37th Annual Plenary & Working Group Meeting

Phoenix, Arizona

May 11-14, 2023
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Recognizing the 2023 Gold Members
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Thank You to Our Gold Members
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Thank You to Our Gold Members
Join us for the Networking Reception Wednesday at 5:15 PM in Phoenix C
Fill out the survey to be eligible for one $500 drawing for HL7 Education and Virtual Events!

https://www.surveymonkey.com/r/Sept2023WGM
Future HL7 Working Group Meetings

January Working Group Meeting
Virtual Event
January 29 – February 2, 2024

May Working Group Meeting
Renaissance Dallas Hotel
Dallas, Texas
May 18-24, 2024

38th Annual Plenary & Working Group Meeting
The Omni
Atlanta, Georgia
September 21-27, 2024
Future Connectathons

HL7 FHIR Connectathon
Virtual Event
January 16-18, 2024

HL7 FHIR Connectathon
Renaissance Dallas Hotel
Dallas, TX
May 18-24, 2024

HL7 FHIR Connectathon
The Omni
Atlanta, Georgia
September 21-27, 2024
Future DevDays

HL7® FHIR® DevDays 2024
Minneapolis, Minnesota

June 10-13, 2024
https://www.devdays.com/
HL7 Certification

- HL7 CDA Specialist
- HL7 FHIR Proficient
- HL7 V2 Control Specialist
- HL7 V3 RIM Specialist

- VA eligible veterans can apply for reimbursement of HL7 certification exam fees!
HL7 FHIR Exam Prep Course

- Prepare to take the HL7 FHIR R4 Proficiency Exam

- Practice by taking a 50-question simulated exam

- Next session:
  - Starts September 28
  - Registration closes September 22!
HL7 FHIR Fundamentals

- For DEVELOPERS as a next step after FHIR Fundamentals

- Covers SMART on FHIR & CDS Hooks

- Next session:
  - Starts October 26
HL7 Education on Demand

▪ Your 24/7 source for:
  - On-demand classes and webinars
  - Certification exam prep resources

▪ Access **Education on Demand** from the “Training” menu on the HL7.org website
We are currently waiving fees to post open positions on the HL7 Jobs Board!

Find the Jobs Board under the “Resources” tab
Don’t miss the Cookie Break every day at 3:00 PM
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Naghm Sabah
Controller

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Senior Software Developer
HL7 Staff

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Events Technical & Support Specialist

Aaron Yaniro
Accounting Specialist
Recognition of long time HL7 staff at HQ

Staff who have been on our team for 15+ years:

Lynn Laakso (15)         Linda Jenkins (19)
Dave Hamill (16)          Anne Wizauer (24)
Mary Ann Boyle (17)       Karen Van Hentenryck (27)
Andrea Ribick (17)        Mark McDougall (32)
20-24 Year Members! (1/3)

Noam Arzt
Ann Badame
Mary Lynn Bushman
Christopher Chute
Gora Datta
Tom de Jong
Helen Drijfhout-Wisse
Gerard Freriks
Sheldon Gilmer
Hugh Glover

Matthew Greene
Norman Gregory
Grahame Grieve
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Elizabeth King
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Peter Kranich

Austin Kreisler
David Marotz
James McClay
Robert McClure
Lloyd McKenzie
Tim McNeil
Eliot Muir
Nancy Orvis
David Parker
Ron Parker
20-24 Year Members! (3/3)

Nick Radov
John Ritter
Ken Rubin
Peter Scholz
Masakazu Shimomura
Judith Snow
Spencer SooHoo
Corey Spears
Robert Stegwee

Sandra Stuart
Sadamu Takasaka
Sylvia Thun
Denise Warzel
25-29 Year Members! (1/2)

Liora Alschuler  
Bernd Blobel  
Philip Caillouet  
Durwin Day  
Ray Duncan  
Carl Dvorak  
Peter Haug  
Tony Julian  

Christopher Melo  
Karen Nocera  
Frank Oemig  
Vassil Peytchev  
AbdulMalik Shakir  
Rene Spronk  
Timo Tarhonen  
Franklin Wilcox
30-34 Year Members!

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Gary Dickinson
Ted Klein
Virginia Lorenzi
Clem McDonald
Doug Pratt
20+ Year Affiliate Members!

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HL7 Australia
HL7 Brazil
HL7 Canada
HL7 China
HL7 Croatia
HL7 Czech Republic
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HL7 India
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HL7 Taiwan
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WORK GROUP ACTIVITIES & UPDATES
2023 Sept 9-15 WGM Phoenix

Care Plan Update

Cochairs:
- Stephen Chu
- Emma Jones
- Jay Lyle

Other Contributors:
- PACIO project
Care Plan topics

- **Care Plan DAM 2.0 work in progress**
  - [https://confluence.hl7.org/display/PC/Care+Plan+DAM+2.0+-+Project+Index+Page](https://confluence.hl7.org/display/PC/Care+Plan+DAM+2.0+-+Project+Index+Page)
  - Multi-year discussions on:
    - How to model concepts pertinent and relevant to care planning, care provision and coordination
      - Concerns, lifestyle, risks
      - Preferences, needs
      - Social determinants of health
      - Barrier to care
      - Advance directive information …
    - Care planning vs care plan
    - Care plan contents and condition logic: stored (the what and where) vs viewed contents
    - Care plan vs care plan functions (care provision, coordination, care plan review, reconciliation, adaptive care plan engines …)
    - What to do with the CCS spec published in 2016?
    - How to identify, track, manage – variances?

