

ELECTRONIC MEDICAL DOCUMENT INTEROPERABILITY (EMDI) DME eRx FHIR Workgroup Meeting Minutes

DATE:	06/25/2019	TIME:	3:00 PM – 4:00 PM ET	
LOCATION:	Teleconference			
DIAL-IN #	+1 (408) 650-3123	ACCES	S CODE:	451 749 677
CHAIR:	Nandini Ganguly (Scope Infotech)	RECOR	DER:	Briana Barnes (Scope Infotech)

Attendees

CMS	AA HOMECARE	AMERICAN COLLEGE OF SURGEONS	Apria
Christopher Lofts	Kim Brummett	Frank Opelka	Kimberlie Rogers-Bower
Ashley Stedding			Zane Schott
BINSON'S	BRIGHTREE	COLONIAL MED	ECLINICAL WORKS
Stephanie Legree	Nick Knowlton	David Bruinsma	Christina Oundjian
			Debora Wade
ELECTROMED	LINCARE	Resmed	Rотесн
Katherine Thompson	Jenna Pederson	Ryan Burke	Joni Moss
THE VAN HALEM GROUP	UNITED HEALTHCARE	SCOPE INFOTECH	ENABLECARE
Wayne Van Halem	Anupam Goel	Pallavi Talekar	Robert Dieterle
		Ray Wilkerson	

Absentees

A DAPT H EALTH	CLAIMSJUDGE	CONTRA COSTA HEALTH	DME Works
Gwen Turner	John Bright	Troy Kaji	Emil Di Motta
	Christina Fox		
	J. Michaels		
	K. Weathers		
Hoveround	LIBERTY MEDICAL SPECIALTIES	NATIONAL PARTNERSHIP FOR WOMEN & CHILDREN	
Debra Silvers	David Chandler	Erin Mackay	

MINUTES

1. Welcome and Introduction

- a. The host of the DME eRx Workgroup, Nandini Ganguly, provided an overview of the agenda for the workgroup on 06/25/2019. This workgroup will consist of a 'meet and greet' with the workgroup participants, an overview of the DME eRx pilot program, and next steps for the participants.
- b. The CMS and Scope Infotech teams provided introductions:
 - i. Christopher Lofts: The CMS Contracting Officer's Representative (COR) for the EMDI program. He is a Registered Nurse (RN) who has worked with CMS for the past five years.
 - ii. Pallavi Talekar: Project manager who has worked in the EMDI program for the past three years.
 - iii. Ray Wilkerson: Senior business analyst who has worked in the EMDI program for the past four years. He also hosts the EMDI Workgroup.
 - iv. Nandini Ganguly: Business analyst and the host of the DME eRx Workgroup.
 - v. Briana Barnes: Project coordinator who has worked on the EMDI program for about two years.
 - vi. Bob Dieterle: Subject Matter Expert for interoperability and one of the founders of the Da Vinci Project and the Office of the National Coordinator (ONC) Fast Healthcare Interoperability Resource (FHIR) At Scale Taskforce.
- vii. Kishan Patel: Intern on the EMDI team who is interested in learning more about interoperability.
- 2. Meet and Greet

