Optum® Interoperability and Patient Access Services

A complete solution to help your state meet compliance

The CMS Interoperability and Patient Access final rule (CMS-9115-F) rule establishes Health Level 7® (HL7) Fast Healthcare Interoperability Resources® (FHIR) Release 4.0.1 as the standard for data exchange through open APIs, enabling secure HIPAA-compliant partner applications to provide patients secure and immediate access to their health records. By providing patients secure access to their own data, the final rule is forcing payer and provider systems to align in support of care delivery and eliminating the silos of data that have bogged down the health care system for far too long.

Expertise you can trust

Meeting compliance with the final rule by the enforcement date of July 1, 2021, is critical for CMS-regulated plans, Medicare Advantage (MA), Medicaid, CHIP and Qualified Health Plans on "federally facilitated exchanges." Optum can help. We have been a leader in promoting standards-based exchange of data across health care.

- Our leadership in industry collaboratives, including the CARIN Alliance, the Argonaut and DaVinci Projects among others, has expanded our knowledge and understanding of your needs for better overall satisfaction with services.

- Our experience with analytics and data management in state programs includes supporting 36 Medicaid programs and providing analytics solutions that touch over half of the approximately 73 million people on Medicaid.*

Is your state ready?

Key questions Medicaid technology leaders are asking:

- Do we have the capability to exchange data using FHIR-based resources?

- Are all data required for compliance readily accessible?

- How will we deploy and maintain the FHIR-based APIs?

- Can our infrastructure support and respond to requests for required data in real time?

- How will efforts to comply impact other planned IT investments?

- Our support of large national Medicare Advantage and Medicaid payers to evaluate and architect compliance solutions is allowing these health plans to meet the requirements of the Interoperability and Patient Access final rule. Optum is providing the Interoperability solution for UnitedHealthcare, the largest commercial health care payer.

> **We have more than 10 years of experience in building and supporting a commercial Health Information Exchange:**

- Integrating clinical and claims data from over 650 different sources for vital business functions, including population health analytics, care management, risk and quality management, and improving HEDIS and STARS scores.

- We operate at scale to combine over 10 million clinical transactions per week from providers (EMR sources) along with data from our national claims clearinghouse.

- Optum implemented and operates the following two major FHIR API programs that have been in production for more than two years:

  - Point-of-Care Assist: A set of FHIR APIs designed for integrating with EHR systems to interact with providers in their workflow for eligibility, gaps in care, prior authorization lookup, prior authorization case submission, referrals, cost transparency and Rx real-time benefit check.

  - Provider Directory Services: A service for exposing our provider networks in FHIR format implemented in advance of the CMS/ONC mandates. It will be reused to meet the new requirements.

Compliance with flexibility and scale:
Optum Interoperability and Patient Access Services

Optum Interoperability and Patient Access Services will help Medicaid agencies meet compliance for all components of the Interoperability and Patient Access final rule, including:

Giving Medicaid members secure electronic access to health data and medical claims via secure, FHIR standards-based APIs

Making provider directories available externally

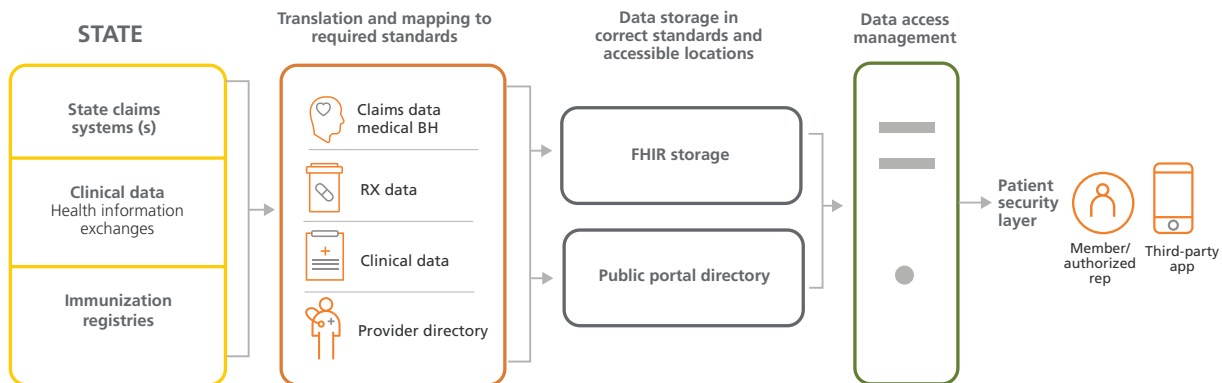Securely exchanging patient clinical data at a patient's request between payers

Our approach allows for flexible implementation based on your state environment and needs. We can provide the whole solution or augment where there is a gap. We can also scale the solution for the largest Medicaid infrastructures. Our cloud-based architecture is containerized and compliant with all federal and state requirements. We can provide one or all components needed, including:

1. **API translation and mapping services**: Since state systems may not store data in the correct standards, we can help translate and map data to FHIR standards.

2. **Storage in an accessible location:** Data can be stored in an Optum Patient Data solution, which is accessible via the approved and secure APIs.

3. **Access management:** This is critical component for security and includes identity access control, the ability to delegate to who can see your data, as well as the ability to know how to transfer the data between entities.

Seamless data flow enables compliance through Medicaid systems to the patient's preferred third-party application.

Interface systems to Optum Interoperability and Patient Access Services

Meet compliance and unlock the value of interoperability

Once implemented, our solutions can help to improve the value of modularity while accelerating additional value when your agency is ready.

Unlocking value	**Quality and reliability**	**Driven by your needs and goals**
Data are key assets to an enterprise. A canonical data set combining claims/encounters, clinical and formulary data creates analytic opportunities to improve the insights about operations and Medicaid populations. This is an Optum strength.	Our accelerators and experience with data integration, quality assurance, and health plan and Medicaid operations enable the delivery of high-quality and reliable solutions.	Our approach is driven by your needs. We assess your agency's goals and technical requirements to deliver a solution that is right for you.

Why Optum

- **Focus on value and partnership.** Ability to leverage the power of Optum as a trusted partner with a proven track record of success in delivering results. Optum provides the core expertise required to assess, build and implement operations and the technology required for interoperability compliance.

- **Focus on the long term.** We bring a comprehensive approach, beyond technology, to deliver long-term value versus short-term wins.

- **Focus on health care system and CMS interoperability.** We work with all health care system stakeholders and understand how the data should flow across all systems. We have proven experience at the national Medicaid, Medicaid Advantage and commercial payer level for CMS interoperability readiness.

- **Focus on data and technical experience.** We provide accelerators to drive significant delivery of health information exchange, API and FHIR technology application.

- **Focus on knowledge.** We have deep health care payer knowledge, tools and accelerators to facilitate mapping and implementation, CMS rules expertise, core competencies for systems integration and program transformation.

- **Focus on holistic results.** We are not a technology-only option, but a comprehensive, end-to-end partner to help you drive scale, change, adoption and use.

Collaboration **Quality** **Results**

Learn how Optum can help evaluate and partner with you on implementing compliance solutions aligned to your specific market position and strategic and financial goals.

Contact us at optum.com/stategovcontact

Sources:
*Kaiser State Health Facts, Total Monthly Medicaid and CHIP Enrollment, May 2020

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