

May 28, 2019

Donald W. Rucker, MD
National Coordinator for Health Information Technology
U.S. Department of Health and Human Services
330 C Street SW. Office 7009A
Washington, DC 20201

Dear Dr. Rucker:

Dentistry
Medicine
Nursing
Occupational Therapy
Optometry
Osteopathic Medicine
Pharmacy
Physical Therapy
Podiatric Medicine
Psychology
Social Work
Speech and Language Therapy
Veterinary Medicine

Audiology

Thank you for your leadership and the collaborative work of ONC and CMS on the **21**st Century Cures Act: Interoperability, Information Blocking, and the ONC Health IT Certification Program. As a key stakeholder to ONC, NAP is appreciative of the opportunities to participate by providing public comments to the ONC NRPM process.

Enclosed are key comments on both CMS and ONC most recent proposed rules.

As a stakeholder health professional society, we believe that NAP can bring a unique perspective to the ONC. NAP consists of 14 distinguished healthcare professions committed to advancing *interprofessional healthcare* by fostering collaboration and advocating for policies in the best interest of individuals and communities. NAP firmly believes that close collaboration and coordination between healthcare professions, aligned with a vision of quality healthcare leveraging health IT, can make significant progress on reducing regulatory and administrative burdens for health professionals. Please find NAP's comments and considerations below that we cover through an *"interprofessional lens"*. We are here in partnership to improve our US healthcare system.

Respectfully submitted,

Jody S. Frost, PT, DPT, PhD, FAPTA, FNAP

President, National Academies of Practice (NAP)

TOPIC	Medicare and Medicaid Programs; Patient Protection and Affordable Care Act; Interoperability and Patient Access for Medicare Advantage Organization and Medicaid Managed Care Plans, State Medicaid Agencies, CHIP Agencies and CHIP Managed Care Entities, Issuers of Qualified Health Plans in the Federally- Facilitated Exchanges and Health Care Providers	21st Century Cures Act: Interoperability, Information Blocking, and the ONC Health IT Certification Program	NAP COMMENTS
Standardization	 Page 7616 Ongoing stakeholder work to develop standards for clinical vocabularies & interoperability Page 7617 IMPACT Act standardized assessment items must be interoperable 	 ■ Use of the United States Core Data for Interoperability (USCDI) A "common set of data classes for interoperable exchange" including ○ Patient address and phone number to facilitate "patient matching" ○ Clinical Notes – a minimum of eight different note types required to be accommodated with a plan for future expansion: Discharge Summary, History & Physical, Progress Note, Consultation Note, Imaging Narrative, Laboratory Report Narrative, Pathology Report Narrative, Procedures Note 	NAP agrees that to achieve interoperability and quality care, we need to begin the process of developing standards. NAP believes the highest quality of care will be achieved and sustained when recognizing each health professions contributions to care. NAP supports a data class maturation process with the goal to identify classes with broad applicability to advance interoperability. As an ONC key stakeholder, NAP would like to give input on the proposed Clinical Notes Data Elements, providing interprofessional considerations and applications. NAP advocates for a Care Team Data Class in preparation for value based care. NAP recommends adding to the Data Class Provenance "Author Health Profession" to identify role/discipline.

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Interoperabili	Page 7655 ■ Despite CMS development of the Data Element Library (DEL), the USCDI (US Core Data for Interoperability) may be preferred. [Note: USCDI and DEL content do not align/overlap].		NAP would like to offer stakeholder input and ongoing collaboration re: Align the DEL and USCDI Provide guidance on provider and patient education Determine a reasonable implementation schedule