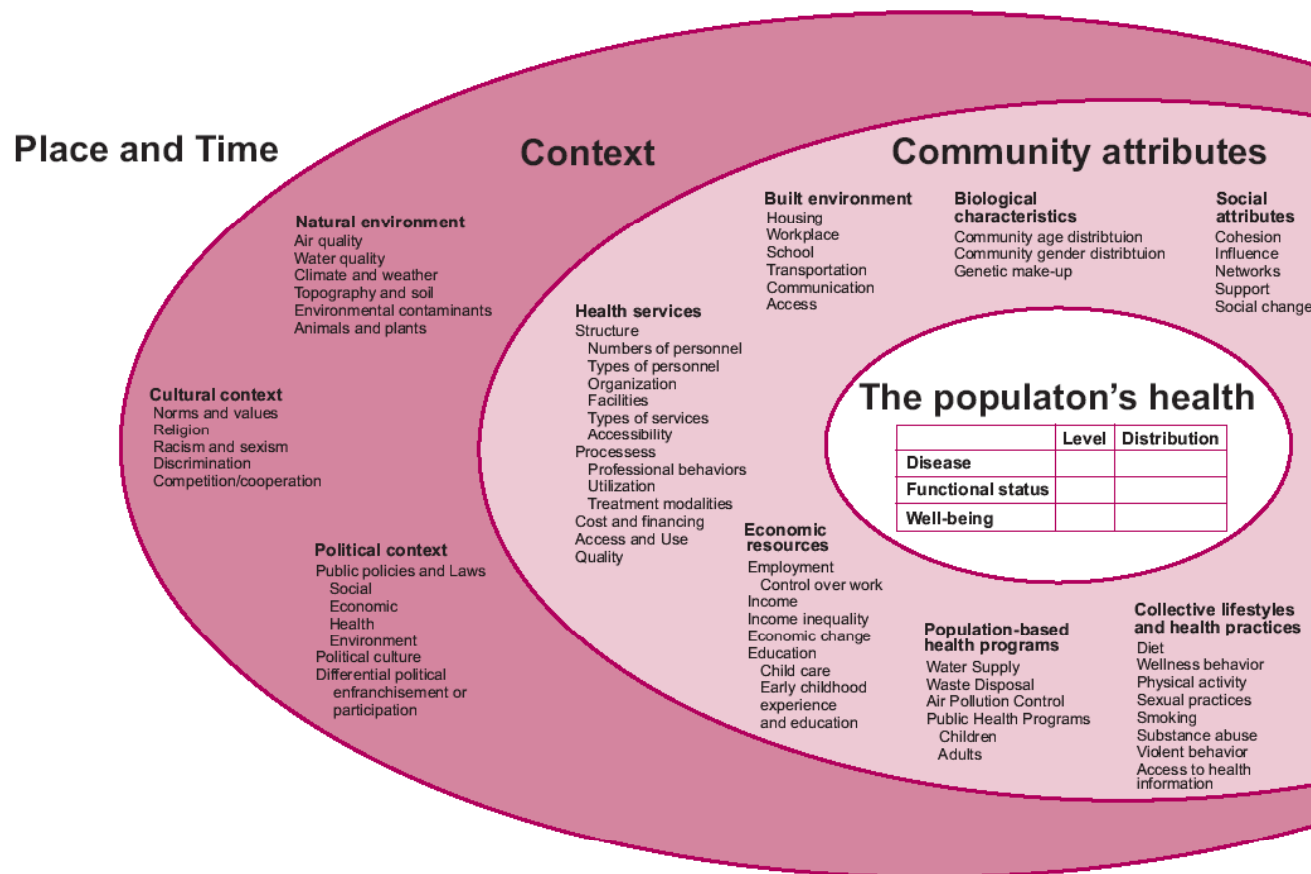


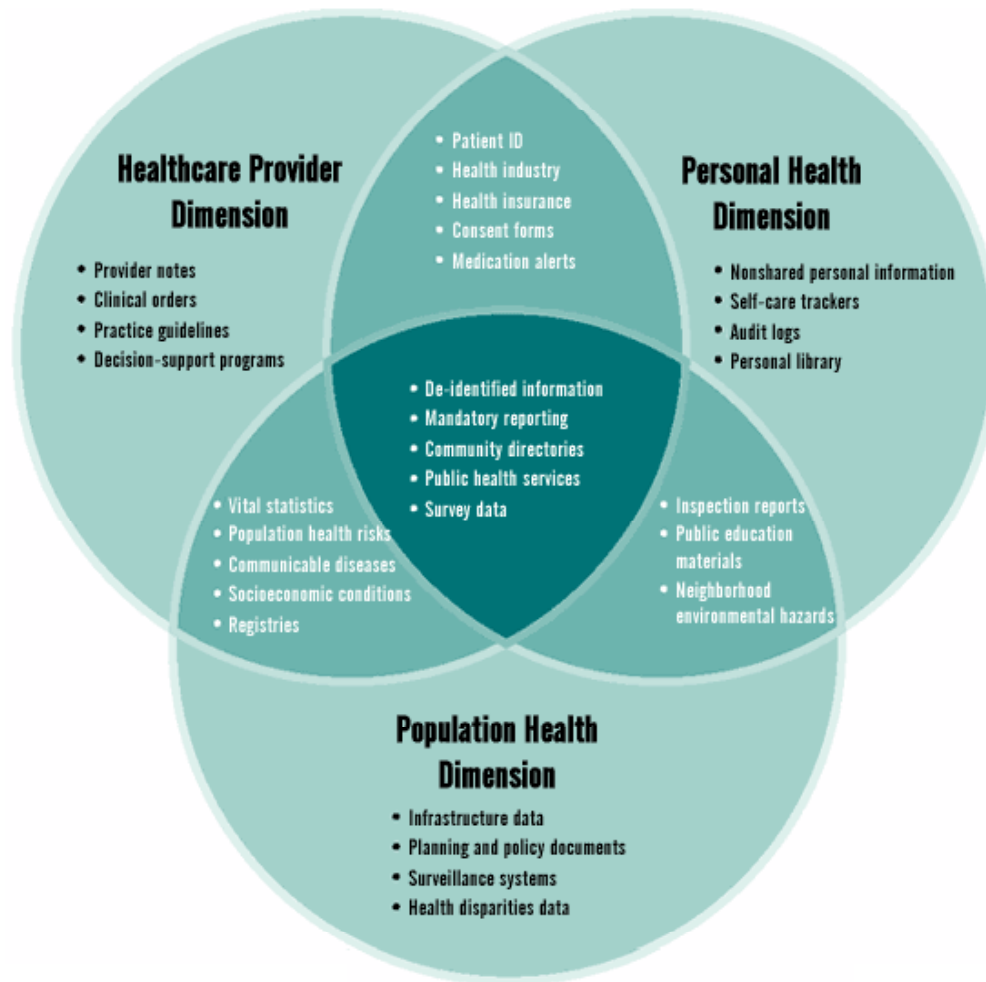
**NCVHS Executive  
Subcommittee Retreat**  
