



**Carequality Steering Committee
Meeting Minutes**

December 4, 2019 | 2:30pm – 4:00pm ET

MEETING PARTICIPANTS

Steering Committee Members

- Jitin Asnaani, CommonWell
- Mike Baillie, United Healthcare
- ✓ Nancy Beavin, Humana
- ✓ Jennifer Blumenthal, OneRecord
- ✓ Steve Bounds, SSA
- ✓ Proxy for Ryan Bramble, CRISP
- ✓ Hans Buitendijk, Cerner
- ✓ David Camitta, CommonSpirit Health
- Kedar Ganta, athenahealth
- ✓ Michael Hodgkins, AMA [Chair]
- ✓ Ryan Howells, CARIN Alliance
- Leslie Kelly-Hall, Healthwise
- ✓ Rob Klootwyk, Epic
- ✓ Steven Lane, Sutter Health [Vice-Chair]
- Candice Levy, Bluestone Physician Services
- Kathy Lewis, Surescripts
- Tushar Malhotra, eClinicalWorks
- ✓ Alan Swenson, Kno2

Invited Subject Matter Experts and Carequality Support Team

- ✓ Dave Cassel, Executive Director, Carequality
- ✓ Chris Dickerson, Program Coordinator, Carequality
- Mariann Yeager, CEO, The Sequoia Project
- Eric Heflin, CTO/CIO, The Sequoia Project
- Didi Davis, Testing Programs Director, The Sequoia Project
- Dawn Van Dyke, Marketing Director, The Sequoia Project
- Bill Mehegan, The Sequoia Project
- ✓ Berdine Roque, Executive Assistant, Carequality
- Steve Gravely, Gravely Group
- Mark Segal
- ✓ Seth Selkow, Advisory Council Co-Chair, Kaiser Permanente

AGENDA

- Welcome, Roll Call, Agenda Review
- Administrative Items
- Carequality Advisory Council Applications and Selection [Closed Topic]
- 2020 Projects and Plans
- Content Testing

Establish Quorum / New Business

Discussion Summary: The meeting was called to order at 2:30pm ET. Roll call was facilitated to identify the Carequality Steering Committee and invited subject matter experts present with attendance noted above.

Decision/Outcome: A formal quorum was declared. No new business was raised.

Action/Follow-up: N/A

Administrative Items

Meeting Minutes

Discussion Summary: The minutes for the November 7, 2019 Carequality Steering Committee meeting were presented for approval. A motion was made to approve the minutes and it was seconded for approval. There were no questions, oppositions, or abstentions.

Decision/Outcome: The minutes for the November 7, 2019 Carequality Steering Committee meeting was approved.

Action/Follow up: The approved meeting minutes will be considered final and archived.

Carequality Advisory Council Appointments [Closed Topic]

Discussion Summary: Management reviewed the background on the Carequality Advisory Council Selection. Up to 15 Carequality Advisory Council seats can be filled. The Carequality Steering Committee proposed seven individuals from among the original applicant pool (noted below). For the remaining (up to) eight seats, the Committee chose to perform recruitment that would broaden the Council's stakeholder representation to be closer to what is envisioned in the charter. Management thanked the Committee members who assisted with recruitment, as a number of good candidates were received.

Proposed Partial Slate from Previous Meeting 11/7/19

Ryan Stewart, CommonSpirit | Health Provider Organizations

Michael Marchant, UC Davis | Provider Organizations

David Mendelson, IHE | SDOs

Therasa Bell, Kno2 | Networks

Sagnik Bhattacharya, PatientPing | Vendors

Navi Gadhiok, eClinicalWorks | Vendors
Doc DeVore, MatrixCare | Vendors (LTPAC focus)

Management presented the list of additional volunteers resulting from the recruitment drive:

- Larry Garber, MD, Reliant Medical Group | Physician Organizations
- Chris Voigt, Privia Health | Physician Organizations
- Debi Willis, patientlink | Patients
- Shannah Koss, Livpact | Patients
- Scott Stuewe, DirectTrust | SDOs
- Julie Maas, EMR Direct/DirectTrust | SDOs
- Paula Braun, CDC | Public Health
- Amit Shah, Florida Blue | Health Plans
- Marty Prah, SSA | Government Agencies

Additional Notes - Julie Maas was part of the original applicant pool; however, Management did not realize at the time that she is the Chair of DirectTrust's SDO body. Shannah Koss is a current Council Member who originally missed the application deadline but is willing to continue serving. Up to eight additional members can be selected.

Management presented the Advisory Council Composition Recommendations for reference.

Decision/Outcome: The seven members of the proposed partial slate from the previous meeting, and all members of the additional volunteer list with the exception of Julie Maas, were appointed to the Council. Since Julie's primary representation would have been the DirectTrust SDO arm, she would have duplicated Scott Stuewe's representation.

