WEBINAR

OPEN APIS in HEALTHCARE

The Future of Data Integration

Brian Murphy August 18, 2020



ABOUT CHILMARK RESEARCH

- Our team is united by a core belief that effective deployment and use of IT is essential to modernizing care delivery and improving the care journey.
- O Chilmark analysts monitor trends and developments in the industry with a focus on those technologies that will be transformational to healthcare delivery.
- We provide comprehensive, objective, high quality research for busy executives. It our way to help create a more informed, future-ready market of products and customers.
- Clarity in an uncertain time.

PRESENTER: BRIAN MURPHY

DIRECTOR OF RESEARCH, ANALYTICS AND INTEROPERABILITY



Brian joined Chilmark Research as an industry analyst in 2012. He is an outspoken advocate for true interoperability being the key to unlocking the potential of health IT and has centered the majority of his research efforts with Chilmark around this subject. He also currently heads Analytics research for the Analytics domain.

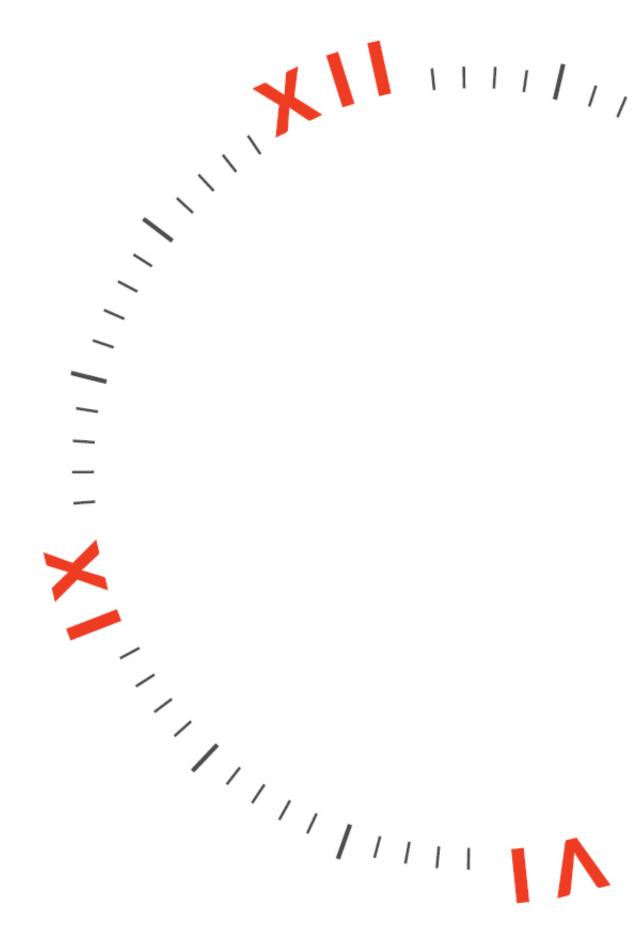
Brian has worked in the IT business for over 30 years, beginning his career in the field-sales organization of IBM. He then joined Yankee Group as an analyst, managing an enterprise software service and leading research on the dynamics of the database market. After Yankee, he joined Eclipsys (prior to Allscripts acq), where he worked with product managers to refine and harmonize value propositions in light of the organization's broader goals.

Brian is a graduate of both Harvard College and Suffolk Law School. When not thinking about health IT, he's a runner and armchair Boston historian.



TODAY'S AGENDA

- Key Takeaways
- APIs in the Context of Healthcare Interoperability
- Why are we talking about APIs now?
- What did the 21st Century Cures Act do?
- Who is helping FHIR implementers?
- What is our report about?
- O How do vendors compare?





KEY TAKEAWAYS

- New requirements for FHIR-standard APIs will impact everyone
 - Patients, Providers, Payers, Other data holders
- Mealthcare Enterprises must build FHIR-standard APIs
 - Not everyone is convinced or committed
- Developers follow the path of least resistance to data sources
- Revenue models for access and usage are up in the air
- Providers lead and payers must catch up
- Privacy and security concerns can only increase

THE INTEROPERABLE HEALTHCARE DATA PLATFORM

Data-oriented APIs

- Developers access live healthcare data via a set of APIs
- Supports CRUD access
- Bidirectional data flows
- Software and services

Bulk Data Aggregation

- Ingest, process, transform, and organize raw data from multiple sources
- Unidirectional data flow
- Software and services

Interoperability Infrastructure

- Special purpose enabling software for information exchange
- Highly variable capabilities
- Primarily softwarebased

Messaging

- User-to-user or user-toorganization messaging applications
- Multi-modal messaging
- Payload driven

Patient Matching

 Matching individual patients to their health records in different applications and across organizations

WHY APIS NOW?

