

Health Information Technology Advisory Committee

Interoperability Standards Workgroup 2023 Virtual Meeting

Meeting Notes | April 7, 2023, 10 – 11 AM ET

Executive Summary

The focus of the ad-hoc Interoperability Standards Workgroup (IS WG) session on April 7 was to finalize the Draft United States Core Data for Interoperability Version 4 (USCDI v4) data elements and USCDI Level 2 data elements. The IS WG discussed these topics and provided feedback.

Agenda

10:00 AM	Call to Order/Roll Call
10:05 AM	Finalize Draft USCDI v4 and Level 2 Recommendations
10:55 AM	Public Comment
11:00 AM	Adjourn

Call to Order

Mike Berry, Designated Federal Officer, Office of the National Coordinator for Health IT (ONC), called the meeting to order at 10:01 AM.

Roll Call

Members in Attendance

Sarah DeSilvey, Gravity Project, Larner College of Medicine at the University of Vermont, Co-Chair
Naresh Sundar Rajan, CyncHealth, Co-Chair
Pooja Babbrah, Point-of-Care Partners
Shila Blend, North Dakota Health Information Network
Hans Buitendijk, Oracle Health
Grace Cordovano, Enlightening Results
Raj Dash, College of American Pathologists
Steven Eichner, Texas Department of State Health Services
Nedra Garrett, Centers for Disease Control and Prevention (CDC)
Bryant Thomas Karras, Washington State Department of Health
Steven Lane, Health Gorilla
Hung Luu, Children's Health
Clem McDonald, National Library of Medicine
Deven McGraw, Invitae Corporation
Kikelomo Adedayo Oshunkentan, Pegasystems
Mark Savage, Savage & Savage LLC
Shelly Spiro, Pharmacy HIT Collaborative
Ram Sriram, National Institute of Standards and Technology



Members Not in Attendance

Ricky Bloomfield, Apple
Christina Caraballo, HIMSS
Rajesh Godavarthi, MCG Health, part of the Hearst Health Network
Meg Marshall, Department of Veterans Health Affairs
Anna McCollister, Individual
Aaron Miri, Baptist Health
Aaron Neinstein, UCSF Health
Michelle Schreiber, Centers for Medicare and Medicaid Services

ONC Staff

Mike Berry, Designated Federal Officer, ONC

Key Points of Discussion

Opening Remarks

IS WG co-chairs, Sarah DeSilvey and Naresh Rajan, welcomed attendees. Sarah reviewed the meeting agenda detailed in the [April 7 presentation meeting slides](#).

Finalize USCDI v4 and Level 2 Recommendations

Sarah DeSilvey stated this meeting is an ad-hoc working session for the Interoperability Standards (IS) Workgroup (WG) to align on a scope for ONC. It is a continuation of the April 5 IS WG meeting. The IS WG needs to simplify and clarify the draft recommendations into what is actionable this year.

Discussion:

- Sarah DeSilvey noted Mark Savage met with Carmela Couderc offline after the April 5 meeting to discuss the language in the provenance data elements.
- Sarah kicked off the IS WG's review of the USCDI v4 and Level 2 recommendations, starting with Recommendation 4.
 - Sarah noted some of the language was changed. The recommendation is for ONC to work with the Centers for Disease Control and Prevention (CDC), Centers for Medicare and Medicaid Services (CMS), state, tribal, local, and territorial agencies, and other key healthcare and public health authorities to identify and evolve appropriate vocabulary standards for Facility Information – Facility Type.
 - The IS WG approved the changes to Recommendation 4.
- Sarah moved the group to Recommendation 16.
 - She acknowledged the extensive conversation the IS WG had on April 5.
 - Recommendation 16 suggested ONC rename “Patient Summary and Plan Data Class” data element to “Patient Care Plan.” It also recommended ONC rename the “Assessment and Plan of Treatment” data element to “Care Plan Summary.”
 - Sarah noted there were some slight changes to the language in Recommendation 16, such as changing “suggest” to “should” in the subsequent bullets under the recommendation.
 - Steven Lane agreed the comments under the recommendation should stay, as they provide helpful context.
 - He also noted he was on a Sequoia Project call, and this topic came up.



- Hans Buitendijk asked if Recommendation 16 is clear enough from the recommendation that the IS WG is suggesting renaming the care plan.
 - Steven Lane suggested adding “remain as” to the last bullet to further clarify.
- Shelly Spiro noted for Recommendation 16 the IS WG should include the HL7 Patient Care WG as the subject matter experts in this area.
 - Sarah agreed and said the Patient Care WG is part of the acknowledgments section.
- Hans added that he would rework the last bullet and send his updated version in the chat.
- The IS WG agreed with Recommendation 16 that the language just needs to be tweaked.
- Sarah moved the IS WG to Recommendation 17, which detailed that ONC should include Advance Directive in USCDI v4, with an immediate priority focused on establishing an on-ramp for access to currently available unstructured advance directive documents.
 - Shelly asked if Advanced Directive will be its own data class or an element under another data class.
 - Hans said that often care plans are owned by the clinician, but there are Advanced Directives that are representative of the patient and their goals, outcomes, and desires.
 - Mark noted it is a data element, but it is also a type of care plan in the care plan data class.
 - Grace Cordovano said this topic was discussed in an IS WG small group. Advanced Directive is not a singular data element but a single data class.
 - The IS WG accepted the recommendation.
- Sarah moved to Recommendation 19, which regarded adding the data elements, definitions, and value sets from the Gender Harmony Project to USCDI v4.
 - The IS WG approved the recommendation.
- The IS WG moved to Recommendation 23 on Specimen Collection Date/Time.
 - This work was conducted by the IS WG laboratory subgroup.
 - Hung Luu asked if it is possible to add a sub-bullet to note that the specimen collection data elements can be combined.
 - The IS WG agreed with adding a bullet so that the data elements can be combined.
- Sarah moved to Recommendation 25.
 - The IS WG agreed that the additional rationale under the recommendation was necessary and should be kept in.
- The IS WG moved to Recommendation 27.
 - Mark and Carmela connected offline on the recommendation.
 - Steven Lane recalled prior discussions in the IS WG on the use of provenance author for the data elements when the data is generated by the patient.
 - Mark noted that would raise the recommendation from Level 2 to USCDI v4.
 - The IS WG agreed to remove the “provenance author” sentence of the recommendation.
- Sarah moved to Recommendation 30.
 - Sarah noted this recommendation garnered a lot of discussion during the IS WG meeting on Wednesday, April 5.
 - Shelly said there is a code for medication but no code for the administration of it.
 - Hans noted the administration of medication has a code and that the code includes the medication administered.
 - Pooja Babbrah said the subgroup removed “dispense medication” from the recommendation because there was confusion. She recommended removing the administration section.
 - Shelly noted the HL7 Pharmacy WG will investigate this recommendation further.
 - Clem McDonald said he doesn’t think it should be a different code, just a different field.
 - Steven Eichner said the IS WG may be getting confused about the administration code type and the method of who is administering it.
 - Hans agreed with Clem and Steven Eichner. Focusing on a coding system may lead ONC in the wrong direction. The IS WG should be careful about mixing the two concepts.
 - Hans said he would be uncomfortable including the recommendation.



- Shelly agreed.
 - Bryant Thomas Karras said for opioids or controlled substances; there is a public health need to know if the medications were administered. It is important for public health needs.
 - Note: CDC and CMS identified this as a priority.
 - Shelly said her issue with the recommendation is the use of the word “code.”
 - Nedra Garrett said the CDC recognizes there is a need for more specificity.
 - Sarah noted focusing on definitions is not feasible before the April 12 deadline. The IS WG could suggest to ONC that it be a priority for USCDI version 5. It would not be a recommendation to include, but a recommendation to work with stakeholders to clarify definitions and standards for other elements in USCDI version 5.
 - The IS WG agreed to remove “Medication Administered Code” from the recommendation. As a comment, the IS WG will note that ONC should work with stakeholders to define elements for documenting medication administration statuses.
- The IS WG moved to Recommendation 34.
 - Sarah noted this recommendation is to CMS. She said there were conversations about removing it since it is not relevant to the audience.
 - The group agreed to adjust the recommendation to “ONC should collaborate with CMS to evaluate moving the CMS Certification Number (CCN) from the currently proposed Facility Information data class to the Organization data class if the Organization/Hospital Identifier data element is supported in version 5.”
 - Raj Dash noted for Recommendation 24, in line with other recommendations, the IS WG will include ACLEA comment.

