



The Office of the National Coordinator for  
Health Information Technology  
Health IT Advisory Committee

## U.S. Core Data for Interoperability Task Force

Christina Caraballo, Co-Chair  
Terry O'Malley, Co-Chair

July 26, 2019



# Agenda

- Call to Order/Roll Call
- Opening Remarks
- Review Task Force Work Plan and Calendar
- Discuss Level Promotion Criteria
- Public Comment
- Next Steps and Adjourn

# USCDI Task Force Charge: Data Element Promotion Model

- **Overarching Charge:** Review and provide feedback on the U.S. Core Data for Interoperability (USCDI) Data Element Promotion Model.
- **Specific Charge:** Provide recommendations on the following:
  - » Promotion Model Lifecycle for Submitted Data Elements
  - » Data Element Submission Information
  - » Data Element Promotion Criteria
- **Supplemental:** Discuss additional defining criteria as needed

# Work Plan – Phase 2

Meeting Date	Potential Discussion Items
May 17, 2019	<ul style="list-style-type: none"><li>• <del>Phase 2 Kickoff</del></li><li>• <del>Discuss Promotion Model Guidelines</del></li></ul>
May 31, 2019	<ul style="list-style-type: none"><li>• <del>Discuss Promotion Model Lifecycle</del></li></ul>
June 14, 2019	<ul style="list-style-type: none"><li>• <del>Discuss Data Element Submission Criteria</del></li></ul>
June 28, 2019	<ul style="list-style-type: none"><li>• <del>Discuss Level 1 Classification</del></li></ul>
July 12, 2019	<ul style="list-style-type: none"><li>• <del>Discuss Level 2 Classification</del></li></ul>
July 26, 2019	<ul style="list-style-type: none"><li>• Discuss Level Promotion Criteria</li></ul>
August 9, 2019	
August 23, 2019	
September 6, 2019	
September 17, 2019	<ul style="list-style-type: none"><li>• Present recommendations to HITAC</li></ul>

# Discuss Level Promotion Criteria

- Google document

To make a comment please call:

**Dial: 1-877-407-7192**

*(once connected, press “\*1” to speak)*

**All public comments will be limited to three minutes.**

You may enter a comment in the  
**“Public Comment”** field below this presentation.

Or, email your public comment to [onc-hitac@accelsolutionsllc.com](mailto:onc-hitac@accelsolutionsllc.com).

*Written comments will not be read at this time, but they will be delivered to members of the Workgroup and made part of the Public Record.*



