

# Quality Data Implementation (QDI) User Group Meeting | Minutes

Meeting date | 06/21/2023 3:00 PM ET | Meeting location|Webinar <https://global.gotomeeting.com/join/980942653>

Time	Item	Presenter	Discussion/Options/Decisions
3:00-3:02 pm	Agenda	ICF	<ol style="list-style-type: none"> <li>1. Announcements and survey link</li> <li>2. QI-Core updates before September 2023 ballot <ol style="list-style-type: none"> <li>a. USCDI+ Quality and US Core and QI-Core <ol style="list-style-type: none"> <li>i. How do we reference IGs like mCode and Blue Button?</li> <li>ii. Encounter priority – using appointment or scheduling?</li> <li>iii. NutritionOrder versus NutritionIntake</li> <li>iv. AdverseEvent – is it feasible to collect information about adverse events?</li> </ol> </li> <li>b. Where are additional profiles from US Core needed? <ol style="list-style-type: none"> <li>i. Communication</li> <li>ii. Encounter priority – using appointment or scheduling?</li> <li>iii. NutritionOrder versus NutritionIntake</li> <li>iv. AdverseEvent – is it feasible to collect information about adverse events?</li> </ol> </li> <li>c. Where can harmony with US Core be achieved? <ol style="list-style-type: none"> <li>i. Patient, Organization, Practitioner, PractitionerRole, etc.</li> </ol> </li> </ol> </li> <li>3. General Discussion and Questions</li> </ol>
3:02-3:03 pm	Announcements	ICF	<ul style="list-style-type: none"> <li>• MAT and Bonnie User Group – no July meeting and August 17</li> <li>• Cooking with Clinical Quality Language (CQL) Webinar – June 22 and July 27</li> <li>• Cypress Tech Talks – July 25 and August 22</li> <li>• QDI User Group – July 19 (will reschedule – stay tuned for updates!) and August 16</li> <li>• Resource shared: <a href="https://ecqi.healthit.gov/calendar">https://ecqi.healthit.gov/calendar</a></li> </ul>
3:03-3:08 pm	US Core Roadmap	ICF	<p><u>ICF presented the US Core Roadmap showing the pattern of a new USCDI version publication each July, followed by a US Core design process and a subsequent US Core ballot each January.</u></p> <ul style="list-style-type: none"> <li>• US FHIR Core will ballot every January (note the Roadmap states US FHIR Core which is identical to what we reference as US Core).</li> <li>• Each US Core ballot reflects the results of numerous design discussions between the US Core project team and EHR vendors, EHR implementers, and other HL7 project teams and Accelerator members to assure the best fit with feasibility using the HL7 (JIRA) process with resolution on Cross-Group Projects Workgroup calls regarding the most recently published USCDI version.</li> <li>• Connect-a-thon/pilot testing precede each US FHIR Core Update Ballot.</li> <li>• Resource shared: <a href="https://confluence.hl7.org/display/CGP/US+Core+Road+Map+2023">https://confluence.hl7.org/display/CGP/US+Core+Road+Map+2023</a></li> </ul>