PUBLIC COMMENT

Mike Berry opened the meeting for public comments.

QUESTIONS AND COMMENTS RECEIVED VERBALLY

No comments were received verbally.

QUESTIONS AND COMMENTS RECEIVED VIA ZOOM WEBINAR CHAT

Mike Berry (ONC): Welcome to the Interoperability Standards Workgroup. We will be starting shortly.

Mike Berry (ONC): Please remember to tag "Everyone" when using Zoom chat so that everyone can see your message. Thank you.

Grace Cordovano: Agree

Pooja Babbrah: no concerns

Mark Savage: Add "renamed" before "narrative Care Plan Summary"

Hans Buitendijk: Care Plan Summary, the renamed Assessment and Plan of Treatment, would remain a narrative.

Deven McGraw: Agree

Grace Cordovano: Approve

Mark Savage: Simple tweak! Agree.



Pooja Babbrah: agree

Grace Cordovano: That one deserves a Woo Hoo!

Shila Blend: Agree

Pooja Babbrah: agree

Grace Cordovano: Agree

Pooja Babbrah: no concerns

Grace Cordovano: Approved

Shila Blend: approved

Deven McGraw: Agree with deleting that sentence

Grace Cordovano: Agree

Pooja Babbrah: Agree with that recommendaiton

Mark Savage: Can still mention importance to public health even if not the most pressing public health need.

Pooja Babbrah: +1 Mark

Hans Buitendijk: Making this an area of focus for USCDI v5 would be helpful. Recommending a data element that is not clearly defined and understood at this stage is only going to increase ambiguity, not remove it.

Hans Buitendijk: +1 Sarah.

Mark Savage: Where does it read "Medicaid Administration Code"?

Mark Savage: *Medication

Pooja Babbrah: Mark - in the title

Mark Savage: Says "Medication Administered Code".

Hans Buitendijk: The submission is Medication Administered Code, while right next to it the term Medication Administration Dose is used. Until more clearly defined, it is not clear what to do.

Deven McGraw: Good suggestion, Sarah

Pooja Babbrah: agree

Grace Cordovano: Yes



Deven McGraw: Agree this is something for ONC to work to further refine over the next year
Dayo Oshunkentan: agree

Grace Cordovano: Great point Steven!

Dayo Oshunkentan: @Sarah - +1

Deven McGraw: ONC should work with CMS

Raj Dash (CAP): For recommendation #24 (Laboratory Result Report Date/Time), I think we will want to indicate that this data element is required by CLIA, specifically here: [https://www.ecfr.gov/current/title-42/chapter-IV/subchapter-G/part-493/subpart-K/subject-group-ECFR9482366886d579f/section-493.1291#p-493.1291\(c\)\(3\)](https://www.ecfr.gov/current/title-42/chapter-IV/subchapter-G/part-493/subpart-K/subject-group-ECFR9482366886d579f/section-493.1291#p-493.1291(c)(3))

Dayo Oshunkentan: I'm good

Naresh Sundar Rajan: Indeed!

Hans Buitendijk: We still have 5 min though! :)


Grace Cordovano: Round of applause to our co-chairs and this amazing workgroup for pushing all this work through!

Hans Buitendijk: +1 !

Mark Savage: Public comment?

Bryant Thomas Karras: Thanks Mike!!

Mark Savage: 

Dayo Oshunkentan: 

Raj Dash (CAP): Great work team!

Bryant Thomas Karras: 

Deven McGraw: Many thanks to the co-chairs and to all who made significant contributions.

QUESTIONS AND COMMENTS RECEIVED VIA EMAIL

No comments were received via email.

Resources

[IS WG Webpage](#)

[IS WG – April 7, 2023 Meeting Webpage](#)

[HITAC Calendar Webpage](#)



Adjournment

The meeting was adjourned at 11:00 AM.