2022.05.13 EQRS EDI Touchpoint Status Meeting

Date

13 May 2022

Time

2:00 - 2:45pm

Attendees

Name	
Aaron Thompson	
Adrienne Adkins	
Adrienne Ray	x
Ahmar Wazir	x
Anitha Chintalapati	
Arnie Espartero	x
Betina Fletcher	
Branon Barrett	
Cheri Jerger	
Chris Brown	x
Curt Phillips	
Deb Wilson	x
Dianna Christensen	
Hayley Evans	
Heather Moore	x
Howard Thomas	x
Janet Hutchinson	x
Jason Clem	x
Jay Vancil	
Jennifer Bailey	x
Julie Alvarez	x
Justyna Sardin	
Karena Farnham	
Kathleen Prewitt	x
Kelly Llewellyn	x
Kelsey Okland	x
Lakshmi Erigineni	
Leah Skien	x
Lisa Rees	x
Melissa Fieldhouse	
Michael Kennedy	x

Agenda

Items	Who	
Meeting Recording	Arnie	This session will be recorded for the purpose of documenting the meeting minutes and action items. If there are any objections to the recording of this session, please make it known now. Absence of an objection to the meeting being recorded will count as consent to recording this meeting. https://us06web.zoom.us/rec/share/vFmOuIhbtRHE9Trxu6VYB3m53O7XcviRchq7SEH975B-HasDInFWkSzYxYeVCCTh.eqlvFUTYwZXI7dly Passcode: #fZu!2+H
Administrative Update	Scott	Meeting cadence change • The Friday EDI Touchpoint Status meeting will roll into the current time slot with Michael Kennedy that is held on **Thursdays 2-3pm Eastern; effective 5/19** • The EDI Touchpoint Status meeting series, starting on Friday, 5/20 will be cancelled moving forward
EDI Submitter's Progress (upcoming feature development)	EDIs	Vaccinations: Any questions on documentation, file structure, XSDs, XML, data dictionary, prod-preview readiness, questions in the UI? What kind of progress has been made with the vaccination files so far? What is the status of updating your system? What is your development status, production readiness date, etc? **DaVita**

Nathan Muzos	x
Ozlem Tasel	
Pandu Muddana	x
Pani Palanichamy	x
Porsche Dorsey	x
Revathy Ramakrishna	x
Sarah Filling	x
Scott Laughlin	x
Seema Sreenivas	
Shamim Almamun	
Steve Goodman	
Vladimir Ladik	x
Yvette Brown	x

- They are most of the way through requirements
- Design is in progress; should be done mid to late next week
- Nathan feels DaVita is on track pending the question/scenario below
- Big question still working on is: How do we know what not to submit?
  - If the expectation of managing other organizations records, they DaVita is not on track; if they do not have to do that, DaVita is on track
  - Clarified that Nathan is looking for scenarios between facilities or other facilities
  - Looking for business scenarios and expectations that the Program signs off on
  - For example, the scenario that as been raised is: the patient gets as flu vaccine at FKC in October, they come to DaVita in January. What is the expectation there? **Recording for this discussion: 6:48 - 51:04**
    - Per Nathan the only answer given is don't submit duplicated data; don't two organizations tell EQRS the same thing
    - This is also the same scenario that RHA is running into. The other scenarios have been pretty clear
  - Per Howard, the issue of how far to go back?
    - Per discussions with Howard and Yvette, there are no business rules that prevent EDIs from reporting
    - Need clarification
  - Per Howard, its unrealistic for CMS to expect that EDIs are not going to report duplicates
  - A lot of duplicates will be reported and CMS needs to figure out how to scrub that; it is not the job of the EDIs
  - Per Yvette - vaccinations is supposed to be event based
    - Will need CMS to say that the expectation if for EDIs to only report vaccines during the time the patient was at their facility
    - Regarding duplicates - the system will match on the vaccine and the date that the vaccine was administered. So it won't create a duplicate in that sense
    - If it is reported on a different date, than previously reported, it will add that record
    - Howard recommends a discussion on having a date ranges instead of a specific date
  - Lisa has already spoken to ISG about creating a report for vaccinations; start working on this report in PI19
  - Per Nathan, they need to know what the report will look like before they build it
  - Howard more concerned about the reporting of duplicates
  - Per Kathleen - duplicate data is what they are reporting now; its separated out by facility
    - As long as the patient is vaccinated
    - Suggest to move forward with how it is and see what happens; if needed discuss enhancements for the future
  - Per Yvette - asking for EQRS and EDIs to meet in the middle
    - There is plenty of data now in clinical, with this first rollout we're only going to migrate from the latest (there are future plans to migrate all later)
    - Once this is deployed to prod, whatever vaccinations the patient has, the EDIs submit that data until we can get to a place where all of the history data has been migrated and there is the ability for EDIs to see what the patient has
    - Take this all in steps
    - It is not intended for the EDIs to have to log into the UI to get this data
    - This is a future thing that still has to be worked out - EDIs will have the ability, whether it is a physical report were it can be printed out or some other way to be able to see what information the patient has
    - Yvette is requesting to move forward that from the moment that vaccination data is in production, when the patient gets vaccinated the EDI will report it
    - Reporting will be event based; report after vaccinations went live
  - Definition for event based submissions **Recording for this discussion: 30:09 - 51:04**
    - Vaccination Data Submission Requirements and F&Q.pdf
    - Howard ask for EQRS to write a specific example on the timeliness issue and put that in the documentation where is says Timeframe for Data Submission

FKC

		• Question from Kathleen - Does the migration also include the latest declination for the latest the patient did not receive it or are we only migrating patient received statuses? 　○ Per Yvette we are only migrating the latest record or whatever is in clinical • Question - In one of the "not received" instances for HEP B, one of the reasons in the drop down for not receiving it is "Series complete for antibody test" 　○ There is no documented result limit on what indicates immunity. There is no requirement documented on what the test score is and when a patient is immune 　○ Lisa will look that up **DCI** **RHA** • Request from Howard - Have a discussion about timing of all this, testing sign offs, go live dates and so forth 　○ This is a substantial development for the EMR vendors 　○ No exact date but Howard is thinking July when they will have enough code written to begin some testing 　○ A table has been created in the meeting minutes (below) on timing of the events
Feature Discussion	Scott	Vaccinations Reporting • Will talk more at the Program Working Group meeting about what the reporting could look like for Vaccination reporting
General	Scott	• The public EDI website (confluence page) has been redesigned for better organization and access to EDI documentation /information. Links below: 　○ Electronic Data Interface Submitters 　○ EQRS and EDI Development Alignment Process • CCSQ Support Central - https://cmsqualitysupport.servicenowservices.com/ccsq_support_central

Action Items:

EQRS Vaccination Timeline Schedule

Date	Tasks	Status
3/04/22	Distribute the Vaccination Data Guide	Complete
4/12/22	Distribute the Data Dictionary/XSDs/Errors and Warnings	Complete
4/15/22	EDSM Vaccinations deployed in Prod-Preview environment	Complete

4 /20 /22	Prod-Preview environment data refresh	C o m pl e te
TBD	EDIs perform integration testing	
TBD	EDI Readiness Verification	
7 /31 /22	Vaccination Module live in Production	
7 /31 /22 - 09 /30 /22	Vaccinations submitted via clinical will be "optional" (This means that new vaccination data would be received by EQRS, stored in the clinical database, and visible on the clinical UI. In effect this means the vaccination module will be a phased in implementation rather than a cutover implementation.)	
10 /01 /22	If vaccination data is submitted via clinical, the clinical submission record will be rejected	