HIT Standards Committee
Architecture Services & APIs Workgroup
Final Transcript
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Presentation

Operator
All lines bridged with the public.

Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology
Thank you, good afternoon everyone this is Michelle Consolazio with the Office of the National Coordinator. This is a meeting of the Health IT Standards Committee's Architecture, Services and APIs Workgroup. This is a public call and there will be time for public comment at the end of the call. As a reminder this meeting is being transcribed and recorded. I'll now take roll. I forgot one piece, so please state your name before speaking. I'll now take roll. Arien Malec?

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
This is Arien.

Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology
Hi, Arien. David McCallie?

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Here.

Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology
Hi, David. Al Bonnema? David Waltman? Gajen Sunthara? George Cole?

George Cole – Principal Scientist, Community Solutions – Allscripts
I'm here.

Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology
Hi, George. Janet Campbell?

Janet Campbell – Software Developer – EPIC Systems
Here.

Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology
Hi, Janet. Jeff Gunther?

Jeff Gunther – Vice President – Foundations at Premier, Inc.
Hi, this is Jeff.

Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology
Hi, Jeff. And Josh Mandel? Do we have Debbie Bucci from ONC on?

Debbie Bucci – Office of Standards & Interoperability – Office of the National Coordinator for Health Information Technology
Debbie is on the line.

Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology
Hi, Debbie. Okay with that I'll turn it back to you Arien and David.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
All right so I'm just going to give a little bit of an opener given yesterday Standards Committee's meeting so for those who paid attention and actually listened to the Standards Committee meeting, which I know that everybody stares in rapt attention at, there was an announcement in a blog post from ONC to the effect of going to more of a task oriented Workgroup structure instead of the long running area focused Workgroup structure that we've had and I think there was a little bit of a discussion between the Standards Committee and ONC about whether that's a good idea or a bad idea, but as it stands this Workgroup would be disbanded in June.

That being said, I believe in the work that we're doing I think it's been stated multiple times by folks at ONC to have been helpful with regard to the interoperability roadmap and with regard to the NPRM comments that we gave and so my stance is "great let's continue being helpful" and let's assume that if we actually are adding value and being helpful that in the great re-organization that is likely to take place that we'll find continuity both of some folks as well as some of the actions and work that we're doing.

So, I just want to pause there and see if there are any questions from members of the Workgroup. I think the big pieces are we've done some really, really strong work, that work has been appreciated and my bias would be let's continue doing strong work.

Janet Campbell – Software Developer – EPIC Systems
You still have a real job right?

Laughter

Janet Campbell – Software Developer – EPIC Systems
I'm kidding, I'm kidding I think you're right.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Arien, it's David, just a couple of comments, you know, one other interesting part of a backdrop is that as of June there will be 10 new members to the Standards Committee, I think it's 10 maybe it's 8 something like that, it's a pretty high turnover and, you know, I think the arguments float in both directions that, you know, that was a good reason to restructure things because there will be a lot of new people at the same time the argument that that's a terrible time to restructure things and you run the risk of losing all your institutional memory. The Workgroups could still be constructed similarly but the committee as a whole is going to change a lot. So, I think that's just something to be aware of.

The second concern I have is that I think that some of the things that we've introduced in particular the core composable notion has been well received by a small number of people who understand it, I say small that's maybe not…that's too pejorative, it's been well received by people that have understood it but I'm not sure how deeply it's penetrated into the overall set of assumptions that are driving ONC.

So, I agree with you that I think the work of this group is worth pushing for going forward. I'd hate to see it wither away simply because of a bureaucratic change in the way they structured the Workgroups but I'm not sure the best way to see that happen.

George Cole – Principal Scientist, Community Solutions – Allscripts
Yeah.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
I think we have to wait and see.

George Cole – Principal Scientist, Community Solutions – Allscripts
So, this is George, I listened carefully yesterday and I didn't, you know, I heard everything that's been discussed right to date but I did not hear any specifics around Task Forces or Task Groups, or Task Topics.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Yeah, that's exactly, George…

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Right.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
The issue is, you know, with regard to our work until we have clarity around what we're migrating to I think we should assume that if we're doing good and useful work that we'll be…this work will be migrated to a structure that fits the going forward model but…

George Cole – Principal Scientist, Community Solutions – Allscripts
I hope so.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Yeah, it's really hard to react in the absence of a more concrete version of what we're moving to.

George Cole – Principal Scientist, Community Solutions – Allscripts
Okay and so towards that end, it's still George again, very concretely and I don't know if anybody could give us advice about this or not, but I don't want to make assumptions necessarily that because we're participating in a Workgroup today…the question is, yes or no, do we need to actually go click on and fill in the FACA membership application form as listed in that blog post about stakeholders who might be interested in serving on the Task Force need to signal their interest?

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
I think it would generally be a good idea.

George Cole – Principal Scientist, Community Solutions – Allscripts
I think it would be too.

Janet Campbell – Software Developer – EPIC Systems
I think…

Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology
This is Michelle, can I speak up?

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Please, Michelle.

George Cole – Principal Scientist, Community Solutions – Allscripts
Please.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
I was going to ask you to explain.

Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology
There have been two Task Forces announced the Standards Advisory one and then a Precision Medicine one so those are two that we know are upcoming. And those…for external stakeholders that have not been involved in the FACAs they can go into the FACA database and apply to be a part of those Task Forces.

If you are already a member and you're interested in participating in one of those groups you could just send me an e-mail, you can also update your application if you like either way.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Yeah.

Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology
But George you asked specifically, it doesn't hurt to send me an e-mail directly you probably have my contact information and just let us know.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
And so Michelle, I guess the question is relative to some future Task Force…

Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology
Yes.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
That is yet to exist does George or anybody else need to re-go to the FACA database or would that kind of Workgroup participation process also apply to, you know, proposed punitive future Workgroup or Task Force?

Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology
So our intent is to pull from the current Workgroups for specific…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Okay.

Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology
Areas, but I will say there is a place in the FACA database where you can identify your areas of expertise and we can run reports off of that. So, it wouldn't necessarily hurt, you know, if George has let's say a semantics standards expertise that I didn't know about for example he might come up on a list and I might not have necessarily thought of him. So, again, it wouldn't hurt to update your application.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Okay, so what I'm generally hearing is it's not going to hurt to update your application (a), (b) to the extent that ONC announces additional Task Forces that are applicable legacy Workgroup members are always free to e-mail you and register their interest.

Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology
Yes.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Okay, perfect.

George Cole – Principal Scientist, Community Solutions – Allscripts
Very helpful.

Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology
And we won't be afraid to pull from current Workgroup members; hopefully they're still willing to participate.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
So, this is David, I'm going to run the risk of being more political than we're supposed to be, but, I mean this notion of a Standards Advisory Task Force really makes me scratch my head. How in heck is a Task Force supposed to weigh in on standards advisories and is the entire notion of a Standards Advisory a suspect idea because it's kind of based on the notion that the standard itself is what matters and I think, you know, our experience and our work on these orchestrations it's pretty clear that the standard itself, as they have them listed now, is woefully inadequate to make any kind of useful decision off of.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Yeah, so David, I think it's likely, I don't think the Task Force members have been, sorry I shouldn't say that, I don't believe the Task Force members have been announced yet. I did volunteer my name for the Task Force and to the extent that I was selected to be a Task Force member my focus would actually be to apply the framework that we created to the Standards Advisory and make some recommendations relative to both the kind of retrospective Standards Advisory and more of a prospective Standards Advisory.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Good.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
But also to follow-up on the role that I think the JASON Joint Task Force, which was also an adopted transmittal to the National Coordinator, made relative to the role of networks and data sharing arrangements.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Right and to the degree that you get accepted and asked to voice those opinions that works, but if you don't it doesn't work.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Yeah, I definitely…

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
So, you know, lobby for being on that group and some of us I hope will also seek that out. My other broader concern though is the whole idea of Task Force as opposed to Workgroups is to go solve specific problems, this giant catalog of standards spans everything in Health IT and it doesn't strike me as something a Task Force that's going to address specific problems would have much input in unless the Task Force is to just address the fundamentals of how do you maintain a list of standards maybe that's…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Yeah and…

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
The focus of the Task Force in which case it ought to be…

Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology
That question will probably be asked.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Yeah.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Yeah.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
And again, this just comes back to our debate yesterday on Task Forces are good for some things, but there are other things where it's useful to have a longer perspective and more institutional memory and I think that's a discussion that needs to keep happening…

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Yeah.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
With our friends at the ONC.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Yeah, I mean, so I can see a Task Force to address the provider directory question and they go and meet and make some recommendations and then their done. And I can see dozens of those as we address specific needs, but the whole Standards Advisory thing is just so flaky.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Yeah.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
I don't think it's going to…it doesn't work, but…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Well, my…

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
You're losing some of that insight, you know, that we can…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
My…

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
…trying this stuff.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
My proposal would be to keep moving here with respect to our agenda and as I said to the extent that we can key up some good work that will be useful for that future discussion or for any other future discussion for which there is a constituted Task Force that's probably a good outcome. Should we go onto the next slide? This is who we are. Next slide. Dat, dat, dat, dat, dat. Okay, this is basically a repeat of what we said yesterday.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
So, hang on, don't move past this one quite yet.

Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology
Yeah.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Yeah.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
My understanding, maybe Michelle it's about what you were just about to say, is there is a call set up for the 11th…

Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology
June 11th.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
June 11th where we have to formally read out on these is that correct Michelle?

Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology
Yes, thank you David.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
So, what do they need from us anything more than this or…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Yeah, I don't…I would think our transmittal actually tees up all of our recommendations in this area.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Yeah, I think what we think is clear but are we, you know, in the right format does it need to be…what do you think they need for that June 11th meeting is I guess the question for Michelle?

Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology
Yeah, I think we want to make it as simple as possible as, you know, these are the standards that are ready to be in the CEHRT rule, these might be ready and these aren't ready at all so it's very clear.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Yes. All right so…

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
So will…

Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology
And I know that's in the transmittal and that's where Debbie got this from but just…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Gotcha.

Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology
Making it as clear as possible.

Janet Campbell – Software Developer – EPIC Systems
This is…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
So, I think our summary is HL7 FHIR is not yet ready but on the cusp and highly encouraged per our previous recommendations, HPD is not ready, XDM package processing is ready as we narrowly specified relative to our transmittal, I'm not sure what to do with CCD and CAQH Core…

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
I don't…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
I don't know what to do with that one either.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Yeah, I don't think we finished that one frankly.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Yeah.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
I reported out on it yesterday but I was hedging because I wasn't really clear what we had actually decided.

George Cole – Principal Scientist, Community Solutions – Allscripts
This is…

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
And the more I thought about it the less clear I was is I guess what I'm saying. So maybe we need to drill into these a little bit or is that where you were headed Arien?

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Yeah. I think George wants to get a word in too.

George Cole – Principal Scientist, Community Solutions – Allscripts
Yeah, no, so this is George, so David I thought you hedged in the correct direction on CAQH yesterday pushing, you know, content and decision making to the matching process and not to the exporting process, it seemed like that was pretty clear from what you said yesterday.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Yeah, I just wasn't sure that was what our group's consensus was, I felt a little bit nervous representing what I think was personally the correct answer I just wasn't…if everybody else is comfortable with that then great. I just want to make sure we're all comfortable with that.

So, for those of you who weren't listening, which I hope was most of you, I know you had other important things to do, the…I don't have it sitting in front of me, but the notion that you should…I basically argued that we should take the CAQH algorithm as suggestions for the best way to implement a match, a guidance on a best way to implement a match but that…recognize that there may be more sophisticated algorithms that are already in use and that we wouldn't want to preclude the use of a more sophisticated algorithm that could for example analyze the parts of a name without depending on the CAQH formatting standard and understand things like junior and the third, and titles and apostrophe's, and multiple middle names, and that it would make…it would be wrong to throw knowledge about the name away simply to put it in the CAQH standard before you send it off to somebody for matching, which is I think not at all what ONC was suggesting in the NPRM, I think they were suggesting that you shouldn't send it except in a CAQH standard, which to me seems wrong. Am I stating that correctly Arien did you read it that way?

