# Health Information Technology Advisory Committee U.S. Core Data for Interoperability Task Force 2021 Virtual Meeting

Meeting Notes | July 20, 2021, 10:30 a.m. - 12:00 p.m. ET

# **Executive Summary**

The focus of the U.S. Core Data for Interoperability Task Force 2021 (USCDI TF 2021) meeting was to receive a presentation by Al Taylor, ONC, on the recently released USCDI v2 (published on July 9, 2021) and prioritization criteria for USCDI v3, as well as to continue work on its Task 3 recommendations.

There were no public comments submitted by phone, but there was a robust discussion in the chat feature in Adobe Connect.

# **Agenda**

10:30 a.m.
10:35 a.m.
10:40 a.m.
11:40 a.m.
11:50 a.m.
11:55 a.m.
12:00 p.m.
Call to Order/Roll Call Past Meeting Notes
USCDI Version 2
Task 3 Recommendations
TF Schedule/Next Meeting Public Comment
Adjourn

## Call to Order

Mike Berry, Designated Federal Officer, Office of the National Coordinator for Health IT (ONC), called the meeting to order at 10:30 a.m.

## Roll Call

## **MEMBERS IN ATTENDANCE**

Steven Lane, Sutter Health, Co-Chair

Hans Buitendijk, Cerner

Grace Cordovano, Enlightening Results

Jim Jirjis, HCA Healthcare

John Kilbourne, Department of Veterans Health Affairs

Les Lenert, Medical University of South Carolina

Clem McDonald, National Library of Medicine

Aaron Miri, University of Texas at Austin, Dell Medical School and UT Health Austin

Brett Oliver, Baptist Health

Mark Savage, Savage Consulting

Michelle Schreiber, Centers for Medicare and Medicaid Services (CMS)

Abby Sears, OCHIN

Sasha TerMaat, Epic

Sheryl Turney, Anthem, Inc.

Daniel Vreeman, RTI International
Denise Webb. Indiana Hemophilia and Thrombosis Center

## **MEMBERS NOT IN ATTENDANCE**

Leslie Kelly Hall, Engaging Patient Strategy, Co-Chair Ricky Bloomfield, Apple Ken Kawamoto, University of Utah Health Andrew Truscott, Accenture

#### **ONC STAFF**

Mike Berry, Branch Chief, Policy Coordination, Office of the Policy (ONC); Designated Federal Officer Al Taylor, Medical Informatics Officers, Office of Technology (ONC)

## **General Themes**

## **TOPIC: USCDI VERSION 2**

Al Taylor presented an overview of the newly published USCDI Version 2 (USCDI v2) and described the interplay with the Standards Version Advancement Process (SVAP).

#### **TOPIC: TASK 3 RECOMMENDATIONS**

The co-chairs were scheduled to present an overview of the TF's Task 3 recommendations, but this presentation will be rescheduled for a later meeting.

# **Key Specific Points of Discussion**

## **TOPIC: USCDI TF 2021 HOUSEKEEPING**

The USCDI TF 2021 co-chair, Steven Lane, welcomed TF members and members of the public to the meeting, briefly reviewed the agenda, and highlighted the following housekeeping items:

- USCDI TF 2021 meeting materials, past meeting summaries, presentations, audio recordings, and final transcriptions are posted on the website dedicated to the TF located at https://www.healthit.gov/hitac/committees/us-core-data-interoperability-task-force-2021
- The TF will continue to meet on Tuesdays at the same time to discuss Phase 3 of its work in preparation for its presentation to the HITAC on September 9, 2021.
- The TF's recommendations on the ONC New Data Element and Class (ONDEC) Submission System are being reviewed by ONC, but no changes have been announced yet. Updates to ONDEC will be presented to the TF at a future meeting.

#### **TOPIC: USCDI VERSION 2**

Al Taylor presented an overview of the newly published USCDI Version 2 (USCDI v2). He discussed the core principles of the USCDI, which included:

- Comprises a core set of structured and unstructured data needed to support patient care and facilitate patient data access using health IT
- Establishes a consistent baseline of harmonized data elements that can be broadly reused across use cases, including those outside of patient care and patient data access
- Will expand over time via a predictable, transparent, and collaborative process, weighing both anticipated benefits and industry-wide impacts

Al displayed the USCDI v2, which was included in the presentation deck on slide #6, and highlighted changes. He explained that 22 new data elements were added, as well as three (3) new data classes. He

stated that four (4) data elements were removed and incorporated into other data elements were expanded/combined. Other key changes included support for health equity, including new data elements to support the exchange of sexual orientation and gender identity (SOGI) in the Patient Demographics data class, and four (4) new social determinants of health (SDOH) data elements, as suggested by the Gravity Project. He provided a brief overview of the data element definitions and applicable vocabulary standards for the SOGI and SDOH data elements, which were detailed in the presentation on slides #9 and #10. He explained that vocabulary sets were added as applicable vocabulary standards for the SDOH data elements, and more refined value sets will be published as the Gravity Project continues its work.

Al also explained how the data element "Care Team Member(s)" was removed and was replaced with five new data elements, which were detailed on slide #11 in the presentation deck. Not only were the new data elements added, but the persons covered were expanded. Additionally, a new data class, Clinical Tests, was added to represent tests that are not imaging or lab tests. Information was included on slide #12 in the presentation. Clinical Test Results, including both structured and unstructured/narrative components, were included. Another new data class, Diagnostic Imaging, was detailed on slide #13. Al explained that the data element "Imaging Narrative" was removed and was incorporated in the Diagnostic Imaging Report data element, while Diagnostic Imaging Test was added as a new data element.

Al explained that Encounter Information was added as a new data class, including new data elements, and he recapped discussions held around the Encounter Disposition data element. Due to those discussions, the applicable vocabulary standards were removed. Previously, the USCDI TF asked for clarity around Encounter Time and different ways it could be represented, so ONC added flexibility in the examples.

Al discussed changes made to data elements in the Laboratory data class, including incorporating Laboratory Report Narrative and Pathology Report Narrative under the Values/Results data element. Additionally, changes were made to the Problems, SDOH Problems/Health Concerns, Date of Diagnosis, and Date of Resolution data elements, and these were detailed on slide #16 in the presentation. Steven thanked ONC for clarifying the meaning of these terms.

The Applicable Standards were updated in USCDI v2 to the most current norms and standards, and Al explained that some of these standards are updated frequently.

Al stated that now ONC will consider adding the USCDI v2 as an approved standard version through the Standards Version Advancement Process (SVAP), which will allow developers to update systems to newer standards versions than required by ONC's Certification Program. The SVAP is now in the open comment period, and Al added that a new blog post will be published by ONC to invite submissions for USCDI v3 data elements and for comments on whether USCDI v2 should be incorporated into the SVAP.

#### **DISCUSSION:**

- Steven Lane inquired if there was an applicable value set specified for Care Team Member Role.
  - O Al responded that the applicable vocabulary standard was not specified for that data element because there are two (2) different value sets in use for this data element that have not been reconciled. ONC did not want to break conformance in the templates for the USCDI or set the bar higher for the USCDI than for these exchange formats.
  - o Steven asked if the documentation for Encounter Location specifies the location of the provider at the time of the encounter versus the provider's mailing address.
  - Al responded that this was left open-ended, to allow for both options to be represented by the data element.
- Grace Cordovano inquired if Diagnostic Imaging included image files from radiology or digital pathology.
  - O Al responded that the image files, themselves, were not included. ONC investigated the feasibility of adding images, but the data element has not been added yet. There is potential for it to be added as a new data element in the future.

