Chair: @Paul Knapp  Scribe:  

Call Logistics:  
This call is at 11 AM ET, 10 AM CT, 9 AM MT, 8 AM PT  
Join Zoom Meeting [https://us02web.zoom.us/j/82031005986 Passcode: 098894] 

Financial Management Work Group is inviting you to a scheduled Zoom meeting.  

Topic: FM Full WG Weekly Conference Call  
Time: Oct 20, 2020 11:00 AM Eastern Time (US and Canada)  
Every week on Tue, until Jan 12, 2021, 13 occurrence(s)  
Join Zoom Meeting [https://us02web.zoom.us/j/82031005986 Passcode: 098894] 

One tap mobile  
+16699006833,,82031005986# US (San Jose)  
+12532158782,,82031005986# US (Tacoma) 

Find your local number: [https://us02web.zoom.us/u/kfWlHSVu3](https://us02web.zoom.us/u/kfWlHSVu3) 

Attendees - list maintained at the bottom of the meeting notes 

FAQs -  
- PSS approval flow: Sponsoring WG, Co-sponsors, US Realm, Management Groups, Steering Division, TSC  
- UTG Process: [https://confluence.hl7.org/display/VOC/UTG+Submitter+Documentation](https://confluence.hl7.org/display/VOC/UTG+Submitter+Documentation)  
- US CORE Variance: [https://confluence.hl7.org/display/FHIR/H+-Publication+Request](https://confluence.hl7.org/display/FHIR/H+-Publication+Request)  
- How to Guide for Balloting using Jira - HL7 - Confluence 
- Steps for STU-1 publication:  
  - Ballot Reconciliation - [https://confluence.hl7.org/display/FHIR/G+-Ballot+Specification+and+Reconciliation](https://confluence.hl7.org/display/FHIR/G+-Ballot+Specification+and+Reconciliation) 
  - Publication Request - [https://confluence.hl7.org/display/FHIR/H+-Publication+Request](https://confluence.hl7.org/display/FHIR/H+-Publication+Request)  
  - Approval by Sponsoring WG  
  - Approval by FMG  
  - Enough positive votes?  
  - All errors resolved on in FHIR IG?  
  - Submit Checklist  
  - Approval by TSC  
  - Work with Lynn to publish  

- FHIR IG numbering  
  - The HL7 version naming convention is: v.b.r  
  - v = published version number. Pre-publication v = 0, STU1 = 1, etc.  
  - b = ballot number for this version. balloted 1 time b = 1, etc.  
  - r = revision number. The IG team can use this as they wish. 

- ID vs. IDENTIFIER: ID - Local to the resource creator, IDENTIFIER - an identifier everyone recognizes. Independent of where the information is created or by whom 

Agenda Item 

**Review agenda -**  
- Review/Approve 09/06/2022 Interim Meeting Minutes  
- Announcements  
  - HL7 Antitrust Policy can be found at the bottom of the Agenda  
  - HL7 Code of conduct can be found at the bottom of the Agenda  
  - Ballot Review (How To)  
  - How to Guide for Balloting using Jira - HL7 - Confluence  
  - Block Vote Guidance (WORK IN PROCESS)  
  - Block Voting Discription and Process - Technical Steering Committee - Confluence (hl7.org)  
  - SEP WGM - Ward Q1 Invite to BPM + Health Joint Session  
  - SEP WGM - Need to create general session slides  
  - CARIN BB Block-Vote-8  
  - Also Ballot Recon Sheet upload - need Paul to do...  
  - GHIG Review, Pre-Ballot Look: FHIR.GENDER.HARMONY/Home - FHIR v4.0.1  
- Da Vinci  
  - PCT Block Vote - Corey, 2nd hour  
  - Vocabulary Questions (Kathleen) - set up for WGM  
  - Adjudication Code System/Value Set  
  - Da Vinci - Risk-Based Lists - 4th mtg of month - Update  
- RS Work  
  - [FMWG_RS_Review] Issue Navigator - Jira (hl7.org) 
- Additional items  
  - Subscriber as organization - ?R5 ticket FHIR-37768 

Weekly Call Minutes 

Review & Approve Interim Meeting Minutes from 9/06/2022
ANNOUNCEMENTS

- Reminder - Updated Confluence pages:
  - HL7 Essentials page
  - HL7 Leadership Announcements page
  - https://confluence.hl7.org/display/HDH (Documentation and Help) page
- Timing of R5 ballots: (see https://www.hl7.org/fhir/versions.html)
- Monthly Reminders to Co-Chairs:
  https://confluence.hl7.org/display/HL7/PSC+Standards+approaching+expiration
- STUs Expiring in the Next 6 Months
  https://confluence.hl7.org/display/HL7/STUs+Expiring+in+Next+6+Months
- Upcoming PSS and NIB Deadline Dates for Future Ballot Cycles
  All deadline dates can be seen on the new Balloting, Content Submission, Voting, and Working Group Meeting Schedules on Confluence at:
  https://confluence.hl7.org/display/HL7/HL7+Calendars
STUs Expiring in Next 6 Months

