



API INTEGRATION TECHNICAL GUIDE

Integrate Tebra with Third-Party Applications Using the Tebra Web Services API 2.1

Updated: April 2025

Introduction

Welcome to Tebra's guide to integrating Tebra with third-party applications using the Tebra Web Services API! This guide shows you how to build software applications that access the Tebra Web Services API and provides a technical reference guide to the operations you can perform.

The Tebra Web Services API is an application programming interface that enables computer programs to access Tebra data and functionality by communicating with Tebra servers over the Internet. The Tebra Web Services API is built on the latest standards-based technologies used for web-based software integration including Simple Object Access Protocol (SOAP), Extensible Markup Language (XML), and Web Services Description Language (WSDL). This collection of technologies is commonly referred to as a "web services" interface.

With the Tebra Web Services API, you can perform the following operations:

- Retrieve data from different types of records in Tebra, including appointments, charges, patients, payments, procedure codes, providers, service locations, and transactions
- Insert different types of new records in Tebra, including appointments, patients, encounters, and payments
- Update different types of records in Tebra, including appointments, encounter status, and patients
- Remove appointment records in Tebra

The Tebra Web Services API can be used to:

- Integrate patient and charge data from an electronic medical records (EMR) system with Tebra
- Interface financial data to be exported into an accounting system, such as QuickBooks
- Create your own computer programs to import data into Tebra
- And much more...


 **Important Note:** This guide is written for a technical audience. The information in this guide is intended to be used by IT staff or consultants affiliated with Tebra customers or software developers affiliated with third-party software companies seeking to integrate their products with Tebra.

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1. Configuring Security and Access

This topic provides instructions to get your customer key and how to grant the security permissions required by the Tebra Web Services API.

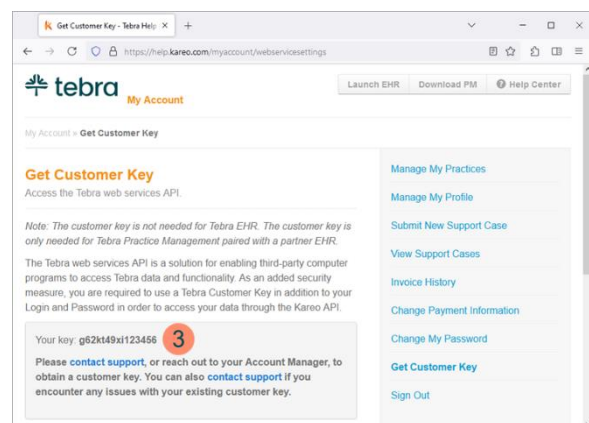
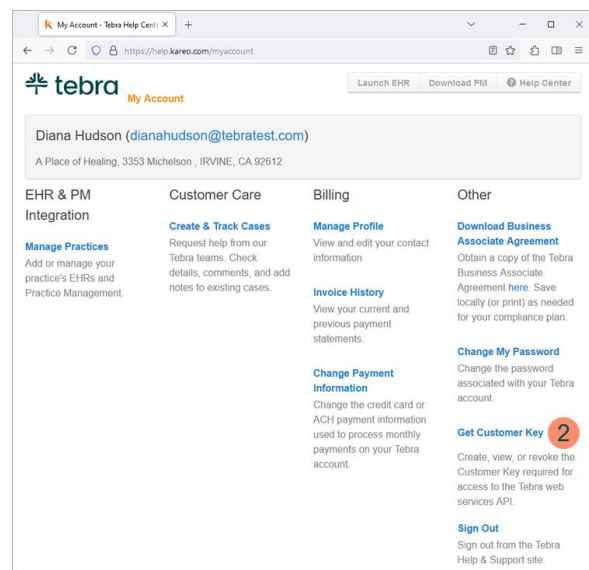
1.1 Getting Your Customer Key

For added security, Tebra requires an account-specific customer key to access your data outside of Tebra. When accessing data through the Tebra Web Services API, you must use the customer key with your Tebra login and password.

To get access to the customer key, a System Administrator for the account needs to create a Customer Care case for the [request](#).

Once the request is completed for the account, the *Get Customer Key* option is available through My Account. A user with a System Administrator role can access the customer key by following the steps below.

1. Log into [My Account](#) with the user login email and password associated with the Tebra account. The *My Account* page opens.
2. Click **Get Customer Key**. The *Get Customer Key* page opens.
3. The customer key displays next to *Your key*.



1.2 Granting Security Permissions

To keep your data secure, a user with a System Administrator role must configure the permissions in Tebra before you can perform any operations using the API. Follow the appropriate steps below to grant user permissions.

For Tebra accounts created after May 2016:

1. Log into the Desktop Application (PM).
2. Click **Settings > User Accounts**. The *User Accounts* window opens.
3. Click on the user's name. The *Edit User* window opens.
4. Click to select “System Admin”.
5. Click **Save User** when finished.

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For Tebra billing company accounts and accounts created before May 2016:

1. Log into the Desktop Application (PM).
2. Click **Settings > User Accounts**. The *User Accounts* window opens.
3. Click on the user's name. The *Account details* display.
4. Click the *Permissions* tab.
5. Click **Account Administrator**. Then, enter “Admin” to confirm and continue.
6. Click **Save Changes** when finished.

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2. Using the Tebra Web Service API

This topic provides general guidelines on how to use the Tebra Web Service API.

2.1 Connecting to the Tebra Web Service API

The Tebra Web Service API provides object schemas that can be downloaded into popular development tools (e.g., SoapUI) and enables developers to use structured objects for the request and response data used by each operation. Use the URL below to connect to the Tebra Web Services API.

<https://webservice.kareo.com/services/soap/2.1/KareoServices.svc?singleWSDL>

2.2 XML Special Characters

There is a set of special characters that are used in Extensible Markup Language (XML) to introduce an entity reference; therefore, they cannot be used directly to represent data in the XML file. The solution to this limitation is to use the escaped form (a special character reference) instead of the actual character. This is important for all fields, especially the Password field. If the escaped form of a special character is not used, it cannot be correctly parsed, and our authentication service will not recognize it.

NAME	SPECIAL CHARACTER	ESCAPED FORM
Ampersand	&	&
Less than	<	<
Greater than	>	>
Quote, Quotation Mark	“	"
Apostrophe	‘	'

2.2 The RequestHeader Object

The RequestHeader object is required in every call to our services. This object contains the following fields:

- CustomerKey: This is the customer key associated with your Tebra account.
- User: This is the login for an authorized user account in Tebra.
- Password: This is the password for an authorized user account in Tebra.

2.3 The ErrorResponse Object

The ErrorResponse object is returned in the response to every call to our services. This object contains the following fields:

- IsError: This indicates whether or not there was an error with the call to the Tebra service.
- ErrorMessage: This contains an error message when IsError is true.
- StackTrace: This occasionally contains additional information when IsError is true.

2.4 The SecurityResponse Object

The SecurityResponse object is returned in the response to every call to our services (except in some cases when there is an error). This object contains the following fields:

- SecurityResultSuccess: This indicates whether or not the security check was a success. True would indicate that there was an issue with security.
- SecurityResult: This contains a message that has more detail on the results of the security check.
- Authenticated: Returns true if the login and password was valid.
- Authorized: Returns true if the user is authorized to perform the operation.
- CustomerId: Returns the unique identifier of the customer's account.
- PracticesAuthorized: Returns an array of practices the user has access to.
- PermissionsMissing: Returns an array of the permissions missing to execute the request.

3. General Guidelines on Consuming Tebra API

This topic provides general guidelines on best practices when consuming the Tebra Web Services API.

3.1 Get Operations Field Request

Only return fields you intend to use in the Get Operations. Most of the request objects for our Get operations accept a parameter named Fields that will take in a FieldsToReturn object specific to that call. An example would be the GetAppointmentsReq object has a field named Fields that takes the AppointmentFieldsToReturn object.

The FieldsToReturn object allows you to indicate which fields you are interested in from the call. The more precise you are with the fields, the smaller the response will be from our API reducing the bandwidth required to complete the call.

3.2 Get Operations Filters

Most of the request objects for our Get operations accept a parameter named Filter that will take in a Filter object specific to that call. An example would be the GetPatientsReq object has a field named Filter that takes the PatientFilter object.

The Filter object allows you to limit the number of rows returned from the call. The best approach to filtering responses is to use PracticeName for all Get operations. The more precise you are with this the smaller the response will be from our API reducing the bandwidth and processing time required to complete the call.

To avoid errors, at least one filter must be used for Get operations. If dates are used, the start and end dates must be used. For example, if you use FromCreateDate, you must also use ToCreateDate.

3.3 Polling Frequency

This is a general guideline to try and poll as infrequently as possible (e.g., every 2 hours instead of every 5 minutes) to reduce overall load on our systems, especially in scenarios where most calls return nothing new to process. In general, narrow your calls using the two suggestions above to have your call return in an acceptable amount of time.

To ensure that all users of Tebra's platform can have a consistent and reliable experience, the following rate limits are in effect:

- GetAllPatients: 1 call every 5 seconds
- GetAppointment: 1 call every ½ second
- GetAppointments: 1 call per second
- GetCharges: 1 call per second
- GetEncounterDetails: 1 call every ½ second
- GetExternalVendors: 1 call per second
- GetPatient: 1 call every ¼ second
- GetPatients: 1 call per second
- GetPayments: 1 call per second
- GetPractices: 1 call every ½ second
- GetProcedureCode: 1 call every ½ second
- GetProviders: 1 call every ½ second
- GetServiceLocations: 1 call every ½ second
- GetThrottles: 1 call every 5 seconds
- GetTransactions: 1 call per second
- CreateAppointment: 1 call every ½ second
- CreateEncounter: 1 call every ½ second
- CreatePatient: 1 call every ½ second
- CreatePayments: 1 call every ½ second
- UpdateAppointment: 1 call every ½ second
- UpdateEncounterStatus: 1 call every ½ second
- UpdatePatient: 1 call per second
- DeleteAppointment: 1 call every ½ second
- SearchPatient: 1 call every ¼ second

Rate limits are measured at the Tebra account level (Account ID). Should limits be exceeded, the system will respond with an error message specifying the endpoint and rate limit. For example, “429: GetPatients endpoint requested more than allowed over time interval 1000 milliseconds. Please wait to try again.”

It is recommended to either implement a delay between calls and/or a retry procedure when appropriate.

Which endpoints have rate limits implemented, and the respective limits, are subject to change.

3.4 Query API Afterhours

The performance of our API is generally better during off hours. If it is not critical to run your integration with the Tebra Web Services API during business hours, schedule it during afterhours. This prevents your account from experiencing possible degraded performance.

4. Understanding the Operations

This topic provides a detailed definition of the operations that can be performed with Tebra Web Services API.

4.1 Get Appointment

This operation returns the details of an existing appointment with the provided appointment ID.

4.1.1 The Request

The following information may be provided as parameters to the request for this operation.

FIELD NAME	DESCRIPTION	REQUIRED
CustomerKey	The customer key associated with your customer account with Tebra.	Yes
User	The username associated with the user account with authorized security permissions to the API.	Yes
Password	The password associated with the user account with authorized security permissions to the API.	Yes
AppointmentID	The unique identifier of the appointment.	Yes

4.1.2 The Response

The following information will be returned with the response for this operation.

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
PracticeID	The unique identifier of the practice related to this appointment.	Settings > Company > Find Practice > Edit Practice
ServiceLocationID	The unique identifier of the service location related to this appointment.	N/A

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
AppointmentStatus	Available values: <ul style="list-style-type: none"> - Unknown - Scheduled - ReminderSent - Confirmed - CheckedIn - Roomed - CheckedOut - NeedsReschedule - ReadyToBeSeen - NoShow - Cancelled - Rescheduled - Tentative 	Appointments > Find Appointment
StartTime	The start time of the appointment in UTC time standard (e.g., 2020-01-24T22:00:00.000Z).	Appointments > Find Appointment
EndTime	The end time of the appointment in UTC time standard (e.g., 2020-01-24T22:30:00.000Z).	Appointments > Find Appointment
IsRecurring	Defines if the appointment is recurring.	Appointments > Find Appointment
OccurrenceID	The unique identifier of the occurrence.	Appointments > Find Appointment
PatientSummary	Structure described below.	Patients > Find Patient > Edit Patient
AppointmentReasonID	The unique identifier of the appointment reason.	Appointments > Appointment Reasons > Edit Appointment Reason
RecurrenceRule	Structure described below.	Appointments > Find Appointment > Appointment Details > Recurrence
ProviderID	The unique identifier of the provider.	Settings > Find Provider > Edit Provider
ResourceID	The unique identifier of the resource.	Appointments > Find Appointment
Notes	The appointment notes.	Appointments > Find Appointment > Appointment Details
ResourceIDs	The list of resource unique identifiers.	N/A
AppointmentType	Available values: U = Unknown P = Patient O = Other	Appointments > Find Appointment
WasCreatedOnline	Defines if the appointment is created online.	N/A
InsurancePolicyAuthorizationID	The unique identifier of the insurance policy authorization.	Appointments > Find Appointment > Appointment Details > Authorization...
PatientCaseID	The unique identifier of the patient case.	Appointments > Find Appointment > Appointment Details > Case...
AppointmentName	The name of the appointment.	Appointments > Find Appointment
IsGroupAppointment	Defines if the appointment is for a group.	N/A
MaxAttendees	Defines the maximum number of attendees.	N/A
AttendeesCount	The number of attendees in the appointment.	N/A
PatientSummaries	List of patient summary structure defined below:	Patients > Find Patient > Edit Patient
ForRecare	Defines if the appointment is for recare.	N/A
PatientID	The unique identifier of the patient.	Patients > Find Patient > Edit Patient

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
PracticeID	The unique identifier of the practice.	Settings > Company > Find Practice > Edit Practice
GenderID	The unique identifier of the gender.	Patients > Find Patient > Edit Patient
DateOfBirth	The date of birth of the patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient
FirstName	The first name of the patient.	Patients > Find Patient > Edit Patient
MiddleName	The middle name of the patient.	Patients > Find Patient > Edit Patient
LastName	The last name of the patient.	Patients > Find Patient > Edit Patient
Email	The email address of the patient.	Patients > Find Patient > Edit Patient
HomePhone	The home phone number of the patient (e.g., (706) 223-3445).	Patients > Find Patient > Edit Patient
WorkPhone	The work phone number of the patient (e.g., (706) 223-3445).	Patients > Find Patient > Edit Patient
MobilePhone	The mobile phone number of the patient (e.g., (706) 223-3445).	Patients > Find Patient > Edit Patient
PreferredPhoneType	The preferred phone type of the patient (e.g., Mobile Phone).	N/A
WorkEmail	The work email address of the patient.	Patients > Find Patient > Edit Patient
OtherEmail	The other email address of the patient.	Patients > Find Patient > Edit Patient
PreferredEmailType	The preferred email type of the patient (e.g., Work Email).	N/A
Guid	GUID of the Patient Summary	N/A
RecurrenceRuleID	The unique identifier of the recurrence rule.	N/A
AppointmentID	The unique identifier of the appointment.	Appointments > Find Appointment
StartDate	The start date and time of the appointment recurrence rule in UTC time standard.	Appointments > Find Appointment > Appointment Details > Recurrence
EndDate	The start date and time of the appointment recurrence rule in UTC time standard.	Appointments > Find Appointment > Appointment Details > Recurrence
NumOccurrences	The number of appointment occurrences.	Appointments > Find Appointment > Appointment Details > Recurrence
DayInterval	Day interval of the appointment recurrence rule (e.g., 8 - Each eight days).	Appointments > Find Appointment > Appointment Details > Recurrence
MonthInterval	Month interval of the appointment recurrence rule (e.g., 3 - Each three months).	Appointments > Find Appointment > Appointment Details > Recurrence
MonthOfYear	Month of the year of the appointment recurrence rule (e.g., 10 - Month of October).	Appointments > Find Appointment > Appointment Details > Recurrence
DayOfMonth	Day of the month of the appointment recurrence rule (e.g., 25 -Day 25 of the month).	Appointments > Find Appointment > Appointment Details > Recurrence
TypeOfDay	Available values: - Unknown - Weekday - Weekend	Appointments > Find Appointment > Appointment Details > Recurrence

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
DayOfWeekMonthlyOrdinal	Available values: <ul style="list-style-type: none"> - Unknown - First - Second - Third - Fourth - Last 	Appointments > Find Appointment > Appointment Details > Recurrence
DayOfWeekMonthlyOrdinalFlags	Number that represents the weeks of month (e.g., 21 = 10101B - First, Third and Last Week)	N/A
TypeOfDayMonthlyOrdinal	Available values: <ul style="list-style-type: none"> - Unknown - First - Second - Third - Fourth - Last 	Appointments > Find Appointment > Appointment Details > Recurrence
TypeOfDayMonthlyOrdinalFlags	Number that represents the weeks of month: <ul style="list-style-type: none"> - If TypeOfDay is Weekday (e.g., 17 = 10001B - First and Last days of weekdays) - If TypeOfDay is Weekend (e.g., 3 = 00011B - First and Second days of weekend) 	N/A
DayOfWeek	Available values: <ul style="list-style-type: none"> - Sunday - Monday - Tuesday - Wednesday - Thursday - Friday - Saturday 	Appointments > Find Appointment > Appointment Details > Recurrence
DayOfWeekFlags	Number that represents the days of week (e.g., 35 = 0100011B - Monday, Tuesday and Saturday).	N/A
NumberOfTimes	The number of times of to apply the recurrence rule (e.g., 5).	Appointments > Find Appointment > Appointment Details > Recurrence

4.2 Get Appointments

This operation returns a list of appointments that match the criteria included within the request.

4.2.1 The Request

The following information may be provided as parameters to the request for this operation.

FIELD NAME	DESCRIPTION	REQUIRED
CustomerKey	The customer key associated with your customer account with Tebra.	Yes

FIELD NAME	DESCRIPTION	REQUIRED
User	The username associated with the user account with authorized security permissions to the API.	Yes
Password	The password associated with the user account with authorized security permissions to the API.	Yes
PracticeName	The name of the practice related to the appointment created.	Yes
FromCreatedDate	The starting date the appointment was created (e.g., YYYY-MM-DD).	No
ToCreatedDate	The ending date the appointment was created (e.g., YYYY-MM-DD).	No
FromLastModifiedDate	The starting date the appointment was last modified (e.g., YYYY-MM-DD).	No
ToLastModifiedDate	The ending date the appointment was last modified (e.g., YYYY-MM-DD).	No
Type	Available values: U = Unknown P = Patient O = Other	No
ConfirmationStatus	Available values: - Confirmed - Check-in - No-show - Check-out - Rescheduled - Scheduled - Cancelled	No
ServiceLocationName	The location of the appointment.	No
PatientID	The unique identifier for the patient related to this appointment.	No
PatientFullName	The full name of the patient related to this appointment.	No
PatientCasePayerScenario	The payer scenario for the case related to this appointment.	No
StartDate	The start date and time of this appointment. <i>Note:</i> If StartDate is not provided, the default is 7 days prior to today's date. If StartDate and EndDate is not provided, the default is 3 days prior to today's date. If FromCreatedDate and ToCreatedDate or FromLastModifiedDate and ToLastModifiedDate is specified, the StartDate is not overridden.	No
EndDate	The end date and time for this appointment. <i>Note:</i> If EndDate is not provided, the default is 7 days from the start date. If FromCreatedDate and ToCreatedDate or FromLastModifiedDate and ToLastModifiedDate is specified, the EndDate is not overridden.	No
AppointmentReason	The reason entered for this appointment.	No
TimeZoneOffsetFromGMT	The time zone offset from GMT of the client computer accessing the API.	No

4.2.2 The Response

The following information will be returned with the response for this operation.

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
ID	The unique identifier of the appointment.	Appointments > Find Appointment
CreatedDate	The date the appointment was created (e.g., YYYY-MM-DD).	N/A

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
LastModifiedDate	The date the appointment was last modified (e.g., YYYY-MM-DD).	N/A
PracticeName	The name of the practice related to this appointment.	Settings > Practice Information
Type	Available values: - U = Unknown - P = Patient - O = Other	Appointments > Find Appointment
ConfirmationStatus	The status of the appointment.	Appointments > Find Appointment
ServiceLocationName	The location of the appointment.	Appointments > Find Appointment
PatientID	The unique identifier for the patient related to this appointment.	Patients > Find Patient > Edit Patient
PatientFullName	The full name of the patient related to this appointment.	Appointments > Find Appointment > Appointment Details
PatientCaseID	The unique identifier for the case related to this appointment.	N/A
PatientCaseName	The name of the case related to this appointment.	Appointments > Find Appointment > Appointment Details > Case...
PatientCasePayerScenario	The payer scenario for the case related to this appointment.	Patients > Find Patient > Edit Patient > Cases
AuthorizationID	The unique identifier for the authorization related to this appointment.	N/A
AuthorizationNumber	The authorization number related to this appointment.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
AuthorizationStartDate	The authorization start date related to this appointment (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
AuthorizationEndDate	The authorization end date related to this appointment (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
AuthorizationInsurancePlan	The insurance plan related to the authorization related to this appointment.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
StartDate	The start date and time of this appointment.	Appointments > Find Appointment
EndDate	The end date and time for this appointment.	Appointments > Find Appointment
AllDay	If this is an all-day appointment, then true. Otherwise, false.	Appointments > Find Appointment
Recurring	If this is a recurring appointment, then true. Otherwise, false.	Appointments > Find Appointment
AppointmentReason 1	The first reason entered for this appointment.	Appointments > Find Appointment
ResourceName1	The first provider or scheduling resource related to this appointment.	Appointments > Find Appointment
Notes	The notes or comments related to this appointment.	Appointments > Find Appointment > Appointment Details
PracticeID	The unique identifier of the practice related to this appointment.	Settings > Company > Find Practice > Edit Practice
AppointmentReason2	The second reason entered for this appointment.	Appointments > Find Appointment > Appointment Details

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
AppointmentReason3	The third reason entered for this appointment.	Appointments > Find Appointment > Appointment Details
AppointmentReason4	The fourth reason entered for this appointment.	Appointments > Find Appointment > Appointment Details
AppointmentReason5	The fifth reason entered for this appointment.	Appointments > Find Appointment > Appointment Details
AppointmentReason6	The sixth reason entered for this appointment.	Appointments > Find Appointment > Appointment Details
AppointmentReason7	The seventh reason entered for this appointment.	Appointments > Find Appointment > Appointment Details
AppointmentReason8	The eighth reason entered for this appointment.	Appointments > Find Appointment > Appointment Details
AppointmentReason9	The ninth reason entered for this appointment.	Appointments > Find Appointment > Appointment Details
AppointmentReason10	The tenth reason entered for this appointment.	Appointments > Find Appointment > Appointment Details
ResourceName2	The second provider or scheduling resource related to this appointment.	Appointments > Find Appointment > Appointment Details
ResourceName3	The third provider or scheduling resource related to this appointment.	Appointments > Find Appointment > Appointment Details
ResourceName4	The fourth provider or scheduling resource related to this appointment.	Appointments > Find Appointment > Appointment Details
ResourceName5	The fifth provider or scheduling resource related to this appointment.	Appointments > Find Appointment > Appointment Details
ResourceName6	The sixth provider or scheduling resource related to this appointment.	Appointments > Find Appointment > Appointment Details
ResourceName7	The seventh provider or scheduling resource related to this appointment.	Appointments > Find Appointment > Appointment Details
ResourceName8	The eighth provider or scheduling resource related to this appointment.	Appointments > Find Appointment > Appointment Details
ResourceName9	The ninth provider or scheduling resource related to this appointment.	Appointments > Find Appointment > Appointment Details
ResourceName10	The tenth provider or scheduling resource related to this appointment.	Appointments > Find Appointment > Appointment Details
ServiceLocationID	The unique identifier for the location related to this appointment.	N/A
AppointmentDuration	The duration, in minutes, of the appointment.	N/A
AppointmentReasonID1	The unique identifier of the first reason entered for this appointment.	N/A
AppointmentReasonID2	The unique identifier of the second reason entered for this appointment.	N/A
AppointmentReasonID3	The unique identifier of the third reason entered for this appointment.	N/A
AppointmentReasonID4	The unique identifier of the fourth reason entered for this appointment.	N/A
AppointmentReasonID5	The unique identifier of the fifth reason entered for this appointment.	N/A

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
AppointmentReasonID6	The unique identifier of the sixth reason entered for this appointment.	N/A
AppointmentReasonID7	The unique identifier of the seventh reason entered for this appointment.	N/A
AppointmentReasonID8	The unique identifier of the eighth reason entered for this appointment.	N/A
AppointmentReasonID9	The unique identifier of the ninth reason entered for this appointment.	N/A
AppointmentReasonID10	The unique identifier of the tenth reason entered for this appointment.	N/A
ResourceID1	The unique identifier of the first provider or scheduling resource related to this appointment.	N/A
ResourceID2	The unique identifier of the second provider or scheduling resource related to this appointment.	N/A
ResourceID3	The unique identifier of the third provider or scheduling resource related to this appointment.	N/A
ResourceID4	The unique identifier of the fourth provider or scheduling resource related to this appointment.	N/A
ResourceID5	The unique identifier of the fifth provider or scheduling resource related to this appointment.	N/A
ResourceID6	The unique identifier of the sixth provider or scheduling resource related to this appointment.	N/A
ResourceID7	The unique identifier of the seventh provider or scheduling resource related to this appointment.	N/A
ResourceID8	The unique identifier of the eighth provider or scheduling resource related to this appointment.	N/A
ResourceID9	The unique identifier of the ninth provider or scheduling resource related to this appointment.	N/A
ResourceID10	The unique identifier of the tenth provider or scheduling resource related to this appointment.	N/A
ResourceTypeID1	The unique identifier of the first resource type entered for this appointment. Values: 1 = Doctor 2 = Practice Resource	N/A
ResourceTypeID2	The unique identifier of the second resource type entered for this appointment. Values: 1 = Doctor 2 = Practice Resource	N/A
ResourceTypeID3	The unique identifier of the third resource type entered for this appointment. Values: 1 = Doctor 2 = Practice Resource	N/A
ResourceTypeID4	The unique identifier of the fourth resource type entered for this appointment. Values: 1 = Doctor 2 = Practice Resource	N/A

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
ResourceTypeID5	The unique identifier of the fifth resource type entered for this appointment. Values: 1 = Doctor 2 = Practice Resource	N/A
ResourceTypeID6	The unique identifier of the sixth resource type entered for this appointment. Values: 1 = Doctor 2 = Practice Resource	N/A
ResourceTypeID7	The unique identifier of the seventh resource type entered for this appointment. Values: 1 = Doctor 2 = Practice Resource	N/A
ResourceTypeID8	The unique identifier of the eighth resource type entered for this appointment. Values: 1 = Doctor 2 = Practice Resource	N/A
ResourceTypeID9	The unique identifier of the ninth resource type entered for this appointment. Values: 1 = Doctor 2 = Practice Resource	N/A
ResourceTypeID10	The unique identifier of the tenth resource type entered for this appointment. Values: 1 = Doctor 2 = Practice Resource	N/A

4.3 Get Charges

This operation returns a list of charges that match the criteria included within the request.