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## Meeting Adjourned

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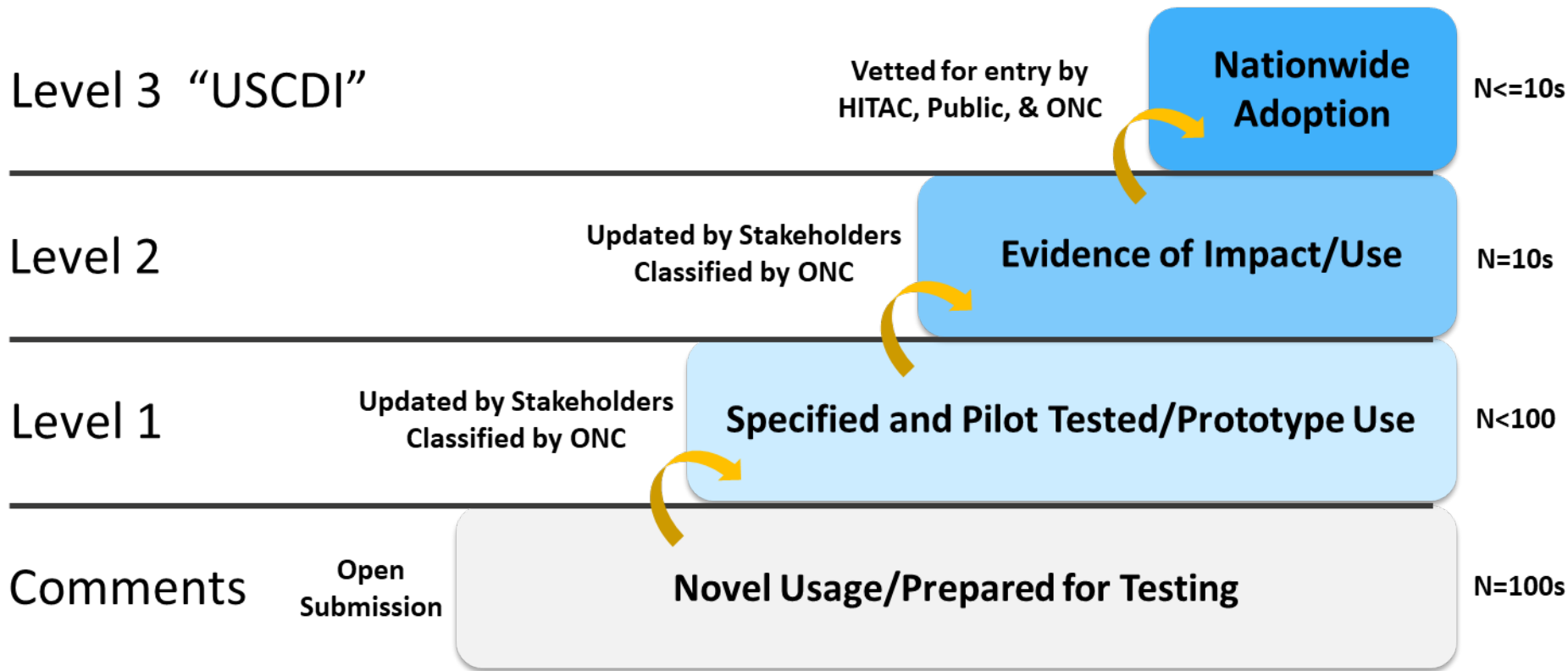
@ONC\_HealthIT



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# USCDI Promotion Model – Annual Promotion/Status





# Promotion Model Guidelines

- Any individual or entity may submit a Data Element to the USCDI process and contribute to a Data Element's promotion.
- The USCDI Promotion Process guidelines and criteria will be transparent to the public.
- The Data Element information submitted for entry to the USCDI Promotion Process will determine whether the Data Element enters Level 1, Level 2, or requires more development before entering the Process.
- No newly-proposed Data Element can proceed directly into the USCDI.
- Data Elements that do not demonstrate technical development activities will be removed from the promotion process after specified periods of time.

# Promotion Model Lifecycle for Submitted Data Elements

- Submitted Data Elements exist as “Comments” and are then classified by ONC.
- Data Elements not classified into Level 1 or Level 2 have three submission cycles from the ONC final decision period before they are removed. Data Element submissions may be updated and resubmitted to be reviewed again.
- Once classified into Level 1 or Level 2, a Data Element has up to three submission cycles to be promoted to its next level (from Level 1 to Level 2, or Level 2 to USCDI).
- When a Data Element is removed from the process due to lack of progress, it is archived in the Comments section.
- After a Data Element’s classification has been published a submitter will have an opportunity to ask for a debrief on the classification decision.

# Data Element Promotion Criteria: From “Comment” to Level 1 classification

- A new Data Element submission must include the following information:
  - » Data Element name and description
  - » Why should this Data Element be captured and exchanged nationwide?
  - » Do systems currently capture this Data Element?
  - » Do standards exist to represent and exchange this Data Element?
  - » Please describe any testing, pilots, or production use of the Data Element.
- To be formally entered into the Promotion Process at Level 1, a Data Element must meet the following requirements:
  - » Identify at least one developed use case, including its relevance to nationwide exchange
  - » Identify at least one content standard (or implementation guide) with which it can be used
  - » Demonstrate that it has been tested for exchange

# Data Element Promotion Criteria

## To move from Level 1 to Level 2 classification

- To be eligible to move to Level 2, a Data Element must demonstrate that it has achieved sufficient technical development to be tested at scale:
  - » Have a definition for the Data Element, including technical representation (structured or unstructured) in at least one content standard (or implementation guide) and, if applicable, vocabulary or value set binding; and
  - » Has been tested successfully in at least two independent systems.

