IS-H  SAP Healthcare - Ind.-Specific Compnt.

SAP ERP Central Component
Release 6.0

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37.1 SAP ECC Industry Extension Healthcare 6.0

Use

These release notes provide an overview of the new features offered by SAP ECC Industry Extension Healthcare 6.0, business functions SAP Patient Management and SAP Ambulatory Care Management.

This version is part of mySAP ERP 2005.

To use the functions of SAP Patient Management, you must activate the business function set Healthcare. This is automatically preset for all upgrade customers. The business function SAP Patient Management (ISH_MAIN) is thus automatically activated. To use the functions of SAP Ambulatory Care Management, you also have to activate the business function SAP Ambulatory Care Management (ISH_AMBULATORY).

Note: The activation of a business function set or of a business function is analogous to the installation of an Add-On and is irreversible.

If you have skipped one or more releases, it is essential that you read the release notes for the release(s) concerned - both those for SAP Patient Management and those for the mySAP Technology Components. The SAP Patient Management release notes are located on the SAP Service Marketplace (http://service.sap.com) under the quick link healthcare-releasenotes.

For information about how to generate the release note structure, see the SAP Note 195299. This SAP Note also contains details on how to generate country-specific release note structures.

This new release contains new functionality and improvements. Some of these may require you to modify your system configuration after upgrading. Consequently, you should check, and, if necessary, perform the Customizing activities mentioned in the following documentation. This applies, in particular, to the activities listed in the section entitled Important Activities. Such activities are usually necessary if you wish to use new or enhanced functions.

In many chapters of the online release notes, you can directly access the relevant section of the IS-H Implementation Guide. In Customizing, you can also generate a view containing all upgrade Customizing and/or delta Customizing activities. When doing this, please make the following specifications:

- Specify IS-H for the Add-On ID.
- You have to respect a particular notation when entering the values for From Release and To Release. Examples of the naming convention from earlier IS-H Releases are 4.01A/0, 402A, 403A, 461A, 462, 463.463B, 471 and 472. The name of the current release is 600. For comprehensive information about generating views, please refer to the online documentation, which you access - if the latest documentation DVD has been installed - by choosing Help -> SAP Library. Then choose SAP Library -> SAP NetWeaver -> Solution Life Cycle Management -> Customizing (BC-CUS) -> Customizing (BC-CUS).

A number of release notes relate exclusively to developments for particular country versions. Such
release notes are identified by country keys in their short text. For example:
- AT: Release note for the country version Austria
- CA: Release note for the country version Canada
- CH: Release note for the country version Switzerland
- DE: Release note for the country version Germany
- SG: Release note for the country version Singapore

The functions described in country-specific release notes have not been released for other country versions.

If various changes described in a release note apply to particular country version, this is indicated by a reference to the respective country version, or by the country key.

Note on the topic "DRGs": The DRG guide is located on the SAP Service Marketplace under the quick link /healthcare-guides.

The next SAP Patient Management Release is part of mySAP ERP 2007, and is scheduled to be shipped in Q2/2007. Updates about this are located on the SAP Service Marketplace under the quick link /releasestrategy. Changes that result from legal requirements before this date will be shipped in Add-On-Support Packages.

SAP for Healthcare Development

37.2 Important Activities

Use

Note the following important activities for SAP ECC Industry Extension Healthcare 6.0:

Authorization Check when Maintaining Planning Objects and Time Slots

In the Appointment Management area, you can now check relevant authorizations by means of the authorization object N_AMB_DSP and the new activities T0 (Display Time Slots) and T1 (Maintain Time Slots) when planning object data and time slot- or admission capacity data is maintained.

Note that all users for whom you previously restricted the activities with respect to the authorization object N_AMB_DSP are not authorized to maintain planning objects and time slots after the new release has been implemented. Add the new activities T0 and/or T1 to the authorization for the users concerned.
Service Rules

This section only applies to upgrade customers who have not already carried out this activity for one of the Add-On Support Packages:

Refer to the release notes DE: Service Rule R7 Charge Proposal (Flat Rates per Case + Procedures Surcharges) (Changed) and DE: Service Rule R22 “Generate Additional Charges (FPV)” (New). Then, deactivate the service rule R7 and activate the service rule R22, if necessary.

AEB Statistics

Refer to the release note DE: AEB Statistics (Changed). Copy the new standard layout of the SAP List Viewer for the report IS-H DE: E3.1 Statistics (Case-Related Charges according to §6(1)/§6(2) KHEntgG) (RNSE31) from client 000 into your production clients with the help of the report RKKBALVI:

- E3.1 KHEntgG 2005 Services without Individual Case Display (1KHENT05OHNE)
- E3.1 KHEntgG 2005 Service with Single Case Display (1KHENTG05MIT)

A step-by-step description of this procedure is available on the SAP Service Marketplace under the quick link /healthcare-guides in the Statistics Guide DE: AEB Statistics under E3.1 Statistics -> Output -> Layout according to KHEntgG.

Case Archiving in IS-H

Refer to the release note Harmonization of Archiving Reports (New). Make the following changes in the IMG activity Set Up Case Archiving:

Call up the detail display for the archiving object ISH_FALL. For the Test Mode Variant field, select the variant SAP&TEST and for the Production Mode Variant field, select the variant SAP&PROD.

Then call the report RNARCF0D. Delete the variants PRODUKTIV and TESTLAUF for this report.

37.3 Switch to SAP List Viewer (ALV) (Changed)

Use

For SAP ECC Industry Extension Healthcare 6.0, we have switched over many reports to SAP List Viewer (ALV) technology. The reports concerned are listed in the SAP Note 831419.
37.4 Deleted Reports (Deleted)

Use

A number of reports have been deleted for SAP ECC Industry Extension Healthcare 6.0. These reports are listed in the SAP Note 848915.

For further information, see the following release notes:
- Statistics-, Master Data- and Utility Reports (Deleted)
- Program for Table NFALA Migration (Deleted)
- AT: Statistics (Changed)

37.5 Form Output with Adobe Forms (New)

Use

As of SAP ECC Industry Extension Healthcare 6.0, you can output forms using PDF print forms (Adobe Forms).

The table below lists the existing forms in SAPscript and Smart Form format with the equivalent Adobe Forms:

<table>
<thead>
<tr>
<th>SAPscript Form</th>
<th>Adobe Form</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>N_ANZ_UEBERW</td>
<td>ISH_DOWNPAYMENT_REQ</td>
<td>Down Payment Request</td>
</tr>
<tr>
<td>N_ANZ.Quit</td>
<td>ISH_DOWNPAYMENT</td>
<td>Down Payment Receipt</td>
</tr>
<tr>
<td>N_TERMIN_BENACHR</td>
<td>ISH_VISIT_APPOINTMENT</td>
<td>Outpatient Appt Notification</td>
</tr>
<tr>
<td>N_EINBESTELLUNG</td>
<td>ISH_NOTIFICATION</td>
<td>Outpatient Admission Notification</td>
</tr>
<tr>
<td>N_AUFNAHMEANZEIG</td>
<td>ISH_ADMISSION_NOTIF</td>
<td>Admission Data for Ins. Provider</td>
</tr>
<tr>
<td>N_AUFVERTRAG</td>
<td>ISH_ADM_RELEASE_FORM</td>
<td>Admitting Release Form</td>
</tr>
<tr>
<td>N_BEGLEITPERSON</td>
<td>ISH_COMPANION</td>
<td>Companion Data</td>
</tr>
<tr>
<td>Code</td>
<td>Description</td>
<td></td>
</tr>
<tr>
<td>------------------</td>
<td>-----------------------------------------</td>
<td></td>
</tr>
<tr>
<td>N_ENTLASSANZEIGE</td>
<td>Discharge Notification for Ins.</td>
<td></td>
</tr>
<tr>
<td>N_ENTBINDUNG</td>
<td>Delivery Data</td>
<td></td>
</tr>
<tr>
<td>N_GEBANZEIGE</td>
<td>Birth Registration</td>
<td></td>
</tr>
<tr>
<td>N_KAV_MAHN</td>
<td>Medical Record Reminder</td>
<td></td>
</tr>
<tr>
<td>N_MATANF_CASE</td>
<td>Material Requisition per Case</td>
<td></td>
</tr>
<tr>
<td>N_MATANF_OE</td>
<td>OU-Related Material Requisition</td>
<td></td>
</tr>
<tr>
<td>N_ENTLEIHSCHEIN</td>
<td>Borrowing/Request Slip</td>
<td></td>
</tr>
<tr>
<td>N_PDATEN</td>
<td>Patient Data Sheet</td>
<td></td>
</tr>
<tr>
<td>N_ETI</td>
<td>Patient Labels</td>
<td></td>
</tr>
<tr>
<td>N_PMT_QUIT</td>
<td>Receipt for Incoming Payment</td>
<td></td>
</tr>
<tr>
<td>N_BARZTSCHEIN</td>
<td>External Physician Certificate</td>
<td></td>
</tr>
<tr>
<td>N_KRANKENSCHEIN</td>
<td>Sickness Certificate</td>
<td></td>
</tr>
<tr>
<td>N_NOTFALLS Schein</td>
<td>Emergency/Referral Certificate</td>
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</tr>
<tr>
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<td>Work Incapacity Certificate</td>
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<tr>
<td>N_REZEPT</td>
<td>Prescription</td>
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<tr>
<td>N_UEBERSCHEIN</td>
<td>Referral Certificate</td>
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<td>Patient Master Data Sheet</td>
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<td>Copayment Form</td>
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<td>Copayment Receipt</td>
<td></td>
</tr>
<tr>
<td>N_ZUZ_RUECK</td>
<td>Copayment: Post Back Form</td>
<td></td>
</tr>
<tr>
<td>N_ZUZ_AVIS</td>
<td>Copayment: Payment Advice</td>
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</table>

**Note**

Smart Forms -> Adobe Forms

**Description**

<table>
<thead>
<tr>
<th>ISH_INSURANCE_ADMISSION_INFO</th>
<th>ISH_ADMISSION_NOTIF</th>
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<th>ISH_OUTPATIENT_COPAYMENT</th>
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<td>Outpatient Copayment Form</td>
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</tbody>
</table>

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<th>ISH_DRG_DATAS</th>
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</thead>
<tbody>
<tr>
<td>DRG-Relevant Data</td>
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</table>

<table>
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<td>Insurance Verification Request</td>
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</table>

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</thead>
<tbody>
<tr>
<td>Material Catalog</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
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<th>ISH_CLOSET_LIST</th>
</tr>
</thead>
<tbody>
<tr>
<td>Closet List</td>
<td></td>
</tr>
</tbody>
</table>
See also

For an overview of form use based on work organizer types including the function module names, see Healthcare -> SAP Patient Management -> Appendix -> Forms in SAP Patient Management in the SAP Library.

37.6 IS-H-ACM  SAP Ambulatory Care Management

37.6.1 SAP Ambulatory Care Management (New)

Use

As of SAP ECC Industry Extension Healthcare 6.0, the component SAP Ambulatory Care Management provides end-to-end, enhanced support for the entire outpatient treatment scenario, from planning, through administration and treatment to billing.

The main emphasize is on role-based work stations for the admission and treatment areas, for example. Of particular note is the introduction of the Outpatient Documentation Work Station, which provides the attending physician with a task-centric, navigationless work environment for all his or her specific tasks.

In the admission area, the Admission Work Station also provides specific process support for the main outpatient treatment forms, including:

- Treatment after an accident at work
- Treatment of a patient with statutory health insurance
- Treatment of a patient with private health insurance

General renewable document management enables you to document the issuing of various forms that follow the initial document and renewed document logic (for example, work incapacity certificates).

The integration of legally-required forms for panel physician (PPA) and workers' compensation (workers' comp.) treatment in the country version Germany, and functional enhancements to service entry and billing round off the portfolio.

PPA certification for the German market is planned for the end of 2005 for SAP Ambulatory Care Management.

Note that SAP Ambulatory Care Management requires and is based on SAP Patient Management (IS-H).
Effects on Customizing

To use the functions of SAP Ambulatory Care Management, you must activate the business function SAP Ambulatory Care Management (ISH_AMBULATORY).

See also

If you are interested by SAP Ambulatory Care Management, please contact your SAP sales representative.

37.6.2 IS-H-ACM-PLN Planning

37.6.2.1 SAP ACM: New Features for Planning (New)

Use

As of SAP ECC Industry Extension Healthcare 6.0, SAP Patient Management provides new features, such as flexible room planning for multiple organizational units. For detailed information, see the following release notes:

- Report for Migration of Movement Data in Preregistration (New)
- Appointment Confirmation Dialog (Changed)
- Authorization Check when Maintaining Planning Objects/Time Slots (New)
- Time Slot Changes in Visit Scheduling (New)
- Multiple Assignment of Building Units in Visit Scheduling (New)
- Admission without Appointment in Preregistration (Enhanced)

See also the information about enhancements to the planning component for i.s.h.med.

37.6.3 IS-H-ACM-ADM Administration

37.6.3.1 New Features in Outpatient Admission Area (New)

Use
As of SAP ECC Industry Extension Healthcare 6.0, end-to-end support for specific outpatient treatment types (for example, accident at work, self-payer) is provided for the administrative admission of outpatients.

A new classification for outpatient treatment types (case category) provides you with preconfigured admission variants that simplify the admission process.

In this context, the effective date of the patient's employment relationship has been added to the employer data.

Besides simplifying the admission process per se, the system also supports the management of renewable documents (for example, work incapacity certificates) for individual patients. This enables you to manage documents that obey the logic of renewable document chains based on initial documents and renewed documents.

Effects on Customizing

To use this function, you must activate the business function SAP Ambulatory Care Management (ISH_AMBULATORY).

37.6.3.2 Case Category (New for All Countries Except AT/CH)

Use

As of SAP ECC Industry Extension Healthcare 6.0, the case category is provided for all countries. (The Case Category object is already in use with a limited functional scope in the country versions Austria and Switzerland).

The case category is a semantic-free classification of the case. It is used to control the patient's treatment at an early stage and thus to trigger the appropriate type of documentation.

You can maintain the case category of your choosing. It enables you to determine the assignment of movement types, the selected admission variant, and the assignment of work situations.

The case categories you have defined and the assigned movement types are displayed for selection in a dialog box when a new movement or a new case is to be created. You can select one of the following options in this dialog box:

- A case category
- A movement type including case category
- Neither movement type nor case category

The system transfers your selection into the relevant admission fields.

The system also uses this selection to control variant determination for the Clinical Process Builder.
It also determines the set of work situations that are maintained for the corresponding case category.

You can change the case category of a case at any time. The system provides the customizable message N_OUTPATIENT 103 (Movement type &1 is not supported for case category &2) that checks the consistency between case category and movement types.

Note that the selection of the case category is determinant for the entire case and not simply the movement.

You can select the case category in a number of places in the system:

- Admission (transaction code NV2000 - Clinical Process Builder)
  By selecting the variant or access via the variant transaction. You can maintain the case category on the Case Data subscreen. The system does not display the dialog box for you to select the case category.

- Clinical Work Station (transaction code NWP1)
  By choosing Create Visit or Create Admission. The system displays a dialog box for you to select the case category and the movement type. It is possible to select just a case category, or a movement type with implicit case category, or neither case category nor movement type. The system then determines the variant on the basis of this selection.

- Appointment (transaction code NR16 - Visit Scheduling)
  You can enter the case category and the movement type in the appointment editor. If you have filled both of these fields, the system checks whether the assignment between the two exists. If this is not the case, the system issues the customizable message N_OUTPATIENT 103 (see below).
  If you create a movement from the appointment, the system transfers the case category and movement also.
  If you have left either of these fields empty, the system displays the dialog box for you to make a selection.

