HL7 FHIR, Bulk Data & the Da Vinci Project: The Future of Prior Authorization

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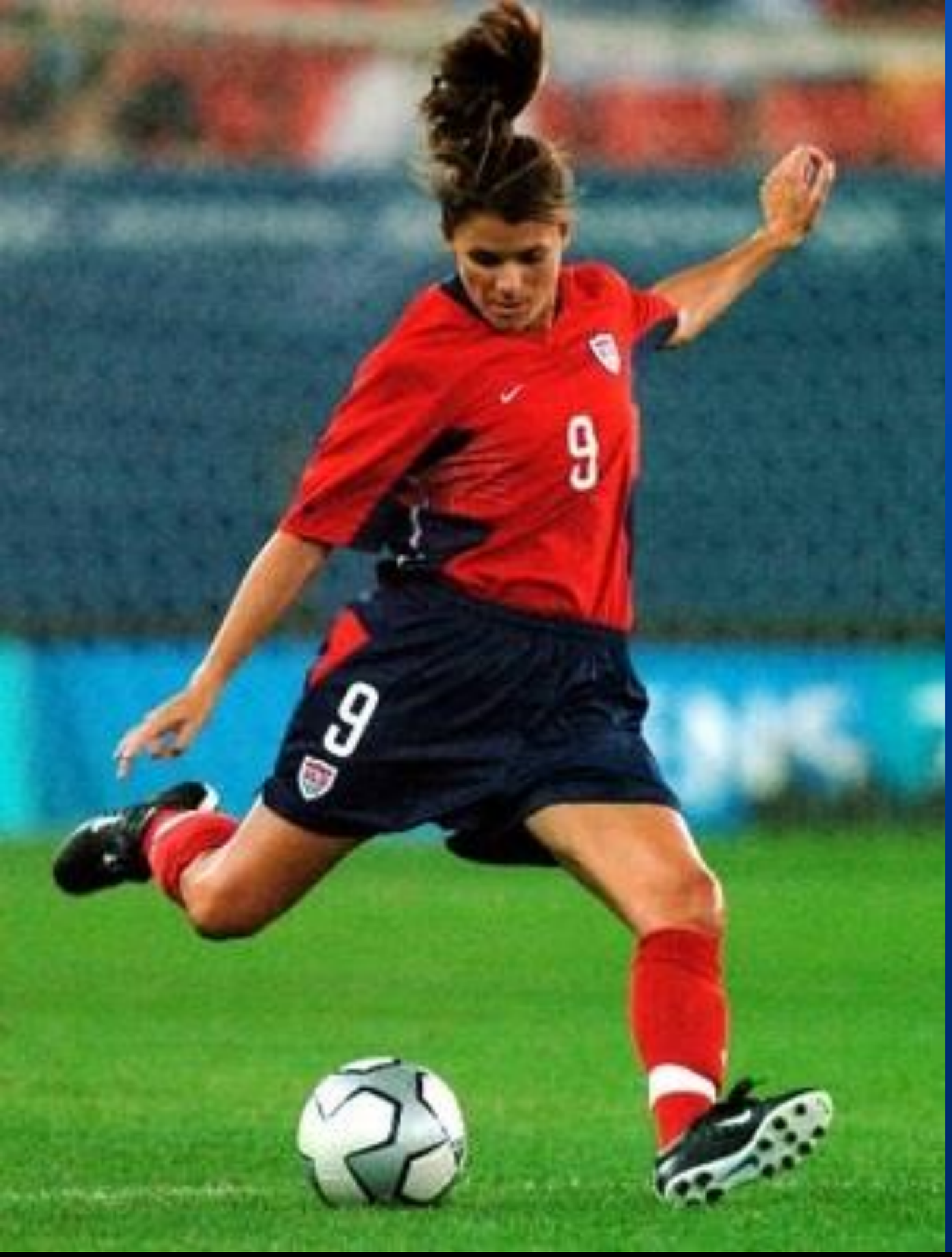

My coach said
that I kick
like a girl.

I told him that if
he tried harder,
he could too.

Mia Hamm

Defining Interoperability

"I don't know what Interoperability is,
but I'll know it when I see it."

With apologies to Justice Potter Stewart
Jocobellis v. Ohio

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True Interoperability

From the deck of the USS Enterprise every video screen can share images with every other ship in the galaxy.

Why FHIR is different

FHIR is both the technology
and
the agreement on
the meaning of the data.

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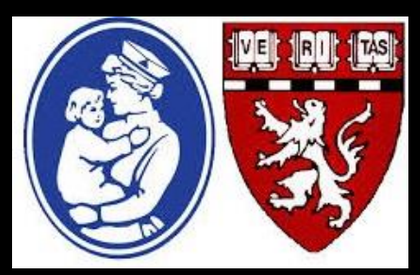
Bulk Data on FHIR

- The technology & policy for exchanging records from an unlimited number of patients or study subjects
- Developed cooperatively with Boston Children's Hospital / Harvard
- Supports data analytics for population health, value-based care, clinical trial design and pharmaco-vigilance.



