

# **NEMSIS Version 3 Implementation Meeting**

## August 12-13, 2019

Silver Baron Lodge, 2880 Deer Valley Dr. E Park City, Utah 84060

## **Sunday Social Activities, August 11, 2019**

3:00 PM	NEMSIS Boot Camp (State EMS Officials only)
7:00 PM	NEMSIS Boot Camp Adjourned (Snacks Provided)
8:00 PM	Marshmallow Roast (Outside Patio)
	Agenda: Day One – Monday, August 12, 2019
7:30 AM	Breakfast (Outside Patio)
8:15 AM	I. Opening & Introduction of Keynote Speaker (N. Clay Mann) (Ponderosa Room)
8:30 AM	II. Opening Address: (Dr. Jon Krohmer, Office of EMS, NHTSA)
9:00 AM	III. ET3 User Interfaces/Data Transfer (CMMI Representatives)
10:15 AM	Break
10:30 AM	IV. Overview of V3.5.0 Products (NEMSIS TAC Representatives)
11:30 AM	Lunch (Outside Patio)
12:30 PM	V. Introduction to Breakout Sessions (N. Clay Mann)  a. Software Vendor Session (Ponderosa: agenda attached)  b. State EMS Official Session (El Dorado: agenda attached)
2:15 PM	Break
2:30 PM	IIV. Breakout Sessions Report Out
4:30 PM	IIIV. Collaborating with NIST to solve Cybersecurity Challenges (Bill Fisher)
5:00 PM	Day One - Meeting Adjourned
5:15 PM	Leave for Park City Mountain Resort!



# **NEMSIS Version 3 Implementation Meeting**

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Agenda: Day Two - Tuesday, August 13, 2019

7:30 AM	Break	ast (Outside Pati <mark>o)</mark>	
8:15 AM	I.	Day One Recap: Questions/Concerns (N. Clay Mann) (Ponderosa Room)	
8:30 AM	II.	Use of NEMSIS UUID in Hospital Trauma Registries (N. Clay Mann	1)
9:30 AM		Break: Hotel Check-out	
10:00 AM	III.	Breakout Sessions  a. Software Vendor Session (Ponderosa: agenda attached) b. State EMS Official Session (El Dorado: agenda attached)	
11:30 AM	Luncl	(Outside Patio)	
12:15 PM	IV.	Breakout Sessions Report Out and Meeting Wrap-up (N. Clay Ma	nn)
2:00 PM		2019 NEMSIS Annual Meeting Adjourned	



# **Software Company Breakout Sessions**

## August 12-13, 2019 Ponderosa Room

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Agenda: Day One - Monday, August 12, 2019

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1:00 PM	Enhancing the National Schematron File
	How do we avoid State/National logic collisions?
	How should we track version uptake?
4 20 014	
1:30 PM	Solving the Agency DEM File Submission Issue
	Can vendors facilitate completion of mandatory/required DEM data elements?
	How can vendors implement validation of demographic data?
	Can vendors implement automated submission of demographic data?
2:00 PM	Discussion with the Office of EMS, NHTSA
2:15 PM	Break
2.13 1 141	Break
	Agenda: Day Two – Tuesday, August 13, 2019
10:00 AM	Enhancing the Uptake and Use of StateDataSet
	How can "Collect Data" vendors make better use of StateDataSet?
	What kinds of deviations from StateDataSet are reasonable?
10:30 AM	Treatment of V2 F 0 c Outcomes for Health Information Fushance
10:30 AW	Treatment of V3.5.0 eOutcomes for Health Information Exchange What are the "best practice" (realistic methods) for HIE data exchange?
	How can outcome data be integrated into your ePCR system?
	How can outcome data make its way back to Collect and Send systems?
	now can outcome data make its way back to concer and send systems:
11:00 AM	Key Applications of UUID
	Can Agency UUID be used to track an agency at the state and national
	level when numbering changes happen?
	What issues do you foresee that will arise with implementation of UUIDs?
11:30 AM	Lunch (Outside Patio)
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### **State EMS Official Breakout Sessions**

# August 12-13, 2019 El Dorado Room

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### Agenda: Day One - Monday, August 12, 2019

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1:00 PM	Discussion with the Office of EMS, NHTSA
1:15 PM	Enhancing the National Schematron File  How do we avoid State/National logic collisions?  How do we improve the quality of state Schematron schemas?
1:45 PM	Solving the Agency DEM File Submission Issue Can vendors facilitate completion of mandatory/required DEM data elements? What state-level processes are in conflict with the national requirements for demographic data submission?
2:15 PM	Break
	Agenda: Day Two – Tuesday, August 13, 2019
10:00 AM	Enhancing the Uptake and Use of StateDataSet  Do you understand how StateDataSet support will change in 3.5?  How can "Collect Data" vendors make better use of StateDataSet?  What kinds of deviations from StateDataSet are reasonable?
10:30 AM	Treatment of V3.5.0 eOutcomes for Health Information Exchange What HIE use cases do you need to support? What are the barriers and solutions in those use cases?
11:00 AM	Key Applications of UUID  Can Agency UUID be used to track agencies at the state/national level?  Can PCR UUID be used by registries for data integration?
11:30 AM	Lunch (Outside Patio)



