated health data, CMS can empower developers to build the tools that will truly help Medicare beneficiaries and their caregivers navigate the complexities of the healthcare system and take a more active role in managing their health.

As a current Blue Button 2.0 developer, ICF is prepared and excited to assist CMS in building a more robust, patient-centric, health technology, ecosystem to improve beneficiary outcomes.