

### **Zoom Meeting Interface and Basic Logistics**



\*image above is a publicly available tutorial image obtained from Zoom website

- All Attendees will be muted during this presentation.
- CHAT: The chat function is open to *ALL* participants (bottom, middle right, highlighted in orange in this image). Attendees are encouraged to provide feedback and questions via chat during the presentation.
- BREAKOUTS: Attendees will be pushed into their respective breakout rooms at the end of this session. Please stay logged in during the break to enable this process. If you log out and log back in you will be put back into the main session and will have to wait for the host to put you back in your assigned breakout room.
- **TECHNICAL DIFFICULTIES:** Having trouble hearing the presenters or seeing the shared screen? Put your issue in chat and the Meeting Host will help you.















ONC *FAST* Workshop: An Architectural Framework for Ecosystem Infrastructure



### **Presenters – ONC Lead & FAST Chief Architects**





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Senior Advisor to the Deputy

National Coordinator for Health IT

HHS/ONC

ONC Lead, FHIR at Scale Taskforce (FAST)



PATRICK MURTA
Chief Interoperability
Architect & Fellow
Humana

FAST Chief Architect



**PAUL OATES** 

Senior Enterprise Architect and Lead for the IT M&A Practice, Cigna

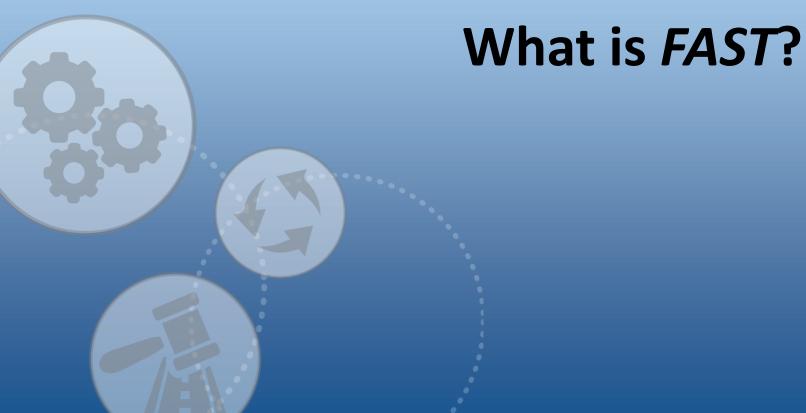
FAST Chief Architect





- What is *FAST*?
  - What is FAST?
  - FAST Structure & Mission
  - FAST & Other FHIR Collaboratives
- APIs, FHIR & FAST
  - APIs
  - FHIR and the Health Care Ecosystem
  - Importance of the Ecosystem Infrastructure and the FAST model
- **FAST Solutions Summary**
- **FAST Solutions and Path to Execution**
- **FAST Pilot Testing Considerations**
- **FAST** Conceptual Architecture
- Full Day Workshop Agenda & FAST Resources







## What is FAST?



The FHIR at Scale Taskforce (FAST), convened by the Office of the National Coordinator for Health IT (ONC), brings together a highly representative group of motivated healthcare industry stakeholders and health information technology experts.

The group is set to identify HL7® FAST Healthcare Interoperability Resources (FHIR®) scalability gaps and possible solutions, analysis that will address current barriers and will accelerate FHIR adoption at scale.



## **FAST** Taskforce Antitrust Notice



- The ONC FHIR At Scale Taskforce (FAST) (Hereinafter "Taskforce") is committed to full compliance with existing federal and state antitrust laws.
- All members involved in the Taskforce effort, including its advisory groups, will comply with all applicable antitrust laws during the course of their activities. During Taskforce meetings and other associated activities, including all informal or social discussions, each member shall refrain from discussing or exchanging competitively sensitive information with any other member. Such information includes, but may not be limited to:
  - Price, premiums, or reimbursement charged or paid for products or services
  - Allocation of customers, enrollees, sales territories, sales of any products or contracts with providers
  - Any other competitively sensitive information that is proprietary to a member company
- If you have any specific questions or concerns, seek guidance from your own legal counsel.
- Members should not bring confidential information or intellectual property (hereinafter "Intellectual Property") owned by their respective member companies into Taskforce meetings. To the extent such Intellectual Property is shared with the Taskforce that shall not be construed as a waiver of member company's rights to, or ownership in, the Intellectual Property.



## **FAST Organization & Community Engagement**





## Information Sharing with TLC through:

- Website
- Periodic Webinars
- Newsletters
- TLC Meetings
- LinkedIn Group



## Paving the Way Towards FHIR "At Scale"

**FUNCTIONAL** 

**USE CASES** 

#### **HL7® FHIR® ACCELERATOR**



















#### **OTHER FHIR INITIATIVES**







#### **CONTRACTUAL ENFORCEMENT**

### **care**quality

**NETWORK/CORE SERVICES** 



#### **SHARED**

### **Technical Challenges to**

### **FHIR SCALABILITY**

Patient & Provider Identity Management

**Directory Services** 

**Version Identification** 

Scale

Exchange Process/Metadata

Testing, Conformance & Certification

Security

#### **RAPID INDUSTRY ADOPTION OF FHIR-BASED SOLUTIONS**

**CORE SERVICES** 

Common Scalability **Approaches** 

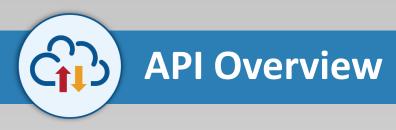


**INFRASTRUCTURE USE CASES** 



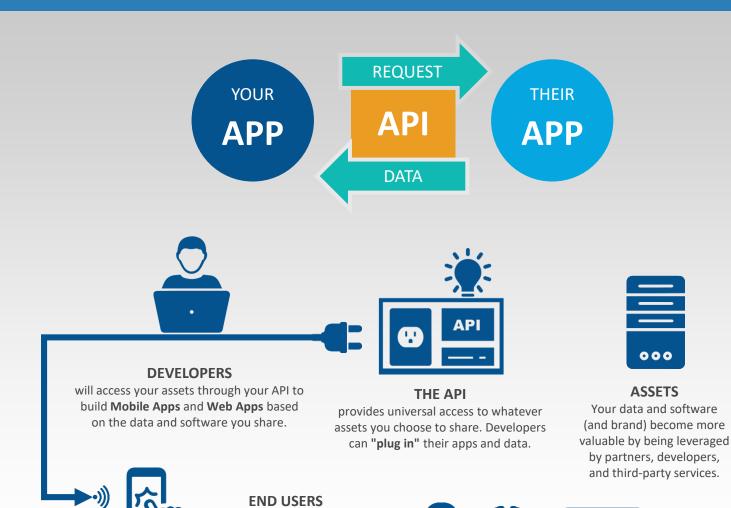


APIs, FHIR & FAST



## APIs...

- An API is a software intermediary which allows applications to talk to each other
- APIs allow the capabilities or data of one computer program to be used by another
  - Lego blocks of data
  - Doesn't matter what the underlying computer or technology is
- APIs are a foundational technology that drives modern computing and the API economy (Amazon, Netflix, Google, Facebook, EBay, YouTube, Twitter, & etc.)
- APIs enable innovation in an unprecedented manner
- APIs are not new... simplified, easy to use versions of them are

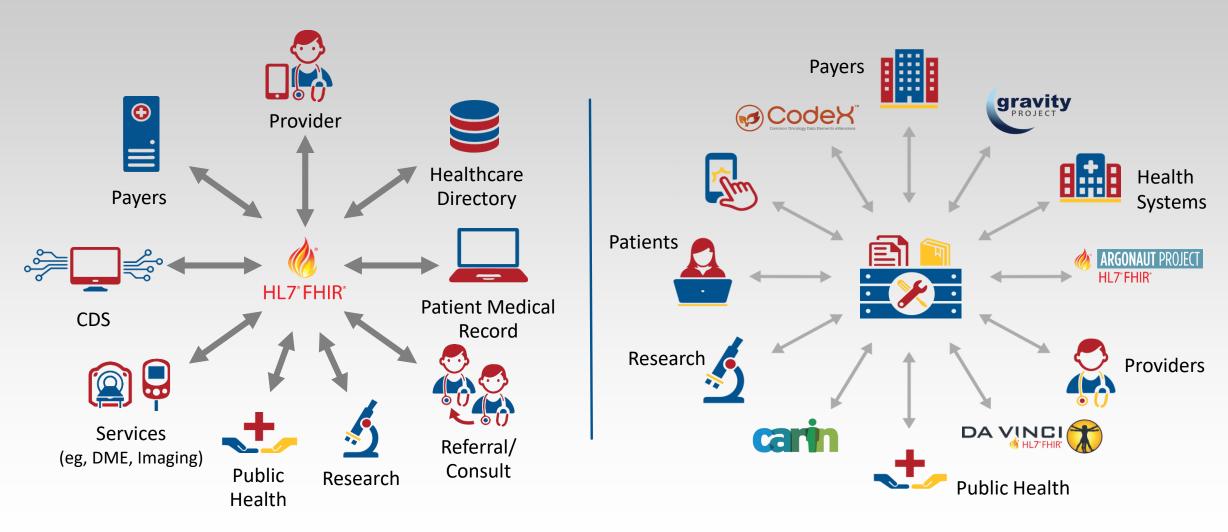


have access to apps that

provide richer experiences by leveraging the data and services of other apps.