4.3.1 The Request

The following information may be provided as parameters to the request for this operation.

FIELD NAME	DESCRIPTION	REQUIRED
CustomerKey	The customer key associated with your customer account with Tebra.	Yes
User	The username associated with the user account with authorized security permissions to the API.	Yes
Password	The password associated with the user account with authorized security permissions to the API.	Yes

FIELD NAME	DESCRIPTION	REQUIRED
PracticeName	The name of the practice related to this charge.	Yes
FromCreatedDate	The date the encounter was created (e.g., YYYY-MM-DD). <i>Note: If FromCreatedDate is not provided the default is 7 days prior to ToCreatedDate.</i>	No
ToCreatedDate	The date the encounter was created (e.g., YYYY-MM-DD). <i>Note: If ToCreatedDate is not provided the default is 7 days from FromCreatedDate.</i>	No
FromLastModifiedDate	The date the claim was last modified (e.g., YYYY-MM-DD). <i>Note: If FromLastModifiedDate is not provided the default is 7 days prior to ToLastModifiedDate.</i>	No
ToLastModifiedDate	The date the claim was last modified. <i>Note: If ToLastModifiedDate is not provided the default is 7 days from FromLastModifiedDate.</i>	No
PatientName	The name of the patient related to this charge.	No
CasePayerScenario	The payer scenario of the case related to this charge.	No
FromServiceDate	The starting service date for charges (e.g., YYYY-MM-DD). <i>Note: If FromServiceDate is not provided the default is 7 days prior to ToServiceDate.</i>	No
ToServiceDate	The ending service date for charges (e.g., YYYY-MM-DD). <i>Note: If ToServiceDate is not provided the default is 7 days from FromServiceDate.</i>	No
FromPostingDate	The posting date of the encounter related to this charge (e.g., YYYY-MM-DD). <i>Note: If FromPostingDate is not provided the default is 7 days prior to ToPostingDate.</i>	No
ToPostingDate	The posting date of the encounter related to this charge (e.g., YYYY-MM-DD). <i>Note: If ToPostingDate is not provided the default is 7 days from FromPostingDate.</i>	No
BatchNumber	The batch number associated with the encounter related to this charge.	No
SchedulingProviderName	The name of the scheduling provider related to this charge.	No
RenderingProviderName	The name of the rendering provider related to this charge.	No
ReferringProviderName	The name of the referring physician related to this charge.	No
ServiceLocationName	The name of the service location related to this charge.	No
ProcedureCode	The procedure code related to this charge.	No
DiagnosisCode	The first diagnosis code related to this charge.	No
Status	The status of this charge.	No
BilledTo	The insurer or patient the charge to which the charge is currently assigned.	No
IncludeUnapprovedCharges	"T" to return charges associated with unapproved encounters.	No
EncounterStatus	Available values: Draft = Not yet completed Review = Completed, ready for approval Approved = Reviewed and approved Rejected = Needs clarification or corrections	No

4.3.2 The Response

The following information will be returned with the response for this operation.

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
ID	The unique identifier of the claim.	Encounters > Track Claim Status
CreatedDate	The date the claim was created (e.g., YYYY-MM-DD).	N/A
LastModifiedDate	The date the claim was last modified (e.g., YYYY-MM-DD).	N/A
PracticeName	The name of the practice related to this charge.	Settings > Practice Information
EncounterID	The unique identifier of the encounter related to this charge.	Encounters > Find Encounter
PatientID	The unique identifier of the patient related to this charge.	Patients > Find Patient > Edit Patient
PatientName	The name of the patient related to this charge.	Encounters > Find Encounter > Edit Encounter
PatientDateOfBirth	The date of birth of the patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient
CaseName	The name of the case related to this charge.	Encounters > Find Encounter > Edit Encounter
CasePayerScenario	The payer scenario of the case related to this charge.	Patients > Find Patient > Edit Patient > Cases
ServiceStartDate	The service start date of this charge (e.g., YYYY-MM-DD).	Encounters > Find Encounter > Edit Encounter
ServiceEndDate	The service end date of this charge (e.g., YYYY-MM-DD).	Encounters > Find Encounter > Edit Encounter
PostingDate	The posting date of the encounter related to this charge (e.g., YYYY-MM-DD).	Encounters > Find Encounter > Edit Encounter
BatchNumber	The batch number associated with the encounter related to this charge.	Encounters > Find Encounter > Edit Encounter
SchedulingProviderName	The name of the scheduling provider related to this charge.	Encounters > Find Encounter > Edit Encounter
RenderingProviderName	The name of the rendering provider related to this charge.	Encounters > Find Encounter > Edit Encounter
SupervisingProviderName	The name of the supervising provider related to this charge.	Encounters > Find Encounter > Edit Encounter
ReferringProviderName	The name of the referring physician related to this charge.	Encounters > Find Encounter > Edit Encounter
ServiceLocationName	The name of the service location related to this charge.	Encounters > Find Encounter > Edit Encounter
ProcedureCode	The procedure code related to this charge.	Encounters > Find Encounter > Edit Encounter
ProcedureName	The name of the procedure related to this charge.	Encounters > Find Encounter > Edit Encounter

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
ProcedureCodeCategory	The category of the procedure related to this charge.	Encounters > Find Encounter > Edit Encounter
ProcedureModifier1	The first modifier of the procedure related to this charge.	Encounters > Find Encounter > Edit Encounter
ProcedureModifier2	The second modifier of the procedure related to this charge.	Encounters > Find Encounter > Edit Encounter
ProcedureModifier3	The third modifier of the procedure related to this charge.	Encounters > Find Encounter > Edit Encounter
ProcedureModifier4	The fourth modifier of the procedure related to this charge.	Encounters > Find Encounter > Edit Encounter
DiagnosisCode1	The first diagnosis code related to this charge.	Encounters > Find Encounter > Edit Encounter
DiagnosisCode2	The second diagnosis code related to this charge.	Encounters > Find Encounter > Edit Encounter
DiagnosisCode3	The third diagnosis code related to this charge.	Encounters > Find Encounter > Edit Encounter
DiagnosisCode4	The fourth diagnosis code related to this charge.	Encounters > Find Encounter > Edit Encounter
Units	The number of units of the procedure related to this charge.	Encounters > Find Encounter > Edit Encounter
UnitCharge	The unit charge of the procedure related to this charge.	Encounters > Find Encounter > Edit Encounter
TotalCharges	The total charges related to this charge.	Encounters > Find Encounter > Edit Encounter
AdjustedCharges	The total charges minus all adjustments related to this charge.	Encounters > Track Claim Status
Receipts	The total payments applied to this charge.	Encounters > Track Claim Status
PatientBalance	The patient balance related to this charge.	Encounters > Track Claim Status
InsuranceBalance	The insurance balanced related to this charge.	Encounters > Track Claim Status
TotalBalance	The total balance related to this charge.	Encounters > Track Claim Status
PrimaryInsuranceBilledCompanyName	If primary payment is posted by user, then this field is associated with the primary insurance policy as identified by user when posting the insurance payment. Otherwise, this field is associated with the primary insurance policy on the case associated with the encounter.	Encounters > Track Claim Status > Edit Claim
PrimaryInsuranceBilledPlanName	If primary payment is posted by user, then this field is associated with the primary insurance policy as identified by user when posting the insurance payment. Otherwise, this field is associated with the primary insurance policy on the case associated with the encounter.	Encounters > Track Claim Status > Edit Claim

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
SecondaryInsuranceBilledCompanyName	If secondary payment is posted by user, then this field is associated with the secondary insurance policy as identified by user when posting the insurance payment. Otherwise, this field is associated with the secondary insurance policy on the case associated with the encounter.	Encounters > Track Claim Status > Edit Claim
SecondaryInsuranceBilledPlanName	If secondary payment is posted by user, then this field is associated with the secondary insurance policy as identified by user when posting the insurance payment. Otherwise, this field is associated with the secondary insurance policy on the case associated with the encounter.	Encounters > Track Claim Status > Edit Claim
BilledTo	The party that was last billed for this charge.	Encounters > Track Claim Status > Edit Claim
Status	The status of this charge: - Completed - Pending - Ready - Error-Rejection - Error – Denial - Error – No Response - Undefined	Encounters > Track Claim Status
PracticeID	The unique identifier associated with the practice related to this charge.	Settings > Company > Find Practice > Edit Practice
AppointmentID	The unique identifier associated with the appointment related to this charge.	Encounters > Find Encounter > Edit Encounter
SchedulingProviderID	The unique identifier associated with the scheduling provider related to this charge.	Settings > Providers > Edit Provider
RenderingProviderID	The unique identifier associated with the rendering provider related to this charge.	Settings > Providers > Edit Provider
SupervisingProviderID	The unique identifier associated with the supervising provider related to this charge.	Settings > Providers > Edit Provider
ReferringProviderID	The unique identifier associated with the referring provider related to this charge.	Settings > Other List > Find Referring Physicians > Edit Referring Physician
CopayAmount	The amount of the copay related to this charge.	Encounters > Find Encounter > Edit Encounter
CopayMethod	The copay payment method related to this charge.	Encounters > Find Encounter > Edit Encounter
CopayCategory	The copay payment category related to this charge.	Encounters > Find Encounter > Edit Encounter
CopayReference	The copay reference number related to this charge.	Encounters > Find Encounter > Edit Encounter
Minutes	The minutes related to this charge.	Encounters > Find Encounter > Edit Encounter
LineNote	The line note related to this charge.	Encounters > Find Encounter > Edit Encounter
RefCode	The reference code related to this charge.	Encounters > Find Encounter > Edit Encounter

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
TypeOfService	The type of service insurance code related to this charge.	Encounters > Find Encounter > Edit Encounter
HospitalizationStartDate	The hospitalization start date related to this charge (e.g., YYYY-MM-DD).	Encounters > Find Encounter > Edit Encounter
HospitalizationEndDate	The hospitalization end date related to this charge (e.g., YYYY-MM-DD).	Encounters > Find Encounter > Edit Encounter
LocalUseBox10d	The local use box 10d custom insurance field related to this charge.	Encounters > Find Encounter > Edit Encounter
LocalUseBox19	The local use box 19 custom insurance field related to this charge.	Encounters > Find Encounter > Edit Encounter
DoNotSendClaimElectronically	True if the claim should not be sent electronically. False otherwise.	Encounters > Find Encounter > Edit Encounter
DoNotSendElectronicallyToSecondary	True if the claim should not be sent electronically to the secondary insurance. False otherwise.	Encounters > Find Encounter > Edit Encounter
E-ClaimNoteType	The line note related to this charge.	Encounters > Find Encounter > Edit Encounter
E-ClaimNote	The line note related to this charge.	Encounters > Find Encounter > Edit Encounter
ServiceLocationID	The unique identifier of the service location related to this charge.	Settings > Service Location > Find Service Location > Edit Service Location
ServiceLocationBillingName	The billing name of the service location related to this charge.	Settings > Service Location > Find Service Location > Edit Service Location
ServiceLocationPlaceofServiceCode	The place of service insurance code related to this charge.	Settings > Service Location > Find Service Location > Edit Service Location
ServiceLocationPlaceOfServiceName	The name of the place of service insurance code related to this charge.	Settings > Service Location > Find Service Location > Edit Service Location
ServiceLocationAddressLine1	The first address line of the service location related to this charge.	Settings > Service Location > Find Service Location > Edit Service Location
ServiceLocationAddressLine2	The second address line of the service location related to this charge.	Settings > Service Location > Find Service Location > Edit Service Location
ServiceLocationCity	The city of the service location related to this charge.	Settings > Service Location > Find Service Location > Edit Service Location
ServiceLocationState	The state of the service location related to this charge.	Settings > Service Location > Find Service Location > Edit Service Location
ServiceLocationCountry	The country of the service location related to this charge.	Settings > Service Location > Find Service Location > Edit Service Location
ServiceLocationZipCode	The zip code of the service location related to this charge.	Settings > Service Location > Find Service Location > Edit Service Location

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
ServiceLocationPhone	The phone number of the service location related to this charge.	Settings > Service Location > Find Service Location > Edit Service Location
ServiceLocationPhoneExt	The phone number extension of the service location related to this charge.	Settings > Service Location > Find Service Location > Edit Service Location
ServiceLocationFax	The fax number of the service location related to this charge.	Settings > Service Location > Find Service Location > Edit Service Location
ServiceLocationFaxExt	The fax number extension of the service location related to this charge.	Settings > Service Location > Find Service Location > Edit Service Location
ServiceLocationNPI	The national provider identifier of the service location related to this charge.	Settings > Service Location > Find Service Location > Edit Service Location
ServiceLocationFacilityIDType	The facility ID type of the service location related to this charge.	Settings > Service Location > Find Service Location > Edit Service Location
ServiceLocationFacilityID	The facility ID of the service location related to this charge.	Settings > Service Location > Find Service Location > Edit Service Location
ServiceLocationCLIANumber	The CLIA number of the service location related to this charge.	Settings > Service Location > Find Service Location > Edit Service Location
AllowedAmount	The allowed amount expected for this charge, based upon the active insurance contract settings.	Settings > Contracts and Fees > Contract Rates > Active Insurance Contract > Contract Rate
ExpectedAmount	The allowed amount expected for this charge, based upon the active insurance contract settings.	Settings > Contracts and Fees > Contract Rates > Active Insurance Contract > Contract Rate
PrimaryInsuranceAddressLine1	The first address line of the insurance plan associated with the primary insurance policy on the case related to this charge.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
PrimaryInsuranceAddressLine2	The second address line of the insurance plan associated with the primary insurance policy on the case related to this charge.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
PrimaryInsuranceCity	The city of the insurance plan associated with the primary insurance policy on the case related to this charge.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
PrimaryInsuranceState	The state of the insurance plan associated with the primary insurance policy on the case related to this charge.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
PrimaryInsuranceCountry	The country of the insurance plan associated with the primary insurance policy on the case related to this charge.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
PrimaryInsuranceZipCode	The zip code of the insurance plan associated with the primary insurance policy on the case related to this charge.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
PrimaryInsuranceBatchID	The unique identifier of the billing batch associated with the primary insurance policy on the case related to this charge.	N/A
PrimaryInsuranceFirstBillDate	The date the charge was first billed to the primary insurance policy on the case related to this charge (e.g., YYYY-MM-DD).	Encounters > Track Claim Status > Edit Claim
PrimaryInsuranceLastBillDate	The date the charge was last billed to the primary insurance policy on the case related to this charge (e.g., YYYY-MM-DD).	Encounters > Track Claim Status > Edit Claim
PrimaryInsurancePaymentID	The unique identifier of the payment posted from the primary insurance policy on the case related to this charge.	Encounters > Find Payments
PrimaryInsurancePaymentPostingDate	The posting date of the payment posted from the primary insurance policy on the case related to this charge (e.g., YYYY-MM-DD).	Encounters > Find Payments
PrimaryInsuranceAdjudicationDate	The adjudication date of the payment posted from the primary insurance policy on the case related to this charge (e.g., YYYY-MM-DD).	Encounters > Find Payments
PrimaryInsurancePaymentRef	The reference number of the payment posted from the primary insurance policy on the case related to this charge.	Encounters > Find Payments
PrimaryInsurancePaymentMethodDesc	The payment method of the payment posted from the primary insurance policy on the case related to this charge.	Encounters > Find Payments
PrimaryInsurancePaymentCategoryDesc	The category of the payment posted from the primary insurance policy on the case related to this charge.	Encounters > Find Payments
PrimaryInsuranceAllowed	The allowed amount of the payment posted from the primary insurance policy on the case related to this charge.	Encounters > Find Payments > Edit Payment
PrimaryInsuranceContractAdjustment	The amount of the contract adjustment of the payment posted from the primary insurance policy on the case related to this charge.	Encounters > Find Payments > Edit Payment
PrimaryInsuranceContractAdjustmentReason	The reason of the contract adjustment of the payment posted from the primary insurance policy on the case related to this charge.	Encounters > Find Payments > Edit Payment
PrimaryInsuranceSecondaryAdjustment	The amount of the secondary contract adjustment of the payment posted from the primary insurance policy on the case related to this charge.	Encounters > Find Payments > Edit Payment
PrimaryInsuranceSecondaryAdjustmentReason	The reason of the secondary contract adjustment of the payment posted from the primary insurance policy on the case related to this charge.	Encounters > Find Payments > Edit Payment
PrimaryInsurancePayment	The payment posted from the primary insurance policy on the case related to this charge.	Encounters > Find Payments > Edit Payment

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
PrimaryInsuranceDeductible	The deductible posted from the primary insurance policy on the case related to this charge.	Encounters > Find Payments > Edit Payment
PrimaryInsuranceCoinsurance	The coinsurance posted from the primary insurance policy on the case related to this charge.	Encounters > Find Payments > Edit Payment
PrimaryInsuranceCopay	The copay posted from the primary insurance policy on the case related to this charge.	Encounters > Find Payments > Edit Payment
SecondaryInsuranceAddressLine1	The first address line of the insurance plan associated with the secondary insurance policy on the case related to this charge.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
SecondaryInsuranceAddressLine2	The second address line of the insurance plan associated with the secondary insurance policy on the case related to this charge.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
SecondaryInsuranceCity	The city of the insurance plan associated with the secondary insurance policy on the case related to this charge.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
SecondaryInsuranceState	The state of the insurance plan associated with the secondary insurance policy on the case related to this charge.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
SecondaryInsuranceCountry	The country of the insurance plan associated with the secondary insurance policy on the case related to this charge.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
SecondaryInsuranceZipCode	The zip code of the insurance plan associated with the secondary insurance policy on the case related to this charge.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
SecondaryInsuranceBatchID	The unique identifier of the billing batch associated with the secondary insurance policy on the case related to this charge.	N/A
SecondaryInsuranceFirstBillDate	The date the charge was first billed to the secondary insurance policy on the case related to this charge (e.g., YYYY-MM-DD).	Encounters > Track Claim Status > Edit Claim
SecondaryInsuranceLastBillDate	The date the charge was last billed to the secondary insurance policy on the case related to this charge (e.g., YYYY-MM-DD).	Encounters > Track Claim Status > Edit Claim
SecondaryInsurancePaymentID	The unique identifier of the payment posted from the secondary insurance policy on the case related to this charge.	Encounters > Find Payments
SecondaryInsurancePaymentPostingDate	The posting date of the payment posted from the secondary insurance policy on the case related to this charge (e.g., YYYY-MM-DD).	Encounters > Find Payments
SecondaryInsuranceAdjudicationDate	The adjudication date of the payment posted from the secondary insurance policy on the case related to this charge (e.g., YYYY-MM-DD).	Encounters > Find Payments
SecondaryInsurancePaymentRef	The reference number of the payment posted from the secondary insurance policy on the case related to this charge.	Encounters > Find Payments

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
SecondaryInsurancePaymentMethodDesc	The payment method of the payment posted from the secondary insurance policy on the case related to this charge.	Encounters > Find Payments
SecondaryInsurancePaymentCategoryDesc	The category of the payment posted from the secondary insurance policy on the case related to this charge.	Encounters > Find Payments
SecondaryInsuranceAllowed	The allowed amount of the payment posted from the secondary insurance policy on the case related to this charge.	Encounters > Find Payments > Edit Payment
SecondaryInsuranceContractAdjustment	The amount of the contract adjustment of the payment posted from the secondary insurance policy on the case related to this charge.	Encounters > Find Payments > Edit Payment
SecondaryInsuranceContractAdjustmentReason	The reason of the contract adjustment of the payment posted from the secondary insurance policy on the case related to this charge.	Encounters > Find Payments > Edit Payment
SecondaryInsuranceSecondaryAdjustment	The amount of the secondary contract adjustment of the payment posted from the secondary insurance policy on the case related to this charge.	Encounters > Find Payments > Edit Payment
SecondaryInsuranceSecondaryAdjustmentReason	The reason of the secondary contract adjustment of the payment posted from the secondary insurance policy on the case related to this charge.	Encounters > Find Payments > Edit Payment
SecondaryInsurancePayment	The payment posted from the secondary insurance policy on the case related to this charge.	Encounters > Find Payments > Edit Payment
SecondaryInsuranceDeductible	The deductible posted from the secondary insurance policy on the case related to this charge.	Encounters > Find Payments > Edit Payment
SecondaryInsuranceCoinsurance	The coinsurance posted from the secondary insurance policy on the case related to this charge.	Encounters > Find Payments > Edit Payment
SecondaryInsuranceCopoly	The copay posted from the secondary insurance policy on the case related to this charge.	Encounters > Find Payments > Edit Payment
TertiaryInsuranceCompanyName	If tertiary payment is posted by user, then this field is associated with the tertiary insurance policy as identified by user when posting the insurance payment.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
TertiaryInsurancePlanName	If tertiary payment is posted by user, then this field is associated with the tertiary insurance policy as identified by user when posting the insurance payment.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
TertiaryInsuranceAddressLine1	The first address line of the insurance plan associated with the tertiary insurance policy on the case related to this charge.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
TertiaryInsuranceAddressLine2	The second address line of the insurance plan associated with the tertiary insurance policy on the case related to this charge.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
TertiaryInsuranceCity	The city of the insurance plan associated with the tertiary insurance policy on the case related to this charge.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
TertiaryInsuranceState	The state of the insurance plan associated with the tertiary insurance policy on the case related to this charge.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
TertiaryInsuranceCountry	The country of the insurance plan associated with the tertiary insurance policy on the case related to this charge.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
TertiaryInsuranceZipCode	The zip code of the insurance plan associated with the tertiary insurance policy on the case related to this charge.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
TertiaryInsuranceBatchID	The unique identifier of the billing batch associated with the tertiary insurance policy on the case related to the charge.	N/A
TertiaryInsurancePaymentID	The unique identifier of the payment posted from the tertiary insurance policy on the case related to this charge.	Encounters > Find Payments
TertiaryInsurancePaymentPostingDate	The posting date of the payment posted from the tertiary insurance policy on the case related to this charge (e.g., YYYY-MM-DD).	Encounters > Find Payments
TertiaryInsuranceAdjudicationDate	The adjudication date of the payment posted from the tertiary insurance policy on the case related to this charge (e.g., YYYY-MM-DD).	Encounters > Find Payments
TertiaryInsurancePaymentRef	The reference number of the payment posted from the tertiary insurance policy on the case related to this charge.	Encounters > Find Payments
TertiaryInsurancePaymentMethodDesc	The payment method of the payment posted from the tertiary insurance policy on the case related to this charge.	Encounters > Find Payments
TertiaryInsurancePaymentCategoryDesc	The category of the payment posted from the tertiary insurance policy on the case related to this charge.	Encounters > Find Payments
TertiaryInsuranceAllowed	The allowed amount of the payment posted from the tertiary insurance policy on the case related to this charge.	Encounters > Find Payments > Edit Payment
TertiaryInsuranceContractAdjustment	The amount of the contract adjustment of the payment posted from the tertiary insurance policy on the case related to this charge.	Encounters > Find Payments > Edit Payment
TertiaryInsuranceContractAdjustmentReason	The reason of the contract adjustment of the payment posted from the tertiary insurance policy on the case related to this charge.	Encounters > Find Payments > Edit Payment
TertiaryInsuranceSecondaryAdjustment	The amount of the secondary contract adjustment of the payment posted from the tertiary insurance policy on the case related to this charge.	Encounters > Find Payments > Edit Payment

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
TertiaryInsuranceSecondaryAdjustmentReason	The reason of the secondary contract adjustment of the payment posted from the tertiary insurance policy on the case related to this charge.	Encounters > Find Payments > Edit Payment
TertiaryInsurancePayment	The payment posted from the tertiary insurance policy on the case related to this charge.	Encounters > Find Payments > Edit Payment
TertiaryInsuranceDeductible	The deductible posted from the tertiary insurance policy on the case related to this charge.	Encounters > Find Payments > Edit Payment
TertiaryInsuranceCoinsurance	The coinsurance posted from the tertiary insurance policy on the case related to this charge.	Encounters > Find Payments > Edit Payment
TertiaryInsuranceCopoly	The copay posted from the tertiary insurance policy on the case related to this charge.	Encounters > Find Payments > Edit Payment
PatientBatchID	The batch number associated with the patient payment related to this charge.	Encounters > Find Payments
PatientFirstBillDate	The date the patient was first billed for this charge (e.g., YYYY-MM-DD).	Encounters > Track Claim Status > Edit Claim
PatientLastBillDate	The date the patient was last billed for this charge (e.g., YYYY-MM-DD).	Encounters > Track Claim Status > Edit Claim
PatientPaymentRef	The reference code related to the patient payment posted for this charge.	Encounters > Track Claim Status > Edit Claim
PatientPaymentID	The unique identifier of the patient payment posted for this charge.	Encounters > Find Payments
PatientPaymentPostingDate	The posting date of the patient payment posted for this charge (e.g., YYYY-MM-DD).	Encounters > Find Payments
PatientPaymentMethodDesc	The payment method of the patient payment posted for this charge.	Encounters > Find Payments
PatientPaymentCategoryDesc	The category of the patient payment posted for this charge.	Encounters > Find Payments
PatientPaymentAmount	The amount of the patient payment posted for this charge.	Encounters > Find Payments > Edit Payment
OtherAdjustment	The type of other adjustment associated with the patient payment posted for this charge.	Encounters > Find Payments > Edit Payment

4.4 Get Encounter Details

This operation returns an encounter's details that match the criteria included within the request.

