



Pharmacy Interoperability and Emerging Therapeutics Task Force 2023 Meeting #4

Shelly Spiro, Co-Chair

Hans Buitendijk, Co-Chair

July 19, 2023





Call to Order/Roll Call

Mike Berry, Designated Federal Officer, ONC

Pharmacy Interoperability and Emerging Therapeutics Task Force 2023 Roster



Name	Organization	Name	Organization
Hans Buitendijk* (Co-Chair)	Oracle Health	Shelly Spiro (Co-Chair)	Pharmacy HIT Collaborative
Pooja Babbrah	Point-of-Care Partners	Deven McGraw*	Invitae Corporation
Chris Blackley	Prescriptive North Dakota Health Information Network	Ketan Mehta	Micro Merchant Systems
Shila Blend*		Justin Neal	Noble Health Services Dell Medical School, University of Texas at Austin
David Butler	Curatro, LLC Texas Department of State Health Services	Eliei Oliveira*	
Steven Eichner*	MCG Health, part of the Hearst Health network	Naresh Sundar Rajan*	CyncHealth
Rajesh Godavarthi*	Centers for Disease Control and Prevention	Scott Robertson	Bear Health Tech Consulting
Adi V. Gundlapalli**		Alexis Snyder*	Individual
Jim Jirjis*	HCA Healthcare	Fillipe Southerland*	Yardi Systems, Inc.
Summerpal Kahlon	Rocket Health Care	Christian Tadrus	Community Pharmacy Owner
Steven Lane*	Health Gorilla Department of Veterans Health Affairs	Sheryl Turney*	Elevance Health
Meg Marshall**		Afton Wagner	Walgreens
Anna McCollister*	Individual		

Agenda

10:30 AM

Call to Order/Roll Call

- Mike Berry, Designated Federal Officer, ONC

10:35 AM

Opening Remarks

- Shelly Spiro, Co-Chair
- Hans Buitendijk, Co-Chair

10:40 AM

Task 1 Guest Presentation

- Laura Conn, MPH, Lead, Electronic Case Reporting (eCR), Public Health Data Transmission Branch (proposed), Detect and Monitor Division (proposed), Office of Public Health Data, Surveillance and Technology, CDC
- Lynn Gibbs Scharf, MPH, Chief, Informatics and Data Analytics Branch, Immunization Services Division, National Center for Immunization and Respiratory Diseases, CDC
- Agha (Nabeel) Khan, MD, MPH, MBA, Senior Advisor for Informatics, Office of Informatics, National Center for Immunization & Respiratory Diseases, CDC

10:55 AM

Task 1 Long Term Recommendation for Public Health, Emergency Use Authorizations, and Prescribing Authorities

- Shelly Spiro, Co-Chair
- Hans Buitendijk, Co-Chair

11:50 AM

Public Comment

- Mike Berry, Designated Federal Officer, ONC

11:55 AM

Task Force Work Planning

- Shelly Spiro, Co-Chair
- Hans Buitendijk, Co-Chair

12:00 PM

Adjourn



Opening Remarks

Shelly Spiro, Co-Chair

Hans Buitendijk, Co-Chair

Pharmacy Interoperability and Emerging Therapeutics Task Force 2023 Charge

Overarching charge: Identify recommendations to support interoperability between pharmacy constituents, and the exchange of information necessary for medication management, patient safety and consumer engagement.

Recommendations Due: November 9, 2023

Specific charge:

1. Public Health, Emergency Use Authorizations, and Prescribing Authorities
2. Identify opportunities and recommendations to improve interoperability between pharmacy constituents (prescribers, pharmacists, pharmacy benefit managers, dispensers, payers, intermediaries, PDMPs, public health agencies, HIEs, third party service providers, consumers, etc.) for pharmacy-based clinical services and care coordination.
3. Identify standards needs to support prescribing and management of emerging therapies including, but not limited to specialty medications, digital therapeutics, and gene therapies.
4. Identify policy and technology needs and considerations for direct-to-consumer medication services.



Pharmacy Interoperability and Emerging Therapeutics Task Force 2023 Discussion

TOPIC 1 (for discussion July 12 and July 19):

1. Public Health, Emergency Use Authorizations, and Prescribing Authorities

Short-term

- a. *Identify critical standards and data needs for pharmacists and interested parties to participate in emergency use interventions.*
- b. *Are there actions ONC can take to enable data exchange in support of public health emergency use cases? For example, Test to Treat and COVID-19 treatment prescribing?*

Long-term

- a. Recommendations to better integrate pharmacy systems and data for public health surveillance, reporting and public health interventions.





