



GTMRx
Institute™

Get the medications right
www.gtmr.org

Interoperability Forecast: Opportunities & Solutions for Comprehensive Medication Management

October 29, 2019 | 1 p.m. Eastern

GTMRx Learning Network Webinar

Agenda

- Welcome and Introductions
- Learning Objectives
- Presenters
 - **Deb Gage**, MBA, President and CEO at Medecision, GTMRx Institute Board Member
 - **Lisa Bari**, MBA, MPH, Consultant, former Health IT and Interoperability Lead at Centers for Medicare and Medicaid Services' (CMS) Innovation Center
 - **Ryan Howells**, M.H.A., PMP, Principal at Leavitt Partners, Lead at the CARIN Alliance
- Question and Answer Session

Learning Objectives

Among the topics we'll cover are:

- The current regulatory landscape;
- How those in the ecosystem have been leveraging technology to support transformation to an integrated, person-centered approach;
- The ability for consumers and their authorized caregivers to gain digital access to their health information; and
- What we should be looking for in the short and long term as it relates to the broader adoption of those data standards, IT and AI systems needed to integrate medical, pharmacy and other critical patient information for team members at the point-of-care.

GTMRx Board Member



Deb Gage, MBA
President and CEO
Medecision

Quick view of GTMRx Institute

A national platform creating a forum for more rapid practice and policy change to save lives and revolutionize the way care is delivered in order to optimize medication use.

Goal: To educate, inform and change the market so research and innovation moves to the practice level, payment models and policy align, and buyers receive value.

Vision: Enhance life by ensuring appropriate and personalized use of medication and gene therapies.

Mission: Bring critical stakeholders together, bound by the urgent need to optimize outcomes and reduce costs by *getting the medications right*.



Focus Areas

- Practice Transformation
- Evidence & Innovation
- Payment & Policy Solutions



A call for action

Medications are involved in **80%** of all treatments & impact every aspect of a patient's life.

Nearly **30%** of adults in the U.S. take **5+** medications.

10,000 prescription medications available on the market today.

Only **13%** of PCPs consult with a pharmacist before new prescriptions.

49 seconds spent between physicians and patients talking about new medication during a **15-minute** office visit.

Ensuring that Americans benefit from appropriate medication use is a critical component of improving the national health care system.

We are working to empower physicians and medication experts as collaborative members of the care team, so together they can ensure that medications are appropriate, safe, effective and precise.

That's how we save lives, save money and, when possible, restore health.

The \$528 billion opportunity

275,000+ lives are lost every year to medication errors

\$528.4B is the cost of non-optimized medication therapy (2016):

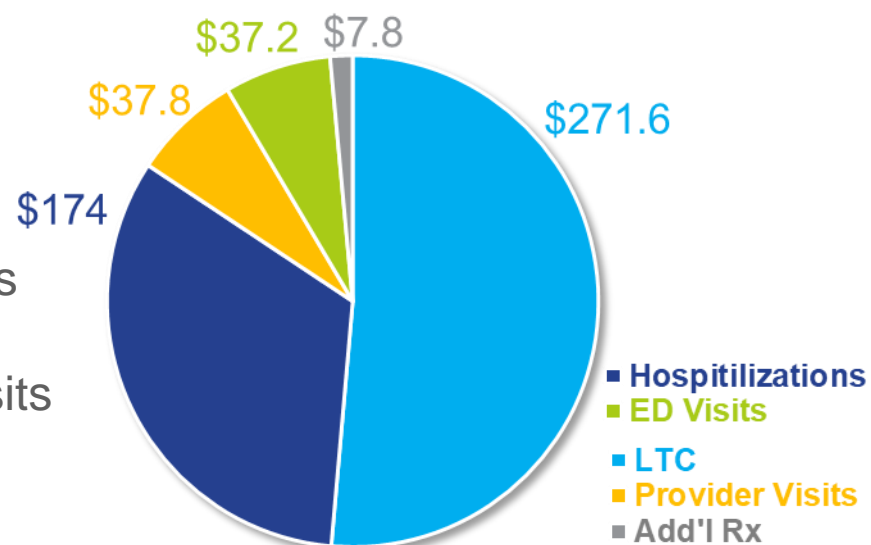
\$174 billion **hospitalization** costs

\$271.6 billion **long-term care** admissions

\$37.2 billion **emergency department** visits

\$37.8 billion additional **provider visits**

\$7.8 billion **additional prescriptions**



Watanabe J, et al. Cost of Prescription Drug-Related Morbidity and Mortality. *Annals of Pharmacotherapy*, March 26, 2018. Accessed 3 April 2018. <http://journals.sagepub.com/eprint/ic2iH2maTdI5zfN5iUay/full>

