DOD VA Sharing / Successes
DATA Synchronization

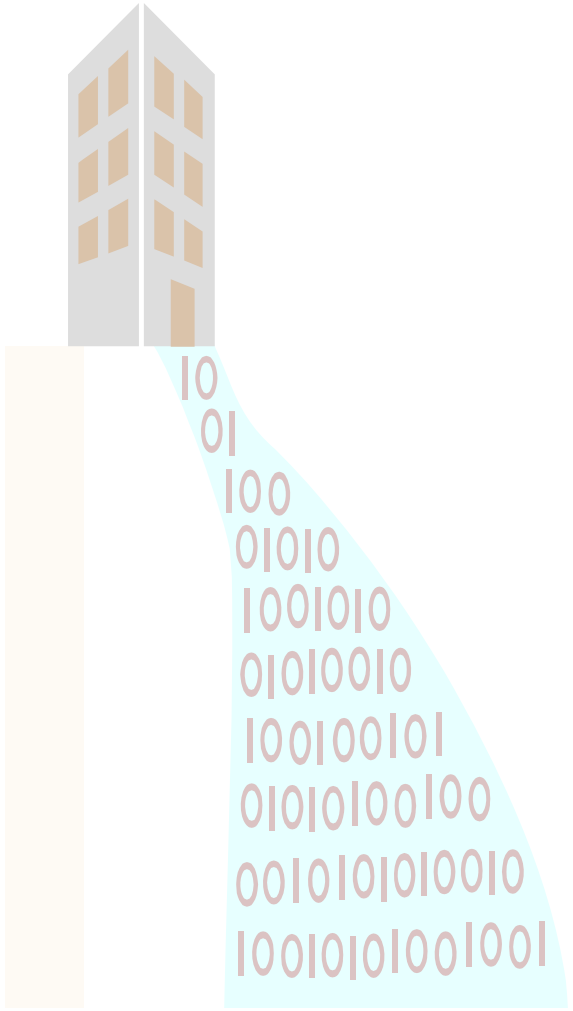
Power of VA DOD Sharing Conference
St. Pete Beach, Florida
June 3, 2009

Kathleen Garvin Program Manager, DoD/VA Data Synchronization Program
Michelle Whitehead VISN 5 Chief Logistics Officer Veterans Administration

Agenda

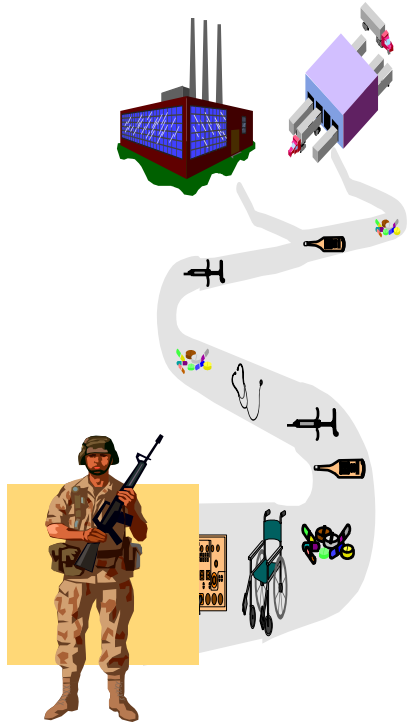
Building to Data Quality

- Problem – Bad Data - $$$ wasted in Supply Chain
- Healthcare Costs – Growing Concern
- Industry/Federal Collaboration/Progress Pilots/Programs
- DoD/VA Product Data Bank
- ***Way Ahead – GDSN*** – Venue to Patient Safety & more efficient hospital performance



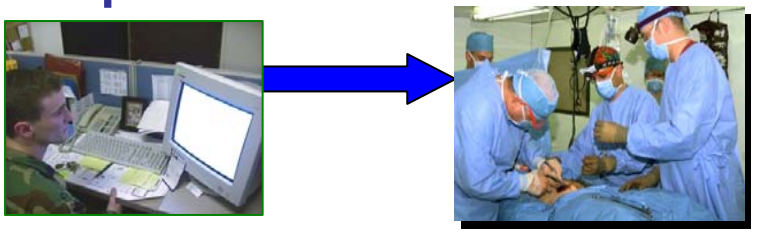
Need for Federal / Industry Collaboration

- DOD/VA Medical relies on commercially based supply chain
  - Commercial products & product ID vs. NSN
  - Close synergy & reliance on commercial supply channels
- No standard item identification in the med/surg industry
- Billions $$ lost
- DOD/VA data sync team working with the industry
  - Data Sync selected & funded as a Joint Incentive Fund (JIF) DoD/VA Sharing Project
  - Development & implementation of standardized, synchronized product data
  - Establishment of a Product Data Utility (PDU)
- RFID, FDA device identification, Electronic Health Record implementation require data solution



Veterans

Right data is the link to Readiness & Patient Health / Safety !



Signs of Bad Data & Results

Multiple DoD/VA Customer Dilemmas

- Multiple Manufacturer Names
- Multiple Product Numbers
- Inconsistent Item Descriptions
- Packaging Issues
- Old product data

Boxed – In by Bad Data

Who has it?
What is it?
How many do I get?
Is it obsolete?

Need for Clean Standardized Data

In Federal supply chain, bad data is causing:

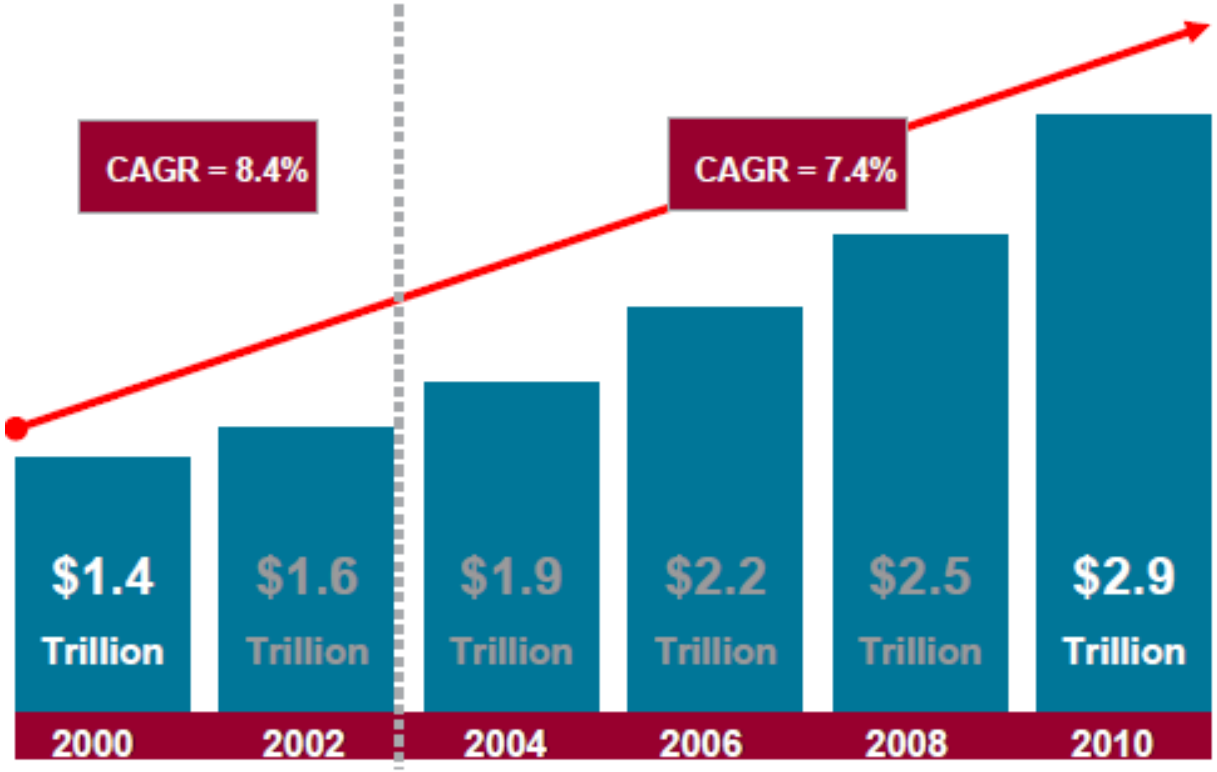
- **Dirty item masters**
- **Accounts Payable mismatches**
- **EDI kick outs and rejections**
- **Non-contract pricing**
- **Returns & credits for wrong items**
- **Inefficient use of resources**

