

# HIMSS<sup>®</sup>16

Conference & Exhibition

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TRANSFORMING  
HEALTH THROUGH IT



## The Sequoia Project

Connected We Stand!

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 #HIMSS16

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# Meet The Sequoia Project

## Why “The Sequoia Project”?

- Sequoia trees are among the most enduring, massive living things.
- An interconnected root system allows individual trees to support each other, making the entire system stronger.

**A thriving health IT community requires interconnected organizations working together for the benefit of all.**

Connected We Stand.

# The Sequoia Project's Role

The Sequoia Project is a trusted, independent convener of industry and government

We work to address the challenges of secure, interoperable nationwide health data sharing.



**SECURE**



**INTEROPERABLE**



**NATIONWIDE**

# Current Sequoia Project Initiatives

## eHealth Exchange™

The **eHealth Exchange** is the largest and fastest growing health data sharing network in America.

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**Carequality** facilitates consensus on a standardized, national-level interoperability framework to link all data sharing networks from across the entire healthcare ecosystem.








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**RSNA Image Share Validation Program** is an interoperability testing program to enable seamless sharing of medical images.

# Largest Health Data Sharing Network in the U.S.

Today, the **eHealth Exchange** connects:

|  |   |  |  |
|--|---|--|--|
| All 50 states  |    |   | 26,000 medical groups                        |
| 4 federal agencies<br>(DoD, VA, HHS including<br>CMS, and SSA) |    |   | 3,400+ dialysis centers                      |
| ~50% of U.S.<br>hospitals                                      |  |  | 8,300 pharmacies                             |
|  |   |  | Supporting more than<br>100 million patients |

# Carequality Interoperability Framework

A Comprehensive Framework to Unite Healthcare



**Common rules of the road:** In order for the varied participants to trust each other with health information, everyone needs to have a legal obligation to abide by the same rules.



**Well-defined technical specs:** Shared rules are not enough; clear standards must be laid out in an implementation guide that all implementers can follow and be validated against.



**A participant directory:** To connect using the common standards, systems must know the addresses and roles of each participant.

# RSNA Image Share Validation



## What is a Validation Program?

- Tests compliance of vendor systems
- Builds on successful RSNA Image Share program
- Encourages adoption of image sharing capabilities
- Standards-based interoperability spurs innovation



## Benefits for Patient & Providers

- Improves patient – provider communication
- Engages patients in their care
- Improves efficiency
- Reduces costs
- Enhances quality of care

# Moving From Pockets of Interoperability to Seamless Interoperability Nationally

## Successes

- Growing pockets of interoperability
- Enhanced care coordination is saving lives and money
- Accountable care and customer demand will fuel data sharing

## Challenges

- Still striving for a nationwide exchange
- Exchanges need to get faster
- Need to improve format and usefulness of data
- Difficulties in patient identity matching and accuracy



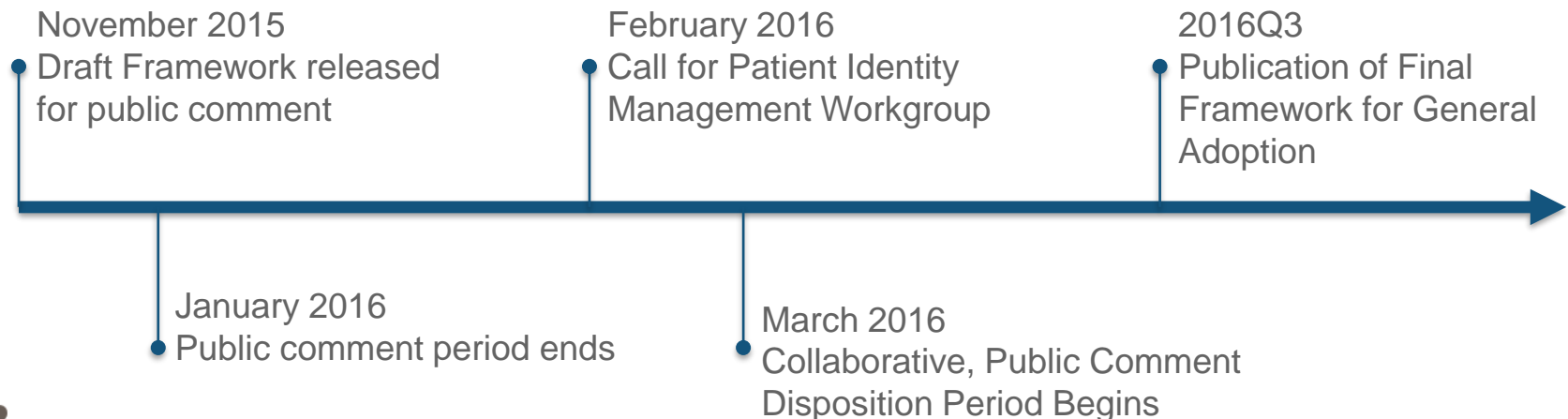
# Improving Patient Identity Management

## A Framework for Cross-Organizational Patient Identity Management

- Intermountain / CCC case study
- Patient matching maturity model
- Minimal acceptable patient matching practices



## Program Timeline



# Engaging **Patients** in Their Own Care



## eHealth Exchange's PHR Pilot

- Breakthrough use of the eHealth Exchange for individual consumers
- PHR use case
- Policy requirements
- Technical requirements
- Functional requirements



## Personal Health Records (PHR)

PHR systems capture health data entered by individuals and provide information related to the care of those individuals.

# Testing for Compliance for Simple, Continuous Exchange

## Content Testing Pilot

**Goal:** To improve implementation of health data sharing through more rigorous testing and guidance at the content level

**Strategy:**

- Build upon the C-CDA content requirements
- Add additional content requirements from the Transitions of Care Implementation guidance published by HL7®.
- Define the Continuity of Care Document (CCD)
- Detail testing methodology and scenarios to be required

*eHealth Exchange supports the content requirements and specifications defined within the 2014 Edition Meaningful Use program*

# Catching FHIR



## FHIR Pilot

- Content interoperability
- Security requirements
- Technical requirements
- Testing



## Provider Directory

- A joint-effort with HL7 Argonaut Project to develop and maintain FHIR-based provider directory
- Intended to be interoperable with IHE HPD directories

# Questions?

*Visit The Sequoia Project @ Booth 454*