

USCDI Task Force 2021 Recommendations

Steven Lane, Co-Chair

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April 15, 2021

Health Information Technology Advisory Committee

The Office of the National Coordinator for Health Information Technology



Task Force Recommendations and Report

- Charges
- Membership
- Background
- Phase 1 Recommendations
- Phase 2 Work Plan

Task Force Charge

Overarching charge:

Review and feedback on the Draft USCDI Version 2 content and process

Specific charges:

Due

April 15, 2021

September 9, 2021

September 9, 2021

1 Evaluate Draft USCDI v2 and provide HITAC with recommendations for:

1a - Data classes and elements from USCDI v1 including applicable standards version updates

1b - New data classes and elements from Draft USCDI v2 including applicable standards

1c - Level 2 data classes and elements not included in Draft USCDI v2

2 Evaluate the USCDI expansion process and provide HITAC with recommendations for:

2a- ONDEC submission system improvements

2b - Evaluation criteria and process used to assign levels to submitted data classes and elements

2c - Prioritization process used by ONC to select new data classes and elements for Draft USCDI v2

3 Recommend ONC priorities for USCDI version 3 submission cycle

Task Force Roster

Name	Organization
Steven Lane (Co-Chair)	Sutter Health
Leslie Kelly Hall (Co-Chair)	Engaging Patient Strategy
Ricky Bloomfield	Apple
Hans Buitendijk	Cerner
Grace Cordovano	Enlightening Results
Jim Jirjis	HCA Healthcare
Ken Kawamoto	University of Utah Health
John Kilbourne	VA
Leslie Lenert	Medical University of South Carolina
Clement McDonald	National Library of Medicine

Name	Organization
Aaron Miri	The University of Texas at Austin, Dell Medical School and UT Health Austin
Brett Oliver	Baptist Health
Mark Savage	University of California, San Francisco's Center for Digital Health Innovation
Michelle Schreiber	CMS
Sasha TerMaat	Epic
Andrew Truscott	Accenture
Sheryl Turney	Anthem, Inc.
Daniel Vreeman	RTI International
Denise Webb	Indiana Hemophilia and Thrombosis Center

Draft USCDI v2

Allergies and Intolerances <ul style="list-style-type: none"> • Substance (Medication) • Substance (Drug Class) • Reaction 	Diagnostic Imaging <ul style="list-style-type: none"> • Diagnostic Imaging Order • Diagnostic Imaging Report • Diagnostic Imaging Narrative 	Laboratory <ul style="list-style-type: none"> • Tests • Values/Results • Laboratory Report Narrative • Pathology Report Narrative 	Problems <ul style="list-style-type: none"> • Problems • Date of Diagnosis • Date of Resolution 	Vital Signs <ul style="list-style-type: none"> • Diastolic Blood Pressure • Systolic Blood Pressure • Body Height • Body Weight • Heart Rate • Respiratory Rate • Body Temperature • Pulse Oximetry • Inhaled Oxygen Concentration • BMI Percentile (2-20 Years) • Weight-for-length Percentile (Birth-36 Months) • Occipital-frontal Head Circumference Percentile (Birth-36 Months)
Assessment and Plan of Treatment <ul style="list-style-type: none"> • Assessment and Plan of Treatment 	Encounter Information <ul style="list-style-type: none"> • Encounter Type • Encounter Diagnosis • Encounter Time 	Medications <ul style="list-style-type: none"> • Medications 	Procedures <ul style="list-style-type: none"> • Procedures 	
Care Team Members <ul style="list-style-type: none"> • Care Team Members • Provider Name • Provider Identifier 	Goals <ul style="list-style-type: none"> • Patient Goals 	Patient Demographics <ul style="list-style-type: none"> • First Name • Last Name • Previous Name • Middle Name (incl. middle initial) • Suffix • Birth Sex • Date of Birth • Race • Ethnicity • Preferred Language • Current Address • Previous Address • Phone Number • Phone Number Type • Email Address 	Provenance <ul style="list-style-type: none"> • Author Time Stamp • Author Organization 	
Clinical Notes <ul style="list-style-type: none"> • Consultation Note • Discharge Summary Note • History & Physical • Procedure Note • Progress Note 	Health Concerns <ul style="list-style-type: none"> • Health Concerns 		Smoking Status <ul style="list-style-type: none"> • Smoking Status 	
	Immunizations <ul style="list-style-type: none"> • Immunizations 		Unique Device Identifier(s) for a Patient's Implantable Device(s) <ul style="list-style-type: none"> • Unique Device Identifier(s) for a Patient's Implantable Device(s) 	

