S&I Framework Update

HIT Standards Committee

March 26, 2014

Doug Fridsma, MD, PhD, FACP, FACMI
Chief Science Officer & Director, Office of Science & Technology

S&I Framework Operating Metrics

Timing

Framework Launch Date	Jan 7, 2011
First Initiative Launch Date	Jan 31, 2011
Elapsed Time since Initiative Launch (as-of today)	37 months

Participation & Process

# Wiki Registrants	3,007
# Committed Members	757
# Committed Organizations	580
# Working Sessions Held	2,171
S&I Face to Face meetings	3
Standards Organizations engaged	35
S&I Monthly Newsletter Editions	25
SDS Newsletter Subscribers	1,928

Outputs

# Consensus Approved Use Cases	22
# Pilots Committed	39
# Pilot Vendors	42
Total Ballots	28
# Total HL7 Ballot Comments Received	5,638
# HL7 Ballot Comments Resolved	5,385

S&I Initiative Portfolio Snapshot

	Pre-Discovery	Use Case	Harmonization	RI, Test & Pilot	Evaluation
Direct Project (S&I Archetype)					*In production*
Transitions of Care				*C-CDA Companion Guide for Meaningful Use balloted in September 2013 and is now under ballot reconciliation; Target publication date is early Q2*	
Lab Results Interface				*IG & Second Errata Published; 2014 CEHRT In Progress*	
Query Health				*Pilots completed, QRDA III & HQMF R2 Published*	
Data Segmentation for Privacy			*Pilots in Evaluation, IG in normative publication with HL7, Supplement in IHE SDO ownership and draft is now available for public comment*		
Public Health Reporting	*Community Led, PHRI Framework and CDA guide published; 5 Pilot projects conducted; started Monthly Informational Webinar Series "Wednesday's with PHRI"; started review of phase 2 use stories; community will be meeting on a bi-weekly basis*				
esMD	*HL7 Digital Signatures IG is DSTU, Complete Documentation Templates IG HL7 off-cycle ballot reconciliation begins 3/28; Initiating Pilots; AoR L2 S&I IG is in E2E Review; eDoC X12 278 Companion Guide near completion.*				

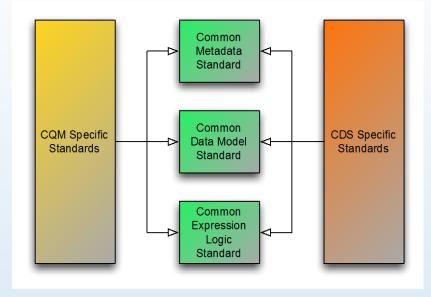# S&I Initiative Portfolio Snapshot, continued

	Pre-Discovery	Use Case	Harmonization	RI, Test & Pilot	Evaluation
Longitudinal Coordination of Care	*Community-Led; 2 Use Cases Complete: Transfer Summary and 'Care Plan'; LCP, LTPAC & PAS SWGs Complete; C-CDA updates for Sept HL7 Ballot ready by Spring 14; Pilots SWG launched 9/16; Full Implementation of C-CDA Care Plan standards in NY*				
Laboratory Orders Interface				*LOI IG and eDOS IG published December 2013; Reviewing LOI IG errata*	
Health eDecisions	*Use Case 2: Balloted 5 HL7 specifications in September 2013 for CDS Guidance Service UC; Published artifacts on 12/19; Re-balloted 3 Informative artifacts as DSTU in January 2014, ballot reconciliation* **Use Case 1**: *Pilots Complete, Published CDS KA IG on 12/24;* *completed on 3/7*				
Blue Button Plus			*BB+ Direct (Push) & BB+ RESTful (Pull) Guidance complete – focus is on implementation. Pilot WG is underway; Payer WG is finalizing Guidance*		
Structured Data Capture	*Use Case & Standards consensus complete. SOAP/SAML IG is finalizing Consensus and targeting publication on 3/17. Public Health User Stories and CDE/Form Content ID complete. IHE Content Profile Volume I complete. IHE Content Profile Volume III is undergoing development. Patient Safety & Adverse Events confirmed Epic as a pilot.*				
EU/US eHealth Cooperation	*Interoperability WG – completed phases 1-3 of Mapping; phase 4 (Value set mapping) in progress; Workforce Development WG – reviewing skills and roles in Direct Patient Care/Intermediate/Clinical bucket*				
Data Access Framework	*Local DAF Use Case reached consensus on 12/11/13. Targeted DAF Use Case reached consensus on 2/5/14. IHE white paper in public comment; S&I technical workgroup launched 3/5*				
PDMP – HIT Integration	*Project Charter consented on 12/31; Use Case launched 1/7 and currently completing final review*				
Clinical Quality Measures		*Initiative Launched on March 21, 2014.*			

Clinical Quality Framework Initiative Scope

- Much of the standards harmonization work is already underway in HL7 work groups.

