ADT Segments (HL7 Data Transmission Guide - Appendix B)

BHS Batch Header Segment

Version Number: 2.4

Seq	Comp	Len	DT	Rep Element Name	Sup	Description
1	1	1	ST	Batch Field Separator	Yes	The character representing the separator between Segment ID and 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).
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 and 38, respectively).
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 the application.
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 the application running on behalf of different organizations. Constant value is "IHS."
7	1	26	TS	Batch Creation Date/Time	Yes	Date export was run. Format CCYYMMDD. If the export runs over multiple days, this is the date the export started.
8	1	40	ST	Batch Security	No	In some applications of HL7, this field is used to implement security features. Its use is not yet further specified.
9	1	20	ST	Batch Name/ID/Type	Yes	This field can be used by the application processing the batch, and can have extra components if needed. For RPMS sites, this will be the batch log IEN from RPMS.
10	1	80	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.
1	1	10	ST	Batch Message Count	Yes	

BTS Batch Trailer Segment

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BTS Batch Trailer Segment

Version Number: 2.4

Seq	Comp	Len	DT	Rep	Element Name	Sup	Description
2	1	80	ST		Batch Comment	Yes	
3	1	100	NM	Υ	Batch Totals	Yes	

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DG1 Diagnosis Segment

Version Number: 2.4

ersion N							
Seq	Comp	Len	DT	Rep	Element Name	Sup	Description
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	
3	1	6	CE		Diagnosis Code - DG1	Yes	Nationally recognized standard code set (http://www.cdc.gov/nchs/icd9.htm)
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	Υ	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	

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EVN Event Type Segment

Version Number: 2.4

Seq	Comp	Len	DT	Rep	Element Name	Sup	Description
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	Υ	Operator ID	No	
6	1	26	TS		Event Occurred	No	
7	1	180	HD		Event Facility	No	

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IN1 Insurance Segment

Version Number: 2.4

ersion N Seq	Comp		DT	Rep	Element Name	Sup	Description
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	СХ	Υ	Insurance Company ID	Yes	Insurance company's EIN.
4	1	3	IS	Υ	Insurance Company Name	Yes	LOOKUP: INSURANCE_CAT; Insurance Company Category.
	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	СХ	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	LOOKUP: STATE; Medicaid State Of Eligibility.
	2	30	IS			Yes	Medicaid Plan Name.
16	1	30	ST	Υ	Name Of Insured	Yes	Last Name.
	2	30	ST			Yes	First Name.
	3	30	ST			Yes	Middle Initial or Name.
17	1	17	IS		Insured's Relationship To Patient	Yes	This will be the applicable code for "relationship to insured" used by UB-92, a nationally recognized standard for electronic claims submission. Note that this code set is scheduled to change 10/16/2003.

IN1 Insurance Segment

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IN1 **Insurance Segment**

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Seq	Comp	Len	DT	Rep	Element Name	Sup Description
18	1	26	TS		Insured's Date Of Birth	No
19	1	250	XAD	Υ	Insured's Address	No
20	1	2	IS		Assignment Of Benefits	No
21	1	2	IS		Coordination Of Benefits	No
22	1	2	ST		Coord Of Ben. Priority	No
23	1	1	ID		Notice Of Admission Flag	No
24	1	8	DT		Notice Of Admission Date	No
25	1	1	ID		Report Of Eligibility Flag	No
26	1	8	DT		Report Of Eligibility Date	No
27	1	2	IS		Release Information Code	No
28	1	15	ST		Pre-Admit Cert (PAC)	No
29	1	26	TS		Verification Date/Time	No
30	1	250	XCN	Υ	Verification By	No
31	1	2	IS		Type Of Agreement Code	No
32	1	2	IS		Billing Status	No
33	1	4	NM		Lifetime Reserve Days	No
34	1	4	NM		Delay Before L.R. Day	No
35	1	8	IS		Company Plan Code	No
36	1	15	ST		Policy Number	No
37	1	12	СР		Policy Deductible	No
38	1	12	СР		Policy Limit - Amount	No
39	1	4	NM		Policy Limit - Days	No

IN1 Insurance Segment

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IN1 Insurance Segment

Version Number: 2.4

Seq	Comp	Len	DT	Rep	Element Name	Sup	Description
40	1	12	СР		Room Rate - Semi-Private	No	
41	1	12	СР		Room Rate - Private	No	
42	1	250	CE		Insured's Employment Status	No	
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	СХ	Υ	Insured's ID Number	Yes	Policy Number.
	2	3	CX			Yes	Prefix / Suffix.

