



# HITSP

Healthcare Information Technology Standards Panel

## Final Report from the HITSP Education, Communication and Outreach (HITSP-ECO) Committee

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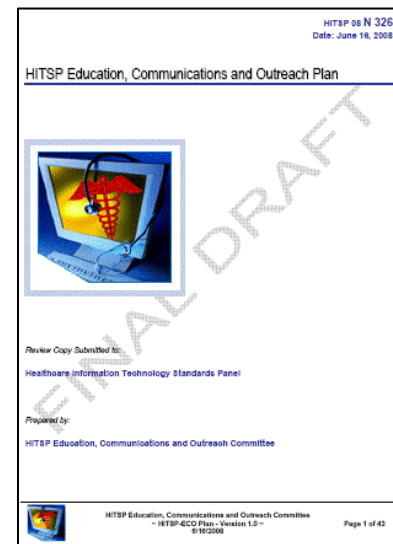
Co-Chairs:

- Walter G. Suarez, MD, Kaiser Permanente
- Rebecca Kush, PhD, CDISC
- Joan Duke, HCIC, LLC

Arlington, VA | January 25, 2010

# Background

- ❑ Established by the Board in February, 2008
- ❑ Developed an Education, Communications and Outreach Strategy and Plan
  - Identify the intended **Audiences**
  - Define the types of **Messages** to deliver
  - Identify the **Modes** and **Methods** for delivering messages
  - Establish the **Process** for coordinating internal ECO activities
  - Gather and organize **Resources** to support ECO activities
- ❑ Plan approved by Panel in June, 2008



# Summary of Activities

## *(June, 2008 – January, 2010)*

- ❑ HITSP ECO Webinar Series and e-Town Halls
- ❑ Coordination with other HITSP webinars
- ❑ HITSP Presentations at other events (HL7, AMIA, WEDI, Others)
- ❑ HITSP @ HIMSS – Interoperability Showcase
- ❑ HITSP e-Newsletter
- ❑ HITSP Cross-Reference Matrices and USHIK
- ❑ ECO Website





Webinar Series

# HITSP

Healthcare Information Technology Standards Panel

## Achieves of Webinar Series

[www.hitsp.org/webinars](http://www.hitsp.org/webinars)

### 2008 HITSP Webinars

Webinar 1	Standardizing How We Share Information in Healthcare – An Introduction to HITSP
Webinar 2	HITSP Foundational Components
Webinar 3	Consumer Access to Clinical Information
Webinar 4	Biosurveillance
Webinar 5	Electronic Health Record (EHR) and Lab Reporting
Webinar 6	Quality
Webinar 7	Security, Privacy and Infrastructure
Webinar 8	Emergency Responder – Electronic Health Record
Webinar 9	Medication Management



# HITSP Webinars - 2008

- Completed Nine introductory HITSP Webinars:
  - Topics covered included: An introduction to HITSP; HITSP Building Blocks; Initial HITSP ISs (Consumer Access to Clinical Information, Biosurveillance, EHR-Labs, SPI, Emergency Response, Medication Management, Quality)
  
- All webinars recorded and slides+recording available via HITSP Website
  
- Intense preparatory work (by staff, workgroup, presenters...)
  - Coordination and execution of large-scale Webinar
  - Coordination and development of Webinar content materials



And some of you remember the strict editing process for the webinars . . .



# HITSP Webinars - 2008

- ❑ Introduction of “Steve’s Story” – a special feature
  - Connecting Interoperability to Patient Care with a very touching, real-life story
  - Weaved into all Webinars
- ❑ Beginning to build a library of presentation materials
  - All presentations available for ‘reuse’ and ‘repurpose’ at other venues
  - Standard ‘interoperable’ HITSP Presentation Template
- ❑ Close to 1,500 attendees!
  - Probably many more, when considering more than 1 person per line





Webinar Series

# HITSP

Healthcare Information Technology Standards Panel

## Achieves of Webinar Series

[www.hitsp.org/webinars](http://www.hitsp.org/webinars)



