



HealthIT
ADVISORY COMMITTEE

Public Health Data Systems Task Force 2022

Recommendations to the HITAC

Arien Malec, Co-Chair

Gillian Haynes, Co-Chair



Agenda

- Charge
- Membership
- Timeline
- Approach
- Presenters
- Recommendations





Introduction

- Public health has broad legal and federated authority over many disparate program areas
- Categorical funding limited resources to invest in infrastructure to modernize public health data systems
- Much progress has been made since the enactment of HITECH, but significant gaps remain
 - Critical that public health receive the relevant data and in the correct format from health care providers, to be able to efficiently use the data for public health purposes and to support timely, data-driven decision-making
 - Lack of interoperability and the inability of providers' systems to efficiently send data can further create a manual reporting burden on providers.



Public Health Data Systems Task Force 2022 Charge

Overarching Charge:

The Public Health Data Systems Task Force 2022 will build upon recommendations from previous HITAC public health-focused task forces* to inform ONC's continued collaborative work with CDC on improving public health data systems, and in support of CDC's greater Data Modernization Initiative (DMI) efforts.

Specific Charge:

The Public Health Data Systems Task Force 2022 shall examine existing public health certification criterion, known as the “(f) criteria” in the ONC Health IT Certification Program, certifying the transmission of data to public health agencies to:

1. Identify gaps in the functionalities and standards included in existing (f) criteria, including gaps in 1) functionality, and 2) implementation by developers. Provide recommendations advancing criteria, testing guidance, and/or standards to address gaps.
2. Assess the specific functions (e.g., receipt of data, ingestion of data, analysis of data) supported by public health data systems that would benefit from further standardization and potential certification.
3. Recommend which data flows, aligned with existing (f) criteria, should be prioritized for standardized receipt of data.

[*Public Health Data Systems Task Force 2021 Report](#)

Recommendations are due by November 10, 2022

Public Health Data Systems Task Force 2022 Roster



Name	Organization	Name	Organization
Gillian Haney (Co-Chair)	Council of State and Territorial Epidemiologists (CSTE)	Jennifer Layden**	CDC
Arien Malec* (Co-Chair)	Change Healthcare	Leslie Lenert*	Medical University of South Carolina
Rachelle Boulton	Utah Department of Health and Human Services	Hung Luu*	Children's Health
Hans Buitendijk*	Oracle Cerner	Mark Marostica	Conduent Government Solutions
Heather Cooks-Sinclair	Austin Public Health	Aaron Miri*	Baptist Health
Erin Holt Coyne	Tennessee Department of Health	Alex Mugge**	CMS
Charles Cross	Indian Health Service	Stephen Murphy	The Network for Public Health Law
Steven Eichner*	Texas Department of State Health Service	Eliel Oliveira*	Dell Medical School, University of Texas at Austin
Joe Gibson	CDC Foundation	Jamie Pina	Association of State and Territorial Health Officials (ASTHO)
Rajesh Godavarthi*	MCG Health, part of the Hearst Health network	Abby Sears*	OCHIN
Jim Jirjis*	HCA Healthcare	Vivian Singletary	Public Health Informatics Institute
John Kansky*	Indiana Health Information Exchange	Fillipe Southerland*	Yardi Systems, Inc.
Bryant Karras	Washington State Department of Health	Sheryl Turney*	Elevance Health
Steven Lane*	Health Gorilla		

* HITAC Member

** HITAC Federal Representative



Public Health Data Systems Task Force 2022 Timeline

August 25, 2022 – Kick-off of the PHDS Task Force

November 10, 2022 – HITAC Vote on Draft Recommendations

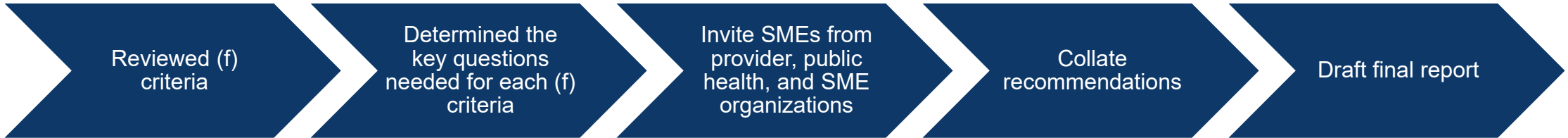


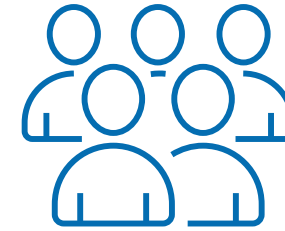
2022

12 Task Force Meetings Planned

2022

Approach





Public Health Reporting Criteria

Criterion Citation	Criterion Name
§ 170.315(f)(1)	Transmission to immunization registries
§ 170.315(f)(2)	Transmission to public health agencies — syndromic surveillance
§ 170.315(f)(3)	Transmission to public health agencies — reportable laboratory tests and value/results
§ 170.315(f)(4)	Transmission to cancer registries
§ 170.315(f)(5)	Transmission to public health agencies — electronic case reporting
§ 170.315(f)(6)	Transmission to public health agencies — antimicrobial use and resistance reporting
§ 170.315(f)(7)	Transmission to public health agencies — health care surveys

All criteria point to specific standards and implementation guides and are eligible for SVAP

Panel Participants

Date	Topic	Presenter	Organization
8/24/2022	Overview	Erin Holt Coyne Jim Jirjis Jeff Smith Daniel Weber Paula Braun	TN Department of Health HCA ONC CDC CDC
8/31/2022	(f)(1) Immunization	Mary Beth Kurilo Aaron Bieringer Hans Buitendijk	AIRA MN Department of Health TF Member and HIMSS EHRA Chair
9/9/2022	(f)(5) eCR	Ann Kayser Laura Conn	MN Department of Health CDC/CSELS/DHIS
9/16/2022	(f)(3) ELR	David DiCesare Riki Merrick Justin Nucci Carmen Pugh Prashant Gupta	NYS Department of Public Health APHL CO Public Laboratory Labcorp Labcorp

Panel Participants

Date	Topic	Presenter	Organization
9/21/2022	(f)(2) Syndromic	Rosa Ergas Karl Soetebier Aaron Miri	MA Department of Health CDC Baptist Health
9/28/2022	(f)(4) Cancer Registries	Peter Yu, MD Stephanie Hill Jeremy Pine Nigar Salahuddin Chandrika Rao	Hartford Healthcare Cancer Institute NAACCR CA Cancer Registry NC Central Cancer Registry NC Central Cancer Registry
10/5/2022	(f)(6) Transmit antimicrobial	Hsiu Wu Christina Brandenburg	CDC MN Department of Health
10/12/2022	(f)(7) Transmit healthcare surveys	Carol DeFrances	CDC/NCHS



Panel Participants

Date	Topic	Presenter	Organization
10/19/2022	HL7 Public Health WG	Craig Newman Stephen Murphy	Altarum
10/19/2022	Network for Public Health Law	Stephen Murphy	Network for Public Health Law
10/26/2022	Vendor/Industry Panel	Jennifer Layden Tarun Khatri Kristina Crane	CDC, PHDSMI Conduent Government Solutions STC



Questions for SMEs

- A clear view of current state
 - What do you see as the current gaps as it relates to functionality and implementation of this (f) criteria?
 - What recommendations do you suggest advancing the criteria, testing guidance, and/or standards and implementation specifications to address gaps you have identified?
- A good understanding on what needs to be done to make interfaces work and have the ability to use the data being exchanged
 - In your opinion, what specific functions (e.g., sending of data, ingestion of data, analysis of data) that are supported by public health data systems, could benefit from tightening existing standards and implementation specifications, further standardization and potential certification?
 - What recommended data flows, aligned with existing (f) criteria, should be prioritized for standardized receipt of data?