Task 1 Guest Presentation

Laura Conn, Lead, Electronic Case Reporting (eCR), Public Health Data Transmission Branch (proposed), Detect and Monitor Division (proposed), Office of Public Health Data, Surveillance and Technology, CDC

Lynn Gibbs Scharf, MPH, Chief, Informatics and Data Analytics Branch, Immunization Services Division, National Center for Immunization and Respiratory Diseases, CDC

Agha (Nabeel) Khan, MD, MPH, MBA, Senior Advisor for Informatics, Office of Informatics, National Center for Immunization & Respiratory Diseases, CDC

Electronic Case Reporting (eCR)

July 19, 2023

Laura Conn
eCR Program Lead, OPHDST, CDC

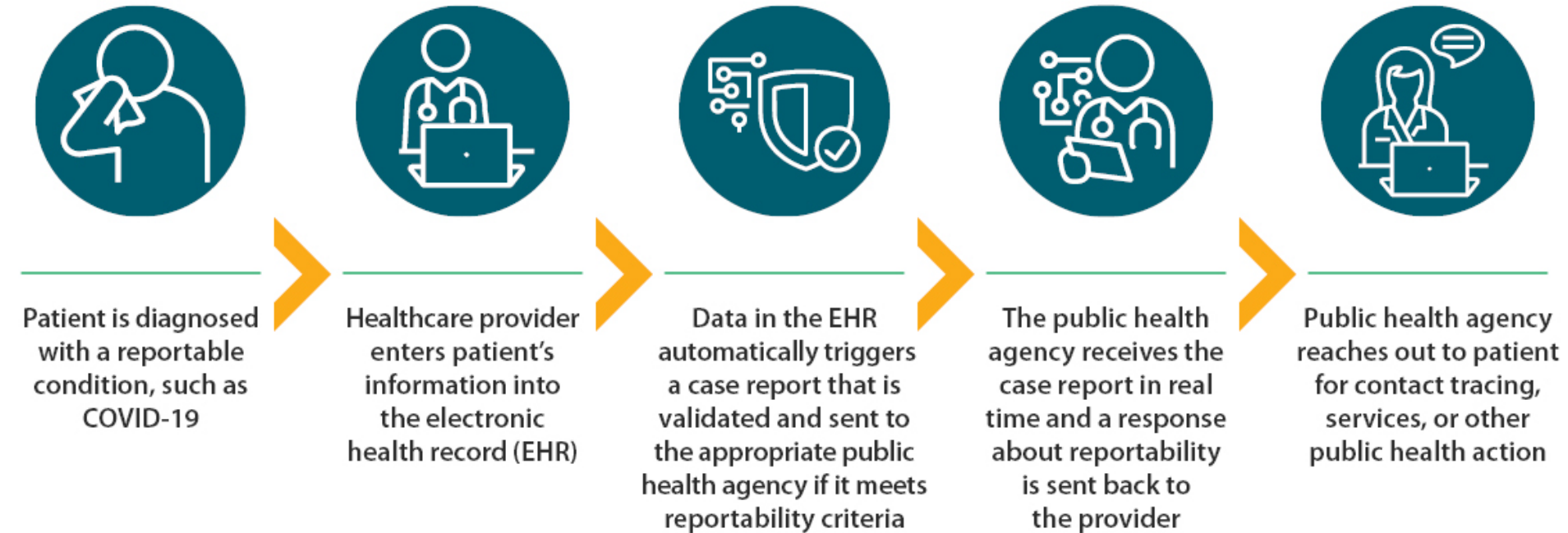


Introduction

- Timely and complete patient data is critical for public health surveillance and response during routine and emergency times
- Reporting of conditions of public health significance is required in all U.S. states and territories
- There are currently **208 conditions** that can be reported using eCR to any given public health jurisdiction, including:
 - **infectious diseases** such as tuberculosis and COVID-19
 - **chronic diseases** such as cancer
 - **noninfectious conditions** such as Parkinson's disease or opioid overdose

