



La ClínicaSM

a california *health*⁺ center

DRAFT

Registration Manual

DRAFT

Proposal: More required information – i.e.,
more hard stops...

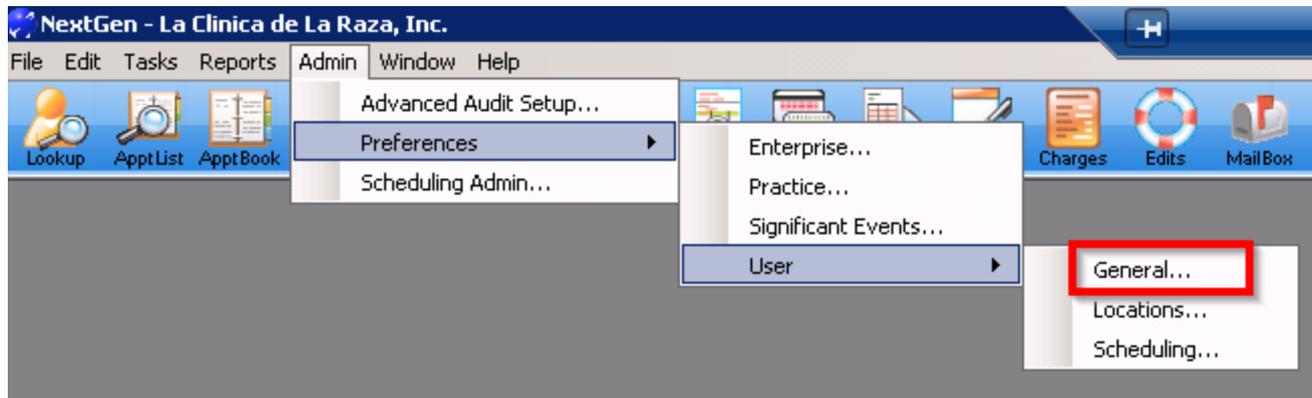
Staff Equipment & Access Needed

- PC & assigned Scanner – full size for Registration HSS; also recommend full size for each Front Desk COA
 - Full size works for documents and cards (IDs, photos, insurance cards)
 - Card size works only for IDs, photos, insurance cards. Note: if front desk scans documents, will need full size – have to have room at each workstation.
- Scanners can be finicky, jam sometimes, must be individually assigned to PCs to work properly.
- Copier – need access to a copier (for example, for cards in case scanner jams)
- **Signature pads – recommending several forms for e-signature**
- Logon (not shared) for websites: CalWin; One-E-App (CMSP by county); MediCal; CHCN (Community Health Center Network); MediCal managed care plan websites (specific to county)
- How much privacy? Group agrees privacy is needed, even for FPACT; no consensus how much is needed.

Setting Up User Preferences

Batches, Printers, Locations

Click Admin -> Preferences -> User -> General



Setting Up User Preferences -- Batches

User Preferences

General | Chart | Printing | Lookup Limits | Advisor | Tasks | Doc Mgmt | AutoFlow | Payment Processing

Activated upon Logon

- Prompt for session settings
- Suspend PM/EMR application sync

Main Toolbar Options

- Toolbar captions
- Toolbar tooltips

Toolbar Color: Blue

Mail Options

- Logon to Outlook Mail at startup

Default: NextGen Outlook

Batch Posting Default Options

- Only show batches secured to me
- Place the active batch first in the list
- Reduce EOB with single rectangle

Lookup Options

Start location for cursor on chart/patient lookup: Last Name

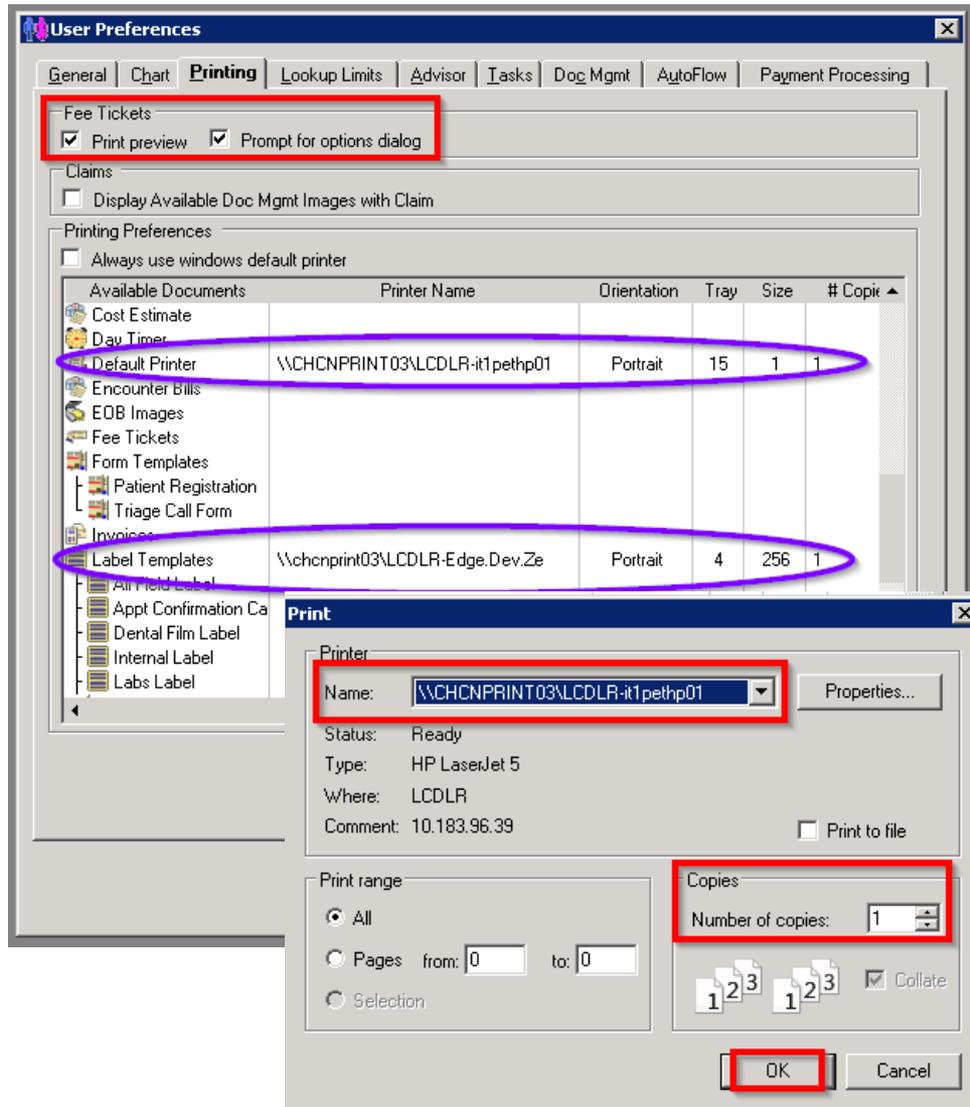
- Use phonetic search
- Do not refresh searchlist after updating
- Limit Charge Entry diagnosis search ahead to selected category

OK Cancel

If you will be taking payments, from the **General** tab:

- Check-on Prompt for session settings,
- Check-on Toolbar captions,
- Check-on Toolbar tooltips,
- Check-on Only show batches secured to me,
- Check-on Place the active batch first in the list.

