POPHEALTH AND WEDI MEETING SUMMARY 5/27/14



On May 27, 2014, ONC and Audacious Inquiry (Ai) hosted a meeting for the popHealth stakeholder community and WEDI. The goal of the meeting was to introduce WEDI to the popHealth community and answer questions about governance and management of the popHealth tool.

Background on WEDI

- WEDI is a 501(c)(6) and has a sister organization, the Sullivan Institute, which is a 501(c)(3).
- WEDI was formed in 1991 by the Secretary of Health and Human Services (HHS) and is the advisor to HHS on healthcare information exchange.
- The WEDI roadmap was used as the background for the HIPAA law.
- WEDI has more than 400 members.
- WEDI's board of directors is composed of 32 members representing different industry stakeholders (providers, payers, standards organizations, etc.) to provide balance in decision making.

Summary from Q&A

- popHealth would be a workgroup within WEDI.
- The priorities for the popHealth community are to see the tool live and thrive, be sustainable, have high technical quality, and high engagement with the community.
- popHealth needs to have improved marketing to create sustainability and foster collaboration. The goal of working with a third party organization is to remove some of the administrative burden so the community can focus on the work listed above. The community would also like assistance with fundraising.
- WEDI deals with fundraising on a regular basis. They have found that the need can outweigh the pocketbook, and they have a track record of raising funds for their projects.
- The popHealth community is putting together a roadmap, but is generally looking to use popHealth for quality measurement for MU, PCMH, etc.
- popHealth has only one user group at this point. The group has helped the community get focused, but would like an organization to help them develop the popHealth roadmap.
- The timeline for transitioning is around the August/September time.
- popHealth struggles with having funding but not the skills or clinical expertise necessary to do the development. WEDI has run into this issue as well. They have addressed this by using a funding model that's a distribution model, where organizations contribute funds and consultants are hired to do the actual work. They build in regular checkups with the workgroup to ensure the consultants are building what the community wants.
- WEDI typically has a dues process for members but has made exceptions for some projects, that do not require the participants to become members of WEDI. For popHealth, they would most likely not use the member/dues model.
- WEDI would allow the workgroup to set the controls and governance they want.



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Next Steps

- popHealth community should send any additional questions for WEDI to Genevieve Morris gmorris@ainq.com.
- Meetings with additional organizations are being scheduled by Ai.