FHIMS WG Terminology Modeling Sub-Project Meeting

Summary of Call

Date/time of call: Wednesday, November 6 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

1. Timing: can we shorten to 60 minutes, or move to 4 pm ET? HL7 Value Set Definition project conflict.
   1. 4 ET for 90 minutes, or 3 ET for 60 minutes: poll the distribution list. Not enough people on call to decide.
2. Agenda for 11/13

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

Previously reviewed (7 & 9 still open):

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: specific to the relationship with the encounter, not with the institution. Remove to encounter domain or care plan.
5. Specialty.specialty: keep; use NUCC
6. FacilityTreatingSpecialty.specialtyCode: Remove subclasses of ServiceDeliveryLocation (and Organization)
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”
8. LicensedProvider.licenseCategory: Because states vary, make this a user-defined code
9. In addition, we distinguish licensure from certification, and board certification from other kinds (e.g., Medicare, EMS).

For review

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?) get from DoD. And VA table
7. PointOfContact.contactCategory: recommend String
8. Practicum.practicumCategory: confirm requirement
9. ProviderNormalSchedule.scheduleCategory: confirm requirement; recommend NIOSH values
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 |