

# Health Level Seven International

Unlocking the Power of Health Information

# 27<sup>TH</sup> ANNUAL PLENARY &C WORKING GROUP MEETING

# HYATT REGENCY CAMBRIDGE

CAMBRIDGE, MA · SEPTEMBER 22-27, 2013



# **REGISTER TODAY!**

Early Bird Registration & Hotel Cutoff—August 30, 2013 Online Registration Cutoff—September 6, 2013



Look inside for this icon to discover the latest initiatives from HL7 International, such as:

- Meaningful Use Stage 2 Tutorials
- FHIR\*
- Consolidated CDA®
- Clinical Quality
- Mobile Health Activities



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# THANK YOU TO OUR SPONSORS

SATURDAY FHIR CONNECTATHON CONTINENTAL BREAKFAST

# **EASTERN INFORMATICS**

Healthcare Information Technology Systems and Management Consulting

SATURDAY FHIR CONNECTATHON LUNCHEON



LANYARDS

\* INTERFACEWARE
HL7 integration made easy

TUESDAY PM COOKIE BREAK



WEDNESDAY PM COOKIE BREAK



MNM FACILITATOR'S ROUNDTABLE DINNER



LODGING ROOM KEYS



# LETTER FROM THE CHAIR

Greetings and thanks to all of you who are able to come to Cambridge for the 27th Annual Plenary & Working Group Meeting (WGM). It is fitting that we our holding our Plenary Meeting here in the Boston area. The bombings at the Boston Marathon, while heartbreaking and unfortunate for its victims, their families, and the residents of Boston, is a grim reminder that HL7 has much work to do to develop



and advance standards that can be extremely useful when tragic events such as this occur. However, as I'm sure the local residents will be quick to remind us, Boston will not be defined by this single event. Boston is much more known for its excellence in healthcare, health informatics, academics, software development, and innovation, all of which we can draw from while in Boston. And after our hard day's work, there is the fun we can have together, whether it's seeing the historic sites, relaxing in Cape Cod or Martha's Vineyard, or attending a sporting event.

### THANK YOU FOR YOUR HARD WORK AND DEDICATION

It's hard to believe that this is my last WGM as chair of HL7. How quickly two years have gone by! I am truly honored to have served as chair of HL7 these last two years, and will continue to work hard in 2014 as the Vice Chair. I want to thank all of you for the hard work and dedication you've shown for all the years you've been a member of HL7, but particularly for the past two years during my term as chair.

# We've Accomplished a Lot Together

In January 2012, I listed relevance, change, growth, and unity as our top priorities and principles. Through your energy, enthusiasm, hard work, and dedication, a lot has been accomplished in these areas in the last two years. Mobile health and usability initiatives were launched, increasing both our standards portfolio beyond interoperability and, because of the need for standards in these areas, our relevance to the industry. More importantly, we have made our licensed standards and selected intellectual property (IP) available at no cost to the entire healthcare industry in every realm. That move has increased our relevance to the industry immensely.

Making our standards and selected IP freely available has caused us to accelerate a much needed organizational transformation—one that can accommodate relevance, change, growth and unity. Our recently established Membership Committee is working hard to design a value-driven membership model. Individuals who have never had leadership positions on the board, work groups, or committees now do so, setting an excellent foundation for a succession plan in the ranks of our leadership.

Organizational transformation is never smooth. Indeed, we have had our share of difficulties as we've gone through the beginning of our transformation. But we're on the right track. I want to thank all of you once again for your patience, understanding, and commitment, as well as all your valuable comments and insights about how we can transform as an organization.

Squeed J. Mon. PhD

Chair of the Board, 2012-2013, Health Level Seven® International

# HL7's 27th Annual Plenary Meeting\*

Theme: Care Coordination and HL7's Role

8:00 - 8:10 am

# **Welcoming Comments**

Don Mon, PhD, Chair, HL7 International Board of Directors

8:10 - 8:40 am

**KEYNOTE SESSION 1:** 

# The Next Generation of Interoperability

The session will describe the efforts in progress at the international, national, and state level to enhance care coordination and care management with novel standards approaches.

John Halamka, MD, Chair of the ONC Standards Chief Information Officer, Beth Israel Deaconess Medical Center; Chief Information Officer and Dean for Technology, Harvard Medical School; Chair of the ONC Standards Committee

8:40 - 10:15 am

# Panel Discussion: Providers from around the Globe Facing Tragedies and Coordination of Care and the Role HL7 played (or Could Play) and the Gaps that Surfaced

Moderated by:

Bob Dolin, MD, Chair-Elect, HL7 International Board of Directors

8:45 - 8:50 am

Introductions of topic and panelists by Moderator

8:50 - 10:00 am

PANELIST PRESENTATIONS

# **Insights and Lessons Learned from the 2011 Tohoku Earthquake and Tsunami Tragedy**

*Michio Kimura*, *MD*, *PhD*, Chair of HL7 Japan; Medical Informatics, Hamamatsu University School of Medicine

# Lessons Learned from the Earthquake in Christchurch, New Zealand

David Hay, MD, Chair, HL7 New Zealand; Product Strategist, Orion Healthcare

# Post-Acute Care: Building Upon a Foundation and Current Synergy at CMS: Thinking Forward

Stella Mandl, RN, BSN, BSW, PHN, Technical Advisor, Division of Chronic and Post-Acute Care at the Centrs for Medicare and Medicaid

# Consumer Priorities for Health and Care Planning in an Electronic Environment

*Erin Mackay*, Associate Director, Health IT Programs, National Partnership for Women & Families

10:00 – 10:15 am Questions and answers for panelists

10:15 – 10:45 am

Break

10:45 - 11:15 pm

**KEYNOTE SESSION 2:** 

# Importance of Interoperability and Workflow of Information Exchange for Transitions of Care, Planned and Unplanned

Establishing workflow that assures exchange of an individual's health information to the next setting of care is critical and HL7 Consolidated CDA® documents play an enabling role in these transitions to improve patient safety and assure optimal outcomes.

*Terry O'Malley, MD*, Director, Non-Acute Care Services, Partners HealthCare System, Inc.

11:15 – 11:45 am

**KEYNOTE SESSION 3:** 

# **Lessons Learned from the Boston Marathon**

The presentation will focus on the overall healthcare communities' response to the Boston Marathon Bombing and what role IT played in the response to the tragedy.

*Jim Noga*, Chief Information Officer, Partners HealthCare System, Inc.

11:45 - 12:15 pm

**KEYNOTE SESSION 4:** 

# **Evidence-Based Standards Development for Care Coordinators**

This presentation will cover the findings of the IMPACT study which compared the HL7 Consolidated CDA (C-CDA) templates to the actual data requirements for care transitions and found significant gaps.

*Larry Garber, MD*, Principal Investigator, IMPACT; Medical Director for Informatics, Reliant Medical Group

12:15 - 12:30 pm

# **Closing Comments**

Charles Jaffe, MD, PhD, CEO, Health Level Seven International

\*Plenary program agenda is subject to change. For the full session descriptions, please visit www.HL7.org

# Fourth FHIR Connectathon

Saturday, September 21, 9:00 am – 5:00 pm Sunday, September 22, 9:00 am – 12:30 pm

Member/Non-member Fee: \$50

A Fast Healthcare Interoperability Resources (FHIR) Connectathon is an opportunity for implementers to participate in developing FHIR solutions and exchange data with other FHIR interfaces. The Connectathon is not a formal tutorial. There will be no lectures or presentations. Instead, you'll participate in 1.5 days of hands-on, heads down development and testing, working directly with other FHIR developers as well as senior members of the FHIR standards development team. The Connectathon is a chance to get your hands dirty and learn by doing as well as to help evolve the FHIR specification – all issues identified during the Connectathon are treated as ballot feedback on the FHIR specification.

Participants in the Connectathon will choose one of two tracks. Participants will be asked to confirm which track they wish to follow a few days in advance of the Connectathon (primarily based on their level of readiness). Details on the scenarios for both tracks as well as information on pre-Connectathon discussion forums can be found on the Connectathon website here: http://wiki.hl7.org/index.php?title=FHIR\_Connectathon\_4.

# TRACK 1: FHIR Client in a Day

# Objective:

Demonstrate connectivity between your freshlywritten FHIR client and various Connectation servers after only a day of development effort. This will give participants a good sense of how FHIR works in practice.

### **PREREQUISITES**

# **Mandatory:**

Have a laptop with a functioning development environment (and knowledge of how to use it).

# **Optional:**

Review the FHIR specification and Track 1 scenarios and possibly work with some coding.

# **TRACK 2: FHIR Interoperability Scenario**

# **Objective:**

Demonstrate interoperability and clinical utility by participating in scripted exchanges between your client or server application and other participating systems. These exchanges will exercise various aspects of the FHIR specification including security with a focus on practical solving of real-world clinical exchange needs.

# **PREREQUISITES**

# **Mandatory:**

Complete development and initial testing of your system, covering the minimum and desired optional feature set defined by the Connectathon scenarios and be prepared to test against other participating systems.

# **Optional:**

Test your system against at least one of the publicly available FHIR test servers.

HL7 International working group meetings (WGMs) are held three times per year at varying locations. These WGMs serve two important purposes:

- They give the HL7 International work groups a chance to meet face-to-face to work on the standards as well as the opportunity to network with industry leaders from around the world.
- They provide an invaluable educational resource for the healthcare IT community.

# Standards Development

More than 40 HL7 work groups are dedicated to specialized areas of interest such as Orders and Observations and Electronic Health Records. These work groups are directly responsible for the content of the standards and spend much of their time at the working group meetings hard at work on standards development. Attending a work group meeting can be a great way to keep up-to-date on what is happening in a particular area, and everyone attending an HL7 working group meeting is invited to attend any of the work group meetings.

Please see pages 20-23 for a complete schedule of meeting times throughout the week.

# **Educational Sessions**

Numerous educational opportunities will be offered at this WGM. Sessions will cover a full range of HL7-specific topics such as Version 2.x Implementation, Version 3, and the Clinical Document Architecture (CDA\*), Fast Healthcare Interoperability Standards (FHIR\*), among others. Educational sessions also include industry topics such as Meaningful Use in the US, Electronic Health Records, and Vocabulary Terminology. For a full listing of course descriptions, please see pages 7-15.

HL7 has organized its courses into five tracks to make it easier to choose the educational offerings that are right for you:

# Track 1 – Version 2 Core

HL7 Version 2 is the world's most successful healthcare interoperability standard. Originally developed in the late 1980s, it has been continually enhanced over time. The introductory tutorials familiarize students with the Version 2 messaging standard and its core domain areas, while the implementation classes provide the "how to" basics of implementation. The track also includes courses that cover conformance and profiles and XML for Version 2.

# Track 2 - Version 3 CDA® Core

HL7 Version 3 is HL7's new flagship standard, adopted by major healthcare organizations, such as the NHS in England. This track is designed to give the attendee a thorough introduction to the Version 3 family of standards. It covers Version 3 fundamentals, the Reference Information Model (RIM), messaging, documents (Clinical Document Architecture), messaging infrastructure (wrappers, transport), and the XML Implementation Technology Specification (ITS). It concludes with classes that address strategies for implementation.

# Track 3 – HL7 Special Topics

The Special Topics track offers a variety of electives that describe important HL7 standards that may not fall into either the Version 2 or Version 3 family. These include HL7 standards for Electronic Health Records (EHR), security and TermInfo. The Special Topics track also offers advanced or specialized classes in Version 2 or Version 3 subjects that are not considered part of the basic core offerings. Examples include classes in Version 2 and Version 3 tooling, and domain classes such as Clinical Genomics.

# Track 4 – Meaningful Use

This track provides tutorials on the HL7 standards selected for meaningful use. It provides overviews of the selected standards, and strategies to assist implementers in conforming to the selected standards. Included in this track are tutorials on the HL7 Consolidated CDA Specification, Laboratory Reporting Interface, and Immunizations, as well as a free session providing an overview of standards selected for meaningful use.

# Track 5 – Information Forums \*FREE\*

This track provides tutorials designed to support new member involvement, and help existing members become more effective in their participation in the HL7 standards development process. Tutorials included in this track are first timers' orientation, introduction to HL7 organization and process, the HL7 development framework, and cochair training.

These tracks are only suggested course groupings. Feel free to choose whatever courses you feel are right for you from among the five tracks.

