

**HIT Policy Committee  
Information Exchange Workgroup  
Transcript  
January 31, 2014**

**Presentation**

**Operator**

All lines are bridged with the public.

**Michelle Consolazio – 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 Policy Committee's Information Exchange Workgroup. This call is a public call and there will be time for public comment at the end of the call. As a reminder, please state your name before speaking as this meeting is being transcribed and recorded. I'll now take role. Micky Tripathi?

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Here.

**Michelle Consolazio – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**

Hi Micky. Deven McGraw?

**Deven McGraw, JD, MPH, LL.M – Director – Center for Democracy & Technology**

Here.

**Michelle Consolazio – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**

Hi Deven. Peter DeVault?

**Peter DeVault, MS – Director of Interoperability – Epic Systems Corporation**

Here.

**Michelle Consolazio – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**

Hi Peter. Jeff Donnell? Jonah Frohlich?

**Jonah Frohlich, MPH – Managing Director, Manatt Health Solutions – Manatt, Phelps & Phillips, LLP**

Here.

**Michelle Consolazio – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**

Hi Jonah. Larry Garber? Dave Goetz? Thomas Greig? Gayle Harrell?

**Gayle B. Harrell, MA – Florida State Representative – Florida State Legislature**

Here.

**Michelle Consolazio – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**

Hi Gayle. Ted Kremer? Arien Malec? Cris Ross? Steven Stack?

**Steven J. Stack, MD – Chairman – American Medical Association**

Here.

**Michelle Consolazio – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**

Hi Steven. Chris Tashjian? Amy Zimmerman? Tim Cromwell? And are there any ONC staff members on the line?

**Kory Mertz – Challenge Grant Director – Office of the National Coordinator for Health Information Technology**

This is Kory Mertz.

**Kim Wilson – Health Communications Specialist – Center for Disease Control and Prevention**

Kim Wilson.

**Michelle Consolazio – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**

Hi Kory and Kim and I will turn it back to you Micky and Deven.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Great, thanks, Michelle, who came after Amy Zimmerman on the role, is there really someone after Zimmerman alphabetically?

**Michelle Consolazio – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**

There is a federal ex-officio member which is Tim Cromwell.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Oh, okay, poor Tim we have to start the alphabet again with him, yeah, okay, great. Well, thanks and welcome everyone to the Information Exchange Workgroup. Today what we wanted to discuss is a plan that I think we've talked about in the work plan to have what we're referring to as listening sessions on the transition of care and view, download, transmit capabilities and requirements that are part of Meaningful Use Stage 2, really with an eye toward taking a pulse of the market given that the hospital attestation began in October of last year and eligible professional attestation just began this year January 1<sup>st</sup> of this year.

And the idea is to really take a pulse of the market to see what issues there are, what people are confronting, what issues people are confronting as they think about this and as this gets deployed in the market recognizing that it's early but the idea is to, you know, have an early touch point to see what early issues may be, you know, something that we can identify and perhaps unearth and perhaps ambitiously even perhaps do some things that might help, but that would be, you know, sort of a stretch goal.

But, you know, communication, understanding what's going on in the market I think is, you know, first and foremost what we want to be able to do and the idea would be that these are a set of listening sessions that would look at both transitions of care and VDT from the provider side as well as from the vendor's side.

And we want to space this out over a couple of sessions because it's not – in effect it's a virtual hearing, well in effect it's a hearing, but it's not in person it's virtual and it's not at one time it's spread out over a couple of meetings, which is what makes them listening sessions and not a hearing.

So, but I think in terms of the structure they're very similar to what all of you are used to I think with respect to being able to get together experts from the market and then be able to have them speak, you know, sort of in a panel like format to begin with on the issues that they would like to speak about and then having an open discussion period.

So, that's what we want to talk about is the planning for that, get all of your – get your inputs on about the structure and format of that and about some preliminary questions that, you know, that Kory has been kind enough to draft and that we've had a chance to do a once over review, but really want to be able to get your input on that. But before we dive in let me ask Deven if she has any other introductory remarks or any other color to add?

**Deven McGraw, JD, MPH, LLM – Director – Center for Democracy & Technology**

No, I thought you had a great description of that Micky, thank you.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Great, okay, so if we can turn to – oh, I'm not looking at the thing. So, if we want to turn to – if we can turn to what I think is slide 2, you know, as I said the goal is to determine any gaps in vendor and provider readiness for the achievement of the transition of care and VDT requirements and then to have a series of listening sessions with providers and vendors to identify any readiness issues.

