June 16, 2025

Stephanie Carlton
Deputy Administrator
Centers for Medicare & Medicaid Services

Steven Posnack
Acting Assistant Secretary for Technology Policy
Acting National Coordinator for Health IT
U.S. Department of Health and Human Services

Re: CMS-0042-NC; Request for Information; Health Technology Ecosystem

Dear Deputy Administrator Carlton and Acting Assistant Secretary Posnack:

Aligning for Health appreciates the opportunity to respond to CMS and ONC's Request for Information on building a more sustainable and effective health technology ecosystem. As a coalition focused on aligning health and human services to improve outcomes and drive system-wide efficiency, we support the direction outlined in this RFI and applaud CMS and ONC's commitment to removing barriers, supporting innovation, and advancing a more connected, patient-centered infrastructure.

We believe this is a pivotal moment to strengthen data exchange across sectors, invest in local digital infrastructure, and support platforms already in use by government and community-based partners. Interoperability and smart use of data are foundational. The priorities identified in the RFI, including the expansion of FHIR APIs, adoption of USCDI v3, and maturation of TEFCA, are aligned with that vision. However, meaningful progress will require ensuring these tools also work for community-facing providers and platforms that manage care coordination and service delivery outside of traditional clinical settings. The following are recommendations from Aligning for Health in response to CMS's Health Technology RFI, reflecting the organization's experience supporting cross-sector data integration, funding alignment, and whole-person care delivery.

Support for Social Care Platform Integration
Aligning for Health supports the continued expansion of FHIR-based APIs and standards-based data exchange across payers, providers, and community-based partners. However, many of the platforms most critical to whole-person care are not clinical systems. These include case management and referral platforms used by state agencies, care coordination entities, managed care organizations, and community networks. These tools are essential infrastructure in many state Medicaid programs and must be included in national interoperability strategies.
Many of our members operate or contract with platforms that coordinate thousands of service providers across domains such as housing, food access, transportation, and behavioral health. These platforms are used to track eligibility, referrals, service utilization, and outcomes across payer types and program types. Federal investment in standards that support API-level integration across clinical and non-clinical systems is essential. It ensures more effective use of existing infrastructure and reduces the need for duplicative builds at the local level.

Clarify the Role of HIEs as Infrastructure
Health Information Exchanges and similar data intermediaries play an important role in enabling secure connectivity. However, we have concerns that additional eligibility requirements by HIEs can ultimately lead to fragmentation. Many health systems and non-traditional providers already participate in data-sharing through other referral platforms, regional hubs, and private

exchanges. These models are working well in a variety of settings and reflect a move toward more modular and scalable exchange approaches. CMS should make clear that HIEs are one available infrastructure option. States, providers, and community partners should be given flexibility to pursue the solutions that best support their operational goals and the needs of their populations, as long as they meet basic security and data-sharing standards.

Enable Braiding and Blending Through Aligned Infrastructure

Across our membership, organizations are actively blending and braiding funding streams to support Medicaid enrollees with complex health and social needs. These efforts often include coordination with SNAP, housing authorities, workforce development, and behavioral health programs. CMS can support this work by aligning technology infrastructure and reporting expectations across federally supported programs. Our experience supporting Social Determinants Accelerator Act projects has shown that misaligned reporting requirements and siloed data systems create unnecessary barriers. CMS should collaborate with the Office of Management and Budget and other federal partners to issue shared technical guidance that supports unified platforms serving multiple programs. This approach would reduce burden, improve accountability, and encourage more efficient program integration at the state and local levels.

Promote Trusted Digital Identity and Access

Many organizations across health and social sectors report challenges related to secure user access and identity verification. Patients, providers, caregivers, and community partners often manage multiple logins across disconnected systems. This creates frustration and slows care coordination. CMS should support widespread adoption of trusted digital identity tools and should issue proposed rulemaking regarding use of a federal credential across all CMS-supported digital systems. This would reduce fragmentation, support strong privacy protections, and make it easier for authorized users to access the information they need.

Invest in Technology that Promotes Ease, Speed, and Impact

Technology should make care delivery more efficient. CMS should propose rules to guide prioritization of investment in systems that reduce unnecessary paperwork and connect individuals to services more quickly. This is especially important in rural and under-resourced areas where staffing and infrastructure are limited. Some of our members operate platforms that already support real-time eligibility checks, automated referral generation, integration with provider schedules, and shared care plans across clinical and non-clinical teams. These tools are helping improve outcomes, reduce administrative overhead, and close service gaps. CMS can help scale these results by supporting policies and funding structures that reward ease of use and real-world performance. Adequate investment in human infrastructure alongside technology is necessary to ensure seamless implementation and integration.

Ensure TEFCA Includes the Full Ecosystem of Care

TEFCA should support the full spectrum of care delivery. This includes referral platforms, public health agencies, care navigation tools, and other community-based systems. ASTP/ONC should provide a strategy and timeline for when TEFCA may expand to patients, community-based systems and other care navigation entities. This will help ensure that TEFCA meets the needs of individuals whose care relies on a combination of medical and social supports.

Much of the infrastructure needed to support whole-person care is already in use across states and communities. CMS and ONC can help scale that infrastructure by aligning standards, providing technical clarity, and ensuring that non-clinical systems are part of the national digital strategy. Aligning for Health appreciates the opportunity to provide this input and stands ready

to support CMS and its partners in advancing an efficient, flexible, and integrated technology ecosystem that reflects the full scope of care delivery in the United States. We look forward to the opportunity to participate in further discussions or to provide comments on related policies. For further information about Aligning for Health's comments, please contact Krista Drobac at kdrobac@aligningforhealth.org.

Thank you,

Krista Drobac

Executive Director
Aligning for Health