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| **HL7 Attachments Working Group Meeting Minutes**  **Location: Phoenix, AZ** | | | | **Date: January 14, 2013 Time: 9:00 – 5:00** | | |
| **Facilitator** | | Jim McKinley | | **Note taker(s)** | | Penny Probst |
|  | | | | | | |
| **Quorum Requirements Met:**  Yes | | | | | | |
|  | | | | | | |
| **First Name** | | **Last Name** | | **Affiliation** | |
| Bill | | Alfano | | BCBSA | |
| Ginger | | Belvin | | BCBSAL | |
| Laurie | | Burckhardt | | WPS | |
| Mary Lynn | | Bushman | | National Government Services | |
| Patrick | | Cannady | | American Dental Association | |
| Jennifer | | Collins | | VIPS, INC | |
| Durwin | | Day | | HCSC **\*\*\*co-chair\*\*\*** | |
| Kari | | Gaare | | CMS-OESS | |
| Craig | | Gabron | | PGBA **\*\*\*co-chair\*\*\*** | |
| Robin | | Isgett | | BCBS of SC | |
| Jim | | McKinley | | BCBS-AL **\*\*\*co-chair\*\*\*** | |
| Debbi | | Meisner | | Emdeon Business Services | |
| Kim | | Nolen | | Pfizer | |
| Penny | | Probst | | Highmark, Inc | |
| Larry | | Shorey | | BCBS of SC | |
| Walter | | Suarez | | Kaiser Permanente | |
| Sue | | Thompson | | NCPDP | |
| Jim | | Whicker | | Kaiser Permanente | |

**Agenda Topics**

1. Review Agenda
2. Ballot Statistics
3. Industry Updates
4. Ballot Comment Reconciliation

Supporting Documents

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Minutes/Conclusions Reached:

1. Review Agenda

* The majority of the week will be spent responding to ballot comments
* SDWG has a task force for implementation questions. The AWG will send representation to participate in that
* Q2 Monday will be a discussion of Work Group Health
* Q2 Tuesday will be a discussion of training/outreach/next steps
* The scheduled S&I presentation may not occur because Rachel is not here. Ballot Statistics

1. Ballot Statistics

* Our Ballot is Informative
* Ballots received: 41 Approve, 5 Negative, 88 Abstain, 21 no vote, total 155
* We met quorum and the approval minimum (28)
* WE have to work on the 5 negative votes
* Substantive comments were minimal
* Keith is coming Wednesday Q3 to discuss his negative vote and comments.
* After all negative comments have been addressed and the votes changed to positive, it can be submitted for publication

1. Industry Updates

* WEDI update – Mary Lynn Bushman
  + The Attachments WG created nine recommendations to submit to the WEDI board to be included in the testimony. (see supporting documents above)
  + WEDI is recommending the use of the X12 transactions. They are not recommending acknowledgements because they are trying to determine best approach for acknowledgements at the application level.
  + The WEDI workgroup felt strongly that the post pay audit and referrals be included.
* NCVHS – Walter Suarez
  + The new leadership is taking a step back to look at the larger picture for information exchanges for different purposes
  + In November a round table was convened with 30+ leaders from different parts of the industry to discuss the future of the exchange of data between payers and providers and the concept of the convergence of administrative and clinical data. The first point of convergence is Attachments. The expectation is that we are ready to look at this from a very different perspective.
  + 2/27/13 Subcommittee Hearing: A half day will be devoted to attachments. There will be 2 panels: 1) updates from SDOs (HL7, NCPDP, LOINC, Operating Rules development group, etc.),and 2) industry input (ONC, WEDI, Clearinghouses, etc.) . The afternoon will be spent debriefing the subcommittee.
  + It is expected that the observations will be turned around quickly.
  + Walter is working on specific questions for testifiers that he expects to get out this week
  + The next full NCVHS meeting is in June, but the plan is to schedule a meeting before that to discuss the recommendations from the hearing
  + There was discussion about the ability to add additional attachment types not mentioned in the ACA.
  + It was noted that there is a concern about creating Operating Rules for attachments since the standard has not yet been released.
* S&I Framework – Durwin Day
  + The esMD project was reviewed
  + The Transition of Care Companion Guide is posted
  + Automated Blue Button (ABB): Blue plans have automated the PHR based on CCD. The ABB group is aware of it and meetings have been held to discuss it. Discussions will continue