4.4.1 The Request

The following information may be provided as parameters to the request for this operation.

FIELD NAME	DESCRIPTION	REQUIRED
CustomerKey	The customer key associated with your customer account with Tebra.	Yes
User	The username associated with the user account with authorized security permissions to the API.	Yes
Password	The password associated with the user account with authorized security permissions to the API.	Yes
PracticeID	The unique identifier associated with the practice related to this payment.	Yes
PracticeName	The name of the practice related to this payment.	Yes
Encounter ID	The unique identifier associated to the encounter.	Yes

4.4.2 The Response

The following information will be returned with the response for this operation.

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
EncounterID	The unique identifier of the encounter.	Encounters > Find Encounter > Edit Encounter
Created Date	The date the encounter was created (e.g., YYYY-MM-DD).	Encounters > Find Encounter > Edit Encounter
Last Modified Date	The date the encounter was last modified (e.g., YYYY-MM-DD).	N/A
Practice	The practice associated with the encounter.	N/A
Practice ID	The name of the practice associated with this encounter.	Settings > Company > Find Practice > Edit Practice
Practice Name	The name of the practice related to this transaction.	Settings > Practice Information
Appointment	The appointment data related to this encounter.	Appointments > Find Appointment
Appointment ID	The unique identifier associated with the appointment related to this encounter.	Appointments > Find Appointment > Appointment Details
Patient	The patient data related to this encounter.	Patients > Find Patient > Edit Patient

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
Patient ID	The unique identifier of the patient related to this encounter.	Patients > Find Patient > Edit Patient
Prefix	The prefix of the patient.	Patients > Find Patient > Edit Patient
First Name	The first name of the patient.	Patients > Find Patient > Edit Patient
Middle Name	The middle name of the patient.	Patients > Find Patient > Edit Patient
Last Name	The last name of the patient.	Patients > Find Patient > Edit Patient
Suffix	The suffix of the patient.	Patients > Find Patient > Edit Patient
Case	The case data related to this encounter.	Patients > Find Patient > Edit Patient > Cases
Case ID	The unique identifier of the case related to this encounter.	Patients > Find Patient > Edit Patient > Cases > Edit Case
Case Name	The name of the case related to this encounter.	Patients > Find Patient > Edit Patient > Cases > Edit Case
Case Payer Scenario	The payer scenario of the case related to this encounter.	Patients > Find Patient > Edit Patient > Cases > Edit Case
Service Start Date	The service start date of this charge (e.g., YYYY-MM-DD).	Encounters > Find Encounter > Edit Encounter
Service End Date	The service end date of this charge (e.g., YYYY-MM-DD).	Encounters > Find Encounter > Edit Encounter
Post Date	The post date of this encounter (e.g., YYYY-MM-DD).	Encounters > Find Encounter > Edit Encounter
Batch Number	The batch number associated with this encounter.	Encounters > Find Encounter > Edit Encounter
Scheduling Provider	The unique identifier of the scheduling provider.	Encounters > Find Encounter > Edit Encounter
ProviderID	The unique identifier of the scheduling provider related to this encounter.	Settings > Providers > Edit Provider
ExternalID	The unique identifier of the provider in a third-party software system (used for integration purposes).	Settings > Providers > Edit Provider
Prefix	The prefix of the scheduling provider related to this encounter.	Settings > Providers > Edit Provider
FirstName	The first name of the scheduling provider related to this encounter.	Settings > Providers > Edit Provider
MiddleName	The middle name of the scheduling provider related to this encounter.	Settings > Providers > Edit Provider
LastName	The last name of the scheduling provider related to this encounter.	Settings > Providers > Edit Provider
Suffix	The suffix of the scheduling provider related to this encounter.	Settings > Providers > Edit Provider
Rendering Provider	The unique identifier of the rendering provider.	Encounters > Find Encounter > Edit Encounter
ProviderID	The unique identifier of the rendering provider related to this encounter.	Settings > Providers > Edit Provider

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
ExternalID	The unique identifier of the provider in a third-party software system (used for integration purposes).	Settings > Providers > Edit Provider
Prefix	The prefix of the rendering provider related to this encounter.	Settings > Providers > Edit Provider
FirstName	The first name of the rendering provider related to this encounter.	Settings > Providers > Edit Provider
MiddleName	The middle name of the rendering provider related to this encounter.	Settings > Providers > Edit Provider
LastName	The last name of the rendering provider related to this encounter.	Settings > Providers > Edit Provider
Suffix	The suffix of the rendering provider related to this encounter.	Settings > Providers > Edit Provider
Supervising Provider	The unique identifier of the supervising provider.	Encounters > Find Encounter > Edit Encounter
ProviderID	The unique identifier of the supervising provider related to this encounter.	Settings > Providers > Edit Provider
ExternalID	The unique identifier of the provider in a third-party software system (used for integration purposes).	Settings > Providers > Edit Provider
Prefix	The prefix of the supervising provider related to this encounter.	Settings > Providers > Edit Provider
FirstName	The first name of the supervising provider related to this encounter.	Settings > Providers > Edit Provider
MiddleName	The middle name of the supervising provider related to this encounter.	Settings > Providers > Edit Provider
LastName	The last name of the supervising provider related to this encounter.	Settings > Providers > Edit Provider
Suffix	The suffix of the supervising provider related to this encounter.	Settings > Providers > Edit Provider
Referring Provider	The unique identifier of the referring provider.	Encounters > Find Encounter > Edit Encounter
ProviderID	The unique identifier of the referring provider related to this encounter.	Settings > Other List > Find Referring Physicians > Edit Referring Physician
ExternalID	The unique identifier of the provider in a third-party software system (used for integration purposes).	Settings > Other List > Find Referring Physicians > Edit Referring Physician
Prefix	The prefix of the referring provider related to this encounter.	Settings > Other List > Find Referring Physicians > Edit Referring Physician
FirstName	The first name of the referring provider related to this encounter.	Settings > Other List > Find Referring Physicians > Edit Referring Physician
MiddleName	The middle name of the referring provider related to this encounter.	Settings > Other List > Find Referring Physicians > Edit Referring Physician
LastName	The last name of the referring provider related to this encounter.	Settings > Other List > Find Referring Physicians > Edit Referring Physician

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
Suffix	The suffix of the referring provider related to this encounter.	Settings > Other List > Find Referring Physicians > Edit Referring Physician
Service Location	The service location data related to this encounter	Settings > Service Location > Find Service Location > Edit Service Location
Location ID	The unique identifier of the service location related to this encounter.	N/A
Location Name	The name of the service location related to this encounter.	Settings > Service Location > Find Service Location > Edit Service Location
Place of Service	The place of service data related to this encounter.	Settings > Service Location > Find Service Location > Edit Service Location
Place of Service Code	The place of service code related to this encounter.	Settings > Service Location > Find Service Location > Edit Service Location
Place of Service Name	The place of service name related to this encounter.	Settings > Service Location > Find Service Location > Edit Service Location
Payment	Used when a payment is collected with the encounter (copay for example).	Encounters > Find Encounter > Edit Encounter
Hospitalization	The hospitalization dates related to the encounter.	Encounters > Find Encounter > Edit Encounter
Start Date	The hospitalization start date related to this charge (e.g., YYYY-MM-DD).	Encounters > Find Encounter > Edit Encounter
End Date	The hospitalization end date related to this charge (e.g., YYYY-MM-DD).	Encounters > Find Encounter > Edit Encounter
Service Lines	The service lines related to the encounter.	Encounters > Find Encounter > Edit Encounter
ServiceLineID	The unique identifier of the service line.	N/A
Encounter Status	Available values: Draft = Not yet completed Review = Completed, ready for approval Approved = Reviewed and approved Rejected = Needs clarification or corrections	Encounters > Find Encounter

4.5 Get Patient

This operation returns a specific patient that matches the criteria included within the request. This will return all patient cases, insurance policies, and authorizations for the patient. This operation is only available with the 2.0 interface and above.

4.5.1 The Request

The following information may be provided as parameters to the request for this operation.

FIELD NAME	DESCRIPTION	REQUIRED
CustomerKey	The customer key associated with your customer account with Tebra.	Yes
User	The username associated with the user account with authorized security permissions to the API.	Yes
Password	The password associated with the user account with authorized security permissions to the API.	Yes
PatientID	The unique identifier of the patient.	Yes
PatientExternalID	The unique identifier of the patient in a third-party software system (used for integration purposes).	No

4.5.2 The Response

The following information will be returned with the response for this operation.

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
ID	The unique identifier of the patient.	Patients > Find Patient > Edit Patient
CreatedDate	The date the patient was created (e.g., YYYY-MM-DD).	N/A
LastModifiedDate	The date the patient was last modified (e.g., YYYY-MM-DD).	N/A
PracticeName	The name of the practice related to this patient.	Settings > Practice Information
FullName	The full name of the patient.	Patients > Find Patient > Edit Patient
Prefix	The prefix of the patient.	Patients > Find Patient > Edit Patient
FirstName	The first name of the patient.	Patients > Find Patient > Edit Patient
MiddleName	The middle name of the patient.	Patients > Find Patient > Edit Patient

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
LastName	The last name of the patient.	Patients > Find Patient > Edit Patient
Suffix	The suffix of the patient.	Patients > Find Patient > Edit Patient
SocialSecurityNumber	The social security number of the patient.	Patients > Find Patient > Edit Patient
DateOfBirth	The date of birth of the patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient
Age	The age of the patient.	Patients > Find Patient > Edit Patient
Gender	Available values: - Male - Female - Unknown	Patients > Find Patient > Edit Patient
MedicalRecordNumber	The medical record number for the patient.	Patients > Find Patient > Edit Patient
MaritalStatus	Available values: A = Annulled D = Divorced I = Interlocutory L = Legally Separated M = Married P = Polygamous S = Single/Never Married T = Domestic Partner W = Widowed	Patients > Find Patient > Edit Patient
EmploymentStatus	The employment status of the patient.	Patients > Find Patient > Edit Patient
EmployerName	The name of the employer related to this patient.	Patients > Find Patient > Edit Patient
ReferralSource	The referral source of the patient.	Patients > Find Patient > Edit Patient
AddressLine1	The first address line of the patient.	Patients > Find Patient > Edit Patient
AddressLine2	The second address line of the patient.	Patients > Find Patient > Edit Patient
City	The city of the patient.	Patients > Find Patient > Edit Patient
State	The state of the patient.	Patients > Find Patient > Edit Patient
Country	The country of the patient (if different than the U.S.).	Patients > Find Patient > Edit Patient
ZipCode	The zip code of the patient.	Patients > Find Patient > Edit Patient
HomePhone	The home phone number of the patient.	Patients > Find Patient > Edit Patient
HomePhoneExt	The home phone number extension of the patient.	Patients > Find Patient > Edit Patient
WorkPhone	The work phone number of the patient.	Patients > Find Patient > Edit Patient

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
WorkPhoneExt	The work phone number extension of the patient.	Patients > Find Patient > Edit Patient
MobilePhone	The mobile phone number of the patient.	Patients > Find Patient > Edit Patient
MobilePhoneExt	The mobile phone number extension of the patient.	Patients > Find Patient > Edit Patient
EmailAddress	The email address of the patient.	Patients > Find Patient > Edit Patient
PracticeID	The unique identifier for the practice related to this patient.	Settings > Company > Find Practice > Edit Practice
DefaultRenderingProviderFullName	The name of the default rendering provider related to this patient.	Patients > Find Patient > Edit Patient
DefaultRenderingProviderID	The unique identifier of the default rendering provider related to this patient.	Settings > Providers > Edit Provider
PrimaryCarePhysicianFullName	The name of the primary care physician related to this patient.	Patients > Find Patient > Edit Patient
PrimaryCarePhysicianID	The unique identifier of the primary care physician related to this patient.	Settings > Other List > Find Referring Physicians > Edit Referring Physician
ReferringProviderFullName	The name of the referring provider related to this patient.	Settings > Other List > Find Referring Physicians > Edit Referring Physician
ReferringProviderID	The unique identifier of the referring provider related to this patient.	Settings > Other List > Find Referring Physicians > Edit Referring Physician
DefaultServiceLocationID	The unique identifier of the default service location related to this patient.	Settings > Service Location > Find Service Location > Edit Service Location
DefaultServiceLocationName	The name of the default service location related to this patient.	Patients > Find Patient > Edit Patient
DefaultServiceLocationNameAddressLine1	The first address line of the default service location related to this patient.	Settings > Service Location > Find Service Location > Edit Service Location
DefaultServiceLocationNameAddressLine2	The second address line of the default service location related to this patient.	Settings > Service Location > Find Service Location > Edit Service Location
DefaultServiceLocationNameCity	The city of the default service location related to this patient.	Settings > Service Location > Find Service Location > Edit Service Location
DefaultServiceLocationNameState	The state of the default service location related to this patient.	Settings > Service Location > Find Service Location > Edit Service Location
DefaultServiceLocationNameCountry	The country of the default service location related to this patient.	Settings > Service Location > Find Service Location > Edit Service Location
DefaultServiceLocationNameZipCode	The zip code of the default service location related to this patient.	Settings > Service Location > Find Service Location > Edit Service Location

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
DefaultServiceLocationBillingName	The billing name of the default service location related to this patient.	Settings > Service Location > Find Service Location > Edit Service Location
DefaultServiceLocationPhone	The phone number of the default service location related to this patient.	Settings > Service Location > Find Service Location > Edit Service Location
DefaultServiceLocationPhoneExt	The phone number extension of the default service location related to this patient.	Settings > Service Location > Find Service Location > Edit Service Location
DefaultServiceLocationFaxPhone	The fax number of the default service location related to this patient.	Settings > Service Location > Find Service Location > Edit Service Location
DefaultServiceLocationFaxPhoneExt	The fax number extension of the default service location related to this patient.	Settings > Service Location > Find Service Location > Edit Service Location
GuarantorDifferentThanPatient	The type of guarantor if different than the patient.	Patients > Find Patient > Edit Patient
GuarantorPrefix	The prefix of the guarantor if different than the patient.	Patients > Find Patient > Edit Patient
GuarantorFirstName	The first name of the guarantor if different than the patient.	Patients > Find Patient > Edit Patient
GuarantorMiddleName	The middle name of the guarantor if different than the patient.	Patients > Find Patient > Edit Patient
GuarantorLastName	The last name of the guarantor if different than the patient.	Patients > Find Patient > Edit Patient
GuarantorSuffix	The suffix of the guarantor if different than the patient.	Patients > Find Patient > Edit Patient
MostRecentNote1User	The user associated with the first most recent note related to this patient.	Patients > Find Patient > Edit Patient
MostRecentNote1Date	The date associated with the first most recent note related to this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient
MostRecentNote2User	The user associated with the second most recent note related to this patient.	Patients > Find Patient > Edit Patient
MostRecentNote2Date	The date associated with the second most recent note related to this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient
MostRecentNote2Message	The message associated with the second most recent note related to this patient.	Patients > Find Patient > Edit Patient
MostRecentNote3User	The user associated with the third most recent note related to this patient.	Patients > Find Patient > Edit Patient
MostRecentNote3Date	The date associated with the third most recent note related to this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient
MostRecentNote3Message	The message associated with the third most recent note related to this patient.	Patients > Find Patient > Edit Patient
MostRecentNote4User	The user associated with the fourth most recent note related to this patient.	Patients > Find Patient > Edit Patient

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
MostRecentNote4Date	The date associated with the fourth most recent note related to this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient
MostRecentNote4Message	The message associated with the fourth most recent note related to this patient.	Patients > Find Patient > Edit Patient
Cases	Collection of patient cases for this patient.	Patients > Find Patient > Edit Patient > Cases
PatientCaseID	The unique identifier of the default case related to this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case
Name	The name of the default case related to this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case
Description	The description of the default case related to this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case
ReferringProviderID	The unique identifier of the referring provider associated with the default case related to this patient.	Settings > Other List > Find Referring Physicians > Edit Referring Physician
ReferringProviderFullName	The name of the referring provider associated with the default case related to this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case
SendPatientStatements	If patient statements should be sent for charges under the default case related to this patient, then true. Otherwise, false.	Patients > Find Patient > Edit Patient > Cases > Edit Case
PayerScenario	The payer scenario of the default case related to this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case
ConditionRelatedToAutoAccident	If the default case for this patient is related to an auto-accident, then true. Otherwise, false.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
ConditionRelatedToAutoAccidentState	The state of the auto accident for the default case related to this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
ConditionRelatedToEmployment	If the default case for this patient is related to employment, then true. Otherwise, false.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
ConditionRelatedToPregnancy	If the default case for this patient is related to pregnancy, then true. Otherwise, false.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
ConditionRelatedToAbuse	If the default case for this patient is related to abuse, then true. Otherwise, false.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
ConditionRelatedToOther	If the default case for this patient is related to other, then true. Otherwise, false.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
ConditionRelatedToEPSDT	If the default case for this patient is related to EPSDT, then true. Otherwise, false.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
ConditionRelatedToFamilyPlanning	If the default case for this patient is related to family planning, then true. Otherwise, false.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
ConditionRelatedToEmergency	If the default case for this patient is related to an emergency, then true. Otherwise, false.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
DatesInjuryStartDate	The start date of the injury of the default case related to this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
DatesInjuryEndDate	The end date of the injury of the default case related to this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
DatesSameorSimilarIllnessStartDate	The start date of the same or similar illness of the default case related to this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
DatesSameorSimilarIllnessEndDate	The end date of the same or similar illness of the default case related to this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
DatesUnabletoWorkStartDate	The start date the patient was unable to work for the default case related to this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
DatesUnabletoWorkEndDate	The end date the patient was unable to work for the default case related to this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
DatesRelatedDisabilityStartDate	The start date of a disability for the default case related to this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
DatesRelatedDisabilityEndDate	The end date of a disability for the default case related to this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
DatesRelatedHospitalizationStartDate	The start date of a hospitalization for the default case related to this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
DatesRelatedHospitalizationEndDate	The end date of a hospitalization for the default case related to this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
DatesLastMenstrualPeriodDate	The last menstrual period date of the default case related to this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
DatesLastSeenDate	The date the patient was last seen for the default case related to this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
DatesReferralDate	The referral date for the default case related to this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
DatesAcuteManifestationDate	The acute manifestation date of the default case related to this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
DatesLastX-RayDate	The last x-ray date of the default case related to this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
DatesAccidentDate	The accident date of the default case related to this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
InsurancePolicies	Collection of insurance policies for this patient case.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
PatientCaseID	The unique identifier of the patient case associated with this insurance policy.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
InsurancePolicyID	The unique identifier number of the insurance policy.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
CompanyID	The unique identifier of the insurance company associated with this insurance policy.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
CompanyName	The name of the insurance company associated with this insurance policy.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
PlanID	The unique identifier of the insurance plan associated with this insurance policy.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
PlanName	The name of the insurance plan associated with this insurance policy.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
PlanAddressLine1	The first address line of the insurance plan associated with this insurance policy.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
PlanAddressLine2	The second address line of the insurance plan associated with this insurance policy.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
PlanCity	The city of the insurance plan associated with this insurance policy.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
PlanState	The state of the insurance plan associated with this insurance policy.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
PlanCountry	The country of the insurance plan associated with this insurance policy.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
PlanZipCode	The zip code of the insurance plan associated with this insurance policy.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
AdjusterFullName	The adjuster name with the insurance plan associated with this insurance policy.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
AdjusterPhoneNumber	The adjuster phone number with the insurance plan associated with this insurance policy.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
AdjusterPhoneNumberExt	The adjuster phone number extension with the insurance plan associated with this insurance policy.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
AdjusterFaxNumber	The adjuster fax number with the insurance plan associated with this insurance policy.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
AdjusterFaxNumberExt	The adjuster fax number extension with the insurance plan associated with this insurance policy.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
Number	The policy number associated with this insurance policy.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
GroupNumber	The group number associated with this insurance policy.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
Copay	The copay associated with this insurance policy.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
Deductible	The deductible associated with this insurance policy.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
EffectiveStartDate	The effective start date associated with this insurance policy (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
EffectiveEndDate	The effective end date associated with this insurance policy (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
PatientRelationshipToInsured	Available values: C = Child O = Other S = Self U = Spouse	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
InsuredFullName	The full name of the insured associated with this insurance policy.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
InsuredAddressLine1	The first address line of the insured associated with this insurance policy.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
InsuredAddressLine2	The second address line of the insured associated with this insurance policy.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
InsuredCity	The city of the insured associated with this insurance policy.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
InsuredState	The state of the insured associated with this insurance policy.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
InsuredCountry	The country of the insured associated with this insurance policy.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
InsuredZipCode	The zip code of the insured associated with this insurance policy.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
InsuredIDNumber	The unique identifier number of the insured associated with this insurance policy.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
InsuredSocialSecurityNumber	The social security number of the insured associated with this insurance policy.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
InsuredDateOfBirth	The date of birth of the insured associated with this insurance policy (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
InsuredGender	The gender of the insured associated with this insurance policy.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
Notes	The notes on the primary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
Authorizations	Collection of insurance policy authorizations associated with this insurance policy.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
AuthorizationNumber	The authorization number associated with this policy.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
AuthorizedNumberOfVisits	The number of visits authorized with the first authorization entered for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
AuthorizedNumberOfVisitsUsed	The number of visits used for the first authorization entered for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
ContactFullName	The insurance contact name associated with this policy.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
ContactPhone	The insurance contact phone number associated with this policy.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
ContactPhoneExt	The insurance contact phone number extension associated with this policy.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
Notes	The authorization notes associated with this policy.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
StartDate	The start date associated with this policy (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
EndDate	The end date associated with this policy (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
AlertMessage	The alert message related to this patient.	Patients > Find Patient > Edit Patient > Alerts
AlertShowWhenDisplayingPatientDetails	True if the alert message related to this patient should show when displaying patient details. False otherwise.	Patients > Find Patient > Edit Patient > Alerts
AlertShowWhenSchedulingAppointments	True if the alert message related to this patient should show when scheduling appointments. False otherwise.	Patients > Find Patient > Edit Patient > Alerts
AlertShowWhenEnteringEncounters	True if the alert message related to this patient should show when entering encounters. False otherwise.	Patients > Find Patient > Edit Patient > Alerts

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
AlertShowWhenViewingClaimDetails	True if the alert message related to this patient should show when viewing claim details. False otherwise.	Patients > Find Patient > Edit Patient > Alerts
AlertShowWhenPostingPayments	True if the alert message related to this patient should show when posting payments. False otherwise.	Patients > Find Patient > Edit Patient > Alerts
AlertShowWhenPreparingPatientStatements	True if the alert message related to this patient should show when preparing patient statements. False otherwise.	Patients > Find Patient > Edit Patient > Alerts
CollectionCategoryName	The name of the collection category related to this patient.	Patients > Find Patient > Edit Patient > Account
StatementNote	The last statement note posted to this patient's account.	Patients > Find Patient > Edit Patient > Account
LastDiagnosis	The last diagnosis entered for this patient.	Patients > Find Patient > Edit Patient > Account
LastAppointmentDate	The last appointment date scheduled for this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Account
LastEncounterDate	The service date of the last encounter entered for this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Account
LastStatementDate	The date of the last patient statement sent to this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Account
LastPaymentDate	The posting date of the last payment received from this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Account
Charges	The total charges entered for this patient.	Patients > Find Patient > Edit Patient > Account
Adjustments	The total adjustments entered for this patient.	Patients > Find Patient > Edit Patient > Account
InsurancePayments	The total insurance payments posted for this patient.	Patients > Find Patient > Edit Patient > Account
PatientPayments	The total patient payments posted for this patient.	Patients > Find Patient > Edit Patient > Account
InsuranceBalance	The insurance balance pending on charges associated with this patient.	Patients > Find Patient > Edit Patient > Account
PatientBalance	The patient balance on charges assigned to this patient.	Patients > Find Patient > Edit Patient > Account
TotalBalance	The total balance related to this patient.	Patients > Find Patient > Edit Patient > Account

4.6 Get Patients

This operation returns a list of patients that match the criteria included within the request.

4.6.1 The Request

The following information may be provided as parameters to the request for this operation.

