

PowerSoftMD PM to EMR HL7 Patient Demographics & Scheduling Export Specifications

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Introduction

PowerSoftMD uses HL7 2.3.1 specifications. The following pages outline our specifications for both Demographic and Schedule export files.

PowerSoftMD itself does not transmit or receive Messages. The receiving company is responsible for setting up a secure folder on the Clients (Doctors Office) computer to send and receive files from. This folder must be on the same Windows shared drive as the PowerSoftMD folders are located.

We recommend a structured folder names, for example:
H:\HL7\XYZCorp

The EMR or Receiving Company can use a VPN or service like HyperSend. Whatever is agreeable with the Client (Doctors Office) and is encrypted and secure to HIPPA standards.

Again, the secure transmission is between the receiving Company and the Client (Doctors Office), Data Tec is not involved or responsible for this link or transmission service in any way.

Technical Basics

Message delivery: Data Tec is not responsible for data delivery or pickup. We look for and leave messages in specified local computer directories.

Standard HL7 message structure,
Segment delimiters <CR>
Messages delimiters <LF>
| - field delimiter
^ - component delimiter
~ - repeat delimiter
\ - escape character
& - sub-component delimiter

The following escape fields are defined.

\H\ start highlighting (Not used)
\N\ normal text (end highlighting) (not used)
\F\ field separator character
\S\ component separator character
\T\ subcomponent separator character
\R\ repetition separator character
\E\ escape character
\Xdddd...\ hexadecimal data (not used)

No Acknowledgement messages are utilized, so as a standard, files should be read & verified before being deleted.

HL7 Supported Message Types

Add / Update Patient

<u>Segments</u>	<u>Required</u>	<u>Description</u>
MSH	Y	Message Header
PID	Y	Patient Demographics
PV1	Y	Patient Visit Information
GT1	C	Guarantor Information
IN1	C	Insurance Information

Sample

```
MSH|^~\&|Secur|86|ReceivingApp||20061219110725||ADT^A08|20061219110725|P|2.4
EVN| A08|20061219110725
PID|1|100208|8401||SMITH^JOHN^J||19700101|M|||4140 DELOR^APT 21B^HAZELWOOD^MO^63042
||3148953333~7139653174^^Test@aol.com||||100208|608-88-9210|S123-4567-8900
PV1||O||||1^WOLFMAYER^SANDY
GT1|1|Smith^John||4140 DELOR^APT 21B^HAZELWOOD^MO^63042|(555)463-2241|(555)673-4598||||1^Self
IN1|1|7|Blue|Bc/Bs Of Mo|1831 Chestnut St^Kittery^ME^03904|||(888) 121-2122|123456||||||Smith^John^J|1|19700101|
4140 Delor^Apt 21B^Hazelwood^MO^63042||||||||||||123456789|||||M
```

Add / Modify / Delete Appointment

<u>Segments</u>	<u>Required</u>	<u>Description</u>
MSH	Y	Message Header
SCH	Y	Schedule Activity Information
PID	Y	Patient Demographics
PV1	Y	Patient Visit Information

Sample

```
MSH|^~\&|SecurMD|86|ReceivingApp||20061114113915||SIU^S12|20061114113915|P|2.4
EVN| S12|20061114113915
SCH|11948|||||Need Ins Card and Registration forms filled out|2^NEW PATIENT|30|M|^2006111411500
PID|1|100208|8401||SMITH^JOHN^J||19700101|M|||4140 DELOR^APT 21B^HAZELWOOD^MO^63042
||3148953333~7139653174^^Test@aol.com ||||100208|608-88-9210|S123-4567-8900
PV1||O||||1^WOLFMAYER^SANDY|||||||||11948|||||||||||||2006111411500|20061114114500
```

* All messages are pipe (|) delimited and terminated by a carriage return/linefeed

* Some fields (denoted on the segment definitions) are caret (^) sub-delimited

*Values for the "required" field:

Y = Yes; we will always populate this field

N = No; this field will always be blank or its values can be ignored

C = Conditional; if we have it we will pass it

* Date/Time Values are always formatted:

Date = CCYYMMDD

Time = HHMMSS

Date/Time = CCYYMMDDHHMMSS

MSH - Message Header Definition

<u>Field #</u>	<u>Description</u>	<u>Required</u>	<u>Sample Data</u>
0	Message Qualifier	Y	MSH
1	Separation Character	Y	
2	Encoding Characters	Y	^~\&
3	Sending Application	Y	PowerSoftMD
4	Sending Facility	Y	FamilyMed
5	Receiving Application	N	ReceivingApp
6	Receiving Facility	N	
7	Date/Time	Y	201201010725
8	Security Code	N	
9	Message Type	Y	ADT^A08
9.1	Message Type Qualifier *	Y	ADT
9.2	Message Trigger *	Y	A08
10	Message Number	N	
11	Production Flag	N	P
12	Version	Y	2.3.1

* The Qualifier and Trigger fields define the type of message:

ADT^A04 = Add Patient

ADT^A08 = Update Patient

SIU^S12 = Add Appointment

SIU^S13 = Modify Appointment

SIU^S15 = Delete Appointment

EVN - Event Type Definition

<u>Field #</u>	<u>Description</u>	<u>Required</u>	<u>Sample Data</u>
0	Message Qualifier	Y	EVN
1	Event Type Code	Y	A08
2	Recorded Date/Time	Y	20061219110725

PID - Patient Demographics Definition

<u>Field #</u>	<u>Description</u>	<u>Required</u>	<u>Sample Data</u>
0	Message Qualifier	Y	PID
1	Sequence Number	Y	1
2	Patient Account Number	Y	00208
3	Alternate Patient ID	Y	A8401
4	Alternate Patient ID	N	
5	Patient Name	Y	SMITH^JOHN^J
5.1	Patient Last Name	Y	SMITH
5.2	Patient First Name	Y	JOHN
5.3	Patient Middle Initial	Y	J
6	Mother's Maiden Name	N	
7	Date of Birth	Y	19700101
8	Gender	Y	M
9	Patient Alias	N	
10	Race	N	W^White^HL70005
11	Patient Address	C	4140 Delor^Apt 21B^Hazelwood^MO^63042
11.1	Street Address	C	4140 Delor
11.2	Other Designation	C	Apt 21B
11.3	City	C	Hazelwood
11.4	State	C	MO
11.5	Zip Code	C	63042
12	Country Code	N	
13	Home Phone Number	C	3148953333~7139653174^^Test@aol.com
14	Work Phone Number	C	8772581281
15	Primary Language	N	English
16	Marital Status	N	S
17	Religion	N	
18	Patient Account Number	N	
19	Patient Social Security Number	C	608889210
20	Drivers License Number	N	
21	Mother's Identifier	N	
22	Ethnic Group	N	Hispanic

PID-10 Race Coded value examples:

B^Black or African-American^HL70005
 W^White^HL70005
 I^American Indian or Alaska Native^HL70005
 A^Asian or Pacific Islander^HL70005
 O^Other^HL70005
 U^Unknown^HL70005

PID-13 Home Phone breakdown:

Homephone#~cellphone#^^email@address.com

GT1 - Guarantor Information Definition

<u>Field #</u>	<u>Description</u>	<u>Required</u>	<u>Sample Data</u>
0	Message Qualifier	Y	GT1
1	Set ID	Y	1
2	Guarantor Number	N	
3	Guarantor Name	Y	Smith^John^C
3.1	Last Name	Y	Smith
3.2	First Name	Y	John
3.3	Middle Initial	Y	C
4	Spouse Name	N	
5	Guarantor Address	C	4140 DELOR^APT 21B^HAZELWOOD^MO^63042
5.1	Street Address	C	4140 DELOR
5.2	Other Designation	C	APT 21B
5.3	City	C	HAZELWOOD
5.4	State	C	MO
5.5	Zip Code	C	63042
6	Home Phone	C	5554632241
7	Work Phone	N	5556734598
8	Date of Birth	N	
9	Gender	N	
10	Type	N	
11	Relationship	Y	1

* Relationship to Patient Values:

- 1 = Self Insured
- 2 = Spouse
- 9 = Other

IN1 - Insurance Information Definition

<u>Field #</u>	<u>Description</u>	<u>Required</u>	<u>Sample Data</u>
0	Message Qualifier	Y	IN1
1	Set ID	Y	1
2	Insurance Plan ID	N	7
3	Insurance Company ID	N	11
4	Insurance Co. Name	Y	BC/BS Of MO
5	Insurance Co. Address	C	1831 Chestnut St^Kittery^ME^03904
5.1	Street Address	C	1831 Chestnut St
5.2	Other Designation	C	
5.3	City	C	Kittery
5.4	State	C	ME
5.5	Zip Code	C	63904
6	Contact Person	N	
7	Phone Number	N	8881212122
8	Group Number	C	123456
9	Group Name	N	
10	Insured's Group Emp ID	N	
11	Insured's Group Emp Name	C	
12	Plan Effective Date	N	
13	Plan Expiration Date	N	
14	Authorization Information	N	
15	Plan Type	N	
16	Name Of Insured	C	Smith^John^J
16.1	Insured Last Name	C	Smith
16.2	Insured First Name	C	John
16.3	Insured Middle Initial	C	J
17	Insured's Relationship to Patient *	C	1
18	Insured's Date of Birth	N	19700101
19	Insured's Address	N	4140 Delor^Apt 21B^Hazelwood^MO^63042
19.1	Street Address	N	4140 Delor
19.2	Other Designation	N	Apt 21B
19.3	City	N	Hazelwood
19.4	State	N	MO
19.5	Zip Code	N	63042
20	Assignment of Benefits	N	
21	Coordination of Benefits	N	
22	Coord. Of Benefits Priority	N	
23	Notice of Admission Flag	N	
24	Notice of Admission Date	N	
25	Report of Eligibility Flag	N	
26	Report of Eligibility Date	N	
27	Release Information Code	N	
28	Preadmit Cert (PAC)	N	
29	Verification Date/Time	N	
30	Verification By	N	
31	Type of Agreement Code	N	
32	Billing Status	N	
33	Lifetime Reserve Days	N	
34	Delay Before L.R. Day	N	
35	Company Plan Code	N	

36	Policy Number	C	123456789	
37	Policy Deductible	N		
38	Policy Limit Amount	N		
39	Policy Limit Days	N		
40	Room Rate - Semi Private	N		
41	Room Rate – Private	N		
42	Insured Employment Status	N		
43	Insured Gender	C	M	

* Relationship to Patient Values:
 1 = Self Insured
 2 = Spouse
 9 = Other

SCH - Schedule Activity Definition

<u>Field #</u>	<u>Description</u>	<u>Required</u>	<u>Sample Data</u>
0	Message Qualifier	Y	SCH
1	Appointment ID	Y	11948
2	Alternate Appt ID	N	
3	Occurrence Number	N	
4	Placer Group Number	N	
5	Schedule ID	N	
6	Event Reason	N	
7	Appointment Reason (free-text)	C	Need Registration forms filled out
8	Appointment Type	Y	2^NEW PATIENT
8.1	Appointment Type ID	Y	2
8.2	Appointment Type Text	Y	NEW PATIENT
9	Appointment Duration	Y	30
10	Appointment Duration Units *	Y	M
11	Appointment Timing Quantity	Y	^^20061114111500
11.1	Quantity	N	
11.2	Interval	N	
11.3	Duration	N	
11.4	Start Date/Time	Y	20061114111500

*Appointment Duration Unit Values:

M = Minutes

H = Hours

PV1 - Patient Visit Information Definition

<u>Field #</u>	<u>Description</u>	<u>Required</u>	<u>Sample Data</u>
0	Message Qualifier	Y	PV1
1	Set ID	Y	1
2	Patient Class	N	
3	Assigned Patient Location	N	
4	Admission Type	N	
5	Preadmit Number	N	
6	Prior Patient Location	N	
7	Attending Provider	N	9876543210^WOLFMAYER^SANDY
7.1	Provider ID Number (Secur)	Y	9876543210
7.2	Provider Last Name	Y	WOLFMAYER
7.3	Provider First Name	Y	SANDY
8	Referring Doctor	N	
9	Consulting Doctor	N	
10	Hospital Service	N	
11	Temporary Location	N	
12	Preadmit Test Indicator	N	
13	Re-admission Indicator	N	
14	Admit Source	N	
15	Ambulatory Status	N	
16	VIP Indicator	N	
17	Admitting Doctor	N	
18	Patient Type	N	
19	Visit Number	N	11948
20	Financial Class	N	
21	Charge Price Indicator	N	
22	Courtesy Code	N	
23	Credit Rating	N	
24	Contract Code	N	
25	Contract Effective Date	N	
26	Contract Amount	N	
27	Contract Period	N	
28	Interest Code	N	
29	Transfer to Bad Debt Code	N	
30	Transfer to Bad Debt Date	N	
31	Bad Debt Agency Code	N	
32	Bad Debt Transfer Amount	N	
33	Bad Debt Recovery Amount	N	
34	Delete Account Indicator	N	
35	Delete Account Date	N	
36	Discharge Disposition	N	
37	Discharged to Location	N	

38	Diet Type	N	
39	Servicing Facility	N	
40	Bed Status	N	
41	Account Status	N	
42	Pending Location	N	
43	Prior Temporary Location	N	
44	Admit Date/Time (Start of Appointment)	Y	20061114111500
45	Discharge Date (End of Appointment)	Y	20061114114500