Final HITPC Recommendations on Health IT Certification for LTPAC and BH Settings
Step 1 Recommendation:
Five Factor Framework
When evaluating whether to establish a new certification program, ONC should consider whether the proposed certification program would:

- **Advance a National Priority or Legislative Mandate**: Is there a compelling reason, such as a National Quality Strategy Priority, that the proposed ONC certification program would advance?

- **Align with Existing Federal/State Programs**: Would the proposed ONC certification program align with federal/state programs?

- **Utilize the existing technology pipeline**: Are there industry-developed health IT standards and/or functionalities in existence that would support the proposed ONC certification program?

- **Build on existing stakeholder support**: Does stakeholder buy-in exist to support the proposed ONC certification program?

- ** Appropriately balance the costs and benefits of a certification program**: Is certification the best available option? Considerations should include financial and non-financial costs and benefits.
• Step 2 Recommendations: Certification of Health IT Criteria for LTPAC and BH Settings
Organizing Principles for Recommendations

**For ALL Providers**
- Transition of Care
- Privacy and Security
- Data Segmentation/Consent Management

**LTPAC Setting-Specific**
- Patient Assessments
- Survey and Certification

**BH Setting-Specific**
- Patient Assessments
- Data Segmentation/Consent Management

**For some LTPAC and BH Providers**
- Clinical Reconciliation
- Clinical Health Information
- Labs/Imaging
- Medication-related
- CPOE
- Clinical Decision Support
- Quality Measures
- Patient Engagement
- Advance Care Planning
- Data Portability
- Public Health - Transmission to Immunization Registries
Step 2 Recommendations: Health IT Certification for LTPAC and BH

Transitions of Care - LTPAC and BH providers should adopt health IT that is certified by ONC for transitions of care. Beginning with the criteria in the 2014 Edition, transitions of care certification criteria for LTPAC and BH settings should align with the transition of care certification criteria for the EHR Incentive Programs.

HITPC notes that all settings—including settings outside of MU such as LTPAC and BH—should use the same transitions of care certification criteria and standards to promote interoperability and improved care coordination.

Privacy and Security – LTPAC and BH providers should adopt health IT that is certified by ONC for privacy and security. Beginning with the criteria in the 2014 Edition, privacy and security certification criteria for LTPAC and BH settings should align with the privacy and security certification criteria for the EHR Incentive Programs.

HITPC notes that all settings—including settings outside of MU such as LTPAC and BH—should use the same privacy and security certification criteria and standards to ensure that all systems have the same core set of protections within their systems.
Step 2 Recommendations:
Health IT Certification for LTPAC and BH (Cont.)

LTPAC Patient Assessments - Support the use of ONC specified HIT standards for the CMS-mandated patient assessments (for example, the MDS for nursing facilities and OASIS for home health agencies) that are required in these care settings. This will enable reuse of data for clinical and administrative purposes.

ONC should partner with CMS to align the standards to support re-use and exchange of the information in these assessments. A certification criterion was not recommended at this time because of additional standards and workflow work needed to support the interoperable exchange of patient assessment data with other provider types.

BH Patient Assessments – Future work was recommended to identify standards which could support BH patient assessments by identifying the most useful data elements from existing assessments.

Trend Tracking - 1) Track national trends in LTPAC and BH health IT adoption, including use by functionality and by certification criteria; and

2) Utilize EHR adoption definitions consistent with those used in other ONC/CMS initiatives. Such tracking would provide baseline data and enable monitoring of EHR adoption and use among LTPAC and BH providers.
Recommendations for ALL Providers

Transitions of Care

- Support the ability to receive, display, incorporate, create and transmit summary care records with a common data set in accordance with the Consolidated Clinical Document Architecture (CCDA) standard and using ONC specified transport specifications. (reference: §170.314(b)(1), 45 CFR §170.314(b)(2))

<table>
<thead>
<tr>
<th>Focus Area</th>
<th>Type</th>
<th>Provider Use Effort</th>
<th>Standards Maturity</th>
<th>Development Effort</th>
</tr>
</thead>
<tbody>
<tr>
<td>Care Coordination</td>
<td>ALL Providers - Primary Care Hospital Specialty LTPAC BH</td>
<td>High</td>
<td>1. High (MU2 TOC standards)</td>
<td>High</td>
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<td></td>
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<td></td>
<td>2. Low (Emerging TOC, care planning standards)</td>
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Recommendations for ALL Providers

