NwHIN Power Team
Draft Transcript
August 11, 2011

Presentation

Judy Sparrow – Office of the National Coordinator – Executive Director
Good morning, everybody, welcome to the Standards Committee NwHIN Power Team. This is a federal advisory call, so there will be opportunity at the end of the call for the public to make comment. Just a reminder, members, please identify yourselves when speaking. On the call today we have Dixie Baker, who's the lead and John Feikema. And then from ONC we have Avinash Shanbhag and Matthew Rahn. Is anybody else on the line? Okay, with that I'll turn it over to Dixie Baker.

Dixie Baker – Science Applications Intl. Corp. – CTO, Health & Life Sciences
Okay. Thank you, guys, for calling in. Let's just quickly go over the agenda. This is our last meeting before the August meeting of the Health Information Technology Standards Committee. As you may recall, we had committed to provide preliminary recommendations at this August meeting. So by the end of this meeting, we'll have a conversation on exactly what we all want that to be.

So the first item on the agenda is to review the process that we're using just to go over it again, so everybody is fresh in everybody's mind and also that it was one minor change into that process just at the end to make sure that we consider all of the specifications that are needed. After that we will review the update from the standards and interoperability framework team. They have gone through an assigned ratings in the various criteria that we gave them to judge the specifications on. And again, the specifications that we're considering today are those that are for the nationwide health information network exchange and those that are that's generated by the direct project.

And then after we've done that, that piece will really comprise the fodder, if you will, for what we want to present at next week's meeting. So the last item on the agenda before public comment is to discuss what we want to present at next week's meeting. Okay?

I have drive control, thank you all. We want to be looking at the grid slides. Can I bring these up? There you go, thank you, thank you, very good.

Okay. This is the slide deck that depicts a step-like process for identifying these building blocks, which could be selectively used and integrated to support the exchange of health care documents, which is the charter for this team. The basic flow is to start by eliminating those that have a low need and looking at NwHIN and direct specifications, we eliminate those whose need is judged to be low. Second is to evaluate the remaining specs on the maturity of the specification itself and the maturity of the technology with respect to the complete life cycle. And for any of them that are really immature, the specification is immature and the technology is past its prime, I think we'd call it declining, we would set those aside for consideration of alternatives.

The third step is to evaluate the remaining steps on deployment and operational complexity and market adoption. And then we would recommend those specs that are sufficiently simple and broadly the most adopted and consider alternatives for those that are very complex and not broadly adopted. And then for the others we still need to consider whether we use the other specs or whether we consider alternatives for those as well. And then we look at the work, we draw from the work that was done on looking at other widely deployed steps and the final step is then to subjectively see if there's any other gaps.

Okay. Step one, this is how it really is depicted graphically, eliminate for the consideration those that the need is low. The idea here is if there's a low need, it really shouldn't be a building block to begin with,

simple justification here. The next one is looking at spec maturity and declining technology life cycle. And again, we don't eliminate any specs because we've already established that there's a need and so spec we recommend alternatives for these, so it would look something like this where you look at spec maturity, technology maturity along the life cycle of the emerging, maturing and declining. And those that are low to moderate in the specification maturity and in declining technology, we would then set them aside, look at alternatives for those.

So then we recommend the building blocks and we recommend alternatives and then we consider the remaining specs and select building blocks. So here we have operational complexity, we have industry adoptions. And we think of alternatives for those that lie in this sector in this … here and then we recommend the ones that fall into this section of the grid. And then any that fall outside we consider the need and figure out whether we want to go for an alternative or recommend it.

So I think now we're ready for, and these are the—I told you the alternatives. Okay, now I think we're ready for the power team update. Great, thank you.

Avinash Shanbhag – ONC – Director, NwHIN
Thanks, Dixie. Judy, can somebody else drive the slides or do I take the control of it?

Judy Sparrow – Office of the National Coordinator – Executive Director
Either way. You can just tell her to move it on.

M
I just gave Avinash rights to move the slides, so if you'd like to, you can.

Avinash Shanbhag – ONC – Director, NwHIN
Okay, let's see.

Dixie Baker – Science Applications Intl. Corp. – CTO, Health & Life Sciences
Judy, has anyone else joined the call?

Judy Sparrow – Office of the National Coordinator – Executive Director
I haven't heard anyone, have you? Katelyn, anyone else come on?

Katelyn
No, nobody else has joined the call since we began.

Judy Sparrow – Office of the National Coordinator – Executive Director
Okay, thank you.