- Preregistration
  You can enter the case category and the movement type in the preregistration. If you have filled both of these fields, the system checks whether the assignment between the two exists. If this is not the case, the system issues a customizable message.
  If you create a movement from the preregistration, the system transfers the case category and movement type also.
  If you have left these fields empty, the system displays the dialog box for you to make a selection.

The case category is incorporated into the Business Add-Ins (BAdIs) of the Clinical Process Builder for presetting and checking case data.

The case category is also incorporated into the Business Application Programming Interfaces (BAPIs) for the case.

**Effects on Existing Data**

The case category already existed for the country versions Austria and Switzerland. Customizing for the case category contains indicators that the system does not take into account for the present usage. The previous entries are retained.

**Effects on System Administration**
Define Case Categories

You define the case categories for your system in the IMG activity Define Case Categories. You can use any keys, but they should be meaningful for the users.

For SAP Ambulatory Care Management, we suggest the following case categories that enable you to make complete use of the set of new features contained in this release:

- BG - Workers' compensation case
- KV - Panel physician association case
- NA - Emergency admission
- PV - Private patient billing

For further information, see SAP Healthcare - Industry-Specific Components for Hospitals -> Patient Management -> Cases -> Define Case Types in the IS-H Implementation Guide.

Store Assignments to Case Categories

In the IMG activity Maintain Assignments to Case Categories, you store the movement categories and movement types you want to assign to the case categories. This forms the basis for the subsequent assignment to admission variants. The movement types you wish to assign must have been stored in the IMG activity Define Movement Types. Note that the system does not check the indicators of a movement type in connection with a case category.

For further information, see SAP Healthcare - Industry-Specific Components for Hospitals -> Patient Management -> Cases -> Maintain Assignment to Case Categories and SAP Healthcare - Industry-Specific Components for Hospitals -> Patient Management -> Movements -> Define Movement Types in the IS-H Implementation Guide.

Activate Case Categories

In the IMG activity Activate Case Categories, make an entry for your institution to activate the selection of case categories for outpatient and/or inpatient cases.

For further information, see SAP Healthcare -> Patient Management -> Cases -> Activate Case Categories in the IS-H Implementation Guide.

Maintain Variant Determination Based on Case Categories

In the IMG activity Determine Variant for Clinical Process Builder, you can stipulate the case categories and movement types the system is to use when determining the admission variant. (Alternatively, you can call this table directly using the transaction code SM30).

SAP provides preconfigured variants for the case categories named above. You can also create and incorporate your own variants for the Clinical Process Builder and transaction variants.

For further information, see SAP Healthcare - Industry-Specific Components for Hospitals -> Basic Settings -> Screen Control -> Determine Variant for Clinical Process Builder in the IS-H Implementation Guide.
Maintain Work Situations Based on Case Categories

From the SAP Easy Access screen, you can store work situations by choosing Hospital -> Ambulatory Care Management -> Treatment -> Template Management Documentation Work Station. You can define the assignment to case categories, movement categories, and movement types on the Proposal Criteria tab page.

Maintain Customizable Message

You can change the message type for the message Movement type &1 is not supported for case category &2 using IS-H message control. You access the message control table by choosing SAP Healthcare - Industry-Specific Components for Hospitals -> Basic Settings -> System Parameters -> Maintain Messages in the IS-H Implementation Guide.

To change the message type, you have to make the following entries:

- Institution: <your institution> or *
- Function: NFAL
- Application Area: N_OUTPATIENT
- Message Number (MsgNo.): 103
- Default Type: I
- Message Text: Movement type &1 is not supported for case category &2

Effects on Customizing

To use this function, you must activate the business function SAP Ambulatory Care Management (ISH_AMBULATORY).

37.6.3.3 Clinical Process Builder Variants (New/Enhanced)

Use

As of SAP ECC Industry Extension Healthcare 6.0, new outpatient variants for the Clinical Process Builder are provided along with associated transaction variants. Variant determination has also been enhanced.

The new and enhanced features in detail:

Clinical Process Builder Variants

The new variants for the Clinical Process Builder enable the appropriate form of outpatient admission dependent on a control based on the case category.

The following new variants are provided:

- SAP ACM Panel Physician Association for panel physician association treatment
- **SAP ACM Workers’ Compensation** for workers’ compensation treatment
- **SAP ACM Emergency Admission** for emergency admissions
- **SAP ACM Privately Insured** for private physician treatment
- **SAP ACM Complete** for all variants.

**Transaction Variants**

Transaction variants are used to preset field values, to define required entry fields, and to suppress fields from the screen. For the new outpatient variants for the Clinical Process Builder, SAP provides additional transaction variants that support presettings in accordance with the case category. To enable you to directly call a variant with the associated transaction variant, a transaction is provided for each combination. The following new combinations are provided:

- NV2000 variant **SAP ACM Panel Physician Association**
  Transaction variant: SAP_AMB_KV
  Variant transaction: NV2000_AMB_KV
  Short description: *Panel Physician Treatment*

- NV2000 variant **SAP ACM Workers’ Compensation**
  Transaction variant: SAP_AMB_BG
  Variant transaction: NV2000_AMB_BG
  Short description: *Workers’ Compensation Treatment*

- NV2000 variant **SAP ACM Emergency Admission**
  Transaction variant: SAP_AMB_NA
  Variant transaction: NV2000_AMB_NA
  Short description: *Emergency Admission*

- NV2000 variant **SAP ACM Privately Insured**
  Transaction variant: SAP_AMB_PV
  Variant transaction: NV2000_AMB_PV
  Short description: *Private Physician Treatment*

- NV2000 variant **SAP ACM Complete**
  Transaction variant: SAP_AMB_ALL
  Variant transaction: NV2000_AMB
  Short description: *All Variants*

**Single Elements of Variant Determination**

You can enhance or create your own variants for the Clinical Process Builder using the new single elements. The system provides the following new single elements for the Clinical Process Builder:

- **ACM: Patient Name 1** subscreen
  Trimmed-down version of the *Name* subscreen for more concise entry of patient data.

- **ACM: Case Data** subscreen
  Trimmed-down version of the *Case* subscreen for more concise entry of case data.

- **ACM: Situations/>** subscreen
  New subscreen for displaying and assigning work situations for/to a patient.
- **Outpatient Copayment** subscreen
  New subscreen for entering the patient’s outpatient copayment.

The following new tab pages are provided to clearly organize the tab pages the Clinical Process Builder:
- **Outpatient Copayment** tab page
- **Work Situations** tab page
- **Visit Data** tab page
- **Diagnoses** tab page
- **Case Data** tab page
- **Patient** tab page
- **Accident Data** tab page
- **Insurance Relationship** tab page
- **Other Data** tab page
- **Referral Data** tab page

**Enhanced Variation Determination**

Two new columns have been added for the maintenance of variant determination for the Clinical Process Builder (choose **SAP Healthcare - Industry-Specific Components for Hospitals -> Basic Settings -> Screen Control -> Determine Variant of Clinical Process Builder**):

- **Case Category**
  You can enter the case category as a key field. It will then be used to select the variant and the transaction variant. If you do not make an explicit entry, the system sets the value “*” for the **Case Category** field.

- **Transaction Variant**
  Up to now, the system determined the variant for the Clinical Process Builder using this table. The system now determines the transaction variant from the table too. You can create and incorporate your own transaction variants.

**Effects on Existing Data**

These new features do not affect existing variants. The enhanced maintenance of variant determination for the Clinical Process Builder may require you to adjust existing Customizing entries.

The enhancement to the table NWPLACE_DTM (Determination of Variants for Clinical Process Builder) is implemented by an XPRA.

**Effects on Customizing**

To use this function, you must activate the business function **SAP Ambulatory Care Management** (ISH_AMBULATORY).

You store the entries for determining the variants and transaction variants for the Clinical Process Builder
in the IMG activity Determine Variant for Clinical Process Builder (choose SAP Healthcare - Industry-Specific Components for Hospitals -> Basic Settings -> Screen Control in the IS-H Implementation Guide.

See also

For more information, see Healthcare -> SAP Patient Management -> Clinical Process Builder -> Create Transaction Variants in the SAP Library, and the following release notes:

- Case Category (New for All Countries Except AT/CH)
- DE: Outpatient Copayment/Practice Fee (New) 
- Outpatient Documentation Work Station (New)

37.6.3.4 Renewable Document Management in Clinical Process Builder (New)

Use

As of SAP ECC Industry Extension Healthcare 6.0, you can avail of renewable document management.

The following subareas belong to renewable document management:

- Overview of all of the patient’s renewable documents
- Edit a renewable document

A renewable document is assigned to a patient.

The new features in detail:

- Overview of All Renewable Documents for a Patient
  The renewable document management overview contains all of the renewable documents for the patient. The system displays these in a tree structure in which a node always contains a renewable document chain. The overview row of a renewable document chain contains summarized information on the various renewable documents.

- Edit a Renewable Document
  As part of the renewable document management process, you can enter renewable documents and renewable document chains for a patient. A renewable document chain starts with an initial document and contains any number of renewed documents. (In the country version Spain, a renewable document chain also contains a final document). A renewable document can be assigned to the category "Work Incapacity":
  - In such cases, the system displays the fields for entering the work incapacity data.
  - Otherwise, the system does not display the fields for entering the work incapacity data.

The authorization object N_REDOMA enables you to control which functions the user is allowed to execute in renewable documentation management.
**Procedure**

1. To access change mode, launch the transaction NREDOMA1; to access display mode, launch the transaction NREDOMA2.
2. Select a patient. You are now in renewable document management and see the overview of all of the renewable documents for the selected patient.
3. Double-click the node for a single renewable document and the system displays the details for this renewable document.
4. You can now create new renewable documents, change or cancel existing renewable documents, or print the renewable documents.

**Effects on System Administration**

The system behavior depends on the users' authorizations:
- Activity *Create*
- Activity *Display*
- Activity *Change*

**Effects on Customizing**

To use this function, you must activate the business function *SAP Ambulatory Care Management* (ISH_AMBULATORY).

You can make the following settings in Customizing for SAP Patient Management (IS-H) by choosing *SAP Healthcare - Industry-Specific Components for Hospitals -> Ambulatory Care Management -> Administration -> Renewable Document Management*:
- Maintain Document Types
  For more information, see *SAP Healthcare - Industry-Specific Components for Hospitals -> Ambulatory Care Management -> Administration -> Renewable Document Management -> Define Document Types* in the IS-H Implementation Guide.
- Maintain Document Type Assignments
  For more information, see *SAP Healthcare - Industry-Specific Components for Hospitals -> Ambulatory Care Management -> Administration -> Renewable Document Management*:
  Maintain Document Type Assignments.
- BAdI: Renewable Document Management - Process Customer-Specific Data
  The BAdI is located under *SAP Healthcare - Industry-Specific Components for Hospitals -> Ambulatory Care Management -> Administration -> Renewable Document Management* in the IS-H Implementation Guide.
  For more information about the implementation of the BAdIs for the Clinical Process Builder, see *SAP Healthcare - Industry-Specific Components for Hospitals -> Patient Management -> Patients -> Business Add-Ins for Patient Admission* in the IS-H Implementation Guide.
See also

For more information about renewable document management, see Healthcare -> SAP Patient Management -> SAP Ambulatory Care Management -> Administration -> Renewable Document Management in the SAP Library.

37.6.4 IS-H-ACM-TMT    Treatment

37.6.4.1 Support for Outpatient Treatment Processes (New)

Use

As of SAP ECC Industry Extension Healthcare 6.0, the role-based work station concept is extended to the outpatient treatment area in SAP Ambulatory Care Management (SAP ACM). In this connection, the Outpatient Documentation Work Station is provided to display the relevant tasks for processing, dependent on the respective treatment situation. The context-sensitive display of relevant documents simplifies processing when you are entering and completing tasks.

This now makes it possible to depict complex work situations that require the processing of the current documentation and simultaneous access to the electronic patient record. The predefined list of tasks for completion provides a powerful tool for quickly and efficiently processing the documentation steps for the patients in the outpatient clinic.

Through the predefinition of task sets for particular work situations ("what routinely has to be done when a patient attends my clinic"), the Outpatient Documentation Work Station helps ensure the quality of the treatment in your clinic.

The Outpatient Documentation Work Station provides you with all of the documentation objects and forms that are necessary for the outpatient treatment role.

SAP ACM provides the new documentation object outpatient clinic folder that accommodates the documentation of medical progress. In this context, the key forms of the Panel Physician Association and the key forms of Workers' Compensation Accident Insurance are now available.

Effects on Customizing

To use this function, you must activate the business function SAP Ambulatory Care Management (ISH_AMBULATORY).

See also

For more information, see the following release notes:

- Outpatient Documentation Work Station (New)
- Outpatient Clinic Folder (New)
37.6.4.2 Outpatient Documentation Work Station (New)

Use
As of SAP ECC Industry Extension Healthcare 6.0, the Outpatient Documentation Work Station provides you with a new means of quickly and easily completing documentation tasks in the outpatient area.

The Outpatient Documentation Work Station depicts work situations of the outpatient facility, for example, consultations and workers’ compensation initial treatment, with their tasks, and makes available the appropriate information for each situation.

Concepts
The following concepts play a key role in the Outpatient Documentation Work Station:

Situation
Situations are used to group together tasks that have to be completed by different persons and occupational groups in an actual treatment situation. The user assigns these tasks to the patients in the form of a situation to enable the tasks to then be processed in the Outpatient Documentation Work Station.

It is recommended that the system administrator or user create situations that do not comprise too many tasks (approximately 15-20). The time for fully processing a situation should not exceed one day. It is recommended that you only depict one case or visit in a situation.

Situations must be closed. For each situation you can stipulate whether the system is to do this automatically after all the tasks have been completed, or whether the user must close the situation manually.

Situations are temporary objects. After the situation has been closed, it is removed from the system by a deletion program. You stipulate the interval at which this program runs in the situation template.

Profile
Profiles are used to group together tasks to facilitate the selection when assigning new tasks. You create profiles in template management (transaction code N2WLD). You can use them when creating situations or when adding tasks to a situation.

Task
Tasks depict the documentation- or information steps required for the treatment.

In template management, you give descriptive names to the tasks and you can link the tasks with "base items". The base item controls which documentation object the user can create, edit, or view. Tasks without related actions can be used for informational purposes, or as reminders of important treatment steps that are not directly depicted in the system (such as, inform relatives).

You can also link a task with an "info item". When the task is used, this controls which aspects the system is to display in the patient viewer, and thus which extracts from the patient's medical record the
system is to display for a specific task.

Tasks are not inter-related. You cannot depict dependencies, such as "You cannot complete a task until you have...".

You can designate tasks as required tasks. You cannot close a situation that contains required tasks until the status of all required tasks has been set to Completed or Canceled.

Like a situation, a task is also a temporary object. It is deleted with the situation by the system.

**Template**

Templates comprise the definition data for situations and tasks. The system only creates the actual situation with reference to the patient from the situation template when the patient is assigned. When you process a situation for the first time in the Outpatient Documentation Work Station, the system creates tasks from the task templates.

You edit templates in template maintenance.

**Work Station Layout**

The Outpatient Documentation Work Station enables you to display different components concurrently on screen. The basic structure is preset. However, you can, if need be, show or hide the various components, and resize them using the mouse. You can save all layout settings as personal settings.

**Components in the Standard System**

To optimally depict work situations in the Outpatient Documentation Work Station, the standard system provides different components:

**Task List**

The task list is the central tool for displaying all of the tasks defined for the situation. It contains information about the status of the task. When you click a task name, the work station displays a documentation interface corresponding to the task. You see relevant extracts from the patient's medical record in another component.

