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**NATIONAL STANDARD OF THE
PEOPLE'S REPUBLIC OF CHINA**

GB/T 21715.6-2020

**Health informatics--Patient health card data - Part 6:
Administrative data**

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Foreword

GB/T 21715 "Health Card Data for Health Informatics Patients" is divided into 8 parts.

---Part 1.Overall structure;

---Part 2.General objects;

---Part 3.Limited clinical data;

---Part 4.Expand clinical data;

---Part 5.Identification data;

---Part 6.Management data;

---Part 7.Medication data;

---Part 8.Links.

This part is Part 6 of GB/T 21715.

This section was drafted in accordance with the rules given in GB/T 1.1-2009.

This part uses the translation method to be equivalent to ISO 21549-6:2008 "Health Informatics Patient Health Card Data Part 6.Management Data

according to".

The Chinese documents that have a consistent correspondence with the normatively cited international documents in this section are as follows.

---GB/T 2659 Name codes of countries and regions in the world (GB/T 2659-2000, eqvISO 3166-1:1997)

---GB/T 13000 Information Technology Universal Multi-octet Coded Character Set (UCS) (GB/T 13000-2010, ISO /

(IEC 10646:2003, IDT)

---GB/T 16262.1 Information Technology Abstract Syntax Notation One (ASN.1) Part

1.Basic Notation Specification (GB/T 16262.1-

2006, ISO /IEC 8824-1.2002, IDT)

---GB/T 16263.1 Information Technology ASN.1 Encoding Rules Part 1.Basic Encoding Rules (BER), Regular Encoding Rules

(CER) and atypical coding rules (DER) specifications (GB/T 16263.1-2006, ISO /IEC 8825-1.2002,

IDT)

---GB/T 16649.6 Identification card integrated circuit card with contacts. Part

6.Inter-industry data element (GB/T 16649.6-

2001, idtISO /IEC 7816-6.1996)

---GB/T 21715.1 Health Informatics Patient Health Card Data Part 1.Overall Structure (GB/T 21715.1-2008,

(ISO 21549-1.2004, IDT)

Compared with ISO 21549-6.2008, the following editorial changes have been made in this section.

--- The "range" paragraph order has been adjusted.

This part is proposed and managed by China National Institute of Standardization.

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Balanced case combination technology research center, China-Japan Friendship Hospital, Beijing Shijitan Hospital, Peking University Third Hospital, Peking University, Anhui won the bid

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Introduction

With the increase in population mobility, the demand for community medical and family health care is increasing, and the demand for high-quality mobile treatment services is also increasing

As a result, portable information systems and memories have also been rapidly developed and utilized. With portable medical record files, these devices can achieve

A series of functions from identification to patient portable health monitoring system.

The function of these devices is to carry identifiable personal information and transfer this information with other systems. Therefore, the device is running

May share information with many different technical systems with very different functions and performance.

Healthcare management is increasingly relying on similar automated identification systems. For example, by automatically processing prescriptions, patients can use

Portable readable computer equipment enables data exchange between different locations. More and more medical insurance companies and health care service providers

Involves cross-regional health care. In this case, claims (or reimbursement) may require the automatic exchange of data between many different health care systems.

Management data objects may need to be linked to the systems of other external parties whose fields are not covered by GB/T 21715

Within range. For example, the issue of transnational claims for health care services should normally be governed by laws and intergovernmental agreements outside the scope of standardization.

The emergence of a remotely accessible database and its supporting system has driven the development and utilization of "health beneficiaries" identification devices, which can

Perform security functions and be able to transmit digital signatures to remote systems via the network.

With the increasing use of data cards in daily healthcare services, it is necessary to standardize the data format to achieve data exchange.

The data related to people carried by the data card can be divided into three main types. identification data, management data and clinical data. Need to refer specifically

It is concluded that the health data card actually used should contain the identification data of the device itself and the personal identification data involved in the data carried by it.

It can also contain management data, clinical data, medication data, and link data.

Device data includes.

- The identification of the device itself;
- Identification of equipment functions and performance.

Identification data may include.

- The unique identifier of the equipment holder (excluding other people's information).

Management data may include.

- Personal supplementary data;
- The identification of health care funds, indicating whether they are publicly-funded or self-paid, and their relationship, that is, insurance companies, insurance contracts and Type of insurance policy or premium;
- The identification of other persons as an integral part of an insurance contract (such as a family contract);
- Other data necessary for health care services (different from clinical data).

Clinical data can include.

- Data items that provide health information and health event information;
- Evaluation and labeling of them by healthcare providers;
- Clinical behaviors that have been planned, required, or executed.

Medication data can include.

- Patient's medication record;
- Copy of prescription (including drug distribution agency information);
- The patient's self-purchased drug record;
- Pointers to other systems that contain information about drug prescriptions and drug distribution agencies.

Because the data card is essentially to provide clear answers to specific queries, it is necessary to optimize the use of storage space by eliminating redundancy

Therefore, high-level object modeling technology (ObjectModelingTechnique, OMT).

The patient health card provides the following conveniences.

- a) Exchange of prescription information between different healthcare parties, such as healthcare agents or healthcare organizations;