

2021May Announcement of Formation of Additional Consensus Groups

Created by Lynn Laakso, last modified on Mar 08, 2021



March 15, 2021

Health Level Seven International® invites you to take part in the formation of additional consensus groups for balloting HL7 candidate standards and documents prior to the upcoming May 2021 ballot cycle. The candidate standards and other documents described in this announcement are expected to ballot prior to HL7's May 2021 Virtual Working Group Meeting (WGM). Comments received from consensus group members will be addressed at that WGM or in regular teleconferences.

Consensus Group Sign-Up Open Date: Monday, March 15, 2021

Consensus Group Sign-Up Close Date: Thursday, April 15, 2021

Important Note: Consensus group signup closes when ballot voting begins.

Consensus group enrollment will be available from a date at least four weeks preceding the ballot vote opening date and will continue until the opening of voting. While the exact dates are dependent upon individual ballot open and close dates, in general the consensus group signup period dates are as follows:

Ballot Open Date: Friday, April 16, 2021

Ballot Close Date: Monday, May 17, 2021

Exceptions for a specific ballot are listed with that ballot description.

Please be aware that these dates may not be accurate for all consensus groups. To sign up, point your browser to [the Ballot Desktop](#). Important Note: Consensus group signup will close when ballot voting begins. This is also the final date non-members can sign up for Non-Member Participation in the ballot.

Ballot Listing

This section details the candidate/draft standards and other documents for this ballot cycle. Please note that the following details about specific items are subject to review by the HL7 Technical Steering Committee:

- Approval of all projects initiating any ballot item
- Approval of titles for new candidate and draft standards and other documents
- Approval of new candidate Standards for Trial Use
- Approval of ballot level for those items moving to Normative ballot

Any changes from the initial details in this announcement will be identified in the ballot announcement document released when this ballot cycle opens.

Currently known changes will be available in the [Updates to Ballot Announcements](#) document.

Current Ballots

(Jump to [Postponed_Ballots](#))

