Meeting Notes

HEALTH INFORMATION TECHNOLOGY ADVISORY COMMITTEE (HITAC)

April 13, 2022, 9:30 a.m. – 11:00 a.m. ET
VIRTUAL
EXECUTIVE SUMMARY

Micky Tripathi, the National Coordinator for Health IT, welcomed everyone to the April 13, 2022, virtual meeting of the HITAC and provided an overview of ONC’s recent program updates. The co-chairs of the HITAC, Denise Webb and Aaron Miri, welcomed members, reviewed the meeting agenda, and presented the minutes from the March 10, 2022, HITAC meeting, which were approved by voice vote. On behalf of the Interoperability Standards Workgroup (IS WG), Steven Lane and Arien Malec presented the WG’s Recommendations and Report to the HITAC on its Phase 1 work. HITAC members submitted feedback and approved the recommendations by a voice vote. No public comments were submitted by phone during the meeting, but there was one submitted by email. There was a robust discussion in the public meeting chat via Zoom.

AGENDA

09:30 a.m. Call to Order/Roll Call
09:35 a.m. Welcome Remarks
09:45 a.m. Opening Remarks, Review of Agenda and Approval of March 10, 2022 Meeting Minutes
09:50 a.m. Interoperability Standards Workgroup Recommendations on Draft USCDI v3: HITAC Discussion and Vote
10:50 a.m. Public Comment
11:00 a.m. Final Remarks and Adjourn

CALL TO ORDER/ ROLL CALL

Mike Berry, Designated Federal Officer, Office of the National Coordinator for Health IT (ONC), called the March 10, 2022, meeting to order at 9:33 a.m.

ROLL CALL

Aaron Miri, Baptist Health, Co-Chair
Denise Webb, Individual, Co-Chair
Hans Buitendijk, Cerner
Steven (Ike) Eichner, Texas Department of State Health Services
Lisa Frey, St. Elizabeth Healthcare
Valerie Grey, New York eHealth Collaborative
Steven Hester, Norton Healthcare
Jim Jirjis, HCA Healthcare
John Kansky, Indiana Health Information Exchange
Kensaku Kawamoto, University of Utah Health
Steven Lane, Sutter Health
Leslie Lenert, Medical University of South Carolina
Hung S. Luu, Children’s Health
Arien Malec, Change Healthcare
Aaron Neinstein, UCSF Health
Eliel Oliveira, Dell Medical School, University of Texas at Austin
Brett Oliver, Baptist Health
James Pantelas, Individual
Abby Sears, OCHIN
Fillipe Southerland, Yardi Systems, Inc.
Sheryl Turney, Anthem, Inc.

HITAC MEMBERS NOT IN ATTENDANCE

Medell Briggs-Malonson, UCLA Health
Cynthia A. Fisher, PatientRightsAdvocate.org
Rajesh Godavarthi, MCG Health, part of the Hearst Health network
Clem McDonald, National Library of Medicine
Raj Ratwani, MedStar Health
Alexis Snyder, Individual

FEDERAL REPRESENTATIVES
Thomas Cantilina, Military Health System, Department of Defense (DoD)
Sanjeev Tandon, Centers for Disease Control and Prevention (CDC) (*Standing in for Adi V. Gundlapalli*)
Ram Iyer, Food and Drug Administration (FDA) (*Absent*)
Jonathan Nebeker, Department of Veterans Health Affairs (*Absent*)
Michelle Schreiber, Centers for Medicare and Medicaid Services
Ram Sriram, National Institute of Standards and Technology

ONC STAFF
Micky Tripathi, National Coordinator for Health Information Technology
Steve Posnack, Deputy National Coordinator for Health Information Technology
Avinash Shanbhag, Executive Director, Office of Technology
Mike Berry, Designated Federal Officer

WELCOME REMARKS
Micky Tripathi, the National Coordinator for Health IT, welcomed everyone and provided an overview of ONC’s recent program updates, including:

- He thanked the presenters and attendees of the Health Equity by Design Hearing held at the previous meeting of the HITAC. ONC is compiling the themes and potential actions shared at the hearing and will continue to engage with the HITAC on these topics.

- **Steven Lane and Arien Malec** will present the recommendations from the Interoperability Standards Workgroup (IS WG) on the Draft United States Core Data for Interoperability Version 3 (Draft USCDI v3), which will be followed by a discussion and HITAC vote. The public feedback period for Draft USCDI v3 is open until April 30, 2022, and comments can be entered via the ONC New Data Element and Class (ONDEC) Submission System at [https://www.healthit.gov/isa/united-states-core-data-interoperability-uscdi#draft-uscdi-v3](https://www.healthit.gov/isa/united-states-core-data-interoperability-uscdi#draft-uscdi-v3).

- The IS WG will now begin Phase 2 of its work with recommendations due to the HITAC by June 16, 2022:
  - Identify opportunities to update the ONC Interoperability Standards Advisory (ISA) to address the HITAC priority uses of health IT, including related standards and implementation specifications.

