233 N. Michigan Ave, 21st Fl. Chicago, IL 60601-5800

Office | (312) 233-1100 Fax | (312) 233-1090 ahima.org



July 2, 2021

Steven Lane, MD, MPH and Leslie Kelly Hall US Core Data for Interoperability Task Force Office of the National Coordinator for Health Information Technology US Department of Health and Human Services 330 C St SW Washington, DC 20201

Dear Dr. Lane and Ms. Kelly Hall:

The American Health Information Management Association (AHIMA) is a global nonprofit association of health information (HI) professionals. AHIMA represents professionals who work with the health data from more than one billion patient visits each year. AHIMA's mission of empowering people to impact health drives our members and credentialed HI professionals to ensure that health information is accurate, complete, and available to patients and providers. Our leaders work at the intersection of healthcare, technology, and business, and are found in data integrity and information privacy job functions worldwide.

As the USCDI Task Force's work continues, we want to offer the following operational insights into what data elements are commonly requested by providers, patients, and payers as part of release of information process. These findings are based on a recently conducted survey of AHIMA members.

#### **Survey Overview:**

From May 11 through June 14, 2021, AHIMA surveyed its members to identify the most commonly requested data elements by patients, payers, and providers. 341 AHIMA members who work in release of information or in the management of medical records responded to the survey. Survey respondents were informed that this data would be used so that AHIMA can provide an operational perspective "related to the types of information that are being requested of health information professionals." In developing the survey fields, AHIMA staff worked to map surveyed data elements to record types that are under consideration for the United States Core Data for Interoperability (USCDI).

Information regarding the survey language and format may be found in **Appendix 1**.

# **Summary of Findings:**

Six data elements were found to be commonly requested across patients, payers, and providers, with "commonly requested" being defined as more than 50% of respondents indicating that a particular data element is either "frequently" or "very frequently" requested by a particular recipient type. The six commonly requested data elements are: laboratory and diagnostic test records; diagnostic imaging orders and reports; discharge summaries and instructions; procedure and operative reports; cardiology and/or neurology diagnostic tests; and emergency department records. At least 60% of survey respondents indicated that all six of the most commonly requested data elements were frequently or very frequently requested across all three recipient types.

Four additional data elements were found to be commonly requested by at least one recipient type. These data elements were ambulatory notes, rehabilitation services records, encounter diagnosis, and immunization records. Ambulatory notes were commonly requested by patients and payers, while rehabilitation services records and encounter diagnoses were commonly requested by payers, and immunization records were commonly requested by patients. Three data elements failed to meet the commonly requested threshold for any recipient type. These are problem date of diagnosis and resolution, care team information including provider name and identifier, and work and back to school releases.

Data summary tables and weighted Likert average tables may be found in **Appendix 2** and **Appendix 3**, respectively.

#### **Recommendations:**

AHIMA believes that as data elements continue to be added to the USCDI to support robust data exchange and interoperability, it is important to ensure that operational realities are accounted for by policymakers and relevant advisory bodies. AHIMA conducted this survey to ensure that the Health Information Technology Advisory Committee (HITAC) and the USCDI Task Force have the most up to date information regarding what records are being requested of health information professionals on a regular basis. AHIMA believes that when evaluating the utility of a particular data element, it is important to account for the varying needs of patients, providers, and payers. AHIMA recognizes that refining the USCDI will continue to be an iterative process and hopes that the HITAC and the Task Force will consider AHIMA to be a resource as it moves forward with future versions and updates.

AHIMA notes that all six of the surveyed data elements that are commonly requested across all three recipient types have either already been included in USCDI v1 or v2 or were recently recommended for inclusion at the April 2021 HITAC meeting. In particular, the survey results support the recommendation to include "Diagnostic studies and exams with results"<sup>1</sup> in v2. AHIMA believes the survey data provides strong support for inclusion of these data classes and indicates alignment between HITAC recommendations and data elements that are highly likely to be requested across recipient types.

