HL7 International

37th Annual Plenary & Working Group Meeting

Phoenix, Arizona

May 11-14, 2023

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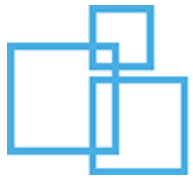

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Join us for the Networking Reception Wednesday at 5:15 PM in Phoenix C

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September WGM Attendee Survey

https://www.surveymonkey.com/r/Sept2023WGM

Fill out the survey to be eligible for one **$500 drawing** for HL7 Education and Virtual Events!

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Future HL7 Working Group Meetings

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

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

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

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Future Connectathons

HL7 FHIR Connectathon
Virtual Event
January 16-18, 2024

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

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

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Future DevDays

HL7® FHIR® DevDays 2024

Minneapolis, Minnesota

June 10-13, 2024

https://www.devdays.com/

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HL7 Certification

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

- VA eligible veterans can apply for reimbursement of HL7 certification exam fees!

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HL7 FHIR Exam Prep Course

- Prepare to take the HL7 FHIR R4 Proficiency Exam
- Practice by taking a 50-question simulated exam
- Next session:
  - Starts September 28
  - **Registration closes September 22!**

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HL7 FHIR Fundamentals

- For DEVELOPERS as a next step after FHIR Fundamentals
- Covers SMART on FHIR & CDS Hooks
- Next session:
  - Starts October 26

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HL7 Education on Demand

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

- Access **Education on Demand** from the “Training” menu on the HL7.org website

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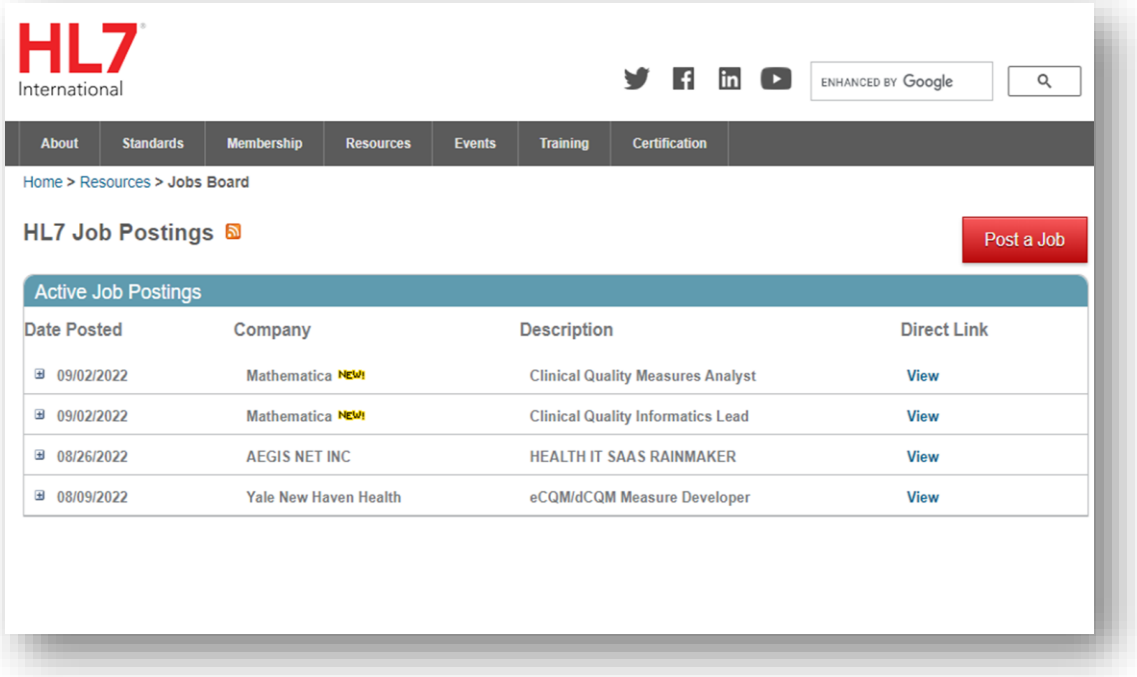
HL7 Jobs Board

- We are currently waiving fees to post open positions on the HL7 Jobs Board!
- Find the Jobs Board under the “Resources” tab



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Don’t miss the Cookie Break every day at 3:00 PM

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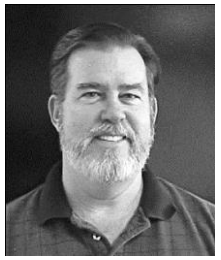
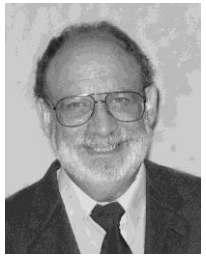


Chuck Meyer
2006-2007



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Wes Rishel
2002-2003

Stan Huff, MD
2000-2001

Woody Beeler, PhD
1998-1999

Ed Hammond, PhD
1996-1997

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Sue Campbell
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1989

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Daniel Vreeman
Chief Standards Development Officer (CSDO)

Viet Nguyen, MD
Chief Standards Implementation Officer (CSIO)

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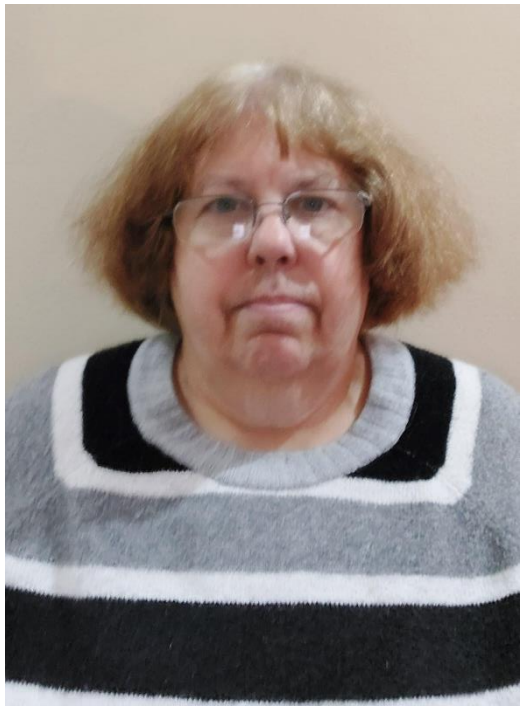

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Recognition of long time HL7 staff at HQ

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

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Dave Hamill (16)
Mary Ann Boyle (17)
Andrea Ribick (17)
Linda Jenkins (19)
Anne Wizauer (24)
Karen Van Hentenryck (27)
Mark McDougall (32)

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Ann Badame
Mary Lynn Bushman
Christopher Chute
Gora Datta
Tom de Jong
Helen Drijfhout-Wisse
Gerard Freriks
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WORK GROUP ACTIVITIES & UPDATES

2023 Sept 9-15 WGM Phoenix

Care Plan Update

Cochairs:

- Stephen Chu
- Emma Jones
- Jay Lyle

Other Contributors:

- PACIO project

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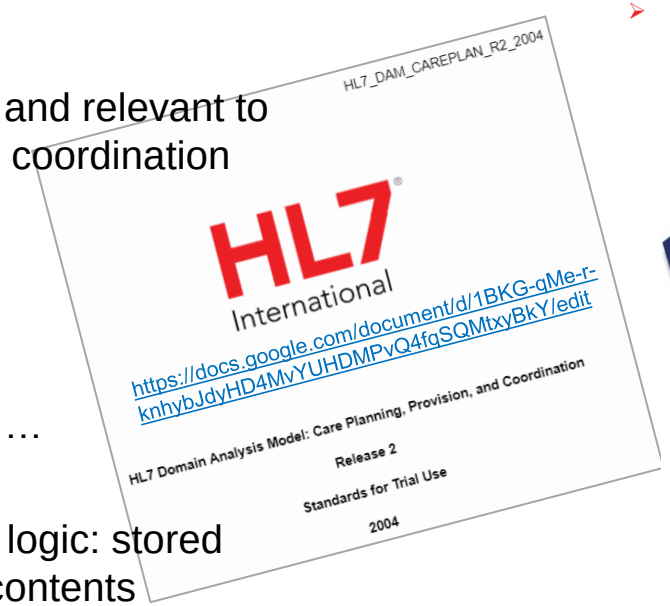
Patient Care Workgroup

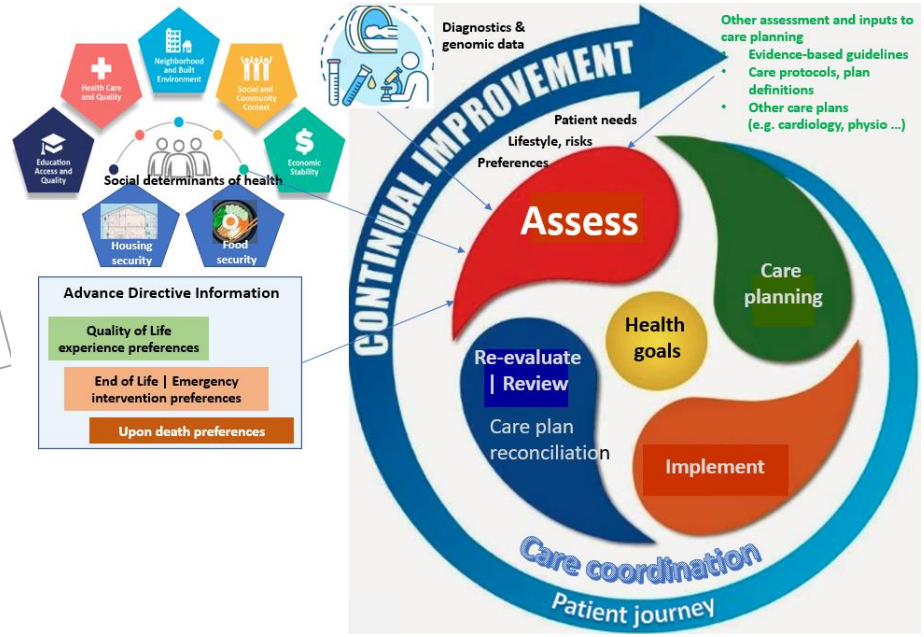
Care Plan topics

Informative ballot – tentative 2024

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



- **Care Plan DAM** 2.0 work in progress
  - **New focus** – will be on **phases of care**:
    - Care planning, care provision and care coordination processes



    - Logical information model and activity | interaction models to be included for each phase of care
    - Manifestations – what do care plans look like?

Care Plan topics: MCC eCare Plan

PCWG - MCC eCare Plan: https://confluence.hl7.org/display/PC/Multiple+Chronic+Conditions+%28MCC%29+eCare+Plan
Project Confluence: https://cmext.ahrq.gov/confluence/display/EC/
MCC eCare Plan FHIR IG: https://build.fhir.org/ig/HL7/fhir-us-mcc/

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

Accomplishments (May - Sept 2023)

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

Plans (Sept - Jan 2024)

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

Issues for Consideration

- Implementation and uptake.
- Long-term value set management.
- Ability of systems and/or applications to derive relationships between Problems/Interventions/Goals and Outcomes.

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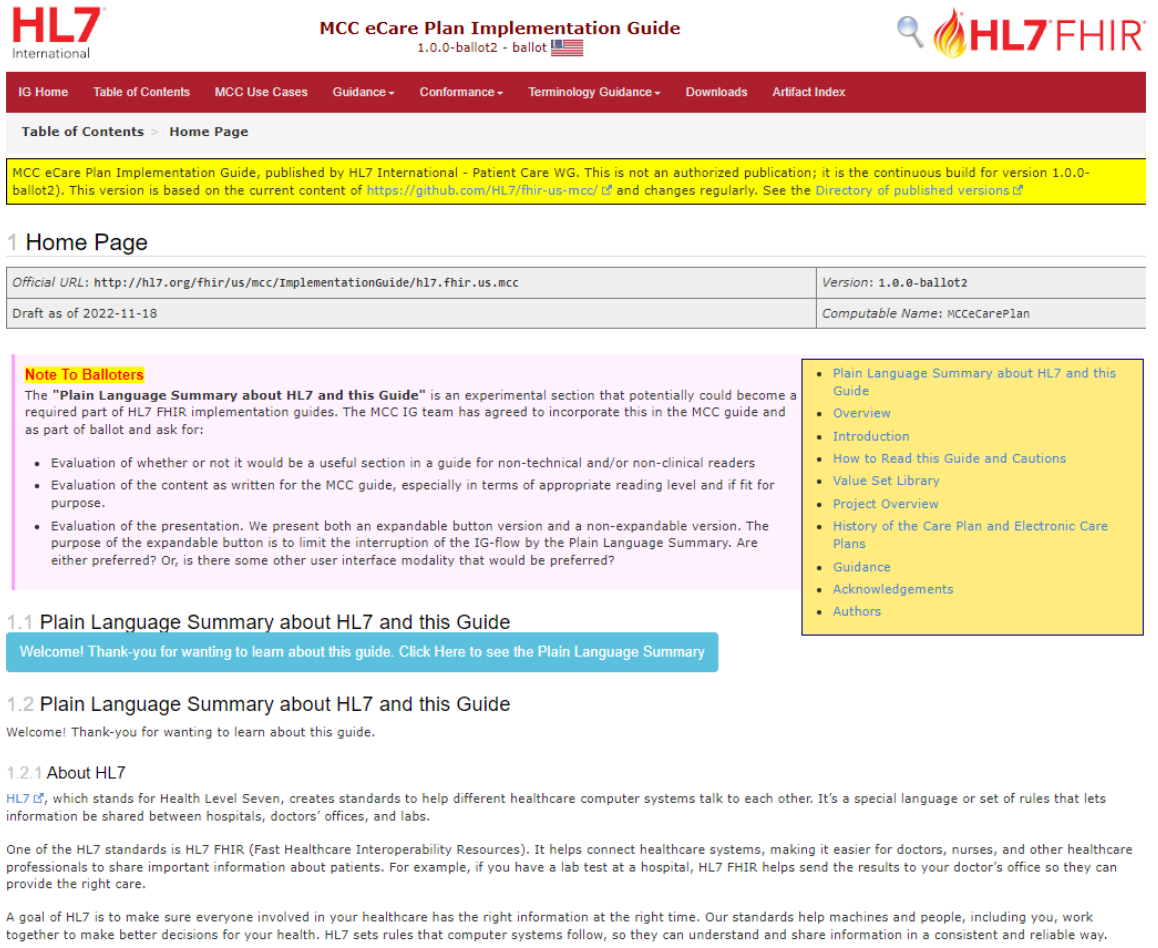
MCC eCare FHIR IG: Biggest Changes

- Updated and aligned to US Core 6.1.
- Addition of the Plain Language Summary.
- Replaced care plan resource “author” with “custodian.”
- Updated the Care Team to remove the specialized Caregiver. The Care Team now references caregiver considerations.
- Included guidance on transmitting aggregated information.
- Added clarification on describing how text outcomes can be represented codableConcept.text and how the patient/caregiver condition status is a self-assessment.



