

Clinical Activity History Use Case

Version	Approval Date	Owner
1.0	May 22, 2015	Pam Clarke

1. Purpose

The Clinical Activity History use case was developed to enhance the clinical history gathering process for providers and patients. The clinical activity history service allows providers to make a request to HSX for a patient activity history. This can occur upon an ER visit, office visit, or in-patient admission to a facility. This use case leverages the national Direct Project standard for secure health information exchange and data from HSX member health plans. Thus, patients and providers benefit from this health information exchange. This use case was vetted with HSX's Clinical Advisory Committee and Technology Standards Committee. The committees provided input regarding the specifications of the data provided in the clinical activity history.

By obtaining a clinical history from a patient's insurer, the time it takes a provider to obtain and document a history will be reduced. Access to information will be improved which is likely to result in better, targeted treatment. Ultimately this improved quality of information can have a positive impact on outcomes through a reduction in duplicate or unnecessary admissions, tests, medications, and therapies, and a reduction in the length of stay for a patient. There is an expected improvement in patient satisfaction as a result.

2. Scope

The Clinical Activity History will be initially deployed in the hospital emergency departments. The use case can be expanded for use for patients being admitted to a facility, receiving specialist care and/or by a primary care provider.

This use case is only applicable to patients whose insurance company participates with HSX or for whom HSX has information. This use case would be available to Members and Participants that utilize Direct Secure Messaging.

Out of scope:

- Accessing data from other sources, such as Surescripts and other national networks.

- Medication data from regional or local network sources for example Pharmacies.
- Medication data from the patient's Personal Health Record, which may include herbal supplements and over-the-counter drugs.
- Cases when a patient decides to self-pay for treatment.
- Claims records for behavioral health services including mental health treatment, drug and alcohol services and treatment for HIV/AIDs.

3. Policy

In this use case, health care facilities and providers need to have Admission Discharge Transfer (ADT) data feeds and Direct messaging capabilities. HSX will use the ADT feed insurance segment to communicate with the patient's insurer to prompt the health plan to generate the requested clinical activity history. HSX may also receive this request via direct message.

The Clinical Activity History summary would include the following data about visits, admissions, provider, date(s), medication, and visit type -ER, inpatient, and office or clinical visit. Clinical summary history data would be based on the most current claims information available and converted into a clinical history.

Specifically, medication data, which draws from the health plan pharmacy benefits management system offers a real-time or close to real-time list of dispensed medications. Dispensed medication information includes: name (brand, generic), strength, supply, and date dispensed.

The use of the information contained in the ADT feeds would be restricted to the purpose of enabling this use case.

