CDAR2\_IG\_PHCR\_R2\_RR\_D1\_2017MAY Vol3 Sender Guidance



# HL7 CDA® R2 Implementation Guide: Reportability Response, Release 1 - US Realm

May 2017

# **Volume 3 - Sender Guidance**

# **HL7 Standard for Trial Use (STU) Ballot**

Sponsored by: Public Health and Emergency Response Group Structured Documents Work Group

Copyright © 2017 Health Level Seven International ® ALL RIGHTS RESERVED. The reproduction of this material in any form is strictly forbidden without the written permission of the publisher. HL7 and Health Level Seven are registered trademarks of Health Level Seven International. Reg. U.S. Pat & TM Off.

Use of this material is governed by HL7's IP Compliance Policy.

### **IMPORTANT NOTES:**

HL7 licenses its standards and select IP free of charge. If you did not acquire a free license from HL7 for this document, you are not authorized to access or make any use of it. To obtain a free license, please visit http://www.HL7.org/implement/standards/index.cfm.

If you are the individual that obtained the license for this HL7 Standard, specification or other freely licensed work (in each and every instance "Specified Material"), the following describes the permitted uses of the Material.

**A. HL7 INDIVIDUAL, STUDENT AND HEALTH PROFESSIONAL MEMBERS,** who register and agree to the terms of HL7's license, are authorized, without additional charge, to read, and to use Specified Material to develop and sell products and services that implement, but do not directly incorporate, the Specified Material in whole or in part without paying license fees to HL7.

INDIVIDUAL, STUDENT AND HEALTH PROFESSIONAL MEMBERS wishing to incorporate additional items of Special Material in whole or part, into products and services, or to enjoy additional authorizations granted to HL7 ORGANIZATIONAL MEMBERS as noted below, must become ORGANIZATIONAL MEMBERS of HL7.

- **B. HL7 ORGANIZATION MEMBERS**, who register and agree to the terms of HL7's License, are authorized, without additional charge, on a perpetual (except as provided for in the full license terms governing the Material), non-exclusive and worldwide basis, the right to (a) download, copy (for internal purposes only) and share this Material with your employees and consultants for study purposes, and (b) utilize the Material for the purpose of developing, making, having made, using, marketing, importing, offering to sell or license, and selling or licensing, and to otherwise distribute, Compliant Products, in all cases subject to the conditions set forth in this Agreement and any relevant patent and other intellectual property rights of third parties (which may include members of HL7). No other license, sublicense, or other rights of any kind are granted under this Agreement.
- **C. NON-MEMBERS**, who register and agree to the terms of HL7's IP policy for Specified Material, are authorized, without additional charge, to read and use the Specified Material for evaluating whether to implement, or in implementing, the Specified Material, and to use Specified Material to develop and sell products and services that implement, but do not directly incorporate, the Specified Material in whole or in part.

NON-MEMBERS wishing to incorporate additional items of Specified Material in whole or part, into products and services, or to enjoy the additional authorizations granted to HL7 ORGANIZATIONAL MEMBERS, as noted above, must become ORGANIZATIONAL MEMBERS of HL7.

Please see http://www.HL7.org/legal/ippolicy.cfm for the full license terms governing the Material.

**Ownership.** Licensee agrees and acknowledges that **HL7 owns** all right, title, and interest, in and to the Materials. Licensee shall **take no action contrary to, or inconsistent with**, the foregoing.

Licensee agrees and acknowledges that HL7 may not own all right, title, and interest, in and to the Materials and that the Materials may contain and/or reference intellectual property owned by third parties ("Third Party IP"). Acceptance of these License Terms does not grant Licensee any rights with respect to Third Party IP. Licensee alone is responsible for identifying and obtaining any necessary licenses or authorizations to utilize Third Party IP in connection with the Materials or otherwise. Any actions, claims or suits brought by a third party resulting from a breach of any Third Party IP right by the Licensee remains the Licensee's liability.

Following is a non-exhaustive list of third-party terminologies that may require a separate license:

Terminology	Owner/Contact
Current Procedures Terminology (CPT) code set	American Medical Association <a href="https://www.ama-assn.org/practice-management/apply-cpt-license-license-requirements">https://www.ama-assn.org/practice-management/apply-cpt-license-license-requirements</a>
SNOMED CT	International Healthcare Terminology Standards Development Organization (IHTSDO) <a href="http://www.ihtsdo.org/snomed-ct/get-snomed-ct">http://www.ihtsdo.org/snomed-ct/get-snomed-ct</a> or info@ihtsdo.org
Logical Observation Identifiers Names & Codes (LOINC)	Regenstrief Institute
International Classification of Diseases (ICD) codes	World Health Organization (WHO)
NUCC Health Care Provider Taxonomy code set	American Medical Association. Please see 222.nucc.org. AMA licensing contact: 312-464-5022 (AMA IP services)