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MCC eCare FHIR IG: Ballot Tallies

- 40 Overall Votes (voters) (Mix of Government/University, Pharma, General Interest, Provider):
  - 38 Affirmative (above threshold for publication)
  - 2 Negative
- Ballot Dashboard
  - 32 Actual Comments
    - Plain Language
    - Care Team clarifications
    - Tech Edits
    - Value set application questions/suggestions
    - Heath Concern clarification

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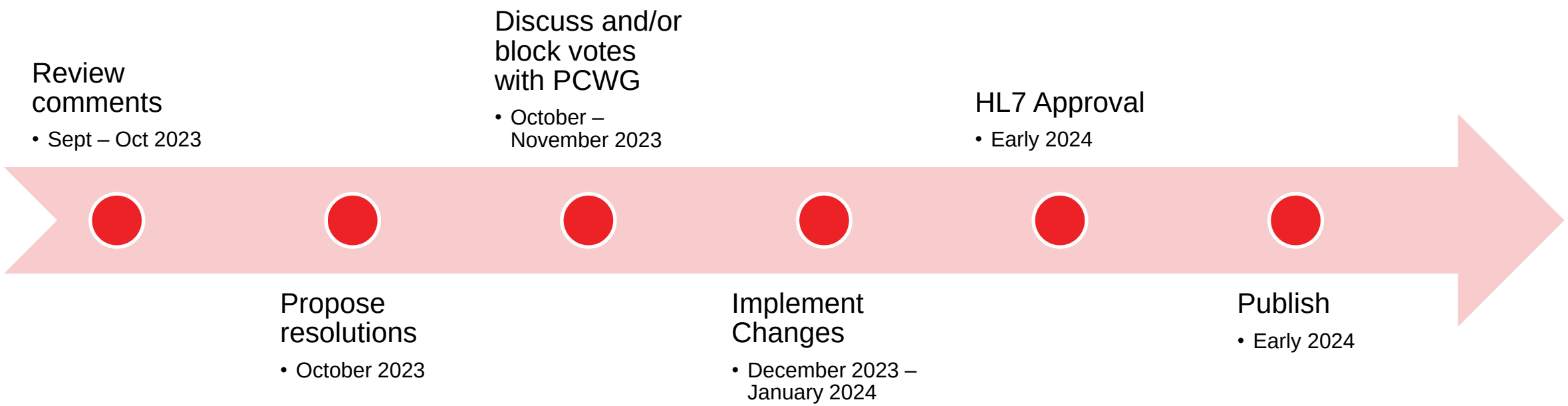
MCC eCare FHIR IG: Next Steps



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PCWG sponsored projects

PACIO

Personal Functioning and Engagement

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

Advanced Directive Interoperability (ADI)

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

Transitions of Care (TOC)

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

Re-Assessment Timepoints

- Divides long-term care encounters into smaller timepoints for easier access
- Published September 2022 as an HL7 Standard for Trial Use 1 implementation guide
- Pursuing potential pilots

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In collaboration with LHS

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

- Patient Centred Care team
- Ongoing work
  - Patient-centered Care Team DAM update – for 2024 ballot
  - Focus:
    - Definitional → Proposed → Actual Care Team: characteristics and application
      - https://confluence.hl7.org/display/LHS/Definitional%2C+Proposed+and+Actual+Care+Team+-+Use+Case+and+Scenarios
    - Use cases and care scenarios to inform transition from definitional → proposed → actual care team
    - Care team member roles and role status: temporal context and care setting context
    - How to manage unmet care team member roles
    - Information access by multi-organisation, multi-disciplinary care team and consent requirements
- Other related work:
  - Updates to FHIR Care Team resource structure and value sets
  - Review relationship of Human & Social Services Directory and patient-centered care team

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Ongoing PCWG project conference calls

- Your contributions/inputs and support are critical to the success of all PCWG projects
  - PCWG confluence page: https://confluence.hl7.org/display/PC
  - https://confluence.hl7.org/display/PC/Care+Plan+DAM+2.0+-+Project+Index+Page
- **Please join us** at the weekly conference calls:
  - Care Plan DAM 2.0 and Multiple chronic condition eCare Plan: **Wednesday** 5:00pm US Eastern
  - Online Meeting Link: https://zoom.us/j/5328571160
    Online Meeting ID: 532 857 1160

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Opportunities for CDA Subject Matter Experts

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

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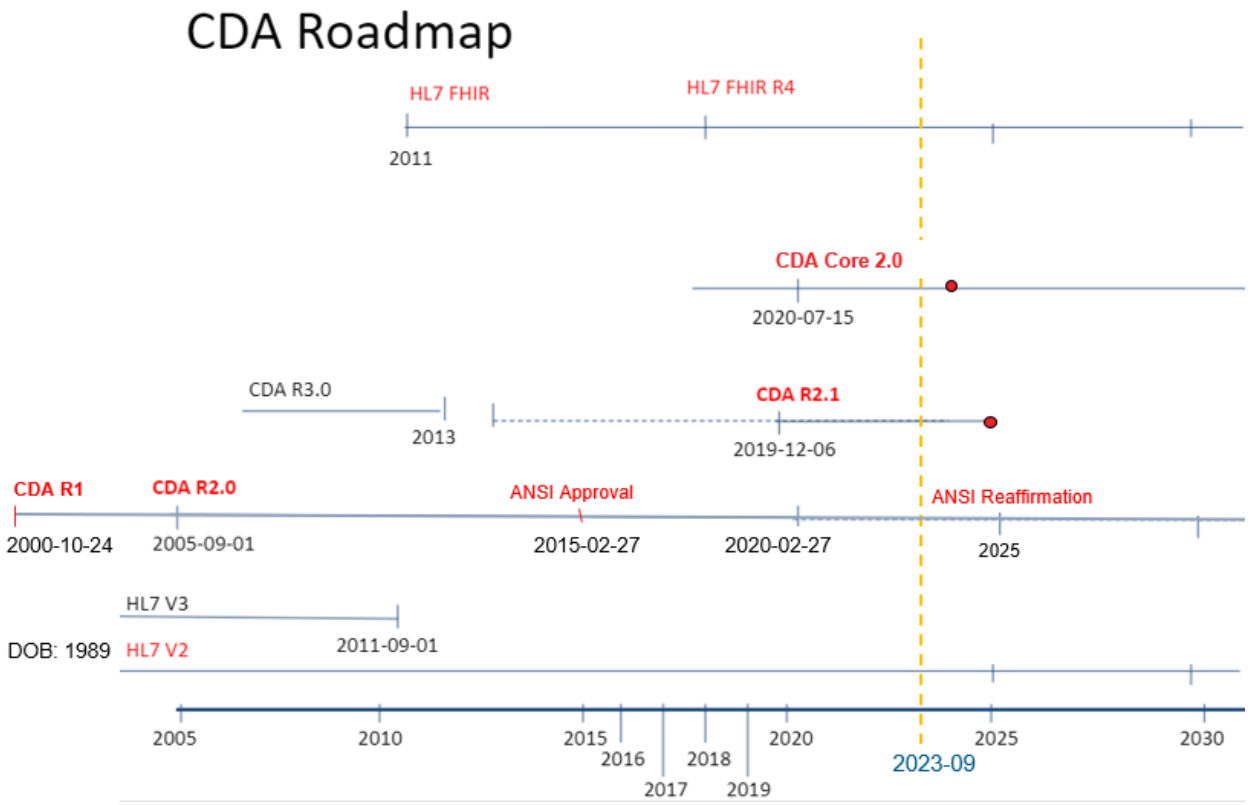
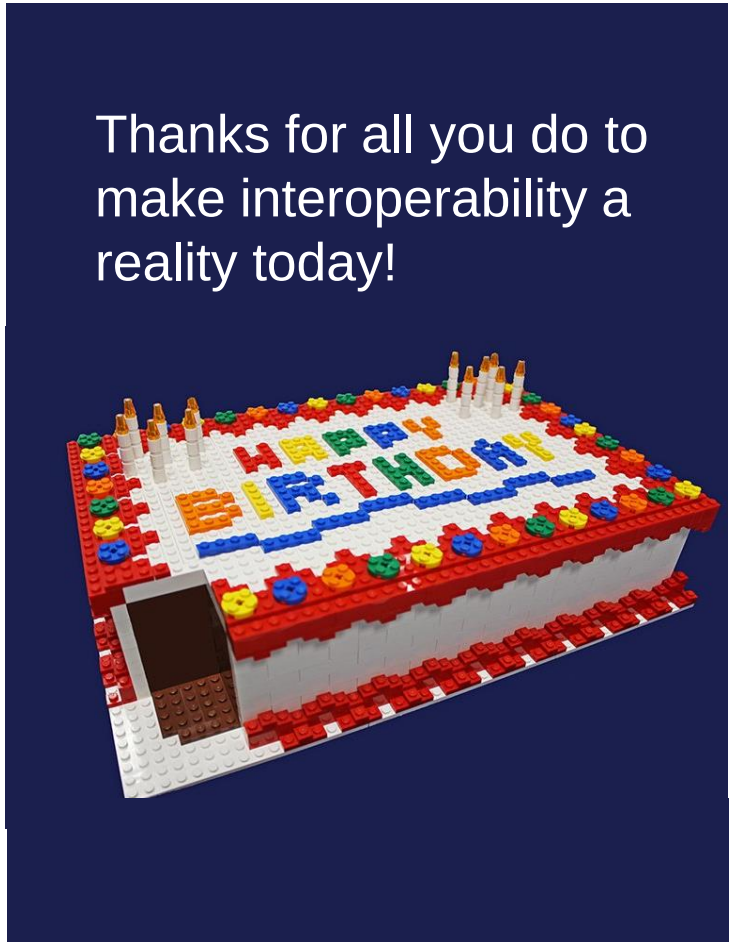
CDA turns 23 in 2023!

CDA DOB: 10/24/2000





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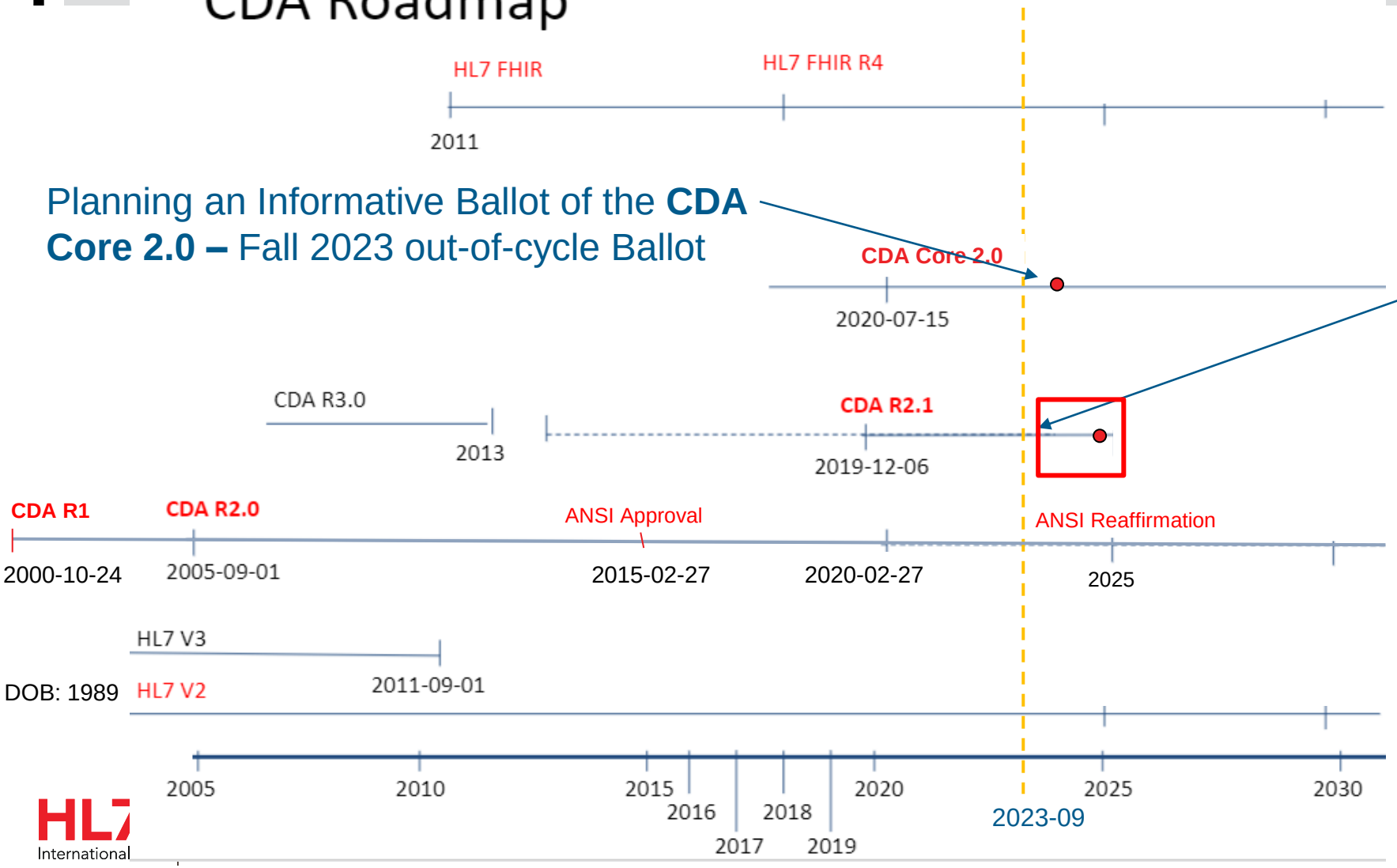
Product Lifecycle Management

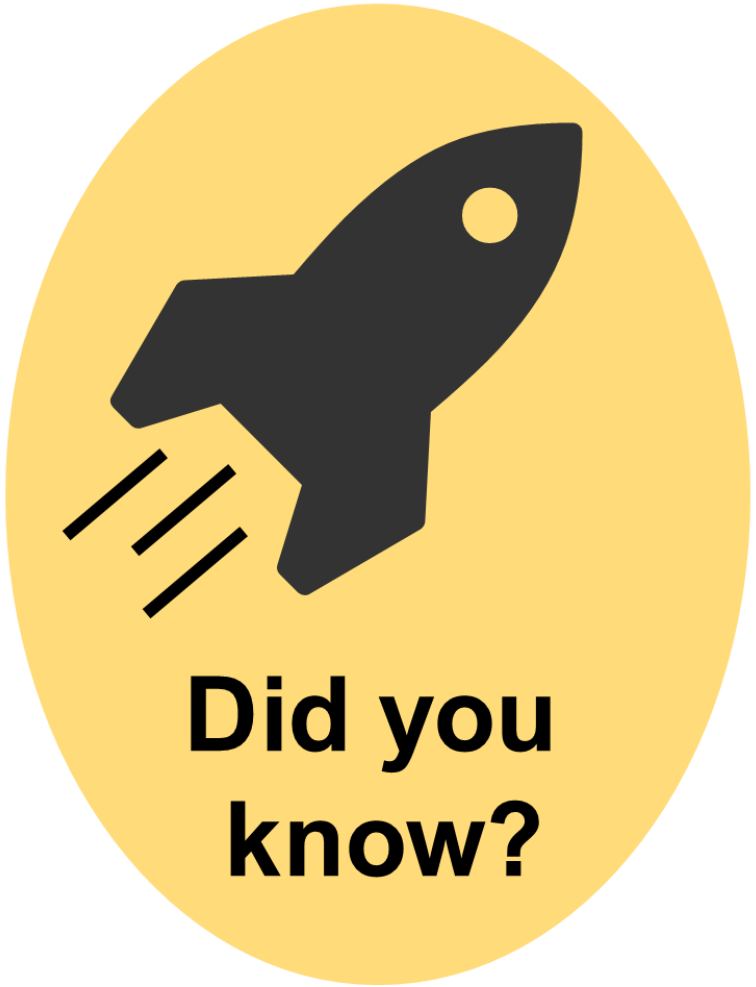


On May 11, 2023, the CDA Community decided to withdraw CDA R2.1.

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

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

CDA Core R2.0 = A FHIR Logical Model for CDA R2.0



HL7 CDA®

CDA means
Clinical Document Architecture

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

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

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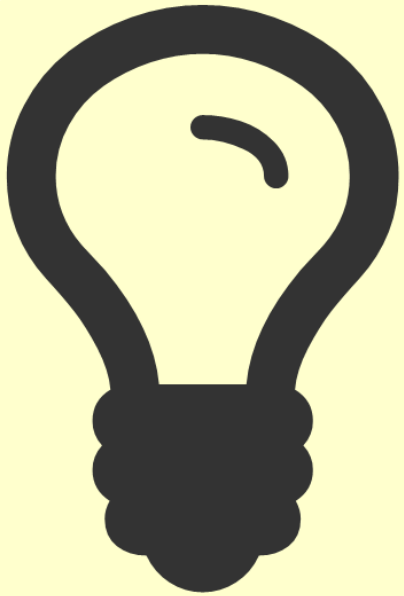

Did you know?

CDA

Clinical Documents

Over 4 Billion Served Annually*

2022

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

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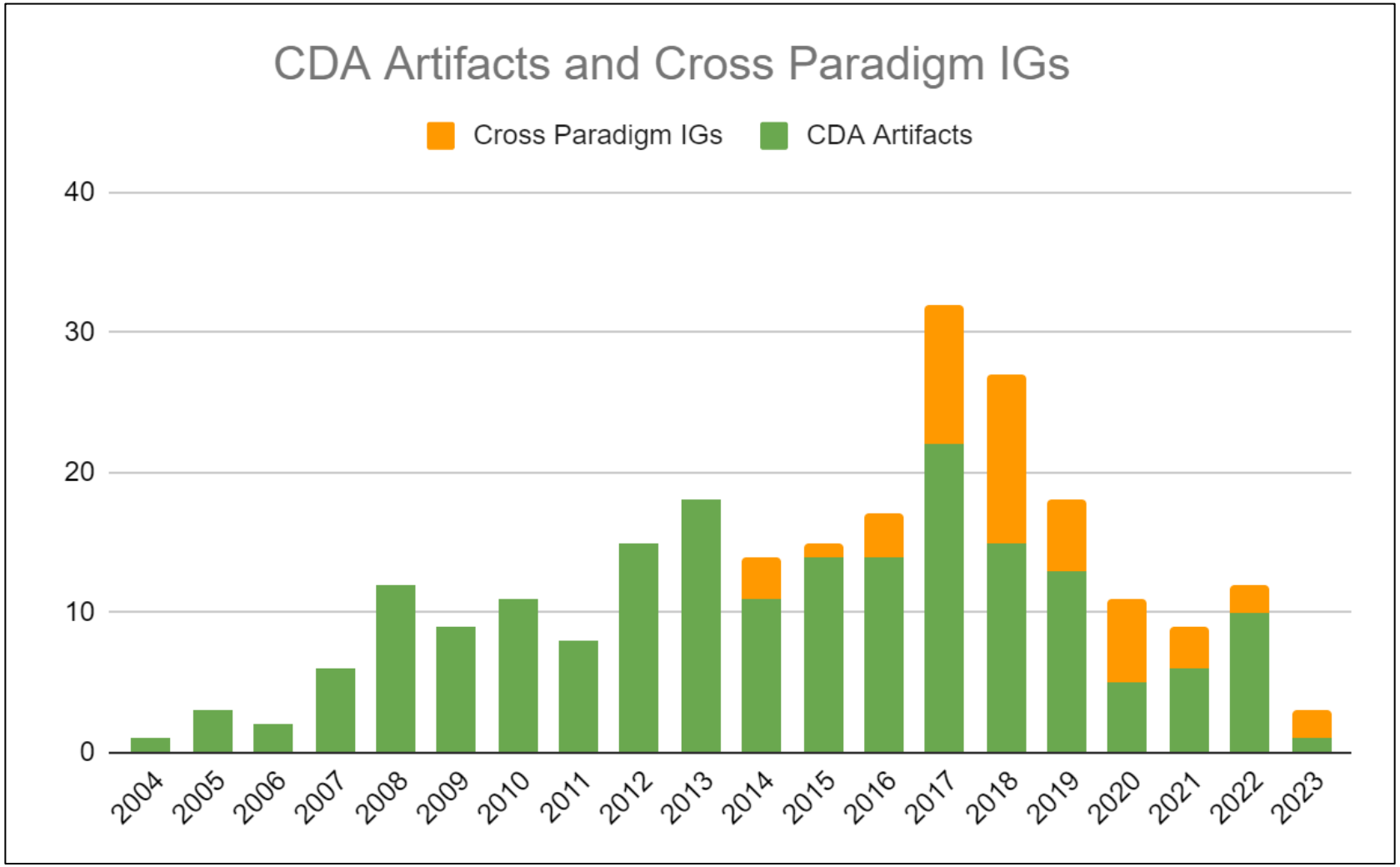
CDA Artifact Ballot Activity



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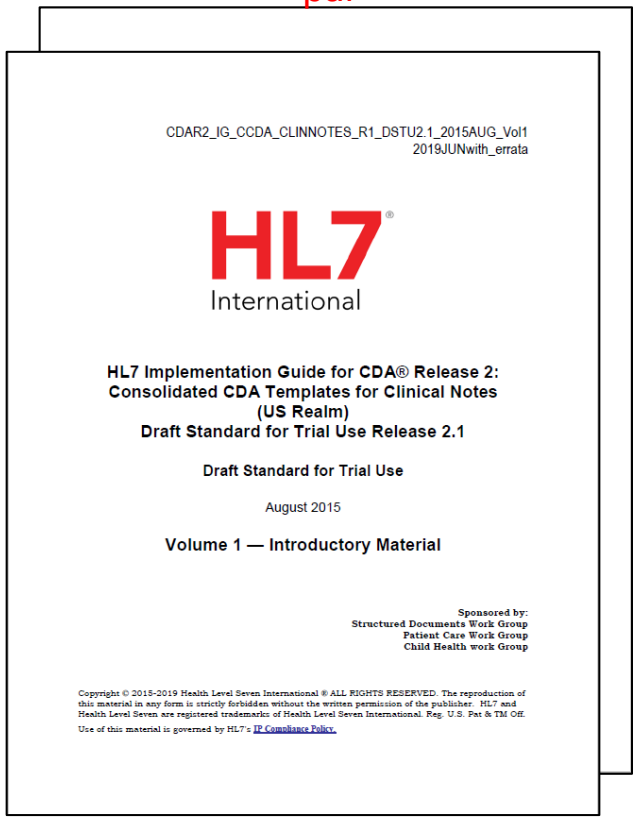
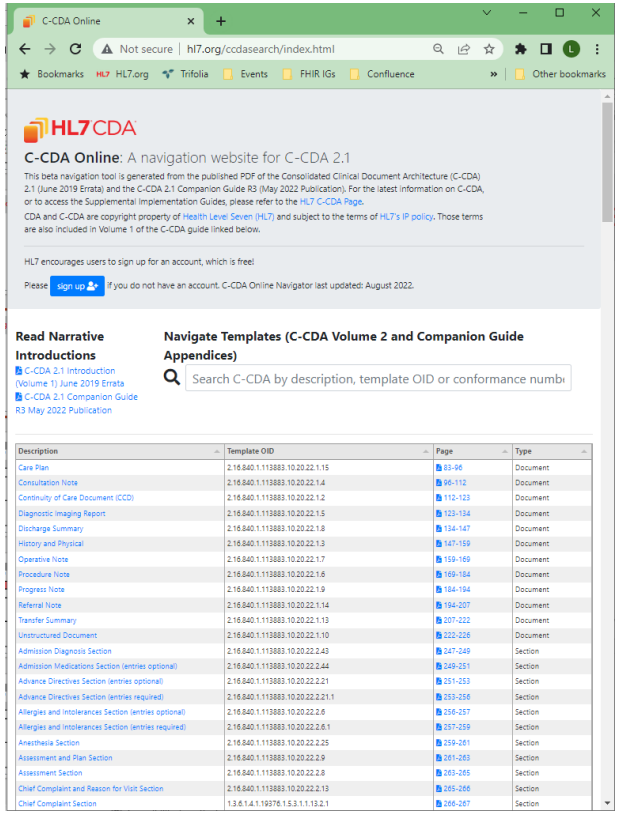
Web IG Publishing Bridging Strategy for CDA IGs

C-CDA R2.1
pdf



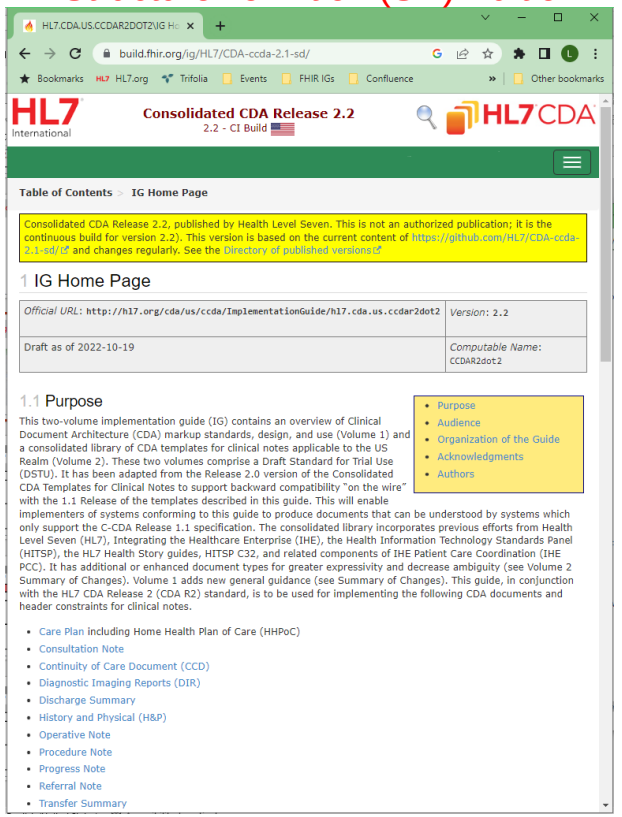
2005 - now

C-CDA R2.1
Online Edition



2020 - 2023
Only Available for C-CDA R2.1 , Companion Guide 4.1

C-CDA
StructureDefinition (SD) Edition



Jan 2024 Ballot
For C-CDA 3.0

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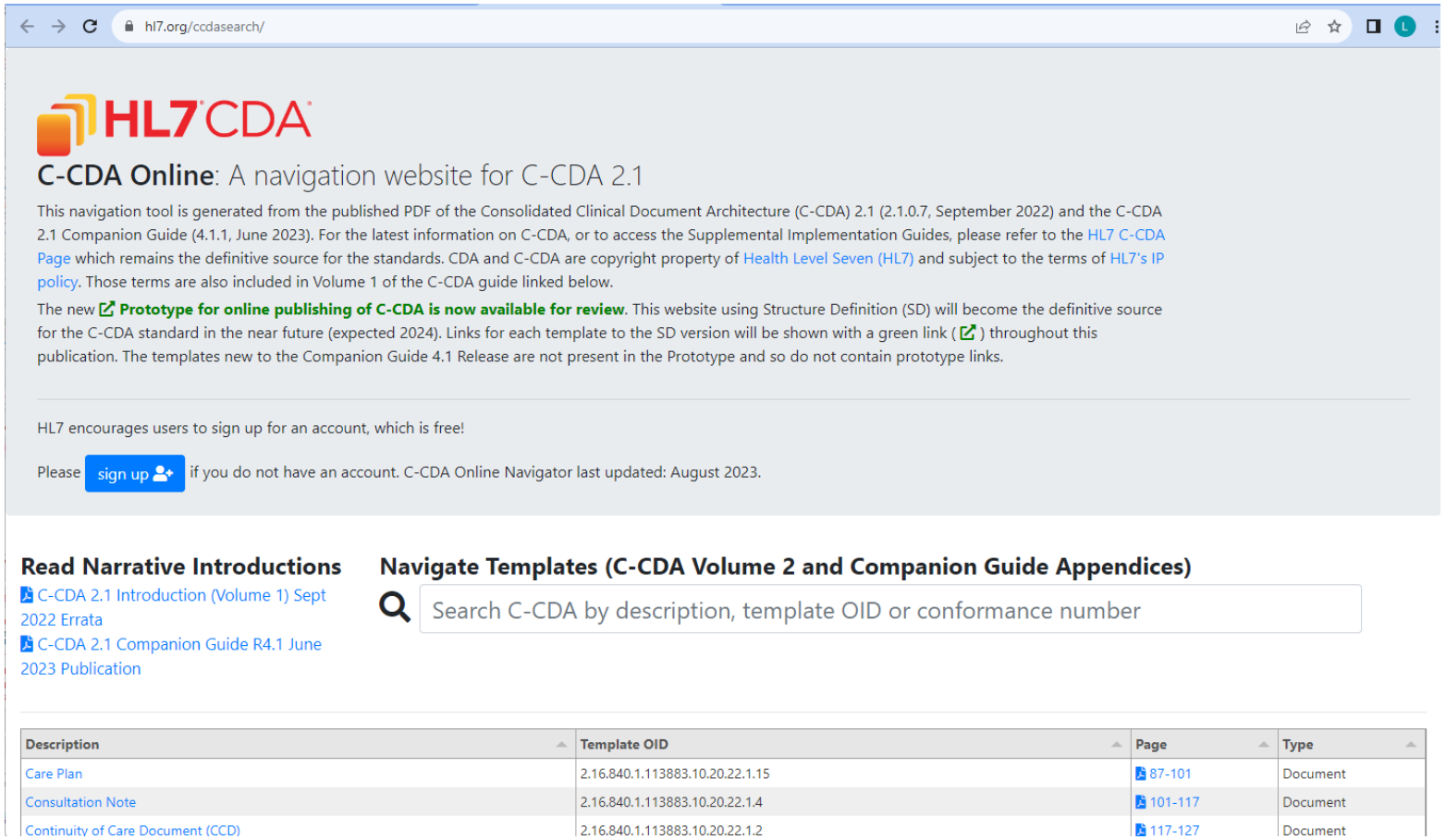
CDA On-Line Navigation Tool – 9/6/23 Update



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

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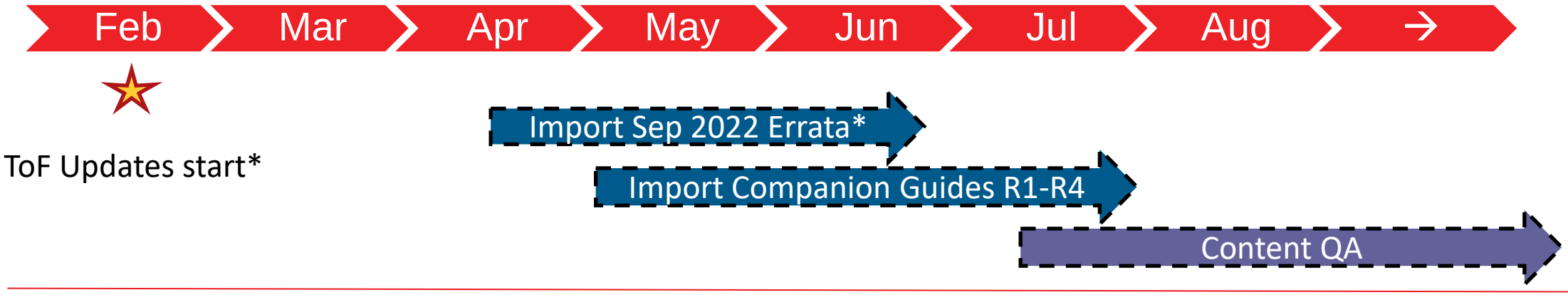
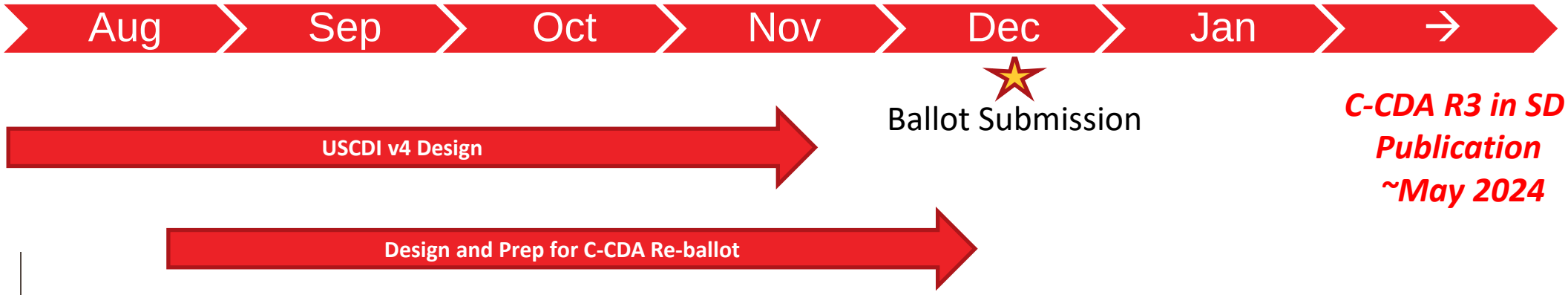
C-CDA R3.0 Roadmap - (2023-2024)

Tooling Updates and Support:



Design and Balloting:



HL7 Response to USCDI Annual Expansion Process

14-month cycle beginning each July

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

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

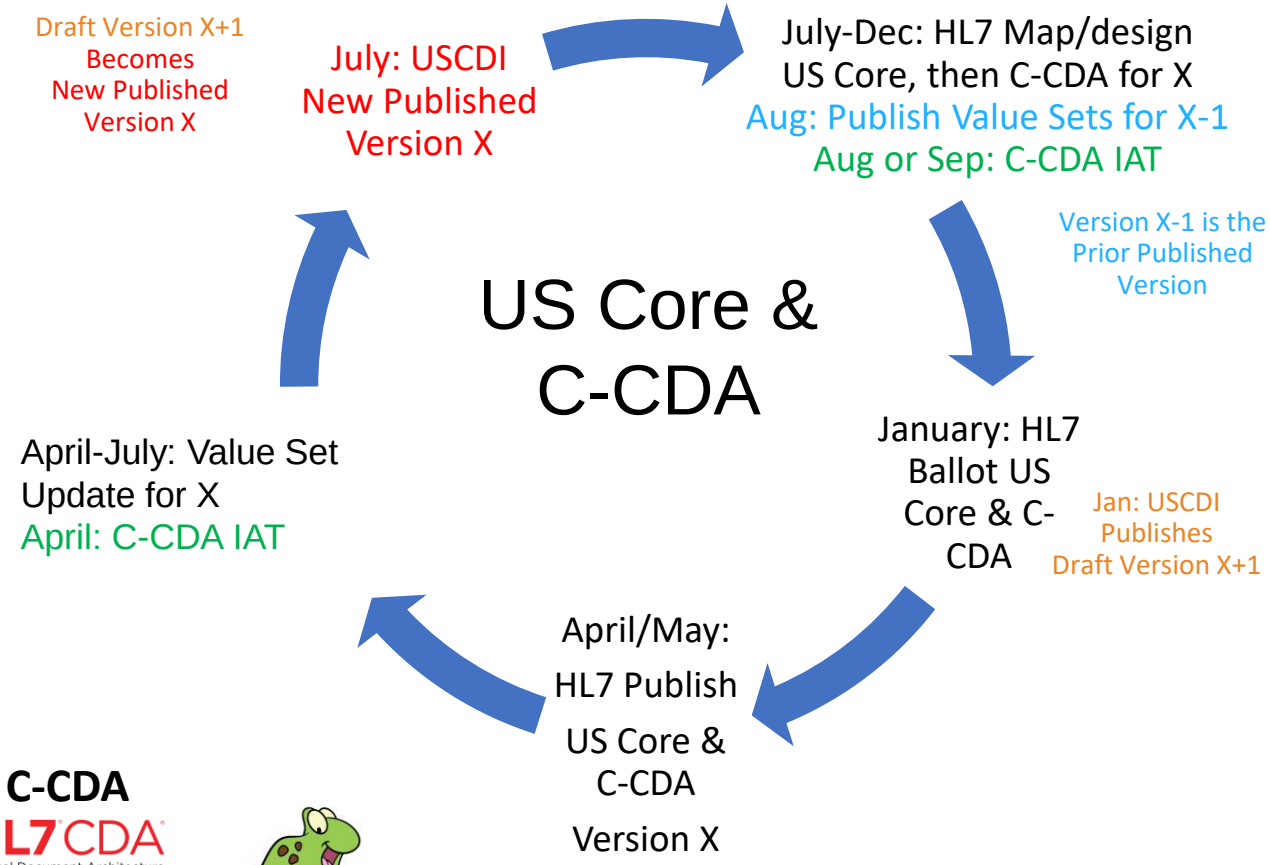
April: C-CDA IAT

April-July: Value Set Update to support finalized designs

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

Aug: Publish updated Value Sets for previous USCDI version

Aug or Sep: C-CDA IAT

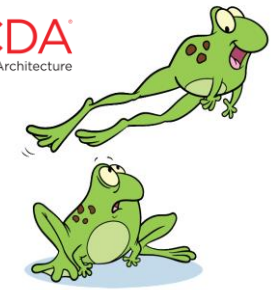


C-CDA

HL7 CDA Clinical Document Architecture

US CORE

HL7 FHIR



A game of leapfrog!

SD publication will make future updating for USCDI more efficient

HL7 International

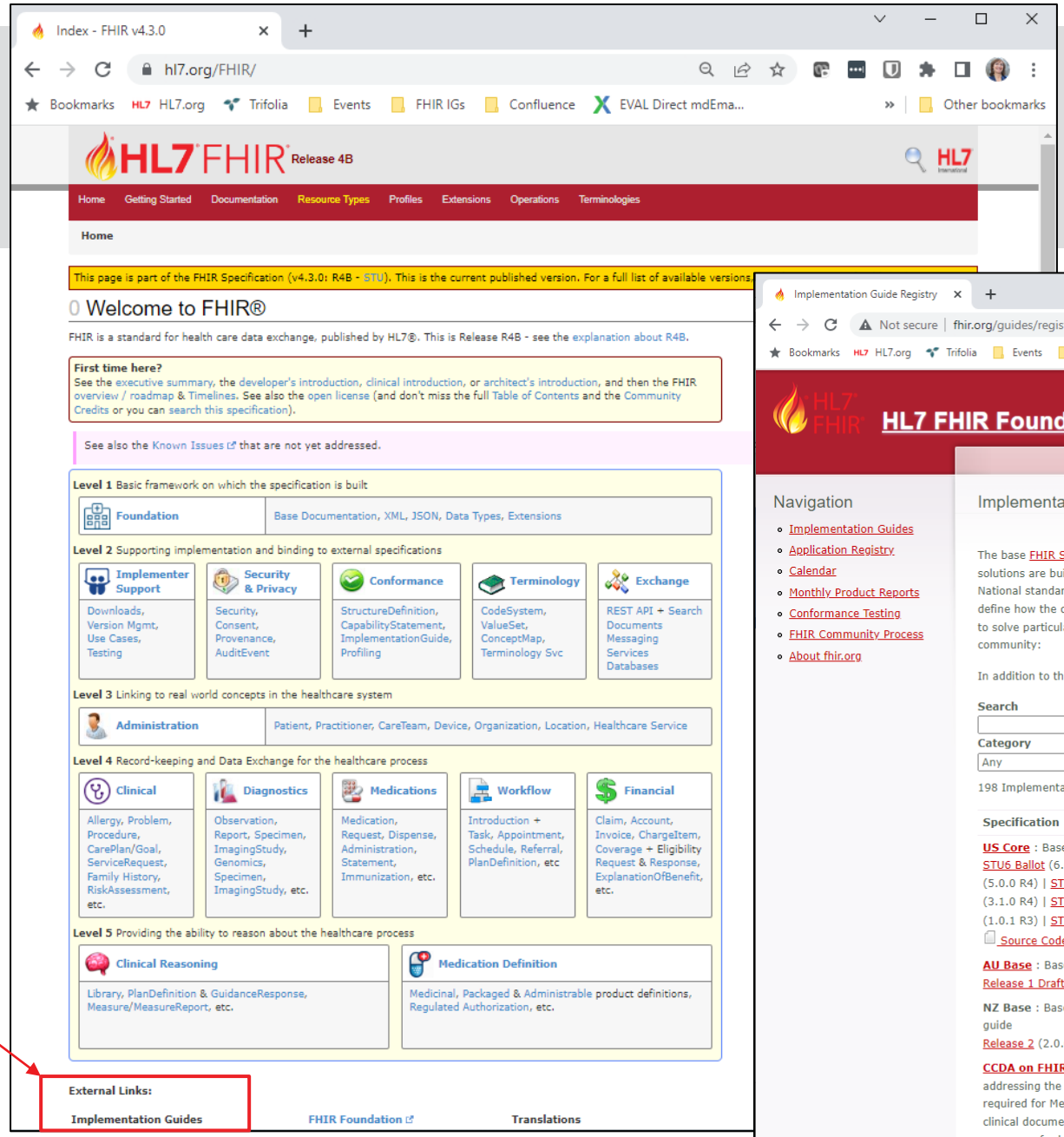
hl7.org/cda

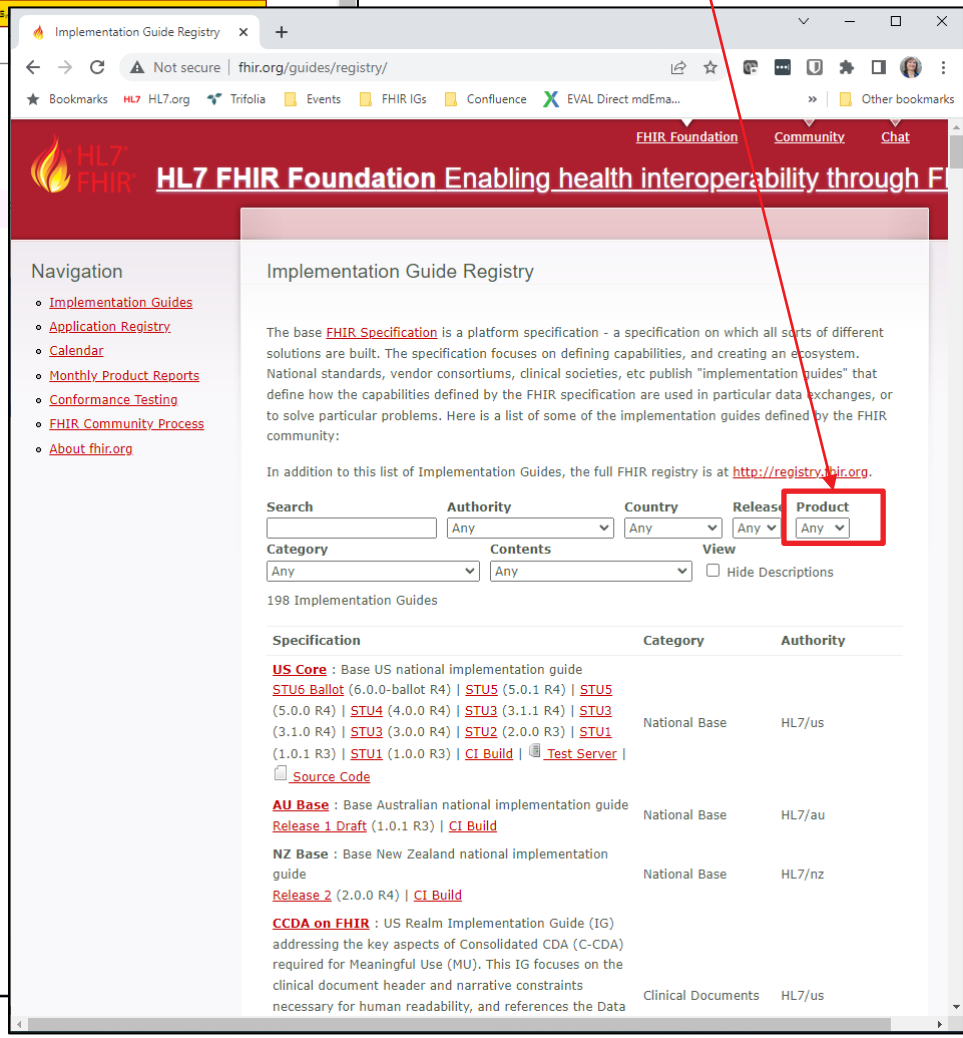
HL7 CDA
Clinical Document Architecture

Working toward a landing "home page" for base CDA "core" specification

With link to an Implementation Guide Registry page

FHIR Foundation spec search tool will support CDA IG's published using FHIR IG Publisher





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Clinical Quality Information (CQI)

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A little bit about CQI…

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

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Meeting times

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

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Who is the CMG?

Lisa Nelson
ADVault

Linda Michaelsen
Optum

Zabrina Gonzaga
Lantana

John D'Amore
More Informatics

Giorgio Cangioli
HL7 Italy

David Carlson
Medic Informatics

Didi Davis
Sequoia Project

Raychelle Fernandez
Dynamic Health

Yan Heras
Optimum

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Our new CMG member – Kyle MacLennan

About Kyle

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

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

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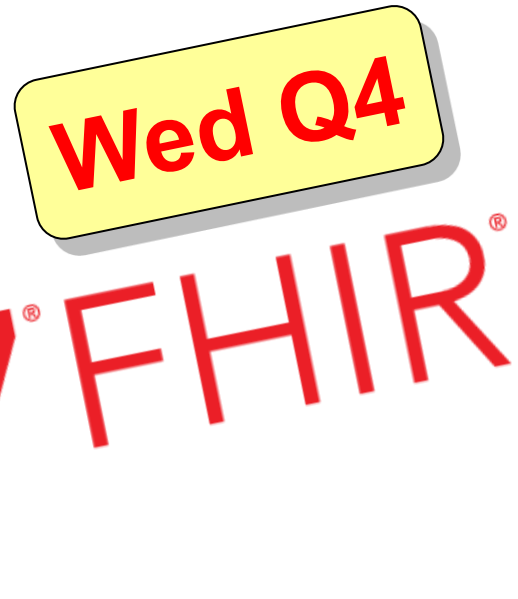
Conformance WG

"How to implement HL7 Successfully" WG

HL7®
International

FHIR Work Items on Obligations/Requirements

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



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

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V2 Improvements

- Data Type Specializations (aka Data Type Flavors)
  - ballot passed
- Vocabulary Management
  - ValueSet + Codesystem Model instead of Tables
- Separate Conformance Methodology Standard
  - Applicable to all v2.x Igs
- HL7 v2+
  - See the new format here!

http://www.hl7.eu/refactored/hl7.html

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Conformance

- FHIR®©
  mustSupport Alternative

Wed Q4

- Abstract Conformance Methodology on top of all product lines

- Conformance
  - Admin
  - Tooling

Mon Q3

Tue Q2

- Vocabulary
  - THO/UTG (Terminology Migration to a common Terminology Model)

Thu Q1

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Does your implementation conform to HL7?

What does this mean?

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

The Conformance-WG **provides a framework** for facilitating interoperability.

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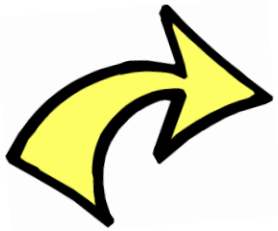
Applying Profile Hierarchies

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



Simplifies Development!

Conformance tells you how!

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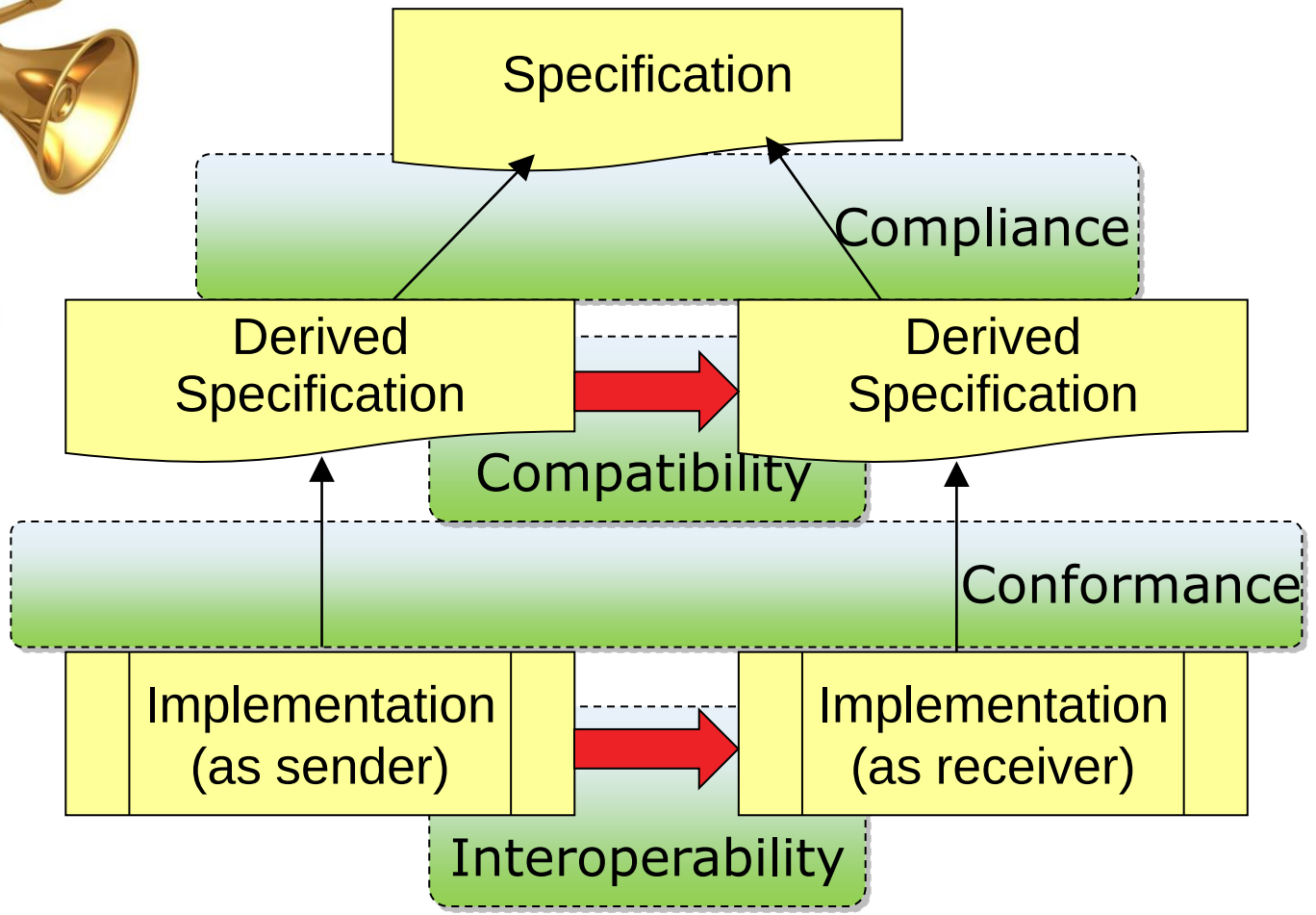
Conformance & Interoperability



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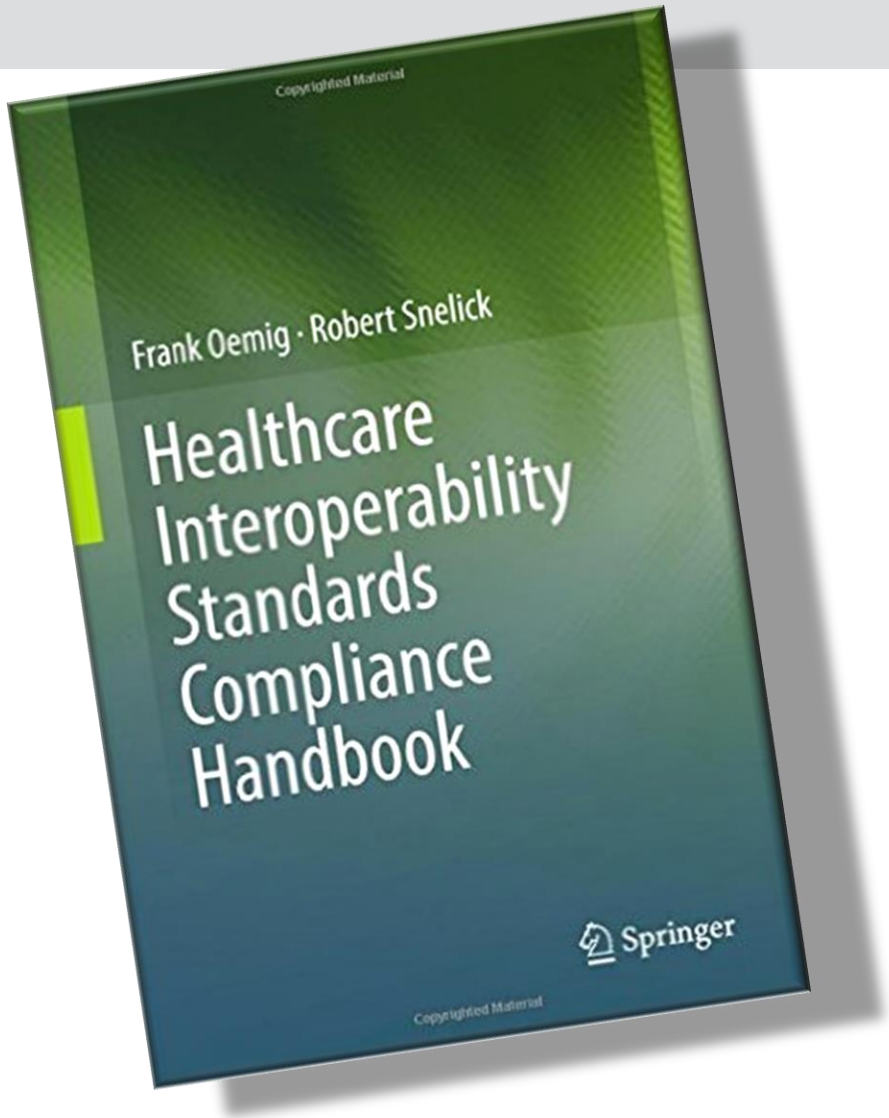
All described in a book



Oemig/Snelick: Healthcare Interoperability Standards Compliance Handbook: Conformance and Testing of Healthcare Data Exchange Standards
Hardcover: 662 pages
Publisher: Springer; 1st ed. 2016 Edition (December 20, 2016)
Language: English
ISBN-10: 3319448374
ISBN-13: 978-3319448374

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FAST

FHIR AT SCALE TASKFORCE

HL7 FHIR

FAST Project Status

Sept 2023

Agenda

- Who is *FAST*?
- Current Projects
- Discovery Projects

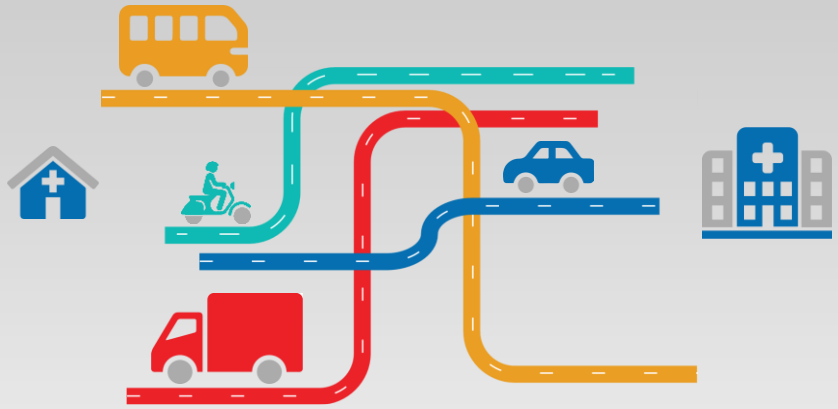
FAST: Who are we?

FHIR At Scale Taskforce in 30 SECONDS

1. Problem: Moving to a modern, restful, API-based digital exchange architecture in healthcare is necessary to advance improved cost and quality on behalf of patients
2. A growing pace of regulations drive FHIR adoption: Interoperability Regulations, Price transparency, Prior Auth, Patient Access APIs, Payer to Payer Exchange, etc.
3. And we believe that TEFCA will eventually look for exchange scale via FHIR
4. But, FHIR based APIs are not positioned to scale today
5. Solution: A group of payers and providers convened a work effort under ONC to identify solutions for scalability barriers. This is the FHIR at Scale Taskforce (FAST) industry project
6. We made good progress: Implementation guides in progress or approved for dynamic scalable security, identity matching, exchange across networks, and endpoint directory.
7. This effort has transitioned to HL7 as an “accelerator”, or “home base” of activity for the industry to continue to drive FHIR scale, remove infrastructure barriers, and drive adoption

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

What is the Problem?



TODAY - Exchange

Exchange characterized by point-to-point interfaces

Adoption trajectory is slow, expensive, and fragmented

FUTURE - Interoperability

A consistent infrastructure approach to API implementation

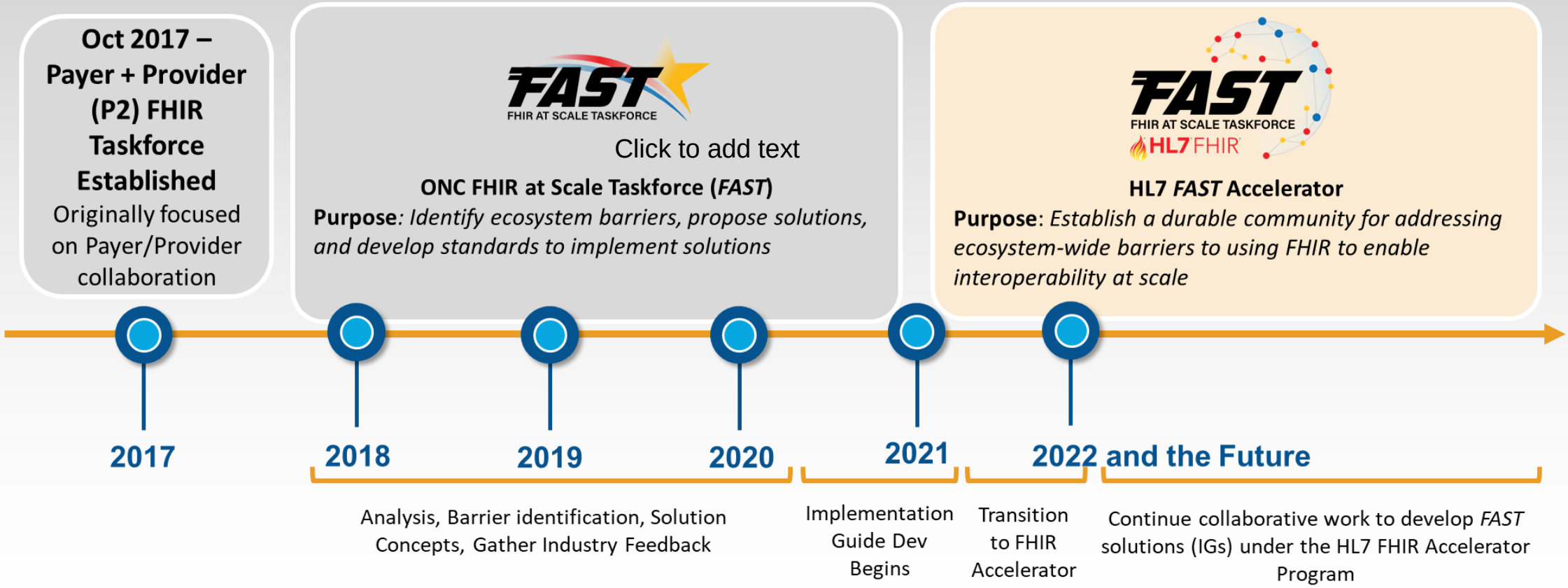
Consensus on implementation guides for key enablers, such as directory, security, patient matching, exchange and testing

DESIRED RESULT:

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

What is *FAST?*

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



All content is available on the ***FAST* Project Page**

FAST 2023 Members

★ AEGIS

★ Availity

★ avaneer HEALTH

★ BlueCross BlueShield Association

★ CMS CENTERS FOR MEDICARE & MEDICAID SERVICES

★ Department of Veterans Affairs

★ edifecs

★ EVERNORTH℠

★ Elevance Health

★ HCSC Health Care Service Corporation

★ HL7 International

★ Humana

★ KAISER PERMANENTE®

MEDITECH

★ The Office of the National Coordinator for Health Information Technology

★ Optum

★ Providence

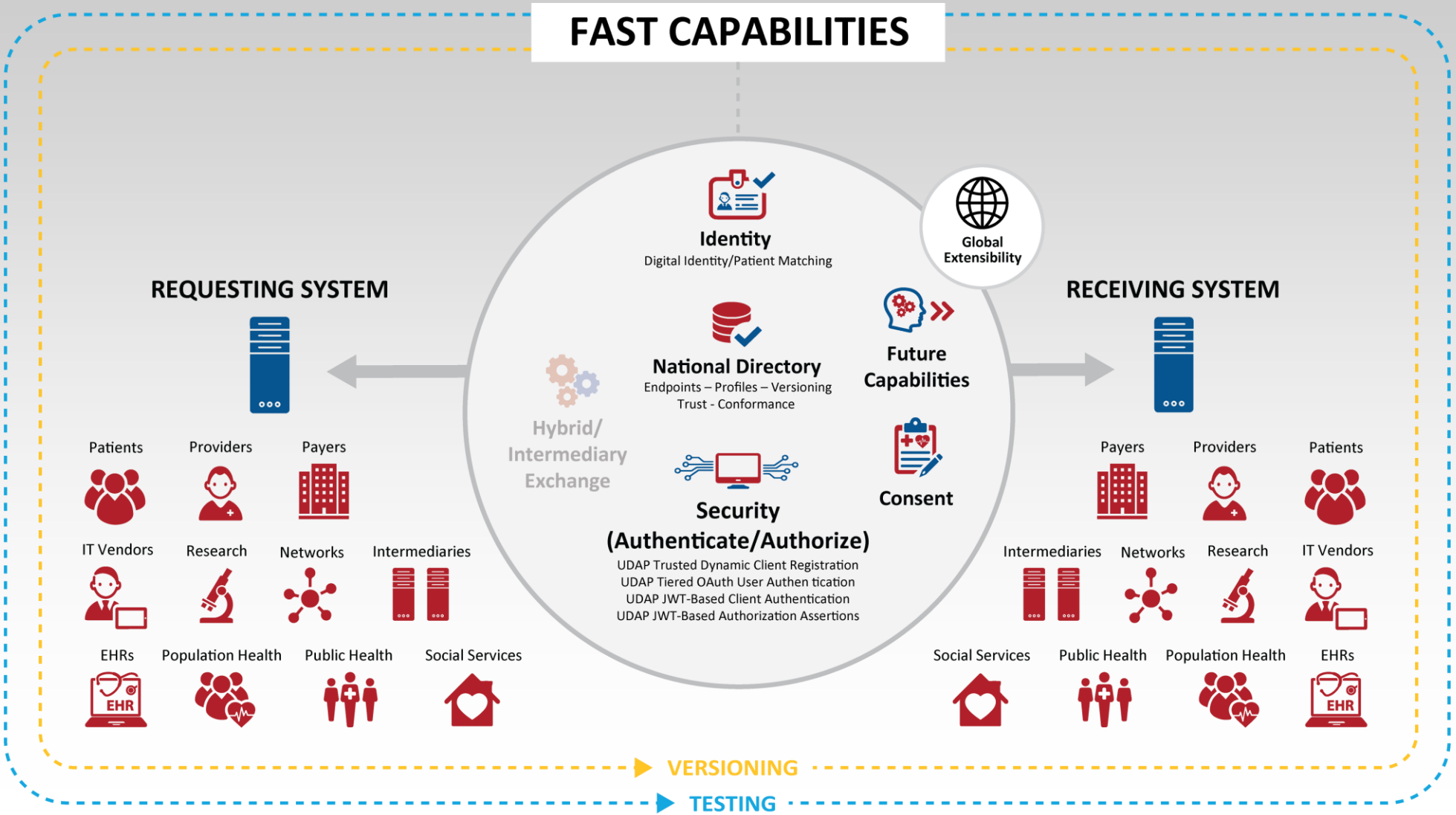
salesforce

★ smile DIGITAL HEALTH

★ surescripts

★ **Founding Member**

Focus on Technical Barriers that Prevent Scale



FAST Current Projects

Digital Identity and Patient Matching

- Goal: Leverage most up to date industry considerations to build on best practices and recommendations for identity matching services and KPIs, and identity assurance for an appropriate, national, standards-based approach for individual identity matching.

Project Status

- FHIR IG STU1 Published on June 1st, 2023

Project Leads:

- Julie Maas, EMR Direct
- Aaron Nusstein, Lantana
- Mohammad Jafari, VA
- Ranjan Saxena, Humana

Digital Identity and Patient Matching

Next Steps

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

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

Schedule

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

Official URL: http://hl7.org/fhir/us/identity-matching/ImplementationGuide/hl7.fhir.us.identity-matching

Security

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

Project Status

- STU1 published in 2022, wide adoption due to TEFCA, Carequality and FHIR IG adoption

Project Leads:

- Luis Maas, EMR Direct
- Brett Stringham, United Health

Security

Next Steps

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

Schedule

- Meets on the 2nd Tuesday of the month

Official URL: http://hl7.org/fhir/us/udap-security/ImplementationGuide/hl7.fhir.us.udap-security

National Directory

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

Project Status

- Moved from three FHIR IGs to one in January
- Completed September 2023 ballot cycle

Project Leads

- Bob Dieterle, EnableCare
- Ming Dunajick, Lantana

National Directory

Next Steps

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

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

Official URL: http://hl7.org/fhir/us/ndh/ImplementationGuide/hl7.fhir.us.ndh

Discovery Projects

Testing and Versioning

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

Project Status:

- Completed the Discovery Phase, project in review by membership and steering committee

Project Leads:

- Mario Hyland, AEGIS
- Daniel Berezeanu, IHE Catalyst
- Yunwie Wang, MITRE

Consent

Goal: Exploring scalability factors for consent management and enforcement to define what consent at scale means and entails. Explore a high-level list of abstract use cases in consent management and enforcement and the requirements for scalability for each of these use cases

Project Status:

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

Project Leads:

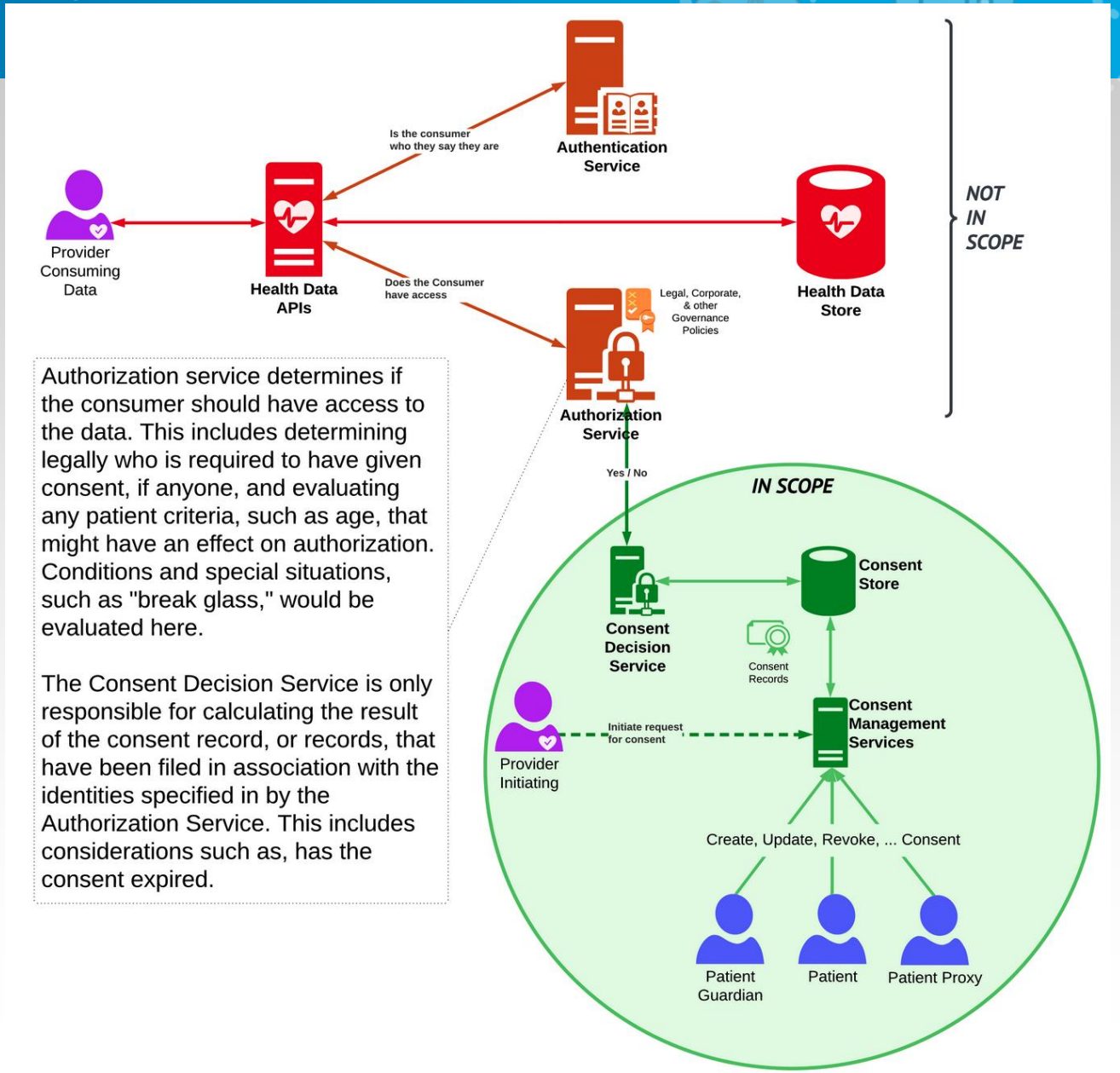
- Sam Schifman, Availity
- Mohammad Jafari, VA

FAST Consent Discovery Work Structure

- Aspects of Scalability
  - Unpacking what scaling means for consent management and enforcement
- Abstract Use Cases
  - What areas in consent management and enforcement need to be scaled
- Gap Analysis
  - What existing initiatives cover and exposing the gaps
- Proposing a set of recommendations
  - Where FAST can contribute

FAST Consent Technical Scope

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



FAST Consent Abstract Use Cases

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

Questions

For More Information

Contacts:

- Dana Marcelonis, Program Manager dana.marcelonis@pocp.com
- David Pyke, Technical Director david.pyke@pointclickcare.com
- Duncan Weatherston, *FAST* Steering Committee Co-chair duncan@smilecdr.com
- Deepak Sadagopan, FAST Steering Committee Co-chair deepak.sadagopan@providence.org

Gender Harmony Update

- The Cross-Paradigm Gender Harmony Informative FHIR IG and CDA R2 IG pre-publications are available for review
  - Co-sponsors should plan to attend the TI-hosted Gender Harmony call on Monday Q4 to review the pre-publication materials and vote on publication approvals

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

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

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Unified Terminology Governance (UTG) and HL7 Terminology (THO) Update

- Updated UTG process is live
  - Proposals are being submitted and implemented using the new process
  - No tooling or downloads required; edits can be proposed using web-based editor
  - Improved linking to documentation based on state of the proposal
- THO v5.3.0 publication expected around the time of the WGM
- Next THO freeze is scheduled for 11/5 with publication expected around 11/19

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HL7 Electronic Health Record WG
Key Sessions – 11-13 September 2023

Monday Q3	Reducing Clinician Burden (RCB) Project Team Leads: Gary Dickinson FHL7, David Schlossman MD • Update on ONC Burden Reduction Activities, Thomas Mason MD, Steve Posnack
Monday Q4	Problem Oriented Health Record (POHR) Project Team Leads: Lincoln Weed JD, Charles Burger MD
Tuesday Q1	EHR WG Hosting: Mobile Health Leads: WG Co-Chairs
Tuesday Q2	EHR Work Group – General Session • Dental Functional Profile Project Update, Greg Zeller DDS • Medication List Management and Reconciliation Focus Team Update, James Tcheng MD • Military Toxic Exposure Project Update, Charles Gabrial
Tuesday Q3	EHR WG Hosting: International Patient Summary Leads: Rob Hausam MD, Giorgio Cangioli

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HL7 Electronic Health Record WG
Key Sessions – 11-13 September 2023

Tuesday Q4	• Artificial Intelligence Focus Team Leads: Gary Dickinson FHL7, Steve Datena MD • Project 11 – AI Data Lifecycle Project Team Leads: Mark Janczewski MD, Rhonna Clark, Ioana Signureanu
Wednesday Q1	EHR WG Hosting: Patient Empowerment, Patient Care, Health & Social Services Leads: WG Co-Chairs

Wednesday Q2	• Tooling Support for Functional Models and Functional Profiles
	• FHIR R5 Record Lifecycle Event Implementation Guide (RLE IG)
	• EHR System Functional Model R3
	  • FHIR R5 "Requirements" Resource
	  • Mapping Conformance Criteria to FHIR Resources/Elements
	Leads: Michael Van Der Zel, Gary Dickinson FHL7

Wednesday Q3	Podiatry Functional Profile and Use Cases Lead: Michael Brody DPM
Wednesday Q4	• Behavioral Health, Gary Dickinson FHL7 • School Health, John Ritter FHL7

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HL7 Electronic Health Record WG
Projects Underway – Volunteers Invited

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

EHR/PHR System Functional Models – Just passed ISO Fast Track Ballot

- ISO/HL7 10781 – Electronic Health Record System FM Release 2.1
- ISO/HL7 16527 – Personal Health Record System FM Release 2

EHR System Functional Profiles (FPs)

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

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Imaging Integration

2023-09 Update

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Overall Workgroup Goals

- Joint HL7 / DICOM work group
- Develop and maintain FHIR imaging-related resources
  - ImagingStudy
  - ImagingSelection
- Develop imaging implementation guide, profiles, and white papers for FHIR

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IGs in active development

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

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Sessions of Note

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

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International Patient Access

- RESTful APIs: SMART, search parameters
- Minimal profiles, reflect current state
- Terminologies specified locally

HL7 International

International Patient Access
1.0.0 - STU1

HL7 FHIR

Home | Conformance | Using The API | Security and Privacy | Artifact Index | Support

Table of Contents > International Patient Access

This page is part of the International Patient Access (v1.0.0: STU 1) based on FHIR R4. This is the current published version. For a full list of available versions, see the Directory of published versions

1 International Patient Access

Official URL: **http://hl7.org/fhir/uv/ipa/ImplementationGuide/hl7.fhir.uv.ipa**	*Version*: **1.0.0**
Active as of 2023-02-01	*Computable Name*: InternationalPatientAccess
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1.1 Welcome to the International Patient Access API Specification

This specification describes how an application acting on behalf of a patient can access information about the patient from a clinical records system using a FHIR R4 based API. The clinical records system may be supporting a clinical care provider (e.g., a hospital or a general practitioner), a health data exchange, or other system managing patient records, including a national health record system.

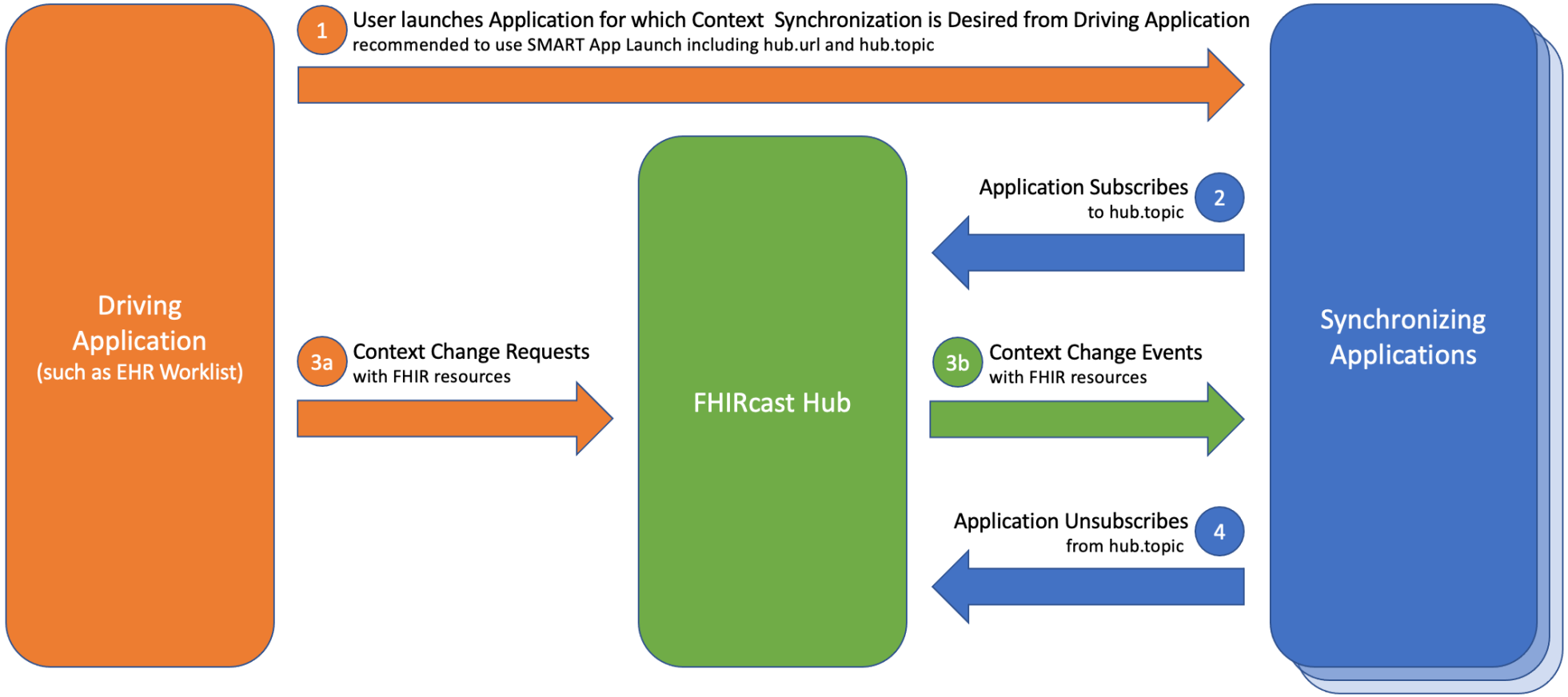
The IPA specification is designed to help patients access their data. In addition, implementers can use the IPA profiles and

- Welcome to the International Patient Access API Specification
- IPA Actors
- IPA Sequence Diagram
- Relationship to National Specifications
- Relationship between IPA and IPS

ce.

FHIRcast

modern, simple application context synchronization



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You are Invited:

To Learn How the Patient Empowerment WG is AMPLIFYING the View Points of Patients and Their Caregivers in HL7 Standards Work

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Patient Empowerment Work Group Overview

- **Patient Empowerment is meeting this week**
  - Action Packed schedule Monday to Thursday
  - Overview Monday Q3
- **Topics Include**
  - Patient Contributed Data White Paper
  - Advance Directive Interoperability w/FHIR
  - Patient Request for Corrections
  - Standard Personal Health Record w/FHIR
  - And more…
  - Collaborating with EHR, HHS, FHIR-I, Patient Care, Orders & Observations, CDS, CBCP, Terminology, Devices, Mobile Health, Cross-Group Projects, etc.

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September WGM 2023

Payer/ Provider Information Exchange Work Group (PIE)

Co-chairs:

Durwin Day

Christol Green

Interim Co-chairs:

Chris Johnson

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Topics to be covered at PIE WGM

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

Monday Sept 11th:

- Q1 - HL7 Plenary Session
- Q2 - HL7 Plenary Session
- Q3 Administrative work
  - Welcome
  - WG Health report
  - Decision Making Practices:
    http://www.hl7.org/participate/decisionmaking.cfm
  - SWOT
  - Mission and Charter
    https://confluence.hl7.org/display/HL7/WG+Mission+and+Charter+Tracking
- Q4 –
  - Physical Activity Project Update
  - Review Attachment Implementation Guides tab on PIE Confluence page that need updates

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PIE WGM continued

Tuesday Sept 12th :

- Q1
  - Connectathon Updates
  - Industry Updates
    - CAQH CORE – Bob Bowman
    - NCVHS
    - USCDI
    - Other
- Q2
  - CARIN Digital Insurance Card Update
    - Smart Card
- Q3 (FM Hosting)
  - Industry Updates
    - Deep Dive on PCT - Corey Spears
    - CDex Update – Eric Haas
    - APIs and 3rd Party Apps discussion
- Q4
  - FAST Accelerator – Alix Goss
- Q5
  - Dental BOF – (Paradise Valley room)

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PIE WGM continued

Wednesday Sept 13th :

- Q1
  - Open forum to discuss NPRMs and future regulations. Sharing of best practices, current project work in your organization and ideas for improvements.

    Possible topics include:

    - Interop and ePA, Attachments and electronic signatures, CAQH core,X12 and NCVHS, TEFCA updates, Other ???
- Q2
  - Discuss/provide comments related to the newest USCDI version
- Q3
  - Da Vinci Updates – Bob Dieterle
- Q4
  - FHIR I at FMG – Llyod McKenzie

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PIE WGM continued

Thursday Sept 14th:

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

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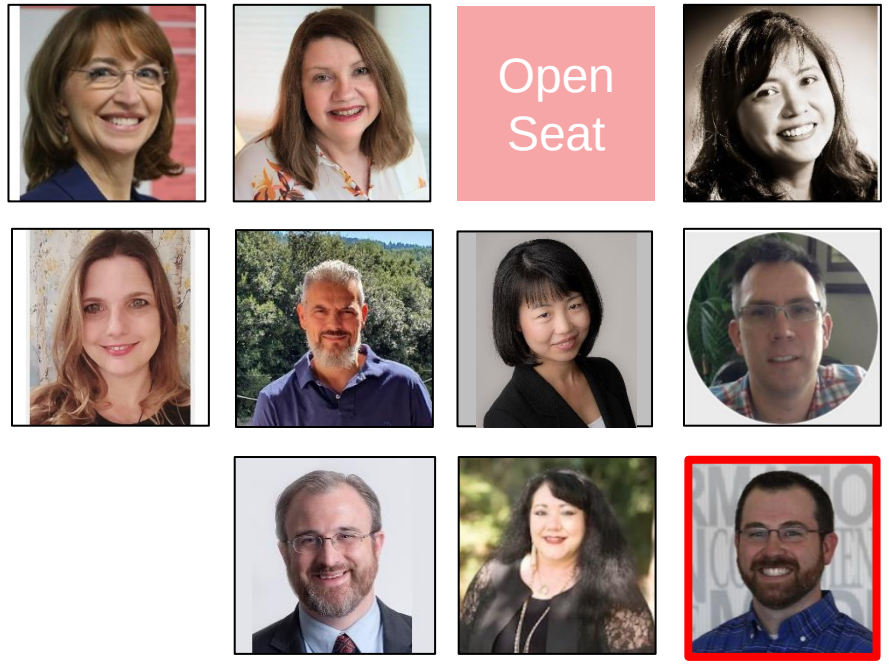
Public Health WG

September 2023 WGM



Last Updated 9/6/2023

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Our Mission

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

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Areas of Interest

- Human and animal population health monitoring
- Disease and event detection, response and control
- Contact tracing
- Outbreak investigation
- Immunization
- Vital records
- Public health registries
- Food safety
- Environmental health
- Emergency preparedness and response
- Reporting to monitoring and regulatory agencies

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Project Areas

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

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Project Areas

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

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Project Areas

- Making EHR Data More Available for Research and Public Health (MedMorph)
  - Reference Architecture IG
  - Use Case Content IGs
    - Health Care Surveys
    - Cancer Registry Reporting
    - Research
  - FHIR
- Situational Awareness for Novel Epidemic Response (SANER)
  - FHIR
- Bidirectional Services eReferral
  - FHIR

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Project Areas

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

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Getting Involved

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

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

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V2 Management

"V2 is still alive!" WG

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Our Team

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

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v2.9.1 is ready

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

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v2.x Work

- Maintenance
  - Gender Harmony Project
  - Vocabulary Adjustments (⇒ THO/UTG)
  - …
- Data Type Specializations (aka Data Type Flavors)
  - ballot passed

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V2+ Improvements

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

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

- HL7 v2+
  - New Layout = new UI/UX
  - New metamodel
  - See the new format here!

http://www.hl7.eu/refactored/hl7.html

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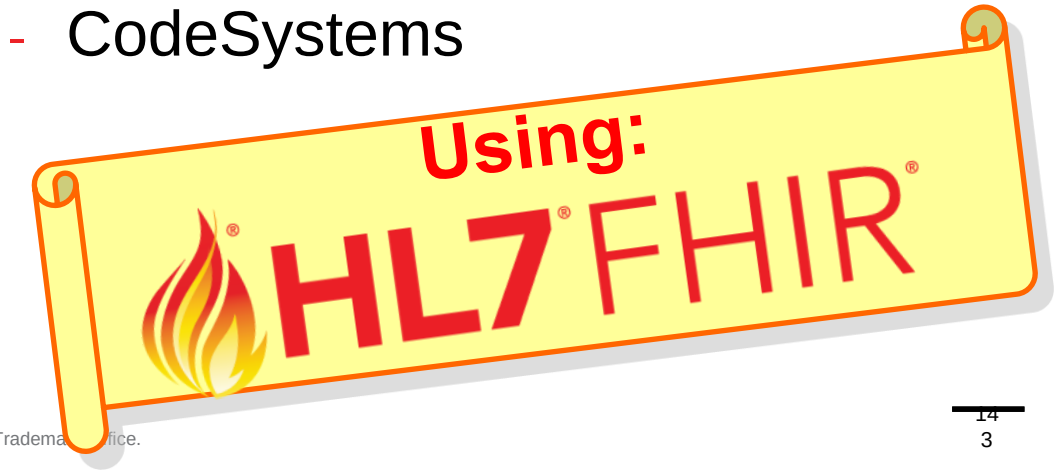
Vocabulary Management

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

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



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FROM THE HL7 ARCHIVES

ST. JAMES BALLROOM

Project overview and structure
OneAquaHealth

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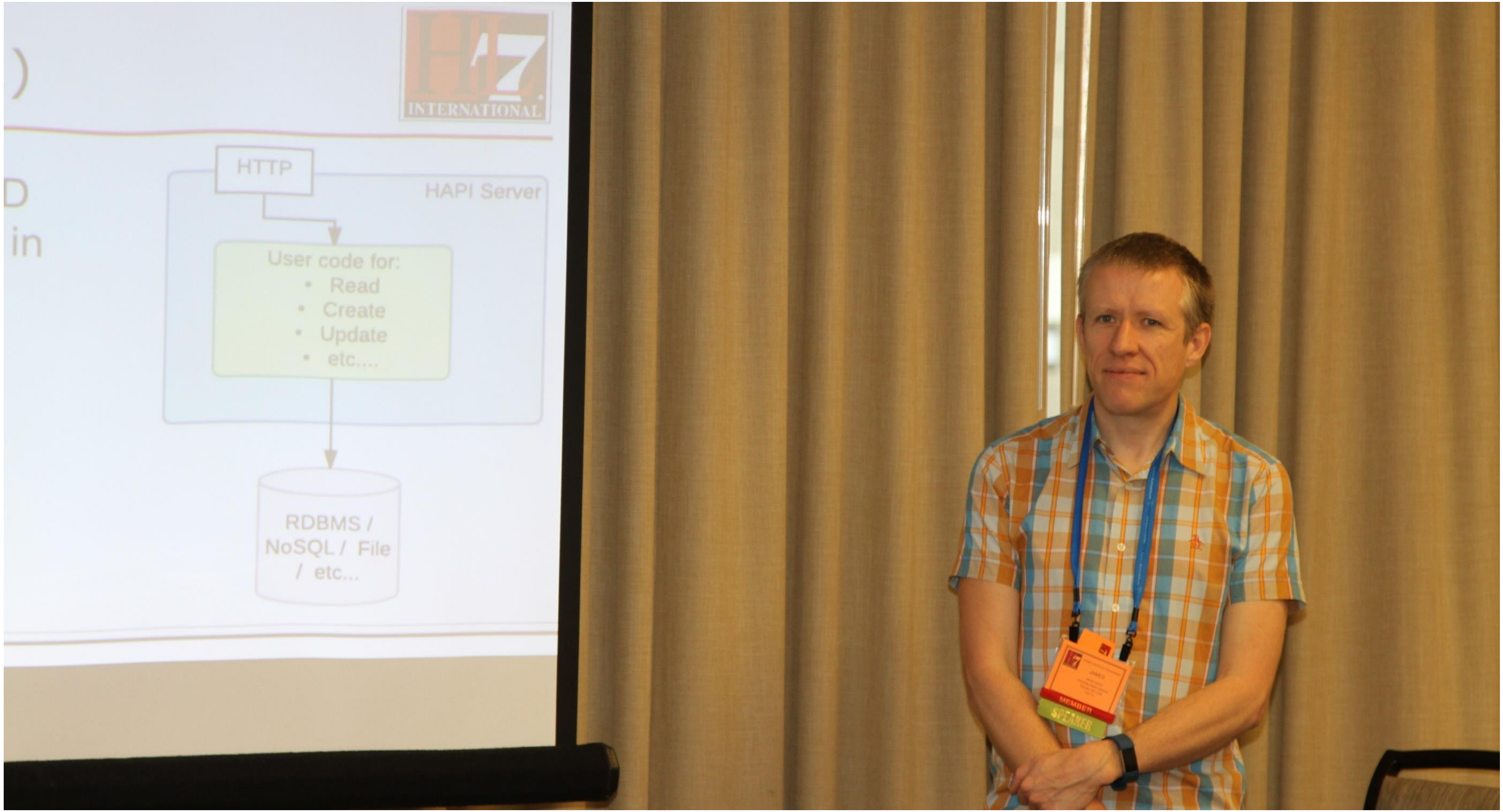
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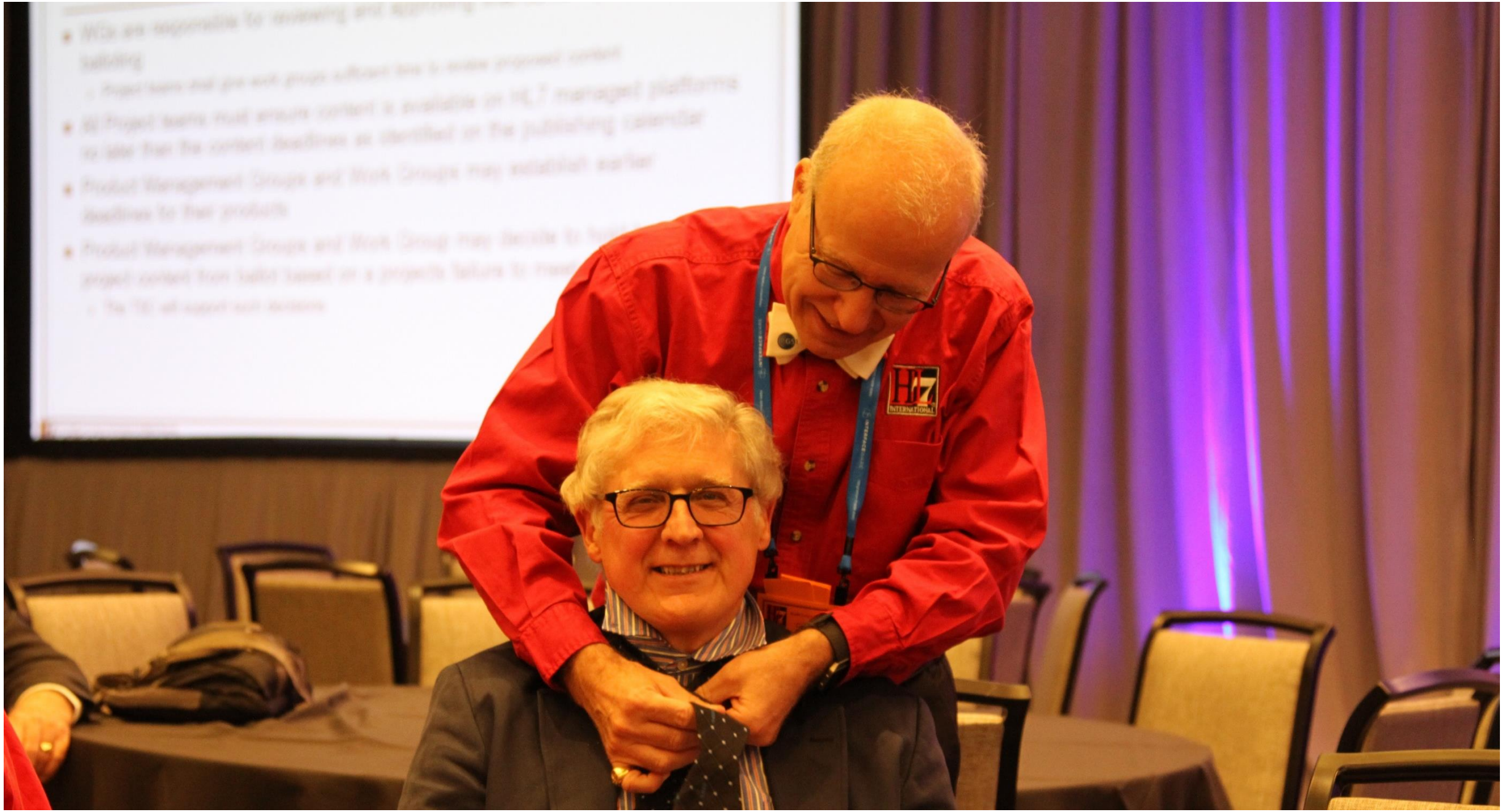