Market Forces

- > FHIR
- > Increased use of REST
- > Cloud

Improved Technology

- > Consumerization
- > C19 Recovery
- Value-based Care and Payments

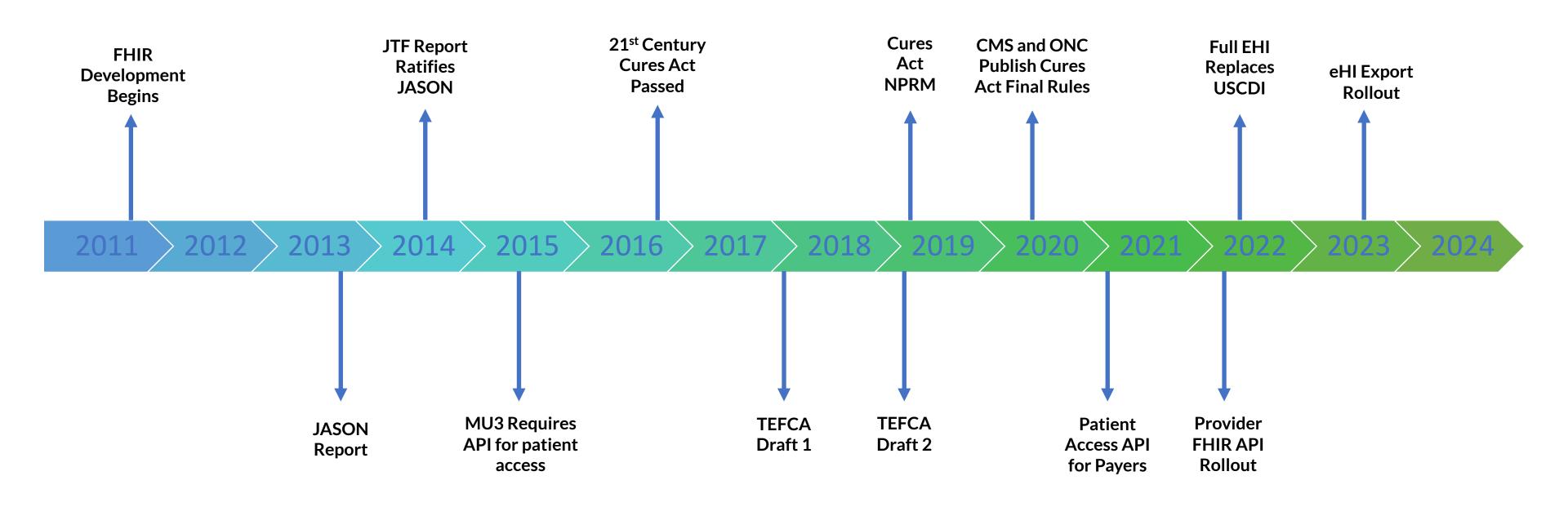
Regulation

- Clarity on network of networks
- > Information blocking
- > APIs required of most healthcare enterprises



- Looser coupling of data and applications
- Simpler programing model
- Migher development and integration productivity

A BRIEF HEALTHCARE INTEROPERABILITY TIMELINE





21ST CENTURY CURE ACT RULES AFFECT...

Consumer/Patient/Member

- More cost and outcome transparency
- More choices of providers
- Apps that provider secure and private access to their data

Providers

- Must implement FHIR-standard APIs with data elements specified in USCDI
- Hospitals must send ADTs to another provider

Payers

Some must implement set of FHIR-standard APIs

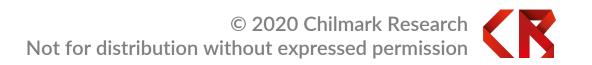
O HIT Vendors

- Must build API infrastructure for customers
- Must NOT information block

PAYERS ARE NEW TO APIS

- © CMS-regulated Payers must have APIs for:
 - Patient Access (July 1, 2021)
 - Provider Directory (July 1, 2021)
 - Payer-to-Payer Data Exchange (January 1, 2022)

See https://www.cms.gov/Regulations-and-Guidance/Guidance/Interoperability/index





THINGS THAT COULD CHANGE...

