

# HIE Accreditation and Certification Landscape

December 17, 2013

**This report was prepared by the National HIE Governance Forum under the auspices of the National eHealth Collaborative through its cooperative agreement with the Office of the National Coordinator for Health Information Technology, U.S. Department of Health and Human Services.**

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# Forum HIE Accreditation and Certification Workgroup

## Workgroup Charge

- Develop an inventory of national, regional, and state accreditation and certification programs, providing a landscape of these efforts including their purpose, scope and source of authority

## Workgroup Purpose

- This landscape will provide stakeholders with an understanding of the categories of programs, where and why they are emerging, and what they are intended to address

# Forum HIE Accreditation and Certification Workgroup

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- Paul Calatayud, Surescripts

# Definitions

*\*As determined by the Accreditation & Certification Workgroup*

## Accreditation

- A process in which evidence of competency, authority, or credibility is presented
- The accreditation process ensures that their policies and practices are acceptable, that organizations behave ethically and employ suitable quality assurance and, if appropriate, that they are competent to test and certify third parties

## Certification

- The process of certifying that a certain product has passed performance tests and quality assurance tests, and meets qualification criteria stipulated in contracts, regulations, or specifications

# Accrediting and Certifying Organizations Data Request

- Key accreditation and certifying bodies, including state designated entities, were invited to share information to provide understanding of the HIE accreditation and certification landscape
  - Purpose of Accreditation/Certification program:
  - Who is this accreditation/certification relevant to? Who is the target audience?
  - What is the scope (technical, policy, etc.)?
  - What are the issues that are addressed?
  - What are the types of assurances that are gained?
  - What is the source of the authority; i.e. state, regional, national organization?
  - Is the program voluntary or required?
  - Is it an evaluation or a registry?
  - Are there any standards that are being used as a baseline for their certification or accreditation?
  - Are you aware of any overlap in the industry regarding HIE accreditation and certification? If yes, please provide details on overlap.
  - What are the gaps in current HIE accreditation or certification activities; i.e. what other matters would be best served by receiving an accreditation or certification by a third party?
  - What type of entity is best suited to perform this additional verification?

# Organizations Who Provided Information

## National

- Surescripts
- EHNAC
- CCHIT
- DirectTrust
- Healtheway

## Statewide

- State of Indiana
- State of Kansas
- State of Pennsylvania
- State of Vermont
- Minnesota Dept. of Health
- State of Texas



# Initial Conclusions from Information Gathered from Accrediting and Certifying Organizations

- A continuing theme around these efforts is that to increase trust and interoperability.
- Much of the target audience consists of HISPS, HIOs, providers, vendors, or HIEs.
- The scope of the accreditation & certifications center around:
  - Technology
  - Policy/Legal including trust agreements
  - Security
  - Financial Sustainability including fee structures
- Approximately half are required and half are voluntary with some – Texas – being voluntary unless you would like to be listed as a trusted entity.
- The majority of accreditation & certifications are evaluations
- Many states are using national sources like EHNAC, DirectTrust, Healthway, and CCHIT as a basis for their accreditation and certification efforts but some – Vermont, Indiana mostly, and Pennsylvania – pull from other sources as well.



## Secure Messaging vs. Query-Based

- Accrediting and certifying bodies that address secure messaging:
  - DirectTrust
  - EHNAC
  - State of Rhode Island
  - State of Indiana
  - Minnesota Department of Health
- Accrediting and certifying bodies that address query-based exchange:
  - Healtheway
  - State of Indiana
  - CCHIT
  - State of Pennsylvania
  - Minnesota Department of Health

## Purpose of Accreditation and Certification Programs

- Many cite the need to ensure HIOs, HISPs and providers exchanging information in a state have been reviewed and approved by an impartial certifying body and establish trusted relationships with each other for exchange
- Surescripts states that their purpose is “to provide HIE services related to Direct HIE products as well as to support the exchange of HIE information between HIEs within our network ecosystem”
- ENHAC states their purpose is to “develop standard criteria and accredit organizations that electronically exchange healthcare data”

# Target Audiences and Scope

## Target Audiences

- HISPs
- HIOs
- Providers
- Vendors
- HIEs

## Scope

- Technology
- Security
- Financial sustainability including fee structures, plans for charging providers, long-term care facilities, etc.
- Policy & Legal Implications including trust agreements

# Required vs. Voluntary Programs

## Required

- Minnesota
- Pennsylvania
- Vermont
- Kansas

## Voluntary

- DirectTrust
- Rhode Island
- CCHIT
- Surescripts
- EHNAC
- Indiana
- Texas
- Healthway

## Potential Gaps

- What are the gaps in current HIE accreditation or certification activities; i.e. what other matters would be best served by receiving an accreditation or certification by a third party?
  - We do not yet have a reliable and comprehensive testing and certification service unique for HISP/STAs. These entities may be partially tested and certified when using specific EHR vendor modules as “relied upon software” within the context of the 2014 Edition Certificate Criteria. However, not all HISPs have these partnerships.

## Additional Verification

- What type of entity is best suited to perform this additional verification?
  - Initially at this early stage, state programs are adequate; however ultimately a public/private non-profit should be responsible
  - Verification standards and other criteria should be set by a community entity or government
  - Verification against criteria should be performed by an independent third party

# Data Request of Non-Accrediting and Certifying Organizations

- Invited non-certifying bodies to provide information about accreditation and certification programs they are subject to.
  - Organization Name:
  - What HIE accreditation and certifications are you required to comply with?
  - What voluntary HIE accreditation and certifications do you currently comply with?
  - Are they evaluation or registries?
  - Are you aware of any overlap in the industry regarding accreditation and certification requirements?
  - What are the gaps in current HIE accreditation or certification activities; i.e. what other components would be best served by receiving an accreditation or certification by a third party?
  - What type of entity is best suited to perform needed accreditation or certification?



