eHealth Exchange

eHealth Exchange New Use Cases Jennifer Rosas, eHealth Exchange Director Didi Davis, Director, Testing Programs January 13, 2017

How Do I Participate?



Your Participation

Open and close your control panel

Join audio:

- Choose "Mic & Speakers" to use VoIP
- Choose "Telephone" and dial using the information provided

Submit questions and comments via the Questions panel

Note: Today's presentation is being recorded and will be provided within 48 hrs

Problems or Questions? Contact Dawn Van Dyke

dvandyke@sequoiaproject.org or 703.864.4062

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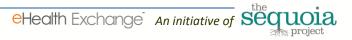
Topics

- Background
- Recent Updates to Specifications
- Life Insurance Use Case
- Radiological Society of North America (RSNA) Image Share Validation Use Case
- Q&A



Background

- The Data Use and Reciprocal Support Agreement (DURSA) serves as an overarching trust arrangement with flexibility to enable participants to share data for a multitude of purposes and use cases, and to adopt a wide range of technologies and standards.
- Historically, specifications have been tailored specifically to the eHealth Exchange, other standards and specifications may be more generically adopted, to provide added flexibility to implementers.
- The Performance and Service Specification Change Process (DURSA, Section 10.03 and OPP #4) enables new specifications to be adopted and for existing specifications to be modified and sunset.



Recent Updates to Specifications

 General Performance and Service Specifications Addendum (Effective Date: 11/19/16)



- Newly adopted Performance and Service Specifications
- A newly proposed process for submitting requests for new use cases
- Clarifies the added flexibility of permitting Participants to voluntarily adopt other standards and specifications for new use cases
- eHealth Exchange Validation Plan (Currently being updated)
 - Describes the scope, approach and Testing process for verifying that an Applicant or existing Participant in the eHealth Exchange community complies with the Performance and Service Specifications



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eHealth Exchange Use Case Process

- Participants or other stakeholders should submit requests for new use cases or specifications to <u>administrator@ehealthexchange.com</u>, including:
 - Requestor name(s) and organization(s)
 - Use Case / Specification Title
 - Brief description of the use case, identifying the applicable specifications
 - Testing Approach: Identify suggested testing approach, if any (e.g. no eHealth Exchange Network testing, partner testing only, reference other authoritative testing process, etc.)
- The CC will consider requests for new use cases at any time throughout the year.



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Summary of eHealth Exchange Approved Use Cases

Treatment / Care Coordination

Enables access to critical information (e.g., test results, medication history, allergy info, immunizations) and makes available to providers when patient is transferred

Responder Only Profile

Enables other networks (e.g., release of info, companies, and SAAS model vendors) to respond to queries from eHealth Exchange Participants on behalf of their client



Military/Veteran Health

DoD and VA exchange active service members and veterans' records to provide government and private caregivers with up-to-date medical histories

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Authorized Release of Information – Disability Determination

Social Security Administration requests claimant records electronically to make disability determinations. Cuts down claims processes *from months to days*



Quality Reporting for the End Stage Renal Disease Program – CMS Enables dialysis centers to send quality data to CMS to assure that individuals with End Stage Renal Disease receive the highest quality of care

Summary of eHealth Exchange Approved Use Cases (2)

Immunization

Enables the push of immunization data for treatment purposes (this is not related to immunization registries)

Authorized Release of Information – Consumer Access to Health Information Enables clinical exchange between patient and provider (e.g. via a Personal Health Record (PHR)

Encounter Alerts

Enables event notification of clinical encounters to patient associated care team members

Prescription Drug Monitoring Program (PDMP)

Enables exchange of PDMP data

Electronic Lab Reporting (in support of public health) Enables electronic lab reporting to public health agencies

Syndromic Surveillance

Enables syndromic surveillance reporting to public health agencies



Summary of eHealth Exchange Approved Use Cases (3)



Authorized Release of Information – Life Insurance (Approved by CC on 12/7/16) Enables life insurance companies to request copies of an individual's medical records for the purposes of making a determination for life insurance benefits

RSNA Image Share Use Case (Approved by CC on 11/15/16)

Enables organizations to share images via the eHealth Exchange.



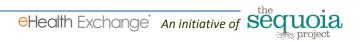
Life Insurance Use Case Summary

Permitted Purpose:

- Previous analysis by legal counsel determined that this use case is very similar to the SSA use case for disability determination and falls under the DURSA Permitted Purpose of Authorization as noted below:
 - "Uses and disclosures pursuant to an Authorization provided by the individual who is the subject of the Message or such individual's personal representative as described in 45 C.F.R. § 164.502(g) of the HIPAA Regulations."

