



Outbound Patients and Inbound Charges

Common Use Case Package

athenahealth, Inc.

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Formerly EMR Lite and EMR Full

1. Table of Contents

[1 Table of Contents 2](#_Toc14270694)

[1.1 Scoping Process 3](#_Toc14270695)

[1.2 Scope Approval 3](#_Toc14270696)

[2 Project Information 4](#_Toc14270697)

[3 Product Description 5](#_Toc14270698)

[4 General Interface Configuration 6](#_Toc14270699)

[4.1 Message Samples and Specs 6](#_Toc14270700)

[4.2 Integration Testing Environment 7](#_Toc14270701)

[4.2.1 Testing Phases and Resource Allocation 7](#_Toc14270702)

[5 Standard Functionality Overview 8](#_Toc14270703)

[5.1 Message Filtering and Control 8](#_Toc14270704)

[5.1.1 Selective Filtering of Outbound Messages 8](#_Toc14270705)

[5.2 Patients 8](#_Toc14270706)

[5.2.1 Patient Race, Ethnicity, and Language 8](#_Toc14270707)

[5.3 External ID Management 8](#_Toc14270708)

[5.4 Provider ID Management 9](#_Toc14270709)

[6 Inbound Message Configuration 10](#_Toc14270710)

[6.1 Charges 10](#_Toc14270711)

[6.1.1 Minimum Required Fields for Charge Messages 10](#_Toc14270712)

[6.1.2 Matching Logic for Charge Messages 10](#_Toc14270713)

[6.1.2.1 Patient Matching for Charge Messages 10](#_Toc14270714)

[6.1.3 Processing Logic for Charge Messages 10](#_Toc14270715)

[6.1.3.1 Charges Will Create Free Standing Claims 10](#_Toc14270716)

[6.1.3.2 Charge Grouping 11](#_Toc14270717)

[6.1.3.3 Charge Combining 11](#_Toc14270718)

[6.1.3.4 Insurance Logic 11](#_Toc14270719)

[6.1.3.5 Supervising Provider Processing 11](#_Toc14270720)

[6.2 Interface Mapping Requirements 11](#_Toc14270721)

[7 Connectivity Method Overview 12](#_Toc14270722)

[8 Appendices and Other References 13](#_Toc14270723)

[8.1 Planned Maintenance Window 13](#_Toc14270724)

[8.2 Interface Message Queue Manager 13](#_Toc14270725)

[8.3 Continuing Service and Support 13](#_Toc14270726)

* 1. Scoping Process

Your interface project manager is available to meet, assist with questions, and help determine the best-fit options for your project. Instructions for manual scoping are as follows:

1. **Review**:

Please read the Common Use Case Package and complete all form fields and check-boxes to the best of your ability. Should you have questions about the configuration options presented in this document please do not hesitate to discuss with your interface project manager.

If there is a customization request during the implementation process clients are subject to a fee. If there is a request to customize post go-live you will be subject to modification fees.

1. **Approve**:

When this document is completed to your satisfaction, please approve the scope of the interface by typing your name below.

* 1. Scope Approval

I,      , agree to the interface design as described here in this document.

Date:

1. Project Information

Please fill the following to the best of your ability. While not all contacts are required, you should be able to submit at least two contacts at the onset of a new interface project.

|  |  |  |  |
| --- | --- | --- | --- |
| General Information | |  |  |
| Integration Project Name (if applicable) | | |  |
| Vendor  (If applicable, third party data exchange vendor) | Company Name:  (ex. athenahealth, Inc.) | |  |
| Software Product Name:  (ex. athenaNet) | |  |
| Version:  (ex. 14.9) | |  |
| Interface Engine:  (ex. athenaNet MX Engine) | |  |
| Trading Partner Name | | |  |
| Trading Partner Type (ex. Health Information System, EHR, etc.) | | |  |
| athenahealth Practice Context ID | | |  |
| athenahealth Interface Project Manager Name | | |  |
| athenahealth Interface Project Manager Contact Information | | |  |
| Event Number (provided by Interface Project Manager, for internal athenahealth tracking) | | |  |