Introduction to FHIR
October 2nd, 2018
Rik Smithies
FHIR

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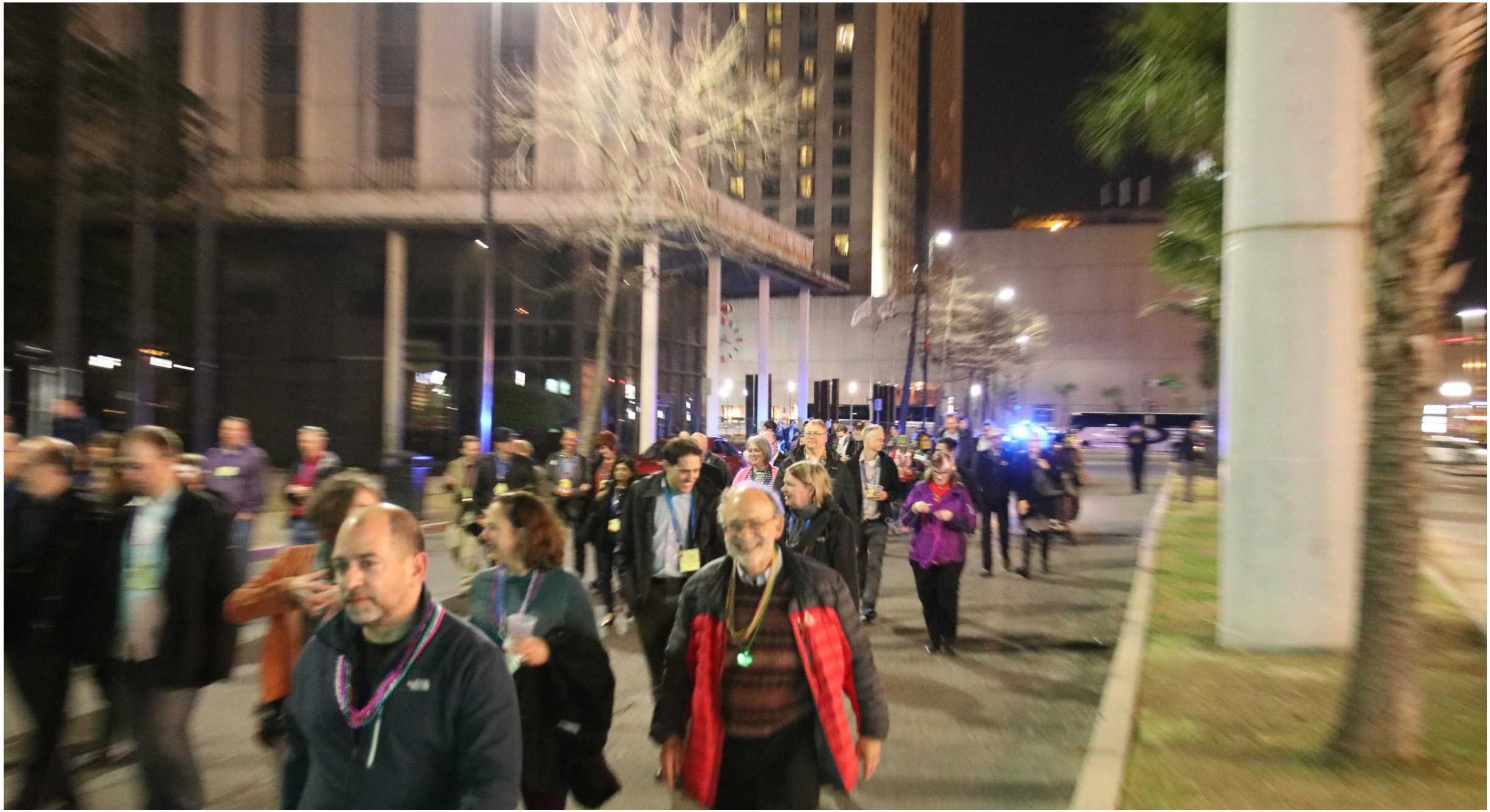

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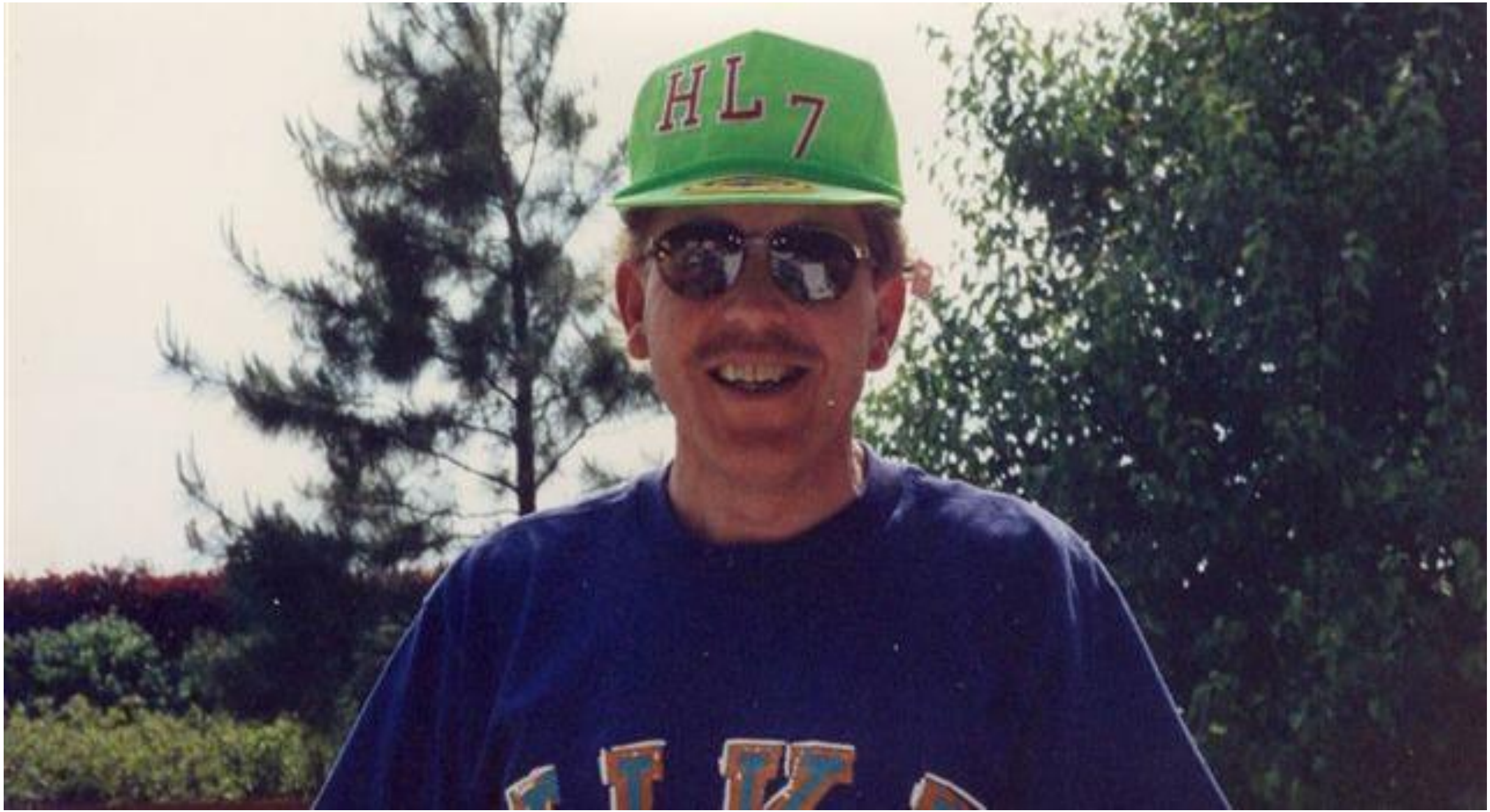
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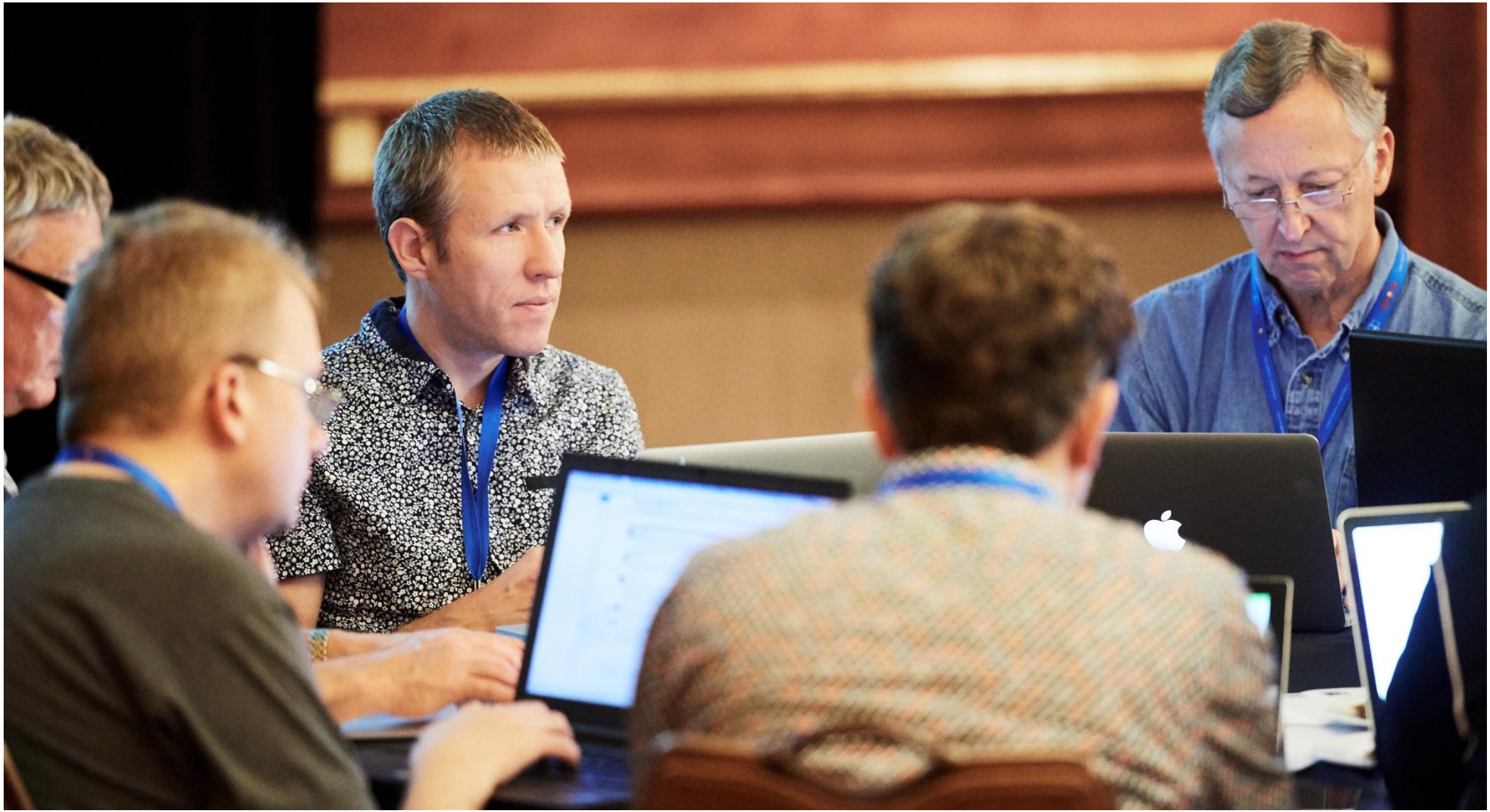

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May International
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MAY 6 – 12, 2017
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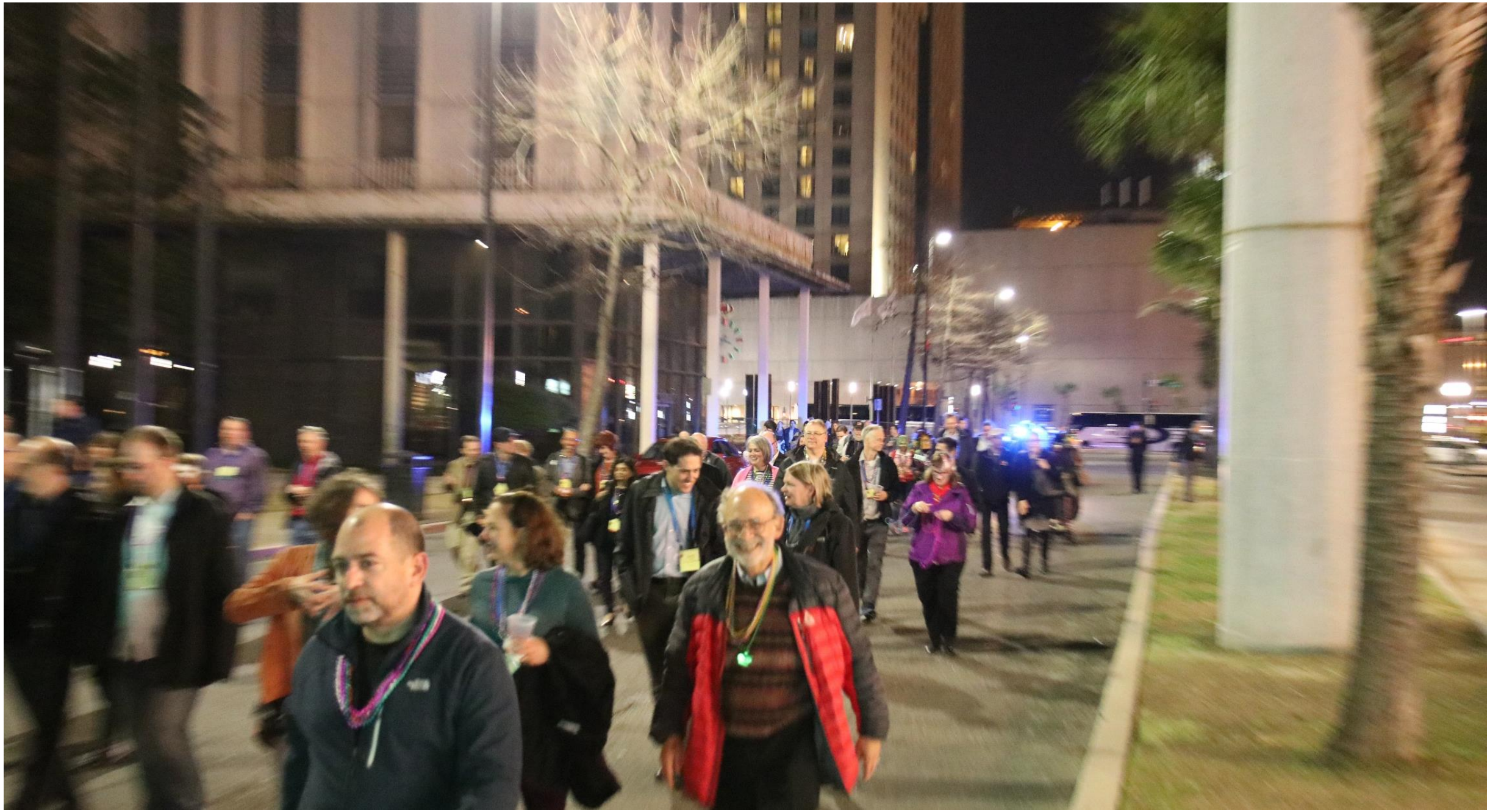

New Orleans Connectathon

5 FT 1.5 M.
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CO-CHAIR
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