

Department of Health and Human Services
NATIONAL COMMITTEE ON VITAL AND HEALTH STATISTICS
June 5, 2024
Virtual Meeting

MEETING MINUTES

Note: For details on this meeting, please refer to the transcript and slides posted here:
<https://ncvhs.hhs.gov/meetings/full-committee-meeting-18/>

The National Committee on Vital and Health Statistics (NCVHS) was convened virtually on June 5, 2024. The meeting was open to the public.

Present:

Committee Members

Jacki Monson, JD, Chair, Sutter Health
Angela Alton, MPA, City of Hope
Tammy Banks, MBA, FACMPE
Denise Chrysler, JD, Network for Public Health
Law
Catherine Donald, MBA, Alabama Department of
Public Health
James Ferguson, Kaiser Permanente
Michael Hodgkins, MD, MPH, Home Base
Associates
R. Lenel James, MBA, BCBSA
Debra Strickland, MS, Conduent
Steve Wagner, MBA
Valerie Watzlaf, PhD, MPH, RHIA, FAHIMA, UPitt
Wu Xu, PhD, University of Utah

Executive and Lead Staff

Sarah Lessem, PhD, PMP, ASPE, Exec. Director
Naomi Michaelis, MPA, NCHS, Exec. Secretary
and Designated Federal Officer (DFO)
Maya Bernstein, JD, ASPE/OSDP
Lorraine Doo, MPH, CMS

NCVHS Staff

Shirley Castillo, MPH, NCHS
Gwen Mustaf, NCHS

Invited Speakers

Patricia McTaggart, George Washington University
Denise Love, BSN, MBA

In addition to those individuals listed above, 19 people followed the meeting online.

ACTIONS

1. The Committee approved the 2024 Report to Congress, pending non-substantive changes from members.

Call to Order and Roll Call—Naomi Michaelis, Executive Secretary and Designated Federal Officer

Ms. Michaelis welcomed NCVHS members, staff, invited speakers, and public attendees. She reminded members that during its previous meeting, the Full Committee began discussing its 2024 Report to Congress, which it aims to finalize today.

Ms. Michaelis conducted roll call, requesting that NCVHS Full Committee members state their name, status as a special government employee, and any conflicts of interest for this meeting. Ms. Donald noted that she would recuse herself from any discussions related to reproductive health. No other Full Committee members disclosed conflicts of interest. Ms. Michaelis then introduced NCVHS staff members and noted that a live public comment session would occur during this meeting. Members of the public can provide comments orally or via email to NCVHSmal@cdc.gov and can subscribe to the NCVHS Newsletter to receive email notices from the NCVHS Full Committee.

Agenda Review—Jacki Monson, Chair

Ms. Monson reviewed the meeting agenda.

NCVHS 2024 Report to Congress—Jacki Monson, Chair, and NCVHS Members

Ms. Monson invited Ms. Love and Ms. McTaggart to introduce themselves as the primary drafters of the 2024 Report to Congress. Ms. Monson asked members to suggest changes to the overall approach, additions, deletions, and specific line edits, adding that they need not focus on grammatical errors during this session. Ms. Monson led the review and live editing of the draft report. Participants provided the feedback summarized in the associated sections below.

Document Organization and Content

Ms. Monson asked for feedback on the document's organization and content. Ms. Donald and Mr. Wagner agreed that the document was well constructed in these regards. Ms. Monson thanked Ms. Bernstein, Dr. Lessem, and Ms. Michaelis for their contributions.

Executive Summary

Participants had no specific feedback for this section.

Introduction and Report Review

Participants had no specific feedback for this section.

Section I: Health Information Technology and Data Policy, Standards and Models That Influence the Continued Advancement of the HIPAA Administrative Simplification Provisions

Mr. Wagner noted that “Social Determinants of Health (SDOH)” was misspelled in this section’s introduction and acronyms should be checked for correctness.

HIT and Digital Innovations

Dr. Hodgkins suggested defining G-5 in the text and including the acronym in parentheses. Ms. Love will move the footnote explaining G-5, cloud computing, and other new health care tools to this section, where they first appear in the document.

