

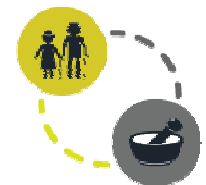
Homelink workgroup

Recip-e for patients in resthomes

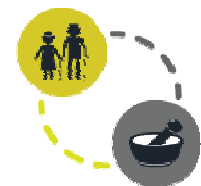


Agenda

- Actual and new flow
- Specifications and alternative flows
- Homelink formats
- Campusbesluit
- Development & Testing
- Timeline

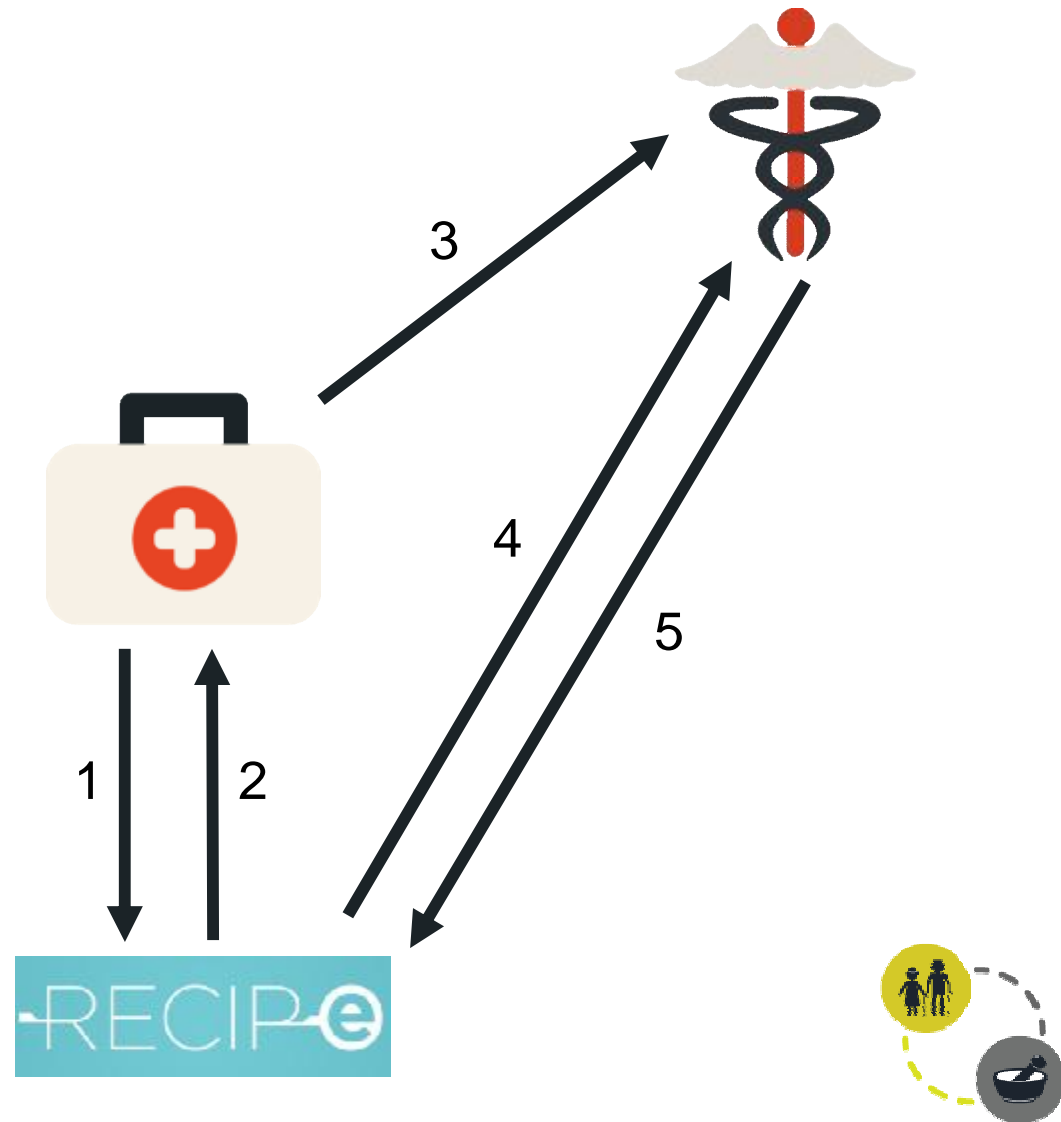


- Electronic medication prescription
- Rule starting at 01/01/2018
 - Postponed 3 months?
- Homelink-workgroup discusses the flow and formats, not how it is implemented in every software!
- Validation for formats by RIZIV, Recip-e and APB
- Abbreviations
 - MD=Medical doctor / EMD=Electronic Medical Dossier
 - RH=Resthome / ERD=Electronic Resident Dossier
 - PH=Pharmacy / EPD=Electronic Pharmaceutical Dossier

