



Overview of Technical and Data Standards for Health IT and HIE

Presented by:

John D. Halamka MD, MS – Chair - HITSP, CIO of Harvard Medical School and Beth Israel Deaconess

Funded by the Agency for Healthcare
Research and Quality



Overview

- Welcome
- Before We Begin
- Introductions
- *Standards Harmonization in the U.S.*
Presented by John D. Halamka, MD, MS
- Question and Answer
- Closing Remarks



Before we begin...

- The Webinar will be recorded and the link to the recorded session, along with a copy of the presentation slides, will be distributed via email by Wednesday, April 9th.
- Please note all participants will be placed on mute once the presentation begins.
- If you wish to be un-muted, choose the “raise hand” option to notify the host.
- If you have a question during the presentation, please send your question to *all participants* through the chat. At the end of the presentation, there will be a question and answer period.

■ Listserv Registration

- Please register for the listserv to receive announcements about program updates
- To register go to <http://healthit.ahrq.gov/Medicaid-SCHIP>
- Click on “Medicaid-SCHIP Fast Facts” on the left-hand side of the screen
- There are two ways to register for the listserv:
 - 1. Click the link “[Click here to subscribe to the listserv](#)” which will open a pre-filled email message, enter your name after the text in the body of the message and send.
 - 2. Send an E-mail message to: listserv@list.ahrq.gov.
On the subject line, type: **Subscribe**.
In the body of the message type: **sub Medicaid-SCHIP-HIT** and **your full name**. For example: sub Medicaid-SCHIP-HIT John Doe.
You will receive a message asking you to confirm your intent to sign up.

