# ADT Segments (HL7 Data Transmission Guide - Appendix B)

# BHS Batch Header Segment

HL7 Standard Version **2.4** Version Document Number 6.0

Seq	Com	Len	DT Rep	Element Name	Sup	Description	Lookup
1	1	1	ST	Batch Field Separator	Yes	The character representing the separator between Segment ID a the first real field (BHS-2). Serves as the separator and defines the character to be used as a separator for the rest of the message. Recommended value is   (ASCII 124).	nd
2	1	3	ST	Batch Encoding Characters	Yes	Four characters in the following order: component separator, repetition separator, escape character and subcomponent separator. Recommended values are ^~\& (ASCII 94, 126, 92 a 38, respectively).	nd
3	1	15	ST	Batch Sending Application	Yes	Uniquely identifies the sending application. For RPMS sites, the value will be "RPMS"; for non-RPMS site, it will be the name of thapplication.	е
4	1	20	ST	Batch Sending Facility	Yes	Contains the address of one of several occurrences of the same application within the sending system.	
5	1	15	ST	Batch Receiving Application	Yes	Uniquely identifies the receiving applications among all other applications. This will be "DW1." $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$	
6	1	20	ST	Batch Receiving Facility	Yes	Identifies the receiving application among multiple instances of tapplication running on behalf of different organizations. Constantal value is "IHS."	
7	1	26	TS	Batch Creation Date/Time	Yes	Date export was run. Format CCYYMMDD. If the export runs or multiple days, this is the date the export started.	ver
8	1	40	ST	Batch Security	No	In some applications of HL7, this field is used to implement secu features. Its use is not yet further specified.	ity
9	1	20	ST	Batch Name/ID/Type	Yes	This field can be used by the application processing the batch, ar can have extra components if needed. For RPMS sites, this will the batch log IEN from RPMS.	
10	1	30	ST	Batch Comment	Yes	This is a comment field not further defined in the HL7 protocol. For DW1 purposes, this will be the name of the exporting box's site.	
11	1	20	ST	Batch Control ID	Yes	Uniquely identifies a particular batch concatenating the values of BHS-4 and BHS-9. This can be echoed back in BHS-12 if an answering batch is needed.	
12	1	20	ST	Reference Batch Control ID	No	This has a value only if the batch is repeated. It is the BHS-11 value in the original batch that is being repeated.	

# BTS Batch Trailer Segment

HL7 Standard Version **2.4**Version Document Number 6.0

Seq	Com	Len	DT F	Rep	Element Name	Sup	Description	Lookup
1	1	10	ST		Batch Message Count	Yes	Count of registration and visit messages (not including header and trailer messages) contained in this export.	
2	1	80	ST		Batch Comment	Yes		
3	1	100	NM	Υ	Batch Totals	Yes		

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#### **Diagnosis Segment** DG1

Version Document Number 6.0 HL7 Standard Version 2.4

Seq	Com	Len	DT Re	p Element Name	Sup	Description	Lookup
1	1	2	SI	Set ID - DG1	Yes	For the first occurrence, the sequence number is 1; for the second occurrence, the sequence number is 2, and so on. The first occurrence is considered the "primary" diagnosis.	
2	1	2	ID	Diagnosis Coding Method	No	ICD Coding method (not used - revision method transmitted as 3rd component of each ICD code element)	
3	1	8	CE	Diagnosis Code - DG1	Yes	Nationally recognized standard code set. Required only for non-dental direct encounters. Minimum of one value required.	Diagnosis Codes (Industry SCS)
3	2	250	ST	ICD Diagnosis Description	No	ICD code description	
3	3	3	ST	ICD DX Revision	Yes	ICD Coding standard revision used for this diagnosis code, such as ICD-9 or ICD-10. Values I9 or I10.	
4	1	40	ST	Diagnosis Description	No		
5	1	26	TS	Diagnosis Date/Time	No		
6	1	2	IS	Diagnosis Type	No		
7	1	250	CE	Major Diagnostic Category	No		
8	1	250	CE	Diagnostic Related Group	No		
9	1	1	ID	DRG Approval Indicator	No		
10	1	2	IS	DRG Grouper Review Code	No		
11	1	250	CE	Outlier Type	No		
12	1	3	NM	Outlier Days	No		
13	1	12	СР	Outlier Cost	No		
14	1	4	ST	Grouper Version And Type	No		
15	1	2	ID	Diagnosis Priority	No		
16	1	250	XCN Y	Diagnosing Clinician	No		
17	1	3	IS	Diagnosis Classification	No		
18	1	1	ID	Confidential Indicator	No		
19	1	26	TS	Attestation Date/Time	No		

#### DG1 **Diagnosis Segment**

# **EVN Event Type Segment**

HL7 Standard Version **2.4**Version Document Number 6.0

Seq	Com	Len	DT Re	Element Name	Sup	Description	Lookup
1	1	3	ID	Event Type Code	Yes	Retained for backward compatibility only. IHS recommends using the second component of MSH-9 to transmit the event type code information.	
2	1	26	TS	Recorded Date/Time	Yes	Duplicates MSH-7.	
3	1	26	TS	Date/Time Planned Event	No		
4	1	3	IS	Event Reason Code	No		
5	1	250	XCN Y	Operator ID	No		
6	1	26	TS	Event Occurred	No		
7	1	180	HD	Event Facility	No		

#### IN1 **Insurance Segment**

HL7 Standard Version 2.4

Version Document Number 6.0

Seq	Com	Len	DT	Rep	Element Name	Sup	Description	Lookup
1	1	4	SI		Set ID - IN1	Yes	For the first occurrence, the sequence number is 1; for the second occurrence, the sequence number is 2, and so on.	
2	1	250	IS		Insurance Plan ID	No	Sending application's Insurance Plan ID.	
3	1	11	CX	Υ	Insurance Company ID	Yes	Insurance company's EIN.	
4	1	3	IS	Y	Insurance Company Name	Yes	Insurance Company Category.	Insurance Category Codes (OIT SCS)
4	2	50	ST			Yes	Insurance Company Name.	
5	1	250	XAD	Υ	Insurance Company Address	No		
6	1	250	XPN	Υ	Insurance Co Contact Person	No		
7	1	250	XTN	Υ	Insurance Co Phone Number	No		
8	1	12	ST		Group Number	Yes		
9	1	250	XON	Υ	Group Name	No		
10	1	250	CX	Υ	Insured's Group Emp ID	No		
11	1	250	XON	Υ	Insured's Group Emp Name	No		
12	1	8	DT		Plan Effective Date	Yes	For Medicaid and Medicare this will be the eligibility date; for private insurance this will be the effective date.	
13	1	8	DT		Plan Expiration Date	Yes	For Medicaid and Medicare this will be the eligibility end date; for private insurance this will be the expiration date.	
14	1	250	СМ		Authorization Information	No		
15	1	2	IS		Plan Type	Yes	Medicaid State Of Eligibility.	State (SCB)
15	2	30	IS			Yes	Medicaid Plan Name.	
16	1	30	ST	Υ	Name Of Insured	Yes	Last Name.	
16	2	30	ST			Yes	First Name.	
16	3	30	ST			Yes	Middle Initial or Name.	
17	1	17	IS		Insured's Relationship To Patient	Yes	Patient's relationship to insured (e.g. self, spouse, etc.). The description associated with the X12 Relation to Insured code set is preferred.	
18	1	26	TS		Insured's Date Of Birth	No		