1. Ballot Comment Reconciliation

* link to the full ballot comments: <http://www.hl7.org/documentcenter/public/wg/tsc/Ballot_Results_2013JAN.zip>
* The final ballot response sheet will be posted on the HL7 site
* Comments 1 – 34 were reviewed with the final results
  + Persuasive (The WG has accepted the ballot comment as submitted and will make the appropriate change): 1,3, 4, 6, 9, 33, 34
  + Persuasive with mod (The WG believes the ballot comment has merit, but has changed the proposed solution):2, 8,
  + Non-Persuasive (The WG does not believe the ballot comment has merit or is unclear): 5,7, 10, 11,12,13,14, 32
  + Non-Persuasive with mod(The comment was considered non-persuasive by the WG; however, the WG has agreed to make a modification to the material based on this comment): 31
* Discussion about the inclusion of guidance for MIME and Base64
  + This is currently addressed in the C-CDA Appendix I, which was cut and pasted from the AIS and references guides that may no longer exist. There is nothing in C-CDA that points to Attachments Supplement.
  + Interim Solution: ask SDWG to remove it and use the version in our guide
  + No one in the room has MIME or Base 64
  + Background: A pilot implementation encountered issues related to this. Keppa, Wes, et al were working on a white paper about this but it never was completed. Mary Lynn sent a draft to Jim.
  + There are issues with different versions of the standards. Research was done on which RFC’s would be best to be used. C-CDA uses MIME 2.57. It is not clear if it is the most recent version or the best to use.
  + It is important to include the version in the guide.
  + We need MIME expertise. Mary Lynn will try to reach Keppa and Rachel for more information.
* Discussion on comment 2, LOINC terms of use for formal names
  + It was suggested that a link be added, rather than embed the information
  + Options: 1) add appendix table that will have to be maintained, 2) add description/long common name in line or 3) take option 1 and 2 to other co-chairs to determine if a standard methodology should be use.
  + Using a separate table would require maintenance and could easily become out of sync
  + Straw poll suggestion: pick option 1 or 2 and take to co-chairs to let them know that this is what we are doing. The consensus is to include long common name inline
  + WG Resolution:
    - With tables 6 and 7, it appears the ‘meaning’ column includes the LOINC long name, this will be bolded.
    - Table 4: add column to table
    - In section 4.4, example LOINC codes will be left without the name.
    - Page 27: add (Discharge Summary) after LOINC code
  + WG Vote: Motion to approve the WG Solution approved 14-0-0
* Discussion on comment 7, suggestion to identify a truly unsolicited attachment
  + There was much discussion about including this in the Attachments Standard. It was suggested that this be in the regulation or operating rule
  + Sue made a motion that we determine this to be not persuasive and provide commenter with our explanation to not include the changes in the guide.
    - Deb second
    - Discussion: Bill has letter from NCVHS on Attachments that included definitions of solicited/unsolicited. This will most likely make it into the rule.
    - Vote: 6-4-2

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| Actions   * **Mary Lynn and Craig:** Reach out to Keppa and/or Rachel for RFC information |

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| **HL7 Attachments Working Group Meeting Minutes**  **Location: Phoenix, AZ** | | | | **Date: January 15, 2013 Time: 9:00 – 5:00** | | |
| **Facilitator** | | Jim McKinley | | **Note taker(s)** | | Penny Probst |
|  | | | | | | |
| **Quorum Requirements Met:**  Yes | | | | | | |
|  | | | | | | |
| **First Name** | | **Last Name** | | **Affiliation** | |
| Bill | | Alfano | | BCBSA | |
| Laurie | | Burckhardt | | WPS | |
| Mary Lynn | | Bushman | | National Government Services | |
| Patrick | | Cannady | | American Dental Association | |
| Jennifer | | Collins | | VIPS, INC | |
| Laurie | | Darst | | Mayo Clinic | |
| Durwin | | Day | | HCSC **\*\*\*co-chair\*\*\*** | |
| Kari | | Gaare | | CMS-OESS | |
| Craig | | Gabron | | PGBA **\*\*\*co-chair\*\*\*** | |
| Robin | | Isgett | | BCBS of SC | |
| Mary Kay | | McDaniel | | Cognosante | |
| Jim | | McKinley | | BCBS-AL **\*\*\*co-chair\*\*\*** | |
| Debbi | | Meisner | | Emdeon Business Services | |
| Penny | | Probst | | Highmark, Inc | |
| Larry | | Shorey | | BCBS of SC | |
| Sue | | Thompson | | NCPDP | |
| Daniel | | Vreeman | | Regenstrief | |
| Jim | | Whicker | | Kaiser Permanente | |