- O Steven encouraged the TF to discuss this topic for potential inclusion in USCDI Version 3 (USCDI v3), should members care to support it.
- O Al responded to a public comment in the Adobe meeting client chat in which Patrice Kuppe asked if ONC considered the National Uniform Claim Committee (NUCC) Health Care Provider Code Set. ONC considered it as a taxonomy, but Al explained that, as the scope of provider identifiers was expanded to include all care team members, NUCC's taxonomy no longer fit.
- O Clem McDonald stated that the Fast Healthcare Interoperability Resource (FHIR) standard supports images as attachments. He inquired about why the applicable vocabulary standards were not listed for Diagnostic Imaging Report. Al responded that many options can be used to represent these different reports. They discussed what was being represented by which tests and which code sets.
- Hans Buitendijk commented that the publication of USCDI v2 includes links out to the specific submissions and highlighted differences between the definitions of the data elements. He encouraged ONC to include definitions and all submission information for each data element.
  - Al explained that ONC made some of the submissions broader to cover more context for certain data elements. ONC will investigate how this process can be managed going forward.
- Clem McDonald commented that additional examples were necessary to clarify the possible values that could be used for Clinical Test and Values/Results.
  - O Al responded that the meaning for the Laboratory data class is less ambiguous than others, but Steven agreed that including examples of Clinical Tests with data element definitions could be helpful. Sasha also agreed. Al inquired which exact terms were ambiguous and would require examples (including and/or beyond Lab Values/Results).
  - o TF members discussed ways in which examples could be helpful, and Clem offered to provide specific suggestions on the slides.
  - Sasha TerMaat commented that Epic, as a developer/vendor, has relied on examples and certification test data for Assessment and Plan to determine what ONC intended.
  - O Al responded that ONC provided more specific examples for the SDOH assessment and could provide examples for other data elements as well.
- Hans Buitendijk inquired how USCDI v2 would be either adopted into or coupled with the SVAP process. He asked how it would be applicable for existing or new standards versions (FHIR US Core and C-CDA).
  - O Al responded that adopting USCDI v2 would have implications for these exchange standards and explained that implementing USCDI v2 would require updating US Core and C-CDA to handle all new USCDI data elements. ONC is working with HL7 to inform them of changes that would be applicable to the standards and to work toward accommodating USCDI in future standards versions.
  - Clem McDonald asked for clarification around how USCDI applies to all the versions of HL7. He added that FHIR has anticipated some of the requirements and has already started making changes.
  - O Al responded that for the certain criteria that specifically invoke all or parts of the USCDI, certification criteria would require updating to the latest USCDI. He discussed the "leapfrog" process between the USCDI versions and standards in terms of making advancements.
  - Hans discussed where versions of the USCDI were referenced and which standards were attached.
- Mark Savage commented that the inclusion of the SDOH and SOGI data elements would help advance health equity and thanked ONC for the inclusion of these elements.
- Michelle Schreiber thanked the TF and ONC for work on USCDI v2, which has included advancements for beneficiaries and health care. It will impact health equity and ensure that diagnostic information is available.

- Clem McDonald commented that tonometry (AKA intraocular pressure) was not included in USCDI v2 and asked if it could be included in USCDI v3. Or, he asked, if it could be considered to be included in the new Clinical Tests data class, and, therefore, already covered as part of USCDI v2.
  - O Al responded that tonometry has been considered as one of the data elements that may be a subset of some USCDI data elements, such as Clinical Tests (formerly known as Diagnostic Studies). The goal of the USCDI is to serve a broad majority of use cases, so granular data elements may be incorporated into more general data elements.
  - o Clem encouraged the specific inclusion of tonometry and asked if it must be resubmitted.
  - O Al responded that the data class includes "other tests" and would provide a container for various tests and diagnostic procedures, including things like tonometry. He discussed the nuances of capturing and exchanging data elements and how this would affect systems and their certification.
  - O Hans commented that different systems collect different data and stated that consistency for implementation relies on the underlying standards. He stated that all data needs guidance and clarity, though variabilities occur, and emphasized that all necessary standards must be up to date to allow systems to become interoperable. He suggested that USCDI v3 will not be the final version.
  - Clem stated that tonometry, EKGs, and others should be specified as being included in Clinical Tests, as they already have FHIR resources.
  - O Steven clarified Clem's request that ONC create a list of specific tests/examples, including related value sets, that are expected to be exchangeable if a system captures them.
  - O Al responded that this task (to define all of the possible LOINC codes for all users in all scenarios) would be difficult. Steven suggested that the USCDI TF 2022 revisit this topic.
- Sheryl Turney submitted several comments:
  - o She thanked ONC for including the SDOH data, which is important to payers.
  - She asked for clarification and guidance on how the patient access API criteria would be adopted by payers.
  - O Al responded that ONC set the certification criteria and the standard of USCDI v1 and now v2 and added that additional implementation guidance could still be required. ONC will publish certification companion guides for each of the criteria, including a reference document for the USCDI implementation.

