HL7 Work Group Co-Chair Nominees - 2024

Below are the nominees for the Work Group Co-Chair positions that are currently up for election for the term beginning 1/1/2025. Each nominee was contacted and asked for a position statement. Their statements are provided below alphabetically by work group and then by nominee.

NOTE: Co-Chair elections will be conducted using Election Runner, an online voting application (details at end of document).

Arden Syntax
This group will be electing one co-chair to fill the position currently held by Robert Jenders.

- Robert A Jenders, MD, MS, FACP, FACMI, FHL7, FAMIA, Senior Associate Director, Clinical and Translational Science Institute & Professor of Medicine, University of California, Los Angeles - I have been privileged to serve as co-chair of the Arden Syntax (AS) Work Group (WG), working with its members and industrial partners to make an already-useful standard even more so with the creation of implementation guides, educational activities at universities and conferences as well as improvements to the Arden Syntax itself. This includes recently guiding to publication the latest version, V3.0, of the Arden Syntax. As a practicing clinician and researcher who is board-certified in clinical informatics and whose work focuses on clinical decision support (CDS), I respectfully ask for your support to continue this work as co-chair to facilitate increased use of CDS and improved health outcomes.

Biomedical Research and Regulation
This group will be electing two co-chairs to fill the positions currently held by Jean Duteau and Smita Hastak.

- No nominations received

Clinical Decision Support
This group will be electing two co-chairs to fill the positions currently held by Howard Strasberg and Isaac Vetter.

- Howard Strasberg, MD, MS, FACMI, FAMIA, VP Medical Informatics, Wolters Kluwer Health Clinical Effectiveness - I am a board-certified clinical informaticist with over 20 years of experience in the field. I've been honored to serve as a co-chair of the Clinical Decision (CDS) Work Group (WG) for the last 14 years. I bring the perspective of being both a standards developer and a standards implementer. I have worked on many different standards, including Infobutton, Order Set, vMR, Health eDecisions, Clinical Quality Framework, Clinical Quality Language, CDS Hooks and FHIR. I strive to continue to work on CDS standards that are based on sound informatics principles, but which can also be implemented in a straightforward fashion.

- Issac Vetter, Epic - I'm an active member of HL7, including several HL7 working groups, notably Clinical Decision Support (CDS). I have over a decade of experience in health IT interoperability and integration. Currently, I lead the Project Management Committee for CDS Hooks, and am also leading development of the FHIRcast and International Patient Access specifications. I value HL7’s CDS Work Group, not just due to the importance of the interoperability domain, nor the significant clinician and informaticist engagement, but also because the group is made up of talented, expert, and kind people. If elected as CDS Co-chair, I'll work to continue to inculcate CDS's culture, competence, and expertise, but also strive to ensure that Bryn needn't both lead and scribe our calls.
Clinical Genomics
This group will be electing three co-chairs to fill the positions currently held by Srikar Chamala, James Jones, and May Terry.

- **James Jones, MPhil, Senior Project Manager, SMART Health IT** - My focus is on furthering open-source opportunities to use FHIR for population health and research. I have been heavily involved with the Clinical Genomics (CG) Work Group (WG) since 2018, when I began presiding over weekly FHIR Subgroup calls to shepherd the Genomics Reporting IG through two ballot & reconciliation cycles and now into a third. I have served as Connectathon Track Lead multiple times, have represented the CG WG at DevDays and in HL7 workshops. I continue to look forward to bringing a principled approach to the important standardization work that still needs to be done to enable precision medicine.

Clinical Information Modeling Initiative
This group will be electing one co-chair to fill the position currently held by Claude Nanjo.

- **Claude Nanjo, University of Utah Health Care** - As co-chair of the Clinical Information Modeling Initiative (CIMI) Work Group (WG), I would like to work with other HL7 work groups and international affiliates to help facilitate the identification of existing FHIR implementation guides and/or when needed the development of new FHIR implementation guides to form a coordinated set of high-quality, international-realm FHIR implementation guides to initially support the management of chronic conditions in primary care.

Clinical Interoperability Council
This group will be electing three co-chairs to fill the positions currently held by Laura Heerman Langford (Interim), James McClay, and James Tcheng.

- **Laura Heermann Langford PhD, RN, Consultant** - I am a nurse informaticist seeking re-election as co-chair of the Clinical Interoperability Council (CIC). I have served as a co-chair of CIC since 2017 and continue to be committed to the success of the various projects supported by the work group. I am dedicated to the representation of clinicians throughout HL7 and support the mission of CIC being an entry point into HL7 for clinicians of all disciplines.

- **James McClay, MD, MS, Professor, Biomedical Informatics and Emergency Medicine, University of Missouri, Columbia, Missouri** - I'm an emergency physician and informaticist running for re-election as a co-chair of the Clinical Interoperability (CIC) Work Group (WG). I've been a prior CIC WG Co-chair and have been co-chair of the Emergency Care WG for a number of years. My interest is in FHIR deployment in community and rural health exchanges in support of clinical care and clinical research. I have close ties with medical specialty societies, the PCORnet research network and the American Medical Informatics Association.

- **James E. Tcheng, MD, Professor of Medicine (Cardiology) and Professor of Informatics, Duke University, Durham, NC; Chief Data Scientist, University of Nebraska Medical Center – Center for Intelligent Health Care, Omaha, NE.** - I am an interventional cardiologist and clinical informaticist who has been privileged to serve as co-chair of the Clinical Interoperability Council (CIC) for the past 3 years. I am the clinician leader of the CardX (Cardiology Data eXchange) domain of the HL7 CodeX FHIR Accelerator and a member of the HL7 Advisory Council. My informatics work focuses on the development of clinical concepts as computable data and the implementation of structured reporting across academia, regulatory agencies, the life sciences industry, professional societies, and standards organizations, to improve the capture, communication, interoperability, and analysis of healthcare information. I would be honored to continue to advance the work of the CIC as co-chair.

Clinical Quality Information
This group will be electing two co-chairs to fill the positions currently held by Juliet Rubini and Anne Smith.

