Implementation, Certification, and Testing (ICT) Workgroup

2015 Edition Certification NPRM
HITSC Report Out

June 24, 2015

Liz Johnson, co-chair
Cris Ross, co-chair

Current Membership

Health IT Standards Committee
A Public Advisory Body on Health Information Technology to the National Coordinator for Health IT

Name	Organization
Cris Ross, co-chair	**Mayo**
Liz Johnson, co-chair	**Tenet Healthcare Corporation**
Sarah Corley	QSI NextGen Healthcare
David Kates	The Advisory Board Company
Udayan Mandavia	iPatientCare
Kyle Meadors	Drummond Group Inc.
Rick Moore	National Committee for Quality Assurance
Andrey Ostrovsky	Care at Hand
Danny Rosenthal	Inova Health System
John Travis	Cerner Corp.
Steve Waldren	American Academy of Family Physicians
Zabrina Gonzaga	Lantana
Kevin Brady, Federal Ex officio	National Institute of Standards and Technology
Brett Andriesen, staff lead	Office of the National Coordinator for Health IT

Standards Prioritization Recommended for Adoption

- Gap Certification Eligibility Table
  - Minimize the variability across ACBs & ATLs
- Common Clinical Data Set Definition –
  - Generally supportive but inclusion of unique device identifier (UDI) problematic
- The ONC Health IT Certification Program and Health IT Module
  - Should clearly articulate what “field surveillance of a deployed system” would entail
- Generally Supportive of the following:
  - Open Data Certified Health IT Product List (CHPL)
  - Retesting & Certification
  - Design and Performance
  - "Removal” of Meaningful Use Measurement Certification Requirements

Standards Prioritization
Do Not Adopt at this time, 1 of 2

- Unique Device Identifier (UDI)
  - Problematic for a number of reasons particularly for ambulatory practices
- Immunizations mapped to NDC codes
- Consolidated CDA Creation Performance
  - C-CDA good concept but more clarity & version constraint needed
    - We are in favor of C-CDA clarity and constraint but not of the creation performance requirements
    - Adopt C-CDA 2.1
    - Recommend against requiring all the document templates to be mandatory. (List of document types)
- Base EHR Definitions
  - Consolidate redundant criteria (b)(6) and (g)(7, include security criteria 170.315(d)(1)-(8), consumer access optional
- Safety Enhanced Design
  - Do not require recruitment of clinical end users for testing, reduce testing burden
- Web Content Accessibility Guidelines
  - Postpone raising WCAG level to 2.0 Level AA due to lack of quality compliance test tools

Standards Prioritization
Do Not Adopt at this time, 2 of 2

- Request for Comment on Summative Testing
  - Should not be required, but offered as an option
- Encounter Diagnoses
  - ONC clarify that this is meant to be the "billing diagnoses" and whether necessary to include all billing diagnoses for encounters or simply the primary one
- Medication Dosing
  - Recommend against adoption as worded. No problem with limiting the display of sig fields to metric units only as long as they are pushing to remove non-metric as an option.
- Implantable Device List
  - Most devices are not inserted in an ambulatory environment
- Pharmacogenomic data standards
  - We are recommending to not adopt any pharmacogenomic standards as they are not mature.
- Data Portability
  - We recognize the vital importance of data portability and interoperability, and the need to promote and enable both
  - We recommend against adopting specific standards to enable broad generic data portability because of the complexity involved
  - We recommend adopting standards for bulk export of C-CDAs
- Automated Numerator Recording & Automated Numerator Calculation
  - There should be no requirement for automated numerator recording for any measure where to do so would require additional clinical documentation that's not necessary for patient care

Recap and Next Steps on 2015 Draft Test Procedures Review

- During the June 1, 2015 workgroup meeting, an overview of the 2015 Edition Draft Certification Criterion was presented
  - Team leads were identified to review specific test procedures
- During the June 17, 2015 workgroup meeting 5 Certification Criterion were reviewed
- Additional Criterion will be reviewed prior to workgroup ending in August 2015 and final recommendations will be presented for approval by Standards Committee

Test Procedure Assignments

Criteria Number	Criteria Description	Review Lead
§ 170.315(a)(10)	Clinical Decision Support	Sarah Corley
§ 170.315(b)(1)	Transitions of Care	John Travis
§ 170.315(b)(2)	Clinical Information Reconciliation & Incorporation	John Travis
170.315(e)(1)	View, Download and Transmit	Sarah Corely
§ 170.315(b)(6)	Data Portability	David Kates
§ 170.315(b)(3)	Electronic Prescribing	John Travis
§ 170.315(c)(1)	Clinical Quality Measures – record and export	John Travis
§ 170.315(g)(6)	Consolidated CDA Creation Performance	David Kates
§ 170.315(a)(19)	Patient Health Information Capture	Sarah Corley
§ 170.315(a)(2)	CPOE – laboratory	Sarah Corley
§ 170.315(a)(20)	Implantable Device List	David Kates
§ 170.315(g)(7)	Application Access to Common Clinical Data Set	David Kates