



## Functional & Cognitive Status Combined Subgroup Meeting

**Time:** Wednesday, March 4, 2020, 1:30 pm - 3:00 pm EST

**Location:** WebEx Meeting

**Dial-in:** 1-877-267-1577

**Meeting ID:** 998 544 485

**PACIO Project Website:** [www.PACIOproject.org](http://www.PACIOproject.org)

**PACIO Project GitHub:** <https://github.com/paciowg/PACIO-Project>

**This meeting is being recorded. In all discussions, members should be aware that meetings are recorded and include representatives of companies that may compete with one another in the marketplace. This working group is a public forum and therefore all information shared will be publicly available.**

### Agenda

- 1) **Functional Status** (Matt E., MaxMD) (35 mins)
  - The group continued to review the functional data elements and the associated LOINC codes.
    - PACIO members agreed the IG should recommend to not use LOINC codes listed as discouraged.
    - Group reviewed section F of the FASI—questions used to determine if an assistive device was used.
      1. The group agreed it would be beneficial for functional status to have an opportunity to use this list.
        - The group questioned the possibility for the list of questions to be defaulted to N/A, until another code is entered?
    - The group recommended reaching out to someone from LOINC, to see if they would be able to join us in a PACIO meeting, for further discussion.
    - Other than the CMS self-care tool, is there something else PACIO should consider?
      1. The group recommends ICF, because of the additional functional items that have been specified.
      2. MITRE reminded the group it is important to focus on the minimum viable product, and we can build on the IG to satisfy additional needs.
      3. The group agreed the information in section GG is a great starting point, and if PACIO would like to include something else, then we can move forward with adding more specifics.
      4. Group also recommended also focusing on iADLS.



# PACIO

- From a functional perspective—instrumental activities (driving, etc.) is something we would ask from a clinical perspective. However, they are hard to measure.
- PACIO members agree to start with the FASI, in the initial round of the IG and to further flesh out the details we continue the conversation in PACIO meetings.
  1. If you take standardized assessments and the FASI, as far as the overall status of the patient, self-care, mobility, and cognitive—we will get the basic condition of the patient at the time of transition of care.
- Care plan and goals—ELTSS has already developed an IG, MITRE will integrate this information with the current IG in preparation for the May connection.

## 2) Cognitive Status (Rob S., Patient Pattern)

(35 mins)

- Follow up on IG model
  - Device use statement—a device performing as part of an assessment. The device is a reference of a catalog item.
    1. We are currently referencing devices in our models, but we do not have LOINC codes.
    2. Can consider creating new LOINC codes, although this would cause a big change in the values of the assessments we use.
  - The group advised whatever is currently on the assessments we have a LOINC code
    1. The LOINC code would not be part of the assessment instrument, it would be part of the observation.
    2. The FHIR resource is the instruction. We can put in as much information in the IG to provide structure, but without a LOINC code it would not be helpful.
  - As far as FHIR can add a separate concept to capture information from FASI on devices used or a supporting device that the patient needs.
  - MDS assessment tool captures hearing, speech, and vision
    1. Need to look back at the assessment and dig deeper into Section B
    2. Need to display it in a way so the clinician understands this
    3. Group agreed to provide guidance on this in the IG
- Rob provided an update to the BCAT Assessment test case
  1. Intent is to make sure we can represent assessment instruments that are proprietary.
  2. Based on the fields in the BCAT Assessment, Rob mapped to questionnaire response and observation.



# PACIO

- Although it may not provide all the information that providers would want in the exchange, it will communicate if the assessment was completed.
- The group recommended including the crosswalk of the BCAT assessment in the IG

3. Next Steps: Rob will try and crosswalk Mini Cog assessment and provide an update in next week's meeting

### 3) Leadership Updates (Dave H., MITRE) (10 mins)

- Ballot Status Update
  - Because HL7 had moved up the balloting deadlines to March 1, PACIO will be working towards the September 2020 Ballot.
  - PACIO will attend the next connectathon May 2020 to further test the IG
  - Ballot Schedule:
    1. PSS approval 4/19
    2. FHIR resource proposal due 5/22
    3. IG proposal due 6/21
    4. Notice of intent to ballot 7/5
    5. Ballot open for voting 8/16-9/14
- Quality Conference
  - Presented the PACIO project at the Quality Conference. MITRE will share the slides presented at the conference.

### 4) CMS Updates (Beth C., CMS) (10 mins)

- Hospice Outcomes & Patient Evaluation Tool (HOPE) Alpha Test Informational Webinar
  - CMS will present a webinar on the new HOPE tool on March 5, 2020 2:00pm-3:00pm EST
  - For more information please read: <https://register.gotowebinar.com/register/5082098179591800075>
- DEL Homepage has been updated by condensing the ribbons and adding the FASI.
  - Upcoming changes to the search functionality and including a drill down option will be occurring soon.

### 5) Upcoming Convening Opportunities

- HIMSS20 Conference will be held March 9-13, 2020 in Orlando, FL
  - Registration: <https://www.himssconference.org/>
- Leading Age Summit will be held on June 14-16, 2020 in Washington, D.C
  - [https://www.leadingage.org/Collaborative\\_Care\\_HIT\\_Summit](https://www.leadingage.org/Collaborative_Care_HIT_Summit)

### 6) Next Meeting:

- Wednesday, March 11, 2020, 1.30 pm – 3 pm EST

### 7) Adjourn