# The PHDSC Quarterly Standard E-Newsletter

Promoting Standards Through Partnerships

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**Consortium welcomes our new members:**

**El Paso City Department of Health**

**OurHealthData US**

**Coto Partners**

**Ms. Elaine Lowery**

## PHDSC Responses to ONC and CMS

By Anna Orlova

On March 15, 2010, the Consortium responded to the ***Office of the National Coordinator (ONC) Interim Final Rule (IFR) on Standards, Implementation Specifications and Certification Criteria for Electronic Health Record (EHR) Technology***. On the same day, the Consortium responded to the ***Centers for Medicare & Medicaid Services (CMS) Notice of Proposed Rule Making (NPRM) on Medicare and Medicaid Electronic Health Record Incentive Programs and Meaningful Use Criteria.***

These responses were developed over the course of the 4 conference calls held by the Consortium in partnership with the Joint Public Health Informatics Task Force (JPHIT) between February 4, 2010 and March 1, 2010. Over 300 participants attended these calls. During these calls, participants discussed responses from the American Immunization Registry Association (AIRA), Association of State and Territorial Health Officials (ASTHO), Council of State and Territorial Epidemiologists (CSTE), JPHIT, National Association of County and

City Health Officials (NACCHO), National Association of Health Data Organizations (NAHDO), and National Association for Public Health Statistics (NAPHIS) to CMS and ONC, and shared their views on public health's role in the Meaningful Use of Health Information Technology (IT) and on standards and certification process to support the Meaningful Use.

PHDSC responses are available at:

- Response to ONC on Standards and Certification: http://www.phdsc.org/about/pdfs/PHDSC-Letter-to-ONC-IFR-Stnds-and-Cert-Criteria.pdf
- Response to CMS on Meaningful Use of Health IT: http://www.phdsc.org/about/pdfs/PHDSC-Letter-to-CMS-NPRM-Meaningful-Use.pdf

For all responses, please go to www.regulations.gov using the following codes:

- RIN 0991-AB58 for ONC IRM on Standards and Certification
- CMS-0033-P for CMS NPRM on Meaningful Use of Health

## Upcoming PHDSC Events

April 1, 2pm ET
Payer Typology Sub-Committee Conference Call

April 14, 2-3:30pm ET
ASC X12 Standards: 837 Health Care Services Data Reporting Guide Webinar

May 26, 3-5pm ET
Re-Evaluation of HL7 EHR-S Functional Model from Public Health Perspectives Webinar

## PHDSC at Accredited Standards Committee X12

By Ginger Cox and Missy Jamison

**X12 Subcommittee of the Accredited Standards Committee (ASC X12)** is recognized by the Health Insurance Portability and Accountability Act (HIPAA) as one of the designated standard maintenance organizations that is focused on electronic data exchange standards in North America. ASC X12 provides public forums for discussions on data elements for electronic claim transactions mentioned in the HIPAA law. ASC X12 met in January 2010 in Seattle, WA to work on the 837 Health Care Services Data Reporting Guide versions 5010, 5050, and 6020.

***Version 5010*** will be implemented in January 2012. Since there are issues with this version that have no workaround solutions, there will be errata for version 5010. The errata will require a public comment period and will need to be adopted in the Federal Register before implementation.

Public comments on the 5010 errata will be incorporated into the working ***Version 6020.*** This version will use the ICD-10 code set for diagnoses, procedures, and external causes of injury. The "Source of Payment" will be the industry code in the Subscriber information (SBR10) data segment for all 837 implementation guides. The Language Use (LUI) data segment for Patient Language will be added in version 6020 of the 837 Health Care Service Data Reporting Guide. Version 6020 will be on a two-year cycle, starting with February 2010.
The summary of X12 meeting can be found at:
http://www.phdsc.org/X12sum_201001.pdf

To continue education of the public health community on ASC X12 standards, the Consortium will hold a ***Webinar on the 837 Health Care Services Data Reporting Guide on April 14, 2010, 2:00 – 3.30pm ET***. The Webinar will highlight changes and solicit input for inclusion in future guides.

For more information PHDSC Participation in ASC X12 and the National Unified Bulling Committee (NUBC), please visit: http://www.phdsc.org/standards/x12_nubc.asp

Support for this project is provided by the Centers for Disease Control and Prevention (CDC) Center for Vital and Health Statistics.

