



**HIT Standards Committee
Standards & Interoperability Task Force
Final Transcript
March 13, 2015**

Presentation

Operator

All lines are now 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 Standard's Committee's S&I Task Force. This 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 will now take roll. Arien Malec?

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

Good morning.

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

Hi, Arien.

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

It is still morning.

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

Stan Huff?

Stanley M. Huff, MD, FACMI – Chief Medical Informatics Officer – Intermountain Healthcare

Here.

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

Where you are. Hi, Stan.

Stanley M. Huff, MD, FACMI – Chief Medical Informatics Officer – Intermountain Healthcare

Hi.

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

David Tao?

David Tao, MS, DSc – Technical Advisor – ICSA Labs

Here.

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

Hi, David. Holly Miller?

Holly Miller, MD, MBA, FHIMMS – Chief Medical Officer – MedAllies, Inc.

I'm here.

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

Hi, Holly. Jamie Ferguson?

Jamie Ferguson – Vice President, Health Information Technology Strategy & Planning, Fellow, Institute for Health Policy – Kaiser Permanente

Here.

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

Hi, Jamie. Josh Mandel? Joyce Sensmeier?

Joyce Sensmeier, MS, RN-BC, CPHIMS, FHIMSS, FAAN – Vice President, Informatics – Health Information Management Systems Society

I'm here.

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

Hi, Joyce.

Joyce Sensmeier, MS, RN-BC, CPHIMS, FHIMSS, FAAN – Vice President, Informatics – Health Information Management Systems Society

Hi.

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

Ken McCaslin?

Ken McCaslin – Director, Healthcare Standards – Quest Diagnostics

Ken McCaslin is here.

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

...I always say your name wrong. Mark Segal?

Mark Segal – Vice President, Government & Industry Affairs, GE Healthcare IT – GE Healthcare
Here.

Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology
Hi, Mark. And from ONC do we have Mera Choi?

Mera Choi – Acting Standards & Interoperability Coordinator, Office of Science & Technology – Office of the National Coordinator for Health Information Technology – Department of Health & Human Services
Here.

Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology
Hi, Mera. And Mazen Yacoub?

Mazen Yacoub, MBA – Healthcare Management Consultant
Here.

Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology
And Jonathan Coleman?

Jonathan Coleman, CISSP, CISM, CBRM, CRIS – Initiative Coordinator, Data Segmentation for Privacy Principal – Security Risk Solutions, Inc.
I'm here, thank you.

Michelle Consolazio, MPA – Federal Advisory Committee Program Lead – Office of the National Coordinator for Health Information Technology
Anyone else from ONC on the line? Okay I'll turn it back to Stan and Arien.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
All right, I think we're close to the end. Stan you want to take it away?

Stanley M. Huff, MD, FACMI – Chief Medical Informatics Officer – Intermountain Healthcare
No, I'm happy to have you steer.

Arien Malec – Vice President Strategy & Product Marketing – RelayHealth Corporation
All right, okay, I thought we had a rule of last one loses, but I think we're close to the end as you can see this is our last meeting. We've got a revised transmittal letter that represents a lot of the incredibly great feedback that we've gotten or hopefully represents all of the incredible great feedback that we've gotten over the last week since we did the first version of the transmittal letter.

In some cases we were able to do word by word application of the suggestions, in other cases we made heavy structural changes but hopefully the spirit of those comments and suggestions are incorporated into this, what's hopefully a near final version.

I want to set expectations appropriately, the front portion of the transmittal document is structurally identical to the previous version and should have all of the edits applied that everyone suggested in the last review as well as in the off line editing process. The last part that was the most rough last time has had some structural revision and so I would expect it to have potentially more room for improvement.

So, with that frame being done we're going to go through the content to prep for the Standards Committee presentation Stan and I have next week where we would expect to receive unanimous endorsement for our recommendations. The Standards Committee being what it is, you know, we certainly hope that's the case, but, you know, we may get it punted back for some more editing but I'm hopeful that we've done such a good job here and have a fairly cross sectional representation both of the Standards Committee as well as knowledgeable experts on this Task Force that we will achieve our goal of first time pass.

All right, let's go through. So, next one. All right, so this hasn't changed much, next. These words should reflect many of the edits that were done, so for example when new standards implementation guidance are needed use a defined process for selecting which SDO or SDOs to work with came through...the key, we've just incorporated most of the edits that we've received into these words. So, I'd just ask people to look at these words and make sure that they represent the edits that folks previously suggested.

David Tao, MS, DSc – Technical Advisor – ICSA Labs

Arien, hi, this is David.

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

Yeah?

David Tao, MS, DSc – Technical Advisor – ICSA Labs

I explained to Michelle, unfortunately I'm in a car I cannot actually see the screen at all, so I'm just going to have to sort of circle back at the end and just bring up a few points that if you've already covered them on the slides I couldn't see.

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

Okay.

David Tao, MS, DSc – Technical Advisor – ICSA Labs

Then so be it.

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

Perfect, yes.

David Tao, MS, DSc – Technical Advisor – ICSA Labs

So, I won't try to comment until that slide.

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

Yeah and you'll have a full version of the transmittal letter in your inbox.

David Tao, MS, DSc – Technical Advisor – ICSA Labs

Yeah, no, I did see that, that's what I have a few comments on.

