



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

## Interoperability Standards Priorities Task Force

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Ken Kawamoto, Co-Chair  
Steven Lane, Co-Chair  
May 28, 2019



# Agenda

- Welcome Back – First meeting since February 19, 2019
- Review ISP Task Force Charge
- Review of Medication & Pharmacy Domain Recommendations
  - » Presented to HITAC March 19, 2019
- Discussion of Potential Additional Medication Sub-Domains
  - » Adverse Drug Event data capture, reporting
  - » FDA needs
  - » Pharma/research needs
- Timeline and Work Plan

# ISP Task Force Charge

- **Overarching Charge:** To make recommendations on priority uses of health information technology and the associated standards and implementation specifications that support such uses.
- **Specific Charge:** The ISP Task Force will:
  1. Make recommendations on the following:
    - Priority uses of health IT (consistent with the Cures Act’s identified priorities);
    - The standards and implementation specifications that best support or may need to be developed for each identified priority; and
    - Subsequent steps for industry and government action.
  2. Publish a report summarizing its findings.

## Medication & Pharmacy Data

# Sub-Domains

- Med dispense & administration data
- Discrete sigs
- PDMP data access and workflow integration
- Price transparency
- Prior authorization
- eRx forwarding
- Adverse Drug Event data
- Other FDA needs
- Pharma/research needs

# Medication & Pharmacy Domain Preview

## Priority 1

- **Priority 1A:** Medication administration/dispensation information is not universally available
- **Priority 1B:** Medication reconciliation at transitions of care is challenging
- **Priority 1C:** US Core FHIR profiles do not require transmittal of free-text sigs
- **Priority 1D:** Access to prescription drug monitoring program (PDMP) data can be cost prohibitive
- **Priority 1E:** It is difficult to know the net price of prescribed medications
- **Priority 1F:** Need standards to integrate Prior Authorization into prescribing workflows

## Priority 2

- **Priority 2A:** National Library of Medicine RxNorm API does not return codes for discontinued drugs
- **Priority 2B:** Free text sigs are prevalent, but difficult to interpret/use when structured information is needed
- **Priority 2C:** There is currently not a way to "forward" an eRx to an alternate pharmacy

# Potential New Sub-Domains

- Adverse Drug Event data
- Other FDA needs
- Pharma/research needs

# Timeline & Workplan

Meeting Date	Draft Agenda Items
<u>May 28</u>	<ul style="list-style-type: none"> <li>• Brief Recap ISP TF recommendations to date</li> <li>• Plan &amp; Discuss Medication &amp; Pharmacy Domains (sub-domains)</li> </ul>
<u>June 11</u>	<ul style="list-style-type: none"> <li>• Price Transparency</li> <li>• <i>Possible NCPDP &amp; Surescripts Presentations</i></li> </ul>
<u>June 25</u>	<ul style="list-style-type: none"> <li>• Adverse Drug Events (ADE)</li> <li>• <i>Possible FDA presentation</i></li> </ul>
<u>July 9</u>	<ul style="list-style-type: none"> <li>• Discuss &amp; Draft Recommendations</li> </ul>
<u>July 23</u>	<ul style="list-style-type: none"> <li>• Discuss &amp; Draft Recommendations</li> </ul>
<u>August 13</u>	<ul style="list-style-type: none"> <li>• Discuss &amp; Draft Recommendations</li> </ul>
<u>August 27</u>	<ul style="list-style-type: none"> <li>• Update and revise recommendations</li> </ul>
<u>September 10</u>	<ul style="list-style-type: none"> <li>• Update and revise recommendations</li> </ul>
<u><b>September 17</b></u>	<ul style="list-style-type: none"> <li>• <b>HITAC Meeting</b></li> <li>• <b><i>Present Draft of Recommendations at Sept 17 In-person Meeting</i></b></li> </ul>
<u><b>October 16</b></u>	<ul style="list-style-type: none"> <li>• <b>HITAC Meeting</b></li> <li>• <b><i>Present Final Recommendations at October 16 Virtual Meeting for Vote</i></b></li> </ul>



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*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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## Questions

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## Meeting Adjourned

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