



HITSP

Healthcare Information Technology Standards Panel

HITSP ARRA Efforts

Internal Review Team (IRT) Overview

8 July 09 | HITSP Panel Meeting

TC Members

Charles Parisot (co-chair)
Steve Hufnagel (co-chair)
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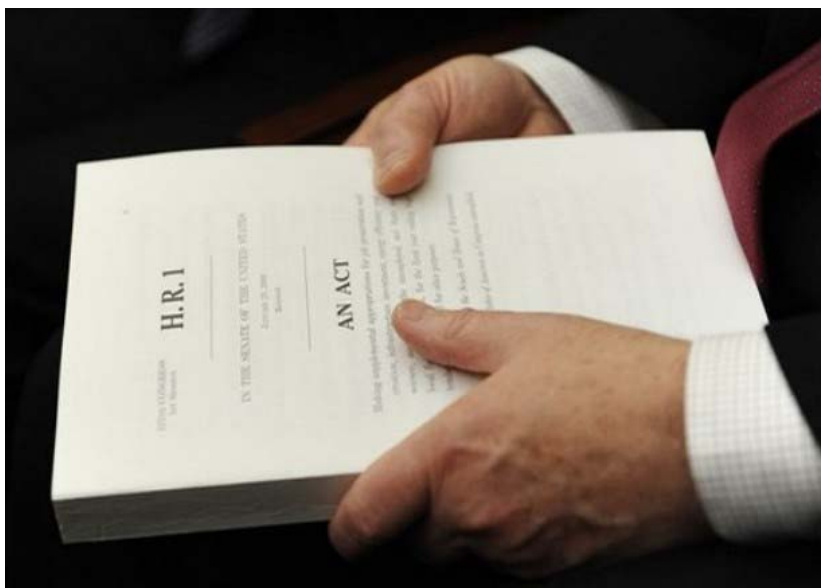
Staff Members

Jack Corley (staff co-chair)
Bob Yench, Ed Larsen
Gene Ginther, Sarah Quaynor
Erik Pupo

How All the HITSP ARRA Efforts Fit Together

- The Efforts
 - EHR-Centric IS
 - Security, Privacy, and Infrastructure
 - Quality Measures
 - Data Architecture
 - Harmonization Framework and Exchange Architecture
 - Content and Publication Management
 - Gap Resolution Plan for HITSP Support to Meaningful Use
- Basic Concepts and Simplification through Reuse
 - Exchange Architecture
 - Data Architecture
 - Capability
 - Service Collaborations

Starting Point – ARRA Requirements and Tiger Teams



EHR Centric IS

- Capitalize on existing specifications
- Organize according to EHR Information Exchanges
- Establish Capability Concept



Security, Privacy, and Infrastructure

- Define Infrastructure Service Collaborations
- Integrate Security and Privacy functions



Quality IS

- Ability to interoperably specify Measure
- Ability to extract patient-specific data from EHR and other sources for a measure

Foundation to Simplify and Clarify HITSP Support for ARRA

Other Team Efforts	Objective
Harmonization Framework and Exchange Architecture	Enhance fundamental HITSP concepts to dramatically simplify specification creation and use of Specifications
Data Architecture	Ensure consistent and effective Data Elements, Value Sets, and Templates
Content and Publication Management	Establish the foundation for electronic publishing
Gap Resolution Plan for HITSP Support to Meaningful Use	Establish strategic plan to address Meaningful Use Requirements that increase over time To Be Done In July and August

ARRA / HITECH Eight Priority Areas

Eight Priority Areas for HIT in ARRA								
HITSP Tasks for ARRA	Security + Privacy	HIT Infrastructure	Certified EHR	Disclosure Audit	Quality	IIHI* Unusable	Demographic Data	Vulnerable Pop
EHR-Centric IS			■		■		■	■
Security and Privacy Service Collab	■	■	■	■	■	■		
Quality Measures			■		■			■
Supporting Deliverables								
Harmonization framework	■	■					■	■
Data Architecture		■	■		■		■	■

* Individually Identifiable Health Information (IIHI) Unusable

ARRA / HITECH Meaningful Use

ARRA Title IV (Division B) – Section 401 – Medicare Incentives

HITSP Tasks for ARRA	e- Prescribing	Info Exchange to Improve Quality	Report Quality Measures	Certified EHR
EHR-Centric IS	■	■	■	■
Security and Privacy Service Collab	■	■		■
Quality Measures			■	■
Supporting Deliverables				
Harmonization framework	■	■		■
Data Architecture	■	■	■	■

