Health Information Technology Advisory Committee
U.S. Core Data for Interoperability Task Force 2021 Virtual Meeting

Meeting Notes | May 4, 2021, 10:30 a.m. – 12:00 p.m. ET

Executive Summary
The focus of the U.S. Core Data for Interoperability Task Force 2021 (USCDI TF 2021) meeting was to continue Phase 2 of its work, which will culminate in two presentations by the co-chairs of the TF’s recommendations to the HITAC at future meetings. The TF continued to work on Tasks 2b and 2c.

There were no public comments submitted by phone, but there was a robust discussion in the chat feature in Adobe Connect.

Agenda
10:30 a.m. Call to Order/Roll Call
10:35 a.m. Past Meeting Notes
10:45 a.m. Tasks 2b and 2c
11:50 a.m. TF Schedule/Next Meeting
11:55 a.m. Public Comment
12:00 p.m. Adjourn

Call to Order
Cassandra Hadley, Acting Designated Federal Officer, Office of the National Coordinator for Health IT (ONC), called the meeting to order at 10:30 a.m.

Roll Call

MEMBERS IN ATTENDANCE
Steven Lane, Sutter Health, Co-Chair
Leslie Kelly Hall, Engaging Patient Strategy, Co-Chair
Ricky Bloomfield, Apple
Hans Buitendijk, Cerner
Grace Cordovano, Enlightening Results
Jim Jirjis, HCA Healthcare
Ken Kawamoto, University of Utah Health
John Kilbourne, Department of Veterans Health Affairs
Clem McDonald, National Library of Medicine
Aaron Miri, University of Texas at Austin, Dell Medical School and UT Health Austin
Brett Oliver, Baptist Health
Mark Savage, University of California, San Francisco’s Center for Digital Health Innovation
Abby Sears, OCHIN
Sheryl Turney, Anthem, Inc.
MEMBERS NOT IN ATTENDANCE
Les Lenert, Medical University of South Carolina
Michelle Schreiber, Centers for Medicare and Medicaid Services (CMS)
Sasha TerMaat, Epic
Andrew Truscott, Accenture

ONC STAFF
Cassandra Hadley, Public Health Analyst, Office of the National Coordinator (ONC); Acting Designated Federal Officer
Matthew Rahn, Deputy Director, Standards Division, Office of the National Coordinator (ONC)

General Themes

TOPIC: USCDI TASKS 2B AND 2C
The USCDI TF 2021 focused on Phase 2 of its work. Recommendations from Tasks 2b and 2c will be presented to the HITAC on June 9, 2021. The TF will work on the other Tasks (2a and 3) over the summer, and they are due and will be presented at the HITAC’s September 9, 2021 meeting.

Key Specific Points of Discussion

TOPIC: USCDI TF 2021 HOUSEKEEPING

- USCDI TF 2021 meeting materials, past meeting summaries, presentations, audio recordings, and final transcriptions are posted on the website dedicated to the TF located at https://www.healthit.gov/hitac/committees/us-core-data-interoperability-task-force-2021
- The TF will continue to meet weekly on Tuesdays at the same time to discuss Phase 2 of its work, and any breaks in the meeting schedule will be announced. The TF may take a short break in meetings before the June presentation to the HITAC while the co-chairs prepare the recommendations and related materials.

TOPIC: TASKS 2B AND 2C
The co-chairs discussed the USCDI TF 2021’s next steps and plans for Phase 2 of its work. It was previously announced that the TF’s responses to the remaining tasks would be due to the HITAC by September 9, 2021, but Steven stated that the TF intends to deliver its recommendations for Tasks 2b and 2c to the HITAC at its June 9, 2021 meeting. The others (Tasks 2a and 3) will be delivered in September. The TF’s remaining tasks include:

- Task 2: Evaluate the USCDI expansion process and provide HITAC with recommendations for:
  - 2a - ONDEC submission system improvements
  - 2b - Evaluation criteria and process used to assign levels to submitted data classes and elements
  - 2c - Prioritization process used by ONC to select new data classes and elements for draft USCDI v2
- Task 3: Recommend ONC priorities for USCDI version 3 (USCDI v3) submission cycle
Leslie stated that the USCDI TF 2021 co-chairs met with ONC Leadership and Micky Tripathi, the National Coordinator for Health Information Technology, to discuss the HL7’s presentation and determine how the TF will prioritize ongoing work, improve its processes and optimize the outcomes of its efforts. The ONC New Data Element and Class (ONDEC) submission system was discussed, and Steven explained that it was likened to a “nest,” where items are nurtured, grow, and then are hatched into the USCDI. There are items lower down in the hierarchy of the “nest” (ONDEC system) that will likely not be ready for inclusion in Version 3 of the USCDI (USCDI v3), so they will be highlighted and matured in preparation for later versions of the USCDI.