STU Extension Request Approval Policy - Technical Steering Committee - Confluence (hl7.org)

<table>
<thead>
<tr>
<th>STU Name</th>
<th>STU Code</th>
<th>Begin DT</th>
<th>End DT</th>
<th>WG</th>
<th>Extend</th>
<th>Never Version</th>
</tr>
</thead>
<tbody>
<tr>
<td>HL7 FHIR Implementation Guide: Unchained Notifications (Alerts) Release 1</td>
<td>FHIR.IS_ALERTS_R1_STU3_20200CT</td>
<td>10/15/2020</td>
<td>10/15/2021</td>
<td>Infrastructure and Messaging</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>HL7 FHIR Implementation Guide: Payment Data Exchange (PDE), Release 1-US Realms</td>
<td>FHIR.IS_PDE_P1_STU1_20200DC</td>
<td>12/22/2020</td>
<td>12/22/2020</td>
<td>Financial Management</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>HL7 FHIR Implementation Guide: Page Coverage Requirements Discovery (SWS), Release 1-US Realms</td>
<td>FHIR.IS_COV_R1_STU1_20200DC</td>
<td>12/22/2020</td>
<td>12/22/2020</td>
<td>Financial Management</td>
<td>Yes</td>
<td>Yes</td>
</tr>
</tbody>
</table>

WG Health

View the WG Health and PBS Metrics Reports:
The links to the interim work group health and PBS metrics reports are here: [https://confluence.hl7.org/display/TSC/2022Sep+Interim+Reports](https://confluence.hl7.org/display/TSC/2022Sep+Interim+Reports)

<table>
<thead>
<tr>
<th>Standard/Document Name</th>
<th>PI ID</th>
<th>Notes/Action to be Taken</th>
</tr>
</thead>
<tbody>
<tr>
<td>Develop FHIR resources for Financial Management</td>
<td>9942</td>
<td>Next Milestone Date is 2021 May WGM/Balot. Determine when the next deliverable will be the tgd date</td>
</tr>
<tr>
<td>Targeted industry survey regarding US coverage requirements discovery for Durable Medical Equipment (PSS)</td>
<td>1408</td>
<td>Next Milestone Date is 2019 May WGM/Balot. Determine when the next deliverable will be the tgd date</td>
</tr>
<tr>
<td>Patient Cost Transparency (Da Vinci project; PSS in Confluence)</td>
<td>1514</td>
<td>Next Milestone Date is 2019 Sept WGM/Balot. Determine when the next deliverable will be the tgd date</td>
</tr>
<tr>
<td>Accounts, Payments and Statements (Jira PSS-1816)</td>
<td>1613</td>
<td>Next Milestone Date is 2021 May WGM/Balot. Determine when the next deliverable will be the tgd date</td>
</tr>
<tr>
<td>KS4 Healthcare Financial Services Implementation Guide (PSS in Confluence)</td>
<td>1635</td>
<td>Next Milestone Date is 2021 May WGM/Balot. Determine when the next deliverable will be the tgd date</td>
</tr>
<tr>
<td>EARN Elite Button (PSS in Confluence)</td>
<td>1538</td>
<td>Next Milestone Date is 2021 May WGM/Balot. Determine when the next deliverable will be the tgd date</td>
</tr>
<tr>
<td>Risk Based Contract Member Identification (Da Vinci project; PSS in Confluence)</td>
<td>1517</td>
<td>Next Milestone Date is 2021 May WGM/Balot. Determine when the next deliverable will be the tgd date</td>
</tr>
</tbody>
</table>

Da Vinci - Risk-Based Lists

4th Meeting of the month Agenda (regularly), 10-15 minutes for Risk-Based Lists:

Risk Adjustment - Da Vinci - Confluence (hl7.org)

PSS: PSS for Risk Based Contract Member Identification (Updated) - Financial Management - Confluence (hl7.org)

Tickets added by FM Co-chairs:

[FHIR-37835] ATR Patient SSN using the wrong value type. Using SS should be SB - Jira (hl7.org).

