



Via Electronic Submission to: <http://grants.nih.gov/grants/rfi/rfi.cfm?ID=41>

March 13, 2015

Lyric Jorgensen, Ph.D.
Office of the Deputy Director
for Science, Outreach, and Policy
U.S. National Library of Medicine
National Institutes of Health
8600 Rockville Pike
Bethesda, MD 20894

Re: Request for Information (RFI): Soliciting Input into the Deliberations of the Advisory Committee to the NIH Director (ACD) Working Group on the National Library of Medicine (NLM); Notice Number: NOT-OD-15-067

Dear Dr. Jorgensen:

On behalf of the membership of the Pharmacy Health Information Technology Collaborative (Collaborative), we are pleased to submit comments in response to your *Request for Information (RFI): Soliciting Input into the Deliberations of the Advisory Committee to the NIH Director (ACD) Working Group on the National Library of Medicine (NLM)*.

The Collaborative is supportive of the NLM and its role as an international leader in biomedical and health information. As health care providers, pharmacists provide patient-centered care and services, and as part of the integrated health care team, they are directly involved with other health care providers and patients in various practice settings utilizing the resources maintained and provided by the NLM.

The following are our comments regarding the RFI for NOT-OD-15-067.

Comment 1

Current NLM elements that are of the most, or least, value to the research community (including biomedical, clinical, behavioral, health services, public health, and historical researchers) and future capabilities that will be needed to support evolving scientific and technological activities and needs.

Pharmacy Health Information Technology Collaborative

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The Pharmacy Health Information Technology Collaborative (Collaborative) and its members are supportive of the NLM, particularly with its role in helping to standardize information collection and dissemination of vocabulary data.

An area that is of value to the Collaborative and its members, and one in which the Collaborative has been working with the NLM, is standardizing drug allergy class, including coding and documentation. Standardizing the drug allergy class will lead to a more comprehensive way to report adverse drug events.

A second element of value is the maintenance of DailyMed, including RxNorm coding. This is especially useful to physicians and pharmacies utilizing electronic prescribing (e-prescribing). It is important to the pharmacy profession for up-to-date maintenance of usable normalized medication nomenclature when documenting medication orders and electronic prescriptions. Such normalization will help to standardize data between codified and proprietary systems, thus eliminating errors. Such errors occur during e-prescribing. For example, if a prescriber references a National Drug Code (NDC) and is not using RxNorm, and if the pharmacy proprietary system does not recognize the NDC, the pharmacy system may erroneously select a different drug. The use of RxNorm is critical, and we believe normalization of these codes will lead to expanded use of RxNorm and a decrease in medication errors.

Pharmacy's technological needs and its terminology are rapidly becoming adopted. The NLM plays an important role in standard vocabulary adoption away from proprietary compendia developing their own set of values.

The Collaborative's vision and mission are to assure the nation's health care system is supported by the meaningful use of health information technology (HIT), including the adoption of standardized medication vocabularies and coding value sets and integration of pharmacists for the provision of quality patient care. The Collaborative advocates for and educates key stakeholders regarding meaningful use of HIT and the inclusion of pharmacists within a technology-enabled integrated health care system.

Comment 2

Current NLM elements that are of the most, or least, value to health professionals (e.g., those working in health care, emergency response, toxicology, environmental health, and public health) and future capabilities that will be needed to enable health professionals to integrate data and knowledge from biomedical research into effective practice.

The Collaborative is supportive of NLM leading the development and adoption of information technologies needed to enable health professionals, especially pharmacists, to integrate data and knowledge in effective practice. To help integrate such data and knowledge, it is critical for the NLM to remain as the steward and representative for the United States' realm of access and availability to International Standards Organization (ISO) nomenclature, such as the

Systematized Nomenclature of Medicine – Clinical Terms (SNOMED CT). It is important that pharmacy systems have standardized coding in collecting and disseminating health information to other health care providers and the patient.

