Interoperability Standards Workgroup Meeting #1

Sarah DeSilvey, Co-Chair

Naresh Sundar Rajan, Co-Chair

January 25, 2023

Call to Order/Roll Call

Mike Berry, Designated Federal Officer, ONC

Interoperability Standards Workgroup Roster

Name	Organization	Name	Organization
Sarah DeSilvey* (Co-Chair)	Gravity Project Larner College of Medicine at the University of Vermont	**Naresh Sundar Rajan* (Co-Chair)**	CyncHealth
Pooja Babbrah	Point-of-Care Partners	Steven Lane*	Health Gorilla
Shila Blend*	North Dakota Health Information Network	Hung Luu*	Children's Health
Ricky Bloomfield	Apple	Anna McCollister*	Individual
Hans Buitendijk*	Oracle Health	Clem McDonald*	National Library of Medicine
Christina Caraballo	HIMSS	Deven McGraw*	Invitae Corporation
Grace Cordovano	Enlightening Results	Aaron Miri*	Baptist Health
Raj Dash	College of American Pathologists	Aaron Neinstein*	UCSF Health
Steven Eichner*	Texas Department of State Health Services	Kikelomo Oshunkentan*	Pegasystems
Rajesh Godavarthi*	MCG Health, part of the Hearst Health network	Mark Savage	Savage & Savage LLC
Bryant Thomas Karras*	Washington State Department of Health	Shelly Spiro	Pharmacy HIT Collaborative

* HITAC Member

Agenda

10:30 AM   **Call to Order/Roll Call**

- Mike Berry, Designated Federal Officer, ONC

10:35 AM   **Workgroup Introductions**

- Sarah DeSilvey, Co-Chair

- Naresh Sundar Rajan, Co-Chair

10:50 AM   **IS WG Charge and Timelines**

- Sarah DeSilvey, Co-Chair

- Naresh Sundar Rajan, Co-Chair

10:55 AM   **Draft USCDI v4 Overview**

- Al Taylor, Office of Technology, ONC

11:50 AM   **Public Comment**

- Mike Berry, Designated Federal Officer, ONC

11:55 AM   **Workgroup Work Planning**

- Sarah DeSilvey, Co-Chair

- Naresh Sundar Rajan, Co-Chair

12:00 PM   **Adjourn**

Workgroup Introductions

Sarah DeSilvey, Co-Chair

Naresh Sundar Rajan, Co-Chair

Interoperability Standards Workgroup Roster
(State name, organization, and title/role – please keep to 20 seconds)

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IS WG Charge and Timelines

Sarah DeSilvey, Co-Chair

Naresh Sundar Rajan, Co-Chair

Interoperability Standards Workgroup Charge

Overarching charge: Review and provide recommendations on the Draft USCDI Version 4

Specific charge: <u>Due</u>

    Evaluate Draft USCDI v4 and provide HITAC with recommendations for: **April 12, 2023**
- a. New data classes and elements from Draft USCDI v4
- b. Level 2 data classes and elements not included in Draft USCDI v4

