

# How to Maximize Your Preventative Care Clinical and Financial Workflow.

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# Objectives

- How to have rules in place to help your practice succeed
- Understand your Check-In and New Patient Registration work-flows
- How to have an effective Credit Card on File Process
- How to manage Missed Appointments
- How to effectively work on Well check recalls

# Setting your Practice Rules

- Should well checks be required?
- Who can bring in patients for well checks?
- If they are late, how late can they be before you reschedule?
- Are vaccines required?

# Setting your Practice Rules

- Who is responsible for payments?
- What if the parents are divorced?
  - Who pays the copay?
  - Who is the guarantor?
- When are copays due? What if the guardian did not bring any money at the time of visit?
- When are patient balances due?
- What if the family No-shows for an appointment?
- Will you require a Credit Card on File (CCOF)?

***\*Please initial on each line\****

\_\_\_\_\_ ***(initial)*** **Well Check-ups are Required**

At One Family Pediatrics, we feel strongly about children having routine well check-ups. Per American Academy of Pediatrics, children should receive preventative health care at the following ages:

- |                    |                    |                            |
|--------------------|--------------------|----------------------------|
| ❖ Newborn period   | ❖ 6 months of age  | ❖ 24 months of age         |
| ❖ 3-5 days of life | ❖ 9 months of age  | ❖ 30 months of age         |
| ❖ 1 month of age   | ❖ 12 months of age | ❖ 3-21 years of age – on a |
| ❖ 2 months of age  | ❖ 15 months of age | yearly <u>bases</u>        |
| ❖ 4 months of age  | ❖ 18 months of age |                            |

*We expect our parents to follow these guidelines so that we may continue to provide quality healthcare to our children. Failure to do so may result in being discharged from the practice. We request that *only* primary caregivers bring children in for well checkups.*

\_\_\_\_\_ ***(initial)*** **Appointments will be provided in a timely manner**

All routine new and established patients are accommodated within five days; all urgent appointments for established patients will be attempted to be scheduled on a same-day basis if requested prior to 2:00 p.m., and on a next day basis if requested after 2:00 p.m., unless the family prefers another appointment.

\_\_\_\_\_ ***(initial)*** **Mutual Respect of Time**

We pride ourselves on punctuality at One Family Pediatrics. Although there can be emergency situations that are out of our control resulting in our running behind schedule, we pledge to provide quality care with minimal wait times to the best of our ability. In order to respect your time, we make the following requests:

1. Arrive early or on time for your appointments. We may have to reschedule or squeeze you in whenever there is space if you arrive more than 15 minutes late.
2. If you plan on having an additional child seen during an appointment, please notify us in advance so that we can provide sufficient time with you.
3. We will provide you with all of the time that you need, but you must tell us when making the appointment ALL of the reasons you would like your child to be seen. This prevents us from running out of time and having to schedule another appointment to address other concerns.
4. If you are running late, call the office. We may be able to accommodate you with advanced notice.

\_\_\_\_\_ ***(initial)*** **Vaccine Requirements (For New Patients)**

We require all parents to vaccinate their children according to the recommended CDC schedule. If there is a medical contraindication, please notify us in advance.

# Setting your Practice Rules

\_\_\_\_\_(initial) **Patient Balance is billed on the 5<sup>th</sup> of each month**

Patient balances are billed on the 5<sup>th</sup> of each month. Your remittance is due by the end of the month. Any account balance outstanding longer than the end of the month will be paid with the credit card on file (see below). If there is no contact made to the office about a payment plan and credit card is declined, the account will be charged a **\$30** re-bill fee for each monthly cycle. Any family with a balance outstanding longer than 90 days will be dismissed from the practice. Reinstatement will require **payment of full balance plus accrued re-bill fees**.

\_\_\_\_\_(initial) **Self-pay accounts/Out of Network Insurance**

If you do not have insurance, please come prepared to pay for your visit in full. We offer a 30% discount for all self-pay services paid in full on the day of the visit. If payment cannot be made in full at time of service, a budget agreement can be made to have the service paid within 90 days with the first payment payable the day the service is rendered.

If we do not participate in your insurance plan, payment in full is expected from you at the time of your visit. We will supply you with an invoice that you can submit to your insurance for reimbursement.

\_\_\_\_\_(initial) **Copays**

We are required by our insurance contracts to collect all co-payments at the time of service regardless of divorce decree. The parent/guardian who brings the child at time of service will be responsible for the copay. Failure to collect co-payments puts the responsible party and One Family Pediatrics in default of the insurance contract. A **\$25** service fee will be charged in addition to your co-payment if the co-payment is not paid by the end of that business day.

\_\_\_\_\_(initial) **Guarantor**

The person who signs this financial policy will be the guarantor, or responsible party for bills. There will be no exceptions, even in divorce situations.

\_\_\_\_\_(initial) **Confirmed Appointments and Missed Appointment Fee**

Confirmations will be sent via email, text, and phone. If you do NOT confirm your appointment in at least one manner, we will assume you are out of the country or unavailable and will automatically cancel said appointment on the scheduled date.

Broken appointments represent a cost to us, you and to other patients who could have been seen in the time set aside for you. Cancellations are required 24 hours prior to the appointment. Appointments not cancelled 24 hours in advance will result in a "No Show" fee of **\$75** and may result in dismissal from the practice. This fee must be paid before a new appointment is scheduled. Patients with **three** missed appointments in a twelve-month period will be asked to transfer their records to another practice. Your child's appointment time will be confirmed via an automated email, phone or text.

# Setting your Practice Rules

\_\_\_\_\_(initial) **Returned Checks**

A **\$50** fee will be charged for any checks returned for insufficient funds.

\_\_\_\_\_(initial) **Georgia Medicaid Insurance Policy (Medicaid Only)**

If your child has Georgia Medicaid (Medicaid/Peachcare, Wellcare, CareSource or Amerigroup) and is also covered under a private health insurance, we are required by law to file claims with the private insurance policy first. Georgia Medicaid plans are **always** considered as secondary insurance.

If Georgia Medicaid is not informed that your child also has private insurance, they have the right to retract payment from previously paid claims. If this occurs, then the entire balance will be the **responsibility of the parent/guardian on file.**

***PLEASE BRING YOUR CURRENT INSURANCE CARD TO EVERY VISIT***

# Setting your Practice Rules

## One Family Pediatrics Credit Card on File Policy

One Family Pediatrics requires that a valid Credit Card be kept on file.

The policy is designed to:

- Help avoid all billing related fees
- Streamline the billing process in our office and eliminate the expenses related to handling overdue accounts
- Focus our time and energy on your children and their medical care

The card information is stored electronically in an encrypted form and **cannot be viewed by our office staff**. Your signature will authorize the card to be used **only** when your balance becomes past due.

