Health Information Technology Advisory Committee

HTI-1 Proposed Rule Task Force 2023 Virtual Meeting

Full Task Force Meeting

Meeting Notes | June 9, 2023, 10:30 AM – 12 PM ET

Executive Summary

The focus of the Health Data, Technology, and Interoperability: Certification Program Updates, Algorithm Transparency, and Information Sharing (HTI-1) Proposed Rule Full Task Force meeting on June 9 was to update and revise the HTI-1 Proposed Rule Draft Recommendations.

Agenda

10:30 AM   Call to Order/Roll Call
10:35 AM   HTI-1 Proposed Rule Task Force Charge
10:40 AM   Update and Revise Draft Recommendations
11:50 AM   Public Comment
12:00 PM   Adjourn

Call to Order

Mike Berry, Designated Federal Officer, Office of the National Coordinator for Health IT (ONC), called the meeting to order at 10:31 AM.

Roll Call

Members in Attendance

Steven Eichner, Texas Department of State Health Services, Co-Chair
Steven Lane, Health Gorilla, Co-Chair
Hung Luu, Children's Health, Group 3 Lead
Hans Buitendijk, Oracle Health
Jim Jirjis, HCA Healthcare
Anna McCollister, Individual
Clem McDonald, National Library of Medicine
Deven McGraw, Invitae Corporation
Eliel Oliveira, Dell Medical School, University of Texas at Austin
Fillipe (Fil) Southerland, Yardi Systems, Inc.

Members Not in Attendance

Medell Briggs-Malonson, UCLA Health
Hannah Galvin, Cambridge Health Alliance

Adi Gundlapalli, CDC
Aaron Miri, Baptist Health
Kikelomo Oshunkentan, Pegasystems
Naresh Sundar Rajan, CyncHealth
Sheryl Turney, Elevance Health

ONC Staff
Mike Berry, Designated Federal Officer, ONC
Dustin Charles, ONC
Daniel Healy, ONC
Sara McGhee, ONC

Key Points of Discussion

HTI-1 Proposed Rule Task Force Charge

HTI-1 Proposed Rule Task Force (Task Force) Co-Chairs, Steven Eichner and Steven Lane, welcomed attendees and thanked the group for their dedication to the draft recommendations. Steven Lane reviewed the meeting agenda and recapped the charge detailed in the June 9 meeting presentation materials.

Update and Revise Draft Recommendations

Steven Lane walked through the Proposed Rule Draft Recommendations document. The Task Force thoroughly reviewed each recommendation.

Discussion:

- The Proposed Rule Draft Recommendations document will be locked following the June 9 meeting.
- Steven Lane reviewed the recommendation on compliance with messaging standards.
    - Steven Eichner said "transmission" may be a better term than "messaging".
    - Hans said there is a variance between what health IT is being certified to and what is being implemented. Jurisdictions have different requirements for what technology needs to be certified against. He recommended ONC include actual implementations of use vs. what is certified.
    - Steven Eichner agreed. If the certified technology is not being used, it is not helpful. Does it make sense to have a certification standard that is not in use? It is important there are measurements of what standards are being used. If the certification standards are not being used, then the right standards may not be in place.
    - Steven Lane moved the recommendation to the Insights Condition section.
    - Hung Luu suggested amending the recommendation to add "ONC should include metrics regarding usage" of messaging standards.
    - Hans noted examples may not be necessary for this recommendation.
    - The Task Force amended the language to indicate, "ONC should consider and support the development of metrics regarding usage of interoperability standards, including versions and variations".
- Steven Lane reviewed Deven McGraw's recommendation at the top of page 8 regarding patient requested restrictions.
    - Deven McGraw noted two of the Task Force groups recommended different things for patient requested restrictions. The end goal is the same, but there are two different approaches. She

added audit trails do not distinguish between access and disclosures.

