Invoice FHIR Resource Proposal

Invoice

Owning committee name

Financial Management

Committee Approval Date:

FM Approval (17 Jan 2019 Paul Knapp/Brian Postlethwaite 10-0-0) PA Approval (4 April 2018 Brian Postlethwaite/Simone Heckmann 3-0-0)

Contributing or Reviewing Work Groups

Patient Administration

FHIR Resource Development Project Insight ID

pending

Scope of coverage

In cases where the provider bills another party directly for products and/or services, an Invoice is used. An invoice is a financial instrument issued by a Healthcare provider to a patient or other party indicating the goods and services performed with their quantities and prices.

The Claim resource is constricted to use cases where a request for reimbursement is sent on behalf of the insured to an insurance for reimbursement under a specified policy.

An Invoice can use ChargeItems in an Account to provide the details to support the creation of an Invoice.

RIM scope

FinancialTransaction[MoodCode=RQO]

Resource appropriateness

Tracking Financial information is vital in Patient Administration and Finance systems in most Healthcare Organizations. This resource provides the details of the invoice, and which items are allocated to it.
Competing invoicing standards such as EDIFACT or X12 are aiming at inter-organisational exchange and do not offer traceable links in FHIR to the services rendered.

**Expected implementations**

- Any solution that tracks billing information and needs to issue invoices
- Providers who want to deliver structured information to patients to increase cost transparency
- A Patient facing application that handles healthcare invoice information, such as costs, amounts and reasons of the charged costs for the healthcare services a patient received
- Interested implementing organizations: SAP, IBM, Association of Private Insurers in Germany
- more interested parties: https://chat.fhir.org/#narrow/stream/4-implementers/topic/Invoices

**Content sources**

Content for the resource has considered the existing normative V3 and V2 specifications and other knowledge of invoicing in general

**Example Scenarios**

- Invoicing between systems that primarily interact using FHIR API
- Patient Apps

Patient apps may chose to not only give patients access to their health data but also to the charges associated with them (e.g. provide insight into the cost for medications, treatments and immunizations). Such apps will require structured invoices to allow association between the charges and the services rendered.

Apps can provide abilities to trace and compare costs or deliver additional information as to the meaning of specific billing codes.

These internally provider created and processed FHIR based invoices may be mapped to other standards such as X12 for posting in external systems.

**Resource Relationships**

- Reference to Account (account)
- Reference to ChargeItems (items)
- Reference to Encounter/EpisodeOfCare (via Account) (context)
- Reference to Patient|Group (subject)
- Reference to any type of Request/Referal (basedOn) (via Account)
- Reference to any type of Event (service)
- Payor (Organization|Patient|RelatedPerson)

Referenced by:

- Claim

**Timelines**

A draft is included in R4.

**gForge Users**

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**When Resource Proposal Is Complete**

When you have completed your proposal, please send an email to FMGcontact@HL7.org