



# Strategies for Enhanced Laboratory Data Interoperability





### **ONC Partnership Activities: Regenstrief Institute**

Cooperative Agreements: Technical and content development of LOINC® (Logical Observation Identifiers Names and Codes\*)

2022 Survey: Understanding the use and implementation of LOINC by U.S. based laboratories

2023 and beyond: Continued study of LOINC community needs



\*https://loinc.org/

### Multi-stakeholder Partnership: SHIELD

- Systemic Harmonization and Interoperability Enhancement for Laboratory Data (SHIELD)
- Federal, academia, and industry partnership
- Charge: Build, implement, and support a comprehensive solution for interoperability throughout the laboratory data life cycle
- Goal: 100% lab data integrity



"Describe the SAME test the SAME way ANYWHERE in the Healthcare ecosystem".

https://bit.ly/SHIELDLabCodes

#### **Coordination: Federal Partners**

- Leaders across four federal partners: ONC, CMS, CDC, FDA\*
  - Charge: Catalyze meaningful progress in laboratory interoperability
- Activities
  - Identify high impact transformation/change opportunities
  - Identify and coordinate agency actions
  - Contribute to the ONC's Laboratory Interoperability Report to Congress

\*Centers for Medicare & Medicaid Services (CMS), Centers for Disease Control and Prevention (CDC), Food and Drug Administration (FDA)

### Laboratory Interoperability Congressional Report

- The <u>H.R.2617 Consolidated Appropriations Act, 2023</u> requires that ONC conduct a study and submit a report on lab interoperability by **December 2024**.
- ONC is coordinating a Federal response



## HTI-1\* Request for Information: Laboratory Data Interoperability

- Consensus that lab interoperability would benefit from:
  - Consistent use of standard terminologies
  - Improvements to the use of LOINC
  - Shared terminology mapping between manufacturers and laboratories via the LOINC -In Vitro Diagnostic (LIVD) specification

<sup>\*</sup>Health Data, Technology, and Interoperability: Certification Program Updates, Algorithm Transparency, and Information Sharing (HTI-1)

### **Standards: USCDI Version 4**

#### **Allergies and Intolerances**

- Substance (Medication)
- Substance (Drug Class)
- Substance (Non-Medication)
- Reaction

#### **Care Team Member(s)**

- Care Team Member Name
- Care Team Member Identifier
- Care Team Member Role
- Care Team Member Location
- Care Team Member Telecom

#### **Clinical Notes**

- · Consultation Note
- Discharge Summary Note
- History & Physical
- Procedure Note
- Progress Note

#### **Clinical Tests**

- · Clinical Test
- Clinical Test Result/Report

#### **Diagnostic Imaging**

- Diagnostic Imaging Test
- · Diagnostic Imaging Report

#### **Encounter Information**

- Encounter Type
- · Encounter Identifier
- · Encounter Diagnosis
- Encounter Time
- Encounter Location
- · Encounter Disposition

#### **Facility Information**

- · Facility Identifier
- Facility Type
- · Facility Name

#### **Goals and Preferences**

- · Patient Goals
- SDOH Goals
- Treatment Intervention Preference
- Care Experience Preference

#### **Health Insurance Information**

- Coverage Status
- Coverage Type
- · Relationship to Subscriber
- Member Identifier
- Subscriber Identifier
- · Group Identifier
- · Payer Identifier

#### **Health Status Assessment**

- Health Concerns
- · Functional Status
- Disability Status
- Mental/Cognitive Status
- Pregnancy Status
- Alcohol Use
- Substance Use
- Physical Activity
- SDOH Assessment
- Smoking Status

#### **Immunizations**

Immunizations

#### **Laboratory**

- Tests
- Values/Results
- Specimen Type
- Result Status
- Result Unit of Measure\*
- Result Reference Range\*
- Result Interpretation\*
- Specimen Source Site\*
- Specimen Identifier\*
- Specimen Condition Acceptability\*

#### **Medical Devices**

 Unique Device Identifier -Implantable

#### **Medications**

- Medications
- Dose
- Dose Unit of Measure
- Indication
- Fill Status
- Medication Instructions
- Medication Adherence

#### Patient Demographics/ Information

- First Name
- Last Name
- Middle Name (Including middle initial)
- Name Suffix
- Previous Name
- Date of Birth
- Date of Death
- Race
- Ethnicity
- Tribal Affiliation
- Sex
- Sexual Orientation
- · Gender Identity
- · Preferred Language
- Current Address
- Previous Address
- Phone Number
- Phone Number Type
- Email Address
- Related Person's Name
- Relationship Type
- Occupation
- Occupation Industry

#### **Patient Summary and Plan**

 Assessment and Plan of Treatment

#### **Problems**

- Problems
- SDOH Problems/Health Concerns
- Date of Diagnosis
- · Date of Resolution

