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## **1. Add Insurance API**

Request URL : [https://ehr.charmtracker.com/api/ehr/v1/patients/{patient\\_id}/insurance](https://ehr.charmtracker.com/api/ehr/v1/patients/{patient_id}/insurance)

Method : POST

### **Details:**

This API is used to add Insurance details for a patient. Success response contains the 'insurance\_id', which is a unique reference ID assigned to this insurance.

Parameter Name	Is Mandatory	Type [Max Length]	Format / Allowed Values	Description
patient_id	Yes	Number [19]		Unique patient reference ID assigned by ChARM
insurance_type	Yes	String	Allowed Insurance Type(s): MEDICARE, MEDICAID, TRICARE CHAMPUS, CHAMPVA, GROUP HEALTH PLAN, FECA BLK LUNG,OTHER	Specified value will be shown in Box #1 in CMS1500 Form of Claim
insurance_plan_name		String [150]		Plan Name of the Insurance. Shown in Box #11c in CMS1500 Form of Claim

insurance_plan_id	Yes	String [30]		Insurance Member ID  Specified value will be shown in Box #1a in CMS1500 Form
policy_group_number		String [30]		Specified value will be shown in Box #11 in CMS1500 Form
insurance_category		String	Allowed values : PRIMARY, SECONDARY, TERTIARY, AUTO, WORKERCOMP, OTHER	Default value - PRIMARY
practice_payer_id	Yes / No (See Notes-2)	Number [19]		Unique identifier of the Payer. Specify it if Payer is already available in ChARM
payer_name	Yes / No (See Notes-2)	String [150]		
payer_id		String [50]		
eligibility_payer_id		String [50]		Specify only if it is different from 'Claim Submission Payer ID' i.e. payer_id
payer_address_line_1		String [35]		
payer_city		String [35]		
payer_state		String [50]	Example: Alabama, California, Florida	
payer_country		String [2]	Example: us	Default value - us

				Refers to Country Code
payer_zip_code		Number [5]		ZIP Code
payer_post_box		Number [4]		Post Box Number
payer_phone		Number [15]		Phone Number of Payer
payer_fax		Number [15]		Fax Number of Payer
copay		Number [10]		
deductible		Number [10]		
coinsurance		String [16]		
additional_pr_details		String [50]		Additional details about Patient Responsibility
valid_from		String	Date Format : yyyy-MM-dd	Date since Insurance is valid.
valid_to		String	Date Format : yyyy-MM-dd	Date till Insurance is valid.
employer_name		String [150]		
prior_authorization_details		JSON Array		<p>A json-array of json-object; each object would have the parameters such as</p> <p>'prior_authorization_number',  'prior_authorization_type',  'prior_authorization_valid_from',  'prior_authorization_valid_until',  'additional_information'</p> <p>* See Notes-1 for more info</p>
insured_person_relationship	Yes	String	Allowed values : Self, Spouse, Child, Other	<p>Relationship of Insured Person</p> <p>Specified value will be shown in Box #6 in CMS1500 Form</p>

insured_person_first_name	Yes	String [35]		Specified value will be shown in Box #4 in CMS1500 Form
insured_person_last_name	Yes	String [35]		Specified value will be shown in Box #4 in CMS1500 Form
insured_person_dob	Yes	String	Date Format : yyyy-MM-dd	Date of birth of Insured Person  Specified value will be shown in Box #11a in CMS1500 Form
insured_person_gender		String	Allowed values : male, female, unknown	
insured_person_ssn		Number [9]		Social Security Number of Insured Person
insured_person_address_line_1		String [35]		Specified value will be shown in Box #7 in CMS1500 Form
insured_person_address_line_2		String [35]		
insured_person_city		String [35]		Specified value will be shown in Box #7 in CMS1500 Form
insured_person_state		String [50]	Example: Alabama, California, Florida	Specified value will be shown in Box #7 in CMS1500 Form
insured_person_country		String [2]	Example: us, ca	Default value - us Refers to Country Code
insured_person_zipcode		Number [5]		Zip Code  Specified value will be shown in Box #7 in CMS1500 Form
insured_person_home_phone		Number [10]		Insured person's phone number