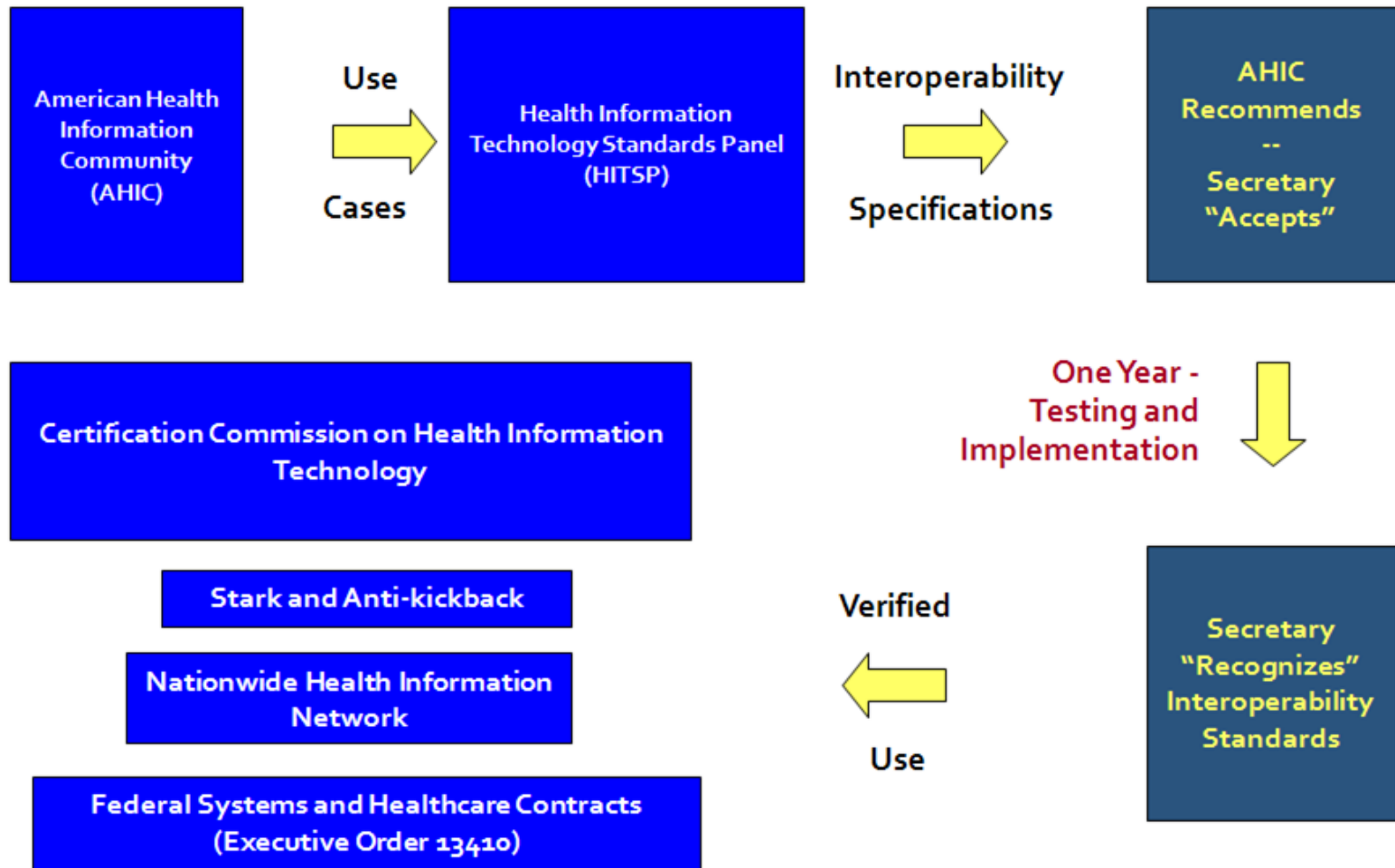


Comments and Recommendations for Future Sessions

- Please send your comments and recommendations for future sessions to the project's email address:

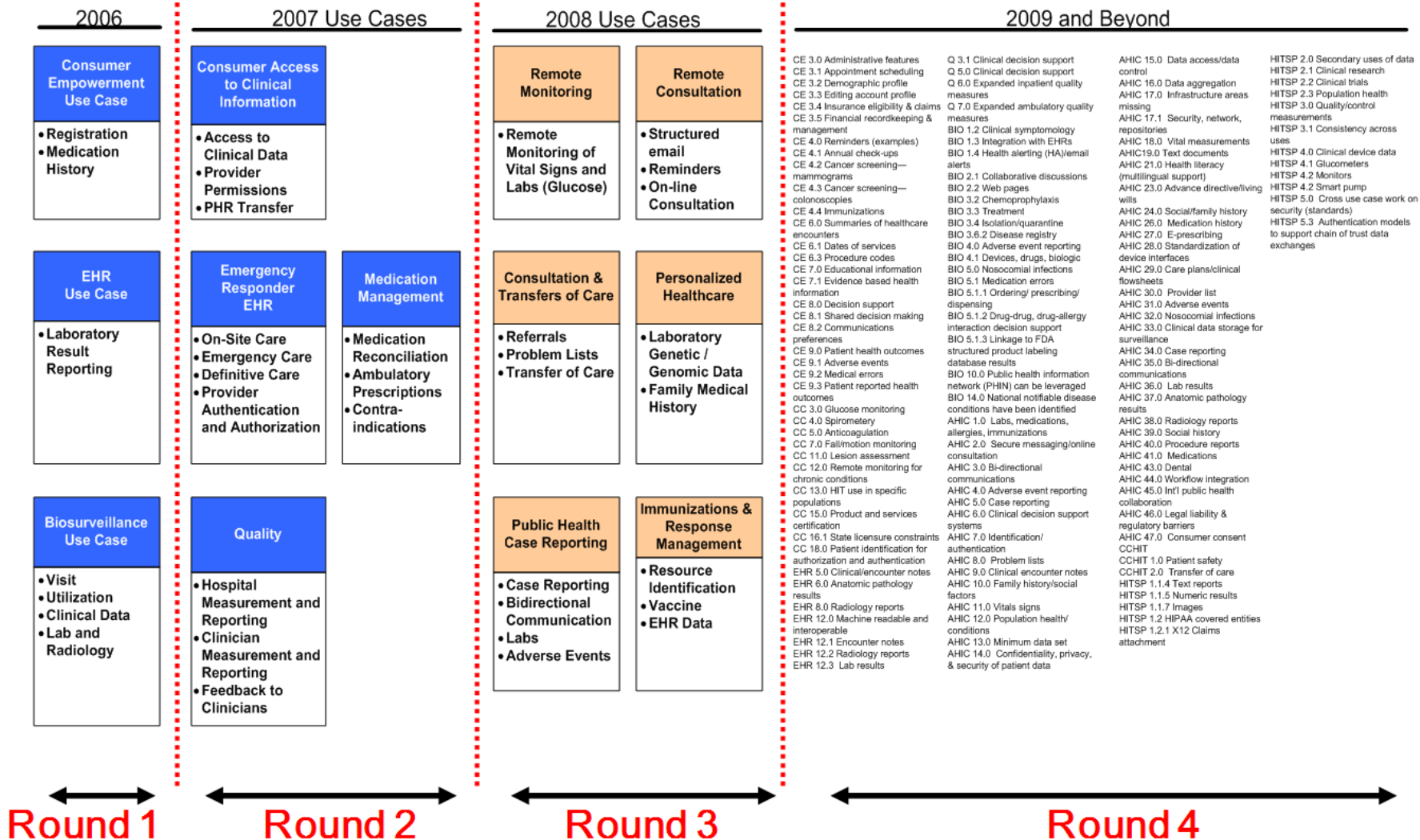
Medicaid-SCHIP-HIT@ahrq.hhs.gov

The National HIT Process



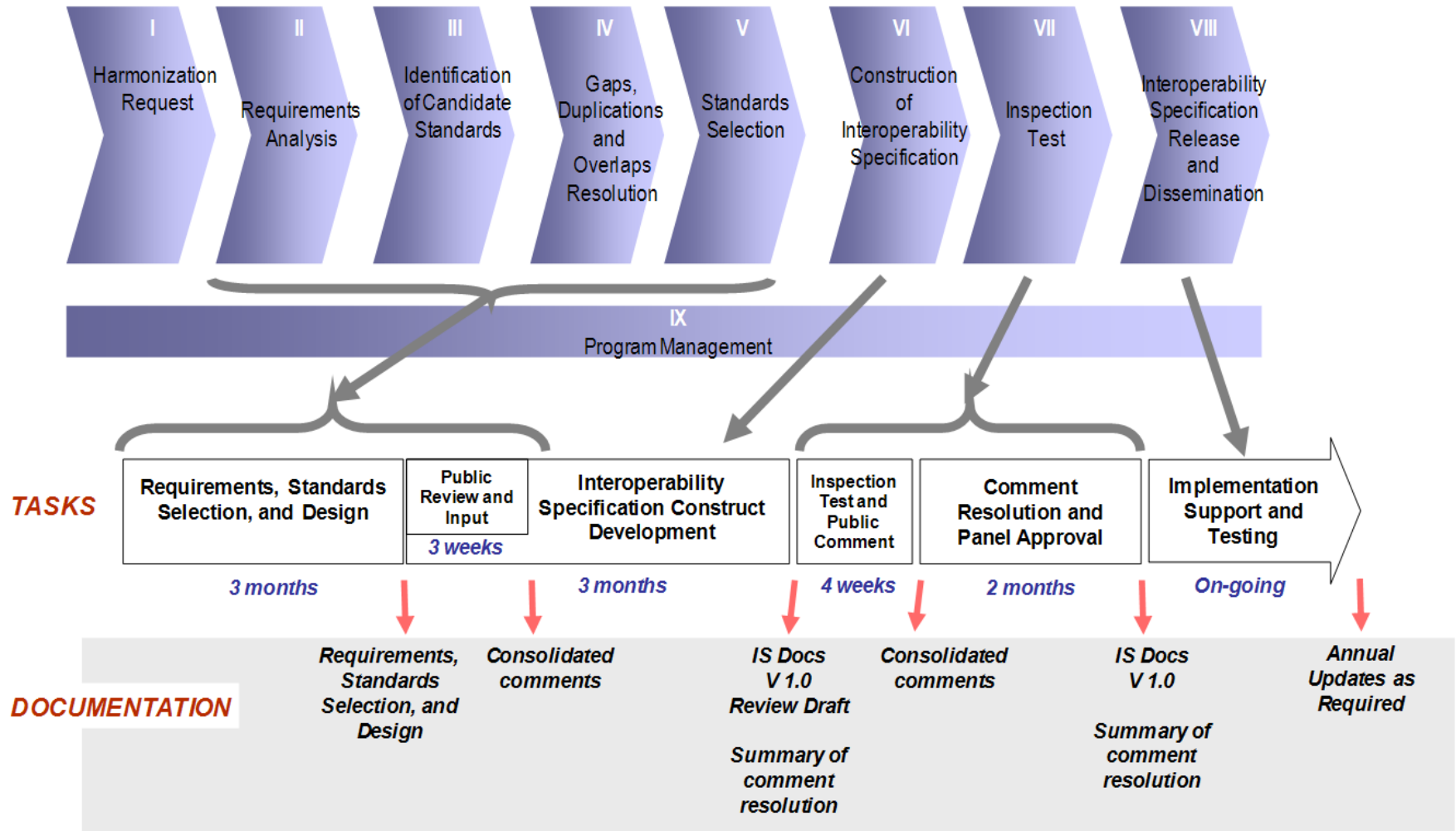
AHIC Use Case Development "Rounds"

