

# SETTING THE WORLD ON FHIR®

Published by HL7® International, a not-for-profit organization, Fast Healthcare Interoperability Resources (FHIR®) is a standard for exchanging healthcare information electronically

A series of case studies illuminating how HIT professionals are using HL7®FHIR® to improve and advance modern healthcare

## MULTICARE CONNECTED CARE

MultiCare Connected Care is an accountable care organization (ACO) established in Tacoma, Washington, USA, in 2014 as a wholly independent business entity by MultiCare Health System. Its comprehensive Clinically Integrated Network (CIN) is comprised of doctors and other healthcare providers, as well as hospitals, clinics and other health care services, such as imaging, labs and pharmacies.



CASE STUDY

## OPALA

A healthcare data exchange solutions provider founded in 2020, Opala's mission is to vastly improve healthcare information flow in real time. With solutions directly connecting information across the healthcare system, Opala provides a complete longitudinal clinical view, enabling every patient's experience to be optimized through seamless collaboration between payers and providers.



## Goal

To share clinical, coverage, network and EHR data to ensure patients receive the most appropriate care to achieve the best outcomes

## Opportunity

To develop HL7®FHIR® guidelines to improve information sharing and the delivery of value-based care



Since implementing Opala's multi-payer data exchange solutions, patient matching has improved, and we are able to see patient benefits in real time, which allows us to earn higher reimbursement for value-based care.

— Anna Taylor, associate vice president of population health and value-based care, MultiCare Connected Care

## Project

For payers and providers, patient matching is an important aspect of both care and reimbursement. [Approximately 33% of denied claims resulted from inaccurate patient identification or incorrect patient information](#), costing the average hospital \$1.5 million and the U.S. healthcare system \$6 billion annually.

It is critical that partners have accurate matching (attribution) to increase transparency to real-time information about their patients to improve outreach, interventions, and time to service.

The Da Vinci Project, an accelerator program of HL7, developed the HL7 FHIR standard focused on the [member attribution \(ATR\) lists](#) used by payers and providers for implementing risk-based contracts, value-based contracts, care gap closures and quality reporting.

Using the HL7 FHIR standard, Da Vinci Project participants Opala, MultiCare and a multi-state health insurance provider developed and piloted the Attribution API, which assists with patient matching to help ensure that both payer and provider know which members are covered under a value-based contract. The API takes all member data from a health plan — EHR, contracts and member eligibility — and converts it into HL7 FHIR ATR-compliant resources. The updated and corrected health plan data is then shared with MultiCare providers, who can access it while the patient is in the office.


The Attribution API provides providers with coverage and payer information, all integrated into the provider's existing EHR system, to ensure a seamless process for transferring information.

For example, a patient's healthcare benefits are available in real time, so providers know if patients qualify for additional services. By having this information at hand while the patient is in the office, the provider doesn't need to contact the health plan to inquiry about coverage, which saves time and increases the likelihood that the patient will receive the treatment they need in a timely manner.

## Progress

In a pilot program, MultiCare has seen a 10% improvement in patient matching, helping them further improve patient safety by ensuring that healthcare providers have the full picture about their patients in real time.

Opala created the data pipelines that allow the exchange of protected health data in a way that is standardized, secure and straightforward, reducing the possibility that a provider may miss important care opportunities. This information can also reduce the burden placed on a patient to remember each detail about their medical history and increases the likelihood that the patient will get the proactive care they need.



Our Attribution API uses HL7 FHIR standards to automate information sharing between payers and providers, delivering accurate member data in real time in a scalable format so it can easily be implemented to any provider or payer organization.

— Ken Chandler, CEO, Opala

