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| HL7 Financial Management Work Group Meeting Minutes  |
| September 23-27, 2013, Cambridge, MA |
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**Monday, September 23, 2013**

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| Financial MgmtLocation: RM 211 | Date: 2013 09 23Time: Q4 |
| Facilitator |  | Note taker(s) | Paul Knapp |
|  |
| Attendee | Name | Affiliation |
|  | Kathleen Connor | Edmond Scientific / Veterans Affairs |
|  | Beat Heggli | HL7 Switzerland, Netcetera |
| X | Paul Knapp | Knapp Consulting Inc. |
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| **Quorum Requirements Met:** [ ]  Yes / No – Not Applicable |

**Agenda Topics Q4**

Unfortunately the room was booked for Sunday September 22 and so posted in the meeting guide and the confusion inhibited achievement of quorum for this quarter.

Housekeeping

* Reviewed Agenda, work items for the week and FM docs Mission, Charter, SWOT.

No motions required and lack of quorum.

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**Wednesday, September 25, 2013**

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| Financial ManagementLocation: RM 212 | Date: 2013 09 25Time: Q3 |
| Facilitator |  | Note taker(s) | Paul Knapp |
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| Attendee | Name | Affiliation |
| X | Kathleen Connor | Edmond Scientific / Veterans Affairs |
| X | Beat Heggli | HL7 Switzerland, Netcetera |
| X | Paul Knapp | Knapp Consulting Inc. |
| X | Wael Al Dahhasi | CCHI wael@cchi.gov.sa |
| X | Jay Zimmerman | CCHI jayzim@telus.net |
| X | Mark Tucker | mtucker@regenstrief.org |
| X | Dale Nelson | Dale.nelson@lantanagroup.com |
|  |
| **Quorum Requirements Met:** [ ]  Yes / No – Not Applicable |

**Agenda Topics Q3**

1. Approved WGM Agenda
2. No changes to the Mission and Charter or SWOT were proposed. The current versions of these documents continue to be in force.
3. Review of V2.8 Ballot:

Beat reported that the V2.8 changes are expected to be completed and the document published this fall. Any new changes or requirements will be brought forward and considered at the January 2014 WGM.

1. Review of Knapp’s FHIR Connectathon draft claims application to illustrate and contrast claim messages in FHIR and V3.

The committee recognized and welcomed Eng. Wael Al Dahhasi, the Electronic Transactions Program Director for the Council of Cooperative Health Insurance (CCHI) in Saudi Arabia, and Mr. Jay Zimmerman, long-time HL7 member and V3 consultant, who has been working with CCHI to define the HL7 V3 Claims and related messages to meet the CCHI program needs. Their specific requirements will be the topic of Q4.

As part of the FHIR Connectathon activities, Paul Knapp developed an application, client and server (.NET), to implement, test and illustrate FHIR Message in general and FHIR eClaims exchange in particular. The exchange paradigm and the draft Message, Claim, Remittance and Coverage resources were reviewed. The relative ease of implementation, and therefore also ease of change, was highlighted, The wire formats of the FHIR messages were compared to current V3 wire formats to illustrate the reduction of complexity and size found with FHIR messages.

While not (yet) a formal FHIR term, the term ‘Composites’ is used below to refer to situations where the material to be exchanged to meet some business purpose is not simply a single resource such as a Patient or an Observation, but in fact is a cluster of Resources where the Resource types and profiles. Currently FHIR has defined two types of Composites: Messages and Documents. To meet many complex data exchanges, such as in a request-response scenario, a defined composite will be created to meet a business need, then behavior of the receiver upon receiving that composite will be prescribed and the composite or composite choices will be determined to respond to the original request. For example to facilitate the conduction of laboratory test a Lab Order Message (Message + Lab Order + Patient + suite of Test resources) and sent to a Lab which may respond with and Outcome resource if there are errors, or with a Lab Response Message (Message + Lab Response + suite of Test and Observation resources).

Paul Knapp reported that he had been appointed to the FHIR Management Group and as such he would be helping to guide the organization and domain work groups in the development, balloting and support for FHIR resources and methodology. He reviewed that although the core FHIR team had constructed many of the original resources to stand-up a model quickly which others could then review, the ultimate responsibility for resources, with the exception of a few infrastructural resources, remained with the domain committees themselves. So the Message resource, which is of interest to FM for construction of Message Composites (collections of resources to accomplish a business purpose) belongs to INM in the same way that V3 wrappers and the V2 MSH segments are the content model which serve the same informational purposes belong to INM. The RESTful protocol and data types fall under the ITS Work Group, the prescription under Pharmacy Work Group, etc.

