



Steering Committee Meeting Minutes

November 2, 2017

Meeting Participants

Committee Members

- ✓ Nancy Beavin, Humana
Bill Beighe, Santa Cruz HIE
- ✓ Hans Buitendijk, Cerner
Michael Hodgkins, AMA
- ✓ Kevin Isbell, Kaiser Permanente
- ✓ Leslie Kelly-Hall, Healthwise
- ✓ Andrew Kling, Geisinger
- ✓ Rob Klootwyk, Epic
- ✓ Steven Lane, Sutter Health
- ✓ Prathib Skandakumaran for Kathy Lewis, Surescripts
- ✓ Tushar Malhotra, eClinicalWorks
- ✓ Mark Segal, GE Healthcare
- ✓ Aaron Seib, NATE
- ✓ Ryan Stewart, Dignity Health
- ✓ Kitt Winter, SSA
Rim Cothren, CAHIE, Carequality Advisory Council
Seth Selkow, Kaiser Permanente, Carequality Advisory Council

Invited Subject Matter Experts and Carequality Support Team

- ✓ Dave Cassel, Director, Carequality
Chris Dickerson, Program Coordinator, Carequality
- ✓ Mariann Yeager, CEO, The Sequoia Project
Eric Heflin, CTO/CIO, The Sequoia Project
Didi Davis, Testing Programs Director, The Sequoia Project
Jennifer Rosas, eHealth Exchange Director, The Sequoia Project
Dawn Van Dyke, Marketing Director, The Sequoia Project
Kati Odom Bell, eHealth Exchange Implementation Manager, The Sequoia Project

Meeting Summary

Call to order 12:33pm EST

Discussion Summary: Roll call was facilitated, and a formal quorum was established. The agenda was discussed.

Decision/Outcome: The agenda was reviewed, and nothing was added.

Action/Follow up: None.

Administrative Items

Minutes of the Last Meeting

Discussion Summary: The October 5th minutes were introduced, and a motion was made by Kitt and seconded by Hans to approve the October minutes.

Questions/Discussion: All members approved with no objections.

Action/Follow up: The October minutes were approved.

Advisory Council Application Process

Discussion Summary: The Advisory Council's nominating committee meets Monday

- Based on applications, it's likely that 12-14 candidates will be recommended for appointment
- In the meantime, we have a replacement to approve:
 - Jared Gurfein has left OneRecord; they have proposed Morgan Knochel (Co-Founder and CTO) as his replacement
 - Morgan is an active participant in the Implementer community, and on the Council as a temporary stand-in for Jared
- Also note, Jan Bartlett has left the Arkansas Office of Health IT, and Shirley Tyson joined the most recent meeting for her; only the November meeting remains in Jan's term, however, so we propose not formally replacing her
- Mark Segal will be retiring from GE effective December 1. Mark suggested that Geoff Lay would be a good placement for 1 of the open seats.

Questions/Discussion: Dave requested that the committee formally approve Morgan to replace Jared on the committee. Kitt motioned to approve Morgan for replacement of Jared, which Mark seconded. All members approved Morgan to formally replace Jared with no objections. Dave asked if the committee had thoughts about GE having the opportunity to fill Mark's original seat on the Advisory Council, in addition to his Steering Committee seat.

Action/Follow up: No objections to GE filling the empty seats on both the Advisory Council and the Steering Committee, the former being empty due to Mark's joining the Steering Committee, and the latter being empty due to his leaving GE.

In-Person Meeting

Discussion Summary: Dave reminded the group that we will hold our annual in-person meeting on Monday, December 4th from 12-5pm EST. This is the day before The Sequoia Project's Annual Member Meeting.

- Location: Gaylord National Resort & Convention Center, Camellia 4 Room
201 Waterfront Street
National Harbor, MD 20745

Draft Agenda

- 12:00-12:30 Welcome and Lunch
- 12:30-2:00 2017 in Review: State of Operations, Lessons Learned, Open Questions
- 2:00-2:15 *Break*
- 2:15-4:30 Strategic Direction and Project Priorities (Materials will be provided for review ahead of the meeting)
- 4:30-4:45 Wrap-Up and Next Steps

Questions/Discussion: Dave asked if there was interest in dinner or cocktail hour of the steering committee on the evening of Dec 4th. The Committee agreed to meet. Tushar asked if there would be a dial-in number for anyone who was unable to attend in person.

Action/Follow up: Dave will send a formal invite indicating location and time and will check on the ability to conference in.

Implementer Application Process

Discussion Summary:

The CCA requires that a prospective implementer submit an application, via a form provided by Carequality, in order to be recognized as an Implementer and gain access to production exchange

- *The CCA states: The purpose of the application shall be for Applicant to demonstrate, to the satisfaction of Carequality, that Applicant is reasonably positioned to meet its obligations under this Agreement.*
- *We adopted the application and general review criteria as Carequality began its initial rollout*
 - *Side note: we're in the process of developing proposed updates*
- *Under this process, Carequality staff typically have been able to approve*

With some experience now under our belts, we are revising the Carequality Implementer Application, and its review process, to more effectively evaluate whether a prospective implementer is reasonably positioned to meet its obligations. Updated documentation, including the application and review process, will be provided for approval in the coming weeks.

Updates include:

- More background on the organization, including state/jurisdiction where organized, Board members, and proof of insurance or financial reserves
- New question on HIPAA Compliance
- Expanded CC reference call “script” with different questions for service providers relative to those who work directly with end users
- Revamped review criteria focused on defined red and yellow flag items, to limit subjectivity

One outcome is that applicants will be more likely to be referred to the Steering Committee for a final decision, but we still anticipate that most can be approved by Carequality staff.

Questions/Discussion: None.

Action/Follow up: None.

Implementer Application Process- Background

The application focuses on several key requirements of implementers, including flowing down the CC Terms, handling Adverse Security Events, and posting information handling practices.

- For some organizations, who are new to healthcare/less well established, we do background reference calls
- These calls are meant to shed light on the organization’s (or its principals’) general experience in healthcare and the nature of its business, in the larger context of establishing a comfort level that the organization is positioned to meet its requirements

Questions/Discussion: Steve added that the review process by CCA is intentionally flexible but the burden is on the applicant to demonstrate that they are able to participate in Carequality in a way that is safe and secure and that it’s incumbent upon the steering committee to ultimately decide that. The criteria is not specified, but it is left phrased in terms that the applicant must reasonably demonstrate that it can comply in order to give the CQ as much flexibility as possible since Carequality is seeing different types of organizations that would like to use the elements that we have created to transact different types of information.

A member asked what is the obligation of Carequality to ensure that the applicants will be doing authorized queries.

Dave responded that the CCA states that the applicant must demonstrate the ability to meet the requirements under the CCA. One area we have discussed is that the organization demonstrates a stronger security in HIPAA compliance within their technology. It is not necessarily the role of the application process to identify whether the organization will have accurate access policies. The responder can decide how they will answer the query, and the underlying expectation is that the organization will request a copy of the authorization form before responding.

Action/Follow up: None.

Patient Based Notifications

This project is to create a detailed Use Case Proposal for review by the Advisory Council and Steering Committee as a potential future (Q2 and beyond 2018) project

- *The Use Case proposal, if developed, will support the subscription to, and provision of, various notifications to/from the care team and beyond, via the Carequality governance framework*
- *It will leverage a use case proposal template that we are also fleshing out as part of the project*
 - *Planned email review opportunity for the Committee later this month*
- *We have nearly completed arrangements with Cedarbridge to provide contractor support for the project*
- *We are projecting that a detailed draft of the Use Case Proposal will be available for a tiger team to begin refining, at the beginning of January*
- *We would like to start constituting the tiger team*

4 different stakeholder group- potential implementers, other carequality implementers, provider organizations, vendors

Total of 8 members

–REMEMBER: the work product is a use case proposal, NOT the policy details or precise technical architecture of the use case

- *Notification service providers: 3 seats*
 - *CRISP/Audacious Inquiry*
 - *Surescripts*
 - *CommonWell*
 - *Other Carequality Implementers: 3 seats*
 - *Santa Cruz HIE or MiHIN*
 - *[liveEHR vendor 1]*
 - *[liveEHR vendor 2]*
- *Provider organizations: 1 seat*
 - *Steering Committee or Advisory Council member preferred*
- *PHRs and/or patient interests representative: 1 seat*

It was suggested that it may be helpful to use a non-Carequality implementer to get an outside perspective. Dave indicated that for developing the proposal, we would like to include those that are more in line with CQ already. But when we get to the working groups that would develop the details of the technical approach and details of the policies, then we would like to include other groups to have a voice in that part of the process.

The Committee discussed adding a few more seats for different provider groups, service providers, and payers. It was agreed that these groups would certainly have a voice if/when the project moves from proposal to actual execution.

Action/Follow up: Dave will communicate with the group via email regarding the template for the Use Case Proposal, the application discussed and additional information on notifications tiger team.

Meeting was adjourned at 2:01pm EDT.