- **Care Plan DAM 2.0 work in progress**
  - New focus – will be on phases of care:
    - Care planning, care provision and care coordination processes
    - Logical information model and activity | interaction models to be included for each phase of care
    - Manifestations – what do care plans look like?
Care Plan topics: MCC eCare Plan

- **Project:** Multiple Chronic Conditions (MCC) eCare Plan
- **Sponsors:** AHRQ and NIH NIDDK
- **Objective:** To develop an interoperable electronic care plan to facilitate aggregation and sharing of critical patient-centered data across home-, community-, clinic-, and research-based settings for people with MCC.
- **Deliverables** (open-source):
  - Value sets for CKD, CVD, T2D, chronic pain, and PASC domains.
  - HL7® FHIR® Implementation Guide.
  - Clinician- and patient/caregiver-facing eCare planning SMART-on-FHIR applications.

**Accomplishments (May - Sept 2023)**
- Updated the IG to align with US Core 6.1.
- Added the “Plain Language Summary” to the IG.
- Implemented changes based on January for-comment ballot.
- Performed value set maintenance on all MCC value sets.
- Balloted the MCC IG for STU ballot.

**Plans (Sept - Jan 2024)**
- Resolve STU ballot comments through PCWG discussion and implement appropriate changes.
- Seek approval to publish the MCC IG as STU1.
- Revise both apps to display aggregated patient data from multiple providers.
- Hold provider and patient/caregiver focus groups to facilitate iterative feedback on UX design.

**Issues for Consideration**
- Implementation and uptake.
- Long-term value set management.
- Ability of systems and/or applications to derive relationships between Problems/Interventions/Goals and Outcomes.
Updated and aligned to US Core 6.1.

Addition of the Plain Language Summary.

Replaced care plan resource “author” with “custodian.”

Updated the Care Team to remove the specialized Caregiver. The Care Team now references caregiver considerations.

Included guidance on transmitting aggregated information.

Added clarification on describing how text outcomes can be represented codableConcept.text and how the patient/caregiver condition status is a self-assessment.
40 Overall Votes (voters) (Mix of Government/University, Pharma, General Interest, Provider):
- 38 Affirmative (above threshold for publication)
- 2 Negative

**Ballot Dashboard**
- 32 Actual Comments
  - Plain Language
  - Care Team clarifications
  - Tech Edits
  - Value set application questions/suggestions
  - Heath Concern clarification
MCC eCare FHIR IG: Next Steps

- **Review comments**
  - Sept – Oct 2023

- **Discuss and/or block votes with PCWG**
  - Oct – Nov 2023

- **HL7 Approval**
  - Early 2024

- **Propose resolutions**
  - Oct 2023

- **Implement Changes**
  - Dec 2023 – Jan 2024

- **Publish**
  - Early 2024
PCWG sponsored projects

**PACIO**

### Personal Functioning and Engagement
- Completed ballot reconciliation and submitting IG for STU1 publication. Passed ballot with 89% approval.
- Started work on draft STU2 PFE IG, which adds goals, interventions, completed services, and evaluation to the IG in addition to observations.
- Pursuing several potential pilot opportunities.
- Tested an integration track with six other IGs during the July and Sept Connectathons.

### Advanced Directive Interoperability (ADI)
- STU1 ballot reconciliation completed addressing 88 comments (75 from ballot). Working to align with the CDA ADI IG as much as possible.
- Received 53% approval from original ballot - working on negative vote retraction to submit for STU1 publication.
- Working on vocabulary around STU2 Portable Medical Order concepts with HL7 Work Groups.
- Targeting STU2 to enter January 2024 HL7 ballot.
- Pursuing pilot opportunities.

### Transitions of Care (TOC)
- New use case to advance interoperable health data exchange for transitions of care to, from, and between LTPAC.
- The primary goal is to establish an LTPAC TOC data set and define the specific data elements that are pertinent to each role in receiving care team.
- Kick off meeting on September 11.
- Stay tuned for Project Proposal and Project Scope Statement.

