



Healthcare Directory Technology Learning Community

TLC Meeting – February 10, 2017

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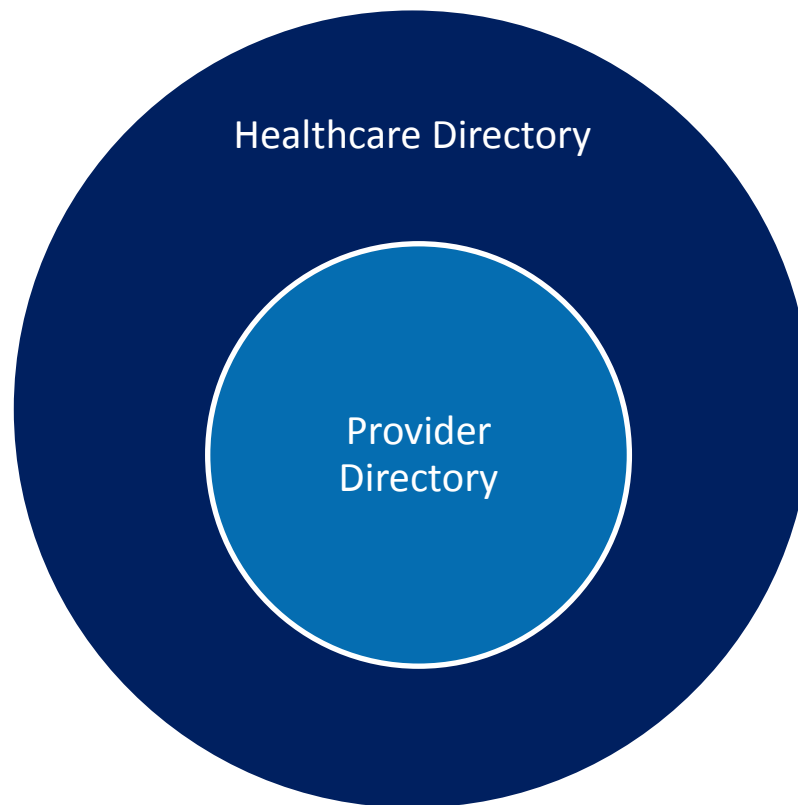


Agenda

- Welcome and Housekeeping (Dan Chaput)
- ONC/FHA HcDir Project Overview (Dan Chaput, Bob Dieterle)
- Discussion – Segmentation

Brief background

- Continuation of the work from a [workshop](#) organized by FHA and ONC and held at MITRE Headquarters in McClain, VA on April 5th and 6th of 2016.



Provider Directory Workshop

- Two-day workshop organized by FHA and ONC was held at the MITRE Headquarters in McClain, VA on April 5/6.
- First day focused on presentations and questions, second day was focused on use cases
- One Hundred and ten (110) in-person attendees (including 27 federal staff) and an additional ninety-four (94) virtual
- Attendees included:
 - Federal: ONC, HHS, CMS, DoD/DHA, VA, SSA, CDC
 - State (HIE/Medicaid/Govt): Michigan, Oregon, Rhode Island, Colorado, California, Illinois, Ohio
 - Payers and Payer Organizations: AHIP, CA BCBS, CIGNA, Humana, United, Wellmark
 - HIT Vendors: Cerner, Epic, NextGen
 - Not for Profit Interoperability: CAQH, NATE, Direct Trust, Sequoia Project
 - Professional: AMA, Kaiser, Johns Hopkins
 - National Networks: Surescripts

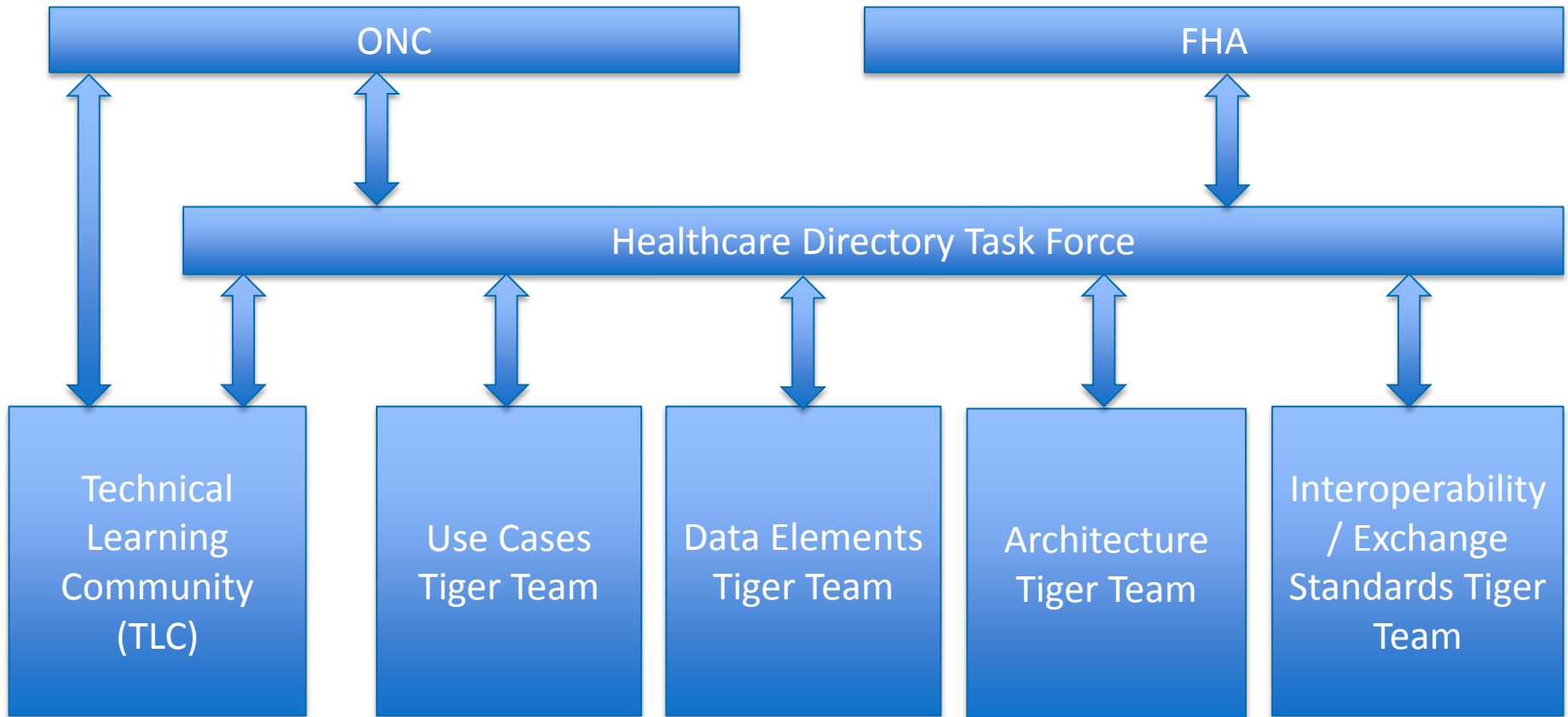
Provider Directory Workshop Summary

- Strong interest in the federal government providing, at a minimum, a validated core data set for HcDir
 - expand the scope of NPPES or
 - create a central resource for all local directories to use / reference
- Many use case – all important for interoperability and care delivery
 - Need to prioritize and define data / validation / exchange requirements
- Focus is now on use of FHIR for HcDir interoperability (not on IHE HPD)
- Need for coordination of HcDir effort between Federal agencies, state initiatives and commercial efforts to minimize/avoid duplication of effort

Healthcare Directory Project Overview

- Goal: develop a national resource with a core set of validated data that can be used for local implementations of healthcare directories
- Approach:
 - » ONC/FHA Task Force
 - » Monthly TLC meeting (on the second Friday of each month)
 - » Tiger Teams (Use Cases, Data Elements, Architecture, Interoperability)
 - » A Basecamp site for collaboration and sharing

ONC-FHA Healthcare Directory Organizational Structure



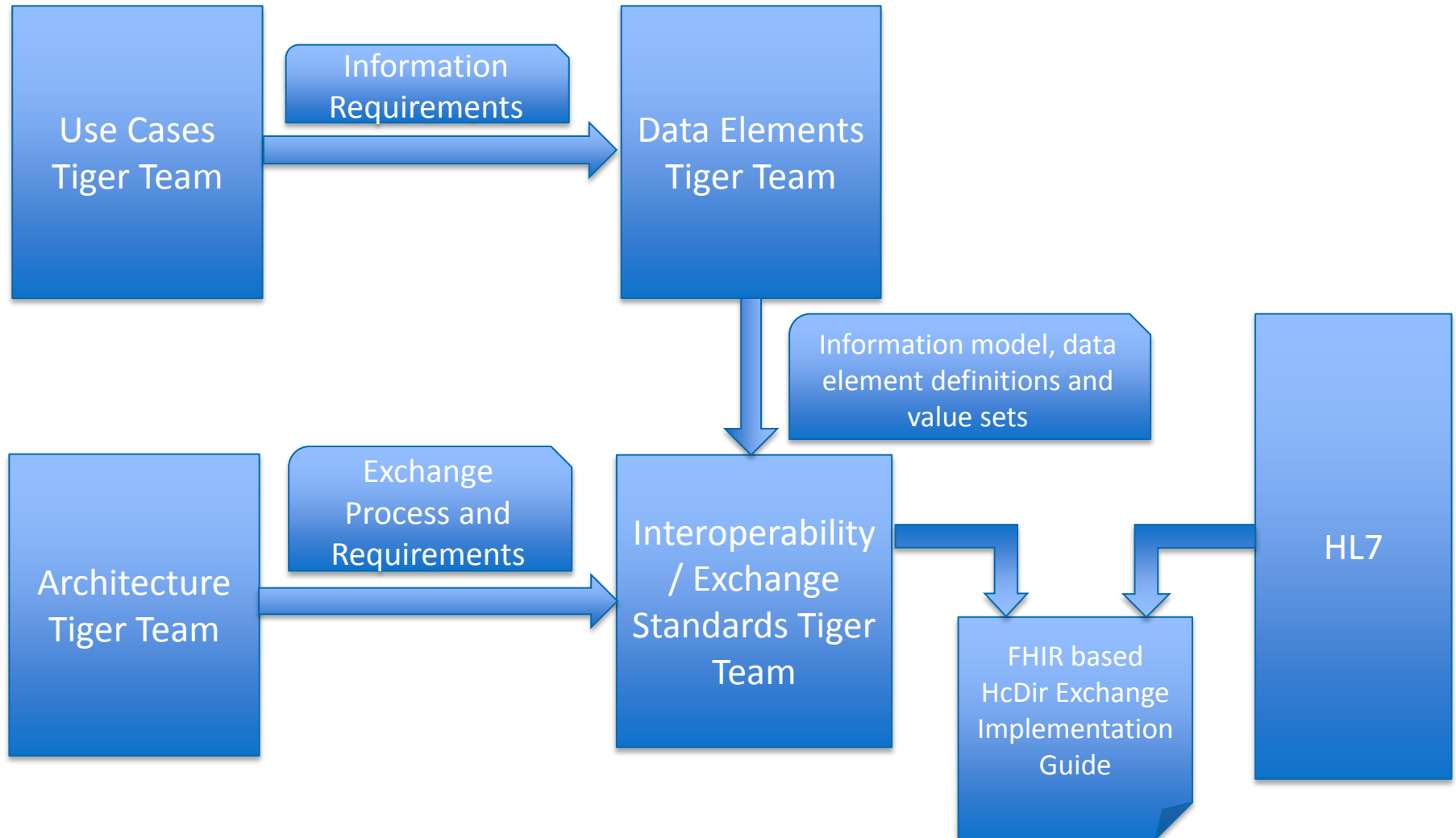
Use Cases

- **Basic Information Exchange**
 - » A1. Enable electronic exchange (e.g. discovery of electronic end points such as IHE/EHR endpoints, FHIR server URLs, Direct addresses)
 - » A2. Find an individual and/or organization (even if no electronic end point is available)
- **Patient/Payer focused**
 - » B1. Find provider accessibility information (specialty, office hours, languages spoken, taking patients)
 - » B2. Relationship between provider and insurance plan (insurance accepted) or plan and provider (network)
 - » B3. Plan selection and enrollment
 - » B4. Claims management (adjudication, prior authorization, payment)

Use Cases (Cont.)

- Care Delivery / Value Based Care
 - » C1. Provider relationship with a patient (e.g. for alerts)
 - » C2. Provider relationship with other providers in context of a patient (e.g. care team communications)
- Other
 - » D1. Provider credentialing
 - » D2. Quality or regulatory reporting (e.g. aggregate data, plan networks)
 - » D3. Detection of fraud; inappropriate approval of services and/or payment for services

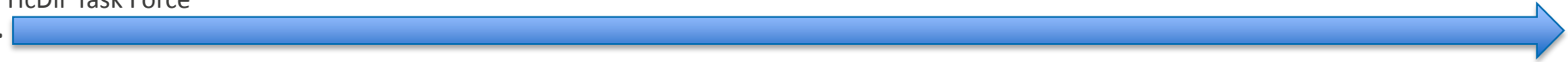
ONC-FHA Healthcare Directory Tiger Team Dependencies



HcDir Task Force Timeline



HcDir Task Force



Use Cases Tiger Team



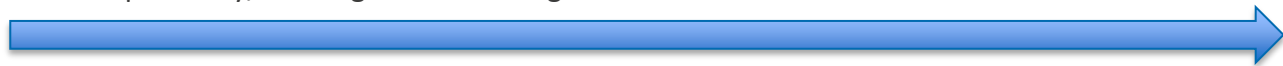
Data Elements Tiger Team



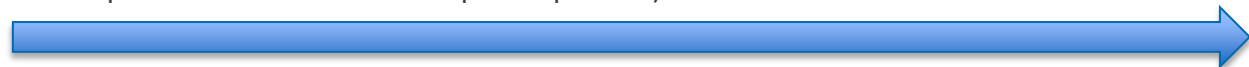
Architecture Tiger Team



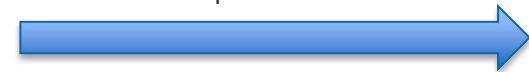
Interoperability/Exchange Standards Tiger Team



HL7 Implementation Guide development process)



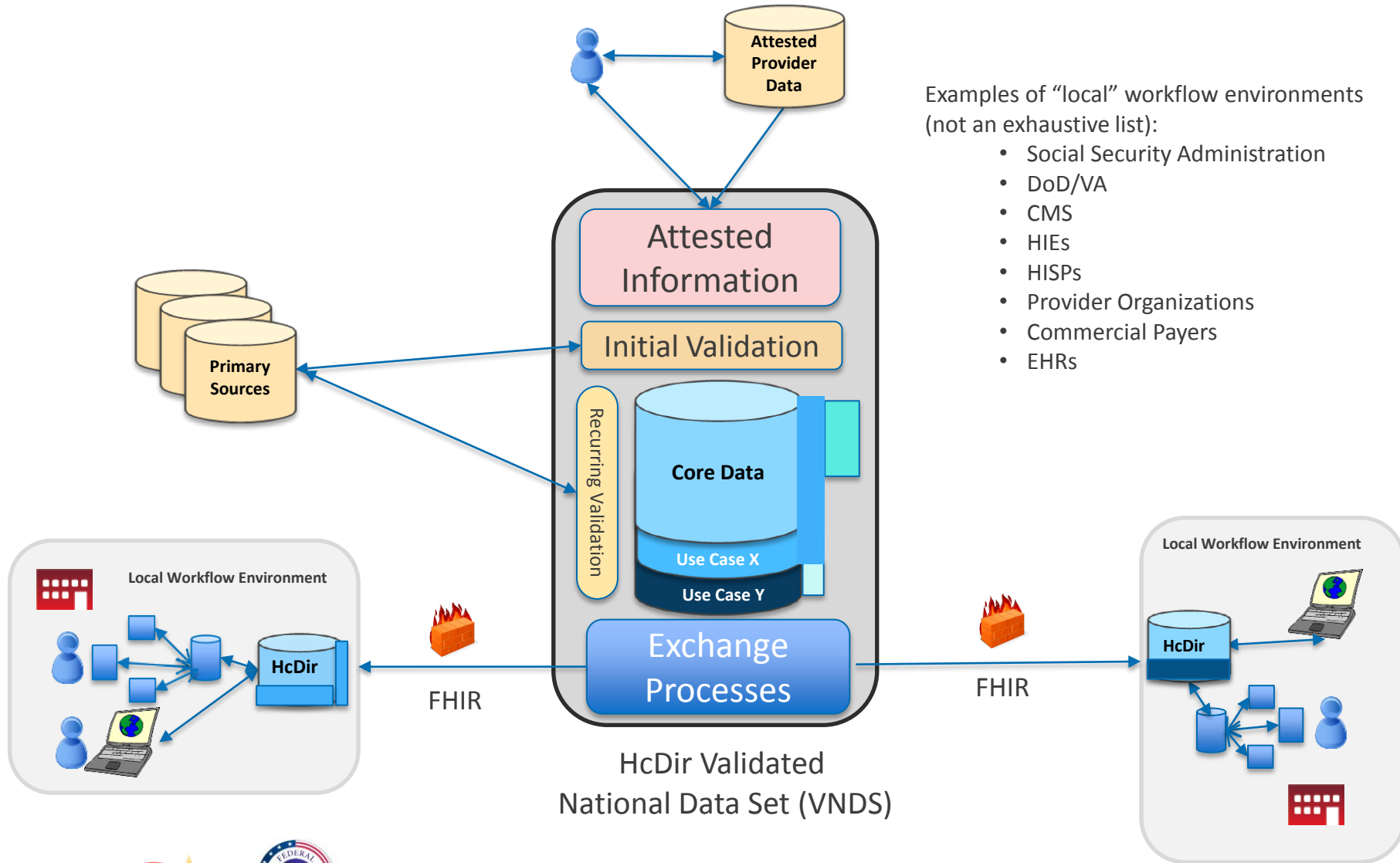
HL7 IG ballot process



Technical Learning Community (TLC)



HcDir Conceptual Architecture -- Draft



Today's discussion – Segmentation

- How do we segment or constrain the information being exchanged between a national resource and local workflow environments, such that a recipient only receives the information they need?
- How would your organization use a national resource of validated HcDir data?



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