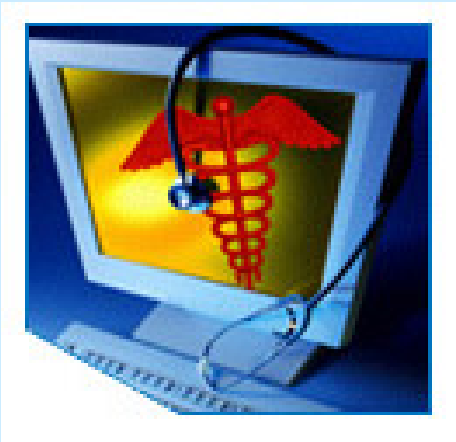
HITSP: Background, Accomplishments and Relationship to the NHIN

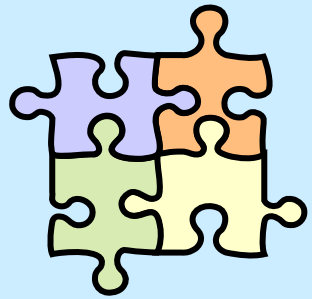


Presentation for
ESRI's Health GIS Conference
October 10, 2007

Elizabeth West, CPHIMS
HIMSS
VP, Corporate Relations

Current Landscape

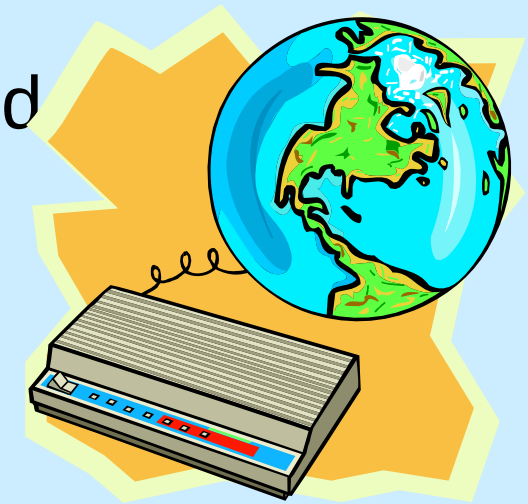
Disparate vendor systems, applications and connectivity suites



