Health Information Technology Advisory Committee

Interoperability Standards Workgroup 2023 Virtual Meeting

Meeting Notes | March 15, 2023, 10:30 AM – 12 PM ET

Executive Summary

The focus of the Interoperability Standards Workgroup (IS WG) was to review workgroup charges, discuss Draft United States Core Data for Interoperability Version 4 (USCDI v4) data elements with subject matter experts, and review USCDI level 2 data elements. The IS WG discussed these topics and provided feedback. There was robust discussion via the chat feature in Zoom Webinar.

Agenda

10:30 AM	Call to Order/Roll Call
10:35 AM	IS WG Charge
10:40 AM	Facility Information Data Class
11:10 AM	Comments and Recommendations – Draft USCDI v4 and Level 2 Data Elements
11:50 AM	IS WG Workplan and Timeline
11:55 AM	Public Comment
12:00 PM	Adjourn

Call to Order

Mike Berry, Designated Federal Officer, Office of the National Coordinator for Health IT (ONC), called the meeting to order at 10:31 AM.

Roll Call

Members in Attendance

Sarah DeSilvey, Gravity Project, Larner College of Medicine at the University of Vermont, Co-Chair
Naresh Sundar Rajan, CyncHealth, Co-Chair
Pooja Babbrah, Point-of-Care Partners
Ricky Bloomfield, Apple
Hans Buitendijk, Oracle Health
Christina Caraballo, HIMSS
Grace Cordovano, Enlightening Results
Raj Dash, College of American Pathologists
Steven Eichner, Texas Department of State Health Services
Nedra Garrett, Centers for Disease Control and Prevention (CDC)
Rajesh Godavarthi, MCG Health, part of the Hearst Health Network

Bryant Thomas Karras, Washington State Department of Health
Steven Lane, Health Gorilla
Meg Marshall, Department of Veterans Health Affairs
Anna McCollister, Individual
Clem McDonald, National Library of Medicine
Kikelomo Adedayo Oshunkentan, Pegasystems
Michelle Schreiber, Centers for Medicare
Shelly Spiro, Pharmacy HIT Collaborative

Members Not in Attendance
Shila Blend, North Dakota Health Information Network
Hung Luu, Children's Health
Deven McGraw, Invitae Corporation
Aaron Miri, Baptist Health
Aaron Neinstein, UCSF Health
Mark Savage, Savage & Savage LLC
Ram Sriram, National Institute of Standards and Technology

ONC Staff
Mike Berry, Designated Federal Officer, ONC
Al Taylor, USCDI Lead, ONC

Key Points of Discussion

Opening Remarks
IS WG co-chairs, Sarah DeSilvey and Naresh Rajan, welcomed attendees. Sarah reviewed the meeting agenda detailed in the March 15, 2023, meeting presentation slides.

IS WG Charge
Sarah DeSilvey reviewed the IS WG Charge. The charge includes:
- Overarching charge: Review and provide recommendations on the Draft USCDI v4.
- Specific charge:
  - o Due to the HITAC by April 12, 2023:
    1. Evaluate Draft USCDI v4 and provide HITAC with recommendations for:
       a. New data classes and elements from Draft USCDI v4.
       b. Level 2 data classes and elements not included in Draft USCDI v4.

Sarah presented a tentative schedule review of Draft USCDI v4 new data classes and elements.

Discussion:
No comments were received from IS WG members.

Facility Information Data Class

Sarah DeSilvey introduced speakers Michelle Schreiber, CMS, and Abby Viall, CDC, to present information related to the Facility Information Data Class.

Michelle and Abby presented CDC and CMS proposal related to Facility Information, detailed in presentation slides. CMS and CDC recommend inclusion of the following Facility Information data elements in USCDI: facility identifiers, organization identifiers, facility name, facility address, and facility type. Michelle and Abby explained rationale and use of these data elements. CMS and CDC recommend that organization identifier is elevated as a Level 2 data element, facility name, facility address, and facility type are included in USCDI v4, and facility type is differentiated from encounter location.

