



## **popHealth Community Stakeholder Meeting**

January 21, 2014

5523 Research Park Drive; Suite 370  
Baltimore, MD 21228  
(301) 789-3508

# **THIS MEETING IS BEING RECORDED**

If you object, please disconnect and/or leave  
now.

# Agenda

- Welcome (10:10-10:15)
- Introduction (10:15-10:45)
  - ▶ Jacob Reider, Chief Medical Officer, ONC
  - ▶ Kevin Larsen, Medical Director of Meaningful Use, ONC
  - ▶ John Rancourt, Public Health Analyst, State HIE Program, ONC
- Results from the “environmental scan” (10:45-11:40)
  - ▶ Genevieve Morris, Director, Audacious Inquiry
- Break (11:40-11:50)
- Straw man governance options (11:50-12:30)
  - ▶ Addy Naik, Director, Audacious Inquiry
- Lunch (12:30-1:30)
- Stakeholder led work on governance plan (1:30-3:00)
  - ▶ Facilitators: Addy Naik & Scott Afzal, Principal, Audacious Inquiry
- Break (3:00-3:15)
- Stakeholder led work on technical development plan (3:15-4:15)
  - ▶ Facilitators: Addy Naik & Scott Afzal
- Resource commitment discussion (4:15-4:45)
- Closing Comments (4:45-5:00)

# INTRODUCTION

# Introduction

- **ONC Vision & Aspirations for popHealth**
  - Jacob Reider – ONC Chief Medical Officer
- **popHealth Background**
  - Kevin Larsen – ONC Medical Director for Meaningful Use
- **popHealth Transition Process**
  - John Rancourt – ONC popHealth Product Manager

# ONC Vision & Aspirations for popHealth

- ONC expects to transition popHealth from being a primarily government-funded piece of software to one that is primarily governed, developed, and supported by the open source community of users.
- ONC's vision is that this transition occurs in the best manner possible.
- ONC hopes that popHealth becomes a sustainable tool that supports viable use cases and serves the needs of its current and potential users.
- ONC has been and will continue to be committed to an open and inclusive process.

# popHealth Background

- ▶ popHealth overview
- ▶ History of the popHealth software

# popHealth Transition Process

## Transition Background:

- ▶ In early 2013, ONC started the planning process to transition popHealth from a primarily government-funded piece of software to one that is primarily governed, developed, and supported by the open source community of users.
  
- ▶ Ai Contract:
  - Environmental Scan / Identifying and Recruiting Stakeholders:
  - Developing Strategic Planning Document
  - Facilitating Stakeholder Meetings
  - Creating Governance and Technical Development Plans



# popHealth Transition Process

## Key ONC/popHealth Factors:

- IP - ONC owns the IP behind popHealth, and has made the code available under an open source license (an Apache 2.0 license).
- Trademarks – ONC owns mark for “popHealth” and logo.
  - ▶ Discussions of trademarks will be distinct from those concerning IP.
- Related IP – ONC is committed to developing Cypress, which contains popHealth’s quality measure engine.
- ONC Budget – ONC does not have a budget for popHealth going forward.
  - ▶ VHA has limited budget for popHealth for only 9 EP eCQMs.

# popHealth Transition Process

## Facilitation

- Community engagement (this meeting, virtual meetings, etc.)
- Governance and Technical Development Plans

## Handoff

- Governance and technical development plans completed
- Entity formed
- ONC plans to work that that entity on an acceptable agreement on how to transfer popHealth.