*Overview and Talking Points*

11/30/10

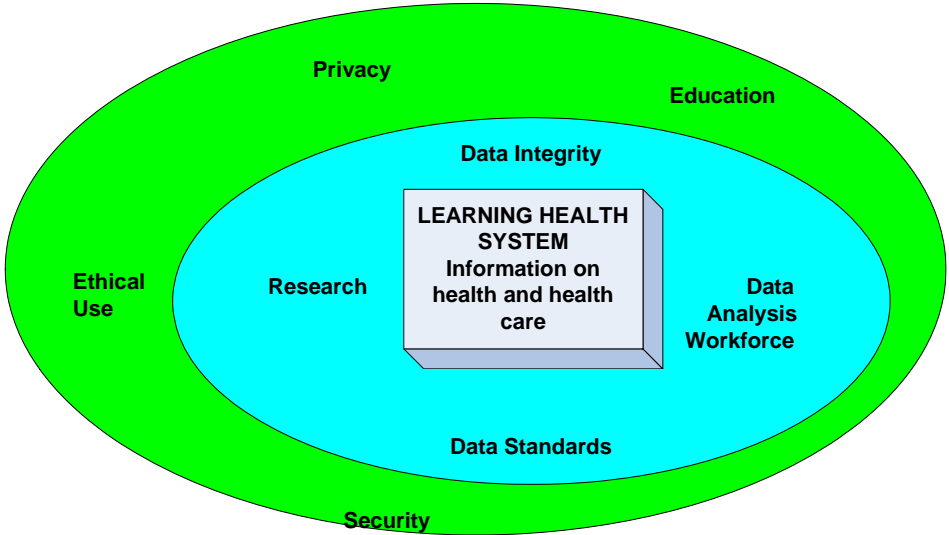
# Shaping a Health Statistics Vision for the 21<sup>st</sup> Century



