

eHealth Vendor Workgroup

January 16, 2014

Agenda

| Agenda Item | Speaker |
|--------------------------------------|--------------------------------------|
| Update on eCQM Kaizen | Minet Javellana and Mindy Hangsleben |
| Randomizer Tool | Beth Myers |
| Connect-a-Thon | Erica Galvez and Paul Tuten |
| Required Fields in a Summary of Care | Rob Anthony |
| 2014 QRDA Implementation Guides | Beth Myers |
| Question and Answer | All |

Update on eCQM Kaizen

CMS/ONC eCQM Lean Kaizen #1 Results

- » Reduced contract package review time from 8 WEEKS to 4 WEEKS
- » MUC list clearance reviews reduced from 23 to 1 and delivered on time (1st time)
- » Auto Triage for Public Comment in FDMS initial testing complete
- » MAT/VSAC Integrated
- » Increased quality, transparency , cost reduction



CMS/ONC eCQM Lean Kaizen #2

- » Dates: Feb 10th – 14th
- » Location: Washington, DC
- » Will include stakeholders/technical experts from all parts of the process (including the customers patients/providers/EHR vendors/Measure developers etc.)
- » During the event we will do the following:
 - Observe the current processes which are in place today
 - Identify where we can eliminate waste/improve the process with potential re-design
 - Create the future process to be implemented in the next 6-12 mos. along with a detailed implementation plan
 - Create indicators to monitor the improvements real time

Upcoming Feb Kaizen Scopes

| Scope Name | Scope Start | Scope End | In Scope |
|--|---------------------------------|----------------------------------|--|
| Measure Authoring Tool/ Unit Testing | Creating Synthetic Test Records | Test Completed | All Types of Measures |
| Logic Harmonization | Need to harmonize logic | logic harmonized | All Types of Measures |
| VSAC Harmonization | Need for a Value Set | Value Set Created and Harmonized | Crowd Sourcing, Data Mining |
| eCQM Standards and Implementation | Change to a Standard | Standard Implemented | CDS, HQMF |
| Certification of E H R | Need for a change to cypress | Vendor is Certified | |
| Data Processing/Re-Use * Note to be split into two scopes after Kaizen begins | Submission Requirements Created | Data Processed at CMS | QRDA1 & 3, other data sources claims, registries, etc, feedback loop |
| Measure Maintenance | Need for a change to a measure | Change Implemented | Annual Update |

Kaizen Participation Opportunity

- » Need to be able to commit to the full event, 4.5 days
- » Technical Experts in eCQM logic, value sets and the implementation of eCQM's. Can answer questions around data structure in the QRDA and HQMF
- » Post the event help with implementing the future state
- » Funds are not available for government to pay for any travel expenses to the event
- » Contact Mindy Hangsleben mindy.hangsleben@hhs.gov

Randomizer Tool

Randomizer Tool Available on ONC Site

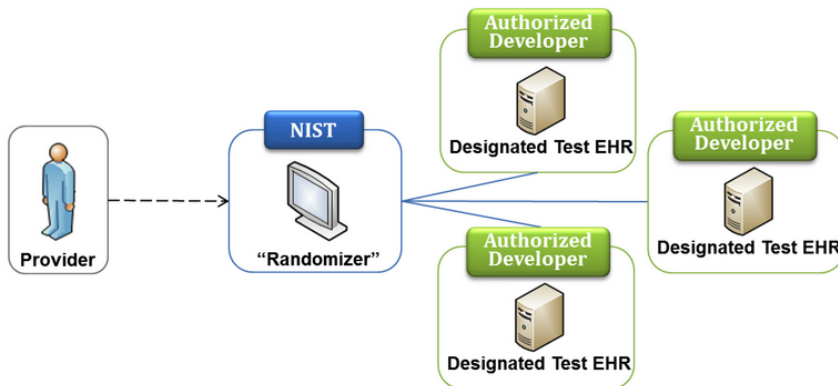
- » New tool allows providers to test electronic exchange of patient data to meet Stage 2 transitions of care objectives
- » Designated test EHRs will be registered with the tool that is hosted by the National Institute of Standards and Technology (NIST)
- » The NIST-hosted software system will randomly match a provider with a designated test EHR that is designed by a different EHR technology developer than theirs
- » <http://ehr-randomizer.nist.gov>