Draft USCDI v4 Overview
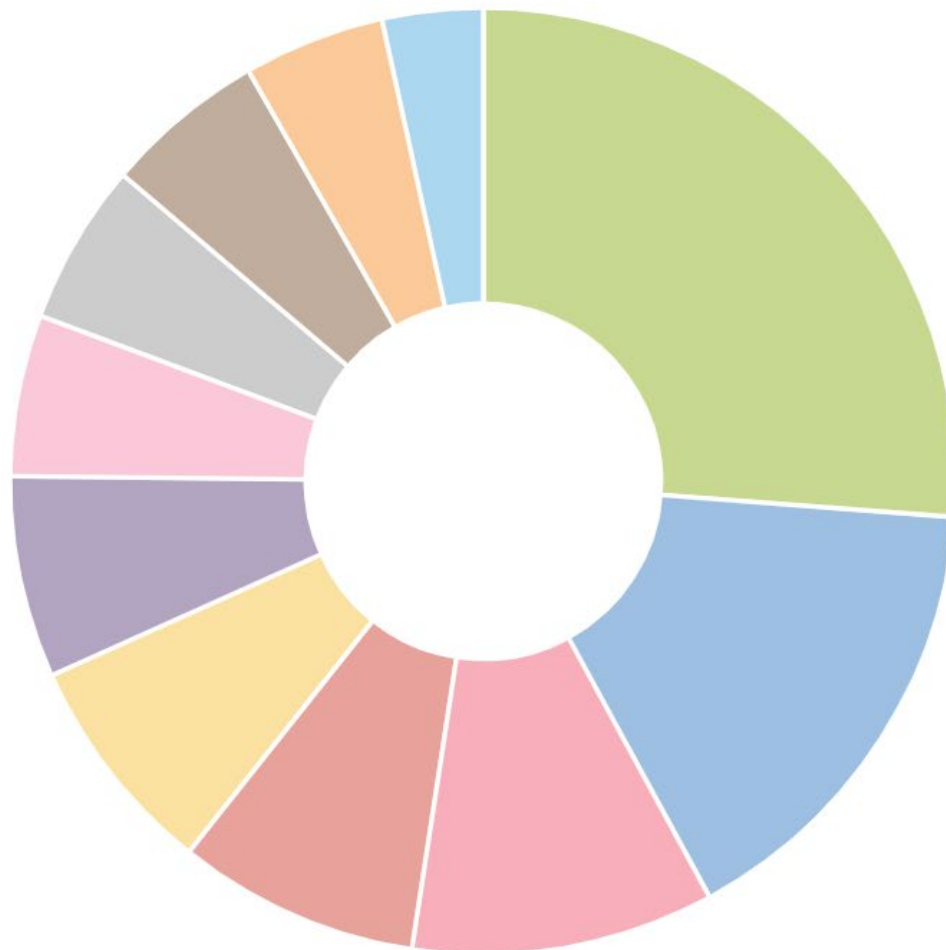
Al Taylor, Office of Technology, ONC

What is USCDI?

- USCDI is a standardized set of health data classes and constituent data elements for nationwide, interoperable health information exchange.

- USCDI v1 is a required part of certain certification criteria. As a result, certified health IT must be able to exchange USCDI data elements.

- USCDI establishes a baseline set of data that can be commonly exchanged across care settings for a wide range of uses, even those beyond certified health IT.