It’s all about asking the right question

I asked the Librarian if she had a book
about Pavlov’s dog & Schrödinger's cat.

She said that it rang a bell, but
she wasn’t sure if it were there or not.

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Prior Authorization:
The list of challenges is a long one

Variations in medical and pharmacy benefits result in *different prior-authorization rules by different payers*, which are cumbersome, require inconsistent workflow processes, and require submission of inconsistent, additional information through manual processes.

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"What's past is prologue."

Antonio in Shakespeare's *The Tempest*

Prior Authorization:
What's past is prologue

- Prior Authorization: one of the original HIPAA transactions
- X12N 278 standard adopted under HIPAA for electronic prior authorization.
- 2003: Version 4010 (e) adopted via CMS HIPAA regulations
- 2012: Version 5010 adopted

The use of the *required* electronic standard transaction for prior authorizations is less than 10-15% in most user surveys.

Alternative methods for achieving Prior Authorization, include health plans' web portals (predominant venue), Interactive Voice Communication (IVR), phone calls, & faxes, haven't helped.

Prior Authorization:
NCVHS weighs in (2015-17)

- Confirmed its low use due to complexity of the standard, cost, ease of alternatives.
- Confirmed that Prior Authorizations continue to be required extensively for multiple purposes.
- Recommended CMS consider withdrawing the requirement to use the current standard until the issues with it have been addressed

Prior Authorization:
The cost of waiting for the next standard

- NCVHS to recommend CMS adopt X12's 7030
- Version 7030 is not expected until 2021-2022 at the earliest
- CMS accepted the recommendations and issued proposed rules, public comment, final rule issuance, and expected 2-year compliance timeline.

Prior Authorization: Concurrent initiatives

- WEDI Prior Authorization Initiative.
- X12N: Finalizing 7030 public review of 278
- X12N: Innovations Task Force
- CMS: Incorporating simplification of the electronic Prior Authorization into the “Reducing Clinician Burden” initiative
- CORE: Developing Phase IV Operating Rules, including Prior Authorization

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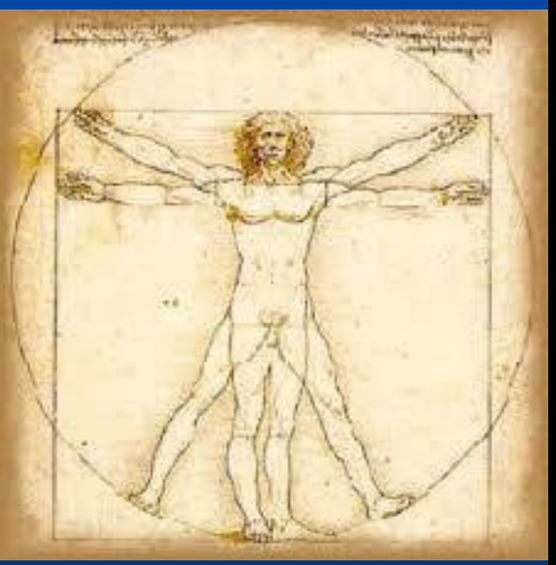
Addressing Prior Authorization Conundrum at HL7



Da Vinci Project

Advancing “Value-Based Care”
by leveraging FHIR for
the capture of granular clinical data
from patient records
to improve quality, to reduce costs,
and to enhance care management.

http://www.hl7.org/about/davinci/index.cfm?ref=common

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2018 Use Case Inventory & Project Deliverables

30 Day Medication Reconciliation*

Coverage Requirements Discovery*

Documentation Templates and Coverage Rules*

eHealth Record Exchange: HEDIS/Stars & Clinician Exchange

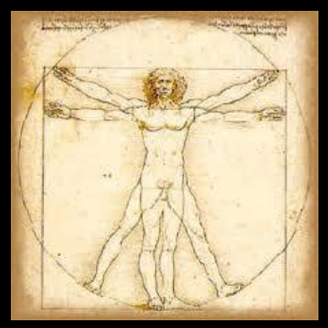
Notification (ADT): Transitions in Care, ER Admit/Discharge

Risk Based Contract Member Identification

Prior Authorization

Quality Measure Reporting

Laboratory Results



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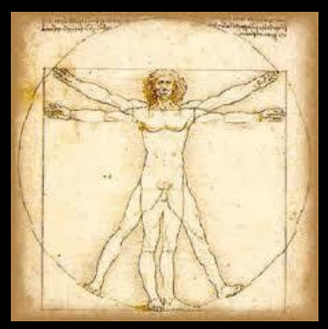
Da Vinci 2018 Use Case Inventory & Project Deliverables

- Define requirements, both technical & business
- Create Implementation Guides
- Create & test Reference Implementations
- Pilot & deploy the solutions



Setting the stage for 2019: The Holy Grail

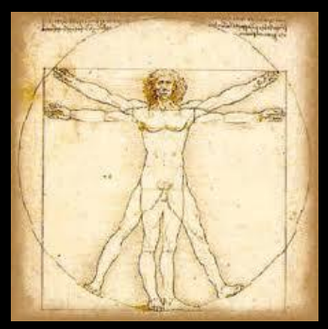
30 Day Medication Reconciliation

Coverage Requirements Discovery

Documentation Templates and Coverage Rules

eHealth Record Exchange

Prior Authorization



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One Requirement of Payers* in Achieving e-Prior Authorization

Translating thousands of pages of arcane, and often outdated rules and decision trees into computable algorithms.