FIELD NAME	DESCRIPTION	REQUIRED
CustomerKey	The customer key associated with your customer account with Tebra.	Yes
User	The username associated with the user account with authorized security permissions to the API.	Yes
Password	The password associated with the user account with authorized security permissions to the API.	Yes
PracticeName	The name of the practice related to these patients.	Yes
PracticeID	The unique identifier associated with the practice related to these patients.	Yes
FromCreatedDate	The starting date the patient record was created (e.g., YYYY-MM-DD).	No
ToCreatedDate	The ending date the patient record was created (e.g., YYYY-MM-DD).	No
FromLastModifiedDate	The starting date the patient was last modified (e.g., YYYY-MM-DD).	No
ToLastModifiedDate	The ending date the patient was last modified (e.g., YYYY-MM-DD).	No
FirstName	The first name of the patient.	No
MiddleName	The middle name of the patient.	No
LastName	The last name of the patient.	No
SSN	The SSN of the patient.	No
FullName	The full name of the patient.	No
FromDateOfBirth	The starting date for date of birth of the patient (e.g., YYYY-MM-DD).	No
ToDateOfBirth	The ending date for date of birth of the patient (e.g., YYYY-MM-DD).	No
DefaultRenderingProviderFullName	The name of the default rendering provider related to this patient.	No
PrimaryCarePhysicianFullName	The name of the primary care physician related to this patient.	No
ReferringProviderFullName	The name of the referring provider related to this patient.	No
DefaultServiceLocationName	The name of the default service location related to this patient.	No
DefaultCasePayerScenario	The payer scenario of the default case related to this patient.	No
DefaultCaseDatesAccidentDate	The accident date of the default case related to this patient (e.g., YYYY-MM-DD).	No
PrimaryInsurancePolicyCompanyName	The name of the insurance company associated with the primary insurance policy on the default case for this patient.	No
PrimaryInsurancePolicyPlanName	The name of the insurance plan associated with the primary insurance policy on the default case for this patient.	No

FIELD NAME	DESCRIPTION	REQUIRED
SecondaryInsurancePolicyCompanyName	The name of the insurance company associated with the secondary insurance policy on the default case for this patient.	No
SecondaryInsurancePolicyPlanName	The name of the insurance plan associated with the secondary insurance policy on the default case for this patient.	No
FromLastEncounterDate	The starting service date of the last encounter for the patient (e.g., YYYY-MM-DD).	No
ToLastEncounterDate	The ending service date of the last encounter for the patient (e.g., YYYY-MM-DD).	No

4.6.2 The Response

The following information will be returned with the response for this operation.

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
ID	The unique identifier of the patient.	Patients > Find Patient > Edit Patient
CreatedDate	The date the patient was created (e.g., YYYY-MM-DD).	N/A
LastModifiedDate	The date the patient was last modified (e.g., YYYY-MM-DD).	N/A
PracticeName	The name of the practice related to this patient.	Settings > Practice Information
FullName	The full name of the patient.	Patients > Find Patient > Edit Patient
Prefix	The prefix of the patient.	Patients > Find Patient > Edit Patient
FirstName	The first name of the patient.	Patients > Find Patient > Edit Patient
MiddleName	The middle name of the patient.	Patients > Find Patient > Edit Patient
LastName	The last name of the patient.	Patients > Find Patient > Edit Patient
Suffix	The suffix of the patient.	Patients > Find Patient > Edit Patient
SocialSecurityNumber	The social security number of the patient.	Patients > Find Patient > Edit Patient
DateOfBirth	The date of birth of the patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient
Age	The age of the patient.	Patients > Find Patient > Edit Patient
Gender	Available values: - Male - Female - Unknown	Patients > Find Patient > Edit Patient

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
MedicalRecordNumber	The medical record number for the patient.	Patients > Find Patient > Edit Patient
MaritalStatus	Available values: A = Annulled D = Divorced I = Interlocutory L = Legally Separated M = Married P = Polygamous S = Single/Never Married T = Domestic Partner W = Widowed	Patients > Find Patient > Edit Patient
EmploymentStatus	The employment status of the patient.	Patients > Find Patient > Edit Patient
EmployerName	The name of the employer related to this patient.	Patients > Find Patient > Edit Patient
ReferralSource	The referral source of the patient.	Patients > Find Patient > Edit Patient
AddressLine1	The first address line of the patient.	Patients > Find Patient > Edit Patient
AddressLine2	The second address line of the patient.	Patients > Find Patient > Edit Patient
City	The city of the patient.	Patients > Find Patient > Edit Patient
State	The state of the patient.	Patients > Find Patient > Edit Patient
Country	The country of the patient (if different than the U.S.).	Patients > Find Patient > Edit Patient
ZipCode	The zip code of the patient.	Patients > Find Patient > Edit Patient
HomePhone	The home phone number of the patient.	Patients > Find Patient > Edit Patient
HomePhoneExt	The home phone number extension of the patient.	Patients > Find Patient > Edit Patient
WorkPhone	The work phone number of the patient.	Patients > Find Patient > Edit Patient
WorkPhoneExt	The work phone number extension of the patient.	Patients > Find Patient > Edit Patient
MobilePhone	The mobile phone number of the patient.	Patients > Find Patient > Edit Patient
MobilePhoneExt	The mobile phone number extension of the patient.	Patients > Find Patient > Edit Patient
EmailAddress	The email address of the patient.	Patients > Find Patient > Edit Patient
PracticeID	The unique identifier for the practice related to this patient.	Settings > Company > Find Practice > Edit Practice
DefaultRenderingProviderFullName	The name of the default rendering provider related to this patient.	Patients > Find Patient > Edit Patient

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
DefaultRenderingProviderID	The unique identifier of the default rendering provider related to this patient.	Settings > Providers > Edit Provider
PrimaryCarePhysicianFullName	The name of the primary care physician related to this patient.	Patients > Find Patient > Edit Patient
PrimaryCarePhysicianID	The unique identifier of the primary care physician related to this patient.	Settings > Other List > Find Referring Physicians > Edit Referring Physician
ReferringProviderFullName	The name of the referring provider related to this patient.	Patient
ReferringProviderID	The unique identifier of the referring provider related to this patient.	Settings > Other List > Find Referring Physicians > Edit Referring Physician
DefaultServiceLocationID	The unique identifier of the default service location related to this patient.	Settings > Service Location > Find Service Location > Edit Service Location
DefaultServiceLocationName	The name of the default service location related to this patient.	Patients > Find Patient > Edit Patient
DefaultServiceLocationNameAddressLine1	The first address line of the default service location related to this patient.	Settings > Service Location > Find Service Location > Edit Service Locations
DefaultServiceLocationNameAddressLine2	The second address line of the default service location related to this patient.	Settings > Service Location > Find Service Location > Edit Service Locations
DefaultServiceLocationNameCity	The city of the default service location related to this patient.	Settings > Service Location > Find Service Location > Edit Service Locations
DefaultServiceLocationNameState	The state of the default service location related to this patient.	Settings > Service Location > Find Service Location > Edit Service Locations
DefaultServiceLocationNameCountry	The country of the default service location related to this patient.	Settings > Service Location > Find Service Location > Edit Service Locations
DefaultServiceLocationNameZipCode	The zip code of the default service location related to this patient.	Settings > Service Location > Find Service Location > Edit Service Locations
DefaultServiceLocationBillingName	The billing name of the default service location related to this patient.	Settings > Service Location > Find Service Location > Edit Service Locations
DefaultServiceLocationPhone	The phone number of the default service location related to this patient.	Settings > Service Location > Find Service Location > Edit Service Locations

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
DefaultServiceLocationPhoneExt	The phone number extension of the default service location related to this patient.	Settings > Service Location > Find Service Location > Edit Service Locations
DefaultServiceLocationFaxPhone	The fax number of the default service location related to this patient.	Settings > Service Location > Find Service Location > Edit Service Locations
DefaultServiceLocationFaxPhoneExt	The fax number extension of the default service location related to this patient.	Settings > Service Location > Find Service Location > Edit Service Locations
GuarantorDifferentThanPatient	The type of guarantor if different than the patient.	Patients > Find Patient > Edit Patient
GuarantorPrefix	The prefix of the guarantor if different than the patient.	Patients > Find Patient > Edit Patient
GuarantorFirstName	The first name of the guarantor if different than the patient.	Patients > Find Patient > Edit Patient
GuarantorMiddleName	The middle name of the guarantor if different than the patient.	Patients > Find Patient > Edit Patient
GuarantorLastName	The last name of the guarantor if different than the patient.	Patients > Find Patient > Edit Patient
GuarantorSuffix	The suffix of the guarantor if different than the patient.	Patients > Find Patient > Edit Patient
MostRecentNote1User	The user associated with the first most recent note related to this patient.	Patients > Find Patient > Edit Patient
MostRecentNote1Date	The date associated with the first most recent note related to this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient
MostRecentNote1Message	The message associated with the first most recent note related to this patient.	Patients > Find Patient > Edit Patient
MostRecentNote2User	The user associated with the second most recent note related to this patient.	Patients > Find Patient > Edit Patient
MostRecentNote2Date	The date associated with the second most recent note related to this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient
MostRecentNote2Message	The message associated with the second most recent note related to this patient.	Patients > Find Patient > Edit Patient
MostRecentNote3User	The user associated with the third most recent note related to this patient.	Patients > Find Patient > Edit Patient
MostRecentNote3Date	The date associated with the third most recent note related to this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
MostRecentNote3Message	The message associated with the third most recent note related to this patient.	Patients > Find Patient > Edit Patient
MostRecentNote4User	The user associated with the fourth most recent note related to this patient.	Patients > Find Patient > Edit Patient
MostRecentNote4Date	The date associated with the fourth most recent note related to this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient
MostRecentNote4Message	The message associated with the fourth most recent note related to this patient.	Patients > Find Patient > Edit Patient
DefaultCaseID	The unique identifier of the default case related to this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case
DefaultCaseName	The name of the default case related to this patient.	Patients > Find Patient > Edit Patient > Cases
DefaultCaseDescription	The description of the default case related to this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case
DefaultCaseReferringProviderID	The unique identifier of the referring provider associated with the default case related to this patient.	Settings > Other List > Find Referring Physicians > Edit Referring Physician
DefaultCaseReferringProviderFullName	The name of the referring provider associated with the default case related to this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case
DefaultCaseSendPatientStatements	If patient statements should be sent for charges under the default case related to this patient, then true. Otherwise, false.	Patients > Find Patient > Edit Patient > Cases > Edit Case
DefaultCasePayerScenario	The payer scenario of the default case related to this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case
DefaultCaseConditionRelatedToAutoAccident	If the default case for this patient is related to an auto-accident, then true. Otherwise, false.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
DefaultCaseConditionRelatedToAutoAccidentState	The state of the auto accident for the default case related to this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
DefaultCaseConditionRelatedToEmployment	If the default case for this patient is related to employment, then true. Otherwise, false.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
DefaultCaseConditionRelatedToPregnancy	If the default case for this patient is related to pregnancy, then true. Otherwise, false.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
DefaultCaseConditionRelatedToAbuse	If the default case for this patient is related to abuse, then true. Otherwise, false.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
DefaultCaseConditionRelatedToOther	If the default case for this patient is related to other, then true. Otherwise, false.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
DefaultCaseConditionRelatedToEPSDT	If the default case for this patient is related to EPSDT, then true. Otherwise, false.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
DefaultCaseConditionRelatedToFamilyPlanning	If the default case for this patient is related to family planning, then true. Otherwise, false.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
DefaultCaseConditionRelatedToEmergency	If the default case for this patient is related to an emergency, then true. Otherwise, false.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
DefaultCaseDatesInjuryStartDate	The start date of the injury of the default case related to this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
DefaultCaseDatesInjuryEndDate	The end date of the injury of the default case related to this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
DefaultCaseDatesSameorSimilarIllnessStartDate	The start date of the same or similar illness of the default case related to this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
DefaultCaseDatesSameorSimilarIllnessEndDate	The end date of the same or similar illness of the default case related to this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
DefaultCaseDatesUnabletoWorkStartDate	The start date the patient was unable to work for the default case related to this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
DefaultCaseDatesUnabletoWorkEndDate	The end date the patient was unable to work for the default case related to this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
DefaultCaseDatesRelatedDisabilityStartDate	The start date of a disability for the default case related to this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
DefaultCaseDatesRelatedDisabilityEndDate	The end date of a disability for the default case related to this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
DefaultCaseDatesRelatedHospitalizationStartDate	The start date of a hospitalization for the default case related to this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
DefaultCaseDatesRelatedHospitalizationEndDate	The end date of a hospitalization for the default case related to this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
DefaultCaseDatesLastMenstrualPeriodDate	The last menstrual period date of the default case related to this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
DefaultCaseDatesLastSeenDate	The date the patient was last seen for the default case related to this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
DefaultCaseDatesReferralDate	The referral date for the default case related to this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
DefaultCaseDatesAcuteManifestationDate	The acute manifestation date of the default case related to this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
DefaultCaseDatesLastX-RayDate	The last x-ray date of the default case related to this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
DefaultCaseDatesAccidentDate	The accident date of the default case related to this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Condition
PrimaryInsurancePolicyCompanyID	The unique identifier of the insurance company associated with the primary insurance policy on the default case for this patient.	Settings > Insurance > Insurance Companies > Edit Insurance Company
PrimaryInsurancePolicyCompanyName	The name of the insurance company associated with the primary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
PrimaryInsurancePolicyPlanID	The unique identifier of the insurance plan associated with the primary insurance policy on the default case for this patient.	Settings > Insurance > Find Insurance Plan > Edit Insurance Plan
PrimaryInsurancePolicyPlanName	The name of the insurance plan associated with the primary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
PrimaryInsurancePolicyPlanAddressLine1	The first address line of the insurance plan associated with the primary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
PrimaryInsurancePolicyPlanAddressLine2	The second address line of the insurance plan associated with the primary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
PrimaryInsurancePolicyPlanCity	The city of the insurance plan associated with the primary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
PrimaryInsurancePolicyPlanState	The state of the insurance plan associated with the primary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
PrimaryInsurancePolicyPlanCountry	The country of the insurance plan associated with the primary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
PrimaryInsurancePolicyPlanZipCode	The zip code of the insurance plan associated with the primary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
PrimaryInsurancePolicyAdjusterFullName	The adjuster name with the insurance plan associated with the primary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
PrimaryInsurancePolicyAdjusterPhoneNumber	The adjuster phone number with the insurance plan associated with the primary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
PrimaryInsurancePolicyAdjusterPhoneNumberExt	The adjuster phone number extension with the insurance plan associated with the primary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
PrimaryInsurancePolicyAdjusterFaxNumber	The adjuster fax number with the insurance plan associated with the primary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
PrimaryInsurancePolicyAdjusterFaxNumberExt	The adjuster fax number extension with the insurance plan associated with the primary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
PrimaryInsurancePolicyNumber	The policy number associated with the primary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
PrimaryInsurancePolicyGroupNumber	The group number associated with the primary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
PrimaryInsurancePolicyCopay	The copay associated with the primary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
PrimaryInsurancePolicyDeductible	The deductible associated with the primary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
PrimaryInsurancePolicyEffectiveStartDate	The effective start date associated with the primary insurance policy on the default case for this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
PrimaryInsurancePolicyEffectiveEndDate	The effective end date associated with the primary insurance policy on the default case for this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
PrimaryInsurancePolicyPatientRelationshipToInsured	Available values: C = Child O = Other S = Self U = Spouse	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
PrimaryInsurancePolicyInsuredFullName	The full name of the insured associated with the primary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
PrimaryInsurancePolicyInsuredAddressLine1	The first address line of the insured associated with the primary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
PrimaryInsurancePolicyInsuredAddressLine2	The second address line of the insured associated with the primary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
PrimaryInsurancePolicyInsuredCity	The city of the insured associated with the primary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
PrimaryInsurancePolicyInsuredState	The state of the insured associated with the primary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
PrimaryInsurancePolicyInsuredCountry	The country of the insured associated with the primary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
PrimaryInsurancePolicyInsuredZipCode	The zip code of the insured associated with the primary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
PrimaryInsurancePolicyInsuredIDNumber	The ID number of the insured associated with the primary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
PrimaryInsurancePolicyInsuredSocialSecurityNumber	The social security number of the insured associated with the primary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
PrimaryInsurancePolicyInsuredDateofBirth	The date of birth of the insured associated with the primary insurance policy on the default case for this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
PrimaryInsurancePolicyInsuredGender	The gender of the insured associated with the primary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
PrimaryInsurancePolicyNotes	The notes on the primary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
SecondaryInsurancePolicyCompanyID	The unique identifier of the insurance company associated with the secondary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
SecondaryInsurancePolicyCompanyName	The name of the insurance company associated with the secondary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
SecondaryInsurancePolicyPlanID	The unique identifier of the insurance plan associated with the secondary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
SecondaryInsurancePolicyPlanName	The name of the insurance plan associated with the secondary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
SecondaryInsurancePolicyPlanAddressLine1	The first address line of the insurance plan associated with the secondary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
SecondaryInsurancePolicyPlanAddressLine2	The second address line of the insurance plan associated with the secondary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
SecondaryInsurancePolicyPlanCity	The city of the insurance plan associated with the secondary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
SecondaryInsurancePolicyPlanState	The state of the insurance plan associated with the secondary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
SecondaryInsurancePolicyPlanCountry	The country of the insurance plan associated with the secondary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
SecondaryInsurancePolicyPlanZipCode	The zip code of the insurance plan associated with the secondary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
SecondaryInsurancePolicyAdjusterFullName	The adjuster name with the insurance plan associated with the secondary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
SecondaryInsurancePolicyAdjusterPhoneNumber	The adjuster phone number with the insurance plan associated with the secondary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
SecondaryInsurancePolicyAdjusterPhoneNumberExt	The adjuster phone number extension with the insurance plan associated with the secondary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
SecondaryInsurancePolicyAdjusterFaxNumber	The adjuster fax number with the insurance plan associated with the secondary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
SecondaryInsurancePolicyAdjusterFaxNumberExt	The adjuster fax number extension with the insurance plan associated with the secondary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
SecondaryInsurancePolicyNumber	The policy number associated with the secondary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
SecondaryInsurancePolicyGroupNumber	The group number associated with the secondary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
SecondaryInsurancePolicyCopay	The copay associated with the secondary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
SecondaryInsurancePolicyDeductible	The deductible associated with the secondary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
SecondaryInsurancePolicyEffectiveStartDate	The effective start date associated with the secondary insurance policy on the default case for this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
SecondaryInsurancePolicyEffectiveEndDate	The effective end date associated with the secondary insurance policy on the default case for this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
SecondaryInsurancePolicyPatientRelationshipToInsured	Available values: C = Child O = Other S = Self U = Spouse	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
SecondaryInsurancePolicyInsuredFullName	The full name of the insured associated with the secondary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
SecondaryInsurancePolicyInsuredAddressLine1	The first address line of the insured associated with the secondary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
SecondaryInsurancePolicyInsuredAddressLine2	The second address line of the insured associated with the secondary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
SecondaryInsurancePolicyInsuredCity	The city of the insured associated with the secondary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
SecondaryInsurancePolicyInsuredState	The state of the insured associated with the secondary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
SecondaryInsurancePolicyInsuredCountry	The country of the insured associated with the secondary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
SecondaryInsurancePolicyInsuredZipCode	The zip code of the insured associated with the secondary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
SecondaryInsurancePolicyInsuredIDNumber	The unique identifier number of the insured associated with the secondary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
SecondaryInsurancePolicyInsuredSocialSecurityNumber	The social security number of the insured associated with the secondary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
SecondaryInsurancePolicyInsuredDateofBirth	The date of birth of the insured associated with the secondary insurance policy on the default case for this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
SecondaryInsurancePolicyInsuredGender	The gender of the insured associated with the secondary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
SecondaryInsurancePolicyNotes	The notes on the secondary insurance policy on the default case for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
Authorization1Number	The authorization number associated with the first authorization entered for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
Authorization1InsurancePlanName	The insurance plan name associated with the first authorization entered for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
Authorization1NumberOfVisits	The number of visits authorized with the first authorization entered for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
Authorization1NumberOfVisitsUsed	The number of visits used for the first authorization entered for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
Authorization1ContactFullName	The insurance contact name associated with the first authorization entered for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
Authorization1ContactPhone	The insurance contact phone number associated with the first authorization entered for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
Authorization1ContactPhoneExt	The insurance contact phone number extension associated with the first authorization entered for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
Authorization1Notes	The authorization notes associated with the first authorization entered for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
Authorization1StartDate	The start date associated with the first authorization entered for this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
Authorization1EndDate	The end date associated with the first authorization entered for this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
Authorization2Number	The authorization number associated with the second authorization entered for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
Authorization2InsPlanName	The insurance plan name associated with the second authorization entered for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
Authorization2NumberOfVisits	The number of visits authorized with the second authorization entered for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
Authorization2NumberOfVisitsUsed	The number of visits used for the second authorization entered for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
Authorization2ContactFullname	The insurance contact name associated with the second authorization entered for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
Authorization2ContactPhone	The insurance contact phone number associated with the second authorization entered for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
Authorization2ContactPhoneExt	The insurance contact phone number extension associated with the second authorization entered for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
Authorization2Notes	The authorization notes associated with the second authorization entered for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
Authorization2StartDate	The start date associated with the second authorization entered for this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
Authorization2EndDate	The end date associated with the second authorization entered for this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
Authorization3Number	The authorization number associated with the third authorization entered for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
Authorization3InsPlanName	The insurance plan name associated with the third authorization entered for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
Authorization3NumberOfVisits	The number of visits authorized with the third authorization entered for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
Authorization3NumberOfVisitsUsed	The number of visits used for the third authorization entered for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
Authorization3ContactFullname	The insurance contact name associated with the third authorization entered for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
Authorization3ContactPhone	The insurance contact phone number associated with the third authorization entered for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
Authorization3ContactPhoneExt	The insurance contact phone number extension associated with the third authorization entered for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
Authorization3Notes	The authorization notes associated with the third authorization entered for this patient.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
Authorization3StartDate	The start date associated with the third authorization entered for this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
Authorization3EndDate	The end date associated with the third authorization entered for this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
AlertMessage	The alert message related to this patient.	Patients > Find Patient > Edit Patient > Alerts
AlertShowWhenDisplayingPatientDetails	True if the alert message related to this patient should show when displaying patient details. False otherwise.	Patients > Find Patient > Edit Patient > Alerts
AlertShowWhenSchedulingAppointments	True if the alert message related to this patient should show when scheduling appointments. False otherwise.	Patients > Find Patient > Edit Patient > Alerts
AlertShowWhenEnteringEncounters	True if the alert message related to this patient should show when entering encounters. False otherwise.	Patients > Find Patient > Edit Patient > Alerts
AlertShowWhenViewingClaimDetails	True if the alert message related to this patient should show when viewing claim details. False otherwise.	Patients > Find Patient > Edit Patient > Alerts
AlertShowWhenPostingPayments	True if the alert message related to this patient should show when posting payments. False otherwise.	Patients > Find Patient > Edit Patient > Alerts
AlertShowWhenPreparingPatientStatements	True if the alert message related to this patient should show when preparing patient statements. False otherwise.	Patients > Find Patient > Edit Patient > Alerts
CollectionCategoryName	The name of the collection category related to this patient.	Patients > Find Patient > Edit Patient > Account
StatementNote	The last statement note posted to this patient's account.	Patients > Find Patient > Edit Patient > Account
LastDiagnosis	The last diagnosis entered for this patient.	Patients > Find Patient > Edit Patient > Account
LastAppointmentDate	The last appointment date scheduled for this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Account
LastEncounterDate	The service date of the last encounter entered for this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Account
LastStatementDate	The date of the last patient statement sent to this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Account
LastPaymentDate	The posting date of the last payment received from this patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient > Account
Charges	The total charges entered for this patient.	Patients > Find Patient > Edit Patient > Account
Adjustments	The total adjustments entered for this patient.	Patients > Find Patient > Edit Patient > Account
InsurancePayments	The total insurance payments posted for this patient.	Patients > Find Patient > Edit Patient > Account
PatientPayments	The total patient payments posted for this patient.	Patients > Find Patient > Edit Patient > Account

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
InsuranceBalance	The insurance balance pending on charges associated with this patient.	Patients > Find Patient > Edit Patient > Account
PatientBalance	The patient balance on charges assigned to this patient.	Patients > Find Patient > Edit Patient > Account
TotalBalance	The total balance related to this patient.	Patients > Find Patient > Edit Patient > Account

4.7 Get Payments

This operation returns a list of payments that match the criteria included within the request.

4.7.1 The Request

The following information may be provided as parameters to the request for this operation.

FIELD NAME	DESCRIPTION	REQUIRED
CustomerKey	The customer key associated with your customer account with Tebra.	Yes
User	The username associated with the user account with authorized security permissions to the API.	Yes
Password	The password associated with the user account with authorized security permissions to the API.	Yes
ID	The unique identifier of the payment.	No
PracticeID	The unique identifier of the practice related to the payment.	No
FromCreatedDate	The starting date the payment record was created (e.g., YYYY-MM-DD).	No
ToCreatedDate	The ending date the payment record was created (e.g., YYYY-MM-DD).	No
FromLastModifiedDate	The starting date the payment was last modified (e.g., YYYY-MM-DD).	No
ToLastModifiedDate	The ending date the payment was last modified (e.g., YYYY-MM-DD).	No
PracticeName	The name of the practice related to this payment.	No
BatchNumber	The batch number of the payment.	No
FromPostDate	The starting date for the payment record's posting date (e.g., YYYY-MM-DD).	No
ToPostDate	The ending date for the payment record's posting date (e.g., YYYY-MM-DD).	No
PayerType	Available values: - Insurance - Other - Patient	No
PayerName	The payer name of the payment.	No
AppointmentID	The unique identifier of the appointment associated to the payment.	No
ReferenceNumber	The reference number of the payment.	No
Amount	The amount of the payment.	No

4.7.2 The Response

The following information will be returned with the response for this operation.

