



Office of the National Coordinator  
for Health Information Technology

# Data Standards & Partnerships for Catalyzing Information Into Action: CDC Health Innovation Summit

# Office of the National Coordinator for Health IT

- **Founded in 2004 by executive order, established in statute in 2009**
- **ONC is charged with formulating the federal government's health IT strategy to advance national goals for better and safer health care through an interoperable nationwide health IT infrastructure**



# ONC Priorities



## Build the digital foundation

- Data standards
- Health IT gaps
- HHS Health IT Alignment Policy

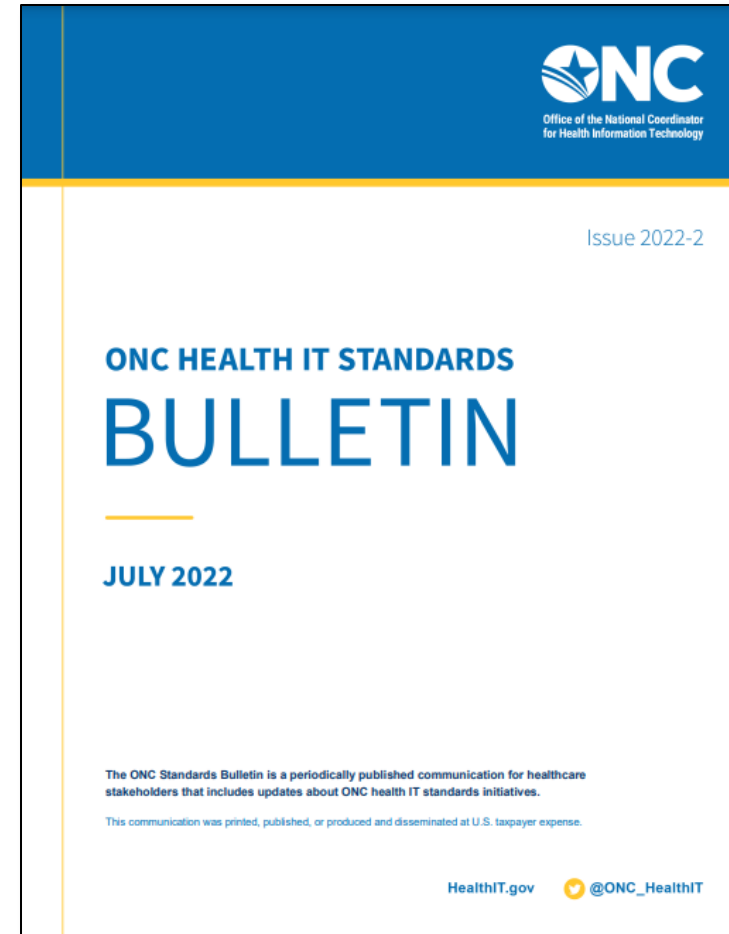
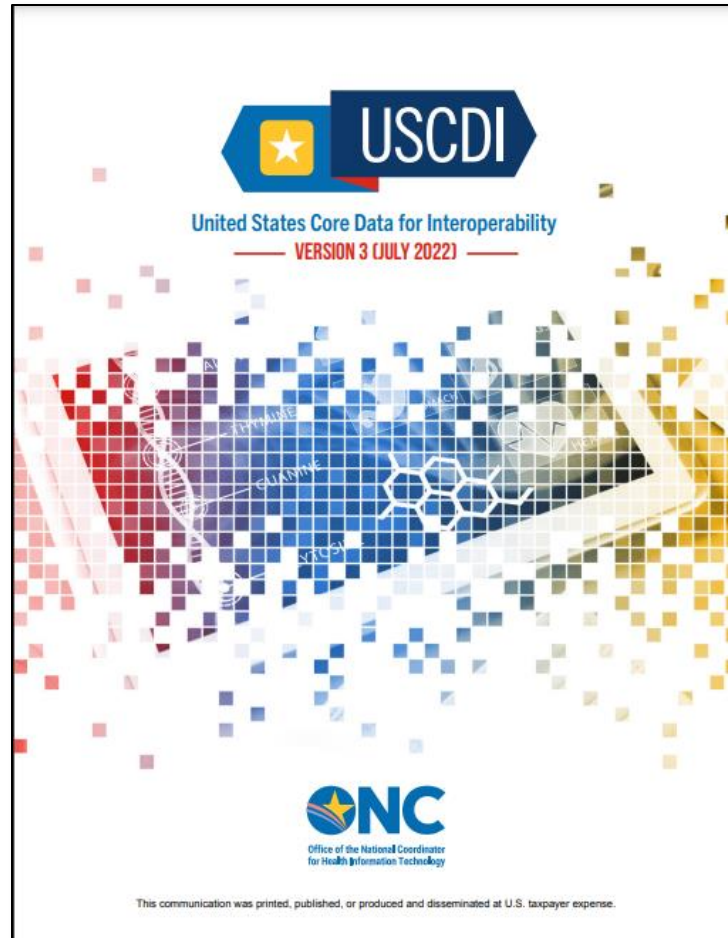
## Make interoperability easy

