U.S. Core Data for Interoperability Task Force

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

March 14, 2018
Agenda

• Call to Order / Roll Call
• Overview of meeting and goals
• Review feedback from homework
• Confirm consensus of data class stages
• Review Draft Recommendations
• Discuss remaining areas of charge
• Public comment
Where We’re Going

- **Overarching Charge:** Review and provide feedback on the USCDI structure and process
- Continue preparation for Preliminary Recommendations due March 21
- Goal of today’s meeting
  - Come to consensus on data class stages and criteria for promotion through the stages of the USCDI
  - Review remaining areas where task force recommendations are still needed
Draft Stages: Moving from “Proposed” to “USCDI”

- **Stage 1: Proposed**
- **Stage 2: Preparation**
  - Value of data class has been demonstrated
  - Work to technically specify data class begins
- **Stage 3: Emerging**
  - Technical specifications of data class are complete
  - Technical development of data class
  - Data class is tested informally
- **Stage 4: Candidate**
  - Testing of data class in production settings is conducted
- **Stage 5: USCDI**
  - Data class is ready to be implemented (normative)
Homework Assignment Review

• General consensus on the proposal of the Process to advance a data class from Proposal through Implementation

• Additional questions that arose from the process that require additional discussion:
  » “Widespread deployment and testing” - What does this encompass? All stakeholders?
  » Incorporate better information on what the concept of the degree of interoperability means
  » Clarify stakeholder groups between Stage 1 (1 stakeholder) and Stage 2 (multiple stakeholders)
  » Clarify what is means to have a “primary sponsor to shepherd data class through the process”
  » Criteria for semantic standards?
  » Who will coordinate and monitor this work?
  » We shouldn’t only limit evaluation to HL7 and FHIR adoption
Stage 1: Proposed

- Any data class ONC receives via feedback process that lacks the demonstrated value or technical progress to be placed at a more advanced stage is placed here
- HL7 Standard Level: does not apply
- To advance to Stage 2 Preparation, data class must:
  - Demonstrate wide-scale value to at least one of: 1) large $n$ of patients, 2) large $n$ of caregivers, or 3) multiple non-patient/caregiver stakeholder groups
  - Bonus “points” for relevance to a government policy priority

*Thought process: This is essentially a catch-all for proposed data classes that haven’t begun any technical development or demonstrated the sufficient value to be considered. In other words, “we received your feedback, but you didn’t give us enough to make it actionable.” Specific definitions of value to be determined.*
Stage 2: Preparation

• Data class has demonstrated value as defined in Stage 1
• HL7 Standard Level: In development
• To advance to Stage 3 Emerging, data class must:
  » Clearly define the scope of the data class, including:
    – Names, definitions, and data formats/vocabulary of proposed data elements
    – If choice of a data format is between computable and non-computable, there must be justification for selection of non-computable
  » Define specific use cases for multiple stakeholders, including any that would use or benefit from implementation of data class
  » Designate a primary Sponsor to shepherd the data class through the process

Thought process: *This is the time when real technical work and assessment begins. Data class proposers must show in detail what data elements make up the data class, what data is being collected, and in what forms or vocabularies. They must also provide detailed use cases for anyone who will use that data.*
Stage 3: Emerging

- Data class has been defined and its future applications demonstrated
- HL7 Standard Level: Draft; FHIR Maturity Level (or equivalent model): 0
- To advance to Stage 4 Candidate, data class must:
  - Progress technically to be testable in production settings (testing at Dev Days or Connectathon-type events is Emerging level, not Candidate level)
  - Readiness for production setting testing requires that:
    - Data can be tested for all mature transport standards in a curated list (e.g., FHIR, CCDA)
    - Is being collected nationwide, and there are no barriers to collection where it may not be
    - Known cost barriers to implementation and workflow issues have theoretically been mitigated
    - [Semantic standards...]

*Thought process: Technical work is focused on preparing the data class to be tested in production settings and to meet technical requirements essential to interoperability.*
Stage 4: Candidate

- Data class has achieved technical level such that it can be tested in production settings
- HL7 Standard Level: Trial Use; FHIR Maturity Level (or equivalent maturity model): 1-5
- To advance to Stage 5 USCDI, data class must:
  » Barriers to nationwide implementation have been mitigated
  » Achieve Normative status

*Thought process: Data class to be 100% ready to be implemented to advance to USCDI. Initial placement in “sooner” Candidate status (e.g., 2019) or “later” (e.g., 2021) will depend on where data class is in the testing/maturity level process.*
Stage 5: USCDI

- Data class is fully ready to be implemented in real-life settings
- HL7 Standard Level: Normative; FHIR Maturity Level (or equivalent maturity model): 6
Stakeholder Feedback

• Specific Charge: Mechanisms/approaches to receive stakeholder feedback regarding data class priorities

• Task Force Recommendations
  » Open Discussion
    – Note: this model advantages the big stakeholders over the little ones. Do we need some countervailing process to assure that the little ones get their opportunity?
USCDI Expansion

- Specific Charge: How the USCDI would be expanded and by how much
- Task Force Recommendations
  - Expansion should be dependent on data classes’ ability to meet the criteria in each of the stages
  - Open Discussion
USCDI Frequency of Publication

• **Specific Charge:** Any factors associated with the frequency with which it would be published.