Recommendations Summary

These recommendations developed with the ultimate goals of improving data quality while reducing existing burdens on providers and public health.

We ARE recommending:

- Inclusion of expanded and standardized testing criteria for certification of technologies
- Reduce burden on providers and public health systems through improved standardization and interoperability
- Establish certification criteria for public health technologies to create a common floor to support the exchange of data inclusive of all providers and public health inclusive of the methods by which data are primarily electronically exchanged by Public Health Authorities.

We ARE NOT recommending

- Certification of functions and behavioral attributes of public health data systems outside of interoperability functions
- Certifying the programs of Public Health Authorities

These recommendations were made under the assumption that new resources will be provided to STLT Public Health Authorities to achieve and maintain certification of the relevant technologies. This will require significant investment and support for the certification of public health technologies.

- [Public Health Information and Technology Infrastructure Modernization Funding Report HIMSS report](#)



Recommendations Summary (Continued)

- The Task Force recommends that ONC establish certification criteria for technologies used by public health, **focused on the certification of interoperability functions** such as the exchange, access and use (inclusive of response to/acknowledgement) of (as appropriate) both correctly and not-correctly formatted/complete messages that are efficient (do not require “special effort”) and effective (provides a common floor that addresses the relevant needs of the public health mission).
- We do not recommend certifying other functions and behavioral attributes of public health data systems outside of interoperability functions, nor do we recommend certifying the programs of public health authorities.



Recommendations Summary (Continued)

- We recognize that the public health responsibilities rest with STLT Public Health Authorities, as created and directed by STLT governments and federal law. Accordingly, the intent of certification criteria for public health technologies is not to limit or circumscribe public health or STLT authority to request and receive in the manner it specifies to fulfill the authority's missions or address emergent needs. Rather, the **goal of certification criteria for public health technologies is to create a common floor to support the exchange of data** inclusive of all providers and public health inclusive of the methods by which data are primarily electronically exchanged by public health authorities.
 - A properly constructed common floor, supported by robust certification criteria for public health technologies and compliance with submitted message formatting and completeness requirements, will assist the health care system and public health authorities to address the missions of public health at lower overall burden and reduced special effort and will support common local jurisdictional variation through well defined profiles.
 - The Task Force recognizes the need for standards or technologies adopted through Standards Version Advancement Process (SVAP) to support backwards compatibility to ensure interoperability.



Recommendations Summary (Continued)

- General Recommendations (17 Recommendations)
- New Standards, Implementation Guidance, and Certification Criteria (10 Recommendations, 1 Suggestion)
- (f)(1) – Transmission to Immunization Registries (6 Recommendations)
- (f)(2) – Transmission to Public Health Agencies – Syndromic Surveillance (2 Recommendations)
- (f)(3) – Transmission to Public Health Agencies – Reportable Laboratory Tests and Value/Results (8 Recommendations)
- (f)(4) – Transmission to Cancer Registries (1 Recommendation)
- (f)(5) – Transmission to Public Health Agencies – Electronic Case Reporting (8 Recommendations)
- (f)(6) – Transmission to Public Health Agencies – Antimicrobial Use and Resistance Reporting (1 Recommendation)
- (f)(7) – Transmission to Public Health Agencies – Health Care Surveys (0 Recommendations)



General Recommendations

Number	Recommendation
Public Health Data Systems-TF-2022_Recommendation 01	We recommend that ONC establish certification criteria for public health technologies used by Public Health Authorities in support of their responsibilities in exchanging data for public health purposes including those defined in the existing (f) criteria.
Public Health Data Systems-TF-2022_Recommendation 02	We recommend that ONC work with CDC and other Federal agencies to ensure that the certification criteria consider the timeline, disruption, effort and funding needs associated with technology modernization to achieve and maintain certification.
Public Health Data Systems-TF-2022_Recommendation 03	We recommend that ONC work with CDC, public health authorities and their partner organizations, technology developers, provider organizations, and others to create a set of metrics and outcome measures associated with the ONC Certification Program.