Capability

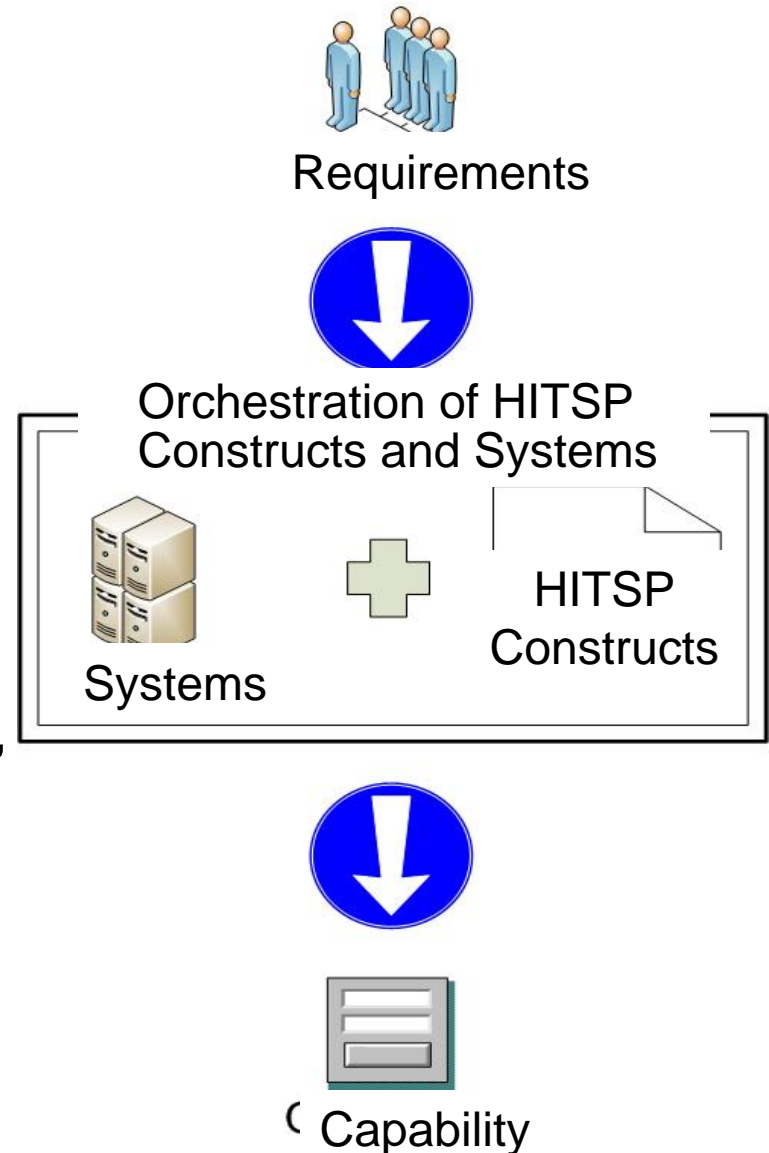
Created To Simplify Design and Use Of
HITSP Specifications
For ARRA Efforts And Beyond

A new concept - HITSP Capability

- ❑ A HITSP capability is an implementable business service that specifies interoperable information exchanges using HITSP constructs.
- ❑ It is meant to support stakeholder requirements and as part of its design, it includes workflow, information content, infrastructure, security and privacy.
- ❑ Capabilities include constraints and operate on specific network topologies (contexts)
- ❑ Capabilities have options: subsets of the data content can be sent or received as appropriate by a system implementing a capability.

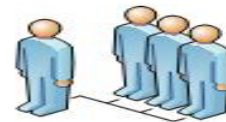
What is a capability?

- ❑ Capabilities are specified using HITSP Constructs.
- ❑ As part of the HITSP Tiger Team effort addressing ARRA, Capabilities are meant to clearly state what types of data HITSP can and cannot “exchange”
- ❑ During the ARRA Tiger Team effort, no new standards were selected, and no new constructs were specified to build capabilities



What is an example of a capability?