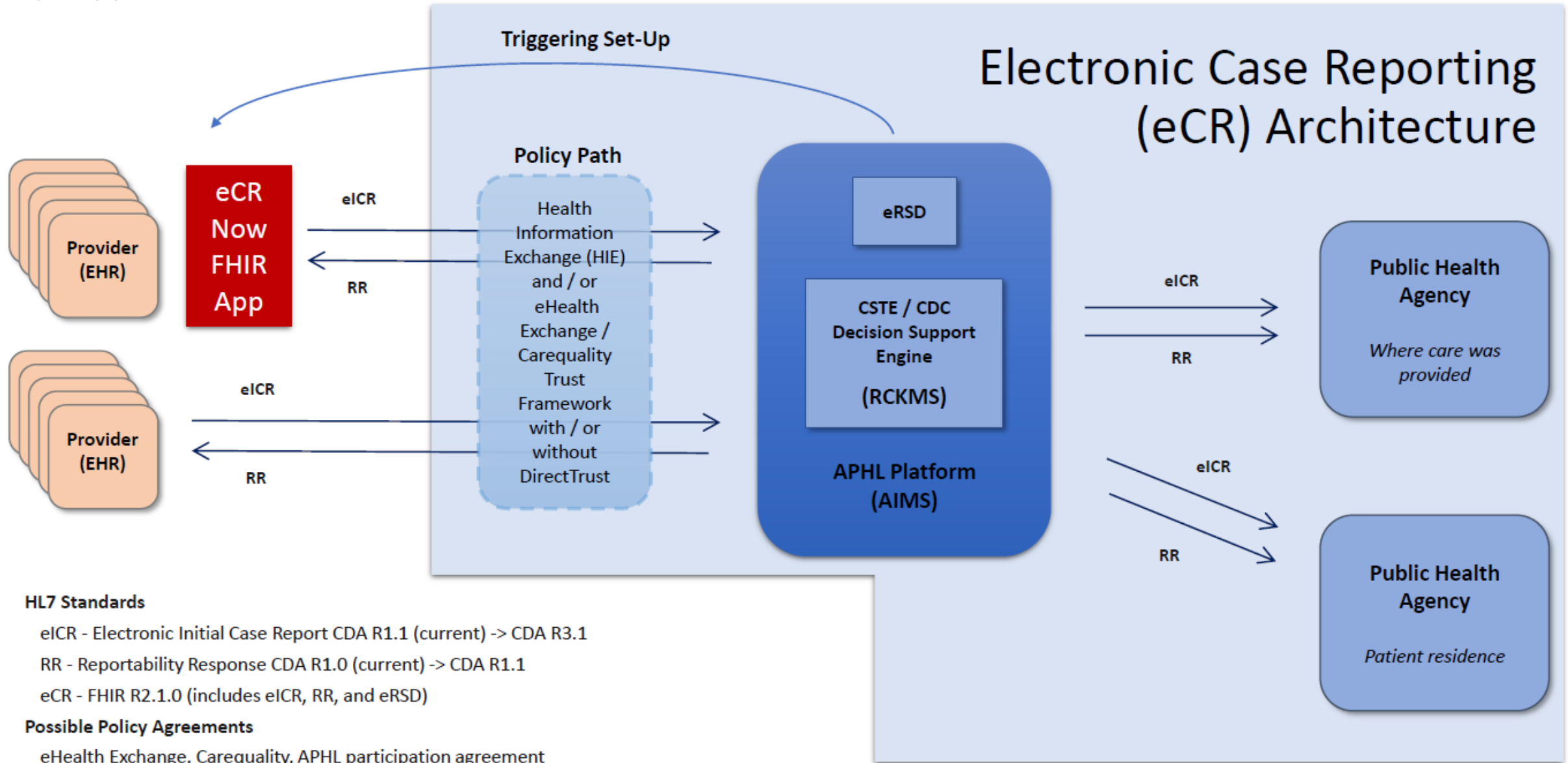
eCR = automated generation and transmission of case reports from the electronic health record (EHR) to public health agencies (PHAs) for review and action

How Does eCR Work?



cdc.gov/eCR

CS339736-A 4/19/2023 11 AM



HL7 Standards

- eICR - Electronic Initial Case Report CDA R1.1 (current) -> CDA R3.1
- RR - Reportability Response CDA R1.0 (current) -> CDA R1.1
- eCR - FHIR R2.1.0 (includes eICR, RR, and eRSD)