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

Okay, great.

David Tao, MS, DSc – Technical Advisor – ICSA Labs

But I can't line it up with your slides right now.

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

Okay, yeah, we're talking about the areas of focus for a convening function, the notion that ONC should support a convening function that focuses on supporting identified national priorities by coordinating across SDOs and support SDOs to define critical outcomes, evaluation criteria and use case timelines, develop, identify or find use cases, include front end clinical or other requirements, identify gaps and standards implementation guides, reduce optionality for existing standards implementation guidance, create easy to consume consolidated artifacts, clearly articulate needs and desired outcomes and when new standards implementation guidance are needed use a defined process for selecting.

David Tao, MS, DSc – Technical Advisor – ICSA Labs

Okay, so maybe I could make comments now since most of them were on this particular place. Can I go ahead?

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

Yeah, please.

David Tao, MS, DSc – Technical Advisor – ICSA Labs

Okay, sorry, I've got to be careful here as I'm driving, but so I'm making my comment basically based on what was in the transmittal letter and I don't know if they're on slides, but one was it said on...I think it says, reduce optionality for existing standards and I think I suggested recommend reducing optionality because...and that sort of goes to the concept of implementation guidance. Do we envision S&I actually writing IGs?

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

No, the front material here says, support by coordinating across SDOs and supporting SDOs too.

David Tao, MS, DSc – Technical Advisor – ICSA Labs

Oh, okay, all right. All right, so I somehow lost that context. Okay, one other point was, and this is pretty minor, was down near the bottom it says, clearly articulate needs and desired outcomes and this is really redundant to the very first bullet about defining critical outcomes...and...

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

I just noticed the same redundancy, so I would concur and I'm not even sure that the 7th bullet adds much to the first bullet.

David Tao, MS, DSc – Technical Advisor – ICSA Labs

Yeah, so anyway some consolidation to the first bullet and that articulates...

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

Maybe we should say define critical...

David Tao, MS, DSc – Technical Advisor – ICSA Labs

And my last point was...

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

Sorry, maybe we say define critical needs outcomes, evaluation criteria and use case timelines. And I actually don't think use case timelines fits here.

David Tao, MS, DSc – Technical Advisor – ICSA Labs

I don't think use case is a timeline, but use cases I think should be there.

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

Yeah, we do have use cases in the second bullet so I'd suggest amending the first item to say, define critical needs, outcomes, evaluation criteria for projects and ensure they have traceability to national priorities and then the second bullet already says, develop, identify or refine use cases.

David Tao, MS, DSc – Technical Advisor – ICSA Labs

Okay, that's good. And my last comment really is not on this section but sort of a structural one, I had said that there were...that the formatting is inconsistent because there is no numbering of the recommendations in the beginning and then there is again and I thought that it would be helpful to have all the recommendations numbered like number one with a, b, c and so under it so that you could easily, you know, refer to a particular one sort of like it is towards the end of the letter.

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

Yeah.

David Tao, MS, DSc – Technical Advisor – ICSA Labs

And so that's just a clerical task, but I think that ought to be done.

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

I agree on that, I've been avoiding commenting on that because the editing itself is...I tried to do that and I was fighting...I found myself fighting with words so I think what we need to do is accept all the edits and then apply consistent numbering, but could I ask...so just in terms of clarity of action I think we're now down to editorial comments, so could I ask ONC staff to take on those two functions, make the edit that we just suggested on bullet one, remove bullet seven and once we have a near final draft make sure our numbering system is consistent.

Mark Segal – Vice President, Government & Industry Affairs, GE Healthcare IT – GE Healthcare

I'm sorry and Arien what was the edit on bullet one please?

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

Bullet one is...so right now it reads, define critical outcomes, we would...it says define critical outcomes, evaluation criteria and use case timeline.

Mark Segal – Vice President, Government & Industry Affairs, GE Healthcare IT – GE Healthcare

Yes.

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

And we would edit it to say, define critical needs, outcomes and evaluation criteria for projects and ensure they have traceability for national priorities.

Mark Segal – Vice President, Government & Industry Affairs, GE Healthcare IT – GE Healthcare

Got it, thanks.

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

And then eliminate bullet seven.

Mark Segal – Vice President, Government & Industry Affairs, GE Healthcare IT – GE Healthcare

Yes.

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

So, we're taking the word "needs" into bullet one, we're striking "use case timelines" from bullet one and that's primarily it. And we're using the Oxford comma which I deeply care about.

Stanley M. Huff, MD, FACMI – Chief Medical Informatics Officer – Intermountain Healthcare

So, Arien, this is Stan.

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

Yeah?

Stanley M. Huff, MD, FACMI – Chief Medical Informatics Officer – Intermountain Healthcare

My comment was kind of related to Dave's, you know, it says it clearly but if you were reading this fast then you would think that these are things that S&I should do as opposed to things that S&I would make sure happen at SDOs and I don't know if there is just a way...because it says it right but it's just easy for people to kind of misread it and think that these are things S&I should do as opposed to things that should happen at SDOs. And I don't know if there is a way to emphasize that a little better or I don't know, because it says it right but it's easy to misunderstand.

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

Yeah, maybe we just say, in areas where we think we're supporting SDOs, so in bullets four, five and six we could say support SDOs to...in the preamble four, five and six.