|  |  |  |  |
| --- | --- | --- | --- |
| Contact | Role | Details | |
| Project Business Contact | Responsible for overall success of the project | Name: |  |
| Phone: |  |
| Email: |  |
| Project Interface Contact | Interface expert, responsible for continuing interface support | Name: |  |
| Phone: |  |
| Email: |  |
| Project IT Contact | Networking and security expert, responsible for overall connectivity | Name: |  |
| Phone: |  |
| Email: |  |
| Vendor Contact #1 | Role: | Name: |  |
| Phone: |  |
| Email: |  |
| Vendor Contact #2 | Role: | Name: |  |
| Phone: |  |
| Email: |  |

1. Product Description

This interface supports the secure and automated transfer of information between an external third-party system and athenaNet. To ensure compatibility across a wide array of platforms and software vendors interface data is formatted according to HL7 v2 standards.

By choosing to move forward with this standard integration you are committing to the scope outlined below. If you require any customization to this integration, please contact your athenahealth project manager to engage athenahealth’s Integration Design team for detailed scoping. Please note that any customizations will result in this integration becoming a custom interface, and will incur additional fees.

|  |  |  |  |
| --- | --- | --- | --- |
| Action | Event | Default Message | Functionality |
| Add Patient | New Patient ADDED in athenaNet | A28 | Outbound |
| Update Patient | Patient UPDATED in athenaNet | A31 | Outbound |
| Charges | Claim CREATED in other system | P03 | Inbound |

1. General Interface Configuration
   1. Message Samples and Specs

For athenahealth samples and specifications, please see the [Developer Toolkit](http://www.athenahealth.com/developer-portal/developer-toolkit/by-standard).

(http://www.athenahealth.com/developer-portal/developer-toolkit/by-standard)

|  |  |
| --- | --- |
| **Patient (ADT) Sample Message** | |
| **A28**  **Add Patient** | MSH|^~\&|ATHENANET|432^AA - Aaron Athena Aardvark, MD|OPAC - 432 - Final Build||201709251601||ADT^A28|1307569M432|P|2.3.1  EVN|A28|201709250400|||username  PID||299202^^^Enterprise ID|299202^^^Enterprise ID|299202^^^Enterprise ID|TEST^SPEC||19900101|F|ATHENA|2058-6^African American|40 TEST AVENUE^^BRIGHTON^MA^02135^UNITED STATES||(555)444-6666^PRN^PH^^1^555^4446666~~TEST@EMAIL.COM^NET^^TEST@EMAIL.COM~(555)123-5555^ORN^CP^^1^555^1235555||eng^English|M|||555661234|||2180-8^Puerto Rican  NK1|1|TEST^EMERGENCY|SPOUSE||(555)666-4444||C  PV1|||52^TEST DEPARTMENT^^TEST DEPARTMENT  GT1|1||TEST^SPEC||40 TEST AVENUE^^BRIGHTON^MA^02135^UNITED STATES|(555)444-6666^TEST@EMAIL.COM||19900101|||Self||||||||||||||||||||||||||||||||||EMERGENCY TEST|(555)666-4444||SPOUSE  IN1|1|40^Self-Pay (cash)|40^Self-Pay (cash)|Self-Pay (cash)|||||||||||PP|||||||1 |
| **A31**  **Update Patient** | MSH|^~\&|ATHENANET|432^AA - Aaron Athena Aardvark, MD|OPAC - 432 - Final Build||201709251621||ADT^A31|1307640M432|P|2.3.1  EVN|A31|201709250421|||username  PID||299202^^^Enterprise ID|299202^^^Enterprise ID|299202^^^Enterprise ID|TEST^SPEC||19900101|F|ATHENA|2058-6^African American|TEST AVENUE^UNIT 1^RICHMOND^VA^23222^UNITED STATES||(555)444-6666^PRN^PH^^1^555^4446666~~TEST@EMAIL.COM^NET^^TEST@EMAIL.COM~(555)123-5555^ORN^CP^^1^555^1235555||eng^English|M|||555661234|||2180-8^Puerto Rican  NK1|1|TEST^EMERGENCY|SPOUSE||(555)666-4444||C  PV1|||52^TEST DEPARTMENT^^TEST DEPARTMENT||||132P432^AARDVARK^AARON||||||||||132P432^AARDVARK^AARON  GT1|1||TEST^SPEC||TEST AVENUE^UNIT 1^RICHMOND^VA^23222^UNITED STATES|(555)444-6666^TEST@EMAIL.COM||19900101|||Self||||||||||||||||||||||||||||||||||EMERGENCY TEST|(555)666-4444||SPOUSE  IN1|1|40^Self-Pay (cash)|40^Self-Pay (cash)|Self-Pay (cash)|||||||||||PP|||||||1 |

