



# UDI Roundtable Discussion

7 April 2011





# Healthcare Speakers

## Chair

- Mike Wallace, Director Global Standards and Serialization, Abbott Laboratories

## Panelists

- Terrie Reed, Senior Policy Analyst, FDA Center for Devices and Radiological Health
- Joe Pleasant, Senior VP & CIO, Premier Inc.
- Mike Sarachman, Manager, International Data Standards Adoption, Johnson & Johnson Health Care Systems, Inc.



# UDI Database Roundtable



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April 7, 2011



# Agenda

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- Abbott at a Glance
- What is Master Data?
- How does GS1 data fit with Master Data?
- What will the processes look like?
- The new paradigm
- The Panel

# Medical Devices is one of Abbott's Three Areas of Business



## Medical Devices

Diabetes Care

Laboratory Diagnostics

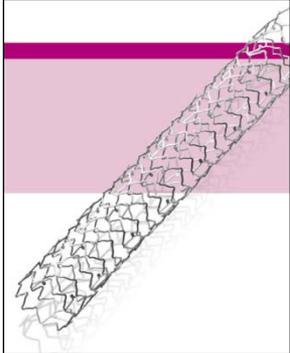
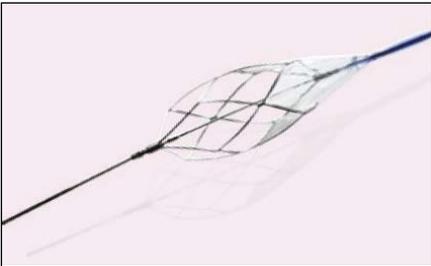
Molecular

Point of Care

Medical Optics

Vascular

Animal Health





# What is Master Data?

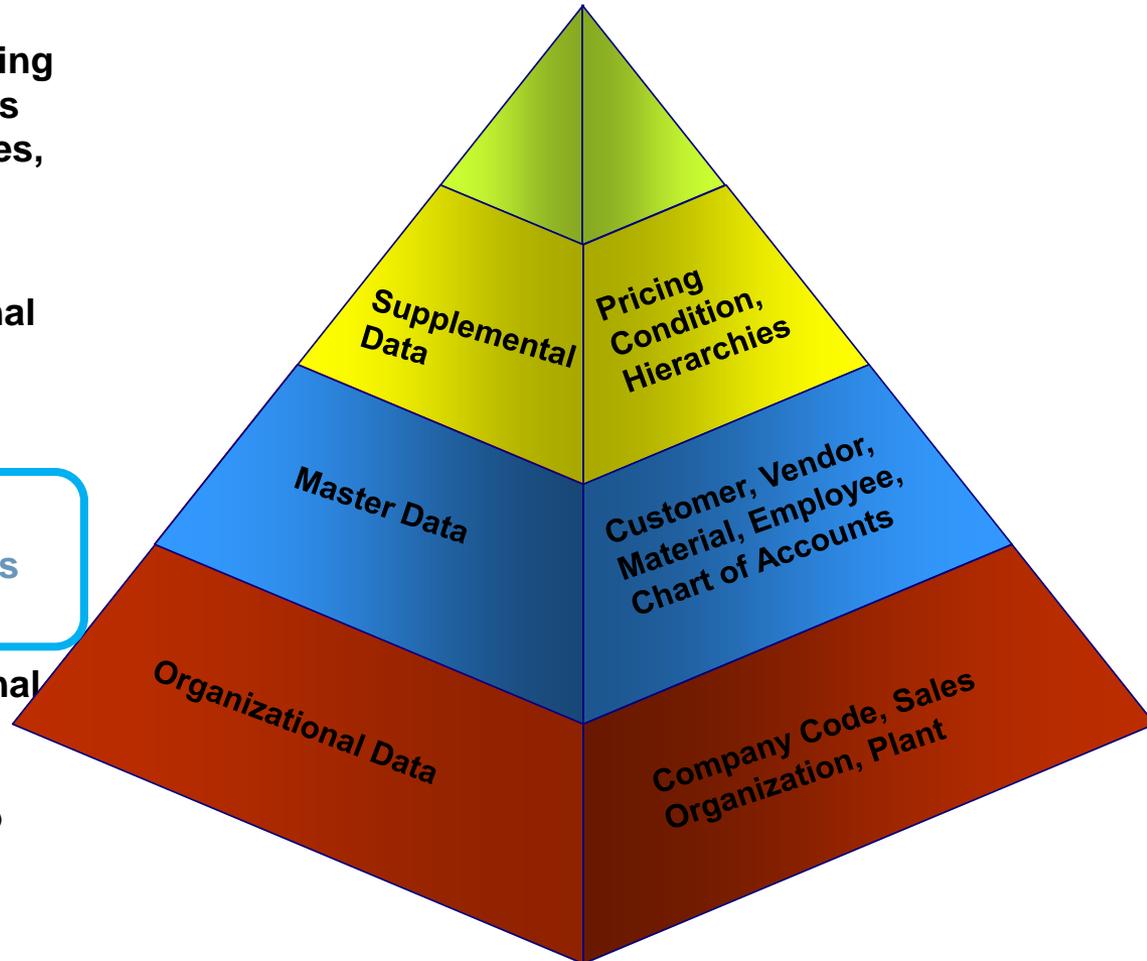
Master Data is the high value information that an organization uses repeatedly across the enterprise and in many business processes.

- It describes the key business entities of a corporation, referred to as master records or data domains:
  - Customer, Material, Vendor, Chart of Accounts and Employee
- It includes the data elements that help define the master records in support of transactional and reporting activity.
- Naming conventions and the adoption of industry standards are implemented where applicable.

Domain	Data Element Examples
Customer	Account Number, Customer Name, Address, GS1 standard for GLN
Material	Material Number, adoption of UNSPSC codes for material classification (Material Group), GS1 standard for GTIN, Units of Measure

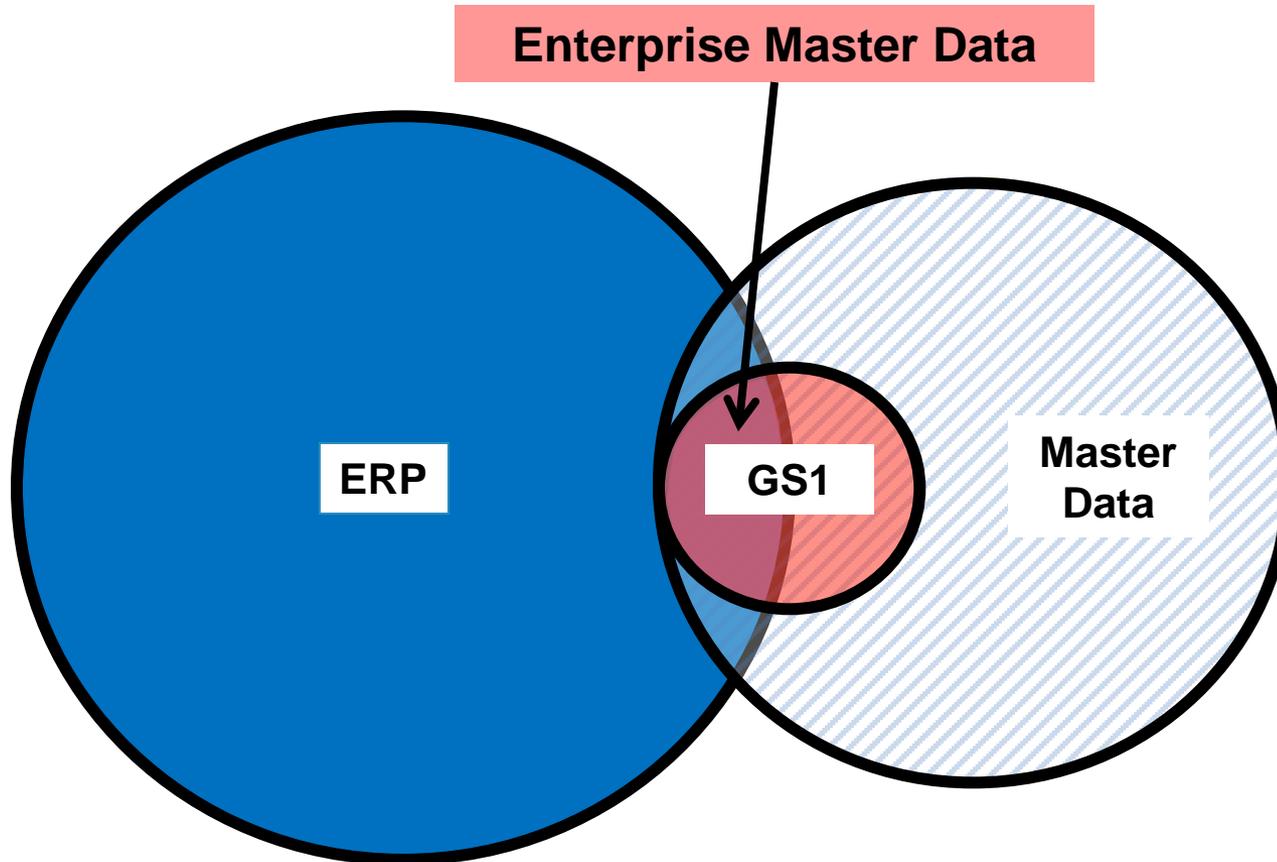
# Where does Master Data fit?

