

IGNITE

Interoperability: APIs and[®] FHIR Heat Up

INTEROPATHON | 2020 | Hosted  INTEROPERABILITY
INSTITUTE

PRESENTED BY



Today's Agenda

- 01 **Blue Cross Blue Shield Michigan, Rich Boehm**
IT Director
- 02 **Cloudticity, Gerry Miller**
Founder & CEO
- 03 **MiHIN Group, Tim Pletcher**
Executive Director
- 04 **Tools Overview and General Event Information**
- 05 **Teams Begin Working**



**Blue Cross
Blue Shield
Blue Care Network**
of Michigan

Nonprofit corporations and independent licensees
of the Blue Cross and Blue Shield Association

Rich Boehm,
IT Director



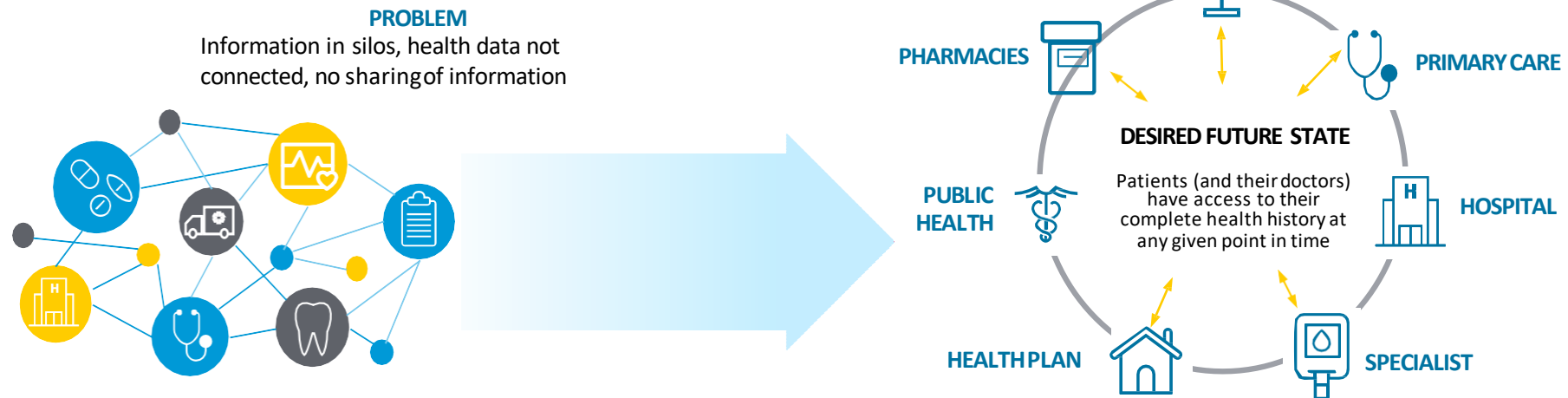
**INTEROPERABILITY
INSTITUTE**

Copyright 2020
CONFIDENTIAL – PROPRIETARY – RESTRICTED

- Thank you for participating today in these unique times
- COVID has increased the need, more than ever, for ***data exchange*** between health care providers and health care payers
 - **Patient Information and Patient Care**
 - Patient history
 - Disease registries
 - Virtual visits
 - **Reporting and Analytics**
 - Where are the hot spots?
 - Where will the hot spots be?

Summary

Interoperability: Ability to electronically share meaningful healthcare data without special effort



BCBS INTEROPERABILITY PRINCIPLES

Patients Access to Data

Patients own and should have access to their healthcare data wherever and whenever they need it.

Build a Strong Foundation

Standardizing the way we exchange data is necessary to make health data accessible, safe and private

Data Liquidity

Remove barriers preventing flow of data to allow access in a secure, efficient and cost-effective way

Why Interoperability and Why Now?



Blue Cross
Blue Shield
Blue Care Network
of Michigan



Lower cost of care



Increased care coordination



Greater consumer engagement and shared decision making (and we are all consumers)!