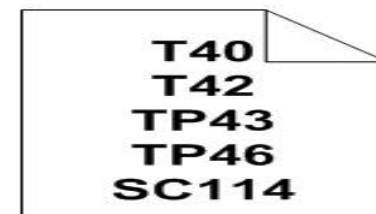
- Requirement: An organization wants to exchange a prescription with an ambulatory organization.
- The diagram on the right shows how Capability 117 was assembled to support this requirement.



I want to exchange a prescription with an Ambulatory of Long-Term Care (LTC) Organization

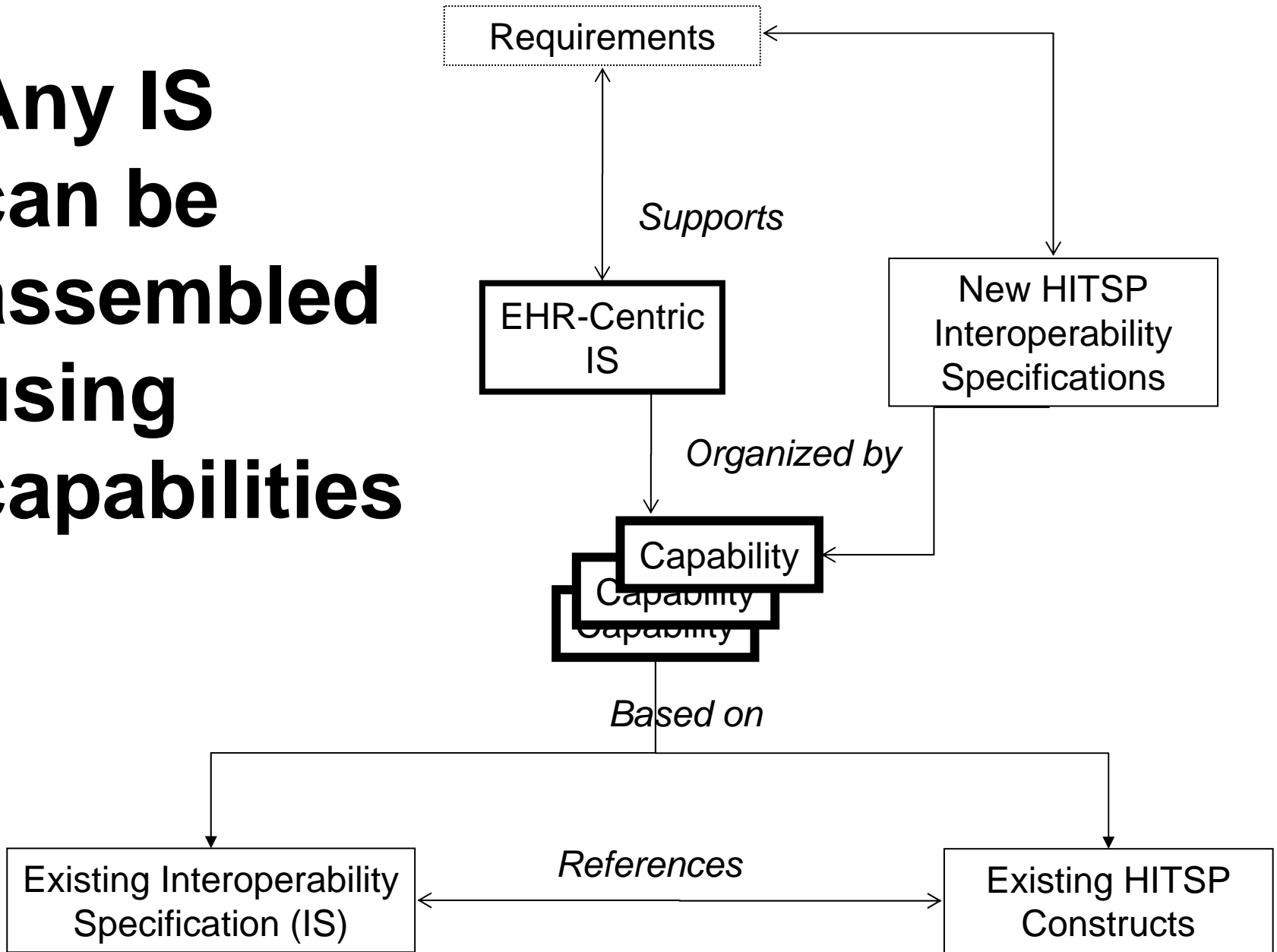


EHR System
EHR Hospital
Pharmacy System
HIE
PGM/Payer System
Clinical Decision Support
HC Entities



