

## **Monthly Information Call**

May 26, 2022 | 1:00 PM – 2:00 PM ET

#### AGENDA





#### May in Review

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Alan Swenson

#### Highlights

- Carequality Connected Agreement (CCA) and Carequality Connection Terms Updates
- Ongoing workgroup progress
- Operationalizing TEFCA



### Carequality Connected Agreement

Alan Swenson



#### Update Process

- Last updated in 2019
- Minor updates—mostly clarification—needed for federal agency participation
- o CCA redline distributed on Monday, May 2<sup>nd</sup>
- Implementer Feedback period closed yesterday
- Thursday, June 2—Steering Committee approval of Proposed Final Version



#### Project Updates

Carequality Team



#### FHIR Workgroup

Bill Mehegan



#### FHIR Workgroup Update

- The workgroup is about 90% done with making the necessary updates to V1 of the FHIR IG
  - Removed all redundant policy language and now largely point to the overarching Carequality Framework Policies Element: <u>https://carequality.org/wp-</u> <u>content/uploads/2022/03/Carequality-Framework-Policies-</u> <u>v1.0-20220307-FINAL-1.pdf</u>
  - Updates to the security/authentication pieces as UDAP goes through the HL7 balloting process: <u>https://hl7.org/fhir/us/udap-security/2021Sep/</u>
  - More flexibility around certificates and allowances for Implementers to have more governance/control over this process
- We hope to wrap up the WG in June then have V2 of the IG go through the Carequality update process in July



#### Image Exchange

Bill Mehegan



#### Image Exchange Update

- Unfortunately, we have no substantive updates to report since we last met. The testing process is on hold while we wait for a couple of vendors to re-engage
- However, Carequality continues to meet with some large provider orgs (who use the Imaging vendors software) as we explore ways to leverage their voices to help move the needle on creating an Image Exchange ecosystem
- We're also exploring the possibility of moving 1 Implementer (Hyland) to Production. This would essentially allow them to exchange images with other Hyland customers; a capability they currently do <u>not</u> have



### FHIR R4 Directory

Bill Mehegan



#### FHIR R4 Directory Update

- We're continuing our search for Beta testers for the FHIR R4 Dev Server
- As of yesterday, we've had 6 volunteers and are awaiting feedback
- If you're an Implementer and are interested in participating, please send an email to <u>techsupport@carequality.org</u> asking for the new Dev API Key
- We'll figure out next steps/timelines for migrating to R4 after this round of Implementer review. At that time, we'll know more about where we stand regarding additional updates that may be needed



#### "On behalf of" Queries

Carequality Team



#### "On Behalf of" Queries Tiger Team

- This Tiger Team kicked off earlier this month because many Implementers want to add Apps as CCs to initiate queries that don't necessarily have information that should be shared in response
- However, the patient's clinical data <u>can</u> be retrieved from another entity in the Carequality ecosystem
- We don't want to exclude these Apps from Carequality participation, because technically, the Full Participation requirement will be met by the <u>already existing entity</u> that has the clinical data to respond with
- The purpose of this effort is to devise a way, using SAML and/or the Carequality Directory, to denote when one of these Apps is querying "on behalf of" (the entity with the clinical data that is capable of responding to queries)



### Payment and Health Care Operations

Chris Dickerson



#### Payment and Health Care Operations

- Proposed policy highlights:
  - An Implementer or CC who wishes to play the role of Query Initiator for Care Coordination via the Health Care Operations purpose in any Use Case, as defined in the relevant Implementation Guide must also play the role of Query Responder for Care Coordination and Treatment in that Use Case, unless doing so would violate Applicable Law
  - An Implementer or CC who plays the role of Query Initiator for treatment purposes in ANY Use Case must also play the role of Query Responder for Care Coordination, unless doing so would violate Applicable Law
  - <u>Fees</u>
    - Responders may charge a fee(s) to Payers that cannot respond with data in the form of a CCDA, PDF, or FHIR resource, so long as those fees are in accordance with Applicable Law
    - Responders MAY respond for Care Coordination in cases where the Payer Initiator does not have the ability to respond with data and/or a fee agreement has not been agreed to
  - <u>Responder Content</u>
    - Responders shall minimally return encounter summaries in accordance with Carequality content requirements or, if no such content requirements are specified, in another industry standard format, as available
- Weekly meetings on Thursdays at 3pm ET
  - If you are interested in joining the conversation, please contact: <u>Admin@Carequality.org</u>



### Patient Matching Workgroup

Chris Dickerson



#### Patient Request Policy Diagram

Initiator (Patient) Via Carequality Implementer/CC (Consumer App) XCPD Contains ONLY verified demographics

<u>CSP</u>

-Verifies Patient to IAL2

-App responsible for patient identification service charges

#### Responder

(Ex. Provider Org)

-Conducts patient match utilizing any combination of an approved demographic set

-Response required for 100% unique match (based on their own definition) where applicable law allows



#### Push Notifications

Chris Dickerson



### **Pilot Testing**

- We have successfully completed pilot testing!
- Next Steps:
  - Outreach to the CEQ community
  - Submit the IG for final approval from the Steering Committee
- Thank you to all of the organizations that participated in the pilot testing group!
- Please review the IG
  - <u>http://build.fhir.org/ig/Carequality/CEQSubscription/branches/</u> <u>master/index.html</u>
- Submit comments by May 27<sup>th</sup>
  - Admin@Carequality.org



#### Production Operations Update

Alan Swenson



#### **Data Collection**

	Non-Errored XCPD	Documents Retrieved
December	1,439,943,599	268,139,270
January	1,233,852,562	310,777,811
February	1,191,014,829	292,605,930
March	1,380,427,362	363,372,558



#### Average Daily Documents Exchanged Per Month









# **Carequality Annual Meeting**December 13, 2022

SAVE THE DATE



## **Questions?**

# Thank you

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