Highlights of Submissions
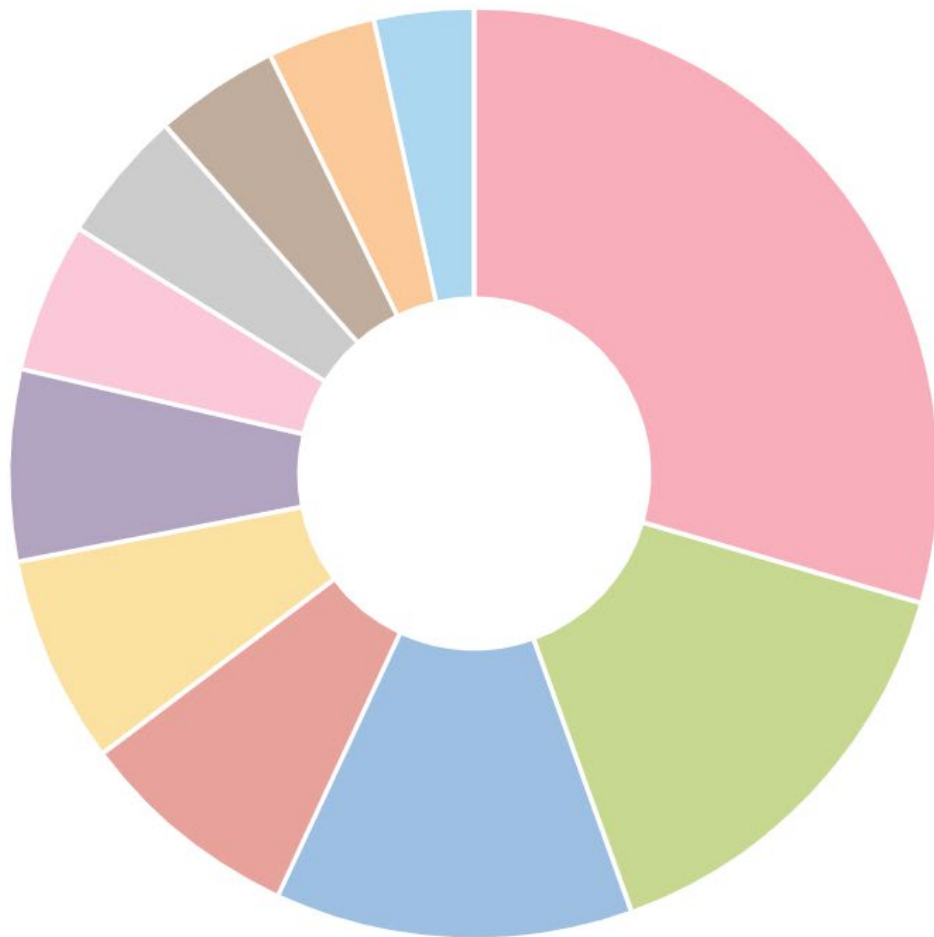

USCDI v4 Submissions All

Reconciled data class
Total Issues: **145**

■	Cancer Care	38
■	Clinical Tests	23
■	Special Alerts for Care Handoffs	12
■	Clinical Notes	11
■	Health Status/Assessments	10
■	Diagnostic Imaging	8
■	Laboratory	8
■	Social Determinants of Health	8
■	Newborn's Delivery Information	7
■	Assessment and Plan of Treatment	5
■	Other...	15

Highlights of Comments

USCDI v4 Comments All

Reconciled data class
Total Issues: **346**

	Medications	52
	Laboratory	43
	Vital Signs	27
	Social Determinants of Health	25
	Patient Demographics/Information	23
	Pregnancy Information	18
	Work Information	16
	Advance Directives	15
	Encounter Information	13
	Facility Level Data	12
	Other...	102

USCDI v4 Prioritization Criteria

- Address behavioral health integration with primary care and other physical care

- Mitigate health and health care inequities and disparities

- Address the needs of underserved communities

- Address public health interoperability needs of reporting, investigation, and emergency response

- Represent important additions over previous USCDI versions

- Require only modest standards or implementation guide developmental burden

- Require only modest developmental burden on health IT modules

- Create only modest implementation burden on providers and health systems

- Result in only modest aggregate lift for all new data elements combined

Proposed New Data Elements for Draft USCDI v4

Allergies and Intolerances
- Substance (Non-Medication)

Encounter Information
- Encounter Identifier

New Data Class

Facility Information
- Facility Identifier
- Facility Type
- Facility Name

Goals
- Treatment Intervention Preference
- Care Experience Preference

Health Status Assessments
- Alcohol Use
- Substance Use
- Physical Activity

Laboratory
- Result Unit of Measure
- Result Reference Range
- Result Interpretation
- Specimen Source Site
- Specimen Identifier
- Specimen Condition and Disposition

Medications
- Medication Instructions
- Medication Adherence

Procedures
- Time of Procedure

Vital Signs
- Average Blood Pressure

Allergies and Intolerances

Harmful or undesired physiological responses associated with exposure to a substance.

DATA ELEMENT	APPLICABLE VOCABULARY STANDARD(S)
	Standards listed are required. If more than one is listed, at least one is required unless otherwise noted. If a cell is empty, an applicable vocabulary standard has not been identified.
Substance (Non-Medication) *Non-pharmacologic agent believed to cause a harmful or undesired physiologic response following exposure.* *Examples include but are not limited to latex, eggs, pollen, and peanuts.*	• Systematized Nomenclature of Medicine Clinical Terms (SNOMED CT) U.S. Edition, September 2022 Release

Encounter Information

Information related to interactions between healthcare providers and a patient.

DATA ELEMENT	APPLICABLE VOCABULARY STANDARD(S)
	Standards listed are required. If more than one is listed, at least one is required unless otherwise noted. If a cell is empty, an applicable vocabulary standard has not been identified.
Encounter Identifier	
Sequence of characters by which an encounter is known.	

Facility Information

Physical place of available services or resources.

DATA ELEMENT	APPLICABLE VOCABULARY STANDARD(S)
	Standards listed are required. If more than one is listed, at least one is required unless otherwise noted. If a cell is empty, an applicable vocabulary standard has not been identified.
Facility Identifier	
Sequence of characters representing a physical place of available services or resources.	
Facility Type	
Category describing available services or resources.	
Examples include but are not limited to laboratory, pharmacy, hospital, ambulatory providers, long-term and post-acute care, and pharmacy.	
Facility Name	
Word or words by which a facility is known.	

Goals

Desired state to be achieved by a patient.

DATA ELEMENT	APPLICABLE VOCABULARY STANDARD(S)
	Standards listed are required. If more than one is listed, at least one is required unless otherwise noted. If a cell is empty, an applicable vocabulary standard has not been identified.
Treatment Intervention Preference *Person's goals, preferences, and priorities for care and treatment in case that person is unable to make medical decisions because of a serious illness or injury.* *Examples include but are not limited to preferences regarding cardiopulmonary resuscitation, endotracheal intubation, and tube feeding.*	• Logical Observation Identifiers Names and Codes (LOINC) version 2.73
Care Experience Preference *Person's goals, preferences, and priorities for overall experiences during their care and treatment.* *Examples include but are not limited to honoring religious beliefs, and conditions of the care environment.*	• Logical Observation Identifiers Names and Codes (LOINC) version 2.73

Health Status Assessments

Assessments of a health-related matter of interest, importance, or worry to a patient, patient's authorized representative, or patient's healthcare provider that could identify a need, problem, or condition.

DATA ELEMENT	APPLICABLE VOCABULARY STANDARD(S)
	Standards listed are required. If more than one is listed, at least one is required unless otherwise noted. If a cell is empty, an applicable vocabulary standard has not been identified.
Substance Use	• Logical Observation Identifiers Names and Codes (LOINC) version 2.73
Evaluation of a patient's reported use of drugs or other substances for non-medical purposes or in excess of a valid prescription.	
Examples include but are not limited to substance use disorder score, and substance use knowledge assessment.	
Alcohol Use	• Logical Observation Identifiers Names and Codes (LOINC) version 2.73
Evaluation of a patient's consumption of alcohol.	
Examples include but are not limited to history of alcohol use, alcohol use disorder identification test and alcohol intake assessment.	
Physical Activity	• Logical Observation Identifiers Names and Codes (LOINC) version 2.73
Evaluation of a patient's current or usual exercise.	
Examples include but are not limited to Exercise Vital Sign.	

Laboratory

Analysis of clinical specimens to obtain information about the health of a patient.

DATA ELEMENT	APPLICABLE VOCABULARY STANDARD(S)
	Standards listed are required. If more than one is listed, at least one is required unless otherwise noted. If a cell is empty, an applicable vocabulary standard has not been identified.
Result Unit of Measure *Unit of measurement to report laboratory test results so that they can be compared.*	• The Unified Code of Units for Measure, Revision 2.1
Result Reference Range *Upper and lower limit of test values expected for a designated population of individuals.*	
Result Interpretation *Categorical assessment of a laboratory value, often in relation to a test's reference range.* *Examples include but are not limited to high, low, critical, and normal.*	

Laboratory (Cont'd)

Analysis of clinical specimens to obtain information about the health of a patient.

DATA ELEMENT	APPLICABLE VOCABULARY STANDARD(S)
	Standards listed are required. If more than one is listed, at least one is required unless otherwise noted. If a cell is empty, an applicable vocabulary standard has not been identified.
Specimen Source Site *Body location from where a specimen was obtained.* *Examples include but are not limited to right internal jugular, left arm, and right eye.*	• Systematized Nomenclature of Medicine Clinical Terms (SNOMED CT) U.S. Edition, September 2022 Release
Specimen Identifier *Sequence of characters assigned by a laboratory for an individual specimen.*	
Specimen Condition and Disposition *Indication whether a specimen was acceptable and reason for rejection if unacceptable.*	

Medications

Pharmacologic agents used in the diagnosis, cure, mitigation, treatment, or prevention of disease.

