Electronic Consumer Engagement

HL7 Payer User Group

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Topics I will touch on today

• Who is NATE?
• What is NBB4C?
• How was the NBB4C developed?
• How does it work?
• What’s Next?
  • Task Force: Data Provenance for Exchange Purposes IG
  • Ongoing Governance of Trust framework for new use cases such as:
    • Consumer contribution of clinical data to Qualified Research Organizations
    • Adding Membership Card information to consumer facing applications for electronic eligibility determination
Who is NATE?

The National Association for Trusted Exchange (NATE) is a not-for-profit association focused on enabling trusted exchange among organizations and individuals with differing regulatory environments and exchange preferences.

NATE’s Membership is open to Government Entities, Non-government Organizations and other Associations.
NATE Members include
NATE Members include

As of September 1st

The Seal of the State of Alaska

The Seal of the State of Hawaii

State of Oregon

The Great Seal of the State of Michigan
NATE Members include

- DataMotion
- eSolutions
- CONSOLO
- carebox
- Get Real Health
- iShare Medical
- NoMoreClipboard.com
- CORHIO
- HealthCentrix
- CAHIE
- California Association of Health Information Exchanges
- California Republic
- The Seal of the State of Alaska
- North Dakota
- State of Hawaii
- State of Oregon
- The Great Seal of the State of Michigan
- wedi
- MiHIN Shared Services
- MaRS
HISTORY

• Origins from back in 2011 as the “Western States Consortium”
• Started as a group of states who collaboratively piloted Trust Bundles as a part of the ARRA HIE program
• Recipients of multiple State Health Policy Grants and other funding from the ONC.
• Incorporated as the National Association of Trusted Exchanges on May 1, 2013.
• Received our 501.c.3 determination letter from the IRS on June 26, 2015
What is the NBB4C?

The **NATE Blue Button for Consumers (NBB4C)** Trust Bundle is a trust mechanism that provides HIPAA covered entities that use Direct a facile method of exchange with Consumer Facing Applications that must meet or exceed a different set of regulatory criteria and user experience requirements to become a NATE QE.

*We make it easy for providers to share health information with their patients so that their patients can do what they want with it.*
How was the NBB4C developed?

- **Initialize**
  - NATE Prioritizes Patient Access to PHI
    - 1/1/2013
    - 04/29/2013

- **Phase I**
  - ONC PHR Ignite funding combined with state grants are used to support discovery phase pilots that identify gaps in standards and policies and learn what was possible
    - 8/25/2014

- **Phase II**
  - NATE convenes Scoping Workgroup to refine recommendations for Production Trust Bundle
    - 1/23/2015

- **ONC PHR Ignite**
  - Phase I
  - ONC PHR Ignite funding combined with state grants are used to support discovery phase pilots that identify gaps in standards and policies and learn what was possible
    - 8/25/2014

- **Public Comment Period Ends**
  - 1/16/2015

- **Recommendations Presented to Board**
  - 1/16/2015

- **NBB4C**
  - NATE Board of Directors Approves Phase II Recommendations
    - March 1, 2015

- **Go-Live**
  - Inaugural Bundle
    - 1/1/2013
    - 04/29/2013
    - 6/24/2014
    - 11/14/2014
    - 1/16/2015
    - 1/23/2015
    - 1/23/2015
Why does this matter?

- Improve outcomes and enhance patient satisfaction
- Communicate and coordinate with providers
- Self manage health and wellness
- Check for errors or inaccuracies
- Potential for cost reduction

**Engaged Patients = Better Outcomes and Appropriate Care**
Trust Bundle Qualified Entities

- NoMoreClipboard.com
- Get Real Health
- huMETRIX
- MEDYEAR
- iShare Medical
- HealthVault
- carebox
How does it work?

- Simplifying secure messaging with Consumers for covered entities
- Getting consumers their clinical data; & in the future Insurance Membership Data??
What’s Next?

• Task Force developing a Data Provenance Implementation Guide to improve workflow upon receipt of messages from consumers

• Governance of the Trust Bundle, revisiting the eligibility criteria of the NBB4C

• Discovery regarding Consumer sharing of clinical data with Qualified Research Organizations (PCORI related NATE users)

• Virtual Clipboard – perhaps of most interest to the Payer User Group
Data Provenance for Exchange Purposes

- The Gap
  - Data provenance is handled within each enterprise system in the health ecosystem today
  - Which is fine until you try to exchange between different enterprises – especially apparent when exchanging between Consumers and Providers
  - Currently there is no standard meta-tagging in use to allow workflow automation upon receipt of data from a consumer
  - As a result all messages are treated the same and require human intervention to put the content of the message into the appropriate section of the EMR.
  - There are a plethora of standards that are emerging that will be deployed in the coming years but we need to accelerate this use case so:
  - NATE is catalyzing an effort to develop an Implementation Guide that is forward compatible but can work within the confines of deployed software in use today.
Data Provenance for Exchange Purposes

• Types of data being shared by consumers
  • Unsolicited Patient Generated Health Data (PGHD)
  • PGHD requested by the Provider
  • Consumer Device Data
  • Prescribed Medical Device Data
  • And more…
Data Provenance for Exchange Purposes

- NATE has established a Task Force to -
  - Collaborate on establishing message level meta-tags that can be used by receiving systems to reduce the administrative handling of received messages. Committed participants to phase 1 include:

- ERM vendors:
  - Epic,
  - Cerner,
  - GE; and

- Consumer Application vendors including:
  - Carebox,
  - GetRealHealth,
  - Humetrix,
  - iShare Medical,
  - NoMoreClipboard, and
  - Medyear.

Mini-summit scheduled September 28th at NATE / SHIEC / HUG Annual Conference
I am very excited to have been appointed to the Virtual Clipboard Workgroup leadership committee as it enters Phase 2.
Phase I: Focus on a common framework for presenting benefit eligibility.
Virtual Clipboard: Phase II Discovery

Health Benefits and Health Record Mobile Application

Minimum Functions for First Iteration of Pilot - Flow Diagram

Patient opens mobile application on phone

Application transfers the required data needed to trigger an eligibility request (X12-270):
1) PATIENT ID (SUBSCRIBER ID)
2) GROUP# (if known)
3) PATIENT LAST NAME
4) PATIENT FIRST NAME
5) PATIENT DOB
6) PAYER ID
7) PAYER NAME

Validate patient and update patient information

Perform electronic eligibility verification (HL7 ADT PID &IN1) using the X12 271:

Process eligibility request and return data needed to register/verify elig. (HL7 ADT PID &IN1) using the X12 271:
1) Patient gender, relationship code, address, plan type, contract info

Register patient
“You cannot help people permanently by doing for them, what they could and should do for themselves.”

— Abraham Lincoln
NATE-trust.org/trustbundles

Join NATE’s PHR Community to Stay Informed:
NATE-trust.org/phr-community-signup
NATE-trust.org

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MONDAY: NATE Business Meeting Day

- Set aside 2 hours for Board business?
  - Board Slate & Officer Nominations for 2016
  - Data Provenance Mini-Summit?