



The Office of the National Coordinator for
Health Information Technology
Health IT Advisory Committee

Health IT for the Care Continuum Task Force

Carolyn Petersen, co-chair
Chris Lehmann, co-chair

May 17, 2019



Agenda

- Call to Order/Roll Call
- Discussion - Data Segmentation for Privacy (DS4P) and Consent Management for Application Programming Interfaces (APIs)
- Public Comment
- Next Steps and Adjourn

Draft Recommendations/Transmittal Letter

- Group Discussion
 - » Discussion of Action at 5/13 HITAC Meeting

Proposed Add to Transmittal Letter

3.1.1 Data Segmentation for Privacy (DS4P) and Consent Management for APIs Certification Criteria

ONC proposes to remove the current 2015 Edition DS4P-send and receive certification criteria and replace them with three new DS4P criteria (two for C-CDA and one for FHIR). The Task Force supports this proposal and acknowledges that DS4P would help for opioid management and provide greater confidence in sharing OUD information. The TF also recognizes that the “consent management for APIs” proposal would also aid in furthering the exchange of information. The TF notes that, with appropriate protections in place, health IT can help providers electronically use and share data allowing providers to appropriately share health information while both complying with laws/legal requirements and respecting/honoring patient privacy preferences, often referred to as consent requirements.

The TF understands that there are reservations about implementation of DS4P that need to be addressed prior to requiring it. These include safety implications, medicolegal recordkeeping requirements, “leakage” or the concern that segmentation will not meet user expectations (particularly regarding narrative content), as well as the significant scope of the development represented. Governance will be necessary to prioritize use cases for industry consideration, address the issues identified, and facilitate consistent implementation.

As an implementation consideration, the TF recommends that a user should be able to identify items that they want protected. The TF also acknowledges a need for the development of a minimal data set description to represent stakeholder consensus on what data is considered private. The TF notes that further work is needed to develop patient privacy best practices for universal adoption.

Proposed Add to Transmittal Letter

Alternatives/Options for Discussion:

- 1. The TF understands that there are reservations about implementation of DS4P that ideally would be addressed prior to requiring its use in practice settings; this should not preclude the finalization of the proposal by ONC as proposed to remove the current 2015 Edition DS4P criteria and replace these two criteria with three new 2015 Edition “DS4P” certification criteria (two for C-CDA and one for a FHIR-based API) that would support a more granular approach to privacy tagging data consent management for health information exchange supported by either the C-CDA- or FHIR-based exchange standards. Implementation concerns include safety implications, medicolegal recordkeeping requirements, “leakage” or the concern that segmentation will not meet user expectations (particularly regarding narrative content), as well as the significant scope of the development represented. Governance will be necessary to prioritize use cases for industry consideration, address the issues identified, and facilitate consistent implementation.*
- 2. The TF understands that there are reservations about implementation of DS4P and encourages further piloting to inform its use in practice settings. The implementation concerns include safety implications, medicolegal recordkeeping requirements, “leakage” or the concern that segmentation will not meet user expectations (particularly regarding narrative content), as well as the significant scope of the development represented. Governance will be necessary to prioritize use cases for industry consideration, address the issues identified, and facilitate consistent implementation. [similar to above, calls for pilot work]*

Workplan

Meeting Date	Draft Discussion Items
April 19	<ul style="list-style-type: none">• TF Meeting• Update and revise recommendations
April 26	<ul style="list-style-type: none">• TF Meeting• Update and revise recommendations
April 25	<ul style="list-style-type: none">• Present draft recommendations to HITAC
May 3	<ul style="list-style-type: none">• TF Meeting• Update and revise recommendations
May 13	<ul style="list-style-type: none">• Present draft recommendations to HITAC
May 17	<ul style="list-style-type: none">• TF Meeting• Update and revise recommendations
May 22	<ul style="list-style-type: none">• Present draft recommendations to HITAC
May 20 – May 24	<ul style="list-style-type: none">• ONC prepares final transmittal letter from HITAC
<u>June 3, 2019</u>	<ul style="list-style-type: none">• HITAC recommendations are submitted to NC and Regulations.gov

Public Comment

To make a comment please call:

Dial: 1-877-407-7192

*(once connected, press “*1” to speak)*

All public comments will be limited to three minutes.

You may enter a comment in the
“Public Comment” field below this presentation.

Or, email your public comment to onc-hitac@accelsolutionsllc.com.

Written comments will not be read at this time, but they will be delivered to members of the Workgroup and made part of the Public Record.



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Meeting Adjourned



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