## **FHIR and the Health Care Ecosystem**





## **Lack of Consistent Infrastructure Impacts Flow**





## **Well-Planned Infrastructure Creates Efficiency**





## **Example FHIR Transaction Journey**



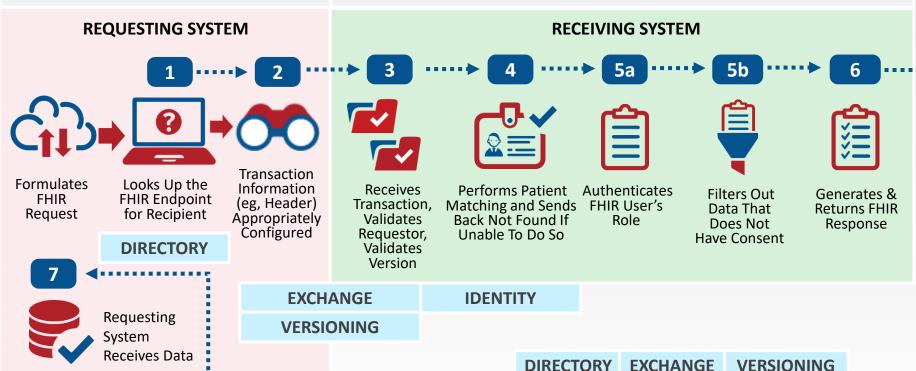
Patient visits Primary Care Physician (PCP)



PCP needs information from Payer



Payer receives PCP request







PCP views Patient information

**CONFORMANCE & CERTIFICATION** 

SECURITY

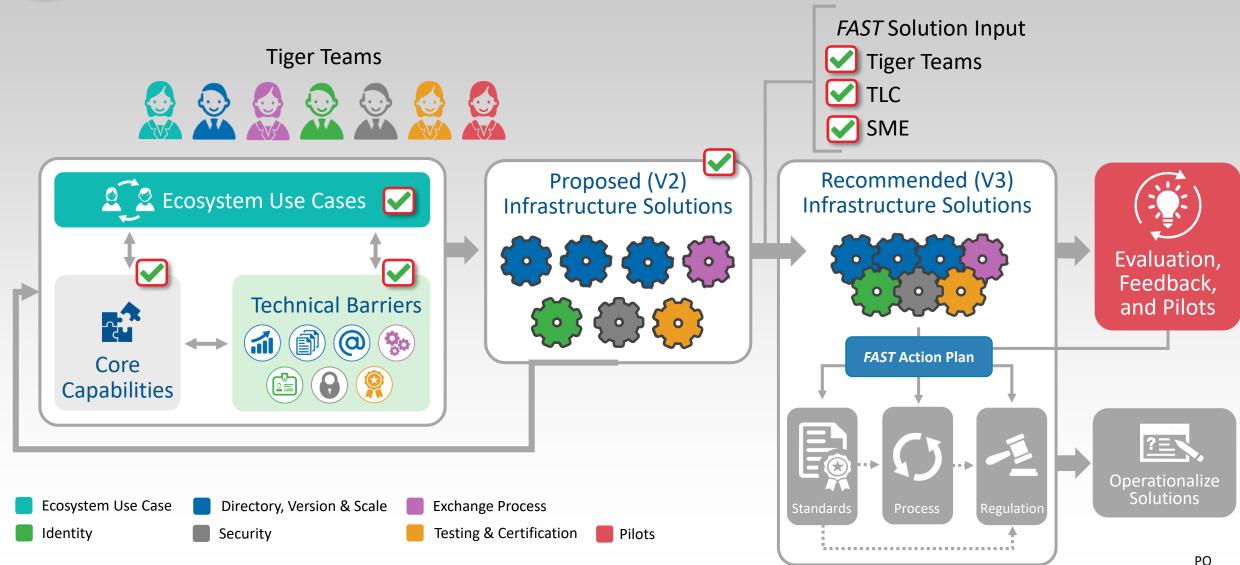
**PILOTS** 







## **FAST Solution Process and Where Are We Now**





## **FAST Proposed Solutions**

- A US Wide Solution for FHIR Endpoint Discovery (Version 2)
- A US Wide Methodology for Supporting Multiple Production Versions of FHIR (Version 2)
- US Wide Scaling Requirements for FHIR RESTful Exchange Intermediaries (Version 2)
- Standards Based Approaches for Individual Identity
  Management (Version 2)
  - Mediated Patient Matching
  - Collaborative Patient Matching
  - Networked Identity Management
  - Distributed Identity Management



- A Scalable FHIR Testing & Certification Platform (Version 2)
- US Wide Model(s) for Scalable Security Solutions (Version 3 Draft)
  - UDAP Trusted Dynamic Client Registration
  - UDAP Tiered OAuth for User Authentication
  - UDAP JWT-Based Client Authentication
  - UDAP JWT-Based Authorization Assertions

