CHIA - Leveraging USCDI health data

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Should CHIA leverage the USCDI standard to start collecting new data elements, and specifically which parts of USCDI should be the preliminary focus?

CHIA should start collecting USCDI-compliant data, focusing first on data elements with a high impact potential (e.g. birth sex, race, ethnicity, address, smoking status, body weight), regardless of their implementation ease.

Structured project around key stakeholders surrounding the decision, conducting interviews and research for each category.

Analyzed individual USCDI elements by impact potential and implementation ease, proposing a two-wave implementation.

Incorporating our recommended elements can open up the field to highly impactful analyses and policy decisions in coming years.

We also summarized key takeaways from the stakeholders in scope: High appetite from data users, optimism within CHIA about existing capabilities and ramp up potential to prepare for USCDI, and reasonable data submitters’ readiness.

CHIA key takeaway:

Start collecting data elements with high (green) impact potential, regardless of their implementation ease.

Bring CHIA’s internal capabilities up to speed to be able to intake data elements with implementation challenges.

Collect success stories from how elements included in Wave 1 were leveraged by users.

Interlude:

Start collecting data elements with medium (yellow) impact potential, reassessing if any low impact element should also be included.

Data submitters

CHIA

Data users

Patients

Wave 1

Wave 2

Interlude