### How the policy works:

1. At the time of your registration or check-in, you will be asked for your credit card information to be electronically stored in encrypted form in our computer. Only the last four digits are visible to our staff.
2. We will bill your insurance carrier as a courtesy for all charges related to the visit.
3. When we receive an explanation of benefits (EOB) form your insurance, we will send you a statement on the 5<sup>th</sup> of the following month, or the next business day after the 5<sup>th</sup>. If we have not received payment by the 30<sup>th</sup> of the month, we will charge the credit card on file for the balance due (on statement).
4. If we attempt to use your card and it is declined or has expired, we will send you a new statement with a note attached asking for current credit card information.

**Please remember that this policy does not restrict your right to appeal any charge made to your credit card. Should you feel that we have charged your card in error, you may contact our office ASAP. If a mistake has been made, we will reverse the charges.**

I have reviewed a copy of One Family Pediatrics Office and Credit Card on File Policies. I agree to provide my credit card information to One Family Pediatrics for the sole purpose of payment for my child(ren)'s medical care. I understand One Family Pediatrics will send notice 14 days prior to running my payment. I have the right to cancel this process and use another form of payment.

\_\_\_\_\_  
Signature of Authorized User

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name as it appears on your credit Card

\_\_\_\_\_  
Phone # of Cardholder

# Setting your Practice Rules



# Clinical Alerts & Flags

- PCC's system can be set up to support flagging and alerts for statuses like credit card on file (CCOF)
- Custody/Divorce flags/alerts can also assist in communicating special circumstances to staff and clinicians.

# Clinical Alerts & Flags

- Credit Card on File
  - Some practices choose to flag when a CCOF is present, others when CCOF is declined.
  - Choose which method works best for your office, but be consistent.

# Clinical Alerts & Flags

**Home Account Information**

Account Flags: Declined Credit Card on File

Emg Contact:  Collection Review

Emg Phone:  Collection/TSI

Previous Peds:  Covid/Payment Hold

Referred By?:  Credit Card N/A

Pharmacy Name:  Credit Card on File

Pharmacy Number:  Declined Credit Card on File

**Recent Financial History**

Dismissed

Foster child - No CCOF required

Holding Bill

Inactive

Add the flag to the account

# Clinical Alerts & Flags

Clinical Alerts - Edit Alert

Clinical Alerts Activity Log

### Edit Clinical Alert

Alert Name: Declined CCOF

Alert Message: Parents aware of late fee charges if bills not paid on time.

Present this Alert when:

- The Chart is Opened
- The Chart is Saved
- Scheduling Appointments
- Patient Check-In
- Post Charges

Present this Alert to:

- All users
- Users with the role(s) of

Time Range for Criteria:

- Today (only)
- From patient's birth through today
- Within the past 1 years
- From 1 years ago through 1 years ago

Criteria:

Demographics:

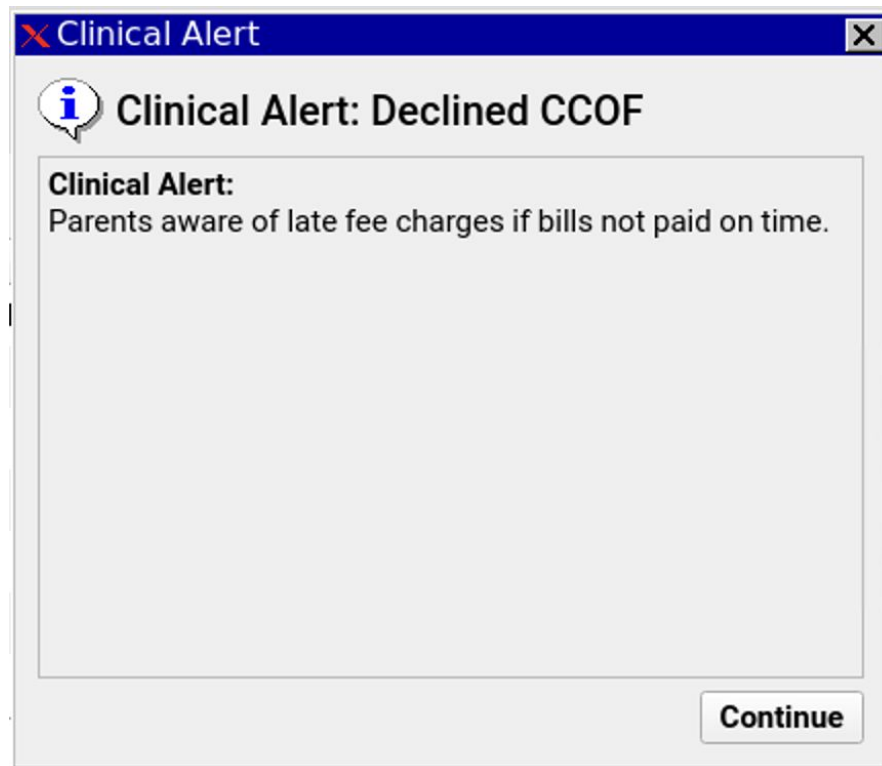
Edit Account Flag:

The account has the flag "Declined Credit Card on File"

Preview Cancel Save

Create an alert where an account has the flag present. Choose where the alert presents (chart open, appointment book, check-in?)

# Clinical Alerts & Flags



The alert prompts your staff with information about the account's CCOF status.

## Scenario 1

Newborn comes in,  
placed in exam  
room.

Registration is not  
completed before  
they leave.