- **Juliet Rubini, MSN, MSIS, ICF** - I have served as one of the Clinical Quality Information (CQI) Work Group (WG) co-chairs since 2018 and look forward to continuing in the role. I enjoy working with all the different people and groups that bring the perspectives our work needs to continue improving. As part of my work in my day job at ICF, I work closely with measure developers and the measure tool development teams to ensure standards are getting developed and implemented appropriately. I look forward to bringing my perspective to our work and helping other newer members of HL7 navigate this amazing organization.
Anne Smith, BSN, RN, MSHSA, ACHIP, Assistant Vice President, National Committee for Quality Assurance (NCQA) - It has been a privilege to serve as co-chair for the Clinical Quality Information (CQI) Work Group (WG) for the last 2 years. I am committed to doing the best job possible and look forward to working with you for another 2 years.

I have worked in quality measurement and informatics for the last 20 years. I have been an active member of the CQI WG since 2012. I believe the future of quality measurement depends on having data and measures in a standard format. I also believe that format will be FHIR. I would like to participate more in the effort to improve the standards to support quality measurement.

Community-Based Care and Privacy
This group will be electing four co-chairs to fill the positions currently held by Jonathan Coleman (not running for re-election), Suzanne Gonzales-Webb (Interim), Mohammad Jafari, and Greg White.

- Suzanne Gonzales-Webb, CPhT, FHL7 - I have been an active member of HL7 for over 20 years in both the Security and Community-Based Care and Privacy (CBCP) Work Group (WG). I am a dedicated standards SME and healthcare professional with over thirty years as a pharmacy technician in various clinical and remote settings including inpatient and outpatient pharmacy, onsite deployment to emergent-emergency disaster sites (including Hurricane Katrina, Hurricane Harvey and the San Diego firestorms). More recently, I am a Project/Program Manager for Cognitive Medical Systems managing the contract side of Standards and Interoperability for the Department of Veteran Affairs.

- Mohammad Jafari, PhD, U.S. Department of Veterans Affairs - I am a subject-matter expert in security, privacy, interoperability, and consent, and adjunct faculty at College of Health Solutions at Arizona State University. Serving initially as an interim co-chair, I have been a co-chair of the Community-Based Care and Privacy (CBCP) Work Group (WG) for the past 3 years and have been actively involved with the maintenance of the Consent resource. I currently serve as a co-lead of the FAST Consent Management project and have been involved in academic research on consent modeling and implementation with ASU. I also previously served as the Principal Investigator and Project Director of the ONC LEAP project on Advanced Scalable FHIR Consent APIs.

- Greg White, MS, MA - Security+, Security Risk Solutions, Inc. - I first became active in the Community-Based Care and Privacy (CBCP) Work Group (WG) several years ago when I was involved in an eLTSS project. While my current activities do not have a heavy overlap with CBCP’s scope, I have enjoyed engaging with the standards projects that involve the WG. The WG supports both patient consent and standards that facilitate a patient’s recovery, rehabilitation, and support journey. It is a pleasure to assist initiatives that are advancing and refining standards in this space.

Conformance
This group will be electing two co-chairs to fill the positions currently held Nathan Bunker and Frank Oemig.

- Nathan Bunker, American Immunization Registry Association (AIRA) - I have been an active member of the Conformance Work Group for the past 8 years. At AIRA, I contributed to the development of a measurement and improvement initiative that assisted Immunization Information Systems (IIS) in aligning with national standards. This initiative was a collaborative effort with the Centers for Disease Control and Prevention (CDC) and the National Institute of Standards and Technology (NIST). My specific contributions included the development of software tools to support the testing and verification of software systems. In addition to my work with AIRA, I have supported numerous state health programs in developing specifications that accurately document their interfaces and identify areas for alignment with standards. This work proved critical in ensuring IIS were prepared for the COVID-19 pandemic. As a co-chair, I advocate for clear and robust conformance standards to facilitate the development of implementation guides that can be efficiently adopted by the public health community. I am committed to leveraging my experience to promote harmonized standards development in conformance, interoperability, and related testing activities.

- Frank Oemig, PhD, FHL7 FIAHSI, Oracle Cerner - The improvement – or establishment – of interoperability among information systems is one of my favorite interests in healthcare IT. With that vision I have contributed to all product families of HL7. An essential part here is conformance, or more importantly, compliance of systems and specifications on one hand and compatibility and interoperability among different specifications and solutions on the other. A relevant starting point is a consistent development of HL7 standards and
elimination of errors, and to help vendors with their implementation. Therefore, I have served the Conformance Work Group as co-chair for several years and am seeking re-election for another term.

My vision for the Conformance Work Group is to create a superior conformance methodology that is independent of any individual specification but incorporates all necessary conformance constructs in an abstract form. This way, the different product lines should become a specialization thereof. That will help developers and implementers to read and realize the specifications ideally with the same background knowledge.

For almost 30 years I have been an active member of the international community. I have contributed to the official Working Group Meetings since 1998 and am a recipient of both the Volunteer of the Year award and the HL7 Fellowship award.

Within Oracle Cerner, my role is that of senior solution leader interoperability for our products and I also serve as the official representative to HL7 and other organizations.

**Cross-Group Projects**

This group will be electing one co-chair to fill the position currently held by Jean Duteau.

- No nominations received

**Devices**

This group will be electing three co-chairs to fill the positions currently held by Martin Hurrell, John Rhoads, and Martin Rosner.

- **Martin Hurrell**, I've been an active member at HL7 International for around twenty years and was previously a co-chair of the Anesthesia Work Group before it merged with Devices. I’m also a member of the SNOMED CT Anesthesia Clinical Reference Group. Within the Devices Work Group, my current focus is on the development of a FHIR IG for Intra-Procedural Anesthesia Records (P-1936).

**Electronic Health Records**

This group will be electing four co-chairs to fill the positions currently held by Michael Brody, Gary Dickinson, Michael Van der Zel, and Feliciano Yu.

- **Michael Brody, DPM** - I have had the honor of serving as a co-chair for the Electronic Health Records (EHR) Work Group (WG) for the past few years and affirm that I have the time and resources to continue in that role.

