



The CARIN Alliance

LEAVITT
PARTNERS

About Leavitt Partners



Leavitt Partners is a health care intelligence business. The firm helps clients successfully navigate the evolving role of value in health care by informing, advising, and convening industry leaders on five major pillars: value market analytics, alternative payment models, government expertise, exchange insights, and alliances. Through its member-based alliances and direct services to clients, the firm provides the best available window to the future of American health care and convenes industry stakeholder groups to support decision-making strategies in the value economy.



Governor Mike Leavitt

Chairman, Leavitt Partners
3-time Governor, State of Utah
Former Secretary of HHS
Former Administrator of EPA

Inform

Advise

Convene

Smart on Value

How Leavitt Partners convenes an alliance

From *Finding Allies, Building Alliances* by Mike Leavitt and Rich McKeown



Common Pain

Health care organizations with divergent interests frequently face common challenges and seek common opportunities.



A Convenor of Stature

A person of respected stature is needed to bring the alliance together.



Representatives of Substance

Alliances require the right combination of multi-sector, interdisciplinary representatives.



A Committed Leader

Alliances benefit from a balanced, independent leader with regulatory and policy expertise to manage and move the alliance forward.



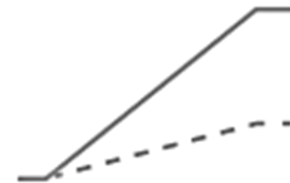
A Clearly Defined Purpose

A well-defined objective keeps participants focused on reaching consensus solutions.



A Formal Charter

A charter that creates focus by defining the alliance's mission, scope and structure.



The Northbound Train

The alliance needs to create momentum and an inevitability that the objective will be reached and respected if people are going to invest time and resources.



Defining Common Ground

Transparency in determining underlying assumptions, sources of information, and standards to help identify solutions.

What is the common pain we are trying to solve?

Lack of Consumer Access to Health Information

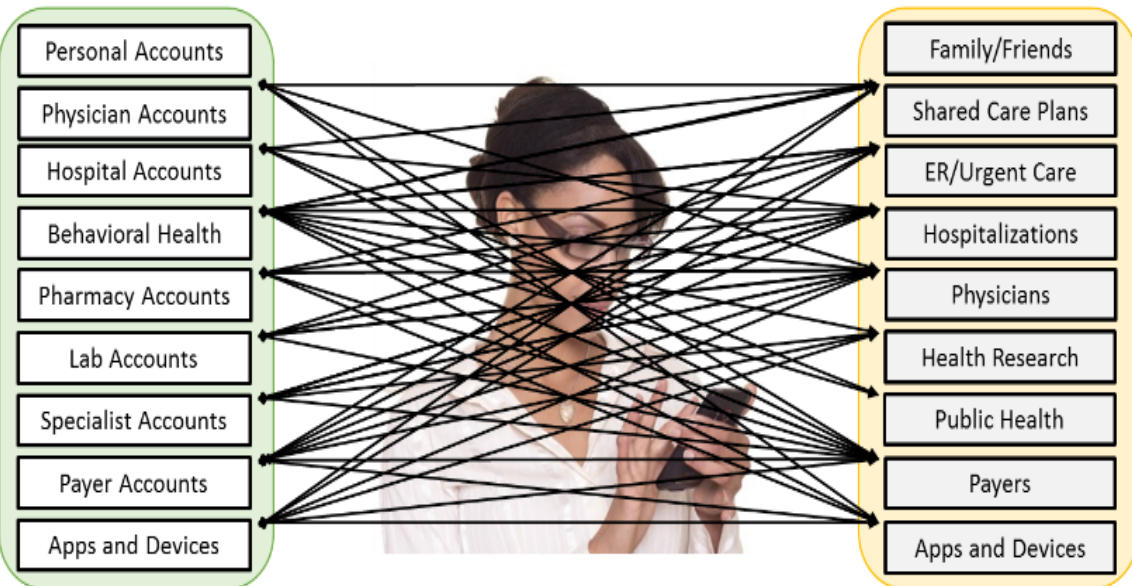
Today, multiple barriers are blocking consumer ability to get, share and use their health information when where and how needed to improve their health and care.