Aaron asked that the TF, while it looks into the possibility of prioritizing certain data elements, consider which changes would most effectively reduce inequities across the healthcare landscape. Leslie shared the ONDEC submission evaluation criteria that ONC used to determine the leveling of data classes and elements in the draft USCDI v2, which was included on slide #5 in the TF’s presentation materials. The TF co-chairs described the conversation they had with ONC around incorporating suggested changes to the leveling criteria and explained that they determined that the concept of assessing the “maturity” of a data class or element differed from determining its “priority.” They stated that “maturity” is more quantitative in nature and recommended that the TF consider not recommending changes to the ONDEC leveling criteria for determining maturity. However, the co-chairs explained that two approaches, including the lens of “priority,” could be suggested for use as leveling criteria for data classes/elements going forward. The co-chairs asked TF members to review a draft of prioritization criteria for USCDI v3, which was included on slide #6. As an illustration of USCDI submissions that might be leveled lower in terms of technical maturity but higher in terms of prioritization, Leslie discussed the example of how Social Determinants of Health (SDOH) data elements could be leveled, which Abby raised as a question at the previous meeting.

Leslie reviewed each of the draft points of prioritization criteria developed for USCDI v3 (on slide #6) and requirements for Level 2. She discussed the thought process behind the criteria and highlighted relevant examples. Steven explained that the top four items are ones that ONC has used historically, and the bottom four reflect suggestions by the TF to inform prioritization to improve health equity, support public health use cases, respond to the needs of the data underserved, and address national priorities/imperatives.

Leslie stated that another product of the work the ONC team and TF co-chairs completed was a series of questions related to recommendations around topics like the frequency of review of existing data elements and who is responsible for reviewing the leveling/prioritization process. She asked TF members to submit feedback on the resulting recommendations, which included:

- The USCDI TF reviews and contributes to the leveling/prioritization criteria, timed to inform each new submission cycle for the USCDI.
- The USCDI TF reviews the ONDEC submission system and potentially submits recommendations to HITAC, who would submit them to ONC.

Steven clarified that the USCDI TF’s recommendations will be submitted to the HITAC, which could decide to submit them to ONC. Also, he raised the question of what would be done if additional resources were needed, e.g., to perform reviews of the leveling of submitted data classes/elements more than once a year. In response to an inquiry from Clem, the co-chairs asserted that ONC would remain in charge, but these changes and recommendations are a way for the TF to have a voice in the process. Mark voiced his support for the TF playing a role in creating recommendations around both the leveling and prioritization criteria.

**DISCUSSION:**

- Clem commented that the work being done on SDOH data elements has become overly complicated and highlighted the disconnect around the perceived need to create new user guides for many elements. He suggested that the TF recommend the inclusion of all the SDOH data elements once they are baked into a standard, not cherry-picking just some. He referred to the use of standard instruments to collect SDOH data such as the [Protocol for Responding to and Assessing Patients’ Assets, Risks, and Experiences (PRAPARE)](https://www.betterhelp.com/prapare/) survey.
Steven thanked him for his comments and discussed the process by which the ONC team and the TF co-chairs used work completed/submitted by the Gravity Project and others around SDOH to call out a shortlist of items that were designated as Level 2, which were then called out by the TF for inclusion in V2. HL7 is working to determine what additional work needs to be done and how quickly they could support the inclusion of these items in USCDI. Steven suggested that, though some, including Clem, have called for the inclusion of all items from a data class (if some are included in that version of the USCDI), ONC has determined that only the items sufficiently advanced in the leveling process were mature enough for inclusion. Steven suggested that inviting more public comments and discussions, in addition to holding more regular cycles to re-level classes/elements and respond to public comments would be helpful.

Clem suggested that adding general purpose resources from Fast Healthcare Interoperability Resources (FHIR) for SDOH has encumbered the process, and sticking with the previous survey/questionnaire method would have been easier.