- Covid-19 impacts
 - Public health concerns bubble to the top?
- Implementation timeline
 - More likely to be stretched out
- Population-level and broadcast query
- REST and FHIR support in existing national networks

APP STORES

- EHR Vendors
 - Most apps are not for patient/member
 - Different levels of evolution and commitment
 - Most are element in larger partnership program
- Large Health Systems
 - Still rare
- Specialty societies
- Payers and health plans
 - None so far
- O Difference between patient-facing and other users
- Who could be a third-party recommender?



WHAT INDUSTRY-WIDE EFFORTS ARE HELPING TO MAKE FHIR SUCCESSFUL?

- EHR and HIT Vendors
 - Most have FHIR and API support
- ONC FHIR at Scale (FAST)
 - Tiger Teams
 - Ecosystem
 - Identity
 - Security
 - Directory, Versions, and Scale
 - Testing and Certification
 - Exchange Process
 - Pilots
- FHIR Accelerator Program
 - Health Level Seven is all-in on FHIR



FHIR ACCELERATOR PROGRAM





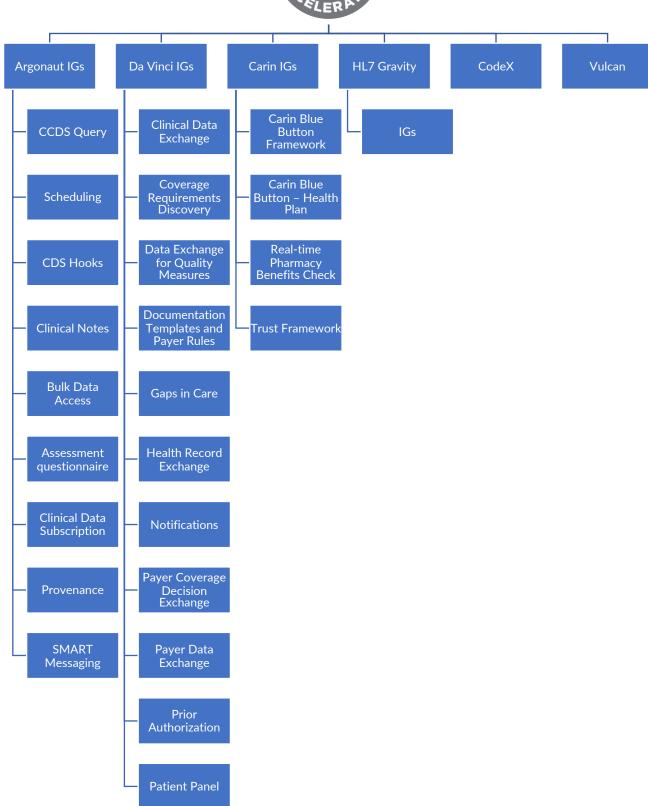




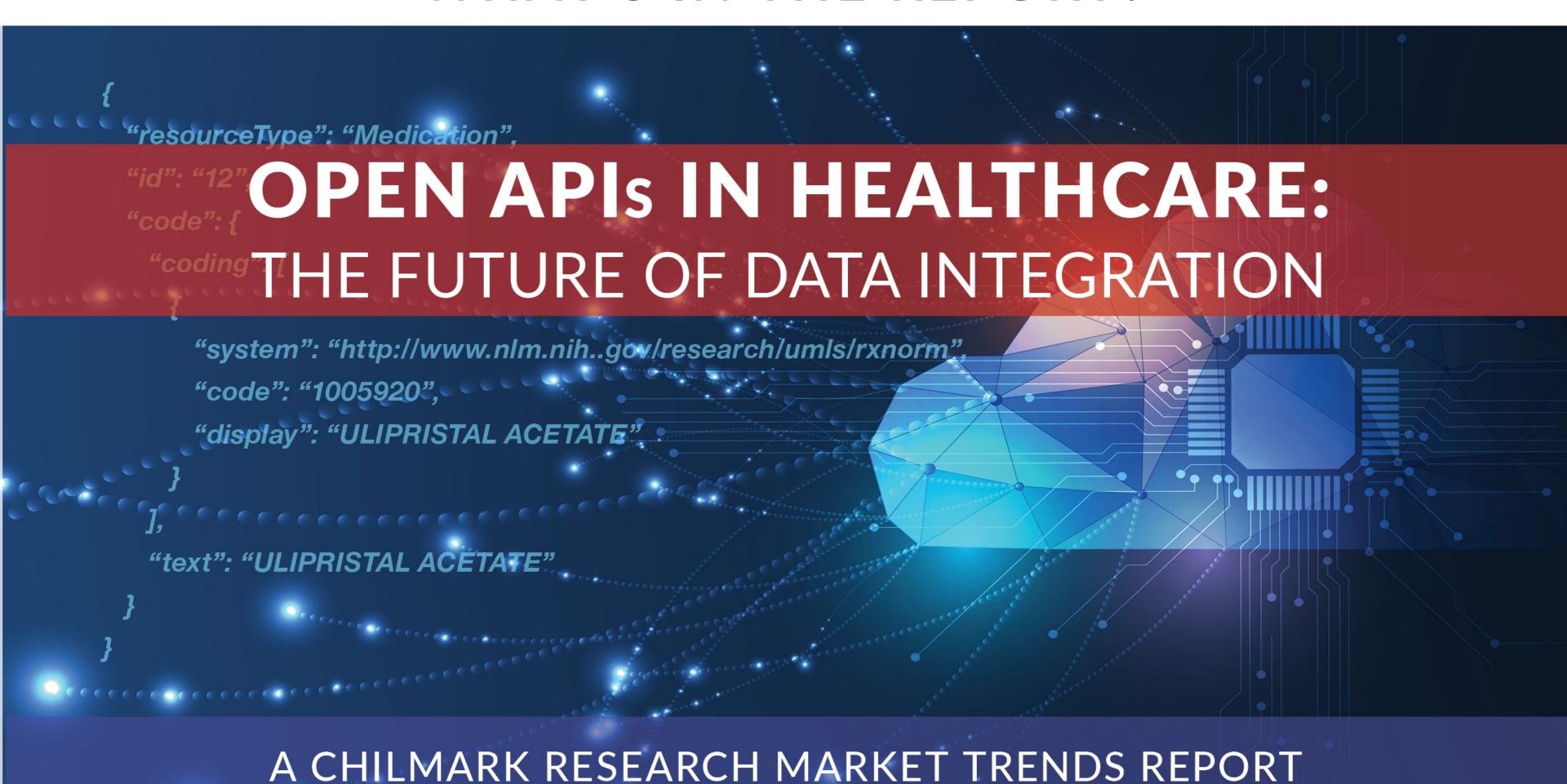








WHAT'S IN THE REPORT?