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
PracticeID	The unique identifier associated with the practice related to this payment.	Settings > Company > Find Practice > Edit Practice
ID	The unique identifier of the payment.	Encounters > Find Payments
CreatedDate	The date the payment was created (e.g., YYYY-MM-DD).	N/A
LastModifiedDate	The date the payment was last modified (e.g., YYYY-MM-DD).	N/A
BatchNumber	The batch number of the payment.	Encounters > Find Payments
PostDate	The post date of the payment (e.g., YYYY-MM-DD).	Encounters > Find Payments
AdjudicationDate	The adjudication date of the payment (e.g., YYYY-MM-DD).	Encounters > Find Payments
PayerType	Available values: - Insurance - Other - Patient	Encounters > Find Payments
PayerName	The payer name of the payment.	Encounters > Find Payments
AppointmentID	The unique identifier of the appointment associated to the payment.	Encounters > Find Payments > Edit Payment
ReferenceNumber	The reference number of the payment.	Encounters > Find Payments
PaymentMethod	Available values: - Cash - ElectronicFundsTransfer - Check - Other - CreditCard - Unknown	Encounters > Find Payments
Category	The category of the payment.	Encounters > Find Payments
Amount	The payment amount.	Encounters > Find Payments
Applied	The payment applied amount.	Encounters > Find Payments
Adjustments	The payment adjustments amount.	Encounters > Find Payments > Edit Payment
Refunds	The payment refunds amount.	Encounters > Find Payments
Unapplied	The payment unapplied amount.	Encounters > Find Payments

4.8 Get Practices

This operation returns a list of practices that match the criteria included within the request.

4.8.1 The Request

The following information may be provided as parameters to the request for this operation.

FIELD NAME	DESCRIPTION	REQUIRED
CustomerKey	The customer key associated with your customer account with Tebra.	Yes
User	The username associated with the user account with authorized security permissions to the API.	Yes
Password	The password associated with the user account with authorized security permissions to the API.	Yes
PracticeName	The name of the practice.	Yes
FromCreateDate	The starting date the practice was created (e.g., YYYY-MM-DD).	No
ToCreateDate	The ending date the practice was created (e.g., YYYY-MM-DD).	No
FromLastModifiedDate	The starting date the practice was last modified (e.g., YYYY-MM-DD).	No
ToLastModifiedDate	The ending date the practice was last modified (e.g., YYYY-MM-DD).	No
TaxID	The tax ID or EIN of the practice.	No
NPI	The NPI of the practice.	No
Active	True if the practice is active, false otherwise.	No

4.8.2 The Response

The following information will be returned with the response for this operation.

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
ID	The unique identifier of the practice.	Settings > Company > Find Practice > Edit Practice
PracticeName	The name of the practice.	Settings > Practice Information
CreateDate	The date the practice was created (e.g., YYYY-MM-DD).	N/A
LastModifiedDate	The date the practice was last modified (e.g., YYYY-MM-DD).	N/A
TaxID	The tax ID or EIN of the practice.	Settings > Practice Information
NPI	The NPI of the practice.	Settings > Practice Information
Active	True if the practice is active. Otherwise, false.	Settings > Practice Information
SubscriptionEdition	The subscription edition of the practice.	Settings > Practice Information
PracticeAddressLine1	The first address line of the practice.	Settings > Practice Information

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
PracticeAddressLine2	The second address line of the practice.	Settings > Practice Information
PracticeCity	The city of the practice.	Settings > Practice Information
PracticeState	The state of the practice.	Settings > Practice Information
PracticeCountry	The country of the practice (if different than the U.S.).	Settings > Practice Information
PracticeZipCode	The zip code of the practice.	Settings > Practice Information
WebSite	The web site of the practice.	Settings > Practice Information
Phone	The phone number of the practice.	Settings > Practice Information
PhoneExt	The phone number extension of the practice.	Settings > Practice Information
Fax	The fax number of the provider.	Settings > Practice Information
FaxExt	The fax number extension of the provider.	Settings > Practice Information
kFaxNumber	The Tebra assigned fax number of the practice.	Settings > Practice Information
Email	The email address of the practice.	Settings > Practice Information
AdministratorAddressLine1	The first address line of the practice administrator.	Settings > Practice Information
AdministratorAddressLine2	The second address line of the practice administrator.	Settings > Practice Information
AdministratorCity	The city of the practice administrator.	Settings > Practice Information
AdministratorState	The state of the practice administrator.	Settings > Practice Information
AdministratorCountry	The country of the practice administrator (if different than the U.S.).	Settings > Practice Information
AdministratorZipCode	The zip code of the practice administrator.	Settings > Practice Information
AdministratorPhone	The phone number of the practice administrator.	Settings > Practice Information
AdministratorPhoneExt	The phone number extension of the practice administrator.	Settings > Practice Information
AdministratorFax	The fax number of the practice administrator.	Settings > Practice Information
AdministratorFaxExt	The fax number extension of the practice administrator.	Settings > Practice Information
AdministratorEmail	The email address of the practice administrator.	Settings > Practice Information
BillingContactAddressLine1	The first address line of the billing contact.	Settings > Practice Information
BillingContactAddressLine2	The second address line of the billing contact.	Settings > Practice Information
BillingContactCity	The city of the billing contact.	Settings > Practice Information
BillingContactState	The state of the billing contact.	Settings > Practice Information
BillingContactCountry	The country of the billing contact (if different than the U.S.).	Settings > Practice Information
BillingContactZipCode	The zip code of the billing contact.	Settings > Practice Information
BillingContactPhone	The phone number of the billing contact.	Settings > Practice Information
BillingContactPhoneExt	The phone number extension of the billing contact.	Settings > Practice Information
BillingContactFax	The fax number of the billing contact.	Settings > Practice Information
BillingContactFaxExt	The fax number extension of the billing contact.	Settings > Practice Information
BillingContactEmail	The email address of the billing contact.	Settings > Practice Information
Notes	The notes related to this provider.	Settings > Practice Information

4.9 Get Procedure Code

This operation returns a list of procedure codes that match the criteria included within the request.

4.9.1 The Request

The following information may be provided as parameters to the request for this operation.

FIELD NAME	DESCRIPTION	REQUIRED
CustomerKey	The customer key associated with your customer account with Tebra.	Yes
User	The username associated with the user account with authorized security permissions to the API.	Yes
Password	The password associated with the user account with authorized security permissions to the API.	Yes
ID	The unique identifier of the procedure code to look up.	No
ProcedureCode	The procedure code.	No
Active	Used to filter out only active procedure codes.	No
CustomerSpecific	Used to filter out only customer created procedure codes.	No
FromCreatedDate	The starting date the procedure code was created (e.g., YYYY-MM-DD).	No
ToCreatedDate	The ending date the procedure code was created (e.g., YYYY-MM-DD).	No
FromLastModifiedDate	The starting date the procedure code was last modified (e.g., YYYY-MM-DD).	No
ToLastModifiedDate	The ending date the procedure code was last modified (e.g., YYYY-MM-DD).	No

4.9.2 The Response

The following information will be returned with the response for this operation.

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
ID	The unique identifier of the procedure code.	N/A
CustomerSpecific	True if the code was created by the customer. Otherwise, false.	Settings > Codes > Find Procedures > Edit Procedure
ProcedureCode	The procedure or speed code.	Settings > Codes > Find Procedures > Edit Procedure
TypeOfServiceCode	The type of service of the procedure code.	Settings > Codes > Find Procedures > Edit Procedure
Active	True if the procedure code is active. Otherwise, false.	Settings > Codes > Find Procedures > Edit Procedure
OfficialName	The official name of the procedure code.	Settings > Codes > Find Procedures > Edit Procedure

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
LocalName	The local name of the procedure code.	Settings > Codes > Find Procedures > Edit Procedure
OfficialDescription	The official description code of the procedure code.	Settings > Codes > Find Procedures > Edit Procedure
BillableCode	The billable procedure code of the procedure code.	Settings > Codes > Find Procedures > Edit Procedure
DefaultUnits	The default units of the procedure code.	Settings > Codes > Find Procedures > Edit Procedure
NDC	The NDC number of the procedure code	Settings > Codes > Find Procedures > Edit Procedure
DrugName	The drug name of the procedure code	Settings > Codes > Find Procedures > Edit Procedure
ProcedureCodeCategoryID	The procedure code category of the procedure code	N/A
CreatedDate	The date the provider was created (e.g., YYYY-MM-DD).	N/A
ModifiedDate	The date the provider was last modified (e.g., YYYY-MM-DD).	N/A

4.10 Get Providers

This operation returns a list of providers that match the criteria included within the request.

4.10.1 The Request

The following information may be provided as parameters to the request for this operation.

FIELD NAME	DESCRIPTION	REQUIRED
CustomerKey	The customer key associated with your customer account with Tebra.	Yes
User	The username associated with the user account with authorized security permissions to the API.	Yes
Password	The password associated with the user account with authorized security permissions to the API.	Yes
PracticeName	The name of the practice related to the provider.	Yes
FromCreatedDate	The starting date the provider record was created (e.g., YYYY-MM-DD).	No
ToCreatedDate	The ending date the provider record was created (e.g., YYYY-MM-DD).	No
FromLastModifiedDate	The starting date the provider was last modified (e.g., YYYY-MM-DD).	No
ToLastModifiedDate	The ending date the provider was last modified (e.g., YYYY-MM-DD).	No
Type	Available values: - Normal Provider - Referring Provider	No
FullName	The full name of the provider.	No
DepartmentName	The department name related to this provider.	No

4.10.2 The Response

The following information will be returned with the response for this operation.

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
ID	The unique identifier of the provider.	Settings > Providers > Edit Provider or Settings > Other List > Find Referring Physicians > Edit Referring Physician
CreatedDate	The date the provider was created (e.g., YYYY-MM-DD).	N/A
LastModifiedDate	The date the provider was last modified (e.g., YYYY-MM-DD).	N/A
PracticeName	The name of the practice related to this provider.	Settings > Practice Information
Type	Available values: - Normal Provider - Referring Provider	N/A
FullName	The full name of the provider.	Settings > Providers > Edit Provider or Settings > Other List > Find Referring Physicians > Edit Referring Physician
Prefix	The prefix of the provider.	Settings > Providers > Edit Provider or Settings > Other List > Find Referring Physicians > Edit Referring Physician
FirstName	The first name of the provider.	Settings > Providers > Edit Provider or Settings > Other List > Find Referring Physicians > Edit Referring Physician
MiddleName	The middle name of the provider.	Settings > Providers > Edit Provider or Settings > Other List > Find Referring Physicians > Edit Referring Physician
LastName	The last name of the provider.	Settings > Providers > Edit Provider or Settings > Other List > Find Referring Physicians > Edit Referring Physician
Suffix	The suffix of the provider.	Settings > Providers > Edit Provider or Settings > Other List > Find Referring Physicians > Edit Referring Physician
Degree	The degree of the provider.	Settings > Providers > Edit Provider or Settings > Other List > Find Referring Physicians > Edit Referring Physician
SocialSecurityNumber	The social security number of the provider.	Settings > Providers > Edit Provider or Settings > Other List > Find Referring Physicians > Edit Referring Physician
NationalProviderIdentifier	The national provider identifier (NPI) of the provider.	Settings > Providers > Edit Provider or Settings > Other List > Find Referring Physicians > Edit Referring Physician
SpecialtyName	The specialty name associated with the provider.	Settings > Providers > Edit Provider or Settings > Other List > Find Referring Physicians > Edit Referring Physician
BillingType	The type of provider for Tebra billing purposes.	Settings > Providers > Edit Provider or Settings > Other List > Find Referring Physicians > Edit Referring Physician

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
Active	True if the provider is active. False otherwise.	Settings > Providers > Edit Provider or Settings > Other List > Find Referring Physicians > Edit Referring Physician
DepartmentName	The department name related to this provider.	Settings > Providers > Edit Provider or Settings > Other List > Find Referring Physicians > Edit Referring Physician
EncounterFormName	The name of the encounter form related to this provider.	Settings > Providers > Edit Provider or Settings > Other List > Find Referring Physicians > Edit Referring Physician
AddressLine1	The first address line of the provider.	Settings > Providers > Edit Provider or Settings > Other List > Find Referring Physicians > Edit Referring Physician
AddressLine2	The second address line of the provider.	Settings > Providers > Edit Provider or Settings > Other List > Find Referring Physicians > Edit Referring Physician
City	The city of the provider.	Settings > Providers > Edit Provider or Settings > Other List > Find Referring Physicians > Edit Referring Physician
State	The state of the provider.	Settings > Providers > Edit Provider or Settings > Other List > Find Referring Physicians > Edit Referring Physician
Country	The country of the provider (if different than the U.S.).	Settings > Providers > Edit Provider or Settings > Other List > Find Referring Physicians > Edit Referring Physician
ZipCode	The zip code of the provider.	Settings > Providers > Edit Provider or Settings > Other List > Find Referring Physicians > Edit Referring Physician

4.11 Get Service Locations

This operation returns a list of service locations that match the criteria included within the request.

4.11.1 The Request

The following information may be provided as parameters to the request for this operation.

FIELD NAME	DESCRIPTION	REQUIRED
CustomerKey	The customer key associated with your customer account with Tebra.	Yes
User	The username associated with the user account with authorized security permissions to the API.	Yes
Password	The password associated with the user account with authorized security permissions to the API.	Yes
ID	The unique identifier of the service location.	No

FIELD NAME	DESCRIPTION	REQUIRED
PracticeName	The name of the practice related to the service location.	Yes
PracticeID	The unique identifier of the practice related to the service location.	Yes
FromCreatedDate	The starting date the service location was created (e.g., YYYY-MM-DD).	No
ToCreatedDate	The ending date the service location was created (e.g., YYYY-MM-DD).	No
FromLastModifiedDate	The starting date the service location was last modified (e.g., YYYY-MM-DD).	No
ToLastModifiedDate	The ending date the service location was last modified (e.g., YYYY-MM-DD).	No

4.11.2 The Response

The following information will be returned with the response for this operation.

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
ID	The unique identifier of the service location.	N/A
PracticeID	The unique identifier of the practice	Settings > Company > Find Practice > Edit Practice
PracticeName	The name of the practice related to the service location.	Settings > Practice Information
Name	The name of the service location.	Settings > Service Location > Find Service Location > Edit Service Location
AddressLine1	The first address line of the service location.	Settings > Service Location > Find Service Location > Edit Service Location
AddressLine2	The second address line of the service location.	Settings > Service Location > Find Service Location > Edit Service Location
City	The city of the service location.	Settings > Service Location > Find Service Location > Edit Service Location
State	The state of the service location.	Settings > Service Location > Find Service Location > Edit Service Location
Country	The country of the service location (if different than the U.S.).	Settings > Service Location > Find Service Location > Edit Service Location
ZipCode	The zip code of the service location.	Settings > Service Location > Find Service Location > Edit Service Location
CreatedDate	The date the provider was created (e.g., YYYY-MM-DD).	N/A
ModifiedDate	The date the provider was last modified (e.g., YYYY-MM-DD).	N/A
PlaceOfService	The place of service type id for the service location.	Settings > Service Location > Find Service Location > Edit Service Location
BillingName	The billing name for the service location.	Settings > Service Location > Find Service Location > Edit Service Location
Phone	The phone number for the service location.	Settings > Service Location > Find Service Location > Edit Service Location
PhoneExt	The phone extension for the service location.	Settings > Service Location > Find Service Location > Edit Service Location
FaxPhone	The fax number for the service location.	Settings > Service Location > Find Service Location > Edit Service Location

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
FaxPhoneExt	The fax number extension for the service location.	Settings > Service Location > Find Service Location > Edit Service Location
HCFABox32FacilityID	The facility ID for the service location.	Settings > Service Location > Find Service Location > Edit Service Location
CLIANumber	The CLIA number for the service location.	Settings > Service Location > Find Service Location > Edit Service Location
NPI	The NPI for the service location.	Settings > Service Location > Find Service Location > Edit Service Location
FacilityIDType	The Facility ID Type for the service location.	Settings > Service Location > Find Service Location > Edit Service Location

4.12 Get Transactions

This operation returns a list of transactions that match the criteria included within the request.

4.12.1 The Request

The following information may be provided as parameters to the request for this operation.

FIELD NAME	DESCRIPTION	REQUIRED
CustomerKey	The customer key associated with your customer account with Tebra.	Yes
User	The username associated with the user account with authorized security permissions to the API.	Yes
Password	The password associated with the user account with authorized security permissions to the API.	Yes
PracticeName	The name of the practice related to the provider.	Yes
FromLastModifiedDate	The starting date the transaction was last modified (e.g., YYYY-MM-DD).	No
LastModifiedDate	The ending date the transaction was last modified (e.g., YYYY-MM-DD).	No
FromTransactionDate	The starting date the transaction was entered by the user (e.g., YYYY-MM-DD).	No
ToTransactionDate	The ending date the transaction was entered by the user (e.g., YYYY-MM-DD).	No
FromPostingDate	The starting posting date of the transaction as specified by the user (e.g., YYYY-MM-DD).	No
ToPostingDate	The ending posting date of the transaction as specified by the user (e.g., YYYY-MM-DD).	No
FromServiceDate	The starting service date of the transaction, if applicable (e.g., YYYY-MM-DD).	No
ToServiceDate	The ending service date of the transaction, if applicable (e.g., YYYY-MM-DD).	No
ClaimID	The unique identifier of the claim.	No
Type	The type of transaction.	No
PayerType	The payer type related to this transaction, if applicable.	No
InsuranceOrder	The order of the insurance related to this transaction, if applicable.	No
ProcedureCode	The procedure code related to this transaction, if applicable.	No

4.12.2 The Response

The following information will be returned with the response for this operation.

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
ID	The unique identifier of the claim transaction.	N/A
Last Modified Date	The date the transaction was last modified (e.g., YYYY-MM-DD).	Varies by transaction
PracticeName	The name of the practice related to this transaction.	Settings > Practice Information
TransactionDate	The date the transaction was entered by the user (e.g., YYYY-MM-DD).	Varies by transaction
PostingDate	The posting date of the transaction as specified by the user (e.g., YYYY-MM-DD).	Varies by transaction
ServiceDate	The service date of the transaction, if applicable (e.g., YYYY-MM-DD).	Varies by transaction
Type	The type of transaction.	Varies by transaction
PatientID	The unique identifier of the patient related to this transaction, if applicable.	Patients > Find Patient > Edit Patient
PatientFullName	The full name of the patient related to this transaction, if applicable.	Patients > Find Patient > Edit Patient
PayerType	The payer type related to this transaction, if applicable.	Varies by transaction
Insurance Order	The order of the insurance related to this transaction, if applicable.	Varies by transaction
InsuranceID	The unique identifier of the insurance related to this transaction, if applicable.	Varies by transaction
InsuranceCompanyName	The name of the insurance company related to this transaction, if applicable.	Varies by transaction
InsurancePlanName	The name of the insurance plan related to this transaction, if applicable.	Varies by transaction
ProcedureCode	The procedure code related to this transaction, if applicable.	Varies by transaction
Description	The description of this transaction.	Varies by transaction
Amount	The amount of this transaction, if applicable.	Varies by transaction
ClaimID	The unique identifier of the claim.	Encounter > Track Claim Status
PracticeID	The unique identifier of the practice related to this transaction.	Settings > Company > Find Practice > Edit Practice

4.13 Create Appointment

This operation creates a new appointment with the information included within the request.

4.13.1 The Request

The following information may be provided as parameters to the request for this operation.

FIELD NAME	DESCRIPTION	REQUIRED
CustomerKey	The customer key associated with your customer account with Tebra.	Yes
User	The username associated with the user account with authorized security permissions to the API.	Yes
Password	The password associated with the user account with authorized security permissions to the API.	Yes
PracticeID	The unique identifier of the practice.	Yes
ServiceLocationID	The unique identifier of the service location.	Yes
AppointmentStatus	Available values: - Unknown - Scheduled - ReminderSent - Confirmed - CheckedIn - Roomed - CheckedOut - NeedsReschedule - ReadyToBeSeen - NoShow - Cancelled - Rescheduled - Tentative	Yes
StartTime	The start time of the appointment in UTC time standard (e.g., 2020-01-24T22:00:00.000Z).	Yes
EndTime	The end time of the appointment in UTC time standard (e.g., 2020-01-24T22:30:00.000Z).	Yes
IsRecurring	Defines if the appointment is recurring.	Yes
PatientSummary	Structure described below.	Yes
AppointmentReasonID	The unique identifier of the appointment reason.	No
RecurrenceRule	Structure described below.	No
ProviderID	The unique identifier of the provider.	No
ResourceID	The unique identifier of the resource.	No
Notes	The appointment notes.	No
ResourceIDs	The list of resource unique identifiers.	No
AppointmentType	Available values: U = Unknown P = Patient O = Other	Yes

FIELD NAME	DESCRIPTION	REQUIRED
WasCreatedOnline	Defines if the appointment is created online.	Yes
InsurancePolicyAuthorizationID	The unique identifier of the insurance policy authorization.	No
PatientCaseID	The unique identifier of the patient case.	No
AppointmentName	The name of the appointment.	No
IsGroupAppointment	Defines if the appointment is for a group.	No
MaxAttendees	Defines the maximum number of attendees.	No
AttendeesCount	The number of attendees in the appointment.	No
PatientSummaries	List of patient summary structure defined below:	No
ForRecare	Defines if the appointment is for recare.	No
PatientID	The unique identifier of the patient.	Yes
AppointmentMode	Available values: - InOffice - Telehealth	No

4.13.2 The Response

The following information will be returned with the response for this operation.

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
PracticeID	The unique identifier of the practice related to this appointment.	Settings > Company > Find Practice > Edit Practice
ServiceLocationID	The unique identifier of the service location related to this appointment.	N/A
AppointmentStatus	Available values: - Unknown - Scheduled - ReminderSent - Confirmed - CheckedIn - Roomed - CheckedOut - NeedsReschedule - ReadyToBeSeen - NoShow - Cancelled - Rescheduled - Tentative	Appointments > Find Appointment > Appointment Details
StartTime	The start time of the appointment in UTC time standard (e.g., 2020-01-24T22:00:00.000Z).	Appointments > Find Appointment > Appointment Details
EndTime	The end time of the appointment in UTC time standard (e.g., 2020-01-24T22:30:00.000Z).	Appointments > Find Appointment > Appointment Details
IsRecurring	Defines if the appointment is recurring.	Appointments > Find Appointment > Appointment Details > Recurrence
OccurrenceID	The unique identifier of the occurrence.	Appointments > Find Appointment > Appointment Details

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
PatientSummary	Structure described below.	Patients > Find Patient > Edit Patient
AppointmentReasonID	The unique identifier of the appointment reason.	Appointments > Appointment Reasons > Edit Appointment Reason
RecurrenceRule	Structure described below.	Appointments > Find Appointment > Appointment Details > Recurrence
ProviderID	The unique identifier of the provider.	Settings > Find Provider > Edit Provider
ResourceID	The unique identifier of the resource.	N/A
Notes	The appointment notes.	Appointments > Find Appointment > Appointment Details
ResourceIDs	The list of resource unique identifiers.	N/A
AppointmentType	Available values: U = Unknown P= Patient O = Other	Appointments > Find Appointment > Appointment Details
WasCreatedOnline	Defines if the appointment is created online.	N/A
InsurancePolicyAuthorizationId	The unique identifier of the insurance policy authorization.	Appointments > Find Appointment > Appointment Details > Authorization...
PatientCaseID	The unique identifier of the patient case.	Appointments > Find Appointment > Appointment Details > Case...
AppointmentName	The name of the appointment.	Appointments > Find Appointment
IsGroupAppointment	Defines if the appointment is for a group.	N/A
MaxAttendees	Defines the maximum number of attendees.	N/A
AttendeesCount	The number of attendees in the appointment.	N/A
PatientSummaries	List of patient summary structure defined below:	Patients > Find Patient > Edit Patient
ForRecare	Defines if the appointment is for recare.	N/A
PatientID	The unique identifier of the patient.	Patients > Find Patient > Edit Patient
PracticeID	The unique identifier of the practice.	Settings > Company > Find Practice > Edit Practice
GenderID	The unique identifier of the gender.	Patients > Find Patient > Edit Patient
DateOfBirth	The date of birth of the patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient
FirstName	The first name of the patient.	Patients > Find Patient > Edit Patient
MiddleName	The middle name of the patient.	Patients > Find Patient > Edit Patient
LastName	The last name of the patient.	Patients > Find Patient > Edit Patient
Email	The email address of the patient.	Patients > Find Patient > Edit Patient
HomePhone	The home phone number of the patient (e.g., (706) 223-3445).	Patients > Find Patient > Edit Patient
WorkPhone	The work phone number of the patient (e.g., (706) 223-3445).	Patients > Find Patient > Edit Patient
MobilePhone	The mobile phone number of the patient (e.g., (706) 223-3445).	Patients > Find Patient > Edit Patient
PreferredPhoneType	The preferred phone type of the patient (e.g., Mobile Phone).	N/A
WorkEmail	The work email address of the patient.	Patients > Find Patient > Edit Patient

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
OtherEmail	The other email address of the patient.	Patients > Find Patient > Edit Patient
PreferredEmailType	The preferred email type of the patient (e.g., Work Email).	N/A
Guid	GUID of the Patient Summary	N/A
RecurrenceRuleID	The unique identifier of the recurrence rule.	Appointments > Find Appointment > Appointment Details > Recurrence
AppointmentID	The unique identifier of the appointment.	Appointments > Find Appointment
StartDate	The start date and time of the appointment recurrence rule in UTC time standard.	Appointments > Find Appointment > Appointment Details > Recurrence
EndDate	The start date and time of the appointment recurrence rule in UTC time standard.	Appointments > Find Appointment > Appointment Details > Recurrence
NumOccurrences	The number of appointment occurrences.	Appointments > Find Appointment > Appointment Details > Recurrence
DayInterval	Day interval of the appointment recurrence rule (e.g., 8 - Each eight days).	Appointments > Find Appointment > Appointment Details > Recurrence
MonthInterval	Month interval of the appointment recurrence rule (e.g., 3 - Each three months).	Appointments > Find Appointment > Appointment Details > Recurrence
MonthOfYear	Month of the year of the appointment recurrence rule (e.g., 10 - Month of October).	Appointments > Find Appointment > Appointment Details > Recurrence
DayOfMonth	Day of the month of the appointment recurrence rule (e.g., 25 -Day 25 of the month).	Appointments > Find Appointment > Appointment Details > Recurrence
TypeOfDay	Available values: - Unknown - Weekday - Weekend	Appointments > Find Appointment > Appointment Details > Recurrence
DayOfWeekMonthlyOrdinal	Available values: - Unknown - First - Second - Third - Fourth - Last	Appointments > Find Appointment > Appointment Details > Recurrence
DayOfWeekMonthlyOrdinalFlags	Number that represents the weeks of month (e.g., 21 = 10101B - First, Third and Last Week)	Appointments > Find Appointment > Appointment Details > Recurrence
TypeOfDayMonthlyOrdinal	Available values: - Unknown - First - Second - Third - Fourth - Last	Appointments > Find Appointment > Appointment Details > Recurrence
TypeOfDayMonthlyOrdinalFlags	Number that represents the weeks of month: - If TypeOfDay is Weekday (e.g., 17 = 10001B - First and Last days of weekdays) - If TypeOfDay is Weekend (e.g., 3 = 00011B - First and Second days of weekend)	Appointments > Find Appointment > Appointment Details > Recurrence

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
DayOfWeek	Available values: - Sunday - Monday - Tuesday - Wednesday - Thursday - Friday - Saturday	Appointments > Find Appointment > Appointment Details > Recurrence
DayOfWeekFlags	Number that represents the days of week (e.g., 35 = 0100011B - Monday, Tuesday and Saturday).	Appointments > Find Appointment > Appointment Details > Recurrence
NumberOfTimes	The number of times to apply the recurrence rule (e.g., 5).	Appointments > Find Appointment > Appointment Details > Recurrence
AppointmentMode	Available values: - InOffice - Telehealth	Web Platform > Calendar > New Appointment > Appointment Mode

4.14 Create Document

This operation creates a new document with the information included within the request.