- **Transactional Data** – Data created during course of business operations such as sales orders, purchase orders, invoices, accounting postings are considered transactional data
- **Supplemental Data** – Non-transactional data such as pricing conditions and product hierarchies that is not considered master data
- **Master Data** – Corporate data assets such as customers, vendors, materials and chart of accounts
- **Organizational Data (a.k.a. Foundational Data)** – Essential elements such as company code, sale organization that should be in place for all other data to exist



Enterprise Data Pyramid (SAP Proprietary Model)

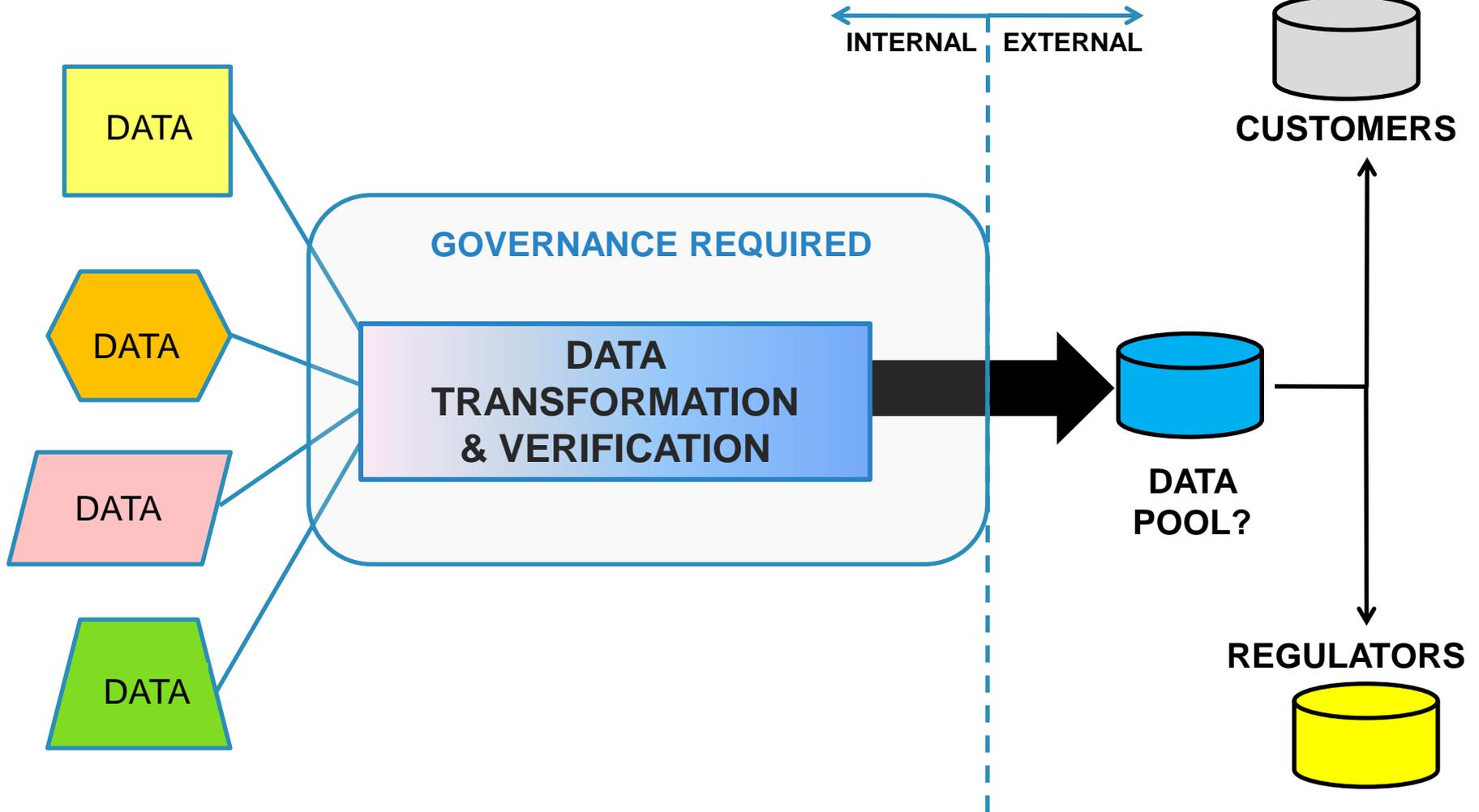
# How Master Data Fits



All GS1 Data is Master Data, but not all GS1 data is necessarily Enterprise Master Data.



# GDSN/UDID OVERLAP



# GDSN/UDI Database processes mimic MDM

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- Assign product GTINs
- Locate GTIN attribute data
- Identify data owners
- Modify/establish data governance process
- Assess attribute data v. GDSN/UDI Standards
- Complete and/or Transform attribute data as required
- Verify attribute data in correct formats for publication
- Publish data as appropriate to GDSN Data Pool/UDID
- Update GDSN/UDID as required for changes in products, attributes, customers, regulators



# Device Identification – A Paradigm Change

<b>CURRENT</b>	<b>PROPOSED</b>
Proprietary Identification – Manufacturers Catalogue Number	Open Identification – Manufacturers Standards-based UDI
Not Globally Unique	Globally Unique
Distributors may apply different proprietary identification number	Distributors use Manufacturers’ UDI number
Distributors do not capture lot or serial numbers	Distributors may use AutoID to capture lot or serial numbers
Hospitals may apply different proprietary identification number	Hospitals use Manufacturers’ UDI number
Hospitals do not capture lot or serial numbers	Hospitals use AutoID to capture lot or serial numbers
Non-standardized device information available on a limited, ad hoc basis	Standardized device information available in an FDA database

# UDI Panel Participants

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- Mike Wallace – Abbott (Moderator)
- Terri Reed – FDA CDHR
- Michael Sarachman – JNJ Standards Adoption
- Joe Pleasant – Premier CIO

# **FDA Center for Devices and Radiological Health: UDI Database & CDRH Informatics Strategy**

GS1 Conference  
Bethesda, MD  
4/6/11

# Overview

- **Informatics Strategy at CDRH**
- **UDI as Master Data**
- **Ties to HL7 Standards**
- **Data Exchange as a Team Sport**

# CDRH Informatics Goal: Improve Data Quality

- **Current data meets requirements of a particular regulation or business need**
- **Standard** Data exchange methods not used
- **Some electronic data must be re-entered**
- **Data cleansed and linked after received and stored**
- **EXCEPTION: eMDR - standard vocabulary and data exchange format,**

# Focus on Fundamentals: Sharing and Reuse of Data

- Common Data Exchange – **Getting from A to B and back again (SYNTAX)**



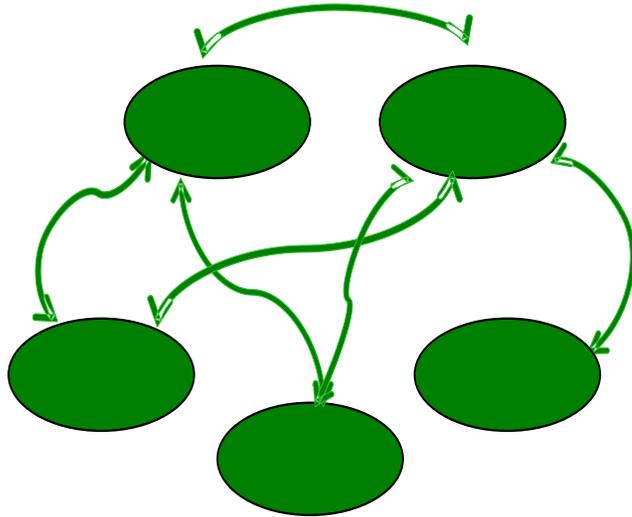
- Standard Terminology - **Building Blocks** - **Allows Reuse of Data (SEMANTICS)**



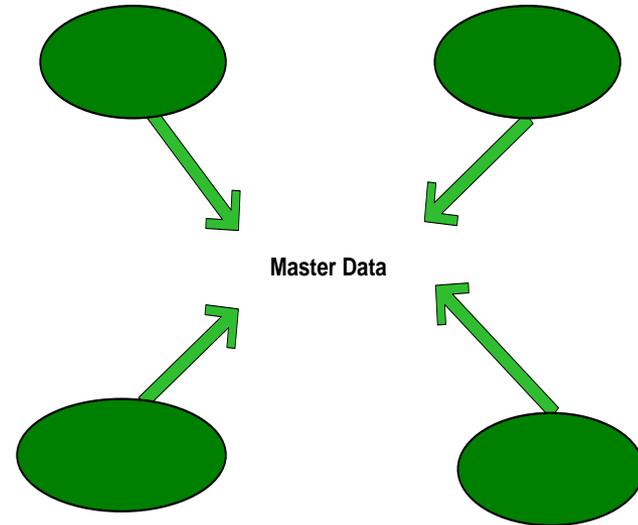
# Master Data Management Plan

- Compliments development of standard data exchange and vocabularies
- Identifies the agreed to, standard **critical business data** (e.g., UDI info, device names, event codes, item codes, manufacturer names, GMDN codes) that can be shared across systems.
- Creates policies and procedures for creation, access, update, and overall management of this central resource.
- Emphasizes **Data quality**, Integration, Single version of the truth, Data stewardship.