Founding and funding board members



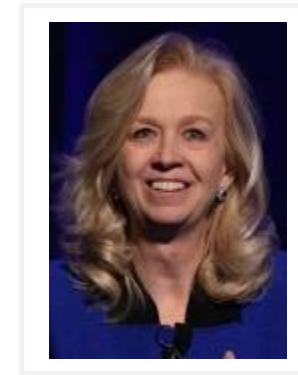
Katherine Capps
Co-founder, Exec
Director



Terry McInnis, MD,
MPH, FACOEM
President & Co-founder



Paul Grundy, MD,
MPH, FACOEM,
FACPM



Brig. Gen. Allison
Hickey (Ret.)



Deborah M. Gage



Ira Klein, MD, MBA,
FACP



Steve Goldberg,
MD, MBA



C. Edwin Webb,
Pharm.D., MPH,
FCCP



Paul W. Abramowitz,
Pharm.D., Sc.D.
(Hon). FASHP



*Health System,
Payor or Foundation*

A dynamic team of health care leaders!

Executive Members

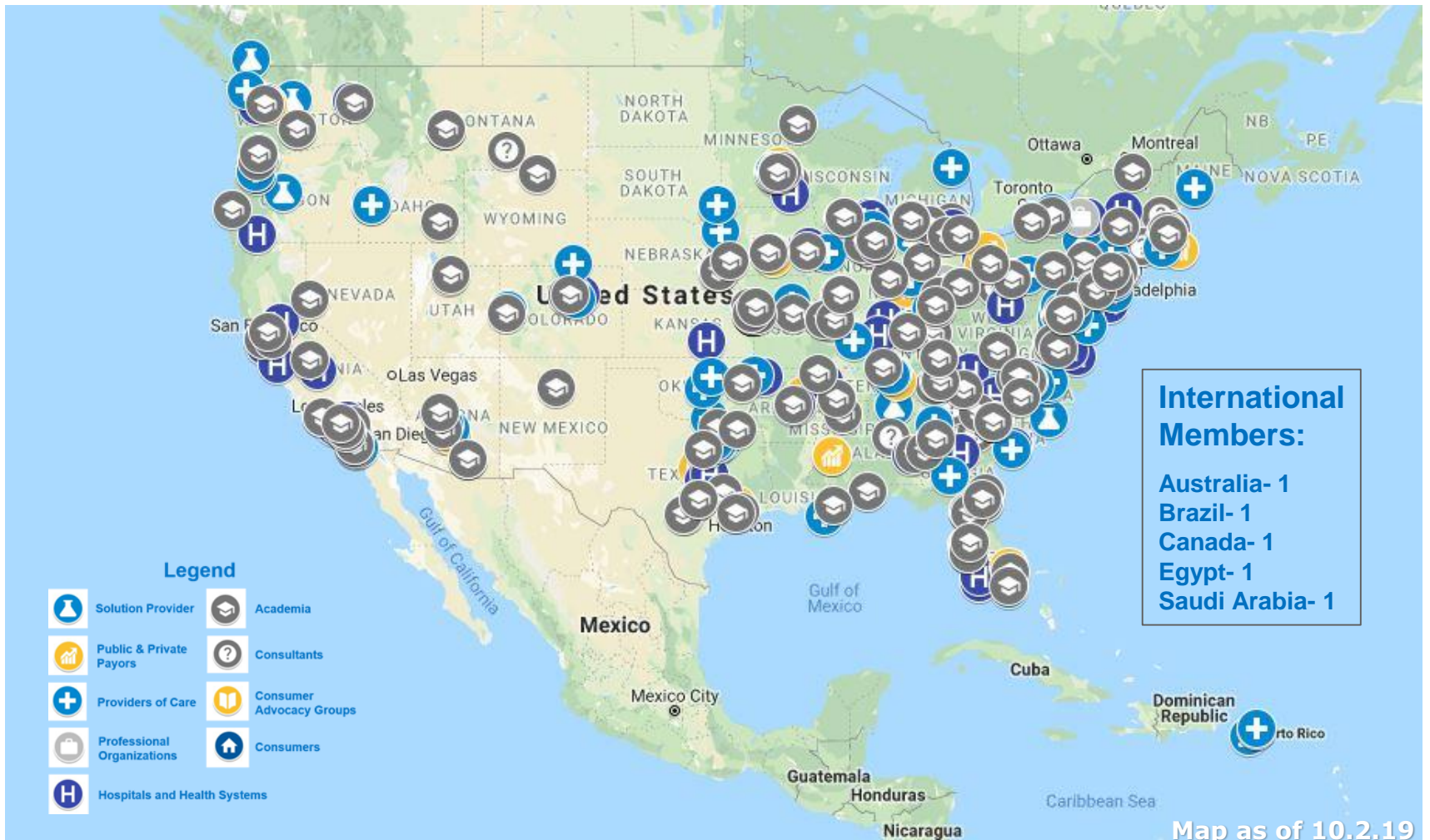


A sample of our 630+ GTMRx Institute member organizations
(inclusion does not constitute an endorsement of any program, product or organization)