#### **Procedures**

- Procedures
- Performance Time
- SDOH Interventions
- Reason for Referral

#### **Provenance**

- Author Time Stamp
- Author Organization

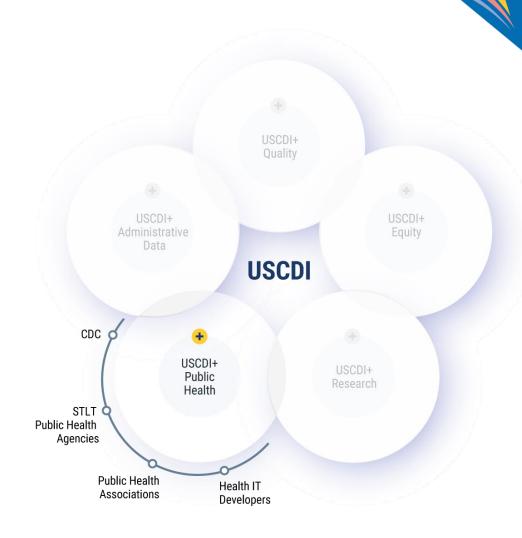
#### **Vital Signs**

- Systolic Blood Pressure
- Diastolic Blood Pressure
- Average Blood Pressure
- Heart Rate
- Respiratory Rate
- Body Temperature
- Body Height
- Body Weight
- Pulse OximetryInhaled Oxygen
- ConcentrationBMI Percentile (2 20 vears)
- Weight-for-length Percentile (Birth - 24 Months)
- Head Occipital-frontal Circumference Percentile (Birth- 36 Months)



### **USCDI+ for Public Health**

- Capture the data needs of public health that fall outside the scope of USCDI; improve data quality and availability
- Current priority areas:
  - Case-based Surveillance
  - Lab Data Exchange
  - Bi-Directional Exchange with Healthcare and Other Partners
  - Maternal and Child Health
  - Resource Reporting / Situational Awareness
  - Risk Behaviors & Health Equity





## Contact ONC

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- **Phone:** 202-691-2062
- Health IT Feedback Form:
  <a href="https://www.healthit.gov/form/">https://www.healthit.gov/form/</a>
  <a href="https://www.healthit.gov/form/">healthit-feedback-form</a>
- X: @onc\_healthIT
- in LinkedIn: Office of the National Coordinator for Health Information Technology
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## Regenstrief Institute Better Care. Better Health.



Strategies for enhanced laboratory data interoperability: Role of terminology standards in laboratory data exchange **December 15, 2023** 

Marjorie Rallins, DPM, MS

Executive Director, Health Data **Standards** 

Regenstrief Institute

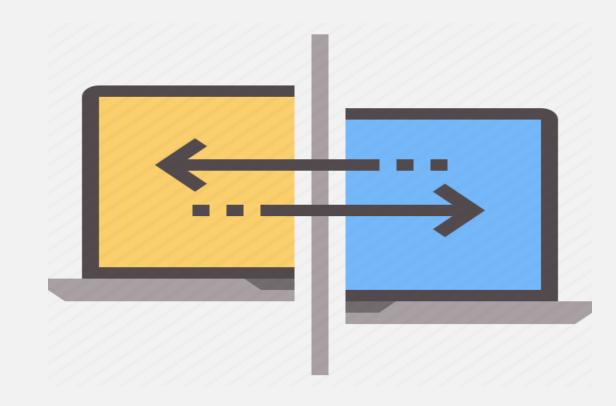






## Health information exchange – semantic interoperability

- Decades long journey (4-5)
- Laboratory realm at the leading edge
- Laboratory Information
   Systems
   forefront of health information
   system adoption and
   innovation



## Health information exchange – semantic interoperability

## **Clinical insights**

Laboratory generated data at the core

- delivering effective clinic care
- supporting public health surveillance
- advancing research
- facilitating the administrative aspects of health care e.g. managing costs.

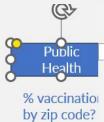


How many patients with controlled BP?

#### Research

Eligible patients for vaccine clinical trial?







How many patients with MRSA?

## Vocabulary standards: foundation/payload, semantic interoperability

#### **Clinical vocabularies\***

- LOINC
- SNOMED
- RxNorm

#### **Administrative code sets\***

- ICD 10
- Current Procedural Terminology, CPT®

#### Other standards\*

- FHIR
- UCUM

- Focus on semantic interoperability, decades long, with phases
  - Early phases: terminology development: terminology models, terminology content etc
  - Rethinking earlier work: fit the needs of users, support interoperability?
    - Consider information models rather than conveying everything in the vocabulary?
    - LOINC committees; rethinking of some attributes e.g. method
  - Computable frameworks, CPT, ICD
  - Increase FHIR focus & policy, facilitate effective interoperability

## **LOINC** and **SNOMED** CT: critical to interoperability

Complementary





QUESTION

**ANSWER** 

Tobacco smoking status? **72166-2** 

Non-smoker (finding) 8392000

LN 72166-2 Tobacco smoking status

SCT 8392000 Non-smoker

Message field identifying the question/observation

Message field identifying the answer/result

## Collaborative









## The LOINC Ontology: A LOINC and SNOMED CT Interoperability Solution

 Links robust clinical semantics of SNOMED CT with the rich observation and measurement content in LOINC.

"Globally, implementers are operating in an ecosystem of standards that fosters an element of interdependence and the need to work collaboratively and effectively together."

- Easy for implementers to have a unified approach (via a common structure) to implementing both standards.
- Provide a single solution that meets clinical and regulatory requirements, globally

## **Ecosystem concept**



- Useful means to approach interoperability, particularly in the laboratory space.
- SHIELD:
- ecosystem, partnerships and initiatives
- goals to drive adoption and development of solutions to address challenges and realize opportunities associated with laboratory interoperability Implementation

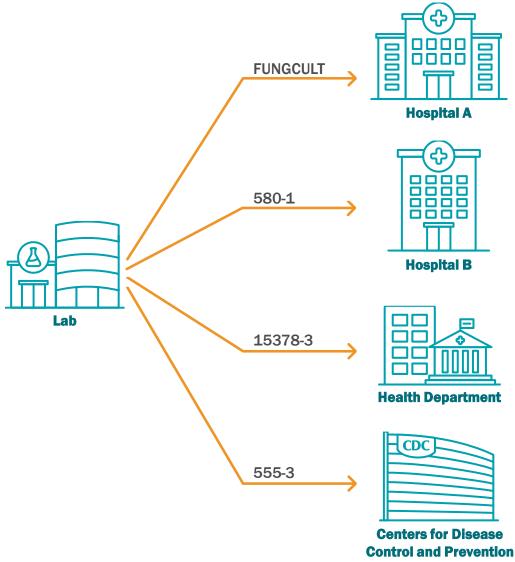
## Thank you!



# Challenges in Laboratory Data Exchange

ONC Annual Meeting | December 15<sup>th</sup> 2023 Dari Shirazi | Deputy Director of Informatics, APHL

## **Vocabulary Management**



Lab information systems use internal code

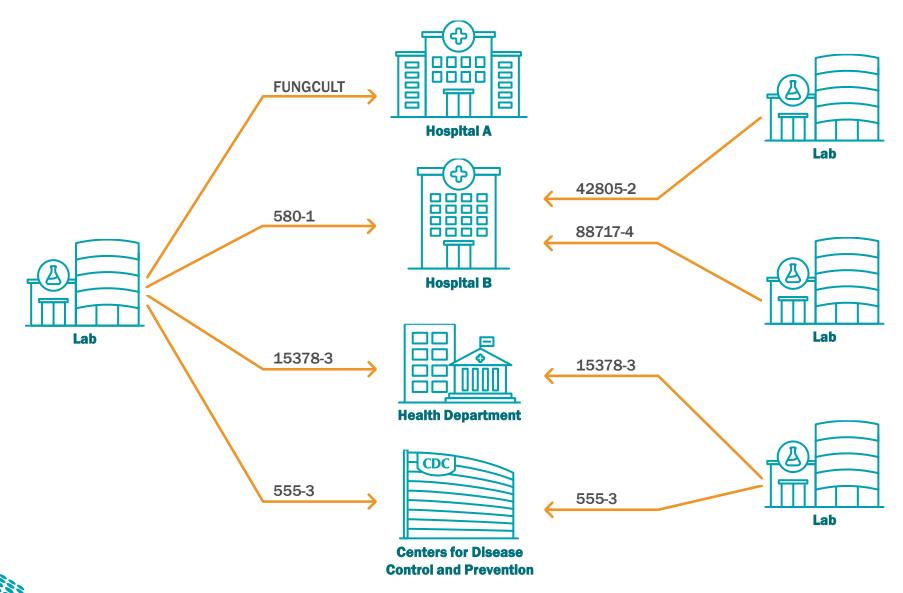
These internal codes need to be mapped to standards like LOINC, SNOMED, CPT, etc.

