Zoom Meeting Interface and Basic Logistics

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

- **VIDEO:**
  - **Panelists/Presenters/Facilitators - Please enable your video using bottom left video button with camera icon.**
  - **Attendees** - If you did not receive an invitation to be a panelist, you are in attendee only mode and **will not have access to enable video**

- **AUDIO:**
  - **Panelists/Presenters/Facilitators -** Adjust your audio settings as needed (choose computer audio, call in, mute, etc.) using **audio button bottom left, microphone icon. Please remain muted unless speaking.**
  - **Attendees -** If you did not receive an invitation to be a panelist, you are in attendee only mode and **will not be able to enable audio**

- **CHAT:** The chat function is open to *ALL* participants (bottom, middle right, highlighted in orange in this image). Those in Attendee only mode are encouraged to provide feedback and questions via chat throughout the discussion. Chat will be monitored by the *FAST* team and key themes will be pulled into the discussion.

- **TECHNICAL DIFFICULTIES:** Having trouble hearing the presenters or seeing the shared screen? Put your issue in chat and the Meeting Host will help you.

PAUL OATES

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

Cigna

FAST Chief Architect

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.

Agenda

- **Welcome & Introductions**

- **Session Goals**

- **Overview**

- **Discussion Topics**
  - Interactive Panel
  - Participant Q&A

- **Wrap Up/ Key Takeaways**

FAST Panelists

FAST Panelists	
Alex Kontur	HHS|ONC, *FAST Directory, Versions & Scale Tiger Team Member*
Luis Maas	EMR Direct, *FAST Security Tiger Team Lead*
Meena Jambulingam	Optum, *FAST Identity Tiger Team Lead*
Bryan Scott	Humana, *FAST Exchange Tiger Team Member*
Lee Barrett	EHNAC, *FAST Testing & Certification Tiger Team Lead*

Roles & Logistics: Panelist vs. Attendee Modes

FAST Key Panelists

- Invited to join, actively engage and support the conversation
- Encouraged to communicate verbally (mics on) and to turn on video
- Monitor the attendee chat box for feedback, address questions via chat or promote questions that are significant to the discussion topic or warrant a verbal debate /reaction with the panel group

Industry Expert Reaction Panelist (in panelist mode)

- Invited to join the live interactive discussion with the *FAST* team
- Encouraged to communicate verbally (mics on) and to turn on video
- Provide their industry expertise and feedback
- Discuss or debate the topic with the facilitator and the panelist group
- Raise questions or concerns
- Feedback will inform *FAST* next steps

General Audience and *FAST* Technical Learning Community Members (in attendee mode)

- Encouraged to engage and contribute feedback and questions via the chat box
- Do not have the ability to contribute verbally to the conversation (mics off)
- No ability to be on video

Timing Considerations / Interim Steps & Solutions

Session Description

Implementation or deployment for some of the *FAST*-proposed solutions may take longer than (in some cases), is needed based on the federal laws and regulations requirements (i.e. the ONC and CMS Final Interoperability Rules under the 21st Century Cures Act).

This breakout session aims to highlight timing considerations associated with the *FAST* solutions and explore what interim steps and solutions can be pursued to address the gaps between mandates, solution deployment timelines and industry readiness.

We invite all attendees to contribute or ask questions to provide feedback in the chat box.

Timing Considerations / Interim Steps & Solutions

Session Goals

1. Capture feedback on interim plans for endpoint directories.

2. Explore options for interim security solutions above and beyond what already exists. What do we need for 2021?

3. Capture any concerns regarding recommended metadata approach.

4. What do we need to have in place for 2021 regarding Testing & Certification (above and beyond HL7 tooling, and what's available in the industry to use voluntarily).
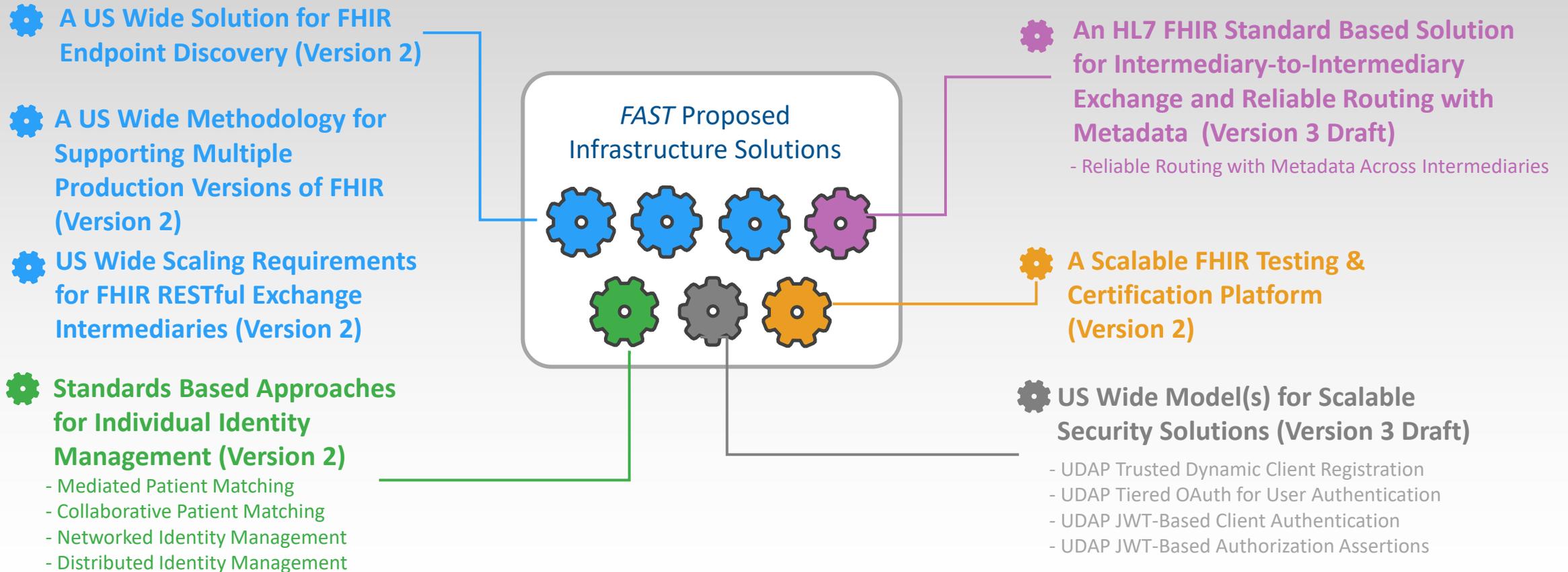
Overview