- o Steven Lane said in his interpretation of the recommendation the certified systems can receive that request.
- o Anna McCollister said there is concern patients may restrict data that is essential for their clinical care. Patients need to be educated on how restricting data may have impacts on their medical care and who the data will be shared with.
- o Steven Eichner said one of the primary issues is misunderstanding how patient records are distributed.
- Steven Lane reviewed the recommendation on page 16, which competes with Deven's recommendation on page 8.
  - o Steven Eichner said the technology is likely in a better place for tracking disclosures between systems and providers rather than internal use.
- Steven Lane suggested proceeding with the recommendation on page 16 in lieu of the recommendation on page 8.
  - o Anna suggested combining the two recommendations. The Task Force should recommend ONC take this on and figure out the details later.
  - o Steven Eichner said "establish" should be removed in the second line of the recommendation.
  - o Deven said the term "standards" in the second line refers to Health Information Technology Advisory Committee (HITAC) provisions, not standards.
- Steven Lane reviewed Steven Eichner's comment on page 10. He voiced concerns about stating "the LEAP project" in the recommendation.
  - o Eliel Oliveira said he is not sure if the hub-and-spoke model will effectively address the standards-based approach. He suggested including something more general.
    - ▪ Anna agreed and suggested making the recommendation even broader.
  - o Steven Lane edited the recommendation to suggest "ONC explore and support pilots, such as a hub-and-spoke infrastructure".
- Steven Lane reviewed his comment on page 9 regarding health information technology (HIT) certification requirements under the Health Insurance Portability and Accountability Act (HIPAA) right to restriction on certain uses. He amended the recommendation to state, "when received by certified health IT, the receiving system *should have the ability* to receive, view, and operationalize the restrictions requested".
  - o Steven Eichner said with this recommendation, there is no expectation the receiver will honor the request.
  - o Eliel said consent, disclosure, and restrictions all relate to each other. A full Task Force could be dedicated to discussing those recommendations.
  - o Deven noted if a patient asks to restrict data, the organization has the discretion to decide if they will grant that restriction.
- Steven Lane reviewed Fil Southerland's recommendation on page 10.
  - o Clem McDonald suggested citing the sources included in the recommendation.
  - o The Task Force amended the recommendation to include the term "Insights Condition" and "include specialty and non-EHR HIT developers."
- Deven said the recommendation on page 10 does not indicate a proposed specification for electronic health information (EHI). This was a topic for the Insights Condition Task Force group.
  - o Hung said no suggestions were made to that recommendation.
  - o Steven Eichner added there was no specific expert presenting on that subset.
  - o Steven Lane amended the recommendation to indicate that ONC should include the Individuals' Access to Electronic Health Information proposed measure in the Insights Condition section.
- Deven added a comment to the Introduction section on page 4.
  - o The Task Force approved the adjustment.

- The group will not need to utilize the Contingent Task Force meeting on June 12.
- All recommendations have been finalized.

PUBLIC COMMENT
Mike Berry opened the meeting for public comments.

QUESTIONS AND COMMENTS RECEIVED VERBALLY
No questions or comments were received verbally.

QUESTIONS AND COMMENTS RECEIVED VIA ZOOM WEBINAR CHAT
Mike Berry (ONC): Welcome to the HTI-1 Proposed Rule Task Force. Please tag "Everyone" when using Zoom chat. Thank you!

Jim Jirjis: Jim Jirjis joined late

Deven McGraw: The good news is that the need to focus on this issue (accounting of disclosures) was picked up and advanced by 2 out of 3 subgroups, in separate deliberations.

Mark Savage: https://www.healthit.gov/topic/onc-funding-opportunities/leading-edge-acceleration-projects-leap-health-information

Mark Savage: Link on LEAP

Deven McGraw: Agree with this edit

Deven McGraw: Granting a restriction request allows a provider to reject a request for EHI under the privacy exception of the info blocking rules

Hans Buitendijk: The "LEAP Project" is referenced as "ONC LEAP Computable Consent Project" on https://sdhealthconnect.github.io/leap/

Deven McGraw: If there is time, can I raise the proposed insights condition re: collection of data on individual access?

Deven McGraw: https://www.healthit.gov/sites/default/files/2023-04/1.Measure_Spec_Individual_Access_1.3.pdf

Deven McGraw: 42 USC 300jj-12, adding section 3002(b)(2)(B)(ii)

Mark Savage: The public appreciates you all, too!

Eliel Oliveira: 🎊

Eliel Oliveira: Great work all. Thank you.

Betty Lengyel-Gomez: Great work! Awesome!

QUESTIONS AND COMMENTS RECEIVED VIA EMAIL
No comments were received via email.

Resources

[HTI-1 Proposed Rule Task Force 2023 Webpage](#)
[HTI-1 Proposed Rule Task Force 2023 – June 9, 2023 Meeting Webpage](#)
[HITAC Calendar Webpage](#)

Adjournment

The meeting adjourned at 12:00 PM.