Translates to Wrong Item - Time & Place for our Service Members & Veterans

Big Picture Environment

Rapid Growth in Healthcare Costs

U.S. National Healthcare Expenditures



CAGR - Compound Annual Growth Rate

Source: Center for Medicare & Medicaid Services; industry reporting; Pipal Research

By 2010:

$2.9 Trillion = Overall Healthcare Expenditures

18% of GDP = Healthcare Expense

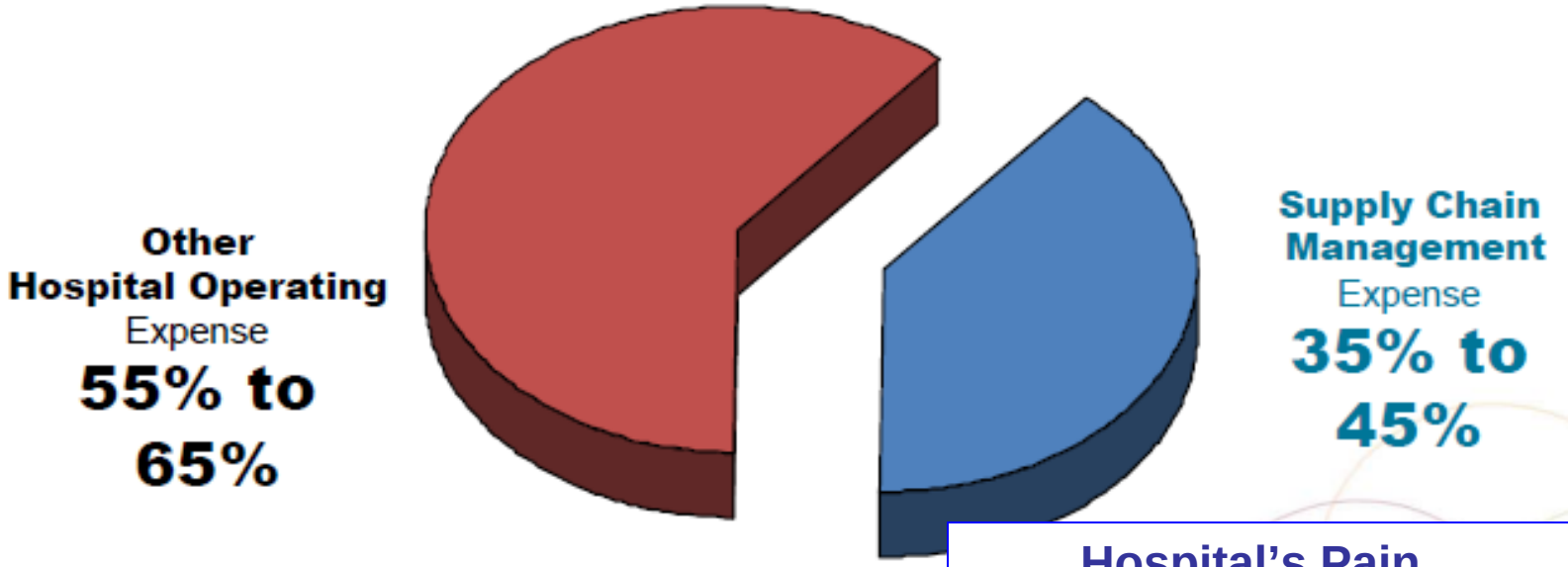
24% U.S. Population: Age 60 & Above

2008 Healthcare Executive Survey on Supply Chain Management

Healthcare Supply Chain

Where can Quality Data help reduce costs?

Total Supply Chain Expense as a Percentage of Total Hospital Expense



Hospital's Pain

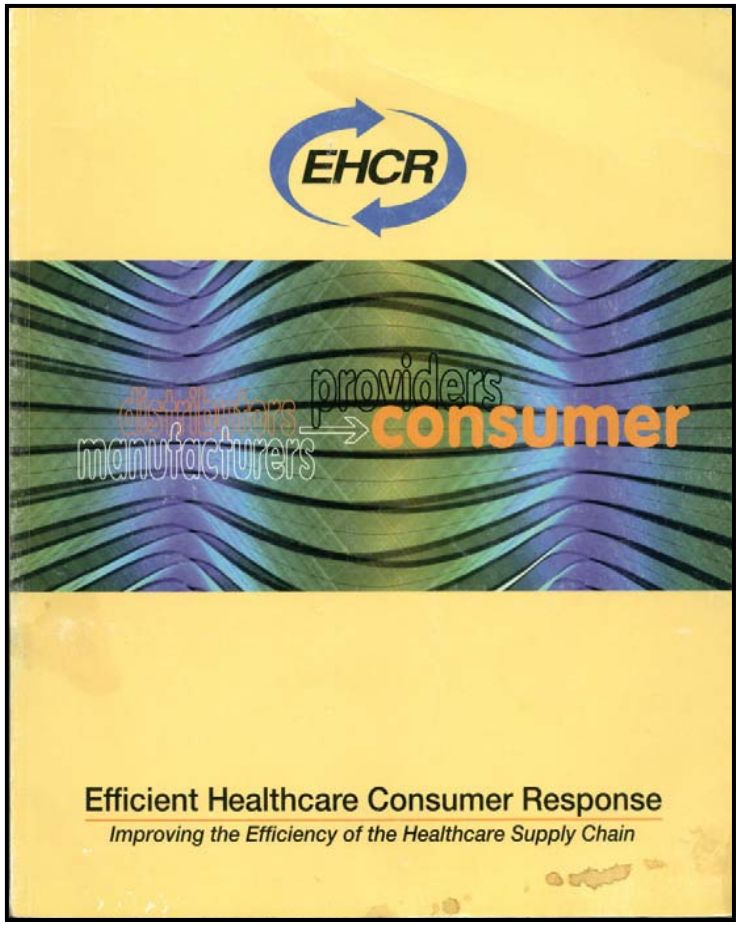
William Beaumont Hospitals Mich

- **To stem projected $22 M loss in 2008**
- **Lay off 165 workers**
- **Doctors 10% pay cut**
- ***Wringing $10 million out of its supply chain***

Crain's Detroit Business Nov 17 2008

2008 Healthcare Executive Survey on Supply Chain Management

Healthcare Supply Chain:
Opportunities Where are the Savings?