insured_person_mobile_phone		Number [10]		Insured person's mobile number
comments		String [250]		
release_medical_info		String	Allowed values : yes, no	<p>Default value - yes</p> <p>Specify whether patient provided consent to release medical information to the payer. Required for claim processing.</p> <p>Specified value will be shown in Box #12 in CMS1500 Form</p>
date_of_signature		String	Date Format : yyyy-MM-dd	<p>Date on which the above consent provided. Required for claim processing.</p> <p>Specified value will be shown in Date field of Box #12</p> <p>Default value - patient registered date</p>
assign_medical_benefits		String	Allowed values : yes, no	<p>Default value - yes</p> <p>Specify whether insured or authorized person signed to authorize, to pay the medical benefits to the service provider. Required for claim processing.</p>

				Specified value will be shown in Box #13 in CMS1500 Form
--	--	--	--	--

**Notes-1:**

Parameters	Is Mandatory	Type	Format / Allowed Values	Description
prior_authorization_number		String [50]		Specified value will be shown in Box #23 in CMS1500 Form
prior_authorization_type		String	Allowed Values: G1, EW, 9F, X4	1) G1 - Prior Authorization Number 2) EW - Mammography Certification Number 3) 9F - Referral Number 4) X4 - CLIA Number
prior_authorization_valid_from		String	Date Format : yyyy-MM-dd	
prior_authorization_valid_until		String	Date Format : yyyy-MM-dd	
additional_information		String [50]		

### **Sample Input Request-1**

```
{
  "insurance_type" : "MEDICARE",
  "insurance_plan_name" : "MEDICARE",
  "insurance_plan_id" : "123456789",
  "policy_group_number" : "97867",
  "insurance_category" : "PRIMARY",
  "payer_name" : "Anthem Health and Life Insurance Company of New Jersey",
  "payer_id" : "80705",
  "eligibility_payer_id" : "10319",
  "payer_address_line_1" : "A1/3 Down Lane",
  "payer_city" : "BASCOM",
  "payer_country" : "us",
  "payer_state" : "Florida",
  "payer_zip_code" : "32423",
  "payer_post_box" : "5354",
  "payer_phone" : "9737583920",
  "payer_fax" : "9346274568",
  "copay" : "100",
  "deductible" : "50",
  "coinsurance" : "20",
  "additional_pr_details" : "Patient responsibility - 100",
  "valid_from" : "2012-03-16",
  "valid_to" : "2019-03-15",
  "employer_name" : "ABC Solutions",
  "prior_authorization_details" : [
    {
      "prior_authorization_number" : "76488875",
```



```
    "prior_authorization_type" : "G1",
    "prior_authorization_valid_from" : "2017-04-19",
    "prior_authorization_valid_until" : "2017-04-22",
    "additional_information" : "This is first prior authorization info"
  },
  {
    "prior_authorization_number" : "545324",
    "prior_authorization_type" : "9F",
    "prior_authorization_valid_from" : "2017-04-19",
    "prior_authorization_valid_until" : "2017-04-22",
    "additional_information" : "This is second prior authorization info"
  }
],
"insured_person_relationship" : "Self",
"insured_person_first_name" : "John",
"insured_person_last_name" : "Smith",
"insured_person_dob" : "1981-05-21",
"insured_person_gender" : "male",
"insured_person_ssn" : "987654321",
"insured_person_address_line_1" : "S3 Lane No1",
"insured_person_address_line_2" : "Street Cross Road",
"insured_person_city" : "SPOKANE",
"insured_person_country" : "us",
"insured_person_state" : "Missouri",
"insured_person_zipcode" : "65754",
"insured_person_home_phone" : "9564678936",
"insured_person_mobile_phone" : "97243748299",
"comments" : "This is patient's primary medicare insurance.",
"release_medical_info" : "yes",
```

```
"date_of_signature" : "2017-01-21",  
"assign_medical_benefits" : "yes"  
}
```