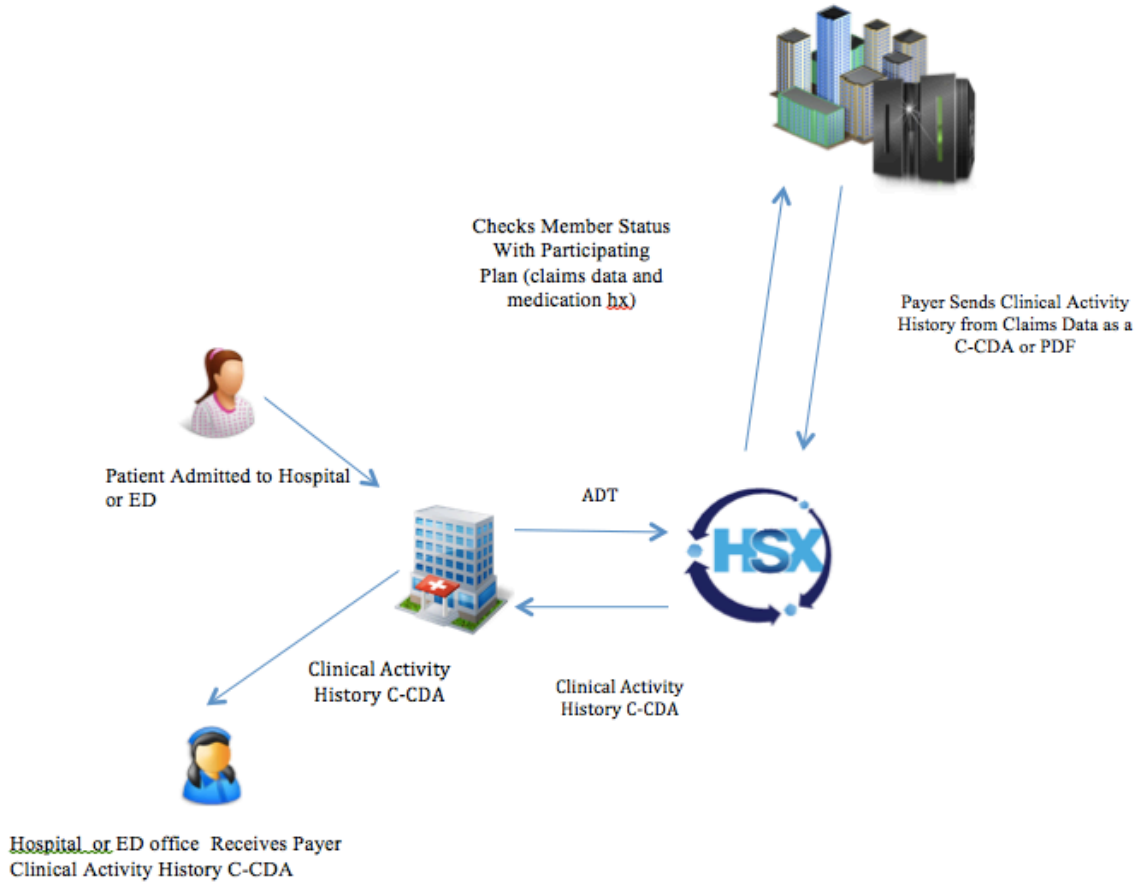
4. Procedures

- Various types of events will trigger the request for the patient's Clinical Activity History. These events could include, but are not limited to, a patient in the emergency department, in a hospital for admission, at a long-term care facility or a provider's office.
- The requestor would send a Direct message to HSX when a patient presents for treatment.
- After this trigger occurs, HSX would receive the request and relay the message to the patient's insurer, which in turn, would take the request and



generate a clinical history in the C-CDA Format. This document would then be sent, via Direct message, back to the requesting facility or provider.

- Initially, the scope would be for patients currently enrolled in a health plan or clinical information available through HSX. The record would be accessed through use of the patient's health plan ID as part of the routine eligibility verification transaction conducted between the provider and the health plan. This transaction would trigger action on the part of the health plan to retrieve information from its Pharmacy Benefit Management partners and claims databases regarding this patient.
- Following the internal information retrieval process, the health plan would then push the available patient Clinical Activity History summary and encounter activity information to the provider, which initiated the interaction.
- The preferred content for the exchange is the HL7 C-CDA. However, the health plan might initially utilize a pdf-formatted document until a C-CDA format is supported.
- This content is to be delivered to the provider as an attachment to a secure email or as a direct input to the provider's EHR as per the options described in the Direct specifications.
- The health plan is responsible for ensuring that the nature of the clinical information contained in the Clinical Activity History is in compliance with the state and federal legal requirements for health information exchange. Any super-protected data needs to be handled in a legally responsible manner.
- HSX routes the Clinical Activity History to the requestor.



5. Enforcement

This policy is consistent with the Meaningful Use (MU) stage 1 and stage 2 requirements per HITECH.

HSX Senior Managers are responsible for monitoring the implementation of the use case in accordance with the policy under the direction of the Executive Director.

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	Technical Standards Committee Board	Approval Date	May 22, 2015
Date Policy In Effect	April 15, 2015	Version #	1.0
Original Issue Date	April 10, 2015	Last Review Date	December 22, 2016
Related Documents	Discharge Information Use Case Policy Direct Secure Messaging Data Policy Encounter Notification Use Case Policy Glossary Transmission Encryption Policy		