|  |  |
| --- | --- |
| **Charges (DFT) Sample Message** | |
| **P03**  **Charge** | MSH|^~\&|SYSTEM|ASFD|CPY|REC\_FAC|201708141539||DFT^P03|4251|P|2.3.1|||AL|NE EVN|DFT|201708141539||Rea|User  PID||299130^^^Enterprise ID|299130^^^Enterprise ID|299130^^^Enterprise ID|TEST^PATIENT SUMMARY||19550801|M||2028-9^Asian|1 PRESIDENTE AVE^^DORCHESTER^MA^02125^UNITED|||||||626285|  PV1|1|I|5W^0534^01^SAMPLE HOSPITAL^^^Test Medical Bldg|1|||1242^Attending^Doc^^^ITR: 94368^^^JP EXT ID^O||1234567890^Consulting^Doctor^A^MD~0987654321^Consulting^Doctor^B^MD|MED||||1|||5678901234^Admitting^Doctor^^MD^ITR 115543 - Code 1 Physician|IP|626285|BC||||||||||||||||01|||SJ||DI||||||||||626285|  FT1|1|||20170815||CG||||1||||||5W^0534^01^SAMPLE HOSPITAL^^^Test Medical Bldg|||786.05|9876543210 - Code 1 Physician NPI|||94~3080115950^FILLER\_ORDER||99285^Emergency department visit for the evaluation and management of a patient, |

* 1. Integration Testing Environment

A non-live, athena-hosted preview environment is provided to facilitate integration testing prior to moving the interface to production. It is expected that the other vendor system provides a similar non-live environment for testing on their side as well.

Will a vendor test environment be made available for this project?  Yes is recommended

If no, please tell us what will be done for testing:

* + 1. Testing Phases and Resource Allocation

Interface testing is generally broken up into two phases, unit testing and end-user testing.

In the unit testing phase, athenahealth works directly with the other vendor to ensure outbound messages are generated and delivered successfully to the receiver. For inbound message testing, athenahealth will confirm messages are received and processed.

Upon completion of unit testing, end-user testing phase begins. athenahealth may provide guidance when appropriate, but ultimately it is client responsibility to plan, organize, and carry out testing of their interface in relation to practice workflows.

1. Standard Functionality Overview
   1. Message Filtering and Control
      1. Selective Filtering of Outbound Messages

Should messages be filtered outbound (Y/N)?  No is recommended, where the interface will send all configured messages

|  |  |  |
| --- | --- | --- |
| Message Type | Filter Group | Filter By (Names) |
| Patients |  |  |
| Appointments |  |  |

* 1. Patients
     1. Patient Race, Ethnicity, and Language

For outbound patient messages, race and ethnicity will be sent in the following format.

|  |
| --- |
| Code Set |
| CDC Identifier (Ex. For a race of “White Mountain Apache”, we would send “1019-9”) |

For outbound patient messages, language will be sent in the following format.

|  |
| --- |
| Code Set |
| ISO6392 Code (Ex. For English, we would send “eng”) |

* 1. External ID Management

To assist with patient ID management throughout an integrated health system, athenaNet can store multiple external IDs. External IDs may be used for matching purposes or external IDs may just be interfaced and stored in athenaNet using custom fields. All patient IDs present in athenaNet, including external IDs such as those supplied by an interface or import process, are available to be sent out over the interface.