## Timeline

- March 2014 - Governance and technical development plans
- Spring 2014 – Entity formed
- Spring 2014 – Transition complete

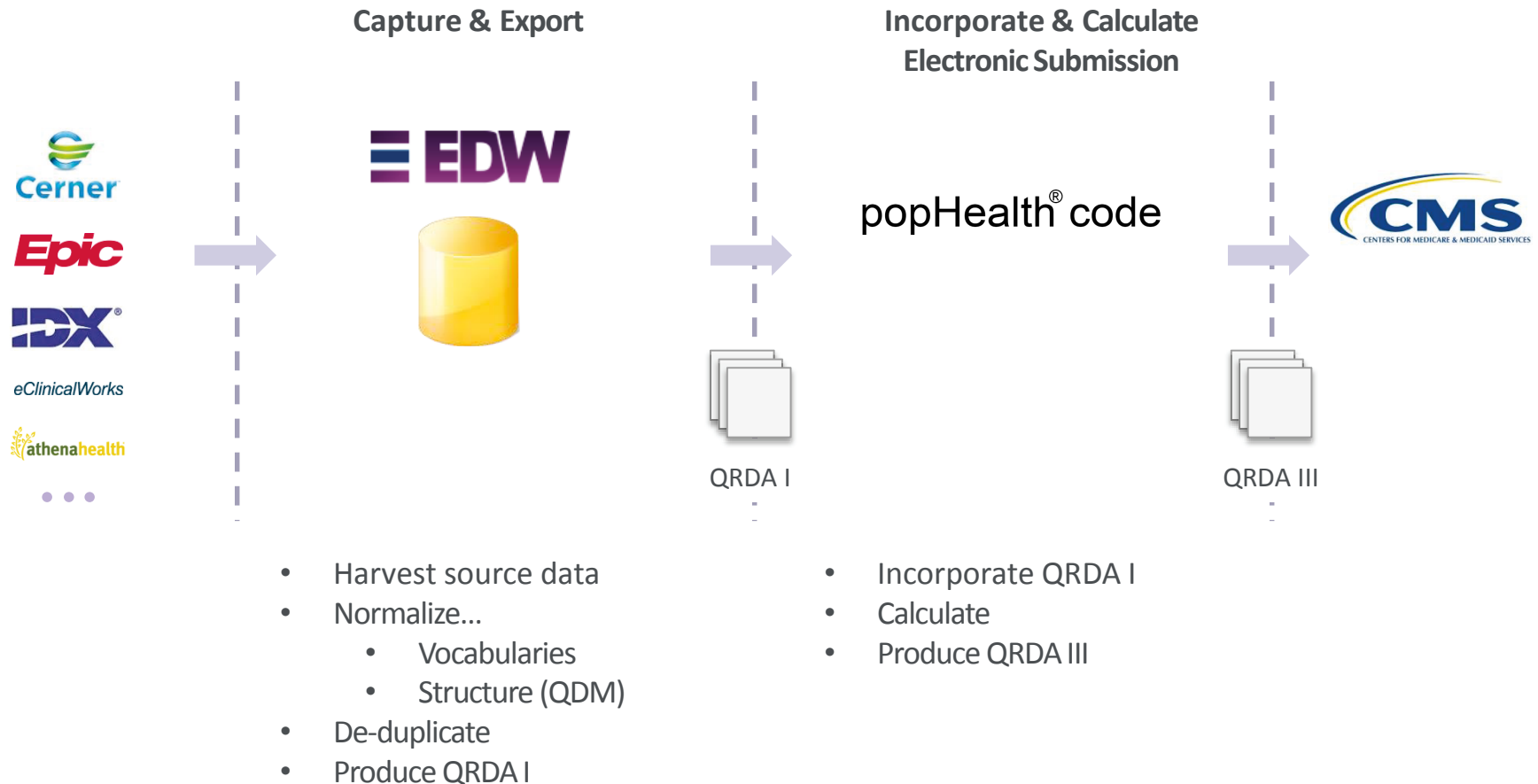
# ENVIRONMENTAL SCAN

# Environmental Scan Overview

- Organizations interviewed included an academic medical research center, RECs, a state public health department, a state HIO, and EHR vendors
- Two versions of popHealth are currently being used, v 1.4 and v 2.1, with majority of organizations using v 2.1
  - ▶ V 2.1 has been certified for the hospital measures for 2014, the provider measures will be certified in the coming months.
- Uses cases in production:
  - ▶ Submission of CQMs for Meaningful Use
    - Some state entities are using it to support FQHCs in submitting CQMs
  - ▶ Reference implementation for states to accept/verify CQMs
  - ▶ Submit quality measures for Healthy Hearts grant