Setting Up User Preferences -- Printers



From the **Printing** tab:

- Check-on Print Preview
- Check-on, Prompt for options dialog

Set **Default Printer & Labels**:

- Right click on Default Printer or Label Templates
- Select Open
- Select the desired printer.

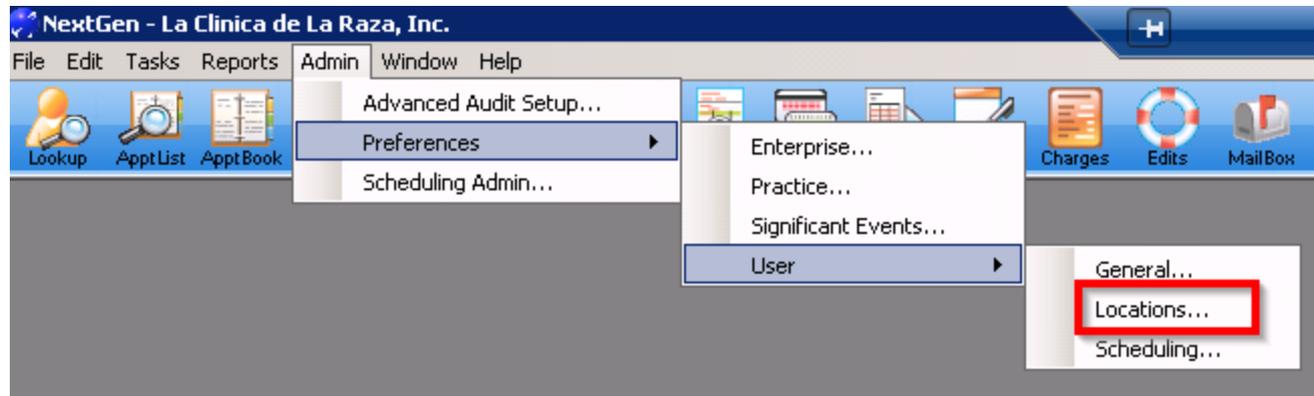
Note: Printer ending in "ze" are for label printing only. Printer ending in "hp" are for letter size documents.

- Set number of copies
- Click OK

Setting Up User Preferences - Locations

Set your preferred locations:

Click Admin -> Preferences -> User -> Locations



Scroll down until you find your location

Check-on the location(s) you desire

Highlight the location and click on the double blue arrow pointing up so that the location highlighted is at the top of the list

Click OK

Patient Information

Needed to Register as New Patient

- Current personal identification (government issued, with photo)
- Proof of address (can be driver's license, vehicle registration, utility bill, etc.)
- Birth certificates for minor children – to ensure that kids “belong” to person registering, & to establish family unit if couple is unmarried.
- Marriage certificate (helpful if no birth certificates).
- Income information – taxes, paystubs, self-attestation
- Insurance cards

Minimal Registration

Create a “Globe” in NextGen

The screenshot displays the NextGen software interface for 'La Clinica de La Raza, Inc.'. The top menu bar includes File, Edit, Tasks, Reports, Admin, Window, and Help. A toolbar below the menu contains various icons, with the 'People Lookup' icon circled in red. Below the toolbar, a status bar shows 'Scheduler Book: Monday, May 13, 2019'. The main window is titled 'People Lookup' and contains search criteria fields for Last, First / Nickname, Middle, Previous Last, City, Address Line 1, Zip, and Mother's Maiden Name. It also includes fields for Social Security, Birth Date, Sex, Home Phone, and Policy Nbr. The 'View By' dropdown is set to 'All Patients', and the 'Exclude Expired Patients' checkbox is checked. The 'New' button is circled in red. Below the 'People Lookup' window is the 'Add Person Information' window, which has fields for Last, First, Middle, Previous Last, and Nickname. The 'Birth Date' field is highlighted in red and contains '01/01/1985', and the 'Sex' dropdown is set to 'Femal'.

- Click on People Lookup on the far left of tool bar (circled);
- Enter Search Criteria – last name, first name, birth date (DOB) -- to see if patient already exists, to avoid duplicate records;
- Patient names and DOBs can be slightly different than on patient IDs or by patient report – check twice!
- If patient does not exist, click New (circled) and create a globe by typing last name, first name, DOB and patient sex.
- Best practice to enter phone number as well, especially if using “globe” to make a registration or medical appt.

Registration

Create a “Chart” in NextGen

The screenshot displays the NextGen registration interface. At the top, there is a 'Search Criteria' section with fields for Last, First / Nickname, Middle, Previous Last, City, Address Line 1, Zip, and Mother's Maiden Name. Below this are fields for Social Security, Birth Date, Sex, Home Phone, Search By, Med Rec Nbr, Policy Nbr, and Enc Nbr. There are also 'View By' and 'External System' dropdowns, an 'External ID' field, and a checkbox for 'Exclude Expired Patients'. A 'Birth Date' field with a calendar icon and an 'L4DSSN' field are also present. At the bottom of the search section are 'Clear', 'Find', and 'New' buttons. The 'New' button is circled in red. Below the search section is the 'Add Patient Information' window, which has a blue header and a close button. It contains fields for Last, First, Middle, Previous Last, and Nickname. Below these are fields for SSN, Birth Date, Age, and Sex. The window is divided into several tabs: Demographics, Status, Client Defined, Privacy, Employer, Relations/Role, UDS, and Ext. The Demographics tab is active and contains fields for Street, Billing Address, Address Type, City, State, Zip, Country, County, Community Cd, Pref Language, Religion, Church, Contact Preference, Marital Status, Student Status, Veteran, Smoker, Expired, Expired Date, Int'l Hm Phn, Int'l Wk Phn, Int'l Zip, Primary Care Provider, and Primary Dental Provider. At the bottom of the Demographics tab are fields for Phone/Email & Notifications, including a table with columns for Telephone Number / E-Mail, Comment, and Notifications. The table has 6 rows for Home Phone, Day Phone, Alternate Phone, Secondary Hm Phone, E-Mail, and Cell Phone. At the bottom of the window are 'Insurance', 'Account', 'Chart', 'OK', and 'Cancel' buttons.

- Enter Search Criteria – last name, first name, birth date (DOB) -- to see if patient already exists, to avoid duplicate records;
- Patient names and DOBs can be slightly different than on patient IDs or by patient report – check twice!
- If patient does not exist in system, click New (circled);
- Create a chart by entering all information in red;
- Can also pull up existing patient globe; system will prompt to enter additional information, including head of household in UDS tab.
- Choose New to select other registered patient as head of household or choose Self;
- Immediately click “Chart” in UDS tab to create Chart.