FAST Proposed Solutions

🟦 Directory, Version & Scale (3)   🟩 Identity (4)   🟪 Exchange Process (1)   🟧 Testing & Certification (1)   ⬛ Security (4)

⚙️ **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

FAST Proposed Infrastructure Solutions

⚙️ **An HL7 FHIR Standard Based Solution for Intermediary-to-Intermediary Exchange and Reliable Routing with Metadata (Version 3 Draft)**
- Reliable Routing with Metadata Across Intermediaries

⚙️ **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
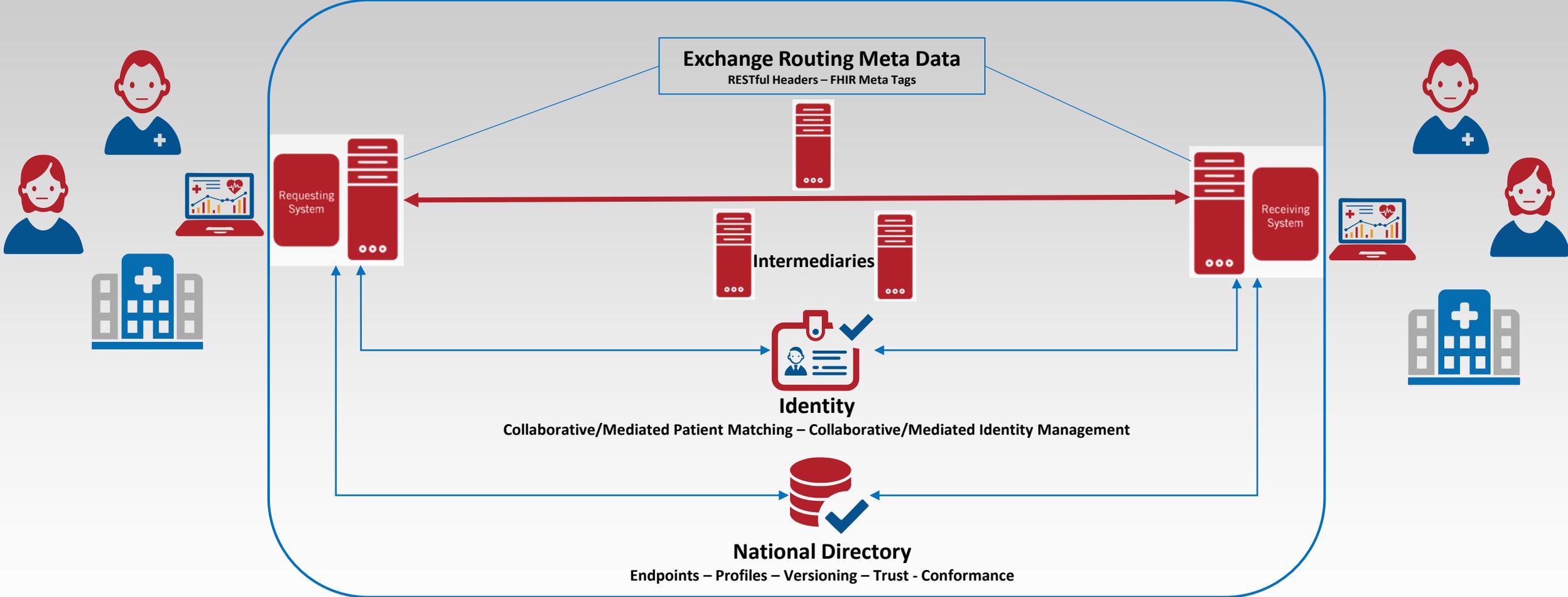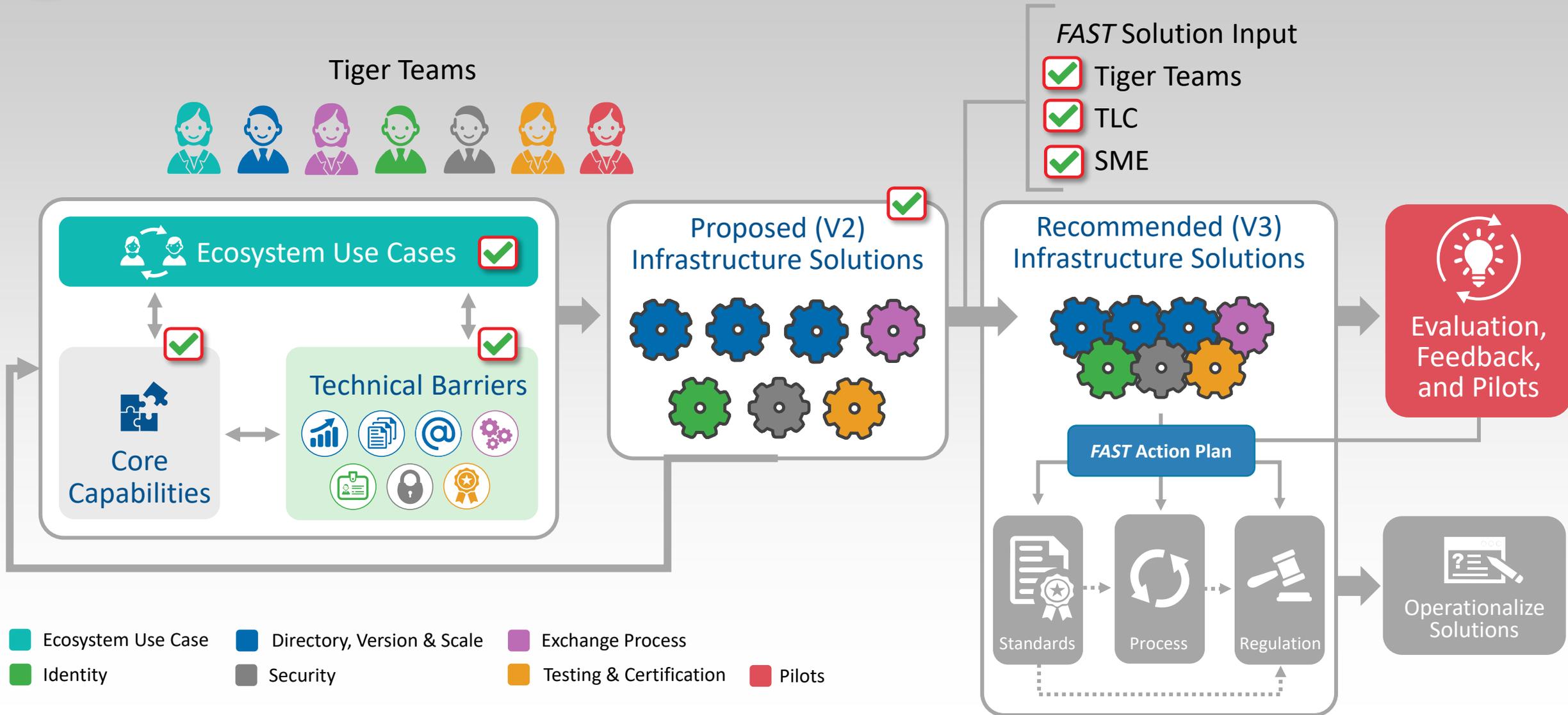- UDAP JWT-Based Authorization Assertions

Conceptual Integrated Architecture

Security (Authenticate/Authorize)

UDAP Trusted Dynamic Client Registration - UDAP Tiered OAuth User Authentication - UDAP JWT-Based Client Authentication - UDAP JWT-Based Authorization Assertions

Exchange Routing Meta Data
RESTful Headers – FHIR Meta Tags

Requesting System

Receiving System

Intermediaries

Identity
Collaborative/Mediated Patient Matching – Collaborative/Mediated Identity Management

National Directory
Endpoints – Profiles – Versioning – Trust - Conformance

