Healthcare Information Technology Standards Panel
Report from the Technical Committees

March 27, 2008
The purpose of this presentation is to provide a report from the HITSP Technical Committees regarding...

- Technical Committee Leadership/Use Cases
- Reports from the Technical Committee Co-chairs
Technical Committees were formed to focus on the initial set of AHIC breakthrough areas.

### Technical Committees

#### Provider
- EHR – Lab Reporting
- Emergency Responder – EHR
- Medication Management

#### Consumer
- Consumer Empowerment
- Consumer Access to Clinical Information

#### Population
- Biosurveillance
- Quality
In order to better conduct its new work, HITSP has implemented a new Technical Committee structure

- **Three (3) Perspective Committees** aligned with AHIC perspectives
  1. Provider
  2. Population
  3. Consumer

- **Three (3) Domain Committees** focused on healthcare domains
  1. Care Management and Health Records
  2. Security, Privacy and Infrastructure
  3. Administrative and Financial
**NEW . . . . HITSP TC Matrix Organization**

<table>
<thead>
<tr>
<th>Provider Perspective</th>
<th>Population Perspective</th>
<th>Consumer Perspective</th>
</tr>
</thead>
<tbody>
<tr>
<td>Care Management and Health Records Domain Committee</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Security, Privacy and Infrastructure Domain Committee</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Administrative and Financial Domain Committee</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Technical Committee Governance Structure

FORMER TC STRUCTURE

- HITSP Panel
  - Board of Directors
  - Technical Committee
    - Care Delivery
    - Population Health
    - Consumer Empowerment
    - Security and Privacy
  - Foundations Committee

CURRENT TC STRUCTURE

- HITSP Panel
  - Board of Directors
  - Technical Committee
    - Provider
    - Population
    - Consumer
    - Security, Privacy and Infrastructure
      - Care Management and Health Records
      - Administrative and Financial
  - Foundations Committee

Evaluation of Standards Harmonization Process for HIT
Perspective Technical Committee Leadership

- **Provider** – 189 members
  - Allen Hobbs, PhD, Kaiser Permanente
  - Steve Hufnagel, DoD/Medical Health System (MHS)
  - Steve Wagner, Department of Veterans Affairs

- **Consumer** – 187 members
  - Mureen Allen, MD, FACP, Active Health Management
  - Charles Parisot, EHR Vendor Association
  - Scott Robertson, PharmD, Kaiser Permanente

- **Population** – 158 members
  - Floyd Eisenberg, MD, MPH, Siemens Medical Solutions
  - Peter Elkin, MD, Mayo Clinic College of Medicine
  - Steve Steindel, PhD, Centers for Disease Control & Prevention
Domain Technical Committee Leadership

- **Security, Privacy, and Infrastructure** – 148 members
  - Glen Marshall, Siemens Medical Solutions
  - John Moehrke, GE Healthcare
  - Walter Suarez, MD, MPH, Institute for HIPAA/HIT Education and Research & Public Health Data Standards Consortium

- **Administrative and Financial** – 17 members
  - Don Bechtel, Siemens Medical Solutions, Convener

- **Care Management and Health Records** – 13 members
  - Keith Boone, GE Healthcare, Convener

**Total Technical Committee Membership** – 430 individuals
Use Case Development Process Overview

AHIC Priorities and Use Case Roadmap

2006

Consumer Empowerment Use Case
- Registration
- Medication History
- Access to Clinical Data
- Provider Permissions
- PHR Transfer

EHR Use Case
- Laboratory Result Reporting
- On-Site Care
- Emergency Care
- Definitive Care
- Provider Authentication and Authorization

Medication Management
- Medication Reconciliation
- Ambulatory Prescriptions
- Transfer of Care

Consultation & Transfers of Care
- Referrals
- Problem Lists
- Transfer of Care

Personalized Healthcare
- Laboratory Genetic / Genomic Data
- Family Medical History

Public Health Case Reporting
- Case Reporting
- Bidirectional Communication
- EHR Data

Immunizations & Response Management
- Resource Identification
- Vaccine
- EHR Data

Quality
- Hospital Measurement and Reporting
- Clinician Measurement and Reporting
- Feedback to Clinicians

Biosurveillance Use Case
- Visit
- Utilization
- Clinical Data
- Lab and Radiology

2007 Use Cases

Remote Monitoring
- Remote Monitoring of Vital Signs and Labs (Glucose)

Remote Consultation
- Structured email
- Reminders
- Online Consultation

2008 Use Cases

CE.3.0 Administrative features
CE.3.1 Appointment scheduling
CE.3.2 Demographic profile
CE.3.3 Billing account profile
CE.3.4 Insurance eligibility & claims
CE.3.5 Financial recordkeeping & management
CE.3.6 Reminders examples
CE.4.0 Annual checkups
CE.4.1 Cancer screening
- mammogram
- colonoscopy
CE.4.3 Colon screening
- colonoscopy
- fecal occult
CE.4.4 Screening
CE.5.0 Summary of healthcare encounters
CE.6.0 Data of services
CE.6.1 Procedure codes
CE.7.0 Educational information
CE.7.1 Evidence based health information
CE.7.2 Decision support
CE.8.0 Treatment decision making
CE.8.1 Medications
CE.8.2 Clinical Consequences
CE.9.0 Patient health outcomes
CE.9.1 Medical events
CE.9.2 Patient reported health outcomes
CC.3.0 Glucose monitoring
CC.4.0 SpO2 monitoring
CC.5.0 Integration
CC.7.0 Vital sign monitoring
CC.11.0 Respiratory assessment
CC.12.0 Rate monitoring for chronic conditions
CC.13.0 Use in specific populations
GC.15.0 Product and services certification
GC.16.0 Data liveness constraints
GC.18.0 Patient identification for authorization and authentication
EHIC.10.0 Clinical encounters
EHIC.11.0 Anatomic pathology resources
EHIC.12.0 Radiology reports
EHIC.12.2 EHR-2.0 Machine readable and searchable
HCR.12.1 Encounter notes
HCR.12.2 Radiology reports
EHIC.12.3 Lab results