Demographics

To make changes to existing patient chart:

NextGen - La Clinica de La Raza, Inc.

File Edit Tasks Reports Admin Window Help

LifeMap ApplList AppBook Chart Accounts Encounter Posting Claims Bill SMSZ Letters Charges Edit MailBox Worklog EDI File Reports EHR Doc Mgmt Dashboard Practice

Patient Chart - LCDLR, ROSA

LCDLR, ROSA Medical Record Person Number 389508 318316

Patient Information Financial Clinical History/Notes Encounters

Name: LCDLR, ROSA
Address: 123 SBOR
City: VA
Country: US
SS Number: 000-00-0000
Birth Date: 05/23/1923
Age: 83 yrs
Sex: Female
Race: American
Ethnicity: Not Hispanic or Latino
Religion:
Employer:
Primary Care Phys:
Primary Dental Phys:
Pref Language: English
Church:
Occupation:
Telephone & E-Mail:
Home Phone: (415) 978-9012
Day Phone: (707) 645-7316
Alt Phone:
Sec Hm Phone:
E-Mail:
Cell Phone:
Contact Pref: SS CELL OK
Comments: OK TO LVM

UDS
Homeless Status: No
Migrant Worker Status: No
Language Barrier: No
Primary Medical Coverage: March Vision
Public Housing Pri Care: No
School Based Hlth Center: No
Tribal Affiliation:
Blood Quantum:
Veteran Status: No

IHS Eligibility:
Classification:
Patient:
Patient Status:
Client:
HealthFac Rx Lopy: \$
Advance Directive G... Yes

Patient's Picture

- Scan patient ID photo
- Make sure image is clear!
- Rescan if needed

Demographics Relationship Contact/Guar Chart Details Case Management

Ready NGProd PBARRON (48) Version 5.8.2.74 05/08/19 11:49 AM

Demographics

Demographics

Add Patient Information

Last: Gonzalez, First: Maria, Middle: J, Previous Last: , Nickname:

SSN: 000-00-0000, Birth Date: 01/01/2001, Age: 18 yrs., Sex:

Demograph | Status | Client Def... | Privacy | Employer | Relations/Role | U... | Ext | History

Street Billing Address Address Type Street Secondary Address Address Type

City **State** **Zip** City State Zip

Country County Community Cd Country County Mother's Maiden Name

Pref Language Religion Church **Contact Preference**

Marital Status Student Status Veteran Expired Date Int'l Hm Phn Int'l Wk Phn Int'l Zip

Smoker Expired

Primary Care Provider Primary Dental Provider

Phone/Email & Notifications

Notifications: Opt out SMS (Text)

	Telephone Number / E-Mail	Comment	Notifications
1. Home Phone	(510) 555-6666		
2. Day Phone	() - Ext		
3. Alternate Phone	() - Ext		
4. Secondary Hm Phone	() -		
5. E-Mail			
6. Cell Phone	() -		

Generate System Alert

Insurance Account Chart OK Cancel

- Fill out last name(s) exactly as listed on ID & insurance card;
- Fill out first & middle name(s) exactly as listed on ID & insurance card;
- First and last names **must** match patient's insurance information. **Adjust** as needed.
- Ask for SSN ; use 000-00-0000 if patient does not have one.
- Enter DOB exactly as listed on ID & insurance card. DOB **must** match patient's insurance information. **Adjust** as needed.
- Enter sex at birth: current options are M / F / Undif / Unknown

- Sex choices will change to: M (cis) / F (cis) / M (trans) / F (trans) / NB (non-binary)

Demographics

Demographics

Add Patient Information

Last: Gonzalez, First: Maria, Middle: J, Previous Last: , Nickname:

SSN: 000-00-0000, Birth Date: 01/01/2001, Age: 18 yrs., Sex:

Demograp | Status | Client Def... | Privacy | Employer | Relations/Role | U... | Ext | History

Street | Billing Address | Address Type | Street | Secondary Address | Address Type

City | **State** | **Zip** | City | State | Zip

Country | County | Community Cd | Country | County | Mother's Maiden Name

Pref Language | Religion | Church | **Contact Preference**

Marital Status | Student Status | Veteran | Expired Date | Int'l Hm Phn | Int'l Wk Phn | Int'l Zip

Smoker | Expired

Primary Care Provider | Primary Dental Provider

Phone/Email & Notifications

Notifications: Opt out SMS (Text)

	Telephone Number / E-Mail	Comment	Notifications
1. Home Phone	(510) 555-6666		
2. Day Phone	() - Ext		
3. Alternate Phone	() - Ext		
4. Secondary Hm Phone	() -		
5. E-Mail			
6. Cell Phone	() -		

Generate System Alert

Insurance | Account | Chart | OK | Cancel

- Fill out all address information;
- Select preferred language – as specific as possible;
- Select contact preference – best practice to use cell phone;
- Ask re: veteran status, select if applicable (also add veteran status in UDS tab);
- (Expired is used when patient has died; requires expired date, approx. date is OK);

Demographics

Demographics

The screenshot shows a software window titled "Add Patient Information" with a blue header bar. The form contains the following fields and sections:

- Personal Information:** Last (Gonzalez), First (Maria), Middle (J), Previous Last, Nickname, SSN (000-00-0000), Birth Date (01/01/2001), Age (18 yrs.), Sex.
- Demographic Tabs:** Demograp (selected), Status, Client Def..., Privacy, Employer, Relations/Role, U..., Ext, History.
- Address Fields:** Street, Billing Address, Address Type, Secondary Address, Address Type, City, State, Zip, Country, County, Community Cd, Mother's Maiden Name.
- Other Fields:** Pref Language, Religion, Church, Contact Preference, Marital Status, Student Status, Veteran, Smoker, Expired, Expired Date, Int'l Hm Phn, Int'l Wk Phn, Int'l Zip.
- Providers:** Primary Care Provider, Primary Dental Provider.
- Notifications:** Opt out, SMS (Text) (checked).
- Contact List:** A table with columns for Telephone Number / E-Mail, Comment, and Notifications. It includes Home Phone, Day Phone, Alternate Phone, Secondary Hm Phone, E-Mail, and Cell Phone.
- Buttons:** Insurance, Account, Chart, OK, Cancel.