Jamie Ferguson – Vice President, Health Information Technology Strategy & Planning, Fellow, Institute for Health Policy – Kaiser Permanente

So, this is Jamie; just another possible alternative suggestion, it's just essentially reorder the words of the recommendation to say, SDOs should be supported by ONC to blah, blah, blah. But, you know, lead off the wording of the recommendation with "SDOs should."

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

Yeah but then it makes the convening function activity more passive.

Jamie Ferguson – Vice President, Health Information Technology Strategy & Planning, Fellow, Institute for Health Policy – Kaiser Permanente

Well, not necessarily...

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

Yeah.

Jamie Ferguson – Vice President, Health Information Technology Strategy & Planning, Fellow, Institute for Health Policy – Kaiser Permanente

It's like SDOs should be supported by ONC...

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

Or by the committee function, yeah, we could do it that way as well. I think you still have the issue of if you skip over the actual recommendation text and read the sub-bullets it's not clear as to who is doing what. I'm agnostic here because this is just about making sure the words read right.

Stanley M. Huff, MD, FACMI – Chief Medical Informatics Officer – Intermountain Healthcare

Yeah.

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

We can do both. Edit for optimal clarity.

Stanley M. Huff, MD, FACMI – Chief Medical Informatics Officer – Intermountain Healthcare

Yeah. Yeah, why don't we...yeah.

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

So, we'll say recommendation will be support SDOs and coordinate across SDOs to support identified national priorities and then we will say under bullets four, five and six, support SDOs to identify gaps, support SDOs to reduce optionality and support SDOs to create easy to consume consolidated artifacts.

Stanley M. Huff, MD, FACMI – Chief Medical Informatics Officer – Intermountain Healthcare

Yeah I think that, yeah, that is sort of wearing a belt and suspenders but I like it.

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

Correct. All right, I would move that we go to the next slide. All right, so some edits here, I'm going to, just for David's purposes, kind of quickly read the text, recommendation to support production use, I don't think any of these changed except that we put in facilitating and seeking input with those with expertise and development of testing tools and developing test tools, that seems redundant. So, I would move to strike the "and developing test tools."

Facilitating and seeking input of those with expertise in development of testing tools in parallel with development of implementation guidance is a new bullet. The other bullets are facilitating, including by funding, pilots and effective production implementation, feeding learnings back to SDOs and evaluating success.

So, on that first recommendation modulo my suggested edits any additional suggestions?

Mark Segal – Vice President, Government & Industry Affairs, GE Healthcare IT – GE Healthcare

Arien, this is Mark, just one thought or at least question for clarification, I think when we discussed these roles, and correct me if I'm wrong, but it was generally in the context of a particular S&I project or convening function project.

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

Yes.

Mark Segal – Vice President, Government & Industry Affairs, GE Healthcare IT – GE Healthcare

As opposed to a global role and so I'm wondering in many of the recommendations that we're in now, certainly the one we're just talking about on supporting production use, I wonder if we want to bound it by projects that are taken up by the convening function, you know, consistent with our prioritization.

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

Yes.

Jamie Ferguson – Vice President, Health Information Technology Strategy & Planning, Fellow, Institute for Health Policy – Kaiser Permanente

So, Eric, this is Jamie, I remember it differently, so I mean I think that yes there may be a convening function within a particular project but we did talk about this, you know, this more global convening function particularly to ensure that the designated or identified national priorities aligned with the parameters that we set out.

Mark Segal – Vice President, Government & Industry Affairs, GE Healthcare IT – GE Healthcare

Yeah, no I'm not disagreeing, this is Mark, I'm not disagreeing with that but I'm looking at some of the tasks here, you know, evaluating success of standards and implementation guidance in achieving national priorities, so it's just that this is really a very different function that I think...

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

Yeah, this bullet really is a Standards Committee activity...

Mark Segal – Vice President, Government & Industry Affairs, GE Healthcare IT – GE Healthcare

I think so.

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

As opposed to a convening function activity.

Mark Segal – Vice President, Government & Industry Affairs, GE Healthcare IT – GE Healthcare

I think so.

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

Yeah, but it is appropriate for the convening function with respect to a particular project to evaluate...

Mark Segal – Vice President, Government & Industry Affairs, GE Healthcare IT – GE Healthcare

And I guess I would also say for those things...

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

Yeah.

Mark Segal – Vice President, Government & Industry Affairs, GE Healthcare IT – GE Healthcare

And maybe it was Stan who had raised it on one of our earlier calls, that in fact it's really some of the infrastructure in the bottom recommendation on the slide or sort of activities that almost cut across projects but at the same time I think we want to be careful not to superimpose convening function activities on Standards Committee function.

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

Yes. And then Jamie, to your point, we do have that prioritization discussion captured in the next set of slides. I would tend to agree with Mark that the intent here is with respect to projects, we've got some more general recommendations to ONC with respect to the lifecycle of certification criteria standards and production use that is much more general. When we get to that we can discuss that.

Mark Segal – Vice President, Government & Industry Affairs, GE Healthcare IT – GE Healthcare

And I'm sorry, this is Mark again, just again, thinking about the working title we used and this really just struck me as I was sort of reading this on the slides and thinking about somebody who hadn't been part of this, even the notion of calling it the convening function we might even want to bound that by any language we have in describing what it's function is, because again convening function it almost sounds like...I was a call earlier today on the governance process and the roadmap and it almost sounds like it's the governance process in the roadmap.