# Data Element Promotion Criteria

## To move from Level 2 to the USCDI (1/2)

1. Technical Maturity – The Data Element must demonstrate that it:
  - » Has been tested successfully in at least four independent systems.
  - » Has formal, published documentation for its representation and exchange.
  
2. Nationwide Applicability – The Data Element submission must include the following information:
  - » How it impacts healthcare costs for individuals and populations
  - » Estimated number of providers who would use this Data Element
  - » Whether there are any restrictions to the Data Element’s standardization
  - » Estimated industry burden to implement the Data Element

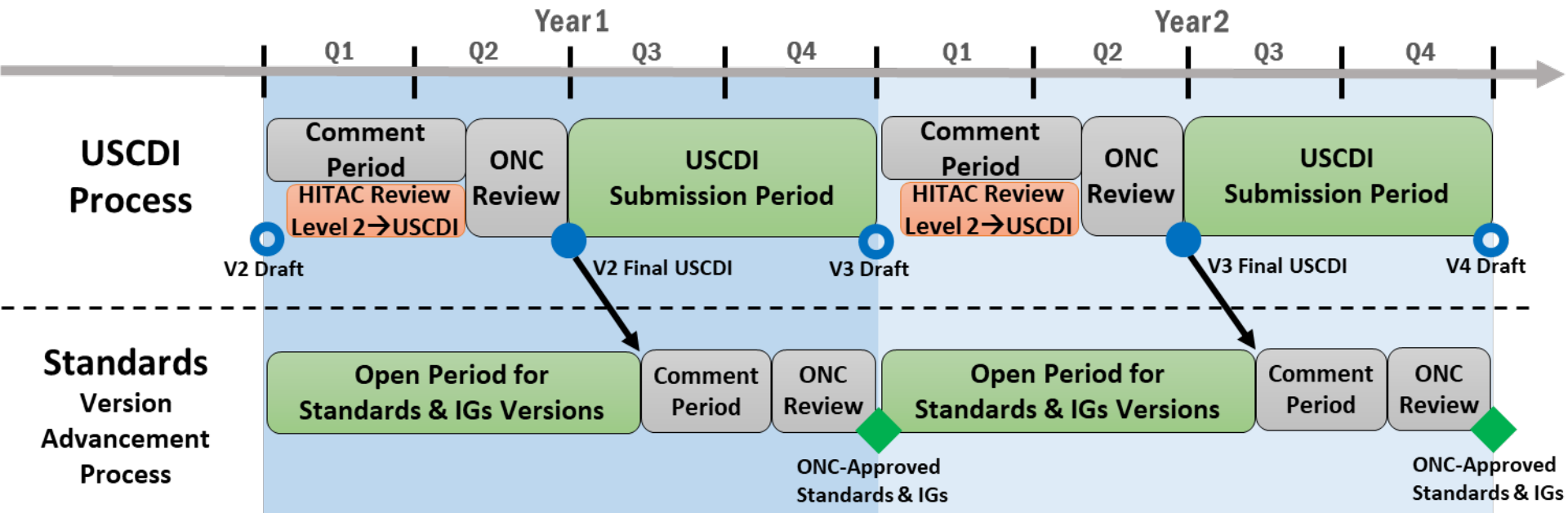
# Data Element Promotion Criteria

## To move from Level 2 to the USCDI (2/2)

- The Health IT Advisory Committee (HITAC) would be charged to review Level 2 Data Elements that seek to move into the USCDI, including
  - » Assess the cumulative impact of USCDI-recommended Data Elements; and
  - » Provide recommendations to the National Coordinator on an annual basis.
- A Data Element would be added to the USCDI when the National Coordinator approves its promotion, weighing feedback from public comment and HITAC recommendations.