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Yeah, well, so the transmittal that we wrote actually does state that, it says that the CAQH processing rule should be limited to receivers not senders because we don't want information loss and number two, that we do recommend that suffix and, you know, that there be the ability to store suffix distinct from last name and represent suffix and last name or family name appropriately in transmittal standards.

George Cole – Principal Scientist, Community Solutions – Allscripts
Yeah, this is George, so towards that end, and maybe we have to revisit this because I notice we have another meeting before the meeting on the 11th, but the place in the NPRM where this is discussed is underneath transition of care and I'm thinking that maybe we want to make a recommendation not just that this be part of the receiving and the matching process but that it really shouldn't…it should not be in the NPRM, certainly not in the place where it's currently located.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
That's probably right.

George Cole – Principal Scientist, Community Solutions – Allscripts
It makes it sound like it's a requirement upon the sender.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Yeah or a…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
And there are not data…there are no patient matching receiver requirements except for the super high-level functional requirements that are in the API specification.

George Cole – Principal Scientist, Community Solutions – Allscripts
I believe that's true.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Right, so…

George Cole – Principal Scientist, Community Solutions – Allscripts
That's true.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
And that's the mistake that I want to avoid is endorsing the notion that you should preformat the data into that form…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Right.

George Cole – Principal Scientist, Community Solutions – Allscripts
Right.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Before you do a transitions of care that just doesn't work.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
So, I think our recommendation…yeah, so I think our recommendation then for CAQH is to drop this…endorse this as best practice but to drop it from the final rule except as a certification criterion that suffix is representable differently from family name and that when entered differently that suffix is populated appropriately if that makes any sense.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
So, what is currently the way that the patient identifying information is sent in the transitions of care? In other words, how do systems do the matching today and I'll plead ignorance? Are they basing it on the header of the CDA document?

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Yes, generally.

George Cole – Principal Scientist, Community Solutions – Allscripts
Generally.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
So, it wouldn't…

George Cole – Principal Scientist, Community Solutions – Allscripts
I could be it depends on how it comes in, but, yeah, generally.

Janet Campbell – Software Developer – EPIC Systems
Well not…okay.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Go ahead Janet.

Janet Campbell – Software Developer – EPIC Systems
I don't think necessarily that's the case though, right, I know at least for us we do it from the metadata. I mean if there is metadata I guess.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
If there is metadata right.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Yeah.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
So, I'm looking at the case where it's just coming in and there is no metadata.

Janet Campbell – Software Developer – EPIC Systems
Oh, I'm sorry I missed that part, gotcha.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Yeah.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Now and so is there a suggestion to change the way this data is being…do we read the current NPRM to be proposing to change the way the data is actually expressed in the metadata?

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Well, not that's just following the…that's just following the specification. I don't believe, I could be completely…I'll defer to George here, I don't believe the XD* metadata has a suffix, but…

George Cole – Principal Scientist, Community Solutions – Allscripts
It can, yeah, no it's okay, it can. It's an HL7 v3 main format so…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Oh, gotcha.

George Cole – Principal Scientist, Community Solutions – Allscripts
So in essence it should be the same thing.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
But I think this is with regard to the Consolidated CDA and so…

George Cole – Principal Scientist, Community Solutions – Allscripts
Yes.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
This just amounts to following the Consolidated CDA specification and putting a suffix in the right place.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Well what made them think this would improve things? The more I think about it the more confused I am, is how did this get here, what problem do they think they're solving?

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Yeah, so there was a recommendation…

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Because if they think there is a problem…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
There was a recommendation…

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
That's right, there was a recommendation that ONC better standardize identifying information and make sure that identifying information is sent and received correctly in order to improve patient matching.

I think the issue here is that, and this is something that I've been trying to express in the context of the Interoperability Workgroup of the Policy Committee; I think the issue here is that many of the data representation issues are actually downstream or rather upstream…

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Upstream, yes.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Of the Consolidated CDA creation. The only thing I think that you can standardize here is that you've got actually data representation that, you know, accommodates suffix different from last name and that you populate accordingly, but if your registration system…if you registrar screws it up in the registration system…

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Yeah.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
That's where the issues are, it's not the EHRs, and there isn't…none of these specifications actually relate to the ADTs and the other kinds of transmissions that are actually enough upstream that they impact the process.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
So, am I correct in saying that the CAQH specifications that are referenced don't really address the registration capture problem?
Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Correct.

George Cole – Principal Scientist, Community Solutions – Allscripts
Correct.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
So, in the CAQH use cases have they found value in forcing systems to convert from whatever they captured into this format?

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
So CAQH, my understanding of CAQH is that many of the payer systems are big iron MVS legacy systems and that they don't handle name matching in a sophisticated way. So, CAQH essentially standardized some pre-format data cleanup like strip punctuation, up-case and if the last two characters are JR assume that's Junior and pull it out.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
All right that's my assumption as well and we're basically saying we don't think that applies here or shouldn't apply here because the systems that are likely…the NPI systems that are likely to be in use in the EHR world are more flexible and more sophisticated or certainly can be more flexible and more sophisticated. Am I getting the story correct here?

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Yeah.

George Cole – Principal Scientist, Community Solutions – Allscripts
Can be and I think, so this is George, I think we want to be clear that we don't want those rules applied as transitions of care content are created.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Right, so I'm thinking that we're really saying drop this entirely.

Janet Campbell – Software Developer – EPIC Systems
I have a question, I'm not as familiar with CAQH so I apologize if this is obvious, this is Janet, but I understand that we wouldn't want to normalize data prior to sending if that normalization would be lossy. At the same time though I mean you do, to a certain extent, normalize data all over the place before sending, that's kind of, you know, that's what standards are.

I'm wondering are we going to…is there something that we can propose that's kind of in between the things that you guys are worried about but still allows for better quality data to come out of the EHR so that it could be matched coming into a different EHR.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Yeah, so…

Janet Campbell – Software Developer – EPIC Systems
Or am I missing something?

