CONSENSUS STATEMENT

Regarding the CMS Interoperability and Patient Access Final Rule and Payer-to-Payer Data Exchange

As of Nov. 2021

The Health Level Seven® International (HL7) Da Vinci Project is an HL7 Fast Healthcare Interoperability Resources (FHIR®) Accelerator Project focused on standards for data exchange in healthcare with a focus on data exchange in support of value-based care. To support data exchange for value-based care, Da Vinci has developed use cases and HL7 FHIR Implementation Guides in categories of data exchange for quality measures, administrative and clinical burden reduction, and data exchange among healthcare ecosystem actors including but not limited to providers, payers, and patients.

Since the inception of the Da Vinci Project, use case development has aimed at solving challenges in various data exchanges which has found support in proposed and final regulations from CMS and ONC. Examples of this include references by regulators in rules in support of the 21st Century Cures Act. Notably, the CMS Interoperability and Patient Access Final Rule requires FHIR APIs for patient facing apps that make available data from healthcare providers and payers to patients to encourage patients to make more informed choices in their care by being empowered with improved ease of access to their health information. The CMS Interoperability and Patient Access Final Rule also requires that payers of specified covered plans also have processes in place on January 1, 2022 that, at the direction of the member, a former payer make available to a member’s current payer data specified by the USCDI.

The payer-to-payer data exchange requirements of the CMS Final Rule only specify the data content (i.e., USCDI) and that the exchanges occur electronically between payers. Many payers, including those in the Da Vinci Project, have raised issues of the risks of non-standard data exchange related to the minimum requirements of the CMS Final Rule.

To address the risks of non-standard data exchange, payers in the Da Vinci project have proposed to standardize payer-to-payer data exchanges with the use of FHIR APIs using the Da Vinci Payer Data Exchange (Pdex) implementation guide specific to USCDI data. Using FHIR APIs and the Pdex implementation guide has been confirmed by CMS as meeting the requirements of the final rule for payer-to-payer data exchange. Using the Pdex implementation guide for payer-to-payer data exchange also enables payers to reuse knowledge and implementation already delivered for the Patient Access API. Reusing implementation already delivered reduces the development required and burden on payers for implementing processes for payer-to-payer data exchange.

In addition to the clinical (USCDI) scope of payer-to-payer data exchange, payers have other considerations when implementing for the payer-to-payer data exchange. These include patient matching, securing appropriate consent of the member for both payers in the data exchange, secure exchange of member PHI/PII, provision of authentication and authorization (e.g., OAuth tokens), identification of both payer points of connection for electronic exchange, potential for intermediaries in data exchange, and other considerations related to payer-to-payer data exchange as a business-to-business transaction in contrast to patient access as a business-to-consumer transaction.

While some of these considerations may be in scope and addressed by the Da Vinci Payer Data Exchange (Pdex) the Da Vinci project leaves it up to each payer how those considerations would be implemented due to complexity of the business-to-business nature of the data exchange between payers.

While the Da Vinci project and other organizations have made significant progress in specifying standard approaches to support the interoperability derived from payer-to-payer data exchange, this amounts to a small segment of the payer community that is required to comply with the CMS Final Rule. Through interactions with CMS and other industry forums, the Da Vinci project has sought to inform the broader payer community of the potential value in adopting FHIR APIs and using the Pdex implementation guide for payer-to-payer data exchange. The Da Vinci project continues to seek greater adoption across the entire payer community and to engage with more payers to share knowledge and experience with FHIR APIs and the Pdex implementation guide in support of interoperability that will increase the value of payer-to-payer data exchange and patient access to health information.

Resources
For recordings of community discussions: https://confluence.hl7.org/display/DVP/DaVinci+Video+Presentations
Pdex implementation guide: http://hl7.org/fhir/us/davinci-pdex/
For Da Vinci implementation support resources: https://confluence.hl7.org/display/DVP/DaVinci+Implemenetr+Support
For Da Vinci Q&A resources on CMS Final Rules: https://confluence.hl7.org/display/DVP/CMS+Final+Rule+Questions+and+Answers+log
For Da Vinci Payer-to-Payer Quick Start Guide: [resource and URL forthcoming]

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