



ADT/SIU Message Specifications

This is the Prime Clinical Systems, Inc., ADT/SIU/MFN Messages specifications. We are capable of supplying you the Messages as a file from a folder on the server (Home\Staff\HL7) for pick up by you,

With regards to DFT messages we will designate a folder on the server (Home\Staff\Import) where you can drop the files in, for us to process.

The structure of the Messages:

<u>ADT</u>	<u>SIU</u>	<u>MFN</u>
MSH	MSH	MSH
EVN	SCH	EVN
PID	NTE	STF
PV1	PID	PRA
DG1	PV1	
GT1	DG1	
IN1	GT1	
	IN1	

MSH Segment – Message Header

Seq	Field	Comment	Example
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1	Field Separator	' '	
2	Encoding Characters	'^~\&'	^~\&
3	Sending Application	PCS	PYXISCC
4	Sending Facility		
5	Receiving Applications	PCS	PYXISCC
6	Receiving Facility		PRIME
7	Date & Time	YYYYMMDDHHMM	200210131750
8	Security ST		
9	Message Type	ADT, SIU	A04, A08, S12, S13, S14, S15, S26
10	Message Control ID		
11	Processing ID		
12	Version ID	HL7 version	2.3.1
13	Sequence Number		
14	Continuation Pointer		
15	Accept Ack Type		
16	Application Ack Type		
17	Country Code		
18	Character Set		
19	Principal Language		
20	Alternate Character Set Handling Scheme		
21	Conformance Statement ID		

SCH Segment-Schedule Activity Information

Seq	Field	Comment	Example
1	Appointment Sequence	Numeric	87660
2	Appointment Sequence	Numeric	87660
3	Occurrence Number		
4	Placer Group Number		
5	Schedule ID	Same as Appointment Sequence	87660
6	Event Reason	Hard Coded appointment reason	"Appointment"
7	Appointment Reason	Appointment Description	Office Visit
8	Appointment Type	Appointment Description	Office Visit
9	Appointment Duration	Length of appointment (NM)	15 or 30
10	Appointment Duration Units	Unit of time	M
11	Appointment Timing Quantity	Date and Time of Scheduled appointment. yyymmddhhmmssmsms	^^^2012061510000000
12	Placer Contact Person		
13	Placer Contact Phone Number		
14	Placer Contact Address		
15	Placer Contact Location		
16	Filler Contact Person	User code. Person who made the change to the appointment, can be numeric or alpha. Depends on the practice	81 or AJB
17	Filler Contact Phone Number		
18	Filler Contact Address		
19	Filler Contact Location		
20	Entered By Person	Person creating the appointment	81 or AJB
21	Entered By Phone Number		
22	Entered By Location		

23	Parent Placer Appointment ID		
24	Parent Filler Appointment ID		
25	Filler Status Code	Status of the appointment	Booked, Arrived, Rescheduled, Canceled, Deleted

PID Segment–Patient Identification

Seq	Field	Comment	Example
1	Set ID		
2	Patient ID (External ID)	Medical record/Chart number from EMR	2448
3	Account Number	Account number with PM software	2419859
4	Alternate Patient ID		
5	Patient's Name	First^MI^Last	John^ L^Doe
6	Mother Maiden Name		
7	Date of Birth	YYYYMMDD	19700604
8	Sex	'M'-'F'	M
9	Patient Alias		
10	Race	Race Code	1760-8
11	Patient Address	# Street^City^state^Zip	123 easy St.^Pasadena^CA^91107
12	Cell/Mobile phone #		(222)222-2222
13	Phone number – home	Full	(222) 222-2222
14	Phone number – business		
15	Language – Patient	Patient's Primary Language	English
16	Marital Status		Self, Married, Divorced, Widow
17	Religion		
18	Patient Account Number		
19	SSN Number – Patient	Regular Format	111-11-1111
20	Driver's License-Patient		
21	Mothers Identifier		
22	Ethnic Group	Ethnicity Code	2170-9
23	Birth Place		
24	Multiple Birth Indicator		
25	Birth Order		
26	Citizenship		
27	Veteran's military Status		
28	Nationality		
29	Patient Death date/time		
30	Patient Death indicator		
31	Identity Unknown Indicator		
32	Identity Reliability Code		
33	Last Update Date/Time		
34	Last Update Facility		
35	Species Code		
36	Breed Code		
37	Strain		
38	Production Class Code		

PV1 Segment- Patient Visit

Seq	Field	Comment	Example
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1	Set ID – PV1		
2	Patient Class	Outpatient	0
3	Assigned Patient Location		
4	Admission Type		
5	Pre-Admit Number		
6	Prior Patient Location		
7	Appointment Doctor Note. This is ONLY populated when message is created from the appointment (SIU)	Code^Last^First^Middle^address^City^State^Zip	00138^Sainani^Tyvek^M^123 easy St.^Pasadena^CA^91107
8	Referring Doctor. This information is from the patient's registration screen.	Code^Last^First^Middle^address^City^State^Zip	00138^Sainani^Tyvek^M^123 easy St.^Pasadena^CA^91107
9	Hospital Server		
10	Temporary Location		
11	Pre-Admit test indicator		
12	Re-Admission Indicator		
13	Admit Source		
14	Ambulatory Status		
15	VIP Indicators		
16	Admitting Doctors		
17	Patient Type		
18	Visit Number		
19	Financial Class		
20	Charge Price Indicator		
21	Courtesy Code		
22	Credit Rating		
23	Contract Code		
24	Contract Affective Date		
25	Contract Amount		
26	Contract Period		
27	Interest Code		
28	Transfer to Bad Debt Code		
29	Transfer to Bad Debt Date		
30	Bad debt Agency Code		
31	Bad Debt Transfer Amount		
32	Bad Debt Recovery Amount		
33	Bad Debt Recovery Amount		
34	Delete Account Indicator		
35	Delete Account Date		
36	Discharge Disposition		
37	Discharged to Location		
38	Diet Type		
39	Servicing Facility		
40	Bed Status		
41	Account Status		
42	Pending Location		
43	Prior Temporary Location		
44	Admit Date/Time		
45	Discharge Date/Time		
46	Current Patient Balance		
47	Total Charges		
48	Total Adjustments		
49	Total Payments		
50	Alternate Visit ID		
51	Visit Indicator		
52	Other Healthcare Provider		

IN1 Segment

Seq	Field	Comment	Example
1	SET ID		
2	Insurance Plan ID		
3	Insurance Company ID		
4	Insurance Company Name		
5	Insurance Company Address		
6	Insurance Co. Contact Person		
7	Insurance Co Phone Number		
8	Group Number		
9	Group Name		
10	Insured's Group Emp Name		
11	Insured's Group Emp ID		
12	Plan Effective Date		
13	Plan Expiration Date		
14	Authorization Information		
15	Plan Type		
16	Name of Insured	Insured's Name	
17	Insured's Relationship to Patient	Self,Child,Spouse, Other	
18	Insured's Date of Birth	Insured's DOB	
19	Insured's Address	Insured's Address	
20	Assignment of Benefits		
21	Coordination of Benefits		
22	Coord. of Ben. Priority		
23	Notice of Admission Flag		
24	Notice Of Admission Date		
25	Report Of Eligibility Flag		
26	Report Of Eligibility Date		
27	Release Information Code		
28	Pre-Admit Cert (PAC)		
29	Verification Date/Time		
30	Verification By		
31	Type Of Agreement Code		
32	Billing Status		
33	Lifetime Reserve Days		
34	Delay Before L.R. Day		
35	Company Plan Code		
36	Social Security Number		
37	Policy Deductible		
38	Policy Limit - Amount		
39	Policy Limit - Days		
40	Room Rate - Semi-Private		
41	Room Rate - Private		
42	Insured's Employment Status		
43	Insured's Administrative Sex		
44	Insured's Employer's Address		

