



# Public Health Data Systems Task Force 2022

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# New HHS Policy on Alignment of Health IT Activities

Interoperability

## E Pluribus Unum

Micky Tripathi and Steven Posnack | AUGUST 5, 2022



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As our nation transitions to a digital healthcare system, our stakeholders are discovering new opportunities for using health information technology to advance health care delivery, public health, and research to improve people's lives. The federal government is no exception in this regard; agencies across the Department of Health and Human Services (HHS) are beginning to leverage the data and capabilities available through electronic health records for a broad range of federal activities and programs, including product safety and surveillance, real world data and real world evidence for regulatory approvals, research, pandemic response, and social service integration, to name just a few.

While this is an exciting development for HHS overall, it does call for more proactive alignment and coordination of health IT activities across the department to ensure that we are operating as efficiently and cohesively as possible. To that end, Secretary Becerra has put into place a department-wide management policy directing ONC to engage with HHS agencies to align and coordinate health IT-related activities in support of HHS health IT and interoperability goals. Specifically, the secretary has directed ONC to establish and oversee a consistent HHS-wide approach for: 1) incorporating standard health IT requirements language in all applicable HHS funding programs, contracts, and policies; and 2) providing direct ONC assistance to HHS agencies to maximize the use of HHS-approved standards and authorities (such as [Section 3004 of the Public Health Service Act](#)) in their agency programs.

While it won't happen overnight, what we expect to see over time is greater consistency in health IT-based activities across HHS, which should result in lower cost and higher effectiveness agency programs, more sharing of data and health IT infrastructure across programs and agencies, and lower burden on health care providers, technology developers, and other stakeholders who engage with multiple HHS agencies. Maximizing federal use of open-industry, non-proprietary, scalable standards and approaches – such as the US Core Data for Interoperability (USCDI) and FHIR APIs as called for by the 21<sup>st</sup> Century Cures Act – will multiply the impact of the department's regulations and purchasing power to reinforce HHS health IT and interoperability goals. It will also directly support key Biden-Harris Administration priorities in [health equity](#), [federal customer experience and service delivery](#), and [promoting competition](#). ONC already works collaboratively with our federal agency partners, and we are excited to be able to better support our sister HHS agencies and ensure that HHS is more than the sum of its parts.

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# Need for a new approach to public health systems

**Pandemic experience has affirmed what was an already growing consensus that we need a new approach to nationwide public health surveillance and data systems**

## **Key elements include:**

- Enterprise approach to public health architecture
- Modern interoperability approaches
- Data sharing in multiple directions
- Common data pillars
- End-to-end privacy and security protection
- Aligned policy and governance

## References:

- [CSTE White Paper: Driving Public Health in the Fastlane, 2019](#)
- [NNPHI Report: The Future of Public Health, 2021](#)
- [Margolis Center Report: Building a Modern Health Data Infrastructure, 2021](#)
- [Bipartisan Policy Center Report: Positioning America's Public Health System for the Next Pandemic, 2021](#)
- [Health Information Technology Advisory Committee Report, 2021](#)



# Vision and Strategic Objective for Unified Public Health Data System

## ***Vision***

*A federated public health ecosystem that can act as one public health community working together to predict, prevent, detect, and respond to public health threats faster and more effectively than ever before*

## ***Objective***

*A unified public health information framework that can rapidly and efficiently share, aggregate, link, curate, and analyze data to produce actionable insights that inform local, state, and national public health situational awareness, decision-making, and interventions*

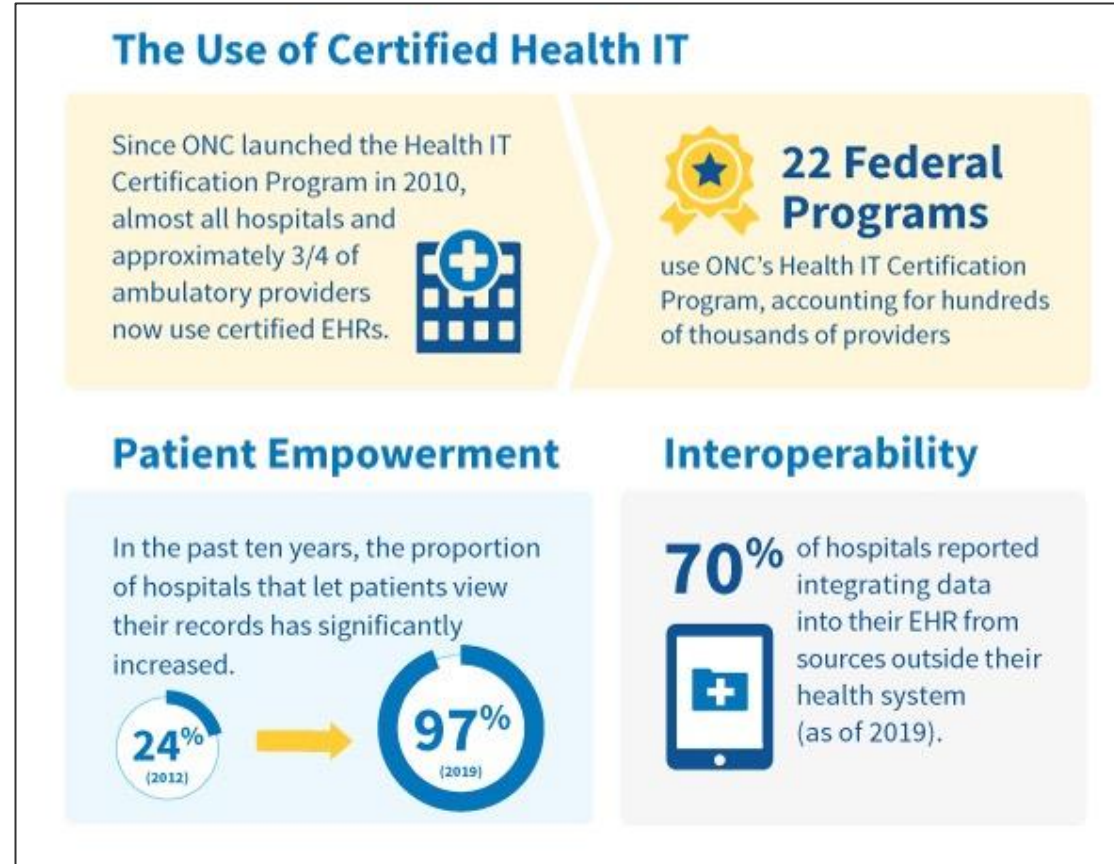
# ONC Certification Addresses Key Health IT Market Gaps

