

### **Presenters**



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### **Session Themes**

- Current Landscape and Realities of the Shift to APIs
- Impacts on Individual Organizations
- Consider Larger Transformation vs Technology Project(s)



### Who is Point-of-Care Partners?

### We Are THE Nation's Leading Data Standards and Interoperability Consultants



- National, virtual, consultancy since 2002
   (35+ states, 110+ Associates) focusing on healthcare
   Interoperability across the Payer, Delivery, Health IT
   Vendor, HIE, Government, and Pharma ecosystem
- We possess a comprehensive staff of widely respected national experts, with most Associates having > 15-25 years experience in the Interoperability field
- Engaged and leadership roles with Standards bodies and Accelerators across the Interoperability spectrum, including HL7, HIMSS, Da Vinci, CARIN, NCPDP, and numerous others



#### What We Do...

Leading interoperability subject experts working on projects such as:

- Strategy and value engagements for national and regional payers
- Interoperability roadmaps (establishing and adjusting)
- The launch and growth of numerous HIEs
- Development of standards and strategy for implementation
- Automations of Prior Authorization, Patient Cost and Benefits, Specialty Medications, Enrollment

Program, Project Management and use case lead role(s) across **Da Vinci**, CARIN, Codex and FHIR at Scale Taskforce (FAST) and other cross-functional industry projects

## This is All About Interoperability, and the Data That Rides the Rails



- To be successful with your transformation to FHIR API Technology, you must have a welldocumented strategy and execution roadmap
- How will you handle Interoperability needs such as:
  - Clinical Data Exchange
  - Price Transparency?
  - Social Determinants of Health?
  - Patient Data Redirection?
  - Value-based Care?



### **Market Realities**



All vendors are evaluating which payers and providers they are doing new advance API work with now.



Quality work will be shifting to FHIR/API solutions in the near future, leverage existing vendor end points that don't require long term investment



Roadmaps are heavily driven by regulatory impacts

FHIR is simply the way to move to APIs, and will be underpinning of future rulemaking



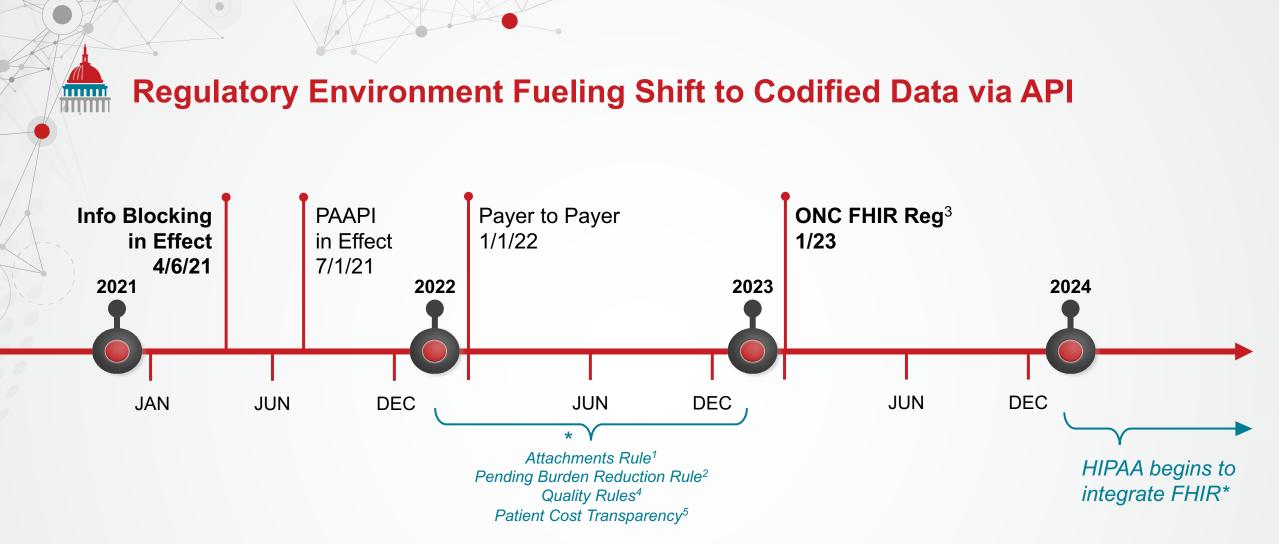
We are witnessing the start in a gradual shift in role of integrator as primary intermediary to free the data from EHR/EMR



Shifting to clinical data exchange and notifications about gaps in care and risk adjustment is paramount for business transformation



Maximizing API and workflow capabilities today partners, and watching execution success of potential vendors and direct partners is critical



\* POCP projection

**Expectation:** Increasing access to clinical data directly from EHR and provider data lakes, largely due to regulatory action, shifts role of intermediaries

<sup>&</sup>lt;sup>1</sup>Likely focus on existing X12 275 or could include FHIR

<sup>&</sup>lt;sup>2</sup>ETA of update or expanded NPRM or Final Rule, timing unknown at this time

<sup>&</sup>lt;sup>3</sup>Epic actively rolling out HL7 FHIR R4

<sup>&</sup>lt;sup>4</sup>June 24, 2021 RFI on quality measure collection via FHIR

<sup>&</sup>lt;sup>5</sup>Awaiting initial regulation to align existing pricing rules and enactment of what is in No Surprises Act/CAA Law into regulation



- Increased regulatory activity at Federal level
- Aimed at delivering unprecedented cost transparency for healthcare services
- Industry waiting for clarification on timelines and shopping tool synergies from regulators
- No Surprises Act is three agency rule
- Solutions will require multiple standards (NCPDP, FHIR, X12)
- Need to master contract data in a standard way

### No Surprises Act

Personalized Good Faith Estimates and Advanced EOBs for Patients

Law in effect 1/1/2022

**Active Rulemaking** 

Shopping Tool - comparing costs

### **CMS Hospital Price Transparency Rule**

Charges for all covered items and services

Negotiated Rates in Machine Readable Files

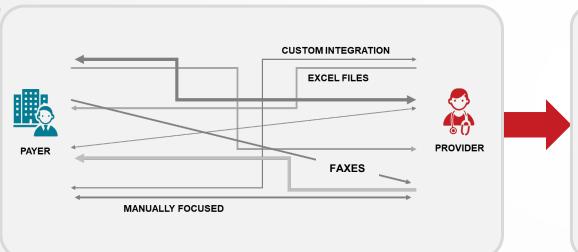
## CMS Transparency in Coverage Rule

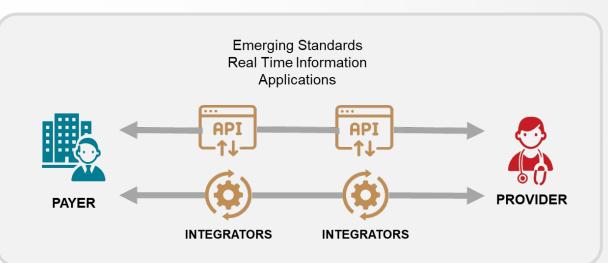
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All covered items and services



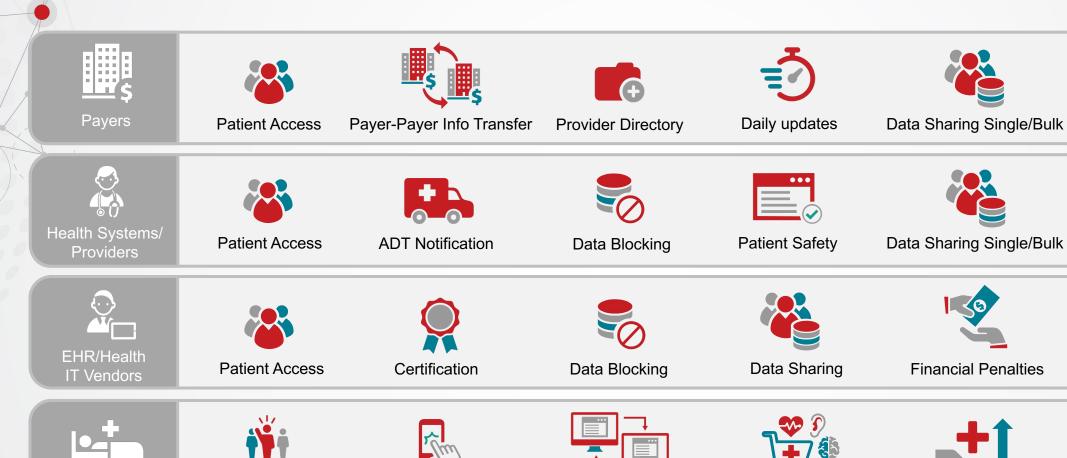
## Why is Shift to APIs from Documents Important?







## The Pervasive Stakeholder Impact of API Technology



**Data Sharing** 

Mobile Apps

**Consumer Choice** 

Improved Quality of Care



Patient Empowerment

Patient / Caregiver



## **Tools & Capabilities from HL7® FHIR® Accelerator Programs**

- Argonaut Project: Exchange and foundational tools to move data in/out EHRs and other HIT vendors
- CARIN Alliance: Consumer-facing exchange of data (Blue-Button and Consumer facing RTPBC)
- Da Vinci: Data sharing and workflows needed for valuebased care, provider and payer led
- Gravity Project: Focused on data exchange of social risk factor data
- CodeX: Focused on creation of national platform for interoperable cancer data modeling
- Vulcan: Focused on exchange of data in order to bridge existing gaps between clinical care and clinical research
- FAST: Foundational tools, standards and best practices to scale FHIR across industry
- Helios: Focused on strengthening the data-sharing capabilities of public health systems









