
HITOC Technology Workgroup Meeting

April 20, 2011

Portland State Office Building, Room 1D
800 NE Oregon St
Portland, OR 97232



Agenda

1:00pm Opening

1:15pm Updates

1:45pm Direct Project

2:15pm Provider Directories

3:00pm Break

3:15pm Lab and eRx Stakeholder Groups

3:45pm Content Standards

4:40pm Public Comment

4:55pm Next Steps

5:00pm Close

Updates

- Health System Transformation Team
- Legal & Policy Workgroup
- HITOC

Direct Project

- ONC Direct Boot Camp
 - Goal: assist states with approved (or near-approved) strategic & operational plans that incorporate Direct to move toward implementation of Direct
 - Held April 12-14 in Chicago, IL
 - 39 states and territories registered
 - <http://wiki.directproject.org/ONC+Direct+Boot+Camp>
- Direct Community of Practice (CoP)
- Oregon Pilots

Provider Directories

- ILPD recommendations approved by HITPC 03/02/2011
- Provider Directory Standards & Interoperability Framework Initiative announced (details forthcoming)

Break

Lab & eRx Stakeholder Groups

Lab Stakeholder Activities

Key Objective	Supporting Activity to Reach Milestone
1. Define strategies and objectives to enhance lab interoperability	Approved March 2011
2. Design and conduct survey of laboratories (100+ hospital & clinic labs) <ul style="list-style-type: none">a. Laboratory demographics & results statisticsb. Technical capability for electronic reportingc. Possible regulatory or policy concernsd. Efforts to support MU among existing partnerse. Facilitators and barriers to lab HIE	Survey sent April 13, 2011

Lab Stakeholder Activities

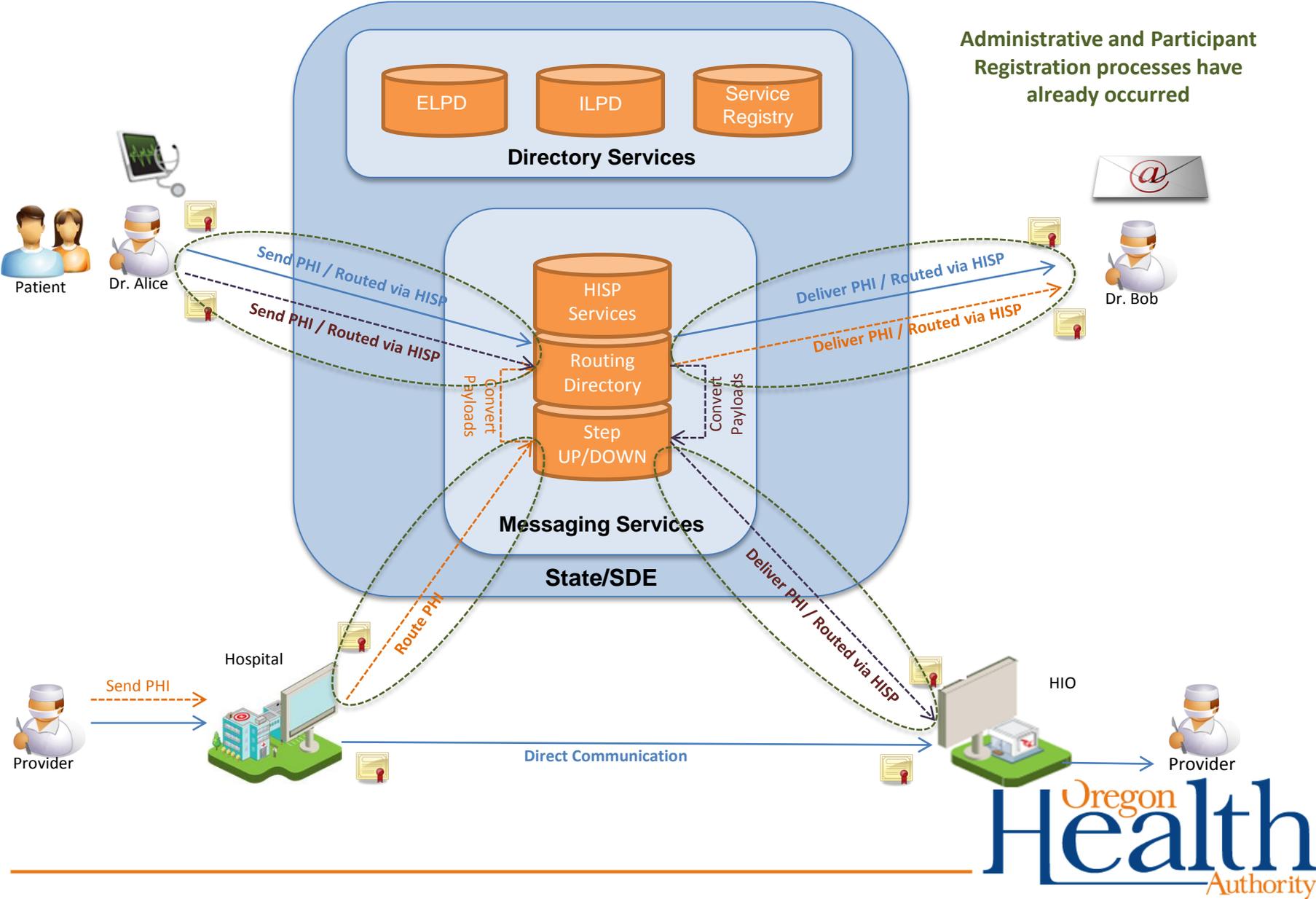
Key Objective	Supporting Activity to Reach Milestone
3. Analyze & summarize survey responses	Preliminary analysis May 1, 2011 Stakeholder review May 13, 2011
4. Develop action plan to increase adoption	Develop in May 2011 Present to Stakeholders June 2011
5. Define metrics to assess and monitor progress	Recommendations by June 2011

