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Justin: Now my second guest needs no introduction at all, but I'll certainly introduce John Halamka, CIO of Beth Israel Deaconess. Thank you very much for joining the broadcast, John.

John: Well, a pleasure to be here and hopefully I still have a voice.

Justin: You do, my friend, excellent. So I think the biggest thing here, we have a reoccurring theme for all our guest this year. And that's really focusing on, we want to get best practices and actionable intelligence. But before we dive in too deep, what are some of the big healthcare and health IT trends or opportunities that you're seeing out there? Even with your community at Beth Israel or in the industry.

John: Sure. As Steve just said, it's no longer sufficient to look at data in one silo. We're looking at the patient over the course of their lives. As Secretary Birdwell said, we're going to move from fee to service to this idea of being payed for quality and outcomes. And that is an imperative to share data from every site of care and make sure we're keeping it healthy. And that means embracing patients and families and patient generated data, moving to the Cloud and moving to mobile. So I think what we're seeing and this HIMSS is we're braking out from intra-operability to inter-operability.

Justin: That's excellent. Where do standards come into play there?

John: Now standards, of course, are necessary, but not sufficient.

Justin: Yep.

John: So imagine that Joe's Endoscopy Shack opens up in your neighborhood. Now if we have the perfect standard, would you send data to Joe's? I don't know, right. So there's policies, guidelines. So I think as a community we are now developing the kind of trust fabrics to understand who should get the data and what can be done with it.

Justin: What are some of the avenues that you would point people to? Because we have a large listenership, but mainly because of HIMSS, a lot of hospitals and health systems and some larger practices. Where would people go to learn more about some of those aspects there?

John: So one of the more exciting expects of standards. I recognize standards can be a dry topic, okay.

Justin: I love it, but yes.

John: Is the Argonaut Project.

Justin: Excellent.

John: And so www.argonautproject.org. This is not a new organization. It is not seeking money. It is simply a project of Cerner, Epic, MEDITECH, Athena, McKesson, Surescripts, academia industry and government coming together. And you'll see on those pages, what are the standards? How are we going to use them? How is is going to create a Facebook, Amazon, Google-like experience? It doesn't require teams of PHDs. Twenty-six year olds in a garage can use these new standards and create the next great app.

Justin: That's excellent. So what are the ways you're engaged in this and you're addressing? Because you wear a lot of hats in the industry as well. So what are some of the ways that you're addressing?

John: So I am a physician. I'm a husband. I'm a father. And I'm a patient. So the best thing I can do is make sure the experience of all the patients at Beth Israel Deaconess mirrors that of which I would want for my own family. And that means mobile apps that enable you to get your data and push your data. It means creating mechanisms by which your preferences are respected. Giving patients in our ICUs iPad apps so they can see the progress of their loved ones. So we try to be a little edgy. It takes a little bit of risk taking, because with the risks you can get the big rewards.

Justin: No, that's fantastic. So you're engaged in the Argonaut Project personally, correct?

John: Correct.

Justin: What are some of the other areas or committees that you're engaged in? Because you worked a lot on, I think it was Hitsbe [SP] back in the day, but what are some of the ones you're engaged in today?

John: So I served the Bush administration for four years, the Obama administration for six years. Just last month I handed the baton of the HIT standards committee off to Arion Malik and Lisa Gallagher. That was because I'd hit my term limit. So now the next generation will harmonize standards. So what that means is I now have the freedom to go internationally. So I'm up in Canada. I'm in the UK. I'm in China. Because really healthcare is a global issue.

Justin: Yes, it is.

John: And so if I can make a difference by making healthcare seamless across the world, that's a noble goal.

Justin: That's fantastic, John. So what are two or three best practices? This is my final question. But what are two or three best practices that you would offer? You do a lot of speaking as well. But if you're speaking to a CIO of a progressive organization or a leading facility. What advice would you give to them? What are some of the actionable next steps that they can take? Like you brought up earlier, not only can standards might be dry to some people, but it's also daunting. That's a big goal of trying to create an operability in your community. You can certainly engage CommonWell or you can engage Sequoyah. There's little things you can do. But what are the two or three best practices that you may mention to somebody, say, "Hey, these are the things that you can do next. Anybody can do it."

John: So healthcare is getting bigger. Mergers and acquisitions and associations more common. The Cloud is something you need to embrace. The only way I can be agile enough to deploy the records where I need them, when I need them is to move to Cloud. There's risk, but think about it. Who is smarter? The five guys who work for you or the 5,000 that work for Amazon? So embrace the Cloud, embrace mobile. Patients and their families are not using desktops. As you pointed out with these evolving standards, Fire. With some of the enablers like Surescripts, CommonWell, Sequoyah, Direct Trust, you'll find there's more fluidity that enables you to embrace apps, modules. It won't be just one size fits all computing from a single vendor in the future.

Justin: That's fantastic, John. No, fantastic advice. So Cloud, mobile. Tell me a little bit in closing about Fire. Because Fire's been getting a lot of press. It's part of the Argonaut Project obviously. Where are we going with Fire and what do you think some of the next steps are around Fire across an industry?

John: So I am a MIT trained engineer, physician, entrepreneur. It does require all of those techniques and technologies to understand some of our older standards. But wouldn't we want the future standards to be understood by those without MDs, PHDs or vast amounts of technical expertise? And Fire is that idea. That we will take an allergy, let's say. And agree, an allergy is the thing you're allergic to, the reaction you had, when it happened, who saw it, and your level of certainty. So we can tell that 26 year old, "If you create and app and it's going to show five things, it'll be useful to the patient." No PHD needed and that's the whole Fire concept. Accelerate our progress by making it simpler.

Justin: That's fantastic, John. Very well said. Very well put. And I think everybody... because I get asked a lot of questions around just Wi-Fi and how do we engage? And so I certainly do point them to the Argonaut Project as a great starting point. John Halamka, thank you very much for joining the show today. And we'll see you back, I'm sure.

John: Absolutely. Thank you.

Justin: Thank you, John. Take care.