The Office of the National Coordinator for Health Information Technology



Exemplar Health Information Exchange Governance Entities Program Technical Assistance Teleconference

January 7, 2013



Background



- Earlier this year, ONC issued a request for information regarding a potential governance mechanism for the nationwide health information network. Based on the comments and feedback we received from multiple stakeholders, ONC announced in September that we would not be issuing federal regulations. Instead, we committed to launch a range of activities to support existing governance initiatives and advance governance goals of nationwide health information exchange: increase interoperability, decrease the cost and complexity of exchange, and increase trust among participants to mobilize trusted exchange to support patient care.
 - We will identify and shine light on good practices that support robust, secure and interoperable exchange.
 - We will actively engage with entities currently serving in governance/oversight roles to promote emerging good governance practices.
 - We will continue to use our existing authorities and convening powers to create consensus and provide guidance and tools to address specific barriers to interoperability and exchange.
 - We will continue to evaluate how and what consumer protections can be appropriately applied to health information exchange through existing regulatory frameworks.
 - We will continue to monitor and learn from the wide range of activities occurring.

Overview



- This FOA will enable ONC to work collaboratively through the cooperative agreement process with existing entities undertaking governance activities for the electronic exchange of health information to encourage them to develop and adopt scalable national policies, interoperability requirements and business practice requirements that reduce the cost and complexity of exchange, obviates the need for cumbersome legal agreements and reduces the cost and complexity of health information exchange.
- The FOA is focused on working with existing governance entities to expand their rules of the road (i.e. policies, interoperability requirements and business practice requirements) for participating organizations. This work will support and advance the efforts of existing governance entities which will benefit consumers and providers by allowing health information to flow securely between unaffiliated healthcare organizations.
- The cooperative agreement will provide funding to selected governance organizations to collaborate with ONC to:
 - Develop and implement policies, interoperability requirements and business practice requirements that will facilitate directed "push" and/or query-based exchange and address operational challenges that are slowing adoption and use of either model of exchange
 - Identify potential opportunities to incorporate these solutions in national policy through certification of electronic health records, nationally adopted standards, incorporation into federal policy or additional governance activities

Timeline



FOA Details	Date	Section Reference
Technical Assistance Teleconference	January 7, 2012 at 2:00pm EST	
Notice of Intent to Apply Due	January 11, 2013 by 5:00pm EST	Section IV - Application and Submission Information
Application Due Date	February 4, 2013 by 5:00pm EST	Section IV - Application and Submission Information
Anticipated Award Date	March 25, 2013	Section IV - Application and Submission Information

Dates are approximate



Type of Award:	Cooperative Agreement
Approximate Amount of Funding Available:	\$800,000
Award Floor:	\$200,000
Award Ceiling:	\$400,000
Approximate Number of Awards:	4
Program Period Length	12 months with the potential for an additional 1 year continuation award based upon satisfactory performance and subject to the availability of funds.
Anticipated Project Start Date	March 25, 2013

Eligibility Requirements



- Eligible applicants must:
 - Be a not-for-profit entity*, state government, or a component of state government;
 - Have as a main focus the governance of health information exchange between unaffiliated healthcare organizations, health information organizations and across multiple vendor products;
 - Have participating entities that are using policies, interoperability requirements and business practice requirements implemented by the applicant for the exchange of health information; and
 - Have participating entities in three or more states.

*For applicants awaiting not-for-profit status determination, ONC will work individually with these applicants on a case by case basis.

