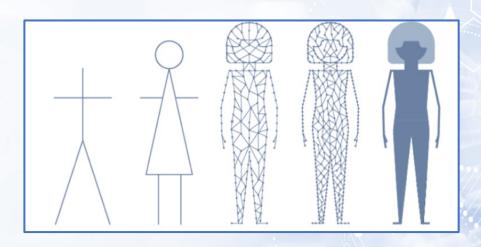
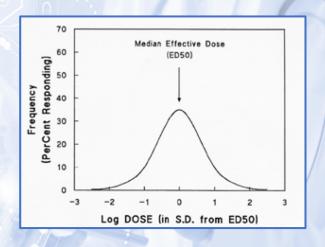


Quality Healthcare Demands All Data in Raw Form



Data deepens insight for each unique person: genes, omics, images, lab values, SES, zip code, exposures, lifestyle, diet ...



Data treats each person not the average of a group



GOAL: Bring Data into a Network controlled by Patients



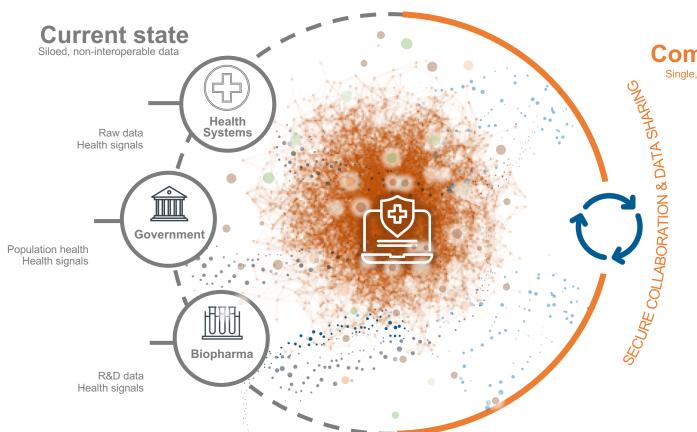
- Patients determine who can access and for what purposes
- Data is aggregated across lifetime comprehensive from health through disease
- A standard health record (SHR) can be extracted enables patients (or their proxies) to seamlessly review data where and when needed for care and research

Health Data Ecosystem: scalable, dynamic, computable, and secure for all PURPOSE: 1st optimal patient-care, will speed research, policy, equity

HHS

NIH

Creating a Computable Health Ecosystem

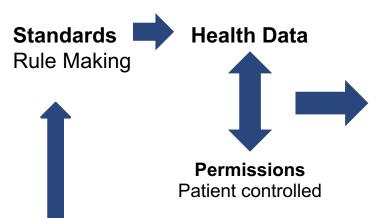


Computable health model

Single, reconfigurable, computable data set

- Structured and unstructured signals are included
- Raw data is never lost, patient ownership preserved, and all changes are auditable
- Data and information can be aligned to various use cases

Health Data Ecosystem



Platform & Capabilities

- Provenance & Lineage
- Element level provisioning
- Patient Trust Model (patientcontrols permissions)
- Element based cohort builder
- Raw data based, dynamic models
- Secure & scalable
- Proven (non-aspirational)

Users

- Providers & Health Systems
- Researchers

Patients

 Others: Payers, Pharma, Device, HHS (NIH, FDA, CDC, CMS, ONC)

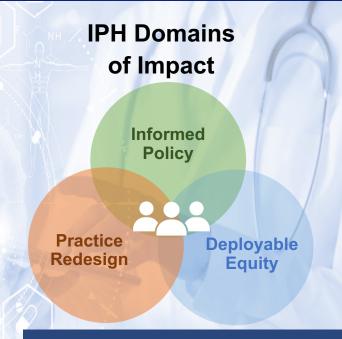
UCI Institute for Precision Health (IPH)

UC Irvine Role HHS/NIH Health Ecosystem

The AHS on the small team leading redesign with NIH Director
Creating and integrating content at UCI to exemplify the NIH strategy
One Health UCI model = NIH
Chow Innovation Lab (problem statements outputs)







Unit success measured as improved outcome in domains (includes cost-effectiveness)