**Agenda Topics**

1. Ballot Comments Reconciliation
2. Review Changes to LOINC website (Daniel Vreeman)

Supporting Documents

Attached above

Minutes/Conclusions Reached:

1. Ballot Comments Reconciliation

* Comments 35 - 77 (excluding 61 – 68, which will be addressed on Wednesday) were reviewed with the final results:
  + Persuasive (The WG has accepted the ballot comment as submitted and will make the appropriate change): 36,37, 39 – 46, 54, 59, 71 - 77
  + Persuasive with mod (The WG believes the ballot comment has merit, but has changed the proposed solution): 38, 49,50, 53, 56, 58
  + Non-Persuasive (The WG does not believe the ballot comment has merit or is unclear): 47, 48, 52, 55, 57, 60, 69, 70
  + Non-Persuasive with mod(The comment was considered non-persuasive by the WG; however, the WG has agreed to make a modification to the material based on this comment): 35, 51
* Discussion on comment 51: use of X12 Standards recommendation
  + The general consensus is that we don’t want to limit to X12 but we may be understating it.
  + There was discussion as to the industry impacts of multiple options in the regulations.
  + Sue moved to resolve this as not persuasive with mod
    - Craig second
    - Vote 8-0-0
* Discussion on comment 52: syncing of LOINC database.
  + Since it’s a dynamic set, it doesn’t make sense to try to include all codes in the document
  + There could be an issue if the C-CDA says a code is invalid for C-CDA but it’s on the Attachments code list as valid.
  + Any discrepancy between database and guide would be addressed by us.
  + It would be wise to share this with the new C-CDA task force so it can be included in their efforts
  + Sue moved to accept disposition of not persuasive
    - Penny second
    - Vote: approved 8-0-0
* Discussion of comment 53: use of unstructured document.
  + Will be addressed through the MIME/Base64 actions discussed yesterday
  + Depending on the RFC version, issues may be resolvable in house
  + Section 3.9.2 of C-CDA explains a lot of this, but is out of sync with the appendix
  + Jim assigned Craig and Mary Lynn to research and present findings to the WG on a call
  + C-CDA does reference some RFCs, but they may not be the most recent. Changes may be needed to C-CDA. If the current version is mandated, the RFCs in it will have to be used.
  + Sue moved to accept disposition of Persuasive with mod with modifications TBD at later date
    - Penny second
    - Vote: 8-0-0
* Discussion of comment 54: expand various mechanisms in section 7.2.
  + A link or list of examples is needed for this.
  + Dan will get that to Jim.
* Discussion of comment 56: Appendix A Metadata requirements
  + Wordsmithed the section
  + We are not necessarily at the point to speak to the applicability of acknowledgements for this transaction.
  + There is a concern that if the Operating Rules determine the acknowledgements, there will be no WG input or control.
  + We should come up with high level metadata that should have error acknowledgements.
  + Laurie B will work with Tam to see if she can come up with levels of errors.
  + Sue moved to accept disposition of Persuasive with mods with changes made and future changes upon receipt of additional metadata for attachments
    - Penny second
    - Vote: 8-0-0
* Discussion of comment 57, CDA size limits
  + This had to do with an issue in the BIN identified at X12. This may no longer be an issue.
  + Sue moved to accept the disposition of not persuasive
    - Penny second
    - Vote: 8-0-0
* Discussion of comment 58: better CDA validation
  + Discussed requiring vs recommending
  + The data has to go through schema to determine valid and well formed
    - Xml conformance
    - C-CDA conformant
    - Non-xml body (jpg, tif, doc)
  + Sue moved to accept disposition of Persuasive with mod contingent on receipt of list of referenced sited
    - Penny second
    - Vote: 8-0-0
* Discussion of comment 59: allow for unstructured documents when structured exists
  + It was agreed to use language that is in C-CDA
  + Sue moved to accept the disposition of Persuasive
    - Penny second
    - Vote: 8-0-0
* Discussion of comment 60: industry practices reference needs stronger language
  + This may be crossing the line into policy
  + We should be silent on this
  + Perhaps it should it be named in regulation or operating rules

