

Consent: Challenges, Opportunities, and Future Direction

ONC Annual Meeting 2020

Monday, January 27, 2020

Rose-Marie Nsahlai, ONC (OS/OTECH)
Johnathan Coleman, Security Risk Solutions Inc.
Jay Nakashima, eHealth Exchange
Doug Burke, Cognitive Medicine
Daniel Chavez, San Diego Health Connect
John Moehrke, ByLight Professional IT Services







Consent: Challenges, Opportunities, and Future Direction - Speakers

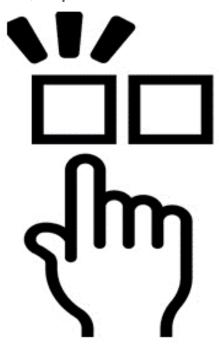
- Panel Kick-Off: Rose-Marie Nsahlai, Office of the National Coordinator for Health Information Technology, Office of Technology, Security and Services Branch
- Panel Moderator: Johnathan Coleman, Security Risk Solutions, Inc.
- Panelists:
- Jay Nakashima, eHealth Exchange
- Daniel Chavez, San Diego Regional Health Information Exchange/San Diego Health Connect
- Doug Burke, Cognitive Medicine
- John Moehrke, ByLight Professional IT Services





Considerations for electronic consent in different settings

Opt-in, Opt-out



Regulatory Considerations, e.g. 42 CFR Part 2



Other Considerations, e.g. Granular Choice









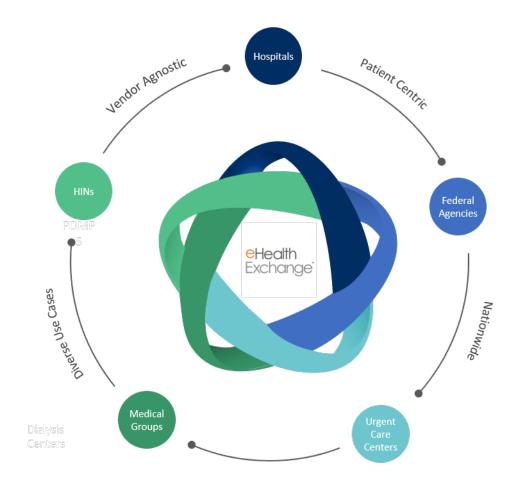
eHealth Exchange Jay Nakashima



THE THE SERVICES. IN.

eHealth Exchange

- Facilitates electronic exchange of patients' medical information
- Improves the speed, quality, safety, and cost of patient care
- Informs clinical decisions when seconds and minutes matter







eHealth Exchange

We Connect						
	All 50 States	70,000 Medical Groups				
	Three Federal Agencies (DoD, VA, SSA)	7,800 Dialysis Centers				
*	75% of U.S. Hospitals	8,300 Pharmacies				

federal agencies & the private sector in all 50 states

61 Regional and State HINs

Supporting more than 120 million patients



February 2020 connectivity with **carequality**-enabled HINs





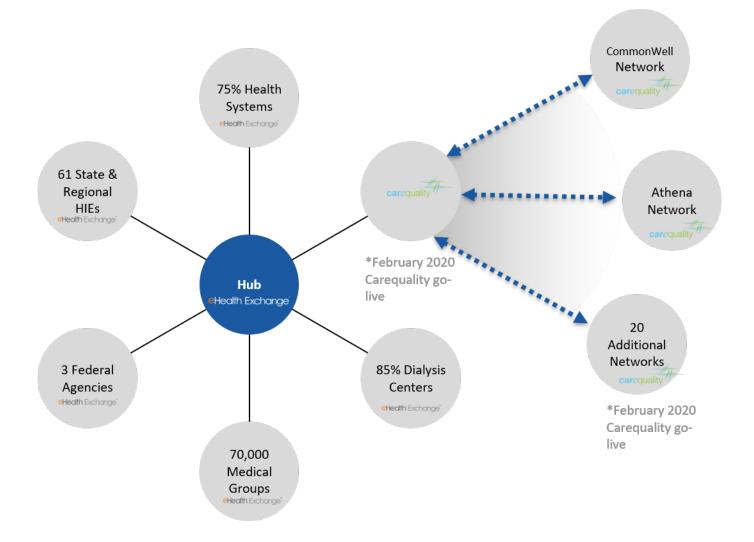
eHealth Exchange

Who Manages Consent?

