

National Committee on Vital and Health Statistics Advising the HHS Secretary on National Health Information Policy

### Health Terminologies and Vocabularies Project:

- 1. Environmental Scan,
- 2. Expert Roundtable Summary,
- 3. Preliminary themes for recommendations, and
- 4. Key messages for Report to Congress

NCVHS Full Committee Meeting September 13, 2018 Previous NCVHS Key Work Products on Terminologies and Vocabularies



- 1998 Initial guiding principles for the selection of standards to be adopted by the Secretary
- 2000 Report: Uniform Data Standards for Patient Medical Record Information as Required by the Administrative Simplification Provisions of the Health Insurance Portability and Accountability Act of 1996
- 2002 Letter to the Secretary: Recommendations for the First Set of PMRI Standards
- 2003 Letter to the Secretary: Recommendations for the Second Set of PMRI Standards
- 2003 Letter to the Secretary: ICD-10 Recommendations

### Health Terminologies and Vocabulary Project Goals

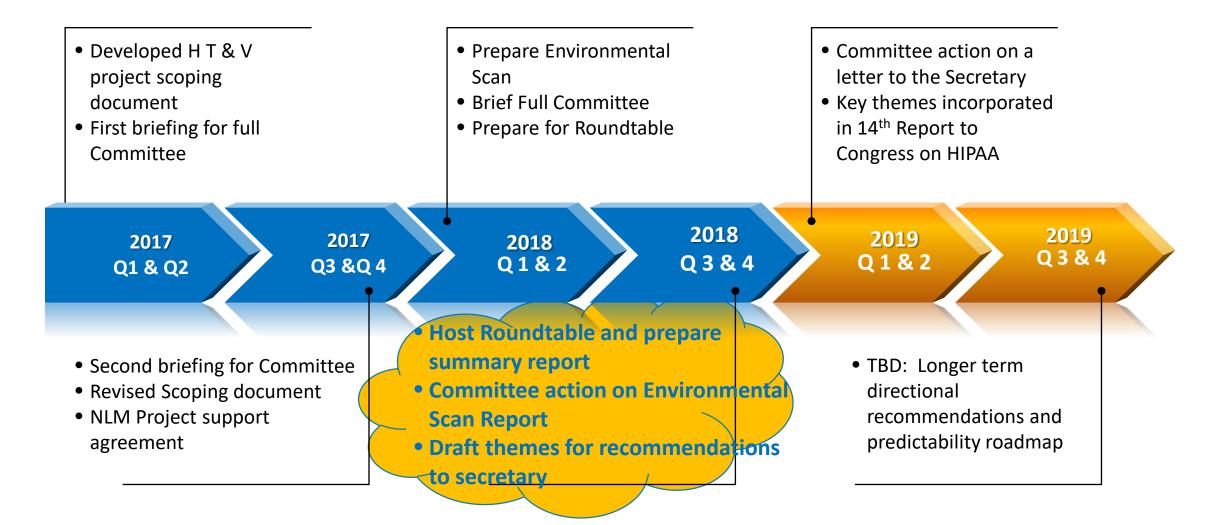


A contemporary look at the health terminology and vocabulary landscape in order to advise the Secretary regarding:

- 1. The changing environment and implications for timing and approach to health terminology and vocabulary standards adoption,
- 2. Needs, opportunities, and problems with development, dissemination, maintenance, and adoption of health terminology and vocabulary standards,
- 3. Actions that HHS might take to improve development, dissemination, maintenance, and adoption of standards.

## The Health T & V Project





#### Health Terminologies and Vocabularies Environmental Scan



- Public recognition and thanks to NLM's Vivian Auld and Suzie Roy for leading scan development on our behalf
- Version 4.0, two rounds of input from Committee and Expert Roundtable
- Three major sections:
  - The world of health terminologies and vocabularies
  - The issues
  - Supporting detail on named standards and additional terminologies; key NCVHS reports and recommendations
- Ready for action by Full Committee

#### Health Terminologies and Vocabularies Environmental Scan, V 4.0



#### Introduction

- Purpose and Scope
- Definitions
- Background
  - HIPAA
  - UMLS
  - Terminology and Vocabulary Milestones
  - Key organizations

# Selection of Standards for Adoption

• Evolving Levers for Standards Adoption

#### **Health Terminology Standards**

- Named Standards
- Additional Standards
- Gaps in Content
- Potential Solutions to Gaps in Coordination Efforts

#### Health Terminologies and Vocabularies Environmental Scan, V 4.0



# Governance and Coordination of Standards

- Governance and coordination of individual vocabularies and terminologies
- Cross-standard governance and coordination
- Current governance and coordination strengths and weaknesses

# Maintenance and Dissemination of Standards

- Overview of approaches and services
- Support for users

• Current maintenance and dissemination strengths and weaknesses

#### Adoption of Standards

- ICD-10-CM & ICD-10-PCS as an illustrative case study
- Lifecycle terminology and vocabulary standards management
- Current adoption strengths and weaknesses

# Summary of Themes for Evaluation and Improvement

## Summary of Themes for Evaluation and Improvement



- **1. Build consensus on the direction forward**
- 2. Expand understanding that redundant health terminologies present a barrier to interoperability
- 3. Mitigate the consequences of redundant terminology and vocabulary efforts
- 4. Resource the maintenance and dissemination of named standards
- 5. Improve governance and coordination across named terminology and vocabulary standards

### Health Terminologies and Vocabularies Environmental Scan, V 4.0



Appendix 1: Named Health Terminology Standards Appendix 2: Additional Health Terminologies

Appendix 3: Guiding Principles for Selecting PMRI Standards

Appendix 4: NCVHS Recommendation from the Report to the Secretary of HHS on Uniform Data Standards for Patient Medical Record Information

Name
Purpose
Usage
Named Standard?
Ownership
Development
Principles
Coverage
Development &
Maintenance
Requesting New
Content
Release &
Dissemination
Overlap
Harmonizations &
Collaborations



- 1. Reach shared understanding on the current state as described in the Environmental Scan Report
- 2. Consider areas for near term improvement in maintenance, dissemination and adoption of named code sets.
- 3. Discuss opportunities for improved governance and coordination across terminology and vocabulary developers and their stakeholders.
- 4. Identify top priority gaps in the US health terminology and vocabulary coverage.
- 5. Envision a roadmap for introducing improvements and updates to standards.