### Re-Assessment Timepoints
- Divides long-term care encounters into smaller timepoints for easier access.
- Published September 2022 as an HL7 Standard for Trial Use 1 implementation guide.
- Pursuing potential pilots.
In collaboration with LHS

LHS Care Plan/Care Team: Weekly conference calls – Tues 4pm EST

- Patient Centred Care team
- Ongoing work
  - Patient-centered Care Team DAM update – for 2024 ballot
  - Focus:
    - Definitional → Proposed → Actual Care Team: characteristics and application
      - https://confluence.hl7.org/display/LHS/Definitional%2C+Proposed+and+Actual+Care+Team+-+Use+Case+and+Scenarios
    - Use cases and care scenarios to inform transition from definitional → proposed → actual care team
    - Care team member roles and role status: temporal context and care setting context
    - How to manage unmet care team member roles
    - Information access by multi-organisation, multi-disciplinary care team and consent requirements
- Other related work:
  - Updates to FHIR Care Team resource structure and value sets
  - Review relationship of Human & Social Services Directory and patient-centered care team
Your contributions/inputs and support are critical to the success of all PCWG projects
- PCWG confluence page: [https://confluence.hl7.org/display/PC](https://confluence.hl7.org/display/PC)
- [https://confluence.hl7.org/display/PC/Care+Plan+DAM+2.0+-+Project+Index+Page](https://confluence.hl7.org/display/PC/Care+Plan+DAM+2.0+-+Project+Index+Page)

Please join us at the weekly conference calls:
- Care Plan DAM 2.0 and Multiple chronic condition eCare Plan: **Wednesday** 5:00pm US Eastern
- Online Meeting Link: [https://zoom.us/j/5328571160](https://zoom.us/j/5328571160)
  Online Meeting ID: 532 857 1160
Opportunities for CDA Subject Matter Experts

- CDA Management Group is seeking additional members who bring perspective from specialty or ambulatory EHRs, international communities using CDA, or other social care organizations engaged in the adoption of CDA.
- TSMG is seeking an additional member to bring a CDA perspective to their vocabulary work.
CDA turns 23 in 2023!

CDA DOB: 10/24/2000

Thanks for all you do to make interoperability a reality today!
On May 11, 2023, the CDA Community decided to withdraw CDA R2.1.

2023 May WGM Meeting Notes
2023.05.11 Q0 - CDA Management Group - Confluence (hl7.org)

Withdrawal Ballot for Base HL7 CDA R2.1 in January 2024.

CDA Core R2.0 = A FHIR Logical Model for CDA R2.0
CDA means Clinical Document Architecture

Since you started reading this slide, **over 500 CDA documents** have been exchanged. It’s over 100 documents per second* in the United States alone!!

* C-CDA Volumes reported over 4 Billion CDA documents exchanged from Carequality and US national networks, and even more shared through international, regional and administrative exchange.
Did you know?

* C-CDA Volumes reported from Carequality and US national networks, and even more shared through international, regional and administrative exchange.

Clinical Documents

Over 4 Billion Served Annually*
Web IG Publishing Bridging Strategy for CDA IGs

C-CDA R2.1

- pdf

2005 - now

C-CDA R2.1

- Online Edition

2020 - 2023

Only Available for C-CDA R2.1, Companion Guide 4.1

C-CDA

- StructureDefinition (SD) Edition

Jan 2024 Ballot

For C-CDA 3.0

® Health Level Seven and HL7 are registered trademarks of Health Level Seven International, registered with the United States Patent and Trademark Office.
CDA On-Line Navigation Tool – 9/6/23 Update

- [https://www.hl7.org/ccdasearch/](https://www.hl7.org/ccdasearch/)
- Latest C-CDA R2.1 Errata Release
  - Consolidated Clinical Document Architecture (C-CDA) 2.1 (2.1.0.7, September 2022)
- Latest C-CDA R2.1 Companion Guide
  - Everything needed for USCDI V3
  - 2.1 Companion Guide (4.1.1, June 2023)
- Viewable pdf pages for C-CDA R2.1 Volume 1 and Volume 2
- Link to the Prototype for the new web-based publishing format for C-CDA
C-CDA R3.0 Roadmap - (2023-2024)

Tooling Updates and Support:

February

- Import Sep 2022 Errata*
- ToF Updates start*

- Import Companion Guides R1-R4
- Content QA

Design and Balloting:

August

- USCDI v4 Design
- Design and Prep for C-CDA Re-ballot

September

- Ballot Submission

C-CDA R3 in SD Publication
~May 2024
**HL7 Response to USCDI Annual Expansion Process**

14-month cycle beginning each July

**January**: Ballots US Core and C-CDA design of USCDI version published prior July

**April-May**: Publishes US Core and C-CDA design of USCDI version published prior July

**April**: C-CDA IAT

**April-July**: Value Set Update to support finalized designs

**July-December**: Design sessions for the next January ballot begin for next USCDI version

**Aug**: Publish updated Value Sets for previous USCDI version

**Aug or Sep**: C-CDA IAT

US Core & C-CDA

**July**: USCDI New Published Version X

**July-Dec**: HL7 Map/design US Core, then C-CDA for X

**Aug**: Publish Value Sets for X-1

**Aug or Sep**: C-CDA IAT

**Version X-1 is the Prior Published Version**

**Jan**: USCDI Publishes Draft Version X+1

**Jan: HL7 Publish US Core & C-CDA**

**April-May**: HL7 Publish US Core & C-CDA Version X

**A game of leapfrog!**

SD publication will make future updating for USCDI more efficient
Working toward a landing “home page” for base CDA “core” specification

