

Frequently Asked Questions / Smart Search

Twelve questions provider organizations ask most about automated prior retrieval: how it works, how patient data stays protected, and how to opt in.

Disparate silos of patient data create significant administrative, operational, and clinical gaps. The inability to exchange medical images, reports, and orders often causes care delays, repeat scans, provider dissatisfaction, and patient friction. Healthcare workers waste valuable time searching for imaging and retrieving prior scans using antiquated tools like CDs, faxes, and VPNs.

Medicom Smart Search automates the process of gathering relevant prior imaging exams for treatment planning and diagnosis, alleviating the need for staff to manually request them from outside organizations.

Organizations that use Smart Search experience:

- Cost savings related to locating and retrieving prior exams, including financial resources spent on CDs, VPNs, and legacy solutions.
- Reduction in repeat exams, which reduces patients' costs and exposure to radiation.
- Increased staff satisfaction by minimizing the time and effort required to track down imaging manually.
- Improvements in quality and efficiency of care by delivering the right scan to the right provider at the right time.

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01 Why Opt In to Smart Search

Q1 We're already on the Medicom Connect Network. Why should we opt in to Smart Search?

Beyond automation, opting in mitigates regulatory risk. Smart Search users experience a significant reduction in manual requests for prior records, which decreases an organization's risk of information blocking while freeing up valuable staff resources.

02 Reducing Manual Processes

Q2 How does Smart Search work to retrieve relevant priors without manual intervention?

Smart Search uses an LLM triggered by an HL7 v2 order or scheduling message to automate retrieval. This event-driven clinical workflow searches across connected facilities, broadcasting the query to all authorized provider organizations so that matching imaging studies can be transferred back.

The workflow follows these steps:

- 1 **Event Message Generated:** After the order or scheduling message comes in via HL7, the appointment priority level dictates whether the search is issued immediately or at a scheduled time.
- 2 **Determining What's Relevant:** The LLM continuously learns and associates criteria such as study description, modality, and body part to determine relevancy, eliminating the rigorous mapping work that was previously needed to determine search criteria.
- 3 **Network Search:** Medicom Connect broadcasts a federated search to authorized organizations. All trusted contacts that have authorized Smart Search requests receive the query.
- 4 **Matched Record:** Data is returned only if a single, distinct match is retrieved from an external system for the patient and the patient has relevant prior imaging exams. The system applies a deduplication check to help ensure priors are net-new, checks age and total study count limits, and uses a concurrence limit to queue retrievals sequentially.
- 5 **Reconciliation:** The process can be further automated with retroactive order generation for outside studies and reconciliation into PACS. Organizations can also configure routing rules to deliver studies directly to the archive or hold them at a manual review checkpoint.

03 Patient Matching & Rescheduled Appointments

Q3 How does patient matching work with Smart Search?

Smart Search will retrieve data only if there is a unique patient match. An exact match is based on three points of identification: name, date of birth, and sex. For Epic and FHIR-enabled organizations, Medicom's SMART on FHIR apps extend this to include address, phone number, and email address. It queries the EHR first to protect downstream PACS performance before issuing DICOM queries.

When using FHIR, the system includes automated study appending, which attaches updated reports and corrected patient demographics to outbound studies right at the time of transfer.

Q4 How does Smart Search handle rescheduled appointments?

When a patient changes an appointment, HL7 update messages instantly refresh the data with zero manual intervention.

04 Security, Permissions & Compliance

Q5 How does the system comply with HIPAA? Is patient consent required?

Medicom operates as a non-covered entity under HIPAA and HITECH guidelines, executing a BAA and a common terms of service agreement with every user entity. Our data transfer protocols exceed standard ePHI requirements, enabling health systems to maintain full regulatory compliance.

An explicit, signed release of information is not required to share patient data across the network. Because HIPAA specifically permits the sharing of PHI for continuity of care operations, organizations can safely exchange information without added administrative steps.

Q6 Where can I learn more about HIPAA uses and disclosures for care coordination and continuity of care?

Detailed guidance on how the HIPAA Privacy Rule permits health plans to share PHI for case management and care coordination can be found on the [U.S. Department of Health and Human Services \(HHS\) FAQ page](#).

Q7 Are there controls that prevent bulk searching, broad patient discovery, or ad hoc manual queries?

Yes. Smart Search requires a scheduled appointment for the patient to trigger a search. It does not permit an end user to search for or retrieve any data manually. Each search is tied to a unique appointment ID for an upcoming continuity of care event.

Simply allowing Smart Search does not grant another facility the ability to perform manual, ad hoc queries. Manual searching is available as a separate permission, strictly governed by four permission tiers: search and retrieve, request and search, request, and none. Access is granted solely on a per-connection basis.

PERMISSION 01

Search & Retrieve

PERMISSION 02

Request & Search

PERMISSION 03

Request

PERMISSION 04

None

While the standard workflow prevents manual end-user searches, the system can be configured with separate permissions if an organization chooses to allow user-initiated searches.

Q8 What audit reporting is available for compliance and tracking?

All queries are captured in HIPAA-compliant logs that record who accessed the network, when, what actions were performed, and what data was viewed. These are broken into two logs. Because Smart Search is fully automated, the server name is documented as the requesting user.

LOG 01**Incoming queries**

Captures the source facility, user name, demographics, and the number of results/retrievals.

LOG 02**Sent**

Captures patient and study details (name, DOB, accession number, UID), destination, and transfer status.

Q9 How do we exclude high-profile or sensitive patients from network searches?

Organizations can use external retrieve search limiters, a configuration that explicitly blocks individuals from being discovered during automated searches triggered by external networks. This safeguard is commonly applied to public figures, high-level business executives, professional athletes, and celebrities.

Q10 What is information blocking, and what are the financial penalties for violations?

Information blocking is an impermissible practice where an individual or entity interferes with, prevents, or materially discourages the access, exchange, or use of electronic health information. Under the 21st Century Cures Act, the HHS Office of Inspector General (OIG) enforces penalties for these violations. View the official [HHS-OIG Information Blocking Resource Page](#).

\$1M**Civil monetary penalties, per violation**

If the OIG determines that an eligible actor has committed information blocking, they may be subject to civil monetary penalties of up to \$1 million per violation.

05 Patient Impact**Q11 How do patients benefit from Smart Search?**

Because Smart Search provides widespread interoperability, patients gain access to specialized care within their communities and across the nation. Organizations adopting this technology lead their networks in quality and efficiency, which drives higher patient satisfaction and aligns with value-based reimbursement models that reward systems for reaching quality care thresholds.

06 Configuration & Support

Q12 How do we configure our Medicom Connect ImageX space to allow for Smart Search?

You are in control of the access you grant. Steps to configure your space are in our [Customer Community Knowledge Base](#) or the [Medicom Connect ImageX User Manual](#). For additional assistance, you can [submit a support ticket](#) via the Customer Community or reach out to your account executive.

"[Medicom's] model most closely meets the functionality required for the free flow of information among healthcare providers, reducing information gaps and supporting information flow across the care continuum."

- Cheryl Petersilge, MD, MBA, Medical Consultant for Medicom

Ready to Opt In?

Configure your ImageX space using the [Customer Community Knowledge Base](#), or reach out to your account executive to put Smart Search to work ahead of your next appointment.