Workflow

- 1. An individual submits an application for life insurance with a life insurance company
- 2. The individual completes authorization form for his/her clinical records to be obtained by the life insurance company for verification purposes
- 3. The life insurance company as a Participant User, sends a query on behalf of the individual to the providers that they have identified along with the HIPAA-compliant authorization
- 4. The query is facilitated through an eHealth Exchange Participant to other eHealth Exchange Participants
- 5. The eHealth Exchange Participant responds to the request and provides a CCD back



Use Case Webinar

RSNA IMAGE SHARE VALIDATION PROGRAM

Why Image Sharing Matters

- Benefit of historical exam during interpretation
- Concerns about cost of imaging over-utilization
 - Redundant exams ordered when recent exams are not accessible
- Radiation exposure reduce unnecessary patient risk due to redundant exams
- Quality
 - Better, more efficient care through easy availability of imaging examinations



Inappropriate Utilization

Up to 20% of imaging exams may be inappropriate

- Defensive Medicine liability concerns
- Patient Demand
- Financial Incentives



- Pressure to minimize overall cost of episode of care
- Physician lack of awareness
- Duplicate exams
 - Results not easily available
 - Patient lack of understanding of exams already performed
 - Fragmented care lack of coordination

Foundational Standards for Image Sharing and Validation

- Ontologies RadLex, SNOMED-CT
- DICOM medical imaging standards
- HL7 messaging and FHIR (Fast Healthcare Interoperability Resources)



- IHE-Integrating the Healthcare Enterprise
 - Organizes the existing standards into practical, efficient workflows

https://www.hhs.gov/about/news/2016/12/20/2017-interoperability-standards-advisory-released.html https://www.healthit.gov/sites/default/files/2017_isa_reference_edition-final.pdf



RSNA Image Share Validation Program

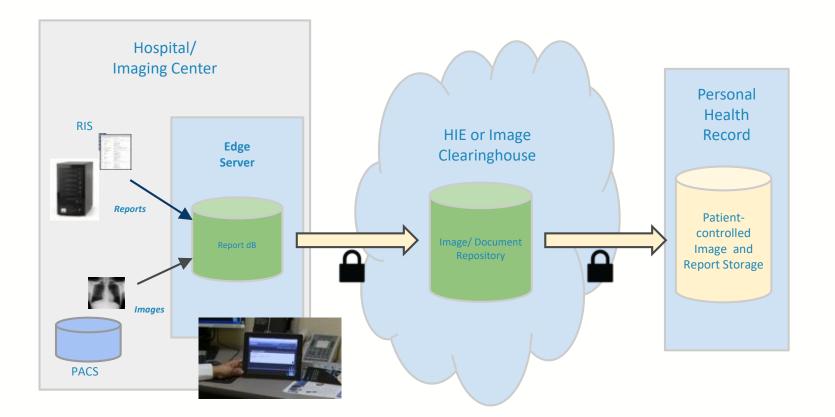
- Fills a national Standards Gap
 - Product conformity assessment testing
- IHE profiles provide specifications for testing
- Modular Standards/Specifications
 - <u>Cross-Enterprise Document Sharing for Imaging (XDS-I)</u> standard for HIE network
 - Document Source and Document Consumer
 - Registry and Repository
 - <u>Cross-Community Access for Imaging (XCA-I)</u> standard to connect HIE networks
 - RSNA Image Share PHR

RSNA[®]

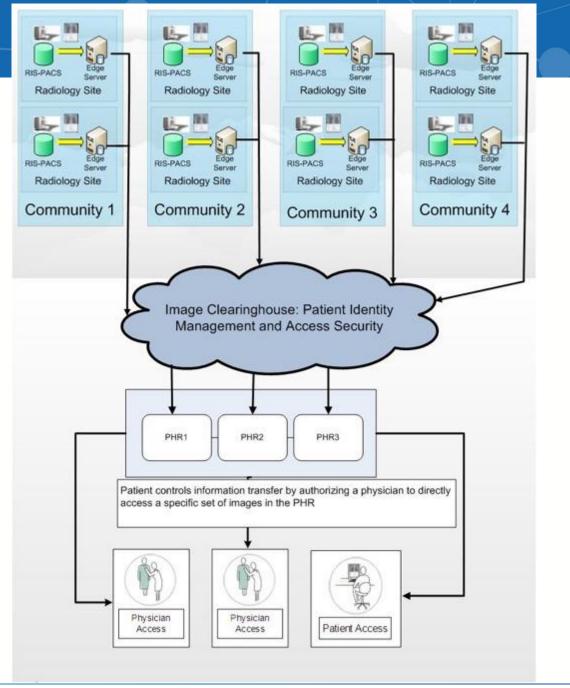
Image Share

VALIDATION

RSNA/IHE Image Share Architecture



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RSNA Image Share Testing Pilot Companies









Healthcare









Opportunities Abound for Interoperable Exchange

- Leverage the growing connectivity footprint in the US and expand to include image exchange
- Inform development of PHR profile that will be deployed nationwide and reflect requirements for image exchange
- Be part of growing movement to broaden connectivity to support care management and population health







Formal Change Process Milestones

Approval Milestones	RSNA Image Share Target Dates	Life Insurance Target Dates
Present to CC for Approval:	11/15/16 - Complete	12/7/16 - Complete
CC Approval:	11/15/16 - Complete	12/7/16 - Complete
Participant Input (Webinar to review updates):	1/13/17	1/13/17
30 day notice to participants:	TBD	TBD
Objection Period Ends:	TBD	TBD
Target Effective Date:	TBD	TBD

Note: The Life Insurance Use Case has been approved by the CC and utilizes existing approved specifications. Any additional specification constraints for this use case will go through the formal change management process. Both use cases will be memorialized in the next version of the eHealth Exchange Validation Plan.

Q & A

For more information: Website: http://www.ehealthexchange.com E-mail: administrator@ehealthexchange.com

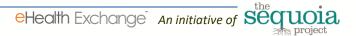


eHealth Exchange Use Case Webinar

REFERENCE SLIDES

Approved Transport and Service Specifications

- The below transport and service specifications have been approved by the Health Exchange Coordinating Committee and are currently in effect. These specifications are not intended to be linked to any particular use case, but are available for implementation across a myriad of use cases.
- <u>eHealth Exchange Approved Specifications</u>:
 - Web Services Registry Web Service Interface Specification v 3.1
 - Messaging Platform v3.0
 - Patient Discovery v2.0
 - Query for Documents v3.0
 - Retrieve Documents v3.0
 - Authorization Framework v3.0
 - Document Submission
 - Publish / Subscribe
 - Direct Secure Messaging Direct Project Applicability Statement for Secure Transport v1.2
 - Fast Healthcare Interoperability Resources (HL7 FHIR[®]) Standard for Trial Use (STU3)



Approved Use Cases and Corresponding Standards (1)

Query / Retrieve Documents•Web Services Registry Web Service Interface Specification v 3.1Supports multiple use cases including treatment / care coordination, transitions of care, referrals, Social security disability benefits determination and individual access to health information, responder only, and immunization.•Messaging Platform v3.0Web Services Registry Web Service Interface Specification v 3.1•Messaging Platform v3.0access to health information, responder only, and immunization.•Patient Discovery v2.0•Query for Documents v3.0••Authorization Framework v3.0•Deferred Patient Discovery•Immunization data requirements•HITSP C32•HLT° C-CDA Release 1.1 and Associated Companion Guide(s)•HL7 °C-CDA Release 2.1 and Associated Companion Guide(s)•HL7 °FLIR®•End Stage Renal Disease Implementation Guide Package [June 30]

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Approved Use Cases and Corresponding Standards (2)

Query / Retrieve Documents	Standards / Specifications
Prescription Drug Monitoring Program (PDMP)	NCPDP, PMIX, SCRIPT, and HL7
Submit Documentation to CMS Currently, CMS accepts data for the End Stage Renal Disease Program (ESRD)	 Messaging Platform v3.0 Authorization Framework v3.0 Administrative Distribution Document Submission Required CMS content requirements (which varies by program)
Authorized Release of Information – Consumer Access to Health Information (e.g. via a Personal Health Record – PHR-DRAFT)	 Web Services Registry Web Service Interface Specification v 3.1 Messaging Platform v3.0 Patient Discovery v2.0 Query for Documents v3.0 Retrieve Documents v3.0 Authorization Framework v3.0 Authorized Release of Information – Individual Access to Health Information (e.g. via a Personal Health Record – PHR-DRAFT)



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Approved Use Cases and Corresponding Standards (3)

Query / Retrieve Documents	Standards / Specifications
Encounter Alerts Electronic Lab Reporting (in support of public health)	 VPN (transport)-DRAFT HL7 v2 (content) Direct Secure Transport v 2.1 HL7 Version 2.5.1 [ELR Implementation Guide]
Syndromic Surveillance (in support of public health)	 HL7 Version 2.5.1 [Public Health Information Network (PHIN) Messaging Guide for Syndromic Surveillance: Emergency Department, Urgent Care, Inpatient and Ambulatory Care Settings]