With link to an Implementation Guide Registry page

FHIR Foundation spec search tool will support CDA IG’s published using FHIR IG Publisher
Clinical Quality Information (CQI)
A little bit about CQI…

- **Who**: Quality measure and decision support developers and implementers
- **What**: Create and maintain HL7 standards supporting measuring, evaluating, and reporting of quality data (ex. QI-Core, Quality Measure, DEQM and HQMF)
- **When**: See next slide for regular meeting times
Meeting times

- Main work group calls (Fridays 1pm ET)
- FHIR Sub-Group Calls (Wednesdays 10am ET)
- DEQM (Data Exchange for Quality Measures)/Gaps in Care Project Calls (Every Other Thursday 2pm ET)
- Risk Adjustment Use Case Project Calls (Thursdays 3pm ET)
- Value-Based Performance Reporting (Mondays 2pm ET)
- More information: https://confluence.hl7.org/display/CQIWC
Our new CMG member – Kyle MacLennan

About Kyle

Kyle is a Computer Scientist at MEDITECH, Inc. who has spent almost 20 years working on improving patient health via Interoperability solutions. Starting in his early days, implementing HL7 v2 interfaces at hospitals across the country, Kyle has been at the forefront of MEDITECH's transitions to HL7 v3, C-CDA, and FHIR based solutions. When he decided to pursue a career in software development, Kyle never envisioned himself working in the healthcare space. But being able to help people, every day, using his technical skills and love for solving problems has become a passion.

Outside of work Kyle is a self-described nerd who loves science fiction, his local sports teams, and a good dad joke. Most importantly, he enjoys spending as much time as possible with his wife, Beth, and their three sons.
Conformance WG

“How to implement HL7 Successfully” WG

- HL7 International
- www.HL7.org

HL7 International
Obligations and Requirements (How should these work?)
- Improving mustSupport
- Generic model for all product families
- Thoughts and proposals are under discussion
- Functional + data requirements ⇒ proposal

https://confluence.hl7.org/display/CONF/Support-Handling
V2 Improvements

- Data Type Specializations (aka Data Type Flavors)
  - ballot passed

- Vocabulary Management
  - ValueSet + Codesystem Model instead of Tables

- Separate Conformance Methodology Standard
  - Applicable to all v2.x Igs

- HL7 v2+
  - See the new format here!
Conformance

- **FHIR®**
  - mustSupport Alternative

- Abstract Conformance Methodology on top of all product lines

- Conformance
  - Admin
  - Tooling

- Vocabulary
  - THO/UTG (Terminology Migration to a common Terminology Model)
Does your implementation conform to HL7?

What does this mean?

The Conformance WG provides a mechanism that lets you show your conformance to HL7 standards.

The Conformance-WG provides a framework for facilitating interoperability.
Applying Profile Hierarchies

- Methodology already in place
  - E.g. “Template Layers”
  - More adoption needed!
- Supports modularization and reuse
- Avoid verbose specifications
- Leverage existing work

Conformance tells you how!

Simplifies Development!
Conformance & Interoperability

Specification

Compliance

Derived Specification

Compatibility

Implementation (as sender)

Conformance

Derived Specification

Implementation (as receiver)

Interoperability

Conformance & Interoperability
All described in a book
• Who is FAST?
• Current Projects
• Discovery Projects
FAST: Who are we?
1. Problem: Moving to a modern, restful, API-based digital exchange architecture in healthcare is necessary to advance improved cost and quality on behalf of patients.

2. A growing pace of regulations drive FHIR adoption: Interoperability Regulations, Price transparency, Prior Auth, Patient Access APIs, Payer to Payer Exchange, etc.

3. And we believe that TEFCA will eventually look for exchange scale via FHIR.

4. But, FHIR based APIs are not positioned to scale today.

5. Solution: A group of payers and providers convened a work effort under ONC to identify solutions for scalability barriers. This is the FHIR at Scale Taskforce (FAST) industry project.

6. We made good progress: Implementation guides in progress or approved for dynamic scalable security, identity matching, exchange across networks, and endpoint directory.

7. This effort has transitioned to HL7 as an “accelerator”, or “home base” of activity for the industry to continue to drive FHIR scale, remove infrastructure barriers, and drive adoption.

We want you to join this effort and sign up as member. This organization will be the home base for driving infrastructure scale for FHIR.
What is the Problem?