| Family | Ballot Name | Work Group | Project ID | Ballot Iteration | Ballot Description | Last Balloted | Unique Ballot ID | Pool enrollment opens | Pool enrollment closes |
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| Family | | Work Group | | | | | Pool enrollment opens | Pool enrollment closes |
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| CCOW | Withdrawal of HL7 Clinical Context Management Specification (CCOW) Version 1.6 | Infrastructure and Messaging | 1669 | 1st Comment-Only Ballot | Aimed at facilitating the integration of applications at the point of use, CCOW Context Management Specification is a standard for both internal applications programming and runtime environment infrastructure that complements Health Level Seven International's traditional emphasis on data interchange and enterprise workflow. By synchronizing and coordinating applications to automatically follow the patient, user (and other) contexts, CCOW serves as the basis for ensuring secure and consistent ac | WITHDRAW_COW1.6_R1_O1_2021MAY | 2021/03/15 | 2021/04/15 |
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| CDA | Reaffirmation of HL7 Version 3 Implementation Guide for CDA Release 2 - Level 3: Emergency Medical Services; Patient Care Report, Release 2 - US Realm | Clinical Interoperability Council | 1666 | 1st Normative Ballot | This CDA implementation guide, based on the EMS DAM, provides a standardized channel for the submission of emergency medical service data to emergency departments and hospitals and supports re-use of information assets for both efficiency and quality by adopting the clinically validated National EMS Information System to use the CDA information model for their NEMESIS 3.4 product. | REAFF_CDAR2IG_EMSPCR_R2_N1_2021MAY | 2021/03/15 | 2021/04/15 |
| | | | | | | | | |
| EHR | Reaffirmation of HL7 EHR-S FM Release 1: Long Term Care Functional Profile (LTCFP), Release 1 - US Realm | Electronic Health Records | 1667 | 1st Normative Ballot | The HL7 EHR Long-Term Care Functional Profile is based on HL7 EHR System Functional Model Release 1 and describes functional requirements for EHR Systems that serve Long Term and Post Acute Care Settings. | REAFF_EHRSF M_LTCFP_R1_N1_2021MAY | 2021/03/15 | 2021/04/15 |
| | | | | | | | | |
| FHIR | HL7 FHIR® Implementation Guide: Clinical Genomics, Release 1 Requesting alternate ballot title "HL7 FHIR® Implementation Guide: Clinical Genomics, Release 2" | Clinical Genomics | 1217 | 3rd STU Ballot | Genomics is a rapidly evolving area of healthcare that involves complex data structures. There is significant value in sharing this information in a way that is consistent, computable and that can accommodate ongoing evolution of medical science and practice. The implementation guide is also transmission protocol-independent - the data structures presented here could be used in RESTful, messaging, document or other paradigms. | FHIR_IG.CG_R1_D3_2021MAY | 2021/03/15 | 2021/04/15 |
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| Family | | Work Group | | | | | Pool enrollment opens | Pool enrollment closes |
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| FHIR | HL7 FHIR® Implementation Guide: Minimal Common Oncology Data Elements (mCODE), Release 1 - US Realm Requesting alternate ballot title "HL7 FHIR® Implementation Guide: Minimal Common Oncology Data Elements (mCODE), Release 2- US Realm" | Clinical Interoperability Council | 1509 | 2nd STU Ballot | This project will develop a common set of standardized data elements relevant to many types of cancer. It is intended to facilitate collection of "real world data" from clinical encounters with higher uniformity and quality, independent of the provider or EHR vendor. | Since the last ballot of this material in 2019SEP , the following changes have been made: Changes of significance: medication resources, radiotherapy, tumor size, comorbidities. New extended example, new conformance criteria. | FHIR_IG_MCO DE_R1_D2_2021MAY | 2021/03/15 2021/04/15 |
| FHIR | HL7 FHIR® Implementation Guide: Quality Measures, Release 1- US Realm | Clinical Quality Information | 1499 | 3rd STU Ballot | The Fast Healthcare Interoperability Resource (FHIR) Quality Measure Implementation Guide (this IG) describes an approach to representing electronic Clinical Quality Measures (eCQMs) using the FHIR Clinical Reasoning Module and Clinical Quality Language (CQL) in the US Realm. However, this Implementation Guide can be usable for multiple use cases across domains, and much of the content is likely to be usable outside the US Realm. | Since the last ballot of this material in 2020FEB , the following changes have been made: In addition to general corrections and improvements throughout, this update introduces support for: * Computable/Publishable measure profiles * Composite measure specifications * Measure Terminology Service (use case requirements and CapabilityStatement) * Measure Repository Service (use case requirements and CapabilityStatement) | FHIR_IG_QM_R1_D3_2021MAY | 2021/03/15 2021/04/15 |
| FHIR | HL7 FHIR® Implementation Guide: Military Service History and Status, Release 1- US Realm | Cross-Group Projects | 1607 | 1st STU Ballot | The IG is a set of requirements and associated capabilities to manage and exchange information about Military Service History and Status. All requirements are analyzed as use cases involving actors/participants and system interactions. This specification also identifies code systems and terminology gaps that require extensions and change proposals to LOINC and SNOMED CT. This implementation guide builds upon existing FHIR implementation guidance and best practices: US Core IG 3.1.1, ODH 1.0 | | FHIR_IG_MILITARY_R1_D1_2021MAY | 2021/03/15 2021/04/15 |

| Family | | Work Group | | | | | Pool enrollment opens | Pool enrollment closes | |
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| FHIR | HL7 FHIR® Implementation Guide: Bulk Data, Release 1 Requesting alternate ballot title "HL7 FHIR Implementation Guide: Bulk Data Access, Release 2.0" | FHIR Infrastructure | 1497 | 2nd STU Ballot | This implementation guide is designed for developers of backend services (clients) and FHIR Resource servers (e.g., EHR systems, data warehouses, other administrative systems) that aim to interoperate by sharing large FHIR datasets. The guide defines the application programming interfaces (APIs) through which an authenticated and authorized client may request a bulk-data export from a server, receive status information on generation of the requested files, and retrieve these files. | Since the last ballot of this material in 2019MAY , the following changes have been made: Improvements to the IG include documentation on transmitting binary content in attachments; improvements to incremental update handling (retrieving historical data for new members of a group, propagating resource deletions); performance oriented enhancements (limiting fields returned using the _elements parameter, POST based kickoff requests with Parameters resource, addition of a patient parameter for filtering); improvements on handling metadata and other optional resources such as Provenance with the includeAssociatedData parameter; better export job management (clearer errors, cancellation, signaling download completion to servers); documentation clarifications (inclusion of resources outside of Patient Compartment, parameter optionality for servers). Full change log at http://build.fhir.org/ig/HL7/bulk-data/changes.html . | FHIR_IG_BULK_DATA_R1_D2_2021MAY | 2021/03/15 | 2021/04/15 |
| FHIR | HL7 FHIR® IG: SMART Application Launch Framework, Release 1 Requesting alternate ballot title "HL7 FHIR IG: SMART Application Launch Framework, Release 2.0" | FHIR Infrastructure | 1341 | 2nd STU Ballot | SMART App Launch 2.0.0 defines a framework for launching user-facing applications in the context of a FHIR-enabled health data system (e.g., Electronic Health Record system, Patient Portal, or Beneficiary Portal). The framework provides options for context discovery (e.g., understanding which patient has been selected in the surrounding environment), fine-grained authorization (e.g., requesting access to specific resource types or specific categories of data), single-sign-on and UI integration. | Since the last ballot of this material in 2017SEP , the following changes have been made: SMART 2.0.0 includes enhancements and clarifications to the SMART App Launch specification. Proposed changes include: * clarification on launch context scopes for consistency * new scope syntax for granular permissions (e.g., category level access) * POST-based authorization to limit URL size * inclusion of PKCE to authorization requirements to support OAuth best practices * inclusion of asymmetric client authentication * profiling of token introspection for alignment with context scopes * guidance for permission requests and communicating them to end users * updates to .well-known/smart-configuration to support the enhancements above | HL7_FHIR_IG_SMART_APP_LAUNCH_R1_D2_2021MAY | 2021/03/15 | 2021/04/15 |
| FHIR | HL7 FHIR® Release 5 | FHIR Management Group | 891 | 1st Comment-Only Ballot | This is a first look at the R5 release that will be formally balloted in September. We are seeking feedback around the proposed Normative scope to allow appropriate division of content between the ballots in the September cycle. | Since the last ballot of this material in 2018SEP , the following changes have been made: R5 will include a wide variety of updates and enhancements that will be explicitly detailed as part of the ballot release package. | FHIR_R5_O1_2021MAY | 2021/03/15 | 2021/04/15 |

