

Interoperability Scenarios

Care Theme: Care Administration Efficiency

Act 8- Patient Encounter with Eligibility Verification Scenario Primary Goal: To demonstrate the ability for patients to actively manage their own health information and to pro-actively validate insurance coverage

Key Points:

- Via use of IHE Profiles and HITSP constructs, this Act will demonstrate Patient Eligibility information exchange processes
- The scenario features a patient being able to generate their medical summary from their PHR and share that with their Provider. The Provider administrative staff is able to check the patient's insurance eligibility prior to being treated. After the visit, the provider will provide the updated information from the visit to the patient's PHR
- Patients able to share their data within the PHR with their PCP; PCP can provide updated information into patient's PHR

Meaningful Use Relevance

MU Objective 1: Improving Quality, Safety, Efficiency and Reducing Health Disparities

- Check insurance eligibility electronically from public and private payers
- Submit claims electronically to public and private payers
 - Measure: at least 80% of all claims filed electronically by the EP or eligible hospital

MU Objective 2: Improving Care Coordination

- Ability to exchange clinical key information
- Provide summary care record for each transition of care and referral
 - Measure: Provide summary of care record for at least 80% of transitions of care and referrals.

Clinical Workflow:

A patient updates Personal Health Record information with Insurance details and obtains an appointment with his physician for review of post hip surgery due to pain in the new hip. The PHR already has his updated Medical Summary from the surgery. On the day of appointment, the patient presents with the Medical Summary extracted from his PHR. The front office staff uses the Medical Summary and the associated Insurance details to check for insurance eligibility. On confirmation of coverage, physician continues with care and updates the patient Medical Summary in his EHR. He then extracts the Medical Summary and presents to the patient with an update that can be used by the patient to sync up with his PHR.

Care Scenario Steps	Care Setting From	Care Setting To	IHE Profiles*	Title	HITSP Constructs	Title
8-1: Patient brings previous Medical Summary to the physician's office for review of post hip surgery due to pain in the new hip.	Home	Physician's Office	XPHR (PCC)	Exchange of Personal Health Record Content	HITSP/CAP119 HITSP/C32	Communicate Structured Document Summary Documents Using HL7 Continuity of Care Document (CCD)
8-2: Front office staff checks insurance eligibility	Physician's Office	Health Plan Services			HITSP/CAP140 HITSP/T40 HITSP/T85	Communicate Benefits and Eligibility Patient Generic Health Plan Eligibility Verification Administrative Transport to Health Plan
8-3 Physician treats patient and update Medical Summary for Patient's PHR and sends patient to hospital for x-ray check of new hip placement.	Physician's Office	Home	XPHR (PCC)	Exchange of Personal Health Record Content	HITSP/CAP119 HITSP/C32	Communicate Structured Document Summary Documents Using HL7 Continuity of Care Document (CCD)