

#### AGENDA







## Highlights

 Query-Based Document Exchange Implementation Guide v2.0 approved by Advisory Council and Steering Committee.



## 2020 Election Process | Steering Committee

Alan Swenson



#### Update

Applications accepted through 11:59pm ET on July 12, 2021

#### **Application Link:**

https://www.cognitoforms.com/TheSequoiaProject1/ 2021CarequalitySteeringCommitteeApplication

#### **Blog Post for more details:**

https://carequality.org/apply-now-for-the-2021-carequality-steering-committee/



# **Project Updates**

Carequality Team



## Certificate Authority (CA)

Bill Mehegan



#### **CA** Update

- The major truststore issues have been resolved
- We are still working with a couple of Implementers on updating their truststores
- Statistics:
  - Issued 86 new Certs since project kick-off
  - Issued 34 Certs in June
  - There's an additional 17 Cert requests that are in flight
- We're still on target for sunsetting Entrust (our current CA) by Nov 1<sup>st</sup>

Please contact Carequality (<u>admin@carequality.org</u>) with any questions/concerns about the new process or the new Certificate Authority



## FHIR Based Exchange

Bill Mehegan



#### FHIR Based Exchange Pilot

- The FHIR Use Case IG was published in December 2020
- We are still seeking volunteers to participate in the piloting of this ecosystem
- If you are interested, please reach out to us <u>admin@carequality.org</u>

#### REMINDER

For any current Document Exchange Implementer, there are <u>no additional fees</u> for FHIR until January 1, 2025



### Query-Based Document Exchange Enhancements

**Chris Dickerson** 



#### **Onboarding & Ongoing Connectivity**

- Non-production testing
  - Stage Directory becomes the Test Ecosystem
  - Test entries must represent the response of production entries
- Advantages
  - Reduces connectivity issues newly Live Implementers see in Production
  - Reduces required coordination between Implementer teams to complete non-production testing
- New stats reporting
  - A variety of new statistics will be gathered from Live Implementers
- Advantages
  - Allows CEQ to verify each Implementer's ability to exchange with all other Implementers on an ongoing basis
  - Better visibility into the volume of traffic between Implementers
  - Improves our understanding of transaction timing which can inform future SLAs



#### **Timelines for Adoption**

- Adoption date
  - We have traditionally adopted the CCA update cycle requirements
  - 30 day objection period started 6/6 with community notice
  - End of the objection period <u>Sunday</u>, <u>July 11<sup>th</sup></u> with the official publishing date of <u>Monday</u>, <u>July 12<sup>th</sup></u>



## **Policy Working Group**

Chris Dickerson and Steve Sullivan



## Beyond Treatment Exchange

- Since go-live, the Carequality ecosystem has been expanding. There
  are now a variety of organizations with use cases that were never
  envisioned
- The group is continuing their work considering the Patient Request
   Permitted Purpose

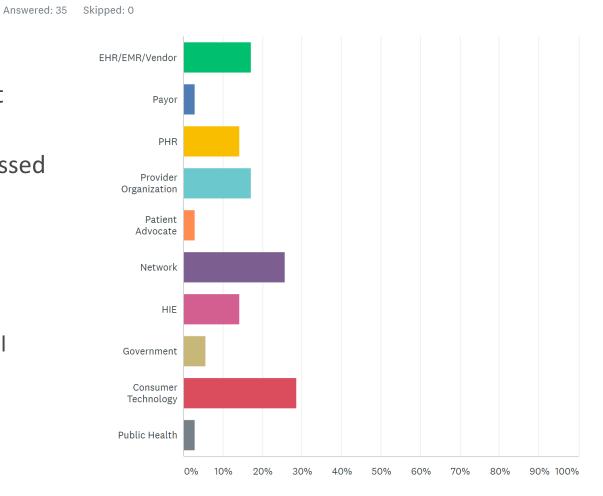
If you are interested in joining the group (space is limited), please send your request to <a href="mailto:Admin@carequality.org">Admin@carequality.org</a>



#### **Patient Request Survey Responses**

Please select your organization type(s)

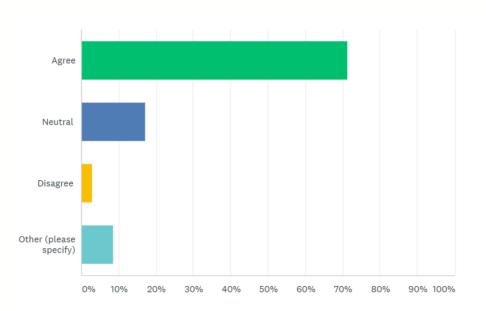
- Survey was intended to gauge the group's consensus on a few key issues related to Patient Requests
- The findings were discussed at last week's meeting
- Respondents:
  - 35 Responders
    - 27 Policy WG
    - 8 Advisory Council
  - All questions were required





# #3 The Policy Working Group should continue to pursue a method(s) to further encourage Patient Request response within the Query Based Document Exchange Use Case.

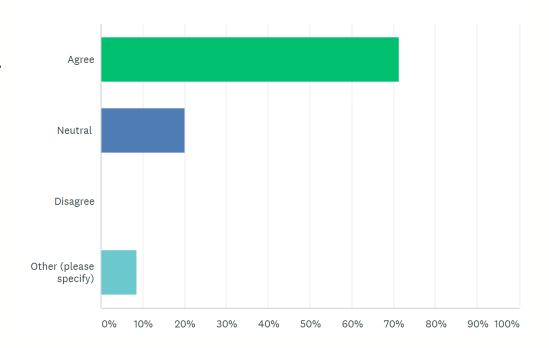
- Key takeaways
  - Large consensus that basic
     FHIR credential flow alone isn't
     enough. This may be in part
     due to disagreement of CDAs
     over FHIR in previous question
  - "The FHIR/OAuth approach will be faster, more robust, and better aligned with national direction for Patient Request of their data. And using CDA over FHIR, it will give a comparable dataset while sidestepping the challenges of Patient Request via QBDE."





# #5 A Patient Matching tiger team or working group should be formed to improve demographics based matching.

- Key takeaways
  - We will work to get this started!
  - Should look at coordinating with other efforts going on or previously published such as from Sequoia Project or ONC





#### **Takeaways**

- The Policy Workgroup will continue work on:
  - Payment, Healthcare Operations, and Public Health

#### New Patient Matching Workgroup!

- A new workgroup has been organized to address demographics-based matching. A few initial topics:
  - Policy requirements for vendors to allow their customers to leverage improved techniques
  - IAL2 validation/monitoring
- If you are interested in joining the group, email <u>Admin@carequality.org</u>
  - Note: Spaces are limited



#### **Push Notifications**

**Chris Dickerson** 



#### Push Notifications Next Steps

- In order to ensure smooth onboarding at launch, we plan to conduct a proof of concept test of the new Implementation Guide
  - Proof of Concept Testing First Meeting: August 2021
    - Organizations interested in joining our tests are invited to contact us at <u>Admin@carequality.org</u>
- We plan to integrate any findings into the guide ahead of final approval
- Still looking for additional EHR or hospital partners
- Push Notification Implementation Guide:
  - https://build.fhir.org/ig/DavidPyke/CEQSubscription/StructureDefinition-CEQextension.html



## **Production Operations Update**

Alan Swenson









**Questions?** 

# Thank you

