

The National Committee on Vital and Health Statistics

A Public Advisory Body to the Secretary of Health and Human Services

NCVHS Subcommittees and Leadership

NCVHS Mission

- to advise on shaping a national information strategy for improving the population's health.
- charged by Congress with advising the federal government on the information needs underlying health policy.
- provides a bridge between government, the health industry, and research and public health communities as well as connections to those working on health information policy in other countries



Work Is Initially Accomplished through Subcommittees – Chartered

| Subcommittee | Co-chair | Co-chair |
|--------------------|-----------------------|------------------------------|
| | | |
| Standards | Jeff Blair, M.B.A. | Judy Warren, Ph.D., R.N. |
| | | |
| Privacy & Security | John Houston, J.D. | Leslie Francis, J.D., Ph. D. |
| | | |
| Populations | Don Steinwachs, Ph.D. | Bill Scanlon, Ph.D. |
| | | |
| Quality & Data | Justine Carr, M.D. | Paul Tang, M.D. |
| | | |
| Executive | Harry Reynolds | |
| | | |



Unchartered Workgroup (Flexibility)

Ad Hoc Workgroup (Instituted when necessary)

Harry Reynolds – Chair

Debbie Jackson – Administrative Support

Vice Chair – TBD

Vice Chair - TBD

Member – TBD

Member – TBD

Member – TBD



Subcommittee Considerations

- Consider the following each time the subcommittee starts a new subject:
 - Who is the customer/audience of our efforts.
 - If the subject is visionary or self generated, how will it make a "difference".
 - How do we tailor our letter or product to appropriate audiences.
 - What format or who authors each NCVHS product (NCVHS Document Style – Ms. Kanaan) while ensuring consistency, readability and marketing, if appropriate.



Subcommittee Considerations (Cont'd)

- When subjects span expertise of more than one committee there are several approaches:
 - Supplement with selected members
 - Create an ad hoc work group
 - Divide the work/hearings between two committees, to cover different parts of the subject



Subcommittee Considerations (Cont'd)

Diverse Portfolio:

- As the subcommittees consider its 2008, 2009 and 2010 agendas, do they include:
 - Some future (vision) items
 - Some Near Term initiatives
 - Appropriate follow-up to previous assignments



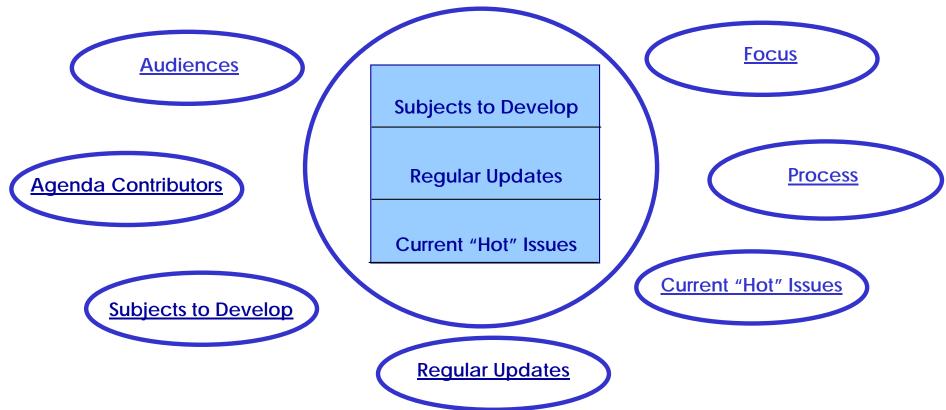
Subcommittee Considerations (Cont'd)

Make a work plan for the next 12 months:

- Work should be sized so as to have a deliverable report within 6-8 months
- In planning a hearing,
 - identify all stakeholders
 - Seek expertise from NCVHS members and staff
 - Size the focus to fit into hearing model (e.g. usually one to two days, often before or after full committee meeting)
 - Don't shortchange a big topic
 - Don't over-sample a smaller topic
 - Hearing funding is finite so that the hearings should move the work of the full committee forward and should be scheduled efficiently
 - Insure full committee supports the value of the topic and the focus



NCVHS Subcommittee Focus, Portfolio, Process



Requirements and Uses:

- Keep Current
- Use to Update Full Committee
- Useful for NCVHS Speaking Engagements
- •Ensures visibility of NCVHS inventory to All Members, Staff, Audiences

Audiences NCVHS Secretary HHS Subcommittee Congress -HIPAA (yearly) Focus, Portfolio, Process Industry **AHIC** ONC **WEDI Agenda Contributors Subjects to Develop NCVHS** HHS ONC **Regular Updates CMS** CDC Congress **AHIC Current "Hot" Issues** Industry Subjects to Develop 1. Current Standards Issues • Matching patients to their records (algorithms) Facilitating decision support (algorithms) Terminology for primary care (ICPC) • Security issues (authorization/authentication policies and technical methods) 2. Evolution to New Standards • Develop Grand Strategy for Standards (overall roadmap, information models) • Evolution (ICD 9, ICD 10, ICD 11) Evolution (to SNOMED, LOINC, RXNORM) Evolution (PHR, EHR, HIE, NHIN) • Evolution to support new priorities (pay-for-performance, medical homes, etc.) 3. Process Issues Accommodating different clinical workflows and processes • Facilitating standards adoption by smaller providers (tools and templates) Harmonizing standards (IHE, HITSP Use Cases)

• Expediting the standards development and adoption process

Patient Safety (coordination among NCVHS Subcommittees)

4. Promote smoother flow between Patient Care, Quality, Privacy and

Regular Updates

CMS AHRQ NLM **FDA** WEDI DSMO's SDO's **ONC HITSP**

CCHIT

• Full Committee Review Current "Hot" Issues

- 1. Extended Timeframes for Standards **Development and Adoption**
 - Upgrades to 5010/ICD 10
 - NPI took 4 years,4 months

Balanced Portfolio

Conduct Hearings

Evaluate

findings

with research

Open Dialogue

Prepare Recommendations

Supplement testimony

• Define recommend-

ations & guidance

• Compile/organize

• Learn

Current

Future Process

Near Term

- Development adoption and upgrades all take too long
- SSS suggests target be no more than 3 years
- 2. Identify and Address Standards Gaps for NHIN
- 3. Still Need to Quantify HIPAA ROI (promoting non claims transactions)
 - Identify HIPAA industry success
- 4. Addressing Remaining Impediments to ePrescribing Adoption
- 5. Next Steps for Secondary Uses of Health Information

A Sample of Subjects for Subcommittee Consideration *

APPENDIX

Pages 12 - 13

* For Consideration Only – **NOT** Assignments



A Sample of Subjects for Subcommittee Consideration *

HIPAA – Administrative Simplification

- Was the promise met
- Frustration with IT Functionality
- Increase the pace of adoption
- Fix HIPAA

Barriers of implementing interoperable standards

* For Consideration Only – **NOT** Assignments



A Sample of Subjects for Subcommittee Consideration *

- Updated Health Statistics Vision
- Uses and adoption of EHRs
- Data Stewardship
- Most Americans having EHRs by 2014
- ONC Strategic Plan

* For Consideration Only – **NOT** Assignments

