



Managing Information Privacy & Security in Healthcare

The Healthcare Information Technology Standards Panel (HITSP)

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Executive Summary/Key Points:

- The Healthcare Information Technology Standards Panel (HITSP) was founded on Oct. 6, 2005 with the announcement of an award of a federal contract by the Department of Health and Human Services (HHS), through the Office of the National Coordinator for Health IT (ONC).
- Currently, HITSP includes 242 different member organizations and is administered by a Board of Directors. The membership includes:
 - 16 Standards Development Organizations (SDOs) (8%)
 - 197 Non-SDOs (79%)
 - 19 Government bodies (8%)
 - 10 Consumer groups (5%)
- In year 1, HITSP was tasked with harmonizing health interoperability standards for three specific situations ("use cases"):
 - Electronic Health Records
 - Biosurveillance
 - Consumer Empowerment
- As of December 2006, the current versions of the Interoperability Specifications for each of the initial three Use Case have been approved by the HITSP, forwarded to the Secretary of HHS by the American Health Information Community (AHIC), and accepted by the Secretary. These version 1.2 Interoperability Specifications are considered Ready for Implementation.

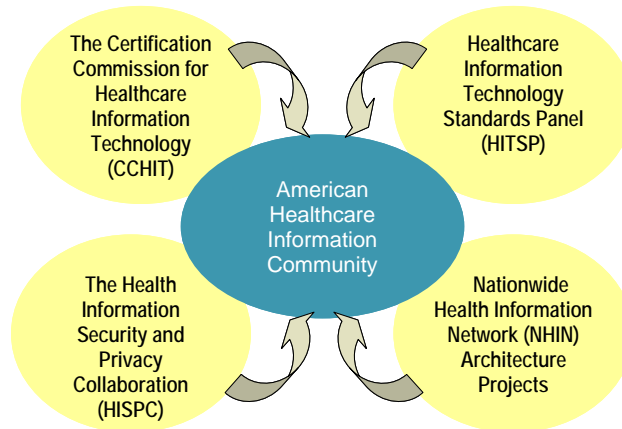
The Interoperability Specifications may be found at:

<http://publicaa.ansi.org/sites/apdl/Documents/Forms/AllItems.aspx?RootFolder=%2fsites%2fapdl%2fDocuments%2fStandards%20Activities%2fHealthcare%20Informatics%20Technology%20Standards%20Panel%2fInteroperability%20Specification%2fReady%20for%20Implementation%20Testing&View=%7b21C60355%2dAB17%2d4CD7%2dA090%2dBABEEC5D7C60%7d>

Background

AHIC¹ was federally chartered in 2005 as a commission made up of leaders from public and private health sectors, formed to provide recommendations on how to make health records digital and interoperable, and assure that the privacy and security of those records are protected, in a smooth, market-led way.

At the same time, the Department of Health and Human Services, through the Office of the National Coordinator for Health IT (ONC) awarded contracts to 1) identify interoperability standards to facilitate the exchange of patient data (HITSP), 2) define a process for certifying that health IT products comply with appropriate standards through the Certification Commission for Healthcare Information Technology (CCHIT), and 3) develop a series of prototypes to establish the requirements of a Nationwide Health Information Network (NHIN). These activities share the goal of widespread adoption of interoperable electronic health records within 10 years through public-private collaboration.



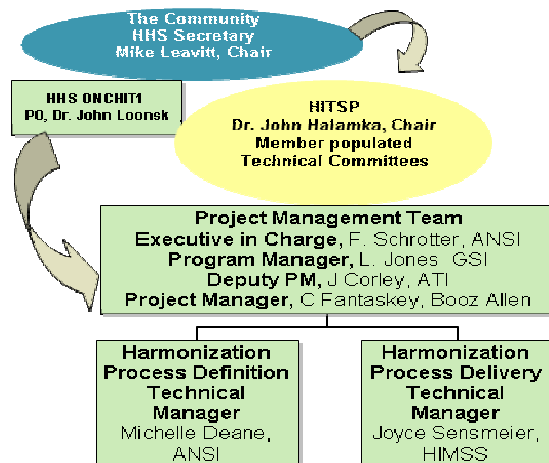
HITSP²

The mission of the Healthcare Information Technology Standards Panel (HITSP) is to serve as a cooperative partnership between the public and private sectors for the purpose of achieving a widely accepted and useful set of standards specifically to enable and support widespread interoperability among healthcare software applications, as they will interact in a local, regional and nationwide health information network for the United States.

The HITSP is managed by the American National Standards Institute (ANSI) in cooperation with strategic partners such as the Healthcare Information and Management Systems Society (HIMSS), the Advanced Technology Institute (ATI) and Booz Allen Hamilton.

¹ <http://www.hhs.gov/healthit/ahic.html>

² www.hitsp.org



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HITSP functions as a partnership of the public and private sectors and operates with a neutral

and inclusive governance model administered by the American National Standards Institute. The goal of the Panel is to:

- Facilitate the development of harmonized Interoperability Specifications (IS) and information policies, including Standards Development Organization (SDO) work products (e.g. standards, technical reports). These policies, profiles and work products are essential for establishing privacy, security and interoperability among healthcare software applications,
- Coordinate, as appropriate, with other national, regional and international groups addressing healthcare informatics to ensure that the resulting standards are globally relevant,
- Be "Use Case" driven, as specified by AHIC, using information from stakeholders and basing decisions on industry needs.