Membership Map

representing over 630 members as of 10.29.19



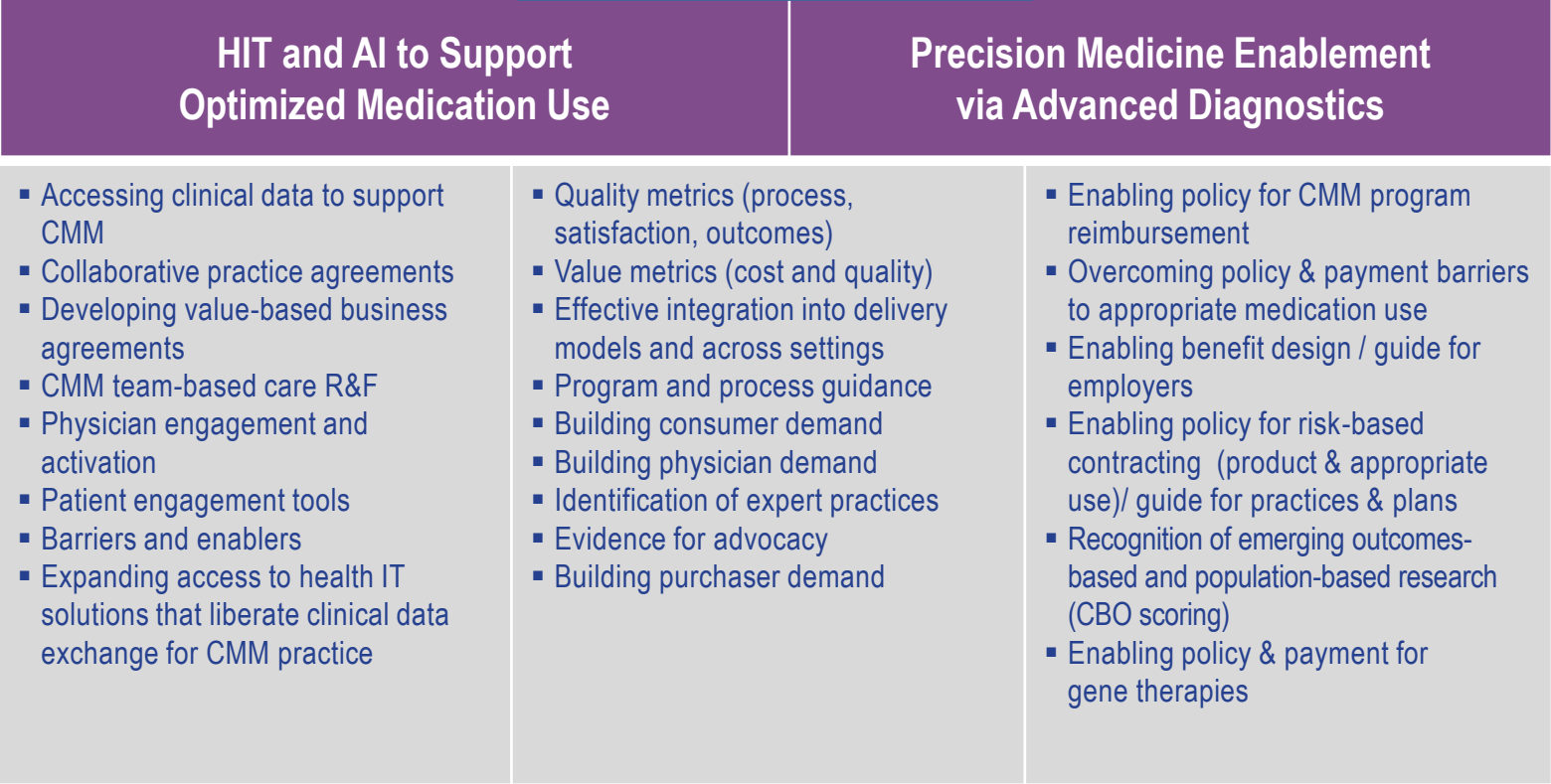
Getting the Job Done: GTMRx Workgroups

VISION: To enhance life by ensuring appropriate and personalized use of medication and gene therapies.
MISSION: We bring critical stakeholders together, bound by the urgent need to optimize outcomes and reduce costs by *getting the medications right*.

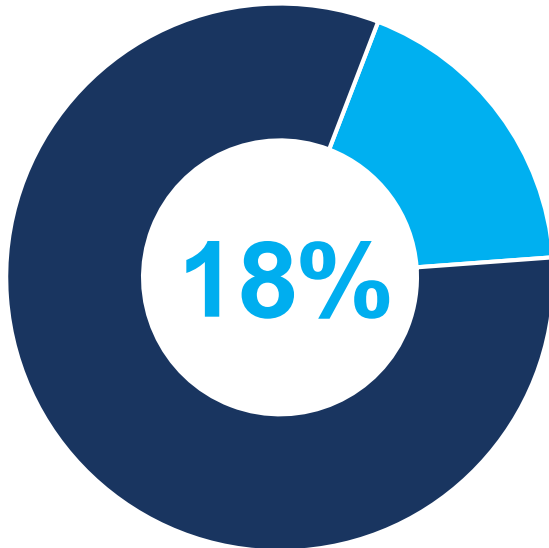
Focus of Workgroups



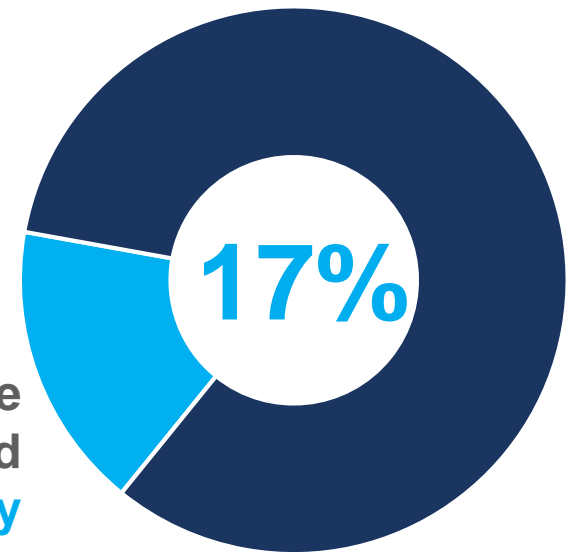
Operational Activities & Outputs from Working Groups



Survey Identifies Knowledge Gap on New Regulations to Increase Efficiency & Transparency



18% of health care executives surveyed are **“very familiar”** with upcoming Federal requirements for organizations handling patient medical records



17% of health care executives surveyed are **“completely unaware”** of the requirements

Accenture survey findings: <https://newsroom.accenture.com/news/federal-requirements-for-sharing-patient-medical-records-pose-major-challenges-and-opportunities-for-healthcare-organizations.htm>

