

Allymar Health Solutions FHIR APIs.

A Comprehensive Guide for Application Developers to access to the Patient Access and Provider Directory APIs.

Background

CMS Interoperability and Patient Access Final Rule

CMS Interoperability and Patient Access final rule (CMS-9115-F) advocates “putting patient first” by enabling member’s access and use their health information to make better healthcare decisions. The rule follows the principle of liberating patient data by using CMS authority regulate Medicare Advantage (MA), Medicaid, Children’s Health Insurance Program (CHIP), and Qualified Health Plan (QHP) issuers on the Federally facilitated Exchanges (FEEs) and drive interoperability and patient access to health information.

*QHP Issuers on the FEEs are not required to implement the Provider Directory API under this rule.

Use of FHIR Standard-based APIs

The rule requires MA organizations, Medicaid and CHIP FFS programs, Medicaid managed care plans, CHIP managed care entities, and QHP issuers on the FEEs to implement and maintain standards-based APIs – Patient Access API and Provider Directory API using the technical standard Health Level 7® (HL7) Fast Healthcare Interoperability Resources® (FHIR) Release 4.0.1 and content and vocabulary standards finalized by HHS i.e., US Core Data for Interoperability (USCDI Version 1).

The final rule encourages payers to adopt Application Programming Interfaces (APIs) to improve the electronic exchange of health care data – sharing information with patients or exchanging information between a payer and provider or between two payers. APIs can connect to mobile apps or to a provider electronic health record (EHR) or practice management system to enable a more seamless method of exchanging information. The final rule aims to reduce administrative burden and to solve the issue of interoperability by getting patients access to information about their health care and take an active approach to move participants in the health care market toward interoperability and the secure and timely exchange of health information.

Provider Directory APIs

The hosted Provider Directory APIs conform to the DaVinci PDEX Plan Net v1.1.0 specification. For details please see: <https://hl7.org/fhir/us/davinci-pdex-plan-net/> The FHIR Base URL to reach the APIs is:

<https://api.allymarhealthsolutions.com/aha/t1/pd>

As per CMS requirements, the Provider Directory APIs are open and require no authentication to access.

Patient Access APIs

The hosted Provider Directory APIs conform to the CARIN Consumer Directed Payer Data Exchange (CARIN IG for Blue Button®) v2.0.0 specification and US Core v3.1.1 specification. For details, please see: <https://hl7.org/fhir/us/davinci-pdex-plan-net/> and <https://hl7.org/fhir/us/core/STU3.1.1/StructureDefinition-us-core-patient.html> .

The FHIR Base URL to reach the APIs is:

<https://api.allymarhealthsolutions.com/aha/t1/pa>

The Patient Access APIs can only be accessed with registered client applications and users who have an online account and credentials.

Authentication protocols are compliant with the SMART App Launch Framework v.1.0.0 Standalone Launch flow: <https://hl7.org/fhir/smart-app-launch/1.0.0/>

How to Connect

Application Developers who wish to integrate their applications with the Patient Access APIs must first request access by emailing an access request to: CPF.ServiceDesk@accenture.com

Please fill out the questionnaire in the next section and include it in-line in the request email.

Token and Authorization endpoints, along with other details can be found at:

<https://api.allymarhealthsolutions.com/aha/t1/pa/.well-known/smart-configuration>

Access Request Questionnaire

Access Request Questionnaire

1. Organization name
2. Contact person(s)
3. Contact email Address
4. Contact phone number
5. Application name
6. Application description
7. Application OAuth callback URL(s)
8. Link to application details (webpage or appstore, e.g.):
9. Does the application store sensitive patient/member information (PHI, PII, demographic data, claim details, clinical information, etc.) on servers or databases external to your application?

Authentication Quick Start

Grant types supported: Authorization Code or Authorization Code with PKCE

Auth URL: <https://api.allymarhealthsolutions.com/aha/kc/realms/atr1/protocol/openidconnect/auth>

Access Token URL:

<https://api.allymarhealthsolutions.com/aha/kc/realms/atr1/protocol/openidconnect/token>

Client authentication information should be sent as a Basic Auth Header.

Code Challenge Method: SHA-256

Per the SMART on FHIR specification, and “aud” parameter must be included in the auth requires which contains the FHIR base URL: <https://api.allymarhealthsolutions.com/aha/t1/pa>

Scopes: All auth requests should at minimum include a *launch/patient* scope, as well as the additional SMART patient scopes required. For example, the following is the minimal scope request necessary to access all of a member’s hosted data:

launch/patient patient/.read*

Finer grained resource scopes are also supported.

All supported scopes:

- patient/*.read
- patient/AllergyIntolerance.read
- patient/CarePlan.read
- patient/CareTeam.read
- patient/Condition.read
- patient/Coverage.read patient/Device.read
- patient/DiagnosticReport.read
- patient/DocumentReference.read
- patient/Encounter.read
- patient/ExplanationOfBenefit.read
- patient/Goal.read patient/Immunization.read
- patient/Location.read
- patient/Medication.read
- patient/MedicationDispense.read
- patient/MedicationRequest.read
- patient/Observation.read
- patient/Organization.read patient/Patient.read
- patient/Practitioner.read
- patient/PractitionerRole.read
- patient/Procedure.read
- patient/Provenance.read
- patient/RelatedPerson.read

