



Interoperability MATTERS

an initiative of The Sequoia Project

Data Usability Workgroup

December 7, 2023

Agenda

- Welcome, Introductions, Membership, Agenda - Bill Gregg, MD – 5 minutes
- Overview of Future Efforts for Version 2.0 of the Implementation Guide – Adam Davis, MD & Bill Gregg, MD – 5 min
- November 9, 2023 Lab Tiger Team Summary Update – 5 minutes – Adam Davis, MD & Bill Gregg, MD
- Data Usability Taking Root Summit & Community of Practice Update– Didi Davis – 10 minutes
- Data Integrity Format and Trust Proposed work items – 30 minutes
- Save the Dates: ONC Annual Meeting Events – 5 minutes
- Workgroup Discussion & Q&A – Didi Davis, Co-chairs and Workgroup



Adam Davis, MD, Co-chair
Sutter Health



Bill Gregg, MD, Co-chair
HCA Healthcare



Didi Davis, VP
The Sequoia Project

Workgroup Members

391 Organizations

486 Participants



Healthcare Providers



Public Health



Consumer/Patient



Standards Developer



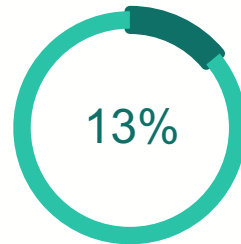
Health Plan/Payer



Federal, State, Local Government



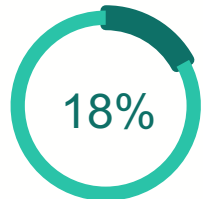
