Beyond the APIs
Using Interoperability to Make Meaningful Connections

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What is Interoperability?

- Four key requirements of the CMS Interoperability Rule*:
    - **Provider Directory API (7/1/21)** – Makes provider directory information publicly available via a standards-based API, enabling developers to access information and create services in order to help patients find providers for care and treatment.
    - **Patient Access API (7/1/21)** – Allows patients to easily access their claims and encounter information, including cost, as well as a defined sub-set of clinical data through third-party applications of their choice.
    - **Payer-to-Payer API (1/1/22)** – Patients may request certain clinical data be shared from payer to payer to help their current payer create a cumulative health record.
    - **Medicare Data Exchange (4/1/22)** – Increases the frequency of enrollee data sharing between Medicaid and Medicare from monthly to daily.

- On the horizon:
    - **Prior Authorization (NPRM closed 1/4/21)** – Streamlines processes related to prior authorizations to reduce burden on providers and patients, leaving more time for providers to focus on patient care.

* https://www.cms.gov/newsroom/fact-sheets/interoperability-and-patient-access-fact-sheet

Where does Interoperability fit into a Medicaid Program and who are the right partners?

- Maryland is ~85% managed care, with carve-outs for LTSS, Behavioral Health and Dental services (require MCO providers to enroll through FFS)

- Internally, think about who manages your:
  - Provider data, provider directories
  - Claims and eligibility data
  - Recipient/Participant/Beneficiary communication and data access points

- Given the tight timeframe, Maryland reviewed current partnerships and familiarity with a diverse set of Medicaid data

- We also knew that we wanted to look beyond the APIs – where could we go in the medium term with the right partnership? How could we make a more meaningful connection with our Medicaid participants?
  - For example, while our Medicaid records generally only have EOB type information, as the State's Health Information Exchange (HIE), CRISP holds a great deal of clinical information that we could eventually make more accessible to participants
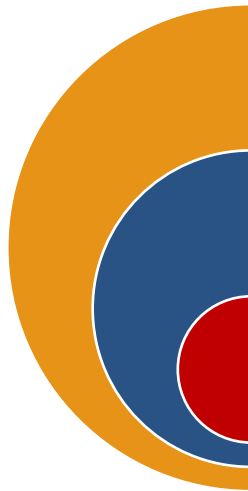
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CRISP's strong partnership with Maryland Medicaid positioned our team to assist the States in conforming with the CMS Rule

CRISP is Maryland's State-designated HIE

We serve as a data utility for the region connecting hospitals, care practitioners, policy makers, and public health officials with multiple streams of data

CRISP already received claims and encounter data from Maryland Medicaid

- DUAs in place
- Connection with data center in place

CRISP had available resources/knowledge to provide guidance on the rule, identify vendor stack options, coordinate resources

- Proven track record for advocating for patient privacy and security
- Contracting vehicle available through state-designated status

CRISP positioned with other data for the members for later additions to patient apps

- Maryland Medicaid looked beyond current rule requirements to think about future data to be made available to the Medicaid member

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About Leap Orbit

Leap Orbit is an established digital health company with a proven track record of building enduring assets and bringing them to market.

- Founded in 2015 in Columbia, MD

- 100% founder- and employee-owned

- Certified minority-owned business

- 30 employees – majority technical, lean operating model

- National client base covers health information exchanges (HIEs), health plans, and government agencies

- **Early leaders in implementing HL7's Fast Healthcare Interoperability Resources (FHIR) standard in the real world**