| Family | | Work Group | | | | | Pool enrollment opens | Pool enrollment closes | |
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| FHIR | HL7 FHIR® Implementation Guide: NHSN Inpatient Medication COVID-19 Administration Reports, Release 1- US Realm | Pharmacy | 1654 | 1st STU Ballot | This IG supports electronic submission of patient/line-level medication administration data to the National Healthcare Safety Network (NHSN). The intent is to establish an electronic submission standard that is vendor-neutral, leverages existing workflows, and eliminates duplicate documentation. It will identify data elements to be used to describe medications administered to hospitalized patients (inpatients) diagnosed with COVID-19 as part of NHSN COVID-19 reporting pathways. | FHIR_IG_NHSN_MED_ADMIN_R1_D1_2021MAY | 2021/03/15 | 2021/04/15 | |
| FHIR | HL7 FHIR® Implementation Guide: NHSN Adverse Drug Event - Hypoglycemia Report, Release 1- US Realm | Public Health | 1655 | 1st STU Ballot | | This IG will support electronic submission of adverse drug event (ADE) data to the National Healthcare Safety Network (NHSN). The intent of this project is to establish an electronic submission standard that is vendor-neutral that leverages existing workflows and eliminates duplicate documentation. The first module of this project will develop the following IG: HL7 Implementation Guide for FHIR® Release 1: NHSN Adverse Drug Event-Hypoglycemia Report. | FHIR_IG_NHSN_ADE_HG_R1_D1_2021MAY | 2021/03/15 | 2021/04/15 |
| FHIR | HL7 FHIR® Implementation Guide: Vital Records Mortality and Morbidity Reporting, Release 1 - US Realm Requesting alternate ballot title "Vital Records Death Reporting (VRDR) FHIR Implementation Guide" | Public Health | 1475 | 2nd STU Ballot | The Vital Records Death Reporting (VRDR) FHIR Implementation Guide provides guidance regarding the use of FHIR resources as a conduit for data required in the bidirectional exchange of mortality data between State-run Public Health Agencies (PHA) Vital Records offices and U.S. Centers for Disease Control and Prevention (CDC)/National Center for Health Statistics (NCHS). | Since the last ballot of this material in 2019MAY , the following changes have been made: The modifications made in this iteration of the specification include the adoption of the US Core Condition resource profile, use of the patient birthplace extension, and reconciliation of differences between the VRDR FHIR IG data content and the Inter-Jurisdictional Exchange (IJE) file edit flags and missing value reasons. | FHIR_IG_VRDR_R1_D2_2021MAY | 2021/03/15 | 2021/04/15 |