General Recommendations

Number	Recommendation
Public Health Data Systems-TF-2022_Recommendation 04	We recommend that any certification criteria of public health technologies be modular, align with the functionalities specified in the (f) criteria for other certified technology, and evolve in coordination with the overall certification program.
Public Health Data Systems-TF-2022_Recommendation 05	We recommend that ONC work with public health authorities and their partner organizations, standards development organizations, technology developers, and healthcare providers to ensure that data used in (f) criteria standards and implementation guides reference standardized code and value sets.
Public Health Data Systems-TF-2022_Recommendation 06	We recommend that in order to improve patient matching capabilities, demographic, contact and address information must be aligned across the different standards development organizations and inclusive of common standards such as Project US@.



General Recommendations

Number	Recommendation
Public Health Data Systems-TF-2022_Recommendation 07	We further recommend that ONC work across Federal agencies and standards development organizations to specify value sets (and data element phrasing) for all data elements included in USCDI and ensure alignment across the different standards.
Public Health Data Systems-TF-2022_Recommendation 08	We recommend that ONC include in the Certification Program the demonstrated ability of technologies to include and regularly update relevant standardized value sets without special effort.
Public Health Data Systems-TF-2022_Recommendation 09	We recommend that the ONC coordinate with other Federal Agencies to include incentives for all relevant actors to adopt certified technology, for example, creating the provision of both LOINC coded test names and SNOMED coded result data.



General Recommendations

Number	Recommendation
Public Health Data Systems-TF-2022_Recommendation 10	We recommend that ONC, in conjunction with relevant partners including public health authorities and their partner organizations, create operating rules for timely updating of such value sets supportive of public health reporting.
Public Health Data Systems-TF-2022_Recommendation 11	We recommend that ONC work with Federal partners to create incentives that encourage provider organizations and public health authorities to adhere to validated operating rules for timely updating of value sets.
Public Health Data Systems-TF-2022_Recommendation 12	We recommend that ONC work with public health authorities and partner organizations, CDC, other Federal Agencies, providers, and standards development organizations including, but not limited to HL7, to update and align the relevant HL7 v2, C-CDA, FHIR based implementation, and other guidance to reflect updates to the latest SVAP version of USCDI relevant to public health, inclusive of SDOH and SOGI data included in the USCDI.

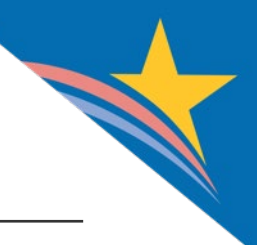


General Recommendations

Number	Recommendation
Public Health Data Systems-TF-2022_Recommendation 13	We recommend that ONC work with OMB, CDC, and public health authorities and partner organizations, technology developers, providers, and standards development organizations, to develop a race/ethnicity value set mapped to a vocabulary that is more granular than the current OMB set historically used by public health, and satisfies jurisdictional requirements, without creating an unnecessary burden on providers, public health, and patients, and ensuing high-quality, accurate data are recorded.
Public Health Data Systems-TF-2022_Recommendation 14	We recommend that certification programs utilize a core set of minimum data elements, as well as a pre-identified common subset of optional data elements, to be defined and agreed to by STLT public health authorities and their public health partners and CDC, to ensure the inclusion of minimum necessary data needed for public health reporting and response.

General Recommendations

Number	Recommendation
Public Health Data Systems-TF-2022_Recommendation 15	We recommend that ONC work with public health authorities and their partner organizations, health care providers, technology developers, and other key partners to develop certification criteria and testing methodologies that close the gap between technologies as certified and real-world testing situations that include both the ideal (“Happy Path”) and the imperfect.
Public Health Data Systems-TF-2022_Recommendation 16	We additionally recommend that ONC establish real world, post-implementation testing to test for gaps between systems as certified and as implemented, especially in the use of local coding schemas mapped to code sets supporting interoperability and to identify opportunities to close real-world data gaps.
Public Health Data Systems-TF-2022_Recommendation 17	We recommend that ONC, in collaboration with public health authorities and their partner organizations, review existing standards and implementation guidance to address harmonization and use across separate data flows, where data eventually need to be integrated and used together by public health authorities.





