

### **Pilot Report**



### **Global Location Number (GLN)** GPO Roster Pilot:

Using GLNs in Group Purchasing Organization (GPO) Roster Management

GS1 Healthcare US would like to thank the following industry members for their participation in this important pilot and in the development of this report. The learnings from this pilot are a critical step for U.S. healthcare in GLN implementation.

Abbott Laboratories, Inc. Becton Dickinson BJC HealthCare Cardinal Health Covidien Johnson & Johnson Kimberly-Clark Corporation Novation Premier

### Introduction

The GS1 Global Location Number (GLN) enables all parties to identify the same location using one globally unique identifier. The GLN has a number of potential business applications in healthcare. This pilot focused on the use of GLN in Group Purchasing Organization (GPO) Roster management. Investigation of other uses like contracts and pricing was considered for inclusion in the pilot as well. However, it was later determined that other potential uses will require independent study. It was also decided that this pilot would be limited to *Ship to* locations only.

### **Objectives**

The objectives of the pilot were to:

- Reconcile the GLNs for a Healthcare Provider (i.e., a hospital) catalogued in the GLN Registry for Healthcare<sup>®</sup> across the Provider, the GPO Roster, and finally the Manufacturers and Distributors.
- Document the process to determine a baseline for the existing process.
- Suggest potential business process improvements enabled by the use of GLN.
- Determine the action steps necessary to utilize GLN as a key identifier in the Roster.
- List areas of concern which must be settled by further industry input.
- Develop a pilot report that documents the lessons learned.

### **Participants**

The pilot engaged participants across all major healthcare supply chain roles. Participants in the pilot included:

Healthcare Provider: BJC HealthCare

GPOs:	Novation Premier
Manufacturers:	Abbott Laboratories, Inc. Becton Dickinson Covidien Johnson & Johnson Kimberly-Clark Corporation
Distributor:	Cardinal Health

### Methodology

To establish the methodology used for the pilot, the pilot participants identified a basic process flow for GPO Roster maintenance. This process mirrors current industry practice.

- Step 1. The Provider reviews and updates the GLN hierarchy for its organization from the GLN Registry for Healthcare<sup>®</sup>.
- Step 2. The GPO reconciles and updates the GPO Roster using the updated GLN hierarchy from the Provider.
- Step 3. Manufacturers reconcile their internal data with the GLN hierarchy from the GPO.
- Step 4. The Distributor reconciles their internal data with the GLN hierarchy from the Manufacturer.

For sample data of each step, please refer to the appropriate appendix:

<u>Appendix A:</u> Sample Data for Step 1 – Provider Revision of the GLN Hierarchy

Appendix B: Sample Data for Step 2 – GPO Reconciliation

<u>Appendix C:</u> Sample Data for Step 3 – Manufacturer Reconciliation

The GLN Registry for Healthcare was used as the source of truth for this project. The GPO used the GLN Registry for comparison against its Roster before making any changes. All subsequent data was exchanged among the parties via Excel spreadsheet.

### **Terms & Definitions**

**Owned Facilities:** The term "Owned" with respect to GPO Rosters represents entities or locations that are owned or controlled through a management agreement by the Provider.

**Affiliate:** The term "Affiliate" with respect to GPO Rosters represents organizations that are not owned by the Provider or controlled through a management agreement by the Provider. It represents a type of GPO relationship in which the Provider sponsors another organization.

**Ship to:** A location within a Healthcare Provider where a Manufacturer delivers products. This is normally a bulk delivery location (e.g., receiving dock or central warehouse).

**Deliver to:** A location deeper within a Healthcare Provider location where a Manufacturer delivers supplies (e.g., JIT location or employee's desk).

**Bill to:** A location within a Healthcare Provider where invoices are sent for payment (e.g., accounts payable).

**GPO Roster:** A GPO's official list of current members (i.e., healthcare facilities).

**Global Location Number (GLN):** The globally unique GS1 System identification number for legal entities, functional entities, and physical locations. The GLN is 13 digits, comprised of a GS1 Company Prefix, Location Reference, and Check Digit. Supply side trading partner locations generally include corporate headquarters, regional offices, warehouses, plants, and distribution centers. Demand side trading partner locations generally include corporate headquarters, divisional offices, stores, and distribution centers.

**Hierarchy:** A classification structure that is arranged in levels of detail from the broadest to the most detailed. Each level of the classification is defined in terms of the categories at the next lower level of the classification.

**GLN Registry for Healthcare®:** A comprehensive and accurate registry of healthcare facilities and suppliers in the United States, with corresponding GLNs. The Registry keeps track of name, address, class of trade, and organizational hierarchy information.

### **Background:**

### Allocating GLNs & Creating the Initial GLN Hierarchy for a Provider

As a service to their members, GPOs work with GS1 US<sup>™</sup> to allocate GLNs to their Providers, including all Owned Facilities and Affiliates. To allocate GLNs to its Providers, a GPO uses it Roster to create a report that lists all member locations, and ensures that all addresses in the report match the Post Office address standards. Based on that report, a GLN hierarchy for each Provider is established in the GLN Registry for Healthcare ("the Registry") and GLNs are then allocated to all of the GPO member locations.

