

IHE Development Cycle 2018

Proposal for US National Extension to
ITI PAM Profile:
Patient Registration

Problems

- **Data/Record Quality**
 - Inconsistent data capture at registration, redundant information
 - Lack of patient and provider identification or contact information
 - Insufficient and inaccurate information to support other functions in the episode of care
 - Lack of clinical documentation
- **Information Access**
 - Inability to get information about the unknown patient
 - Lack of information access from various sources to support patient registration
 - Redundant information restricts access to critically needed clinical information

ECRI. Recommendations for Health IT Patient Safety. Webinar: July 19th Quarterly Conference Call of the Partnership for Health IT Patient Safety 2016.

Kuhn T. et al. Clinical Documentation in the 21st Century. An Executive Summary of a Position Paper from The American College of Physicians. Annals of Internal Medicine. 2015. 162(4): 301-314. URL: <http://annals.org/aim/article/2089368/clinical-documentation-21st-century-executive-summary-policy-position-paper-from>

AHIMA collaborated with IHE
to publish PCC White Paper

Patient Registration

***Demographics for Data
Capture & Exchange.***

September 28, 2017

[http://ihe.net/uploadedFiles/Documents/PCC/IHE_P
CC_WP_PtDemographic-PR_Rev2.1_2017-09-27.pdf](http://ihe.net/uploadedFiles/Documents/PCC/IHE_PCC_WP_PtDemographic-PR_Rev2.1_2017-09-27.pdf)

Integrating the Healthcare Enterprise



**IHE Patient Care Coordination (PCC)
White Paper**

**Patient Registration Demographics Data Capture
and Exchange**

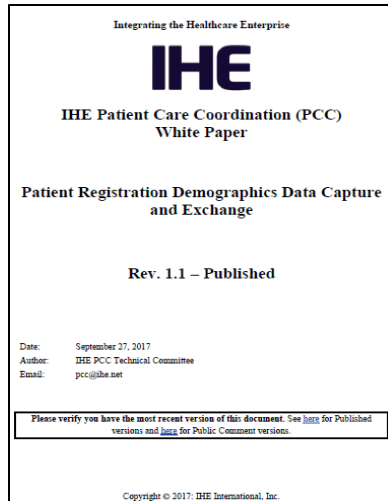
Rev. 1.1 – Published

Date: September 27, 2017
Author: IHE PCC Technical Committee
Email: pcc@ihe.net

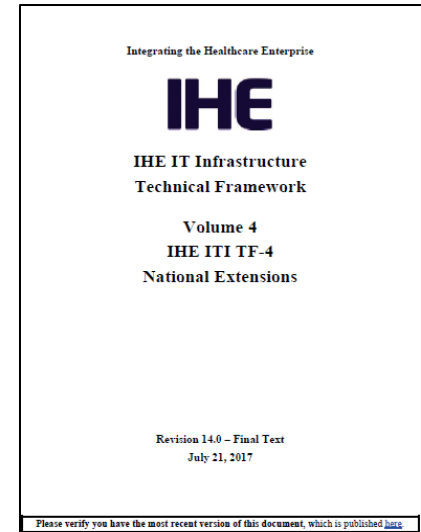
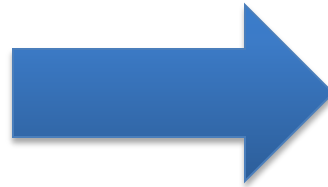
Please verify you have the most recent version of this document. See [here](#) for Published versions and [here](#) for Public Comment versions.

Copyright © 2017: IHE International, Inc.

US National Extension: PAM Patient Registration



2018



AHIMA-IHE White Paper
***Patient Registration
Demographics for Data Capture
& Exchange. 2017***

http://ihe.net/uploadedFiles/Documents/PCC/IHE_PCC_WP_PtDemographic-PR_Rev2.1_2017-09-27.pdf

AHIMA-IHE Integration Profile
***Patient Administration
Management. US National
Extension. 2018***

https://www.ihe.net/uploadedFiles/Documents/ITI/IHE_ITI_TF_Vol4.pdf

US National Extension: PAM Patient Registration

We propose to re-evaluate the relevant HL7[®] v2.5.1 segments from the IHE ITI PAM Profile for patient registration with the subject matter experts from the AHIMA Standards Task Force and develop the US national extension constraints on these segments as needed.

The ITI PAM US national extension will provide healthcare organizations with the data requirements to use in their RFP process for purchasing HIT products.

