



The [Healthcare Information Technology Standards Panel \(HITSP\)](#) is a cooperative partnership between the public and private sectors. The Panel was formed for the purpose of harmonizing and integrating standards that will meet clinical and business needs for sharing information among organizations and systems.

Welcome to *HITSP News*, a monthly newsletter that provides news on the activities of the Healthcare Information Technology Standards Panel. Visit the HITSP Web site at www.hitsp.org for more information. If you have news or ideas for *HITSP News*, please send them to hitsp@ansi.org for consideration.

What Does HITSP Mean to You

***An Interview with a Pennsylvania Based Solo Family Practice Physician and
An Interview with an Active HITSP Volunteer***

HITSP News brings readers another column on “What Does HITSP Mean to You?” with interviews of HITSP members and potential members about their perspective on the work of HITSP. This month, two healthcare professionals answer the questions posed in this column. They present their perspective on HITSP and what it means to them and to the delivery of healthcare.

HITSP volunteer **Lesley Berkeyheiser** shares (with permission) her discussion with her family doctor about the use of electronic medical records. Ms. Berkeyheiser is a member of the HITSP Education, Communication, and Outreach Committee working group that drives webinar development. She also serves as a national Privacy and Security Co-Chair for the [Workgroup for Electronic Data Interchange - WEDI](#).

The second interview comes from **Keith Boone**, Interoperability Architect, [GE Healthcare](#), and an active HITSP volunteer who co-chairs HITSP's Care Management and Health Records Domain Committee and the Data Architecture Tiger Team.

Read on to learn more about HITSP – from the point of view of a family physician and a HITSP volunteer.

An Interview with a Pennsylvania-Based Solo Family Practice Physician Dr. Kimberlee Park, DO

Interviewee: Dr. Kimberlee Park - a Doctor of Osteopathy practicing in Delaware County Pennsylvania. She is a solo family practitioner. She adopted an electronic medical record approximately two years ago (2007) when it was encouraged by her affiliated hospital network. Other than some speed challenges which have improved over time, and the learning curve (interviewing the patient while keying took some getting used to...) she reports positively about her EMR experiences.

1. What Does HITSP Mean to You?

Other than hearing the terminology from her patient, Dr. Park was familiar in general with the overall movement towards data exchange, but not specifically familiar with HITSP.

2. Do you know the purpose of HITSP?

Ms. Berkeyheiser explained HITSP's purpose - to identify and harmonize standards that are acceptable and useful to support interoperability among healthcare organizations and systems. (HITSP has implemented a well-defined process to develop a consensus among experts in the field to identify standards for healthcare processes and the effective transmission of data.) Once explained, Dr. Park agreed that setting standards was a necessary step.

3. What do you believe the impact of HITSP is or will be on businesses and other practices?

Since Dr. Park was not specifically familiar with HITSP, general discussion continued in a cursory fashion about the impact of its work. During the dialogue, it was clear that Dr. Park is interested in doing what she does best: providing patient care. Regarding the impact of HITSP on business or other practices, she simply stated, "I really don't know, but I hope the vendor will take care of it."

4. Is there a need for HITSP in the future?

This question was not specifically posed to Dr. Park. However it is very clear to the interviewer (Ms. Berkeyheiser) that if we (HITSP, Office of the National Coordinator and others facilitating the adoption of electronic medical records nationwide) do our job well – the very best outcome will be a transparency of our work to the solo providers of our country. Completing what "we do best" is what will allow single providers to excel in what they do best--providing quality patient care.

I believe our hope is that the outcome of our efforts will be, as Dr. Blumenthal recently stated:

*"The HITECH Act provisions of the Recovery Act create a truly historic opportunity to transform our health system through unprecedented investments in the development of a nationwide electronic health information system. This system will ultimately help facilitate, inform, measure, and sustain improvements in the quality, efficiency, and safety of health care available to every American. **Simply put, health professionals will be able to give better care, and their patients' experience of care will improve, leading to better health outcomes overall.**"*

An Interview with an Active HITSP Volunteer Keith Boone, Interoperability Architect, GE Healthcare

1. How did you hear of HITSP and become involved with HITSP?

I heard of HITSP as result of following the various initiatives in healthcare IT, including the creation of the Office of the National Coordinator of Healthcare IT (ONC) in 2005, the subsequent requests for information from that office, the 13-organization response to that RFI that many of the HITSP sponsors and members participated in, the RFP from ONC for standards harmonization, and the subsequent creation of HITSP by ANSI, HIMSS, ATI and Booz Allen Hamilton. When I joined GE Healthcare in mid-2006, I became involved with the Consumer Empowerment workgroup of ANSI/HITSP to help develop the HITSP C32 Medication and Registration Summary (now the Summary Documents using the HL7 Continuity of Care Document).