On slide three we've got the tentative schedule for this or maybe I shouldn't call it tentative because I know these things tend to get locked in. Are these now fixed dates Michelle and Kory?

**Kory Mertz – Challenge Grant Director – Office of the National Coordinator for Health Information Technology**

I mean, they're on everybody's schedules.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Okay, right and they're on your schedule on the master schedule?

**Kory Mertz – Challenge Grant Director – Office of the National Coordinator for Health Information Technology**

Yes, yes.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Okay.

**Deven McGraw, JD, MPH, LLM – Director – Center for Democracy & Technology**

All right that qualifies as fixed.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Right, yeah. So, the idea is that, you know, today is our planning meeting and then, you know, roughly 2 weeks from today we would have the provider listening session and then the vendor's listening session and, you know, the thought was to break it up providers in one session, vendors in another session and each of them talk about ToC and VDT, you know, we're certainly happy to think about if that is not the right way to do it, but that was sort of the thought that might be a more logical and intuitive way to approach the issues.

And then, so I have two of those and then in early March synthesize the findings from the listening sessions with an eye toward presenting whatever we find from that and the words of wisdom that we have from that synthesis to the Policy Committee in early March.

And obviously there will be some, you know, off line work in between the meetings, you know, we're just having this one planning meeting but then I think as all of you know there's always a lot of work in refining those questions, making sure that they're as clear as we can make them and are going to elicit the best possible output from, you know, from the people who are going to be asked to join.

And then also identifying who those people are and getting invites out to them to make sure that they can be available. So, on the next –

**Peter DeVault, MS – Director of Interoperability – Epic Systems Corporation**

Micky, sorry –

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Yes?

**Peter DeVault, MS – Director of Interoperability – Epic Systems Corporation**

Those are Eastern Time I assume?

**Deven McGraw, JD, MPH, LLM – Director – Center for Democracy & Technology**

Yeah.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Yes.

**Peter DeVault, MS – Director of Interoperability – Epic Systems Corporation**

Okay, thanks.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

And we did try to be sensitive to our West Coast colleagues in thinking about this.

**Jonah Frohlich, MPH – Managing Director, Manatt Health Solutions – Manatt, Phelps & Phillips, LLP**

Thank you.

**Deven McGraw, JD, MPH, LLM – Director – Center for Democracy & Technology**

Yeah, they're not too early.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Right, right, as much fun as it is to get Jonah and Arien out of bed at, you know, 5:00 in the morning.

**Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation**

Sadistic fun, but fun nonetheless I guess.

**Jonah Frohlich, MPH – Managing Director, Manatt Health Solutions – Manatt, Phelps & Phillips, LLP**

Right.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

So, let me just pause here because the next set of the slides kind of just go through the provider view and then the vendor view and let me just pause here and see if, you know, any of you have any thoughts on the overall structure and, you know, what it is we're trying to accomplish as high level goals and see if there is any discussion around that.

**Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation**

This is Arien and where would a DirectTrust fit? Would that be an appropriate organization to bring to a listening session and I guess they would be in the vendor section?

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Yeah, that's a good question. I guess I would have put them in the vendor section because they seem like a facilitator of technology. I mean, we can talk about whether it's technology or policy and there is some element of that.

**Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation**

Yes.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

But if you said that they're facilitating technical ways to federate authentication in a unified way that seems like it's got a lot of technology flavor and some policy flavor and it's a lot of vendors who are really spearheading the membership effort in that I think.

**Gayle B. Harrell, MA – Florida State Representative – Florida State Legislature**

This is Gayle; can you kind of just give me a little idea on what types of providers are you talking about?

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Sure, Gayle, before we do that let's just make sure that the DirectTrust piece is closed out. Does that make sense to – Arien to you and to others?

**Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation**

Yeah, I think that as long as we're thinking of them in the broad category of vendor. I think they'd be an appropriate organization to talk to.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Okay. So, to your question, Gayle, I mean, I think the idea is, you know, we can cast the net widely here, but I think we'd want to be able to get a cross section of, well, Meaningful Use eligible first off so eligible hospitals as well as eligible providers and trying to get, you know, sort of the size and, you know, urban/rural like with all of these, you know, you want to get the big/large, urban/rural, you know, some geographic distribution all within 5 or 10 slots on a panel. So, I think that will be, you know, sort of the ongoing challenge. Did you have specific thoughts on that?