**TODAY - Exchange**
Exchange characterized by point-to-point interfaces
Adoption trajectory is slow, expensive, and fragmented

**FUTURE - Interoperability**
A consistent infrastructure approach to API implementation
Consensus on implementation guides for key enablers, such as directory, security, patient matching, exchange and testing

**DESIRED RESULT:**
A national interoperability approach that enables consistent data exchange via API. We have this for administrative transactions (X12, clearinghouses, WEDI) and pharmacy transactions (NCPDP, Surescripts). We do not have this for HL7-FHIR.
What is FAST?

The FHIR at Scale Taskforce (FAST) is a representative community of motivated healthcare industry stakeholders and health information technology experts who have identified HL7® Fast Healthcare Interoperability Resources (FHIR®) scalability gaps and are actively working on solutions to address current barriers to enable scalable data exchange using FHIR APIs.

Oct 2017 –
Payer + Provider
(P2) FHIR
Taskforce
Established
Originally focused on Payer/Provider collaboration

2017

2018

2019

2020

2021

2022 and the Future

Purpose: Identify ecosystem barriers, propose solutions, and develop standards to implement solutions

Purpose: Establish a durable community for addressing ecosystem-wide barriers to using FHIR to enable interoperability at scale

Analysis, Barrier identification, Solution Concepts, Gather Industry Feedback

Implementation Guide Dev Begins

Transition to FHIR Accelerator

Continue collaborative work to develop FAST solutions (IGs) under the HL7 FHIR Accelerator Program

All content is available on the FAST Project Page
FAST 2023 Members

AEGIS
Availity
avaneer
BlueCross BlueShield Association
CMS
Department of Veterans Affairs
Humana
edifice
EVERNORTH
HCSC
Kaiser Permanente®
MEDITECH
Optum
salesforce
smile
surescripts
Providence

Founding Member
Focus on Technical Barriers that Prevent Scale
FAST Current Projects
• Goal: Leverage most up to date industry considerations to build on best practices and recommendations for identity matching services and KPIs, and identity assurance for an appropriate, national, standards-based approach for individual identity matching.

Project Status
• FHIR IG STU1 Published on June 1\textsuperscript{st}, 2023

Project Leads:
• Julie Maas, EMR Direct
• Aaron Nusstein, Lantana
• Mohammad Jafari, VA
• Ranjan Saxena, Humana
Next Steps

• STU2 efforts and prioritization are underway. Efforts will focus on three areas:
  • Review the list of outstanding issues from STU1
  • Update the Technical areas as part of the STU2 IG
  • Move guidance and best practices into separate documents for separate ballot and more flexibility

• Each will have a sub-team to review and update

Schedule

• Workgroup discussions to provide input into STU 2 - 1st and 3rd Thursdays at 2pm ET

• Goal: Development of a scalable, easy to adopt, core security solution, using Unified Data Access Profiles (UDAP), focused on how to manage the security of millions of patient records, payers, providers and public health agencies information sharing needs at scale. Aims to provide the industry with scalable security solutions, that ensure the requestor of information using FHIR based information is appropriately authenticated and has the authorization to see the requested data.

Project Status
• STU1 published in 2022, wide adoption due to TEFCA, Carequality and FHIR IG adoption

Project Leads:
• Luis Maas, EMR Direct
• Brett Stringham, United Health
Next Steps

• Reviewing potential modifications and additions for STU2 publication including community identifiers and further refinements to JWT structure and content

Schedule

• Meets on the 2\textsuperscript{nd} Tuesday of the month

• Goal: A FHIR based approach for building a national endpoint directory capability, focused on easing the ability to identify endpoints currently located in multiple locations by proposing a federated model that uses a single authoritative source of truth. Aims to ensure accuracy of the endpoint information and reduce burden to keep the information up to date.

Project Status
• Moved from three FHIR IGs to one in January
• Completed September 2023 ballot cycle

Project Leads
• Bob Dieterle, EnableCare
• Ming Dunajick, Lantana
Next Steps

• Focusing on Reconciliation of 130 ballot comments starting at the WGM

• Schedule:
  – Workgroup discussions to provide input - Mondays at 3pm ET and Thursdays at 11am ET (HL7 Conference Call Center)

Discovery Projects
• Goal: Collaborate with the HL7 community to gather and document requirements regarding ecosystem/infrastructure workflow conformance testing including versioning and develop best practice guidance.

Project Status:
• Completed the Discovery Phase, project in review by membership and steering committee

Project Leads:
• Mario Hyland, AEGIS
• Daniel Berezeanu, IHE Catalyst
• Yunwie Wang, MITRE
Goal: Exploring scalability factors for consent management and enforcement to define what consent at scale means and entails. Explore a high-level list of abstract use cases in consent management and enforcement and the requirements for scalability for each of these use cases.