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| FHIR | HL7 FHIR® Implementation Guide: Data Segmentation for Privacy (DS4P), Release 1 | Security | 1549 | 2nd STU Ballot | Provides FHIR guidance for applying security labels with coded tags for use in access control systems governing the collection, access, use, and disclosure of the target FHIR Resource(s) as required by applicable organizational, jurisdictional, or personal "sharing with protection" policies. | Since the last ballot of this material in 2020MAY , the following changes have been made: Changes include updates and corrections to value sets, use in ABAC clearances, and guidance on Subresource labeling. | FHIR_IG_DS4P_R1_D2_2021MAY | 2021/03/15 | 2021/04/15 |
| HL7 | HL7 Implementation Guide: CDS Solutions, Release 1 | Arden Syntax | 1175 | 1st Informative Ballot | A proliferation of health information technology standards related to clinical decision support (CDS) has increased uncertainty regarding the implementation of CDS. Addressing this uncertainty, this implementation guide reviews how standards in this space, with a focus on HL7 standards, can be brought together and used to implement both an overall CDS strategy as well as specific kinds of CDS. | | HL7_CDS_SOLUTIONS_R1_I1_2021MAY | 2021/03/15 | 2021/04/15 |
| HL7 | HL7 Domain Analysis Model: Nutrition Care Process, Release 1 Requesting alternate ballot title "HL7 Domain Analysis Model: Nutrition Care, Release 3 (note this is a scope expansion of Nutrition Orders DAM Release 2)" | Orders and Observations | 1614 | 1st STU Ballot | The purpose of the nutrition care domain analysis model is to describe the required data and flow of information needed for the development of other HL7 products in the nutrition domain such as FHIR resources and profiles, version 3 RIM-based nutrition order clinical messages, and Clinical Document Architecture nutrition templates using structured data. | | HL7_DAM_NUT_R1_D1_2021MAY | 2021/03/15 | 2021/04/15 |

| Family | | Work Group | | | | | Pool enrollment opens | Pool enrollment closes |
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| HL7 | HL7 Cross Paradigm Implementation Guide: Unique Device Identifier (UDI), Release 1 | Orders and Observations | 1238 | 1st Informative Ballot | <p>Provides UDI Exchange guidelines to support interoperability across various domains, such as continuing care across device, disease and patient life cycles; device safety and effectiveness evaluation; cost and claims information; and quality analysis.</p> <p>This cross-paradigm IG is expressed using the FHIR IG format enabling re-usable profiles, but includes representation of UDI in the other HL7 base standards (v2 and C-CDA) in order to provide consistent implementations.</p> | HL7_IG_UDI_R1_I1_2021MAY | 2021/03/15 | 2021/04/15 |
| HL7 | <p>HL7 Informative Document: Standardized Medication Profile, Release 1- US Realm</p> <p>Requesting alternate ballot title "HL7/NCPDP Informative Document: Standardized Medication Profile, Release 1"</p> | Pharmacy | 1529 | 1st Informative Ballot | The White Paper identifies and defines the components of an interoperable medication profile. Harmonizing NCPDP and HL7 standards and projects related to the medication related information pertinent to Post-Acute Care settings especially during transitions of care to any practice setting. | HL7_STD_MED_PROFILE_R1_I1_2021MAY | 2021/03/15 | 2021/04/15 |
| HL7 | <p>HL7 Cross Paradigm Specification: Health Service Reference Architecture (HL7-HSRA), Release 1</p> <p>Requesting alternate ballot title "HL7 Healthcare Interoperability Reference Architecture (HL7-HIRA), Release 1"</p> | Services Oriented Architecture | 1407 | 1st STU Ballot | <p>The objective of the HL7 Healthcare Interoperability Reference Architecture (HL7-HIRA) is to support the design of medium/large scale eHealth architectures based on HL7 services and standards. This project organizes HL7 Service Functional Models, Functional Profiles and Domain Models as a basis for:</p> <ul style="list-style-type: none"> • a formalized Enterprise Service Inventory (Normative) • an Architectural Patterns Catalog (Normative) • Methods for [enterprise] Service Discovery and Orchestration (Implementation guidance) | HL7_HSRA_R1_D1_2021MAY | 2021/03/15 | 2021/04/15 |

