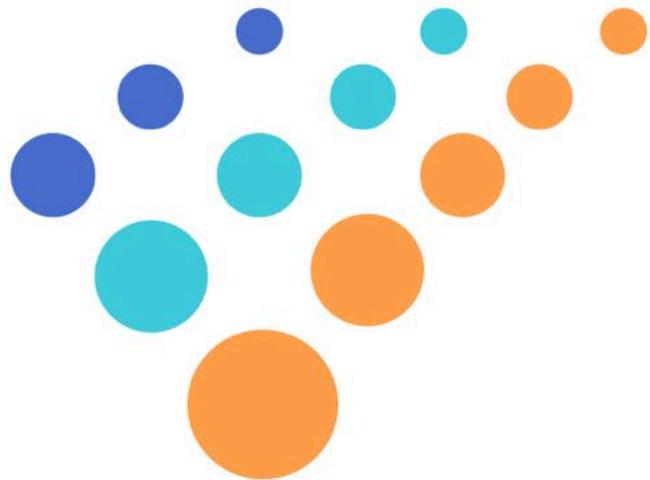




AGENCY FOR HEALTHCARE RESEARCH AND QUALITY



May 2021 CDS Connect Work Group Call



CDS Connect

Meeting Agenda

Schedule	Topic
3:00 - 3:02	<ul style="list-style-type: none">• Roll Call, Michelle Lenox (MITRE)
3:02 - 3:05	<ul style="list-style-type: none">• Review of the Agenda, Maria Michaels (CDC)
3:05 - 3:50	<ul style="list-style-type: none">• Revisiting CDS Artifact Annual Review and Maintenance (MITRE)
3:50 - 3:55	<ul style="list-style-type: none">• What's New with CDS Connect This Month (MITRE)• Invitation to join patient partnering panel
3:55 - 4:00	Open Discussion and Close Out, Maria Michaels (CDC) <ul style="list-style-type: none">• Open discussion and announcements• Concluding comments, review next steps and adjourn

Objectives

- Receive feedback on MITRE's artifact update process and share others' approaches to reviewing and updating CDS artifacts, including evidence, value sets, logic, and implementation guide
- Goal: create a useful base process for AHRQ website
- Share new features and resources available for CDS Connect
- Discuss topics of interest to members relating to opportunities for CDS Connect, including launch of patient partnering panel

SHARING OUR APPROACH AND LEARNING ABOUT YOURS: CDS Artifact Annual Review and Update

Susan Haas, MD, MS, MITRE

CDS Artifact Annual Review and Update is Specified, but the Process is Variable



- Governance of CDS Connect implemented in Summer 2020 for existing and new contributors
 - ▶ All CDS Artifacts, non-experimental and active, receive an annual review with updates as needed
 - ▶ Includes Terms and Conditions that outlines roles and expectations
- MITRE CDS Connect Project team reviewed CDS artifacts developed for AHRQ and created a draft update process checklist

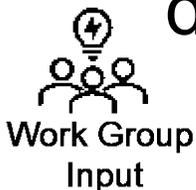
Identify and Incorporate “Meaningful” New Evidence

- **Search for new evidence**
 - ▶ Identify new or updated guidelines
 - ▶ Update literature review based on key terms
- **Decide if new evidence is “meaningful”**
 - ▶ Engage subject matter experts (SMEs), as needed
 - ▶ Determine if the new evidence merits a CDS artifact update
- **Incorporate new evidence**
 - ▶ Perform a detailed analysis of the proposed clinical change and associated logic
 - ▶ Work with informaticist to determine any Value Set (VS) changes
 - ▶ Revise logic
 - ▶ Update Implementation Guide including decision logs and clinical definitions
 - ▶ Identify and update any metadata fields in the AHRQ CDS Connect Repository that are impacted by changes in the evidence

INPUT! What are your expectations for identifying and including new evidence?

