








Standards For Interoperability In Federal Health IT Programs

20 July, 2007

Ukiah, California

-  Overview Of Federal Health IT Entities And Processes
-  HHS' "National Health IT Agenda"
-  Health Information Technology Standards Panel (HITSP)
-  Action On 2006 HITSP Interoperability Specifications
-  Focus on Laboratory Results Specifications
-  2007 American Health Information Community Use Cases
-  Questions / Discussion

AHIC

The American Health Information Community (the Community), is a committee established under the Federal Advisory Committee Act (Pub. L. No. 92-463, 5 U.S.C., App.), by the Secretary of the Department of Health and Human Services. The Community will advise the Secretary and recommend specific actions to achieve a common interoperability framework for health information technology (IT) and serve as a forum for participation from a broad range of stakeholders to provide input on achieving interoperability of health IT. The Community is made up of 17 voting members, including the Chair, and members have been appointed by the Secretary.

ONC

The Office of the National Coordinator for Health Information Technology was established by Executive Order #13335 on 7 April, 2004. The EO states that “The National Coordinator shall, to the extent permitted by law, develop, maintain, and direct the implementation of a strategic plan to guide the nationwide implementation of interoperable health information technology in both the public and private health care sectors that will reduce medical errors, improve quality, and produce greater value for health care expenditures.”

HITSP

The Healthcare Information Technology Standards Panel serves as a cooperative partnership between the public and private sectors for the purpose of achieving a widely accepted and useful set of standards specifically to enable and support widespread interoperability among healthcare software applications, as they interact in a local, regional and national health information network for the United States. Comprised of a wide range of stakeholders, the Panel assists in the development of the U.S. Nationwide Health Information Network (NHIN) by addressing issues such as privacy and security within a shared public-private healthcare information system.

CCHIT

The Certification Commission for Health IT is a voluntary, private-sector organization created by the American Health Information Management Association, the Healthcare Information and Management Systems Society and The National Alliance for Health Information Technology in 2004 to certify HIT products. In September 2005, HHS awarded CCHIT a three-year contract to develop and evaluate certification criteria and create an inspection process for HIT in three areas:

- Ambulatory EHRs for the office-based physician or provider
- Inpatient EHRs for hospitals and health systems
- The Network components through which they interoperate and share information

Simplified, Generalized Process Overview For Federal Interoperability Standards



AHIC

Stated Priorities, Requirements, and Use Cases

“Acceptance” Of Interoperability Standards

“Recognition” Of Interoperability Standards (EO Trigger)

ONC

Finalized Federal Use Cases

HITSP

Analysis And Selection Of Standards

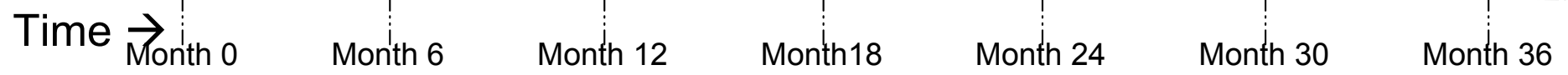
Interoperability Specifications With Standards