Our Presenters



LISA BARI, MBA, MPH
Consultant, former Health IT and
Interoperability lead at the Centers for
Medicare and Medicaid Services' (CMS)
Innovation Center



RYAN HOWELLS, M.H.A, PMP
Principal at Leavitt Partners;
Lead at the CARIN Alliance

Regulatory Outlook for Interoperability

- Extremely active space in the Trump Administration—multiple Proposed Rules and strong commitment to regulations that **advance interoperability and patient access to data.**
- Comments and feedback from the industry and community have been mixed. **The proposed regulations represent significant changes to business practices.**

CMS Proposed Rulemaking Interoperability and Patient Access

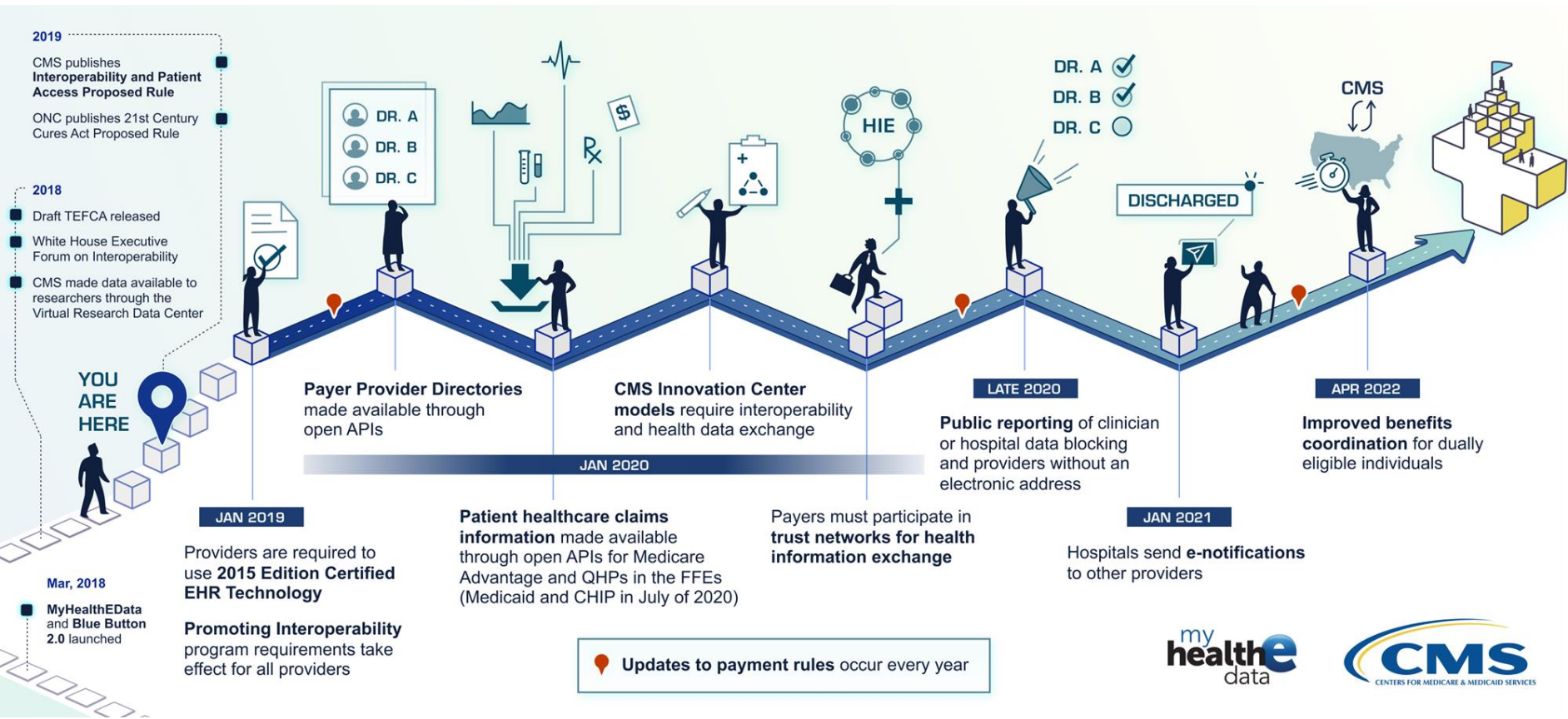


Image pulled from CMS' public informational materials on cms.gov

ONC 21st Century Cures Proposed Rulemaking Interoperability, Information Blocking, and Certified Health IT

