Igniting Interoperability

Real-World FHIR Services and Use Cases

Mike Yackanich, Vice President – Technology Integration

Michael McCune, Product Director – Solutions Engineering

Scott Rossignol, Partner - Farseen Consulting, Consultant to eHealth Exchange



Agenda

- Overview of eHealth Exchange FHIR services
 - FHIRProxy
 - Da Vinci Clinical Data Exchange (CDex)
 - Task Based Exchange (TBE)
 - SMART on FHIR Proxy
- Related Use Cases
 - FDA BEST Adverse Event Reporting
 - Electronic Prior Authorization
 - Member Match

FHIRProxy

- Foundational FHIR service
- Hub as Trusted Third Party/Intermediary
- Requestor only needs one connection to Hub to access many target responder FHIR resource repositories
- Routing MUST be provided on request
- Purpose of Use MUST be provided on request
- Hub handles backend security authorization with target responder (typically OAuth 2.0)
- Optional URL rewriting is available

CDex

- The requestor submits a FHIR Task resource to the CDex service that specifies details of the request
 - Identifies a responding organization
 - Identifies the FHIR resources to retrieve
- The CDex service responds immediately (synchronously), and begins to process the request and retrieve data in an asynchronous manner
- Requester can poll the Task, and when Task status is "completed" they can begin to retrieve related ndjson payload
- eHealth Exchange retains the ndjson FHIR resource data for 2 hours from the completion of the Task processing.
 - Polling interval for data retrieval is expected to be 1 hour or less.

eHealth Exchange Task Based Exchange Target eHx Hub Responder 1 Establish mTLS connection using eHx Private CA (for all interactions with eHx Hub) Task contains target responder and array of resource searches to perform a) the patient identifier or b) a data-query-patient-search or data-query-patient-match reques 3 Return HTTP 201 (Created) Requester now begins polling FHIR Task record for updates 4 GET Task resource to check for status 5 Return Task resource (status=assigned, in-progress, completed, etc. [For each resource search in Task] Hub now begins to retrieve data. A cached access token will be used if available 6 Obtain access token if provided, data-query-patient-search or data-query-patient-match is always performed first 7 Submit Requestor's FHIR resource reques 8 Respond with FHIR resource or Bundle 9 [optional] Update FHIR resource(s) for Hub compliance (url re-write, etc.) 10 Format and store FHIR resource(s) as ndjson payload 11 Update Task.output array with URL of ndjson payload Resource retrieval complete 12 update Task status to "completed" 13 GET Task resource to check for status 14 Return Task record (status="completed" [FOR EACH URL in Task.output array] mTLS connection must be established using eHx Private CA CName of client cert presented MUST match CName of cert that initiated the Task 16 Return ndjson payload

eHx Hub

Task Based Exchange (TBE)

All functionality of the CDex service, but with additional functionality

Pagination

Dynamic Patient \$match or Patient search

Patient search fan-out (FHIR and HRR)

Bundle Profiles

Dynamic Querystring Modifiers

Reference chasing

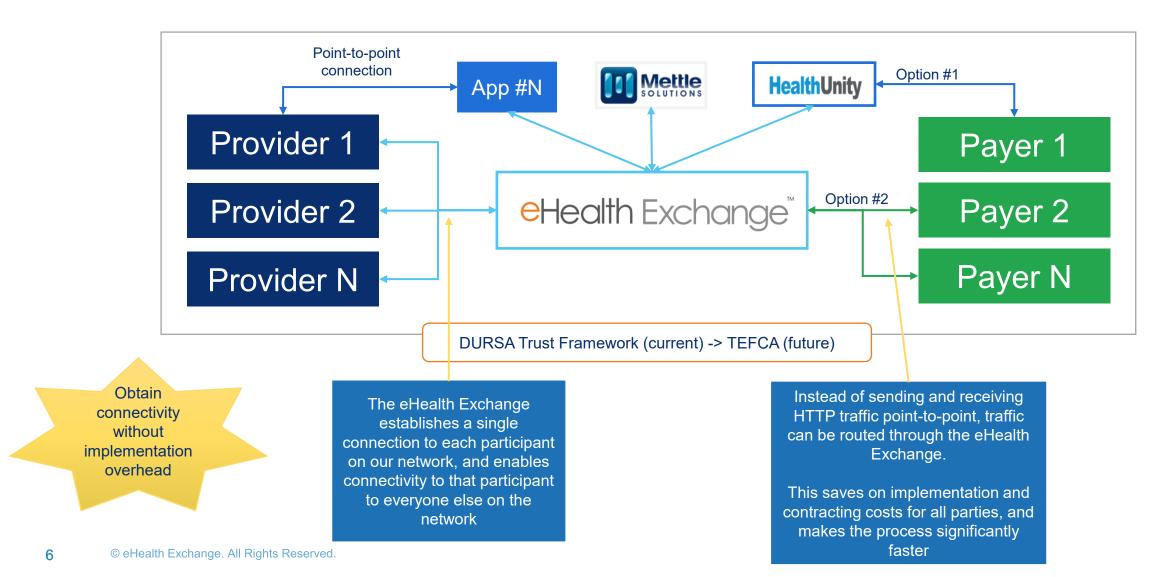
Conditional updates & conditional references

Member Attribution Check (Pre-process validation)