Optimize Chosen Value Sets (VSs)

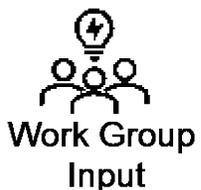
- Confirm each VS has been updated in VSAC with code system updates
- Identify any additions or deletions to VSs used
- Search to identify and compare potential replacement VSs
- Confirm with clinician any changes to VSs based on this review and/or on new evidence
- Create intensional definition for any MITRE-stewarded VSs defined extensionally



INPUT! What other approaches to VS optimization do other WG members use?

Update and Test Logic Based on New Evidence or VSs

- Clinical concept representation
 - ▶ Add or replace VS and code references
 - Based on prior assessment of VSs and codes done by clinician / informaticist
 - (VS whose content changed, but identifier did not, require no changes in logic)
- Clinical logic representation
 - ▶ Determine the types of changes in logic required
 - E.g. changes in lookback periods, algorithms, thresholds, inclusion criteria, exclusion criteria, recommendations, etc.
- Update any structured logic files accordingly



INPUT! Are there any different expectations for updating the concept and logic representation components?

Optimize Support for Implementers

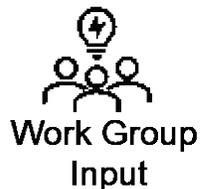
- Evaluate each potential reason for an update to the Implementation Guide (IG)
 - ▶ Evidence, logic (including new VS), knowledge level, interoperability standard, and receipt of implementation feedback from a pilot
- Update technical implementation content, if changed
- Update text to explain impact of technical changes to users
- Make any needed changes to clinician- or patient-facing text
- Update original Decision Log with all new decisions about evidence, CQL, and VSs
- Update IG's record of changes

INPUT! Are there any additional steps or information to include?



Update all CDS Connect Repository Metadata

- Use the Repository editing interface to identify fields which may need updates
- Update all metadata fields impacted by changes in underlying evidence and logic representation
 - ▶ For example, keywords, related CDS artifacts, knowledge level



INPUT! Are there any additional fields based on user adaptation to specific use cases?

WHAT'S NEW WITH CDS CONNECT

Matt Coarr and Chris Moesel, MITRE

Updates and New Features



- **Authoring Tool**
 - ▶ New development staff to focus on bringing additional updates and new features
 - ▶ Directly invoke external CQL functions w/ supported argument types
 - ▶ Delete expressions from the middle of an expression list (when allowed)
 - ▶ Minor bug fixes and usability enhancements
 - ▶ Continued updates to support reusability and maintainability
- **Prototype Tools**
 - ▶ Released CQL Services 2.0.0 w/ improved support for CQL 1.4/1.5, FHIR 4.0.1, and FHIR server callbacks
 - ▶ Released CQL Testing 2.3.1 w/ minor bug fix
- **CDS Artifacts**
 - ▶ Update project-authored artifacts to support FHIR 4.0.1 and CQL 1.5 (in progress)
- **Repository**
 - ▶ Small menu update: “Artifacts” changed to “Repository” (with associated URL change and redirects to support old URLs)
 - ▶ API update for related artifacts
 - ▶ UI changes in progress
 - ▶ CPG-on-FHIR work continues
 - ▶ User documentation update continues
 - ▶ Software updates and security patches — In progress: Drupal 9, PHP 7.4, and Acquia Dev Desktop replacement
 - ▶ Technical support for Repository contributors

Link to CDS Connect: <https://cds.ahrq.gov/cdsconnect>

CDS Connect Patient Partnering Panel



- Goal: Practical working sessions building from Parts 1 and 2 discussions (March and April WG meetings) to begin or build patient partnerships in CDS development
 - ▶ Share current CDS partnering activities, successes, and challenges
 - ▶ Frame critical success factors for partnering
 - ▶ Identify and/or recommend resources to aid CDS partnering
 - ▶ Communicate findings and experiences with the larger CDS Connect community
- Logistics: Four sessions over summer, approximately every three weeks, time to be determined with panel
- Seeking: Interested, dedicated WG members to participate, including your patient-caregiver partners

Please email (mtenox@mitre.org) with the MITRE team, if interested



ANNOUNCEMENTS, OPEN DISCUSSION AND CLOSE-OUT

Maria Michaels

Office of Public Health Scientific Services
Centers for Disease Control and Prevention