Action/Follow up: All applicants will be informed of the outcome.

2020 Projects and Plans

Discussion Summary:

Potential Projects for 2020 include:

Information Blocking: Workgroup to evaluate CCA, Query Implementation Guide, and other policies and propose changes as needed to align with Info Blocking final rule.

CCA Updates: Working group of Implementer community to discuss next round of changes, including federal agency considerations, timelines for adoption, and "structural internationalization".

Content Enhancements: Slated to begin right away in January; in-kind support being provided for workgroup facilitation/writing.

"Phase 2" Enhancements for Current Projects: Image Exchange, FHIR, Push Notifications

Additional Notes - The current phases of work for Image Exchange, Push Notifications, and FHIR are all likely to end in a similar timeframe, around June 2020. We presumably will want to do

“Phase 2” work for each of these, with the primary question being when such work should begin. Chris and Bill will have limited involvement in RCE work until Grant Year 2 begins in September 2020.

Management presented the following straw proposal: Move forward with the Content Workgroup right away. From a staffing perspective, this largely replaces the Implementation Guide Updates Workgroup which is wrapping up. Move forward with Information Blocking analysis as soon as final rule is released. Hold on CCA updates, with the possible exception of a quick change to clarify amendment timelines, until Information Blocking impact – both in terms of staff commitment and overall disruption – is more fully known. Tentatively plan on phase 2 work for FHIR, Image Exchange, and/or Push Notifications beginning in Fall 2020. Re-evaluate and prioritize late summer based on initial rollout status, staffing given above projects and RCE work, and Info Blocking impact.

The Committee was generally favorable to this straw proposal. It was pointed out that in planning for work on Content, management will also need to account for the effort involved in developing the policy and procedure around content testing with respect to the previous round of content recommendations. Another Committee member pointed out, with respect to information blocking, that appropriate staff resources could be limited across the industry, and that it would be wise to have a plan in place and volunteers lined up ahead of the final rule’s release.

With respect to CCA Updates, the Committee felt that it would be important to move forward to address feedback from the federal agencies, as well as any remaining cleanup from the recently concluded 2019 amendment process, right away, rather than awaiting review of the final information blocking rule.

Decision/Outcome: N/A

Action/Follow up: Management will plan for work to occur as discussed. These plans will be reflected specifically in the 2020 budget presented to the Carequality Board.

Content Testing

Discussion Summary:

Operational Content Testing – Background

Pending updates to the Query-Based Doc Exchange Implementation Guide require implementers and some other relevant “content creators” to complete validation of their content against Carequality’s standards. These standards are the CommonWell/Carequality Joint Document Content Workgroup recommendations, which themselves rely on C-CDA template definitions. The Implementation Guide refers to a testing program that will be more fully defined in a supplement/separate policy document but envisions having one or more approved content testing platforms. The Sequoia Project operates a content testing program, but neither the workgroups nor staff want to assume its selection/sole standing. The Steering Committee had previously focused on ONC’s content testing tools. We were able to take a deeper dive on those

tools with the Advisory Council, given information from ONC not available during the last Steering Committee discussion on this topic.

ONC has both content testing related to EHR certification, and a C-CDA Scorecard. The C-CDA Scorecard is the mechanism that could be adapted for Carequality's use. Generally, the Scorecard incorporates requirements/recommendations that have been approved by HL7. The Scorecard would not, as hosted by ONC, provide a specific "Carequality score"; our requirements could be part of the overall package. It is not yet clear that ONC would be able to incorporate our requirements without them being adopted by HL7. The Scorecard code is open source, and could be adapted by us in-house. This negates the primary perceived advantage, of using the same system that vendors use for certification. If we are going to do development work, it is very likely that the existing Sequoia Project content testing program could be adapted more easily to suit our requirements.

The Council was less optimistic about the ONC tools after the presentation. One Council member had mixed reviews (at best) of the Sequoia Project tools, and the others in attendance had little experience of them. While this is also a topic for future discussion, it's likely that Carequality will rely on the Sequoia Project tools for image exchange validation. Would it be helpful to have Sequoia staff present on the tools?

Decision/Outcome: The Committee had no objection to a presentation from The Sequoia Project's content testing staff. However, the Committee remains interested in pursuing ways to have our requirements incorporated into the C-CDA Scorecard.

Action/Follow up: Staff will look into what would be necessary with respect to action by HL7 to pave the way for the C-CDA Scorecard.

Production Operations Update

Discussion Summary: Management welcomed three new CCA signees: Ambra Health, lifelImage, and Philips. Management reported that statistics have been updated to reflect over 80 million patient documents exchanged in September 2019 and we are likely approaching 500M documents exchanged since July 2016.

Decision/Outcome: N/A

Action/Follow up: N/A

Meeting was adjourned at 4:00pm ET