# popHealth @ Northwestern Medicine

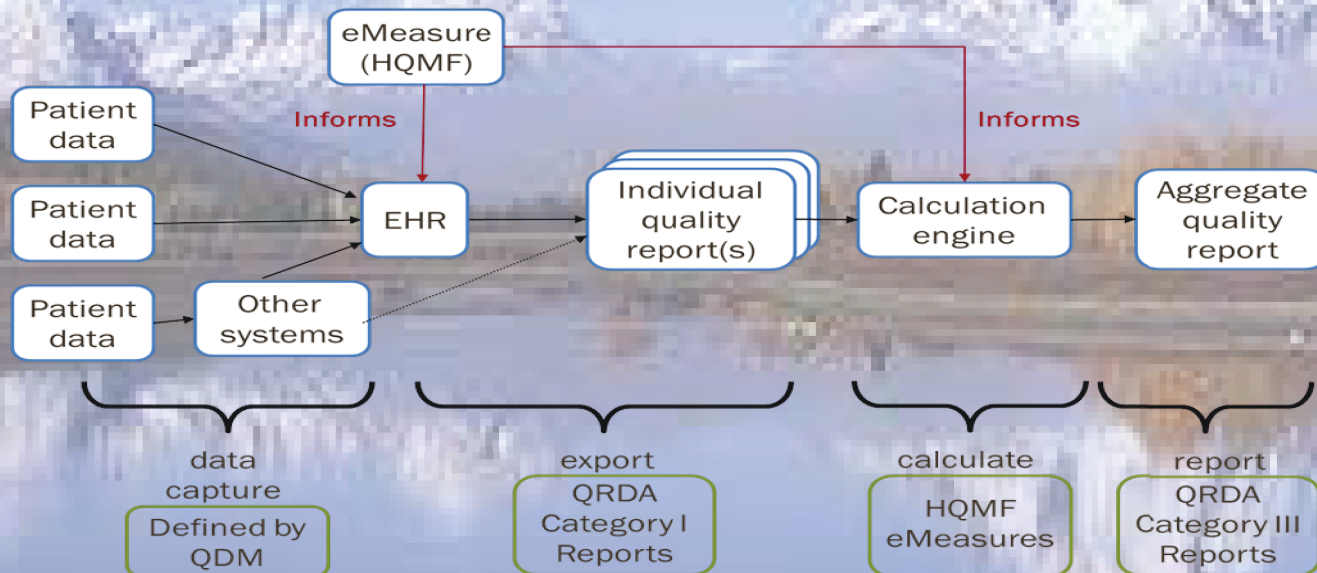
How Northwestern is Managing MU2 Clinical Quality Measures