Fig. 13

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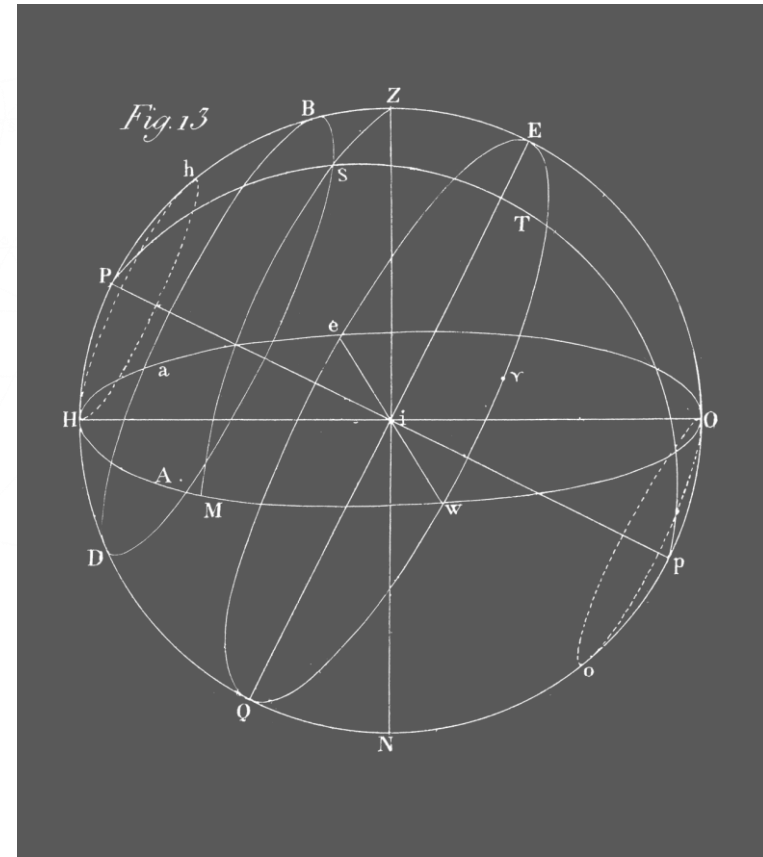
Key Deliverables for Medicaid

Practitioner API Live	**Organization** Live
Bulk FHIR API In flight	**Documentation** Live

See it yourself: https://health.maryland.gov/mmcp/Pages/Interoperability.aspx
and https://maryland-medicaid-fhir-api.readme.io/reference
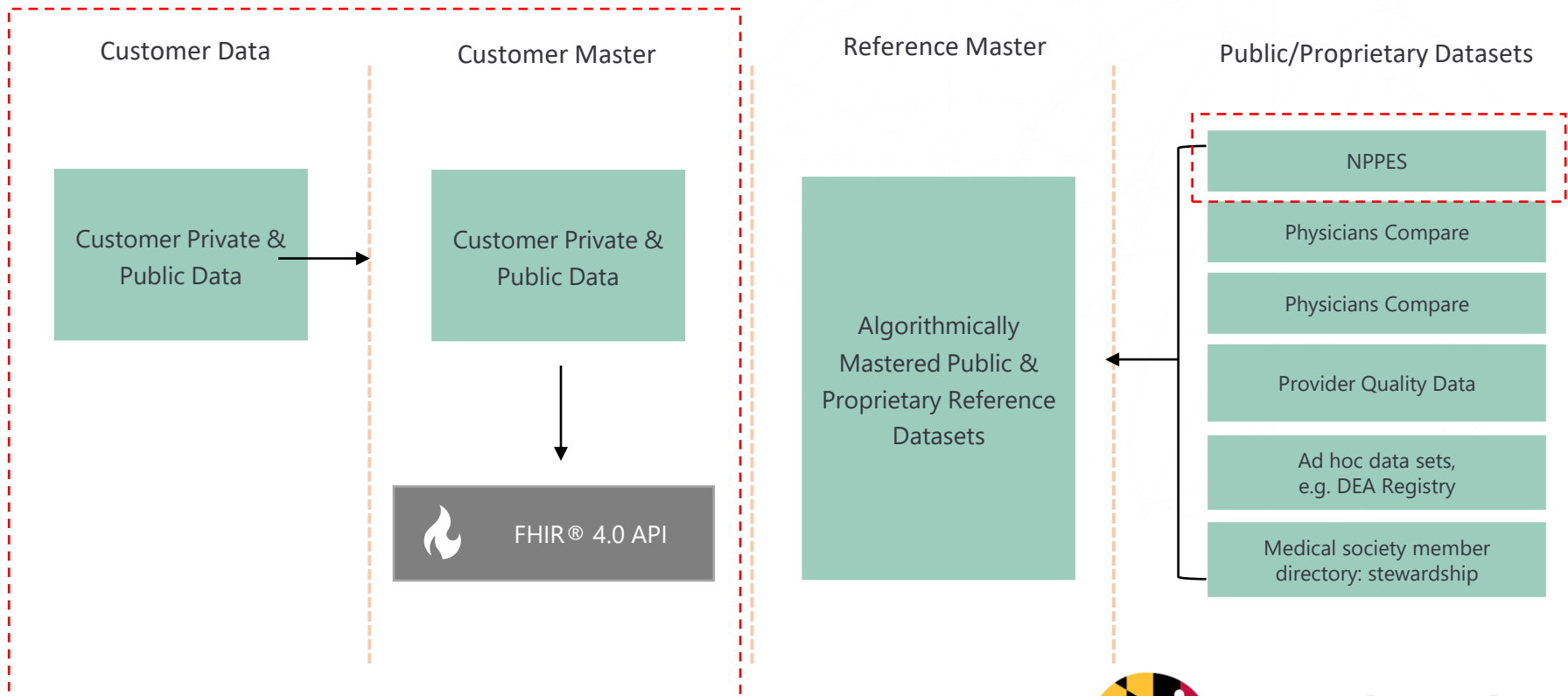
Data-as-a-Service &
The Power of Microsoft Azure