	Saturday Se	eptember 21 —————		1:45 – 5:00pm	Immunization Messaging Using HL7 Version 2.5.1
	9:00 – 5:00pm	TSC Meeting		3:00 – 3:30pm	Afternoon Break
0	9:00 – 5:00pm	FHIR® Connectathon		6:00 – 8:00pm	Open Space Meetings – Self Organized
	•				
	Sunday, Sep	tember 22 ———————		Wednesday,	September 25 ————
	8:30 – 5:00pm	REGISTRATION		7:00 – 8:00am	How to Design and Deliver an HL7 Tutorial – FREE TUTORIAL
	9:00 - 12:30pm	FHIR Connectathon		7:00 – 8:00am	Physicians Breakfast/Meeting
	9:00 - 3:00pm	HL7 International Council Meeting		7:30 – 8:30am	Continental Breakfast
	9:00 – 5:00pm	Architectural review Board (ArB) Meeting		7:30 – 5:00pm	REGISTRATION
	3:30 - 5:00pm	Activities with Other SDOs		8:00 – 8:45am	General Session – HL7 Annual Business Meeting, Awards
	3:30 - 5:00pm	International Mentoring Committee			Presentations, Announcements
	4:00 – 5:00pm	First-Time Attendees' Orientation – FREE TUTORIAL		9:00 – 12:30pm	Version 2 Message Profiles and Conformance
	5:00 – 6:00pm	Organization and Process Orientation/Introduction –	_	9:00 – 12:30pm	Introduction to Clinical Document Architecture
		FREE TUTORIAL	U	9:00 – 12:30pm	Introduction to Integrating the Healthcare Enterprise
	5:00 – 6:00pm	How to Design and Deliver an HL7 Tutorial – FREE TUTORIA	٩L	9:00 – 5:00pm	Working Group Meetings
	5:15 – 6:30 pm	TSC Meeting		10:30 – 11:00am	Morning Break
				12:30 – 1:30pm	TSC Luncheon/Meeting
	Monday, Sep	otember 23 ————————		1:45 – 3:00pm	Product Line Architecture Program
	7:00 – 8:00am	First-Time Attendees' Orientation – FREE TUTORIAL		1:45 – 5:00pm	Version 2.7 Control Specialist Certification Test Preparation
	7:00 – 5:00pm	REGISTRATION		1:45 – 5:00pm	Version 3 XML ITS for CDA
	7:30 – 8:30am	Continental Breakfast		1:45 – 5:00pm	Clinical Document Architecture — Advanced
	8:00 – 12:30pm	Plenary Meeting		3:00 – 3:30pm	Afternoon Break
	10:15 – 10:45am	Morning Break		3:30 – 5:00pm	SAIF Architecture Program
	12:30 – 1:30pm	Education Facilitators' Roundtable Luncheon/Meeting		5:15 – 7:00pm	Networking Reception
	12:30 – 1:30pm	Lunch – First-Time Attendees' Q & A reserved tables			
	12:30 – 1:30pm	Lunch – Co-Chair reserved tables		Thursday, Se	eptember 26 —————————
	1:45 – 5:00pm	Working Group Meetings		7:00 – 7:45am	Newly Elected Co-Chair Training – FREE TUTORIAL
	1:45 – 5:00pm	Introduction to HL7 FHIR		7:30 - 8:30am	Continental Breakfast
<b>W</b>	1:45 – 5:00pm	Standards for Interoperability		7:30 - 5:00pm	REGISTRATION
0	1:45 – 5:00pm	Quality Reporting Document Architecture		8:00 - 8:45am	General Session – Announcements
Ö	1:45 – 5:00pm	Health Professionals: Get Engaged with HL7 Standards		9:00 - 12:30pm	CDA® Specialist Certification Test Preparation
•	1.10 0.00piii	Development and Implementation Ambassador Program	0	9:00 - 12:30pm	Consolidated CDA
	3:00 – 3:30pm	Afternoon Break		9:00 - 12:30pm	Electronic Health Record System Functional Model
	5:15 – 7:00pm	Co-Chairs Dinner/Meeting (Must register)		9:00 - 5:00pm	Working Group Meetings
	6:00 – 8:00pm	Open Space Meetings – Self Organized		10:30 - 11:00am	Morning Break
	7:00 – 8:30pm	Domain Experts Steering Division		12:30 - 5:00pm	Affiliate Chair or Designated Rep Luncheon/Meeting
	7:00 – 8:30pm	Foundation & Technology Steering Division			(Must register)
	7:00 – 8:30pm	Structure & Semantic Design Steering Division		1:45 – 5:00pm	TermInfo – Using Standard Terminologies with HL7
	7:00 – 8:30pm	Technical & Support Services Steering Division			Information Models
	·		0		HL7 Standards for Meaningful Use
	Tuesday, Sep	otember 24		3:00 – 3:30pm	Afternoon Break
	7:00 – 8:00am	GS1 Education Session – Fundamentals and latest updates		5:30 – 7:30pm	HL7 Version 2.7 Control Specialist Certification Test
	7.00 0.000	regarding product identification (Identification management,		5:30 – 7:30pm	HL7 CDA Specialist Certification Test
		UDI, serialization, etc.)		5:30 – 7:30pm	HL7 Version 3 RIM Certification Test
	7:00 - 8:00am	Nurses Breakfast/Meeting		5:30 – 8:00pm	Modeling & Methodology (MnM) Facilitators' Roundtable
	7:00 - 5:00pm	REGISTRATION			
	7:30 - 8:30am	Continental Breakfast		Friday, Sept	ember 27 ———————————————————————————————————
	8:00 - 8:45am	General Session – HL7 CEO, CTO, International Council		8:00 - 8:45am	No General Session
		and TSC Reports, Announcements		8:00 - 9:00am	Continental Breakfast
	9:00 – 12:30pm	Introduction to Version 2, Part 1:		8:00 – 1:00pm	Staff will be on hand for questions and assistance
	0.00 40.00	Control/Patient Administration		9:00 – 5:00pm	Working Group Meetings
^	9:00 – 12:30pm	Introduction to Version 3, Part 1: Foundations		10:30 – 11:00am	Morning Break
O	9:00 – 12:30pm	FHIR for Software Developers		12:30 – 1:30pm	Box Lunch
	9:00 – 5:00pm	Board of Directors' Meeting			
	9:00 – 5:00pm	Working Group Meetings			appear in bold
	10:30 – 11:00am	Morning Break			liance with our status as an ANSI-accredited
	12:30 – 1:30pm	Lunch – First-Time Attendees' Q & A reserved tables		standards deve	eloping organization, HL7 meetings are open.
	12:30 – 1:30pm	Lunch – Co-Chair reserved tables			
	1:45 – 5:00pm 1:45 – 5:00pm	Introduction to Version 2, Part 2: Orders and Observation	S		
	1'//" _ "'IIIInm	INTRODUCTION TO VERSION & Part / Messaging			

1:45 - 5:00pm

Introduction to Version 3, Part 2: Messaging

# TRACK 1—VERSION 2 CORE

# T4 – Introduction to Version 2, Part 1: Control/Patient Administration Tuesday, September 24 / 9:00 am – 12:30 pm

This tutorial introduces students to HL7 and the basic concepts of Version 2. It discusses the structure of the standard and covers two of the standard's fundamental chapters: Control and Patient Administration.

#### This Tutorial Will Benefit:

Those new to HL7

# Faculty:

Hans Buitendijk, FHL7: Co-Chair, HL7 Clinical Statement Work Group; Co-Chair, HL7 Orders and Observations Work Group; HS Standards & Regulations Manager, Siemens Healthcare

# T7 – Introduction to Version 2, Part 2: Orders and Observations Tuesday, September 24 / 1:45 pm – 5:00 pm

This tutorial provides students with an overview of the Version 2 Orders and Observations messages and major concepts and provides a sampling of the type of information that can be communicated using these messages.

### This Tutorial Will Benefit:

• Those new to HL7 with a need to become familiar with Version 2 messages

# Upon Completion of This Tutorial, Students Will Know:

- Basic order and observation message structures
- Sample messages
- How to start to interpret the Version 2 orders and observation standards

#### Faculty.

Mike Henderson, FHL7: Eastern Informatics

# W10 – Version 2 Message Profiles and Conformance Wednesday, September 25 / 9:00 am – 12:30 pm

This course is designed to explore the concept of conformance within HL7 Version 2 as described in Chapter 2 of Version 2.7. Additionally, this tutorial will demonstrate how we can apply message profiling to interoperability by improving clarity, simplifying implementations and streamlining testing. Participants will be introduced to tools that facilitate analysis and interoperability while, at the same time, fully documenting HL7 conformance.

#### This Tutorial Will Benefit:

• Anyone interested in HL7 interoperability

# Upon Completion of This Tutorial, Students Will Know:

- How to measure conformance using messaging profiling
- How vendors can document their applications' implementations
- How providers can improve their RFP results by using message profiling
- How to use message profiles developed for specific domains
- The tools available to facilitate HL7 Version 2.x conformance efforts (Messaging Workbench and the Global Profile Library)
- More about HL7 conformance certification
- How to develop HL7 conformance documentation for Version 2

#### Prerequisites:

• Working knowledge of HL7 or other EDI standards (ASTM, X12)

#### Faculty:

*Ted Klein, MS, FHL7:* Co-Chair, HL7 Vocabulary Work Group; Klein Consulting Inc

# W13 – Version 2.7 Control Specialist Certification Test Preparation

Wednesday, September 25 / 1:45 pm - 5:00 pm

This tutorial reviews the message definition and processing rules and data type definitions of the Control chapters of the HL7 Version 2.7 standard. Upon completion of this tutorial, students will be better prepared to take the HL7 Version 2.7 Control Specialist Certification Test.



# **HL7 MEETINGS ARE GREEN!**

# Bring your laptop to your tutorials!

To reduce HL7's carbon footprint, its meetings are largely paperless. HL7 does not provide printed tutorial materials on-site. All materials will be distributed electronically to tutorial participants to either print out themselves or load to their laptops. It is important that you bring your laptop to this meeting for all tutorials. Free WiFi internet access will also be provided.

# **TUTORIALS**

Note: Students are also expected to prepare for the test by previous study of Chapter 2 (Control), Chapter 2A (Data Types), and Chapter 2B (Conformance) of the HL7 Version 2.7 standard.

#### This Tutorial Will Benefit:

- Anyone preparing for the HL7 Control Specialist Certification Test
- Interface analyst specialists and managers who need to understand the technical aspects of HL7 interfaces

### Faculty:

Patrick Loyd: Co-Chair, Technical and Support Services Steering Division-HL7 Technical Steering Committee; Co-Chair, HL7 Clinical Statement Work Group; Co-Chair, HL7 Education Work Group; Co-Chair, HL7 Infrastructure and Messaging Work Group; Co-Chair, HL7 Orders and Observations Work Group; Sole Proprietor, ICode Solutions

# TH21 – HL7 Version 2.7 Control Specialist Certification Test Thursday, September 26 / 5:30 pm – 7:30 pm

Health Level Seven International is pleased to offer certification testing on HL7 Version 2.7, Chapter 2: Control. Certification testing is offered to those industry participants who are expected to have a working knowledge of the HL7 Messaging Standard. Interface analysts, healthcare systems analysts, medical software programmers, and medical informatics faculty and students are all potential candidates. The knowledge required to pass the test can be obtained by participation in the HL7 working group meetings, by attending HL7 education sessions, by field work dealing with HL7 interfaces, or simply by self-study of Chapter 2 and 2A of the HL7 Version 2.7 standard (the standard may be obtained via HL7 membership or non-member purchase on www.HL7.org).

Note: Simply taking the courses offered at this meeting will most likely not be sufficient to pass the test. We strongly recommend a combination of the aforementioned to fully prepare yourself for the test.

# TRACK 2—VERSION 3 AND CDA® CORE

T5 – Introduction to Version 3, Part 1: Foundations Tuesday, September 24 / 9:00 am – 12:30 pm

Introduction to Version 3 Foundations is a rigorous introduction to HL7's Version 3 standard. This class provides a foundation for further Version 3 study.

Included in the class is:

- General rationale for Version 3
- Explanation of Version 3's two key concepts: messaging and documents (CDA)
- Explanation of two key models of Version 3 essential to both documents and messaging: the Reference Information Model (RIM) and the Refined Message Information Model (RMIM)
- How to access the Version 3 publications

#### This Tutorial Will Benefit:

- Anyone interested in Version 3 implementation or standards development
- Anyone interested in more advanced Version 3 classes on messaging and documents (CDA)

# Upon Completion of This Tutorial, Students Will Have Obtained:

- Understanding of the rationale for Version 3
- Core characteristics of Version 3 messages and documents
- Rudimentary understanding of HL7's Reference Information Model (RIM)
- Rudimentary understanding of Version 3 Refined Message Information Models (RMIM's) and the refinement process
- Ability to Locate the Version 3 publications

### Prerequisites:

- Experience with healthcare interfacing would be helpful
- Experience or training with systems (development, integration, and/or implementation) required
- It is assumed that the student has some familiarity with the HL7 organization and its processes (balloting procedures, etc.) as can be obtained through the HL7 Organization and Process tutorial

# Faculty:

AbdulMalik Shakir, FHL7: Co-Chair, HL7 Modeling and Methodology Work Group; Member, HL7 Architectural review Board; Principal Consultant, Shakir Consulting; Director - Research Informatics Architecture, City of Hope

# T8 – Introduction to Version 3, Part 2: Messaging Tuesday, September 24 / 1:45 pm – 5:00 pm

Health Level Seven is famous as a provider of messaging standards. That is, providing the standard format and interaction specifications required for two disparate healthcare systems to communicate at the application level. This tutorial builds on the morning Version 3 foundations class by explaining how to read the Version 3 publications with special focus on how the messaging paradigm is supported with the Version standard. It explains the dynamic and static messaging components used to specify messaging in Version 3 and the general rules that apply to all messaging.

#### The Tutorial Will Benefit:

- Anyone who needs to read Version 3 messaging publications
- Anyone implementing Version 3 messaging
- Anyone interested in balloting or developing Version 3 standards
- Anyone interested in more advanced classes on Version 3

# Upon Completion of This Tutorial, Students Will Have Obtained:

- General understanding of Version 3 messaging characteristics
- Knowledge of the overall structure of the Version 3 Messaging Publications
- Explanation of how to read a Version 3 domain
- Understanding of general rules for Version 3 message transmission
- Exposure to a Version 3 message
- Knowledge on how to impact Version 3

# Prerequisites:

• Introduction to Version 3, Part 1: Foundations

Note: Messaging builds directly on the concepts covered in Part 1 and is designed to be a continuation of the morning class. It is assumed that the attendee has basic familiarity with Version 3 including a general understanding of the RIM and how to interpret the RMIMs. If you would like to take this class without taking Part 1, please contact the instructor.

# Faculty:

AbdulMalik Shakir, FHL7: Co-Chair, HL7 Modeling and Methodology Work Group; Member, HL7 Architectural review Board; Principal Consultant, Shakir Consulting; Director - Research Informatics Architecture, City of Hope

# W11 – Introduction to Clinical Document Architecture Wednesday, September 25 / 9:00 am – 12:30 pm

The Clinical Document Architecture (CDA) is HL7's specification for standards-based exchange of clinical documents. CDA is based on the concept of scalable, incremental interoperability and uses Extensible Markup Language (XML), the HL7 Reference Information Model (RIM), and controlled terminology for structure and semantics. This tutorial presents the business case for CDA, its primary design principles, and an overview of the technical specification. The session describes CDA projects supporting meaningful use in the United States as well as others in Europe and Asia/Pacific. It reviews the tools available for CDA creation, management and distribution; and current work on CDA, summary documents.

# This Tutorial Will Benefit:

 Healthcare providers and exchange network architects considering CDA implementation

- Product managers considering support for CDA and those required to support it for meaningful use
- Public health officials and those with structured information reporting requirements
- Implementers of all kinds beginning to work with CDA

# Prerequisites:

• Introduction to Version 3 (Part 1) recommended

### Faculty:

Brett Marquard (Lead-Speaker): Co-Chair, HL7 Structured Documents Work Group; Principal, River Rock Associates

Rick Geimer (Co-Speaker): Chief Technology Officer, Lantana Consulting Group; Member, HL7 Structured Documents Work Group

# W14 – Version 3 XML ITS for CDA Wednesday, September 25 / 1:45 pm – 5:00 pm

Clinical Document Architecture (CDA) is represented in XML and uses the V3 data types. This tutorial covers the CDA XML and the data types from an implementer's perspective.

#### This Tutorial Will Benefit:

• Anyone who works with CDA in practice: specification designers, analysts, and programmers

# Upon Completion of This Tutorial, Students Will Know:

- The general design approach for the XML structure of a CDA document and the data types
- The key facts about the important data types
- What the actual CDA XML looks like, how it relates to the published models
- How to master the first implementation challenges and basic requirements
- How to avoid the most common implementation mistakes
- How to actually populate a CDA document with clinical content
- How to use CDA templates

#### Prerequisites:

 The course will assume that participants have basic XML skills, and general knowledge of the V3 RIM concepts and the Clinical Document Architecture.

### Faculty:

*Kai U. Heitmann, MD, FHL7:* Chair, HL7 Germany; Heitmann Consulting and Services

# W15 – Clinical Document Architecture Advanced Wednesday, September 25 / 1:45 pm – 5:00 pm

CDA implementation requires understanding of the CDA refinement of the RIM (the CDA RMIM), the Version 3 data types and how these combine with controlled vocabularies to form "clinical statements." This tutorial reviews the principles of semantic interoperability with CDA and how these are reflected in the CDA model and implemented in the CDA schema. It reviews the CDA RMIM, schema and data types. In addition, the tutorial gives a detailed walkthrough of samples of CDA documents, coded using clinical statements.

#### This Tutorial Will Benefit:

- Those needing to learn more about CDA, Release 2 its derivation from the RIM and issues relevant to implementing CDA 2.0 solutions
- Implementers needing to work with CDA, and wanting a review of the details

# Upon Completion of This Tutorial, Students Will:

- Have an overview of CDA's components
- Have insight into the XML markup required to implement solutions
- Have a better understanding of the issues surrounding semantic interoperability using CDA

### Prerequisites:

- Completion of the Clinical Document Architecture Introductory Tutorial recommended, but not required
- Basic knowledge of the Version 3 standards (as can be obtained from the Introduction to Version 3 tutorial series)

# Faculty:

Robert Dolin, MD, FHL7 (Lead Speaker): Chair-Elect, HL7 International Board of Directors; Co-Chair, HL7 Structured Documents Work Group; Co-Editor, CDA; Physician; President and Chief Medical Officer, Lantana Consulting Group

Calvin Beebe (Co-Speaker): Treasurer, HL7 International Board of Directors; Co-Chair, Structure and Semantic Design Steering Division—HL7 Technical Steering Committee; Co-Chair, HL7 Structured Documents Work Group; Co-Editor, CDA; Technical Specialist, Mayo Clinic - Rochester, MN

# TH16 – CDA® Specialist Certification Test Preparation Thursday, September 26 / 9:00 am – 12:30 pm

# Upon Completion of This Tutorial:

 Students will be better prepared to take the CDA Specialist Certification Test

# This Tutorial Will Benefit:

• Anyone preparing for the CDA Specialist Certification Test

- System analysts or clinical application developers wanting in-depth understanding of the CDA Release 2 standard
- Participants are encouraged to carefully read the CDA Release 2 standard
- Introduction to Version 3 (Part 1) as well as the CDA Introductory and Advanced tutorials are strongly recommended

# Faculty:

Calvin E. Beebe: Treasurer, HL7 International Board of Directors; Co-Chair, Structure & Semantic Design Steering Division—HL7 Technical Steering Committee; Co-Chair, HL7 Structured Documents Work Group, Co-Editor, CDA; Technical Specialist, Mayo Clinic - Rochester, MN

# TH22 – HL7 CDA Specialist Certification Test Thursday, September 26 / 5:30 pm – 7:30 pm

Health Level Seven International is pleased to offer certification testing on HL7 CDA Release 2. Certification testing is offered to those participants who want to demonstrate that they have a working knowledge of the CDA Release 2 standard. Healthcare systems analysts, medical software programmers, and medical informatics faculty and students are all potential candidates.

The knowledge required to pass the test can be obtained by attending HL7 education sessions, by field work dealing with HL7 CDA based applications, or simply by self-study of the HL7 CDA Release 2 standard. Please refer to the Study Guide on the HL7 Training and Certification page of the HL7 website for details on the content covered by the test.

Note: Simply taking the courses offered at this meeting will most likely not be sufficient to pass the test. We strongly recommend a combination of the aforementioned to fully prepare yourself for the test.

# TH23 – HL7 Version 3 RIM Certification Test Thursday, September 26 / 5:30 pm – 7:30 pm

Health Level Seven is pleased to offer certification testing on the HL7 Version 3 Reference Information Model (RIM) 2.36. Note that the RIM is the foundational base of all Version 3 artifacts. Certification testing is offered to those industry participants who are expected to have a working knowledge of the HL7 Version 3 RIM or its derived artifacts. Interface analysts, healthcare systems analysts, medical software programmers, and medical informatics faculty and students are all potential candidates.

The knowledge required to pass the exam can be obtained by self-study of the RIM and its associated normative structural

vocabulary, as well as through participation in the HL7 working group meetings, HL7 education sessions, and field work implementing HL7 Version 3 artifacts. Please refer to the Study Guide on the HL7 Training and Certification page of the HL7 website for details on the content covered by the test.

Note: Simply taking the courses offered at this meeting will most likely not be sufficient to pass the test. We strongly recommend a combination of the aforementioned to fully prepare yourself for the test.

# TRACK 3—HL7 SPECIAL TOPICS

# M1 – Introduction to HL7 FHIR\* Monday, September 23 / 1:45 pm – 5:00 pm



FHIR (Fast Healthcare Interoperability Resources) is the newest healthcare interoperability standard offered by HL7, providing domain friendly wire formats compatible across the document, messaging, services and RESTful paradigms. This tutorial is aimed at those who want to learn more about FHIR, what it can do and how their organization might best take advantage of it.

# This Tutorial Will Benefit:

· Analysts, vendors, and project managers

# Upon Completion of This Tutorial, Students Will Be Able to:

- Explain the main principles underlying the FHIR methodology
- Describe the characteristics of a FHIR resource and understand the contents of a resource definition
- Understand the relationship between FHIR and other HL7 standards such as Version 2, Version 3 messaging and CDA
- List some of the key FHIR infrastructure resources and explain how they are used to support the four FHIR interoperability paradigms
- Help their organization to determine if, when, where and how they might implement FHIR

#### Faculty:

Lloyd McKenzie, PEng: Co-Chair, HL7 Modeling and Methodology Work Group; Modeling and Methodology Facilitator-at-Large; Principal Consultant, LM&A Consulting Ltd.

# M2 – Standards for Interoperability Monday, September 23 / 1:45 pm – 5:00 pm

This tutorial provides a survey of the healthcare interoperability standards landscape, pointing out the main features of the terrain and how they link together to perform

useful functions. The tutorial has three main parts covering (1) messaging standards such as HL7 Version 2 and Version 3, (2) clinical document standards such as CDA, CCD\*, CCR and IHE XDS, and (3) terminology standards, such as SNOMED CT and LOINC. It explains how and why these were developed and their complementary roles, each best suited to particular tasks.

In the time available, the treatment of each standard is necessarily brief, but this tutorial will provide an introduction to other more detailed tutorials.

#### This Tutorial Will Benefit:

• Relative newcomers to health interoperability, who are still unsure about how everything fits together

# Upon Completion of This Tutorial, Students Will Know:

• How the main healthcare interoperability standards relate to each other and which is most suited for particular roles

# Faculty:

Diego Kaminker: Affiliate Director, HL7 International Board of Directors; Chair, HL7 Argentina; Co-Chair, HL7 Education Work Group; Co-Author and Coordinator, HL7 eLearning Course, Argentina; Chief Developer and Manager, Kern-IT SRL

# T6 – FHIR for Software Developers Tuesday, September 24 / 9:00 am – 12:30 pm



This tutorial delves deeper into the infrastructure parts of the FHIR specification. Get insight in how to design, develop and test software that uses the FHIR interoperability standard, all the way from the wire-format up to validation and storage.

