

NOVARHIOsm

The Northern Virginia Regional Health Information Organization Inc. (NOVARHIO) was organized in June 2007 as a non-member not-for-profit charitable corporation in the Commonwealth of Virginia and seeks a determination of tax-exempt qualification under Section 501(c)(3) of the Internal Revenue Code of 1986, as amended.

NOVARHIO's Board of Directors includes individuals who are involved with major community organizations, institutions, and companies, and with government.

The purposes of NOVARHIO include to:

Improve the health status and healthcare of individuals in Northern Virginia by facilitating the timeliness, availability and exchange of accurate medical records and health information when needed for health maintenance and treatment. Collaborate and cooperate with health care providers, payors, vendors, and educational institutions, regional health information organizations, and others in improving health status and increasing the quality of care, patient safety, cost effectiveness, and efficiency of healthcare delivery.

Encourage and expand the adoption of healthcare information technology in health care institutions and physician office practices in Northern Virginia.

The goals and objectives of NOVARHIO include encouraging, facilitating, and supporting secure and protected web access by physicians and health consumers to:

Laboratory, radiology, and pharmacy information from key health care service providers;

Personal health information; and

Immunization records in collaboration with the Virginia Immunization Information System (VIIS).

In addition NOVARHIO will support institutional health providers and physician medical practices in the development and implementation of electronic health records, with interoperability for health information exchanges.

Achievement of these goals and objectives will involve providing support and assistance to the under-insured and the non-insured, and to the needy and disabled, and to other individuals requiring and receiving health care, by:

Collaborating with community and charitable and other organizations to facilitate internal implementation of health information technologies and health information exchanges;

Contracting with health information technology vendors to provide information retrieval, data storage, and information distribution to physicians and other health care providers;

Facilitating cooperation among health insurance plans and health care providers to develop systems that will support health information exchange and quality initiatives.

A critical component of NOVARHIO's activities will include strong privacy and security protections for all information.

The initial geographic scope of the NOVARHIO will cover Planning District 8 of Virginia, including the counties of Fairfax, Arlington, Prince William, and Loudoun and the incorporated cities of Fairfax, Falls Church, and Alexandria. The 2006 population of Planning District 8, most of which receives health care from Northern Virginia health care providers, is 2,055,014. There are approximately 4,600 licensed physicians practicing in Northern Virginia.

Northern Virginia has three major hospital systems providing care:

INOVA Health Systems, a tax-exempt charitable organization with service components in Fairfax, Loudoun, and Price William Counties, and the incorporation cities of Fairfax, Fair Oaks, Mount Vernon, Alexandria, and Potomac ;

Virginia Hospital Center at Arlington, a tax-exempt charitable organization; and

Hospital Corporation Of America (HCA), Reston.

The total number of hospital encounters for which health care information exchanges could be applicable would be more than 1,175,000 (2006 data). This estimate is based on the available statistics for hospital admissions, ED visits, and outpatient visits (annual) for each system or hospital.

All health care providers will also benefit from health information exchanges. All Hospitals (except Mount Vernon) have hospital-based emergency departments. INOVA Hospitals, Virginia Hospital Center at Arlington and HCA Reston have stand-alone Urgent Care Centers. INOVA Health Systems, Virginia Hospital Center at Arlington, and HCA Reston have outpatient surgical centers. Rehabilitative centers, skilled nursing facilities, community health centers, and home health agencies would also be a part of the NOVARHIO health information exchange process.

Free clinics operating in Northern Virginia are a critical part of NOVARHIO's activities, in order to enhance their ability to provide free care to uninsured and low-income patients. Additionally, the local governmental jurisdictions of Northern Virginia have Health Departments, which provide and support services appropriate for health information exchange involvement, including to those who are indigent or infirm, and to those facing urgent needs because of terrorism, weather-related catastrophes, epidemics, and other overwhelming challenges to public health.

NOVARHIO will not provide and will not pay for direct health care services. Instead, NOVARHIO will, as a conduit, encourage and provide electronic connectivity to facilitate

the exchange of health care information among providers (hospitals and others), physician offices, and ancillary medical services (laboratory, radiology, and pharmacy) using a web based electronic system that will transfer patient's demographic and personal health information from various sources to the point of patient care in a timely and secure manner. Physicians, emergency medical system, and institutional health care providers will be able, subject to applicable privacy protections and requirements, to access laboratory results, radiology reports, pharmacy records for current medications and medication allergies, and immunization records, without the delays, costs, and complications of paper-based systems. As the use of electronic health records in physician offices and hospitals increases, electronic health information will also be available for medical records creation, storage, and retrieval by providers, and by patients.

