



## Annual Report Work Group

Transcript  
February 4, 2019  
Virtual Meeting

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**Operator**

All lines are now bridged.

**Lauren Richie – Office of the National Coordinator for Health Information Technology - Designated Federal Officer**

Good afternoon, everyone. And welcome to the HITAC annual report workgroup. We just have a 60-minute call today as we are nearing the finish line on our first draft. So, we will go ahead and call this meeting to order starting with roll call. Carolyn Peterson?

**Carolyn Peterson – Individual – Co-Chair**

I'm here.

**Lauren Richie – Office of the National Coordinator for Health Information Technology - Designated Federal Officer**

Aaron Miri?

**Aaron Miri – Imprivata – Co-Chair**

Good afternoon.

**Lauren Richie – Office of the National Coordinator for Health Information Technology - Designated Federal Officer**

Christina Caraballo?

**Christina Caraballo – Get Real Health – Annual Report WG Member**

I'm here.

**Lauren Richie – Office of the National Coordinator for Health Information Technology - Designated Federal Officer**

Brett Oliver? He may not be able to join us, but we'll circle back. And Chesley Richards?

**Chesley Richards – Center for Disease Control – Annual Report WG Member**

Here.

**Lauren Richie – Office of the National Coordinator for Health Information Technology - Designated Federal Officer**

All right. I will now turn it over to Aaron and Carolyn as our co-chairs.

**Aaron Miri – Imprivata – Co-Chair**

All right. Carolyn, would you like to start?

**Carolyn Peterson – Individual – Co-Chair**

Sure. I'd just like to welcome everyone to another meeting of the workgroup and thank you all for your ongoing participation and willingness to be involved in what is a fairly detailed process, but I think is getting us to the point where we have a really good product to take back to the full HITAC. I really appreciate your efforts, and I know that ONC does, too.

**Aaron Miri – Imprivata – Co-Chair**

Yeah, and I want to echo that as well. I think this workgroup has been a lot of fun, and I have already been engaged by some of the giant healthcare IT consortiums that are out there, and groups saying, "Hey, when are we going to be able to see the report?" So, I keep telling everybody soon, soon enough. There is no process, ONC process, but there is a process we are going through, here. So, to the degree of it, I know there is a lot of interest from the public about seeing what HITAC has to approve and has to offer. So, I think this will be a good work product we push out to the community.

All right. Shall we go into it then? Today, you know, we obviously will be looking at the additional updates we are proposing for the draft annual report. And of course, planning for our update at the upcoming HITAC meeting, and of course any comments from the public. Next slide.

All right. So. we are here. We are at the January 24<sup>th</sup>/February 4<sup>th</sup> report draft review and then be presented at the larger HITAC soon. This again being the first iteration of this report as it goes out. It will be interesting to see what we learned from this that we can take it to next year's report. But again, we are right there at the finish line, so I really appreciate everyone's work. Next slide.

Again, so we have the review scheduled for the full committee coming up soon, and then, of course, approval at some point thereafter, and then the submission to Congress as per 21<sup>st</sup>-century cures. Again, all of that over the next several months. So, it's going to be a busy next couple of months and then as we gear up for next year's report, which I know everyone on this call is looking forward to. Next slide.

All right. Let's talk about the additional updates to the annual report for FY18. Next slide. So, we did add some text for the executive summary. We are developing a forward section, really appreciate Carolyn and of course, Robert Hua, our other HITAC co-chair. And they are going to put some comments into this which will be put together and added there. And with a little bit of text adding and modification on the infrastructure landscape analysis, on section four. But we are getting very close here. I think there has been a great discussion overall as to how this comes together and how it reads and really making sure we are taking care of our primary charge as per 21st-Century Cures, which is informing and updating Congress and then, of course, the public. And now there's, as to what we are working on and what we are proposing to work on and where the gaps still lie. Next slide.

All right. So again, under the executive summary, we are adding some text there to summarize the report sections. Really give a lot of credit to Christina, here, and some of the thoughtfulness on how we

logically organize this thing in a way that reads. It's a lot of data, a lot of very factual relevant points, a lot of very topical items that are in the industry and in our faces every day on the various newsgroups. But how do we read this in a way folks can actually digest it and get it to goal? Christina, I don't know if you have anything you want to comment on that. You have been really a big help on helping us see the big picture.

**Christina Caraballo – Get Real Health – Annual Report WG Member**

Oh, thanks, Aaron. No, I think it was great. I think the changes that were made look excellent and good group effort, here.

**Aaron Miri – Imprivata – Co-Chair**

Okay. So again, we are speaking towards, in this summary again, the HITAC progress FY18, some of the infrastructure landscape. We added text in there that we didn't see any target areas for the year that were identified. And then, of course, any gaps and opportunities. We were sort of introducing a table format, again, in a way to structure and make this logical for folks reading it. Next slide.