- **Gary Dickinson, FHL7, Executive Director, EHR Standards Consulting** - I have been active in HL7 since 1989, have been co-chair of the HL7 Electronic Health Records (EHR) Work Group (WG) since 2010 and was selected for the inaugural group of HL7 Fellows. Along with the other co-chairs, I facilitated development of HL7 Electronic Health Record System Functional Model (EHR-S FM, from DSTU to current R2.1) and HL7 PHR System Functional Model (PHR-S FM, from R1 to current R2). I have led and facilitated the EHR WG/Reducing Clinician Burden Project, the EHR WG/Artificial Intelligence Project (including the AI Data Lifecycle Project), the EHR WG/Data Quality Project, the EHR WG/Immunization Functional Profile Project, the EHR WG/Behavioral Health Project, the HL7 FHIR R5 Record Lifecycle Event Implementation Guide and much more. He is also active in ISO TC215 (since 1998) and the Joint Initiative Council (since 2007).

- **Michael van der Zel, BSc**, Enterprise Architect at University Medical Center Groningen, Netherlands - I work as a Clinical Informatician connecting the care, cure, quality and research domains. Creating and implementing standards in and for the continuity of care for almost 20 years.

  I am a toolsmith by heart and am the current maintainer of the EHR-S FM Publication Tooling and transition of that tooling into the HL7 FHIR IG tooling. For the different EHR-S FM projects I am the publication facilitator. The latest is the work to transition the CMHAFF to the EHR-S FM IG tooling.

  I am also an active member of HL7 Netherlands working on the adoption of the FHIR IG tooling. If re-elected, I will continue to work on the transition of the EHR-S FM Tooling to the more generic HL7 FHIR IG tooling and further supporting the different Functional Model projects, Profile projects and bring in other relevant initiatives.
- Feliciano “Pele” Yu, Jr., MD, MSHI, MSPH - I am a board-certified pediatrician and medical informaticist who has been actively involved in HL7 for over 17 years. I am one of the founders of the HL7 Child Health Work Group, established in 2003, and served as co-chair from 2008 to 2017. I have served as co-chair of the Electronic Health Records (EHR) Work Group (WG) since 2018.

During my tenure at HL7, I have co-authored the following HL7 standards:

- HL7 Functional Domain Profile for Developmental Screening R1 – US Realm
- HL7 EHR Child Health Functional Profile (CHFP), R1
- HL7 Version 3 Implementation Guide for CDA® R2 L3: Neonatal Care Reports (NCR), R1
- HL7 Implementation Guide for CDA® Release 2: Quality Reporting Document Architecture (QRDA), R1
- HL7 Pediatric Child Health IT Functional Profile (PCHIT), R1

I am running for co-chair of the EHR WG because I want to continue to advocate for healthcare standards to be relevant to child health. As Chief Medical Information Officer of Arkansas Children’s Hospital and Professor of Pediatrics and Biomedical Informatics at the University of Arkansas for Medical Sciences College of Medicine, I have practical insights into the standards needed to improve healthcare. I look forward to serving as co-chair of the EHR WG and am committed to complementing the great work coming out of the work group to best serve the interests of children’s healthcare.

Emergency Care
This group will be electing one co-chair to fill the position currently held by Laura Heermann Langford.

- Laura Heermann Langford PhD, RN, Consultant - I am seeking re-election as co-chair of the Emergency Care (EC) Work Group (WG). I have experience in nursing and emergency care informatics and a strong interest in the interoperability of systems that is very important to emergency care information systems. I am excited about the work the ECWG is doing with the Data Elements for Emergency Departments (DEEDS), the ECWG Functional Profile and the ECWG DAM. We are also interested in incorporating FHIR within the EC domain. I would be pleased to continue serving in the co-chair capacity for the ECWG and continue shepherding these projects.

FHIR Infrastructure
This group will be electing three co-chairs to fill the positions currently held by Josh Mandel, Lloyd McKenzie, and Corey Spears (Interim).

- Josh Mandel, SMART Health IT and Microsoft Research - I've worked with the FHIR community for over a decade, and FHIR is a critical part of my "day job." My team focuses on contributions that expand the capabilities and implementability of health data standards, including contributions to FHIR's core infrastructure and creation of reference implementations, libraries, tools, and educational materials. I've served on the FHIR Management Group and currently serve on the HL7 Board of Directors, and I'd be honored to continue as a FHIR co-chair.

- Lloyd McKenzie, Chief Standards Officer, Dogwood Health Consulting - I've been involved in FHIR Infrastructure since it was founded and would like to continue to be in a leadership role. At one point, I thought our workload would decline but it seems to continue to grow and it's evident that FHIR-I's role in refining guidance around use of infrastructure resources as well as providing guidance on FHIR methodology is as urgent now as it ever has been. I will continue to strive to help ensure FHIR-I discussions are welcoming, productive and efficient.

- Corey Spears, FHL7, Lantana Consulting Group - It has been my privilege and honor serving as the FHIR-I WG Interim co-chair for these short few months, over which time the WG has made great progress in resolving well over 90% of its outstanding issues. As we prepare for a normative FHIR R6 standard, the next couple of years will be critical to its development and its eventual effectiveness in assisting in the transformation of the healthcare industry and helping serve as a catalyst for improving people’s health and wellbeing. I believe it will be crucial not only to get the technical aspects right, but also to continue to improve its usability, approachability, and understandability for implementers of all kinds.
I have been an implementer of healthcare standards throughout my career (as an EHR vendor, payer, and infrastructure developer), an active member and contributor to HL7 standards development for 20+ years, a current/recent author and lead of several FHIR® Implementation Guides (IGs) including the CARIN BlueButton®, Da Vinci Formulary, Da Vinci Patient Cost Transparency, Gravity SDOH, PACIO Advance Directives, and the manager and part time developer for about 30 different Reference Implementations used by the Da Vinci Project, CARIN Alliance, Gravity, and FAST Accelerators. As such, I am well positioned to serve as a FHIR-I co-chair providing a well-rounded implementer perspective and I look forward to promoting an inclusive community and environment working towards developing clear, understandable, and implementable specifications, with a particular interest in developing specification guidance and tools to enable discoverability, reusability, and alignment of FHIR specifications and providing the tools necessary for implementers to be successful in using them.