For more information, see the release note *Outpatient Documentation Work Station: Task List (New).*

**Patient Viewer**

This component initially displays relevant sections of the electronic patient record for the situation, or specific sections for each task. This information is displayed in a list, or in a tree structure. When you click an object, a corresponding detailed display opens.

For more information, see the release note *Patient Viewer (New).*

**Documentation Object**

The documentation objects are the processing programs linked with the tasks, to a large extent as they are provided elsewhere in the system.

The standard system contains the following documentation objects:

- Diagnoses
- Procedures
- Administrative services
- Medical services
- Selected forms of the Panel Physician Association (DE)
- Selected forms of the Workers’ Compensation Accident Insurance (DE)
- Problems for the problem-oriented record
- Outpatient clinic folder

Appropriate settings enable information to be displayed in a browser (URL). Furthermore, it is possible to print forms and call transactions of your choosing.

The implementation of a BAdI enables the execution of additional, customer-specific actions.

The documentation objects are displayed in the upper right screen area of the work station.

**Toolbar**

To supplement the task list functions, you can also display a toolbar. The pushbuttons displayed in this toolbar are selected from a standard function list in Customizing. You can define which functions comprise the toolbar for each situation template.

The toolbar is displayed at the upper edge of the work station.

**Other Information Components**

In addition to the patient viewer, other components are provided for the display of information:

- Work station header
- Patient overview
- Context view

For more information, see the release note *Outpatient Documentation Work Station Information Components (New).*

**Accessing the Outpatient Documentation Work Station**

You open the Outpatient Documentation Work Station from the Clinical Work Station (view type *Outpatient Clinic*).

Three new pushbuttons are provided for this purpose in the function list:

**Assign Situation**

This function enables you to select one or more situation(s) proposed in a list, and assign them to the patient. The system compiles this list of proposed situations on the basis of criteria such as case category, movement type, and organizational unit. You can display all of the available situations rather than the proposal list.

This assignment dialog is also provided in the Clinical Process Builder to enable the assignment to be made during the admission process.

Once the assignment is made, you can either return to the Clinical Work Station, or switch into the Outpatient Documentation Work Station.

If you select several patients in the Clinical Work Station, you can assign the selected situations to them in the same processing step.

**Edit Situation**
This function enables you to edit an assigned situation for one or more selected patients. The list of assigned situations is displayed in a dialog box. If you select several patients, the system only displays the situations that are assigned to all of the selected patients.

You can also assign and edit other situations. You can view a list of all situations that were edited and closed earlier, and select a closed situation to be displayed.

Double-clicking a situation opens the Outpatient Documentation Work Station.

**Create Situation**

If particular situations have still to be defined in the system, you can group together tasks, as required, for one or more patients yourself. You open a dialog box with a structured catalog containing all of the profiles and tasks available in the system. The tasks you select are combined in a situation and can then be processed in the Outpatient Documentation Work Station. The system does not save situations created like this as templates.

If users consistently need to create the same or a similar situation, it is recommended that you create an appropriate situation template.

Information can be provided for each task, if stored in Customizing.

**Clinical Work Station Column Set**

The column set for the view type *Outpatient Clinic/Service Facility* been enhanced.

A text, or a situation icon or task icon shows you that there are still open tasks for a patient.

If you have stipulated for organizational reasons that open situations are not closed automatically, it is recommended to display both columns. You can immediately see whether tasks still have to be completed, or whether open situations exist.

If only one situation is assigned, clicking the situation directly opens the Outpatient Documentation Work Station with the situation.

If several situations are assigned, clicking the icon opens the *Edit Situation* dialog and you must select the required situation.

The occupational groups responsible for open tasks are displayed in another column.

For information on setting up the Outpatient Documentation Work Station, see the release note *Outpatient Documentation Work Station: Template Maintenance (New).*

**Effects on Customizing**

To use this function, you have to activate the business function *SAP Ambulatory Care Management* (ISH_AMBULATORY).
37.6.4.3 Outpatient Documentation Work Station: Task List (New)

Use

As of *SAP ECC Industry Extension Healthcare 6.0*, the *Task List* component is provided for use in the Outpatient Documentation Work Station.

The task list shows all of the tasks that can be processed for the selected patient in the selected situation. The task list can serve as a simple navigation tool by means of which you switch from one documentation interface to the next. It can also be used as an instrument of control for the cooperation between the different occupational groups and persons in the outpatient facility. For this reason, it has columns that provide information about the responsibilities for, and the processing status of a task.

By means of a simple mouse-click (select), each task can display or create an assigned documentation object. The next time you select the task, the system displays the created object. In template management, you can stipulate whether the object is to be provided for display or further processing. The task that is being processed is identified by an icon (light bulb).

Other columns contain the processing status, the action icon, the task name, the required task icon (optional), a task note (optional), and the responsible occupational group.

Task List Functions

The following functions are provided as pushbuttons in the task list or in the context menu for the tasks and situations:

- **Complete Task**
  Sets the status of the selected task to *completed*. This tells other users that this part of the treatment has been completed.

- **Cancel Task**
  Cancels a task. This shows that this task need not be completed in this situation.

- **Add Task**
  Opens a dialog box where you can add other tasks to the current situation. The system displays a structured catalog containing all of the active task templates and profile templates for which the *Available in Selection* indicator is set. Profiles make it possible to add a group of task templates. It may be necessary to add tasks when particularities arise during the patient’s actual treatment that were not taken into account in the situation.

- **Close Situation**
  Closes a situation after completion or cancellation of at least all required tasks. Tasks that are not completed and that are not required tasks can be automatically canceled when the situation is closed. Closed situations are no longer displayed in the selection list for processing situations.

- **Create Situation Note**
  Opens a note box in which you can enter a note, or view or edit a note previously entered for this situation. If a note exists, this is shown by an icon. Since this note function is also provided in the assignment dialog, the admitting clerk can enter organizational information here that can then be accessed during the treatment. Since this note is deleted together with the situation, it is recommended that you do not document treatment data here.

- **Edit Layout**
  Enables adjustments to be made to the layout of the task list. You can suppress columns that are not
required. The layout is saved on an individual user basis.

- **Show Situation List**
  Displays the situation list, even when only one patient was selected in the Clinical Work Station.

- **Show Detailed View**
  Opens an information area. An information column is also added to the lists. When you click the information icon there, the system displays the information stored for situations or tasks.

- **Create Task Note**
  You can create a note for each task by clicking the *Note* column, or via the context menu. If a note exists, this is shown by an icon.

If the task list is opened for several patients, all of the situations for these patients are displayed in a second list. The list of tasks displayed always relates to the selected situation.

The task list is displayed in the upper left screen area of the work station.

You can predefine the grouping together of tasks. For more information about this, see the release note *Outpatient Documentation Work Station: Template Maintenance (New)*.

The *Task List* component is only available in the Outpatient Documentation Work Station.

### Effects on Customizing

To use this function, you must activate the business function *SAP Ambulatory Care Management (ISH_AMBULATORY)*.

### 37.6.4.4 Patient Viewer (New)

#### Use

As of *SAP ECC Industry Extension Healthcare 6.0, SAP Ambulatory Care Management* provides the patient viewer for displaying information from the electronic medical record in the Outpatient Documentation Work Station. The patient viewer contains the information from the medical record that is relevant to the task being processed.

#### Example

If you wish to issue a prescription for a patient (corresponds to a task in the Outpatient Documentation Work Station), it makes sense for you, as the person issuing the prescription, to view the prescriptions that have already been issued for the patient when performing this task. This enables you to prescribe the same drugs again. This example can be applied to numerous documentation tasks.

#### Availability of Patient Viewer and Patient Organizer

The patient viewer is a tool which is derived from the patient organizer. The operation of the patient viewer largely corresponds to the operation of the patient organizer. How the patient viewer works only
differs in details from how the patient organizer works.

The patient viewer is an integrated part of the Outpatient Documentation Work Station and can only be activated with the latter.

The patient organizer is a separate function, which, as previously, is provided in i.s.h.med.

**Task-Dependent Presentation of the Medical Record**

As in the patient organizer, the aspect in the patient viewer also comprises the set of all methods for structuring and displaying the medical record. You can use aspects provided with the standard system, or define aspects of your own. For more information about setting up and managing aspects, see the release note *Patient Organizer: Aspect Maintenance Function (New).*

To assign aspects to a situation template or a task template, you create information items (info items). For more information about creating info items, see the release note *Outpatient Documentation Work Station: Template Maintenance (New).*

The following options are provided for maintaining the task template:

- **Do not Change:** The patient viewer is not updated when this task is called. The same aspects are displayed as prior to the task being called. You should make this setting for all tasks that generally do not require information from the patient's medical record (for example, form printout).

- **Display User-Specifically:** When the task is selected, the system displays all of the aspects that are assigned to the user directly or using the role. You maintain these settings with transaction N10W.

- **According to Situation:** As when the task is selected, the info item of the situation should be used (see below).

- **Control Using Separate Info Item:** The system displays the aspects of the info item in the patient viewer.

The following options are provided for maintaining the situation template:

- **Do not Change:** The patient viewer is not updated when this situation is called. The same aspects are displayed as prior to the situation being selected.

- **Display User-Specifically:** When the situation is selected, the system displays all of the aspects that are assigned to the user directly or using the role. You maintain these settings with transaction N10W.

- **Control Using Separate Info Item:** The system displays the aspects of the info item in the patient viewer.

**Patient Viewer Functionality**

The functionality of the patient viewer is limited to **display and navigation functions.** You cannot create, change, nor cancel any elements of the medical record. The patient viewer is always visible in the context of the Outpatient Documentation Work Station.

The navigation functions comprise the switching of aspects and navigation to the individual medical object via the overview display. To keep the documentation process in the Outpatient Documentation Work Station always parallel to the navigation in the medical record, the patient viewer does not support all of the detailed display formats of the patient organizer. The patient viewer only supports the integrated detailed displays (HTML or PDF displays) and modal dialog boxes. Moreover, the patient viewer only authorizes display classes that transfer pure display functions.

The following detailed displays are allowed:
- Display clinical order in print preview (CORDER_PRN)
- Display documents in PDF or HTML print preview (DOC_PDF)
- Display of appointments and movements (MOV_DISP)
- Outpatient clinic folder (OPDCHART)
- Display requests in PDF print preview (REQ_PDF)
- HTML display of medical services (SER_HTML)
- Diagnoses display in a dialog box (DIA_DISP_P)
- Medical record display in a dialog box (MR_DISP_P)
- Procedures display in a dialog box (PRC_DISP_P)

Effects on Customizing

To use this function, you must activate the business function *SAP Ambulatory Care Management* (ISH_AMBULATORY).

See also

For more information about the Outpatient Documentation Work Station, see the release note *Outpatient Documentation Work Station (New)*.

37.6.4.5 Outpatient Documentation Work Station: Information Components (New)

Use

As of *SAP ECC Industry Extension Healthcare 6.0*, in addition to the Patient Viewer, you are provided with additional components for displaying fixed information in the Outpatient Documentation Work Station:

- The **work station header** displays limited information about the treatment context. This constantly reminds the user about which patient he or she is processing in which environment. The work station header cannot be suppressed from the screen and is displayed in the upper screen area.

- The **patient overview** shows more detailed, selected data on the patient, including master data, case data and visit data, or admission notes. The patient overview is displayed in the upper right area of the screen when you access the work station. When a documentation object is in processing, the system suppresses the patient overview from the screen.

- The **context view** shows technical data of the work station. All of the information that is available to the work station for presetting documentation objects, is displayed. Since this is seldom of interest, you have to trigger the display of the context view using a pushbutton.
Effects on Customizing

To use this function, you must activate the business function *SAP Ambulatory Care Management* (ISH_AMBULATORY).

37.6.4.6 Outpatient Documentation Work Station: Template Maintenance (New)

Use

As of *SAP ECC Industry Extension Healthcare 6.0*, together with the Outpatient Documentation Work Station you are provided with an application for maintaining situation templates and task templates. The application for template maintenance (transaction code N2WDL) provides system administrators and experts with a tool to simply and efficiently process the key objects for configuring the Outpatient Documentation Work Station.

Structure of the Processing Dialog

The tree structure in the left screen area contains all the situation templates, profile templates, and task templates (catalog), with the base items and info items in a respective additional tree structure. You access aspect maintenance when processing info items by choosing *Goto -> Manage Aspects* in the main menu, or by launching the transaction N2ASPECT_DEF.

You can create groups in the tree structure to store numerous templates in a structured, content-based manner.

The editing functions for the objects are available as pushbuttons or in the context menu for the group.

Depending on the object selected, the system displays a detailed view in the right screen area, which enables the various properties of the various objects to be edited.

You can display all of the objects created or edited in a work session in a worklist by choosing *Utilities -> Display Worklist*. Selecting objects in this list takes you directly into the transaction for processing the object. You can also activate all of the displayed objects concurrently.

Users can tailor the layout of the maintenance dialog to satisfy their own requirements, and can save the modified layout for future use.

Editable Objects

- **Situation Templates**
  These constitute the "containers" for the task templates. Use a descriptive name that enables users to make the appropriate selection during the patient's treatment.
  Among the possible specifications you can make, you can stipulate the time for automatic closing (forgotten situations) and the interval after which the situation is to be deleted automatically.
  You can link the situation template with an info item. This stipulates which aspects are displayed in the Patient Viewer when the Outpatient Documentation Work Station is called, prior to the first task
being processed.
You can store an information text. The user can view this text and thus be given important information about the use of this situation.
By specifying organizational units, case categories, and movement types, you can stipulate the case configurations for which this situation is to be proposed. Multiple specifications and exclusions are possible.
To assign profile templates and task templates to the situation template, you can select these from a selection list. It is also possible to assign them directly from the template subtree using drag and drop. You can define the sequence in which the tasks are displayed later in the task list.
To use situation templates in proposal lists, you must activate them.

- Function Variants
You can maintain and assign a function variant in the detail view for situation variants. This specifies which function buttons are displayed in the toolbar for this situation.

- Profile Templates
You can also store an information text for profile templates. It can provide the user with important information about the use of the task sets in the selection dialog for task templates. You also define a structure for profile templates. Similarly to situation templates, you can assign tasks that were defined beforehand.
To use profile templates in proposal lists, you must activate them.

- Task Templates
Use a descriptive name.
You can also store an information text for task templates, which can provide the user with important information about the use or completion of this task.
You can link task templates with a base item. This stipulates which system action the user triggers when he or she chooses a task in the task list of the Outpatient Documentation Work Station.
Link the task templates with an info item to stipulate which aspects are displayed in the Patient Viewer when the user clicks this task in the task list.
To use task templates in proposal lists, you must activate them.

- Base Items
Base items establish which system action is triggered. With some base item types, you can enter data that is used by default when an object is created (for example, document). You can create general, but also highly specific base items. This enables you to very precisely predefine the application behavior and relieve the user of many work steps and decisions.
The base item types in the standard system enable you to create base items, or edit existing ones. Base items have different detail views according to their types. For all of them, however, you can select a descriptive name and also enter a text that appears as a quick info above the task icon in the task list.
Two BAdIs are implemented for all base item types, by means of which you can modify the behavior before and after execution.
Base items can only be executed without activation on systems that are defined as test systems.
For more information about base items, see the release note Base Items (Enhanced).

- Info Items
Info items establish which information is displayed in the Patient Viewer in the Outpatient Documentation Work Station. Assign aspects in the detail view. The sequence of the aspects you define here sets the display sequence in the Patient Viewer. Select the aspect that is to be initially displayed in the Patient Viewer, independently of the display sequence.