1. Review Changes to LOINC website (Daniel Vreeman)

* There are 3 ways to identify LOINC codes valid for attachments
* It is a great tool for finding the codes
* We have to confirm if the tab should be ‘HIPAA’ or ‘ACA’. We’ll let Daniel know and he will update as needed
* By the end of next year the database will migrate to a csv format and phase out the tab delimited format
* Search.loinc.org has the most recent database of codes and is the easiest way to search the codes

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| Actions   * **Daniel** will get information for comment 54 to Jim * **Jim** will notify Daniel of correct tab name (HIPAA/ACA) * **Laurie** will work with Tam to identify error levels for metadata acknowledgments |

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| **HL7 Attachments Working Group Meeting Minutes**  **Location: Phoenix, AZ** | | | | **Date: January 16, 2013 Time: 9:00 – 5:00** | | |
| **Facilitator** | | Jim McKinley | | **Note taker(s)** | | Penny Probst |
|  | | | | | | |
| **Quorum Requirements Met:**  Yes | | | | | | |
|  | | | | | | |
| **First Name** | | **Last Name** | | **Affiliation** | |
| Bill | | Alfano | | BCBSA | |
| Laurie | | Burckhardt | | WPS | |
| Mary Lynn | | Bushman | | National Government Services | |
| Jennifer | | Collins | | VIPS, INC | |
| Laurie | | Darst | | Mayo Clinic | |
| Durwin | | Day | | HCSC **\*\*\*co-chair\*\*\*** | |
| Kari | | Gaare | | CMS-OESS | |
| Craig | | Gabron | | PGBA **\*\*\*co-chair\*\*\*** | |
| Robin | | Isgett | | BCBS of SC | |
| Jim | | McKinley | | BCBS-AL **\*\*\*co-chair\*\*\*** | |
| Debbi | | Meisner | | Emdeon Business Services | |
| Penny | | Probst | | Highmark, Inc | |
| Larry | | Shorey | | BCBS of SC | |
| Corey | | Spears | | Aetna | |
| Sue | | Thompson | | NCPDP | |
| Daniel | | Vreeman | | Regenstrief | |
| Jim | | Whicker | | Kaiser Permanente | |
| Sherri | | Wilson | | Jopari | |

**Agenda Topics**

1. Work Group Health (Craig)
2. Ballot Reconciliation
3. NCVHS Hearing email
4. Other

Supporting Documents

Attached above

Minutes/Conclusions Reached:

1. Work Group Health (Craig)

* Reviewed the metrics for Work Group Health and what is needed to meet each one
* Harmonization Participation: Robin is attending these meetings
* SWOT update
  + Sue made a motion to approve the SWOT as updated
  + Sherry second
  + Discussion: none
  + Vote: approved 12-0-0
* Mission and Charter
  + Sue made a motion to approve the SWOT as updated
  + Debbi second
  + Discussion: none
  + Vote: approved 13-0-0
* DMP
  + Mary Lynn made the motion to approve the use of the default template with the additional comment that the WG should review the document and provide feedback if substantive changes should be made
  + Sue second
  + Discussion: none
  + Vote: approved 13-0-0
* Periodontal Guide:
  + There is an option to post the draft guide for comments. Then it could be sunset if there are no comments
  + We do not have the finalized reconciliation sheet
  + The LOINCs have been identified and defined but the request has not been made to add them to the LOINC database