# Shaping a Health Statistics Vision for the 21<sup>st</sup> Century



# HEALTH DATA STEWARDSHIP



<b>Health data sources</b>	Manually abstracted data	Claims data	ICD 9 Discharge data	Electronic health record	Personal health record	New data sources	Data.gov	State Public Health & Vital Statistics	Research
<b>Examples</b>	Core measures	HEDIS measures	PS indicators Quality indicators	Lab, Meds, Problems, Allergies, etc		Device generated data	Community Data Initiative "Mashups"	Public health surveillance	CaBig
<b>Involved Workgroups</b>	CMS, Joint Commission, NQF	NCQA	AHRQ	ONC Policy Committee			Chief Technology Officer, OSTP	NCHS CDC	NCI
				ONC Standards Committee				Board of Sci Counselors	
				AHIC successor					

# NCVHS History on Health Data Stewardship

**1997**

Health Privacy and Confidentiality recommendations

**2007**

Enhanced Protections for Uses of Health Data: A Stewardship Framework for "Secondary Uses" of Electronically Collected and Transmitted Health Data

**2010**

Toward Enhanced Information Capacities for Health

**2002**

HIPAA Privacy Rule

**2009**

Health Data Stewardship: An NCVHS Primer



# NCVHS Legislative Mandates

## Letters and Reports to the Secretary Congress

**1996**

**HIPAA enacted**  
 NCVHS charged with making recommendations to the Secretary about HIPAA

**1998**

1<sup>st</sup> Annual report to Congress on HIPAA

**2000**

3<sup>rd</sup> Annual report to Congress on HIPAA  
 Recommendations on NPRM for privacy stds

**2002**

5<sup>th</sup> Annual report to Congress on HIPAA  
 Privacy and confidentiality regs  
 PMRI stds  
 Modifications to original stds

**2004**

6<sup>th</sup> Annual report to Congress on HIPAA  
 Claims Attachment  
 Effect of Privacy Rule  
 1<sup>st</sup> set of E-Rx recommended standards  
 UB04 POA recommendation

**2006**

HIPAA lessons learned  
 CHI standards  
 NPI implementation  
 NDC code

**2008**

E-Rx of controlled substances  
 Sensitive data on NHIN

**2010**

9<sup>th</sup> report to Congress on HIPAA  
**Accountable Care Act enacted**  
 NCVHS charged with health plan identifier and operating rules

**1997**

Identifiers for:  
 •Individuals  
 •Providers  
 •Health Plans  
 Privacy  
 Standards for admin. transaction message and data content

**1999**

2<sup>nd</sup> Report to Congress on HIPAA  
 Update on HIPAA

**2001**

4<sup>th</sup> Annual report to Congress on HIPAA  
 NDCs  
 Administrative simplification final rules  
 Industry readiness  
 Privacy: Consent and Minimum Necessary

**2003**

ICD-10  
**Medicare Modernization Act enacted**  
 NCVHS charged with making E-prescribing standards

**2005**

7<sup>th</sup> Annual report to Congress on HIPAA  
 2<sup>nd</sup> set of E-Rx standards  
 NCPDP recommendation  
 Claims attachment

