Beacon Communities
Health IT and Meaningful Use
Community of Practice Call

February 15, 2011
2-3:30pm EST
Some initial housekeeping before we start…

• To join us by phone, select the ‘Info’ tab from the WebEx event center (upper left hand corner of your screen) and follow the instructions provided.

• If your name and organization are not displayed in the participant list, use the chat function in the lower right hand corner to introduce yourself (provide your name and Beacon Community)

• To minimize background noise, please mute the microphone on your telephone. Please do not use ‘hold’ – we will hear your music!

• To mute your phone, you can also press the mute button or *6. *6 also un-mutes.

• Please use the chat box to submit your questions into the queue at any point and we will call upon you to state your question.

• If you experiencing technical difficulties, contact WebEx Customer Support at 1 866 229 3239.
Welcome: Health IT and Meaningful Use CoP Team

Marc Lassaux, CoP Co-Chair
Colorado Beacon Community

Jason Kunzman, Program Officer
Beacon Community Program, ONC

Timi Leslie, CoP Facilitator
Beacon Community Technical Assistance Program

Erin Campbell, CoP Coordinator
Beacon Community Technical Assistance Program
Today’s Agenda: Innovation!

- Welcome & Overview of Call Objectives
- 2011 ONC Innovations Agenda
- Beacon Community Innovation: “Direct Project Implementations Take Flight,” Rhode Island Beacon Community
- HIT and MU CoP Affinity Group Updates
- Open Discussion & Meeting Adjournment
Guest Speaker:
Wil Yu, ONC
Innovations and Research
Director, Strategic Health IT Advanced Research Projects

Wil.Yu@HHS.gov
Vision

- Transform the current health care delivery system into a high performance learning system
  - Leveraging health information and technology
  - Encouraging an infrastructure for robust health delivery and technology innovation

...meaningful use and widespread health IT adoption are a few steps towards this vision
Principles

• Significant innovation will be required to realize a high performance learning system
  – These innovations will take place in all healthcare stakeholder domains

• An infrastructure encouraging innovation is facilitated by:
  – Monitoring and identifying innovations amongst all stakeholders
  – Communicating innovations to appropriate stakeholders
  – Supporting both the development and diffusion of innovative efforts
Regarding Innovation…

We are a resource to the Beacon Communities
Objectives

I. Environmental Scanning
   – Track the current healthcare environment with respect to innovation; understand the potential impact of ONC programs on innovation

II. Communication & Collaboration
   – Encourage communication and collaboration amongst healthcare stakeholders regarding current and planned innovation

III. Support
    – Identify and engage in appropriate opportunities to foster support for innovation that is aligned with transforming the current health care delivery system into a high performance learning system
A Few Strategies…

• Innovation updates, reports, and analyses across relevant technology domains
  – Current state of health IT innovation
  – Gap analyses
  – Identification of opportunities for collaboration and support
    • e.g. Usability, Clinical Decision Support, Mobile Health
• Facilitate communication between leads of innovation stakeholders
• Innovation Fairs and Summits
• Prizes and Challenges
• DC-to-VC
Federal Stakeholders

- OS / CTO
- AHRQ
- NIH
- CDC
- CMS
- FDA
- HRSA
- OPHS
- SAMHSA
- IHS
- ACF
- AoA

- OSTP / NITRD / U.S. CTO
- Dept. of Commerce
- FCC
- Dept. of Education
- Dept. of Homeland Security
- Dept. of Defense
External Stakeholders

- Vendors
- Institutions of Higher Learning
- Research Organizations
- Trade Associations
- Private Grant-Making Organizations
- Investors
Upcoming Events

• HIMSS
• Launch of Innovation Scanning Program
• Launch of Prizes and Challenges Program
• DC-to-VC in March
  – HIMSS, SXSW, Health 2.0
• Innovation Fairs
  – Mid-Atlantic
  – Mid-West
  – West
Wil Yu, ONC
Innovations and Research
Director, Strategic Health IT Advanced Research Projects

Wil.Yu@HHS.gov
Guest Speaker: Greg Chittim, Rhode Island Beacon Community

gchittim@arcadiasolutions.com
Beacon Communities
Health IT and Meaningful Use
Community of Practice

Rhode Island Quality Institute
Direct Project Pilot
Overview and Project Approach

February 15, 2011

Presented by:
Greg Chittim (gchittim@arcadiasolutions.com)
Project Manager, RIQI Direct Project Pilot
Principal Consultant, Arcadia Solutions
What is the Direct Project?