[FHIR-37836] ATR Patient Insurance Plan Mbr Id should be in Coverage.identifier of the appropriate plan - Jira (hl7.org)

ATR Patient Insurance Plan Mbr Id should be in Coverage.identifier of the appropriate plan
CARIN BB - Block-Vote-8 Vote

Individual Votes:

1. FHIR-38108 - Make changes to CapabilityStatement
2. FHIR-38285 - Remove duplicative CodeSystem resources already defined in THO

Request for Review of CARIN BB STU2 CI Build for Publication Request Vote on Thursday 9/22/2022 Q2 during the September WGM.

After meeting (and votes on above items), the CI build will be updated by EOB 9/13/2022 for review

Candidate Publication: https://build.fhir.org/ig/HL7/carin-bb/branches/

Change Notes: https://build.fhir.org/ig/HL7/carin-bb/change_notes.html
## Da Vinci Patient Cost Transparency - Block-Vote-7 Announcement

<table>
<thead>
<tr>
<th>Key</th>
<th>Summary</th>
<th>T</th>
<th>Created</th>
<th>Updated</th>
<th>Due</th>
</tr>
</thead>
<tbody>
<tr>
<td>FHIR-38127</td>
<td>GFE profiles need to require item.net</td>
<td></td>
<td>Sep 05, 2022</td>
<td>Sep 13, 2022</td>
<td></td>
</tr>
<tr>
<td>FHIR-38125</td>
<td>Remove Must Support from PreAuthRef</td>
<td></td>
<td>Sep 05, 2022</td>
<td>Sep 13, 2022</td>
<td></td>
</tr>
<tr>
<td>FHIR-37516</td>
<td>Change careTeam.rendering slice on Institutional GFE to only be a Human (not Organization)</td>
<td></td>
<td>May 27, 2022</td>
<td>Sep 13, 2022</td>
<td></td>
</tr>
<tr>
<td>FHIR-36193</td>
<td>Plan or Coverage Entity Name and GFE Plan or Coverage Payer Name appear to be the same</td>
<td></td>
<td>Mar 03, 2022</td>
<td>Sep 13, 2022</td>
<td></td>
</tr>
<tr>
<td>FHIR-35273</td>
<td>Provide means to declare an in or out of network/coverage status for AEOB</td>
<td></td>
<td>Jan 10, 2022</td>
<td>Sep 13, 2022</td>
<td></td>
</tr>
<tr>
<td>FHIR-35272</td>
<td>Provide a means to specify a denial reason in AEOB</td>
<td></td>
<td>Jan 10, 2022</td>
<td>Sep 13, 2022</td>
<td></td>
</tr>
<tr>
<td>FHIR-35254</td>
<td>compoundDrugLinkingNum needs more guidance</td>
<td></td>
<td>Jan 10, 2022</td>
<td>Sep 13, 2022</td>
<td></td>
</tr>
<tr>
<td>FHIR-35251</td>
<td>Require Claim.subType</td>
<td></td>
<td>Jan 10, 2022</td>
<td>Sep 13, 2022</td>
<td></td>
</tr>
<tr>
<td>FHIR-35199</td>
<td>Diagram in Overview seems to imply that the Patient could only get a response from an Intermediary</td>
<td></td>
<td>Jan 09, 2022</td>
<td>Sep 21, 2022</td>
<td></td>
</tr>
<tr>
<td>FHIR-35101</td>
<td>Edits to MRI scenario</td>
<td></td>
<td>Jan 07, 2022</td>
<td>Sep 13, 2022</td>
<td></td>
</tr>
<tr>
<td>FHIR-35095</td>
<td>Utilize Distinct FHIR Profiles for Professional and Institutional Claims</td>
<td></td>
<td>Jan 07, 2022</td>
<td>Sep 13, 2022</td>
<td></td>
</tr>
<tr>
<td>FHIR-35088</td>
<td>Institutional and Professional profiles - NDC mapping and Value Set</td>
<td></td>
<td>Jan 07, 2022</td>
<td>Sep 13, 2022</td>
<td></td>
</tr>
<tr>
<td>FHIR-35057</td>
<td>Institutional profile - add diagnosis slice, add invariants</td>
<td></td>
<td>Jan 06, 2022</td>
<td>Sep 13, 2022</td>
<td></td>
</tr>
<tr>
<td>FHIR-34955</td>
<td>Network status in advanced EOB profile</td>
<td></td>
<td>Jan 06, 2022</td>
<td>Sep 13, 2022</td>
<td></td>
</tr>
<tr>
<td>FHIR-34649</td>
<td>Modify bindings for Institutional profile claim.type, claim.subtype</td>
<td></td>
<td>Dec 27, 2021</td>
<td>Sep 13, 2022</td>
<td></td>
</tr>
</tbody>
</table>