2009 and Beyond

CQI.3.0 Clinical decision support
CQI.3.1 Clinical decision support
CQI.3.3 Expanded ambulatory quality measures
BIO.12.0 Clinical symptomology
BIO.12.1 Integration with EHRs
BIO.12.4 Health alerting/MEM
alarms
BIO.12.5 Collaborative discussions
BIO.12.2 Web pages
BIO.12.3 Chemotherapy
BIO.12.4 Treatment
BIO.12.6 Isolation
BIO.12.7 Disease registry
BIO.12.8 ADVERSE event reporting
BIO.12.9 Devices, drugs, biologic
BIO.12.10 Cardiology
BIO.12.11 Medication errors
BIO.12.12 Ordering/ prescribing/ dispensing
BIO.12.13 Drugdrug, drugherbal interaction decision support
BIO.12.14 Linkage to FDA
structured product labeling
Database results
BIO.12.15 Public health information
network
PHIN can be leveraged
BIO.12.16 National notifiable disease conditions have been identified
AHIC.10.0 Lab medications, allergies, immunizations
AHIC.20.0 Secure messaging/telephonic
AHIC.30.0 Clinical decision support
AHIC.31.0 Biomedical communications
AHIC.32.0 Lab results
AHIC.33.0 Anatomic pathology
results
AHIC.34.0 Radiology reports
AHIC.35.0 Social history
AHIC.36.0 Procedure reports
AHIC.37.0 Medications
AHIC.38.0 Diagnostics
AHIC.39.0 Cross-organizational
integration
AHIC.40.0 Adverse event reporting
AHIC.41.0 Cross-event reporting
AHIC.42.0 Clinical decision support
AHIC.43.0 Biomedical communications
AHIC.44.0 Patient consent
AHIC.45.0 Consent management
AHIC.46.0 Legal liability & regulatory
AHIC.47.0 Consumer consent
CCHT
CCHT.10.0 Patient safety
CCHT.20.0 Transfer of care
HITSP.1.1.5 Text reports
HITSP.1.1.5 Numeric results
HITSP.1.7 Images
HITSP.3.2.21 HIPAA covered entities
HITSP.1.2.1 KX2/Claims
attachment

Round 1
Round 2
Round 3
Round 4
### New AHIC Use Cases (2008)

<table>
<thead>
<tr>
<th>Provider</th>
<th>Consumer</th>
<th>Population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Consultations and Transfers of Care</td>
<td>Remote Monitoring</td>
<td>Immunizations and Response Management</td>
</tr>
<tr>
<td>Personalized Healthcare</td>
<td>Patient – Provider Secure Messaging</td>
<td>Public Health Case Reporting</td>
</tr>
</tbody>
</table>
Use Cases Year 3

Provider Perspective Technical Committee

– **Consultations and Transfers of Care** -- The exchange of information between clinicians, particularly between requesting clinicians and consulting clinicians, to support consultations such as specialty services and second opinions.

– **Personalized Healthcare** - The exchange of genomic/genetic test information, family health history and the use of analytical tools in the electronic health record (EHR) to support clinical decision-making.
Use Cases Year 3

Consumer Perspective Technical Committee


– **Patient-Provider Secure Messaging** -- Patients consult with their healthcare clinicians remotely using common computer technologies readily available in home and other settings.
Use Cases Year 3

Population Perspective Technical Committee

– **Immunizations and Response Management** – The ability to communicate a subset of relevant information about needs for medication and prophylaxis resources, about resource availability, about their administration and about the status of treated and immunized populations.

– **Public Health Case Reporting** - Leveraging electronic clinical information to address population health data requirements.
The purpose of this presentation is to provide a report from the HITSP Technical Committees regarding...

- Technical Committee Leadership/Use Cases
- Reports from the Technical Committee Co-chairs
Report from Population Perspective Technical Committee

- **Biosurveillance v3.0 Changes**
- Privacy & Security
- Harmonize Statement on Nursing Terminology with ER-EHR and Quality
Report from Population Perspective Technical Committee

- New Construct for IS06
  - Transaction T31 – Document Reliable Interchange (XDR)
  - Uses the XDS defined metadata formats in a simpler environment in which the communicating parties have agreed to a point-to-point interchange rather than communicating via document sharing

  Direct interchange between EHRs, PHRs, Quality Measurement Organizations, Public Health Authorities and other healthcare IT systems in the absence of a document sharing infrastructure

  Content: clinical documents, quality documents or public health documents

  Point-to-point network-based communication
  - Companion to the IHE Cross-Enterprise Document Sharing (XDS) Integration Profile
Report from Population Perspective Technical Committee