- Aspects
The standard system contains numerous aspects that display the entire contents of the electronic patient record partially classified by case or movement, or according to different periods. There is also an aspect for each object type to enable only specific contents to be displayed. You can define additional aspects to obtain a more detailed combination of the contents of the electronic patient record, tailored to a task. To do this, create a new aspect. Use a short, descriptive name, since this also serves as the label for the pushbuttons in the Patient Viewer. Then assign views, which dispose of the required selection variants, from the catalog of available views. You can test an aspect in the maintenance dialog. To do this, first select a test patient (choose Utilities -> Edit/Display Test Patient). You can then view the aspect as it is displayed in the Patient Viewer (choose Aspect -> Test).

- Views
  In aspect maintenance, you can add to the view catalog in the standard system. To do this, create a new view and maintain suitable selection variants.

Procedure

Since templates are complex, we strongly recommend that you create situation templates in a planned and systematic manner. Whenever possible, we recommend that you create the situation templates starting on the detail level and working upwards (views - aspects - info items, BAdIs - base items, objects - base items, task templates - profile templates - situation templates).

The structure and function of template management, however, also support the reverse procedure. To use a situation template, you need only enter a few properties. As the simplest example, you could assign only a few tasks - which, besides administrative data, just have a descriptive name, but no link to base items or info items - to a situation template. In this way, you can quickly create a checklist that can be assigned to the patient's treatment episode.

In the next step, you can enter information texts for the task templates so that the checklist provides specific information and can thus better support the work process. In this way, you can successively activate all of the options provided by the situation templates, until all functions optimally support the user in his or her routine work.

Template maintenance is designed in such a way that the objects are to be processed only on the customer's development system. Consequently, all of the template maintenance objects are connected to the transport system and can be easily transported to the follow-on test system and finally to the production system. All objects must be activated prior to transport.

The respective processing status of the templates is depicted through a text and in color in the tree structure of the templates. A template can have the statuses NEW (gray), PROCESSED (blue), and ACTIVE (black). The selection lists only contain active templates.

When you edit an activated template, its status is modified. The activated version, however, remains available. To discard changes, the function Situation Template -> Back to Active Version is provided, which restores the most recently activated version.

The system does not overwrite the previously active version until the changes are activated. The selection dialogs then only contain the changed templates. Template versioning is not accommodated.

A where-used list is provided for profile templates and task templates. This enables you to find out about existing dependencies before changing or deleting objects.
Effects on Customizing

To use this function, you must activate the business function *SAP Ambulatory Care Management* (ISH_AMBULATORY).

37.6.4.7 DE: Panel Physician Association (PPA) Forms (New)

**Use**

This release note is relevant for the country version Germany only. Documentation is not available in English.

37.6.4.8 DE: Workers' Compensation Forms (New)

**Use**

This release note is relevant for the country version Germany only. Documentation is not available in English.

37.6.4.9 Outpatient Clinic Folder (New)

**Use**

As of *SAP ECC Industry Extension Healthcare 6.0*, you can use the outpatient clinic folder to document the progress of outpatient treatment in *SAP Ambulatory Care Management*.

The outpatient clinic folder supports a form of medical documentation commonly used in the outpatient area, in which information about visits is stored in note form. Typically, these notes are displayed in chronological order.

*Concepts*

Outpatient note: Single entry in the outpatient clinic folder. A note can be an *initial entry* or a *supplement*.

Outpatient clinic folder: Sum total of all outpatient notes.

*Entry/Change Dialog*

You can create outpatient notes in the Clinical Work Station (Outpatient Clinic/Service Facility view type) and in the Outpatient Documentation Work Station.
In the Outpatient Clinic/Service Facility view type, you can call the entry/change dialog using a pushbutton.

In the Outpatient Documentation Work Station, you can define task templates that enable the creation and modification of outpatient notes.

The management data of a note is preset. Additionally, you can set the reference level for a note:

- **Visit**
  This is the default standard behavior, since the entry is made concurrently to the visit. The system assigns the start of the current visit as the note's reference date/time.

- **Case**
  If, exceptionally, a note is created for the case, the system assigns the start of the current case as the note's reference date/time.

- **User-Defined Date**
  If a note is entered without reference to a case or a movement, you can enter a date of your choosing: the system proposes the current date. This user-defined date can be used, for example, to document contacts with the patient that occur between the actual visits (for example, phone call to the family physician, phone consultation with the patient).

Alternatively, before a new entry is created, a dialog box with the patient's case- or visit list is opened, from which you can select an outpatient visit other than the current one, or from which you can create a new outpatient visit. These alternatives are controlled by means of the user parameter N2OPDCHART.

You can enter a short text that is displayed (20 characters max.) in the table view of the Patient Viewer. If you do not enter a text, the system transfers the first 20 characters of the note into this field the first time you save the note.

Once you have released a note, you can no longer change it. You can, however, enter supplements for released notes. The system automatically creates supplements when you try to change a released note.

You can also create a new note and set the Suppl. indicator. The system displays a list of all the released notes, from which you can select the reference note. You can view the full text of the reference note by choosing Outpat. Note.

You cannot create supplements for notes with the status In Process; these notes can be changed directly.

You can enter any text as a note. To simplify the entry of standard texts, you can use and also enter text modules (input help in the note field).

**View**

The view of the outpatient notes takes the form of an overview of all of the notes in chronological order. The earliest entry is output at the head of the list. The sort criterion is the date of the selected reference level. Supplements are not sorted by reference date/time, but directly by reference note.

The entire set of notes is thus displayed in a chronologically logical context and you are provided with a quick overview of the outpatient treatment process.

You can view the outpatient notes in the Clinical Work Station (Outpatient Clinic/Service Facility view type), or by selecting an appropriate aspect in the Patient Viewer of the Outpatient Documentation Work Station.

**Adjusting the Outpatient Clinic Folder**

You can adjust the look and functions of the outpatient clinic folder in a number of ways:
- Tree display
  The options for designing aspects in the patient viewer enable you to arrange and sort the entries to best suit users' requirements.

- Entry/change dialog
  You can adjust the content and layout of the change dialog by means of the BAdI interface for the progress documentation.

- Detail window display
  The customer enhancement IS-H*MED_VD_VIEW in the programming interface for the progress documentation IS-H*MED_VD_API enables you to create specific filters that determine the scope of the data displayed in the detail window. The standard system provides an XML-based view and a view based on a dynamic document.
  You can integrate your own style sheet into the XML-based view and thus extensively modify the layout of the display. The standard system provides the style sheet ISHMEDVDA.

- Print output
  You can adjust the layout and content of the print output by substituting the standard Smart Form. The standard system provides the Smart Form N3OPDCHART.

**Effects on Customizing**

To use this function, you must activate the business function *SAP Ambulatory Care Management (ISH_AMBULATORY)*.

**37.6.4.10 Health Problem Documentation (New)**

**Use**

As of *SAP ECC Industry Extension Healthcare 6.0*, you can document health problems in *SAP Ambulatory Care Management*.

In contrast to a case, where billing aspects are the key focus, health aspects are the focus of a health problem.

Any of a patient's symptoms that require medical attention are understood by the term "health problem".

You enter and manage health problems in the *Outpatient Documentation Work Station*. You can also administrate problems in the *Patient Organizer*.

In the *Outpatient Documentation Work Station*, you can document health problems by means of individual tasks. You have to create a task that is used to call the desired function. This may be the creation of a problem. You can also set the problem interactively. For more information about tasks, see the release notes Outpatient Documentation Work Station (New) or Outpatient Documentation Work Station: Task List (New).

The following functions are provided for administrating health problems in the *Patient Organizer*.
- Create Problem
- Activate/Deactivate Problem
- Assign Objects to Problems

You can document the following objects in relation to health problems in the Outpatient Documentation Work Station and Patient Organizer:
- Movements
- Appointments
- Medication orders
- Clinical orders
- Progress documentation entries
- Documents

Problem-related functions:
- Create Problem
  This function is provided via the corresponding tasks in the Outpatient Documentation Work Station and also in the Patient Organizer.
- Create Objects for a Problem
  You can create objects, such as appointments, clinical orders, for a problem.
- Activate/Deactivate Problem
  Depending on whether the problem is currently active or inactive, the respective function is available in the context menu. You can complete a problem or deactivate it by selecting the corresponding checkbox. You can also show or hide inactive (completed) problems in the context menu.
- Assign Objects to a Problem
  If objects were assigned to a problem by mistake, or if the problem reference subsequently changes, you can modify the assignment of the objects to a problem.
- Display/Change Problem
  Use this function in the context menu to display or, if necessary, change the header data of a problem.

Effects on System Administration

You can import your own health problem catalogs. To do this, use the program RN1STRUCMRCAT:
1. Save a text file, separated by commas, locally.
2. Declare the storage location in the above named program. The program imports the data into the problem catalog table N1STRUCRECMECCAT.
   The catalog ICPC2 from the WONCA organization was used as a reference catalog during development. This catalog contains a field labeled Component. By definition, problems can only be created from the components 1 and 7. Thus if you select a problem with a component from 2 to 6,
the system issues a corresponding warning message. You can ignore this message and go ahead and save the problem, or return to the selection and select another problem. Moreover, you can enter your own text and select an employee responsible (EmR).

**Effects on Customizing**

To use this function, you must activate the business function *SAP Ambulatory Care Management (ISH_AMBULATORY)*.

To use the functionality, you must activate problem-oriented documentation using the system parameter N1STMREC.

To make problem entry available to users in the patient organizer, you must create an appropriate aspect. For more information about defining aspects, see the release note Patient Organizer: Aspect Maintenance Functions (New).

To stipulate whether inactive problems are to be displayed by default, set the user parameter N1_NO_COMPLETED_PROB.

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### 37.6.5 IS-H-ACM-BIL Billing

#### 37.6.5.1 SAP Ambulatory Care Management: Outpatient Billing (New)

**Use**

As of *SAP ECC Industry Extension Healthcare 6.0*, flexible support for a variety of outpatient billing methods in the hospital is provided by *SAP Ambulatory Care Management*.

These functions concern a range of features, from service entry and possible service remapping, to the determination of multiplication factors and through to the determination of a separate company code for chief physician billing.

**Effects on Customizing**

To use this function, you must activate the business function *SAP Ambulatory Care Management (ISH_AMBULATORY)*.

**See also**

For more information about the functions for simplifying outpatient billing, see the following release notes:

- Service Remapping
- Rule for Service Remapping (R18) (New)
- Service Rule Control (New)
- Determination of Multiplication Factor (Enhanced)
- Separate Company Code for Direct Patient Billing (New)

37.6.5.2 Service Remapping (Enhanced)

Use

As of SAP ECC Industry Extension Healthcare 6.0, service remapping is enhanced as follows:
- You can directly call service remapping from service entry.
- Service remapping supports 1:N remappings. The 1:N remapping enables you to remap an original service to N billing services. The system fills the billing service for the original service. For the remaining N-1 services, the system generates dummy services from the in-house service catalog and fills their billing services in accordance with the 1:N remapping defined in Customizing.
- You can activate the remapping with a service rule for selected events. For more information about this, see the release note Service Rules for Service Remapping (New).

You can call the service remapping in service entry by means of a pushbutton. This enables you to see the billing services to which the system remaps the services you have entered, prior to billing.

The service remapping fills the billing catalog and the billing service in service entry in accordance with the entries for service remapping that were made in Customizing. In the process, the service from the in-house service catalog is retained.

Effects on Customizing

To use this function, you must activate the business function SAP Ambulatory Care Management (ISH_AMBULATORY).

To use service remapping, you must make the following Customizing settings:
- Enter a service created for this purpose in the in-house service catalog as the dummy service.
- In the IMG activity Define Assignment Types, define an assignment type for the dummy service (maintenance indicator "S") and an assignment type for the 1:N remapping (maintenance indicator "C").
- Enter these assignments in the IMG activity Maintain Settings for SAP Ambulatory Care Management.

You maintain the actual remapping in the IMG activity Remap Services. Make sure that you define the first service remapping of a 1:N remapping with the assignment type "->". Define each of the further service remappings of this 1:N remapping with the assignment type for 1:N remappings that you defined beforehand in the IMG activity Maintain Settings for SAP Ambulatory Care Management.
37.6.5.3 Rule for Service Remapping (R18) (New)

Use

As of SAP ECC Industry Extension Healthcare 6.0, the service rule R18 Remap Service Codes is provided in SAP Ambulatory Care Management. You can use this service rule to trigger service remapping for the following events (callup points):
- Service Check Before Billing
- Service Check Before Test Billing
- Service Check Before Accrual
- Service Check Before Test Accrual

Note that the service rule R18 considers all of the case's services for the remapping. However, remapping from service entry only takes into account the services in the current view.

Effects on Customizing

To use this function, you must activate the business function SAP Ambulatory Care Management (ISH_AMBULATORY).

37.6.5.4 Service Rule Control (New)

Use

As of SAP ECC Industry Extension Healthcare 6.0, the following two new functions relating to service rules are provided in SAP Ambulatory Care Management (SAP ACM):
- Billing service check by the rule module
  You can stipulate whether or not the use of the billing service is permitted for the rule types. If the use of the billing catalog is permitted, you can activate this function on institution-specific check procedure level.
- Authorization check for the services before transfer to the rule function modules
  You can set the Authorization Check indicator for institution-specific check procedures.
If you have set the indicator for the use of billing services for a rule function module, the system replaces the services by the determined billing services and billing catalog before transferring them to the rule function module. The system does not transfer services without a billing service to the rule function module. If the Authorization Checks indicator is set for services, the system only transfers the services, for which the user has display authorization, to the rule function module. The system does not transfer the other services and consequently does not execute rules for these services.

**Effects on Customizing**

To use this function, you must activate the business function SAP Ambulatory Care Management (ISH_AMBULATORY).

Rule types: In the IMG activity Define Rule Types and Maintain Check Procedure, set the indicator that permits the use of the billing catalog for the rule type.

Institution-specific check procedure (for rule type and event): In the IMG activity Define Rule Types and Maintain Check Procedure, stipulate whether the billing catalog is to be used (if permitted for the rule type) and whether the system is to perform authorization checks for the services before transferring them to the rule function module.

**37.6.5.5 Determination of Multiplication Factor (Enhanced)**

**Use**

As of SAP ECC Industry Extension Healthcare 6.0, the determination of the multiplication factor for services is enhanced in SAP Ambulatory Care Management.

When defining the multiplication factor rules in Customizing, you can now specify the additional parameters Insurance Provider Type and Insurance Provider.

This is recommended for cases in which the multiplication factor is based on the insurance provider.

**Effects on Customizing**

To use this function, you must activate the business function SAP Ambulatory Care Management (ISH_AMBULATORY).

In the IMG activity Define Rules for Multiplication Factors, add entries for the parameters Insurance Provider Type and Insurance Provider, if necessary.
37.6.5.6 Separate Company Code for Direct Patient Billing (New)

Use

As of SAP ECC Industry Extension Healthcare 6.0, you can make postings resulting from invoice creation or cancellation in a separate company code from the institution in SAP Ambulatory Care Management. This makes it possible to handle the accounting of direct patient bills separately, while case processing continues unaltered in the existing institution.

The system checks whether direct patient billing is active in Patient Accounting. If the system finds a billing organizational unit for a case, which authorizes direct patient billing, it checks the following:

- Can all billable services be posted in the same company code?
- Does the customer exist for the company code, or can it be created automatically?
- Is the customer valid and not blocked?
- Is the company code open for postings?

If any one of the checks yields a negative result, the system issues a relevant message and does not carry out billing.

Effects on Customizing

To use this function, you must activate the business function SAP Ambulatory Care Management (ISH_AMBULATORY).

In the IMG activity Maintain Company Codes for Direct Patient Billing (technical name TN21BUKRS), specify the billing organizational units that accommodate direct patient billing. For each of these organizational units, store a company code dependent on the institution and case type. You must have set up the company codes that permit direct patient billing beforehand in Customizing.