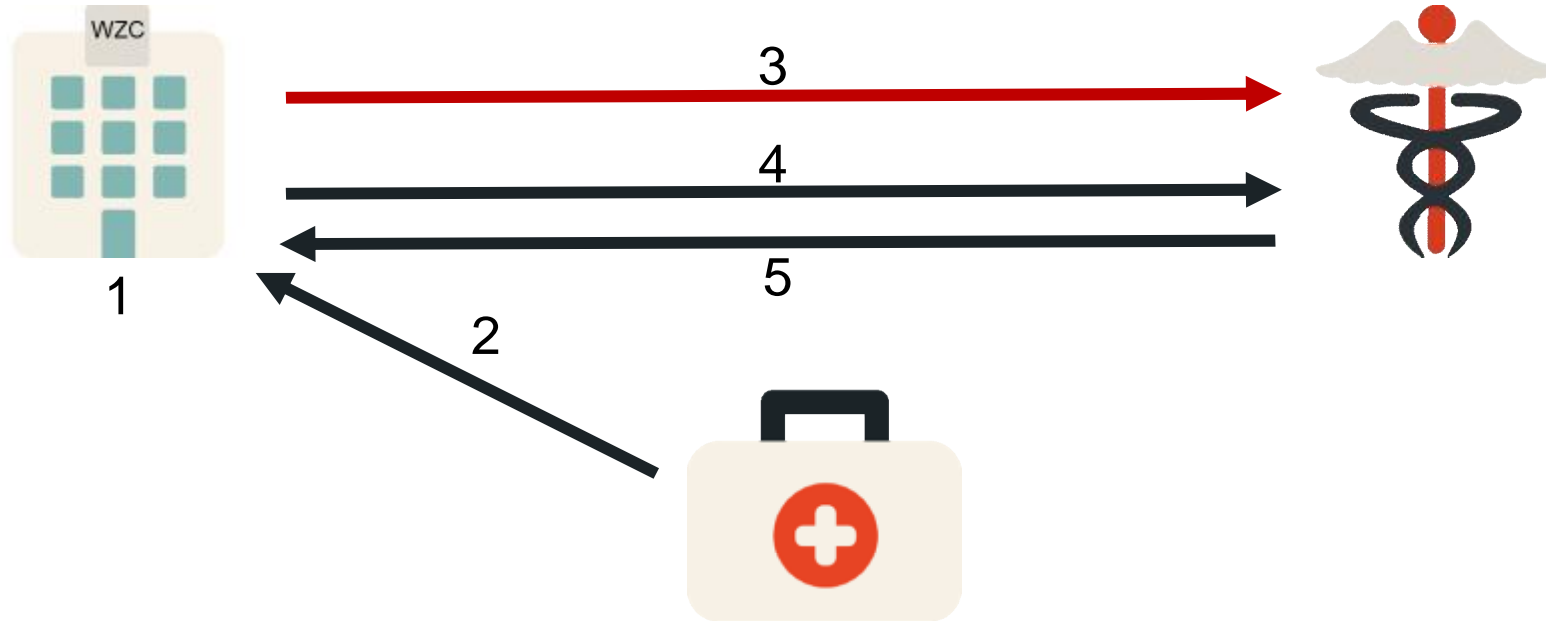


Recip-e: actual flow «ambulant» patient

1. MD sends prescription to Recip-e
2. Response Recip-e with RID (barcode)
3. Prove of prescription with patient to PH
4. PH scans RID and checks Recip-e
5. PH updates Recip-e