- The Clinical Quality Framework S&I Initiative will promote wider visibility into the standards under development and provide additional implementation-based feedback, leading to more robust specifications.

Clinical Quality Framework Initiative Scope

- **To identify, define, and harmonize electronic standards that promote integration between CDS and eCQM** in the areas of:
    - Metadata: Identify common metadata across the two domains and harmonize the identification and representation of that metadata.
    - Patient Data Model: Develop a patient data model that supports the requirements of eCQM and CDS.
    - Logical Expression Language: Develop a common expression language that can be used to define both CDS and eCQM logical expressions.
- **To refactor existing CDS and eCQM standards to utilize the harmonized standards**.
- To the extent possible, **to pilot the standards and refine them accordingly**.
- **To engage the clinical quality community to optimize the rigor and usability** of harmonized CDS and eCQM specifications.
- **To support the balloting and publication of the harmonized standards** with the Health Level Seven International (HL7) standards development organization.

Note: Out-of-scope items will be identified by the Clinical Quality Framework initiative team during the discovery phase.

PDMP & HIT Integration

Charter/Scope Summary

The purpose of this initiative is to bring together the PDMP and health IT communities to standardize the data format, and transport and security protocols to exchange patient controlled substance history information between PDMPS and health IT systems (i.e., EHRs/HIEs).

The initiative aims to allow system integrations that arms providers with PDMP data as part of their normal clinical workflow by:

- Connecting PDMPs to health IT systems (e.g. EHRs and HIEs) using existing standards;

- If standards do not exist, establishing standards for facilitating information exchange between PDMPs and health care providers; and

- Improving timely and convenient access to PDMP data by health care providers.

Leadership Team

- *Initiative Coordinator:* Johnathan Coleman, Sherry Green
- *ONC Leads:* Mera Choi, Jennifer Frazier, Helen Caton-Peters
- *SAMHSA Lead:* Jinhee Lee, Kate Tipping

Current Status

- Began final review of Use Case document on 3/11 which focuses on how a Healthcare Professional (Physician, Pharmacist, etc.) using a Health IT system (EHR, Pharmacy systems, etc.) can access a state PDMP to obtain prescription drug information for a patient

- Use Case Consensus will wrap up on 3/25 and introduction to Standards & Harmonization activities to start soon thereafter
- Initiated relevant candidate standards analysis and conducted outreach to SDOs and technical experts

Appendices – S&I Initiatives Underway

Structured Data Capture (SDC)

Charter/Scope Summary

This Initiative identifies the functional and technical specifications to enable an EHR system to retrieve, display, and fill a structured form or template, and store/submit the completed form to an external repository

Content Work stream SWGs

➢ Patient Safety Event/Adverse Event (PSE/AE) Pilot SWG; focus on identification of CDEs/Forms and execution of SDC Pilots

➢ Patient-Centered Outcomes Research (PCOR); focus on identification of CDEs/Forms and execution of SDC Pilots

➢ Public Health Tiger Team: focus on identification of CDEs and value sets for SDC PH Pilots

Technical Work stream SWGs

➢ Focused on development of four guidance areas: CDE Structure, Form/Template Structure, EHR-Interaction, and Auto-populate

Leadership Team

- *Initiative Coordinator*: Evelyn Gallego
- *ONC Lead*: Farrah Darbouze
- *SME (ONC):* Mark Roche, Amy Helwig
- *External SME:* Lisa Lang (NLM), Glenn Englemenn & Jon White (AHRQ), Mitra Rocca & Terrie Reed (FDA)
- *Community Lead:* Dr. Ken Pool (Standards SWG); Dr. Rory Jaffe (PSE/AE SWG)