Leap Orbit

- Scalability/the cloud

- Doesn't have to be extremely expensive

- Not necessarily custom

- Benefits of shared infrastructure and, when allowed by data use terms, shared reference data

  - Directory is not hit 10,000 times per day for a range of use cases

  - Leveraged across multiple stakeholders for clinical and administrative purposes

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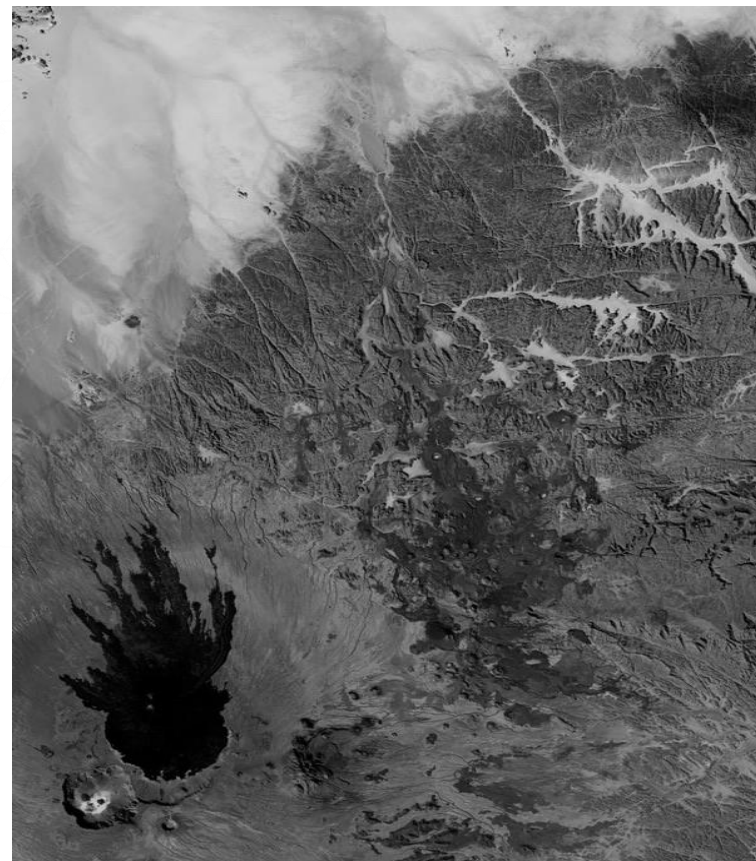
Benefits of a Shared Dictionary

Private data with optional data enrichment can leverage everyone's shared effort

Customer Data

Customer Master

Customer Private & Public Data → Customer Private & Public Data → FHIR® 4.0 API

Reference Master

Algorithmically Mastered Public & Proprietary Reference Datasets

Public/Proprietary Datasets

- NPPES
- Physicians Compare
- Physicians Compare
- Provider Quality Data
- Ad hoc data sets, e.g. DEA Registry
- Medical society member directory: stewardship

About Onyx
A fully owned Subsidiary of NewWave

- Onyx was incubated as part of the NewWave Innovation Division since 2018 by the team that implemented Blue Button 2.0 for CMS.

- Onyx was incorporated on April 1, 2019, as a sister company of NewWave focused on product development.

- SAFHIR, the Health Interoperability Platform offered by Onyx, was built jointly with Microsoft and ranked as a top FHIR provider by Gartner, and most recently awarded the:

  - "**2021 North America Enabling Technology Leadership Award for Healthcare Data Interoperability**" **~** by Frost and Sullivan.

- National commercial and federal/state customers, including the august members of this panel

- Nationally recognized Leaders in FHIR standards development and implementation

- Certified Minority Owned Business

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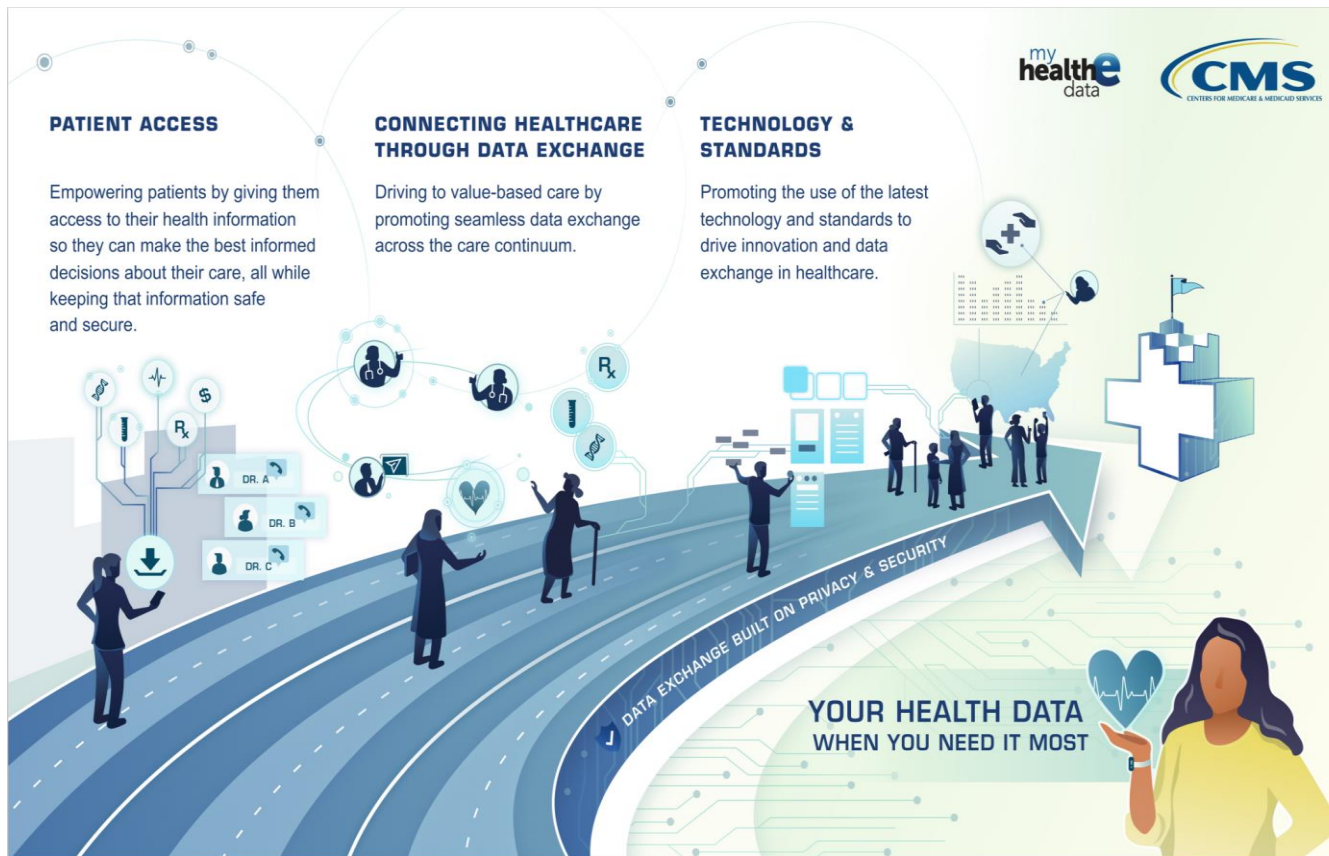
Products Launched

Market Leadership

Team is involved in defining standards, solution roadmap addresses opportunities beyond CMS Mandate