Possible Policy Agreements

eHealth Exchange, Carequality, APHL participation agreement

Terms

- RCKMS - Reportable Condition Knowledge Management System
- eRSD - Electronic Reporting and Surveillance Distribution System




eICR Data Elements, Release 1.1

Patient	Patient	Provider	Facility	Encounter	Provenance
<ul style="list-style-type: none">• Identity<ul style="list-style-type: none">• Patient Id• Patient Name• Parent/Guardian Name• Contact<ul style="list-style-type: none">• Patient or Parent/ Guardian Phone• Patient or Parent/ Guardian Email• Location<ul style="list-style-type: none">• Patient Address	<ul style="list-style-type: none">• Demographics<ul style="list-style-type: none">• Patient DOB• Patient Administrative Sex• Patient Birth Sex• Patient Race• Patient Ethnicity• Patient Preferred Language	<ul style="list-style-type: none">• Identity<ul style="list-style-type: none">• Provider Id• Provider Name• Contact<ul style="list-style-type: none">• Provider Phone• Provider Fax• Provider Email• Location<ul style="list-style-type: none">• Provider Office/Facility Name• Provider Address	<ul style="list-style-type: none">• Identity<ul style="list-style-type: none">• Facility ID Number• Facility Name• Facility Type/ Hospital Unit• Contact<ul style="list-style-type: none">• Facility Phone• Facility Fax• Location<ul style="list-style-type: none">• Facility Address	<ul style="list-style-type: none">• Encounter Type• Visit Date/Time (outpatient)• Admission Date/Time• Discharge Date/Time	<ul style="list-style-type: none">• When<ul style="list-style-type: none">• Date of Report• Report Submission Date/Time• Where<ul style="list-style-type: none">• Sending application
Clinical: Notes, Symptoms, & Diagnoses	Clinical: Lab	Clinical: Medication	Clinical: Risk Factors - Pregnancy	Clinical: Risk Factors - Other	Clinical: Other
<ul style="list-style-type: none">• History of Present Illness• Reason for Visit• Symptom List• Problem List<ul style="list-style-type: none">• Problem (Diagnosis) Trigger• Encounter Diagnoses<ul style="list-style-type: none">• Problem (Diagnosis) Trigger• Diagnosis Date• Date of Onset	<ul style="list-style-type: none">• Lab Order Code (Ordered test)<ul style="list-style-type: none">• Lab Order Code Trigger• Placer Order Number• Lab Order Code (Resulted test)<ul style="list-style-type: none">• Lab Order Code Trigger• Lab Result<ul style="list-style-type: none">• Lab Result Code Trigger• Filler Order Number	<ul style="list-style-type: none">• Medications Administered (list)• Immunization Status (list)	<ul style="list-style-type: none">• Pregnancy Status	<ul style="list-style-type: none">• Patient Occupation• Travel History Dates• Travel History Location	<ul style="list-style-type: none">• Death Date

eICR elements are aligned with the USCDI.

New Elements in eICR, Release 3.1

Patient	Clinical: Lab	Clinical: Medication	Clinical: Risk Factors - Pregnancy	Clinical: Risk Factors -Other	Clinical: Other
<ul style="list-style-type: none">• Gender identity• Tribal Affiliation• Tribal Enrollment Status• Country of Nationality• Country of Residence	<ul style="list-style-type: none">• Lab Result Status• Specimen Source• Specimen Type• Specimen Id• Specimen Collection Date	<ul style="list-style-type: none">• Medications: Admission• Medications: Administered• Medications: Historical• Medications: Planned• Immunization Status• Vaccine Credential Patient Assertion	<ul style="list-style-type: none">• Pregnancy Status• Pregnancy Status Determination Date and Method• Estimated Date of Delivery and Determination Method• Estimated Gestational Age of Pregnancy• Estimated Gestational Age Determination Date and Method• Last Menstrual Period• Pregnancy Outcome and Date• Postpartum Status	<ul style="list-style-type: none">• Present/Usual Industry• Present/Usual Occupation• Current Job Title• Current Employer Name, Phone, Address• Occupational Exposure• Emergency Outbreak Information• Exposure/Contact Information• Travel History: Purpose and details• Homelessness Status• Disability Status	<ul style="list-style-type: none">• Therapeutic Medication Response• Vital Signs• Chief Complaint• Past Medical History• Review of Systems• Procedure• Planned Procedure



eCR By The Numbers*

(Healthcare Facilities)



>26,800 facilities are in production for eCR



1,999 (27%) hospitals are using eCR



346 (25%) Critical Access Hospitals are using eCR



1,361 (10%) Federally Qualified Health Center service sites (including look-alike sites) are using eCR



10,980 (10%) ambulatory facilities staffed by MIPS providers are using eCR

*as of July 17, 2023



SINGLE TARGET FOR REPORTING ALL CONDITIONS TO ALL JURISDICTIONS

This electronic case reporting approach benefits both healthcare and public health.