Avinash Shanbhag – ONC – Director, NwHIN
Okay, thanks, Dixie, and I appreciate organizing the structure. And I think the process will be very helpful. So at Dixie mentioned, what we have done I think in the last few meetings of the power team, I think we had looked at multiple criteria and had provided our updates and our initial ratings. I think in this meeting, what we plan to do as I have put on the slide here there was an error in one of the specifications for direct that was related to the use of XTR, the cross enterprise document liable interchange specification. I think that we have corrected that for folks who identified it and gave us back input. We also added a new relation criteria or deployment and official complexity and again have provided initial rating based on both our understanding and experience of using specifications from exchange and directs and have updated the evaluation criteria based on both the changes to the rating and also based on the structure that Dixie has provided.

Dixie Baker – Science Applications Intl. Corp. – CTO, Health & Life Sciences
I just wanted to say one thing, Avinash. I didn't notice this when I was looking at these slides before. Go back one, please. This is just something that should be clarified. That second bullet, it's not the IET XDR and XDM that we added. We have not added those. What we added is there's a separate self-standing

direct project stat that addresses the use of XDR and XDM as the on-ramp, off-ramp on the direct, and it's available for download from the direct project site. And that's what we should have been evaluating, so we may need to go back and reconsider that because that spec is quite mature.

(Speaker drops voice at times, hard to hear)

Avinash Shanbhag – ONC – Director, NwHIN
Good, thank you, actually, for that, but that's right, yes. So for in terms of giving some structure to the criteria what we did was we decided that if the process was easy and could be handled by IT support, we would call it a low complexity. And depending on the administrative support or technical support that's needed, we can make the ratings all the way to high, so that was the basis of our initial rating and to look at comparing how you rate the different specifications.

So here again looking at, these are the specifications you see here are I think we've broken them down into transport, discovery and content. I think they lend well to the discussions on to the maturity versus the different criteria. So just going through I think what I will try to highlight is some of the areas that we did considered and some of the …. For messaging again, these cells are fairly mature standards, so messaging process the specifications are fairly standard and had a very moderate to high-marketed option. In terms of deployment and operational complexity again, I think that the consensus opinion was that there are several mature tools available that provide substantially ease of deployment and operations, so maybe we can weigh it as more weight.

Authorization stream was the one that really there was a lot of discussion. And while the specification is partly mature, I think you can use it … which is … which is fairly a mature standard and had fairly good moderate to high adoption. So the deployment and operational complexity of high was given not so much as because of any issue with the specification or even maturing, but just it was a reflection of the complexity needed to insure security of systems and specifications. So really the complexity is not so much in terms of deploying as much as to insure that underlying security environment is established, the processes have …. So hence we agreed that it was a high complexity of our operations and of the deployment.

Going down to direct transport, this was again the deployment of operational complexity that's the column I'm focusing on. The team felt that while from an email SMPT mined plan per section where the deployment is fairly low to moderate, when we look at this from the perception of what is needed to insure health information exchange. And the link that I put on the slide really points to a set of deployment of orders that have been proposed for the direct project, which includes HITSPs and the need to have a system-to-system connections. At that point the team felt that as things are going on pilot state and we don't have a lot of information that that it was put into it as a moderate level.

For direct security, S/MIME, using S/MIME again, the spec maturity is pretty high and the life cycle is high. Here the deployment and operational complexity was already deemed to be moderate to high simply because of a very similar discussion around the need to insure security and encryption and certificate management, all those issues that really get highlighted when we use S/MIME or for helping from an exchange and the need to insure security and privacy.

Dixie Baker – Science Applications Intl. Corp. – CTO, Health & Life Sciences
Feik, you're still on the line, right?

John Feikema – VisionShare – President
Yes.

Dixie Baker – Science Applications Intl. Corp. – CTO, Health & Life Sciences
If you have any comment along the way, please feel free to make them.

John Feikema – VisionShare – President
No, absolutely.

Dixie Baker – Science Applications Intl. Corp. – CTO, Health & Life Sciences
Okay, thank you.

Avinash Shanbhag – ONC – Director, NwHIN
If there are any questions as Dixie mentioned, please feel free to highlight. Now we go to the XDR and XDM for the direct and again here that's the one that Dixie clarified that this is the one specification that was reviewed is the one that was … from why the direct project. Here again, I think the piece to highlight are the specification is fairly mature, but the life cycle of it seemed as maturing as opposed to mature just because it's still being piloted and used in a few places, but not at the level of a matured life cycle. And again, for operational complexity we deemed it as very similar to work our messaging flags from complexity would be deemed as moderate.

John Feikema – VisionShare – President
I do have one question. When you talked about operational complexity, are you speaking from the perspective of the institution or the deployment overall? In other words, I think some solutions require while they may have moderate complexity require more work by the actual institution than others. So I guess what I'm getting at is the encryption and certificate management in most direct solutions is hidden from or performed by someone other than the end user. So that complexity in the eyes of the CIO at a hospital or a doc in a clinic would appear to be less than XDR, for example, only because their HITSP is doing that work for them. So I'm just curious who the target of the complexity filter is aimed at. Does that question make sense?

