FHIMS WG Terminology Modeling Sub-Project Meeting

Summary of Call

Date/time of call: Wednesday, October 23 2013, 2:00 - 3:30 PM

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| **Attendees** | | | |
| Jay Lyle - FHA PMO |  | Robert Crawford – VA |  |
| Rob McClure - VA/VHA |  | LuAnne Barron |  |
| Bill Hess – FDA |  | John Carter |  |
| Galen Mulrooney - VA/VHA |  | Riki Merrick |  |
| Susan Matney – 3M |  | Kevin Coonan |  |
| Jim Case – NLM |  | Holly Miller – VA |  |
| Steve Wagner – FHA |  | Catherine Hoang – VA |  |
| David Bass – VA |  | Glen Janzen – IHS |  |
| Mark Roche |  | Steve Hufnagel – DoD |  |
| Sean Muir – VA |  | Charles |  |
| Jerry Sable – CDC |  | J.P. Kelly – DeLoitte/IPO |  |
| Ioana Singureanu |  | Charles Gabriel |  |
| Ben Bovee – DoD (iEHR) |  | Greg Rehwoldt – IPO |  |
| Jeff Jacobs – IPO |  | Coco Tsai – FDA |  |
| Eric Rothschild – IPO |  | Frank Switzer – FDA |  |
| Dornn Harris – IPO |  | Steve Emrick – NLM |  |
| Caitlin Ryan |  | Iona Thraen – VA |  |

Agenda

Continue review of provider domain coded properties

Previously (10/2) reviewed Provider model, which may need to change back to Yellow from Green due to the addition of several classes from Common

Reviewed several kinds of provider classification:

1. NationallyIdentifiedProvider.npiEntityType: class will be removed
2. NationallyIdentifiedProvider.taxonomyCode: class will be removed
3. HealthcareProvider.providerCategory: redundant with specialty: to be removed
4. HealthcareProvider.providerRole: If these (Consulting provider, Primary care provider, Referring provider. HL7 table 443) are the values, they seem to be specific to the relationship with the encounter, not with the institution. (or with patient, for Primary Care). Suggest removal to encounter domain
5. Specialty.specialty: keep; use NUCC
6. FacilityTreatingSpecialty.specialtyCode: use high-level classification as suggested. Find requirement in order to identify appropriate values.
   * Find requirement
7. PrescribingProvider.licenseCategory: Will reflect DEA schedule; may want to rename “prescribingRights.” Remove "countersign": this is used when the provider is not licensed to prescribe but the institution has a policy allowing countersigning.
   * I – V?
   * Application form classifies applicant as “II narcotic, II nonnarcotic, III narcotic, III nonnarcotic, IV, V”
   * “Mid-level practitioner” list: permissions vary by state, but classification is national:
     + AMB Ambulance Service
     + AS Animal Shelters
     + DOM Doctors of Oriental Medicine
     + ET Euthanasia Technicians
     + HMD Homeopathic Physician
     + MP Medical Psychologists
     + ND Naturopathic Physician
     + NH Nursing Homes
     + NP Nurse Practitioners
     + OD Optometrists
     + PA Physician Assistants
     + RPH Registered Pharmacists
8. LicensedProvider.licenseCategory: need state values. Iona to look into inviting or acquiring state licensing expertise
   * GA: “Full Physicians License” & “All Other Professions”
   * FL lists dozens of professions with dedicated boards
   * Other states have different organizational boundaries
   * We may need to define “provider” in order to track down the appropriate bodies for each state
     + or use a text field
9. In addition, we distinguish licensure from certification, and board certification from other kinds (e.g., Medicare, EMS).
   * A Certification class could contain identifier, date range, status, certifying body name and identifier
   * We may wish to keep board certification separate, as a property of Specialty. Or not.
   * There may be relationships between certifications and licenses.
     + EMS agencies and Midwives are also licensed by states and certified by private organizations, but states often confusingly call their EMS licensure processes “certification.”

Reviewed remaining properties, excluding status

1. ClinicStop.stopCode: this looks like a local code; suggest removal or conversion to string
2. EducationalInstitution.institutionCode: question for licensing expert
3. FormalEducation.degree: question for licensing expert
4. HealthPlan.insuranceType: this is part of Enrollment/Eligibility domain
5. Jurisdiction.id: should be an ID, not a code
6. Jurisdiction.jurisdictionType: added to handle states, territories, possibly tribes & agencies? (Or are all licenses granted by states?)
7. PointOfContact.contactCategory: recommend String
8. Practicum.practicumCategory: confirm requirement
9. ProviderNormalSchedule.scheduleCategory: confirm requirement
10. ServiceDeliveryLocation.locationCategory: Jay to bring HL7 & CMS values
    * [2.16.840.1.113883.6.259](https://phinvads.cdc.gov/vads/ViewCodeSystem.action?id=2.16.840.1.113883.6.259) Healthcare Service Location (HL7), based on CDC NHSN. 189 of 212.
    * [CMS locations](http://www.cms.gov/Medicare/Coding/place-of-service-codes/Place_of_Service_Code_Set.html)
11. State.code: this is an identifier.
    1. Note: cardinality to Medicaid provider should be 0:\*
12. PrescribingProvider.status (license status—consult state values)
13. LicensedProvider.status (license status—consult state values)
14. PointOfContact.status V3 states might work here
15. NationallyIdentifiedProvider.status (deleted class)
16. ProviderAffiliation.status – affiliation with an organization (or network); V3?
17. ProviderPlanParticipation.status – V3 might work here
18. MedicaidProvider.status – V3 or CMS?
19. MedicareProvider.status – V3 or CMS?

**Schedule of Future Meetings**

1) The weekly general Information Modeling (IM) project call is held each Friday from 2:30 to 4:30 PM Eastern Time.

Information for participating in the calls:

Name: FHIMS WG Information Modeling Project Call

Recurring Weekly Call Every Friday

Time of Call: 2:30 to 4:30 PM Eastern Time

Dial-in Information: 1 (773) 897-3018, Access Code: 585-151-437

Web Meeting URL: <https://global.gotomeeti​ng.com/meeting/join/5851​51437>

2) The weekly Terminology Information modeling calls are held on Wednesdays from 2-3:30 PM Eastern Time.

Information for participating in the calls:

Name: FHIMS WG Information Modeling Project Call

Recurring Weekly Call Every Wednesday

Time of Call: 2:00 to 3:30 PM Eastern Time

Dial-in Information: 1 1 (773) 945-1031 Access Code: 849-124-653

Web Meeting URL: https://global.gotomeeti​ng.com/join/849124653

**Action Items**

| Item Description | Responsible Individual | Due Date |
| --- | --- | --- |
| Assess how closely we can align with APHL work   * We agree on current state; happy to work with/wait on abnormality & device | Jay | 4/11 |
| Acquire sample messages   * In process: values, not messages, which have not been scrubbed | Jay | 4/11 |