# This Tutorial Will Benefit:

• Software developers, team leads, and infrastructure architects

# Upon Completion of This Tutorial, Students Will:

- Understand how resources align with object-oriented and other common software-engineering principles
- Be able to list the four of interoperability paradigms supported by FHIR
- Understand the FHIR REST service operations and how to implement them
- Understand how the Atom, Xml and JSON wire formats are used in FHIR
- Understand versioning and bundles
- Compare strategies for using object models, validation and (de)serialization
- Use relational or document-oriented storage for persistence of resources
- Understand how to implement search functionality
- Know and use the provided reference implementations

# **TUTORIALS**

# Prerequisites:

• An Introduction to HL7 FHIR

# Faculty:

*Ewout Kramer*: Chief Architect and Manager of Research and Development, Furore

# TH17 – Electronic Health Record System Functional Model Thursday, September 26 / 9:00 am – 12:30 pm

This informative tutorial and review provides an in-depth look at the American National Standards Institute (ANSI) and International Organization for Standardization (ISO) approved EHR System Functional Model (EHR-S FM), Release 1. The EHR-S FM includes conformance criteria, along with background information, including an overview of other EHR standards initiatives. The tutorial will also cover ongoing EHR Work Group projects such as the Personal Health Record, EHR Glossary, functional profiles, and the EHR Interoperability Model as well as EHR industry-related information such as EHR system certification efforts and health care information technology standards selection and usage efforts.

#### This Tutorial Will Benefit:

- Those seeking information on functionality and standardization of electronic health records
- This tutorial focuses on EHR system functionality and will be helpful for those looking to implement EHR systems, those wishing to evaluate EHR systems, or those that have an interest in garnering a bit of EHR system industry background information

# Upon Completion of This Tutorial, Students Will Know:

- Background and status of the EHR System Functional Model as an ANSI and International Organizational for Standardization (ISO) standard
- Options to use the functional model for conformance and care setting profiles
- Background and status on HL7 and industry projects supporting EHR standards

Note: This tutorial focuses on functionality, not interoperability. While interoperability is a component of functionality, this tutorial is primarily focused on core functionality and not systems integration. The EHR-S is a functional standard and not a records/data standard.

#### Faculty:

Pat Van Dyke: Director-at-Large, HL7 International Board of Directors; Co-Chair, HL7 Electronic Health Records Work Group; Co-Chair, Structure & Semantic Design Steering Division — HL7 Technical Steering Committee; Member, HL7 Finance Committee; Vocabulary Facilitator, Electronic

Health Records Work Group; Delta Dental Plans Association; The ODS Companies

# TH19 – TermInfo – Using Standard Terminologies with HL7 Information Models Thursday, September 26 / 1:45 pm – 5:00 pm

The HL7 TermInfo 2 Project is specifying and updating standard guidelines for the interface between terminologies and HL7 information models. This tutorial looks at the way that both the standard terminologies and information models contribute to meeting the requirements of semantic interoperability in representing and communicating clinical information. The focus of the tutorial is using SNOMED CT in HL7 Version 3. However, the principles are more broadly applicable, and additional examples will be drawn from Version 2, CDA, and FHIR models, and the LOINC terminology, as they are being addressed in work toward future versions of the TermInfo standard. The relevant features of SNOMED CT are outlined and the gaps and overlaps between SNOMED CT and the HL7 Reference Information Model (RIM) regarding complete and unambiguous representation of meaning are summarized. This content is based on the current guidance from and proposed updates to the TermInfo Draft Standard for Trial Use (DSTU).

### This Tutorial Will Benefit:

- Anyone interested in reproducible, processable communication of meaningful clinical information
- Anyone wishing to apply the HL7 TermInfo guidelines within an HL7 domain committee or an implementation of HL7 standards

# Upon Completion of This Tutorial, Students Will Know:

- The primary ways in which representation of meaning in information models and terminologies may interact and overlap
- The key specific semantic properties of SNOMED CT related to use with information models
- The general principles that can be applied to information models and terminologies to minimize ambiguity and ensure an effective, meaningful and processable representation of clinical information
- The specific recommendations from and proposed updates to the TermInfo DSTU

# Prerequisites:

- Familiarity with one or more standard information models (including, but not limited to, HL7 V3, V2, CDA, and FHIR, openEHR Archetypes, CIMI)
- Familiarity with one or more standard clinical terminologies (including, but not limited to, SNOMED CT, LOINC)
- Preferably bring issues or questions that you have encountered in using information models and terminologies together to represent and communicate clinical information

### Faculty:

Rob Hausam: Co-Chair, HL7 Vocabulary Work Group; Co-Chair, HL7 Orders and Observations Work Group; TermInfo 2 Project Leader; Principal, Hausam Consulting

# TRACK 4—MEANINGFUL USE

# M3 – Quality Reporting Document Architecture Monday, September 23 / 1:45 pm – 5:00 pm



This tutorial will describe constraints on the Clinical Document Architecture Release 2 (CDA R2) header and body elements for Quality Reporting Document Architecture (QRDA) documents. QRDA is a document format that provides a standard structure with which to report quality measure data to organizations that will analyze and interpret the data. Quality measurement in healthcare is complex. Accurate, interpretable data efficiently gathered and communicated is key in correctly assessing that quality care is delivered.

The standard has been named as one of the requirements for EHR certification in the Meaningful Use Stage 2/3 Standards certification criteria.

### This Tutorial Will Benefit:

 Users, implementers and developers of health IT solutions that need to integrate with patient or clinician focused reference content

# Upon Completion of This Tutorial, Students Will Know:

 Use a standard structure with which to report quality measure data to organizations that will analyze and interpret the data

### Faculty:

Robert Dolin, MD, FHL7: Chair-Elect, HL7 International Board of Directors; Co-Chair, HL7 Structured Documents Work Group; Co-Editor, CDA; Physician; President and Chief Medical Officer, Lantana Consulting Group

# T9 – Immunization Messaging Using HL7 Version 2.5.1



Tuesday, September 24 / 1:45 pm – 5:00 pm

The CDC Immunization Implementation Guide is based upon HL7 Version 2.5.1. It is designed to support communication of immunization data between health information systems, such as EHR systems and Immunization Information Systems (IIS). The audience for this tutorial is implementers and developers of health IT solutions, and interface engineers that need to integrate EHR's with immunization information systems.

#### This Tutorial Will Benefit:

- Implementers and developers of health IT solutions
- Interface engineers that need to integrate EHRs with ambulatory reporting systems

# Upon Completion of This Tutorial, Students Will Know:

- The core data elements of immunization histories that should be supported
- The use cases supported by the messages in the implementation guide
- How to conform to the usage guidance in the implementation guide
- The differences between this guide and previous implementation guides that had been in use
- How to validate conformance of messages to the guide

# Faculty:

Rob Savage: Co-Chair, HL7 Public Health and Emergency Response Work Group; Senior Information Technologist, Northrop Grumman

# W12 – Introduction to Integrating the Healthcare Enterprise



Wednesday, September 25 / 9:00 am – 12:30 pm

Integrating the Healthcare Enterprise (IHE) is an organization devoted to the promotion of standards-based interoperability in healthcare. The goal of IHE is to improve the effectiveness and efficiency of healthcare provider organizations, and the system developers that support them, through the value proposition of interoperability standards. The IHE process is use case driven, and includes development of implementation guides, hosting industry-wide interoperability testing events (Connectathons), and public demonstrations (such as the HIMSS Interoperability Showcase). IHE is a public-private collaboration of over 400 organizations, including professional societies, government agencies, standards developing organizations (including HL7), health IT system vendors and implementers. It operates through a dozen specialty domains and across all regions of the world; its profiles form the basis for many interoperability efforts at the departmental, institutional, regional, national, and international levels.

This tutorial will provide an overview of the IHE organization and its processes, the scope of use cases (profiles) addressed, and how those Profiles are being used in real world implementations.

# This Tutorial Will Benefit:

- Users of health IT systems (clinicians, public health, researchers) who have interoperability use cases that need to be addressed
- Healthcare administrators, system purchasers, and policy makers who need to understand the scope of what is available for interoperability, and how to leverage IHE

profiles for effective system specification and procurement

• Product managers, software developers, and integration specialists for clinical information systems that need to interoperate with other systems

# Upon Completion of This Tutorial, Students Will Understand:

- The value proposition for standards-based interoperability, and the challenges to implementation
- The IHE process for use case driven interoperability specification, testing, and deployment
- The IHE integration profiles for intra-institutional and cross-enterprise data exchange

# Faculty:

*Harry Solomon:* Co-Chair, HL7 Imaging Integration Work Group; Interoperability Architect, GE Healthcare

# TH18 – Consolidated CDA Thursday, September 26 / 9:00 am – 12:30 pm



This tutorial will provide an overview of the clinical documents supported by the CDA Consolidation guide, including:

- Continuity of Care Document 1.1
- · History and Physical
- Consult Note
- Discharge Summary
- Diagnostic Imaging Report
- Procedure Note
- · Operative Note
- Progress Note
- Unstructured Document

# This Tutorial Will Benefit:

- Users of systems designed to provide documentation of clinical encounters in a healthcare setting
- Administrators, system purchasers and policy makers in both the inpatient and outpatient setting who need to understand the HL7 specifications for clinical documentation used in those settings
- Product managers, software developers and integration specialists who are responsible for implementing solutions for clinical documentation

### Upon Completion of This Tutorial, Students Will Know:

- History of and need for the CDA Consolidation Project
- How to read and understand the implementation guide
- Similarities and differences across document types in the guide
- Use cases for each of the document types

### Faculty:

*Keith Boone*: Director-at-Large, HL7 International Board of Directors; Lead Interoperability Systems Designer, GE Healthcare IT

# TH20 – HL7 Standards for Meaningful Use Thursday, September 26 / 1:45 pm – 5:00 pm



Under the 2009 US American Recovery & Reinvestment Act (ARRA) regulation, the Health Information Technology for Economic and Clinical Health (HITECH) section legislated that eligible healthcare professionals and hospitals can qualify for Medicare and Medicaid incentive payments when they adopt certified EHR Technology and use it to achieve specified objectives. One of the two regulations announced defines the "Meaningful Use" objectives that providers must meet to qualify for the bonus payments, and the other regulation identifies the technical capabilities required for certified EHR Technology ("ONC HIT Certification Program").

# The Key Components of the Meaningful Use Objectives Are:

- Tracking key patient-level clinical information in order to give health providers clear visibility into the health status of their patient populations
- Applying clinical decision support designed by health care providers to help improve adherence to evidence-based best practices
- Executing electronic healthcare transactions (prescriptions, receipt of drug formulary information, eligibility checking, lab results, basic patient summary data exchange) with key stakeholders
- Reporting a focused set of meaningful care outcomes and evidence-based process metrics (for example, the percentage of patients with hypertension whose blood pressure is under control), which will be required by virtually any conceivable new value-based payment regimes

Evidence of Meaningful Use provides financial incentives to "Eligible Providers" and "Eligible Hospitals" over a five year period: 2011 to 2015. For example, maximum EHR implementation reimbursement available to an individual eligible provider under Medicare is \$44,000 and under Medicaid is \$63,500; for eligible hospitals it is a \$2M base payment. Additional clarifications (including exceptions) will be explained during the tutorial.

The Medicare and Medicaid EHR Incentive Programs are staged in three steps (Stage 1, Stage 2 & Stage 3) with increasing requirements for participation. Stage 1 requirements were published in November 2010 and Stage 2 in August 2012. Stage 3 requirements will be published in 2013. Additional details on the various Stages will be provided during the tutorial.

#### This Tutorial Will Benefit:

- Providers and hospitals in the US who are eligible to receive the financial incentives under the legislation
- Consultants and Companies who are providing Meaningful Use technical assistance to eligible providers and hospitals
- EHR vendors who are new to "Meaningful Use" requirements (please review the MU Track 4 tutorials for targeted training)

• Countries that are considering the introduction of national incentives to encourage EHR adoption

# Upon Completion of This Tutorial, Students Will Know:

- What Meaningful Use is, who defined it, and what it means
- How it is relevant and related to HL7
- Which HL7 standards are mentioned in the Meaningful Use regulations

# Prerequisites:

• Standards for Interoperability tutorial

# Faculty:

*Gora Datta*: HL7 Corporate Member; HL7 Ambassador; Co-Chair, HL7 Mobile Health Work Group; Group Chairman & CEO, CAL2CAL Corporation

# TRACK 5—INFORMATION FORUMS

# F1/F4 – HL7 First-Time Attendees' Orientation – FREE TUTORIAL

Sunday, September 22 / 4:00 pm – 5:00 pm Monday, September 23 / 7:00 am – 8:00 am

This is a special orientation session for first-time attendees. It will give those new to HL7 the lay of the land and help ensure they get the very most out of their first working group meeting experience. The session will consist of a quick meeting "tour" and a question and answer session that will help attendees make informed choices and maximize their time at the meeting. The session will be offered twice during the meeting—once on Sunday evening and again on Monday morning.