Leslie acknowledged the number of disconnects/gaps in the process Clem mentioned and invited feedback on the new prioritization process criteria, which, she suggested, was developed to repurpose the new criteria and reckon with the gaps. She stated that Clem’s feedback on HL7’s work and suggestions to use the surveys could be submitted via public comment.

Abby submitted several comments, which included:

- OCHIN did not suggest using the PRAPARE survey because it requires a great deal of effort, cost, and administrative burden to collect the information. OCHIN has found, through years of data collection and from peer-reviewed research, that not all of the data gathered via PRAPARE has proven useful in terms of impact or value. Also, the data that is often moved in transactions does not completely overlap with PRAPARE.

- Social service organizations and safety net patients have not been as represented as the commercial population in the decision-making process about what constitutes the maturity of data classes and elements, so the results of these conversations have been skewed.

- Systems used by many organizations (small social work practices, mental health clinics, etc.) often are not interoperable and do not have the capacity to move more complex data. It would be beneficial to use smaller steps to move infrastructure forward.

- Remove the word “majority” from the Level 2 criteria description for “Data supporting underserved stakeholder groups” prioritization criteria.
  
  - Leslie thanked her for her comments and explained that a mechanism is being created to accommodate situations like those Abby described, in which something has a low level of maturity (standards) level but a high priority level.

- Abby added some suggested modifications to the language of the new prioritization criteria and to the “Use Cases – Number of Stakeholders Impacted” (Level 1 and Level 2) category in the existing ONDEC leveling criteria. She submitted the new language in the public chat and explained that she would also submit it via email. The co-chairs and Abby discussed these suggestions and whether including them would lower the bar while bringing the prioritization dimension into the picture.

- Steven summarized the previous discussion between ONC and the TF co-chairs about how the USCDI is meant to be used and what it means for something to be part of the “core” of data for interoperability. The USCDI is not meant to be comprehensive, but rather to drive consistency across the ecosystem and community of stakeholders. As per Abby’s suggestion, underserved/at-risk communities would be a stakeholder that is included and supported with affirmative action but does not have to be the majority. Priority items can support driving data elements/classes into Level 2.

- Abby clarified that, for example, Sexual Orientation and Gender Identity (SOGI) or other data related to such an at-risk/underserved community is, by definition, not targeted to meet the needs of the majority.
Mark asked for clarification on ONC’s use of the “Use Cases – Number of Stakeholders Impacted” criteria for Level 2: “Pertains to majority of patients, providers, or events requiring its use.”
- Steven asked for clarification specifically around events (are they minority, while the patient/provider is majority?), and Mark expanded on that question.
- Matt responded that he would confirm how this criterion has been used by ONC and will follow up with the TF in the future.

Clem suggested language that implies something is statistically important or quantifiable without having to be the “majority.” He suggested using “important share.”
- Leslie responded that Abby’s suggested updates would be shared with the TF at the next meeting as redline text, and TF members will be invited to comment/contribute.

Grace inquired about how the USCDI TF’s short-term decisions would be impacted following the date (October 6, 2022) when the scope of information blocking will be expanded to include all Electronic Health Information (EHI).
- Steven responded that Jim Jirjis raised this issue early in the process, and he explained that there will be a flood of non-standardized data that begins to move. Stakeholders will have to deal with it, so Jim suggested that the TF recommend prioritizing certain items that could do more harm than good if they are exchanged without standardization. This is a prioritization issue that would be supported by/consistent with the new criteria.
- Leslie voiced her support for examining and discussing this issue at a future TF meeting.
- Clem stated that structure needs to be in place in time for the information blocking expansion date, though some internal structure might be missing. Balance is needed.

Grace inquired about putting support in place for public commenters/submitters who need more guidance with the process or are not the original submitter.
- Leslie responded that the TF could create a recommendation around educating and encouraging individuals to be more empowered to participate in the public comment process.

Sheryl voiced her support for Grace’s comment and shared a related personal experience. She thanked the co-chairs and ONC for the new leveling + priority dual criteria prioritization process.

Steven added that Steve Posnack, from ONC, suggested that items may be identified and prioritized or even re-leveled using the dual criteria prioritization process. In this way, items at all levels (including Comment) can be identified and matured in an accelerated manner by HL7, the community, through public comment, etc.

