

CARIN Blue Button® IG

STU2 Change Overview



CARIN BlueButton STU2 – Change Overview

Substantive Changes

<https://build.fhir.org/ig/HL7/carin-bb/index.html>

<https://jira.hl7.org/secure/Dashboard.jspa?selectPageId=14005>

Added Oral [ExplanationOfBenefit](#) profile

- Based On the Professional & NonClinician EOB profile
- Includes bodySite binding for Oral Cavity or tooth number and subsite for tooth surface
- Includes Orthodontics, Prosthesis, Missing Tooth Number, and Additional Body Site slices on supportingInfo
- Guidance and invariants on bodySite, subsite, and supportingInfo[additionalbodysite] slice

Added Vision as an [ExplanationOfBenefit.type](#) to [Professional NonClinician](#) profile for Vision EOBs

Changed cardinality of [ExplanationOfBenefit.item](#)

- from 0..* to 1..* in [Base ExplanationOfBenefit profile](#) requiring [ExplanationOfBenefit](#) for all [all Resource ExplanationOfBenefit profiles](#)

Require [item.location\[x\]](#) to be only [CodeableConcept](#) in [Professional](#) and [Oral](#) [ExplanationOfBenefit](#) profiles

Changed [Professional NonClinician ExplanationOfBenefit](#) [item.location\[x\]](#) from cardinality of 0..1 to 1..1 and added Must Support

Changed [item.serviced\[x\]](#) and [billablePeriod](#) cardinality

- [ExplanationOfBenefit.item.serviced\[x\]](#) from 0..1 to 1..1 and [billablePeriod](#) from 0..1 to 1..1 for [Outpatient Institutional ExplanationOfBenefit profile](#)
- [ExplanationOfBenefit.item.serviced\[x\]](#) and [ExplanationOfBenefit.billablePeriod](#) from 0..1 to 1..1 for [Professional NonClinician ExplanationOfBenefit profile](#)
- [ExplanationOfBenefit.item.serviced\[x\]](#) from 0..1 to 1..1 for [Pharmacy ExplanationOfBenefit profile](#)



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Moved Benefit Payment Status Information

- Moved ExplanationOfBenefit.total[benefitpaymentstatus] slice to ExplanationOfBenefit.adjudication[benefitpaymentstatus] (therefore not requiring an amount property) for [Inpatient Institutional](#), [Outpatient Institutional](#), [Pharmacy](#), and [Oral](#) ExplanationOfBenefit profiles, changed the pattern to match other adjudication repetitions, and update the invariants appropriately
- In ballot was moved to supportingInfo, but then to adjudication in ballot reconciliation

Changed performing to rendering

- Changed codes term of "performing" provider to "rendering" provider in the [Claim Care Team Role](#) and [Adjudication Discriminator](#) CodeSystems and in [Oral ExplanationOfBenefit](#) and [Professional NonClinician ExplanationOfBenefit](#) profiles rendering provider network status

Changed billing and rendering network contracting tatus from supportingInfo slice to billing/rendering network status in adjudication

- Changed rendering network status from ExplanationOfBenefit.supportingInfo slice to ExplanationOfBenefit.adjudication slice in [Oral ExplanationOfBenefit](#) and [Professional NonClinician ExplanationOfBenefit](#) profiles and changed billing network status ExplanationOfBenefit.supportingInfo slice to ExplanationOfBenefit.adjudication slice in [all non-abstract ExplanationOfBenefit profiles](#)
- Changed provider "contracting network status" to provider "network status" slicing, CodeSystems, and ValueSets harmonizing contracting and network status

Changed [Practitioner](#) and [Organization](#) profiles identifier.type NPI

- Changed NPI slice Identifier.type to use the code `NPI` from CodeSystem <http://terminology.hl7.org/CodeSystem/v2-0203>



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Significant Changes

Added RelatedPerson Payee.party

- Changed payee.party cardinality from 1..1 to 0..1
- Added invariant requiring payee.party if payee.type='other' in [Base ExplanationOfBenefit profile](#)
- Added new [RelatedPerson profile](#) as a reference option

Updated the definition of [Must Support](#)

- Defining server requirements saying "Health Plan API actors **SHALL** be capable of populating all data elements the payer maintains" which are marked as Must Support
- Remove client requirement that "Consumer App actors **SHOULD** be capable of storing the information for other purposes"

Opened adjudication slicing

- Changed ExplanationOfBenefit.adjudication and ExplanationOfBenefit.item.adjudication slicing from closed to open for [all Resource ExplanationOfBenefit profiles](#)

Add not-applicable code to product-or-service

- Add not-applicable code to [Professional Procedure Codes ValueSet](#) and [Oral Procedure Code ValueSet](#) for [Professional NonClinician ExplanationOfBenefit profile](#) (with Invariant allowing only if type = vision) and [Oral](#) (ExplanationOfBenefit.item.productOrService)

Add Non-emergency transport data to professional profile

- Added Non-emergency transport information to ExplanationOfBenefit.supportingInfo slices to the [Professional NonClinician ExplanationOfBenefit profile](#) along with invariant rules



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Significant Changes

Changed meta.profile requirements

- Removed meta.profile requirements on [Abstract base ExplanationOfBenefit profile](#)
- Changed other profiles constraints to invariant not requiring matching patch version

Added refills authorized in Pharmacy EOB

- Added refillsAuthorized slice to ExplanationOfBenefit.supportingInfo of [Pharmacy ExplanationOfBenefit](#) profile ([FHIR-33487](#))

Made changes to search parameter requirements

- Added [service-start-date search parameter](#) and [billable-period-start search parameter](#)
- Added `_id` search parameter for all resources and change conformance expectation for Practitioner and Organization resources to SHOULD to allow for them to be supported as contained resources
- Added guidance on the expectation of `_include` support and interpretation of `_include=ExplanationOfBenefit:*` to [search Parameters page](#) and [Capability Statement](#) including adding ExplanationOfBenefit:payee

Guidance on understanding of ExplanationOfBenefits & rendering considerations

- [Guidance](#) with an example printed explanation of benefit with mappings to CPCDS elements and resource paths