Each eHealth Exchange Participant is responsible for adhering to applicable law, eHealth Exchange policies, etc before disclosing PHI

Complexities:

- Opt-in States
- Opt-in Providers in Opt-Out States
- Sensitive Conditions
- Consents vs Authorizations





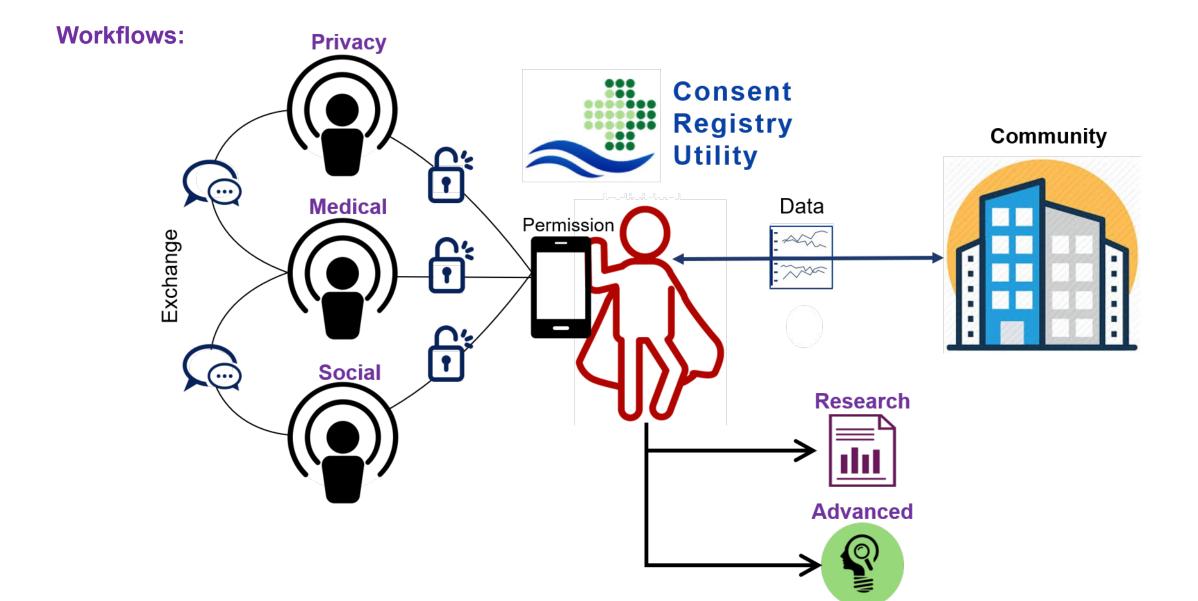
ONC LEAP Consent Registry Utility

Dan Chavez, Doug Burke



Today, *facilities*, not humans, determine what information is shared with whom, when and under what conditions.

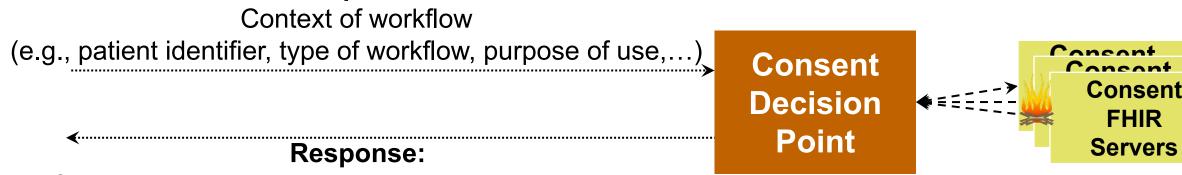




Consent Decision Point

A microservice providing an interface for inquiring about patient consent (backed by FHIR-based consent repositories)

Request:

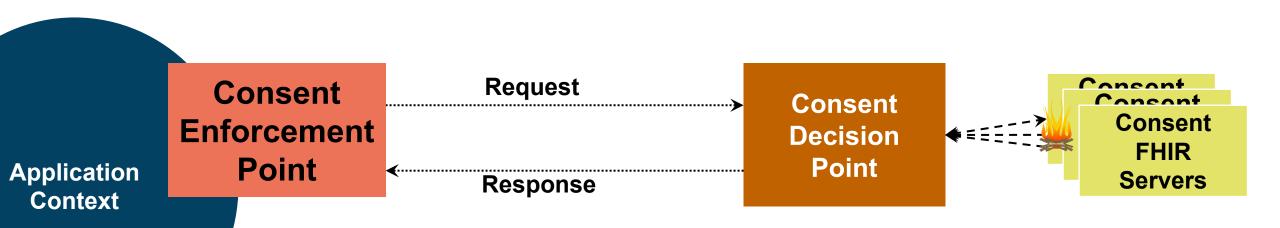


Consent Decision, obligations and caveats, decision rationale rence to the consent resource)

Consent Enforcement Point

Individual modules integrating with different application contexts to enforce consent decisions

- Capture and report the context of the workflow in the form of a query
- Receive and process the response
- Apply and enforce the decision in the workflow





HL7 FHIR Consent

John Moehrke



HL7 FHIR Consent

- Consent Resource useful for many consent types
- Positive and Negative not just consent but dissent
- Not just classic consent also Authorizations
- Depends on Local Policy meaning and enforcement
- Just captures and records facts
- Absence of a Consent means?
- Questionnaire may be used in workflow to obtain Consent
- Includes a RULE encoding customized to FHIR





Consent Maturity

- 1. Consent resource just points at scanned paper
- 2. Consent resource just points at QuestionnaireResponse
- 3. Consent encodes .provisions
- 4. Consent w/ depth .provisions (PERMIT vs DENY)
- 5. Consent using external rules encoding (XACML)

Vectors:

- Timeframe of validity
- Organization consent applies to
- · Regulation consent applies to
- Local Policy agreed to







FHIR Consent

- Type permit/deny
- Context affected
- Actors affected
- Data selection
- Obligations

I				
- provision	Σ	01	BackboneElement	Constraints to the base Consent.policyRule
L type	Σ	01	code	deny permit ConsentProvisionType (Required)
(i) period	Σ	01	Period	Timeframe for this rule
🛅 actor		0*	BackboneElement	Who what controlled by this rule (or group, by role)
🕠 role		11	CodeableConcept	How the actor is involved SecurityRoleType (Extensible)
- d reference		11	Reference(Device Group CareTeam Organization Patient Practitioner RelatedPerson PractitionerRole)	Resource for the actor (or group, by role)
🕠 action	Σ	0*	CodeableConcept	Actions controlled by this rule Consent Action Codes (Example)
🏐 securityLabel	Σ	0*	Coding	Security Labels that define affected resources SecurityLabels (Extensible)
() purpose	Σ	0*	Coding	Context of activities covered by this rule V3 Value SetPurposeOfUse (Extensible)
🕦 class	Σ	0*	Coding	e.g. Resource Type, Profile, CDA, etc. Consent Content Class (Extensible)
🕠 code	Σ	0*	CodeableConcept	e.g. LOINC or SNOMED CT code, etc. in the content Consent Content Codes (Example)
🕦 dataPeriod	Σ	01	Period	Timeframe for data controlled by this rule
📴 data	Σ	0*	BackboneElement	Data controlled by this rule
meaning	Σ	11	code	instance related dependents authoredby ConsentDataMeaning (Required)
- 🗗 reference	Σ	11	Reference(Any)	The actual data reference
🛜 provision		0*	see provision	Nested Exception Rules







Audience Q&A



The Office of the National Coordinator for Health Information Technology

Contact ONC

Rose-Marie Nsahlai: rose-marie.nsahlai@hhs.gov Tracy H. Okubo: tracy.okubo@hhs.gov



- Health IT Feedback Form:
 https://www.healthit.gov/form/
 healthit-feedback-form
- **Twitter:** @onc_healthIT
- in LinkedIn: Search "Office of the National Coordinator for Health Information Technology"





Subscribe to our weekly eblast at healthit.gov for the latest updates!