CAP117 – Communicate Ambulatory and Long Term Care Prescription

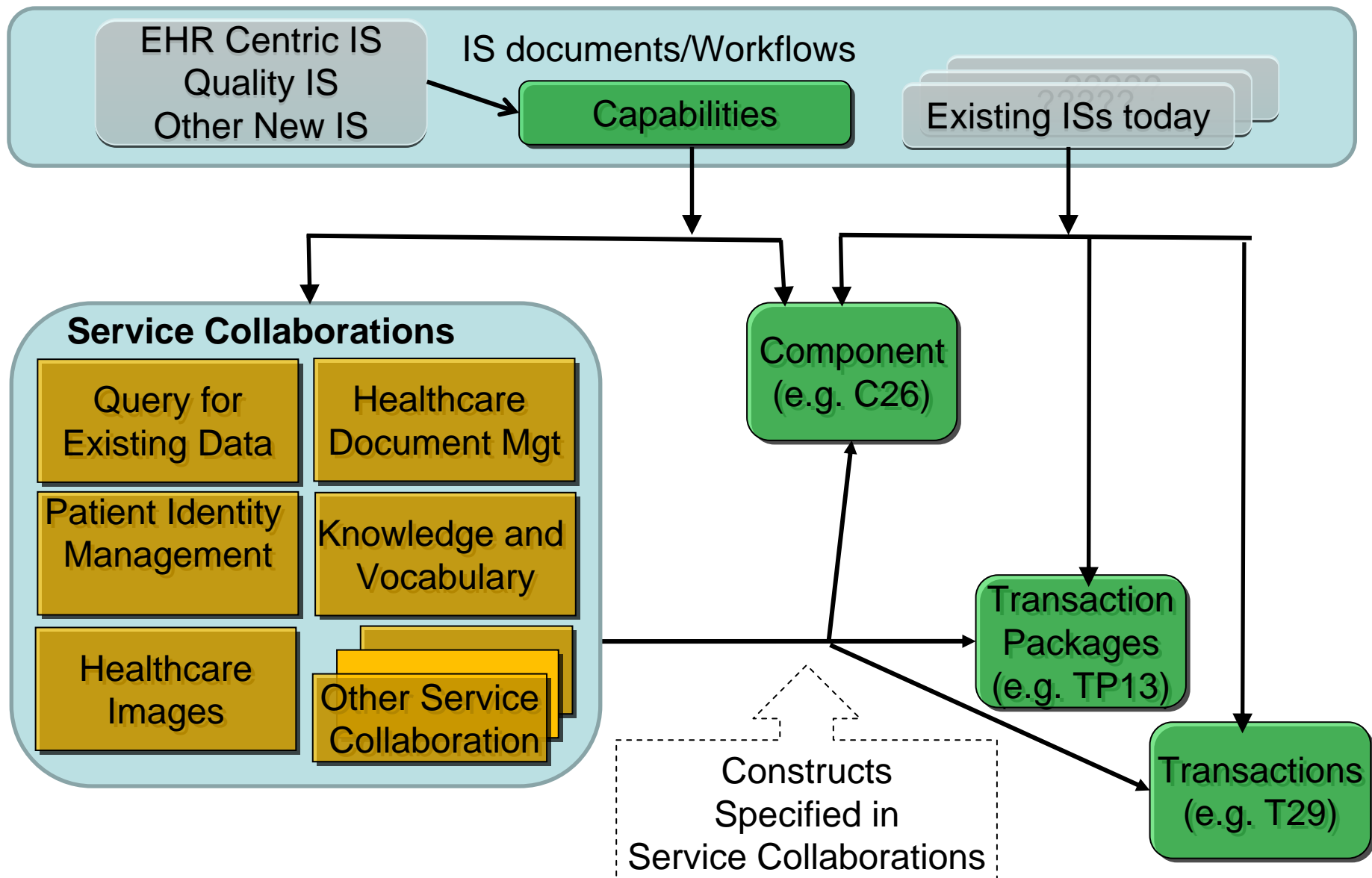
Any IS can be assembled using capabilities



