Functional & Cognitive Status Combined Subgroup Meeting

Time: Wednesday, March 11, 2020, 1:30 pm - 3:00 pm EST

Location: WebEx Meeting
Dial-in: 1-877-267-1577
Meeting ID: 998 544 485

PACIO Project Website: www.PACIOproject.org
PACIO Project GitHub: https://github.com/paciowg/PACIO-Project

This meeting is being recorded. In all discussions, members should be aware that meetings are recorded and include representatives of companies that may compete with one another in the marketplace. This working group is a public forum and therefore all information shared will be publicly available.

Summary

1) **Leadership Updates** (Dave H., MITRE)   (50 mins)
   - Refer to "2020-3-11_PACIOProject_Leadership Update.pptx"
   - Connectathon Timeline
     - Dave provided an overview of the current progress of PACIO's work.
     - PACIO is working to align with electronic Long-Term Services and Support (eLTSS), due to the similarities of their work.
     - Altarum is working on the eLTSS reference implementation and is currently reviewing the PACIO case to provide recommendations on the integration.
     - Dave provided a comparison between the eLTSS use case and PACIO use case
       - Care Plan: PACIO does not have a care plan, need to incorporate cognitive and functional status.
       - Claim: PACIO does not have a claim, need to leverage from eLTSS.
       - Condition of Services: no conflict
       - Concept of Contract: PACIO does not have a concept of a contract, need to leverage from eLTSS.
       - Coverage: PACIO does not have coverage in the use case, will need to leverage from eLTSS.
       - Sample Encounter: eLTSS does have a sample encounter, will need to provide this to them.
       - Episode of care- PACIO does not have an episode of care, need to leverage from eLTSS.
       - Goal- Both have goals, will need a way to merge these two.

- o Medication- we have medication, will need to provide this to eLTSS.
- o Observation- this is something we will need to pay attention to, as both PACIO and eLTSS have an observation. It is important to make sure it is used in a consistent way.
- o Patient- consistent
- o Practitioner-consistent
- o Questionnaire- eLTSS has a service questionnaire; PACIO has questionnaire response
- o Related person- PACIO does not have a related person, need to leverage from eLTSS.
- o Risk Assessment- PACIO does not have a risk assessment, need to leverage from eLTSS.
- o Service Request- PACIO does not have a service request, need to leverage from eLTSS.
- From a clinician perspective, Betsy Smith (PACIO) is patient you would see in a clinical situation, such as PAC. Betsy Johnson (eLTSS) is a patient you would see in a home and community-based service. When combining the two scenarios, you would represent the full spectrum. The use case content may need to be expanded in order to capture everything.
- One PACIO member recommended keeping the PACIO and eLTSS' persona's different for the connectathon and only focusing on aligning the data points.
  - o If interested in attending the eLTSS/Altarum meeting on Friday, March 13, 2020 reach out to lslater@mitre.org.
- Dave presented the Proposed architecture for HL7.
  - o It would be beneficial if PACIO could work with an EHR vendor to show how this can work. This is something to work towards for the connectathon.
- Connectathon Preparation and Recruitment
  - As PACIO is working to prepare for the May 2020 Connectathon, we are seeking assistance with various activities
    - Need clinical assistance to align the use cases
    - Need to organize a group to help generate sample data for the connectathon
      - o If interested in participating in the group, please reach out to rizvi@mitre.org
    - Technical assistance is needed for:
      - o Reviewing the IG (quality control)
      - o Develop the reference implementation
      - o Need vendors getting involved
        - Develop vendor implementations
      - o Need 3 independent IG implementations for ballot approval
      - o Testing

- Will need various testing platforms. As we get more people involved, it is important to make sure they are following the IG.
  - Timeline
    - April 3: FHIR connectathon track proposals
    - April10: implementation guide draft complete
    - May 1: reference implementation functionally complete
    - May15-17: HL7 connectathon
  - There are concerns regarding the coronavirus and being able to attend the connectathon in person. PACIO may need to consider alternative options.
    - PACIO will need to think about how we will still participate and potentially interact remotely.
    - If we do not have a connectathon under our belt, then we cannot go to ballot. Due to the new changes HL7 has implemented, the September 2020 connectathon does not count towards balloting.
- Balloting Timeline
  - May 22: FHIR resource proposal due
  - June 21: FHIR implementation guide proposal due
  - July 6: notice of intent to ballot
  - August 16- September 14: ballot open for voting
  - September 14- September 28: ballot triaging (prioritizing, categorizing, and grouping)
  - Oct-Dec 2020: ballot reconciliation (address all comments and develop responses)
  - January 2021: STU1 Ballot approval (gain approval from sponsor workgroups)
  - February 2021: publishing STU1 IG (gain approval of FHIR management group)

2) **Cognitive Status** (Rob S., ESAC)   (20 mins)
   - Rob provided an update to Mini-Cog Assessment test case
     - Upon reviewing the observation resource in FHIR, it was determined the mini-cog assessment instrument does not identify the meta data.
       - Maybe can consider adding this in the IG.
     - Observation resource uses "derived from"
       - The observation resource includes—DocumentReference, this gives us the ability to attach documents as a PDF. Clinicians agreed that this would be a nice feature to have in the IG.
     - The mini-cog assessment will allow you to retrieve each individual score.

- o Important to consider adding in the IG a method to capture the concept of the total score.
  - – Next steps: Rob will review the other cognitive assessments to determine if we will encounter further issues. Will use the IG to structure the meta data.
  - – Any proprietary concerns with exchanging information as a document?
- o PACIO will include the capability, but it is up to the users to determine if it is legal.
- o Dave will send Rob the IG to review

3) CMS Updates (Beth C., CMS)   (20 mins)
- – Jana provided an overview of the updates on the DEL
  - • The DEL has updated the search design to allow users to search for the item ID, assessment instrument, assessment section, item status, item subset, and item uses.
  - • Are there additional items you would like included as a text search or other elements in the assessment you can search for?
- – PACIO members requested adding a horizontal scroller alongside the webpage
  - • Jana confirmed this feature is in production to be added
- – PACIO members also requested adding next and previous page to the bottom of the webpage, to easily identify what page you are on.
  - • Please send additional feedback to Beth.Connor@cms.hhs.gov or lslater@mitre.org
- – eCQM will be extending the recruitment for the project TEP through Tuesday, March 31. Further information will be sent to the group later this week.
- – April 2020 Overview of the SPADEs Webinar for LTCH and IRF Providers
  - • CMS will be hosting a webinar for providers from Long-Term Care Hospitals (LTCHs) and Inpatient Rehabilitation Facilities (IRFs) on Tuesday, April 14, 2020 2:00pm-3:30pm EST
  - • For more information please read:
    - o **LTCH Quality Reporting Program (QRP) Training webpage.**
    - o **IRF Quality Reporting Training (QRP) Training webpage.**
- – CMS Interoperability and Patient Access Final Rule
- – ONC 21st Century Cures Act final rule

4) Upcoming Convening Opportunities

- Leading Age Summit will be held on June 14-16, 2020 in Washington, D.C
  - https://www.leadingage.org/Collaborative_Care_HIT_Summit

5) Next Meeting:
- Wednesday, March 18, 2020, 1.30 pm – 3 pm EST

6) Adjourn