Allscripts PM Training / Reference Guide

Allscripts®

HIS | Healthcare Information Services, L.L.C.

"Leaders in healthcare reimbursement and technology"

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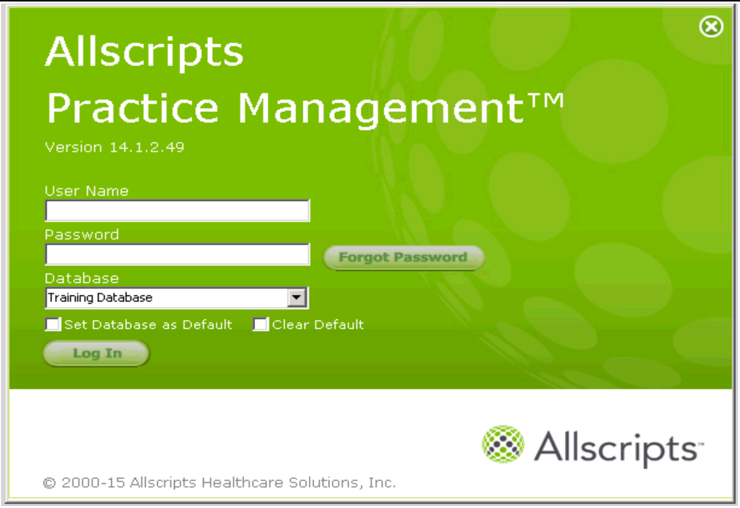
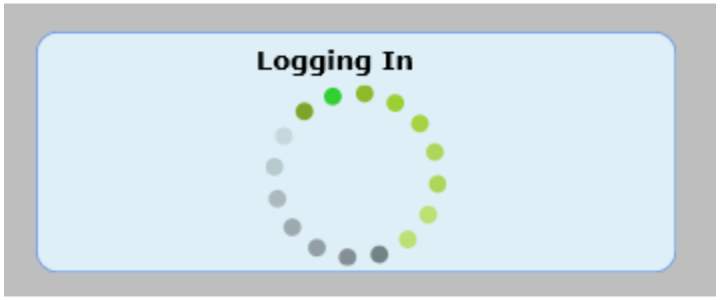
Section 1 - Overview:

1-1 Overview Logging On and Off





Overview Logging On

- Click on the Allscripts icon found on your desk top which opens the Logon Dialog box displayed above.
- **Tab** to or click in the field "User Name." **Key in your assigned user name.**
- **Tab** or click in the field "Password."
- If more than one Practice database is loaded on your network use your mouse on the Database prompt drop down arrow and click on the database you want to logon to. You can set this database as your default. The Logging In screen displays.
- This user name is stamped on the tables of records and transactions you enter while logged on as this user. This means every financial transaction entered, every quick note saved, every appointment scheduled, cancelled etc. is stamped as having been done by the operator associated with the registered user name entered in this dialog box.
- Be sure you only work in a Practice database that is opened with your assigned user name.
- Also, be sure to logoff when you leave your workstation.
- The user's name and password must first be registered in the Allscripts PM Security Database. If not found please contact your System Administrator

Logging Off of Allscripts PM

There are two types of logoff.

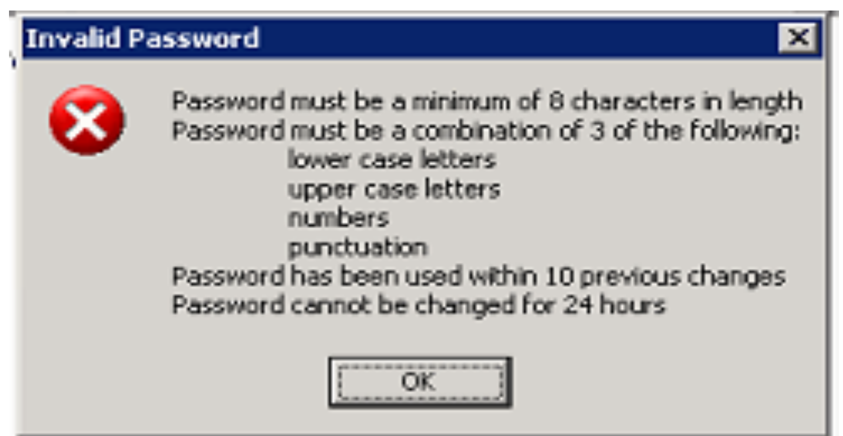
1. Using the toolbar button enables you to keep the application open while you exit a Practice database. This is useful when you leave your workstation for any period of time. It guarantees that only authorized users can logon to the Practice database in your absence.

   If you have logged out of the application using the red arrow, a green arrow will display to be able to log back into the system.

2. Clicking closes the application. At the prompt "Are you sure you want to log off?" click **Yes**.

Passwords:
User Passwords must conform to a specific format or message will appear.

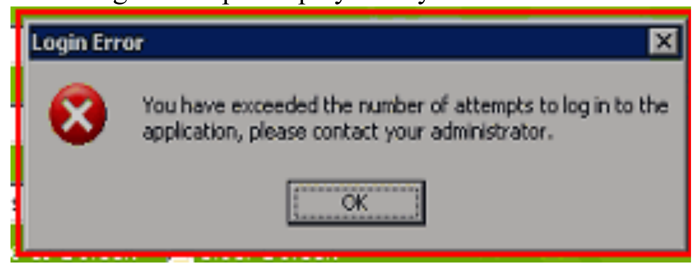
1-2 Overview Logging On and Off- Passwords



Overview Logging On

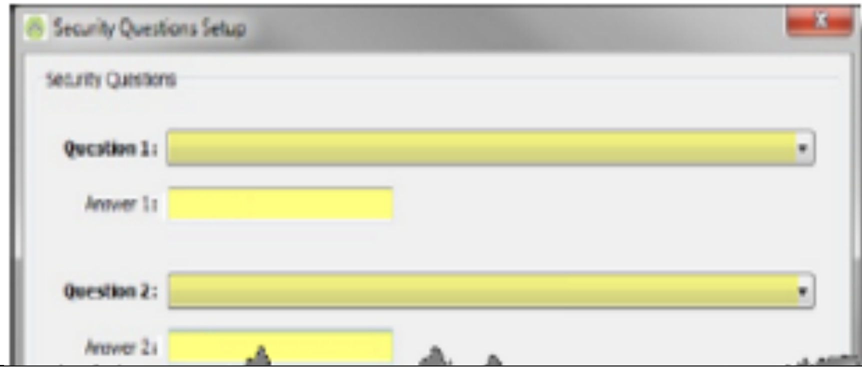
- User Passwords must conform to a specific format (if the format is not met, an invalid password message with display). Passwords are case sensitive.
- Your new password must conform to a specific criteria
  1. Is at least 8 characters
  2. Has not been used as one of your last 10 previous passwords
  3. Contains any combination of at least 3 of the following 4 character groups:
     - Uppercase characters (A-Z)
     - Lowercase characters (a-z)
     - Numerals (0-9)
     - Characters (such as but limited to:!,$,#,%,~)
  4. Has not been changed within the number of hours set for minimum password age in Security Options.

- Your account is automatically locked if you make 10 consecutive failed attempts to log into the Allscripts PM application. After each of the first 9 attempts an Invalid user name or password message displays. The tenth attempt also display an invalid message that you have exceed the number of login attempts displays and you are locked out.



- You will also have the possibility of using the "Reset a forgotten password" option if enabled. This option allows you:
  - To select and answer 5 security questions.
  - Enables a Forgot Password button on the logon window
  - Use the "Manage Security questions" option added to the Change Password toolbar screen
  - Audit tracking when you change your password using this option.
- If you attempt to reset your password but were unable to answer your security questions after 10 attempts, your account will be locked.

1-3 Overview Logging On Setting-up Security Questions


Security Questions Setup
Security Questions
Question 1:
Answer 1:
Question 2:
Answer 2:

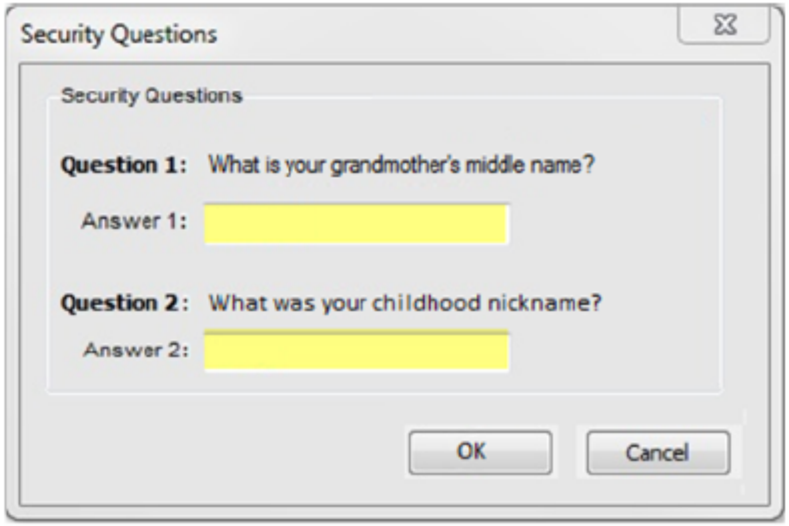
Overview Logging On- Setting-up Security Questions

- The first time you successfully log on to Allscripts® Practice Management you will be asked to set up 5 security questions and answers. There are 29 questions from which you must select 5.
- You can choose to set up the security questions at a later time, but you will continue to be prompted with each logon until the setup is complete.
- The answers to the security questions are free-text, meaning you are not required to follow a specific format.
- You must pay close attention to the answers you enter during setup, because the answer you enter when you need to reset your password must be an exact match to the answer you entered during setup, except for capitalization. For example, if during setup you entered Rose-Marie as the answer to the question "What is your grandmother's middle name?", Rose-Marie or rose-marie are considered a match, but Rose Marie and Rosemarie are not acceptable answers. Any spaces you entered before, after, or within your answer text are considered part of your answer. If you entered a space before or after Rosemarie, you must enter the space in the same position when you are asked to answer the question.
- Your answers must be between 2 and 100 characters in length. They can be a mix of uppercase and lowercase letters, numbers, and special characters. You cannot use the same answer for multiple questions.
- After the security question setup is complete, you can reset your password without being logged on if you know your user name, you can correctly answer 2 of the 5 security questions you selected, and your account was not manually locked by your system administrator. If you are unable to correctly answer the first set of security questions, you can try again with a second set of randomly selected questions. If your second attempt is unsuccessful, you must contact your system administrator to have your password reset.

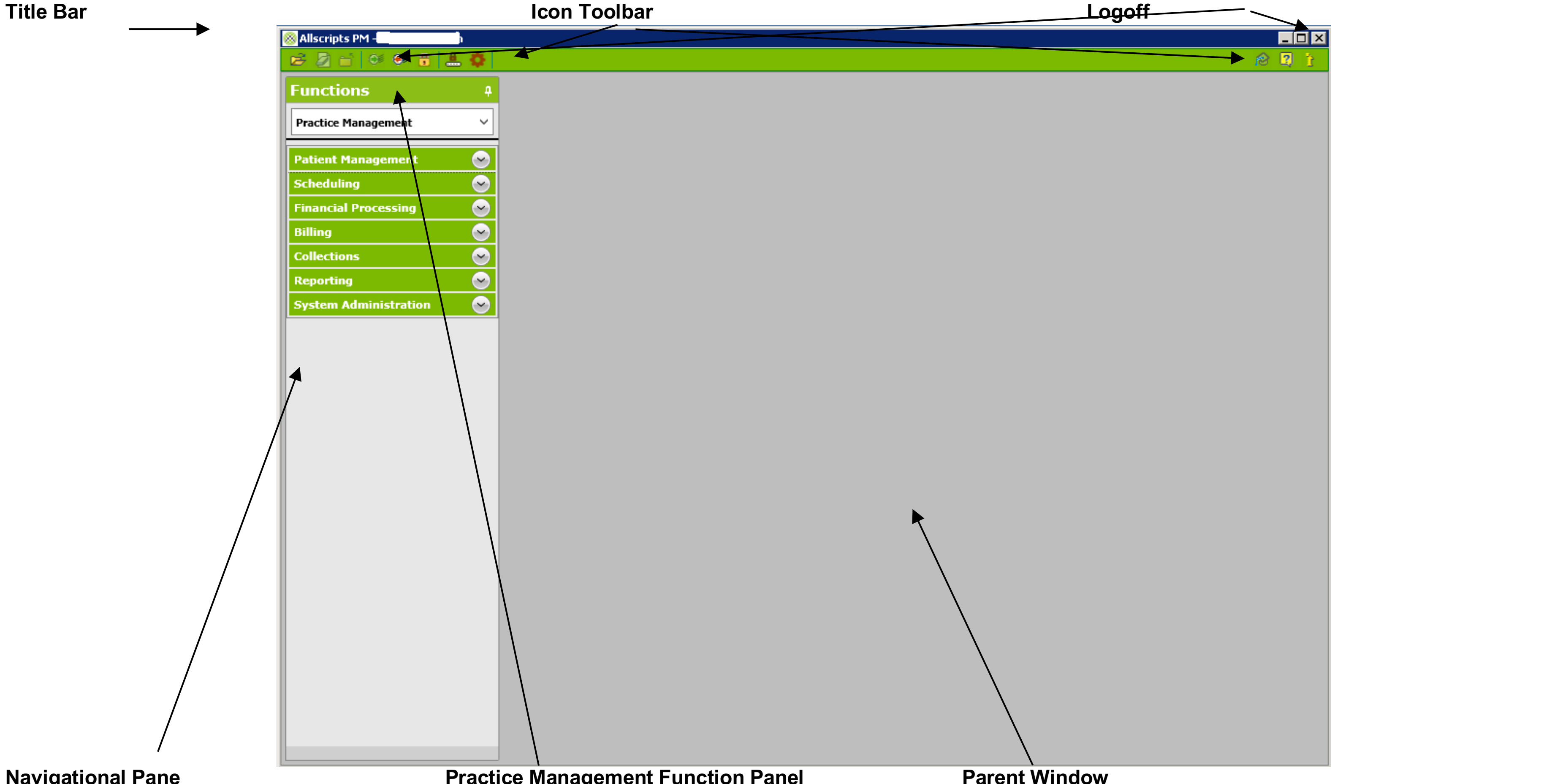
Steps to set up Security Questions

1. If you have not already set up your questions, you will be prompted upon logon- click Yes to open the Security Questions Setup.
   OR- If you are logged into the application, but have not setup your questions, click on the  on the toolbar and select Manage Security Questions.
2. Select or change your questions from the pre-defined questions and enter corresponding answers. You must select 5 questions and your answers must be between 2 and 100 characters in length, a mix of upper/lower/numbers/special characters.
3. Click **Save**.

1-4 Overview Logging On Resetting a Forgotten Password


Security Questions
Security Questions
Question 1: What is your grandmother's middle name?
Answer 1:
Question 2: What was your childhood nickname?
Answer 2:
OK
Cancel

Resetting a Forgotten Password	Steps to Reset a forgotten password
• You must have your security question setup complete before you can reset your password. • If your security questions and answers are set up, and you have entered your user name and selected a database on the Allscripts® Practice Management logon window, you can use **Forgot Password** to reset your password	1. On the Allscripts logon window, enter your user name and select a database. **Forgot Password** is enabled. 2. Click **Forgot Password** which will open the Security Questions window. 3. Enter an answer for each question. All answers boxes are highlighted in yellow, which indicate that they are required boxes. Your answers must match **EXACTLY** as they were set up. If you answer incorrectly, you will be able to try again with a different randomly selected set of questions. The second time if incorrect you will be locked out. 4. Click **OK**. The **Reset Password of [user name]** opens. 5. Enter your New Password and Verify New password. **Note**: Password must meet the same specified criteria. 6. Click **OK** Your new password will be available to logon to the PM application**.**
1-5 Overview Main Screen	



Overview Main Screen

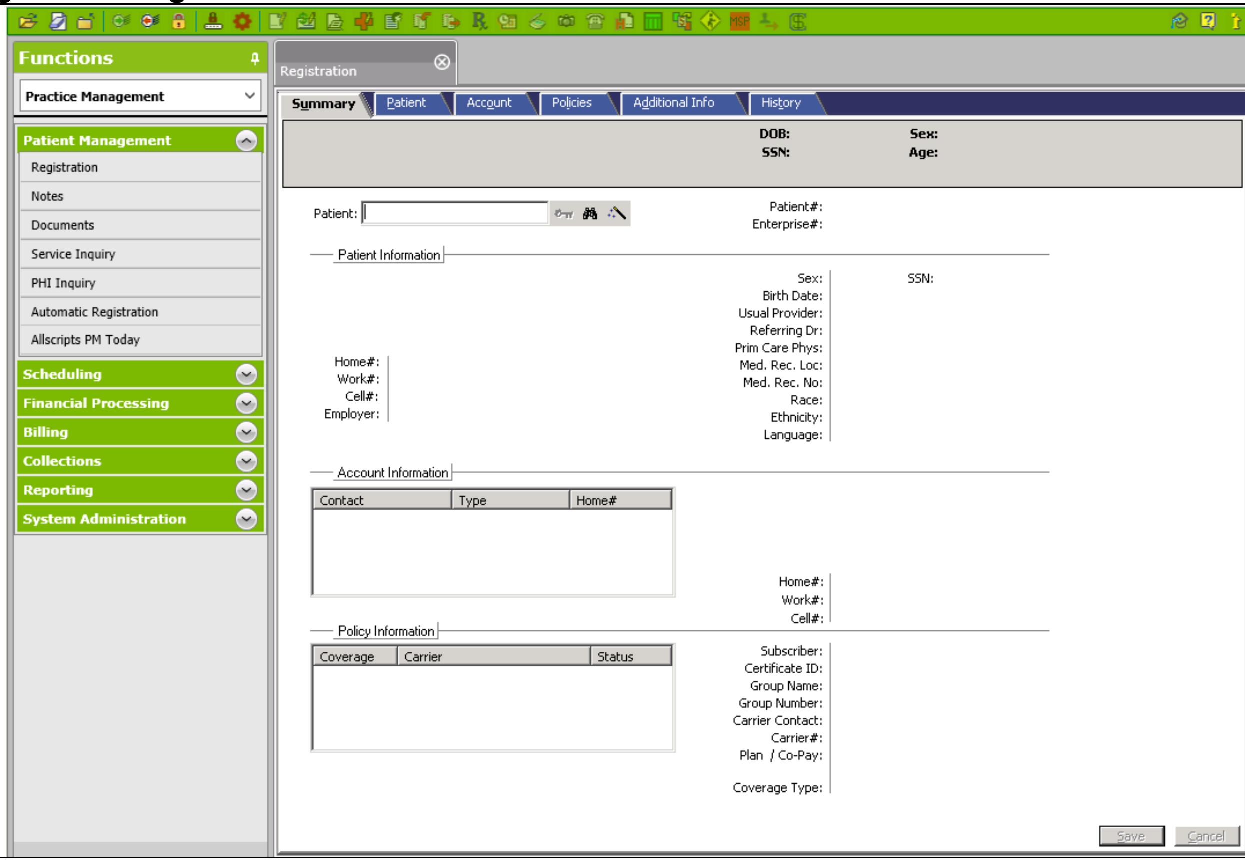
- Title bar displays “database” name
- Tool bar allows access to icon functionality
- Navigation pane on left allows access to system processes/ functions.
- Gray area is called the Parent window.
- Practice Management Function panel allows you to access the Office Manager function to work queues that have been set up.

Title Bar- Display the application name and the “database” or practice that you are working in.

Can use Alt/underlined letter to access each option on the ribbon menu.

Section 2 - Registration:

2-1 Patient Management>Registration



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Registration

- Ability to view patient information entered on an existing patient via the Summary Tab
- Ability to view patient demographic information on an existing patient via the Patient Tab
- Ability to view patient guarantor, subscriber, contact information on an existing patient via the Account Tab
- Ability to view patient insurance information on an existing patient via the Policies Tab
- Ability to view patient Additional Information on an existing patient via the Additional Info Tab.

</td>
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- Ability to search for a patient using the binoculars icon .
- Ability to add a new patient's demographic information, account information, insurance information and additional information using the Magic Wand icon (or Alt/Down arrow).
- Ability to pull a patient into focus by Patient number by entering the patient number and pressing Tab (the key icon displays).
-
- You can access the various tabs in Registration by clicking on the tab or Alt/underlined letter or use the hyperlinks at Patient Information, Account Information or Policy Information.
- **Always search before creating a new patient.**

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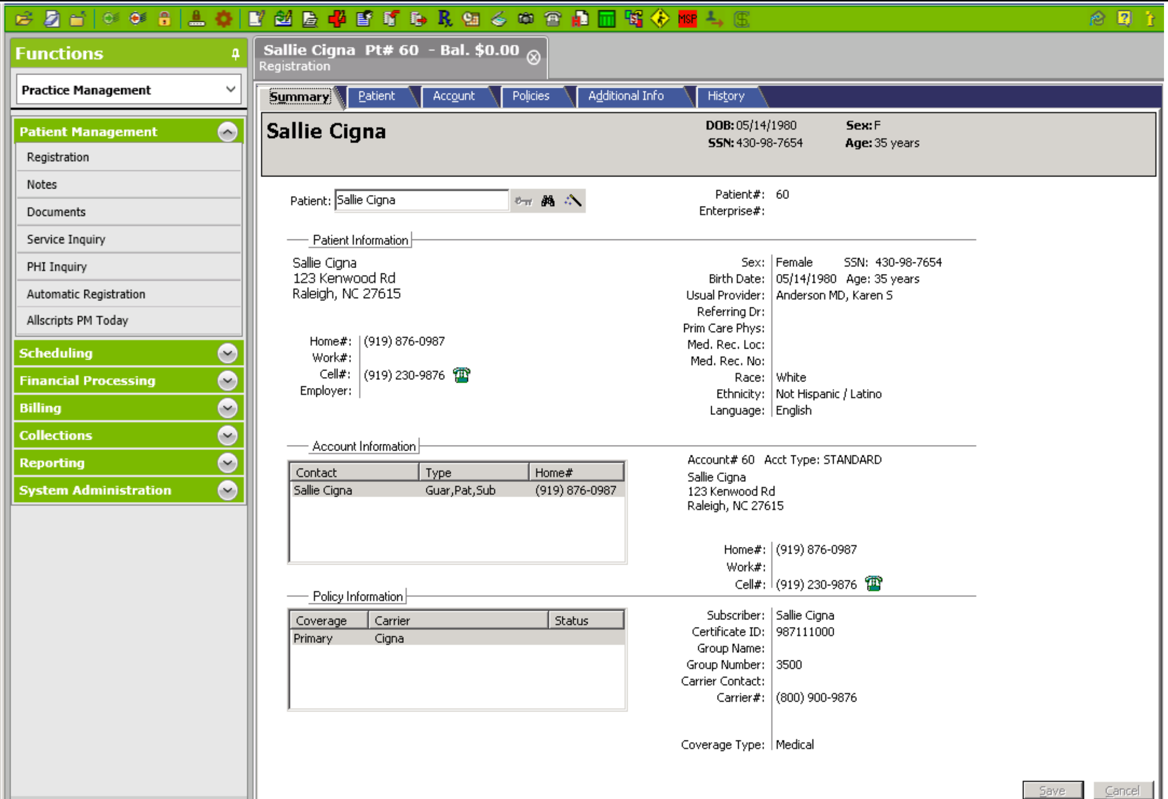
</table>

2-2 Patient Management>Registration>Summary Tab



Registration> Summary Tab

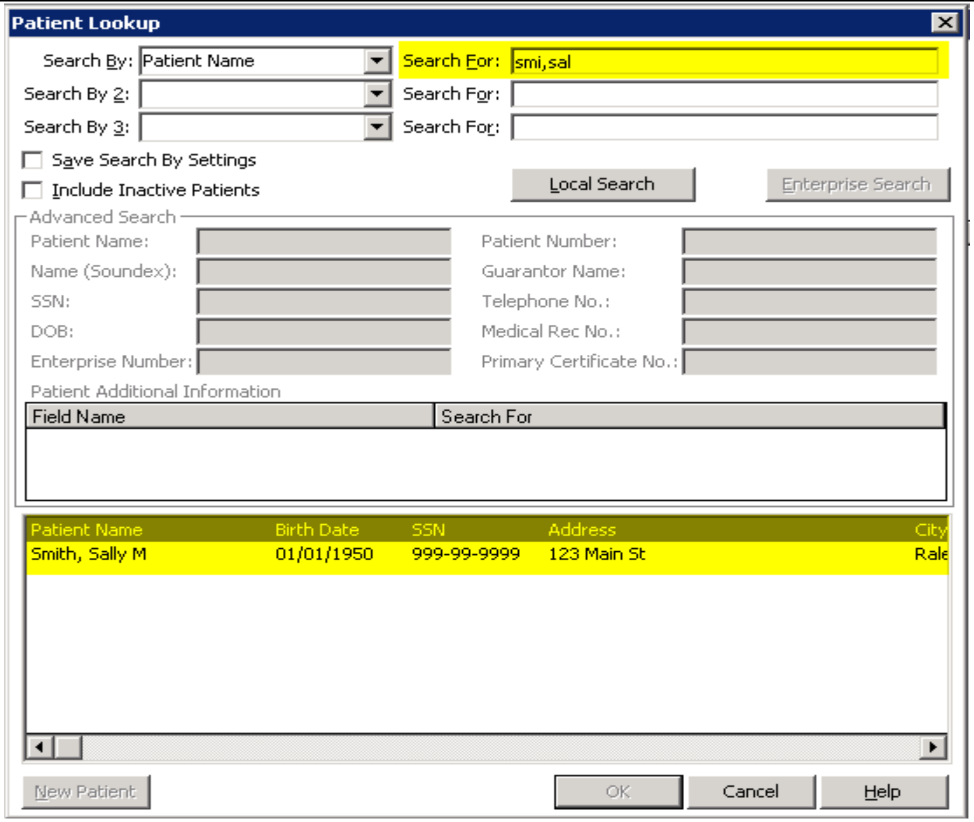
- After searching for a patient and bringing the patient info focus, the Summary Tab appears providing **view only** information, no changes can be done in this tab.
- Name, Address, Phone, Patient comments, Sex, DOB, Usual Provider, Referring Dr, Med Rec Location and No, Account and Policy with subscriber information displays.
- You can "hover" over the **Patient Information**, **Account Information** or **Policy Information** command buttons to display a "hand icon". By clicking on the hand icon you can quickly go to the chosen **Registration Tab, Account Tab** or **Policy Tab**.

Notes, Policies, Procedures

Suggested that if you leave your terminal while working in Registration, especially if you have a patient in focus, you minimize the Registration workbook by clicking on the minimize button in the child window or clear the screen of the patient information using the Clear Form icon from the toolbar.

The telephone icon next to a phone number indicates this is the preferred number for contact across the system where phone numbers are displayed.

2-3 Registration- Patient Lookup



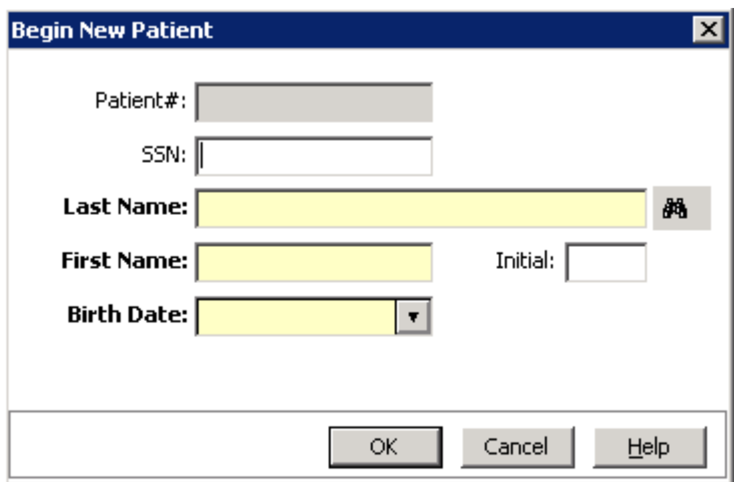
Registration- Patient Lookup

1. Enter the search criteria for the search (down arrow at Search By prompt or F4). You can search by Patient Name, SSN, DOB, Patient #, Guarantor Name, Tel #, or do an Advanced Search with multiple parameters.
2. Enter the search value in the Search For prompt. You can use **%** as wildcard, before, after the search value.
3. Click **Local Search**
4. Highlight the correct patient in the grid displayed at the bottom of the screen.
5. Click **OK.**
6. If the patient is not found- can click on the **New Patient** command button to create a new entry.