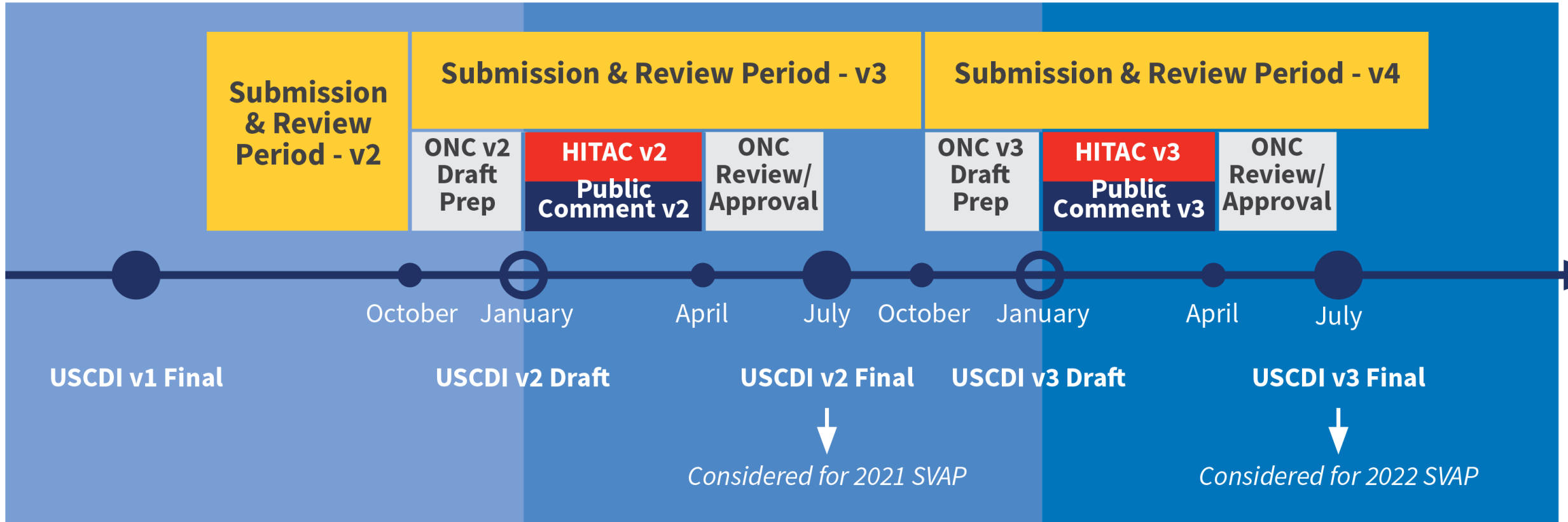
Key  New Data Class or Element
 Data Element reclassified

USCDI Version Update Process

2020

2021

2022



Task 1a Recommendations - Evaluate v1 Data Elements and Standards



Task 1a Recommendations - Evaluate v1 Data Elements and Standards

USCDI-TF-2021-Phase 1_Recommendation 01

Data Class	Assessment and Plan of Treatment
Data Element	Assessment and Plan of Treatment
Recommendations	Clarify need for both Assessment and Plan of Treatment elements, separately
Justification	Unclear scope and definitions



Task 1a Recommendations - Evaluate v1 Data Elements and Standards

USCDI-TF-2021-Phase 1_Recommendation 02

Data Class	Diagnostic Imaging
Data Element	Diagnostic Imaging Order
Recommendation	Clarify scope or limits of imaging study types (only radiology, or includes visible light photographic or video images, e.g., from endoscopic studies?)



Task 1a Recommendations - Evaluate v1 Data Elements and Standards

USCDI-TF-2021-Phase 1_Recommendation 03

Data Class	Laboratory
Data Element	Test
Recommendation	Clarify scope and definition to distinguish from Diagnostic Studies/Exams



Task 1a Recommendations - Evaluate v1 Data Elements and Standards

USCDI-TF-2021-Phase 1_Recommendation 04

Data Class	Laboratory
Data Element	Values/Results
Recommendation	Add Unified Code for Units of Measure (UCUM) as applicable standard
Justification	UCUM is widely used for lab result values



Task 1a Recommendations - Evaluate v1 Data Elements and Standards

USCDI-TF-2021-Phase 1_Recommendation 05

Data Class	Problems
Data Element	Problems
Recommendation	Add ICD-10 as applicable standard (allowed)
Justification	ICD-10 is commonly used to represent problems

Task 1a Recommendations - Evaluate v1 Data Elements and Standards

USCDI-TF-2021-Phase 1_Recommendation 06

Data Class	Procedures
Data Element	Procedures
Recommendation	<p>Clarify definition and scope of procedures, whether it includes diagnostic <u>and</u> therapeutic procedures.</p> <p>Differentiate between diagnostic studies and procedures</p>
Justification	If Diagnostic Studies data class is added, need to distinguish diagnostic and therapeutic procedures

