Framing Our Work in 2019
Interoperability
INTRODUCTIONS
30 SECOND EACH ICEBREAKER
Our Work

PROMOTE
Best Practices & Solutions

ASSESS
Identify and Define Problems

INFLUENCE
Develop Recommendations
Guidelines

EDUCATE
Convene and Educate

• Publications
• Capitol Hill Briefings
• HHS, FDA, Leadership
• Partnerships
• Education Programs

• Surveys, Reports
• Member Feedback
• Expert Roundtables
• Policy Steering Committee

• Guidelines, Roadmaps
• Comment Letters
• Expert Roundtables
• Advisory Boards, Workgroups
• Policy Steering Committee (PSC)

• Expert Roundtables
• Capitol Hill Briefings
• Webinars
• Workshops
• Linked In Forums, Townhalls, Twitter
Current Areas of Focus

(Green Addressed at Roundtables Today)

Value Based Care
- Cost Transparency
- Prior Authorization

Interoperability
- Understanding 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:

<table>
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<th>Stakeholders</th>
<th>Quality</th>
<th>Efficiency</th>
<th>Revenue</th>
<th>Compliance</th>
<th>Engagement</th>
</tr>
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<tbody>
<tr>
<td>Patient</td>
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<tr>
<td>Physician</td>
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<tr>
<td>Administration</td>
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</tr>
</tbody>
</table>
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.