Notes, Policies, Procedures

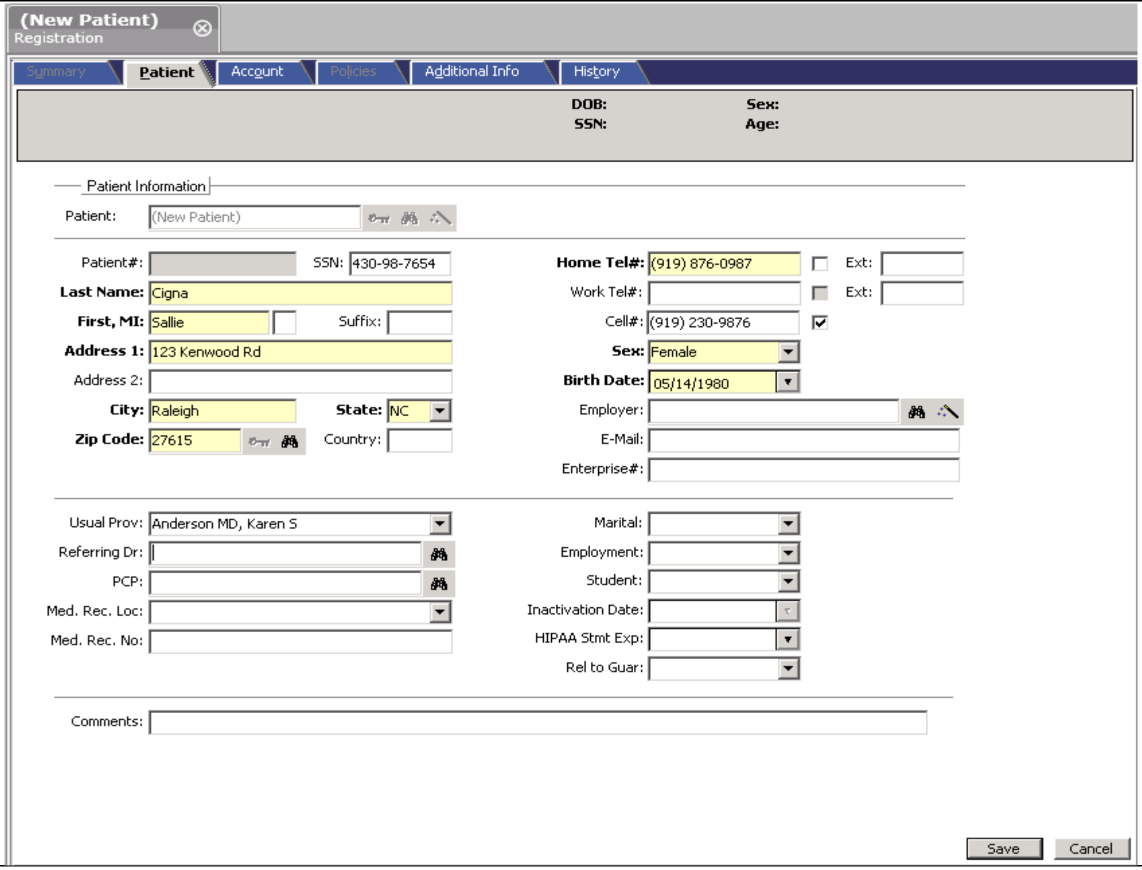
Can use first few letters Lname, Fname
Can search by first name ,Fname
Can choose the default for **Search By** by checking the **Save Search by Settings** box- this is user/workstation specific
You can do a multiple Parameter Search- Search By is primary
Search by : 2 secondary parameter
Search by: 3 third parameter
If you enter a 2 or 3 Search it makes these mandatory to enter value search criteria.
Your search can include Inactive patients by checking the box.
The Search For criteria can be set up for number of required characters for patient last name lookup.

Patient Management>Registration- Adding a New Patient



Registration- Adding a New Patient	Notes, Policies, Procedures
• After Searching, if the patient is not found in the database, click on **New Patient** command button in bottom left of the Lookup screen. • The **Begin New Patient** screen displays. • Enter the Patient's SSN (if given to you) • Enter the Patient's Last Name, First Name, middle initial and Date of Birth. • Click **OK.**	Bold prompts displaying in "vanilla" are required. Use Proper Case- Need to use shift key to capitalize 1st letter of First and Last names, address, etc. DO NOT use all CAPS. Punctuation- can use spaces for hyphen names, no special characters, avoid periods, etc.

2-4 Patient Management>Registration>Patient Tab- Enter a New Patient



Registration- Enter a New Patient	Notes, Policies, Procedures
• Enter demographic information on a patient • Enter Employer information on a patient • Enter a Referring Provider on a patient • Enter a Medical Record location or number on a patient	Proceed to the Account Tab to continue the registration. Proceed to the Policies Tab to continue the registration. Proceed to the Additional Tab to complete the registration.

Registration –Enter a New Patient

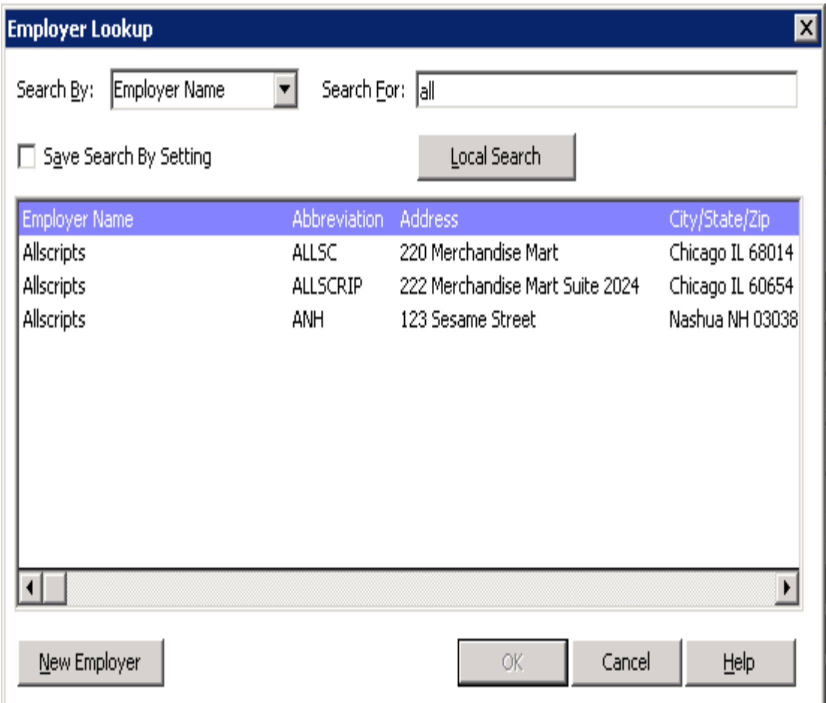
Fields in the Patient Tab

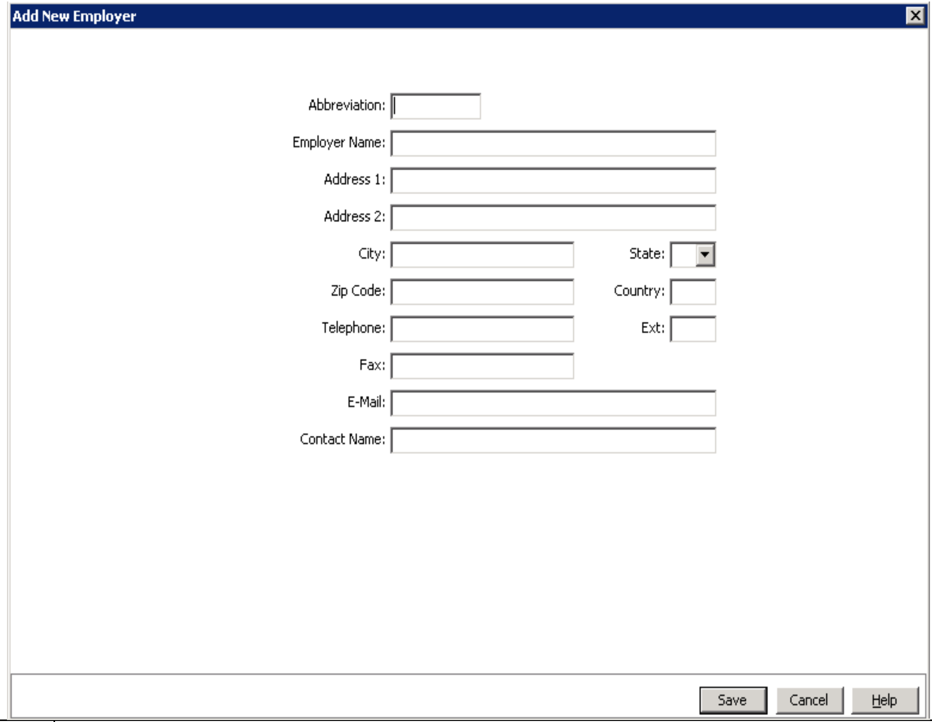
1. **Patient Number** – Is typically assigned by system when saved.
2. **SSN-** Social Security #. No need to enter dashes as the system will format the field
3. **Last Name -** The system displays the information entered in the Begin New Patient Screen. Verify or complete the entry.
4. **First Name -** The system displays the information entered in the Begin New Patient screen. Verify or complete the entry.
5. **MI** - Middle initial.
6. **Suffix -** Enter any initials that may follow the patient's name (Jr, Sr, III, etc.)
7. **Address 1 -** Do not use invalid characters such as -, *, @. Address 1 & 2 go on statements. Between both fields 40 characters can be entered but only the first 30 characters between both fields will print on the statement.
8. **Address 2-** Address 2 does NOT go on a claim (paper or EDI)
9. **City, State and Zip**- The system will default the City and State based on the zip code you enter. If the zip code has been used for a previous entry. Otherwise enter the City, St and Zip.
10. **Country**- Can enter the Country if outside the US
11. **H/Phone -** Enter the home area code and phone. The system will format in (XXX) XXX-XXXX. Check box to indicate preferred #.
12. **W/Phone -** Enter the work area code and phone. The system will format in (XXX) XXX-XXXX. Check box to indicate preferred #.
13. **Ext -** Enter the home or work phone extension. System will accept 5 alphanumeric characters.
14. **Cell Number-** Enter the cell area code and phone. The system will format in (XXX) XXX-XXXX. Check box to indicate preferred #.
15. **Sex -** Enter the code or use the to select the patient's sex (or F4).
16. **Date of Birth -** Use the MM/DD/YYYY format to enter the patient's birth date. The system displays the information entered in the Begin New Patient Screen. Verify or complete the entry.
17. **Employer-** Use the binoculars to look up the employer. Enter the search criteria and choose from the listing. If the Employer is not Policy and Procedure for Referring field:
18. **Referring Dr-** Enter the patient's referring doctor. Use the binoculars to scan (or Alt/Down arrow) for the referring doctor.
19. **PCP-** Enter the patient's PCP. Use the binoculars to scan (or Alt/Down arrow) for the PCP.
20. **Comment-** Enter a free text comment that will display on the Patient Summary Screen. This comment can be a permanent need a patient may have such as handicap, language need, alternative name or nickname. Displays in Scheduling and Summary Tab.
in the system, you can create a new employer by clicking on the Magic wand icon (or Insert key).
21. **E-Mail-** Enter the patient's e-mail address if provided.

Notes, Policies, and Procedures

- Bold prompts displaying in "vanilla" are required.
- Use Proper Case- Need to use shift key to capitalize 1st letter of First and Last names, address, etc. DO NOT use all CAPS.
- Punctuation- can use spaces for hyphen names, no special characters, avoid periods, etc.

2-5 Patient Management>Registration>Patient Tab- Enter a Patient's Employer





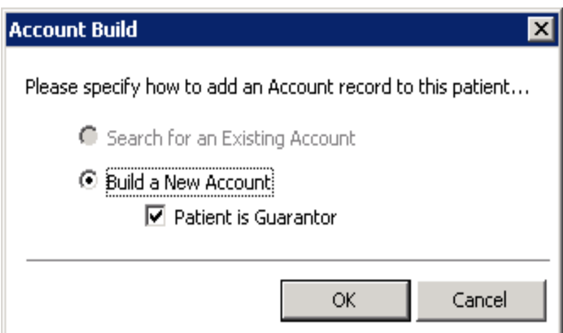
Registration- Enter a Patient's Employer

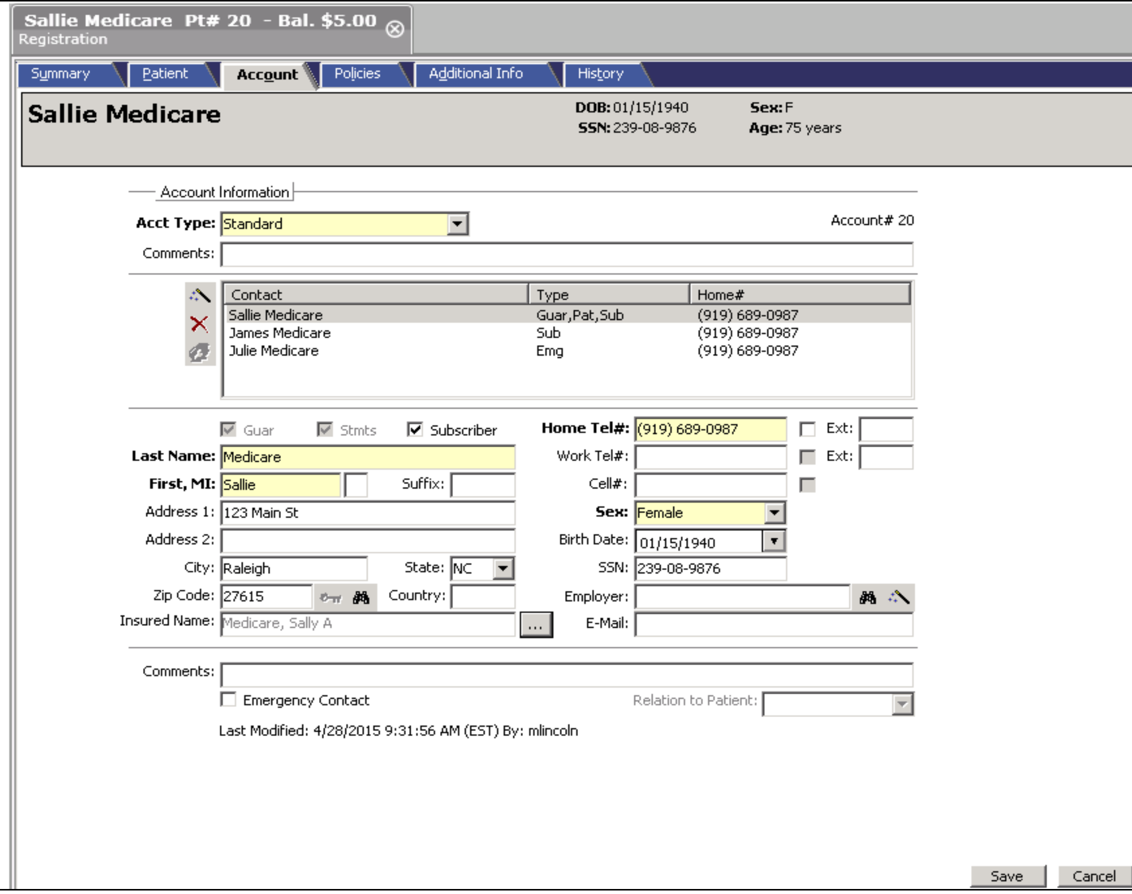
- Search for the Employer for the patient, click on the binoculars.
- The **Employer Lookup** screen displays.
- Choose to **Search By**: Abbreviation or Employer Name.
- Enter **Search For** criteria and click on **Local Search.**
- Highlight the correct employer from the grid listing.
- Click on **OK** to add the existing employer to the patient's record.

Enter a New Employer

- Scan for the Employer for the patient, click on the binoculars.
- The **Employer Lookup** screen displays.
- Choose to Search By: Abbreviation or Employer Name.
- Enter Search For criteria and click on **Local Search**.
- If the Employer is not found, click on the **New Employer** command button. The **Add New Employer** screen displays.
- OR- Click on the wand icon to add display the **Add New Employer** screen.
- Complete the prompts. The Abbreviation of the employer should be all CAPS. The Employer Name and Address should be proper case.
- Click **Save** to add the new employer to the master file and the patient's file.

2-6 Patient Management>Registration>Account Tab





Registration- Account Tab

- Build the patient's Account information and establish Guarantor, Subscriber and Emergency contact information.
- The system will prompt the account build of a new account with the Patient as the Guarantor. If you click **OK** the patient demographic information will be copied and the patient contact will be built as a Guarantor record.
- You can use the Magic Wand icon  (or Insert) to build a new contact such as subscriber or Emergency contact.

Notes, Policies, and Procedures

- **Add the guarantor if not the same as the patient – check the box for guarantor**
- **Add subscriber(s) if applicable – check the box for subscriber**
- **Gender and DOB required for guarantor and subscribers**
- **Add emergency contact if given – check the box for emergency contact**

Registration –Account Tab

Fields in the Account Tab – Tab is divided into 4 section grids,

Use Magic wand to create a new contact.

1st grid is Account Type

- Account type- Defaults to Standard. Do not change unless directed.
- Comments related to Acct Types, free text field, 81 characters and displays in Charge Entry and Financial Inquiry.

2nd section is Contacts

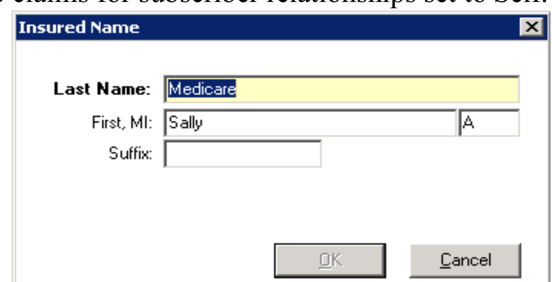
- You can build as many contacts as the patient needs.
- Contacts can be subscribers, guarantors, entries who need to receive the stmt, emergency contacts
- For Emergency Contact indicate by checking box in 4th section. A patient can only have 1 Emergency contact at a time.
- Guarantor rises to the top of the contact list. A patient can only have 1 designated guarantor at a time.
- Contact can be designated for statements only which allows the capability to have a stmt sent to this person for the patient.
- Guarantor gets statement for all outstanding balances and additional stmt goes to all contacts designated with “Send Stmt”
- Need to designate a Subscriber to make them available in the Policies tab**. Make sure you Click on the Subscriber box to designate the contact as a subscriber.**

3rd section is contact demo information

- Some demographic information copies from the patient when you create a new contact.
- Check boxes to indicate Preferred phone number for contact.
- You can also define a different Insured name when the patient is the subscriber and the patient name listed on the insurance policy is not the same

  Click on the ellipses next to Insured name prompt. 

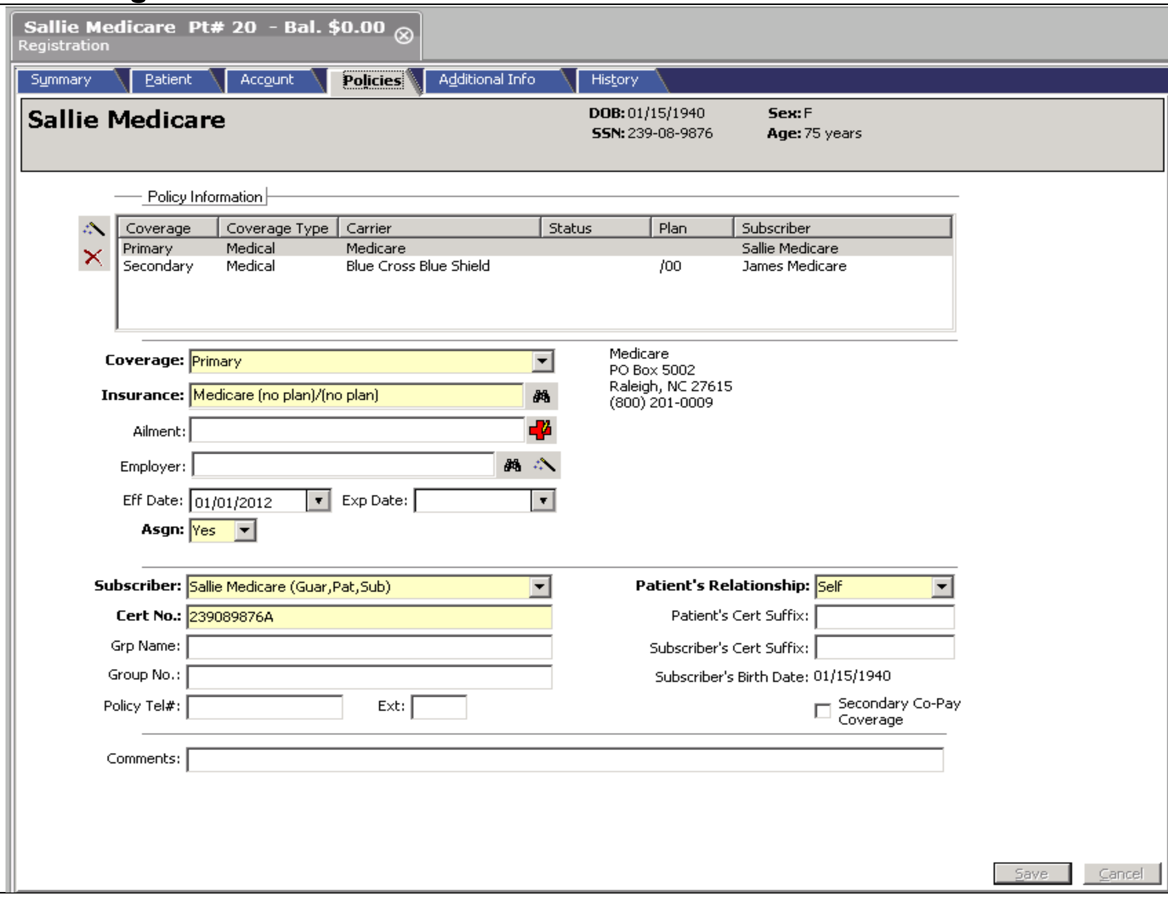
- An Insured Name screen will display to enter a different name. Click OK to save the entry.
  **If different, this name will not change if the patient’s name is updated in Registration tab.
  This will be the name that is reported when processing paper and electronic claims for subscriber relationships set to Self.



4th section is Emergency Contact designation

- Check box to indicate contact is Emergency Contact- only allowed 1 per patient
- Comments- Enter the free text comment for the Emergency contact.

2-7 Patient Management>Registration> Policies Tab



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<tr><td>Registration- Policies Tab

• Enter the patient’s insurance carriers.
• Attach Ailment and employer records.
• Enter effective dates, Subscriber information (from the Account Tab), policy and group numbers, patient’s relationship and any comments regarding this carrier record.
• Click on the Magic Wand  (or Insert key) to create a new entry, enter the appropriate/required information and SAVE.</td><td>Notes, Policies, Procedures</td></tr>
<tr><td colspan="2">Registration –Policies Tab</td></tr>
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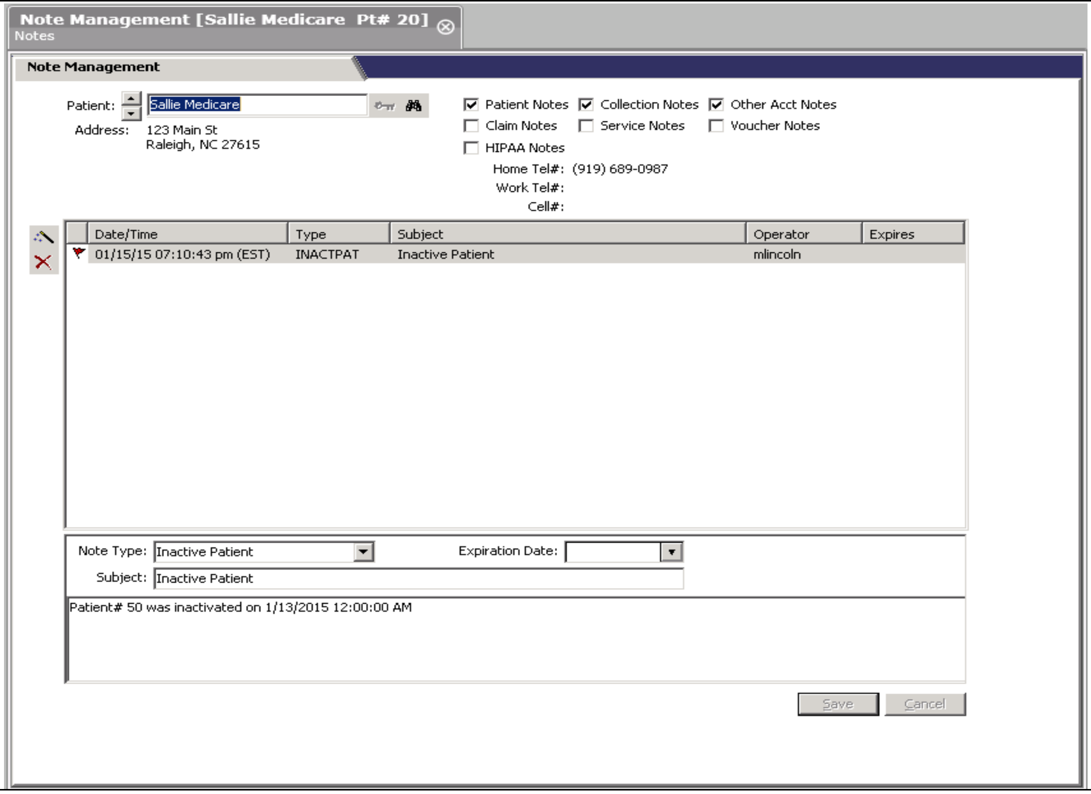
2-8 Patient Management>Notes>Note Management Tab



Note Management Tab	Notes, Policies and Procedures
• To access Note Management: Double-click **Patient Management** > Double-click **Notes** or **F9>NOT** • **Note Management** allows those users with the Security Permissions to do the following: Add a note to a Patient record, View / Print / Email any Note which has been attached to a Patient's record or Edit / Delete existing notes on a Patient record • The screen opens displaying all Note Types which are associated with the Patient's record. • Suggested not to delete notes so that you have a history. • Expired notes disappear the next day.	The default is to display the following note types: Patient, Collection, Other Acct Notes. To display Claim, Service and Voucher note types click on the appropriate checkbox. **Note:** Though *Claim Notes*, *Service Notes,* and *Voucher Notes* cannot be added from this screen, you can view and edit these Note Types here. Check the box at the top of the screen. Users with security permission can also then edit these note types. **Note:** If a warning note no longer applies, you can change the type to History of Warning note and include the subject. The note will no longer display.

Patient Management>Notes> Note Management

Steps to Enter Notes

1. Retrieve a Patient or Guarantor by entering the patient/guarantor number and then tab, OR search for the patient
2. Be sure the type of note you are adding is checked.
3. Click the **Wand icon** (or use the **Insert** key).
4. Click the down arrow to open the Note Type drop-down list.
   Note: The list of Note Types available exclude Claim, Service, and Voucher Notes
5. Choose the type of note you want to enter.
6. Enter text on the subject line that identifies the reason for adding this note. This text displays in the upper grid on this screen. This is a required field.
   Note: If a Default Subject was entered for the selected Note in Note Type Maintenance it will appear here.
7. **Tab** to bring the cursor in the text grid. The text in this grid displays only on this screen. Enter your note.
8. Click **Save** or **Alt+s** to save your entry.

To Delete a Note

Bring the patient and note into focus and click on the Delete option.

Note Types:

Patient Notes:

- Specific to a Patient's record; cannot be viewed on the records of those other Patients who share the same Guarantor
- Can prevent new appointments or prevent encounter forms from printing
- Example: To add special notes to a Patient record such as, need for special treatment

Other Notes:

- Generic type of note that is specific to the Patient's record; cannot be viewed on the records of those other Patients who share the same Guarantor
- Can hold statements, prevent new appointments and prevent encounter forms from printing
- Example: To indicate that an X-ray or attorney's letter is part of the Patient record.

