

PREDICT for DPC EMRs

FHIR R4 ingestion from Elation, Hint, Atlas.md, AthenaOne, Epic — a stronger longitudinal signal than the TPA claims feed

Maturity disclosure. *PREDICT v0.1 is a working pipeline trained on simulated cohorts and is not approved for production use. The DPC EMR ingestion path described below is implemented and tested against a synthetic Elation tenant; the first real-world DPC deployment is targeted Q3 2026 alongside the v1.0 production release. The full Model Card is at [predict-methodology.html](#).*

Why DPC EMR data is stronger than TPA claims

TPA claims feeds are adjudicated, sparse, and lag the clinical reality by 30–90 days. A DPC EMR captures the same member's longitudinal encounter data at the moment of clinical truth: PCP visit notes, vital trends, medication adjustments, specialist referrals out, and the conversational signal that precedes a surgical candidate's decision to schedule. For early-warning surgical-risk prediction, the DPC encounter timeline is materially richer than the TPA claims feed.

Lead time gain	PREDICT trained on DPC EMR data identifies high-risk surgical candidates 4–6 months earlier than TPA claims
Precision gain	Cohort precision at top-decile lift improves from 89% (TPA-only) to 92% (DPC-augmented) in simulation
Member experience	Outreach can happen during a scheduled DPC encounter rather than as cold contact — material lift in engagement

Supported EMRs

EMR	FHIR R4	Ingestion mode	Write-back	Sandbox tested
Elation	Yes (Elation FHIR API)	OAuth 2.0 + delegated patient access	Encounter notes + attachments	Yes
Hint Health	Yes (Hint Open API + FHIR)	OAuth 2.0 + practice-level token	Encounter notes + attachments	Yes
Atlas.md	Partial (Atlas API + CSV)	API key + CSV fallback	PDF attachment only	Yes
AthenaOne	Yes (athenaOne API + FHIR)	OAuth 2.0 + practice-level token	Encounter + lab + imaging	Yes
Epic	Yes (USCDI / app-orchard)	SMART-on-FHIR app	Encounter notes via Care Everywhere	in progress · Q3 2026
DrChrono	Yes (DrChrono FHIR API)	OAuth 2.0	Encounter + medication list	Sandbox · Q3 2026

Resources consumed

PREDICT consumes the standard FHIR R4 clinical-data resources. No proprietary fields, no custom extensions. The partner DPC's existing FHIR endpoint is sufficient.

Patient	Demographics, identifiers (tokenized at boundary)
Encounter	PCP visit timeline; visit reason; clinician notes
Condition	Active and resolved problem list
Observation	Vital signs, lab results, BMI trends
MedicationRequest	Active and historical medication list, refill cadence

AllergyIntolerance	For perioperative screening
Procedure	Past procedures (PCP-noted, not adjudicated)
DocumentReference	PCP encounter notes (full text where consent permits)

Worked example: scoring a member from a DPC EMR feed

1. OAuth token (partner DPC issues the token via their FHIR auth server)

POST https://api.elationemr.com/oauth/token

grant_type=client_credentials

client_id=jetpatient-partner-prod

scope=patient/*.read user/*.read

2. Pull the member's encounter bundle

GET https://api.elationemr.com/fhir/r4/Encounter?patient=12345&_count=50

Authorization: Bearer <token>

3. JetPatient PREDICT scores the cohort

POST https://api.jetpatient.com/predict/score

Authorization: Bearer <jp_token>

Content-Type: application/fhir+json

Body: { "resourceType": "Bundle", "entry": [...] }

Response 200 OK

```
{ "member_token": "jp-tok-9f3d",
  "surgical_risk_score": 0.78,
  "top_procedure_family": "orthopedic",
  "estimated_lead_time_months": 11,
  "confidence_interval": [0.71, 0.84] }
```

Write-back: closing the loop into the EMR

On a routed case, the PCP receives the operating surgeon's records back into their existing EMR timeline via FHIR R4 write-back. Day-0 op report, Day-3 vitals, Day-7 imaging, Day-30 follow-up, Day-90 outcomes summary — all filed as DocumentReference + Encounter resources on the PCP's existing patient chart.

Data privacy & tokenization

PREDICT operates on tokenized member identifiers; no raw SSN, DOB, or member name reaches the PREDICT compute layer. Tokenization happens at the partner-DPC FHIR boundary using format-preserving encryption keyed by the partner. The JetPatient-partner BAA chain documents the full data path. Audit log is exportable per the standard Trust Center retention schedule.

Sandbox access

DPC partners receive a sandbox FHIR endpoint and a 5,000-member synthetic census on signing the MSA + BAA. Sandbox is full functional parity with production. Postman collection covers the full ingestion + score + write-back round trip. Typical integration time-to-live is 21 days from BAA execution.

Contact

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Model questions: ml-ethics@jetpatient.com

Methodology: [predict-methodology.html](#)