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
If you have something concrete there that would be helpful. In my experience in patient matching the biggest issues are duplicate registration, dealing with systems that actually have no formal registration process at all so back in the day one of the major reference labs as long as you showed up and you had an insurance card they would enter the minimum information necessary for the insurance card and they would populate literally the ID as…rather than leave it blank they would populate the ID with a "no data" string, which until you knew it caused all kinds of crazy things. But, that's all relative to either upstream data representation issues or registration work practices.

I don't believe that I've ever seen a problem with a Consolidated CDA having weird data in it. And to the extent that you want to clean it up you basically go back to follow the specification.

Janet Campbell – Software Developer – EPIC Systems
I see what you mean, okay.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Because…

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Well and Janet, I think your question is exactly what I'm trying to figure out as well so I think it's a great question, the issue here is this isn't the specification for how to capture the data, it's not intended to be that, it's not intended to be a specification for how to store the data, in other words it's not a data model mandate, it's a particular normalization strategy that was useful in the payer world and I think our claim here is that it's probably less useful in an NPI driven world…

Janet Campbell – Software Developer – EPIC Systems
But there is…

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Where our NPIs are just more flexible and they're able to deal with the O'postrophe, O apostrophe, O'Shaughnessy versus somebody who just concatenates the O on, I mean, they know that the rules are built in or…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Yeah, so, I mean, again the issue is…

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Foreign languages as well.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
That's right so the issue is…

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
If you do the lossy conversion then O'Shaughnessy or, you know, somebody who works for me, Dench, comes in as upper case O'Shaughnessy and you've got to figure out that you need to reinsert, you know, then their display is terrible…

Janet Campbell – Software Developer – EPIC Systems
Okay.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Because you're not actually representing that information correctly.

Janet Campbell – Software Developer – EPIC Systems
So, but that one in particular is on just the name normalization would we still support the suffix normalization? Because those are the few that they are saying that we should use CAQH for.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
And that's where I was writing in the transmittal that if we want to change it we should, but quickly, but the transmittal says you should store suffix separately, you should represent suffix separately from family name and you should populate according to the specification you should put suffix in the suffix field, you should put family name in the family name field.

So, maybe you're asking the question of, if somebody represented a junior, JR, as the last two characters of a family name should you in fact strip those out and populate a suffix field? And I would think that would be an intake data decision not an output data decision.

Janet Campbell – Software Developer – EPIC Systems
Yeah, no, in fact what I was wondering about was it looks like they, you know, very specifically put JR with no period and SR with no period and MD with no period. I'm wondering if that's the part of the specification…I don't know if that's also in the CDA specification like what actual values are appropriate there and how to spell them.

George Cole – Principal Scientist, Community Solutions – Allscripts
It's George, so that's not going to be in the CDA specification that's CAQH.

Janet Campbell – Software Developer – EPIC Systems
I mean that purpose seems reasonable.

George Cole – Principal Scientist, Community Solutions – Allscripts
Well, but, you know, I think this really goes way too far, because I mean, just if you're looking at that proposal where they're talking about last name and then about suffix, so, okay, fine I have a suffix, I'm a Jr., David is a Jr., but if you're not this requirement says, okay, well if you're not then the field should be marked as "no" and I just cringe every time I read requirements like that. I just…

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Well…and Janet I agree with you that if you're going to write an algorithm that's matching names you would be well advised to strip periods from between M and D, but that's a…

Janet Campbell – Software Developer – EPIC Systems
Sure.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Matching algorithm problem not a data…

George Cole – Principal Scientist, Community Solutions – Allscripts
Yeah.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Correct.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Problem.

Janet Campbell – Software Developer – EPIC Systems
That's a good point, that's a good point.

George Cole – Principal Scientist, Community Solutions – Allscripts
Right and, you know, I…

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
That's my concern.

George Cole – Principal Scientist, Community Solutions – Allscripts
I also think we need to keep the patient in mind and I just really don't want to see Consolidated CDA documents constructed where everything is up cased.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Yeah, right…

George Cole – Principal Scientist, Community Solutions – Allscripts
When I show this to people it's like really? Bring me back to Apple one.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
That's exactly right.

Janet Campbell – Software Developer – EPIC Systems
Okay, I think I'm actually convinced now; you guys got me, so I would agree that CAQH probably isn't appropriate for this for all of those reasons.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
So, I think we would…so, just to be…maybe the transmittal wasn't as definitely written as it is but the transmittal right now says…so I think what the transmittal should say is we recommend removing the CAQH language and, you know, it may be a best practice for matching algorithms but should not be implemented on send, which is it does say we shouldn't implement it on send but we actually recommend removing this language from the final rule entirely.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
And can we…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
What it does say…

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Can we capture that?

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Yeah.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Go ahead, go ahead.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
So, we need to say, we recommend removing the language from the final rule and I think all the rest is there.

Number two, is that what the transmittal letter does say that is relevant to a certification criterion is that there should be a certification criterion that says that you've represented suffix differently from last name and that to the extent that it's in there it should be populated according to the Consolidated CDA specification and that may be too much in the weeds to be a certification criterion…

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Yeah.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Or it could be useful.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
But I'm wondering just from a procedural point-of-view whether we can capture what you just said at the June 11th meeting when we review these standards and their readiness or do we need to actually go and modify the transmittal?

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Well, I think most of it is in the transmittal.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
I agree, I think we…I think we captured it…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
It's a…

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
It's not quite that explicit, but…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
It's a minor editorial edit to the transmittal. It's a translation from Arienese to what other people speak.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Well, I tried to do that and I got…if Janet will allow or not Janet…

Janet Campbell – Software Developer – EPIC Systems
I've got a…

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
If Michelle will allow it that this makes sense.

Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology
Yes.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Just to clarify, yeah, because I don't think there was any pushback on this from the group at all, I mean, it looks as if nobody I think even was paying that much of attention. So, all right, so that's CAQH. Do we need to say anything more about that CCD point?