- The **21st Century Cures Act of 2015 (21CC)** required the HHS Office of the National Coordinator for Health IT (ONC) to take action on:
 - The definition of **interoperability**.
 - Conditions and maintenance of **health IT certification**.
 - Pediatric health IT certification.
 - Information blocking, including defining exceptions to information blocking as defined in the statute.
 - Information exchange with registries, such as public health, quality reporting, and care quality improvement.
 - **Patient access to electronic health information** (EHI), including adoption of standards such as the EHI export criterion, U.S. Core Data for Interoperability, etc.

ONC 21st Century Cures Proposed Rulemaking Interoperability, Information Blocking, and Certified Health IT

- **Information blocking definition**

A practice by a health care provider, health IT developer, health information exchange, or health information network that, except as required by law or specified by the Secretary as a reasonable and necessary activity, is likely to interfere with, prevent, or materially discourage access, exchange, or use of electronic health information.



- **Elements of information blocking**

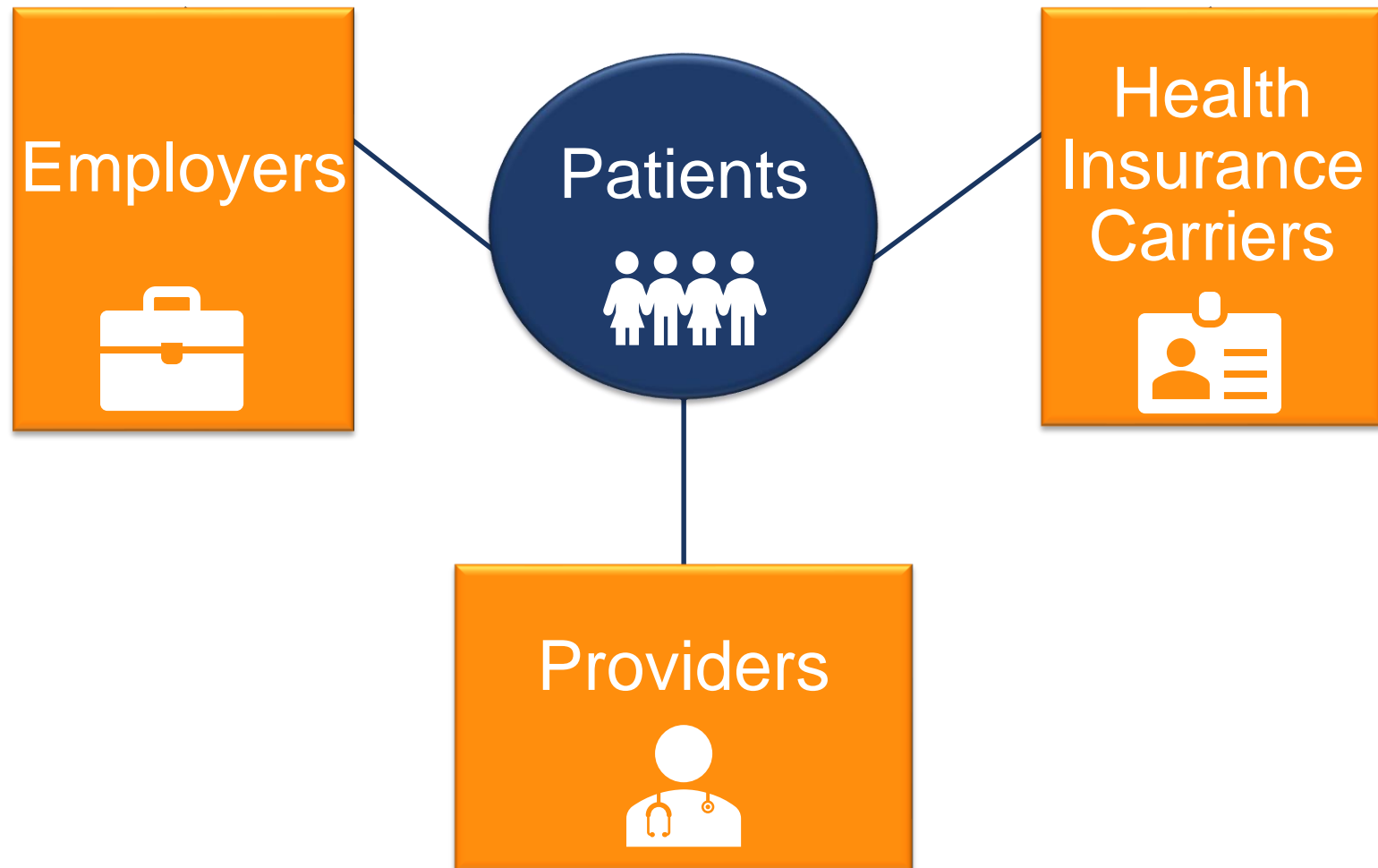
- Actor regulated by the information blocking provision
- Involves electronic health information (EHI)
- Practice is likely to interfere with, prevent, or materially discourage access, exchange, or use of EHI
- Requisite knowledge by the actor
- Not required by law
- Not covered by an exception