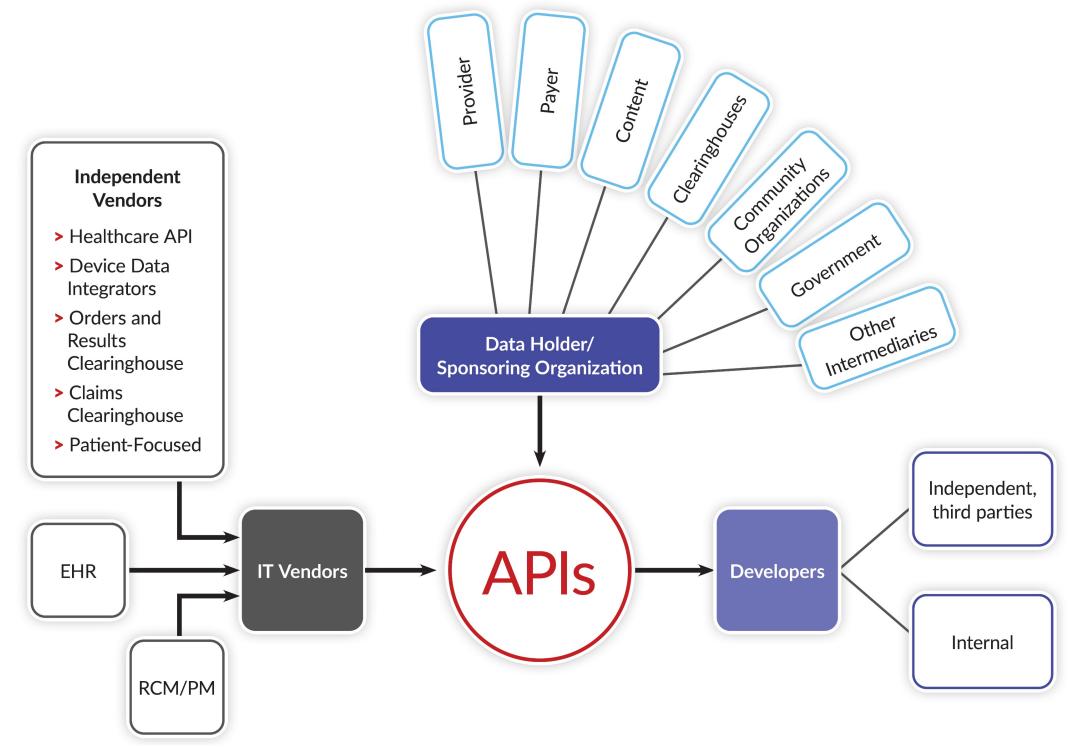




DATA-ORIENTED APIS

- Developer perspective
 - ❖ Where can I find the data I need?
 - Data types, organizational sources, networks, access costs, support provided
 - ❖ What does the API return?
- Provides access to discrete and/or current patient or member data
 - REST-style
 - Conventional APIs
 - HL7, IHE, extracts, purpose-built, SOAP, and other web services
 - Typically return data using XML or JSON, (or documents, or messages)
- Other kinds of API that are out of scope:
 - Aggregated data
 - Functional
 - Calculations, conversions, algorithms, process support, edits and checks

API PRODUCERS AND CONSUMERS



WHAT GOES INTO APIs:

Venue Sources

- > Hospital
- > Office
- > Payers
- > Laboratories
- > Imaging Center
- > Post-acute
- > Home Health
- > Pharmacies
- > Ambulatory Surgical
- > Community Organizations
- > Clearinghouses
- > HIE Organizations

Application Sources

- > EHR
- Devices
- > Patient-generated
- > Practice Management
- > Revenue Cycle
- > ERP
- > Claims
- > Eligibility
- > Provider Directories

Developers

API Facade

- > Standards-based
- > REST
- > Web Services
- > CRUD Access
- > Bidirectional
- Discrete Data, Documents, or Messages



Internal



Third-party



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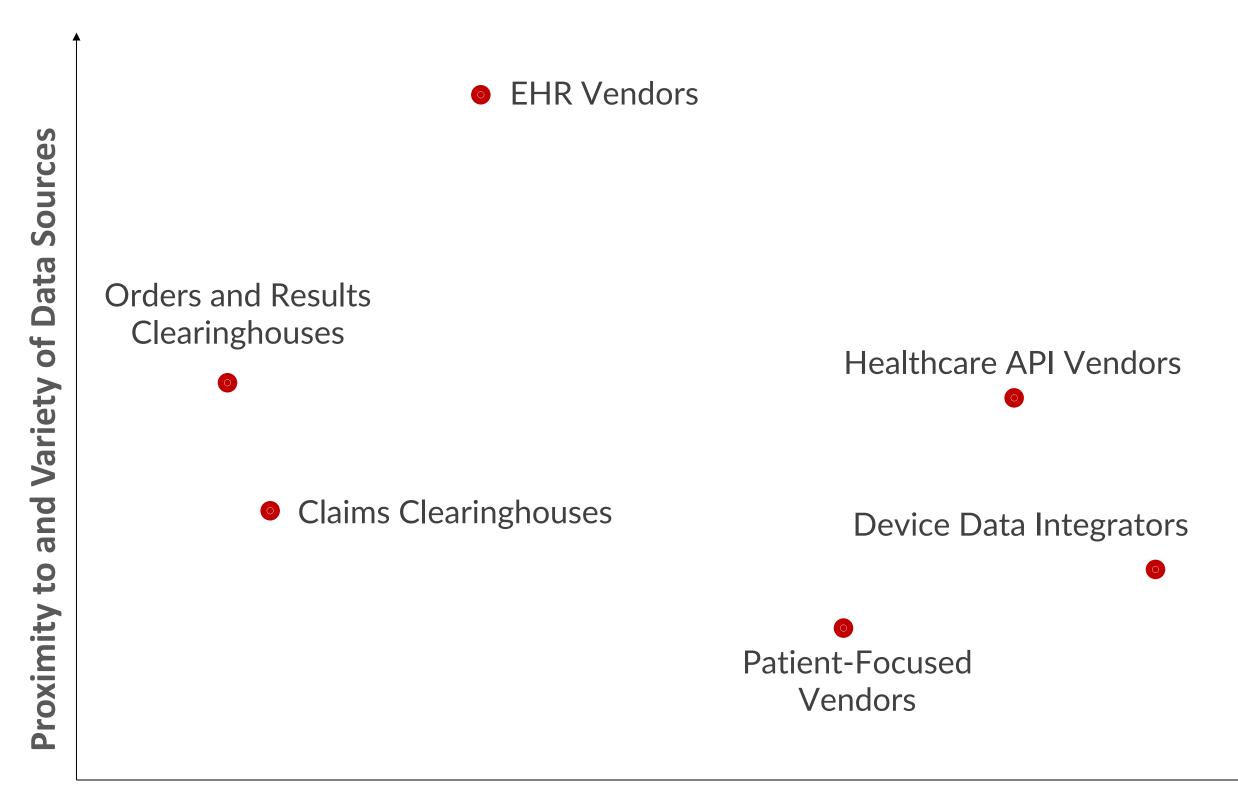
VENDOR CATEGORIES