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| HL7 | HL7 Logical Model: Standardized Terminology Knowledgebase, Release 1 | Vocabulary | 1623 | 1st Informative Ballot | <p>Specifically, the scope includes:</p> <p>1) Outlining how the standardized terminology knowledge base can support FHIR resource generation, perhaps closing gaps that are currently covered as extensions.</p> <p>2) A gap analysis of CTS2 logical model, including an evaluation of why it may be considered a unsuccessful attempt to provide a single logical model, so that those pitfalls may be avoided with this attempt.</p> | HL7_LM_TERM_KB_R1_11_2021MAY | 2021/03/15 | 2021/04/15 | |
| | | | | | | | | | |
| MH | HL7 Consumer Mobile Health Application Functional Framework, Release 1 | Mobile Health | 1182 | 2nd STU Ballot | <p>The Consumer Mobile Health Application Functional Framework (CMHAFF) defines security, privacy, data standards, and guidelines for mobile health applications (health apps). CMHAFF guidelines also address aspects of transparency and consumer protection through the development life-cycle of such apps (from purchase, download, installation, use, and deletion). The intent is to provide industry guidance and best practices toward the development of safe and beneficial consumer health apps.</p> | <p>Since the last ballot of this material in 2018JAN , the following changes have been made: This ballot draft seeks to improve upon conformance criteria established in the first ballot according to comments and gaps identified across three pilots conducted in the last three years. This ballot also includes further work in aligning CMHAFF with guidance and findings identified across growing standards and health app frameworks (e.g., EN-ISO/IEC DTS 82304-2).Light improvements have been made across the standard, with significant development within sections related to CMHAFF conformance-related scoring and proposed mHealth app labeling criteria.</p> | MHAFF_CONS_MHAFF_R1_D2_2021MAY | 2021/03/15 | 2021/04/15 |
| | | | | | | | | | |
| V2X-Related | HL7 Version 2 Implementation Guide: v2-to-FHIR, Release 1 | Orders and Observations | 1481 | 2nd STU Ballot | <p>This is the first iteration mapping the HL7 v2 standard to the HL7 FHIR R4 standard enabling consistent mapping of data being exchanged using an HL7 v2 elements to applicable HL7 FHIR R4 components. The focus is on any HL7 v2 fields that are known to be communicated, thus not everything that HL7 v2 allows to be communicated</p> | <p>Since the last ballot of this material in 2020SEP , the following changes have been made: As this is the first version being reviewed for mapping accuracy.</p> | V2_IG_V2-2-FHIR_R1_D2_2021MAY | 2021/03/15 | 2021/04/15 |
| | | | | | | | | | |
| V3 | Reaffirmation of HL7 Version 3 Standard: GELLO; A Common Expression Language, Release 2 | Clinical Decision Support | 1677 | 1st Normative Ballot | <p>GELLO is a class-based, object-oriented expression language based on the Object Management Group's (OMG) Object Constraint Language (OCL) used for expressing decision support logic in rules, alerts, reminders, and recommendations. This is a reaffirmation ballot of the stable normative GELLO standard.</p> | <p>REAFF_V3_GELLO_R2_N1_2021MAY</p> | 2021/03/15 | 2021/04/15 | |
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| Family | Work Group | Pool enrollment opens | Pool enrollment closes |
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| V3 | Modeling and Methodology Reaffirmation of HL7 Version 3 Standard: Reference Information Model, Release 7 | 2021/03/15 | 2021/04/15 |
| V3 | Orders and Observations Reaffirmation of HL7 Version 3 Standard: Clinical Statement CMEs, Release 1 | 2021/03/15 | 2021/04/15 |
| V3 | Security Reaffirm HL7 Version 3 Standard: Healthcare (Security and Privacy) Access Control Catalog, Release 3 | 2021/03/15 | 2021/04/15 |
| V3 | Services Oriented Architecture Reaffirmation of HL7 Version 3 Standard: Common Terminology Services (CTS), Release 2 | 2021/03/15 | 2021/04/15 |

Postponed Ballots

(Jump to [Current Ballots](#))

| Work Group | Project ID | Ballot Name | Family | Ballot Iteration | Ballot Description | Last Balloted | Unique Ballot ID | Pool enrollment opens | Pool enrollment closes |
|---------------------|------------|--|--------|------------------|---|---------------|------------------------------------|-----------------------|------------------------|
| FHIR Infrastructure | 1653 | HL7 FHIR® Implementation Guide: Hybrid/Intermediary Exchange, Release 1-US Realm | FHIR | 1st STU Ballot | This IG defines how providers, payers, intermediaries, and other actors will use routing information about the transaction originator and destination to support a hybrid model of point-to-point interaction as well as intermediary brokered interactions without the actors in either side needing detailed knowledge of how intermediary routing works. | | FHIR_IG_EXCH_ROUTE_R1_D1_WITHDRAWN | 2021/03/15 | 2021/04/15 |

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For more information on ballot procedure, such as general guidelines, and voting, see [Ballot Procedures and Guidelines](#)

[NonMember Participation in HL7 Ballots Instructions](#)

For Help, see [Balloting Help](#)

No labels

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