For example, suppose the other system assigns an EMPI ID, a chart number, and a hospital MRN. Although you may only intend to use one of them for matching purposes, all of the other IDs can be stored as well. Information stored in athenaNet Custom Fields can be made searchable and appear on various patient workflow screens, including the patient Quickview screen. In most cases an external ID may not be used as the athenaNet patient ID.

Please identify Person level Custom Fields here:

|  |  |  |
| --- | --- | --- |
| athena Custom Field Name | athena Custom Field ID | HL7 Field |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

Please identify Appointment level Custom Fields here:

|  |  |  |
| --- | --- | --- |
| athena Custom Field Name | athena Custom Field ID | HL7 Field |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |
|  |  |  |

Are any of the above external IDs formatted with leading zeros?

Additional comments:

 By default, the information in the above tables is applied to both inbound and outbound when available.

* 1. Provider ID Management

Wherever provider is included on outbound messages, it can either be sent as the provider’s NPI, or as the provider’s athena provider ID. Select your preferred option below.

|  |  |
| --- | --- |
| Option | Provider ID |
|  | Provider’s NPI |
|  | Provider’s athena Provider ID |

1. Inbound Message Configuration
   1. Charges

The following sections contain configurations related only to inbound charge messages. Only charge data is processed from inbound P03 charge messages. All other data, including any demographic updates, are discarded. athenaNet only handles claim creation. Edits to existing claims cannot be handled by the interface and must be done via standard athenaNet workflow. The interface cannot void to delete charges via interface.

Final Charges Only: The other system should send claims only when they are ready for billing. That is, inbound charge data should be complete, finalized, and ready for immediate billing. We do not recommend “building up a claim” over the course of many transactions/charges/messages. Those charges should be sent all at once, ideally contained within single DFT messages (one claim per message).

* + 1. Minimum Required Fields for Charge Messages

In order to create a claim, the following data is required. We expect data to be in the following HL7 fields.

|  |  |
| --- | --- |
| Data Field | Default HL7 Field |
| Appointment ID | PV1.19 or PV1.50 |
| Rendering Provider | Derived from Appointment or FT1.20 |
| Department | Derived from Appointment or FT1.16 or FT1.13 |
| Service Date | Derived from Appointment or FT1.4 |
| Procedure Code | FT1.25 |
| Modifier (if required for procedure code) | FT1.26 |
| Diagnosis Code | FT1.19 |
| ICD code set | FT1.19.2 |

**MAXIMUM ALLOWABLE DIAGNOSIS CODES FOR INTERFACE CLAIM CREATION**: Up to four pointers to the diagnosis codes stored in the claim header are allowed per procedure code. Additional diagnosis codes included in the FT1.19 segment are stored without pointers in the claim header up to a total of 12 diagnosis codes.

* + 1. Matching Logic for Charge Messages
       1. Patient Matching for Charge Messages

For this interface, the athenaNet patient matching algorithm compares demographic information in athenaNet with the data elements in each message received. The data elements used for patient matching are athena patient ID, client-specified external patient ID, full last name, full first name, date of birth, SSN, gender, middle initial, address and phone number. The athenaNet Interface Message Queue Manager provides a manual review process for messages that may create duplicate patient records or substantially change the demographics for an existing patient record.

* + 1. Processing Logic for Charge Messages
       1. Charges Will Create Free Standing Claims

Inbound Charges will create a free-standing claim by default. Due to appointments not being sent to the third party system for this use case.

* + - 1. Charge Grouping

Some systems (frequently lab systems and some HIS systems) will send charges associated with an encounter to athenaNet in separate transactions. That is, if an encounter has multiple charges, those charges will be sent to athenaNet in separate charge transactions. To accommodate separate transactions, charges sent to athenaNet will be grouped together onto the same claim by default.

