2022-10-14 Patient Cost Transparency Meeting

Chairs: Vanessa Candelora  Rick Geimer
Scribe: Holli Murphy

Minutes Approved as Presented

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This is to approve minutes via general consent. "You have received the minutes. Are there any corrections to the minutes? (pause) Hearing none, if there are no objections, the minutes are approved as printed."

DRAFT

Agenda Topics

<table>
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<tr>
<th>Agenda Outline</th>
<th>Agenda Item</th>
<th>Meeting Minutes from Discussion</th>
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</thead>
<tbody>
<tr>
<td>Management</td>
<td>Review ANSI Anti-Trust Policy</td>
<td>Reviewed</td>
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<tr>
<td></td>
<td>HL7 AntiTrust Statement</td>
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**ArtTrust Statement (HL7 GCM 305.62):**

PMO/PM Toward a HL7 V3 Implementation and HL7 ArtTrust Statement

*Draft* - No comments.

Reviewed. This is a placeholder for the actual arttrust statement.

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Housekeeping

**Welcome Newcomers!**

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Announcements

PDex calls are now from 1-2:30pm ET (90min). There is no longer a conflict with the second hour of this call.

VC reminded community of time change.

- PDex call will cover PDex IG and Plan Not as needed
- PDex will go to ballot in January 2023

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On Friday 9/16, the Tri-Agencies, Department of Labor, Department of Treasury and the Department of HHS released an RFI focused on Advanced Explanation of Benefits (AEOB) and Good Faith Estimates (GFE) for Covered Individuals. The RFI, generally, seeks information and recommendations on transferring data from providers and facilities to plans, issuers, and carriers; other policy approaches; and the economic impacts of implementing these requirements. This release calls out the potential for using FHIR, APIs, and the efforts from our very own HL7 Da Vinci Patient Cost Transparency (PCT) use case. Full content of the summary can be found [here](#). Comments will be due November 15, 2022.

For Da Vinci Members: If you would like to participate in the response to the RFI, please reach out to Vanessa (note is chat or email me: vanessa.candelora@pocp.com). There are many different organizations throughout the community that will be convening for public response, and we'd be happy share our drafts for others to leverage our work. If you are not a Da Vinci Member and are interested in membership, reach out to Jocelyn Keegan.

VC highlighted RFIs from CMS

SN - asked if IGs are identified in the RFIs and whether we s

VC - Da Vinci members are developing a response to the RF

SN - responses to the RFI can include more than answers t

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Officially released last Friday: RFI on National Provider Directory. Comments will be due Dec 6th. There are a lot of questions - references to TEFCA, Prior Authorization, FHIR, FAST, etc. Stay tuned for more information, likely through FAST and HL7.

CMS Press Release


VC directed community to the RFI

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Project Use Case Update

Block Vote 8 approved last week. Will continue official voting on Financial Management (FM) workgroup meetings on Tuesdays, all are welcome.

Reviewed

VC - Block vote 8 was approved last week. May have anoth
Last week, we reviewed a proposed workflow for the GFE response focused on the interactions between Provider (GFE Submitter) and Payer.

Any Additional Feedback?

(Click to enlarge)

We feel there is great value in leveraging the work that many payers subject to NSA have already completed with implementing the Patient Access API (PAAPI). We want to hear the community’s thoughts.

CARIN Consumer Access to Data IG section: https://build.fhir.org/ig/HL7/carin-bb/Use_Case.html#use-case---consumer-access-to-their-claims-data

Options:

1) Point to this from PCT
2) Leverage and align CARIN PAAPI section, but write PCT based section.
3) ...

VC reviewed discussion last week related to the diagram.
This week we will look at the patient side and the response to the GFE submitter to payer workflow.

VC asked for feedback for the GFE submitter to payer workflow.

no responses from the community on the call.

Feedback can be given via the PCT Zulip stream.

We feel there is great value in leveraging the work that many payers subject to NSA have already completed with implementing the Patient Access API (PAAPI). We want to hear the community’s thoughts.

CARIN Consumer Access to Data IG section: https://build.fhir.org/ig/HL7/carin-bb/Use_Case.html#use-case---consumer-access-to-their-claims-data

Options:

1) Point to this from PCT
2) Leverage and align CARIN PAAPI section, but write PCT based section.
3) ...
The consumer could use the same mechanism that they would for claims and clinical data and not have the new burden.

