

Encounter Notification Service (ENS) for Hospitals Overview

What is Encounter Notification Service for Hospitals?

Encounter Notification Service (ENS) for Hospitals is a service provided by HealthShare Exchange that alerts HSX-member hospitals about their discharged patients who are subsequently admitted within a defined timeframe (e.g., 30 days, 45 days) to HSX-member emergency departments, hospitals, and skilled nursing facilities. Notifications are delivered real time on a per-patient basis or as a summary list.

Subscribing participants can choose:

- How often they receive notifications (e.g., real-time, daily, twice a day).
- How to receive notifications (e.g., direct secure message, SFTP).

Why should hospitals subscribe to ENS?

When hospitals and health systems are at risk for managing the care of patients, it is advantageous for them to quickly know when one of their recently discharged patients presents for a potential re-admission. When medical service areas and their health systems have this type of notification service in place, they can experience improvements in care coordination.

How can hospitals and health systems participate with ENS?

To engage this service, a hospital or health system must:

- Provide an admit, discharge, transfer (ADT) feed to HSX. These feeds allow HSX to automatically subscribe discharged patients from the inpatient setting to a roster for a period of time for the participating hospital.
- Determine what period of time the hospital wants to track patients post-discharge.
- Determine who should receive notifications about auto-subscribed patients.
- Complete the HSX ENS Onboarding Form.
- Complete the HSX Webmail Access Request Form, if needed.

How does HSX match the patient a participating hospital submits with the information it received from its other member hospitals?

HSX combines patient demographic information received from its data providers into a Master Patient Index (MPI) and uses a tested, weighted algorithm to match patients. HSX monitors the MPI and conducts quality assurance to verify the accuracy of the patient data it maintains. As more information is provided to HSX from more data sources, HSX continuously improves its matching algorithm.

What do I do if I receive a notification about a patient in error?

Please notify the HSX Privacy and Security Officers immediately by calling 1-855-479-7372 or sending an email to concerns@hsxsepa.org. Please do not include any patient health information (PHI) in the email.

What does the summary list of notifications look like?

See template below.

Example of Encounter Notification Summary:

Destination Facility	Destination Practice	Primary Care Provider	Destination MRN	Source Facility	Source MRN	First Name	Middle Name	Last Name	Gender	Date of Birth	Address	City	State	Zip	Primary Phone
ABC Medical Group	Practice 1	Dr. Jones	12345	Hospital 1	ABC12345	Joe	A	Test	Male	xx/xx/xxxx	123 Main Street	Philadelphia	PA	12345	xxx-xxx-xxxx
ABC Medical Group	Practice 2	Dr. Smith	87654	Hospital 1	XYZ87654	Mary		Test	Female	xx/xx/xxxx	456 Cherry St.	Cherry Hill	NJ	12345	xxx-xxx-xxxx
ABC Medical Group	Practice 1	Dr. Jones	91283	Skilled Nursing Facility 8	PQR87647	Pam	C	Test	Female	xx/xx/xxxx	934 Lion Circle	Havertown	PA	45678	xxx-xxx-xxxx
ABC Medical Group	Practice 4	Dr. Miller	83745	Hospital 3	KJ098384	William		Test	Male	xx/xx/xxxx	874 Ryans Way	Cape May	NJ	45678	xxx-xxx-xxxx
ABC Medical Group	Practice 5	Dr. Gonzalez	13789	Hospital 2	UI012374	Amy	K	Test	Female	xx/xx/xxxx	109 Main Street	Langhorne	PA	98345	xxx-xxx-xxxx
ABC Medical Group	Practice 6	Dr. Orion	76345	Hospital 10	YHT7645	Karen	S	Test	Female	xx/xx/xxxx	101 Hwy 1	Christiana	DE	12367	xxx-xxx-xxxx

Source Setting	Event Type	Admit Date	Admit Time	Admit Reason	Admit Type	Referral Information	Discharge Date	Discharge Time	Death Indicator	Diagnosis Code	Diagnosis Description	Discharge Disposition	Attending Doctor	Insurance
Inpatient	Admission	xx/xx/xxxx	xx:xx	Chest Pain	Emergency	Physician			N				Dr. Alley	IBC
Emergency	Patient Registration	xx/xx/xxxx	xx:xx	Fatigue	Emergency	Physician Referral			N				Dr. Callahan	AmeriHealth
Inpatient	Discharge	xx/xx/xxxx	xx:xx	Pneumonia	Routine	Transfer from	xx/xx/xxxx	xx:xx	Y	x,xxx	Pneumonia	Pt. expired	Dr. R. Smith	Aetna
Emergency	Discharge	xx/xx/xxxx	xx:xx	Laceration	Emergency		xx/xx/xxxx	xx:xx	N			Discharged to Home	Dr. Doe	United
Inpatient	Transfer	xx/xx/xxxx	xx:xx	Chest Pain	Routine	Physician			N	x,xxx	Heart Disease		Dr. Hall	IBC
Emergency	Discharge	xx/xx/xxxx	xx:xx	CHF	Emergency	Physician	xx/xx/xxxx	xx:xx	N			Discharged to Home	Dr. Pope	HPP

To join the HSX membership, email:

info@healthshareexchange.org