**Gayle B. Harrell, MA – Florida State Representative – Florida State Legislature**

No, I just wanted to make sure that we heard from the rural people and also the smaller, you know, the smaller hospitals.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Yes.

**Gayle B. Harrell, MA – Florida State Representative – Florida State Legislature**

And make sure we cast that net widely enough.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Yes.

**Gayle B. Harrell, MA – Florida State Representative – Florida State Legislature**

Sometimes our small guys get forgotten.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Right.

**Jonah Frohlich, MPH – Managing Director, Manatt Health Solutions – Manatt, Phelps & Phillips, LLP**

This is Jonah, do we want to consider having something that can be a facilitator for the sessions so that if there are issues that have been identified as sort of critical to examine more deeply they potentially could draw those out?

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

I'm sorry I missed the first part, to have a specified facilitator for each of those is that –

**Jonah Frohlich, MPH – Managing Director, Manatt Health Solutions – Manatt, Phelps & Phillips, LLP**

Yes, because they aren't right?

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Yes.

**Jonah Frohlich, MPH – Managing Director, Manatt Health Solutions – Manatt, Phelps & Phillips, LLP**

I mean, that's not the way this has been put together I think.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Well, I think in the – I mean in the hearings that we've had and certainly in other hearings that – like I was just at the Accountable Care Workgroup hearing each panel did have a designated facilitator from the Workgroup itself who was sort of, you know, charged with keeping people on the agenda or on the timelines but also in trying to, you know, draw things out that would be important issues and to help spur the conversation. So, we can certainly do that here. I don't know, Deven was that your thought as well?

**Deven McGraw, JD, MPH, LLM – Director – Center for Democracy & Technology**

Yeah, absolutely.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Is that what you were thinking of Jonah or something?

**Jonah Frohlich, MPH – Managing Director, Manatt Health Solutions – Manatt, Phelps & Phillips, LLP**

Yeah, no that's right.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**  
Okay.

**Jonah Frohlich, MPH – Managing Director, Manatt Health Solutions – Manatt, Phelps & Phillips, LLP**

I just wasn't sure if that was being considered. I think the other thing is who the facilitator might be, not specific individuals but if we do have one session for – that's on the vendor's side and one on the provider side it may make it a little bit more dynamic if you actually had a provider facilitating the vendor discussion and vice versa.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Yeah, well we have a good spectrum of members on this Workgroup that covers, you know, all of those categories so I think that's a good thought. Peter DeVault or Arien are you going to rip into the providers?

**Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation**

Amen –

**Peter DeVault, MS – Director of Interoperability – Epic Systems Corporation**

Hardly.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Right your customers too right? So, okay, so, I mean if people are generally comfortable with, you know, sort of the overall structure of this maybe we can dive into the provider and the vendor sides of this.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Okay, so next slide, please, I'm on slide four providers. So, the idea would be to break this up into two panels one focused on the transition of care and the other on the VDT with, you know, just like you usually have to do, you know, something like 4 to 5 speakers per panel.

I think we've seen from experience over the last few years with the FACAs that it becomes really unwieldy if you try to jam more in there even though it feels good at the start you always end up short-changing everyone in that process. So I think this seems to be a model that works having 4 to 5 speakers per panel each speaker getting something like 5 minutes for a prepared response.

I think we had talked about like in past things that we would give them the opportunity to submit something written if they want, we wouldn't necessarily require it, but we would give them the opportunity to submit something written that we would have in advance. They would have up to 5 minutes to give an introductory thing, go through all of them with that formal introduction and then we would open it up for discussion with some facilitated questions probably to kick it off.

**Deven McGraw, JD, MPH, LLM – Director – Center for Democracy & Technology**

Yeah, Micky, this is Deven, that's exactly how we've conducted hearings or listening sessions that we've done in the Tiger Team in the past and what you find happens is that you get a good amount of information from the presentations and you really get more information from the Q&A because people ask, you know, provide much more specific answers in response to very specific questions from committee members and you just get an incredibly rich amount of information.

So, if we do in fact agree that we don't want to have too many speakers but lots more time to talk to them I think that is probably the best option.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**  
Right.

**Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation**

I completely agree and although 5 minutes – I've been in the position of having been a speaker on a panel, although 5 minutes seems incredibly short it might be worthwhile to make it even shorter and make people just hit the highlights because I agree with Deven that most of the value is in the follow-up.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Have we tried shorter Michelle and Kory?

**Michelle Consolazio – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**

Since I've been doing it we've always done 5 minutes, but I'm sure, I'm welcome to changing. We do three minutes for public comment during the committee meeting.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Right.

**Kory Mertz – Challenge Grant Director – Office of the National Coordinator for Health Information Technology**

We can always experiment.

**Gayle B. Harrell, MA – Florida State Representative – Florida State Legislature**

Yeah, I would like to offer too that we make sure we have written statements from everyone. In the past sometimes we have not gotten written statements.

**Michelle Consolazio – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**

Well, we try to be flexible because sometimes having people be able to provide their expertise they may not have the time to do a written summary. So, we can balance that –

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Right.

**Michelle Consolazio – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**

If the group decides that they have to provide a written response.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Well, maybe we can just give them a very strong reminder that they're only going to have 5 minutes, so, if they have more to say they should give it to us in a written form. And this is going to be virtual so they're not going to have Michelle staring at them at the 4 minutes and 50 second point.

**Michelle Consolazio – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**

You haven't been on the virtual ones I keep very close hold.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Okay.

**Michelle Consolazio – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**

It's easier to be mean over the phone.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

You're just as brutal and mercenary there, okay, I should have known you'd be just as tough over the phone as you are in person.

Okay, so on the next slide we've got, you know, sort of a, you know, first pass at a set of questions and I think, you know, rather than going down and reading each question, you know, maybe we can all just take a look at them.

I think in general they're kind of broken out into two broad categories which is one focused on acquisition of technology and adoption of technology, and then on – actually implementation of it. So, you know, acquisition first and foremost acquisition and set up, you know, are you getting your certified system, what issues have you had with that and then what are the issues you're facing in adoption and implementation as you're starting to do this and as you're starting to think about, you know, you're actually doing it for attestation purposes what are the issues you might be confronting there both within your own setting or as a market phenomenon, or market infrastructure phenomenon.

So, I guess, you know, there's a lot of different questions here and maybe we can think about, you know, is there anything that we're missing first and foremost –

**Peter DeVault, MS – Director of Interoperability – Epic Systems Corporation**

As I scan this, this is Peter, I don't see anything about training that it takes for users, I think that might be interesting how much training and what kind of training was necessary for users to be able to perform these functions.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

I think that's a great point.

**Deven McGraw, JD, MPH, LLM – Director – Center for Democracy & Technology**

Yeah, that's a very good point.

**Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation**

Well, my experience in the field of patient engagement is that patient adoption of a portal is heavily predicated on provider and practice workflow changes –

**Peter DeVault, MS – Director of Interoperability – Epic Systems Corporation**

Absolutely.

**Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation**

To expose the concept to patients and get them to sign on. So, I'd be interested, I guess for both of these, in whether there has been practice change of workflow in order to encourage use of both transition of care and view, download and transmit and in particular to the view, download and transmit functionality. And maybe that's provider best practices –

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Yes.

**Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation**

But, you know, it's a subset of that but I do think it might be worthwhile to ask the pointed question of, have you changed your workflow, your office workflow to encourage consumers to join and if so what workflow changes have led to greatest adoption.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Right.

**Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation**

Peter I assume you'd agree on the MyChart experience, I've heard folks from Epic Organizations say a lot of the same stuff that we've seen.

**Peter DeVault, MS – Director of Interoperability – Epic Systems Corporation**

Absolutely, the biggest predictor of patient use of the portal is that their clinicians are encouraging them to do that.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

And actually doing it.

**Peter DeVault, MS – Director of Interoperability – Epic Systems Corporation**

Yes.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

By sending messages to patients through the portal.

**Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation**

That's right.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Yeah. Okay, I think that's a good one. Is it worth explicitly calling out just, you know, what Gayle had touched on, you know, the issue of, you know, stratification and making sure we have appropriate representation. We could – we'll try to do that in the makeup of the panel but maybe it's worth asking the question, you know, are you aware of, you know, particular issues that small and/or rural providers have or something like that or that critical access hospitals have, they may – even though they're not one they may actually, you know, have a view on particular issues.

**Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation**

Yeah for the transition of care – so I think it would be worthwhile to make sure we get some because I think they have people who are small and rural are going to have the better perspective there. For the transition of care one I think it's really useful to ask what are the organizations you frequently refer to and do they have equivalent capability, you know, just – have you done the phone thing of just hooking up the phone lines basically.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Yes.

**Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation**

Something to get at that question.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Yes. Kory, you're getting all this right?

**Kory Mertz – Challenge Grant Director – Office of the National Coordinator for Health Information Technology**

Yes, oh, yeah I'm taking it all down.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Okay, I just want to make sure. Okay, other thoughts? Let me just ask a process question for Michelle and Kory, when – do we want to start identifying individuals right away as well or when do we do that in the process here? Like today? Do we want to start doing that or is that a –

**Michelle Consolazio – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**

If you have ideas of people the sooner we can start to invite them the better.

**Kory Mertz – Challenge Grant Director – Office of the National Coordinator for Health Information Technology**

Yeah.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Right.

**Kory Mertz – Challenge Grant Director – Office of the National Coordinator for Health Information Technology**

Yeah, I think we can, you know, getting the invites out first would be the – I think is the most important thing. If it takes a little longer on the questions that's okay, it would be ideal to have them at the same time, but I think we have a little more time on that than getting the people.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Right and is that – is that something that's typically done on a public call or is that just something that's taken as sort of a planning call for the, you know, obvious reasons that you're starting to toss around individual names and organizations.

**Michelle Consolazio – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**

Yeah, so you can definitely do that on a planning call as people have ideas they can certainly e-mail them to Kory and me and we can facilitate that as well, but we could also set up an administrative call which does not have to be public.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Right, okay, thanks. Deven, do you think that's the best way to do that?

**Deven McGraw, JD, MPH, LLM – Director – Center for Democracy & Technology**

I do. I know we have had hearing planning calls before where, you know, people just made suggestions on the phone, so, you know, I don't – it feels like it's something that ought to be done privately in some respects but, you know, since we're not calling out bad behavior by anybody but just suggesting that they might be good to participate in this it's arguably not pejorative for them to be discussed on a public call either. So, it usually comes down to, well we have some people on the call so let's see if we can make any progress sort of issue.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Right.

**Deven McGraw, JD, MPH, LLM – Director – Center for Democracy & Technology**

But it can also be completely taken care of as Michelle said, you know, from a FACA rules perspective it can be done off line if we think that there might be – that the discussions might devolve into, you know, sort of more confidential conversations or conversations that would be better made not on a public call then –

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Right, right.

**Deven McGraw, JD, MPH, LLM – Director – Center for Democracy & Technology**

Then we would do it that way. I think, you know, if people are just willing to engage by e-mail then it will still work.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Okay, I guess I would suggest we do that or we can make it fun, Peter maybe you could identify some McKesson customers who are having a hard time implementing this and Arien you could do –

**Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation**

That's helpful, thank you.

**Peter DeVault, MS – Director of Interoperability – Epic Systems Corporation**

I thought we were going to limit this to 4 or 5?

**Deven McGraw, JD, MPH, LLM – Director – Center for Democracy & Technology**

Oh.

**Peter DeVault, MS – Director of Interoperability – Epic Systems Corporation**

Sorry.

**Deven McGraw, JD, MPH, LLM – Director – Center for Democracy & Technology**

Ouch.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

See, I told it would be fun.

**Deven McGraw, JD, MPH, LLM – Director – Center for Democracy & Technology**

Okay, let's do it off line for sure.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Okay, are there any other thoughts on this? I know, you know, obviously, you know, we can also take other questions as people have had a chance to digest them as well, but if there isn't anything else that comes to mind on this one we can move to the vendor.

Okay, so why don't we – you know, the vendor, I'm on slide six, same structure, you know, and same sort of constraints that, you know, roughly 4 to 5 speakers per panel, two panels, one with ToC, one with VDT and then you can see on slide seven the list of questions that are broken out, you know, in a similar way certification itself as a process and then implementation, adoption and, you know, roll out to customers as sort of a second category.

**Kory Mertz – Challenge Grant Director – Office of the National Coordinator for Health Information Technology**

Yeah and the questions flow onto slide eight as well.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Oh, thanks.