"$16 Billion (or 48%) of . . . supply chain costs are avoidable *process* costs in the existing healthcare products supply chain."

Improving the Efficiency of the Healthcare Supply Chain
EHCR November 1996
Updated 2006: Department of Supply Chain Management, Arizona State University

Data Synchronization
Goals / Strategy

GOALS

- Facilitate patient safety
- Reduce costs
- Eliminate manual work
- Reduce clinical frustration
- Improve speed of delivery
- Improve analysis
- Improve recall
- Reduce operational expense
- Increase collaboration
- Improve business intelligence
- Improve back office productivity

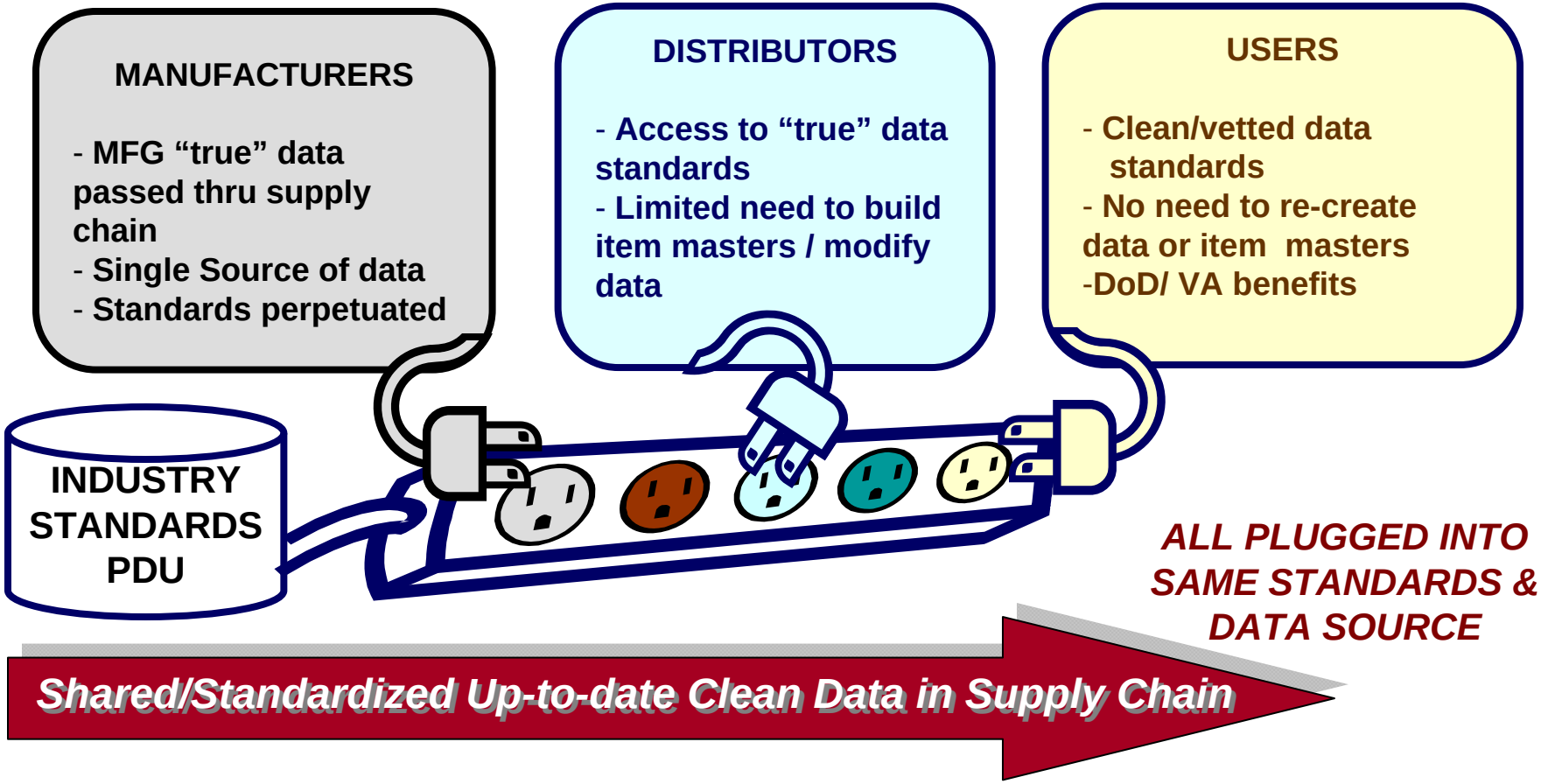
Strategy

- Full partnership w/VA
  - Create single "Universal" Med Surg Prod Fed Catalog
    - Spend Analysis Capability
    - Improve Readiness Product Visibility
- Cleanse our Data Internally & Promote Data Sync w/Supply Chain Partners
- Pilot a "proof of principle" PDU for Industry
- Partner with Industry Stakeholders
- Move to Industry Sponsored PDU
- Capitalize on Proven Existing System/Technologies

Promote Fed Needs Into Industry Solution

Future Healthcare Data Vision

"Data Connected Supply Chain"



Data Sync History –
How We Got Here – Where We're Going

1990s | 2002 | 2003 | 2004 | 2005 | 2006 | 2007 | 2008

DoD / VA MOU

PDU FEASIBILITY STUDY ARMY EZSAVE

Data Sync Tools

JOINT FED WORK GROUP

GLNs by 2010

GTINs by 2012

DSCP UPN

DoD PDU PILOT EZSAVE TO SVCs DEVLOP PDB

Pilot PDU

"Build Own"

DoD/VA JIF CATALOG

DoD VA JIF Program

DoD GDSN PILOT

ON-GOING EFFORTS

DoD Data Synchronization
PDU Pilot Program Phase I

PDU Proof of Principle for Industry

Manufacturer as source of data

"Build Own" PDU

Foundation block for Federal and Industry Data Collaboration / Partnership

DoD Pilot Shows Results

Example of BD & DoD Before & After

	Becton Dickinson		DoD	
	Before	After	Before	After
Missing Middle Levels of Pkging	2%	<1%	20-25%	2-5%
Hard "Packaging Quantity" Errors	<1%	0	2%	<1%
Unit of Measure Confusion/Misuse	2%	1%	2-5%	1-2%
Missing Packaging—not Middle Level	1%	<1%	3-7%	1-3%
Manufacturer Name Problems	NA		1-4%	<1%
Obsolete Products	0%		1-8%	<1%
Missing Product Brand Names	0%		5-10%	1-3%
Incomplete Item Descriptions	0%		5-15%	3-5%