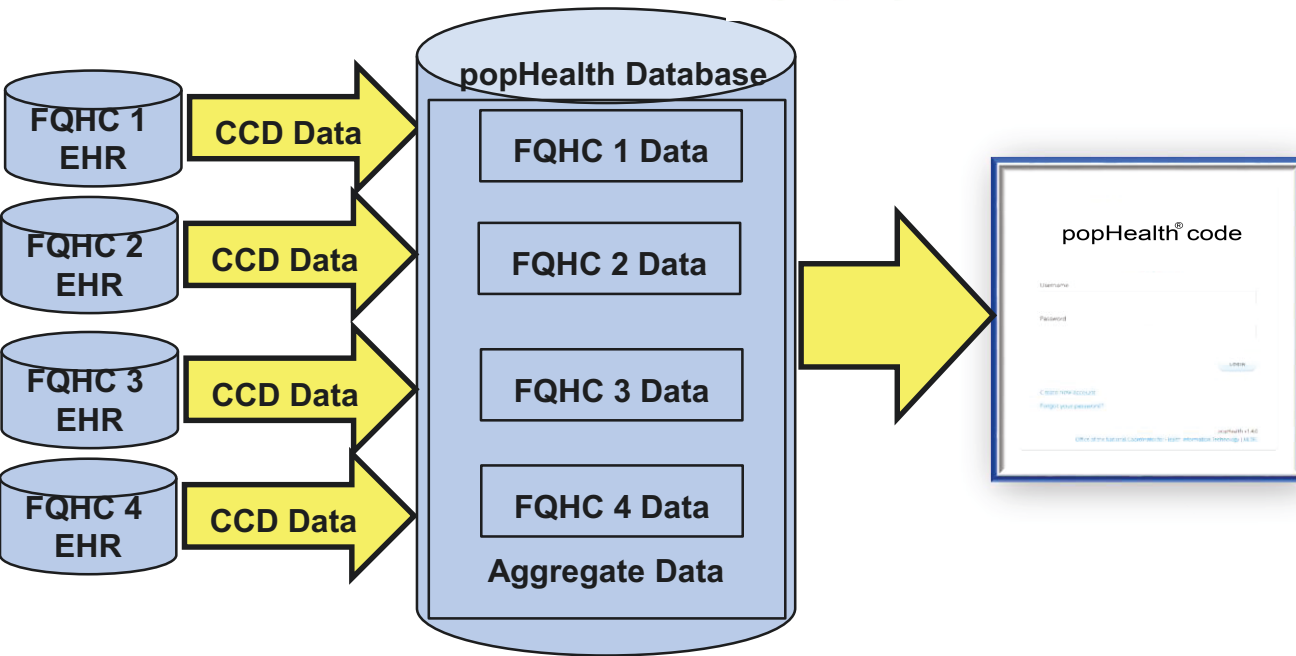


# Wyoming Strategy

- ✓ The Quality Measures for PCMH are aligned with the EHR incentive program.
- ✓ Wyoming SLR already has the capability to gather CQMs manually for the Medicaid EHR incentive program, and electronically with the 2014 CEHRT
- ✓ PopHealth tool has features which meet the need of both the EHR incentive program and the Wyoming Quality initiative.

**Figure 1: End-to-end Quality Reporting Process**





## Potential Use Cases

- MU1 CQMs
- MU2 CQMs
- Consolidated Reporting
- DPH Reporting
- Million Hearts
- SHAPE Grant
- PCMH
- ACO
- UDS

## Current Functionality

- Role-based web access
- MU reports
- Comparison to cohort
- Ready for Stage 2 MU
- Aggregated data shows value of FQHCs to payers and grantors
- FQHC clinical data repository

## Planned Functionality

- Ad-hoc reporting tools
- QRDA Cat 1 Document Import
- Create QRDA Cat 3 files
- Data from other providers
- Additional Measures programmed
- Ad Hoc measures – “Build Your Own Measure”

# Environmental Scan Overview Continued

- Future use cases
  - ▶ Submit CQMs for PQRS/IQRS and Meaningful Use, starting in 2014
  - ▶ Submit quality measures for PCMH programs
  - ▶ Method for state Medicaid departments to accept CQMs
  
- Future development requests
  - ▶ Method to segregate data dashboards based on login credentials (role-based access)
  - ▶ Setup popHealth as a web service that presentation software can be layered onto via APIs
  - ▶ Build your own measure capabilities

