

**Public Health Data Standards Consortium
Conference Call
December 15, 1998
3:00 – 5:00 pm**

Minutes

Conference Call Participants

Marjorie Greenberg, National Center for Health Statistics (NCHS)

Hetty Khan, NCHS

Charles Rothwell, NCHS

Robert Davis, New York State

Michael Stafford, Association of Health Services Research

Joy Herndon, Centers for Disease Control and Prevention (CDC)

Gail Janes, CDC

Pam Akinson, NAPHIS

Stanley Nachimson, Health Care Financing Administration

Roxanne Andrews, California Office of Statewide Health Planning and Development

Denise Love, NAHDO

James Jerry Gibson, South Carolina Department of Health and Environmental Control

Ronald Fichtner, CDC

Daniel Friedman, National Committee for Vital and Health Statistics

Meade Morgan, CDC

Eileen Salinsky, The Lewin Group

Amy Andersen, The Lewin Group

Call to Order and Review of Agenda

Marjorie Greenberg served as facilitator of the conference call. She welcomed participants and described the rationale for the conference call as a follow up from the November 2 – 3, 1998 workshop entitled, “The Implications of HIPAA’s Administrative Simplification Provisions for Public Health and Health Services Research.” The conference call began with participant introductions. Ms. Greenberg reviewed the proposed agenda for the conference call for participants and agreed to fax the agenda to individuals who did not receive it prior to the conference call.

Jerry Gibson asked for detailed information about an upcoming NAHDO meeting scheduled for January in Atlanta. Denise Love, the President of NAHDO, reported that the January 24, 1999 invitational meeting for state members might serve in part as an educational forum on HIPAA’s Administrative Simplification provisions. The conference call participants agreed that selected action items identified during the call could be forwarded to NAHDO for the January meeting.

Reach consensus on the goals of the Consortium

Conference call participants were asked to discuss and affirm consensus on the five priority goals that HIPAA workshop participants identified for the Consortium. Once the

consensus goals were identified, participants would then determine proposed activities and operational issues.

Goal I: Convene local, state, and national public health and health services research entities around data standards issues, utilizing existing organizations to facilitate communication and disseminate information.

- Conference call participants identified various mechanisms that existing organizations such as associations and government agencies could use to communicate and disseminate information about proposed standards including, meetings, web pages, list serves, conference calls, etc.
- Bringing together local, state, and national public health and health services research communities will help develop consensus around data standards content and future strategies – to help public health and health services research entities “speak with one voice.”

Action: Participants reached consensus on Goal I.

Goal II: Identify high-priority data needs that can be met through the HIPAA transaction and clinical standards, as well as other standard setting processes.

- Pam Akinson noted that there is a critical need to develop a plan for moving high-priority data needs through the various processes.
- Bob Davis reminded participants that most of the NCVHS-identified “core” data elements are already included in the proposed HIPAA standards for administrative transactions. Therefore, there is an immediate need to “map” missing elements and determine the implications for public health and health services research.
- Mr. Davis reported that hospital discharge systems fit well with HIPAA standards.
- A key goal for the Consortium is to identify what data elements are needed for public health and health services research. Once these data elements are identified, they must then be presented to standards development organizations (SDOs).
- Ms. Greenberg noted that HIPAA should serve as a clarion call to public health and health services communities about the need for health data standards.

Action: Participants reached consensus on Goal II.

Goal III: Seek formal representation on data content committees (e.g., National Uniform Billing Committee and National Uniform Claim Committee).

- Ms. Greenberg noted that the NCHS already serves as a member of the NUBC.
- Participants noted that it might be difficult to argue for multiple seats on these committees. Selective non-voting representation can also be an important way to get public health and health services priorities in the discussion at content committee.
- Public health entities need to take the opportunity to articulate the integral linkages between public health and other hospital needs.
- Involvement in content committees and SDOs will ensure that public health and health services research needs are part of the ongoing HIPAA implementation process, including the NPRM process and the annual update and review by the Secretary.

- Mr. Davis cautioned that the Consortium develop a well thought out strategy that includes well-supported data needs.
- There was a suggestion to broaden the language of the goal to include “informal representation”.

Action: Participants agreed to amend Goal II to read:

Encourage participation and seek formal representation on data content committees (e.g., National Uniform Billing Committee and National Uniform Claim Committee).

Goal IV: Organize public health and health services research representation on standards development bodies (e.g., Health level 7 and ANSI ASC X12).

- Participants recognized that the significant costs involved in SDO participation might be a barrier for some organizations. They suggested examining Consortium membership in addition to individual organizational membership.
- Involvement in SDOs now is critical for public health. Public health needs to influence the administrative transactions, or else future influence with other transactions will be more difficult.
- It is important to represent the broad spectrum of needs within public health communities through SDO processes.

Action: Participants reached consensus on Goal IV.

Goal V: Educate the public health and health services research communities about standards issues.

Action: Participants reached consensus on Goal V.

Goal VI: Participate in the efforts to assure continued access to health care information by public health and health services researchers, with the appropriate safeguards for confidentiality of individually-identified data.

- While participants agreed that education about privacy safeguards is important, this goal should not be a high priority for the Consortium.
- Participants agreed that Consortium members need to be kept informed about privacy/confidentiality issues.

Action: Participants agreed to amend Goal VI to read:

Monitor efforts to assure continued access to health care information by public health and health services researchers, with the appropriate safeguards for confidentiality of individually-identified data.

Identify priorities and action items to support the Consortium

- Participants discussed the possibility of conducting an inventory of current content requirements for state hospital discharge databases. Participants agreed that, while this is important, the development of a data dictionary is a high priority action item for the Consortium.
- A user-friendly data dictionary could help communicate the content of standard claims transaction to a variety of non-technical audiences and facilitate the involvement of public health and health services research communities in standards development processes.

- There was clear consensus for an action item to identify priority data needs for inclusion in the claim and claim attachment standard. However, participants were uncertain about how best to accomplish this task. Proposals included conducting a comprehensive research study similar to the HCUP study and bringing together a small group of community representatives to identify a number of key data elements.
- Denise Love suggested that the January NAHDO meeting might serve as a forum discussing data needs further. She requested input from other conference call participants.
- There was agreement to develop list-serv or other electronic means of communication to support on-going communication on HIPAA standards. Ms. Greenberg reported that NCHS will take responsibility for setting up the list serv.

Organizational Issues

- Participants discussed various models for managing the Consortium including the designation of an Executive Secretariat or rotating Chairpersons.
- Participants agreed that further time was needed to discuss proposals for Consortium structure and funding sources. A conference call was scheduled for December 30, 1998 at 3:00 pm for this purpose.