CONFORMANCE & CERTIFICATION (Testing & Certification Program)

PILOTS (*FAST* Capability Vetting with Existing HL7 Accelerators)

# FAST Solution Process and Where Are We Now

Tiger Teams

FAST Solution Input
- ☑ Tiger Teams
- ☑ TLC
- ☑ SME

Ecosystem Use Cases ☑

Core Capabilities

Technical Barriers ☑

Proposed (V2) Infrastructure Solutions ☑

Recommended (V3) Infrastructure Solutions

Evaluation, Feedback, and Pilots

FAST Action Plan

Standards — Process — Regulation

Operationalize Solutions

Legend:
- ■ Ecosystem Use Case
- ■ Directory, Version & Scale
- ■ Exchange Process
- ■ Identity
- ■ Security
- ■ Testing & Certification
- ■ Pilots

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CMS INTEROPERABILITY & PATIENT ACCESS FINAL RULE

my health e data

CMS — CENTERS FOR MEDICARE & MEDICAID SERVICES

2019
- Draft 2 TEFCA released
- CMS publishes **Interoperability and Patient Access Proposed Rule**
- ONC publishes 21st Century Cures Act Proposed Rule

2018
- Draft TEFCA released
- White House Executive Forum on Interoperability
- CMS made data available to researchers through the Virtual Research Data Center

