

Meeting Recap

Q1 CARIN Community Meeting

January 21, 2026

Objectives

The CARIN community, made up of the CARIN Board, Affiliate Members, and Special Guests, met virtually to discuss federal government priorities, opportunities to work with the Administration through the HTI-5 Proposed Rule and Artificial Intelligence (AI) RFI, recent advancements in consumer-facing applications and AI integration, the status of CARIN early adopter efforts across workgroups, and opportunities to engage in those efforts to advance CARIN priorities in consumer and patient access to health information.

Key Discussion

Antitrust Reminder, Administrative Items, Agenda – Dave Lee, Leavitt Partners

ASTP/ONC Updates & Questions – Steve Posnak, ASTP/ONC (moderated by Ryan Howells, Leavitt Partners and Aneesh Chopra, Arcadia)

- Ryan and Aneesh facilitated a discussion with federal partner, Steve Posnak, who provided updates on ASTP/ONC's priorities. Key highlights included:
 - HTI-5 Proposed Rule
 - Reiterated deregulatory approach, including removing or revising older certification criteria.
 - Intended to redirect resources toward modern interoperability capabilities, such as API performance, automation, and modernization.
 - Noted that ONC is specifically prioritizing development of Inferno and FHIR-based test kits.
 - Addressed information blocking:
 - Proposed updates aim to tighten provision and reduce misuse of exceptions.
 - OIG is expanding enforcement staff to address the growing volume of complaints.
 - Encouraged stakeholders to submit specific, detailed public comments.
 - Hinted at future rulemaking, including early thinking around HTI-6.
 - AI RFI
 - A department-wide RFI focused on AI use in clinical care was released, covering regulatory considerations, reimbursement, and R&D needs.

Please remember that this meeting may include representatives of companies that compete with one another in the marketplace. Discussions, plans, consensus arrangement, agreements, strategies, etc., may be unlawful if they relate to, and should not include, any of the following topics: current or future prices or bidding information; limits on production or product lines; allocating customers or territories; individual company marketing strategies, projections, or assessments; and establishing a practice of dealing with customers or suppliers.

- Focused on non-medical-device AI to avoid duplicating FDA's earlier RFI.
- Comments are due late February; website issues are currently being addressed.
- TEFCA Progress
 - Reported continued improvement in transparency and a predictable cadence of SOP updates.
 - Highlighted the enhanced management process with public tracking of revisions.
 - Recent updates included:
 - Social Security Administration (SSA) benefits determination use cases.
 - Advancements in Individual Access Services (IAS).
 - Improvements to matching, routing, and response precision across network.
 - Emphasized that TEFCA and CMS Aligned Network efforts are complementary, not competing.

CMS Health Tech Ecosystem - Amy Gleason, CMS/DOGE (moderated by Ryan Howells, Leavitt Partners and Aneesh Chopra, Arcadia)

- Following Steve Posnack's update, Ryan and Aneesh welcomed Amy Gleason to provide updates on CMS' Health Tech Ecosystem initiative, with particular emphasis on the upcoming March 31 milestone for key framework deliverables. Amy outlined progress across several major workstreams.
 - National Provider Directory
 - The initial March release will include:
 - Comprehensive, CMS-sourced provider data, including NPIs, practice locations, specialties, etc.
 - Network participation, FHIR endpoints, and transparency metrics.
 - Identity verification options via ID.me, CLEAR, and Login.gov.
 - An API enabling verification of provider identity, licensure, "good standing," and recency of validation.
 - Progress, Deliverables, and Next Steps
 - More than 600 organizations signed the pledge, including "Friends of the Ecosystem," for entities who did not fit into specific pledgee types.
 - CMS remains focused on meeting the March 31 target for framework deliverables:
 - Initial deployment of the national provider directory
 - Launch of patient use cases to "kill the clipboard," including:
 - PDF and FHIR-based record sharing.
 - Support for organizations not yet FHIR-ready.
 - Goal to shift away from PDFs by July deadline as FHIR-based workflows expand.
 - Additional Workstreams/Next Steps:
 - Emphasized launch of next use cases, including prior authorization, real-time benefit checks, diagnostic imaging exchange, and scheduling.
 - CMS will begin onboarding more organizations to APIs and sandbox environments to accelerate development and testing.

AI-Enabled Consumer Health Record Access, b.well + OpenAI – Kristen Valdes, b.well

- Kristen Valdes provided an overview of b.well's integration with ChatGPT Health, which enables consumers to connect to and analyze their health records using conversational AI. The launch generated significant interest, with demand temporality overloading the platform. Key highlights included:
 - Privacy & Data Protection:
 - Personal health data is not used to train OpenAI models.
 - Data is stored separately; users can delete data at any time ("right to be forgotten").
 - The system was designed following CARIN Code of Conduct best practices.
 - User Demand & Early Feedback:
 - Contrary to old assumptions, consumer demand for integrated record AI assistants is extremely high.
 - Early user stories highlighted meaningful benefits, with consumers successfully retrieving, interpreting, and acting on their medical information through the interface.
- Full demo can be found [HERE](#).

