Encounter Notification Summary Use Case

Version	Approval Date	Owner
1.2	July 18, 2017	Pam Clarke

1. Purpose

The Encounter Notification Summary (ENS) is designed to provide a list of real-time patient encounters to participants via Direct Secure Messaging (DSM). When patients are admitted, discharged, or transferred (ADT) from a hospital, HSX will receive ADT messages from HSX data providers. HSX will generate a real-time encounter notification summary alerting participants on a subscription basis about an admission or discharge for their patients or members. Based on national experiences, participants typically do not know in a timely manner when their patients or members are admitted to or discharged from the hospital. The encounter notification summary will alert the primary care practices or care coordinators of health plans who serve the patients in such time that they can more effectively initiate care management services and facilitate follow-up care. The objective is to improve discharge planning and care coordination on behalf of targeted patients who receive inpatient and emergency department (ED) services.

2. Scope

The ENS service is provided by HSX for all participants who choose to subscribe to the service. To take advantage of the service, HSX participants, namely primary care providers, agents of primary care providers and care managers who work for HSX participating payers, subscribe to the service on a monthly basis. The notifications would be limited to ADT information about patients who receive treatment as an inpatient or at a hospital emergency department. A participant can use ENS to facilitate care coordination on behalf of inpatient hospitalization, emergency department visit, or to support a public purpose, which is required by law to report on patient health status.

Note: Any services for which a patient chooses to self-pay would not be available to a health plan via the encounter notification service.

3. Policy

- The services permitted purpose is treatment or quality assessment and improved activities, including care coordination defined in HIPAA as treatment or a subset of the healthcare operations activities.
- Participants must provide notice to patients or members with a description of their participation in the service prior to receiving any notifications.
- Participant subscription to a patient panel must follow the Active Patient or Active Member definition.
- On a subscription basis, a participant of the ENS service will receive a summary report for subscribed active patients or active members to include the following items:
    - Patient Demographics including phone number
    - Hospital Name and Medical Record Number
    - Encounter Date and Time
    - Encounter Type: Emergency Admit or Discharge, Inpatient Admit or Discharge
    - Practice MRN
    - Primary Care Provider Name: Provided by Practice, Payer, or Hospital
    - Specific Practice Site if Provided by Practice
    - Admit or Discharge information from data providers
    - ADT Message Segments include Admit Reason, Death Indicator, Diagnosis Code, Diagnosis Description, Discharge Disposition, Discharge to Location, and Insurance Information

- The alerts that are provided to ENS participants would be limited to the following trigger events: Emergency Department Admission; Emergency Department Discharge; Inpatient Admission; Inpatient Discharge.

- The participant receiving the ENS would act on behalf of the active patient or active member to provide care coordination as needed or to support a public purpose, which is required by law to report on patient health status.

- This policy would be applied for all patients served by HSX participants. There is no patient opt-out option for this service with the exception of as provided by law.

4. Procedures

- Prior to initiating the ENS service an HSX participating payer would need to notify its members that they would be subscribing to the service on behalf of the members. Likewise, prior to initiating the ENS service HSX participating providers/participants would need to notify the patients they serve that they would be subscribing to the service on behalf of them to enhance care coordination and treatment. This can be accomplished by updating the Notice of Privacy Practices that the participant is utilizing HSX services.

- The ENS service will begin with a participant subscribing to the service. The subscription process includes providing a list of Active Patients or Active Members for whom they would like to receive notifications. The subscription request would have to indicate the trigger events for the alerts and the frequency and method of the alerts.

- After the initial subscription, the participant will submit an updated subscription to HSX on a monthly basis to ensure that the subscription panel is current and accurate and that the frequency and method of alerting is adequate.

- Participants may subscribe for alerts on the following basis:
  - In Real Time
    - As Individual Emails via Direct
  - Once a Day
    - As Individual Emails via Direct
    - As a Summary via Direct
  - Twice a Day
    - As Individual Emails via Direct
    - As a Summary via Direct

- Once the subscription has been established by a participant, HSX will deploy the service as follows:

  - Admit discharge transfer (ADT) HL7 hospital messages would trigger ENS
  - HSX would correlate episodes of care from the ADT data feeds
  - HSX would check to see if any there are any Active Patients or Active Members included in the subscription panel
  - ENS would be organized per provider subscription
  - Delivery of the ENS via DIRECT

- Upon receipt of the ENS, the participant will be responsible for verifying that the alerts received were for current patients or members. If a participant discovers that a patient or member is not current, the participant must destroy the alert for that particular patient or member and remove the patient or member from the next subscription to HSX.

- When participants begin treatment or care management of new patients, they need to notify them of their participation in the ENS service. When a payer participant enrolls new members, the payer needs to notify the member of participation in the ENS service.

Monthly Patient Panel Subscription Update Requirements

Updated Within One (1) Month: Compliant Patient Panel Subscription

- At a minimum, the subscribing organizations are required to submit an "Accepted Panel" to HSX once a month.
- Organizations that are subject to Weekly Delta Patient Panel Subscriptions Requirements include the following:
  - Provider Organizations
  - Accountable Care Organizations (ACO)

One (1) Month Update Late or At Risk Subscription

- The organization's ENS Patient Roster Point of Contact (POC) will be notified when an accepted panel is older than a Month or missed a scheduled upload date and requested to provide an updated panel

Two (2) Months Delinquent Subscription

- Escalated to HSX leadership and another notice that the organization has become delinquent will be sent to the organization's escalation POC or ENS Patient Roster POC.
- The organization will have One (1) Month to upload a successful panel before ENS service is evaluated for deactivation.

Three (3) Months Deactivated Subscription

- If an organization's panel is Three (3) Months from the last upload date, HSX leadership team will be notified to determine next steps. Next steps will be presented and discussed at the weekly HSX Business meeting.
  - If next steps are determined that organizations subscription is to be deactivated and pending notification from HSX Leadership. Then the HSX Staff will deactivate subscription.

> o To reactivate the subscription the organization must update their patient panel successfully and must have HSX Leaderships approve the reactivation.

Weekly Delta Patient Panel Subscriptions Update Requirements

Updated Within One (1) Week: Compliant Patient Panel Subscription

- At a minimum, the subscribing organizations are required to submit an "Accepted Panel" to HSX once a week.
- Organizations that are subject to Weekly Delta Patient Panel Subscriptions Requirements include the following:
    - o Organizations that have patient panels that are moderately dynamic.
- Organizations under this subscription model, must submit additions, deletions, and changes to HSX weekly.
- Organizations must send a full patient panel to HSX every six (6) months for a panel refresh

One (1) Missed Weekly Patient Panels

- The organization's ENS Patient Roster POC will be notified when a scheduled upload is missed.

Two (2) Missed Weekly Patient Panels

- Escalated to HSX leadership and another notice that the organization has become delinquent will be sent to the organization's escalation POC or ENS Patient Roster POC
- The organization will have One (1) week to upload a successful panel before ENS service is evaluated for deactivation.

Four (4) Missed Weekly Patient Panels

- If the organization misses four (4) or more weekly panels in each six (6) month refresh period, the organization must submit a full panel immediate to avoid subscription from becoming delinquent. HSX leadership team will be notified to determine next steps. Next steps will be presented and discussed at the weekly HSX Business meeting.
    - o If next steps are determined that the organization's subscription is to be deactivated and pending notification from HSX Leadership. Then the HSX Staff will deactivate subscription.
    - o To reactivate the subscription the organization must update their patient panel successfully and must have HSX leaderships approve the reactivation

Daily Delta Patient Panel Subscriptions Update Requirements

Updated Within One (1) Week: Compliant Patient Panel Subscription

- At a minimum, the subscribing Organizations are required to submit an "Accepted Panel" to HSX once a day.
- Organizations that are subject to Daily Delta Patient Panel Subscriptions Requirements include the following:
  o Health Plans
  o Organizations that have patient panels that are more highly dynamic.
- Organizations under this subscription model, must submit add, delete, and changes to HSX daily.
- Organizations must send a full patient panel to HSX every six (6) months for a panel refresh

One (1) Missed Daily Patient Panels

- The organizations' ENS Patient Roster POC will be notified when a scheduled upload is missed.

Three (3) Missed Daily Patient Panels

- Escalated to HSX leadership and another notice that the organization has become delinquent will be sent to the organization's escalation POC or ENS Patient Roster POC.
- The organization will have one (1) Day to upload a successful panel before ENS service is evaluated for deactivation.

Five (5) Missed Daily Patient Panels

- If the payer misses five (5) or more daily panels in each six (6) month refresh period, the organization must submit a full panel immediately to avoid subscription from becoming delinquent. HSX leadership team will be notified to determine next steps. Next steps will be presented and discussed at the weekly HSX Business meeting.
  o If next steps are determined that organization's subscription is to be deactivated and pending notification from HSX Leadership. Then the HSX Staff will deactivate subscription.
  o To reactivate the subscription the organization must update their patient panel successfully and must have HSX leaderships approve the reactivation

Auto Subscribed Patient Panels

- There is no requirement to submit patient panels to HSX as they are updated dynamically based on Admission, Transfer, and Discharge HL7 messages. Patients are automatically removed after the agreed upon number of days they are on the panel.

5. Enforcement

Each participant will be responsible for ensuring that their respective physicians, care managers and other staff who would receive ENS from HSX are informed of the HSX policy and are bound to following it. HSX would conduct audits of the ENS function.

Participants' failure to adhere to HSX's applicable policies will subject them to corrective actions that may include but not be limited to: re-education, training, and suspension of service until participant is able to comply with the policy.

6. Definitions

For a complete list of definitions, refer to the *Glossary*.

7. References

Policy Owner	Privacy Officer	Contact	pam.clarke@hsxsepa.org
Approved By	Clinical Advisory Committee Board	Approval Date	July 18, 2017
Date Policy In Effect	April 1, 2015	Version #	1.2
Original Issue Date	October 2, 2014	Last Review Date	July 18, 2017
Related Documents	Discharge Information Use Case Policy Direct Secure Messaging Data Policy Encounter Notification Use Case Policy Glossary Policy Administration Policy Transmission Encryption Policy		