**To Learn More about Health IT Standards and Standardization Process**

**Visit HIT Standards pages on our website**

## Assuring HIT Standards for Public Health

By Jean Kirupaharan

The Consortium is working with local, state, and federal public health agencies, professional associations, academia, standards development, harmonization and certification organizations, as well as others in the public and private sector, to establish a process ***Assuring Public Health a Strong, Coordinated, and Educated Voice in National Health Information Technology (HIT) standardization.***

Today, public health participation in national HIT standardization efforts, especially from state and local public health agencies, has been limited. To increase participation, the Consortium has been implementing the Business Case on the Role of Public Health in HIT Standardization. In February 2010, the Consortium organized ***two webinars*** on the Business Case implementation strategies: (1) with the Centers for Disease Control and Prevention (CDC) for the InfoLinks Community of Practice and (2) for the public health Information Technology (IT) leaders with the National Association for Public Health Information Technology (NAPHIT).

In addition, the Consortium has been developing online tools and educational materials to support participation of public health representatives in HIT standardization activities. Our ***Web-based Interactive Model on Business Case Implementation*** will serve as a web-based informational and educational resource for public health decision-makers and IT leaders, public health program leadership, public health practitioners, clinicians, and researchers. The Model is comprised of four Modules:

- ***Module 1***: HIT Adoption Stories
- ***Module 2***: HIT Standards Resource Center
- ***Module 3***: Public Health Needs for HIT Projects
- ***Module 4***: Public Health Participation in HIT Standardization

***Module 2***: HIT Standards Resource Center was released in June 2009.

The release of the ***Modules 1 & 4*** is targeted for May 2010.

For more information about Assuring HIT Standards for Public Health project, please visit our project wiki: https://wiki.phdsc.org/index.php/CDC-CA_Project.

Support for the project is provided by the CDC Center for Health Marketing.

**Share Your Successes & Lessons Learned**
with the
Public Health Community on Health Information Technology Adoption and Participation in Health Information Technology Standardization Activities in the next PHDSC Standard E-Newsletter Issue.

**Send your stories to**
Jean Kirupaharan at jeankiru@hln.com
for the next issue of our

## Early Hearing Detection & Intervention Content Profile at IHE

By Anna Orlova

The Consortium has been working on a new public health project – ***Early Hearing Detection and Intervention (EHDI) Content Profile***, at the Integrating the Healthcare Enterprise (IHE) in the IHE 2009-2010 development cycle. This profile will specify work processes and data requirements for the early hearing screening and short-term care follow-up for children ages 0-3. It is built upon the 2009 IHE Newborn Screening White Paper developed by the Consortium with the support from the Health Resources and Services Administration (HRSA).

In April 2010, the draft ***IHE EHDI Content Profile*** will be reviewed with State EHDI representatives. It is anticipated that the IHE EHDI Content Profile will be published for public comments in May 2010.

For more information on the IHE EHDI Content Profile project, please visit our project wiki: https://wiki.phdsc.org/index.php/EHDI_Project.

Support for this project is provided by the CDC Centers for Birth Defects.

**Visit our Web-site at www.phdsc.org**

The Consortium continues to develop and expand its website.

We see our website as one of the primary means to disseminate information on Health IT

## Re-Evaluation of HL7 EHR-S Functional Model from Public Health Perspectives

By Jean Kirupaharan

In 2003-2004, the Consortium participated in the validation of the original Health Level Seven (HL7) Electronic Health Record Systems (EHR-S) Functional Model. This validation was conducted by members of the PHDSC Ad Hoc Task Force on Electronic Health Record - Public Health (EHR-PH). Since 2004, there have been enhancements to the Functional Model and thus, the PHDSC Ad Hoc Task Force on EHR-PH was re-launched in January 2010 with the ***goal of re-evaluating the ISO-approved HL7 EHR-S Functional Model Release 1.1*** to assure public health perspectives from the federal, state and local agencies, and public health research community are met in the Model.

To date, 94 individuals ranging from local, state and federal public

standardization activities to our members and the community at large.

Stay tuned for new content and some distinctive features in the near future.

**Please send comments about our Web-site to** Jean Kirupaharan at jeankiru@hln.com

health agencies, healthcare organizations, professional associations, schools of public health, HIT vendors, private sector, and individuals interested in public health, have volunteered to participate on the Task Force.