#### **Insurance Segment** IN1

**Insurance Segment** IN1

HL7 Standard Version 2.4 Version Document Number 6.0 Description Seq Com Len **DT Rep Element Name** Sup Lookup 250 XAD Y Insured's Address 19 No 20 1 2 IS Assignment Of Benefits No 2 IS Coordination Of Benefits 21 1 No 2 ST 22 1 Coord Of Ben. Priority No 23 1 ID 1 Notice Of Admission Flag No 8 DT Notice Of Admission Date 24 1 No 25 1 1 ID Report Of Eligibility Flag No 8 DT 26 1 Report Of Eligibility Date No 27 1 2 IS Release Information Code No 1 15 ST Pre-Admit Cert (PAC) 28 No 29 TS 1 26 Verification Date/Time No 30 1 250 XCN Y Verification By No 1 2 IS Type Of Agreement Code 31 No 2 IS Billing Status 32 1 No 33 NM Lifetime Reserve Days 1 4 No 34 1 4 NM Delay Before L.R. Day No 1 8 IS Company Plan Code 35 No 36 1 15 ST Policy Number No 37 1 12 CP Policy Deductible No 38 1 12 CP Policy Limit - Amount No 39 1 4 NM Policy Limit - Days No 40 1 12 CP Room Rate - Semi-Private No 41 1 12 CP Room Rate - Private No CE 42 1 250 Insured's Employment Status No

#### IN1 **Insurance Segment**

# IN1 Insurance Segment

HL7 Standard Version **2.4**Version Document Number 6.0

Seq	Com	Len	DT	Rep	Element Name	Sup	Description Lookup
43	1	1	IS		Insured's Administrative Sex	No	
44	1	250	XAD	Υ	Insured's Employer's Address	No	
45	1	2	ST		Verification Status	No	
46	1	8	IS		Prior Insurance Plan ID	No	
47	1	2	IS		Coverage Type	Yes	For Medicare and Railroad: A or B; for Medicaid: value must be 1 or 2 chars; not applicable for private.
48	1	2	IS		Handicap	No	
49	1	30	CX	Υ	Insured's ID Number	Yes	Policy Number.
49	2	3	CX			Yes	Prefix / Suffix.

# MSA Message Acknowledgement Segment

HL7 Standard Version **2.4**Version Document Number 6.0

Seq	Com	Len	DT	Rep Element Name	Sup	Description	Lookup
1	1	2	ID	Acknowledgment Code	Yes	${\sf CA}={\sf Application}$ Accept, ${\sf CE}={\sf Application}$ Error, ${\sf CR}={\sf Application}$ Reject.	
2	1	20	ST	Message Control ID	Yes	The message control ID of the original message sent by the sending system; allows the sending system to associate this response with the message for which it is intended.	_
3	1	80	ST	Text Message	No		
4	1	15	NM	Expected Sequence Number	No		
5	1	1	ID	Delayed Acknowledgment Type	No		
6	1	250	CE	Error Condition	No		

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Seq	Com	Len	DT Rep	Element Name	Sup	Description	Lookup
1	1	1	ST	Field Separator	Yes	The separator between the Segment ID and the first real field (MSH-2). Serves as the separator and defines the character to bused as a separator for the rest of the message. Recommended value is   (ASCII 124).	e
2	1	4	ST	Encoding Characters	Yes	The four characters in the following order: component separator repetition separator, escape characters and subcomponent separators. Recommended values are ^~\& (ASCII 94, 126, 92 and 38, respectively).	,
3	1	180	HD	Sending Application	Yes	Uniquely identifies the sending application. For RPMS sites, the value will be "RPMS"; for non-RPMS site, it will be the name of thapplication.	e
4	1	180	HD	Sending Facility	Yes	Contains the address of one of several occurrences of the same application within the sending system.	
5	1	180	HD	Receiving Application	Yes	Uniquely identifies the receiving applications among all other applications within. This will be "DW1."	
6	1	180	HD	Receiving Facility	Yes	Identifies the receiving application among multiple instances of the application running on behalf of different organizations. Constant value is "IHS."	ne t
7	1	26	TS	Date/Time Of Message	Yes	The date time the message was created; may be sent with or without seconds.	
8	1	40	ST	Security	Yes	Used to implement security features; not yet further specified.	
9	1	3	ID	Message Type	Yes	Message type (e.g., ADT for inbound messages).	
9	2	3	ID		Yes	Trigger Event (e.g., A08 or A31).	
10	1	20	ST	Message Control ID	Yes	Uniquely identifies a particular message.	
11	1	3	РТ	Processing ID	Yes	Identifies the current status of the interface. Only the first component (DT=ID) is supported in DW1. Valid values: "D" = Debug "P" = Production "T" = Training.	
12	1	60	VID	Version ID	Yes	The HL7 Standard Version used; DW1 supports version 2.4.	
13	1	15	NM	Sequence Number	No	Not used with standard dictionary.	
14	1	180	ST	Continuation Pointer	No	Not used with standard dictionary.	
15	1	2	ID	Accept Acknowledgment Type	Yes	"AL" = Always Acknowledge "NE" = Never Acknowledge.	
16	1	2	ID	Application Acknowledgment Type	Yes	"AL" = Always Acknowledge "NE" = Never Acknowledge.	

# MSH Message Header Segment

# MSH Message Header Segment

HL7 Standard Version **2.4**Version Document Number 6.0

Seq	Com	Len	DT	Rep	Element Name	Sup	Description	Lookup
17	1	3	ID		Country Code	No	NV	
18	1	16	ID	Υ	Character Set	No	NV	
19	1	250	CE		Principal Language Of Message	No	NV	
20	1	20	ID		Alternate Character Set Handling Scheme	No	NV	
21	1	10	ID	Υ	Conformance Statement ID	No	NV	_

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# **OBX for CPT CPT Segment**

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Seq	Com	Len	DT	Rep	Element Name	Sup	Description	Lookup
1	1	4	SI		Set ID	Yes	For the first occurrence, the sequence number is 1; for the second occurrence, the sequence number is 2, and so on.	
2	1	3	ST		Type of Result	Yes	Constant: "CPT" to indicate a CPT or HCPCS observation.	
3	1	5	ST		CPT Code	Yes	Valid CPT or other HCPCS code. Nationally recognized standard code set.	Healthcare Common Procedure Coding System Codes (Industry SCS)
4	1					No		
5	1	2	ST		CPT Quantity	Yes		
13	1	2	ST	Υ	CPT Code Modifier	Yes	HCPCS Modifiers are used to identify circumstances that alter or enhance the description of a service or supply. When multiple modifiers are sent, the Modifier Description and Coding System are required for each modifier.	
13	2	250	ST	Υ	Modifier Description	Yes**	Descriptive text for the HCPCS modifier. ** Required when multiple CPT Code Modifiers are sent .	
13	3	4	ST	Υ	Coding System	Yes**	Coding method used for HCPCS Modifiers (for RPMS, will be 'CPTM') ** Required when multiple CPT Code Modifiers are sent .	)

# **OBX for HF** Health Factor Segment

HL7 Standard Version **2.4**Version Document Number 6.0

Seq	Com	Len	DT	Rep Element Name	Sup	<b>Description</b> Lookup	
1	1	4	ID	Set ID	Yes	For the first occurrence, the sequence number is 1; for the second occurrence, the sequence number is 2, and so on.	
2	1	3	ST	Type of Result	Yes	Constant: "HF" to indicate a Health Factor observation.	
3	1	40	IS	Health Factor	Yes	Health Factor Category.	
3	2	4	ST		Yes	Health Factor Code.	
3	3	40	ST		Yes	Health Factor Name.	
4	1	4	ST	Health Factor Category Code	e Yes	Health Factor Category Code.	

# **OBX for IFC** Infant Feeding Segment

HL7 Standard Version **2.4**Version Document Number 6.0

Seq	Com	Len	DT	Rep	Element Name	Sup	Description	Lookup
1	1	4	SI		Set ID	Yes	For the first occurrence, the sequence number is 1; for the second occurrence, the sequence number is 2, and so on.	
2	1	3	ST		Type of Result	Yes	Constant: "IFC" to indicate Infant Feeding Choice observation	
5	1	1	ST		Infant Feeding Choice Code	Yes	Valid Infant Feeding Choice Code	
5	2	30	ST		Infant Feeding Choice Description	No	Infant Feeding Choice Code description	

# **OBX for LAB** Lab Segment

HL7 Standard Version 2.4

Version Document Number 6.0

Seq	Com	Len	DΤ	Rep	Element Name	Sup	Description	Lookup
1	1	2	SI		Set ID	Yes	For the first occurrence, the sequence number is 1; for the second occurrence, the sequence number is 2, and so on.	
2	1	3	ST		Type of Result	Yes	Constant: "LAB" to indicate a Lab observation.	
3	1	10	IS		Lab Test	Yes	LOINC Code. Nationally recognized standard code set.	Logical Observation Identifier Names & Codes (Industry SCS)
3	2	40	ST			Yes	Local Lab Test Name.	
4	1					No		
5	1	200	ST		Lab Test Results	Yes		
6	1	30	ST		Lab Test Units	Yes	Unit of measure for this lab test.	
7	1	12	ST		Reference Range	Yes	Reference Low.	
7	2	12	ST			Yes	Reference High.	

# **OBX for MSR** Measurement Segment

HL7 Standard Version **2.4**Version Document Number 6.0

Seq	Com	Len	DT	Rep	Element Name	Sup	Description	Lookup
1	1	2	SI		Set ID	Yes	For the first occurrence, the sequence number is 1; for the second occurrence, the sequence number is 2, and so on.	
2	1	3	ST		Type of Result	Yes	Constant: "MSR" to indicate a Measurement observation.	
3	1	2	IS		Clinical Measurement Code	Yes		Clinical Measure Codes (OIT SCS)
4	1	30	ST		Clinical Measurement Type	No	Not supported by DW1.	
5	1	15	ST		Measurement Value	Yes	Measurement Value; formatting accepted is 999/999 for blood pressure; 999.9 for weight in pounds; 99.9 for height in inches.	

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# **OBX for PED** Patient Education Segment

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Seq	Com	Len	DT Rep	Element Name	Sup	Description	Lookup
1	1	2	SI	Set ID	Yes	For the first occurrence, the sequence number is 1; for the second occurrence, the sequence number is 2, and so on.	
2	1	3	ST	Type of Result	Yes	Constant: "PED" to indicate a CPT observation.	
3	1	12	IS	Patient Education Code	Yes		Patient Education Protocol (Education Topics) (SCB)
4	1				No		
5	1	1	IS	Patient Level of Understanding Code	Yes		Education Understanding Codes (OIT SCS)
6	1				No		
7	1				No		
8	1				No		
9	1				No		
10	1				No		
11	1				No		
12	1				No		
13	1	4	NM Y	Patient Education Length of Education	Yes	Length of the education in minutes.	

# **OBX for SKT Skin Test Segment**

HL7 Standard Version **2.4**Version Document Number 6.0

Seq	Com	Len	DT I	Rep Element Name	Sup	Description	Lookup
1	1	2	SI	Set ID	Yes	For the first occurrence, the sequence number is 1; for the second occurrence, the sequence number is 2, and so on.	
2	1	3	ST	Type of Result	Yes	Constant: "SKT" to indicate a CPT observation.	
3	1	2	IS	Skin Test Code	Yes		Skin Test Codes (OIT SCS)
4	1				No		
5	1	1	IS	Result/Reading	Yes		Skin Test Result Codes (OIT SCS)
5	2	5	NM		Yes	Skin Test Reading. Numeric measurement of skin test result in mm.	

# **OBX for XAM Exam Segment**

HL7 Standard Version **2.4**Version Document Number 6.0

Se	q C	om	Len	DT	Rep	Element Name	Sup	Description	Lookup
	1	1	2	SI		Set ID	Yes	For the first occurrence, the sequence number is 1; for the second occurrence, the sequence number is 2, and so on.	
	2	1	3	ST		Type of Result	Yes	Constant: "XAM" to indicate a Exam observation.	
_	3	1	2	IS		Exam Code	Yes		Examination Codes (OIT SCS)

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	Com	Len		Rep	Element Name	Sup	<b>Description</b> Lookup
1	1	4	SI		Set ID - PID	No	DW1 supports only one occurrence per message, so SET ID is not applicable.
2	1	20	CX		Patient ID	No	Not supported by DW1.
3	1	15	IS		Unique Registration Code (Patient ID)	Yes	15-character unique identifier. The first 5-characters are the identifier agreed upon between the sending application and the National Data Warehouse. The remaining 10-characters contain the ID the sending application uses to uniquely identify this patient, right justified and left zero filled. (For example: XXXXX0000000001)
3	2	10	SI		Application Internal Entry Number (IEN)	Yes	This value, when right justified and zero-filled, comprises the last 10 characters of PID-3-1. (For example, PID-3-2 is 1, the last 10 characters of PID-3-1 are 0000000001).
3	3	12	SI		Integration Control Number (ICN)	Yes	12-digit Integration Control Number (ICN) assigned as a patient identifier from the RPMS Master Patient Index (MPI) application. Not applicable to non-RPMS applications.
4	1	16	ST	Y	Alternate Patient ID (Health Record Number)	Yes	16-character alternate patient identifier. The first 6 characters are the facility code where the patient's chart resides. The remaining 10 characters are the patient's chart number, right justified with leading zeroes. (Chart number may also be known as MRN or HRN in your source system).
5	1	30	ST		Patient's Name	Yes	Last Name.
5	2	30	ST			Yes	First Name.
5	3	30	ST			Yes	Middle Initial or Name.
5	4	10	ST			Yes	Name suffix, such as Sr., Jr., III, etc.
5	5	10	ST			Yes	Title, such as Mr., Ms., Mrs., Miss, etc.
6	1	30	ST		Mother's Maiden Name	No	Mother's Maiden Last Name.
6	2	30	ST			No	Mother's Maiden First Name.
6	3	30	ST			No	Mother's Maiden Middle Initial or Name.
7	1	8	DT		Date of Birth	Yes	Date of Birth.
8	1	1	IS		Gender	Yes	GENDER (M = Male, F = Female, U = Unknown)
9	1	250	XPN	Υ	Patient Alias	No	Data is supported in Segment ZRL (element ZRL-6).
10	1	250	CE	Υ	Race	No	

# PID Patient Identification Segment

HL7 Standard Version **2.4**Version Document Number 6.0

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Seq	Com	Len	DT R	lер	Element Name	Sup	Description	Lookup
11	1	50	ST		Patient Address	Yes	Street Address.	
11	2	50	ST			Yes	Additional Street Address.	
11	3	30	ST			Yes	City.	
11	4	2	IS			Yes		State (SCB)
11	5	10	ST			Yes	Zip or Postal Code; format 99999-9999.	
11	6		ST			No	Country.	
11	7		IS			No	County.	
12	1	4	IS		County Code	No		
13	1	250	XTN	Υ	Phone Number - Home	No		
14	1	250	XTN	Υ	Phone Number - Business	No		
15	1	250	CE		Primary Language	No		
16	1	250	CE		Marital Status	No		
17	1	250	CE		Religion	No		
18	1	250	CX		Patient Account Number	No		
19	1	10	ST		SSN Number - Patient	Yes	Patient's SSN without dashes; format 999999999. (If SSN is pseudo, 10th character is a "P".)	
20	1	25	DLN		Driver's License Number - Patient	No		
21	1	250	CX	Υ	Mother's Identifier	No		
22	1	250	CE	Υ	Ethnic Group	No		
23	1	250	ST		Birth Place	No	Data is supported in Segment ZP2 (element ZP2-14).	
24	1	1	ID		Multiple Birth Indicator	No		
25	1	2	NM		Birth Order	No		
26	1	250	CE	Υ	Citizenship	No		
27	1	1	BL		Veterans Military Status	Yes	"Y" =Patient is a person who has previously served in the US Military, otherwise "N."	

# PID Patient Identification Segment

# PID Patient Identification Segment

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Seq	Com	Len	DT I	Rep	Element Name	Sup	Description Lookup
28	1	250	CE		Nationality	No	
29	1	8	DT		Patient Death Date and Time	Yes	Date only; time not supported by DW1.
30	1	1	ID		Patient Death Indicator	No	
31	1	1	ID		Identity Unknown Indicator	No	
32	1	20	IS	Υ	Identity Reliability Code	No	
33	1	26	TS		Last Update Date/Time	No	
34	1	40	HD		Last Update Facility	No	
35	1	250	CE		Species Code	No	
36	1	250	CE		Breed Code	No	
37	1	80	ST		Strain	No	
38	1	250	CE	Υ	Production Class Code	No	

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Seq	Com	Len	DT	Rep	Element Name	Sup	Description	Lookup
1	1	2	SI		Set ID - PR1	Yes	For the first occurrence, the sequence number is 1; for the second occurrence, the sequence number is 2, and so on.	
2	1	3	IS		Procedure Coding Method	No	ICD Coding method (not used - revision method transmitted as 3rd component of each ICD code element)	
3	1	7	CE		Procedure Code	Yes	Nationally recognized standard code set.	Procedure Codes (Industry SCS)
3	2	250	ST		ICD Procedure Description	No	ICD code description	
3	3	3	ST		ICD Proc Revision	Yes	ICD Coding standard revision used for this procedure code, such as ICD-9 or ICD-10. Values I9 or I10	:
4	1	40	ST		Procedure Description	No		
5	1	8	DT		Procedure Date/Time	Yes	Date only; time not supported by DW1.	
6	1	2	IS		Procedure Functional Type	No		
7	1	4	NM		Procedure Minutes	No		
8	1	250	XCN	Υ	Anesthesiologist	No		
9	1	2	IS		Anesthesia Code	No		
10	1	4	NM		Anesthesia Minutes	No		
11	1	1	IS	Υ	Surgeon	Yes	Provider Affiliation.	Provider Affiliation (OIT SCS)
11	2	2	IS	Y		Yes	Provider Discipline. Components 1 & 2 example: A^DD where A is provider affiliation code and DD is provider discipline code. Required only if procedure data is submitted via this segment.	Services Rendered By (Provider) (SCB)
12	1	250	XCN	Υ	Procedure Practitioner	No		
13	1	250	CE		Consent Code	No		
14	1	2	ID		Procedure Priority	No		
15	1	250	CE		Associated Diagnosis Code	No		
16	1	250	CE	Υ	Procedure Code Modifier	No		
17	1	20	IS		Procedure DRG Type	No		
18	1	250	CE	Υ	Tissue Type Code	No		

#### PR1 Procedure Segment

# **PV1** Patient Visit Segment

HL7 Standard Version **2.4**Version Document Number 6.0

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Seq	Com	Len	DT R	ep Element Name	Sup	Description	Lookup
1	1	2	SI	Set ID - PV1	No	$\ensuremath{DW1}$ supports only one occurrence per message, so SET ID is not applicable.	
2	1	1	IS	Patient Class	No		
3	1	6	IS	Assigned Patient Location	Yes	Location of encounter for the visit.	Facility (SCB)
4	1	1	IS	Admission Type	Yes	Code indicating by what process a patient was admitted. Applies to inpatient only.	Admission (SCB)
5	1	250	CX	Preadmit Number	No		
6	1	80	PL	Prior Patient Location	No		
7	1	1	IS	Attending Doctor	Yes	Attending Physician Code.	Provider Affiliation (OIT SCS)
7	2	2	IS		Yes	Provider Discipline.	Services Rendered By (Provider) (SCB)
7	3	3	IS		Yes	Attending Physician Code; sending application value; sometimes initials. Components 1,2 & 3 example: A^DD^PP where A is provider affiliation code, DD is provider discipline code, and PPP is attending physician code	
8	1	250	XCN	Y Referring Doctor	No		
9	1	250	XCN	Y Consulting Doctor	No		
10	1	2	IS	Hospital Service	Yes	Code set indicating type of clinical service to which the patient was admitted. Applies to inpatient only.	Clinical Services (SCB)
11	1	80	PL	Temporary Location	No		
12	1	2	IS	Preadmit Test Indicator	No		
13	1	2	IS	Re-admission Indicator	No		
14	1	6	IS	Admit Source	No		
15	1	2	IS	Y Ambulatory Status	No		
16	1	2	IS	VIP Indicator	No		
17	1	250	XCN	Y Admitting Doctor	No		
18	1	2	IS	Patient Type	No		

#### PV1 Patient Visit Segment

HL7 Standard Version **2.4**Version Document Number 6.0

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Seq	Com	Len	DT	Rep	Element Name	Sup	Description	Lookup
19	1	15	IS		Unique Encounter Code (Visit Number)	Yes	15-character unique identifier. The first 5-characters are the identifier agreed upon between the sending application and the National Data Warehouse. The remaining 10-characters contai the ID the sending application uses to uniquely identify this vis right justified and left zero filled. (For example: XXXXX00000000001)	n
20	1	50	FC	Υ	Financial Class	No		
21	1	2	IS		Charge Price Indicator	No		
22	1	2	IS		Courtesy Code	No		
23	1	2	IS		Credit Rating	No		
24	1	2	IS	Υ	Contract Code	No		
25	1	8	DT	Υ	Contract Effective Date	No		
26	1	12	NM	Υ	Contract Amount	No		
27	1	3	NM	Υ	Contract Period	No		
28	1	2	IS		Interest Code	No		
29	1	1	IS		Transfer to Bad Debt Code	No		
30	1	8	DT		Transfer to Bad Debt Date	No		
31	1	10	IS		Bad Debt Agency Code	No		
32	1	12	NM		Bad Debt Transfer Amount	No		
33	1	12	NM		Bad Debt Recovery Amount	No		
34	1	1	IS		Delete Account Indicator	No		
35	1	8	DT		Delete Account Date	No		
36	1	1	IS		Discharge Disposition	Yes	Disposition on ER visits.	Emergency Room Disposition Codes (OIT SCS)
37	1	6	СМ		Discharged to Location	Yes	Facility patient was transferred to.	Facility (SCB)
38	1	250	CE		Diet Type	No		

#### PV1 Patient Visit Segment

# **PV1** Patient Visit Segment

HL7 Standard Version **2.4** Version Document Number 6.0

Seq	Com	Len	DT Rep	Element Name	Sup	Description Lookup
39	1	2	IS	Servicing Facility	No	
40	1	1	IS	Bed Status	No	
41	1	2	IS	Account Status	No	
42	1	80	PL	Pending Location	No	
43	1	80	PL	Prior Temporary Location	No	
44	1	8	DT	Admit Date/Time	Yes	Outpatient: date of service. Inpatient: admission date. Required for all encounters. Date only; time not supported by NDW.
45	1	8	DT	Discharge Date/Time	Yes	Date only; time not supported by DW1.
46	1	12	NM	Current Patient Balance	No	
47	1	12	NM	Total Charges	No	
48	1	12	NM	Total Adjustments	No	
49	1	12	NM	Total Payments	No	
50	1	250	СХ	Alternate Visit ID	No	
51	1	1	IS	Visit Indicator	No	
52	1	250	XCN Y	Other Healthcare Provider	No	

# **ZDN IHS Dental Segment**

HL7 Standard Version **2.4** Version Document Number 6.0

Seq	Com	Len	DT Re	Element Name	Sup	Description	Lookup
1	1	2	SI	ADA Sequence Number	Yes	For the first occurrence, the sequence number is 1; for the second occurrence, the sequence number is 2, and so on.	
2	1	4	IS	ADA Code	Yes	Nationally recognized standard code set.	American Dental Association Codes (Industry SCS)
3	1	2	NM	# of Units	Yes	Number of units for this ADA code.	
4	1	5	NM	ADA Code Fee	Yes	Fee for this coded service, rounded to nearest dollar. If multiple units are stated for this code entry, fee amount is the total for all units.	
5	1	1	IS	Delivery Mode	Yes	DENTAL DELIVERY CODE (D = Direct, K = Contract)	
6	1	7	ST	Dental Total Cost	Yes	Rounded to the nearest dollar. 9999999.	
7	1	9	ST	Dentists SSN	Yes	Dentist's SSN without dashes; format 999999999.	

# **ZDP IHS Dental Op Segment**

HL7 Standard Version **2.4** Version Document Number 6.0

Seq	Com	Len	DT	Rep	Element Name	Sup	Description	Lookup
1	1	2	SI		Set ID	Yes	For the first occurrence, the sequence number is 1; for the second occurrence, the sequence number is 2, and so on.	
2	1	3	IS		Op Site	Yes		Dental Operation Site Codes (OIT SCS)
3	1	2	ST		Tooth Surface	Yes	While there is a generally accepted set of codes, an insurer/facility may define the code set to be used. Supplying the code alone is ambiguous. There are five generally accepted surface definitions: m=mesial, d=distal, o=occlusal, l=lingual, and b=buccal.	

# **ZDX** IHS Diagnosis Segment

HL7 Standard Version **2.4**Version Document Number 6.0

Seq	Com	Len	DT Rep	Element Name	Sup	Description	Lookup
1	1	160	ST	Provider Narrative	Yes	A detailed description of the patient $\square  s$ conditions, using words rather than codes.	
2	1	1	NM	Stage	No		
3	1	60	CE	Modifier	No		
4	1	1	IS	Cause of DX	Yes		Diagnosis Cause Codes (OIT SCS)
5	1	1	CE	First / Revisit	No		
6	1	8	IS	Cause of Injury	Yes	Nationally recognized standard code set.	Diagnosis Codes (Industry SCS)
6	2	250	ST	ICD Diagnosis Description	No	ICD code description	
6	3	3	ST	ICD DX Revision for Cause of Injury	Yes	ICD Coding standard revision used for this diagnosis code, such as ICD-9 or ICD-10. Values I9 or I10.	
7	1	1	IS	Place of Injury	Yes		Place of Injury (SCB)

HL7 Standard Version **2.4**Version Document Number 6.0

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Seq	Com	Len	DT Rep	Element Name	Sup	Description	Lookup
1	1	1	BL	Medicaid Eligible on Visit Date	Yes	"Y" or "N."	
2	1	1	BL	Medicare Eligible on Visit Date	Yes	"Y" or "N."	
3	1	1	BL	Private Insurance Eligible on Visit Date	Yes	"Y" or "N."	
4	1	1	BL	HTN Documented Ever	Yes	"Y" or "N."	
5	1	8	DT	Date HTN Last Documented	Yes		
6	1	8	DT	LMP	Yes	Date in CCYYMMDD format.	
7	1	8	DT	Date LMP Noted	Yes		
8	1	1	BL	Was An Ace Inhibitor Filled	Yes	"Y" or "N."	
9	1	1	ST	Urine Protein Test	Yes	"Y" or "N."	
10	1	15	ST	Urine Protein Value	Yes		
11	1	1	ST	Microalbuminuria Test	Yes	"Y" or "N."	
12	1	15	ST	Microalbuminuria Value	Yes		
13	1	1	BL	DM Nutrition Education Done	Yes	"Y" or "N."	
14	1	10	ST	HGB A1C Value	No		
15	1	1	BL	Pap Lab Test	No	"Y" or "N."	
16	1	10	ST	Glucose Value	No		
17	1	1	BL	HDL Cholesterol Test	No	"Y" or "N."	
18	1	10	ST	HDL Cholesterol Value	No		
19	1	1	BL	LDL Cholesterol Test	No	"Y" or "N."	
20	1	10	ST	LDL Cholesterol Value	No		
21	1	1	BL	Triglyceride Test	No	"Y" or "N."	
22	1	10	ST	Triglyceride Value	No		
23	1	1	BL	PSA Lab Test	No	"Y" or "N."	
24	1	1	BL	Fecal Occult Blood Lab	No	"Y" or "N."	

#### ZEN IHS Encounter Segment

# **ZEN** IHS Encounter Segment

HL7 Standard Version **2.4**Version Document Number 6.0

Seq	Com	Len	DT Rep	Element Name	Sup	Description	Lookup
25	1	2	NM	# of Lab Tests Done	Yes	The cumulative total of lab tests for this visit.	

# **ZHS IHS Batch Header Segment**

HL7 Standard Version **2.4**Version Document Number 6.0

Seq	Com	Len	DT Rep	Element Name	Sup	<b>Description</b> Lookup
1	1	8	DT	Export Begin Date	Yes	Beginning export date. This is the first creation/modification date that is included in this export.
2	1	8	DT	Export End Date	Yes	Ending export date. This is the ending creation/modification date that is included in this export.
3	1	6	ST	Export Log Number	Yes	Control number assigned to the export at the local level.
4	1	4	ST	Source File Type Code	Yes	A code designating the file type of the export (e.g. HL7 File = HL7)
5	1	30	ST	Export Options	Yes	Processing options associated with an HL7 export file to indicate if it is an initial, re-export, or an incremental. For RPMS HL7 these would include GDW=INCR, RERX=RERN, DRE=DRE, Initial Load=INIT. An example of a value for the GDW option would be EXO^INCR.
6	1	10	ST	Source File Version Number	Yes	The version of the extract software that is being utilized by the exporting site

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# ZIM IHS Immunization Segment

HL7 Standard Version **2.4**Version Document Number 6.0

Se	q Com	Len		DT Rep	Element Name	Sup	Description	Lookup
	1 1	2	2	SI	Set ID	Yes	For the first occurrence, the sequence number is 1; for the second occurrence, the sequence number is 2, and so on.	
	2 1	3	3	ST	HL7 CVX Code	Yes	Nationally recognized standard code set.	HL7 Immunization CVX Codes (Industry SCS)
	3 1	3	3	ST	HL7 MVX Code	Yes	Nationally recognized standard code set.	HL7 Immunization MVX Codes (Industry SCS)
	4 1	3	3	ST	Imm Code - IHS Mod HL7	No	No longer used, replaced by HL7 CVX code as of 5/1/2012. Proprietary subset of HL7 used by IHS beginning with version 7.0 of the RPMS Immunization Package. This was replaced in version 8.0 with the complete HL7 CVX code list.	
	5 1	2	2	ST	Imm Code - Old IHS	No	No longer used, replaced by HL7 CVX code as of 5/1/2012. Proprietary code for immunizations used by IHS prior to version 7.0 of the RPMS Immunization Package.	
	6 1	-	1	ST	Imm Dose Number	Yes		

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# ZIN IHS Third Party Eligibility Segment

HL7 Standard Version **2.4**Version Document Number 6.0

Seq	Com	Len	DT Rep	Element Name	Sup	Description	Lookup
1	1	8	DT	Date of Last Mod of Any Third Party Field	Yes	Last date that any of the Insurance Eligibility Fields changed, formatted CCYYMMDD. (Fields include: IN1-3, IN1-4, IN1-12, IN1-13, IN1-15, IN1-16, IN1-17, IN1-47, IN1-49, ZIN-5, and ZIN-6.)	
2	1	4	TM	Time of Last Mod of Any Third Party Field	No	Time associated with last date of any field change in Insurance Eligibility Fields, formatted HHMM, (associated to ZIN-1).	
3	1	1	ST	Any Third Party Field Mod Since Last Export	Yes	Valid values: "A" = New "Y" = Modifications made "N" = No Modifications made.	
4	1	1	ST	Load Code	No		
5	1	7	IS	Local Database ID for this Eligibility Record	Yes	Sending application ID for the Eligibility record (e.g., a sequentially assigned "row counter" that allows the system to store multiple pieces of information per patient/visit).	
6	1	8	DT	Date of Last Insurance Record Update	No	Same as value in ZIN-1.	

# **ZMC** IHS Immunization Contraindications Segmen

HL7 Standard Version **2.4** Version Document Number 6.0

Seq	Com	Len	DT Re	p Element Name	Sup	Description	Lookup
1	1	4	SI	Set ID	Yes	For the first occurrence, the sequence number is 1; for the second occurrence, the sequence number is 2, and so on.	
2	1	3	ST	Vaccine	Yes	HL7's CVX code for the vaccine formulation. Nationally recognized standard code set.	HL7 Immunization CVX Codes (Industry SCS)
3	1	30	ST	Reason for Contraindication	Yes	Reason that this vaccine is contraindicated.	
4	1	8	DT	Date Noted	Yes	Date the contraindication was noted	
5	1	15	IS	Unique Registration Code (Patient ID)	Yes	15-character unique identifier. The first 5-characters are the identifier agreed upon between the sending application and the National Data Warehouse. The remaining 10-characters contain the ID the sending application uses to uniquely identify this patien	,

# ZMD IHS Medication Segment

HL7 Standard Version **2.4**Version Document Number 6.0

Seq	Com	Len	DT	Rep Element Name	Sup	Description	Lookup
1	1	2	SI	Set ID	Yes	For the first occurrence, the sequence number is 1; for the second occurrence, the sequence number is 2, and so on.	
2	1	40	ST	Drug Name	Yes	Defined by the sending application.	
3	1	11	IS	NDC Code	Yes	NDC-maintained code set, format without dashes 99999999999999999999999999999999999	
4	1	5	IS	VA Drug Class	Yes	Nationally recognized standard code set.	Veterans Administrations Drug Class Codes (Industry SCS)
5	1	11	NM	Medication Quantity	Yes	Medication Quantity, formatted as 9999999.999.	

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Seq	Com	Len	DT Rep	Element Name	Sup	Description	Lookup
1	1	8	DT	Date Established	Yes	Date the record was established.	
2	1	8	DT	Date of last Reg Update	Yes		
3	1	8	DT	Med/RR Release Date	No		
4	1	8	DT	Med/RR Release Revoked Date	No		
5	1	12	ST	Tribal Enrollment Number	No		
6	1	60	CE	CHS Tribal Affiliation	No		
7	1	3	ID	Blood Type	No		
8	1	8	DT	Date of Last Update	No		
9	1	8	DT	Assign Benefits Obtained Date	No		
10	1	8	DT	Assign Benefits Expired Date	No		
11	1	1	ST	SSN Verification Status	Yes	RPMS-specific. Used to indicate the SSN has gone through SSA verification process.	
12	1	60	CE	Reason for no SSN	No		
13	1	40	AD	Birth Place	No		
14	1	6	ST	Birth Certificate Number	No		
15	1	3	CE	Tribe of Membership	Yes		Tribe (SCB)
16	1	12	ST	Tribe Quantum	No		
17	1	1	IS	Indian Blood Quantum	Yes		Blood Quantum (SCB)
18	1	2	IS	Classification/Beneficiary	Yes		Classification (Beneficiary) (SCB)
19	1	8	DT	Current Residence Date	Yes		
20	1	2	ID	State of Death	No		
21	1	6	ST	Death Certificate Number	No		
22	1	7	IS	Current Community	Yes		Community (SCB)
23	1	60	CE	Tribe Membership Verified Flag	No		

# **ZP2 IHS Patient Information Segment**

**ZP2** IHS Patient Information Segment

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Seq (	Com	Len	DT Rep	Element Name	Sup	Description	Lookup
24	1	1	ID	Residence Verified Flag	No		
25	1	8	DT	Date Eligibility Determined	No		
26	1	60	CE	Eligible Minor Child	No		
27	1	250		Location of Home	No		
28	1	250		Additional Registration Info	No		
29	1	250		Remarks	No		
30	1	250		Alerts	No		
31	1	30	ST	Father's Name	Yes	Father's Last Name.	
31	2	30	ST		Yes	Father's First Name.	
31	3	30	ST		Yes	Father's Middle Initial or Name.	
32	1	40	AD	Father's Birth Place	No		
33	1	40	AD	Mother's Birth Place	No		
34	1	1	ST	Eligibility	Yes		Service Eligibility Codes (OIT SCS)
35	1	30	ST	Mother's Name	Yes	Mother's Last Name.	
35	2	30	ST		Yes	Mother's First Name.	
35	3	30	ST		Yes	Mother's Middle Initial or Name.	

	Com		DT Rep	Element Name	Sup	Description	Lookup
1	1	4	SI	Set ID	Yes	For the first occurrence, the sequence number is 1; for the second occurrence, the sequence number is 2, and so on.	
2	1	8	ST	Diagnosis	Yes	Nationally recognized standard code set.	Diagnosis Codes (Industry SCS)
2	2	250	ST	Diagnosis Description	No	ICD code description	
2	3	3	ST	Diagosis Type	Yes	ICD Coding standard revision used for this diagnosis code, such as ICD-9 or ICD-10. Values I9 or I10.	3
3	1	8	DT	Date Added	Yes	Date this problem was added to the patient's record	
4	1	14	at CCY	Date Last Modified	Yes	Date this problem record was last modified	
5	1	10	ST	Problem Number	Yes	Problem Number. Used in RPMS to identify a problem number at a given facility. It allows distinguishing problems for the same paties across multiply facilities.	
6	1	30	ST	Facility	Yes	ASUFAC at which problem was identified	Facility (SCB)
7	1	160	ST	Provider Narrative	Yes	A detailed description of the patient $\square$ s conditions, using words rather than codes.	
8	1	1	ST	Problem Status Code	Yes	Code indicating the Status of an entry, (chronic, etc.)	
8	2	30	ST	Status Text	No	Descriptive text for the status code	
9	1	8	:amp,	Date Deleted	Yes	Date this problem was deleted from the patient's record	
10	1	8	DT	Date of Onset	Yes	Date this problem was first observed	
11	1	15	IS	Unique Registration Code (Patient ID)	Yes	15-character unique identifier. The first 5-characters are the identifier agreed upon between the sending application and the National Data Warehouse. The remaining 10-characters contain the ID the sending application uses to uniquely identify this patien	e