DoD - Lessons Learned

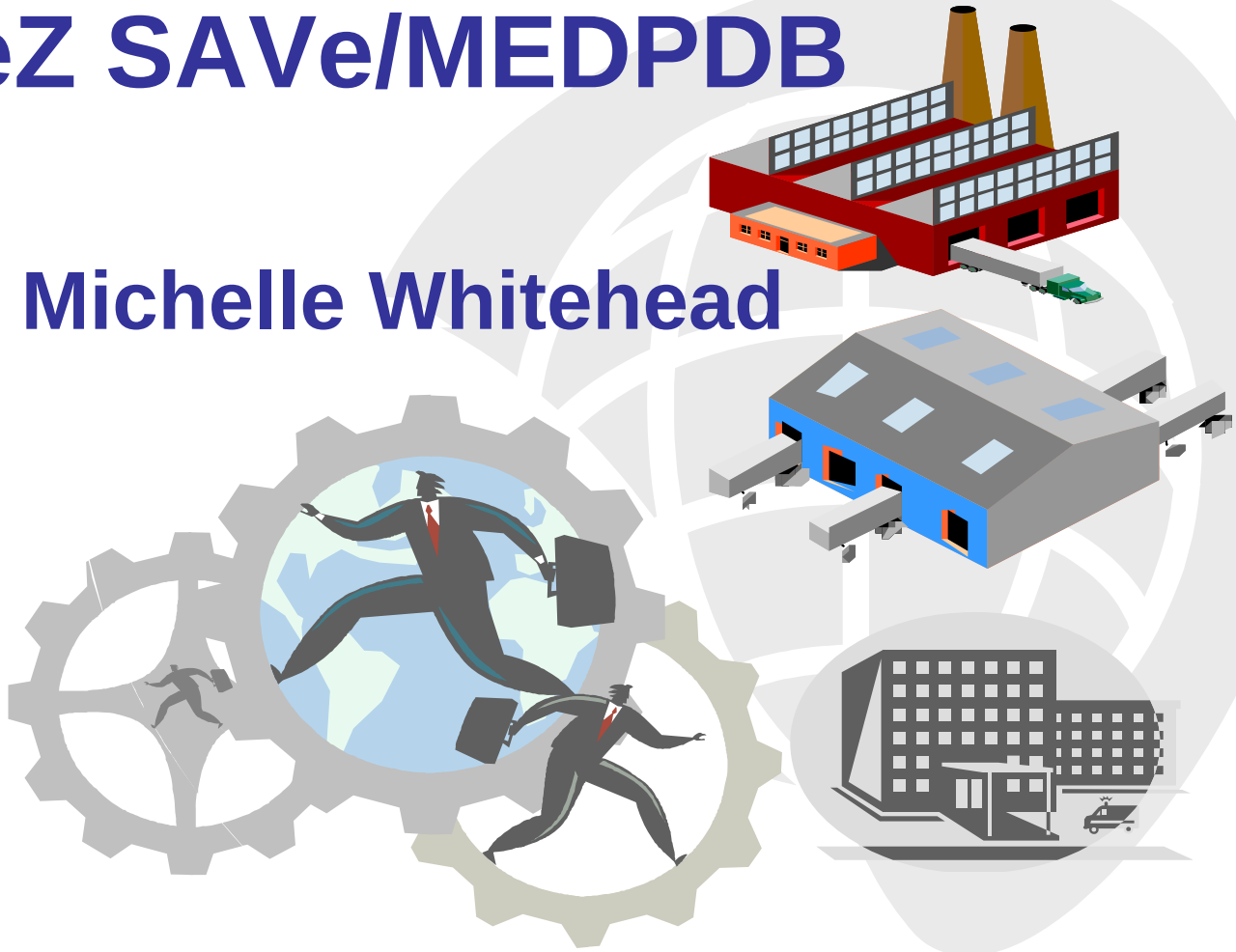
- **DoD's UPN Initiative 1993**
  - Assignment of numbers without a process in place to certify and distribute does not work
- **Cleaning and standardizing in-house data is not enough.**
  - Very expensive resource intensive to constantly cleanse data – plus efforts multiplied across supply chain
  - Adopt standards
  - Adoption of a central industry-wide PDU is the way to achieve consistent, clean, standard medical product data for the entire healthcare supply chain
- **Created a pilot data utility resulting in a PDB of million + records with improved robust data**

Synchronizing and accessing data from central utility:

- Reduces bad data and costs (***real savings of $36M+ to date***)
- Increases operational efficiencies

eZ SAVe/MEDPDB

Michelle Whitehead



Main Topics

- Capabilities
- Reducing Healthcare Costs
- Patient Safety (Recalls)
- Out of Stock and Backorder Alternatives
- Federal Level Contract Tools

Various Capabilities Available in MEDPDB

MEDPDB:

- eZ SAVe price reduction tool
- Best Price Analysis
- Spend Analysis
- Contracts and Pricing for DoD and VA
- Commercial Benchmark Pricing
- Site purchase history (300+ DoD & VA sites)
- Terminal items & likely to go terminal

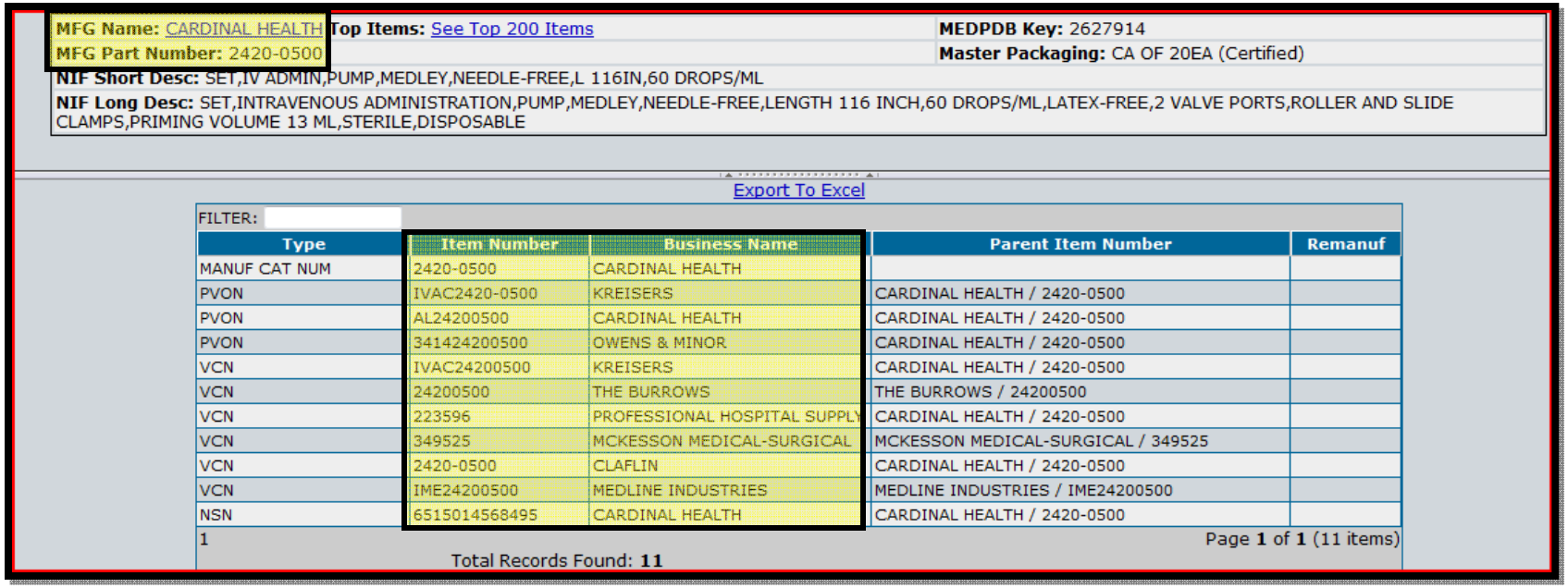
Tools developed to demonstrate the capabilities & benefits of using synchronized Med Surg Data