### **Sample Input Request-2**

```
{  
  "insurance_type" : "MEDICARE",  
  "insurance_plan_name" : "MEDICARE",  
  "insurance_plan_id" : "123456789",  
  "policy_group_number" : "97867",  
  "insurance_category" : "PRIMARY",  
  "practice_payer_id" : "100001000000005648",  
  "copay" : "100",  
  "deductible" : "50",  
  "coinsurance" : "20",  
  "additional_pr_details" : "Patient responsibility - 100",  
  "valid_from" : "2012-03-16",  
  "valid_to" : "2019-03-15",  
  "employer_name" : "ABC Solutions",  
  "prior_authorization_details" : [  
    {  
      "prior_authorization_number" : "76488875",  
      "prior_authorization_type" : "G1",  
      "prior_authorization_valid_from" : "2017-04-19",  
      "prior_authorization_valid_until" : "2017-04-22",  
      "additional_information" : "This is first prior authorization info"  
    },  
    {  
      "prior_authorization_number" : "545324",
```

```
        "prior_authorization_type" : "9F",
        "prior_authorization_valid_from" : "2017-04-19",
        "prior_authorization_valid_until" : "2017-04-22",
        "additional_information" : "This is second prior authorization info"
    }
],
    "insured_person_relationship" : "Self",
    "insured_person_first_name" : "John",
    "insured_person_last_name" : "Smith",
    "insured_person_dob" : "1981-05-21",
    "insured_person_gender" : "male",
    "insured_person_ssn" : "987654321",
    "insured_person_address_line_1" : "S3 Lane No1",
    "insured_person_address_line_2" : "Street Cross Road",
    "insured_person_city" : "SPOKANE",
    "insured_person_country" : "us",
    "insured_person_state" : "Missouri",
    "insured_person_zipcode" : "65754",
    "insured_person_home_phone" : "9564678936",
    "insured_person_mobile_phone" : "97243748299",
    "comments" : "This is patient's primary medicare insurance.",
    "release_medical_info" : "yes",
    "date_of_signature" : "2017-01-21",
    "assign_medical_benefits" : "yes"
}
```

**Sample Success Output Response:**

```
{
  "code": 0,
  "message": "Insurance added successfully.",
  "insurance": {
    "insurance_id" : "100000000000062107"
  }
}
```

**Sample Error Output Response:**

```
{
  "code": "5566",
  "message": "This insurance already exists for the patient.",
  "error_info": {
    "existing_insurance_id": "100001000000050009",
  }
}
```

**Notes-2:**

- Whether an insurance is already present or not is determined by the combination of the values of insurance\_type, insurance\_plan\_name, insurance\_plan\_id, payer\_name & payer\_id. If this combination is already available for the patient, error 5566 will be thrown.
- Specify practice\_payer\_id if payer is already available in ChARM. If practice\_payer\_id is specified, the parameters such as payer\_name, payer\_id, eligibility\_payer\_id, payer\_address\_line\_1, payer\_city, payer\_country, payer\_state, payer\_zip\_code, payer\_post\_box, payer\_phone and payer\_fax are not considered. If practice\_payer\_id is not specified, then payer\_name is mandatory.

**Error Codes:**

Code	Message	Explanation
5566	This insurance already exists for the patient.	This error is thrown when a user tries to add already existing insurance to the patient.
5558	Error occurred while adding insurance.	An internal error occurred while adding insurance details.
59028	New Payer is not allowed. Add payer data in Payer Settings	This error is thrown when the Payers settings do not allow adding of new payers. Add the new payer detail in Payers settings
59029	No matching payer details found for the 'practice_payer_id'.	This error is thrown if "practice_payer_id" is not matching with any payer details

## 2. Update Insurance API

Request URL : [https://ehr.charmtracker.com/api/ehr/v1/patients/{patient\\_id}/insurance/{insurance\\_id}](https://ehr.charmtracker.com/api/ehr/v1/patients/{patient_id}/insurance/{insurance_id})

Method : PUT

### Details:

This API is used to update the Patient's Insurance details. Unique identifiers of the patient (patient\_id) and insurance (insurance\_id) are required to update the insurance details.

