

US Office of National Coordinator
Standards and Interoperability (S&I) Framework
S&I Simplification Work Group

Overview Presentation
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2 December 2014

S&I Framework – Cross Initiative – S&I Simplification

Quick History

2005-2009	AHIC, ANSI HITSP <ul style="list-style-type: none">• 17 Use Cases, each siloed, but lessons were learned
2011	<ul style="list-style-type: none">• Meaningful Use Stage 1 Begins• Standards and Interoperability (S&I) Framework Starts• S&I Simplification Gets Underway with Data Element Sets (DES)• Engaged with AHRQ, initiated Component Repository – US Health Information Knowledgebase (USHIK)
2012	<ul style="list-style-type: none">• Common Element Data Dictionary (CEDD) supersedes DESs• Engaged with National Institute for Standards and Technology (NIST)
2013	<ul style="list-style-type: none">• Federal Health Information Model (FHIM) supersedes CEDD• UCAT Prototype development starts: Prometheus and Sparx
2014	<ul style="list-style-type: none">• Meaningful Use Stage 2 Begins• UCATs Maturing, NIST Tools in Development• ISO 19669 Approved as New Work Item by ISO TC215 – <i>Re-Usable Component Strategy for Use Case Development</i>• Emerging Interests beyond S&I...

Key Elements of Simplification

- To identify a set of **Core Components** broadly applicable to, and *re-usable* in subsequent specification of, **Use Cases**
 - Core Components are **Requirements, Events, Actions, Actors and Roles, Data Objects and Elements**, that we:
 - Find in common across Use Cases, Scenarios and Events;
 - Might re-use in a new Use Case Scenario.
- To establish/maintain a **Core Component Registry**
- To allow each Use Case Initiative to
 - Select (re-use) Core Components applicable to their needs
 - Create anew: identify new Core Component candidates
- To identify **Implementable Data and Software Constructs** fulfilling Core Component requirements

Key Objectives

- To lay the **foundation** for a consistent infrastructure and build-out
- To lead to **uniformity** in requirement specification, standards and implementation guidance, software development, testing and certification, implementation
- To ensure **requirements traceability**, at each progression step, and end-to-end (use case to implementation)
- [NIST] To **apply cross-industry**: beyond S&I Framework, beyond the domain of health and healthcare
 - A generic approach

US Standards and Interoperability (S&I) Framework

S&I Simplification WG

Compiled and Distilled Components from S&I Initiatives

Current Analysis Status:

20 Use Cases with 44 Multi-Step Scenarios

S&I Simplification - Analysis Status - 27 November 2014 - Core Matrix Version 3.2 DRAFT

Incorporation of Use Case Initiatives in S&I Simplification Core Matrix

Initiative	Initial Analysis Phase - Core Matrix					FHIM	AHRQ	Consensus Core Matrix				
	Analysis Type	Common Requirements	Common Actors, Systems, Roles	Scenarios, Event Steps	Common Actions	Common Data Objects, Elements	US Health Information Knowledgebase					
Transitions of Care (TOC)	Retro	COMPLETE	COMPLETE	COMPLETE	COMPLETE	FHIM Mapping in Progress	REGISTERED	v1				
Lab Results Interface (LRI)								v2.1				
Longitudinal Coordination of Care (LCC) 1		COMPLETE	COMPLETE	COMPLETE	COMPLETE	FHIM Mapping in Progress	REGISTERED	TBD				
LCC 2												
Lab Orders Interface (LOI)								v2.1				
Provider Directory (PD) - Digital Certificate												
PD - Electronic Address								v2.1				
esMD 1 - Electronic Submission of Medical Documentation, Provider Profiles Authentication												
esMD 2 - Structured Content of Electronic Medical Documentation Request (eMDR)												
esMD 3 - Author of Record Level 1		Concurrent	COMPLETE	COMPLETE	COMPLETE	COMPLETE	FHIM Mapping in Progress	REGISTERED				
esMD 3 - Author of Record Level 2												
esMD 3 - Author of Record Level 3	TBD	Future	COMPLETE	COMPLETE	COMPLETE	COMPLETE	FHIM Mapping in Progress	REGISTERED				
Query Health (QH)												
Data Segmentation for Privacy (DS4P)												
Public Health Reporting (PHRI)												
HeD 1 - Health eDecisions - Clinical Decision Support (CDS) Artifact Sharing								v2.1				
HeD 2 - CDS Guidance Service												
Structured Data Capture								v3				
EU/US eHealth Initiative												
DAF 1 - Data Access Framework - Local Access		Concurrent	COMPLETE	COMPLETE	COMPLETE	COMPLETE	FHIM Mapping in Progress					
DAF 2 - Targeted Access												
Data Provenance	Concurrent	COMPLETE	COMPLETE	COMPLETE	COMPLETE	COMPLETE	FHIM Mapping in Progress	Awaiting Tooling				
RESTful Health Exchange (RHEx)												
Automated Blue Button												
Electronic Certificate	TBD	TBD					In Progress	REGISTERED				
		N/A										

Considering...

- Which Components of a Use Case are:
 - Potentially **computable**?
 - As implementable software and/or data objects?
 - Uniquely **identifiable**? **Catalogue-able**?
 - In an established repository?
 - Candidates for **re-use**?
 - In another Use Case scenario?

Component Candidates

Components selected from S&I Initiative Use Cases ↓	Is it...			Potentially Computable for...										
	In Common?	Re-Usable?	Computable?	Identity	Accountability	Permission, Consent	Access, Data Use	Performance/ Fulfillment	Capture, Provenance	Content: Strict/Instruct	Coding, Classification	Completeness	Signature	Audit
Requirements	Y	Y	Y		●			●						
Actors, Roles	Y	Y	Y	●	●	●	●	●				●	●	●
Scenarios, Events, Actions	Y	Y	Y	●	●	●	●	●				●	●	●
Data Objects, Elements	Y	Y	Y		●	●	●		●	●	●	●	●	●

→ As standards-based software services

→ As standards-based data objects, messages, documents...

Analysis Focus

- Requirements
- Actors and Roles
 - Individuals, Organizations, Systems
- Scenarios
- Events and Actions
- Data Objects and Elements

Use Case Requirements Template

[\(LINK to S&I UCR Template\)](#)

- Starting Point for S&I Initiative Use Cases
- S&I Use Case Requirements Template is:
 - A Word document, completed by each Initiative
 - A consistent pattern, evolving over past 3+ years
 - Consensus approved at end of UCR Phase (I)
 - Starting Point for S&I Harmonization Phase (II)
 - Starting Point for S&I Simplification Retrospective Use Case Analysis
 - Fully represented in Use Case Authoring Tool (UCAT)

Common Requirements Analysis

[\(LINK to S&I Simplification – Requirements Analysis Worksheet\)](#)

- Use Case Requirements (from UCR Template)
 - Assumptions
 - Pre-Conditions
 - Post-Conditions
 - System Functional Requirements
- Raw Requirements
 - Duplicate discovery
 - Fulfillment: Pre, During or Post Use Case Scenario
 - Traceability: to Fulfilling Use Case Scenario/Event/Action
 - Re-Use: Requirements, Actions
 - Restatement of Requirement

Common Actions

S&I Simplification WG has identified a set of 36 Common Actions used and re-usable across Use Cases. Actions fall into these categories:

- Identity: Patient, Practitioner, Organization
- Consistent Time
- Data Access Permissions
- Access Control
- Audit
- Query
- Encryption, Decryption
- Signatures: Individual, System
- Exchange: Transmit, Receive
- Registration, Admission, Discharge, Transfer
- Clinical Summary
- Clinical Entries
- Record Lifecycle: Originate, Retain, Amend, Verify, Attest, Access/View, Extract, Translate, Transmit/Receive, De-Identify...

Common Actions

- **Next Two Slides** – Show a condensed version of the S&I Simplification Common Actions (L→R by column)
 - A. Action Category
 - B. Action ID
 - C. Action Description
 - D. Requirements Related to or Fulfilled by Action
 - E. Data Requirements (partial)
 - F. EHR-S Function ref: ISO/HL7 10781 EHR-S FM
 - G. PHR-S Function ref: ISO/HL7 16527 PHR-S FM
 - H. Is Action Auditable?
 - I. Is Action typically Signed: by individual, system?

Common Actions from [S&I Simplification Core Matrix v3.2](#)

