

# Health Information Technology Advisory Committee

## Interoperability Standards Workgroup 2023 Virtual Meeting

### Meeting Notes | February 7, 2023, 10:30 AM – 12 PM ET

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#### Executive Summary

The focus of the Interoperability Standards Workgroup (IS WG) was to review workgroup charges and Draft United States Core Data for Interoperability Version 4 (USCDI v4) data elements. The IS WG discussed these topics and provided feedback. There were no public comments submitted verbally, but robust discussion via the chat feature in Zoom Webinar.

#### Agenda

10:30 AM	Call to Order/Roll Call
10:35 AM	IS WG Charge
10:40 AM	Comments and Recommendations – New Draft USCDI v4 data elements
11:45 AM	IS Workplan and Timeline
11:55 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 10:33 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 Babbarah, Point-of-Care Partners  
Shila Blend, North Dakota Health Information Network  
Ricky Bloomfield, Apple  
Hans Buitendijk, Oracle Health  
Christina Caraballo, HIMSS  
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  
Rajesh Godavarthi, MCG Health, part of the Hearst Health Network



Bryant Thomas Karras, Washington State Department of Health  
Steven Lane, Health Gorilla  
Hung Luu, Children's Health  
Meg Marshall, Department of Veterans Health Affairs  
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**

Anna McCollister, Individual  
Aaron Miri, Baptist Health  
Aaron Neinstein, UCSF Health  
Michelle Schreiber, Centers for Medicare and Medicaid Services

### **Federal Representatives**

Joel Andreas, Centers for Medicare and Medicaid Services (CMS)  
Nedra Garrett, Centers for Disease Control and Prevention (CDC)  
Meg Marshall, Department of Veterans Affairs (VA)  
Michelle Schreiber, CMS (Absent)  
Ram Sriram, National Institute of Standards and Technology (NIST)

### **ONC Staff**

Mike Berry, Designated Federal Officer, ONC

## **Key Points of Discussion**

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### **Opening Remarks**

IS WG co-chairs, Sarah DeSilvey and Naresh Sundar Rajan, welcomed attendees. Sarah and Naresh reviewed the meeting agenda detailed on the [February 7, 2023, meeting presentation slides](#).

### **IS WG Charge**

Sarah reviewed the IS WG Charge and Timeline. The charge includes:

- Overarching charge: Review and provide recommendations on the Draft USCDI v4.
- Specific charge:
  - Due to the HITAC by April 12, 2023:
    1. Evaluate Draft USCDI v4 and provide HITAC with recommendations for:
      - a. New data classes and elements from Draft USCDI v4.
      - b. Level 2 data classes and elements not included in Draft USCDI v4.

### Discussion:

No comments were received from IS WG members.

## Comments and Recommendations – New Draft USCDI v4 data elements

Sarah DeSilvey presented a rationale for the review of Draft USCDI v4 and USCDI v4 prioritization criteria. Al Taylor then presented the IS WG disposition working google document. The document has been updated with the following elements for reference by IS WG members:

- New Draft USCDI v4 data elements with notes on how these elements map to the FHIR IG and C-CDA IG.
- Current data element prioritization criteria for application to data elements which are at minimum USCDI level 2.

IS WG members reviewed the google document and provided feedback. The following data elements were discussed: Allergies and Intolerances, Encounter Identification, Alcohol Use, and Substance Use. All data elements discussed were approved for the initial recommendation of inclusion in USCDI v4. IS WG members were asked to document their feedback on the Google document. Allergies and Intolerances, Alcohol Use, and Substance Use were conditionally approved with the assumption of further IS WG discussion and incorporation of their comments.

### Discussion:

- IS WG members discussed stakeholders to invite and present at future IS WG meetings. Steven Lane suggested that CMS be invited to discuss the importance of facility data elements and the rationale for inclusion in USCDI vs. USCDI+. Sarah suggested inviting individuals from the Social Care Taxonomy Ecosystem. Steven Eichner suggested inviting the CDC.
  - Sarah elevated feedback suggesting the FHIR Physical activity IG WG are invited to present.
  - Steven Eichner recommended inviting presenters from multiple potential user groups of applicable data elements to ensure harmony with users.
  - IS WG members are requested to insert additional stakeholder presenters in the google document.
  - Nedra Garrett agreed with suggestions for CDC and CMS presentations. Nedra will ensure that the right representatives are selected to present to the IS WG.
  - IS WG members agreed to hold presentations at either the Feb 22 or Mar 1 IS WG meeting.
  - Naresh suggested that IS WG members have a separate call to review the google document and capture feedback on data elements from the different user perspectives.
- Pooja Babbrah explained how pharmacies can differ in standard, and coded data set usage dependent on setting type. Pooja suggested consideration of these different settings when reviewing the data elements.