The GLN hierarchy is initially created and entered into the GLN Registry by the GPO according to their GPO Roster. As a result, the hierarchy used in the GLN Registry generally matches the structure found in the GPO Roster. The general structure for a GLN hierarchy is as follows:

*Level One (1)* is the Main Parent. This should be a location that actively receives products or is the corporate entity used in GPO records.

Level Two (2) is any entity that reports directly to the Main Parent.

*Level Three (3)* is other buildings and/or the subordinate departments of Level Two.

**Level Four (4)** is an additional Level that could be used for desktop delivery or Just in Time ("JIT") locations. There are up to seven Levels that have been used in some Provider organizations based on size and hierarchical structure.

Because the GPOs initially created the GLN hierarchies for their Providers, the GLN Registry recognizes the GPOs as "owning" those GLN hierarchies (i.e., the GPOs are granted both "Editor" and "Approval" roles/authority for those hierarchies in the GLN Registry). However, the goal is to ultimately transition ownership of each GLN hierarchy to the corresponding Provider. This is often an iterative process where the Provider first requests an "Editor" role from their GPO so that they can update information or adjust the hierarchy to meet certain internal needs (e.g., reporting or rebate flow). Eventually, the Provider requests and obtains the "Approval" role from the GPO, thereby taking over full control of its own hierarchy.

Pursuant to that process, the GPO had already allocated GLNs and established the GLN hierarchy for the Provider in this pilot. The Provider obtained an "Editor" role from the GPO in order to work with their hierarchy during this pilot.

## Step 1: The Provider reviews and updates the GLN hierarchy for its organization from the GLN Registry for Healthcare.

The Provider exported the *GLN Hierarchy Report* for its organization from the GLN Registry. The hierarchy for the Provider in this pilot contained four (4) levels.

**Level One (1)** was the Parent (i.e., the top level of the organization). For the Provider in this pilot, the top level was the overall corporate parent.

*Level Two (2)* was the general ledger company and/or main address that received products. For the Provider in this pilot, it was generally the individual hospitals.

*Level Three (3)* was other buildings and/or the subordinate departments of Level Two.

*Level Four (4)* was not generally used for the Provider in this pilot.

The Provider imported the *GLN Hierarchy Report* into an Access database (*"the Provider GLN Report"*). The *Provider GLN Report* was sorted by the "Address 1" field. Duplicates were identified and removed from the report. The *Provider GLN Report* was then sorted by phone number. This revealed additional duplicates that were also removed from the report. Finally, the Provider edited the Parent-Child relationships (outlined in the Levels above) in the report as needed.

Next, the Provider created a report from their internal systems for all **Ship to** locations for all facilities ("the Ship to Locations Report"). They used Post Office address standards for these locations. The Provider then used this Ship to Locations Report to further update the Provider GLN Report. First, the Provider added any facilities from the Ship to Locations Report that were missing in the Provider GLN Report. Next, the Provider amended all address fields in the Provider GLN Report to conform to the Post Office address standard. Finally, the Provider also reviewed and verified all of the fields in the Provider GLN Report for each location.

<u>NOTE</u>: There was some concern over the "Class of Trade" (COT) fields. The Provider felt that there was no clear definition of who would use these fields and how they might be interpreted. The Provider suggested several potential additions to the GLN Registry COT drop-down menu, which will be forwarded to the GLN Registry Technical Committee.

Once the updated *Provider GLN Report* received the necessary internal approvals, it was forwarded to the GPO for review. The GPO compared the updated *Provider GLN Report* to the GLN Registry. The GPO found some duplicates and some missing GLNs in the updated *Provider GLN Report*. The Provider removed the duplicates and added the missing GLNs to their report.

# The Provider reported that the entire effort took approximately two days in total.

Effort related to "Owned Facilities" (i.e., those facilities directly owned and operated by the corporate parent) consumed only about a half day of work.

Effort related to "Affiliated Facilities" (i.e., those facilities not directly owned and operated by the corporate parent) consumed the rest of the time, much of which was spent verifying data with Affiliates.

## Step 2: The GPO reconciles and updates the GPO Roster with the updated GLN hierarchy from the Provider.

The GPO exported the *GLN Hierarchy Report* for the Provider from the GLN Registry, and then imported it into an Access database (*"the GLN Hierarchy Report"*).

The GPO built queries to compare the *GLN Hierarchy Report* with its current GPO Roster. The GPO looked for the following three categories:

- Direct matches between the GLN Hierarchy Report and the GPO Roster
- Locations shown in the GLN Hierarchy Report, but not in the GPO Roster
- Members shown in the GPO Roster, but not in the GLN Hierarchy Report

The first query identified duplicates by comparing the "Address 1" field of Category B locations to Category A locations. Most of those duplicate locations from Category B were then "inactivated" in the GLN Registry.

The second query identified more duplicates by comparing the same lists (i.e., Category B and Category A) by names and phone numbers. Those duplicates were also "inactivated" in the GLN Registry. This query also revealed some address corrections, which were made to the GLN Registry and/or the GPO Roster as needed.

Next, all locations in Category B that were not matched as duplicates and were confirmed as valid locations according to the Provider were added to the GPO Roster.

Finally, records in Category C were researched to see why there was no corresponding GLN in the *GLN Hierarchy Report*. Research revealed that these locations were Affiliate locations controlled and/or owned by another GPO. The GLNs had been used so that there would not be duplicate GLNs in the GLN Registry.

At this point, the GLN Registry and the GPO Roster have now been reviewed and revised by the Provider & the GPO, and reconciled with one another.

### Step 3: Manufacturers reconcile their internal data with the GLN hierarchy from the GPO.

This process began after the Provider refined its GLN hierarchy from the GLN Registry and reconciled it with the GPO. The end result of that effort was sent by spreadsheet to the participating Manufacturers. The Manufacturers compared the list with their internal records for that Provider based on the Manufacturer's **Ship to** number. (For multi-divisional Manufacturers, this process was repeated at each separate division.) First, the Manufacturer established the Provider membership. There are several ways to do this:

Method	Description	Assessment		
<b>Method A:</b> Use the GPO view of the Provider	Method A matches Manufacturer's internal account number to the GPO identifier to determine the appropriate GLN.	Method A is the most direct. While this method may seem counterintuitive, it actually helps isolate the intended <i>Ship to</i> locations very precisely, and facilitates a rather rapid matching process. In general, Manufacturer internal account numbers can be cross-matched with GPO identifiers within hours.		
<b>Method B:</b> Use the Manufacturer's view of the Provider	Method B uses the Manufacturer's internal views of the Provider as stored within source systems. This view generally does not match the view of the Provider presented by either the Provider or the GPO. This process varies by Manufacturer.	Because the Manufacturer's view generally does not match the Provider or the GPO, Method B requires a labor-intensive effort to match all known <b>Ship to</b> locations within the Manufacturers' source systems to the <b>Ship to</b> locations in the subject list. Depending on the size and complexity of the Provider, this effort can stretch into days or weeks.		
Method C: Use the addresses and match all parties from the given list	Method C uses the complete list. All Provider locations are mapped to the Manufacturer's internal accounts.	Method C is the most arduous and labor-intensive method. A single address can take up to 30 minutes to validate. This method delivers the most comprehensive results, but it might not be the most effective method for all supply chain partners.		

Each Manufacturer reached similar conclusions:

- Only a small minority of the Ship to locations matched directly to the Manufacturer's internal accounts. Many of the GLNs represented facilities or locations outside of any single Manufacturer's shipping patterns. A number of locations, like individual hospital departments or doctor's offices that required GLN for the Provider's internal purposes, may not be relevant for most Manufacturers.
- Some addresses had multiple GLNs associated with them. In some instances, this was due to multiple shipping and/or delivery points within a given physical address. As a general rule, most Manufacturers have a consolidated account to represent a single physical address. In some cases, there are internal needs at either the Provider or the GPO (or both) for the multiple GLNs within one physical address (see the next point below).
- Multiple Manufacturer account numbers were assigned to single GLNs. This may represent separate accounts within subordinate units in a Manufacturer's divisional structure. There may be different contracts and/or terms that are triggered by the different account numbers. Different divisions at a Manufacturer may also have different hierarchical structures for the same Provider. As a result, the Parent-Child relationships at the individual Manufacturer may not mirror the hierarchy listed in the GLN Registry.
- There were some different interpretations at the Manufacturer for the same "physical address." Sometimes, it was a matter of recognition (e.g., a missing suite number or departmental description). Sometimes, it was due to the recognition of a unique *Bill to* and *Ship to* combination that required a different recognized address. In some cases, it represented a real error in the Manufacturer's database that needed correction.

The Manufacturers have not reconciled the discrepancies with both the GPO and the Provider. This process generally requires precise collaboration in order to ensure that all of the players (Provider, GPO, and divisional customer account departments at the Manufacturer) reconcile their lists appropriately. The time needed will vary depending on the exact mix of the organizations involved. It may take several hours of coordination in order to reach consensus.

Once the Provider' hierarchy is determined to be reconciled among partners, some defined business process would be needed to help maintain the hierarchy going forward. That exact process was determined to be outside the scope of this initial project.

# Step 4: The Distributor reconciles its internal data with the GLN hierarchy from the Manufacturer.

This process began after the Provider refined its GLN hierarchy from the Registry and reconciled it with the GPO. The end result of that effort was sent by spreadsheet to the Distributor. The Distributor followed the steps below to match the refined GLN list with the Distributor's existing GPO membership list (based on the Distributor's customer **Sold to** number):

- 1) Match on GPO membership ID.
- 2) Sort both files by state, city and street address to do a manual review looking for matches based on name and address.
- Note gaps on both files (e.g., where a customer existed on the internal file, but not the GPO provided file; where a customer existed on the GPO provided file, but not on the internal file; etc.).
- For those *Sold to* customers that were matched, pull in all of the *Ship to* customers that roll up into them, including *Ship to* customer name and address information.
- 5) Sort *Ship to* customers by state, city and street address to find additional matches.
- 6) Note gaps on both files. (This step will find matches that were not found in Step 3.)

The Distributor offered several findings:

- A number of the records that appeared on the GPO Roster, but not on the Distributor's internal list, were records that had a corporate relationship of "Affiliated" rather than "Owned."
- Additional review of data by Provider resources as well as GPO resources is needed to further evaluate where there were gaps.
- At the Ship to level, a number of customer records in the Distributor's systems were the same customer (i.e. same name and same address) created to accommodate various internal processes for the Distributor and various external processes for the Provider or GPO.
- Some of the duplicate *Ship to's* in the Distributor's systems would be removed if a data clean up were performed (i.e. they exist due to consolidation and acquisition of customer data over the years).

### **General Recommendations:**

During regular conference calls discussing the pilot, the participants reached consensus on several "Best Practices" recommendations for the use of GLNs in GPO Rosters:



The initial hierarchy design within the GLN Registry for Healthcare should follow the GPO Roster. Providers may need to modify that initial hierarchy to accommodate their individual reporting needs and rebate flow.



The system works best when Providers manage their own GLNs.



Providers should only manage GLNs for **Owned Facilities** in the GLN Registry.



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Eligibility determinations should be made via the GPO Roster, not the GLN Registry.

GPOs should manage GLNs for *Affiliates* until they are able to transfer that responsibility to the *Affiliates*.

In order to facilitate the linkage of GLNs to the Manufacturer's internal account numbers, GPOs should provide a map associating the GLNs in their Rosters with the GPOs current unique identifiers for a transitional period of time (based on individual partner agreements).



COT was not verified in this exercise. The pilot group did not find any role for its inclusion in the GPO Roster process. "Class of Trade" (COT) needs a common, agreed upon recommendation. COT is a required field in the GLN Registry. In some cases, it is used to differentiate between multiple GLNs at the same physical location. The Providers and GPOs currently determine the classifications used in the COT field. However, the eligibility criteria for COT varies greatly among different Manufacturers. Most Manufacturers reserve the right to determine COT using their own criteria.



In order to speed adoption, enumeration to support GPO Rosters should only extend to the *Ship to* level. There are many complications in extension to the *Deliver to* level that should be deferred to a later phase.

#### **Questions for Further Study:**

- How can the industry develop "Best Practices" to help make the GLN implementation process more efficient?
- Are there specific tools the industry can endorse to help speed industry adoption? Implementation templates? Enumeration models? Educational resources?
- What are the key business drivers for GLN? Reference number in contracts? Identification of physical locations of facilities, including corporate locations that are used for purchasing/accounts payable? Account number for purchases? Shipping? Sales reporting? Fee payments? Data synchronization? Product tracking? The answer to this question could help in determining the type of information required for the proper use of the GLNs.
- When there are discrepancies between constituents, what is the process to reconcile the differences?
- Can this project be sub-divided into specific phases with differing goals and implementation models? If so, what should they be?
- How should Affiliates be represented in the GLN Registry for Healthcare if managed by GPOs? If managed by Providers? GPOs may consider separating Affiliates out of Provider hierarchies.
- Providers may wish to investigate if a single hierarchy meets their needs. Would it be difficult to represent multiple views of a Provider hierarchy (e.g., supply chain, financial, legal entity, etc.) in a single repository?
- Initial efforts have been focused at the Ship to level. Is there a need to manage reporting activity below the Ship to level? For example, there may be some Manufacturers and Distributors who need to account for product activity at the Deliver to level.

### Appendix A: Sample Data for Step 1 – Provider Revision of the GLN Hierarchy

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233 1100004688941	BJC HealthCare	1100005375161	Southern Illinois Center for Health			509 HAMACHER ST STE 102	WATERLOO	IL
234 1100004688941	BJC HealthCare	1100005753631	Specialty Pharmacy of St. Louis			623 N NEW BALLAS RD	SAINT LOUIS	MO
235 1100004688941	BJC HealthCare	1100004691132	St. Charles County Ambulance			4169 OLD MILL PKWY	SAINT PETERS	MO
236 1100004688941	BJC HealthCare	1100002475697	St. Louis Cardiovascular			3009 N BALLAS RD STE 264C	SAINT LOUIS	MO
237 1100004688941	BJC HealthCare	1100002111489	St. Louis Childrens Hospital			1 CHILDRENS PL	SAINT LOUIS	MO
238 1100004688941	BJC HealthCare	1100002125653	St. Louis County Medicine			16216 BAXTER RD STE 299	CHESTERFIELD	MO
239 1100004688941	BJC HealthCare	1100004806505	St. Peters Bone & Joint			112 PIPER HILL DR	SAINT PETERS	MO
240 1100004688941	BJC HealthCare	1100005405684	ST.LOUIS CHILDREN'S HOSP.			4942 PARKVIEW PL	SAINT LOUIS	MO
241 1100004688941	BJC HealthCare	1100002257149	Stalle Maris Internal Medicine-H C	Scudah MD		12855 N 40 DR	SAINT LOUIS	MO
			Ste. Genevieve County Memorial H			Highway 61 & 32	STE GENEVIEVE	MO
243 1100004688941						1150 GRAHAM RD STE 111	FLORISSANT	MO
			SUNSET HILLS HEALTH CENTER			3844 S LINDBERGH BLVD STE 140	SAINT LOUIS	MO
			TAYLOR AVENUE BUILDING			600 S TAYLOR AVE		MO
			The Orthopaedic Center of St. Loui	s		14825 N OUTER 40 STE 200	CHESTERFIELD	MO
			The Rehabilitation Institute of St. L			4455 DUNCAN AVE		MO
			Travis & Nolan Oral Surgery			4585 WASHINGTON ST STE B4		MO
			Travis & Nolan Oral Surgery #2			1034 S BRENTWOOD BLVD STE 900		MO
			Twin City Pediatrics			1400 US HIGHWAY 61 STE 260		MO
			Twin River MRI Center			5 MEMORIAL DR		IL
			Village North Retirement & Health	Center		11160 VILLAGE NORTH DR		MO
			Washington County Memorial Hosi			300 HEALTH WAY DR		MO
			Washington University in St. Louis			Campus Box 1069, 7425 Forsyth		MO
			Washington University In St. Louis			3009 N BALLAS RD STE 351 BLDG C		MÜ
			Washington University Physician N			120 S CENTRAL AVE STE 1100		MO
			West County Bone and Joint	BEWOIK		3009 N BALLAS RD STE 260 BLDG C		MO
			WEST COUNTY IMAGING CENTE	D		969 N MASON RD		MO
			WEST COUNTY SLEEP/EEG LAE			969 N MASON RD		MO
					EUNICE C. SMITH HOME	1251 COLLEGE AVE		IL.
					FAMILY CARE PHARMACY ALTON	1 MEMORIAL DR RM G247		IL I
					Home Care Pharmacy #4	1 MEMORIAL DR		IL IL
					BJC Home Care Services Pharmacy	1935 BELT WAY DR		MO
					POWER PLANT BARNES-JEWISH N. HC			MO
								MO
					BARNES-JEWISH GROUNDS SHOP	4302 CLAYTON AVE		
						4540 FOREST PARK BLVD BNOR		MO
					BARNES-JEWISH N. HOSPITAL CAM	4540 FOREST PARK BLVD CAM		MO
					Barnes-Jewish Nursing School	306 S KINGSHIGHWAY BLVD		MO
					BARNES-JEWISH S. HOSPITAL BSEP	499 S EUCLID AVE BSEP		MO
						499 S EUCLID AVE		MO
			BARNES-JEWISH S. HOSPITAL			4520 CLAYTON AVE		MO
					Barnes-Jewish St. Peters Outpatient Phan			MO
					BARNES-JEWISH ST. PETERS SITEMAN			MO
			BARNES-JEWISH WEST COUNTY			1040 N MASON RD STE 116		MO
					Garfinkel, Bernard, M.D.	675 OLD BALLAS RD STE 103		MO
					Loomis, James, M.D.	675 OLD BALLAS RD STE 103		MO
					Nations, Judith, M.D.	675 OLD BALLAS RD STE 103		MO
					Plax, Daniel I., M.D.	8888 LADUE RD STE 100		MO
				1100005690646		1224 GRAHAM RD STE 1108		MO
	BIC HealthCare	1100003047411	BJC - Clinical Engineering	1100005219762	Waxelman, Roger J., M.D.	16216 BAXTER RD STE 310	CHESTERFIELD	MO
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This screen shot displays an example of the initial enumeration for a Healthcare Provider:

- Level 1 is the corporate parent of the Provider.
- Level 2 represents the main hospitals and other major entities within the Provider.
- Level 3 represents the key departments within those major entities.
- ▶ The "Address 1" field is one of the key fields used for location identification.