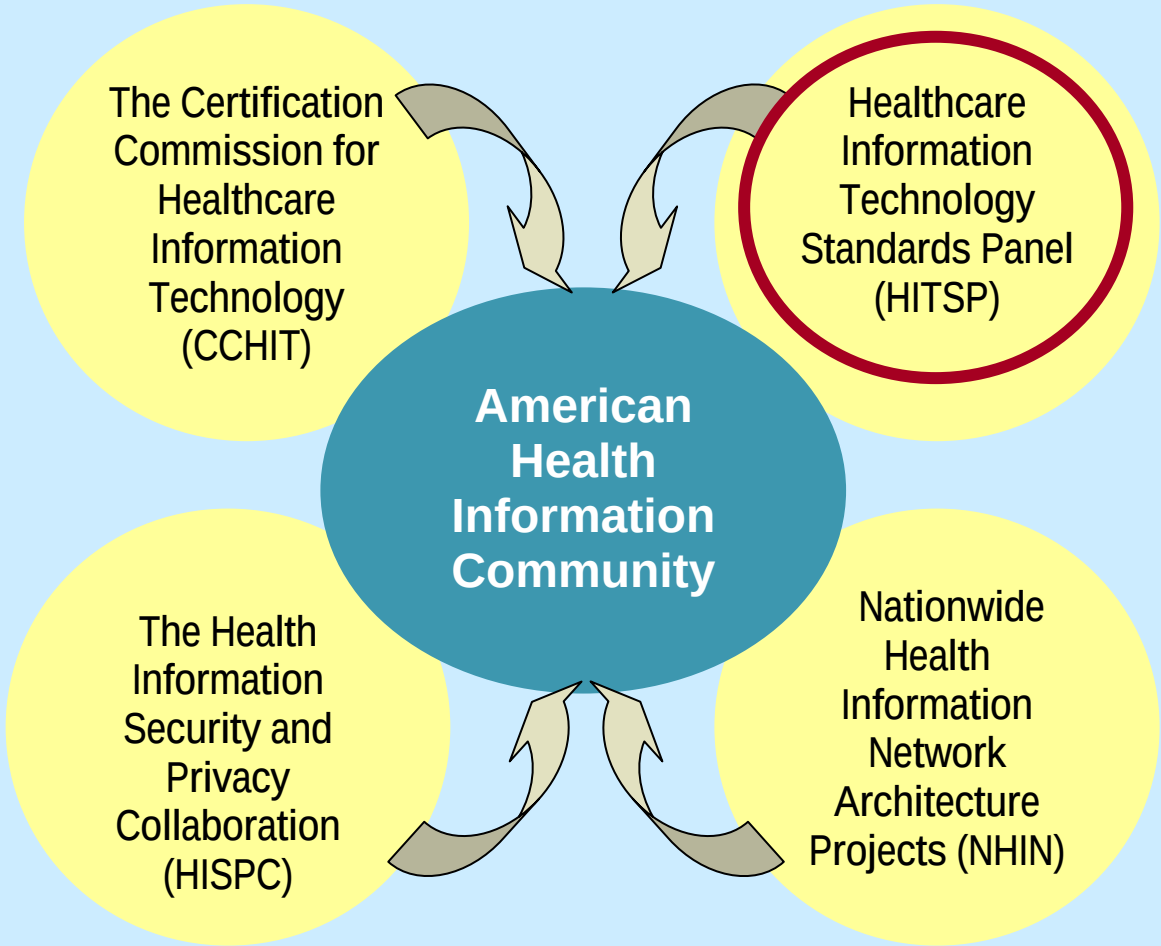
- Historically, “unique” healthcare provider IT requirements were addressed with customized systems, applications and standards
- More than a dozen standards-setting organizations developed competing standards to meet the needs of specific sectors within the healthcare IT market
  - ANSI-accredited bodies to industry consortia
- Disparate messaging systems, data elements and vocabulary prevent cross-system exchange of health information.
  - Content, structure and transmission methods are all in HITSP scope

Impact on Healthcare IT

- Healthcare technology can no longer develop in a void
- Systems must connect with each other
  - Organizational
  - Local
  - National
  - Global
- Public/private partnerships needed



A Public/Private "Community" Established in 2005 to Serve as Focal Point for America's Health Information Concerns to Drive Opportunities for Increased Interoperability



HITSP includes 351 different member organizations and is administered by a Board of Directors
24 SDOs (7%)
248 Non-SDOs (71%)
30 Govt. bodies (9%)
13 Consumer groups (3%)
36 Project Team and Undeclared (10%)

The Community is a federally-chartered commission and will provide input and recommendations to HHS on how to make health records digital and interoperable, and assure that the privacy and security of those records are protected, in a smooth, market-led way.

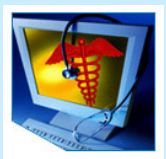
Presidents Executive Order

For Immediate Release
Office of the Press Secretary
August 22, 2006

Executive Order: Promoting Quality and Efficient Health Care in Federal Government Administered or Sponsored Health Care Programs

Sec. 3. Directives for Agencies. Agencies shall perform the following functions:

Health Information Technology - For Federal Agencies. As each agency implements, acquires, or upgrades health information technology systems used for the direct exchange of health information between agencies and with non-Federal entities, it shall utilize, where available, health information technology systems and products that meet recognized interoperability standards.



What is the Healthcare Information Technology Standards Panel (HITSP)?