eRX Stakeholder Activities

Key Objective	Supporting Activity to Reach Milestone
1. Define strategies and objectives	Approved March 2011
2. Design and conduct Hospital Pharmacy Survey (54 Oregon hospitals)	Survey sent April 7, 2011 Analysis of results April 2011 Stakeholder review May 2011
3. Design and conduct Independent Pharmacy Survey and Outreach a. Outreach result of low online survey response rate (3%)	Survey sent February 2011 Outreach designed March 2011 Outreach launched April 19, 2011 Analysis of results May 2011 Stakeholder review May 2011
4. Action plan developed to enhance eRX adoption	Draft developed May 2011 Stakeholder review & approval June 2011
5. Define metrics to assess and monitor progress; alignment with ONC CoP	Data analysis April 2011 Draft metrics May 2011 Stakeholder review June 2011

HIE & Content Standards

Statewide Health Information Exchange



Clinical Exchange Requirements in Stage 1 MU

Stage 1 MU Objective	HIE-related Technology Criteria
Capability to exchange key clinical information among providers of care and patient-authorized entities electronically.	Transmit patient summary record in one of the formats below, and receive all: <ul style="list-style-type: none"> • HL7 CDA R2, CCD • CCD/HITSP C32 • ASTM E2369 CCR
<i>Provide summary of care record for each transition of care.</i>	Transmit patient summary record in one of the formats below, and receive all: <ul style="list-style-type: none"> • HL7 CDA R2, CCD • CCD/HITSP C32 • ASTM E2369 CCR
<i>Incorporate clinical lab test results as structured data.</i>	Receive results in a structured format.

* *Italicized objectives are in the Menu Set*

Standards & Interoperability Framework

- The S&I Framework is a set of integrated functions, processes, and tools being guided by the healthcare and technology industry to achieve harmonized interoperability for HIE.
- Work is organized around Initiatives.
- An S&I Initiative focuses on a single challenge, developing content, technology specifications, and reusable tools and services to enhance healthcare.
- <http://wiki.siframework.org>
<http://wiki2.siframework.org>

S&I CDA Consolidation

- Launched to harmonize the numerous CDA implementation guides upon which C32 and other clinical content specifications are based in order to identify and address impacts to implementation
- The CDA Consolidation Project will develop:
 - Library of CDA Templates
 - Updates to and harmonization of C32
 - Harmonization of HL7 and IHE templates
 - Demonstrations of templated CDA as a data element centric paradigm for HIE, corresponding to PCAST recommendations
 - A testing solution to enable implementers to validate their output

S&I Transitions of Care (ToC)

- Focusing on supporting all transitions of care with a common modular set of data that can be used both in a document context and to inform downstream clinical decisions (med reconciliation, updating problem, allergy lists, decision support, etc.)
- The ToC will develop:
 - Use Cases and Requirements
 - Vocabulary
 - The communication/expression of specifications in CCR and CDA
 - Harmonization
 - Document differences in C83 and CCR

S&I Lab Results Interface (LRI)

- Launched to address the challenge of lab reporting to ambulatory primary care providers.
 - It aligns with the Meaningful Use goal to incorporate lab results into EHR as structured data
 - Also supports objectives for Decision Support, Quality Reporting and Transitions in Care
- Initiative Scope:
 - Requirements driven primarily by the needs of internal medicine, family practice and pediatrics, but may also be leveraged by other providers and settings
 - Optionally: enable pilots that demonstrate electronic results delivery through the agreed-upon standard, including linkages with directories and transport
- Workgroups focused on:
 - Identifying and developing the use cases and functional requirements supporting the business needs for exchange and interoperability
 - Selecting the appropriate subset of tests to be included in the standard, as well as the corresponding vocabulary
 - Identifying the assumptions behind existing standards and elements to be harmonized across existing implementation guides

State HIE Lab Interoperability CoP

- The State HIE Lab Interoperability CoP is comprised of approximately 70 members, including State HIT Coordinators and other key state stakeholders working to advance lab interoperability in their state.
- Short-term objectives focus on lab results delivery, including:
 - Developing standardized contract language for EHR contractors and lab IT procurements, specifically for lab-to-EHR exchange requirements and vendor selection
 - Identifying common levers for Medicaid, private payers and others
 - Defining CLIA and other regulations that relate to or may potentially hinder laboratory participation in HIE
 - Standardizing content specifications for results reporting, including HL7, LOINC®, ELINCS (content and vocabulary) as well as policy levers to encourage use of standardized laboratory codes
- Long-term objectives focus on lab orders

Consumer & Public Health Requirements in Stage 1 MU

- HIE Core Services can also facilitate MU objectives involving consumers...
 - (EPs) Provide patients with clinical summaries for each visit
 - (EHs) Provide patients an electronic copy of discharge instructions
 - Provide patients with an electronic copy of health information
 - *Send reminders to patients for preventive and follow-up care*
 - *Provide patients with timely electronic access to health information*
- ...and potentially public health.
 - *Submit electronic immunization data to immunization registries*
 - *Submit electronic syndromic surveillance data to public health agencies*
 - *Submit electronic data on reportable lab results to public health agencies*

* *Italicized objectives are in the Menu Set. EPs & EHs must meet at least one public health objective. In Oregon, EPs can only meet the immunization objective. See*

<http://public.health.oregon.gov/ProviderPartnerResources/HealthcareProviders/MeaningfulUse/Pages/index.aspx>

Administration

- Public Comment
- Report to HITOC
- Next Technology Workgroup Meeting
 - Thursday, May 12, 2011
 - Portland State Office Building, Room 1E
800 NE Oregon Street
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