2011

WISHIN

Wisconsin Statewide Health Information Network

WISHIN Standards & Adoption Methodology

CONTENTS

INTRODUCTION

The mission of the Wisconsin Statewide Health Information Network ("WISHIN") is to develop and sustain a trusted, secure statewide health information network and health information exchange (HIE) services that provide value to participants. One of the goals to support this mission is to develop a scalable, standards-based technical architecture for statewide HIE that leverages existing investments in health information technology (HIT). WISHIN's mission and goals endeavor to improve health care quality, increase patient safety, reduce health care costs, and improve public health.

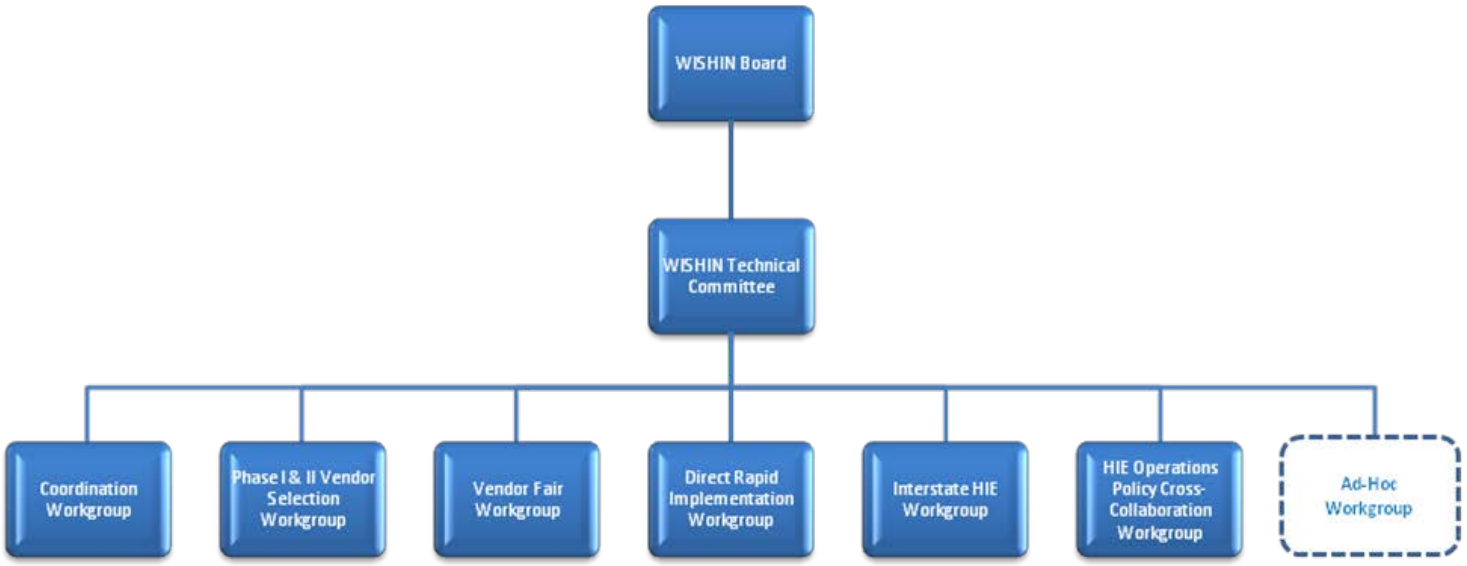
A key component in the delivery of WISHIN's mission is defining a methodology for the adoption of standards-based technology that aligns with national protocol and guidance from the Office of the National Coordinator (ONC). The standards and adoption methodology defined by WISHIN has been adapted to fit the changing national health information technology landscape due to the Health Information Technology for Economic and Clinical Health (HITECH) Act.

ADOPTION METHODOLOGY

The area of standards in health information exchange is highly dynamic; therefore, it is necessary to define a methodology for the adoption of standards to ensure interoperability of the statewide health information network (SHIN). The adoption methodology is a continuous cycle as the ONC routinely releases recommended standards for evaluation.

Evaluation and Adoption Structure

WISHIN has developed a hierarchical review process consisting of the WISHIN Board, WISHIN Technical Committee, and ad-hoc WISHIN Technical Committee Workgroup(s) for the evaluation and adoption of emerging standards. The hierarchical approach allows for standards to be reviewed at the appropriate level, as well as to be escalated if consensus cannot be reached at any particular level. The graphic below displays the WISHIN organizational structure as it relates to the standards and adoption methodology:



The WISHIN Technical Committee has established Standards Recommendation Entities that are considered the primary sources of information on emerging standards. The WISHIN Technical Committee will annually review Standards Recommendation Entities to validate that information provided from this source is in alignment with federal guidance and industry standards. The Appendix of this document lists the approved Standards Recommendation Entities that have been approved by the WISHIN Technical Committee.