Image pulled from the ONC's public informational materials on healthit.gov

Payment Model Activity from the CMS Innovation Center

- Not all relevant work is happening in the regulatory space
 - The CMS Innovation Center designs and runs time-and scope-limited payment and delivery system models to test ideas to improve the quality and reduce the cost of care.
 - *Models may be incorporated as part of original Medicare if successful.*
- The CMS Innovation Center will test advanced interoperability requirements above and beyond the regulatory proposals.
- Primary care models like CPC+, and the forthcoming Primary Care First models emphasize **comprehensive medication management** as part of care delivery requirements designed to improve comprehensiveness and coordination of care.
- More at innovation.cms.gov.

How will stakeholders facilitate data aggregation and sharing?





Our 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.



BlueCross
BlueShield

Humana®

United
Healthcare



Allscripts®



Cerner

UPMC
LIFE CHANGING MEDICINE

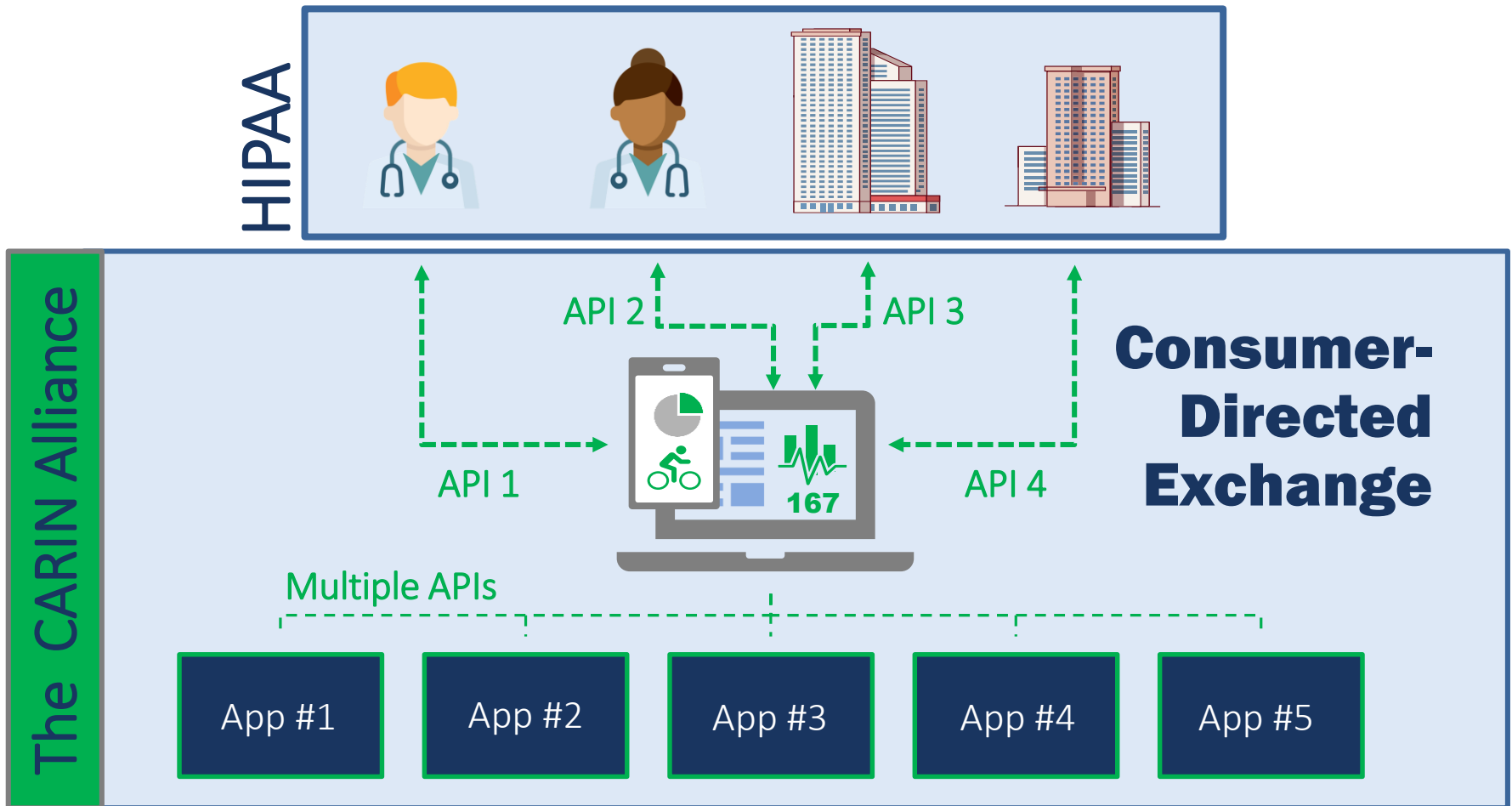
┌ NewYork-Presbyterian

└ The University Hospital of Columbia and Cornell

*Sample list of CARIN members. For a full list of the CARIN board and members go to:
<https://www.carinalliance.com/our-membership/carin-board-participants/>



How will consumers aggregate and share data in the future?



HL7 FHIR Standards Accelerators

WHO

Implementers

Providers, Plans, Apps,
Pharmacies, Regulators, etc.



WHAT

Standards

HL7, HL7 FHIR,
SNOMED, LOINC, etc.

HOW

Implementation Guides



