



Health IT Policy and Standards Committee Collaboration

Application Programming Interface (API) Task Force Report of the April 21, 2016, Virtual Meeting

Name of ONC Staff Liaison Present: Rose-Marie Nsahlai

Purpose of Meeting: Formulate recommendations

Meeting Outcome

Task Force Co-chairperson Josh Mandel reported that the presentation of the task force's approach to the HIT Joint Committee on April 19 was well received. Task Force Co-chairperson Meg Marshall reported on questions asked and comments received at the meeting. She indicated that she will address several, such as scope, read-only access, and explanation of oversight responsibilities, by editing the 26-page report. She listed other comment topics:

- BAAs for all apps
- Identity proofing and consistency of standards
- OCR guidance and technical feasibility
- Bad actors
- Consumer education on liability
- Level of proof for information blocking
- Enforcement and punishment for violations
- Use of servers
- Privacy literacy
- Going out of business
- Extent to which consumers know how to use portals
- ONC leverage of coordinative powers
- Another task force to take up remaining issues later

Marshall suggested that members listen to the recording of the meeting.

Mandel went on to report that after the HIT Joint Committee meeting, he talked with several members who made additional suggestions, such as that different architectures could be used. For example, the VA built an app on top of its portal. According to Mandel, this is simply an implementation detail. Kelly Hall said such as app could not be exclusive because a patient still has the right to choose. Another out-of-meeting topic dealt with endorsements and the suggestion that the task force report describe what providers could do to help patients understand some of the dangers involved in the use of apps.

Responding to a member's question about disclosure of provider conflicts, Mandel said that possible conflict of interest with an app would be no different from other provider recommendations. Someone suggested a footnote to expand on the topic. Kelly Hall said that using a portal is a good opportunity to educate patients about apps, especially the consumer beware warning.

Mandel proposed a process for completing the report. He said that it is very difficult to get everything on presentation slides. Therefore, he advocated for a final narrative report, which would be sent to members in advance with sufficient time for their review. Michelle Consolazio, ONC, interjected that the final deliverable is in the form of a letter; therefore, a narrative report works very well. A few slides may be needed too. The HIT Joint Committees will meet May 17. Task force members voiced enthusiasm for the proposal, and they also agreed to make the report available for public comment in advance of May 17. The co-chairs will finalize the report, make it available to the task force April 24, and discuss it on April 26.

Kelly Hall indicated concern for any forthcoming recommendation on BAAs for app developers. Marshall responded that she intended to recommend that ONC advocate for something similar to BAAs. But the issue is complicated, and to require BAAs would require congressional action. Aaron Seib cautioned against oversimplifying oversight. Oversight is complex for a reason. Protection is needed. Marshall said that she will be subtle. Seib suggested including some content for providers to use in warning patients similar to what is done by HIV service providers.

Net Steps: The task force will meet April 26.

Public Comment: None

Attendance

Name	04/21/16	04/12/16	03/28/16	03/22/16	03/08/16	02/22/16	02/09/16
Aaron Seib	X	X		X	X	X	X
Drew Schiller		X	X	X	X		
Josh C. Mandel	X	X	X	X	X	X	X
Linda Sanches	X	X			X	X	X
Rajiv B. Kumar							X
Robert Jarrin		X	X				

