Committee Approval Date: 4/7/2022

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Contributing or Reviewing Work Groups:

Financial Management (co-sponsor), Payer/Provider Information Exchange (co-sponsor), Learning Health Systems (co-sponsor), Patient Administration (Other Interested Party), Community Based Care and Privacy (Other Interested Part), Patient Care (Other Interested Party), Public Health (Other Interested Party)

FHIR Development Project Insight ID:

1760

Scope of coverage:

This guide will define the specific use cases, exchange methods and interoperability "standards" of FHIR profiles supporting the ability for healthcare as well as community-based organization providers to search human services/social services directories for suitable resources to address unmet social needs for patients and clients. This effort leverages the Provider Directory specification (PDEX Plan-Net Provider Directory, taking note of version 1.1.0) as specified by CMS for use by providers to maintain alignment with the specification that providers and payers are already using within their certified EHR-system. This IG is envisioned to be published as a companion guide to the PDEX Plan-Net Provider Directory.

Content location:

https://github.com/HL7/FHIR-IG-Human-Services-Directory

Proposed IG Title:
Proposed IG realm and code:
US/human-services-directory

FHIR Core version(s):
FHIR V4.0.1

Maintenance Plan:
The content of the Human and Social Services Directory IG created by this project may be added to the PDEX Plan-Net Directory specification as a "companion guide" to enable access to a human and social services resource provider directory as deemed necessary by future implementers. The content of this IG will be implemented by participants in the ACL Social Care Referrals Challenge during testing events in the summer of 2022, and prior to submitting the January 2023 ballot. Lessons-learned from these implementations will be applied to the ballot content. If additional modifications to the IG are required if and when new requirements are surfaced by implementers following the January 2023 ballot publication, the new requirements will be communicated to the National Directory project and to maintainers for the PDEX Plan-Net Provider Directory Implementation by the Administration for Community Living [acl.gov] (ACL) to maintain alignment with complementary US Realm provider directory specifications.

Short Description:
FHIR API-based data exchange enabling healthcare provider, community-based organization, payer, and consumer-facing application systems to search standardized directories of organizations providing human and social services, providing foundational support for downstream care planning and management use cases, including closed loop referrals, care coordination and care management activities, consumer-based search for assistance, etc. This guide is a US Realm specification.

Long Description:
The FHIR IG for the Human Service Resource and Provider Directory, is a US Realm published standard, and an intended companion guide to the PDEX Plan-Net Provider Directory. The Human Service Resource and Provider Directory focuses on requirements of real-world implementers of social services directories and leverages analysis of a recognized (US, now International) standard in the human services field that describes social services directories: Open Referral Human Services Data Specification (HSDS) and associated APIs (HSDA). The directory can easily be adapted internationally from the US Realm guide by changes to terminology bindings, as the HSDS standard reflects current international as well as US requirements. The directory allows healthcare providers to search a human and social services directory from within a FHIR-enabled EHR-system, for community-based resources/services during a referral process workflow. Information from the directory is used to make the appropriate selection and to initiate a referral request to help meet the patient’s unmet social needs. Additionally, this IG provides a standard for describing information collected by disparate human and social service organizations so the information can be universally understood across entities, including by FHIR-enabled systems used by healthcare providers, healthcare payers, social navigators, other community-based organizations, and consumer-facing applications to locate community-based resources and programs.

Involved parties:
This implementation guide has been funded by the Administration for Community Living under the Department of HHS to support their Social Care Referrals Challenge. The Administration for Community Living (ACL) at the U.S. Department of Health and Human Services (HHS) is conducting a competition that includes a number of participants from the aging and disability network,
community-based organizations, social service networks, and health IT vendors to collaboratively develop interoperable technology solutions that help to improve care coordination and health outcomes. Additionally, the Administration for Children and Families under HHS, is looking to this directory specification to facilitate a variety of its referral programs.

Expected implementations:

Participants will participate in Connectathons over the summer to demonstrate their approach to secure using standardized human service resource directories that are able to be searched by and interoperable between health care system EHRs and community-based organizations to support referrals and other related care management activities through secure sharing of standardized data and person-centered plans.

Content sources:

Requirements are drawn from Administration for Community Living Challenge Grant participants, and the Open Referral Human Services Data Specification (HSDS) logical model and associated APIs (HSDA) which are mapped to existing relevant profiles in the DaVinci PDEX Plan-Net Provider Directory IG.

Example Scenarios:

1. Healthcare providers can search the human services directory for services that are provided by keyword (or partial keyword) for a category (or precise term) of resources (or, in human services language, services, e.g., diapers, fuel assistance), to narrow down organizations that are able to provide the desired services in a particular geographic location.
2. At the request of a consumer requesting assistance from a Community-Based Organization, a social services navigator browses the human services directory for potential services by keyword/partial keyword search, service category search, and/or for services provided in specific geographic locations. Additional search parameters can be used to narrow down the search results.
3. During a visit to a healthcare provider, a patient is asked to complete a Social Determinants of Health (SDOH) screening assessment (e.g., PRAP ARE) to surface categories of human services assistance that the patient could receive though a referral to the appropriate program (e.g., to a Meals-on-Wheels program, transportation services to necessary health-related appointments, etc.) by the patient’s health care provider. While searching the social services directory for services available in the patient’s home area, the healthcare provider/staff consults with the patient to select the most appropriate referral agency based on specified parameters and search results from the directory.

IG Relationships:

This guide will reference "standards" defined by the DaVinci PDEX Payer Network Implementation Guide (Plan-Net) which in turn uses prior work from FHIR R4, and US Core.

Timelines:

STU Ballot 2023 January Ballot

FMG Notes