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
I don't know what…

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Or…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Yeah, so I think what we recommended was that only the CCD be used in the data portability and I think that's appropriately in the transmittal letter and I don't think we're saying that it's the appropriate standard.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Right, this is a standards question; this isn't a standards readiness question…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
That's right.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
That was just a…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
We're saying…

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
A certification detail.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
To the extent that you use Consolidated CDA for data portability you should only use the…you should only be required to use the CCD which I think we captured I think very finely in the transmittal.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Yeah, I agree, I don't think there is any more change. And then for the…

George Cole – Principal Scientist, Community Solutions – Allscripts
For June 11th in standard…

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Go ahead.

George Cole – Principal Scientist, Community Solutions – Allscripts
Your June 11th agenda is it just about standards readiness or is it a chance to reiterate the really important points that this group wants to bring forward and make sure are in people's minds?

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Well, I think the original intent of the June 11th meeting was to make recommendations for things where there wasn't enough discussion beyond the…that didn't make yesterday's meeting cut relative to the NPRM.

George Cole – Principal Scientist, Community Solutions – Allscripts
Oh, okay, so…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Michelle do I have that right?

Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology
Yes, but I think there probably is an opportunity to highlight some key points again if that's what the group wants to do.

George Cole – Principal Scientist, Community Solutions – Allscripts
So, Arien, this is George, remind me if in our transmittal letter, I think we said this, but there was one or more…there were one or more places in the NPRM where we had a comment which was something like change this language, make a reference to the Consolidated CDA standard and don't introduce additional requirements here…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Yes.

George Cole – Principal Scientist, Community Solutions – Allscripts
I thought that was a really important point and maybe ought to be one that we might want to reiterate if we have a chance to bring forward things from our group that need to be said again.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
That's a good one, so some of the general principles are fix it in the specification don't fix it in the CEHRT rule.

George Cole – Principal Scientist, Community Solutions – Allscripts
Yes.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Use…so a really important one that came out of the Vocabulary Workgroup is don't set codes in the specification make a reference to a value set authority as a general principle. So, I do think it's worthwhile reiterating the don't write an implementation guide in certification criteria reference an existing…either fix the upstream issue and reference a good implementation guide or specification.

George Cole – Principal Scientist, Community Solutions – Allscripts
I'd like us, if we could, to also say, so when value sets were referenced or when vocabulary, when standard vocabularies were referenced in the NPRM it quite often said, you know, if named standard or appropriate updates and I would love for us to get some wording in so that the implementation guide references give that update capability also. So we can write it and say, reference implementation guide version "x" or its maintenance releases or some such language so that again we're not…things don't get completely locked by the rule.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Although I think that is an example of an upstream problem not a CEHRT problem because the CEHRT… at least in that area…

George Cole – Principal Scientist, Community Solutions – Allscripts
Yeah.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
At least in that area if you remove actually fixed codes from the CEHRT rule, the rule, then…and you hand it off to a value set authority you're issue then is your upstream implementation guides actually not making the same decisions.

George Cole – Principal Scientist, Community Solutions – Allscripts
There is that and there is a belief that when a particular version of an implementation guide is mentioned in a rule that it can never be updated. So, then what you end up with is changes happen but then there is no single source of truth.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Yes. Okay, so let's make sure we get that.

Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology
We just got a lot of feedback, sorry, I don't know who that was.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
There was a lot of typing.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Somebody is an aggressive typer.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
So, just with regard to standards readiness I think we're saying HL7 FHIR almost and we've endorsed a strong language in the final rule relative to implement the functional requirement for the API to the extent possible using HL7 FHIR.

HPD we said, no.

XDM package processing we said, this particular section.

CCD, I think we didn't comment on the standards readiness we just said with respect for data portability limit to the CCD.

And CAQH Core we're now formally recommending removing that language entirely.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Arien, it's David, it's reasonably likely that I won't be able to attend that June 11th meeting so I hope you can reiterate these points on our behalf.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Yes, but let me make sure.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Okay. I'm off at a conference and I can't guarantee when I'm free to sneak away.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Yeah, I'm there…

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Okay.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
And it's helpfully scheduled at a reasonable time for which, thank you Michelle. Okie-Doke, can we go to the next page?

So, we wanted…we thought it would be useful to tee up a discussion…sorry, I'm going to back up, so we think, and by "we" I mean David and myself, think that the framework that we proposed was very powerful and very helpful.

We believe that there is a well-defined or there is starting to be a well-defined pluggable App orchestration pattern and that there is appropriate emphasis and work on the pluggable App orchestration pattern but that there are other powerful orchestration patterns for which we don't have kind of well-defined orchestration pattern language that could then inform downstream either standards development or Argonaut-like efforts to create and maintain the standards and implementation guidance that go along with the orchestration pattern and that it would be a good use of our time to discuss that concept, see if there is broad agreement on this Workgroup and then potentially tee up some work items for us before we ride off into the sunset. So, I want to…

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
And Arien?

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Yes?

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
So, this is David, so you're basically saying there is kind of…there are really two or three questions here, one is…well there is the fundamental one of do we think this is an orchestration pattern concept is worth pushing forward, we should just reconfirm that we do, but that's the…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Yes.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
You didn't ask that question. Number two is, which patterns maybe should be called out for attention and then number three is how do those patterns get…how do they get converted into something that gets broad adoption right? I mean, maybe it's not our decision but we might have some notions about that or some…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Yes.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
I don't know…because I think we've seen things that work well and things that don't work well and I don't know that there is any guarantee that something that worked well in the past will work well again in the future but there is a reasonable chance that something that failed in the past will…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Probably won't work.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Fail in the future.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
That's right. So, yeah, just to separate the questions, question number one is, is there broad agreement that orchestration patterns are a useful concept (a) and (b) sub-question, b, is there broad agreement that better specifying what some of these useful orchestration patterns might look like is useful activity. And then to David's question, is there a process that we would propose and potentially a role for ONC in that process that we would propose that we might recommend.

Janet Campbell – Software Developer – EPIC Systems
So, this is Janet…

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
I'll…go ahead.