*Private & public sector

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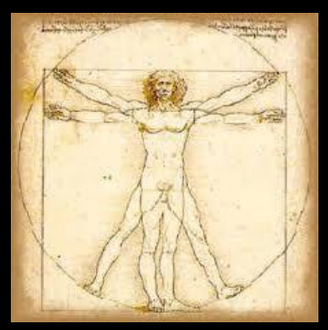
Da Vinci & the Future of Prior Authorization

There are at least 3 obstacles to achieving seamless electronic prior authorization…

policy, administrative burden and technology.

The least of these is technology.



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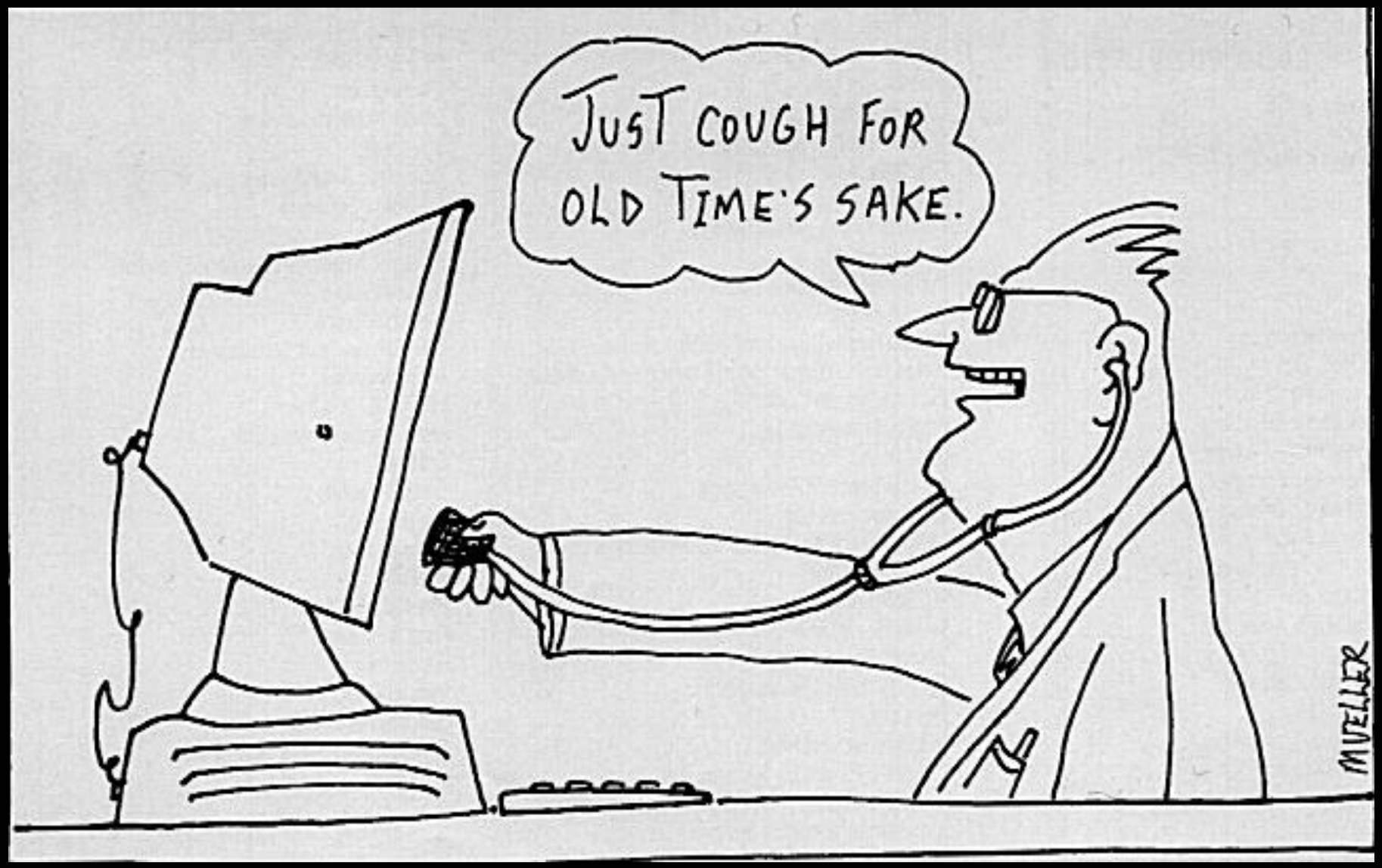
My sincerest gratitude to

Viet Nguyen, MD

Walter Suarez, MD

Thanks



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