Vendor Type	Profiled Vendors	Other Relevant Vendors	Proximate Data Source(s)
EHR Vendors	Athenahealth, Allscripts, Cerner, Epic, Meditech NextGen	eClinicalWorks, Greenway Health	Provider EHRs
Healthcare API Vendors	Apple, Change Healthcare, Datica, Redox, 1upHealth, Human API, Particle Health	Enterprise API builders, InterSystems, Orion Health	Many, including EHR, PM, RCM, ERP
Device Data Integrators	Human API, Validic	Capsule Technologies, GE Healthcare, Philips, Siemens	Medical and consumer wellness devices
Orders and Results Clearinghouses	4Medica, Change Healthcare, NCPDP	Elkay, Liaison Technologies, regional and local service providers	Orders and results between HCOs and independent laboratories, imaging centers
Claims Clearinghouses	Availity, Change Healthcare, NCPDP, Surescripts	Emdeon, NaviNet, Remedi, Zirmed	Payer claims, eligibility, and provider directory data
Patient-Focused Vendors	1upHealth, Apple, Blue Button 2.0, Change Healthcare, Particle Health		Provider EHRs

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VENDOR CATEGORIES COMPARED





QUESTIONS?

Please contact me at brian@chilmarkresearch.com for further questions or follow-up



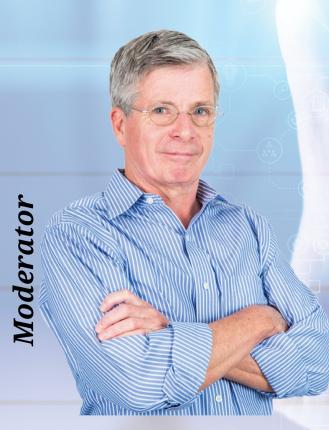
ANNOUNCEMENTS



'COVID LESSONS LEARNED' SERIES CONTINUES:

APIs FOR DATA LIQUIDITY IN PANDEMIC TIMES

VIEWS AND PERSPECTIVES FROM HEALTH IT LEADERS



Brian Murphy Research Director

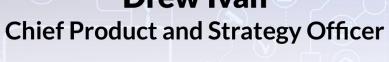




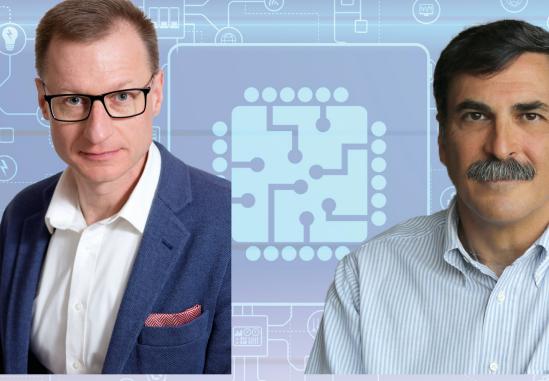
Gautam "G" Shah **VP of Platform and Marketplace**



Drew Ivan







Dr. Dave Levin, MD **Co-Founder, Chief Medical Officer**





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Wednesday September 9, 2020 at 1pm ET / 10am PT

Register Now

NEW RESEARCH

- Revenue Integrity Market Trends Report will be released tomorrow, August 19th, 2020
- Vendors Profiled: 3M, Allscripts, athenahealth, Cerner, Change Healthcare, Hayes|MDAudit, Medicomp Systems, Optum, PatientMatters, RevSpring, Sift, and ZOLL
- Webinar on September 3, 2020 at 1pm ET.

REVENUE INTEGRITY IN HEALTHCARE



SOLUTIONS DRIVING PAYMENT PERFORMANCE



MARKET TRENDS REPORT

THANK YOU FOR ATTENDING!

Feel free to reach out with any follow up questions directly to the analysts or John at john3@chilmarkresearch.com



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