Current Status

- Two Implementation Guides are targeted for development based on SOAP/SAML & HL7 FHIR Profile standards
    - SDC SOAP/SAML IG: Consensus achieved and final SOAP/SAML IG was published on 3/18/14.
        - Balloting through IHE Quality, Research and Public Health (QRPH) Framework as a Content Profile; Volume I of SDC profile passed face-to-face meeting on 2/14/14 Volume II & III development has started with a targeted interim review on 3/14/14
    - FHIR Profile IG: Will be balloted through HL7 starting in September 2014 in alignment with publication of HL7 FHIR Resources
        - "REST/OAuth IG" renamed to "SDC FHIR Profile IG" to reflect that it is a content profile based on FHIR resources; Targeted kick-off date is 3/20/14 where the in-depth project plan and timeline will be presented to the community
- IG Development WG for SDC FHIR Profile IG to be kicked off on 3/26/14
- Patient Safety Event/Adverse Event SWG: Launched on 2/3/14 in partnership with AHRQ & FDA; Epic has been confirmed as a pilot; SWG is curating and harmonizing PSE/AE CDEs; Workflow phase will kickoff 3/24/14.
- Public Health Tiger Team: *(Led by CDC/ONC)* Identifying funding opportunities for pilots; Collaborating with PSE/AE SWG to prepare for pilots.
- Forms SWG: *(Led by AHRQ & NLM)* Merged with IG Development Working Group as of 1/15/14 to continue work on SOAP/SAML IG
- Standards SWG: *recommendations transitioned to IG development Working Group as of 8/29/13*
- Charter approved through consensus on 3/15/2013. Use Case approved through consensus on 5/30/2013

Data Access Framework (DAF)

Charter/Scope Summary

The value of the DAF initiative will be demonstrated through two work streams that enable providers to access their own patient's data both locally and externally

Local Data Access: A standardized way for providers to access their own patient(s)' data within the health organizations internal Health IT system

Targeted Data Access: A standardized way for providers to access a *known* individual patient's data from an external organization

The Initiative will leverage existing industry standards to create a framework that demonstrates modularity and substitutability for a limited set of standards combinations based on identified business requirements of the community.

Leadership Team

- *Initiative Coordinator:* John Feikema
- *ONC Lead:* Mera Choi

Current Status

- DAF IHE/S&I Joint Technical Workgroup led by Keith Boone (IHE/PCC) and (Dragon) Nagesh Bashyam (S&I) White Paper has been finalized and approved for public comment on 3/10 outlining the Data Access Framework.
    - o The public comment period will begin late March and will conclude at the IHE Public Comment Meeting 4/28- 5/2 at RSNA headquarters in Oakbrook, IL
- Launched S&I Technical Workgroup on 3/5/14 led by (Dragon) Nagesh Bashyam for Document Metadata Based Access for both Local and Targeted Queries
- Local DAF Use Case 1 achieved consensus on 12/11/13
- Targeted DAF Use Case 2 achieved consensus on 2/5/2014

EU- US eHealth Cooperation Initiative

Charter/Scope Summary

Scope of project: To support an innovative collaborative community of public- and private-sector entities, including suppliers of eHealth solutions, working toward the shared objective of developing, deploying, and using eHealth science and technology to empower individuals, support care, improve clinical outcomes, enhance patient safety and improve the health of populations

Leadership Team

- *US:* Doug Fridsma, Mera Choi
- *EU:* Frank Cunningham, Benoit Abeloos

Current Status

- Interoperability Work Group
  - Completed Section level mapping as well (Phase 1), Header Data Element mapping (Phase 2), and Section Data Element mapping (Phase 3); Finalizing Value Set mapping (Phase 4)
  - Clarified changes in scope of harmonization deliverables, and consulting SDOs (ISO, HL7, CEN) on impact of changes on balloting timelines, and cross-SDO collaboration processes
  - Internally reviewing HL7 Project Scope Statement, and EU-US Roadmap
  - Discussed potential for provider-mediated demo with Kaiser Permanente, and patient-mediated demo with GenieMD at Athens eHealth week (May 12-14); Continuing efforts to align demo activities with Trillium Bridge project
- Workforce Development
  - Continued reviewing skills in Direct Patient Care/Intermediate/Clinical Bucket with the community (deleted, added, reclassified, and reworded skills); Community commented on 1/3 of skills (395/1207 skills)
  - Proposed panel discussion at Athens eHealth week as output of WG, and asked for volunteers to participate in the panel
  - Discussed potential to launch a SWG with select community members to accelerate the Skill-Bucket mapping process until Athens

