## Health IT Joint Committee Collaboration





### **AGENDA**

# Joint Health IT Policy and Standards Committee Meeting API Task Force Virtual Hearing

January 28, 2016, 11:00 am - 4:00 pm ET

11:00 a.m. Call to Order/Roll Call

Michelle Consolazio, Office of the National Coordinator

11:05 a.m. Review of Agenda and Opening Remarks

Josh Mandel, co-chair

Meg Marshall, co-chair

11:10 a.m. Panel 3: Healthcare Delivery

Stanley Huff, Intermountain

Paul Matthews, CHCCN-OCHIN

Sean Kelly, Imprivata

Tim McKay, Kaiser Permanente

Brian Lucas, Aetna

1:00 p.m. Panel 4: Health IT Vendors

John Moehrke, GE Healthcare

Ted LeSueur, McKesson

Chris Bradley, Mana Health

James Lloyd, Redox Engine

2:30 p.m. Panel 5: Consumer Advocates

Adrian Gropper, PPR

Mark Savage, National Partnership for Women and Families

Steven Keating, Patient Advocate/Consumer

3:40 p.m. Closing Remarks

Josh Mandel, co-chair

Meg Marshall, co-chair

3:50 p.m. Public Comment

4:00 p.m. Adjourn

#### **Panelist Questions**

#### **Questions for Panel 3: Healthcare Delivery**

- **1.** Does your organization use APIs for apps which are available internally or to third parties? If so:
  - **a.** Do you publish your documentation online or make it available to third party developers?
    - i. How do you determine who can get access to your API?
    - **ii.** Do they need to be "certified" for privacy or security standards by your organization to use?
  - **b.** Are there terms of use that include specific language for privacy and security?
- 2. Are there production deployments of these APIs/third party applications using APIs?
- **3.** Are there any well-known threats or vulnerabilities associated with APIs themselves that should be addressed (e.g. security engineering considerations/best practices)?
  - **a.** As APIs are gaining adoption, are there steps organizations need to take to mitigate any additional threat vectors to data? Are these just specific to APIs in general? What might be unique/specific to healthcare?
  - **b.** How does the issuer of the API ensure that the API won't become a tool used for malicious activity which could compromise the data source?
- **4.** How are APIs distributed in a way that the recipient/end-user of the API can trust the API is authentic?
- **5.** How to improve consumer experience with the third party apps using the APIs:
  - **a.** User stories/use cases
- **6.** Is there a catalogue or store of tools that are built for the APIs for third parties to access?

#### **Questions for Panel 4: Health IT Vendors**

- **1.** Does your organization use APIs for apps that are available internally or to third parties? If so:
  - **a.** Are they clinician facing, or consumer facing (or both)?
  - **b.** Do you publish your documentation online or make it available to third party developers?
    - i. How do you determine who can get access to it?
    - ii. Do they need to be "certified" by your organization to use?
  - c. Are there terms of use that include specific language for privacy and security?
- 2. Are there production deployments of these APIs/third party applications using APIs?
- 3. What are the perceived and actual privacy concerns or barriers to the adoption of APIs?
- **4.** What are the perceived and actual security risks or barriers to the adoption of APIs?
- **5.** Are there third party certifying authorities in non-healthcare industry that we can leverage?

#### **Questions for Panel 5: Consumer Advocates**

- 1. What are your concerns around privacy and security using APIs?
- **2.** How would you suggest the industry address these concerns?
- **3.** Are the topics that need to be clarified in the existing guidance or regulations?

- **4.** Are there production deployments of these APIs/third party applications using APIs?
- **5.** What are the privacy and security concerns from the provider community as to the use of APIs?