Recommendations on New Standards, Implementation Guidance, and Certification Criteria

Number	Recommendation
Public Health Data Systems-TF-2022_Recommendation 18	We recommend that ONC convene public health authorities and their partner organizations, additional disaster preparedness and response experts, technology developers, health care providers, and others to develop a comprehensive approach with standards and implementation guidance that defines relevant data sets and elements for situational awareness.
Public Health Data Systems-TF-2022_Recommendation 19	We recommend that ONC coordinate with public health authorities and their partner organizations, technology developers, and standards development organizations to advance standards and implementation guidance for the exchange of timely, accurate, and high-quality data used by public health to produce vital statistics, such as identifiable, line-level birth and death data.
Public Health Data Systems-TF-2022_Recommendation 20	We recommend that newborn blood spot screening is another opportunity for the expansion of standards and implementation guidance to be recognized in Federal Regulations and eventually supported through certification.



Recommendations on New Standards, Implementation Guidance, and Certification Criteria

Number	Recommendation
Public Health Data Systems-TF-2022_Recommendation 21	We recommend similar development of standards, implementation guidance and eventual criteria should be developed for other newborn screening services, such as audiology.
Public Health Data Systems-TF-2022_Recommendation 22	We recommend that ONC work with public health authorities and their partner organizations, the Recognized Coordinating Entity (RCE), Qualified Health Information Networks (QHINs), QHIN participants and sub-participants, including provider organizations and their technology developers, to develop, publish and test an implementation guide for secure and privacy sensitive Trusted Exchange Framework (TEF) queries to support public health case investigation beyond the data already submitted through already defined reporting mechanisms.



Recommendations on New Standards, Implementation Guidance, and Certification Criteria

Number	Recommendation
Public Health Data Systems-TF-2022_Recommendation 23	We recommend that ONC, subsequent to testing the implementation guide for public health TEF query, establish certification criteria for public health TEF query, inclusive of the major actors who could participate in such queries (public health technology, QHINs or local HIEs, and EHRs).
Public Health Data Systems-TF-2022_Recommendation 24	We recommend that ONC work with public health authorities and their partner organizations, EHR developers, standards development organizations and other relevant stakeholders to coordinate the development and testing of standards to enable public health to push notifications and further enable decision support in workflow in EHRs
Public Health Data Systems-TF-2022_Recommendation 25	We recommend that ONC work with public health authorities and their partner organizations, SDOs and other key stakeholders to develop and test standards and implementation criteria that allow for transmission of data between public health authorities.

Recommendations on New Standards, Implementation Guidance, and Certification Criteria



Number	Recommendation
Public Health Data Systems-TF-2022_Recommendation 26	We recommend that ONC work with other Federal Agencies to study and align public health interoperability for provider settings outside of current acute and ambulatory scopes that do not require or have incentive programs encouraging use of certified HIT.
Public Health Data Systems-TF-2022_Recommendation 27	We recommend that ONC work with public health authorities and their partner organizations to explore how Trusted Exchange Framework and Common Agreement (TEFCA)'s consent practices might be leveraged to enable sharing across jurisdictions and with Federal partners within established privacy/consent policies and directives.

Recommendations on New Standards, Implementation Guidance, and Certification Criteria

The Task Force noted that policy variance among public health authorities may create issues for provider organizations and technology developers that operate across jurisdictions. Without limiting the ability for public health authorities to develop and enforce local policy, we note that where equivalent alternatives approaches achieve the same policy outcome, it is helpful to establish policy uniformity. At the same time, many relevant policies are enshrined in state or other jurisdictional law-making alignment non-trivial. While a significant set of the task force agreed on the following suggestions, we did not receive consensus on a final recommendation.