Longitudinal Coordination of Care (LCC)

Charter/Scope Summary

This initiative will identify and validate a standards-based longitudinal care management framework built around the needs and experience of the patient respective to:

- The Patient Assessment Summary (PAS) or LTPAC Summary document leveraging the Minimum Data Set (MDS), Outcome and Assessment Information Set (OASIS) and Care Tool datasets

- A more robust Transition of Care (ToC) dataset required by Care Team 'receivers' building off the S&I ToC dataset

- The Care Plan/Plan of Care documents used to coordinate patient care across multiple settings and disciplines

LCC PAS SWG, LTPAC SWG, LCP SWG completed in 2013.

Leadership Team

- Initiative Coordinator: Evelyn Gallego

- Workgroup Leads: Larry Garber, Terry O'Malley, Sue Mitchell, Bill Russell, Jennie Harvell, Russ Leftwich

Current Status

- LCC Pilot WG launched 09/16/2013; NY Downstate Care Coordination Project went LIVE with C-CDA Care Plan standards NOV2013; MA IMPACT scheduled to go-live with C-CDA Transfer Summary standard in MAY2014; New pilots scheduled for Spring 2014: GSI Health, CCITI-NY; Successful Care Plan exchange demonstrations HIMSS Interoperability Showcase FEB14

- Revised the C-CDA to support Transitions of Care and Care Plan Exchange for the HL7 Fall Ballot cycle (Ballot Period 8/12 – 9/16/2013). Currently in the HL7 Ballot Comment Reconciliation phase (999 of 1013 comments have been reconciled thus far). Targeting Spring 2014 for publication.

- Developed and submitted recommendations to align Care Plan exchange efforts with various HL7 WGs (Patient Care WG, SOA Care Coordination Services)

- Coordinating Care Plan standard development activities with other SDO and Federal Care Plan activities (HL7 Patient Care WG, IHE Patient Care Coordination Technical Committee, AHIMA LTPAC HIT Collaborative, CMS esMD, Blue Button +)

Public Health Reporting Initiative (PHRI)

Charter/Scope Summary

The PHRI develops and implements a standardized approach to electronic public health reporting from EHR systems to local, state and federal public health programs that addresses the needs of various reporting use cases, with the long-term goal of reducing the difficulty (to both providers and public health agencies) of implementing electronic versions of the broad spectrum of public health reporting.

Community-Lead Initiative Leadership Team

- **Co-leads:** Dina Dickerson, Riki Merrick, Anna Orlova, and Walter Suarez

Current Status

- Artifacts completed by the **PHRI Phase I (September 2011-June 2013)** to date include:
  - o Public Health Reporting Initiative Reference Implementation Framework – Reference document on interoperability standards for several public health programs
  - o PHRI CDA Guide - Specifies CDA structure for public health report for *Communicable Diseases* and *Adverse Events*
  - o PHRI Standards Testing and Pilots Demonstration – A PHRI web page with documentation on testing or pilot projects demonstrating the use of interoperability standards referenced in the PHRI Reference Implementation Framework
- In June-September 2013, PHRI continued coordinating its work with the Structured Data Capture Public Health Tiger Team (SDC PH Tiger Team) to plan SDC pilot projects for three domains/programs included in the PHRI Reference Implementation Framework: Early Hearing Detection and Intervention (EHDI), Cancer Surveillance, and Communicable Disease Reporting. EHDI (a collaboration between PHRI and CDC EHDI Program) was selected as the top program by the SDC PH Tiger Team to move forward piloting
- On September 25, 2013 **PHRI started Phase II (September 2013 – August 2014)**, that will focus on
  - o Analysis of new user stories for public health reporting and bi-directional data exchange between clinicians and public health
  - o Harmonization of data sets across these stories
  - o Analysis and harmonization of standards to support data exchanges under these stories
  - o Educational Campaign on the existing standards used in Public Health
- PHRI will continue collaborative support for the SDC PH Tiger Team and will also reach out to other S&I Initiatives in support of their work related to public health

Blue Button Plus

Charter/Scope Summary

Consumers want to be empowered to be more engaged in their health and healthcare.

