Discussion of HITAC Public Health Data Systems Task Force Recommendations

from 2021

January 24, 2022

HITAC Public Health Data Systems Task Force

The Public Health Data Systems (PHDS) Task Force was charged with developing recommendations to inform HHS's response to President Biden's Executive Order on Ensuring a Data-Driven Response to COVID-19 and Future High-Consequence PH Threats:

- Identify and prioritize policy and technical gaps associated with the effectiveness, interoperability, and connectivity of information systems relevant to public health. This would include a focus on surveillance systems, infrastructure improvements, health equity, clinical engagement, research and innovation, educating and empowering individuals.

- Identify characteristics of an optimal future state for information systems relevant to public health and their use.

- https://www.healthit.gov/sites/default/files/facas/2021-07-14_PHDS_TF_2021_Recommendations_Report_0.pdf

Potential Intersection with NCVHS

NCVHS has identified Task Force recommendations that may intersect with the Subcommittee on Standards Convergence 2.0 work plan. Below is a summary of the compilation of recommendations:

- 22 recommendations: public health data systems infrastructure, syndromic surveillance, laboratory reporting, case reporting, immunizations, situational awareness data, and standards development and adoption.

- 16 recommendations: policy underlying the development of 21st century public health data systems and funding mechanisms by which these systems can be achieved.

- 6 recommendations: improving engagement between public health authorities, healthcare organizations and practitioners, individuals, and governing bodies at the federal, state, and local levels.

- 2 recommendations: data systems, data uses, and strategic approaches necessary to address historically under-resourced needs, eliminate health disparities, and advance health equity in the United States.

- 6 recommendations that apply across the spectrum of public health data systems to facilitate a range of key activities.

HITAC Public Health Data Systems Task Force and Possible Intersections (1)

Select Recommendations	Potential Alignment with NCVHS Convergence Workplan	NCVHS and Reactor Panel Input
1. ONC should work with federal partners to create a preparedness plan and data standards for collecting information from within the health ecosystem during PH emergencies		
3(e). Collaborate with CDC and other PH jurisdictions to work with provider and standards communities to ensure use of standards and implementation guidance that supports collection of *complete* demographic and contact information elements necessary for PH activities (e.g., demographic information, language preference, contact information - street address, phone number).		
17. ONC should work with CDC and legal organizations (Network for Public Health Law) to identify policies that are limiting or preventing health departments from exchanging immunization data with other systems and organizations across the health ecosystem, including internal organizational limitations from within PH (e.g. disease reporting systems and vital statistics systems).		

HITAC Public Health Data Systems Task Force and Possible Intersections (2)

Select Recommendations	Potential Alignment with NCVHS Convergence Work Plan	NCVHS and Reactor Panel Input
21. ONC should coordinate with CDC to support states in establishing infrastructure meeting STLT and federal needs for collecting situational response and PH data and to support identified core PH data system functions. Interest in sub-recommendation (e)	Role in the future? Collaboration? Partnership for recommendations?	
23. ONC should define a core standard set of data elements to support patient matching across PH and healthcare systems (to include demographic information).	Monitor; follow results of Report to Congress; standards work.	

HITAC Public Health Data Systems Task Force and Possible Intersections (3)

Select Recommendations	Potential Alignment with NCVHS Convergence Work Plan	NCVHS and Reactor Panel Input
30. ONC should collaborate with CDC to educate Congress on the need to authorize and appropriate robust, sustained, and consistent funding through CDC to support development and maintenance of PH data systems and PH workforce capable of supporting both routine and large-scale responses.		
35. ONC should collaborate with CDC to encourage incorporation of equity considerations into funding models for public health data systems, including specific and direct investment in traditionally under-resourced communities.		
37. ONC should collaborate with CDC and OCR to develop and release best practices/guidance for applying the Health Insurance Portability and Accountability Act (HIPAA) Minimum Necessary standard to information sharing with PH authorities.		

HITAC Public Health Data Systems Task Force and Possible Intersections (4)

Select Recommendations	Potential Alignment with NCVHS Convergence Work Plan	NCVHS and Reactor Panel Input
39. ONC should collaborate with CDC to support policies that facilitate data sharing without data use for discriminatory purposes and ensure the appropriate level of access is provided to each level (i.e., STLT, federal) of PH authority. Such policies should also ensure that secondary data use by other government agencies and partnerships comply with policies related to informed consent and other protections for patients/individuals (where applicable).	Connection to NCVHS Privacy Subcommittee?	
43. ONC should work with relevant HHS partners to support, subject to existing privacy and confidentiality regulations, payor access where appropriate to PH reporting data to facilitate maintenance of complete patient health histories and clinical data sharing.		

HITAC Public Health Data Systems Task Force and Possible Intersections (5)

Select Recommendations	Potential Alignment with NCVHS Convergence Work Plan	NCVHS and Reactor Panel Input
45. ONC should collaborate with CDC, CSTE and STLT to ensure consistent collection of agreed upon standards for certain health equity data elements: race, ethnicity, disability condition and resulting impacts, sexual orientation, preferred language, SGI, and data for SDoH. Standards should be implemented through USCDI or other mechanisms to meet community identification needs, as well as to support updating/use of these data for prioritizing provision of services to advance health equity. Interest in subrecommendations (c) – (e)	Possible alignment with new NCVHS SDoH/SOGI data work group (2021) charged by ASPE	

HITAC Public Health Data Systems Task Force and Possible Intersections

Discussion