HIN/HIEs



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

 HealthInfoNet

 HIGHMARK
HEALTH

 HIMSS

 HITRUST

 smile
DIGITAL HEALTH

 Humana

 imprado
improvise adapt overcome

 Indiana Health
Information Exchange

 Intermountain
Healthcare

 JCMR
JACKSON COMMUNITY MEDICAL RECORD

 KAISER PERMANENTE

 Kno2

 KONZA

 Lehigh Valley
Health Network

 KlearTrust

 CALIFORNIA EMERGENCY MEDICAL
SERVICES AUTHORITY

 marble

 patientory
association

 MedAllies

 Solarity

 MEDVIRGINIA

 bluip

 MiHIN
MICHIGAN HEALTH INFORMATION NETWORK
SHARED SERVICES

 VA | U.S. Department
of Veterans Affairs
Veterans Health
Administration

 MRO
Disclosure Management & IIC Solutions

 NCHealthConnex
Powering Health Care Outcomes

 Netsmart

 New Jersey
Innovation Institute
An NJIT Corporation

 NYeC
NEW YORK HEALTH
COLLABORATIVE

 nextgen
healthcare

 NORTH
Dakota | Health Information Network
Be LegendarySM INFORMATION TECHNOLOGY

 onerecord

 OCHIN

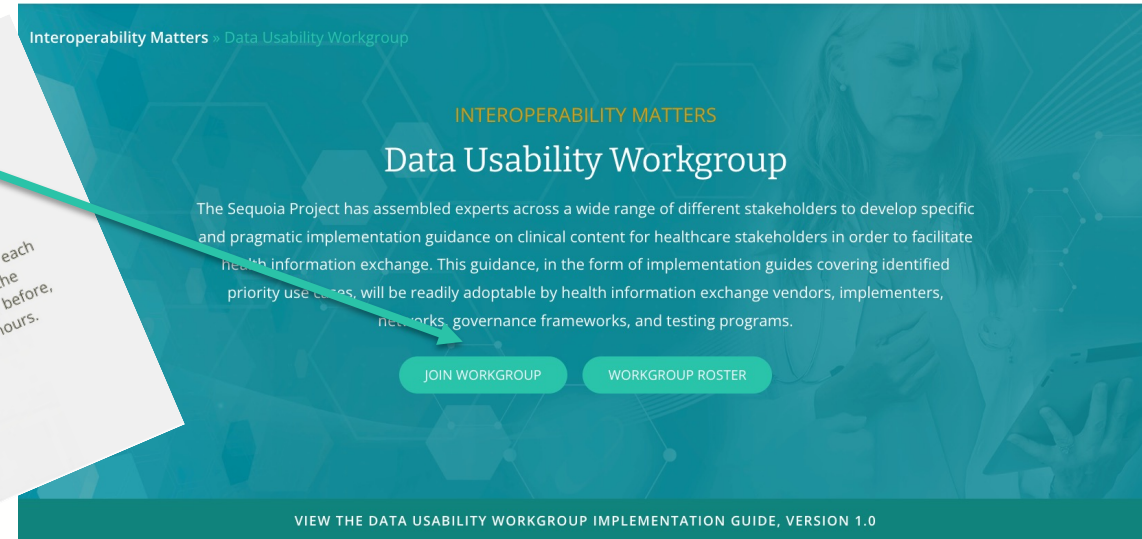
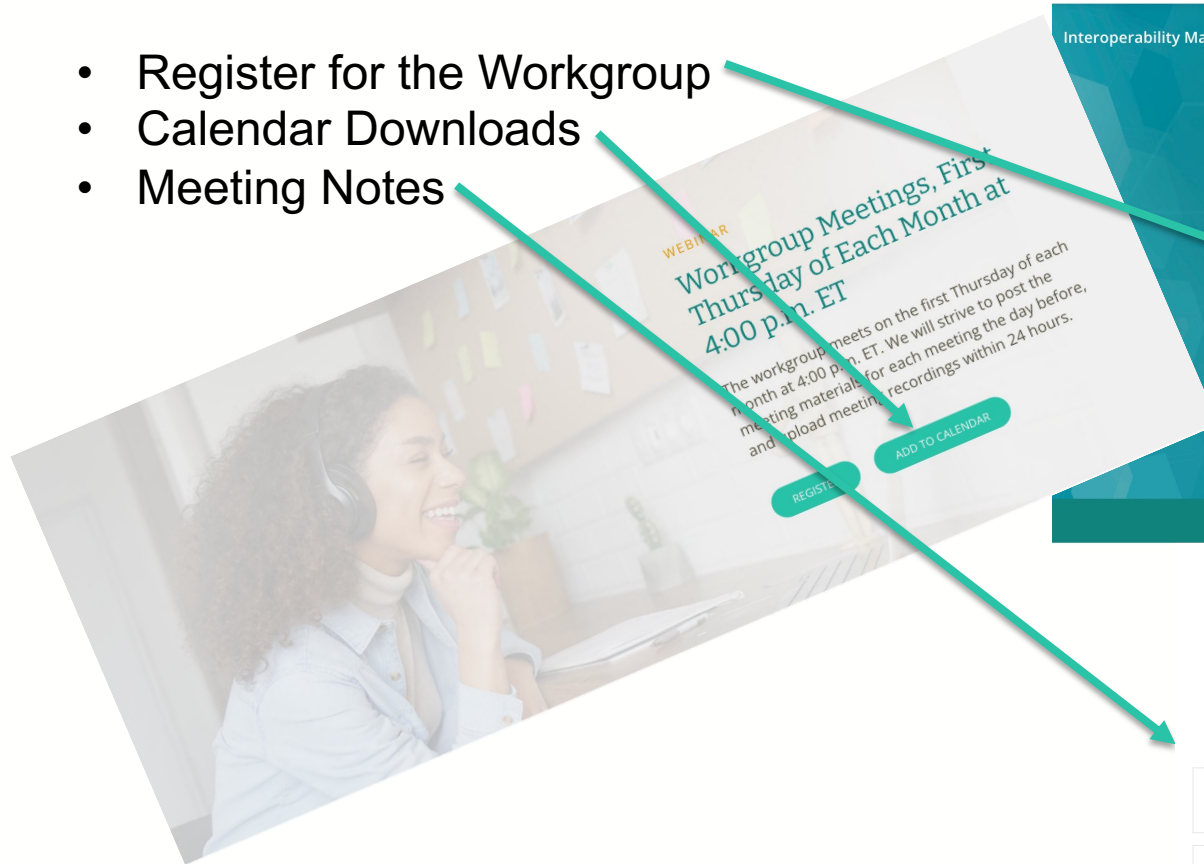
Sequoia Member's Shape Interoperability for the Public Good