		Minutes		
a.	All work	group participants provided background information about their organizations and what they would like		
	to succeed in the DME eRx program:			
	i.	AA Homecare: A national association that represents DME suppliers. AA Homecare is also involved in		
		the Document Requirement Look-Up Service (DRLS). Although they are doing minor work with		
		interoperability, they are interested in DME eRx. They are interested in learning more about FHIR to		
		understand the workflow.		
	ii.	American College of Surgeons: An association that focuses on health policies. They are involved with		
		working on interoperability solutions to resolve issues with Electronic Health Records (EHRs) and		
		clinical and patient workflows. They would like the opportunity to understand how digital information		
		can be enhanced in DME interoperability. They are interested in learning more about FHIR.		
	iii.	Colonial Medical: They are national DME suppliers located in Orlando, Florida. David Bruinsma has		
		experience in developing software and has worked on electronic prescribing for a few years.		
	iv.	Rotech: A national health DME provider and is interested in the DME workflow (i.e., digitizing,		
		automating, and transferring information). They have worked with clearinghouse providers, and a		
		gateway for claims. They also done interoperability work with the Department of Veteran Affairs (VA). Joni Moss has pharmacy and prescription drug monitoring (PDM) experience. Joni Moss		
		recommended to make the sure that the appropriate organizations attend the workgroup to make it		
		become more productive. Joni Moss is interested in having a FHIR session, and although she is not		
		technical, she can have someone from her team to join the discussion on FHIR.		
	٧.	United Healthcare: A payer that is interested in improving the electronic workflow for DME. United		
		Healthcare participated in the Da Vinci Project for prior authorization. Anupam Goel is interested in		
		learning more about FHIR and pain points for supplying DMEs.		
	vi.	Binson's: A DME supplier that has a relationship with GoScripts. Stephanie Legree would like to have		
		more education on FHIR.		
	vii.	Brightree: The leading cloud-based solution and service provider in the Home Medical Equipment		
		(HME) industry. They are already involved in electronic prescribing and they work with three EHR		
		vendors. Brightree would like to increase the adoption of DME eRx to ease provider burden.		
	viii.	eClinical Works: An EHR software company that works with small and large practices across the United States. eClinical Works use interoperability to transmit information via Health Level Seven		
		(HL7) standards (i.e., FHIR) and their Electronic Health eXchange (eEHX). eClinical Works work with		
		SureScripts interface team to monitor ePrescriptions. Debora Wade explained that there are many		
		challenges with DME eRx and electronic transmission script standards. eClinical Works looks forward		
		to working with other organizations to resolve these challenges and for their customers to receive		
		products electronically. Debora Wade would like to advocate having an electronic DME workflow.		
	ix.	Apria: Has a sister company called DME Hub. They have worked with Allscripts since 2012 and have		
		relationships with DME vendors. The Apria and DME Hub goal is to work toward the commonality and		
		camaraderie of adding value to electronic workflows for DMEs. They are also hoping to expand their		
		workflows to non-medical DMEs. Zane Schott has FHIR, health information exchanges, ePrescribing,		
		lab orders, and pharmacy experience. Kimberlie Rodgers-Bowers has been in the industry for the past		
		30 years, and she would like to like to eliminate paper and fax machine for the DME workflow. It was		
	v	noted that DME Hub is working in the interoperability space for ePrescribing and lab orders. Lincare: A DME supplier that has been involved in the eClinical Templates pilot. They are interested in		
	Х.	learning technical information about the DME orders.		
	xi.	The Van Halem Group: It is an Atlanta, Georgia-based healthcare consultancy that was founded in		
		2006. The Van Halem Group merged with the VGM Group in 2016. They have worked with CMS		
		contractors in claims integrity and appeals. They also work with healthcare providers, law firms, and		
		government agencies on document appeals and compliance. They consider themselves a large entity		
		in the DME supplier world. Wayne Van Halem would like to improve the ordering process and		
		encourage all entities that are participating in the DME eRx Workgroup to go electronic.		
	xii.	Electromed: A DME manufacturer that does not have a certified Meaningful Use software, but they		
		would like to learn how to become interoperable using FHIR and other identified health IT standards.		
		They are also interested in making the DME ordering process easier for providers to receive		
		documents.		

		Minutes			
3.	DME eRx Pilot Overview				
	a.	Pallavi Talekar provided an overview of the DME eRx pilot program. This overview outlines:			
		i. Information about Interoperability and EMDI			
		ii. The EMDI Initiative: The initiative is a part of the CMS Center for Program Integrity (CPI) and the			
		Provider Compliance Group (PCG). It consists of three types of pilots (EMDI, eClinical Template, ar			
		DME eRx pilots).			
		iii. The goals, initiatives, regulations, and legislations that align with the EMDI initiative.			
		iv. The challenges of the DME order process.			
		 The EMDI use cases and the use case that will focus on the DME eRx FHIR pilots. 			
		vi. The benefits of the DME eRx pilot program.			
		vii. The approaches for DME eRx (i.e., HL7 FHIR-based DME Order Implementation Guide, open-sour			
		SMART on FHIR App, and the testing of the IG and the app through DME eRx pilots).			
		viii. The difference between an EMDI pilot and a DME eRx pilot.			
		ix. The entities involved in a DME eRx pilot (i.e., service ordering provider, EHR, supplier health			
		information technology (HIT), service rendering provider).			
		x. The DME eRx pilot workflow using the SMART on FHIR App and DME Hub.			
		xi. The expectations of a DME eRx pilot participant.			
		xii. The timeline for DME eRx Pilot Program (i.e., Pilot participants can begin implementing a pilot in			
		October 2019).			
		xiii. Scope Infotech's role in the EMDI initiative.			
4.		xt Steps			
	а.	Nandini Ganguly explained that the DME eRx will be a collaborative platform for participants to provide update			
		ideas, and concerns. The participants can email the EMDI team at EMDI_TEAM@scopeinfotechinc.com if the			
	Ŀ	have any questions.			
	b.	Nandini Ganguly explained the next steps for participants:			
		i. Fill out EMDI Program Participation Request Sheet (a non-legal agreement).			
		ii. Review EMDI Documentation (Pilot Guide).			
		iii. Review EMDI Measures (Pre- and post-pilot measures).			
		iv. Review EMDI Websites (The EMDI Collaboration website consists of all pilot information. The conte for DME eRx will be added to this website soon).			
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	•	v. Schedule a one-on-one detailed workflow discussion			
	C.	The next DME eRx Workgroup will be on Tuesday, 07/23/2019. Bob Dieterle will be presenting a session that provides an overview on FHIR.			

DECISIONS MADE

1. None.

Ris	KS
1.	None discussed.

Iss	ISSUES				
1.	lone noted.				

Al#	ACTION ITEMS	RESPONSIBLE PERSON	DUE DATE
	None noted.		

* Action Item numbers are assigned from an internal-facing list and may not be sequential between meetings.

Next Meeting: Tuesday 07/23/2019, 03:00 PM ET