4.14.1 The Request

The following information may be provided as parameters to the request for this operation.

FIELD NAME	DESCRIPTION	REQUIRED
DocumentDate	The uploaded date for this document in the web platform (e.g., YYYY-MM-DD).	Yes
DocumentNotes	The notes or comments related to this document.	No
FileContent	The base64Binary data for this document.	Yes
FileName	The name for this document.	Yes

FIELD NAME	DESCRIPTION	REQUIRED
Label	Available values: - Appeals Package - A/R - Authorization - Claim Status - Copay Log - Diagnostic Ultrasound - Document Batch - Eligibility - Explanation of Benefits (EOB) - History and Physical - Insurance Correspondence - Letter of Medical Necessity - Lien Document - Medical Record Request - Medical Report - Narrative Report - Operative Report - Patient Authorization/Referral - Patient Correspondence - Patient Demographics - Patient Driver's License - Patient Insurance Card - Payment Batch - Prescriptions - Superbill - Superbill Batch - Tests - Ultrasound - Other - Continuity of Care Received	Yes
PatientId	The unique identifier for the patient related to this document.	Yes
PracticeId	The unique identifier associated with the practice related to this document.	Yes
Status	Available values: - New - In-Process - Ready for Entry - Processed - Error - New-Billing	Yes

4.14.2 The Response

The following information will be returned with the response for this operation.

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
CreatedDate	The created date for this document in the Desktop Application (PM) (e.g., YYYY-MM-DD).	Desktop Application (PM) > Documents > Find Documents
DocumentDate	The uploaded date for this document in the web platform (e.g., YYYY-MM-DD).	Web Platform > Platform Icon > Documents
DocumentID	The unique identifier for the document.	Documents > Find Documents
Label	Available values: <ul style="list-style-type: none"> - Appeals Package - A/R - Authorization - Claim Status - Copay Log - Diagnostic Ultrasound - Document Batch - Eligibility - Explanation of Benefits (EOB) - History and Physical - Insurance Correspondence - Letter of Medical Necessity - Lien Document - Medical Record Request - Medical Report - Narrative Report - Operative Report - Patient Authorization/Referral - Patient Correspondence - Patient Demographics - Patient Driver's License - Patient Insurance Card - Payment Batch - Prescriptions - Superbill - Superbill Batch - Tests - Ultrasound - Other - Continuity of Care Received 	Documents > Find Documents
Name	The name of this document.	Documents > Find Documents
Notes	The notes or comments related to this document.	Documents > Find Documents

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
Status	Available values: <ul style="list-style-type: none"> - New - In-Process - Ready for Entry - Processed - Error - New-Billing 	Documents > Find Documents
Type	Available values: <ul style="list-style-type: none"> - Unknown - Scan - File - Report - DirectMessage - PatientUploaded 	N/A

4.15 Create Encounter

This operation creates a new encounter with the information included within the request.

4.15.1 The Request

The following information may be provided as parameters to the request for this operation.

FIELD NAME	DESCRIPTION	REQUIRED
Practice	To select a practice, caller would provide one of the sub- fields below.	Yes
PracticeID	The unique identifier associated with the practice related to this encounter.	Yes
PracticeExternalID	The unique identifier of the practice in a third-party software system (used for integration purposes).	Yes
PracticeName	The name of the practice related to this encounter.	Yes
Appointment	To select an appointment, caller would provide one of the sub- fields below.	No
AppointmentID	The unique identifier of the appointment.	No
AppointmentExternalID	The unique identifier of the appointment in a third-party software system (used for integration purposes).	No
Patient	To select a patient, caller would provide one or more of the sub- fields below.	Yes
PatientID	The unique identifier of the patient related to this encounter.	Yes
PatientExternalID	The unique identifier of the patient in a third-party software system (used for integration purposes).	Yes
Prefix	The prefix of the patient related to this encounter.	Yes

FIELD NAME	DESCRIPTION	REQUIRED
FirstName	The first name of the patient related to this encounter.	Yes
MiddleName	The middle name of the patient related to this encounter.	Yes
LastName	The last name of the patient related to this encounter.	Yes
Suffix	The suffix of the patient related to this encounter.	Yes
Case	To select a case, caller would provide one of the sub-fields below.	Yes
CaseID	The unique identifier of the case related to this encounter.	Yes
CaseExternalID	The unique identifier of the case in a third-party software system (used for integration purposes).	Yes
CaseName	The name of the case related to this encounter.	Yes
CasePayerScenario	The payer scenario of the case related to this encounter.	Yes
AuthorizationNumber	The authorization number associated with this encounter.	No
ServiceStartDate	The service start date of this encounter (e.g., YYYY-MM-DD).	Yes
ServiceEndDate	The service end date of this encounter (e.g., YYYY-MM-DD).	No
PostDate	The post date of this encounter (e.g., YYYY-MM-DD).	Yes
BatchNumber	The batch number associated with this encounter.	No
SchedulingProvider	To select a provider, caller would provide one or more of the sub-fields below.	No
ProviderID	The unique identifier of the scheduling provider related to this encounter.	No
ExternalID	The unique identifier of the provider in a third-party software system (used for integration purposes).	No
Prefix	The prefix of the scheduling provider related to this encounter.	No
FirstName	The first name of the scheduling provider related to this encounter.	No
MiddleName	The middle name of the scheduling provider related to this encounter.	No
LastName	The last name of the scheduling provider related to this encounter.	No
Suffix	The suffix of the scheduling provider related to this encounter.	No
RenderingProvider	To select a provider, caller would provide one or more of the sub-fields below.	Yes
ProviderID	The unique identifier of the rendering provider related to this encounter.	No
ExternalID	The unique identifier of the provider in a third-party software system (used for integration purposes).	No
Prefix	The prefix of the rendering provider related to this encounter.	No
FirstName	The first name of the rendering provider related to this encounter.	No
MiddleName	The middle name of the rendering provider related to this encounter.	No
LastName	The last name of the rendering provider related to this encounter.	No
Suffix	The suffix of the rendering provider related to this encounter.	No

FIELD NAME	DESCRIPTION	REQUIRED
SupervisingProvider	To select a provider, caller would provide one or more of the sub-fields below.	No
ProviderID	The unique identifier of the supervising provider related to this encounter.	No
ExternalID	The unique identifier of the provider in a third-party software system (used for integration purposes).	No
Prefix	The prefix of the supervising provider related to this encounter.	No
FirstName	The first name of the supervising provider related to this encounter.	No
MiddleName	The middle name of the supervising provider related to this encounter.	No
LastName	The last name of the supervising provider related to this encounter.	No
Suffix	The suffix of the supervising provider related to this encounter.	No
ReferringProvider	To select a provider, caller would provide one or more of the sub-fields below.	No
ProviderID	The unique identifier of the referring provider related to this encounter.	No
ExternalID	The unique identifier of the provider in a third-party software system (used for integration purposes).	No
Prefix	The prefix of the referring provider related to this encounter.	No
FirstName	The first name of the referring provider related to this encounter.	No
MiddleName	The middle name of the referring provider related to this encounter.	No
LastName	The last name of the referring provider related to this encounter.	No
Suffix	The suffix of the referring provider related to this encounter.	No
ServiceLocation	To select a service location, caller would provide one of the sub-fields below.	Yes
LocationID	The unique identifier of the service location related to this encounter.	No
LocationName	The name of the service location related to this encounter.	Yes
PlaceOfService	To select the place of service, caller would provide one of the sub-fields below.	No
PlaceOfServiceCode	The place of service code related to this encounter.	No
PlaceOfServiceName	The place of service name related to this encounter.	No
Payment	Used when a payment is collected with the encounter (copay for example).	No
AmountPaid	The amount paid.	No
PaymentMethod	Available values: - Cash - ElectronicFundsTransfer - Check - Other - CreditCard - Unknown	No
ReferenceNumber	The reference number for this payment.	No
Description	The description for this payment.	No

FIELD NAME	DESCRIPTION	REQUIRED
Category	The text matching an existing category in Tebra.	No
Hospitalization	The hospitalization dates related to this encounter.	No
StartDate	The hospitalization start date related to this encounter (e.g., YYYY-MM-DD).	No
EndDate	The hospitalization end date related to this encounter (e.g., YYYY-MM-DD).	No
Miscellaneous	Additional information for the payer.	No
LocalUseBox10d	The local use box 10d custom insurance field related to this encounter.	No
LocalUseBox19	The local use box 19 custom insurance field related to this encounter.	No
DoNotSendClaimElectronically	True if the claim should not be sent electronically. False otherwise.	No
DoNotSendElectronicallyToSecondary	True if the claim should not be sent electronically to the secondary insurance. False otherwise.	No
E-ClaimNoteType	The line note related to this encounter.	No
E-ClaimNote	The line note related to this encounter.	No
MedicalOfficeNotes	The notes entered into the medical office notes field.	No
BusinessOfficeNotes	The notes entered into the medical office notes field.	No
Service Lines	The service lines on the encounter. <i>Note:</i> When there are multiple service lines, the service lines created on the encounter will preserve the order in which they are received.	Yes
ServiceLine	This section shall be repeated for each charge.	Yes
EncounterProcedureExternalID	The unique identifier of the service line in a third-party software system (used for integration purposes).	No
ServiceStartDate	The service start date of this charge (e.g., YYYY-MM-DD).	Yes
ServiceEndDate	The service end date of this charge (e.g., YYYY-MM-DD).	No
ProcedureCode	The procedure code related to this charge.	Yes
ProcedureModifier1	The first modifier of the procedure related to this charge.	No
ProcedureModifier2	The second modifier of the procedure related to this charge.	No
ProcedureModifier3	The third modifier of the procedure related to this charge.	No
ProcedureModifier4	The fourth modifier of the procedure related to this charge.	No
DiagnosisCode1	The first diagnosis code related to this charge.	Yes
DiagnosisCode2	The second diagnosis code related to this charge.	No
DiagnosisCode3	The third diagnosis code related to this charge.	No
DiagnosisCode4	The fourth diagnosis code related to this charge.	No
Units	The number of units of the procedure related to this charge.	Yes
UnitCharge	The unit charge of the procedure related to this charge.	No
Minutes	The minutes of the procedure related to this charge.	No
LineNote	The line note of the procedure related to this charge.	No
RefCode	The ref code of the procedure related to this charge.	No
TypeofService	The type of service code of the procedure related to this charge.	No

FIELD NAME	DESCRIPTION	REQUIRED
EncounterStatus	Available values: Draft = Not yet completed Approved = Reviewed and approved Rejected = Needs clarification or corrections Unpayable = Approved and unpayable Submitted = Approved and submitted	No
ExternalID	The unique identifier of the encounter in a third-party software system (used for integration purposes).	No
PrimaryClaimType	Available values: CMS1500 = Primary claim is a professional claim UB04 = Primary claim is an institutional claim	No
SecondaryClaimType	Available values: CMS1500 = Secondary claim is a professional claim UB04 = Secondary claim is an institutional claim	No
UB04	Fields related to institutional claims.	No
PrincipalDiagnosisCode	The principal diagnosis code related to this charge.	No
PrincipalProcedureCode	The principal procedure code related to this charge.	No
PrincipalProcedureDate	The principal procedure service date related to the charge.	No
AdmittingDiagnosisCode	The admitting diagnosis code for the patient at the time of admission and may differ from the principal diagnosis code.	No
AdmissionDate	The date the patient was admitted as an inpatient to the facility.	No
AdmissionCode	The admission code related to the type and priority of the inpatient admission to the facility.	No
Remarks	Additional information necessary for claim adjudication.	No
PointOfOriginCode	The point of origin code related to the source or method of the patient's referral for admission.	No
DischargeStatusCode	The discharge status code related to where the patient is being discharged or transferred to at the end of their facility stay such as an acute/post-acute care facility.	No
BillType	The submit reason for the claim.	No
HealthCodes	The health codes related to the charge.	No
HealthCodeType	Available values: - Condition - Occurrence - Other Diagnosis - Value	No
HealthCode	The code related to the health code type of Condition, Occurrence, or Value.	No
DiagnosisCode	The code related to the health code type of Other Diagnosis.	No
DateFrom	The start date related to the Occurrence health code type and code.	No
DateTo	The end date related to the Occurrence health code type and code.	No
Amount	The amount related to the Value health code type and code.	No

4.15.2 The Response

The following information will be returned with the response for this operation.

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
EncounterID	The unique identifier of the new encounter that was created.	Encounters > Find Encounter
EncounterExternalID	The unique identifier of the encounter in a third-party software system (used for integration purposes).	N/A
PracticeID	The unique identifier of the practice associated with this new encounter.	Settings > Company > Find Practice > Edit Practice
PracticeExternalID	The unique identifier of the practice in a third-party software system (used for integration purposes).	N/A
PracticeName	The name of the practice associated with this new encounter.	Settings > Practice Information
PatientID	The unique identifier of the patient related to this encounter.	Patients > Find Patient > Edit Patient
PatientExternalID	The unique identifier of the patient in a third-party software system (used for integration purposes).	N/A
PatientCaseID	The unique identifier of the patient case.	Patients > Find Patient > Edit Patient > Cases > Edit Case
PatientCaseExternalID	The unique identifier of the case in a third-party software system (used for integration purposes).	N/A
SchedulingProviderID	The unique identifier of the scheduling provider.	Settings > Providers > Edit Provider
SchedulingProviderExternalID	The unique identifier of the provider in a third-party software system (used for integration purposes).	N/A
RenderingProviderID	The unique identifier of the rendering provider.	Settings > Providers > Edit Provider
RenderingProviderExternalID	The unique identifier of the provider in a third-party software system (used for integration purposes).	N/A
SupervisingProviderID	The unique identifier of the supervising provider.	Settings > Providers > Edit Provider
SupervisingProviderExternalID	The unique identifier of the provider in a third-party software system (used for integration purposes).	N/A
ReferringProviderID	The unique identifier of the referring provider.	Settings > Other List > Find Referring Physicians > Edit Referring Physician
ReferringProviderExternalID	The unique identifier of the provider in a third-party software system (used for integration purposes).	N/A
ServiceLocationID	The unique identifier of the service location.	N/A
ServiceLines	The items in this section may be repeated for each service line.	Encounters > Find Encounter > Edit Encounter
ServiceLineID	The unique identifier of the service line.	N/A
EncounterProcedureExternalID	The unique identifier of the service line in a third-party software system (used for integration purposes).	N/A

4.16 Create Patient

This operation creates a new patient with the information included within the request.

4.16.1 The Request

The following information may be provided as parameters to the request for this operation.

FIELD NAME	DESCRIPTION	REQUIRED
CustomerKey	The customer key associated with your customer account with Tebra.	Yes
User	The username associated with the user account with authorized security permissions to the API.	Yes
Password	The password associated with the user account with authorized security permissions to the API.	Yes
Practice	To select a specific practice, caller would provide one of the sub-fields below.	Yes
PracticeID	The unique identifier associated with the practice related to this patient.	Yes
PracticeName	The name of the practice related to this patient.	Yes
PracticeExternalID	The unique identifier of the practice in a third-party software system (used for integration purposes).	No
PatientExternalID	The unique identifier of the patient in a third-party software system (used for integration purposes).	No
Prefix	The prefix of the patient.	No
FirstName	The first name of the patient.	Yes
MiddleName	The middle name of the patient.	No
LastName	The last name of the patient.	Yes
Suffix	The suffix of the patient.	No
SocialSecurityNumber	The social security number of the patient.	No
DateOfBirth	The date of birth of the patient (e.g., YYYY-MM-DD).	No
Gender	Available values: - Male - Female - Unknown	No
MedicalRecordNumber	The medical record number for the patient.	No
MaritalStatus	Available values: A = Annulled D = Divorced I = Interlocutory L = Legally Separated M = Married P = Polygamous S = Single/Never Married T = Domestic Partner W = Widowed	No

FIELD NAME	DESCRIPTION	REQUIRED
ReferralSource	The referral source of the patient.	No
AddressLine1	The first address line of the patient.	No
AddressLine2	The second address line of the patient.	No
City	The city of the patient.	No
State	The state of the patient.	No
Country	The country of the patient (if different than the U.S.).	No
ZipCode	The zip code of the patient.	No
HomePhone	The home phone number of the patient.	No
HomePhoneExt	The home phone number extension of the patient.	No
WorkPhone	The work phone number of the patient.	No
WorkPhoneExt	The work phone number extension of the patient.	No
MobilePhone	The mobile phone number of the patient.	No
MobilePhoneExt	The mobile phone number extension of the patient.	No
EmailAddress	The email address of the patient.	No
Note	An initial note on the patient record in the notes area.	No
CollectionCategoryName	The name of the collection category related to this patient.	No
Guarantor	Structure described below.	
DifferentThanPatient	True if guarantor is different than the patient.	No
RelationshipToGuarantor	The patient relationship to the guarantor.	No
GuarantorPrefix	The prefix of the guarantor if different than the patient.	No
GuarantorFirstName	The first name of the guarantor if different than the patient.	No
GuarantorMiddleName	The middle name of the guarantor if different than the patient.	No
GuarantorLastName	The last name of the guarantor if different than the patient.	No
GuarantorSuffix	The suffix of the guarantor if different than the patient.	No
AddressLine1	The first address line of the guarantor.	No
AddressLine2	The second address line of the guarantor.	No
City	The city of the guarantor.	No
State	The state of the guarantor.	No
Country	The country of the guarantor (if different than the U.S.).	No
ZipCode	The zip code of the guarantor.	No
Employer	If employer ID matches an existing employer, then update the information. Otherwise, add a new employer.	No
EmploymentStatus	The employment status of the patient.	No
EmployerID	The unique identifier of the employer related to this patient.	No
EmployerName	The name of the employer related to this patient.	No
AddressLine1	The first address line of the employer.	No
AddressLine2	The second address line of the employer.	No
City	The city of the employer.	No
State	The state of the employer.	No
Country	The country of the employer (if different than the U.S.).	No
ZipCode	The zip code of the employer.	No

FIELD NAME	DESCRIPTION	REQUIRED
DefaultRenderingProvider	To select a specific provider, caller would provide one of the sub-fields below.	No
ProviderID	The unique identifier of the default rendering provider related to this patient.	No
ExternalID	The unique identifier of the provider in a third-party software system (used for integration purposes).	No
FullName	The name of the default rendering provider related to this patient.	No
PrimaryCarePhysician	To select a specific provider, caller would provide one of the sub-fields below.	No
ProviderID	The unique identifier of the primary care physician related to this patient.	No
ExternalID	The unique identifier of the provider in a third-party software system (used for integration purposes).	No
FullName	The name of the primary care physician related to this patient.	No
ReferringProvider	To select a specific provider, caller would provide one of the sub-fields below.	No
ProviderID	The unique identifier of the referring provider related to this patient.	No
ExternalID	The unique identifier of the provider in a third-party software system (used for integration purposes).	No
FullName	The name of the referring provider related to this patient.	No
DefaultServiceLocation	To select an existing default service location, caller would provide either the ID or name. Otherwise, a new service location is created with the information in the sub-fields below.	No
LocationID	The unique identifier of the default service location related to this patient.	No
LocationName	The name of the default service location related to this patient.	No
AddressLine1	The first address line of the default service location related to this patient.	No
AddressLine2	The second address line of the default service location related to this patient.	No
City	The city of the default service location related to this patient.	No
State	The state of the default service location related to this patient.	No
Country	The country of the default service location related to this patient.	No
ZipCode	The zip code of the default service location related to this patient.	No
BillingName	The billing name of the default service location related to this patient.	No
Phone	The phone number of the default service location related to this patient.	No
PhoneExt	The phone number extension of the default service location related to this patient.	No
FaxPhone	The fax number of the default service location related to this patient.	No
FaxPhoneExt	The fax number extension of the default service location related to this patient.	No
NPI	The national provider identifier for the service location.	No
FacilityIDType	The Facility ID Type for the service location.	No
FacilityID	The unique identifier of the facility.	No

FIELD NAME	DESCRIPTION	REQUIRED
CLIANumber	The CLIA number of the facility.	No
POS	The place of service (POS) code of the facility.	No
Cases	Multiple cases may be specified.	No
Case	To add a case to a new patient, the caller would provide one or more of the sub- fields below and/or one or more of the sub-fields in each of the insurance policy section. Otherwise, no case is created.	No
ExternalID	The unique identifier of the case in a third-party software system (used for integration purposes).	No
Name	The name of the case related to this patient.	No
Description	The description of the case related to this patient.	No
ReferringProviderID	The unique identifier of the referring provider associated with the case related to this patient.	No
ReferringProviderFullName	The name of the referring provider associated with the case related to this patient.	No
SendPatientStatements	If patient statements should be sent for charges under the case related to this patient, then true. Otherwise, false.	No
PayerScenario	The payer scenario of the case related to this patient.	No
Condition	The conditions under by the policy.	No
RelatedToAutoAccident	If the case for this patient is related to an auto-accident, then true. Otherwise, false.	No
RelatedToAutoAccidentState	The state of the auto accident for the case related to this patient.	No
RelatedToEmployment	If the case for this patient is related to employment, then true. Otherwise, false.	No
RelatedToPregnancy	If the case for this patient is related to pregnancy, then true. Otherwise, false.	No
RelatedToAbuse	If the case for this patient is related to abuse then true. Otherwise, false.	No
RelatedToOther	If the case for this patient is related to other, then true. Otherwise, false.	No
RelatedToEPSDT	If the case for this patient is related to EPSDT, then true. Otherwise, false.	No
RelatedToFamilyPlanning	If the case for this patient is related to family planning, then true. Otherwise, false.	No
RelatedToEmergency	If the case for this patient is related to an emergency, then true. Otherwise, false.	No
Dates	The dates related to the condition.	No
InjuryStartDate	The start date of the injury of the case related to this patient (e.g., YYYY-MM-DD).	No
InjuryEndDate	The end date of the injury of the case related to this patient (e.g., YYYY-MM-DD).	No
SameorSimilarIllnessStartDate	The start date of the same or similar illness of the case related to this patient	No
SameorSimilarIllnessEndDate	The end date of the same or similar illness of the case related to this patient (e.g., YYYY-MM-DD).	No
DatesUnabletoWorkStartDate	The start date the patient was unable to work for the case related to this patient (e.g., YYYY-MM-DD).	No