### **ZPN IHS PHN Segment**

HL7 Standard Version **2.4**Version Document Number 6.0

Seq	Com	Len	DT	Rep	Element Name	Sup	Description	Lookup
1	1	2	SI		Set ID Sequence Number	No	DW1 does not support multiple ZPN segments; therefore, sequence number is not applicable.	
2	1	2	IS		PHN Activity Code	Yes		Public Health Nurse Activity Codes (OIT SCS)
3	1	1	IS		PHN Level of Intervention	Yes		Public Health Nurse Intervention Level (OIT SCS)

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Seq	Com	Len	DT	Rep	Element Name	Sup	Description	Lookup
1	1	2	NM		No. of Units	No		
2	1	60	CE		Operative Site	No		
3	1	5	ST		Tooth Surface	No	Covered in ZDP-3.	
4	1	80	ST		Provider Narrative	No		
5	1	1	BL		Infection	Yes	"Y" = Infection; otherwise "N."	
6	1	1	ID		Anesthesia Administered	No		
7	1	60	CE		ASA-PS Class	No		
8	1	60	CE		CPT Code for ICD Procedure	Yes	Nationally recognized standard code set.	Healthcare Common Procedure Coding System Codes (Industry SCS)
9	1	2	ST		Dx Done For	Yes	The sequence number of the diagnosis (Element DG1-1) for which the CPT procedure was performed, if applicable. This is used to link the diagnosis to this procedure (Segment ZPR).	
10	1	2	IS		Procedure Provider Class	Yes	Nationally recognized standard code set.	X12 Provider Class Codes (Industry SCS)
11	1	5	ST		Procedure Provider Specialty	Yes	Nationally recognized standard code set.	X12 Provider Specialty Codes (Industry SCS)
12	1	2	ST		Procedure Provider Type	Yes	Nationally recognized standard code set.	X12 Provider Type Codes (Industry SCS)
13	1	2	ST	Y	CPT Code Modifier	Yes	HCPCS Modifiers are used to identify circumstances that alter or enhance the description of a service or supply. When multiple modifiers are sent, the Modifier Description and Coding System are required for each modifier.	2
13	2	250	ST	Υ	Modifier Description	Yes**	Descriptive text for the HCPCS modifier. $\ensuremath{^{**}}$ Required when multiple CPT Code Modifiers are sent .	e
13	3	4	ST	Υ	Coding System	Yes**	Coding method used for HCPCS Modifiers (for RPMS, will be 'CPTM ** Required when multiple CPT Code Modifiers are sent .	")

### **ZRB IHS Base Registration Segment**

HL7 Standard Version **2.4**Version Document Number 6.0

Seq	Com	Len	DT Rep	Element Name	Sup	Description	Lookup
1	1	8	DT	Date of Last Mod of Any Base Reg	Yes	Last date that any of the Base Registration Record Fields changed, formatted CCYYMMDD. (Fields include: PID-3, PID-7, PID-8, PID-19, PID-29, ZRB-2, ZRB-5, ZP2-11, ZP2-31, and ZP2-35.)	
2	1	4	TM	Time of Last Mod of Any Base Reg	Yes	Time associated with last date of any field change in Base Registration Record Fields, formatted HHMM, (associated to ZRB-1).	
3	1	1	ST	Any Base Reg Field Mod Since Last Export	Yes	Valid values are: "A" = New "Y" = Modifications made "N" = No Modifications made.	
4	1		ST	Load Code	No		
5	1	8	IS	Cause of Death	Yes	Nationally recognized standard code set.	Diagnosis Codes (Industry SCS)
5	2	250	ST	ICD Diagnosis Description	No	ICD code description	
5	3	3	ST	ICD DX Revision for Cause of Death	Yes	ICD Coding standard revision used for this diagnosis code, such as ICD-9 or ICD-10. Values I9 or I10.	

# **ZRC IHS Chart Segment**

HL7 Standard Version **2.4**Version Document Number 6.0

Seq	Com	Len	DT Rep	Element Name	Sup	Description	Lookup
1	1	8	DT	Date of Last Mod of Any Chart Field	Yes	Last date that any of the Chart Fields changed, formatted CCYYMMDD. (Fields include: ZRC-5, ZRC-6, ZRC-7, and ZRC-8.)	
2	1	4	TM	Time of Last Mod of Any Chart Field	No	Time associated with last date of any field change in Chart Fields, formatted HHMM, (associated to ZRC-1).	
3	1	1	ST	Any Chart Reg Field Mod Since Last Export	Yes	Valid values: "A" = New "Y" = Modifications made "N" = No Modifications made. Note that this response applies to all records in this segment and not this one in particular.	
4	1	1	ST	Load Code	No		
5	1	7	IS	Local Database ID for this Chart Record	No	Sending application ID for the Chart record (e.g., a sequentially assigned "row counter" that allows the system to store multiple pieces of information per patient/visit).	
6	1	6	IS	Chart Facility Code	Yes	Facility code where the chart is located.	Facility (SCB)
7	1	10	IS	Chart Number	Yes	Patient's Chart Number. (Chart number may also be known as MRN or HRN in your source system).	I
8	1	1	IS	Chart Status	Yes	STATUS (A = Active, D = Deleted, I = Inactive)	

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### **ZRD IHS Demographic State Segment**

HL7 Standard Version **2.4**Version Document Number 6.0

Seq	Com	Len	DT Rep	Element Name	Sup	Description	Lookup
1	1	8	DT	Date of Last Mod of Any Demo Reg	Yes	Last date that any of the Patient Demographic Fields changed, formatted CCYYMMDD. (Fields include: PID-5, PID-11, PID-27, ZRD-5, ZRD-6, ZRD-7, ZRD-8, ZP2-15, ZP2-16, ZP2-18, ZP2-19, ZP2-22 and ZP2-34.)	
2	1	4	TM	Time of Last Mod of Any Demo Reg	No	Time associated with last date of any field change in Patient Demographic Fields, formatted HHMM, (associated to ZRD-1).	
3	1	1	ST	Any Demo Reg Field Mod Since Last Export	Yes	Valid values are: "A" = New "Y" = Modifications made "N" = No Modifications made.	
4	1	1	ST	Load Code	No		
5	1	50	ST	Patient's Full Name	Yes	If sending application does not store the patient's full name in separate first, last, and middle name fields, this is the full name prior to parsing for transmittal.	
6	1	5	ST	Patient's Title	No	Title, such as Mr., Ms., Mrs., Miss, etc.	
7	1	5	ST	Patient's Name Suffix	No	Name suffix, such as Sr., Jr., III, etc.	
8	1	1	BL	Reg Record Status Code	Yes	Valid Values: "A" = Active "I" = Inactive "M" = Merged. Determined by sending application's criteria.	

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# ZRF IHS Refusals Segment

HL7 Standard Version **2.4**Version Document Number 6.0

Seq	Com	Len	DT Rep	Element Name	Sup	Description	Lookup
	1	4	SI	Set ID	Yes	For the first occurrence, the sequence number is 1; for the second occurrence, the sequence number is 2, and so on.	
2	1	30	ST	Refusal Type	Yes	Type of item that was refused (i.e. IMMUNIZATION)	
3	1	30	ST	Refusal Item	Yes	Service or treatment that was refused (i.e. INFLUENZA)	
4	. 1	8	DT	Date Refused	Yes	Date the item was refused	
Ţ	1	1	ST	Reason for Refusal Code	Yes	Code indicating reason for refusal	
	2	30	ST	Reason for Refusal Text	No	Descriptive text for refusal code	
(	1	14	Times	Date Last Modified	Yes	Date this refusal item was last modified	
-	1	15	IS	Unique Registration Code (Patient ID)	Yes	15-character unique identifier. The first 5-characters are the identifier agreed upon between the sending application and the National Data Warehouse. The remaining 10-characters contain the ID the sending application uses to uniquely identify this patien	

