

HIT Standards Committee Implementation Workgroup Updates

Implementation Workgroup Member List

- Liz Johnson, Co-Chair, Tenet Healthcare Corp.
- Christopher Ross, Co-Chair, Mayo Clinic
- Robert Anthony, Centers for Medicare & Medicaid
- Kevin Brady, NIST
- Anne Castro, BlueCross BlueShield of South Carolina
- Tim Cromwell, Veterans Affairs
- John Derr, Golden Living, LLC
- Timothy Gutshall, Wellmark
- Joseph Heyman, Whittier IPA
- David Kates, NAVINET

- Tim Morris, Emory University
- Nancy Orvis, Department of Defense
- Steven Palmer, Texas Health/Human Services Commission
- Sudha Puvvadi, Kaiser Permanente
- Wes Rishel, Gartner, Inc.
- Kenneth Tarkoff, RelayHealth
- John Travis, Cerner
- Micky Tripathi, MA eHealth Collaborative
- Gary Wietecha, NextGen

Implementation Workgroup – Upcoming Activities

- The HITSC Implementation WG and HITPC Meaningful Use and Certification and Adoption WGs will be sponsoring a joint hearing on Implementation and Usability.
- The four panels will include Eligible Professionals, Eligible Hospitals, Health Information Exchange and Interoperability, and Usability.
- The Implementation/Usability Hearing will take place on Tuesday, July 23, 2013 from 9:30am – 4:30pm ET at The Dupont Circle Hotel, 1500 New Hampshire Avenue, NW, Washington DC 20036.



APPENDIX -

IMPLEMENTATION / USABILITY HEARING QUESTIONS



Eligible Provider Panel Questions

- 1) As you assess your readiness for stage 2, what objectives pose the greatest challenge? What is your approach for addressing those challenges?
- 2) How well does the meaningful use program address the needs of specialists? How would you improve the design of the meaningful use incentive program for your specialty or practice discipline? What are your suggestions for enabling greater levels of participation by specialists (e.g. measure definition, quality measures related to physician specialties, attestation timelines)? What kinds of resources do you believe most important and useful for ONC and CMS to provide or to support so as to enable increasing the level of provider adoption within your specialty or practice discipline?
- 3) What do you believe are the main reasons why certain eligible providers may be electing not to participate in the program? How best might ONC and CMS encourage their participation? What guidance or actions by HHS may be most conducive to increased adoption of the public health reporting standards including transport standards?
- 4) What meaningful use objectives do you believe should be given highest priority for their inclusion in Stage 3 and why?
- 5) By stage 3, we believe qualifying for Meaningful Use (MU) will be quite mature. That would allow us to focus more on outcomes of using an EHR and less on "process," the functional requirements. We also seek to reduce the burden of fulfilling the MU requirements. Consequently, we are proposing to consolidate several functional objectives and also offer an alternate pathway to fulfill a subset of functional objectives through deeming. Deeming uses high performance on specific quality measures as partial satisfaction of a subset of functional objectives.. In your opinion, what clinical quality measures could deem satisfaction of specific functional objectives, and which functional objectives are the best candidates for deeming based on high performance on specific quality measures?

Eligible Provider Panel Questions - Continued

- 6) What have you found to be the most effective use of HIT to enable consumers to be active participants in their own healthcare? What are the most important barriers meaningful use could address to promote more effective patient engagement?
- 7) Do you currently send and/or receive electronic transitions of care information with other healthcare providers including skilled nursing facilities (SNF) and home care agencies (HC) caring for your patients and if so:
 - a) What actions have you taken or believe should be taken to overcome barriers to interoperability?
 - b) How can meaningful use program better enable HIE with other healthcare providers including SNF and HC?
- 8) Stage 2 indirectly includes long term and post-acute care (LTPAC) by requiring exchange between providers such as may occur between hospitals or EPs with LTPAC providers. For Stage 3, to more directly address the interests of EPs focused on practice in LTPAC, Home Health and Behavioral Health; do you have suggestions for criteria appropriate for those care venues?
- 9) What are the most important actions vendors can take to in support of attestation?
- 10) Should CMS take additional steps to provide EPs guidance on how to prepare for audit of meaningful use attestation? If so, what suggestions do you have as to what those steps should be?