- Best practice to choose primary care provider (PCP) at 1st registration – **require?**
- Best practice to obtain cell phone and select SMS (text);
- **Separate consent for SMS (text), or roll into consent document?**
- Complete all phone options; if home, day, cell are the same, copy and paste # in each;
- Enter e-mail address; or decline@decline.com; no NG patient portal, will have My Chart with Epic.
- Add any comments to right of numbers;
- Centralize emergency contacts with phone #s (**future request**)

Demographics

Patient Status

The screenshot shows a software window titled "Modify Patient Information" with a blue header bar. The window contains several input fields for patient information:

- Last: LCDLR
- First: ROSA
- Middle: (empty)
- Previous Last: (empty)
- Nickname: (empty)
- SSN: 000-00-0000
- Birth Date: 05/20/1935
- Age: 83 yrs.
- Sex: Female
- Medical Record: 389508

Below the input fields is a tabbed interface with the following tabs: Demographics, **Status**, Client Defined, Privacy, Employer, Relations/Role, UDS, Ext, and History. The "Status" tab is active, showing a "Patient Status" dropdown menu with the following options:

- Test Patient
- <none>
- ****SENSITIVE SERVICES****
- Chart In Storage
- Discharged From Practice
- Inactive Patient
- ONLY Dental
- ONLY Dental/Optical
- ONLY MH
- ONLY Optical
- ONLY Tattoo Removal Clinic
- ONLY X-Ray
- Test Patient

To the right of the "Patient Status" dropdown is a "Patient Status Change Reason" dropdown menu with the following options:

- <none>
- LC Change
- Patient Moved
- Patient Resumed Care
- Patient Withdrew
- Transferred Care

- Pick a patient status if appropriate;
- Discharged and Inactive Statuses important for data purposes;
- For Discharged and Inactive, pick a reason from drop down;
- If patient seen for specific services only, indicate by ONLY Dental, etc.

Demographics

Client Defined (Center ID, Income, Adv Dirs)

Add Patient Information

Last: Gonzalez, First: Maria, Middle: J, Previous Last: , Nickname:

SSN: 000-00-0000, Birth Date: 01/01/2001, Age: 18 yrs., Sex:

Demogra... | Status | **Client Def.** | Privacy | Employer | Relations/Role | U... | Ext | History

Center ID

Verified Income

Advance Directive Given

HealthPac Rx Copay \$

Insurance | Account | Chart | OK | Cancel

- Pick a Center ID; very important for site-level provider panel reports, etc.;
- Verified income is a Yes / No / Refused field. It does not link to the sliding fee scale.
- We **define "income verified"** as either taxes, pay stubs or self-attestation of income;
- Self-attestation form OK alone, or **do we need letter also?**
- We collect income for all patients, regardless of insurance status;
- Advance Directive Given is a Yes / No field. This is an important field for reporting purposes; it should be considered a required field.

Demographics

Privacy

Modify Patient Information

Last: LCDLR, First: ROSA, Middle: , Previous Last: , Nickname:

SSN: 000-00-0000, Birth Date: 05/20/1935, Age: 83 yrs., Sex: Female, Medical Record: 389508

Demographics | Status | Client Defined | **Privacy** | Employer | Relations/Role | UDS | E

Privacy Notice Issued to Patient: 11/27/2017

Privacy Notice Received from Patient: 11/27/2017

Privacy Notice Reason: <none>, Not Able To Sign, Not Available To Sign, Refused To Sign, Signed By Other, Signed By Parent/Guardian, Signed By Patient, Signed With Restrictions

HIE Consent: Privacy Notice Information is stored at the practice level and is only available when a chart exists or is created.

Insurance | Account | OK

- Privacy notice fields are currently not required by NG, but they will be in the future; please consider required and enter dates and reason.
- Dates are often the same
- Privacy notice should be given to patient at 1st registration appointment; if not possible (phone registration, adult not present), must be given at check-in for first appointment with provider (?)
- **NG reminds with alert if patient has not signed privacy notice – easy to click past this alert.**

Can an adult sign for spouse? What do "Signed by Other" & "Not Available to Sign" mean?

Demographics

Relationships

The screenshot shows a software window titled "Modify Patient Information". At the top, there are input fields for "Last" (LCDLR), "First" (ROSA), "Middle", "Previous Last", and "Nickname". Below these are fields for "SSN" (000-00-0000), "Birth Date" (05/20/1935), "Age" (83 yrs.), "Sex" (Female), and "Medical Record" (389508). A tabbed interface below the fields includes "Demographics", "Status", "Client Defined", "Privacy", "Employer", "Relations/Role" (which is selected), "UDS", "Ext", and "History".

The "Relations/Role" tab contains two tables:

Relationship Information	
Name	Relationship

Practice Level Support Role Information		
Name	Relationship	Support Role

At the bottom of the window, there is a yellow-highlighted note: "Please note the demographic information for support roles and relationships are stored as separate records within the application. Therefore any modifications made to one record will not update corresponding demographic records for the other." Buttons for "Insurance", "Account", "OK", and "Cancel" are located at the bottom.

- Do not use Employer field at this time;
- Continue to Relationship Information fields; enter spouse, children, any additional family members. In order to connect family members, they must be registered patients or globes.
- Note that connecting parent's record to child in parent record does not connect child's record to parent. Must connect family members in each separate record.
- Do not have to complete before UDS fields; however, best practice is to connect all family members at 1st registration appointment.

Demographics

UDS, Consent to Treat, Sliding Scale

Add Patient Information

Last: Gonzalez, First: Maria, Middle: J, Previous Last: , Nickname:

SSN: 000-00-0000, Birth Date: 01/01/2001, Age: 18 yrs., Sex:

Demogra... Status Client Def... Privacy Employer Relations/Role UDS Ext History

Homeless Status School Based Health Ce Tribal Affiliation Descendancy UDS

Migrant Worker Status Race Blood Quantum Primary Medical Coverage Self Pay

Language Barrier Ethnicity IHS Eligibility Status Consent to Treat Date

Public Housing Primary Veteran Status Classification/Beneficiary

Not Collected Yet

- UDS fields are **very** important for federal grant reporting. All in red are required; also consider Veteran Status to be required.
- Language barrier (Yes / No) is defined as patient preferring a non-English language for medical interactions. If you are speaking to patient in a language other than English, the answer is “Yes”.
- Race—see dropdown menu and select one or more--is defined by federal guidelines. Hispanic is considered to be an Ethnicity.
- Ethnicity – see dropdown menu and select Hispanic, Not Hispanic or Declined (rarely).
- Select primary medical coverage; most common are MediCal Full Scope, CHCN Blue Cross, Medicare, Family Planning SOFP, HealthPAC, CMSP, etc.
- If no coverage, check Self Pay.

