

March 28th, 2024

Micky Tripathi, PhD, MPP
Office of National Coordinator for Health Information Technology
U.S. Department of Health and Human Services
330 C Street SW, 7th Floor, Washington, DC 20201

Dear Dr. Tripathi,

AOTA is the national professional association representing the interests of more than 230,000 occupational therapists, students of occupational therapy (OT), and occupational therapy assistants. Occupational therapy defines “occupations” as any meaningful or purposeful activity, which can describe activities of daily living (ADLs), instrumental activities of daily living (IADLs), work, school, hobbies, and social participation. The practice of occupational therapy is person-centered, evidence-based, and enables people of all ages to live life to its fullest by promoting health and purposeful activity. AOTA believes that understanding a person’s whole health, including function, environment, and context are crucial.

Data Class: Medications

AOTA supports the recommendation from the Centers for Medicare and Medicaid Services (CMS) and the Centers of Disease Control (CDC) to add the following data elements under Medications:

- Medication Prescribed Code (Level 0)
- Medication Administration (Level 2)
- Discharge Medications (Level 0)
- Medication Administration Route (Level 2)
- Medication Administration Dose (Level 0)
- Date Medication Administered (Level 0)

Including the requested medication data elements provide vital information to practitioners across the healthcare continuum. Medications, including the medication dose and administration route, information can be critical in developing a comprehensive plan of care. This information provides helpful data that impacts how an occupational therapy practitioner (OTP) may interpret a client’s physiological response to certain interventions.

OTPs also use this information to address medication management. Medication management refers to the instrumental activity of daily living (IADL) of taking medications as prescribed¹. Occupational therapy addresses clients’ ability to engage in daily activities, including taking medication as prescribed with the distinct contribution of addressing actual performance of these management activities in the context of the client’s daily life. In partnership with the client and the interprofessional team, OTPs develop client-centered, evidence-based plans to improve clients’ performance of medication management.

¹ [Occupational Therapy's Role in Medication Management | The American Journal of Occupational Therapy | American Occupational Therapy Association \(aota.org\)](#)

Data Class: Health Status Assessment

AOTA encourages the ONC to **remove disability status from the health status data class and add the disability status to the patient demographic data class**. We believe that including disability status in the same data class as functional and mental/cognitive status could cause unnecessary confusion. Including disability status in the patient demographic data class provides a consistent way to capture individuals receiving disability benefits.

We also encourage the ONC to **remove the following elements from Level 0**:

- Self-care
- Mobility
- Domestic Life/ Instrumental Activities of Daily Living (IADLs)
- HHS Disability Status - Activities of Daily Living
- HHS Disability Status – Cognitive
- HHS Disability Status – Hearing
- HHS Disability Status – Independence
- HHS Disability Status – Mobility
- HHS Disability Status – Vision
- Mental Status Evaluation

The data elements listed above were included in the USCDI's 3rd and 4th version. Functional status can thoroughly capture data on self-care, including IADLs, and mobility. Clinical characteristics in the mental/cognitive status can provide robust information about a client's mental status, negating the need for the mental status evaluation in Level 0.

AOTA reasserts that disability status should be moved to the patient demographics and standardized as an element that represents if a client receives Social Security Disability Insurance (SSDI) disability benefits.

AOTA looks forward to a continuing dialogue with the Office of National Coordinator for Health Information Technology to advance healthcare interoperability.

Sincerely,



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