All right. So, let's look at landscape analysis. Around inner operability, we really want to highlight how patients are interacting with various modalities and health IT modalities today. So, there was a lot of discussion about the current state of patients experience with HIEs, and really the disparate state that it can be in several circumstances. I know a lot of us shared a lot of personal stories of challenges we have faced, but it is something real and very salient in the industry that we feel is important to call attention to. Under the standards implementation's specifications, added some text to introduce subsections there. Again, really trying to make this simple to understand and really digestible. Carolyn, anything you want to add to that?

**Carolyn Peterson – Individual – Co-Chair**

No, I think that is an absolutely accurate call, and I echo your thanks to Christina for her work on some of the text around these things, and willingness to keep pushing to make it better.

**Aaron Miri – Imprivata – Co-Chair**

Right. I totally agree. All right. Next slide. Privacy and security. Really there has been a lot of emphases again as we look at the patient on this, and really focusing in on how we can, as HITAC, really make sure we capture and continue to reassess and assess what the future state of patient-facing applications. And in this case, it's patient-generated health data. And we really wanted to speak a little bit more about patient-generated health data collected during remote monitoring and telehealth activities, and what that looks like, and really the desperate state of that today. As you look at state law versus federal law, if you look at things like 23 and Me and other items, how does that play into it? So really some focus around that.

And then around health information sharing for research purposes. This was something that has been echoed over and over and over again at the larger HITAC and in various subgroups that we need to really talk about. When you look at how are states are doing, how we handle research, how is genetic information being done again, I spoke about 23 and Me again earlier. And really an understanding of where is this going. There is a lot of unknown. That was interesting report this past weekend that I think was read by the *Wall Street Journal*, I think picked up by *Politico* about the industry of selling back and creating a risk score for your health and health data. And it is around opioid consumption and how likely you are as a patient to become addicted to opioids. So, this is definitely involving an evolving

space, and I will call, in Aaron's terminology, the Wild Wild West, that perhaps HITAC can definitely get involved with. Carolyn, anything you want to add to that?

**Carolyn Peterson – Individual – Co-Chair**

No. You summarized it well, Aaron.

**Aaron Miri – Imprivata – Co-Chair**

Okay.

**Carolyn Peterson – Individual – Co-Chair**

Keep going.

**Aaron Miri – Imprivata – Co-Chair**

Okay. Next slide. All right. So, workgroup discussion. As we are planning for the update for the upcoming HITAC meeting. All right, next slide. All right. So, our thought process really is, here, sort of, again, present our overview of reported content, highlighting some key points for each section, and then really leading discussion is to collect feedback from the HITAC members. This is something that I know Brett and Christina and others, I know Chesley, you have some comments on. You know, the last HITAC where we gave them an update. And unfortunately, January was pushed because of all of the other events going on. But to the degree of it, how do we make sure that we give the HITAC an opportunity to really consume this and weigh in on it? And so, our thought was to really focus on the recommendations for addressing health IT infrastructure and then offer sort of an executive summary handout.

And I kind of wanted just to pause here on this slide, because this is an important point. In that we don't want this to be just the recommendation of a couple of us, we want it to be the full recommendation of the entire HITAC. So, maybe Chesley, I'm going to put this to you to start off, here, can you think of anything else we may be able to do to help encourage conversation with the larger HITAC, or do you think this will get the ball rolling enough that we will get full participation and get folks a chance to weigh in? What do you think?

**Chesley Richards – Center for Disease Control – Annual Report WG Member**

Yes, I think this will be good. I think... Will be full committee get the full draft report? And if so, when will that happen before its final release?

**Carolyn Peterson – Individual – Co-Chair**

The full committee will get the full report. Aaron and I have been asking to get for them to get it at least a week before the meeting, and I know Robert Hua supports that as well, if not even more time. So, I am sincerely hoping it goes out no later than the 13<sup>th</sup> and ideally the 11<sup>th</sup> and this Friday if that was feasible.

**Lauren Richie – Office of the National Coordinator for Health Information Technology - Designated Federal Officer**

This is Lauren. I can confirm our next official HITAC meeting will be February 20<sup>th</sup>.

**Chesley Richards – Center for Disease Control – Annual Report WG Member**

Yeah, so if they have the full draft report, I think focusing on the recommendations, and executive summary in the actual meeting is appropriate.

**Aaron Miri – Imprivata – Co-Chair**

Awesome. Perfect. Thank you. Okay. Then I think, Carolyn, I think we can proceed onward as we thought we would with getting some of that feedback from them. All right. Next slide. Oh, where? Right here. Okay. So, let's go back a slide. All right. Let's talk a little bit in general. Christina, how are you feeling at this point?