PO

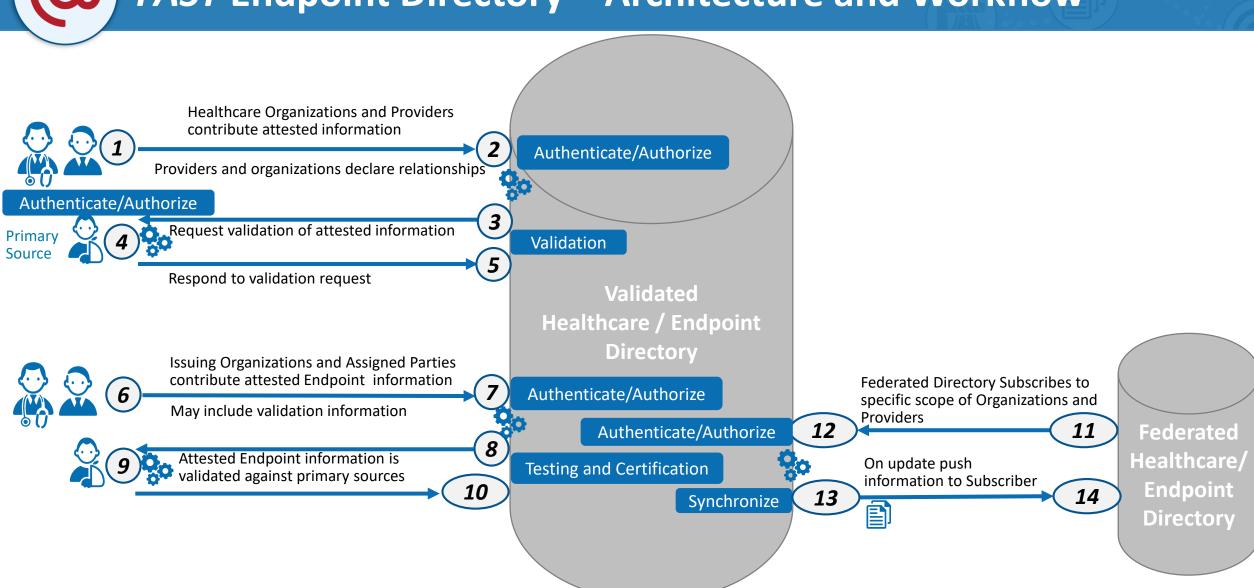




## **FAST** Endpoint Directory



## **FAST Endpoint Directory – Architecture and Workflow**





## **Overview and status**



The industry lacks a generally available method to find all FHIR endpoints and their associated capabilities and attributes, as well as a common process for maintaining the information and validating its accuracy



One national source for validated directory information that is available to any national or local directory workflow environment



### **IN SCOPE**

Individual and entity demographics to determine endpoint relationships, computable endpoint information such as accessibility requirements, metadata for routing, trust framework, implementation guides and certification status

Federated access by HIEs, state directories, EHRs

A FHIR standard implementation guide for use of the directory



### **OUT OF SCOPE**

Manual / portal access, creation of a trust framework, non-FHIR related endpoints, application certification process



Incorporating feedback from industry stakeholders



### **OPEN ITEMS**

Define the minimum viable product (MVP) and outline the incremental steps/roadmap to build a directory of endpoints



### **CURRENT SOLUTION**

<u>FAST Endpoint directory</u> <u>proposed solution document</u> (version 3 in progress)





## **FAST** Identity Management



## **Solution Options: Low to High Complexity**

## Multiple options progressing from low to high complexity (technical and process)

Patient directed access to identity and demographic data, support for multiple identities, and Trusted Identity Providers as source of demographic data and metadata for matching

Best practices compliant matching service using demographic data from Requestor

Current state enhanced with best practices e.g. roster exchanges

Distributed Identity
Management
Networked Identity
Management

Includes Patient directed workflows Focus on identity management

Mediated Patient Matching

**Collaborative Patient Matching** 

Payer/Provider interactions Focus on patient matching



## **Overview and status**



The industry currently employs a range of patient matching and identity management processes with inconsistencies and limited scalability as volume and the number of participants increase



Establish a set of patient matching and identity management patterns and best practices that the industry can adopt to reduce the variations that exist today and provide a bridge to new approaches in the future



### IN SCOPE

Patient matching during payer/provider interactions: *Collaborative* and *Mediated Patient Matching* 

Patient-directed workflows focusing on identity management: *Networked* and *Distributed Identity Mgmt*.



### **OUT OF SCOPE**

Patient as a requester or responder, contractual arrangements. (Security and directory considerations are addressed by other *FAST* solutions)



### **STATUS**

Incorporating feedback from industry stakeholders



### **OPEN ITEMS**

Pursue provider identity matching. Apply proposed solutions to use cases, capture patient matching recommendations, explore steps to Distributed Identity Management, consider how regulation/policy might address challenges that can't be solved by the market



### **CURRENT SOLUTION**

<u>FAST Identity proposed</u> <u>solution document</u> (version 3 in progress)