**Kory Mertz – Challenge Grant Director – Office of the National Coordinator for Health Information Technology**

Yes.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Thanks, Kory.

**Kory Mertz – Challenge Grant Director – Office of the National Coordinator for Health Information Technology**

I couldn't fit them all on this one.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Right. So, it looks like we do have the training question on this one we just didn't have it on the provider one. I'm looking at slide eight. Do we want to – is there something to add related to, you know, sort of best practices from an implementation perspective?

What I'm getting at is, you know, having the vendors comment on the things that they've seen their provider customers do that would be, you know, that we could call best practices, I hate that term, but something like that.

**Steven J. Stack, MD – Chairman – American Medical Association**

Hey, Micky, this is Steve, I have a question?

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Yes?

**Steven J. Stack, MD – Chairman – American Medical Association**

So, for the VDT and ToC, I mean these are Stage 2 requirements correct?

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Yes.

**Steven J. Stack, MD – Chairman – American Medical Association**

I may know some of the answers to this I'm just making sure. So, and Stage 2 really just began this month right?

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Yeah.

**Steven J. Stack, MD – Chairman – American Medical Association**

So, doing these hearings at this point how prevalent do we think or how generalizable will the responses we get to many of these questions be since most of the health sector probably has not really devoted much attention to these at this point.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**  
Yeah.

**Deven McGraw, JD, MPH, LLM – Director – Center for Democracy & Technology**

Well, you know, Steve, this is Deven, we thought about that actually when we were doing the planning and my understanding is that the – is that ONC would like to get as early as possible an indication of what's going on in the field so that, you know, if there are actions that need to be taken in order to facilitate better adoption it's not too late to do that. So, rather than a post implementation experience we're really sort of – we deliberately are taking an early look.

And the other thing that argues in favor of going ahead with this is that while yes the time to implement Stage 2 was recently extended that was a fairly recent decision and a lot of people were assuming that, you know, that the original timelines were going to hold and so our assumption is that enough people got started with implementation and are continuing to try to implement this that we can get an early snapshot about what's going on.

**Steven J. Stack, MD – Chairman – American Medical Association**

Right, so Deven the only thing I would do is for follow-up for my first series of questions is, this is an instance where it would probably be very helpful to get good feedback where you might want to actually reach out to some of the biggest provider players, the Mayo's, the Geisinger's, the Cleveland Clinics or whatever and see if some of those who have more bandwidth have started, but also the major vendors and see if the major vendors have any clients that they're willing to suggest.

Because, I'm just thinking you want to get people who are going to be at the vanguard of the adoption. So, I don't know that the general kind of query approach would work to find folks who are going to be good examples to share very early examples. So, I'm not commenting on the merits of it just the approach to make it useful.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**  
Right.

**Deven McGraw, JD, MPH, LLM – Director – Center for Democracy & Technology**

Yes.

**Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation**

So, with regard to the questions for transition of care I think it will be interesting to ask do you run your own HISP or do you have a set of approved vendors that you're provider's contract with or is it really a provider choice. Have you been certified or accredited by any organization and if so, if you run your own HISP have you been certified or accredited by any organization and if so which one. If you have a stable of approved organizations the same question for those. And again, for the first two categories has your HISP or your approved HISPs demonstrated interoperability with other HISPs and if so which ones.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**  
Yes, that's great.

**Deven McGraw, JD, MPH, LLM – Director – Center for Democracy & Technology**

Yes.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**  
And Steve back to your –

**Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation**

Or just because Peter – or just because Peter was mean to me or do you only just connect with yourself. Sorry, Peter you asked for it.

**Peter DeVault, MS – Director of Interoperability – Epic Systems Corporation**

Yeah, I did. Micky instigated the whole thing though.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**  
Right, yeah, I can see I'm going to seat you guys at opposite ends of the table.

**Deven McGraw, JD, MPH, LLM – Director – Center for Democracy & Technology**

I witnessed it, or I didn't witness it my ears did.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

So, Steve, back to your question, I mean, I think you're right and that will be something that we'll have to carefully figure out who we're inviting and they either – and it may be on the provider's side we don't have enough in certain categories who actually have even started their attestation, right, like small providers for example. So, we may need to be thinking about who has thought about it enough to be thoughtful about some of the questions.