### Sample Input Request-1:

```
{
  "insurance_type" : "MEDICARE",
  "insurance_plan_name" : "MEDICARE",
  "insurance_plan_id" : "123456789",
  "policy_group_number" : "97867",
  "insurance_category" : "PRIMARY",
  "payer_name" : "Anthem Health and Life Insurance Company of New Jersey",
  "payer_id" : "80705",
  "eligibility_payer_id" : "10319",
  "payer_address_line_1" : "A1/3 Down Lane",
  "payer_city" : "BASCOM",
  "payer_country" : "us",
  "payer_state" : "Florida",
  "payer_zip_code" : "32423",
  "payer_post_box" : "5354",
  "payer_phone" : "9737583920",
  "payer_fax" : "9346274568",
  "copay" : "150",
  "deductible" : "50",
```

```
"coinsurance" : "20",
"additional_pr_details" : "120",
"valid_from" : "2012-03-16",
"valid_to" : "2019-03-15",
"employer_name" : "ABC Solutions",
"prior_authorization_details" : [
  {
    "prior_authorization_number" : "76488875",
    "prior_authorization_type" : "G1",
    "prior_authorization_valid_from" : "2017-04-19",
    "prior_authorization_valid_until" : "2017-04-25",
    "additional_information" : "This is first prior authorization info"
  },
  {
    "prior_authorization_number" : "545324",
    "prior_authorization_type" : "9F",
    "prior_authorization_valid_from" : "2017-04-19",
    "prior_authorization_valid_until" : "2017-04-22",
    "additional_information" : "This is second prior authorization info"
  }
],
"insured_person_relationship" : "Self",
"insured_person_first_name" : "John",
"insured_person_last_name" : "Smith",
"insured_person_dob" : "1981-05-21",
"insured_person_gender" : "male",
"insured_person_ssn" : "987654321",
"insured_person_address_line_1" : "S4 Lane No1",
"insured_person_address_line_2" : "Street Cross Road",
```

```
"insured_person_city" : "SPOKANE",  
"insured_person_country" : "us",  
"insured_person_state" : "Missouri",  
"insured_person_zipcode" : "65754",  
"insured_person_home_phone" : "9564678936",  
"insured_person_mobile_phone" : "97243748299",  
"comments" : "This is patient's primary medicare insurance.",  
"release_medical_info" : "yes",  
"date_of_signature" : "2017-01-21",  
"assign_medical_benefits" : "yes"  
}
```

**Sample Input Request-2:**

```
{  
  "insurance_type" : "MEDICARE",  
  "insurance_plan_name" : "MEDICARE",  
  "insurance_plan_id" : "123456789",  
  "policy_group_number" : "97867",  
  "insurance_category" : "PRIMARY",  
  "practice_payer_id" : "100001000000005648",  
  "copay" : "150",  
  "deductible" : "50",  
  "coinsurance" : "20",  
  "additional_pr_details" : "120",  
  "valid_from" : "2012-03-16",  
  "valid_to" : "2019-03-15",  
  "employer_name" : "ABC Solutions",  
  "prior_authorization_details" : [  

```



```
{
  "prior_authorization_number" : "76488875",
  "prior_authorization_type" : "G1",
  "prior_authorization_valid_from" : "2017-04-19",
  "prior_authorization_valid_until" : "2017-04-25",
  "additional_information" : "This is first prior authorization info"
},
{
  "prior_authorization_number" : "545324",
  "prior_authorization_type" : "9F",
  "prior_authorization_valid_from" : "2017-04-19",
  "prior_authorization_valid_until" : "2017-04-22",
  "additional_information" : "This is second prior authorization info"
}
],
"insured_person_relationship" : "Self",
"insured_person_first_name" : "John",
"insured_person_last_name" : "Smith",
"insured_person_dob" : "1981-05-21",
"insured_person_gender" : "male",
"insured_person_ssn" : "987654321",
"insured_person_address_line_1" : "S4 Lane No1",
"insured_person_address_line_2" : "Street Cross Road",
"insured_person_city" : "SPOKANE",
"insured_person_country" : "us",
"insured_person_state" : "Missouri",
"insured_person_zipcode" : "65754",
"insured_person_home_phone" : "9564678936",
"insured_person_mobile_phone" : "97243748299",
```

```
"comments" : "This is patient's primary medicare insurance.",  
"release_medical_info" : "yes",  
"date_of_signature" : "2017-01-21",  
"assign_medical_benefits" : "yes"  
}
```

**Sample Output Response:**

```
{  
  "code": 0,  
  "message": "Insurance updated successfully."  
}
```

**Error Codes:**

Code	Message	Explanation
5559	Error occurred while adding insurance.	An internal error occurred while adding insurance details.