Testing And Refinement Of Standards

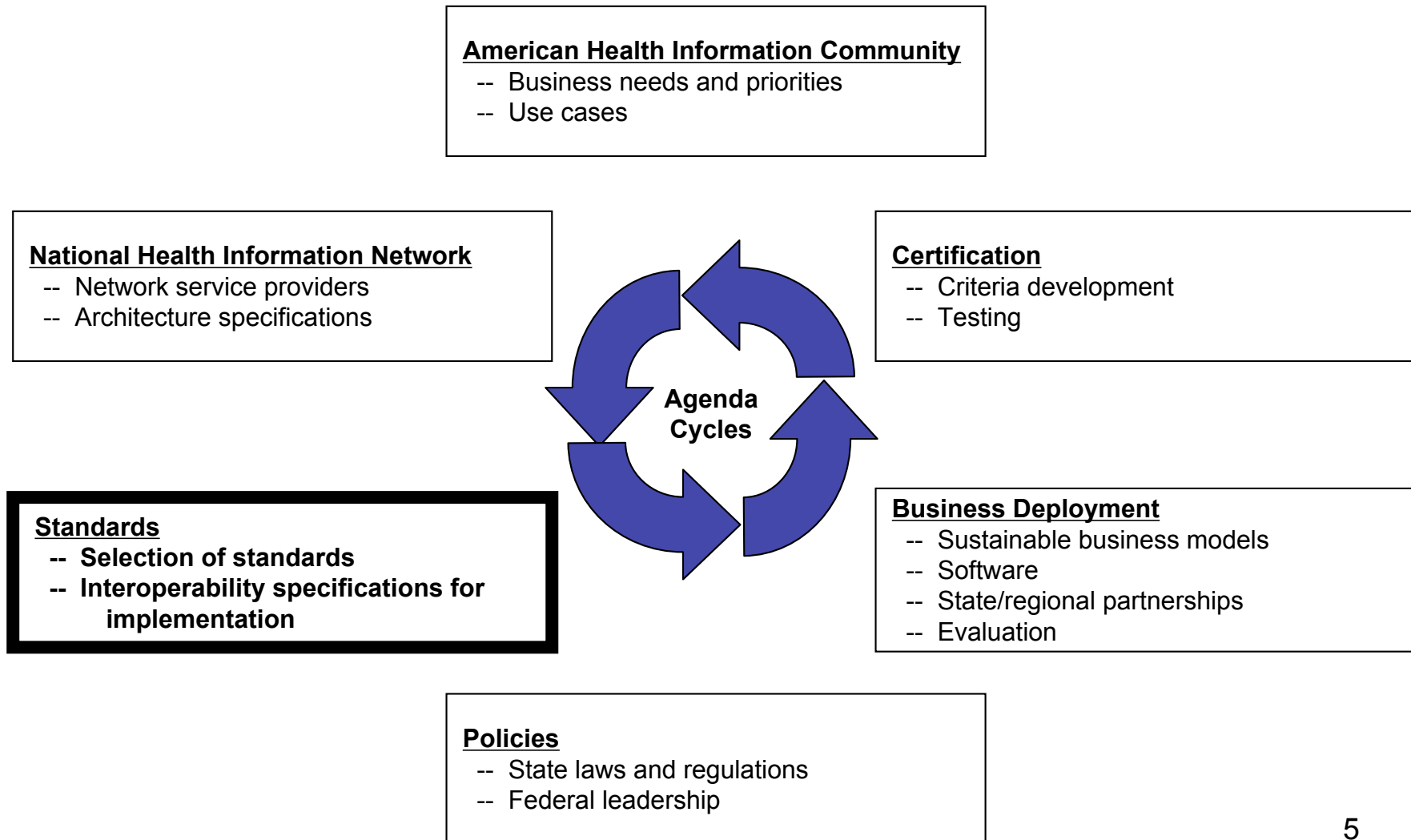
CCHIT

Non-Standards-Based Certification

Standards-Based Certification