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

Yeah.

Mark Segal – Vice President, Government & Industry Affairs, GE Healthcare IT – GE Healthcare

So, even in the working title we just may want to think about making sure that's consistent with what the recommendation of this group is for its purpose.

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

Yes and I think it reads okay if you read the full text of the recommendation letter it is as you suggest sometimes people read the...they don't read the preambles and the important stuff and may confuse the point.

Mark Segal – Vice President, Government & Industry Affairs, GE Healthcare IT – GE Healthcare

Yes.

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

All right, I think we've got some suggestions, I don't think we've got some formal editing guidance but maybe we'll take the action to see if we can clarify the editing.

The next recommendation has been heavily edited so a number of people commented that we were unclear as to how the convening function should facilitate effective federal participation in SDOs.

And so this now reads, facilitate effective federal participation in SDOs by working with ONC to coordinate involvement of relevant federal agencies and experts in SDO processes, standards development, implementation, and adoption, some comma edits there.

And then sub-bullets, identify key representatives from each relevant agency, ensure federal role in SDOs and similar are aligned with national priorities, ensure active federal participation in pilot, technology development, early production and national adoption of standards and implementation guidance. I'm going to...this is all new and I will pause and see what level of feedback we get.

David Tao, MS, DSc – Technical Advisor – ICSA Labs

Arien, hi, this is David, I had made a comment of maybe suggesting the federal health architecture because I thought, I believe that that's already been designated as a way that ONC coordinates all the agencies and they had been using that or they say they have been using that to consolidate and coordinate their input into S&I as it currently exists. So, I just thought maybe giving a nod to that by name would recognize that we're not overlooking it. So, not a big deal, but I thought that if that's what they're already doing and that's its purpose that we might.

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

Yeah, my take on that would be if the means by which they...if they decide to act on this recommendation, the means by which they do that is to designate FHA then that's fine or if there is another approach for it we don't particularly want to point out FHA as something that's set in stone because it might change or otherwise.

David Tao, MS, DSc – Technical Advisor – ICSA Labs

Yeah, yeah I can see that. So, I guess it's going to lead to the same result anyway.

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

Right.

Ken McCaslin – Director, Healthcare Standards – Quest Diagnostics

So, Arien, this is Ken McCaslin, in the second recommendation it says and experts in SDO process standards development. Since SDO stands for standards development can we get rid of that word and just say SDO processes, implementation and adoption?

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

Works for me. From the redundant department of saying the same thing over and over again pleonastically. All right, I'll pause one second more for additional comments.

All right, then our last recommendation has neither been changed nor been edited it is identifying needs for infrastructure and artifacts that may be developed outside of or across SDOs example, value sets, provider directory data sources, organizational identity assurance. All right onto the next slide.

This is our preamble for identified national priorities, hopefully consistently say projects as opposed to initiatives. Next slide.

So, now we're saying a convening function should ensure that projects meet all of the following criteria, a, b and c. A is has high priority. B is if successful will lead to measurable and meaningful real-world outcomes that will advance national priorities. C, as determined through a consistent gating process to ensure projects have a high likelihood of success to achieve identified outcomes. For example, etcetera.

Major edit on bullet A the last sentence now reads priorities should not be determined by a single federal agency who wishes to address a need without respect to rank order prioritization across projects. So, just not...the previous sentence was I felt a little fuzzy; I was probably the one who wrote it. So, I'm going to pause and see if these edits meet the goals that we all had.

Jamie Ferguson – Vice President, Health Information Technology Strategy & Planning, Fellow, Institute for Health Policy – Kaiser Permanente

So, Arien, this is Jamie, I think one thing that we talked about at some point that I'm not sure I see here or maybe I'm missing it is the idea of looking at overlapping impact of implementation.

So, in other words if there are multiple projects that proceed and, you know, develop some artifacts is there the expectation then that would all be implemented, you know, afterwards but potentially cause resource conflicts or undue resource burden because of the nature of these different projects, you know, going after the multiple changes to the same thing or having to use the same resources, etcetera.

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

Let's see sub-bullet three takes into consideration parallel efforts, resources and ability for contributors to participate.

Jamie Ferguson – Vice President, Health Information Technology Strategy & Planning, Fellow, Institute for Health Policy – Kaiser Permanente

Okay.

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

And then I'd also put some aspect of that into bullet, sub-bullet one, has a reasonable path to scaled effective production implementation, taking into consideration the end-to-end process...

Jamie Ferguson – Vice President, Health Information Technology Strategy & Planning, Fellow, Institute for Health Policy – Kaiser Permanente

You know, so I think that three looks like it is, you know, doesn't conflict with other concurrent projects and what I'm talking about is that the result has a path to implementation that doesn't conflict with other concurrent paths to implementation.

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

Gotcha. So, I think we should...I completely agree with that and I think we should bulk out three that we're not just talking about parallel efforts with regard to standards development, implementation but also workflow changes as an option.

Jamie Ferguson – Vice President, Health Information Technology Strategy & Planning, Fellow, Institute for Health Policy – Kaiser Permanente

Exactly, you...

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

Yes.

Jamie Ferguson – Vice President, Health Information Technology Strategy & Planning, Fellow, Institute for Health Policy – Kaiser Permanente

That's good, thank you.