Readiness capabilities:

- Theater-centric views
- Site-specific sourcing
- Top medical readiness items with no contract coverage
- Commercial item sourcing info for National Stock Numbers
- Comparisons of medical assemblages for “like” items

The “Magic” behind pricing transparency

- Every vendor puts their own number on an Original Manufacturer’s product
  - Makes product price comparisons difficult



MFG Name: CARDINAL HEALTH **Top Items:** See Top 200 Items **MEDPDB Key:** 2627914
MFG Part Number: 2420-0500 **Master Packaging:** CA OF 20EA (Certified)
NIF Short Desc: SET,IV ADMIN,PUMP,MEDLEY,NEEDLE-FREE,L 116IN,60 DROPS/ML
NIF Long Desc: SET,INTRAVENOUS ADMINISTRATION,PUMP,MEDLEY,NEEDLE-FREE,LENGTH 116 INCH,60 DROPS/ML,LATEX-FREE,2 VALVE PORTS,ROLLER AND SLIDE CLAMPS,PRIMING VOLUME 13 ML,STERILE,DISPOSABLE

Export To Excel

FILTER:

Type	Item Number	Business Name	Parent Item Number	Remanuf
MANUF CAT NUM	2420-0500	CARDINAL HEALTH		
PVON	IVAC2420-0500	KREISERS	CARDINAL HEALTH / 2420-0500	
PVON	AL24200500	CARDINAL HEALTH	CARDINAL HEALTH / 2420-0500	
PVON	341424200500	OWENS & MINOR	CARDINAL HEALTH / 2420-0500	
VCN	IVAC24200500	KREISERS	CARDINAL HEALTH / 2420-0500	
VCN	24200500	THE BURROWS	THE BURROWS / 24200500	
VCN	223596	PROFESSIONAL HOSPITAL SUPPLY	CARDINAL HEALTH / 2420-0500	
VCN	349525	MCKESSON MEDICAL-SURGICAL	MCKESSON MEDICAL-SURGICAL / 349525	
VCN	2420-0500	CLAFLIN	CARDINAL HEALTH / 2420-0500	
VCN	IME24200500	MEDLINE INDUSTRIES	MEDLINE INDUSTRIES / IME24200500	
NSN	6515014568495	CARDINAL HEALTH	CARDINAL HEALTH / 2420-0500	

1 Page **1** of **1** (11 items)

Total Records Found: **11**

What about FDA Recalls and Patient Safety?

- Hospitals do not always use the manufacturer name and number in their stock room
  - Military MTFs might use the NSN
    - If using an NSN, then there are multiple commercial items that are suitable for that NSN
    - How do you know if you are stocking the “recalled” item
  - What if you are stocking it by the vendor number?
    - The FDA does not issue recall notices for all known vendors and vendor part numbers—it is the hospitals responsibility to know what items they are actually stocking

***Item searches available in MEDPDB for all known part numbers—return you to the OEM MFG and PART NUMBER

Patient Safety—FDA Recalls

How do you know/research to see if the item is stocked?

Class 1 Recall: Teleflex Medical, Arrow International Inc. 30, 40, and 50 cc Intra-Aortic Balloons

Date Recall Initiated: **February 2, 2009**

Product: Arrow International 30, 40, and 50 cc Intra-Aortic Balloons

The recalled model:

8 Fr 30cc Narrow Flex IAB Catheter Kit, Product Number: IAB-04830-U

MFG Name: TELEFLEX **Top Items:** See Top 200 Items | **MEDPDB Key:** 7337083

MFG Part Number: IAB-04830-U | **Master Packaging:** EA (Certified)

Short Description:

Long Description: KIT INSERTION INTRA-AORTIC CATHETER 8FR 30ML 0.30IN GUIDEWIRE STOPCOCK PRESSURE TUBING SCALPEL INTRODUCER NEEDLE HEMOSTASIS SHEATH DILATORX2

Export To Excel

FILTER:

Type	Item Number	Business Name	Parent Item Number	Remanuf
MANUF CAT NUM	IAB-04830-U	TELEFLEX		
PVON	0455AB04830U	OWENS & MINOR	TELEFLEX / IAB-04830-U	
VCN	IAB04830U	TELEFLEX	TELEFLEX / IAB04830U	
VCN	ARROW01	CAMBRIDGE SYSTEMS	TELEFLEX / IAB-04830-U	

1 Page **1** of **1** (4 items)

Total Records Found: **4**

****Item could be in you inventory system under any of these 4 numbers or even an NSN which would not match the FDA info given**

Finding Alternative Items

Stock outages, recalls and backorders

- Cardinal 72023e is #1 IV administration set in DoD and VA
  - What if this item went on backorder or was recalled?
    - Need source of data to find equivalent and similar items
    - Supplyline taxonomy provides that solution in MEDPDB

PDB Web Utilities Page

Best Price and Spend Analysis Tools

Spend Analysis by manufacturer or product category is available. In addition, Best Price Analysis useful for potential contracting opportunities.

Theater Tools

- Theater Item Search - Search for USAMMCE (CB6) or USAMMC-SWA (R2L) items.
- CB6 Items Not At R2L - Download list of items cataloged at CB6 and not at R2L. Depending on your connection speed, this download could take a few seconds.
- R2L Items Not At CB6 - Download list of items cataloged at R2L and not at CB6. Depending on your connection speed, this download could take a few seconds.

Readiness Analysis Tools

- Army Assemblage Sourcing Analysis - Review PDB sourcing for all Army assemblages.
- Navy Assemblage Sourcing Analysis - Review PDB sourcing for all Navy assemblages.
- Marine Assemblage Sourcing Analysis - Review PDB sourcing for all Marine assemblages.
- Air Force Assemblage Sourcing Analysis - Review PDB sourcing for all Air Force assemblages.
- Batch NSN Sourcing Analysis - Review PDB sourcing for an imported set of NSNs.
- Site NSN Sourcing - Export NSN sourcing information tailored for a particular site. ***TEST USE ONLY***
- Assemblage Comparison Analysis - Compare two assemblages for similarity.
- Batch Assemblage Comparison Analysis - Compare assemblage to an imported set of NSNs.

Spend Analysis

- Spend Analysis Search - Spend Analysis By Manufacturer or SupplyLine Taxonomy.
- Best Price Opportunity Search - Best Price Analysis.

PDB – What's Next?