What Makes eCR Successful?

- Shared, scalable, and interoperable architecture
- Single connection point for healthcare organizations
- Providers onboard once for reporting to all PHAs
- Single data standard for all conditions
- Policy framework built on existing health information networks
- Secure data exchange
- Support for all reportable conditions
- Capture of data elements needed by PHAs
- Meets jurisdictional public health reporting requirement of providers
- Flexible to allow reporting needs to change over time

COVID-19 Pharmacy Reporting

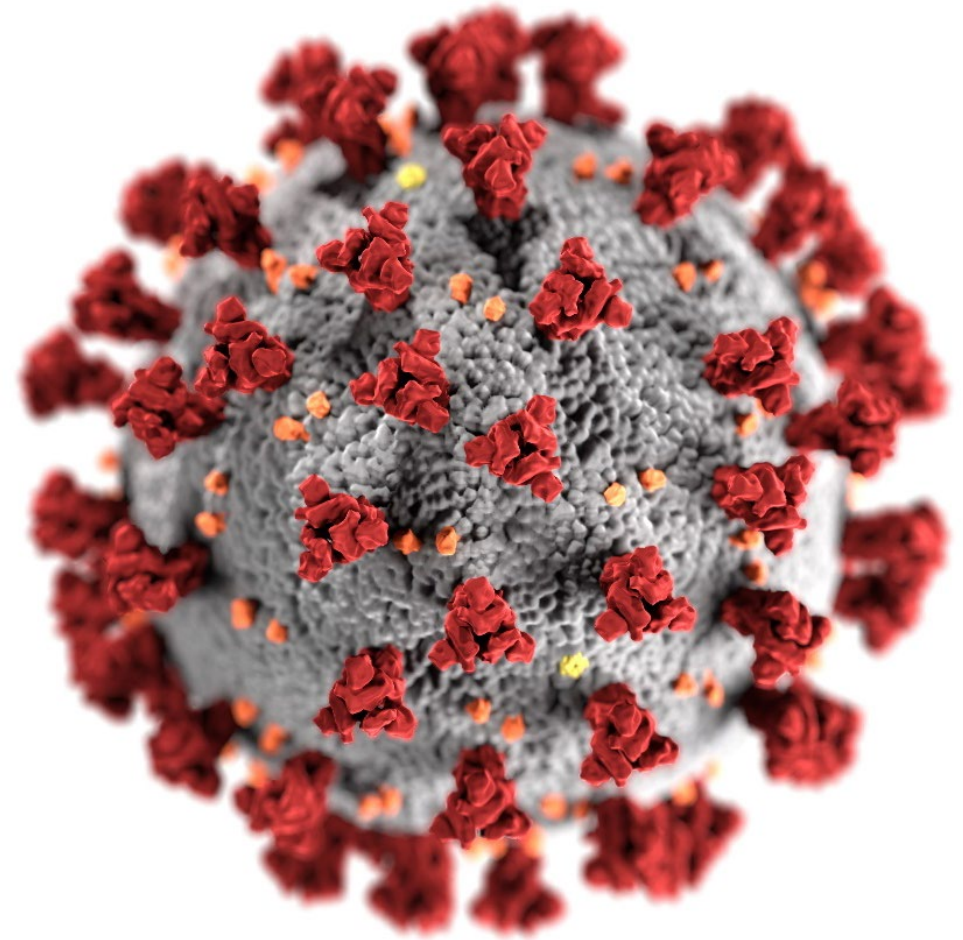
HITAC Task force Update – July 2023

Lynn Gibbs-Scharf, MPH

Branch Chief
Informatics and Data Analytics Branch
Immunization Services Division
National Center for Immunization and Respiratory Diseases

Agha (Nabeel) Khan, MBBS, MPH, MBA

Senior Advisor for Informatics
Office of the Director
National Center for Immunization and Respiratory Diseases



cdc.gov/coronavirus

COVID-19 Retail Pharmacy Program Overview

- The Federal Retail Pharmacy Program is a public-private partnership that involves 21 national pharmacy partners.
- This includes more than 41,000 pharmacy locations nationwide, including long-term care pharmacies.
- As of July 14, 2023, **304** million COVID-19 vaccine doses have been administered and reported by retail pharmacies across programs in the US (44.5%)
- Pharmacy partners have supported programs to provide onsite clinics to reach specific populations including long-term care, teachers, community colleges, and schools.