### 2009 HITSP Webinars

Webinar 1	Advances in Sharing Information in Healthcare IT
Webinar 2	Personalized Healthcare Interoperability Specification (IS 08)
Webinar 3	Consultations and Transfers of Care Interoperability Specification (IS 09)
Webinar 4	NHIN Real World Sites
Webinar 5	HITSP eTown Hall I with Dr. John Halamka
Webinar 6	Health Information Exchange (HIEs) in the Real World
Webinar 7	HITSP eTown Hall II with Dr. John Halamka
Webinar 8	Medication Management Real World Sites
Webinar 9	HITSP EHR Centric Interoperability Specification
Webinar 10	Security, Privacy, and Infrastructure
Webinar 11	Quality Measures Real World Sites - <i>Postponed</i>
Webinar 12	HITSP eTown Hall III with Dr. John Halamka





# HITSP Webinars - 2009

- ❑ Completed 9 webinars between January and December, 2009, covering the new HITSP work and two 'Real World' implementation webinars (NHIN and HIEs)
- ❑ Additionally, organized and conducted two very successful web-based e-Town Hall meetings in June and August, 2009
- ❑ Final HITSP e-Town Hall held last Friday, January 22, 2010



# HITSP Webinars - 2009

- ❑ Coordinated with other HITSP TCs and TTs to implement additional HITPS Webinars
  - Webinar Series on HITSP Gaps/Extensions documents for Public Comment, including General Lab Orders, Medication Gaps, Prior Authorization, Clinical Note Details (September-October, 2009)
  - e-Town Hall on Consumer Preferences (October, 2009)
  - Clinical Research Webinar (November, 2009)
- ❑ Events continued to draw significant attention and participation (averaging 150 attendee-lines per webinar, 250 for eTown Hall meetings)



# HITSP Webinars 2009



# HITSP

Healthcare Information Technology Standards Panel

a free webinar series on healthcare interoperability

## A \*NEW\* HITSP eTown Hall Meeting on CONSUMER PREFERENCES

HITSP will be hosting an eTown Hall Meeting for all interested HITSP Members to review the Draft Consumer Preferences Requirements Document recently released by ONC. Due date for public comments is October 16, 2009. The purpose of this eTown Hall is to present an overview of the draft Requirements Document and elicit discussion and comments. The HITSP Consumer Preferences Tiger Team will then consolidate comments and submit them to ONC by the deadline.

### When:

- Date: **Tuesday, October 13, 2009**
- Time: **11:00 am - 1:00 pm ET**

### Registration:

Participation is complimentary but advanced registration is required. You will need to reserve your Webinar seat now at:

<https://www1.gotomeeting.com/register/980511585>

### 2009 SPECIAL TOPIC WEBINAR ARCHIVES

<b>September 29, 2009</b> 2:00 – 5:00 PM (Eastern)	<b>General Laboratory Orders</b>	<b>Audio:</b> <a href="#">(wmv)</a> <b>Presentation:</b> <a href="#">(.pdf)</a> <a href="#">(.ppt)</a>
<b>September 30, 2009</b> 2:00 – 5:00 PM (Eastern)	<b>Medication Gaps</b>	<b>Audio:</b> <a href="#">(wmv)</a> <b>Presentation:</b> <a href="#">(.pdf)</a> <a href="#">(.ppt)</a>
<b>October 1, 2009</b> 2:00 – 3:30 PM (Eastern)	<b>Prior Authorization</b>	<b>Audio:</b> <a href="#">(wmv)</a> <b>Presentation:</b> <a href="#">(.pdf)</a> <a href="#">(.ppt)</a>
<b>October 1, 2009</b> 3:30 – 5:00 PM (Eastern)	<b>Clinical Note Details</b>	<b>Audio:</b> <a href="#">(wmv)</a> <b>Presentation:</b> <a href="#">(.pdf)</a> <a href="#">(.ppt)</a>



Clinical Data Interchange Standards Consortium (CDISC) . . . Health Information Technology Standards Panel (HITSP)



webinar

### Understanding the New HITSP Clinical Research Interoperability Specification and Related Constructs

#### What you will learn

HITSP has recently released several documents related to Clinical Research for public comment. During this 2-hour webinar, participants will learn the overall structure and fundamentals of HITSP's new Clinical Research Interoperability Specification (HITSP IS158) and its underlying constructs, capabilities and service collaborations. Specifically, the webinar will cover:

- HITSP basic concepts
- An overview of the Clinical Research Use Case
- A detailed review of the HITSP Clinical Research IS
- A detailed review of the two main HITSP constructs developed to support the Clinical Research Use Case
- How these HITSP products work together to support interoperability in the Clinical Research field
- How to find, navigate, and comment on the HITSP Clinical Research documentation

#### Who should attend

Researchers from all areas, including clinical program managers, project managers, monitors, data managers, regulators, auditors and others from clinical research institutions, clinical research sponsoring organizations, regulated clinical research organizations and academic research institutions, CTSA awardees, NIH centers, biopharmaceutical companies, contract research organizations, technology providers to clinical research organizations, and EHR vendors interested in supporting clinical research.



