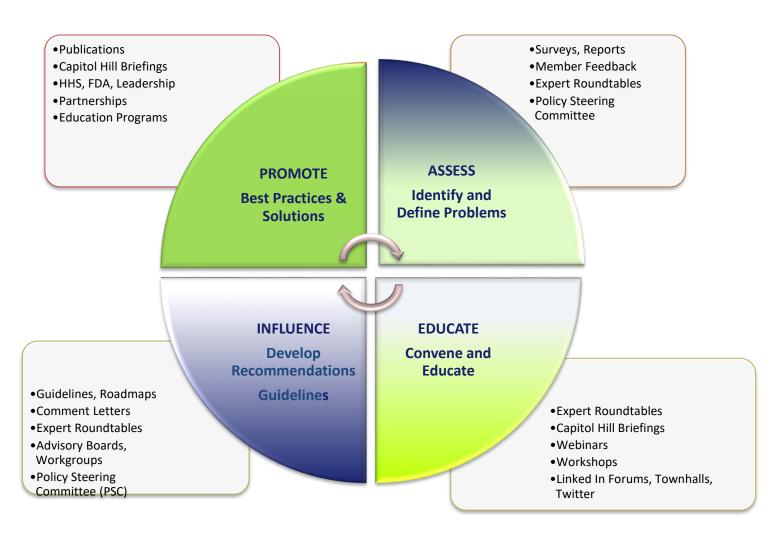


Our Work





Current Areas of Focus

(Green Addressed at Roundtables Today)

Value Based Care

Cost Transparency

Prior Authorization Interoperability

Jnderstanding FHIR/ APIs/DaVinci

Policy Issues/Burden, Workflow, Info Blocking Privacy/Security

Protection Vs Access

HIPAA Part 2

Cybersecurity Med Devices

Analytics/SDOH

Non-Traditional Sources of Data for Health (SDOH, PGHD)

EHR data for clinical trials (Doublejump)



Agenda

- Purpose
- Key hypothesis
- Methods
- Process
 - What
 - Value
 - For whom
 - Connect the dots
 - Drive
 - Take it home



Purpose and Key Hypotheses

Purpose: Accelerate adoption of advanced interoperability.

Key hypotheses:

- Adoption of anything spreads when it is known to add value or make life better somehow
- Today, the term "interoperability" and its value is well understood by a select few, but not by those who will demand it based on how it will make their lives better
- By connecting the "what is interoperability" to the "how does it make life better for key stakeholders" we will build a foundation for faster and more sustainable adoption.



Method

- Make it "personal" to those who would benefit
- Keep it simple
- Focus on the "Why it matters to them"
- Identify actions for those who could and would spread the adoption



Process: What

- What: Each of the panelists ground the audience on their area of focus / expertise. This will essentially cover the "what".
 - Chuck presents on FHIR its basic definition and key milestones
 - Sagran presents on Davinci
 - Chris presents on use cases and vision
 - Russ presents on obstacles



Process: Value

- Value: We can then engage the rest of the group and discuss the types of pain relief or benefits achieved by better interoperability. We can ask the question, what can interop improve?
 - Quality of Care?
 - Efficiency/Cost?
 - Revenue?
 - Regulatory or Contractual Compliance?
 - Engagement?



Process: For Whom

- For Whom: We open a dialogue on who are the key stakeholders / beneficiaries of better interoperability. This should be a simple list and should include personas like:
 - Physicians
 - Nurses
 - Patients
 - Families
 - Practice Administrators
 - Hospitals
 - Payers
 - Government



Process: Stakeholder Benefits

 For each of the beneficiaries on slide 10, list the benefit(s) they would feel:

Stakeholders	Quality	Efficiency	Revenue	Compliance	Engagement
Patient					
Physician					
Administration					



Benefits: Patient

- Quality:
- Efficiency:
- Revenue:
- Compliance:
- Engagement:



Benefits: Physician

- Quality:
- Efficiency:
- Revenue:
- Compliance:
- Engagement:



Benefits: Administration

- Quality:
- Efficiency:
- Revenue:
- Compliance:
- Engagement:



Drive

- For each of the stakeholders we list, identify if there are some groups or professional associations that we believe would help take up the cause for achieving these benefits for their constituents?
 - Example: If the Practice Administrators saw significant benefits, who could help organize their drive for adoption and help "pull" more interoperability into practice?



Take it Home

 Have a very quick exercise where we ask each participant to write at least one way that better interoperability aligns with or supports their company or organizations mission. We ask that to collect the responses, so we could correlate and digest for further follow-up.



Thank you

 Thank the participants for their contributions to building our foundation to drive adoption and make an impact.