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

Perfect, okay.

Mark Segal – Vice President, Government & Industry Affairs, GE Healthcare IT – GE Healthcare

Hey, Arien, to the point that we had made, this is Mark, earlier where we just in the header of the recommendation, a convening function should ensure I'd suggest saying that "its projects."

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

Yes, great point or that...adopt is probably the wrong word but that selected projects...

Mark Segal – Vice President, Government & Industry Affairs, GE Healthcare IT – GE Healthcare

Well, again it's selected...it's projects to be done under its aegis.

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

That's right, yes.

Mark Segal – Vice President, Government & Industry Affairs, GE Healthcare IT – GE Healthcare

So, it's just...

Jamie Ferguson – Vice President, Health Information Technology Strategy & Planning, Fellow, Institute for Health Policy – Kaiser Permanente

Or yeah it's prioritized projects or something.

Mark Segal – Vice President, Government & Industry Affairs, GE Healthcare IT – GE Healthcare

Right.

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

Yes, okay, we'll make that change both those changes, great. Next slide unless there is any other feedback?

All right, this whole section has been heavily revised so I took the...all the lifecycle preamble and put it together so we deliberated and heard testimony in the role of the convening function with respect to the role of SDOs and implementers so clearly talking about the lifecycle of the convening function with the other key major actors.

The second paragraph unchanged from the first but placed in this section talks about the testimony that we heard from standards development and other sectors. Next slide.

Mark Segal – Vice President, Government & Industry Affairs, GE Healthcare IT – GE Healthcare

So, Arien, before you go on from this...

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

Yes?

Mark Segal – Vice President, Government & Industry Affairs, GE Healthcare IT – GE Healthcare

And just again thinking about how this plays and how we then apply it to the new language you put under lifecycle I'm wondering about sort of in the middle of the second bullet the word "requires" and I guess I would propose for consideration something like typically involves.

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

Yes, absolutely fair point and again the point of there are some standards that require for example mathematical rigor and proof. So, typically involves makes perfect sense to me.

Okay, although outside our scope, encourage SDOs in the healthcare domain to consider these lessons, okay, a bunch of stuff here.

Number one, this approach to standards development works best in an environment where economic and mission drivers lead key actors to seek interoperability actively and are willing to dedicate the time, energy and resources, no Oxford comma there, sufficient to ensure the tight interplay of standards development and implementation.

Paragraph three on this slide, in an environment where the coordinated adoption of standards and implementation guidance occurs primarily through a certification timetable we consider it essential that standards developed and adopted for healthcare be both pilot and production tested, and that the lessons from implementation, and that probably should be "prior to certification" and that the lessons from implementation inform further refinement of standards and implementation guidance. Maybe I should put prior to certification at the end of that whole sentence.

And then last paragraph, SDOs perform critical roles with respect to balance of interest, IP rights management and other activities that are aligned with OMB Circular A-119 on the use of voluntary consensus standards and it's important that the convening function carefully align its role with respect to the role of SDOs.

So, all of this stuff, the middle two paragraphs in particular are thinking to capture the discussion that we had about why the tight interplay of adoption, that the tight interplay of adoption or development and standards development works when in the Internet world where people actually want standards because it helps their mission in business and that if you're driving standards adoption through certification you don't actually have the sphere cycle to do the work that's required for that process, so I'm trying to capture those two points and that will lead to some recommendations text. So, I'm going to pause because I've thrown a lot into here.

Mark Segal – Vice President, Government & Industry Affairs, GE Healthcare IT – GE Healthcare

Arien, this is Mark, one thought on bullet three, the last sentence there inform further refinement of standards and implementation guidance, I'd suggest also adding certification criteria as one of those things potentially to be refined.

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

Yeah, I was intending I think to add prior to adoption of certification criteria.

Mark Segal – Vice President, Government & Industry Affairs, GE Healthcare IT – GE Healthcare

No, no but I think...

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

Yeah.

Mark Segal – Vice President, Government & Industry Affairs, GE Healthcare IT – GE Healthcare

When you're...and maybe this is only saying that all these things happen to have...before their first use.

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

Yes.

Mark Segal – Vice President, Government & Industry Affairs, GE Healthcare IT – GE Healthcare

But I think, you know, there is production use and then there is the use at kind of the level that might come through it being included in certification. So, maybe it dilutes the point but it seems to me that once newer standards go through this and are in broader implementation by virtue of being included in certification criteria if we learn things from that broader implementation that ought to be used to refine the standards, the implementation guidance and the certification criteria.

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

Okay, great, so how about let me suggest this, that's a great point, we consider it essential that standards developed and adopted for healthcare be both piloted and production tested prior to inclusion of certification. We also consider it essential that lessons from implementation inform further refinement of standards, implementation guidance, and certification criteria.

Mark Segal – Vice President, Government & Industry Affairs, GE Healthcare IT – GE Healthcare

Yeah, sure.

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

Okay.

Mark Segal – Vice President, Government & Industry Affairs, GE Healthcare IT – GE Healthcare

Thank you.

David Tao, MS, DSc – Technical Advisor – ICSA Labs

Okay, hi, this is David, Arien I think when you say...when you contrast the Internet world with healthcare where there is certification, you know, certification process-driven, I think that the using the word certification maybe on the one hand too limiting and the other hand a little bit too broad in that one there are other certifications that existed prior to Meaningful Use and ONC certification and some of it still exists like Surescripts...type certification.