2. Do you know the purpose of HITSP?

In 2006, it was fairly clear that HITSP would be identifying standards to be used to meet the needs of "breakthrough" use cases delivered to it by the Office of the National Coordinator. It was fairly clear at that time that we were part of the process being used by the US Department of Health and Human Services to recognize standards needed to exchange healthcare information. Over time, HITSP's role has changed somewhat, and the source of harmonization requests had broadened to include those from clinical research organizations, the Centers for Medicare and Medicaid and others. However, we are still providing many of the same services, identifying and harmonizing standards from a wide variety of standards development organizations, profiling bodies and clinical professional societies.

3. What do you believe the impact of HITSP is or will be on businesses and other practices?

HITSP specifications are already being used today in at least 15 different Health Information Exchanges. HIT vendors are changing the way they approach integrations and realizing the benefit of the harmonized standards. I can walk into a hospital near my own neighborhood, and some ways away where I work, and find systems that are using HITSP specifications or the

standards HITSP has selected to exchange information. I expect soon to be able to walk into my own doctor's office and have him be able to access medical records – with HITSP specifications - from the hospital that I would use, if needed. Soon, my cousins in Pennsylvania and family in Florida will be able to do the same things.

We are still in the early adopter stage, but already, HITSP has had a tremendous impact on the healthcare provided to many individuals. I only see that impact growing. The next five years promise to be very interesting for healthcare. I see HITSP's ongoing role as providing the tools to streamline care provided to patients, eliminating costly delays in providing adequate care due to lack of information, and improving provider workflows, allowing them to spend more resources caring for patients.

4. Is there a need for HITSP in the future?

The more HITSP does, the more we are being asked to do. There's still a great more to be done, especially in the areas of clinical note templates, clinical decision support, quality and standardization of clinical guidelines. We've grown from an early start of 250 member organizations to over 900 organizations in the four years that I've been involved.

5. Please provide a paragraph on your current position in healthcare – what you do. Include your title and company.

My job title is Interoperability Architect for GE Healthcare, but I describe myself as a standards geek.

I represent GE Healthcare to standards related organizations such as ANSI/HITSP, Health Level 7 (HL7), Integrating the Healthcare Enterprise (IHE), ISO, ASTM and Continua. I develop standards and profiles, promote the use of standards, teach them to others (including members of these organizations as well as internally within GE Healthcare), and generally make a nuisance of myself where needed to enable those like myself to implement standards faster and better.

I co-chair the Care Management and Health Records Committee and Data Architecture Tiger Team in ANSI/HITSP, the Structured Documents workgroup in HL7, the Patient Care Coordination Planning Committee in IHE and the Quality/Clinical Decision Support SIG in EHRA.

In my spare time, I write about all of these activities on <http://motorcycleguy.blogspot.com>.

HITSP Webinars

October 13 – A *NEW* HITSP eTown Hall Meeting on CONSUMER PREFERENCES 11 am-1:00 p.m. Eastern

HITSP will be hosting an eTown Hall Meeting for all interested HITSP Members to review the Draft Consumer Preferences Requirements Document recently released by ONC. Due date for public comments is October 16, 2009. The purpose of this eTown Hall is to present an overview of the draft Requirements Document and elicit discussion and comments. The HITSP Consumer Preferences Tiger Team will then consolidate comments and submit them to ONC by the deadline.

November 12 – Security, Privacy and Infrastructure 2-3:30 p.m. Eastern

Look for more webinar information on the registration page on the [HITSP Web site](#). Participation in any of the HITSP webinars is complimentary, but advance registration is required.