FIELD NAME	DESCRIPTION	REQUIRED
DatesUnabletoWorkEndDate	The end date the patient was unable to work for the case related to this patient (e.g., YYYY-MM-DD).	No
DatesRelatedDisabilityStartDate	The start date of a disability for the case related to this patient (e.g., YYYY-MM-DD).	No
DatesRelatedDisabilityEndDate	The end date of a disability for the case related to this patient (e.g., YYYY-MM-DD).	No
RelatedHospitalizationStartDate	The start date of a hospitalization for the case related to this patient (e.g., YYYY-MM-DD).	No
RelatedHospitalizationEndDate	The end date of a hospitalization for the case related to this patient (e.g., YYYY-MM-DD).	No
LastMenstrualPeriodDate	The last menstrual period date of the case related to this patient (e.g., YYYY-MM-DD).	No
LastSeenDate	The date the patient was last seen for the case related to this patient (e.g., YYYY-MM-DD).	No
ReferralDate	The referral date for the case related to this patient (e.g., YYYY-MM-DD).	No
AcuteManifestationDate	The acute manifestation date of the case related to this patient (e.g., YYYY-MM-DD).	No
LastX-RayDate	The last x-ray date of the case related to this patient (e.g., YYYY-MM-DD).	No
AccidentDate	The accident date of the case related to this patient (e.g., YYYY-MM-DD).	No
Insurance Policies	Multiple insurance policies may be added to a case.	No
Insurance Policy	To select an existing insurance company or insurance plan, caller would provide either the ID or the name. Otherwise, a new insurance company and/or insurance plan is created with the information in the sub-fields below. If none of the fields are provided, no primary insurance policy is created.	No
CompanyID	The unique identifier of the insurance company associated with the primary insurance policy on the case for this patient.	No
CompanyName	The name of the insurance company associated with the primary insurance policy on the case for this patient.	No
PlanID	The unique identifier of the insurance plan associated with the primary insurance policy on the case for this patient.	No
PlanName	The name of the insurance plan associated with the primary insurance policy on the case for this patient.	No
ExternalID	The unique identifier of the insurance policy in a third-party software system (used for integration purposes).	No
AddressLine1	The first address line of the insurance plan associated with the primary insurance policy on the case for this patient.	No
AddressLine2	The second address line of the insurance plan associated with the primary insurance policy on the case for this patient.	No
City	The city of the insurance plan associated with the primary insurance policy on the case for this patient.	No
State	The state of the insurance plan associated with the primary insurance policy on the case for this patient.	No
Country	The country of the insurance plan associated with the primary insurance policy on the case for this patient.	No

FIELD NAME	DESCRIPTION	REQUIRED
ZipCode	The zip code of the insurance plan associated with the primary insurance policy on the case for this patient.	No
Adjuster	The adjuster of the policy.	No
Prefix	The prefix of the adjuster for the insurance plan associated with the primary insurance policy on the case for this patient.	No
FirstName	The first name of the adjuster for the insurance plan associated with the primary insurance policy on the case for this patient.	No
MiddleName	The middle name of the adjuster for the insurance plan associated with the primary insurance policy on the case for this patient.	No
LastName	The last name of the adjuster for the insurance plan associated with the primary insurance policy on the case for this patient.	No
Suffix	The suffix of the adjuster for the insurance plan associated with the primary insurance policy on the case for this patient.	No
PhoneNumber	The adjuster phone number with the insurance plan associated with the primary insurance policy on the case for this patient.	No
PhoneNumberExt	The adjuster phone number extension with the insurance plan associated with the primary insurance policy on the case for this patient.	No
FaxNumber	The adjuster fax number with the insurance plan associated with the primary insurance policy on the case for this patient.	No
FaxNumberExt	The adjuster fax number extension with the insurance plan associated with the primary insurance policy on the case for this patient.	No
PolicyNumber	The policy number associated with the primary insurance policy on the case for this patient.	No
PolicyGroupNumber	The group number associated with the primary insurance policy on the case for this patient.	No
Copay	The copay associated with the primary insurance policy on the case for this patient.	No
Deductible	The deductible associated with the primary insurance policy on the case for this patient.	No
EffectiveStartDate	The effective start date associated with the primary insurance policy on the case for this patient (e.g., YYYY-MM-DD).	No
EffectiveEndDate	The effective end date associated with the primary insurance policy on the case for this patient (e.g., YYYY-MM-DD).	No
Insured	The policy holder.	No
PatientRelationshipToInsured	The patient relationship to the insured associated with the primary insurance policy on the case for this patient.	No
Prefix	The prefix of the insured associated with the primary insurance policy on the case for this patient.	No
FirstName	The first name of the insured associated with the primary insurance policy on the case for this patient.	No
MiddleName	The middle name of the insured associated with the primary insurance policy on the case for this patient.	No
LastName	The last name of the insured associated with the primary insurance policy on the case for this patient.	No
Suffix	The suffix of the insured associated with the primary insurance policy on the case for this patient.	No

FIELD NAME	DESCRIPTION	REQUIRED
AddressLine1	The first address line of the insured associated with the primary insurance policy on the case for this patient.	No
AddressLine2	The second address line of the insured associated with the primary insurance policy on the case for this patient.	No
City	The city of the insured associated with the primary insurance policy on the case for this patient.	No
State	The state of the insured associated with the primary insurance policy on the case for this patient.	No
Country	The country of the insured associated with the primary insurance policy on the case for this patient.	No
ZipCode	The zip code of the insured associated with the primary insurance policy on the case for this patient.	No
IDNumber	The ID number of the insured associated with the primary insurance policy on the case for this patient.	No
SocialSecurityNumber	The social security number of the insured associated with the primary insurance policy on the case for this patient.	No
DateOfBirth	The date of birth of the insured associated with the primary insurance policy on the case for this patient (e.g., YYYY-MM-DD).	No
Gender	The gender of the insured associated with the primary insurance policy on the case for this patient.	No
PolicyThroughEmployer	True if the insurance policy is through the patient's employer.	No
Employer	The name of the employer related to the insurance policy.	No
Active	True is insurance policy is active, otherwise false.	No
Precedence	An integer value to set the precedence (e.g. primary=1, secondary=2, etc.).	No
PolicyNotes	The notes on the primary insurance policy on the case for this patient.	No
Authorizations	Multiple authorizations may be specified.	No
Authorization	The authorization number associated with the first authorization entered for this patient.	No
InsurancePlanID	The insurance plan ID associated with the first authorization entered for this patient.	No
InsurancePlanName	The insurance plan name associated with the first authorization entered for this patient.	No
Number	The authorization number associated with the first authorization entered for this patient. <i>Note: If Number is populated, NumberOfVisits must also be populated.</i>	No
NumberOfVisits	The number of visits authorized with the first authorization entered for this patient. <i>Note: If NumberOfVisits is populated, Number must also be populated.</i>	No
NumberOfVisitsUsed	The number of visits used for the first authorization entered for this patient.	No
ContactFullName	The insurance contact name associated with the first authorization entered for this patient.	No
ContactPhone	The insurance contact phone number associated with the first authorization entered for this patient.	No

FIELD NAME	DESCRIPTION	REQUIRED
ContactPhoneExt	The insurance contact phone number extension associated with the first authorization entered for this patient.	No
Notes	The authorization notes associated with the first authorization entered for this patient.	No
StartDate	The start date associated with the first authorization entered for this patient (e.g., YYYY-MM-DD).	No
EndDate	The end date associated with the first authorization entered for this patient (e.g., YYYY-MM-DD).	No
Alert	Structure described below.	No
Message	The alert message related to this patient.	No
ShowWhenDisplayingPatientDetails	True if the alert message related to this patient should show when displaying patient details. False otherwise.	No
ShowWhenSchedulingAppointments	True if the alert message related to this patient should show when scheduling appointments. False otherwise.	No
ShowWhenEnteringEncounters	True if the alert message related to this patient should show when entering encounters. False otherwise.	No
ShowWhenViewingClaimDetails	True if the alert message related to this patient should show when viewing claim details. False otherwise.	No
ShowWhenPostingPayments	True if the alert message related to this patient should show when posting payments. False otherwise.	No
ShowWhenPreparingPatientStatements	True if the alert message related to this patient should show when preparing patient statements. False otherwise.	No

4.16.2 The Response

The following information will be returned with the response for this operation.

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
PatientID	The unique identifier of the new patient that was created.	Patients > Find Patient > Edit Patient
PracticeID	The unique identifier of the practice associated with this new patient.	Settings > Company > Find Practice > Edit Practice
PracticeExternalID	The unique identifier of the practice in a third-party software system (used for integration purposes).	N/A
PracticeName	The name of the practice associated with this new patient.	Settings > Practice Information
EmployerID	The unique identifier of the employer.	N/A
DefaultServiceLocationID	The unique identifier of the default service location.	N/A
Cases	Section includes information about cases created.	Patients > Find Patient > Edit Patient > Cases
Case	Section may repeat if multiple cases were created.	Patients > Find Patient > Edit Patient > Cases

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
CaseID	The unique identifier of the case is returned.	Patients > Find Patient > Edit Patient > Cases > Edit Case
CaseExternalID	The unique identifier of the case in a third-party software system (used for integration purposes).	N/A
Insurance Policies	Section includes information about insurance policies created.	Patients > Find Patient > Edit Patient > Cases > Edit Case
InsurancePolicyCompanyID	The unique identifier of the insurance company related to the primary insurance policy.	Settings > Insurance > Insurance Companies > Edit Insurance Company
InsurancePolicyPlanID	The unique identifier of the insurance plan related to the primary insurance policy.	Settings > Insurance > Find Insurance Plan > Edit Insurance Plan
InsurancePolicyID	The unique identifier of the primary insurance policy.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
InsurancePolicyExternalID	The unique identifier of the insurance policy in a third-party software system (used for integration purposes).	N/A
Authorizations	Section includes information about authorizations created.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
Authorization	Section may repeat if multiple authorizations were created.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
AuthorizationID	The unique identifier of the authorizations created.	N/A
InsurancePolicyID	The unique identifier of the insurance policy related to the authorization.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy

4.17 Create Payments

This operation creates a new payment with the information included within the request.

4.17.1 The Request

The following information may be provided as parameters to the request for this operation.

FIELD NAME	DESCRIPTION	REQUIRED
CustomerKey	The customer key associated with your customer account with Tebra.	Yes
User	The username associated with the user account with authorized security permissions to the API.	Yes
Password	The password associated with the user account with authorized security permissions to the API.	Yes

FIELD NAME	DESCRIPTION	REQUIRED
Practice	To select a practice, caller would provide one of the sub- fields below.	No
PracticeID	The unique identifier associated with the practice related to this payment.	No
PracticeName	The name of the practice related to this payment.	No
Appointment	To select an appointment, caller would provide one of the sub-fields below.	No
AppointmentID	The unique identifier of the appointment.	No
Patient	To select a patient, caller would provide one or more of the sub-fields below.	Yes
PatientID	The unique identifier of the patient related to this payment.	No
Prefix	The prefix of the patient related to this payment.	No
FirstName	The first name of the patient related to this payment.	No
MiddleName	The middle name of the patient related to this payment.	No
LastName	The last name of the patient related to this payment.	No
Suffix	The suffix of the patient related to this payment.	No
Insurance	To select a case, caller would provide one of the sub-fields below.	Yes
CompanyPlanID	The unique identifier of the company plan related to this payment.	No
CompanyPlanName	The name of the company plan.	No
Payment	Used when a payment is collected with the encounter (copay for example).	No
AmountPaid	The amount paid.	Yes
PaymentMethod	Available values: - Cash - ElectronicFundsTransfer - Check - Other - CreditCard - Unknown	Yes
ReferenceNumber	The reference numbers.	Yes
BatchNumber	The batch number associated with this payment.	No
PostDate	The post date of the payment (e.g., YYYY-MM-DD).	No
PayerType	Available values: - Insurance - Other - Patient	Yes
Other	The payer name if the payer type is Other.	No
AdjudicationDate	The adjudication date of the payment (e.g., YYYY-MM-DD).	No

4.17.2 The Response

The following information will be returned with the response for this operation.

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
PaymentID	The unique identifier of the new payment that was created.	Encounters > Find Payments

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
PracticeID	The unique identifier of the practice associated with this new payment.	Settings > Company > Find Practice > Edit Practice
PracticeName	The name of the practice associated with this new payment.	Settings > Practice Information

4.18 Update Appointment

This operation updates an existing appointment with the information included within the request. This operation is only available with the 2.0 interface and above.

4.18.1 The Request

The following information may be provided as parameters to the request for this operation.

FIELD NAME	DESCRIPTION	REQUIRED
CustomerKey	The customer key associated with your customer account with Tebra.	Yes
User	The username associated with the user account with authorized security permissions to the API.	Yes
Password	The password associated with the user account with authorized security permissions to the API.	Yes
AppointmentID	The unique identifier of the appointment.	Yes
AppointmentStatus	Available values: <ul style="list-style-type: none"> - Unknown - Scheduled - ReminderSent - Confirmed - CheckedIn - Roomed - CheckedOut - NeedsReschedule - ReadyToBeSeen - NoShow - Cancelled - Rescheduled - Tentative 	Yes
ServiceLocationID	The unique identifier of the service location.	Yes
StartTime	The start time of the appointment in UTC time standard (e.g., 2020-01-24T22:00:00.000Z).	Yes
EndTime	The end time of the appointment in UTC time standard (e.g., 2020-01-24T22:30:00.000Z).	Yes
AppointmentReasonID	The unique identifier of the appointment reason.	Yes
ProviderID	The unique identifier of the provider.	No

FIELD NAME	DESCRIPTION	REQUIRED
ResourceID	The unique identifier of the resource.	Yes
PatientID	The unique identifier of the patient.	Yes
ResourceIDs	The list of resource unique identifiers.	No
Notes	The appointment notes.	No
AppointmentName	The name of the appointment.	Yes
MaxAttendees	Defines the maximum number of attendees.	Yes
IsGroupAppointment	Defines if the appointment is for a group.	No
InsurancePolicyAuthorizationID	The unique identifier of the insurance policy authorization.	No
PatientCaseID	The unique identifier of the patient case. <i>Note: This field is required if the existing PatientCaseID is to be maintained or updated to a different PatientCaseID.</i>	No
AppointmentMode	Available values: - InOffice - Telehealth	No

4.18.2 The Response

The following information will be returned with the response for this operation.

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
PracticeID	The unique identifier of the practice related to this appointment.	Settings > Company > Find Practice > Edit Practice
ServiceLocationID	The unique identifier of the service location related to this appointment.	N/A
AppointmentStatus	Available values: - Unknown - Scheduled - ReminderSent - Confirmed - CheckedIn - Roomed - CheckedOut - NeedsReschedule - ReadyToBeSeen - NoShow - Cancelled - Rescheduled - Tentative	Appointments > Find Appointment
StartTime	The start time of the appointment in UTC time standard (e.g., 2020-01-24T22:00:00.000Z).	Appointments > Find Appointment
EndTime	The end time of the appointment in UTC time standard (e.g., 2020-01-24T22:30:00.000Z).	Appointments > Find Appointment

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
IsRecurring	Defines if the appointment is recurring.	Appointments > Find Appointment > Appointment Details > Recurrence
OccurrenceID	The unique identifier of the occurrence.	Appointments > Find Appointment > Appointment Details
PatientSummary	Structure described below.	Patients > Find Patient > Edit Patient
AppointmentReasonID	The unique identifier of the appointment reason.	Appointments > Appointment Reasons > Edit Appointment Reason
RecurrenceRule	Structure described below.	Appointment > Recurrence
ProviderID	The unique identifier of the provider.	Settings > Find Provider > Edit Provider
ResourceID	The unique identifier of the resource.	N/A
Notes	The appointment notes.	Appointments > Find Appointment > Appointment Details
ResourceIDs	The list of resource unique identifiers.	N/A
AppointmentType	Available values: U = Unknown P = Patient O = Other	Appointments > Find Appointment > Appointment Details
WasCreatedOnline	Defines if the appointment is created online.	N/A
InsurancePolicyAuthorizationID	The unique identifier of the insurance policy authorization.	Appointments > Find Appointment > Appointment Details > Authorization...
PatientCaseID	The unique identifier of the patient case.	Appointments > Find Appointment > Appointment Details > Case...
AppointmentName	The name of the appointment.	Appointments > Find Appointment > Appointment Details
IsGroupAppointment	Defines if the appointment is for a group.	N/A
MaxAttendees	Defines the maximum number of attendees.	N/A
AttendeesCount	The number of attendees in the appointment.	N/A
PatientSummaries	List of patient summary structure defined below:	Patients > Find Patient > Edit Patient
ForRecare	Defines if the appointment is for recare.	N/A
PatientID	The unique identifier of the patient.	Patients > Find Patient > Edit Patient
PracticeID	The unique identifier of the practice.	Settings > Company > Find Practice > Edit Practice
GenderID	The unique identifier of the gender.	Patients > Find Patient > Edit Patient
DateOfBirth	The date of birth of the patient (e.g., YYYY-MM-DD).	Patients > Find Patient > Edit Patient

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
FirstName	The first name of the patient.	Patients > Find Patient > Edit Patient
MiddleName	The middle name of the patient.	Patients > Find Patient > Edit Patient
LastName	The last name of the patient.	Patients > Find Patient > Edit Patient
Email	The email address of the patient.	Patients > Find Patient > Edit Patient
HomePhone	The home phone number of the patient (e.g., (706) 223-3445).	Patients > Find Patient > Edit Patient
WorkPhone	The work phone number of the patient (e.g., (706) 223-3445).	Patients > Find Patient > Edit Patient
MobilePhone	The mobile phone number of the patient (e.g., (706) 223-3445).	Patients > Find Patient > Edit Patient
PreferredPhoneType	The preferred phone type of the patient (e.g., Mobile Phone).	N/A
WorkEmail	The work email address of the patient.	Patients > Find Patient > Edit Patient
OtherEmail	The other email address of the patient.	Patients > Find Patient > Edit Patient
PreferredEmailType	The preferred email type of the patient (e.g., Work Email).	N/A
Guid	GUID of the Patient Summary	N/A
RecurrenceRuleID	The unique identifier of the recurrence rule.	Appointments > Find Appointment > Appointment Details > Recurrence
AppointmentID	The unique identifier of the appointment.	Appointments > Find Appointment
StartDate	The start date and time of the appointment recurrence rule in UTC time standard.	Appointments > Find Appointment > Appointment Details > Recurrence
EndDate	The start date and time of the appointment recurrence rule in UTC time standard.	Appointments > Find Appointment > Appointment Details > Recurrence
NumOccurrences	The number of appointment occurrences.	Appointments > Find Appointment > Appointment Details > Recurrence
DayInterval	Day interval of the appointment recurrence rule (e.g., 8 - Each eight days).	Appointments > Find Appointment > Appointment Details > Recurrence
MonthInterval	Month interval of the appointment recurrence rule (e.g., 3 - Each three months).	Appointments > Find Appointment > Appointment Details > Recurrence
MonthOfYear	Month of the year of the appointment recurrence rule (e.g., 10 - Month of October).	Appointments > Find Appointment > Appointment Details > Recurrence

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
DayOfMonth	Day of the month of the appointment recurrence rule (e.g., 25 -Day 25 of the month).	Appointments > Find Appointment > Appointment Details > Recurrence
TypeOfDay	Available values: - Unknown - Weekday - Weekend	Appointments > Find Appointment > Appointment Details > Recurrence
DayOfWeekMonthlyOrdinal	Available values: - Unknown - First - Second - Third - Fourth - Last	Appointments > Find Appointment > Appointment Details > Recurrence
DayOfWeekMonthlyOrdinalFlags	Number that represents the weeks of month (e.g., 21 = 10101B - First, Third and Last Week)	Appointments > Find Appointment > Appointment Details > Recurrence
TypeOfDayMonthlyOrdinal	Available values: - Unknown - First - Second - Third - Fourth - Last	Appointments > Find Appointment > Appointment Details > Recurrence
TypeOfDayMonthlyOrdinalFlags	Number that represents the weeks of month: - If TypeOfDay is Weekday (e.g., 17 = 10001B - First and Last days of weekdays) - If TypeOfDay is Weekend (e.g., 3 = 00011B - First and Second days of weekend)	Appointments > Find Appointment > Appointment Details > Recurrence
DayOfWeek	List of day of the week. Available values: - Sunday - Monday - Tuesday - Wednesday - Thursday - Friday - Saturday	Appointments > Find Appointment > Appointment Details > Recurrence
DayOfWeekFlags	Number that represents the days of week (e.g., 35 = 0100011B - Monday, Tuesday and Saturday).	Appointments > Find Appointment > Appointment Details > Recurrence
NumberOfTimes	The number of times of to apply the recurrence rule (e.g., 5).	Appointments > Find Appointment > Appointment Details > Recurrence
AppointmentMode	Available values: - InOffice - Telehealth	Web Platform > Calendar > New Appointment > Appointment Mode

4.19 Update Encounter Status

This operation updates an encounter status with the information included within the request.

4.19.1 The Request

The following information may be provided as parameters to the request for this operation.

FIELD NAME	DESCRIPTION	REQUIRED
CustomerKey	The customer key associated with your customer account with Tebra.	Yes
User	The username associated with the user account with authorized security permissions to the API.	Yes
Password	The password associated with the user account with authorized security permissions to the API.	Yes
Practice	To select a practice, caller would provide one of the sub- fields below.	No
PracticeID	The unique identifier associated with the practice related to this payment.	No
PracticeName	The name of the practice related to this payment.	No
Encounter ID	The unique identifier associated to the encounter. <i>Note:</i> Only encounters with a status of Draft or Review can be updated via this API call.	Yes
Encounter Status	Available values: Draft = Not yet completed Review = Completed, ready for approval Approved = Reviewed and approved Rejected = Needs clarification or corrections	Yes

4.19.2 The Response

The following information will be returned with the response for this operation.

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
EncounterID	The unique identifier of the encounter.	Encounters > Find Encounter
EncounterExternalID	The unique identifier of the encounter in a third-party software system (used for integration purposes).	N/A
PracticeID	The unique identifier of the practice associated with this encounter.	Settings > Company > Find Practice > Edit Practice
PracticeExternalID	The unique identifier of the practice in a third-party software system (used for integration purposes).	N/A
PracticeName	The name of the practice associated with this encounter.	Settings > Practice Information
PatientID	The unique identifier of the patient related to this encounter.	Patients > Find Patient > Edit Patient

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
PatientExternalID	The unique identifier of the patient in a third-party software system (used for integration purposes).	N/A
PatientCaseID	The unique identifier of the patient case.	Patients > Find Patient > Edit Patient > Cases > Edit Case
PatientCaseExternalID	The unique identifier of the case in a third-party software system (used for integration purposes).	N/A
SchedulingProviderID	The unique identifier of the scheduling provider.	Settings > Providers > Edit Provider
SchedulingProviderExternalID	The unique identifier of the provider in a third-party software system (used for integration purposes).	N/A
RenderingProviderID	The unique identifier of the rendering provider.	Settings > Providers > Edit Provider
RenderingProviderExternalID	The unique identifier of the provider in a third-party software system (used for integration purposes).	N/A
SupervisingProviderID	The unique identifier of the supervising provider.	Settings > Providers > Edit Provider
SupervisingProviderExternalID	The unique identifier of the provider in a third-party software system (used for integration purposes).	N/A
ReferringProviderID	The unique identifier of the referring provider.	Settings > Other List > Find Referring Physicians > Edit Referring Physician
ReferringProviderExternalID	The unique identifier of the provider in a third-party software system (used for integration purposes).	N/A
ServiceLocationID	The unique identifier of the service location.	N/A
ServiceLines	The items in this section may be repeated for each service line.	Encounters > Find Encounter > Edit Encounter
ServiceLineID	The unique identifier of the service line.	N/A
EncounterProcedureExternalID	The unique identifier of the service line in a third-party software system (used for integration purposes).	N/A

4.20 Update Patient

This operation updates an existing patient with the information included within the request. This operation is only available with the 2.0 interface and above.

4.20.1 The Request

The following information may be provided as parameters to the request for this operation.