SEKHMET

Website, Meeting and Workgroup Logistics

- Register for the Workgroup
- Calendar Downloads
- Meeting Notes



Meeting Materials and Recordings


2023 **2020 - 2022**

▶ October 12: Lab Tiger Team Meeting

▶ October 5: Meeting Notes

▶ August 3: Meeting Notes

▶ July 6: Meeting Notes

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

Overview of Future Efforts for Version 2.0 of the Implementation Guide

2023-2024 Sequoia Data Usability WG – Proposed Work V2.0

Topic Category	Description or link to page	Assigned	Use case: Provider to provider	Use case: Provider to Public Health Agency	Use case: Healthcare entity to consumer	General: End user usability	General: Data quality	Laboratory Related	Notes	Action Items
	Guidance for Data Provenance		X	X	X	X	X		From this brainstorming page	
	Consequential Data Update		X	X	X	X	X		From this brainstorming page	
										<p>@Steven Lane comment to scorecard for v1.0: Suggest that we consider in V2 a second tier of medium priority data classes for which to collect provenance, specifically Laboratory, Clinical Tests, Clinical Notes, and Vital Signs. Also, suggest that, in V2, we specify that the Author Person SHOULD be included when it is the individual/patient.</p> <p>@Katherine Lusk comment to scorecard for v1.0: Corrections to provenance should be available in audit trail for 5 years at a minimum. Disaster preparedness with back-up plan in 2 formats with provenance. Also under Public Health comments: Exploration of the future of involvement of public health with TECCA evolution and moving organizations from direct HL7 connections, connecting thru QHINS (eCR becoming part of a QHIN) Corrections to provenance should be available in audit trail for 5 years at a minimum. Disaster preparedness with back-up plan in 2 formats with provenance included.</p> <p>@Lisa Nelson submitted comment to scorecard for v1.0: Suggest adding Healthcare Entity to Consumer Use case. DUWG can consider this if a more detailed sub-use case is developed for inclusion. Also, for the Consumer to Provider use case to support sharing of a patient's care experience preferences, treatment intervention preferences, and patient goals, author's need to support an author person (the patient his or her self). There will not be an author organization in this use case. It also may be important to clarify the importance of the "performer" role for data provenance, not just author. author person and performer are both essential in the Consumer to Provider use case.</p>
Data Provenance & Traceability of Changes	US Realm Header - Legal Authenticator									
	Prioritized list of laboratory results to be shared		X	X			X	X	From this brainstorming page	
	Guidance for the translation of lab result codes and nomenclature		X	X		X	X	X		
	Guidance for codes in discrete data elements		X	X			X		From this brainstorming page	@Katherine Lusk comment to scorecard for v1.0: Texas IMMTRAC wants CVX for historical with new administration NDC codes. Need to get alignment with State Agencies.
	Descriptions/codes for document/data types are desired to filter (i.e. Radiology Reports from Lab Data) to allow indexing or filtering by date		X			X		X		@Lisa Nelson comment to scorecard for v1.0: I feel like we should start at the VERY TOP and say something about expecting proper Document Type codes to be used. We have seen it really helps to agree to send the one most general document type code as the primary code and then an more specific document type codes as translations. - clarification to be discussed at 11/29/23 DUWG taking root call.
Effective Use of Codes in Shared Information	Use experience with SHIELD and COVID-19 to create/identify codes and mappings in some other domain?							X		
	Reduce Impact of Known Duplicates		X			X	X		From this brainstorming page	
Reduce the Impact of Duplicates	List Reconciliation		X	X	X	X	X			
	Data Accountability/Binding Content and Authorship		X	X	X	X	X		From this brainstorming page	@Katherine Lusk comment to scorecard for v1.0: Adoption of Project US address adoption for all persons captured within the EHR; i.e providers with directory for Direct Address, Guarantors, Next of Kin... - @Katherine, agreed. The IG does state that "Data for address fields used for patient discovery query" be compliant at this time, additional guidance can be added for future IG's. This comment has also been added to the DUWG v2.0 spreadsheet for tracking purposes here:
	Data Integration or Data Insulation		X	X	X	X	X		From this brainstorming page	
	Problems with name formats between XDS/CDA									@Lisa Nelson comment to scorecard for v1.0: it would be nice if we had A SINGLE Source of Truth open source API that could be called with any addr information and it would return the properly formatted addr entry according to Project US@. - @Lisa, agreed. The USPS provides and an open source free to use API. More information can be found here: https://www.usps.com/business/web-tools-apis/general-api-developer-guide.htm and https://github.com/lob/usps-webtools-api
										Also: So as not to "block available information", sections that are a SHOULD or MAY really SHALL be populated with the available information in your system so as not to commit an act of "Information Blocking". - @Lisa, agreed, this is a minimum bar set at this time, but all data sources are still required to meet minimum USCDI data classes and send all data captured, stored and available.
Data Integrity Format and Trust	Data Transformation from Source		X	X	X	X	X		From this brainstorming page	