Collection Notes:

- Collection Notes can be created to identify Patients or Accounts that are delinquent or in collections.
- When a Collection Notes is added to the Guarantor record it is viewable on the records of all those Patients who share that Guarantor.

Claim Notes:

- Claim Notes are used to add notes to a claim for purposes of managing an unpaid claim.
- They are created from Unpaid Claims Management and from the Account Ledger screen and can be viewed in Unpaid Claims Management, Pending Claims Management and Account Ledger.

Service Notes:

- Service notes are specific to a service line on a voucher.
- You can add a Service Note to a voucher line from the Payment Entry, Edits, and the Account Ledger
- You can view a voucher's Service Notes in Account Inquiry and Payment Entry viewers when selected as a view option. Service Notes attached to vouchers associated with a Patient can be viewed in Note Management.

Voucher Notes:

- Voucher Notes are voucher specific.
- A voucher note can be added using the Quick Note icon from the toolbar in Account Inquiry in Financial Inquiry, Payment Entry in Transactions, or Edits Tab in Batch Management.
- A voucher note can also be entered using the right click on the voucher in Pending Claims Management or Account Ledger.

HIPAA Notes:

- HIPAA Note types are used to facilitate the capture and display of HIPAA information.
- In compliance with HIPAA privacy requirements these notes are specific to a Patient's record. They cannot be viewed on the records of those other Patients who share the same Guarantor.
- HIPAA Notes can be accessed from Note Management COMpanion screen by using the HIPAA Note toolbar button or Note Management screen
- HIPAA notes are created using the HIPAA note icon on the toolbar while in Registration or Scheduling.

Patient Management>Notes> Note Management

Steps to Enter Notes

9. Retrieve a Patient or Guarantor by entering the patient/guarantor number and then tab, OR search for the patient
10. Be sure the type of note you are adding is checked.
11. Click the **Wand icon** (or use the **Insert** key).
12. Click the down arrow to open the Note Type drop-down list.
    Note: The list of Note Types available exclude Claim, Service, and Voucher Notes
13. Choose the type of note you want to enter.
14. Enter text on the subject line that identifies the reason for adding this note. This text displays in the upper grid on this screen. This is a required field.
    Note: If a Default Subject was entered for the selected Note in Note Type Maintenance it will appear here.
15. **Tab** to bring the cursor in the text grid. The text in this grid displays only on this screen. Enter your note.
16. Click **Save** or **Alt+s** to save your entry.

To Delete a Note

Bring the patient and note into focus and click on the  Delete option.

Note Types:

Patient Notes:

- Specific to a Patient's record; cannot be viewed on the records of those other Patients who share the same Guarantor
- Can prevent new appointments or prevent encounter forms from printing
- Example: To add special notes to a Patient record such as, need for special treatment

Other Notes:

- Generic type of note that is specific to the Patient's record; cannot be viewed on the records of those other Patients who share the same Guarantor
- Can hold statements, prevent new appointments and prevent encounter forms from printing
- Example: To indicate that an X-ray or attorney's letter is part of the Patient record.

Collection Notes:

- Collection Notes can be created to identify Patients or Accounts that are delinquent or in collections.
- When a Collection Notes is added to the Guarantor record it is viewable on the records of all those Patients who share that Guarantor.

Claim Notes:

- Claim Notes are used to add notes to a claim for purposes of managing an unpaid claim.
- They are created from Unpaid Claims Management and from the Account Ledger screen and can be viewed in Unpaid Claims Management, Pending Claims Management and Account Ledger.

Service Notes:

- Service notes are specific to a service line on a voucher.
- You can add a Service Note to a voucher line from the Payment Entry, Edits, and the Account Ledger
- You can view a voucher's Service Notes in Account Inquiry and Payment Entry viewers when selected as a view option. Service Notes attached to vouchers associated with a Patient can be viewed in Note Management.

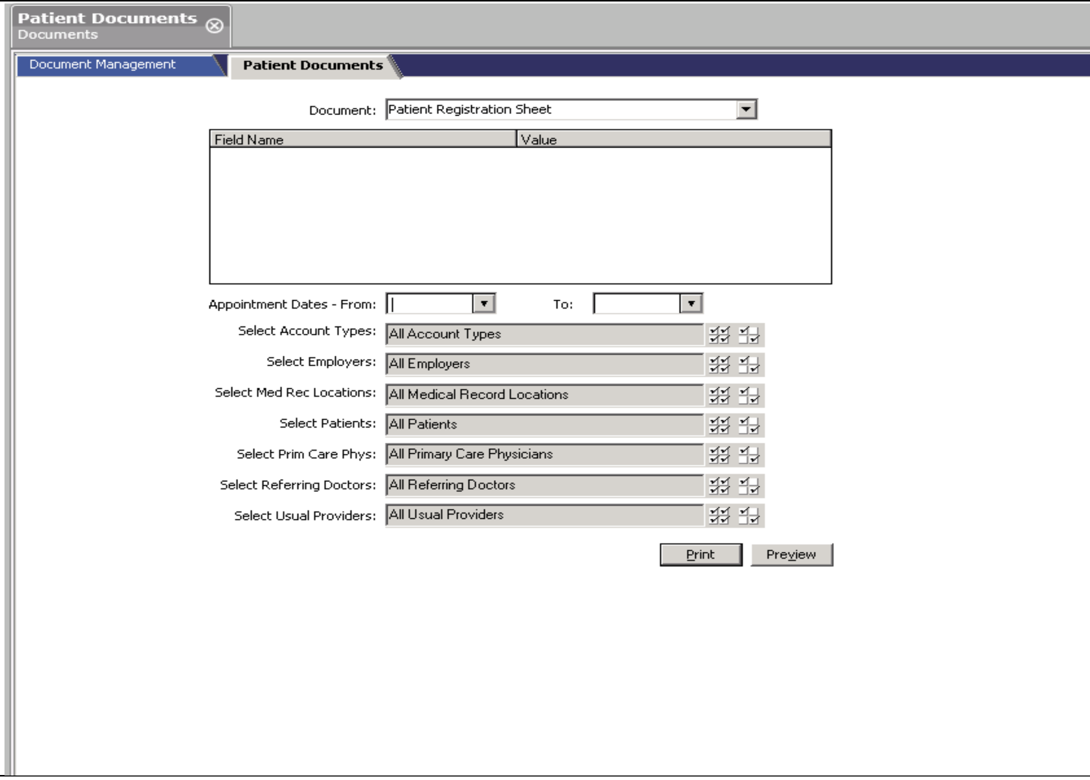
Voucher Notes:

- Voucher Notes are voucher specific.
- A voucher note can be added using the Quick Note icon from the toolbar in Account Inquiry in Financial Inquiry, Payment Entry in Transactions, or Edits Tab in Batch Management.
- A voucher note can also be entered using the right click on the voucher in Pending Claims Management or Account Ledger.

HIPAA Notes:

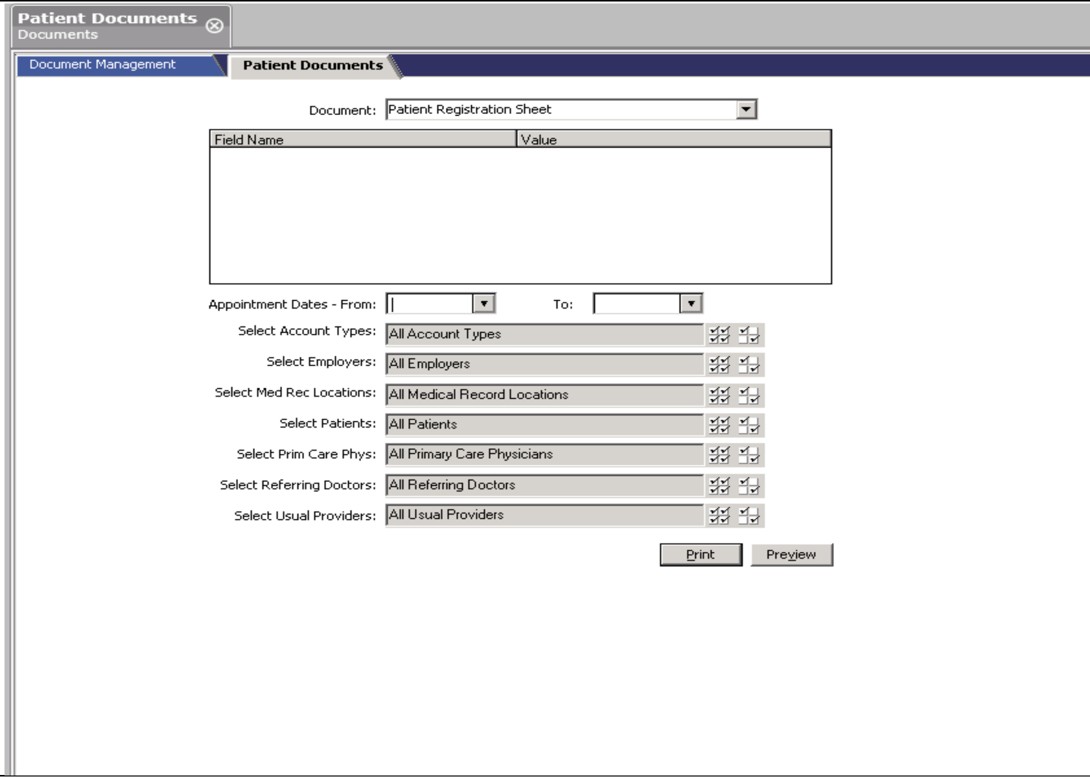
- HIPAA Note types are used to facilitate the capture and display of HIPAA information.
- In compliance with HIPAA privacy requirements these notes are specific to a Patient's record. They cannot be viewed on the records of those other Patients who share the same Guarantor.
- HIPAA Notes can be accessed from Note Management COMpanion screen by using the HIPAA Note toolbar button or Note Management screen
- HIPAA notes are created using the HIPAA note icon on the toolbar while in Registration or Scheduling.

Patient Management>Documents>Patient Documents Tab



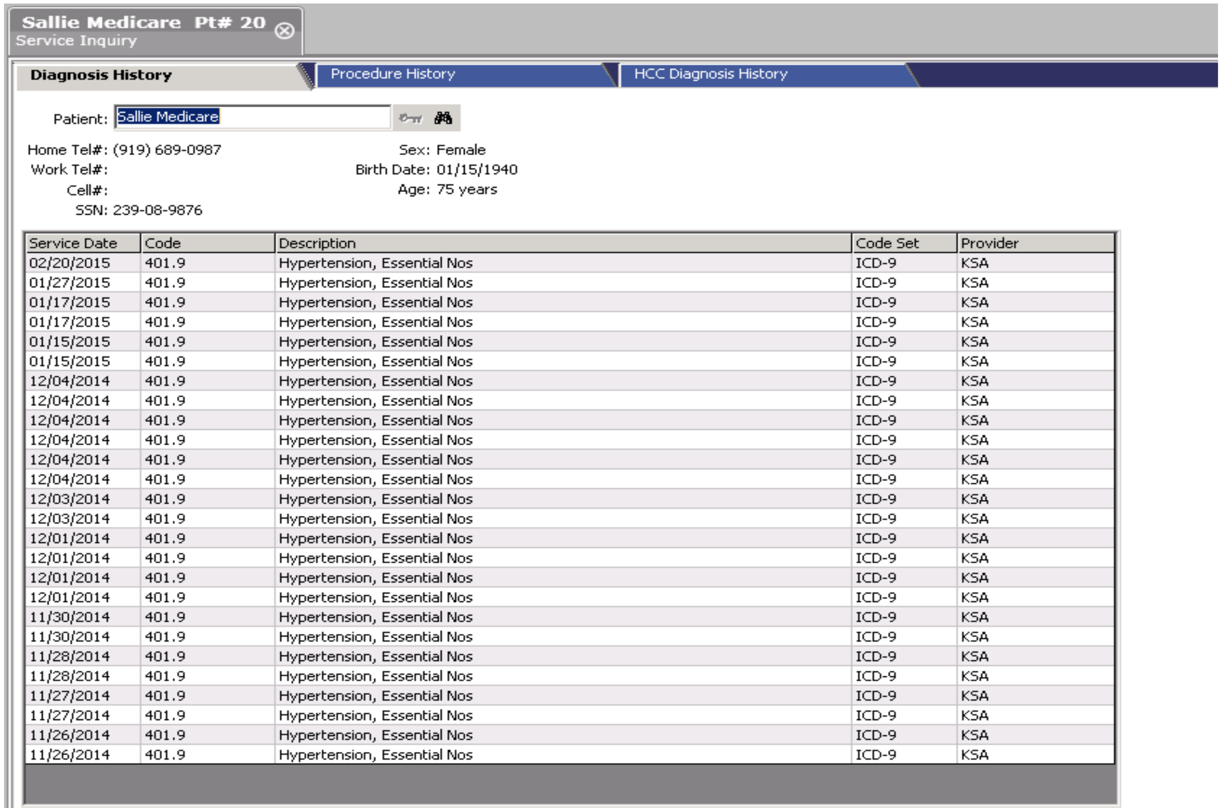
Patient Documents Tab	Steps to Print a Master document
• To access Document Management: Double-click **Patient Management** > Double-click **Documents** or **F9>DOC** • Any master document created with the Data Type "Patient Information" can be batch printed from this screen. • You can print a document for a single patient or a batch of patients based on the criteria selected (appointment date, Account type, Employer, Medical Record Locations, Prim Care physician, Referring Dr, Usual Provider). • You will need to create a document in DOM to output the identifying data.	1. From the drop-down listing for *Document*, select the Patient Document you want to print or batch print. 2. If Custom fields have been defined for the document they will display in the grid. Any text entered will be identically included on each form letter printed. 3. Entering an appointment date or date range will include only Patients who have scheduled appointments for the specified date or range. Includes Patients with appointments having the statuses of "scheduled", "confirmed", and "wait list". 4. Choose which Account types, Employers, Med Rec Location, Patients, Prim Care Physician, Referring Doctors, Usual Provider 5. Click **Print** to print the document or batch of documents. 6. Click **Preview** to preview the document or batch of documents.

Patient Management>Documents>Patient Documents Tab



Patient Documents Tab	Steps to Print a Master document
• To access Document Management: Double-click **Patient Management** > Double-click **Documents** or **F9>DOC** • Any master document created with the Data Type "Patient Information" can be batch printed from this screen. • You can print a document for a single patient or a batch of patients based on the criteria selected (appointment date, Account type, Employer, Medical Record Locations, Prim Care physician, Referring Dr, Usual Provider). • You will need to create a document in DOM to output the identifying data.	7. From the drop-down listing for *Document*, select the Patient Document you want to print or batch print. 8. If Custom fields have been defined for the document they will display in the grid. Any text entered will be identically included on each form letter printed. 9. Entering an appointment date or date range will include only Patients who have scheduled appointments for the specified date or range. Includes Patients with appointments having the statuses of "scheduled", "confirmed", and "wait list". 10. Choose which Account types, Employers, Med Rec Location, Patients, Prim Care Physician, Referring Doctors, Usual Provider 11. Click **Print** to print the document or batch of documents. 12. Click **Preview** to preview the document or batch of documents.

2-11 Patient Management>Service Inquiry> Diagnosis History Tab



Service Date	Code	Description	Code Set	Provider
02/20/2015	401.9	Hypertension, Essential Nos	ICD-9	KSA
01/27/2015	401.9	Hypertension, Essential Nos	ICD-9	KSA
01/17/2015	401.9	Hypertension, Essential Nos	ICD-9	KSA
01/17/2015	401.9	Hypertension, Essential Nos	ICD-9	KSA
01/15/2015	401.9	Hypertension, Essential Nos	ICD-9	KSA
01/15/2015	401.9	Hypertension, Essential Nos	ICD-9	KSA
12/04/2014	401.9	Hypertension, Essential Nos	ICD-9	KSA
12/04/2014	401.9	Hypertension, Essential Nos	ICD-9	KSA
12/04/2014	401.9	Hypertension, Essential Nos	ICD-9	KSA
12/04/2014	401.9	Hypertension, Essential Nos	ICD-9	KSA
12/04/2014	401.9	Hypertension, Essential Nos	ICD-9	KSA
12/04/2014	401.9	Hypertension, Essential Nos	ICD-9	KSA
12/03/2014	401.9	Hypertension, Essential Nos	ICD-9	KSA
12/03/2014	401.9	Hypertension, Essential Nos	ICD-9	KSA
12/01/2014	401.9	Hypertension, Essential Nos	ICD-9	KSA
12/01/2014	401.9	Hypertension, Essential Nos	ICD-9	KSA
12/01/2014	401.9	Hypertension, Essential Nos	ICD-9	KSA
12/01/2014	401.9	Hypertension, Essential Nos	ICD-9	KSA
11/30/2014	401.9	Hypertension, Essential Nos	ICD-9	KSA
11/30/2014	401.9	Hypertension, Essential Nos	ICD-9	KSA
11/28/2014	401.9	Hypertension, Essential Nos	ICD-9	KSA
11/28/2014	401.9	Hypertension, Essential Nos	ICD-9	KSA
11/27/2014	401.9	Hypertension, Essential Nos	ICD-9	KSA
11/27/2014	401.9	Hypertension, Essential Nos	ICD-9	KSA
11/26/2014	401.9	Hypertension, Essential Nos	ICD-9	KSA
11/26/2014	401.9	Hypertension, Essential Nos	ICD-9	KSA

Service Inquiry Diagnosis History Tab

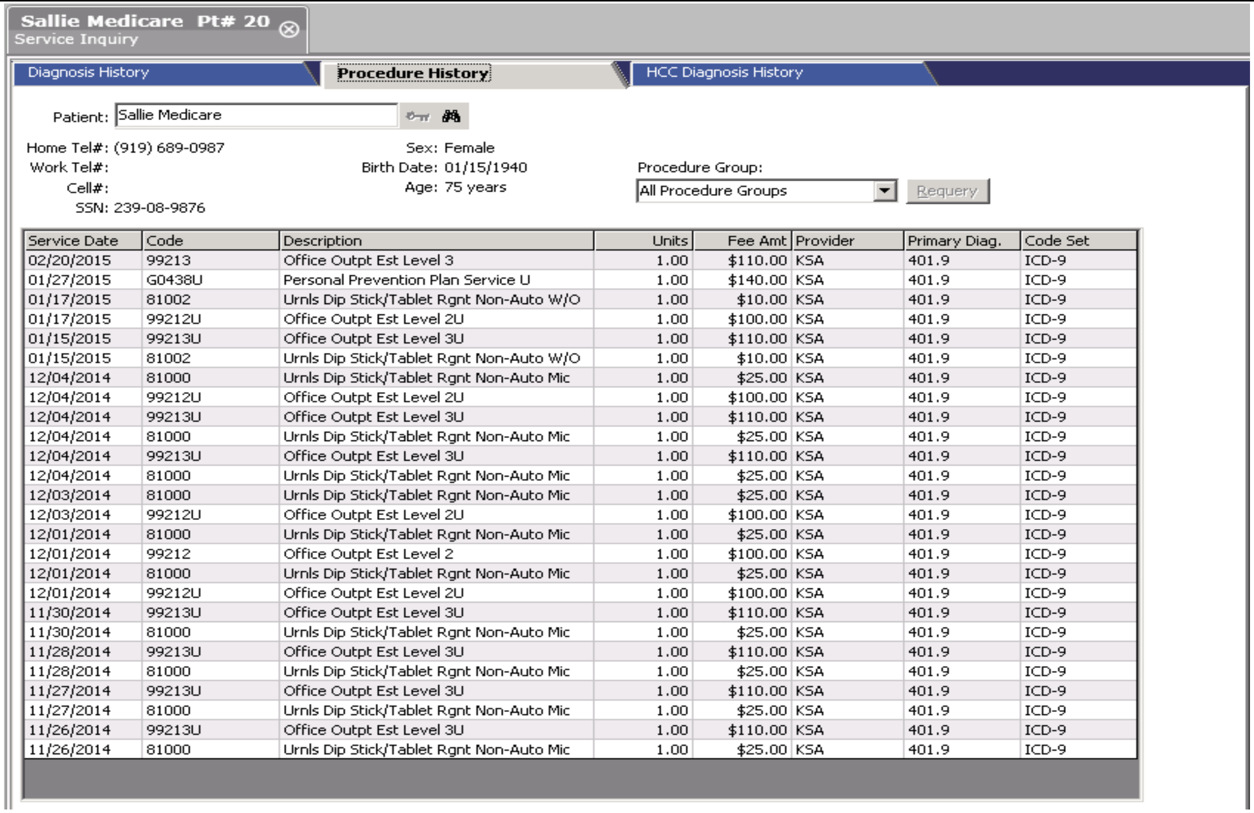
- To access Service Inquiry choose **Patient Management** from the Navigation tree>**Service Inquiry** folder.
- If you had a patient in view when you access Service Inquiry, than patient's information will display.
- You can scan for a Patient using the binoculars.
- The Diagnosis History screen displays each diagnosis that is a part of the Patient record by date of service.
- The screen display Service Date, Diagnosis Code, Description and Provider.

Notes, Policies and Procedures

TIP! Click the headings bar to change the order of the display to ascending or descending order for each column.

TIP! You can right click on the service line item or multiple service dates and choose to **View** the history and from the view, you can Print or E-mail to the patient.

2-12 Patient Management>Service Inquiry>Procedure History Tab



Sallie Medicare Pt# 20
Service Inquiry

Diagnosis History | Procedure History | HCC Diagnosis History

Patient: Sallie Medicare

Home Tel#: (919) 689-0987
Work Tel#:
Cell#:
SSN: 239-08-9876

Sex: Female
Birth Date: 01/15/1940
Age: 75 years

Procedure Group: All Procedure Groups
Requery

Service Date	Code	Description	Units	Fee Amt	Provider	Primary Diag.	Code Set
02/20/2015	99213	Office Outpt Est Level 3	1.00	$110.00	KSA	401.9	ICD-9
01/27/2015	G0438U	Personal Prevention Plan Service U	1.00	$140.00	KSA	401.9	ICD-9
01/17/2015	81002	Urnls Dip Stick/Tablet Rgnt Non-Auto W/O	1.00	$10.00	KSA	401.9	ICD-9
01/17/2015	99212U	Office Outpt Est Level 2U	1.00	$100.00	KSA	401.9	ICD-9
01/15/2015	99213U	Office Outpt Est Level 3U	1.00	$110.00	KSA	401.9	ICD-9
01/15/2015	81002	Urnls Dip Stick/Tablet Rgnt Non-Auto W/O	1.00	$10.00	KSA	401.9	ICD-9
12/04/2014	81000	Urnls Dip Stick/Tablet Rgnt Non-Auto Mic	1.00	$25.00	KSA	401.9	ICD-9
12/04/2014	99212U	Office Outpt Est Level 2U	1.00	$100.00	KSA	401.9	ICD-9
12/04/2014	99213U	Office Outpt Est Level 3U	1.00	$110.00	KSA	401.9	ICD-9
12/04/2014	81000	Urnls Dip Stick/Tablet Rgnt Non-Auto Mic	1.00	$25.00	KSA	401.9	ICD-9
12/04/2014	99213U	Office Outpt Est Level 3U	1.00	$110.00	KSA	401.9	ICD-9
12/04/2014	81000	Urnls Dip Stick/Tablet Rgnt Non-Auto Mic	1.00	$25.00	KSA	401.9	ICD-9
12/03/2014	81000	Urnls Dip Stick/Tablet Rgnt Non-Auto Mic	1.00	$25.00	KSA	401.9	ICD-9
12/03/2014	99212U	Office Outpt Est Level 2U	1.00	$100.00	KSA	401.9	ICD-9
12/01/2014	81000	Urnls Dip Stick/Tablet Rgnt Non-Auto Mic	1.00	$25.00	KSA	401.9	ICD-9
12/01/2014	99212	Office Outpt Est Level 2	1.00	$100.00	KSA	401.9	ICD-9
12/01/2014	81000	Urnls Dip Stick/Tablet Rgnt Non-Auto Mic	1.00	$25.00	KSA	401.9	ICD-9
12/01/2014	99212U	Office Outpt Est Level 2U	1.00	$100.00	KSA	401.9	ICD-9
11/30/2014	99213U	Office Outpt Est Level 3U	1.00	$110.00	KSA	401.9	ICD-9
11/30/2014	81000	Urnls Dip Stick/Tablet Rgnt Non-Auto Mic	1.00	$25.00	KSA	401.9	ICD-9
11/28/2014	99213U	Office Outpt Est Level 3U	1.00	$110.00	KSA	401.9	ICD-9
11/28/2014	81000	Urnls Dip Stick/Tablet Rgnt Non-Auto Mic	1.00	$25.00	KSA	401.9	ICD-9
11/27/2014	99213U	Office Outpt Est Level 3U	1.00	$110.00	KSA	401.9	ICD-9
11/27/2014	81000	Urnls Dip Stick/Tablet Rgnt Non-Auto Mic	1.00	$25.00	KSA	401.9	ICD-9
11/26/2014	99213U	Office Outpt Est Level 3U	1.00	$110.00	KSA	401.9	ICD-9
11/26/2014	81000	Urnls Dip Stick/Tablet Rgnt Non-Auto Mic	1.00	$25.00	KSA	401.9	ICD-9

Service Inquiry Procedure History Tab

- To access Service Inquiry choose **Patient Management** from the Navigation tree>**Service Inquiry** folder>**Procedure History** tab.
- If you had a patient in view when you access Service Inquiry, than patient's information will display.
- You can scan for a Patient using the binoculars.
- Basic patient information displays
- The Procedure History screen displays each procedure that is a part of the Patient record by date of service.
- The screen display Service Date, Procedure Code, Description, Units, Fee Amt, Provider and Primary Diagnosis.

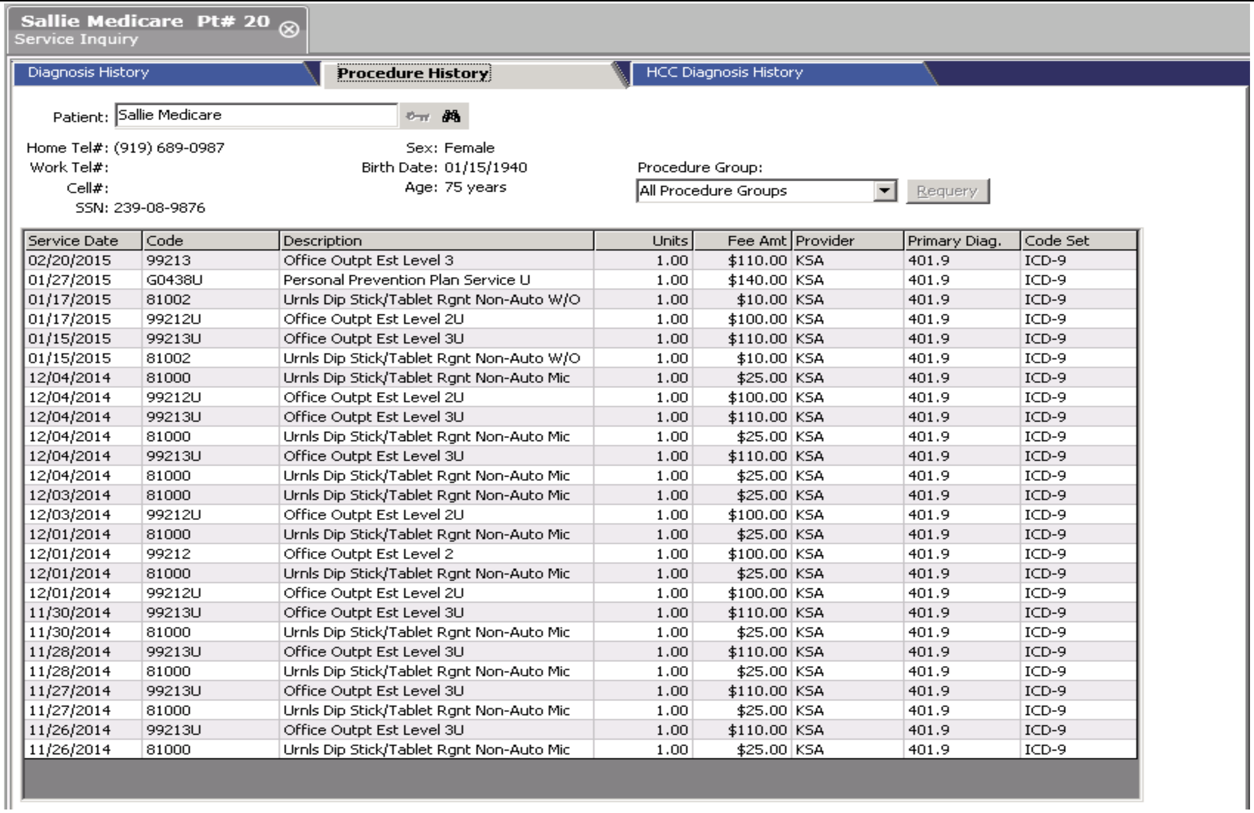
Notes, Policies and Procedures

TIP! Click the headings bar to change the order of the display to ascending or descending order for each column

TIP! Your view can be displayed by Procedure Groups if master files are configured by procedure groups. Click on the down arrow under the Procedure Group heading.