Avinash Shanbhag – ONC – Director, NwHIN
Yes, it does make sense and thank you for bringing it up because that was one of the things that we discussed quite a bit, especially when it came to use of direct security and S/MIME. And really we felt that it was going to be a mixed share of port just because while in the once things get matured and part of production and so then potentially the deployment and operational complexity would really be at the level of a user. And if things get elevated to HITSPs then potentially that may bring down the complexity. But in terms of that of … direct given that the deployment model is still being piloted itself that at this stage we needed to essentially cover not just from an end user perspective, but essentially also include the connectivity that helps and what it entails in impact box until we get more clarity.

John Feikema – VisionShare – President
Sure. Understood. I think that perhaps one clarification might be to have a footnote or at least when it's delivered, Dixie, and this might be for you more than anything. When we talk about it, it may be worth talking about the end state for some of these differently than the current state. In other words I think that while XDR and XDM are moderate today, they will probably be moderate in the future just because they're inherently more complex and they have other … that come with that. But to the extent that these will asymptote to different places, I think it's worth it for the standards committee to understand the long-term potential of each may be different at least in terms of the complexity metric.

Dixie Baker – Science Applications Intl. Corp. – CTO, Health & Life Sciences
The definition or explanation that Avinash just gave is practically verbatim to the discussion we had on this criterion. When David Molchany initially brought this up at our previous review that we should add deployment complexity and then as we thought through it, it became clear that we really were thinking about not only deployment, but operational complexities for the end user as well. And that's why it was extended to deployment and operational complexity because we had attempted to capture all of that in the category.

John Feikema – VisionShare – President
Understood.

Dixie Baker – Science Applications Intl. Corp. – CTO, Health & Life Sciences
So I do think I totally agree that it should be explained when this is presented to the standards committee.

John Feikema – VisionShare – President
Okay, thank you.

Dixie Baker – Science Applications Intl. Corp. – CTO, Health & Life Sciences
Thank you.

Avinash Shanbhag – ONC – Director, NwHIN
We're going to the next slide, again, here are what Dixie had mentioned going to the Web services registry for the one like you point out here is that life cycle where the teams put that as a declining specification not because it's a mature standard, but just looking at it from our perspective of usage. That was what we call as a rating that may required for Web services registry.

So next two ones I take them together, patient discovery and query. They are fairly well used in the exchange system right now. Again, the deployment of operational complexities of both of them are being moderated in the sense that while it's fairly well used and has been deployed, it does require the ongoing complexity that is needed to maintain it. And to ….lookup for certificate and that's the one that has again I think that's been discussed substantially in other avenues and in other meetings. This one again there is an SNI initiative that's looking at radius order issues. And this specification really it is the specification is the use of the DNS one of the fields in DNS specification for looking up certificates.

And here for market and option I think the specification the maturity is really high, but for market adoption really the discussion was on not so much as the adoption of the specification, but the concern of now well it was adopted for the use. And in this case given that the specification has not been used in the past for looking up certificates, I think there was a concern that operational complexities for managing certificates and certificate work creations and the rest may require it to be high to moderate in our rating, simply because of the fact that is it untested. Really there are pilots I think that are SNI initiatives are moving forward and hopefully there will be some pilots in that first stage, we again felt that this really did require a learn more figure complexity rating.

Now moving on to exchange certification and again I think these three categories have been highlighted in the spreadsheet that Dixie has generated. Just to document again, it's part of this group of specifications, patient discovery, query, and review which is a standard pattern that's used in exchange for finding patients waiting for information for a patient and retrieving information from patients. So they fit and they are right into the complexities of the operational complexity environment of operational complexity that we have developed all the way.

Dixie Baker – Science Applications Intl. Corp. – CTO, Health & Life Sciences
I have a question about that then, Avinash. Since the task here is to identify these building blocks, should these three be packaged as a single building block?

Avinash Shanbhag – ONC – Director, NwHIN
Good question. I'll go back and discuss that with the teams here. The central question is that patient discovery and query and the two all kind of go together in a sense that if you are finding, discovering patients who kind of get information about that, so it may be worthwhile that we take them as a package and not split them.

Dixie Baker – Science Applications Intl. Corp. – CTO, Health & Life Sciences
Yes, Deb told us early on that the granularity was up to us and based on how it would function as a building block. If you think about it, query, discover, retrieve is sort of like Web search discovery. The three just naturally go together.

Avinash Shanbhag – ONC – Director, NwHIN
Yes, I agree, yes. That's the sense we've gotten from all the discussions and absolutely what we have seen in exchange also that those three go together.

