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American National Standards Institute Healthcare Information Technology Standards Panel (HITSP)
DRAFT CHARTER
1. <u>Mission</u>
Organizations participating in the Healthcare Information Technology Standards Panel (HITSP) (referred to as the "Panel") agree to serve as a cooperative partnership between the public and private sectors for the purpose of achieving a widely accepted and useful set of standards specifically to enable and support widespread interoperability among healthcare software applications, as they would interact in a Nationwide Health Information Network for the United States.
The HITSP is established under the sponsorship of the American National Standards Institute (ANSI) and endorsement of the Healthcare Information and Management Systems Society (HIMSS). The Panel intends to ensure the broadest possible participation of all affected parties, in order to stand up and maintain an entity capable of achieving readily-implemented, consensus-based outcomes.
2. <u>Principles</u>
This Panel shall serve the public good by working to ensure that the harmonized work of various healthcare information standards development organizations is broadly deployed and supports interoperability, accurate use, access, privacy and security of shared health information. It shall be representative of all organizations and stakeholder groups in order to ensure that it operates under the following principles:
 Transparency. Essential information regarding governance, activities and decisions of the Panel is accessible to all parties on a timely basis. Openness. Participation on the Panel is open to all affected interests. Stakeholder Representation. The governance and all activities of the Panel shall include broad representation from stakeholders without regard to ANSI membership or accreditation. Impartiality and Balance. No one interest dominates the process or is favored over another among competing interests and various stakeholders.

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- Effectiveness and Relevance. Decisions are relevant and effectively respond to regulatory and market needs, as well as scientific and technological developments.
- Consensus. Decisions are reached through a use-case driven process that encourages consensus among those affected.

46	• Performance-based. Standards specify essential characteristics rather than
47	detailed designs where possible.
48	Coherence. The process encourages coherence to avoid overlapping and
49	conflicting standards.
50	• Consistency. Where business conditions dictate that different standards
51	transmit the same information, the process assures consistency in the
52	representation of this information in the different standards.
53	• Due Process. Decisions include due process so that all views are considered
54	and a dispute resolution process exists.
55	• Timely. Decisions are reached in a timeframe that meets market expectations.
56	• Flexibility. Decision making may incorporate variation in process to meet the
57	needs of differing sectors, so long as the other principles are not compromised.
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60	3. <u>Scope</u>
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62	The Panel is a multi-stakeholder coordinating body designed to provide the process
63	within which stakeholders identify, select, and harmonize standards for communicating
64 65	and encouraging broad deployment of healthcare information throughout the healthcare
65 66	spectrum. It is use-case driven, with decision making based on industry needs. Utilizing information from stakeholders, the Panel will facilitate the development of harmonized
67	implementation guidelines and information policies, including SDO work products (e.g.
68	standards, technical reports). These policies, profiles and work products (e.g.
69	establishing privacy, security and interoperability among healthcare software applications.
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71	In conducting its work, the Panel, as appropriate, will coordinate with other national,
72	regional and international groups addressing healthcare informatics with the goal of
73	realizing globally relevant standards.
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75	The Panel and all sub-groups shall operate in accordance with approved operating
76	procedures.
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78 79	4 Healthean Information Technology Standards Daval (HITSD)
80	4. <u>Healthcare Information Technology Standards Panel (HITSP)</u>
80 81	4.1 Panel Members
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83	Membership in the Panel is open to all affected parties. Membership in the Panel shall be
84	by organization and consist of four categories:
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86	 Standards development organizations (SDOs) which shall be defined as SDOs
87	accredited by ANSI in health informatics and implementation of EHR systems; SDOs
88	or other organizations responsible for the standards chosen by the Consolidated
89	Health Informatics (CHI) initiative; SDOs or other organizations put forth by the
90	respondents to the November 2004 HHS RFI on the development and adoption of a
91	NHIN; SDOs under the Institute of Electrical and Electronics Engineers-Standards