Action Category	Action ID	Action	Related Requirement(s)	Data Objects Note Re-Use across Multiple Actions	EHR System Functions (Ref: ISO/HL7 10781 EHRS Functional Model Release 2)	PHR System Functions (Ref: ISO/HL7 16527 PHRS Functional Model Release 1)	Action Auditable? (A.AUDIT)	Action Signed by... (A.SIGN)
Identity	A.ID.1	Identify, Authenticate Individual Patient	R3-R5, R15	DES101 Patient ID	TI.1.1 - Entity Authentication CPS.1.1 - Manage Patient Record CPS.1.2 - Manage Patient Demographics	PH.1.1, S.2.1, S.3.1, IN.1, IN.1.7, IN.3.1-4	Yes	N/A
	A.ID.2	Select Individual Patient			TI.1.1 - Entity Authentication AS.1.1 - Manage Provider Information AS.1.1 - Manage Provider Registry or Directory AS.1.7 - Manage Practitioner/Patient Relationships RI.1.1.1-24.1 - Evidence of <Provider> in EHR Record Entry		Yes	N/A
	A.ID.3	Identify, Authenticate Provider	R9-R11, R15	DES102 Individual Provider ID and/or DES103 Organizational Provider ID	TI.1.1 - Entity Authentication AS.1.1 - Manage Provider Information AS.1.1 - Manage Provider Registry or Directory AS.1.7 - Manage Practitioner/Patient Relationships RI.1.1.1-24.1 - Evidence of <Provider> in EHR Record Entry	S.1.2, S.1.3, IN.3.1-4	Yes	N/A
	A.ID.4	Select Provider			TI.1.1 - Entity Authentication CPS.2.8 - Support Medical Device Originated Data RI.1.1.1-24.1 - Evidence of <System> in EHR Record Entry TI.3 - Registry and Directory Services		Yes	N/A
	A.ID.5	Identify System	R14	DES104 System ID	<Not included in EHRS FM R2>	IN.3.1-3, IN.3.5	Yes	N/A
	A.ID.6	Validate Identity Certificate	R8-R11	DES102 Individual Provider ID and/or DES103 Organizational Provider ID	<Not included in PHRS FM R1>	<Not included in PHRS FM R1>	Yes	N/A
Consistent Time	A.TIME	Reference Current Time	R1, R2, R12, R13	DES107 Consistent Time	RI.2 - Record Synchronization	PH.1.4, IN.1.1, IN.3.4	Yes	N/A
Data Access Permissions	A.PERMIT.1	Set Data Access Permissions, including Patient Consent	R2, R7, R15	DES105 Data Access Permissions	TI.1.2 - Entity Authorization CPS.1.7.3 - Manage Consents and Authorizations AS.2.6 - Manage Patient Privacy Consent Directives	S.3.3.1, S.7, IN.3.1, IN.3.8	Yes	N/A
	A.PERMIT.2	Determine/designate Scope of Data Access Permissions	R7, R7.1	DES105 Data Access Permissions	AS.3.2.1 - Manage Consents and Authorizations from a PHR RI.1.1.6-9 - Output/Disclose/Transmit/Receive Record Entry Content		Yes	N/A
Access Control	A.ACCESS.1	Check User Data Access Permissions	R2, R2.1, R7, R15	DES102/DES103 Provider ID DES105 Data Access Permissions	TI.1.1 - Entity Authentication TI.1.2 - Entity Authorization TI.1.3 - Entity Access Control TI.1.5 - Access/View Record Entries	IN.3.1-4, IN.3.8 IN.3.1-3	Yes	N/A
	A.ACCESS.2	Access/View Record, Document or Message	R1, R2, R3-7, R9-R15	Any/All	TI.1.1 - Entity Authentication TI.1.2 - Entity Authorization TI.1.3 - Entity Access Control TI.1.5 - Access/View Record Entries		Yes	N/A
Audit	A.AUDIT	Audit Action and/or Record Action	R1, R12-R17	DES108 Audit Parameters	RI.1.1.1-24.1 - Evidence of Record Entry Provenance and Accountability TI.2.1.1 - Record Entry Audit Triggers TI.2.1.2 - Security Audit Audit Triggers TI.2.1.3 - System Audit Triggers TI.2.1.4 - Clinical Audit Triggers	IN.1, IN.3-4		N/A
Query	A.QUERY	Query		Any/All	CPS.9.5 - Ad Hoc Query and Rendering POP.6.1 - Outcome Measures and Analysis POP.6.2 - Performance and Accountability Measures	PH.5.4, IN.2.1	Yes	N/A
Encrypt	A.ENCRYPT	Encrypt Record or Exchange Content		Any/All	RI.1.1.8 - Transmit Record Entry Content RI.1.1.9 - Receive Record Entry Content	IN.3.5, IN.3.10		
De-Crypt	A.DECRYPT	Decrypt Record or Exchange Content		Any/All	TI.1.6 - Secure Data Exchange TI.8 - Database Backup and Recovery			
Signature	A.SIGN	Apply Signature	R8-R11, R13-R14	DES102 Individual Provider ID DES103 Organizational Provider ID DES104 System ID	RI.1.1.1 - Originate and Retain Record Entry RI.1.1.2 - Amend Record Entry Content RI.1.1.4 - Attest Record Entry Content TI.1.5 - Non-Repudiation	IN.3.4, IN.3.5, IN.3.7	Yes	N/A
Signature	A.DSig	Apply Digital Signature	R8-R11, R13-R14	DESxxx Individual Provider Digital ID DESxxx Organizational Provider Digital ID DESxxx System Digital ID	RI.1.1.1 - Originate and Retain Record Entry RI.1.1.2 - Amend Record Entry Content RI.1.1.4 - Attest Record Entry Content TI.1.5 - Non-Repudiation	IN.3.4, IN.3.5, IN.3.7	Yes	N/A
Signature	A.DSigV	Validate Digital Signature	R8-R11, R13-R14	DESxxx Individual Provider Digital ID DESxxx Organizational Provider Digital ID DESxxx System Digital ID	RI.1.1.1 - Originate and Retain Record Entry RI.1.1.2 - Amend Record Entry Content RI.1.1.4 - Attest Record Entry Content TI.1.5 - Non-Repudiation	IN.3.4, IN.3.5, IN.3.7	Yes	N/A