Patient Access and Provider Directory
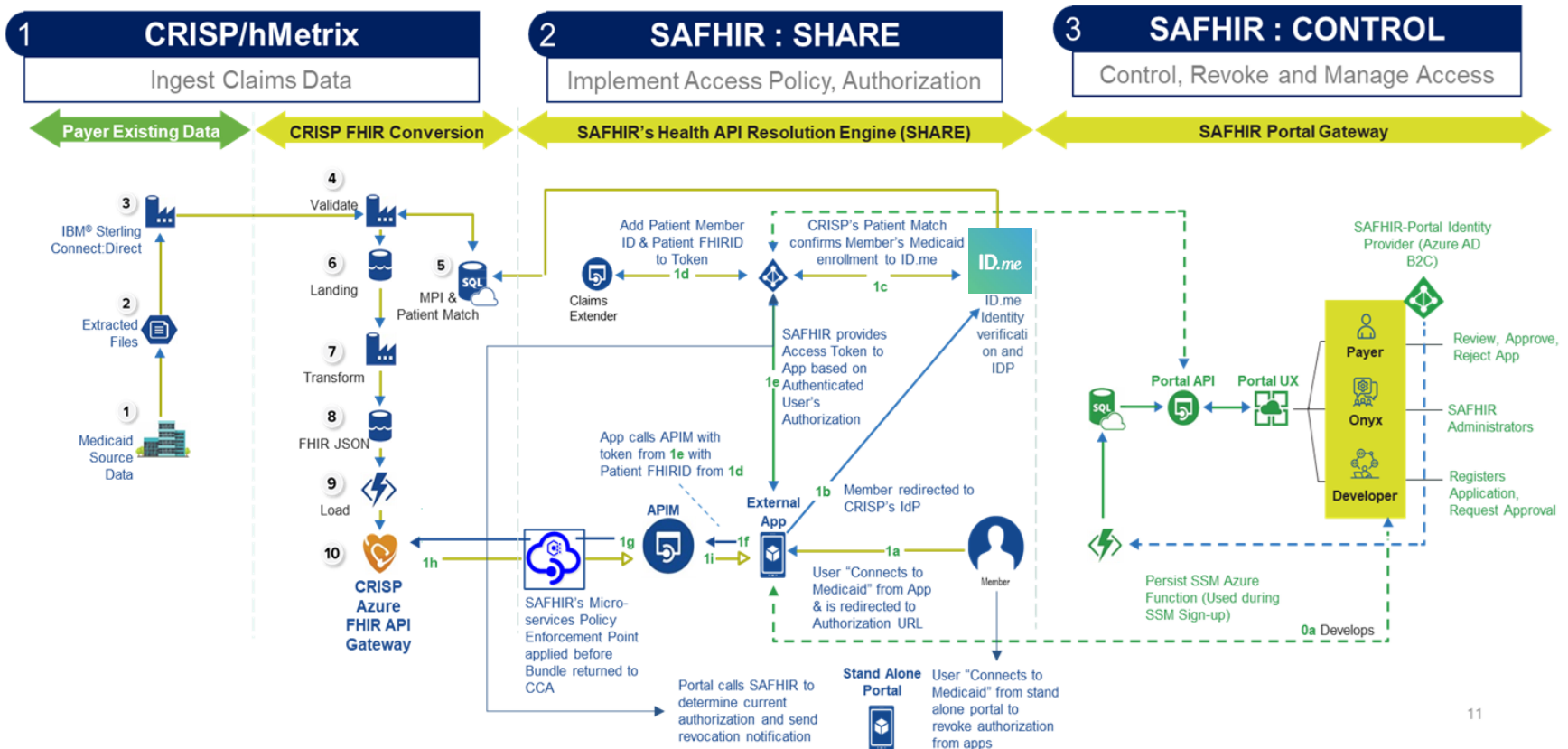**Just the beginning of the journey…**

The work being done today is the beginning of a journey.