1. Ballot Reconciliation

* Comments 78 – 138 and 61 - 68 were reviewed with the final results:
  + Persuasive (The WG has accepted the ballot comment as submitted and will make the appropriate change): 78 – 80, 82 – 90, 92 – 102, 104, 61 – 63, 65 – 68, 105 – 124, 126 - 138
  + Persuasive with mod (The WG believes the ballot comment has merit, but has changed the proposed solution): 81, 91, 103
  + Non-Persuasive (The WG does not believe the ballot comment has merit or is unclear):
  + Non-Persuasive with mod(The comment was considered non-persuasive by the WG; however, the WG has agreed to make a modification to the material based on this comment):
  + Withdrawn: 64, 125
* Discussion of comment 61: use existing clinical documentation associated with an encounter in exchanges with payers, rather than generate a document specifically for a payer.
  + There are cases where information will be assembled but want to make clear that if it exists, that information will be used
  + Suggest changing ‘assemble’ to ‘exchange’ and add a sentence about using existing information
* Discussion of comment 62: need more info in the history
  + This is just a suggestion. It’s important to note that this falls under two rules and at the least there should be a reference ACA
  + Jim will make future changes
* Discussion of comment 63: section 2.6.5 is rather complex
  + Keith suggested ‘When the attachment is unsolicited, they use the attachment ID in both the attachment and the X12 wrapper, but when the attachment is solicited, the attachment id appears only in the wrapper.’ As a summary of the table.
  + This will be wordsmithed and added as discussed
* Discussion of comment 65: use official HL7 name of document
  + Title is from DSTU site: IHE Health Story Consolidation (per Keith)
* Discussion of comment 66: comment about unstructured document using style sheet
  + Statement is correct for ascii text only. Other formats may require additional tools to render them.
  + A footnote or explanatory text for this will be added. Keith will send the information if Jim sends an email requesting this.
* Discussion of comment 67: change wording for structured ‘preferred’ and ‘additional’ LOINC codes in section 4.4.2
  + Discussion about how LOINC codes will be used in the unsolicited model. Keith recommended that it should be the Preferred code, others may be sent or SHALL send code in the C-CDA (which would assume the sender is following the C-CDA rules).
  + Modified the section to clarify LOINC code usage for structured and unstructured document types
  + Placeholder: discuss LOINC codes for the P&C industry. There was discussion about the process.
* Discussion of comment 68: no discussion of MIME or Base64
  + This is addressed in Appendix I, but may need updating
  + Keith advised to be careful to select the correct information when researching this because there is a lot of history and discussions.
* Keith’s input for comment #58
  + From the HL7 perspective, there are the Trifolia tools. For MU there are more stringent rules through NIST certification
  + For payer’s key issues, look at conformance to NIST instead of structured documents. Could say ACB certification (already in place) is required for clinical documents. If reference anything, reference NIST.
  + Being an EHR vendor is not a requirement to use NIST.
  + It is suggested that we provide references not recommendations.
* Block vote on Keith’s comments (61 – 68):
  + Keith moved to approve resolution as recorded
  + Durwin second
  + Vote: carried unanimously 16-0-0

1. NCVHS Hearing email

* HL7 (John Quinn) will be first to speak
* Dan Vreeman will speak about the LOINC database
* X12, NCPDP, CORE, ONC, BCBSA, WEDI will also speak
* The proposed questions were reviewed

1. Other

* Plan to continue the Thursday project calls to address outstanding comment resolution
* Property &Casualty has 9 report type codes mandated. Sherry sent the list to Jim and Durwin. She will send descriptions as well.

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| Actions   * **Jim** email Keith Boone requesting language for tools needed to render unstructured documents * **Jim** email Keith Boone requesting list of certification references |

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| **HL7 Attachments Working Group Meeting Minutes**  **Location: Phoenix, AZ** | | | | **Date: January 17, 2013 Time: 9:00 – 5:00** | | |
| **Facilitator** | | Jim McKinley | | **Note taker(s)** | | Penny Probst |
|  | | | | | | |
| **Quorum Requirements Met:**  Yes | | | | | | |
|  | | | | | | |
| **First Name** | | **Last Name** | | **Affiliation** | |
| Jennifer | | Collins | | VIPS, INC | |
| Durwin | | Day | | HCSC **\*\*\*co-chair\*\*\*** | |
| Kari | | Gaare | | CMS-OESS | |
| Craig | | Gabron | | PGBA **\*\*\*co-chair\*\*\*** | |
| Robin | | Isgett | | BCBS of SC | |
| Jim | | McKinley | | BCBS-AL **\*\*\*co-chair\*\*\*** | |
| Penny | | Probst | | Highmark, Inc | |
| Larry | | Shorey | | BCBS of SC | |
| Sue | | Thompson | | NCPDP | |
| Jim | | Whicker | | Kaiser Permanente | |

**Agenda Topics**

1. Ballot Reconciliation
2. SDWG Task Force
3. Next Steps
4. September Meeting Conflict
5. Parking Lot Item Discussion

Supporting Documents



Minutes/Conclusions Reached:

1. Ballot Reconciliation

* Comments 140 - 170 were reviewed with the final results
  + Persuasive (The WG has accepted the ballot comment as submitted and will make the appropriate change): 140,141, 145 – 149, 151 –153, 155, 158, 163, 164, 166 - 169
  + Persuasive with mod (The WG believes the ballot comment has merit, but has changed the proposed solution): 154, 155, 157 ,159
  + Non-Persuasive (The WG does not believe the ballot comment has merit or is unclear):142, 150
  + Non-Persuasive with mod(The comment was considered non-persuasive by the WG; however, the WG has agreed to make a modification to the material based on this comment):
  + Previously addressed: 142, 143, 156,160 – 162, 165
* Vote for comment 153: wording change
  + Penny moved to approve as modified
  + Sue Second
  + Vote: 8-0-0