45	Verification Status		
46	Prior Insurance Plan ID		
47	Coverage Type		
48	Home Phone		
49	Cell Phone		

DG1

Seq	Field	Comment	Example
1	SET ID		
2	Diagnosis coding method		ICD9
3	Diagnosis code		7840^296.23^7820^PS_BRA
4	Diagnosis description	Diagnosis from the last visit	HEADACHE VASCULAR
5	Diagnosis date/time		
6	Diagnosis/DRG type		
7	Major diagnostic category		
8	Diagnosis related group (DRG)		
9	DRG approval indicator		
10	DRG grouper review code		
11	Outlier type		
12	Outlier days		
13	Outlier cost		
14	Grouper version and type		
15	Diagnosis Priority		
16	Diagnosing Clinician		
17	Diagnosis Classification		
18	Confidential Indicator		
19	Attestation Date/Time		

GT1

Seq	Field	Comment	Example
1	Set ID		
2	Guarantor Number	Same as Account Number	92
3	Guarantor Name	<family name (ST)> ^ <given name (ST)> ^ <middle initial or	Jones^Tom^H
4	Guarantor Spouse Name	Not used.	
5	Guarantor Address	<street address (ST)> ^^ <city (ST)> ^ <state or province (ST)> ^ <zip or postal code(ST)>	123 Easy St.^Pasadena^CA^91107
6	Guarantor Ph Num-	(xxx) xxx-xxxx	(626) 555-1212
7	Guarantor Ph Num-Business	Not used.	
8	Guarantor Date	yyyymmdd	20080118
9	Guarantor Sex	Male, Female	F
10	Guarantor Type	Not used.	
11	Guarantor Relationship	Not used.	
12	Guarantor SSN	xxx-xx-xxxx	
13	Guarantor Date - Begin	Not used.	
14	Guarantor Date - End	Not used.	

15	Guarantor Priority	Not used.	
16	Guarantor Employer	Not used.	
17	Guarantor Employer	Not used.	
18	Guarantor Employer	Not used.	
19	Guarantor Employee ID	Not used.	
20	Guarantor Employment	Not used.	
21	Guarantor Organization	Not used.	
22	Guarantor Billing Hold	Not used.	
23	Guarantor Credit Rating	Not used.	
24	Guarantor Death Date	Not used.	
25	Guarantor Death Flag	Not used.	
26	Guarantor Charge	Not used.	
27	Guarantor Household	Not used.	
28	Guarantor Household	Not used.	
29	Guarantor Employer ID	Not used.	
30	Guarantor Marital Status	Not used.	
31	Guarantor Hire Effective	Not used.	
32	Employment Stop Date	Not used.	
33	Living Dependency	Not used.	
34	Ambulatory Status	Not used.	
35	Citizenship	Not used.	
36	Primary Language	Primary language spoken	Spanish
37	Living Arrangement	Not used.	
38	Publicity Code	Not used.	
39	Protection Indicator	Not used.	
40	Student Indicator	Not used.	
41	Religion	Not used.	
42	Mother's Maiden Name	Not used.	
43	Nationality	Not used.	
44	Ethnic Group	Ethnicity Code	2170-9
45	Contact Person's Name	Contact selected by patient	
46	Contact Person's Telephone Number	(xxx) xxx-xxxx	(213) 555-1212
47	Contact Reason	Not used.	
48	Contact Relationship	Not used.	
49	Job Title	Not used.	
50	Job Code/Class	Not used.	
51	Guarantor Employer's	Not used.	
52	Handicap	Not used.	
53	Job Status	Not used.	
54	Guarantor Financial	Not used.	
55	Guarantor Race	Race Code	1760-8

EVN

Seq	Field	Comment	Example
1	Event Type Code	Message Type	A04

2	Date/Time of Event	yyymmddhhmm	200706150000
3	Date/Time Planned Event	Not used.	
4	Event Reason Code	Not used.	
5	Operator ID	Not used.	
6	Event Occurred	Not used.	
7	Event Facility	Not used.	

STF

Seq	Field	Comment	Example
1	Set ID		
2	Staff ID Code	Ref. Phy. Prctc. Code	
3	Staff Name	Ref. Phy. Name	Last^First^Middle
4	Staff Type		
5	Sex		
6	Date Of Birth		
7	Active/Inactive		
8	Department		
9	Service		
10	Phone	Phone^Fax	(222)222-2222^(222)-222-2233
11	Office/Home Address	Office Address	Street^City^State^Zip
12	Inactivation Date		
13	Inactivation Date		
14	Backup Person ID		
15	E-Mail Address		
16	Preferred Phone		

PRA

Seq	Field	Comment	Example
1	Set ID		
2	Practitioner Group	Physican Code	
3	Practitioner Category		
4	Provider Billing	Physician NPI #	
5	Specialty		
6	Practitioner Id Num	UPIN	
7	Privileges		

Financial Billing Message (DFT)

These are the specifications for the Financial Billing Messages that we expect.