## **TOPIC: USCDI VERSION 3**

Al described the USCDI Version Update Process, which was included in the presentation slides. He explained that the submission period for USCDI v3 is open now through September, and that ONC intends to create draft USCDI v3 by January 2022. New data elements are being submitted presently, and ONC will work with submitters (including Grace Cordovano) to refine the submissions to ensure they are complete. He described the conditions that make the inclusion of new elements and classes in the next version of the USCDI more favorable and how the TF, HITAC and others could advocate for the consideration of specific items.

Al presented the USCDI v2 Prioritization Criteria that will continue for USCDI v3 and the new USCDI v3 Prioritization Criteria, which were detailed on slide #22 in the presentation, and are in line with the recommendations of the taskforce and the administration's priorities around health equity. Then, he described the next steps in the USCDI v3 update process through September 30, 2021, which were described on slide #23.

Al responded to a public comment about how to find data elements that were not included as part of USCDI v2 and encouraged everyone to visit the various level tabs on the USCDI website. He added that an improved search function will be added to the website, which is located at <a href="https://www.healthit.gov/isa/united-states-core-data-interoperability-uscdi">https://www.healthit.gov/isa/united-states-core-data-interoperability-uscdi</a>

Steven inquired about the next iteration of the USCDI TF (2022 TF), and AI responded that it is likely that another iteration of the TF will convene to provide formal feedback to ONC via the HITAC.

#### **DISCUSSION:**

- Steven inquired about whether a routine releveling process of all submitted data elements and classes would occur.
  - O Al confirmed that it would and added that ONC has now published new prioritization criteria which will be used in this process. Anyone who would like to advocate for releveling of specific items, based on the new criteria, new collaborations or on-going work, should reach out.
- Mark Savage commented that the USCDI TF made previous recommendations around identifying gaps and priorities/needs. However, he stated that many submissions do not seem to meet ONC's identification of gaps and asked how this recommendation would be handled.
  - O Al responded that the gaps are data elements that did not currently exist, and the newest version of the USCDI is more complete than the previous. However, ONC can highlight remaining gaps/areas that require additional development based on the new priorities. He suggested that the focus could be driven by submitters, but ONC could also provide some leadership.
  - o Mark encouraged ONC to weigh in to support gaps.
- Steven Lane thanked the ONC team for adding the new priority areas for USCDI v3 and TF members voiced their appreciation that their previous feedback and recommendations were incorporated.

## **Action Items**

As homework, USCDI TF members were asked to:

- Prepare to hear from Evelyn Gallego and Mark Savage from the Gravity Project on their SDOH submissions to USCDI. Please review the relevant areas of the recently released USCDI v2 (<a href="https://www.healthit.gov/isa/sites/isa/files/2021-07/USCDI-Version-2-July-2021-Final.pdf">https://www.healthit.gov/isa/sites/isa/files/2021-07/USCDI-Version-2-July-2021-Final.pdf</a>) and other submissions that were not included in USCDI v2 (<a href="https://www.healthit.gov/isa/uscdi-data-class/social-determinants-health#comment">https://www.healthit.gov/isa/uscdi-data-class/social-determinants-health#comment</a>)
- 2. Review the recently published Standards Bulletin 21-3, (<a href="https://www.healthit.gov/sites/default/files/page/2021-07/Standards\_Bulletin\_2021-3.pdf">https://www.healthit.gov/sites/default/files/page/2021-07/Standards\_Bulletin\_2021-3.pdf</a>) especially the new USCDI v3 cycle prioritization criteria.
- Review the AHIMA survey results. Be prepared to discuss how these findings could shape TF recommendations.
- 4. Review the TF member editable spreadsheet, in particular green items in Column L (Rows 7, 9, 46, 48). Be prepared to discuss how these items should create specific recommendations of the TF.