- << Click here to set Race Order
- American Indian/Alaskan Native
- Asian
- Black or African American
- Declined to specify
- Multi-racial
- Native Hawaiian or Other Pacific Islander
- Pacific Islander
- White

Not Hispanic or Latino

<none>

Declined to specify

Hispanic or Latino

Not Hispanic or Latino

Unknown / Not Reported

Unknown Ethnicity (uds)

Demographics

UDS, Consent to Treat, Sliding Scale

Modify Patient Information

Last: LCDLR First: ROSA Middle: Previous Last: Nickname:

SSN: 000-00-0000 Birth Date: 05/20/1935 Age: 83 yrs. Sex: Female Medical Record: 389508

Demographics | Status | Client Defined | Privacy | Employer | Relations/Role | **UDS** | Ext | History

Homeless Status: No School Based Health Center: No Tribal Affiliation: Descendancy:

Migrant Worker Status: No Race: American Indian/Alaska Blood Quantum: Primary Medical Coverage: Self Pay

Language Barrier: No Ethnicity: Not Hispanic or Latino IHS Eligibility Status: Consent To Treat Consent To Treat Date: 11/27/2017

Public Housing Primary Care: No Veteran Status: No Classification/Beneficiary:

Sliding Fee Schedule Verification

Sliding Fee Sched	Eff Date	Exp Date
Sliding Fee Current	11/28/2017	11/27/2018

Head of Household: LCDLR, ROSA

Family Information

Family Size	Annual Income	Ref	Verify Date	Eff Date	Exp Date	% Pov:
2	\$5,000.00		11/27/2017	11/27/2017	11/26/	Pov Cat:

Insurance Account OK Cancel

The head of household must be set before you can enter family size and income. The head of household can only be set for patients (a chart exists). Changes to the Family Information will affect the patient head of household settings.

- Consent to Treat (circled) is very important – parent must sign for self and children at 1st registration appt; cannot sign for spouse (**confirm**);
- Consider a required field; non-present spouse must sign at 1st medical appt (**Who will check & date?**);
- Enter Head of Household (circled);
- Must connect all family to Head of Household for sliding scale to update in each record;
- Sliding Fee Schedule is **required** for all self-pay patients as well as all insured patients, unless patient refuses;
- Document any patient refusal – see next slide.

Demographics

UDS, Consent to Treat, Sliding Scale

Sliding Fee Verification

Sliding Fee Schedule
Sliding Fee Current

Effective Date: 11/28/2017 Expiration Date: 11/27/2018

Head of Household Family Information

Family Size	Annual Income	Ref	Verify Date	Eff Date	Exp Date
2	\$5,000.00		11/27/2017	11/27/2017	11/26/2018

Family Info

Family Size: 1 Income: \$0.00 **Income Cycle**: [] Refused to report

Verify Date: [] **Effective Date**: [] **Expiration Date**: []

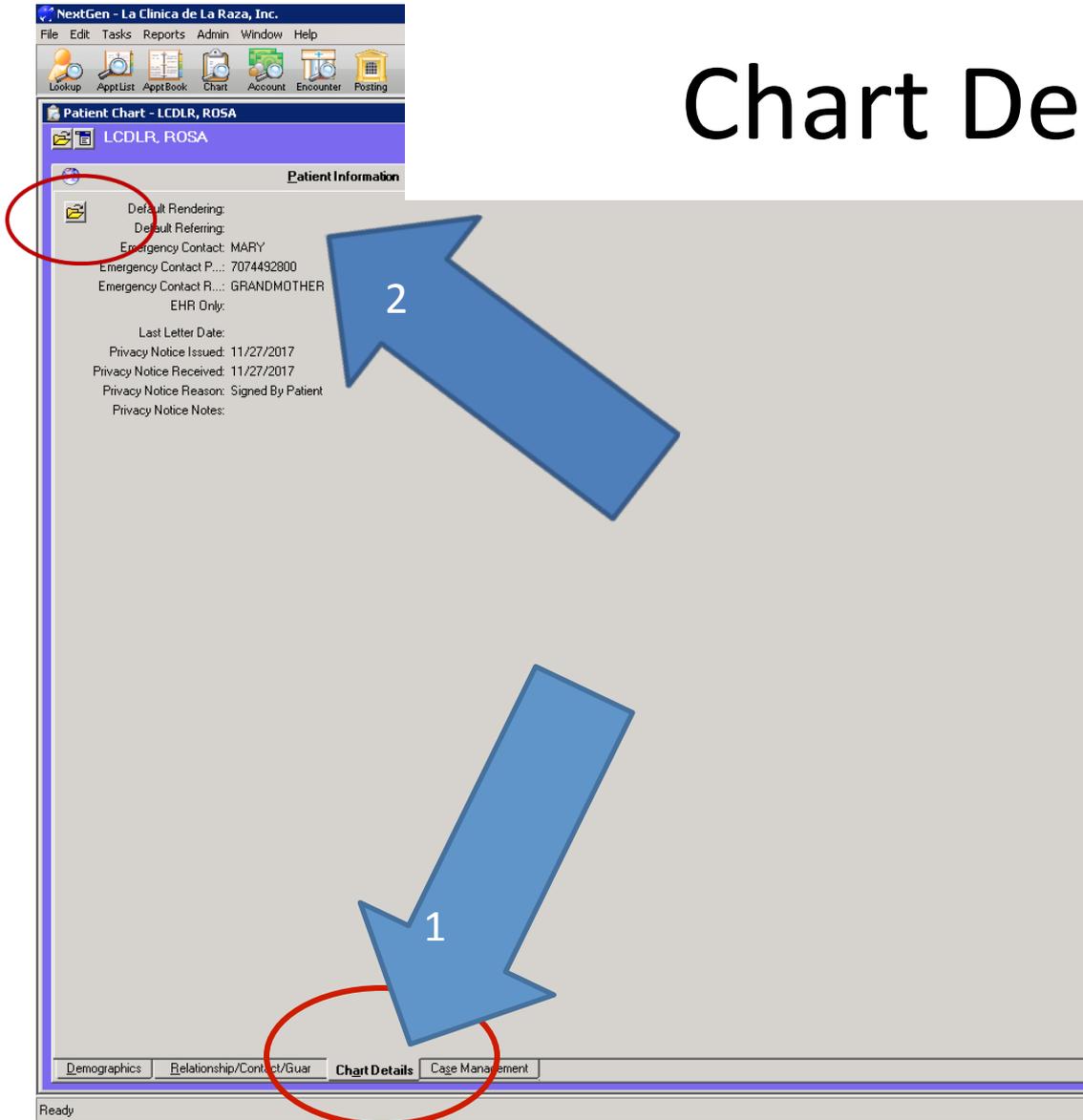
Sliding Fee Schedule Verification

Sliding Fee Sched	Mode	Eff Date	Exp Date
Sliding Fee Current	Encounter-based	11/28/2017	11/27/2018
Sliding Fee Current	Line-Item-based	11/28/2017	11/27/2018

OK Cancel

- In Verification, select “New” from drop-down, fill out all information and click OK;
- Mark if patient refuses to report;
- Confirm information copied to Family Information below Head of Household;
- Note: information in Verification and Family Info boxes must match exactly or sliding scale will not take effect;
- With verification (**including self-attestation?**), sliding scale is good for 1 year;
- Can backdate 3 months for retroactive reduction of charges;
- **No temporary sliding scale?**

Chart Details



- Emergency Contacts, Marketing Plan and Privacy Notice are in Chart Details;
- Best practice to complete this information prior to adding insurance information.