### 3. Delete Insurance API

Request URL : [https://ehr.charmtracker.com/api/ehr/v1/patients/{patient\\_id}/insurance/{insurance\\_id}](https://ehr.charmtracker.com/api/ehr/v1/patients/{patient_id}/insurance/{insurance_id})

Method : DELETE

#### **Details:**

This API deletes patient's insurance detail. Unique identifiers of the patient (patient\_id) and insurance (insurance\_id) must be submitted in the request.

#### **Sample Output Response:**

```
{
  "code": 0,
  "message": "Insurance deleted successfully."
}
```

#### 4. Payers List API

Request URL : <https://ehr.charmtracker.com/api/ehr/v1/payers>

Method : GET

##### Details:

This API is used to get insurance payers details. Specify the following parameters in request to filter the result

Request Parameter Name	Is Mandatory	Type [Max Length]	Format / Allowed Values	Description
search_string	Yes / No (See Notes-3)	String		Minimum 3 characters are required. Search string may contain values of payer name, payer id, payer phone, payer fax, payer address line, payer city, payer state, payer country, payer postal code
is_verified		Boolean	Allowed values : true, false	Whether the insurance payer detail is marked as verified or not. By default both values will be fetched
has_patients		Boolean	Allowed values : true, false	Whether fetch payers list with any patients usage or not. If 'true', payers details having patients usage will be fetched, if 'false' payers details with no patient usage will be fetched.

				By default all values will be fetched
start_index		Number		<p>Starting index of the list. Index starts from 0.</p> <p>This value has effect only on pre-configured payers list, not on values fetched from ChARM database</p>
count		Number		<p>Size of the list fetched. Maximum count is 100.</p> <p>This value has effect only on pre-configured payers list, not on values fetched from ChARM database</p>
payer_name		String		Search string for payer name
phone_number		String		Search string for payer phone number
fax		String		Search string for payer fax number
address		String		Search string for payer address. May contain search values of address line, city, state, country and postal code
patient_name		String		Search string for patient name
clearing_house		String	Allowed Values: OPTUM, CHANGE_HEALTH	<p>Type of clearing house configured for e-claims enabled practice.</p> <p>If e-claims is not enabled, OPTUM payer list will be fetched by default</p>

				This value has effect only on values fetched from ChARM database and not on pre-configured payers list th
--	--	--	--	---

**Sample Output Response:**

```
{
  "code": "0",
  "message": "success",
  "payers": [
    {
      "practice_payer_id": "100001000000033237", //unique identifier
      "payer_name": "Anthem Health and Life Insurance Company of New Jersey",
      "payer_id": "80705",
      "eligibility_payer_id": "30701",
      "is_active": "true",
      "is_verified": "true",
      "patients_usage_count": 1,
      "line_1": "A1/3 Down Lane",
      "city": "BASCOM",
      "state": "Florida",
      "country": "us",
      "zip_code": "32423",
      "postbox_no": "5354",
      "work_phone": "9737583920",
    }
  ]
}
```

```

        "fax": "9346274568"
    },
    {
        "practice_payer_id": "1000010000000033245",
        "payer_name": "UnitedHealthcare",
        "payer_id": "87726",
        "eligibility_payer_id": "37724",
        "eligibility_payer_id": "37724",
        "is_active": "true",
        "is_verified": "true",
        "patients_usage_count": 1,
        "line_1": "1221 Canterbury Drive",
        "city": "SALT LAKE CITY",
        "state": "Utah",
        "country": "us",
        "zip_code": "84131",
        "postbox_no": "3136",
        "work_phone": "6467209398",
        "fax": "8015091639"
    }
]
}