# **Table of Contents**

1	INT	TRODUCTION	. 5
1	.1	Purpose	. 5
1	.2	Audience	. 5
2	NA	RRATIVE CONSTRUCTION GUIDANCE	6
2	.1	A Single Condition is Reportable in a Single Jurisdiction	. 6
2	.2	A Single Condition was Determined Not Reportable in a Single Jurisdiction	. 7
2	.3	Other Combinations for Response in the Reportability Response	. 7
2	.4	eICR Not Processed	. 7
3	RE	PORTABILITY RESPONSE EXAMPLES	c

### 1 INTRODUCTION

# 1.1 Purpose

This volume contains informative guidance on generating the narrative sections of a Reportability Response CDA document (Reportability Response). Through the Reportability Response, public health is seeking to establish bidirectional electronic communication with healthcare providers across the nation. The sharing of the Reportability Response with healthcare will serve several functions, including to:

- Communicate the reportability of condition(s) in an electronic Initial Case Report (eICR)
- Indicate what Public Health Agency(ies) (PHAs) has have been sent a report
- Identify necessary clinical follow-up activities including any additional reporting needs
- Provide clinical support information for identified reportable conditions
- Provide appropriate contact information for the primary responsible PHA
- Confirm eICR receipt and processing

A Reportability Response will also, when requested, be shared with the responsible PHAs (when they have not constructed them) for their internal use and so they understand what has been shared with healthcare.

### 1.2 Audience

The audience for this document is developers and managers of public health information systems such as the Reportable Condition Knowledge Management System (RCKMS) and public health surveillance systems which receive and process eICR and then generate and share Reportability Response.

### 2 NARRATIVE CONSTRUCTION GUIDANCE

The following sections provide example templates and text for use in the generation of the Reportability Response Subject, Reportability Response Summary and eICR Not Processed narrative text. Most of the specifics of Reportability Response data and structure are found in the normative Volumes 1 and 2 of this implementation guide.

Normative guidance in Volumes 1 and 2 includes data specification, order, and most aspects of structure and visualization. For the full normative narrative generation constraints, see the "Sender Responsibilities" section in Volume 1 and details in Volume 2 of the implementation guide.

What follows are further details on how narrative text can be constructed to meet the goals of communicating with largely clinical audiences. There are examples for some of the possible combinations of reportability determinations that need to be accommodated in the Reportability Response and an example visualization. An example style sheet that was used to construct this visualization can be found as an accessory file.

Variables that represent coded data found elsewhere in the Reportabilty Response will be enclosed with angle brackets in a monospaced font, like this: <variable>

## 2.1 A Single Condition is Reportable in a Single Jurisdiction

### 2.1.1 Subject:

Reportable condition notification: An initial report for <condition name> has been sent to <responsible agency>.

### Example text:

Reportable condition notification: An initial report for Pertussis has been sent to the Colorado Department of Public Health and Environment

### 2.1.2 Summary:

An initial case report was electronically submitted by your organization to determine if a patient has a public health reportable condition. The condition of <condition name> was identified and is a reportable condition in <responsible agency>. Additional information for the report of <condition name> may be required to be submitted. The initial case report was forwarded to <responsible agency name>.

### Example text:

An initial case report was electronically submitted by your organization to determine if a patient has a public health reportable condition. The condition of Pertussis was identified and is a reportable condition in Colorado. Additional information for the report of Pertussis may be required to be submitted. The initial case report was forwarded to the Colorado Department of Public Health and Environment.

# 2.2 A Single Condition was Determined Not Reportable in a Single Jurisdiction

### 2.2.1 Subject:

Condition Not Reportable notification: An initial report for <condition name> has been determined not reportable in <responsible agency>.

### Example text:

Condition Not Reportable notification: An initial report for Pertussis has been determined not reportable in Colorado Department of Public Health and Environment.

### 2.2.2 Summary:

An initial case report was electronically submitted by your organization to determine if a patient has a public health reportable condition. This possible case of <condition name> was identified and was determined to be not reportable in <responsible agency>.

### Example text:

An initial case report was electronically submitted by your organization to determine if a patient has a public health reportable condition. This possible case of Pertussis was identified and was determined to be not reportable in Colorado.