Chart Details

Emerg Contact, Marketing Plan, Privacy Notice

Chart Details - LCDLR, ROSA

Default Rendering Physician: [Dropdown]
Default Referring Physician: [Dropdown] Print Statements

Emergency Contact: MARY
Emergency Contact Phone: 7074492800
Emergency Contact Relationship: GRANDMOTHER
EHR Only: [Text Field]

Marketing Plan: [Dropdown]
Marketing Data: [Text Field]
Marketing Comments: [Text Area]

Load these user note descriptions into comments: [Dropdown]

Co-Managed Patient
Co-Managed Physician: [Dropdown]

Privacy Notice Issued to Patient: 11/27/2017
Priv Notice Received from Patient: 11/27/2017
Privacy Notice Reason: Signed By Patient
Privacy Notice Notes: [Text Area]

Who/When [Button] OK [Button] Cancel [Button]

- Should emergency contact information be **required**?
- No dropdown choices -- emergency contact, phone number & relationship are all free text;
- Information does not currently transfer to EHR.

Chart Details

Emerg Contact, Marketing Plan, Privacy Notice

Chart Details - LCDLR, ROSA

Default Rendering Physician: [dropdown]
Default Referring Physician: [dropdown] Print Statements

Emergency Contact: MARY
Emergency Contact Phone: 7074492000
Emergency Contact Relationship: GRANDMOTHER
EHR Only: [checkbox]

Marketing Plan: <none>
Marketing Data: [dropdown]
Marketing Comments: [text area]

Received from Patient: [checkbox]
Privacy Notice Reason: Signed By Patient
Privacy Notice Notes: [text area]

OK Cancel

Marketing Plan Options:

- <none>
- Auto Assigned- Alliance
- Auto Assigned-Blue Cross
- CCOHI
- Community Center
- Community Health Educators
- Default By CCHP (COCO)
- From Alliance Directory
- From Blue Cross Directory
- Google
- Headstart
- Health Fair
- Heard Radio Ad
- Live Close By
- Mobile Health Clinic
- Other
- Other La Clinica Clinic
- Other PCP
- Pamphlet From Outreach
- Pamphlet In Mail
- Perinatal Council
- Ref By Church
- Ref By COCO Health Department
- Ref By Family Or Friend
- Ref By Friend (Non-Patient)
- Ref By Neighbor (also Patient)
- Ref By Neighbor (Non-Patient)
- Ref By Other Agency
- Ref By Patient
- Ref By Pt Service Representative
- Ref By Relative (also Patient)
- Ref By Relative (Non-Patient)
- Saw Print Ad
- Saw TV Ad
- Social Media
- Solano HSS Clinics
- Sutter Delta Urgent
- Sutter Solano Medical Center
- Walked By Clinic
- Yelp

- Should this information be **required**?
- <8% of 2018 new registrations included Marketing Plan information;
- Many “Marketing Plan” choices (**too many?**) – pick from dropdown menu;
- Marketing Data (i.e., site) required for some choices;
- Can add comments; not searchable (?).

Chart Details

Emerg Contact, Marketing Plan, Privacy Notice

Chart Details - LCDLR, ROSA

Default Rendering Physician: [Dropdown]
Default Referring Physician: [Dropdown] Print Statements

Emergency Contact: MARY
Emergency Contact Phone: 7074492800
Emergency Contact Relationship: GRANDMOTHER
EHR Only: [Dropdown]

Marketing Plan: [Dropdown]
Marketing Data: [Text Area]
Marketing Comments: [Text Area]

Load these user note descriptions into comments: [Dropdown]

Co-Managed Patient
Co-Managed Physician: [Dropdown]

Privacy Notice Issued to Patient: 11/27/2017
Priv Notice Received from Patient: 11/27/2017
Privacy Notice Reason: Signed By Patient
Privacy Notice Notes: [Text Area]

WhoWhen [Icon]

OK Cancel

- Should privacy notice be **required?**
- **NG reminds with alert if patient has not signed privacy notice – easy to click past this alert.**
- Date issued and date received usually the same;
- Privacy information entered here does transfer to EHR.

Can an adult sign for spouse? What do "Signed by Other", "Not Able to Sign", & "Not Available to Sign" mean?

Demographics

Insurance

Modify Patient Information

Last: LCDLR First: ROSA Middle: Previous Last: Nickname:

SSN: 000-00-0000 Birth Date: 05/20/1935 Age: 83 yrs. Sex: Female Medical Record: 389508

Demographics Status Client Defined Privacy Employer Relations/Role UDS Ext History

Street: 123 SBOB Billing Address: Address Type: Street: Secondary Address: Address Type:

City: Vallejo State: CA (Califor) Zip: 94590- City: State: Zip:

Country: USA County: SOLANO Community Cd: Country: County: Mother's Maiden Name:

Pref Language: English Religion: Church: Contact Preference: SS CELL OK

Marital Status: Single Student Status: Veteran: Expired Date: Int'l Hm Phn: Int'l Wk Phn: Int'l Zip:

Smoker: Expired: Primary Care Provider: Primary Dental Provider:

Phone/Email & Notifications

Notifications: Opt out SMS (Text)

	Telephone Number / E-Mail	Comment	Notifications
1. Home Phone	(415) 978-9012		
2. Day Phone	(707) 645-7316 Ext:	OK TO LVM	
3. Alternate Phone	() - Ext:		
4. Secondary Hm Phone	() -		
5. E-Mail			
6. Cell Phone	() -		

Generate System Alert:

Insurance Account OK Cancel

Demographics

Insurance

Insurance Maintenance - LCDLR, ROSA

Insured: LCDLR, ROSA Insurance Type: Commercial NEIC Number:
Payer: Healthpac County Financial Class: County Indigent Claim Type: Commercial
Insured SSN: 000-00-0000 Managed Care Plan: Grant Managemen...