Sponsored by  
Clinical Data Interchange Standards Consortium (CDISC)  
Health Information Technology Standards Panel (HITSP)

**HITSP: Enabling Healthcare Interoperability**

#### Date and Time

Thursday, November 19, 2009  
1:00 – 3:00 pm Eastern

#### Registration

Participation in the webinar is complimentary, but advance registration is required.

#### To register directly, visit

<https://www.gotowebinar.com/register/281341224>

#### Access

Participation during the live webinar requires both telephone and Internet connections. Dial 866-951-1151, access code 3835420

#### Archives

All HITSP webinars given to date are freely available online, including descriptions, presentations, and full audio playback. To download the files, visit [www.HITSP.org/webinars](http://www.HITSP.org/webinars).

#### More Information

[www.HITSP.org/webinars](http://www.HITSP.org/webinars)



# HITSP @ Various Events



Educational Summits



**World Health Care Congress**



# HITSP @ Various Events

- ❑ Assisted with identification and coordination of HITSP presentations and participation at other national events
  - Speakers provided with / used our ‘standard’ education materials
- ❑ Articles and posters published and presented in various venues
- ❑ Assisted support HITSP @ HIMSS participation each year - HIMSS Interoperability Showcase
- ❑ Many HITSP members and leaders participated in numerous events



# HITSP @ Various Events

## 2009 AMIA Poster

### The HITSP Webinar Series: Translating for Widespread Adoption

Virginia Lorenzi, BS, MS<sup>1,2</sup>, Joan Duke, BS, MA, FHIMSS<sup>3</sup>, Robin Raiford, BSN, RN-BC, CPHIMS, FHIMSS<sup>4</sup>, Greg Killian, BSME, MBA<sup>5</sup>, Stanley Nachimson, BS, MS<sup>6</sup>, Walter Suarez, MD, MPH<sup>7,8</sup>  
<sup>1</sup>NewYork-Presbyterian Hospital, <sup>2</sup>Columbia University, <sup>3</sup>Health Care Information Consultants, LLC, <sup>4</sup>Eclipsys Corporation, <sup>5</sup>Siemens Healthcare <sup>6</sup>Nachimson Advisors, LLC, <sup>7</sup>Kaiser Permanente, <sup>8</sup>Public Health Data Standards Consortium

#### Summary

Translational medicine connects research discoveries to advancements in patient care. The Health Information Technology Standards Panel (HITSP) harmonizes standards to make HIT interoperable - a labyrinthine task. However, there is also a translational aspect to HITSP work. To be successful, HITSP specifications must achieve widespread adoption. Only then will most EHRs have the capability for meaningful information exchange, enabling higher quality and more efficient care. This poster describes development of the HITSP 2008 Webinar Series, a communications vehicle for achieving adoption.

#### Background

The HITSP Education, Outreach, and Communications (ECO) Committee was formed to encourage understanding, adoption and use of HITSP interoperability specifications by the health care industry. A workgroup was formed to create and coordinate webinars. Four components of the ECO Committee education plan influenced the development of the HITSP 2008 Webinar Series:

1. The Need to Reach External Audiences
2. Webinars as the Venue for Communication
3. Avoidance of "HITSP speak"
4. The Use of a Common Story



**HITSP – enabling healthcare interoperability**

#### Methodology

##### The Need to Reach External Audiences

- Individuals from the Healthcare space
  - With little or no knowledge of HITSP
  - Who might never participate in HITSP directly
  - Who might be impacted by HITSP's work
  - Who could serve as catalysts championing HITSP adoption
- Design focused on the use and value of the HITSP specifications for patients, providers, and the population.



##### Webinars as the Venue for Communication

- To reach a broad-based external audience.
- To rapidly and affordably engage expert speakers
- Offered as a free service
- Archives of the presentations and audio were made freely available

##### Avoidance of "HITSP speak"

Webinar materials were edited removing jargon and replacing it with language appropriate to targeted external audiences in the health care industry.