Number	Recommendation
Public Health Data Systems-TF-2022_Suggestion 01	We suggest that ONC coordinate with public health authorities and their partners as well as CDC, providers, and technology developers to identify policy barriers that slow or impede data exchange in service of the public health mission. Where barriers are identified, we suggest that ONC coordinate the definition and promulgation of standard best practice policies that maximally enable interoperability to serve the public health mission.



(f)(1) – Transmission to Immunization Registries

Number	Recommendation
Public Health Data Systems-TF-2022_Recommendation 28	We recommend that ONC coordinate with public health authorities and their partner organizations, and technology developers to define certification criteria for immunization reporting and query/retrieve to the same standards.
Public Health Data Systems-TF-2022_Recommendation 29	We recommend that ONC coordinate with public health authorities and their partner agencies, technology developers, and standards development organizations to update the immunization implementation specifications and, if necessary, underlying standards, to better support predictable variation in inventory and consent requirements.
Public Health Data Systems-TF-2022_Recommendation 30	We recommend that ONC update the (f)(1) criteria to recognize the HIMSS-AIRA-IIP test method as the standard test method used for certification and deprecate the current primary test method



(f)(1) – Transmission to Immunization Registries

Number	Recommendation
Public Health Data Systems-TF-2022_Recommendation 31	We recommend that ONC, in collaboration with public health authorities and their partner organizations, providers and technology developers review existing standards and implementation guidance for immunization query response and USCDI to ensure that immunization data can be efficiently and effectively incorporated into the patient record
Public Health Data Systems-TF-2022_Recommendation 32	We recommend that ONC coordinate with CDC and other Federal departments and agencies to establish consistent requirements (including appropriate incentives) for timely and accurate immunization registry reporting, while reducing reporting burden and complexities for providers.
Public Health Data Systems-TF-2022_Recommendation 33	We recommend that ONC work with CDC to certify IZ Gateway via modular certification for Immunization reporting and query/retrieve.



(f)(2) – Transmission to Public Health Agencies – Syndromic Surveillance

Number	Recommendation
Public Health Data Systems-TF-2022_Recommendation 34	We recommend that ONC work with CMS, CDC, public health authorities and their partner organizations, and technology developers to expand the set of Health IT systems to which certification is available and address appropriate incentives to adopt certified technology.
Public Health Data Systems-TF-2022_Recommendation 35	We recommend that ONC phase out and replace the reference to the version of the Syndromic Surveillance standard included in the Cures Act Final Rule and coordinate publication and maintenance of the most current version during the next relevant regulatory update



(f)(3) – Transmission to Public Health Agencies – Reportable Laboratory Tests and Value/Results

Number	Recommendation
Public Health Data Systems-TF-2022_Recommendation 36	We recommend that ONC follow the relevant guidance provided by the Interoperability Standards Workgroup and approved by the full HITAC regarding laboratory orders and results. (Details in full report)
Public Health Data Systems-TF-2022_Recommendation 37	We recommend that ONC adopt certification criteria (supporting modular certification) of Public Health Technology to receive electronic laboratory results (ELR) with baseline and target syntax and semantic certification criteria as defined in the full report.
Public Health Data Systems-TF-2022_Recommendation 38	We recommend that ONC adopt certification criteria (supporting modular certification) of technologies used by Laboratories (including Public Health Laboratories, and CLIA and CLIA-Waived laboratories) to send electronic laboratory results (ELR) with standard and advanced syntax and semantic certification criteria providing a path from current state (“Baseline”) to the target state as defined in the full report.



(f)(3) – Transmission to Public Health Agencies – Reportable Laboratory Tests and Value/Results

Number	Recommendation
Public Health Data Systems-TF-2022_Recommendation 39	We recommend that ONC update the Certification Program criteria for ELR (supporting modular certification) for EHR-related certified technology to send electronic laboratory results (ELR) with baseline and target syntax and semantic certification criteria as defined in the full report.
Public Health Data Systems-TF-2022_Recommendation 40	We recommend that ONC adopt certification criteria for certified EHR technology to send electronic laboratory orders and receive electronic laboratory results with standard syntax and semantic certification criteria as defined in the full report.
Public Health Data Systems-TF-2022_Recommendation 41	We recommend that certification criteria should be sufficiently flexible to certify such electronic results capturing systems.



(f)(3) – Transmission to Public Health Agencies – Reportable Laboratory Tests and Value/Results

Number	Recommendation
Public Health Data Systems-TF-2022_Recommendation 42	We recommend that ONC add Laboratory Information Management Systems (LIMS) and their supporting intermediaries to the list of certified health IT for which certification is available.
Public Health Data Systems-TF-2022_Recommendation 43	We recommend that ONC support and coordinate with public health authorities and their partner organizations, CDC, and standards development organizations to continue to delineate laboratory-based reporting from electronic case reporting.



(f)(4) – Transmission to Cancer Registries

Number	Recommendation
Public Health Data Systems-TF-2022_Recommendation 44	We recommend that ONC collaborate with public health authorities receiving cancer data, public health professional organizations, CDC, NACCR, provider organizations, academic health centers, and research entities, regarding future, updated standards for the exchange of cancer-related information.



(f)(5) – Transmission to Public Health Agencies – Electronic Case Reporting

Number	Recommendation
Public Health Data Systems-TF-2022_Recommendation 45	We recommend that ONC work with public health authorities and their partner organizations, as well as SDOs and technology developers to ensure that certification criteria and associated test methods are robust enough to reduce and eventually eliminate paper-based reporting.
Public Health Data Systems-TF-2022_Recommendation 46	We recommend that ONC modify the existing certification criteria for case reporting to require certification to eCR and establish associated test methods.
Public Health Data Systems-TF-2022_Recommendation 47	We recommend a base set of capabilities for the transmission of an eICR following (at minimum) HL7 CDA® R2 Implementation Guide

(f)(5) – Transmission to Public Health Agencies – Electronic Case Reporting

Number	Recommendation
Public Health Data Systems-TF-2022_Recommendation 48	We recommend that ONC adopt a certification program for EHR vendors to receive reportability responses from reporting of STLT reportable conditions with standard and advanced syntax and semantic certification criteria as defined in the full report.
Public Health Data Systems-TF-2022_Recommendation 49	We recommend that ONC adopt certification criteria for Public Health Technology to receive electronic case reports and send reportability responses for reporting of reportable conditions with syntax and semantic certification criteria as defined in the full report.
Public Health Data Systems-TF-2022_Recommendation 50	We recommend that ONC work with CDC, CMS, state Medicaid agencies, RCE, and public health authorities and their partner organizations to establish a national organization directory including OIDs, national provider identifiers (following needed refinement to reduce overlap and redundancies), and other critical identifiers for relevant organizations/facilities enabling consistent use and lookup.





(f)(5) – Transmission to Public Health Agencies – Electronic Case Reporting

Number	Recommendation
Public Health Data Systems-TF-2022_Recommendation 51	We recommend that ONC adopt a certification program for standard adoption of distribution of trigger codes to EHRs following the HL7 FHIR Implementation Guide: Electronic Case Reporting (eCR) v1.0.0: STU 1 – US Realm or then most current implementation guidance.
Public Health Data Systems-TF-2022_Recommendation 52	We recommend that ONC develop a certification program of Public Health Technology relevant to reporting trigger code identification, maintenance and distribution accommodating both infectious and non-infectious (chronic) codes associated with STLT reportable conditions, events, or observations.

(f)(6) – Transmission to Public Health Agencies – Antimicrobial Use and Resistance Reporting

Number	Recommendation
Public Health Data Systems-TF-2022_Recommendation 53	We recommend that ONC phase out and replace the reference to the version of the Healthcare Associated Infection Reports implementation guide included in the Cures Act Final Rule and consider adopting a reference to the then most current version during the next relevant regulatory update.

(f)(7) – Transmission to Public Health Agencies – Health Care Surveys

- No recommendations not covered elsewhere





Discussion