- Integrate emerging industry global data standards in DoD Medical Logistics Systems
- VA Strategic Asset Management (SAM) Integration
- Create VISN/TRBO views utilizing best price opportunities to identify contracting opportunities
- Extend eZ SAVe and MEDPDB to all VA and DoD sites

Global Data Synchronization Network (GDSN)

The Way Ahead

GS1 growing at Federal level AAFES/DeCA/IDTS

Top GPOs Promoting GS1Standards

Hospitals Demanding GS1Standards

Global pilot GS1 Success

GHX Certified GS1data pool

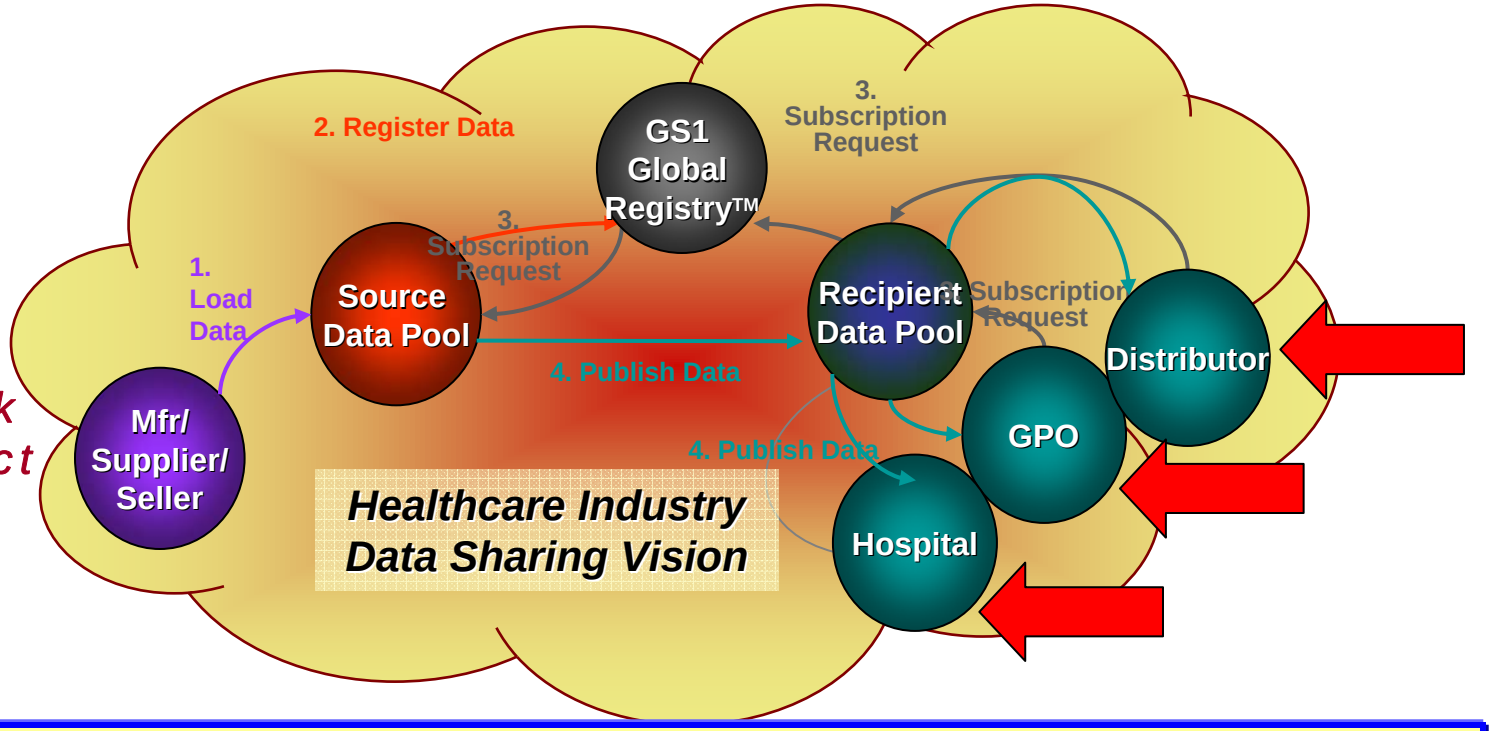
FDA Working with GS1

DoD/VA Data Sync Computerworld Laureate Award

Healthcare GDSN Model

Expanding the Wal Mart Retail GDSN Model

GDSN Network Built for Product Data



Global model where manufacturers store standardized attributes about the items they own and publish item information to authorized trading partners in a secure data transaction.

Standardized messaging within the system allows trading partners to reconcile differences electronically. As mistakes are recognized and corrected, all subscribers receive the corrected information electronically.

All participants are welcome to participate in the development of the standards.

Healthcare Community – Moving to Adoption

Industry Data Solution Set

GS1 Worldwide – System of Standards

Global Standards for data Synchronisation

STANDARDISED, RELIABLE DATA FOR EFFECTIVE BUSINESS TRANSACTIONS

GS1 Global Healthcare

GS1 has formed a Healthcare Users Group that is a voluntary, global user group bringing together all healthcare stakeholders.

Data Solutions

- **Global Trading Partner Identification - GLN**
- **Global Product Identification - GTIN**
- **Global Product Data Management GDSN (Product Data Utility- PDU)**

Global Supply Chain Identification
Global Location Number (GLN)

Healthcare Adopts the GLN
Registry for Healthcare®

1100004570208 SAINT JOHN'S QUEENS HOSPITAL

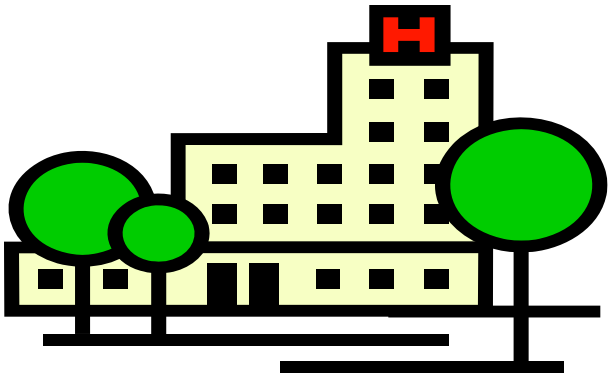
Internal locations

(Parent Child)

1100004570209 – OR

1100004570210 – Pediatrics

1100004570211 – Eye Clinic



GS1 US

One standard locator GLN

One address rationalized through

for each location

Global Trade Item Number (GTIN)

- GS1 GTIN is Global Trade Item Number that uniquely identifies products and services
- An unambiguous identifier down to each packaging level
- A global standard for collaborative commerce
- Formerly UCC/EAN-128, ITF-14, GS1 DataBar formerly RSS, GS1 Data Matrix Bar codes, plus Electronic Product Codes (EPCs)
  - 1 digit – Indicator denotes packaging level
  - 12 digits – GS1 Company Prefix + Item Reference assigned by Manufacturer
  - 1 digit – Check Digit

Why GDSN

- Established industry neutral platform with technology inputs from multiple global industries
- Millions invested in the development of the infrastructure insulating healthcare from start up costs
- Proven global capability in standards development and governance
- Mandated by the world's largest retailers & used by largest global industries – Grocery, Automotive, Retailers
- Millions of items are managed in the system today

Expanding base of Healthcare Organizations That Publicly Announced Support of GS1 Supply Chain Standards

Members of Strategic Marketplace Initiative

Allina Hospitals & Clinics
Atlantic Health
Baptist Health System
BJC HealthCare
Bon Secours Health System, Inc.
Carolinas HealthCare System
Catholic Healthcare East
Catholic Healthcare West
Duke University Health System
Geisinger Health System
Greenville Hospital System
Intermountain Health Care
Iowa Health System
Johns Hopkins Health System
Kettering Health Network
Loma Linda University Medical Center
Mayo Clinic
OhioHealth
Orlando Health
OSF Healthcare System
Parkland Hospital and Health System
Providence Health & Services
Sentara Healthcare
Sisters of Mercy ~ ROi
SSM Health Care
SUNY Downstate Medical Center
Texas Health Resources
The Methodist Hospital System
University Kentucky HealthCare
University of Rochester
WellSpan Health
Yale New Haven Health System

- Sisters of Mercy ROI
- Amerinet
- CHeS
- Healthcare Supply Chain Standards Coalition
- GHX
- Novation
- Georgia Society for Healthcare Materials Management
- Ascension Healthcare
- BD

Premier

Child Health Corporation of America
Banner Health System
Bon Secours Health System, Inc.
Health Enterprises Cooperative
Catholic Healthcare West
Prairie Health Ventures
Adventist Health
Baptist Health South Florida
Methodist Healthcare
Texas Health Resources
Detroit Medical Center
Sharp HealthCare
Methodist Health System
Fairview Health Services
Henry Ford Health System
PeaceHealth
SSM Health Care
Resurrection Health Care Corporation
University of Texas MD Anderson Cancer Center
Greater New York Health System Association
Adventist Health System
Cleveland Clinic
Catholic Healthcare Partners
Yankee Alliance, Inc.
West Penn Allegheny Health System

GS1 GDSN

2008 GS1 Healthcare Leadership Team*

- Co-Chairs:
  - **Mark Hoyle**, AIDC Manager, COE Packaging, Covidien
  - **Tim Marsh**, Senior Manager, Pfizer Global Package Technology

Abbott	Mike Wallace
Alcon Pharma	Grant Hodgkins
B.Braun	Volker Zeinar
CHU Aulnay	Frédérique Fremont
CVS	Ramesh Murthy
GSK	James Hickland
J&J	Tom Werthwine
McKesson	Ron Bone
Medtronic	Jackie Elkin
Novartis	Scott Cameron
Premier	Joe Pleasant
Smiths Medical	Jim Willmott

*11 Jul 2008
GS1 Healthcare Newsletter

FDA and Industry Collaboration for Unique Device Identification

U.S. Food and Drug Administration FDA

- New York Times article highlighted FDA study. (April 1, 2005)
- Held series of meetings with stakeholders – manufacturers, federal agencies and providers. (Premier attended provider meeting Oct. 2005.)
- White paper developed by ECRI summarizing current available technologies.
- FDA released its report of its Medical Device Postmarket Safety Program -- several references to the need for unique identification of medical devices.
- FDA states: *"We will champion the development of a system to provide unique device identification, a standardized ... accepted nomenclature for devices, and mechanisms ... ce users to include this information in ...*

Congress and President sign Act in September 2007

U.S. Food and Drug A...

CENTER FOR DEVICES AND RAD...

FDA Home Page | CDRH Home Page |

FDA > CDRH > Unique Device Identificaton

Unique Device Identification

On September 27, 2007, the Food and Drug Administra... into law. This act includes language related to the estabi... System. This new system when implemented will require...

- the label of a device to bear a unique identifier, unless an alternative location is specified by FDA or unless an exception is made for a particular device or group of devices.
- the unique identifier to be able to identify the device through distribution and use
- the unique identifier to include the lot or serial number if specified by FDA

FDA will shortly begin developing draft regulations to implement these requirements. Interested stakeholders may wish to subscribe to Email updates for Unique Device identification to be notified as they become available.

FDA Unique Device Identification Implementation

- Accommodates use of GS1 GTIN

- Co-sponsoring GS1 HC conf

Jun 09 in DC

FDA Unique Device Identification Public Workshop

What should be the UDI's components? Could existing standards, such as the standards used by GS1, Health Industry Business Communications Council (HIBCC), or others be used as a model for the UDI system? **Feb 09**

FDA Public Responses

***RESPONSE*: There is a clear advantage for using the GS1 system in that it has been in use by other industries for many years, it is recognized globally and it is committed to modifying its standards as needed for healthcare products.**

SSM Health Care St. Louis, MO
Kettering Health Network Kettering, OH
Regional Health Rapid City, SD
St. Anthony's Medical Center St. Louis MO
Sharp Healthcare
Molnlycke Healthcare
Spearfish Regional Hospital, Spearfish SD
Premier Health Alliance
McLeod Health Florence, SC
St. Francis Hospital & Medical Center Hartford, CT
Rapid City Regional Hospital Rapid City, SD
Peninsula Regional Medical Center Salisbury MD
Greater New York Hospital Association NY,NY
Avera Queen of Peace Health Services Mitchell, SD
Advancing Patient Safety Coalition

Novation *– GTIN GS1 GDSN meets the UDI criteria*

Yale New Haven Health System *– GTIN will fill the requirements, one standard regardless of Mfg*

ECRI Institute *– Having multiple standards for presenting a UDI will cause significant amount of confusion & potentially dramatically increase the cost of adopting UDI*

Becton Dickinson *– Any change from GTINs as an identifier would require several years & millions of $ virtually all of medical devices BD sells in the US are marked with a GS1 GTIN at shipping unit level.*

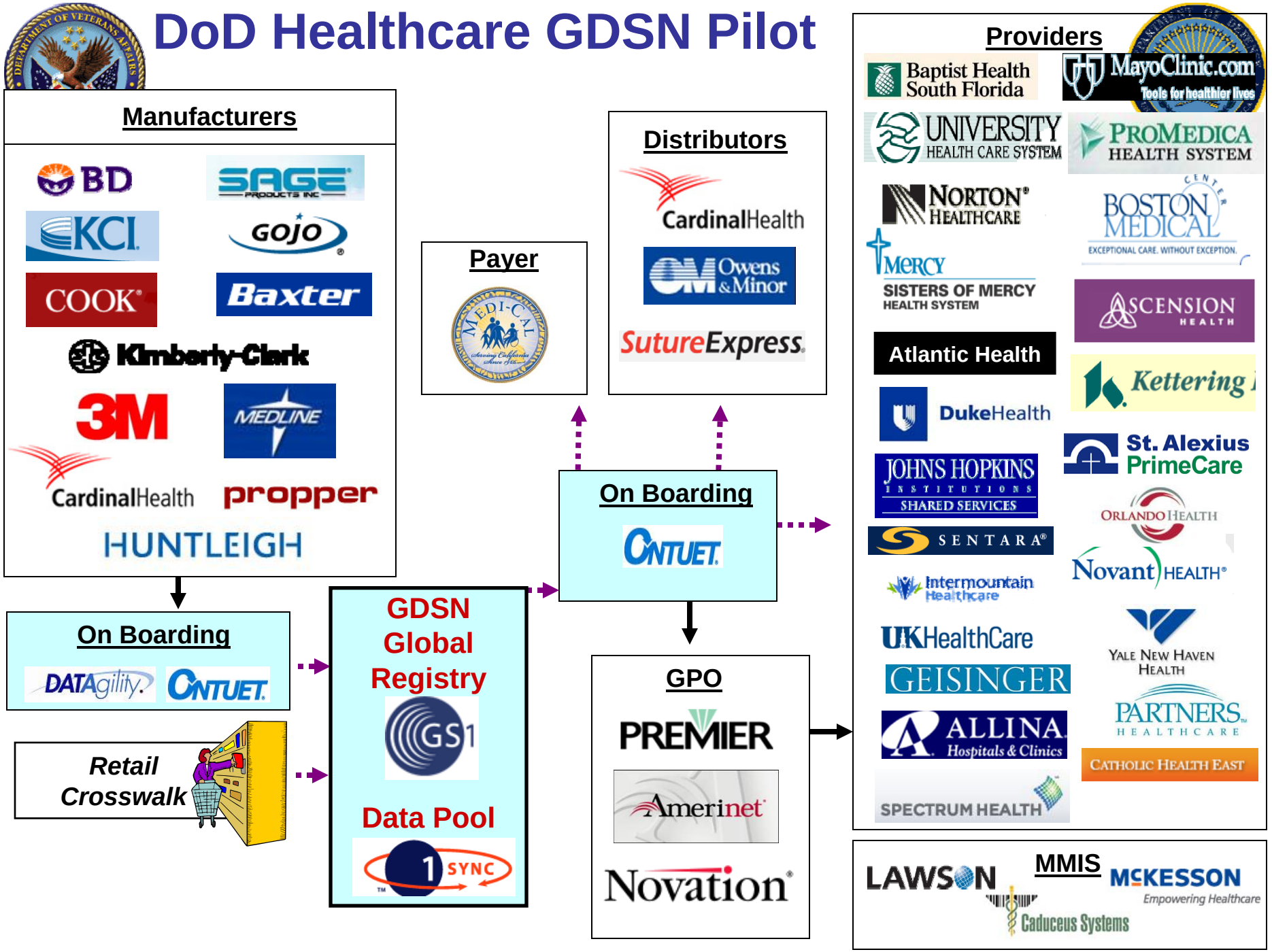
AHRMM *– Support use of GS1 standards* ***ALCON Labs Inc*** *– Strongly supports & recommends GS1*