As used by HITSP, the term "standard" refers, but is not limited to:

- Specifications
- Implementation Guides
- Code Sets
- Terminologies
- Integration Profiles

The work products of HITSP are developed through formally chartered Technical Committees of volunteer members. The artifacts of the Technical Committee activities are an Interoperability Specification (IS) and related documents that contain specificity as to how to use the standard in implementation level guidance.

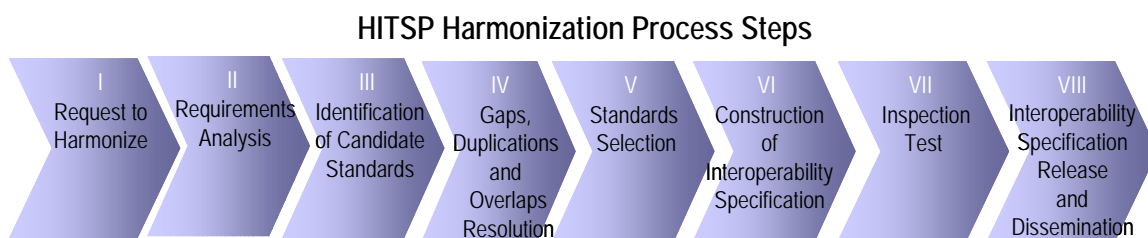
Year 1 Tasks:

For its first year (October 1, 2005 through September 30, 2006), the HITSP Project Team was charged with completing eleven tasks that focus on developing and approving a harmonization process to be used for future harmonization efforts:

1. Comprehensive Work Plan
2. Conduct a Project Start Up Meeting
3. Deliver Recommended Use-Cases

4. Participate in related meetings and activities, including the AHIC Meetings
5. Develop a Gap Analysis
6. Standards Selection, Evaluations and Testing
7. Define a Harmonization Approach
8. Develop Interoperability Specifications
9. Develop and Evaluate a Business Plan for the self-sustaining processes
10. Submit Monthly Reports – ongoing efforts
11. Assist with communications – ongoing efforts

The resulting Use Case-driven, 8-step HITSP harmonization process is depicted in the figure below.



Year 1 Use Cases:

The American Healthcare Information Community charged the HITSP with harmonizing health interoperability standards for three specific situations:

- ***Electronic Health Records:*** Allow ordering clinicians to electronically access laboratory results, and allow non-ordering authorized clinicians to electronically access historical and other laboratory results for clinical care.
- ***Biosurveillance:*** Transmit essential ambulatory care and emergency department visit, utilization, and lab result data from electronically enabled health care delivery and public health systems in standardized and anonymized format to authorized Public Health Agencies with less than one day lag time.
- ***Consumer Empowerment:*** Allow consumers to establish and manage permissions access rights and informed consent for authorized and secure exchange, viewing, and querying of their linked patient registration summaries and medication histories between designated caregivers and other health professionals.

Steps 1- 5 were executed for these three use cases:

Tier 1 Standards Readiness Criteria were used to filter candidate standards:

- The standards required to support each major Use Case event were organized within an agreed upon standards taxonomy

- The standards selected for inclusion in the pool were examined using 'HITSP approved' Tier 1 Harmonization Readiness Criteria
- Standards in the pool were then considered for inclusion in the Interoperability Specifications by application of the Tier 2 Harmonization Readiness Criteria

Then, Tier 2 Standards Readiness Criteria were applied:

- Suitability
 - The standard is named at a proper level of specificity and meets technical and business criteria of use case
 - Compatibility
 - The standard shares common context, information exchange structures, content or data elements, security and processes with other HITSP harmonized standards or adopted frameworks as appropriate
 - Preferred Standards Characteristics
 - Approved standards, widely used, readily available, technology neutral, supporting uniformity, demonstrating flexibility and international usage are preferred
 - Standards Development Organization and Process
 - Meet selected criteria including balance, transparency, developer due process, stewardship and others.
 - Total Costs and Ease of Implementation
 - Deferred to future work
-
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Future Work:

In early 2007, HITSP formed a new **Security and Privacy Work Group (SPWG)** with 58 HITSP members volunteering to participate as representatives from the HITSP Care Delivery (formerly EHR), Population Health (formerly Biosurveillance) and Consumer Empowerment Technical Committees.

The SPWG will address previously deferred items relating to Security and Privacy as pertaining to the existing Use Cases for Biosurveillance, Consumer Empowerment and Electronic Health Records. Specifically, the focus of the SPWG efforts will be on supplementing the Interoperability Specifications and supporting constructs with additional detail relating to Security and Privacy.

In addition, HITSP received the new "Emergency Responder Electronic Health Record Use Case" from AHIC and anticipates receiving additional Use Cases from AHIC this year.

See www.hitsp.org for up-to-date information. As well, the HITSP chapter of the HIMSS Privacy and Security Toolkit will be updated quarterly