- New Construct for IS06
  - Transaction T31 – Document Reliable Interchange (XDR)

Figure 2.1.3-1 Document Reliable Interchange Actor Interactions
Report from Population Perspective Technical Committee

- TP 47 HAVE Update
  - 15 day public review period announced 17 March 2008
  - Expected approval 31 March 2008
  - Next Step – OASIS-wide ballot – hopefully by end of Q2 2008

- Propose Domain TCs for Existing Constructs Used by IS02, IS06

- Propose List of New Constructs – Based on Outstanding Work from IS02 (Biosurveillance), IS06 (Quality)
# Evaluation of Standards Harmonization Process for HIT

## Report from Population Perspective Technical Committee – Outstanding Work IS02, IS06

<table>
<thead>
<tr>
<th>Work Topics #</th>
<th>Work Topic Description</th>
<th>IS / Construct</th>
<th>Proposed Target Domain TC</th>
</tr>
</thead>
<tbody>
<tr>
<td>PopTC-1</td>
<td>Measurement Criteria Document</td>
<td>IS-06</td>
<td>Care Management &amp; Health Records</td>
</tr>
<tr>
<td>PopTC-2</td>
<td>Measurement Criteria Message</td>
<td>IS-06</td>
<td>Care Management &amp; Health Records</td>
</tr>
<tr>
<td>PopTC-3</td>
<td>Validation and Data Quality Checking</td>
<td>IS-06</td>
<td>Administrative / Financial</td>
</tr>
<tr>
<td>PopTC-4</td>
<td>Quality Measurement Document Aggregate</td>
<td>IS-06</td>
<td>Care Management &amp; Health Records</td>
</tr>
<tr>
<td>PopTC-5</td>
<td>Quality Measurement Message Aggregate</td>
<td>IS-06</td>
<td>Care Management &amp; Health Records</td>
</tr>
<tr>
<td>PopTC-6</td>
<td>Derived Information</td>
<td>IS-06</td>
<td>Care Management &amp; Health Records</td>
</tr>
<tr>
<td>PopTC-7</td>
<td>Case Review Message</td>
<td>IS-06</td>
<td>Care Management &amp; Health Records</td>
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<td>PopTC-8</td>
<td>Case Review Message</td>
<td>IS-06</td>
<td>Care Management &amp; Health Records</td>
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<td>PopTC-9</td>
<td>Clinical Decision Support</td>
<td>IS-02</td>
<td>Care Management &amp; Health Records</td>
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<td>PopTC-10</td>
<td>Clinical Decision Support</td>
<td>IS-06</td>
<td>Care Management &amp; Health Records</td>
</tr>
</tbody>
</table>
Report from Population Perspective Technical Committee – Clinical Decision Support Overview

- Development of Requirement List for Clinical Decision Support
  - Jerry Osheroff – Overview of Clinical Decision Support
    - Five Rights
    - Seven Intervention Types
  - Broad Overview of Requirements for CDS for Electronic Interchange

- Review of Formalisms
  - Robert Jenders – Arden Syntax
  - Robert Dunlop – GELLO
  - Peter Elkin – OWL
  - John Sowa – Common Logic

- Creation of Next Steps – Coordination with Care Management and Health Records Domain
Report from Population Perspective Technical Committee – Clinical Decision Support Overview

- Requirements for CDS for Electronic Interchange
  - Value Set
  - Vocabularies (e.g., RxNorm, ICD9)
  - Knowledge bases (drug-drug interactions)
  - Logic algorithms – methods for computation
  - Care Plans / Protocols
  - Local implementation, e.g.,
    - Context of human factors engineering
    - Validation of safety critical analysis
      (general in defining knowledge base and individual)
    - Content requirement
  - Decision Trails
  - Time-based reasoning

- Criteria (Exclusion / Inclusion)
- Risk Computation
- Data Sets / Inputs
- Trigger events (simple, complex)
- Action Items (e.g., notification)
- Context awareness

Evaluation of Standards Harmonization Process for HIT
Report from Population Perspective Technical Committee

- Immunization and Response
  - Broad overview of Use Case
    - Begin analysis for RDSS
    - Review of Stakeholders
    - Privacy and Security Issue Review to be Initiated
    - Evaluate role of PHR
  - Suggestions on New Constructs
    - Immunization Schedule Content
    - Update Information to Immunization Registry
    - Query and Response with Immunization Registry
    - Adverse Event Report (Overlap with Public Health Reporting)
    - Supply Chain Management
      - Vaccine Recall
    - Clinical Decision Support Content (Immunization Schedules, Immunization Reminders) – TBD
Report from Population Perspective Technical Committee

› Public Health Reporting
  – Broad Overview of Use Case
    › Begin analysis for RDSS
    › Approaching from Adverse Event aspect initially, then Public Health Case Reporting
    › Stakeholder Review
  – Suggestions for New Constructs
    › Adverse Event Reports
      - FDA – MedWatch, Vaccine Reporting (VAERS)
      - CDC – Healthcare Associated Infection Reporting
      - AHRQ – Sentinel Event / Adverse Reaction Reporting
    › Public Health Case Reporting
    › Reporting Criteria Content
    › Clinical Decision Support Content (Trigger Events) – TBD
## Report from Consumer Perspective Technical Committee – Disposition of 2008 Work Items