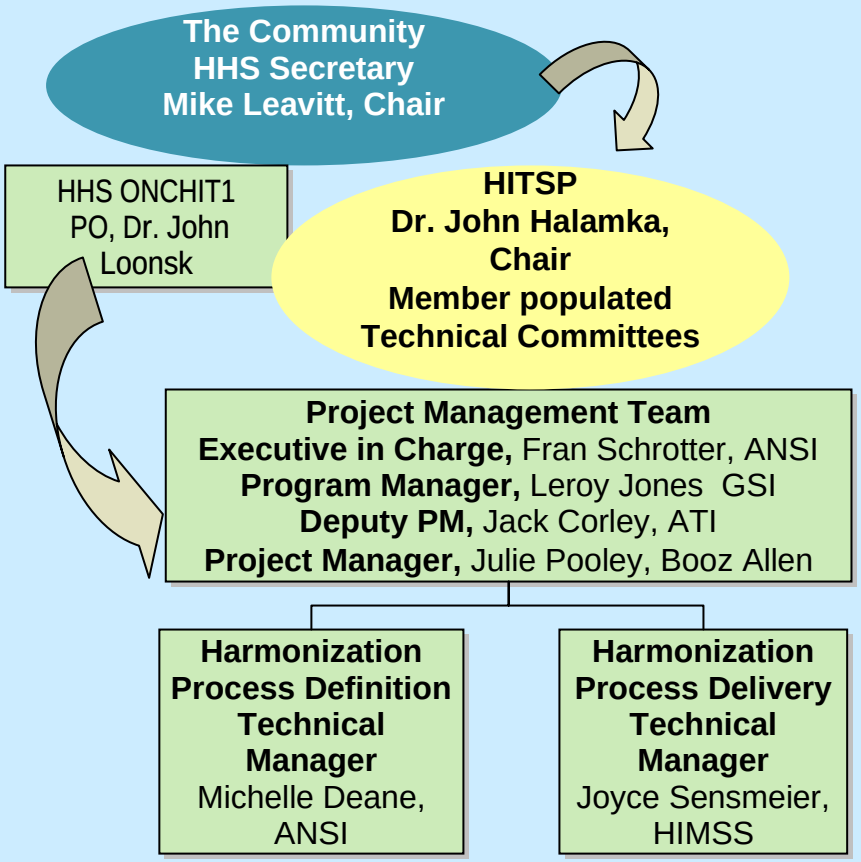
- Volunteer, consensus-driven organization

- HITSP brings together experts from across the healthcare community
  - Consumers, physicians, nurses and hospitals
  - Healthcare IT suppliers and their end-users
  - Government agencies who monitor the U.S. healthcare system
  - Standards development organizations (SDOs)

Participating Organizations

- Provider Organizations and Academic Institutions
  - Cleveland Clinic, University of Connecticut Health Center, University of Nebraska Medical Center, Georgetown University Health Policy Institute, Affinity Health System, Regenstrief Institute, Kaiser Permanente, Beth Israel Deaconess Medical Center, Partners Health System, Northwestern University, Mayo Clinic and many others
- Public Health Organizations
  - Association of State and Territorial Health Officials, Tennessee Child Health Profile, CareEntrust, Association of Public Health Labs, Public Health Data Standards Consortium, National Association of Counrty and City Health Officials and many others
- SDOs
  - ANSI, SNOMED, NEMA, HL7, ASTM, IHE, ASC-X12, Continua Health Alliance, many others
- Vendors and Suppliers
  - Siemens, Northrup Grumman, NextGen, Philips, Sun, Thomson MicroMedix, GE Healthcare, DigiChart, Intel, Oracle, EDS, Cerner, First Data Bank, Epic, McKesson, Quovadx, Surescripts, Wolters Kluwer, IBM, Nortel, SureScripts, Bearing Point, MITRE, Wipro, Emdeon, Greenway, Eclipsys, Dell and many others
- Payers
  - Blue Cross and Blue Shield,BC/BS Florida, BC/BS Alabama, Metropolitan Life Insurance Company, CVS Caremark, Wellpoint, RXHub, Delta Dental Plans Association and many others