Consumer/Patient Often Excluded

Wait times, medical errors, duplication, high costs, frustration

Barriers – lack of

Consumer-demand | Provider support | Technology access
CDE policy awareness | Sustainable business models | Privacy/security frameworks



Consumer-Directed Exchange

Consumer-Directed Exchange (CDE) strengthens health information sharing and empowers collaboration between consumers and providers.

Consumer/Patient Engaged as Care Partner

Better Health, Better Care, Smarter Spending

The CARIN Alliance – advancing CDE by strengthening:

Consumer-demand | Provider support | CDE technology
CDE policy awareness | CDE business models | CDE privacy/security frameworks



The CARIN Alliance



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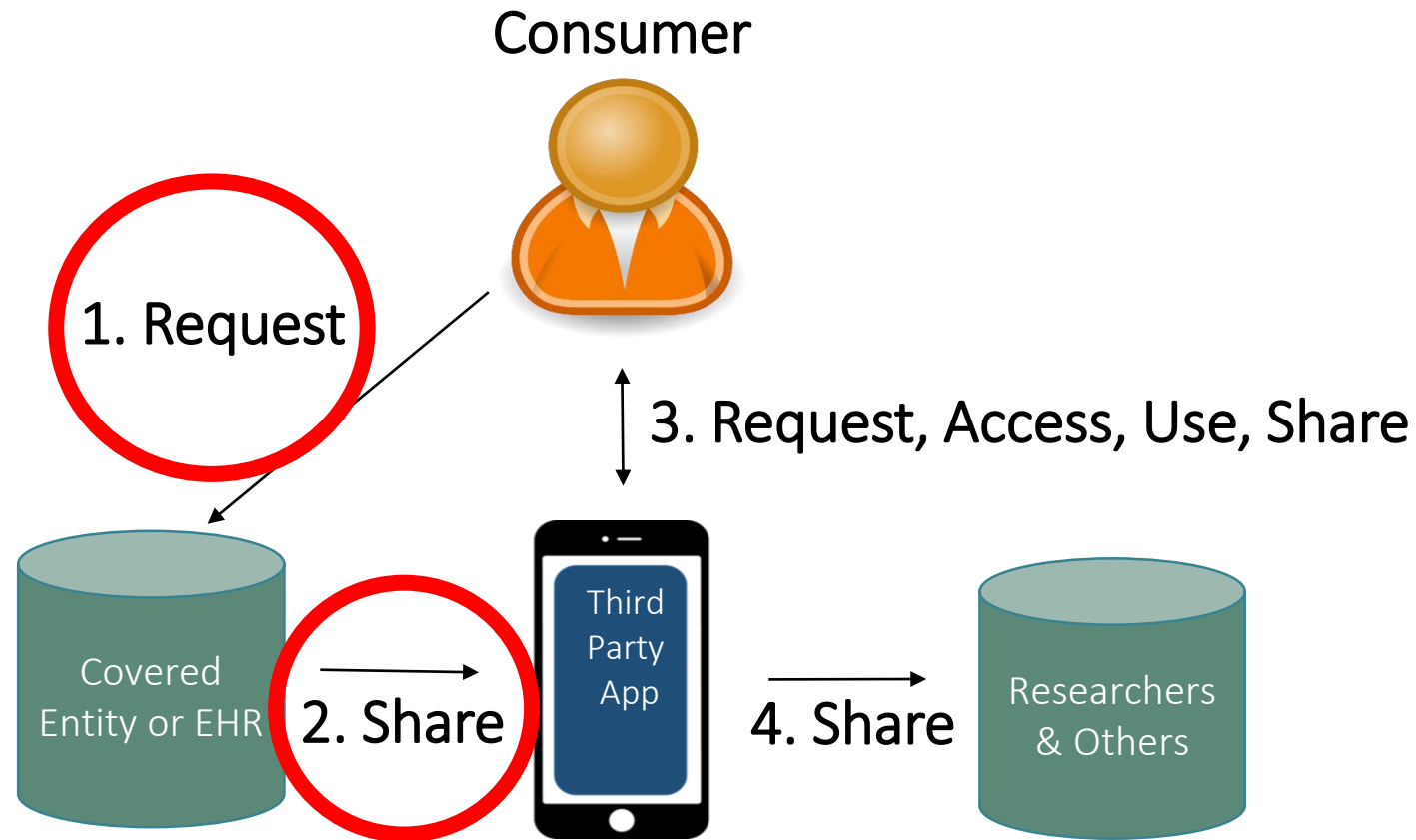
VISION

To rapidly advance the ability for consumers and their authorized caregivers to easily get, use, and share their digital health information when, where, and how they want to achieve their goals.

Participating Organizations

- AMA
- Videntivity
- Cambia Health Solutions
- Caregiver Action Network
- Cedars-Sinai
- Conduent
- Dartmouth-Hitchcock
- DaVita Healthcare
- Fresenius
- Marshfield Clinic
- National Partnership
- New York Presbyterian
- Polyglot Systems
- The Broad Institute
- CareEvolution
- IOWN2
- American College of Physicians
- American College of Surgeons
- Pfizer
- UL
- Indiana HIE (IHIE)
- Crimson Tide
- IBM Watson Health
- Aon
- Google / Verily
- Samsung
- Hackensack Meridian Health
- Trinity Health
- UCSF
- Verizon
- The Genetic Alliance
- National Governors Association
- AHIMA
- HL7 / Argonaut Project
- Commonwell Health Alliance
- Health Care Transformation Task Force
- Sequoia / Carequality
- NATE

What are the initial use cases we are trying to solve?



Eliminate the business and policy barriers associated with the implementation of the FHIR APIs

Enabling legislation is already in place

HIPAA

- *What it Does:* Requires covered entities to share health information with consumers and/or their designated agents upon request within 30 days
- *What it Does Not Do:* Specify what types of information to share; eliminate provider option to require patients to sign paper authorizations

HITECH

- *What it Does:* Authorizes ONC to define interoperability standards, certify technologies, and provide funding to support use of certified technologies
- *What it Does Not Do:* Specify role of private sector consortia in developing and supporting those standards; specify roles and responsibilities of “trusted intermediaries” such as consumer authorized apps

MACRA / MIPS

- *What it Does:* Requires clinicians to attest to not participating in information blocking; strengthens ONC authority to set standards; creates new incentives to digitally share information such as quality measures; requires providers to “share” and “receive” information from consumer apps
- *What it Does Not Do:* Specify how to define information blocking

2017 CARIN Alliance roadmap

Deliverable	Description	Workgroup
Principles of trusted consumer-directed exchange	Develop consensus regarding the high-level principles and best practices to enable the trusted exchange of health data between consumers, apps, and providers	Trust
FHIR API implementation best practices and feedback	Technology forum for sharing best practices regarding the implementation of the vendor-based FHIR APIs	Technology
Public demonstrations of how the FHIR APIs work in production	Demonstrate during HIMSS, Health DataPalooza, and throughout the year the progress organizations are making implementing the FHIR-based APIs	Technology
Individual Right of Access best practices	Development of best practices and forms for individuals to request access to their health information	Adoption and Sustainability
Consumer, Business, and Caregiver education	Remove the business barriers to CDEx and educate consumers, providers, and caregivers on CDEx	Adoption and Sustainability
Business and Policy input to the longitudinal health record	Provide business and policy feedback to the SDOs as they work to extend the Common Clinical Data Set and create the longitudinal health record	Technology
Cures regulatory policy	Provide a private-sector led vehicle for helping to define the regulatory policies associated with Cures	Policy



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