```

### **Notes-3:**

- 'practice\_payer\_id' is the unique identifier of Payer, whereas 'payer\_id' is the ID shown in ChARM UI.
- In ChARM, in 'Payer Settings', if value of 'Auto-suggest payers from ChARM Database while adding / editing insurance in ChARM EHR / PHR' is 'Yes', then, along with pre-configured payers list, payers details from ChARM Database will also be fetched. Then, the 'search\_string' parameter is mandatory

## 5. API to get details of a specific Payer

Request URL : [https://ehr.charmtracker.com/api/ehr/v1/payers/{practice\\_payer\\_id}](https://ehr.charmtracker.com/api/ehr/v1/payers/{practice_payer_id})

Method : GET

### **Details:**

This api is used to get specific payer details available under Billing Settings -> Payer Settings -> Practice Payer (Insurance Company) List

### **Sample Output Response:**

```
{
  "code": "0",
  "message": "success",
  "payer": {
    "practice_payer_id": "1000010000000033245",
    "payer_name": "UnitedHealthcare",
    "payer_id": "87726",
    "eligibility_payer_id": "37724",
    "is_active": "true",
    "is_verified": "true",
    "patients_usage_count": 1,
    "line_1": "1221 Canterbury Drive",
    "city": "SALT LAKE CITY",
    "state": "Utah",
    "country": "us",
    "zip_code": "84131",
```



```
"postbox_no": "3136",  
"work_phone": "6467209398",  
"fax": "8015091639"
```

```
}
```

```
}
```

## 6. API to get Insurance details of patient

Request URL :[https://ehr.charmtracker.com/api/ehr/v1/patients/{patient\\_id}/insurances](https://ehr.charmtracker.com/api/ehr/v1/patients/{patient_id}/insurances)

Method: GET

### Details

Gives the details of the available active insurances of a patient. The patient id (patient\_id) is required to get the insurance details.

Request Parameter Name	Is Mandatory	Type [Max Length]	Format / Allowed Values	Description
filter_by		String	Allowed values: All Active Inactive	Filter the list based on Insurance Status

### Sample JSON Output Response :

```
{
  "code": "0",
  "message": "success",
  "insurances": [
    {
      "is_active": true,
      "payer_address_line_1": "A1/3 Down Lane",
      "valid_from": "2012-05-04",
      "employer_name": "ABC Solutions",
      "payer_zip_code": "99393-3333",
      "payer_phone": "9737583920",
      "insured_person_details": {
        "insured_person_relationship": "Self",
```

```
"insured_person_gender": "male",
"insured_person_first_name": "John",
"insured_person_mobile_phone": "97243748299",
"insured_person_ssn": "987654321",
"insured_person_address_line_1": "S3 Lane No1",
"insured_person_address_line_2": "Street Cross Road",
"insured_person_dob": "1981-05-21",
"insured_person_home_phone": "9564678936",
"insured_person_middle_name": "William",
"insured_person_city": "SPOKANE",
"insured_person_last_name": "Smith",
"insured_person_state": "Indiana",
"insured_person_country": "us",
"insured_person_zipcode": "99393"
},
"coinsurance": "77",
"payer_city": "BASCOM",
"date_of_signature": "2020-06-02",
"payer_fax": "9346274568",
"valid_to": "2030-09-04",
"payer_state": "Massachusetts",
"copay": "99.0",
"additional_pr_details": "66",
"insurance_id": "100001000000043051",
"release_medical_info": "yes",
"comments": "These are the comments",
"eligibility_payer_id": "10319",
"policy_group_number": "97867",
```

```
"insurance_added_by": 100001000000002005,
"insurance_plan_name": "TRICARE CHAMPUS",
"insurance_type": "TRICARE CHAMPUS",
"insurance_category": "OTHER",
"insurance_added_through": "EHR",
"insurance_plan_id": "123456789",
"deductible": "88.0",
"practice_payer_id": "100001000000007079",
"payer_country": "us",
"payer_id": "34192",
"assign_medical_benefits": "yes",
"prior_authorization_details": [
  {
    "prior_authorization_valid_from": "2018-01-12",
    "additional_information": "additional info",
    "prior_authorization_number": "priorauth 1",
    "prior_authorization_type": "G1",
    "prior_authorization_valid_until": "2024-04-15"
  },
  {
    "prior_authorization_valid_from": "2018-06-07",
    "additional_information": "additional info 2",
    "prior_authorization_number": "priorAuth2",
    "prior_authorization_type": "EW",
    "prior_authorization_valid_until": "2030-03-11"
  }
],
"payer_name": "Benefit Services, Inc.",
"insurance_added_date": "2020-06-21"
```

```
    },  
    {  
        .....  
    },  
    {  
        nth  
    }  
]  
}
```