On January 14, 2010, the Consortium held its first conference call on the re-evaluation of the Model and continued with bi-weekly calls to review comments and revisions on the Model submitted by the Task Force members. Recommendations from the Task Force will be presented to the HL7 EHR Working Group at the May 2010 HL7 International Working Meeting in Rio de Janeiro, Brazil.

The Consortium will organize a ***Webinar on May 26, 2010, 3:00-5:00pm ET*** to present the Task Force recommendations.

For more information on the Re-Evaluation of HL7 EHR-S Functional Model from Public Health Perspectives, please visit: http://www.phdsc.org/health_info/ehr-task-force.asp

Support for this project is provided by the CDC Center for Vital and Health Statistics.

**Become a Member**

Learn about the benefits of joining and become our member

## Member News: ATLAS Public Health at IHE North America 2010 Connectathon

By Jason A. Siegel

Returning from a successful participation at the ***IHE North America 2010 Connectathon*** where the company received certification interacting with others using HITSP interoperability standards, ***Atlas Public Health*** has generated a lot of interest in their new hospital EMR to public health connectivity tool.

With more and more hospitals vying for ***ARRA HITECH funds***, the need to satisfy the public health elements of "Meaningful Use" is creating an environment where Atlas' connectivity tool becomes vital. The federal government has appointed **Atlas Public Health** to their General Services Administration (GSA) Schedule enabling government entities to procure Atlas' software using ARRA funds without having to go through an open public RFP process, and therefore, expediting the procurement process.

## 2010 Project Public Health IT @ HIMSS - 2010

By Susan M. Salkowitz

The Centers for Disease Control and Prevention (CDC) sponsored nine representatives from key partner organizations to attend the ***2010 Annual Healthcare Information and Management Systems Society (HIMSS) Congress*** during February 28-March 4, 2010 in Atlanta, GA, "providing an

opportunity for state and local public health leaders to participate in a forum that allows interaction with a broad cross-section of healthcare information technology leaders and the ability to view the year's largest health IT exhibit". Over 30,000 attendees and 900 exhibitors and more than 300 education sessions took place in five packed days. The PHDSC was represented by Sue Salkowitz, Denise Love and Emily Sullivan, and Mike Hill, who also represented National Association of County and City Health Officials (NACCHO).

Our colleagues, ***Julia Gunn***, RN, MPH, Director, Communicable Diseases Division, Boston Public Health Commission; and ***Art Davidson***, MD, Director, Public Health Informatics and Preparedness, Denver Public Health presented as Davies award winners and were also recognized at the elegant and formal HIMSS award banquet on Tuesday night.

Coordinators Lynn Gibbs Scharf, and M. Leigh Bennett-Conner, CDC, and Jonathan French, HIMSS Manager of Federal Affairs, assembled a full program of networking events and meetings where sponsored attendees and other public health representatives attending HIMSS could meet directly with federal policy makers, program managers and HIMSS groups. In addition, the coordinators selected a group of session options of public health interest, including four Federal Health Synergy Sessions, one of which discussed proposed CDC organization changes, and many with specific public health applications and health information exchanges (HIEs) which had public health participation.

Our meetings included discussions with Medicare and Medicaid representatives, the CDC Foundation, the HIMSS nursing informatics section, and a discussion to engage the HIMSS and IHE Communities with the CDC registries regarding childhood obesity and birth defects. There was an important discussion on Meaningful Use of HIT and its impact on public health with representatives from the Agency for Healthcare Research and Quality and Centers for Medicare & Medicaid Services which also discussed the role of the National Institute of Standards and Technology (NIST) in the proposed new certification process. Many of us attended the ONC Town Hall session on Next Steps to Adoption and Meaningful Use of HIT, and the HIMSS Town Hall on MU-Standards, Certification Criteria and HHS Certification Regulations.

We also had a guided tour of the IHE interoperability showcase with public health cases. ***PHDSC member, Alean Kirnak, Software Partners***, among others, were there to demonstrate. We learned that Dr. Blumenthal also toured the public health demonstrations. Health IT News reported at the HIMSS10 Interoperability Showcase and the Federal Health Architecture exhibited 40 kiosks of 23 scenarios involving 60 organizations, increasing its presence times eight.

HIMSS is a HIT industry organization with a small but growing public health presence. While our group tried to inform and educate those we met on the value and importance of public health participation, the government role both in health reform and in HIT policy and governance is not widely accepted, and there were some Congressional and industry speakers who presented opposing views.