- TEFCA
- Application programming interfaces (APIs)
- Promote information sharing and enforcing information blocking rules

## Ensure proper use of digital information and tools

- Health-equity-by-design principles for data capture and use
- Transparency in areas such as algorithm use and safety

# United States Core Data for Interoperability (USCDI)



# USCDI is the minimum data set for key health IT functions, interoperability, and patient access



## Health IT functions requiring USCDI

USCDI is a required component for following 2015 Edition Cures Update Certification Criteria	
Standardized API for patient and population services (§170.315(g)(10))	Update to USCDI by December 31, 2022 (replacing Common Clinical Data Set)
Transitions of care (§170.315(b)(1))	
Clinical information reconciliation and incorporation (§170.315(b)(2))	
View, download, and transmit to 3rd party (§170.315(e)(1))	
Transmission to public health agencies –electronic case reporting (§170.315(f)(5))	
Consolidated CDA creation performance (§170.315(g)(6))	
Application access –all data request (§170.315(g)(9))	

## CMS patient access rule requires USCDI

**Medicare and Medicaid Programs; Patient Protection and Affordable Care Act; Interoperability and Patient Access for Medicare Advantage Organizations and Medicaid Managed Care Plans, State Medicaid Agencies, CHIP Agencies and CHIP Managed Care Entities, Issuers of Qualified Health Plans on the Federally-Facilitated Exchanges, and Health Care Providers**

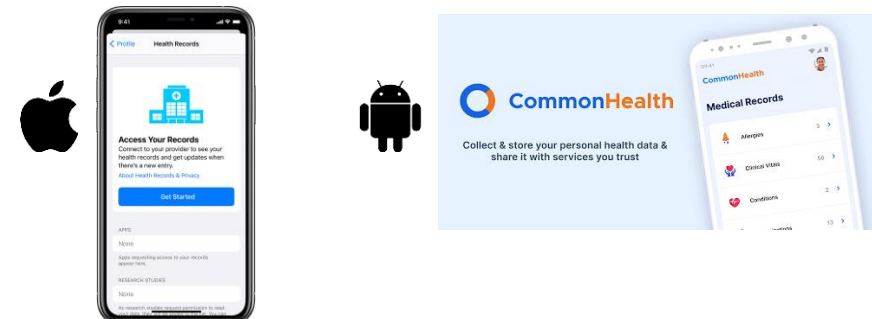
**AGENCY:** Centers for Medicare & Medicaid Services (CMS), HHS.

**ACTION:** Final rule.

## Interoperability networks putting USCDI to use



## Mobile apps leveraging on USCDI





## 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 Number
- Payer Identifier

## Health Status Assessments

- 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 Organization
- Author Time Stamp