AI-Enabled Consumer Health Record Access, HealthEx + Anthropic (Claude) – Priyanka Agarwal, HealthEx

- Priyanka Agarwal highlighted HealthEx's recent integration of Claude, Anthropic's AI Assistant, and conducted a live demo of how consumers can connect, view, and analyze their health records through conversational AI. Demo highlights included:
 - End to end record connection using TECCA RLS, Fasten's FHIR endpoint directory, and identity verification integrated into the workflow.
 - Claude can pull structured labs, extract clinical note content, and summarize visits, lab results, etc.
 - Real-time consent prompts displayed before Claude accessed specific portions of the user's medical record, ensuring visibility and control.
- Performance Metrics (To Date):
 - 92% identity verification success rate.
 - 70% TECCA success rate.
 - 88% overall success when combining TECCA with FHIR endpoints.
 - No personal health data is used for model training; health queries are stored with memory disabled.
 - Results can be found [HERE](#).
- Key Challenges Identified:
 - TECCA coverage remains uneven across regions and systems.
 - EHR bugs or misconfiguration cause missing IAS responses.
 - Identity and patient-matching continue to cause friction for first-time users.

Technical and Policy Discussion: Directories, Identity, RLS Limitations, Payer Participation – CARIN Members

- CARIN members engaged in a wide-ranging discussion on key technical and policy issues influencing consumer and patient access. Themes included:
 - Strong need for standardized provider directory metadata, including patient-facing brand mappings.
 - Recommendation that TECCA directory should become more open and transparent.

- Record-location services must account for historical address changes, practice affiliations, and search by doctor name.
- Alignment of identity-proofing and patient-matching could increase IAS success rates.
- Payers noted low historical patient access API usage but strong interest in new AI-driven demand.
- Members discussed expanding HealthEx and b.well connections to payers, given their role as data consolidators.
- CMS-aligned networks are expected to accelerate payer involvement.

Price Transparency & Good Faith Estimates (GFE) – Chris Severn, Turquoise Health

- Chris Severn provided an update on the evolving price transparency landscape and Turquoise Health's work to make pricing more accessible and consumer friendly.
 - Price transparency data has improved significantly since 2021 across both hospital and payer machine readable files.
 - Turquoise Health is helping NYC publish consumer-friendly "standard services packages," which provides bundled, consumer-friendly price information.
 - NYC's Price Comparison Tool can be found [HERE](#).
 - The PATIENTS Framework can be found [HERE](#).
 - A major gap remains: the absence of standardized GFE APIs that would allow consumers to request upfront bundled pricing.
 - There is interest growing among employers, providers, and payers.

CARIN Workgroup Highlights – Leavitt Partners' Workgroup Leads

- Consumer App Forum – Dave Lee, Leavitt Partners
 - Continued focus areas for 2026 include:
 - API endpoint discovery.
 - App onboarding and registration.
 - Standardized API functions.
 - Consumer usability improvements.
- Policy Workgroup – Dave Lee, Leavitt Partners
 - Increased activity on the hill, sparked by:
 - The HIPRA bill introduced by Senator Cassidy.
 - Emerging federal privacy issues and related policy discussions.
- Trust Workgroup – Dave Lee, Leavitt Partners
 - Ongoing updates to incorporate AI-specific practices in the CARIN Code of Conduct.
 - Continued onboarding of apps adhering to the Code.
- Real-Time Pharmacy Benefit Check (RTPBC) – Kim Boyd, Leavitt Partners
 - Strong HL7 Connectathon results with multiple end-to-end app-to-payer workflows.
 - Leveraging Digital Insurance Card to support accurate coverage information.
 - Working toward STU2 version of the implementation guide (IG), with expanded consumer-facing capabilities.
 - The IG can be found [HERE](#).
- Digital ID & Authentication – Ryan Howells, Leavitt Partners
 - Workgroup operates as part of the CMS Health Tech Ecosystem Initiative.
 - Collaborating with CLEAR and ID.me to align on a common data model to support IAL2 identity verification which will be published as an open standard.
 - Additional resources:
 - [The Missing Trust Layer in CMS-0057](#)

- [Verifiable Connectedness in Healthcare Trust](#)
- Digital Insurance Card – Mark Roberts, Leavitt Partners
 - Updating the implementation guide to incorporate real-world use cases, benefit coverage mapping, and support for US Core 6.1/7.0.
 - The IG can be found [HERE](#).
- CARIN Blue Button – Mark Roberts, Leavitt Partners
 - Preparing STU2.2 update, aligned with US Core 7.0.
 - Dental EOB profiles were successfully tested at recent HL7 Connectathon, marking an important expansion into oral health.

Patient Experience Story – Mark Roberts

- Mark Roberts shared a personal story navigating his daughter's Chron's treatment and the challenges his family has encountered in care coordination and prior authorizations.
- The use of electronic prior authorizations significantly accelerated approval, preventing delays in her scheduled infusion.
- Despite these improvements, he noted several ongoing challenges:
 - Provider offices still rely on fax, slowing communication and decision-making.
 - Patients often receive approvals before their provider does, complicating care coordination.
- Mark emphasized the importance of interoperability for parents, caregivers, and families managing complex or chronic health conditions.
- More details on Mark's experience can be found [HERE](#).

Closing – Dave Lee & Ryan Howells, Leavitt Partners

- The meeting concluded with specific callouts regarding CARIN workgroup participation and upcoming conferences.
 - Join us at upcoming HIMSS, ViVE, and Health IT Connect sessions.
 - HIMSS CARIN Open House Details:
 - When: March 10, 2026 from 6:30-7:30pm local time
 - Where: Venetian Level 4, Zeno 4608
 - No registration required
 - Please reach out to a Leavitt Partners team member to get involved in any of our workgroups or ongoing initiatives!