TIP! You can right click on the service line item or multiple service dates and choose to **View** the history and from the view, you can Print or E-mail to the patient.

2-13 Patient Management>Service Inquiry>Procedure History Tab



Service Date	Code	Description	Units	Fee Amt	Provider	Primary Diag.	Code Set
02/20/2015	99213	Office Outpt Est Level 3	1.00	$110.00	KSA	401.9	ICD-9
01/27/2015	G0438U	Personal Prevention Plan Service U	1.00	$140.00	KSA	401.9	ICD-9
01/17/2015	81002	Urnls Dip Stick/Tablet Rgnt Non-Auto W/O	1.00	$10.00	KSA	401.9	ICD-9
01/17/2015	99212U	Office Outpt Est Level 2U	1.00	$100.00	KSA	401.9	ICD-9
01/15/2015	99213U	Office Outpt Est Level 3U	1.00	$110.00	KSA	401.9	ICD-9
01/15/2015	81002	Urnls Dip Stick/Tablet Rgnt Non-Auto W/O	1.00	$10.00	KSA	401.9	ICD-9
12/04/2014	81000	Urnls Dip Stick/Tablet Rgnt Non-Auto Mic	1.00	$25.00	KSA	401.9	ICD-9
12/04/2014	99212U	Office Outpt Est Level 2U	1.00	$100.00	KSA	401.9	ICD-9
12/04/2014	99213U	Office Outpt Est Level 3U	1.00	$110.00	KSA	401.9	ICD-9
12/04/2014	81000	Urnls Dip Stick/Tablet Rgnt Non-Auto Mic	1.00	$25.00	KSA	401.9	ICD-9
12/04/2014	99213U	Office Outpt Est Level 3U	1.00	$110.00	KSA	401.9	ICD-9
12/04/2014	81000	Urnls Dip Stick/Tablet Rgnt Non-Auto Mic	1.00	$25.00	KSA	401.9	ICD-9
12/03/2014	81000	Urnls Dip Stick/Tablet Rgnt Non-Auto Mic	1.00	$25.00	KSA	401.9	ICD-9
12/03/2014	99212U	Office Outpt Est Level 2U	1.00	$100.00	KSA	401.9	ICD-9
12/01/2014	81000	Urnls Dip Stick/Tablet Rgnt Non-Auto Mic	1.00	$25.00	KSA	401.9	ICD-9
12/01/2014	99212	Office Outpt Est Level 2	1.00	$100.00	KSA	401.9	ICD-9
12/01/2014	81000	Urnls Dip Stick/Tablet Rgnt Non-Auto Mic	1.00	$25.00	KSA	401.9	ICD-9
12/01/2014	99212U	Office Outpt Est Level 2U	1.00	$100.00	KSA	401.9	ICD-9
11/30/2014	99213U	Office Outpt Est Level 3U	1.00	$110.00	KSA	401.9	ICD-9
11/30/2014	81000	Urnls Dip Stick/Tablet Rgnt Non-Auto Mic	1.00	$25.00	KSA	401.9	ICD-9
11/28/2014	99213U	Office Outpt Est Level 3U	1.00	$110.00	KSA	401.9	ICD-9
11/28/2014	81000	Urnls Dip Stick/Tablet Rgnt Non-Auto Mic	1.00	$25.00	KSA	401.9	ICD-9
11/27/2014	99213U	Office Outpt Est Level 3U	1.00	$110.00	KSA	401.9	ICD-9
11/27/2014	81000	Urnls Dip Stick/Tablet Rgnt Non-Auto Mic	1.00	$25.00	KSA	401.9	ICD-9
11/26/2014	99213U	Office Outpt Est Level 3U	1.00	$110.00	KSA	401.9	ICD-9
11/26/2014	81000	Urnls Dip Stick/Tablet Rgnt Non-Auto Mic	1.00	$25.00	KSA	401.9	ICD-9

Service Inquiry Procedure History Tab

- To access Service Inquiry choose **Patient Management** from the Navigation tree>**Service Inquiry** folder>**Procedure History** tab.
- If you had a patient in view when you access Service Inquiry, than patient's information will display.
- You can scan for a Patient using the binoculars.
- Basic patient information displays
- The Procedure History screen displays each procedure that is a part of the Patient record by date of service.
- The screen display Service Date, Procedure Code, Description, Units, Fee Amt, Provider and Primary Diagnosis.

Notes, Policies and Procedures

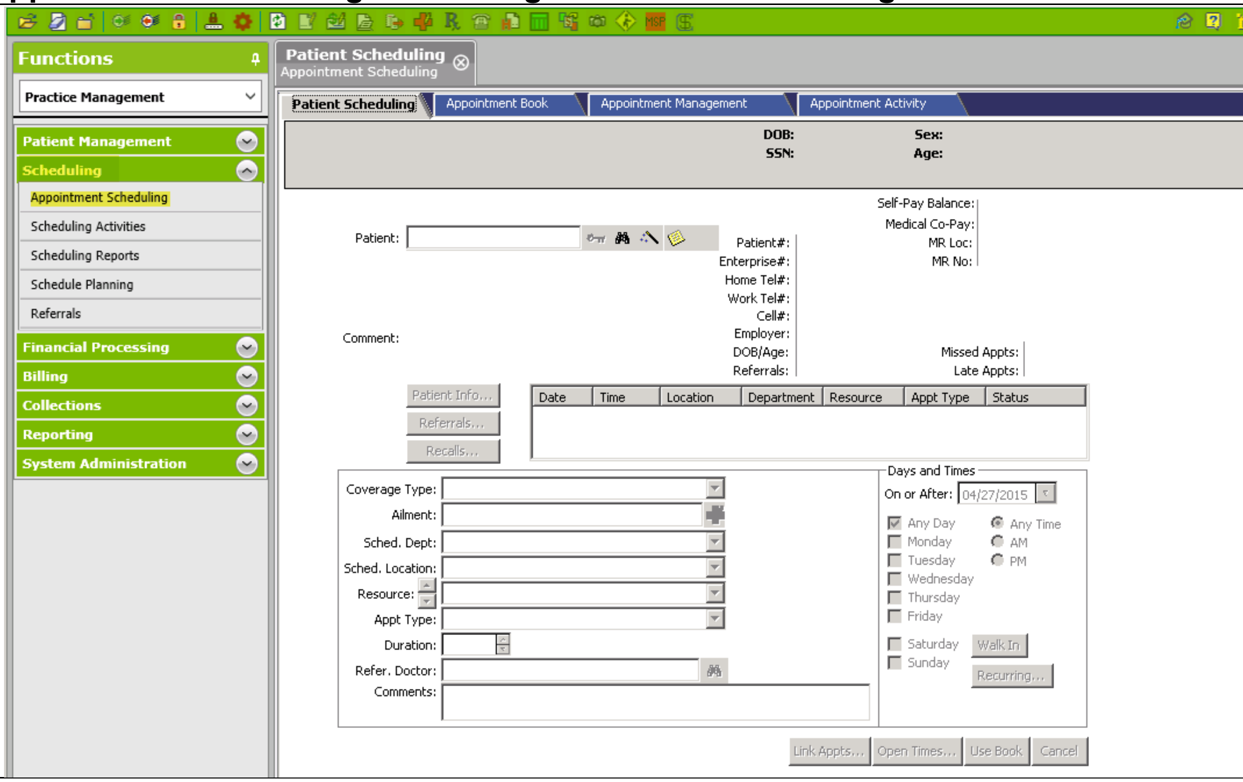
TIP! Click the headings bar to change the order of the display to ascending or descending order for each column

TIP! Your view can be displayed by Procedure Groups if master files are configured by procedure groups. Click on the down arrow under the Procedure Group heading.

TIP! You can right click on the service line item or multiple service dates and choose to **View** the history and from the view, you can Print or E-mail to the patient.

Section 3 - Appointment Scheduling:

3-1 Scheduling>Appointment Scheduling>Accessing the Patient Scheduling Tab



Appointment Scheduling- Accessing the Patient Scheduling Tab

- On the left side of the Navigation Tree click on the **Scheduling** down circle sign , 

- Then SINGLE left click on the **Appointment Scheduling** folder 

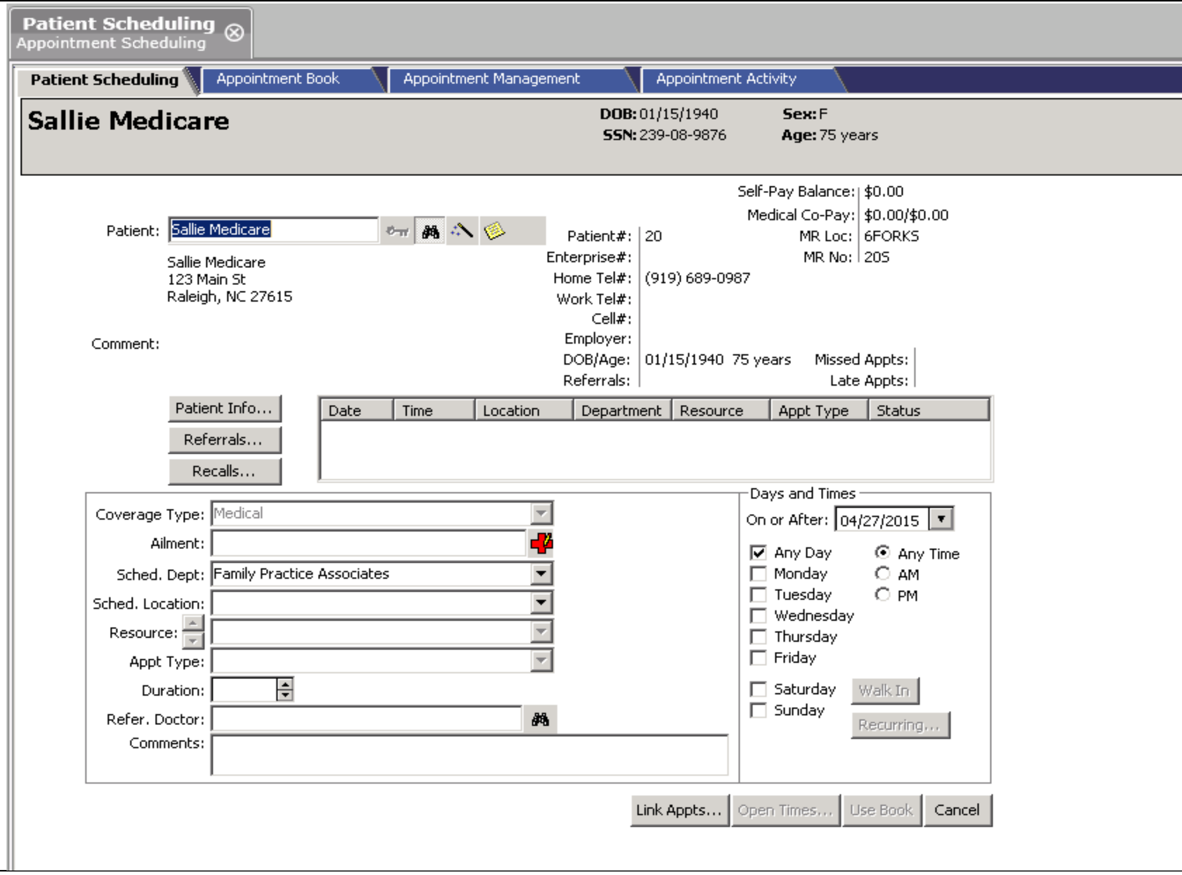
- The first tab is the **Patient Scheduling** Tab

Under **Appointment Scheduling** you find 4 tabs. Many times a task can be performed from any one of the four tabs. Each one of the tabs, however, has its particular focus

- The **Patient Scheduling** and **Appointment Activity** tabs are focused on the selected Patient.
- The **Appointment Book** and the **Appointment Management** tabs are driven by the selection of Scheduling Location(s), Scheduling Department(s), and Resource(s).

TIP! Highlighting an appointment and using the **Enter** key on either the Appointment Book, the Appointment Management, and the Appointment Activity tabs will display a right click menu which also allows for branching to other scheduling functions.

3-2 Scheduling- Schedule using the Patient Scheduling Tab to schedule for an Established Patient


Patient Scheduling
Appointment Scheduling
Patient Scheduling
Appointment Book
Appointment Management
Appointment Activity
Sallie Medicare
DOB: 01/15/1940
SSN: 239-08-9876
Sex: F
Age: 75 years
Self-Pay Balance: $0.00
Medical Co-Pay: $0.00/$0.00
Patient: Sallie Medicare
Patient#: 20
MR Loc: 6FORKS
MR No: 205
Sallie Medicare
123 Main St
Raleigh, NC 27615
Enterprise#:
Home Tel#: (919) 689-0987
Work Tel#:
Cell#:
Employer:
Comment:
DOB/Age: 01/15/1940 75 years
Missed Appts:
Referrals:
Late Appts:
Patient Info...
Referrals...
Recalls...
Date
Time
Location
Department
Resource
Appt Type
Status
Coverage Type: Medical
Ailment:
Sched. Dept: Family Practice Associates
Sched. Location:
Resource:
Appt Type:
Duration:
Refer. Doctor:
Comments:
Days and Times
On or After: 04/27/2015
Any Day
Monday
Tuesday
Wednesday
Thursday
Friday
Saturday
Sunday
Any Time
AM
PM
Walk In
Recurring...
Link Appts...
Open Times...
Use Book
Cancel

Scheduling- Patient Scheduling Tab	
• **Patient Scheduling** tab is used when a patient is loaded in the child window and you want to schedule an appointment for that patient. • Ability to search and schedule an appointment for a patient by defining criteria. • Ability to go to the **Appointment Book** to schedule an appointment for the patient in focus. • Ability to link to **Patient Information**, **Referrals** and **Recalls**. • Ability to see the patient's current and future appointments. • Ability to see Global Procedures and Expiration dates.	
Patient Scheduling Tab	

Screen divided into three (3) sections

Top Patient Section

- Bring up patient using binoculars (or defaults in if patient is in Registration child window), or enter patient #/Tab, or Magic Wand to create new patient.
- Can use the "Memo Appt" icon or **ALT/Shift/Down arrow** to make a non patient related appointment, such as a meeting.
- Patient information pulls in with patient and displays the Name, DOB, SSN, Sex and Age in the topmost area of the screen.
- Under the Patient prompt displays the Name, Address and comment entered into Registration>Patient tab.
- The top right of the screen displays- Enterprise #, phone numbers, Employer, DOB/Age, # of active Referrals, Self pay balance, Copay, Medical Rec Locator and #, Number of Missed appointment and # of Late appointments.

Middle Section

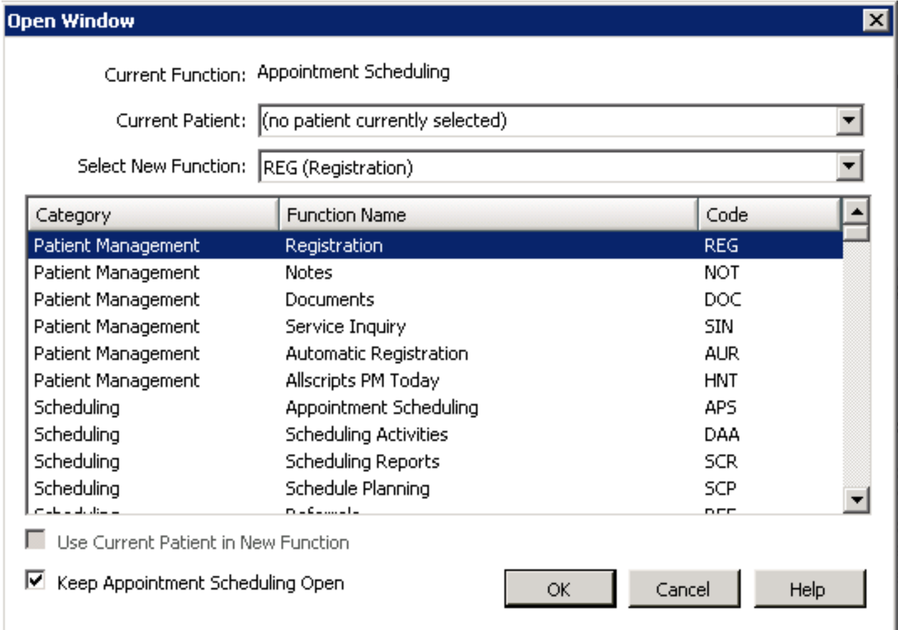
- Displays patient's current and future appointments but no past appointments.
- Three command buttons allow you to view/add/edit a **Referral**, access **Patient Information** screen or enter a **Recall.**
- **Patient Information** screen is like **Summary Tab** in **Registration** with balance information and policy information. This can be accessed by using **Alt/P.** From the screen you can bridge to **Registration** which opens a companion window to make changes to the **Registration** tabs of **Patient/Account/ Policy/Additional.** You can also bridge to **Financial Inquiry** from within the **Patient Information** screen

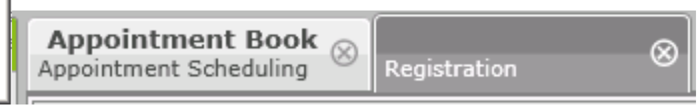
Bottom Section

- Prompts to complete information needed to schedule the appointment.
- **Coverage Type, Ailment, Sched Location, Sched Dept, Resource** (Sched Loc and Dept are required. Enter or use the down arrow to choose from a listing.
- **Resource** can be a person (Dr, NP, PA), place (X-ray room) or piece of equipment (scope). Enter the resource or use the drop down arrow to choose from the listing.
- You can group resources together to create a **Resource Group**. Use the "Spin Icons" to switch between entering a Resource or Resource Group.
- These fields can be defaulted by database or user/workstation using the **Ribbon Menu>Tools>Options.**
- **Appointment type** is mandatory. Duration fills in from appt type, but can be changed to identify the correct amount of time needed for the appointment.
- **Referring Dr-** May be a required on an appointment and will default the Referring Dr from Registration.
- **Comments**- A free text prompt that shows on an encounter, is linked to the appointment and prints on the schedule. 70 characters.
- **Days and Time**- Allows you to narrow the search criteria. On or After is a "jump off" day to search on or after this date. Can also define Day of the week, AM/PM designation. The defaults are today's date, Any Day, Any Time.
- Click on **Open Times** to continue making the appointment.

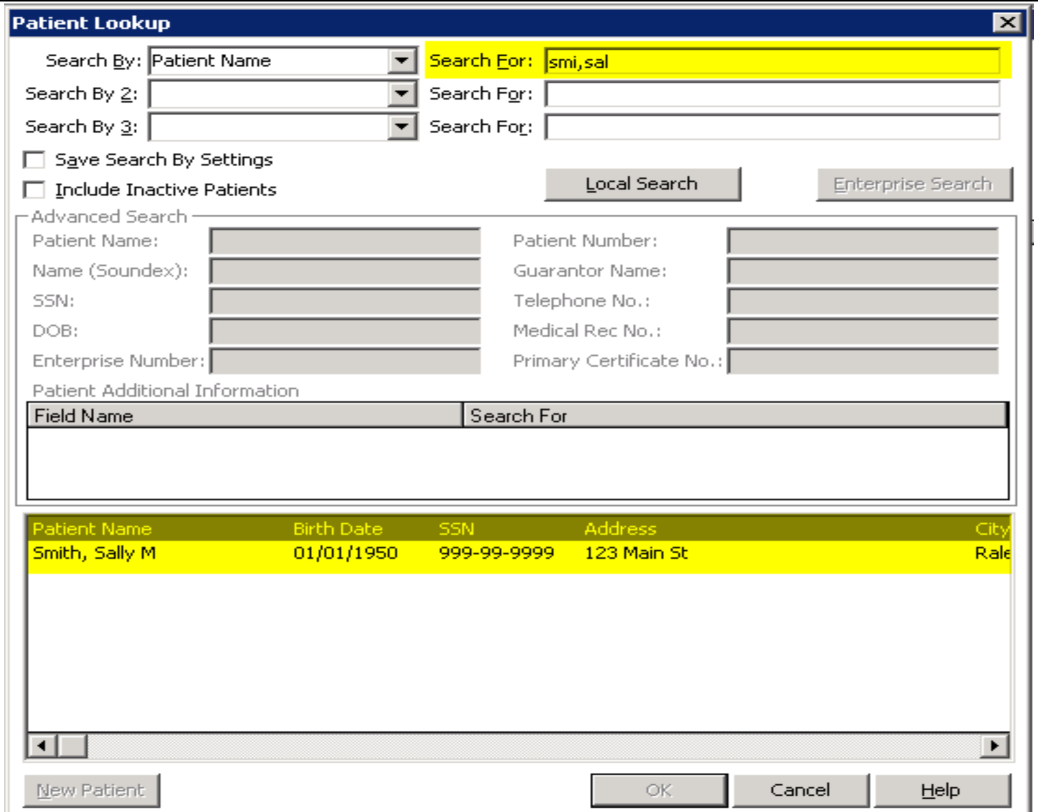
Notes, Policies, and Procedures

3-3 Scheduling- Open Appointment Scheduling and Registration Tabs





Appointment Scheduling Toggle to Registration	Notes, Policies and Procedures
• To be able to toggle back and forth between scheduling and patient registration. • Ability to have both "child" windows open and click between the two of them. • While in **the Appointment Scheduling>F9>REG>Click box Keep Appointment Scheduling Open>OK** • Both folder tabs display in the top of the parent window so you can toggle/click back and forth between the functions.	
3-4 Patient Scheduling Tab- Patient Lookup	



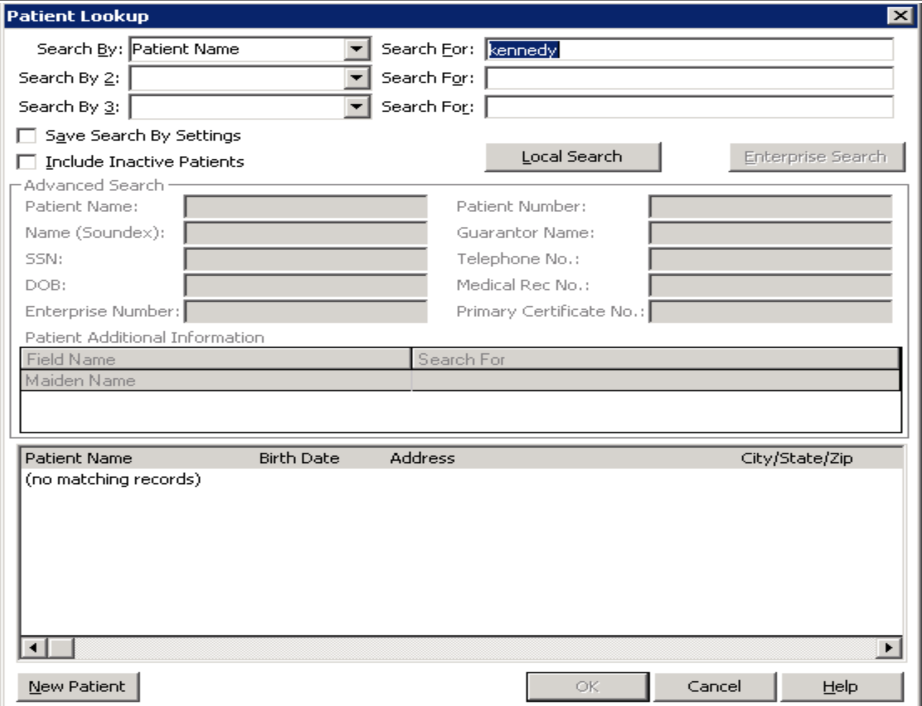
Patient Scheduling Tab- Patient Lookup

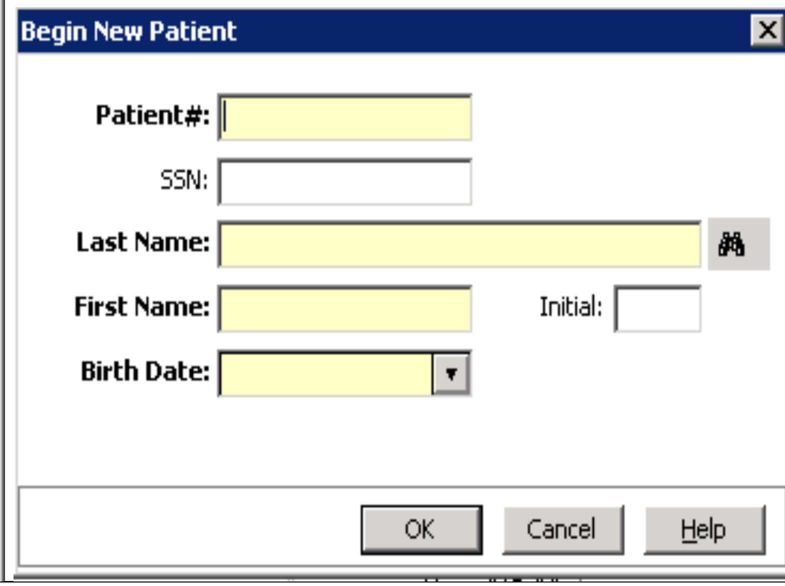
7. Enter the search criteria for the search (down arrow at Search By prompt or F4). You can search by Patient Name, SSN, DOB, Patient #, Guarantor Name, Tel #, Med Rec #, Enterprise # or do an Advanced Search with multiple parameters.
8. Enter the search value in the **Search For** prompt. You can use **%** as wildcard, before, after the search value.
9. Click **Local Search**
10. Highlight the correct patient in the grid displayed at the bottom of the screen.
11. Click **OK.**
12. If the patient is not found- can click on the **New Patient** command button to create a new entry.

Notes, Policies and Procedures

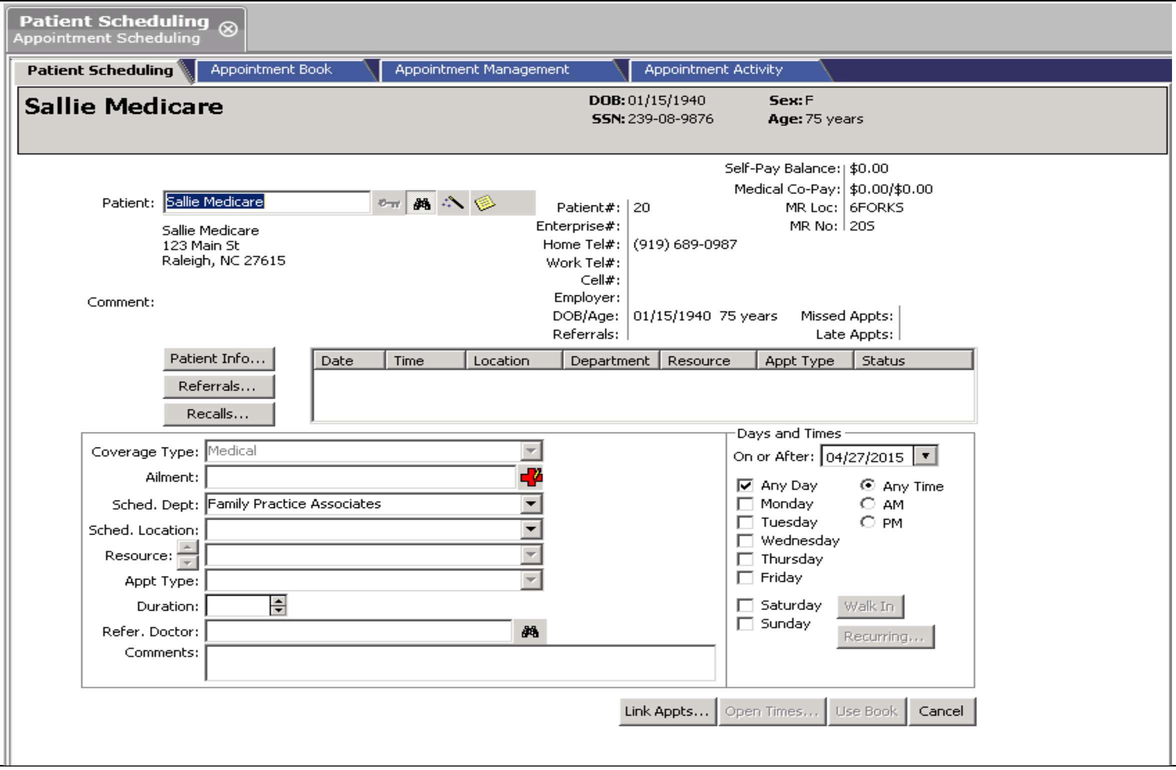
Can use first few letters Lname, Fname
Can search by first name ,Fname
Can choose the default for **Search By** by checking the **Save Search by Settings** box- this is user/workstation specific
You can do a multiple Parameter Search- Search By is primary
Search by : 2 secondary parameter
Search by : 3 third parameter
If you enter a 2 or 3 Search it makes these mandatory to enter value search criteria.
Your search can include Inactive patients by checking the box.
The Search For criteria can be set up for number of required characters for patient last name lookup.

3-5 Patient Scheduling Tab- Create a New Patient





Patient Scheduling Tab- Create a New Patient	Notes, Policies and Procedures
• Using the **Binoculars**, search for a patient. If the patient does not display in the gird, or no matching records are found, click on the **New Patient** command button. • The **Begin New Patient** dialog box appears. Enter the Patient number or the system will auto assign a number when you click OK. • Enter Last Name, First Name, Middle Initial and Birth Date. Fields in “vanilla” are required. • The **Allscripts Companion Registration** window displays for you to complete the registration of the patient. • Enter the registration information to comply with organization policies and **Save** in each tab. • The system will return to the Patient Scheduling Tab, ready to continue with the appointment. • Enter the appropriate information for the appointment.	
3-6 Patient Scheduling Tab- Schedule Appointment for a Patient	


Patient Scheduling
Appointment Scheduling
Patient Scheduling
Appointment Book
Appointment Management
Appointment Activity
Sallie Medicare
DOB: 01/15/1940
SSN: 239-08-9876
Sex: F
Age: 75 years
Self-Pay Balance: $0.00
Medical Co-Pay: $0.00/$0.00
MR Loc: 6FORKS
MR No: 205
Patient: Sallie Medicare
Sallie Medicare
123 Main St
Raleigh, NC 27615
Patient#: 20
Enterprise#:
Home Tel#: (919) 689-0987
Work Tel#:
Cell#:
Employer:
DOB/Age: 01/15/1940 75 years
Referrals:
Missed Appts:
Late Appts:
Comment:
Patient Info...
Referrals...
Recalls...
Date
Time
Location
Department
Resource
Appt Type
Status
Coverage Type: Medical
Ailment:
Sched. Dept: Family Practice Associates
Sched. Location:
Resource:
Appt Type:
Duration:
Refer. Doctor:
Comments:
Days and Times
On or After: 04/27/2015
Any Day
Monday
Tuesday
Wednesday
Thursday
Friday
Saturday
Sunday
Any Time
AM
PM
Walk In
Recurring...
Link Appts...
Open Times...
Use Book
Cancel

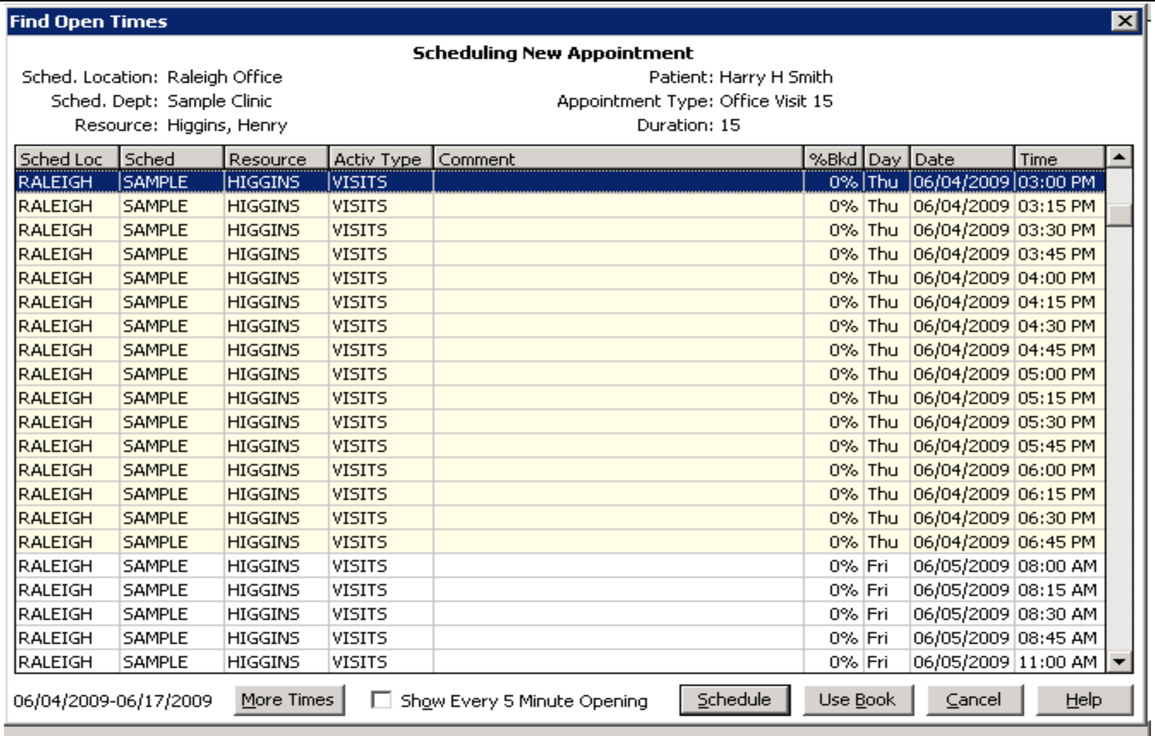
Patient Scheduling Tab- Steps to Schedule an Appt

1. Scan for the patient using the **Binoculars** and pull the correct patient into focus or create a new patient.
2. Patient information display on the appointment screen.
3. Enter (or use the Down arrow and choose from the listing) the **Coverage Type, Sched Location, Sched Dept (these are required).**
4. Enter (or use the Down arrow and choose from the listing) the **Resource** (or leave blank for all resources), or using the "spin box" the **Resource group.**
5. Enter (or use the Down arrow and choose from the listing) the **Appointment Type, Duration (these are required).**
6. **Referring Dr** (if required or needed). This may default in if you have selected a Referring Doctor in registration when the patient was added.
7. Enter the **Comments** of the appointment.
8. Specify **Day and Times** to search for open appointments based on the patient's needs. Default is today's date and Any Day, Any Time.
9. Click on **Open Times.**

Notes, Policies and Procedures

If you have set Scheduling Parameters, the Coverage Type, Sched Location, Sched Dept and Resource may populate in from those defaults.

3-7 Patient Scheduling Tab- Schedule Appointment for a Patient>Find Open Times



Find Open Times

Scheduling New Appointment

Sched. Location: Raleigh Office — Patient: Harry H Smith

Sched. Dept: Sample Clinic — Appointment Type: Office Visit 15

Resource: Higgins, Henry — Duration: 15

Sched Loc	Sched	Resource	Activ Type	Comment	%Bkd	Day	Date	Time
RALEIGH	SAMPLE	HIGGINS	VISITS		0%	Thu	06/04/2009	03:00 PM
RALEIGH	SAMPLE	HIGGINS	VISITS		0%	Thu	06/04/2009	03:15 PM
RALEIGH	SAMPLE	HIGGINS	VISITS		0%	Thu	06/04/2009	03:30 PM
RALEIGH	SAMPLE	HIGGINS	VISITS		0%	Thu	06/04/2009	03:45 PM
RALEIGH	SAMPLE	HIGGINS	VISITS		0%	Thu	06/04/2009	04:00 PM
RALEIGH	SAMPLE	HIGGINS	VISITS		0%	Thu	06/04/2009	04:15 PM
RALEIGH	SAMPLE	HIGGINS	VISITS		0%	Thu	06/04/2009	04:30 PM
RALEIGH	SAMPLE	HIGGINS	VISITS		0%	Thu	06/04/2009	04:45 PM
RALEIGH	SAMPLE	HIGGINS	VISITS		0%	Thu	06/04/2009	05:00 PM
RALEIGH	SAMPLE	HIGGINS	VISITS		0%	Thu	06/04/2009	05:15 PM
RALEIGH	SAMPLE	HIGGINS	VISITS		0%	Thu	06/04/2009	05:30 PM
RALEIGH	SAMPLE	HIGGINS	VISITS		0%	Thu	06/04/2009	05:45 PM
RALEIGH	SAMPLE	HIGGINS	VISITS		0%	Thu	06/04/2009	06:00 PM
RALEIGH	SAMPLE	HIGGINS	VISITS		0%	Thu	06/04/2009	06:15 PM
RALEIGH	SAMPLE	HIGGINS	VISITS		0%	Thu	06/04/2009	06:30 PM
RALEIGH	SAMPLE	HIGGINS	VISITS		0%	Thu	06/04/2009	06:45 PM
RALEIGH	SAMPLE	HIGGINS	VISITS		0%	Fri	06/05/2009	08:00 AM
RALEIGH	SAMPLE	HIGGINS	VISITS		0%	Fri	06/05/2009	08:15 AM
RALEIGH	SAMPLE	HIGGINS	VISITS		0%	Fri	06/05/2009	08:30 AM
RALEIGH	SAMPLE	HIGGINS	VISITS		0%	Fri	06/05/2009	08:45 AM
RALEIGH	SAMPLE	HIGGINS	VISITS		0%	Fri	06/05/2009	11:00 AM

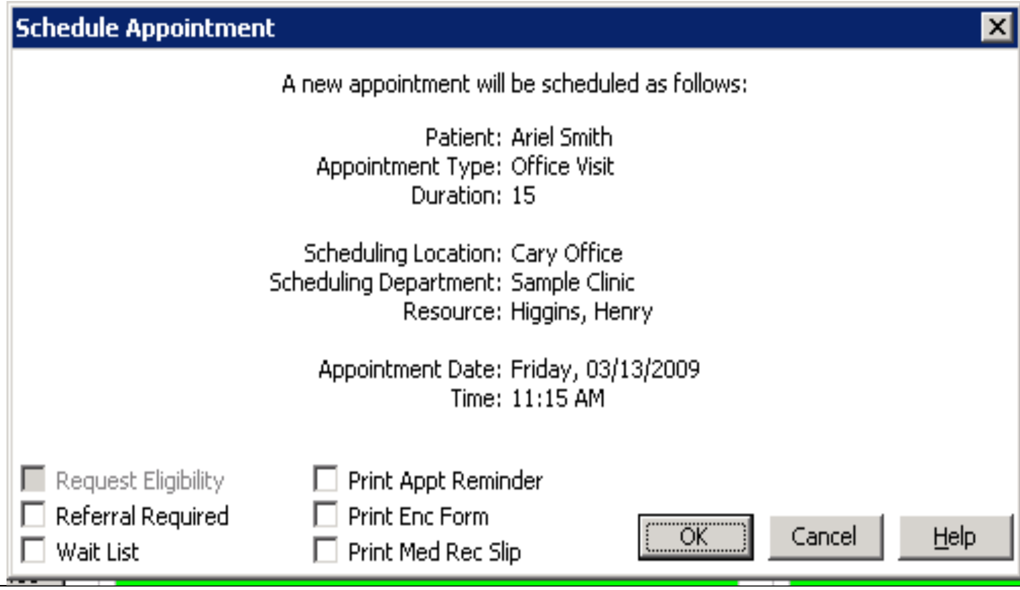
06/04/2009-06/17/2009 — More Times — Show Every 5 Minute Opening — Schedule — Use Book — Cancel — Help

Patient Scheduling Tab- Find Open Times

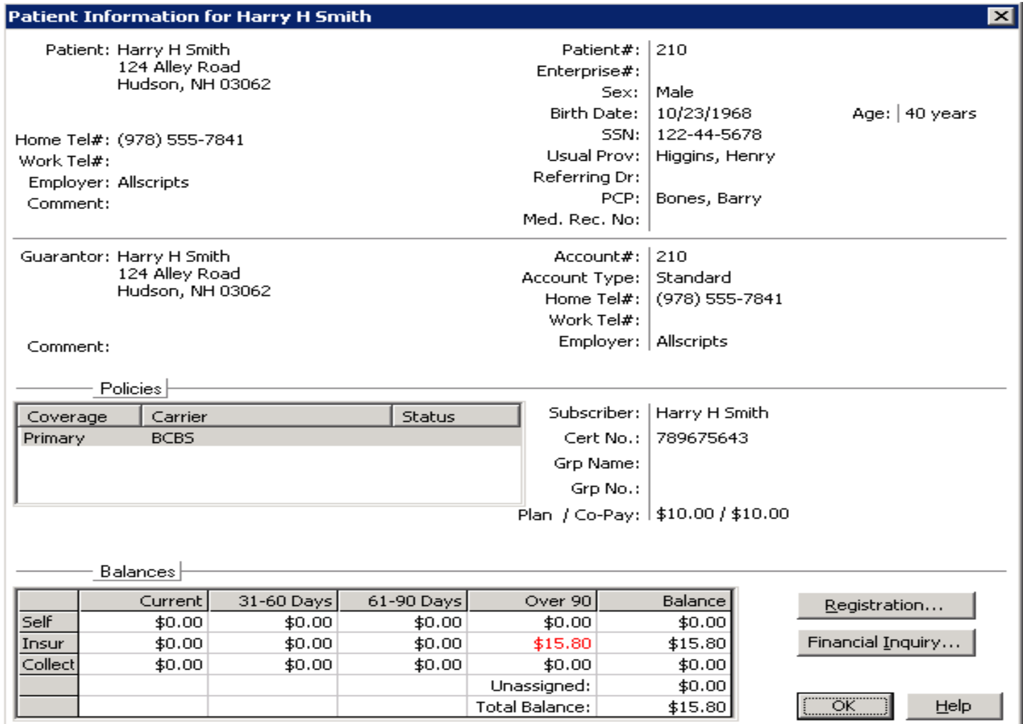
- All open times for the specified criteria will display.
- Use scroll bar to go the next day. The amount of time displays depending on Practice settings, but you can click on the **More Times** command button to view dates in the same increment past the set time frame.
- Highlight the chosen slot and "double click" on click on **Schedule** command button or **ALT/S.**
- **Cancel** will return you to the Patient Scheduling screen.
- **Use Book** will take you to the **Appointment Book** to schedule the appointment.

Notes, Policies and Procedures

3-8 Patient Scheduling Tab- Schedule Appointment Screen



Patient Scheduling Tab- Schedule Appointment Screen	Notes, Polices and Procedures
• After choosing **Schedule** in the **Find Open Times** screen, the **Schedule Appointment** screen appears and will allow you to double check the accuracy of the appointment you are about to schedule. • If a Referral is required for this appointment, check **Referral Required**. This will flag the appointment. • If the patient wants an earlier appointment and wants to be put on a wait list, check the **Wait List** box. • If you need to print an appointment reminder for the patient, check the **Print Appt Reminder** check box. • If you need an encounter form make sure to check the box **"Print Enc Form"** check box**. (only available for today's appts)** • If you need to print a medical record slip, check the **Print Med Rec Slip** check box. **(only available for today's appts)** • If everything is correct on this screen, click on the **OK** command button. • Appointment will be scheduled and you are returned to the Patient Scheduling Tab and appointment will display in the Appointment Book grid.	• If your site is using Electronic Eligibility**, Request Eligibility** will be available. If you need to request an insurance eligibility, check the **Request Eligibility** check box. • If you mark an appointment as **Wait List**, an encounter number will not be created and the appointment will not pass to EHR. You will need to confirm the appointment and mark it as Wait List in **Appointment Detail** option.
3-9 Patient Scheduling Tab- Patient Info Command Button	



Patient Scheduling Tab- Patient Info Command Button

- Ability to view demographic information entered for a patient in Registration, such as Name, Address, phone numbers, Employer, Comment, Patient numbers, Sex, DOB/Age, SSN, Usual Provider, Referring Dr, PCP and Medical Record number.
- Ability to view Guarantor information entered for a patient in Registration, such as Name, Address, Comment, Account number, Account type, phone numbers and Employer.
- Ability to view Insurance Policy information entered for a patient in Registration, such as all coverages, subscriber information, certificate/group numbers and Plans with copay.
- Ability to see Balance information for a patient for self, insurance and collection amounts in aging buckets, as well as any unassigned money. Balances over 90 days display in red.
- Click **OK** to close this screen.

Notes, Policies and Procedures

You can “jump” to Registration by clicking on the **Registration** command button to open a companion Registration window.

You can “jump” to Financial Inquiry by clicking on the **Financial Inquiry** command button to open a companion Financial Inquiry window.

3-10 Patient Scheduling Tab Walk In Appointment

Patient Scheduling Tab Walk In Appointment

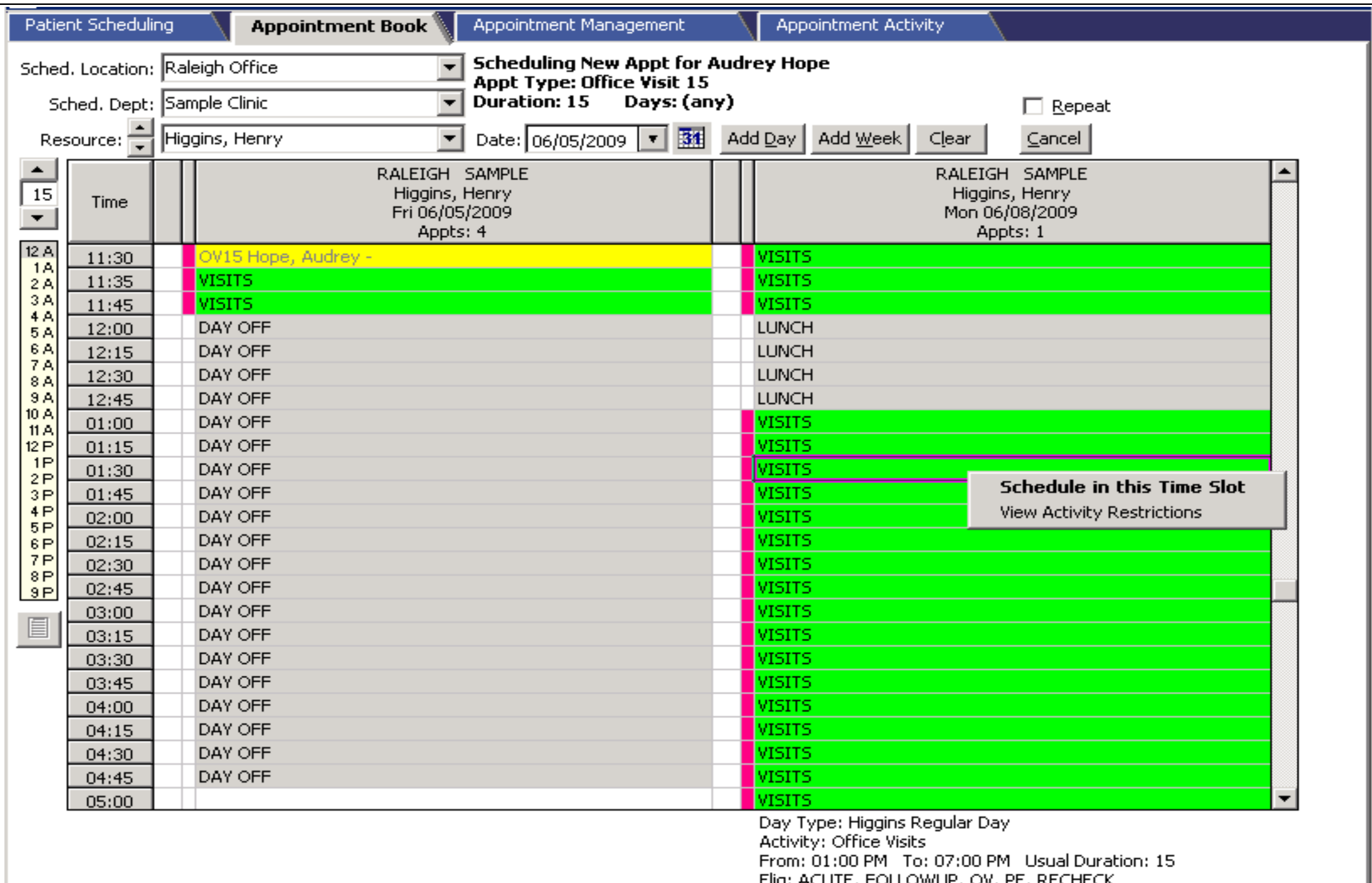
- Ability to create a Walk In appointment at the current system time for the specified patient in focus.
- A Walk In appointment will be scheduled and display as a forced appointment in red on the Appointment book.
- Walk In appointments are automatically marked as Acknowledged.

Notes, Policies and Procedures

Steps to make a Walk In Appointment

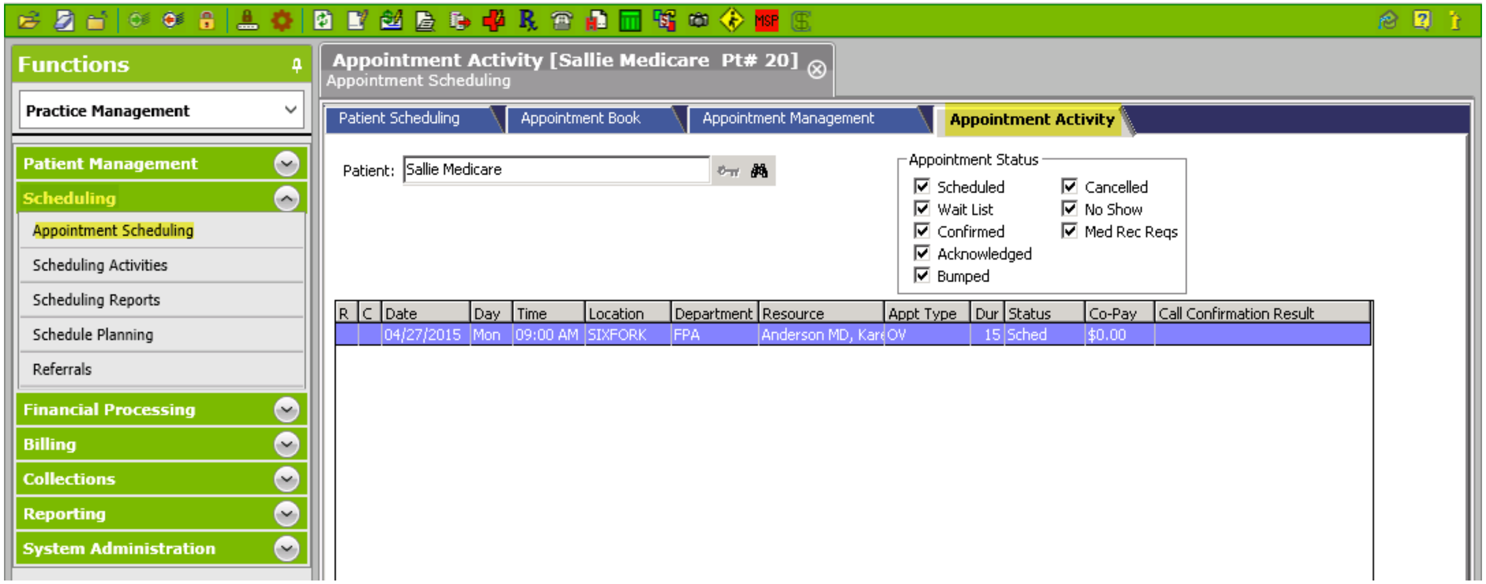
1. Access the **Patient Scheduling** tab.
2. Search for the patient using the **Binoculars** and bring the correct patient into focus.
3. Enter the **Coverage Type**, **Sched Location, Sched Dept, Resource.**
4. Enter the **Appt Type** or use the down arrow and choose the correct appointment type from the listing for the Walk In appointment.
5. Enter the **Duration** of the Walk In appointment.
6. Enter the **Refer. Doctor** if appropriate.
7. Enter the **Comments** for this appointment.
8. Click on the **Walk In** command button on the Patient Scheduling screen or **Alt/K**
9. The **Schedule (Walk In) Appointment** confirmation dialog box will appear.
10. Review the available checkboxes, check any that apply.
11. Click on **OK.**
12. The appointment will be made at the current system time.

3-12 Patient Scheduling Tab Use Book Option

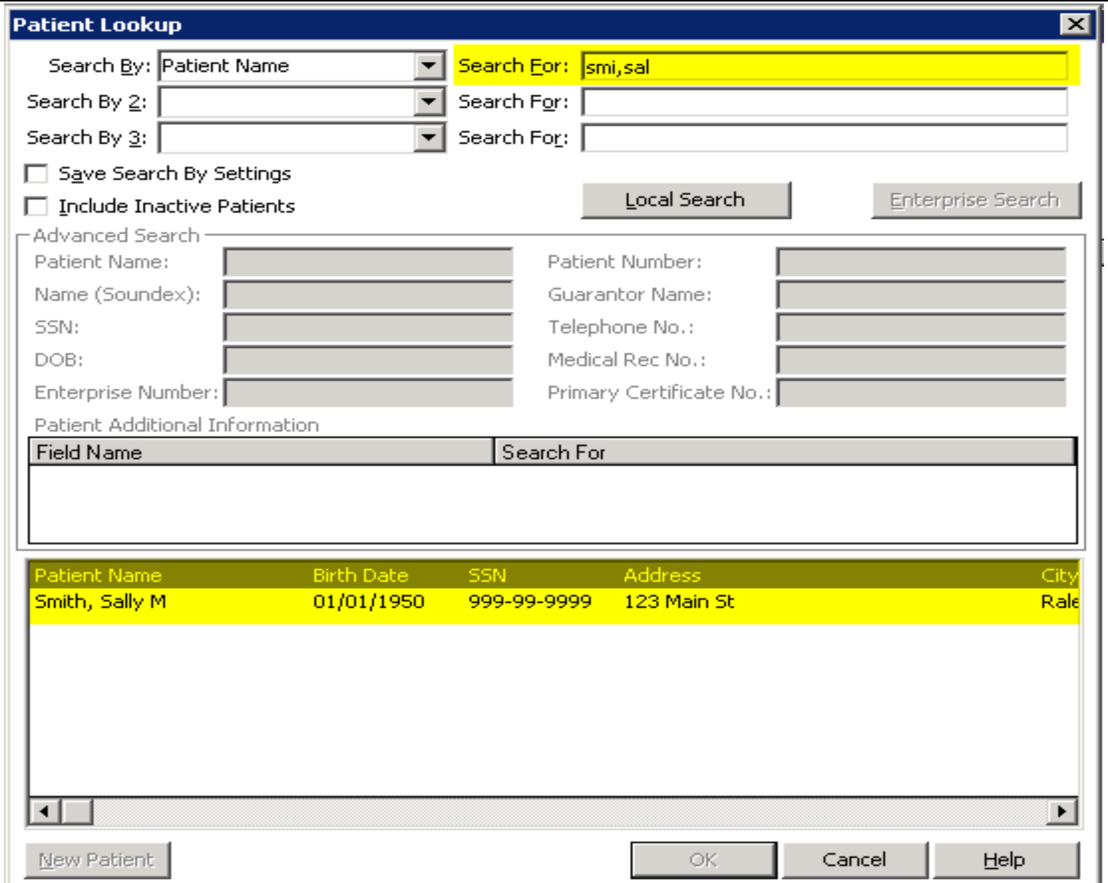


Patient Scheduling Tab Use Book Option	**Notes, Policies and Procedures**
- There are times when you may want to view the appointment book before making a patient appointment and the **Use Book** option provides that capability. - Ability to schedule an appointment from the **Appointment Book** tab based on information provided in the **Patient Scheduling** Tab. - Ability to view appointment based Activity Restrictions if set up in the scheduling files.	

