

NCVHS Testimony

August 25, 2021

Chuck Jaffe, MD – CEO, HL7

Jocelyn Keegan – Program Manager, HL7 Da Vinci

Kirk Anderson - VP & CTO, Cambia Health



Panelists



Charles Jaffe, MD, PhD

HL7 CEO
Argonaut Founder,
Da Vinci Founder &
Steering Committee



Jocelyn Keegan

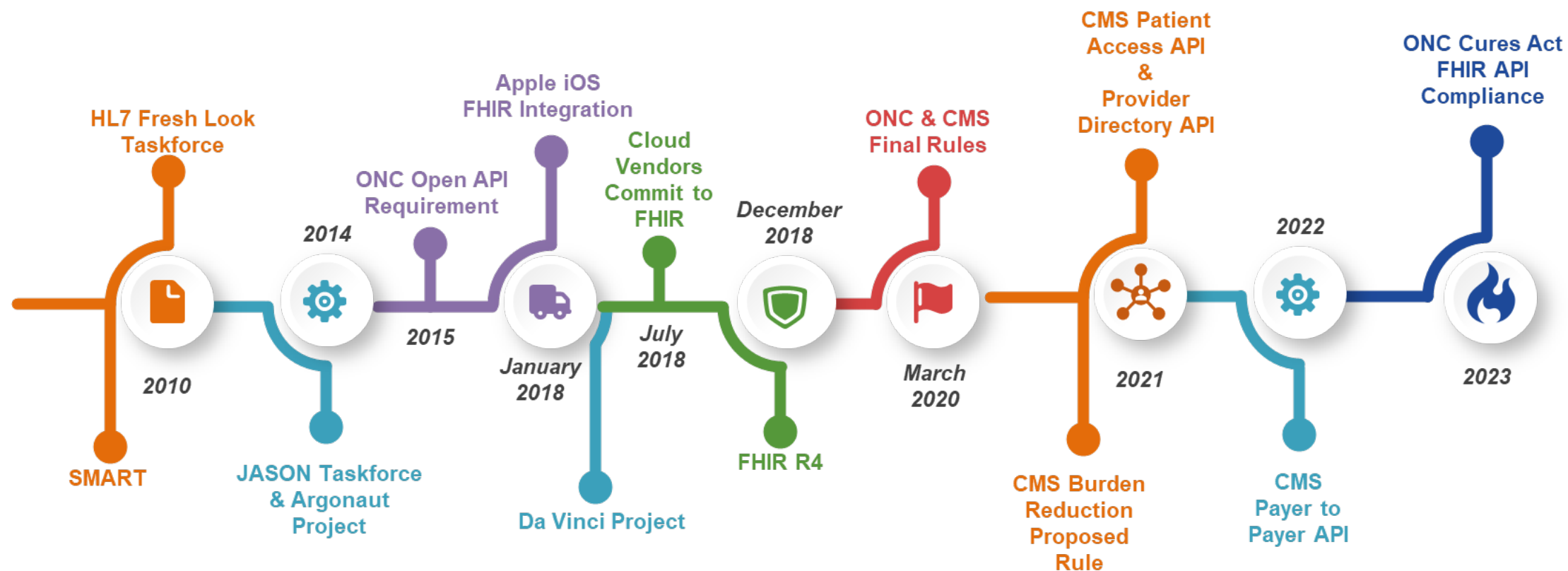
Program Manager,
HL7 Da Vinci,
Payer Practice Lead,
POCP



Kirk Anderson

Da Vinci Founder &
Steering Committee,
CARIN Member,
VP & CTO, Cambia
Health

HL7 FHIR Timeline



ONC Technical Standards: HHS Final Technical Standards in the ONC's 21st Century Cures Act Final Rules

HL7 FHIR R4

Health Level 7 (HL7) Version 4.0.1 Fast Healthcare Interoperability Resources (FHIR) Specification

URL: <http://hl7.org/fhir/R4/>

SMART IG / OAuth 2.0

SMART Application Launch Framework Implementation Guide Release 1.0.0, November 13, 2018

URL: <http://hl7.org/fhir/smart-app-launch/history.html>

OpenID Connect

OpenID Connect Core 1.0 Incorporating Errata Set 1, November 8, 2014

URL: http://openid.net/specs/openid-connect-core-1_0.html

Content & Vocabulary Standards

USCDI

United States Core Data for Interoperability (USCDI), February 2020, Version 1 (v1)

URL: <https://www.healthit.gov/isa/us-core-data-interoperability-uscdi>

CMS Regulatory Alignment: References to HL7 FHIR and Implementation Guides across Final & Pending Rules