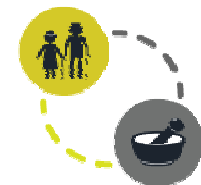
Actual flow resthomes



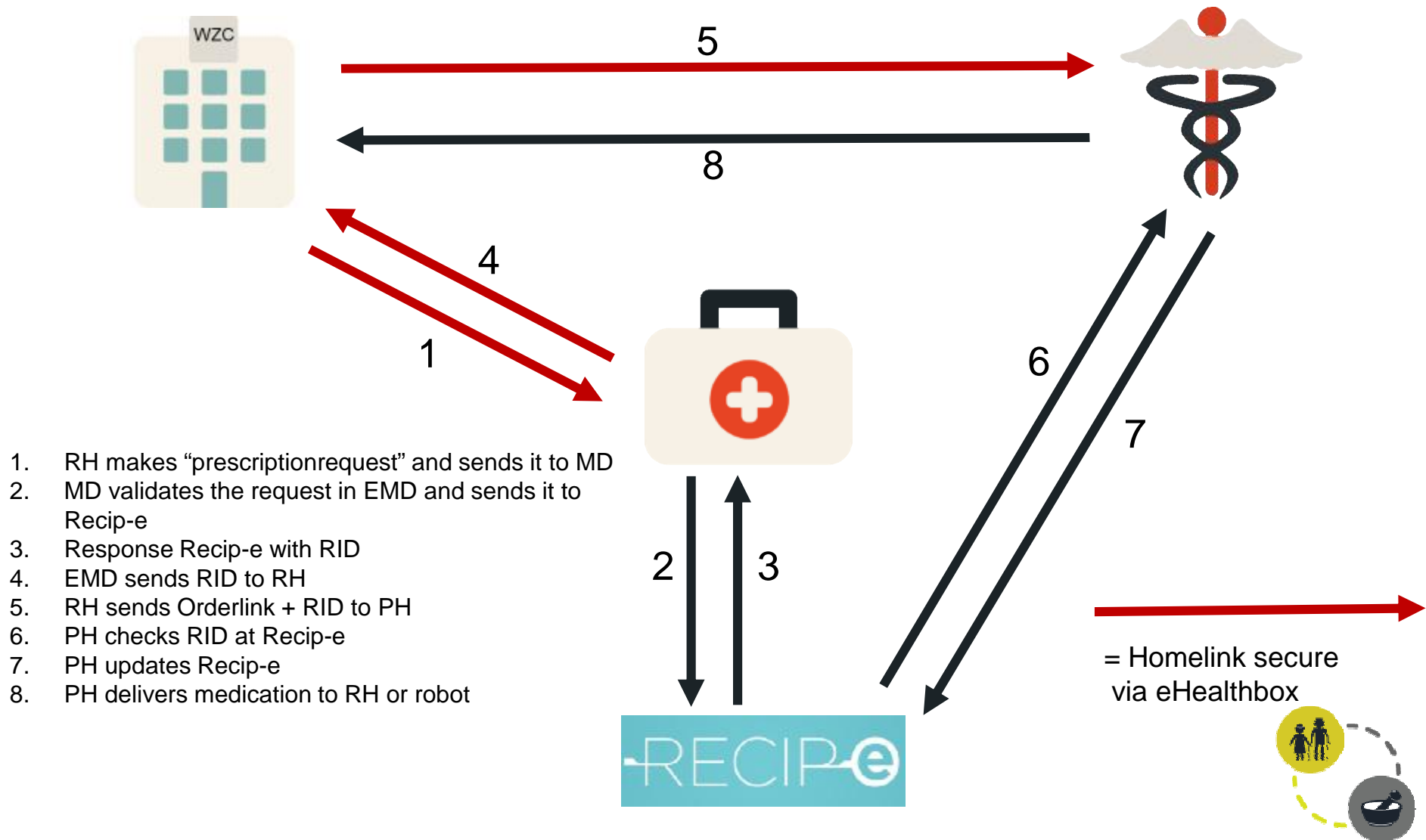
1. RH prints prescription
2. MD signs prescription at the RH
3. RH sends Orderlink to pharmacy
4. RH sends signed prescription to PH
5. PH delivers medication to RH or robot