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ZRL IHS Alias Segment

Seq	Com	Len	DT Rep	Element Name	Sup	Description	Lookup
1	1	8	DT	Date of Last Mod of Any Alias Field	Yes	Last date that any of the Alias Fields changed, formatted CCYYMMDD. (Fields include: ZRL-5 and ZRL-6.)	
2	1	4	TM	Time of Last Mod of Any Alias Field	No	Time associated with last date of any field change in Alias Fields, formatted HHMM, (associated to ZRL-1).	
3	1	1	ST	Any Alias Reg Field Mod Since Last Export	Yes	Valid values are: "A" = New "Y" = Modifications made "N" = No Modifications made. Note that this response applies to all records in this segment and not this one in particular.	
4	1	1	ST	Load Code	No		
5	1	7	IS	Local Database ID for this Alias	Yes	Sending application ID for the Alias record (e.g., a sequentially assigned "row counter" that allows the system to store multiple pieces of information per patient/visit).	
6	1	30	ST	Alias Name	Yes	Last Name.	
6	2	30	ST		Yes	First Name.	
6	3	30	ST		Yes	Middle Initial or Name.	
6	4	10	ST		Yes	Name suffix, such as Sr., Jr., III, etc.	
6	5	10	ST		Yes	Title, such as Mr., Ms., Mrs., Miss, etc.	

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#### **ZTS IHS Batch Trailer Segment**

HL7	Standa	rd Vers	ion <b>2.4</b>			Version Document Number 6.0
Seq	Com	Len	DT Rep	Element Name	Sup	<b>Description</b> Lookup
1	1	10	NM	Total number of visits exported	Yes	The total number of visit messages that are contained in this export.
2	1	10	NM	Total number of visits skipped	Yes	RPMS-specific. Used to indicate the number of PCC visits that were reviewed but not exported because of errors OR did not meet the export criteria.
3	1	10	NM	Total number of visits in error	Yes	RPMS-specific. Used to indicate the number of visits not exported due to errors.
4	1	10	NM	Skipped visits due to DEMO,PATIENT	Yes	RPMS-specific. Used to indicate the number of visits skipped because they were for a patient whose name begins with DEMO,PATIENT.
5	1	10	NM	# of discrete messages	Yes	Total number of messages in the export file. If there is one HL7 message for each patient registration record and encounter record in the export, then this number should equal the number of registration and encounter messages exported plus 2 (for the header and trailer messages).

**ZV1** IHS Patient Visit Information Segment

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Seq	Com	Len	DT Rep	Element Name	Sup	Description	Lookup
1	1	8	DT	Date Visit Created	Yes	Date visit record was created in CCYYMMDD format.	
2	1	60	CE	Third Party Billed	No		
3	1	2	IS	Clinic	Yes		Clinic (SCB)
4	1	14	TS	Date Last Modified	Yes		
5	1	60	CE	Walk In / Appointment	No		
6	1	1	IS	Level of Service	Yes		Service Level Codes (OIT SCS)
7	1	60	CE	Eligibility	No		
8	1	12	NM	Amount Billed	No		
9	1	50	ST	Outside Location	No		
10	1	60	CE	Admitting Service	No		
11	1	60	CE	Discharge Service (not used)	No		
12	1	3	NM	Number of Consults	Yes		
13	1	1	ID	Medicare Release	No		
14	1	1	ID	Assignment of Benefits	No		
15	1	10	ST	CHS Purchase Order Number	Yes	CHS Purchase Order Number	
15	2	6	ST	Authorizing Facility Code	Yes	Authorizing Facility Code.	Facility (SCB)
16	1	60	CE	Pay Status	No		
17	1	9	NM	Total Charges	Yes	CHS cost for this visit, formatted as 999999.99.	
18	1	60	CE	Stillborn	No		
19	1	2	NM	Number of Visits	No		
20	1	15	ST	Hospital Voucher Number	No		
21	1	2	ST	Vendor	Yes	Vendor: a provider that is contracted by IHS. Applicable to CHS encounters only.	Type of Provider (Vendor) (SCB)
22	1	4	NM	Activity Time	Yes	Total time in minutes.	

### **ZV1** IHS Patient Visit Information Segment

**ZV1** IHS Patient Visit Information Segment

Seq	Com	Len	DT Rep	Element Name	Sup	Description	Lookup
23	1	4	NM	Travel Time	Yes	Total time in minutes.	
24	1	4	TS	Visit Last Modified Time	No		
25	1	1	BL	Delete Record Flag	Yes	"Y" = Record deleted, otherwise "N."	
26	1	8	DT	Visit Export Date	Yes		
27	1	4	NM	Visit Export Time	No	Not used; data supported in ZV1-26 as a time stamp.	
28	1				No		
29	1	2	NM	Number of RX's	Yes	Number of medication prescriptions dispensed for this visit.	
30	1	4	TM	Time of Visit/Admission	Yes		
31	1	1	IS	Day of Week of Visit/Admission	Yes	DAY OF WEEK (1 = Sunday, 2 = Monday, 3 = Tuesday, 4 = Wednesday, 5 = Thursday, 6 = Friday, 7 = Saturday)	
32	1	1	IS	Туре	Yes		Service Type Codes (OIT SCS)
33	1	2	IS	Service Category	Yes		Service Category Codes (OIT SCS)
34	1	5	IS	Evaluation and Management CPT	Yes		
35	1	8	IS	Cause of Death	Yes	Nationally recognized standard code set.	Diagnosis Codes (Industry SCS)
35	2	250	ST	ICD Diagnosis Description	No	ICD code description	
35	3	3	ST	ICD DX Revision for Cause of Death	Yes	ICD Coding standard revision used for this diagnosis code, such as ICD-9 or ICD-10. Values I9 or I10.	
36	1	2	IS	Discharge Service	Yes		Clinical Services (SCB)
37	1	1	IS	Discharge Type	Yes		Inpatient Disposition Codes (OIT SCS)
38	1	4	NM	Length of Stay	Yes	Length of stay in days.	

### **ZV1** IHS Patient Visit Information Segment

# **ZVP IHS Patient Provider Segment**

HL7 Standard Version **2.4** Version Document Number 6.0

Seq	Com	Len	DT Rep	Element Name	Sup	Description	Lookup
1	1	2	SI	Set ID Sequence Number	Yes	For the first occurrence, the sequence number is 1; for the second occurrence, the sequence number is 2, and so on. The first occurrence is considered the "primary" provider.	
2	1	1	ST	Provider Affiliation/Discipline	Yes	Provider Affiliation.	Provider Affiliation (OIT SCS)
2	2	2	ST		Yes	Provider Discipline. Components 1 & 2 example: A^DD where A is provider affiliation code and DD is provider discipline code	Services Rendered By (Provider) (SCB)
3	1	3	IS	Provider Code	Yes	Sending application's provider classification; typically initials.	
4	1	2	IS	Provider Classification	Yes	Nationally recognized standard code set.	X12 Provider Class Codes (Industry SCS)
5	1	5	IS	Provider Specialty	Yes	Nationally recognized standard code set.	X12 Provider Specialty Codes (Industry SCS)
6	1	2	IS	Provider Type	Yes	Nationally recognized standard code set.	X12 Provider Type Codes (Industry SCS)
7	1	1	BL	Midwifery	Yes	"Y" = Provider is a midwife, otherwise "N".	

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Seq	Com	Len	DT	Rep Element Name	Sup Description	Lookup
1	1	4	SI	Set ID		
2	1	3	ST	Type of Result		
3	1	30	ST	WH Procedure Type		
5	1	30	ST	Result		
14	1	8	DT	Procedure Date		
15	1	15	IS	Unique Registration Code ID)	e (Patient	