March 2018
MyHealthEData and **Blue Button 2.0** launched

ADMITTED
DISCHARGED
TRANSFERRED

DR. A
DR. B
DR. C

Rx

DR. A
DR. B
DR. C

CMS
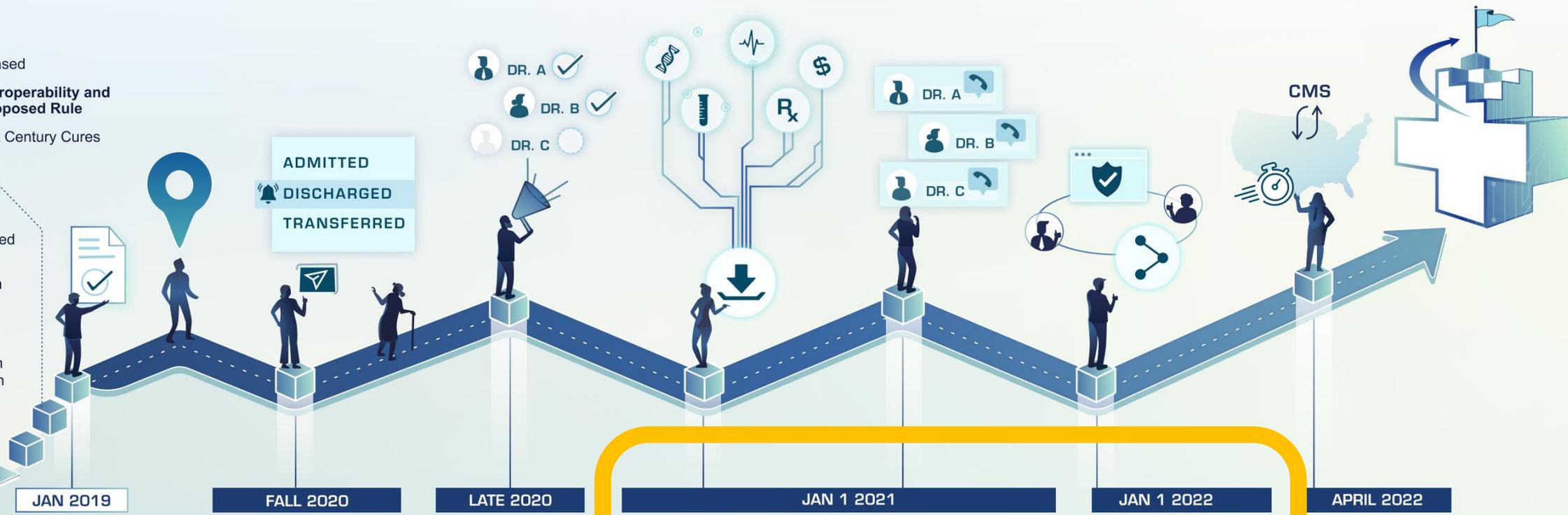
JAN 2019

Providers are required to use **2015 Edition Certified EHR Technology**

Promoting Interoperability program requirements take effect for all providers

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FALL 2020

Hospitals send **event notifications** regarding admission, discharge, and transfer to other providers

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LATE 2020

Public reporting of clinician or hospital data blocking and providers without digital contact info in NPPES

JAN 1 2021

Patient Access API
Patient health care claims and clinical info made available through standards-based APIs for Medicare Advantage, Medicaid and CHIP FFS, Medicaid and CHIP managed care, and QHPs on the FFEs

Provider Directory API
Payer Provider Directories made available through standards-based APIs