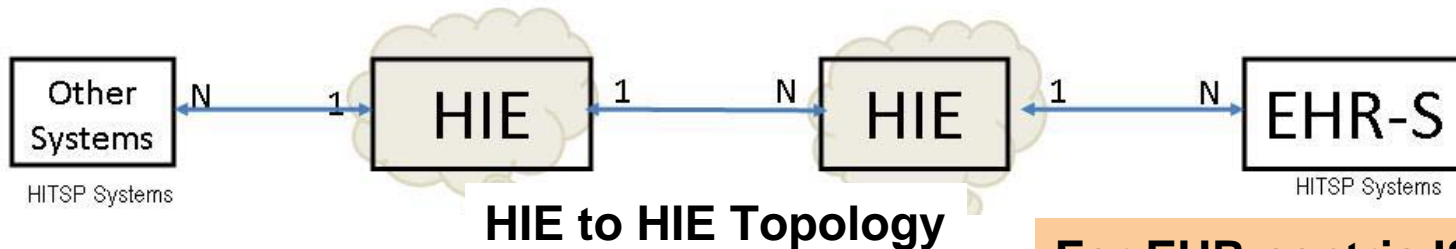
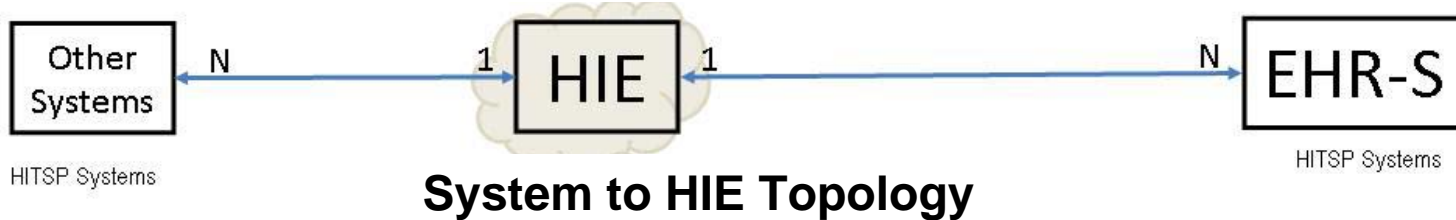
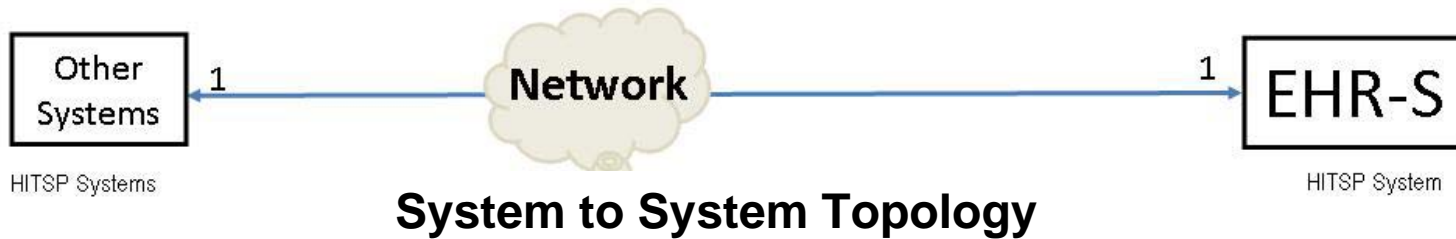
Service Collaborations Exchange Architecture and Data Architecture

**Additional Keys To Simpler Definition
and Implementation Of HITSP
Specifications**

Relating Service Collaborations to Capabilities



What does HITSP mean by Exchange Architecture?



