National Facilitator Model | Phase 1

Grant Funded to:
   STHealth
   Phase 1 Covers June – December 2022

NCPDP Integration:
   WG19 | NCPDP Standards Coordination
      - COVID Post PHE TG

   WG1 | Telecommunication
      - FAQ TG

This grant was made possible by the NCPDP Foundation, the NCPDP Lee Ann Stember Endowment, First Databank’s (FDB) Founder Donation to support improved patient safety, and GoodRx’s Founder Donation to support enhanced access to care.
OVERVIEW
Last year, STChealth and NCPDP entered into a strategic alliance to operationalize NCPDP’s National Facilitator Model to provide pharmacies and prescribers with real-time prescription, testing, immunization, and related information at the point of care to support patient health interventions during public health crisis such as COVID-19 and the opioid crisis epidemic. The NCPDP National Facilitator Model powered by STChealth and NCPDP Standards™ provides actional data in real-time using existing, interoperable industry standards.

STChealth secured the necessary stakeholders to complete Phase 1 of this project where we developed and implemented a non-jurisdictional infrastructure to store the COVID-19 immunizations with pharmacy pilot participants in the Pharmacy Inclusive Provider Network™ (PhIPN).

We obtained the COVID-19 history and connectivity with the pharmacy pilot participants and then worked with Experian Health to leverage the NCPDP UPI powered by Experian Health UIM and NCPDP Standards™ (NCPDP UPI) to provide more accurate patient information across multiple datasets in a batch process. This is a foundational way to establish a national infrastructure with many data sets.

ACTIVITIES
In collaboration with NCPDP, STChealth partnered with Experian Health and PioneerRx to build the Pharmacy Inclusive Provider Network™ (PhIPN).

Following is a summary of activities categorized by contract deliverable/payment:

**Contracting and Licensing**

<table>
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<tr>
<th>Payment: $50,000</th>
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- Worked with legal to develop appropriate agreements with pilot partners.

- Executed an End User License Agreement with Experian Health to leverage their Health UIM.

- Executed Pilot Partnership Agreements and BAAs with PioneerRx customers (Osborn Drugs and ExpressRx) and Sam’s Healthmart to control the use and disclosure of the pilot data.
STChealth built out the PhiPN technical infrastructure to allow data to be reportable and queryable by PioneerRx participants.

The PioneerRx data was delivered to Experian Health via a flat file over a Secure FTP connection.

Experian Health applied the UPI de-duplication and patient matching algorithms to the batch data to consolidate multiple patient records into a single patient record.

Then STChealth ingested the updated data, including the NCPDP UPI, into the PhiPN.

Phase 1 laid the foundation for a national Covid-19 repository for the National Facilitator project. During this phase, there were several discussions around building a model to provide national coverage for not only Covid-19 but also for other vaccinations as well as opioids. Phase 2 will include API connectivity and automation which will allow this model to scale and be sustainable.

STC generated a report for NCPDP illustrating the Covid-19 administered dosage metrics including the number of customers, duplicates identified, and mapped out locations visited within three states.
Final Phase 1 Report Sent to the NCPDP Foundation

Payment Pending: $50,000

During Phase 1 of the pilot, data was manually captured and stored directly in the PhiPN, not delivered to state IIS jurisdictions.

- There were 57 distinct pharmacy locations encapsulating data from 86,601 distinct patients, which equates to approximately 1,519 patients per pharmacy location with the average patient receiving a total of 2.8 doses.

<table>
<thead>
<tr>
<th>1,519 patients</th>
<th>2.8 dose</th>
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<tbody>
<tr>
<td>PER PHARMACY LOCATION</td>
<td>AVERAGE PER PATIENT</td>
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- Across both participating pharmacy organizations, we captured nearly 180,000 records. We had very little records without minimum data requirements for matching, and the records matched from both organizations were nearly 100%. Out of the information that we managed, there was a high percentage of people that had more than one (1) COVID shot.

The Phase 1 pilot process concluded the proof that the NCPDP UPI works and improves the ability to identify a patient across multiple data sets in multiple states. There were UPI available for all patients:

- 49.4% of Street Addresses were Updated
- Other Address Updates
- Phone Number Updates
  - Updated
  - No Changes
LOOKING FORWARD TO PHASE 2

STChealth has taken lessons learned from the technology and partnership hurdles in Phase 1 and will reconfigure and expand its approach for Phase 2 to include:

- Include non-STChealth integrated pilot partners.
- Include the switch service partnerships to acquire data from the non-integrated pilot participants.
- In Phase 1, we leveraged the batch process; moving forward, we will work towards API integration.
- STChealth is in the process of completing the fifth key success factor of identifying the roadblocks and hurdles from the technology and partnership viewpoints and will reconfigure the approach for Phase 2 build out.

Additional details will be provided in the Phase 2 proposal to the NCPDP Foundation.
INTEGRATION WITHIN NCPDP

<table>
<thead>
<tr>
<th>WG19</th>
<th>NCPDP Standards Coordination</th>
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<tbody>
<tr>
<td>• COVID Post PHE TG</td>
<td>Review of the NCPDP Emergency Preparedness Guidance Document to see where COVID related information needs to be modified/removed/archived from the guidance document now that the Public Health Emergency (PHE) has been lifted.</td>
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<tr>
<th>WG1</th>
<th>Telecommunication</th>
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<tr>
<td>• Telecommunication FAQ TG</td>
<td>Reviews questions received about implementation of the Telecommunication or Batch Standards. The task group builds responses to the questions, which are then reviewed with WG1 Telecommunication and may be published in the Version D Editorial document or future standards.</td>
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