Scheduling>Appointment Scheduling> Appointment Activity Tab



Appointment Activity Tab	Steps to access Appointment Activity Tab
• This option is a total historical appointment history for a specific patient. There is no date range, resource, location or department selection criteria. • View eight different patient appointment statuses; **Scheduled, Waitlist, Confirmed, Acknowledged, Bumped, Canceled, No Show, Med Rec Reqs** • Ability to view the Appt details, view registration, view Incoming referrals, Schedule a new appt for the patient, enter a recall, Confirm/Acknowledge an appt, enter a start and end time for the appt, Waitlist, Cancel, No Show, Move, Bump appts and Print Encounters, Med Record requests/slips, or Appt reminders. • Copay will also display in this tab. The amount displayed is based on the whether the patient has a specialist copay assigned to the policy and if the resource of the appointment is tied to a Provider marked as a specialist. If an unassigned payment is attached to the appt the amount will display in green.	1. From the Navigation Tree 2. Click on **Scheduling** Folder + sign 3. Click on **Appointment Scheduling** Folder 4. Click on **Appointment Activity** Tab 5. Click on **Binoculars** to search for a patient
3-13 Appointment Activity Tab- Patient Lookup	

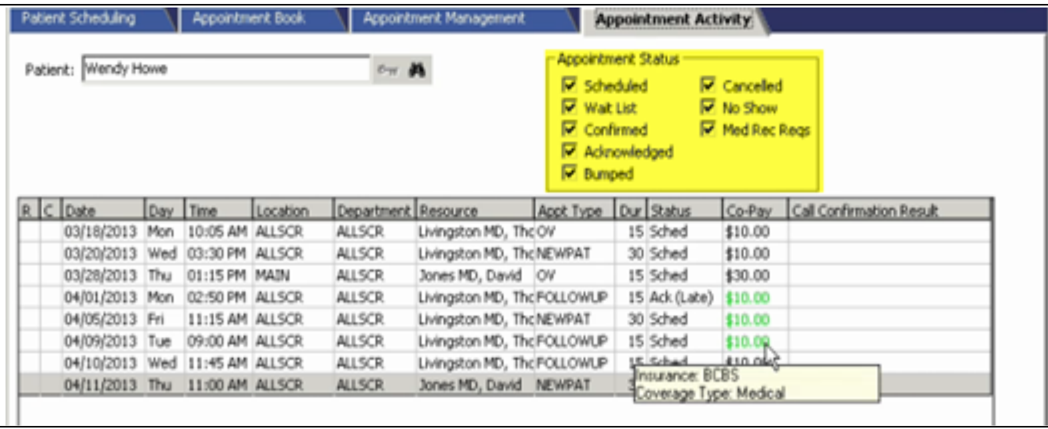

Patient Lookup
Search By: Patient Name
Search For: smi,sal
Search By 2:
Search For:
Search By 3:
Search For:
Save Search By Settings
Include Inactive Patients
Local Search
Enterprise Search
Advanced Search
Patient Name:
Name (Soundex):
SSN:
DOB:
Enterprise Number:
Patient Number:
Guarantor Name:
Telephone No.:
Medical Rec No.:
Primary Certificate No.:
Patient Additional Information
Field Name
Search For
Patient Name
Birth Date
SSN
Address
City
Smith, Sally M
01/01/1950
999-99-9999
123 Main St
Rale
New Patient
OK
Cancel
Help

Appointment Activity Tab- Patient Lookup

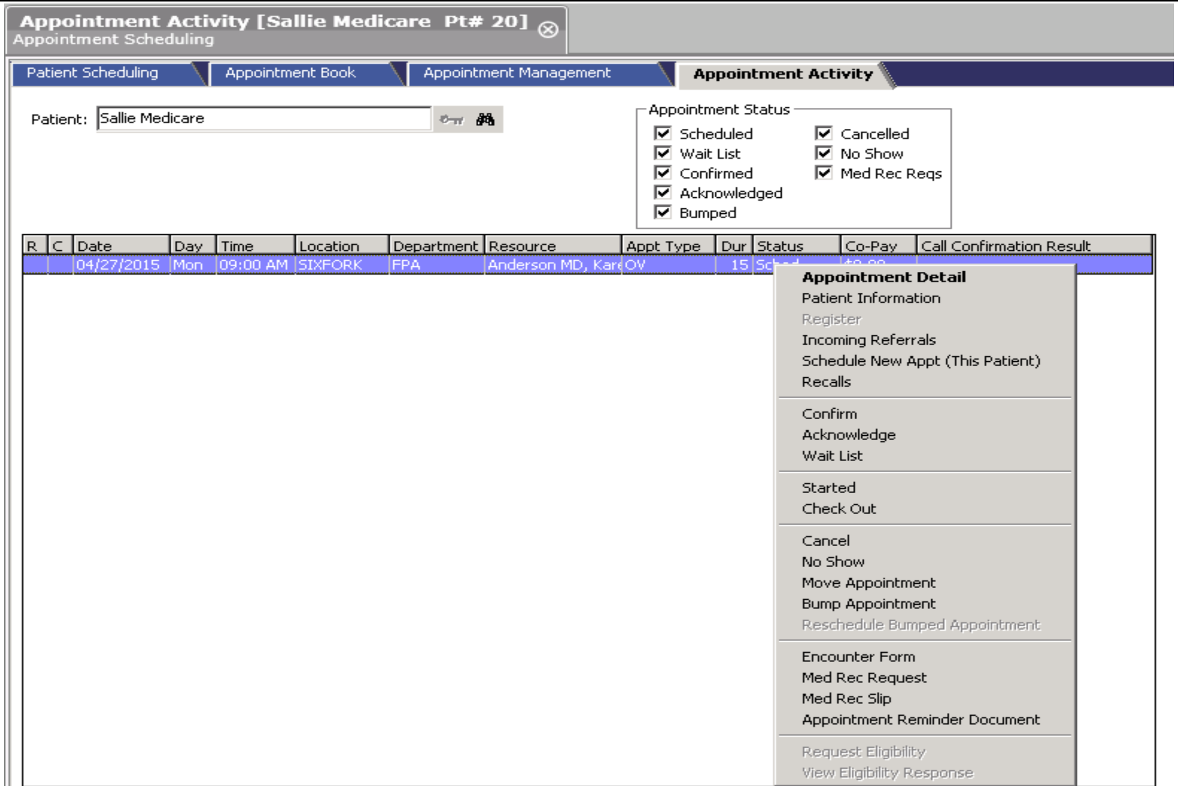
13. Enter the search criteria for the search (down arrow at Search By prompt).
14. Enter the search value in the Search For prompt
15. Click **Local Search**
16. Highlight the correct patient in the grid displayed at the bottom of the screen.
17. Click **OK.**

Notes, Policies, Procedures

Appointment Activity Tab



Appointment Activity Tab	Call Confirmation results Column
• The **Appointment Status** section can be used to view certain appointment statuses of a patient's appointment history. • Ex. If a provider wanted to see how many times a patient has cancelled or no showed the user can uncheck all the statues except for Cancelled and No show. • Appointments matching the criteria display in the grid. **R Column-** indicates Referral status colors o **White/blank**=No referral required o **Yellow Square**=Indicates that an appointment requires a referral which has not been received o **Green Square**= Referral is attached or linked to the appointment **Co-Pay Column-** indicates the patient's copay o The amount displayed is based on the whether the patient has a specialist copay assigned to their policy and if the resource of the appointment is tied to a Provider marked as a specialist. o If there is an unassigned payment associated with the appt the amount will display in green. o Hover on the copay to display the carrier and coverage type for the appt.	o Works in tandem with Televox iCall functionality or can be used manually if codes have been built in the Confirmation Result Code Maintenance file. o Displays a chosen confirmation reason on a confirmed status appt. o When the appointment's status is changed from Confirmed to another status, the field blanks out. **C Column**- indicates coverage status colors if using eligibility or recording manually in Appointment Detail option. o **Green check mark** = Yes, the patient was covered at the time the inquiry was made o **Red circle** = No, the patient was not covered for the scheduled service as of the time an inquiry was made o **Red X** = Inactive. You must review the Eligibility History dialog to understand why the coverage is set to "Inactive." You may need to contact the Carrier to determine why o **Red X** = Inactive. You must review the Eligibility History dialog to understand why the coverage is set to "Inactive." You may need to contact the Carrier to determine why o **Green circle -** Received. An eligibility response was received from the payer o **Yellow circle -** Exception. An Eligibility Response was received from the payer with an exception o **Blank field** = No inquiry has been made relative to the coverage status for the appointment
3-14 Appointment Activity Tab R Click Options	

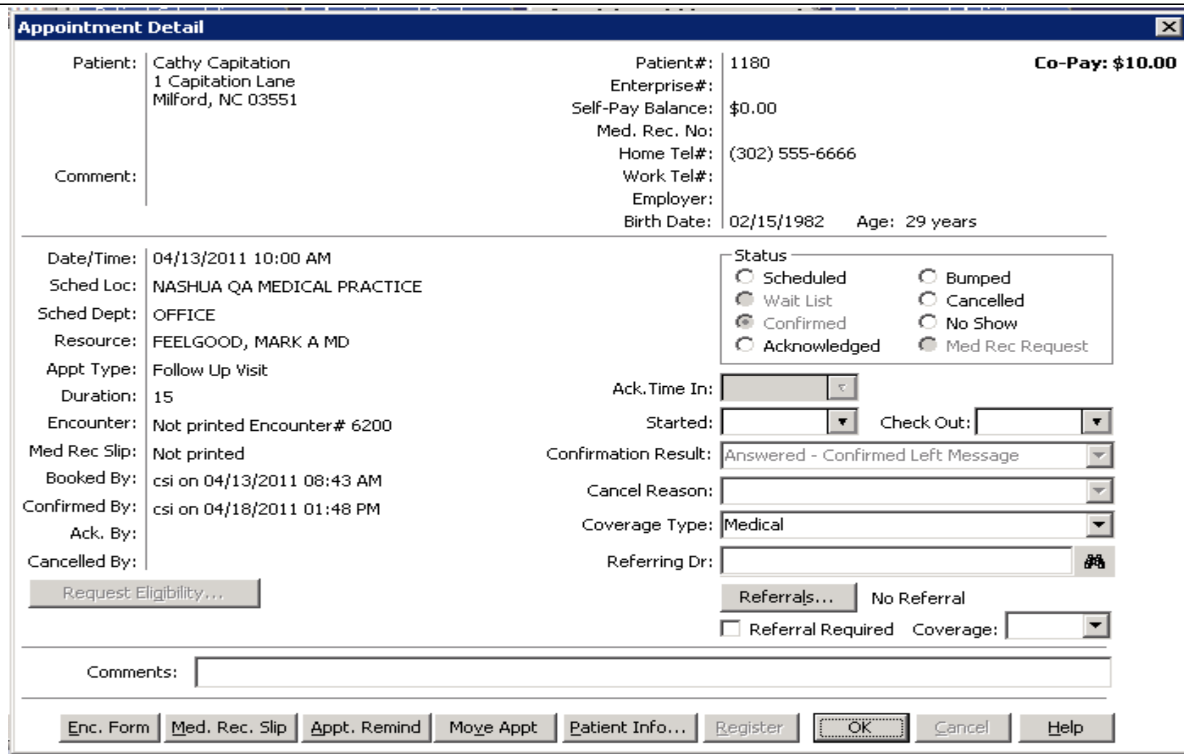


Appointment Activity Tab R Click Options

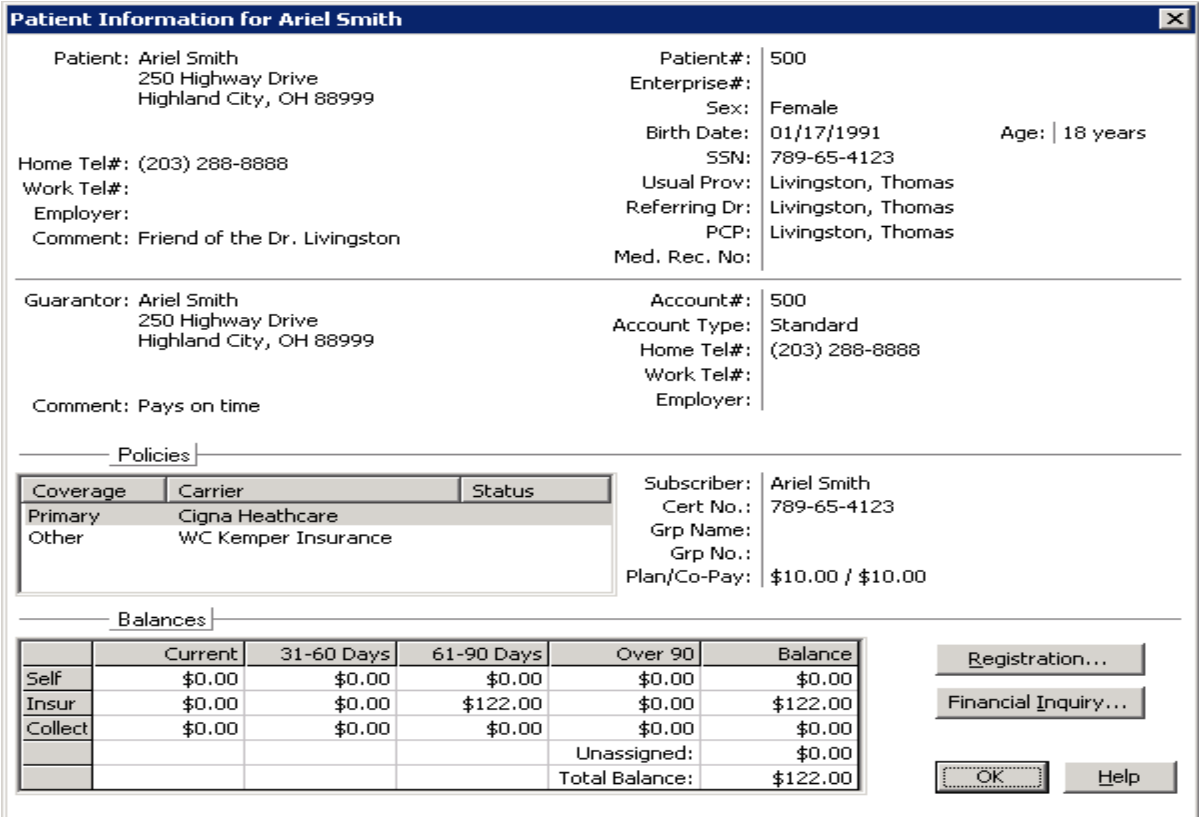
- Ability to view appointment details
- Ability to view the Patient Summary screen
- Ability to Cancel, record as No Show
- Ability to Move and Bump the patient's appointment.
- Ability to Print Encounter
- Ability to do a demand Eligibility Request
- Ability to View the Eligibility Response

Notes, Policies, Procedures

3-15 Appointment Activity Tab- R Click Appointment Detail



Appointment Activity Tab- R Click Appt Detail	Notes, Policies, Procedures
• Ability to mark **Started** time or **Check Out** time • Ability to change the **Status** of the appt and mark it as **Confirmed** (with result)**, Acknowledged, Cancelled** (with Cancel reason)**, No Show** • Ability to **Waitlist** or **Bump** the appointment • Ability to add and attach an Incoming Referral • Ability to print an **Encounter Form, Med Record Slip, Appt reminder** • Ability to **Move** an appointment. • Ability to **Request Eligibility** if the organization is signed up for it. • Ability to add/edit **Comment** of the appointment. • Ability to "jump" to **Patient Info**.	• View the Encounter # and user who booked/confirmed/ acknowledge/ canceled the appt. • Click on the appropriate status of the appointment. • Click on the down arrow at the Started or Check Out prompts to automatically record the current time. • Type in the comments field to add or edit comments. • Choose a coverage type for this appointment if entering manually. • Click on the various Print command buttons to display the printer screen. • Click on Referrals, Request Eligibility or Patient Info command buttons to access those options. • Click **OK** to save and close the screen.
3-16 Appointment Activity Tab-R Click Patient Information	

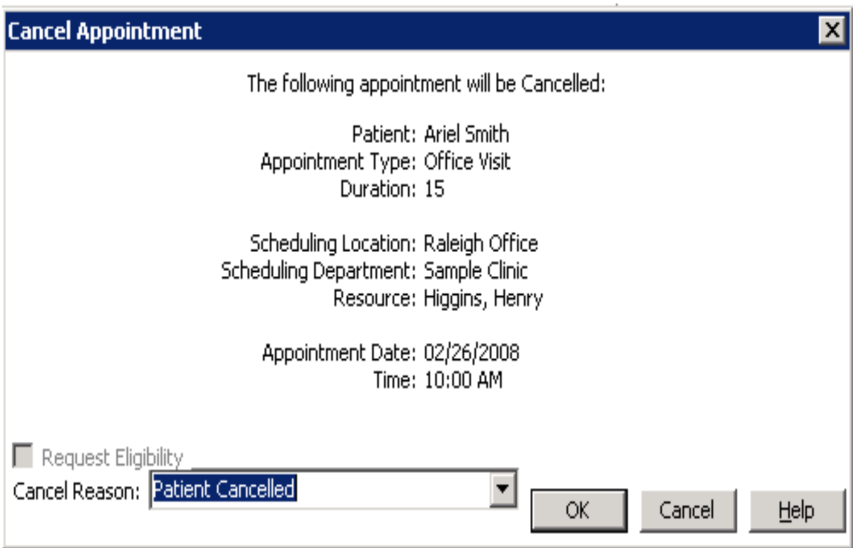


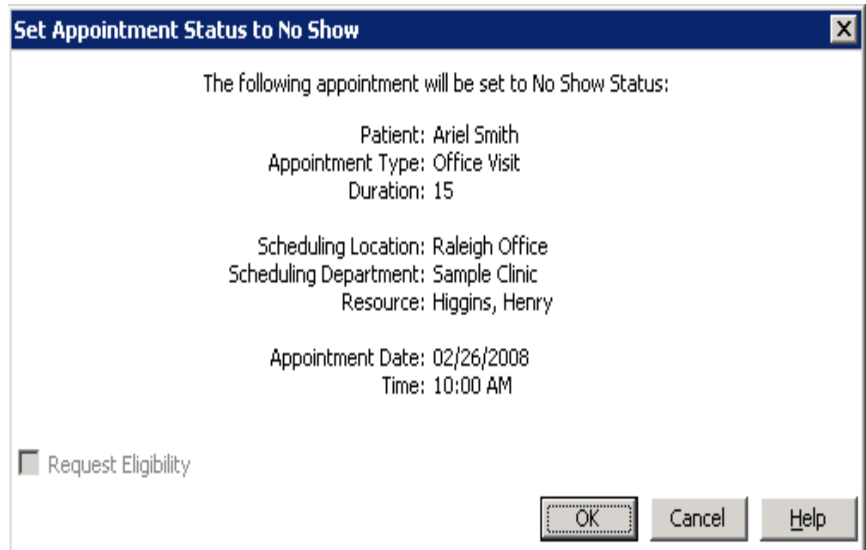
Appointment Activity Tab- R Click Patient Information

- Displays the **Registration Summary** Screen
- Displays the Patient's address, phone #'s, Employer, Comment, Sex, DOB, SSN, Guarantor, Ins Carriers, Balances
- Ability to access **Registration**
- Ability to access **Financial Inquiry**
- Click **OK to** close the screen.

Notes, Policies, Procedures

3-17 Appointment Activity Tab-R Click Cancel/No Show





Appointment Activity Tab- R Click Cancel

- Ability to Cancel the appointment
- Enter the Cancel Reason or use drop down arrow and chose from the list.
- Click **OK.**

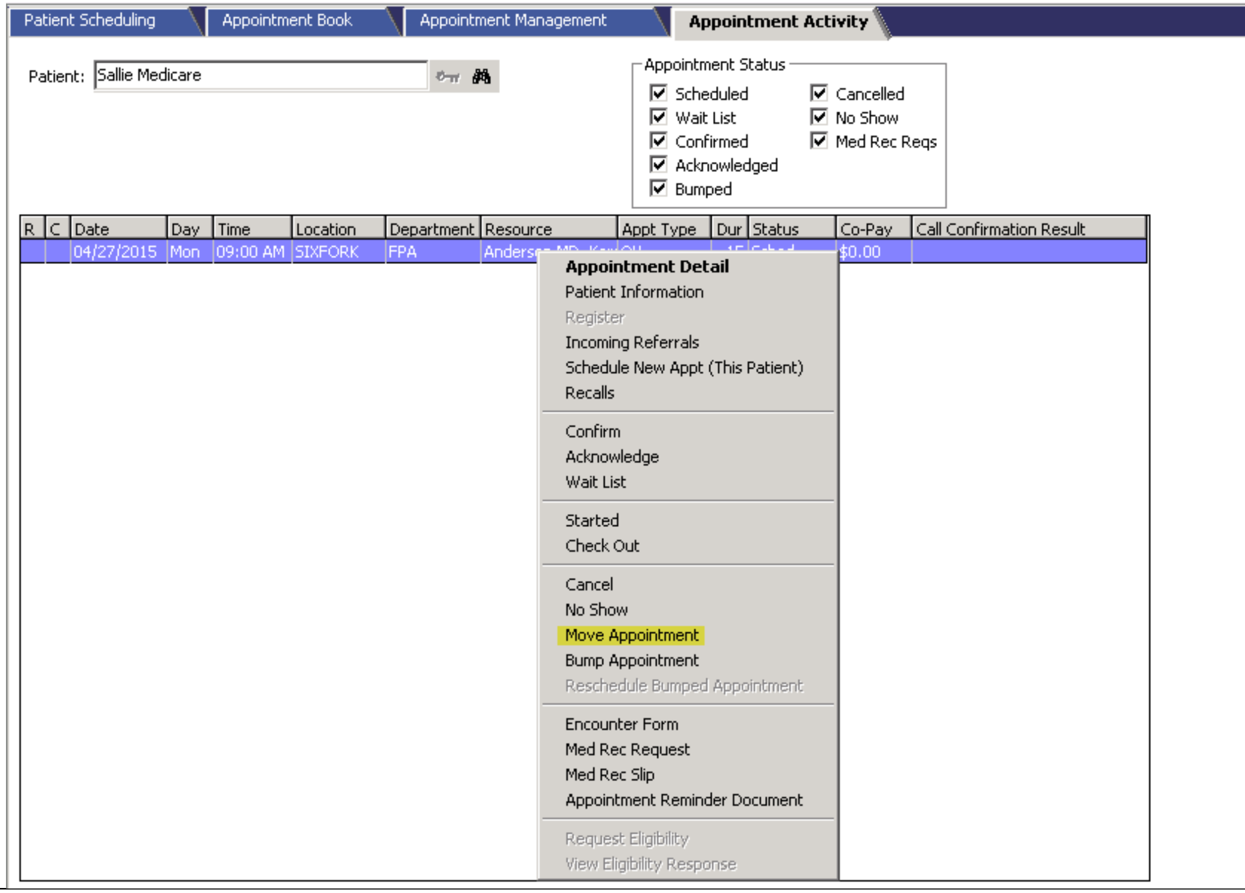
Notes, Policies, Procedures

Appointment Activity Tab- R Click No Show

- Ability to record the appointment as a No Show
- Click **OK.**

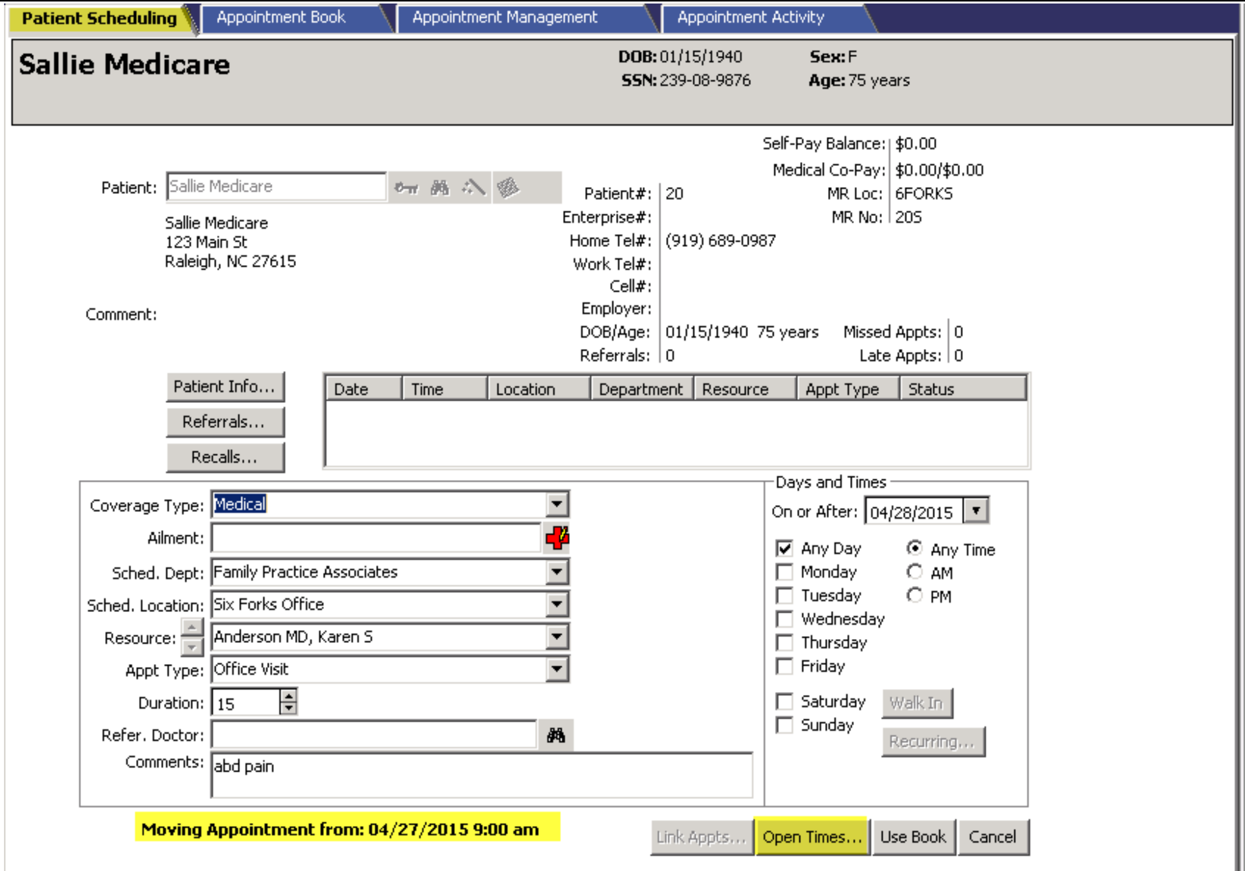
Notes, Policies, Procedures

3-18 Appointment Activity Tab- Click R Move a Patient's appointment



Appointment Activity Tab- Steps to Move an Appt	Notes, Policies, Procedures
1. If a patient calls to move the appointment 2. Search for the patient 3. Highlight the appointment that needs to be moved 4. Right click on the appointment 5. Select **Move** Appointment from the drop down menu *This will action will revert back to the **Appointment Activity** tab and will display the patient's new appointment information and canceled appointment if that **Status** is checked.	