I look forward to our continued efforts working together on this exciting journey.

Financial Management
This group will be electing four co-chairs to fill the positions currently held by Jeff Brown, Chris Cioffi, Carie Hammond (Interim), and Paul Knapp.

- Jeff Brown, HL7CE, Healthcare Standards Advisor, Lantana Consulting Group - I am re-running as Financial Management co-chair to continue support this space within HL7. I will continue to leverage my background and expertise with HL7 standards (Primarily as a FHIR Subject Matter Expert) and within the associated FHIR Accelerators, and Implementation guides being developed.

- Chris Cioffi, IT Business System Analyst Sr. Advisor, Elevance Health - I have been a member of HL7 since 2015 and a regular member of the Financial Management (FM) Work Group (WG) since 2022. I have worked in the standards development world since 2013, usually in a leadership role of co-chair or official group secretary. During my time in standards development, I’ve worked on attachments, claims, prior authorizations, and other industry initiatives. While I represent a payer point of view, I work hard to see issues from all views to find a workable consensus. I believe that if the standards that we develop are going to be used they need to work for all parties involved.

  In my work for Elevance Health, my daily responsibilities include working with public policy to shape our responses to policy proposals and to develop the requirements to implement and support these standards. My current areas of responsibility include Prior Authorization (specifically under the CMS-0057-F rule), our NSA/AEOB work, and Clinical Data Exchange.

- Carie Hammond, Senior Business Analyst – AEGIS.net, Inc., FHIR Proficient - I am a current interim co-chair for the Financial Management Work Group (FM WG) and am seeking election for a full term. I have been an HL7 voting representative on behalf of AEGIS.net since 2021. I am an active HL7 community participant and regular Connectathon and Working Group Meeting attendee for the past 5+ years, bringing my experience in development and testing to the conversation.

  I have been in the software development, implementation, and testing space for many years. These roles have included being a member of the cross-functional team that implemented the automated test cases for the Healtheway certification and acceptance program for eHealth Exchange hosted on the Developer’s Integration Lab (DIL), functional design and testing support to client EDI teams for enrollments, prior authorization, and claims, and designing and testing enhancements to provider direct claims portal, prior authorization portal, and customized enrollment feeds. I have been a lead for the FHIR API Certifications under the Drummond Group partnership with AEGIS. I am currently supporting testing under a CMS contract, specifically for the Burden Reduction (CRD, DTR, PAS) implementation guides and PDEX implementation guide testing efforts. I am also on the team that has been supporting the DaVinci and CARIN FHIR Accelerator programs for several years, authoring testcases and public test scripts for use by FHIR implementers. I bring these experiences, particularly the testing and requirements perspective for the HL7 artifacts under the purview the FM WG and wish to continue as an FM co-chair in the future.

- Paul Knapp, President, Knapp Consulting Inc. - I have had the pleasure of serving as a Financial Management (FM) Co-Chair for 11 years and seek member support to continue to serve in this position. My intention is to bring international and long-term claims standards and FHIR experience to specifically continue
the FHIR development work and to support the development and maintenance of FM artifacts across V2, and CDA/CCDA.

**Human and Social Services**
This group will be electing three co-chairs to fill the positions currently held by Courtney Baldridge, Mohammad Jafari, and Chris Shawn.

- **Mohammad Jafari, PhD, U.S. Department of Veterans Affairs** - I am a subject-matter expert in security, privacy, interoperability, and consent, and adjunct faculty at College of Health Solutions at Arizona State University. Serving initially as an interim co-chair, I have been a co-chair of the Human and Social Services (HSS) Work Group (WG) for the past 2.5 years and have been actively involved in the administration of the work group since its inception. I have been involved in projects focused on FHIR-based implementation of social services use cases around assessment and intake, consent, and referral, including the implementation of a demo at the interoperability showcase at HIMSS 2022.

- **Chris Shawn, Director, Standards and Interoperability, U.S. Department of Veterans Affairs** - I have served as a founding co-chair of the Human and Social Services (HSS) Work Group (WG) since its inception, and I look forward to continuing to support this WG focusing on non-clinically oriented social risks. I have worked for the last 18 years with VA in HIT standards and informatics, and before VA retired from the US Navy having served 20 years in a variety of capacities including on the staff of the Navy Surgeon General. In addition, I participate in several HL7 work groups and serve as a member of the US Realm Steering Committee (USRSC), the Technical Steering Committee (TSC), and the FHIR at Scale Taskforce (FAST) Accelerator. I would be honored to continue serving as HSS WG Co-Chair.

**Imaging Integration**
This group will be electing one co-chair to fill the position currently held by Brian Bialecki (Interim).

- **Brian Bialecki** - no position statement submitted

**Implementable Technology Specifications**
This group will be electing two co-chairs to fill the positions currently held by Jeff Brown and Brian Pech.

- **Jeff Brown, HL7CE, Healthcare Standards Advisor, Lantana Consulting Group** - I am re-running as an Implementable Technology Specifications (ITS) Work Group (WG) co-chair to continue support this space within HL7. I will continue to leverage my background in software engineering and technical designs, with the experience/expertise I have with HL7 standards at the lowest levels.

- **Brian Pech, MD, MBA, FHL7, Principal Technology Consultant, Health I.T. Standards & Policy, Kaiser Permanente** - I am standing for a full term as an ITS co-chair. I have been a member of the ITS work group for many years now and currently am a co-chair. I also am a member of the FHIR Management Group and the Technical Steering Committee. I believe that these combined perspectives give me a favorable perspective to consider issues that come to ITS. Thank you for your consideration.

**Infrastructure and Messaging**
This group will be electing two co-chairs to fill the positions currently held by Brian Frankl (Interim) and Isaac Vetter.

- **Brian Frankl, Senior Product Analyst, Surescripts** - I’m currently serving as interim co-chair for the Infrastructure and Messaging (InM) Work Group (WG). I have 10 years’ experience supporting the exchange of clinical information using the Surescripts HISP Direct Secure Messaging solution and 5 years’ experience actively participating in standards development with DirectTrust Direct Standard Consensus Body. I began actively participating in HL7 standards development in 2023 with a focus on FHIR Messaging and FHIR MessageHeader, which led to interest and participation in the InM WG. I appreciate the opportunity, as a co-chair for the InM WG, to lead community engagement, furthering the development of HL7 standards and use cases that benefit from a messaging workflow.

- **Isaac Vetter, Epic** - I’m an active member of HL7, including several HL7 work groups. I have over a decade of experience in health IT interoperability and integration. I lead the development of three HL7 specifications: CDS Hooks, International Patient Access, and notably FHIRcast. As the Infrastructure and Messaging Work
(InM) Group (WG) continues to shepherd the FHIRcast specification, project, and community to greater maturity and capability, I would be pleased to continue to assist in leadership of the InM WG as a co-chair.

**Learning Health Systems**

This group will be electing three co-chairs to fill the positions currently held by Michelle Currie (Interim), Laura Heermann Langford (Interim) and Russ Leftwich (not running for re-election).

- **Michelle Currie, MS, RN, CPHIMS, CPHQ** *Founder and Chief Value Realization Engineer, SavantSolutions4HIT, LLC* - With six years of patient care experience as a Labor & Delivery nurse and over twenty years as a Clinical Informaticist, I am dedicated to advancing the mission of HL7 as a co-chair of the Learning Health Systems (LHS) Work Group (WG).

  As the Founder and Principal Solution Architect for SavantSolutions4HIT, I have led numerous data quality, digital transformation, business process redesign, and data analytic projects influenced by the HL7 standards since 2015. I have helped leverage and apply these standards for CMS, the CDC, and the National Quality Forum to expand, apply, and improve the measurement-related capabilities of FHIR. My practical experience provides a unique perspective on usability and the challenges and opportunities of implementing healthcare-related standards in the real world.

  I have been an HL7 member since 2021 and have contributed to the development of HL7 standards in the CQI, CDS, and EMR/AI work groups, most recently the AI Data Lifecycle Informative Guidance document and the first AI-related standard within HL7. I volunteered to support the LHS WG on an interim basis when the opportunity presented itself. I have enjoyed facilitating and collaborating with this group as we consider the real-world considerations of integrating the separately developed but interdependent IGs that collectively support the real-world application of the clinical quality improvement lifecycle. I hope to continue working with this group to identify and establish standards supporting cross-functional collaboration and a "systems thinking" approach to Learning Health Systems.

  Thank you for considering my candidacy. I look forward to contributing to the LHS WG’s important work and collaborating to achieve our shared goals.

- **Laura Heermann Langford PhD, RN, Consultant** - I am seeking election as a co-chair of the Learning Health Systems (LHS) Work Group (WG). I have participated in HL7 in various activities for many years and have experience as co-chair at ECWG, CIC and PCWG. I have a strong interest in many of the projects sponsored by LHS, especially the Care Team DAM and the exploration of the Virtuous Cycle in Healthcare. I would be pleased to assist with the leadership of the Learning Health Systems Work Group.

**Mobile Health**

This group will be electing three co-chairs to fill the positions currently held by Nathan Botts, Gora Datta, and Frank Ploeg.

- **Nathan Botts PhD, MSIS, Westat, Center for Health IT** - In my role as co-chair of the Mobile Health Work Group, I have helped lead and collaborated on three different new standards development efforts including the Consumer Mobile Health Application Functional Framework (CMHAFF) which is currently working toward normalization, the Application Data Exchange Assessment Framework and Functional Requirements for Mobile Health (mHealth-ADE), and the Mobile Framework for Healthcare Adoption of Short-message Technologies (MFHAST). Skills brought to the co-chair position primarily come through my work as a Senior Study Director within Westat’s Healthcare Delivery, Research and Evaluation division, with over 17 years of experience in research and development of Health IT. I’ve served as Westat’s organizational HL7 representative since 2013.

- **Gora Datta, FHL7, SMIEEE, SMACM** - Chairman and CEO, CAL2CAL Corp, Engineering Faculty, University of California Berkeley. I have been an active HL7 member for the past 22 years. Besides being the founding co-chair of HL7 Mobile Health WG (MH WG), I am a current member of the HL7 TSC and the Education Advisory Council. I am also actively involved in multiple standards development organizations besides HL7, ISO/TC215 and IEEE. As a current (and founding) co-chair of Mobile Health (MH) WG, it is my honor & pleasure to resubmit my name for re-election.

  For the past 13 years, we have seen MH WG grow from an infant to a vibrant, diverse and active work group of HL7. As the mobile health industry matures and expands its horizon globally, the MH WG needs to ensure
that we continue to address the gaps in mobile health standards. Let us continue to build the mobile health standards foundation upon which the healthcare for the 21st century stands!

- **Frank Ploeg**, HL7 Netherlands, Enterprise Architect, University Medical Center Groningen (UMCG) - I’ve participated in HL7 for over 25 years. I am currently chair of the Core Team in the Netherlands and been working with the Mobile Health (MHealth) Work Group (WG) for a number of years now, the last three terms as co-chair. I have been and hopefully will continue to be a frequent participant in HL7 International WGMs.

  I seek re-election because I wish to actively continue the work I’ve been doing, especially in the cMHAFF project. I’m also a past member (the project has successfully published the technical specifications) of the CEN/ISO project 82394-2, where a technical specification is being developed, resembling the approach of the cMHAFF framework. The synergy between the two projects helps to further the mobile health work in HL7.

  Through the HL7 Foundation, I was a participant of the mHealth Hub project in Europe, a project that is aiming at operationalizing a mHealth innovation hub for integration into the national health systems in Europe. I’m convinced that mobile health application in healthcare is going to be essential for continued care.

  All these activities as well as my e- and mHealth work at the UMCG make me a qualified candidate for another term as a co-chair, and I would very much appreciate your vote of confidence for another term.

