

DRAFT MINUTES
Health Information Technology Standards Advisory Committee
(HITSAC)

Thursday, May 19, 2011

Department of Medical Assistance Services Building
Conference Room 7B
600 E. Broad Street, 7th Floor, Richmond, VA 23219

ATTENDANCE:

Members Present:

Dr. Marshall Ruffin, Chairman
Rich Pollack
John Quinn
Dr. Jim Harrison

Members Absent:

Dr. Sallie Cook

Others Present:

Dave Mix, DMAS
Kim Barnes, Office of Health IT, Director
Susan McCleary, VITA/EAD, HITSAC Admin
Akeisha Heard, VITA/EAD
Fred Norman, CVC
Nakeesha Collins, Deloitte/ONC
Mariza Hardin, ONC
Lee Stevens, ONC
Judy Napier, CGI
Chris White
C.W. Laugerbaum, Advantus Strategies
Debbie Dodson, VITA/EAD
Julie Whitlock, OAG
Michelle White
Cathie Brown
Lynne Jeffries, VITA/PMD
Vicki Tyson, DGS DCLS
Maurice Edwards
Brenda Farrish
Lesliann Helmus
Hunter Wilson

Call to Order:

Chairman Marshall Ruffin called the meeting to order at 10:38 am in conference room 7B at the Department of Medical Assistance Services (DMAS) in Richmond, VA. Chairman Ruffin welcomed the Committee and attendees.

OLD BUSINESS:

Vacancies Filled on HITSAC

Chairman Ruffin stated that Dr. Jim Harrison and Dr. Sallie Cook had filled the vacancies of HITSAC. He welcomed Dr. Harrison from UVA. Dr. Cook was unable to attend the meeting.

Approval of Minutes of April 21, 2011 HITSAC Meeting

Chairman Ruffin asked the Committee if there were any additions or changes to the minutes. The Committee responded that there were none. Chairman Ruffin asked that a sentence be added regarding Geoff Brown's resignation. The sentence should read: "Mr. Brown will continue to serve the Commonwealth as Chairman of the Technology Subcommittee of Governor MacDonald's Task Force on Health Care Reform."

A motion was made and seconded to approve the minutes as revised. The revised Minutes of April 21, 2011 were unanimously adopted.

Searchable Standards Repository – Production Demonstration

Ms. McCleary stated the purpose is to make available the standards that the state will depend on for interoperability, not only for the Health Information Exchange but also for the Commonwealth Gateway. She said the repository should make it easier for everyone in the state to learn about the standards, to understand them and to discuss them.

Ms. Heard gave a demo of the Standards Repository (<http://www.vita.virginia.gov/oversight/dm/default.aspx?id=10344>). She discussed the "Search and Review HITSP Documents" link; HITSP documents that were reviewed can be searched, users can review the list of standards referenced in them and follow a link to the associated standards. Ms. Heard gave an in-depth walk through of the "Search and Review Standards" link. She noted reports would be added that will allow displaying of the information in a printable format.

Repository updating methods and implementation guides were discussed. Several suggestions to improve the system were offered. It was decided the best way to improve was through user recommendations and staff suggestions.

Dr. Harrison asked about information used for standards. Ms. McCleary explained reasons for links and fielded questions.

Draft Governance Framework

Chairman Ruffin deferred discussion of the Framework until the afternoon.

MITA Program Status Report

Mr. Mix updated the Committee on MITA activities including immediate focus areas, work in progress, and challenges (see *MITA/HITSAC Program Updates* presentation). He stated PMO funding has been approved by CMS and he is waiting for the official letter.

Mr. Mix said that the MITA member management is going through strategy modifications. He stated Phase I projects will focus on getting a master person index and getting the Medicaid rules into a business rules engine. He remarked Phase II would focus on replacing the multiple eligibility systems in the Commonwealth in DSS and DMAS. He stated HHR is looking at using the Michigan Integrated Social Services Delivery System because it is compliant with MITA technical architecture standard. He noted a demonstration of the Michigan portal system is scheduled for early June. It was decided that it would be too costly and time consuming to modify the current systems. Mr. Mix noted he will be requesting funding for the projects in Phase I soon.

Mr. Mix stated there also has been a strategy modification in the Commonwealth Authentication Service due to the delay in project funding. He said HIE and DMV requirements and design will be the initial focus and DSS will integrate when the service is ready. Mr. Mix noted that DMV has parted ways with Accenture and will be looking at their options for the future.

Mr. Mix noted that the timelines have not shifted much from those reported in April due to the funding delays. He answered questions from the Committee members and ONC representatives.

NEW BUSINESS:

HL7, Federal Update

Mr. Quinn reviewed a presentation presented to the HL7 Board that focused on local public health agencies having access to HL7 intellectual property with the cost born by a third party. The presentation discussed the Health Resilience Exchange pilot in CA that gives the local public health agencies access to HL7 standards and is funded by the Henry Jackson Foundation. HL7 licensing for the Commonwealth was discussed among the Committee and participants. Mr. Quinn recommended the Commonwealth talk to the Health Resilience Exchange and HL7 to figure out the licensing issue.

