

### CARIN Community Meeting

March 9, 2021 | Virtual

#### Objectives

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The CARIN community, made up of the CARIN Board, Affiliate Members, and Special Guests, met virtually to discuss CARIN Alliance Workgroup accomplishments in 2020 and to review proposed new work in 2021. The Digital ID and Authentication Roundtable shared observations from their work in process and the community received an update from CMS on recent rulemaking.

#### Key Discussion

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##### *General Announcement – David Lee, Leavitt Partners*

- Dave welcomed the group to the meeting and thanked them for their engagement.
- Ralph Hall reviewed our annual anti-trust compliance reminder.

##### *Consumer Advocate Story – Jennifer Blumenthal, OneRecord*

- Jennifer shared the story of a young woman who faced significant health care challenges and data access issues. As a result of the challenges of her condition, OneRecord was established to help better organize and track her medical records.

##### *“In Production” Updates*

- CARIN IG for Blue Button®
  - In production examples
    - Humana – Payer perspective
      - Humana and Aetna are both live with the CARIN IG for Blue Button®.
      - Humana shared some of the challenges that they overcame as they implemented the IG and the strategic decisions that they made to make claims access available to all of their members to exchange their data with an app of their choosing.
      - Their developer portal was built by developers for developers to be designed for the audience that will use it and included things like: self-service and a sandbox to try out the service.
      - Humana also demonstrated the API portal experience available for developers. They have 9 test APIs available including procedure, coverage, EOBs, immunization, condition, CareTeam, MedicationRequest, and CarePlan.
      - Humana shared that as part of the registration process the app has to enter in information about the product and are not requiring the app to attest, but are making that information available to users to know that they have not attested. They also included an indemnification clause.
      - They support multiple redirect URI per App(project).
      - They are working to build out a landing page where members can look at the apps that are currently connected with Humana.
    - Aetna
      - Aetna also shared that in term of lessons learned there can be interpretational differences in the rule, and it has been very helpful to work in the connectathons and through the alliance to discuss those items.
    - Humetrix / iBlueButton – Application perspective
      - Humetrix provided a demo of their app and shared clinical and claims data and walked through how they are also displaying vital sign and lab results.

- Digital Identity
  - **Individual Identity:** CARIN published a [Digital Identity and Federation White Paper](#) last year on the approach we recommend taking to solve for identity in health care. We will be publishing our Digital Identity Federation agreement in 2021.
  - **Organizational Identity:** CARIN is supportive of using the [GLEIF model](#) and specifically, the digitally signed Legal Entity Identifier as the primary means to identify an organization. The organization could include an application, a business, or an organization.
  - ID.me shared an update on efforts that are undertaking with the Department of Veterans Affairs, Internal Revenue Service, Department of Motor Vehicles, and others to authenticate and verify the identity of users when they login to accounts. Other identity providers are undertaking similar activities.

### *Leadership Perspectives – Aneesh Chopra, Care Journey*

- Aneesh lead an open discussion to ask the Community about which topics and issues CARIN might look to explore in the future.
  - The discussion included ways in which the industry can implement can share best practices as they develop portals and build apps to implement the CARIN IG for Blue Button®.
  - There was discussion about whether a mapping of the clinical side for QRDA need to be mapped to FHIR and whether these could fall under the content that is needed for USCDI and if so, how could you make that available?
  - The CMS guidance in the FAQs appeared to say that the unstructured data is not required. If it is under USCDI then the guidance is that you can send it unstructured. You could attach QRDA as-is, or parse it. But to the extent that QRDA includes measure data, that is not part of FHIR US Core.

### *“In Flight” Work Discussion*

- Dental/Vision updates to the CARIN IG for Blue Button
  - There will be a Virtual CARIN Connectathon on April 14-15.
  - Background: CMS final interoperability rule (9115-F) requires that dental and vision claims are included in the Patient Access API. CMS clarified in Oct 2020, that a payer will comply with the final rule if they implement the current published version of the CARIN IG for Blue Button which does not include dental / vision. CMS also clarified by email that dental / vision will only be required once they are included in a published HL7 STU2 version (or later).
  - Dental/Vision Profile Scope: For vision we will reuse professional non-clinician profile because the FHIR profile elements will serve the content required for vision and we do not want a proliferation of profiles. The current CPCDS elements are sufficient to capture the vision elements. The vision claim type will use the same type as professional non-clinician.
  - Progress / timing: CARIN has been working with payers to understand the timing for balloting STU2 which will include dental / vision. Current ballot timeline is September 2021.
  - Working meetings: Dial-in number for the Thursday 11am ET meeting and the latest updates can be found here: <https://confluence.hl7.org/pages/viewpage.action?pageId=104570>. Current in process draft (not final) STU2 version with proposed dental/vision profiles: <https://build.fhir.org/ig/HL7/carin-bb/branches/stu2.1/>
  - Questions?: Please contact Mark Roberts ([mark.roberts@leavittpartners.com](mailto:mark.roberts@leavittpartners.com))
- CARIN IG for Digital Membership ID Card Published updated V.2 of Code of Conduct
  - Background: Project initiated and being driven by the CARIN payer members to display rendering of member’s payer ID card
  - Progress / timing: Project Scope statement can be viewed here. High-level draft of the core attributes and mappings available for review during the April CARIN Connectathon and May HL7 Connectathon