Dixie Baker – Science Applications Intl. Corp. – CTO, Health & Life Sciences

Okay, good.

Avinash Shanbhag – ONC – Director, NwHIN
The next two ones, actually the next three ones document, submission, administrative distribution and ESMD would be the one that stands for electronic submission of medical documentation, they all three are currently used or planned to be used by CMS for some of their operational activities. Their input on it was a low to moderate for the document submission and administrative distribution. And for ESMD they have not given us their requested information, we're waiting for information. But again, I think those three are in terms of our senses that the maturity is moderate in the case of the ESMD role just published very recently between in terms of …. It's a more of a moderate ….

Dixie Baker – Science Applications Intl. Corp. – CTO, Health & Life Sciences
So ESMD has recently been published.

Avinash Shanbhag – ONC – Director, NwHIN
Yes, I think when we started the summer camp, I think ESMD was still in development and then they did go through and published their specifications.

John Feikema – VisionShare – President
It's still pretty much in a pilot phase. CMS is working actively with a handful full of vendors or end users to pilot it. The back end for it is really Connect.

Dixie Baker – Science Applications Intl. Corp. – CTO, Health & Life Sciences
Okay, so it's still, okay. So do we have any sense—we haven't yet not enough knowledge about its deployment and operational complexity. I suggested in my comments to Avinash last night maybe because it's not in use yet, maybe inherently we should rate it high complexity simply because it's not known yet.

John Feikema – VisionShare – President
Well, it is a Connect based solution, right?

Dixie Baker – Science Applications Intl. Corp. – CTO, Health & Life Sciences
Yes.

John Feikema – VisionShare – President
So I think our experience with Connect based solutions is that while they're very good and they have a lot of power, they do have some inherent complexity with them.

Dixie Baker – Science Applications Intl. Corp. – CTO, Health & Life Sciences
Okay.

Avinash Shanbhag – ONC – Director, NwHIN
All right, it makes sense. And the final one here help HIE and help information to … management. We're calling it a declining life cycle just because the specification has not had a lot of uptake in the last year or two from the teams that provided this input. It's used primarily by CDC. And we feel again that while we don't have enough knowledge about it, since its life cycle is declining exponentially trying to find the information about the … stage.

So what we did again going back to what Dixie has proposed, we took at look at the two specifications that we did eliminate were the ones related to access central policy and HIEN, just because we felt that the need was low. And then mapping into the specification grid and this grid, what we did was you see on the X axis are the technology maturity and the Y-axis is the specification maturity. Again, I think most of the specifications are in the maturing to mature phase of technology and spec maturity of moderate to high. The one specification that we see here that's just the history of UDDI, again, default in that category are a declining technology and as Dixie suggested, that maybe needs to consider ultimate use. I think

there's active work going on in the SNI initiatives towards looking at … issues in the initiatives for provided directives hopefully. That would be a basis for future specifications ….

And this our next slide, this is the one which is more complicated. It has deployment operational complexity on the Y-axis that's low, moderate and high and on the X-axis we have industry adoption of low, moderate and high. And here the stratification we see here is the ones on the green box are the ones where you have low to moderate complexity rating and moderate to high industry adoption. And that's where you see XDR and XDM for the verification that's already very acute … messaging, direct transport and direct security. Where on the left most bottom left where we have high complexity and low industry adoption. The SMD is currently that as Dixie mentioned since we don't know much about its deployment and usage.

But interesting thing here in this graph in this slide really are the two specifications that are outliers from the green box and the red boxes that I wanted to bring to the attention of this group. One is authorization framework, which is in this map would be a moderate to high industry adoption, but a high deployment and operational complexity. And the second one would be the ENS lookup for certificates, which is certainly moderate to high deployment complexity and low industry adoption, purely because of a new stage of looking up certificates. I think this will give us a nice picture of which blocks we need to consider and which are areas that potentially we need to identify and decide if these ….

Dixie Baker – Science Applications Intl. Corp. – CTO, Health & Life Sciences
Yes, going back to that SMD for when we report this to the committee, Feik, would you recommend that we assign the ESMB a high complexity or a modest to high? It sounds like we know more than I thought we knew about it because I didn't think it was even published, actually.

John Feikema – VisionShare – President
So we haven't been involved real actively for the last month or two. We were early on. It is a Connect based gateway. I think that the CMS is standing that up primarily at the time because that was really the only thing that came out of the federal health architecture. Direct was still in its infancy, and so they've been working with a number of release of information vendors and others to help them understand how they could adopt or deploy ESMD. I might be a little bit off on this, but my understanding is ESMD is just CMS' name for the use of Connect as a vehicle for allowing the submission of claims attachment or relevant additional medical information to help CMS fully adjudicate or figure out what a treatment plan should have from a remuneration standpoint.

