

The Office of the National Coordinator for
Health Information Technology



ONC/FHA Provider Directory Workshop

July 5th, 2016



Logistics and Agenda

Daniel Chaput – ONC

Welcome/Logistics

The Agenda



Adobe Acrobat
Document

Webinar Participants – The Agenda can be found at:

<https://confluence.oncprojecttracking.org/display/PDW/Agenda>



How we got here

**DEPARTMENT OF HEALTH AND
HUMAN SERVICES**

Office of the Secretary

45 CFR Part 170

RIN 0991-AB93

**2015 Edition Health Information
Technology (Health IT) Certification
Criteria, 2015 Edition Base Electronic
Health Record (EHR) Definition, and
ONC Health IT Certification Program
Modifications**



We proposed; you commented

- ❑ **We proposed** a new 2015 Edition “healthcare provider directory—query request” certification criterion and;
- ❑ “Many **commenters confirmed** the value of provider directories and the ability for EHRs to query a provider directory” and
- ❑ “Most **commenters stated** that the proposed IHE HPD standard was immature” and that there were “issues related to federated queries” and;
- ❑ “**Commenters also noted**, to ensure quality data, there needs to be: Centralized directories; a governance model for a centralized approach; and uniform directory sharing strategies among providers, organizations, and intermediaries ” and;
- ❑ “**Some commenters stated a preference** for an approach that utilized a RESTful Architecture”



in addition

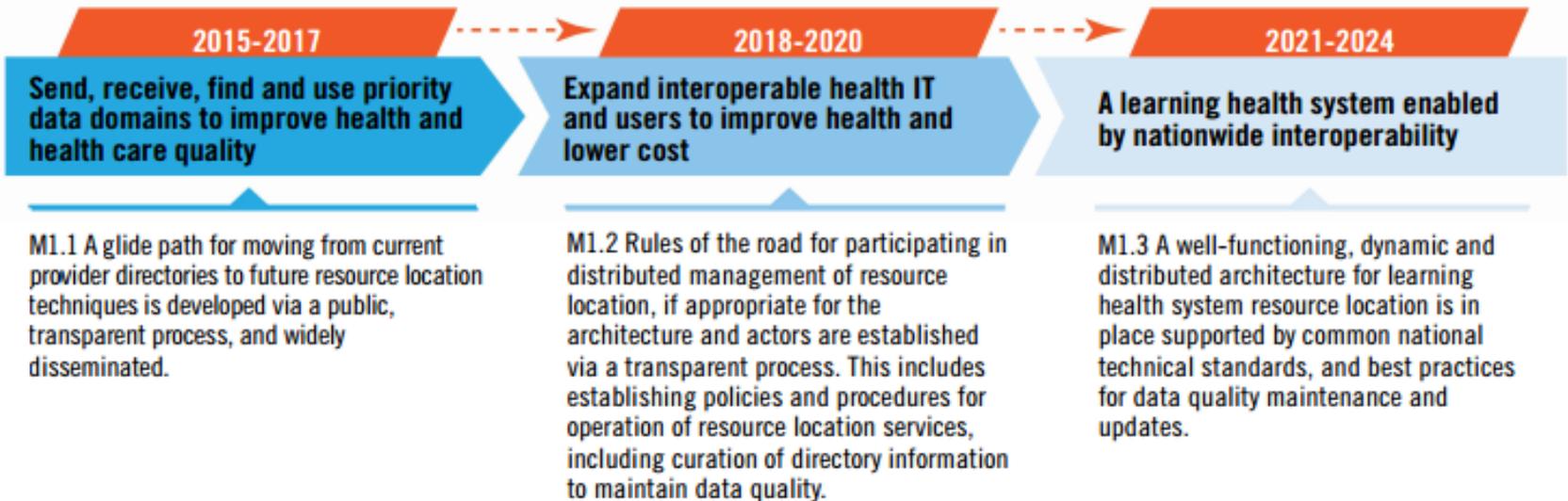
- We note[ed] that **HHS remains committed** to advancing policies related to provider directories as a means of **furthering health information exchange and interoperability**.
- We **believe that continued work in this space can inform the development and implementation of provider directory standards** for consideration in future rulemaking.



and the Interoperability Roadmap

SHARED NATIONWIDE INTEROPERABILITY ROADMAP

Milestones for Health Care Directories and Resource Location





and...

M2. Calls to Action	<ol style="list-style-type: none">1. Provider directory operators should align existing directories to the extent possible with best available standards for provider directories as identified in ONC's most recent finalized Interoperability Standards Advisory or with emerging RESTful approaches if implementation timelines are not near-term.2. The FACAs should assess the critical health care directory questions identified in the roadmap and how current standards and/or legacy services already incorporated into products can be used or extended to support stakeholder needs.3. Through public, transparent processes, stakeholders should prioritize the participants and services that are to be discoverable using resource location and identify a near-term goal for the first small set of resources to be included in initial implementations, such as Direct addresses, electronic service information, web addresses, and multiple practice locations.4. CMS should, via various policies, require that Direct addresses and electronic service information are entered into and maintained in NPPES.	<ol style="list-style-type: none">5. Through public, transparent processes, stakeholders should identify the architecture and workflow for potential RESTful resource location as part of a learning health system, including the individual and IT system actors, roles and access requirements.6. Technology developers and resource location service providers should continue to adopt best available national standards for locating participants and resources across the learning health system as identified in ONC's most recent finalized Interoperability Standards Advisory.7. Technology developers and resource location service providers should implement best practices for business processes related to data quality, maintenance and update processes.8. Through public, transparent processes, stakeholders should work with SDOs and technology developers to demonstrate standard(s) and API(s) for resource location in trial implementations, beginning with a prioritized set of resources.	<ol style="list-style-type: none">9. Through public, transparent processes, stakeholders should refine the architecture and workflow for resource location as part of a learning health system.
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April 4th and 5th

Purpose Statement:

- The purpose of the Provider Directory Workshop will be to convene public and private stakeholders to review past and current challenges, share success stories, and generate new ideas around provider directory standards and solutions.

Intended Audience:

- Health IT developers with an interest in provider directory standards and implementation.
- Organizations and vendors that are developing or implementing provider directory solutions.



April 4th and 5th

Focus:

- The workshop will approach provider directory from the point of view of interoperability, data quality, existing and evolving standards, and other technical considerations. We recognize that technical solutions alone are insufficient for successful implementation, we will consider non-technical (governance, sustainability, etc.) considerations as appropriate.

Goal:

- The goal of this workshop is to assist stakeholders involved in directory work exchange ideas and potential solutions that can further interoperability in the health care sector. It also aims to facilitate a productive dialogue that will catalyze stakeholders to take action to help address directory related challenges.