**For EHR-centric IS,
an EHR-S must participate**

Data Architecture: Consistency for Data Elements

- ❑ Each data element defined for consistent use across different information exchanges
 - Usable for both document and message exchange standards (HL7 V3 CDA, HL7 V2, NCPDP, X12, etc.)
- ❑ Similar data elements for different standards treated as same HITSP data element to maximize interoperability
- ❑ Constraints may be applied to a data element to facilitate use across a wide variety of standards

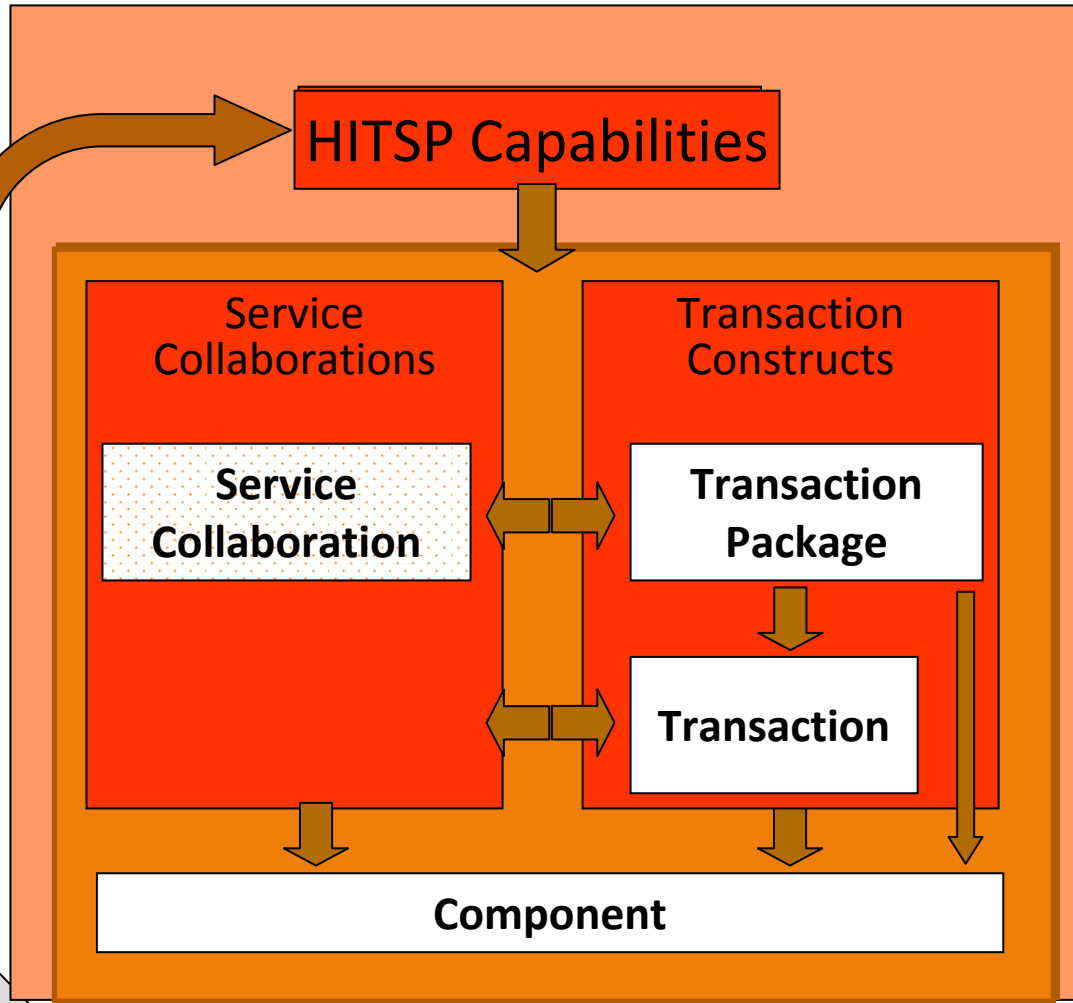
SDO Document Section	Area of constraint	Data Element Definition	HITSP Opt/Repeat	Additional Constraints
2.4 Section Constraints	2.4.1 Measure Set Section	This section describes constraints that apply to the Measure Set section and contains constraints regarding measure set names and measure names from a measure set and codes or other identifiers and may contain text descriptions. Each measure set is	R	HITSP-QRDA-3 The measure developer SHALL register the measure set OID with HL7 or other identified SDO

The Refined HITSP Framework

Business Requirements
Identifies interoperability business needs

Interoperability Specification

- Identifies what HITSP capabilities and constructs to use to meet Business Needs
- Defines Requirements, Context and Constraints for those capabilities and constructs



Base Standard #1

Base Standard #2

Base Standard #...

Base Standard #n

Composite Standard #1

Composite Standard #...

Composite Standard #m