<table>
<thead>
<tr>
<th>SOW #</th>
<th>Summary Statement of Work</th>
<th>Disposition</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>Processing Updates to Registration and Medication Data</td>
<td>Ongoing CPTC</td>
</tr>
<tr>
<td>4</td>
<td>Provider Role in Registration Data</td>
<td>CMHR-TC C32</td>
</tr>
<tr>
<td>5</td>
<td>Dose Calculation in Medication Data</td>
<td>CPTC 2009</td>
</tr>
<tr>
<td>6</td>
<td>Advance Directives (AD)</td>
<td>CMHR-TC new construct</td>
</tr>
<tr>
<td>7</td>
<td>Consumer-friendly Presentation of Clinical Information</td>
<td>SPI-TC new construct</td>
</tr>
<tr>
<td>8</td>
<td>PHR Portability – Network based Transfer of PHR Content</td>
<td>SPI-TC TP13</td>
</tr>
<tr>
<td>9</td>
<td>Permission Lists for PHR Portability</td>
<td>Ongoing CP/SPI-TC</td>
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<tr>
<td>10</td>
<td>Distributed Management of Access Control</td>
<td>SPI-TC TP20</td>
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<tr>
<td>11</td>
<td>Provider List(s)</td>
<td>AF-TC new construct</td>
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<tr>
<td>12</td>
<td>Audit Logs / Disclosure Logs</td>
<td>Ongoing CP/SPI-TC</td>
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<tr>
<td>13</td>
<td>PHR Location</td>
<td>SPI-TC TP13</td>
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## Disposition of Existing CPTC Constructs

<table>
<thead>
<tr>
<th>Construct</th>
<th>Construct Name</th>
<th>IS's Where Used</th>
<th>Target Domain TC</th>
<th>Co-Chair Lead</th>
<th>CPTC SOW#</th>
</tr>
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<tbody>
<tr>
<td>TP13</td>
<td>Manage Sharing of Documents</td>
<td>IS03</td>
<td>Security, Privacy &amp; Infrastructure</td>
<td>Charles Parisot</td>
<td>8, 13</td>
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<tr>
<td>T33</td>
<td>Transfer of Documents on Media</td>
<td>IS05</td>
<td>Security, Privacy &amp; Infrastructure</td>
<td>Charles Parisot</td>
<td></td>
</tr>
<tr>
<td>C32</td>
<td>Summary Documents Using CCD</td>
<td>IS03, IS05</td>
<td>Care Mgmt &amp; Health Records</td>
<td>Scott Robertson</td>
<td>4</td>
</tr>
</tbody>
</table>

## Proposed New Constructs From Previous CPTC Use Cases Requirements Not Yet Addressed

<table>
<thead>
<tr>
<th>Proposed Title</th>
<th>CPTC SOW #</th>
<th>IS where gap identified</th>
<th>Target Domain TC</th>
<th>Co-Chair Lead</th>
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<tr>
<td>Consumer-friendly Presentation of Clinical Information</td>
<td>7</td>
<td>IS03 v3.0, IS05 v1.0</td>
<td>Security, Privacy &amp; Infrastructure</td>
<td>Mureen Allen</td>
</tr>
<tr>
<td>Provider List(s)</td>
<td>11</td>
<td>IS03 v3.0, IS05 v1.0</td>
<td>Administrative &amp; Financial</td>
<td>Mureen Allen</td>
</tr>
<tr>
<td>Advance Directives</td>
<td>6</td>
<td>IS03 v3.0, IS05 v1.0</td>
<td>Care Mgmt &amp; Health Records</td>
<td>Scott Robertson</td>
</tr>
</tbody>
</table>
Report from Consumer Perspective Technical Committee – New Use Case Status

➢ Remote Monitoring
   - Preliminary Read-through and Requirements Review
   - High-level Work Item Analysis and Scoping Discussion (Specific Focus on Proposed Datasets / Source Devices)
   - High-level Requirements Review and Construct Re-use Feedback from SPI-TC
   - Solicitation of Related Industry Initiatives and Scoping Variables from CP-TC Membership

➢ Patient-Provider Secure Messaging
   - Preliminary Read-through and Requirements Review
   - High-level Work Item Analysis and Scoping Discussion
   - High-level Requirements Review and Construct Re-use Feedback from SPI-TC
Report from Provider Perspective Technical Committee – Consultations and Transfers of Care Use Case

- Beginning work on RDSS, expect to complete RDSS in June 2008
- Divided into 2 scenarios
  - Consultations
    - Requesting clinician
  - Transfers of Care
    - Discharging/transferring setting
    - Receiving setting
    - Patient
- Consultations scenario has 3 perspectives
  - Requesting clinician
  - Consulting clinician
  - Patient
- Transfers of care scenario has 3 perspectives
  - Discharging/transferring setting
  - Receiving setting
  - Patient
Report from Provider Perspective Technical Committee – Consultations and Transfers of Care Use Case

- Currently identified issues and obstacles
  - Lack of standardization of data content
  - Variability of content shared in consultations
  - Variability of content shared in transfers
  - Communication of updated patient data
  - No standard process for receiving updated information
  - Ability to identify in-network vs. out-of-network clinicians/facilities
  - Differences in single consultation and recurring consultations (i.e. physical therapy)

- Weekly meetings tentatively set for Thursday 2:00 – 4:00pm ET
Report from Provider Perspective Technical Committee – Personalized Healthcare Use Case