Different partners use different codes even for the same test

APHL Analysis. Answers. Action www.aphl.org

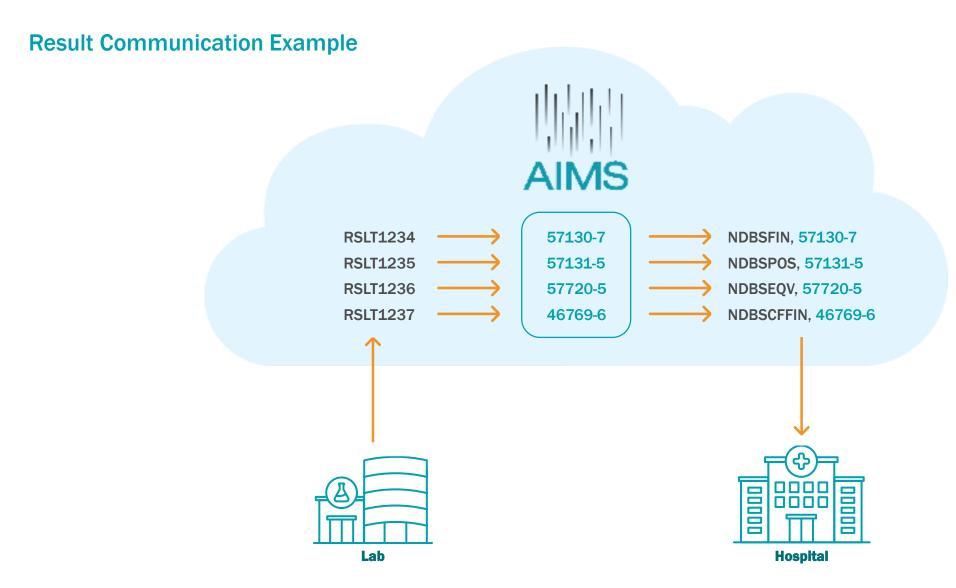


## **Vocabulary Management**



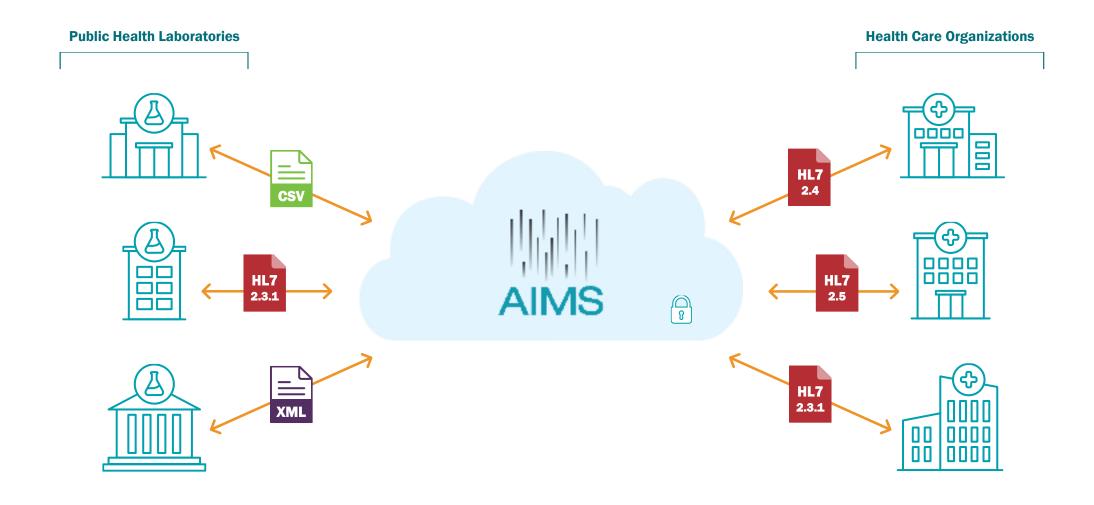


## **Building Flexibility**



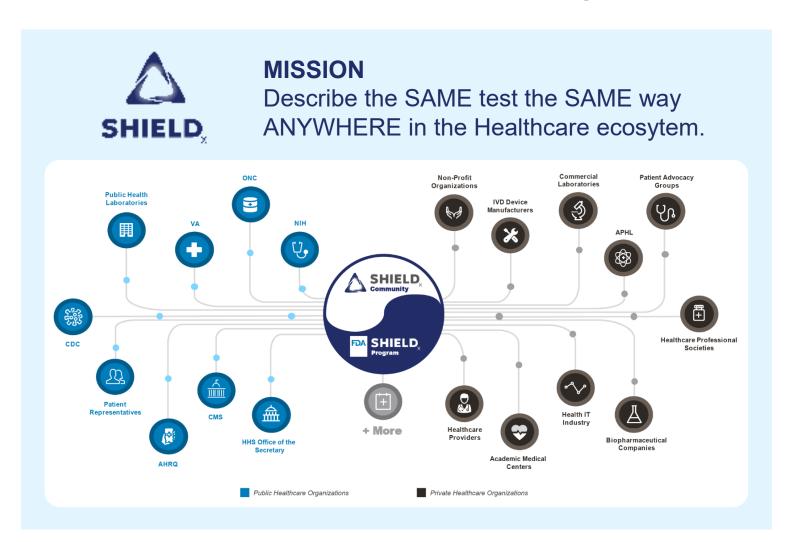


## A Data Exchange Ecosystem





## Systemic Harmonization and Interoperability Enhancement for Laboratory Data







## Implementation Strategies in the SHIELD Roadmap



#### **Knowledge Management**

Promoting an integrated approach to identifying, capturing, evaluating, retrieving, and sharing laboratory data and ensuring that data is understandable, reproducible, and useful

**ACTION:** standards alignment of data representation / development of laboratory data repository



#### **Systems Thinking**

Reengineering the laboratory data transfer process in a manner that prioritizes safety, integrity, and graceful evolution over time above all else

**ACTION:** production and expansion of "data reliability" metrics and Standards updates



#### **Enhanced Analytic Data Storage**

Developing an authoritative source for laboratory data representation that supports existing data models and is accessible by all entities that create or use laboratory data

