



USCDI Task Force 2021 Call #14

Steven Lane, Co-Chair

Leslie Kelly Hall, Co-Chair

May 4, 2021

Health Information Technology Advisory Committee

The Office of the National Coordinator for Health Information Technology



Meeting Agenda

- Call to Order/Roll Call
- Past Meeting Notes
- Tasks 2b and 2c
- TF Schedule/Next Meeting
- Public Comment
- Adjourn

Task Force Roster

Name	Organization
Steven Lane (Co-Chair)	Sutter Health
Leslie Kelly Hall (Co-Chair)	Engaging Patient Strategy
Ricky Bloomfield	Apple
Hans Buitendijk	Cerner
Grace Cordovano	Enlightening Results
Jim Jirjis	HCA Healthcare
Ken Kawamoto	University of Utah Health
John Kilbourne	VA
Leslie Lenert	Medical University of South Carolina
Clement McDonald	National Library of Medicine

Name	Organization
Aaron Miri	The University of Texas at Austin, Dell Medical School and UT Health Austin
Brett Oliver	Baptist Health
Mark Savage	University of California, San Francisco's Center for Digital Health Innovation
Michelle Schreiber	CMS
Abby Sears	OCHIN
Sasha TerMaat	Epic
Andrew Truscott	Accenture
Sheryl Turney	Anthem, Inc.
Daniel Vreeman	RTI International
Denise Webb	Indiana Hemophilia and Thrombosis Center

Phase 2 Work

Due

Complete

September 9, 2021

September 9, 2021

1 Evaluate Draft USCDI v2 and provide HITAC with recommendations for:

1a - Data classes and elements from USCDI v1 including applicable standards version updates

1b - New data classes and elements from Draft USCDI v2 including applicable standards

1c - Level 2 data classes and elements not included in Draft USCDI v2

2 Evaluate the USCDI expansion process and provide HITAC with recommendations for:

2a- ONDEC submission system improvements

2b* - Evaluation criteria and process used to assign levels to submitted data classes and elements

2c*- Prioritization process used by ONC to select new data classes and elements for Draft USCDI v2

3 Recommend ONC priorities for USCDI version 3 submission cycle

*The Task Force intends to deliver Task 2b and 2c recommendations to the HITAC at its June 9, 2021 meeting



ONDEC Submission Evaluation (Leveling)

Criteria – No changes

CRITERIA	COMMENT LEVEL	LEVEL 1	LEVEL 2
Maturity-Current Standards	May be represented by terminology standard <u>or</u> element of Standards Development Organization (SDO) balloted technical specification	<u>Must</u> be represented using terminology standard <u>or</u> element of SDO-balloted technical specification	<u>Must</u> be represented using terminology standard <u>or</u> element of SDO-balloted technical specification
Maturity-Current Use	Limited test environments, or pilots	Limited production environments, 1 or 2 different systems	At scale in production environments more than 2 different systems
Maturity-Current Exchange	Limited exchange with external organizations, on same or different EHR/HIT systems	Exchanged between 2 or 3 organizations with different EHR/HIT systems	Exchanged between 4 or more organizations with different EHR/HIT systems
Use Cases-# Stakeholders Impacted	Used by few stakeholders, or for narrowly defined conditions or events.	Pertinent to many, but not most patients, providers or events requiring its use	Pertains to majority of patients, providers or events requiring its use

Draft Prioritization Criteria for USCDI v3

CRITERIA- Prioritization	LEVEL 2
Address significant gaps in USCDI v1 concepts	<u>MUST</u> be represented using terminology standard <u>or</u> element of SDO-balloted (or in process) technical specification, AND addresses gaps in care, coordination, or transitions.
Aligned with existing ONC certification and/or CMS initiatives.	Existing regulatory definitions, vocabulary OR collection methods <u>MUST</u> be used or repurposed to meet regulatory needs.
Modest technical standards development	Technical standards exist and can be repurposed or expanded, efforts are mature AND use case is prevalent. (e.g. operative note)
Modest aggregate lift for vendor development and implementation	Current data functionality and interoperability exist and can be expanded, efforts are underway, AND use case is prevalent.
Data addressing Equity/Disparities	<u>MAY</u> be represented using terminology standard <u>or</u> element of SDO-balloted technical specification AND directly supports national initiative(s) to improve health, healthcare quality, care coordination, or disparities.
Data supporting underserved stakeholder groups	Pertains to majority of patients, care partners and/or care team members requiring its use, AND addresses needs of the data underserved
Data supporting public health use cases	<u>MAY</u> be represented using terminology standard <u>or</u> element of SDO-balloted technical specification, AND standards <u>MUST</u> be accelerated in response to public health needs
Meets national imperative. Moderate to High technical and standards uplift.	Timeline driven national imperative within a 2 year horizon, functionally present, standards forming.

Phase 2 Scheduled Meetings

- May 11, 2021
- May 18, 2021
- May 25, 2021
- June 1, 2021
- June 8, 2021
- June 15, 2021
- June 22, 2021

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 Task Force and made part of the Public Record.*



Questions?



**Meeting
Adjourned**