

2019-05-22 JOINT - FM/Attachments Interim Meeting

Chair: @PaulKnapp

Scribe: @MaryKay McDaniel

Call Logistics: This call is at 12 PM ET, 11 AM CT, 10 MT, 9 AM PT, Join using <https://join.freeconferencecall.com/fm4>, Phone: 1+(515)606-5440 Access Code: 589967

Attendees - list maintained at the bottom of meeting notes.

Agenda Outline	Agenda Item	Meeting Minutes from Discussion	
Weekly Call Minutes	Approve 4/10/2019/ 4/17/2019 5/1 /2019 meeting minutes	Motion to approve:	
IG Review	PDex: URL: http://build.fhir.org/ig/HL7/davinci-epdx/	<p>Mark displayed and we reviewed the PDex draft.</p> <p>Requires multiple passes. 1st is in context. Do we know you? can we identify you? THEN once id'd the conversation can continue. This is the magic number for the health plan to identify the patient.</p> <p>Questions: A way to 'not' share information (Behavioral health info/Substance Abuse). Scenario 1: out of scope for the IG. Payers are already dealing with this today. We will add a statement about this in the IG. In the scenario where the member asks to move the data - the member should be in control. They should be able to have the final say, that is dependent on who writes the API for the request.</p> <p>What happens if claim information is sent to one provider and then the claim is adjusted. How does that adjusted information get sent out to those who already received it? Out of scope (push) in this situation. Also a query that says give me anything that has changed since this date.</p> <p>Read the conformance statement from the receiver (EMR) to determine what can be written into the EMR. If they don't allow it to be updated, it is written into a resource, placed in bundle and a the reference given. Smart on Fhir app allows the receiver to configure the items they want. The smart app will do the work of reading the capability statement. the requester is in control of the impacts to their system. the sender is only responding to the queries from the requester.</p> <p>Mark will continue to build out the overview section.</p> <p>Recognized that we need some additional information : MK: will start a ppt that starts with Mark's spreadsheet to advance the training documents.</p>	

<p>CCDA Payer Section Templates, Continuing Discussion</p>	<p>Moving to Wednesday's at 12ET, starting on 4/10.</p> <p>Payer Section Templates CCDA - Linda Michaelson</p> <p>I would like to request time on your agenda to start talking about the Payer Section Templates.</p> <p>http://www.hl7.org/special/Committees/projman/searchableProjectIndex.cfm?action=edit&ProjectNumber=1437</p> <p><u>Collaborative CDA Template Review Process Pilot</u></p> <p>Eventually FM will own/support 3 templates: THIS IS A PILOT. What does it mean for the WG to 'own'?</p> <ul style="list-style-type: none"> - C-CDA R2.1 Coverage Activity Entry - C-CDA R2.1 Planned Coverage - C-CDA R2.1 Policy Activity Entry <p>Keith Boone does a great job of outlining the RIM and where the information from an insurance card is placed in the CDA documents:</p> <p>http://motorcycleguy.blogspot.com/2012/10/where-do-they-go-insurance-id-cards-and.html</p>	<p>Reviewed the information found at: Payer Section C-CDA</p> <p>PPT: Payer Section.pptx (located in documents), the spreadsheet contains the vocabulary: https://confluence.hl7.org/download/attachments/30638450/Payer%20Section.xls.xlsx?api=v2</p> <p>HOMEWORK from 4/10/2019: Review the ppt and the vocabulary to discuss next week.</p> <p>Scenario:</p> <ul style="list-style-type: none"> Johnny - child Custodial Parent - Mom Covered by Mom's Insurance Biological Father is responsible for all remaining medical bills 	
Open Discussion			
Next Agenda Items			
Adjournment	Adjourned at 1:15pm ET		

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