Charge grouping default utilizes the a) patient, b) service date, c) rendering provider & supervising provider, d) department and e) primary & secondary insurances when searching for an existing claim. Important note: In addition, only f) open unbilled claims are considered for grouping new charges onto. If charge grouping is not required, or a different logic is desired, please specify here:

* + - 1. Charge Combining

When we receive multiple charge messages for the same patient, procedure, and date, the most recent charge will completely overwrite the original charge and the units will be updated to reflect the amount in the most recent charge message, rather than combining the units from both charge messages.

* + - 1. Insurance Logic

When a charge matches to an appointment, the claim will be created with insurance from the appointment. When a free-standing claim is created, insurance will be pulled from the patient's Quickview.

6.1.3.5 Supervising Provider Processing

|  |
| --- |
| From where would you like to pull Supervising Provider (check one): |
| Rendering Provider in FT1.20 and Supervising Provider from Rendering Provider |
| Rendering Provider in FT1.20 and Supervising Provider in FT1.21 |

* 1. Interface Mapping Requirements

It is expected that the client system sends data elements as outlined in the (http://www.athenahealth.com/\_doc/interfaces/athenaNet\_Global\_Tables.xls)

1. Connectivity Method Overview

As part of interface implementation, athenahealth will need to establish a secure method of transfer for electronic data to and from a third-party system. The Connectivity Method Overview contains our current connectivity offering as well as information regarding functionality and project steps.

<http://www.athenahealth.com/~/media/athenaweb/files/developer-portal/Connectivity_Methods_Overview.docx>

For questions, please contact your Interface Project Engineer.

1. Appendices and Other References
   1. Planned Maintenance Window

The athenaNet MX Engine is subject to the same maintenance windows as the default, all interfaces are shut-off during this time window, and also remain disabled until 4 A.M. Eastern Time.

* 1. Interface Message Queue Manager

The athenaNet Interface Message Queue Manager (IMQM) is an interactive repository for all interface messages that pass through athenaNet. Messages can be categorized into several processing states. Please note that messages in a final state (processed or deleted) will only remain in the queue for 90 days.

|  |  |
| --- | --- |
| Message State | Explanation |
| SCHEDULED | Scheduled to be sent at a later time |
| NEW | Placeholder for a new message and ready to be sent or received |
| DISTRIBUTED | Delivery or acknowledgement is pending for Global interfaces |
| PENDING | Delivery or acknowledgement is pending |
| PROCESSED | Processed normally; remains in queue for only 90 days |
| ERROR | Generic error encountered; routed to client |
| CBOERROR | Billing related error encountered; routed to client |
| ATHENAERROR | Internal error encountered; routed to athenahealth Client Support Center |
| DELETED | Messages that have been deleted; remains in queue for only 90 days |

In order to access the IMQM in athenaNet to manually resolve common errors, such as missing providers, invalid procedure codes, or unknown departments, the following user permissions must be granted by the local system administrator:

|  |  |
| --- | --- |
| Permission | Use Case |
| Interface Admin: View Message Queue | You want to be able to view the IMQM. |
| Interface Admin: Map Insurance Messages | You need to map insurance messages. |
| Interface Admin: Map Messages (except Insurances) | You need to map all messages excluding insurance messages (e.g. provider and department mappings). |
| Interface Admin: File Upload Interface | You want to be able to upload files via the interface. |

See [athenaNet Interface Queue Management Guide](http://www.athenahealth.com/developer-portal/developer-toolkit/support) for more information on the functionality of the IMQM and on client-side cleanup for ERRORs and CBOERRORs.

* 1. Continuing Service and Support

Within two weeks after go-live your interface will be transitioned into our daily service and support structure.

As a standard practice, athenahealth continuously monitors all client connections and will notify the contacts specified if an error occurs. All jobs are monitored and automatically restarted if idle. For more details please refer to the [Interface Down Support Document](http://www.athenahealth.com/developer-portal/developer-toolkit/support).

To contact athenahealth for questions or modifications to the interface, support can be accessed directly in athenaNet:

