Addendum to the Supporting Statement for Form SSA-680
Social Security Administration Health IT Partner Program Assessment –
Participating Facilities and Available Content Form
20 CFR 404.1614, 416.1014
OMB No. 0960-0798

Revisions to Form SSA-680

Partnering Process Overview:

- **Change #1:** We added the following language to Section 4.0 Conclusion of the Partnering Process Overview: "The burden estimate for completing this form is approximately 5 hours per respondent. All of the information SSA receives from potential partners is non-confidential and resides solely with us, and we comply with the agency's retention period for recordkeeping requirement of seven years. Participation is voluntary, and any organization that expects to partner with us must complete this form."

  Justification #1: We added this language to fully comply with the certification requirements at *5 CFR 1320.9* and related provisions at *5 CFR 1320.8(b)(3)*.

Introductory Questions:

- **Change #2:** We added specific Consolidated Clinical Document Architecture (CCDA) examples to Section 1.1.9, Definition of Unstructured Documents, and Section 1.2, Questions (List all unstructured documents that can be interoperably transmitted to or with the SSA). In Section 1.1.9, we changed "(HITSP/C62, HL7 Unstructured Document, or CCDA Unstructured Document)" to "(HITSP/C62, HL7 Unstructured Document, or CCDA (R1.1 or R2.1) Unstructured Document)". In Section 1.2, we changed "(e.g. HITSP C32, CCDA Operative Note)" to "(e.g., HL7/CCD, HITSP/C32, CCDA R1.1 Operative Note, CCDA R2.1 Discharge Summary)".

  Justification #2: We are making these language changes for clarification purposes, and to align with other changes based on the CCDA standards.

CDA/CCDA Structured Docmuent:

- **Change #3:** We added Section 3.14 Mental Status: Observations and evaluations related to a patient's psychological and mental competency and deficits (CCDA R2.1 only), which collects Cognitive Function Finding Date, Cognitive Function Finding Value, Cognitive Function Finding Ref Range, Provider Name, Assessment Scale, Assessment Scale Supporting Info.

  Justification #3: We added this section to align with changes based on the CCDA standards.

- **Change #4:** We added Prognosis Value (CCDA R2.1 only) and Prognosis Date (CCDA R2.1 only) fields to Section 3.2 Problems.

  Justification #4: We added these fields to align with changes based on the CCDA standards.

- **Change #5:** We added "(CCDA R1.1/2.1 only)" clarification to the headers of Section 3.5 Procedure Findings, Section 3.6 Complications, Section 3.7 Postprocedure Diagnosis, Section 3.17 Assessment and Plan, and Section 3.18 History of Past Illness.

  Justification #5: We added this language for clarification purposes based on the CCDA standards.

- **Change #6:** We added "(CCDA R1.1 only)" clarification to Cognitive Status field within Section 3.9 Functional Status.

  Justification #6: We added this language for clarification purposes based on the CCDA standards.

- **Change #7:** We added several new fields within Section 3.9 Functional Status, including:
  - Medical Equipment (CCDA R2.1 only), which includes Equipment Name, Equipment Code, Facility, and Provider Name
  - Self-Care Activities (ADL and IADL) (CCDA R2.1 only), which includes Date, Result Type, Ability Value, and Provider Name
  - Sensory Status (CCDA R2.1 only), which includes Date – Start, Date – End, Sensory Status Problem Type, Mental and Functional Status Response Value, and Provider Name

  Justification #7: We added this language for clarification purposes based on the CCDA standards.

- **Change #8:** We added Provider Name fields to Section 3.8 Labs and 3.12 Medications.

  Justification #8: We added this language because this information was made available with the CCDA R2.1 standards.

- **Change #9:** We removed the Procedure Medications section (including Product Name, Product Code, Dosage Details, Reason, Date – Start, and Date – End) from Section 3.4 Procedures.

  Justification #9: We removed this language because Procedure Medications within Section 3.4 Procedures was duplicative of information noted in Section 3.12 Medications.

SSA will implement the changes above upon OMB approval.

These actions do not affect the public reporting burden.