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3:08-3:12 pm	US Core Roadmap with QI-Core	ICF	<p><b>2023:</b></p> <ul style="list-style-type: none"> <li>ICF shared an overlay of QI-Core process on the US Core Roadmap.</li> <li>Since US Core version proposals expressed in each of the US Core ballots are subject to modification based on ballot comments in HL7 Jira and subsequent ballot reconciliation discussions, any QI-Core version based on a preceding US Core version needs to wait until the US Core version is published. That publication occurs around May of each calendar year. Hence, the QI-Core ballot preparation can begin post-US Core publication allowing a QI-Core ballot each September.</li> <li>Note, this schedule means that the current QI-Core publication (R 5.0 is based on US Core 5.0.1 which, in turn is based on USCDI version 2. The next QI-Core ballot in September 2023 will be R6.0, based on US Core 6.1.0 which is based on USCDI version 3. And the next version of USCDI publication (version 4) is expected July 2023.Hence, there is a necessary inherent lag between USCDI publication and respective HL7 standard Implementation Guides.</li> <li>Note – US Core will have an Update to address Patient.sex as ONC indicated the published version 6.0 did not address the USCDI class adequately. This US Core Update will be version 6.1.0 and should be published later this month (June 2023).</li> </ul> <p><b>2024:</b></p> <ul style="list-style-type: none"> <li>US Core is beginning design discussions regarding USCDI version 4 now and will ballot US Core version 7.0 in January 2024, publishing the reconciled version in May 2024.</li> <li>QI-Core version 6.0 is currently under design in the HL7 Clinical Quality Information (CQI) Workgroup , preparing for ballot in September 2023. Ballot reconciliation will occur post-ballot with expected completion and publication around December 2023/January 2024.</li> <li>Work on QI-Core version 7.0 will begin after US Core version 7.0 publication in May 2024.</li> </ul>
3:13-3:18 pm	mCode and Blue Button	ICF	<p><b>How do we reference IGs like mCode and Blue Button?</b></p> <ul style="list-style-type: none"> <li><u>CARIN Blue Button</u> – patient related data (especially benefits) <ul style="list-style-type: none"> <li>Would probably want to reference them as elements that may be used in a measure, but they are not necessarily part of QI-Core.</li> </ul> </li> <li><u>mCode</u> – 30 profiles addressing cancer care. <ul style="list-style-type: none"> <li>Rather than QI-Core developing a profile on top of their profile, need to look for a way to reference mCode profile directly.</li> </ul> </li> <li>The QI-Core project team is currently seeking a way to reference Blue Button and mCode along with Qi-Core in measure development and expression without creating new QI-Core profiles identical to Blue Button and mCode profiles. Discussion will progress in the HL7 CQI Calls. The next one is Friday June 23<sup>rd</sup> from 1-3 PM ET.</li> </ul>

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3:18-3:38 pm	US Core Profiles	ICF	<p><b>Formal Views of Profile Content</b></p> <p>ICF displayed the difference between the QI-Core 4.1.1 and the QI-Core 5.0 profile displays. See the <a href="#">QI-Core Encounter version 4.1.1</a> profile as an example, compared with <a href="#">QI-Core Encounter version 5.0.0</a>. The version 4.1.1 profile content display shows 5 tabs – Text Summary, Differential Table, Snapshot Table, Snapshot Table (MustSupport), and All. The version 5.0.0 profile content display shows 5 different tabs – Differential Table, Key Elements Table, Snapshot Table, Statistics/References, and All.</p> <ul style="list-style-type: none"> <li>• The Differential Table: This tab is similar in previous and current versions of the tooling. It contains what is different from the underlying profile on which the QI-Core profile is built (whether that is a US Core profile or a base FHIR Resource). In version 5.0 and subsequent versions, the tooling presents Differential Table as the first tab (previous versions showed the Differential Table as the 2<sup>nd</sup> tab).</li> <li>• Key Elements table: This is the 2<sup>nd</sup> tab in version 5.0 and it represents the same content as was present in the version 4.1.1 Snapshot Table (MustSupport); i.e., the Key Elements Table is now the 2<sup>nd</sup> tab and contains all elements that need to be supported based on (a) presence in the USCDI version applicable to the US Core and QI-Core version (for version 5, that is USCDI version 2), and (b) all elements that are additionally MustSupport because they have been used in existing CMS measure programs.</li> <li>• Snapshot Table: In the 4.1.1 version this third tab includes all possible elements present in the base resource and the respective profiles. Subsequent versions keep it as the third tab with the same content (i.e., all possible elements present in the base resource and its respective profiles). That means all elements, whether related to USCDI, identified as MustSupport, or optional elements defined by the base FHIR resource.</li> <li>• Statistics/References: This tab shows the number of elements that have MustSupport tags, all profiles references by the respective profile, and any extensions present in the profile. This tab is new in version 5.0; it was not present in previous versions.</li> <li>• All: This tab contains all content present in the other tab that can be reviewed by scrolling.</li> </ul> <p><b>Addressing USCDI in profiles</b></p> <p>Starting with version 6.1.0 US Core identifies profile elements supporting specific USCDI classes by listing them in the general text and by including (USCDI) as a tag in the element description (USCDI version 3 for US Core 6). All of these items appear in the Key Elements Table even though some do not have MustSupport flags. The reason for lacking a MustSupport flag in US Core 6.1.0 is that some Implementation Guides have approved variances indicating that for certain use cases, the element is not required. However, for routine interoperability all elements in the Key Element Table must be supported.</p> <p><b>Discussion:</b></p> <p>Attendees asked what tab a measure developer should use to understand what is MustSupport and USCDI-related such that it will provide some guidance about what EHR implementers might be able to support. ICF noted that prior versions of QI-Core used the approach of identifying all elements that any measure developer required to address existing and/or pipeline measures. Such elements are listed as MustSupport in</p>