For more information about this, see the documentation for the IMG activity Maintain Company Codes for Direct Patient Billing.

37.7 IS-H-BD Basic Data

37.7.1 CH: Import Report for Internal Tariff Types (RNWCHTARTYP_DOM) (New)

Use

This release note is relevant for the country version Switzerland only. Documentation is not available in
37.7.2 IS-H-BD-STR Hospital Structure

37.7.2.1 Multiple Assignment of Building Units in Visit Scheduling (New)

Use

As of SAP ECC Industry Extension Healthcare 6.0, you can assign a building unit to an organizational unit (OU) in transaction NB35 as follows (from the SAP Easy Access screen, choose Hospital -> Basic Data Administration -> Hospital Structure -> Building Structure -> Organizational Unit Assignment):

- As a primary assignment, if the building unit is assigned to the organizational unit in accordance with the hospital organizational structure. Your previous building unit-to-OU assignments are flagged as primary assignments in transaction NB35 with this release.

- As a secondary assignment, if the building unit already has a primary assignment to an OU and is also assigned to a different organizational unit, since it is also used by this unit. You can also use the secondary assignment independently of an existing primary assignment.

You can use this multiple assignment of a building unit in visit scheduling, if you allocate patient appointments for a treatment room that is used by different outpatient clinics/service facilities. For this purpose, you can create the treatment room as a planning object for each of the OUs concerned (transaction code NR25) and store time slots for the respective OUs in the day program of the planning object when defining time slots (transaction code NR22).

You can define the time slots for the treatment room in the day program as follows:

- For a timeframe and an OU by explicitly storing an OU for the timeframe.

- For a timeframe and for all assigned OUs by storing the OU "*" for the timeframe. In this way, you make the time slot available to all OUs alternatively for the timeframe.

- For a timeframe and multiple OUs by making the time slot available alternatively for the timeframe. For this purpose, store identical timeframes for the various OUs.

The open time slot search (appointment search) takes the stored alternative time slots into account as follows:

- If you specify an OU for which you want to find an available time slot, the system takes this OU into account.

- If you do not specify an OU, but do specify a scheduling type, the system takes this into account when determining the available time slot(s).

- If you specify neither an OU nor a scheduling type, the system takes into account the time slot(s) for the OU of the primary assignment.
37.7.3 IS-H-BD-BUS Business Partners

37.7.3.1 CH: Company Number of Employer (New)

Use

This release note is relevant for the country version Switzerland only. Documentation is not available in English.

37.7.4 IS-H-BD-SER Service Master Data

37.7.4.1 Statistics-, Master Data-, and Utility Reports (Deleted)

Use

With SAP ECC Industry Extension Healthcare 6.0, the following reports have deleted:

- Delete Service Catalogs of an Institution (RNDELLST)
- IS-H: Service Statistics (By Performing and Requesting OU) (RNLSTA01)
- IS-H: Service Statistics (By Requesting and Performing OU) (RNLSTA02)
- IS-H: Service Statistics (Requesting OUs by Service Code) (RNLSTA03)
- IS-H: Statistics for Extended Services (By Performing OU) (RNLSTA05)
- IS-H: Statistics for Extended Services (By Requesting OU) (RNLSTA06)
- IS-H: Flat Rate Per Case Statistics (RNLSTA07)
- IS-H: Procedures Surcharge Statistics (RNLSTA08)
- IS-H: BPlIV 1995 V2 - Procedures Surcharges for Department (RNSV202)
- IS-H: BPlIV 1995 V3 - Flat Rates per Case of Department (RNSV302)
- IS-H: Include V2/V3 Statistics (RNSVXI01)
- IS-H: Test Report: Delete Incorrect Services from Service Catalog (RNUDLS01)
- IS-H: Adjust Services for Inpatients on Key Date (RNUEBER0)
- IS-H: XPIRA for ALPHA Conversion in NCLO (RNUHCO00)
- IS-HCO: Partially Transferred Services with Remaining Quantity 0 (RNUHCO03)
- IS-HCO: Reset Change Indicator after Transfer (RNUHCO05)
- **IS-H: Determine HCO Indicator for All Services** (RNUHCOKZ)
- **IS-H: Reorganization of Service Catalog Columns** (RNUKARE0)
- **IS-H: Check Service Master for Overlapping Intervals** (RNUKARE5)
- **IS-H: Utility for Inconsistent NKSP Entries** (RNUNKSP0)

### 37.7.5 IS-H-BD-CWS Clinical Work Station

#### 37.7.5.1 Central BAdI for Execution of Customer-Specific Functions (New)

**Use**

You can execute customer-specific functions in the various views in the Clinical Work Station using corresponding Business Add-Ins (BAdI).

Up to now, a specific BAdI was provided for each view type.

As of **SAP ECC Industry Extension Healthcare 6.0**, you can centrally implement your customer-specific functions for all view types in the Clinical Work Station using the BAdI ISH_FUNCTION_CALL of the enhancement spot ES_ISH_CLINICAL_WORKSTATION.

It is recommended that you use the new BAdI for new functional enhancements for the Clinical Work Station, and centrally implement your existing enhancements in this BAdI.

#### 37.7.5.2 More Callpoints for Determining Variants (New)

**Use**

As of **SAP ECC Industry Extension Healthcare 6.0**, you can associate your own variants with the callpoints in the Clinical Process Builder that previously only supported SAP variants. These callpoints include:
- Call patient master data (transaction codes NP01 - NP03), callpoint NP02
- Call inpatient admission (transaction codes NV01 - NV03), callpoint NV02
- Call inpatient quick admission (transaction codes NV04 - NV06), callpoint NV05
- Call inpatient emergency admission (transaction codes NV07 - NV09), callpoint NV08
- Call outpatient admission (transaction codes NV41 - NV43), callpoint NV42
- Call outpatient quick admission (transaction codes NV44 - NV46), callpoint NV45
- Call outpatient emergency admission (transaction codes NV47 - NV49), callpoint NV48
- Call admission data (transaction codes NP11 - NP13), callpoint NP12
- Call visit data (transaction codes NP40 - NP43), callpoint NP42
- Call surgery (transaction codes NP36 - NP39), callpoint NP38
- Call transfer (transaction codes NV11 - NV13), callpoint NV12
- Call absence (transaction codes NP91 - NP93), callpoint NP92
- Call discharge (transaction codes NP97 - NP99), callpoint NP98
- Call material consumption (transaction codes NMMC1 and NMMC2), callpoint NMMC
- Call readmission function (transaction codes NAPX1 and NAPX2), callpoints NAPX

Note that you can only replace patient-related SAP variants (for example, SAP Patient Master Data with your own patient-related variants and, likewise, case-related SAP variants (for example, SAP Readmission) with your own case-related variants.

**Variant Determination for Clinical Process Builder in the Clinical Work Station**

In prior releases, when you called the Clinical Process Builder in the Clinical Work Station, you were able to use the callpoints NWP001, NWP002, NWP003 and so on to determine variants. As of SAP ECC Industry Extension Healthcare 6.0, you can also use the above listed new callpoints of the Clinical Process Builder in the Clinical Work Station as an alternative to these callpoints. The system determines the variant, for example, for the occupancy view in the Clinical Work Station using the new callpoints if you have not stored a variant determination entry for the callpoint NWP001 for the user of the Clinical Work Station.
37.8 IS-H-PM  Patient Management

37.8.1 More Callpoints for Determining Variants (New)

Use

As of *SAP ECC Industry Extension Healthcare 6.0*, you can associate your own variants with the callpoints in the Clinical Process Builder that previously only supported SAP variants. These callpoints include:

- Call patient master data (transaction codes NP01 - NP03), callpoint NP02
- Call inpatient admission (transaction codes NV01 - NV03), callpoint NV02
- Call inpatient quick admission (transaction codes NV04 - NV06), callpoint NV05
- Call inpatient emergency admission (transaction codes NV07 - NV09), callpoint NV08
- Call outpatient admission (transaction codes NV41 - NV43), callpoint NV42
- Call outpatient quick admission (transaction codes NV44 - NV46), callpoint NV45
- Call outpatient emergency admission (transaction codes NV47 - NV49), callpoint NV48
- Call admission data (transaction codes NP11 - NP13), callpoint NP12
- Call visit data (transaction codes NP40 - NP43), callpoint NP42
- Call surgery (transaction codes NP36 - NP39), callpoint NP38
- Call transfer (transaction codes NV11 - NV13), callpoint NV12
- Call absence (transaction codes NP91 - NP93), callpoint NP92
- Call discharge (transaction codes NP97 - NP99), callpoint NP98
- Call material consumption (transaction codes NMMC1 and NMMC2), callpoint NMMC
- Call readmission function (transaction codes NAPX1 and NAPX2), callpoints NAPX

Note that you can only replace patient-related SAP variants (for example, *SAP Patient Master Data*) with your own patient-related variants and, likewise, case-related SAP variants (for example, *SAP Readmission*) with your own case-related variants.

**Variant Determination for Clinical Process Builder in the Clinical Work Station**

In prior releases, when you called the Clinical Process Builder in the Clinical Work Station, you were able to use the callpoints NWP001, NWP002, NWP003 and so on to determine variants. As of *SAP ECC Industry Extension Healthcare 6.0*, you can also use the above listed new callpoints of the Clinical Process Builder in the Clinical Work Station as an alternative to these callpoints. The system determines the variant, for example, for the occupancy view in the Clinical Work Station using the new callpoints if you have not stored a variant determination entry for the callpoint NWP001 for the user of the Clinical Work Station.
37.8.2 Hide Standard Variant in Clinical Process Builder (New)

**Use**

Up to now, the SAP standard variant was assigned to all users of the Clinical Process Builder without the possibility of suppressing it from the screen. As of SAP ECC Industry Extension Healthcare 6.0, you can also remove the SAP standard variant from the list of assigned variants (input field Variant on the initial screen of the Clinical Process Builder) by choosing Settings -> Variant -> Hide. You can display it again by choosing Settings -> Variant -> Show.

**Effects on System Administration**

You can make these settings for multiple users by means of variant management (Settings -> Variant -> Management). Note the following in this respect:

- When a role is assigned, the system determines the users currently assigned to this role, and assigns them individually (not the role as a whole) to the SAP standard variant.

- When the user * is assigned, the system determines all of the users who have ever worked with the Clinical Process Builder up to this point in time, and assigns them individually to the SAP standard variant.

Consequently, you may have to renew the settings for users who are subsequently assigned to a role, or who subsequently start working with the Clinical Process Builder.

37.8.3 Function Bars in Clinical Process Builder (New)

**Use**

Up to now, the toolbars in the data screen of the Clinical Process Builder were predefined by SAP. As of SAP ECC Industry Extension Healthcare 6.0, you can create a function bar and assign it to your own variants by choosing Settings -> Variant -> Create or Settings -> Variant -> Change. The system then displays this function bar in the place of the previous application toolbar in the data screen of the Clinical Process Builder. As part of this new development, the application toolbar of the SAP standard variant has also been implemented as the SAP standard function bar. Some of the functions from the Goto menu, the entire Extras menu, and the entire Environment menu have been incorporated into the function bar.
You create function bars by executing the Create Function Bar function in the Create Variant or Change Variant screen. Here you can either incorporate the SAP predefined standard functions into your function bar, or create functions of your own. Note that when you use your own functions, you have to map the processing using the Business Add-In (BAdI) ISH_NV2000_PAI_COMPL.

You can suppress functions from the screen (also from the SAP standard function bar) using the BAdI ISH_NV2000_TOOLBAR.

37.8.4 Patient Status Extract (Deleted)

Use

As of SAP ECC Industry Extension Healthcare 6.0, the report IS-H: Patient Status Extract (technical name RNLAUS00) no longer exists.

It has been replaced by the report IS-H: Patient Status Extract (technical name RNLAUS01), which displays the archived case data also.

37.8.5 AT: Integration of E-Card into SAP Patient Management (IS-H) (New)

Use

This release note is relevant for the country version Austria only. Documentation is not available in English.

37.8.6 IS-H-PM-PAT Patient Master Data

37.8.6.1 New Field "Employed Since" for Patient's Employer (Changed)
Use

The new field *Employed Since* specifies as of when the patient is employed by his or her employer.

As of *SAP ECC Industry Extension Healthcare 6.0*, this field is provided in the following applications:

- *Employer* subscreen of the Clinical Process Builder
- BAPIs (Business Application Programming Interfaces):
  - BAPI_PATIENT_CREATE
  - BAPI_PATIENT_CHANGE
  - BAPI_PATIENT_GETDETAIL
- BAdIs (Business Add-Ins):
  - ISH_NV2000_PBO
  - ISH_NV2000_PAI
  - ISH_NV2000_PAI_COMPL

Effects on Existing Data

Existing data is not changed.

37.8.6.2 AT: Patient Master Data - Additional Title Field (New)

Use

This release note is relevant for the country version Austria only. Documentation is not available in English.

37.8.7 IS-H-PM-INP Inpatient Case

37.8.7.1 Maintain Absence in Clinical Process Builder (New)

Use

As of *SAP ECC Industry Extension Healthcare 6.0*, there is a new dedicated subscreen for maintaining absence data, which you can incorporate into a variant of the Clinical Process Builder. This subscreen is incorporated into the new standard variant *SAP Absence*. This new standard variant in turn
replaces the previous maintenance of the absence data using transactions *NP91*, *NP92* and *NP93*. When you launch any of these transactions, the system automatically starts the Clinical Process Builder with the variant *SAP Absence*.

**See also**

For further information about this topic, also see the following Release Notes:

- Old Transactions Switched Over to Clinical Process Builder (Changed)
- More Callpoints for Determining Variants (New)

### 37.8.7.2 Old Transactions Switched Over to Clinical Process Builder (Changed)

**Use**

As described in the Release Note Notification of End of Maintenance of Old Inpat./Outpat. Admission for SAP Patient Management Release 4.71, we are ending maintenance for several old transactions as of *SAP ECC Industry Extension Healthcare 6.0*.

Maintenance of the following old transactions will also end:

- Discharge (*NP97*, *NP98* and *NP99*)
- Transfer (*NV11*, *NV12* and *NV13*)
- Absence (*NP91*, *NP92* and *NP93*)
- Surgery (*NP36*, *NP37*, *NP38* and *NP39*)
- Patient master data management (*NP01*, *NP02* and *NP03*)

The old transactions are not deactivated, but rerouted to the Clinical Process Builder. It is not longer possible to control this rerouting mechanism by means of user parameter *NV2000*.

**Effects on System Administration**

If you have based your authorization concept thus far on transactions alone, this will no longer function when the Clinical Process Builder is used.

*Example*

If you did not previously work with the Clinical Process Builder and used the transaction authorizations *S_TCODE* and *N_EINR_TCO* to prevent a user from processing discharges by excluding transactions *NP97*, *NP98* and *NP99*, this resulted in an inadequate authorization check, for example, when outputting discharges in list form. Since you can also process discharges in the Clinical Process Builder...
without the transactions NP97, NP98 and NP99 by calling the Clinical Process Builder directly and using, for example, the SAP Discharge variant, the authorization check does not detect a missing authorization.

As concerns the authorization concept, we thus recommend that you restrict not only the transaction authorizations, but also the object authorizations (N_NBEW_AKT in the above example).

37.8.7.3 New Processing Modes in Variant Determination (New)

Use

As of SAP ECC Industry Extension Healthcare 6.0, in addition to the existing Processing Mode field that corresponds to the function you choose on the initial screen of the Clinical Process Builder (create, change, display), it is possible to determine a variant for the case and the movement in the Clinical Process Builder.

This enables you, for example, to stipulate that when creating an outpatient visit for a new outpatient case from the case overview, the system is to use a different variant than when creating an outpatient visit for an existing case.