Discussion with Representatives of the Office of the National Coordinator (ONC)

Lee Stevens gave an update on ONC activities related to Meaningful Use Stage 2. He noted ONC plans to do annual visits to the states for program monitoring and plans to visit advanced states first so that the information learned can be shared with less advanced states. He said that Virginia “could have easily been the first” and that the “Medicaid alignment here in Virginia is absolutely incredible,” is “being leveraged to its maximum potential” and “being executed perfectly.” He said Virginia meets the goals of

HITECH very well and added that Virginia is “by far leading the pack in alignment with other federal agencies.” Also, he credited MedVirginia for its good work interconnecting providers in Virginia with the Social Security Administration.

He concluded by saying that “you have the ideal model for health information exchange” in Virginia.

Mr. Stevens stated long term care is an area being focused on now. He mentioned pilots in MA and RI that will be quick wins and provide measureable changes. When asked about concerns ONC has, Mr. Stevens mentioned rural providers having the opportunity to meet Meaningful Use through the DIRECT Project work.

Health Vocabulary and Interoperability Standards Status Report

Ms. McCleary presented the standards documents as revised (see *Health Interoperability Data Standards Narrative* and *Health Vocabulary Data Standards Narrative*). She remarked the Definitions, Scope and Health Vocabulary Standards Governance sections have been updated to be consistent with the draft governance framework.

Ms. McCleary noted the documents rely on external standards that are defined, owned and maintained by a Standards Development Organization. She stated in order to keep up to date, VITA plans to maintain a complete catalog of applicable standards in the searchable standards repository demonstrated this morning. She noted that data owners are responsible for timely implementation of and continuing compliance with each vocabulary standard within each agency.

Ms. McCleary stated the standards details in the document will be replaced with links to the standards repository. Chairman Ruffin remarked that the purpose of having a link to a database is that the standards will continue to be updated and the database would remain current. Ms. McCleary said that rather than continually update a single document, VITA will instead, for each update to a standard, post a memo to the Online Review and Comment Application (ORCA) that includes one or more links back to the standards repository; this way the public will be able to comment on proposed changes going forward but VITA will only have to maintain the standards in one place, the repository.

Ms. McCleary stated that the details section of the vocabulary has a number of blank fields, such as minimum required use. She remarked these are standards that the HIE and Commonwealth will have to follow and required use should be specified as standards are requirements for agencies to follow. She suggested that if required use could not be stated, perhaps the document should be called guidelines, which are recommendations to the agencies.

During the discussion, Mr. Pollack stated it would be better for the required use to come from the state agencies that are specifying the use of the standards. Ms. McCleary pointed out most of the standards are for HIE use so the agencies would not use the standards. It was suggested that at the time an implementation guide is created, the purpose of the implementation will be known. Mr. Mix agreed

with this statement. Thus, it was agreed that the "Required Used" sections would be removed from the document.

Ms. McCleary noted that there are multiple vocabularies in some domains and if there are redundant ones, they should be eliminated so that different agencies do not use different codes for the same item. After discussion, Ms. McCleary volunteered to work with the agencies to review the codes. She noted, however, that the items used by the agencies came from the agencies.

Ms. McCleary noted the narratives have a compliance date of January 2015. After discussion of why that date was set, Mr. Mix will review the MITA timeline to determine the date's importance to MITA.

Chairman Ruffin made a motion to approve the two standard documents for posting to ORCA for public comment. The motion was seconded and unanimously accepted.

Draft Governance Framework

Chairman Ruffin noted that prior to leaving the meeting, Kim Barnes requested that the Committee consider modifying the framework in a case where there is a complex standard, allowing the Commonwealth has more than 60 days to respond. The framework (see *Draft Governance Framework*) stated that within 60 days, VITA will post a draft for public comment and at the close of the public comment period, VITA will present the draft to the CIO for consideration within 60 days. During discussion, Chairman Ruffin noted VITA could request additional time from the CIO to complete the work.

Chairman Ruffin reviewed the feedback (see *Governance Framework Agency Feedback*) and proposed leaving the language in the draft as it is. He stated that there was nothing in the objections from others that persuaded him to change the governance framework.

Ms. McCleary remarked that the State Police and Vickie Tyson from the Consolidated Labs had mentioned in their feedback the need to respond quickly in public health and public safety emergencies. She recommended a section be added that addresses emergency situations. Dr. Harrison suggested it be termed a temporary data management plan rather than an exemption. Ms. Cleary suggested the terminology to be used in adding the new section discussed and had prepared a draft. The Committee decided to use "all agencies" and "as needed" to the language Ms. Cleary offered. The wording "the affected state agency will notify VITA ..." was added as well.

Another comment to the proposed framework was Step 4 needed to be more collaborative among the agencies. The Committee decided that Steps 3 and 5 gave enough direction for collaboration.

Dr. Harrison made a motion that the draft be revised as discussed, that the word "draft" removed and the document be submitted to the CIO for consideration. The motion was seconded and carried.

Public Comment

Chairman Ruffin invited comments from the public. Lynne Jeffries stated that DBHDS is collaborating with VDH to implement an Electronic Medical Record (EMR) system. She asked whether the Committee members would be willing to talk informally with DBHDS. The Committee stated their willingness to do so.

Vickie Tyson discussed a HITECH grant project that would allow 500 hospitals to report communicable diseases to Public Health via the Surescripts network. She asked whether the Committee had any knowledge of this grant and how it related to what the Commonwealth was doing. Chairman Ruffin stated he was unaware of the grant and Ms. Tyson stated she would send the information she had from CDC about it.

Chairman Ruffin called for other public comment. There was none.

Adjourn

As there was no further business, Chairman Ruffin adjourned the meeting at 3:25 pm.