HITSP Contract: Eleven Different Tasks Focused on the Harmonization Process



1. Comprehensive Work Plan
2. Conduct a Project Start Up Meeting
3. Deliver Recommended Use-Cases
4. Participate in related meetings and activities, including the AHIC Meetings
5. Develop a Gap Analysis
6. Standards Selection, Evaluations and Testing
7. Define a Harmonization Approach
8. Develop Interoperability Specifications
9. Develop and Evaluate a Business Plan for the self-sustaining processes
10. Submit Monthly Reports – ongoing efforts
11. Assist with communications – ongoing efforts

HITSP Standards Harmonization Process

Mission:

To harmonize relevant standards in the health care industry to enable and advance interoperability

The standards harmonization process is an open, inclusive, collaborative, use case driven process

www.hitsp.org

1. Identify a pool of standards for a general breakthrough area
2. Identify gaps and overlaps for a specific context
3. Make recommendations to the HITSP for resolution of gaps and overlaps
4. Develop interoperability specifications for using the selected standard for a specific context
5. Test instructions for using the standard

What is a Standard?

HITSP Definitions

- A standard specifies a well-defined approach that supports a business process
  - Provides rules, guidelines, or characteristics
  - Helps to ensure that materials, products, processes and services are fit for their intended purpose
  - Available in an accessible format
  - Agreed upon by a group of experts
  - Publicly vetted Subject to ongoing review and revision process
- Harmonization is required when a proliferation of standards prevents progress rather than enables it

HITSP Technical Committees Focus on Four AHIC Breakthrough Use Cases

- ***Biosurveillance*** -- Transmit essential ambulatory care and emergency department visit, utilization and lab result data from electronically-enabled health care delivery and public health systems in standardized and anonymized format to authorized public health agencies with less than one day lag time.

- ***Consumer Empowerment*** -- Deploy to targeted populations a pre-populated, consumer-directed and secure electronic registration summary. Deploy a widely available pre-populated medication history linked to the registration summary.

- ***Electronic Health Records*** (EHRs) -- Deploy standardized, widely available, secure solutions for accessing laboratory results and interpretations in a patient-centric manner for clinical care by authorized parties.

- ***Emergency Response EHR –*** Describes the role that an emergency responder electronic health record, comprising at minimum demographics, medication, allergy and problem list information, can be used to support emergency and routine health care activities.