**ACTION:** creation of an IVD Data Store / Hub



#### **Ecosystem Engagement**

Collaborating and sharing perspective across industry, agency, and discipline, as well as educating stakeholders about laboratory data interoperability

ACTION: Implementation of SHIELD identified standards, collaboration with Health IT stakeholders for feedback and validation (e.g., HL7, LOINC, SNOMED CT)



### Laboratory Interoperability Data Registry WG

- Requirements
- Fields across Testing Areas
- Structure Definition



#### Real World Evidence WG

- Requirements
- Fields across Testing Areas
- Structure Definition



#### Standards / Vocab Updates WG

- Identify gaps in content for lab data
- Preferred standards use for lab data scenarios
- Implementation challenges



### Communications and Branding WG

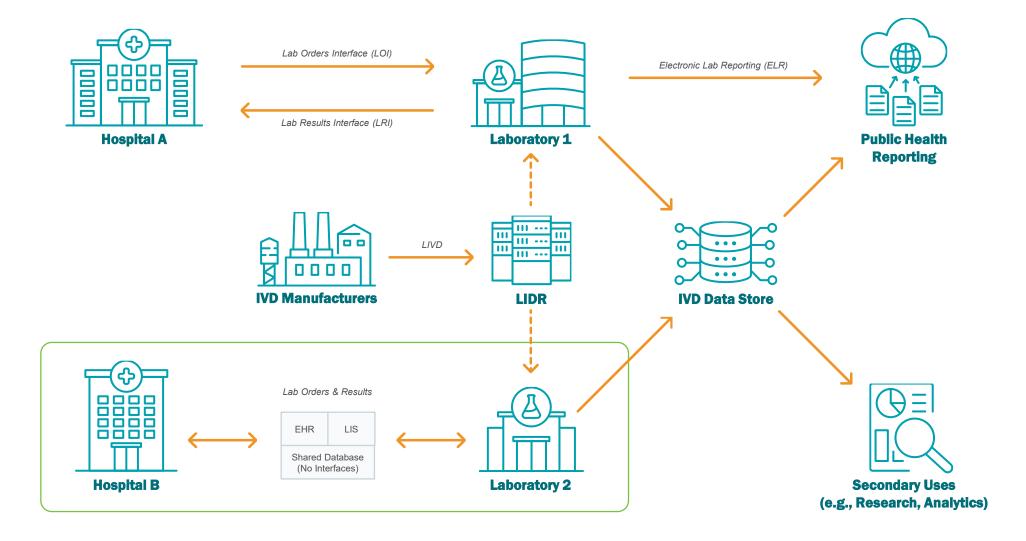
- Website
- Presentations
- Publications



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### **Future State**

Unique Device Identifier (UDI) + USCDI elements + LIDR = > reliable data for all





## **Outcomes of Laboratory Data Interoperability**

By developing a robust infrastructure which improves the quality, interoperability, and portability of laboratory data within and between institutions and individuals, SHIELD will help enable enhanced public health reporting, healthcare research and innovation, Clinical Decision Support (CDS), regulatory decisions, outbreak monitoring, signal detection, and Real World Evidence.



#### **Enhance Product Development**

- Develop toolkits for test developers to build innovative and FDA-approved testing methods
- 2. Better evaluate real-world test performance



#### **Improve Patient Safety**

- 1. Reduce reliance on error-prone, manual practices.
- 2. Provide clinicians with more accurate, useful, structured, and computable treatment data
- 3. Increase precision of IVD testing



#### **Reduce Regulatory Burden**

- 1. Reduce time-to-market for IVD test-makers
- 2. Predict market demand for tests to right-size manufacturing
- 3. Expedite the number of EUA to 510k conversions through accurate evidence



#### **Enhance Health Analytics**

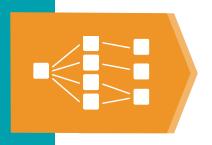
- Track surges in the pandemic including viral mutation detection
- 2. Understand the impact of variants on testing
- Harmonization of laboratory data within and outside of health institutions

Contact SHIELDLabCodes@gmail.com



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## **In Summary**



#### **CHALLENGE**

Biggest challenge in lab data exchange is lack of standardization



#### **WORK**

Work to improve standardization (e.g. SHIELD) is critical



#### **SOLUTION**

BUT we don't have to wait, intermediaries provide a solution that can resiliently handle the variability that exists today and evolve as additional standards are introduced (e.g. ETOR).