- 1) As you assess your readiness for stage 2, what objectives pose the greatest challenge? What is your approach for addressing those challenges?
- 2) What guidance or actions by HHS may be most conducive to increased adoption of the public health reporting standards?
- 3) What meaningful use objectives do you believe should be given highest priority for their inclusion in Stage 3 and why?
- 4) What kinds of resources do you believe most important and useful for ONC and CMS to provide or to support so as to improve the ability of hospitals to effectively and economically achieve Stage 2 and 3?
- 5) What have you found to be the most effective use of HIT to enable consumers to be active participants in their own healthcare? What are the most important barriers meaningful use could address to promote more effective patient engagement?
- 6) Do you currently send and/or receive electronic transitions of care information with other healthcare providers including skilled nursing facilities (SNF) and home care agencies (HC) caring for your patients and if so: What actions have you taken or believe should be taken to overcome barriers to interoperability?

Health Information Exchange and Interoperability Panel Questions

- Describe how you will address the meaningful use requirements for the interorganizational transitions of care in Stage 2.
- 2) Will you use the Direct standards to meet interoperability requirements for Stage 2? Are your business partners prepared? Do you anticipate challenges because EHR vendors may require the use of a specific HISP? What new EHR capabilities required in Stage 3 or beyond would facilitate better exchange of health information (please identify the use case and the capability)?
- 3) What approaches will you use to meet the HIE requirements for Stage 2, and what challenges have you identified?
- 4) What have vendors done to support interoperability between certified EHRs? What gaps remain to support exchange between certified systems?
- 5) What HIE services are most important in meeting EHR use requirements?
- 6) Have you experienced any challenges with interoperability when both systems were purported to be certified for the intended purpose? Were there additional challenges to get the exchange to "really work"? What were the solutions you applied?
- 7) Have you made or received electronic transitions of care to healthcare providers including skilled nursing facilities and home care agencies and if yes, have you encountered barriers and how have you converted the barriers into successes?

Usability Panel Questions

Vendor Product Questions

- 1) What do you see as the major usability issues to be resolved? What are your timelines for usability improvements, such as development and release of products based on user-centered design and re-engineering?
- 2) Describe your efforts to develop products for mobile platforms, and usability challenges and opportunities created by mobile platforms.
- 3) What requirements of Meaningful Use, or other regulatory requirements, create usability challenges?
- 4) In what ways can ONC and CMS help you improve the usability of your products?
- 5) For only written response consider including: How do you incorporate usability objectives and criteria in the design process? How do you prospectively (during the design process) incorporate input from your customer users? How do you evaluate the usability of your products? How do you capture usability feedback from your customers on your products once they are in the field? Suggestion is provide the same information for self-attestation as required for 2014 Edition. User centered design certification criteria.

Usability Panel Questions - Continued



Perspectives which Reflect both Eligible Hospitals and Eligible Providers

- 1) What are your priorities for usability improvement related to Certified EHR products?
- 2) How does your vendor engage you in improving usability?
- 3) What requirements of Meaningful Use, or other regulatory requirements, create usability challenges?
- 4) In what ways can ONC and CMS help you address usability of CEHRT products within your organization?
- 5) During pre-implementation phase, how do you determine which customization options are ideal for your environment and how do weigh these options? How have you worked with the vendor to successfully implement your EHR?
- 6) What practices or interactions with vendors have facilitated successful implementation? What challenges did you face and what would you do to improve this process?
- 7) Is the training that is provided by the vendor sufficient and does it adequately prepare end-users to safely and efficiently use the product?