AHIC Priorities and Use Case Roadmap

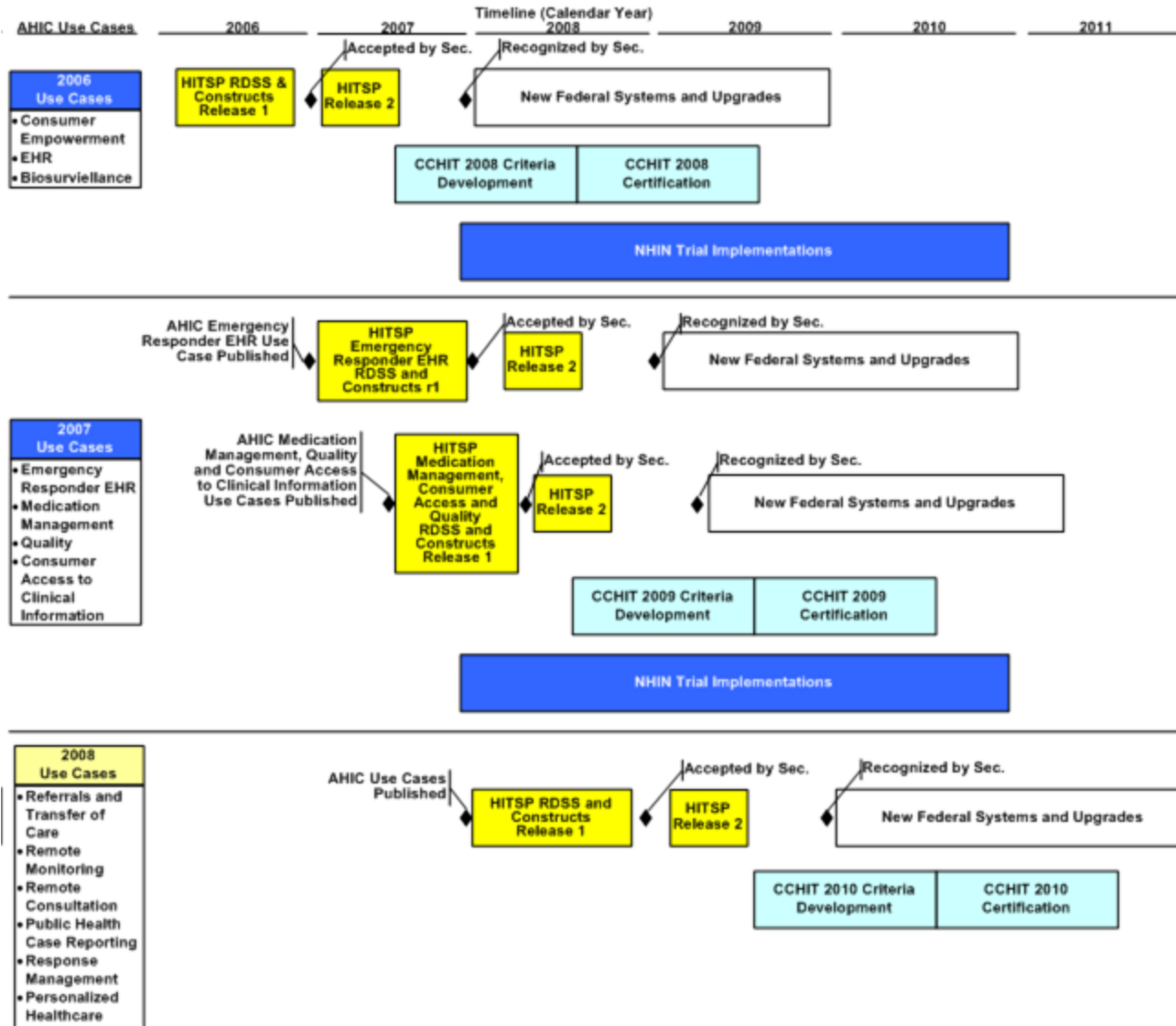


Standards Harmonization Work Plan Tasks

PROCESS



Overall Timeline



Technical Committee Use Cases Rounds 1 & 2

• ***EHR - Lab Reporting*** -- Deploy standardized, widely available, secure solutions for accessing laboratory results and interpretations in a patient-centric manner for clinical care by authorized parties.

- ***Emergency Responder - EHR*** -- Covers the use of the ER-EHR from the perspective of on-site care providers and emergency care clinicians. Definitive care clinicians involved in the care and treatment of emergency incident victims, medical examiner/fatality managers investigating cause of death, and public health practitioners using information contained in the ER-EHR, are included because of their interactions with the other portions of this use case.
- ***Medication Management*** – Focuses on patient medication and allergies information exchange, and the sharing of that information between consumers, clinicians (in multiple sites and settings of care), pharmacists, and organizations that provide health insurance and pharmacy benefits.

Technical Committee Use Cases Rounds 1 & 2

• **Consumer Empowerment** -- Deploy to targeted populations a pre-populated, consumer-directed and secure electronic registration summary. Deploy a widely available pre-populated medication history linked to the registration summary.

- **Consumer Access to Clinical Data** – Includes three scenarios which describe highlights of the processes, roles and information exchanges which could enable a consumer's access to clinical information via a personal health record (PHR). The three scenarios are: Consumers receive and access clinical information; Consumers create provider lists and establish provider access permissions; and Consumers transfer PHR information.
-

Technical Committee Use Cases Rounds 1 & 2

• **Biosurveillance** -- Transmit essential ambulatory care and emergency department visit, utilization, and lab result data from electronically enabled health care delivery and public health systems in standardized and anonymized format to authorized public health agencies with less than one day lag time.

- **Quality** -- Depicts two scenarios related to quality measurement, feedback and reporting with respect to a patient's encounter with the healthcare delivery system: quality measurement of 1) hospital-based care and 2) care provided by clinicians.
-

Technical Committee Use Cases Round 2

• Security, Privacy and Infrastructure

- **Identification of Core Set of Constructs** -- A core set of Privacy and Security constructs identified from all use cases; constructs reviewed and validated/modified upon receipt of new use cases
- **Incorporation of Constructs into Other Technical Committee Documents** – Privacy and security constructs are incorporated into the documents created by the other TCs to address interoperability in their respective use cases

Interoperability Standards

- Many “named standards” suggested
 - Round #1 – over 700
 - Round #2 – over 200
- HITSP harmonizes to minimum necessary “named standards”
 - Round #1: 30 targeted, 2 outstanding
 - Round #2: 20 initial with some overlap with round #1
- HITSP identifies “constructs” to specify “named standards” transactions and use as well as composite standards in implementation guidance
- Interoperability standards (named standards and constructs) are accepted, implementation tested, and then recognized



HITSP 2008 Plan

- March 2008 Publication
 - Medication Management v1.0
 - Versions 3.0 of IS01 and IS02 – Updates to reference security and privacy constructs
- 2008 Use Cases -- Round #3
 - Patient Provider Secure Messenger
 - Personalized Healthcare
 - Public Health Case Reporting
 - Immunization and Response Management
 - Remote Monitoring
 - Consultations and Transfers of Care

Use Cases Year 3

- ***Consultations and Transfers of Care*** -- The exchange of information between clinicians, particularly between requesting clinicians and consulting clinicians, to support consultations such as specialty services and second opinions.
- ***Immunizations and Response Management*** – The ability to communicate a subset of relevant information about needs for medication and prophylaxis resources, about resource availability, about their administration and about the status of treated and immunized populations.
- ***Personalized Healthcare*** - The exchange of genomic/genetic test information, family health history and the use of analytical tools in the electronic health record (EHR) to support clinical decision-making.

Use Cases Year 3

- ***Public Health Case Reporting*** - Leveraging electronic clinical information to address population health data requirements.
- ***Patient-Provider Secure Messaging*** -- Patients consult with their healthcare clinicians remotely using common computer technologies readily available in home and other settings.
- ***Remote Monitoring*** – Focuses on the exchange of physiological and other measurements from remote monitoring devices in three candidate workflows: Measurement and Communication, Monitoring and Coordination, and Clinical Management.



Additional Goals for 2008

- Education and Communication
- Implementation in vendor systems, home built systems and HIEs
- Participation in the NHIN trials
- Further Alignment with CCHIT
- Reorganizing our Technical Committees to ensure scalability
- Reuse of our components to accelerate our work



Summary

- HITSP has become a trusted convener to harmonize standards
- It will complete 3 rounds of harmonization during this administration
- The future use cases will come from AHIC 2.0 and we look forward to our next round of work



Project Information

Please send comments and recommendations to:
Medicaid-SCHIP-HIT@ahrq.hhs.gov

or Call Toll-free:

1-866-253-1627

Medicaid-SCHIP-HIT@ahrq.hhs.gov
<http://healthit.ahrq.gov>