General Funding Requirements



- Applicants must:
 - Have operational governance for the electronic exchange of health information. This means the applicant has established and implemented policies, interoperability requirements and business practice requirements for participants' query-based exchange, directed "push" exchange or both.
 - Support the exchange of health information between unaffiliated healthcare organizations, health information organizations and across multiple vendors' products.
 - Have broad representation of stakeholders (i.e. as relevant healthcare providers, health IT vendors, consumers, health information organizations, etc.) in decision-making bodies and processes.
 - Adhere to principles outlined in Section I.B.5, Principles

Principles



- Awardees in their operation and in their development and adoption of policies, interoperability requirements and business practice requirements must:
 - Adhere to the principles of the Nationwide Privacy and Security Framework for Electronic Exchange of Individually Identifiable Health Information <u>http://www.healthit.gov/sites/default/files/nationwide-ps-framework-5.pdf</u>.
 - Ensure conformance to the requirements of the Privacy and Security Rules issued under the Health Insurance Portability and Accountability Act of 1996 (HIPAA), as amended by the Health Information Technology for Economic and Clinical Health Act of 2009 (HITECH) (Pub. L. 111-5) and the Patient Protection and Affordable Care Act (ACA) (Pub. L. 111-148).
 - Use national standards, implementation specifications and certification criteria/testing procedures adopted by U.S. Department of Health and Human Services except where ONC formally concurs with an awardee finding that the standards, implementation specifications and/or certification criteria/testing procedures are not applicable.
 - Use the Standards and Interoperability Framework to address gaps where national standards have not been adopted or require refinement.
 - Minimize time, complexity and effort to negotiate legal agreements by agreeing on common requirements.

National Priority Topics



- ONC will work with awardees to develop and implement governance policies, interoperability
 requirements and business practice requirements addressing the national priority topics outlined
 below.
- In areas where ONC has existing recommendations from the HIT Policy Committee or the HIT Standards Committee that ONC has considered and decided to implement, or has Standards & Interoperability Framework activities, those will be used as the starting point to develop solutions.
- Directed "Push" Exchange Model
 - End user identity resolution and authentication
 - Discovery and management of digital certificates
 - Exchanging certificate trust bundles
 - Querying provider directories
- Query-Based Exchange Model
 - Improving patient matching for a patient record query
 - Implementing meaningful patient choice to participate in HIE
 - Determining a treatment relationship exists before a patient record query is executed
 - Addressing liability concerns

NOTE: We define "**directed push**" exchange as a message sent from one participant to another, often to support anticipated and planned care. Examples include information that is sent by a hospital to another provider when a patient is referred or discharged from the hospital, lab results delivery or alerts to a primary care provider when a patient is seen in the emergency department.

> NOTE: We define "**query-based**" exchange as models allowing providers to query for a patient's health information, for instance when the patient arrives at an emergency department or at a specialist's office without any clinical information.

National Priority Topics continued



- Each applicant will work on national priority topics in their selected exchange model through this cooperative agreement and may also propose additional priority topics. ONC will work with each awardee to determine the final set of topics each awardee will work on under this cooperative agreement.
- If multiple awardees are working on the same or similar topics, ONC may instruct awardees to work together to establish a common solution.
- ONC is interested in funding at least one applicant that will provide governance for each exchange model.





- 1. Work Plan
- 2. Collaboration Among Awardees
- 3. Data Reporting
- 4. Solution Development and Implementation
- 5. Participation in ONC Activities
- 6. Performance Reports

Non-binding Letter of Intent



- Applicants must submit a non-binding letter of intent to apply for this funding opportunity. Those organizations which do not submit a letter of intent to apply will not be considered eligible, and their applications will not be reviewed.
- This letter must include:
 - the name of the applicant organization,
 - type of organization (non-profit, state government, or a component of state government),
 - the city and state in which it is located, and
 - the exchange model(s) which the applicant proposes to work on (query-based exchange, directed "push" exchange, or both).
- The letter must demonstrate that the applicant meets the requirements of Section III.A Eligible Applicants:
 - Be a not-for-profit entity, state government, or a component of state government;
 - Have as a main focus the governance of health information exchange between unaffiliated healthcare organizations, health information organizations and across multiple vendor products;
 - Have participating entities that are using policies, interoperability requirements and business practice requirements implemented by the applicant for the exchange of health information; and
 - Have participating entities in three or more states.
- The letter must be received by the January 11, 2013 at 5:00 pm EST. Notices of intent should be sent to <u>StateHIE@hhs.gov</u>. The letter of intent should not exceed 4 pages.

