



INTERFACE FUNCTIONAL SPECIFICATION

HL7 MDM ORDERS INTERFACE-EMBEDDED PDF

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INTERFACE GENERAL OVERVIEW

SUMMARY

Homecare Homebase (HCHB) will transmit order reports (e.g. Plan of Care, Physician Verbal Orders) to a designated location for subsequent review by the appropriate physician. HCHB will receive the physician's approval or rejection of the order, and update the HCHB EMR accordingly.

The Physician Office associated to the patient must have 'INTERFACE' as the communication method and the approval of the patient order in HCHB will trigger the transmission of the order. The 'Process New Order to Physician' workflow in HCHB will be suppressed for physicians who have the 'INTERFACE' communication method.

OUTBOUND MESSAGE

The orders will be sent as base64 encoded PDF attachments, embedded within an HL7 MDM message. The message will include the following segments:

Segment	Name
MSH	Message Header
EVN	Event Type
PID	Patient Identification
PV1	Patient Visit
TXA	Document Notification Segment
OBX	Observation Segment
NTE	Notes and Comments

MSH – MESSAGE HEADER

Status: Mandatory

Description: The MSH segment defines the intent, source, destination, and some specifics of the message.

Seq	Len	Fmt	Opt	Field Name	Comment
0	3		R	Segment ID = "MSH"	MSH
1	1	ST	R	Field Separator	Always " " (HL7 standard)
2	4	ST	R	Encoding Characters	Always "^~\&" (HL7 standard)
3	20	HD	R	Sending Application	Agency ID
4	20	HD	R	Sending Facility	Transaction ID
5	20	HD	R	Receiving Application	Vendor Name
6	20	HD	R	Receiving Facility	Blank
7	14	TS	R	Date/Time Of Message	Current date and time in yyyymmddhhmm
8	40	ST	O	Security	Not Currently Used
9	7	CM	R	Message Type	HL7 message type – must be in the supported list of events for outbound messages MDM^T02
10	20	ST	R	Message Control ID	Current Date/Time formatted in yyyymmddhhmm + Medical Record Number
11	3	PT	O	Processing ID	P
12	8	ID	R	Version ID	2.5
13	15	NM	O	Sequence Number	Not Currently Used
14	180	ST	O	Continuation Pointer	Not Currently Used

15	2	ID	O	Accept Acknowledgment Type	Not Currently Used
16	2	ID	O	Application Acknowledgment Type	Not Currently Used
17	2	ID	O	Country Code	Not Currently Used
18	6	ID	O	Character Set	ASCII
19	60	CE	O	Principal Language Of Message	Not Currently Used
20	20	ID	O	Alternate Character Set Handling Scheme	Not Currently Used
21	427	ST	O	Message Profile Identifier	Not Currently Used

EVN – EVENT TYPE

Status: Mandatory

Description: The EVN segment defines event type information. It features event type, update of patient record.

Seq	Len	Fmt	Opt	Field Name	Comment
0	5	ST	R	Segment ID = "EVN"	EVN
1	15	ST	R	Event Type Code	T02
2	14	TS	R	Recorded Date Time	Date/time of event in yyyymmddhhmm
3	14	TS	O	Date Time Planned Event	Date/time of event in yyyymmddhhmm
4			R	Event Reason Code	
6	14	TS	R	Event Occurred	Transaction date – Date order was approved

PID – PATIENT IDENTIFICATION

Status: Mandatory

Description: The PID segment is used as the primary means of communicating patient demographic information.

Seq	Len	Fmt	Opt	Field Name	Comments
0	3		R	Segment ID = "PID"	PID
1	4	SI	O	Set ID	HL7 numeric identifying field
2	12	CX	O	Patient ID (External ID)	Epic MRN
3	16	CX	R	Patient ID (Internal ID)	HCHB Patient ID ^^^ HCHB ^ PN ~ HCHB Admission ID ^^^ HCHB ^ PI 1st Occurrence: 3.1 HCHB Patient ID 3.4 "HCHB" 3.5 PN 2nd Occurrence: 3.1 HCHB Admission ID 3.4 "HCHB" 3.5 PI
4	20	CX	O	Alternate Patient ID – PID	HCHB Episode ID ^^^ HCHB ^ PI 4.1 HCHB Episode ID 4.4 "HCHB" 4.5 PI