Common Actions from S&I Simplification Core Matrix v3.2

Action Category	Action ID	Action	Related Requirement(s)	Data Objects Note Re-Use across Multiple Actions	EHR System Functions (Ref: ISO/HL7 10781 EHRS Functional Model Release 2)	PHR System Functions (Ref: ISO/HL7 16527 PHRS Functional Model Release 1)	Action Auditible? (A.AUDIT)	Action Signed by... (A.SIGN)
Exchange	A.XFER.1	Transmit Record, Document or Message	R1.1-R14.1	Documents/Messages, containing DESS, as exchanged	RI.1.1.8 - Transmit Record Entry Content RI.1.1.9 - Receive Record Entry Content TI.1.6 - Secure Data Exchange TI.1.7 - Secure Data Routing	IN.3.1-3, IN.3.5-6, IN.3.10	Yes	Sender/Source
	A.XFER.2	Receive Record, Document or Message					Yes	N/A
Acknowledgement	A.ACK	Acknowledgement		DES109 Acknowledgement information	TI.5 - Standards-Based Interoperability		Yes	N/A
Registration, Admission, Discharge	A.REG	Register Patient	R1, R3-R5, R8	DES101 Patient ID DES1 Personal Information DESxxx Other registration, admission and discharge information	CPS.1.1 - Manage Patient Record CPS.1.2 - Manage Patient Demographics CPS.1.5 - Manage Patient Encounter	PH.1.1	Yes	N/A
	A.IP.1	Admit Inpatient				N/A	Yes	N/A
	A.IP.2	Discharge Inpatient					Yes	N/A
	A.AP.1	Checkin Ambulatory Patient					Yes	N/A
	A.AP.2	Checkout Ambulatory Patient					Yes	N/A
Clinical Summary	A.REC.1-2	Compile/Retain - Clinical Summary	R1-R11, R14, R15	DES101 Patient ID DES102/DES103 Provider ID DES104 System ID DES105 Data Access Permissions DES1-DES37, as appropriate	[Refer to Specific Actions Re-Used - Col B.]	[Refer to Specific Actions Re-Used - Col B.]	Yes	Author/Source
	A.REC.3	Verify - Clinical Summary					Yes	Author/Source
	A.XFER.1	Transmit - Clinical Summary					Yes	Sender/Source
	A.XFER.2	Receive - Clinical Summary					Yes	N/A
	A.REC.2	Retain - Clinical Summary					Yes	N/A
	A.ACCESS.2	Access - View Clinical Summary					Yes	N/A
Clinical	[See Clinical Summary Sequence]	Clinical Actions, for example: • Order(s) • History and Physical • Assessment • Reconcile medication list • Update problem list • Update care plan • Capture vital signs	R1, R3-R5, R8-R15	Any/All	Care Provision (CP) and Care Provision Support (CPS) Functions	Personal Health (PH) Functions	N/A	N/A
Record Lifecycle	A.REC.1	Originate	R1, R12, R13, R15-R17	Any/All	RI.1.1.1 - Originate and Retain Record Entry	IN.3.1-3, IN.4	Yes	Author/Source
	A.REC.2	Retain			IN.4	IN.4	Yes	N/A
	A.REC.3	Verify			RI.1.1.4 - Attest Record Entry Content	IN.4	Yes	Author/Source
	A.REC.4	Attest			RI.1.1.3, IN.3.7, IN.4	IN.3.1-3, IN.3.7, IN.4	Yes	Author/Source
	A.REC.5	Amend			RI.1.1.2 - Amend Record Entry Content	IN.4	Yes	Author/Source
	A.REC.6	De-Identify or Alias			RI.1.1.10 - De-identify Record Entries RI.1.1.11 - Pseudonymize Record Entries	PH.3.6.1, S.4.1.2, IN.1.4, IN.4	Yes	N/A
	A.REC.7	Re-Identify			RI.1.1.12 - Re-identify Record Entries	IN.1.4	Yes	N/A
	A.REC.8	Extract			RI.1.1.13 - Extract Record Entry Content	S.3.8, S.4.1.3, S.4.3, IN.1.4, IN.4	Yes	N/A
	A.REC.9	Translate			RI.1.1.13 - Translate Record Entry Content	IN.1.13	Yes	Author/Source Sender/Source
	A.REC.10	Output/Report			RI.1.1.6 - Output/Report Record Entry Content	PH.2.4, S.2.3-4, S.3.5, S.3.8, IN.4	Yes	Author/Source Sender/Source
	A.ACCESS.2	Access/View			[Refer to Specific Actions Re-Used - Col B.]	[Refer to Specific Actions Re-Used - Col B.]	Yes	N/A
	A.ENCRYPT	Encrypt					Yes	Sender/Source
	A.DECRYPT	Decrypt					Yes	Sender/Source
	A.XFER.1	Transmit, Disclose					Yes	Sender/Source
	A.XFER.2	Receive					Yes	N/A

Re-Use Examples

S&I Simplification Analysis

- Each S&I Use Case Scenario
 - Breaks down to Event Steps
- Each Event Step
 - Has an Actor (in Role)
 - Has Inputs and Outputs
 - Has Actions Taken (as examples)
- Each Action
 - Invokes EHR or other System Functions

Core Matrix

[\(LINK to Core Matrix Spreadsheet v3.2\)](#)

- Status – of S&I Simplification Initiative Analysis
- Key – Contents of All Tabs
- Assertions – Basis for Initial Requirements
 - * Common Requirements
 - * Common Actors
 - * Scenarios, Events – w/Action examples
 - * Common Actions
 - * Common Data Objects
- * **Re-usable Components**

Scenario Events to Actions

- Next Slide – Shows condensed version of two S&I Transition of Care Scenarios (L→R by column)
 - A. Event Step
 - B. Actor
 - C. Event Description
 - D. Inputs
 - E. Outputs
 - F. Action Examples
 - G and on. Action Repetition Tabulation

Light Blue Background - From S&I Use Case Initiative Scenarios
 White Background - Added by Simplification Work Group for Illustration

(To show full Action Names, Unhide Rows 1, 2, 4.)