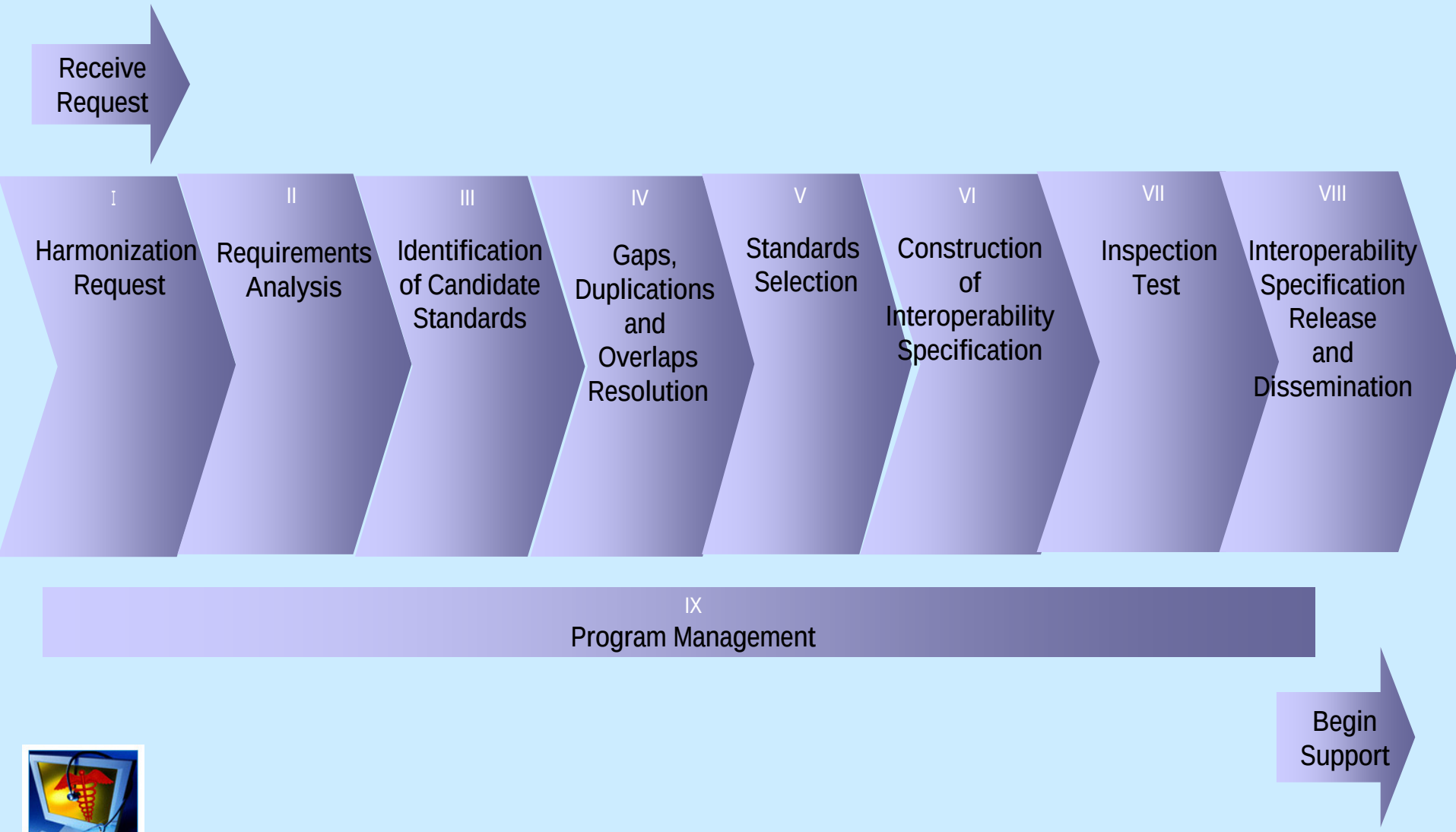
Technical Committees Responsibilities

- Provide a listing of all standards that satisfy the requirements imposed by the relevant Use Cases as well as readiness criteria that shall be used to evaluate the standard
- Select and evaluate recommended standards to meet the relevant Use Case
- Develop, review and evaluate ‘interoperability specifications’ for the selected standards
- Submit recommendations to HITSP for review, approval and resolution
- Ensure timely response and disposition of comments
- Ensure on-going process for addressing corrections/change requests and resolutions

Technical Committees Responsibilities

- Perform high-level Requirements Analysis and Design of HITSP Interoperability Specifications, transaction packages, transactions, components and constructs including requirements analysis and minimum data sets
- Identify and analyze gaps and duplications within the standards industry as they are related to each specific Use Case
- Provide a description of the gaps, including missing or incomplete standards
- Provide a description of the duplications, overlaps or competition among standards for the relevant Use Cases
- Review and scope statements of work for each new Use Case

Harmonization Process Steps



Tier 1 Standards Readiness Criteria

- **The standards required to support each major Use Case were organized within an agreed-upon standards taxonomy**
- **The standards selected for inclusion in the pool were examined using 'HITSP approved' Tier 1 and Tier 2 Harmonization Readiness Criteria**

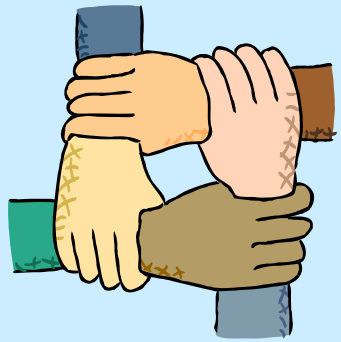
Tier 2 Standards Readiness Criteria

- Suitability
  - The standard is named at a proper level of specificity and meets technical and business criteria of use case
- Compatibility
  - The standard shares common context, information exchange structures, content or data elements, security and processes with other HITSP-harmonized standards or adopted frameworks as appropriate
- Preferred Standards Characteristics
  - Approved standards, widely used, readily available, technology neutral, supporting uniformity, demonstrating flexibility and international usage are preferred
- Standards Development Organization and Process
  - Meet selected criteria including balance, transparency, developer due process, stewardship and others.
- Total Costs and Ease of Implementation
  - Deferred to future work

