



Carequality Advisory Council Meeting Minutes

November 20, 2019 | 1:00pm – 2:30pm ET

<https://www.gotomeet.me/Carequality>

Conference Number: (312)757-3121, passcode: 773758021#

Meeting Participants

Carequality Advisory Council Members

- ✓ Brian Clay, UC San Diego
Seth Selkow, Kaiser Permanente
- ✓ Sid Thornton, Intermountain Healthcare
Sandy Chung, Fairfax Pediatric Associates
Terri Ripley, OrthoVirginia
- ✓ Mike Banfield, CRISP
- ✓ Rim Cothren, CAHIE
- ✓ George Gooch, THSA/HIE Texas
Derek Plansky, HealthIE Nevada
Katherine Thorpe, Surescripts
Niko Skievaski, Redox
Therasa Bell, Kno2
Brian Yeaman, Coordinated Care Health Network
- ✓ Stacy Gill, MIB
- ✓ Peter DeVault, Epic
- ✓ Josh Parker, athenahealth
Kedar Ganta, GE Healthcare
- ✓ Doc Devore, MatrixCare
Navi Gadhiok, eClinicalWorks
AJ Peterson, Netsmart
Dan Werlin, NextGen Healthcare
- ✓ (Proxy for) Janine Akers, DataFile Technologies
- ✓ Gretchen Bebb, TheraTech Pathways
- ✓ Sagnik Bhattacharya PatientPing
McLain Causey, Experian Health

- ✓ Shannah Koss, LivPact, Inc.
David Mendelson, IHE
Matthew Shuler, Blue Cross Blue Shield Association
- ✓ James Murray, CVS Health
(Proxy for) Margaret Donahue, Veteran's Health Administration

Invited Subject Matter Experts and Carequality Support Team

Chris Dickerson, Carequality
Dave Cassel, Executive Director, Carequality
Dawn Van Dyke, Marketing Director, The Sequoia Project
Didi Davis, Testing Director, The Sequoia Project
Eric Heflin, CTO/CIO, The Sequoia Project
Mariann Yeager, CEO, The Sequoia Project
Michael Hodgkins, AMA, Carequality Steering Committee Chair
Steven Lane, Sutter Health, Carequality Steering Committee Vice-Chair
Bill Mehegan, Carequality
Berdine Roque, Executive Assistant, Carequality

Meeting Summary

Establish Quorum / New Business

Discussion Summary: The meeting was called to order at 1pm ET. Roll call was facilitated to identify the Carequality Advisory Council members present with attendance noted above. The agenda (noted below) was reviewed.

Agenda

- Welcome, Roll Call, Agenda Review
- Administrative Items
- Query-Based Document Exchange Enhancements [Inform/Advise]
- Update on CCA Amendment Process [Inform/Advise]
- Content Testing [Advise]
- Other Project Updates [Inform]
 - Push Notifications
 - FHIR Workgroups
 - Image Exchange Implementation Guide
- Production Operations Update [Inform]

Decision/Outcome: A quorum was declared, and no new business was raised.

Action/Follow up: N/A

Administrative Items

September Meeting Minutes

Discussion Summary: The minutes for the September 18, 2019 meeting were presented for approval.

Decision/Outcome: There were no questions regarding the minutes. A motion was made to accept the minutes and it was seconded; thus, the September 18, 2019 Carequality Advisory Council meeting minutes were approved. There were no abstentions or oppositions.

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

Carequality Advisory Council Application Process Update

Discussion Summary: Management provided an update to the Carequality Advisory Council application process. The deadline to apply was Monday, October 14, 2019. Management thanked all who have reapplied. Applications will be reviewed with the Carequality Steering Committee and inform all applicants of the result prior to the Carequality Advisory Council meeting in December.

Decision/Outcome: N/A

Action/Follow up: N/A

Carequality Board Seats

Discussion Summary: Management informed the Advisory Council that two seats may become available on the Carequality Board in the next few months. The Carequality Steering Committee is the executive body to the Carequality framework, while the Carequality Board has oversight of the operations of Carequality, Inc., the corporate entity that operates the Carequality framework. The Board's primary focus includes budgeting and financials, hiring of contractors, strategy, and pricing. Those interested in being considered for a Board seat may email Dave Cassel and Berdine Roque.