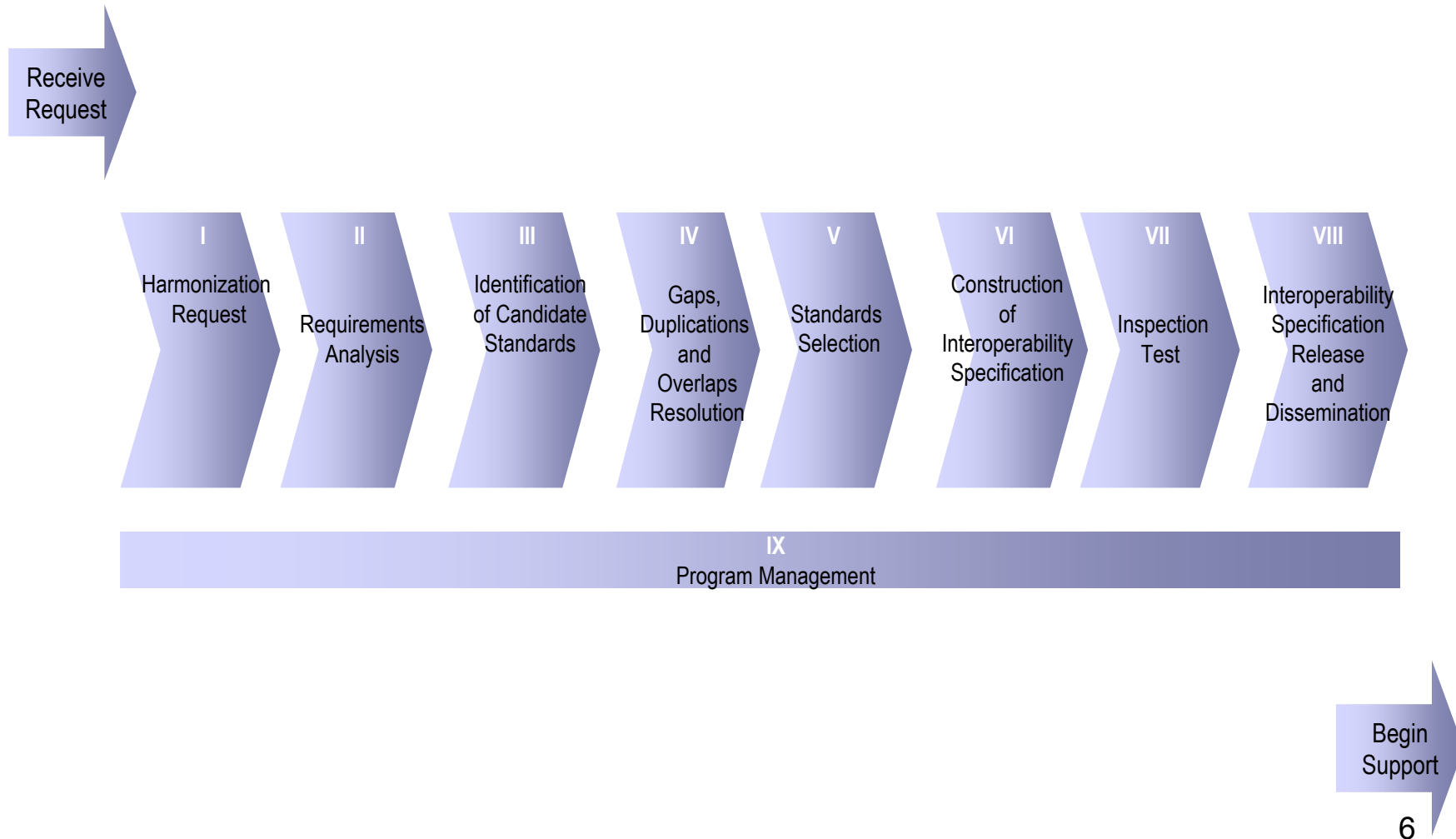
The federal government has created several Health IT activities it is driving in parallel.



