NHII 03
Standards & Vocabulary
Group B

Mark S. Tuttle

Apelon

This presentation does not necessarily reflect the views of the U.S. Government or the institution of any participants

Standards & Vocabulary: Track B

BEFORE Sec'y Thompson's speech …
- *"We few, we happy few, we band of brothers."*

AFTER Sec'y Thompson's speech …
- *Quarterly progress reports!!*

Definition:

- **"Standards & Vocabulary":** Content and message standards, especially but not exclusively including standard vocabulary.

Standards & Vocabulary B: Current Status

1. Standards are NOT self-improving
2. Standard messages and standard vocabularies are NOT aligned
3. Candidate standards need adoption or replacement
4. There is little apparent incentive to create comparable patient descriptions
5. Inter-vocabulary mappings are incomplete, and lack tri-lateral authority

Standards & Vocabulary B: Desired States

1. Standards are self-improving
2. Standard messages specify standard vocabulary
3. Appropriate candidate standards are adopted; planned standards will replace inappropriate candidate standards
4. Comparable patient descriptions are worth more than incomparable patient descriptions.
5. Inter-vocabulary mappings are useful, comprehensive, and validated.

Standards & Vocabulary B: Short Term Recommendation 1

(45) <u>PROCESS</u> for repair and enhancement

- Create a robust, nimble *process* for responding to problems arising from the use of standards
  - Bring relevant stakeholders together to fix problems quickly
  - Avoid "ossification" of standards that don't meet needs for meaningful use
- Target organization
  - HHS should lead the federal gov't to support, evaluate and select from among contending solutions by the end of Calendar 2003
- Milestones
  - By Q4 '03 stakeholders know to whom to report problems using standards
  - By Q2 '04 reports of problems result in improved standards

Standards & Vocabulary B: Short Term Recommendation 2

(21) ALIGN models, messages and vocabularies

- **Expedite the *alignment* of HL7 models and messages with standard vocabularies**
  - **Including SNOMED, LOINC, DICOM, and terminologies for drugs, devices, etc.**
  - **Covering all biomedical domains (including coverage for plants, animals, …)**
  - **Develop uniform implementation guides**
  - **Create independent conformance testing procedures**
- **Target organization**
  - **The federal gov't should fund HL7 and relevant stakeholders**
- **Milestones**
  - **By Q2 '04, achieve "capture once and reuse," such as reportable diseases messaged to CDC, adverse events reported to FDA, clinical data in support of reimbursement claims, outcomes reporting of home health, rehab and long-term care to CMS, reporting of vital events (births, deaths) …**

Standards & Vocabulary B: Short Term Recommendation 3

(21) Accelerate _ADOPTION_ of NCVHS+CHI recommended standards

- **Target organization**
  - **The federal government and trading partners**
- **Milestones**
  - **Initial working set adopted by calendar Q4 '03**

Standards & Vocabulary B: Short Term Recommendation 4

(18) <u>CMS should create FINANCIAL INCENTIVES for providers to use standards</u>

- **Target organization**
  - **The federal gov't**
- **Milestones**
  - **Plan published by end of calendar '03.**
  - **Reimbursement "adjusted" beginning October, 2004**

Standards & Vocabulary B: Short Term Recommendation 5

(15) Support INTER-VOCABULARY MAPPING

- The UMLS should be augmented to accommodate advanced inter-vocabulary mapping
  - From clinical vocabularies to classifications and regulatory reports
  - Between clinical vocabularies
- Target organization
  - The federal gov't should fund the NLM to collaborate with developers
- Milestones
  - Funding in place within 6 months of each vocabulary standard adoption
  - "Capture once and reuse" effected by 12 months from each vocabulary standard adoption

Standards & Vocabulary B: Medium Term Recommendation 1

Medium term recommendation 1

- KEEP GOING ON THE SHORT TERM RECOMMENDATIONS!
  - Target organization(s)
    - Add "helper" organizations

Standards & Vocabulary B: Other Observations

- **Thank you Sec'y Thompson!**
- **Thank you NLM**
- **Thank you Dr. Yasnoff**
- **"Show me the money"**
- **Core data set for EHR**
- **Comparable patient descriptions: Research, behavior and education**
- **Anxiety …**
- **Localization, regionalization, specialization …**
- **Timing is everything!**

Thank you from *Standards & Vocabulary Track B*!!

Facilitators
- **Bill Braithwaite**
- **Stan Huff**
- **Judy Ozbolt**
- **Mark Tuttle**

Special Experts
- **Jeff Blair**
- **Marjorie Greenberg**
- **Randy Levin**
- **Kent Spackman**

Participants
- **Many …**

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2