



Interoperability MATTERS

an initiative of The Sequoia Project

Data Usability Workgroup

April 6, 2023

Agenda

- Welcome, Introductions, Membership, Agenda - Adam Davis, MD – 5 minutes
- Workgroup Priorities & 2023 – 2024 Timeline – Bill Gregg, MD – 5 minutes
- USCDI V4 Comments – Didi Davis – 10 minutes
- Overview of Future Efforts – V1 Implementation Guide published 12/14/22 – Co-chairs & Didi – 10 minutes
- Sequoia @HIMSS23 – Didi – 5 minutes
- Workgroup Discussion & Q&A – Didi Davis, Co-chairs and Workgroup - 25 minutes



Adam Davis, MD, Co-chair
Sutter Health



Bill Gregg, MD, Co-chair
HCA Healthcare



Didi Davis, VP
The Sequoia Project

Workgroup Members

266 Organizations

378 Participants



Healthcare Providers



Public Health



Consumer/Patient



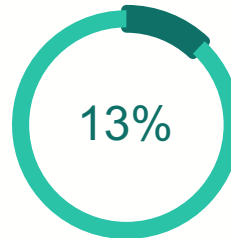
Standards Developer



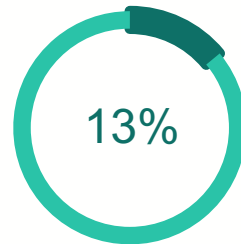
Health Plan/Payer



Federal, State, Local Government



HIN/HIEs



Other



Health IT Developers



Sequoia Member's Shape Interoperability for the Public Good



Sequoia Member's Shape Interoperability for the Public Good

 HealthCatalyst

 HEALTH
GORILLA
TRUSTED CLINICAL NETWORK

 HealthInfoNet

 HIGHMARK
HEALTH

 HIMSS

 HITRUST

 HONORHEALTH

 Humana

 imprado
improvise adapt overcome

 Indiana Health
Information Exchange

 Intermountain
Healthcare

 JCMR
JACKSON COMMUNITY MEDICAL RECORD

 KAISER PERMANENTE

 Kno2

 KONZA

 Lehigh Valley
Health Network

 LifeImage

 LYNIATE

 marble

 MatrixCare
by ResMed

 MedAllies

 Solarity

 MEDVIRGINIA

 Midato Health

 MiHIN
Shared Services

 ModMed
MODERNIZING MEDICINE

 MRO
Disclosure Management & IIC Solutions

 NC HealthConnex
Powering Health Care Outcomes

 Netsmart

 New Jersey
Innovation Institute
An NJIT Corporation

 NYeC
NEW YORK HEALTH
COLLABORATIVE

 nextgen
healthcare

 NORTH
Dakota | Health Information Network
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 onerecord

 OCHIN

Sequoia Member's Shape Interoperability for the Public Good



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HEALTH

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Health Information
Organization

 schellman
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STANFORD MEDICINE

 surescripts™

 Sutter Health

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Dell Med

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ALLIANCE

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of Veterans Affairs
Veterans Health
Administration