- CMS 91-15F
 - ADT Requirements, supported by HL7 v2 and Da Vinci Notifications
 - Patient Access API support references for Provider Directory, Patient EOB and Clinical Data initially for Patient Apps (7/1/21), then Payer to Payer (1/1/22)
- CMS 91-23P
 - Includes all patient and payer facing capabilities for payers to providers, names Da Vinci and CARIN specific guides in the proposed rule
 - Adds increased focus on transparency of coverage and automation of Prior Authorization through Da Vinci Coverage Requirements Discovery, Document Templates and Rules and Prior Authorization Support
- Da Vinci granted an Exception by HHS National Standards Group to test and demonstrate use of Prior Authorization Support without X12 278 Prior Authorization transaction

<https://confluence.hl7.org/display/DVP/Da+Vinci> for more information on rules and Exception

Da Vinci 2021 Multi-Stakeholder Membership

PROVIDERS



INDUSTRY PARTNERS



EHRs



PAYERS



VENDORS



DEPLOYMENT



For current membership: <http://www.hl7.org/about/davinci/members.cfm>

*Indicates a founding member of the Da Vinci Project.
Organization shown in primary Da Vinci role, Many members participate across categories.

Use Case Status

Standard Phase	Future	Build	Ballot	Published
Connectathon	<1	2-4	5+	
Live	<1	1-3	>4	
Progress				

Quality Improvement



Data Exchange for Quality Measures



Gaps in Care & Information

Member Access



Clinical Data Exchange



Payer Data Exchange



Directory



Formulary



Coverage Decision Exchange



Patient Cost Transparency

Clinical Data Exchange



Payer Data Exchange



Clinical Data Exchange



Notifications



Patient Data Exchange



Performing Laboratory Reporting

Coverage/Burden Reduction



Coverage Requirements Discovery



Documentation Templates and Rules



Prior-Authorization Support

Process Improvement



Member Attribution



Risk Adjustment



Proposed CMS Rules



Aligned with final ONC or CMS rule

Payer-to-Payer Data Exchange: Risk of Non-Standard Exchange

Current gap in CMS requirement: lacks a standards-based approach to send and receive USCDI data (ie, via API-based or HL7 FHIR API).

Today's Payer Requirement

- Must send and receive USCDI v1 data at member request
- "Data" = USCDI v1 content standard
- May send data "as is" and by any electronic method of choice

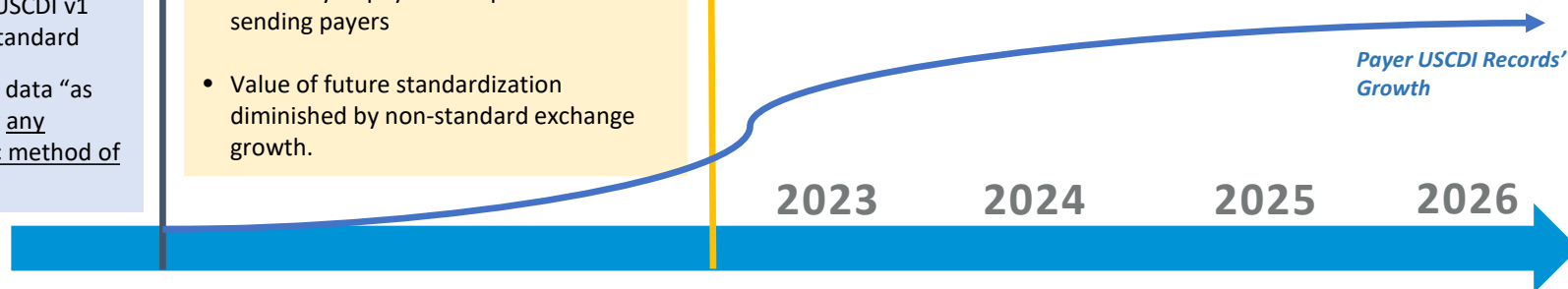
January 2022

Future Challenges for Payers

- Propagation of non-standard exchanges by payers for receiving/sending data
- Discovery of payers' endpoints left to sending payers
- Value of future standardization diminished by non-standard exchange growth.

