eHealth Exchange

All Participant Call

Kati Odom-Bell Didi Davis Jay Nakashima

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

Today's Topics

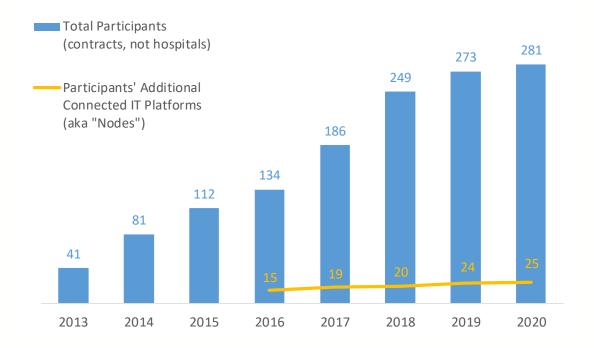
1.	New Participants	Kati Odom-Bell
2.	Electronic Case Reporting (eCr)	Jay Nakashima
3.	Content Validation Reminders	Didi Davis
4.	How to Engage	Jay Nakashima
5.	Questions & Answers	Everyone

New Participants

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Congratulations to our newest Participant!



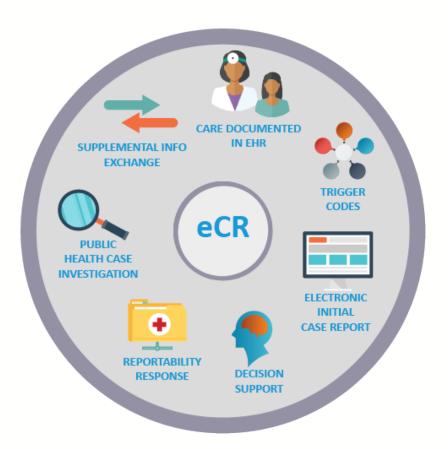


1. Connected Care Health Services, CA

Committed to Improving Patient Care via Data Exchange

Electronic Case Reporting (eCr) eHealth Exchange ©2020 eHealth Exchange. All Rights Reserved.

What is Electronic Case Reporting (eCR)?

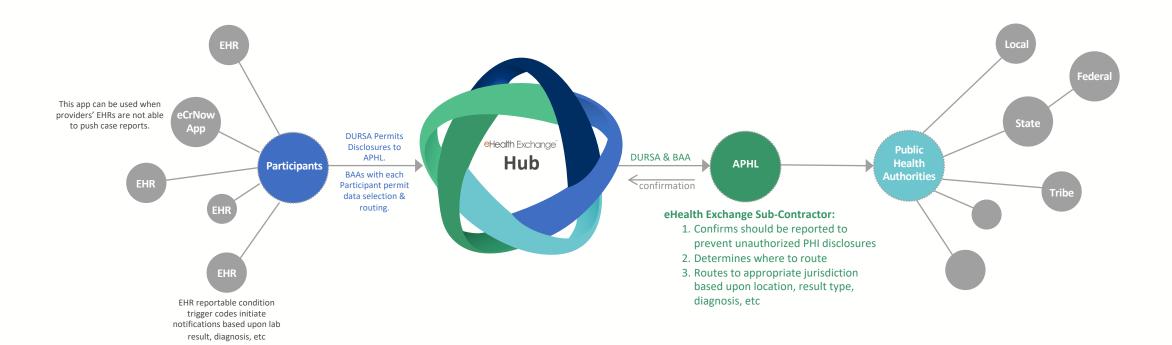


Electronic Case Reporting (eCr) refers to automated generation and transmission of case reports from EHRs to public health agencies for review and action.

Case reporting is used for:

- Real-time monitoring of infectious disease outbreaks at the local, state and national levels
- Outbreak response including investigating possible cases, to help track exposures, origin of outbreak and controlling response activities
- Closed loop communication for the submission of and action needed by

Pushing Electronic Case Reports (eCr)



What data is pushed?

CDA:

History of Present Illness

Reason for Visit

Date of Onset

Diagnoses Date of Diagnosis Symptoms

Laboratory Results

Laboratory Order Code Placer Order Number

Medications Administered

Immunization Status

Death Date

Patient's Travel History

Travel History Start Date

Travel History End Date

Text Description of Travel

Travel Location Code

Travel Location Address

Hospital Unit

Visit Date/Time

Admission Date/Time

Discharge Date

Patient Class

Patient ID Number

Patient Name

Parent/Guardian Name

Patient or Parent/Guardian Phone

Patient or Parent/Guardian Email

Street Address

Birth Date

Patient Sex

Race

Ethnicity

Preferred Language

Occupation

Pregnant

Date of the Report

Report Submission Date/Time

Sending Application

Trigger Condition Codes

HL7 Document ID

SetID and Version Number

Provider ID

Provider Name

Provider Phone

Provider Fax

Provider Email

Provider Facility/Office Name

Provider Facility/Office Name

Provider Address

Facility ID Number

Facility Name

Facility Type

Facility Phone

Facility Address

Facility Fax

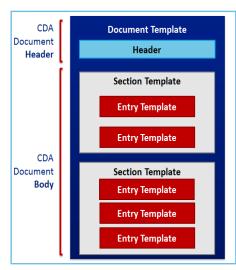
Content Testing Program

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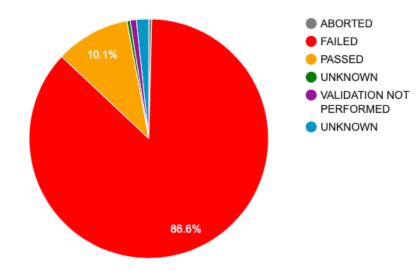
Content Testing Program Background & History