**Steven J. Stack, MD – Chairman – American Medical Association**

Yeah and I mean, I don't want bias, but I would say that it might be an efficient – more efficient use of ONC staff time to reach out to some of their contacts at major vendors and to distinguish between ambulatory and inpatient, but to reach out to some major vendors and say, do you have any vanguard clients that you think would be willing to come in and do this, because, I think you've got to get right to the point for who you're looking for.

**Deven McGraw, JD, MPH, LLM – Director – Center for Democracy & Technology**

Yes.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Yeah, I know, yeah, a lot of the big – at least the vanguard provider organizations in Massachusetts, I mean, you know, their thinking real hard about it and starting to put the pieces in place, but none of them have begun attestation.

**Steven J. Stack, MD – Chairman – American Medical Association**

Right and if you go to some of the – and I'm even hesitant to mention, some of the – any vendors by name because I don't even know – you know, I know the inpatient market because I'm an inpatient physician but I don't know the outpatient market as well. But if you go to some of them and ask they're certainly going to know if they have some clients who are at the early end of the curve.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Yes, yes.

**Kory Mertz – Challenge Grant Director – Office of the National Coordinator for Health Information Technology**

Yeah, I think we can use our regional extension centers as well.

**Steven J. Stack, MD – Chairman – American Medical Association**

Yeah, that's another good example, yes.

**Kory Mertz – Challenge Grant Director – Office of the National Coordinator for Health Information Technology**

Yeah, I think it's a very good point and we're going to need to do that.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Okay, are there any other – any other thoughts on the questions? We can obviously take more off line this isn't your last chance. So, in terms of process then I think we are probably going to want to organize a planning call to think about the potential participants and maybe Kory we can send out an e-mail to the Workgroup asking for, you know, thoughts on organizations and vendors, provider organizations and vendors who they might think of as well even though, you know, we'll have the vendor or the vendor/REC outreach as well to identify people.

**Kory Mertz – Challenge Grant Director – Office of the National Coordinator for Health Information Technology**

Yes we can definitely do that.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Okay and so just thinking about the timelines here for a second, I'm going back to – where are we, slide three, by when would we have to get the invites out in your experience?

**Deven McGraw, JD, MPH, LLM – Director – Center for Democracy & Technology**

Next week. I know you asked Kory, but, yeah.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Yeah.

**Deven McGraw, JD, MPH, LLM – Director – Center for Democracy & Technology**

I mean, this is the thing we really need the provider names pretty quickly.

**Kory Mertz – Challenge Grant Director – Office of the National Coordinator for Health Information Technology**

Yes.

**Deven McGraw, JD, MPH, LLM – Director – Center for Democracy & Technology**

Unless we reverse the panels, right?

**Kory Mertz – Challenge Grant Director – Office of the National Coordinator for Health Information Technology**

Yes.

**Deven McGraw, JD, MPH, LLM – Director – Center for Democracy & Technology**

Could we go with vendors first and then do providers, is there a reason why we put one ahead of the other?

**Kory Mertz – Challenge Grant Director – Office of the National Coordinator for Health Information Technology**

No.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

No.

**Kory Mertz – Challenge Grant Director – Office of the National Coordinator for Health Information Technology**

No reason at all.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

I think it makes sense to actually flip them.

**Deven McGraw, JD, MPH, LLM – Director – Center for Democracy & Technology**

Yeah.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

The vendors are easier, a lot easier to identify.

**Deven McGraw, JD, MPH, LLM – Director – Center for Democracy & Technology**

Yeah, I mean, we have a couple of them already on the phone.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Okay, I think that's great, so can we plan – can we work on just scheduling a short – a planning call maybe for, you know, early next week Kory and then in the meantime we can send out a note to all of the Workgroup members to start sort of a casting the net broadly for prospective vendors and/or providers?

**Kory Mertz – Challenge Grant Director – Office of the National Coordinator for Health Information Technology**

Yeah it sounds good and I'll include the updated questions based on what we discussed today as well.

**Deven McGraw, JD, MPH, LLM – Director – Center for Democracy & Technology**

Oh, that's great.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Okay and then I think so then, you know, by mid to late next week I think we're going to want to roll back out to the group, you know, sort of the final questions and the final candidates for the panels and then move ahead from there, right or do we just – how have we worked this in the past is that building in another loop that's unnecessary?

**Michelle Consolazio – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**

Often times we'll do things via e-mail, hopefully people are reading their e-mail, but it moves a little bit faster than trying to set up calls.