- HHS released its updated Strategic Plan for Fiscal Years 2022 through 2026 (FY 2022 - 2026). For FY 2022 - 2026, HHS is publishing its Strategic Plan as a Web document, which will be updated periodically to reflect the Department’s strategies, actions, and progress toward its goals. The Strategic Plan aligns closely with ONC’s 2020-2025 Federal Health IT Strategic and strongly focuses on supporting patient access to data.

- ONC is holding the second part of the ONC Annual Meeting on April 13 and 14, 2022, with the first sessions directly following the HITAC meeting. The Annual Meeting will feature various dynamic and engaging panel sessions, networking, and exhibits. Related information is available on the healthit.gov website. All HITAC meeting attendees are invited to join.

- The next HITAC meeting will be held on May 18, 2022.
OPENING REMARKS, REVIEW OF AGENDA, AND APPROVAL OF MARCH 10, 2022, MEETING MINUTES

Aaron Miri and Denise Webb, HITAC co-chairs, welcomed all members and presenters. Denise invited everyone to attend the ONC Annual Meeting following the completion of the HITAC meeting. Aaron reviewed the agenda for the meeting.

Aaron invited members to examine the minutes from the March 10, 2022, meeting of the HITAC and called for a motion to approve the minutes. The motion was made by Lisa Frey.

The HITAC approved the March 10, 2022, meeting minutes by voice vote. No members opposed or abstained.

INTEROPERABILITY STANDARDS WORKGROUP RECOMMENDATIONS ON DRAFT USCDI V3: HITAC DISCUSSION AND VOTE

Steven Lane and Arien Malec, co-chairs of the Interoperability Standards Workgroup (IS WG), presented the IS WG Phase 1 Recommendations and Report on Draft USCDI Version 3. The IS WG was chartered to replace the work of the prior United States Core Data for Interoperability Task Force 2021 (USCDI TF 2021) and the Interoperability Standards Priorities Task Force 2021 (ISP TF 2021). Steven presented an overview of the IS WG’s membership, charges, methods/phased work approach, meeting schedule, and deliverable due dates, detailed in the IS WG presentation slides. He thanked the WG’s members for their engagement and contributions.

The charges included:

- Overarching charge: Review and provide recommendations on the Draft USCDI Version 3 and other interoperability standards
- Specific charges:
  - Due to the HITAC by April 13, 2022:
    - Evaluate Draft USCDI v3 and provide HITAC with recommendations for:
      - 1a - New data classes and elements from Draft USCDI v3
      - 1b - Level 2 data classes and elements not included in Draft USCDI v3
  - Due June 16, 2022:
    - Identify opportunities to update the ONC Interoperability Standards Advisory (ISA) to address the HITAC priority uses of health IT, including related standards and implementation specifications.

Steven described the areas of focus for this iteration of the WG and displayed the published Draft USCDI Version 3. He highlighted the newly proposed and reorganized data classes and data elements, which were identified in the presentation slides. He shared a list of specific questions on which ONC requested feedback, which was detailed in the presentation slides, and included general feedback on Draft Version 3 of the USCDI (Draft USCDI v3) and specific feedback on several existing data elements.

Steven described the work completed by the IS WG following its kick-off meeting on January 25, 2022, and he highlighted the subject matter expert (SME) presentations and feedback that informed the WG’s work and recommendations. He reviewed the IS WG Phase 1 recommendations to the HITAC, which were broken into the following categories: new data classes and elements included in Draft USCDI v3 Recommendations 01 - 12, Level 2 data elements not included in Draft USCDI v3 (Recommendations 13 - 16), data elements from prior versions of USCDI (Recommendations 17 – 23), and recommendations...
that were out-of-scope for the current WG but warrant future ONC focus (Recommendations A – E). **Steven** and **Arien** described each of the recommendations, which were detailed in the **IS WG presentation slides**, and shared background information around their development, including the SME presentations the WG received and key takeaways and questions that have arisen because of WG discussions.

**Steven** and **Arien** thanked ONC for their support of the IS WG, members for their dedication and input and the SMEs for sharing their expertise. **Denise** invited HITAC members to share comments or questions.

**James Pantelas** and **Aaron Miri** made a motion to adopt the IS WG Report and Recommendations and advance them to the National Coordinator for Health IT. The motion was seconded by **Hans Buitendijk** and **Michelle Schreiber**.

The HITAC approved the IS WG Report and Recommendations by voice vote. No members opposed or abstained.

**Discussion:**

- **Steven Lane** responded to a comment from the public chat, which suggested that the WG include previous phone numbers and email addresses to its suggestion that previous addresses be collected and used for patient matching. He voiced his agreement but noted that, as these data elements were not previously suggested by a member of the public or leveled by ONC, they were not eligible for consideration by the WG. He encouraged members of the public to share this and other suggestions as comments on the USCDI website at [https://www.healthit.gov/isa/united-states-core-data-interoperability-uscdi](https://www.healthit.gov/isa/united-states-core-data-interoperability-uscdi).