Multi-Stakeholder Initiatives

1. CARIN Blue Button 2.0 API

CARIN Blue Button FHIR API Implementation Guide: <https://build.fhir.org/ig/HL7/carin-bb/toc.html>

HL7 Confluence page: <https://confluence.hl7.org/pages/viewpage.action?pageId=55941223>

HL7 Connectathon track: <https://confluence.hl7.org/display/FHIR/2019-09+CARIN+Blue+Button>

Zulip chat : chat.fhir.org #CARIN Blue Button and #CARIN Real-time Pharmacy Benefit Check IG

2. Trust Framework and Code of Conduct

CARIN Code of Conduct: <https://bit.ly/2LObbw9>

3. Real-time Pharmacy Benefit Check API

At the point of dispensing: Person-centric F&B info, OOP Cost, Therapeutic Alternatives, & Cash Price (GoodRx)

HL7 Confluence page: <https://confluence.hl7.org/display/CAR/RTPBC+Project>

HL7 Connectathon track: <https://confluence.hl7.org/pages/viewpage.action?pageId=58654805>

1. Post-Acute Care API (managed by MITRE)

Cognitive and Functional status for post acute care patients. CMS' Data Element Library

<http://pacioproject.org/>

5. Digital Identity and Consent

ID proofing and Authentication *across* providers and health plans, Trust & Federation, Consent, & Matching

Question and Answer Session



DEB GAGE, MBA

President and CEO, Medecision;
Board Member, GTMRx Institute



LISA BARI, MBA, MPH

Consultant; former Health IT and Interoperability lead, The Centers for Medicare and Medicaid Services' (CMS) Innovation Center



RYAN HOWELLS, M.H.A, PMP

Principal at Leavitt Partners;
Lead, the CARIN Alliance

Thank you!

- Follow and like us! [@gtmrxinstitute](https://www.instagram.com/gtmrxinstitute)