# Patient Registration

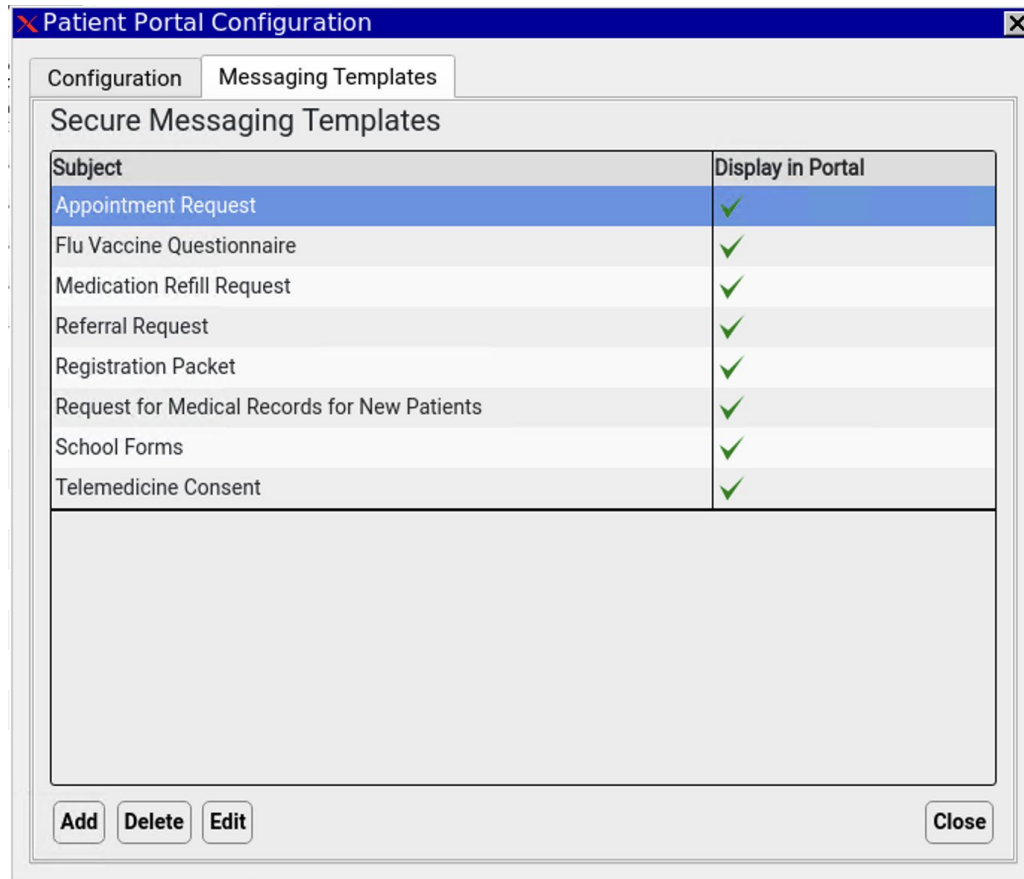
- Essential that this is completed before patient is seen.
- If families are not willing to sign and abide to your office/financial policies, then your practice is not the right fit for them.

# Different Ways to Register

- Paper
- Customizable online form (Jotform, IntakeQ, PDF Filler, Adobe)
  - Make sure you can get a BAA (Business Associate Agreement)
- Portal Template



# Portal Template Configuration



Go to Configuration > Patient Portal to add a new Portal Messaging Template

# Portal Template Configuration

The screenshot shows a window titled "Patient Portal Configuration" with two tabs: "Configuration" and "Messaging Templates". The "Messaging Templates" tab is active, displaying "Secure Messaging Templates - Edit".

Subject:

Display in Portal

Assign incoming portal messages from this template to:

Build Template

**Title**

Displays bold text that is larger than other form text. Recommended for the form title and for section headings.

**Input box - small**

Allows input of one line of text. Recommended when a single word or short answer is

Add in the appropriate input boxes, drop-downs, and other components to gather necessary demographic and registration details.

# Portal Template Configuration

[Back](#) [My Kid's Chart](#)

John "Michael" CHADIS\_test Canning  
Sex: Male  
Birthdate: 05/01/03  
Last Physical: 03/14/16

Subject: Registration Packet

Registration Packet

Name of Child #1

Child Date of Birth #1

Gender (for insurance purpose) #1

Child's Email or cell number (if applicable) #1

Child's Name #2

Portal accounts can send a Portal Message to the practice with the details requested in the registration packet.

# Portal Template Configuration

Race

How did you hear about us?

Copy of Driver's License

Attach a Photo or PDF

Primary Insurance Card

Attach a Photo or PDF

Secondary Insurance Card (If applicable)

Attach a Photo or PDF

Parent #1 Name (Parent to contact first)

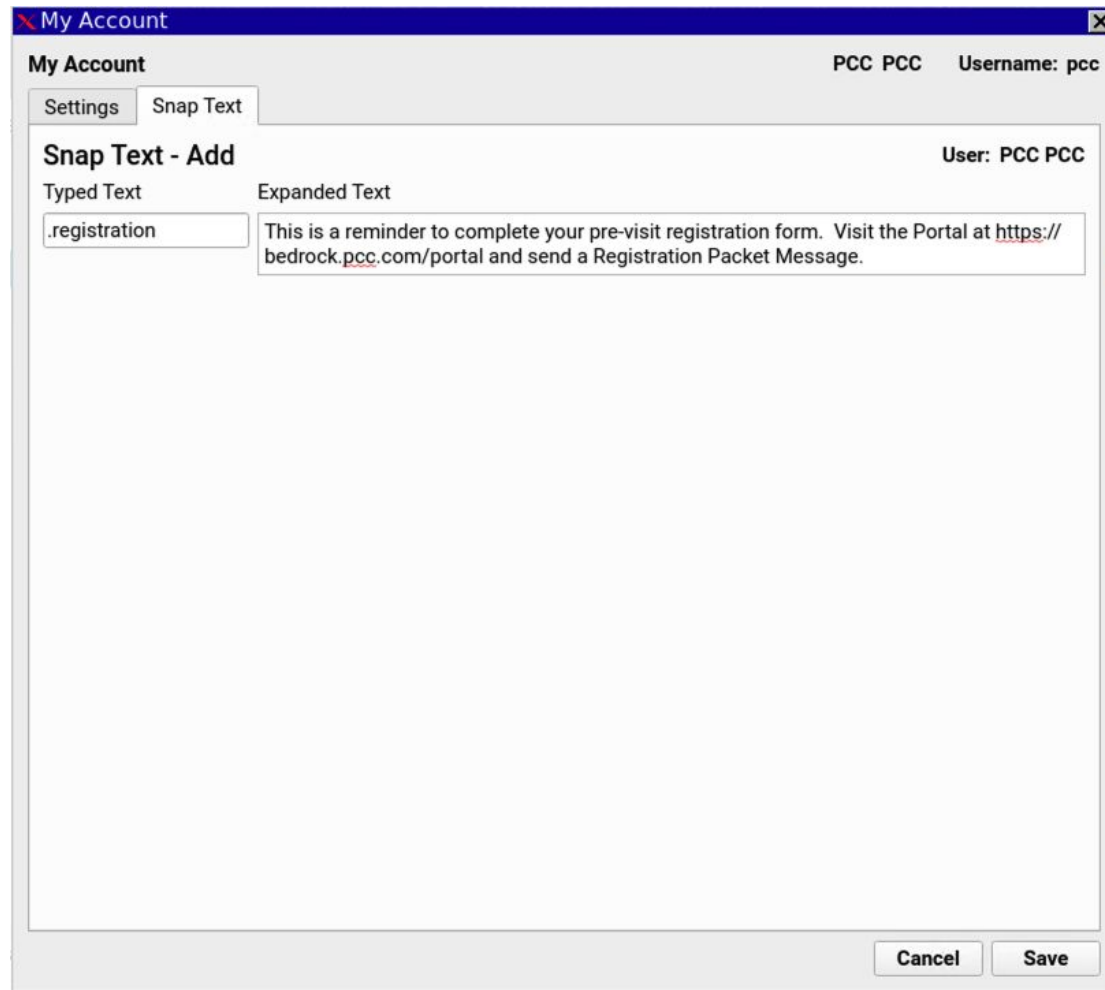
Parent #1 DOB

New as of mid-2021, you can configure Portal Messaging Templates to request an image/PDF.

# Use Send Text for Reminders

- With CHADIS, portal registration, or any other method of pre-visit form completion, you'll need a method to remind families.
- PCC EHR's Send Text feature can be used for reminders to families.
- Integration with PCC's Snap Text feature allows for quick, repeatable messages to families.

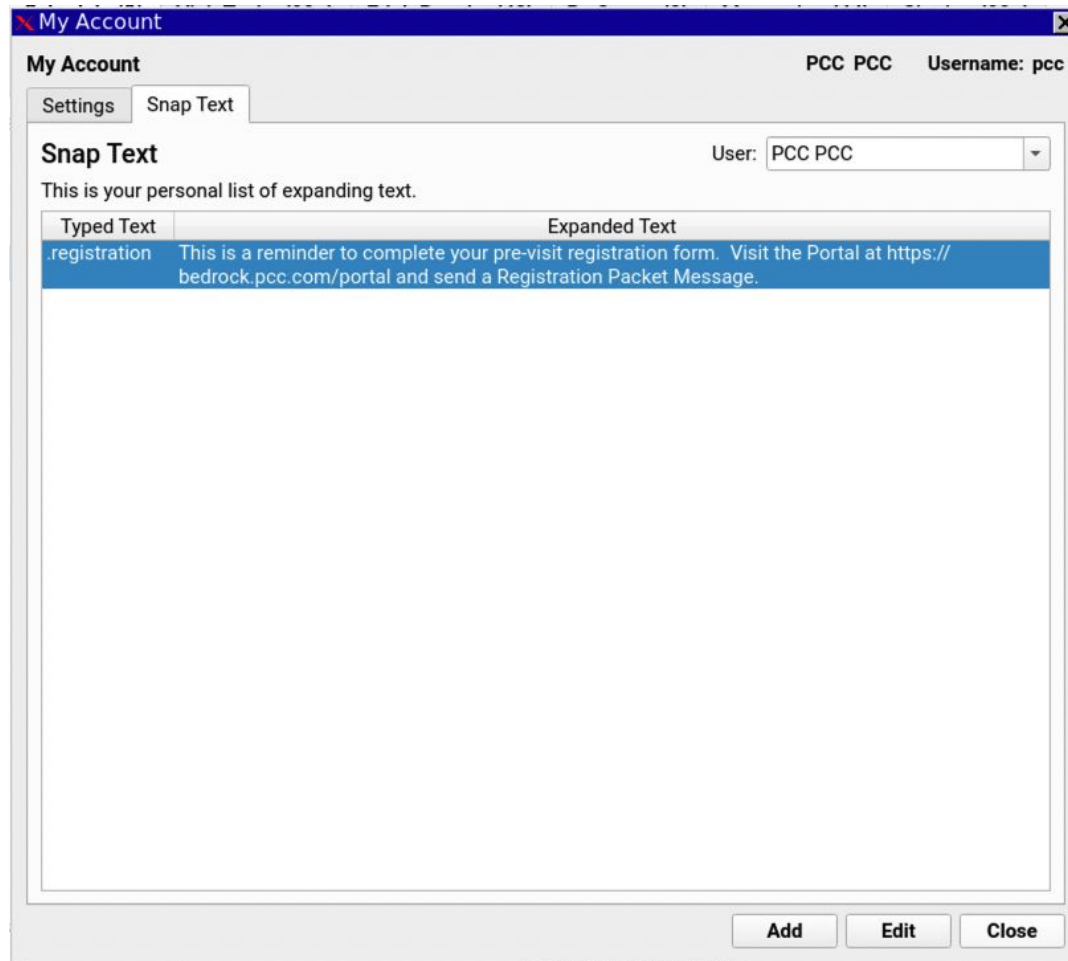
# Use Send Text for Reminders



The screenshot shows a window titled "My Account" with a blue title bar. Inside the window, there are two tabs: "Settings" and "Snap Text". The "Snap Text" tab is active, displaying a dialog box titled "Snap Text - Add". The dialog box has a header "User: PCC PCC" and two sections: "Typed Text" and "Expanded Text". The "Typed Text" section contains a text input field with the value ".registration". The "Expanded Text" section contains a text area with the text: "This is a reminder to complete your pre-visit registration form. Visit the Portal at <https://bedrock.pcc.com/portal> and send a Registration Packet Message." At the bottom of the dialog box, there are two buttons: "Cancel" and "Save".

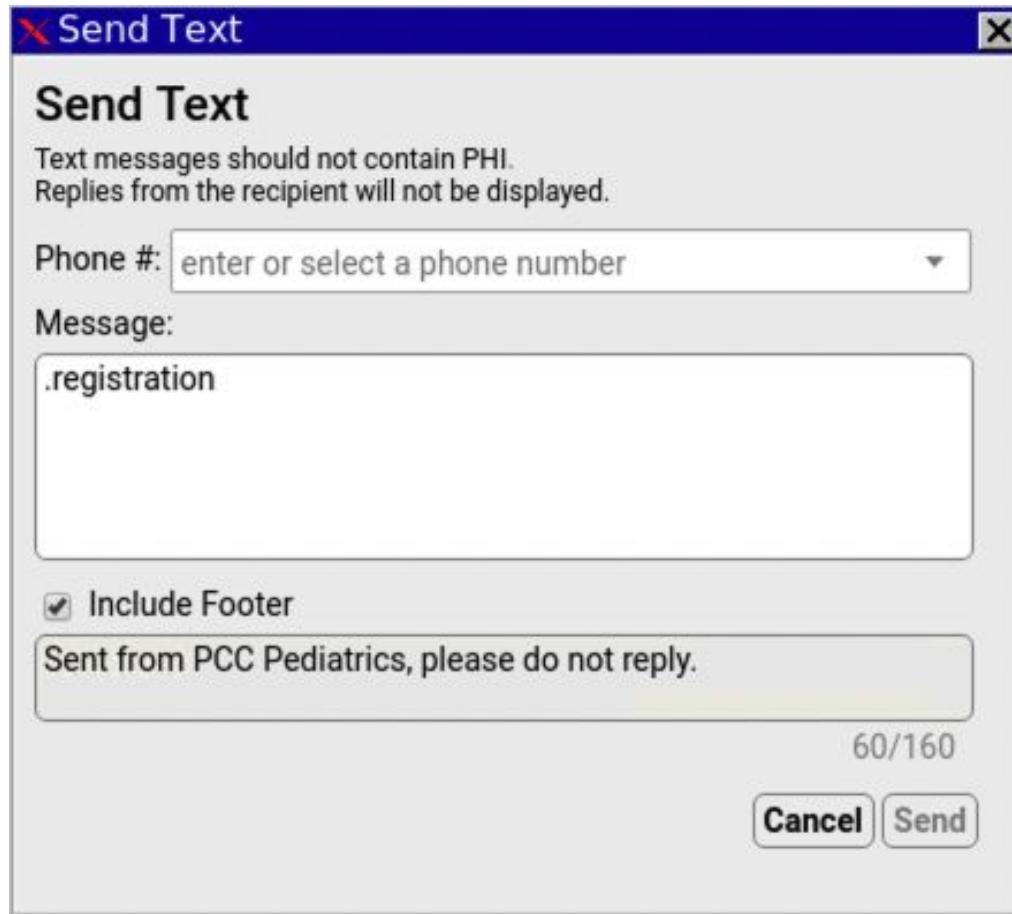
Go to File > My Account > Snap Text to configure text snippets for commonly-typed text.

# Use Send Text for Reminders



You can build as many Snap Text entries as are useful to your practice and/or to you as an individual user.

# Use Send Text for Reminders



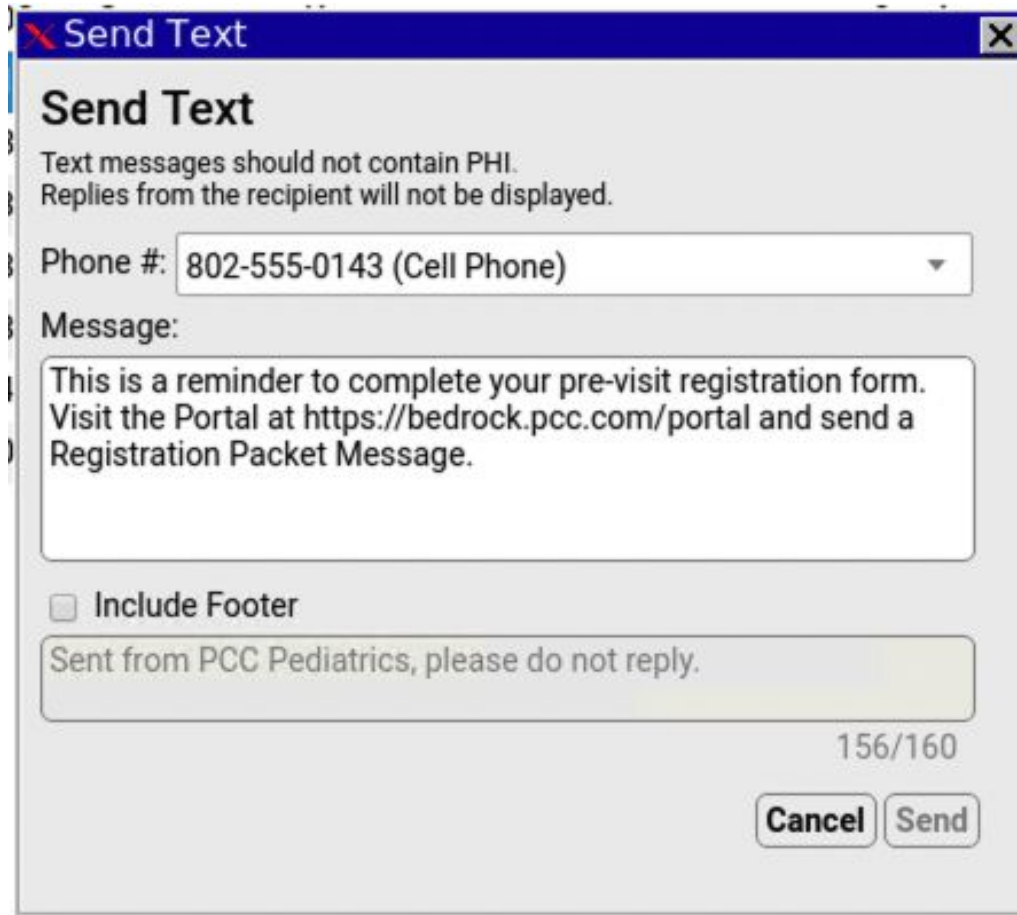
The screenshot shows a 'Send Text' dialog box with a blue title bar. The main area is light gray and contains the following elements:

- Send Text** (Section Header)
- Text messages should not contain PHI.  
Replies from the recipient will not be displayed.
- Phone #: enter or select a phone number (with a dropdown arrow)
- Message: .registration (in a text area)
- Include Footer
- Sent from PCC Pediatrics, please do not reply. (in a text area)
- 60/160 (Character count)
- Cancel Send (Buttons)

You can now use your Snap Text for reminders to complete pre-visit paperwork.



# Use Send Text for Reminders



**Send Text**

Text messages should not contain PHI.  
Replies from the recipient will not be displayed.

Phone #: 802-555-0143 (Cell Phone)

Message:

This is a reminder to complete your pre-visit registration form. Visit the Portal at <https://bedrock.pcc.com/portal> and send a Registration Packet Message.

Include Footer

Sent from PCC Pediatrics, please do not reply.

156/160

**Cancel** **Send**

Your snippet expands into the full message you want to send.

# Scheduling Appointments

Verify the following items when creating an appointment

- **For New Patients**

- ✓ Setup Portal Account
- ✓ Need:
  - Insurance
  - Drivers License
  - Registration

- **For New Patients With Siblings**

- ✓ Images of DL and Insurance
- ✓ Registration paperwork (Sibling specific)
- ✓ Portal User

- **For Existing Patients**

- ✓ Insurance – Any changes or new policies?
- ✓ Account Flags – Any CCOF related issues?
- ✓ Verify the following documents
  - Registration
  - Insurance
  - Drivers License
- ✓ Portal User

# Front Desk Check-In Process

- **Check documents in patient's CHART for image of DL and Ins card**

- ✓ Confirm Address, Primary Phone Number
- ✓ Collect co-pay, if any (Sick Visits only)
- ✓ Collect balance, if any

- **If paying by:**

- Credit Card
  - Ask to run CCOF on file or swipe card manually
  - Ask if patient would like a receipt
  - Post payment to PCC
- Check
  - Give receipt from petty cash box
  - Post payment to PCC
  - Give check to Sameer
- Cash
  - Put into petty cash and provide change, if necessary
  - Give receipt from petty cash box
  - Post payment to PCC

# Scanned Document Notes

- You can use chart-wide components as a way to remind staff when a document was scanned.
- Chart-wide components can be made available in a variety of areas, including Check-in, Appointment Book, etc.

# Scanned Document Notes

**PCC EHR**  
FIND

**Judy Jetson\*** PCC# 2974

Patient Check-In

- Appointment Details
- Patient Demographics
- Scanned Documents
- Communication Preferences
- Patient Portal Users
- Account Demographics
- Policies
- Insurance Eligibility
- Account Balances
- Time of Service Payments

### Patient Check-In

#### Patient Demographics

**Judy Jetson**

First Name:

Nickname:

Middle Name:

Last Name:

Suffix:

Date of Birth:

Sex:

Deceased:  No  Yes

#### Birth History

GA at Birth:  weeks  days

Multiple Birth:  No  Yes

#### Race, Ethnicity, and Preferred Language

Race:

Ethnicity:

Pref. Language:

#### Scanned Documents \*Unsaved Changes

Insurance Card scanned 02/01/22 - JL  
Financial Policy scanned 02/02/22 - JL

Communication Preferences

A chart-wide Scanned Documents text box will allow staff to see when a document was last scanned. This could be used in conjunction with Snap Text for quick entry of information.

## Scenario 2

Newborn from Scenario 1 comes in for a 2 month visit and has active insurance.

Patient is seen and when you submit to insurance company, they deny the claim because the family is delinquent on paying premiums.

# Credit Card on File

- Why is it important
- What if they decline
  - New patient vs. old patient
- Make sure you check to see if the CCOF is active with every visit
  - Sale vs. Auth

Virtual Terminal CUSTOMER SERVICE 866.680.8324

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Transaction Mode: Live Test Credit Card Search Tokens Process

**Credit Card**

Transaction Type: SALE SALE AUTH CAPTURE REFUND VOID Card Reader

CVV Code CVV Code

Expiration Date: 01 2022

**Billing Contact Info**

First Name Last Name


Company Name

Address Suite

City State/Province Zip/Postal Code

Phone Email

# Create a Token in BluePay



WELCOME

PROCESSING

- Virtual Terminal
  - Transactions
  - ACH Payout List
  - Rebilling
  - File Upload
  - Customer Tokens
    - List
    - Search
    - Create
- REPORTS
- FRAUD
- TOOLS
- ADMIN

Transaction Mode

Live Test Credit Card Save

### Credit Card

Card Reader

Customer Token ?

XXXXXXXX

Card Number CVV Code ?

Expiration Date 01 2022

### Billing Contact Info

First Name Last Name

Company Name

Address Suite

City State/Province Zip/Postal Code

Phone Email



# Collections

- Are they worth it?

# Best Practices around collection of sensitive financial info

\*SSNs

\*CC #s and PCI Compliance

## Scenario 3

That same patient pays their bill and calls to reschedule a well check visit.

The patient is now self pay.

# Good Faith Estimate

- How much of your population is self pay
- Do you itemize every CPT code
- Do you just group codes together and provide average price?



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### Good Faith Estimate

Date of Good Faith Estimate: April 5, 2022

Date of Visit:

Patient Name:

Provider: Dr. Lavania

Patient DOB:

	Established Patient CPT Codes	ICD 10 Codes (Estimated Diagnoses Codes)	Price		New Patient CPT Codes	ICD 10 Codes (Estimated Diagnoses Codes)	Price
<input type="checkbox"/>	Well Check 99391 (< 1 Yr Old)	Z001.29, Z23		<input type="checkbox"/>	99381 (< 1 Yr Old)	Z001.29, Z23	
<input type="checkbox"/>	Well Check 99392 (1-4 Yrs Old)	Z001.29, Z23		<input type="checkbox"/>	99382 (1-4 Yrs Old)	Z001.29, Z23	
<input type="checkbox"/>	Well Check 99393 (5-11 Yrs Old)	Z001.29, Z23		<input type="checkbox"/>	99383 (5-11 Yrs Old)	Z001.29, Z23	
<input type="checkbox"/>	Well Check 99394 (12-17 Yrs Old)	Z001.29, Z23		<input type="checkbox"/>	99384 (12-17 Yrs Old)	Z001.29, Z23	
<input type="checkbox"/>	Well Check 99395 (18+ Yrs Old)	Z001.29, Z23		<input type="checkbox"/>	99385 (18+ Yrs Old)	Z001.29, Z23	
<input type="checkbox"/>	Sick Visits 99211	Unknown until visit		<input type="checkbox"/>	99202-99205	Unknown until visit	
<input type="checkbox"/>	Sick Visits 99212-99215	Unknown until visit					

	Behavior Visit	CPT Codes	ICD 10 Doces (Estimated)	Price
<input type="checkbox"/>	Behavior Initial (incl ADHD,	99205 or 99215	Unknown until visit	
<input type="checkbox"/>	ADHD F/u	99213-99215 or 99203-99205	F90.0-F90.2	
<input type="checkbox"/>	Depression F/u	99213-99215 or 99203-99205	F32.0-F32.9	
<input type="checkbox"/>	Anxiety F/u	99213-99215 or 99203-99205	F41.1	

	Other Visits	CPT Codes	ICD 10 Doces (Estimated)	Price
<input type="checkbox"/>	Covid PCR for Travel	99211 + 87635	Z20.828	
<input type="checkbox"/>	Rapid Covid for Travel	99211 + 87426	Z20.828	
<input type="checkbox"/>	Typhoid Vaccine	90691	Z23	

# Good Faith Estimate

## Scenario 4

You have a high no show rate in your office.

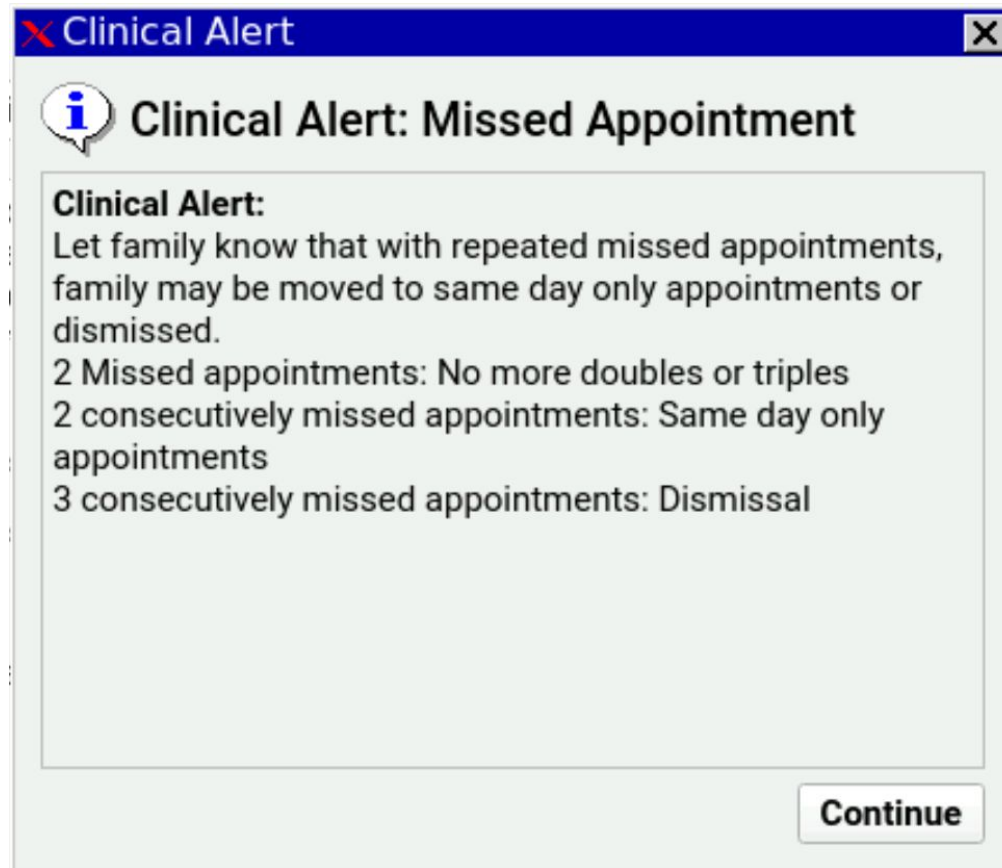
The \$75 no show fee makes parents angry, and you spend more time writing it off than teaching them a lesson.

# Missed Appointment Fees

- We used to charge \$75
- Problems with missed appointment fees

# Missed Appointment Flags


- Missed 1, Missed 2, Missed 3





# Forms and Flags

- PCC can configure forms & letters to generate a flag and even remove a flag. This could be useful for missed appointment letters, as an example.



The image shows a software interface with a dropdown menu titled "Forms". The menu is open, displaying a list of form options. The option "Missed Appt" is highlighted with a blue background. Other options include "Allergies Form", "Allergys Form", "Asthma form", "Elig Check", "Lab Demographic Form", "Medical Form", "Medical Records", "Patient PE excuse", and "School Excuse - Appointment".

Form Name
select a form
Allergies Form
Allergys Form
Asthma form
Elig Check
Lab Demographic Form
Medical Form
Medical Records
<b>Missed Appt</b>
Patient PE excuse
School Excuse - Appointment

# Forms and Flags

- The form generates a Missed Appt flag for the patient, in this instance

Patient Information	
Patient Flags:	Missed Appt
PCP:	<input type="checkbox"/> Dismissed
	<input type="checkbox"/> Inactive
Custom 1:	<input checked="" type="checkbox"/> Missed Appt
Custom 2:	<input type="checkbox"/> Needs Extra Time
	<input type="checkbox"/> Transferred
Custom 3:	
Old ID#:	
Relation to Bill Payer:	Child

## Scenario 5

6-year-old patient comes in for a sick visit and you realize that this patient has been a patient of your practice for 1 year and has never had a well check.

Who else has not been coming in for well visits?

# Well Checks are Required

## \_\_\_\_\_ *(initial)* Well Check-ups are Required

At One Family Pediatrics, we feel strongly about children having routine well check-ups. Per American Academy of Pediatrics, children should receive preventative health care at the following ages:

- ❖ Newborn period
- ❖ 3-5 days of life
- ❖ 1 month of age
- ❖ 2 months of age
- ❖ 4 months of age
- ❖ 6 months of age
- ❖ 9 months of age
- ❖ 12 months of age
- ❖ 15 months of age
- ❖ 18 months of age
- ❖ 24 months of age
- ❖ 30 months of age
- ❖ 3-21 years of age – on a yearly bases

*We expect our parents to follow these guidelines so that we may continue to provide quality healthcare to our children.* Failure to do so may result in being discharged from the practice. We request that *only* primary caregivers bring children in for well checkups.

# Scheduling the Next Well Check

- Schedule next well check during EVERY well check
- Your appointment book should be accessible a year out
- We just put an appointment a year out without “scheduling” it with parents.
  - No Show rate is much less
  - When we would try to schedule, they would decline
  - They get a reminder on notify 14 days prior to the appointment

# Well Check/Next PE reminders

- PCC EHR can include this information in a variety of places:
  - Appointment Book Patient Details
  - Medical Summary
  - Check-in
  - Phone Notes, Portal Messages, etc.

## Medical Summary

### Outstanding Tasks

There are no outstanding Tasks

### Recent and Upcoming Appointments

Last Visit: 04/21/22 (3w 5d ago) Crusher  
Dx: Cough  
Last Physical: 06/12/21 (11m ago)  
Next Physical Due: 06/12/22  
Scheduled Appts.: none

# Well Check/Next PE reminders

- PCC EHR can be configured to automatically flag patients who are due for a visit, which could prompt a clinical alert.

**Medical Summary**

**Outstanding Tasks**  
There are no outstanding Tasks

**Recent and Upcoming Appointments**

Last Visit:	04/21/22 (3w 5d ago) Crusher	<b>The patient is overdue for a visit.</b>
	Dx: Cough	
Last Physical:	06/12/21 (11m ago)	
Next Physical Due:	06/12/22	
Scheduled Appts.:	none	

# Well Check/Next PE reminders

- The patient's overdue status triggers the application of a Well Visit Needed flag, and ultimately an alert.

**Patient Information**

Patient Flags: Well Visit Needed

PCP:

Custom 1:

Custom 2:

Custom 3:

Old ID#:

Relation to Bill Payer: Child

<input type="checkbox"/>	Dismissed
<input type="checkbox"/>	Inactive
<input type="checkbox"/>	Missed Appt
<input type="checkbox"/>	Needs Extra Time
<input type="checkbox"/>	Transferred
<input checked="" type="checkbox"/>	Well Visit Needed



# Well Check/Next PE reminders

**Patient Details** John Canning 5 yrs, 10 mos 07/08/16 M

**Recent and Upcoming Appointments**

Last Visit: 04/21/22 (3w 5d ago) Crusher  
Dx: Cough  
Last Physical: 06/12/21 (11m ago)  
Next Physical Due: 06/12/22  
Scheduled Appts.: none

**Appointment History**

Date	Reason	
05/17/22 9:15am Tue	Sick Call	B
04/21/22 10:15am Thu	Sick Call	B
04/20/22 9:45am Wed	Sick Call	B
09/19/20 10:21am Sat	Earache (Sick Call)	
08/22/20 4:42pm Sat	Sick Call	
11/06/19 9:00am Wed	Sick Call	

▶ Details

**Account Balances**  
Test Test (Account # 1)

Aging	0-29 days	30-59 days	60-89 days	90-119 days	120+ days	Credit	Total Balance
	0.00	0.00	0.00	0.00	0.00	0.00	0.00

**Clinical Alert**

**Clinical Alert: Well Visit Needed**

**Clinical Alert:**  
This patient is due for a well visit.

Remove Reschedule Edit

Continue

1 - 6 of 6

Removal Reason

Edit Close

# Well Check Recall

HOME

COVID-19

FINANCIAL PULSE

CLINICAL PULSE

PCMH

PATIENT POPULATION

**One Family Pediatrics**  
**Cumming, GA**

**Clinical Pulse**

What is the Clinical Pulse?

1

# Well Check Recall

- Step 1: Call the family
  - Step 2: Send a postcard
  - Step 3: Dismissal Warning Letter
  - Step 4: Dismissal letter
- 
- Notify sends an email every month about missing well check

# Well Check Recalls & Broadcast Messaging

- Clients can use broadcast messaging to remind families *en masse* that their child is due for a well visit.
- Broadcasts can be sent to a variety of phone numbers and emails connected to the patient:
  - Home accounts
  - Portal accounts
  - Confidential contact

# Well Check Recalls & Broadcast Messaging

**Report Library**

## Well Visit Recall

Recall patients who are overdue for well visits.

**Edit Categories** Front Desk, Patient, Patient Recall

**Visit Date**  
Last 3 Years From 05/17/2019 to 05/17/2022

**Deceased Status**  
Not Deceased

**Exclude by Patient Flag**  
**Edit** 3 Patient Flags Excluded  
Dismissed  
Inactive  
Transferred

**Physical Due**  
Last 365 Days From 05/17/2021 to 05/17/2022

**Patient Age**  
From 3 yrs 0 mos through 17 yrs 0 mos  
05/18/2004 through 05/17/2019

**Exclude by Scheduled Appointment**  
Appointment Date  
Next 90 Days From 05/17/2022 to 08/15/2022

Exclude by Appointment Reason  
**Edit** 29 Appointment Reasons Excluded

Exclude by Appointment Location

**Back** **Schedule** **Customize Report** **Close** **Generate**

Use the Preventive Care Recall or create your own custom Well Visit Recall reports for generating lists of overdue patients.

# Well Check Recalls & Broadcast Messaging

**Export**

Save as PDF

Save as CSV

Send Message to Patients via

Text (SMS) messages are sent to mobile phone numbers from patients' home account home phone, work phone, cell phone, emg phone, patient confidential communication preferences, and portal user phone.

Hello this is Bedrock Pediatrics with a reminder that your child is due for a well visit. Please call our office at 800-722-1082 to schedule a visit!

150/160

**You can create and send a reminder message via SMS, email, or both.**

## Why should Infants and Toddlers have regular well check appointments?

Dental Health and Fluoride

Breastfeeding Support

Autism Screening

Car Seat Safety

Birth Marks

Potty Training

Anemia

Sleep

Rashes

Head Shape

Child-Proofing

Literacy Support

Asthma/Wheezing

Behavior and Tantrums

Weight/Length/Head Growth



Strength and Coordination

Poisoning Prevention

Vision Screening

Communication

Heart Murmurs

Lead Toxicity

Hernias

Reflexes

Screen Time

Constipation

Hip Dysplasia

Life-Saving Vaccines

Vision/Hearing Problems

Changing Nutritional Needs

Ear Infections and Chronic Fluid in Ears

# WE MISS YOU!

Your child is past due for a well checkup. Please call the office to schedule the visit, or to let us know that you have changed pediatric offices.

**678.962.7337**

# Well Check Postcards

## Why should school-aged children have regular well check appointments?

Dental Health and Fluoride

Recurrent Infections

Cholesterol Screening

Car Seat Safety

Exercise

Scoliosis

Helmets

Sleep

Lice

Social Skills

School Success

Personal Safety

Weight/Height/BMI

Assess Strength & Flexibility

Asthma/Allergy Management



ADHD & Anxiety Screening

Night-time Wetting

Nutrition Choices

Heart Murmurs

Self-advocacy

Screen Time

Skin Care

Hernias

Sunscreen

Constipation

Sleep Expectation

Life-saving Vaccines

Precocious Puberty

Anatomic Development

Vision/Hearing Screening

# WE MISS YOU!

Your child is past due for a well checkup. Please call the office to schedule the visit, or to let us know that you have changed pediatric offices.

**678.962.7337**

# Well Check Postcards



## Why should teens have regular well check appointments?

- 
- Reproductive Health/Menstrual Problems
  - Depression/Anxiety Screening
  - Cholesterol Screening
  - Thyroid Disease
  - Independence
  - Scoliosis
  - Acne
  - Obesity
  - Exercise
  - Sports Injuries
  - School Success
  - Personal Safety
  - Personal Hygiene
  - Adult Health Transitions
  - Asthma/Allergy Management
  - Risk Assessment/Mental Health
  - Life-Saving Vaccines
  - Nutrition Choices
  - Heart Murmurs
  - Self-advocacy
  - Screen Time
  - STDs
  - Hernias
  - Sunscreen
  - Constipation
  - Sports Clearance
  - Inadequate Sleep
  - Vitamin Deficiencies
  - Vision/Hearing Screening
  - Precocious or Delayed Puberty

## WE MISS YOU!

Your child is past due for a well checkup. Please call the office to schedule the visit, or to let us know that you have changed pediatric offices.

**678.962.7337**

# Well Check Postcards



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Suite 301  
Cumming, Ga 30041  
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# Well Check Postcards