Harmonization Initiatives: Laying the Foundation for the NHIN

- HITSP members and experts are committed to setting and implementing standards to ensure the integrity and interoperability of health data
  - In some cases, redundant or duplicative standards will be eliminated
  - In other cases, new standards may be established to span information gaps
  - In all cases, the resulting standards serve the consumer and other healthcare stakeholders by addressing issues such as data accessibility, privacy and security

HITSP Accomplishments 2005-2006



- Established HITSP organization and committees
- Created standards harmonization process including all coordinating committee sub-processes
- Harmonized three Use Cases and resolved three controversies along the way:
  - Resolved CCR v. CDA, CCD successfully balloted
  - Resolved the need for interim standards, accelerated CCD
  - Resolved HL7 2.4 v. 2.5, ELINCS to be maintained by HL7 with HL7 version of ELINCS 2.51 to be completed in 2007
- Aligned HITSP interoperability specifications with CCHIT functional criteria
  - CCHIT/HITSP Joint Working group establishing timeline for the next three years

HITSP Established
Interoperability Specification Process

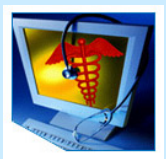
- Intended for use by software architects and system designers as a way to guide future implementation efforts based on health IT requirements

- Represent an ongoing effort to create frameworks and templates that represent a solution set for solving the known problems related to Use Cases

Impact of 2006 HITSP Interoperability Specifications

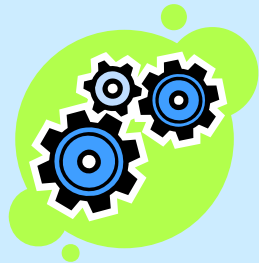
HHS Secretary Michael Leavitt

- "Accepted" all three HITSP Interoperability Specifications – December 2006
- Will "recognize" them in December 2007 assuming "minor changes of a technical nature"
- "Recognition" triggers Executive Order expectations
- Several states including Texas have introduced laws to require implementation of HITSP Interoperability Standards