##### The Use of a Common Story – "Steve's Story"

- The HITSP ECO plan described the use of simple stories to illustrate interoperability problems and solutions in a manner understandable by a healthcare industry participant/consumer.
- Idea led to the development of "Steve's Story" –based on the real life story of a HITSP panel member's nephew who had a brain tumor removed as a child and was dealing with recent health symptoms. "Steve's Story" was used to illustrate and personalized each webinar and to weave a common theme throughout the webinar series
- "Steve's Story" – Steve is a 28-year-old male who had a brain tumor removed as a child and is now suffering from frequent headaches
- Requires referrals to many different doctors and healthcare facilities for treatment
- Required to repeat medical history, allergies, medications, etc.
- Tests and procedures repeated due to a lack of comparison test results and scans

##### Steve's Healthcare in an interoperable world

- With patient's consent, medical information can be seamlessly and securely exchanged between and among diverse systems, including providers and care settings where the patient has previously gone for testing or treatment
- Care providers will have the most up-to-date records available to deliver high quality and efficient care because healthcare data will be retrieved from its source



#### Results

Webinar Topic	Web Participants	Phone Participants	Total Hits
Webinar 1 – Standardizing How We Share Information in Healthcare: An Introduction to HITSP	308	205	1906
Webinar 2 – HITSP Foundational Components	248	292	357
Webinar 3 – Consumer Access to Clinical Information	131	145	258
Webinar 4 – Surveillance	118	142	174
Webinar 5 – Electronic Health Record (EHR) and Lab Reporting	123	155	201
Webinar 6 – Quality	84	85	71
Webinar 7 – Security, Privacy and Infrastructure	161	201	91
Webinar 8 – EHR and Emergency Response	77	100	85
Webinar 9 – Medication Management	166	126	163

- Nine webinars conducted over five months.
- Announcements communicated via website postings and emails.
- Audience included hospitals, vendors, consultants, universities, health plans, physicians, labs, healthcare companies, state and local organizations.

#### Conclusion

- HITSP Board and ECO Committee concluded the webinars were a successful means of increasing HITSP knowledge and awareness across diverse stakeholders to facilitate widespread adoption.
- The webinar workgroup was encouraged to continue its efforts, coordinating HITSP 2009 Webinar Series to include town halls, selected HITSP specifications, and case studies on use of HITSP specifications in the "Real World".
- In a world with ARRA and incentives, now more than ever adoption of standards has become a key factor in achieving anytime, anywhere health data exchange.

#### Acknowledgements and References

The authors gratefully acknowledge the contributions of the expert speakers, the HITSP ECO Committee, and the staff at ANS (i) who supported webinar development and orchestration.

- References:
1. HITSP Educational, Communication, and Outreach Plan, HITSP 08 N 326 June 16, 2008.
  2. www.hitsp.org

**2008 Webinar Series**

Sponsored by the HITSP Education, Communications and Outreach Committee

# HITSP eNews

- ❑ Successfully launched in July, 2009
- ❑ Included a cover story, interview, news, calendar of HITSP activities and events, FAQs, other
- ❑ Released monthly and widely disseminated
- ❑ Aligned with weekly updates from HITSP Chair John Halamka



# HITSP

Healthcare Information Technology Standards Panel

HITSP News  
Vol. 1, No. 1  
July 10, 2009



The [Healthcare Information Technology Standards Panel \(HITSP\)](#) is a cooperative partnership between the public and private sectors. The Panel was formed for the purpose of harmonizing and integrating standards that will meet clinical and business needs for sharing information among organizations and systems.

Welcome to HITSP News, a monthly newsletter that provides news on the activities of the Healthcare Information Technology Standards Panel. Visit the HITSP Web site at [www.hitsp.org](http://www.hitsp.org) for more information. If you have news or ideas for HITSP News, please send them to [hitsp@ansi.org](mailto:hitsp@ansi.org) for consideration.

## What Does HITSP Mean to You An Interview with Dr. Neil Calman

HITSP News brings readers a regular column on – “What Does HITSP Mean to You?” – interviews with HITSP members and potential members about their perspective on the work of HITSP. In this inaugural article, Neil Calman shares his thoughts on HITSP by answering four questions that will be posed to each person interviewed for this column. She is co-chair of the HITSP-ECO Committee working group that drives webinar development as reported in the last issue of the newsletter.

Dr. Calman is a board certified family physician in Manhattan, NY for the past 30 years. He has served as President and CEO since 2004 of a Graduate Medical Education, on the Board of Directors of the NY Academy of Family Physicians, and on the Policy Committee.

Additional Information on Dr. Calman and questions.