# Why Master Data Management



Multiple master – No  
Authoritative data  
Inconsistent Data  
Semantic Differences  
Data Duplicates



Data Hub- Single  
Master  
Harmonized  
Consistent Data  
Single Vocabulary  
Governed by a single  
group

# UDI as Master Data

- Core data for Regulatory product safety/effectiveness – **DEVICE Information**
- Means to increase quality & consistency of **DEVICE Information**
  - Applying UDI to label of device
  - Requiring standardized electronic submission of UDI data

# Establishing a UDI System

**Combination of 4 distinct steps:**

- 1. Develop a standardized system to establish the unique device identifiers (UDI)**
- 2. Place the UDI in human readable and/or AutoID on a device, its label, or both**
- 3. Create and maintain the UDI Database**
- 4. Promote Adoption and Implementation**

# UDI: Ties to HL7 SPL r5

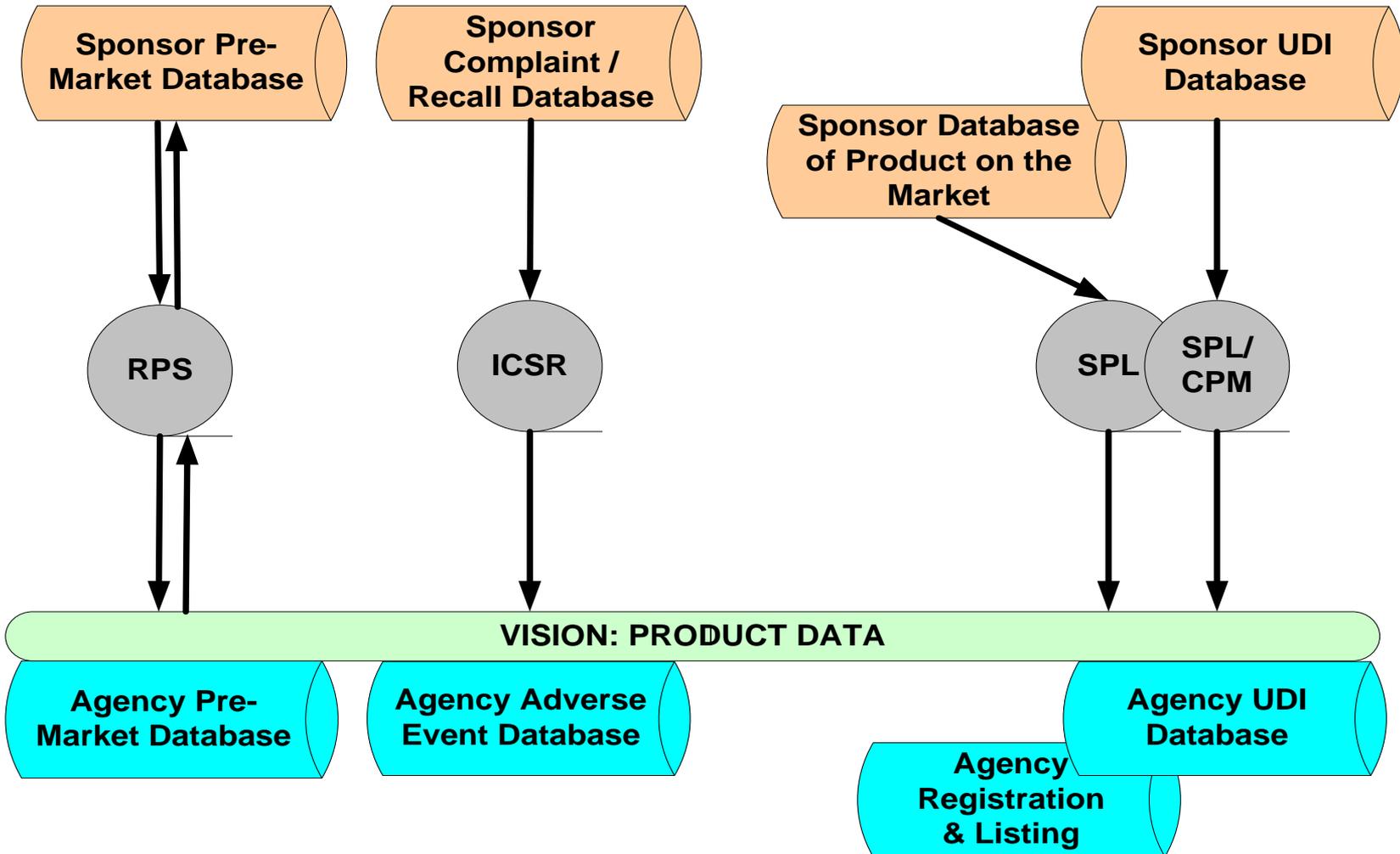
## HL7 Data Exchange Standard

- **Global authority on standards for interoperability of health information technology with members in over 55 countries**
  - **Individual Case Safety Report (ICSR) Adverse Event Reporting**
  - **Structured Product Labeling (SPL) - UDI - Product Information**

[http://wiki.hl7.org/index.php?title=Medical\\_Product\\_Information\\_\(SPLr5\)](http://wiki.hl7.org/index.php?title=Medical_Product_Information_(SPLr5))

# Data Exchange Vision

## SPONSOR PRODUCT DATA SOURCES – REGULATORY, QUALITY, MASTER DATA



# UDI Database – Benefits of Adoption

## FDA/Manufacturer adoption --

- Improves ability to link internal databases around product information
- Provides improved device information in regulatory submissions

## Healthcare adoption -

- EHR as a rich data source for device-specific safety surveillance/observational studies
- Provides method to obtain ‘real-world’ data for pre-market decisions (registries)
- Improves ability to link Healthcare databases

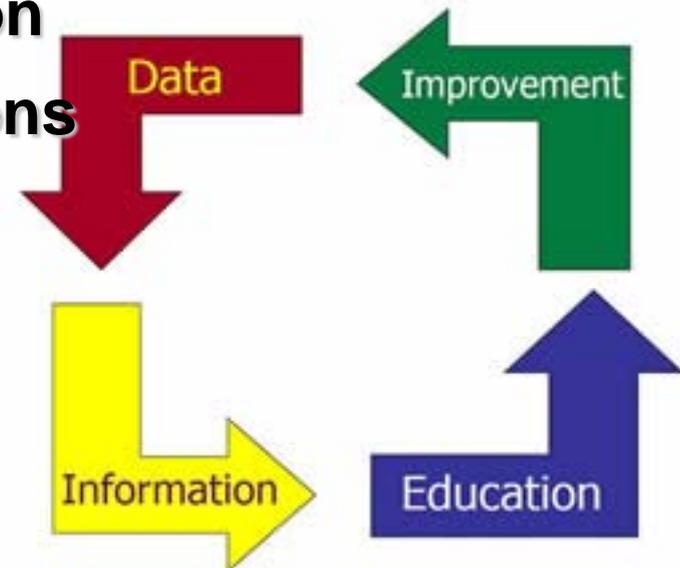
# Data Exchange/Reuse Efforts lead to..

- **Improved Data Sharing with:**
  - **Regulated Industry**
  - **Professional Organization Registries**
  - **Healthcare IT Departments**
  - **Materials Management**
  - **Federal Health Partners**



## Which leads to....

- Improved Patient Care – Device Info
- Improved Public Health
  - Improved Quality and Timeliness of Data
    - Improved Information from Clinical Research
    - Improved AE Reports (ASTER-D, PDRNet)
      - Improved Signal Detection
    - Improved Directed Inspections
    - Improved Recalls



# Data Exchange is a Team Sport

Type	Group	UDI/Informatics Role
Regulated Industry	AdvaMed, GHTF,	<ul style="list-style-type: none"> <li>•Coordinate FDA data standards with industry</li> <li>•Educate and Facilitate Submissions</li> </ul>
Standards Development Organizations	GS1, HL7, ISO, AAMI CDISC, GMDN IHTSDO, (SNOMED), NCPDC, X12	<ul style="list-style-type: none"> <li>•CDRH advocate</li> <li>•Apply Stds at Agency and Center Level</li> <li>•Educate and Promote Adoption</li> </ul>
Supply Chain	GS1, HIBCC Group Purchasing, Material Mgt, Hospitals, Distributors	<ul style="list-style-type: none"> <li>•Promote UDI Adoption</li> </ul>



**Questions?**  
**terrie.reed@fda.hhs.gov**



# Unique Device Identification Database: Managing UDI Data

April 2011

Michael Sarachman  
Manager, Industry Standards Adoption  
Johnson & Johnson Health Care Systems Inc.

# Impact of Unique Device Identification (UDI) Adoption

**Current State**



**Future State**



# Perceived Benefits of UDI

- Accurate sales orders
- Accurate and efficient recalls
- Accurate procurement
- Enable electronic health record usage
- Patient safety
- Efficient delivery of clinical care
- Foundational for track & trace

REF 210024 LOT 1D34987  2013-07 QTY 1

**PANALOK® Absorbable Anchor**

35mm Rx Only STERILE EO

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REV A

**VITROS® System 5600**  
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(BOX 1 of 2)

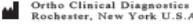
SN 5600000224

  
(01)10758750002740 (21)5600000224

REF 680 2413

12-31-2010

**Ortho Clinical Diagnostics**  
a *Johnson & Johnson* company

 Rochester, New York U.S.A.   62 Broadway, Amersham, The Bucks, UK

This product contains a lithium ion battery, which contains hazardous material. Special handling may apply to some of the components of this product. For more information, please refer to the user manual. Always follow the instructions of the manufacturer. © 2010 Ortho Clinical Diagnostics, a Johnson & Johnson company. All rights reserved.

# UDI Benefits

- Standardized & consistent safety data
  - Leverage common database
  - Ensure positive product identification
- Standardized production data collection
  - AutoID of Production Data
    - Lot Code
    - Serial Number
- Complements current data collection

Next Page    Reset Form

U.S. Department of Health and Human Services

**MEDWATCH**

For VOLUNTARY reporting of adverse events, product problems and product use errors

The FDA Safety Information and Adverse Event Reporting Program    General Instructions    Page 1 of \_\_\_\_

Form Approved: OMB No. 0910-0291, Expires: 12/31/2011  
See OMB statement on reverse.

**FDA USE ONLY**

Triage unit sequence #

**A. PATIENT INFORMATION**    Section A - Help

1. Patient Identifier    2. Age at Time of Event or Date of Birth:    3. Sex:  Female or  Male    4. Weight: \_\_\_\_\_ lb or \_\_\_\_\_ kg

In confidence

**B. ADVERSE EVENT, PRODUCT PROBLEM OR ERROR**    Section B - Help

Check all that apply:

Adverse Event     Product Problem (e.g., defects/maifunctions)  
 Product Use Error     Problem with Different Manufacturer of Same Medicine

2. Outcomes Attributed to Adverse Event (Check all that apply)

Death: \_\_\_\_\_ (mm/dd/yyyy)     Disability or Permanent Damage  
 Life-Threatening     Congenital Anomaly/Birth Defect  
 Hospitalization - Initial or prolonged     Other Serious (Important Medical Events)  
 Required Intervention to Prevent Permanent Impairment/Damage (Devices)

3. Date of Event (mm/dd/yyyy)    4. Date of this Report (mm/dd/yyyy)

5. Describe Event, Problem or Product Use Error

(Continue on page 3)

5. Event Abated After Use Stopped or Dose Reduced? #1  Yes  No  Doesn't Apply #2  Yes  No  Doesn't Apply

6. Event Reappeared After Reintroduction? #1  Yes  No  Doesn't Apply #2  Yes  No  Doesn't Apply

7. Expiration Date #1 \_\_\_\_\_ #2 \_\_\_\_\_

8. NDC # or Unique ID

**E. SUSPECT MEDICAL DEVICE**    Section E - Help

1. Brand Name

2. Common Device Name

3. Manufacturer Name, City and State

4. Model #    Lot #    5. Operator of Device  
 Health Professional  
 Lay User/Patient  
 Other

Catalog #    Expiration Date (mm/dd/yyyy)

Serial #    Other #

6. If Implanted, Give Date (mm/dd/yyyy)    7. If Explanted, Give Date (mm/dd/yyyy)

PLEASE TYPE OR USE BLACK INK

# UDI Usage

**Wegmans** Find your store

veggies you'll Crave

Search Wegmans

Recipes | Shopping | Entertain | Eat Well Live Well | Stores | Consistent Low Prices

Events • Follow Us • Flyer • Menu Magazine • Blog • Prescriptions • Careers create shopping lists, save recipes and more.

Home > News > Product Recalls [Print](#) [Send to Friend](#)

**Product Recalls** [view more product recalls](#)

**RECALL: ThermaCare HeatWraps, Menstrual variety**

Recall Date: 09/24/2010

Available at Wegmans: Yes

Only this UPC, with this Lot #, and this Expiration Date have been recalled:

UPC: 03700034564, 30573302002

Batch/UPC Code: Lot # E06831 - the lot number may be followed by an S or an N. The lot number is listed on both the side of the outer carton and the back of the foil pouch.

Expiration Date: 8/2012

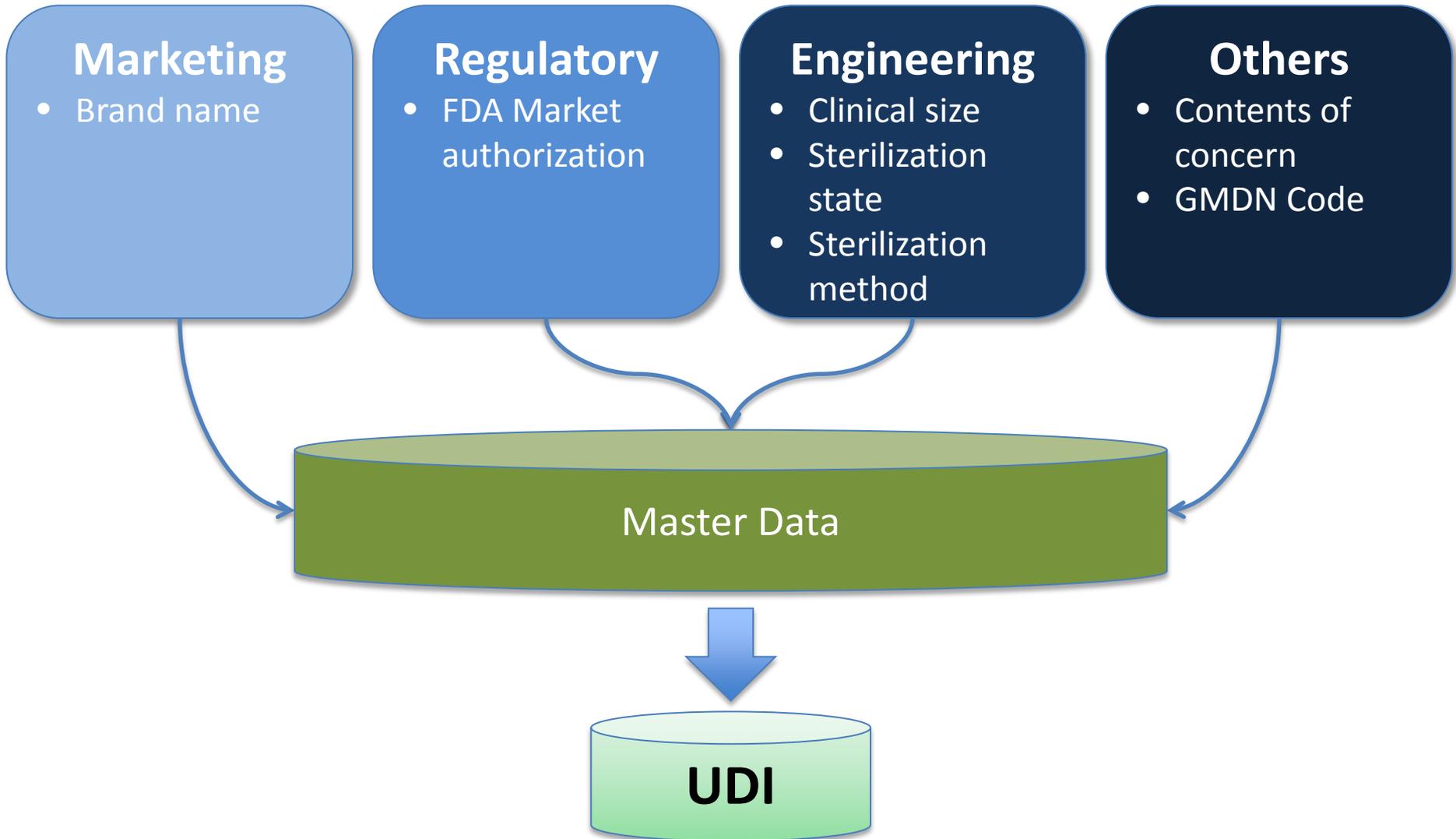
510K Notification No. K953442

UDI

# UDI System Components

- The identifier
  - Global Trade Item Number + LOT
  - Global Trade Item Number + Serial Number
- The carrier
  - Bar code symbol
- The database
  - Global Trade Item Number
  - No LOT or Serial Number data
  - Additional attributes
    - Clinical size
    - Brand Name
    - Market authorization

# Data Sources



# Data Source Impacts

- Master Data
  - Transformed from commercial data to product labeling
- Initial data load
  - Collect data from disparate sources
    - Regulatory filings
    - Product labels & specifications
- Ongoing maintenance
  - Identification of new master data owners
    - Regulatory
    - Marketing and commercial
    - Engineering
  - Error handling
    - How will interface errors be flagged and resolved?

# Label Example

Device Identifier

Storage Conditions

Clinical Size

Production Data

cypher™ Rx REF CXS33350 Expanded Stent ID/mm 3.50 Unexpanded Stent Length/mm 33 LOT W0197999 9999-01

cypher™ Rx REF Cat. No. CXS33350 Balloon-Expandable Stent System

View product Instructions for Use (IFU), Patient Information Booklet, and Implant Card at [www.cyphersa.com](http://www.cyphersa.com) or call 1-888-781-0282 to request copies.

33 mm 3.50 mm

137 cm 35 mm 2.9F (.95 mm) 2.3F (.75 mm) .014" (0.36 mm) 067" (1.70 mm)

Pressure atm	Stent I.D. (mm)
6	3.13
7	3.23
8	3.32
9	3.40
10	3.47
11 (1115 kPa)	3.52 Nominal
12	3.57
13	3.61
14	3.64
15	3.67
16 (1621 kPa)	3.70 Rated
17	3.73
18	3.76
19	3.79
20	3.82

STERILE EO Method of Sterilization: ETO

Storage temperature: 25°C

# UDI Exemption Considerations

- The form factor of the product
- The clinical acuity of the product
- Complexity of the supply chain
  - The logistical/physical supply chain
  - The information supply chain





# UDI Database Example

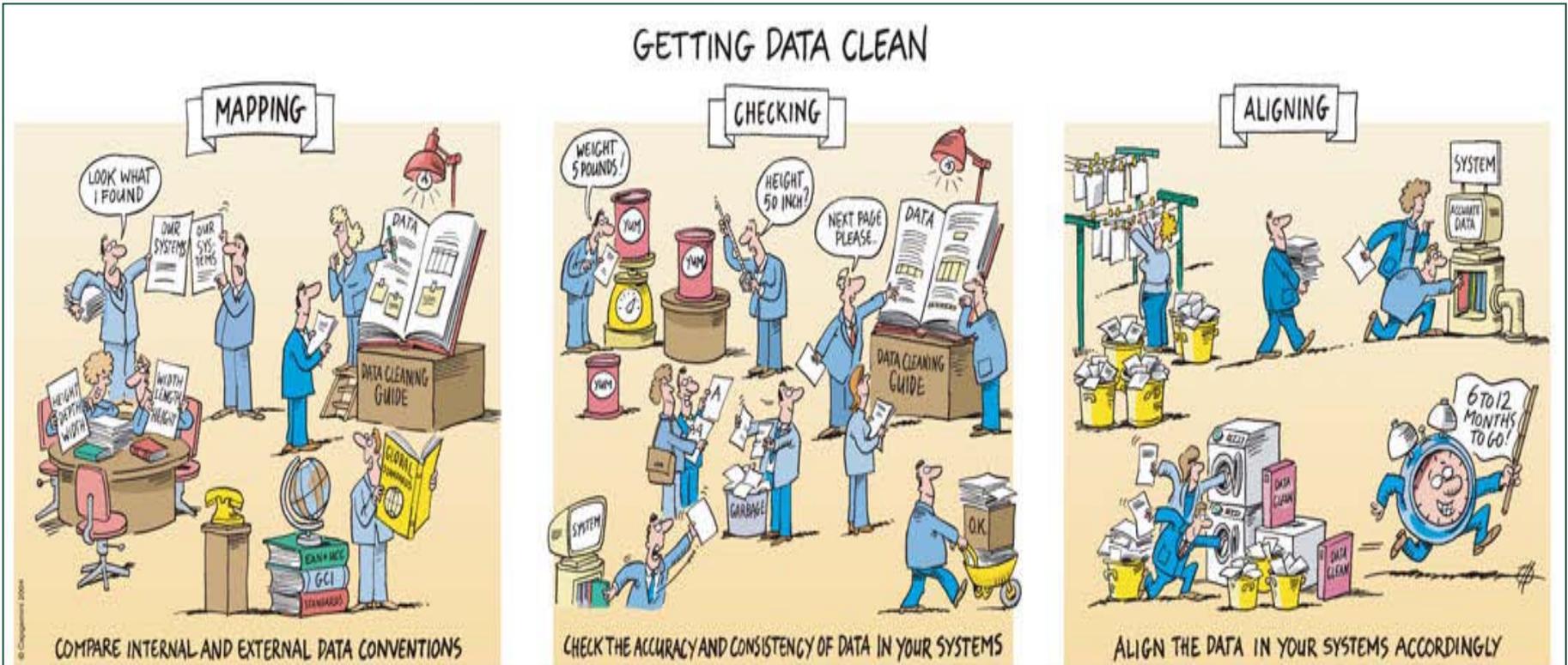
UDID Attribute	Value	Comment
Device Identifier Type	GS1	Some have both
Static UDI Code	20705032028421	HIBCC or GS1 GTIN
Manufacturer	Cordis Corporation	
Contact	Nancy Coulson 430 Route 22 East Bridgewater, NJ 08807 Phone: 908-5414908	
FDA Market Authorization	P020026	First or last?
FDA Listing Number	TBD	
BRAND/Trade Name	CYPHER®	
Model/REF number	CXS33350	
UOM/Package Level/Quantity	EA	

# UDI Database Example

UDI Attribute	Value	Comment
Production Control	LOT	
GMDN Code	34179	
GMDN Term	Stent, cardiovascular	
Storage Conditions	25° C	
Single Use State	Single Use	
Sterility State	Sterile EO	
Contents of Concern	NA	(e.g., Latex)
Clinically Relevant Size	3.50 mm I.D. 33 mm L	

# UDI and GDSN

## Why are they Important? Provider and GPO Perspective



Joe M. Pleasant  
Sr. VP and CIO  
Premier Inc.



# Topics

1. **The Premier healthcare alliance.**
2. **Why is UDI and GDSN important to Premier and our members?**
3. **Information Technology and Data.** Critical components in Healthcare reform. Importance of medical device standard identification.
4. **What are Premier and our members doing to support UDI and GDSN?**



# The Premier healthcare alliance



- Over 2,500 hospitals, more than 72,000 non-acute sites
- Using the power of collaboration to improve the health of communities
- Nation's largest clinical/operational/supply chain comparative databases
- 2010 member validated savings of \$1.4 billion
- Safety, Diversity and Environmentally Preferred Purchasing programs
- \$36 billion in annual group purchasing volume
- 2006 recipient of Malcolm Baldrige National Quality Award
- Three-time recipient of Ethisphere's Most Ethical Companies award.

## Cost Reduction

*Group Purchasing & Supply Chain Improvement, Labor Management*

## Quality Improvement

*Quality Measurement & Benchmarking, Safety Surveillance*

## Risk Mitigation

*Liability, Benefits & Risk Management*

## Advocacy

*Shaping policy and advocating for members*

## Execution Engine

*Comprehensive, accelerated approach to improving financial, operational and clinical performance.*

# Why is UDI and GDSN important?

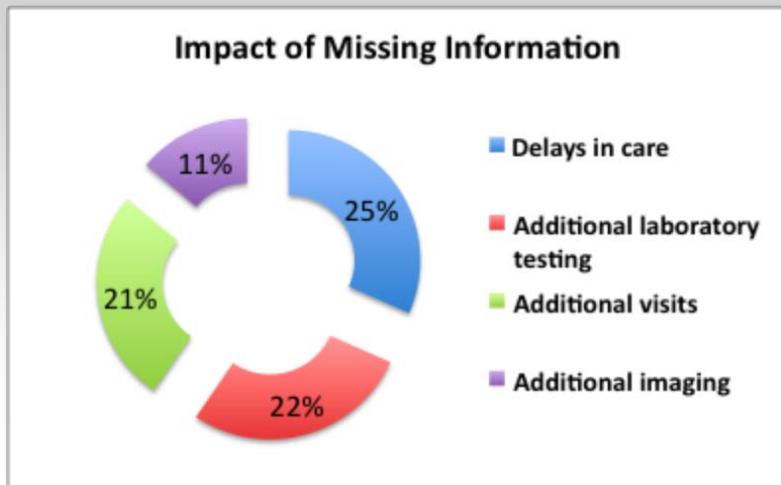
Healthcare spending: Unsustainable



# Why is UDI and GDSN important?

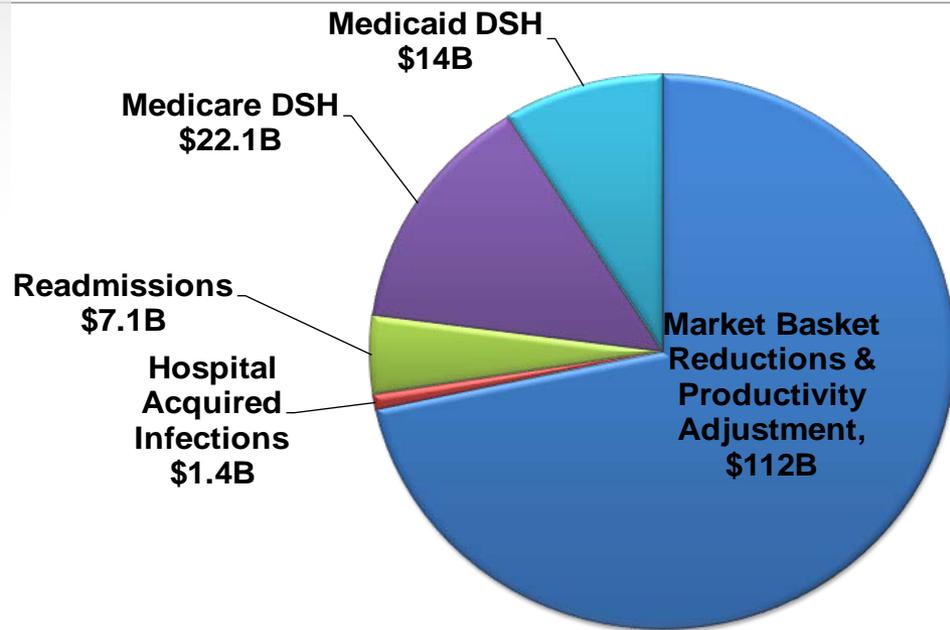
## Provider Gaps and Cuts

### Missing information affects care



**Hospital Payment Cuts in Public Law No: 111-148 - Patient Protection and Affordable Care Act**  
CBO/JTC Estimate, CMS Actuary Estimate 2010 - 2019 *(in billions)*

## Payment cuts to hospitals: \$157B



# Why is UDI and GDSN important?

## Product Identification

### Same Product, Different Numbers:



**3M 8630**

DuraPrep™ Surgical  
Skin Prepping Solution

### DISTRIBUTORS

<b>TM-8630</b>	AmerisourceBergen
<b>MMM-8630</b>	Buffalo Hospital Supply
<b>567008630</b>	Burrows
<b>1143890</b>	Cardinal
<b>01645.8630</b>	Harris
<b>MINN8630</b>	Kreisers
<b>4513-8630</b>	Midwest Medical
<b>4509008630</b>	Owens & Minor
<b>000104280</b>	PHS

*... plus different numbers in each Hospital Group's MMIS.*

Premier's Product Item Master has **7 Million** products with 2.5M Manufacturer ID's and over 4.5M distributor ID's.

# Why is UDI and GDSN important?

## Poor Information throughout the Supply Chain

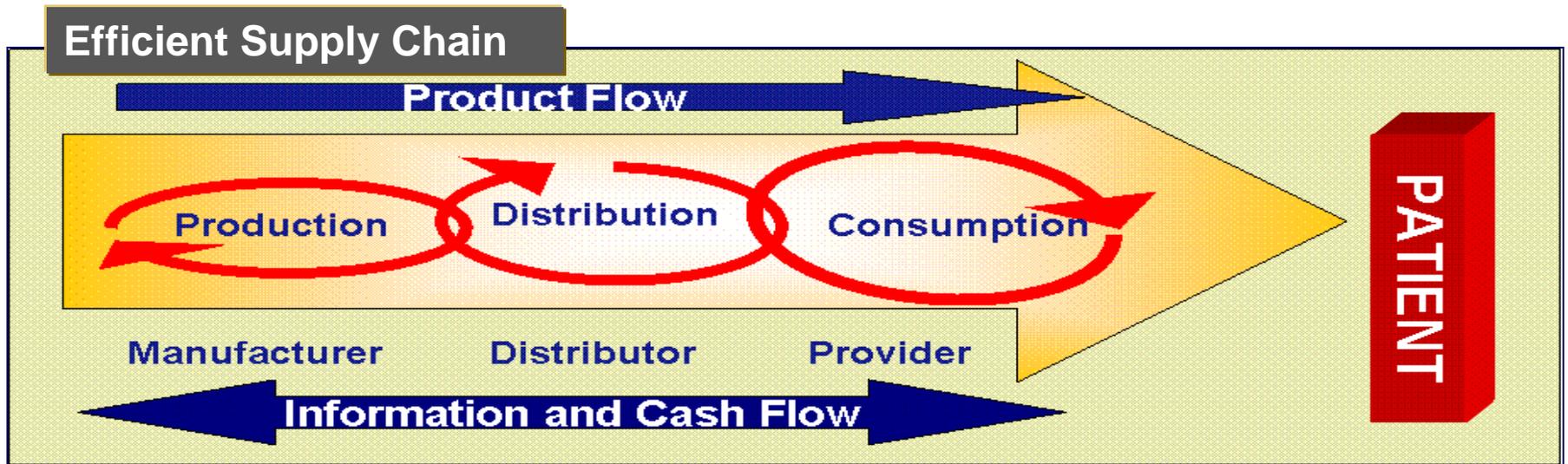
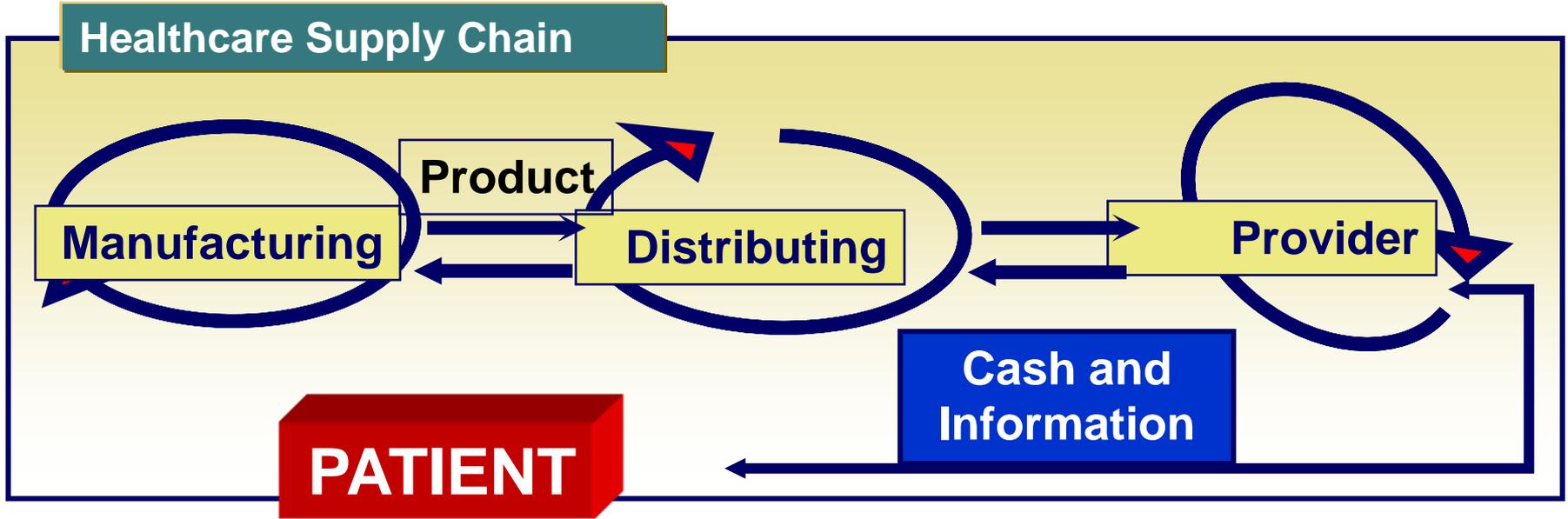
### Percentage of Errors

	<u>Manufacturer</u>	<u>Distributor</u>	<u>GPO</u>	<u>Customer</u>
Missing Middle Levels of Pkging	15-20%	1-4%	20-25%	15-25%
Hard “Packaging Quantity” Errors	1%	1%	2%	2-5%
Unit of Measure Confusion/Misuse	2-6%	1-3%	2-5%	Unknown
Missing Packaging—not Middle Level	3-8%	3-8%	3-7%	5%
Manufacturer Name Problems	NA	2-5%	1-4%	30%
Obsolete Products	1-4%	2-5%	1-8%	5-15%
Missing Product Brand Names	2-5%	5-10%	5-10%	20-25%
Incomplete Item Descriptions	5-15%	3-12%	5-15%	10-20%
Wrong Customer Unit Prices	Unknown	1-2%	NA	1-2%
Customer Paid More Than Lowest Contract Price	NA	Unknown	NA	3-6%

\* Source: Department of Defense Data Synchronization Study

# Why is UDI and GDSN important?

## An Efficient Healthcare Supply Chain



# Why is UDI and GDSN important?

Healthcare Reform: requires paradigm shift and delivery system changes



**Value-based purchasing**



**Accountable Care Organizations**



**Bundled payments**



**Non-payment for preventable readmissions**



**Non-payment for infections and HACs**



**Transparency initiatives**



**Drive to tackle waste, fraud and abuse**

# Why is UDI and GDSN important?

## The next horizon: Accountable Care Organizations (ACO's)

A group of providers willing and capable of accepting accountability for the total cost and quality of care for a defined population.



