

CodeX Recommendations to United States Core Data for Interoperability (USCDI) V5

April 12, 2024

<https://www.healthit.gov/isa/united-states-core-data-interoperability-uscdi-draft-uscdi-v5>

The following comments have been submitted on behalf of the **CodeX HL7 FHIR Accelerator Program's Community Members.**

CodeX is a **member-driven HL7 FHIR Accelerator** hosting a growing community working together to enable FHIR-based interoperability that drives substantial improvements around the most important challenges and opportunities in patient health focusing on clinical specialties and real-world implementation.

CodeX **brings over 60 organizations together** to provide an open, transparent, and non-biased **community for standards development and implementation.**

We are happy to provide comments through this process and **welcome the opportunity to work with ONC** on USCDI to enhance support for clinical specialties in HL7 FHIR.

Further information can be found at codex.hl7.org.

Questions and clarifications can be obtained through pmo@hl7codex.org.



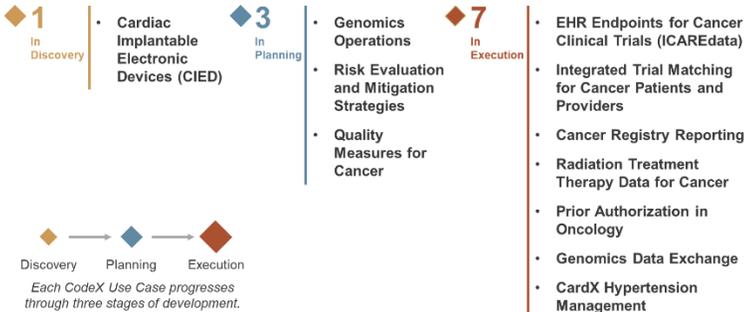
Oncology Domain
mCODE™

Cardiovascular Domain
CardX

Genomics Domain
GenomeX

Use Cases

The CodeX framework spurs community-driven use case development and demonstration, piloted in-the-field by stakeholders expected to benefit in the future.



CodeX Community Recommendations

The following recommendations are being submitted on behalf of members of the CodeX/mCODE community in response to the Office of the National Coordinator for Health Information Technology's (ONC) request for new data elements and comments regarding the Draft USCDI v5.

CodeX has consolidated feedback from its community members and are pleased to offer these recommendations below on data elements and their associated ONC class determinations that we believe are essential for the care of patients with cancer. Our community recognizes the significance of this project and its potential impact on healthcare, and we are keen to contribute to its success. Therefore, we strongly suggest that these recommendations be considered for the final version of USCDI v5.

Our recommendations have been arranged in ascending order of complexity.

#	Recommendation	Data Class	Data Element or Comment	Rationale and / or references	CodeX Members in Support
1	Support v5 draft proposition	<i>Patient Demographics / Information</i>	<i>Pronoun</i>	<p>Rationale: Pronoun will be desired for inclusiveness and ensure an affirming care experience for individuals.</p> <p>References: https://ascopost.com/news/february-2023/new-study-calls-for-lgbtqia-community-inclusion-in-stem-cell-donor-recruitment/</p>	CIBMTR, NCQA
2	Support v5 draft proposition	<i>Patient Demographics / Information</i>	<i>Name to Use</i>	<p>Rationale: Name to Use will be desired for inclusiveness</p> <p>References: https://ascopost.com/news/february-2023/new-study-calls-for-lgbtqia-community-inclusion-in-stem-cell-donor-recruitment/</p>	CIBMTR, NCQA
3	Support v5 draft proposition	<i>Medications</i>	<i>Route</i>	<p>Rationale: Route provides more specificity to the medication data critical to patient care and oncology quality measure initiatives.</p> <p>References: https://www.astctjournal.org/article/S1083-8791(16)30249-X/fulltext</p>	ASCO, ASTRO, Telligen, Evernorth, CDISC

#	Recommendation	Data Class	Data Element or Comment	Rationale and / or references	CodeX Members in Support
4	Change	Orders	ASCO recommends to group orders based on their corresponding data classes as each order differs in its information model and terminology bindings.	Rationale: Grouping them according to their respective data classes helps ensure that each order is accurately categorized, and all relevant information is captured correctly.	ASCO, ASTRO, Telligen, Evernorth
5	Change	Orders	ASCO recommends explicitly adding <u>medications</u> as a type of order in ONC's listing of order types. The current wording omits medications from the examples, i.e., <i>Examples include but are not limited to diagnostic imaging, laboratory tests, interventions, referrals, and consultations, and do-not-resuscitate.</i>	Rationale: Medications are a critical component for care that should be listed as an example for clarity.	ASCO, ASTRO, Telligen, Evernorth
6	Support v5 proposed change	Procedure	Performance Time	Rationale: We concur with the commenters who have requested this element be accommodating of a starting and ending datetime stamp. Many procedures will have duration and resource management and billing shall depending on accurate capture of.	ASCO, ASTRO, Telligen, Evernorth
7	Add	Medications	ASCO recommends adding the following three data elements to the Medications data class.	Rationale: These elements will provide granularity to the medication data critical to patient care and oncology quality measure initiatives.	ASCO, ASTRO, Telligen, Evernorth
			A. Dose Frequency	Rationale: The frequency of medication dosage cannot be overstated to achieve the desired therapeutic efficacy and avoid any undesired effects. It is one of the essential factors that determines the effectiveness of treatment.	ASCO, ASTRO, Telligen, Evernorth, CDISC
			B. Lot Number	Rationale: The lot number is a unique identifier that helps with quality control, traceability, and regulatory compliance throughout the pharmaceutical supply chain.	ASCO, ASTRO, Telligen, Evernorth, CDISC

#	Recommendation	Data Class	Data Element or Comment	Rationale and / or references	CodeX Members in Support
8	Add	Procedure	ASTRO and Telligent recommend the following comments and additions to the Procedure data class.		ASCO, ASTRO, Telligent, Evernorth
			A. Procedure Status	Rationale: This data element is essential for specifying the current state of a procedure including negation if it is not done.	ASCO, ASTRO, Telligent, Evernorth
			B. Procedure Status Reason	Rationale: This data element is a necessary supplement when procedures are not performed for medical or other reasons.	ASCO, ASTRO, Telligent, Evernorth
			C. Procedure Intent	Rationale: We concur with the commenters who have requested this element be included in the class. Within the oncology realm, the intent of the procedure is routine.	ASCO, ASTRO, Telligent, Evernorth