TF members were encouraged to continue to review meeting materials on the TF website at <a href="https://www.healthit.gov/hitac/committees/us-core-data-interoperability-task-force-2021">https://www.healthit.gov/hitac/committees/us-core-data-interoperability-task-force-2021</a>

## **Public Comment**

Steven welcomed members of the public and encouraged them to submit comments within the chat feature in Adobe and/or by phone during the public comment period.

## **QUESTIONS AND COMMENTS RECEIVED VIA PHONE**

There were no public comments received via phone.

#### QUESTIONS AND COMMENTS RECEIVED VIA ADOBE CONNECT

Mark Savage: Just me, or are the video, etc., feeds all quiet?

Sheryl Turney: I'm not seeing video feed

**Matija Cupac:** I believe they mentioned there is no video feed for today, all information referenced is being di splayed in the Meeting Presentation window

Clement McDonald: could you make the dispay [sic] a bit large, the characters are breaking up

Matija Cupac: Fullscreen helps alleviate this a bit

Clement McDonald: What Al is saying makes a lot of sense

Jim Jirjis: Jim Jirjis Joining late

Cassandra Hadley: Hello, thanks Jim. We have you down

Mark Savage: Agree @Clem!

Cassandra Hadley: Hello all, no one is sharing video at the moment so nothing is being shared.

**Mark Savage:** So glad USCDI includes all care team members, including family caregivers, social service car egivers, etc.!

**Cassandra Hadley:** Hi Clem, as mentioned you can go full screen in top right. Accel will message you privatly [sic] with instructions.

Patrice Kuppe: Did you consider <a href="https://taxonomy.nucc.org/?">https://taxonomy.nucc.org/?</a>

**Grace Cordovano**, **PhD**, **BCPA**: Incredibly grateful to see that non-clinical individuals that are critical members of a patient's care team can now be noted as per v2 of USCDI!

**Hans Buitendijk:** When considering images we need to consider even more that data is not always limited to what is in an EHR. We need to consider HIT, thus USCDI (effectively EHI) is managed across multiple HIT pl atforms and we cannot assume all EHRs cover all EHI.

Daniel Vreeman: Agree with @Grace and @Mark ... the Care Team changes are great improvement

Grace Cordovano, PhD, BCPA: +1 Hans, EHRs definitely do not cover all pertinent EHI

Sasha TerMaat: I agree, examples have been helpful in the past to understand ambiguious [sic] terms.

**Daniel Vreeman:** Agree with @Sasha that examples (and further clarification) would be very helpful for Asse ssment and Plan of treatment. We've discussed that here before, and there are other public comments to that effect <a href="https://www.healthit.gov/isa/uscdi-data-class/assessment-and-plan-treatment">https://www.healthit.gov/isa/uscdi-data-class/assessment-and-plan-treatment</a>

Abby Sears: I agree so much! It is such a huge success for underserved patients

Grace Cordovano, PhD, BCPA: Amen Mark!

Mark Savage: Yes, @Michelle, USCDI v2 is a major advance for better health care and health equity!

Abby Sears: + Michelle as well

**Sasha TerMaat:** I think the challenge is that tonometry tests are documented by eye doctors, likely in a differ ent system than a lab is document lab results. So from a system perspective it is different to express them in a format, even if the standard format for other results is applicable.

Abby Sears: I have to jump off now

Mark Savage: @Al Thank you for this summary of prioritzation! [sic]

Peter Gunter: How do i find data elements that didn't make it as part of USCDI v2?

Peter Gunter: thank you

## Resources

USCDI TF 2021 Website
USCDI TF 2021 – July 20, 2021, Meeting Agenda
USCDI TF 2021 – July 20, 2021, Meeting Slides
USCDI TF 2021 – July 20, 2021, Webpage
USCDI TF Meeting Calendar Webpage

# **Adjournment**

Steven thanked everyone for their work at the current meeting and reminded TF members that the recommendations to the HITAC would be presented on September 9, 2021. A list of Phase 3 scheduled meetings was provided in the presentation deck.

Mike reminded TF members that the Gravity Project will present at the next meeting of the USCDI TF 2021, which will be held between on Tuesday, July 27, 2021.

The meeting was adjourned at 12:00 p.m. E.T.