**ONC voluntary certification now covers 800+ health IT products used by 97% of hospitals and over 80% of physician offices and required by numerous federal programs. Health IT systems are regularly certified to keep pace with advances in medicine, technology, and policy.**

- Establishes baseline technical capabilities for data capture, key functions, and interoperability
- Promotes the exchange of electronic health information
- Establishes baseline privacy and security requirements
- Increases transparency in the functionality and use of certified health IT
- Promotes competition and choice in health IT
- Provides baseline assurance that a health IT module will perform clinical care and data exchange functions in accordance with interoperability standards and user-centered design
- Establishes accountability of health IT developers to enable ONC to support provider needs and issues

# Certification of EHRs has had positive effects that benefit providers, patients, developers....and PHAs

- More mature and effective marketplace of higher capability systems
- Rapidly expanded exchange of electronic health information across a variety of methods and platforms
- Higher safety and security of health IT infrastructure for patients and healthcare providers
- Increased in health IT adoption across the health care continuum





# Certification for Public Health: Initial Ideas for Discussion

- **Current public health criteria focuses on provider systems' capacity to**
  - Generate a report according to specific HL7 standards
  - Transmit a report
- Building off of prior HITAC PHDS TF recommendations, **ONC and CDC are exploring potential complementary public health criteria for PHA systems that could complete the transaction loop through standards-based functionalities.**

## Key Considerations:

- Certification applies to technology modules, not to public health agencies or technology users
- Not all capabilities need to be certified, and not all capabilities need to have conformance testing
- Process will be gradual and collaborative

# Charge – Public Health Data Systems Task Force 2022

## Overarching Charge:

The Public Health Data Systems Task Force 2022 will build upon recommendations from previous HITAC public health-focused task forces\* to inform ONC’s continued collaborative work with CDC on improving public health data systems, and in support of CDC’s greater Data Modernization Initiative (DMI) efforts.

## Specific Charge:

The Public Health Data Systems Task Force 2022 shall examine existing public health certification criterion, known as the “(f) criteria” in the ONC Health IT Certification Program, certifying the transmission of data to public health agencies to:

1. Identify gaps in the functionalities and standards included in existing (f) criteria, including gaps in 1) functionality, and 2) implementation by developers. Provide recommendations advancing criteria, testing guidance, and/or standards to address gaps.
2. Assess the specific functions (e.g., receipt of data, ingestion of data, analysis of data) supported by public health data systems that would benefit from further standardization and potential certification.
3. Recommend which data flows, aligned with existing (f) criteria, should be prioritized for standardized receipt of data.

Recommendations are due by November 10, 2022.

[\\*Public Health Data Systems Task Force 2021 Report](#)



# Roster – Public Health Data Systems Task Force 2022



Name	Organization	Name	Organization
<b>Gillian Haney (Co-Chair)</b>	Council of State and Territorial Epidemiologists (CSTE)	Hung Luu*	Children's Health
<b>Arien Malec* (Co-Chair)</b>	Change Healthcare	Leslie Lenert*	Medical University of South Carolina
Eliei Oliveira*	Dell Medical School, University of Texas at Austin	John Kansky*	Indiana Health Information Exchange
Aaron Miri*	Baptist Health	Hans Buitendijk*	Oracle Cerner
Rajesh Godavarthi*	MCG Health	Sheryl Turney*	Carelon Digital Platforms (an Elevance Health company)
Fillipe Southerland*	Yardi Systems, Inc.	Alexandra Mugge**	CMS
Steven Eichner*	Texas Dept. of State Health Service	Jim Jirjis*	HCA Healthcare
Steven Lane*	Sutter Health	Mark Marostica	Conduent Government Solutions
Vivian Singletary	Public Health Informatics Institute	Jamie Pina	Association of State and Territorial Health Officials (ASTHO)
Rachelle Boulton	Utah Department of Health	Erin Holt	Tennessee Department of Health
Bryant Karras	Washington State Dept of Health	Abby Sears*	OCHIN
Jennifer Layden**	CDC	Charles Cross	Indian Health Service

\* HITAC Member

\*\* HITAC Federal Representative



# Public Health Data Systems Task Force 2022 Timeline

August 17, 2022 – Kick-off of the PHDS Task Force

November 10, 2022 – HITAC Vote on Draft Recommendations



**2022**

11 Task Force Meetings Planned

**2022**



# Discussion