Check the [HITSP website](#) to register for these webinars.

[View the webinar schedule](#)

[Listen to previous HITSP webinars](#)

Consumer Preferences – A New Activity at HITSP

To address the interoperability needs of Consumer Preferences, ONC's new priority topic, HITSP has established the Consumer Preferences Tiger Team, jointly sponsored by the Security, Privacy and Infrastructure (SPI) Technical Committee and the Consumer Perspective Technical Committee.

On Monday, Oct. 5, ONC released for public comment the Draft 'Consumer Preferences Requirements Document' detailing the definition, processes, information exchanges, shareholders, functional requirements and issues and obstacles surrounding the creation, management, exchange and execution of consumer preferences.

The draft document at <http://healthit.hhs.gov/consumerpreferences> is available for public comment at through Oct. 16.

HITSP's Consumer Preferences Tiger Team will be reviewing and providing input to ONC on the draft document. The Tiger Team will also be responsible for performing all the HITSP standards harmonization work on this topic.

HITSP members interested in this effort may contact Jonathan Coleman at jc@securityrs.com; he is the lead staff facilitator of the Tiger Team.

Message from the Chair – Dr. John Halamka – October 9, 2009

Folks:

As states begin planning for Health Information Exchange grants, I find the HITSP Capabilities and Service Collaborations to be a very helpful guiding framework as described in my blog

<http://geekdoctor.blogspot.com/2009/10/next-steps-for-healthcare-information.html>

On Tuesday, I ran a meeting with many of the Massachusetts stakeholders and we decided that offering statewide capabilities to Communicate Ambulatory Prescriptions, Communicate Structured Documents, Communicate Unstructured Documents, Communicate Clinical Referral Requests, Communicate Lab Results Messages, Communicate Quality Measures, Update Immunization Registry were are priorities for the next two years

These capabilities will be supported by many services including Manage Consumer Preference and Consents, Access Control Service Security Audit/Disclosure Service, Patient Identification Management Service, Administrative Transport to Health Plan Service and HL7 Messaging Service

HITSP's teams have provided a great service by providing a framework in which to think about prioritizing HIE activities in support of workflow enhancement and meaningful use.

If you have questions or concerns, please email me at jhalamka@hms.harvard.edu

[Read John Halamka's blog](#)

Life as a Healthcare CIO

Calendar – Dates to Remember

[Health IT Standards Committee](#)

Wednesday, October 14, 2009

Omni Shoreham Hotel, Washington, D.C.

Health IT Policy Committee

Tuesday, October 27 and Wednesday, October 28, 2009
Omni Shoreham Hotel, Washington, D.C.

HITSP Calendar

The HITSP Panel meetings will be held at:

Sheraton National

900 S. Orme Street
Arlington, VA 22204
Phone: 888.627.8210

Tuesday, December 15, 2009 – teleconference

Begins at 10 a.m. Eastern

Wednesday, January 20, 2010 – in person

10 a.m.–5 p.m. Eastern

Technical Committee/Tiger Team Teleconference Schedule

Face-to-Face Technical Committee Meeting

HITSP Technical Committees and Tiger Teams (below)

Nov. 3 – 5, 2009

- Administrative and Financial Domain Technical Committee
- Care Management and Health Records Domain Technical Committee
- Data Architecture Tiger Team
- Consumer Perspective Technical Committee
- Population Perspective Technical Committee
- Quality Measures Tiger Team
- Provider Perspective Technical Committee
- Security, Privacy and Infrastructure Domain Technical Committee
- Clinical Research Tiger Team
- Consumer Preferences Tiger Team

Location

Hilton Washington DC / Silver Spring
8727 Colesville Road, Silver Spring, Md. 20910

Hotel reservations in room block due today, Oct. 12.

RSVP to Allyn Clemons at aclemons@himss.org to attend.

To better keep the schedule of Technical Committee/Tiger Team conference calls up-to-date and in a consistent format, all meetings and calls, as well as dial-in and WEBEX information, are posted in a public place on the [HITSP Web site](#).

HITSP depends on the participation of volunteer experts from across the healthcare enterprise.

For more information on becoming a volunteer for HITSP, please contact hitsp@ansi.org.



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