June 30, 2023

Micky Tripathi, PhD, MPP
National Coordinator for Health Information Technology
Office of the National Coordinator for Health Information Technology (ONC)
U.S. Department of Health and Human Services
330 C St SW
Floor 7
Washington, DC 20201

Dear Dr. Tripathi,

On behalf of over 39,000 orthopaedic surgeons and residents represented by the American Association of Orthopaedic Surgeons (AAOS), we are pleased to share feedback on the draft United States Core Data for Interoperability (USCDI+) Quality data element list developed by the Office for the National Coordinator for Health IT (ONC). AAOS has been an active partner in the development of quality measures for musculoskeletal conditions and supports the use of clinical data registries to manage the collection and analysis of this data.

Level of Completeness and Specificity

AAOS recommends including additional encounter admission elements. Specifically, we think that a readmission and admit source/origin for risk adjustment and measure exclusions should be included in order to appropriately risk adjust. Examples of this could include removing patients from measures such as "discharge to home" if they are being admitted to a Skilled Nursing Facility due to medical needs that would prevent safe discharge to the home; or assessing "care setting prior to procedure" to impact decisions made for pre-operative, intraoperative, and post-operative care. Likewise, for the Health Status Assessment data class AAOS recommends including elements for the 'health assessment most of completion' (via phone, email, or text; in-person at the clinic; etc.) as well as for 'individual completing the survey' (self or representative).

Usefulness of Companion Guide

Including the definition of the Fast Healthcare Interoperability Resources (FHIR) Element/Data Property and the link to the FHIR tables would assist Qualified Clinical Data Registries (QCDRs) and measure developers in forming a clear understanding of where in the clinical workflow these elements are being captured. It would also help them identify the elements to include in a digital quality measure and/or include in the data capture requirements for procedural and complication data.

Frequency of Updates

AAOS recommends that data set updates occur each time new quality measures or quality program requirements are released. We believe that this will streamline the establishment of standardized data sets in a more flexible manner.

Thank you for your time and attention to the feedback of the American Association of Orthopaedic Surgeons (AAOS). Should you have any questions on any of the above comments, please do not hesitate to contact Shreyasi Deb, PhD, MBA, AAOS Office of Government Relations at deb@aaos.org.

Sincerely,

Kevin J. Bozic, MD, MBA, FAAOS
AAOS President

cc: Paul Tornetta III, MD, PhD, FAAOS, First Vice-President, AAOS
Annunziato Amendola, MD, FAAOS, Second Vice-President, AAOS
Thomas E. Arend, Jr., Esq., CAE, CEO, AAOS
Nathan Glusenkamp, Chief Quality and Registries Officer, AAOS
Graham Newson, Vice-President, Office of Government Relations, AAOS