



Meeting Notes

Health Information Technology Advisory Committee Conditions and Maintenance of Certification Requirements Task Force April 17, 2019, 10:30 a.m. – 11:30 a.m. ET Virtual

The April 17, 2019, meeting of the Conditions and Maintenance of Certification Requirements Task Force (CMCTF) of the Health IT Advisory Committee (HITAC) was called to order at 10:30 a.m. ET by Lauren Richie, Designated Federal Officer, Office of the National Coordinator for Health IT (ONC).

Lauren Richie conducted roll call.

Roll Call

MEMBERS IN ATTENDANCE

Denise Webb, Co-Chair, Individual
Kensaku Kawamoto, Member, University of Utah Health
Leslie Lenert, Member, Medical University of South Carolina
Carolyn Petersen, Member, Individual
Sasha TerMaat, Member, Epic
John Travis, Member, Cerner

MEMBERS NOT IN ATTENDANCE

Raj Ratwani, Co-Chair, MedStar Health

ONC STAFF

Lauren Richie, Designated Federal Officer, Office of the National Coordinator for Health IT (ONC)
Kate Tipping, ONC Conditions of Maintenance of Certification Requirements Task Force Lead
Lauren Wu, ONC SME

Lauren Richie turned the meeting over to Denise Webb, co-chair.

Discussion of Recommendations

Denise Webb went through the transmittal memo and added additional information as background to introduce the recommendations. She noted that the task force took the feedback from the HITAC and integrated it into the recommendations. She also restated each recommendation to say that the “CMC TF recommends that ONC.”

While the task force already discussed recommendation 6, she suggested revisiting this recommendation after reviewing the preamble text again.



Recommendation 6

The task force noted a concern for the infinite number of use cases and worked to edit the language to note this concern.

The CMC TF recommends ONC clarify and define the terms, “scenario” and “use case” (§ 170.405(b)(1)(iii)(A)). If these terms mean the same thing, choose and use just one of these terms in the final rule regulatory text and in the preamble. In the final rule preamble, the TF also recommends ONC clarify the term “workflow” as it is used in section VII.B.5 of the proposed rule preamble regarding real world testing. The TF acknowledges the variability that exists in provider workflows and is concerned this could require an infinite number of test cases for a health IT developer’s customer base. The TF recommends the final rule preamble be clear and reasonable with what is intended where the preamble states “...developers can and should design scenario-based test cases that incorporate multiple functionalities as appropriate for the real world workflow and setting.”

The TF recommends ONC clarify in the final rule preamble where existing interoperability testing (such as that performed by The Sequoia Project or other existing networks) can satisfy expectations for real world testing.

Recommendation 8

The task force worked together to clearly articulate the language in this recommendation.

Recommendations 11 - 18

Denise Webb made refinements to the language prior to the meeting that the task force reviewed and approved.

Recommendations 19

Denise Webb shared feedback received by Arien Malec at the HITAC meeting on April 10 in regards to the commentary on Argonaut. She made an attempt to modify the language, per Arien’s concern.

Ken Kawamoto noted that he talked to Micky Tripathi, who manages Argonaut, and Ken shared that he was okay with the language. That said, he noted he is okay with removing the language he originally suggested.

Les Lenert suggested shortening the language to the minimum that is necessary.

The task force landed on the following language for this recommendation:

The CMC TF recommends ONC move forward in the final rule with implementation specifications and implementation guides to ensure everyone is working from the same set of specifications as this would enhance interoperability and reduce implementation complexity and potentially cost. The TF sees value in health IT developers harmonizing to a specified version/release.

Recommendation 20

Recommendation 21



Arien Malec had provided a comment that this recommendation should point to the Office for Civil Rights (OCR), rather than ONC.

Aaron Miri had mentioned that the task force should reference the work of the Health IT Policy and Standard Committee’s Architecture, Services, and Application Program Interface (API) Work Group.

John Travis noted that he received a comment that tokens are appropriately scoped to need, not more than what is needed.

Together the task force refined the language to the following:

The CMC TF recommends ONC work with OCR and other responsible agencies to provide formal guidance on current uses of FHIR APIs, such as in SMART on FHIR applications or CDS Hooks services, with respect to compliance with relevant privacy and security regulations, such as HIPAA (e.g., the inappropriate sending of full patient demographic details, the inappropriate use of broadly-scoped data access tokens). This deliberation can leverage the work and recommendations of the prior HIT Policy Committee and HIT Standards Committee Joint API Task Force as a starting point (https://www.healthit.gov/sites/default/files/facas/APITF_Links_to_API_comments_and_recommendations_from_HITSC_and_HITPC_2015-11-30.docx).

Recommendations 22

Denise Webb made refinements to the language prior to the meeting that the task force reviewed and approved.

Lauren Richie opened the lines for public comment.

Public Comment

There was no public comment.

Comments in The Public Chat

Carolyn Petersen: The old workgroup was the Architecture, Services, and Application Program Interface (API) Work Group (ASA WG)

Next Steps and Adjourn

Denise Webb noted that the next meeting is April 18 at 9:30 ET. She asked the members to review the remaining items in preparation for the meeting. The goal is to send the letter of transmittal out with the recommendations on Friday, April 19 in preparation for the HITAC meeting on April 25.

Lauren Richie adjourned the meeting at 11:30 a.m. ET.