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JAN 1 2022

Payer-to-Payer data exchange
Payers required to exchange patient USCDI data upon request
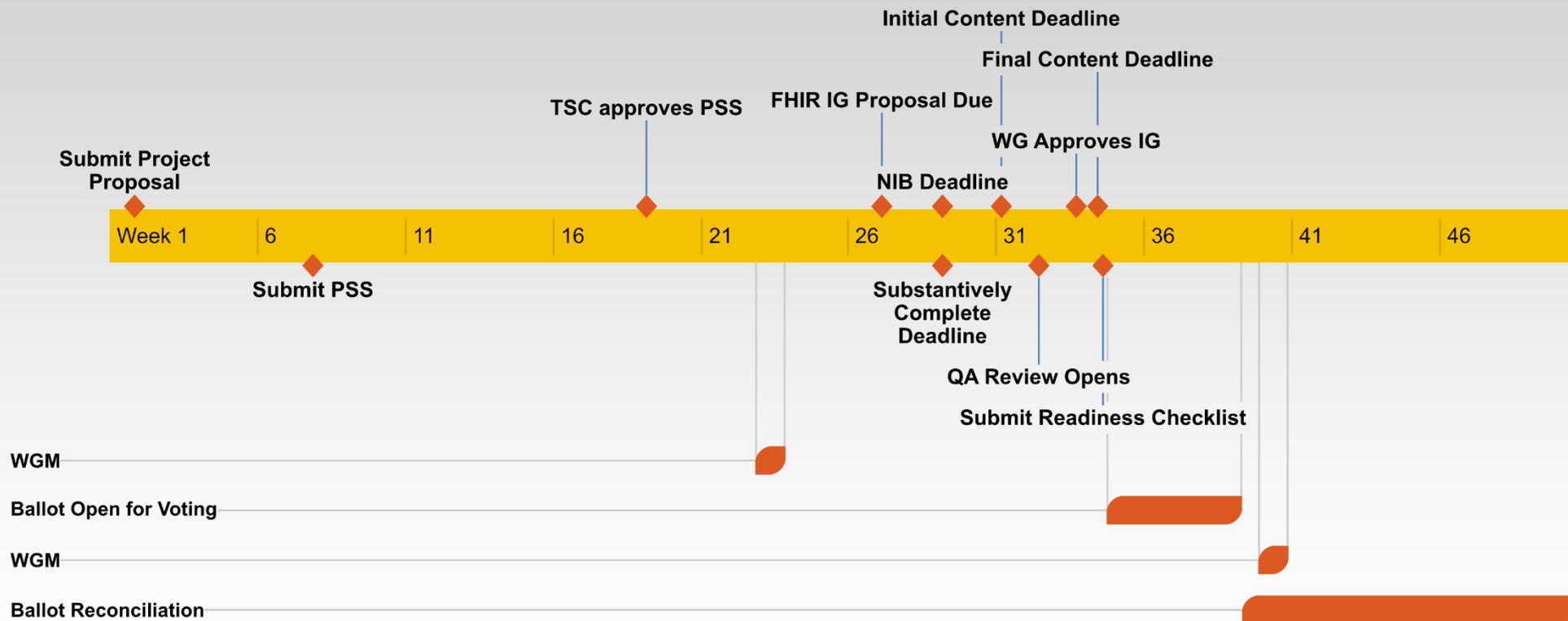

APRIL 2022

Improved benefits coordination for dually eligible individuals

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2019   2020   2021   2022

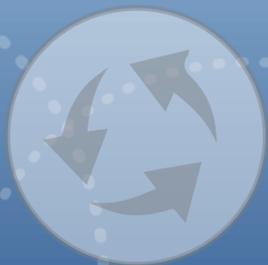# A sample pacing of an HL7 Implementation Guide