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MSA Message Acknowledgement Segment

Version Number: 2.4

Seq	Comp	Len	DT	Rep	Element Name	Sup	Description
1	1	2	ID		Acknowledgment Code	Yes	CA = Application Accept, CE = Application Error, CR = 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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MSH Message Header Segment

Version Number: 2.4

Seq	Comp	Len	DT Rep	Element Name	Sup	Description
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 be used as a separator for the rest of the message. Recommended value is (ASCII 124).
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 the application.
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."
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).
	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.

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MSH Message Header Segment

Version Number: 2.4

S	eq	Comp	Len	DT	Rep	Element Name	Sup	Description
	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-CPT CPT Segment

Version Number: 2.4

Seq	Comp	Len	DT	Rep	Element Name	Sup	Description
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.
4	1					No	
5	1	2	ST		CPT Quantity	Yes	

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OBX-HF Health Factor Segment

Version Number: 2.4

Seq	Comp	Len	DT	Rep	Element Name	Sup	Description
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.
	2	4	ST			Yes	Health Factor Code.
	3	40	ST			Yes	Health Factor Name.
4	1	4	ST		Health Factor Category Code	Yes	Health Factor Category Code.

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OBX-LAB Lab Segment

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ST

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Version Number: 2.4

	Seq	Comp	Len	DT	Rep	Element Name	Sup	Description
_	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.
		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.

Yes

Yes

Reference Low.

Reference High.

Reference Range

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OBX-MSR Measurement Segment

Version Number: 2.4

Seq	Comp	Len	DT	Rep	Element Name	Sup	Description
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	LOOKUP: CLINICAL_MEASURE
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-PED Patient Education Segment

Version Number: 2.4

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Seq	Comp	Len	DT	Rep	Element Name	Sup	Description	
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	LOOKUP: EDUCATION	
4	1					No		
5	1	1	IS		Patient Level of Understanding Code	Yes	LOOKUP: EDUC_UNDERSTAND	
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	Υ	Patient Education Length of Education	Yes	Length of the education in minutes.	

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OBX-SKT Skin Test Segment

Version Number: 2.4

Seq	Comp	Len	DT	Rep	Element Name	Sup	Description
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	No	LOOKUP: SKIN_TEST
4	1					No	
5	1	1	IS		Result/Reading	Yes	LOOKUP: SKIN_TEST_RESULT
	2	5	NM			Yes	Skin Test Reading. Numeric measurement of skin test result in mm.

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OBX-XAM Exam Segment

Version Number: 2.4

Seq	Comp	Len	DT	Rep	Element Name	Sup	Description
 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	LOOKUP: EXAM_IHS

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PID Patient Identification Segment

Version Number: 2.4

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Seq	Comp	Len	DT	Rep	Element Name	Sup	Description
1	1	4	SI		Set ID - PID	Yes	
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: XXXXX00000000001)
4	1	12	ST	Υ	Alternate Patient ID (Health Record Number)	Yes	12-character alternate patient identifier. The first 6-characters are the facility code where the patient's chart resides. The remaining 6-characters are the patient's chart number, right justified with leading zeroes.
5	1	30	ST		Patient's Name	Yes	Last Name.
	2	30	ST			Yes	First Name.
	3	30	ST			Yes	Middle Initial or Name.
	4	10	ST			Yes	Name suffix, such as Sr., Jr., III, etc.
	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.
	2	30	ST			No	Mother's Maiden First Name.
	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	
11	1	50	ST		Patient Address	Yes	Street Address.
	2	50	ST			Yes	Additional Street Address.
	3	30	ST			Yes	City.
	4	2	IS			Yes	LOOKUP: STATE