## Expert Roundtable Agenda



#### Tuesday

- Welcome
  - Our charge and challenge
  - o Introductions
- Review Environmental Scan
  - o V.2 Overview
  - o Feedback
- Maintenance and dissemination
- Adoption and implementation
- Canada's approach
- Governance and coordination
- Recap of what we learned today
- Public comment

#### Wednesday

- Gaps in named standards
  - o Process
- Preview of ICD-11
- Road mapping Standards
- Recap of day 1 & day 2 insights
- Next steps in NCVHS' T/V project
- Public Comment

#### Roundtable Output: Areas of Opportunity



#### Near term

Principles, policies and practices under control of Secretary (to be addressed in Letter(s) to Secretary in 2019/20) Mid term

Deliberate and explicit pathway to convergence of clinical and administrative standards requiring publicprivate cooperation.

#### Longer term

Technology and research to realize terminology and vocabulary-based health data ecosystem

Implication for NCVHS: Terminologies and Vocabularies must be continuing focus area



- 1. Update\* Principles to guide adoption of health terminologies and vocabularies.
  - Explicit statements of the purpose, boundaries, and guidelines for use
  - Importance of a community of practice to define scope of a content area
  - Content development using accepted practices
  - Evaluation of how well the terminology performs for the stated purposes, its usability, currency and cost/benefit
  - Adoption process and timing suitable for terminology and vocabulary standards

\*These will update the 1998 Principles that focused on <u>initial</u> selection of HIPAA Code Set Standards

### Near Term Opportunities



- 2. Develop Principles for updates to health terminologies and vocabularies, including
  - Curation as a continuous process
    - Backward compatibility
    - Transparency (adds, changes, deletions)
    - Updates based on accepted practices
  - Published cadence reflecting explicit cost/benefit
    - Eliminate version updates from regulatory process, starting with ICD
  - Dissemination
    - Electronic, including implementation and mapping tools
    - Minimize cost and licensing barriers

### Near Term Opportunities



#### 3. Scope a project to evaluate ICD-11:

- Review the process NCVHS used to hold hearings and make recommendations on ICD-10, including Committee products
- Include plan to assess the fitness for US adoption of ICD-11 for mortality and morbidity
- Outline how the adoption principles in #1 will guide the path
- Evaluate the purpose and return on investment of a US clinical modification for ICD-11
- Study the design and utility of the WHO's International Classification of Health Interventions (ICHI) in comparison to ICD-PCS

### Mid Term Opportunities



- 1. Prepare a strategic plan for terminologies and vocabularies
  - Translate why this is important to every American
  - Expand stakeholder engagement through purposeful outreach
  - Prioritize coordination and Governance needs and study of publicprivate collaboration models, including international
  - Advance convergence of administrative-clinical data standards
  - Design a process for addressing gaps and changing scope and uses
  - Expand research and accelerate use of analytics and technology to inform vocabulary and terminology advances

### Mid Term Opportunities



#### 2. Design a deliberate pathway toward convergence

- Bridge clinical and administrative domains
- Bridge research terminologies with clinical/administrative domains Expand scope of named terminology and vocabulary standards to include:
  - vitals, public health
  - population health, social and behavioral determinants
  - mental health and substance abuse
- Balance parsimony of named standards with flexibility and extensibility in versioning



- 3. Develop principles and an explicit process for addressing terminology and vocabulary gaps
  - Distinguish purposeful overlap and redundant effort
  - Integrate new concepts into existing terminologies if practical
  - Importance of a community of practice to define scope of a content area and perspectives to include
  - Curation as a continuous process, with promotion of a concept to "named status" as evaluation shows it is ready for a purpose



4. Improve and expand the application of the "science" of terminology and vocabulary development

- Identify research and evaluation of T/V models; biomedical, sociobehavioral, and health concepts; and application of machine learning.
- Capture the principle of computational engineered relationships between reference terminologies and incorporate as appropriate in the path to convergence and long term opportunities

## Long Term Opportunities



- Single dissemination resource center
- Use clinically useful terminologies in the EHRs (SNOMED, RxNorm, LOINC ++)
- Calculate codes from clinical content to support the range of uses:
  - payment classes
  - decision support for clinicians and patients across provider sites
  - quality and population health measures
- Decouple intervention/procedure codes from facility type
- Eliminate separate work to satisfy terminology and classification needs that should be supported by entry into EHR for provision for care – this information needs to flow seamlessly through for payment and other purposes

1. Interoperability requires terminology and vocabulary standards

- The US has basic standards in place but their governance and management is fragmented and under-resourced.
- The current fragmented approach adds cost to the system with no offsetting benefits

NCVHS

- The tools and methods to improve the current process are available but need to be coordinated and supported.
- 2. Realizing the goals of the 21<sup>st</sup> Century Cures Act requires terminology and vocabulary standards
  - They are the bridge for patient care, payment, research environments
- 3. Modify current HIPAA regulation to remove specific reference to the version of ICD to allow for update of a version without the full regulatory update process.