HL7 FHIR IG Timeline

16
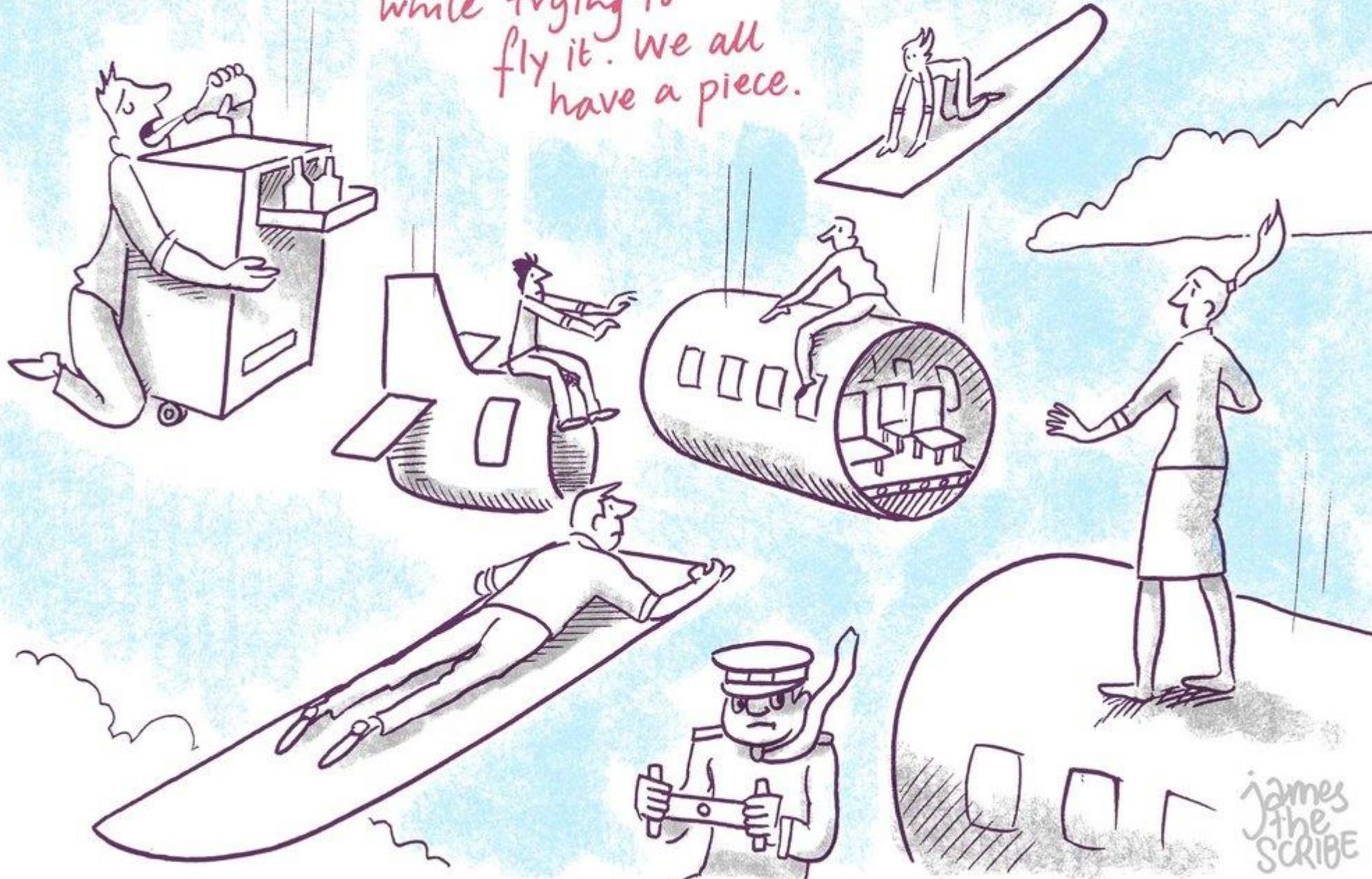
Discussion

For Each Solution…

Current thinking and principles around interim solutions

Discuss and comment

- What coping approaches are happening now and what is the minimum viable need?
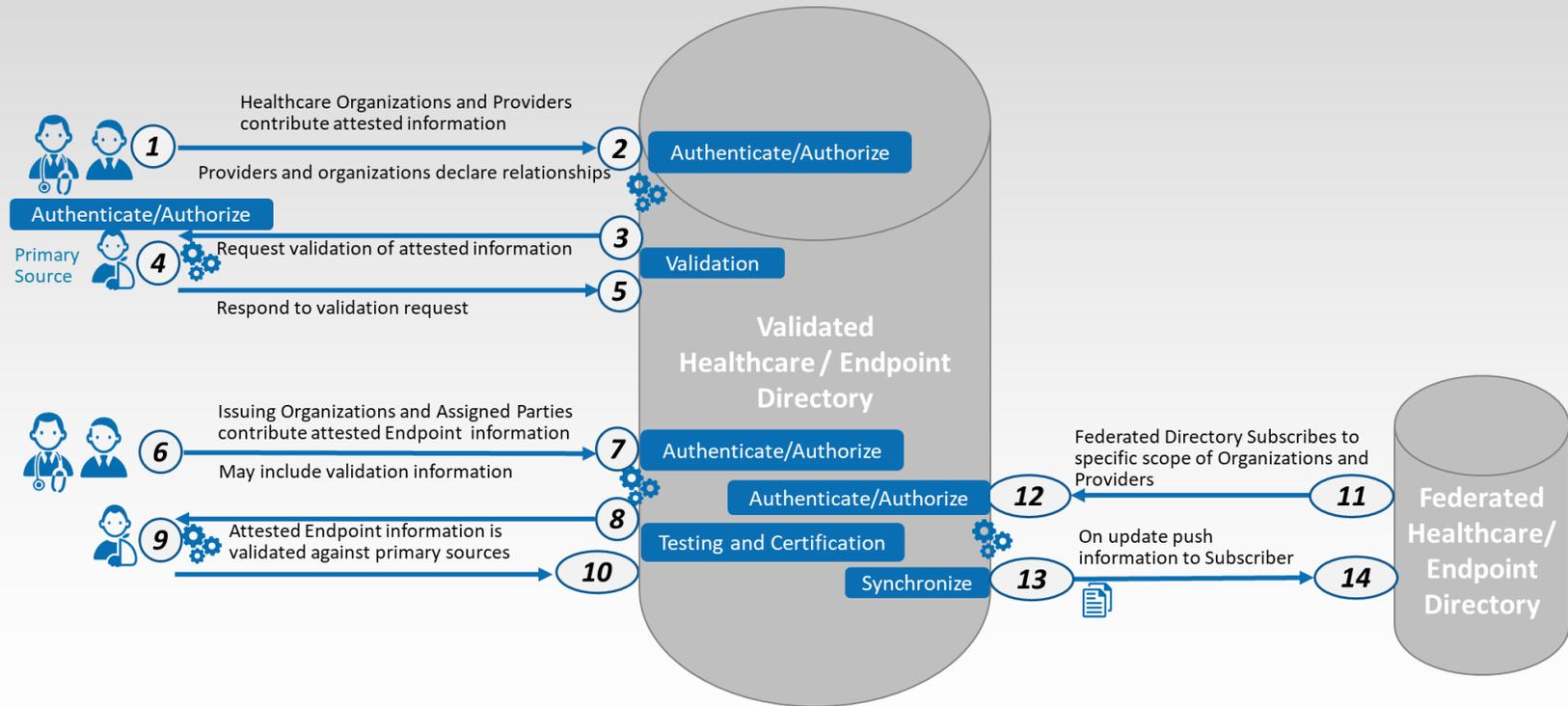- What is the impact of potential rework?

Discussion: Interim Needs for Directory

Session Goal 1: Capture feedback on interim plans for endpoint directories

Payer and Provider endpoint directory will not be fully developed by rule implementation.

