

OO Conf Call Minutes - DME/Post-Acute Orders: November 8, 2019

Attendees: Bob Dieterle, Riki Merrick, Gary Bartlett, Nandini Ganguly, Zane Shott, Hans Buitendijk, Pallavi Talekar, Briana Barnes

Topic:

- Introductions
 - Hans Buitendijk (Cerner) – OO Co-Chair
 - Riki Merrick (Vernetzt, LLC / APHL) – OO Co-Chair
 - Bob Dieterle (Enable Care) – working for CMS and HL7 for 8 – 9 years – project lead for this Project
 - Gary Bartlett (Brighttree) – Project Manager – post acute space, home-health / hospice
 - Pallavi Talekar (EMDI) - Project Manager
 - Briana Barnes (EMDI) - Project Coordinator
 - Nandini Ganguly (EMDI) - Business Analyst
 - Zane Schott (Apria/DMEhub) - Director for IT Referral Applications with Apria (a home health supplier); DMEhub is their software
- Overview
 - Slides = <https://confluence.hl7.org/download/attachments/44499186/Post%20Acute%20Fhir%20Based%20Orders%20%2020191108%20V3.0.pptx?api=v2>
 - Post-acute ordering IG = still need to make an acronym (PAO or PAFO – F = FHIR) (Durable medical equipment and home health services)
 - Project page: <https://confluence.hl7.org/display/OO/DME+Project>
 - Ask at order Entry questions will those be covered – for example expected flowrate for oxygen?
 - Depends if that is counted as medication that may be too complex
 - PT/OT could be covered – or med administration training
 - CMS careplan DME areas should be supported, but for home health may have exceptions
 - For workflow task and subscription are needed
 - Why subscription?
 - Looking at the diagram = <https://confluence.hl7.org/download/attachments/44499186/eRX%20workflow%20V1.1.vsd?api=v2>
 - Is the first is a message bundle?
 - Expected to be a POST of a transaction / message bundle
 - Will have to decide which one and document rationale (Lloyd's write up suggested not to use FHIR messaging)
 - Task resource contains "ORC-like" elements
 - Bi-directional eReferral is using FHIR messaging in order to treat the inbound queue
 - We used the same approach for prior auth
 - Using the claims profile to get the prior
 - We are using it as a request for authorization
 - In the first arrow – using the current R4 subscription resource, rather than the retrofit proposed for Argonaut to mimic topic resource
 - Assume subscription is a many to one approach
 - If using subscription the ordering system will have to go get the info about the update of the task resource – one additional transaction for each update
 - Spreadsheet review = <https://confluence.hl7.org/download/attachments/44499186/Post%20Acute%20FHIR%20based%20Orders%2020191109%20V2.1.xlsx?api=v2>
 - ServiceRequest
 - OrderDetail – is not separate break down, but more info on the order
 - How do we describe the type of CPAP with 2 of this = will need to make an extension, but not on orderDetail (even though that is the term used in DME)
 - RelevantReview – may need different name, but is definitely
 - DeviceRequest is for the actual thing
 - Expected timeline for this project = balloting in Feb 2020
 - NIB deadline is 11/17 – Hans and Bob will work on this offline
 - Need to check when the IG needs to be substantively complete – per calendar think it is 11/17, but will follow up
- Next Steps
 - Have listserv set up
 - will hold weekly calls
 - Get NIB approved