- Beginning work on RDSS, expect to complete RDSS in June
  - Divided into 2 scenarios
    - Clinical Assessment
      - Genetic testing, reporting and clinical management
    - Clinical Assessment scenario has 2 perspectives
      - Clinician
      - Consumer
    - Genetic testing, reporting and clinical management scenario has 3 perspectives
      - Clinician, Testing laboratory, and Consumer
Report from Provider Perspective Technical Committee – Personalized Healthcare Use Case

- Issues and obstacles identified
  - Confidentiality, privacy, security and data access
  - Family health history information interoperability and privacy
  - Genetic/genomic data interoperability

- Will be meeting for 2 hours each week, day and time TBD
Report from Provider Perspective Technical Committee

Topics

- IS07 – Medication Management
- T40 – Patient Generic Health Plan Eligibility Verification
- T42 – Medication Dispensing Status
- TP43 – Medication Orders
- TP46 – Medication Formulary and Benefits Information
- Gaps and Overlaps Identified
IS07 – Medication Management

- The goal of the Medication Management Use Case is improving medication management to promote patient safety and support relevant aspects of the medication management cycle.

- Not all long-term care needs can be addressed explicitly, areas are highlighted where the existing considerations may also be appropriate for long-term care.

- Gaps and overlaps were found in the areas of data representation, terminologies/code sets and information exchange formats. Gaps were referred to appropriate domain TCs for resolution and overlaps were referred to the Foundations Committee for harmonization.
IS07- Medication Management

- Use case describes medication management in two scenarios.
  - Inpatient setting, includes medication reconciliation and ordering, along with other supporting interactions in the hospital
  - Ambulatory setting, addresses access to current medication and allergy information, and support for electronic prescribing.

- Each scenario is then broken into 3 perspectives
  - Clinician perspective
  - Pharmacist perspective
  - Consumer perspective
IS07 – Medication Management - Roadmap
## New and Re-Used HITSP Constructs

<table>
<thead>
<tr>
<th>Construct</th>
<th>N/R</th>
<th>Description</th>
</tr>
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<tbody>
<tr>
<td>TP13</td>
<td>R</td>
<td>Manage Sharing of Documents Transaction Package</td>
</tr>
<tr>
<td>T15</td>
<td>R</td>
<td>Collect and Communicate Security Audit Trail Transaction</td>
</tr>
<tr>
<td>T16</td>
<td>R</td>
<td>Consistent Time Transaction</td>
</tr>
<tr>
<td>T17</td>
<td>R</td>
<td>Secured Communication Channel Transaction</td>
</tr>
<tr>
<td>C19</td>
<td>R</td>
<td>Entity Identity Assertion Component</td>
</tr>
<tr>
<td>TP20</td>
<td>R</td>
<td>Access Control Transaction Package</td>
</tr>
<tr>
<td>TP22</td>
<td>R</td>
<td>Patient ID Cross-Referencing Transaction Package</td>
</tr>
<tr>
<td>T23</td>
<td>R</td>
<td>Patient Demographics Query Transaction</td>
</tr>
<tr>
<td>TP30</td>
<td>R</td>
<td>Manage Consent Directives Transaction Package</td>
</tr>
<tr>
<td>C32</td>
<td>R</td>
<td>Summary Documents Using HL7 Continuity of Care Document Component</td>
</tr>
<tr>
<td>T40</td>
<td>N</td>
<td>Patient Generic Health Plan Eligibility Transaction</td>
</tr>
<tr>
<td>T42</td>
<td>N</td>
<td>Medication Dispensing Status Transaction</td>
</tr>
<tr>
<td>T43</td>
<td>N</td>
<td>Medication Orders Transaction</td>
</tr>
<tr>
<td>T46</td>
<td>N</td>
<td>Medication Formulary and Benefits Information Transaction</td>
</tr>
</tbody>
</table>
T40 – Patient Generic Health Plan Eligibility Verification

- Provides status of a health plan and details regarding patient liability for a base set of generic benefits or services

- Uses the ASC X12 Insurance Subcommittee X12N Implementation Guides Version 004010 plus Addenda 004010A1 and is further constrained via the CAQH CORE Phase 1 Operating Rules for the ASC X12 270/271 Eligibility and Benefits Inquiry and Response.
T40 – Patient Generic Health Plan Eligibility Verification

- Two Technical actors
  - Eligibility Information Receiver that asks about an individual’s health plan insurance eligibility
  - Eligibility Information Source that holds and maintains the information regarding an individual’s health plan insurance eligibility

- Two Transactions
  - Eligibility request is initiated via the X12N 270
  - Eligibility information is returned via the X12N 271
T42 – Medication Dispensing Status

- Provides the dispensing status of an ordered prescription to the prescriber.