ACTION REPETITION EXAMPLE...

Actor	Event/Description	Inputs	Outputs	Sample Action(s)	Audit	Action Repetition Example...																	
						A.SIGN	Sender/Source	Signature	Consistent Time	ID Patient	ID Provider	ID System	Verify ID Certificate	Set Permissions	Check Permissions	Control/Access	Originate Entry	Retain Entry	Verify Entry	Attest Entry	Amend Entry	De-identify Entry	Re-identify Entry

Transitions of Care (TOC) - Transitions of Care - Scenario 1A - Exchange of Discharge Summary to Support Transfer of Patient Information from One Provider to Another Provider

Pre	EHR System(s)	Reference/Set Consistent Time				Reference Consistent Time	X	X																
1	Provider	Trigger Generation of Discharge Summary for Patient A	START	Discharge Instructions		Identify Patient, Provider, EHR System	X		X X X															
2	Hospital EHR System	Send Discharge summary to PCP's EHR System or other Provider EHR System	Discharge Instructions	Discharge Instructions		Originate/Attest/Retain - Discharge Summary	X	X																X
3	PCP or other Provider EHR System	Receive Discharge Summary	Discharge Instructions	Discharge Instructions		Set Data Access Permissions	X																	X
4	Provider	Trigger Generation of Discharge Summary for Patient A	Discharge Summary	Discharge Summary		Transmit - Discharge Summary	X	X																
5	Hospital EHR System	Send Discharge summary to PCP's EHR System or other Provider Organization	Discharge Summary	Discharge Summary		Identify (EHR) System	X																	X
6	PCP or other Provider EHR System	Receive Discharge Summary	Discharge Summary	Discharge Summary		Receive/Retain - Discharge Summary + Instructions	X																	X
7	Provider	View Discharge Summary/Instructions	Discharge Summary	END		Set Data Access Permissions	X																	X

Transitions of Care (TOC) - Transitions of Care - Scenario 1B - Exchange of Clinical Summaries to Support Closed Loop Referral of Patient from One Provider to Another

Pre	EHR System(s)	Reference/Set Consistent Time				Reference Consistent Time	X	X																
1	Provider	Trigger Generation of Consultation Request Clinical Summary for Patient A	START	Generated Consultation Request Clinical Summary		Identify Patient, Provider, EHR System	X		X X X															
2	PCP EHR System	Send Consultation Request Clinical Summary to specialist's EHR System	Consultation Request Clinical Summary	Consultation Request Clinical Summary		Originate/Attest/Retain - Clinical Summary	X	X																X
3	Specialist EHR System	Receive Consultation Request Clinical Summary from PCP's EHR System	Consultation Request Clinical Summary	Consultation Request Clinical Summary		Verify - Clinical Summary	X	X																X
4	Provider	View Consultation Request Clinical Summary in specialist's EHR System	Consultation Request Clinical Summary	END		Set Data Access Permissions	X																	
5	Provider	Trigger Generation of Consultation Summary for patient A	START	Generated Consultation Summary		Transmit - Clinical Summary	X	X																
6	Specialist EHR System	Send Consultation Summary to PCP's EHR System	Consultation Summary	Consultation Summary		Identify (EHR) System	X																	X
7	PCP EHR System	Receive Consultation Summary from specialist's EHR System	Consultation Summary	Consultation Summary		Receive/Retain - Consultation Summary	X																	X
8	Provider	View Consultation Summary in PCP's EHR System	Consultation Summary	END		Identify, Authenticate Provider	X																	X

Analysis

- S&I Simplification Work Group has:
 - Analyzed 20 S&I Use Cases with 44 Scenarios
 - Specified Actions (examples) for each Scenario and Event Step
- Next Slide
 - Shows Repetition Counts for Action Examples

S&I Simplification Analysis Examples

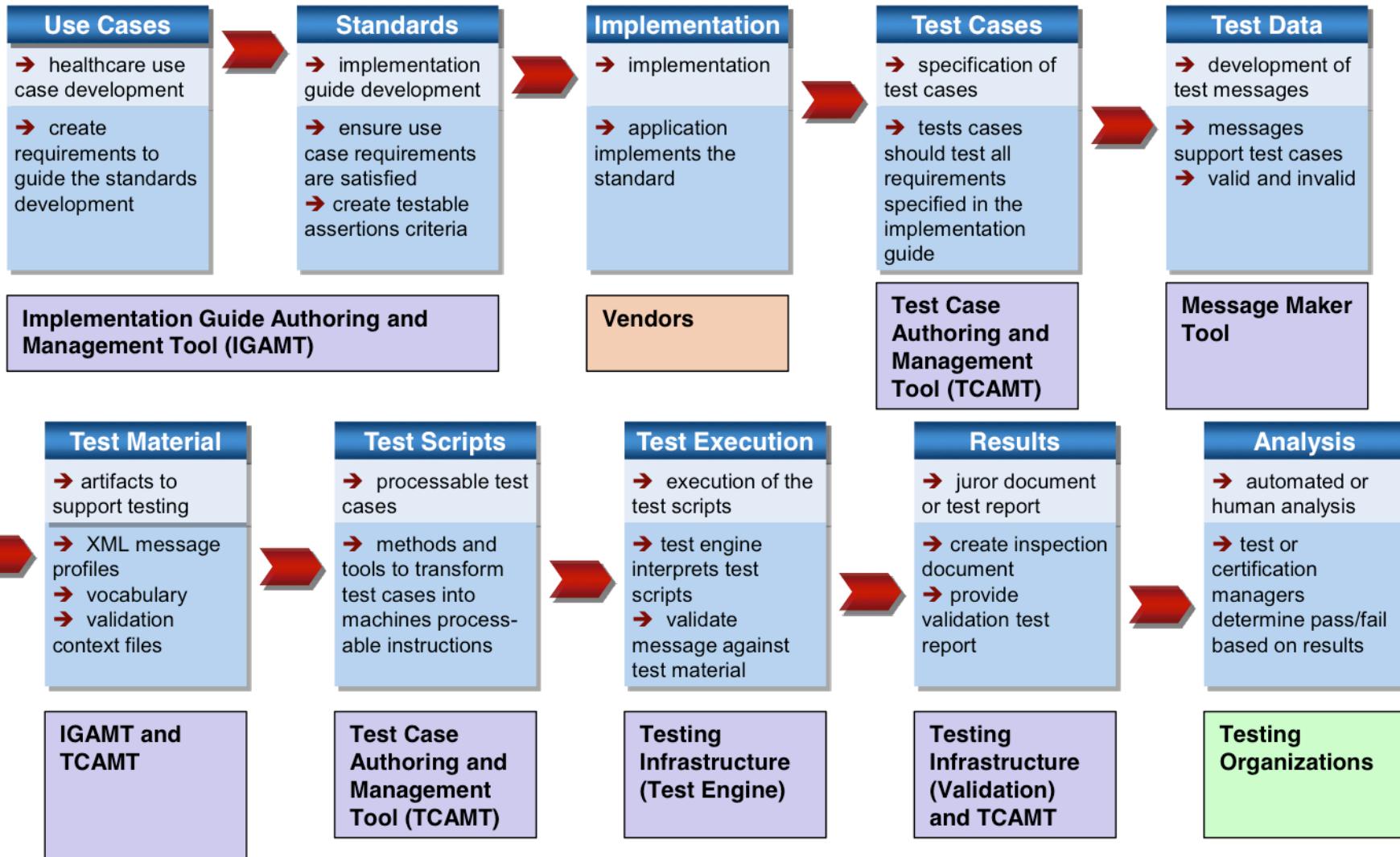
Potential Re-Use – Actions

Repetition
Count →

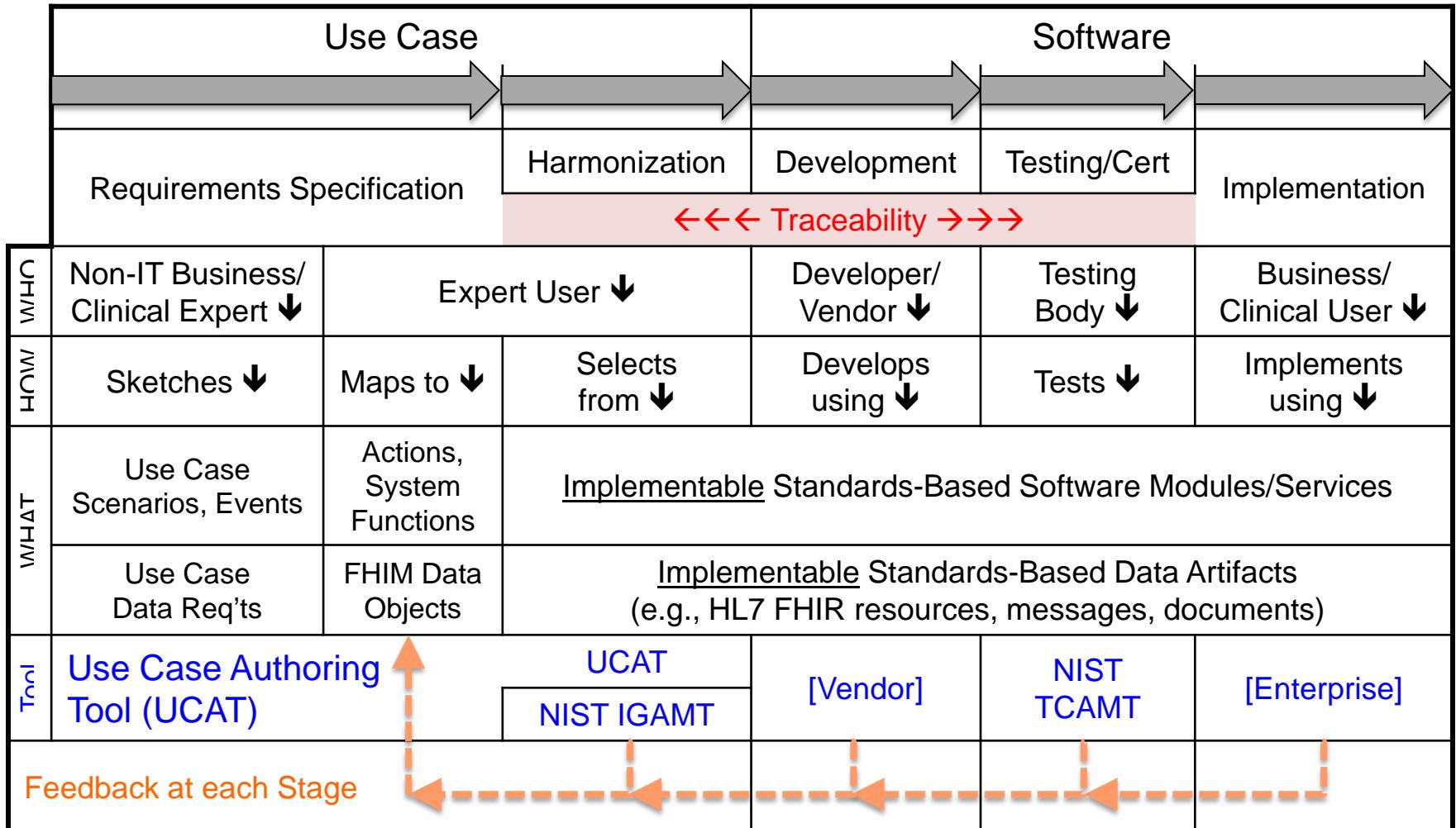
720	A.AUDIT	Audit
166	A.SIGN Sender/Source	Signature
53	A.SIGN Author/Source	
39	A.TIME	Consistent Time
39	A.ID.1/2	ID Patient
72	A.ID.3/4	ID Provider
98	A.ID.5	ID System
12	A.ID.6	Verify ID Certificate
39	A.PERMIT	Set Permissions
35	A.ACCESS.1	Check Permissions
19	A.ACCESS.2	Control Access
81	A.REC.1	Originate Entry
164	A.REC.2	Retain Entry