I think that it is complex. I think that however in some cases the use case may be complex, so it's not that it's not deserved. I see it as a fairly focused application for a specific set of use cases as opposed to a building block that could find adoption across other use cases. Does that make sense?

Dixie Baker – Science Applications Intl. Corp. – CTO, Health & Life Sciences
Yes, it makes complete sense. What do you think about that, Avinash?

Avinash Shanbhag – ONC – Director, NwHIN
I think that I would say very, very similar to what we would think because I do think it's a very focused, adding along with administrative distribution document submission, potentially they have more usage, but ESMD may be very specific to use case.

John Feikema – VisionShare – President
In many respects like the SSA pilots that you guys are working on, Dixie, they used the similar back end infrastructure in order to release additional supporting information per disability approval. This is a fairly similar technology stack with a specific use case.

I think one of the questions is and one of the valid questions is if CMS really wants to automate industry wide the ability for providers to easily submit supporting medical documentation to CMS the relevant question then is is ESMD going to be a tool that will be easily adopted by the user committee. And in that sense I would agree with the way this grid is put together that while the back end for CMS is in place and

relatively straight forward, the question is is using the full-blown Connect stack and the authorizations required. And the overall—what's the word I'm looking for?—the governance that's required to get on the NwHIN with Connect, is that something that's really going to solve the long term use case that CMS is looking for?

Dixie Baker – Science Applications Intl. Corp. – CTO, Health & Life Sciences
So my question is does it belong in this power team's—should it be considered one of the steps in this power team's work at all? It's a specific application for a very specific purpose on the one hand. On the other hand submission to CMS is a pretty broadly based purpose, too.

John Feikema – VisionShare – President
Yes. I might be tempted to do ESMD and then in parenthesis say Connect or NwHIN Connect, where ESMD describes the application of Connect and the technology being deployed is Connect.

Dixie Baker – Science Applications Intl. Corp. – CTO, Health & Life Sciences
Well, if you're tempted to do that, I would say, Avinash, we should take ESMD out of this assessment.

Avinash Shanbhag – ONC – Director, NwHIN
Oh, yes, I agree with it for the time being. What we could do is we could follow through with CMS and try to get more information for this…

Dixie Baker – Science Applications Intl. Corp. – CTO, Health & Life Sciences
Our building blocks may give CMS other options.

John Feikema – VisionShare – President
Yes, absolutely.

Dixie Baker – Science Applications Intl. Corp. – CTO, Health & Life Sciences
Yes, it sounds to me like for this particular purpose of looking for building blocks for information exchange across the NwHIN that one is more a specific application of Connect than a building block build exchange.

John Feikema – VisionShare – President
Yes, I know that there have been without being politically inappropriate here, I know that there are folks who have suggested to CMS that there are other technologies like the direct that may help that use case get more adoption. I think CMS has been waiting until direct is a little bit more mature or gets more formal approval, so that they could adopt it. A recommendation like that coming out of this committee may be just what they need to help them do that.

Dixie Baker – Science Applications Intl. Corp. – CTO, Health & Life Sciences
Well, we wouldn't make that recommendation if we took it off the grid. If we took it out of our assessment—I guess we could make it as a comment in our presentation that if surely we considered ESMD, but we concluded that it was more of an application of Connect than a building block or something like that.

John Feikema – VisionShare – President
And there may be other technologies that we are recommending as building blocks that could help that use case even more than Connect can. That was more my point.

Dixie Baker – Science Applications Intl. Corp. – CTO, Health & Life Sciences
Yes, just make it as a comment. Yes, okay.

Avinash Shanbhag – ONC – Director, NwHIN
Thank you, good comment. So this is really a summary of what was in the specification grid and put points into what's the building blocks. Again, I think we talked about both ESMD and that services registry as the areas to discuss.

So going to that slide and this is now I think as Dixie pointed out in her original structure, I think there are some of the specifications that are listed here, which don't fall in the green box. I think this team would need to decide and to comment that if those are to be recommended as a building block. Here I think these four ones which were kind of off the green box they're all, I think, as everyone pointed out I think the DNS lookup for certificates is a high priority need to insure for the direct type, for transport to offer. And again, I think it's in pilot and the question of whether to recommend or not is important.

Similarly with authorization train, which you use SAML and XSBA profile on SAML, again I think while it came off the box of the complexity as options, it is a foundation components that is of use by the patient discovery, query and review of the building blocks of exchange. And along with the messaging platform it is one of the foundational components that at least in practice is used by the certifications and the implementations. Again, I think that that may be a need to discuss it further.

For administrative distribution and document submission, I think that they are primarily used by CMS, but the underlying specifications are much more broad based. I think they both have this notion of sending information and getting acknowledgement that this information has been reviewed. That may be a broader use case than currently used for the past—

Dixie Baker – Science Applications Intl. Corp. – CTO, Health & Life Sciences
That's probably the only push the document that we have, though, isn't it?