1. SDWG Task Force

* There will be a pilot for responding to questions
* The AWG will continue to monitor the task force activities

1. Next Steps

* Jim will make the outstanding updates to the supplement
* The WG will then review
* The ballot reconciliation will be submitted to HL7 and negative commenters will be contacted.
* After approval, ready for publication

1. September Meeting Conflict with X12

* We may consider an out-of-cycle meeting, maybe piggy backed onto X12
* Could have our WG meet only Wed – Friday. Would have to have a substitute scribe.
* This will be re-assessed at the May meeting

1. Parking Lot Item: Discussion about modifiers limited to claims only (table 6)
   * Some codes only make sense for claims and not for auths/referrals
   * If we need to update the modifier guide, we would need to submit a project
   * This is based on Daniel’s comment about use of long name where revisions to Modifiers Long Common Name on the DB were being restated to have them fit the more expanded concept of attachments to include beyond just “claims”.
   * Changes would have to be made in the database then updated in the supplement
   * Table 6
     + 18789-8 Include all data of the selected type within the date window associated with the ~~claim~~ service (e.g., tests performed during a hospital stay or a note written to describe a clinic visit). This is the default value; it will be assumed if no time window modifier code is included.
     + 18790-6 Include all data of the selected type on or before the date of service ~~on the claim~~ (e.g., a pathology report to verify the diagnosis for the claim, or per-operative test results.)
     + 18791-4 Include all data of the selected type within or aligned to ~~an encounter by the same claim or encounter number~~ service (e.g., Radiology report for test performed during a visit or ordered during the visit and performed within five days).
     + 18792-2 Include all data of the selected type on or after the date of service ~~of the claim~~ (e.g., status on follow-up).
     + 18803-7 Include all data of the selected type that represents observations made 30 days or fewer before the starting date of service ~~for the claim~~.
     + 18804-5 Include all data of the selected type that represents observations made three months or fewer before the starting date of service ~~for the claim~~.
     + 18805-2 Include all data of the selected type that represents observations made six months or fewer before the starting date of service ~~for the claim~~.
     + 18806-0 Include all data of the selected type that represents observations made nine months or fewer before the starting date of service ~~for the claim~~.
     + 18807-8 Include all data of the selected type that represents observations made one year or less before the starting date of service ~~for the claim~~.
     + 53033-7 Include all data of the selected type that represents observations made two years or less before the starting date of service ~~for the claim~~.
     + 18793-0 Use no fixed time limit on data—any of the selected type are relevant no matter when obtained.
   * Table 7
     + 18794-8 Send all items of the specified type within the time window (e.g., if the request is for serology results, send all serology results for test made during the time window, including repeats). This is the default value; it will be assumed if no time window modifier code is included.
     + 18795-5 Send all items of the specified type within the time window relevant to the ~~claim~~ service (e.g., if the request is for CT scans, send only the ones that verify the diagnosis on the claim and do not send repeats within the time window).
     + 18796-3 Send all abnormals within the time window (e.g., if the request is for hematology results, send only the ones that were abnormal, including repeated administration of the same test in the time window).
     + 18797-1 Send the first abnormals within the time window (e.g., if the request is for hematology results, send the first of each kind of observation that is abnormal, but do not send repeated results of the same test in the time window).
     + 18798-9 Send the last abnormals within the time window (e.g., if the request is for hematology results, send only the most recent of each kind of observation within the time window that is abnormal).
     + 18800-3 Send the worst abnormal result for each kind of observation in the time window (e.g., if the request is for serology results, send the first of each kind of serology result within the time window, but do not send the results of subsequent repetitions of the same tests).
     + 18799-7 Send the first (i.e., oldest) result for each kind of observation in the time window (e.g., if the request is for serology results, send the first of each kind of serology result within the time window, but do not send the results of subsequent repetitions of the same tests).
     + 18802-9 Send the last (most recent) within the time window (e.g., if radiology reports are requested, with no further specificity, send the only the report that includes the last radiology exam done during the time period).

Adjourned 12:30 PM MT

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| Actions |
| Next Meeting / Preliminary Agenda Items  2/5/2013 2:30 – 4:00 ET  Phone Number: +1 770-657-9270, Participant Passcode: 8632591   * WGM Follow Up * Action Item follow up | |