2015 National Conference on Health Statistics

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Developing an Interoperability Standard for the National Health Care Surveys
Vision

- Provide a nationally recognized, standardized format for submission of NHCS survey data requirements to enable automatic extraction from EHR or data repositories

- Offer a standardized approach to ONC for NCHS adoption as a Specialized Registry under Meaningful Use
Why participate in the development of Health IT Standards?

NCHS and its partner organizations have developed, implemented and maintained many of the critical standards used in population health and healthcare

- Standard certificates for vital events
- International Classification of Diseases and its clinical modifications
- Uniform data sets for hospital and ambulatory care
Why participate in the Health IT Standards Landscape?

• NCHS relies on States and healthcare providers for much of the data it collects and links data to external data systems

• NCHS data systems potentially could benefit from standardized data collected in electronic health records and personal health records

• NCHS/CDC recognized early on that standards would have implications for population health statistics
President’s Health IT Plan

“By computerizing health records, we can avoid dangerous medical mistakes, reduce costs, and improve care.”

Former President G. W. Bush in State of the Union Address on January 20, 2004

Established goal for most Americans to have access to an interoperable electronic health record (EHR) by 2014

Standards are a key component for interoperability
President’s HIT Plan

“To lower healthcare cost, cut medical errors, and improve care, we’ll computerize the nation’s health record in five years, saving billions of dollars in health care costs and countless lives.”

President Barack Obama in First Weekly Address on January 24, 2009

Consistent with Bush’s 2014 goal for electronic health records
American Recovery & Reinvestment Act (ARRA)

- President Obama signed ARRA on Feb. 17, 2009

- ARRA required the Department of Health and Human Services (DHHS) to create, vet and publish an initial set of HIT system standards, implementation specifications and testing criteria to promote adoption and “meaningful use” of EHRs

- ARRA is serving to stimulate adoption of HIT
Health Information Technology for Economic and Clinical Health (HITECH) Act of 2009

TITLE XIII—HEALTH INFORMATION TECHNOLOGY

SEC. 13001. SHORT TITLE; TABLE OF CONTENTS OF TITLE.

(a) SHORT TITLE.—This title (and title IV of division B) may be cited as the “Health Information Technology for Economic and Clinical Health Act” or the “HITECH Act”.

(b) TABLE OF CONTENTS OF TITLE.—The table of contents of this title is as follows:

Sec. 13001. Short title; table of contents of title.

Subtitle A—Promotion of Health Information Technology

PART 1—IMPROVING HEALTH CARE QUALITY, SAFETY, AND EFFICIENCY

Sec. 13101. ONCHIT; standards development and adoption.

PART 2—APPLICATION AND USE OF ADOPTED HEALTH INFORMATION TECHNOLOGY

Standards; Reports

Sec. 13111. Coordination of Federal activities with adopted standards and implementation specifications.
Sec. 13112. Application to private entities.
Sec. 13113. Study and reports.
Dedicated to developing standards for the exchange, integration, sharing, and retrieval of electronic health information

Includes over 2,300 members representing more than 90% of the information systems vendors serving healthcare

Support of the HL7 Public Health and Emergency Response Work Group (PHER WG) for development of standards

Available at: http://www.hl7.org/about/index.cfm?ref=nav
Project Proposal to Develop HL7 Standard for NCHS/DHCS

- Complete HL7 Project Scope Statement to describe the organization and the need for a new standard

- HL7 Sponsoring Work Groups:
  - Public Health and Emergency Response (PHER) – primary sponsor
  - Structured Documents (SD) – co-sponsor

- Additional levels of approval from the HL7 Domain Experts Steering Division and Technical Steering Committee
Developing the HL7 Implementation Guide (IG) for CDA R2: National Health Care Surveys (NHCS), Release 1 - US Realm

- Weekly meetings of development team to discuss and resolve requirements including NCHS SMEs and Informaticists; and technical writer
- Mapping of data elements required by the Surveys to existing HL7 CDA templates and creation of new templates
- Identifying standard vocabulary for the standard using SNOMED, LOINC, PHIN VADS
Cause of Injury, Poisoning, or Adverse Effect (Coded) Example

```xml
<observation classCode="OBS" moodCode="EVN">
  <templateId root="2.16.840.1.113883.10.20.34.3.27"/>
  <id root="b1ca3247c21-4ef8-8618-0b4478c65721"/>
  <code code="69543-7" codeSystem="2.16.840.1.113883.6.1" codeSystemName="LOINC"
    displayName="Cause of Injury">...
  <statusCode code="completed"/>
  <value xsi:type="CD"
    code="T42.2X3A"
    displayName="Poisoning by succinimides and oxazolidinediones, assault, initial encounter"
    codeSystemName="ICD10CM"
    codeSystem="2.16.840.1.113883.6.90"/>
</observation>
```
Balloting and Publishing the HL7 IG for CDA R2: National Health Care Surveys (NHCS), Rel. 1 - US Realm

- Ballot package provided to HL7 for industry comments during scheduled ballot period
- Comments received from ballot reviewers
- HL7 PHER WG assisted the development team in resolving comments
- Development team revised document based on comment resolution
- Seek HL7 approval to publish the IG as a Draft Standard for Trial Use (DSTU)
Volume One
• Overview of CDA markup standards, design, and use

Volume Two
• Collection of CDA templates for the health care surveys applicable to the US Realm
Future Plans for Standards

- HL7 DSTU two-year period when interested parties can implement the standard

- NCHS plans to seek approval to advance the standard from a DSTU to an HL7 Normative Standard
  - Validated by American National Standard Institute (ANSI)
Next Speaker: Carol DeFrances

Electronic Health Record (EHR)
Activities for the National Hospital Care Survey