

National Association of State EMS Officials

Data Managers Council Monthly Meeting

Conference Call

March 5, 2014

Chair: Paul Sharpe, Virginia

Chair-Elect: Lindsey Narloch, North Dakota

Secretary: Ryan Tyler, Arkansas

Immediate Past Chair: Joe Moreland, Kansas

Call to order by Paul Sharpe on March 5, 2014 at 0903 hours (CST).

Roll Call, Ryan Tyler

Attendees:

| | |
|----------------------------------|-----------------------------|
| Chip Cooper - NH | Michelle Johnson - Delaware |
| Christopher Handley - Navy / DOD | Nick Nudell - NEMSAC |
| Chuck Happel - WI | Paul Sharpe - VA |
| Clay Mann - NEMSIS | Rachael Alter - NASEMSO |
| Daniel Lee - IL | Ridgely Ficks - MA |
| Erik Johnson - DC | Robert Keys - SD |
| Greg Mears - Zoll | Rogelio Martinez - AZ |
| Josh Legler - | Ryan Tyler - AR |
| Juan Esparza - FL | Shari Hunsaker - UT |
| Karen Jacobson - NEMSIS | Steve McCoy - FL |
| Kenneth Hughes - TX | Stuart Castle - NM |
| Kevin Putman - MI | Sue Morris - OH |
| Lindsey Narloch - ND | Tammy Sajak - TX |
| Mark Roberts - CA | Terry Smith - IA |
| Martin Lansdale - OK | Tim Seplaki - NJ |
| Michael Tayler - NY | Tom McGinnis - CA |

Secretary's Report

Ryan Tyler presented the December 2013 and January 2014 meeting minutes.

Action: Sue Morris moved, seconded by Stewart Castle to approve the minutes. The vote was unanimous and the minutes were approved.

Chair Report

Paul Sharp would like to thank Nick Nuddell for the Health Information Exchange (HIE) group discussion with the Data Manager Councils and guest. HIE is making progress across the nation in isolated cases. HIE will become a topic as integration with other healthcare agencies.

Josh Legler gave a presentation on schematron. During his presentation, Josh was able to bring the understanding and language of schematron down to the real world level.

Dr. Cunningham was to come and give a presentation on the NASEMSO workgroup that is working on Evidence-Based Guidelines or Model EMS Clinical Guidelines. Due to illness, she was unable to give presentation.

PowerPoint Link about the project:

<https://www.nasemso.org/Projects/ModelEMSClinicalGuidelines/documents/NASEMSOModelEMSClinicalGuidelines-WorkgroupKickoffMeeting.pdf>

NASEMSO Medical Directors project site:

<https://www.nasemso.org/Councils/MedicalDirectors/projects.asp>

Public comment for the Model EMS Clinical Guidelines will start on March 18, 2014 through April 30, 2014.

Data Managers participated in a panel discussion with the State Directors surrounding the issue of NEMSIS version 3. Dr. Clay Mann was able to update the groups on the progress of NEMSIS version 3 and progress towards HL7. This was a spirited conversation with the State Directors and Data Managers.

During Dr. Mann's presentation, he talked about the time NEMSIS TAC is extending in accepting NEMSIS version 2 data. He offered to extend the collection of version 2 data until the end of 2015. State Directors had a concern of moving the deadline once; it has the potential of being moved again. Jim DeTienne, NASEMSO President, stated NASEMSO would look at the timeline and will form an official opinion in regards to extending or not extending the NEMSIS deadline by annual meeting.

NEMSIS is attempting to have their software developer meeting in conjunction with annual meeting. Software developers wanted to involve the data managers in the discussion. Data Managers Council is planning on having a joint meeting with the software developers during the annual meeting. More details to come.

Chair-elect Report

Lindsey Narloch has no comment at this time and would give comment during the Data Quality workgroup.

DISCUSSION ITEMS

NEW BUSINESS

- **Call for an Annual Meeting planning committee** – Paul called upon the group to see who is interested in participating in the planning committee.

Action: Ryan Tyler will send out an invitation to those wanting to participate in the planning committee. Ryan will also get in touch with NEMESIS TAC as the liaison for planning the annual meeting.

- **NEMESIS Annual Software Developer Meeting** – NEMESIS is attempting to have their software developer meeting in conjunction with annual meeting. Software developers wanted to involve the data managers in the discussion. Data Managers Council is planning on having a joint meeting with the software developers during the annual meeting. More details to come.
- **Items brought out during Monday March 3, 2014 mid-year meeting**
 - **Version 3 Critical Patch Request – Update:** Please see the attached **Critical Release Patch Summary from NEMESIS TAC**. Karen Jacobson directed the group towards the following website to review the codes in ICD 10-CM codes.
 - <http://www.icd10data.com/ICD10CM/Codes/Z00-Z99>
 - Z00-Z13 : Persons encountering health services for examinations.
 - Chip Cooper wanted to know the codes for Obvious Death and Excited Delirium.
 - Obvious Death....could use Unattended Death (R99)
 - Excited Delirium (Suspected) (AKA: Agitated Delirium)...could use R41.0

Action: **Need to follow up with Dr. Clay Mann with SNOWMED CT Codes and ICD-10 Codes for procedures, medications, provider's impression and other recommended codes related to elements on the suggested list.**

- **NEMESIS Individual Agency Report** – Concerns were brought to the group about the potential confuse that an agency could receive. A state should be worry about NEMESIS compliance and the EMS Agency should be worried about being State compliant. Concern was how this would be marketed to the State Agencies. This report is a tool in our tool kit that has its potential pros and cons that are presented to the Agency. This

report is part of the NHTSA performance measures. Question was posed; when the agency receives the report is the data useful and actionable in meeting the standard?

Does the agency know how to use the data to make system improvements?

Please see the attached **Pilot Agency Report**.

OLD BUSINESS

- **Data Linkage Workgroup** – Shari is no longer able to chair this workgroup. Rogelio Martinez from Arizona made a motion to have Steve McCoy to be chair for the Data Linkage workgroup. Kevin Putman from Michigan seconds the motion. The vote was unanimous and Steve McCoy was made chair of the Data Linkage Workgroup. Resource for linkage state EMS databases to other databases each state.
- **Data Definitions Workgroup** – Chris Hanley was nominated to the chair position by Lindsey Narloch.
- **Mentoring Workgroup** – Chip Cooper outline was put out in January. Working with a programmer to see about the insert of the items into the NASEMSO website.
- **Data Quality Workgroup** – Lindsey Narloch will have to start working on the state recommended and what the validation rules or assertions.

Action: Need to send out an email with individuals signed up for each workgroup.

Juan Esparza suggests a workgroup to come up with EMS suggested list to submit to ICD -10 or RxNorm for EMS specific items.

ADJOURNMENT

There being no further business, the call concluded at 12:22 pm Central Standard Time at the motion of Rogelio Martinez and second by Kevin Putman, respectively.

Meeting Record respectfully submitted by Secretary Ryan Tyler

Attachments

NEMESIS TAC

Critical Release Spring 2014 (after v3.3.4 Release March 3, 2014)

I. New Pertinent Negative Attributes for various elements:

The NASEMSO Data Managers Council (DMC) has recommended adding Pertinent Negative (PN) Attributes. PN attributes currently do not exist. This recommendation is to make the documentation for the EMS Professional easier based on the limitations of the ICD-10-CM dataset. For example, if a response requires transport for non-medical reasons, we need a way to “not answer” the following national elements.

Elements impacted:

- A. eSituation.11 - Provider's Primary Impression
- B. eSituation.12 - Provider's Secondary Impressions
- C. eSituation.09 - Primary Symptom
- D. eSituation.10 - Other Associated Symptoms

→NEMSIS TAC Assessment: 1) Major Change to v3

2) Add definition to NOT value: Not Applicable = *The data element is not applicable or pertinent to the EMS event.*

3) Develop standard custom element

II. Additional Pertinent Negative values needed for various elements:

Add new PN values for the following elements. Purpose would be to allow for “none needed”

- A. eMedications.03 - Medications Given
- B. eProcedures.03 - Procedure

→NEMSIS TAC Assessment: Minor Change to v3, but values needs vetting.

III. Additional Values to various elements:

Add new values for the following elements:

- A. eVitals.04 - ECG Type
- B. eDisposition.12 - Incident/Patient Disposition

→NEMSIS TAC Assessment: Minor Change to v3, but values needs vetting.

IV. Definition to an Element:

Add a definition to the following elements:

- A. eVitals.18 - Blood Glucose Level

→NEMSIS TAC Assessment: Minor Change to v3, but values needs vetting.

V. Update ePayment section to match CMS needs:

Multiple elements

→NEMESIS TAC Assessment: Major Change to v3

Potential Values

I. New Pertinent Negative Attributes for various elements:

1. eSituation.11 - Provider's Primary Impression – PN Attributes needed

Values requested include:

- 1) No Apparent Illness or Injury
 - a. Could be more specific:
 - i. No Apparent Illness or Injury-No Transport
 - ii. No Apparent Illness or Injury-Transported for Safety/Protocol
 - iii. No Apparent Illness or Injury-Transport Requested
- 2) Obvious Death...*could use Unattended Death (R99)*
- 3) Excited Delirium (Suspected) (AKA: Agitated Delirium)...*could use R41.0*

2. eSituation.12 - Provider's Secondary Impressions – PN Attributes needed

Values requested include:

- 1) Obvious Death
- 2) Excited Delirium (Suspected) (AKA: Agitated Delirium)

3. eSituation.09 - Primary Symptom – PN Attributes needed

Values requested include:

- 1) No Signs Observed
 - a. (No Observed Signs)
- 2) No Symptoms Indicated
 - a. (No Observed Symptoms)

II. Additional Pertinent Negative values needed for various elements:

1. eVitals.18 - Blood Glucose Level

To meet the Glucometer needs where a value of “High” and “Low” are displayed on the machine add new PN values to capture this information.

Values requested include:

- 1) High
 - a. (Hi)
- 2) Low
 - a. (Lo)

2. eMedications.03 - Medications Given

To allow for the user to document the patient was assessed and no medication treatment was needed add more PN values to capture this information.

Value(s) requested include:

- 1) None

3. eProcedures.03 - Procedure

To allow for the user to document the patient was assessed and no procedures were needed add more PN values to capture this information.

Value(s) requested include:

- 1) None

III. Additional Values to various elements:

1. eVitals.04 - ECG Type

- a. AED

2. eDisposition.12 Incident/Patient Disposition

- a. Transported per protocol,
- b. Transport by request of law enforcement,
- c. Transported for the publics / patient's good.
- d. Etc. or similar.

IV. Update ePayment section to match CMS needs:

1. ePayment Work Group recommendations to elements to meet the needs of CMS. The primary changes would be to constraints for the elements to be expanded which would maintain backwards compatibility.

Others to Address in next Revision

Urgent Issues:

Optional Elements:

All the optional elements present an issue because they do not allow null or null. This makes these elements extremely difficult for states and agencies to use. A couple quick examples:

- If we can get our critical illness/injury stakeholder such as trauma, STEMI, and Stroke to enter outcome information (eOutcome.10 and eOutcome13) but we cannot get this information for all patients, or we cannot get it from small disparate software vendors then we can use it. This is a huge blow against local, regional, and state systems having a robust PI program. To transfer this information from third parties will cause it to get stripped out when submitting to the state.
- Patient's home address presents similar issues (ePatient.05 and ePatient.06).

Important:

Elements that should **NOT** be national elements.

- dAgency18 thru dAgency.22 (call volumes)
- dAgency.07 (census tracks)
- dAgency.17 (total service area)
- eOther.05 (suspected EMS work related injury)
- eOutcome.01 (Emergency Department Disposition)
- eOutcome.02 (Hospital Disposition)
- ePayment.01 (Primary method of payment)
- ePayment.50 (CMS Service Level)
- eProtocol.02 (protocol age category)
- eTimes.12 (destination patient transfer of care date/time)

Elements we believe should be considered to be national elements

- dPersonnel.22 thru dPersonnel.27 (licensure fields)
- dPersonnel.31 (employment status)
- dPersonnel.34 (primary EMS job role)
- dVehicle.01 (unit/vehicle number)
- dVehicle.03 (EMS unit call sign)
- dVehicle.04 (vehicle type)
- eCrew.01 (crew member ID)
- eCrew.03 (crew member response role)
- eProcedure.13 (vascular access location)
- eVitals.17 (CO2)

Elements felt to need fixing:

- eDisposition.17 (transport mode from scene)
- eDisposition.18 (additional transport mode descriptors)
- eResponse.23 (response mode to scene)
- eResponse24 (additional response mode descriptors)

It is felt that with the addition of old values back into these elements that they are confusing and seem likely to now be poised to provide poor analyses.

Greetings NASEMSO Data Managers and interested stakeholders!

After some great discussion and collaboration this week with the DMC membership, the NEMESIS TAC is pleased to share that we have been able to provide some updates to the Suggested Lists for the following elements using existing ICD-10-CM Codes. The White Papers have been updated as well as the excel spreadsheets.

1. eSituation.11 - Provider's Primary Impression

2. eSituation.12 - Provider's Secondary Impressions

- a. The Provider Impression code/description additions include:

| TTY Code | ICD-10-CM Code | ICD-10-CM Description | NEMESIS Version 3 - Impressions Explanation of Inclusion or Clarification | NEMESIS Version 3 - Impressions Example EMS Descriptor | Impression Category |
|----------|----------------|---|---|--|----------------------|
| ET | R41.0 | Delirium NOS | SYN: Confusion NOS; Disorientation, unspecified | Excited (Agitated) Delirium | Behavioral Disorders |
| PT | R99 | Ill-defined and unknown cause of mortality | SYN: Death (unexplained) NOS | Obvious Death | Death |
| PT | Z00.00 | Encounter for general adult medical examination without abnormal findings | SYN: Encounter for adult health check-up NOS | Encounter, adult, no findings or complaints | No Patient Complaint |
| PT | Z00.129 | Encounter for routine child health examination without abnormal findings | SYN: Encounter for routine child health examination NOS | Encounter, child, no findings or complaints | No Patient Complaint |

3. eSituation.09 - Primary Symptom

- a. R41.0 = Disorientation, unspecified already exists in the Symptom Suggested List. The descriptor was not changed as the Synonym currently lists "Delirium, NOS) for clarification purposes.
- b. The Primary Symptom code/description additions include:

| TTY Code | ICD-10-CM Code | ICD-10-CM Description | NEMSIS Version 3 - Primary Symptom Explanation of Inclusion or Clarification | NEMSIS Version 3 - Primary Symptom Example EMS Descriptor | Symptom Category |
|----------|----------------|---|--|---|----------------------|
| PT | R99 | Ill-defined and unknown cause of mortality | SYN: Death (unexplained) NOS | Obvious Death | Death |
| PT | Z00.00 | Encounter for general adult medical examination without abnormal findings | SYN: Encounter for adult health check-up NOS | Encounter, adult, no findings or complaints | No Patient Complaint |
| PT | Z00.129 | Encounter for routine child health examination without abnormal findings | SYN: Encounter for routine child health examination NOS | Encounter, child, no findings or complaints | No Patient Complaint |

Documents have been updated and posted on the NEMSIS Version 3 Resources Page.

<http://nemsis.org/v3/resources.html>

The NEMSIS Suggested List download site has not yet been updated but will be as quickly as possible.

In addition, the NEMSIS Version 3 Annual Release is available as NEMSIS Version 3.3.4 Build 140305. The following value descriptions were updated to meet the needs of our EMS professionals.

1. [eVitals.04 - ECG Type](#)

Value change: 3304015 Other (AED, Not Listed)

2. [eDisposition.12 - Incident/Patient Disposition](#)

Value change: 4212043 Transport Non-Patient, Organs, etc.

The Updated NEMSIS version 3.3.4 (Build 140305) Change Log can be accessed from the NEMSIS website:


- NEMSIS V3 Overview - <http://nemsis.org/v3/overview.html>
- NEMSIS V3 Change Log - <http://nemsis.org/v3/changeLog.html>

The NEMSIS v3.3.4 (Build 140305) Dataset Dictionaries can be found on the Downloads page or directly from this link:

<http://nemsis.org/v3/downloads/datasetDictionaries.html>

NEMSIS Time Line.

| | 2011 | 2012 | 2013 | 2014 | 2015 | 2016 | 2017 | 2018 |
|------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|
| NEMSIS V2 | Light Orange | Light Orange | Light Orange | Light Orange | Light Orange | Light Orange | Light Orange | Light Orange |
| NEMSIS V3 | White | Orange | Orange | Orange | Orange | Orange | Orange | Orange |
| NEMSIS HL7 | White | White | White | White | White | White | White | White |

 Transition Period for V2 to V3

Updated 3-4-2014