## Thank you

For more information contact
Association of Public Health Laboratories
https://www.aphl.org

### **Division of Laboratory Systems**

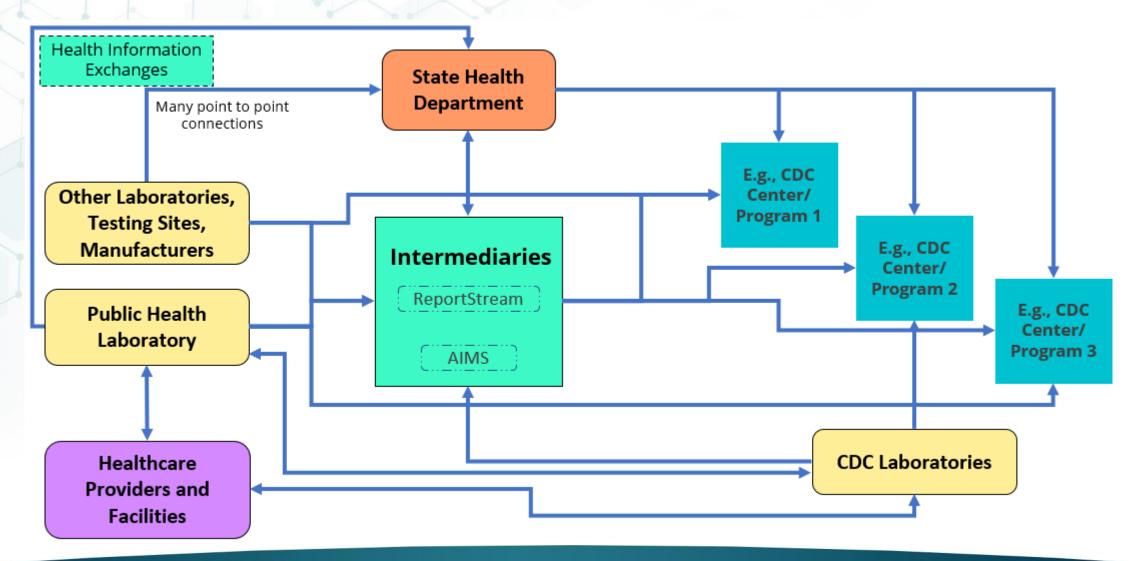
## Intermediary: A Strategy for Enhanced Laboratory Data Interoperability

#### Jasmine Chaitram, MPH, MT

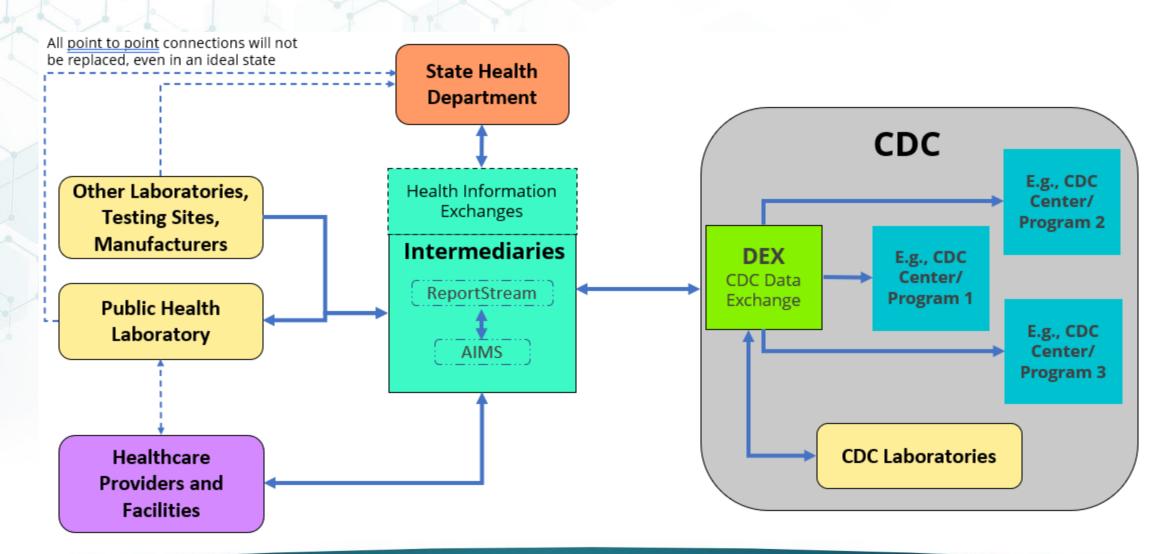
Chief, National Laboratory Response System Branch
Division of Laboratory Systems
Center for Laboratory Systems and Response



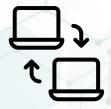
## **Current State of Laboratory Data Flows**

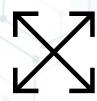


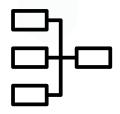
## **Ideal State: Laboratory Results Data Flows to Public Health**