**Orchestration, Services, & Architecture**

This group will be electing one co-chair to fill the position currently held by Vincent McCauley.

- **Vincent McCauley**, MBBS, PhD - No position statement submitted

**Orders & Observations**

This group will be electing four co-chairs to fill the positions currently held by Hans Buitendijk, Jose Costa Teixeira, Ulrike Merrick, and Marti Velezis.

- **Hans Buitendijk**, MSc, FHL7, Senior Director, Interoperability Strategy, ORACLE Health - As a long-term co-chair of Orders & Observations I continue to be energized by the workgroup members and the topics at the core of HL7 standards and will be happy to continue as a co-chair to work with you in advancing our critical efforts throughout HL7 V2, CDA, and FHIR.

- **Jose Costa Teixeira**, HL7 Belgium Chair - I would like to continue serving the Orders and Observations (OO) Work Group (WG) as a co-chair. My work relates to topics like products and ordering workflows, for which I am supporting standards organizations and implementers at national level.

  I hope to support the advance of matters of supply, catalogs, inventory, workflow modeling and tracking which are very important for providers and national healthcare system managers, in both high- and low/medium-income countries. I hope to advance our core standards and guidance in articulation with other work groups, including CDS, Pharmacy, FHIR-Infrastructure, and others.

- **Riki Merrick**, FHL7, Vernetzt, LLC - I have been an HL7 member since at least 2007 and participated in the Orders and Observations (OO) Work Group (WG) since the beginning of my membership and have had the privilege of being a co-chair since 2014. I am focused mostly on lab and public health related topics, and I like to provide support for the OO WG’s many projects and hopefully continue building bridges to other organizations outside of HL7 that are working in the same area.

- **Marti Velezis**, Sonrisa Consulting - I would appreciate the opportunity to continue to serve as a co-chair of the -Orders and Observations (OO) Work Group (WG). I focus my work within OO to the healthcare products community to ensure that we have consistent support for product identification, clinical use and disposal in the healthcare and regulatory exchanges. In addition, I have worked to ensure that the OO workgroup has a way to manage the change requests/technical corrections/questions submitted by the community for our 26 FHIR Resources. I am running for re-election so that I can continue progressing this important work.

**Patient Administration**

This group will be electing two co-chairs to fill the positions currently held by Brian Postlethwaite and Line Saele.
No nominations submitted

Patient Care
This group will be electing four co-chairs to fill the positions currently held by Stephen Chu, Jay Lyle, Michelle Miller, and Michael Padula.

- **Stephen Chu, HL7 Australia** - I joined HL7 in 2002 as a New Zealand delegate and have served as a Patient Care (PC) Work Group (WG) co-chair since 2012. I appreciate the opportunity to serve as one of the PCWG co-chairs, co-leading several PCWG standards initiatives. I am a retired physician and am now a full time clinical informaticist. I strongly believe that high quality interoperable clinical data are critical to informing quality clinical decisions and achieving excellence in patient outcomes. HL7 standards, FHIR in particular, are the fundamental building blocks of digital health interoperability. PCWG has a key role in contributing to and advancing HL7 standards that are critical to enabling excellence in clinical care and patient outcomes. In addition to PCWG, I would like to continue my role as a PCWG co-chair bringing to the work group clinical and informatics perspectives.

- **Jay Lyle, FHL7, PhD**, Chief Standards Officer, JP Systems - My prior lives were in teaching, requirements engineering, and portal architecture; I have worked to advance semantic interoperability in health data since 2006, and I have served as Patient Care Co-chair since 2014. My current SDO work includes building consensus on the Care Plan DAM, demonstrating the feasibility of supporting medication reconciliation in FHIR, shepherding an effort to publish the LOINC document ontology as a SNOMED extension, mapping C-CDA to US Core, and mapping legacy Veteran health data to FHIR. I currently serve as a standards architect and SDO liaison for the Veterans Administration's Knowledge Based Systems.

- **Michelle M. Miller**, Senior Director at Optum - I am currently a co-chair of the HL7 Patient Care Work Group (PCWG) and have been nominated for re-election. My contributions within Patient Care over the past 9 years have focused on FHIR. I am one of the HL7 FHIR committers, such that I apply changes that the PCWG approves. At Optum, I am a Senior Director with broad GM responsibilities for clinical interoperability. Prior to Optum, I gained 23 years of experience working at Cerner (EHR vendor) developing, designing, innovating, and leading within our intellectual property (engineering) and product management organizations. Among my past accomplishments, I hold two critical care patents.

- **Michael A. Padula, MD, MBI, FAAP**, Medical Director of Informatics, Division of Neonatology, Children’s Hospital of Philadelphia; Professor of Clinical Pediatrics, Senior Fellow, Institute of Biomedical Informatics, University of Pennsylvania - As a neonatologist and clinical informaticist I have enjoyed my role as co-chair for the Patient Care (PC) Work Group (WG) since 2017, having previously served as a co-chair for the Child Health WG 2013-17. I greatly value the collaboration and complementary perspectives of implementers, clinicians, patients, and families that inform and optimize our evolving standards. I have enjoyed our recent progress developing guidance for referencing fetal information and our Clinicians-on-FHIR activities. I hope to continue to augment these and additional efforts for the PCWG. Beyond HL7, I have been active supporting other standards initiatives including our regional HIE (HealthShare Exchange), several initiatives supporting terminology harmonization and governance in the pediatric domain, and as a director for a master’s course on standards at the University of Pennsylvania. I would be grateful to continue work as co-chair and welcome opportunities for further collaboration.

Patient Empowerment
This group will be electing two co-chairs to fill the positions currently held by Virginia Lorenzi and Maria Moen.

- **Virginia Lorenzi**, Lead Technical Analyst, New York-Presbyterian Hospital - I have a strong interest in the Vision and Mission of the Patient Empowerment (PE) Work Group (WG) and would like to continue to serve this group to facilitate voices, guidance, standards, and specification development that empowers patients and caregivers.