Through the Blue Button, consumers want the ability to exercise more access to and portability of their health care information. With the right privacy and security assurances, they want to be able to:

- Better understand their health and make more informed decisions

- Help to make sure that they and all of their care team members are on the same page

- Improve the accuracy and completeness of the information

- Plug it into apps and tools that promise to make information truly available, when and where it's needed

Leadership Team

- Initiative Coordinator: Rebecca Mitchell Coelius

- Presidential Innovation Fellow: Nayan Jain

- Community Lead (REST Pilots): Josh Mandel

- Community Lead (Payer WG): Durwin Day

Current Status

- BlueButton+ DIRECT (Push) Implementation Guidance, Privacy & Security Guidance, and Clinical Content Guidance is complete.

- BlueButton+ RESTful (Pull) API Guidance is complete and Pilots WG for BB+ RESTful API is underway

- Pilots REST API workgroup completed one pager overview, pilot inventory and active status of registered apps against server.

- Payer workgroup is finalizing the Payer Implementation Guidance, including data elements and requirements; preparing for Pilot activities; in the process of developing Draft HL7 Project Scope Statement in preparation for May submission deadline.

Health eDecisions (HeD)

Charter/Scope Summary

To identify, define and harmonize standards that facilitate the emergence of systems and services whereby shareable CDS interventions can be implemented via:

- Standards to structure medical knowledge in a shareable and executable format for use in CDS, and

In order to facilitate integration of a system with CDS interventions, the scope includes standards to refer to data in electronic health records and standards to map recommendations to locally implementable actions.

Leadership Team

- **Initiative Coordinators:**
  - *Lead Coordinator:* Ken Kawamoto
  - *ONC Coordinators:* Jacob Reider & Alicia Morton
  - *SMEs/Co-Coordinators:* Aziz Boxwala & Bryn Rhodes

Current Status

The HeD Initiative will wrap up on March 27, 2014

- **Work stream 1: HL7 ballot for Use Case 1:** CDS Knowledge Artifact Implementation Guide published on 12/24

- **Work stream 2: Pilots:** All Pilots for UC 1 are complete; Pilot activities for UC 2 are under reiview

- **Work stream 3: Use Case 2**
  - Submitted Decision Support Service (DSS) Implementation Guide (IG), DSS Standard, Virtual Medical Record for Clinical Decision Support (vMR-CDS) Templates, vMR-CDS Logical Model and vMR-CDS XML IG for an off-cycle ballot 8/30
    - DSS Standard and DSS IG passed with 100% affirmative votes, vMR XML IG with 90%, vMR Templates with 80%, and vMR Logical Model with 73%
    - Completed 100% ballot reconciliation for all artifacts on 11/26
    - Published three VMR and two DSS artifacts on 12/19
  - All Informative artifacts (vMR XML IG, vMR Templates, and vMR Logical Model) were re-balloted as DSTU in an off-cycle ballot in January 2014
    - vMR Logical Model passed ballot with 67% affirmative votes, vMR Templates passed ballot with 74% affirmative votes, and the vMR XML IG passed ballot with 81% votes
    - Completed 100% ballot reconciliation for all artifacts on 3/7
  - Target date for submission of publication of DSTU artifacts is 3/28

Data Segmentation for Privacy (DS4P)

Charter/Scope Summary

Enable the implementation and management of disclosure policies that originate from the patient, the law, or an organization, in an interoperable manner within an electronic health information exchange environment, so that individually identifiable health information may be appropriately shared for: 1) Patient treatment and care coordination; 2) Third party payment; 3) Analysis and reporting for operations, utilizations, access quality and outcomes; 4) Public health reporting; 5) Population health, technology assessment and research.

Leadership Team

- Initiative Coordinator: Johnathan Coleman
- ONC Leads: Julie Chua

Current Status

- Planning to transfer initiative to be entirely community led over next few months; final all-hands call tentatively scheduled for 4/21/14

- Presented to HITPC Privacy & Security Tiger Team on 3/10/14. A follow-up presentation is scheduled for 4/24/14.