= Homelink secure
via eHealthbox

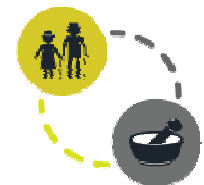


New flow for Recip-e in resthomes



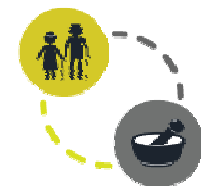
New flow for Recip-e in resthomes

- Advantages
 - Shorter period between request and order
 - MD does not have to visit the RH for signature
 - Less risk for late signature
 - Better follow-up for the 3 parties
 - Medicationscheme in EMD possible
 - Solution for doctorspractice with multiple MD



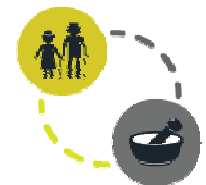
Specifications and alternative flows for resthomes

- Request always starts at resthome
 - Formulary ERD/EPD are aligned, NOT with formulary EMD!
 - No first request allowed from EMD, as CNK might not be known in formulary RH
- Starting a new medication
 - 2 options
 - Registration in ERD
 - Immediate validation by MD if possible (Mobile EMD!)
 - Validation by MD when at practice
 - Manual prescription (to avoid)
 - When urgent, order without RID allowed
- What if MD refuses validation?
 - Prescription denial by MD via eHealthBox, reason why is mandatory
 - Request to end medication è ending posology in ERD
 - Request to change medication è launching new request in ERD after modification
 - Request to change posology è launching new request in ERD after modification

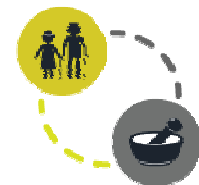


Specifications and alternative flows for resthomes

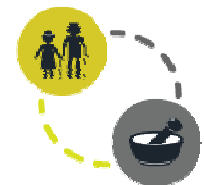
- At late validation by MD
 - Order allowed without RID from ERD, but message shown
 - Not allowed for following prescription as long as first one is not validated
 - When validated, RID is to be add in next order (no special format for late validations)
 - In second phase reminder to be sent to MD
- MD does not use eHealthBox yet
 - Keeping paper flow
 - Manual input RID in ERD if using Paris
 - Mixed situation in first months 2018
- EMD does not support the new flow
 - à Alternative solution via Hector
- Pharmacy manages medication for resthome
 - Implementation prescriptionrequest to MD in EPH



- **Prescription request**
 - 1 message per prescription with attachment
 - Attachment = Adapted Recip-e format (KMEHR)
 - Functional type = PRESCRIPTION_REQUEST
 - Contains RIZIV/INAMI n° RH & internal ID ERD
- **Prescription confirmation/denied/error**
 - 1 message per prescription with attachment
 - Attachment = Adapted Recip-e format (KMEHR)
 - Functional type = PRESCRIPTION_REQUEST
 - Same info as request
 - If validated, RID is added
 - If denied or error, reason why is added (mandatory)
- **Orderlink**
 - RID is added
 - If late validation, new section with reference to original order
- **See <https://homelinksecure.atlassian.net/wiki/spaces/HS/overview>**
 - Recip-e : <https://homelinksecure.atlassian.net/wiki/spaces/HS/pages/35028997/Recip-e+for+elderly+care+institutions>
 - Orderlink : <https://homelinksecure.atlassian.net/wiki/spaces/HS/pages/1179657/Orderlink>

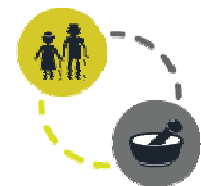


- 3 RH on different locations with different RIZIV/INAMI n^os can have a administrative fusion
- Only Flanders
- +/- 20 cases
- Fusion = 1 RIZIV/INAMI n^o, but keeping 3 Flemish recognition-n^os
 - è One eHealthBox with the same NIHI certificate
 - è But still 3 ERD
- Solution: use of NIHI Certificate with 3 different application ID's
- Implementation needed in EMD, ERD and APD



Development & Testing

- General questions at mike.dumortier@corilus.be
- Use acceptance environment
- For Elderly Care
 - Use NIHII 73000121
 - For Campusbesluit NIHII 73000121 Application-ID CAMPUS1
 - Contact: mike.dumortier@corilus.be
- For Medical
 - Use NIHII 10051079001
 - Contact: jan.grauwels@healthconnect.be
- For Pharma
 - Use NIHII 21674946
 - Contact: seb.wauters@corilus.be
- Please always send mail before you start testing.



Timeline

- Development : Q3/2017
- Pilot : Q4/2017
- Goto market : Q1/2018