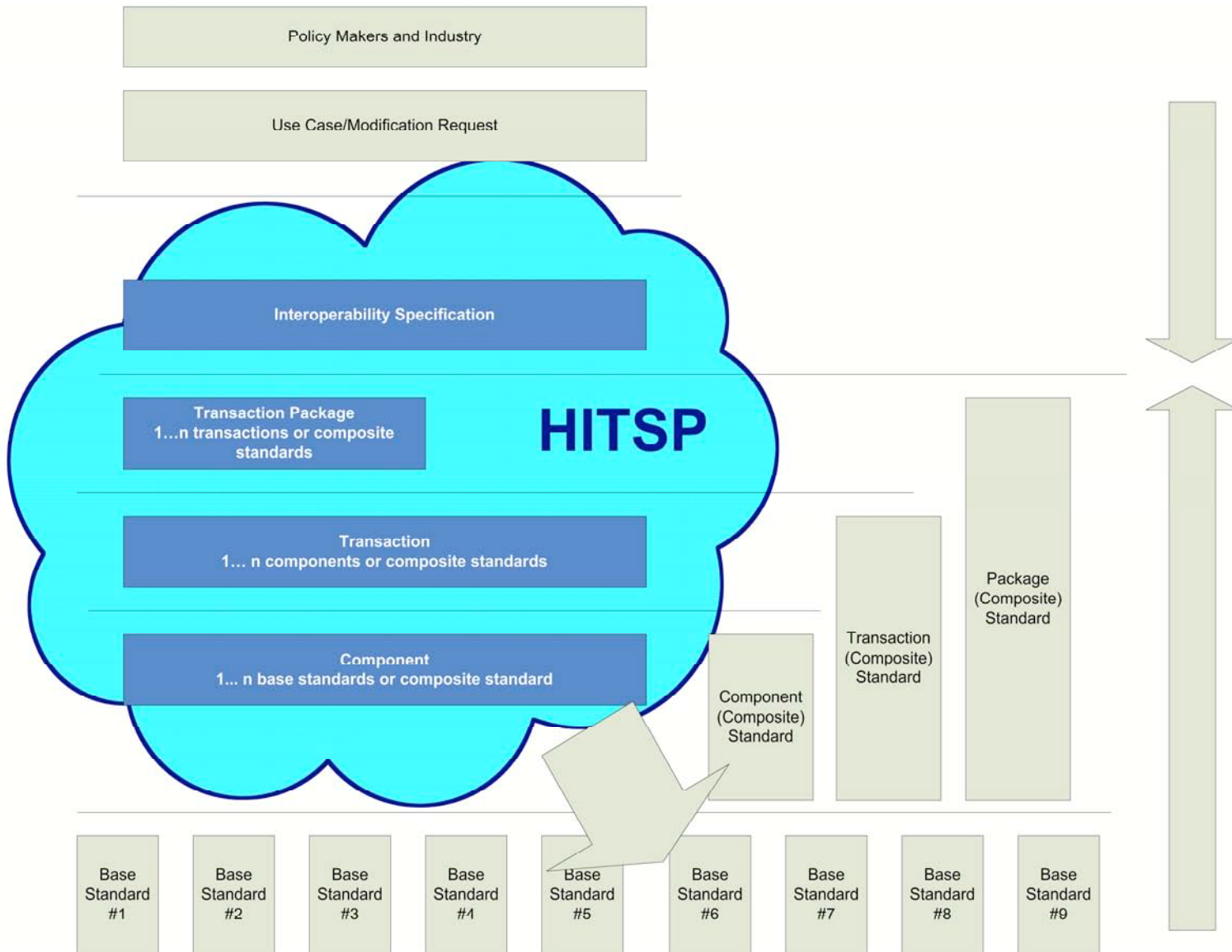
Standards Harmonization Process Steps



The standards harmonization process is a series of steps taken by industry stakeholders within the context of HITSP



HITSP Framework Of Documents For Interoperability Specifications



2006 American Health Information Community Use Cases:

- Biosurveillance
- Consumer Empowerment
- Electronic Health Records – Laboratory Results

2007 American Health Information Community Use Cases:

- Consumer Access To Clinical Information
- Emergency Responder – EHR
- Medication Management
- Quality

- Standards selected by HITSP in 2006 and “Accepted” by Secretary of HHS
 - Format and transmission of non-HIPAA registration & medication data
 - New specifications for all electronic lab results used in clinical care
 - Electronic same-day public health reporting of ED visits and labs

- Standards for 2006 use cases are being phased-in to EHR certification criteria starting in 2008

- Final implementation guidance published and expected to be “Recognized” by Secretary of HHS in 12/2007

- “Recognition” triggers legal mandates under Presidential Executive Order #13410 of 2006
 - Mandatory implementation of standard specifications by federal agencies with any new system or upgrade
 - Mandatory implementation of interoperability specifications with any new system or upgrade in all 2008 federal contracts including Medicare, VA, DoD, FEHB plans

Focus On Clinical Lab Results Specifications For System Implementations Starting In 2008+



- Lab messaging standard (HL7 v.2.5.1) **may** be used to send initial lab results to the ordering clinician and other authorized recipients
-- or --
- XML clinical document standard (HL7 CDA r.2) **may** alternatively be used to send initial lab results to ordering clinician and other recipients
- XML clinical document standard (HL7 CDA r.2) **must** be used to retrieve historical lab results from data repositories, e.g. EHR system or HIE system databases or repositories
- LOINC coding **must** be used to identify top 95% of routine clinical lab tests reported in HEDIS, and for microbiology and cytology tests
- ISO Object IDs (OIDs) **must** be used to identify ID-assigning authorities
- Expected to be phased-in to EHR certification criteria over about 3 years:
 - SNOMED-CT Problem List coding for chief complaint
 - UCUM coding for units of measure
 - RxNorm coding for drug-related tests

2007 Emergency Responder - EHR Use Case



- New use case released January, 2007
- Related AHIC work group priorities and issues:
 - Emergency care record exchange
 - Provider authentication, authorization, and credentialing
- Enabling technology: Patient identity reconciliation
- Information content: Demographics, Allergies, Medication History, Problem List, Treatment History, Present Episode, Patient Location, Triage Category and Advance Directive Status
- Additional features:
 - Records for On-site, ED, Inpatient and Outpatient care settings
 - EHR data sharing for Patient Treatment
 - Situational awareness reporting to Emergency Operations
- Status: Draft interoperability specifications with selection of standards currently out for public comment, to be finalized in 2007

- New use case – released June, 2007
- Related AHIC work group priorities and issues:
 - Medication reconciliation
 - Pharmacy/Allergy
 - Monitoring of medications
 - Ordering, transmission, dispensing, administering
 - Clinical decision support
- Enabling technology: Patient lookup and matching
- Status: Analysis of the use case by HITSP Technical Committee is about halfway done as of this week. Draft interoperability specifications with selection of standards to be published in 2007.

2007 Consumer Access To Clinical Information Use Case



- New use case – released June, 2007

- Related AHIC work group priorities and issues:
 - Lab results needed by the patient
 - List of conditions and allergies
 - Health problems
 - Diagnosis codes

- Enabling technologies:
 - Consumer – provider link
 - Consumer access control registry
 - PHR portability methods
 - Access auditing

- Status: Draft interoperability specifications with selection of standards to be published for comment in August, 2007

- Extension to Biosurveillance use case (now “Population Health”) – released June, 2007
- Related AHIC work group priorities and issues:
 - Inpatient quality measures (core set)
 - Ambulatory quality measures (core set)
 - Clinicians access (self-assessment)
 - Public reporting
- Enabling technologies:
 - Data sharing rights and responsibilities
 - Storage and management of data sets
 - Augmenting clinical data
- Status: Draft interoperability specifications with selection of standards to be published for comment in August, 2007