Advancing Patient Safety (APS) Coalition
FDA Response Signers

***RESPONSE**: There is a clear advantage for using the GS1 system in that it has been in use by other industries for many years, it is recognized globally and it is committed to modifying its standards as needed for healthcare products.*

Association of American Medical Colleges
American Association of Retired Persons
Alliance for Advancing Nonprofit Health Care
Alpha-1 Foundation
American Academy of Orthopedic Surgeons
American Association of Neurological Surgeons
American Heart Association
American Hospital Association
Association for Healthcare Resource & Materials Management
Association for Professionals in Infection Control & Epidemiology
Catholic Health Association
Congress of Neurological Surgeons
Federation of American Hospitals
The Joint Commission
National association for Continence
National Rural Heath Association
Novation
Peacehealth
Premier Inc.
Scoliosis Research Society
The Society of Healthcare Epidemiology Of America
Texas Health Resources
University HealthSystem Consortium
West Penn Allegheny Health System
West Virginia United Health System
White River Health
White River Health System
VHA Inc

DoD Healthcare GDSN Pilot



What We Learned in GDSN Pilot

Manufacturer:

- Have data, just not in one place – need an internal product data strategy
- Need for an Industry-wide product data strategy
- Global impact on decisions

GPO:

- Can consume GDSN data with minor changes to current system
- Minor enhancements required to deliver GDSN data using existing delivery system
- Well positioned to provide standards based integration approaches beyond current delivery mechanism

Software Provider:

- Internal business systems have many of the fields, technology and processes to get started with data synchronization
- Long term, they will need to be further adapted for new processes driven by the GDSN

Hospital:

- Can use data for spend analyses
- Project significant savings in reconciliation of GPO and distributor item files

GS1 Healthcare – Global Pilot

GS1 Healthcare Lessons Learned – Summary

- GDSN "plumbing" works for data and messages between pools
  - Messages were received as expected and in good time
  - Expected vs. received GTIN counts needs to be studied in more detail. but overall me
- US Pilot Wo
  - Should Br
  - Should US
- Need for glo
  - Helpful to
  - Global gui
  - Agreemer and/or mu
  - Strategies
    - Latex packa

BD Baxter GS1 Australia

GDSN Data Field Recommendations for US Medical Products – 1.0

Required for each packaging level:

GTIN 14 character unique identifier for the pack level	**Pack Level Indicator** Is pack level an Each, Pack, Case, Pallet etc.	**Manufacturer Part Number** For reference, to tie GTIN to existing buyer MMIS
Manufacturer Name Manufacturer of the product	**Information Provider** Name and GLN of the publisher of the data	**Branding** Name and GLN of the brand owner and the recognized Brand Name of the product
Target Market Country where product is approved for publishing	**GPC Code** Is item a medical product or pharmaceutical	**Package Markings** Is the package marked with a batch number?
Pack Hierarchy Questions Child GTIN and quantity of next pack level	**Functional Name** What does this product do? Often populated with a description from manufacturer's internal code.	**Descriptions*** Multiple fields and lengths are available for manufacturers to publish their best descriptions

Commodity Codes Manufacturers can publish several commodity codes they may have assigned to their products (UNSPSC, HCPCS)	**Package Markings** Does the package display latex markings? Is packaging marked with a bar code? Is the package marked as sterile? (future)

Global leadership team has endorsed 40 attributes for initial implementation based on lessons from pilots

October 15, 2008

Summary - Industry GS1 Standards

- HC Supply Chain will adopt GS1 for MED SURG product data standards and data sharing:
  - DoD GS1 pilot growth in excess of 40 healthcare providers and distributors
  - GS1 Healthcare US selects & recommends GS1 40 attributes key to establishing a healthcare data pool – GS1 Healthcare Global concurs
  - Major healthcare players endorse GS1 data standards (GTINs, GLNs – product & organization IDs) and data sharing network (GDSN)
  - DoD & FDA's UDI collaboration implementation follow industry's move to GS1 standards
- DoD/VA consumption must prepare internal systems for GS1 standards (GTIN/GLNs)

DoD/VA Must be prepared…

- **Leading GPOs will adopt GS1 standards requiring use of GTINs & GLNs in contracts with their medical device suppliers & manufacturers:**

Premier (800 suppliers/mfgs)	Amerinet (700 supplier partners)	Novation (500 suppliers)

  - 2010 GLN Sunrise
    Adoption of GLN in Healthcare by 2010
    Global Location Numbers (GLNs)

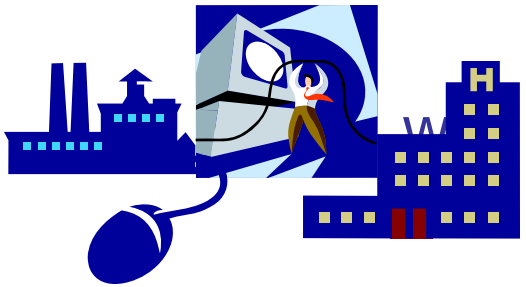
    The goal of the 2010 GLN Sunrise is to use standardized location identification (GLNs) by December 2010

  - 2012 GTIN Sunrise
    Adoption of GTIN in Healthcare by 2012
    Global Trade Item Numbers (GTINs)

    The goal of the 2012 GTIN Sunrise is to use standardized product identification (GTINs) by December 2012

Where Are We Going?

- Continue partnership with VA & other Federal partners
- Collaboration with Healthcare Supply Chain to GS1 Standards Implementation
- *Prepare Federal systems to accommodate GS1 standards*
- Collaboration to implement FDA's UDI
- Integrate MEDPDB into legacy systems GDSN Solution



Need your help to extend the benefits of Global Healthcare Standards to our Service Members and Veterans