2020-08 Payer Data Exchange

Track overview

Short Description

Review Payer Data Exchange and Interaction with US Core v3.1.0+

Long Description

The CMS Interoperability and Patient Access Rule requires payers to release data going back to January 1, 2016. The work of the PayerData Exchange (PDex) Work Group is helping to coordinate payer activity in response to the clinical and encounter data requirement by leveraging US Core resources with some additions from PDex.

With the dramatic increase in the number of FHIR API endpoints and the number of apps wanting access to these APIs we face a challenge in managing the issuing of credentials. We need to find a better way that leverages the power we have when we act as a community with a common purpose. Fortunately the ONC's FHIR At Scale Taskforce (FAST) have been addressing this next generation problem. The UDAP protocol was first referenced from PDex in the Da Vinci Health Record Exchange (HRex) IG. It provides a method that allows simpler registration of trusted apps.

The purpose of this event is three-fold:

1. Address Payer questions about the implementation of the clinical and encounter data requirements in the CMS Patient Access API
2. Inform Consumer Application Developers about the use cases for the use of US Core resources.
3. Explain the Unified Data Access Protocol (UDAP) and the benefits it offers for Payers, Developers and Consumers.

The outcomes desired from this event include:

- Gather feedback on the PDex IG (Current Build)
- Raise awareness amongst Consumer App developers about use of US Core
- Inform developers about the additional items PDex requires over and above the US Core resource set

Real world testing of the Da Vinci Payer Data Exchange IG focused on the Consumer-Directed Exchange scenarios will take place as part of this event.

Intro Deck: PDexPatientAccessAPIEvent.pptx

About This Track Recording: https://us02web.zoom.us/rec/share/79RoPb3a1VxITauK7WDbYKh9Q53_aaa8g3Ab-_ZYyk4qP8oaX38xXV9fu-NNnY2X

Schedule

11:30 Track opens

11:35 Introductions

12:00 Reference Implementation Demo and view the code on GitHub

12:30 a) Testers can go to break out room to coordinate testing activities (Be prepared to provide a demo or summary of outcomes for the wrap up session later in the day.)

1:00 UDAP Education session

12:30 b) People that are new to FHIR and PDex can stay in the main room and ask questions and go through an overview of the IG.

Education Topics:

- UDAP - What is it | How does it work | How do we take it from concept & tech to reality
- Provenance - How does it work for Payers

3:00 sync up and gather lessons learned and highlights to be able to raise in the wrap-up session.

3:30 Head over to wrap up session

Type

- Test the Patient API access elements of the PDex Implementation Guide

Submitting Work Group/Project/Accelerator/Affiliate/Implementer Group

Financial Management WG

Track Lead

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Related tracks

The target audience for PDex falls into two groups:

- Payers who are implementing the clinical and encounter information parts of the CMS Patient API
- Developers who are building consumer applications that will request data from payer FHIR APIs

FHIR Version

- FHIR R4

Specification(s) this track uses

Da Vinci Payer Data Exchange (PDEX) IG (PSS, STU1, CI)

Artifacts of focus

- Payer-Provenance: How should a payer express Provenance for data that they have received via a non-FHIR channel?
- Pdex-MedicationDispense
- Pdex-Device

Clinical input requested (if any)

- MedicationDispense
- Device

US Core provides a resource for ImplantableDevice. Payers may have information about other devices without UDIs that need to be shared. The Device profile is meant for that purpose.

Patient input requested (if any)

Learn which records are most important

Expected participants

- Payers
- Consumer App Developers

Zulip stream

Zulip stream

Track Orientation

PDex Work Group Call: August 7, 2020 at Noon ET.

The session will be recorded.

Track details

Scenarios

Scenario: Sandbox user retrieves clinical data (US-Core profiles + MedicationDispense resources) from the Sandbox server using the Client

Action: Sandbox user receives the access and refresh tokens from the Sandbox server and calls the clinical resource endpoints

Precondition: Sandbox user is logged into the Client

Success Criteria: The client retrieves the user's clinical records and renders them on the UI

Bonus point #1: On expiration of the access token, the app uses the refresh token to get new access and refresh tokens

Bonus point #2: The Server exposes search criteria (link) for selecting the clinical resources and the client uses search parameters to select and retrieve the those resources.

Track Outcomes:

- Lots of Discussion (40+ people)

- 122 People expressed interest
  52 Payers
  16 3rd Party Apps
  55 Technology Vendors
- From Beginners to Experts
- Demo of Reference Implementation for access to aPayer's PDex/US Core API

Lots of Questions>>>

- Deep Dive into Unified Data Access Protocol (UDAP) and the benefits to Payers and Developers
- PDex is COMPLIMENTARY to US Core and adds:
- Medication Dispense
- Device
- Provenance
- Confusion still exists:
- USCDI | US Core | Designated Record Set
- Understanding the Authorization and Access Flow
- Access Token Duration: 1 year
- It happens in the API and not the 3rd Party App
- Is Da Vinci coordinating a common approach on Proxy access to members. E.g. Parent/Child