



carequality

Carequality Monthly Information Call

January 25, 2018

Agenda

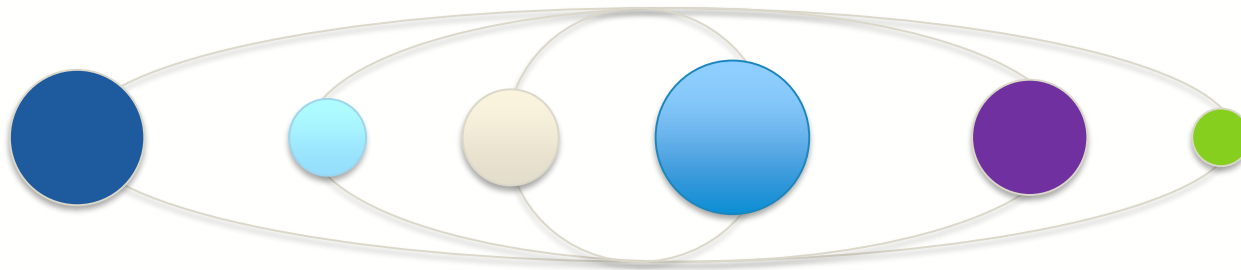
- Carequality Intro
- Query-Based Document Exchange Implementation Guide
- Production Operations Update
- TEFCA
- Your Questions



Carequality Overview

The Situation

Communities of data sharing partners have formed, brought together by specific needs.



Some are geographically based, but many other types of data sharing communities also exist.

The Solution

Carequality creates a standardized, national-level interoperability framework to link all data sharing networks



Carequality is creating a web of interconnected communities

The Power of Connecting Communities

*How do you get nationwide connectivity?
Clinic by clinic, hospital by hospital?*

Data sharing networks have already connected many participants. The connections grow exponentially by connecting these user communities to one another, as groups.

➔ If you connect six clinics, you might reach a few dozen physicians.

➔ If you connect six networks, you can reach thousands of physicians.

Carequality Framework

- The Carequality Framework includes a number of elements:
 - Carequality Connected Agreement
 - Carequality Connection Terms
 - Dispute Resolution Process
 - Technical Trust Policy
 - Query-Based Document Exchange Implementation Guide
- Documents are available for reference on the Carequality Wikispaces and our public website:

<http://carequality.wikispaces.com/Carequality+Framework>

<http://sequoiaproject.org/carequality/resources/>

Carequality Members



Query-Based Document Exchange Implementation Guide

Background

- Over the past year+, the Carequality community has been developing updates to the Query-Based Document Exchange Implementation Guide
- We're very nearly at the finish line!
- The Steering Committee has adopted the new version, with the recommendation of the Advisory Council
- Implementers have an opportunity to object to the new version, through Friday, February 23rd
- The new version will go into effect on Monday, March 26th, unless more than a third of implementers object

Policy Assertions

- Most of the IG updates focus on a structure of “Policy Assertions”
- The Policy Assertions allow Query Initiators to provide additional information about the circumstances of a query, which may be helpful in meeting Query Responders’ local access policy requirements
- Query Responders can also use the structure to indicate which assertion(s) would allow access policy requirements to be met, so that Query Initiators can take appropriate action (e.g. by collecting a consent form), before re-querying
- Examples of Policy Assertions:
 - The query responder has collected its own consent form from the patient, and the form is available to be retrieved electronically from the query responder
 - The query is occurring in the context of a medical emergency
 - The query is initiated directly by the patient, whose identity has been verified in a manner compliant with NIST Identity Assurance Level 3

Permitted Purpose List – Additional Purposes

- **Section: 3.1**
- **Background:**
 - The original IG included a permitted purpose of “Authorization-Based Disclosures”
 - There is no specific NHIN PurposeOfUse code that matches this purpose
 - Two sub-categories of authorization-based disclosures, Patient Request and Coverage Determination, were added as new permitted purposes
 - To avoid prohibiting other potential authorization-based exchanges, an “Other Authorization Based Disclosures” purpose was retained
- **Related Policy Decisions:**
 - Ensure that Patient Requests are defined in a way that is not artificially limiting for devices operating at the patient’s direction
 - Allow Query Initiators to use most NHIN PurposeOfUse values that aren’t otherwise defined for Carequality permitted purposes, to represent the “Other Authorization-Based Disclosures” permitted purpose

Non-Discrimination – Other Auth-Based Disclosures

- **Section:** 4.2
- **Policy Decisions:**
 - Given the flexibility provided to Query Initiators to choose an NHIN PurposeOfUse value in good faith, but without specific Carequality definition, provide Query Responders with broad latitude in choosing which queries for the “Other Authorization-Based Disclosures” permitted purpose they will honor
 - Acknowledge that future work is expected to more tightly define the use of authorization-related PurposeOfUse values, after which non-discrimination rules can also be tightened to match those for other permitted purposes

Full Participation: Orgs w/o Electronic Clinical Info

- **Section:** 3.2
- **Definition:** What is an “organization without electronic clinical information”?
- **Policy Decisions:**
 - In the interest of providing access to information that will improve patient care, those organizations who genuinely have no electronic medical record and can’t reasonably respond to a query, are permitted to initiate queries, through a third party portal or conceptually similar mechanism, without the requirement to also be query responders
 - Note, having an EHR that doesn’t support Carequality’s specs does NOT meet the definition for this exception
 - Any Implementer or Carequality Connection using this exception must be identified with a specific “Organization-Type” value in the Carequality Directory

Full Participation: EMS Providers w/Alternative Data Sharing Methods

- **Section:** 3.2
- **Definition:** What is an EMS provider?
- **Definition:** What does it mean to have an “alternative data sharing method”?
- **Policy Decisions:**
 - In order to support more informed patient care in emergency situations, and acknowledging that EMS systems are optimized for the distinct workflows of EMS providers, these providers are permitted to be query initiators without supporting query response capabilities, as long as they generally provide useable data to the facility to whom they transport the patient (for example, an ambulance crew may submit a run report to the hospital via Direct message, or even fax)
 - Any Implementer or Carequality Connection using this exception must be identified with a specific “Organization-Type” value in the Carequality Directory

Production Operations Update

Current Carequality Connected Agreement Signees

HIEs and HINs



Technology Vendors



Service Providers



PHRs



In Production:



Estimated 2 million clinical documents exchanged monthly

Estimated 11 million clinical documents exchanged since July 2016

TEFCA

Your Questions

Thank You!