



Jumpstarting a FHIR Community in Israel

Roy Cohen, Israeli Ministry of Health



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Who am I?

- Roy Cohen
- Director, Research and De-Identification, Israeli Ministry of Health

Israel's Healthcare Ecosystem

- 4 HMOs, “insurer-providers”
 - Mandatory coverage
 - Government pays HMOs basic insurance, compensating for age and location
 - HMOs cover all residents, mandated by law
 - Clalit – approx. 55% of residents
 - Maccabee – approx 23% of residents
 - Meuhedet – approx 14% of residents
 - Leumit – approx 8% of residents

Israel's Healthcare Ecosystem

- 4 HMOs, “insurer-providers”
 - Longitudinal data (digitized since 1990s, in some cases 1980s)
 - Spans all GP visits, many expert visits
 - Two largest HMOs use the same EHR vendor

Israel's Healthcare Ecosystem

- 30 General Hospitals
 - 11 government-owned
 - 8 Clalit-owned
 - 2 Maccabi-owned
 - 1 Meuhedet-owned
 - 8 private

Israel's Healthcare Ecosystem

- 30 Hospitals
 - A plurality of hospitals uses the same EHR vendor, Chamilion
 - Hospitals are somewhat centralized, approachable for innovators
 - Big hospitals (more than 500 beds) have innovation centers, often with academic collaboration

Israel's Healthcare Ecosystem

- Startups
 - More than 500 startups specializing in healthcare innovation
 - Collaborations on research and product innovation with hospitals and HMOs
 - Innovation network organized by several NGOs, e.g. 8400, HealthIL
 - Massive interest in foreign markets, emphasis on US

FHIR Adaptation: the process

- Adaptation status on day 1:
 - One HMO worked on partial FHIR adaptation for internal reasons

FHIR Adaptation: the process

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 - One HMO worked on partial FHIR adaptation for internal reasons
- Why?
 - Unclear messaging on standards from government
 - Difficulties telling apart FHIR from other HL7 standards
 - Incentive problem: high HMO loyalty among insured individuals
 - People in the room problem: IT, innovation/BD, strategy, management.

FHIR Adaptation: the process

- First steps
 - Established a team of four: 2 from Regulation and Strategy, 2 from Computation and Innovation
 - Talked to equivalent teams in Germany, USA, UK and consultants

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 - Face-to-Face meetings with healthcare organizations, startups, EHR vendors, Big Tech
 - Gauged progress and interest
 - Listened to sought-after incentives, goals in adapting to FHIR
 - Looked for relevant use cases
 - Located expertise in the market

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 - Looked for relevant use cases
 - Located expertise in the market
 - Became a team of five

FHIR Adaptation: the process

- First challenges
 - Comparables are tricky
 - Israel had an advanced digitization project

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FHIR Adaptation: the process

- First challenges
 - Comparables are tricky
 - Israel had an advanced digitization project
 - Best known adapter, USA, incorporated FHIR incentives in legislation
 - Eventually, message from UK: a dedicated team is the best catalyst.

FHIR Adaptation: the process

- First challenges
 - Creating buzz
 - Smaller healthcare organizations: can't be the first ones to initiate
 - Bigger healthcare organizations: won't initiate without funding
 - Government has to justify funding with a real need, especially in healthcare

FHIR Adaptation: the process

- First solutions
 - External advisors
 - Firely, 1upHealth – how to approach national adaptation? What are the timelines? What kind of talent is needed?

FHIR Adaptation: the process

- First solutions
 - External advisors
 - Core team
 - Expanded the core team to include a project manager internally
 - Strategic partnership with nonprofit **8400**
 - Grassroots legitimacy
 - Flexibility



FHIR Adaptation: the process

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 - Flexibility
 - Weekly meetings:
 - Funding
 - Case studies
 - Recruiting



FHIR Adaptation: the process

- First solutions
 - MoH's Technical FHIR Team
 - Ministry-hired architect, project manager and data engineer/technical writer
 - Advise all the teams dealing with FHIR implementation in Israel
 - Write FHIR documentation (e.g. Profiles) for the Israeli community

FHIR Adaptation: the process

- First solutions
 - MoH's Technical FHIR Team
 - International advisors
 - Workshops: business, implementation, development
 - Bespoke organization consulting

FHIR Adaptation: the process

- First solutions
 - MoH's Technical FHIR Team
 - International advisors
 - RFP
 - Allocate \$70K USD to each project, enough for a part-time 2 person team
 - Goals
 - Encourage healthcare orgs to bring up their pain points
 - Reflect the value immediately
 - Low-risk funding, is it enough?

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 - FHIR Steering Committee

FHIR Adaptation: the process

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 - International advisors
 - RFP
 - FHIR Steering Committee
 - Israeli FHIR – community building
 - Digital platforms
 - Chat.fhir
 - Confluence
 - Website

FHIR Adaptation: the process

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 - FHIR Steering Committee
 - Israeli FHIR – community building
 - Digital platforms
 - Workshops and meetings
 - Tech and business side workshops
 - Use case workshops
 - Ongoing face-to-face meetings with aspring FHIR leaders
 - New recruit: community manager

FHIR Adaptation: the process

- Regulation
 - Value, timing, risks.
 - Who is being regulated?
 - Healthcare organizations
 - Traditional EHR vendors
 - Other third party companies, incl. Startups

FHIR Adaptation: the opportunities in Israel

- External players who are FHIR savvy, interested in a dynamic ecosystem
- Developers, architects, data engineers with experience in FHIR adaptation

Contact

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Thank you! Q&A

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