Mr. Ferguson suggested removing the mention of “transparency” from this section because data transparency is not a privacy and security concern and is discussed later in the document.

Assisted, Augmented, and Automated AI, Machine Learning, Deep Learning, including Natural Language Processing and Generative Pre-Trained Transformers

Dr. Watzlaf suggested highlighting the improvements possible through the use of AI in this section. Mr. James suggested including the specific AI benefit of improving reading comprehension in foreign languages, which was presented on to the NCVHS in November. Both suggestions were included in the paragraph.

Mr. Wagner noted that “code sets” was misspelled.

Data Standards to Share Social Determinants of Health

Ms. Love suggested adding “clinical data exchange” to the description of API capabilities. Mr. Wagner noted that clinical and SDOH data are documented in health records, not in USCDI.

Role of Information and Technology in Addressing Health Inequities and SDOHs

Participants decided to describe the NCVHS recommendation on the Office for Civil Right (OCR)’s methods as *critical* rather than vigilant.

Interoperability

Dr. Watzlaf asked whether to refer to “non-covered entities” or “non-HIPAA covered entities.” Participants agreed that the inclusion of HIPAA is clearer. Ms. Love will ensure that this description is standard throughout the document. Ms. Michaelis affirmed that all abbreviations will be reviewed to ensure that they are defined at first use.

Cloud Computing

Dr. Hodgkins suggested including a sentence on the potential benefits of cloud computing. Participants decided not to include such a sentence, since this paragraph presents information for a later risk discussion, and cloud computing benefits are not strictly relevant.

Mr. Wagner and Ms. Monson suggested attributing security requirements to federal “standards” rather than federal “assurances.”

ICD-11

Participants had no specific feedback for this section.

Privacy Related to Reproductive Health

Participants discussed whether to include a discussion of the Supreme Court's decision in *Dobbs v. Jackson Women's Health Organization* here and later in the document. Participants agreed that discussing this decision in more than one place is possible because the decision has multiple effects.

HIPAA Transaction Standards Process

Ms. Bernstein suggested updating the title of the section from "HIPAA Transaction Process" to "HIPAA Transaction Standards Process" to be more accurate. Mr. Wagner noted that some sentences within the section will need to be updated to reflect this change.

Cybersecurity

Ms. Alton suggested explaining that cybersecurity breaches are increasing not only in frequency, but also in magnitude.

Dr. Hodgkins suggested clarifying the ability of existing HIPAA regulatory controls to prevent cybersecurity breaches: instead of preventing "most" incidents, existing controls can prevent "many" incidents. Dr. Watzlaf and Ms. Love will include OCR support for this claim in a footnote.

Section II: 2021-2023 HIPAA Administrative Simplification Provisions—Progress and Activities

Participants had no specific feedback for the introduction to this section.

HIPAA Standard Transactions and Medical Code Set Standards and Operating Rules 2021-2023

Mr. Ferguson suggested stating that HIPAA uptake was reported by Council for Affordable Quality Healthcare Committee on Operating Rules for Information Exchange and removing the multiply-rephrased effort to attribute the uptake data to survey participants.

Table 1: Percent Industry Implementation of Transaction Standards Adopted under HIPAA

Participants had no specific feedback for this section.

Table 2: CMS Proposed Rules 2021-2023

Dr. Watzlaf suggested naming the second column "Purpose."

Predictability in Standards Adoption for Interoperability

Appendix A contains previous recommendations from the NCVHS Full Committee organized by date. Dr. Watzlaf suggested specifying the reference in this section to Appendix A to one date.

Dr. Hodgkins, Ms. Banks, and Mr. Ferguson noted that NCVHS did not recommend updating individual transactions and suggested removing language related to this topic. Dr. Hodgkins and Ms. Banks requested that the recommendation in Appendix A be checked for accuracy; participants confirmed that the reference is accurate.

Interoperability beyond HIPAA

Participants had no specific feedback for this section.

Enforcement and Implementation of HIPAA Standards, Code Sets, Identifiers, and Operating Rules

Participants had no specific feedback for this section.

