Meeting Notes
Health Information Technology Advisory Committee (HITAC)
Interoperability Standards Priorities (ISP) Task Force
August 28, 2019, 10:00 a.m. – 11:30 a.m. ET
Virtual

Executive Summary

The HITAC Recommendations section of the draft report was reviewed and discussed among task force members. Changes were made to the draft report in preparation for presentation to the HITAC at the September 17, 2019 meeting. There were no public comments but there were additional comments in the public meeting chat via Adobe.

Agenda

10:00 a.m.	**Call to Order/Roll Call**
10:05 a.m.	**Task Force Schedule**
10:10 a.m.	**Task Force- Draft Report**
11:20 a.m.	**Public Comment**
11:30 a.m.	**Adjourn**

Roll Call

Kensaku Kawamoto, Co-Chair, University of Utah Health
Steven Lane, Co-Chair, Sutter Health
Cynthia A. Fisher, WaterRev, LLC
Anil Jain, IBM Watson Health
Leslie Lenert, Medical University of South Carolina
Arien Malec, Change Healthcare
David McCallie, Jr., Individual
Clement McDonald, National Library of Medicine
Terrence O'Malley, Massachusetts General Hospital
Ming Jack Po, Google
Ram Sriram, National Institute of Standards and Technology
Sasha TerMaat, Epic

MEMBERS NOT IN ATTENDANCE

Ricky Bloomfield, Apple
Tina Esposito, Advocate Aurora Health
Tamer Fakhouri, Livongo Health
Valerie Grey, New York eHealth Collaborative
Edward Juhn, Blue Shield of California
Victor Lee, Clinical Architecture
Raj Ratwani, MedStar Health
Andrew Truscott, Accenture
Sheryl Turney, Anthem Blue Cross Blue Shield

Scott Weingarten, Cedars-Sinai Health System

ONC STAFF
Lauren Richie, Branch Chief, Coordination, Designated Federal Officer

Task Force Schedule

The task force was informed that the draft recommendations are scheduled to be presented to the HITAC at the meeting on September 17, 2019. The task force will have two meetings after the HITAC presentation to prepare the final recommendations to be presented to the HITAC at the October 16, 2019 meeting.

Task Force-Draft Report

The task force's overarching and specific charge were reviewed. The HITAC Recommendations section of the current draft report was reviewed and discussed to prepare for the presentation to the HITAC.

ORDERS & RESULTS

Illustrative Story of what Recommendations will Enable
The following changes were made:
- Addition of the phrase "appropriately personalized" was made to describe the normal data ranges.
- The word "compared" was added in the last sentence of the paragraph.

Need for consistent encoding of test results
The following changes were made:
- The phrase "also known as semantic interoperability" was added for clarification in the observation section.
- The word "standardized" was removed from the sixth bullet in the recommendations section.
- A bullet reading "As necessary, support the work of LOINC to develop, deliver and specify the appropriate use of additional logical observation identifiers names and codes (LOINC) codes to accommodate new and evolving test methodologies and address clinical needs" was added as a Policy Lever/Responsibility of The Office of the National Coordinator (ONC).

Standard code sets are not unique or sufficiently granular to determine the clinical equivalency of tests
No suggestions or changes were made on this topic.

Results need to be sent to clinicians in codified format
No suggestions or changes were made on this topic.

Orderable tests need to be standardized between systems and with mapping to standard terminologies
The following change was made:
- The phrase "number of views" was added as another lab order detail under the second bullet in the recommendations section.

Results need to be available for patients/proxies to effectively view, receive, and utilize
The following changes were made:
- The title of the category was changed to read "Results need to be available for patients and their proxies to effectively view, receive, and utilize".
- A bullet was added to the recommendation section reading "Advance and consider requiring the use of technical standards to support the secure authentication of patients and their designated proxies to support access to results including via mobile and cloud technology".

Public Comment
There were no public comments.

QUESTIONS AND COMMENTS RECEIVED VIA ADOBE

Linda Van Horn: Is the ISP TF Draft Final Report available for download?

Clem McDonald: Wanted to comment on the bullets. I agree with the subject matter being relevant, but they are all nouns and thing that different verbs are required/ So for orders and results think the goal is to deliver hem electronically to patients and their provider. Bullet 2 the verb is probably Create a system for closed loop et

Clem McDonald: Medication and pharmacy data is like item 1- deliver it to patient and provider

Clem McDonald: The verb for Social determinants of health is to define what we need and capture them and provide them to whom? ,etc.

Clem McDonald: Now that I see the elaboration the verbs might be there

Clem McDonald: I like the story. Good job

Clem McDonald: All labs don't know who the patients is. So won't be able to personalize

Sasha TerMaat: Does the addition of "standardized" imply there is a standard for mapping tools described?

Mike: Have you connected with the imaging community to discuss the LOINC-coded results issue? Seem to be applying pathology codes to imaging results.

Mike: There are imaging-specific lexicons for structured reporting.

Mike: The imaging societies have done extensive work on standardized imaging study names. See ACR Common, RadLex PLaybook, etc.

Linda Van Horn: Lab are ordered with procedure name e.g. MRI which can sometimes explode to one or more CPT and why it is being ordered e.g. ICD-10.

Linda Van Horn: sorry that was radiology not lab

Mike: See the ACR #DitchTheDisk campaign: https://www.jacr.org/article/S1546-1440(19)30060-2/fulltext

Linda Van Horn: ID proofing at NIST 800-63-3 IAL2 and binding of that identity to two pairs of cryptographic keys such that there is non-repudiation of identity is being used by DirectTrust for identity management

Linda Van Horn: This identity can be used to digitally sign the JWT in FHIR.

Linda Van Horn: This allows for real time identity matching without the requirement to go through multiple portals.

Adjourn

Task Force members were invited to review and comment on the remainder of the draft report. The next task force meeting is scheduled for September 10, 2019. The meeting was adjourned at 11:30 a.m.