**Deven McGraw, JD, MPH, LLM – Director – Center for Democracy & Technology**

Yes, agree.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Yeah, yeah, yeah, no I didn't mean a call I meant having the Workgroup weigh in on the final panelists.

**Deven McGraw, JD, MPH, LLM – Director – Center for Democracy & Technology**

Yeah, we've typically done that by e-mail.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Right and have the Workgroup weigh in before we just send out the invites, okay.

**Gayle B. Harrell, MA – Florida State Representative – Florida State Legislature**

I think the more –

**Michelle Consolazio – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**

Micky did the –

**Gayle B. Harrell, MA – Florida State Representative – Florida State Legislature**

We can do by e-mail the better.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Yes. Sorry, Michelle?

**Michelle Consolazio – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**

Sorry, you mentioned the planning call, where you thinking of having the full Workgroup on that planning call or just a few members?

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

I was just thinking of a few members and it could even just be, you know, with ONC staff and Deven and me if – I mean anyone else is welcome to join, I think I was trying to save people from having another call and maybe we could have the e-mail process where people can just give us names and then we can sort of vet through those and present back an option or two to the – or, you know, sort of a list, a potential candidate list for the Workgroup to weigh in on.

**Michelle Consolazio – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**

Okay, perfect, thank you.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Okay, everyone okay with that process?

**Gayle B. Harrell, MA – Florida State Representative – Florida State Legislature**

Sounds good to me.

**Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation**

Yes.

**Deven McGraw, JD, MPH, LLM – Director – Center for Democracy & Technology**

Yes. It's going to be very interesting.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Yeah it is. Okay, great, well, I think we're done then unless anyone has any other general things they'd like to discuss I think we can turn to the public comment.

**Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation**

Micky I always appreciate your productivity on these calls.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Thank you.

**Deven McGraw, JD, MPH, LLM – Director – Center for Democracy & Technology**

Well, I feel like it's a big incentive for you all to – for everyone to dial in.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Enjoy, right.

**Deven McGraw, JD, MPH, LLM – Director – Center for Democracy & Technology**

– best not to waste anybody's time.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Yes and it also owes a lot to the prep work that Kory and Deven helped with as well.

**Deven McGraw, JD, MPH, LLM – Director – Center for Democracy & Technology**

Well, we'd be nowhere without the staff that's for sure.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Okay, great, Michelle, I think we're ready for public comment.

## **Public Comment**

**Michelle Consolazio – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**

Okay, operator can you please open the lines?

**Ashley Griffin – Management Assistant – Altarum Institute**

If you are on the phone and would like to make a public comment please press \*1 at this time. 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. We have one public comment, David go ahead.

**David Tao – Technical Advisor - ICSA Labs**

Hi, this is David Tao, I'm representing ICSA Labs and I'm very interested in what this group is doing because of my involvement with the S&I Framework transition of care initiative. So, I think it's great that you're having a hearing.

Regarding the participation though if you're trying to find out what the leaders are doing and, you know, best practices that may come from those who are ahead of the curve, then inviting like the vanguard providers you mentioned or large vendors makes sense but if you're really trying to find out how things are going overall then I think I'd recommend that you make a special effort to include the "little guy" even though those organizations are less likely to have experience, maybe they have even no experience in ToC and VDT.

I would assert that the FACAs and the industry committees and Workgroups already have quite a bit of representation from large providers and vendors already and very little from smaller ones. So, you know, making sort of an affirmative action type of effort to include types of providers that see a large majority of patients that would be helpful and if it's hard to find a single small provider maybe someone from an industry association of small to medium providers could speak for a larger number of them. Thank you for the opportunity to comment.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Okay, thank you David.

**Deven McGraw, JD, MPH, LLM – Director – Center for Democracy & Technology**

Yeah, good points.

**Ashley Griffin – Management Assistant – Altarum Institute**

We have no further public comment.

**Micky Tripathi, PhD – President & Chief Executive Officer – Massachusetts eHealth Collaborative**

Okay, great, well thanks everyone and we will be in touch via e-mail.

**Gayle B. Harrell, MA – Florida State Representative – Florida State Legislature**

Thank you.

**Kory Mertz – Challenge Grant Director – Office of the National Coordinator for Health Information Technology**

Thanks Micky.

**Michelle Consolazio – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology**

Thank you everyone.