SDWG - 20140626

Austin Kreisler

Brett M.

Wendy Scharber

Andy S

Benjamin Flessner

Brian Reinhold

Brett M

Brian Scheller

Bryn Rhodes

Craig Gabron

Gay Dolin

George Cole

Lisa Nelson

Martin Rosner

Nelima Chenamaraja

Rita Altamore

Robert Deiterle

Vinyaki Kulkarni

Becky Angeles

Wendy Blumenthal

Hector Cintron

David Tao

Anne Smith

Keith Boone

Mark Roche

Rob Hausam

Stivaly Gomez

Agenda

 Call to order

 Business Updates (10 min)

 Additions/modifications to the agenda

 HL7

 RIM (AKreisler)

 Steering Division / TSC (AKreisler)

 Vocab (RHausam)

 Pub facilitator (PGilbert)

 Tooling liaison (Andy S.)

 Patient Care (LNelson)

 CDA Example Task Force

 S&I Framework Initiative Updates

 Longitudinal Coordination of Care (LCC)

 Electronic Submission of Medical Documentation (eSMD)

 Clinical Quality Framework (CQF)

 Other S&I initiative updates

 Project Updates

 CDA R2.1

 CDA on FHIR

 C-CDA on FHIR

 PHMR

 Cancer Reporting CDA IG - deceased indicator & Announcement

 C-CDA R1.1 DSTU Comments (block vote posted on 7/4)

 Open C-CDA R2.0 issues.

 Complete document template name discussion

 Adjournment

**Minutes**

* Harmonization next week. Muiltiple proposals including the UDi harmonization prioposal. Austin will represent the work group.
* No vocab updates
* No Patient Care updates
* Example task force. Wrapped up the current work last week. Suggestion to consider holding a couple calls in August. Lots of good samples that were approved. Still working to get approval for the medication examples with Pharmacy work group.
* Join publishing call tomorrow where there will be a discussion on the Trifolia update regarding the Template ID changes.
* Template ID testing - Keith's testing of the conversion is still underway. So far he hasn't identified any new issues. Keith plans on wrapping up his review by this evening.
* S&I Updates
	+ LCC - next pilots will be in a couple of weeks and will include a demo. Becky Angeles.
	+ eSMD - Down to last 38 comments left to finish. Hope to have it wrapped up sometime next week. Bob D.
	+ CQI - passed S&I consensus process. On course to ballot in the September cycle. Bryn Rhodes.
* Project Updates
	+ CDA R2.1 - hasn't meet the past few weeks
	+ CDA on FHIR - Continues to go through the CDA header mapping to the Composition Resource. Making good progress. Service event and order are up for review next week. Close to having the header done.
	+ C-CDA on FHIR - Lining up the co-sponsors for the C-CDA on FHIR PSS. Meeting with OO this afternoon. OO has the lion’s share of the profile work and they are hesitant to sign up to do the work.
* Complete document template name discussion - Bob D.
	+ Proposed new name: Additional Document Templates - A1
	+ Rick proposes Additional Templates - A1
	+ Austin proposes spelling out Attachments
	+ Proposal to adopt: Additional C-CDA R2 Templates - Attachments Set 1
	+ motion to approve this name - Bob D. Rick G. opposed - 0, abstain - 3 infavor - 24
* Cancer reporting providing a review session next week to go over the Cancer Reporting IG. Hector.
	+ Where to document the patients deceased indicator along with date of death. Cancer Reporting team thinks it belongs in the header.
	+ Discussion is leading to using an extended version of the Health Status Observation to capture the deceased Ind and date of death.
	+ We still don't have concensus on how to do this. Deceased observation is in use in multiple guides. Changing deceased observation may not be good idea.
	+ Continue the discussion next week.
	+ --Option 1.
	+ ---If we update Deceased Observation so it conforms to Health Status the following needs to happen:
	+ ----Remove ASSERTION pattern
	+ ----Code would now be fixed to "11323-3" Health status
	+ ----Remove Deceased value from 2.16.840.1.113883.1.11.20.12
	+ ---->>Discuss how to clarify Death Observation template
	+ --Option 2.
	+ ---Constrain Health Status Observation to Deceased.
	+ --Option 3.
	+ ---Extension in the header.
	+ --Option 4.
	+ ----Options 3 + 2
* C-CDA R1.1 DSTU Comments (block vote posted on 7/4)
	+ No comments pulled from the block vote
	+ motion to approve; Austin K., Gaye D. opposed - 0, abstain - 1 in favor - 22
* C-CDA R1.1 DSTU comment ID 516
	+ --CQI wants to add the id element to all entries. For CDA R1.1 and R2, this would have to be a non-normative text addition stating thaat all entries are allowed to include one or more unique identifiers in the id element. No conformance statments would be added. For a future release we would consider adding an id element in each entry and consider guidnace on ids across document instances. Does not fully align with CQI's approach to resolving the problem (id 347).
	+ --Persuasive with Mod - motion to approve - Diana B. Gay D. opposed - 0, abstain - 1 in favor - 23
* C-CDA R2 issues - Language communication binding. C-CDA R2 finds to a MU value set but that value set breaks the underlying CDA R2 standard.
	+ options
	+ -update constraint to should
	+ -remove value set binding entirely
	+ -update value set binding to match CDA R2
	+ --Rich suggests removing the value set binding entirely, reverting back to the base standard. Also add a note to call out the fact that the language binding is at the RIM and CDA hands are tied, we can't adopt a different value set.
	+ -->Update Value Set Binding to match CDA R2. Add note about MU2 recommendation that it contradicts with base standard<--
	+ --Relevant conformance statement:
	+ ---1. This patient SHALL contain at least one [1..\*] languageCommunication (CONF:1098-5406).
	+ ---a. Such languageCommunications SHALL contain exactly one [1..1] languageCode, which SHALL be selected from ValueSet PatientLanguage TempPatientLanguageOID DYNAMIC (CONF:1098-5407).
	+ Motion to approve - Rick/Austin - opposed - 0 abstain - 2 infavor 21.