Improved consumer experience



Better patient outcomes



Improved quality and safety



Greater operational efficiencies

Final Interoperability Rule – Minimum Compliance



Blue Cross
Blue Shield
Blue Care Network
of Michigan



APIs

Make health information available electronically via open, standardized, pro-competitive application programming interfaces* that are routinely monitored and contain:

- Patient claims and encounter data
- Clinical data and lab results**
- Provider directory
- Drug benefit data



Security & ID Standards

API technology must comply with technical standards proposed by ONC, must be certified and follow security and member identification standards:

- FHIR, OAuth 2.0, OpenID Connect 1.0
- Specific technical approach and standards
- Privacy and security (including informing enrollees how they can protect their PHI)



Payer to Payer Data Exchange

Upon enrollee request, forward a beneficiary's information to a new plan or other entity for up to 5 years after the beneficiary has disenrolled (must also be able to accept incoming data sets)



Information Blocking

Information blocking is prohibited

- Health IT developers, health information networks, and health information exchanges in violation could incur fines up to \$1,000,000 per violation

*Open API = technical and other information required for a third party application to connect to them is publicly available

**Only if the plan collects such data as part of regular business practice



Gerry Miller,
Founder & CEO



INTEROPERABILITY
INSTITUTE

Copyright 2020
CONFIDENTIAL – PROPRIETARY – RESTRICTED

Cloud-native healthcare data interoperability: how it's changing our present, our future

Gerry Miller Founder & CEO,
Cloudticity



Healthcare data interoperability is everybody's problem

- Reduce readmissions
- Improve efficacy of clinical decisions
- Create better patient experiences
- Drive additional revenue Perform
- COVID-19 surveillance, inform response and recovery

The Challenge: The Old Way Isn't Working

- Ingest vast quantities of healthcare messages at scale
- Get the data into the environment immediately
- Provide actionable insights using heuristics, BI, and machine learning – in real time
- Maximize security, availability, performance, and cost-optimization

The Solution: Cloudticity Healthcare DataHub™

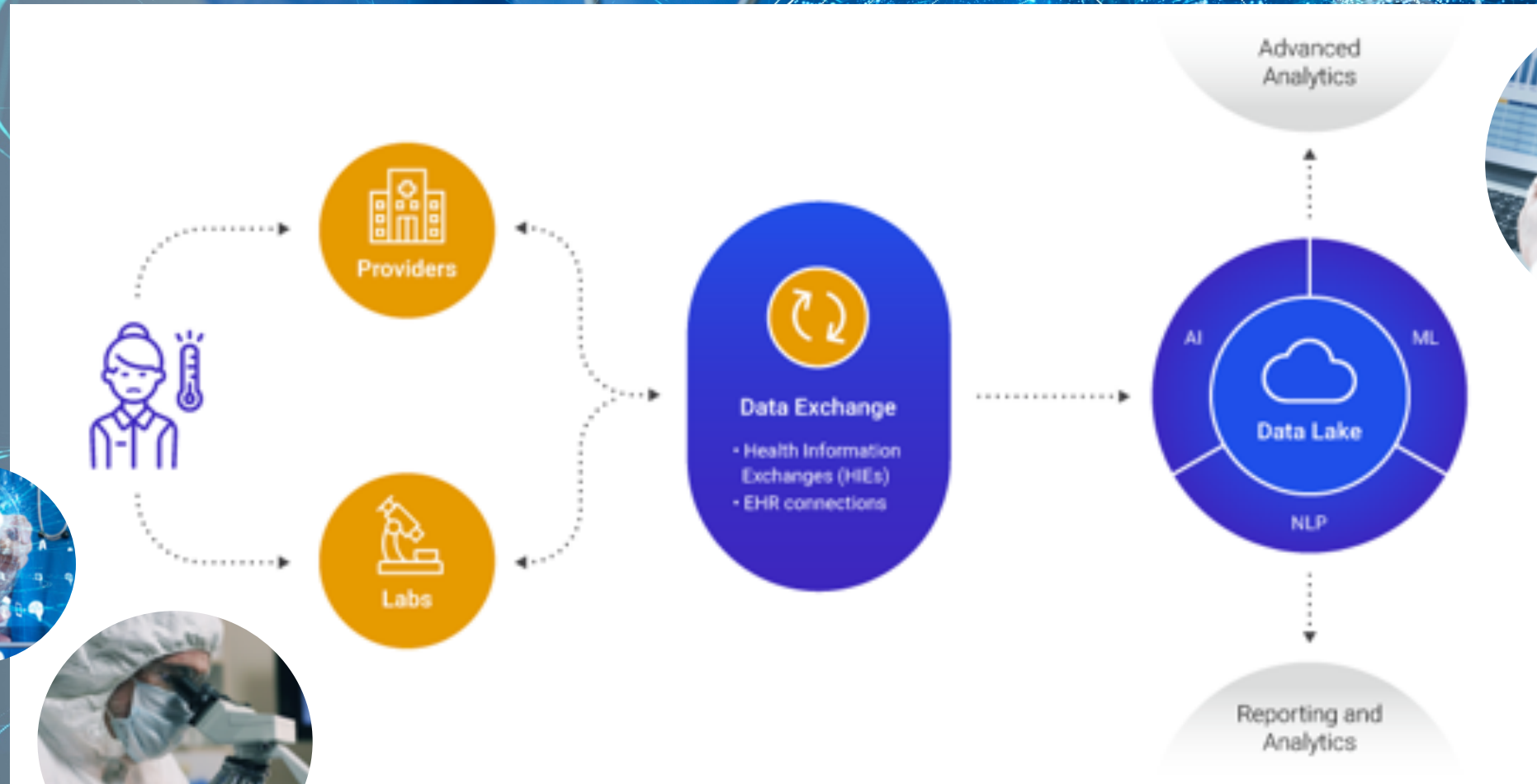
- 100% AWS-native
- 90% cost reduction
- Instant time to value