- Three possible statuses
  - Dispensed
  - Partially dispensed
  - Not dispensed
T42 – Medication Dispensing Status

- Two Technical Actors
  - Medication Status Receiver that gets a dispensing status
  - Medication Status Dispenser that provides a dispensing status
TP43 – Medication Orders

- Specifies how to create/manage medication orders
- Used for new prescriptions, refill requests, prescription change requests, and prescription cancellations.
TP43 – Medication Orders

- Two Technical Actors
  - Medication Order Prescriber that initiates medication order
  - Medication Order Filler that responds to the order request

- Describes two methods for orders
  - NCPDP SCRIPT v 8.1 for e-prescribing and v10.1 long term care and all other ambulatory prescriptions
  - HL7 v2.5/2.5.1 – Inpatient Pharmacy/Treatment Orders
TP46 – Medication Formulary and Benefits Information

- Performs eligibility check for a specific patient’s pharmacy benefits and obtains the detailed medication formulary and benefit information
TP46 – Medication Formulary and Benefits Information

Eligibility Information Receiver

Eligibility Information Request (X12N 270)

Eligibility Information Response (X12N 271)

at NCPDP Telecommunication

NCPDP Telecommunication Request

NCPDP Telecommunication Response

Medication Formulary and Benefits Publisher

Pharmacy Medication Formulary and Benefits Request (NCPDP Formulary and Benefit request)

Pharmacy Medication Formulary and Benefits Response (NCPDP Formulary Benefit response)

Medication Formulary and Benefits Source
TP46 – Medication formulary and Benefits Information

- Four Technical Actors
  - Eligibility Information Receiver that initiates a query about an individual’s insurance eligibility, coverage and benefits
  - Eligibility Information Source that holds/maintains information regarding an individual’s insurance eligibility, coverage and benefits and responds to queries
  - Medication Formulary and Benefits Retriever that initiates queries about an individual’s formulary and benefits information
  - Medication Formulary and Benefits Source that maintains an individual’s formulary and benefits information and responds to queries
TP46 – Medication formulary and Benefits Information

- Two data flows for eligibility check
  - Request initiated via the X12N 270 and information returned via the X12N 271 response
  - Request initiated via the NCPDP Telecommunication request and information returned via the NCPDP Telecommunication response

- One data flow for detailed formulary and benefit information
  - Request initiated via NCPDP Formulary and Benefits request and information returned in NCPDP Formulary and Benefits response
Identified Gaps and Assignments

- No standard exists for exchange of information from drug knowledge suppliers. Exchange only occurs through proprietary formats. Provider Perspective TC

- The DEA does not allow electronic prescribing for controlled substances. Prescribers must use a paper prescription for these drugs. Security, Privacy and Infrastructure Domain TC

- No standard terminology exists for implanted medication infusion devices. Consumer Perspective TC

- NCPDP SCRIPT 10.1 does not support the use of FMT coded fields for Drug Form, Drug Strength and Drug Unit of Measure. NCPDP SCRIPT 10.5 addresses these and should be approved in July. Administrative and Finance Domain TC
Identified Gaps and Assignments (cont.)

- Not all prescribers are eligible to obtain a NPI. After further investigation, discovered that all prescribers are eligible for a NPI, some haven’t applied. NPI will be required in next version.

- A standard for drug identifiers based on usage (for example, a prescribing system perspective versus a pharmacy system perspective.) In electronic prescribing, the RxNorm Codes may provide standardized identifiers for drugs for the prescribing system perspective, which will provide the dispensing system an identifier in addition to text. The pharmacy system uses the National Drug Code (NDC) for dispensing, but this code is too specific for the prescribing system. Foundations Committee
Identified Gaps and Assignments (cont.)

- The information required by the NCPDP standard allows optional data elements and/or lists about coverage, without requiring the details of coverage. NCPDP has a task force working on this. Foundations committee

- The mechanisms to determine the routing of the ASC X12 270/271 messages are not clearly understood and currently performed using proprietary solutions. Security, Privacy and Infrastructure Domain TC

- Information about the medication expiration date of medication is not included in the HL7 Continuity of Care Document. Care Management Domain TC

- C32 needs to describe how the sources of Fill Status will use C32 Fill Status vocabulary. Care management Domain TC
Identified Overlaps and Assignments

- Medication orders are sent using NCPDP SCRIPT 10.1 and HL7 version 2.5/2.5.1 Pharmacy/Treatment Orders. Foundation Committee


- CAQH CORE Phase 1 Operation Rules and HITSP/T17 Secured Communication Channel. Security, Privacy and Infrastructure Domain TC
We committed to produce IS01 with Security & Privacy constructs in the new template for March Panel approval.

This remains a minor release as planned and approved in December.

We underestimated the complexity and resources necessary to accomplish this.

We assembled a small team to complete these tasks during the F2F but still have a few details to resolve – these are scheduled for completion next week.

We will put out for review by any interested parties for a week for comment.

We will resolve comments and publish for Panel approval.

We will schedule a teleconference Panel meeting to approve during April.
Report from the Security, Privacy and Infrastructure Domain Technical Committee

- Primary areas of work:
  - Transition to new structure and expanded scope
  - Work on Current Constructs and Technical Note
  - Identity Credentials Management Workgroup
  - Assigned Constructs from TC Restructuring
  - Addressing Gaps
  - Cross-TC Issues
  - NHIN 2 Issues
  - Review and Analysis of New Use Cases
  - Work with Foundations Committee on Privacy and Security Reference Matrices

Evaluation of Standards Harmonization Process for HIT
Report from the Security, Privacy and Infrastructure Domain Technical Committee

- Transition to New Structure and Expanded Scope
  - Added the “Infrastructure” component to the Committee
  - Have recruited additional members, with specific expertise on infrastructure issues
  - Inherited additional constructs and ‘allocated’ them to Security, Privacy and/or Infrastructure
  - Members will begin to reviewing the inherited constructs to gain further understanding
Report from the Security, Privacy and Infrastructure Domain Technical Committee

