

Customer Data Specification for Clinical (EHR) Data

This document provides guidance on formatting on preparing data files for Able. We look forward to getting you up and running with Able Health! Reach out to your implementation representative or support@ablehealth.com if you have any questions.

File Transfer

Files should be transferred to the Able Health's AWS S3 server using the credentials provided on your dashboard.

File Format

All files be in CSV format.

File Outline

The following files should be submitted. File names must match the indicated name unless otherwise approved by your implementation representative. If possible, **it is recommended to send all files and all fields within each file**. Discuss any omissions with your implementation representative, as omitting certain files or fields may limit the quality measures that can be calculated or features available in your dashboard.

File	Description	Allowed Code Types	Required?
patient.csv	Includes a list of patients.	N/A	Required
provider.csv	Includes a list of clinicians to be tracked in the dashboard.	N/A	Required
group.csv	Includes a list of groups to be tracked in the dashboard.	N/A	Required
allergy.csv	Includes all medication and immunization	CVX, RXNORM	Optional, depending on the measures selected

	allergies for each patient.		
clinical_activity.csv	Includes all performed and closed procedures, office visits, screenings, and assessments for each patient.	CPT, HCPCS, ICD9CM, ICD9PCS, ICD10PCS, LOINC, SNOMEDCT, UB	Required
diagnosis.csv	Includes all diagnoses for each patient, including billed ICD codes and problem list conditions.	ICD9CM, ICD10CM, SNOMEDCT	Optional, depending on the measures selected
laboratory_test.csv	Includes all performed laboratory tests for each patient.	LOINC	Optional, depending on the measures selected
medication.csv	Includes all medications for each patient, including orders (prescriptions) and medications on the medication list.	CVX, NDC, RXNORM	Optional, depending on the measures selected
appointment.csv	Includes past and scheduled appointments for all patients.	N/A	Optional, used for identifying patients with upcoming visits
patient_program.csv	For customers with multiple programs only: Represents an association between patients and programs they are eligible for.	N/A	Required for customers with multiple programs only. If not included, all patients will be in all programs.
provider_program.csv	For customers with multiple programs only: Represents an association between patients and programs they are participating in.	N/A	Optional, applicable to customers with multiple programs only. If not included, provider-program mappings may also be configured in the dashboard.

Patient

patient.csv includes a list of patients. The following fields (columns) should be included in this file:

Field	Description	Example	Required?
external_id	A unique identifier consistent between data transfers.	"214677061633A"	Required
first_name	Patient's first name.	"David"	Required
last_name	Patient's last name.	"Honeyman"	Required
name_suffix	A patient's name suffix.	"Sr."	Optional
date_of_birth	A patient's date of birth string in ISO 8601 format.	"1999-01-08"	Required
sex	A patient's sex represented as either "m", "f", or "" (empty string).	"f"	Required
phone_number	A patient's phone number with area code.	"619-747-2345"	Optional, used for generating patient call lists
group_id	The unique identifier from the group.csv file of the group the patient belongs to.	"12-3456789"	Required if the organization has more than one group
pcp_id	The unique identifier from the provider.csv file for the patient's primary care provider.	"401563A"	Required for HEDIS measures. Optional for MIPS measures
dual_eligible_status	Indicator of whether the patient is a dual-eligible beneficiary under Medicare and Medicaid, specified as full-benefit dual-eligible, partial-benefit	"FB" = full "PB" = partial Blank = none	Required for CMS-HCC risk scoring only

	dual-eligible, or not dual-eligible.		
institutional_status	Binary indicator of whether the patient is classified as institutionalized (residing in a facility).	1 = true 0 = false	Required for CMS-HCC risk scoring only
medicaid_status	Binary indicator of the patient's Medicaid status.	1 = true 0 = false	Required for CMS-HCC risk scoring only
disabled_status	Binary indicator of the patient's originally disabled status (applies to aged patients 65 and older).	1 = true 0 = false	Required for CMS-HCC risk scoring only
special_risk_category	Indicator of whether the patient is eligible for a special risk category, such as new enrollee or new enrollee in a chronic condition special needs plan (C-SNP).	"new_enrollee" = new enrollee "new_enrollee_csnp" = new enrollee in a chronic condition special needs plan (C-SNP) Blank = none	Required for CMS-HCC risk scoring only

Provider

provider.csv includes a list of clinicians. The following fields (columns) should be included in this file:

Field	Description	Example	Required?
external_id	A unique and identifier consistent between data transfers.	"401563A"	Required
first_name	Provider's first name.	"Mary"	Required
last_name	Provider's last name.	"Walker"	Required
group_id	The unique Identifier from the group.csv file	"12-3456789"	Required if the organization has more than one group

	of the group the provider belongs to.		
npi	A provider's National Provider Identifier. The NPI is a 10-digit number consisting of 9 digits (with the first digit being a 1 or a 2) followed by a check digit.	"1234567893"	Optional, used to populate MIPS submission form
primary_specialty	Provider's primary clinical specialty.	"Endocrinology"	Optional, used to sort and filter providers
credential	Provider's credential type, e.g. MD.	"MD"	Optional, used to identify and sort providers

Group

group.csv includes a list of groups. The following fields (columns) should be included in this file:

Field	Description	Example	Required?
external_id	A unique and identifier consistent between data transfers.	"401563A"	Required
name	The name of the group.	"Lakeside Medical Group"	Required
tin	A tax ID number (TIN) identifies the group for billing.	"12-3456789"	Optional, used to populate MIPS submission form
primary_specialty	The group's primary clinical specialty.	"Endocrinology"	Optional, used to sort and filter groups
location	The location of the group. Can be used for any geographical designation that is meaningful to your organization.	"Pleasantville"	Optional, used to sort and filter groups

Allergy

allergy.csv includes a list of medication and immunization allergies for each patient. The following code types are allowed in this file:

- CVX
- RXNORM

The following fields (columns) should be included in this file:

Field	Description	Example	Required?
patient_id	Unique identifier for the patient with this allergy.	"214677061633A"	Required
code_type	Code type of the allergy (see allowed code types above).	"RXNORM"	Required
code_value	Code value of the allergy.	"798271"	Required
start_datetime	The start of the allergy prevalence period. Use UTC datetimes in ISO8601 datetime format.	"2017-07- 25T10:30:00- 07:00"	Required
stop_datetime	The end of the allergy prevalence period. Use UTC datetimes in ISO8601 datetime format.	"2017-07- 25T10:30:00- 07:00"	Required if the allergy has ended, optional for allergies that are still active

Clinical Activity

clinical_activity.csv includes a list of procedures, office visits, screenings, and assessments. The following code types are allowed in this file:

- CPT
- HCPCS
- ICD9PCS
- ICD10PCS
- LOINC
- SNOMEDCT
- UB

Field	Description	Example	Required?
patient_id	Unique identifier of the patient receiving the clinical activity.	"214677061633A"	Required
provider_id	Unique identifier of the signing provider of the clinical activity.	"401563A"	Optional
code_type	Code type of the clinical activity (see Allowable Code Types column).	"CPT"	Required
code_value	Code value of the clinical activity. Include modifiers with hyphens (e.g. 3017F-8P)	"81003-QW"	Required
result	The result of the clinical activity, for use with assessments. Must be quoted if free text entry is possible.	"9.0"	Optional, used for records with a result value (e.g. vitals)
place_of_service	The CMS place of service code: www.cms.gov/Medicare/Coding/place- of-service- codes/Place_of_Service_Code_Set.html	"15"	Optional
start_datetime	For datetime the clinical activity began. Use UTC datetimes in ISO8601 datetime format.	"2017-07- 25T10:30:00- 07:00"	Required
stop_datetime	For datetime the clinical activity ended. If only one timestamp is available, use the same datetime for both start_datetime and stop_datetime. A blank entry will indicate that the clinical activity is still ongoing. Use UTC datetimes in ISO8601 datetime format.	"2017-07- 25T10:30:00- 07:00"	Required if the clinical activity has ended, optional for clinical activities that are still ongoing

Diagnosis

diagnosis.csv includes all diagnoses. The following code types are allowed in this file:

- ICD9CM
- ICD10CM
- SNOMEDCT

The following fields (columns) should be included in this file:

Field	Description	Example	Required?
patient_id	Unique identifier of patient with this diagnosis.	"214677061633A"	Required
provider_id	Unique identifier of provider who gave the diagnosis.	"401563A"	Optional
code_type	Code type of the diagnosis (see allowed code types above).	"ICD9CM"	Required
code_value	Code value of the diagnosis.	"V72.31"	Required
start_datetime	For problem list diagnoses, use the onset date. For billed diagnoses, use the date of service. Use UTC datetimes in ISO8601 datetime format.	"2017-07- 25T10:30:00- 07:00"	Required
stop_datetime	For problem list diagnoses, use the resolved date. For billed diagnoses, use the date of service. Use UTC datetimes in ISO8601 datetime format.	"2017-07- 25T10:30:00- 07:00"	Required for diagnoses that have been resolved or billed point-in-time, optional for diagnoses that are still active

