



HealthGrid

Integration Package

athenahealth, Inc.

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# Project Overview

## Product Description

HealthGrid digital check-in solution is for the capture of patient demographic and intake data, consent and signature forms, health screenings, and payment collection. Once collected, all of this information is automatically returned into your athenaClinicals tablespace via our API.

## 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 |  |  |
| 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: |  |

# Interface Design

## Additional Comments

Please use this section for any additional questions or comments related to this integration.

|  |  |
| --- | --- |
| Technical Overview | |
| Third Party System | HealthGrid |
| Interface Type | API |
| Schematic | **athenaNet**  API responses  **HealthGrid**  API calls |
| Format | API |
| Data Transfer Direction | 🡺 Outbound from athenaNet to HealthGrid  🡸 Inbound from HealthGrid to athenaNet |
| Frequency of Data Transfer | Real Time |
| API Endpoints | GET /appointments/booked  GET /patients/{patientid}/ccda  GET /ethnicities  GET /languages  GET /races  GET /patient/{patientid}  GET /patient/bestmatch  GET /patient/{patientid}/appointments  GET /provider/{providerid}  POST /appointments/{appointmentid}/startcheckin  POST /patients/{patientid}/portalinvitation  GET /appointments/{appointmentid}/healthhistoryforms  GET /appointments/{appointmentid}/healthhistoryforms/formid  PUT /appointments/{appointmentid}/healthhistoryforms/formid  POST /patients/{patientid}/collectpayment  GET /patients/{patientid}/receipts/epaymentid  POST /patients/{patientid}/receipts/epaymentid/signed  POST /patient/{patientid}/documents  POST /patients/{patientid}/medicationhistoryconsentverified  POST /patients/{patientid}/privacyinformationverified  PUT /patients/{patientid}  PUT /patients/{patientid}/customfields  POST /appointments/{appointmentid}/notes  POST /appointments/{appointmentid}/checkin |
| Connectivity | API |
| Options | N/A |
| Restrictions | Requires integration with athenaClinicals, athenaCollector, athenaCommunicator |

Scope Approval

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

Position:

Date:

# Go-Live Authorization Form

## 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.

To contact athenahealth for help or support post go-live, the following resources are available:

1 Integration Monitoring: [IntegrationMonitoringRequests@athenahealth.com](mailto:IntegrationMonitoringRequests@athenahealth.com)

Additionally, it is **required** to provide support contact information for the client and trading partner for use by athenahealth interface support. When possible, general support hotlines and email address are preferred.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Name | Company | Title | Office Phone | Mobile Phone | Email |
|  |  |  |  |  |  |
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## Interface Go-Live Signoff

Reference is made to the Athenahealth services agreement (the “Agreement”) entered into by and between athenahealth, Inc. (“Athena”) and the client set forth on the signature page below (“Client”, “you” or “your”). In order to move your interface (or interface change requiring testing) (the “Interface”) into your athenaNet production environment, you must sign off on the functionality of the Interface by execution of this Go Live Authorization Form. Client agrees to fully cooperate with Athena and provide all assistance reasonably necessary for Athena to create, implement and maintain the Interfaces. Client acknowledges that Athena’s performance is contingent on Client’s timely and effective performance of its obligations and understands that the operability of the Interfaces depends on Client’s ability to maintain its own equipment and functionality. Client has obtained or will obtain all consents, licenses, and waivers and has fulfilled all legal obligations that are necessary to allow Athena to create, implement and maintain the Interfaces. It should be understood that additional changes to the scope of the Interface once loaded into athenaNet production will involve additional project work and potentially incur additional costs. In addition, Client acknowledges that moving the Interface to athenaNet production environment may require changes to athenaNet practice settings and in connection with this Go-Live Authorization Form authorizes all required changes in athenaNet.

Upon receipt of this signed form, Athena requires a minimum of 2 business days to move your interface live.

The terms of this Go Live Authorization Form are hereby incorporated into the Agreement and shall become effective upon Client’s signature below. By signing below, Client acknowledges that it is satisfied with the functionality of the Interface set forth below and Client authorizes Athena to enable such Interface to be deployed to athenaNet production.

CLIENT:

By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Print Name:

Position:

Date: