



# CCDP Project Description

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- CA Clinical Data Project (CCDP) was launched by CHCF to support better chronic disease care through improved clinical information.
- Specifically, CCDP focused on the creation of standardized formats for the exchange of electronic clinical lab and pharmacy data standards = CALINX



# CCDP Background

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- Launched in February 2004
- Staffed by CHCF and key consultants
- Collaborative effort by IPAs/Medical groups, health plans, laboratories, DHS, clinics and hospitals.

# CCDP Scope

- CALINX Rx specification = update of CALINX 1.0 first launched in 1999
- CALINX Lab specification based on HL-7 standard
- Expert staffing of technical work groups
- Implementation support by key technical staff/consultants
- Software tools to confirm compliance with CALINX
- Lab tool also provides support for translation of data from an HL-7 to flat file format.
- Rules of exchange



# CCDP Organizations

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Executive Committee includes representatives from

- Major health plans: Blue Shield, Blue Cross, Health Net, PacifiCare, Aetna, Cigna
- Major commercial labs: Quest/UniLab; Labcorp
- Larger integrated systems: Kaiser, Sutter, CHW
- Medical Groups/IPAs: CAPG, Brown and Toland
- Safety Net Providers: CHCN, LA County DHS
- Medi-Cal: FFS and Managed Care

# CCDP Business Case

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- Primary driver for the use of CALINX standards is Pay for Performance
- Primary means of adoption is an “endorsement” whereby organizations agree to use CALINX standards as part of their usual business
- ALL data is retrospective—monthly exchange of batch data

# CCDP Business Case

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Why adoption makes sense for participating organizations:

- Efficiency (cost and effort) when supporting a single format (either in sending or receiving data)
- Enhanced ability to collect and use electronic lab results data
- Consistent timing and format for pharmacy data receipt by provider groups



# CCDP Funding

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- Sponsored by the California HealthCare Foundation
- First 18 month phase to develop CALINX standards (Lab and Rx)
- Second phase to promote use in clinical settings

# CCDP Governance

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- Governance through the Executive Committee has been managed by CHCF and is transitioning to IHA
- Seeking opportunities to converge CALINX with burgeoning national data standards
  - CALINX Rx with NCPDP post-adjudication pharmacy standard (in review)
  - CALINX Lab with ELINCS (real-time interoperability standard for labs and EHRs)

# CCDP Technology

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- CCDP is not a technology, it is a format specification for the exchange of data
- CALINX Rx based on NCPDP standard
- CALINX Lab based on HL-7 standard

# Learning Experiences

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- The development of a format specification (down to the details) is required for standards adoption
- Implementation/adoption must be carried out through business relationships (i.e., part of contractual relationships)
- While there is a business case for standards adoption, there is little to none for standards development.



# Leverage Opportunities

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- National efforts as mentioned earlier
- ELINCS has been included as one of four interoperability standards for the first round of CCHIT EHR certification

# CCDP Challenges

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- Adoption and implementation support is difficult in smaller settings (smaller IPAs, hospital labs, etc.)
- Need to harmonize standards with DHS data requirements



# CaIRHIO Collaboration

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- CALINX in its current form may not be able to support RHIO efforts due to the batch, retrospective nature of data exchange.
- The actual format specification, however, might be used with greater frequency (i.e., daily) to support a consistent format for exchange.
- The ELINCS specification (the “real-time” equivalent of CALINX Lab) may be more appropriately used in a RHIO setting.