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3:18-3:38 pm	US Core Profiles (cont.)	ICF	<p>QI-Core versions 5.0.1 and prior versions. The approach expected that any measure implementer/reporter could review the QI-Core version used in a measure program and enable access to all content identified as MustSupport, even if only 1 measure might use that element or if no existing measures use such a MustSupport element included to address future needs. However, there is no published regulatory requirement to support QI-Core content, nor is there a conformance test to assure that a product is compliant with QI-Core. Therefore, vendors and implementers will test and conform to respective regulatory-driven versions of US Core but not to any version of QI-Core.</p> <p>ICF proposed that starting with QI-Core version 6.0, the process should reverse the prior assumptions and base profiles on US Core or limited requirements for profile built in FHIR resources not included in US Core, requiring MustSupport only for proven or commonly used elements in profiles. This change means that the measures become the drivers of what must be supported to process the measure content and report. Specific elements used successfully in measures thus drive future versions of QI-Core rather than QI-Core driving the measure capabilities.</p> <p>Attendees seemed comfortable with the information that the Key Elements Table will represent the most common elements for use in measure expression, while understanding that other essential elements can be used for testing, evaluation, and inclusion in measures if they are required to fully meet measure intent.</p> <p>ICF suggested that once USCDI+ Quality is published, QI-Core might add the tag (USCDI+ Quality) to all elements published. However, until such time as the current draft USCDI+ Quality is published, most elements can be included in the Key Elements Table after a one-by-one review as the ballot preparation proceeds.</p>
3:38-4:02 pm	Additional Profiles from US Core	ICF	<p><b>Where are additional profiles or elements in addition to US Core needed?</b></p> <p>ICF presented some profiles and elements to initiate attendee consideration. While the presentation addressed each of the following topics, discussion was limited as there were few, if any, implementers on the call and the intent of the topic was to start dialogue.</p> <ul style="list-style-type: none"> <li>• Communication <ul style="list-style-type: none"> <li>○ Is this something that is feasible and that could support measures? Communication has been used to address referral management, including receipt of required content in referral reports but there are other opportunities to express such information requests.</li> </ul> </li> <li>• Encounter priority <ul style="list-style-type: none"> <li>○ Using appointment or scheduling? Discussions with Patient Care and other HL7 Workgroups have suggested looking for the priority of an encounter by using the Appointment or the Scheduling resources in FHIR. Consideration of such profiles in QI-Core might be worthwhile. Note, that Procedure priority is available in QI-Core.</li> </ul> </li> <li>• <u>NutritionOrder</u> versus <u>NutritionIntake</u> <ul style="list-style-type: none"> <li>○ <u>NutritionOrder</u> doesn't have good use case, should we remove it?</li> <li>○ It is possible to create an extension in QI-Core that references <u>NutritionIntake</u> – extension for R4 of FHIR (will be identical to FHIR R5)</li> </ul> </li> </ul>