At our wrap up meeting, we discussed the possibility of a Public Health Special Interest Group (SIG) in HIMSS and other ways to increase public health participation. This is a very expensive conference and one which most public health departments and organizations cannot afford. The CDC sponsorship of public health attendees each year is the first step in developing a group of public health leaders at HIMSS. In order to continue the discussions and relationships started at HIMSS10, CDC and HIMSS will be working on future collaboration projects with the invited attendees and alumni of previous years' Project Public Health IT groups.

## National Health IT News

### Proposed Rules for HIT Certification

Dr. David Blumenthal, National Coordinator for Health Information Technology, announced the release of the ***Notice of Proposed Rule Making (NPRM) for Proposed Establishment of Certification Programs for Health Information Technology*** (HHS; 45 CFR part 170 RIN 0991-AB59). The NPRM establishes steps for: a) organizations to be authorized by ONC as certifying bodies, and b) EHR technology companies to get their products certified against Meaningful Use criteria.

The NPRM establishes a two-pronged approach for the Certification program. The first, a Temporary Certification Process, is designed to provide a short-term solution to assist eligible professionals and eligible hospitals in achieving Meaningful Use at the start of the programs. The Temporary program will end when the permanent certification program is established and at least one certification body has been authorized by the National Coordinator.

Proposed certification process is expected to separate the responsibilities for testing and certification; introduce accreditation requirements; establish requirements for certification bodies authorized by the National Coordinator related to the surveillance of Certified EHR Technology; and explore the potential for certification bodies authorized by the National Coordinator to certify other types of health IT in addition to Complete EHRs and EHR Modules.

Comments on the NRPM are due on May 10, 2010. PHDSC will be organizing a series of conference calls to discuss the proposed rules.

### NIST Seeks Public Comments on Draft Test Procedures

(Based on the Story by Nicole Lewis, InformationWeek March 19, 2010)

The National Institute of Standards and Technology (NIST) released for public comments draft test methods for HIT products. Operating under the American Recovery and Reinvestment Act (ARRA) mandate, NIST and HHS are collaborating with HIT vendors, standards organizations, certification bodies, and system integrators to develop a suite of software tools to support the HIT testing infrastructure.

The HIT testing infrastructure does not create any new standards, only the tools necessary to test for compliance with existing standards that HHS announced late last year. A HIT Standards and Testing website has been established at http://healthcare.nist.gov/. For more on NIST's draft test procedures, please visit: http://healthcare.nist.gov/use_testing/under_development.html.

### National Coordinator for HIT Addresses HIMSS10 Attendees

The top themes of Dr. Blumenthal's Keynote Address at HIMSS10 on Wednesday, March 5 included:

- ***Professionalism*** – Science and experience support the notion that the ability to use and move information will become a core professional attribute for clinical professionals
- ***Innovation*** – Human ingenuity will support advancements needed to keep pace with changes on healthcare landscape
- ***Future of Health IT*** – EHRs will become as much a part of the fabric of medicine as stethoscopes, EKGs, and MRIs.
- ***Regulation*** – Four regulations released since January 2010 are forming the foundation of the Nationwide Health Information Network (NHIN): the Meaningful Use Notice of Proposed Rule Making (NPRM), Standards and Certification Criteria Interim Final Rule (IFR), HHS Certification Process NPRM, and Clinical Laboratory Improvement Amendments (CLIA).

### ONC Appoints First Chief Privacy Officer

HHS named Joy Pritts, JD as the first Chief Privacy Officer for the Office of the National Coordinator for Health Information Technology (ONC). The Chief Privacy Officer is a new role at ONC, created under the ARRA.

### ARRA Funding

HHS Secretary Kathleen Sebelius and Labor Secretary Hilda Solis announced nearly $1 billion in ARRA awards for State Health Information Exchanges, Regional Extension Centers, and job training. The awards will help make HIT available to over 100,000 hospitals and primary care physicians by 2014 and train thousands of people for careers in health care and HIT. For more information, please go to: http://www.hhs.gov/news/press/2010pres/02/20100212a.html.

### Health IT Safety

On February 25, 2010, the HIT Policy Committee's Adoption & Certification Workgroup held a hearing on HIT safety. The Committee addressed patient safety risks of EHRs and other HIT products. The recommendations and possible approaches to address HIT safety can be accessed through the ONC's Certification/Adoption Workgroup: Past Meetings website.