### Faculty:

Ken McCaslin, FHL7: Co-Chair, HL7 Electronic Services Work Group; Co-Chair, HL7 Orders and Observations Work Group; Director, HealthCare Standards, Quest Diagnostics

Patrick Loyd: Co-Chair, Technical and Support Services Steering Division—HL7 Technical Steering Committee; Co-Chair, HL7 Clinical Statement Work Group; Co-Chair, HL7 Education Work Group; Co-Chair, HL7 Orders and Observations Work Group; Sole Proprietor, ICode Solutions

# F2 – HL7 Organization and Process Orientation/ Introduction – FREE TUTORIAL Sunday, September 22 / 5:00 pm – 6:00 pm

This session provides a brief history of the HL7 organization and answers the question "What is HL7?" An overview of the current work group structure and content domains will be presented. Attendees will learn the formal work group process and protocol and how to effectively participate in the work of the work groups. This tutorial was added at

the request of first-time attendees seeking to gain deeper knowledge of the organization and its work processes.

### Faculty:

John Quinn: HL7 Chief Technology Officer

# F3/F5 – How to Design and Deliver an HL7 Tutorial – FREE TUTORIAL

Sunday, September 22 / 5:00 pm – 6:00 pm Wednesday, September 25 / 7:00 am – 8:00 am

This is an information session which introduces design and delivery of HL7 tutorials and provides tools and resources to assist in these tasks. The course will assist in production of focused, outcome driven educational activities.

#### This Tutorial Will Benefit:

• Anyone who delivers or intends to deliver or develop tutorial information for HL7

# Upon Completion of This Tutorial, Students Will Understand:

- The need to identify appropriate content and methodology to meet stakeholder need
- How to develop of competencies to meet need
- How to identify expected background of learners
- What a learning plan needs to contain, breaking content into defined timeslots and identified resources/exercises
- Delivery methods and assessment methods and tools
- The need to measure assessment and content against competencies
- How to prepare proposal for HL7 education
- How to undertake basic tutorial quality review

# Faculty:

Heather Grain, AssocDip MRA, GDip IS, MHI, MACS, FACHI, Cert IV Training and Education: Co-Chair, HL7 Vocabulary Work Group; Convenor ISO WG3-Semantic Content; Member IHTSDO Quality Assurance Committee and Education SIG; Chair-Standards Australia Health Informatics Committee (IT 14), Australia

# F6 – Newly Elected Co-Chair Training – FREE TUTORIAL

Thursday, September 26 / 7:00 am - 8:00 am

This session is intended for newly elected work group cochairs. The purpose of the session is to introduce the co-chair responsibilities, review work group and balloting procedures, share tips on managing a work group, provide a framework for common operation among all work groups, and general Q&A session.

#### Faculty:

Karen Van Hentenryck: HL7 Associate Executive Director

# Health Professionals: Get Engaged with HL7 Standards Development & Implementation Ambassador Program



Monday, September 23 • 1:45 - 5:00 pm

Health professionals in care delivery organizations are using HL7 standards in many workflows of their daily environment, whether those standards are embedded in EHR systems, mobile devices, quality metrics, clinical decision support routines, or in the clinical data that they exchange with other systems both within and outside their organization. The Health Professional membership category allows those health professionals to become involved in the HL7 development process, learn the range of HL7 standards that exist, including those specified in the upcoming stages of Meaningful Use, and see over the horizon those HL7 standards that will be the future of HIT optimization and care delivery. It is an opportunity as well to learn about other

standards development organizations and their relationships and increasing collaborations with one another in developing the clinical data standards of the future.

This session will give insights into the benefits of participation in the HL7 development processes, networking and collaboration with HL7 experts, and the chance to influence the interoperability standards of the future. The HL7 Health Professional Membership category brings the opportunity to contribute to the standards that will improve care coordination and health care quality in the future, make health professionals more informed purchasers of technology, and more valuable to their organizations.

# Introduction to Security and Privacy Wednesday, September 25 • 1:45 – 5:00 pm

This session will focus on how to apply security and privacy to health IT standards. It will cover the basics of security and privacy using real-world examples. The session will explain how each phase of design needs to consider risks to security and privacy to best design security and privacy in, and mechanisms for, flowing risks down to the next phase of design. In addition, it will cover the security and privacy relevant standards that HL7 has to offer including: Role-



Based-Access-Control Permissions, Security/ Privacy ontology, Confidentiality Code, CDA Consent Directive, Access Control Service, Audit Control Service, and others. These standards and services will be explained in the context of providing a secure and privacy protecting health IT environment.

# TUTORIALS AT A GLANCE

Торіс	Class	Instructor	SUN PM	MON AM	MON PM	TUE AM	TUE PM	WED AM	WED PM	THU AM	THU PM
Track 1—Version 2.x										7	
Introduction to Version 2, Part 1: Control/Patient Administration	T4	Buitendijk				*					
Introduction to Version 2, Part 2: Orders and Observations	Т7	Henderson					*				
Version 2 Message Profiles and Conformance	W10	Klein						*			
Version 2.7 Control Specialist Certification Test Preparation	W13	Loyd							*		
HL7 Version 2.7 Control Specialist Certification Test	TH21	HL7 Staff									5:30- 7:30
Track 2—Version 3 and CDA											
Introduction to Version 3, Part 1: Foundations	T5	Shakir				*					
Introduction to Version 3, Part 2: Messaging	T8	Shakir					*				
Introduction to Clinical Document Architecture	W11	Marquard/ Geimer						*			
Version 3 XML ITS for CDA	W14	Heitmann							*		
Clinical Document Architecture – Advanced	W15	Dolin/Beebe							*		
CDA® Specialist Certification Test Preparation	TH16	Beebe								*	
HL7 CDA Specialist Certification Test	TH22	HL7 Staff									5:30- 7:30
HL7 Version 3 RIM Certification Test	TH23	HL7 Staff									5:30- 7:30
Track 3—HL7 Special Topics											
	M1	McKenzie			*						
Standards for Interoperability	M2	Kaminker			*						
FHIR for Software Developers	T6	Kramer				*					
Electronic Health Record System Functional Model	TH17	Van Dyke								*	
TermInfo – Using Standard Terminologies with HL7 Information Models	TH19	Hausam									*
Track 4—Meaningful Use											
Quality Reporting Document Architecture	М3	Dolin			*						
Immunization Messaging Using HL7 Version 2.5.1	Т9	Savage					*				
Introduction to Integrating the Healthcare Enterprise	W12	Solomon						*			
Consolidated CDA	TH18	Boone								*	
	TH20	Datta									*
Track 5—Information Forums – FREE TUTO	I DRIAL										
First-Time Attendees' Orientation	F1/ F4	McCaslin/Loyd	4:00- 5:00	7:00- 8:00							
Organization and Process Orientation/Introduction	F2	Quinn	5:00- 6:00								
How to Design and Deliver an HL7 Tutorial	F3/F5	Grain	5:00- 6:00					7:00- 8:00			
Newly Elected Co-Chair Training	F6	Van Hentenryck								7:00- 8:00	

# Meetings Only—No Joint Sessions Listed

	Cum	day	Mai	nday	Tuo	cday	Wednesday		Thur	eday	Friday	
		PM	AM	PM	AM	sday PM	AM	PM	Thur AM	PM	AM	PM
Activities with Other SDOs	AM	Q4	AW	PIM	AIVI	PIVI	AM	PIVI	AIVI	PIVI	AIVI	PIVI
Affiliate Due Diligence Committee		QT		Q4								
Anatomic Pathology				Ψ,	*	*						
Anesthesia				*		Q3	*					
Architectural review Board	*	*		Q3	Q2	Q4	^			*		
Arden Syntax				Q3	*	*						
Attachments				*	*	*	*	*	*			
Board of Directors' Meeting					*	*						
Child Health						*	*					
Clinical Decision Support							Q2	Q4	Q2	*		
Clinical Genomics						Q4	Q2	Q3	Q1			
Clinical Interoperability Council						Q4		*	*	*		
Clinical Quality Information				_	01	*	02	_	*	_		
Clinical Quality information				*	Q1	*	Q2	*	*	*		
Clinical Statement										*		
Co-Chair Information				Lunch & 5:15- 7:00		Lunch			7:00- 7:45			
Community Based Collaborative Care				*		*	Q2	*				
Conformance & Guidance for Implementation/Testing				*	*	Q4		Q4				
Education				Lunch/ Meeting & ★					*			
Electronic Health Records				*	*	*	*	*	*	*		
Electronic Services									*			
Emergency Care								*	Q1	*	*	
Fast Healthcare Interoperability Resources					Q1			Q4		Q4	Q1	
Financial Management		Q4						*				
First-Time Attendees' Orientation		4:00- 5:00	7:00- 8:00	Lunch		Lunch						
Foundation Task Force								Q3				
Fresh Look Task Force				Q4								
General Session					8:00- 8:45		8:00- 8:45		8:00- 8:45		No General Session	
Governance & Operations Committee							Q2					
GS1 Education Session					7:00- 7:45							
Health Care Devices				*	*	*	*	*	*	*	*	Q3
Health Professionals: Get Engaged with HL7 Standards Development & Implementation				*								
Imaging Integration							Q2	*	*	*		
Implementable Technology Specification				*			*		*	*		

# MEETINGS AT A GLANCE

# Meetings Only—No Joint Sessions Listed

	Sur	nday	Mor	nday	Tue	sday	Wedi	nesday	Thu	rsday	Frie	day
	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM	AM	PM
Infrastructure & Messaging					*	*		Q4				
International Council	*	Lunch & Q3								12:30- 5:00		
International Mentoring Committee		Q4										
Mobile Health							*	*				
Modeling & Methodology		Q3			*		*	Q3	*	5:30- 8:00	Q2	
Networking Reception								5:15- 7:00				
Nurses Breakfast/Meeting					7:00- 8:00							
Open Space Meetings (Self Organized)				6:00- 8:00		6:00- 8:00						
Orders & Observations				*	*	*	*	*	*		Q1	
Organization and Process Orientation/ Introduction		5:00- 6:00										
Patient Administration				*	*	*	*	*	*	*		
Patient Care				*	*	*	Q1	*	*			
Pharmacy				*	Q1	*	Q1	*	*	*	*	
Physicians Breakfast/Meeting							7:00- 8:00					
Plenary Meeting			8:30- 12:30									
Policy Advisory Committee							Q1					
Process Improvement Committee									Q1			
Product Line Architecture								Q3				
Project Services										Q3		
Public Health Emergency Response				Q3	*	*		*	Q2	*		
Publishing							Q1-V2	Q3-V2 Q3-V3			Q2-V3	
Regulated Clinical Research Information Management				Q4	*		*		Q1	Q4		
RIM Based Application Architecture				Q3				Q4		Q3		
SAIF Architecture Program								Q4				
Security					*	*		*	*	*		
Services Oriented Architecture				*	Q1	*	Q2	*	Q2	*		
Steering Divisions: Domain Experts Foundation & Technology Structure & Semantic Design Technical & Support Services				7:00- 8:30								
Structured Documents				*	*	*	*	Q4	Q1	*	*	
TSC Meetings (Note: There is also a meeting scheduled for Saturday, 9/21, 9:00-5:00 pm)		5:15 – 6:30						Lunch/ Meeting				
Templates				Q3							*	
Tooling					*	7:00- 9:00			*			
Vocabulary		*		*	*	*			*	*	*	

# **REGISTRATION HOURS**

Sunday 8:30 – 5:00 pm Registration
Monday – Tuesday 7:00 – 5:00 pm Registration
Wednesday – Thursday 7:30 – 5:00 pm Registration

Friday 8:00 – 1:00 pm Staff on Hand for Assistance

# **MEALS AND BREAKS**

Monday - Thursday 7:30 - 8:30 am **Continental Breakfast** Friday 8:00 - 9:00 am **Continental Breakfast** Monday Morning Break 10:15 – 10:45 am Tuesday — Friday 10:30 - 11:00 am Morning Break Monday - Friday 12:30 - 1:30 pmLunch Monday — Thursday 3:00 - 3:30 pmAfternoon Break

NOTE: In compliance with our status as an ANSI-accredited standards development organization, anyone may register to attend HL7 meetings.