37.8.8 IS-H-PM-OUT Outpatient Case

37.8.8.1 Old Transactions Switched Over to Clinical Process Builder (Changed)

Use

As described in the Release Note Notification of End of Maintenance of Old Inpat./Outpat. Admission for SAP Patient Management Release 4.71, we are ending maintenance for several old transactions as of SAP ECC Industry Extension Healthcare 6.0.

Maintenance of the following old transactions will also end:
- Discharge (NP97, NP98 and NP99)
- Transfer (NV11, NV12 and NV13)
- Absence (NP91, NP92 and NP93)
- Surgery (NP36, NP37, NP38 and NP39)
- Patient master data management (NP01, NP02 and NP03)

The old transactions are not deactivated, but rerouted to the Clinical Process Builder. It is not longer possible to control this rerouting mechanism by means of user parameter NV2000.

Effects on System Administration

If you have based your authorization concept thus far on transactions alone, this will no longer function when the Clinical Process Builder is used.

Example

If you did not previously work with the Clinical Process Builder and used the transaction authorizations S_TCODE and N_EINR_TCO to prevent a user from processing discharges by excluding transactions NP97, NP98 and NP99, this resulted in an inadequate authorization check, for example, when outputting discharges in list form. Since you can also process discharges in the Clinical Process Builder without the transactions NP97, NP98 and NP99 by calling the Clinical Process Builder directly and using, for example, the SAP Discharge variant, the authorization check does not detect a missing authorization.

As concerns the authorization concept, we thus recommend that you restrict not only the transaction authorizations, but also the object authorizations (N_NBEW_AKT in the above example).

37.8.8.2 New Processing Modes in Variant Determination (New)

Use

As of SAP ECC Industry Extension Healthcare 6.0, in addition to the existing Processing Mode field that corresponds to the function you choose on the initial screen of the Clinical Process Builder (create, change, display), it is possible to determine a variant for the case and the movement in the Clinical Process Builder.

This enables you, for example, to stipulate that when creating an outpatient visit for a new outpatient case from the case overview, the system is to use a different variant than when creating an outpatient visit for an existing case.
37.8.9 IS-H-PM-GEN  General Case Processing

37.8.9.1 Case Revision and Create with Template (Enhanced)

Use

As of SAP ECC Industry Extension Healthcare 6.0, the following new and changed features are provided for case revision and create with template:

Reassign Subobjects

You can now carry out case revision for individual subobjects also. This enables you to reassign diagnoses, procedures, services, and materials from one case or movement to another case or movement. The aim is to reassign larger quantities of subobjects, which you inadvertently assigned to a case, to avoid duplicate input effort.

Procedure:

1. Select a case or a visit in the case list.
2. Choose Case Overview -> Case Revision -> Reassign Subobjects. A dialog box appears containing all of the objects of the selected case or of the selected movements that you can select to be reassigned.
3. Select the objects that you want to reassign.
4. The system also displays the possible target cases and movements for you to select in the dialog box. Select a target movement, and start the reassignment process.

Create a New Inpatient/Day Patient Case with Template

You can now execute create with template for an entire inpatient/day patient case or for an admission movement.

If you want to create an entire case from a template, the system creates the admission, visits, and discharge with all the relevant subobjects also.

The case has the same structure as the source case.

The aim is to create similar cases (for example, day patient cases for dialysis) with reduced input effort.

Procedure:

Select a case in the case list, and choose Create Admission.

If you only want to create the admission movement, select an admission, and choose Create Admission.

You can check the selection of subobjects in the Create with Template dialog box.
Dialog Box for Reassign and Create with Template

You can now enter a comment in the case revision dialog box. You are no longer able to change this comment after the reassignment process has completed. You can display the comment using the evaluation report (see below).

The following convenience functions have been added to the dialog box for case revision and for create with template:
- Select All
- Deselect All
- Expand All
- Collapse All

As of this release, when you reassign a procedure, you can have the system transfer the procedure long text also.

Evaluation Report (New)

The system logs all reassignment processes in a table. The new evaluation report RNLCASREV enables you to evaluate and display these reassignment processes.

You can thus identify the source- and target case and other information on selected objects at a later point in time.

Procedure

If you want to run the evaluation report for a specific case, select this case in the case list, and choose Case List -> Case Revision -> History.

If you want to run the report with other selection criteria, from the SAP Easy Access screen, choose Hospital -> Statistics/Information -> Report Tree -> Patient Management -> General Case Processing -> IS-H: Case Revision Evaluation Report.

Enhancement of Business Add-In (BAdIs) ISH_SHIFT_CUS for Case Revision

- CHANGE_DESTINATION_FIELDS
  This method enables you to preset individual fields when creating a movement with a template.
- SET_TREE_PARAMETER
  This method enables you to control the selection behavior in the source tree. You can use this method, for example, to implement that the system does not transfer services when create with template is used.
- SET_EXPAND
  By implementing this method you can control the expansion behavior of the source tree.

Migration of the BAdI:

With this release, the BAdI ISH_SHIFT_CUS has been migrated to the new technology of the
Enhancement Framework. The implementations you have created are retained.

**Effects on Existing Data**

Existing data is not changed. Although the table NSHIFT has been enhanced in this release, a migration is not required.

**Effects on System Administration**

Migrate the implementation of your BAdI ISH_SHIFT_CUS.

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37.8.9.2 AT: New Features in Clinical Process Builder (New)

**Use**

This release note is relevant for the country version Austria only. Documentation is not available in English.

37.8.10 IS-H-PM-PLN Planning

37.8.10.1 Report for Migration of Movement Data in Preregistration (New)

**Use**

As of *SAP ECC Industry Extension Healthcare 6.0*, the report N1_MIGPRG is provided for migrating the movement data of the preregistration.

**Note**

The report was first shipped with SAP Patient Management 4.72, Add-On Support Package 2.

When you run the report, note the following:

- In the course of the upgrade, the system automatically migrates the existing preregistration types to order types. Do not modify these order types before you have migrated the movement data.
- You can run the report N1_MIGPRG at your convenience without having to interrupt normal operation.
- You can run the report any number of times. It takes migrated preregistrations into account.

**Effects on Data Transfer**

The report migrates non-canceled preregistrations into clinical orders. For each existing preregistration, the system creates a clinical order with one order item (admission or treatment), or with two order items...
(admission and treatment).

The original data remains unchanged, except for
- Appointments
- Services
- Movements

The report reassigns the original data for these to the new order, or the respective order item.

See also
For further information, see the report documentation.

### 37.8.10.2 Appointment Confirmation Dialog (Changed)

**Use**
When creating a visit or preregistration, you can call the visit scheduling function to plan a visit appointment. The system displays a daily schedule with the time slots for the planning object (attending physician or treatment room), and you can select an open time slot (appointment) in the daily schedule. When you have selected an appointment, the system displays the appointment data in a dialog box for you to confirm.

For *SAP ECC Industry Extension Healthcare 6.0*, this appointment confirmation has been redesigned and now enables you to edit all the appointment data.

### 37.8.10.3 Authorization Check when Maintaining Planning Objects/Time Slots (New)

**Use**
As of *SAP ECC Industry Extension Healthcare 6.0*, for the maintenance of the planning objects and time slot- or admission capacity data (transaction codes NR20-NR25) in the appointment management area (visit scheduling and inpatient admission planning), you can check relevant authorizations by means of the authorization object N_AMB_DSP and the new activities T0 (Display Time Slots) and T1 (Maintain Time Slots).
Effects on Existing Data

Note that all users for whom you have up to now restricted the activities with regard to the authorization object N_AMB_DSP, are not authorized to maintain planning objects and time slots after the new release has been imported. Add the new activities T0 (Display Time Slots) and T1 (Maintain Time Slots) to the authorizations for the relevant users.

37.8.10.4 Time Slot Changes in Visit Scheduling (New)

Use

As of SAP ECC Industry Extension Healthcare 6.0, when changes are made to time slots, the new time slot data is immediately available to all active visit scheduling functions.

To ensure rapid response times for visit scheduling, in previous releases, underlying time slot data was only read from the database when visit scheduling was called anew. If your system administrator changed the time slots while users were using visit scheduling functions, these changes were not available to them until the next time they called visit scheduling. The system now applies time slot changes immediately in the visit scheduling functions.

37.8.10.5 Multiple Assignment of Building Units in Visit Scheduling (New)

Use

As of SAP ECC Industry Extension Healthcare 6.0, you can assign a building unit to an organizational unit (OU) in transaction NB35 as follows (from the SAP Easy Access screen, choose Hospital -> Basic Data Administration -> Hospital Structure -> Building Structure -> Organizational Unit Assignment):

- As a primary assignment, if the building unit is assigned to the organizational unit in accordance with the hospital organizational structure. Your previous building unit-to-OU assignments are flagged as primary assignments in transaction NB35 with this release.
- As a secondary assignment, if the building unit already has a primary assignment to an OU and is also assigned to a different organizational unit, since it is also used by this unit. You can also use the secondary assignment independently of an existing primary assignment.

You can use this multiple assignment of a building unit in visit scheduling, if you allocate patient appointments for a treatment room that is used by different outpatient clinics/service facilities. For this purpose, you can create the treatment room as a planning object for each of the OUs concerned (transaction code NR25) and store time slots for the respective OUs in the day program of the planning object when defining time slots (transaction code NR22).

You can define the time slots for the treatment room in the day program as follows:
- For a timeframe and an OU by explicitly storing an OU for the timeframe.
- For a timeframe and for all assigned OUs by storing the OU "*" for the timeframe. In this way, you make the time slot available to all OUs alternatively for the timeframe.
- For a timeframe and multiple OUs by making the time slot available alternatively for the timeframe. For this purpose, store identical timeframes for the various OUs.

The open time slot search (appointment search) takes the stored alternative time slots into account as follows:
- If you specify an OU for which you want to find an available time slot, the system takes this OU into account.
- If you do not specify an OU, but do specify a scheduling type, the system takes this into account when determining the available time slot(s).
- If you specify neither an OU nor a scheduling type, the system takes into account the time slot(s) for the OU of the primary assignment.

### 37.8.10.6 Admission without Appointment in Preregistration (Enhanced)

**Use**

As of **SAP Patient Management 4.72 Add-On Support Package 5** or **SAP ECC Industry Extension Healthcare 6.0**, the functions **Create Admission** and **Create Visit** are provided in a preregistration item in the preregistration, even if you have still to enter an appointment.
37.9 IS-H-MD  Medical/Nursing Documentation

37.9.1 DE: Readmission Processing (New)

Use

This release note is relevant for the country version Germany only. Documentation is not available in English.

37.9.2 IS-H-MD-DOC  Basic Medical/Nursing Documentation

37.9.2.1 "DRG Diagnoses" in Clinical Process Builder (New)

Use

As of SAP ECC Industry Extension Healthcare 6.0, a subscreen for displaying and processing DRG diagnoses is provided in the Clinical Process Builder.

The subscreen displays all the diagnoses for a case with a special filter for "DRG", independently of the department stay to which the diagnoses are linked. The diagnosis display corresponds to the diagnosis display on the Diagnoses tab page in the DRG work station (transaction code NPDRG2).

Effects on System Administration

The following subscreens are provided for diagnosis processing in the Clinical Process Builder:

- Referral Diagnoses
- (Movement-Related) Diagnoses
- DRG Diagnoses

Note that a you can use a maximum of one of these subscreens in a variant for the Clinical Process Builder.
37.9.2.2 "DRG System" Added to DRG Customizing (Enhanced)

Use

As of SAP ECC Industry Extension Healthcare 6.0, the DRG System field is provided in the IMG activity Set Parameters for DRG Documentation. The DRG system describes basic properties and rules of a DRG method that are often country-specific. At present, you can make entries for G_DRG (German Related Diagnostic Group) and SG_DRG (Singapore DRG).

Effects on Customizing

If you did not specify a DRG method in the DRG System field, the system can group correctly by means of the configured country version. In such cases, the system issues the warning message Cannot determine DRG system (N6 737).

37.9.2.3 New Business Transactions for Basic Med. Documentation Status (New)

Use

As of SAP ECC Industry Extension Healthcare 6.0, the following new business transactions are provided for the status of basic medical documentation:

- Change selected case data (NFAL)
- Change selected movement data (NBEW)
- Bill selected services (NABL)

Effects on Existing Data

The checks on the changeability of case data and movement data using the business transactions Change Selected Case Data and Change Selected Movement Data are provided in the Clinical Process Builder, in diagnosis entry (transaction code NP61), and in the DRG work station (transaction code NPDRG2).

You can check the changeability of movement data for all movement categories, or restrict it explicitly to specified movement categories, for example, admission. The system also takes into account the business transaction check when movements are created.

The business transaction Bill Selected Services enables you to permit specific services, such as personal items, to be billed for straight away and to initially exclude other services, such as a DRG service, from the billing process. The business transaction Bill Selected Services is a refinement of the business
transaction *Bill Case.*

**Effects on Customizing**

You can assign the new business transactions with the following values to the individual statuses of a status profile in the IMG activity Define Status Profile:

- Allowed
- Allowed with warning
- Forbidden

For an overview of the status management configuration options, see Basic Medical Documentation Status Management in the *IS-H Implementation Guide.*

Note, in particular, the following new IMG activities:

- Display Possible Fields for Detailed Definition of Bus. Transactions (SAP)
- Maintain Fields for Detailed Definition of Business Transactions
- BAdI: Refine Detailed Definition of Business Transactions
- BAdI: Business Transaction Check "Bill Selected Services"

**37.9.2.4 Case Status and Department Status in Clinical Work Station (New)**

**Use**

As of *SAP ECC Industry Extension Healthcare 6.0*, the new function *Set Medical Documentation Status* is provided in the Clinical Work Station.

This function enables you to set a new case status and department status (basic medical documentation status) for all the selected cases. If it is not possible to set the new status, the system issues error messages accordingly.

**Effects on System Administration**

The option of also opening or closing department statuses has been added to the *Set Medical Documentation Status* function in the *Coding Analyses* view type.

The *Set Medical Documentation Status* function is new in the view types *Movements, Arrivals, and Departures.*
37.9.2.5 Report for Setting the Status for Multiple Cases (New)

Use

As of SAP ECC Industry Extension Healthcare 6.0, the report Set Basic Medical Document Status for Multiple Cases (technical name RNMDSTAT) provides a new function for the status management of basic medical documentation.

You can select the cases for mass processing by specifying either case selection(s), or selection criteria. If you run the report in test mode, the system simulates the specified status transition. This enables you, for example, to create an overview of cases with a specific status, and to check whether the status transition could be made without errors, or not.

The results log can be output in detailed or summarized form. In the detailed log, the system includes the status prior to the transition.

37.9.2.6 "Basic Medical Documentation Status" Subscreen in Clinical Process Builder (New)

Use

As of SAP ECC Industry Extension Healthcare 6.0, a subscreen for displaying and changing the status of the basic medical documentation is provided in the Clinical Process Builder.

You can maintain the case status and the department statuses in this subscreen.

37.9.2.7 DE: DRG Key Figures: Limit Dates (mLOS-, aLOS-, MLOS-Date) (New)

Use

This release note is relevant for the country version Germany only. Documentation is not available in
37.9.2.8 BAPIs for Procedure Processing (Enhanced)

Use

As of SAP ECC Industry Extension Healthcare 6.0, the BAPIs for procedure processing have been functionally enhanced.

If you process procedures using the following BAPIs, the system totals the customer-specific mechanical ventilation hours, and stores the result in the Mechanical Ventilation Hours field for the case:
- BAPI_CASEPROCEDURE_CREATEMULT
- BAPI_CASEPROCEDURE_CHANGETMULT
- BAPI_CASEPROCEDURE_CANCELMULT

If processing involves a case that you have already grouped, the system flags this DRG result as "obsolete" when procedures have been changed.