- 1. 06/2015 Testing Workgroup approved by the eHealth Exchange Coordinating Committee (CC)
- 2. 07/2016 Content Testing Pilot Completed
- 3. 01/2017 Requirements Effective
 - MU 2011 Edition (HL7 CCD/C32)
 - MU 2014 Edition (HL7 C-CDA R1.1) + Companion Guide
 - MU 2015 Edition (HL7 C-CDA R2.1) + Companion Guide
- 4. 02/2018 Sequoia Interoperability Testing Platform Launched/Available Content
- 5. 10/2019 All Existing and New Participants MUST Complete Initial Testing
- 6. April 30, 2021 All Participants have 18 months to remediate Reported Errors
 - Participants unable to remediate all errors and conformance issues should submit a remediation plan and/or a conformance waiver request to the eHealth Exchange for Coordinating Committee consideration within 16 months 2021/02



Content Testing Status

- 10% of Eligible Participants organizations have <u>Passed</u>
 - https://ehealthexchange.org/participants/
 Content Validated
- **90**% have Submitted and <u>Failed</u> for various reasons, the most common are:
 - Vocabulary issues such as incorrect code system reference or incorrect value from value set referenced in the Value Set Authority Center (VSAC)
 - Required fields missing such as Street Address or other required
 CCDS data classes US Realm Header Requirements
- >12,000 Documents Tested with >70% tested against HL7 C-CDA
 R2.1 Standards
- Sequoia working with Vendors and their Customers to coordinate remediation



Industry-wide Content Pain Points



Optionality:

More than one way to do things and inconsistent implementations across vendors



Terminology:

Inconsistent terminology usage



Specification Ambiguity



Complexity:

The C-CDA standard is difficult to understand and consume and is lacking in clearly documented examples

Process to Report Questions, Issue, Defects

- Email one question/issue/defect per email to testing@sequoiaproject.org
 - Provide as much information as possible including:
 - Screenshots
 - Testing Permanent Link with Issue
 - Reference details for specification questions/issues

Validate CDA documents



Defects Listing Sample – Issues reported since March 30

KNOWN ISSUES - HL7 C-CDA R2.1

- CONF: 1098-31579 This Error should show as a Warning. This has been reported to HL7 as an Errata (http://www.hl7.org/dstucomments/showdetail_comment.cfm?commentid=1856). It appears that VSAC, which is our authoritative source of truth for the testing tooling related to value sets does not contain ALL the UCUM codes. This effectively brings the valueSet validation to a SHOULD (since it's only a fraction of all valid UCUM for current and near-future). We'll be working with HL7 to help improve the valueSet for the UCUM codes, even though the binding was turned down to a warning.
- CONF:1198-32928 is not a conformance reference in the HL7 C-CDA 2.1 specification and should be labeled CONF:81-32928
- CONF:1198-5372 languageCode and CONF:1198-5407 languageCommunication Code should allow region extension (e.g. en-US is firing an inappropriate error, including type-region is allowed). An errata has been opened with HL7 to address the IP issues with the value set. http://www.hl7.org/dstucomments/showdetail_comment.cfm?commentid=1946 The ISO-639-1 alpha 2 code in lower case for the language, optionally followed by a hyphen and the ISO-3166-1 alpha 2 code for the region in upper case; e.g. "en" for English, or "en-US" for American English versus "en-EN" for England English.

KNOWN ISSUES - HL7 C-CDA R1.1 - Please NOTE that this specification is no longer being maintained by HL7 with regards to Errata processing.

 Any Schematron related Errata found <u>here</u> will likely show as an error that cannot be remediated within the tooling for the foreseeable future as Sequoia depends on HL7 to maintain the Schematron. There are 8 issues logged that are Schematron related.

https://gazellecontent.sequoiaproject.org/EVSClient/home.seam

Please Engage!

We'd love to hear from you

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Technical Work Group

Typical Topics:

- 1. Technical Specification Creation
 - a. Push notifications
 - b. Populating directory with hospital locations
 - c. Broadcast query
 - d. FHIR Directory
 - e. Consumer access
 - f. Carequality harmonization
 - g. Controlled Unclassified Information (CUI) Marking
- 2. Testing
- 3. Hub Updates
- 4. Capacity planning [Final Thursday each month]

Please Attend:

- https://zoom.us/j/5128970748
- Meeting ID: 512 897 0748
- One tap mobile: +16699006833,,5128970748#
- Thursdays at 4-5pm ET, 4/2/2020 through 8/31/2020

How might I obtain additional information?

How	When	Where
 Visit eHealth Exchange Web Site 	Any time	https://ehealthexchange.org
Monthly Participant Web Meetings	Typically, the 3rd Thursday of Each Month at 1 pm ET	https://ehealthexchange.org/events
3. Weekly Technical Workgroup	Thursdays 4-5 ET (April though August+)	https://ehealthexchange.org/events
3. Email	Any time if you have a specific question	administrator@ehealthexchange.org

Questions & Answers

Please e-mail questions or concerns to administrator@ehealthexchange.org