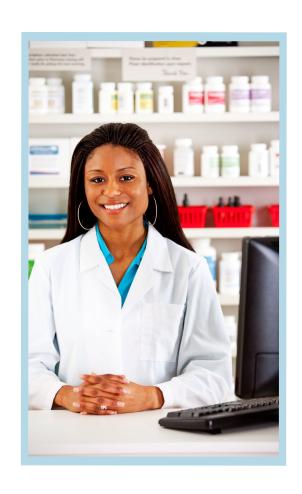
## The Direct Project



Launched in March 2010 as a part of the Nationwide Health Information Network, the Direct Project was created to specify a simple, secure, scalable, standards-based way for participants to send authenticated, encrypted health information directly to known, trusted recipients over the Internet. The Direct Project has more than 200 participants from over 60 different organizations. These participants include EHR and PHR vendors, medical organizations, systems integrators, integrated delivery networks, federal organizations, state and regional health information organizations, organizations that provide health information exchange capabilities, and health information technology consultants.

The Direct Project focuses on the technical standards and services necessary to securely push content from a sender to a receiver. When these services are used by providers and organizations to transport and share qualifying clinical content, the combination of content and Direct-Project-specified transport standards may satisfy some Stage 1 Meaningful Use requirements. For example, a primary care physician who is referring a patient to a specialist can use the Direct Project specifications to provide a clinical summary of that patient to the specialist and to receive a summary of the consultation.

The Direct Project works with a wide variety of organizations to evaluate existing, currently available standards and specifications to determine which can be applied to achieve secure data transport in a simple and effective manner. The Direct Project makes specification recommendations to the Office of the National Coordinator for Health IT (ONC) who in turn evaluates their applicability for inclusion in the Nationwide Health Information Network and related software products such as CONNECT. Private sector organizations have already begun implementing Direct Project specifications into their offerings which will help to ensure that a wide variety of products from different vendors will ultimately be able to share patient data with each other securely and with ease.



## **Direct Project Pilots**

On February 2, ONC announced that providers and public health agencies in Minnesota and Rhode Island began exchanging health information using specifications developed by the Direct Project. Other Direct Project pilot programs will be launched soon in New York, Connecticut, Tennessee, Texas, Oklahoma and California to demonstrate the effectiveness of the streamlined Direct Project approach, which supports information exchange for core elements of patient care and public health reporting.







Since mid-January, Hennepin County Medical Center (HCMC), Minnesota's premier Level 1 Adult and Pediatric Trauma Center, has been successfully sending immunization records to the Minnesota Department of Health (MDH).

The second pilot implementation site, The Rhode Island Quality Institute (RIQI), has delivered a pilot project with two primary goals. First, RIQI is improving patient care when patients are referred to specialists by demonstrating simple, direct provider-to-provider data. Second, RIQI is leveraging Direct Project messaging as a means to securely feed clinical information, with patient consent from practice-based EHRs to the state-wide HIE, current *care*, to improve quality by detecting gaps in care and making sure the full record is available to all care providers.

Other pilot projects to be launched this year include a Tennessee effort to provide care to veterans and their families involving the Department of Veterans Affairs, local hospitals and CareSpark; a New York effort including clinicians in hospital and ambulatory care settings with MedAllies and EHR vendors; a Connecticut effort involving patients, hospitals, ambulatory care settings and a Federally Qualified Health Center with Medical Professional Services, a PHR, and a major reference laboratory; an expansion of the VisionShare immunization data pilot to Oklahoma; a California rural care effort involving patients, hospitals and ambulatory care settings with Redwood MedNet; and an effort in South Texas with a collaboration of hospitals, ambulatory care settings, public health, and community health organizations to improve care to mothers with gestational diabetes and their newborns.

The launch of the pilot demonstrations, less than a year from the inception of the Direct Project, shows that the project is on track to give U.S. healthcare providers early access to an easy-to-use, Internet-based tool that can replace mail and fax transmissions of patient data with secure and efficient electronic health information exchange

For more information about the Direct Project, please visit http://directproject.org.