## 7. API to get specific Insurance details of patient

Request URL :[https://ehr.charmtracker.com/api/ehr/v1/patients/{patient\\_id}/insurances/{insurance\\_id}](https://ehr.charmtracker.com/api/ehr/v1/patients/{patient_id}/insurances/{insurance_id})

Method: GET

### Details

Gives the details of the specific insurance of a patient. Unique identifiers of the patient (patient\_id) and insurance (insurance\_id) are required to get the insurance details.

### Sample JSON Output Response :

```
{
  "code": "0",
  "message": "success",
  "insurances": [
    {
      "is_active": true,
      "payer_address_line_1": "A1/3 Down Lane",
      "valid_from": "2012-05-04",
      "employer_name": "ABC Solutions",
      "payer_zip_code": "99393-3333",
      "payer_phone": "9737583920",
      "insured_person_details": {
        "insured_person_relationship": "Self",
        "insured_person_gender": "male",
        "insured_person_first_name": "John",
        "insured_person_mobile_phone": "97243748299",
        "insured_person_ssn": "987654321",
        "insured_person_address_line_1": "S3 Lane No1",
```

```
"insured_person_address_line_2": "Street Cross Road",
"insured_person_dob": "1981-05-21",
"insured_person_home_phone": "9564678936",
"insured_person_middle_name": "William",
"insured_person_city": "SPOKANE",
"insured_person_last_name": "Smith",
"insured_person_state": "Indiana",
"insured_person_country": "us",
"insured_person_zipcode": "99393"
},
"coinsurance": "77",
"payer_city": "BASCOM",
"date_of_signature": "2020-06-02",
"payer_fax": "9346274568",
"valid_to": "2030-09-04",
"payer_state": "Massachusetts",
"copay": "99.0",
"additional_pr_details": "66",
"insurance_id": "1000010000000043051",
"release_medical_info": "yes",
"comments": "These are the comments",
"eligibility_payer_id": "10319",
"policy_group_number": "97867",
"insurance_added_by": 100001000000002005,
"insurance_plan_name": "TRICARE CHAMPUS",
"insurance_type": "TRICARE CHAMPUS",
"insurance_category": "OTHER",
"insurance_added_through": "EHR",
```

```
"insurance_plan_id": "123456789",
"deductible": "88.0",
"practice_payer_id": "100001000000007079",
"payer_country": "us",
"payer_id": "34192",
"assign_medical_benefits": "yes",
"prior_authorization_details": [
  {
    "prior_authorization_valid_from": "2018-01-12",
    "additional_information": "additional info",
    "prior_authorization_number": "priorauth 1",
    "prior_authorization_type": "G1",
    "prior_authorization_valid_until": "2024-04-15"
  },
  {
    "prior_authorization_valid_from": "2018-06-07",
    "additional_information": "additional info 2",
    "prior_authorization_number": "priorAuth2",
    "prior_authorization_type": "EW",
    "prior_authorization_valid_until": "2030-03-11"
  }
],
"payer_name": "Benefit Services, Inc.",
"insurance_added_date": "2020-06-21"
}
]
```



## 8. Upload Insurance Card Photo Copy - Front Page

Request URL : [https://ehr.charmtracker.com/api/ehr/v1/patients/{patient\\_id}/insurance/{insurance\\_id}/front\\_page](https://ehr.charmtracker.com/api/ehr/v1/patients/{patient_id}/insurance/{insurance_id}/front_page)

Method : POST

### Details:

This API is used to upload the photo copy of the front page of the patient's insurance card. If a photo-copy already available then this API over-writes that with the new one. It requires the unique identifiers of the patient (patient\_id) and insurance (insurance\_id). Insurance photo copy might be referred during claim submission process.