Discussion:

- Steven Eichner inquired about how to address facility information in the context of public health data exchange. Should USCDI be focused on personal information while a second area is focused on facility and professional information?
- Steven Eichner expressed support for a consolidated approach for data elements that EHRs support.
- Steven Eichner discussed the need to layer USCDI and USCDI+ to support business cases and transactions (for example- supporting public health reporting and data exchange).
    - o Michelle and Abby explained that Facility Information is applicable to multiple use cases, thus warranting inclusion in USCDI rather than USCDI+. Abby agreed with Steven Eichner's comment that USCDI and USCDI+ need further differentiation.
- Hans Buitendijk inquired whether there is a distinction between a facility and an organization that owns or utilizes a facility. Abby confirmed this distinction is present.
- Hans explained the value of Facility Information and its relation to multiple use cases. Having individual data classes, like Facility Information, without understanding the context of relevant data classes will lead to confusion in implementation. Hans suggested that USCDI define use cases for data association.
- Hans discussed that facility type has varied definitions and uses across organizations. What is the vocabulary we aim to align on to allow for national level analysis with meaning? Hans suggested adding specificity or acknowledging the need for mapping facility type definitions.
- Michelle and Abby noted that Facility Identifier's scope is cross organization and cross area use. Facility identifier and Facility type are of priority.
- Hans suggested a recommendation to enhance concepts to be included in the USCDI v4 submission.
- Hans noted the difficulty in assuming whether a portion or complete USCDI v4 submissions are intended for inclusion in the IS WG Final Recommendation Report.
- Shelly Spiro suggested that USCDI+ harmonize with Facility Information recommendations.
- Shelly suggested the inclusion of room and bed data elements.
    - o Michelle noted that room/bed information are applicable to address and encounter location. There should be a differentiation between individual encounter and facility administration data.
    - o Shelly noted that patient identification information is applicable in encounter and addresses as they are both important aspects.

- Bryant Karras expressed support for these data elements but noted a risk of granularity. Increased granularity can limit application in other use cases, such as public health.
- Nedra Garrett expressed support for this data element and noted its applications to address health equity.

Comments and Recommendations – Draft USCDI v4 and Level 2 Data Elements

Al Taylor presented the IS WG disposition working google document for IS WG member review.

The following draft USCDI v4 data elements were discussed: Medication Adherence, Medication Instruction, Alcohol Use, Substance Abuse, and Physical Activity, Treatment Intervention Preference and Care Preference, Facility Information and its data elements: Facility Name and Facility Type, and Average Blood Pressure, and SDOH Assessment. IS WG members agreed to proceed with recommending these data elements in USCDI v4.

The following Level 2 USCDI data elements were discussed: Care Plan, Advance Directive, Gender Identity, Sex for Clinical Use, Recorded Sex or Gender, Name to Use, Pronouns, Test Interpretation (Abnormal Flag), Lab Test Performed Data/Time, Lab Test Report Data/Time, Test Kit Universal Device Identifier (UDI), and Imaging Reference.

IS WG members agreed with the proposed recommendations for the following: Care Plan, SDOH Assessment, Gender Identity, Sex for Clinical Use, Recorded Sex or Gender, Name to Use, Pronouns.

IS WG members agreed to revisit the following data elements for further discussion: Advance Directive, Test Interpretation (Abnormal Flag), Lab Test Performed Data/Time, Lab Test Report Data/Time, Test Kit Universal Device Identifier (UDI), and Imaging Reference.

Discussion:

- IS WG members discussed the following draft USCDI v4 data elements: Medication Adherence and Medication Instruction.
  - Pooja Babbrah reviewed IS subgroup recommendations, detailed in the working google document.
  - Shelly Spiro noted that medication instructions and dosage are different data elements.
  - IS WG members agreed to proceed with recommending Medication Adherence and Medication Instruction inclusion in USCDI v4 utilizing IS subgroup recommendations.
- IS WG members discussed the following draft USCDI v4 data elements: Alcohol Use, Substance Abuse, and Physical Activity.
  - Hans Buitendijk suggested clarifying scope and utilization of submission content for Substance Abuse.
  - IS WG members agreed to proceed with recommending Alcohol Use, Substance Abuse, and Physical Activity inclusion in USCDI v4.
- IS WG members discussed the following draft USCDI v4 data elements: Treatment Intervention Preference and Care Preference.
  - Sarah DeSilvey explained the current recommendation for redefining and naming the Goals data class to "Goals and Preferences."
  - Shelly agreed with renaming the data class and moving forward with recommendations.
  - Hans suggested a focus on the clarity of goals in the recommendations.