- Working meetings: We plan to hold working IG meetings for all CARIN and HL7 members in the May/June timeframe
- Questions?: Please contact Mark Roberts ([mark.roberts@leavittpartners.com](mailto:mark.roberts@leavittpartners.com)) or Adam Culbertson ([adam.culbertson@humana.com](mailto:adam.culbertson@humana.com))
- CARIN IG for Consumer-facing Real-time Pharmacy Benefit Check
  - Background: CARIN members worked with HL7 and NCPDP to create an IG for individual members to know their formulary and benefit information, out of pocket costs, therapeutic alternatives, and cash price options.
  - STU1 Publication: The CARIN IG for consumer-facing real-time pharmacy benefit check was published in August 2020 (<https://build.fhir.org/ig/HL7/carin-rtpbc/index.html>)
  - Next Steps: We are in contact with the 5 major PBMs. Many are developing their FHIR infrastructures in conjunction with their payer partners for 7/1. We anticipate we can begin robust testing with the PBMs in Q3/Q4 of 2021
  - Questions?: Please contact Dave Lee ([david.lee@leavittpartners.com](mailto:david.lee@leavittpartners.com)) for more information
- Vaccination Credential Initiative
  - Background: The primary aim of VCI is to enable individuals to access a trustworthy and verifiable copy of their vaccination records in digital or paper form. To achieve this purpose, participating organizations commit to implementing, testing, and refining the SMART Health Cards Framework within their sphere of influence and will also commit to providing vaccination records directly to citizens if such records are in their stewardship. They may also be called upon to assist in other ways as necessary to ensure the success of the initiative.
  - VCI Steering Committee:
    - MITRE, The Commons Project Foundation, Mayo Clinic, Microsoft, Evernorth, CARIN Alliance
  - Governor Leavitt's February 3rd [House E&C Health Subcommittee testimony](#)
  - Important links: [SMART HealthCards framework](#)
  - How to get involved: <https://vaccinationcredential.org/join-us>
- Patient and Care Partner Workgroup
  - Background: The Patients and Care Partners Workgroup is being created to ensure inclusion of the patient voice and to make recommendations to the CARIN Board. The workgroup will focus on meeting the following objectives:
    - Share patient stories: Patient stories are an effective way to educate and drive change
    - Learn about the CARIN Alliance priorities and how they impact the patient and care partner communities
    - Provide input on the CARIN Alliance priorities for 2021
    - Help establish the agenda for the broader CARIN Community Meetings from the perspective of patients and care partners
  - Next steps: First call will take place later this month. If you have any recommended participants email co-chair Morgan Gleason ([morgan.gleason@icanbwell.com](mailto:morgan.gleason@icanbwell.com)) or Dave Lee ([david.lee@leavittpartners.com](mailto:david.lee@leavittpartners.com))
- CARIN Trust Framework Workgroup: Application Registration Guide
  - Background: The application registration process is critical to ensuring individuals can have seamless access to their health information across systems. The workgroup is considering how we develop a set of best practices for both payers and providers?
  - Purpose: To achieve these outcomes, open data must be accompanied by trust, to prevent unauthorized uses or disclosures of HIPAA protected health data. Data holders and implementers must not only set-up open APIs, but they must also exercise diligence when implementing app registration workflows and standards to obtain reasonable assurances that:
    - Requestors are who they say they are,
    - Requestors are authorized by end users to access the data they request,

- Data connectors are who they say they are, and
- Requests made through apps have authorized the data connector to access the data they request
- Next Steps: We will engage in a survey of current practices for the following key questions:
  - How does an application connect to the payer/provider systems today? What are the best practices in production?
  - What does the patient/member see? What disclosures are provided and from whom?
  - How does the patient/member revoke consent and access (from both the app and the payer/provider)?

### Next Steps

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- The Q2 2021 Community meeting will be virtual. Dates will be announced soon.
- We would appreciate your feedback on holding 2022 CARIN Community meetings and whether they should be in person, remote, or a hybrid.