4	A.REC.3	Verify Entry
32	A.REC.4	Attest Entry
12	A.REC.5	Amend Entry
2	A.REC.6	De-Identify Entry
0	A.REC.7	Re-Identify Entry
8	A.REC.8	Extract Entries
18	A.REC.9	Translate Entries
0	A.REC.10	Output/Report Entries
166	A.XFER.1	Transmit
149	A.XFER.2	Receive
14	A.ACK	Acknowledgment
26	A.QUERY	Query

What will the tools address?

Source: Rob Snelick, NIST



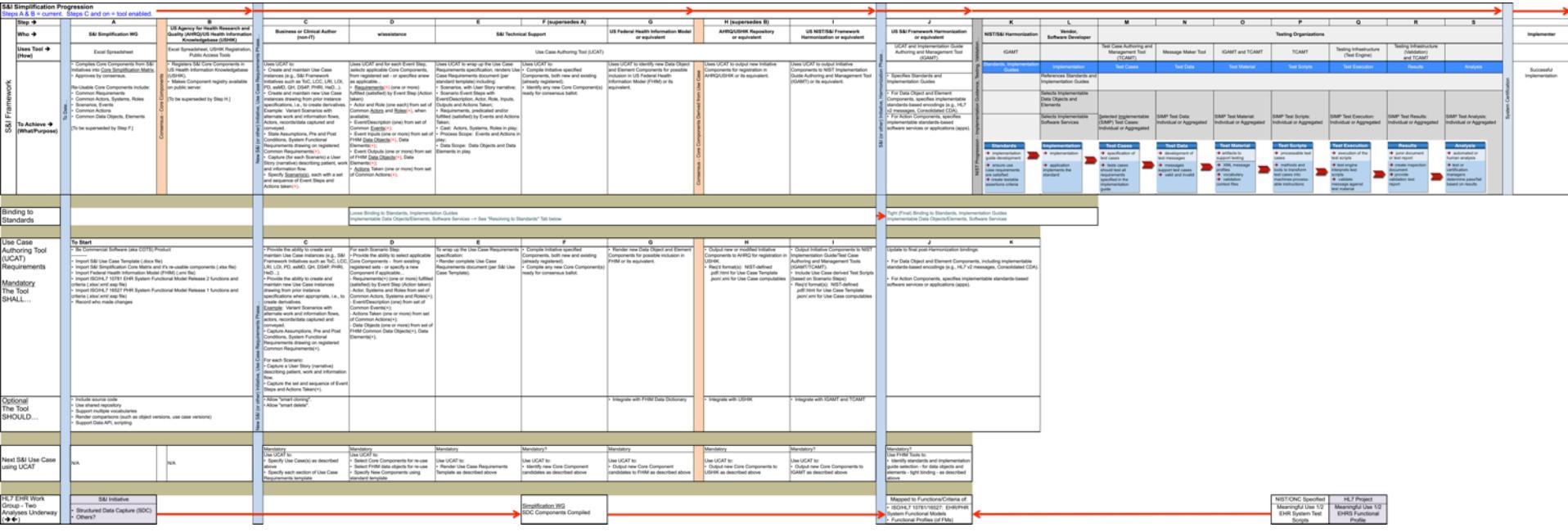
Traceability – Anchored by Use Case Authoring Tool (UCAT) From Sketch to Implementation