Privacy and Security

- Support existing ONC-certified Privacy and Security requirements:
  - § 170.314(d)(1) - Authentication, Access Control, and Authorization
  - § 170.314(d)(2) - Auditable Events and Tamper-Resistance
  - § 170.314(d)(3) - Audit Report(s)
  - § 170.314(d)(4) - Amendments
  - § 170.314(d)(5) - Automatic Log-Off
  - § 170.314(d)(6) - Emergency Access
  - § 170.314(d)(7) - End-User Device Encryption
  - § 170.314(d)(8) - Integrity
  - § 170.314(d)(9) – Optional: Accounting of Disclosures
- HHS should support educational awareness initiatives for LTPAC/BH providers, incl. how certification supports the technological requirements of HIPAA, however, compliance with HIPAA requires actions that extend beyond the ONC-certified privacy and security criteria.

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<th>Standards Maturity</th>
<th>Development Effort</th>
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</thead>
<tbody>
<tr>
<td>Privacy and Security</td>
<td>ALL Providers – Primary Care, Hospital, Specialty, LTPAC, BH</td>
<td>Low</td>
<td>High</td>
<td>Low</td>
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Support the use of ONC specified HIT standards for a subset of patient assessment data to enable its reuse for clinical and administrative purposes (e.g., exchange of the LTPAC Assessment Summary CDA document)

Examples of relevant CMS patient assessments include: MDS 3.0 (Nursing Homes), OASIC-C (Home Health), IRF-PAI (Inpatient Rehabilitation Facility), Long Term Care Hospital CARE data set

FUTURE WORK

Harmonization of federal content and format for patient assessments with ONC specified HIT standards (e.g. consistent standards on demographics).

Make the CMS data element library publically available and link content to nationally accepted standards.

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</thead>
<tbody>
<tr>
<td>Care Coordination</td>
<td>LTPAC</td>
<td>Medium</td>
<td>Medium (some mapping to MU2 standards, standards not widely adopted by LTPAC)</td>
<td>High</td>
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FUTURE WORK:

• The Policy Committee recommends identification of vocabulary standards and data definitions to support behavioral health patient assessments.

• The Policy Committee recommends the analysis of available standards and provide clarification on which standards are applicable to behavioral health patient assessments. If gaps exist, expand upon existing standards to develop relevant certification criteria for this purpose.

Available standards:
HL7 Implementation Guide for CDA® Release 2: Patient Assessments, Release 1

HL7 Version 3 Domain Analysis Model: Summary Behavioral Health Record, Release 1 – US Realm
Recommendation on Tracking Trends

• **Track Trends:** ONC should track national trends in LTPAC and BH health IT adoption. Such efforts should include tracking use by functionality and by certification criteria.

• **National Survey Data:** ONC should utilizing EHR adoption definitions for LTPAC and BH, as applicable, that are consistent with those used in ONC/CMS initiatives.
Criteria Addressed by Other HITPC WGs

**Data Segmentation:** The Certification and Adoption Workgroup requested that the HITPC Privacy and Security Tiger Team examine and provide recommendations to the HITPC regarding data segmentation for privacy (DS4P) certification criteria. The DS4P recommendations will be released separately by the Tiger Team.

**Quality Measurement:** The Certification and Adoption Workgroup requested that the HITPC Quality Measurement Workgroup examine opportunities for the certification of LTPAC and BH health IT criteria related to quality measurement.

- No final recommendation at this time. QM WG agreed that their May 6th draft recommendations provide a starting point for further exploration. The recommendations will not be finalized at this time, but could serve as a foundation for more exploratory work.
ONC certification for LTPAC and BH should support a modular, voluntary approach.

Functionality may be of value to SOME care settings depending on care delivery needs and scope of practice.

LTPAC and BH providers have different needs; criteria should be evaluated independently for each setting.

Recommendations in this category are based on ONC 2014 Edition certification criteria.

There may be federal/state programmatic reasons for adopting certification functionality; in this instance, certification would serve as a ‘baseline’.

Workgroup discussion focused on added value of certification for these functions; no consensus reached.