FIELD NAME	DESCRIPTION	REQUIRED
CustomerKey	The customer key associated with your customer account with Tebra.	Yes

FIELD NAME	DESCRIPTION	REQUIRED
User	The username associated with the user account with authorized security permissions to the API.	Yes
Password	The password associated with the user account with authorized security permissions to the API.	Yes
Practice	To select a specific practice, caller would provide one of the sub-fields below.	Yes
PracticeID	The unique identifier associated with the practice related to this patient.	Yes
PracticeName	The name of the practice related to this patient.	Yes
PracticeExternalID	The unique identifier of the practice in a third-party software system (used for integration purposes).	No
PatientID	The unique identifier of the patient.	No
PatientExternalID	The unique identifier of the patient in a third-party software system (used for integration purposes).	No
Prefix	The prefix of the patient.	No
FirstName	The first name of the patient.	Yes
MiddleName	The middle name of the patient.	No
LastName	The last name of the patient.	Yes
Suffix	The suffix of the patient.	No
SocialSecurityNumber	The social security number of the patient.	No
DateOfBirth	The date of birth of the patient (e.g., YYYY-MM-DD).	No
Gender	Available values: - Male - Female - Unknown	No
MedicalRecordNumber	The medical record number for the patient.	No
MaritalStatus	Available values: A = Annulled D = Divorced I = Interlocutory L = Legally Separated M = Married P = Polygamous S = Single/Never Married T = Domestic Partner W = Widowed	No
ReferralSource	The referral source of the patient.	No
AddressLine1	The first address line of the patient.	No
AddressLine2	The second address line of the patient.	No
City	The city of the patient.	No
State	The state of the patient.	No
Country	The country of the patient (if different than the U.S.).	No
ZipCode	The zip code of the patient.	No
HomePhone	The home phone number of the patient.	No
HomePhoneExt	The home phone number extension of the patient.	No
WorkPhone	The work phone number of the patient.	No

FIELD NAME	DESCRIPTION	REQUIRED
WorkPhoneExt	The work phone number extension of the patient.	No
MobilePhone	The mobile phone number of the patient.	No
MobilePhoneExt	The mobile phone number extension of the patient.	No
EmailAddress	The email address of the patient.	No
Note	An initial note on the patient record in the notes area.	No
CollectionCategoryName	The name of the collection category related to this patient.	No
Guarantor	Structure described below.	No
DifferentThanPatient	True if guarantor is different than the patient.	No
RelationshipToGuarantor	The patient relationship to the guarantor.	No
GuarantorPrefix	The prefix of the guarantor if different than the patient.	No
GuarantorFirstName	The first name of the guarantor if different than the patient.	No
GuarantorMiddleName	The middle name of the guarantor if different than the patient.	No
GuarantorLastName	The last name of the guarantor if different than the patient.	No
GuarantorSuffix	The suffix of the guarantor if different than the patient.	No
AddressLine1	The first address line of the guarantor.	No
AddressLine2	The second address line of the guarantor.	No
City	The city of the guarantor.	No
State	The state of the guarantor.	No
Country	The country of the guarantor (if different than the U.S.).	No
ZipCode	The zip code of the guarantor.	No
Employer	If employer ID matches an existing employer, then update the information. Otherwise, add a new employer.	No
EmploymentStatus	The employment status of the patient.	No
EmployerID	The unique identifier of the employer related to this patient.	No
EmployerName	The name of the employer related to this patient.	No
AddressLine1	The first address line of the employer.	No
AddressLine2	The second address line of the employer.	No
City	The city of the employer.	No
State	The state of the employer.	No
Country	The country of the employer (if different than the U.S.).	No
ZipCode	The zip code of the employer.	No
DefaultRenderingProvider	To select a specific provider, caller would provide one of the sub-fields below.	No
ProviderID	The unique identifier of the default rendering provider related to this patient.	No
ExternalID	The unique identifier of the provider in a third-party software system (used for integration purposes).	No
FullName	The name of the default rendering provider related to this patient.	No
PrimaryCarePhysician	To select a specific provider, caller would provide one of the sub-fields below.	No
ProviderID	The unique identifier of the primary care physician related to this patient.	No

FIELD NAME	DESCRIPTION	REQUIRED
ExternalID	The unique identifier of the provider in a third-party software system (used for integration purposes).	No
FullName	The name of the primary care physician related to this patient.	No
ReferringProvider	To select a specific provider, caller would provide one of the sub-fields below.	No
ProviderID	The unique identifier of the referring provider related to this patient.	No
ExternalID	The unique identifier of the provider in a third-party software system (used for integration purposes).	No
FullName	The name of the referring provider related to this patient.	No
DefaultServiceLocation	To select an existing default service location, caller would provide the ID of name. Otherwise, a new service location is created with the information in the sub-fields below.	No
LocationID	The unique identifier of the default service location related to this patient.	No
LocationName	The name of the default service location related to this patient.	No
AddressLine1	The first address line of the default service location related to this patient.	No
AddressLine2	The second address line of the default service location related to this patient.	No
City	The city of the default service location related to this patient.	No
State	The state of the default service location related to this patient.	No
Country	The country of the default service location related to this patient.	No
ZipCode	The zip code of the default service location related to this patient.	No
BillingName	The billing name of the default service location related to this patient.	No
Phone	The phone number of the default service location related to this patient.	No
PhoneExt	The phone number extension of the default service location related to this patient.	No
FaxPhone	The fax number of the default service location related to this patient.	No
FaxPhoneExt	The fax number extension of the default service location related to this patient.	No
NPI	The national provider identifier for the service location.	No
FacilityIDType	The Facility ID Type for the service location.	No
FacilityID	The unique identifier of the facility.	No
CLIANumber	The CLIA number of the facility.	No
POS	The place of service (POS) code of the facility.	No
Cases	Multiple cases may be specified.	No
Case	To add a case to a new patient, the caller would provide one or more of the sub- fields below and/or one or more of the sub-fields in each of the insurance policy	Case
ExternalID	The unique identifier of the case in a third- party software system (used for integration purposes).	No

FIELD NAME	DESCRIPTION	REQUIRED
Name	The name of the case related to this patient.	No
Description	The description of the case related to this patient.	No
ReferringProviderID	The unique identifier of the referring provider associated with the case related to this patient.	No
ReferringProviderFullName	The name of the referring provider associated with the case related to this patient.	No
SendPatientStatements	If patient statements should be sent for charges under the case related to this patient, then true. Otherwise, false.	No
PayerScenario	The payer scenario of the case related to this patient.	No
CaseCondition	Structure described below.	No
RelatedToAutoAccident	If the case for this patient is related to an auto-accident, then true. Otherwise, false.	No
RelatedToAutoAccidentState	The state of the auto accident for the case related to this patient.	No
RelatedToEmployment	If the case for this patient is related to employment, then true. Otherwise, false.	No
RelatedToPregnancy	If the case for this patient is related to pregnancy, then true. Otherwise, false.	No
RelatedToAbuse	If the case for this patient is related to abuse, then true. Otherwise, false.	No
RelatedToOther	If the case for this patient is related to other, then true. Otherwise, false.	No
RelatedToEPSDT	If the case for this patient is related to EPSDT, then true. Otherwise, false.	No
RelatedToFamilyPlanning	If the case for this patient is related to family planning, then true. Otherwise, false.	No
RelatedToEmergency	If the case for this patient is related to an emergency, then true. Otherwise, false.	No
CaseDates	Structure described below.	No
InjuryStartDate	The start date of the injury of the case related to this patient (e.g., YYYY-MM-DD).	No
InjuryEndDate	The end date of the injury of the case related to this patient (e.g., YYYY-MM-DD).	No
SameorSimilarIllnessStartDate	The start date of the same or similar illness of the case related to this patient (e.g., YYYY-MM-DD).	No
SameorSimilarIllnessEndDate	The end date of the same or similar illness of the case related to this patient (e.g., YYYY-MM-DD).	No
DatesUnabletoWorkStartDate	The start date the patient was unable to work for the case related to this patient (e.g., YYYY-MM-DD).	No
DatesUnabletoWorkEndDate	The end date the patient was unable to work for the case related to this patient (e.g., YYYY-MM-DD).	No
DatesRelatedDisabilityStartDate	The start date of a disability for the case related to this patient (e.g., YYYY-MM-DD).	No
DatesRelatedDisabilityEndDate	The end date of a disability for the case related to this patient (e.g., YYYY-MM-DD).	No
RelatedHospitalizationStartDate	The start date of a hospitalization for the case related to this patient (e.g., YYYY-MM-DD).	No

FIELD NAME	DESCRIPTION	REQUIRED
RelatedHospitalizationEndDate	The end date of a hospitalization for the case related to this patient (e.g., YYYY-MM-DD).	No
LastMenstrualPeriodDate	The last menstrual period date of the case related to this patient (e.g., YYYY-MM-DD).	No
LastSeenDate	The date the patient was last seen for the case related to this patient (e.g., YYYY-MM-DD).	
ReferralDate	The referral date for the case related to this patient (e.g., YYYY-MM-DD).	No
AcuteManifestationDate	The acute manifestation date of the case related to this patient (e.g., YYYY-MM-DD).	No
LastX-RayDate	The last x-ray date of the case related to this patient (e.g., YYYY-MM-DD).	No
AccidentDate	The accident date of the case related to this patient (e.g., YYYY-MM-DD).	No
Insurance Policies	Multiple insurance policies may be added to a case.	No
Insurance Policy	To select an existing insurance company or insurance plan, caller would provide either the ID or the name. Otherwise, a new insurance company and/or insurance plan is created with the information in the sub- fields below. If none of the fields are provided, no primary insurance policy is created.	No
CompanyID	The unique identifier of the insurance company associated with the primary insurance policy on the case for this patient.	No
CompanyName	The name of the insurance company associated with the primary insurance policy on the case for this patient.	No
PlanID	The unique identifier of the insurance plan associated with the primary insurance policy on the case for this patient.	No
PlanName	The name of the insurance plan associated with the primary insurance policy on the case for this patient.	No
ExternalID	The unique identifier of the insurance policy in a third-party software system (used for integration purposes).	No
AddressLine1	The first address line of the insurance plan associated with the primary insurance policy on the case for this patient.	No
AddressLine2	The second address line of the insurance plan associated with the primary insurance policy on the case for this patient.	No
City	The city of the insurance plan associated with the primary insurance policy on the case for this patient.	No
State	The state of the insurance plan associated with the primary insurance policy on the case for this patient.	No
Country	The country of the insurance plan associated with the primary insurance policy on the case for this patient.	No
ZipCode	The zip code of the insurance plan associated with the primary insurance policy on the case for this patient.	No
Adjuster	Structure described below.	No
Prefix	The prefix of the adjuster for the insurance plan associated with the primary insurance policy on the case for this patient.	No
FirstName	The first name of the adjuster for the insurance plan associated with the primary insurance policy on the case for this patient.	No

FIELD NAME	DESCRIPTION	REQUIRED
MiddleName	The middle name of the adjuster for the insurance plan associated with the primary insurance policy on the case for this patient.	No
LastName	The last name of the adjuster for the insurance plan associated with the primary insurance policy on the case for this patient.	No
Suffix	The suffix of the adjuster for the insurance plan associated with the primary insurance policy on the case for this patient.	No
PhoneNumber	The adjuster phone number with the insurance plan associated with the primary insurance policy on the case for this patient.	No
PhoneNumberExt	The adjuster phone number extension with the insurance plan associated with the primary insurance policy on the case for this patient.	No
FaxNumber	The adjuster fax number with the insurance plan associated with the primary insurance policy on the case for this patient.	No
FaxNumberExt	The adjuster fax number extension with the insurance plan associated with the primary insurance policy on the case for this patient.	No
PolicyNumber	The policy number associated with the primary insurance policy on the case for this patient.	No
PolicyGroupNumber	The group number associated with the primary insurance policy on the case for this patient.	No
Copay	The copay associated with the primary insurance policy on the case for this patient.	No
Deductible	The deductible associated with the primary insurance policy on the case for this patient.	No
EffectiveStartDate	The effective start date associated with the primary insurance policy on the case for this patient (e.g., YYYY-MM-DD).	No
EffectiveEndDate	The effective end date associated with the primary insurance policy on the case for this patient (e.g., YYYY-MM-DD).	No
Insured	Structure described below.	No
PatientRelationshipToInsured	The patient relationship to the insured associated with the primary insurance policy on the case for this patient.	No
Prefix	The prefix of the insured associated with the primary insurance policy on the case for this patient.	No
FirstName	The first name of the insured associated with the primary insurance policy on the case for this patient.	No
MiddleName	The middle name of the insured associated with the primary insurance policy on the case for this patient.	No
LastName	The last name of the insured associated with the primary insurance policy on the case for this patient.	No
Suffix	The suffix of the insured associated with the primary insurance policy on the case for this patient.	No
AddressLine1	The first address line of the insured associated with the primary insurance policy on the case for this patient.	No
AddressLine2	The second address line of the insured associated with the primary insurance policy on the case for this patient.	No
City	The city of the insured associated with the primary insurance policy on the case for this patient.	No

FIELD NAME	DESCRIPTION	REQUIRED
State	The state of the insured associated with the primary insurance policy on the case for this patient.	No
Country	The country of the insured associated with the primary insurance policy on the case for this patient.	No
ZipCode	The zip code of the insured associated with the primary insurance policy on the case for this patient.	No
IDNumber	The ID number of the insured associated with the primary insurance policy on the case for this patient.	No
SocialSecurityNumber	The social security number of the insured associated with the primary insurance policy on the case for this patient.	No
DateOfBirth	The date of birth of the insured associated with the primary insurance policy on the case for this patient (e.g., YYYY-MM-DD).	No
Gender	The gender of the insured associated with the primary insurance policy on the case for this patient.	No
PolicyThroughEmployer	True if the insurance policy is through the patient's employer.	No
Employer	The name of the employer related to the insurance policy.	No
Active	True is insurance policy is active, otherwise false.	No
Precedence	An integer value to set the precedence (e.g., primary=1, secondary=2, etc.).	No
PolicyNotes	The notes on the primary insurance policy on the case for this patient.	No
Authorizations	Multiple authorizations may be specified.	No
Authorization	The authorization number associated with the first authorization entered for this patient.	No
InsurancePlanID	The insurance plan ID associated with the first authorization entered for this patient.	No
InsurancePlanName	The insurance plan name associated with the first authorization entered for this patient.	No
Number	The authorization number associated with the first authorization entered for this patient.	No
NumberOfVisits	The number of visits authorized with the first authorization entered for this patient.	No
NumberOfVisitsUsed	The number of visits used for the first authorization entered for this patient.	No
ContactFullName	The insurance contact name associated with the first authorization entered for this patient.	No
ContactPhone	The insurance contact phone number associated with the first authorization entered for this patient.	No
ContactPhoneExt	The insurance contact phone number extension associated with the first authorization entered for this patient.	No
Notes	The authorization notes associated with the first authorization entered for this patient.	No
StartDate	The start date associated with the first authorization entered for this patient (e.g., YYYY-MM-DD).	No
EndDate	The end date associated with the first authorization entered for this patient (e.g., YYYY-MM-DD).	No
Alert	Structure described below.	No

FIELD NAME	DESCRIPTION	REQUIRED
Message	The alert message related to this patient.	No
ShowWhenDisplayingPatientDetails	True if the alert message related to this patient should show when displaying patient details. False otherwise.	No
ShowWhenSchedulingAppointments	True if the alert message related to this patient should show when scheduling appointments. False otherwise.	No
ShowWhenEnteringEncounters	True if the alert message related to this patient should show when entering encounters. False otherwise.	No
ShowWhenViewingClaimDetails	True if the alert message related to this patient should show when viewing claim details. False otherwise.	No
ShowWhenPostingPayments	True if the alert message related to this patient should show when posting payments. False otherwise.	No
ShowWhenPreparingPatientStatements	True if the alert message related to this patient should show when preparing patient statements. False otherwise.	No

4.20.2 The Response

The following information will be returned with the response for this operation.

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
PatientID	The unique identifier of the patient that was updated.	Patients > Find Patient > Edit Patient
PatientExternalID	The unique identifier of the patient in a third-party software system (used for integration purposes).	N/A
PracticeID	The unique identifier of the practice associated with this patient.	Settings > Company > Find Practice > Edit Practice
PracticeExternalID	The unique identifier of the practice in a third-party software system (used for integration purposes).	N/A
PracticeName	The name of the practice associated with this patient.	Settings > Practice Information
EmployerID	The unique identifier of the employer.	N/A
DefaultServiceLocationID	The unique identifier of the default service location.	N/A
Cases	Section includes information about cases updated.	Patients > Find Patient > Edit Patient > Cases
Case	Section may repeat if multiple cases were updated.	Patients > Find Patient > Edit Patient > Cases
CaseID	The unique identifier of the case is returned.	Patients > Find Patient > Edit Patient > Cases > Edit Case
CaseExternalID	The unique identifier of the case in a third-party software system (used for integration purposes).	N/A
Insurance Policies	Section includes information about insurance policies updated.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
InsurancePolicyCompanyID	The unique identifier of the insurance company related to the primary insurance policy.	Settings > Insurance > Insurance Companies > Edit Insurance Company
InsurancePolicyPlanID	The unique identifier of the insurance plan related to the primary insurance policy.	Settings > Insurance > Find Insurance Plan > Edit Insurance Plan
InsurancePolicyID	The unique identifier of the primary insurance policy.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy
InsurancePolicyExternalID	The unique identifier of the insurance policy in a third-party software system (used for integration purposes).	N/A
Authorizations	Section includes information about authorizations updated.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
Authorization	Section may repeat if multiple authorizations were updated.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Authorizations
AuthorizationID	The unique identifier of the authorization updated.	N/A
InsurancePolicyID	The unique identifier of the insurance policy related to the authorization.	Patients > Find Patient > Edit Patient > Cases > Edit Case > Insurance Policy

4.21 Delete Appointment

This operation deletes an existing appointment with the information included within the request. This operation is only available with the 2.0 interface and above.

4.21.1 The Request

The following information may be provided as parameters to the request for this operation.

FIELD NAME	DESCRIPTION	REQUIRED
CustomerKey	The customer key associated with your customer account with Tebra.	Yes
User	The username associated with the user account with authorized security permissions to the API.	Yes
Password	The password associated with the user account with authorized security permissions to the API.	Yes
AppointmentID	The unique identifier of the appointment.	Yes

4.21.2 The Response

The following information will be returned with the response for this operation.

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
Deleted	Returns true if appointment successfully deleted.	N/A
AppointmentID	The unique identifier of the appointment.	N/A

4.22 Delete Document

This operation deletes an existing document with the information included within the request.

4.22.1 The Request

The following information may be provided as parameters to the request for this operation.

FIELD NAME	DESCRIPTION	REQUIRED
DocumentID	The unique identifier for the document.	Yes

4.22.2 The Response

The following information will be returned with the response for this operation.

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
Deleted	Returns true if document successfully deleted.	N/A
DocumentID	The unique identifier of the document.	N/A

5. API Support

If you have technical questions about the Tebra Web Services API, [create a Customer Care case](#).

Tebra can only provide support with the API on the Tebra side. If you would like to include an example of your code, paste the request and response XMLs into the *Description* field of the form.

6. API Guide Changelog

The API Guide Changelog includes additions, deletions, corrections, and updates to operations outlined in the guide within the past year.

April 2025

On April 17, 2025, additions were made.

The following was added to Sections 4.13 Create Appointment, 4.13.1 The Request and 4.18 Update Appointment, 4.18.1 The Request.

FIELD NAME	DESCRIPTION	REQUIRED
AppointmentMode	Available values: - InOffice - Telehealth	No

The following was added to Sections 4.13 Create Appointment, 4.13.2 The Response and 4.18 Update Appointment, 4.18.2 The Response.

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
AppointmentMode	Available values: - InOffice - Telehealth	Web Platform > Calendar > New Appointment > Appointment Mode

On April 10, 2025, the following was updated under Section 4.15 Create Encounter, 4.15.1 The Request.

From:

FIELD NAME	DESCRIPTION	REQUIRED
Service Lines	The service lines on the encounter.	Yes

To:

FIELD NAME	DESCRIPTION	REQUIRED
Service Lines	The service lines on the encounter. <i>Note:</i> When there are multiple service lines, the service lines created on the encounter will preserve the order in which they are received.	Yes

February 2025

On February 28, 2025, updates and additions were made.

Updates

The following was updated under Section 4.3 Get Charges, 4.3.2 The Response.

From:

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
AllowedAmount	The allowed amount expected for this charge, based upon the insurance contract settings.	N/A
ExpectedAmount	The expected reimbursement amount expected for this charge, based upon the insurance contract settings.	N/A

To:

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
AllowedAmount	The allowed amount expected for this charge, based upon the active insurance contract settings.	Settings > Contracts and Fees > Contract Rates > Active Insurance Contract > Contract Rate
ExpectedAmount	The allowed amount expected for this charge, based upon the active insurance contract settings.	Settings > Contracts and Fees > Contract Rates > Active Insurance Contract > Contract Rate

Additions

The following sections were added:

- Sections [4.14 Create Document](#), [4.14.1 The Request](#), [4.14.2 The Response](#)
- Sections [4.22 Delete Document](#), [4.22.1 The Request](#), [4.22.2 The Response](#)

December 2024

On December 13, 2024, the following was added to Section 4.6 Get Patients, 4.6.1 The Request as a correction.

FIELD NAME	DESCRIPTION	REQUIRED
PracticeID	The unique identifier associated with the practice related to these patients.	Yes

November 2024

On November 26, 2024, the following was added to Section 4.2 Get Appointments, 4.2.2 The Response.

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
ServiceLocationID	The unique identifier for the location related to this appointment.	N/A
AppointmentDuration	The duration, in minutes, of the appointment.	N/A
AppointmentReasonID1	The unique identifier of the first reason entered for this appointment.	N/A
AppointmentReasonID2	The unique identifier of the second reason entered for this appointment.	N/A
AppointmentReasonID3	The unique identifier of the third reason entered for this appointment.	N/A
AppointmentReasonID4	The unique identifier of the fourth reason entered for this appointment.	N/A
AppointmentReasonID5	The unique identifier of the fifth reason entered for this appointment.	N/A
AppointmentReasonID6	The unique identifier of the sixth reason entered for this appointment.	N/A
AppointmentReasonID7	The unique identifier of the seventh reason entered for this appointment.	N/A
AppointmentReasonID8	The unique identifier of the eighth reason entered for this appointment.	N/A
AppointmentReasonID9	The unique identifier of the ninth reason entered for this appointment.	N/A
AppointmentReasonID10	The unique identifier of the tenth reason entered for this appointment.	N/A
ResourceID1	The unique identifier of the first provider or scheduling resource related to this appointment.	N/A
ResourceID2	The unique identifier of the second provider or scheduling resource related to this appointment.	N/A
ResourceID3	The unique identifier of the third provider or scheduling resource related to this appointment.	N/A
ResourceID4	The unique identifier of the fourth provider or scheduling resource related to this appointment.	N/A
ResourceID5	The unique identifier of the fifth provider or scheduling resource related to this appointment.	N/A
ResourceID6	The unique identifier of the sixth provider or scheduling resource related to this appointment.	N/A
ResourceID7	The unique identifier of the seventh provider or scheduling resource related to this appointment.	N/A
ResourceID7	The unique identifier of the seventh provider or scheduling resource related to this appointment.	N/A
ResourceID8	The unique identifier of the eighth provider or scheduling resource related to this appointment.	N/A
ResourceID9	The unique identifier of the ninth provider or scheduling resource related to this appointment.	N/A
ResourceID10	The unique identifier of the tenth provider or scheduling resource related to this appointment.	N/A
ResourceTypeID1	The unique identifier of the first resource type entered for this appointment. Values: 1 = Doctor 2 = Practice Resource	N/A

FIELD NAME	DESCRIPTION	WHERE TO FIND IN TEBRA
ResourceTypeID2	The unique identifier of the second resource type entered for this appointment. Values: 1 = Doctor 2 = Practice Resource	N/A
ResourceTypeID3	The unique identifier of the third resource type entered for this appointment. Values: 1 = Doctor 2 = Practice Resource	N/A
ResourceTypeID4	The unique identifier of the fourth resource type entered for this appointment. Values: 1 = Doctor 2 = Practice Resource	N/A
ResourceTypeID5	The unique identifier of the fifth resource type entered for this appointment. Values: 1 = Doctor 2 = Practice Resource	N/A
ResourceTypeID6	The unique identifier of the sixth resource type entered for this appointment. Values: 1 = Doctor 2 = Practice Resource	N/A
ResourceTypeID7	The unique identifier of the seventh resource type entered for this appointment. Values: 1 = Doctor 2 = Practice Resource	N/A
ResourceTypeID8	The unique identifier of the eighth resource type entered for this appointment. Values: 1 = Doctor 2 = Practice Resource	N/A
ResourceTypeID9	The unique identifier of the ninth resource type entered for this appointment. Values: 1 = Doctor 2 = Practice Resource	N/A
ResourceTypeID10	The unique identifier of the tenth resource type entered for this appointment. Values: 1 = Doctor 2 = Practice Resource	N/A

October 2024

On October 1, 2024, the following was added to Section 4.14 Create Encounter, 4.14.1 The Request.

FIELD NAME	DESCRIPTION	REQUIRED
PrimaryClaimType	Available values: CMS1500 = Primary claim is a professional claim UB04 = Primary claim is an institutional claim	No
SecondaryClaimType	Available values: CMS1500 = Secondary claim is a professional claim UB04 = Secondary claim is an institutional claim	No
UB04	Fields related to institutional claims.	No
PrincipalDiagnosisCode	The principal diagnosis code related to this charge.	No
PrincipalProcedureCode	The principal procedure code related to this charge.	No
PrincipalProcedureDate	The principal procedure service date related to the charge.	No
AdmittingDiagnosisCode	The admitting diagnosis code for the patient at the time of admission and may differ from the principal diagnosis code.	No
AdmissionDate	The date the patient was admitted as an inpatient to the facility.	No
AdmissionCode	The admission code related to the type and priority of the inpatient admission to the facility.	No
Remarks	Additional information necessary for claim adjudication.	No
PointOfOriginCode	The point of origin code related to the source or method of the patient's referral for admission.	No
DischargeStatusCode	The discharge status code related to where the patient is being discharged or transferred to at the end of their facility stay such as an acute/post-acute care facility.	No
BillType	The submit reason for the claim.	No
HealthCodes	The health codes related to the charge.	No
HealthCodeType	Available values: - Condition - Occurrence - Other Diagnosis - Value	No
HealthCode	The code related to the health code type of Condition, Occurrence, or Value.	No
DiagnosisCode	The code related to the health code type of Other Diagnosis.	No
DateFrom	The start date related to the Occurrence health code type and code.	No
DateTo	The end date related to the Occurrence health code type and code.	No
Amount	The amount related to the Value health code type and code.	No



The Digital Backbone for Practice Success

Tebra is the digital backbone built for both patient and provider well-being. From practice growth technology to clinical and financial software, our complete operating system is structured to modernize every step of the patient journey and support the connected practice of the future