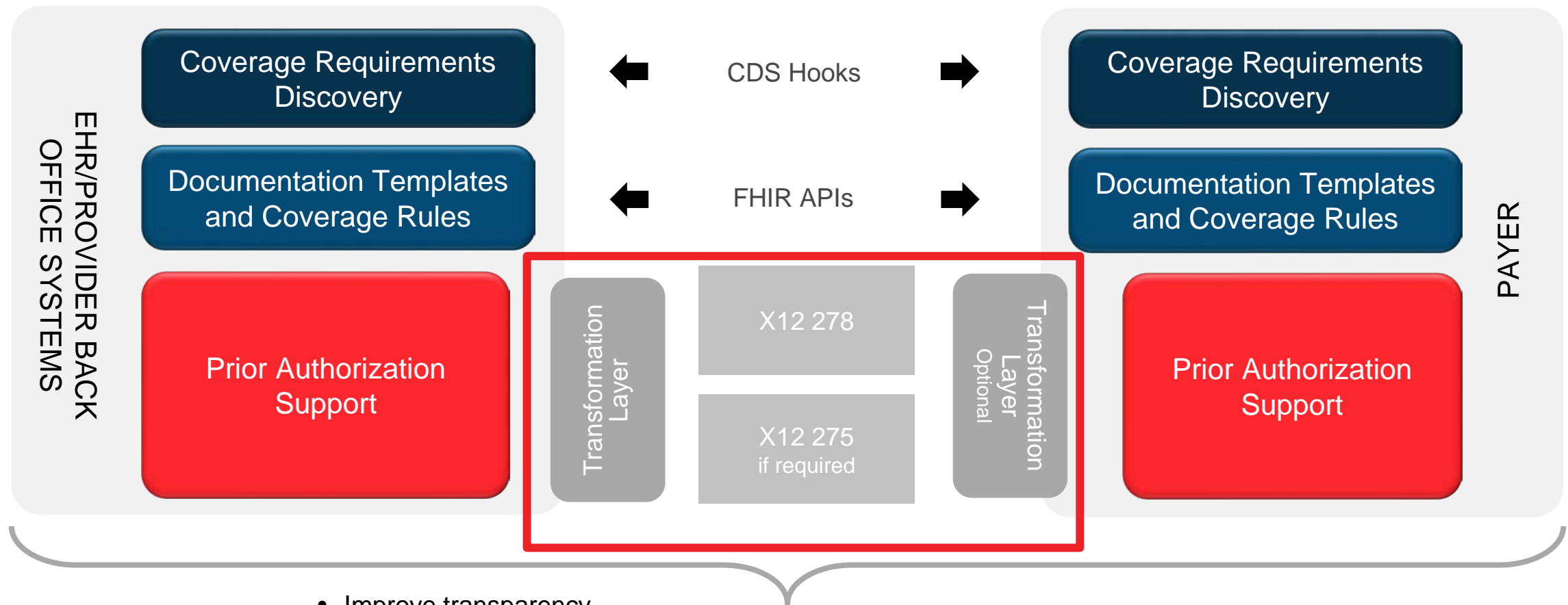
Future

Long term consequences of non-standard exchange:
Payers continue to grow data ingestion to accommodate propagation of ways other payers opt to send data



Future federal rule-making may impact and inform future of Payer-to-Payer data exchange.

Coverage Requirements Discovery, Documentation Templates & Rules & Prior Authorization Support



- Improve transparency
- Reduce effort for prior authorization
- Leverage available clinical content and increase automation

Project Focus

To ensure the success of the industry's **shift to Value Based Care**



Transform out of Controlled Chaos:

Develop **rapid multi-stakeholder** process to identify, exercise and implement initial use cases.



Collaboration:

Minimize the development and deployment of **unique solutions**.
Promote industry wide **standards** and adoption.



Success Measures:

Use of FHIR®, implementation guides and pilot projects.

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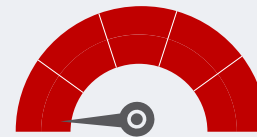
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Resources:

- [SANER Project](#)
- **HL7 Confluence Pages for Accelerators**
 - Argonaut Project - <https://confluence.hl7.org/display/AP/Argonaut+Project+Home>
 - Da Vinci Project - <https://confluence.hl7.org/display/DVP/Da+Vinci+Welcome>
 - CARIN Alliance - <https://confluence.hl7.org/display/CAR/CARIN+Alliance>
 - CodeX - <https://confluence.hl7.org/display/COD/CodeX+Home>
 - Gravity Project - <https://confluence.hl7.org/display/GRAV/The+Gravity+Project>
 - Vulcan - <https://confluence.hl7.org/display/VA/Vulcan+Accelerator+Home>
- [ONC Blog on FHIR](#)
- [CMS FAQs reference FHIR IGs](#)
- [July CMS Sponsored Connectathon Recordings](#)
- [Relevant Press Releases](#)
- [HL7 NCVHS 2020 Submission](#)