Steven asked TF members to recommend specific criteria regarding what is meant by the phrase “the data underserved.”
- Leslie agreed and stated that the “underserved” could be an underserved stakeholder group but for which the standards used are matured, and all data is being exchanged.
- Grace commented that the chart captured so many ideas but suggested that it lacks a grading system to properly assess and potentially promote items.
- Steven explained that he intended that the top four criteria must be met for something to move forward in the USCDI, and the bottom four provide focus and priority but would not all need to be met. Meeting one of the lower four criteria could highlight an item and identify it as something that requires extra focus to move it to the next level, or to elevate it from amongst multiple Level 2 items for inclusion in the subsequent USCDI version. He asked for feedback on this suggestion.
- Grace suggested that TF members run example data classes/elements through the proposed prioritization criteria to determine its usefulness but generally supported the idea of the bottom four criteria being used as “bonus points” to push items forward, while the top items must be met. She stated that she needs more support to understand the maturity criteria when running examples.
TF members discussed several potential ways to run items through the criteria.

- Mark responded that there should be a balance around the totality of the circumstances instead of denying inclusion for an item just because it does not meet one of the top four maturity criteria. One example could be an item that is not presently aligned with ONC/CMS initiatives.

- Hans agreed with Mark’s comments and suggested using a list of candidates that would be shared with the industry to focus on maturing supporting standards. He supported using the priority criteria as “or” items now, but, in the future, they should become “and” items. Eventually, all submitted items could be scored in detail. Steven agreed, noting that this list came from work to prioritize USCDI v2 items. It would change for use with items farther down in the process (for future versions).

- Steven suggested that the items could either be rearranged into “and” and “or” categories or simply score them with points, though something could be lost using this method.

- Hans voiced his support for the new prioritization criteria and asked if a more visual representation of where data elements fit into the overall process could also be created.

- Leslie supported his suggestion for a visual representation to determine where stakeholders, events, priorities, maturity, or other criteria are most important.

- Steven highlighted Hans’ comment in the chat, noting that the TF and ONC staff would focus on it at the next TF meeting. The comment was, “If USCDI is targeted to be less than EHI/DRS we will retain more friction then necessary to access/exchange EHI/DRS.”

- Matt thanked TF members for their comments and explained that ONC’s criteria could be refined and changes could be made. He explained that the process and criteria could be updated again in the future, based on important events and priorities.

- Steven asked Matt to document and publicly publish the “why” behind ONC’s leveling decisions for submitted items in future submission and leveling cycles.

- Leslie suggested that the levels (Comment, Level 1, Level 2) could be linked to specific horizons to better communicate priorities and timelines/to the industry.

- Denise voiced her agreement with the TF’s proposed upcoming work.

**Action Items**

As their homework, USCDI TF 2021 members were asked to review the following Criteria Development Process in preparation for our next meeting:

1. Provide any specific recommendations to update language in the level criteria to the co-chairs (power point slide #5).
2. Provide any specific recommendations to update language in the Prioritization criteria to the co-chairs (power point slide #6).
3. Review the ONDEC prep sheet and be prepared to provide suggestions for improvements.

TF members were encouraged to review meeting materials on the TF website at [https://www.healthit.gov/hitac/committees/us-core-data-interoperability-task-force-2021](https://www.healthit.gov/hitac/committees/us-core-data-interoperability-task-force-2021)

**Public Comment**

**QUESTIONS AND COMMENTS RECEIVED VIA PHONE**

There were no public comments received via phone.

**QUESTIONS AND COMMENTS RECEIVED VIA ADOBE CONNECT**

Steven Lane: Welcome to the USCDI Taskforce meeting. We encourage public comment here in the chat throughout the meeting with 5 minutes for oral comments at the end.
Jim Jirjis: JimJirjis here
Cassandra Hadley: Thanks. I have you down.
Grace Cordovano, PhD, BCPA: Excellent Leslie

Steven Lane: https://www.nachc.org/research-and-data/prepare/

Steven Lane: All stakeholders have the opportunity to provide input to the maturity determination process through the USCDI website - https://www.healthit.gov/isa/united-states-core-data-interoperability-uscdi

Steven Lane: We need to invite, encourage and channel input to both the ONDEC https://www.healthit.gov/isa/ONDEC and the USCDI site to amplify the voices of those with valuable perspectives re both data maturity and exchange/use.