- Data Segmentation for Privacy (DS4P), Release 1 (DIRECT and eHealth Exchange IGs) balloting closed 1/20/14 with (38 Affirmative, 9 Negative, 80 Abstain). It will be published as Normative and the materials will be made available no later than March 6th

- HL7 DS4P Consent Directive: A Notice of Intent to Ballot (NIB) has been submitted for DSTU. The standard will be voted on as normative in the May 2014 ballot cycle. The ballot sign-up closes March 27th and voting begins March 28th.

- IHE CP-690 and the IHE DS4P Supplement are being finalized for public comment (time frame TBD). The draft of the supplement has been posted on the IHE FTP site: IHE DS4P Supplement for Public Comment

- There are six pilots: VA/SAMHSA, SATVA, NetSmart, Jericho Systems-UT Austin, Greater New Orleans HIE (GNOHIE) and TeraDact. The SATVA pilot will incorporate DS4P (using Direct) with Cerner's Anasazi BH system; demonstrated capabilities at HIMSS2014 and intends to be in production by 3Q 2014—by the end of this quarter will be included as part of their MU2 release. SAMHSA's Consent2Share pilot will not be considered the formal DS4P pilot. The NETSMART pilot has implemented a two part DS4P solution with the referral network in Tampa Bay

Laboratory Results Interface (LRI)

Charter/Scope Summary

- The Laboratory Results Interface Initiative focuses on identifying the requirements, specifications and standards, and on providing the implementation guidance for electronic reporting of ambulatory care laboratory test results in the US Realm

Leadership Team

- *Initiative Coordinator:* John Feikema
- *Workgroup Leads:* Ken McCaslin and Hans Buitendijk

Current Status

- Use Case Consensus Dates
  - LRI Use Case: May 5, 2011
  - Abbreviated Public Health Reporting Use Case: June 15, 2011

- LRI IG DSTU
  - First errata was released on October 8th, which includes a set of recommended corrections and modifications for incorporation into the currently published document
  - Second errata approved for publication in April 2013
  - As of Jan. 8, 2013, LRI Pilots were completed and Validation Suite Tool was released for 2014 CEHRT

Laboratory Orders Interface (LOI)

Charter/Scope Summary

The Laboratory Orders Interface (LOI) Initiative is focused on the creation of an Implementation Guide (IG) for the ambulatory setting that builds on the architecture and design of the California HealthCare Foundation's ELINCS Laboratory Orders and the S&I Framework Laboratory Results Interface Initiative.

Further, the Initiative seeks to design an IG that can serve as a foundation for eventual use in acute care and public health and incorporate vocabulary consistent with the above mentioned guides as well as support for the upcoming HL7 Version 2 Implementation Guide: Laboratory Test Compendium Framework, Release 2 (eDOS).

Leadership Team

- ***Initiative Coordinator:*** John Feikema
- ***LOI Workgroup Leads:*** Hans Buitendijk and Ken McCaslin
- ***eDOS Workgroup Leads:*** Freida Hall and John Mooney

Current Status

- LOI IG
  - o Out-of-cycle ballot took place from June-July, 2013 and was completed on July 19, 2013
  - o LOI IG: Ballot reconciliation completed November 2013; Publication date December 2013
  - o eDOS IG: Ballot reconciliation completed December 2013; Publication date November 2013
  - o DSTU ballot set to expire in July, 2014- plan to request extension from HL7

- Laboratory Pilots
  - o Lab pilot calls completed
  - o Kicking off new WG, LOINC Order Codes, to focus on enhancement of LOINC codes for commonly ordered lab tests

esMD – Electronic Submission of Medical Documentation

Charter/Scope Summary

This Initiative intends to replace various, current paper documentation and processes with an electronic alternative for Providers to submit to Payers.

- Address the registration process, technical transport and authentication needed to allow Payers to identify Providers and send requests to them (PPA WG – Use Case 1)

- Determine the structured electronic format of medical document request letters to be sent to Providers, with consideration for the technical transport, expected response and information needed to support the response (PPA/SC WGs – Use Case 2)

- Digital Signature needs for this initiative will be addressed as part of Author of Record Level 1, 2 and 3 Use Cases (AoR WG – AoR L1 Use Case, AoR L2 Use Case)

- Define data sets, templates and standards in providing guidance with decision support, enabling provider capture of required structured documentation, and securely exchanging for benefit determination based on Health Plan/Payer's coverage and payment rules (eDoC WG – eDoC Generic Use Case)

Leadership Team

- Initiative Coordinator: Robert Dieterle
- CMS Lead(s): Dan Kalwa, Kathleen Wallace
- Co-Workgroup Leads: Dr. Mark Pilley, Dr. Viet Nguyen

Current Status

- Author of Record Level 2 HL7 Digital Signatures CDA IG ballot reconciliation is complete and a final IG has been submitted to HL7 for publishing. The IG is now a DSTU.

