

Fred Buhr, MSSW

From: Fred Buhr, MSSW [fredbuhr@metasteward.net]
Sent: Monday, July 19, 2010 9:14 AM
To: 'ehealth@wi.gov'
Subject: Letter of Intent

Attachments: Intent07192010.pdf



Intent07192010.pdf
f (109 KB)

Dear Ms. Webb:

Please find Metasteward LLC's letter of intent attached.

Sincerely,

Fred Buhr

Fred Buhr, MSSW
Metasteward LLC

fredbuhr@metasteward.net

Metasteward LLC
6112 Exchange Street
McFarland, WI 53558
July 19, 2010

Denise Webb, State Health IT Coordinator
1 West Wilson Street, Room 250
Madison, WI 53703

Dear Ms. Webb:

This letter has been prepared to announce Metasteward LLC's intent to volunteer to be the initial registered agent for a non-profit corporation specifically designed to be the State Designated Entity (SDE) (referred to as the "Entity Panel") for state-level health information exchange (HIE) governance in Wisconsin. Metasteward LLC's proposal is contingent upon willingness of the current WIRED for Health Board members to serve as the initial board of directors of the newly created corporation.

This Entity Panel would establish a health data stewardship program covering all health information exchange (HIE) in Wisconsin. In answer to the question "What is health data stewardship?" the National Committee on Vital and Health Statistics (NCVHS) says:

"Health data stewardship is a responsibility guided by principles and practices, to ensure the knowledgeable and appropriate use of data derived from individuals' personal health information. These uses include (but are not limited to) data collection, viewing, storage, exchange, aggregation, and analysis. A central concept of data stewardship is accountability, which resides in a named data steward with formal responsibilities for assuring appropriate use of health data, and with liability for inappropriate use. Health data stewardship supports the benefits to society of using individuals' personal health information to improve understanding of health and health care while at the same time respecting individuals' privacy and confidentiality."

The charter of the Entity Panel would be modeled on that of the American National Standards Institute (ANSI) Healthcare Information Technology Standards Panel (HITSP). But rather than developing specifications for interoperability, as did HITSP, the Entity Panel would develop open-source methods and products for implementing the specifications developed by HITSP. The National Health Information Network (NHIN) CONNECT open-source project would serve as both the model for developing information exchange products and the vehicle for publishing software intended for the public domain.

Membership in the Entity Panel would be open to all parties with an institutional interest in or affected by the state and national healthcare delivery system and would be by organization that would parallel the HITSP categories of participants:

1. "Standards development organizations" (SDOs)
2. "Non-SDO stakeholder organizations"
3. "Governmental bodies"
4. "Consumers"

Ideally, a contractual relationship with ANSI to serve as Secretariat would be established with ANSI staff providing all administrative support services including, but not limited to: scheduling meetings, notifying members of Entity Panel meetings, preparing agendas, issuing minutes, staffing committees and workgroups. ANSI staff would provide library services coordinating HITSP specifications with Entity Panel committees' work including:

1. Interoperability Specification (IS)
2. Capability (CAP)
3. Service Collaboration (SC)
4. Transaction Package (TP)
5. Transaction (T)
6. Component (C)
7. Technical Note (TN)
8. Requirements Design and Standards Selection (RDSS)
9. Reference (REF)

Also, and again ideally, a working relationship would be established with the Agency for Health Care Research and Quality (AHRQ) for contractual support services related to the United States Health Information Knowledgebase (USHIK). Such support would include USHIK personnel training Entity Panel members how to use the various features of USHIK in developing standards based open-source products.

A working relationship with staff of the National Information Exchange Model (NIEM) would provide valuable information relating to the NIEM data exchange methodology. That methodology results in a common semantic understanding among participating organizations with data formatted in a semantically consistent manner.

Rather than starting over with a new SDE, I believe Wisconsin could best move forward by giving the current WIRED for Health Board, all current committee members and all other interested parties, the time and the tools to develop a health information exchange (HIE) that, being open-source, could be shared by the entire country.

Sincerely,



Fred Buhr, MSSW
Metasteward LLC