### Appendix B: Sample Data for Step 2 - GPO Reconciliation

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ID	LEVEL 1	LEVEL 2	LEVEL 3	LEVEL 4	NAME	ADDRESS1	CITY	ST	ZIP	
					Boonslick Medical Group Inc - Executive Centr		SAINT PETERS		3376-168	
					BJC - Florissant Valley Surgery	11125 DUNN RD	SAINT LOUIS		3136-613	
					The Rehabilitation Institute of St. Louis	4455 DUNCAN AVE	SAINT LOUIS		3110-111	
617	1100004688941	1100002055790	1100002055790	1100002055790	BJC - Missouri Baptist Diagnostic	3009 N BALLAS RD STE 112	SAINT LOUIS	MO 6	3131-232	2 U
					Northland Mid America Orthopaedic	1150 GRAHAM RD	FLORISSANT	MO 6	3031-807	7 U
					BJC - Pediatric Care Association	224 S NOODS MILL RD, STE 3	CHESTERFIELD		6301	
						2401 VANDIVER DR	COLUMBIA		5202-238	
					BJC Family Physicians of Godfrey	5520 GODFREY RD	GODFREY	IL 6	2035-250	8 U
						751 SAPPINGTON BRIDGE RD	SULLIVAN	MO 6	3080-235	4 U
	1100004688941	1 1100002108373	1100004912367	1100004912367	BJC HealthCare	153 E SPRINGFIELD RD	SULLIVAN	MO 6	3080-131	1 U
					St. Louis Childrens Hospital	1 CHILDRENS PL	SAINT LOUIS		3110-100	
57	1100004688941	1100002115999	1100002115999	1100002115999	BJC - Medfirst Florissant	1955 N HIGHWAY 67	FLORISSANT	MO 6	3033-193	8 U
640	1100004688941	1100002117474	1100002111144	1100002111144	BJC BARNES LODGE	4520 CLAYTON AVE	SAINT LOUIS	MO 6	3110-150	2 U
637	1100004688941	1100002117474	1100002117474	1100002117474	BARNES-JEWISH S. HOSPITAL	499 S EUCLID AVE	SAINT LOUIS	MO 6	3110-100	5 U
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638	1100004688941	1 1100002117474	1100003114083	1100003114083	BARNES-JEWISH S. HOSPITAL BSRD	499 S EUCLID AVE	SAINT LOUIS	MO 6	3110-100	5 U
585	1100004688941	1100002125653	1100002125653	1100002125653	St. Louis County Medicine	16216 BAXTER RD STE 299	CHESTERFIELD	MO 6	3017-477	8 U
84	1100004688941	1100002136116	1100002136116	1100002136116	BJC - Medical Arts Lab	1103 W LIBERTY ST	FARMINGTON	MO 6	3640-192	1 U
					Pain Management Center	2246 ILLINOIS, ROUTE 157, STE 225	GLEN CARBON	IL	6203	14 U
					BJC HOME CARE HFA	301 N WASHINGTON ST STE 3	FARMINGTON	MO 6	3640-175	οŪ
					IVF LAB SUITE 3100	4444 FOREST PARK AVE IVF	SAINT LOUIS	MO 6	3108-221	2 U
599	1100004688941	1100002179847	1100002179847	1100002179847	BJC - Barnes Care Downtown Surgery	909 N 14TH ST	SAINT LOUIS	MO 6	3106-382	6 U
					HUMAN PERFORMANCE LAB	4555 FOREST PARK AVE	SAINT LOUIS	MO 6	3108-217	7 U
					Stalle Maris Internal Medicine-H C Scudah MD		SAINT LOUIS		3141-863	
					BJC - M.O.B. Sullivan	965 MATTOX DR	SULLIVAN		3080-236	
					BJC - HCI Nuclear Medicine	1020 N MASON RD STE 130	SAINT LOUIS		3141-630	
					Home Care Pharmacy II	1245 GRAHAM RD	FLORISSANT		3031-801	
					BJC INFORMATION SYSTEMS	8374 EAGER RD STE 200	SAINT LOUIS		3144-141	
					RIVERWOOD FAMILY MEDICINE	1150 GRAHAM RD	FLORISSANT		3031-807	
					BJC - Barnes Care Fenton	1391 SMIZER MILL RD	FENTON		3026-730	
		1100002384883				1605 E BROADWAY STE 200	COLUMBIA		5201-802	
						51 SAINT FRANCOIS ST	FLORISSANT		3031-512	
					BJC - Family Med of Bethalto	155 E BETHALTO DR	BETHALTO		2010-180	
						6 JUNGERMANN CIR STE 108	SAINT PETERS		2010-160 3376-161	
					BJC - Cuba Medical	301 THERESA ST	CUBA		5453-163	
						3 PROFESSIONAL DR STE B	ALTON		2002-506	
					BJC Arthritis Specialists	70 JUNGERMANN CIR	SAINT PETERS		3376-162	
					BJC - Medfirst Lemay Ferry	4448 LEMAY FERRY RD	SAINT LOUIS		3129-175	
					St. Louis Cardiovascular	3009 N BALLAS RD STE 264C	SAINT LOUIS		3131-232	
					BJC - University Physicians	1 BARNES HOSPITAL PLZ	SAINT LOUIS		3110-100	
					LINDELL HEALTH CENTER	100 N EUCLID AVE STE 1106	SAINT LOUIS		3108-154	
					CORT RETRO 210	4444 FOREST PARK AVE	SAINT LOUIS		3108-221	_
					Washington University Pediatric Specialists	3009 N BALLAS RD STE 351 BLDG C	SAINT LOUIS		3131-232	
		1 1100002579333				2 MEMORIAL DR	ALTON		2002-672	
					BJC - Felipe Eljaiek	240 COLLEGE ST	BOURBON		5441-830	
435	1100004688941	1 1100002626402	1100002557041	1100002069667	Washington UnivRenal Division	660 S. Euclid Campus Box 8126	ST LOUIS	MO	6311	in Us

This screen shot is an example of the GPO filtering the enumeration provided by the Healthcare Provider. The highlighted facility shows a match with the original data provided by BJC.