Avinash Shanbhag – ONC – Director, NwHIN
Yes, yes, you're right.

John Feikema – VisionShare – President
So if I could, I've got one comment on the DNS lookup piece. I agree that it's a high need. I think that the groups that have been participating with this so far have looked at or considered an alternate to it, which is LDAP, which probably has higher complexity and less maturity at least as a certificate distribution capability. But it may be something that is needed as this rolls out. I think the primary question on DNS is will it scale for these kind of applications.

So in terms of looking at these from a case by case basis, I think that where we are is we need to continue to watch the DNS lookup scalability as the pilots mature into production and as the scales mature and keep a close watch on that, so that if an alternative is needed, we can recommend something. I don't know that at this stage, the folks that are deploying these are ready to abandon DNS look-up for certs as a viable mechanism. Maybe I would say we're cautiously optimistic that it'll work, but we realize we need to keep a close watch on it.

Dixie Baker – Science Applications Intl. Corp. – CTO, Health & Life Sciences
Good comments and we should make that observation.

Avinash Shanbhag – ONC – Director, NwHIN
Yes, thank you. So we are at the end. I think that's where I think we stop that, Dixie. It's kind of what we have is this at least an initial assessment that we have some building block. And I think the more difficult discussion could be an this slide that what we have is a set of specifications that the realm of needing to either be further evaluated or are not sufficiently easy to use or well enough to be too easy to evaluate … recommended. Any questions?

Dixie Baker – Science Applications Intl. Corp. – CTO, Health & Life Sciences
I have to say, Avinash, I think your team did a really good job here and it's a tough job, too. It's tough to stand back and to objectively assess the specifications from these criteria that we've given to them. I certainly commend them for the work that they've done.

Avinash Shanbhag – ONC – Director, NwHIN

Thank you. I appreciate the guidance from the power team, too. I think we have come a long way I think from the first inception of summer camp and the initial trial.

Dixie Baker – Science Applications Intl. Corp. – CTO, Health & Life Sciences
Yes, I think this is good. I wish and I'm going to try to get some of the other power teams' members to at least look at these ratings, so that hopefully I prefer not to be blindsided at the committee meeting by having our own power team members disagree with it. So especially I'll try to get Wes' and David's input in particular. But I think that I would feel comfortable presenting this as our preliminary assessment with the exception of removing ESMD and commenting about it. But aside from that, what do you think, Feik?

John Feikema – VisionShare – President
I agree it that completely, Dixie.

Dixie Baker – Science Applications Intl. Corp. – CTO, Health & Life Sciences
Good, okay. Okay, what I'm thinking about presenting next week is very similar, reminding them what the preliminary slides of here's what our task was, because they will look for … So I'll remind them of what we were asked to do and then give them a very quick overview of the process and then show them these results.

John Feikema – VisionShare – President
I think that's a really good idea, Dixie. The only other thing that occurs to me that one of the things that may be useful in the deck, especially if you're submitting it or distributing it a little bit ahead of time might be Avinash to put together a glossary slide because I think that there are authorization framework. For example, I think that those who've been involved in the work know what that means, but there may be those words are perhaps a bit generic. And we may want to have a sentence or two on some of the technical terms in here, so that people know what we're talking about.

Avinash Shanbhag – ONC – Director, NwHIN
Good idea, we can do that.

Dixie Baker – Science Applications Intl. Corp. – CTO, Health & Life Sciences
Yes, and also, Avinash, that's why on my spreadsheet I added the standards column and I think I mentioned those in that glossary because some of these you understand better once you know the standards that the spec uses.

John Feikema – VisionShare – President
Good point.

Avinash Shanbhag – ONC – Director, NwHIN
Yes, we will do that, yes. We can have a glossary and send it to you, Dixie.

Dixie Baker – Science Applications Intl. Corp. – CTO, Health & Life Sciences
Okay, great. That'll be great. Are there other recommendations for that? Okay. With that, then I think if there are no further comments from, did anybody else ever join us?

Judy Sparrow – Office of the National Coordinator – Executive Director
I don't think so, Dixie.

Dixie Baker – Science Applications Intl. Corp. – CTO, Health & Life Sciences
Okay. Then I think we can open it up for public comment.

Judy Sparrow – Office of the National Coordinator – Executive Director
Yes, and then I guess as far as the final slide deck for the standards committee, if I could have that by Monday, that'll be great and get it out to them.

Dixie Baker – Science Applications Intl. Corp. – CTO, Health & Life Sciences

Yes, you will. I will send Avinash a slide to again, I know they already have them, but I want to make it convenient to the remaining—

Judy Sparrow – Office of the National Coordinator – Executive Director
Yes, and I agree with you, make sure David and Wes and Chris Roth, I think.