But, I think it's the national federal regulation that includes both certification and requirements to use certified EHRs.

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

Fair point.

David Tao, MS, DSc – Technical Advisor – ICSA Labs

Like you could have certification and it could be voluntary like...and then add some pressure to it, but it didn't have to say enforce as when hospitals, you know, did this stuff.

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

Yeah.

David Tao, MS, DSc – Technical Advisor – ICSA Labs

So, I would like to get the word regulation in there somewhere.

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

Yeah, so through a federal certification time table or a federal certification.

David Tao, MS, DSc – Technical Advisor – ICSA Labs

Or a federal regulation.

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

Federal certification time table tied to programmatic...the ONC will always remind us that certification is a voluntary activity, it's the tying of certification to incentive programs, incentive or other programs, so, you know, if you tie this to ACO we're all going to get certified on the timeline for this to happen.

David Tao, MS, DSc – Technical Advisor – ICSA Labs

Yeah.

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

Okay, so we'll make...that's a great point and I will, unless there is objection I will make that edit. Hearing no objection all those edits will be made. Okay, any other comments on the preamble? Next, our recommendations.

So, therefore in addition to this, all this is new, and in addition to our previous recommendations relating to the role of a convening function with respect to effective implementations we further recommend, recommendation, coordinated lifecycle for standards development.

ONC should actively encourage and seek to avoid policies that may inadvertently discourage market and mission-based work that leads to tight interplay between standards development and production implementation.

Two bullets relating to how the convening function should work, with SDO processes in cases where SDOs have processes that accommodative tight interplay the convening function should work within those processes. When working with SDOs that don't have those processes the convening function should encourage cycles of feedback and implementation that are aligned with formal balloting processes.

And then two recommendations relating to adoption and certification criteria, number one is saying, should not create certification criteria that do not have adequate real-world piloting and production use and number two, should ensure that certification criteria point to work aligned with OMB Circular A-119. So a lot there.

David Tao, MS, DSc – Technical Advisor – ICSA Labs

So, that one about should not include certification that do not have whatever, there is a double negative, could it be expressed without, you know, like should or must ensure that there is production, implementation something like that? Would that make it a little more understandable?

Stanley M. Huff, MD, FACMI – Chief Medical Informatics Officer – Intermountain Healthcare

Yeah, I think that makes sense.

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

I was wording this and I was conscious of the double negative, I was worried wording this to be prohibitive as opposed to...I was intentionally wording this to be prohibitive and then using...and have the double negative fall where it may as opposed to wording this to be suggestive...

Mark Segal – Vice President, Government & Industry Affairs, GE Healthcare IT – GE Healthcare

Arien...

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

We could word it more strongly. Yeah?

Mark Segal – Vice President, Government & Industry Affairs, GE Healthcare IT – GE Healthcare

Just one editorial suggestion but to avoid the appearance of the double negative instead of saying the do not have to say without.

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

Without, yes.

David Tao, MS, DSc – Technical Advisor – ICSA Labs

Yeah that's fine I think just avoiding two "not's." If you can avoid that then I'm fine.

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

Yeah, good, ONC should not create certification criteria for standards and implementation guidance without adequate real-world piloting production use, works for me.

Mark Segal – Vice President, Government & Industry Affairs, GE Healthcare IT – GE Healthcare

And if you do that I think you need to just be maybe clear...I'd say with production use of those criteria.

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

Yes.

Holly Miller, MD, MBA, FHIMMS – Chief Medical Officer – MedAllies, Inc.

Arien, one other, this is really very pointy headed, excuse me, but in the preamble could it say, function with respect to effective implementations and adoption.

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

Yes.

Holly Miller, MD, MBA, FHIMMS – Chief Medical Officer – MedAllies, Inc.

Because we can put all the...

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

Yes, yes, yes.

Holly Miller, MD, MBA, FHIMMS – Chief Medical Officer – MedAllies, Inc.

All the technology out there in the world if no one is going to use it...

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

It's not just about the technology...

Holly Miller, MD, MBA, FHIMMS – Chief Medical Officer – MedAllies, Inc.

It's not going to be effective.

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

Thank you for speaking up for the clinician, thank you. Okay.

Stanley M. Huff, MD, FACMI – Chief Medical Informatics Officer – Intermountain Healthcare

Arien, this is Stan, I think I understand what A says but has there been a specific example where we thought that has happened that we've floated...

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

Yeah, the classic example here is for example the FHIR adoption work that many provider organizations and developers are doing where that work maybe stopped or slowed because we will all move onto the required work for certification criteria.

Stanley M. Huff, MD, FACMI – Chief Medical Informatics Officer – Intermountain Healthcare

Okay.

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

And so if you're suggesting that we include examples of what those policies might be I think the one example that I would give would be effectively certification criteria that lead to attacking the development and implementation and adoption time table. And I think it does make sense to be more explicit about that.

Stanley M. Huff, MD, FACMI – Chief Medical Informatics Officer – Intermountain Healthcare

Yeah, no that clarifies it for me, thank you.

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

Okay, so unless there are objections I will include that as an example of what a policy that might have that inadvertent discouragement would look like. Any other comments here? I think we're on the downward path now we've climbed the mountain and now we're on the other side, hopefully. Okay, next slide.