Janet Campbell – Software Developer – EPIC Systems
I guess the primary question that I have is I definitely agree that all of these things are helpful and useful, and should be done, my question is should we do them? Like why us?

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
I don't think we should do them.

Janet Campbell – Software Developer – EPIC Systems
But should we be defining them? Should we be the ones who are sketching out the orchestration patterns? What does this group…sort of what's our role in that?

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
So, here's the way I would articulate it. As the Architecture Services and API's Workgroup that's put together a framework for useful orchestration patterns I think we have a role to say, here are some general…here are some things that we think are general purpose orchestration patterns, here are some things that we think have the most leverage and here's the process we would propose for either validating that or, you know, gaining traction on that concept and I think the question that you're asking is relative to the process we would propose unless you're suggesting that we just don't have a role to play in terms of the first question.

Janet Campbell – Software Developer – EPIC Systems
I guess what I'm wondering is I know that there are certainly a lot of other groups out there that are focused on, you know, making sure that those patterns and those flows, I guess maybe flows is a better way of putting it…maybe I'm still thinking about it too much from a lower level, but is that kind of your feeling that there is nobody else out there doing this work right now?

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Yeah, I don't…I don't believe there is anybody doing this work right now.

Janet Campbell – Software Developer – EPIC Systems
Okay.

George Cole – Principal Scientist, Community Solutions – Allscripts
I…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Do you know of places where this work is being done?

George Cole – Principal Scientist, Community Solutions – Allscripts
Yeah, I'll give you one, you won't know about it yet, because it hasn't been announced for public comment but that pattern for decision support as a service will be coming out for comment, you're going to die when you hear this, it's coming from IHE, but it is all FHIR resource, FHIR operation-based and looks actually pretty interesting.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Cool, I mean, that…

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Well and…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
I think we just need to make sure…

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
It is…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Yeah, that's encouraging I just think we need to make sure that the right people are involved in that process.

George Cole – Principal Scientist, Community Solutions – Allscripts
We want to have everybody take and review and commenting absolutely.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Yes.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Well, so, I mean, this is David, my concern is that it's not that problem that people aren't doing this it's that maybe too many people are doing it and they are not…

Janet Campbell – Software Developer – EPIC Systems
So…

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
All going to be doing it well. So, you know, the HSPC thinks they are doing this. Ken Kawamoto just launched, as of this morning, an HL7 group that's doing this. I just now discovered that IHE is doing this and it's been noised about by Josh and myself actually in conversations with Josh that this might be something that the Argonaut II process could take on…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Yeah.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
As elaboration of the SMART pluggable App work simply to extend that to cover this use case, which is, you know, biased, to let you know my bias is that's the actual approach that I favor, but whatever, I think there's actually quite a bit of activity in this space and one of the things that this group might be able to do is to try to help either focus or coordinate, or refine, or I don't know, but we could end up with, you know, too many cooks in the kitchen and some of those cooks might not have the aggregate wisdom that I think this Workgroup does, which is really a pretty remarkable group, you know, to pat ourselves on the back, we represent a lot of knowledge and thought, and good judgement in this space that's part of my "what's worked in the past and what hasn't worked in the past." I'm not sure I trust some of those other groups to get this right.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
I actually go back to some work that I did in the Standards and Interoperability Task Force where Stan and I recommended that any work like this get done in close concert with implementation and production use and to the extent that there's a process that hasn't worked in the past and a process that has worked in the past I think that's the key bit of it much less about which organization is doing it or whether you trust that organization or not what makes I think Argonaut successful is that we got the implementers doing it, what has made other approaches less successful in the past is that they've been the standards developers who were important only…

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Right.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
And not the implementers.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Right. I mean, I've no problem…I agree with that totally Arien and I have no problem with, you know, let 100 flowers bloom and some process that winnows down to the ones that are the best…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
I…

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
But that's…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Yeah.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
You know that's where this Workgroup could in fact play a role. Now, you know, my opinion may have been changed after the announcement that this Workgroup no longer exists, but you could imagine a task challenge that says, you know, get clarity on the clinical decision support as a service because this is what we have recommended as a better approach than Health eDecisions and that Task Force could include some of us for example and we might go and look at what IHE is proposing and saying "hey they nailed it" or we might say " they missed it" you know let's ask for more work or let's shift in the direction of where HL7 is headed because they're closer to what we think makes sense. I see a role for us at that level independent of what we may be doing on our own with those very groups to flesh this out, you know, we always have to watch out for our own biases, but…

Janet Campbell – Software Developer – EPIC Systems
I think the only thing…it's just…I mean, this even EPIC's position it's my own libertarianism but if we're doing that, you know, I think we're all participating in at least one of those groups and probably more, as you said Arien we're the implementers, we're the ones that are making it successful, we could do that without paying Michelle and Debbie, and everybody to sit here and listen to us talk about it on the phone as well, that's just a suggestion, taxpayer suggestion.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Yes.
Janet Campbell – Software Developer – EPIC Systems
Not that we don't love you all and I'm sure you'll get other good stuff to do but…

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Yeah, I think what…and again this may be…maybe this has changed, but what we have done with this Workgroup so far is take advantage of the bully pulpit that we have been given to get attention paid to some approaches that frankly were just not getting attention even though the smart people understood that was the right way to do it, it wasn't getting attention in enough places.

Janet Campbell – Software Developer – EPIC Systems
Yeah…

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
So, I like…you know, I like being able to push things in a direction that meets the vendor community's interest, meets the broad HIT community's interest, is regulatorarily appropriate and not constraining, is…I mean, all these good things that we have an opportunity to do because of this bully pulpit I'd hate to give that up.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Yeah.

Janet Campbell – Software Developer – EPIC Systems
That makes sense and actually David I really liked your suggestion of making it more sort of a…not even necessarily a vetting process but maybe a steering of what's going on out there and seeing where certain efforts are maybe doing exactly the same thing and should be consolidating more that kind of thing.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
And by the way there is a negative pattern to let 1000 flowers bloom, there is let 1000 flowers bloom where there is implementation of all 1000 flowers is probably fine, let 1000 flowers bloom where there is competing standards development organizations without implementers involved is probably a bad thing because that actually tends to dilute implementation activities.

