CARIN Alliance and FHIR Foundation Meeting

Recap

September 5, 2017

Purpose: A few members of the CARIN Alliance met informally with Aneesh Chopra and Grahame Grieve of the FHIR Foundation to discuss progress on the next edition of FHIR and possible approaches to patient matching and authentication.

Key Discussion Points:

- The FHIR Foundation is focused on implementation and looking for ways to stabilize the FHIR Standard moving forward by making it a normative standard
- Patient matching and authentication will continue to be a challenge
  - The group discussed Dynamic Knowledge-Based Authentication directly from within FHIR apps for both patient proofing and matching. This process would be similar to what LexisNexis provides other industries but could be built using FHIR calls against EHR data
  - SCIM was recommended by Grahame as a protocol that could be leveraged to help with identity management and would link back to Oauth and FHIR
- Bulk data transfer is a priority for the ONC
  - Oauth can be used to help with bulk data and was used with the DOE for solar efforts
  - The group supports using Oauth for connecting apps
- The group is exploring ways to use a subscription model to have persistent access
  - This could help put a request out for a provider to send data every time it changes and would be able to work through FHIR given that it is a push of information
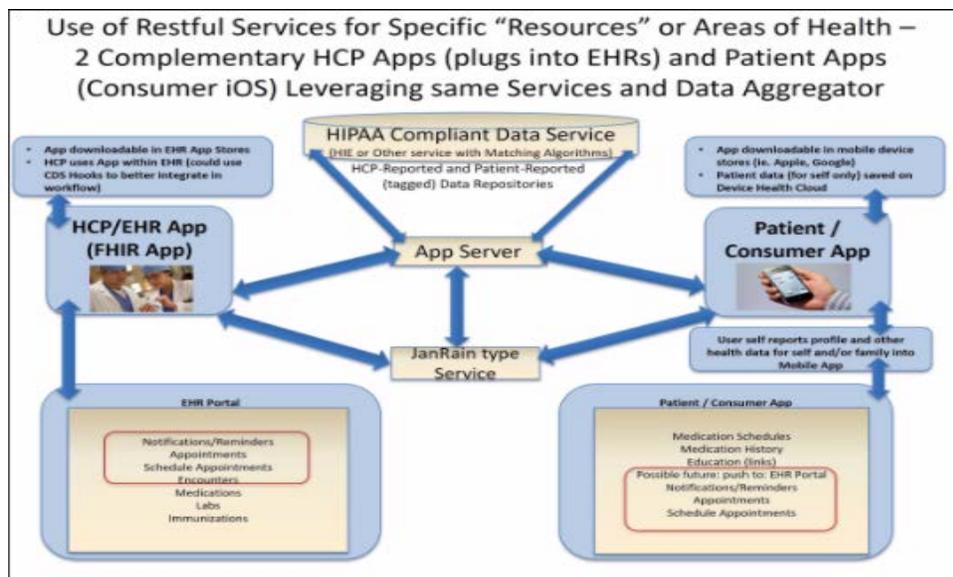
Action Items:

- Follow-up on SCIM to determine if it could be used for identity management
- Follow-up on how to leverage FHIR within the Argonaut spec as a subscription-based approach
- Examine ways to leverage KBA and key data elements within FHIR to ID proof individuals across systems and assist with patient matching
- Follow-up with NATE on ways to leverage the FHIR service being built for the Connect-a-thon to authenticate FHIR end points
- Follow-up with Pfizer to get more information on the business and technical details of their workflow to determine how CARIN could leverage it for consumer-directed exchange where appropriate
- CARIN should discuss what the policy framework should be to implement subscription-based approach with persistence to accessing data (Cerner and Epic appear to support in later versions of FHIR)
- Look for ways to work with Argonaut (Micky) in supporting open notes with FHIR next year
- Overall goal: Develop a scalable technology and policy workflow for CARIN to demonstrate with the FHIR community and HIMSS interoperability expo at HIMSS in 2018

FHIR Update from Grahame Grieve:

- FHIR Effort
  - Release 4 is being planned at HL7 and will be balloted in early 2018
  - At this point, certain parts of the FHIR standard will be considered normative – these include APIs, terminology, and patient/observation
    - The goal is to make the standard stable moving forward
  - FHIR is looking for ways to work on broad data exchange versus granular exchange, as has been the previous focus
- Argonaut Implementation
  - The FHIR Foundation is working on implementation for communities
  - There is an outstanding challenge of getting providers to turn on the third-party APIs
- Policy Work
  - FHIR is working with ONC to look at bulk access and bulk data exchange
- Patient Identifiers
  - Some countries are using a national patient identifier, but this is unlikely to work in the United States
  - Matching on FHIR-based data elements like gender, DOB, name, etc. can be a way around this issue and provides an 85%-90% or more match rate
  - An opportunity to increase patient matching success is to let a consumers design a way for them to provide a unique ID or engage the consumer in KBA (knowledge-based authentication)
  - FHIR is currently working with HL7 to consider ways to do patient identification through the patient-matching capabilities already included in the patient-operations FHIR resource
- There is not currently a plan within FHIR to publish endpoints until the governance and policy issues get resolved
  - Discussion is currently taking place between FHIR and NATE on a third-party service to assist
  - Looking at HL7, NATE, ONC, and others as a centralized placed to store the end points

Proposed Method of Sharing Information and Authenticating Patients

Use of Restful Services for Specific "Resources" or Areas of Health – 2 Complementary HCP Apps (plugs into EHRs) and Patient Apps (Consumer iOS) Leveraging same Services and Data Aggregator

- Bev shared a model that may be considered for sharing information and authenticating patients
  - CARIN will be looking to help support this model to determine if CARIN can adopt this general technology workflow to leverage the other open standards we have discussed in the past as a means to solve authentication, data sharing, and patient matching across systems for consumer-directed exchange.