15 issues

## VOCABULARY: Adjudication - Code System/Value Set
1. Create a new code system
   - with the values below and add F. Facial, The surface of a tooth facing the lips.
   - Yes there are 2 codes with the same definition. F is used in the US only, V is used in all other countries.
   - Countries that follow ISO or FDI use "V"

2. Create a US value set that includes all except the "V"
3. Create a FDI value set that includes all except the "F"
4. The existing code system will then be deprecated
5. Will there need to be a naming system entry created? Question for Vocab
   - research OIDS
     OID is: urn:oid:2.16.840.1.113883.4.642.1.1154

Create new Value Sets:

existing EXAMPLE VS: HL7.TERMINOLOGY/Surface Codes - FHIR v4.0.1
URL: http://terminology.hl7.org/ValueSet/surface
urn:oid:2.16.840.1.113883.4.642.3.546
From ADA Standard No 1084, May2019.pdf: Surface Code (2.16.840.1.113883.4.642.1.316)
From the OID registry:

<table>
<thead>
<tr>
<th>OID</th>
<th>Status</th>
<th>Symbolic name</th>
<th>Submitter First</th>
<th>Submitter Last</th>
</tr>
</thead>
<tbody>
<tr>
<td>2.16.840.1.113883.4.642</td>
<td>Complete</td>
<td>for</td>
<td>Granada</td>
<td>Gloves</td>
</tr>
<tr>
<td>2.16.840.1.113883.4.642.1.222</td>
<td>Complete</td>
<td>observationCategory</td>
<td>William Test</td>
<td>Klein</td>
</tr>
</tbody>
</table>

From the new V2+ web version:

HL7.TERMINOLOGY/bodySiteModifier - FHIR v4.0.1
Official URL: http://terminology.hl7.org/CodeSystem/v2-0495

VOCABULARY: Coverage.type

Replacing the v3 ActCoverageTypeCode Value Set

***We have SEVERAL R5 tickets around this value set: 13024, 14127, 24916, 20361 (these are linked and in FMWG-Discussion Grouping)

R5 JIRA TICKET Priorities

Carry over to the WGM
8/30/2022: The following were not review and clarified. Will NOT be included in R5 initial ballot. Could be added during reconciliation.
Priority: DID NOT REVIEW on 8/30/2022

- [FHIR-37828] Add payment backbone to item (EOB) - Jira (hl7.org): Need to review and approve in WG
  - 8/16/2022 FM Meeting minutes, FHIR-37828: Passed, too time consuming. If we have time will address 8/30.
  - 8/30/2022: Ran out of time
- [FHIR-32762] Claim Response - add dates at the item level - Jira (hl7.org)
- [FHIR-37588] Add adjudication quantity to ClaimResponse & EOB - Jira (hl7.org)
R4 comments guidance
the definition and the comments don't seem to make sense.

Is it the date the resource was created?

<table>
<thead>
<tr>
<th>Created</th>
<th>Created</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Definition</strong></td>
<td>The date the resource was created.</td>
</tr>
<tr>
<td><strong>Cardinality</strong></td>
<td>1..1</td>
</tr>
<tr>
<td><strong>Type</strong></td>
<td>dateTime</td>
</tr>
<tr>
<td><strong>Requirement</strong></td>
<td>used to record a timestamp for use by both the recipient and the issue.</td>
</tr>
<tr>
<td><strong>Summary</strong></td>
<td>This field is independent of the date of creation of the resource as it may reflect the creation date of a source document prior to digitization. Typically for claims all services must be completed as of this date.</td>
</tr>
</tbody>
</table>
R5 Work - Clarification ADJ Category vs. ADJ Reason... what is the difference between Category and Reason use

<table>
<thead>
<tr>
<th>ClientResponseItem.adjudication.category</th>
</tr>
</thead>
<tbody>
<tr>
<td>Element Id</td>
</tr>
<tr>
<td>Definition</td>
</tr>
<tr>
<td>Cardinality</td>
</tr>
<tr>
<td>Semantics</td>
</tr>
<tr>
<td>Type</td>
</tr>
<tr>
<td>Requirements</td>
</tr>
<tr>
<td>Summary</td>
</tr>
<tr>
<td>Comments</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ClientResponseItem.adjudication.reason</th>
</tr>
</thead>
<tbody>
<tr>
<td>Element Id</td>
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<tr>
<td>Definition</td>
</tr>
<tr>
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<td>Type</td>
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<tr>
<td>Requirements</td>
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<tr>
<td>Summary</td>
</tr>
<tr>
<td>Comments</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>ExplanationOfBenefitItem.adjudication</th>
</tr>
</thead>
<tbody>
<tr>
<td>Element Id</td>
</tr>
<tr>
<td>Definition</td>
</tr>
<tr>
<td>Cardinality</td>
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<tr>
<td>Semantics</td>
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<td>Type</td>
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<tr>
<td>Requirements</td>
</tr>
<tr>
<td>Summary</td>
</tr>
<tr>
<td>Comments</td>
</tr>
</tbody>
</table>
R5 Work:

- FHIR-26943 Review, awaiting CGP

Lynn Laakso 2022-05-13 09:25

Reverted previous resolution: Considered for Future Use made 2022-04-07 00:00:00.0 with vote Brett Marquard / Marti Velezis : 13:0-0/(-Impacted: null; Category: null; Version: null)/. We will look at this for a post-5.0.0 version of US Core.

In PAS created a new datatype to include the information: PASIdentifier

existing Identifier with 2 add'l extensions:

<table>
<thead>
<tr>
<th>Name</th>
<th>Flags</th>
<th>Cardinality</th>
<th>Type</th>
<th>Description &amp; Constraints</th>
</tr>
</thead>
<tbody>
<tr>
<td>Identifier</td>
<td></td>
<td>0..1string</td>
<td>Identifier</td>
<td>As an identifier intended for computation.</td>
</tr>
<tr>
<td>extension-identifier</td>
<td>0..*</td>
<td>Extension</td>
<td>Identifier</td>
<td>Additional content defined by implementations.</td>
</tr>
</tbody>
</table>

supportingInfo Slices in existing IGs:

CARINBB:

- Billingnetworkcontractingstatus
- admissionperiod
- chronicdata
- typetobill
- pointoforigin
- admityear
- discharge-status
- drug
- medicalreimbursement
- patientaccountnumber
- benefitpaymentstatus
- daysupply
- dawcode
- refillNum
- refillAuthorized
- brandgenericindicator
- rxoriginCode
- compoundcode
- performingnetworkcontractingstatus
- servicefacility

PAS:

- PatientEvent
- AdmissionDates
- DischargeDates
- AdditionalInformation
- MessageText
- InstitutionalEncounter (information about a hospital claim being requested)

VA:

- Initial Placement (dental claim)

HL7 Antitrust Policy - Updated 10/2021

- The HL7 Antitrust Policy was approved as part of the last GOM Revision
- Section 05 Antitrust Compliance
- Professional Associations, such as HL7, which bring together competing entities are subject to strict scrutiny under applicable antitrust laws. HL7 recognizes that the antitrust laws were enacted to promote fair competition. The following statement must be added to the minutes for each meeting:
- Co-Chair Handbook has been updated: [Co-Chair Handbook](http://hl7.org/)

HL7 Code of Conduct

HL7 is a community where we can always ask searching questions about technical matters and how our decisions might impact our various communities and stakeholders, but HL7 and its participants are committed to a high level of excellence. We encourage open and respectful communication. Generally this should mean there is no reason for those subjects to come up with regard to specific individuals.

Co-chairs are asking our WG participants periodically review the [HL7 Code of Conduct](http://hl7.org/).
FM Co-Sponsoring:

Human Services WG:

3/29/2022: Motion that FM be a co-sponsor. Approved. 16-0-0

Da Vinci:
- Burden Reduction IGs - CRD STU2 - FM Primary Sponsor
- Burden Reduction IGs – PAS STU2 - FM Primary Sponsor
- PDex STU2 - FM Primary Sponsor
- Patient List - FM Sponsor
- Risk Adjustment - Da Vinci - Confluence (hl7.org)
- PSS: PSS for Risk Based Contract Member Identification (Updated) - Financial Management - Confluence (hl7.org)
- National Directory (we are co-sponsors): HL7.FHIR.US.FHIR DIRECTORY EXCHANGE/Home - FHIR v4.0.1
- PA Sponsor
- FM/PIE Co-sponsors

Primary Sponsor:
- KSA
- DV CRD
- DV PAS
- DV PDex
- DV Patient Cost Transparency
- DV PCDE
- DV Member Attribution
- DV Plan Net
- CARIN for Blue Button

Co-Sponsor:
- National Directory (w/ PA)
- Gender Harmony (w/Vocabulary)
- CARIN Digital ID Card (w/PIE)
- DAM UDI (w/D&A)
- Validated Healthcare Directory R1 (w/PA)
- Human Service Resource and Provider Directories (w/Human Resources)

Withdrawn (FM was sponsoring):
- V3 Accounting & Billing R2
- V3 Claims and Reimbursement R4

Miscellaneous
- Uniform Elements for Prior Authorization

ATTENDEES: