"Building Patient Safety"

Patient Safety

Healthcare Supply Chain Efficiency

- Automatic Data Capture (Bar Codes, Data Matrix, RFID)
- e-Commerce (EDI / XML Transactions)
- Electronic Record Management (e-Records, e-Prescriptions)
- Assets & Equipment Tracking
- Traceability (e-Pedigree, Recalls)

Standardized Product Definition (GDSN™)

Standardized Location Identification (GLN)

Standardized Product Identification (GTIN)

Standardization ➔ Interoperability
Healthcare Supply Chain Data is Broken

- DoD Medical relies on Commercially Based Supply Chain
  - Commercial Products & Product ID
  - Close synergy & reliance on Commercial Supply Chain

- Healthcare Supply Chain Data Broken - Bad Data at all supply chain levels - *DSCP’s Contingency mission impacted*

- No standard item identification in the Medical Surgical Industry

- Billions of dollars are lost each year due to information inefficiencies - impacts entire healthcare industry

- Affects RFID, FDA Device Identification, Electronic Health Record
It’s All About the Standards!

Your pointing at it won’t help - the computer records shows none in stock.
In Federal supply chain, bad data due to lack of data standards is causing:

- Dirty item masters
- Accounts Payable mismatches
- EDI kick outs and rejections
- Non-contract pricing
- Returns & credits for wrong items
- Inefficient use of resources
- Sub-optimized support to Warfighter

Right data is the link to Readiness & Patient Health / Safety!
Solution - Federal Pathway/Roadmap to Standards

---|---|---|---|---|---|---
DSCP UPN | PDU FEASIBILITY STUDY ARMY EZSAVE

Data Sync Tools

JOINT FED WORK GROUP

DoD PDU PILOT EZSAVE TO SVCs DEVELOP PDB

Pilot PDU

“Build Own”

DoD/VA JIF CATALOG

DoD VA JIF Program

DoD GDSN PILOT

ON-GOING EFFORTS

GLNs by 2010
GTINs by 2012
“Build Your Own”: PDU Pilot

Proof of Principle
- Synchronization works
- Real savings of $36M+ to date

But Interim Solution ... not sustainable for long term
Industry Collaboration is Key

**Feasibility Study**

CHeS sponsored PDU Committee → HSCSC/NAHIT → GS1

End Goal: Industry Sponsored PDU
Why Pilot GDSN?

- Can’t do this alone – need Supply Chain Solution
- Growth of GDSN & Walmart Mandate
- Leverage existing framework
- Test feasibility as potential option for a healthcare solution
- Healthcare manufacturers active in GDSN consumer side
- Opportunity for Supply Chain to test the concept
The Solution: Same Product & Organizational ID’s

Other Industries

In most other industries such as the Grocery industry there is a consistent Product ID throughout the supply chain.

- **Grocery Industry**
- **Supplier**
- **End User**

**GTIN - Global Trade Item Number** - Identifies trade items (products and services) sold, delivered, warehoused, and billed throughout the supply chain. {One Identifier for products}

**SSCC – Serial Shipping Container Code** - System identification for logistic units. Contains the GTIN identification
DoD Healthcare GDSN Pilot
Applying the Walmart Retail Model

**GDSN Network**
Built for Product Data

**Healthcare Industry**
Data Sharing Vision

**Manufacturers**
- ID representative set of products
- Review field recommendations
- Select onboard method
- Gather available data
- Load manufacturer data to GDSN
- Publishes to pilot subscribers
- Gather lessons to apply to balance
- Engage internal data stewards with lessons learned

**Data consumers**
- Identify data collected today
- Illustrate data path for adding new items
- Conduct Gap Analysis
- Prepare test platform
- Subscribe to pilot data
- Opportunities to cleanse MMIS
- Draft future data path incorporating standard data
- Spot metric
GS1 US Healthcare with GS1 Global Healthcare user group approval has identified 40 attributes for initial implementation.

October 15, 2008
What We Learned in GDSN Pilot

✓ Synchronization will require an adopt-able data set
  • Minimal attribute requirements
  • Mfr systems have attributes; not always in format required by standard
  • Attribute “creep” is unsupportable

✓ Outcomes
  • Mfr: minimal resources required but time line would assist setting internal priorities
  • Mfr: descriptions developed for internal use; customers modify for more utility
  • Hospital: 50% reduction in spend analysis match time
  • Hospital: replaced manual measurements by moving GDSN dimensions to warehouse mgmt system
  • GPO: streamlined 2 processes; estimated potential for $250k annual savings
What We Learned in GDSN Pilot

- Good data leads to the desire for more good data
- Pilot efforts have complemented parallel industry efforts
- MMIS providers are in various stages of readiness
- Middleware functionality needed to support industry synchronization
- Awareness and sharing of data challenges and workable remedies (40+ participants)
GDSN Pilot Provided….

- Manufacturers a view into provider processes and the impacts of non-standard data on the supply chain
- Process for buy side participants to quickly confirm that standards are applicable to their needs
- Leverage for GS1 Global Pilot with DoD Pilot participants’ experience

“Boot-camp” for trading partners to test & learn
Moving out of the Data Stone Age

IT'LL NEVER CATCH ON...
Healthcare Industry Timelines have set the stage for:

- Subscribing to standardized production data
- Adapting systems to accommodate GTIN/GLN fields
- Leveraging industry momentum to better support the Warfighter

DoD will Follow Industry’s Lead

Next Steps

Industry on the Path to Success

GLNs 2010
GTINs 2012
GDSN