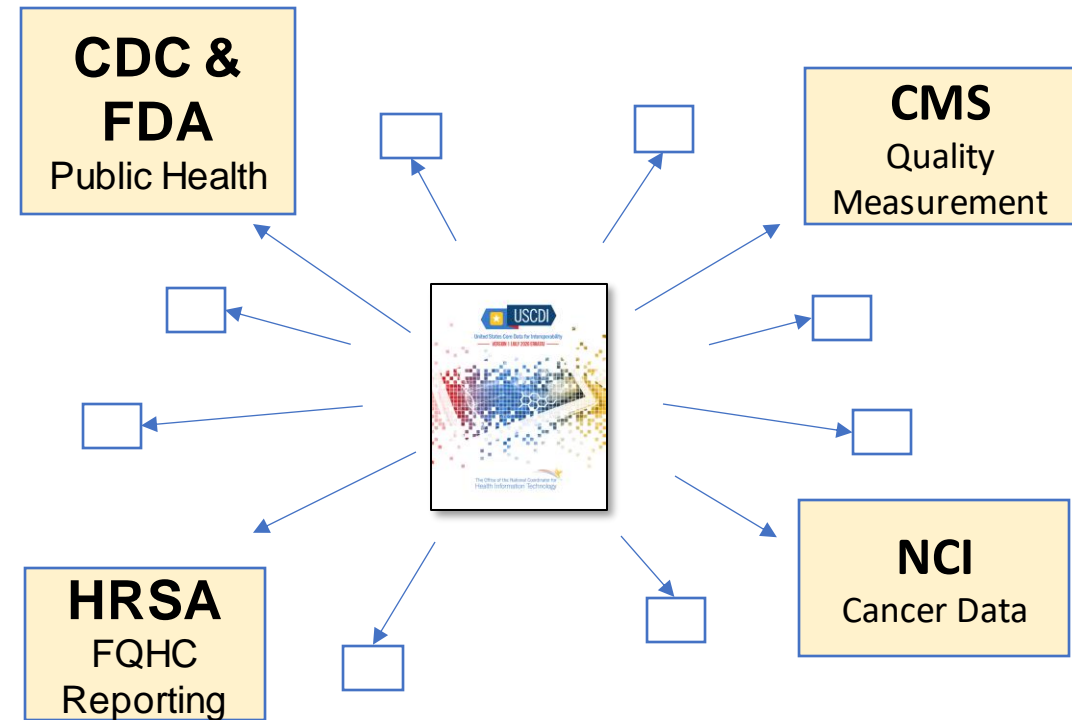
## Vital Signs

- Systolic Blood Pressure
- Diastolic Blood Pressure
- Average Blood Pressure +
- Heart Rate
- Respiratory Rate
- Body Temperature
- Body Height
- Body Weight
- Pulse Oximetry
- Inhaled Oxygen Concentration
- BMI Percentile (2 - 20 years)
- Weight-for-length Percentile (Birth - 24 Months)
- Head Occipital-frontal Circumference Percentile (Birth - 36 Months)



# USCDI+: Extending Beyond the USCDI

- Unique agency or program-specific data systems and requirements sometimes not fully met by USCDI
- ONC USCDI+ initiative helps federal partners build on USCDI to support specific program needs
- Allows ONC to better serve federal partners, assures that extensions build from the same foundation, and creates the opportunity for aligning similar data needs across agency programs







# USCDI+ for Public Health: New Platform Now LIVE!

## Collaboration among CDC, ONC, STLTs, and PH SME Input

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### United States Core Data for Interoperability (USCDI)

USCDI+ is a service that ONC provides to federal partners who have a need to establish, harmonize, and beyond the core data in the USCDI in order to meet agency-specific programmatic requirements. Learn more about USCDI+, ask questions, technical issues, or need to request access for a colleague, please email [USCDI.Plus@hhs.gov](mailto:USCDI.Plus@hhs.gov)

A USCDI+ "Domain" is a common set of data elements required for interoperability for multiple scenarios, policies and/or guidelines. (Example: Public Health)

A USCDI+ "Use Case" is a common set of data elements required to support a specific set of functions within a scenario. (Example: Reporting/Situational Awareness)

A USCDI+ "Data Class" is an aggregation of various Data Elements by a common scenario or use case. (Example: Reporting/Situational Awareness)

A USCDI+ "Data Element" is the most granular level at which a piece of data is exchanged. (Example: Facility Name)

[New Data Element & Class \(ONDEC\) Submission System](#)

#### USCDI+ Domains

Maternal Health

Public Health

Quality

Cancer

View All

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USCDI data is maintained in ONDEC. This site displays USCDI+ data. USCDI+ will update USCDI references on a regular basis; however, complete information about data classes and data elements in USCDI are located at [healthit.gov/uscdi](http://healthit.gov/uscdi).

Data Type	Created	Updated	State
USCDI+ Category	3mo ago	22d ago	Open

### Public Health

ONC and CDC are establishing the USCDI+ for public health to address core data and interoperability for public health needs beyond the scope of USCDI. USCDI+ for public health intends to establish a list of data elements that support public health transactions, use cases and related implementation guides for public health authorities across jurisdictions.