- Work on Current Constructs and Technical Note
  - TN900
    -- Continuing to address identified gaps
    -- Will consider the possibility of breaking Technical Note into smaller components, as new constructs are added to the work of the Committee
  - TP20 – Access Control
    -- Update to add base authorizations
    -- Initial draft of XSPA due in May
Work on Current Constructs and Technical Note

- TP30 – Manage Consent Directives
  -- No plans to ‘disaggregate’ current construct into more granular Construct Transactions or Components
  -- Focus of work will be on identifying specific requirements for more robust confidentiality codes, functional role codes, and others. These requirements will be communicated to IHE, HL7 and other appropriate SDOs
  -- Work will also look at better clarifying how TP13 is used to carry and deploy consent directives
### Assigned Constructs from TC Restructuring

<table>
<thead>
<tr>
<th>SPI (Security, Privacy &amp; Infrastructure)</th>
<th>Technical Note</th>
<th>Assigned Construct</th>
</tr>
</thead>
<tbody>
<tr>
<td>SPI (Infrastructure) XDS</td>
<td></td>
<td>TP13 - Manage Sharing of Documents</td>
</tr>
<tr>
<td>SPI (Infrastructure) IHE PIX, HL7</td>
<td></td>
<td>TP22 - Patient ID Cross-Referencing</td>
</tr>
<tr>
<td>SPI (Infrastructure) IHE NAV</td>
<td></td>
<td>T29 - Notification of Document Availability</td>
</tr>
<tr>
<td>SPI (Infrastructure) IHE XDR (ebXML register)</td>
<td></td>
<td>T31 - Document Reliable Interchange</td>
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<tr>
<td>SPI (Infrastructure) IHE PDQ</td>
<td></td>
<td>T23 - Patient Demographics Query</td>
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<tr>
<td>SPI (Infrastructure) IHE XDM</td>
<td></td>
<td>T33 - Transfer of Documents on Media</td>
</tr>
<tr>
<td>SPI (Infrastructure) Xforms</td>
<td></td>
<td>TP50 - Retrieve Form for Data Capture</td>
</tr>
<tr>
<td>SPI (Infrastructure) TBD - tiger team discussion</td>
<td></td>
<td>TP14 - Send Lab Result Message</td>
</tr>
<tr>
<td>SPI (Infrastructure) SSL</td>
<td></td>
<td>C44 - Secure Web Connection</td>
</tr>
<tr>
<td>SPI (Infrastructure) NTP</td>
<td></td>
<td>T16 - Consistent Time</td>
</tr>
<tr>
<td>SPI (Security &amp; Privacy) BPPC, HL7 Conf Code</td>
<td></td>
<td>TP30 - Manage Consent Directives</td>
</tr>
<tr>
<td>SPI (Security &amp; Privacy) XDS, B, SAML, relates</td>
<td></td>
<td>C19 - Entity Identity Assertion</td>
</tr>
<tr>
<td>SPI (Security &amp; Privacy) XML XD* Docs - DigSig</td>
<td></td>
<td>C26 - Nonrepudiation of Origin</td>
</tr>
<tr>
<td>SPI (Security &amp; Privacy) IHE ATNA</td>
<td></td>
<td>T15 - Collect and Communicate Security Audit Trail</td>
</tr>
<tr>
<td>SPI (Security &amp; Privacy) TLS, ATNA</td>
<td></td>
<td>T17 - Secured Communication Channel</td>
</tr>
<tr>
<td>SPI (Security &amp; Privacy) XACML, WSTrust etc</td>
<td></td>
<td>TP20 - Access Control</td>
</tr>
<tr>
<td>SPI (Security &amp; Privacy) ?</td>
<td></td>
<td>T24 - Pseudonymize</td>
</tr>
<tr>
<td>SPI (Security &amp; Privacy) ?</td>
<td></td>
<td>C25 - Anonymize</td>
</tr>
</tbody>
</table>

- Existing Security and Privacy Constructs
- Newly Assigned Constructs from Restructuring
Report from the Security, Privacy and Infrastructure Domain Technical Committee

Identity Credentials Management Workgroup

- Finalized review of options and testimony from subject matter experts
- Presented formal recommendation to create an ‘Identity Access Management’ (IAM) construct
- Will supplement current Entity Identity Assertion construct
- Workgroup to develop construct documentation over the next few weeks, targeting completion by May, 2008
Report from the Security, Privacy and Infrastructure Domain Technical Committee

- Cross-TC Issue
  - Worked with Consumer Perspective TC on resolving privacy and security issues related to consent and accounting of disclosure capabilities

- NHIN 2 Issues
  - Responded to NHIN 2 concerns on the deployment of some of the SP&I constructs during the trial implementation
  - Will be fielding additional questions from NHIN, as deployment starts
Report from the Security, Privacy and Infrastructure Domain Technical Committee

- **Foundations Committee Collaboration**
  - Provide input on Foundations Committee’s Privacy and Security Reference Matrices
  - Will work with Committee to map privacy, security and infrastructure constructs to the Reference Matrices

- **Review and Analyze New Use Cases**
  - Completed first pass of all six new uses cases
  - Reviewed the applicability of base constructs (reuse) and identified potential gaps and areas of work for the coming weeks
  - Mapped current security, privacy and infrastructure constructs to information interchange requirements of use cases
Report from the Security, Privacy and Infrastructure Domain Technical Committee