Continuing, as stated above, there are four data elements that were commonly requested by one or more recipient types, but not by all recipient types. AHIMA believes that the variation in requests across recipient type is reflective of the varying needs of recipient types and that the varying needs of data requestors should be accounted for as the HITAC and the Task Force move forward with the update process. Additionally, AHIMA notes that among the group of data elements that were commonly requested by one or more recipients, but not by all recipients, there are certain surveyed data elements that do not correspond directly to a specific USCDI data element. These data elements are outpatient notes and rehabilitation services records. AHIMA is aware that there are data elements that are currently being considered that may more directly map to surveyed data elements than the existing elements contained in USCDI v1. While AHIMA does not take a position at this time as to whether the HITAC should include the additional elements under consideration, AHIMA does believe that HI professionals may offer expertise in this area given that specific requests are being reported for outpatient notes and rehabilitation services records.

<sup>&</sup>lt;sup>1</sup> "United States Core Data for Interoperability (USCDI)." Diagnostic Studies and Exams with Results, Interoperability Standards Advisory (ISA), www.healthit.gov/isa/uscdi-data/diagnostic-studies-and-exams-results.

AHIMA notes that several data elements failed to be commonly requested by any recipient type. Although these data elements may be less frequently requested, AHIMA notes that these elements may be of high utility to one or more recipient types. Frequency of requests should be one of several key inputs that is considered by the Task Force as it moves forward with recommendations on future updates.

#### Conclusion

Thank you for your consideration of the survey's data and AHIMA's recommendations. If you or any member of the USCDI Task Force has any questions, please contact Lauren Riplinger, Vice President, Policy & Government Affairs, at <u>lauren.riplinger@ahima.org</u> and (202) 839-1218 or Matt Kerschner, Director of Regulatory Affairs at <u>matthew.kerschner@ahima.org</u> and (312)-233-1122.

Sincerely,

Myleai Miggs Harris

Wylecia Wiggs Harris, PhD, CAE Chief Executive Officer

# Appendix 1: Survey Language

Q1: Participant Name

# Q2: Participant Email

Q3: Please select the frequency at which patients request that the following data elements are shared by your organization (Answer Options – Never/Almost Never, Infrequently, Sometimes, Frequently, Very Frequently)

Q4: Please select the frequency at which providers request that the following data elements are shared by your organization (Answer Options – same as above)

Q5: Please select the frequency at which payers request that the following data elements are shared by your organization (Answer Options – same as above)

Q3-Q5 Survey Data Elements:

- Emergency department records
- Work and back to school releases
- Diagnostic imaging orders and reports
- Laboratory diagnostic test records
- Immunization records
- Cardiology and/or neurology diagnostic tests
- Procedure and operative reports
- Ambulatory notes
- Discharge summaries and instructions
- Rehabilitation services records
- Care team information including provider name and identifier
- Problem date of diagnosis and resolution
- Encounter diagnosis

# Appendix 2: Data Summary Tables

Question: Please select the frequency at which patients request that the following data elements are shared by your organization

	Almost Never/Never	Infrequently	Sometimes	Frequently	Very Frequently	Likert Average 1 = Almost Never/Never 2 = Infrequently 3 = Sometimes 4 = Frequently 5 = Very Frequently
Emergency department records	14.93%	5.07%	10.75%	23.88%	45.37%	3.8
Work and back to school releases	13.06%	13.95%	28.49%	24.33%	20.18%	3.25
Diagnostic imaging orders and reports	3.25%	3.85%	8.88%	26.04%	57.99%	4.32
Laboratory diagnostic test records	1.47%	2.65%	7.08%	29.20%	59.59%	4.43
Immunization records	12.43%	12.13%	23.96%	26.63%	24.85%	3.39
Cardiology and/or neurology diagnostic tests	6.82%	5.04%	19.29%	33.83%	35.01%	3.85
Procedure and operative reports	8.04%	6.55%	14.88%	33.63%	36.90%	3.85
Ambulatory notes	11.34%	11.94%	20.90%	34.33%	21.49%	3.43
Discharge summaries and instructions	5.62%	5.92%	13.61%	34.32%	40.53%	3.98
Rehabilitation services records	16.27%	15.98%	28.99%	24.85%	13.91%	3.04
Care team information including provider name and identifier	23.67%	28.11%	27.51%	13.91%	6.80%	2.52
Problem date of diagnosis and resolution	22.49%	28.11%	27.22%	13.91%	8.28%	2.57
Encounter diagnosis	16.91%	24.33%	30.27%	15.13%	13.35%	2.84