2023-2024 Sequoia DUWG - Proposed Work Items

- Google Spreadsheet used for tracking
 - Anyone with the link can comment within the document
 - Contains Phase 2 IG Development – Parking lot of existing pain points
- Add FHIR guidance in addition to C-CDA – technology agnostic
 - Need to flesh out use cases
- Laboratory Data Exchange
- Receiving System Guidance
- Alignment with USCDI v3

Laboratory Tiger Team – November 9, 2023

- Open call for Participation to workgroup members who are Laboratory subject matter experts and consumers of lab data
 - Quest Diagnostics resource committed
 - Outreach to Labcorp in process
- Expectation is that Tiger Team will meet monthly
 - Next meeting January 11, 2024
- Purpose of the Tiger Team – work on Lab focused pain points to advance sending and receiving system guidance to improve usability for all stakeholders

Tiger Team Roster
42 members
36 organizations

**Should we
consider inviting
others?**

First Name	Last Name	Organization
Maria	Moen	ADVault, Inc.
Mary-Sara	Jones	Amazon
Jenna	Rychert	ARUP Laboratories
Riki	Merrick	Association of Public Health Laboratories
Reddy C	Haraneesh	AthenaHealth, Inc.
Manish	Naik	Austin Regional Clinic
Muktha	Natrajan	CDC
Hung	Luu	Children's Health System of Texas
Stephanie	Broderick	Clinical Architecture
Carol	Ross	Clinisys, Inc.
Robert	Rae	College of American Pathologists
Scott	Stuewe	DirectTrust
Jay	Nakashima	eHealth exchange
Benjamin	Ollila	Epic
Supantha	Samanta	Epic systems corporation
Robert	Oakley	Evernorth - Office of Interoperability
Nathan	Davis	Graphite Health
Stanley	Huff	Graphite Health
Hilary	Greer	HCA
Steven	Lane	Health Gorilla Inc.
Hazel	Chappell	Ishca health
Teresa	Saxon	JP Systems
CJ	Amurao	JP Systems
Sulayman	Aziz	jpsys
Aaron	Green	Labgnostic, Inc.
Deb	Loniewski	MDHHS
Holly	Miller	MedAllies, Inc.
Desiree	Mustaquim	National Center for Injury Prevention and Control
Amy	Weinland	Nationwide Children's Hospital
Sara	Haddon	New York eHealth Collaborative
Andrea	Pitkus, PhD, MLS(ASCP)CM	none
Sara	Armson	ONC
Natalee	Agassi	Oracle
Hans	Buitendijk	Oracle
Mark	Dorner	PreciseMDX
Mick	Talley	Southeast Michigan Health Information Exchange
M E	de Baca	Sysmex America Inc
Katherine	Lusk	Texas Health Services Authority
Didi	Davis	The Sequoia Project
Thomas	Bronken	Trinity Health
Elizabeth	McElhiney	Verisma
Sandra	Mitchell	VHIE, contractor JP Systems
Aaron	Berdofe	Zus Health

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 Draft Guidance
 - July 2023 – July 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

Community of Practice Update

November 29, 2023



Data Usability

Taking Root Movement

CO-SPONSORED BY



What is the difference between the **Data Usability Taking Root Movement** and the **Data Usability Workgroup**?



Data Usability Taking Root

Supporter

Pledges to support the data usability movement as a member of the data usability community of practice. Grants right to Sequoia to include logo in its Taking Root member directory. Participates in Data Usability Roundtables. Supporters that are also Sequoia members are invited to Taking Root Summits.

Implementer

Pledges to implement V1.0 data usability guidance across one or more topics within a defined timeline. Invited to participate in the data usability community of practice, the Data Usability Taking Root Planning Committee, and the Taking Root Summits. Grants right to Sequoia to include logo in its Taking Root member directory.

Sponsor

Pledges to provide sponsorship of the Taking Root Summit(s). Socializes and evangelizes the purpose and power of this work. Co-hosts Taking Root Summits and participates in The Data Usability Taking Root Planning Committee, Roundtables, and Summits.