Decision/Outcome: N/A

Action/Follow up: N/A

Carequality Annual Meeting

Discussion Summary: The Annual Meeting will be held on Thursday, December 5th through Friday, December 6th, 2019, at the Gaylord National Harbor, MD (outside of Washington DC). Details for the session on December 5th are being finalized, which will include sessions from The Sequoia Project that relate specifically to the Recognize Coordinating Entity role and attendance is encouraged. The bulk of the Carequality sessions will be held on December 6th with the expectation to conclude around 2pm. The cost to attend the Carequality meeting is \$350, which will help defray costs. The meeting agenda and registration will be published soon.

Room reservations are now open: <https://book.passkey.com/event/49917872/owner/54055/home>

For more information: <https://carequality.org/get-involved/events/annual-meeting-19/>

Decision/Outcome: N/A

Action/Follow up: N/A

Query-Based Document Exchange Enhancements [Inform/Advise]

Discussion Summary: A draft redline is under final review by the workgroup and should be ready for the Carequality Advisory Council's review at the December meeting. Management provided the following conclusions of the workgroup for the Carequality Advisory Council's review and feedback.

The workgroup's core areas of focus were to create or update an operational approach for verifying compliance with any document content requirements; updates recommended by the Advancing Patient Queries Working Group and additional policy specifications around patient queries that will facilitate adoption; review of, and consideration of updates to, the current required reporting measures; and policy updates in support of Operations, Coverage, and potentially Payment queries.

Management discussed the operational approach for verifying compliance with any document content requirements. A structure was created within the Implementation Guide that references the testing program without going beyond Phase One specifics on the types of organizations being tested. Specifics of the tested items based on the JDCWG's White Paper will be defined by the testing program. There is a lot of complexity around the consideration of a content testing program, who it will apply to, and how the content creator is defined. More information will be shared as this progress continues.

The workgroup reviewed reporting and ongoing connectivity validation, as current reporting is useful but insufficient and ongoing connectivity validation procedures need to be refreshed and expanded. The workgroup is proposing expanded reporting on connectivity and exchange volumes and introducing reporting on response times. No action is proposed at this point regarding response times; the reporting is to gather information for future consideration.

Regarding the Payment and Health Care Operations Purposes of Use, policy updates were made to ensure that Implementers are making the capability to honor queries for Payment, Health Care Operations, and Patient Requests available to their CCs. This will be formally required six months after the end of the cycle and start of the new Implementation Guide. There are several considerations, including the likely direction of the information blocking rules and ensuring that the participants are not set up for information blocking and Carequality is in a good spot with respect to information blocking and supported rules. General support was expressed by a few council members regarding this update.

Regarding the Patient Request Purpose of Use, specific updates were made based on the recommendations of the Advancing Patient Queries Working Group. These additional requirements improve transparency in patient data use, which should benefit patients and increase trust between Implementers. This is in alignment with the requirements of the CARIN Alliance Code of Conduct.

Decision/Outcome: N/A

Action/Follow up: N/A

Content Testing [Advise]

Discussion Summary: Pending updates to the Query-Based Document Exchange Implementation Guide require implementers and 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 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 the workgroups and staff do not want to assume its selection/sole standing. The Carequality Steering Committee has primarily focused to date on ONC's content testing tools.

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 provide a specific "Carequality score"; requirements could be part of the overall package. It is unclear 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 in-house, which negates the primary advantage of using the same system that vendors use for certification. If development work will be performed, it is likely that the existing Sequoia Project content testing program could be adapted more easily to suit Carequality requirements.

Management is seeking the Carequality Advisory Council's feedback on the ONC tools, if other options should be explored, and the most appropriate mechanism for ensuring a fair selection.

Decision/Outcome: The group generally agreed that it is reasonable to consider the allowance of multiple test platforms provided they meet the requirements and there is establishment of a reasonable way to evaluate that. Management requested that any further thoughts or feedback are shared with Dave Cassel offline as well.