PO



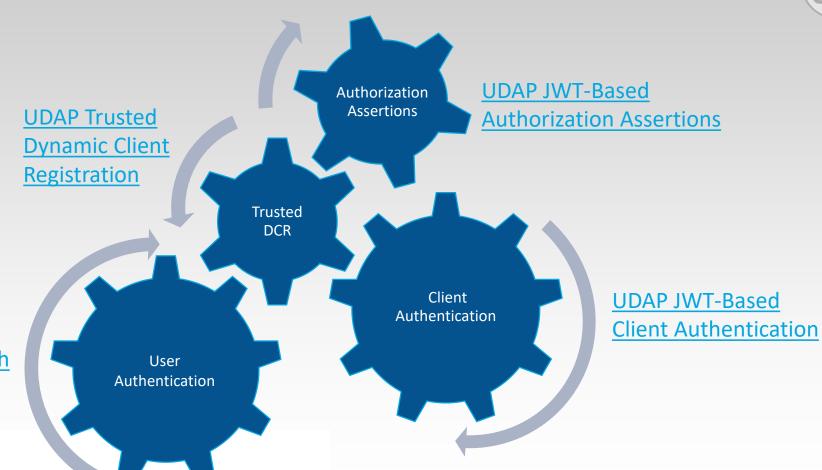


## **FAST** Security



## **Proposed Solution: Trusted Ecosystem**





**UDAP Tiered OAuth** 



### Overview and status



Today, we have limitations on our ability to ensure, in a scalable way, that the requestor of information using a FHIR based information exchange is appropriately authenticated and has the authorization to see the data requested. Current registration processes are manual and too timeconsuming to support expected growth



SOLUTION

Leverage existing credentials and authorizations and best practice standards to establish common security processes that facilitate automated exchange and reuse existing infrastructure where possible



### **IN SCOPE**

Trusted Dynamic Client
Registration using Unified Data
Access Profiles (UDAP)

JWT-Based Client
Authentication & Authorization



### **OUT OF SCOPE**

Directory for Endpoint
Discovery, Trust Policy
Governance, Requirements
for a specific architecture,
Patient/provider or
provider/patient



**STATUS** 

Incorporating feedback from industry stakeholders



### **OPEN ITEMS**

Cross-solution overlaps, explore standard authorization metadata requirements, recommendations related to privacy



### **CURRENT SOLUTION**

<u>FAST Security proposed</u> <u>solution document</u> (version 3 in progress)





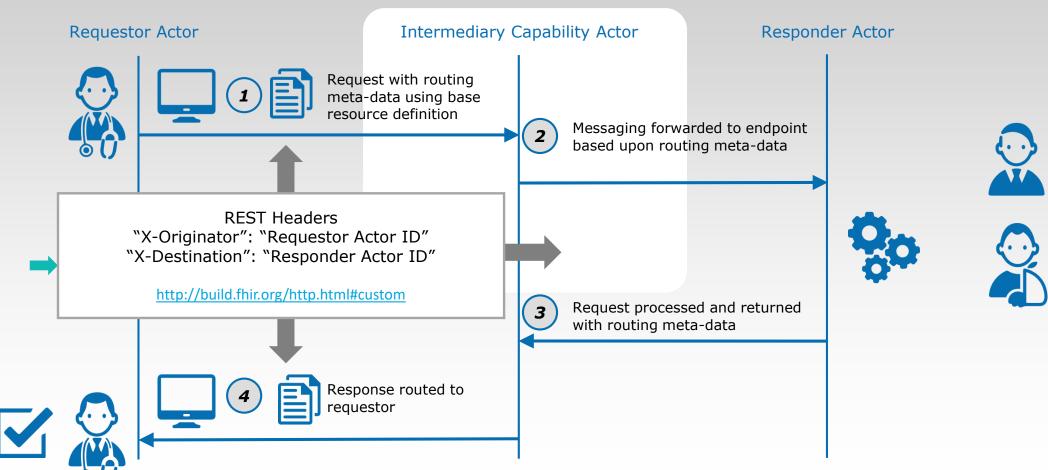
# **FAST** Exchange



## **FAST** Exchange Solution for Routing Metadata – Process Flow

## Planning for a hybrid future while learning from existing models such as CAQH CORE and clearing house patterns







## Overview and status



FHIR information exchange is typically performed "point to point" between trusted system endpoints. Because healthcare participants may also wish to leverage intermediaries in FHIR exchanges, a solution for conveying routing metadata is needed



Employ RESTful header parameters to send originator and destination information for use by exchange intermediaries



Exchange using intermediaries in addition to point to point connections

Method for exchanging of a minimum set of metadata as HTTP REST headers, or alternatively within FHIR resource .meta tags



Value set defining exchange identifiers

Capturing provenance information from exchange through multiple intermediary "hops"



Incorporating feedback from industry stakeholders



Expand direction on usage of the alternative solution employing FHIR .meta elements



