

EHR: Life after the Draft Standard Is Approved

Save to myBoK

by Donald T. Mon, PhD

In the March 2004 issue of the *Journal of AHIMA*, this column described how the second version of the EHR functional outline and draft standard currently being developed by the Health Level 7 (HL7) EHR Special Interest Group appeared to be dramatically improved over the first version, which was rejected in September 2003. Given its improved condition, HL7 released the functional outline for voting in mid-March. (Visit www.hl7.org/ehr or www.ehrcollaborative.org [web site no longer active] to review the functional outline.)

Now that the functional outline has been released, HL7 must follow its voting rules. After the required 30-day voting period, votes will be tallied in late April. Comments provided in the ballots will be reviewed in May. If voters accept the EHR draft standard this time, what happens next?

This article will describe what life may be like if and when the draft standard is approved and what reasonable interactions between EHR system vendors and their customers may be.

Why a Draft Standard Matters

It's important to remember that this is a *draft* standard for trial use (DSTU)—a version good enough to move the initiative forward, but with many opportunities to enhance the functional outline over the two-year DSTU period. Existing functions may be continuously refined, others may be deleted, and new functions may be added. To that end, the DSTU is a moving target.

The functional outline was designed to be practical yet visionary. It contains functions that are essential to caregivers and can be implemented now. But it also contains functions that EHR systems have long promised but that cannot be delivered until the technology is ready to implement them (e.g., functions to support evidence-based medicine and biosurveillance).

Given both situations, no EHR system vendor will be fully, or even highly, compliant with the draft standard whenever it is approved. The two-year DSTU period is a time when:

- Providers can better understand what an EHR is, how it will benefit them, and what individual functions are most important to them.
- Vendors can better understand both the standard and their customers' needs, as well as set product direction.

The Vendor-Customer Challenge

How do these two points translate into reasonable client-vendor interaction? At the beginning of an EHR system selection process, providers can use the functional outline as a guideline for their requests for proposals. However, it is important to distinguish that what is identified as a business or functional requirement in a request for proposal is not the same as saying that a function is required simply because it's in the standard.

For example, a provider may focus on the true functional requirement to receive a notification of a specific virus or disease outbreak from a public health agency on a real-time basis. He or she could fairly use this function to communicate to a vendor about how they'd like that function to perform. It would even be fair for the provider to compare vendors against this and other functions. But it may be unfair to malign the vendor when the reference within the standard suggests this capability to be essential but it cannot be implemented electronically until some time in the future or when there are no products that currently contain this function.

By the same token, this is an opportune time for vendors to begin retooling their products and to communicate to their customers when their products will become increasingly compliant with the standard. It will be easier to explain to their customers that they are using this time, while the standard is still a draft, to prepare for the eventual fully accredited standard.

The industry has long wanted both the practical and the visionary aspects of the EHR. If and when the draft standard is approved, life will be taken in the measured steps outlined in this article. However measured the steps may be, it will still be an exciting time as the industry finally moves forward on the promises of the EHR.

Reference

Mon, Donald T. "Setting the Right Expectations for the EHR Standard." *Journal of AHIMA* 75, no. 3 (2004): 52–53.

Article citation:

Mon, Donald T. "The EHR: Life after the Draft Standard is Approved." *Journal of AHIMA* 75, no.4 (April 2004): 54.

Driving the Power of Knowledge

Copyright 2022 by The American Health Information Management Association. All Rights Reserved.