Action/Follow up: N/A

Other Project Updates [Inform]

Push Notifications

Discussion Summary: The workgroup determined that operationalizing Argonaut's work would be the best path forward. The Technical Workgroup has spent a significant amount of time discussing high-level technical goals for a Push Notification architecture that meets the goals outlined in the Use Case Proposal. Most existing frameworks such as DIRECT or certain HL7v2-based solutions were either outmoded, missing key functional requirements, or not widely supported enough to warrant pursuing. Of the approaches assessed, the Argonaut and DaVinci draft implementations were two of the most influential industry groups available. The Argonaut implementation of FHIR Push Notifications was the most compatible with Carequality's needs because it includes concepts surrounding a Subscription which is not currently modeled in the DaVinci approach. Changes are inevitable given the state of development; however, these changes will be less burdensome than adopting an existing technology with the intent to migrate to a completely new technology later or if we developed our own FHIR-based approach.

The timeline for adoption is dependent on a variety of factors including regulatory considerations and the development schedules of vendors interested in the enabling this capability. A Push Notifications Implementation Guide could be developed by the latter portion of the first quarter of 2020. Pending approval by the Carequality Advisory Council and Carequality Steering Committee, the document could be available for community comments in the second quarter of 2020. Adoption by vendors would be largely dependent on interest relative to other initiatives and priorities.

Decision/Outcome: N/A

Action/Follow up: N/A

Push Notifications Technical Workgroup

Discussion Summary: The Technical Workgroup is considering how to adopt and adapt the work of Argonaut and has initiated collaboration with the Argonaut team.

Decision/Outcome: N/A

Action/Follow up: N/A

Push Notifications Policy Workgroup

Discussion Summary: The Policy Workgroup is working on the policy side of the draft Implementation Guide. The group has considered the roles of various actors within Push and how they relate to the greater Carequality ecosystem.

Decision/Outcome: N/A

Action/Follow up: N/A

FHIR Technical Workgroup Update

Discussion Summary: There have been two successful Connectathons in 2019. The first event was held in May and 80% of the participants were able to write to the Carequality Directory. In the second event in September, scalable ecosystem trust models were successfully tested for security and privacy, enabling cross-organization queries and reusable credentials. Dynamic client registration was also successfully tested and multiple parties were able to accompany JWT-based authentication in a complete trusted workflow. The third event will coincide with the Carequality annual meeting at The Gaylord National Harbor on December 4th. Those interested in participating are requested to send an email to admin@Carequality.org. As a next step, the workgroup will be performing additional development of more specific Certificate and Dynamic Registration workflows into the Draft Implementation Guide, which can be found here: <https://docs.google.com/document/d/1iOour1orfMpYS30L2AU2wajZRXL7p6YWlk5F61TcZ1M/edit>

Decision/Outcome: N/A

Action/Follow up: N/A

FHIR Policy Workgroup Update

Discussion Summary: The first draft of the Policy Implementation Guide Outline is available here: <https://docs.google.com/document/d/1e-6sjXnze0kIndJZRYQw0sY6LYa8KxIhPc1Ao71OpQ/edit>. The workgroup is actively reviewing comments/feedback submitted by the group and incorporating necessary updates to the document. This will continue for approximately the next month before next steps are identified.

Decision/Outcome: N/A

Action/Follow up: N/A

Image Exchange Implementation Guide

Discussion Summary: Several public comments were submitted regarding the draft Implementation Guide supplement: <https://carequality.org/wp-content/uploads/2019/06/Imaging-ExchangeIG-20190620-DRAFT-v1.pdf>. The comments are currently being reviewed and dispositioned and the draft will be updated accordingly. Adoption of a final version by the Carequality Steering Committee is targeted in the latter portion of the first quarter of 2020. The group is also working in collaboration with RSNA on recruiting initial rollout participants, as the Carequality Board has recently approved early adopter pricing to help encourage participation.

Decision/Outcome: N/A

Action/Follow up: The draft redline will be shared with the Carequality Advisory Council upon receipt of final information.

Production Operations Update [Inform]

Discussion Summary: Management presented an updated graphic to represent the scale of the Carequality community.

Management provided an update on document exchange statistics, as most of the stats are in for September. Even with some key precincts not yet reporting, there are at least 56M documents exchanged in September. A more accurate running total of the documents exchange over time will be compiled, as these have been significantly underreported since April.

Decision/Outcome: N/A

Action/Follow up: N/A

The meeting was adjourned at 2:30pm EST.