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3:38-4:02 pm	Additional Profiles from US Core (cont.)	ICF	<ul style="list-style-type: none"> <li>○ The current measure considering this resource intends to assure that newborns in the hospital receive exclusive breast milk feeding (and nothing else). The measure has used Procedure and the measure developer has considered evaluating NutritionResource. The measure developer indicated the Event resource might be appropriate although Event is not including in QI-Core thus far. If baby was fed breast milk during the encounter, there is need code for action code, and then occurrence representing the time.</li> <li>○ Will continue discussions offline.</li> <li>● AdverseEvent <ul style="list-style-type: none"> <li>○ Is collection of this item feasible?</li> <li>○ Often, AdverseEvents are captured as known events in a risk management system but they are not expressly identified as adverse events in the clinical record.</li> <li>○ Perhaps measures to look for an occurrence of something (observation, lab result, etc.) that occurs after a potentially causative event, e.g., a medication administration or procedure, and a subsequently resulting condition occurs. <ul style="list-style-type: none"> <li>▪ Can look for all of that without using the AdversEvent profile.</li> </ul> </li> <li>○ Will discuss this further in the CQI Work Group call.</li> </ul> </li> </ul> <p><b>Discussion:</b> This topic generated limited discussion, but it did initiate consideration and further follow-up will occur in the HL7 CQI Workgroup discussions of HL7 Jira trackers on QI-Core.</p>
4:02-4:05 pm	Harmony with US Core	ICF	<p><b>Where can harmony with US Core be achieved?</b></p> <ul style="list-style-type: none"> <li>● Is there a reason that QI-Core needs to have its own profile for basic items, or can we use US Core Profile? <ul style="list-style-type: none"> <li>○ Patient, Organization, Practitioner, PractitionerRole, RelatedPerson, etc</li> </ul> </li> <li>● Will take some one-on-one review to see what is missing but could be reasonable to deal with just what US Core has.</li> <li>● Will investigate this further in the HL7 CQI Work Group call.</li> </ul>
4:05-4:24 pm	General Discussion and Questions	ICF	<ul style="list-style-type: none"> <li>● Is there room for some sort of US Core/QI-Core hybrid?</li> <li>● If you take QI-Core to be this interface between Measure Developers and Data Sources, need to try and get some kind of alignment on what measure developers on one side will need and use, and what data sources on the other side will provide and be able to do.</li> <li>● Need to retrench and start with something that we can agree on that is available right now so that measure developers have an accurate picture of what they can use and where they might want to have discussions about including more.</li> </ul>

Time	Item	Presenter	Discussion/Options/Decisions
4:25-4:30 pm	Conclusion	ICF	<ul style="list-style-type: none"> <li>Agenda items for updated QDI user group meeting <ul style="list-style-type: none"> <li>Contact us at <a href="mailto:gdm@icf.com">gdm@icf.com</a></li> </ul> </li> <li>Next user group meeting - The regularly scheduled date is coincident with the CMS FHIR Connectathon. Therefore, the date for the next QDI User Group Meeting will be moved. <ul style="list-style-type: none"> <li>Original meeting date: July 19, 3:00pm – 4:30pm ET</li> <li>New meeting date: July 12, 2023, 3:00pm – 4:30pm ET</li> </ul> </li> </ul>

### Invitees/Attendees:

Attended	Name	Organization
N/A	Abrar Salam	The Joint Commission
X	Alannah Marsh	Mathematica
N/A	Alex Lui	Epic
N/A	Allison Lance	Oracle
N/A	Alyson Narveson	Nebraska Health Network
N/A	Amanda Grant	NCQA
N/A	Andrea Stewart	New Hampshire DHHS
N/A	Andy Kubilius	The Joint Commission
X	Angela Flanagan	Lantana
N/A	Angela Knox	AdvancedMD
N/A	Angie Washam	Community Health of East Tennessee
N/A	Ann-Marie Dunn	Cerner
N/A	Ann Philips	NCQA
N/A	Anna Bentler	The Joint Commission
N/A	Anna Little	HCA Healthcare
N/A	Anne Coultas	All Scripts
N/A	Anne Smith	NCQA
N/A	Amira Elhagmusa	Battelle
N/A	April Spears	DHCFP
N/A	Beatriz Espinoza	DHS LA County
N/A	Ben Hamlin	NCQA
N/A	Beth Bostrom	AMA
N/A	Bijal Desai	Northwestern Medicine
N/A	Brian Blaubeux	Northern Westchester Hospital