Levels of Engagement

The Data Usability Taking Root Movement

(as of November 28, 2023)

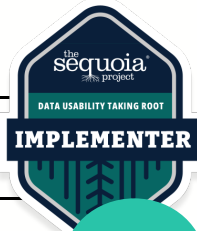
ADVaultinc
American Medical Association
Austin Regional Clinic
Banner
Brevard Health Alliance
Civitas
Claim Clarity
DirectTrust
eHealth Exchange
Elevance Health
First Genesis, Inc.
Foothold Technology
Hawaii Pacific Health
HCA Healthcare
HealthElence
Health Services of North Texas (HSNT)
Johnson and Johnson
Kaiser Permanente
Kno 2
MTC Group LLC
Netsmart

NextGen Healthcare
Optum
Particle Health Inc.
Patientory
PeaceHealth
Premiere Pointe
Podiatry
Social Security Administration
Surescripts
Texas A&M
Texas Department of State Health Services
Texas Health Services Authority
The Picture of Health
The University of Texas Health Science Center
University of Washington
Verinovum
Veterans Health Information Exchange
Zus Health



38

Azuba
Bwell
Clinical Architecture
Delaware Health Information Network
Epic
Health Gorilla
National Institutes of Health, National Institute of Diabetes & Digestive & Kidney Diseases
New York eHealth Collaborative
Opala
Santa Cruz Health Information Exchange



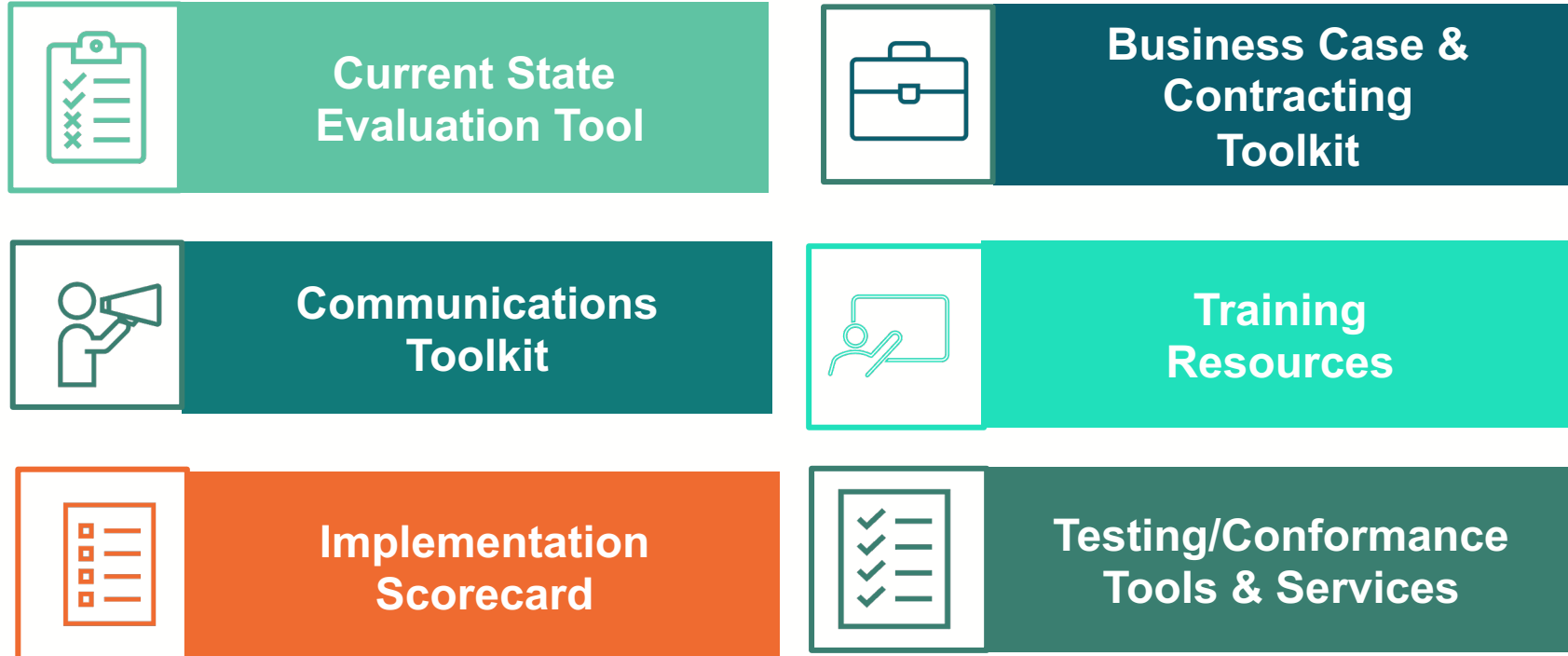
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American Health Information Management Association	Program Sponsor
MedAllies	Event Sponsor
Smile Digital Health	Event Sponsor









