



PACIO

PACIO Weekly Meeting

Time: Wednesday, April 14, 2021, 1:30 pm - 3:00 pm EST

Location: ZoomGov Meeting

Meeting ID: 160 985 6747

PACIO Project Website: www.PACIOproject.org

PACIO Project HL7 Confluence: <https://confluence.hl7.org/display/PC/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.

Summary

1) Leadership Update (Dave Hill)

- Reviewed important dates and checklists for the HL7 May 17-19, 2021 Connectathon:
 - **Registration:** <https://www.hl7.org/events/fhir/connectathon/2021/05/>
 1. Early Bird Deadline 4/23/2021
 2. Registration Deadline 4/30/2021
 - **Participant Check List:** <https://confluence.hl7.org/display/FHIR/2021+-+05+Connectathon+27>
 - **HL7 FHIR Connectathon Basic Training (Free):** <https://www.hl7.org/events/da-vinci/2021/04/training.cfm>
- HL7 FHIR “DevDays” conference (June 9, 2021- 3:15 pm ET) accepted PACIO Leadership’s abstract for presentation. Dave Hill will provide a 45-minute tutorial session covering PACIO’s work. More information and registration: <https://www.devdays.com/june-2021/>
- The Patient Care Work Group approved Block Vote 3 (12 issues) on 4/12/21.

2) Speech, Language, Swallowing, Cognitive Communication, and Hearing (SPLASCH) Use Case Update (Jamila Harley)

- Jamila continues to work on identifying an HL7 sponsor:
 - Community-Based Care & Privacy Work Group has expressed interest.
 - Jamila will meet April 26 with the Patient Care Work Group co-chairs to discuss possible sponsorship.



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- PACIO Leadership invites you to join new SPLASCH Use Case subgroup meetings to work through specific content. Please email Jamila Harley (jharley@asha.org) or Leah Allen (lallen@mitre.org) to be added to the distribution list and to receive future meeting invites (exact timing TBD).
- PACIO Leadership and Jamila will hold two identical information sessions for ASHA (American Speech-Language-Hearing Association) members to introduce this work, answer questions, and recruit subgroup participants. If you are interested in joining either session, please email Jamila Harley (jharley@ahsa.org).
 - **ASHA Information Session #1** | April 15, 2021 @ 11am EST
 - **ASHA Information Session #2** | April 22, 2021 @ 6pm EST
- The information they will present is available here: [SPLASCH ASHA Member Info Session PPT.pptx](#)

3) Advance Directive Interoperability (ADI) Use Case Update (Tina Wilkins)

- Maria Moen is working with the Patient Empowerment Work Group and is currently promoting the PACIO and ADI work to the Office of the National Coordinator for Health IT (ONC) Chief Privacy Officer.
- The ADI Technical team reviewed the Connectathon Use Case plans to create, store, and query ADI data and provided a status of ADI profile mapping.
 - The team identified two new profile types needed:
 1. Attestor: Notary and Attestor: Witness
 2. Personal Health Goal
- The ADI Subgroup reported out on its progress adjudicating the Alabama form and participants felt the exercise has been valuable.
- PACIO members interested in participating in assisting with adjudication should contact Maria (mmoen@advaultinc.com) or Tina Wilkins (twilkins@mitre.org).
- Resources:
 - **Adjudication Forms:** <https://confluence.hl7.org/display/PC/ADI+%28Adv+Dir+Interop%29+in+FHIR+Materials>
 - **Draft Implementation Guide (IG):** <https://paciowg.github.io/advance-directives-ig/>
 - **IG Questions / Comments:** <https://chat.fhir.org/#narrow/stream/282785-Advance-Directives>
 - **Advance Directive Interoperability (ADI) Track Description for the HL7 May Connectathon:**



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<https://confluence.hl7.org/display/FHIR/2021-05+PACIO+Advance+Directive+Interoperability>.