List of Federal Pharmacy Retail Partners

Chain Partners

1. **Walgreens** (incl. Duane Reade)
2. **CVS Pharmacy, Inc.** (incl. Long's)
3. **Walmart, Inc.** (incl. Sam's Club)
4. **Rite Aid Corp.**
5. **Kroger Co.** (incl. Kroger, Harris Teeter, Fred Meyer, Frys, Ralphs, King Soopers, Smiths, City Market, Dillons, Marianos, Pick-n-Save, Copps, Metro Market)
6. **Publix Super Markets, Inc.**
7. **Costco Wholesale Corp.**
8. **Albertsons Companies, Inc.** (incl. Osco, Jewel-Osco, Albertsons, Albertsons Market, Safeway, Tom Thumb, Star Market, Shaws, Haggen, Acme, Randalls, Carrs, Market Street, United, Vons, Pavilions, Amigos, Lucky's, Pak n Save, Sav-On)
9. **Hy-Vee, Inc.**
10. **Meijer Inc.**
11. **H-E-B, LP**
12. **Retail Business Services, LLC** (incl. Food Lion, Giant Food, The Giant Company, Hannaford Bros Co, Stop & Shop)
13. **Winn-Dixie Stores Inc.** (incl. Winn-Dixie, Harveys, Fresco Y Mas)

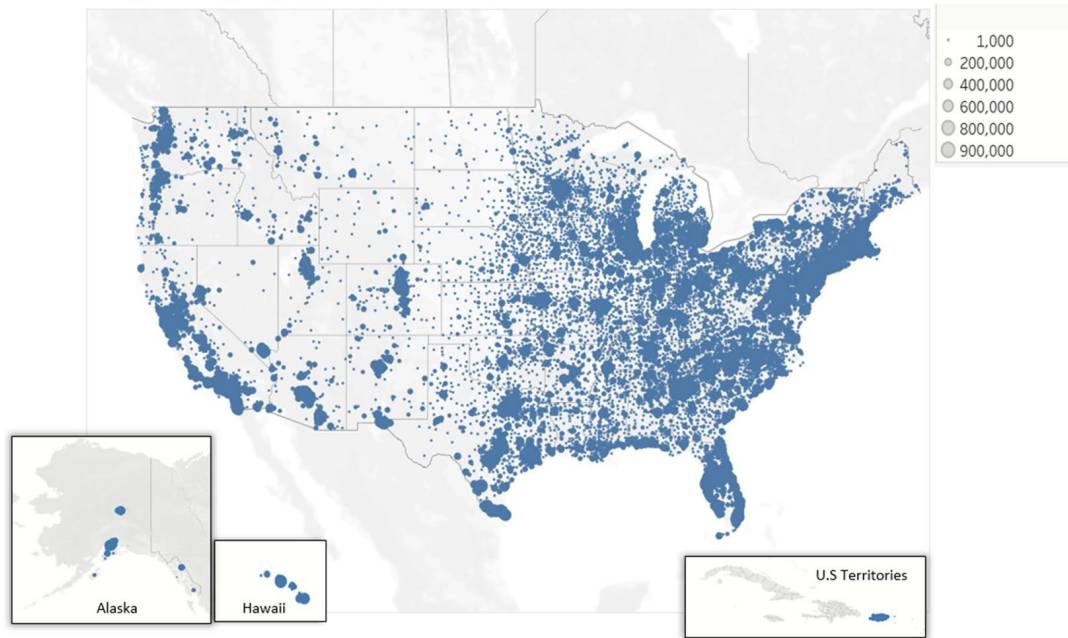
Networks

14. **Topco Associates, LLC** (incl. Acme Fresh Markets, Associated Food Stores, Big-Y Pharmacy and Wellness Center, Brookshire's Pharmacy, Super One Pharmacy, FRESH by Brookshire's Pharmacy, Coborn's Pharmacy, Cash Wise Pharmacy, MarketPlace Pharmacy, Giant Eagle, Hartig Drug Company, King Kullen, Food City Pharmacy, Ingles Pharmacy, Raley's, Bel Air, Nob Hill Pharmacies, Save Mart Pharmacies, Lucky Pharmacies, SpartanNash, Price Chopper, Market 32, Tops Friendly Markets, ShopRite, Wegmans, Weis Markets, Inc.)
15. **CPESN USA, LLC**
16. **GeriMed** (retail and long-term care pharmacies)
17. Good Neighbor Pharmacy and AmerisourceBergen Drug Corporation's pharmacy services administrative organization (PSAO), Elevate Provider
18. **Health Mart Systems, Inc.**
19. **Innovatix** (long-term care pharmacies)
20. **LeaderNET** and Medicine Shoppe, Cardinal Health's PSAOs
21. **Managed Health Care Associates** (retail and long-term care pharmacies)