Janet Campbell – Software Developer – EPIC Systems
Yeah, I've never really gotten that, 1000 flowers don't bloom they compete for resources and then they die.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Yeah.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
That's called succession and it's a good thing.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
But, yeah, that's…yeah, as long as there is a gardener that can come and clean up the…I mean, look at that darn Standards Advisory list boy, you know, that's 1000 flowers some of whom are quite wilted and they didn't get pruned, you know, somebody's not attending the garden.

The other thing that, you know, just again, maybe I'm saying stuff I shouldn't be saying on this call, but in terms of implementation represented in this conversation right now are, you know, four incredibly important implementers, companies, our companies are four incredibly important implementers and if we can decide which way to push this to the degree that we can, you know, influence the big ships that we represent, which is not necessarily as much as I'd like, but, you know, if Cerner and EPIC, and Allscripts, and McKesson all say "we like this pattern."

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
And we're all going to do it.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
…we're all going to commit to doing it.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
We're all going to commit to doing it the same way.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Yeah, that's incredibly powerful. Now maybe we can't reach that consensus, but I feel like we have just a really good working relationship here and it's very encouraging to me to see the impact that we've already had with the small amount of work that we've done as a Workgroup relative time-wise, time commitment-wise. I think…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
So…

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
It's a pivotal point in the way people think about or ought to be thinking about standards and interfacing…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
So…

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
I've talked about it now to quite a few groups and I get really very positive reception when people get it. It really is eye opening to watch.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Here's what I'm hearing, I'm hearing (a) there is a really valuable role that we have that's basically the amplification of smart thought that a lot of people have put into it but hasn't necessarily been articulated and amplified, that's the bully pulpit approach, (b) there's a role that we can play relative to in effect governance looking at the five or six ways that people have proposed doing, clinical decision support as a service and saying "you know you probably want the implementers involved (a) and (b) it's probably not appropriate to do it four or five different ways, so, you know, we'd recommend blah and potentially recommend, you know, recommend ONC or somebody else to do x, y, and z." I think we've talked ourselves into those two things being useful.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
I mean, again, pending re-assessment as the next six to eight weeks unfolds we don't quite know how things are going to come out with this Task Force approach, maybe we rethink it all, but I like going into the thought that, you know, these are…these orchestrations address a number of the things that ONC has already telegraphed their interest in, I'd like to weigh in on them, I mean, you know, we didn't get the DAF, Federated DAF query pattern presented to us yesterday because we ran out of time, but that's being weighed as a pattern for use in the Precision Medicine Initiative and I'm going like "wait a minute" you know who's asking for this and what do you mean by a federated query for precision medicine, let's think this out, let's review this who is…you know I'm just not…we didn't get to hear the presentation, but I heard enough to say "there needs to be more thought on this."

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
I heard blah, blah, blah, blah, blah precision medicine so I think it's probably pretty good.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Well its federated query is the other thing that was…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
No, no, no…

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Unequivocally on their agenda…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
It's blah, blah, blah, blah…

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Federated by query, right?

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Blah, blah, blah, blah precision medicine so anything that looks like that is probably good.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Yeah, okay, you get my point. I'd like to be on the Task Force that figures out whether that approach has any validity and, you know, what would be missing from it or what we've learned the hard way you have to also worry about things like authorization and authentication, and things that, you know, tend to somehow get dropped when a narrow standards body focuses on it. You know HL7 tends to not think about those things for example. And the DAF group who knows what they're thinking about we didn't hear the presentation yesterday. I didn't realize they were still meeting.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
All right, going back to our agenda, I think we're saying that there is a role that we can play in terms of standing on the bully pulpit and calling for certain things to happen, I think there is a role that we can play relative to making recommendations for some of the how where some of the how is high-level principles like "gosh implementers ought to be involved" and "it's probably not a good idea if this work gets done two or three different times by parallel bodies." And some level of, you know, we think this is a rough priority order relative to some of these large scale orchestration patterns. Good, bad, yes, no?

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
I like that I'm taking notes. I would…I mean, you could imagine like we've done in the past with various Task Forces and Workgroups when there is a complicated set of decisions to make and there are competing alternatives is you can have a hearing, you know, a virtual hearing like we've done many times and get presentations, and people make a pitch and then you take that and sift through it and come back with, you know, suggestions or prioritizations, or recommendations depending on what the Task Force is targeted at and I keep picking clinical decision support as a service because I know that's been near and dear to ONC's heart and has a placeholder in the former Health eDecisions in the NPRM.

So, anyway I'm in favor of trying to take that on once we see how things evolve with those bullet points Arien that you just rattled off those are good.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Okay.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
I wish Josh was on the call today I know he's in transit from HL7 meetings he took some time off, it would be fun to hear…it would be important to hear a non-vendor perspective.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Correct.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Because we do represent a very powerful and important set of stakeholders but certainly not the only set.

Janet Campbell – Software Developer – EPIC Systems
Didn't we have Jeff or somebody on the phone?

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
We did, yeah, we do have Jeff.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Oh, Jeff, I forgot, I haven't heard a word out of you.

Jeff Gunther – Vice President – Foundations at Premier, Inc.
No, no, no, no, no it's fine, I think from a high-level that I'm still, you know, also very, very new to this group and still digesting everything you guys are discussing.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Okie-Doke, so we've got 24 minutes, we could decide to take something on for 24 minutes and discuss it or we could decide to talk about what our next meeting should be and give ourselves some time back.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
I favor the later, I think there's enough influx that we don't need to go try to drill into one of these things at the moment.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Yeah, we could also make some…by the way we could also make some recommendations to ONC about what's the best way to keep our work going…

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Yeah.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Relative to additional Task Forces. Michelle, remind us when our next meeting is?

Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology
I was just looking, Debbie if you know quicker, I'd have to look at them.

Lonnie Moore – Meetings Coordinator – Altarum Institute
It's June the 4th.

George Cole – Principal Scientist, Community Solutions – Allscripts
June the 4th.

Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology
Thank you.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
June the 4th all right.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
So, maybe the suggestion might be that we identify some…a couple of core patterns, focused orchestration that we feel are soon to be relevant based on what we know that ONC has telegraphed in the NPRM and what we've heard about what's coming in the future, and that we come up with a couple that we would suggest the Task Force be appointed to go flesh out.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Yes that works.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
And just, you know, it's a new Task Force but it's focused on a couple of core orchestrations that we think are important enough to get right early on even though they may not see the light of day in real world implementations for another year or two, because we've done a lot of not ready for prime time criticism so this is our…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
This is our chance to actually, you know…

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Yeah.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
That's right.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Here's what we think you should be doing and it may involve some hearings, it may involve some presentations from IHE and HL7, Stan and HSPC whoever wants to ante up and say "we've got a strategy for how to do this" we could be the post for getting those things public attention and discussion, and maybe even a recommendation.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
I…

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
I think this would be a valuable role to play.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
I think peer-to-peer and broker trust are going to get handled by Argonaut v2 if we decide to go forward with Argonaut v2, so I might recommend clinical decision support as a service and pub/sub as two focus areas for a going forward Task Force.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
I like that those are complex enough to not be trivially obvious.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Right.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
So…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Whereas I think…

Janet Campbell – Software Developer – EPIC Systems
I…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
I think peer-to-peer and broker trust are just basic elaborations of some of the work that Argonaut has already done.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Yeah.

Janet Campbell – Software Developer – EPIC Systems
For pub/sub are you thinking specifically of a kind of, I'm going to subscribe to events for this patient like the subscriber has a lot of voice over it or this also just sort of like event-driven so a…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
I'm thinking event-driven, you know, so an event-driven…basically taken the event-driven messaging architecture that's worked so well in general work and clinical applying it on FHIR and yes it would account for an event message as well as some subscription hook and there is probably some decisions that need to get made by somebody who is probably not this Workgroup or this proposed Task Force about what level of subscription you can do and who is responsible for some of the security decisions and data use decisions that always apply there.

But it would be more articulating that a pub/sub system might look like and saying it's important or it's not important and calling for some action to get done there, which hopefully would involve all of us deciding it's important enough to go figure out how to go implement and go do.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
So, Arien, I like that description but I would say let's keep it open at least initially, I mean, you know, the answer could be that, you know, an implementation of BPMN 2 is the right way to solve this problem, next question…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Sure, of course.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
I don't know, right, I'm just saying…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Yeah.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
That would be sort of the point of the discussion…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Right.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Is to figure out what do we mean.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
That's right.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
We know we have the general problem of propagating data to interested subscribers how's the best way to do that…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
So, here's what I think I heard, I think what I heard is that we're going to spend our next meeting proposing back to ONC a Task Force that will propose working on some longer term meaty orchestration work that we believe has high value relative to the interoperability roadmap and the long-term policy goals of the country and that we propose in that Workgroup discussion, you know, some of the charter of the…sorry the Task Force discussion some of the charter of the Task Force timeframe those kinds of things that I think ONC would want to have for its consideration.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Sounds good to David.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Cool. Other folks?

George Cole – Principal Scientist, Community Solutions – Allscripts
It's enticing, yeah; I think you've related it to ONC in a way that's very meaningful also.

Janet Campbell – Software Developer – EPIC Systems
I'm enticed.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Good.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Good and, you know, we can pull people, I say, we, I'm assuming that we…some of us we would be a part of this Task Force I guess that's somebody else's decision but assuming that the Task Force gets constructed it could pull in some people that have expertise that we aren't as strong in for example on the semantics and value set decisions and things like that. So, it can be a little bit broader than us and that would address some of the problems with the current Workgroup structure where you have, you know, too much horizontal isolation of skills.

Janet Campbell – Software Developer – EPIC Systems
I don't know if we put a semanticist or an ontologist on here we're never going to get anything done.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Well, we'll put them in as junior members they can only…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
How many ontologists does it take to screw in a lightbulb? Well when you have the appropriate ontology for…

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Yeah, right.

Janet Campbell – Software Developer – EPIC Systems
I'll…we still don't know yet.

George Cole – Principal Scientist, Community Solutions – Allscripts
And it's George so I think…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
The activity is relatively…sorry, go ahead.

George Cole – Principal Scientist, Community Solutions – Allscripts
I think we want to look also at where we might find expertise where, yes, we have a domain problem but pub/sub is not healthcare domain, right, so and actually if you think clinical decision support actually you could generalize, so there may be experts that are outside of our immediate view that we may want to try to leverage their knowledge.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Yeah and particularly if we need to have hearings for example or presentations, but hearing sounds so formal, but you know what I mean, a presentation that…where you invite experts to come and talk…

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Yes.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
To explain things.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
All right, I move that we conclude this discussion, go to public comment and David and I will do some work with ONC to put together an agenda for our next meeting where we hope to conclude with effectively a charter for the next Task Force.

George Cole – Principal Scientist, Community Solutions – Allscripts
I'll second that motion.

Janet Campbell – Software Developer – EPIC Systems
Sure.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Any objections? Hearing no objection Michelle?

Public Comment

Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology
Lonnie or Caitlin, can you please open the lines?

Lonnie Moore – Meetings Coordinator – Altarum Institute
If you are listening via your computer speakers you may dial 1-877-705-2976 and press *1 to be placed in the comment queue. If you are on the telephone and would like to make a public comment please press *1 at this time.

Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology
We have no public comment so thank you everyone for a lively discussion today.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
Cool, thanks, everybody.

George Cole – Principal Scientist, Community Solutions – Allscripts
Great, thank you.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Yeah, everybody have a good extra holiday day.

George Cole – Principal Scientist, Community Solutions – Allscripts
Yay, yeah.

David McCallie, Jr., MD – Senior Vice President, Medical Informatics – Cerner Corporation
Bye-bye.

Debbie Bucci – Office of Standards & Interoperability – Office of the National Coordinator for Health Information Technology
Thanks.

George Cole – Principal Scientist, Community Solutions – Allscripts
Bye.

Janet Campbell – Software Developer – EPIC Systems
…