**Christina Caraballo – Get Real Health – Annual Report WG Member**

I think everything looks great. I really like what you guys pulled out for the executive summary and a nice clean two pages. And I would like to pull out the charts. So, I really don't have much to add. I think everything we discussed in our last meeting was addressed really nicely.

**Aaron Miri – Imprivata – Co-Chair**

Good deal. And then, Chesley, I know that we have been interfacing a lot via email and modalities, so what are your thoughts? Are you feeling good about where we stand with the report thus far? Are there comments or feedback you think we should touch upon or focus on? What are your thoughts?

**Chesley Richards – Center for Disease Control – Annual Report WG Member**

No, I think the way the report has come together looked good and I think it is appropriate for where we are. I think there are a lot of unanswered questions for the future, and you have highlighted some of them. I think that is important for this year to tee those up for future reports. I think this is doing that.

**Aaron Miri – Imprivata – Co-Chair**

Good deal. Do you feel that this report as it stands is easily digestible for various federal agencies as well? And there has been some discussion about – and it was a good topic that, I think, Christina brought up, which is a lot of us are used to reading something that comes out of statute or some other topical format of reporting language. And so, we tried to find a reporting medium here that is still read easily, it wasn't reading like you are reading a bill, but to the degree of it, it made sense. Do you feel that the report is easily digestible for the various federal agencies? I am curious about your perspective on that.

**Chesley Richards – Center for Disease Control – Annual Report WG Member**

I can read it and understand it, and I hope that is a good marker because I am not that sophisticated in some of the technical language.

**Aaron Miri – Imprivata – Co-Chair**

Got it.

**Chesley Richards – Center for Disease Control – Annual Report WG Member**

If I can get it, I think most of the other federal agencies certainly can get it.

**Aaron Miri – Imprivata – Co-Chair**

Perfect. Good deal.

**Carolyn Peterson – Individual – Co-Chair**

That is really good to hear because while we wanted to make it accessible to the widest possible audience, we do have to think about our federal audiences. So, I am glad it has come together for you.

**Chesley Richards – Center for Disease Control – Annual Report WG Member**

I think a lot of the issues touched upon here, we are dealing with our own information, cybersecurity, data handling, data use, and so there is a confluence between what we are having to do around our information systems and what this needs to do for the broader health information world. So, I think it is good.

**Aaron Miri – Imprivata – Co-Chair**

That is super helpful to hear. Thank you. Carolyn, what are your thoughts?

**Carolyn Peterson – Individual – Co-Chair**

Yeah. I think we are in as good a place as we can be without having the actual HITAC. I can't really conceptualize anything else we that haven't done to get ready, other than finishing up the forward, which Robert and I are working on and which should happen fairly quickly. But I think we are ready to go to the show.

**Aaron Miri – Imprivata – Co-Chair**

Yes. I agree with that. I guess the other question I would have is assuming feedback and comments from the HITAC, we would want to turn those comments around soon into actions and whatever follow-up and get another draft report out after the larger HITAC. I don't know if we have dates on the calendar for that or something we are marching to. Carolyn, can you recall of that what our internal deadline is for that?

**Carolyn Peterson – Individual – Co-Chair**

It would key off of the next HITAC meeting, and I am not sure we know when that is yet. Do you know, Lauren?

**Lauren Richie – Office of the National Coordinator for Health Information Technology - Designated Federal Officer**

After February, would be March 20<sup>th</sup>.

**Carolyn Peterson – Individual – Co-Chair**

Okay.

**Aaron Miri – Imprivata – Co-Chair**

All right. So, between February – so okay, got it. So, we would have about four weeks there, so we probably want to get a draft out, if we back up by a week, to give folks a week read the new version. So, you are looking like the second week of March to get a synthesized answer back to HITAC. Okay. So, we will have to come up with some dates internally, so that we stay on task. And I'm sure Michelle will keep us right in line, as she has with everything. Which I have been remiss to say at the beginning of this, our ONC partners are phenomenal. So, thank you all for helping to herd the cats here. Otherwise, we would be all over the map, so we appreciate you guys, very, very much. All right. So, to the degree of it, I don't have any other comments. Carolyn, you do?

**Carolyn Peterson – Individual – Co-Chair**

I don't. I think we are pretty much as far as we can go.

**Aaron Miri – Imprivata – Co-Chair**

Yep. All right. I don't want to be remiss about asking others. So, Christina or Chesley any comments from you?