The health information exchange components of NOVARHIO will include:

Data sources: Systems that provide and receive data, such as provider-based electronic medical records, immunization and disease registries, laboratory and radiologic information management systems, and pharmacy information systems;

Data store: Central or distributive databases containing patient identification and health information;

Interface engine: A software utility that provides translation of standard messages containing identification and health information being sent to or from the data store.

Authentication/Authorization service: A software utility that provides reliable identity verification of system users and ensures that users' secure information and services are appropriate;

Directory service; Central repository for information about system users (master provider index) and patients (master patient index); and

End User Applications: Applications used to access patient and health information.

Other activities may include:

Standardized patient demographic information to simplify physician office check-in;
Electronic file for life records available to emergency medical technicians and emergency departments; and

Personal health records populated by validated medical information from all sources of health care information.

Those expected to enjoy the benefits of NOVARHIO's activities include employers providing health care benefits to employees, hospitals, skilled nursing facilities, rehabilitation facilities, assisted living centers, home health care agencies, emergency medical systems, physicians, and health care consumers. NOVARHIO will address quality control through performance metrics that are achievable and measurable. These

objectives will be used for both internal and external assessment of the success of the organization. The components will include valid performance data on services provided that are easily measurable and ideally retrievable from a reliable, current data source. The metrics will demonstrate positive health outcomes for those whose health care is enhanced by the activities of NOARHIO.

NOVARHIO will embrace and complement the strong privacy and security protections contemplated by the requirements of the Administrative Simplification subtitle of the Health Insurance Portability and Accountability Act of 1996 (HIPAA), and under the laws of Virginia.

Transparency to management of individually identifiable health information will be maintained by the NOVARHIO, and information will not be disclosed for purposes not related to health care delivery. Information will not be sold or otherwise made available to marketing, commercial solicitations, or other purposes inconsistent with maintaining the respect and confidence of all individuals whose information is made available to and via NOVARHIO, and of all physicians, institutional providers, and others who support and cooperate with the activities of NOVARHIO.

Startup revenues will be derived from grants and gifts from foundations, corporate partners, individuals, and government agencies. Determination of the cost for services of the NOVARHIO will be included in initial pilot projects. In-kind donations of services by collaborating supporters will also comprise a part of such revenues. Upon completion of the start-up phase of activities, revenues also are expected to be derived from subscriber fees paid by employers (for the benefit of their employees), commercial and government health insurers (to enhance plan benefits and reduce cost), and institutional providers (hospitals, SNFs, rehabilitation facilities, and home health organizations). Physicians may be asked to pay a connection fee to NOVARHIO and subsidies will be available to those who are providing health care to the under-insured, the uninsured, the disabled, and others requiring special consideration because of financial need.

Alan S. Goldberg

Attorney & Counsellor-at-Law

6845 Elm Street - Suite 205 | McLean, Virginia 22101-3822

Alan@GoldbergLawyer.com

Alan Stuart Goldberg practices business and tax law including the delivery and regulation of health care, and information technology. He is a member of the bars of the Commonwealth of Virginia, the State of New York, the District of Columbia, the State of Florida, and the Commonwealth of Massachusetts; and the bars of the United States Supreme Court, the First Circuit Court of Appeals and the Fourth Circuit Court of Appeals, and the United States District Court - Massachusetts and the United States District Court - Eastern and Western Districts of Virginia, and the United States Court of Federal Claims and the United States Tax Court.

A past President of the American Health Lawyers Association (1991-1992), Mr. Goldberg served on the AHLA Board of Directors from 1981 to 1993, and served as an Internet advisor to the AHLA Board. He received the AHLA David J. Greenburg Service Award in 1996 and was named an AHLA Inaugural Fellow in 2005. Mr. Goldberg is the founding moderator of the American Health Lawyers Association Health Information and Technology Internet listserv.

In 2006, Mr. Goldberg received the Distinguished Alumnus Award from Boston College Law School at the 75th anniversary celebration of the founding of the law school.

Mr. Goldberg has appeared in The Best Lawyers in America and has served as Vice Chair of the American Health Lawyers Association Health Information and Technology Practice Group, as well as Chair of the American Bar Association Health Law Section's e-Health & Privacy

Interest Group.

Mr. Goldberg received his AB in history from Brooklyn College of the City University of New York, and his JD from Boston College Law School, where he was a member of the Law Review, and was selected for the National Moot Court Team. In 1978, he received his LL.M. (Taxation) from Boston University School of Law. After graduation from Boston College Law School in 1967, Mr. Goldberg commenced the practice of law at Goulston & Storrs, in Boston, Massachusetts, and from 2002 until 2006 in Washington, DC.