Task 1b Recommendations – Evaluate New Data Elements in Draft v2

Task 1b Recommendations – Evaluate New Data Elements in Draft v2

USCDI-TF-2021-Phase 1_Recommendation 07

Data Class	Care Team Members
Data Elements	Provider Identifier
Recommendation	Should include identifier code system (i.e., NPI) and version

Task 1b Recommendations – Evaluate New Data Elements in Draft v2

USCDI-TF-2021-Phase 1_Recommendation 08

Data Class	Care Team Members
Data Elements	Provider Identifier Provider Name
Recommendation	Change data element names to Care Team Member Name and Identifier
Justification	Data elements pertain to all care team members, including non-providers and family caregivers

Task 1b Recommendations – Evaluate New Data Elements in Draft v2

USCDI-TF-2021-Phase 1_Recommendation 09

Data Class	Diagnostic Imaging
Data Element (Reclassified from Clinical Notes)	Diagnostic Imaging Narrative
Recommendation	Remove
Justification	Questionable value of stand-alone Narrative element without context of whole report
Data Element	Diagnostic Imaging Report
Recommendation	Support new element, but clarify definition and scope to require both structured and unstructured/narrative components



Task 1b Recommendations – Evaluate New Data Elements in Draft v2

USCDI-TF-2021-Phase 1_Recommendation 10

Data Class	Encounter Information
Data Elements	Encounter Diagnosis
Recommendation	Specifically reference coded billing diagnoses for encounters.

Task 1b Recommendations – Evaluate New Data Elements in Draft v2

USCDI-TF-2021-Phase 1_Recommendation 11

Data Class	Encounter Information
Data Elements	Encounter Time
Recommendation	Clarify scope and definitions of timing element(s) and provide examples (does it include start/stop time, admission/discharge time, scheduled/arrival time?)
Justification	The duration of encounters is utilized in CMS electronic clinical quality measures (eCQMs) and is beneficial for workflow management.

Task 1b Recommendations – Evaluate New Data Elements in Draft v2

USCDI-TF-2021-Phase 1_Recommendation 12

Data Class	Laboratory
Data Elements (Reclassified from Clinical Notes)	Laboratory Report Narrative Pathology Report Narrative
Recommendation	Remove
Justification	Questionable value of stand-alone Narrative elements without context of whole report

Task 1b Recommendations – Evaluate New Data Elements in Draft v2

USCDI-TF-2021-Phase 1_Recommendation 13

Data Class	Laboratory
Data Element	Value/Result
Recommendation	Support new element, but clarify definition and scope of Value/Result to require both structured and unstructured/narrative components
Justification	Aligns with Laboratory Value/Result containing structured and unstructured (narrative) content

Task 1c Recommendations – Level 2 data classes and elements not in Draft USCDI v2

Task 1c Recommendations – Level 2 data classes and elements not in Draft USCDI v2

USCDI-TF-2021-Phase 1_Recommendation 14

Data Class	Care Team Members
Data Elements	Provider Role Provider Location Provider Telecom Information Provider NPI Provider DEA Number
Recommendation	Add these level 2 data elements to v2 Change names from Provider to Care Team
Justification	Supports communication and coordination between care team members and automation of information routing. These data elements are well specified, understood and routinely documented.

Task 1c Recommendations – Level 2 data classes and elements not in Draft USCDI v2

USCDI-TF-2021-Phase 1_Recommendation 15

Data Class	Diagnostic Studies/Exams
Data Element	Diagnostic studies and exams with results
Recommendations	<p>Add to USCDI v2</p> <p>Clarify the scope and definitions for diagnostic study types or categories including (without images):</p> <ul style="list-style-type: none"> - Colonoscopy - Echocardiogram - Electrocardiogram - Pulmonary Function Tests
Justification	Diagnostic studies represents a significant gap area in USCDI v1 and Draft v2

Task 1c Recommendations – Level 2 data classes and elements not in Draft USCDI v2

USCDI-TF-2021-Phase 1_Recommendation 16

Data Class	Encounter Information
Data Element	Encounter Disposition
Recommendation	<p>Add data element, applicable to at least hospital, short stay and ED encounters and long term care when possible</p> <p>Applicable standard: HL7 Discharge Disposition code system</p>
Justification	<p>Already collected in CEHRT modules, used for billing, eCQMs, attribution, accountability</p>



Task 1c Recommendations – Level 2 data classes and elements not in Draft USCDI v2

USCDI-TF-2021-Phase 1_Recommendation 17

Data Class	Encounter Information
Data Element	Encounter Location
Recommendation	Add data element to USCDI v2 Specify to include or allow TIN/CCN as location identifiers
Justification	Compliments new Provider Identifier element to enable capture of facility or organization identifiers for encounters



Task 1c Recommendations – Level 2 data classes and elements not in Draft USCDI v2

USCDI-TF-2021-Phase 1_Recommendation 18

Data Class	Medication
Data Element	Discharge Medications
Recommendation	Add, contingent on inclusion in HL7® US Core and C-CDA Implementation Guides
Justification	Distinction of discharge medications is key to safe transitions of care, coordination of care, and patient / caregiver engagement.