Payer Partners:

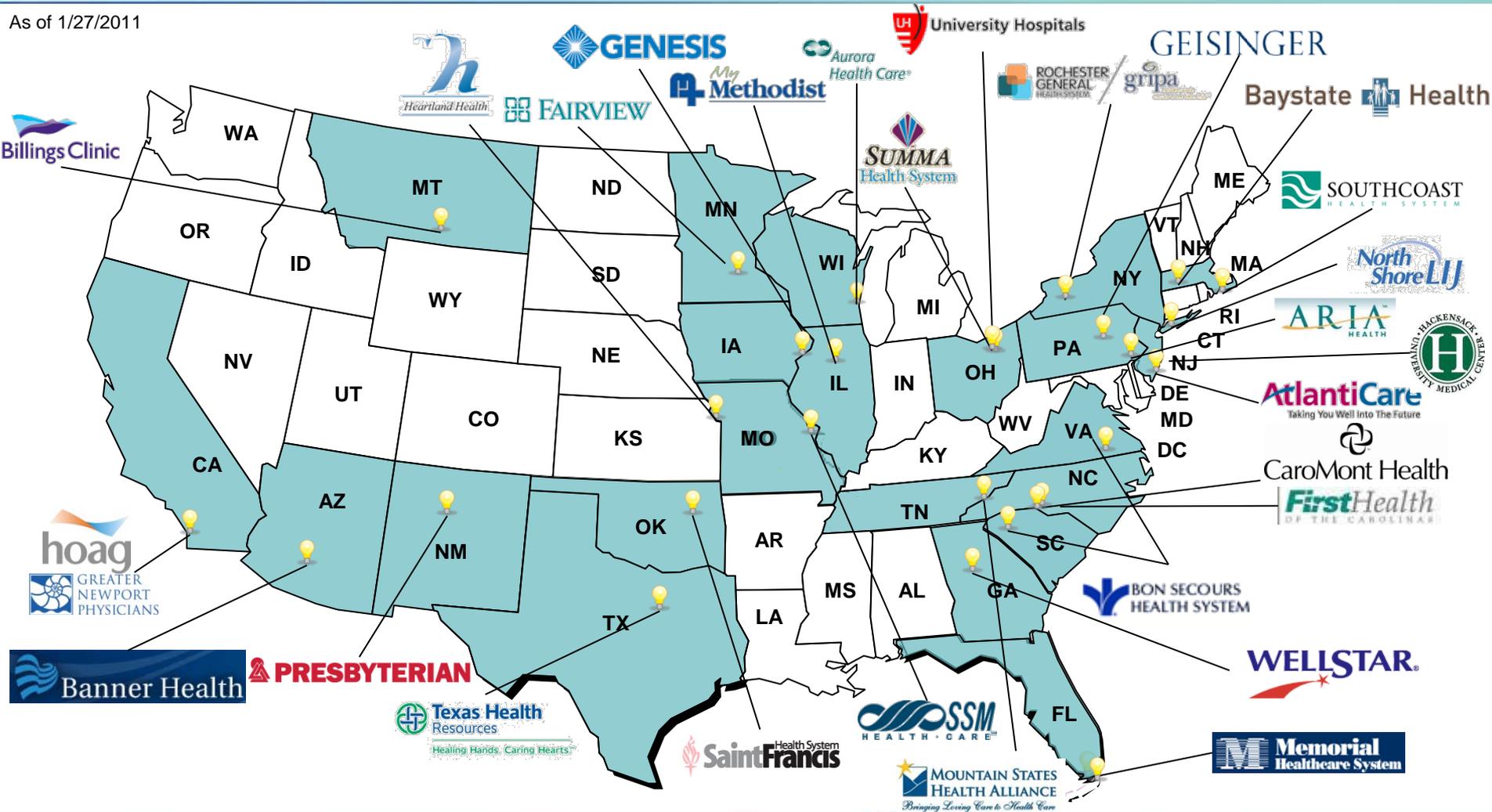
- ▶ Insurers
- ▶ CMS
- ▶ Employers
- ▶ States

- Builds patient centric systems of care
- Improves quality and cost for delivery system components
- Coordinates care across participating providers
- Uses IT, data and reimbursement to optimize results
- Builds payer partnerships & accepts accountability for the total cost of care
- Assesses and manages population health risk
- Reimbursed based on savings & quality – value

# Why is UDI and GDSN important? ACO's are coming

**Accountable Care**  
> IMPLEMENTATION COLLABORATIVE

As of 1/27/2011

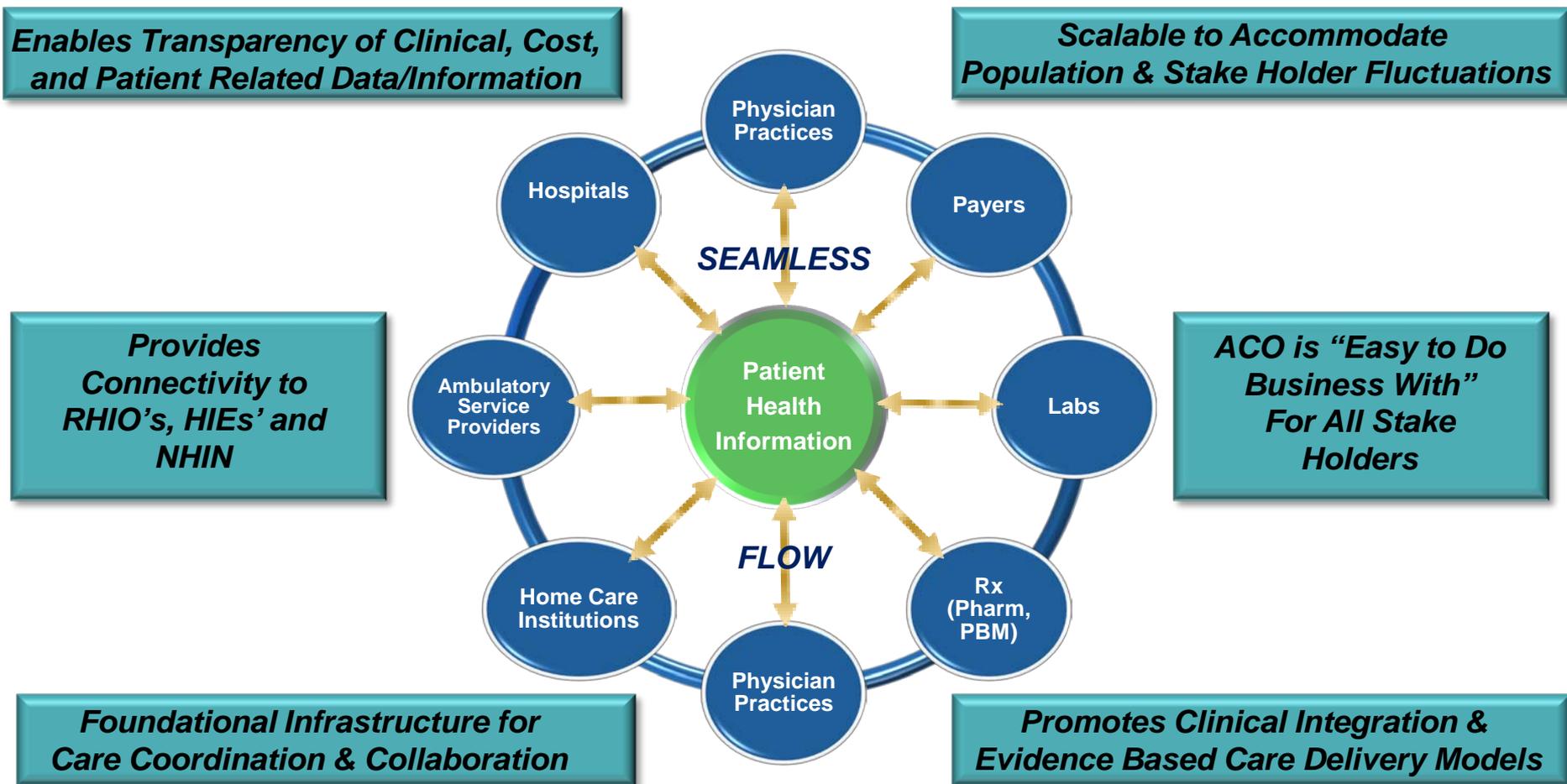




# Information Technology and Data

At the heart of the ACO population health framework

## Characteristics of the ACO Health Information Integration Platform (HIIP)



# Information Technology and Data

## Health Information Technology for Economic and Clinical Health (HITECH) Act

The Office of the National Coordinator for Health Information Technology (ONC) is at the forefront of the administration's health IT efforts and is a resource to the entire health system to support the **adoption of health information technology and the promotion of nationwide health information exchange to improve health care.**

