

ISP Task Force 2021

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

Meeting Agenda

- Call to Order/Roll Call
- Introductions
- AMA Presentation on Procedural Terminology
- NCVHS Presentation on Terminology & Vocabulary Standards
- Discussion of Updating Recommendation #3
- Public Comment
- Adjourn



AMA Presentation Peter Hollmann, MD



NCVHS Presentation Rich Landen, MPH, MBA





Recommendation #3 Discussion



ISP-TF-2021_Recommendation 03 - Foundational Standards - Terminology

Foundational Standards – Terminology

3a. ONC to work with Federal stakeholders to establish policy that moves the nation towards terminology standards that are:

- Developed in accordance with OMB Circular A-119 (on Voluntary Consensus Standards)
- Have licenses that allow open use by providers, researchers, developers, patients and other stakeholders (though national licensing where appropriate)
- Designed to address multiple needs (e.g., clinical care, research, public health, and administrative needs).
- International or cross-mapped to international standards to allow for multi-regional pooled research

3b. ONC to work with key Federal stakeholders (such as NLM, CMS, FDA, NIH, etc.) to transition the nation towards terminology meeting the policy through means including, but not limited to, licensing, working with terminology curators to align development with the policy, or transitioning to alternate terminology standards.

3c. ONC to use direct levers to continue to standardize laboratory results terminology, while working with related agencies of HHS (FDA, CMS) to correctly code laboratory data to LOINC and UCUM (or other relevant terminology such as SNOMED-CT) as close to the source of the data as possible.



ISP-TF-2021_Recommendation 03 - Foundational Standards - Terminology (con't)

Foundational Standards – Terminology

- 3d. ONC, directly and through coordination with CMS, harmonize procedural coding standards to standards meeting the policy goals.
- 3e. ONC, in the transition to ICD11, work with CMS and NLM to ensure that SNOMED-CT and ICD11 harmonization will allow single source use of captured clinical data for clinical care, research, and administrative workflows.
- 3f. ONC work with FDA and CMS to continue to harmonize NDC to RxNorm, treating RxNorm as the source terminology set, and to harmonize administrative and electronic prescribing standards to use RxNorm as the single source of clinical data for clinical care, research and administrative workflows, replacing NDC for such purposes.



Questions?



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.





Meeting Adjourned