DATA ELEMENT	APPLICABLE VOCABULARY STANDARD(S)
	Standards listed are required. If more than one is listed, at least one is required unless otherwise noted. If a cell is empty, an applicable vocabulary standard has not been identified.
Medication Instructions	
Directions for administering or taking a medication.	
Examples include but are not limited to prescription directions for taking a medication, and package instructions for over-the-counter medications.	
Medication Adherence	
Medication is consumed according to instructions.	
Examples include but are not limited to taking as directed, taking not as directed, and not taking.	

Procedures

Activity performed for or on a patient as part of the provision of care.

DATA ELEMENT	APPLICABLE VOCABULARY STANDARD(S)
	Standards listed are required. If more than one is listed, at least one is required unless otherwise noted. If a cell is empty, an applicable vocabulary standard has not been identified.
Time of Procedure	
Time and/or date a procedure or other action is performed.	

Vital Signs

Physiologic measurements of a patient that indicate the status of the body's life sustaining functions.

DATA ELEMENT	APPLICABLE VOCABULARY STANDARD(S)
	Standards listed are required. If more than one is listed, at least one is required unless otherwise noted. If a cell is empty, an applicable vocabulary standard has not been identified.
Average Blood Pressure	Both standards are required.
Mean value of two or more blood pressure readings in a specified time period.	• Logical Observation Identifiers Names and Codes (LOINC®) version 2.73
Usage note: Must include both systolic and diastolic components of the mean and specify the relevant time period of measurements.	• The Unified Code of Units for Measure, Revision 2.1

Draft USCDI Version 4

Allergies and Intolerances
- Substance (Medication)
- Substance (Drug Class)
- Substance (Non-Medication) ⭐
- Reaction

Care Team Member(s)
- Care Team Member Name
- Care Team Member Identifier
- Care Team Member Role
- Care Team Member Location
- Care Team Member Telecom

Clinical Notes
- Consultation Note
- Discharge Summary Note
- History & Physical
- Procedure Note
- Progress Note

Clinical Tests
- Clinical Test
- Clinical Test Result/Report

Diagnostic Imaging
- Diagnostic Imaging Test
- Diagnostic Imaging Report

Encounter Information
- Encounter Type
- Encounter Identifier ⭐
- Encounter Diagnosis
- Encounter Time
- Encounter Location
- Encounter Disposition

Facility Information ⭐
- Facility Identifier ⭐
- Facility Type ⭐
- Facility Name ⭐

Goals
- Patient Goals
- SDOH Goals
- Treatment Intervention Preference ⭐
- Care Experience Preference ⭐

Health Insurance Information
- Coverage Status
- Coverage Type
- Relationship to Subscriber
- Member Identifier
- Subscriber Identifier
- Group Number
- Payer Identifier

Health Status Assessments
- Health Concerns
- Functional Status
- Disability Status
- Mental Function
- Pregnancy Status
- Alcohol Use ⭐
- Substance Use ⭐
- Physical Activity ⭐
- SDOH Assessment ➡
- Smoking Status

Immunizations
- Immunizations

Laboratory
- Test
- Values/Results
- Specimen Type
- Result Status
- Result Unit of Measure ⭐
- Result Reference Range ⭐
- Result Interpretation ⭐
- Specimen Source Site ⭐
- Specimen Identifier ⭐
- Specimen Condition and Disposition ⭐

Medical Devices △
- Unique Device Identifier - Implantable △

Medications
- Medications
- Dose
- Dose Unit of Measure
- Indication
- Fill Status
- Medication Instructions ⭐
- Medication Adherence ⭐