PID Patient Identification Segment

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PID **Patient Identification Segment**

ersion Number: 2.4	1
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Seq	Comp	Len	DT	Rep	Element Name	Sup	Description
11	5	10	ST			Yes	Zip or Postal Code; format 99999-9999.
	6		ST			No	Country.
	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	СХ		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	СХ	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."
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	

PID Patient Identification Segment

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PID Patient Identification Segment

Version Number: 2.4

Seq	Comp	Len	DT	Rep	Element Name	Sup	Description
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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PR1 Procedure Segment

Version Number: 2.4

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Seq	Comp	Len	DT	Rep	Element Name	Sup	Description
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	
3	1	5	CE		Procedure Code	Yes	Nationally recognized standard code set (http://www.cdc.gov/nchs/icd9.htm)
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	LOOKUP: AFFILIATION; Provider Affiliation.
	2	2	IS			Yes	LOOKUP: PROVIDER_DISC; Provider Discipline.
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	

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PV1 Patient Visit Segment

Version Number: 2.4

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Seq	Comp	Len	DT	Rep	Element Name	Sup	Description
1	1	2	SI		Set ID - PV1	No	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	LOOKUP: FACILITY; Location of encounter for the visit.
4	1	1	IS		Admission Type	Yes	LOOKUP: ADMISSION
5	1	250	CX		Preadmit Number	No	
6	1	80	PL		Prior Patient Location	No	
7	1	1	IS		Attending Doctor	Yes	LOOKUP: AFFILIATION; Attending Physician Code.
	2	2	IS			Yes	LOOKUP: PROVIDER_DISC; Provider Discipline.
	3	3	IS			Yes	Attending Physician Code; sending application value; sometimes initials.
8	1	250	XCN	Υ	Referring Doctor	No	
9	1	250	XCN	Υ	Consulting Doctor	No	
10	1	2	IS		Hospital Service	Yes	LOOKUP: SERVICE
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	Υ	Ambulatory Status	No	
16	1	2	IS		VIP Indicator	No	
17	1	250	XCN	Υ	Admitting Doctor	No	
18	1	2	IS		Patient Type	No	

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PV1 Patient Visit Segment

Version Number: 2.4

	Comp		DT	Rep	Element Name	Sup	Description
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 contain the ID the sending application uses to uniquely identify this visit, right justified and left zero filled. (For example: XXXXX00000000001)
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	LOOKUP: ER_DISPOS; Disposition on ER visits.
37	1	6	СМ		Discharged to Location	Yes	LOOKUP: FACILITY; Facility patient was transferred to.
38	1	250	CE		Diet Type	No	
39	1	2	IS		Servicing Facility	No	

PV1 Patient Visit Segment

DA100 Official Product of Documatron for DW1

PV1 Patient Visit Segment

Version Number: 2.4

version	number	r: 2.4	•				
Seq	Comp	Len	DT	Rep	Element Name	Sup	Description
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 visit date or inpatient admission date. Date only; time not supported by DW1.
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	Υ	Other Healthcare Provider	No	
	1			Υ			

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ZDN IHS Dental Segment

Version Number: 2.4

Seq	Comp	Len	DT	Rep	Element Name	Sup	Description
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	LOOKUP: ADA
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.

DA100 Official Product of Documatron for DW1

ZDP **IHS Dental Op Segment**

ver	sion	Number:	2.4
		•	

Seq	Comp	Len	DT	Rep	Element Name	Sup	Description
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	LOOKUP: DENTAL_OPSITE
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.

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ZDX IHS Diagnosis Segment

Version Number: 2.4

Seq	Comp	Len	DT	Rep	Element Name	Sup	Description
1	1	80	ST		Provider Narrative	No	
2	1	1	NM		Stage	No	
3	1	60	CE		Modifier	No	
4	1	1	IS		Cause of DX	Yes	LOOKUP: DX_CAUSE
5	1	1	CE		First / Revisit	No	
6	1	6	IS		Cause of Injury	Yes	Nationally recognized standard code set (http://www.cdc.gov/nchs/icd9.htm)
7	1	1	IS		Place of Injury	Yes	LOOKUP: INJURY_PLACE

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ZEN IHS Encounter Segment

Version Number: 2.4

Seq	Comp		DT Rep	Element Name	Sup	Description
1	1	1	BL	Medicaid Eligible on Visit Date	No	
2	 1	1	BL	Medicare Eligible on Visit Date	No	
3	 1	 1	BL	Private Insurance Eligible on Visit Date	No	
		•		Trivate insurance Engible on Visit Bate	140	
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	

ZEN IHS Encounter Segment

DA100 Official Product of Documatron for DW1

ZEN IHS Encounter Segment

Version Number: 2.4

Seq	Com	p Le	en D	T Rep	Element Name	Sup	Description
23	1	1	ВІ	L	PSA Lab Test	No	"Y" or "N."
24	1	1	BI	L	Fecal Occult Blood Lab	No	"Y" or "N."
25	1	2	NI	M	# of Lab Tests Done	Yes	The cumulative total of lab tests for this visit.

DA100 Official Product of Documatron for DW1

ZHS **IHS Batch Header Segment**

ersion Number: 2.4	1
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Seq	Comp	Len	DT	Rep	Element Name	Sup	Description
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

Version Number: 2.4

Seq	Comp	Len	DT	Rep	Element Name	Sup	Description
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		HL7 CVX Code	Yes	LOOKUP: HL7_IMMUN_CVX
3	1	3	ST		HL7 MVX Code	Yes	LOOKUP: HL7_IMMUN_MVX
4	1	3	ST		Imm Code - IHS Mod HL7	Yes	LOOKUP: HL7_IMMUNIZATION
5	1	2	ST		Imm Code - Old IHS	No	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

DT

Version Number: 2.4

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Seq	Comp	Len	DT	Rep	Element Name	Sup	Description
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, N1-16, 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).

No

Same as value in ZIN-1.

Date of Last Insurance Record Update

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ZMD IHS Medication Segment

Version Number: 2.4

Seq	Comp	Len	DT	Rep	Element Name	Sup	Description
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 9999999999999999.
4	1	5	IS		VA Drug Class	Yes	LOOKUP: VA_DRUG_CLASS
5	1	11	NM		Medication Quantity	Yes	Medication Quantity, formatted as 9999999.999.

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ZP2 IHS Patient Information Segment

Version Number: 2.4

Version I	lumbe	r: 2.4				
Seq	Comp	Len	DT Rep	Element Name	Sup	Description
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	LOOKUP: TRIBE
16	1	12	ST	Tribe Quantum	No	
17	1	1	IS	Indian Blood Quantum	Yes	LOOKUP: BLOOD_QUANTUM
18	1	2	IS	Classification/Beneficiary	Yes	LOOKUP: BENEF_CLASS
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	LOOKUP: COMMUNITY

ZP2 IHS Patient Information Segment

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ZP2 **IHS Patient Information Segment**

Version Number: 2.4

Seq	Comp	Len	DT Rep	Element Name	Sup	Description
23	1	60	CE	Tribe Membership Verified Flag	No	
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.
	2	30	ST		Yes	Father's First Name.
	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	LOOKUP: SVC_ELIG
35	1	30	ST	Mother's Name	Yes	Mother's Last Name.
	2	30	ST		Yes	Mother's First Name.
	3	30	ST		Yes	Mother's Middle Initial or Name.

DA100 Official Product of Documatron for DW1 Date generated: 1/20/2009

ZPN IHS PHN Segment

Version Number: 2.4

	Seq	Comp	Len	DT	Rep	Element Name	Sup	Description
	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	LOOKUP: PHN_ACTIVITY
_	3	1	1	IS		PHN Level of Intervention	Yes	LOOKUP: PHN_INTERV_LEVEL

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ZPR IHS Procedure Segment

Version Number: 2.4

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Seq	Comp	Len	DT	Rep	Element Name	Sup	Description
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	
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	LOOKUP: PROV_X12_CLASS

Yes

Yes

LOOKUP: PROV_X12_SPEC

LOOKUP: PROVIDER_TYPE

Procedure Provider Specialty

Procedure Provider Type

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ZRB **IHS Base Registration Segment**

IS

Cause of Death

Version Number: 2.4

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Seq	Comp	Len	DT	Rep	Element Name	Sup	Description
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	

Yes

Nationally recognized standard code set (http://www.cdc.gov/nchs/icd9.htm)

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ZRC IHS Chart Segment

Version Number: 2.4

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Chart Facility Code

Chart Number

Chart Status

Seq	Comp	Len	DT	Rep	Element Name	Sup	Description
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	Yes	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).