**2007**

8<sup>th</sup> Annual report to Congress on HIPAA  
 NPI  
 Revisions to HIPAA transaction stds  
 Privacy  
 Stewardship for 2<sup>nd</sup>ary use of data

**2009**

HIT Meaningful Use Hearings Summary  
 NCPDP 10.6 for E-Rx

# The Patient Protection and Affordable Care Act

*(ACA) (Sec. 1104. (g)(3)), March 23, 2010*

Directs the Secretary to consider recommendations for operating rules developed by a qualified nonprofit entity that focuses on administrative simplification, demonstrates a multi-stakeholder consensus process and meets other specified criteria.

## *Review and recommendations.*

The National Committee on Vital and Health Statistics (NCVHS) to advise the Secretary as to whether the nonprofit entity meets the specified requirements, review operating rules developed by the nonprofit entity;

determine whether the rules are consistent with other existing standards and represent a consensus of stakeholders;

Evaluate whether the rules are consistent with electronic standards adopted for HIT, and make a recommendation to the Secretary regarding adoption.

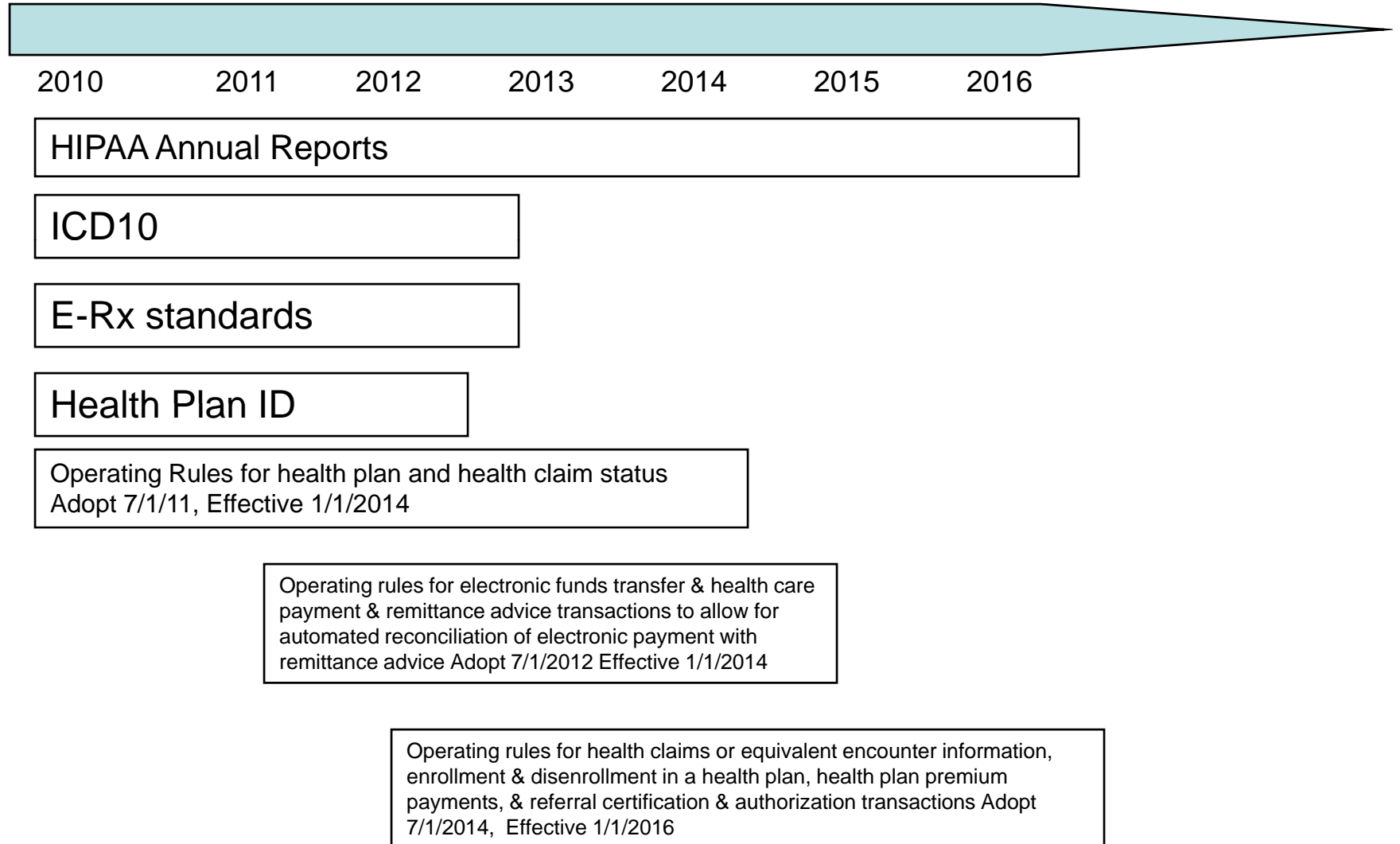
Following consideration of the rules developed by the nonprofit entity and the NCVHS recommendations