When a new or emerging standard is recommended by ONC, the WISHIN Technical Committee is responsible for delegating evaluation to the appropriate workgroup. The roles of the Technical Committee Workgroups, WISHIN Technical Committee, and the WISHIN Board in the standards and adoption methodology are outlined in the following sections.

Ad-Hoc WISHIN Technical Committee Workgroup(s)

The WISHIN Technical Committee Workgroups are comprised of resources with deep technical knowledge that understand the importance of interoperability and standards based architecture. For this reason, ad-hoc Technical Workgroups will be created to identify, monitor, and provide recommendations for the consideration and implementation of emerging standards, based on the technical expertise of resources. The Ad-Hoc Technical Workgroups will meet a minimum of one time per month to review emerging standards and more frequently if required. The Ad-Hoc Technical Committee Workgroups will use the following methodology to facilitate workgroup decisions:

1. **Identify & Analyze**
    - Review and analyze emerging and existing standards recommended by approved entities
    - Analyze how emerging standards align with existing HIT investments
    - Perform impact analysis for Wisconsin-specific providers

2. **Evaluate & Classify**
    - Evaluate applicability to WISHIN in terms of industry readiness and current adoption status
    - Evaluate how the system may operate with multiple standards for a period of time
    - Classify into standards that are ready for statewide use or standards with limited adoption that require further evaluation
    - Align recommended standards with ONC recommendations

3. **Validate Feasibility**
    - Validate proposed recommendations on standards and assess feasibility of adoption with subject matter experts (SMEs)

4. **Recommend to WISHIN Technical Committee**
    - Provide a comprehensive report to the WISHIN Technical Committee, including: required standards for state backbone, recommended standards for statewide adoption, and recommended standards to monitor, timelines, work plans, identified issues/risks, and budget information

WISHIN Technical Committee

The WISHIN Technical Committee provides oversight of the Ad-hoc WISHIN Technical Committee Workgroup(s) and serves as a point of escalation for standards decisions that cannot be addressed at the Workgroup level. The Technical Committee uses the following methodology to facilitate Committee discussions:

1. **Review Technical Workgroup Submissions**
    - Review the analysis, evaluation, and feasibility evaluation submitted by the Technical Workgroups and provide feedback to workgroups

2. **Request Additional Information if Necessary**
    - Identify gaps in workgroup submission and request additional information if necessary
    - Request research of identified alternate solutions

3. **Recommend to WISHIN Board**
    - Provide a comprehensive report to the Board, including: required and recommended standards for statewide adoption, recommended standards to monitor, timelines, work plans, identified issues/risks, and budget information

WISHIN Board

The WISHIN Board provides oversight of the Technical Committee and serves as a point of escalation for standards decisions that cannot be addressed at the Committee level. The Technical Committee provides monthly updates to the WISHIN Board regarding the adoption of standards.

RECOMMENDED WISHIN STANDARDS

The following standards were included in Wisconsin's Healthy Information Technology (HIT) Strategic and Operational Plan and should serve as a starting point for the evaluation and adoption of standards. These standards are categorized into two groups: Content Exchange Standards and Vocabulary Standards.

Content Exchange Standards

Purpose	*Adopted Standard(s) to Support Meaningful Use Stage I*	*Candidate Standards to Support Meaningful Use Stage II*
Administrative Transactions	Applicable HIPAA transaction standards required by law	Applicable HIPAA transaction standards required by law
Drug Formulary Check	Applicable Part D standard required by law (e.g., NCPDP Formulary and Benefits Standard 1.0)	Applicable Part D standard required by law
Drug Formulary Check	Applicable Part D standard required by law (e.g., NCPDP SCRIPT 8.1 or NCPDP 8.1 and NCPDP SCRIPT 10.6)	NCPDP SCRIPT 10.6
Patient Summary Record	HL7 CDA R2 CCD Level 2 or ASTM CCR	Alternatives expected to be narrowed based on HIT Standards Committee recommendations
Quality Reporting	CMS PWRI 2008 Registry XML Specification#, +	Potentially newer version(s) or standards based on HIT Standards Committee input
Submission of Lab Results to Public Health Agencies	HL7 2.5.1	Potentially newer version(s) or standards based on HIT Standards Committee input
Submission to Immunization Registries	HL7 2.3.1 or HL7 2.5.1, VXU	Potentially newer version(s) or standards based on HIT Standards Committee input
Submission to Public Health Agencies for Surveillance or Reporting (excluding adverse event reporting)	HL7 2.3.1 or HL7 2.5.1	Potentially newer version(s) or standards based on HIT Standards Committee input