3-19 Appointment Activity Tab- Move a Patient's appointment using Open Times Option

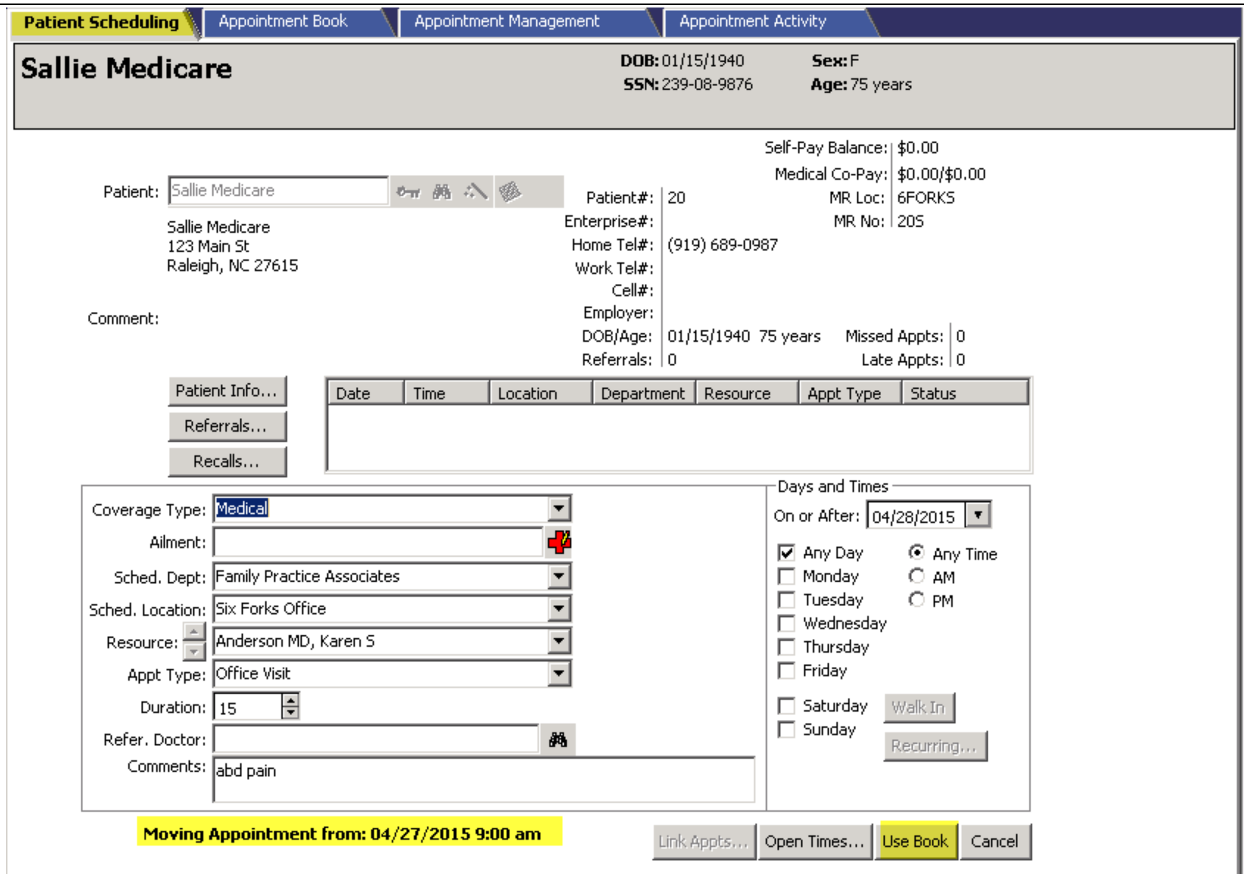


Appointment Activity Tab- Steps to Move an Appt

1. Set the correct new Days and Times.
2. Choose **Open Times** command button
3. Highlight the correct appointment Date and Time when the schedule displays
4. Click the **Schedule** command button
5. Confirm the Appointment
6. Click on **OK** command button.

Notes, Policies, Procedures

3-20 Appointment Activity Tab- Move a Patient's appointment using Use Book Option

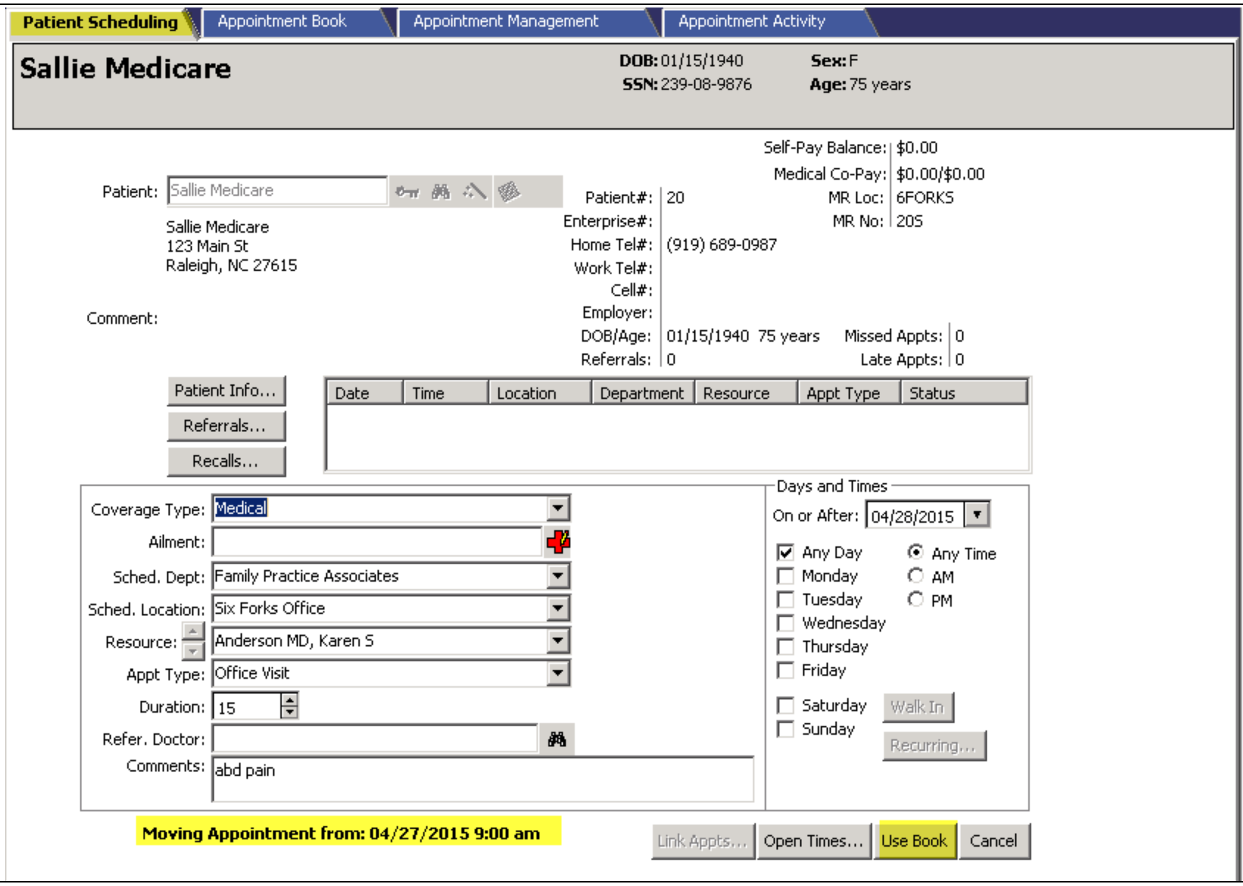


Appointment Activity Tab- Steps to Move an Appt

1. Set the correct new Days and Times.
2. Choose **Use Book** command button
3. Selecting this action will prompt the **Appointment Book** tab
4. Select the correct appointment time by right clicking on the appointment time
5. Select **Move to this Time Slot**
6. Confirm the Appointment
7. Click on **OK** command button.

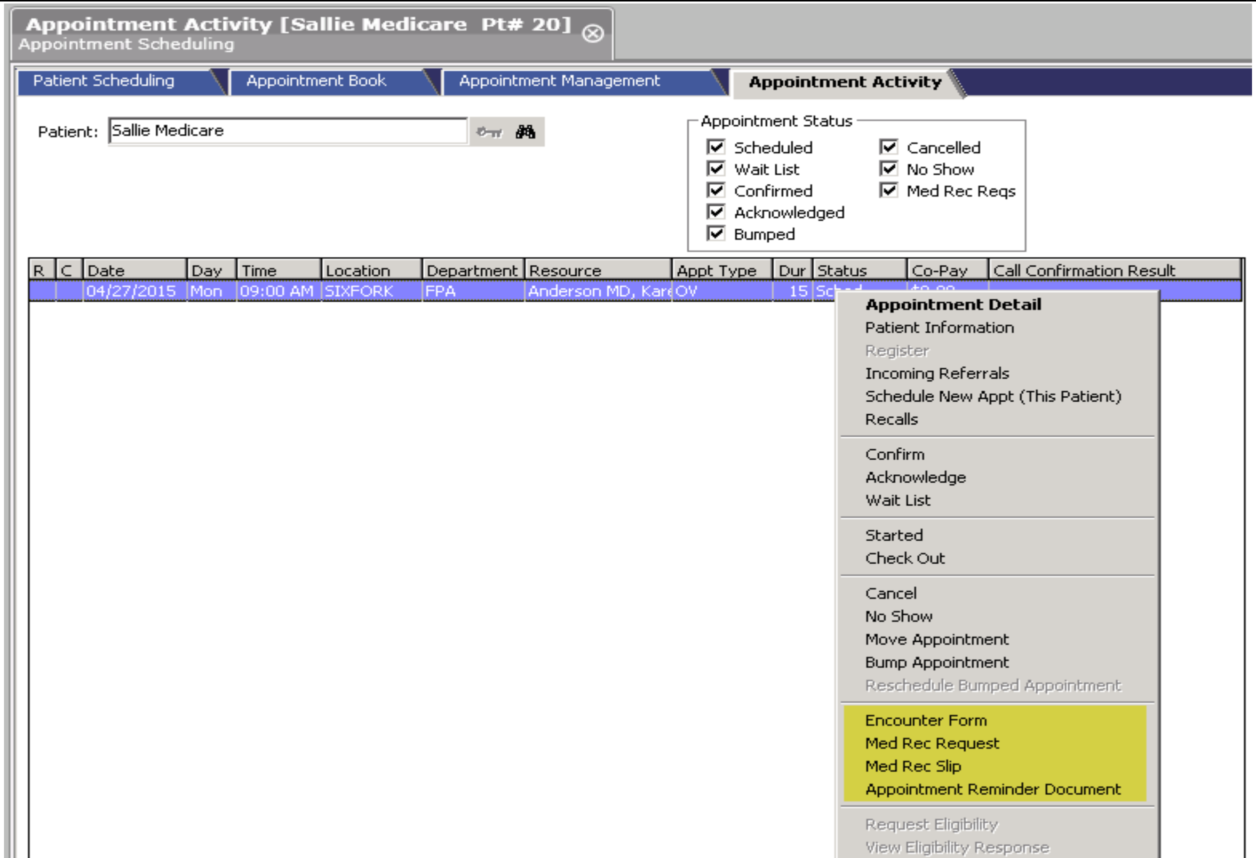
Notes, Policies, Procedures

Appointment Activity Tab- Move a Patient's appointment using Use Book Option



Appointment Activity Tab- Steps to Move an Appt	Notes, Policies, Procedures
1. Set the correct new Days and Times. 2. Choose **Use Book** command button 3. Selecting this action will prompt the **Appointment Book** tab 4. Select the correct appointment time by right clicking on the appointment time **5.** Select **Move to this Time Slot** 6. Confirm the Appointment 7. Click on **OK** command button.	

3-21 Appointment Activity Tab-Print Encounter/Appt Reminder/Medical Record Request or Slip



Appointment Activity Tab- R Click>Encounter Form

- Ability to Print a Demand Encounter
- Click on Encounter Forms and choose the correct printer.
- Click **OK.**

Appointment Activity Tab- R Click>Med Req Request

- Ability to Print a Medical Records Request
- Click on Med Rec Request and choose the correct printer.
- Click **OK.**

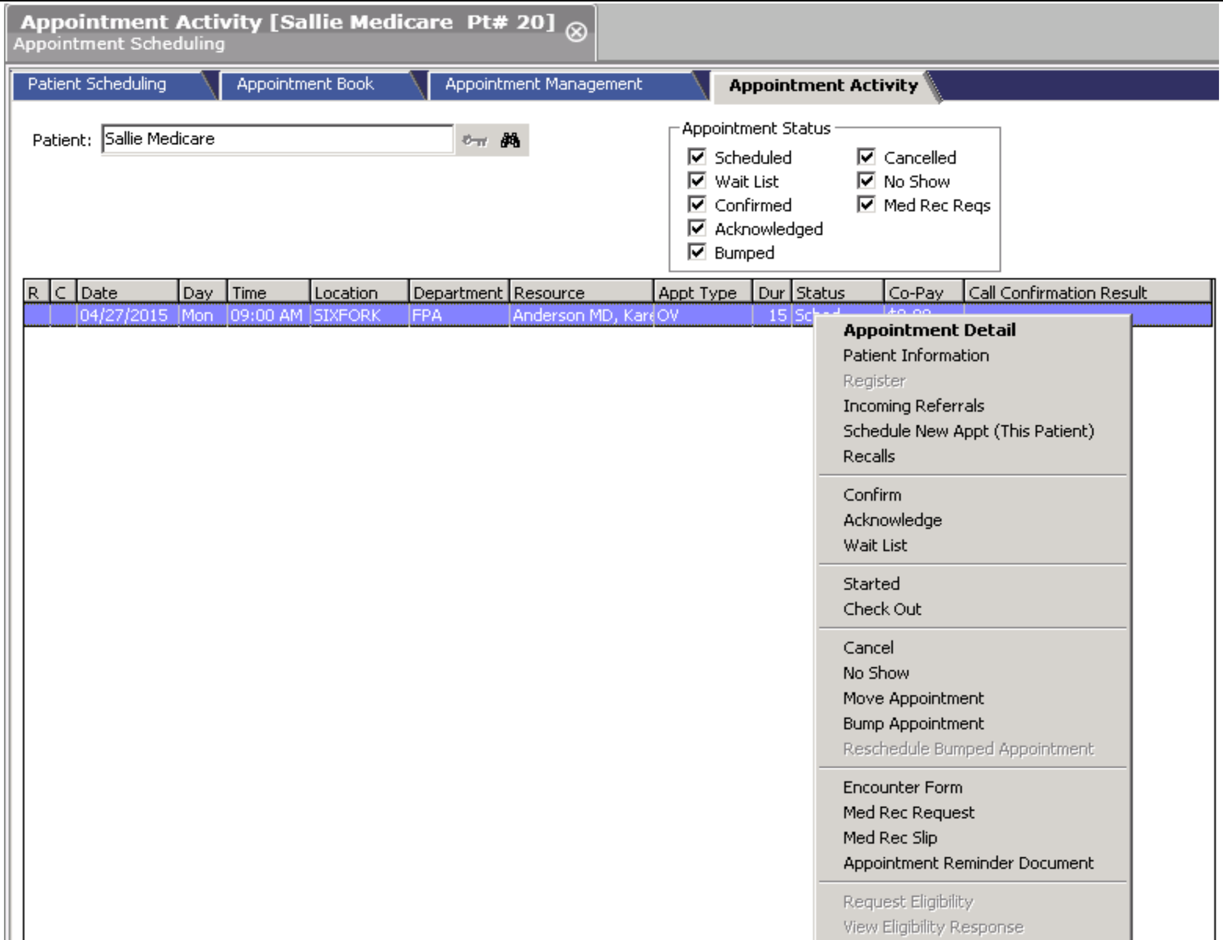
Appointment Activity Tab- R Click>Med Rec Slip

- Ability to print a Medical Records Slip.
- Click on Med Rec Slip and choose the correct printer.
- Click **OK.**

Appointment Activity Tab- R Click>Appointment Reminder Document

- Ability to print an Appointment reminder.
- Click on Appointment Reminder Document and choose the correct printer.
- Click **OK.**

3-22 Appointment Activity Tab-Request Eligibility/View Eligibility Response



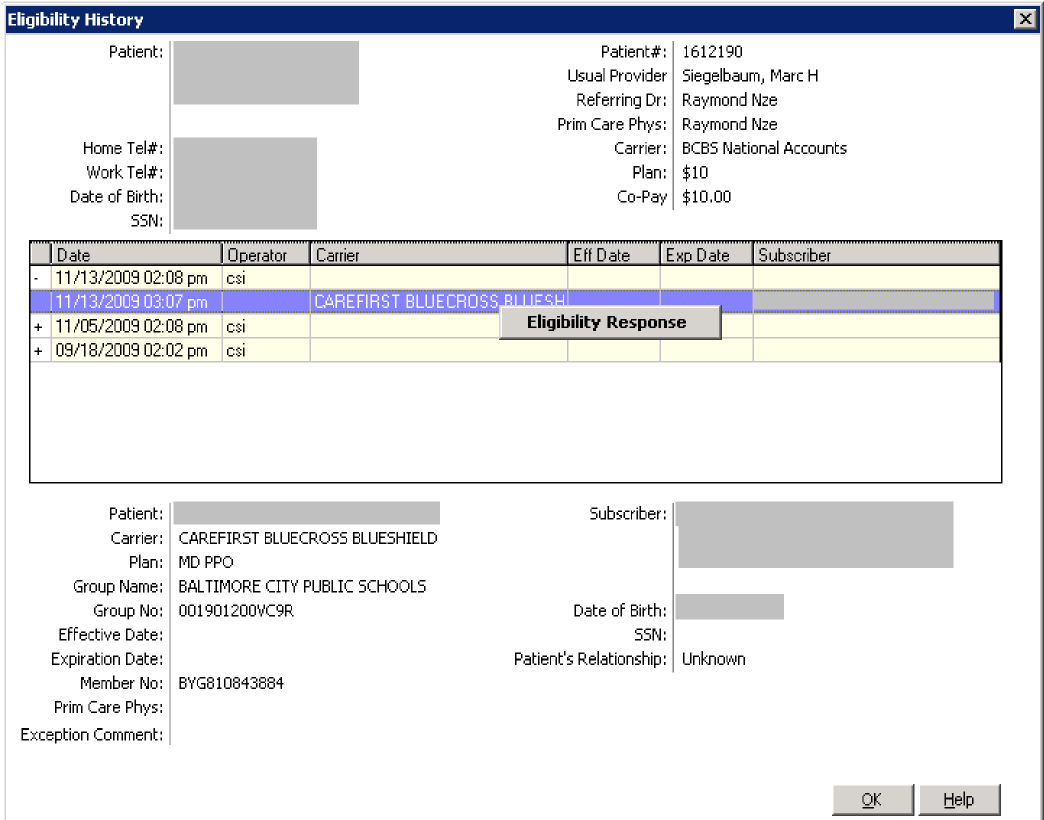
Appointment Activity Tab- R Click>Request Eligibility

- Ability to do a demand Eligibility request
- System displays screen showing request has been sent
- Click **Save to close.**

Appointment Activity Tab- View Eligibility Request

- Ability to view the Eligibility Response
- Click on response, then R click to View Eligibility
- Click **OK to close.**

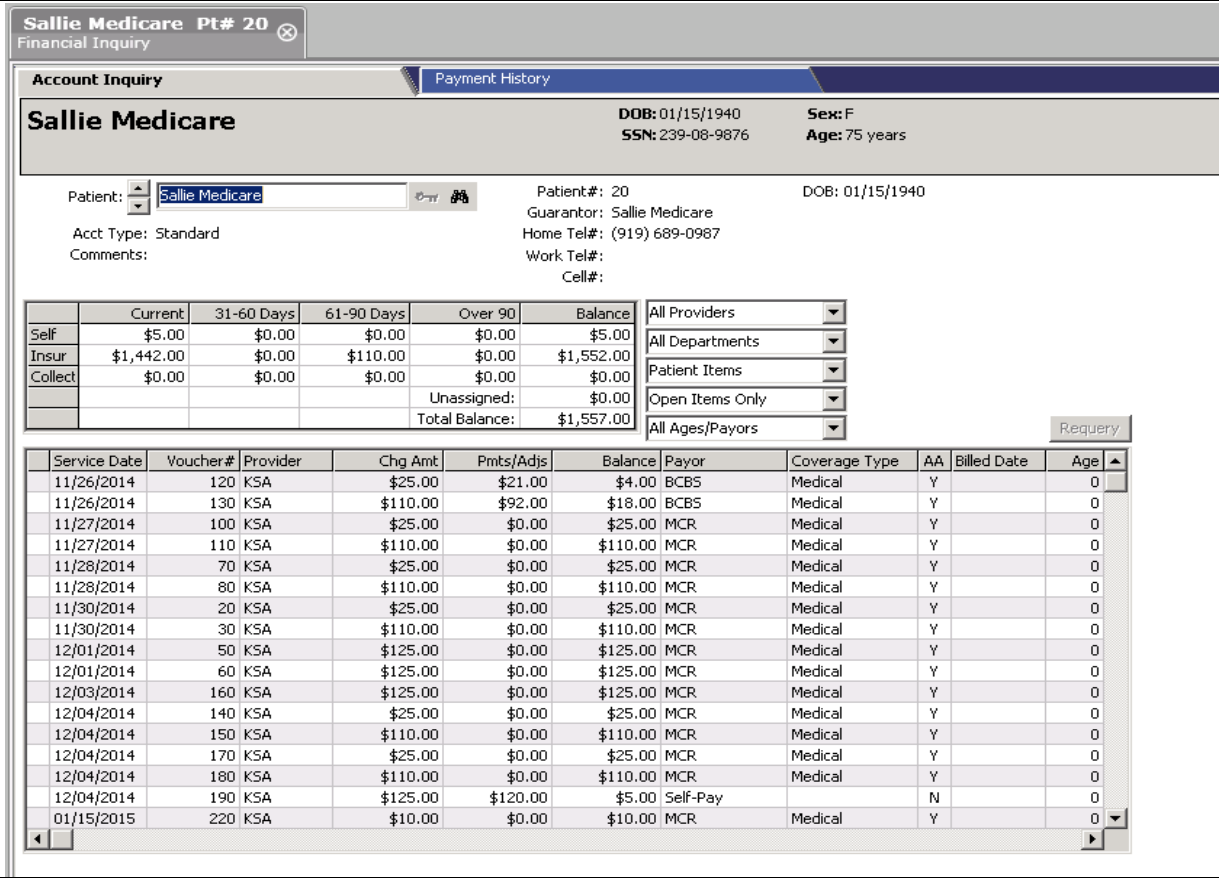
Appointment Activity Tab R Click>View Eligibility Response



Appointment Activities- View Eligibility Responses /Eligibility History Dialog	
• The **Eligibility History Dialog** is accessible from the R click option in **Appointment Scheduling** • The **Eligibility** request/response options only appears when an Active 271 Eligibility Response IB Format exists in the Allscripts Interface Engine. • If there is not an exception on the response line, you can right-click the response line and select **Eligibility Response** to print, preview, or export the **Eligibility Response** for the patient which may contain their benefit information.	• If a Response has been received for a Request, the first column in the grid displays a "+" which indicates that a Response exists and that Response line is hidden. • To view the Response row, click the "+" at which point it becomes a "-" and the Response line now displays below the Request to which it corresponds • Eligibility Responses are accessed through the **Eligibility History Dialog** by right clicking on the Response Line then clicking on **Eligibility Response**. • The information available in an eligibility response depends largely on the information that the carrier sends back in the file. • Eligibility Responses can be Printed, Previewed, or Exported

Section 2 - Financial Inquiry:

4-1 Financial Processing>Financial Inquiry Overview



Sallie Medicare Pt# 20
Financial Inquiry

Account Inquiry | Payment History

Sallie Medicare

DOB: 01/15/1940 Sex: F
SSN: 239-08-9876 Age: 75 years

Patient: Sallie Medicare
Acct Type: Standard
Comments:

Patient#: 20 DOB: 01/15/1940
Guarantor: Sallie Medicare
Home Tel#: (919) 689-0987
Work Tel#:
Cell#:

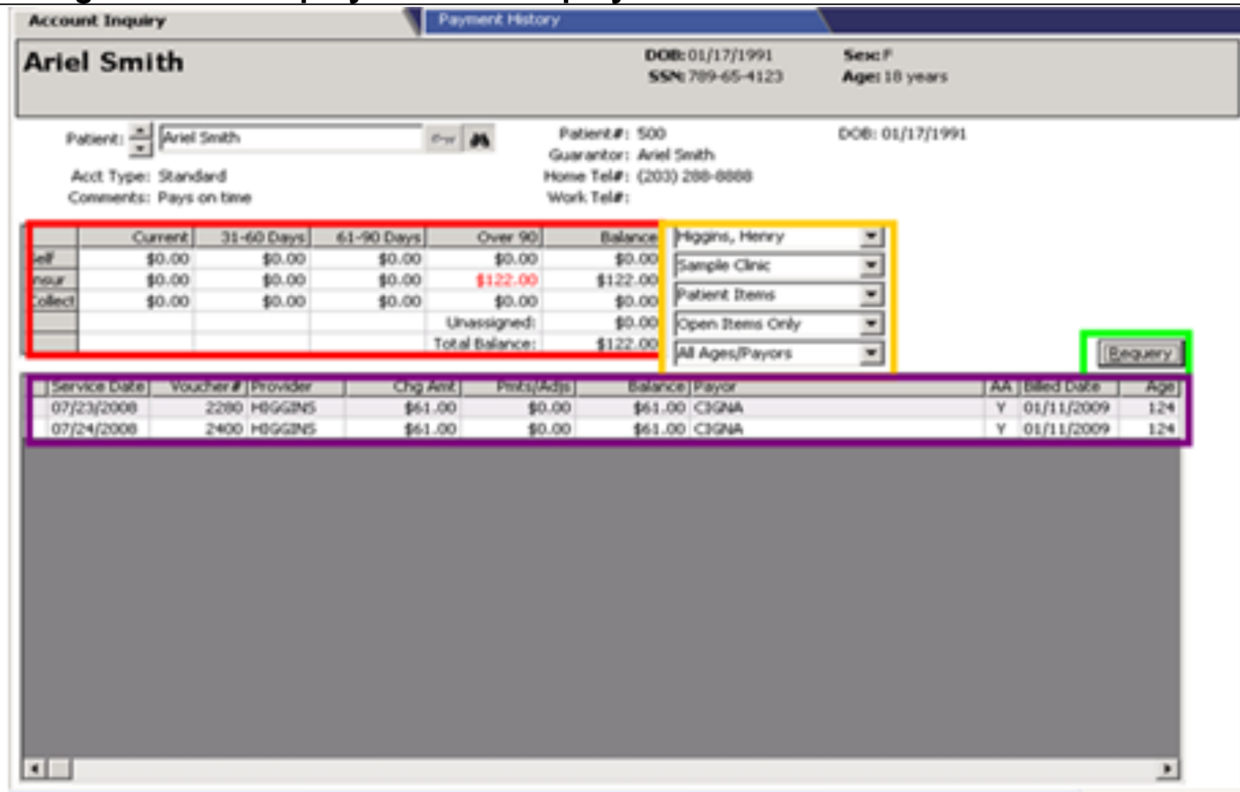
	Current	31-60 Days	61-90 Days	Over 90	Balance
Self	$5.00	$0.00	$0.00	$0.00	$5.00
Insur	$1,442.00	$0.00	$110.00	$0.00	$1,552.00
Collect	$0.00	$0.00	$0.00	$0.00	$0.00
				Unassigned:	$0.00
				Total Balance:	$1,557.00

All Providers
All Departments
Patient Items
Open Items Only
All Ages/Payors
Requery

Service Date	Voucher#	Provider	Chg Amt	Pmts/Adjs	Balance	Payor	Coverage Type	AA	Billed Date	Age
11/26/2014	120	KSA	$25.00	$21.00	$4.00	BCBS	Medical	Y		0
11/26/2014	130	KSA	$110.00	$92.00	$18.00	BCBS	Medical	Y		0
11/27/2014	100	KSA	$25.00	$0.00	$25.00	MCR	Medical	Y		0
11/27/2014	110	KSA	$110.00	$0.00	$110.00	MCR	Medical	Y		0
11/28/2014	70	KSA	$25.00	$0.00	$25.00	MCR	Medical	Y		0
11/28/2014	80	KSA	$110.00	$0.00	$110.00	MCR	Medical	Y		0
11/30/2014	20	KSA	$25.00	$0.00	$25.00	MCR	Medical	Y		0
11/30/2014	30	KSA	$110.00	$0.00	$110.00	MCR	Medical	Y		0
12/01/2014	50	KSA	$125.00	$0.00	$125.00	MCR	Medical	Y		0
12/01/2014	60	KSA	$125.00	$0.00	$125.00	MCR	Medical	Y		0
12/03/2014	160	KSA	$125.00	$0.00	$125.00	MCR	Medical	Y		0
12/04/2014	140	KSA	$25.00	$0.00	$25.00	MCR	Medical	Y		0
12/04/2014	150	KSA	$110.00	$0.00	$110.00	MCR	Medical	Y		0
12/04/2014	170	KSA	$25.00	$0.00	$25.00	MCR	Medical	Y		0
12/04/2014	180	KSA	$110.00	$0.00	$110.00	MCR	Medical	Y		0
12/04/2014	190	KSA	$125.00	$120.00	$5.00	Self-Pay		N		0
01/15/2015	220	KSA	$10.00	$0.00	$10.00	MCR	Medical	Y		0

Financial Inquiry	Notes, Policies and Procedures
• Account Inquiry is a tool intended to provide you with quick access to a Patient or Guarantor's financial information. • From the Navigation Pane click on **Financial Processing** > then click on **Financial Inquiry** folder or **(F9 + FIN)**. • Provides information on a patient's account balance on the **Account Inquiry** Tab. • Provides a history of the patient's payments on the **Payment History** Tab. • The buckets that display can be determined by the client, 90 days and older display in Red. • There is no ability to see just credit or overpaid items- credits will display in open item view.	To view voided vouchers or vouchers with voided transactions you must select the Query filter option "Void, Paid, Open Items." Right click menu items are available from the voucher grid. **TIP!** Like any Windows grid you can change the order of the display by clicking the column title. For example, to show vouchers in ascending order by charge amount click the column title "Chg Amt." Click the column title again to order the display by charge amount from highest to lowest charge amount. The default view is to list the vouchers by service date from the earliest to the most recent.