Sequence for each segment start from zero.

Seq in brackets [] means this is the default seq and by using IMPORT_HL7 table user can set the system to read this data from a different seq in that segment.

Having these in mind, the following are segments that we import:

Segment	Seq	Data
MSH	5	clinicName

Segment	Seq	Data
PID	[2]	Account
PID	5	Patient's Name (LastName^FirstName)
PID	6	Date Of Birth (YYYYMMDD)
PID	7	Gender
PID	11	Address (add1^add2^city^state^zip)
PID	13	Phone ((999)999-9999) We do not accept name in this field
PID	16	Marital Status
PID	19	Social Security Number

Account# 0 (Zero) means new patient. If there isn't any patient with the same name, DOB and SSN, System will import the patient's information and assign an account# to the patient but if there is an existing patient with the same information system will use that patient's account #.

If Account# is not zero then patient information should match the information that exists in the system. If last name, DOB or SSN (if provided in file) are different then system will not be able to import any information for that patient.

Segment	Seq	Data
PD1	4	Patient Primary Care Provider ID Number
NK1	2	Emergency Contact Name
NK1	5	Emergency Contact Phone#
PV1	[8]	Referring Doctor (Code^LastName^FirstName) Note: The Codes of the EMR need to be mapped to the Referring Doctor codes of Intellect PM system.
GT1	3	Guarantor Name
GT1	5	Guarantor Address
GT1	6	Guarantor Phone
GT1	7	Guarantor Phone-Work
GT1	8	Guarantor DOB

GT1	9	Guarantor Gender
GT1	12	Guarantor SSN
GT1	17	Guarantor Employer Address
GT1	30	Guarantor Marital Status
GT1	51	Guarantor Employer Name

Segment	Seq	Data
IN1	[3]	Insurance Company ID
IN1	4	Insurance Company Name
IN1	5	Insurance Company Address
IN1	8	Group Number
IN1	12	Coverage From
IN1	13	Coverage To
IN1	16	Insured Name
IN1	17	Insured's Relationship To Patient
IN1	18	Insured's DOB
IN1	19	Insured's Address
IN1	36	Policy Number
IN1	43	Insured's Gender
FT1	3	Transaction ID (same as SCH.5)
FT1	4	Date Of Service (yyyymmdd)
FT1	6	Transaction type. Values: CG for Charge, PY for Payment, AJ for Adjustment
FT1	[7]	Transaction Code / Panel Code, Source of Payment or Adjustment
FT1	9	Transaction Alternate description (Remark) \
		Note: The Codes of the EMR need to be mapped to the Procedure codes of Intellect PM system.
FT1	10	Quantity
FT1	11	Transaction Amount
FT1	15	Approved amount
FT1	[16]	Facility Info(PlaceOfService^^FacilityCode^^FacilityName)
		Note: The Codes of the EMR need to be mapped to the Facility codes of Intellect PM system.
FT1	17	To put a charge on hold set this field to Y if not leave it blank.
FT1	[19]	Diagnosis
		Note: The Codes of the EMR need to be mapped to the Diagnosis codes of Intellect PM system.
FT1	[20]	Provider Code
		Note: The Codes of the EMR need to be mapped to the Provider codes of Intellect PM system.
FT1	22	Cost
FT1	26	Modifier
		(Invalid modifiers will be rejected)

NOTE:

For any reason if the charges do not get posted there will be an email sent to the email address that is entered in the Utility -> Setup -> Clinic -> Notification E-mail field.

The following must be configured in the Utility -> Tools -> Configuratin -> screen for the E-mail to work:

SMTP SERVER
SMTP PORT
SMTP SSL
SMTP AUTENTICATION
USER NAME
PASSWORD