HIT Policy Committee  
Meaningful Use Workgroup  
DRAFT  
Report of the January 6, 2014 Virtual Meeting

## Name of ONC Staff Liaison Present: Michelle Consolazio

## Meeting Objective: Review Stage 3 draft recommendations (continued with leftover topics from previous meetings)

## Meeting Outcome:

John Halamka reported on the HITPC’s advice on patient-generated health data (PGHD), saying that there are issues of standards’ maturity. Continua has been asked for information on device standards. The HITSC will deliberate on two competing standards and report back to the workgroup. Chairperson Paul Tang reminded him that the workgroup must have the report by the end of January. He announced his concern about signaling, saying that the “should consider” recommendations must be reformulated.

Regarding care team standards, Halamka reported that although they are ready, they are immature and have not been implemented. Moving to the CCDA slide, he said that for structured and unstructured questionnaires, the standards may be sufficient for certain data elements but not others. The Consumer Technology Workgroup is examining this issue. Charlene Underwood observed that it would be helpful to have use cases aligned with the roster. Leslie Kelly Hall (Consumer Technology Workgroup) agreed to make use cases available. Halamka agreed to report back on January 28.

Regarding medication adherence, Marjorie Rallins and Danny Rosenthal reported for the HITSC Clinical Quality Workgroup and showed slides with the recommendations. Rallins clarified that administrative referred to claims data. However, claims data does not include everything. Tang asked about the interpretation of sigs and auto refills. Co-Chairperson George Hripcsak said that dispensed-not dispensed would be sufficient as a source of information. Tang summarized that the standards are not sufficient to support auto reconciliation, but EHRs can be used to make information available to help with prescribing. Amy Zimmerman referred to SAMHSA grants on the topic as a source of information. Neil Calman talked about apps for patients to interact with these medication data. Tang summarized that the recommendation is certification only. EHRs can ask for information from the PDM. There could be a way for patients to report their use of meds. HIEs could get modular certification for this function. Art Davidson described a tool for educating patients. Another variable is failure to dispense, which is useful information. Tang said that the main change to the objective is to add patient-reported meds. Underwood said that vendors would appreciate designation of priorities. Tang said that priorities will be designated during the final review.

Moving to the open notes slide, Tang reported that the developers questioned the readiness for use in Stage 3. Christine Bechtel said that the functionality should be available for those who wish to introduce open notes. It should be optional for certification. Tang explained that the problems are with the functionality. Egerman questioned the value of certification: if someone wishes to do open notes, she does not need certification. Bechtel questioned Tang’s report from the developers. She wanted clarification. Tang told her that his information was current. Michael Zaroukian explained that he wishes to deliver notes to the patient portal automatically with the capability to withhold certain items. Tang continued to argue against certification and called for a sense of the group on pathway 1(to explain interest in accessible progress notes and open notes beyond Stage 3) or pathway 2 (to define a certification criteria). Someone reported that some EMRs allow sending notes to a portal and the industry is moving in that direction. Bechtel, Zaroukian, and Kelly Hall voted for pathway 2 and the other members (the majority) voted for pathway 1. Regarding the affordable care slide, Joe Francis reported that the VA is struggling with the concept of incorporating patient preferences. It is difficult to capture nuances within the CDS.

Regarding reducing health disparities, members agreed that reporting of stratified data is important. An organization can chose a core measure on which to stratify and report, and no thresholds will be imposed. Tang said that he, Consolazio, and Hripcsak will edit the entire recommendations document for consistency and definitions. A revised document will be prepared and circulated in advance of the next meeting. Tang asked the subgroup leads to review and edit their sections.

### Next Steps: The workgroup is scheduled to meet January 17. Agenda items are PGHD and image sharing.

### Public Comment: None

## Flag to ONC Staff for Coordination: None