4-2 Financial Processing>Financial Inquiry>Account Inquiry Tab



Financial Inquiry Account Inquiry Tab

- Choose the way you would like to **search for your patient** by clicking on the spin box to the right of Patient prompt. Options are Patient, Guarantor, Claim, Voucher, Invoice or Reference. (*typically you will choose Patient when looking up a patient balance)*
- In the **aging grid** in the far right column the balance for **Self**, **Insurance** and **Collection** display in defined aging buckets. In that grid on the last line on the left side the **Unassigned** and **Total Balance** is available for quick review. (Area in red on picture)
- You can also constrain to see a specific details of a patient's accounts by utilizing the query filter options on the right side of the grid (area in yellow), these will allow you to see only the balances for the constraints chosen > once you choose your constraints click the
- The grid (area in purple) on the bottom ½ of the screen displays the details of the items from the constraints (it defaults to display only the Open items, for all Providers and Departments, All Ages/Payors).

Notes, Policies and Procedures

Requery button (area in green) on the right.

Financial Inquiry Account Inquiry Tab

Understanding the Aging Grid- The aging grid populates detail by aging bracket and total balance related to the Patient or Account's open items.

- **Self** - includes balances for open item Self-Pay vouchers (Credit Balances display between parentheses.)
- **Insur** - includes balances for open item insurance vouchers regardless of the setting of the accept assignment flag on the voucher. Excluded from these totals are insurance vouchers out to a Carrier flagged as a Collection Agency. (Credit Balances display between parentheses.)
- **Collect** - includes the balances for open item insurance vouchers out to a Carrier flagged as a Collection Agency.
- **Co-Ins Due** - displays the total for co-pay amounts due on insurance vouchers when the **Uncollected Co-Pay** button is used on the Self-Pay dialog in Charge Entry or A Co-Pay amount is entered without entering a payment amount in the Co-Pay dialog on the Edits tab.
- **Unassigned** - unassigned amount that is associated with the Patient or Guarantor (is considered a credit and is displayed within parentheses).
- **Total Balance** - equal to the sum of the balances for Self Pay, Insurance and Collection minus the Unassigned amount.

TIP! Click a row heading to display select vouchers in the grid. For example, to display only Self-Pay vouchers click **Self.**

Setting Query Filters- One of the ways you can control which vouchers load into the voucher lines grid is by setting query filters. The grid containing the query option combo boxes is located to the right of the Aging Grid.

- Use the drop down to constrain on All Ages/Payors, Over 30 days, Over 60 days, Over 90 days, Self Pay Items, Insurance Items, Collection Items.

Note: Always click on the **Requery** command button after making selections.

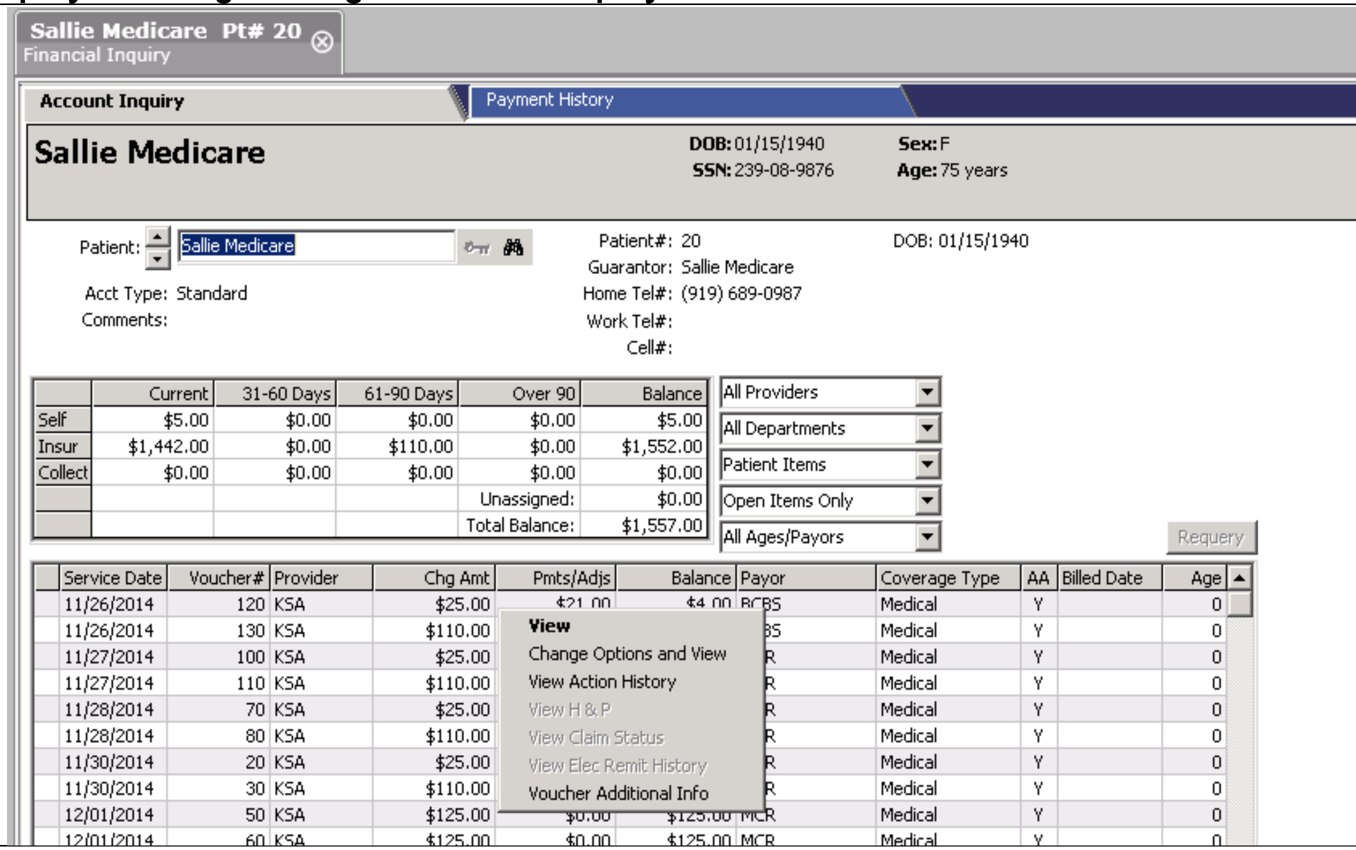
Understanding the Voucher Lines- The voucher lines grid used in Account Inquiry holds the results of a query or requery.

- The first column in the transaction grid may display a voucher flag. A yellow flag indicates Not updated, A green flag indicates Updated Charges with payments not updated, a red flag indicates a voided voucher, a purple flag indicates a voided transaction
- Each line contains the following detail: Voucher Status flag, Service Date, Voucher # ,Patient (when detail is loaded by Guarantor), Provider, Chg Amt, Pmts,/Adjs, Balance, Payor (Current Remittor), Payor (Current Remittor), AA (Current Accept Assignment Flag setting on voucher, Billed Date (most recent),Age (of the balance due), Statement Message, Claim Message, Patient, Location, Department, Place of Svc, Referring Dr, Batch #, Voucher Status, Date Updated, Responsible Party, Co-Ins Amt, Co-pay paid, Claim # ("0" means the voucher has not yet been billed), Bill Media (current), Billing Prov, Local Use Text, Original Voucher/Payor/ Bill Date/Billing Media and Invoice # - For Occupational Medicine Services.
- To view the detail in the columns to the right you must use the horizontal scroll bar.

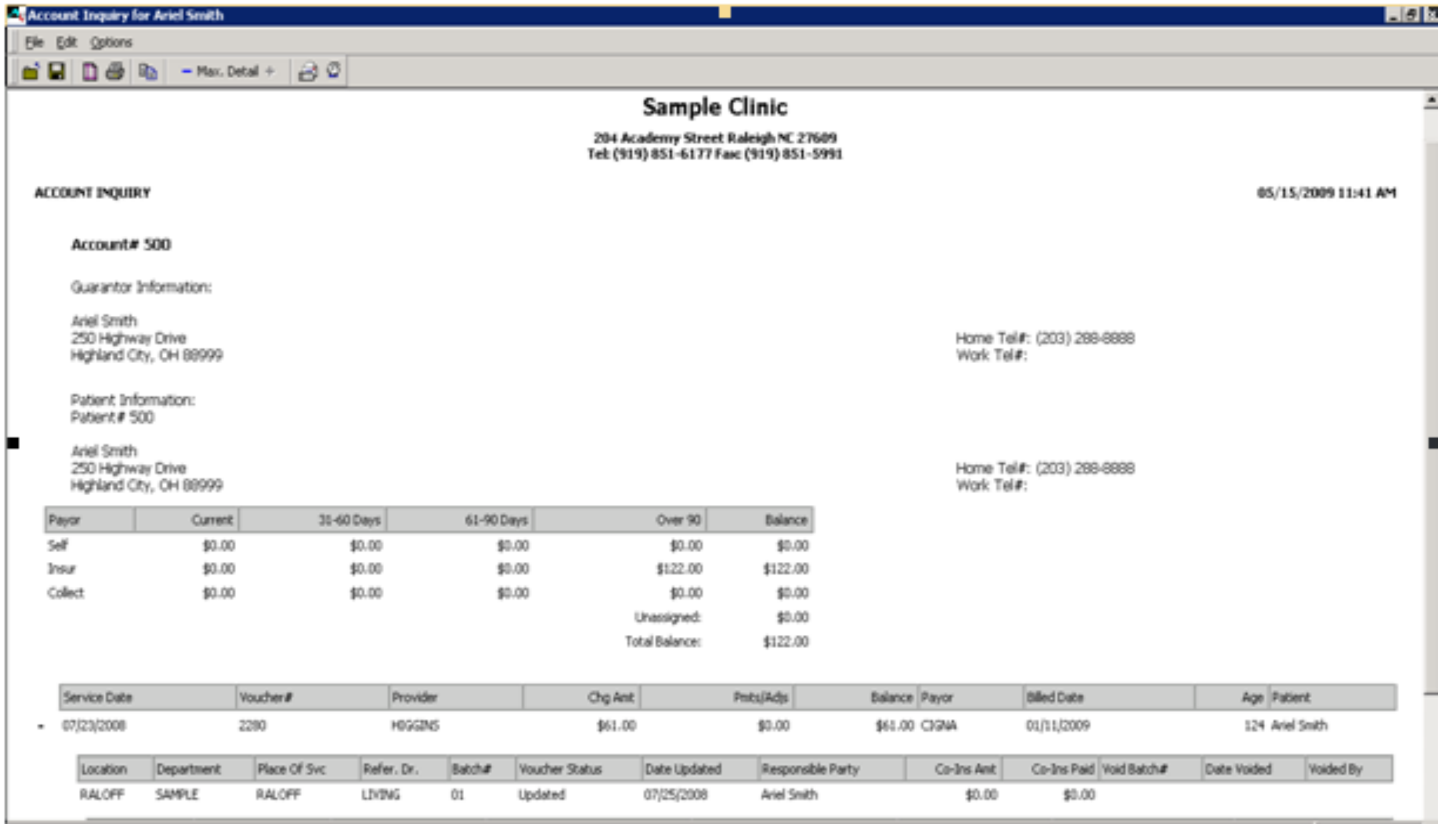
Right Click Menu Options

• The screen opens preloaded with the Patient or Guarantor items displaying. By default, vouchers are loaded with all Providers and Departments, Patient Items (or Account items in Collections/Guarantor chosen), Open Items Only and All Ages/Payors. • Use the drop down arrow to display a listing and choose from the listing to constrain on Providers/Departments. • Use the drop down arrow to display Open Items Only/Paid & Open Items/Void, Paid, Open Items.	• **View-** To view the detail of a voucher • **Change Options and View-** To set criteria and view voucher detail • **View Claim Status**- Available only when the claim has been given a Claim Status Category Code or Claims Status Code • **View Elec Remit History**- Only enabled when the selected claim has electronic remittance records that were processed into a batch within Allscripts PM. The option is available as soon as the electronic remit payments are processed into a batch.

4-3 Financial Inquiry> Viewing/Printing an Account Inquiry



Financial Inquiry Viewing/Printing an Account Inquiry	Notes, Policies and Procedures
• From within the **Account Inquiry** screen **right click** on the item that you would like to print the detail for, then click **View.** This will launch you into a viewable screen of the Account Inquiry From within the view screen you can choose how much detail for an item you would like to see. • **NOTE:** To ***select multiple items***, click each item with your **CTRL** key held down while **clicking** with your mouse each item. If you would like to see all items, click the first item and ***drag your mouse*** to the end of the items list. • Ability to view custom voucher additional information.	
4-4 Financial Inquiry>Viewing/Printing an Account Inquiry- Detail View	

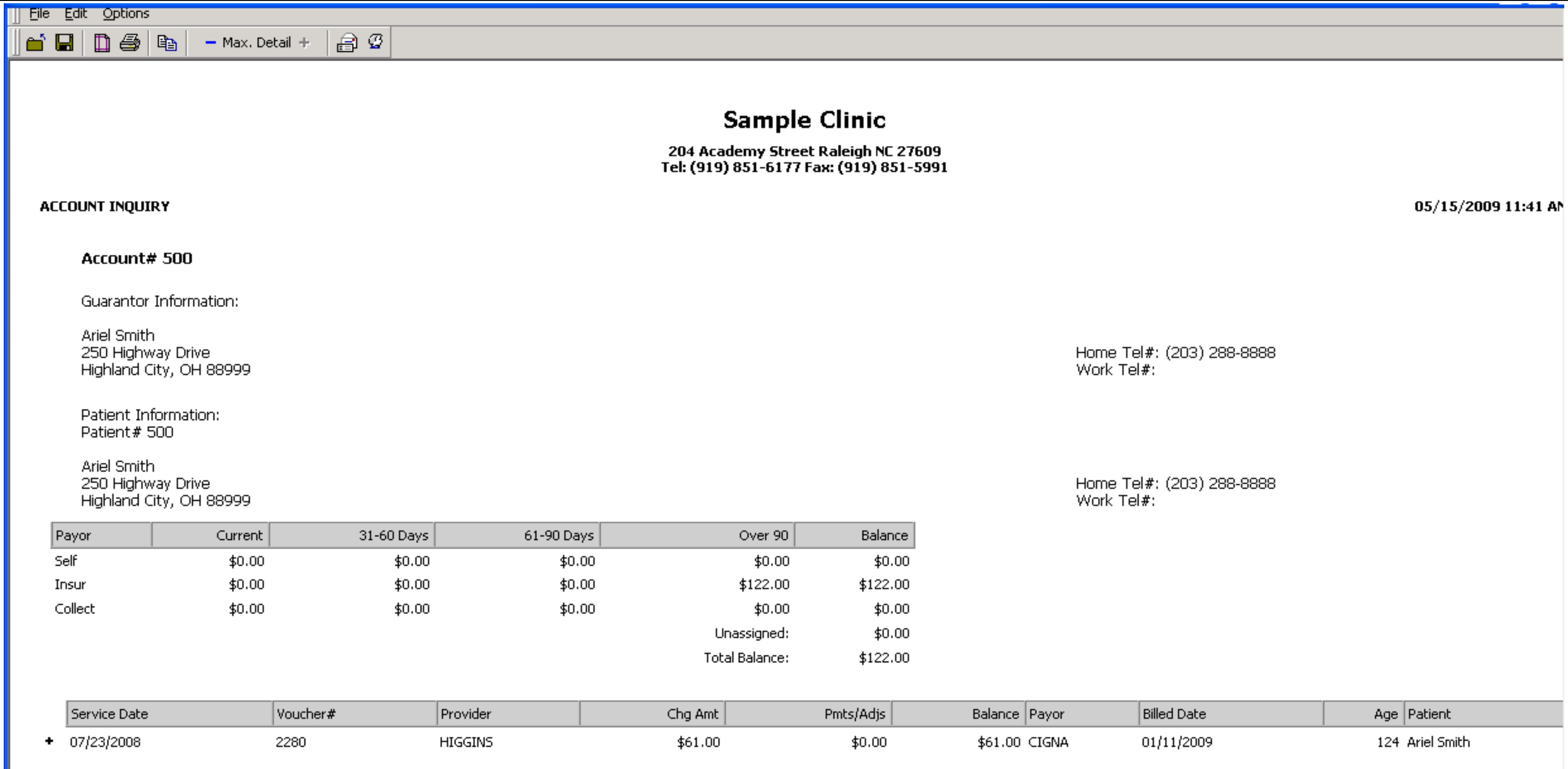


Financial Inquiry Viewing/Printing an Account Inquiry-Detail View

- To choose an **overview** of a specific voucher click on the **negative line** to the left of the Service Date field of each voucher.
- You can print the Account Inquiry from within this screen.

Notes, Policies and Procedures

4-5 Financial Inquiry Viewing/Printing an Account Inquiry- Summary View



Payor	Current	31-60 Days	61-90 Days	Over 90	Balance
Self	$0.00	$0.00	$0.00	$0.00	$0.00
Insur	$0.00	$0.00	$0.00	$122.00	$122.00
Collect	$0.00	$0.00	$0.00	$0.00	$0.00
				Unassigned:	$0.00
				Total Balance:	$122.00

	Service Date	Voucher#	Provider	Chg Amt	Pmts/Adjs	Balance	Payor	Billed Date	Age	Patient
+	07/23/2008	2280	HIGGINS	$61.00	$0.00	$61.00	CIGNA	01/11/2009	124	Ariel Smith

Financial Inquiry Viewing/Printing an Account Inquiry- Summary View

- To get the detail view back, click on the “+” symbol.
- You can print the Account Inquiry from within this display

Notes, Policies and Procedures

Section 5 - Appendix:

5-1 Overview- Keyboard shortcuts

Standard Keys across the database

Tab- to move and accept
Shift/Tab- to move backward
Home key- Moves cursor to the beginning of the field
End key- Moves cursor to the end of the field
Enter key- to accept a function or choice if cursor is focused

F1- Help or icon on Toolbar
F4- at any down arrows to see the available choices from a listing (except within Additional tab in Registration)
Alt/F4- Log out prompt from a main function, closes a companion window
Ctrl/F4- Closes a window
F9- Displays current patient and Last 5 patients (if use drop down arrow/F4)
F9- Displays list of Navigation Tree Functions
Space Bar- use as a toggle to check/uncheck a box
Alt/Underlined letter- to bring various tabs/functions into focus or perform command button functions.

Keyboard Shortcuts

Ctrl+Shift- Move from an open window to another open window (displayed as tabs)
Enter- Save if command button is highlighted.
Ctrl+Tab- Within a function, moves to another tab within the same function/window
F3- Inserts today's date in a date field.
Delete- Delete selected text
Ctrl+Z Undo
Ctrl+C Copy
Ctrl+V Paste
Ctrl/Tab while in Navigational pane, moves within functions

In Registration- to access any tab within the function, Alt/Underlined letter
Alt/u=Summary tab
Alt/p=Patient tab
Alt/o=Account tab
Alt/l=Policy tab

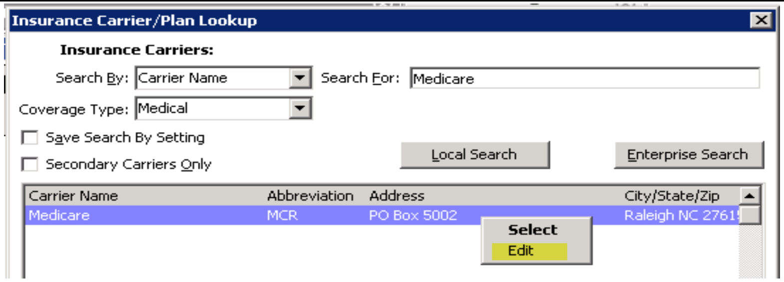
Standard ICONS across the database:

Binoculars- perform a search -ALT/down arrow from keyboard
Magic Wand- Allows you to "Build something" new or Enter something - Insert key from keyboard
Key- numeric information (tab) To find a patient you can enter the patient number and tab to bring patient into focus (key functionality).
Red X- deletes and entry - Delete key from keyboard
Down Arrow- Alt down/arrow (or F4 at most prompts)
Spin Boxes- Ctrl/down arrow

Most common Quick Access Codes (F9+code)

Patient Management	**Scheduling**
REG- Registration	**APS-** Appointment Scheduling
NOT- Notes	**DAA-** Scheduling Activities
DOC- Documents	**SCR-** Scheduling Reports
SIN- Service Inquiry	**REF-** Referrals
Financial Processing	
Fin- Financial Inquiry	**SPR-** Statement Processing
TRA- Transactions	**IBI-** Insurance Billing
CRE- Claims Review	**FPO-** Financial Processing
AUT- Automatic Transactions (Import charges)	

Within the **Registration>Policy Tab** after user searches for a carrier, you can R click on the carrier in the grid and go directly to the Insurance Carrier Maintenance (ICM) file (assuming you have access to master files).

Alt/d=Additional tab **Atl/t=** History tab	

5-2 Overview Standard Allscripts PM Icons and Command Buttons

Icon	Function
	Find by Key
	Search
	Add New <name of record> or New
	Delete
	Memo Appointment
	Potential Patient
	Dialog

OK	Click to bring the highlighted choice into focus in a scan screen.
Cancel	Click Cancel to cancel previously started changes.
Save	Click Save to save any changes.
New	Click New to create a new record in file build.
Delete	Click Delete to delete a record in file build.
First	Click First to bring up the first record into focus within a file.
Previous	Click Previous to bring up the previous record into focus within a file
Next	Click Next to bring up the next record into focus within a file
Last	Click Last to bring up the last record into focus within a file

Overview- Standard function icons

- On some screens you will notice Icons or Command Buttons.
- If the icon or command button is grayed, it means that this option is not available.
- To execute the function you can click on the icon or command button.
- When you hold (hover) the mouse arrow over an icon a bubble help will display.
- On many Allscripts PM screens you will be able to access a right click menu. To display the menu, right click on your mouse.
- The word or words in bold denote the key or keys you can use to execute the function.
- Above are tables of some of the standard icons and command buttons used along with their productivity keys.

5-3 Overview Checking the application Version

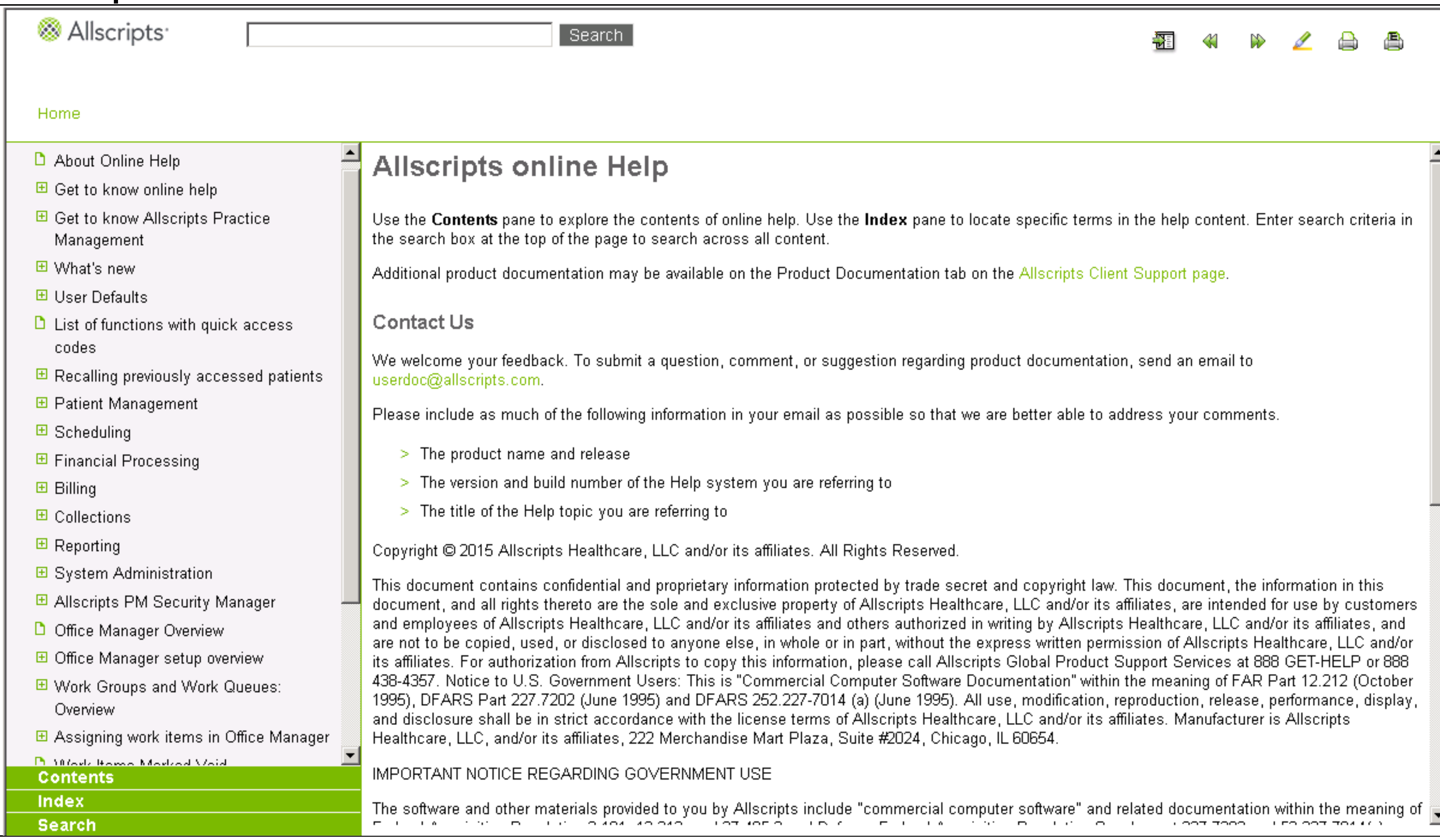
Overview- Checking the Application Version

- Click on the About Allscripts Help option on the icon toolbar.
- The screen will display the Allscripts PM version with copyright information.
- Only place where you can tell who is logged into the terminal.
- Click OK to exit the information display screen.

Notes, Policies and Procedures

This screen will also allow you to see who is logged into the terminal.

5-4 Overview Help



Overview- Viewing Help

- Click on the Question Mark on the Tool bar OR Press **F1** to access Allscripts Help.
- Enter search information and click on **Search**. Matching help will display in the window.
- Use the arrow icons to move back or forward between screens of searched information or TOC topics.

- Use the Printer icon to print a topic.
- Use the Print All icon to print all of help
- Under the TOC- Click on Useful Websites and Links to gain access to COBA link, CMS Home Page, NPI website.
- Use **Home** to return to the main screen.
- To Exit the Help screen, click on the **X** in the top R corner, or **File>Exit.**