While delivering benefits today, we are also establishing the foundation to enable future use cases that:
- improve healthcare outcomes
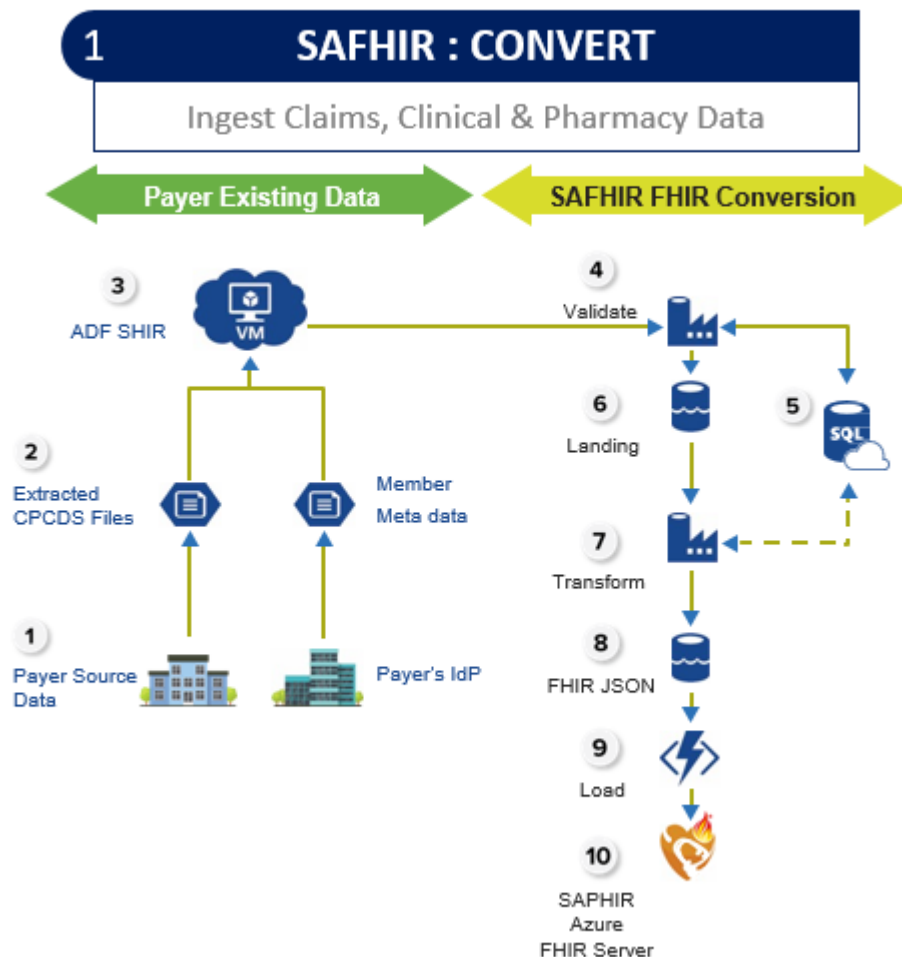- improve whole person outcomes
- advance societal equity.
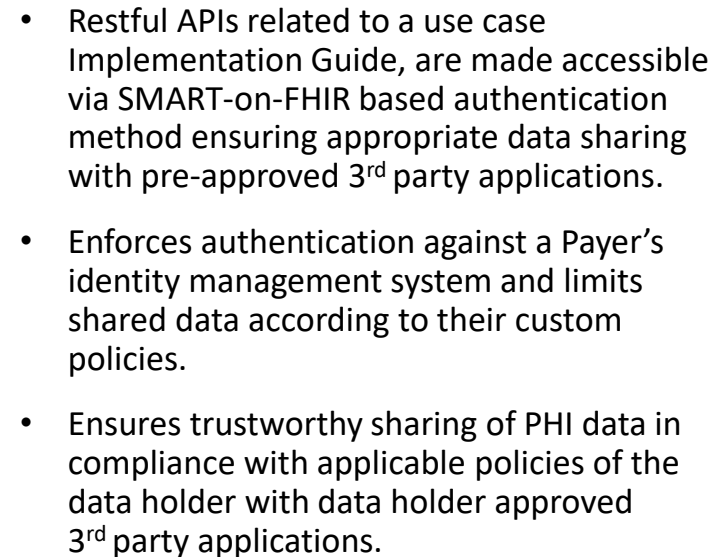
About the SAFHIR implementation for Maryland

