

# What Does HL7 FHIR Mean for **Patient Care?**

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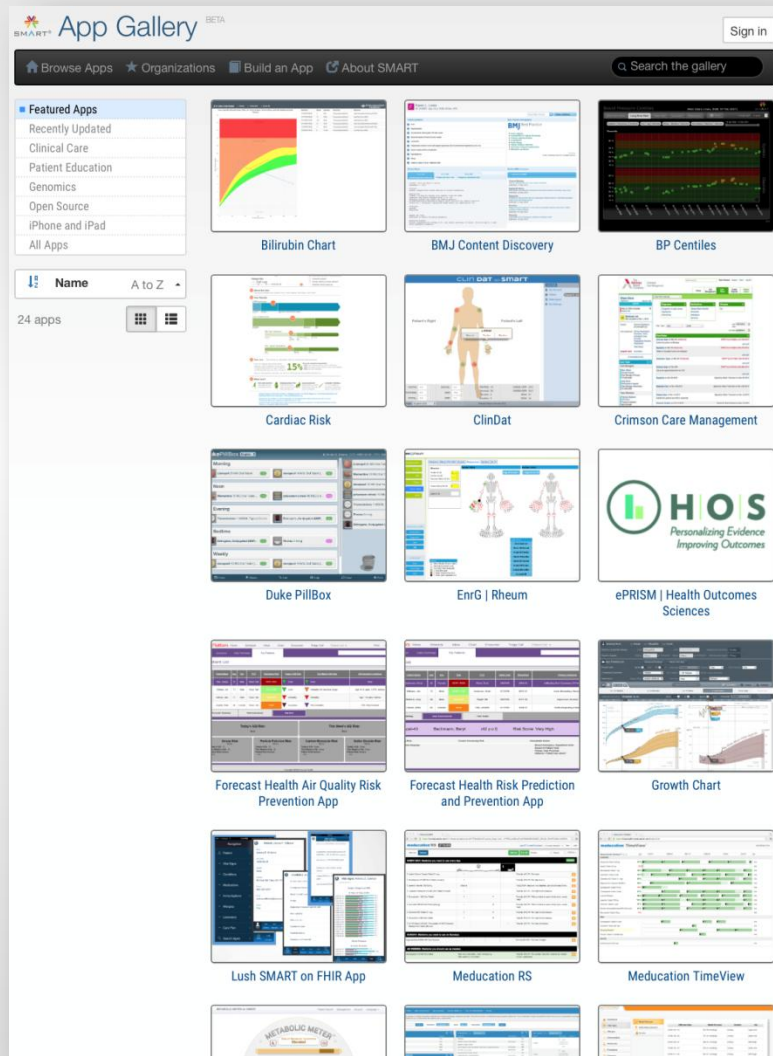
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# It means ... *more options*



- More options = better ideas in the marketplace from more diverse minds
- Lower barrier of entry for developers
- Faster translation of clinical research to the bedside

<https://gallery.smarthealthit.org>

# It means ... *an integrated workflow*



- Saves time
- Increases provider satisfaction
- Ensures the right patient context
- Better uptake of CDS tools

# It means ... *empowered patients*

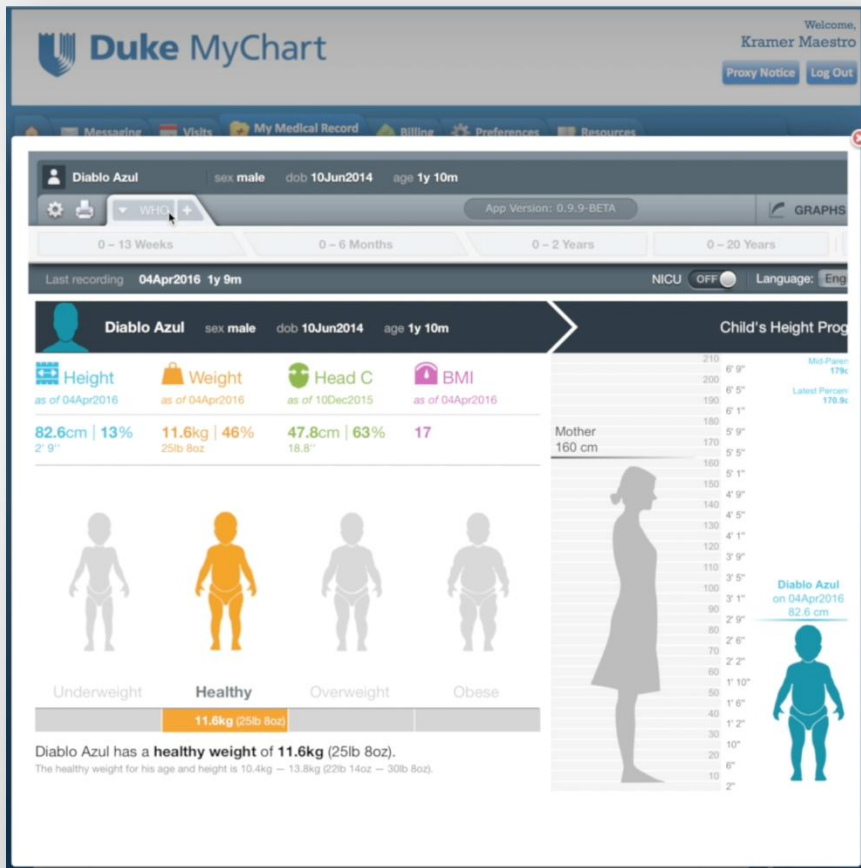
The screenshot shows the Federal Register website. At the top, there is a navigation bar with links for Sections, Browse, Search, Reader Aids, and My FR. The main header features the Federal Register logo and the text 'FEDERAL REGISTER The Daily Journal of the United States Government'. Below this, a blue banner indicates 'Rule'. The main title of the document is 'Medicare and Medicaid Programs; Electronic Health Record Incentive Program-Stage 3 and Modifications to Meaningful Use in 2015 Through 2017'. It is noted as a rule by the Centers for Medicare & Medicaid Services on 10/16/2015. The document is categorized as a 'PUBLISHED DOCUMENT'. On the left, there is a sidebar with icons for various document types. The main content area is divided into sections: AGENCY (Centers for Medicare & Medicaid Services (CMS), HHS), ACTION (Final rules with comment period), and SUMMARY (This final rule with comment period specifies the requirements that eligible professionals (EPs), eligible hospitals, and critical access hospitals (CAHs) must meet in order to qualify for Medicare and Medicaid electronic health record (EHR) incentive payments and avoid downward payment adjustments under the Medicare EHR Incentive Program. In addition, it changes the Medicare and Medicaid EHR Incentive Programs reporting period in 2015 to a 90-day period aligned with the calendar year. This final rule with comment period also removes reporting requirements on measures that have become redundant, duplicative, or topped out from the Medicare and Medicaid EHR Incentive Programs. In addition, this final rule with comment period establishes the requirements for Stage 3 of the program as optional in 2017 and required for all participants). On the right, there is a 'DOCUMENT DETAILS' section with information such as Printed version (PDF), Publication Date (10/16/2015), Agencies (Centers for Medicare & Medicaid Services), Effective Date (12/15/2015), Comments Close (12/15/2015), Document Type (Rule), Document Citation (80 FR 62761), Page (62761-62955 (195 pages)), CFR (42 CFR 412, 42 CFR 495), and Agency/Docket Number (CMS-3310-FC and CMS-3311-FC).

- **MU3 Final Rule**, Patient API requirement: “From the patient perspective, an API enabled by a provider will empower the patient to receive information from their provider in the manner that is most valuable to the patient.”
- “Providers may not prohibit patients from using any application, including third-party applications, which meet the technical specifications of the API, including the security requirements of the API.”



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# It means ... *empowered patients*



- Patient-centric apps only requires the user's patient portal credentials to access their data
- Standalone apps (distributed through app stores) or web apps integrated into patient portal

# It means ... *contributions to science*

## Helping patients share EHR data with research

Sync for Science™

### Who is S4S?

S4S is a collaboration among researchers (Harvard Medical School Department of Biomedical Informatics), electronic health record vendors (Allscripts, athenahealth, Cerner, drchrono, eClinicalWorks, Epic, McKesson), and the United States federal government (Office of the National Coordinator for Health IT, Office of Science and Technology Policy, and National Institutes of Health).

### Who benefits from S4S?

#### Research Participants

An easier way of contributing to scientific progress and sharing medical records with researchers that doesn't require faxed forms, delays, or in-person visits.

#### Researchers

A simple path to receive research participants' basic clinical data, including essential details like lab results, vital signs, problem lists, medications, and immunizations, potentially increasing participation in studies. Data delivered in a structured format with standard vocabularies may also need less "cleanup" than typical EHR data.

#### Providers

A way to give patients access to the potential benefit from participating in research studies and a reduction in staff time to support data requests, as they flow automatically through our vendor-supplied patient portal.

- Sync for Science intends to simplify a patient's ability to donate data to worthy causes
- May include Precision Medicine Initiative or other site-specific research studies

<http://syncfor.science>



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