Vocabulary Standards

Purpose	*Adopted Standard(s) to Support Meaningful Use Stage I*	*Candidate Standards to Support Meaningful Use Stage II*
Electronic Medication	Any code set by an RxNorm drug data source provider that is identified by the United States National Library of Medicine as being a complete data set integrated within RxNorm+	Rx Norm
Lab Orders and Results	LOINC® when LOINC® codes have been received from the laboratory	LOINC®
Medication Allergy List	No standard adopted at this time	UNII

Purpose	*Adopted Standard(s) to Support Meaningful Use Stage I*	*Candidate Standards to Support Meaningful Use Stage II*
Medication List	Any code set by an RxNorm drug data source provider that is identified by the United States National Library of Medicine as being a complete data set integrated within RxNorm+	RxNorm
Problem List	Applicable HIPAA code set required by law (e.g., ICD-9-CM or SNOMED CT®)	Applicable HIPAA code set required by law (e.g., ICD-9-CM or SNOMED CT®)
Procedures	Applicable HIPAA code sets required by law (e.g., ICD-9-CM or CPT 4®)	Applicable HIPAA code sets required by law (e.g., ICD-10-PCS or CPT-4®)
Submission of Lab Results to Public Health Agencies	LOINC®	LOINC®, UCUM, and SNOMED CT® or Applicable Public Health Agency Requirements
Submission to Immunization Registries	CVX*, MVX, +	CVX
Submission to Public Health Agencies for Surveillance or Reporting (excluding adverse event reporting)	According to Applicable Public Health Agency Requirements	According to Applicable Public Health Agency Requirements
Units of Measure	No standard adopted at this time	UCUM
Vital Signs	No standard adopted at this time	CDA template

APPENDIX

Annually, the WISHIN Technical Committee reviews entities from which standards are being adopted to ensure recommendations align with federal guidance.

Standards Recommendation Entities: 2011

Entity	*Description*	*Date Approved by WISHIN Technical Committee*
The Office of the National Coordinator for Health Information Technology: Health IT Standards Committee	The Health IT Standards Committee is charged with making recommendations to the National Coordinator for Health IT on standards, implementation specifications, and certification criteria for the electronic exchange and use of health information.	
Health Information Technology Research Center (HITRC): e-Prescribing Community of Practice (CoP)	A Community of Practice (CoP) represents a group of professionals who share a concern, set of problems, and passion about a topic, and who deepen their knowledge and expertise in this area by interacting on an ongoing basis.	
Health Information Technology Research Center (HITRC): Lab Interoperability Community of Practice (CoP)	A Community of Practice (CoP) represents a group of professionals who share a concern, set of problems, and passion about a topic, and who deepen their knowledge and expertise in this area by interacting on an ongoing basis.	
Health Information Technology Research Center (HITRC): Privacy and Security Community of Practice (CoP)	A Community of Practice (CoP) represents a group of professionals who share a concern, set of problems, and passion about a topic, and who deepen their knowledge and expertise in this area by interacting on an ongoing basis.	
Standards & Interoperability Framework: Transition of Care (ToC) Initiative	Meaningful Use Stage 1 and foreseen Stage 2 requires information to be exchanged in transition of care. Implementers are often confused on how to use the specifications to exchange the required data. The exchange of clinical summaries is hampered by ambiguous common definitions of what data elements must at a minimum be exchanged, how they must be encoded, and how those common semantic elements map to MU specified formats (C32/CCD and CCR). Finally, the lack of a robust toolset to aid in development and validation of conformant templated clinical documents is a major impediment to the widespread adoption of the standards	

Entity	*Description*	*Date Approved by WISHIN Technical Committee*
Standards & Interoperability Framework: Lab Results Interface (LRI) Initiative	There are at least two standard specifications for ambulatory laboratory reporting, neither of which are adopted universally across industry. The cost and time to initiate new electronic laboratory results interfaces hampers broad adoption of such interfaces. The field by field details of HL7 v2 implementation guides used by clinical labs and EHRs vary, creating a need for mapping or configuration per interface, and the prevalence of core subsets of LOINC codes for common tests and analytes also varies, causing downstream issues in decision support and quality reporting.	