A secure, scalable, standards-based mechanism to send health information directly to known, trusted recipients over the Internet

A high-visibility, ONC-sponsored, community-driven national project enabling:

– A path to provider Stage 1 Meaningful Use in 2011
– Practical and achievable health information exchange (hie vs. HIE)

More information at:
• http://www.directproject.org
• http://wiki.directproject.org
Who is Involved?

Hundreds of organizations are actively involved, including product vendors, government organizations, clinical groups, and many others including:

- Alere
- Allscripts
- American Academy of Family Physicians
- Argonne National Laboratory
- Atlas Development
- Axolotl
- CareSpark / MobileMD / Serendipity Health
- Cautious Patient
- Cerner
- Clinical Groupware Collaborative
- CSC
- eClinicalWorks
- EHR Doctors
- Emdeon
- FEI
- GE
- Google
- Greenway Medical Technologies
- Harris Corporation,
- High Pine Associates
- HLN Consulting
- ICA,
- Inpriva
- Intel
- Kryptiq
- LabCorp
- Massachusetts eHealth Collaborative
- MedAllies
- Medical University of SC,
- Medicity
- MedNet
- MedPlus/Quest Diagnostics
- Microsoft
- Mirth Corporation
- MOSS
- Nationwide Health Information Technology
- NIH NCI
- NIST
- NYC Dept. of Health and Mental Hygiene’s PCIP
- Oregon HIE Planning Team
- Redwood MedNet
- RelayHealth
- Rhode Island Quality Institute
- Secure Exchange Solutions
- Siemens
- South Carolina SDE
- SureScripts
- Techsant Technologies
- TN State HIE
- VA
- VisionShare
Why Rhode Island?

We (RIQI and pilot partners) are in an unique position to build upon existing national focus and industry leadership with a successful pilot implementation in 2010 and broader adoption in 2011

- RIQI has been involved with the national Direct workgroup since day 1. A key player driving national discussions, and the first in the nation to demonstrate a production provider-to-provider Direct message

- ONC officials have identified Rhode Island and the Pilot as a key national demonstration / spotlight project based on established and funded components of the national strategy:
  - Beacon Community
  - Regional Extension Center
  - Health Information Exchange (as a platform and an activity)
  - First in the nation to demonstrate a production provider-to-provider Direct message

- HIE is a particular legislative, regulatory, and political priority in the state
What Problems will the Pilot Solve?

The Pilot enables an innovative solution to two difficult problems that will face healthcare providers and health information exchanges in the coming years:

**How do providers demonstrate Stage 1 Meaningful Use for health information exchange (hie)?**

**How do you feasibly feed data from hundreds of heterogeneous practices into state Health Information Exchanges (HIE)?**

Direct Project

The RIQI pilot is proving out solutions to both of these use cases.

See a video demo at:
http://www.youtube.com/watch?v=LSTkr45qefQ
**How Does it Work?**

Two distinct use cases will be met: (A) direct provider-to-provider communication that meets Stage 1 Meaningful Use for health information exchange, and (B) transparent clinical updates from the EHR to currentcare, both via Direct.

**Use Case A:**
Manual, direct provider-to-provider message

**Use Case B:**
Transparent updates of currentcare by provider EHRs

**Flow Diagram**

1. **Sending Provider**
   - Mail application (web, outlook, etc…)
   - EHR clinical update made
   - Generate CCD (C32 v2.5)
   - Call Direct client API
   - Address message to currentcare
   - Attach CCD
   - Send message

2. **Health Information Service Provider (HISP)**
   - Properly routed message with patient data attached (optional)

3. **Receiving Provider**
   - Mail application (web, outlook, etc…)

4. **Hosted Participation Gateway**
   - Open message
   - Parse CCD
   - Match Patient
   - De-duplicate Data
   - Load Data
   - currentcare
Next Steps

As the Pilot wraps up, Rhode Island is moving to roll out the technology and processes across the state

• Move system-to-system use case into production
• Recruit additional EHRs to adopt Direct
• Develop Regional Extension Center services as distribution channel
• Roll out to the RI Beacon Community
• Roll out statewide
# Affinity Group Updates

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<th>Affinity Group</th>
<th>Beacon Community Lead</th>
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<th>Today’s Focus</th>
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| **Security & Privacy**              | Mick Talley, Southeast Michigan Beacon Community Collaborative mtalley@university-bank.com | Initializing | • Update on kick off activities  
• Review Statement of Purpose and immediate focus areas |
| **Data Layer/CDR**                  | Marc Lassaux, Colorado Beacon Consortium mlassaux@qualityhealthnetwork.org             | Active   | Update on current activities                                                  |
| **EHR Interoperability/Interfacing** | David Dissinger, Greater Cincinnati Health Bridge Inc. ddissinger@healthbridge.org     | Active   | Update on current activities                                                  |
Affinity Group Update: Security & Privacy

Mick Talley,
Southeast Michigan Beacon Community Collaborative

mtalley@university-bank.com
Affinity Group Statement of Purpose

“The Security & Privacy Affinity Group will evaluate and develop a set of comprehensive policies for governance to ensure standards are in place and agreed upon for interoperability to assure providers and the public that information can be exchanged in a secure environment.”
Initial Topics of Focus

• Framework of Governance (Standards and Interoperability Framework)
• Identity Management
• Liability Mitigation (Cyber Liability Insurance)  
  – By policy and data management pillars and cost?
Affinity Group Kickoff Call
(for Interested Beacon Communities)

• A meeting invite will be distributed to those who have expressed interested:
  – Date: February 25, 2011, 2pm EST
  – Call-in Number: (888) 232-6885, Code: 3047592
  – Call Objectives:
    • Discuss topics and begin group discussion on focused work (‘pre-work’ materials will be sent in advance)
Affinity Group Update: Data Layer/CDR

Marc Lassaux,
Colorado Beacon Consortium

mlassaux@qualityhealthnetwork.org
Affinity Group Update: EHR Interoperability/Interfacing

David Dissinger, Greater Cincinnati Health Bridge Inc.

ddisssinger@healthbridge.org
We Need Agreement in the Following Areas

- xxx
- yyy
- zzz

Transactions

Use cases

Containers/packaging

Transport

Security

Content

Use cases: What function does the user want to perform?

Content:

Containers/packaging:

Transport:

Security:

What information needs to be conveyed?

How should this information be packaged?

What “pipes” should the packages be sent through?

How will the information be protected enroute?
Use Cases for HIEs with Central Repository ("Content")

- **Clinical HIE user requests basic patient summary from HIE**
  - e.g., request for full patient history by an emergency department
  - EHR requirement: send patient summary to HIE

- **Clinical HIE user requests summary information for most recent encounter**
  - e.g., request for summary of information from most recent encounter
  - EHR requirement: send encounter summary to HIE

- **Clinical HIE user sends referral to another provider through HIE**
  - e.g., PCP referral information to Specialist
  - EHR requirement: send referral/consult summary to HIE; receive referral/consult summary from HIE

- **HIE needs incremental data update to central repository**
  - e.g., new information to update HIE repository
  - EHR requirement: send clinical data updates to HIE
Informal Meeting at HIMSS: Activities of the EHR Interfacing Affinity Group

• Meeting Purpose:
  – To better inform the larger Beacon cohort on the activities of the EHR Interfacing Affinity Group (including initial discussions with a targeted group of vendors) and to elicit general feedback and ideas on future collaboration

• Meeting Details:
  – Orlando, Florida on Monday, February 21, 2011 from 12:30-1:30pm EST
  – Room 309A of the Orange County Convention Center

• RSVP to Erin Campbell (campbell_erin@bah.com)
Wrap Up & Adjourn

- Open CoP Discussion: Ideas, observations, questions?
- Reminders:
  - Next CoP Call (6 week cycle)
    - March 29, 2011, 2-3:30 PM EST
  - HITRC Portal (http://hitrc-collaborative.org)
    - Slides and recording
    - Other resources
- Questions or Ideas:
  - mlassaux@qualityhealthnetwork.org
  - leslie_timathie@bah.com