The screenshot shows the homepage of the Office of the National Coordinator for Health Information Technology (ONC). The header features the U.S. Department of Health & Human Services logo and the ONC logo. A search bar and social media links are present. The main content area is divided into several sections:

- Health IT Home**: A sidebar menu with links to HITECH & Funding Opportunities, HITECH Programs, Federal Advisory Committees, Regulations & Guidance, ONC Initiatives, Outreach, Events, & Resources, and About ONC.
- Home > Health IT Home**: A breadcrumb trail.
- Meaningful Use**: A central banner with a photo of a doctor at a computer. Text reads: "Registration is now open for [Medicare and Medicaid EHR Incentive Programs!](#) Learn more about how to become a [meaningful user](#) of EHRs." Below the text is a "PAUSE" button.
- Feature**: A box titled "CMS Announces Initial Registration Numbers" with text: "More than 21,000 providers [initiated registration](#) for the EHR Incentive Programs in January. Also, more than 45,000 providers requested information or registration help from Regional Extension Centers." Below the text is a photo of two doctors.
- Navigation**: A vertical list of links: Health IT Buzz Blog, Federal Advisory Committee Blog, Health IT Journeys (Stories from the road), Why Health IT?, and What's New.
- Footer**: A box titled "It's Time to Get Connected!" and a "What's New" section with a link: "New Look, New Postings for Health IT Buzz Blog". Below the link is text: "Have you checked out the [blog's new look and latest postings?](#) ONC posts new

The **Health IT Standards Committee** is charged with making recommendations to the National Coordinator for Health IT on standards, implementation specifications, and certification criteria for the electronic exchange and use of health information.

# What are we doing to support UDI and GDSN?

## IBM Premier Integrated Healthcare Model supporting Accountable Care

UDI and GDSN are critical components in the interoperability of the future healthcare system!

### Core Master Data

Person  
Patient  
Organization  
Facility

Practitioner  
Unified Standard Codes  
Groupings/Hierarchies

### Provider

- ADT Event (Hospitalization)
- Biospecimen
- Encounter
- Finding
- Implant Tracking
- Lab Order
- Lab Result

- Location
- Order
- Patient Life Event
- Patient Medications; Includes Order, Dispense, Administration, Formulary
- Problem (chief complaint, etc.)

- Allergy
- Diagnosis
- Discharge Summary and Instruction
- Imaging
- Procedure (surgery?)
- Surgery
- Survey

### Payer

- Member (Insured)
- Subscriber
- Policy
- Coverage
- Benefit
- Claims (all types)
- Claims (Adjustments)

- Appointment
- Bill
- Bill Encounter
- Care Team & Role
- Contract (Patient)
- Contracts
- Disease Management
- Encounter
- Episode
- Event (General)**
- Exposure & Lifestyle
- General Ledger
- Location
- Patient Satisfaction
- Payroll

- Payer
- Regulatory Agencies
- Contact
- Groupings/Hierarchies
- (Unified Standard Codes)

### Supply Chain

- Purchase Order
- Invoice
- Product Item Master
- Purchase History
- Contracts
- Suppliers
- Wholesalers
- Distributors
- Product Pricing Tier
- Price Activation
- General Ledger
- Accounts Payable
- Accounts Receivable
- Contract (Supplier)

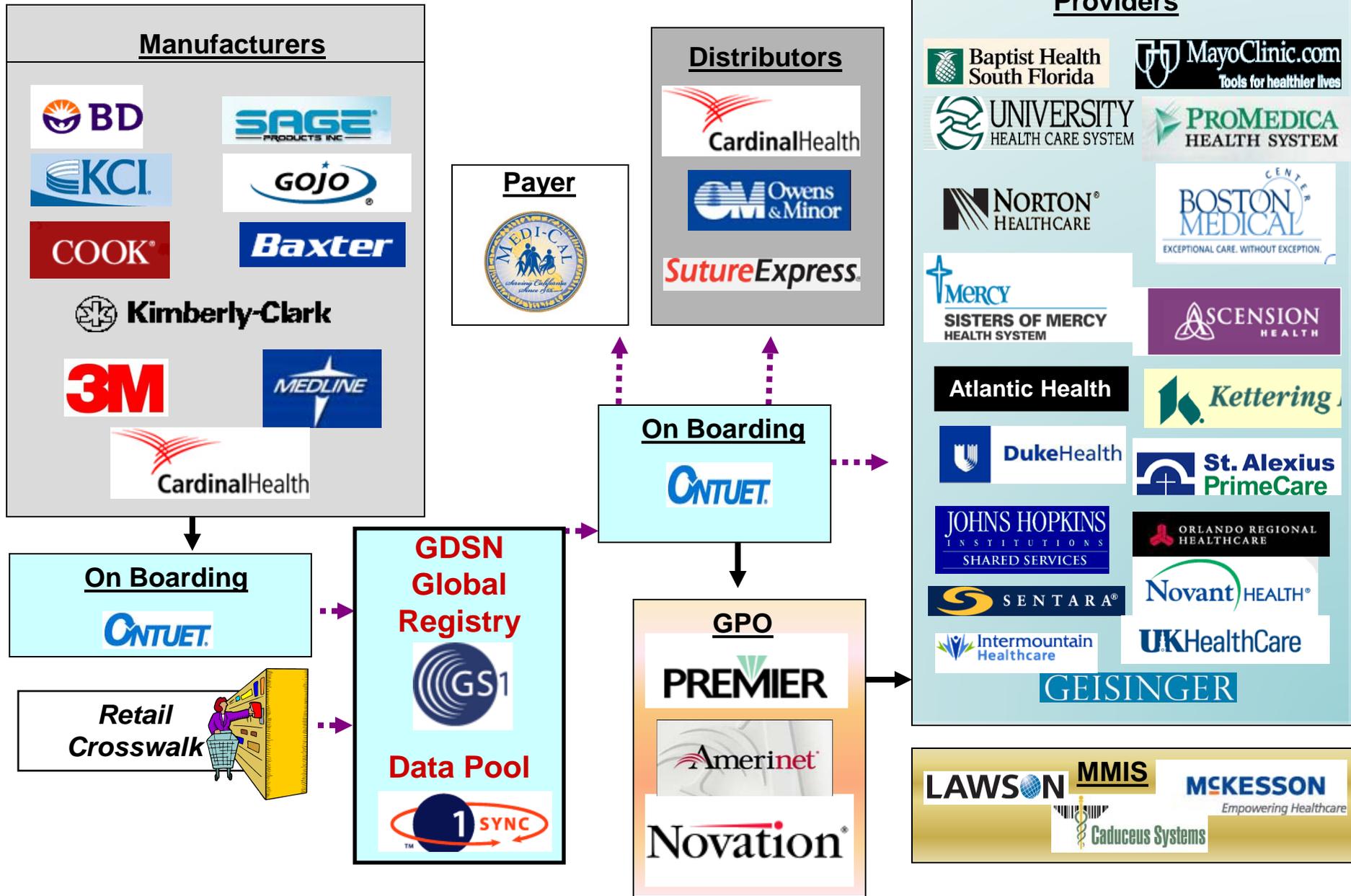
- EOB
- COB

- Immunization
- Location
- Product Master
- Release of Patient Info
- RFI/RFQ
- Service Line
- Study
- Surgery
- Survey
- Time & Attendance
- Insurance/Guarantor

- Supplier
- Wholesaler
- Distributor
- (Unified Standard Codes)

# What are we doing to support UDI and GDSN?

## Global Data Synchronization Pilots



# What are we doing to support UDI and GDSN?

## Premier's Synchronization

### Subscribed to the 1Sync Data Pool in 2010

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#### ❖ Synchronized with 103 Suppliers.

Healthcare	39
(Includes 23 Healthcare Retailers)	
Retail	21
Food	43

#### ❖ Products synchronized =14,510

Healthcare	6,575
Retail	854
Food	7,081



# What are we doing to support UDI and GDSN?

## Premier and Member Hospital Pilots

Pilot provided GDSN data along with Premier enriched data.

## **Pilot included GDSN data along with Premier enriched data.**

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**Participants** - Allegiance Health, Boston Medical Center, Geisinger

**Objectives** - Combine data from GDSN with Premier contract data and member-specific tier pricing, and share data forward in a format that can be easily uploaded into the member MMIS.

**Findings** - Compiling data into MMIS-readable format was successful for MediClick and Lawson systems. Combining GDSN with Premier contract data required bridging different systems – should be easier once GDSN is integrated into PIM.



# Thank you

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 **Healthcare Questions?**





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