2016
Interoperability Standards Advisory
Draft for comment

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Agenda

- What is it again?
- Where are we in the process?
- What's changed?
- What's up next?

What is it: Interoperability Standards Advisory

- **Scope = clinical health IT interoperability**
- **Non-regulatory, straight-forward approach with an interactive, predictable process for updates**
- **Reflects "best available" standards and implementation specifications as of end of the calendar year**
- **Designed to create common ground**
  - To get specific
  - To provide a single, public list of the standards and implementation specifications to fulfill specific clinical health information technology interoperability needs
  - To reflect the results of on going dialogue, debate, and consensus
  - To document known limitations, preconditions, and dependencies among referenced standards and implementation specifications
- **Overall Goal**
  - A widely vetted resource – in one place, done right (before/without regulation)
  - Enable a "look first" philosophy for government programs, procurements, testing or certification programs, standards development, etc.

Interoperability Standards Advisory (Ideal) Process

December of Preceding Year

- The new Interoperability Standards Advisory for the next calendar year is published (e.g., December 2015 for the 2016 Advisory) and public comment period is opened.

April/May

- ONC staff present a summary of received comments to the HIT Standards Committee (or designated Task Force) in order to prepare them to make recommendations on updates for the following year's Interoperability Standards Advisory.

August

- The HIT Standards Committee submits recommendations to the National Coordinator concerning updates to the following year's Interoperability Standards Advisory and a second round 60-day public comment is opened on the HIT Standards Committee's recommendations.

October-December

- ONC reviews the HIT Standards Committee recommendations as well as public comments on those recommendations and prepares the next year's Interoperability Standards Advisory for publication.

What's changed?
2016 ISA Draft for Comment

- **Major Restructuring**
  - **Changed "Purpose" to "Interoperability Need"**
  - **Added "Emerging" row for standards and implementation specs**
  - **Removed "Transport" Section**
  - **Inserted Appendix that contains "Sources for Security Standards"**
  - **Added six "informative characteristics" for each standard and implementation specification**
    - Standards Process Maturity (Final, Draft)
    - Implementation Maturity (Production, Pilot)
    - Adoption Level (Scale between 1-5)
    - Regulated (Yes, No)
    - Cost (Yes, No)
    - Test Tools (Yes, No)
  - **Added additional context structure**
    - Limitations, Dependencies, Preconditions and Other Qualifying Information (free text)
    - Security Patterns (free text)
  - **Revision history**

2016 "BETA" Version ISA
New Table Format -- Structure

Interoperability need: [Text]

Standard/ Implementation Specification	Standards Process Maturity	Implementation Maturity	Adoption Level	Regulated	Cost	Test Tool Availability
Standard	Final	Production	●●●●○	Yes	Free	Yes
Emerging Alternative Standard	Draft	Pilot	●○○○○	No	Free	No

Limitations, Dependencies, and Preconditions for Consideration:	Applicable Security Patterns for Consideration:
• Descriptive text with "(recommended by the HITSC)" included in cases where the HITSC recommended the text, and on which public feedback is sought.	• Descriptive text

Example:

II-O: Summary care record

Interoperability Need: Support a transition of care or referral to another provider

Type	Standard/Implementation Specification	Standards Process Maturity	Implementation Maturity	Adoption Level	Regulated	Cost	Test Tool Availability
Standard	HL7 Clinical Document Architecture (CDA®), Release 2.0, Final Edition	Final	Production	●●●●●	No	Free	No
Implementation Specification	Consolidated CDA® Release 1.1 (HL7 Implementation Guide for CDA® Release 2: IHE Health Story Consolidation, DSTU Release 1.1 - US Realm)	Draft	Production	●●●●●	Yes	Free	Yes
Emerging Alternative Implementation Specification	HL7 Implementation Guide for CDA® Release 2: Consolidated CDA Templates for Clinical Notes (US Realm), Draft Standard for Trial Use, Release 2.1	Draft	Pilot	Unknown	No	Free	No

Limitations, Dependencies, and Preconditions for Consideration:	Applicable Security Patterns for Consideration:
• **There are several specific document templates within the C-CDA implementation specification. Trading partners will need to ensure that their systems are capable of supporting specific document templates.**	• Feedback requested

Other Task Force Recommendations - Disposition

- Principles are being built into new processes – adopted incrementally into operations
- Recommendations to convene groups to address specific sections/standards are being considered but not yet fully addressed
- Several additions and changes to standards and implementation guides
- Other recommendations are being considered incrementally

Public Comment

- Please review and comment on the 2016 Interoperability Standards Advisory
  - posted on healthit.gov
  - https://www.healthit.gov/standards-advisory/2016

- 45 day public comment period closes at:

  5pm ET on Friday, November 6, 2015