Attended	Name	Organization
N/A	Lakisha Johnson	Catholic Health
N/A	Latasha Archer	NCQA
N/A	Laura Kramer	NCQA
N/A	Laura Myers	The Orchards Michigan
N/A	Laura Pearlman	The Orchards Michigan
N/A	Laurie Wissell	Allscripts
N/A	L Dejesus	Informedika
N/A	Lisa Anderson	NCQA
N/A	Lissinia La	Redlands Hospital
N/A	Lizzie Charboneau	MITRE
N/A	Lucilia Pereira	Southcoast
N/A	Lillian Guffey	Ascension Health Alliance
N/A	Lolita Jones	iQueryData
N/A	Lynn Perrine	Lantana
N/A	Maggie Lohnes	IMPAQ
N/A	Marcella Harker-Jones	CDC
N/A	Maria-Teresa King	ACS
N/A	Marc Hadley	MITRE
N/A	Marc Hallez	The Joint Commission
N/A	Marc Overhage	Cerner
N/A	Margaret Dobson	Zepf Center
N/A	Margaret Dittloff	Junum
N/A	Matt Hardman	Unknown
X	Marilyn Parenzan	The Joint Commission



Attended	Name	Organization
N/A	Bridget Blake	MITRE
N/A	Bryn Rhodes	ICF
N/A	Carolyn Anderson	Primary care practice
N/A	Cathy Duke	Greenway Health
N/A	Chana West	CDQ Solutions
N/A	Chris Moesel	MITRE
N/A	Cindy Hartmann	BCBSFL
N/A	Cindy Lamb	Telligen
N/A	Claudia Hall	Mathematica
N/A	Connie Tyre	BCHSI
N/A	Corrie Dowell	BSW Health
N/A	Dalana Ostile	Providence Health Systems
N/A	Dawn Lane	Covenant Health
X	Dave Mishler	Care Evolution
N/A	David Clayman	Allscripts
N/A	David Conger	Southwest Network
X	David Czulada	Mitre
N/A	Debbie Gibson	Psych
N/A	Deidre Sacra	McKesson
N/A	Doug Goldstein	Epic
X	Dorothy Lee	NCQA
N/A	Esther Ndemo	American Academy of Neurology
N/A	Evelyn Cody	Mathematica
N/A	Fallon Howell	Western Wayne Family Health Centers
N/A	Fern McCree	NCQA
X	Floyd Eisenberg	ICF
N/A	Gary Parker	Alabama Medicaid
N/A	Gary Rezik	QIP
N/A	Ganesh Shanmugam	Glenwood Systems
N/A	Gayathri Jayawardena	ICF
N/A	Gerald Angel	HOAG
N/A	Grace Glennon	Yale CORE
N/A	Greta Kessler	Unknown
N/A	Howard Bregman	Epic
X	Hugo Andrade	Mathematica
X	Jamie Reinert	-

Attended	Name	Organization
N/A	Maritza Espada	Pan Menonita
N/A	Martha Radford	NYU
N/A	Matthew Dugal	Dynamic Health
X	Melissa Breth	-
N/A	Melody Hall-Ramirez	DHCFP
N/A	Mia Nievera	The Joint Commission
N/A	Michael Jung	ClaraPrice
N/A	Michael Mainridge	Unknown
N/A	Michael Ryan	NCQA
N/A	Mike Nosal	MITRE
N/A	Michelle Benz	Edifecs
N/A	Michelle Dardis	Mathematica
N/A	Michelle Hinterberg	MediSolv
N/A	Michelle Lefebvre	IMPAQ
N/A	Mike Shoemaker	Telligen
N/A	Misty Carruth	Holy Cross Hospital-Taos
N/A	Nancy Rapada	Flagler Hospital
N/A	Nayaab Baig	NCQA
N/A	Neelam Zafar	The Joint Commission
N/A	Nicole Boland	Taos Hospital
N/A	Nicole Hunter	Semantic Bits
N/A	Pamela Mahan-Rudolph	Memorial Hermann
X	Paul Denning	MITRE
N/A	Paul Lee	DHCS
X	Peter Muir	ICF
N/A	Piper Ranallo	AAN
N/A	Prem Sahgal	PIH Health
N/A	Qainta Harris	Arise Medical Center
N/A	Rachel Buchanan	Oregon Urology
N/A	Rachelle Zribi	Yale
N/A	Raj Mann	My Harmony Health
N/A	Rajvi Shah	Unknown
X	Raquel Belarmino	Unknown
N/A	Rayna Scott	PCPI
N/A	R Swaineng	Swaineng Associates
N/A	Rebecca Baer	NCQA