Discussion: Interim Directory Solution Principles

1. **Suggestion: implement incrementally by type:**
   - Endpoint(s) for Patient Access API
   - Endpoint(s) for Payer-Payer Exchange
   - Endpoint(s) for Provider access (e.g. for PA)

2. **Provider Endpoint Directory**
   - Start with minimum directory as informed by the CMS/ONC Rule via NPPES

3. **Payer Endpoint Directory**
   - Voluntary landing place for published APIs by mid 2021
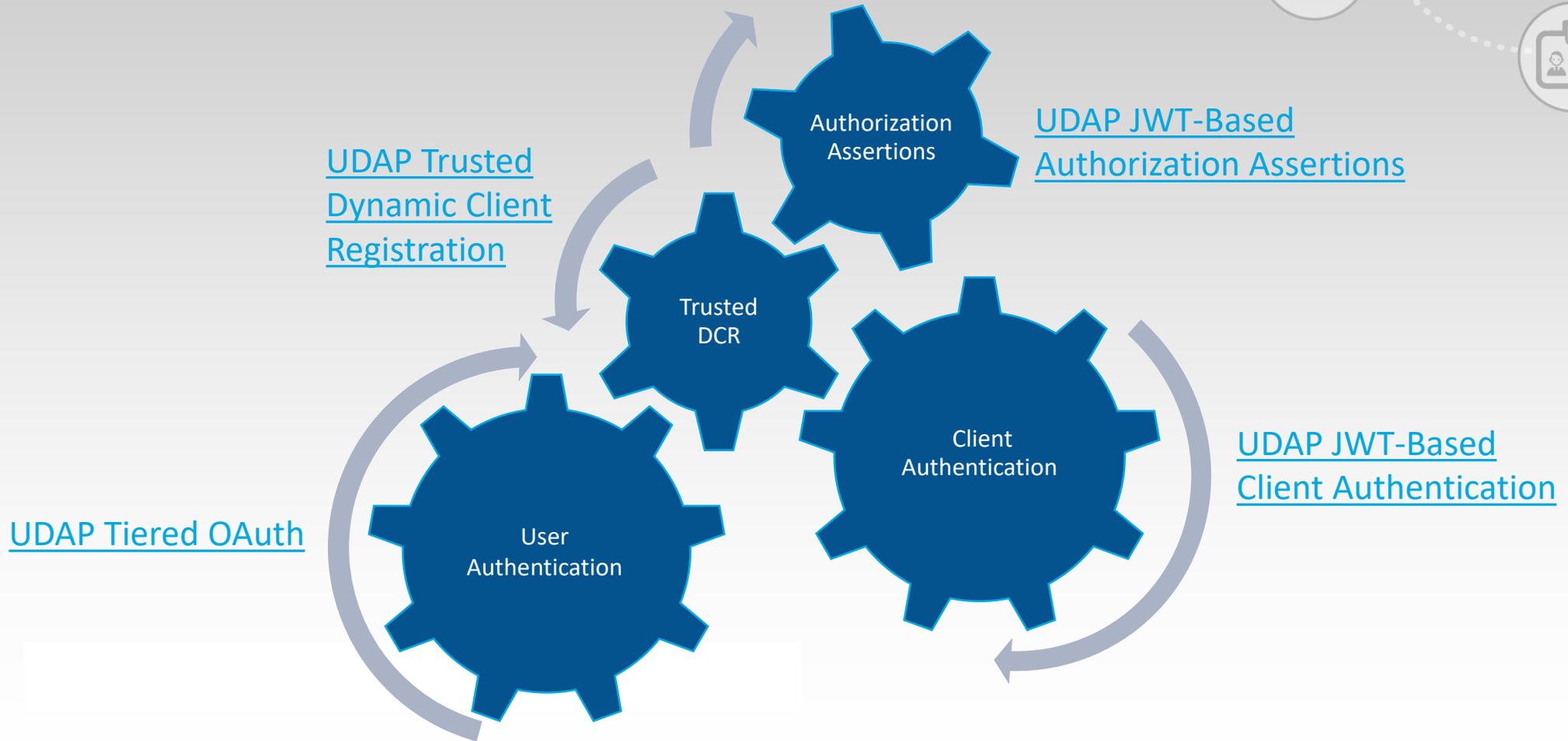   - In parallel, industry agreement on permanent solution and model

?

What coping approaches are happening now and what is the minimum viable need?

What is the impact of potential rework?

Proposed Solution: Trusted Ecosystem

UDAP Trusted Dynamic Client Registration

Authorization Assertions

UDAP JWT-Based Authorization Assertions

Trusted DCR

Client Authentication

UDAP JWT-Based Client Authentication

User Authentication

UDAP Tiered OAuth

Discussion: Interim Security Solution Principles

1. **Reuse existing Public Key Infrastructure (PKI)**

2. **Leverage existing credentials and authorizations**

3. **Enable Federated Access (i.e., trust communities)**

4. **Leverage best practices (existing standards) – workable solutions**
   - OAuth 2.0 Authorization Framework
   - OpenID Connect
   - Unified Data Access Profiles
   - PKI-Based Health Information Networks

5. **Facilitate automated exchange (i.e., reduce bottlenecks)**

6. **Reuse existing infrastructure where possible**

FAST Security Tiger Team recommends that writers of Implementation Guides include the solutions as "must support" components of their security frameworks. Some communities have already begun this process in draft implementation guides, including the Da Vinci Project (in their HRex IG), the CARIN alliance (in their Blue Button/CPCDS IG), and Carequality (in their community FHIR IG).

?

What coping approaches are happening now and what is the minimum viable need?

What is the impact of potential rework?

What must be implemented in 2021?

