



Data Managers Council Meeting Agenda

Hotel Murano, Tacoma, WA

Tuesday, September 23, 2008 – Venice 1

8:30 am – 3:30 pm

- Approval of June Data Managers Meeting Minutes
 - Approved
- Recruitment for Regional Representatives for Council Steering Committee
 - National Council of State EMS Data Managers Steering Committee
 - Bob Norlen (MN) – Chair
 - Stephanie Daugherty (FL) – Chair Elect
 - Kevin Putnam (MI) – Secretary
 - Angela Hicks (NC) – East Regional Representative
 - Brian Nation (AR) – South Central Regional Representative
 - Joe Moreland (KS) – North Central Regional Representative
 - Kathy Schmitt (WA) – West Regional representative
- Guidelines for Data Submission with Border States
 - Subcommittee formed to discuss Guidelines for Data Submission with Border States in more detail
 - Subcommittee includes:
 - Kevin McGinnis
 - Chris Handley
 - Steering Committee
 - Shelly Owens (AL)
 - Joe Moreland (KS)
 - Steve McCoy (FL)
 - Kevin Fitzgerald (MO)
 - Issue – Providers servicing along border of states want national guidance on submission of ambulance responses that occur cross border between states. Provider licensed in both states and has ability/requirement to provide data to both states. Concern by providers for configuring data extracts to allow for dual submission to states. Concern regarding submission of same call to by 2 states to the national database.
 - Several proposed recommendations to include:
 - Location of crew (state)
 - Location of patient (state)
 - Destination of patient (state)
 - If 2-3 points of call fall within a state, call/run data would be submitted to that state by the provider.
 - Subcommittee will work with Kevin McGinnis to decide on national guidelines to be implemented in the National Model State EMS Plan.

- Discussion Items:
 - State Rules/Regulations
 - IT/Software
 - Scope of Problem – many felt that the volume of calls that occur cross state border lines was not critical. It was more critical to learn about what
 - NEMSIS probably already receiving duplicate calls from different states; however, some feel NEMSIS should only be storing one call per run
 - Some states have providers that operate cross border state lines and want this information for outcome data; transport times; resource needs.
 - Suggested to look at how Fire and Law Enforcement handle the issue of services operating across border state lines and how data is reported (both states or only one state)
- NEMSIS Technical Assistance Center Update (1 hour) – Dave Owens and Jorge
 - Currently reporting to NEMSIS
 - Florida
 - Iowa
 - Maine
 - Minnesota
 - Nebraska
 - Nevada
 - New Hampshire
 - North Carolina
 - North Dakota
 - Utah
 - 7 states will begin reporting in 4Q08
 - Idaho
 - Washington
 - Hawaii
 - Missouri
 - Georgia
 - New Jersey
 - Oklahoma
 - Additional 10 states will begin reporting by end of 2008
 - West Virginia
 - Marianas Islands
 - Wisconsin
 - Guam
 - Arizona
 - Alaska
 - Alabama
 - Montana
 - Tennessee
 - New Mexico
 - Version 3.0
 - Began Spring 2008
 - Wiki – www.nemsis.org

- Open till end of year for comments
- Release 1Q 2010 – It will be 1 year – 3 years before States and Vendors are required to be compliant.
- HL7 (Health Level 7)
 - HL7 provides framework for exchange, integration, sharing, and removal of EH information. The standards which support clinical practice and the management delivery and evaluation of health services are most commonly used in the world.
 - Presidential Mandate – National Electronic Health Record
 - No EMS Standard exists
 - NEMESIS asked to go through SDO to become approved standard and become part of EHR
 - Allow for more grant funding if approved standard and part of HER
 - EMS data is a gap in the EHR
- National Reports available now
- State Reports available in beginning 2009
 - Like/Similar states (peer states)
 - Florida's Peer States (can change choice of peer states at any time)
 - Texas
 - New York
 - Illinois
 - Pennsylvania
 - California
- Agency Reports – plan and process is still being discussed
 -
- Jorge – New Submission Process and Validator
 - Validation Stage
 - Begins January 1, 2009
 - Beta testing in 4Q08 (3 states beta testing)
 - Will replace FTP
 - Validate XML
 - Passes
 - Data profile generated
 - Email sent to states/vendors
 - Fails
 - Required to resubmit within 10 days prior to end of current quarter
 - Data Profile Stage
 - Review data reports
 - Approve submission or reject/resubmit
 - If submission not approved then data will automatically be imported into warehouse
 - Submission Process
 - SSL (secure access)
 - Acceptable File Types
 - 1 + XML files
 - Zip file – contain only XML files
 - User Notification

- Valid report
 - Audit Trail
 - Late Notice
 - This new process was the first time many at the table had heard about it
 - NEMSIS was going to present this at the Sand Key Summit which was canceled
- National EMS Advisory Council Update – Aaron Reinart (30 minutes)
 - Executive Director at an Ambulance Service in Minnesota; he use to work for the State EMS office. He was overseeing the data program at the time Minnesota starting reporting to NEMSIS. Minnesota was the first state to report to NEMSIS.
 - He will be participating in the Data Managers meeting.
 - NEMSAC
 - He serves on the NEMSAC (National EMS Advisory Council) and represents the National Council of State EMS Data Managers on the NEMSAC. He is on the Analysis, Research, and Medical Direction NEMSAC subcommittee which also include has researchers and medical directors.
 - He wanted Data to be a subcommittee of its own because he was afraid it would get pushed to aside if bundled in with other areas of a subcommittee. However, he is glad that data is part of the Analysis, Research, and Medical Direction subcommittee because he thinks it will be an even higher priority with researchers and medical directors included on the subcommittee.
 - The next NEMSAC meeting is Oct. 2 and 3. The subcommittee has a ‘White Paper’ on Patient Safety and Medical Errors which addresses the need for DATA. This ‘White Paper’ will be address at the meeting next week.
 - Dedicated funding source for NEMSIS will also be pushed.
 - Outcomes Project
 - Aaron also participated in an Outcomes Project which involved data from 3 states. This project was designed to get a head start on the CMS pay per performance that is around the corner for EMS.
 - CMS (medicare) pay per performance is going to force EMS agencies to get good quality data because reimbursement is going to be tied to data.
 - This project was created to try and help drive what performance measures will be used by CMS for EMS reimbursement.
- National Highway Traffic Safety Administration Update – Susan McHenry (30 minutes)
 - Update on activities at the Office of EMS as it relates to continued support by the committees for data collection efforts.
 - FICEMS – Federal Interagency Committee on EMS
 - Recommends that each of the organizations serving on FICEMS include grant guidance language requiring agencies (local, state, etc...) applying for grant funds to have NEMSIS compliant system or use funds to develop NEMSIS compliant system. These organizations and grants include Fire, Disaster Preparedness, CDC, etc...
 - NEMSAC – National EMS Advisory Council
 - Many priorities; one being data
 - Subcommittee that will support and address the need for data
 - Analysis, Research, and Medical Direction

- Need for EMS to be part of Electronic Health Record (EHR) but can't until NEMSIS is recognized as ANSI approved SDO.
 - Once NEMSIS is approved as a standard, there will be more opportunities for grant funds
- EMS Performance Indicators document will be reviewed to see what data elements need to be added to version 3.0 to be able to use the EMS Performance Indicators.
- National Center for State and Analysis (NCSA) that is housed at NHTSA recognized and likes the NEMSIS model.
- Data and Communications Update – Kevin McGinnis (30 minutes)
 - Discussed the importance of Real Time Data
 - Discussed Information Communication Technology for EMS officials
 - Save time
 - Save lives
- General Discussion
- (4:00pm – 7:00pm) Zoll hosted a get together for Data Managers to hear what they are doing to change their products and service
 - Most states did not want to attend; tired of hearing excuses
 - We encouraged them to go and voice their concerns, issues, etc...
 - Many states ended up showing and we were all very blunt

Wednesday, September 24, 2008 – Venice 1

10:15 am – 3:30 pm

- (8:00am – 8:45am) Government Affairs Committee meeting
- (8:45am – 9:30am) Official NASEMSO Annual Meeting Call to Order
- NEDARC Data Training
 - Advanced Excel Training for Data Evaluation and Reporting
 - Mike Ely from NEDARC, National EMSC Data Analysis and Reporting Center was the trainer
 - Discussed functions and descriptive statistics
 - Discussed importing data from other sources
 - Discussed Pivot Tables

Thursday, September 25, 2008 – Turcello/Burano

8:30 am – 5:00 pm

- 7:00am – 8:00am (EMRC Conference Call)
- Development of a Recommended State NEMSIS Dataset (1/2 day or more)

- Tool to assist states
- Need dataset that is performance based to measure care and performance; not just describe EMS
- Data Managers have 6-8 months to compile
- State Updates on Data Collection / Presentations
 - Most states do not have validation checks
 - Can't report on data because poor quality
 - Now having to implement validation checks
 - Some states require data reporting (mandatory)
 - Some revoke agencies license if not reporting data
 - Some states have grants tied to data reporting
 - Alabama and Florida have validation checks
 - Alabama has 187 validation checks
 - Some states are linking with Crash data, Trauma, etc...
 - Some populate Trauma with EMS and EMS with Trauma data
- Electronic Health Record
 - Electronic Health Record by 2013 – Bush Initiative
 - Hospital side uses HL7
 - NEMSIS can help void gaps in HER
 - EMAR – Emergency Medical Awareness and Response
 - Dr. Mears Chairs
 - Main Focus
 - Data Standard Harmonization (June 08 – Dec. 08)
 - NEMSIS
 - DEEDS – Emergency Dept. data (currently going through HL7)
 - Messaging Collaboration (Sept. 08 – Dec. 09)
 - HL7 (hospital)
 - OASIS (outside hospital)
 - NEMSIS is not going away and actually will strengthen when becomes part of HER
- NEMSIS Dataset Version 3.0 recommendations
 - Data Elements
 - Existing 2.2.1
 - Suggestions for additions
 - Recommendations to discontinue
 - Possible Added Content
 - NASEMSO State Data Managers
 - Data Element Variable Definitions
 - Data Exchange
 - Dispatch Centers
 - Crash Notifications
 - Billing
 - Medical Devices
 - Others (pt. tracking, triage, GIS)
 - Comments on NEMSIS Wiki
 - XML cleanup (structural change / improve data quality)
 - NHTSA injury and assessment should be combined
 - Prior Aid not needed
 - Impression/Complaint still needs work (not adequate)

- Add complete dataset on Airway Management
 - Add Universal ID of some type
 - More international locations
 - State custom data elements
 - Expand to include training information
 - State custom data elements
 - Tracking of supplies
 - Include Performance measure
 - Injury data poor
 - 12 lead ECG interpretation for STEMI
 - Decrease null values
 - Add more data elements to national level
 - Data Managers suggested need to address issues with National Compliance for vendors
 - Addition of business logic
 - Address navigation of vendor software
 - Change compliance process
 - Need to assure ability for provider agencies to be able to use software
 - Need to address quality, submission process, and implementation
 - NFIRS received 5 million dollars to improve XML format
- General Discussion
 - Aaron Reinart gave a presentation on the Outcomes Project
 - CMS pay per performance
 - Joshua Legler from Utah gave a presentation on how Utah is using the data
 - Data Managers and NEMSIS TAC need to work together to assure vendor compliance process is adequate to make sure provider agencies are getting software that meets their needs.
 - Most states are having issues with a particular software vendor
 - Data Managers feel that action needs to be taken
 - If states are experiencing problems with vendors, email Dr. Mears and include vendor name and details of vendor issues. NEMSIS will investigate further.
 - Discussion on NEMSIS LG (little guy) software that is proposed by CIT (Critical Illness and Trauma Foundation, Inc. to assist rural and frontier EMS agencies.
 - CIT wants NASEMSO and Data Managers to support this effort.
 - More information is needed to make final decision to support this effort.