# 2.3 Other Combinations for Response in the Reportability Response

Similar to these examples, some additional responses may include:

- Single Condition is reportable in Multiple Jurisdictions
- Single Condition is determined Not Reportable in Multiple Jurisdictions
- Multiple Conditions are reportable in a Single Jurisdiction
- Multiple Conditions are reportable in Multiple Jurisdictions.
- Multiple Conditions are not reportable in a Single Jurisdiction
- Multiple Conditions are not reportable in Multiple Jurisdictions
- Combination of Conditions reportable and not reportable

Note: When Multiple Jurisdictions are identified, a Primary Responsible Agency must be identified to indicate who is responsible for public health follow-up.

### 2.4 eICR Not Processed

In the case where an eICR CDA document was not processed, the normative constraints in Volume 2 state that there must be narrative text in the Electronic Initial Case Report Section (2.16.840.1.113883.10.20.15.2.2.3:2017-04-01) that contains the reason the file was not processed.

Given the potential reasons (see codes from the eICR Processing Error Reason value set (2.16.840.1.113883.10.20.15.2.5.7)) for an eICR CDA document not to be processed, the following example may be used for the Electronic Initial Case Report Section narrative text in the corresponding Reportability Response:

An initial report for a possible reportable condition was received on <date and time of eICR receipt> with the file name <filename of eICR> but it was not processed. <eICR Processing Error Reason>

If additional information about the specific error is available (e.g., file validator output, server logs, etc.), it can also be appended to the text. Implementers should ensure that if this additional information is included in the description, it is specific to the eICR CDA document in question and does not contain extraneous information about other eICR CDA documents.

### REPORTABILITY RESPONSE EXAMPLES

The following example renderings are provided to illustrate the desired format of the rendered Reportability Response. An example stylesheet that was used for this rendering and other supporting files are also available.

Figure 1 - Example Rendering of Reportability Response for "Providers" and "Reporters" Built Using Available Example Stylesheet

Patient	Everywoman, Eve
Patient ID(s)	123453 2.16.840.1.113883.19.5 111-00-1234 2.16.840.1.113883.4.1
Contact info	Home: 2222 Home Street Ann Arbor, MI 99999, US
Date of Birth	April 22, 1990
Sex	Female
Race	White
Ethnicity	Hispanic or Latino
Information recipient:	Dr. Seven, Henry
Contact info	1002 Healthcare Drive Ann Arbor, MI 99999, US

### Subject:

Reportable condition notification: An initial report for Zika has been sent to the Health Authority West.

eICR Identifier ca316e79-aaf2-4e8c-aa5f-848093bb8bb1

### Summary:

An initial case report was submitted electronically by your organization to determine if a patient has a public health reportable condition. The condition of Zika was identified and is a reportable condition in Michigan. The initial case report was forwarded to the Health Authority West.

Additional information for the required reporting of Zika must be submitted to the Health Authority West immediately. This additional information can be submitted here:

Zika has particular risks for pregnant women. Follow-up guidance for pregnant women and couples who are planning

additional testing and specimen collection

A disease plan and treatment guidance for Zika:

If you have additional questions regarding Zika or reporting, contact information for the Health Authority West is available

http://health.authoritywest.gov/epi/diseases/zika/Zika Virus Testing Guidance.pdf

Further Laboratory testing for Zika may be needed. Guidance for <a href="http://health.authoritywest.gov/epi/diseases/zika/Zika Virus Testing Guidance.pdf">http://health.authoritywest.gov/epi/diseases/zika/Zika Virus Testing Guidance.pdf</a>

http://health.authoritywest.gov/epi/diseases/zika/plan.pdf http://health.authoritywest.gov/epi/diseases/zika/

### **Additional References:**

Control and prevention information for providers Current prevalence information for Health Authority West

CDC webpage

Patient information factsheet

http://health.authoritywest.gov/epi/diseases/zika/plan.pdf http://health.authoritywest.gov/epi/diseases/zika/

https://www.cdc.gov/zika/index.html

http://health.authoritywest.gov/epi/diseases/zika/factsheet.pdf

http://health.authoritywest.gov/epi/diseases/zika/ZikaVirus QA authoritywest.pdf

Figure 2 – Example Rendering of Reportability Response for "EHR System Administrators" Built
Using Available Example Stylesheet

Information recipient: Admin, I.T.

Contact info 1002 Healthcare Drive Ann Arbor, MI 99999, US

### eICR Information:

An initial report for a possible reportable condition was received on December 12, 2016 at 8:00pm with the file name "eICR\_Filename.xml" but it was not processed.

The public health system was unable to process the eICR file it received. This may be due to issues with file corruption, encryption, or malformation. The corresponding eICR may need to be identified by its file name and the date and time it was received. Public health reporting has not been achieved. Please correct the file error and resubmit or use another reporting mechanism to report the case to public health.