- 92 Association (IEEE-SA) with a focus on health care and health informatics; SDOs that 93 serve as US Technical Advisory Group (TAG) Administrators under the International 94 Organization for Standardization (ISO) and/or the International Electrotechnical 95 Commission (IEC) with a focus on health care and health informatics; and other 96 SDOs nominated by expert cross-agency sources in the Federal government; It shall be the objective of the Panel over the term of this contract to ensure that at least two-97 98 thirds of those eligible to join the Panel in the SDO category do so. 99 100 Non-SDO stakeholder organizations which shall be defined as: recognized national 101 associations or other similar types of organizations that have broad national membership constituencies of clinicians and providers and their representative 102 103 organizations; safety net providers and their representative organizations; vendors 104 that develop, market, install, and support health IT products and their representative organizations; health care purchasers or employers and their representative 105 organizations; health care payers or health insurance companies and their 106 107 representative organizations; public health agencies and their representative 108 organizations; national organizations with a broad representation of stakeholders with 109 an interest in healthcare information technology standards; and clinical and health-110 services researchers' representative organizations; 111 112 Governmental bodies which shall be defined as: Federal, state, and local agencies; and coordinating bodies with responsibilities for and/or a relationship to healthcare 113 114 information technology used in the public sector; and 115 116 Consumers who shall be identified as: consumer organizations with an interest in health information technology standards: 117 118 119 4.2 Officers: 120 121 ANSI shall appoint a non-voting Chair subject to approval by the Office of the National Coordinator (ONC) and the ratification of a majority vote of the HITSP. If a Chair 122 123 candidate either is not approved by ONC or not ratified by the Board, ANSI shall submit a new candidate for ratification. 124 125 126 The Chair shall facilitate Panel meetings and shall represent the Panel to the external community, including AHIC, and convene Board meetings. 127 128 129 The Chair shall appoint Committee chairs subject to ratification by Committee members. 130 131 The Chair may call at his or her discretion an executive session open to only Board 132 members. It is understood that executive session is for discussion only and that no formal decisions will be taken during an executive session. Agenda items for executive session 133 134 shall not include topics which are subject to Board and/or Panel votes. 135 136 The Board shall nominate several candidates for Vice Chair from its members, one of
- 137 whom shall be appointed by ANSI as Vice Chair. The Vice Chair shall assume the role

Deleted: and any other United States citizen interested in the development of health information technology standards or related activities, who is not eligible for membership under any other membership category

	ir in the Chair's absence; however the Vice-Chair will not automatically become	Deleted: absence	
) <u>Chair,</u>)	should the Chair be unable to serve	Deleted: .	
	he Chair and Vice Chair shall serve two-year terms and may be re-ratified for one		
additi	onal two-year term.		
42 D	and Deenonsibilities		
4.3 <u>P</u>	nel Responsibilities		
The re	sponsibilities of the Panel shall include, but not necessarily be limited to:		
The R	a. Facilitate the timely development and harmonization of standards responsive		
	to identified use cases;		
	b. Elect HITSP Board members;		
	c. Ratify Panel chairperson;		
	d. Approve and ratify all Panel governance documents and operating procedures;		
	e. Ratify and adopt HITSP committee deliverables such as: use case		
	recommendations, gap and duplication analyses, evaluation of relevant		
	standards to meet use case requirements, a standards change management		
	process, and implementation guidelines;		
	f. Recommend priorities to AHIC among proposed use cases to solve health		
	information exchange issues and implement AHIC decisions in these matters;		
	g. Ratify a self-sustaining business model presented by the Board that ensure the		
	ongoing viability and financial sustainability of the Panel beyond the contract;		
	h. Do and perform all other acts as may be necessary or appropriate to the		
	conduct of the Panel's activities.		
4.4 P	nnel Voting Requirements		
HITSI	P membership is organizational. Each organizational member has one vote.		
Votin	in person, electronically or other such approved means shall require a quorum of		
33% of Panel members voting, including abstentions. Prior to a formal vote, there shall			
	day review and comment period for all members. ¹ All votes shall be open, and the		
	of the voting shall be available to all Panel organizational members.		
Panel	members elect the Board. HITSP Board members are elected by a majority of		
those	voting.		
For al	other votes, approval is determined by no less than a 66% affirmative vote of		
	voting.	Deleted: ¹ Voting requirements	
		associated with the Panel's inaugura meeting may be modified due to tim	
		constraints resulting from deadlines	
		imposed through the Panel's initial federal contract. For votes to be take	
		the Panel's first meeting, the review	
		period may be reduced to no less that	
5. <u>Hľ</u>	CSP Board	days. However, the votes taken with shortened review period shall be lim	
		to organizational issues (election of t Board, approval of operating proced	
1		and similar types of matters).	

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- 184 5.1 HITSP Board Membership
- 186 The HITSP Board (the Board) shall be the governing body of the Panel.

The Board shall consist of the following voting members, who shall be elected from themembers of the Panel:

- Eight (8) representatives elected by the standards development organizations from the membership of the Panel (but no more than one representative from any one SDO).
- A minimum of one (1) representative from each of the eight (8) following 195 non-SDO stakeholders: recognized national associations or other similar types 196 of organizations that have broad national membership constituencies of 197 clinicians and providers and their representative organizations; safety net 198 199 providers and their representative organizations; vendors that develop, market, install, and support health IT products and their representative organizations; 200 201 health care purchasers or employers and their representative organizations; health care payers or health insurance companies and their representative 202 203 organizations; public health agencies and their representative organizations; national organizations with a broad representation of stakeholders with an 204 205 interest in healthcare information technology standards; and clinical and health-services researchers' representative organizations; and 206 207 Two (2) representatives, appointed by ONCHIT, from either government 208
 - agencies or coordinating bodies representing various government agencies;
 - A minimum of one (1) healthcare consumer representative;
 - One (1) ex-officio member appointed by ONCHIT;
- 215 The SDO representatives shall be elected for two-year, staggered terms by majority vote of the SDO members; the non-SDO representatives shall be elected for two-year. 216 staggered terms by majority vote of the non-SDO members : consumer organization 217 218 members. Board members are limited to three consecutive terms. SDO, non-SDO and 219 consumer representatives must be endorsed by their respective SDO, national association 220 or o<u>rganization</u>. 221 222 If a Board member is unable to complete his or her term of office, his or her category (e.g. 223 SDO, non-SDO, or consumer organization) is to, as soon as possible, elect a replacement for the remainder of the term. 224 225
- To ensure that there is both the infusion of new thought leaders and adequate leadership to maintain momentum and continuity, the terms of the Board members will be staggered