Yes

Yes

Yes

Patient's Chart Number.

LOOKUP: FACILITY; Facility code where the chart is located.

STATUS (A = Active, D = Deleted, I = Inactive)

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ZRD **IHS Demographic State Segment**

ersion l	Number:	2.4
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Seq	Comp	Len	DT	Rep	Element Name	Sup	Description
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. Determined by sending application's criteria.

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ZRL IHS Alias Segment

Version Number: 2.4

Seq	Comp	Len	DT	Rep	Element Name	Sup	Description
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.
	2	30	ST			Yes	First Name.
	3	30	ST			Yes	Middle Initial or Name.
	4	10	ST			Yes	Name suffix, such as Sr., Jr., III, etc.
	5	10	ST			Yes	Title, such as Mr., Ms., Mrs., Miss, etc.

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ZTS **IHS Batch Trailer Segment**

Version Number: 2.4	ŀ
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Seq	Comp	Len	DT	Rep	Element Name	Sup	Description
1	1	10	NM		Total number of visits exported	Yes	The total number of visits 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 records	Yes	Total number of records 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 records exported plus 2 (for the header and trailer records).

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ZV1 IHS Patient Visit Information Segment

Version N	lumbe	r: 2.4				
Seq	Comp	Len	DT Rep	Element Name	Sup	Description
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		LOOKUP: CLINIC
4	1	14	TS	Date Last Modified	Yes	
5	1	60	CE	Walk In / Appointment	No	
6	1	1	IS	Level of Service	Yes	LOOKUP: SERVICE_LEVEL
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	7	ST	Authorization Number and Facility Code	Yes	Authorization Number.
	2	6	ST		Yes	LOOKUP: FACILITY; Authorizing Facility Code.
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	LOOKUP: PROVIDER_TYPE

ZV1 IHS Patient Visit Information Segment

DA100 Official Product of Documatron for DW1

ZV1 **IHS Patient Visit Information Segment**

Version Number: 2.4

Seq	Comp	Len	DT	Rep	Element Name	Sup	Desc
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Seq	Comp	Len	DT	Rep	Element Name	Sup	Description
22	1	4	NM		Activity Time	Yes	Total time in minutes.
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	60	ST		CHS Purchase Order Number	Yes	
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	LOOKUP: SVC_TYPE
33	1	2	IS		Service Category	Yes	LOOKUP: SVC_CATEGORY
34	1	5	IS		Evaluation and Management CPT	Yes	
35	1	6	IS		Cause of Death	Yes	Nationally recognized standard code set (http://www.cdc.gov/nchs/icd9.htm)
36	1	2	IS		Discharge Service	Yes	LOOKUP: SERVICE
37	1	1	IS		Discharge Type	Yes	LOOKUP: INP_DISPOS
38	1	4	NM		Length of Stay	Yes	Length of stay in days.

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ZVP IHS Patient Provider Segment

Version Number: 2.4

Seq	Comp	Len	DT	Rep	Element Name	Sup	Description
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	LOOKUP: AFFILIATION; Provider Affiliation.
	2	2	ST			Yes	LOOKUP: PROVIDER_DISC; Provider Discipline.
3	1	3	IS		Provider Code	Yes	Sending application's provider classification; typically initials.
4	1	2	IS		Provider Classification	Yes	LOOKUP: PROV_X12_CLASS
5	1	5	IS		Provider Specialty	Yes	LOOKUP: PROV_X12_SPEC
6	1	2	IS		Provider Type	Yes	LOOKUP: PROV_X12_TYPE
7	1	1	BL		Midwifery	Yes	"Y" = Provider is a midwife, otherwise "N".

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