## **CDC Laboratory Data Exchange (LDX) Strategy**











Modernize PHL Test Order and Results **Expand the use of intermediaries** 

Improve reporting to public health

Establish CDC front door

Enhance CDC's test order and reporting

## **Common Intermediary Capabilities**

#### **Security and Authentication**

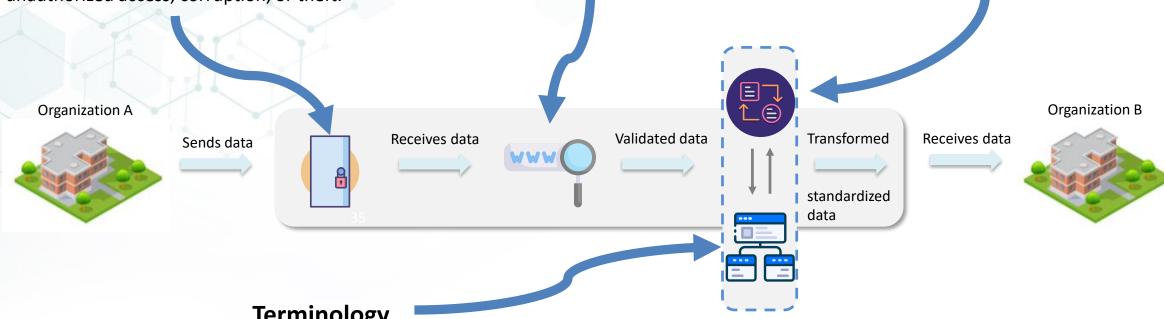
Confirms user identity and perform user management to safeguard against unauthorized access, corruption, or theft.

#### **Validation**

Ensures accuracy and quality of data before processing.

#### **Transformation**

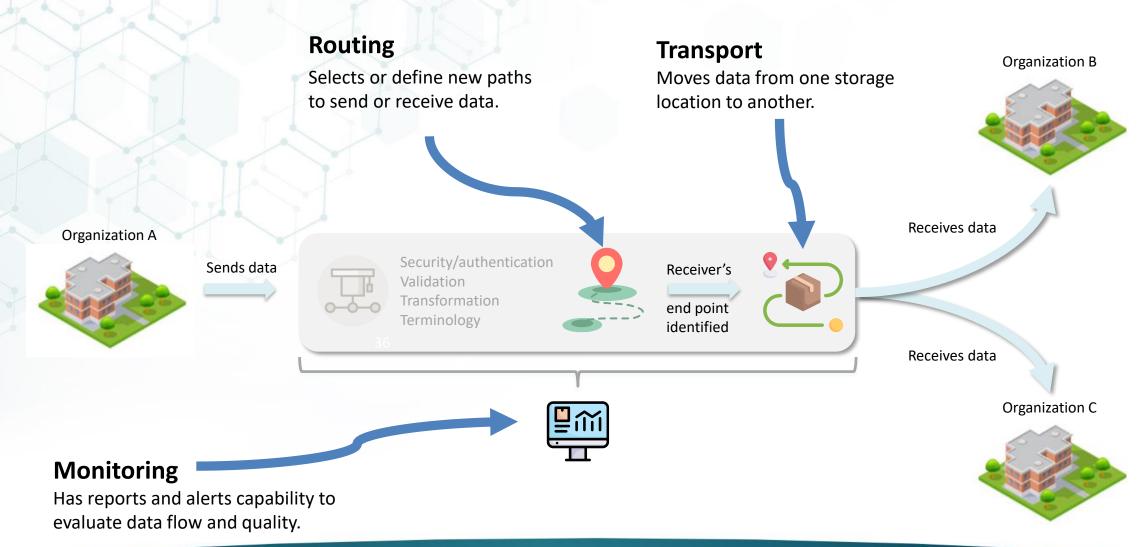
Converts data from one format to another or derives new data from other elements.



#### **Terminology**

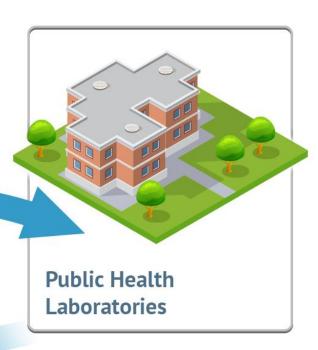
Maps data from one terminology standard to another.