# USCDI and Standards Versions Advancement Process

## Annual Relationship (Example Post-Final Rule)



# Task Force Members

First Name	Last Name	Organization	Organization Type
<b>CO-CHAIRS</b>			
Christina	Caraballo	Audacious Inquiry	Consultant/Patient Advocacy
Terrence	O'Malley	Massachusetts General Hospital	Health & Hospital Organization
<b>MEMBERS</b>			
Tina	Esposito	Advocate Aurora Health	Health & Hospital Organization
Valerie	Grey	New York eHealth Collaborative	Health IT Organization
Kensaku	Kawamoto	University of Utah Health	Health & Hospital Organization
Steven	Lane	Sutter Health	Health & Hospital Organization
Leslie	Lenert	Medical University of South Carolina	Health & Hospital Organization
Clem	McDonald	National Library of Medicine (NLM)	Federal
Brett	Oliver	Baptist Health	Health & Hospital Organization
Steve	Ready	Norton Healthcare	Health & Hospital Organization
Mark	Roche	Centers for Medicare & Medicaid Services (CMS)	Federal
Sasha	TerMaat	Epic	EHR Vendor
Sheryl	Turney	Anthem Blue Cross Blue Shield	Health IT Technology
<b>ONC STAFF</b>			
Al	Taylor	ONC	Federal
Adam	Wong	ONC	Federal



Data Elements in blue are already included in the 2015 Common Clinical Data Set (CCDS).















Data Elements in pink are those for which ONC seeks recommendations in the Phase 1 charge.

**A SET OF DATA CLASSES TO SUPPORT NATIONWIDE INTEROPERABILITY**

The USCDI Version 1 (USCDI v1) is proposed as a standard (§ 170.213). It reflects the same data classes referenced by the CCDS definition and includes new required data classes and data elements, noted below.

If adopted, health IT developers will need to update their certified health IT to support the USCDI for all certification criteria affected by this change.

**USCDI v1**

<b>Assessment and Plan of Treatment</b> 	<b>Laboratory</b>  <ul style="list-style-type: none"> <li>• Tests</li> <li>• Values/Results</li> </ul>	<b>Provenance *NEW</b>  <ul style="list-style-type: none"> <li>• Author</li> <li>• Author Time Stamp</li> <li>• Author Organization</li> </ul>
<b>Care Team Members</b> 	<b>Medications</b>  <ul style="list-style-type: none"> <li>• Medications</li> <li>• Medication Allergies</li> </ul>	<b>Smoking Status</b> 
<b>Clinical Notes *NEW</b>  <ul style="list-style-type: none"> <li>• Consultation Note</li> <li>• Discharge Summary Note</li> <li>• History &amp; Physical</li> <li>• Imaging Narrative</li> <li>• Laboratory Report Narrative</li> <li>• Pathology Report Narrative</li> <li>• Procedure Note</li> <li>• Progress Note</li> </ul>	<b>Patient Demographics</b>  <ul style="list-style-type: none"> <li>• First Name</li> <li>• Last Name</li> <li>• Previous Name</li> <li>• Middle Name (including middle initial)</li> <li>• Suffix</li> <li>• Birth Sex</li> <li>• Date of Birth</li> <li>• Race</li> <li>• Ethnicity</li> <li>• Preferred Language</li> </ul>	<b>Unique Device Identifier(s) for a Patient's Implantable Device(s)</b> 
<b>Goals</b>  <ul style="list-style-type: none"> <li>• Patient Goals</li> </ul>	<ul style="list-style-type: none"> <li>• Address *NEW</li> <li>• Phone Number *NEW</li> </ul>	<b>Vital Signs</b>  <ul style="list-style-type: none"> <li>• Diastolic Blood Pressure</li> <li>• Systolic Blood Pressure</li> <li>• Body Height</li> <li>• Body Weight</li> <li>• Heart Rate</li> <li>• Respiratory rate</li> <li>• Body Temperature</li> <li>• Pulse oximetry</li> <li>• Inhaled oxygen concentration</li> </ul>
<b>Health Concerns</b> 	<b>Problems</b> 	<ul style="list-style-type: none"> <li>• Pediatric Vital Signs *NEW                             <ul style="list-style-type: none"> <li>- BMI percentile per age and sex for youth 2-20</li> <li>- Weight for age per length and sex</li> <li>- Occipital-frontal circumference for children &lt; 3 years old</li> </ul> </li> </ul>
<b>Immunizations</b> 	<b>Procedures</b> 