



Monthly Meeting

Time: Wednesday, June 15, 2022, 10:00 am - 10:30 am EST

Location: ZoomGov Meeting

Meeting ID: 160 139 9549

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) PACIO Monthly Meeting Resources

The presentation slides and audio recording are available on the PACIO Confluence page:

<https://confluence.hl7.org/download/attachments/86977192/2022-06-15%20PACIO%20Monthly%20Update%20v2.pptx?version=2&modificationDate=1657144229096&api=v2>

2) PACIO Project Background

- Goal is for data to follow the post-acute care patient across the continuum of care.
- Without interoperable health data exchange, medical providers are reliant on patient recall, which can be inaccurate, especially in stressful situations. Results in poor outcomes, including doctors repeating tests.

3) Leadership Update and Review of Use Cases (Dave Hill)

- Functional Performance

- Define healthcare domains, following a model similar to Gravity Social Determinants of Health (SDOH.)
- The Functional Performance Implementation Guide (IG) will be an innovation platform for future use cases. Instead of creating new IGs with profiles, we can add code systems and value sets to existing IG. Easier and more consistent for IG authors and client app implementers.
- The PACIO implementation guides (IG) for Cognitive Status, Functional Status, and SPLASCH will be rolled into the larger Functional Performance (FP) IG.
- Emphasis on ICF-based categories to identify the types of data. Currently reviewing ICF categories with subject matter experts to



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decide how specific (ie. how many levels deep into the ICF hierarchy to go) for FP value sets.

- Cognitive Status and Functional Status IGs are published as STU-1, will probably not proceed beyond STU 1 before being rolled into FP.
- SPLASCH is not yet balloted. Will roll into FP.
- Goal is to ballot FP IG in Sept. 2022

- **Advance Directives (ADI)**

- STU-1 person-authored information across the 5 use cases (create, share, query, update, verify)
- STU-2 practitioner-authored information focusing on type 3 (PMOLST) as opposed to type 2 (encounter-centric)
- Current status of STU-1: continuing to work through remaining ballot tickets, goal is to complete ballot reconciliation by August 2022
- Current status of STU-2: targeting January 2023 ballot for STU-2
- ADI will be the focus of July 2022 Connectathon. Will exchange STU-1 content and a scanned STU1 PMOLST document.

- **Re-assessment Timepoints**

- Re-assessment Timepoint was created to break up long and potentially overlapping episodes of care between encounter and assessment.
- This makes data more easily searchable. Also, sometimes required by regulation (example: provide updated every 60 days.)
- Working through STU-1 ballot reconciliation. Block vote 2 was approved by Community-Based Care and Privacy
- Working on Block Vote 3
- Remaining work for STU-1 publication: security page, use case examples, prose review
- Target dates:
 - Resolve all tickets by mid-July 2022
 - Publication by September 2022

- **PACIO Listening Session Highlights**

- MITRE facilitated discussion on May 25, 2022. There were 22 participants. Topics included:
 - Current system capabilities
 - Types of data that would be useful to exchange
 - Ways patients might consume that data.
- Challenges:
 - Multiple layers of connection points, finding the right staff is costly
 - Lack of standardization, different interfaces. Vendors want to share data in a scalable way, but without regulation it's hard to justify the cost of switching to FHIR
 - Financial Implications



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- Existing opportunities:
 - National Directory: authenticate once
 - HL7's Financial Management WG: linking financial payments to clinical data to improve efficiency
 - Patient identification: create national patient identifier
 - General education
- Future state opportunities:
 - Provider engagement: focus on increased efficiency, improved outcomes, reduced costs/burdens
 - Represent the voice of the patient
 - Share patients' own data with them
- **FHIR Dev Days**
 - June 7, 2022 from 10:45 to 11:30 am, Nancy Lush and Dave Hill presented PACIO update and May Connectathon use case
 - Received positive feedback, despite the event's low in-person attendance
 - Possible opportunity for PACIO to collaborate with Sara Armson of MCC eCarePlan IG
 - Lloyd McKenzie presented "Leveraging US Specification for the World". Reusability requires a commitment toward international support.
 - Argonauts use cases for 2022: Electronic Health Information Export API, FHIR Write – Patient Generated Health Data, Publication of FHIR endpoint and structure, SMART Health Links, Argonaut and standardized international APIs.
 - TEFCA published FHIR Roadmap for TEFCA exchange version 1. Three stages of FHIR availability:
 - Stage 1: FHIR Content Support (2022 to first half 2023)
 - Stage 2: FHIR exchange possible within QHIN's own networks (second half of 2023)
 - Stage 3: Network-brokered FHIR exchange 2024
 - Google presentation focused on framework applying artificial intelligence to healthcare data
 - FHIR-FLI libraries for Dart (Google Flutter) App development for every screen (iOS, Android, Windows, Mac, Linux, embedded systems i.e. wearables.)
- **July CMS Connectathon**
 - July 19-22, 2022 CMS Connectathon (virtual)
 - Test exchange of ADI practitioner-authored information Zero cost to participate
 - 3-day event
 - Day 1: CMS regulation and policy
 - Day 2: Track demo/testing (three 20 min sessions)
 - Day 3: Track highlights



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- All are invited to join the planning during the Tech Team meetings on Thursdays (2-3pm ET), use case meetings Fridays (11:30am-12:30pm ET)

4) Walk on topics

- None.

5) Next Meeting

- Wednesday, July 13, 2022, 10:00 am – 10:30 am EST

6) Adjourn