Transition to ICD-11

Dr. Watzlaf proposed adding a sentence to discuss 2023 workgroup activities. Mr. Ferguson noted that workgroup materials are linked later in the document; therefore, such a discussion was deemed unnecessary.

Privacy, Security, and Breach Notifications

Participants had no specific feedback for this section.

Cybersecurity

Participants had no specific feedback for this section.

Health Equity

Dr. Hodgkins and Mr. Ferguson suggested that public health data should be separated from administrative data with a comma.

Medical Privacy Disclosure Risks Post-Dobbs

Participants had no specific feedback for this section.

Data Breaches

Dr. Watzlaf suggested citing the OCR report that finds that health data breaches are largely due to business associates. Ms. Bernstein will find the report and cite it in the document.

Ms. Bernstein asked whether the Change Healthcare breach should be included, given that it occurred after the reporting period, 2021-2023. Ms. Banks suggested that the Change Healthcare breach should be mentioned briefly but discussed at length in the next report. Ms. Monson agreed and proposed the MOVEit breach as a substantive example from the current reporting period. Ms. Bernstein also noted that a footnote referencing the Change Healthcare breach occurs in the next section.

Table 3: OCR Reported Data Breaches of Unsecured PHI Affecting 500 or More Individuals

Dr. Watzlaf suggested removing Table 3, which could introduce confusion by providing slightly different data from Figure 3. Participants agreed that Table 3 does not contain necessary information and that the accompanying paragraph could also be removed. The sentence introducing the data source will be retained.

Table 4: Breaches, HHS/OCR 2023

Participants decided to include the 10 largest data breaches from the reporting period rather than the 6 largest data breaches from 2023. Ms. Bernstein and Dr. Lessem will update the table with this information. Ms. Bernstein suggested updating the title of the table to reflect the changes and to note that the table contains the *largest* breaches, not all breaches.

Ms. Bernstein reported that 9 of the 10 largest data breaches of the reporting breaches were affiliated with a business associate, and 1 breach was affiliated with a health care provider. Participants agreed that the table effectively illustrates the fact that most data breaches are affiliated with business associates. Dr. Hodgkins suggested including a statement of this fact in the accompanying paragraph.

Section III: Emerging Trends and Challenges for Congress and Other Leaders to Consider 2024-2025

Ms. Monson confirmed that Section III contains only past NCVHS recommendations.

Standards for Interoperability

Mr. Ferguson noted that the change from ICD-10 to ICD-11 is a shift in regulatory code set under multiple regulations, not solely as a HIPAA code set.

Cybersecurity

Mr. Wagner considered whether a paragraph discussing interoperability, cybersecurity, and AI may belong elsewhere in the document and decided not to recommend moving or removing the paragraph because the recommendation in this section is germane to cybersecurity.

Ms. Michaelis confirmed that the full document contains the concluding paragraph drafted by Ms. Banks.

Appendices

Ms. Michaelis confirmed that the recommendations are ordered by date, per Mr. Wagner’s suggestion. Mr. Wagner requested that the dates of previous recommendations be formatted consistently. Ms. Michaelis will update the date formats.

Ms. Doo confirmed that NCVHS’s July 2022 letter was included in the document’s appendices.

Public Comment—Naomi Michaelis, Executive Secretary and Designated Federal Officer

No public comments were received by NCVHS.

Motion, Closing Remarks & Adjourn—Jacki Monson, Chair

Dr. Watzlaf made a motion to approve the report (with additional non-substantive refinements related to wordsmithing, formatting, and updates discussed during today’s meeting), which was seconded by Ms. Banks. Ms. Monson called for a vote of the NCVHS Full Committee members; all 11 members voted in favor, and the report was approved (with non-substantive changes).

Ms. Monson thanked staff, panelists, and attendees for their input, feedback, and discussion during this meeting. Ms. Michaelis thanked Ms. Chrysler and Ms. Strickland for their participation in the Full Committee.

I hereby certify that, to the best of my knowledge, the foregoing summary of minutes is accurate and complete.	
_____/X/_____ Chair	_____/09/26/2024_____ Date