Supported Formats are Image and PDF with a file size not exceeding 10MB. File stream should be sent in the request body with the name as 'file'.

### Sample Output Response:

```
{
  "code": 0,
  "message": "Insurance card front page uploaded successfully."
}
```

### Error Codes:

Code	Message	Explanation
102	File is not attached	This error code is thrown when the above API is posted without a file.
5560	Error occurred while uploading insurance card.	An internal error occurred while uploading insurance card
257	Error:File type not supported. Please upload a proper file.	This error occurs when file type other than image or pdf is uploaded

## 9. Upload Insurance Card Photo Copy - Back Page

Request URL : [https://ehr.charmtracker.com/api/ehr/v1/patients/{patient\\_id}/insurance/{insurance\\_id}/back\\_page](https://ehr.charmtracker.com/api/ehr/v1/patients/{patient_id}/insurance/{insurance_id}/back_page)

Method : POST

### Details:

This API is used to upload the photo copy of the back page of the patient's insurance card. If a photo-copy already available then this API over-writes that with the new one. It requires the unique identifiers of the patient (patient\_id) and insurance (insurance\_id). Insurance photo copy might be referred during claim submission process.

Supported Formats are Image and PDF with a file size not exceeding 10MB. File stream should be sent in the request body with the name as 'file'.

### Sample Output Response:

```
{
  "code": 0,
  "message": "Insurance card back page uploaded successfully."
}
```

### Error Codes:

Code	Message	Explanation
102	File is not attached	This error code is thrown when the above API is posted without a file.
5560	Error occurred while uploading insurance card.	An internal error occurred while uploading insurance card
257	Error:File type not supported. Please upload a proper file.	This error occurs when file type other than image or pdf is uploaded

## 10. Delete Insurance Card Photo Copy - Front Page

Request URL : [https://ehr.charmtracker.com/api/ehr/v1/patients/{patient\\_id}/insurance/{insurance\\_id}/front\\_page](https://ehr.charmtracker.com/api/ehr/v1/patients/{patient_id}/insurance/{insurance_id}/front_page)

Method : DELETE

### **Details:**

This API deletes the front page copy of the patient's insurance. Unique identifiers of the patient (patient\_id) and insurance (insurance\_id) must be submitted in the request.

### **Sample Output Response:**

```
{  
    "code": 0,  
    "message": "Insurance card copy front page deleted successfully."  
}
```

## 11. Delete Insurance Card Photo Copy - Back Page

Request URL : [https://ehr.charmtracker.com/api/ehr/v1/patients/{patient\\_id}/insurance/{insurance\\_id}/back\\_page](https://ehr.charmtracker.com/api/ehr/v1/patients/{patient_id}/insurance/{insurance_id}/back_page)

Method : DELETE

### **Details:**

This API deletes the back page copy of the patient's insurance. Unique identifiers of the patient (patient\_id) and insurance (insurance\_id) must be submitted in the request.

### **Sample Output Response:**

```
{
  "code": 0,
  "message": "Insurance card copy back page deleted successfully.."
}
```

## 12. API to change insurance status of a patient

Request URL : [https://ehr.charmtracker.com/api/ehr/v1/patients/{patient\\_id}/insurance/{insurance\\_id}/status](https://ehr.charmtracker.com/api/ehr/v1/patients/{patient_id}/insurance/{insurance_id}/status)

Method : PUT

### Details:

This API is used to change the Insurance status of a patient.

Parameter Name	Is Mandatory	Type [Max Length]	Format / Allowed Values	Description
is_active	Yes	Boolean	Allowed values : true, false	Insurance status to set

### Sample Input Request:

```
{  
  "is_active": false  
}
```

### Sample Success Output Response:

```
{  
  "code": "0",  
  "message": "Insurance status updated successfully."  
}
```

**Error Codes:**

<b>Code</b>	<b>Message</b>	<b>Explanation</b>
50116	Insurance ID not found	Insurance ID passed in the request is not valid
1049	Insurance is already Active / Inactive	Insurance status passed in the request is the same as the current status