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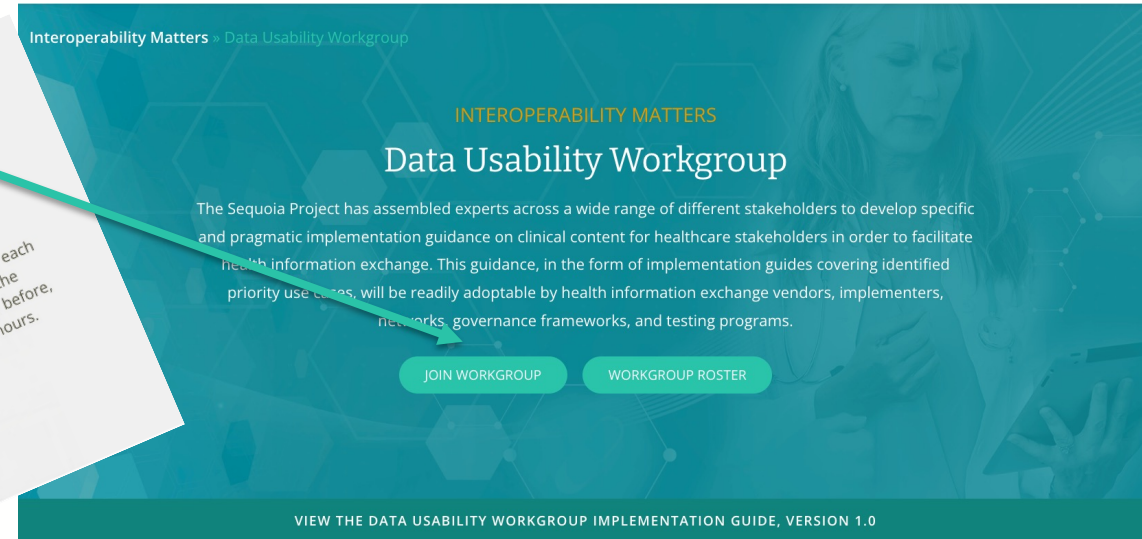
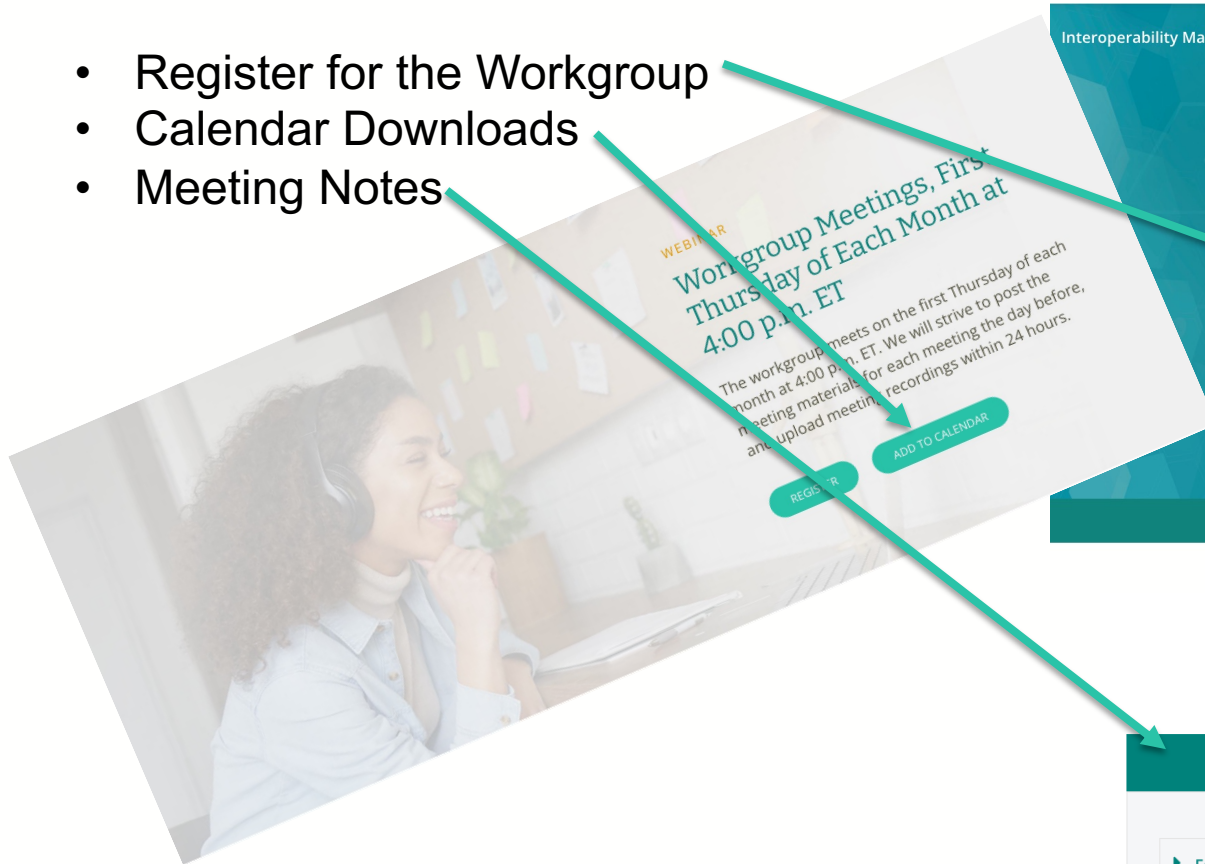
 **patientory**
association

 **SyqurX™**

 **smile**
DIGITAL HEALTH


Website, Meeting and Workgroup Logistics

- Register for the Workgroup
- Calendar Downloads
- Meeting Notes



Meeting Materials and Recordings

| 2023 | Phase 3 | Phase 2 | Phase 1 |
|-----------------------------|---------|---------|---------|
| ▶ February 2: Meeting Notes | | | |

 <https://sequoiaproject.org/interoperability-matters/data-usability-workgroup/>
Interopmatters@sequoiaproject.org

Interoperability Matters Data Usability Workgroup Priorities & 2023 – 2024 Timeline

Meeting Logistics and Timeline

- 2023 – 2024 Planned Schedule
 - Kickoff Call: February 2, 2023
 - Ongoing calls: 1ST Thursday each month
- Next Phase of Activities - Process & Timeframe
 - Phase 1 - Administration and Prioritization
 - February 2023 – June 2023
 - Phase 2: Developing Initial Drafts
 - July 2023 – June 2024
 - Phase 3: Public Comment Period/Recommended Next Steps
 - July 2024 – August 2024
 - Phase 4: Finalizing Implementation Guide and Call to Action
 - August 2024 – December 2024

Prior Work Efforts Topic Categories Used for Prioritization

2020 – 2022 Sequoia Data Usability Workgroup – Proposed Work Items



Your priorities drive our process

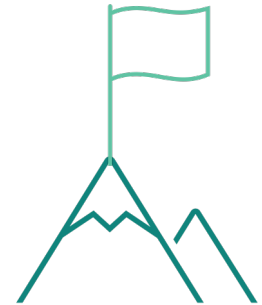
We set our course based on our members' challenges, barriers, gaps, and opportunities.



Identify



Prioritize



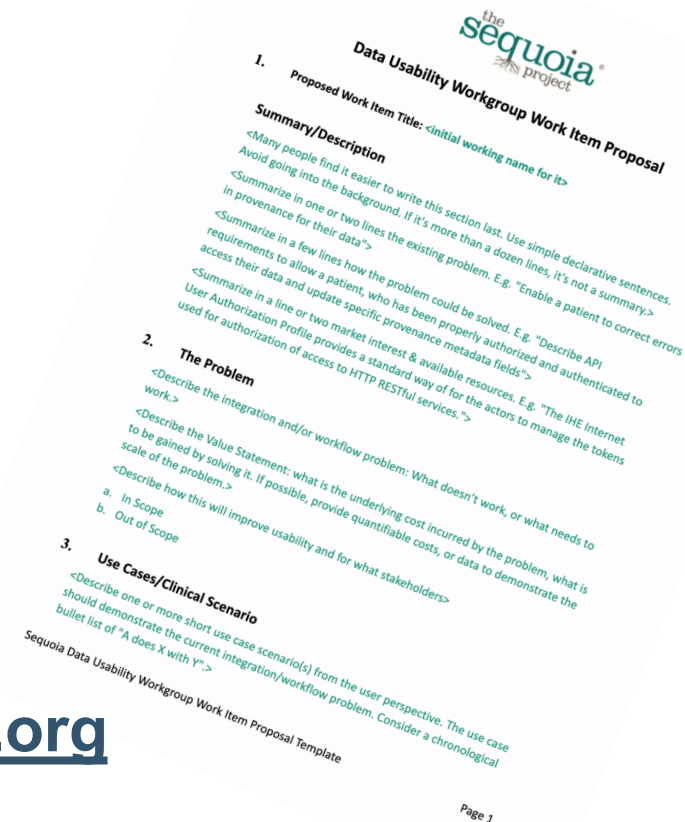
Solve

Data Usability Workgroup Work Item Proposal

- Summary/Description
- The Problem
- Use Cases/Clinical Scenario
- Standards and Systems
- Implementation Guide Applicability
- Risks/Key Challenges
- Open Issues/Notes/Comments
- Status

SUBMIT to interopmatters@sequoiaproject.org

[Data Usability Workgroup Work Item Proposal Template](#)



USCDI V4 Comments Due April 17, 2023

Clinical Notes

Clinical Notes

Narrative patient data relevant to the context identified by note types.

Consultation Note

Discharge Summary Note

History & Physical

Procedure Note

Progress Note

- Clinical Notes data class needs to include Encounter Summaries and Patient Summaries
 - The C-CDA standard defines Clinical Note Templates for the document types named in the Clinical Notes Data Class. It needs to be clarified that this data class covers support for Clinical Notes including support for “note activity” as as wholly formed encounter summaries which are Clinical Notes of these types. Specifically, the Clinical Notes data class needs to call out Clinical Notes, Clinical Note Encounter Documents, and Patient Summary Documents. Patient Summary Documents are also known as Continuity of Care Documents (CCDs) they are a type of Clinical Note which covers a span of time which may cover multiple encounters.
 - The categories can apply to collections of information gathered as a whole document, a Notes Section within a larger document, or a single Note Activity entry that holds a narrative clinical note that appears within a standard structured section.

Patient Summary and Plan

Patient Summary and Plan

Conclusions and working assumptions that will guide treatment of the patient, and recommendations for future treatment.

Assessment and Plan of Treatment

- Patient Summary and Plan data class needs to be renamed to Patient Assessment and Plan
 - The Patient Summary and Plan data class should clarify that this data class covers Patient Assessment, and Plan of Treatment information. Using the words “Patient Summary” is confusing because a “Patient Summary” is a type of Clinical Note Document that summarizes the patient’s medical history over a span of time.

Provenance

- Chain of Trust
 - To ensure data quality and usability, data is conveyed via a verifiable chain of trust from **source to end use**:
 - Starting as captured at the **source** (point of origination), then
 - Retained in the source EHR/HIT system, then
 - Transmitted from the source system, then
 - If so configured: Received, retained and ultimately transmitted from intermediary system (e.g., HIN), then
 - Received and retained by the receiving EHR/HIT system, then
 - Made available to each ultimate **end use and user** (point of access/use)

ONC Standards Version Advancement Process (SVAP)

- Blog Post - 2/21/23
 - Public comments open through May 22, 2023
- Please note that a user account is required to submit comments for the SVAP. Create a user account by clicking the **Log In** button located at the top right of the SVAP page.
- SVAP Fact Sheet



United States Core Data for Interoperability (USCDI)

- [ONC Standards Bulletin 2023-1 \(SB23-1\)](#) was released January 12, 2023
- [Draft USCDI v4](#) includes USCDI v3, 20 new data elements, and one new data class.
- **Comments Due Monday, April 17, 2023 at 11:59 p.m. Eastern time**
- Review the [USCDI Fact Sheet](#) to learn more.

New Data Classes and Data Elements Added to USCDI v4

| | | |
|--|--|--|
| Allergies and Intolerances <ul style="list-style-type: none"> • Substance (non-medication) | Encounter Information <ul style="list-style-type: none"> • Encounter identifier | New Data Class Facility Information <ul style="list-style-type: none"> • Facility identifier • Facility type • Facility name |
| Goals <ul style="list-style-type: none"> • Treatment intervention preference • Care experience preference | Health Status Assessments <ul style="list-style-type: none"> • Alcohol use • Substance use • Physical activity | Laboratory <ul style="list-style-type: none"> • Result unit of measure • Result reference range • Result interpretation • Specimen source site • Specimen identifier • Specimen condition and disposition |
| Medications <ul style="list-style-type: none"> • Medication instructions • Medication adherence | Procedures <ul style="list-style-type: none"> • Time of procedure | Vital Signs <ul style="list-style-type: none"> • Average blood pressure |

Overview of Future Efforts

Data Provenance & Traceability of Changes

Future Efforts

- [JDCWG C-CDA Whitepaper](#)
 - 1.5.1.1. As [Appendix A](#) highlights, this workgroup whitepaper deliverables **will build upon the reference to USCDI** (most current version) in this original guide to document testable guidance for future implementers.
- [Guidance for Data Provenance](#)
 - **Additional data elements and staged requirements over time**
 - Guidance beyond **HL7 C-CDA** to include **HL7 FHIR** to align with **HL7** mapping
- [Consequential Data Update](#)
 - **Likely build and add data provenance elements** to better communicate the appropriate provenance attributes to support the Who, What, When, Where, How and Why.
 - [US Realm Header - Legal Authenticator Guidance](#)
- Create guidance on **provenance for various use cases**
 - **Healthcare Entity to Consumer / Patient Access and/or remote patient monitoring sensors/devices**

Effective Use of Codes

Future Efforts

- Prioritized list of laboratory results to be shared
 - **Expand guidance for Laboratory Test Lifecycle:** JDCWG C-CDA Whitepaper section 2.5.1
 - **Interoperable Laboratory Results:** JDCWG C-CDA Whitepaper section 2.5.2
 - Consider transmission of **results from a Laboratory to a Public Health Agency**
 - **Investigate the differences among vendors for consumption and display of translational fields**
 - Guidance for the translation of lab result codes and nomenclature
- Guidance for codes in discrete data elements
- Guidance will **go beyond content exchanged for HL7 C-CDA to include HL7 v2.x and HL7 FHIR**
- Create guidance for various use cases: **Descriptions/codes for document/data types to filter** (i.e., Radiology Reports from Lab Data to allow indexing or filtering by date)
- **Investigate consumption and display of translation fields across vendors**
- Consider guidance on **chart correction workflows** and how to propagate data edited during chart corrections downstream

Reducing the Impact of Duplicates

Future Efforts

- Expand **guidance beyond Allergies, Immunizations & Problem Lists**
- List Reconciliation
 - Consider **best practice guidance for receiving systems to optimize speed reconciliation of lists**, including deduplications strategies and auto-reconciliation thresholds
 - **Expand Healthcare Entity to Consumer use case** from Documents/data imported into a system or Portal.
- Problem Oriented Health Record functional requirements are in the process of being balloted by HL7. Future versions of this implementation guide will **consider referencing guidance** once published

Data Integrity, Format and Trust

Future Efforts

- Data Accountability/Binding Content and Authorship
 - **Consider how to ensure content and authorship binding is intact and verifiable** when data is exchanged
- Data Integration or Data Insulation
 - **Consider best practices for how receivers import and incorporate external data into a clinical workflow** to avoid having a provider navigate among multiple user interfaces
 - **Consider guidance for remote patient monitoring sensors/devices as sources of data**
 - **Consider guidance** from AHIMA's Recommended Data Elements for Capture in the Master Patient Index (MPI)
- Data Transformation from Source
- **Temporal Parameters** - Consider additional temporal parameters to improve C-CDA
- **Consider referencing 360X Project – Closed Loop Referral IG temporal Parameters**
 - Consider additional temporal parameters to improve C-CDA
- **Consider derived work from HL7 EHR Reducing Clinician Burden Project** referenced in Proposed Data Usability Characteristics and Data Definition Consistency
- Consider how to improve data granularity in a groupable hierarchy

Data Tagging / Searchability

- Data in Context – e.g., BP – Physical location, patient positioning, method, performer, author, etc. geared to FHIR exchange
- Guidance for longitudinal view – For a resilient receiver, providing robust search and filtering capabilities helps the end user to quickly find relevant
- **Receiving system filtering and search** within Received Documents
- Industry and government has an interest in an interchange system that will allow advanced algorithms to parse, search and distribute data sets and digital documents
- **Consideration for Orders and results for diagnostic Imaging**

Effective Use of Narrative for Usability

- **Continue to help define and encourage the use of standard narrative inclusions in various exchange use cases.** Currently, there is little standardization in what is actually shared and further developing rational guidance may help consistency in the industry

Sequoia @HIMSS23

Discounted Rates Available for Sequoia Project Members

The Sequoia Project is excited to be a Collaborator at HIMSS23! **Our members receive the HIMSS member rate to attend the conference.** Here's how to register:



1

Visit the HIMSS23 Website

Visit HIMSS23 general registration and sign in:
<https://www.himss.org/global-conference/registration-info-pricing>.

2

Start Your Registration

Once you're signed in, start your registration. Be sure to select the Collaborator tab on the left-hand side when prompted.

3

Enter Discount Code

Select your preferred HIMSS23 pass and enter "The Sequoia Project" as the "Referring Collaborator Organization" to receive the HIMSS member rate on registration.

We hope you'll take advantage of this discount and join your colleagues for exclusive education, exhibition and networking opportunities at HIMSS23. We look forward to seeing you in Chicago!

[Register Now](https://sequoiaproject.org/himss23/)

<https://sequoiaproject.org/himss23/>

The Sequoia Project Member Reception @HIMSS23

The Sequoia Project Member Reception



The Sequoia Project is hosting a celebratory Spring-Has-Sprung cocktail reception at HIMSS23 in Chicago, featuring Kyiv Mules and good food. This members-only reception will be held at the Marriott Marquis connected to the convention center on Tuesday, April 18th.

This is a free event thanks to the generosity of our sponsors, but **advance registration is required**. Space is limited.

[Register Now](#)



SPONSORED BY:



Tuesday, April 18th
6:00 – 7:30 p.m.



Marriott Marquis Chicago
Great Lakes Ballroom



2121 South Prairie Avenue
Chicago, Illinois 60616

Sequoia Speaking Engagements @HIMSS23

<https://sequoiaproject.org/himss23/>



MODERATOR

Didi Davis

VP, Informatics, Conformance and Interoperability

Monday - April 17

11:15 a.m. - 12:15 p.m.

South Building | Level 4 | S404

Driving Interoperability in 2023: CURES, TECA, and Information Blocking

The Trusted Exchange Framework and Common Agreement (TECA) is live and exchange partners are signing up. Hot on its heels comes rules from the Office of the National Coordinator for Health IT to prevent Information Blocking as required by the 21st Century Cures Act.

[View More Details](#) 



MODERATOR

Didi Davis

VP, Informatics, Conformance and Interoperability

Tuesday - April 18

4:15 - 5:15 p.m.

South Building | Level 5 | S504

The Sequoia Project: Interoperability Matters Process for Improving Data Usability

The Sequoia Project's Data Usability Workgroup convened 300+ workgroup members to develop and release the first version of implementation guidance that targets improvements necessary to enable semantic interoperability of health information and will build on existing work already published by other industry organizations.

[View More Details](#) 



SPEAKER

Mariann Yeager

CEO, The Sequoia Project

Tuesday - April 18

1:30 - 2:30 p.m.

South Building | Level 5 | S504

ONC Update from RCE

The speakers will review the current scope and requirements of the TECA and the progress made by the RCE in collaboration with ONC, to include the Common Agreement and the Qualified Health Information Network (QHIN) Technical Framework. Opportunities for stakeholder and community input will be presented.

[View More Details](#) 



CO-PRESENTER

Zoe Barber

Policy Director

Thursday - April 20

11:30 a.m. - 12:30 p.m.

South Building | Level 5 | S504

Securing TECA: Security Practices Promoting Nationwide Health Information Exchange

This session describes security considerations for the Trusted Exchange Framework and Common Agreement (TECA).

[View More Details](#) 

Data Usability Work Group

For more information:

www.sequoiaproject.org/interoperability-matters/data-usability-workgroup/



(571) 327-3640



Interopmatters@sequoiaproject.org

Convene



Collaborate



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