SMART on FHIR Proxy

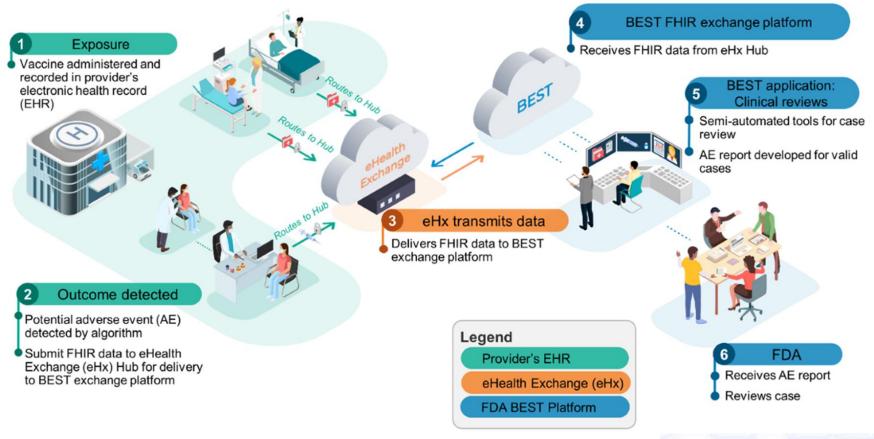
- Enable a SMART app on the eHealth Exchange network
- For ePrior Authorization apps:
 - A single app connects to all payers on the network
 - Eliminate provider onboarding processes for your app
 - Simplified legal/contracting terms via the DURSA
- Relies on the SMART standard for connectivity

SMART on FHIR Proxy Capabilities



FDA BEST Adverse Event Reporting

Postvaccination AE Detection and Validation



FDA BEST Adverse Event Reporting

Solution Redesign: The FDA has migrated the solution to their HIVE environment¹



New security requirement !!!

All connections between FDA and the eHealth Exchange must be initiated by the FDA



The recently deployed CDex Task-based Approach solution, along with enhancements developed as part of Task Based Exchange service, aligns well with this new requirement



Three additional use cases now live

- 1. Expanded list of biologics being reported in addition to COVID-19, viaunsolicited submission
- 2. Reporting of medication-based adverse events reported by patients via the MedWatch² system (FHIR Bundle contains Patient, Observation, Medication, MedicationAdministration, MedicationStatement, Practitioner, AdverseEvent)
- 3. Targeted "Pull" whereby FDA submits a request targeting a specific organization, versus the original geospatial fan-out

¹ High-performance Integrated Virtual Environment (HIVE)

² https://www.fda.gov/safety/medwatch-fda-safety-information-and-adverse-event-reporting-program

FDA BEST - Accomplishments



The first group of 11 pilot health systems demonstrated the value of using data interoperability standards for public health.



Award Received:

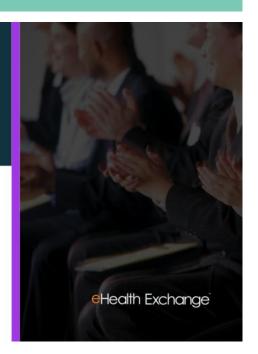
Use of FHIR® for innovative electronic exchange of clinical data for validation of adverse events.



Congratulations to



FORUM Innovation Award Winner!



See the poster describing this work.

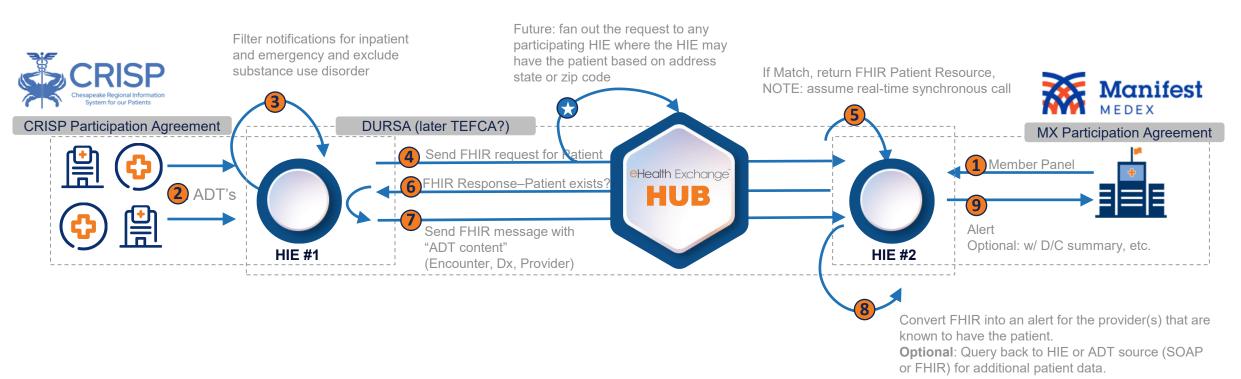
Electronic Prior Authorization

- Enable network-wide ePA connectivity with a single stroke
 - Supports DaVinci Burden Reduction standards, latest release (and backwards compatible)
- Free value-added services such as:
 - SMART on FHIR apps
 - Payer endpoint discovery
 - Patient/person coverage discovery
- eHealth Exchange leads Da Vinci Project Trebuchet
 - Come and join the fun start piloting today!

National Member Match

Use Case

Payer s(or a Provider with value-based care contracts), want to be triggered about all member encounters (from anywhere in the U.S.), to then obtain episodic clinical data to update priorities for care management teams, update gaps-in-care, and update risk stratification.





eHealth Exchange

Q&A