37.9.2.9 "DRG Data" Subscreen in Clinical Process Builder (New)

Use

As of SAP ECC Industry Extension Healthcare 6.0, an SAP tab page (DRG Data) and an SAP subscreen (DRG Data) are provided for the DRG data in the Clinical Process Builder.

The SAP subscreen DRG Data contains the same functions as the tab page DRG Data in the DRG work station (transaction code NDRG2), for example, group, execute rules, cancel.

Example

You can create a customer-specific variant in the Clinical Process Builder that contains, for example, the subscreen for the medical status, the DRG data, as well as the admission data and discharge data.
37.9.2.10 DE: DRG Work Station - Goto Readmission Transaction (New)

Use

This release note is relevant for the country version Germany only. Documentation is not available in English.

37.9.2.11 OPS Localization (New)

Use

As of SAP Patient Management 4.72 Add-On Support Package 7 and SAP ECC Industry Extension Healthcare 6.0 (IS-H 600), an indicator is provided for stipulating that the localization must be specified for a procedure.

The official OPS version 2005 contains this indicator for procedures that are performed on pair organs (for example, eyes, ears, kidneys).

For this reason, the OPS Localization Oblig. field (technical name NTPK-OPLOC) has been added to the service master. The new field is located on the Other tab page in the dialog transaction for maintaining the service master data.

A field is provided for specifying the localization when procedures are entered either in dialog or in batch input mode. If you use Surgery Documentation (i.s.h.med), the field Localization is also provided here and is checked by the system when procedures are entered.

If the OPS Localization Oblig. indicator is set for procedures in the service master, the system issues an error messages when such procedures are entered without the localization being specified. This applies for procedures entered in dialog- and batch input mode, or when procedures are transferred from an external system.

You can specify a localization whenever you enter diagnoses, procedures, or services in the i.s.h.med environment.

Effects on Existing Data

When importing the surgical procedures catalog, make sure that the new field named above is filled for pair procedures in the service master.

For the country version Germany, SAP SI provides a formatting program for importing OPS, version 2005, subject to a charge. For further information, contact SAP SI AG directly:

SAP Systems Integration AG
Sekretariat Healthcare
St. Petersburger Strasse 9
01069 Dresden
Tel. 0351/4811-2501
Effects on Data Transfer

If you transfer procedure data from an external system into IS-H by batch input or BAPI, the external system must also transfer the localization for the relevant procedures. Otherwise, IS-H cannot upload the data.

Effects on Customizing

You can define valid customer-specific localizations in the IMG activity Maintain Medical Localization. Note that each customer-specific localization must be assigned to an official localization.

See also

The system checks the procedure localization in accordance with the legal requirements made of the grouper interface. For further information about this, see the SAP Note 794995 IS-H: Localization Added to G-DRG Grouper Interface.

37.9.2.12 Case-Related Procedure Entry (New)

Use

As of SAP ECC Industry Extension Healthcare 6.0, an SAP standard variant is provided for case-related procedure entry (transaction codes NP47 and NP48) in the Clinical Process Builder.

If you use the Clinical Process Builder, you access the SAP standard variant SAP Case-Related Procedures for the Clinical Process Builder when you call case-related procedure entry.

The new case-related procedure entry in the Clinical Process Builder differs from the existing transactions for the case-related entry of procedures in the following aspects:

- If in the case list you select a case or a movement that is not classified as a surgery, the system displays all of the procedures that exist for the case. In this display, you can assign case-related procedures to an existing surgery movement with a simple mouse-click next to the SP code. You can display the movement data for surgery-related procedures by means of the pushbutton. You can re-assign a surgery-related procedure to the case.

- If you select a surgery movement in the case list, the system only displays the procedures for this surgery movement. If you enter more procedures, the system assigns them to the selected surgery movement. This enables you to explicitly enter procedures for a surgery movement, without having to switch to surgery data maintenance.

- You can access the following additional functions by choosing the More Functions button:

  - Copy Row (copy a selected procedure row)
  - Procedure -> Surgery (assign a case-related procedure to a surgery)
  - Procedure -> Case (assign surgery-related procedure to the case)
  - Customer Sort Sequence: If you implement the BAdI ISH_PROCEDURE_SORT, you can determine your own sort sequence for the data. When you execute this function, the system...
sorts the procedures according to the rules you defined.

- Record Information
- Change Documents

37.9.2.13 Maintain DRG Data (Changed)

Use

Group/Grouping Result

As of SAP Patient Management 4.72 Add-On Support Package 7 and SAP ECC Industry Extension Healthcare 6.0, the system no longer creates a new data record during each grouping run.

Up to now, the existing DRG result was canceled or deleted during each grouping run if it was not already saved in the database. The new DRG result was created. This was the case, regardless of whether the current DRG result differed from the previous DRG result.

The system now only creates a new data record if the following fields have contents that differ:

- DRG Code
- DRG Catalog
- Major Diagnostic Category (MDC)
- MDC Catalog
- Severity of Illness
- Risk of Mortality
- Cost Weight for DRGs

If the content of the above fields does not differ, the system changes the existing grouping result rather than canceling it. In the process, the system transfers the following fields into the existing DRG result:

- Comment on DRG (if entered)
- Information relating to the operation of the DRG system (if entered)
- Date when the DRG was determined
- Time when the DRG was determined
- Date when DRG was changed
- Time when DRG was changed
- Name of user who made the change

In the maintenance transaction for DRG data, the system always displays the user who last carried out grouping, and no longer the user who originally created the data record.

If a DRG does not yet exist for a case, the system displays a yellow traffic light in the DRG Work Station.

**Complete Readmission Case**

As of *SAP ECC Industry Extension Healthcare 6.0*, you can go directly to the maintenance transaction for readmissions from DRG data maintenance (transaction PPDRG2), if the case belongs to a readmission sequence.

**Case Is Final Billed or Provisionally Billed**

As of *SAP ECC Industry Extension Healthcare 6.0*, you can no longer execute the Group function for cases that have the billing status "final billed" or "provisionally billed".

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**37.9.2.14 DE: Procedure Entry - Support for Enhanced OPS 301 (New)**

**Use**

This release note is relevant for the country version Germany only. Documentation is not available in English.

**37.9.2.15 New Features/Changes in Procedure Entry (Changed)**

**Use**

As of *SAP ECC Industry Extension Healthcare 6.0*, the following changed or enhanced functions are provided for procedure entry:

- **Business Add-Ins (BAdI):** ISH_PROCEDURE_PROPOS and ISH_PROCEDURE_CHECK

The following fields are now provided for you in these BAdIs:

- Number of additional surgeries
- Localization of a procedure
- Identification from external system
- Procedure quantity
- Unit of measure for procedure

Up to now, it was possible to check, but not to set nor change the fields in the above BAdIs. Other fields have now been added. In future, you are able to assign values to the fields mentioned above. This is useful, for example, for procedures whose texts already contain a localization (left, right).

Automatic Adjustment of Surgical Procedures Catalog

If you change the patient’s case type, the admission start date, the surgery movement start date, or the procedure start date, a different surgical procedures catalog may apply.

With this release, the system automatically checks, and, if necessary, adjusts the surgical procedures catalog. If the existing procedures are not found in the determined procedures catalog, the system rejects the changes (for example, change of case type, change of admission date). You cannot make the changes until you have canceled the existing procedures.

If the procedures exists in the determined procedures catalog, the system makes the changes.

If you want to prevent the procedures catalog from being adjusted automatically, you can modify the message type of the message NICP 061 accordingly in message control.

You can enter the message with the following values in your client:

<table>
<thead>
<tr>
<th>Field</th>
<th>Value</th>
</tr>
</thead>
<tbody>
<tr>
<td>Institution</td>
<td>Your current institution</td>
</tr>
<tr>
<td>Function</td>
<td>NICP</td>
</tr>
<tr>
<td>Application Area</td>
<td>NICP</td>
</tr>
<tr>
<td>Message Number</td>
<td>061</td>
</tr>
<tr>
<td>Default Type</td>
<td>I</td>
</tr>
<tr>
<td>Message Type</td>
<td>Customizable: W, S or E</td>
</tr>
<tr>
<td>Suppress</td>
<td>If you select this option</td>
</tr>
<tr>
<td></td>
<td>the message does not appear</td>
</tr>
</tbody>
</table>

Setting the message type to "E" prevents your system from automatically adjusting the surgical procedures catalog.
37.9.2.16 DE: Quantity and Unit of Measure Added (New)

Use

This release note is relevant for the country version Germany only. Documentation is not available in English.

37.9.2.17 DE: Indicators "Regrouping Is Advised" or "DRG Is Obsolete" (Changed)

Use

This release note is relevant for the country version Germany only. Documentation is not available in English.

37.9.2.18 AT: Diagnoses - LKF: Asterisk/Dagger Plausibility Check (Enhanced)

Use

This release note is relevant for the country version Austria only. Documentation is not available in English.

37.9.3 IS-H-MD-MRM Medical Record Management

37.9.3.1 Restriction of Access to Borrowing History (New)

Use

As of SAP ECC Industry Extension Healthcare 6.0, you can restrict changing the borrowing history in Medical Record Management by means of the authorization object N_BORR_HIS with the fields N_EINRI and ACTVT.

The only possible value for the field ACTVT is "02" for "Change the Borrowing History". If a user does not have the relevant authorization object, the "Change" and "Delete" pushbuttons are deactivated in the borrowing history.

Effects on System Administration

The profile N_ISH_ALL contains the new authorization object by default. Make sure that only authorized users have the new authorization object with the activity 02.
37.10 IS-H-PA Patient Accounting

37.10.1 General Ledger in Financial Accounting (New)

Use
As of SAP ECC 6.0, the new general ledger is provided in the Financial Accounting component (FI). You can implement the new general ledger in SAP Patient Management.

We recommend new customers to implement the new general ledger.
Note that in production operation, you have to carry out a migration.
For further information about the new general ledger, see the Release Notes for Financial Accounting and SAP Notes.

37.10.2 CH: Service Rule C18 - Time-Stamp Remapping (Changed)

Use
This release note is relevant for the country version Switzerland only. Documentation is not available in English.

37.10.3 CH: Charge Factor Value Determination TARMED (Changed)

Use
This release note is relevant for the country version Switzerland only. Documentation is not available in English.
37.10.4 CH: TARMED - Service Rule C19 - Maximum (Changed)

Use

This release note is relevant for the country version Switzerland only. Documentation is not available in English.

37.10.5 CH: TARMED (Changed)

Use

This release note is relevant for the country version Switzerland only. Documentation is not available in English.

37.10.6 DE: Invoice Reduction due to Integrated Care (New)

Use

This release note is relevant for the country version Germany only. Documentation is not available in English.

37.10.7 DE: Mapping Length of Stay Reductions (New)

Use

This release note is relevant for the country version Germany only. Documentation is not available in English.

37.10.8 DE: Readmission Processing (New)

Use

This release note is relevant for the country version Germany only. Documentation is not available in English.

37.10.9 AT, CH: Fee-Based Billing Reset (New)

Use

This release note is relevant for the country versions Austria and Switzerland only. Documentation is not
available in English.

37.10.10 DE: Checks During Creation of a Complete Readmission Case (New)

Use
This release note is relevant for the country version Germany only. Documentation is not available in English.

37.10.11 AT: Billing (Changed)

Use
This release note is relevant for the country version Austria only. Documentation is not available in English.

37.10.12 AT: Fee (Changed)

Use
This release note is relevant for the country version Austria only. Documentation is not available in English.

37.10.13 AT: Service Rule A1/A2 - Flat Rate/Billability (Changed)

Use
This release note is relevant for the country version Austria only. Documentation is not available in English.

37.10.14 AT: Service Rule A3 - Remapping - Selection Criterion Age (Changed)

Use
This release note is relevant for the country version Austria only. Documentation is not available in English.

37.10.15 AT: Service Rule A4 - Maximum Values per Case/Department
(Changed)

Use

This release note is relevant for the country version Austria only. Documentation is not available in English.

37.10.16 AT: Service Rule A6 - Maximum Service Values Scale (Changed)

Use

This release note is relevant for the country version Austria only. Documentation is not available in English.

37.10.17 AT: Service Rule A9 - Maximum Values (Changed)

Use

This release note is relevant for the country version Austria only. Documentation is not available in English.

37.10.18 AT: Service Rule AK: Exclusion Using Diagnoses (Changed)

Use

This release note is relevant for the country version Austria only. Documentation is not available in English.

37.10.19 AT: Service Rules (Changed)

Use

This release note is relevant for the country version Austria only. Documentation is not available in English.

37.10.20 IS-H-PA-INS Insurance Relationship

37.10.20.1 Alternative Invoice Recipient (Changed)
Use

With the release following SAP ECC Industry Extension Healthcare 6.0, we shall no longer support the alternative invoice recipient function.

The third-party payer concept has accommodated this function since SAP Patient Management 4.72. For further information about this function, see IS-H Hospital -> Patient Accounting -> Insurance Relationships -> Third-Party Payer in the SAP Library.

37.10.20.2 Insurance Relationships at Patient Merge (New)

Use

As of SAP Patient Management 4.72 Add-On Support Package 10 and SAP ECC Industry Extension Healthcare 6.0, you can merge patients without first having to adjust the insurance relationship proposal pool. The system displays the proposal pool data for informational purposes and automatically performs synchronization, if necessary.

If entries in the proposal pool that refer to the same insurance provider have different main person insured data, employer of the main person insured, short or long text, healthcare smart card data, or contract scheme, the system thus no longer issues the warning message N1 104. If the corresponding entries for validity, type of coverage, insurance provider subgroup, insurance number for customer, status of insured on the healthcare smart card, or status of insured supplement on the healthcare smart card in the proposal pool are different, the system no longer issues the warning message N1 103.

See also

For more information, see the SAP Note 852538.

37.10.20.3 AT: Insurance Relationship: Third-Party Payer (Changed)

Use
This release note is relevant for the country version Austria only. Documentation is not available in English.

### 37.10.21 IS-H-PA-SER Services

#### 37.10.21.1 DE: Service Rule R22 (New)

**Use**

This release note is relevant for the country version Germany only. Documentation is not available in English.

#### 37.10.21.2 DE: Service Rule R7 (Changed)

**Use**

This release note is relevant for the country version Germany only. Documentation is not available in English.

#### 37.10.21.3 BAPIs of Function Group 2099 (Changed)

**Use**

As of *SAP ECC Industry Extension Healthcare 6.0*, the BAPIs of function group 2099 can handle SAPscript long texts.

#### 37.10.21.4 Automatic Assignment of Treatment Certificate to Services (New)

**Use**

As of *SAP ECC Industry Extension Healthcare 6.0*, you can have a treatment certificate automatically assigned to services.

This function is provided in the following transactions:
- **Clinical Process Builder** (transaction code NV2000)
- Service entry (transaction codes NL10 and NL10N)
- Maintenance of treatment certificates (transaction code NP44)

### 37.10.21.5 Service Entry: Batch Input Behavior (Changed)

**Use**

As of *SAP ECC Industry Extension Healthcare 6.0*, batch input for organizational unit-related service entry (transaction code NL04N) and service entry (transaction code NL10) has been switched over from screen 315 (SAPNL017) to screen 800 (SAPNL017).

To enable you to also change individual services in the new screen 800, the ok code POSI is still provided for setting the cursor on an existing service.

If a service sequence number does not exist, the system issues a warning. The batch input is not terminated.

**Effects on Existing Data**

Since existing batch inputs created by the customer no longer run, you have to adjust them.

You can use batch inputs contained in the standard system without making any changes.