Responsiveness and Screening Criteria



- Application Responsiveness Criteria
- Applications that do not meet the following responsiveness criteria will be administratively eliminated and will not be sent forward for objective review:
 - The applicant meets the eligibility criteria as required by Section III.A, Eligible Applicants.
 - The application is received by the deadline required under Section IV.C, Submission Dates and Times.
- Application Screening Criteria
- ONC will screen all applications to identify those that do not meet criteria outlined below. The application screening criteria are:
 - The application meets the formatting and length requirements found in Section IV.B, Content and Form of Application Submission.
 - The applicant submits a complete and timely application, including the timely submission of a letter of intent to apply.
 - The application identifies which model(s) of exchange they will address (e.g., directed "push", query-based or both).
 - Appendices and attachments are not used as a mechanism to exceed page limits of the Project Narrative. NOTE: Letters of Support, List of Participants and Résumés of Key Project Personnel are not counted as part of the Project Narrative for purposes of the 30 page limit.





- The Project Narrative must follow the outline provided below and include the information required under each section.
 - Approach, Work Plan, and Activities
 - Applicant Capabilities and Collaboration and Letters of Support from Key Participants
 - Existing Rules of the Road
 - Budget, Level of Effort, and Justification
- The maximum length for the Project Narrative is 30 pages single spaced. Letters of Support, List of Participants and Résumés of Key Project Personnel are not counted as part of the Project Narrative for purposes of the 30 page limit.

Objective Review Criteria



- Applications that meet the requirements of Section III.C, Responsiveness and Screening Criteria, will be forwarded for objective review. Panels will review applications against a standard scoring sheet that reflects the review criteria outlined below. Applicants will be scored by assigning a maximum of 100 points across four criteria.
 - Approach, Work Plan, and Activities (35 points)
 - Applicant Capabilities and Collaboration and Letters of Support from Key Participants - (25 points)
 - Existing Rules of the Road (35 points)
 - Budget, Level of Effort, and Justification (5 points)

Considerations in Making Final Award Decisions Health IT.go

 Final award decisions will be made by The National Coordinator for Health Information Technology. In making these decisions, the National Coordinator for Health Information Technology will take into consideration the application scores determined by the objective review panel; the topic areas proposed by the applicants; the geographic coverage of the potential awardees' governance activities; the geographic distribution of potential awardees; the distribution of potential awardees across identified exchange model(s); the policy, technology, and other priorities of ONC and HHS; and availability of funds at the time of award.

Critical Application Information



- All applicants must have a Dun and Bradstreet (D&B) Data Universal Numbering System (DUNS) number.
- All applicants must register in the Central Contractor Registry (CCR).
- You should allow a minimum of five days to complete the CCR registration. You can register with the CCR online (<u>http://www.ccr.gov</u>).
- If you have already registered with CCR but have not renewed your registration in the last 12 months, you will need to renew your registration at <u>http://www.ccr.gov</u>.
- If you do not have a DUNS number or if you have not registered with the CCR, your application will not be reviewed.

Critical Application Information



- It is incumbent on applicants to ensure that their Authorized Organization Representative (AOR) is available to submit the application to ONC by the published due date.
- Applications that exceed the page limit requirements (30 page project narrative) when printed by ONC will be deemed non-compliant and will not be considered for funding under this announcement.

Critical Application Information



- Applications cannot be accepted through any e-mail address. Applications can only be accepted through <u>http://www.grants.gov</u>.
- Applicants are strongly encouraged to complete and submit applications as far in advance of the submission date as possible.
- The application including all required attachments and files must be received by 5:00 pm eastern time on the due date, February 4.





- Questions will be taken via the phone.
- Follow up questions can be emailed to <u>StateHIE@hhs.gov</u>
- These slides and a recording of the webinar will be posted on the ONC website at <u>http://www.healthit.gov/policy-researchers-</u> <u>implementers/exemplar-hie-governance-</u> <u>entities-program</u>