Project Status:

- Discovery Process complete, all discovery documentation submitted to Steering Committee for Approval

Project Leads:

- Sam Schifman, Availity
- Mohammad Jafari, VA
FAST Consent Discovery Work Structure

• Aspects of Scalability
  – Unpacking what scaling means for consent management and enforcement

• Abstract Use Cases
  – What areas in consent management and enforcement need to be scaled

• Gap Analysis
  – What existing initiatives cover and exposing the gaps

• Proposing a set of recommendations
  – Where FAST can contribute
FAST Consent Technical Scope

- Consent Management
- Consent Decision and Enforcement
- Excluding authentication
- Excluding broader scope of authorization beyond consent enforcement

Authorization service determines if the consumer should have access to the data. This includes determining legally who is required to have given consent, if anyone, and evaluating any patient criteria, such as age, that might have an effect on authorization. Conditions and special situations, such as "break glass," would be evaluated here.

The Consent Decision Service is only responsible for calculating the result of the consent record, or records, that have been filed in association with the identities specified in by the Authorization Service. This includes considerations such as, has the consent expired.
FAST Consent Abstract Use Cases

• Provider-Initiated Request to Consent
• Patient-Initiated Consent
• Review Consent
• File/Sign Consent
• Delegate Consent
  – Substitute decision maker
  – Healthcare proxy
  – Legal guardian for a minor or adolescent
Contacts:

- Dana Marcelonis, Program Manager dana.marcelonis@pocp.com
- David Pyke, Technical Director david.pyke@pointclickcare.com
- Duncan Weatherston, FAST Steering Committee Co-chair duncan@smilecdr.com
- Deepak Sadagopan, FAST Steering Committee Co-chair deepak.sadagopan@providence.org
The Cross-Paradigm Gender Harmony Informative FHIR IG and CDA R2 IG pre-publications are available for review
- Co-sponsors should plan to attend the TI-hosted Gender Harmony call on Monday Q4 to review the pre-publication materials and vote on publication approvals

We are indebted to all members of the project who supported the creation of this implementation guide. In particular, the following organizations provided mission-critical administrative, technical and subject matter expertise for ballot resolution and publication:
- US Department of Veterans Affairs
- Canada Health Infoway

Overall Authors and Editors included Robert C. McClure (MD Partners, Inc), Carol Macumber (Clinical Architecture, LLC), Robert Horn (Fairhaven Technology), Lorraine Constable, Clair Kronk, Joanie Harper (Canada Health Infoway), Mary Kay McDaniel (Cognitive Medical), Sean Muir (Cognitive Medical) and Cooper Thompson (Epic)
Unified Terminology Governance (UTG) and HL7 Terminology (THO) Update

- Updated UTG process is live
  - Proposals are being submitted and implemented using the new process
  - No tooling or downloads required; edits can be proposed using web-based editor
  - Improved linking to documentation based on state of the proposal

- THO v5.3.0 publication expected around the time of the WGM

- Next THO freeze is scheduled for 11/5 with publication expected around 11/19
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<thead>
<tr>
<th>Day</th>
<th>Time</th>
<th>Session Description</th>
<th>Lead(s)</th>
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<td>Monday</td>
<td>Q3</td>
<td>Reducing Clinician Burden (RCB) Project Team</td>
<td>Gary Dickinson FHL7, David Schlossman MD</td>
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<tr>
<td></td>
<td></td>
<td>• Update on ONC Burden Reduction Activities, Thomas Mason MD, Steve Posnack</td>
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<tr>
<td>Monday</td>
<td>Q4</td>
<td>Problem Oriented Health Record (POHR) Project Team</td>
<td>Lincoln Weed JD, Charles Burger MD</td>
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<td>Tuesday</td>
<td>Q1</td>
<td>EHR WG Hosting: Mobile Health</td>
<td>WG Co-Chairs</td>
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<td></td>
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<td>• Dental Functional Profile Project Update, Greg Zeller DDS</td>
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<td></td>
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<td>• Medication List Management and Reconciliation Focus Team Update, James Tcheng MD</td>
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<td>• Military Toxic Exposure Project Update, Charles Gabriel</td>
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<tr>
<td>Tuesday</td>
<td>Q3</td>
<td>EHR WG Hosting: International Patient Summary</td>
<td>Rob Hausam MD, Giorgio Cangioli</td>
</tr>
</tbody>
</table>
## HL7 Electronic Health Record WG
### Key Sessions – 11-13 September 2023

| Tuesday Q4 | • *Artificial Intelligence* Focus Team  
|            |   Leads: Gary Dickinson FHL7, Steve Datena MD  
|            | • *Project 11 – AI Data Lifecycle* Project Team  
|            |   Leads: Mark Janczewski MD, Rhonna Clark, Ioana Signureanu |
| Wednesday Q1 | EHR WG Hosting:  
|              |   *Patient Empowerment, Patient Care, Health & Social Services*  
|              |   Leads: WG Co-Chairs |
| Wednesday Q2 | • *Tooling Support* for Functional Models and Functional Profiles  
|              | • *FHIR R5 Record Lifecycle Event Implementation Guide* (RLE IG)  
|              | • *EHR System Functional Model R3*  
|              |   • *FHIR R5 “Requirements” Resource*  
|              |   • Mapping Conformance Criteria to FHIR Resources/Elements  
|              |   Leads: Michael Van Der Zel, Gary Dickinson FHL7 |
| Wednesday Q3 | *Podiatry Functional Profile* and Use Cases  
|              |   Lead: Michael Brody DPM |
| Wednesday Q4 | • *Behavioral Health*, Gary Dickinson FHL7  
|              | • *School Health*, John Ritter FHL7 |
HL7 Electronic Health Record WG
Projects Underway – Volunteers Invited

HOT TOPICS:
“Reducing Clinician Burden” (Monday Q3)
“Problem Oriented Health Record” (Monday Q4)
“Artificial Intelligence” (Tuesday Q4)
“Behavioral Health” (Wednesday Q4)

EHR/PHR System Functional Models – Just passed ISO Fast Track Ballot
• ISO/HL7 10781 – Electronic Health Record System FM Release 2.1
• ISO/HL7 16527 – Personal Health Record System FM Release 2

EHR System Functional Profiles (FPs)
• Recently Published – EHR System Usability, Pediatric Care
• Ready to Publish – Podiatry (Phase 1), Problem Oriented Health Record (Phase 1)
• In Progress – Artificial Intelligence, Dental Health (Phase 2), Medication List Management and Reconciliation, Podiatry (Phase 2), Problem Oriented Health Record (Phase 2)
• Preliminary – Behavioral Health, School Health
Imaging Integration

2023-09 Update
Overall Workgroup Goals

- Joint HL7 / DICOM work group

- Develop and maintain FHIR imaging-related resources
  - ImagingStudy
  - ImagingSelection

- Develop imaging implementation guide, profiles, and white papers for FHIR
IGs in active development

- Radiation Dose Summary for Diagnostic Procedures on FHIR
- DICOM Structured Report to FHIR Observation Mapping
- Image Ordering Workflow Mapping on FHIR
Sessions of Note

- Tuesday Q3 – General WG Introduction Session
  - Overview of Imaging Integration WG activity
    - Imaging resources
    - Imaging IGs
    - Relationship with DICOM / DICOMweb
International Patient Access

- RESTful APIs: SMART, search parameters
- Minimal profiles, reflect current state
- Terminologies specified locally
FHIRcast
modern, simple application context synchronization

1. User launches Application for which Context Synchronization is Desired from Driving Application recommended to use SMART App Launch including hub.url and hub.topic

2. Application Subscribes to hub.topic

3a. Context Change Requests with FHIR resources

3b. Context Change Events with FHIR resources

4. Application Unsubscribes from hub.topic
You are Invited:
To Learn How the Patient Empowerment WG is AMPLIFYING the View Points of Patients and Their Caregivers in HL7 Standards Work

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Patient Empowerment Work Group Overview

- Patient Empowerment is meeting this week
  - Action Packed schedule Monday to Thursday
  - Overview Monday Q3

- Topics Include
  - Patient Contributed Data White Paper
  - Advance Directive Interoperability w/FHIR
  - Patient Request for Corrections
  - Standard Personal Health Record w/FHIR
  - And more…
  - Collaborating with EHR, HHS, FHIR-I, Patient Care, Orders & Observations, CDS, CBCP, Terminology, Devices, Mobile Health, Cross-Group Projects, etc.
September WGM 2023

Payer/ Provider Information Exchange Work Group (PIE)

Co-chairs:
Durwin Day
Christol Green

Interim Co-chairs:
Chris Johnson
Topics to be covered at PIE WGM

PIE WGM agenda can be found at: https://confluence.hl7.org/display/ATT/PIE+WGM+Sept+11-14%2C+2023+Agenda

Monday Sept 11th:

- Q1 - HL7 Plenary Session
- Q2 - HL7 Plenary Session
- Q3 - Administrative work
  - Welcome
  - WG Health report
  - SWOT
- Q4 –
  - Physical Activity Project Update
  - Review Attachment Implementation Guides tab on PIE Confluence page that need updates
Tuesday Sept 12th:

- **Q1**
  - Connectathon Updates
  - Industry Updates
    - CAQH CORE – Bob Bowman
    - NCVHS
    - USCDI
    - Other

- **Q2**
  - CARIN Digital Insurance Card Update
    - Smart Card

- **Q3 (FM Hosting)**
  - Industry Updates
    - Deep Dive on PCT - Corey Spears
    - CDex Update – Eric Haas
    - APIs and 3rd Party Apps discussion

- **Q4**
  - FAST Accelerator – Alix Goss

- **Q5**
  - Dental BOF – (Paradise Valley room)
Wednesday Sept 13th:

- **Q1**
  - Open forum to discuss NPRMs and future regulations. Sharing of best practices, current project work in your organization and ideas for improvements.
    - Possible topics include:
      - Interop and ePA, Attachments and electronic signatures, CAQH core, X12 and NCVHS, TEFCA updates, Other ???