4) Ballot Reconciliation Update (Caleb Wan)

- Summary slides:
<https://confluence.hl7.org/download/attachments/86977192/PACIO-Ballot-Reconciliation-BLOCK-VOTE-4-new-items.pptx?version=1&modificationDate=1618432917275&api=v2>
- Block Vote 3
 - The Patient Care Work Group approved the twelve Block Vote 3 items on April 12.
- Block Vote 4
 - Four items were approved in previous meetings.
 - Additional items:
 1. “Prior Level of Cognitive Function” profile (FHIR-29980)
 - a) The original ballot comment did not object to the word “prior”, but rather felt that the specific meaning was not clear in the IG.
 - b) The group discussed this issue in prior weeks. PACIO members recommended revised language for the IG description, which is ready for review.
 - c) The PACIO Community discussed the word “immediately” and felt adding the phrase “most recent” would better represent the meaning.
 - d) The group reached consensus on the new description:
“An exchange of summary observation regarding the most recent prior level of cognitive function immediately preceding the current admission, illness, or exacerbation for a patient. (The use of this profile is encouraged in absence of formal prior level of cognitive assessments.)”
 2. Assistance Required Extension and Bindings (FHIR-29981 and FHIR-29992)
 - a) The extension on the Cognitive Status IG is correct, but the Functional Status IG has the wrong description on the “Assistance Required” extension.
 - b) The extension currently is not bound. Previously, a possible binding to the value set LL4970-1 “CMS MDS Prior Functioning” was proposed. This week a member commented about use of the word “resident” in this MDS answer list. The profiles would apply to provider types and assessments other than the MDS, so the desire is to find a LOINC value set that uses the word “person” or “patient” and not “resident”.



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- c) Another member recommended LOINC's more generic "patient" answer list (LL4309-2). PACIO Leadership pointed out for an MDS one would not use the "Prior Level of Function" profile.
 - d) The group reached consensus on binding the "Assistance Required" extension in this profile to value set LL4309-2 with the binding strength of "Extensible" and keep the "Must Support" flag.
- Block Vote 4 approval of FHIR-29980, FHIR-29981, and FHIR-29992.
 - 1. Dan Vreeman moved to approve, and Ashleigh Sheffield seconded.
 - 2. The motion passed 30-0.
 - 3. These will be brought to the Patient Care Work Group on April 26.
- FHIR-29772 Choice of new "Observation.category" binding
 - 1. Dan Vreeman reminded the community of the opportunity to select a new Observation.category binding with a stronger conceptual framework to enhance cohesiveness since the binding/dependency on the USCoreLaboratoryResultObservationProfile no longer applies. The prior value set was not optimal and combined concepts of who recorded it (e.g., therapy), what the observation was about (e.g., activity), and how it was obtained (e.g., exam, survey).
 - 2. The group discussed benefits of using "functioning" as the "Observation.category" code in both the Functional Status and Cognitive Status IGs:
 - a) The term is more suitable to clinicians and would not require any act on the clinician's part for the required exchange to occur.
 - b) The proposed framework aligns with the International Classification of Function (ICF) framework.
 - c) The proposed framework is more domain focused and helpful when labeling concepts for inclusion/communication at care transitions.
 - d) The proposed framework supports the USCDI proposed data class of "functioning" (currently in comment status <https://www.healthit.gov/isa/united-states-core-data-interoperability-uscdi>).
 - 3. Changes to cardinality (1..*) and guidance in the IG.
 - a) The field is required, so the fixed value of "functioning" could be listed as the category.
 - b) The IG guidance could state for post-acute care assessment, "survey" may also be used as a second category.
 - c) The group agreed with this proposal. Caleb Wan will make the changes and bring it back next week for formal approval.
- Resources:
 - To view the balloted IG:



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<http://hl7.org/fhir/us/pacio-cs/2021Jan/index.html>

- To see applied changes for Block Vote items:
<https://paciowg.github.io/cognitive-status-ig/index.html>
- To browse ballot comments for Block Vote items:
 1. Go to HL7 JIRA <https://jira.hl7.org/browse/FHIR-30005> and search for ballot comments with the JIRA issue ID. (e.g., FHIR-29998)

5) Reassessment Timepoint Update (Dave Hill for Chris Pugliese)

- The Tech Team has decided to use “Encounter” and not “Clinical Impressions” as the Resource. Supporting reasons include:
 - Reassessment Timepoint aligns closer with the administrative concepts in “Encounter” (allowing for sub-encounters for timepoints for reassessments). “Clinical Impressions” is more clinically focused.
 - The team anticipates fewer extensions will be needed with the “Encounter” resource.
 - “Encounter” has a higher FHIR maturity level (FMM2) and frequency of its use is likely to increase with the USCDI.

6) Walk-On Topics

- Lorraine Wickiser from CMS expressed appreciation for the small PACIO team who last week pulled together a submission for the CMS IMPACT ACT Ideation Challenge. Submissions will be evaluated by the Center for Clinical Standards and Quality (CCSQ).

7) Documentation of Decisions and Action Items

- Block Vote 4 approval of FHIR-29980, FHIR-29981, and FHIR-29992.

8) Adjourn