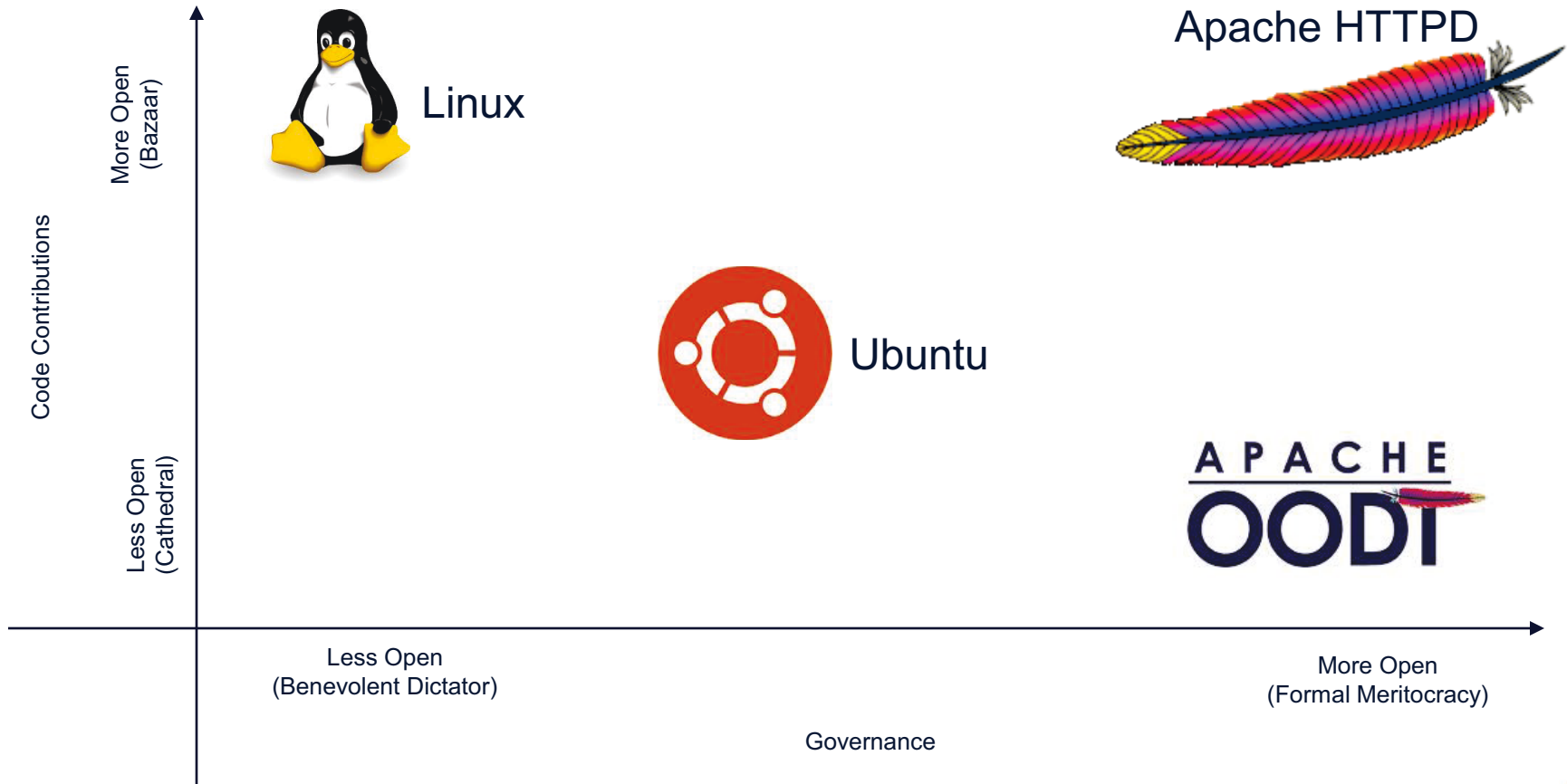


**BREAK**  
**11:40-11:50**

# Governance Plan – Open Source Models

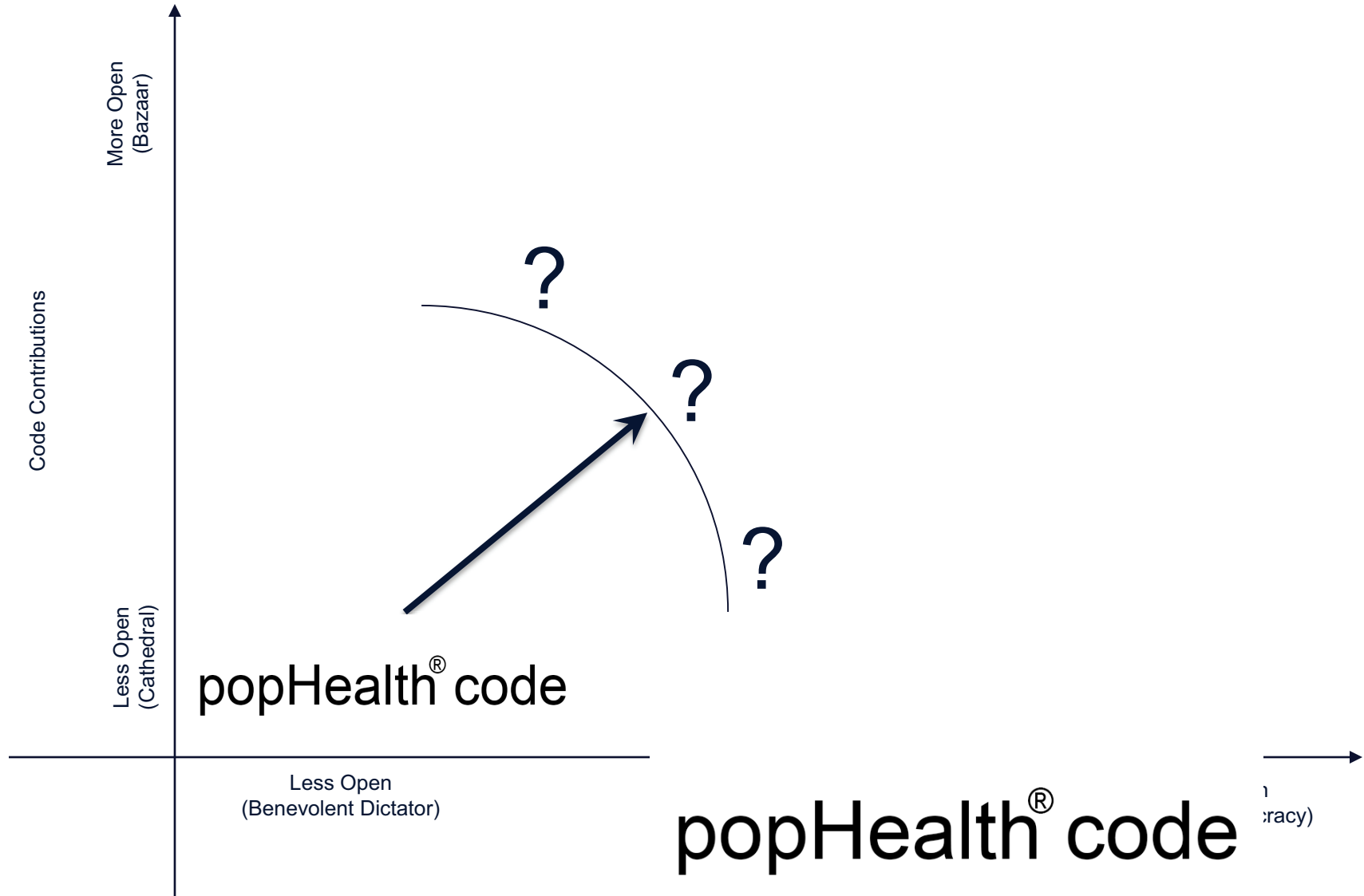
Each model can be governed by:

- Non-Profit Board
- Public-Private Partnership
- For-Profit Entity
- Informal Entity with selected/elected committers