- eDoC Structured Data SWG submitted the Complete Documentation Templates IG for an off-cycle HL7 ballot (sponsored by the Attachments and Structured Data HL7 WGs). Ballot reconciliation begins 3/28.

- eDoC General Use Case (X12 275 and 278 Companion Guides) and Author of Record Level 2 S&I Framework IGs are in development

- eDoC Home Health User Story launch planned for 4/2

- esMD Pilots efforts have launched for PPA, AoR L1/L2, and for e-Clinical Template for PMD. LLP Pilots will be launching shortly

Questions/Discussion

ONC website:

www.healthit.gov/

S&I Framework Wiki:

http://wiki.siframework.org/

Transitions of Care (ToC)

Charter/Scope Summary

- Create a migration path to greater interoperability by producing a toolset to aid in development and validation of uniform clinical documents, which has hindered widespread standards adoption

- Support Meaningful Use Stage 1 summary of care (Eligible Provider, Eligible Hospital, and Critical Access Hospital) requirements for transition of care/transition of care to consumer

- Support Meaningful Use Stage 2 requirements

Leadership Team

- *Initiative Coordinator:* John Feikema

Current Status

- ToC Use Case Work Groups have completed work
- The C-CDA Companion Guide was balloted during the September 2013 HL7 WGM and is undergoing the initial stages of ballot reconciliation to address the comments received phase (66+ of 107 negative comments have been reconciled thus far). This artifact is targeted for publication in early Q2 of 2014.
- Currently monitoring the Structured Documents WG for S&I Framework projects providing updates to the C-CDA in the September HL7 ballot and working to ensure a greater understanding of those updates and how they will impact the standard

Provider Directories (PD)

Charter/Scope Summary

Health information exchange requires a mechanism to obtain a digital certificate or security information (public keys) and electronic service information including electronic addresses. A scalable and standardized solution will be needed in order to efficiently, accurately, and reliably query and obtain digital certificates or security information (public keys) and electronic service information including electronic addresses to enable health information exchange. Two work streams took place within the Provider Directories Initiative:

- Certificate discovery for Direct Project with a known Direct Address

- Electronic Service Information discovery (including Electronic Addresses) with some known basic provider attributes

Leadership Team

- ***Initiative Coordinator:*** John Feikema

Current Status

- Provider Directory Work Group has completed their work; S&I Initiative is Closed

- Outcomes of this initiative are now addressed via OST's Mod Specs work (Phases 3 & 4)

Query Health (QH)

Charter/Scope Summary

Distributed queries approaches to date have relied upon dedicated experts exploring standards and services to best utilize data from distributed systems. The value of the Query Health Initiative will be to lower the barrier using consensus-based standards and specifications to support queries for population based/aggregated data from certified EHRs and other community records. The initiative will provide a standardized clinical element data dictionary to support implementable, high-value user stories, based on available, shareable and standardized information from EHRs and other patient care systems. The initiative will also provide extensible 'Query' and 'Return Results' standards and services, enabling interoperability between and among information requestors and data sources.

Leadership Team

- *Initiative Coordinator:* John Feikema

Current Status

- Use Case Achieved Consensus on 11/16/11
- Pilots:
  - MDPHnet pilot is live as of 10/30/12
  - NYC/NYS pilot is live with test data as of 2/27/13
  - FDA pilot is live and able to query their partner, Beth Israel
  - Allscripts is in the planning stage
  - Appalachian Primary Care Research Network (AppNET) may be targeted to be a DAF pilot instead of QH
- QRDA Cat III DSTU Release 1 was published on 11/28/12
- Finalizing pilot feedback and incorporating findings into a summary report
- HQMF R2 completed ballot reconciliation 10/31/13; Submitted to TSC; Publication target December 2013