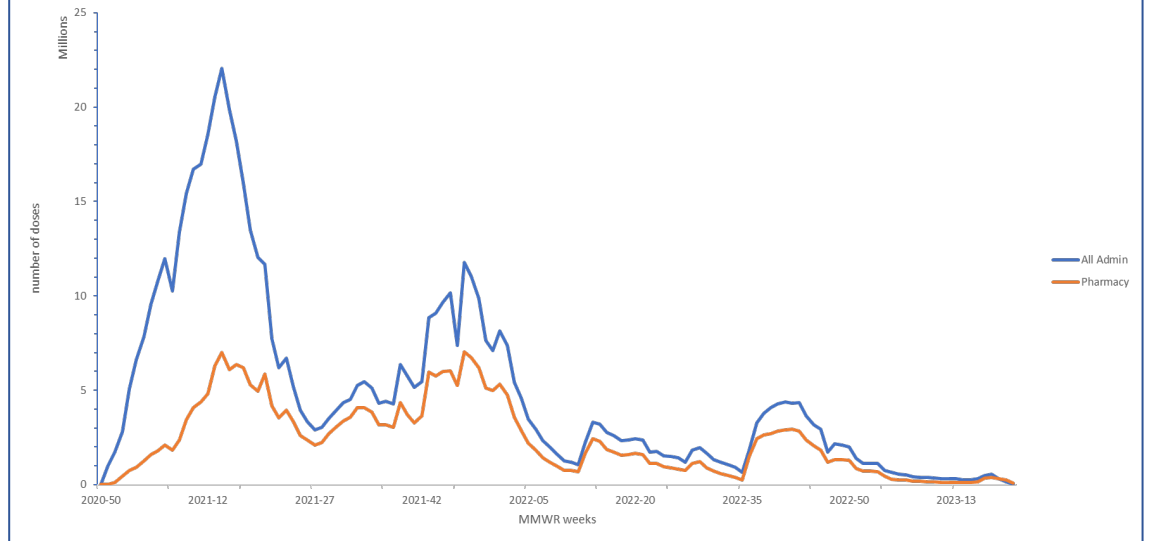


COVID-19 Pharmacy Administrations

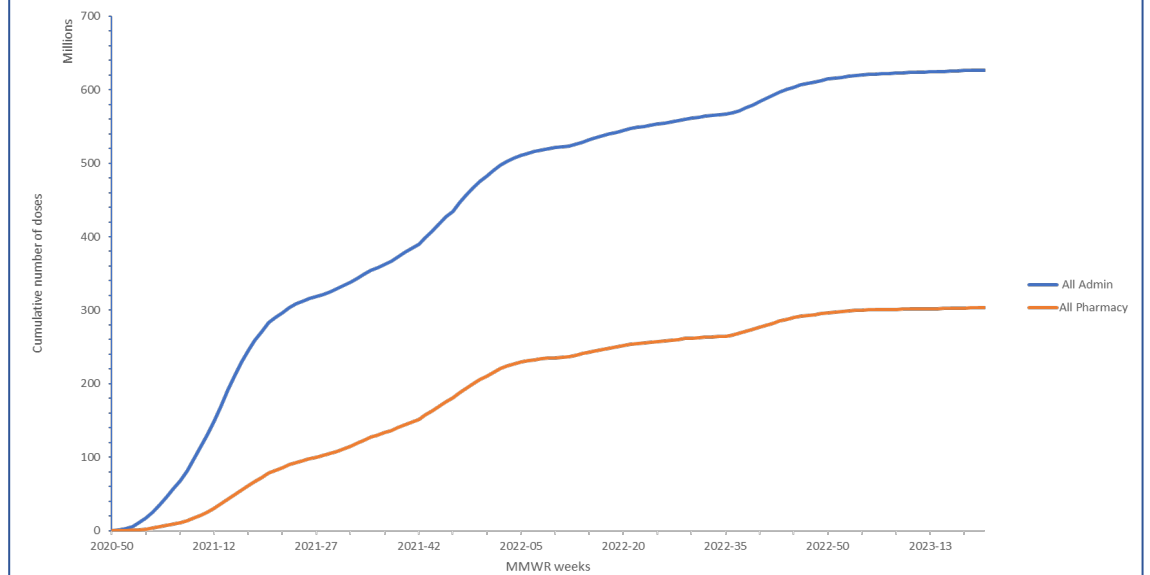
COVID-19 Doses Administered by Federal Retail Pharmacy Program By Zip Codes



