

# RED interchange API - Search/Read Claims

A claim represents a chargecode for statutory or private billing (Leistungsziffer EBM oder GOÄ). Claims are assigned to a patient and may be searched using a **search request (GET)**. Search for claims will return a bundle including one or more FHIR items of type [KBV\\_PR\\_AW\\_Abrechnung\\_vertragsaerztlich](#).

## Example for a SEARCH request for all claims of a given patient

```
{{baseURL}}/{{tenant}}/Claim?page=1&patient=Patient/6009
```

Example: this search requests fetches all claims defined in RED for patient 6009

- A search request requires a patient reference, search requests without patient ID will be dismissed.
- Pagination may be dismissed, but to avoid response timeouts the number of result will be limited.
- The patient ID is either defined by the 3rd-party-system when creating a patient via POST request (see below) or must be retrieved by a previous search.

Data of a specific claim may be fetched using a **read request (GET)** including the identifier of the claim. A read request returns one FHIR item of type [KBV\\_PR\\_AW\\_Abrechnung\\_vertragsaerztlich](#). The claim ID may be fetched by a previous search request.

## Example of a READ request for a specific claim

```
{{baseURL}}/{{tenant}}/Claim/93SvQn806AIlW1nTk3VUKgDyJJIqEyAv
```

Example: read request for claim with ID 93SvQn806AIlW1nTk3VUKgDyJJIqEyAv

## Example of a FHIR item for a claim

```
<Claim xmlns="http://hl7.org/fhir">
  <id value="93SvQn806AIlW1nTk3VUKgDyJJIqEyAv" />
  <meta>
    <versionId value="1" />
    <lastUpdated value="2022-07-03T00:00:00+00:00" />
    <profile value="https://fhir.kbv.de/StructureDefinition
/KBV_PR_AW_Abrechnung_vertragsaerztlich|1.2.0" />
  </meta>
  <text>
    <status value="extensions" />
    <div xmlns="http://www.w3.org/1999/xhtml">Abrechnung vertragsärztlich vom 03.07.2022 (V1) |
ID 93SvQn806AIlW1nTk3VUKgDyJJIqEyAv | Patient Dirk Wulf | Behandlerkontext LANR 362364901/BSNR 478818100 Dr.
med. Annie More (1) | Priorität normal | Status draft | Abrechnungstyp professional | Zweck normal |
Versicherung N.N. | GOP 03003 | Menge 1 | Einheit 1 | zuletzt bearbeitet 2022-07-03T00:00:00+00:00</div>
  </text>
  <extension url="https://fhir.kbv.de/StructureDefinition
/KBV_EX_AW_Abrechnung_vertragsaerztlich_Zusatzinformation">
    <extension url="schein-ID">
      <valueString value="1" />
    </extension>
    <extension url="kostentraeger-Abrechnungsbereich">
      <valueCodeableConcept>
        <coding>
          <system value="https://fhir.kbv.de/CodeSystem
/KBV_CS_SFHIR_KTS_KTABRECHNUNGSBEREICH" />
          <code value="00" />
        </coding>
      </valueCodeableConcept>
    </extension>
    <extension url="abrechnungsgebiet">
```

```

        <valueCodeableConcept>
          <coding>
            <system value="https://fhir.kbv.de/CodeSystem
/KBV_CS_SFHIR_KBV_ABRECHNUNGSGEBIET"/>
            <code value="00"/>
          </coding>
        </valueCodeableConcept>
      </extension>
      <extension url="scheinuntergruppe">
        <valueCodeableConcept>
          <coding>
            <system value="https://fhir.kbv.de/CodeSystem/KBV_CS_SFHIR_KBV_SCHEINART"/>
            <code value="00"/>
          </coding>
        </valueCodeableConcept>
      </extension>
      <extension url="abklaerung_somatischer_Ursachen_vor_Aufnahme_einer_Psychotherapie">
        <valueBoolean value="false"/>
      </extension>
      <extension url="unfall_Unfallfolgen">
        <valueBoolean value="false"/>
      </extension>
      <extension url="anerkannte_Psychotherapie">
        <valueBoolean value="false"/>
      </extension>
    </extension>
    <status value="draft"/>
    <type>
      <coding>
        <system value="http://terminology.hl7.org/CodeSystem/claim-type"/>
        <code value="professional"/>
      </coding>
    </type>
    <subType>
      <coding>
        <system value="https://fhir.kbv.de/CodeSystem/KBV_CS_AW_Abrechnung_Art"/>
        <code value="Vertragsaerztlich"/>
      </coding>
    </subType>
    <use value="claim"/>
    <patient>
      <reference value="Patient/W4BYbPJsGvWA2sGEfQd9rLv7FFnDeXbh/_history/1"/>
    </patient>
    <created value="2022-07-01"/>
    <provider>
      <reference value="PractitionerRole/TcYtTcJHpzXbgAoEAG091FE05w0ZhrXn/_history/1"/>
    </provider>
    <priority>
      <coding>
        <system value="http://terminology.hl7.org/CodeSystem/processpriority"/>
        <code value="normal"/>
      </coding>
    </priority>
    <related>
      <claim>
        <reference value="Claim/VNFAAlhbsal9y3vZR6sYx4QAmBBXn06J/_history/1"/>
      </claim>
    </related>
    <insurance>
      <sequence value="1"/>
      <focal value="true"/>
      <coverage>
        <reference value="Coverage/Ncz3qu9i5rCxgsgB9WGP6VTpjD9n6xh2"/>
      </coverage>
    </insurance>
  </Claim>

```