### **CURRENT SOLUTION**

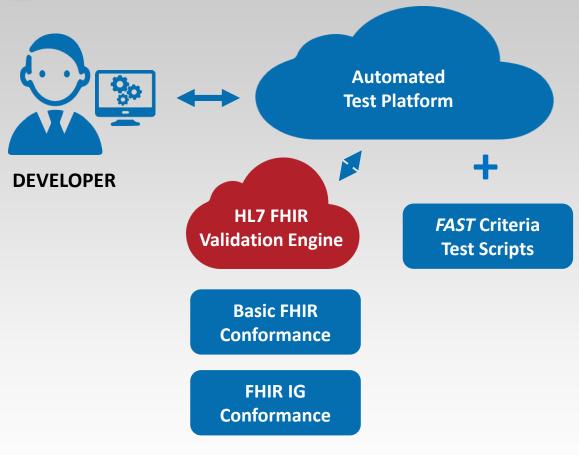
<u>fAST Exchange solution</u> <u>document</u> (version 3 in progress)







## **Proposed Solution: ONC FAST Testing & Certification Program**



Certification Body

#### FAST Readiness Criteria related to...

- End Point Discovery
- 2. Authentication
- 3. Authorization
- 4. Resource Version Identification
- 5. Reliable Patient Identity Management
- 6. Data Provenance
- 7. Reliable Provider Identity Management
- 8. Event/Message/Topic Subscription/Publication
- 9. Guaranteed Message Delivery
- .0. Role/Context Identification
- 11. Readiness Credential
- 12. Standard Based Endpoint Access
- 13. Synchronous Transaction Support
- 14. Asynchronous Transaction Support
- 15. Reliable Payor Identification



## Overview and status



FHIR testing capabilities and an associated accreditation/certification are needed to support reliable, trustable exchange between healthcare participants. It must be a process in which specification/ requirements that are well established and broadly shared can be absolutely confirmed



Testing platform supporting the base FHIR Specification and *FAST* Readiness Criteria

ONC FHIR Testing & Certification Program



### **IN SCOPE**

Testing and certification to the base FHIR Specification and FAST Readiness Criteria



### **OUT OF SCOPE**

HL7 FHIR Validation Engine, RFP development to select entity to provide services

Validate ease of establishing connections, conformance to non-blocking requirements, conformance to HIPAA patient privacy



Incorporating feedback from industry stakeholders



### **OPEN ITEMS**

Capture test assertions in greater detail, clarify aspects, coordinate with related efforts



### **CURRENT SOLUTION**

<u>FAST Testing & Certification</u> <u>solution document</u> (version 3 in progress)







## **Path to Solution Execution**



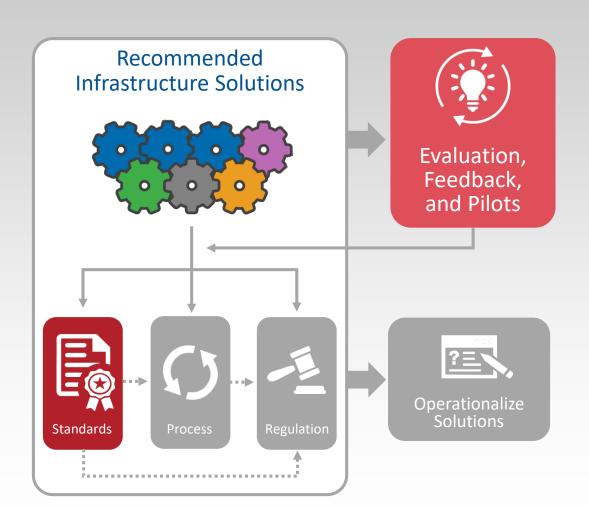
- How do we make the results of FAST persistent?
- Creating standards (examples)
  - Updating FHIR core specification
  - Creating FHIR Implementation Guide(s)
  - Updating specific artifacts and tools (e.g. FHIR version management/conversion)
- Supporting testing and piloting (e.g. making certain the solutions are implementable)
- Supporting regulatory processes
- Establish persistent process
  - Testing & Certification
  - Endpoint Directory(ies)
  - Trust Frameworks



### **Assessment Process**







Identify relevant, existing or new standards, and work with standards bodies to include *FAST* recommendations where appropriate

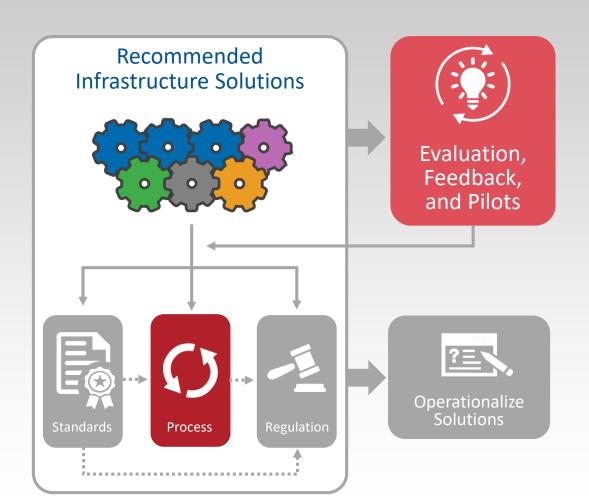
Potential Owner(s) HL7, NIST, ONC, etc.



