21ST CENTURY CURES ACT: INTEROPERABILITY, INFORMATION BLOCKING, AND THE ONC HEALTH IT CERTIFICATION PROGRAM PROPOSED RULE



The U.S. Core Data for Interoperability Laying the Foundation for Broader Data Sharing to Support Patient Care

MOVING BEYOND THE COMMON CLINICAL DATA SET

As the country moves forward towards value-based care, data beyond those included in the Common Clinical Data Set (CCDS) is needed. We propose to remove the CCDS definition and its references from the 2015 Edition and replace it with the United States Core Data for Interoperability (USCDI) standard. This will increase the minimum baseline of data classes that must be commonly available for interoperable exchange.

A SET OF DATA CLASSES TO SUPPORT NATIONWIDE INTEROPERABILITY

The USCDI Version 1 (USCDI v1) is proposed as a standard (§ 170.213). It reflects the same data classes referenced by the CCDS definition and includes new required data classes and data elements, noted below.

If adopted, health IT developers will need to update their certified health IT to support the USCDI for all certification criteria affected by this change.

USCDI v1

Assessment and **Plan of Treatment**









Care Team Members 🚜 🚜



Clinical Notes *NEW

- Consultation Note
- Discharge Summary Note
- History & Physical
- Imaging Narrative
- Laboratory Report Narrative
- Pathology Report Narrative
- Procedure Note
- Progress Note

Goals

Patient Goals



Health Concerns



Immunizations



Laboratory

- Values/Results

Medications

- Medications
- Medication Allergies

Patient Demographics

- First Name
- Date of Birth Race
- Last Name
- Previous Name
 Ethnicity Preferred
- Middle Name (including middle initial)
- Suffix
- Birth Sex

Language

- Address *NEW
- Phone Number *NEW

Problems

Procedures



Provenance *NEW

- Author Time Stamp Author
- Author Organization

Smoking Status





Vital Signs

- Diastolic **Blood Pressure**
- Systolic Blood Pressure
- Body Height
- Body Weight
- Heart Rate
- Respiratory rate
- Body Temperature
- Pulse oximetry
- Inhaled oxygen concentration



- Pediatric Vital Signs *NEW
- BMI percentile per age and sex for youth 2-20
 - Weight for age per length and sex
- Occipital-frontal circumference for children < 3 years old

New Data Classes and Elements



Provenance

Clinical Notes

Clinicians rely on the free text portion of clinical notes for interoperable exchange.

and reliability of data being exchanged.

The provenance of data (e.g., when and who created

the data) is needed to improve the trustworthiness



Pediatric Vital Signs

Including addresses and phone numbers provides more information about patients and is consistent with the patient matching data elements in the 2015 Edition transitions of care certification criterion.

Inclusion of pediatric vital sign data elements in USCDI aligns with the provisions of the Cures Act related to health IT to support the health care of children.



USCDI Standard Annual Update Schedule

ONC intends to establish and follow a predictable, transparent, and collaborative process to expand the USCDI, including providing stakeholders with the opportunity to comment on the USCDI's expansion.

Please visit www.healthIT.gov/USCDI for more detail about the process by which data classes are reviewed and accepted into the USCDI.

This informational resource describes select proposals in the proposed rule but is not an official statement of any policy. Please refer to the official version of the proposed rule as published in the Federal Register.