Target Audience

- HIT products vendors involved in patient registration data capture and sharing including
 - Electronic Health Record (EHR) systems and
 - Ancillary systems vendors involved
- Healthcare organizations that purchase the HIT products for patient registration.

AHIMA Patient Registration Use Case

Standardized Data and Document Templates:

- Patient Registration Information
 - Patient, Visit, Physician Demographics
 - Reason for visit
 - Consents (visit, information sharing)
- Insurance information
- Payment information
- Notification of Record Availability
- Acknowledgement of Receipt
- Audit Record: Who, When, Why, What

AHIMA Patient Registration Use Case

Workflow & Dataflow: *Vendor View*



Figure X.1-1: Patient Registration Actor Diagram

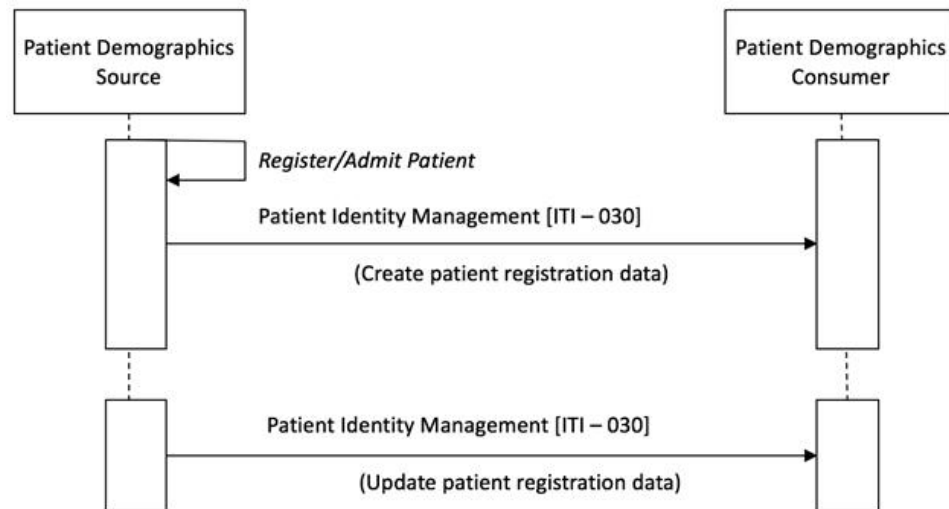
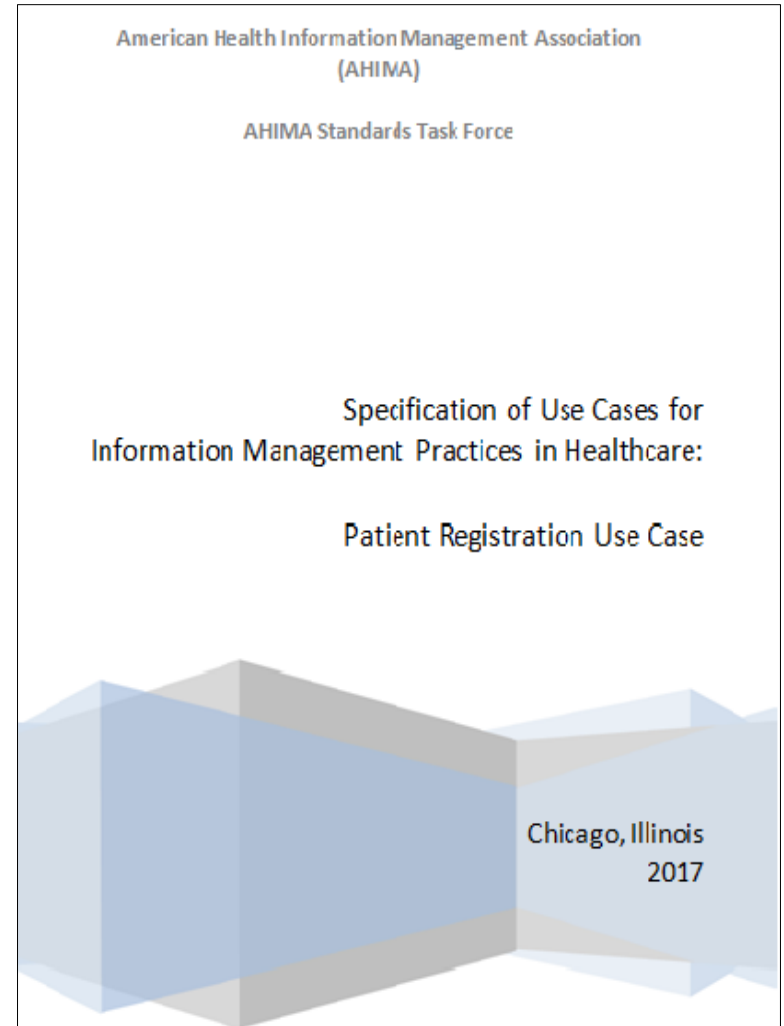


Figure 2.2.2-1: Basic Process Flow in Patient Registration Use Case

Additional Information

The IHE PCC White Paper is based on the ***AHIMA Patient Registration Use Case*** (to be published in December 2017)



AHIMA Patient Registration Use Case

Use Case Description

Use Case Name: Registration of Walk-in/Patient Presentation in ED		
Actors	Business Actors: Patient (or patient's legal representative), ED Registration staff, Billing staff (Insurance verifier registrar), Payer, Clinician	
	Technical Actors: Registration-Admission/Discharge/Transfer (R-ADT) System, Health Information System (HIS), Financial System, Payor System, Electronic Health Record (EHR) system, Electronic Document Management System (EDMS), Health Information Exchange (HIE), Personal Health Record (PHR), Mobile Health Application (mHealth App).	
Step #	Workflow Steps	Information Items (Documents/Records/Data)
1.	Patient is triaged and presents to ED registration staff.	<u>1. Patient Name</u> <u>2. DOB</u> <u>3. Reason for visit</u> <u>4. Consent for treatment (can be implied)</u> <u>5. Advanced Beneficiary Notice (ABN)</u>
2	Patient presents to the Registration staff.	<u>Patient Registration Record</u>
3	Registration staff identifies patient, asks patient to complete necessary forms (paper or electronic), and checks in/registers the visit in R-ADT System. In the case of "trauma/unidentified patient", registration staff assigns a tag with the ID number to be used in the episode of care.	1. Patient demographics (e.g., name, DOB, address) 2. Visit demographics (e.g., enterprise medical record number, date/time of encounter, reason for visit, list of barcodes, etc.), 3. Physician demographics (name, PID, department/service)
4	HIS creates an audit record of the encounter.	4. Reason for visit
5	R-ADT System searches and obtains patient and visit-relevant information from various systems (HIS, EHR, Financial Systems, EDMS, HIE, PHR, mHealth app).	5. Consents for visit (procedure, treatment, etc., may be implied consent)
6	Registration staff validates patient information, prints ID bracelet and corresponding labels with barcodes for the patient, and staff signs the record with e-signature or in ink. Registration staff sends patient to Insurance verifier or conduct insurance verification.	6. Consent for information sharing 7. eSignature for Registration Staff 8. Wristband (patient ID bracelet) <u>Risk Management (RM)/Infection Control (IC)/ Public Health/ Population Health (PH) information</u> <u>Audit Record: Who, When, Why, What</u>
7	Insurance verification is conducted by the Registration staff or Insurance Verifier.	<u>Insurance information:</u> 1. Payor demographic 2. Insurance ID
8	Registration staff or Insurance Verifier verifies patient insurance information; contacts payor, if needed; obtains authorization; and requests/collects co-pay or	3. Authorization to bill insurance 4. Coverage

AHIMA Patient Registration Use Case

Scenarios - Emergency Department Visit

- Registration of walk-in/patient presentation in ED
- Registration initiated/conducted by clinicians for life threatening situations
- Registration for diagnostic testing during ED stay
- Registration for medication administration
- Registration for pre-admission of patients into the hospital
- Sending visit information for follow-up care

AHIMA Patient Registration Use Case

Scenarios - In-patient Setting Visit (Hospital)

- Registration for planned admission
- Registration for unplanned admission
- Registration for diagnostic testing during hospital stay
- Registration for medication administration
- Registration for treatment during hospital stay
- Registration/Scheduling for post-acute care follow-up

AHIMA Patient Registration Use Case

Scenarios - Out-patient Setting Visit

- Registration for walk-in/patient presentation
- Registration/Scheduling for planned visit
- Registration/Scheduling for diagnostic testing (during the visit, and after the visit)
- Registration/Scheduling for treatment including observation services (during the visit, and after the visit)
- Registration for medication administration
- Registration for post-visit follow-up

A total of 17 scenarios!

AHIMA Patient Registration Use Case

Workflow & Dataflow: *User View*