Question: Please select the frequency at which providers request that the following data elements are shared by your organization

	Almost Never/Never	Infrequently	Sometimes	Frequently	Very Frequently	Likert Average 1 = Almost Never/Never 2 = Infrequently 3 = Sometimes 4 = Frequently 5 = Very Frequently
Emergency department records	17.61%	7.46%	14.33%	18.81%	41.79%	3.6
Work and back to school releases	50.90%	24.25%	14.37%	6.29%	4.19%	1.89
Diagnostic imaging orders and reports	6.53%	2.97%	9.79%	29.08%	51.63%	4.16
Laboratory diagnostic test records	4.45%	2.08%	9.50%	30.56%	53.41%	4.26
Immunization records	29.55%	22.99%	23.28%	14.63%	9.55%	2.52
Cardiology and/or neurology diagnostic tests	9.17%	5.62%	14.79%	29.59%	40.83%	3.87
Procedure and operative reports	10.09%	4.75%	13.06%	28.78%	43.32%	3.91
Ambulatory notes	15.82%	15.22%	23.28%	22.69%	22.99%	3.22
Discharge summaries and instructions	9.23%	5.95%	15.48%	25.60%	43.75%	3.89
Rehabilitation services records	19.64%	20.24%	28.27%	18.75%	13.10%	2.85
Care team information including provider name and identifier	38.39%	25.60%	19.94%	8.33%	7.74%	2.21
Problem date of diagnosis and resolution	28.66%	23.58%	21.79%	14.93%	11.04%	2.56
Encounter diagnosis	28.23%	20.12%	21.02%	14.71%	15.92%	2.7

Question: Please select the frequency at which payers request that the following data elements are shared by your organization

	Almost Never/Never	Infrequently	Sometimes	Frequently	Very Frequently	Likert Average 1 = Almost Never/Never 2 = Infrequently 3 = Sometimes 4 = Frequently 5 = Very Frequently
Emergency department records	15.41%	4.83%	17.22%	23.56%	38.97%	3.66
Work and back to school releases	59.04%	17.17%	14.46%	4.82%	4.52%	1.79
Diagnostic imaging orders and reports	7.23%	5.72%	20.18%	26.81%	40.06%	3.87
Laboratory diagnostic test records	6.33%	6.63%	19.58%	26.20%	41.27%	3.89
Immunization records	43.37%	26.51%	16.87%	5.72%	7.53%	2.08
Cardiology and/or neurology diagnostic tests	9.04%	7.53%	20.48%	29.52%	33.43%	3.71
Procedure and operative reports	8.79%	4.24%	13.64%	31.21%	42.12%	3.94
Ambulatory notes	14.20%	11.78%	21.75%	26.59%	25.68%	3.38
Discharge summaries and instructions	8.43%	3.92%	13.86%	30.12%	43.67%	3.97
Rehabilitation services records	13.86%	9.34%	26.20%	22.89%	27.71%	3.41
Care team information including provider name and identifier	25.90%	18.07%	24.10%	16.57%	15.36%	2.77
Problem date of diagnosis and resolution	21.32%	18.62%	22.22%	18.92%	18.92%	2.95
Encounter diagnosis	10.81%	14.11%	21.02%	22.82%	31.23%	3.5

# All Recipient Type – Combined Rate of Very Frequently or Frequently Response

Data Element	Patient	Provider	Payer
Laboratory diagnostic test records	88.79%	83.97%	67.47%
Diagnostic imaging orders and reports	84.03%	80.71%	66.87%
Discharge summaries and instructions	74.85%	69.35%	73.79%
Procedure and operative reports	70.53%	72.1%	73.33%
Cardiology and/or neurology diagnostic tests	68.84%	70.42%	62.95%
Emergency department records	69.25%	60.6%	62.53%
Ambulatory notes	55.82%	45.68%	52.27%
Rehabilitation services records	38.76%	31.85%	50.6%
Encounter diagnosis	28.48%	30.63%	54.05%
Immunization records	51.48%	24.18%	13.25%
Problem date of diagnosis and resolution	22.19%	25.97%	37.84%
Care team information including provider name and identifier	20.71%	16.07%	31.93%
Work and back to school releases	44.51%	10.48%	9.34%

#### **Appendix 3: Weighted Likert Averages**