## **Breakout Session Issue Descriptions**

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### Issue: Enhancing the National Schematron File

**Description:** The use of Schematron to identify and expose EMS clinicians to potential validation issues associated with near-completed ePCRs has been very successful. Nevertheless, some issues remain unresolved. State and National Schematron files are developed independently, allowing for redundant or conflicting validation rules. There is no standard approach to version control for Schematron files. Thus, we're not confident that Schematron updates are being timely deployed in all local and state systems.

### Issue: Solving the Agency DEM File Submission Issue

**Description:** Assessments suggest that the NEMSIS TAC is receiving many fewer agency DEM files than are completed and available to States. A variety of reasons for this are expressed including insufficient "primary identifiers" in the DEMDataSet and the ability for agencies to (at any time) change dPersonnel info, etc. The NEMSIS TAC revised the NEMSIS V3 Demographic Data Guide to address some of these issues. Nevertheless, the issue persists, limiting our ability to develop a true National Registry of EMS activations and care. Since an agency DEM file is "required" at the National level before ePCRs can be received, the National repository is lacking many available records.

### Issue: Enhancing the Uptake and Use of StateDataSet

**Description:** Much work is expended by State Data Mangers to complete and maintain a StateDataSet. Yet, their "return on investment" is not fully realized. StateDataSet has resulted in much better consistency of published state resources, but the next step is for "Collect Data" systems to automate and increase their use of StateDataSet resources. Only a few "Collect Data" systems link medication/procedure use to credentialing; cue EMS clinicians to use required protocols, or auto-incorporate address information based on destination.

### Issue: Treatment of V3.5.0 eOutcomes for Health Information Exchange

**Description:** Despite the fact that NEMSIS achieved ANSI accreditation, tangible barriers remain to exchanging EMS data with receiving hospitals and state/regional HIEs. For Version 3.5.0., we could again develop the same data exchange implementation guides (through HL7), but is there a better approach? As a National standard, is there an approach we can take industry-wide that would better facilitate two-way data exchange with other healthcare entities?

### **Issue: Key Applications of UUID**

**Description:** The expectations associated with adding a UUID to the NEMSIS standard are diverse and central to the future functionality of the NEMSIS standard. The addition of UUIDs will alter our approach to unique record identification, record updates, resource/personnel tracking and linking to external registries and other data sources. Let's take some time and talk about how these diverse uses will be implemented.



## **Presentation Descriptions**

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Presentation Title: Collaborating with NIST to Solve Cybersecurity Public Safety Challenges

Speakers: Bill Fisher – Security Engineer, NCCoE & John Beltz – Security Portfolio Lead, PSCR

Abstract: The NIST National Cybersecurity Center of Excellence (NCCoE) and Public Safety Communications Research (PSCR) lab are collaborating with public safety organizations (PSOs) at federal, state, local, and tribal levels as well as industry vendors and service providers to enumerate PSO cybersecurity challenges and demonstrate standards-based, commercially available cybersecurity solutions. This talk will cover publicly available NIST guidance specific to PSOs and future ways in which the NEMSIS vendor community can engage and participate in NIST cybersecurity activities to gain a better understanding of security best practices, protocols and architectures.

Presentation Title: Data Acquisition and the Emergency Triage, Treat, and Transport (ET3) Model: Pathways for Success

**Speakers:** Carlye Burd (ET3 Model Lead), Katherine Woods (SPHG IT Lead), Dr. Sarah Goldman (ET3) – Center for Medicare and Medicaid Innovation (CMMI)

Abstract: Emergency Triage, Treat, and Transport (ET3) is a voluntary, five-year payment model that will provide greater flexibility to ambulance care teams to address emergency health care needs of Medicare beneficiaries following a 911 call. Under the ET3 model, the Centers for Medicare & Medicaid Services (CMS) will pay participating ambulance suppliers and providers to 1) transport an individual to a hospital emergency department (ED) or other destination covered under the regulations, 2) transport to an alternative destination (such as a primary care doctor's office or an urgent care clinic), or 3) provide treatment in place with a qualified health care practitioner, either on the scene or connected using telehealth. The model will allow beneficiaries to access the most appropriate emergency services at the right time and place. The model will also encourage local governments, their designees, or other entities that operate or have authority over one or more 911 dispatches to promote successful model implementation by establishing a medical triage line for low-acuity 911 calls. As a result, the ET3 model aims to improve quality and lower costs by reducing avoidable transports to the ED and unnecessary hospitalizations following those transports.