

April 11, 2023

Micky Tripathi, Ph.D., M.P.P.  
National Coordinator for Health Information Technology  
U.S. Department of Health and Human Services  
330 C St SW  
Washington, DC 20416

Dear Dr. Tripathi,

On behalf of Medical Information Technology, Inc. (MEDITECH), I am pleased to offer comments on the *United States Core Data for Interoperability (USCDI) Version 5*.

MEDITECH empowers healthcare organizations around the globe to expand their vision of what's possible with Expanse, the intelligent EHR platform. Expanse answers the demands of an overburdened workforce: personalized workflows, interoperable systems, and innovative AI applications, all working together to drive better outcomes.

We support the continued standardization efforts from ONC, and are in support of the majority of the proposed changes for USCDI v5. We have a few specific comments below encouraging the development of data classes and elements that align with current industry standards.

## Laboratory

**Test Kit Unique Device Identifier:** We do not support the inclusion of this to USCDI v5. The data element is not captured in a standard field in the HL7 v2 Lab messages. The data also adds operational burden as there is limited collection of this data in EHRs or laboratory systems.

We agree with the EHRA recommendation that the ONC should work with lab interoperability work groups, including the FDA and SHIELD, and LIS stakeholders, to identify and mitigate infrastructure gaps that limit the capture and transmission of the production identifier components of test kit and instrument identifiers in currently non-certified health Information technology, such as LIS.

Again we want to stress that this element is not mature enough to be included at this time.

## Medications

**Route:** We believe Route is a fundamental data element and have no concerns with the inclusion of this data element.

## Observations

**Advanced Directives Observations:** This data is typically not captured as a discrete data element, but rather as scanned documents added to the patient record. We also find that generally these are not consistently captured throughout the vendor community. Because of this we don't feel that this should be included at this time.

## **Orders**

**Orders:** We generally support this new Data Class and Data Element, though the definition of orders is very broad and may lead to confusion on what should and shouldn't be included without further guidance.

## **Patient Demographics/Information**

**Interpreter Needed:** We support the inclusion of this data element to the USCDI as a Yes/No response. We would recommend that there be reference to the Patient Preferred Language field for the language that is required for the interpreter.

## **Additional Considerations**

**Comment related to Laboratory Data:** MEDITECH has been engaged with the HHS sponsored National Red Blood Cell Antibody Exchange (RBCAX) effort related to the exchange of patient blood group, type, antibody/antigen, and transfusion history. This information is critically important to patient care and safety and we recommend ONC consider these data elements on future USCDI versions, as well as with the USCDI+ initiative. To note, blood product data is included under the Biologically Derived Products Data Class which is currently being discussed under [Level 2](#).

**Comment related to Biologically Derived Product:** MEDITECH has been engaged with the HHS sponsored National Red Blood Cell Antibody Exchange (RBCAX) effort related to the exchange of data regarding blood transfusions and adverse reactions. This information is important to patient care and safety and we recommend ONC consider including the Biologically Derived Products(BPD) Data Class, currently being discussed under [Level 2](#).

Thank you for your time and consideration. We look forward to the final version.