- **Maria Moen**, Senior Vice President, Innovation & External Affairs, MyDirectives - I am a patient advocate, as the caregiver for my three grandchildren and my aging mother and understand the needs of the individuals that the Patient Empowerment (PE) Work Group (WG) represents. I have been in HIT for over 30 years and appreciate the role of standards and their role in making information available for data exchange and access by treating medical teams. I created an EMR company in the 90’s where I had responsibility for regulatory compliance, which offered financial, billing, and clinical features and functions to LTPAC organizations. After 8 years with this organization, I ran a consulting firm that worked with EMR vendors and technology
companies to implement functionality that supported the needs of the individual provider organizations while making good use of the existing features and functions of the chosen platform, to enable transformation from paper to digital systems.

I have a bachelor’s degree in organizational leadership with a minor in Technology Management and have been at the forefront of innovation and transformation for much of my career. I lead the ADI w/FHIR Project, within PACIO, and am at an intermediate level of FHIR-understanding. In my current position, I am called upon frequently to provide presentations, webinars and written articles about the role of HIT in moving our healthcare system to a modernized framework from which the voice of individuals can be honored. My employer, MyDirectives, fully supports my roles within HL7 and is committed to continued support of my roles.

**Payer/Provider Information Exchange**
This group will be electing two co-chairs to fill the positions currently held by Durwin Day (not running for re-election) and Christol Green.

- **Christol Green, Elevance Health** - It has been my honor to serve as co-chair of the Payer/Provider Information Exchange (PIE) Work Group (WG) and contribute to the US Realm Steering Committee as a payer representative, along with working with multiple HL7 accelerator projects. I have over 35 years of extensive healthcare experience, including implementing and integrating healthcare electronic transaction data and promoting interoperability standards. I have been actively involved in the development of HL7 standards sponsored by the PIE WG. I am committed to supporting the PIE WG and continue to work with other co-chairs and members to communicate, coordinate and collaborate with HL7 WGs and projects to increase the value chain for our payers, provider, and other healthcare entities. I would enjoy the opportunity to continue with these efforts as co-chair for the PIE WG for the next term beginning January 2025.

- **MaryKay McDaniel, Health System Specialist, Standards and Interoperability, Department of Veterans Affairs** - My work focus is to identify and promote the use of interoperability standards, or participate in developing them, to support the VA mission. The VA strives to be a contributing partner within the greater healthcare ecosystem and the work sponsored by the Payer/Provider Information Exchange (PIE) Work Group (WG) is very much in focus as a part of the VA Interoperability Pledge. I've been an active member of HL7 for many years and have served in the past as a co-chair of the Financial Management Work Group. I would very much appreciate the opportunity to join the PPIE WG as a co-chair to help continue this work.

**Pharmacy**
This group will be electing two co-chairs to fill the positions currently held by Jose Costa Teixeria and John Hatem (not running for re-election).

- **Jose Costa Teixeria** - I would like to continue serving the Pharmacy Work Group (WG) as a co-chair. I've been developing pharmacy-related systems for several years, as well as contributing to standards and national, regional and global initiatives around medication ordering and workflows, medication definition, terminologies and architecture. My vision and goals are to support and reinforce the work done by the group so far; now that our key FHIR resources are mostly mature, I would extend the outreach, seek alignment with other groups, and enhance the guidance (examples and scenarios) to support implementers in their standardization journeys.

**Public Health**
This group will be electing two co-chairs to fill the positions currently held by Ravi Kafle and Craig Newman.

- **Ravi Kafle, Senior Informatics Architect, Senior Epidemiologist, Center for Data Modernization and Informatics, Executive Office of Innovation and Technology, Washington State Department of Health** - I have been fulfilling all my duties well in the work group and have been contributing to the work related with the Public Health community at HL7 International. I am also a co-lead for the Aggregate Data Track in Helios FHIR accelerator. I have long experience of working in the Public Health domain and in Public Health Informatics. In the past years that I have been a co-chair of the work group, I have been smoothly performing the duties, facilitating the weekly calls and quarterly meeting sessions.

With my knowledge and experience, I am confident that I will be able to serve the Public Health community as per the need.
- **Craig Newman, Altarum** - I am seeking re-election to be a co-chair of the Public Health Work Group. I have been a co-chair for several years and am enthusiastic to continue to serve. The growth that we have seen in the work group over the last few years is exciting and reflects the job we have all done in learning more about interoperability and sharing that knowledge and passion with our colleagues. I hope to continue to expand the reach and impact of the work group for the next few years.

**Security**

This group will be electing three co-chairs to fill the positions currently held by John Moehrke, Chris Shawn (not running for re-election), and Patricia Williams.

- **Johnathan Coleman, BEng, CISSP, CISM, CRISC, Principal, Security Risk Solutions** - I am a dedicated healthcare security professional with over 20 years’ experience, including helping to facilitate the development and testing of a variety of security and privacy standards. I graduated from the Royal Military Academy, Sandhurst in UK and served for several years deploying secure, wireless communications systems. I am currently working as the CISO for the TEFCA RCE and support a number of standards and interoperability projects for the ONC. I served as Cochair for the CBCP WG from May 2014 – 2024 and instead of seeking re-election there, am planning to spend more time with the Security WG.

- **John Moehrke, Standards Architect, By Light Professional IT Services LLC** - As a Standards Architect, I specialize in interoperability, security, privacy, and blockchain for By Light Professional IT Services LLC, and I am primarily involved in the international standards development and the promulgation of those standards.

  I am a co-chair of the HL7 Security Work Group, a member of the FHIR Management Group, FHIR core team, and co-chair of IHE IT Infrastructure Technical and Planning Committee. I participate in DICOM, HL7, IHE, W3C, IETF, among others. I am also active in many regional initiatives such as the IHE-USA, USCDI, SMART, HEART, CommonWell, Carequality, eHealth Exchange, Sequoia Project, and WISHIN. Having been active in the Healthcare standardization arena since 1999, I have authored various standards, profiles, and white papers.

**Structured Documents**

This group will be electing three co-chairs to fill the positions currently held by Russell Ott, Khalid Shahin (Interim), and Matt Szczepankiewicz (not running for re-election).