Source: Based on *The Cathedral and the Bazaar* by Eric Raymond, 1997, 1999

# Governance Plan – popHealth Transition



**LUNCH**  
**12:30-1:30**

# Governance Plan - Recommendations

- We have distinct group of “users” and “developers”
- Organize stakeholders in 2 workgroups
  - ▶ Stakeholder Workgroup
    - Establish Roadmap with Major Enhancements and changes
    - Marketing and Funding
  - ▶ Technical Workgroup
    - Architecture
    - Code Quality and Coding Guidelines
    - Testing Criteria
    - Accept/Reject Contributions

# Governance Plan – Resources

Resource	Regular contributors	FTE	Funding
Developers		✓	?
Website	✓		✓
Commit Access		✓	
User Group Listserv Management	✓		
Demo Server	✓		✓
PopHealth trademark	?		
Issue Tracker	✓		?

# Governance Plan - Discussion

- Stakeholder Workgroup
  - ▶ Membership Model
  - ▶ Decision Making
  - ▶ Meeting Schedules

# Governance Plan - Discussion

- Technical Workgroup
  - ▶ Membership Model
  - ▶ Decision Making
  - ▶ Meeting Schedules



**BREAK**  
**3:00-3:15**

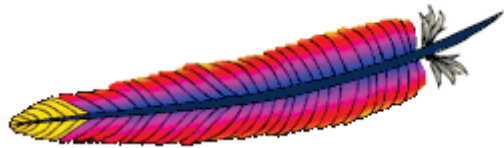
# Technical Development Plan - Open Source Process

- Each community is unique
- Contributors are the key
  - ▶ Developers – Develop code to address need or defect
  - ▶ Testers – Test beta software in an independent test environment and provide testing feedback
  - ▶ Reviewers – Conduct peer review of code contributions
  - ▶ Users – Provide real world feedback from use in production settings
- Rapid Releases to receive early feedback from community
- Linus' Law – “Given enough eyeballs, all bugs are shallow”

# Technical Development Plan – Open Source Evolution

- Person/ Group starts project
  - ▶ Early development is typically where developers are users
  - ▶ People use it but is directed by developers
  - ▶ People contribute code and is accepted by developers
- Add Committers
  - ▶ When the number of contributions grow, developers add “Committers” who have access to accept contributions
  - ▶ Committers handle day to day contributions
- More Formal Structure
  - ▶ Establish Non Profit to organization to govern

# Technical Development Plan – Open Source Examples



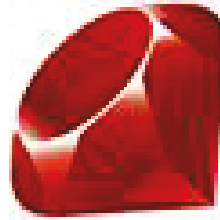
## Apache

Non Profit

Provides infrastructure Support and Technical Framework

Funded through organizational sponsorship

# Technical Development Plan – Open Source Examples



Ruby Language

No Formal Entity

Developed by Contributions

Funded through donations

# Technical Development Plan – Open Source Examples



Ubuntu

For Profit

Commercial Support

Commercial Add-ons

# Technical Development Plan - Priorities

Use Case	Timeline	Resources Needed	Users
Multi-provider access	12-18 months	Medium	IL, CT, FEi Systems, DocuTap, Other public health agencies, Service Providers
2014 Medicare/ Medicaid CQMs	3-6 months	Low	Northwest University, Hospitals/ Clinics
Ability to accept Quality Reports	6-12 months	High	WY, Other public health agencies
Patient Centered Medical Homes (PCMH) Quality Measures	12-18 months	Low	Hospitals/ Clinics
HRSA Health Center Controlled Networks (HCCN) Quality Measures	6-12 months	Low	CT, Hospitals/ Clinics
CDC Quality Measures	12-18 months	Low	CT, IL, Hospitals/ Clinics
Make Quality Measures Customizable	18-24 months	High	Hospitals/ Clinics, Public Health Agencies

# DISCUSSION



# RESOURCE COMMITMENT

# **CLOSING REMARKS**