Health Level Seven’s Clinical Document Architecture Gains Momentum In Healthcare Industry

Clinical and professional groups, public health, RHIOs, providers and vendors adopt Clinical Document Architecture to achieve interoperability.

New Orleans, LA., USA — February 27, 2007 — Health Level Seven (HL7) today announced its Clinical Document Architecture (CDA) standard for exchange of healthcare information is becoming a pillar of interoperability for clinical care and public health within the U.S. In January 2007, the Health Information Technology Standards Panel (HITSP) accepted interoperability specifications for Electronic Health Records (EHR), Biosurveillance and Consumer Empowerment and cited HL7’s CDA in all of its use case recommendations turned over to the Secretary of Health and Human Services.

The adoption of HL7’s CDA by clinical societies demonstrates the standard is moving beyond being a government and regulatory choice for interoperability.

“We saw CDA adoption in Europe as soon as CDA Release 1.0 was published in 2000,” said CDA co-editor Liora Alschuler. “The pace of development in the U.S. is finally catching up as evidenced in a drive to create conformance profiles and implementation guides for all types of clinical information for both electronic health records and dictation/transcription. We have requests to develop CDA-based order sets, birth and death certificates and a whole host of other clinical document types. The CDA4CDT project will bring the critical mass of transcribed data together with computable EHR data for the first time, into a comprehensive and interoperable patient-centric record that can be deployed locally and exchanged nationally.”

Clinical and Professional Support for HL7 CDA

CDA for clinical documents across the healthcare continuum includes:

Continuity of Care Document (CCD) – a joint effort of HL7 and ASTM to define interoperable medical summaries. CCD is a CDA implementation of the ASTM Continuity of Care Record (CCR).
**CDA for Anesthesiology** – the Anesthetic Patient Safety Foundation identified CDA, Release 2 as the foundation for a standard for the anesthetic record. The anesthetic record fits clearly within the scope of CDA, which requires it to be human readable and contain content that can be processed automatically. The aim is to provide a CDA-compliant implementation guide that uses the International Organization for Terminology in Anesthesia (IOTA) to maximum advantage. The work is proceeding rapidly and will allow the meaningful communication and aggregation of anesthetic data from Anesthetic Information Management Systems and will result in significant improvements in patient safety and identification of best practices.

**CDA for Claims Attachments** – HL7 will recommend that the final CDA, Release 2-based specifications be adopted by HHS in the final rule for HIPAA Claims Attachments, which may be published as early as late 2007. The Attachments Special Interest Group (ASIG) is already developing new specifications, including attachments for Children's Preventive Health Services, one for prescription medication prior authorization, and one for Periodontal Services.

"CDA provides an ideal vehicle for attachments information because it can scale in complexity, presents a simple implementation target for both senders and receivers, and provides a platform to carry complex computable data where such is available," said Mike Cassidy, IT architect, Siemens Medical Solutions and co-chair, HL7 Attachments SIG.

"In previous presentations, the Mayo Clinic reported the implementation of claims attachments using CDA, Release 2 has proven beneficial to their revenue cycle, reducing payment turn-around time from their payer," said Maria Ward co-chair, HL7 Attachments SIG. WEDI (The Workgroup for Electronic Data Interchange) has formed a Claims Attachments Work Group to address the implementation issues related to these standards. The committee's first project, currently underway, is to create a national resource directory for claims attachments pilots."

**CDA for Genetic Testing Reports** – The HL7 Clinical Genomics Special Interest Group has developed static models to carry genetic and genomic data at any resolution required, from known mutations to full DNA sequences and expression levels of the tested genes. In addition, the group has explored the use of CDA to extract the essential data from those static models and create a genetic testing report using CDA. Genetic testing reports describe methods of testing done on patient DNA and interpretations of the findings associated with various levels of uncertainty in the narrative portion of CDA. Non-narrative data populates the CDA entries and describes them with codes/identifiers drawn from publicly available repositories such as dbSNP.

-more-
**Dental Reports** - CDA standards are in development to convey information specified in ANSI-approved American Dental Association (ADA) Standard 1047 for Standard Content of an Electronic Periodontal Attachment. HL7 anticipates creation of additional dental claims attachments using CDA for other dental topics per our Memo of Understanding with the ADA.

**CDA for Common Document Types** - While much of the attention has focused on CDA for medical summaries and highly coded, specialized document types, the Association for Healthcare Documentation Integrity (AHDI, formerly the American Association for Medical Transcription) along with American Health Information Management Association (AHIMA) and M*Modal have launched a joint effort to establish national consensus on CDA for Common Document Types (CDA4CDT). Launched on February 6, 2007, this rapid development effort is enlisting support from transcription vendors (six have already signed on as Benefactors) and EMR vendors to ensure interoperability of dictated electronic documents within the electronic health record.