## What Does HITSP Mean to You

1. Prior to your appointment to the HITSP, I had heard of HITSP as I read about the technology and attended conferences where it was discussed.

# HITSP

Healthcare Information Technology Standards Panel

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## HITSP Webinars: Educating New Audiences on HITSP

Whether new to HITSP or a veteran volunteer, the [HITSP Webinars](#) is a resource that educates and involves listeners on the work of the HITSP harmonization organization. The interactive, 90-minute sessions have been developed by a group of dedicated volunteers in a shared effort.

The HITSP Education, Communication and Outreach Committee manages the [webinar educational initiative](#), which began in June 2008 with the [first webinar](#), explained Joan R. Duke, co-chair of the HITSP-ECO Committee working group that drives webinar development. Ms. Duke is Founder and Partner in HCIC, LLC, a healthcare management consulting firm. “Presented over the Internet, these online audio/video events allow participation from virtually anywhere. Both live audio and video presentations are included in the series, and the audience can ask questions online and receive answers.”

**Getting the HITSP word out:** HITSP, through the webinar development, but would be vital to wide-spread adoption of HITSP, government and standards jargon, the pre-emptive general language focusing on HITSP products and implementation of the HITSP process.

“We even included a developing story line (Steve’s Story) to illustrate the need for the adoption of HITSP interoperability specification,” said Virginia Lorenz, co-chair of the HITSP-ECO working group. Lorenz is Senior Technical Specialist, FCG Management Services Hospital.

HITSP News  
Vol. 1, No. 2  
August 10, 2009



# HITSP

Healthcare Information Technology Standards Panel

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## What Does HITSP Mean to You An Interview with Joan Duke

HITSP News brings readers another column on – “What Does HITSP Mean to You?” – interviews with HITSP members and potential members about their perspective on the work of HITSP. In this article, HITSP volunteer Joan R. Duke shares her thoughts on HITSP by answering four questions that will be posed to each person interviewed for this column. She is co-chair of the HITSP-ECO Committee working group that drives webinar development as reported in the last issue of the newsletter.

The questions below provide insight from healthcare industry professionals, some who are members of HITSP and quite familiar with its work and others who are new to this standards panel, on the value of HITSP and its role in the transformation of healthcare now underway.

Joan Duke is Founder and Principal with [Health Care Information Consultants, LLC](#). HCIC focuses on solving problems relating to systems management, organizational readiness, and technology integration. She has assisted a variety of organizations including health systems, hospitals, home care, long-term care, hospice, behavioral health, clinics, physician groups, health care technology vendors, and non-profits unify their organizational and information, technology resources.

## 1. What Does HITSP Mean to You

HITSP means interoperability to me. Interoperability means that health data will be available from multiple, diverse organizations for the caregiver when and where needed. The data will be in a form that enables the caregiver to interpret and use relevant data from patient visits, hospitalizations, testing centers, and other sites to reduce medical errors, reduce unnecessary testing, and support effective decision-making for the patient and providers during an episode of care. It also means that portions of the data will be available for secondary uses, such as for payers for patient billing, public health officials for detection of disease, emergency rooms for





# HITSP Cross-Reference Matrices

## **\*NEW\* HITSP 2010 CROSS-REFERENCE MATRICES**

The following HITSP Tables have been created as an educational tool to provide a comprehensive cross-reference guide to HITSP products (constructs, capabilities, service collaborations), base and composite standards being referenced by HITSP products, and the Recommendations from the HIT Standards Committee on 2011 Meaningful Use criteria.

### **HITSP 09 N 447**

This table contains a complete set of cross-references between 2011 Meaningful Use Recommendations, HITSP Products and national standards.

**Size: 42"x60"**.

The table encompasses the following three sub-tables:

- **HITSP 09 N 448**  
provides a summary view of the HIT Standards Committee - 2011 Meaningful Use Recommendations, and correlates each of them with national standards and HITSP Capabilities and Service Collaborations.  
**Size: 30"x36"**
- **HITSP 09 N 449**  
provides a summary of all HITSP Products, cross referencing HITSP Constructs and National Standards against HITSP Capabilities and HITSP Service Collaborations.  
**Size: 30"x36"**
- **HITSP 09 N 450**  
offers a summary of the Privacy and Security standards recommended by the HIT Standards Committee for 2011 Meaningful Use.  
**Size: 31"x36"**

### **HITSP 09 N 451**

This table provides an overview of, and cross-reference between HL7 CCR/CCD, HL7 CDA and HITSP C83 and HITSP C32 constructs.

**Size: 30"x36"**

The HITSP 2010 Cross-Reference Tables were created by the HITSP Education, Communications and Outreach Committee, with content validation from members of HITSP's Technical Committee leadership. Robin Raiford from Eclipsys Corporation, was the lead author and designer of the tables. While every attempt was made to ensure that the content of these tables is accurate and complete, HITSP is not responsible for any errors or omissions, or for results obtained from actions taken based upon this information. These tables are provided for educational purposes only.





2011 Recommendations from the HIT Policy Committee and HIT Standards Committee for Meaningful Use Measures and Standards

Main table grid containing various categories such as 'Health Information Exchange', 'Improving coordination', 'Engaging and involving', 'Improving patient and public health', 'Improving quality, safety, efficiency and reducing health disparities', and 'Enabling patient participation in decisions'. Each category has a list of measures and a corresponding grid of 'Y' and 'N' values.

Standards

Vocabularies

Allowable Alternatives

HITSP Service Collabs.

HITSP Capabilities

2011 Recommendations for Meaningful Use

HIT Standards Committee System Change and Used in Creating this Matrix. Provided at: www.healthit.gov. Includes text about HITSP Capabilities and HITSP Service Collaborations.

2011 Recommendations from the HIT Policy Committee and HIT Standards Committee for Meaningful Use Measures and Standards. HITSP logo and HITSP 09 N-448 – 2011 Meaningful Use Recommendations and HITSP Capabilities Matrix – Version 1, December 2009.



HITSP Service Collaborations Matrix with Data File										Detailed Capabilities of HITSP Capabilities																																	HITSP Document Description
Code	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	Version	Year	Document ID	Description						
																																						01	2004	HL7014	HL7014 - Health Care Information Systems (HCIS) v1.2		
																																							01	2004	HL7014	HL7014 - Health Care Information Systems (HCIS) v1.2	
																																							01	2004	HL7014	HL7014 - Health Care Information Systems (HCIS) v1.2	

HITSP Service Collaborations

HITSP Capabilities

HITSP Constructs:  
-- Components  
-- Transactions  
-- Transaction Packages



# Comparison of CCR/CCD and CDA Documents



This spreadsheet illustrates a range of content that may be in CDA documents. Many more CDA document types could be listed, e.g., Care Record Summary, Healthcare Associated Infection Report, Personal Healthcare Monitoring Report, Operative Note, Anesthesia Summary, Emergency Department Referral, Nursing Triage Note, and Immunization Summary. These are specified by HL7 or IHE and follow the same patterns. Many CDA document types are in recommendations from the HIT Standards Committee.

## CDA CCD and C32 Descriptions

**Clinical Document Architecture (CDA)** is an HL7 document markup standard that specifies the structure and semantics of "clinical documents" for the purpose of exchange. CDA documents derive their machine-processable meaning from the HL7 Reference Information Model (RIM) and use the HL7 Version 3 Data Types. CDA is a flexible XML-based clinical document architecture. CDA itself is not a specific document, but can be used to express many types of documents.

A CDA document can contain many data sections, all of which contain narrative text, and some of which contain structured data elements, some of which are coded.

There are many types of CDA documents, including CCD, XDS-M3 Discharge Summary (HTSP C48), History and Physical (HTSP C04), Lab Report (HTSP C32), etc.

**Continuity of Care Document (CCD)** describes constraints on the HL7 Clinical Document Architecture, Release 2 (CDA) specifications in accordance with requirements set forward in ASTM E2569-05 Standard Specification for Continuity of Care Record (CCR). It is intended as an alternate implementation to the one specified in ASTM ADJ2359. For those institutions or organizations committed to implementation of the HL7 Clinical Document Architecture, the Continuity of Care Record (CCR) is a core data set of the most relevant administrative, demographic, and clinical information facts about a patient's healthcare, covering one or more healthcare encounters. It provides a means for one healthcare professional, system, or setting to aggregate all of the pertinent data about a patient and forward it to another professional, system, or setting to support the continuity of care.

CCD is just one type of CDA document. Other types of CDA documents can contain some of the same CCD sections, but different sections as well.

**HITSP CDA Content Modules (C85)** describes a library of sections that can be combined into various CDA document types. In addition, a document type can include additional sections, even those not a part of it. So for example a CCD could add a Reason for Referral section added and still be a valid CCD. In addition, the sections in C85 can contain structured data described as "Entry Content Modules" that are being asserted into a "HITSP Data Dictionary" that describes the data elements and the constraints (optionality, repeatability, and value sets) for each data element.

**HITSP C32**, the HITSP Summary Document Using HL7 Continuity of Care Document (CCD) Component describes the document content immediately a consumer's medical data for the purpose of information exchange. The content may include administrative (e.g., registration, demographics, insurance, etc.) and clinical problem list, medication list, allergies, test results, etc) information. Any specific use of this Component by another HITSP specification may constrain the content further based upon the requirements and context of the document exchange. This specification defines content in order to promote interoperability between participating systems. Any given system creating or consuming the document may contain much more information than conveyed by this specification. Such systems may include Personal Health Records (PHRs), EHRs (Electronic Health Records), Practice Management Applications and other persons and systems as identified and permitted.

CDA Section (from HITSP C85)	HTSP C48 Section ID	CCD CCR (HTSP C48)	R1 Reason for Referral (HTSP C48)	Referral Summary (HTSP C48)	Discharge Summary (HTSP C48)	ORCA R1 Level Quality Document (HTSP C105)	Overall Note (HTSP C48)	History & Physical (HTSP C04)	ICD Physician Note (HTSP C30)	Data Dictionary (HTSP C156) Module Name	Comments
Allergies and Other Adverse Reactions	2.2.1.2	O	R	R	R	C	R	R	R	Allergy/Drug Sensitivity	Called "Allergy/Drug Sensitivity" in C32, called "Allergy" in CCD
Medications (incl. Current Meds)	2.2.1.9	O	R	R		C	R	R	R	Medication	14 Medication-related sections contain values from Medication Module
Admissions Medication History	2.2.1.10				R2				R2		
Hospital Discharge Medications	2.2.1.10				R				R2		
IV Fluids Administered	2.2.1.10				R2				R2		R4: Template ID 1.3.6.1.4.1.10275.1.3.3.1.13.2.0
Medications Administered	2.2.1.10				R2				R2		
Problem List	2.2.1.2	O	R			C		R		Condition	Called "Condition" in C32
Active Problems				R			R		R2		R: CCR but not CCD; not necessarily in R4 in CCD
History of Past Illness	2.2.1.4			R2	R		R2	R	R2		Called "Resolved Problem" in C48, "Past Medical History" in ICD Physician Note
Hospital Admission Diagnoses	2.2.1.10				R				R		R4: Template ID 1.3.6.1.4.1.10275.1.3.3.1.13.2.0
ED Diagnoses					R						
Discharge Diagnosis	2.2.1.11				R						
Chief Complaint	2.2.1.8							R	R	May contain Condition	
Reason for Visit									R		R4: Template ID 1.3.6.1.4.1.10275.1.3.3.1.13.2.1 Includes this is a specialization of Chief Complaint?
Reason for Referral	2.2.1.8			R						May contain Condition or Result	
History of Present Illness	2.2.1.7		R	R2			R	R	R		
List of Surgeries (aka Procedure)	2.2.1.8	O	R	R2		C	R2	O	R	Procedure	Called "Procedure" in C32
Procedures Performed									R		R4: Template ID 1.3.6.1.4.1.10275.1.3.3.1.13.2.15
Functional Status	2.2.1.9			R2	O		R2				
Discharge Date					O						R: CCR but not CCD; R4: Template ID 1.3.6.1.4.1.10275.1.3.3.1.3.3.0
Advance Directives	2.2.1.10	O		R			R		R	Advance Directive	
Immunizations	2.2.1.11	O		R2			R2	O	R	Immunization	
Physical Exam	2.2.1.10			R2	O		R2	R	R		
Vital Signs	2.2.1.10			R2	R2	C	R2	R	R	Vital Sign	
Review of Systems	2.2.1.20			O	O		O	O	R2		
Hospital Course	2.2.1.21			O	R						
Diagnostic Results	2.2.1.22	O	R	R2	O	C	R2	R	R	Procedure and Result	Called "Discharge Procedure, Test, Report" in C48, EDPP has "Exam" template ID 1.3.6.1.4.1.10275.1.3.3.2.1
Assessments											
Assessment and Plan	2.2.1.23							R	C	May contain Medication, Immunization, Encounter, Procedure	R: intended for Nursing assessments
Plan of Care (may include Procedure Orders)	2.2.1.24	O		R	R	C	R		C	May contain Medication, Immunization, Encounter, Procedure	R4: in C32 but in CCD; allows for Assessment and Plan in that R4: Template ID 1.3.6.1.4.1.10275.1.3.3.1.13.2.15
Family History	2.2.1.25	O		R2			R2	R	R	Family History	R4: in C32 but in CCD
Social History	2.2.1.26	O		R2			R2	R	R	Social History	R4: in C32 but in CCD
Encounters	2.2.1.27	O				R				Encounter	
Medical Equipment	2.2.1.28	O		R2	R2						
Referral Source									R		R4: Template ID 1.3.6.1.4.1.10275.1.3.3.1.13.2.3
Mode of Arrival									R		R4: Template ID 1.3.6.1.4.1.10275.1.3.3.1.13.2.2
Contributors									R		R4: Template ID 1.3.6.1.4.1.10275.1.3.3.1.13.2.0
Progress Note									R		R4: Template ID 1.3.6.1.4.1.10275.1.3.3.1.13.2.7
ED Disposition									R		Mode of transport (how patient departed); R4: Template ID 1.3.6.1.4.1.10275.1.3.3.1.13.2.10
Physician	2.2.1.1	O		R2		C	R2				
Personal Information (entry content modules)	2.2.1.1	R	R	R	R	R	R	R	R	Personal Information	
Information Source	2.2.1.2	R	R	R	R	R	R	R	R	Information Source	
Language System	2.2.1.3	R2	O	O	O	O	O	O	O	Language Spoken	
Encounter	2.2.1.4	R2	O	O	O	O	O	O	O	Encounter	
Home State Provider	2.2.1.5	O	O	O	O	O	O	O	O	Home State Provider	
Pregnancy	2.2.1.6	O	O	O	O	O	O	O	R2	Pregnancy	
Consent	2.2.1.11	O	O	O	O	O	O	O	O	Consent	
Procedure	2.2.1.11	O									

R = Required	R2 = Required if Known	C = Conditionally required	O = Optional	Blank = Not Included
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**LEGEND**



# New HITSP ECO Homepage

Home | About | Membership | News & Announcements | Meetings | **Education & Outreach** | Faq | Contact Us | Powered by American National Standards Institute

# HITSP

enabling healthcare interoperability



## Did You Know....

Thirty-three healthcare IT vendors were "early implementers" of the first set of HITSP Interoperability Specifications.

## Education & Outreach

An online resource for HITSP's educational and communications initiatives

- [HITSP Cross-Reference Matrices](#)
- [HITSP Webinar Series](#)



**HITSP Member Workspace**  
(password required)

**Public Review and Comment**

**HITSP and its Stakeholders**  
Learn more about how HITSP interacts with . . .

- **Consumers**
- **Government Representatives and Policy Makers**
- **Healthcare Providers**
- **Standards Developers**
- **Vendors**

## HITSP Cross-Reference Matrices

**\*NEW\* HITSP 2010 CROSS-REFERENCE MATRICES**

The following HITSP Tables have been created as an educational tool to provide a comprehensive cross-reference guide to HITSP products (constructs, capabilities, service collaborations), base and composite

[http://www.hitsp.org/education\\_outreach.aspx](http://www.hitsp.org/education_outreach.aspx)



# Experiences and Lessons Learned

- ❑ Education, communications and outreach is a core, foundational component of what we do
  - Complexity of the “message”, diversity of audiences, variety of topics make it that much more important
- ❑ Ensuring understanding, adoption and use of HITSP product was (and will continue to be) a key priority
  - Webinar materials were edited removing jargon and replacing it with language appropriate to targeted external audiences in the health care industry.
- ❑ Connecting everything back to patients, how all this work will benefit them directly





# Experiences and Lessons Learned

- ❑ Need to ensure appropriate level of resources are allocated to support such efforts
- ❑ Need to expand on different levels of communications for members (internal communications) and non-members
- ❑ Need to ensure coordination and cooperation with other entities on ECO-related activities
- ❑ Many other lessons learned regarding process, products, methods – to be used in future work



# The Future...

- ❑ Waiting to hear further direction and opportunities from ONC
- ❑ Education, communications and outreach will need to be a major part of any future HIT standards harmonization activity
- ❑ Need to develop simpler tools to adopt and use interoperable standards
- ❑ Opportunities to coordinate with Regional Extension Centers program and National HIT Research Center