# Non-Accrediting and Certifying Organizations Who Provided Information

- Great Lakes HIE (GLHIE)
- Brooklyn Health Information Exchange (BHIX)
- Rhode Island Quality Institute (RIQI)
- Oregon Health Authority/CareAccord (OR HIE)
- ConnectHealthcare
- Advanced Answers on Demand, Inc.

# Initial Conclusions from Non-Accrediting and Certifying Organizations

- The majority of respondents are not required to comply with any accreditation or certification programs although states (OR, NY) are slowly developing these programs that may be required in the future.
- Many are voluntarily certified and accredited with EHNAC and CCHIT.
- Many did not understand the question about registries vs. evaluations so we did not receive a good sense of their answer.
- Most were not aware of any overlap in the current requirements.
- Meaningful Use and HIE was cited by two respondents as a potential gap that could be filled by a third party.
- Two respondents cited an “independent” organization as the best one to administer the needed certification and/or accreditation. Some cited EHNAC or CCHIT. One suggested a government agency or accreditation commission. One suggested an entity who was fluent in the laws of the specific state.

# Required Programs

- **What HIE accreditation and certifications are you required to comply with?**
  - The GLHIE Security Plan identifies several laws and standards with which GLHIE and GLHIE users are required to comply, as stated in Data Use Agreements and BAAs. GLHIE's system partner, Optum, is contractually required to comply with state and federal laws and national standards related to privacy and security. The following laws and standards are cited in the GLHIE Security Plan:
    - The Privacy Act of 1974
    - Computer Security Act of 1987
    - Federal Information Processing Standard (FIPS) 199
    - Federal Information Processing Standard (FIPS) 200
    - The Health Insurance Portability and Accountability Act of 1996
    - OMB Circular A-130
    - National Institute of Standards and Technology (NIST) Guidance
  - New York State Regulations are expected in 2014 that would require Certification of all RHIOs.
  - None

# Voluntary Programs

- **What voluntary HIE accreditation and certifications do you currently comply with?**
  - Currently BHIX – like all RHIOs in New York -- is voluntarily undergoing a “provisional” certification assessment by a vendor contracted to provide such certification services through the New York eHealth Collaborative (NYeC). This provisional certification will provide information and a gap analysis that will allow authorization for sharing of data between the state RHIOs (QEs) and will highlight areas for improvement in 2014-15, when full certification is expected to be required.
  - ONC 2011 Edition, ModularEHR, CC-1112-833360-1 and CCHIT LTPAC EHR 2011 +Home Health +Skilled Nursing Facility
  - GLHIE is fully accredited by the Electronic Health Network Accreditation Commission (EHNAC), in the HIE Accreditation Program.
  - EHNAC

# Evaluations, Registries, & Overlap

- **Are they evaluation or registries?**
  - Fully certified, functional, and in production.
  - Evaluation of self- assessment and site visit.
- **Are you aware of any overlap in the industry regarding accreditation and certification requirements?**
  - There is overlap between the two certifications above, with the LTPAC being more comprehensive and specific to our industry, long-term and post-acute care. There is some concern that a new edition may not be available.

## Potential Gaps

- **What are the gaps in current HIE accreditation or certification activities; i.e. what other components would be best served by receiving an accreditation or certification by a third party?**
  - It is expected that funding, with State funds flowing through DOH and NYeC, will be dependent upon achieving certification, which, in turn, will allow a RHIO to become “qualified” (i.e. a “Qualified Entity”) in the new New York regulatory framework for the SHIN-NY
  - Meaningful Use certification for HIEs.
  - Current ONC Meaningful Use certifications have limited value to testing a system for real-world use in ACO or HIE implementations as relates to transitions of care between acute or ambulatory settings and the quite different world of long term care. The S&I Framework has addressed some of this by including some elements of care planning, but more needs to be done. However, the largest gap exists in the functionality that is offered by the various HIE, and there appears to be no standardized approach to content or communication protocols.



## Entities to Perform Needed Programs

- **What type of entity is best suited to perform needed accreditation or certification?**
  - Independent. \*Comment: It is too early to be working on accreditation and certification. New HIEs are fiscally fragile. They need some time to become functional before adding a layer of requirements
  - An independent organization, such as the Electronic Healthcare Network Accreditation Commission (EHNAC). Please note: RIQI and the Rhode Island HIE rely on the compliance of others. RIQI's Direct efforts are built upon the HISP accreditation program run by DirectTrust and EHNAC. (The DirectTrust accreditation is replacing our self-grown accreditation process). Also, RIQI relies upon the Meaningful Use certification of EHRs, since our interoperable processes leverage components dictated by the certification process (e.g. Direct capabilities, CCDs/CCDAs).
  - Government agency or accreditation commissions currently engaged in the activity.



## Entities to Perform Needed Programs (*continued*)

- **What type of entity is best suited to perform needed accreditation or certification?**
  - An entity best suited to perform accreditation or certification of Qualified Entities in New York State would be one that comprehends the complexity of the HIE environment from many perspectives, including but not limited to technical applications, policy and privacy concerns, overall operations as well as the business community. The entity would also need to be well versed in Federal Law, New York State Law as well as emerging New York State Policy Guidance which governs health information exchange.
  - We believe the current ATCB process with entities like CCHIT are the best.

## Suggested Next Steps

- Continue to inform and educate the community on the types of accreditation and certification programs, status, and progress.
- Raise awareness of the value proposition and business case for accreditation and certification.
- Identify a neutral, credible third-party organization and encourage them to keep track of current accreditation and certification programs for community reference.
- Encourage above organization to build on current landscape work and collaboratively identify gaps and consider how best to fill them.