Axon Registry Minimum Data Set for Push and Pull Data Transfer Methods

In accordance with the Academy's HIPAA Privacy Policies and Procedures and Data Governance Policy, the Axon Registry® requests and collects only the minimum necessary Protected Health Information ("PHI") from Participants, in addition to collection of certain Provider Data. With respect to the ongoing provision of Health Care Operations services to Participants (i.e., quality improvement activities), the Academy has determined that the minimum necessary PHI is the complete electronic health record. In addition, at the time a Participant enrolls in the Registry, the Registry may collect a certain amount of historic data from the Participant that is necessary to enable the Registry to provide Health Care Operations services to the Participant. The Registry may also collect Patient-reported Outcomes ("PROs") for the Health Care Operations purposes described in the Data Governance Policy.

For the Pull data transfer, the Registry Practice Connector ("RPC") extracts the patient chart based on provider NPI. For the Push data transfer, the practice sends the patient record files to the Registry. The Push data transfer method uses the Clinical Data Record ("CDR") format as a guide for the Push practice IT staff to gather the patient record elements. The CDR elements originate from 16 different patient record sections. See CDR summary document for more information. Participants in the Registry have agreed to implement the data collection protocol and requirements of the Registry. To facilitate implementation of quality improvement for the Participant, collection of the complete patient record is a requirement for participation in the Registry.

The PHI elements in the Registry include: medical record number ("MRN"), encounter date, patient’s full name, social security number ("SSN"), date of birth, sex, death date, and zip code. The MRN and patient’s full name are used in the Registry user dashboard to identify the patients who meet or did not meet the quality measures. The patient encounter date, date of birth, MRN, and sex are required to calculate measure performances. SSN, death date and zip code are required for quality benchmarking.

Information collected for each measure:
- Medical Record Number (MRN)
- Encounter Date
- Practice ID
- Location ID
- Physician Last Name
- Physician First Name
- Physician Middle Name
- Physician NPI
- Encounter TIN
- Patient Last Name
- Patient First Name
- Patient Middle Name
- Social Security Number
- Date of Birth
- Sex
- Patient Deceased
- Death Date
- Race - White
- Race - Black/African American
- Race - Asian
- Race - American Indian/Alaskan Native
- Race - Native Hawaiian/Pacific Islander
- Hispanic or Latino Ethnicity
- Patient Zip Code
- Insurance - Private Health Insurance
- Insurance - Medicaid
- Insurance - Military Health Care
- Insurance - State Specific Plan (non-Medicaid)
- Insurance - Indian Health Service
- Insurance - Non-US Insurance
- Insurance - None
- Insurance - Medicare (Fee for service)
- Insurance - Medicare (Managed care)
- Payer ID