Work practice recommendations, a lot of editorial comments here, trying to avoid my tendency for universal statements not always followed, establishing clear charter and clear business requirements was mentioned as a key success factor that was followed by the most productive S&I initiatives.

On the other hand unclear role for facilitators who are often mentioned as negative factors as were initiatives at start of engagement but had that engagement diminish over time by lengthy processes or unclear timelines. So, that's the preamble text. Next.

Therefore, we recommend that ONC...

Holly Miller, MD, MBA, FHIMMS – Chief Medical Officer – MedAllies, Inc.

We want...

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

I'm sorry, go ahead?

Holly Miller, MD, MBA, FHIMMS – Chief Medical Officer – MedAllies, Inc.

We want to go straight.

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

Oh, okay. Therefore we recommend that ONC consider the following in work practices for a convening function, recommendation, clear chartering driving towards real-world outcomes, I don't believe there were any editorial comments here besides initiative for project and the like.

Recommendation, clear role for facilitation, so sub-bullet one I do not believe has changed. Sub-bullet two is based on the feedback from this group listing appropriate activities include effective project management, note taking and editing, content management and background research.

Sub-bullet three is a new sub-bullet, ONC or other federal agencies should ensure clear roles for funded subject matter experts who are expected to be material participants. And the convening function should ensure that such experts do not unduly influence project outcomes.

So, trying to say two things, number one is that recognize that subject matter experts may well be hired by ONC or other federal agencies but also saying that just because the subject matter expert came from ONC or from VA they shouldn't have effectively veto or unanimous consent power.

Mark Segal – Vice President, Government & Industry Affairs, GE Healthcare IT – GE Healthcare

Arien, this is Mark you might...I agree absolutely with the thought, you might want to somehow bound the...what you mean by unduly, so in other words, are they an actual...are they considered sort of an equal member of the project or do they have some kind of status outside of that?

So, is it unduly because they're not a formal member of it or unduly beyond, you know, what should be their role as just a member?

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

Yeah, that's right.

Mark Segal – Vice President, Government & Industry Affairs, GE Healthcare IT – GE Healthcare

So, I'm not sure what the answer is but I think somehow putting some bounds around unduly with reference to some of the other language here would be helpful.

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

Okay, I'll take a pass at that one and see if anybody specific edits they think would be useful.

Mark Segal – Vice President, Government & Industry Affairs, GE Healthcare IT – GE Healthcare

Maybe just say unduly, you know, relative to the overall, you know, relative to the other participants in the project or something like that.

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

Yes, makes sense. Okay, next, last work process, oh, this one...oh, so, clear project management processes, consider narrowing scope of projects in order to target specific achievable outcomes, set time limits, project plans and processes to expedite the narrowly defined results.

Processes should be appropriate to allow the project to move forward expeditiously and phases should be time-bound to ensure that roles and responsibilities for participation in project phases are well defined in order to allow participants with key needs, business, clinical, technical, etcetera, to participate effectively. This encapsulates, this is one of those unfortunate requirements that encapsulates a lot of discussion and has a lot of stuff that probably needs to be unpacked, I'm sure exactly how to do that effectively.

And then sub-bullet C, define an oversight process, and I don't believe these words have changed recently. I'll pause to see if these make sense and if there are editorial or content...

Holly Miller, MD, MBA, FHIMMS – Chief Medical Officer – MedAllies, Inc.

Is the font change on purpose or is that...

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

No.

Holly Miller, MD, MBA, FHIMMS – Chief Medical Officer – MedAllies, Inc.

Is that an error?

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

I think that's a PowerPoint-based artifact.

Holly Miller, MD, MBA, FHIMMS – Chief Medical Officer – MedAllies, Inc.

Okay. I wasn't sure if you were trying to emphasize.

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

No. Okay, any additional feedback?

Stanley M. Huff, MD, FACMI – Chief Medical Informatics Officer – Intermountain Healthcare

Just one minor one, I wonder if we wanted to be even more direct in C item 2 instead of saying, wind down just say end.

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

End, fair point.

Stanley M. Huff, MD, FACMI – Chief Medical Informatics Officer – Intermountain Healthcare

There should be a process to end the activity.

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

Fair point, thank you. Okie doke. Next slide. I believe this is our miscellaneous slide. Next slide, please. Maybe I haven't...

Lonnie Moore – Meetings Coordinator – Altarum Institute

That's actually the last slide before the public comment.

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

Is that the last slide?

Lonnie Moore – Meetings Coordinator – Altarum Institute

Yes, Sir.

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

Oh, good, okay, excellent, good, good, good. We removed our miscellaneous slide, perfect, thank you. All right, I believe then that we've gone through all of the text.

I would propose that we move early to public comment which will allow us to take some time to do some quick edits on the transmittal letter and get this back to the full group.

David Tao, MS, DSc – Technical Advisor – ICSA Labs

Arien, this is David, could I interject one question though?

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

Sure.

David Tao, MS, DSc – Technical Advisor – ICSA Labs

I don't remember...I didn't have a whole lot of time to read the transmittal letter in detail I went through it quickly. One suggestion that was made at the last meeting was about including reference implementation to support a production used somewhere up in the earlier recommendations, did that make it into the letter?