Laboratory Test

laboratory_test.csv includes all performed laboratory tests. The following code types are allowed in this file:

• LOINC

Field	Description	Example	Required?	

patient_id	Unique identifier of the patient receiving the laboratory test.	"214677061633A"	Required
code_type	Coding ontology used, (see allowed code types above).	"LOINC"	Required
code_value	Code values must be valid per the coding type, e.g. "99201" is a valid code value under CPT.	"17856"	Required
result	The result of the test. Must be quoted if free text entry is possible.	"9.0"	Required
start_datetime	For datetime of the laboratory result. Use UTC datetimes in ISO8601 datetime format.	"2017-07- 25T10:30:00- 07:00"	Required

Medication

medication.csv includes all medications. The following code types are allowed in this file:

- CVX
- NDC
- RXNORM

Field	Description	Example	Required?
patient_id	Unique identifier of the patient for whom a medication is prescribed or active.	"214677061633A"	Required
provider_id	Unique identifier of the provider who prescribed the medication.	"401563A"	Required

code_type	Code type of the medication (see Allowable Code Types column).	"CVX"	Required
code_value	Code value of the medication.	"118"	Required
start_datetime	For medication list records, use the datetime of medication initiation. For prescriptions (orders), use the order date. Use UTC datetimes in ISO8601 datetime format.	"2017-07- 25T10:30:00- 07:00"	Required
stop_datetime	For medication list diagnoses, use the discontinued date. For prescriptions (orders), use the order date. Use UTC datetimes in ISO8601 datetime format.	"2017-07- 25T10:30:00- 07:00"	Required for medications that have ended or were ordered point-in-time, optional for medications that are still active
prescribed	A binary indication of whether the medication was prescribed by the provider listed. A blank entry will be interpreted as "false."	"1"	Required if ordered by the practice, can leave blank if not ordered by the practice
dispensed	A binary indication of whether the medication was dispensed. A blank entry will be interpreted as "false."	"1"	Optional
dose	The amount of medication given at one administration event. Includes unit of measure. Must be	"100 mL"	Optional

	quoted if free text entry is possible.		
frequency	The speed with which the medication was or will be introduced into the patient. Must be quoted if free text entry is possible.	"110 mL/day"	Optional
days_supplied	The number of days' worth of the medication prescribed for the patient. Must be quoted if free text entry is possible.	"60"	Optional
quantity	The amount of medication that is to be dispensed. Includes unit of measure. Must be quoted if free text entry is possible.	"5000 mL"	Optional
route	The method of consumption. Must be quoted if free text entry is possible.	"oral"	Optional

Appointment

appointment.csv includes all scheduled and past appointments. This file is optional for all customers. The data will be used to identify patients with visits over particular date ranges and display past and future visits on patient gap lists.

Field	Description	Example	Required?
patient_id	Unique identifier of the patient for whom a visit is scheduled	"214677061633A"	Required
provider_id	Unique identifier of the provider who will perform the visit	"401563A"	Optional

type	Visit type of the encounter (e.g., New Patient, Follow-up, Mammogram).	"New Patient"	Optional
status	Status of visit (e.g., scheduled, closed, noshow).	"scheduled"	Optional
start_datetime	The start date and time of the visit.	"2017-07- 25T10:30:00- 07:00"	Required
stop_datetime	The end date and time of the visit.	"2017-07- 25T10:30:00- 07:00"	Optional

Patient-Program Association

patient_program.csv includes associations between patients and programs they are eligible for. This file is only applicable to customers participating in multiple programs.

The following fields (columns) should be included in this file:

Field	Description	Example	Required?
patient_id	Unique identifier of the patient	"214677061633A"	Required
program_id	Any identifier associated with the program. You may work with your implementation representative to select identifiers.	"MIPS"	Required

Provider-Program Association

provider_program.csv includes associations between providers and the programs they are participating in. This file is only applicable to customers participating in multiple programs.

Field	Description	Example	Required?
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provider_id	Unique identifier of the provider.	"401563A"	Required
program_id	Any identifier associated with the program. You may work with your implementation representative to select identifiers.	"MIPS"	Required