



Carequality Steering Committee
Ad Hoc Meeting Minutes
March 25, 2020 | 5:00pm – 6:00pm ET

MEETING PARTICIPANTS

Steering Committee Members

- ✓ Paul Wilder, CommonWell
Mike Baillie, United Healthcare
- ✓ Nancy Beavin, Humana
- ✓ Jennifer Blumenthal, OneRecord
Steve Bounds, SSA
- ✓ 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
Didi Davis, Testing Programs Director, The Sequoia Project
Dawn Van Dyke, Marketing Director, The Sequoia Project
Bill Mehegan, Program Manager, Carequality
- ✓ Berdine Roque, Executive Assistant, Carequality
- ✓ Steve Gravely, Gravely Group
David Getman, The Sequoia Project
Seth Selkow, Advisory Council Co-Chair, Kaiser Permanente
Michael Marchant, Advisory Council Co-Chair, UC Davis Health

AGENDA

- Welcome and Background
- Carequality and COVID-19

Establish Quorum / New Business

Discussion Summary: The meeting was called to order at 5:00pm 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

COVID-19 Healthcare Coalition

Discussion Summary: An overview was provided on the COVID-19 Healthcare Coalition, which is a private sector led coalition formed to promote COVID-19 response projects. Management requested the Committee's guidance on Carequality's potential participation, as several Carequality Implementers and Connections are participating.

Decision/Outcome: The group generally agreed to monitor progress, but delay participation until additional details and expectations are available.

Action/Follow up: Management will provide additional information as it is received.

Carequality Response to COVID-19

Discussion Summary: The Steering Committee has adopted a temporary Policy waiving some requirements around query initiators also being query responders.

Acceleration of the eHealth Exchange's onboarding to support PULSE-COVID-19 is currently underway. Management discussed the eHealth Exchange's specific instance of the PULSE system for nationwide use, which was developed with ONC support and the state of California. PULSE has previously been deployed in California during wildfires to allow volunteer clinicians to staff temporary treatment facilities and care for patients with the ability to query for records. Pre-pandemic, there has been work ongoing to generalize the PULSE program beyond California for use nationwide, as needed. That work has not yet been complete and is ongoing with The Sequoia Project and Audacious Inquiry. COVID-19 came upon us and some of the work underway shifted to developing a national instance of the PULSE software specific to COVID-19, which could be rolled out to various temporary facilities in New York, etc., and in general wherever an Internet connection is available. The ability for clinicians and treatment facilities to make Carequality queries is a priority. We are ensuring that the eHealth Exchange is quickly confirming connectivity with other Carequality Implementers and speeding up internal work needed around the Carequality Directory to be fully ready for production Carequality deployment. Surescripts

offered support on a temporary basis with Directory using record locator and exchange product and will have a team member reach out to the eHealth Exchange team.

Management discussed policy clarification with respect to releasing full C-CDA data to public health. There are two use cases on the PULSE side: treatment use case, and public health authority staff using the PULSE COVID portal to access data for public health purposes. Discussions are underway to determine if these could be temporarily coded as treatment queries to ensure they are honored. There are concerns about HIPAA minimum necessary and with individual state laws, if the data set currently released provider-to-provider were to be made available to public health authorities. Management is seeking to escalate this issue within HHS. Legal counsel further elaborated on this discussion.

Management presented a few items that can be requested of the Carequality community, such as general support for PULSE-COVID-19 efforts. Some of these projects would benefit from ONC coordination and prioritization. Possibilities include: coordinating with EHR vendors to ensure COVID-19 test results are included in C-CDAs, coordinating with EHR vendors to ensure key individual patient data elements are included in C-CDAs, and ensuring that key public health stats, if provided by EHRs and other relevant systems, can be retrieved on-demand by PULSE-COVID-19 public health users.

Another possibility is to quickly enable a new Carequality Use Case for Electronic Case Reporting (eCR). We believe we could quickly create a Carequality Use Case IG for eCR, based on the eHealth Exchange's work. It is not yet clear what the appetite for short-term adoption would be among Carequality Implementers and this obviously needs to be explored prior to any decision being made to allocate resources. There was a very lengthy discussion on this item. Management stated that they are working to speed up the FHIR work, and that the Push notifications work may slow down in an effort to create an IG for eCR.

The Steering Committee was unable to discuss the FHIR Specification for Aggregated Stats due to timing.

Decision/Outcome: The Steering Committee requested further information regarding all options and the associated impact of each in terms of a contribution to the community and COVID-19. The Chair and Vice Chair offered support to Management and welcomed others to provide feedback to Dave Cassel.

Action/Follow up: Management will provide more information on the potential projects, for the Steering Committee's review and consideration.

Meeting was adjourned at 6:00pm ET