Meeting Notes
Health Information Technology Advisory Committee
Health IT for the Care Continuum Task Force
May 3, 2019, 4:30 p.m. – 6:00 p.m. ET
Virtual

The May 3, 2019, meeting of the Health IT for the Care Continuum Task Force (HITCCTF) of the Health IT Advisory Committee (HITAC) was called to order at 4:30 p.m. ET by Cassandra Hadley, Designated Federal Officer, Office of the National Coordinator for Health IT (ONC).

Cassandra Hadley conducted roll call.

Roll Call

MEMBERS IN ATTENDANCE

Carolyn Petersen, Co-chair, Individual
Christoph Lehmann, Co-Chair, Vanderbilt University Medical Center
Chip Hart, Member, PCC
Susan Kressly, Member, Kressly Pediatrics
Aaron Miri, Member, The University of Texas at Austin, Dell Medical School, and UT Health Austin
Steve Waldren, Member, American Academy of Family Physicians

ONC STAFF

Alex Kontur, ONC
Cassandra Hadley, Designated Federal Officer, Office of the National Coordinator for Health IT (ONC)
Stephanie Lee, Health IT for the Care Continuum Task Force Staff Lead
Samantha Meklir, Health IT for the Care Continuum Task Force SME
Elizabeth Myers, ONC
Albert Taylor, Health IT for the Care Continuum Task Force SME

Cassandra Hadley turned the meeting over to Carolyn Petersen, co-chair.

Welcome Remarks

Carolyn Petersen thanked the task force members for their contributions and for attending today's meeting. She then noted the goal of the meeting was for the task force members to focus on the feedback given during the HITAC as well as agreeing on a final transmittal letter, ready for the co-chairs signature. She then turned it over to her co-chair Chris Lehmann.

Chris Lehmann also thanked the task force members and turned it over to ONC.

Recap Discussion – HITAC Feedback and Draft Recommendations/Transmittal Letter

Stephanie Lee displayed the *ONC Pediatric Health IT Recommendations HITCC Task Force Crosswalk* document and began seeking input regarding specific recommendations and, if applicable, initiated a discussion regarding the previously documented feedback contained within last column *HITCC Task Force Draft Recommendations and Implementation Considerations to inform Future (Potential) Non-Regulatory Informational Resource (e.g., Implementation Guide)*
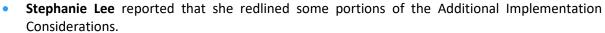
Discussion: Recommendation 2

- **Stephanie Lee** asked Sue Kressly if she wanted to make any change*s* to the Additional Implementation Consideration: "Should be limited to liquid medication."
- **Sue Kressly** noted that there are liquid oral medication and liquid eye medication and the language should exclude eye medications. She also noted that "where appropriate" should be specified within the text as some oral medications are based on age and not weight.
- **Chris Lehmann** noted that excluding liquid eye medication is fine, but the term should be enteral as liquid medications aren't just administered orally.
- **Sue Kressly** and **Chris Lehmann** expressed the Additional Implementation Considerations should be refined to the following: "Minimum standard is limited to liquid, enteral medications that are dosed based on weight."

Discussion: Recommendation 3

- **Stephanie Lee** noted the question from HITAC asking "what is to be the standardized nomenclature? He went on to ask if the task force wants to expand on this or leave it broadly as-is?"
- Additional Implementation Consideration: "Encourage nomenclature development in the future to reference to" was updated to "Encourage more robust nomenclature development towards a standard in the future to reference"
- **Carolyn Petersen** made a note within the Recommendation for Supplemental Requirements section asking if the task force could refer to the U.S. Core Data for Interoperability (USCDI) task force to tie their work together. There was broad agreement that this would be incorporated in the future.
- **Stephanie Lee** directed the task force to the following feedback received from the HITAC "Authorized non-clinician viewers EHR data" requirements should not be provided as free text." The text was updated to "Authorized non-clinician viewers EHR data" requirements should not be provided as free text (allows user to choose from a vendor provided terminology of authorized non-clinician viewers)"

Discussion: Supplemental Children's Format Requirements for Recommendation 4

- **Stephanie Lee** reported that she redlined some portions of the Additional Implementation Considerations.
- **Chris Lehmann** suggested rewriting as "This is a way for a user to identify items that he or she wanted protected."
- **Stephanie Lee** agreed to add this text to the spreadsheet at a later date.

Discussion: Additional Implementation Considerations for Recommendation 5

- **Stephanie Lee** sought feedback on the text "Important to distinguish access vs. legal decision authorities." The task force agreed to update the text to the language recommended by the HITAC: "Distinguish authority to access patient's data vs. medical decision-making authority."

Discussion: 3.1.1 Data Segmentation for Privacy (DS4P) and Consent Management for application programming interface (API) Certification Criteria.

- **Stephanie Lee** referenced a comment where a HITAC member expressed concern that the ability to hide data is a safety concern and asked **Chris Lehmann** if he wanted to revisit this.
- **Sue Kressly** mentioned the implications of an unconscious person.
- **Chris Lehmann** suggested adding a sentence for patient consent when unconscious but asked that Stephanie Lee seek a lawyer from ONC so they can better address updating this section.
- **Steve Waldren** noted that even if DS4P is implemented 100% correctly that it doesn't ensure privacy or confidentiality.
- **Chris Lehmann** noted that he didn't want to imply that this protects data 100%, but that it provides a framework on how people who are dealing with that data should be handling it in order to abide by the patient wishes regarding their privacy.
- **Stephanie Lee** placed a placeholder within the document stating, "privacy resources/literature to endorse." Carolyn Petersen will pull out the important components and share them with the task force via email.

Additional Discussion

- **Chris Lehmann** wanted to note that this is a good start, but it is only a way of improving EHR functionality for children, which will have a major impact but that it is not the end of the journey.
- **Stephanie Lee** agreed to craft some language to this effect for inclusion into the transmittal letter for review.
- **Carolyn Petersen** thanked everyone and offered her services to continue this work in the future.
- **Carolyn Peters** asked ONC when the deadline is for transmittal letters to be submitted.
  - **Stephanie Lee** and **Cassandra Hadley** noted that May 8, 2019, was the deadline for transmittal letters to be submitted.

Cassandra Hadley opened the line for public comment.

Public Comment

There was no public comment.

Comment in the Public Chat

Al Taylor, ONC: HL7 Code System "RoleCode" including Code Concept "RESPRSN" Responsible Party.
http://www.hl7.org/documentcenter/public_temp_FA6DD6F8-1C23-BA17-0C442017E010B297/standards/vocabulary/vocabulary_tables/infrastructure/vocabulary/RoleCode.html

Next Steps and Adjourn

Cassandra Hadley adjourned the meeting at 5:06 p.m. ET.