- Shelly noted that the pharmacy HIT collaborative takes into consideration all pharmacy practice settings. Shelly's organization aims to ensure that recommended coding standards are applicable to all settings.
- IS WG members discussed the following data element: Allergies and Intolerances.
  - Hans explained that it is not clear what level of granularity is intended for this data element. Additional guidance will improve its implementation. Hans added a general comment that USCDI must be supported by all certified HITs and inquired about what guidance is available to support USCDI usage.
  - Shelly agreed with Hans's comments. Shelly shared that her organization utilizes allergy and intolerance data elements for observation purposes only. Her organization is interested in potential adverse drug events reporting of allergy intolerance as it relates to insurance data. Steven Eichner noted there is additional data to be collected outside of current allergens for vaccines and medications, such as an adverse reaction to intramuscular injections. There is a need to incorporate these other risks without duplicating records and increasing burden for use.
  - Al noted that individual allergy and intolerance to a substance or category of substances, that is not a medication, can be represented by a coded set. There is an intent to identify the substance that causes the reaction rather than the reaction itself.
  - Ricky highlighted the current coding system recommended for use within US Core is SNOMED-CT. He then inquired if the use of SNOMED-CT is sufficient or do we need to consider other coding systems.
    - Shelly commented that drug class is not granular enough to identify clinical manifestations from drugs and their components. Shelly noted that SNOMED is applicable to non-medicine data. She recommended that medication data utilize RxNorm.
    - Al noted that USCDI data elements should include the best fit data standards at a minimum. It is not required to include all data standards for a particular data element.
  - Deven McGraw inquired if pharmacogenetic data fit within the allergy and intolerance data element. Ricky has not seen pharmacogenetic data use in this data element but noted this is a topic to revisit. Al explained that the scope of this data element does not include pharmacogenetics.
  - IS WG members agreed to move forward with an initial recommendation for inclusion in USCDI v4 with the incorporation of IS WG comments and further discussion. Sarah noted this data element aligns with USCDI prioritization criteria #5.
- Hans inquired about the capture of general comments that do not apply to a specific data element. IS WG members agreed that comments can be inserted in column J of the Google document as they arise. General comments will be extracted and included in IS WG final recommendations.
- Al asked that IS WG members include a justification of revision in their comments regarding applicable data standards in the google document.
- IS WG members discussed the following data element: Encounter Identification.
  - No comments were received from IS WG members.
  - IS WG members agreed to move forward with initial recommendation for inclusion in USCDI v4.
- IS WG members discussed the following data element: Alcohol Use and Substance Use.
  - Sarah noted the applicability of both LOINC and SNOMED-CT data standards for the Alcohol Use data element.



- Steven Lane explained that data elements can include reference to two data standards and agreed with the inclusion of both LOINC and SNOMED-CT.
- Steven Lane inquired about ONC's rationale in their reconciliation of USCDI submissions rather than bringing forward all overlapping suggestions. Al explained that ONC works to resolve and reconcile similar and overlapping submissions to obtain a single data element for review. Al provided an example of how ONC reconciled alcohol use related submissions.
- Ricky agreed with Al's approach and explained the rationale for creating the smoking status profile and application of subsequent standards development to the alcohol use data element.
- Shelly explained that the substance use data element includes multiple types of substances and inquired if it is beneficial to reference RxNorm in this data element. Shelly noted that the use of RxNorm is emerging for substance use.
- Sarah commented that alcohol use and substance use are not aligned with Gravity's scope of work.
- Bryant noted that ASTHO, the Washington State Department of Health, and the University of Washington are conducting an evaluation of smoking status data elements in electronic medical record systems and health insurance rate reduction categories to determine how smoking status is used and if there is consistency across data sets. Findings can be applied to alcohol status and substance use.
- Hans inquired if the IS WG foresees these data elements as an area requiring work beyond the addition of appropriate coded value sets and existing guidance materials. Sarah noted that these data elements are far more developed than SDOH data elements, so it is appropriate to move forward by identifying appropriate coded value sets.
- Steven Eichner noted the growing use of cannabis in the medical field and inquired if cannabis use falls under the substance use data element. Steven Lane noted that cannabis can be used both recreationally and therapeutically. Al explained that ONC has crafted substance use definitions in a manner to classify substance use for medical and non-medical purposes. Recreational cannabis use is classified as non-medical substance use.
- Steven Eichner suggested an amendment to the substance use data element to highlight the importance of medical/non-medical usage in the data element definition.
- Al will incorporate USCDI data element definitions in the spreadsheet for IS WG reference.
- Shelly inquired if the recreational use of cannabis will be documented with available codes in RxNorm or SNOMED. Al noted that this data element is specific to assessment data.
  - IS WG members can suggest data element naming revisions if desired to increase clarity of the intended data element.
- Steven Eichner inquired about the differentiation of self-prescribed medications
  - Shelly explained, through the example of prescribed alcohol use, that substances can be categorized as medical or non-medical substance use dependent on the situation.
- IS WG members agreed to move forward with an initial recommendation of alcohol use and substance use incorporation in USCDI v4 with the assumption of further IS WG discussion and incorporation of their comments.

## IS Workplan and Timeline

Sarah reviewed the upcoming IS WG meeting schedule. To allow for final recommendation review at the April HITAC meeting, IS WG comments should be finalized by the middle to end of March.



Sarah encouraged IS WG members to suggest new data elements for inclusion into USCDI v4 at the bottom of the disposition google document.

## **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 soon. Please remember to tag "Everyone" when using the Zoom chat if you want all to see your message.

Raj Dash (College of American Pathologists): Looks like it is on pg 12, just not in the summary

Pooja Babbrah: Thank you Shelly

Chetan Sharma: Can you please share the link to the spreadsheet?

Clem McDonald: Apologize for being late. Conflict with NLM BOR meeting, and will have to go back to the NLM meeting at 11:15

Mike Berry (ONC): @Chetan Sharma - The link to the Google spreadsheet is a workgroup working document and provided to the workgroup members only. It is publicly displayed during these public meetings.

Chetan Sharma: @Mike: Thanks for the clarification.

Hans Buitendijk: So the intent for USCDI is more "Code that identifies the allergy or intolerance" than "Specific substance or pharmaceutical product considered to be responsible for event"

Deven McGraw: Does pharmacogenetics (or the results) fit into the allergy/intolerances category?

Steven Lane: @Deven - Are you referring to potential/likely but never manifest intolerances that are predicted based on genetic testing?

Grace Cordovano: @Deven, thanks for raising this point.

Pooja Babbrah: @deven @shelly - I agree with the ADE recommendation for PGx results

Steven Lane: I think that the data should differentiate between potential and manifest ADE/intolerances or contraindications.

Grace Cordovano: "The current "gold standard" for pharmacogenomics implementation includes entering pharmacogenomic test results into EHRs as discrete results with associated clinical decision support (CDS) alerts that will fire at the point of prescribing, similar to drug allergy alerts."

Grace Cordovano: From: <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8706275/>

Clem McDonald: Sorry. I have to go back to NLM board of regents meeting. The discussion has been clarifying

Albert Taylor: @Shelly your last example is a good candidate to add to the Interoperability Standards Advisory to expand the use cases with associated standards.



Deven McGraw: Thanks, Ricky.

Grace Cordovano: Please see figure 1 (<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC8706275/>) which illustrates a workflow and Decision-making process for documenting pharmacogenomic test results into electronic health records. If PGx results are indicative of a severe ADE, workflow is recommending to document in EHR allergy field. Happy to discuss offline.

Raj Dash (College of American Pathologists): SNOMED has a distinct advantage in being able to be machine classifiable within a hierarchy of concepts (ontology). Wherever we need this "feature" we should consider use of SNOMED

Sarah DeSilvey: Thank you, Raj

Pooja Babbrah: @grace - thanks for the link. Would love to chat more offline about this

Deven McGraw: Pooja, I'm interested in that discussion as well 😊 would love to join if you're willing.

Pooja Babbrah: @devevn - of course!

Hans Buitendijk: As this is the first discussion, are we considering the "approve" in column H final or draft? Particularly as the "approve" for Encounter Identifier has very firm support, while others may possibly receive follow-up feedback.

Grace Cordovano: +1 Shelly

## **QUESTIONS AND COMMENTS RECEIVED VIA EMAIL**

No comments were received via email.

## **Resources**

[IS WG Webpage](#)

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

[HITAC Calendar Webpage](#)

## **Adjournment**

Mike reminded attendees that the HITAC is meeting tomorrow, Feb 8, and adjourned the IS WG at 11:55 AM.