and having ensured consultation with providers,

the Secretary to adopt rules applying any standard or operating rule recommended by the NCVHS through an interim final rule,

and consider public comments for 60 days after publication.

# Standards Initiatives





**60<sup>th</sup> Anniversary Symposium**  
**Toward Enhanced Information**  
**Capacities for Health**

Harry Reynolds

June 17, 2010

# What An Exciting Time

- Health Care Reform and Stimulus Legislation Accelerate Change
- Unprecedented Opportunity to Improve Health Care and Health in the U.S.
- The Future Depends on Robust Health Information Capacities

# What An Exciting Time

- The Future Relies on Data That Are:
  - Easy to Generate
  - Used at the front Lines of Care
  - Easy to Reuse, Manipulate and Link
  - Secure and Private
  - Generated from New and Existing Sources

# **Health Information Capacities**

- Public Sector has led Health Information Efforts for Years
- HIPAA (1996) marked Renewed Emphasis on Health Information
- ARRA (2009) Elevated the Focus again
- NCVHS Supports that Focus

# **Health Information Capacities Support Broad Array of Uses and Purposes**

- Patient Safety
- Payment Policy
- Health Insurance Operations
- Elimination of Health Disparities
- Monitoring Population Health
- Health Services Research
- Clinical Research

# **Health Information Capacities Support Broad Array of Uses and Purposes**

- Population health improvement
- Access to Affordable and Efficient Quality Health Care
- Clinician Care Delivery
- Care Coordination
- Empowered and Engaged Patients and Consumers
- Building patient trust

# Key Health Information Goals

- Accessibility and Availability of Information
  - Public Health and Health Care Integration
  - Share Common Information Sources
  - Inclusion of Information on Environment, Housing, Education, Nutrition, Economic and other Influences
  - Timeliness
  - Geographic Specificity

# Key Health Information Goals

- Standardization
  - Ensure Efficient, Secure, Safe and Effective Health Information Exchange
  - Create a Common and Evolving National Pathway for Improved Information Capacities
  - Incorporate Data, Formats, Policies and Operating Rules
  - Support Key Initiatives like Meaningful Use, Certification of HIT and Improved Information Content and Reporting



# Key Health Information Requirements

- Privacy, Confidentiality, Security
  - Required Dependencies for Primary and Secondary Uses
    - Appropriate Uses of Information
    - Meeting Personal Expectations of Trust
    - A Practical Consent Mechanism
    - A Data Stewardship Mentality
    - Enforceable Governance over Entities Exchanging Health Information

# The Way Forward

- The Path is Cleared (legislation etc.)
- Considerable Urgency Exists
- Federal Leadership is Necessary
- New Approaches must be Explored
- Research, Demonstrations and Investments are Important
- Data Resources-a must

# Summary

- Opportunities Abound to Make a Real Difference
- Health Information is a prominent Factor in Future Enhancement of Health Care and Health
- NCVHS is Prepared and Enthusiastic to Enter its next 60 Years assisting HHS to make a Better US Health System and Improve Overall Population Health.