## **Assessment Process**







Process considerations examples:

- 1. Testing and certification support
- 2. Declaration of support for relevant attributes in directory metadata
- 3. Other processes as needed

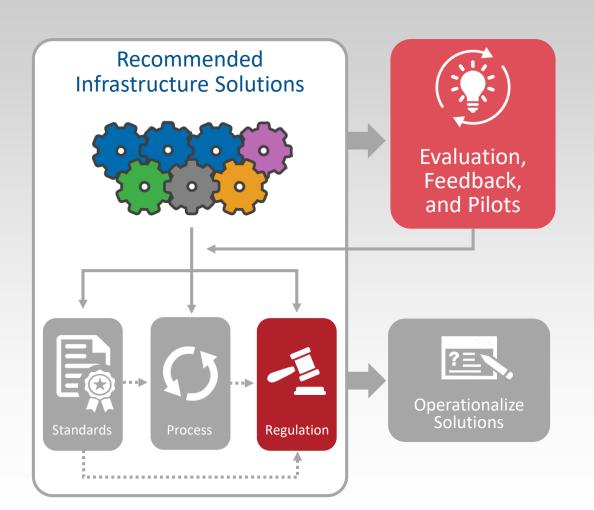
Potential Owner(s) HL7, NIST, ONC, etc.



## **Assessment Process**







The potential policy or regulatory support, published guidelines, etc.

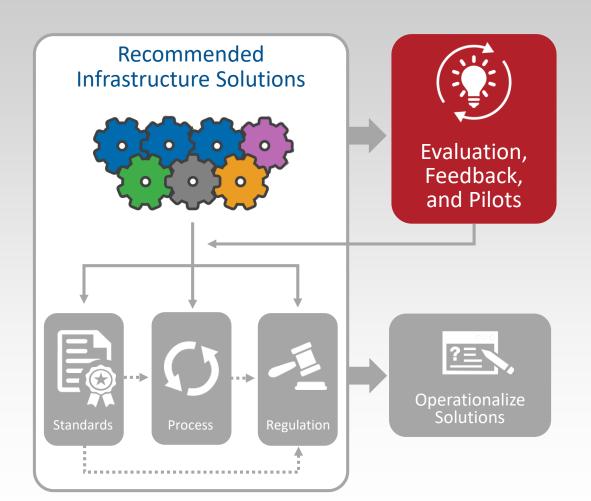
Potential Owner(s)
NIST, ONC, CMS, etc.



## **Assessment Process**







Da Vinci potential pilot, early use cases from SMEs. Addition of a testing/cert process based on certification team recommendations

Potential Owner(s) HL7, NIST, ONC, etc.







## Example CDS/FHIR Transaction Journey - PDex (Da Vinci Payer Data Exchange)



**PCP** initiates clinical referral or inpatient request



PCP needs prior auth requirements information from Payer





Payer receives PCP requests **Payer PDex Interactions** 

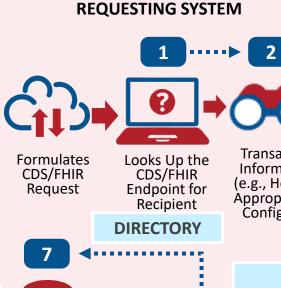
Payer receives CDS request and creates CDS card

**RECEIVING SYSTEM** 

CDS Card is returned in real time & PDex bundle is available

#### **EHR PDex Interactions**

- [START] PCP's EHR requests CDS Card from payer
- CDS Card is processed & PDex bundle is made available to EHR for visualization and integration [END]



Requesting

**Receives Data** 

System





Version







Filters Out Data That Does Not Have Consent Generates & Returns CDS/FHIR Response





**PCP** views **Patient** information **EXCHANGE** 

**IDENTITY** 

**VERSIONING** 

**DIRECTORY** 

**EXCHANGE** 

**VERSIONING** 

#### **CONFORMANCE & CERTIFICATION**

**SECURITY** 

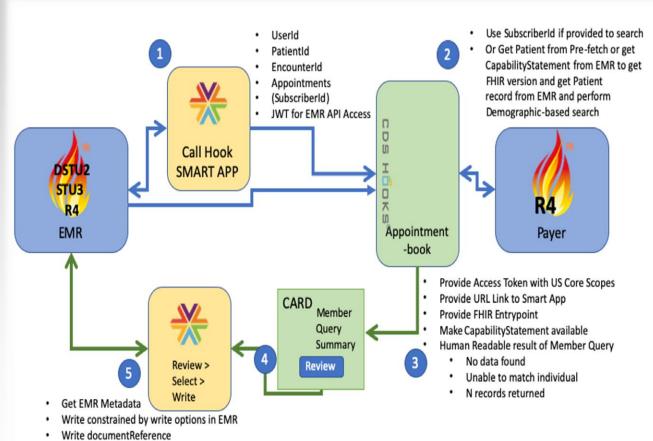
**PILOTS** 

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## FAST Pilots Support with Da Vinci PDex (Payer Data Exchange)

### PDex (Payer Data Exchange)



(Optional - complete or selected DocumentBundle + PDF)

#### **FAST Solutions Tested**

	Directory	Versioning	Exchange	Identity	Scale	Security	Conformance & Certification
00	✓	<b>√</b>	✓	✓		✓	✓
345	<b>√</b>	<b>√</b>	✓	✓		✓	<b>√</b>



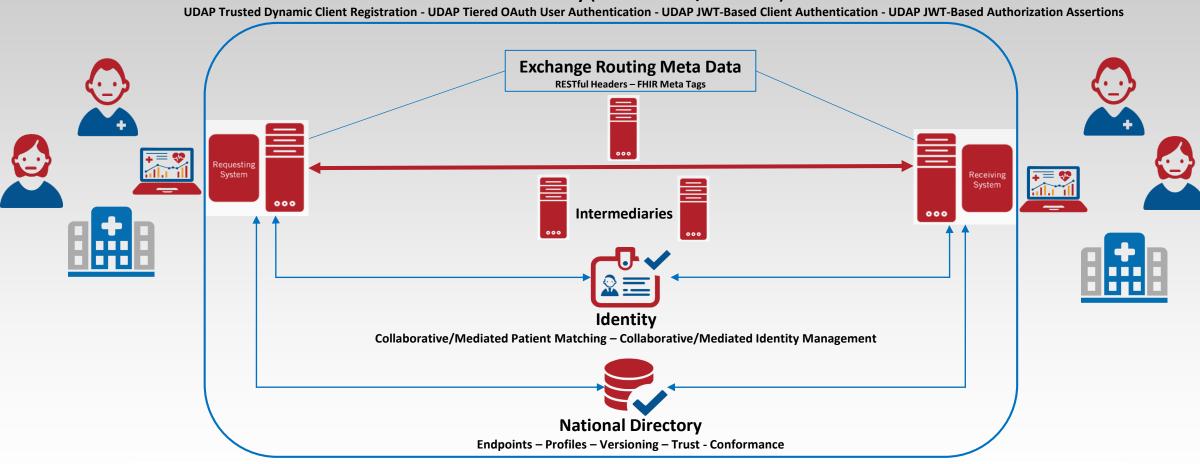




## **Conceptual Integrated Architecture**



#### **Security (Authenticate/Authorize)**



**CONFORMANCE & CERTIFICATION (Testing & Certification Program)** 

PILOTS (FAST Capability Vetting with Existing HL7 Accelerators)





# Full Day Agenda & FAST Resources



## **Breakout Sessions Schedule**

10:10am – 12:00pm: Morning Breakouts - FAST Architectural Considerations (limited attendance, concurrent)

Room #1: FAST Solution Interdependencies Room #2:
The Role of Trust
Framework(s)

Room #3:
Testing and Certification

Room #4:
Stakeholder Nuances

12pm – 1pm: Lunch Break

1:00pm – 2:30pm: **Afternoon Breakouts Part 1** - **FAST Pathways to Implementation** (limited attendance, concurrent)

Room #1:
Standards

Room #2:
Regulations

Room #3:
Process

2:30pm – 3:00pm: **Afternoon Break** 

3:00pm – 4:00pm: Afternoon Breakouts Part 2 - FAST Pathways to Implementation (limited attendance, concurrent)

Room #1:
Timing Considerations / Interim Steps &
Solutions

Room #2:
Pilots

Room #3:
Intermediaries



## FAST Workshop – Full Day Agenda and Resources



- View the <u>FAST Workshop Summary and Detailed Agenda</u>
  - Morning and Closing Plenary
  - Breakout Room Sessions Schedule
  - Handouts and Resources
- Explore these *FAST* resources
  - New to FAST? Breakout sessions target interactive discussion and references the FAST work to date. Please consider exploring any of the following FAST artifacts before attending these breakout sessions:
    - The FAST 2020 Mid-Year Report
    - The FAST 2019 End of Year Report
    - SME Panel Session Pages

## CONTINUE THE CONVERSATION!

Join the Technical Learning Community to stay up to date – receive updates about FAST presentations & events, provide additional input and follow our progress.

<u>JOIN THE LINKEDIN GROUP</u>

&

SIGN UP FOR THE TLC



## Thank You – Today's Presenters



Stephen Konya
ONC FAST Lead

Patrick Murta
FAST Chief Architect

**Paul Oates** *FAST* Chief Architect

For more information on the FAST Initiative, visit the FAST Project Page

Have any further questions/suggestions?

Please contact Stephen Konya at <a href="Stephen.Konya@hhs.gov">Stephen.Konya@hhs.gov</a>
& Diana Ciricean at <a href="Diana.Ciricean@hhs.gov">Diana.Ciricean@hhs.gov</a>