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228 229	to ensure that no more than one half of the Board members will be replaced in any given year.
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230 231 232 233 234 235	The Board shall be solely responsible for any changes in its operations and may make modifications based upon experiences in its operations as long as the principles of the Panel are not violated or compromised.
233 236 237	5.2 HITSP Board Responsibilities
238 239 240 241 242 243 244 245 246 247 248 249 250 251	 The Board shall have responsibility for governing the Panel's activities. These activities shall include, but not necessarily be limited to: a. Development of operating guidelines and other such operating procedures necessary to perform its work as long as they are consistent with the principles of this Charter; b. Recommend governance changes to the Panel for ratification; c. Ensure that the principles of this Charter and governance documents are upheld and maintained; d. Provide direction and guidance for the development of use case recommendations; e. Attempt to resolve or mediate conflicts among standards-related and standards-impacted organizations and take appropriate follow-up action or make appropriate recommendations to involved parties;
252 253 254 255	f. Formation of Panel committees of sufficient number to accomplish the work of the Panel, and provide direction and guidance for their work;g. Approve the dissolution of Panel committees at the conclusion of their tasks;h. Ensure the coordination of Panel committee activities;
256 257 258 259	i. Appoint task groups as needed;j. In the event that a Panel committee is unsuccessful in minimizing duplication or conflict in a standard or standards, the Board will make a concerted documented effort to achieve a harmonized outcome;
260 261 262 263	 k. Within one year of the contract awarded by the Department of Health and Human Services, the Board shall recommend a self-sustaining business model to ensure the on-going viability and financial sustainability of the Panel beyond the term of the contract;
264 265 266 267	1. Upon enactment of the self-sustaining business model, ensure the fulfillment of fiduciary responsibilities of the Panel; and monitor the Panel budget within the limitations of and in coordination with outside funding (e.g. federal contracts); and
268 269 270 271 272 273	m. Do and perform all other acts as may be necessary or appropriate to the governance of the Panel's activities.

274 5.3 HITSP Board Voting Requirements

Voting approval is determined by no less than a 66% affirmative vote of those voting.
including abstentions. In person meetings and electronic votes shall require a quorum of
50% of the voting Board members. Prior to a formal vote, there shall be a 5-businessday review and comment period for all Board members. All votes shall be open, and the
results of the voting shall be available to all Panel members.

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5.4 <u>HITSP Board Meetings</u>283

284 There shall be established regularly scheduled Board meetings. In the event of an

emergency Board meeting, notice shall be given with at least 5 days advance notice

286 provided to all members for in person meetings and at least 3 days advance notice

287 provided to all members for conference calls. All meetings of the Board shall be open to

all Panel members.

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291 6. <u>Committees:</u>

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293 Through formation by the Board, Committees shall be organized by specialty domains,

be assigned approved use cases if appropriate, and consist of representation from Panel

- 295 members. When appropriate, Committees will work with a specific use case from 296 development through standards gap analysis and through standards development
- development through standards gap analysis and through standards development
 coordination and implementation. Committee membership is open to all interested Panel

members. All committee meetings and conference calls shall be open to all Panel

299 members and posted in advance. The committee chair can appoint task groups as needed.

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- 301 6.1 <u>Committee Voting Requirements:</u>
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For voting, approval is determined by no less than a 66% affirmative vote of those voting. In person meetings and electronic votes shall require a quorum of 50% of the voting

- In person meetings and electronic votes shall requirecommittee members, including abstentions
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All votes shall be open, and the results of the voting shall be available to all Panelmembers.

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- 310 6.2 <u>Committee Responsibilities</u>311
- 312 Committees ratify Committee Chairs appointed by the Board Chair.
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- 314 Committees have responsibility for initiating and implementing the Panel's activities.
- Each Committee will have its own charter. Committee Charters will be approved by theBoard.
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- 318 Committee Chairs will be responsible for ensuring consistency in all methodologies used
- 319 in committee work in accordance with the principles of this Charter.

320 7. <u>Secretariat Responsibilities:</u>321

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322	ANSI staff shall serve as secretariat to manage the business affairs of the Panel and shall:
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324	 Provide all administrative support services to the Board, membership and
325	other such groups as created by the Board including but not limited to:
326	scheduling meetings, notifying members of Panel meetings, preparing agendas,
327	issuing minutes, staffing committees except as agreed to with HIMSS for the
328	Use Case Committees; and
329	 Provide accounting, billing and other such services except for those handled
330	elsewhere by contract.
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332	ANSI, as secretariat, shall have no vote at either the Panel or Board level.