The FHIR artifacts for which FM will be responsible include any resources required to implement Accounts, Billing and eClaims, such as Claim, Remittance, EOB, and Coverage resources, and the Message Composites to address the Account, Billing and eClaims area similar to those which the committee already has developed for the V2 and V3 standards. FM is also responsible for working with other committees to develop and support resources which are used by FM but fall under the responsibility of other committees.

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| X | Kathleen Connor | Edmond Scientific / Veterans Affairs |
| X | Beat Heggli | HL7 Switzerland, nexus/schweiz |
| X | Paul Knapp | Knapp Consulting |
| X | Wael Al Dahhasi | CCHI wael@cchi.gov.sa |
| X | Jay Zimmerman | CCHI jayzim@telus.net |
| X | Mark Tucker | mtucker@regenstrief.org |
|  |
| **Quorum Requirements Met:** [ ]  Yes / No – Not Applicable |

**Agenda Topics Q4**

1. Review of proposed changes brought forward by the reps for CCHI from Saudi Arabia as they appear on the FM wiki.

<http://wiki.hl7.org/index.php?title=HL7_WGM_-_Cambridge,_MA_USA_Financial_Management_WG_->\_AGENDA

Eng. Wael Al Dahhasi, Electronic Transactions Program Director for the Council of Cooperative Health Insurance (CCHI) in Saudi Arabia, and Mr. Jay Zimmerman, consultant to CCHI, provided the committee with an overview of the CCHI program, where this program fits in relation to the provider and payors in Saudi Arabia, the role and requirements of CCHI and their work to date and near-term specific requirements.

They then lead the committee through a review of their materials, posing questions of the committee where they were seeking confirmation from the group and answering both the business and technical questions from the group.

**QUCR\_MT230101SA-Get Beneficiary Details Response / QUCR\_MT210000SA-Eligibility Query Response Payload**

The Saudi model includes the addition of three Acts and one Role. The Acts are: (1) Deductible; (2) Remaining Limit; (3) TableOfBenefits (which are self explanatory). The actual policy class is represented in the main PolicyOrAccount Act (PolicyOrAccount.text). The Role provides a representation of the "provider network" with which a particular policy class is associated.

**COCT\_MT571000SA-Lab Test Report**

The Saudi stakeholders, particularly the Health Insurance Companies and Third Party Administrators, indicated a requirement to have the actual lab test results included with any and all adjudication requests where a lab test was being claimed. As opposed to having to generate paper and attach it to the request message - which would require manual adjudication - Jay developed a Lab Test Report CMET that could be populated with the appropriate information in a coded manner. This would satisfy the requirement and still allow for auto-adjudication by the claims management systems as the data would be presented in a standardized coded manner. FM group recommended that the CMET also be vetted through the Orders and Observations (O&O) work group.

Additional discussion was undertaken on the Adjudication Request and Re-Adjudication Request; Payment Advice and Payment Notification; Amending/Nullification.

The materials appeared complete and appropriate, and minor corrections or suggestions were offered by the committee. For example, the committee recommended changes to ‘mood code’ to be “EVN” where the action is being reported, “DEF” where the action is being described

The FM group also recommended looking at the Coverage CMETs and leveraging the existing representations in those models for the noted Acts . This will ensure alignment and consistency within the Saudi and International models for defining those elements. Jay will review the Coverage CMETs, and update the Saudi Models as noted.

The committee thanked Eng. Wael Al Dahhasi and Mr. Jay Zimmerman for their presentation and remarked on the breadth and completeness of their proposed implementation. The committee wishes CCHI success in their endeavor and pledges to be available to assist and facilitate as needed.

**Action Items:**

Jay to review the ‘lab information structures’ with OO Work Group.

Jay to review the CMETs and Vocabularies to determine which to use.

Co-chair to determine what happened to the ChiroPhysio A\_billable CMET.

**Meeting Action Items:**

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| **Actions:**  |
| **Owner** | **Action Item** | **Due** |
| **Kathleen Connor** | Call set up, Jan WGM room **schedule** | Next WGM |
| **Beat Heggli** | Manage v.2 Ballot work | Next WGM |
| **Paul Knapp** | Lead FM FHIR work, prepare and Post WGM minutes | Next WGM |

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| **Jan, 2014** WGM Meeting / Preliminary Agenda Items1. **Agenda Review and Approval**
2. **Review Mission, Charter, Decision Making Practices. SWOT and 3 year plan.**
3. **FM v.2 Work**
4. **FM FHIR Projects**
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| Interim Call, Once a month Oct 17, Nov 21, and Dec 19 at 2PM ET. 1. Agenda Review and Approval
2. Review and Approve Meeting Minutes from WGM
3. Discuss (after review of pertinent documents) how FM can support HITECH requirements
4. Discuss FHIR resource creation and domain composite development and determining the review and governance processes
5. Review
6. Adjourn
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