A resource can be updated. The server would typically share the most recent and allow for history.

Comment (does not need to be in the IG): AEOB are more period of time, not really the same use as the data that was part of...

From a FHIR server perspective, ok to have 2 instances of a base EOB resource on one server for example.

- Meta field - you would have multiple EOB resources

00:49 RG - indexing?

RG - approach of DocumentRef vs raw FHIR

VN - preference for raw FHIR. DocRef is more for when you...

RG - more search parameters available

VC - patient's would benefit from having the details. How the...

VC -

00:40
Community Alignment Summary
We hear you!

Objectives:
- Get the most accurate and consumer-friendly estimate possible to a patient in advance of services
- Reduce the burden, where possible, that the estimation process will cause for providers and patients
- We recognize that providers business operational processes will need to change and that both providers and payer systems will need investment to achieve these goals.

Finding a balance between:
- Aligning with claim submission standards and getting as much information as possible to calculate the most accurate estimate to a patient
- Minimum viable data elements for what is known at the time of estimating (may be different based on the patient journey, e.g., request, scheduling, closer to date of service)

This is not easy!
- Our Goal is to define standard FHIR-based methodology for data exchange to support GFEs and AEOBs.
- Technology is here to support the many ways payers and providers will work through their business process.
- Da Vinci has the Opportunity for technical standard IS to be named in future regulation
- We are all Patents and stakeholders of this use case. The Patient experience is a critical component to drive our work.

Reminder to use Raise Hands feature

View potential tickets for discussion (dynamic list) or directly in JIRA Filter Fit-for teleconference tickets

<table>
<thead>
<tr>
<th>Key</th>
<th>Summary</th>
<th>Reporter</th>
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<tbody>
<tr>
<td>FHIR-38842</td>
<td>Patient should be able to search EOBs, not get Bundles</td>
<td>Brendan Keeler</td>
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<tr>
<td>FHIR-35063</td>
<td>polling mechanism in question</td>
<td>Celine Lefebvre</td>
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<tr>
<td>FHIR-38769</td>
<td>Add Operational requirement that there is a 1 to 1 relationship between a GFE and an AEOB</td>
<td>Corey Spears</td>
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<tr>
<td>FHIR-38770</td>
<td>Add Operational requirement that the GFE linked in the AEOB is an exact copy of the provider submitted GFE Bundle</td>
<td>Corey Spears</td>
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<tr>
<td>FHIR-34961</td>
<td>Detailed Requirements Summary</td>
<td>Sam Undine</td>
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5 issues

01:00
FHIR-35063 - marked for in person. CL not present. VC will...
MK - there are other tickets related to polling 35063 and 363

FHIR-35063 - polling mechanism in question
TRAG

FHIR-34825 - Is return type form GFE Submit Appropriate
Feedback requested on call. No verbal responses
Ticket set for ready for vote

FHIR-36408 - Add Supportinginfo Slice for Claim Frequency Code
MK - asking for a slice for claim frequency code.

FHIR-35250 - Use Claim.billablePeriod instead of cre

Chat
FHIR-35063

5 issues

Management
Next Agenda

Adjournment
Adjourned at ET.

Supporting Documents

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<th>Supporting Document</th>
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<td>Meeting Presentation Materials</td>
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Supporting Information Links

Patient Cost Transparency Supporting Materials
- Da Vinci PCT Glossary
- Da Vinci Steering Committee PCT Scope Statement
- Patient Cost Transparency FAQs
- PCT Discovery and Requirements - Example Scenarios
- PCT Phase 2 Planning
- PCT Project Tracking
- PCT Requirements Gathering

Useful Links

CI Build IG: https://build.fhir.org/ig/HL7/davinci-pct/
Github: https://github.com/HL7-DaVinci/test-pct-payer
Zulip for FHIR Community to share feedback: https://chat.fhir.org/#narrow/stream/301151-Da-Vinci.20PCT
PCT Project Tracking - updated to show incomplete action items
PCT JIRA Dashboard: https://jira.hl7.org/secure/Dashboard.jspa?selectPageId=14010

Action items

- Rick Geimer - will put the language together on FHIR-35250

Attendees

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<td>Weill Cornell Medicine</td>
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<td>Rachel Feorster &amp; Associates, Ltd. (RFA)</td>
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