COVID-19 Use Case: A Real-Time Clinical Data Repository For Surveillance and Response

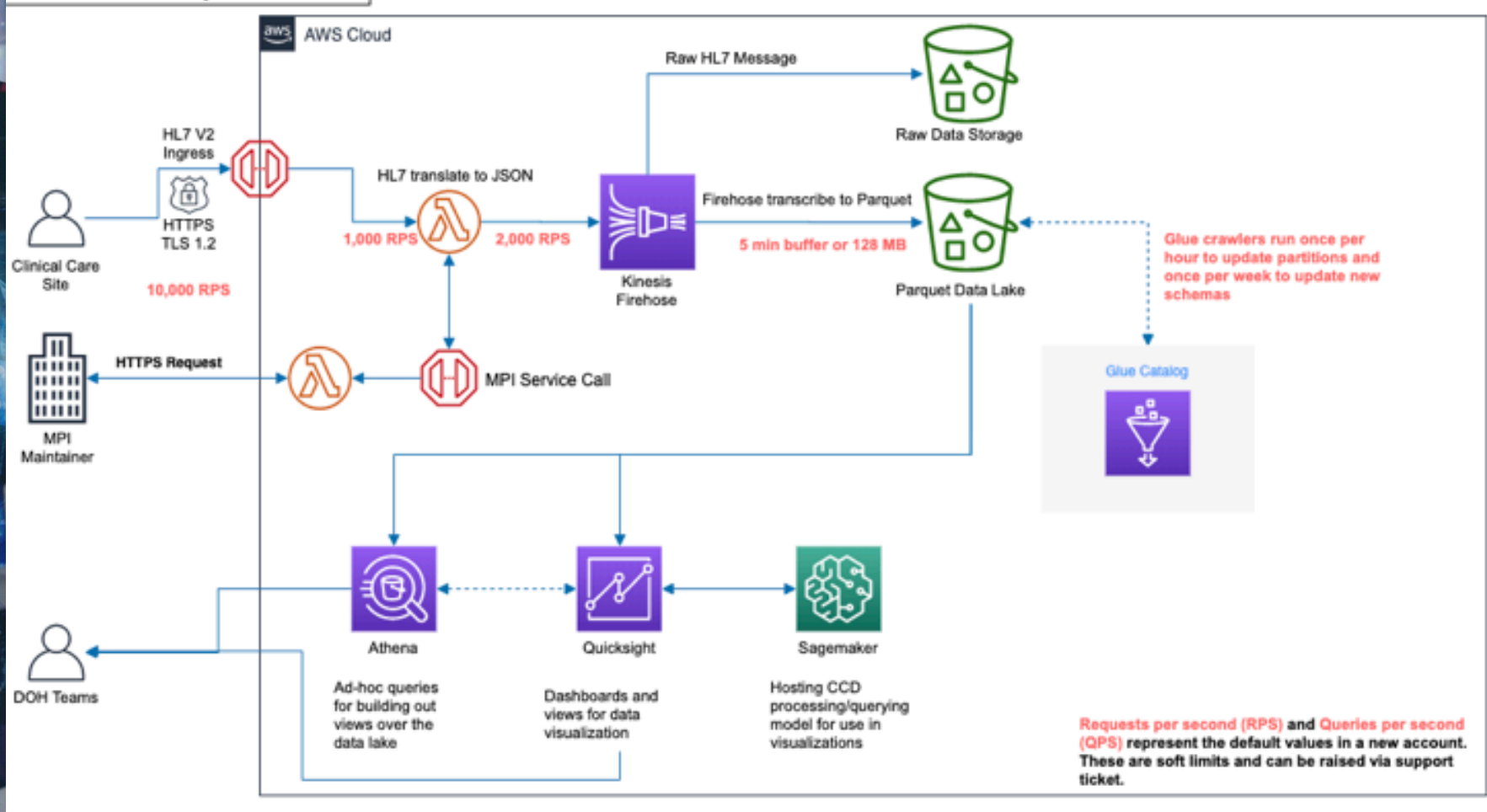
- Environments stood up in matter of hours
- Real time data on COVID-19 patients for real time policy responses
- Managed data lake

How It Works: Creating a flow of clinical and lab data to a data lake



Data Lake Architecture

Healthcare Analytics on AWS



What Insights Are We Discovering?

Response



Recovery



Comorbidities



Contact tracing



Hospital capacity



Genetic predispositions



Building risk profiles



Planning recovery



Patient trends

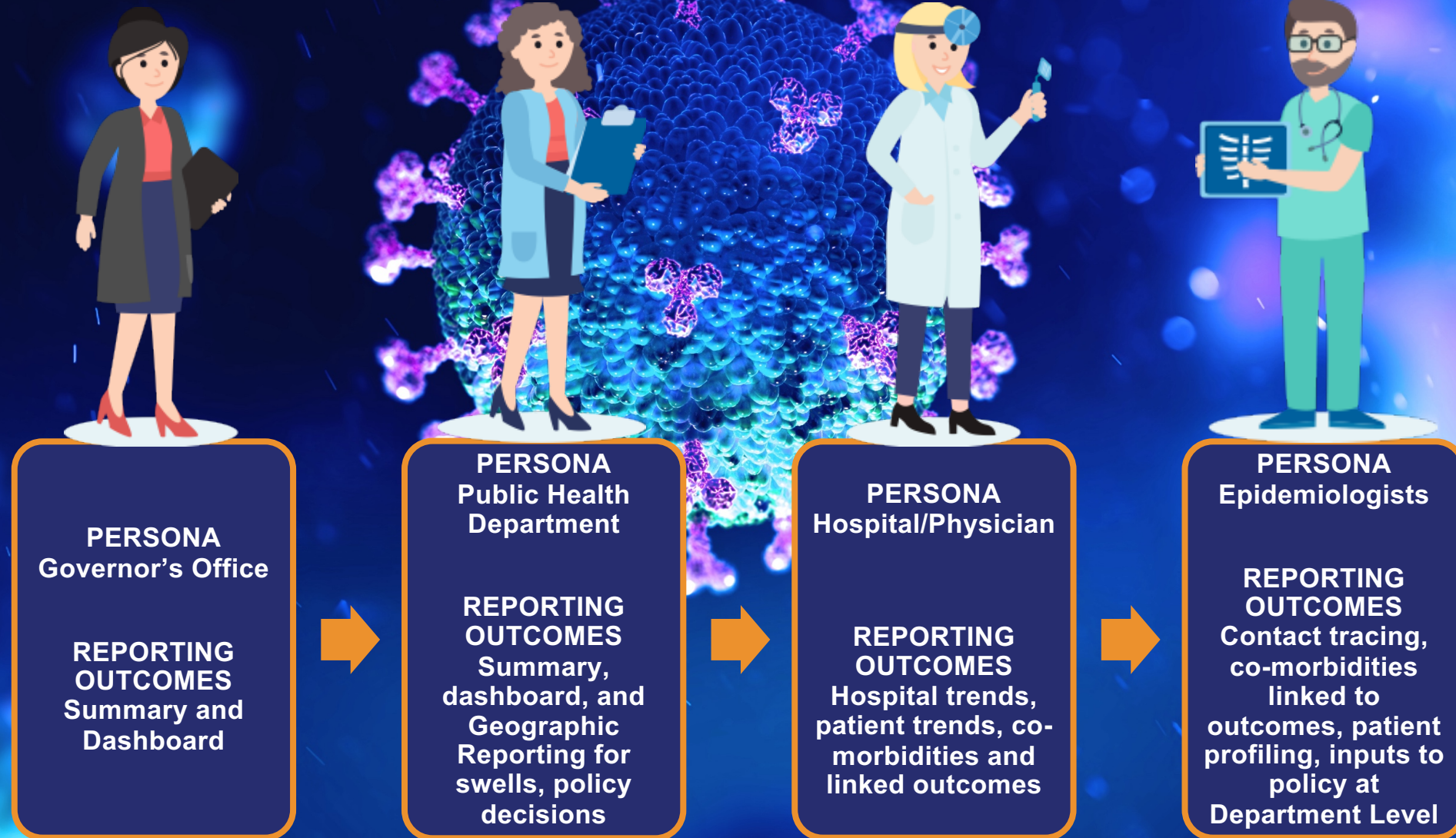


Managing ventilator inventory



Social determinants of health

Reporting



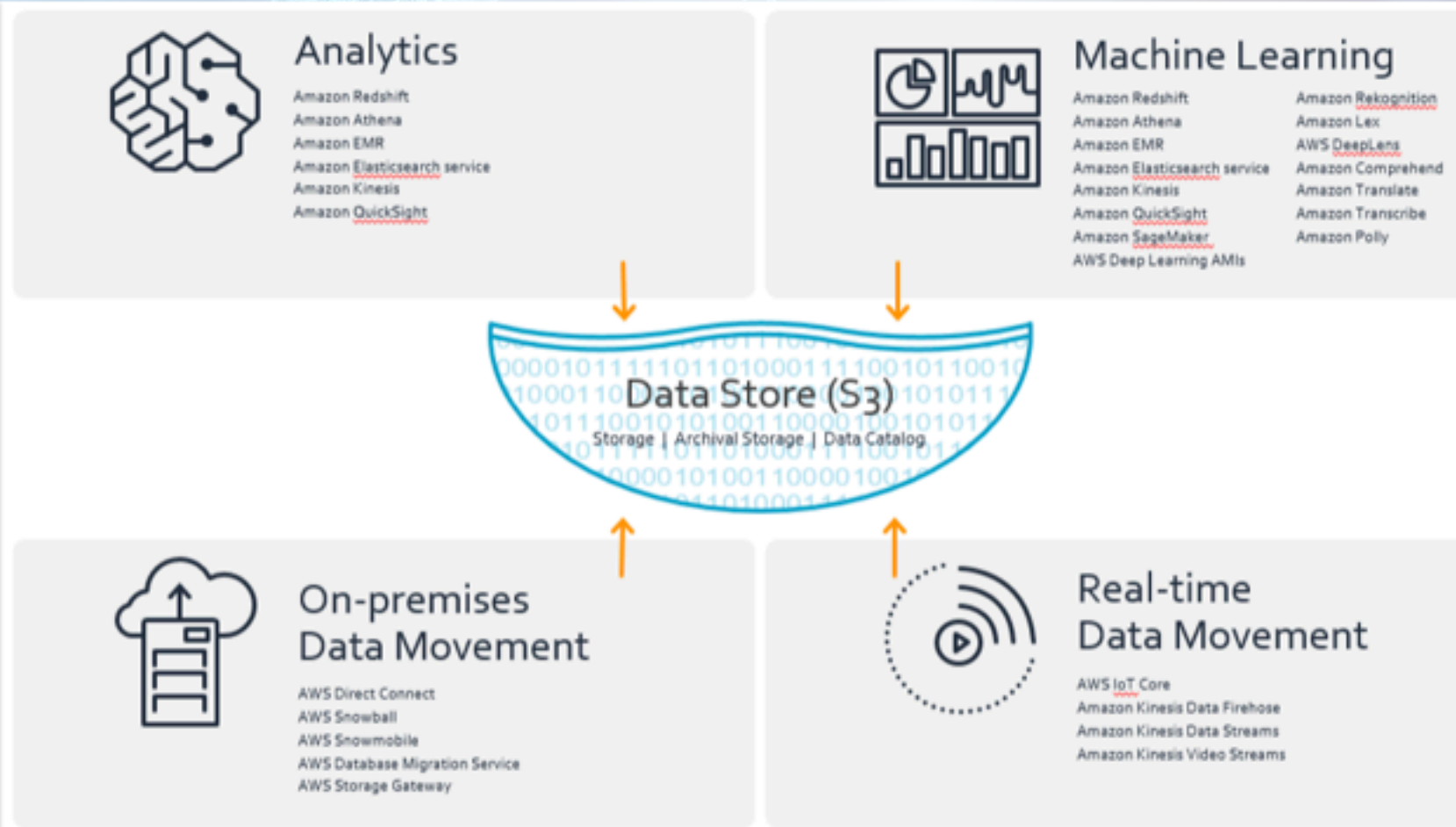
What Does It Look Like To Stand Up a Data Lake?

- These are the critical paths required to implement a real-time data lake for COVID-19
- State agencies must exercise authority to collect minimum data (patient level HL7 and CCDs) necessary for public health surveillance to combat COVID-19 with support from Governor
- Identify and integrate key stakeholders who manage healthcare data networks
- Deploy Data Lake Start collecting lab confirmed COVID cases
- Work within stakeholders to onboard gap of non-connected hospitals
- Establish real-time connection with Data Lake
- Start engaging with data, with support from AWS and Cloudfinity for AI/ML and queries

Cloudticity Healthcare DataView™

For COVID registry, **AWS** organized requirements across multiple HIEs and 118+ stakeholders, deployed AWS services, and trained analysts in eleven days.

They used services such as [Amazon API Gateway](#), [AWS Lambda](#) for conversion, Amazon S3 storage, [Amazon Glue](#) crawler on a [data lake](#) S3 bucket, and ran the data through [Amazon Kinesis](#).





Data Bringing Light to Darkness Illuminated By the Cloud

Thank you



To learn more visit cloudticity.com

Radically reshape healthcare by unlocking
the full potential of the cloud.



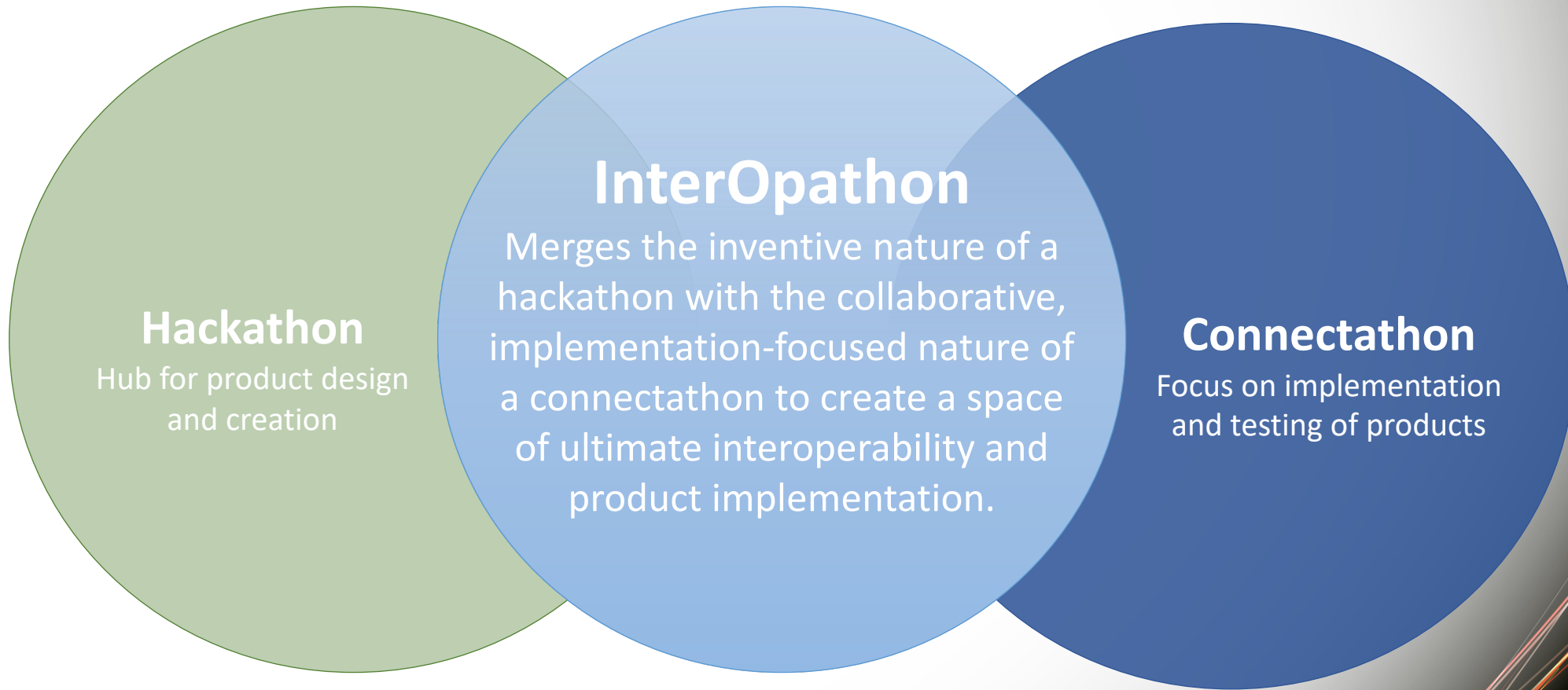
Tim Pletcher,
Executive Director



INTEROPERABILITY
INSTITUTE

Copyright 2020
CONFIDENTIAL – PROPRIETARY – RESTRICTED

Why “InterOpathon”?



#InterOpathon

HL7 FHIR Accelerators come together to address TEFCA compliance

As COVID pivoted the world from in-person to virtual venues, the MiHIN InterOpathon leveraged Interoperability Land TM to implement a live virtual event. Working collaboratively with the HL7 FHIR Accelerators, the HL7 Connectathon – to develop the HL7 standard – moved to the InterOpathon – cross FHIR Acceleration of real world interoperability solutions for TEFCA compliance.

IOL Roadmap

ONC/CMS rule compliance

- Patient Access API – Claims and Encounter Data (aka BlueButton)
- Provider Directory API
- Payer-to-Payer Data Exchange
- Patient Access API – Clinical Data
- Patient Access API – Plan Coverage and Formularies

2. IOL Network for collaborative community of partners to share persistent Testbed-of-Testbeds environment

- IOL Network creation - continue to pursue answers, learn together and share a legal environment
- Synthetic Personas to represent common use case scenarios
- API library – fast links to ubiquitous API solutions

3. Interoperability Land™ for academics creating virtual

Sandbox Persistence

- Utilize the persistent InterOpathon simulation environment from internal organization testbed to pre-Production as part of the path to real world solutions, standards and regulatory compliance
- Collaborate with other organizations to enable interoperability, first in a 'safe' shared testbed environment

Thank you to our sponsors:



**Blue Cross
Blue Shield
Blue Care Network**
of Michigan

Nonprofit corporations and independent licensees
of the Blue Cross and Blue Shield Association