Dixie Baker – Science Applications Intl. Corp. – CTO, Health & Life Sciences
Oh, and Chris Roth, yes—

Judy Sparrow – Office of the National Coordinator – Executive Director
Yes, those three for sure.

Dixie Baker – Science Applications Intl. Corp. – CTO, Health & Life Sciences
Yes, good, good, good.

Judy Sparrow – Office of the National Coordinator – Executive Director
Okay, so operator, can you check with the public and see if anybody wishes to make a comment?

Operator
We do we have public comment.

Judy Sparrow – Office of the National Coordinator – Executive Director
Okay, can you please identify yourself?

Craig Miller – CMS ESMD – Chair of Specifications Work Group
This is Craig Miller. I'm actually the chair of the CMS ESMD specifications work group. I observe that there is some discussion about that and I wanted to ask members of the power team if they had questions in which they'd like some clarifications as to status of initiatives or its intent.

Dixie Baker – Science Applications Intl. Corp. – CTO, Health & Life Sciences
Thank you for speaking up, Craig. I really appreciate that. I would ask whether the comments that we made about ESMD are correct and whether you agree that this should be taken out of the building block arena and put it in a separate category as an application.

Craig Miller – CMS ESMD – Chair of Specifications Work Group
Thank you. I would offer a couple of comments. I would not consider ESMD to be a Connect specific application. We are in fact developing a suite of tools independent specifications to support the electronic exchange, the administrative health data beginning with submission of medical documentation for medical claims. In that context, we are not in any way in the specification we have developed and published to date align on Connect as the implementation tool. Although that is the tool that CMS is using for their own gateway, there is not a requirement that other participants use that. The specification is being developed jointly with CMS and the relevant industry standards bodies, including HL7, the Council for Affordable Quality Health Care, and others.

Our progress to date we have developed and completed and have had approved an initial specification using the end hand document submission mechanism for transmitting medical documentation supported claim and we are currently in progress in completing an alternate version specification that uses existing standards from the CAQH core faced to connectivity role and the X12 specifications. We anticipate that work being completed within the next few weeks. After that we intend to begin working on the request for medical documentation known at X12277, as well as a number of other associated standards for required to complete administrative transactions. CMS has already enrolled over a dozen major health information provider organizations of medical documentation support in this and we anticipate it becoming a large-scale initiatives within the next 6-12 months.

Dixie Baker – Science Applications Intl. Corp. – CTO, Health & Life Sciences

Well, I think that this group still would recommend that you look at the direct protocol list, part of that suite, which we decided we would present next week. I also think that this does sound like a very, very useful and essential, in fact, application, but I would not consider it a building block for new … I would consider it an application that we draw from these building blocks, so that sounds great. Thank you so much for that update. We appreciate it.

Judy Sparrow – Office of the National Coordinator – Executive Director
Any other comments from the public?

Operator
Yes, we have another comment from Eric Heflin.

Erin Heflin – NwHIN Security and Privacy Work Group - Chairman
I work for Medicity and I'm currently the chairman of the NwHIN security and privacy work group.
I have two brief comments. One, I'd like to respectfully request that the specification … numbers for the exchange who have been involved in the creation of the problem solving, the evaluation of other solutions and so on for the past five years or so be involved more fully in this process. Specifically, for example, the presentation that was discussed today was not disseminated to us to the specification faction members prior to this meeting. Therefore, we really had no chance to review it or provide any kind of thoughtful feedback or comments or a deeper insight. I think that these might be potentially valuable to help inform this work group's decision-making process.

And secondly regarding a comment made earlier about the maturity of LDAP versus DNS search, I would respectfully to take exactly the opposite view. DS cert actually although it has been around for a number of years, we cannot find implementations of it that are widely in production today across any of the DNS visitors that are required to use the Internet. The opposite probably is actually a case for LDAP, which has implementations in very mature implementations through CMS bodies for many, many years in a variety of sophisticated environments, including federated, centralized, distributes using other technologies, such as behind the scenes synchronization and so on.

The other technology based on top of this, which is a CRM based technology called HPD from ISG also with respect…consideration as a computer based … using Web services for distribution of things including the DNS search, which in the end is a very mature technology. Thank you.

Judy Sparrow – Office of the National Coordinator – Executive Director
Thank you, Eric. Any other comments?

Operator
Yes, we have one more public comment.

John Markie
Hello, this is John Markie. I think Craig and Eric have somewhat taken many of the comments that I wanted to bring up as well. But I think I'm very happy with how this has progressed. Certainly it looks far more well thought through and analyzed analytically than the first draft, which it's wonderful that we've gotten that correction. It does though seem still to be missing input from those who have gone operational.

Eric speaks about the MPN exchange committee reaching out and speaking about the specifications versus what's there. But I think there's also many state health information exchanges, partners within the DRSA, pilots within the direct project that should be reached out to. These are those who have actually implemented these specifications. I am very confident of David McCallie and Wes Richel, but they are not implementors, so using them as subject matter experts really concerns me. I think VA and Kaiser and …, there's plenty of health information exchanges out there that have used these specifications and I would just encourage you to reach out to them. Operational experience is very important.

Judy Sparrow – Office of the National Coordinator – Executive Director

Thank you, John.

Dixie Baker – Science Applications Intl. Corp. – CTO, Health & Life Sciences
I just wanted to say just one point of clarification to both John and Eric and thank you all for your comments. We really, really appreciate them. This power team is part of what the ONC calls the summer camp. It's a small team on a very, very aggressive timeline. In fact our final recommendations are in September. But absolutely certain that by no means will ONC then take our comments and then run with them. I'm sure that ONC as they always do will make our work available for broader comment at that time. It's just a very restricted timeline and certainly we aren't writing the final specification here by any means at all. So thank you very much for your inputs and keep tuning in to what we are doing and what ONC does with this work following on. Thank you.

Judy Sparrow – Office of the National Coordinator – Executive Director
That's right, Dixie, and we're glad to have the public comment. I think with that, are we concluded?

Operator
We have no more comments at this time.

Judy Sparrow – Office of the National Coordinator – Executive Director
Okay, thank you, all.

Dixie Baker – Science Applications Intl. Corp. – CTO, Health & Life Sciences
Thank you. Bye, bye.

Public Comment Received During the Meeting

1. XDR is also used by NwHIN-Exchange

2. What SME was used to come to these conclusions? They still seem to be not well aligned.

3. For example: Authorization Framework leverages TLS, which has very high maturity and easy certificate management models, where as S/MIME requires very complex certificate management that has not yet been solved beyond very small pilot projects and in ways that are not agreed

4. The comment on "Direct Security" row indicates the complexity of certificate management, yet the columns indicate that this is highly mature and highly adopted... I disagree on these conclusions based on the certificate management issues (due to end-to-end security).

5. Note, that SOAP security in end-to-end security mode has identical certificate management problems. The certificate management problems are due to the need to discover end certificate prior to starting a conversation, and this complexity is compounded with the N-factorial need for certificates, vs. system certs used in point-to-point (TLS - Walled garden)

6. An alternative to Direct Transport (SMTP, MIME) should be XDR... this is what is used in NwHIN-Exchange, and many state HIE today.

7. Operational complexity was discussed on Google+ with Wes and David... I asserted there that the complexity of deployment sum-total is very equal. Perceptions need to be backed by facts.

8. DNS lookup for certificate is ONLY NEEDED BY DIRECT... This needs to be mentioned.

9. Don't package Document Submission with Query/Retrieve... XCA federation does NOT require Document Submission

10. Why are the CMS needs listed as Moderate NEED? Until the NwHIN-Exchange is sufficiently large, there is not sufficient advantage

11. I don't understand why if there is a CONNECT reference implementation, that this is seen as COMPLEX? I thought that ONC wanted reference implementations? This is the story from DIRECT, where the existence of a reference implementation is used to prove that it is not complex!!!!

12. Double standards on evaluation criteria are NOT HELPFUL to discovering truth!

13. Note that in the context of NwHIN-Exchange "Document Submission" is EQUAL to XDR. So, please think about combining your evaluations of XDR... seems it is called for in both Exchange and Direct... which should be seen as high adoption or at least high interest.

14. esMD has two alternatives, one is based on XDR but the other is based on X12.... so it is going to be hard to pigeonhole

15. Have you included feedback from the NwHIN-Exchange DURSA partners? There are very large healthcare providers that have EXPERIENCE. So much so that many (CCC) are going off and using the specifications outside NwHIN-Exchange governance.

16. There is no way that SMTP/MIME is seen as LESS industry adopted than anything else. THIS IS THE MOST used protocol on the Internet. -- or are you including something else besides SMTP, MIME in this evaluation? It is not clear why this is not HIGHLY adopted and EASY.

17. When evaluating the Cert Discovery for Direct -- you should consider that the S&I Framework is currently evaluating NEEDS and Technology... so, what spec are you evaluating? Why not the one that S&I Framework produces?

18. DNS Look-up for Certs -- IS ONLY needed by DIRECT. It is not needed for NwHIN-Exchange

19. Why are David and Wes considered SME? Neither have ever implemented these specifications? You need to include SME from Healthcare Providers and Service Providers that HAVE deployed the specifications.