Progression

[\(LINK to Progression Spreadsheet\)](#)

- To Date (Steps A&B)
 - S&I Simplification + AHRQ
 - Core Matrix + USHIK Registry
- Going Forward (Steps C-S)
 - S&I Use Case Requirements Phase with Use Case Authoring Tool (UCAT)
 - S&I Use Case Harmonization Phase with NIST Tools
 - Standards Selection
 - Implementation Guide (Tools)
 - Testing (Tools)



Steps A-B – Pre-Use Case Authoring Tool (UCAT)

S&I Simplification Progression Steps A & B = current, Steps C and on = tool enabled.		
S&I Framework	Step ➔	A
	Who ➔	S&I Simplification WG
	Uses Tool ➔ (How)	Excel Spreadsheet
To Achieve ➔ (What/Purpose)	To Date...	<p>• Compiles Core Components from S&I Initiatives into Core Simplification Matrix. • Approves by consensus.</p> <p>Re-Usable Core Components include:</p> <ul style="list-style-type: none"> Common Requirements Common Actors, Systems, Roles Scenarios, Events Common Actions Common Data Objects, Elements <p>[To be superseded by Step F.]</p>
Binding to Standards		
Use Case Authoring Tool (UCAT) Requirements		<p>To Start</p> <ul style="list-style-type: none"> Be Commercial Software (aka COTS) Product <hr/> <ul style="list-style-type: none"> Import S&I Use Case Template (.docx file) Import S&I Simplification Core Matrix and its re-usable components (.xlsx file) Import Federal Health Information Model (FHIR) (.xml file) Import ISO/HL7 10781 EHR System Functional Model Release 2 functions and criteria (.xlsx/.xml/.eap file) Import ISO/HL7 16527 PHR System Functional Model Release 1 functions and criteria (.xlsx/.xml/.eap file) Record who made changes
Mandatory The Tool SHALL...		
Optional The Tool SHOULD...		<ul style="list-style-type: none"> Include source code Use shared repository Support multiple vocabularies Render comparisons (such as object versions, use case versions) Support Data API, scripting
Next S&I Use Case using UCAT	N/A	N/A
HL7 EHR Work Group - Two Analyses Underway (➔➡)	<p>S&I Initiative</p> <ul style="list-style-type: none"> Structured Data Capture (SDC) Others? 	

Steps C-I – Use Case Authoring Tool (UCAT) Enabled

Steps J-S – Harmonization, Guidance, Implementation, Testing

Tight (Final) Binding to Standards, Implementation Guides
Implementable Data Objects/Elements, Software Services

J	K
Update to final post-Harmonization bindings:	
<ul style="list-style-type: none">For Data Object and Element Components, including implementable standards-based encodings (e.g., HL7 v2 messages, Consolidated CDA)For Action Components, specifies implementable standards-based software services or applications (apps).	

- Identify standards and implementation guide selection - for data objects and elements - tight binding - as described above

- Mapped to Functions/Criteria of:
 - ISO/HL7 10781/16527: EHR/PHR System Functional Models
 - Functional Profiles (of FMs)

NIST/ONC Specified	HL7 Project
Meaningful Use 1/2 EHR System Test Scripts	Meaningful Use 1/2 EHRS Functional Profile

S&I Framework – Cross Initiative – S&I Simplification

Progression Steps w/UCAT*

Steps	Tool	Used to...
S&I Use Case Requirements (UCR) Phase		
A-B	UCAT	Analyze UC Components, Update Core Simplification Matrix
C-D		Build Use Case, specify Requirements and Details
E		Render completed Use Case per S&I UCR Template (Word .docx)
F		Identify New Core Component Candidates from this Use Case
G		For FHIM update: identify new UC data objects, elements
H		Output to USHIK: full Use Case
I		Output to NIST Tool Suite (IGAMT/TCAMT): full Use Case
S&I Harmonization Phase		
J-K	UCAT/IGAMT	Develop/manage Implementation Guides for selected standards
NIST-designed Software Testing and Certification		
M-S	IG/TCAMT	Develop/manage software test cases; support testing and validation

* See S&I Simplification – Progression Spreadsheet (UCAT = Use Case Authoring Tool)

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S&I Framework – Cross Initiative – S&I Simplification

Links

- US Office of National Coordinator (ONC) Standards and Interoperability (S&I) Framework Wiki
 - <http://wiki.siframework.org>
- S&I Simplification Wiki
 - <http://wiki.siframework.org/Cross+Initiative+-+S%26I+Simplification+WG>
 - <http://wiki.siframework.org/Use+Case+Simplification+Reference+Materials>
- Federal Health Information Model (FHM)
 - <http://www.fhims.org>
- AHRQ/USHIK S&I Pilot Site
 - <http://ushik-stg.dcgrouplnc.com/mdr/portals/si?system=si&enableAsynchronousLoading=true>
- HL7 EHR Interoperability Wiki
 - http://wiki.hl7.org/index.php?title=EHR_Interoperability_WG