The Collaborative believes that the NLM being the steward of nationally recognized codes for the U.S. helps in the adoption of vocabulary standards for health information technology for interoperability. In this regard, standardized nomenclature or terminology is critical for the exchanging information between computer systems, as pointed out in the Office of the National Coordinator’s proposed *Connecting Health and Care for the Nation: A Shared Interoperability Roadmap*.

Comment 3

Current NLM elements that are of most, or least, value to patients and the public (including students, teachers, and the media) and future capabilities that will be needed to ensure a trusted source for rapid dissemination of health knowledge into the public domain.

The Collaborative believes that the NLM codes and value sets have become a standardized trusted source for health care knowledge incorporated into computer systems. Health care professionals and patients need the ability to access and make recommendations to health information. Using standardized vocabulary codes representing health information as a secure trusted source will lead to interoperability.

Comment 4

Current NLM elements that are of most, or least, value to other libraries, publishers, organizations, companies, and individuals who use NLM data, software tools, and systems in developing and providing value-added or complementary services and products and future capabilities that would facilitate the development of products and services that make use of NLM resources.

The use of RxNorm is important for reducing errors during transmission to a pharmacy and adverse events that may result from errors. Electronic coding of normalized names of medications help prevent any misunderstanding of which product is to be prescribed and eventually dispensed to a patient. Electronic standardizing of coding of clinical terms, SNOMED CT, is important to clinicians, including pharmacists, in documenting patient care services. Having the NLM being the steward of these codes for the U.S. is important in electronically communicating health information.

Comment 5

How NLM could be better positioned to help address the broader and growing challenges associated with:

- *Biomedical informatics, “big data”, and data science;*
- *Electronic health records;*
- *Digital publications; or*
- *Other emerging challenges/elements warranting special consideration.*

The Collaborative believes that as national HIT initiatives take place, expanding the NLM’s role in authorizing standardized value sets of codes in the U.S. is important. Three important areas for the pharmacy profession where such standardization within HIT needs to occur are: 1) drug allergy classification, 2) adverse drug event reporting, and 3) appropriate classification of biotechnology-derived pharmaceuticals. As noted in Comment 1, the Collaborative has been working with the NLM to help standardize drug allergy classes for allergy coding within electronic health records.

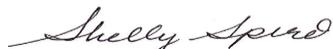
As biotechnology-derived pharmaceuticals, including biosimilars, become commonplace in health care, pharmacists will play an important role in documenting the effects of these personalized biological medicines. Additionally, pharmacists will need to have more detailed information about the use of these medicines. It is vitally important to codify in HIT systems how these biomedicines are used and reported.

The Pharmacy HIT Collaborative’s vision and mission are to assure the nation’s health care system is supported by meaningful use of HIT, the integration of pharmacists for the provision of quality patient care, and to advocate and educate key stakeholders regarding the meaningful use of HIT and the inclusion of pharmacists within a technology-enabled integrated health care system. The Collaborative was formed in the fall of 2010 by nine pharmacy professional associations, representing 250,000 members, and also includes seven associate members from other pharmacy-related organizations. The Pharmacy HIT Collaborative’s founding organizations represent pharmacists in all patient care settings and other facets of pharmacy, including pharmacy education and pharmacy education accreditation. The Collaborative’s Associate Members represent e-prescribing and health information networks, a standards development organization, transaction processing networks, pharmacy companies, system vendors and other organizations that support pharmacists’ services. For additional information, visit www.pharmacyhit.org

On behalf of the Pharmacy HIT Collaborative, thank you again for the opportunity to comment on the *Request for Information (RFI): Soliciting Input into the Deliberations of the Advisory Committee to the NIH Director (ACD) Working Group on the National Library of Medicine (NLM)*.

For more information, contact Shelly Spiro, Executive Director, Pharmacy HIT Collaborative, at shelly@pharmacyhit.org.

Respectfully submitted,



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