

# Health IT Policy Committee

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



## AGENDA

### HIT Policy Committee

#### Jason Task Force – Listening Session

Tuesday, August 5, 2014 10:00 a.m. – 1:00 p.m. ET

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- 10:00 a.m. Call to Order/Roll Call**
- *Michelle Consolazio, Office of the National Coordinator*
- 10:05 a.m. Review of Agenda and Opening Remarks**
- *David McCallie, co-chair*
  - *Micky Tripathi, co-chair*
- 10:10 a.m. Panel 4: Consumer Facing Ecosystems**
- *Ali Emami, HealthVault*
  - *John Mattison, Kaiser*
  - *Kevin Riddleberger and Patrick Leonard, iTriage*
  - *Gordon Raup, Datuit*
  - *Anil Sethi, Glimpse*
- 11:00 a.m. Panel 5: Vendor Developers Dependent upon APIs**
- *Charles Parisot, EHRA*
  - *George Cole, Allscripts*
  - *Carl Dvorak, EPIC*
  - *Ryan Hamilton, Cerner*
- 11:45 a.m. Panel 6: App Providers**
- *Dave Vockell, Lyfechannel*
  - *Tim Michalski, Point of Care Decision Support*
  - *Nate Weiner, Avhanahealth*
  - *Chris Burrow and Steve Mickelsen, Humetrix*
  - *Denis Coleman, AppMedicine*
  - *Jonathan Baran, healthfinch*

**12:45 p.m. Closing Remarks**

- *David McCallie, co-chair*
- *Micky Tripathi, co-chair*

**12:50 p.m. Public Comment**

**1:00 p.m. Adjourn**

**Panelist Questions**

**Panel 4: Consumer Facing Ecosystems**

- What challenges and successes have you had to date receiving and utilizing data from EHRs and other health IT systems? Would a JASON like architecture help address the challenges you encountered?
- What are the benefits of an API or Jason like architecture? Does your company have public APIs?
- What role do you see for organizations like yours in a JASON like architecture?
- Today many efforts in the exchange ecosystem are focused on primary uses of health information, what challenges do you anticipate as the exchange ecosystem transitions to enable secondary uses as well?

**Panel 5: Vendor Developers Dependent upon APIs**

- How do you, or would you, define a "public" API (attributes and utility)?
- Have you deployed, are developing, or are planning any of these types of API's and for what purpose (e.g., CCDA, basic MU content, PACS, medications, referrals, billing..)?
- Do these API's affect push or pull functionality?
- Are your API's bidirectional?
- What type of business agreements were developed prior to initiating the build?
- If you have an API, how do you manage patient identification across entities?
- Does your API affect data extraction from discreet fields and the placing of that data into similar discreet fields in the receiving application?
- Does your API affect specific available data to be actively selected by the sender? By the requester?

## Panel 6: App Providers

- Do you believe that an "app marketplace" could exist for healthcare? Please describe your vision of such a marketplace
  - What characteristics would be necessary for an "app marketplace" to succeed?
  - How do you, or would you, define a "public" API (attributes and utility)
- What has been your experience, if any, in using vendor-specific (proprietary) APIs? Are the features that your app needs available? What's missing?
- What type of business agreements, if any, were you required to sign before utilizing the API?
- Were your apps required to be certified by the vendor or some other service?
- What challenges and successes have you had to date collecting and utilizing data from EHRs and other health IT systems? Would a JASON like architecture help address the challenges you encountered?

## General questions:

- Given currently implemented information technology (IT) architectures and enterprises, what challenges will the industry face with respect to transitioning to a JASON like architecture? What challenges will your organization face?
- Do you see an evolutionary path for the industry to move from currently implemented approaches to a JASON like architecture?
- What policy and technology developments would be necessary to assure the privacy and security of information in a JASON like architecture?
- What existing efforts (standards, initiatives, pilots etc.) in the marketplace are advancing a JASON like infrastructure?
- A key recommendation of the JASON Report is that EHR vendors should be required to develop and publish APIs for medical records data, searching and indexing, semantic harmonization and vocabulary translation, and user interface applications. What existing efforts are underway in health care that could inform the implementation of this recommendation?
- What standards, implementation specifications, certification criteria, and certification processes for electronic health record (EHR) technology and other HIT would be required to implement the JASON reports' recommendation that ONC require open published APIs through Stage 3 of Meaningful Use?
- What processes and approaches would facilitate the rapid development and use of these standards, implementation specifications, certification criteria and certification processes?
- How might ONC and other Federal agencies best integrate the changes envisioned by the JASON report into their future work?
- What actions would you recommend ONC take to help the industry advance towards a JASON like architecture that supports interoperability for primary and secondary uses of health information?