

Enrollment Response Fhir Resource Proposa

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Enrollment Response

Owning committee name

[Financial Management](#)

Contributing or Reviewing Work Groups

- [Patient Administration](#)

FHIR Resource Development Project Insight ID

994

Scope of coverage

Represents response to enrollment requests for all types of insurance coverage for healthcare-related services. This includes purchased coverage, employer plans, government funded plans, identifiers for state-funded healthcare not modelled/identified as insurance, etc. It includes response to enrollment requests for coverage for humans as well as animals.

RIM scope

Contract class with classCode of COV and moodCode of INT.

Resource appropriateness

Enrollment Response is a determination by a public or private healthcare insurer that initial enrollment in or maintenance of coverage is approved, and the premium payment required to procure a specified period of that coverage.

Expected implementations

Referenced by CCDA in situations where coverage has is not yet effective, is effective, or has lapsed.

Content sources

- v2 IN1, IN2, IN3 segments
- v3 Eligibility and Coverage models
- X12 270, 271, 834, 820
- NCPDP

Example Scenarios

Initial, periodic, and yearly enrollment in public health programs (e.g., Medicaid/Medicare) or private health insurance in the individual or group insurance markets.

Resource Relationships

Enrollment Response is associated to Coverage, Patients as covered parties, and RelatedPersons or Organizations as policy holders.

Enrollment Response is referenced by Eligibility Response and Claim Payment (aka Remittance Advice, where the payee is the insurer and the payor is the policy holder).

Timelines

Part of initial DSTU.

gForge Users

N/A