# **GENERAL SESSION ROOM**

Please plan to attend the Monday morning Plenary Meeting and General Sessions Tuesday through Thursday for daily highlights, meeting announcements and changes.

Monday 8:00 – 12:30 pm Plenary Meeting

Tuesday 8:00-8:45 am HL7 CEO, CTO, International

Council and TSC Reports, Announcements

Wednesday 8:00 – 8:45 am HL7 Annual Business Meeting,

Awards Presentations,

Announcements

Thursday 8:00 - 8:45 am Announcements

Friday NO GENERAL SESSION

Meeting times and locations are subject to change.

# **MEETINGS**

# **ACTIVITIES WITH OTHER SDOs**

Sunday 3:30-5:00 pm MEETING

# **AFFILIATE DUE DILIGENCE COMMITTEE**

Monday 3:30-5:00 pm MEETING

# **ANATOMIC PATHOLOGY (AP)**

Tuesday 9:00 – 5:00 pm MEETING

Wednesday 9:00 – 10:30 am Joint w/0&0, II, Clin Gen

# **ANESTHESIA (GAS)**

Monday 1:45 – 5:00 pm MEETING Tuesday 9:00 – 3:00 pm MEETING 3:30 – 5:00 pm Joint w/Dev

Wednesday 9:00 – 12:30 pm MEETING

# **ARCHITECTURAL review BOARD (ArB)**

 Sunday
 9:00 – 5:00 pm
 MEETING

 Monday
 1:45 – 3:00 pm
 MEETING

 Tuesday
 11:00 – 12:30 pm
 MEETING

 3:30 – 5:00 pm
 MEETING

Thursday 1:45 – 5:00 pm MEETING

# ARDEN SYNTAX (AS)

Tuesday 9:00 – 5:00 pm MEETING

# **ATTACHMENTS**

 Monday
 1:45 – 5:00 pm
 MEETING

 Tuesday – Wednesday
 9:00 – 5:00 pm
 MEETING

 Thursday
 9:00 – 12:30 pm
 MEETING

# **BOARD OF DIRECTORS' MEETING**

Tuesday 9:00 – 5:00 pm MEETING

# CHILD HEALTH (CH)

Tuesday 1:45 – 5:00 pm MEETING Wednesday 9:00 – 12:30 pm MEETING

# **CLINICAL DECISION SUPPORT (CDS)**

Wednesday 9:00 – 10:30 am Joint w/SD
11:00 – 12:30 pm MEETING
1:45 – 3:00 pm Joint w/CQI, SD
3:30 – 5:00 pm MEETING
Thursday 9:00 – 10:30 am Joint w/0&0

11:00 – 5:00 pm MEETING

# **CLINICAL GENOMICS (Clin Gen)**

Thursday

Wednesday

Tuesday 3:30 – 5:00 pm MEETING

Wednesday 9:00 – 10:30 am Joint w/0&0, II, AP

11:00 – 3:00 pm MEETING 3:30 – 5:00 pm Joint w/FHIR 9:00 – 10:30 am MEETING

# **CLINICAL INTEROPERABILITY COUNCIL (CIC)**

Tuesday 11:00 – 12:30 pm Joint w/EHR, CQI

3:30 – 5:00 pm MEETING

Wednesday 11:00 – 12:30 pm Joint w/EHR, PHER

1:45 – 5:00 pm Hosting: RCRIM

Thursday 9:00 - 5:00 pm MEETING

# **CLINICAL QUALITY INFORMATION (CQI)**

Monday 1:45 – 5:00 pm MEETING Tuesday 9:00 – 10:30 am MEETING

11:00 – 12:30 pm Joint w/EHR, CIC

1:45 – 5:00 pm MEETING 11:00 – 12:30 pm MEETING

1:45 – 3:00 pm Hosting: CDS, SD 3:30 – 5:00 pm MEETING

Thursday 9:00 – 5:00 pm MEETING

# **CLINICAL STATEMENT (CS)**

Thursday 1:45 – 5:00 pm Hosting: 0&0

CO-CHAIR INFORMA	ATION		Tuesday	9:00 – 10:30 am	FHIR Governance Board			
Monday	5:15 — 7:00 pm	Co-Chairs Dinner/Meeting		1:45 — 3:00 pm	Joint w/Pharm			
		Co-Chairs. <b>Co-Chairs MUST register</b>		3:30 – 5:00 pm	Joint w/InM			
if you wish to attend the d	-			3:30 – 5:00 pm	Joint w/PHER			
Monday — Tuesday	12:30 — 1:30 pm	Lunch tables reserved for Co-Chairs	Wednesday	9:00 – 10:30 am	Joint w/EHR, Sec, CBCC, SOA,			
Thursday	7:00 – 7:45 am	Newly Elected Co-Chair Training		9:00 – 12:30 pm	Joint w/MnM, Voc			
<b>COMMUNITY BASE</b>	O COLLABORATIV	E CARE (CBCC)		11:00 — 12:30 pm	Joint w/0&0			
Monday	1:45 - 5:00 pm	Hosting: Sec		1:45 – 3:00 pm	Joint w/FM			
Tuesday	1:45 — 5:00 pm	MEETING		1:45 – 3:00 pm	Joint w/MnM			
Wednesday	9:00 – 10:30 am	Joint w/EHR, Sec, SOA, FHIR		3:30 – 5:00 pm	Hosting: Clin Gen			
,	11:00 - 12:30 pm			3:30 – 5:00 pm	Joint w/Dev			
	1:45 — 5:00 pm	MEETING		3:30 – 5:00 pm	Joint w/CGIT, Templates			
CONFORMANCE 9 CI	HIDANCE EOD IMD	I EMENITATION/TECTING (CCIT)	Thursday	11:00 — 12:30 pm				
Monday	1:45 – 5:00 pm	LEMENTATION/TESTING (CGIT) MEETING		1:45 — 5:00 pm	Joint w/II, DICOM WG27			
Tuesday	9:00 – 12:30 pm	MEETING		1:45 — 3:00 pm	Joint w/SD			
Tuesuay	1:45 – 3:00 pm	Joint w/InM		3:30 – 5:00 pm	MEETING			
	3:30 – 5:00 pm	MEETING	Friday	9:00 – 10:30 am	FHIR Management Group and			
Wednesday	3:30 – 5:00 pm	Hosting: FHIR, Templates			Governance Board			
Thursday	9:00 – 3.00 pm	Joint w/Voc		11:00 — 12:30 pm	Joint w/MnM			
•	9.00 — 10.30 aiii	Juliit M/ Anc	<b>FINANCIAL MANAG</b>	EMENT (FM)				
DICOM WG27			Sunday	3:30 – 5:00 pm	MEETING			
Thursday	9:00 – 12:30 pm	Joint w/II	Wednesday	1:45 – 3:00 pm	Hosting: FHIR			
	1:45 – 5:00 pm	Joint w/II, FHIR		3:30 - 5:00 pm	MEETING			
<b>EDUCATION</b>			FIRST-TIME ATTEND	DEES' MEETINGS				
Monday	12:30 – 1:30 pm	Education Facilitators'	Sunday	4:00 – 5:00 pm	ORIENTATION MEETING			
		Roundtable Luncheon/Meeting	Monday	7:00 – 8:00 am	ORIENTATION MEETING			
	1:45 – 3:00 pm	MEETING	,	12:30 — 1:30 pm	Lunch Tables Reserved for Q & A			
	3:30 – 5:00 pm	Hosting: IMC	Tuesday	12:30 – 1:30 pm	Lunch Tables Reserved for Q & A			
Thursday	9:00 – 12:30 pm	MEETING	ŕ	•				
<b>ELECTRONIC HEALT</b>	H RECORDS (EHR	)	FOUNDATION TASK FORCE					
Monday	1:45 — 5:00 pm	MEETING	Wednesday	1:45 – 3:00 pm	MEETING			
Tuesday	9:00 – 10:30 am	Hosting: MH	FRESH LOOK TASK I					
·	11:00 - 12:30 pm	Hosting: CQI, CIC	Monday	3:00 – 5:00 pm	MEETING			
	1:45 — 5:00 pm	MEETING	<b>GOVERNANCE AND</b>	<b>OPERATIONS CO</b>	MMITTEE (GOC)			
Wednesday	9:00 – 10:30 am	Hosting: Sec, CBCC, SOA, FHIR	Wednesday	11:00 - 12:30 pm				
·	11:00 - 12:30 pm	Hosting: PHER, CIC	CC1 EDUCATION CE	·				
	1:45 — 5:00 pm	MEETING	GS1 EDUCATION SE	7:00 – 7:45 am	Fundamentals and latest updates			
Thursday	9:00 - 5:00 pm	MEETING	Tuesday	7.00 — 7.43 aiii	regarding product identification			
<b>ELECTRONIC SERVI</b>	CEC (EC)				(Identification management, UDI,			
Thursday	9:00 – 12:30 pm	MEETING			serialization, etc.)			
·	•	MEETING	<b>HEALTH CARE DEVI</b>	CFS (Dev)				
EMERGENCY CARE (	• •	MEETING	Monday	1:45 — 5:00 pm	MEETING			
Wednesday	1:45 — 5:00 pm	MEETING	Tuesday	9:00 – 3:00 pm	MEETING			
Thursday	9:00 – 10:30 am	MEETING	,	3:30 – 5:00 pm	Hosting: GAS			
	11:00 – 12:30 pm		Wednesday	9:00 – 3:00 pm	MEETING			
Fuida	1:45 – 5:00 pm	MEETING		3:30 – 5:00 pm	Hosting: FHIR			
Friday	9:00 — 12:30 pm	MEETING		2.22 3.00 pm				
<b>FAST HEALTHCARE</b>	INTEROPERABILI	TY RESOURCES (FHIR)	Thursday	9:00 – 3:00 pm	MEETING			
Sunday	12:30 — 1:30 pm		······································	3:30 – 5:00 pm	Hosting: MH			
		Luncheon/Meeting	Friday	9:00 – 3:00 pm	MEETING			
Monday	1:45 — 5:00 pm	Joint w/ITS, MnM	,	- · · · · · · · · · · · · · · · · · · ·				