Use Cases Details Comments

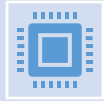
Use Cases in Category

Name	Use Case Description
Case Reporting	Crucial data elements received by public health from clinical providers in order to conduct a case investigation and follow-up with a patient.
Laboratory Data Exchange	The exchange of reportable laboratory order and result data necessary for the investigation and treatment of reportable diseases. Includes electronic ordering and reporting of suspect cases, reporting point of care and at-home testing results to public health, and other more traditional lab data exchange with immunization & vital records systems.
Resource Reporting & Situational Awareness	Data exchanged between public health and hospital/health systems to track resources available across a region to inform public health guidance and decision making. Examples may include tracking hospital bed capacity, supply of PPE, and availability of staff to understand where additional resources are necessary during emergency response.
Risk Behaviors and Drivers of Inequity	Crucial data elements on risks and drivers of inequity for leading health conditions, such as physical activity as a vital sign, vulnerability indices and systematic race and ethnicity reporting, and medical outcomes of consequence.

Rows 1 - 4 of 4



# ONC and HRSA Collaboration Objectives – UDS+ Modernization



Design, Test, Pilot, and Deploy HRSA's FHIR infrastructure for UDS+ Reporting



Establish a USCDI+ Quality dataset to support UDS reporting



Develop and Publish a UDS+ Reporting Implementation Guide



Identify and incorporate other data quality and warehousing needs across HRSA's organizations to ensure consistency and alignment



Encourage voluntary participation by health centers and key vendors in 2023 reporting cycle, then transition to mandatory adoption

# UDS Patient Level Submission (UDS+) Modernization

## UDS+ is...

- Transition from survey data to patient-level submission for 1,400+ FQHCs and look-alikes
- Beginning with the 2023 UDS, HRSA will accept patient-level report data.

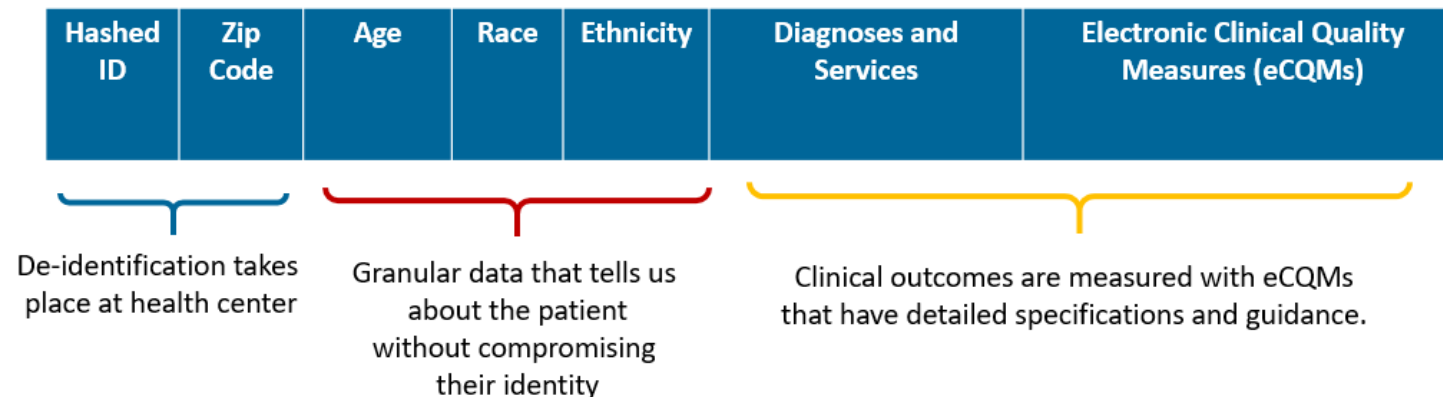
HRSA will accept UDS+ data via:

- Fast Healthcare Interoperability Resources (FHIR)

## UDS+ does not...

- Collect full copies of data directly from patients' electronic medical records
- Collect patient identifiers

**For more information, visit:** [Uniform Data System \(UDS\) Modernization Initiative](#)



# HRSA UDS+ 2023 Reporting Participation

Health Center UDS+ Submissions Forecast			
CY2023 Submission Options	Definition	Forecasted Percentage of Health Centers	EHR and Population Health Vendors
<b>Submit UDS+ voluntarily</b>	UDS+ submission along with EHBs via both UDS legacy and UDS+	53%	Athena, i2i, Azara, Relevant, NextGen, eCW
<b>Submit only using EHB (non-UDS+)</b>	Intends to only submit EHB via UDS legacy	10%	Non-certified vendors
<b>Uncertain</b>	Vendors have not indicated likely submission option	37%	Epic, Cerner, Allscripts, Greenway



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**Health IT Feedback Form:**

<https://www.healthit.gov/form/healthit-feedback-form>



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