How APIs can cut doctors’ administrative burdens, improve care

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What’s the news: Recently finalized rules from the Office of the National Coordinator for Health Information Technology (ONC) may dramatically improve EHRs’ ability to exchange data and enable physicians to use apps to diagnose and treat patients.

A big part of that transformation is likely to happen through application programming interfaces (APIs), and a recent article by experts from the AMA and the Pew Charitable Trusts’ health information technology initiative explain how APIs—if used properly with clinical decision support tools—can affect physicians’ administrative burdens and improve the quality of care.

Why it’s important: A lot is happening in the private sector, Congress and among federal agencies to support the use of APIs in health care and in clinical decision support tools. In the article, “Technology Offers Solutions to Ease Burdens on Clinicians,” Ben Moscovitch and Ashley Ashworth of Pew Charitable Trusts, and Matt Reid and Laura Hoffman of the AMA, lay out not only the potential of APIs, but also some big hurdles that must be overcome to help fulfill their promise.

EHR developers, health care organizations, doctors and other clinicians, and government agencies have to “work together to advance effective use of secure APIs and apps,” says the article, posted at the Pew Charitable Trusts’ website.

To do that, these stakeholders should consider these three key goals.

More useful data. More isn’t always better—data should be useful for clinicians and patients. For example, making imaging results and other information available through APIs would yield more relevant data in clinical decision support tools and allow doctors to see previous diagnostic tests and reports in the EHR.

Write access. Right now, a lot of the focus is on read-only API access, which pulls information out of the EHR but won’t let it be edited. Write access means having “the ability to securely add information
to the EHR,” and that should be “the logical next step in the evolution of APIs,” says the article. That capability will lower the administrative burden for physicians and other health professionals, but data security must be front and center. Knowing the origin of information and how recent it is helps maintain data quality and gives clinicians critical context.

**CDS Hooks.** This is an “an emerging technology that allows the EHR to constantly communicate with a variety of apps in the background, offering suggestions on tools to use based on unique clinical circumstances,” says the article. These tools can then be directly integrated into the clinician’s workflow. This would represent a step forward from the clinical decision support tools that now often require physicians to know about a clinical decision support app, its capability, and can involve a lot of manual data entry.

**Learn more:** Read the full article at the Pew Charitable Trusts’ website about the new tools for data sharing that can help physicians improve care.

From the role of augmented intelligence (AI) in enhancing patient care to the use of health care apps and determining best practices for EHR adoption and usability, it’s vital that physicians have a say in the process. Find out how the AMA’s digital health leadership is ensuring the physician perspective is represented in the design, implementation and evaluation of new health care technologies.