- o Hans stated the need to explain how Care Plan and Advance Directives are related to each other.
- o IS WG members agreed to proceed with recommending Alcohol Use, Substance Abuse, and Physical Activity inclusion in USCDI v4.
- IS WG members discussed the following draft USCDI v4 data class: Facility Information and its data elements: Facility Name and Facility Type.
  - o Steven Eichner suggested alignment between USCDI and USCDI+ for all USCDI v4 data elements.
  - o IS WG members agreed to proceed with recommending Facility Information in USCDI v4 with the incorporation of guest presenter discussion and in alignment with CDC and CMS's submission.
  - o IS WG members who participated in subgroups or subject matter expertise presentations are requested to insert and revise USCDI data element recommendations in the working google document as soon as possible.
    - ▪ Regarding USCDI data elements in which there was not a designated subgroup or IS WG expertise, IS WG members are requested to volunteer to lead comment revisions in the working google document.
    - ▪ Ownership will be assigned to specific IS WG members and indicated in the working google document.
- IS WG members discussed the following USCDI level 2 data element: Care Plan.
  - o Hans reviewed the IS subgroup proposed recommendation for this data element, detailed in the working google document.
    - ▪ The IS subgroup recommended that ONC expand the Care Plan data class with a care plan data type that enables further categorization of care plans in USCDI v4 and prepares for added revisions in USCDI v5. The IS subgroup also recommended renaming "Patient Summary and Plan" to "Patient Care Plan" and replacing the "Assessment and Plan of Treatment" data element with "Care Plan Summary."
  - o Shelly suggested that care plan components and their placement in USCDI data classes are discussed and clarified in preparation for USCDI v5.
  - o Clem McDonald noted that an increased Care Plan structure will increase provider implementation burden.
    - ▪ Bryant Karras suggested the creation of a companion to data class inventory to identify which data elements/classes are related to specific use cases.
    - ▪ Steven Lane discussed the value of this data element and its recurring discussion over the years. Steven clarified that USCDI does not enforce data collection. USCDI provides a vehicle for sharing data when collected.
  - o IS WG members agreed to proceed with recommending Care Plan to USCDI v4 and renaming as suggested by the IS subgroup.
  - o The IS subgroup was requested to draft a final recommendation for the IS WG.
- IS WG members discussed the following draft USCDI v4 data element: Average Blood Pressure.
  - o Hans clarified that the recommendation specifies blood pressure measures and time of blood period collection. Hans suggested adding this clarity to the USCDI v4 submission.
  - o Clem inquired clarity of the mean values collected. Sarah requested that Clem note this in the working google document.
  - o IS WG members agreed to proceed with recommending Average Blood Pressure for inclusion in USCDI v4.

- IS WG members will discuss the following USCDI level 2 data element next week: Advance Directive.
- IS WG members discussed the proposed reclassification from following Draft USCDI v4 data element, SDOH Assessment, from the Assessment and Plan of Treatment data class to Health Status Assessment.
  - o IS WG members agreed to proceed with the recommendation to reclassify this data element in USCDI v4.
  - o Al suggested that when recommending a data element in level 2 with an overlap in current USCDI v4 data elements, IS WG members include changes to USCDI definitions and standards.
- IS WG members discussed the following USCDI level 2 data elements: Gender Identity, Sex for Clinical Use, Recorded Sex or Gender, Name to Use, and Pronouns.
  - o Sarah noted that this recommendation builds upon content submitted last year. Last year's recommendation can be circulated to IS WG members for additional context.
  - o Hans expressed support for this recommendation and noted the need for standardized terms regarding these data elements.
  - o IS WG members agreed to proceed with recommending Gender Identity, Sex for Clinical Use, Recorded Sex or Gender, Name to Use, and Pronouns for inclusion in USCDI v4.
- IS WG members discussed the following USCDI level 2 data elements: Test Interpretation (Abnormal Flag), Lab Test Performed Data/Time, Lab Test Report Data/Time, Test Kit Universal Device Identifier (UDI).
  - o IS WG members reviewed the discussion documented in the working google document.
  - o Clem disagreed with the statement that abnormal flags have less utility. Steven Lane agreed with Clem.
  - o Hans noted confusion that multiple data elements reference similar HL7 vocabulary.
  - o Raj was asked that subtilities in these data elements be included in current USCDI v4 recommendations.
  - o IS WG members agreed that there is a commonality between these level 2 data elements and the current draft USCDI v4 data elements. IS WG members hope to review and resolve commonalities with draft USCDI v4 data elements.
- IS WG members discussed the following USCDI level 2 data element: Imaging Reference.
  - o Steven Lane added this data element to share path information necessary to find the image itself in the source system. Steven noted IS subgroup discussed and proposed guest speakers present at the next IS WG meeting.
    - ▪ Clem expressed support for Steven Lane's comments and inquired about the presenters for this data element.
    - ▪ Steven Lane stated that speakers include representatives from American College of Radiology, Care Equality, and Mount Sinai. Representatives do not include individuals from DICOM. Steven Lane asked Clem to recommend DICOM representatives for outreach.
- Sarah requested that IS WG members ensure that level 2 data element comments are incorporated in similar USCDI v4 data elements.

IS WG Workplan and Timeline

Sarah DeSilvey reviewed the upcoming IS WG meeting and Draft USCDI v4 review schedule. IS WG members were requested to volunteer to lead final recommendations of specific USCDI data elements.

PUBLIC COMMENT

Mike Berry opened the meeting for public comments:

QUESTIONS AND COMMENTS RECEIVED VERBALLY

No public comments were received verbally.

QUESTIONS AND COMMENTS RECEIVED VIA ZOOM WEBINAR CHAT

Mike Berry (ONC): Welcome to the Interoperability Standards Workgroup. We will be starting shortly.

Mike Berry (ONC): Please remember to tag "Everyone" in Zoom chat so that we can all see your message.

Pooja Babbrah: Good Morning. This is Pooja. I'm here

Hans Buitendijk: When indicating "facilities track back to organizations", that still would mean the facility reflects a building/address, not the organization operating in that facility, correct?

Hans Buitendijk: Which USCDI data classes need to be associated with a facility directly, or implied indirectly through another USCDI data class?

Christina Caraballo: @Steven agree

Bryant Thomas Karras: +1 Hans   type needs curation to fit the many different uses. may need ontology or multi pick to make it work

Abigail Viall (CDC): Agree Bryant. And, of course, we need to ensure clear differentiation from the existing encounter location--which serves a different, and complementary, purpose

Hans Buitendijk: If we include room/bed, we need to recognize that not all HIT would have to support that.

Hans Buitendijk: Room/bed are part of encounters, not address.

Abigail Viall (CDC): Oh, Bryant, I'm using that "public health is the who what where" line in the future!

Raj Dash: Agree that room/bed is best placed into the encounter.

Hans Buitendijk: March 8 is when the content was there. March 9 is when it was overwritten.

Hans Buitendijk: With clarifications from the discussion.

Michelle Schreiber: my apology to group but I need to hop off. Thank you for including us in presentation today.

Pooja Babbrah: For the medication level 2 data elements, NCPDP Education and Legislation task group will be reviewing those today and the HL7 Pharmacy workgroup will be reviewing those on Monday.

QUESTIONS AND COMMENTS RECEIVED VIA EMAIL

No comments were received via email.

Resources

IS WG Webpage
IS WG – March 15, 2023, Meeting Webpage
HITAC Calendar Webpage

Adjournment

The meeting was adjourned at 12:01 PM.