“CDA provides the common framework for managing information in electronic documents and electronic medical records,” said Michael Finke, Chairman/CEO M*Modal. “The CDA4CDT project will provide a clear path for integration leading to truly comprehensive patient-centric records gathered from the full spectrum of healthcare providers, regardless of their origin.”

**Public Health** - In public health, the North American Association of Central Cancer Registries (NAACCR), the consensus standards organization for cancer incidence reporting, is developing a CDA-based format for cancer abstracts.

“We looked at several alternatives for our next generation abstracts and CDA was the best fit with our requirements,” said Holly L. Howe, PhD, NAACCR Executive Director. “We look to CDA to expand the range of clinical data we can collect while providing a stable platform for our data collection.”

In addition to the NAACCR cancer abstract project, the Centers for Disease Control and Prevention (CDC) is developing a CDA-based report for healthcare-associated infectious disease reporting that will be balloted as an HL7 Implementation Guide for CDA.

**CDA for Imaging reports** - The Imaging Integration Special Interest Group (SIG) / DICOM WG20 is working on the Implementation Guide for CDA Release 2 "Diagnostic Imaging Reports" that specifies the mapping of constrained DICOM Structured Reporting "Basic Diagnostic Imaging Reports" to the CDA. The implementation guide will include instructions on the intended use of CDA artifacts and their mapping to DICOM Structured Reporting.

-more-
CDA for Long-Term Care – HL7 Community-Based Health Special Interest Group, Center for Aging Services Technologies and the AHIMA are collaborating on a working group that is developing implementation recommendations for the Continuity of Care Document (CCD) in the long-term care and aging services market. Aging services has particular interest in functional status, and the workgroup has been focusing on how to incorporate prevalent functional status assessments into the CCD. Integrating the Healthcare Enterprise (IHE) is supporting an assessment profile based on the CCD in its 2007 scope of work. Finally, the federal government’s Consolidated Health Informatics (CHI) Committee on aging and disability has recently recommended the use of CDA to communicate functional status and regulatory assessments. Although none of these initiatives are yet in production, they represent growing consensus in the aging services market around the utility of CDA and, in particular, the CCD for aging services healthcare communication.

Vendor Implementation: EMR and Dictation/Transcription – Awareness of the clinical acceptance, the growing profile for public health and the government positioning of CDA as a primary vehicle for all types of information, CDA compliance is becoming a top priority for EMR and transcription vendors.

Provider Adoption of CDA
Leading academic medical centers that have worked with and built infrastructure around CDA include Columbia University Medical Center and University of Pittsburgh Medical Center (UPMC).

The Military Health System (MHS) is developing a pilot implementation of a document management component for AHLTA, the MHS EMR. The fully CDA-compliant Documents, Files, Images Enhanced AHLTA will create one of the world’s largest management systems for clinical documents and will complete and complement the structured data already managed in AHLTA. DFIEA will provide a common document format and platform to manage information exchange with the Veteran’s Administration and our civilian contract providers.

-more-
About HL7

Founded in 1987, Health Level Seven, Inc. (www.HL7.org) is a not-for-profit, ANSI-accredited standards developing organization dedicated to providing a comprehensive framework and related standards for the exchange, integration, sharing, and retrieval of electronic health information that supports clinical practice and the management, delivery and evaluation of health services. HL7’s more than 2,400 members represent approximately 500 corporate members, including 90 percent of the information systems vendors serving healthcare.

HL7’s endeavors are sponsored, in part, by the support of its benefactors: Accenture; Booz Allen Hamilton, Boston Scientific Corporation, Centers for Disease Control and Prevention; Duke Clinical Research Institute (DCRI); Eclipsys Corporation; Eli Lilly & Company; Epic Systems Corporation; the Food and Drug Administration; GE Healthcare Information Technologies; GlaxoSmithKline; IBM; Intel Corporation; InterSystems Corporation; Kaiser Permanente; McKesson Provider Technologies; Microsoft Corporation; Misys Healthcare Systems; NHS Connecting for Health; NICTIZ National Healthcare; Novartis; Oracle Corporation; Partners HealthCare System, Inc.; Pfizer, Inc.; Philips Medical Systems; QuadraMed Corporation; Quest Diagnostics Inc.; Science Applications International Corporation; Siemens Medical Solutions Health Services; Solucient, LLC.; St. Jude Medical; the U.S. Department of Defense, Military Health System; the U.S. Department of Veterans Affairs; and Wyeth Pharmaceuticals.

Numerous HL7 Affiliates have been established around the globe including Argentina, Australia, Brazil, Canada, China, Croatia, Czech Republic, Denmark, Finland, France, Germany, Greece, India, Ireland, Italy, Japan, Korea, Mexico, The Netherlands, New Zealand, Spain, Sweden, Switzerland, Taiwan, Turkey, United Kingdom, and Uruguay.

###