Identity Solution Options

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

4

Distributed Identity Management

3

Networked Identity Management

2

Mediated Patient Matching

1

Collaborative Patient Matching

Includes Patient directed workflows
Focus on identity management

Payer/Provider interactions
Focus on patient matching

Discussion: Interim Identity Solution Principles

Implement more consistent identity and patient matching solutions and patterns over time

FAST Adoption Begins

- Cross-organizational use of PII for specified use cases
- IAL2 proofing in certain circumstances (e.g. patient request)
- Best practice requirements & rubrics

Cures Update

- USCDI Demographics
  - Additional rubrics; probabilistic matching uses verified data, including contact points?
- OpenID Connect
  - Some use of 3rd party IdPs?

Trusted Framework

- Network-wide IAL2
  - Federated ID management with AAL2?

?

What coping approaches are happening now and what is the minimum viable need?

What is the impact of potential rework?

Discuss compliance risk in the short term

Discussion: *FAST* Exchange Solution

?
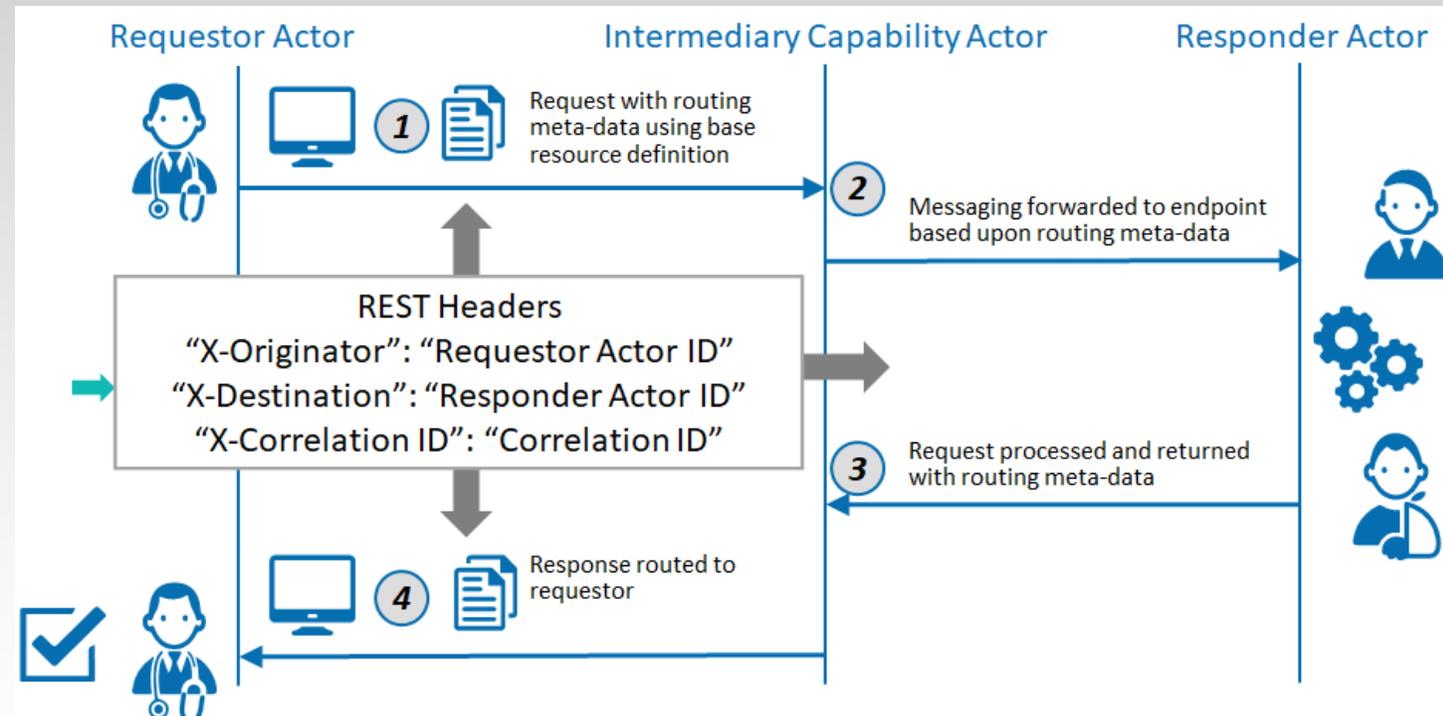
The *FAST* Exchange solution proposes transmitting routing metadata in HTTP headers.

Do we see any challenges or concerns with this approach?

?

What coping approaches are happening now and what is the minimum viable need?

What is the impact of potential rework?

Wrap Up

FAST Workshop – Full Day Agenda and Resources

- View the *FAST* Workshop Summary and Detailed Agenda

  – 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.

JOIN THE LINKEDIN GROUP
&
SIGN UP FOR THE TLC

All content is available on the **FAST Project Page** *or* **https://tinyurl.com/ONC-FAST**

Thank You

Connect with *FAST* on LinkedIn to stay informed

For more information on the *FAST* Initiative,
visit the *FAST* Project Page or https://tinyurl.com/ONC-FAST

Have any further questions/suggestions?

Please contact Stephen Konya at Stephen.Konya@hhs.gov
& Diana Ciricean at Diana.Ciricean@hhs.gov