Detail | Detail - 2 | Ins Cards | Benefit Info | Authorizations | Referrals | Elig/Referral | External

Plan Name: Healthpac County
Plan Number: **HIC/Policy Nbr (Ctrl-S for SSN)**
Group Name: Group Number:
Main Address: 1000 San Leandro Blvd Suite :
City: San Leandro State: CA (Califor) Zip: 94577-167E
Country: County:
Contact: Last Name First Name Middle Name
Contact Phone Ext Fax
Source of Signature: Signature authorization(12,13) E-Mail Address
 Employer Policy

Activation
 Active Effective Date: Expiration Date:
 Make Insurance Primary on:

Note:

Practice Level
Co-Pay Type: Amount Co-Payment: Deductible: \$0.00
 Percent
 Notification Required Verification Required
 Authorization Required Referral Required

Co-Pay Description	Co-Pay Amt
--------------------	------------

OK Cancel

- HIC / Policy Nbr is only (current) required field. Recommend **requiring** Plan # & Effective Date;
- Also **require** co-pay field? (\$0 for all MediCal; \$15 for some CMSP; varies for commercial insurances)

Demographics

Insurance with “Assignment”

Insurance Maintenance - LCDLRTest, Philippa

Insured:LCDLRTest, Philippa Insurance Type:Medicaid NEIC Number:
Payer:CHCN Alameda Alliance Financial Class:MediCal Managed ... Claim Type:Medicaid
Insured SSN:000-00-0000 Managed Care Plan:CHCN

Detail | Detail - 2 | Ins Cards | Benefit Info | Authorizations | Referrals | Elig/Referral | External

Plan Name
CHCN Alameda Alliance

Plan Number **HIC/Policy Nbr (Ctrl-S for SSN)**

Group Name Group Number

Main Address Refund Address

Main Address
101 Callan Ave Suite 300
City San Leandro State CA (Califor) Zip 94577-4500
Country County

Contact: Last Name First Name Middle Name

Contact Phone Ext Fax

Source of Signature E-Mail Address
Signature authorization(12,13)

Employer Policy

Activation
 Active Effective Date Expiration Date
 Make Insurance Primary on

Note

Practice Level
Co-Pay Type Co-Payment Deductible
 Amount \$0.00
 Percent
 Notification Required Verification Required
 Authorization Required Referral Required

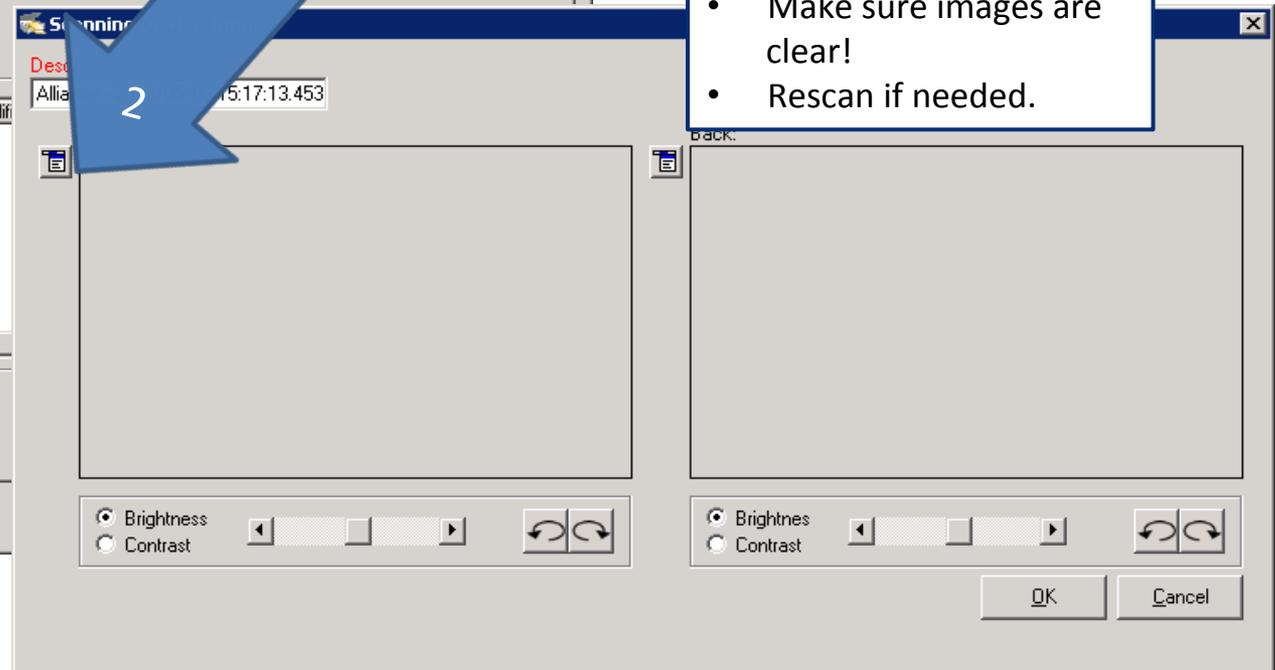
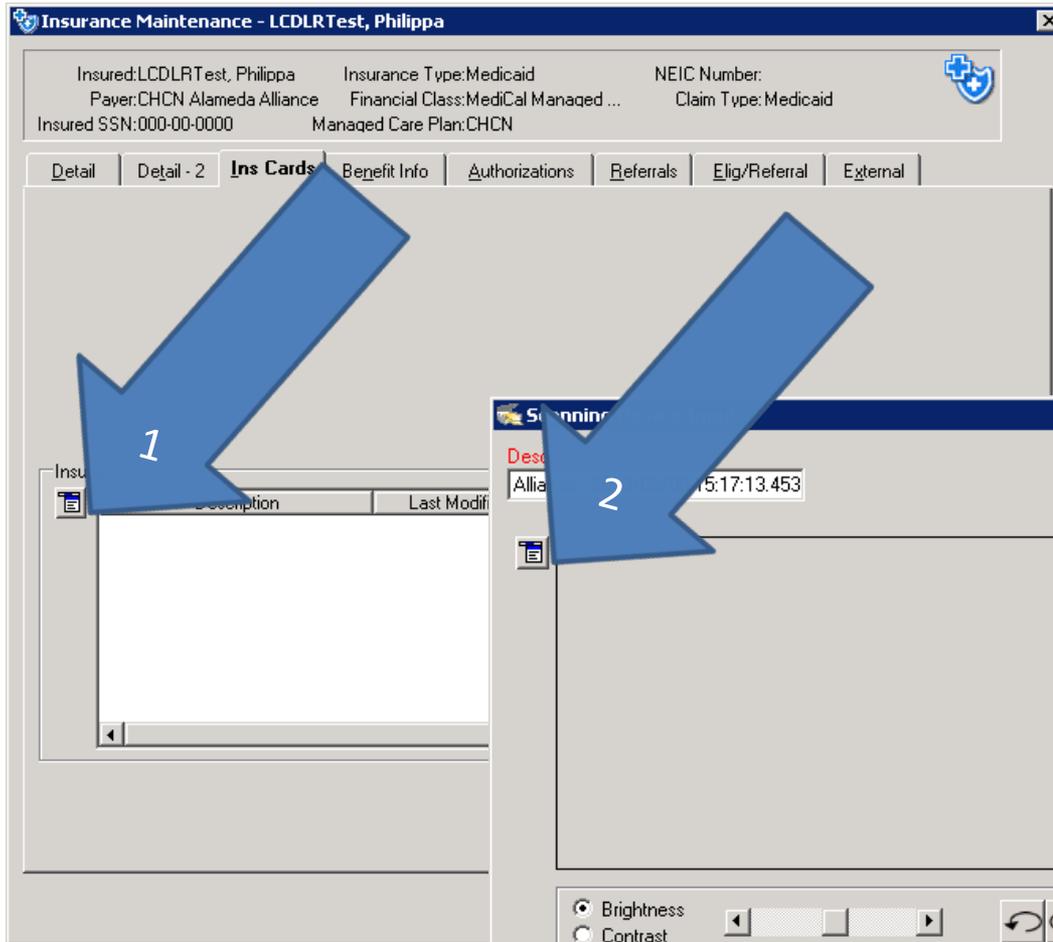
Co-Pay Description	Co-Pay Amt
--------------------	------------

OK Cancel

- How / when is PCP assignment information gathered?
- How / when is it changed?
- **Strong recommendation** to assign patients to LC at new registration or before first medical appointment.