- **Russell Ott, Specialist Leader, Health Technology, Deloitte Consulting LLP** – As a co-chair of SDWG since 2020, and the CDA representative to TSMG, I’d be happy to continue my service to the SDWG community. In addition to supporting many releases of the C-CDA standard and the associated Companion Guide, some of my most rewarding activities as a co-chair have been helping projects to understand and navigate HL7 processes. I want to help make HL7 a welcoming community that serves its implementer community and is grounded in the practical realities of production systems.

**Terminology Infrastructure**

This group will be electing three co-chairs to fill the positions currently held by Carmela Couderc, Reuben Daniels, and Caroline Macumber.

- **Carmela Couderc, Office of the National Coordinator for Health IT, US Department of Health and Human Services** - I have been an active Vocabulary/Terminology Infrastructure (TI) Work Group member for many years. I began a more formal leadership role as an interim co-chair and have been a TI Work Group co-chair since 2018. I have contributed to several TI projects including Characteristics of a Value Set Definition, Term Info, and Common Terminology Services — all of which informed FHIR terminology resource definitions and operations. I also contributed to Gender Harmony, Code System Identifier, and am the TI tracker lead. I am committed to ensuring the TI Work Group stewarded content is of high quality and provides value to implementers.

- **Reuben Daniels, FAICD CHIA, Principal Consultant, Saludax Pty Ltd** - In my present role with Saludax, I provide professional services related to strategy, interoperability, architecture, implementation and standards adoption. I also work as the Deputy FHIR Product Director with HL7 International. Previously I held a role as Lead Architect in Australia’s national program (NEHTA) in which I contributed to the adoption of CDA and FHIR in national standards and national infrastructure services including Australia’s FHIR, SNOMED CT and LOINC based National Clinical Terminology Service. In 2021 I successfully led the design and
implementation of the Queensland Clinical Terminology Service (QCTS) for the Queensland government's state health department.

I have been a member of HL7 for over 14 years and have served as a co-chair of the Terminology Infrastructure (TI) (formerly Vocabulary) Work Group (WG) since October 2018 and as a member of the HL7 Terminology Authority (HTA) since October 2019. In 2021 I was one of the individuals who successfully advocated for the creation of the HL7 Terminology Services Management Group (TSMG) and have served as a co-chair of this group since its inception. I also serve as a board director of the Australian HL7 Affiliate (HL7 Australia) and am currently a member of the Australian FHIR Coordination Committee (AFCC). I hold an HL7 Certified CDA Specialist certification and am a Founding Fellow of the Australasian Institute of Digital Health.

As a member and co-chair of the TI WG, I have contributed to:
- the development and ongoing curation of terminology related content in the FHIR core specification and the Extensions Pack including terminology resource types, operations and the FHIR Terminology Service,
- resolving FHIR tracker items,
- evaluating harmonization proposals; the Unified Terminology Governance (UTG) project.

Additionally, as of 2024 I am a co-lead of the work group's Gender Harmony project.

My vision for the work group is to meet its stated objectives and goals by focusing on supporting our internal and external stakeholder communities through ensuring that all content under the work group’s curation is well maintained and remains relevant; and fostering constructive collaboration to deliver positive outcomes which simplify adoption of terminology and facilitate better interoperability. I am seeking re-election as a co-chair to apply my experience, knowledge, and leadership skills in pursuit of this vision.

Caroline Macumber, MS, PMP, FAMIA, Executive Vice President, Services, Clinical Architecture - In my role as Executive Vice President of Services at Clinical Architecture I am responsible for assisting organizations with implementing standards and standard terminologies. Over the last 20+ years, I have worked on informatics projects across a wide spectrum, including managing distributed authoring of the VA's NDFRT, deploying authoring tools at Canada Health Infoway for the Canadian SNOMED extension, developing a process to unify value set creation across quality measures at NCQA and implementing Terminology Asset Management best practices at the Philippine Department of Health. As a current co-chair of the HL7 Terminology Infrastructure work group and Terminology Services Management Group, I have actively participated in working group meetings and either co-lead or directly contributed to Unified Terminology Governance (UTG) and the following specifications: Characteristics of a Value Set Definition, Gender Harmony, and Guidelines for a Standardized Terminology Knowledgebase. I was also honored to serve as the Affiliate Forum representative to the IHTSDO Technical Committee for two terms and currently contribute to the leadership committee of the OpenHIE community.

Considerable effort has gone into ensuring that the exchange and delivery of information is secure and well-formed to promote interoperability. However, much work is needed to ensure semantic interoperability of the content by providing clear and implementable guidance on the use of standard terminologies and value sets. If re-elected, as Terminology Infrastructure Co-Chair, I hope to leverage my knowledge and expertise to help ensure that the standards developed by HL7 utilize content in a manner geared towards implementing semantically interoperable solutions.

ELECTION PROCESS VIA ELECTION RUNNER

NOTE: YOUR SUBSCRIPTION TO THE LISTSERV MUST BE THE SAME AS THE DEFAULT EMAIL IN YOUR MEMBER RECORD.

ELECTION PROCESS
As a reminder, per the following sections of the GOM, the 2024 co-chair elections shall be conducted as follows:

08.02.08 Work Group Co-chairs

HL7 Headquarters shall provide an official Work Group co-chair ballot to those eligible members of each Work Group holding co-chair elections reflecting those individuals nominated by their peers or themselves.
Eligible voters shall be those members subscribed to the WG’s primary list server one week prior to the start of the nomination period who:

- are current individual members, or
- have a domain name reflecting the name of a current Organizational member, or
- have been validated by a current Affiliate member.

A list of those elected to co-chair Work Groups shall be provided to the Work Groups and posted during the annual Plenary meeting with newly elected WG co-chairs assuming their duties January 1 of the following year.

A copy of the GOM suitable for download and printing is available on the HL7 website at: http://www.hl7.org/permalink/?GOM

If you have any questions, please contact Linda Jenkins, Director of Membership and Administrative Services at memberinfo@hl7.org.