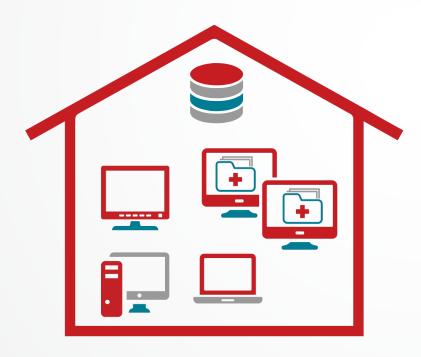


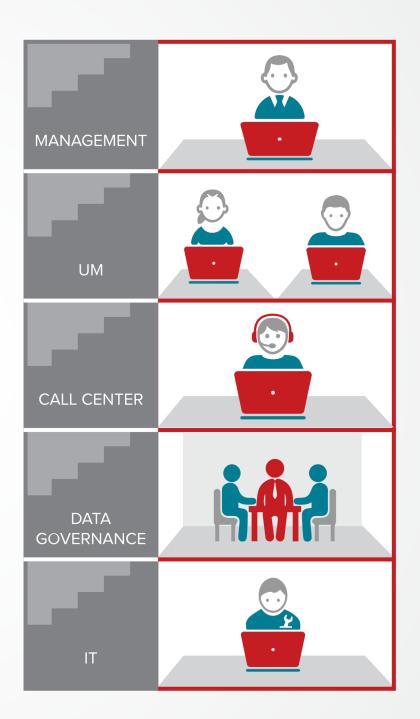






Interoperability certainly requires technology, but it has broad implications across your entire business





### **Sampling of APIs in Workflow**

Rules: Info Blocking & **Patient Access API Final Rule:** Burden Reduction (pending); Transparency in Coverage









Rules: CMS Burden Reduction (pending), Info Blocking







1. Patient PCP Consult

Rules: Transparency in Coverage, Burden Reduction, Cost

2. Provider-Payer Procedure Authorization

Sample API Services: Payer Data, Coverage, Rules, Quality, Risk and Gaps, Prior Auth, Referring Provider Data, SDOH, Patient Created Data, Clinical Trials, etc...



Rules: Info Blocking & Patient Access API Final Rule, Burden Reduction (pending)

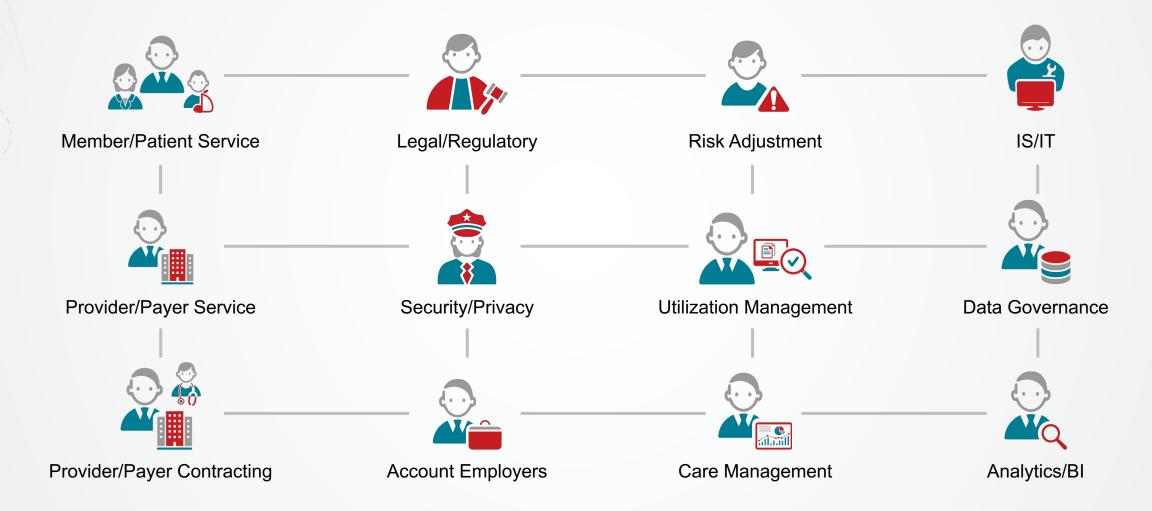
4. Post-Procedure

3. Member Payer Change





## **Ensure Shift is Not Just a "Technology" Project**



Align Existing Assets, Available

Tools and Extend/Find

**New Partners** 





### **Create the Right Checklists and ROI Models**

- What is your strategy?
  - Business organizational competitive
  - Operational technical
- ☐ How will you prioritize?
  - Mandates market demand value feasibility
- ☐ How will you keep up with everything that is going on?
  - Regulations Multi-stakeholder collaboratives - Competition
  - Innovation and technology advancements

- ☐ How will you drive/manage change and communication?
  - Internal Consumers Partners
- ☐ How will you impact your front-line providers?
- ☐ How will you drive adoption and utilization?
  - Provider Member Patient Community
- ☐ How can/will this change my market?
  - Competition Product design Network demands
  - Employer Consumer Government Programs demands

# Thank You

### Pooja Babbrah

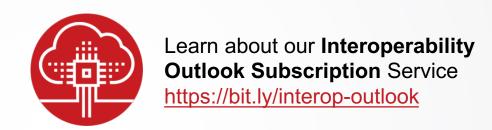
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