HEALTH PROFESSIO	NALS: GET ENGA	GED WITH HL7 STANDARDS	NURSES BREAKFAST	//MEETING	
		AMBASSADOR PROGRAM	Tuesday	7:00 – 8:00 am	MEETING
Monday	1:45 - 5:00 pm	Health Professionals, Get	OPEN SPACE' MEET	INCC	
·	•	Engaged with HL7 Standards	Monday — Tuesday	6:00 – 8:00 pm	Open Forums — Self-organized
		Development & Implementation	Monday Tuesday	0.00 0.00 pm	- Sign up sheet will be on
		Ambassador Program			bulletin board
IMAGING INTEGRA	TION (II)		ADDEDC 9 ADCEDVA	TIONE (OOO)	
Wednesday	9:00 – 10:30 am	Joint w/0&0, AP, Clin Gen	ORDERS & OBSERVA Monday	1:45 – 5:00 pm	MEETING
,	11:00 – 5:00 pm	MEETING	Tuesday	9:00 – 10:30 am	MEETING
Thursday	9:00 – 12:30 pm		lucsuay	11:00 – 10:30 am	
,	1:45 — 5:00 pm	Hosting: DICOM WG27, FHIR		1:45 – 5:00 pm	MEETING
IMPLEMENTABLE T	ECHNOLOGY CDE	CIEICATION (ITC)	Wednesday	9:00 – 10:30 am	Hosting: II, AP, Clin Gen
Monday	1:45 – 5:00 pm	Hosting: MnM, FHIR	Wednesday	11:00 – 12:30 pm	-
Tuesday	9:00 – 10:30 am	Joint w/SOA		1:45 – 5:00 pm	MEETING
Tuesuay	11:00 – 10:30 am		Thursday	9:00 – 10:30 am	Hosting: CDS
Wednesday	9:00 – 12:30 pm	MEETING	,	11:00 – 12:30 pm	_
Thursday	9:00 – 5:00 pm	MEETING		1:45 – 5:00 pm	Joint w/CS
·	•		Friday	9:00 – 10:30 am	MEETING
INFRASTRUCTURE	•		•		
Tuesday	9:00 — 10:30 am	MEETING			NTATION/INTRODUCTION ORIENTATION/INTRODUCTION
	11:00 — 12:30 pm	-	Sunday	5:00 – 6:00 pm	UNIEW IATION/ INTRODUCTION
	1:45 – 3:00 pm	Hosting: CGIT	PATIENT ADMINIST	• •	
Wadaaday	3:30 – 5:00 pm	Hosting: FHIR	Monday	1:45 — 5:00 pm	MEETING
Wednesday	3:30 – 5:00 pm	Hosting: Voc	Tuesday	9:00 – 5:00 pm	MEETING
INTERNATIONAL CO	OUNCIL MEETING		Wednesday	9:00 – 10:30 am	MEETING
Sunday	9:00 – 3:00 pm	MEETING		11:00 — 12:30 pm	-
	12:30 — 1:30 pm	Lunch		1:45 – 5:00 pm	MEETING
Thursday	12:30 – 5:00 pm	Affiliate Chair or their Designated	Thursday	9:00 – 10:30 am	Hosting: PHER
		Rep Luncheon/Meeting		11:00 – 5:00 pm	MEETING
<b>INTERNATIONAL M</b>	<b>ENTORING COMM</b>	IITTEE (IMC)	PATIENT CARE (PC)		
Sunday	3:30 - 5:00 pm	MEETING	Monday	1:45 – 5:00 pm	MEETING
Monday	3:30 - 5:00 pm	Joint w/Education	Tuesday	9:00 - 5:00 pm	MEETING
MARKETING COUN	cii		Wednesday	9:00 – 10:30 am	MEETING
Will not meet in Septe				11:00 – 12:30 pm	Joint w/PA
·				1:45 – 5:00 pm	MEETING
MOBILE HEALTH (N	•	laint/CUD	Thursday	9:00 – 10:30 am	
Tuesday	9:00 – 10:30 am	Joint w/EHR		•	Hosting: SD, Templates
Wednesday	9:00 – 5:00 pm	MEETING	Friday	9:00 – 12:30 pm	Joint w/Templates, Tooling
Thursday	3:30 – 5:00 pm	Joint w/Dev	PHARMACY (Pharm	)	
<b>MODELING &amp; METH</b>	•		Monday	1:45 — 5:00 pm	MEETING
Sunday	1:45 — 3:00 pm	MEETING	Tuesday	9:00 – 10:30 am	MEETING
Monday	1:45 — 5:00 pm	Joint w/ITS, FHIR	,	11:00 - 12:30 pm	Joint w/0&0
Tuesday	9:00 — 12:30 pm	MEETING		1:45 – 3:00 pm	Hosting: FHIR
Wednesday	9:00 – 12:30 pm	<del>-</del>		3:30 – 5:00 pm	MEETING
	1:45 – 3:00 pm	Hosting: FHIR	Wednesday	9:00 - 10:30 am	MEETING
Thursday	9:00 — 12:30 pm		•	1:45 – 5:00 pm	MEETING
F · I	5:30 — 8:00 pm	FACILITATORS' ROUNDTABLE	Thursday	9:00 – 5:00 pm	MEETING
Friday	11:00 — 12:30 pm	Hosting: FHIR	Friday	9:00 – 12:30 pm	MEETING
<b>NETWORKING RECI</b>	PTION		PHYSICIANS BREAK	FAST/MFFTING	
Wednesday	5:15 – 7:00 pm	RECEPTION	Wednesday	7:00 — 8:00 am	MEETING
	•		Treameduly	7.00 0.00 am	MELINIG

DI FILADVIAFETING			CERUICEC ARIENTER	ADCILITECTURE	(604)
PLENARY MEETING	0.20 42.20	MEETING	SERVICES ORIENTED		
Monday	8:30 – 12:30 pm	MEETING	Monday	1:45 — 5:00 pm	MEETING
<b>POLICY ADVISORY C</b>	OMMITTEE		Tuesday	9:00 – 10:30 am	Hosting: ITS
Wednesday	9:00 – 10:30 am	MEETING		1:45 — 5:00 pm	MEETING
•			Wednesday	9:00 – 10:30 am	Joint w/ EHR, Sec, CBCC, FHIR
PROCESS IMPROVEN				11:00 – 5:00 pm	MEETING
Thursday	9:00 — 10:30 am	MEETING	Thursday	11:00 – 5:00 pm	MEETING
<b>PRODUCT LINE ARCH</b>	HITECTURE PROG	iram	STEERING DIVISIONS	ς	
Wednesday	1:45 – 3:00 pm	MEETING	Monday	7:00 – 8:30 pm	Domain Experts
PROJECT SERVICES	•		Monday	7.00 0.50 pm	Foundation & Technology
	1:45 – 3:00 pm	MEETING			Structure & Semantic Design
Thursday	1.45 – 3.00 pm	MEETING			Technical & Support Services
<b>PUBLIC HEALTH &amp; E</b>	MERGENCY RESP	PONSE (PHER)	STRUCTURED DOCU	MENTC (CD)	
Monday	1:45 – 3:00 pm	MEETING	Monday	1:45 – 5:00 pm	MEETING
Tuesday	9:00 – 3:00 pm	MEETING	Tuesday	9:00 – 5:00 pm	MEETING
	3:30 – 5:00 pm	Hosting: FHIR	Wednesday	9:00 – 3:00 piii 9:00 – 10:30 am	
Wednesday	11:00 - 12:30 pm	Joint w/EHR, CIC	weullesuay		Hosting: CDS MEETING
	1:45 - 5:00 pm	MEETING		•	
Thursday	9:00 - 10:30 am	Joint w/PA		1:45 – 3:00 pm	Joint w/CQI, CDS
·	11:00 - 12:30 pm	Hosting: EC	TI 1	3:30 – 5:00 pm	MEETING
	1:45 — 5:00 pm	MEETING	Thursday	9:00 – 10:30 am	MEETING
DUDLICUING	,			•	Joint w/PC, Templates
PUBLISHING	0.00 10.20	V2 MEETING		1:45 – 3:00 pm	Hosting: FHIR
Wednesday	9:00 – 10:30 am			3:30 – 5:00 pm	MEETING
	1:45 – 3:00 pm	V2 – Hosting: Voc	Friday	9:00 – 12:30 pm	MEETING
Full days	1:45 – 3:00 pm	V3 – MEETING	TSC MEETINGS		
Friday	11:00 – 12:30 pm	V3 — MEETING	Saturday	9:00 - 5:00 pm	MEETING
<b>REGULATED CLINICAL I</b>	RESEARCH INFORM	MATION MANAGEMENT (RCRIM)	Sunday	5:15 – 6:30 pm	MEETING
Monday	3:30 - 5:00 pm	MEETING	Wednesday	12:30 – 1:30 pm	Luncheon/Meeting
Tuesday	9:00 - 12:30 pm	MEETING	·	•	
Wednesday	9:00 – 12:30 pm	MEETING	TEMPLATES	1.45 2.00	MEETING
•	1:45 — 5:00 pm	Joint w/CIC	Monday	1:45 – 3:00 pm	MEETING
Thursday	9:00 – 10:30 am	MEETING	Wednesday	•	Joint w/CGIT, FHIR
•	3:30 – 5:00 pm	MEETING	Thursday	11:00 – 12:30 pm	
DIM DACED ADDITION	•	FILDE (DIAADAA)	Friday	9:00 – 12:30 pm	Hosting: PC, Tooling
RIM BASED APPLICA		MEETING	<b>TOOLING</b>		
Monday	1:45 – 3:00 pm		Tuesday	9:00 - 12:30 pm	MEETING
Tuesday	7:00 – 9:00 pm	Joint w/Tooling		7:00 – 9:00 pm	Hosting: RIMBAA
Wednesday	3:30 – 5:00 pm	MEETING	Thursday	9:00 – 12:30 pm	MEETING
Thursday	1:45 – 3:00 pm	MEETING	Friday	9:00 – 12:30 pm	Joint w/Templates, PC
SAIF ARCHITECTURE	PROGRAM		VOCADIII ADV (VOC)		·
Wednesday	3:30 - 5:00 pm	MEETING	VOCABULARY (VOC) Sunday — Monday	1:45 – 5:00 pm	MEETING
SECURITY (SEC)			•	•	MEETING
Monday	1:45 – 5:00 pm	Joint w/CBCC	Tuesday	9:00 – 5:00 pm	
Tuesday	9:00 – 5:00 pm	MEETING	Wednesday	9:00 – 12:30 pm	Joint w/MnM, FHIR
Wednesday	9:00 – 3:00 pm	Joint w/EHR, CBCC, SOA, FHIR		1:45 – 3:00 pm	Joint w/V2 Publishing
rreunesday	11:00 – 10:30 am		Thursday	3:30 – 5:00 pm	Joint w/lnM
	1:45 – 5:00 pm	MEETING	Thursday	9:00 – 10:30 am	Hosting: CGIT
Thursday	9:00 – 5:00 pm	MEETING	Fui da	11:00 – 5:00 pm	MEETING
mursuay	7.00 – 3.00 pili	IVILLIIIVU	Friday	9:00 – 12:30 pm	MILLIING

Meeting times and locations are subject to change.

NOTE: In compliance with our status as an ANSI-accredited standards development organization, anyone may register to attend HL7 meetings.

# "EARLY BIRD" RATE DEADLINE

Advance meeting registration, including payment, is required by August 30, 2013 to receive the discounted rates. Otherwise the full fee structure will apply. Consult the registration form (pages 25-26) for a schedule of meeting fees.

# TO REGISTER

Please complete the registration form on pages 25-26 and mail it (along with a check payable to Health Level Seven International in U.S. funds ONLY) to:

Health Level Seven International 3300 Washtenaw Ave., Suite #227 Ann Arbor, MI 48104 USA

If paying by credit card, the registration may be faxed to: +1 (734) 677-6622

Online registration is also available via our website (www.HL7. org). For your convenience, you can pay via a credit card directly from the site or print the registration form and mail it along with payment. Advance registrations MUST include payment. No balance dues will be accepted and registrations received without payment will not be processed until the time that payment is received. Registrations received with payment by the Early Bird deadline will receive the Early Bird discount. Registrations where payment is not received by then will require the full registration fee. Advance registrations will be accepted until September 6. After that time, registrations can only be made on-site. All on-site registrations require payment in full at the time of registration.

# **CANCELLATION POLICY**

Prepaid registrants who cancel prior to the Early Bird deadline will receive a full refund minus a \$50 processing fee. After that time, no refunds will be made.

# TUTORIAL CANCELLATION

The tutorial schedule is subject to change. A tutorial may be cancelled if expected registration numbers are not met. If a tutorial is cancelled, pre-registrants will be notified via email. The registrant may select another tutorial or a full refund of the tutorial fee will be made. However, meeting registration fees will not be refunded.

Meeting registrants are permitted to switch their tutorial selections up until the tutorial materials are emailed to them. After that point, no exchanges will be allowed.

### DRESS

The dress code is casual for all HL7 functions. Layered clothing is advised, as room temperatures vary.

# **MEALS**

Continental breakfasts, refreshment breaks and lunches are included in the meeting registration fee and will be provided for all registered attendees Monday through Friday. Special meals are available upon request. You must register for each day's lunch on your registration form in order to receive lunch tickets.

# HOTEL INFORMATION

HL7's September Plenary & Working Group Meeting will be held at The Hyatt Regency Cambridge.

The Hyatt Regency Cambridge

575 Memorial Drive, Cambridge, Massachusetts, 02139-4896

Phone Direct: +1 (617) 492-1234 Hotel Fax: +1 (617) 491-6906 Reservations: +1 (888) 421-1442

Website: www.cambridge.hyatt.com/hyatt/hotels/

To reserve your room, the hotel has set up a special website registration process just for HL7 attendees. HL7 attendees should log on to https://resweb.passkey.com/go/healthlevelsevenint and simply follow the reservation instructions. For phone reservations call +1-888-421-1442. Be sure to mention Health Level Seven (HL7) to receive the discounted room rate of \$199 per night for single or double occupancy. This rate applies to both regular and government room reservations. Remember, space is limited, so reserve your room early. Discounted room rates are available only on reservations made before August 30, 2013. Room rates are subject to all applicable state and local taxes in effect at time of check in.