Clem McDonald: Abbey, thank you. I was not aware that social services were not happy with the instruments such as Prpare- I thought it only had about 14 questions. Would like to talk more offline so I am better educated

Abby Sears: It isn't that they aren't happy its more about that not all of it has the same value.

Abby Sears: Happy to discuss.

Steven Lane: ONDEC Prep Sheet: https://www.healthit.gov/isa/sites/isa/files/2020-10/USCDI-ONDEC-Submission-Form-Prep-Sheet-Final-2.docx

Abby Sears: I would like to ask for the following language change under the use cases - # Stakeholders Impacted: Pertinent to many, but not most patients, providers or relevant events, or used by few stakeholders or narrowly defined conditions or events if related to underserved patients or public health

Abby Sears: By the way....I really appreciate that the progress that has been made.

Abby Sears: This is a really sophisticated model that I think can really break down the barriers related to this.

Grace Cordovano, PhD, BCPA: The ONDEC prep sheet is a great resource, but take for example "Estimate the number of stakeholders who would capture, access, use or exchange this data element or data class:*", which is a required response, isn't something that can be easily answered without expertise and support.

Leslie Kelly Hall: Yes Grace, good point, we need plain language and allow for a narrative here.

Hans Buitendijk: I support Leslie’s suggestion of a visual representation to easily understand where a data class/element stacks up to the various aspects of priority and maturity. For standards that would not only cover vocabulary, but also technical standards (specifically implementation guides) having been published, specifically for C-CDA and FHIR US Core as those are the primary standards identified to support USCDI.

Ricky Bloomfield: +1

Grace Cordovano, PhD, BCPA: Out of all the stakeholders in the health care ecosystem, the patient stakeholder class in general is the most data underserved. I'm pretty certain that no other stakeholder class works routinely with paper and clipboards to accomplish their work.

Steven Lane: Consider the data needs of home care workers, complementary care providers (chiropractic, acupuncture, homeopathy), community-based therapists (PT, OT, ST, Art Therapy)

Leslie Kelly Hall: I would add to that list long term post acute care and many social workers are on paper...
Matthew Rahn: We are planning for Mike Lipinsky from ONC’s OPOL to present on USCDI and EHI next Tuesday

Hans Buitendijk: If USCDI is targeted to be less than EHI/DRS we will retain more friction then necessary to access/exchange EHI/DRS.

Steven Lane: Thanks Matt!

Matthew Rahn: For more information on the USCDI Expansion from when we released the draft USCDI v2 see our Standards Bulletin https://www.healthit.gov/sites/default/files/page/2021-01/ONC_Bulletin_2021_1_FINAL.pdf

Abby Sears: I agree Mark. I think if the top four are "ands" it may minimize the bottom four and I would be really worried that it will move things to the bottom of the list.

Grace Cordovano, PhD, BCPA: Mark, perhaps having something that fulfills all bottom 4 criteria could also trigger another pathway and discussion with standards development groups? The bottom 4 could provide a signal for a pulse of what are rising star items that need to be addressed.

Abby Sears: Very interesting idea Grace....As you said earlier, I would like to take some time to do some testing of these criteria to see how it will work.

Steven Lane: Abby & Grace - What do you see as the time necessary to do the sort of testing that you've suggested. Is this a process that could be completed in the next couple of weeks to inform our June suggestions to HITAC?

Mark Savage: I think a walkthrough of a couple of examples at our next meeting could provide significant help?

Grace Cordovano, PhD, BCPA: Steven, happy to try to take a stab with anyone interested?

Abby Sears: I think we could do it this week.

Mark Savage: Happy to help @Abby @Grace

Abby Sears: thanks....I can coordinate a call and some more support from our team at OCHIN....

Leslie Kelly Hall: I can help @abby, @mark @ Grace

Ken Kawamoto: I'm good

Sheryl Turney: i provide input when I have it

Sheryl Turney: i did have input today

John Kilbourne: my audio is having troublel I am good with the direction

Leslie Kelly Hall: thanks JOhn

Resources
USCDI TF 2021 Website
USCDI TF 2021 – May 4, 2021 Meeting Agenda
USCDI TF 2021 – May 4, 2021 Meeting Slides
USCDI TF 2021 – May 4, 2021 Webpage (for additional resources)
Adjournment
Steven thanked everyone for their work at the current meeting. The USCDI TF 2021 will hold its next meeting on Tuesday, May 11, 2021.

The meeting was adjourned at 11:58 a.m. E.T.