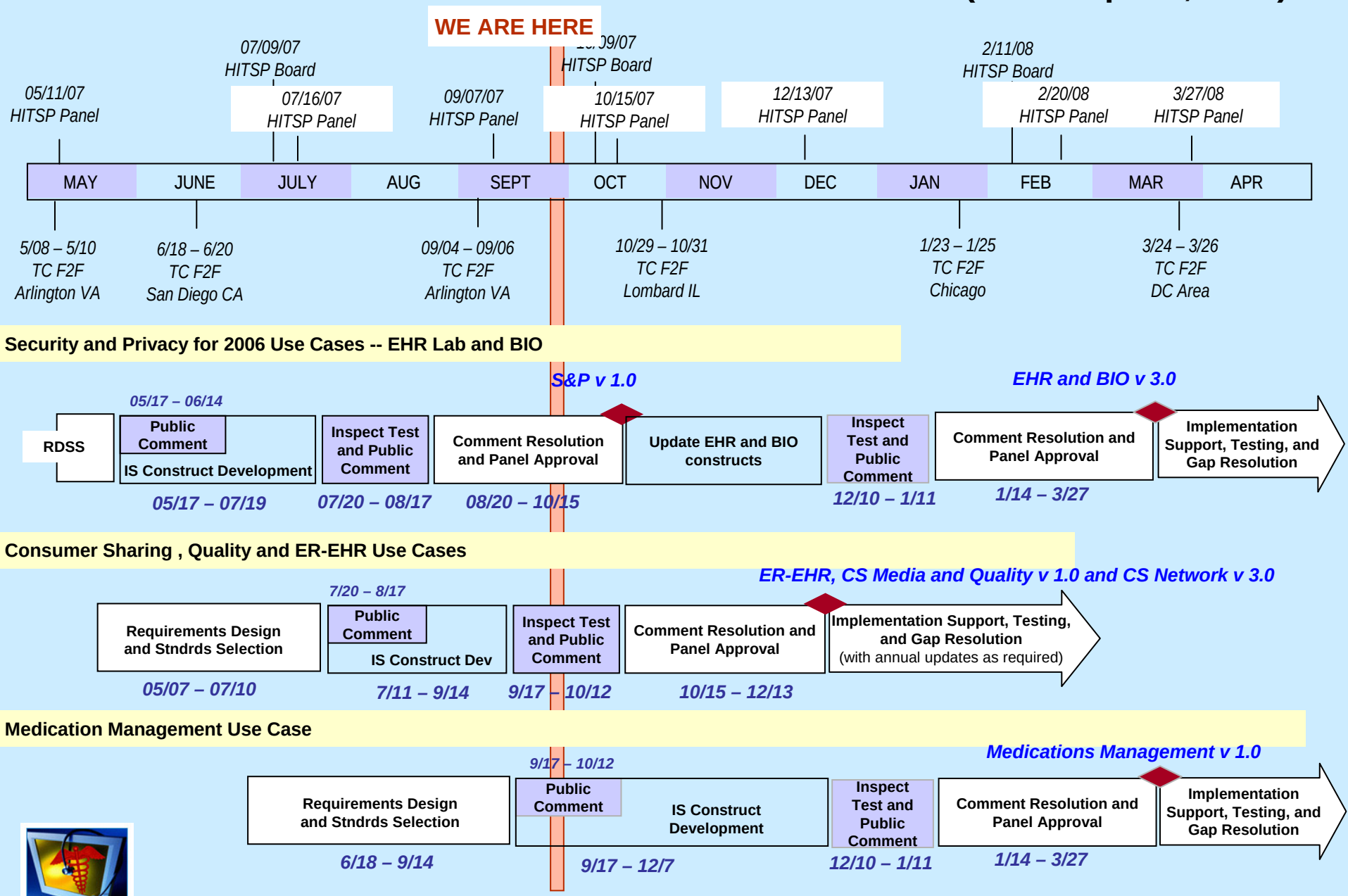


Maintaining Momentum 2007

- Privacy and Security standards
- Emergency First Responder
  - Emergency summary record exchange
  - Provider authentication, authorization and credentialing
- Consumer Access to Clinical Information
  - Lab results as needed by patient
  - List of conditions and allergies
  - Health problems
  - Diagnosis codes
- Medication Management
  - Medication reconciliation
  - Pharmacy/Allergy
  - Monitoring of medications
- Quality
  - Inpatient Quality Measures (core set)
  - Ambulatory measures (core set)
  - Clinician access (self-assessment)
  - Public reporting



HITSP 2007/2008 Timeline Overview (as of Sept 26, 2007)



Resources

- Three Interoperability Specifications:
  - EHR-Lab-Result-Reporting (IS-01 v2.0)
  - Biosurveillance (IS-02 v2.0)
  - Consumer Empowerment (IS-03 v2.0)
- ER-EHR Requirements, Design and Standards
- Selection Security and Privacy Requirements, Design and Standards Selection
- High-Level Executive Summary
- www.hitsp.org and www.hhs.gov/healthit/
- Joyce E. Sensmeier, MS, RN, BC, CPHIMS, FHIMSS HIMSS, VP, Informatics
  - jsensmeier@himss.org

The Big Questions

- What happens when a new administration is elected in 2008??
  - Republicans vs. Democrats
  - HITSP contract in third year (option for fourth, runs through the election)
  - HIMSS is participating in AHIC 2.0 proposal
- What can you do?
  - Participate in advocacy and education at the Federal and State levels
  - Emphasize progress made

Questions?

Thank you!

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