Screen Shot of Randomizer

Design Principles

- Simulate "real" life exchange using Stage 2 certified EHR technologies
- Technical requirements does not add burden beyond current certification requirements for Stage 2 MU

Architectural Overview



<http://ehr-randomizer.nist.gov>

The Office of the National Coordinator for
Health Information Technology



Meaningful Use Stage 2 Transitions of Care (ToC) Connect-a-thon

Putting the **I** in Health**IT**
www.HealthIT.gov



- Connect-a-thon is February 4-5, 2014 at the Embassy Suites in Alexandria, VA
- You must register for the event by January 29, 2014
 - However, space is limited...
 - Register soon to reserve your place
- Book your hotel room by January 17, 2014 to ensure special event rate of \$184/night
- Registration/reservation links may be found in event invitation e-mail

Reminder: MU & CEHRT Transitions of Care (ToC)

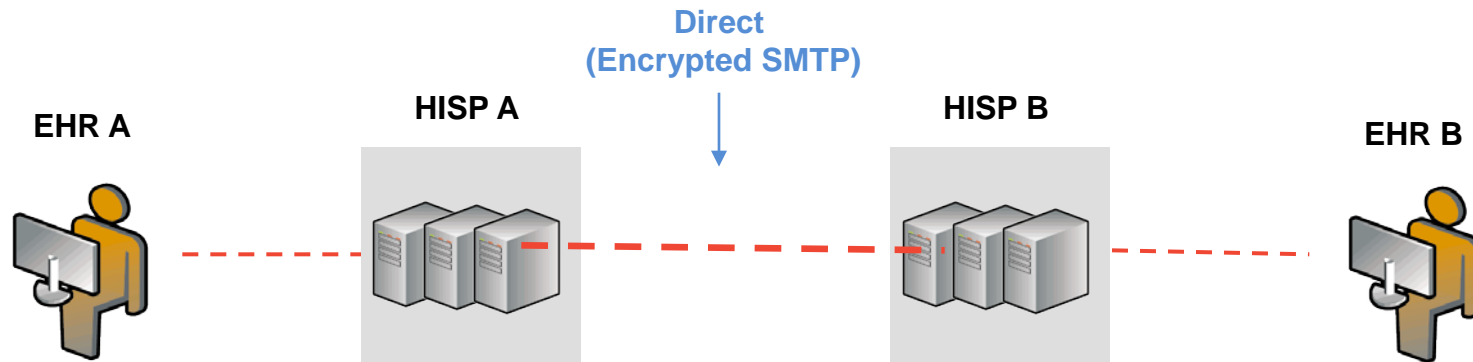
Meaningful Use

- For Meaningful Use Stage 2, the ToC objective includes 3 measures:
- Measure #1: requires that a provider send a summary care record for more than 50% of transitions of care and referrals.
- Measure #2 requires that a provider electronically transmit a summary care record for more than 10% of transitions of care and referrals using CEHRT or eHealth Exchange participant
- Measure #3 requires at least one summary care record electronically transmitted to recipient with different EHR vendor or to CMS test EHR

2014 Edition Certification

- Two 2014 Edition EHR certification criteria
- 170.314(b)(1) : Transitions of care—receive, display, and incorporate transition of care/referral summaries.
- 170.314(b)(2) : Transitions of care—create and transmit transition of care/referral summaries.

The purpose of the connect-a-thon



- Addressing “real world” issues beyond certification via end-to-end testing
 - Direct / Direct+XDM interoper
 - Address issues (missing, length limits, etc.)
 - Format code / MIME type issues
 - Handling (or not) multiple documents
 - Case sensitivity (or not) in various fields
 - Message size limits
- Generally these issues aren’t “major” ones, but they still cause exchange/interoperability to break down.

What we're testing...

- The ability to bi-directionally send, receive, and display a CCDA between pairs of participating EHRs

Send →

Receive ↓

| | EHR A | EHR B | EHR C | EHR D |
|-------|-------|-------|-------|-------|
| EHR A | | 😊 | 😊 | 😊 |
| EHR B | 😊 | | ✗ | 😊 |
| EHR C | ✗ | ✗ | | ✗ |
| EHR D | 😊 | 😊 | 😊 | |

- If issues are identified, pairs will work to resolve them at the event and may take them as self-directed “homework” for post-event resolution.

What's required to participate...

- People:
 - EHR vendors may send 1-2 representatives from their organizations
 - HISPs/HIEs may also send 1-2 representatives to support their EHR clients
- Technology:
 - 2014 Edition EHR technology certified (or nearly so) to the ToC criteria
 - Must have completed at least one successful test of CCDA care summary exchange with ONC's [Standards and Implementation Testing Environment](#) (SITE)
 - Operational Direct/HISP environment (to send/receive messages to/from others)
- Unlike some connect-a-thons, we don't intend for folks to stand up this infrastructure at the meeting facility. Rather, we intend for participants to remotely access their test platform/infrastructure.

- Should I attend?
 - If you're an EHR vendor (or their HISP partner), yes! Even if you've tested with some other vendors, we believe it will be valuable to test with other peer organizations.
 - If don't have anything to test, don't plan on attending. This isn't an educational meeting / conference. It's a hands-on technical event.
- What infrastructure will be provided to EHR teams?
 - Internet access and electrical power
 - Internet access will primarily be Wi-Fi based
- Will ONC publicly report on the outcome of this event?
 - ONC may create a generic "key considerations" or "lessons learned" type of document based on this event. However, ONC will not publish any vendor-identifiable information with regard to testing outcomes.

- Reminders:
 - February 4-5, 2014 at the Embassy Suites in Alexandria, VA
 - Register for the event by January 29, 2014
 - Space is limited... register soon
 - Book your hotel room by January 17, 2014 to ensure special event rate of \$184/night
- Have additional questions?
 - E-mail thaddeus.flood@hhs.gov or paul.tuten@hhs.gov

Summary of Care Requirements

Information Requirements for Summary of Care

Information Requirements for Summary of Care Measure

- Patient name
- Referring or transitioning provider's name and office contact information (EP only)
- Procedure
- Encounter diagnosis
- Immunizations
- Laboratory test results
- Vital signs (height, weight, blood pressure, BMI)
- Smoking Status
- Functional Status, including activities of daily living, cognitive and disability status
- Demographic information (preferred language, sex, race, ethnicity, date of birth)
- Care plan field, including goals and instructions
- Care team including the primary care provider of record and any additional known care team members beyond the referring or transitioning provider and the receiving provider
- Reason for referral
- **Current problem list (EPs may also include historical problems at their discretion)****
- **Current medication list****
- **Current medication allergy list****

****Required Fields**



Enter information into certified EHR technology



Withhold any information provider determines could cause possible harm



Verify presence of elements; Problem List, Medication List, and Medication Allergy List

Note: Care plan field is not required

Create C-CDA



Provide summary of care record when patient is transferred to another setting of care or referred to another provider



2014 QRDA Implementation Guides Posted

Now Available: 2014 QRDA Implementation Guides

- » Posted on the eHealth Vendor Page:
2014 CMS QRDA Implementation Guides
- » QRDA is used to submit EP CQMs for:
 - PQRS
 - Comprehensive Primary Care Initiative
 - the EHR Incentive Program
 - Pioneer ACO Program
- » Next vendor workgroup on February 20 will include a question and answer session regarding the guides.

Question and Answer