

May 2, 2022

Micky Tripathi, Ph.D., M.P.P.
National Coordinator for Health Information Technology
U.S. Department of Health and Human Services
330 C St SW
Washington, DC 20416

Dear Dr. Tripathi,

On behalf of Medical Information Technology, Inc. (MEDITECH), I am pleased to comment on the *2022 Standards Version Advancement Process (SVAP)*.

We currently support the continued standardization efforts from ONC, especially when it comes to FHIR standards. Therefore, we would like to encourage ONC to continue moving forward with adopting mature FHIR standards.

We are looking for clarification from ONC on SVAP requirements. It is not clear, when reviewing the SVAP documentation, if an EHR vendor can update to a standard like USCDI v2 but only for specific criteria, (g) (10), and not all criteria listed in the “Certification Criteria(on) References Standard/Implementation Specification” column. For example, we believe it would be beneficial to update USCDI v2 for FHIR but not for the CCD exchange criteria. We feel that when it comes to CCD exchange, the CCD is already cumbersome, and additional advancements would not be beneficial to users. We believe that data can be delivered more effectively in a different format, like FHIR. We would encourage ONC to let EHR vendors pick and choose which criteria to SVAP within a standard. If the requirements for SVAP are to update all criteria within a standard, then we feel this is holding back advancements that are important and are a priority, like FHIR.

QRDA I & III - As an EHR vendor, we update QRDA I and III annually when CMS releases the most recent IG (this year, we will be working on 2023). We do this as a part of our development cycle for the following year's measures. Our customers need the most recently published CMS QRDA to align with the most recent measures developed. EHR vendors have completed this process for many years without any additional certification efforts. We also note that the SVAP process will always be behind the appropriate version. This is due to the timing of CMS' release of the QRDA specifications and the timing of draft SVAP becoming available. We believe the inclusion of QRDA in SVAP is unnecessary because of this timing gap. Additionally, it will confuse healthcare organizations at a very stressful attestation time. Seeing our listing SVAP to the previous year's CMS QRDA IG will certainly create concerns, even if it is the most up-to-date SVAP available.

USCDI V2 - We support the data elements within USCDI v2. We acknowledge that it is vital to continue to move the needle forward on USCDI, equity, and SDOH. Moving forward, we believe that the USCDI advancement should be for FHIR and not for the other criteria. We would like to reiterate that we think EHR vendors should be allowed to update to v2 for the criteria they feel advances sharing.

HL7 FHIR US Core Implementation Guide STU 4.0.0 - We support the update to this standard.

HL7 FHIR SMART Application Launch Framework Imp Guide R2.0.0 - We support the update to this standard.

HL7 FHIR Bulk Data Access (Flat FHIR) (v2.0.0: STU 2) - We support the update to this standard.

Thank you for your time and consideration. We look forward to the approval of the 2022 SVAP.