3

Assessing Technical Assistance Needs



Community of Practice Survey

Data Usability Taking Root Community of Practice						
Technical Assistance Needs N=22			Top 3			
			Rank 1	Rank 2	Rank 3	Total
	Current State Evaluation Tool	Current State Evaluation Tool	5	9	3	17
	Testing/Conformance Tools & Services	Testing/Conformance Tools & Services	7	1	4	12
	Implementation Scorecard	Implementation Scorecard	1	2	8	11
	Communications Toolkit	Communications Toolkit	4	2	4	10
	Business Case Toolkit	Business Case & Contracting Toolkit	2	6	1	9
	Training Toolkit	Training Resources	3	2	2	7

Scorecard Input Received – General Comments

- Several comments were received for suggestions to the future IG v2.0. These have been added to the tracking spreadsheet here:
 - <https://docs.google.com/spreadsheets/d/1I-xoRHJVfTGWa5yJvy5VGE2Ekk9ZVKU8/edit#gid=1484264687>
- 23 comments were received from 3 organizations as of 11/28/2023
- Encourage all implementers to review and provide comments to the scorecard by **December 15, 2023**
 - <https://docs.google.com/spreadsheets/d/1I-xoRHJVfTGWa5yJvy5VGE2Ekk9ZVKU8/edit#gid=92130281>

Annual Meeting Recap



1:00 PM

Data Usability Taking Root: A Movement Takes Root

Hear from members of a community of practice committed to moving data implementation guidance from paper to production over the next 18 months.

Panelist

Lauren Riplinger
AHIMA
[VIEW BIO](#)

Dr. Holly Miller
MedAllies
[VIEW BIO](#)

Duncan Weatherston
Smile Digital Health
[VIEW BIO](#)

Mariann Yeager
Moderator
The Sequoia Project
[VIEW BIO](#)





Contact Us

Thank you for your interest in The Sequoia Project's new **Data Usability Taking Root** Initiative.

If you would like to get in touch you can reach us at:



takingroot@sequoiaproject.org

To join the Community of Practice Roundtables, please sign up as a **Supporter, Implementer or Sponsor** here:

<https://sequoiaproject.org/data-usability-taking-root-movement/>

Data Integrity, Format & Trust

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 Integrity, Format and Trust - FHIR specific proposal from Veterans Health Information Exchange (VHIE)

Scenario

- FHIR specifications can be more specific and require more data elements in each domain. Usability by each organizations downstream systems is critical to success. An example is that de-duplication of a specific domain is dependent on the vendor architecture, FHIR message configuration, health care organization definition of what makes a single record unique.

Reminders

TEFCA: Common Agreement Signing Event - December 12 and ONC Annual Meeting – December 14-15, 2023

TEFCA: Common Agreement Signing Event

- December 12, 2023
- <https://www.hhs.gov/live/live-1/index.html#9933>

ONC Annual Meeting in Washington, DC.

- <https://www.healthit.gov/news/events/2023-onc-annual-meeting>
- <https://www.oncannualmeeting.com/>
- Attend the **EMS Data Summit 2.0** on December 15 from noon – 3pm ET
 - Want to attend the EMS Data Summit 2.0?
 - Please register in advance if you plan to attend the summit, in addition to registering for the Annual Meeting.
 - <https://umarket.utah.edu/um2/nemsis/index.php?storecookie=1>
- There is no charge to attend the ONC Annual Meeting. Except for the mainstage sessions, which will be livestreamed on HealthIT.gov, the ONC Annual Meeting will be fully in-person in 2023; there will not be a virtual option for the full program.

Data Usability Work Group

For more information:

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



(571) 327-3640



Interopmatters@sequoiaproject.org

Convene



Collaborate



Interoperate



**Thank You for your support of
Interoperability Matters!**