Demographics

Insurance



- From Insurance Detail, go to Ins Cards tab;
- Scan insurance cards, front and back;
- Back of card has lots of important information for billing purposes;
- Repeat for each card;
- Make sure images are clear!
- Rescan if needed.

Demographics Insurance

The screenshot shows a software interface for insurance eligibility. At the top, there are tabs for 'Ins Cards', 'Benefit Info', 'Authorizations', 'Elig/Referral', and 'External'. The 'Elig/Referral' tab is selected. Below the tabs is a table with columns for 'Date/Time', 'Request Type', 'Status', 'Insured Name', and 'Payer Name'. The first row of the table is highlighted. Below the table is a form titled 'Eligibility Inquiry - LCDLR, ROSA'. The form has several sections: 'Patient Insurances' with a dropdown menu showing 'MediCal Full Scope/LCDLR, ROSA/Self'; 'Requesting Physician' with a dropdown menu showing 'LCRRTS, LCRRTS'; 'Requesting Location' with a dropdown menu showing 'Default'; 'Patient Search Options' with radio buttons for 'MemberID', 'Name/DOB/MID', 'Name/DOB', and 'Name/MID'; 'Benefit Search Options' with a dropdown menu for 'Type of Service' showing 'Health Benefit Plan Coverage'; 'Date of Service' with radio buttons for 'From Date' and 'Thru Date' and a date picker showing '05/08/2019'; 'Place of Service' with a text input field; 'Notes' with a text area; and 'Deactivate Inactive Insurance' with a checkbox. At the bottom of the form are 'OK' and 'Cancel' buttons. Three blue arrows are overlaid on the image: arrow 1 points to the 'Elig/Referral' tab, arrow 2 points to the 'Patient Insurances' dropdown, and arrow 3 points to the 'Type of Service' dropdown.

- From Ins Cards tab, go to Elig/Referral tab;
- **Best practice** to check eligibility within EMR;
- From drop-down menu, select “Eligibility Inquiry”;
- Fill out Requesting Physician “LCRRTS, LCRRTS”, “Default” Location, Type of Service “Health Benefit Plan Coverage” and click OK.
- System checks eligibility in real time against requested insurance (MediCal, Medicare, etc.) website & returns eligibility response;
- Repeat for each card;
- If patient is not eligible, check information, correct & try again.

Patient Signatures Required

Signed Consents

- Consent for Treatment (#170)
- Privacy Notice (#8093); patient receives HIPAA brochure (#8092)
- Advance Directives (#498, #498.3); patient receives brochure
- Patient data sheet (print from NextGen); patient signs to confirm data entered is accurate, it includes Consent for Treatment at bottom of form.
- Patient Registration Form (#106); includes several consents on 2nd page.

Other Signed Forms

- Patient Rights & Responsibilities (#77)
- Statement of Income -- Sliding Scale (#2004)
- FPACT, EWC, CHDP/Gateway Application Forms (as needed)
- Staying Healthy Assessment (SHA), VFC, Vaccine Contraindication Forms (Solano County practice)

Review: What's in Reg Packets

	Alameda	CoCo	Solano
Consent for Treatment (#107)			
Pt Rights & Resps (#77)	✓	✓	✓
Welcome Letter & Site Brochure (#252, 258, etc.)		✓	✓
HIPAA Brochure (#8092)	✓	✓	✓
Privacy Notice (#8093)	✓	✓	✓
Patient Data Sheet (NG printout)**	✓	✓	
Statement of Income – Sliding Scale (#2004)	✓	✓	✓
Staying Healthy Assessment, VFC, Vax Contraindications			✓
Advance Directives (#498, 498.3)	✓	✓	✓
Patient Registration Form (#106)			✓
FPACT, EWC, CHDP Forms (as needed)	✓	✓	✓

** In-person registrations

Special Registration Types

Special Situations

- **Phone Registrations** — Can work well for patient access, suggest **requiring** dates for all consents (i.e., hard stop until checked off & dates filled in);
- **SBHC Registrations** — PhB to shadow 3 SBHCs (2 visits set up), gather specific workflows;
- **Optical Registrations** — Optical only;
- **Dental Registrations** — Dental only;
- **Sensitive Services** — More information needed. How used now? What are requirements? How should we set up and use Sensitive Services going forward?
- **Prenatal Patients** — PhB to shadow PPS staff.

Workflows for Insurance Eligibility Verification

Current Processes – Noted
Differences by County

Insurance Eligibility Checking Processes

Before DOS

- All scheduled appointments – insurance eligibility for the first two listed insurances is checked **two** days prior by NextGen internal process; eligibility results are dropped into each patient's Elig/Referral tab under active primary and secondary insurances.
- Front desk staff do a manual check **one** day before for each scheduled patient; usually check on insurance websites. If insurance is expired, call patient to collect updated information or give option of rescheduling appointment. Often combined with appointment reminder calls.
- Solano County – each front desk COA is assigned to 2 providers, checks patient eligibility in these 2 schedules for next **3 days**. When insurance is verified, types “Active” in appointment description; doesn't check again until DOS.
 - Note: for patients who are aware their insurance is not active, there is a **very** high no-show rate. Even worse when patients told at check-in; accounts for many walk-outs on DOS.

Insurance Eligibility Checking Processes

On DOS

- On DOS, front desk COA runs insurance coverage on each insurance website; generally don't use information pre-loaded by NextGen internal process or use NextGen to do on-demand eligibility checking.
 - Note: some newer staff are unaware of pre-loaded data and unaware of on-demand eligibility checking through NextGen.
- If FPACT is expired (can tell by dates in insurance detail), ask patient to fill out and sign FPACT form. COA updates FPACT on MediCal website, adds new insurance information to patient Insurance Listing, scans FPACT form to Billing / Reg forms, attaches to same-day encounter.

Insurance Eligibility Checking Processes

Questions / Special Cases

- At the end of the month, have to have special processes. Can't check MediCal, etc., at end of one month for DOS in next month.
- Patient's HPAC / CMSP is expired – what is the process?
- Patient's sliding scale is expired – what is the process?
- Patient assignment – patient's coverage is good, but is assigned to another provider... what is the process?