Patient Demographics/ Information
- First Name
- Last Name
- Middle Name (Including middle initial)
- Suffix
- Previous Name
- Date of Birth
- Date of Death
- Race
- Ethnicity
- Tribal Affiliation
- Sex
- Sexual Orientation
- Gender Identity
- Preferred Language
- Current Address
- Previous Address
- Phone Number
- Phone Number Type
- Email Address
- Related Person's Name
- Related Person's Relationship
- Occupation
- Occupation Industry

Patient Summary and Plan △
- Assessment and Plan of Treatment

Problems
- Problems
- SDOH Problems/Health Concerns
- Date of Diagnosis
- Date of Resolution

Procedures
- Procedures
- Time of Procedure ⭐
- SDOH Interventions
- Reason for Referral

Provenance
- Author Organization
- Author Time Stamp

Vital Signs
- Systolic Blood Pressure
- Diastolic Blood Pressure
- Average Blood Pressure ⭐
- Heart Rate
- Respiratory Rate
- Body Temperature
- Body Height
- Body Weight
- Pulse Oximetry
- Inhaled Oxygen Concentration
- BMI Percentile (2 - 20 years)
- Weight-for-length Percentile (Birth - 24 Months)
- Head Occipital-frontal Circumference Percentile (Birth - 36 Months)

⭐ New Data Classes and Elements   ➡ Data Element Reclassified   △ New Name for Data Element or Class

Draft USCDI v4
Updated Applicable Standards Versions

- ## USCDI v3
  - RxNorm – July 5, 2022
  - SNOMED CT - March 2022
  - LOINC 2.72
  - ICD-10-CM 2022
  - CVX – June 15, 2022
  - Vaccine NDC Linker – June 16, 2022
  - CPT 2022

Updated →

- ## Draft USCDI v4
  - RxNorm – January 3, 2023
  - SNOMED CT – Sepnber 2022
  - LOINC 2.73
  - ICD-10-CM 2022
  - CVX – December 19, 2022
  - Vaccine NDC Linker – December 20, 2022
  - CPT 2022

USCDI & SVAP Timeline

2022

2023

| Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Nov | Dec |

USCDI

Public Submission & ONC Review – v4

Public Submission & ONC Review – v5

v6

Public Review & Feedback Draft v3

ONC Preps Final v3

ONC Preps Draft v4

Public Review & Feedback Draft v4

ONC Preps Final v4

ONC Preps Draft v5

Final USCDI v3

Draft USCDI v4

Final USCDI v4

SVAP

ONC SVAP Review

USCDI v3 Considered for 2023 SVAP

Open Comment Period 2023 Standard & IG Updates

ONC SVAP Review

USCDI v4 Considered for 2024 SVAP

Open Comment Period for 2024 Updates

ONC Approved Standards for 2022 Available for Certification (60 days after release of SVAP 2022)

ONC Approved Standards for 2023 Available for Certification (60 days after release of SVAP 2023)

Draft USCDI v4 Post Publication

January – April 2023
- HITAC and public feedback period
- HITAC recommendations due by April 12, 2023
- Public comments due by April 17, 2023, at 11:59 p.m. Eastern

July 2023
- USCDI v4 (final) publication
- USCDI v5 submission/feedback period kick off

Public Feedback and Comment Period
January 12 – April 17, 2023

Draft USCDI v4 data elements
- Definitions
- Applicable standards
- Public comments due by April 17, 2023, at 11:59 p.m. Eastern

Level 2 elements not included
- Public comments due by April 17, 2023, at 11:59 p.m. Eastern

Specific Feedback Requested
- Treatment Intervention and Care Experience Preferences
- Medication Adherence and Instructions
- Time of Procedure

Discussion

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 workgroup and made part of the public record

Workgroup Work Planning

Sarah DeSilvey, Co-Chair

Naresh Sundar Rajan, Co-Chair

Upcoming Meetings

- February 1, 2023

- February 7, 2023

- February 15, 2023

- February 22, 2023

- March 1, 2023

- March 8, 2023

- March 15, 2023

- March 22, 2023

- March 29, 2023

- April 5, 2023

Adjourn