• **Task Force Recommendations**
  » Align the USCDI with the Interoperability Standards Advisory (ISA)
  » Use similar structure to the ISA
    – Stakeholder feedback on an ongoing basis
    – Not stagnant
  » USCDI should be a dynamic framework to adequately reflect the data classes that will be the most impactful, scalable and timely
  » Open Discussion
U.S. Core Data for Interoperability Task Force
Appendix
# USCDI Task Force Membership

<table>
<thead>
<tr>
<th>Name</th>
<th>Organization</th>
<th>Role</th>
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<tbody>
<tr>
<td>Christina Caraballo</td>
<td>Get Real Health</td>
<td>Co-Chair</td>
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<td>Terry O’Malley</td>
<td>Massachusetts General Hospital</td>
<td>Co-Chair</td>
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<td>Brett Oliver</td>
<td>Baptist Health</td>
<td>HITAC Committee Member</td>
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<td>Clem McDonald</td>
<td>National Library of Medicine</td>
<td>HITAC Committee Member</td>
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<tr>
<td>Ken Kawamoto</td>
<td>University of Utah Health</td>
<td>HITAC Committee Member</td>
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<tr>
<td>Steven Lane</td>
<td>Sutter Health</td>
<td>HITAC Committee Member</td>
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<tr>
<td>Valerie Grey</td>
<td>New York eHealth Collaborative</td>
<td>HITAC Committee Member</td>
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<tr>
<td>Dan Vreeman</td>
<td>Regenstrief Institute, Inc</td>
<td>Public Member</td>
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<tr>
<td>Eric Heflin</td>
<td>Sequoia Project</td>
<td>Public Member</td>
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<tr>
<td>Kim Nolen</td>
<td>Pfizer</td>
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<tr>
<td>Laura Heermann Langford</td>
<td>Intermountain Healthcare</td>
<td>Public Member</td>
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<td>Leslie Kelly Hall</td>
<td>Healthwise</td>
<td>Public Member</td>
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<td>Mike Perretta</td>
<td>Docket</td>
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<tr>
<td>Nancy Beavin</td>
<td>Humana</td>
<td>Public Member</td>
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<tr>
<td>Rich Elmore</td>
<td>Allscripts</td>
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<tr>
<td>Rob Havasy</td>
<td>HIMSS</td>
<td>Public Member</td>
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U.S. Core Data for Interoperability (USCDI) Charge

• **Overarching Charge**: Review and provide feedback on the U.S. Core Data for Interoperability (USCDI) structure and process.

• **Specific Charge**: Provide recommendations on the following:
  
  » Mechanisms/approaches to receive stakeholder feedback regarding data class priorities;
  
  » The proposed categories to which data classes would be promoted and objective characteristics for promotion;
  
  » How the USCDI would be expanded and by how much; and
  
  » Any factors associated with the frequency with which it would be published.
Prioritization Criteria

Characteristics of the Data Class

- Important to a high priority domain
- Based on TEP, Standards body type of review, real time consensus e.g. ISA
- Ease of standardization
- Currently being collected
- Mature standards exist
- Standards exist and are in production use
- High value to many domains
- Captured within current workflows
- "Capturability"
- Viewed as a critical need by someone
- Value to future workflows

Characteristics of the Stakeholder

- Provider/Clinician
- Consumer/Individual/Family
- Payer/Insurance
- Regulator
- Contributes to a valued health outcome
- Researcher
- Public health

Characteristics of the Domain

- High volume
- High cost
- High failure rate
- Cuts across other domains/broad applicability

Characteristics of the Subject Population

- High risk
- High utilizers
- Policy Priority

Characteristics of the Data Management Process

- Cost
- Availability
## Workplan

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<tr>
<th>Meeting Date</th>
<th>Potential Discussion Items</th>
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<tr>
<td>February 21, 2018</td>
<td>• Discuss USCDI Task Force charge scope and feedback</td>
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<tr>
<td>February 28, 2018</td>
<td>• Proposed categories to which data classes would be promoted</td>
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<tr>
<td>March 7, 2018</td>
<td>• Mechanisms and approaches to receive stakeholder feedback regarding data classes and elements</td>
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<td>March 14, 2018</td>
<td>• Objective characteristics for data class promotion</td>
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<td>• Prepare Draft Recommendations for HITAC review</td>
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<td>March 21, 2018</td>
<td>• Draft recommendations shared with HITAC committee</td>
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<td>• Continued discussion on objective characteristics</td>
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<td>March 28, 2018</td>
<td>• How the USCDI would be expanded and by how much</td>
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<td>April 4, 2018</td>
<td>• Frequency of USCDI publication and associated factors</td>
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<td>April 11, 2018</td>
<td>• Update and refine recommendations</td>
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<td>April 17, 2018</td>
<td>• Finalize recommendations</td>
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<td>April 18, 2018</td>
<td>• Present recommendations to full HITAC Committee</td>
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Reference Materials

- Health IT Standards Committee recommendation letter incorporating Standards & Interoperability Task Force recommendations (March 26, 2015)