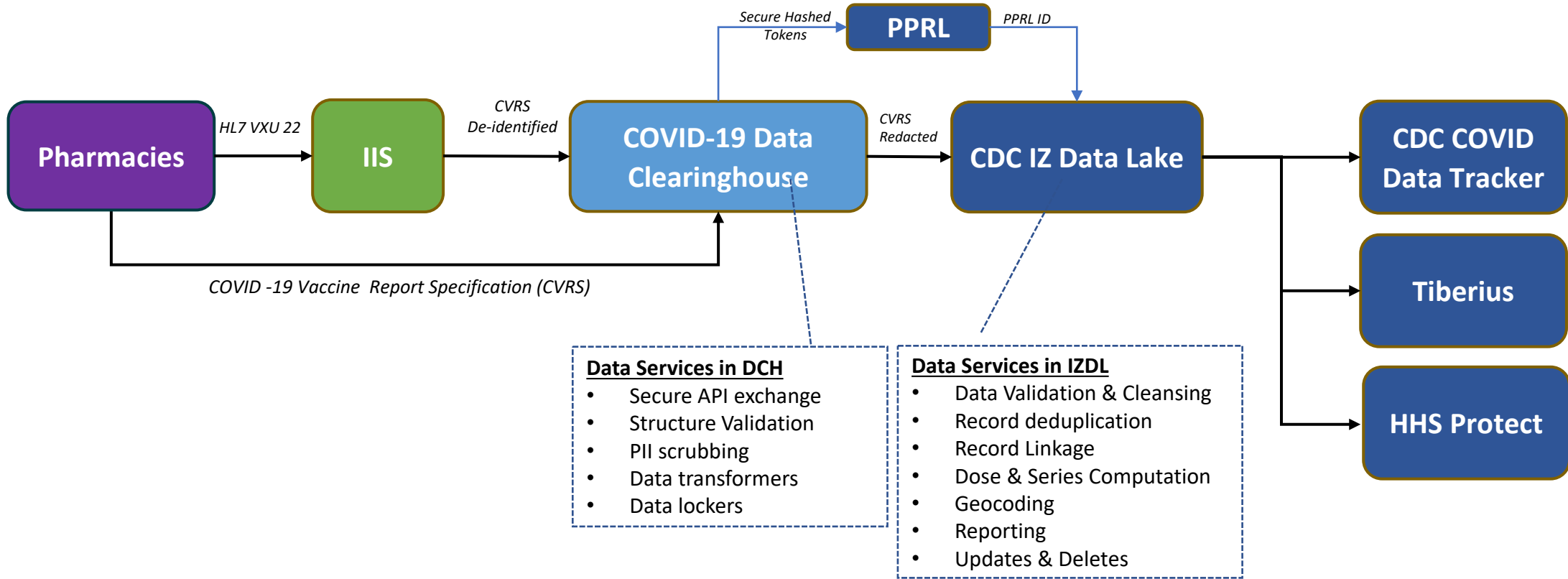
All Admin VS Pharmacy doses by MMWR Week Dec 2020 – May 2023




All Admin VS Pharmacy doses by MMWR Week (Cumulative) Dec 2020 - May 2023



COVID-19 Pharmacy Administration Reporting Data Flow





Task 1 Long Term Recommendation for Public Health, Emergency Use Authorizations, and Prescribing Authorities

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Public Comment

To make a comment please
Use the Hand Raise Function

If you are on the phone only, press “*9” to raise your hand

*(Once called upon, press “*6” to mute/unmute your line)*

All public comments will be limited to three minutes

You may also email your public comment to onc-hitac@accelsolutionsllc.com

*Written comments will not be read at this time,
but they will be delivered to members of the task force and made part of the public record*




Task Force Work Planning

Shelly Spiro, Co-Chair

Hans Buitendijk, Co-Chair

Upcoming Meetings



Month	Task Force Meeting Dates	HITAC Meeting Date
July	26	
August	9, 16, 23, 30	August 17 (TF Update)
September	13, 20, 27	September 14 (TF Update)
October	4, 11, 18, 25	October 19 (TF Update)
November	1	November 9 (Final Recommendation and Vote)



Adjourn