- **Michelle Schreiber** thanked the IS WG for considering and including several recommendations submitted by the Centers for Medicare & Medicaid Services and the Centers for Disease Control and Prevention (CDC). She encouraged the HITAC and ONC to support a standardized medication list and suggested that, in the future, they focus on end-of-life issues and detailing the Encounter/Encounter History data classes and elements.

  - **Arien Malec** commented that recommendations around a standardized medication list were discussed by the WG but were removed until more work is done to complete the interoperability specifications for medication lists. The WG would like to include this topic in its future work plan.

  - **Steven Lane** commented that, with regard to end-of-life issues, there are a number of advanced directive data elements at Level 1, which meant that they were not available to the WG to recommend bringing forward. However, several workgroups that reviewed the USCDI have enthusiastically discussed the potential value of exchanging information about advanced directives. He stated that the WG’s understanding is that ONC has looked at that work and determined that it is not yet ready for inclusion in USCDI. He encouraged anyone who is working in that space to comment within the USCDI website to engage with ONC and help to advance those standards.
- **Hans Buitendijk** thanked the co-chairs of the IS WG for the summary of the recommendations. He suggested that the HITAC and ONC consider that, as the USCDI grows to encompass more data elements and classes, there may be some that are appropriate to include in the USCDI but that may not be supported by all of health IT. He asked for future work and discussions to consider challenges posed to the certification of health IT products by the USCDI classes and elements that they would be required to support.
- **Denise Webb** voiced her agreement and noted that health IT vendors could likely be encouraged to get their health IT certified if there were additional options.

**PUBLIC COMMENT**

**Mike Berry** opened the meeting for public comment and reminded attendees that written comments could be submitted at [ONC-HITAC@accelsolutionsllc.com](mailto:ONC-HITAC@accelsolutionsllc.com).

**Questions and Comments Received via Telephone**

There were no public comments received via telephone.

**Questions and Comments Received via Zoom Webinar Chat**

Michael Berry: Welcome to the April 2022 HITAC meeting. We will begin soon. Please remember to change your chat setting to “Everyone” if you would like everyone to see your chat. Thanks!

Elieol Oliveira: Previous phone numbers and email addresses would be as useful in matching.

Steven Lane: Previous Phone Number and Previous email have not yet been submitted for consideration.

Steven Lane: Previous Address is already included in USCDI: [https://www.healthit.gov/isa/taxonomy/term/911/uscdi-v2](https://www.healthit.gov/isa/taxonomy/term/911/uscdi-v2)

Elieol Oliveira: Was consideration made to add Caretakers given the importance they plan on one’s care? Great work!

Arien Malec: Caretakers are already accommodate via care team members.

Elieol Oliveira: Thanks Arien. It sounded like it was intended for matching.

Thompson Boyd: For Medications: it would be nice to have a field for: “Indication” or “Reason”. Background: Dosing can be different depending on the indication. For example: Beta blockers.

Sheryl Turney: Great work by everyone on the IS work group. I agree with Michelle’s comments.

Arien Malec: @thompson — as noted, It would be good to have that as a submission to USCDI.

Donna Doneski: The PACIO Project has been working on Advance Directives FHIR IG. [https://build.fhir.org/ig/HL7/pacio-adi/](https://build.fhir.org/ig/HL7/pacio-adi/)

Andrea Pitkus: @End of Life, recommend alignment with ordering processes/requirements in HIT including those elements/functionality already included in USCDI/PI.

Arien Malec: Much of the advanced directive and end of life care information is currently at Level 1, and needs to be advanced to Level 2

Steven Lane: [https://www.healthit.gov/isa/uscdi-data-class/advance-directives#level-1](https://www.healthit.gov/isa/uscdi-data-class/advance-directives#level-1)
Mark Savage: Amen! Thank you, ONC!

Bryant thomas Karras: Thank you all

Questions and Comments Received via Email
Marjorie Rallins, DPM, MS, Executive Director of LOINC® and Health Data Standards submitted the following to the record via email:

The LOINC and Health Data Standards program of the Regenstrief Institute supports the addition of Average Blood pressure as a distinct and additional data element within the vital signs class of USCDI V3. Including average blood pressure to the USCDI is critically important in supporting health care providers with diagnosing high blood pressure and more effectively assessing blood pressure control. The Regenstrief institute has been working with the American Medical Association to ensure that there is a broad range of LOINC content to express BP readings. Included in this set are LOINC concepts to encode the average systolic and average diastolic blood pressure over a defined time period or number of readings to more robustly represent a patient’s true blood pressure for clinical decision making. Respectfully submitted,
Marjorie Rallins

FINAL REMARKS
Mike Berry reminded members that the next meeting of the HITAC will be held on May 18, 2022. All materials from today’s meeting would be made available at https://www.healthit.gov/hitac/events/health-it-advisory-committee-44.

Denise and Aaron thanked everyone for their participation and discussion.

ADJOURN
The meeting was adjourned at 10:35 a.m. ET.