### Appendix C: Sample Data for Step 3 - Manufacturer Reconciliation

	Al5		N	Al	AJ	AK	AL	AM
	LEVEL 5	NAME	ADDRESS1	Manufacturer Account Number	Manufacturer Account Name	Address	City	ST
			1 MEMORIAL DR	ABC000600	ALTON MEM HOSP	1 MEMORIAL DR	ALTON	١L
		BARNES-JEWISH S. HOSPITAL	499 S EUCLID AVE	ABC002000	BARNES HOSP ST LOUIS	499 S EUCLID AVE	SAINT LOUIS	MO
			1 BARNES JEWISH HOSPITAL PLZ	ABC002000	BARNES HOSP ST LOUIS	499 S EUCLID AVE	SAINT LOUIS	MO
		Barnes-Jewish Hospital North	216 S KINGSHIGHWAY BLVD	ABC028000	BARNES JEWISH N HOSP	216 S KINGS HWY BLVD	SAINT LOUIS	MO
	1100004688941		4444 FOREST PARK AVE	ABC028000	BARNES JEWISH N HOSP	216 S KINGS HWY BLVD	SAINT LOUIS	MO
ŀ	1100003734465	Barnes-Jewish St. Peters Hospital	10 HOSPITAL DR	ABC077000	BARNES JEWISH ST PETERS HOSP	10 HOSPITAL DR	SAINT PETERS	MO
ŀ	1100005949072	BJC - St. Peters Surgery Center	100 ENTRANCE WAY	ABC077000	BARNES JEWISH ST PETERS HOSP	10 HOSPITAL DR	SAINT PETERS	MO
ŀ	1100004132055	BARNES-JEWISH WEST COUNTY	12634 OLIVE BLVD	ABC019000	BARNES JEWISH W CNTY HOSP	12634 OLIVE BLVD	SAINT LOUIS	MO
ŀ	1100002179847	BJC - Barnes Care Downtown Surgery	909 N 14TH ST	ABC045044	BARNESCARE DOWNTOWN ST LOUIS	909 N 14TH ST	SAINT LOUIS	MO
ŀ	1100004813053	BJC - Barnes Care Downtown	909 N 14TH ST	ABC045044	BARNESCARE DOWNTOWN ST LOUIS	909 N 14TH ST	SAINT LOUIS	MO
		Barnescare Downtown Travel	909 N 14TH ST	ABC045044	BARNESCARE DOWNTOWN ST LOUIS	909 N 14TH ST	SAINT LOUIS	MO
		Berwald Surgical Medical	3478 BRIDGELAND DR STE 2	ABC035921	BERWALD SURG MED INC	3478 BRIDGELAND DR STE 2	BRIDGETON	MO
			11501 PAGE SERVICE DR	ABC003132	BJC BARNES CARE W	11501 PAGE SERVICE RD	SAINT LOUIS	MO
		BJC - Barnes Care Midtown	5000 MANCHESTER AVE	ABC003766	BJC BARNES MIDTOWN	5000 MANCHESTER AVE	SAINT LOUIS	MC
			1391 SMIZER MILL RD	ABC009828	BJC BARNESCARE FENTON	1391 SMIZER MILL RD	FENTON	MC
		Boone Hospital Center - Distribution Cent		ABC004000	BOONE HOSP CTR	2401 VANDIVER DR	COLUMBIA	MC
		Boone Hospital Center	1600 E BROADWAY	ABC004000	BOONE HOSP CTR	2401 VANDIVER DR	COLUMBIA	MC
								IL
		Chester Clinic, PC	2319 OLD PLANK RD	ABC029037	CHESTER CLINIC	2319 OLD PLANK RD	CHESTER	
			11133 DUNN RD	ABC009600	CHRISTIAN HOSP NE	11133 DUNN RD	SAINT LOUIS	MO
			1225 GRAHAM RD	ABC024186	CHRISTIAN HOSP NW	1225 GRAHAM RD	FLORISSANT	MC
		Clay County Hospital	911 STACEY BURK DR	ABC224450	CLAY CNTY HOSP	911 STACY BURK DR	FLORA	IL
		Dermatological Care, Inc.	10004 KENNERLY RD STE 368B	DEF006823	DERMATOLOGICAL CARE INC	10004 KENNERLY RD STE 395B		MO
		WASHU Derm. Consultants, P.C.	6451 CHIPPEWA ST	DEF036624	DERMATOLOGY CONSULTANTS	6451 CHIPPEWA ST STE 2	SAINT LOUIS	MO
		Dermatology Consultants, P.C.	6451 CHIPPEWA ST STE 2	DEF036624	DERMATOLOGY CONSULTANTS	6451 CHIPPEWA ST STE 2	SAINT LOUIS	MO
			7245 RAIDER RD	ABC014600	DO NOT USEPARKLAND HLTH. CTR	DO NOT USE 10 LAKE DRIVE	BONNE TERRE	MO
		Family Care Pharmacy	3023 N BALLAS RD	DEF046017	FAMILY CARE PHARMACY MISSOURI	3023 N BALLAS RD	SAINT LOUIS	MO
	1100002971052		1012 N MAIN ST	ABC305450	FERGUSON MED GRP	1012 N MAIN ST	SIKESTON	MO
			11125 DUNN RD	ABC406100	FLORISSANT VALLEY SURG SPECIAL	11125 DINN RD STE 402	SAINT LOUIS	MO
		Forest Park Pediatrics, P.C.	4488 FOREST PARK AVE STE 230	ABC035593	FOREST PARK PED	488 FOREST PARK AVE STE 23	SAINT LOUIS	MO
ŀ	1100003464355	Pershing Memorial Hospital	130 E LOCKLING ST	ABC106500	GENL JOHN J PERSHING MEM HOSP	130 E LOCKLING	BROOKFIELD	MO
ŀ	1100005141063	Greenville Regional Hospital	200 HEALTH CARE DR	ABC200000	GREENVILLE REG HOSP	200 HEALTH CARE DR	GREENVILLE	١L
ŀ	1100003322686	Illini Medical Associates - Carlinville	103 MCCAUSLAND ST	ABC034493	ILLINI MED ASSOC	103 MCCAUSLAND ST	CARLINVILLE	IL
•	1100003581076	Kneibert Clinic	686 LESTER ST	ABC080000	KNEIBERT CLINIC	666 LESTER ST	POPLAR BLUFF	MO
ŀ	1100004076182	MediQuick	1101 N PROVIDENCE RD	ABC012283	MEDIQUICK COLUMBIA	1101 N PROVIDENCE RD	COLUMBIA	MO
ŀ	1100004759498	BJC Michael Daly	1605 E BROADWAY STE 210	ABC034724	MICHAEL DALY	1605 E BROADWAY STE 210	COLUMBIA	MO
ŀ	1100002108373	MISSOURI BAPTIST SULLIVAN	751 SAPPINGTON BRIDGE RD	ABC045000	MISSOURI BAPT HOSP	3015 N BALLAS RD	SAINT LOUIS	MO
		Missouri Baptist Cancer Center	3015 N BALLAS RD	ABC045000	MISSOURI BAPT HOSP	3015 N BALLAS RD	SAINT LOUIS	MO
			1150 GRAHAM RD	ABC044314	NORTHLAND MIDAMERICA	1150 GRAHAM RD STE 102	FLORISSANT	MO
			1101 W LIBERTY ST	ABC018100	PARKLAND HLTH CTR FARMINGTON	1101 W LIBERTY ST	FARMINGTON	MO
			3 PROFESSIONAL DR STE B	DEF039800	PIASA PAIN MEDICINE	3 PROFESSIONAL DR	ALTON	IL
			Two Progress Point	DEF039926	PROGRESS WEST HLTHCARE CTR	2 PROGRESS POINT PARKWAY		MO
		Salem Memorial District Hospital	Highway 72 North	ABC013200	SALEM MEM DIST HOSP	HWY 72 N	SALEM	MO
			1205 N MISSOURI ST	ABC227830	SAMARITAN MEM HOSP	1205 N MISSOURI ST	MACON	MO
			1 CHILDRENS PL	ABC000318	ST LOUIS CHILDRENS HOSP	1 CHILDRENS PL	SAINT LOUIS	MO
		St. Louis Connect Care	5535 DELMAR BLVD	ABC000318 ABC056000	ST LOUIS CONNECTCARE	5535 DELMAR BLVD	SAINT LOUIS	MO
				ABC050100	STE GENEVIEVE CNTY MEM HOSP		SAINT LOUIS BAINTE GENEVIEVE	
		Ste. Genevieve County Memorial Hospital						
			4525 SCOTT AVE RM 3420	ABC033176	WASH UNIV STUDENT HLTH	4525 SCOTT AVE	SAINT LOUIS	MO
		Washington Univ-Anatomy	4566 SCOTT AVE	ABC003767	WASHINGTON ANATOMY NEURO	4566 SCOTT MCDONNELL SCI		MO
ť'	1100004780898		300 HEALTH WAY DR	ABC151000	WASHINGTON CNTY MEM HOSP	300 HEALTH WAY DR	POTOSI	MC

This screen shot is an example of the GLN enumeration matched to a Manufacturer's internal account number structure. The example displayed is not intended to reflect actual account numbers for any single Manufacturer.

### **Resource Links**

Minnesota Pilot Phase 1 - GLN Registry for Healthcare® Recommendations for Providers, Manufacturers and Distributors Based on Lessons learned from the Minnesota Pilot:

http://healthcareportal.gs1us.org/DocumentLibrary/tabid/70/DMXModule/419/Command/Core\_Download/Default.aspx ?EntryId=30

Minnesota Pilot Phase 2 - Process Map for Healthcare Using Global Location Numbers (GLNs) and the GLN Registry for Healthcare:

http://www.gs1us.org/dnn\_gs1us/GS1HealthcareUS/HealthcareDocumentLibrary/tabid/166/DMXModule/586/Comman\_d/Core\_Download/Default.aspx?EntryId=163

Mayo Clinic / Cardinal Health GLN Implementation White Paper:

http://www.gs1us.org/Communities/Healthcare/HealthcareDocumentLibrary/tabid/166/DMXModule/586/Command/Core\_Download/Method/attachment/Default.aspx?EntryId=420

- GLN Healthcare Provider Tool Kit: <u>http://www.gs1us.org/hcptoolkit</u>
- GS1 Healthcare US Website: http://www.gs1us.org/healthcare
- 2010 GLN Sunrise: <u>http://www.gs1us.org/hcsunrise</u>

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