

HHS Digital Health Chief Seeks Help From Silicon Valley On Expanding Use Of AI Data

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HHS' digital health chief said Tuesday (July 29) the department is seeking out relationships with Silicon Valley health technology companies to manage patient data and increase access to artificial intelligence for both providers and patients. The office already has a partnership in the works with the National Council for Prescription Drug Programs (NCPDP) to allow patients to see whether a pharmacy has their medication in stock along with the price of the drug.

Tricia Lee, chief of digital health strategies and assistant secretary of the Technology Policy/Office of the National Coordinator for Health IT (ASTP/ONC), told health stakeholders at an event hosted by the Health Innovation Alliance that they should expect to see more government partnerships with private health care companies.

"This administration is very, very supportive of the tech industry," Lee said. "You see across HHS, there are a lot of really cool, smart people that are coming into government, which is good for us. And as mentioned, we need to learn from those who are doing the things, how we can also be agile in the way we approach governing as well."

A partnership between ASTP/ONC and NCPDP --- a nonprofit organization that is a leading developer in medication interoperability -- is already underway, with a pilot program to increase information on the availability of medications and pricing for patients and providers.

"We are working with them to pilot functionality that would allow a provider to understand before a prescription is sent whether or not a product is available in the pharmacy," Lee said. "So thinking about ease of access, it's like, okay, right now, we can figure out whether something is affordable for a patient but isn't even there. Why are we sending people to pharmacies they don't have in stock?"

ASTP/ONC is also working on how FDA can support centers of excellence to help support AI adoption and innovation, according to Lee.

"A big thing to look forward to here is the push for open data, push for open code and the push for more transparency, and for innovators, startups and whoever, to be able to access information to make the most use of some of these things," she added. "We're really excited about the data that's necessary to drive this. You can't have good AI without robust data feeding these models."

Lee added that there's "a lot HHS can learn from the private sector in pushing innovation. "[N]ot necessarily regulatory cycle, but how we can try to be more agile as regulators, as policy makers and as those that are trying to help shape what this looks like nationwide," Lee said.

ASTP/ONC will award two grants this year, including an investment in the Trusted Exchange Framework and Common Agreement (TEFCA) to pursue individual access to health care information that supports data exchange and providers' access to care records and treatment payments.

"Individual access is like you and me being able to access our own records for our own use, for caregiver use or to exchange with someone else," Lee said. "We're trying to invest and understand better how we can get further adoption of that exchange purpose through this trusted exchange framework."

ASTP/ONC is also looking to invest more in how to support standard-based approaches to using application programming interfaces (APIs) or subscription services via TEFCA.

"How can we support third-party apps that are doing things in the digital health space that can also broaden how health care providers and individuals are exchanging information accessing these tools?" Lee asked.

AI presents a unique opportunity to reduce burdens on providers, Lee said, and ASTP/ONC is conducting research to understand the intersection of how health IT is being deployed in certain payment environments.

"Can there be a difference in how those tools are utilized depending on how care is being reimbursed for what payment, environment or quality reporting requirements

might be necessary for you,” she said. “We're trying to understand and learn about that and work with our partners at CMS to better further how we can make sure that care works, not just for patients, but also for providers as well.”

ASTP/ONC will also continue to support prior authorization “across the board” within CMS, Lee said, including for medical procedures and medications for providers and their staff as they're seeking to get patients on treatment.

Meanwhile, The Trump administration is working to eliminate AI diversity, equity and inclusion guardrails across the federal government, including health agencies -- a move sources say will seep into the private health sector.

The White House AI Action Plan released July 23 gives ASTP/ONC an opening to double down on AI governance that is shared across government, including recruiting and utilizing AI tools within agencies to make things like comment review easier and more efficient. -- *Cara Smith* (csmith@iwpnews.com)