Task 1c Recommendations – Level 2 data classes and elements not in Draft USCDI v2

USCDI-TF-2021-Phase 1_Recommendation 19

Data Class	Orders
Data Element	Types of orders for medical care/services
Recommendation	Add to v2 Specify that orders for end of life care (palliative, hospice, comfort care) be included in certification testing
Justification	Interoperability of orders would add needed flexibility to patients and providers, allowing orders to move more easily between organizations, facilitating patient choice and greater value.



Task 1c Recommendations – Level 2 data classes and elements not in Draft USCDI v2

USCDI-TF-2021-Phase 1_Recommendation 20

Data Class	Patient Demographics
Data Element	Gender Identity Sexual Orientation
Recommendation	Add, contingent on inclusion in HL7® USCore and C-CDA Implementation Guides
Justification	Gender identity and sexual orientation data are fundamental to patient safety, equity and care.



Task 1c Recommendations – Level 2 data classes and elements not in Draft USCDI v2

USCDI-TF-2021-Phase 1_Recommendation 21

Data Class	Patient Demographics
Data Element	Medicare Beneficiary ID
Recommendation	Add, contingent on inclusion in HL7® USCore and C-CDA Implementation Guides
Justification	MBI is readily available, required for billing, advances linkage between billing and EHRs

Task 1c Recommendations – Level 2 data classes and elements not in Draft USCDI v2

USCDI-TF-2021-Phase 1_Recommendation 22

Data Class	Social Determinants of Health
Data Element	Assessment Problems/Health Concerns Interventions Goals Outcomes
Recommendation	Add these level 2 data elements Request ONC to prioritize the relevant IGs for finalization as a prerequisite to adding these data elements to USCDI.
Justification	Collection and use of SDOH data elements provide support for the social and behavioral factors which impact individuals disease state, treatment and care.

Task Force suggestions for consideration for USCDI Version 3



Task Force suggestions for consideration for USCDI Version 3

Data Class	Suggestions for development for future USCDI versions
Encounter Information	Encounter Disposition applies to long term care Reason for Encounter (AKA Chief Complaint)
Orders	Additional End of Life Care orders: - Obligation or Prohibition Instruction for Life Sustaining Treatment (DNR/DNI) - Portable Medical Orders for Life-Sustaining Treatments (POLST/MOLST)
Advance Directives	Advance Directive Observation Care Experience Preference Durable Medical Power of Attorney Living Will Personal Advance Care Plan Quality of Life Priorities

Further Discussion: Guidance Needed

- Discussions continue around scope and alignment if USCDI regulatory efforts and stakeholder needs.
- Stakeholders present different and sometimes competing needs.
 - Data Underserved:
 - Patients, public health, FQHC e.g.
 - Providers
 - Payers
 - Regulatory bodies
 - Others?
- Phase 2 Planning
 - Task 2 - Evaluate the USCDI expansion process
 - Task 3 - Recommend ONC priorities for USCDI version 3 submission cycle
- Stakeholder Guidance Needed

Task Force suggestions for consideration for USCDI Version 3

- The task force encourages ONC to promote all Level 2 data elements within a class when these elements are mature, in broad use, and well- represented by standards already used for other data elements.
 - Examples include: Facility Level Data, Patient Demographics.
- The task force also encourages ONC to consider expansions of USCDI that bring utility to new stakeholders.

Task Force Charges and Due Dates

Overarching charge:

Review and provide recommendations on the Draft USCDI Version 2 content and process

Specific charges:

- | | <u>Due</u> |
|---|--------------------------|
| <p>1 Evaluate Draft USCDI v2 and provide HITAC with recommendations for:</p> <p>1a - Data classes and elements from USCDI v1 including applicable standards version updates</p> <p>1b - New data classes and elements from Draft USCDI v2 including applicable standards</p> <p>1c - Level 2 data classes and elements not included in Draft USCDI v2</p> | April 15, 2021 |
| <p>2 Evaluate the USCDI expansion process and provide HITAC with recommendations for:</p> <p>2a - ONDEC submission system improvements</p> <p>2b - Evaluation criteria and process used to assign levels to submitted data classes and elements</p> <p>2c - Prioritization process used by ONC to select new data classes and elements for Draft USCDI v2</p> | September 9, 2021 |
| <p>3 Recommend ONC priorities for USCDI version 3 submission cycle</p> | September 9, 2021 |

Phase 2 Scheduled Meetings

- April 20, 2021
- April 27, 2021
- May 4, 2021
- May 11, 2021
- May 18, 2021
- May 25, 2021



Questions?