## **Common Intermediary Capabilities**

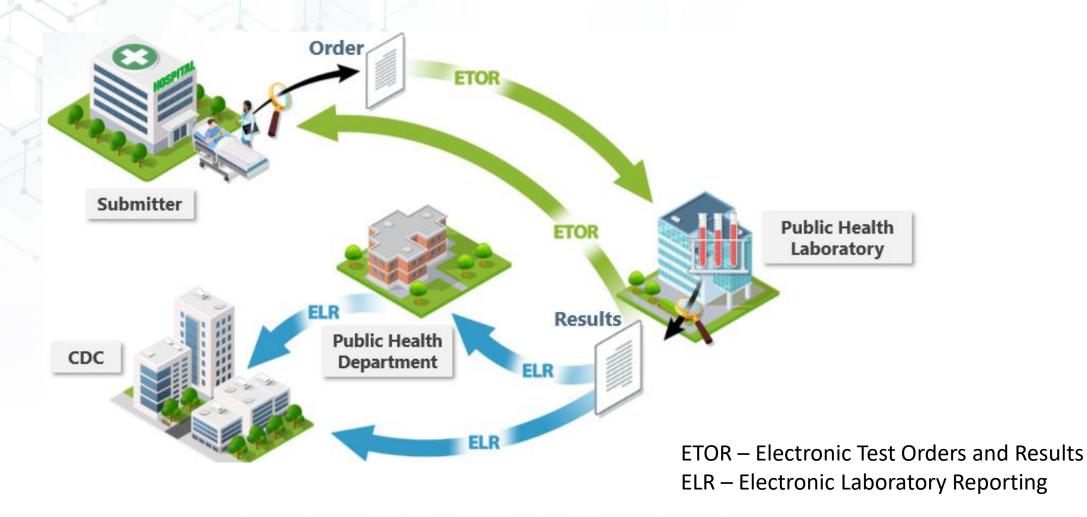


## What is ETOR?





## **Laboratory Data Exchange**



## **Benefits of ETOR**



#### **Laboratories**

- Data accuracy
- Improve Lab Workflow
- Cost efficiencies



#### Healthcare

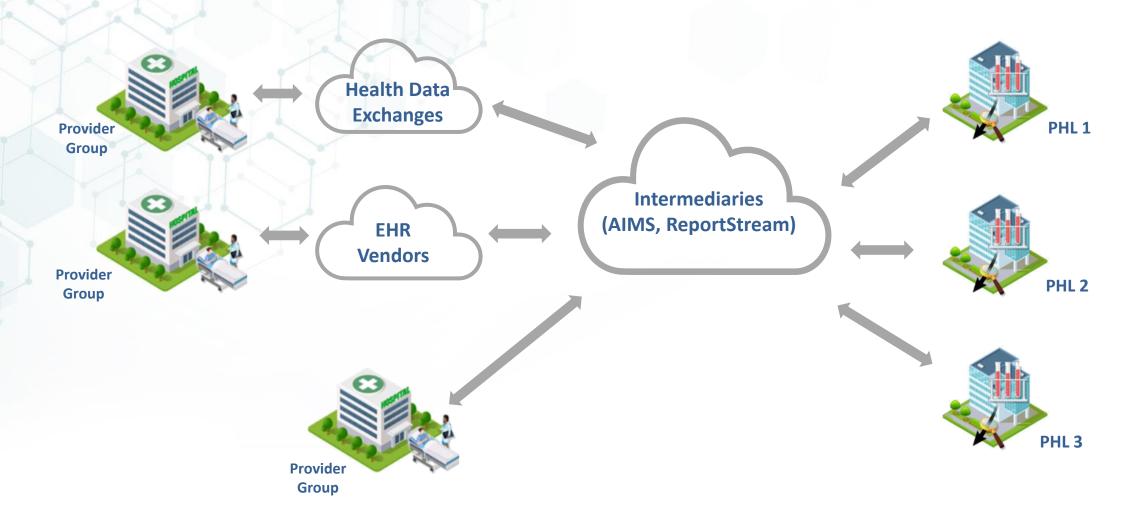
- Automated ordering
- Timely results
- Improved patient care



#### **Public Health**

- Reporting
- Response
- Surveillance

## **ETOR Future State - Intermediaries**



## CDC's Public Health Laboratory ETOR Initiative Program Updates



#### **Alabama**

**HCO:** Baptist Health

**EMR:** Oracle Health

Millennium

**LIMS:** Neometrics



#### **Florida**

**HCO:** Orlando Health

**EMR:** EpicCare Ambulatory

Base, EpicCare Inpatient

Base

LIMS: PerkinElmer's

Specimen Gate



#### Louisiana

**HCO:** Ochsner Health

**EMR:** Epic

**LIMS:** Neometrics



#### Iowa

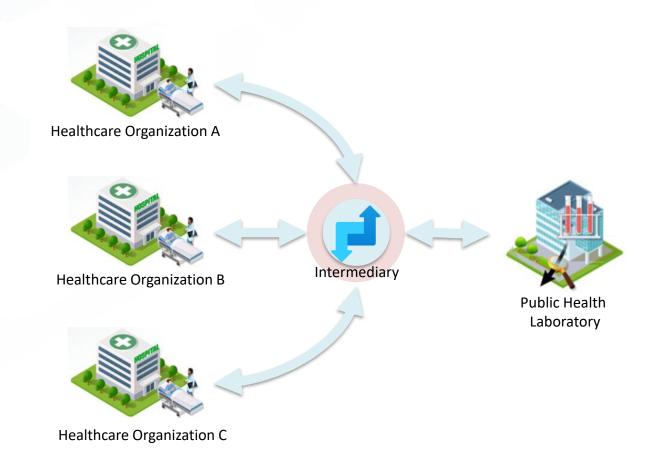
**HCO:** Fairbanks Memorial

**EMR:** Cerner-Millenium

LIMS: OpenELIS

## **Next Steps for ETOR**

- Support the adoption of Laboratory
   Order/Result Interface (LOI/LRI) standard
   to test orders and results.
- Continue the development common architecture and services for intermediaries
- Develop a common legal agreement for the use of intermediaries across jurisdictions
- Facilitate interoperability between intermediaries





## **THANK YOU!**





For more information, contact CDC 1-800-CDC-INFO (232-4636) TTY: 1-888-232-6348 www.cdc.gov

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