### 37.10.21.6 Form Processing in Clinical Process Builder (Enhanced)

**Use**

As of *SAP ECC Industry Extension Healthcare 6.0*, you can process all forms in service entry in the **Clinical Process Builder**.

When you launch the transaction, the system proposes standard form, as in previous releases.
37.10.21.7 Integration of Service Subscreen in Clinical Process Builder (Enhanced)

Use

As of SAP ECC Industry Extension Healthcare 6.0, the Services subscreen is fully integrated into the Clinical Process Builder. This means that you can now make all service-relevant entries and changes directly in the subscreen.

37.10.21.8 Batch Input Switched Over to Direct Transfer (New)

Use

As of SAP ECC Industry Extension Healthcare 6.0, data is no longer transferred into service entry screen 200 (NL10-BI) using batch input as in previous releases. The system transfers the data directly.

Effects on System Administration

If you have developed your own programs that use batch input on screen 200 (NL10-BI), you have to adapt these programs to the new method.
37.10.22 IS-H-PA-VER  Insurance Verification

37.10.22.1 Transactions for Insurance Verification (NK03 to NK10) (Deleted)

Use

For SAP ECC Industry Extension Healthcare 6.0, the transactions for insurance verification (transaction codes NK03 to NK10) have been removed from the area menus.

37.10.23 IS-H-PA-COP  Copayment

37.10.23.1 Copayment: New Values for User Parameter DTZ (Changed)

Use

As of SAP ECC Industry Extension Healthcare 6.0, you can enter the new values 5 or 6 for the user parameter DTZ (Copayment Request/Copayment).

If you enter the value 5 for the user parameter DTZ, the system fills the copayment request fields. If you enter the value 6, the system fills the field for the copayment made.

The system assigns the following content to the fields:

- Document date = current date
- Currency = local currency
- Insurance provider: Where possible, the system proposes an insurance provider for which the Copayment Obligation indicator is set in the insurance relationship for the case. Otherwise, the system proposes an insurance provider for which a copayment procedure is defined in the insurance provider master. If neither exist, the system proposes the first active insurance provider for the case.
37.10.23.2 DE: Copayment Processing for Readmission Cases (Changed)

Use
This release note is relevant for the country version Germany only. Documentation is not available in English.

37.10.23.3 DE: Outpatient Copayment/Practice Fee (New)

Use
This release note is relevant for the country version Germany only. Documentation is not available in English.

37.10.23.4 Configure Outpatient Copayment Request and Payment (Changed)

Use
The IMG activities for the outpatient copayment Maintain Parameters for Copayment Requests (maintenance view V_TN22F) and Configure Copayment (maintenance view V_TN22G) have been redesigned for SAP ECC Industry Extension Healthcare 6.0. The input fields on the detail screen have been rearranged for greater clarity.

37.10.24 IS-H-PA-DPA Down Payment

37.10.24.1 Functional Enhancements in Down Payment Monitor (New)

Use
As of SAP ECC Industry Extension Healthcare 6.0, functional enhancements are provided for insurance providers and outpatient cases in the down payment monitor (technical name RNAANZ01).

The following new functions are provided:
- Insurance-provider parameters have been added to the Down Payment Monitor Insurance Provider group box in the IS-H: Down Payment Request Parameters view.
- The required-entry field **Case Type** has been added to the selection screen. In this field, you can choose whether you want to process outpatient, inpatient, or day patient cases. Radio buttons on the selection screen enable you to select insurance providers or self-payers.

- Output of two different lists for self-payers and insurance providers.

- It is now also possible to generate down payment requests for self-payers and insurance providers when the output list shows a red traffic light.

- The fields **Case Number**, **Insurance Provider**, and **Insurance Provider Customer** have been added to the print structure RNF43 (*IS-H: Generate Form Structure for Down Payment Request*).

- New event **Generate Outpatient Down Payment Request** (ANZ031).

- New assignments of work organizer types to events have been made in the standard SAP system:

<table>
<thead>
<tr>
<th>ANZ011</th>
<th>ANZ031</th>
</tr>
</thead>
<tbody>
<tr>
<td>ANZG</td>
<td>ANZG (new)</td>
</tr>
<tr>
<td>RECHANZ</td>
<td>RECHANZ (new)</td>
</tr>
<tr>
<td>RECH_01</td>
<td>RECH_10 (new)</td>
</tr>
<tr>
<td>RECH01CK (new)</td>
<td>RECH10CK (new)</td>
</tr>
<tr>
<td>RECH_01D (new)</td>
<td>RECH10TK (new)</td>
</tr>
<tr>
<td>RECH_01S (new)</td>
<td>RECH_10S (new)</td>
</tr>
<tr>
<td>--</td>
<td>--</td>
</tr>
</tbody>
</table>

**37.10.25 IS-H-PA-BIL**

**Billing**

**37.10.25.1 DE: BDT Interface - SAP Enhancement NBDT0001 (Changed)**

**Use**

This release note is relevant for the country version Germany only. Documentation is not available in English.

**37.10.25.2 CH: 5-Centime Rounding According to TARMED (Changed)**

**Use**
This release note is relevant for the country version Switzerland only. Documentation is not available in English.

37.10.25.3 DE: Outpatient Surgery (Changed)

Use

This release note is relevant for the country version Germany only. Documentation is not available in English.

37.10.25.4 DE: Flat Rate per Case Regulation (FPV) 2005 (Changed)

Use

This release note is relevant for the country version Germany only. Documentation is not available in English.

37.10.25.5 DE: Billing of Medically-Justified Companions (New)

Use

This release note is relevant for the country version Germany only. Documentation is not available in English.

37.10.25.6 CA, CH, SG: Invoice Overview for Multiple Logical Invoices (New)

Use

As of SAP ECC Industry Extension Healthcare 6.0, you can have the system simultaneously display the billing documents of several logical invoices in the invoice overview (transaction code NA30).

In the country versions Switzerland, Singapore and Canada, the system displays all existing logical invoices in the invoice overview (transaction code NA30). Up to now, you were able to display all of the billing documents of precisely one logical invoice in this invoice overview. Now when you choose the Selected Invoices pushbutton the system simultaneously displays the logical invoices you have selected.

SAP no longer supports the Invoice Overview for Case (transaction code NA40).
37.10.25.7 DE: BDT Interface - New Field Label for Referral Certificate (New)

Use

This release note is relevant for the country version Germany only. Documentation is not available in English.

37.10.25.8 DE: BDT Interface - Day Split (New)

Use

This release note is relevant for the country version Germany only. Documentation is not available in English.

37.11 IS-H-MM Integration with Materials Management

37.11.1 Ordering Physician in Case-Related Material Consumption (New)

Use

As of SAP ECC Industry Extension Healthcare 6.0, an additional input-enabled field is provided in the transactions for entering and changing material consumptions (transaction codes NMMC1, NMMC2 and NMCO2).

You can now enter the physician who ordered the material in the consumption documentation. Along with the material batch number, this now guarantees the unique and complete medical documentation of the material consumptions.

The ordering physician and the patient have been added to the selection screen and to the selection list of displayable fields in the material consumption list evaluation (transaction code NMCOL).

Effects on Customizing

If you use the transaction for transferring the material consumption data from files (transaction code NMCO2) and also want to enter the ordering physician here, you have to adjust the structure of the data transfer input file in Customizing.

For further information about this, see the IMG activity Data Transfer - Define Structures.
37.11.2 IS-H MM: Case-Related Material Consumption Documentation (Changed)

Use

As of SAP ECC Industry Extension Healthcare 6.0, the standard Business Add-Ins (BAdIs) of the Clinical Process Builder for presetting fields and checking input are connected to the transaction for maintaining the material consumption (transaction code NMMC1).

This concerns the following BAdIs:
- ISH_NV2000_PA1: IS-H: Clinical Process Builder - Check Subscreen Data

See also

For further information, see the BAdI documentation.

37.11.3 IS-H-MM-REQ  Material Requisition

37.11.3.1 Material Requisition (Changed)

Use

As of SAP ECC Industry Extension Healthcare 6.0, the key fields in the material requisition (Material and Material Text) are no longer input-enabled after you have entered values in them. This prevents incorrect entries caused by subsequent changes.

If you want to change existing entries in the key fields, you have to cancel these entries, and then renew your input.

You can continue to change fields that are not key fields (for example, Order Quantity) so long as you have not yet transferred the requisition into Materials Management.
37.11.3.2 Collective Processing of Material Requisitions (Changed)

Use

As of SAP Patient Management 4.72 Add-On Support Package 3 and SAP ECC Industry Extension Healthcare 6.0, the system displays the price based on the order unit in the Material Price column in collective processing of material requisitions (transaction code NMM4).

The field catalog now contains the Total Price column that enables you to display the total price of the requisition (quantity x price per order unit).

37.11.3.3 Field Catalog "IS-H: Hospital Pharmacy Materials List" (Enhanced)

Use

As of SAP Patient Management 4.72 Add-On Support Package 5 and SAP ECC Industry Extension Healthcare 6.0, the field catalog of the report IS-H: Hospital Pharmacy Materials List (technical name RNLMAT01) contains the following additional fields:

- Catalog 1
- Catalog 2
- Catalog 3

37.11.3.4 Free-Text Requisitions in Material Requisition Collective Processing (Changed)

Use
As of SAP Patient Management 4.72 Add-On Support Package 5 and SAP ECC Industry Extension Healthcare 6.0, you can enter free-text requisitions for materials in material requisition collective processing (technical name of report RNMMANF0; transaction code NMM4).

37.11.3.5 Pick List Field Catalog (Enhanced)

Use

As of SAP Patient Management 4.72 Add-On Support Package 5 and SAP ECC Industry Extension Healthcare 6.0, the field catalog of the pick list (technical name RNMPICK0) contains the Shelf-Life Expiration Date field.

The field contains the shelf-life expiration date of the relevant batch.

37.12 IS-H-IS Information System

37.12.1 IS-H-IS-GMS Government-Mandated Statistics

37.12.1.1 DE: AEB Statistics (Changed)

Use

This release note is relevant for the country version Germany only. Documentation is not available in English.

37.12.1.2 DE: Report for Hospital Statistical Regulatory Requirements 2004
(New)

Use

This release note is relevant for the country version Germany only. Documentation is not available in English.

37.12.1.3 AT: Statistics (Changed)

Use

This release note is relevant for the country version Austria only. Documentation is not available in English.

37.12.2 IS-H-IS-STA Other Statistics

37.12.2.1 CH: Hospital Type/Category Added to Report RNREFRDT (Changed)

Use

This release note is relevant for the country version Switzerland only. Documentation is not available in English.

37.13 IS-H-CM Communication

37.13.1 CH: TARMED - Service Interface Using BAPI (Changed)

Use

This release note is relevant for the country version Switzerland only. Documentation is not available in English.

37.13.2 CH: ELACH - Transmission of an Alternative Service Code (New)

Use

This release note is relevant for the country version Switzerland only. Documentation is not available in English.
37.13.3 CH: ELACH - New Method for BAdl (New)

Use

This release note is relevant for the country version Switzerland only. Documentation is not available in English.

37.13.4 CH: ELACH - Electronic Invoice Transmission MediData (Changed)

Use

This release note is relevant for the country version Switzerland only. Documentation is not available in English.

37.13.5 CH: Error Handling ALIS Service Interface (Changed)

Use

This release note is relevant for the country version Switzerland only. Documentation is not available in English.

37.13.6 IS-H-CM-OUT Communication with Systems Outside the Hospital

37.13.6.1 SG: NPMI: Length of External Code Increased from 6 to 13 Characters (New)

Use

As of SAP ECC Industry Extension Healthcare 6.0, you can assign 13-character external codes to risk information. These codes are used in the messages for the NPMI communication procedure.

Effects on Customizing

You can enter the external codes in the risk information catalog. If you use 13-character external codes, you must ensure that the communication partner accepts these codes.
37.13.6.2 DE: Transmission of Data According to Paragraph 21 KHEntgG (Changed)

Use
This release note is relevant for the country version Germany only. Documentation is not available in English.

37.13.6.3 DE: Report "IS-H: DRG Data P21: Case Data" (Enhanced)

Use
This release note is relevant for the country version Germany only. Documentation is not available in English.

37.13.6.4 AT: Data Interchange with Social Insurance Funds (New)

Use
This release note is relevant for the country version Austria only. Documentation is not available in English.

37.13.6.5 AT: Data Interchange with Social Insurance Funds (Changed)

Use
This release note is relevant for the country version Austria only. Documentation is not available in English.

37.13.6.6

YShort text

AT: Scoring (Changed)

Use
This release note is relevant for the country version Austria only. Documentation is not available in English.
37.13.6.7 CH: New EDI Procedure XMLIN for MediData V4.0 (New)

Use

This release note is relevant for the country version Switzerland only. Documentation is not available in English.

37.13.6.8 CH: RNADIN03 - Inclusion of Electronic Invoices (Changed)

Use

This release note is relevant for the country version Switzerland only. Documentation is not available in English.

37.14 IS-H-TO   Tools

37.14.1 Harmonization of Archiving Reports (Changed)

Use

The archiving reports RNARCF0W (write program) and RNARCF0D (deletion program) have been reworked for SAP ECC Industry Extension Healthcare 6.0.

The selection screen and the results list have been adapted to the SAP-wide standards for processing archiving objects. For information about the new selection parameters, see the respective F1 help.

The report RNARCF0W now displays the completion progress. If you run the program in the background, a progress message is written to the job log every 30 minutes. In dialog mode, the progress message is output in the status bar every 10 seconds.

The archiving object ISH_FALL now supports the SAP data archiving interruption function. This means that you can interrupt an archiving session in archive administration and continue it at a later point in time. For further information, see the documentation for archiving in the SAP system.

Effects on Customizing

Make the following changes in the IMG activity Set Up Case Archiving:

Call up the detail display for the archiving object ISH_FALL. For the Test Mode Variant field, select the variant SAP&TEST and for the Production Mode Variant field, select the variant SAP&PROD.

Then call the report RNARCF0D. Delete the variants PRODUKTIV and TESTLAUF for this report.
37.14.2 CH: Invoice Form (Smart Form) (Changed)

Use

This release note is relevant for the country version Switzerland only. Documentation is not available in English.

37.14.3 DE: Form Print (Enhanced)

Use

This release note is relevant for the country version Germany only. Documentation is not available in English.

37.14.4 Use of Form Overlays with Form Archiving (Changed)

Use

Customizing for work organizers has been redesigned for SAP ECC Industry Extension Healthcare 6.0.

You can no longer store an overlay form for displaying archived forms. Instead, it is recommended to transfer important information from the overlay form to the print form.

37.14.5 PDF-Based Forms for Form Print (New)

Use

As of SAP ECC Industry Extension Healthcare 6.0, print output for forms is also accommodated by PDF-based form print. In Customizing for SAP Healthcare, you can now define PDF-based print forms for the various work organizers, and activate them for print output.
Effects on Customizing

To be able to use the PDF-based print forms, you have to define PDF-based print forms for the various work organizers, and activate them for print output.

For more information about this, see SAP Healthcare - Industry-Specific Components for Hospitals -> Tools -> Work Organizer Management in the IS-H Implementation Guide.

37.14.6 Work Organizer Type ARCHCASE (Deleted)

Use

As of SAP ECC Industry Extension Healthcare 6.0, the work organizer type ARCHCASE and its dependent objects are no longer available.

The work organizer type was used to print the data of archived cases. Since form print of archived case data in SAP Patient Management is no longer possible, the work organizer type is no longer needed.

37.14.7 Program for Table NFALA Migration (Deleted)

Use

As of SAP ECC Industry Extension Healthcare 6.0, the program for migrating data from table NFALA into the IS-H archive info system (technical name RNUARCAS0) no longer exists.