**Chesley Richards – Center for Disease Control – Annual Report WG Member**

Well, I was thinking whether – this is Chesley, I was just thinking with some of your questions, I have looked at this sort of in bits and pieces along, and then I think, now, sort of thinking about sort of the perspectives you were talking about inside the federal agency nose, if we read back over it today, I mean, do we still have time if we see anything that we want to change or any comments we want to make, do we have time to do that without slowing this down before the meeting?

**Aaron Miri – Imprivata – Co-Chair**

I would say yes. I would say let's do it soon, as fast as possible. But I would say, you know, we want to make sure all opinions are heard. Now, I will say that one thing we have been good about is trying to keep this report specifically to the task of what was called out for 21<sup>st</sup> Century Cures but recommend any new items for maybe next year's report. So, if there are items as you go back through and say, hey, we should touch upon this more, that may be something that we slate for next year's report. But other than that, I would say we would definitely want to hear it.

**Chesley Richards – Center for Disease Control – Annual Report WG Member**

That is all I was suggesting.

**Aaron Miri – Imprivata – Co-Chair**

Oh, yes. Absolutely. Yes. Let's get it out there.

**Carolyn Peterson – Individual – Co-Chair**

Agreed.

**Aaron Miri – Imprivata – Co-Chair**

Perfect. Okay. All right. Well, then Carolyn should we go then to public comment? What do you think?

**Carolyn Peterson – Individual – Co-Chair**

If we can. If no one else has anything else, they would like to bring up.

**Lauren Richie – Office of the National Coordinator for Health Information Technology - Designated Federal Officer**

And I just wanted to check in, Michelle is there anything else from your perspective that we didn't hit on that we should before we open it up?

**Michelle**

No. I will just finish up the comment that was made about making more changes. If we don't get them done in the next week, there is still, like Aaron was saying, that month between. You are all HITAC members, you can speak up during that meeting as well. So, there are other opportunities to keep modifying for another month or so.

**Aaron Miri – Imprivata – Co-Chair**

Yes. I am a big advocate of making sure that everybody's voice is heard. So yeah, Chesley, if there are comments there, or if you know that adding specific items into this report will make it easily digestible

for other agencies, that is invaluable, right? We want to make sure this is a universal product that can be understood at multiple levels. So, we really appreciate that feedback.

**Chesley Richards – Center for Disease Control – Annual Report WG Member**

Okay.

**Lauren Richie – Office of the National Coordinator for Health Information Technology - Designated Federal Officer**

Okay. I think with that, I know we are quite a bit ahead of schedule, but we will go ahead and open it up for public comment at this time. Operator, can you please open the line?

**Operator**

If you would like to make a public comment, please press star one on your telephone keypad. The confirmation tone will indicate your line is in the queue. You may press star two if you would like to remove your comment from the queue. For participants using speaker equipment, it may be necessary to pick up your handset before pressing the star key.

**Lauren Richie – Office of the National Coordinator for Health Information Technology - Designated Federal Officer**

Great. Thank you. Just as a reminder, for those members of the public that are dialed in, you can find the full schedule of HITAC meetings on [heathit.gov](http://heathit.gov). It will give you a sense of when the full committee will start to deliberate and review this report in detail. So, with that, I will ask our operator to do we have any comments in the queue at this time?

**Operator**

There are no comments in the queue at this time.

**Lauren Richie – Office of the National Coordinator for Health Information Technology - Designated Federal Officer**

Okay. I think this may go on record as the shortest call we have had.

**Aaron Miri – Imprivata – Co-Chair**

That's that is a good thing. A lot of work has been done, so it's a good thing.

**Lauren Richie – Office of the National Coordinator for Health Information Technology - Designated Federal Officer**

Yes. Absolutely. A lot of work behind the scenes. So, Aaron, Carolyn, anything else before we adjourn for today?

**Carolyn Peterson – Individual – Co-Chair**

Just again to express my appreciation to everyone for your efforts. And by all means, if something comes to mind in terms of additional edits or considerations, please do touch base with Aaron and I immediately and we will see what we can do to get that in line immediately or perhaps for the next version if we need to. We definitely appreciate your feedback and see this as a full workgroup product, so we want to make sure we can be responsive to your comments and thoughts.

**Aaron Miri – Imprivata – Co-Chair**



Agree totally. And I appreciate all of you again, and I look forward to the big HITAC. It will be great to get that feedback and really push the ball forward, so thank you all.

**Lauren Richie – Office of the National Coordinator for Health Information Technology - Designated Federal Officer**

Thanks again everyone and we will look for our next HITAC meeting in a couple of weeks. Thank you.

**Aaron Miri – Imprivata – Co-Chair**

All right. Have a great afternoon.

**Carolyn Peterson – Individual – Co-Chair**

Bye everyone

**Christina Caraballo – Get Real Health – Annual Report WG Member**

Goodbye.

Duration: 21 minutes