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

It got in as a finding but not as a recommendation.

David Tao, MS, DSc – Technical Advisor – ICSA Labs

Okay. What did the finding say?

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

The finding says that with respect to informing standards and implementation development by working implementations we found dah, dah, dah, dah, dah requires tight interplay between standards development production and implementations which often have been implemented as open source libraries or projects.

So, we could...if we wanted to make that more explicit we could say in our language for support and identify national priorities by coordinating SDOs and supporting SDOs too we could include a sub-bullet on or support production use rather...

David Tao, MS, DSc – Technical Advisor – ICSA Labs

Yeah.

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

We could include a sub-bullet on facilitating open source reference implementations.

David Tao, MS, DSc – Technical Advisor – ICSA Labs

Yeah, I had suggested that, I think it's a good idea, you know, whether it's mandatory for every project I don't know but I didn't see it in some projects and it seemed like, you know, given lesser emphasis now for S&I on standards and implementation guides that ONC support or where they reference implementations would be a good thing. Do others agree that's worth recommending?

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

This is Arien, I mean, obviously this is something that we've done in the past and it has been effective.

David Tao, MS, DSc – Technical Advisor – ICSA Labs

Now some are doing it anyway without S&I needing help...

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

Yeah.

David Tao, MS, DSc – Technical Advisor – ICSA Labs

Like FHIR, but...

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

That's right.

David Tao, MS, DSc – Technical Advisor – ICSA Labs

But if we think that's a best practice then...and plus this is not necessarily...

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

Yeah.

David Tao, MS, DSc – Technical Advisor – ICSA Labs

This is going...work with SDOs to do that so if some project doesn't have that...

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

Yeah.

David Tao, MS, DSc – Technical Advisor – ICSA Labs

It's where help could be provided.

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

I don't want to imply that ONC or the convening function should be writing the reference implementation which is why I suggested wording, you know, facilitating or supporting the development of reference implementations. Any objections to including that?

Mark Segal – Vice President, Government & Industry Affairs, GE Healthcare IT – GE Healthcare

Can you just restate it Arien, please?

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

So, under recommendation to support production use we will add a bullet to read facilitating or supporting the development of reference implementations usable by a wide range of participants.

Mark Segal – Vice President, Government & Industry Affairs, GE Healthcare IT – GE Healthcare

That seems fine to me, this is Mark.

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

Okay.

Stanley M. Huff, MD, FACMI – Chief Medical Informatics Officer – Intermountain Healthcare

I like it. Would that...are you thinking that encouragement and support would...could include funding as well to create those references?

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

Sure.

Stanley M. Huff, MD, FACMI – Chief Medical Informatics Officer – Intermountain Healthcare

So, I'd be happy if we stuck funding in there...

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

Okay.

Stanley M. Huff, MD, FACMI – Chief Medical Informatics Officer – Intermountain Healthcare

I think one of the other ones we said something...

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

That's right.

Stanley M. Huff, MD, FACMI – Chief Medical Informatics Officer – Intermountain Healthcare

Including funding or something...

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

That's right.

Stanley M. Huff, MD, FACMI – Chief Medical Informatics Officer – Intermountain Healthcare

I would include that same thought with the reference implementations.

David Tao, MS, DSc – Technical Advisor – ICSA Labs

Yeah.

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

That makes sense to me, yes. Great, so I'm hoping I've got...I'll take an editing pass on this, I'm hoping that somebody has been taking good notes and can support me on highlighting all the places that we agreed to make changes, my memory is generally pretty good but you can augment that memory with good notes. So, as a hopeful...

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

Mera?

Mera Choi – Acting Standards & Interoperability Coordinator, Office of Science & Technology – Office of the National Coordinator for Health Information Technology – Department of Health & Human Services

Yes.

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

Okay, great. So, with that I will suggest that we move early to public comment and I will take the remainder of this time to do a quick turn on edits out to the rest of the group.

Public Comment

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

Okay, operator 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. Thank you.

David Tao, MS, DSc – Technical Advisor – ICSA Labs

While we're waiting Arien, do you know where in the Standards Committee agenda this presentation is going to be?

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

I do, but Michelle knows even better.

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

I do, I actually just switched the time on you it's at 10:30.

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

Okay.

David Tao, MS, DSc – Technical Advisor – ICSA Labs

Okay, thank you.

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

But Michelle is sneaky and she's always willing to change the time at the last moment, but hopefully...

M

Michelle, will that stay at 10:30 or will it have to be moved again next week?

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

We sent the final agenda out today, usually that means it's final barring any last minute changes...

M

Oh, good.

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

It will be at 10:30.

M

Excellent, thank you.

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

You heard the very careful hedge there.

M

I did.

M

Yeah.

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

It looks like we have no public comment.

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

All right, thanks everybody and as I said I'll do a quick turn and await that in your inboxes, thank you.

David Tao, MS, DSc – Technical Advisor – ICSA Labs

Thank you.

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

Thank you, everyone, have a nice weekend.

Jamie Ferguson – Vice President, Health Information Technology Strategy & Planning, Fellow, Institute for Health Policy – Kaiser Permanente

Thank you.

Stanley M. Huff, MD, FACMI – Chief Medical Informatics Officer – Intermountain Healthcare

Bye-bye. Thanks, Arien, you did a great job.