

Last Updated: 9/5/2018

Q. If our organization does not currently work with a PSO, must the solution demonstrate the ability to connect to a specific PSO or can we simulate the ability to select a PSO & generate the AHRQ common format?

A. The general preference is that any functionality be taken to the fullest extent possible. It would be preferable if the solution demonstrates the ability to connect to a specific PSO, but if it is not able to do that, that does not mean do not submit. That does not mean you are not eligible. If a simulation is something that works, that will not score quite as high, but if it doesn't connect a PSO, it does not mean that it does not count.

Q. We are an outpatient, ambulatory environment. The AHRQ common formats are for hospitals & pharmacy. Which common format report specification should we use with the solution?

A. Need to contact AHRQ. ONC does not manage that process. It may be just the set of common formats.

Q. Creating an EHR agnostic solution that also minimizes the extra work (clicks, typing) required by clinical users is challenging because all EHRs do not adhere to a standard API for exposing the UI and data. How will the judges determine the extent to which the solution is EHR agnostic?

A. ONC will be working with judges that have a variety of experience with different EHR formats and systems. One of the things that we hope to see in the slide deck and video demo, are demonstrating functionality that shows how it can be HER agnostic. Top finishers will be asked to given a live demo of the product.

Q. How do we prove our end-user testing?

A. You will have to show us what you did, this can include photos or collateral showing what was done. This could be a survey research artifact, or a focus panel. We are relying on you to tell us what you did, this will help make your submission a better submission.

Q. Will ONC host an challenge-related discussion forum where participants can collaborate & ask additional challenge related questions?

A. We do not have that functionality built in to the challenge site. We don't participate in a match-making process. If you are looking for teammates and we hear from others that have a similar need we can look in to putting you in touch.

Q. Will the intent be to merely report the existence of a potential patient safety issue at the EHR (for later comprehensive system-wide assessment and reporting), or to provide supporting meta--data to create a stand-alone report at the time of experience within the EHR (potentially disputing the clinical workflow)?

A. We want the relevant information about the issue itself, plus other relevant metadata like the particular EHR. Did it seem to be an error with the EHR in terms of coding or a pop up error box. What was the patient safety issue and what was the supposed cause of the error.

Q. Are you also expecting programming codes submission in addition to slide/video demonstration of the solution?

A. That actually the submission instead of the programming code.

Q. Can you elaborate on which report needs to be generated to follow the AHRQ standards?

A. The safety reports' appearance and the manner in which it is generated is at the discretion of the submitter. Submitters may choose the structure, look/feel, etc. and are required to undertake user testing and/or co-design with end users of the tool to ensure that it is appropriate for clinical practice. Thus, providing an example of a report is not feasible, as reports may be unique depending upon the setting of care and provider(s) selected. With regards to AHRQ standards, reporting must support AHRQ's common reporting formats known as "[common formats](#)".

Q. "EHR usability and safety issue" does this challenge emphasize *more* on EHR **Bugs Reporting** or **Patient Safety** issue?

A. This challenge emphasizes concerns about EHRs that may adversely impact patient safety.

Q. Is there any info on HIPAA that is good?

A. Since the app challenge concerns the safety and usability of the EHR, PHI isn't likely to be relevant to reporting. However, to address the question, de-identifying all patient information (if applicable) should be sufficient for meeting HIPAA requirements. For further information, please visit OCR's HIPAA Web page at: <https://www.hhs.gov/hipaa/for-professionals/privacy/laws-regulations/index.html>.