Attended	Name	Organization
N/A	Jana Malinowski	Cerner
N/A	Janelle Capo	Flagler Health
N/A	Janna Sartin	Girard Medical Center
X	Jay Frails	Meditech
N/A	Jeffrey J Geppert	Battelle
N/A	Jen Seeman	ICF
X	Jenel Lansang	Mathematica
N/A	Jennifer Distefano	All Scripts
N/A	Jill Shuemaker	VCU Health
N/A	Jim McKinley	Alabama Medicaid
N/A	John Carroll	The Joint Commission
N/A	John Lujan	Kaiser Permanente
N/A	Jessica Smails	Caradigm
N/A	Joan Brown	Bowen Center
N/A	Joan Preston	Central Health
N/A	Joanna Elhaddi	HSAG
X	Joanna Ramsaier	ICF
N/A	Jodi Jensen	St. Peter's Health
N/A	Joanne Zhou	Hospital for Special Surgery
N/A	Joe Bormel	Cognitive Medicine
N/A	Joel Roberts	Piedmont
N/A	Joseph Kunisch	Memorial Hermann
N/A	Johanna Ward	Mathematica
N/A	Jorge Belmonte	PCPI
N/A	Jory Hatton	ClaraPrice
N/A	Joyce Parsons	Steward
N/A	Julia Dawson	The Joint Commission
N/A	Julie-Marie Lebbie	Common Spirit
X	Juliet Rubini	Mathematica
N/A	Justin Schirle	Epic
N/A	Justin Smith	MN South Country Health Alliance
X	Karen Levin	Pomona Valley Hospital Medical Center
X	Karen McLaughlin	MediSolv
X	Karl	MITRE
N/A	Kat Sobel	NCQA
N/A	Katie Magoullick	IMPAQ

Attended	Name	Organization
N/A	Rebecca Swain-Eng	Swain Eng Associates
N/A	Renee Mann	EM Healthcare
N/A	Rhonda Schwartz	ICF
N/A	Regina Beach	ERP International
N/A	Rhonda Smith	Novant Health
N/A	Rhett Partin	Georgia Hospital Association
X	Rob McClure	MD Partners
N/A	Robin Kaiser	SoftDevInc
N/A	Rose Almonte	MITRE
N/A	Roxanne Williams	BV Health System
N/A	Ruth Dalgetty	Johns Hopkins Medicine
N/A	Ruth Gatiba	Battelle
N/A	Ryan Clark	NCQA
N/A	Samuel Benton	NCQA
N/A	Sandi Mitchell	JPSYS
N/A	Sarah Sims	My Patient Insight
N/A	Sera Gearhart	Mathematica
N/A	Sethuraman Ramanan	Cognizant
N/A	Sharon Hibay	Advanced Health Outcomes
N/A	Sherri Repsher	Good Shepherd Rehabilitation
N/A	Sheila Aguilar	TJC
N/A	Shellie T	Unknown
N/A	Stan Rankins	Telligen
N/A	Stephen Williams	Mon Health System
N/A	Susan Wisnieski	Meditech
N/A	Sweta Shah	NCQA
N/A	Syed Zeeshan	eDaptive Systems
N/A	Tammy Kuschel	McKesson
N/A	Teresa D Barker	CHH Grove
X	Terra Stump	Mathematica
N/A	Thoma Hudson	Parkview
N/A	Tom Dunn	Telligen
N/A	Traci Psihas	ICF
N/A	Valery Andino	Altera Health
N/A	Veronica Dunlap	HSAG
N/A	Veronica Kirchner	WellSpan





Attended	Name	Organization
N/A	Karen McLaughlin	Medisolv
N/A	Kathy Huska	WellSpan
N/A	Kelly Burlison	Heart
N/A	Kim Dillon	King's Daughters Health System
N/A	Kim Lussier	Holy Oke Health
N/A	Kimberly Smuk	Mathematica
N/A	KP Sethi	Lantana
N/A	Kris Done	Lantana

Attended	Name	Organization
N/A	Vivian Steinmetz	St. Joseph's Wayne Hospital
N/A	Wendy Holmes	New Hanover Regional Medical Center
N/A	Wendy Wise	Lantana
X	Yan Heras	ICF
X	Yanyan Hu	The Joint Commission
N/A	Yiscah Bracha	RTI
N/A	Yvette Apura	ASCO
N/A	Zahid Butt	MediSolv