- **Q2**
  - Discuss/provide comments related to the newest USCDI version

- **Q3**
  - Da Vinci Updates – Bob Dieterle

- **Q4**
  - FHIR I at FMG – Llyod McKenzie
PIE WGM continued

Thursday Sept 14th:

- **Q1**
  - Value Based Care Reporting update
  - PIE WG planning and guide reviews
    - January 2024
- **Q2**
  - LOINC
  - Open for other topics
Public Health WG

September 2023 WGM

Last Updated 9/6/2023
Our Mission

- To create and promote its standards by helping to assure that HL7 product lines (e.g. v2, CDA, FHIR), data models, messages, documents and services address the requirements of the many public health agencies, both governmental and non-governmental.
Areas of Interest

- Human and animal population health monitoring
- Disease and event detection, response and control
- Contact tracing
- Outbreak investigation
- Immunization
- Vital records

- Public health registries
- Food safety
- Environmental health
- Emergency preparedness and response
- Reporting to monitoring and regulatory agencies
Project Areas

- Immunization and Vaccine Credentials
  - v2, FHIR
- Syndromic Surveillance
  - V2
- Case Reporting and Reportability Response
  - CDA, FHIR
- Health Care Surveys
  - CDA, FHIR
- Cancer Registry Reporting
  - CDA, FHIR
Project Areas

- Newborn screening (Congenital Heart Defects, Early Hearing Detection, Diagnostic Audiology, Birth Defects)
  - v2, CDA, DAM
- Longitudinal Maternal & Infant Health Information for Research
  - FHIR
- Occupational Data for Health
  - v2, CDA, FHIR
- Lab and Healthcare Acquired Infections
  - v2, CDA, FHIR
Project Areas

- Making EHR Data More Available for Research and Public Health (MedMorph)
  - Reference Architecture IG
  - Use Case Content IGs
    - Health Care Surveys
    - Cancer Registry Reporting
    - Research
  - FHIR

- Situational Awareness for Novel Epidemic Response (SANER)
  - FHIR

- Bidirectional Services eReferral
  - FHIR
Project Areas

- Vital Records (Death Reporting, Medicolegal Death Investigation and Birth & Fetal Death Reporting)
  - DAM, v2, CDA, FHIR
- Common Profile Library for Vital Records
  - FHIR
- Common Profile Library for US Public Health (in general)
  - FHIR
- Helios FHIR Accelerator
Getting Involved

- Weekly calls every Thursday at 4PM Eastern
- Immunization focused calls every other Friday at 11AM Eastern
- Come for the knowledge, stay for the high class humor!

“I bought a sweater that attracted a lot of static electricity, so I returned it. They gave me a new one free of charge.”
V2 Management

“V2 is still alive!” WG
Our Team

- Michael Faughn
- Ralf Herzog
- Toni Julian
- Riki Merrick (co-chair)
- Craig Newman (co-chair)
- Frank Oemig (co-chair)
- Amit Popat
- Nick Radov
- Robert Snelick

Still seeking new volunteers!
v2.9.1 is ready

- from Gender Harmony Project
  - New segments
    - GSP: person gender and sex
    - GSR: recorded gender and sex
    - GSC: sex parameter for clinical use
- Some more fields
- Separate Conformance Methodology Standard
- Vocabulary improvements and adaptations
v2.x Work

- Maintenance
  - Gender Harmony Project
  - Vocabulary Adjustments (⇒ THO/UTG)
  - ...

- Data Type Specializations (aka Data Type Flavors)
  - ballot passed
V2+ Improvements

- Clarified Vocabulary Management
  - ValueSet + Codesystem Model instead of Tables

- HL7 v2+
  - New Layout = new UI/UX
  - New metamodel
  - See the new format here!
    http://www.hl7.eu/refactored/hl7.html

V2+ Vocabulary:
http://www.hl7.eu/v2plusvocab/
Vocabulary Management

- A Table is
  - A concept domain only
    ➢ (w/ or w/o examples)
  - A value set
    ➢ „own“
    ➢ Imported
      ▪ HL7 or foreign value set
  - A codesystem

- Improve to
  - Concept Domains
    ➢ As a codesystem
  - Value Sets
  - CodeSystems

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FROM THE HL7 ARCHIVES
Project overview and structure

Protecting urban aquatic ecosystems to promote One Health
WGs are responsible for reviewing and approving:
  - Project teams that pre-work groups sufficient time to review proposed content
  - All project teams must ensure content is available on HL7 managed platforms
  - Later than the content deadlines as identified in the Publishing Calendar
  - Product Management Groups and Work Groups may establish earlier deadlines for their products.
  - Product Management Groups and Work Groups may decide to include project content from ballot based on a project’s failure to meet milestones.
  - The TC will support such decisions.
New Orleans Connectathon