Upon admission to the bar of the Commonwealth of Virginia on June 5, 2006, Mr. Goldberg opened the law office of Alan S. Goldberg, Attorney & Counsellor-at-Law, which is located at 6845 Elm Street, Suite 205, McLean, Virginia 22101 and is Mr. Goldberg's sole office location.

Mr. Goldberg's introduction to health law occurred during the dawning of the Medicare/Medicaid programs era when he served as a staff Judge Advocate, a District Claims Officer, and a prosecutor and defense counsel in the United States Navy from 1968 to 1970. During his tenure in the U.S. Navy JAGC, he was involved in Navy investigative actions relating to the return of the USS Pueblo from North Korea and the Sealab undersea exploration project in California.

Mr. Goldberg has authored numerous publications on business, health care, technology, and other legal issues including on topics relating to privacy and security, telemedicine, civil and criminal health care regulatory enforcement, ethics and professional responsibility, assisted living, and long term care development and financing. Mr. Goldberg has planned and participated as a moderator and as a lecturer in numerous national and local conferences and teleconferences, including programs for the American Bar Association and the American Health Lawyers Association. He also has planned and participated in educational programs for

many other organizations in Virginia, Massachusetts, the District of Columbia, Florida, Michigan, South Carolina, Oregon, London UK, and Israel, including the Massachusetts Hospital Association, Massachusetts Dental Society, Massachusetts Medical Society, and the Massachusetts Long Term Care Foundation; the American Telemedicine Association; the Health Care Compliance Association; the Workgroup For Electronic Data Interchange; the American Health Care Association; the Healthcare Information and Management Systems Society; the United States Navy; the Centers for Medicare and Medicaid Services; the District of Columbia AHIMA chapter; The Sedona Conference; the Virginia State Bar and the Virginia Bar Association; Virginia Continuing Legal Education; and the Northern Virginia Technology Council. Mr. Goldberg also has presented loss prevention seminars relating to technology issues to the membership of Attorneys' Liability Assurance Society.

Additionally, Mr. Goldberg was the editor of "The Computer Wizard" law and computer technology column published by the American Bar Association's Business Law Section magazine "Business Law Today".

Mr. Goldberg served on the Practice Council: Electronic Health Record of the American Health Information Management Association, and currently Co-Chairs The National HIPAA Summit series. He served as a Council Member of the ABA Health Law Section and was its first Substantive Webmaster. Mr. Goldberg served as Co-Chair of the Steering Committee of the Health Law Section and currently serves as a member of the Rules of Professional Conduct Review Committee of the DC Bar. He is a member of the Council of the Virginia Bar Association Health Law Section with a particular focus on continuing legal education and the publication of an eNewsletter. Mr. Goldberg is a member of the Technology and the Practice of Law Special Committee and Secretary of the Board of Governors of the Health Law Section of the Virginia State Bar. He is Co-Chair of the Health Technology Committee of the Northern Virginia Technology Council, and he currently serves as legal counsel to the Northern Virginia Regional Health Information Organization Inc. (NOVARHIOsm) and Secretary of the Board of Directors of NOVARHIOsm. Mr. Goldberg is a former member of Local 802, American

Federation of Musicians, Associated Musicians of Greater New York.

Mr. Goldberg's academic associations began at Boston College Law School where he taught a course in Land Finance. He has taught eHealth Care Law at the University of Maryland School of Law in Baltimore, Maryland as well as at Suffolk University Law School in Boston, Massachusetts, both in person and using distance educational techniques including live video two-way communications with his students. He has taught Health Care Informatics and Law as a member of the Adjunct Faculty of Marymount University School of Business Administration in Ballston, Virginia. Mr. Goldberg is currently a member of the Adjunct Faculties of the George Mason University School of Law in Arlington, Virginia and the George Mason University College of Health and Human Services Department of Health Administration and Policy in Fairfax Virginia, where he teaches Health Law.

Among Mr. Goldberg's interests include the transactional and financial aspects of health care, life sciences, biotechnology, and related businesses including formation and operation of business entities, regulatory enforcement and civil and criminal health law defense including the defense of licensure, peer review, and payor actions against health care providers, the Internet, security and encryption, privacy and confidentiality, software licensing, medical devices, corporate compliance programs, certificate of public need, reimbursement, regional health information organizations, information technology, taxation including tax-exempt organizations, and telemedicine, and challenges and opportunities involving the application of technology to the practice of law and medicine and to the delivery of healthcare.