If you need to cancel your room reservation, please do so 72 hours (three days) prior to your arrival date, and obtain a cancellation number. If you cancel within three days you will be charged one night reservation fee.

# **GROUND TRANSPORTATION & PARKING**

Taxi fare from the Logan International Airport to the hotel is approximately \$35. There is an airport subway that makes seven stops along the way, and drops you 1.5 miles from the hotel. There is an above ground BU Central Green Line (seven stops), and an Underground Harvard Square or Kendall Square Red Line Subway that costs \$2.50. Please visit www.mbta.com for a detailed rail map. Amtrak (Bay Station) is located 3 miles from the hotel. Amtrak also stops at South Station in the Financial District, which is approximately 5 miles from the hotel.

# **Parking**

The special discounted group rate for overnight self-parking at the hotel is \$20 per night with in and out privileges.

# PLEASE BOOK YOUR ROOM AT THE HL7 MEETING HOTEL

HL7 urges all meeting attendees to secure their hotel reservation at the HL7 Working Group Meeting Host Hotel. This hotel has been contracted to provide the best rate and service to our HL7 meeting attendees, including the vast number of meeting rooms that HL7 uses. In order to secure the required meeting space, HL7 has a contractual obligation to fill our sleeping room blocks. If you make reservations at a different hotel, HL7 risks falling short on its obligation, which translates in HL7 paying additional costs (penalties) to the hotel. Should this occur, HL7 will likely be forced to pass these costs onto our attendees through increased meeting registration fees. Therefore, to help avoid such fee increases, we urge you to book your room at our host hotel. Thank you!

# MEETING REGISTRATION FORM

# 1. Contact Information

Ann Arbor, MI 48104 USA

End of day on August 30, 2013 is the deadline for Early Bird fees and hotel registrations. All advance registrations must be received by end of day on September 6, 2013. After this date, registrations can ONLY be made on-site with payment.

First Name		Last Nam	e	Title/Posit	ion		Orga	nization
Address				City		State	Zip	
Country		Telephon	e			Fax		
Email				Nickname	e for Badge			
2. Survey	& Information							
I am a/an:	☐ Affiliate Chair ☐ Facilitator — MnN ☐ Facilitator — Publi	1 🔲 Faci	litator — Vocabulary litator — Steering Divis t-Time WGM Attendee	ion 🔲 I	HL7 Board Me HL7 Work Gro Past Board Cha	up Co-Chair	☐ Tutorial Spe ☐ Plenary Spe ☐ HL7 Fellow	aker
I have been a	member of HL7 for :	0-4 years	5-9 years	□ 10-14 yea	ars $\Box$	] 15-19 years	□20+ y	vears
Primary emp	ployment type:	☐ Academia ☐ Payer	☐ Consultant ☐ Pharmacy	☐ Governn ☐ Provider		Healthcare P	rofessional	r:
BioPharma As		E, CEN/TC 251, CDI	SC, CHCF, Cientis Techn	ologies, Inc., C	LSI, CHA, DIC			A, ASC-X12, AHIP, ASTM, IHTSDO, LOINC, NCPDP,
☐ I am a full tin	ne student. University attend	ling:			Stuc	lent #		
Meal Require	ements:	Diabetic	☐ Regular ☐ Ve	getarian	Other:			
registrat Cancella date, no	te for Discounted Rates ions where payment is re ation/Refund Policy: Pr refunds will be given for tt Policy: Registrations for	eceived after this da repaid registrants w ANY reason.	nte. Tho cancel prior to the E	arly Bird deac				• •
You must regis	ration and Tutor ter for either the ALL WEEI EE in addition to any tutori	COPTION		Membe Before 8/30	ers After 8/30	Non-Mem Before 8/30	bers After 8/30	Amount Due
Sunday Mee This fee must be in addition to the Mo	eting Fee: ncluded if you will be attending onday-Friday option fee. This fe	any of the Sunday meetire does not apply to those	attending the First-	□\$50	□\$50	□\$50	□\$50	\$
<b>Monday – Fr</b> Please register me	Prientation or the Organization riday Option: e for the entire week: Please no	te that the Monday-Frid	lay Option does not	\$770	\$1,045	\$1,045	\$1,350	\$
Per Day Fees Please register me	f tutorials. Please register separa  S:  for the following days. Please n  grately for any tutorials you woul	ote that daily fees do not i		\$220/day	\$290/day	\$290/day	\$360/day	\$
	day 🗆 Tuesday 🗀		Thursday 🗆 Friday		days attending	x fee:		\$
FHIR Connec	ctathon:			□\$50	\$50	\$50	\$50	\$
HL7 Fellows	Dinner/Meeting:			\$45	\$45			\$
He	ail/Overnight alth Level Seven Intern 00 Washtenaw Ave., Su		x (734) 677-6622	Online www.HI	_7.org			

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# MEETING REGISTRATION FORM

Tutorial Fees: Please register me for the following tutorials: Please note that you must also register for the days you are taking tutorials.

☐ Track 5 – Information Forums: How to Design and Deliver an HL7 Tutorial – FREE TUTORIA  MONDAY	Memk	•	Non-Me		
Morning Sessions	Before 8/30	After 8/30	Before 8/30	After 8/30	AMOUNT DUI
Track 5 – Information Forums: First Time Attendees' Orientation – FREE TUTORIAL (F4) —					
Afternoon Sessions	nust sign up to ut	seria tino tatoriai (i	rease effect the se	74,	
Track 3 – Special Topics: Introduction to HL7 FHIR (M1)	□\$110	\$215	\$215	\$325	\$
Track 3 – Special Topics: Standards for Interoperability (M2)	<u></u> \$110	Section 1.5 \$215	\$215	\$325	\$
Track 4 – Meaningful Use: Quality Reporting Document Architecture (M3)	□\$110	\$215	\$215	\$325	\$
TUESDAY  Morning Sessions					
Track 1 – Version 2.x: Introduction to Version 2, Part 1: Control/Patient Administration (T4)	☐\$110	September 1.5 \$215	<u></u> \$215	\$325	\$
Track 2 – Version 3 and CDA: Introduction to Version 3, Part 1: Foundations (T5)	☐\$110	Section 1.5 \$215	<u></u> \$215	\$325	\$
Track 3 – Special Topics: FHIR for Software Developers (T6)  Afternoon Sessions	□\$110 □	<b>□</b> \$215	<b>□</b> \$215	☐\$325	\$
Track 1 – Version 2.x: Introduction to Version 2, Part 2: Orders and Observations (T7)	☐ \$110	<b>□</b> \$215	<b>□</b> \$215	\$325	\$
Track 2 – Version 3 and CDA: Introduction to Version 3, Part 2: Messaging (T8)	☐\$110	\$215	☐ \$215	\$325	\$
Track 4 – Meaningful Use: Immunization Messaging Using HL7 Version 2.5.1 (T9)	<b>□</b> \$110	\$215	\$215	\$325	\$
WEDNESDAY  Morning Sessions	. (=)				
☐ Track 5 – Information Forums: How to Design and Deliver an HL7 Tutorial – FREE TUTORIA				_	<u></u>
Track 1 – Version 2.x: Version 2 Message Profiles and Conformance (W10)	□\$110 □\$110	□ \$215	□\$215 □\$215	□\$325 □\$325	\$
Track 2 – Version 3 and CDA: Introduction to Clinical Document Architecture (W11) Track 4 – Meaningful Use: Introduction to Integrating the Healthcare Enterprise (W12)	□\$110 □\$110	□ \$215 □ \$215	□ \$215 □ \$215	□ \$325 □ \$325	\$ \$
Afternoon Sessions		3213	□ \$213	3323	<b>→</b>
Track 1 – Version 2.x: Version 2.7 Control Specialist Certification Test Preparation (W13)	☐ \$110	\$215	\$215	\$325	\$
Track 2 – Version 3 and CDA: Version 3 XML ITS for CDA (W14)	□\$110	\$215	\$215	\$325	\$
Track 2 – Version 3 and CDA: Clinical Document Architecture – Advanced (W15)	□\$110	\$215	\$215	\$325	\$
HURSDAY					
Morning Sessions					
Track 5 – Information Forums: Newly Elected Co-Chair Training – FREE TUTORIAL (F6) – Min	ust sign up to atte	end this tutorial (Ple	ease check the box.	)	
Track 2 – Version 3 and CDA: CDA® Specialist Certification Test Preparation (TH16)	<b>□</b> \$110	☐ \$215	<u></u> \$215	□ \$325	\$
Track3 – Special Topics: Electronic Health Record System Functional Model (TH17)	□\$110	\$215	\$215	\$325	\$
Afternoon Sessions  Trade A Maninefulling Consolidated CDA (TH10)	□\$110	□\$215	□\$215	□\$325	ċ
Track 4 – Meaningful Use: Consolidated CDA (TH18)  Track 3 – Special Topics: TermInfo – Using Standard Terminologies (TH19)	□\$110 □\$110	□ \$215 □ \$215	□ \$215 □ \$215	□ \$325 □ \$325	\$ \$
Track 3 – special lopics: Terminto – Using Standard Terminologies (TH 19)  Track 4 – Meaningful Use: HL7 Standards for Meaningful Use (TH20)	□\$110 □\$110	□ \$215 □ \$215	□ \$215 □ \$215	□ \$325 □ \$325	\$ \$
Evening Sessions	<b>,</b> 110	ψΔ13	L 7213	4323	₹
Track 1 – Version 2.x: Version 2.7 Control Specialist Certification Test (TH21)	□\$199	□\$199	\$350	□\$350	\$
Track 2 – Version 3 and CDA: CDA Specialist Certification Test (TH22)	□\$199	□\$199	□\$350	\$350	\$
Track 2 – Version 3 and CDA: Version 3 RIM Certification Test (TH23)	\$199	\$199	\$350	\$350	\$
			Total A	mount Du	ıe \$
. Payment Information: Payment must be included in order to process	s your registra	ation. Method	of Payment (U	S Dollars, Dra	wn on US Bank On
Check (Please make payable to: Health Level Seven International) Credit	Card: Vis	a 🗌 Master C	Card 🗆 Ameri	can Express	Discover

Name on Card: Signature:

# UPCOMING WORKING GROUP MEETINGS













# UPCOMING CO-CHAIR ELECTIONS

The following HL7 work groups will conduct co-chair elections at this working group meeting.

Work Group	# being elected
Arden Syntax	1
Child Health	2
Clinical Decision Support	2
Clinical Quality Improvement	1
Conformance & Guidance for Implementation/Testing	3
Education	1
Emergency Care	1
Electronic Services	1
Imaging Integration	1

Work Group	# being elected
Implementable Technology Specifications	1
Mobile Health	1
Modeling & Methodology	1
Patient Care	1
Pharmacy	2
Public Health & Emergency Response	1
Publishing	3
Structured Documents	2



Cambridge is the spirited, slightly mischievous side of Boston, located just a bridge away on the other side of the Charles River. Packed with international flair and a youthful vitality, Cambridge is a city where counter culture lives, classic culture thrives, and multi-culture is a way of life.

Cambridge offers an exciting multicultural setting where visitors from around the world mingle in the shadow of two of the world's premier educational institutions: Harvard University and the Massachusetts Institute of Technology (MIT). Teeming with cafes, bookstores, and boutiques, Cambridge is often referred to as "Boston's Left Bank."

The Boston area's premier attraction, the Freedom Trail, is a walking tour through historic Boston, encompassing 16 of the most treasured sites in American history. The Freedom Trail is an actual red line painted on the sidewalks and streets of Boston. Besides guiding a visitor to the historic sites, the

Freedom Trail is an excellent way to tour the city as it winds through many diverse neighborhoods.

Visitors to the Boston area are never at a loss for something to do. Boston's many museums, concert halls, theaters, and nightclubs are always abuzz with activity and excitement. From the internationally acclaimed Museum of Fine Arts, the Museum of Science and the John F. Kennedy Library & Museum, to the famous Boston Symphony Orchestra and Boston Pops, to an abundant local and pre-Broadway theater scene, Boston's cultural and entertainment options are bountiful.

Known as the "Athens of America," Boston's renowned medical and educational institutions have helped to make it an international center of learning and intellectual activity. The metropolitan area's 35 hospitals and more than 60 colleges and universities are a vast resource.

Copy and photos courtesy of the Cambridge Office of Tourism and the Greater Boston Convention & Visitor's Bureau.