

Episode Identifier Solution

Case

From business perspective, the HIC requires the episode of care identifier from the provider in order to address the multiple claims for the same episode of care.

i.e., 1) a patient comes to a Provider and rendered a certain service (blood test), a claim has been initiated to the payer for this visit containing an episode identifier, later, a follow up visit been made by the patient and additional services (radiology test) been rendered, the provider will submit a claim for this visit with the same episode identifier highlighting to the payer that these claims are within the same episode of care.

If the patient has multiples visits for different services within the same episode of care, the rendered services can be claimed separately sharing the same episode of care identifier.

Example:

- The patient got admitted on 20th of Nov.
- The claim will be sent the end of the month for all the services rendered within that period with an episode identifier.
- The patient got discharged on 15th of Dec
- Another claim will be sent after the discharge including the remaining services that been rendered in that period
- Both claims will report the same episode of care identifier, so the payer is informed and will be able to link all the claims within the same episode of care.

The below extension will be added and applied as mandatory to all types of claims

Episode Identifier on nphies

| Field | Description | Min | Max | Data Type |
|-------------------------|---|-----|-----|------------|
| Claim.extension.episode | The provider specific episode identifier. | 1 | 1 | Identifier |

*nphies will not validate if the identifier is duplicated it will only check if it contains a system and a value.

```
{  
  "extension": {  
    "url": "http://nphies.sa/fhir/ksa/nphies-fs/StructureDefinition/extension-episode",
```



```
    "valueIdentifier": {  
      "system": "[BaseURL]/extension-episode",  
      "value": "episode123ABC"  
    }  
  }  
}
```