5	48	PN	R	Patient Name	Last Name ^ First Name ^ Middle Initial Family Name (Surname) – Last Name Given Name – First Name Second and Further Given Names or Initials Thereof – Middle Initial
6	48	PN	O	Mother's Maiden Name	Not Currently Used
7	14	TS	O	Date/Time of Birth	Date of birth: YYYYMMDD
8	1	IS	O	Sex	Female (F) Male (M) otherwise Unknown (U)
9	48	PN	O	Patient Alias	Not Currently Used
10	1	IS	O	Race	Text description of race, uncoded
11	106	AD	O	Patient Address	Address ^ ^ City ^ State ^ Zip ^ ^ Facility Type ^ Facility Name ^ Facility ID Street Address (Street or Mailing Address) – Address City – City State or Province – State Zip or Postal Code – Zip Address Type – Facility Type Other Geographic Designation – Facility Name County Parish Code – Facility ID
12	4	IS	O	County Code	Not Currently Used
13	20	TN	O	Phone Number – Home	Patient home telephone number, formatted as (nnn) nnn-nnnn
14	20	TN	O	Phone Number – Business	Patient business telephone number, formatted as (nnn) nnn-nnnn
15	20	CE	O	Primary Language	Patient Primary Language
16	1	IS	O	Marital Status	Patient Marital Status
17	3	IS	O	Religion	Not Currently Used
18	12	CX	R	Patient Account Number	HCHB Medical Record Number
19	11	ST	O	SSN Number – Patient	Social security number
20	25	ST	O	Driver's License Number – Patient	Not Currently Used
21	9	CX	O	Mother's Identifier	Not Currently Used
22	3	IS	O	Ethnic Group	Not Currently Used
23	20	ST	O	Birth Place	Not Currently Used
24	2	ID	O	Multiple Birth Indicator	Not Currently Used
25	2	NM	O	Birth Order	Not Currently Used
26	4	IS	O	Citizenship	Not Currently Used
27	60	CE	O	Veterans Military Status	Not Currently Used
28	80	CE	O	Nationality	Not Currently Used
29	8	TS	O	Patient Death Date and Time	If PID 30 = Y, formatted as yyyymmddhhmmss
30	1	ID	O	Patient Death Indicator	Y/N

PV1 – PATIENT VISIT SEGMENT

Status: Required

Description: The PV1 segment is used to convey additional information about the patient's admission/registration that is unique to this visit.

Seq	Len	Fmt	Opt	Element Name	Comments
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0	3	R		Segment ID = "PV1"	PV1
1	4	SI	O	Set ID	HL7 numeric identifying field
2	1	IS	R	Patient Class	Always "O" – Outpatient
3	40	PL	O	Assigned Patient Location	Agency Name ^ Room Number ^ Branch Code & Branch Name ^ ^ ^ ^ Team Name Point Of Care – Agency Name Facility (Namespace ID) – Branch Code Facility (Universal ID) – Branch Name Location Description – Team Name
4	2	IS	O	Admission Type	Admit Type to HCHB Possible values: NEW ADMISSION READMISSION RECERTIFICATION BEREAVEMENT TRANSITION (a client transitioned from another software/EMR system to HCHB)
5	20	CX	O	Pre-admit Number	Not Currently Used
6	40	PL	O	Prior Patient Location	Not Currently Used
7	60	CN	O	Attending Doctor	This field maps to the primary physician in HCHB NPI ^ Last Name ^ First Name Id Number – NPI Family Name (Surname) – Last Name Given Name – First Name
8	60	CN	O	Referring Doctor	This field will contain the medical director from HCHB NPI ^ Last Name ^ First Name ^ ^ ^ Degree ID Number – NPI FamilyName (Surname) – Last Name Given Name – First Name Degree – Degree
9	60	CN	O	Consulting Doctor	This field will contain the secondary physician from HCHB NPI ^ Last Name ^ First Name ^ ^ ^ Degree ID Number – NPI FamilyName (Surname) – Last Name Given Name – First Name Degree – Degree
10	3	IS	O	Hospital Service	Not Currently Used
11	80	PL	O	Temporary Location	Not Currently Used
12	2	IS	O	Pre-admit test Indicator	Not Currently Used
13	2	IS	O	Readmission Indicator	Not Currently Used
14	3	IS	O	Admit Source	Not Currently Used
15	2	IS	O	Ambulatory Status	Not Currently Used

16	2	IS	O	VIP Indicator	Not Currently Used
17	60	CN	O	Admitting Doctor	Not Currently Used
18	2	IS	O	Patient Type	Service Line Description Possible Values: HOME HEALTH HOSPICE PRIVATE DUTY (Agency can have custom Service Lines as well)
19	20	CX	O	Visit Number	HCHB Episode ID
20	4	FC	O	Financial Class	Not Currently Used
21	2	IS	O	Charge Price Indicator	Not Currently Used
22	2	IS	O	Courtesy Code	Not Currently Used
23	2	IS	O	Credit Rating	Not Currently Used
24	2	IS	O	Contract Code	Not Currently Used
25	8	DT	O	Contract Effective Date	Not Currently Used
26	12	NM	O	Contract Amount	Not Currently Used
27	3	NM	O	Contract Period	Not Currently Used
28	2	IS	O	Interest Code	Not Currently Used
29	1	IS	O	Transfer to Bad Debt Code	Not Currently Used
30	8	DT	O	Transfer to Bad Debt Date	Not Currently Used
31	10	IS	O	Bad Debt Agency Code	Not Currently Used
32	12	NM	O	Bad Debt Transfer Amt.	Not Currently Used
33	12	NM	O	Bad Debt Recovery Amt.	Not Currently Used
34	1	IS	O	Delete Account Indicator	Not Currently Used
35	8	DT	O	Delete Account Date	Not Currently Used
36	3	IS	O	Discharge Disposition	Text of Discharge Reason
37	25	CM	O	Discharged to Location	Episode Discharge Code
38	2	IS	O	Diet Type	Not Currently Used
39	2	IS	O	Servicing Facility	Not Currently Used
40	1	IS	O	Bed Status	Not Currently Used
41	2	IS	O	Account Status	Episode Status (CURRENT, PENDING, DISCHARGED, NON-ADMIT, RECERTIFIED, DELETED)
42	80	PL	O	Pending Location	Not Currently Used
43	80	PL	O	Prior Temporary Location	Not Currently Used
44	14	TS	O	Admit Date/Time	Patient Start Of Care (SOC) Date, formatted as yyyyymmddhhmmss
45	14	TS	O	Discharge Date/Time	Episode Discharge Date
46	12	NM	O	Current Patient Balance	Not Currently Used
47	12	NM	O	Total Charges	Not Currently Used

48	12	NM	O	Total Adjustments	Not Currently Used
49	12	NM	O	Total Payments	Not Currently Used
50	20	CX	O	Alternate Visit ID	Not Currently Used
51	1	IS	O	Visit Indicator	Not Currently Used
52	60	CN	O	Other Healthcare Provider	Not Currently Used

TXA – DOCUMENT NOTIFICATION SEGMENT

Status: Required

Description: The TXA segment is used to convey information about the document.

Seq	Len	Fmt	Opt	Element Name	Comments
0	3		R	Segment ID = "TXA"	TXA
1	4	SI	O	Set ID	HL7 numeric identifying field
2	60	IS	R	Document Type	Order Type Id
3	40	ID	O	Document Content Presentation	PDF
4	14	TS	O	Activity Date/TM	Order Approval Date
5	60	XCN	O	Primary Activity Provider Code/Name	Not Currently Used
6	14	TS	O	Origination Date/Time (TS)	Order Date
7	14	TS	O	Transcription Date/Time	Not Currently Used
8	14	TS	O	Edit Date/Time	Not Currently Used
9	60	XCN	O	Originator Code/Name	Not Currently Used
10	60	XCN	O	Assigned Document Authenticator	Physician Order was written for NPI^ Physician Last Name ^ Physician First Name
11	80	XCN	O	Transcriptionist Code/Name	HCHB Branch Code
12	60	EI	O	Unique Document Number	Unique Document Identifier (BranchCode_ordertypeid_orderID)
13	60	EI	O	Parent Document Number	Not Currently Used
14	60	EI	O	Placer Order Number	Not Currently Used
15	60	EI	O	Filler Order Number	HCHB Order ID
16	60	ST	O	Unique Document File Name	Not Currently Used
17	60	ID	O	Document Completion Status	"UNAUTH"

OBX – OBSERVATION/RESULT SEGMENT

Status: Required

Description: The OBX Segment is used to communicate the Observation or Result information. In the case of an MDM this is the document contents.

Seq	Len	Fmt	Opt	Element Name	Comments
0	3		R	Segment ID = "OBX"	OBX
1	4	SI	O	Set ID	HL7 numeric identifying field
2	60	ID	R	Value Type	ED
3	40	ID	O	Observation Identifier	Order Type Id ^ Order Type Code ^ Order Type Description Identifier – Order Type Id Text – Order Type Code Name of Coding System – Order Type Description
4		CE	O	Observation Sub-ID	Not Currently Used
5		ST	O	Observation Value	^^PDF^^ Base64 encoded Document

NTE – NOTES AND COMMENTS SEGMENT

Status: Optional

Description: The NTE segment is used to for notes

Seq	Len	Fmt	Opt	Element name	Comments
0	3		R	Segment ID = "NTE"	NTE
0	4	SI	O	Set ID – NTE	HL7 numeric identifier
1	8	ID	O	Source of Comment	Hardcoded to 'HCHB'
2		FT	O	Comment	ph:<Ordering physician Id>; db: <database route Id>; tx:<Transaction Id>
3				Comment Type	Not Currently Used