- NEXT STEPS
  - Evaluate current constructs against scoped use case requirements from Perspective Technical Committee
  - Provide necessary input to Requirements, Design, and Standards Selection Specification
Report from Care Management & Health Records Domain Technical Committee

Existing Constructs

- C28 - Emergency Care Summary Document
- C32 - Summary Docs Using CCD
- C34 - Patient Level Quality Data Message
- C35 - Lab Result Terminology
- C36 - Lab Result Message
- C37 - Lab Report Document
- C38 - Patient Level Quality Data Document
- C39 - Encounter Message
- C41 - Radiology Result Message
- C48 - Encounter Document
- TP14 - Send Lab Result Message
- TP43 - Medication Orders
- TP49 - Sharing Radiology Results
- T42 - Medication Dispensing Status
Care Management & Health Records Timeline

WE ARE HERE

2008 Use Cases

2006/2007 Carryover Work

Other

Evaluation of Standards Harmonization Process for HIT

Subject to change based on TC Project Plan

TBD Based on TC Project Plan

Plan | RDSS | Comment | Construct Development | Comment | Comment Res

Plan | RDSS | Comment | Construct Development | Comment | Comment Res

2008 Use Cases v 1.0

ISC, IS02, IS03, IS04, IS05, IS06, IS07 Construct Reviews and Updates

NHIN Coordination, Implementation Testing Support, Education and Outreach

- 3/24 – 3/26 TC F2F DC Area
- 3/27/08 HITSP Panel
- 3/28 – 3/26 TC F2F DC Area
- 6/16/08 HITSP Board
- 6/23/08 HITSP Panel
- 6/30/08 HITSP Panel
- 7/28/08 HITSP Panel
- 8/1/08 HITSP Panel
- 8/29/08 HITSP Panel
- 9/1/08 HITSP Panel
- 9/1/08 HITSP Panel
- 9/29/08 HITSP Board
- 10/6/08 HITSP Panel
- 10/28 – 10/30 TC F2F Chicago
- 12/2/08 HITSP Board
- 12/8/08 HITSP Panel
Report from Care Management & Health Records Domain Technical Committee

Work Plan

- Review of 2006/2007 Use Case Constructs
  - CDA and CCD Constructs
    - C28 Emergency Care Summary Document
    - C32 Summary Documents using CCD
    - C37 Laboratory Report Document
    - C38 Patient Level Quality Data Document
    - C48 Encounter Document
  - Vocabulary
    - C35 Lab Result Terminology
    - C?? CDA/CCD Document Terminology
Report from Care Management & Health Records Domain Technical Committee

Work Plan

- Review of 2006/2007 Use Case Constructs (continued)
  - HL7 V2 Messaging Constructs and Vocabulary Consistency
    C36 Lab Result Message
    C38 Patient Level Quality Data Message
    C39 Encounter Message
    C42 Radiology Result Message
    T23 *Patient Demographics Query
    TP22 *Patient ID Cross-Referencing

* SPITC Constructs used for comparison
Report from Care Management & Health Records Domain Technical Committee

Work Plan

- New and Updated Constructs to Support 2006/2007 Use Case Gaps and Overlaps
  - Provider TC Referrals
    - Medication Management
  - Consumer TC Referrals
    - C32 Addition of Vocabulary for Advanced Directives
  - Population TC Referrals
    - C38 Encounter Document and C48 and Patient Level Quality Document Harmonization
    - Clinical Decision Support gaps for Biosurveillance and Quality
Report from Care Management & Health Records Domain Technical Committee

Work Plan

- New and Updated Constructs to Support 2008 Use Cases
  - Provider TC Referrals
    - C32 Addition of Structured Family History
    - C36 Lab Result Message for Genomic Data
    - C37 Lab Result Document update for Genomic Data
    - C39 Encounter Document update for Referral/Discharge/Transfer
  - Consumer TC Referrals
    - C32 Addition of Remote Monitoring Data
  - Population TC Referrals
    - Immunizations
    - Adverse Events
    - Clinical Decision Support
Clinical Decision Support

- Potential Constructs
  - Update Domain Knowledge
  - Define Data Set
  - Publish Value Sets
  - Trigger Events
  - Criteria Evaluation
  - Resourcing

Evaluation of Standards Harmonization Process for HIT
Report from Administrative & Financial Domain Technical Committee

- Developed initial “domain specific” area of responsibility for a framework to assist in engaging other TCs

- Reviewed assigned constructs
  - TP46 – Medication Formulary and Benefits Information
  - T40 – Patient Generic Health Plan Eligibility Verification
  - C47 – Resource Utilization

- Preliminary review of New Use Case Consultation and Transfer of Care
  - Identified potential changes to current assigned constructs, e.g., TP46, T40, & C47
  - Identify potential new construct requirements

- Joint meeting with Care Management and Health Records DTC
  - Reviewed C32 Construct – HITSP Summary Documents Using HL7 Continuity of Care Document (CCD) Component

- Joint meeting with Provider Perspective TC

- Reviewed scope of current and past Use Cases have not explicitly focused on the Administrative and Finance
Report from Administrative & Financial Domain Technical Committee

- Developed our initial work plan
  - Will hold weekly conference calls
  - Continue to review the remaining 2008 Use cases over the next 3 weeks
  - Develop a template (e.g. technical note) for the Administrative and Financial Domain Reference
  - Do a more comprehensive review of the C32 Construct