SAFHIR Convert
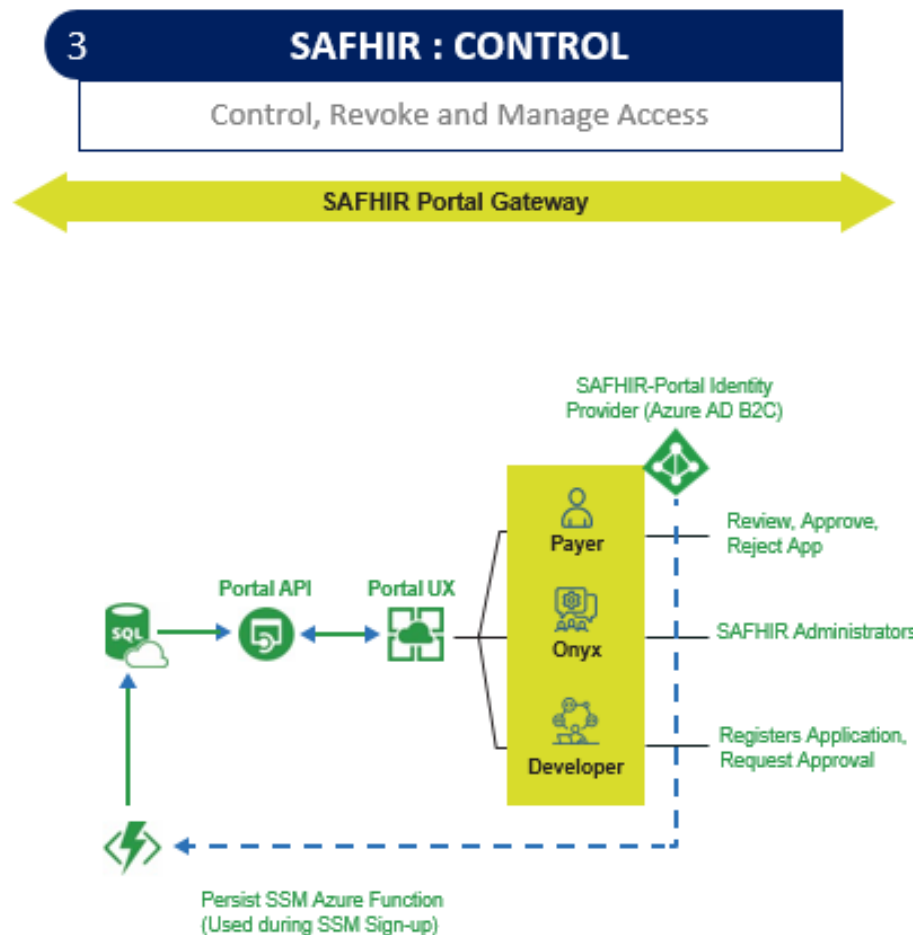# Ingesting Data from Various Sources

- Data ingestion is performed using Azure Data Factory which transforms data from legacy format into standards/FHIR compliant format.

- A multi-step data ingestion/transformation pipeline that is accompanied by a meta-data store capable of uploading and transforming non-FHIR source data and loading it into a FHIR server.

- Every pipeline includes client specific pre-processing pipelines that enable custom data validation and transformation as necessary.

- Reuse of a standards-based converter framework facilitates transformation from HL7 V.2, CCD and other common health data formats.

- API based ingestion of FHIR resources from other FHIR-based systems such as EMRs natively supported.

SAFHIR Share
Controlling access to Data and API

- Restful APIs related to a use case Implementation Guide, are made accessible via SMART-on-FHIR based authentication method ensuring appropriate data sharing with pre-approved 3rd party applications.

- Enforces authentication against a Payer's identity management system and limits shared data according to their custom policies.

- Ensures trustworthy sharing of PHI data in compliance with applicable policies of the data holder with data holder approved 3rd party applications.

SAFHIR Control
Share Data based on Policies

SAFHIR : CONTROL

Control, Revoke and Manage Access

SAFHIR Portal Gateway

- Data Holder self service user interface and governance layer to manage the approval of which apps are authorized to access APIs on a use case basis.

- SAFHIR Portal enables 3rd party application developers to register applications and seek data holder approval for access to one or more use cases.

- Data Holder controls who can gain access to data on a use case basis (by IG). Approve or deny 3rd party application's access to one or more use cases.

- SAFHIR Administrators' access to security and usage logs and other system information.

Discussion Topics

- Use this opportunity to leverage connectivity of your data resources.

- This is more than a FHIR API; Identity verification and identity provisioning plays a major role.

- Remember scale. How will the solution work when you have 100 third party apps?

- Partnerships or a single solution

- Leverage Medicaid dollars, position for the future

- Managing Minor Consent

- Participants may need to use multiple apps to access their data from an MCO, Medicaid FFS and other insurers

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