

# Are you charting like it's 2024?

(aka Would Captain Config, Billing King, and Shock Doc detect foul play in your EHR?)

Lynne Gratton, CPPM  
Brian Kennedy, CPC-A

Hiral Lavania, MD  
One Family Pediatrics

UC  
2024

# Session Goals

1. Review

2. D

3. Work

F

4. Using

**KABOOM**

# The New Forms!

- Signature of provider selection on the fly!
- Responses typed into a box instead of a line!





Hiral Lavania, MD, FAAP, IBCLC | Priya Jothi, MD, FAAP  
onefamilypediatrics.com  
2575 Peachtree Pkwy, Suite 301  
Atlanta, GA 30041  
(P) 678-962-7337 | (F) 844-662-3114

Patient First Name Patient Last Name Patient Birth Date

Today's Date

### Step 1: Warning Signs

- Response
- Response
- Response

### Step 2: Internal coping strategies - things I can do to take my mind off my problems without contacting another person

- Response
- Response
- Response

### Step 3: People and social settings that provide distraction

- Name: Response Phone: Response
- Name: Response Phone: Response
- Place: Response
- Place: Response

### Step 4: People whom I can ask for help

- Name: Response Phone: Response
- Name: Response Phone: Response
- Name: Response Phone: Response

### Step 5: Professionals or agencies I can contact during a crisis

### Step 5: Professionals or agencies I can contact during a crisis

- Clinic Name Dr. Lavania or Anna at One Family Pediatrics Phone: 678-962-7337
- Clinic Name: Response Phone: Response
- Suicide Prevention Lifeline: 1-800-273-TALK (8255)
- Local Emergency Service: Response  
Local Emergency Phone: Response  
Local Emergency Address: Response

### Step 6: Making the environment safe

- Response
- Response

### The one thing that is most important to me and worth living for is:

Response

Patient Name: Patient Full Name

Signature:

Parent Name:

Signature:

Provider Name: Signature - Provider Full Name

Signature: Signature - Image

■ PREPARTICIPATION PHYSICAL EVALUATION

PHYSICAL EXAMINATION FORM

Name: John Canning Date of birth: 03/14/16

PHYSICIAN REMINDERS

- Consider additional questions on more-sensitive issues.
  - Do you feel stressed out or under a lot of pressure?
  - Do you ever feel sad, hopeless, depressed, or anxious?
  - Do you feel safe at your home or residence?
  - Have you ever tried cigarettes, e-cigarettes, chewing tobacco, snuff, or dip?
  - During the past 30 days, did you use chewing tobacco, snuff, or dip?
  - Do you drink alcohol or use any other drugs?
  - Have you ever taken anabolic steroids or used any other performance-enhancing supplement?
  - Have you ever taken any supplements to help you gain or lose weight or improve your performance?
  - Do you wear a seat belt, use a helmet, and use condoms?
- Consider reviewing questions on cardiovascular symptoms (Q4-Q13 of History Form).

EXAMINATION		
Height: <u>77.17</u> in	Weight: <u>160.16</u> lb 0 oz	
BP: <u>122/80</u>	Pulse: <u>78</u> bpm	Vision: R 20/ <input type="checkbox"/> L 20/ <input type="checkbox"/> Corrected? <input type="checkbox"/> Y <input type="checkbox"/> N
MEDICAL	NORMAL	ABNORMAL FINDINGS
Appearance <ul style="list-style-type: none"> <li>Marfan stigmata (kyphoscoliosis, high-arched palate, pectus excavatum, arachnodactyly, hyperlaxity, myopia, mitral valve prolapse [MVP], and aortic insufficiency)</li> </ul>	<input checked="" type="checkbox"/>	
Eyes, ears, nose, and throat <ul style="list-style-type: none"> <li>Pupils equal</li> <li>Hearing</li> </ul>	<input checked="" type="checkbox"/>	
Lymph nodes	<input checked="" type="checkbox"/>	
Heart <ul style="list-style-type: none"> <li>Murmurs (auscultation standing, auscultation supine, and ± Valsalva maneuver)</li> </ul>	<input checked="" type="checkbox"/>	
Lungs	<input checked="" type="checkbox"/>	
Abdomen	<input checked="" type="checkbox"/>	
Skin <ul style="list-style-type: none"> <li>Herpes simplex virus (HSV), lesions suggestive of methicillin-resistant Staphylococcus aureus (MRSA), or tinea corporis</li> </ul>	<input checked="" type="checkbox"/>	
Neurological	<input checked="" type="checkbox"/>	
MUSCULOSKELETAL	NORMAL	ABNORMAL FINDINGS
Neck	<input checked="" type="checkbox"/>	
Back	<input checked="" type="checkbox"/>	
Shoulder and arm	<input checked="" type="checkbox"/>	
Elbow and forearm	<input checked="" type="checkbox"/>	
Wrist, hand, and fingers	<input checked="" type="checkbox"/>	
Hip and thigh	<input checked="" type="checkbox"/>	
Knee	<input checked="" type="checkbox"/>	
Leg and ankle	<input checked="" type="checkbox"/>	
Foot and toes	<input checked="" type="checkbox"/>	
Functional <ul style="list-style-type: none"> <li>Double-leg squat test, single-leg squat test, and box drop or step drop test</li> </ul>	<input checked="" type="checkbox"/>	

\* Consider electrocardiography (ECG), echocardiography, referral to a cardiologist for abnormal cardiac history or examination findings, or a combination of those.

Name of health care professional (print or type): \_\_\_\_\_ Date: 03/19/24  
 Address: 2575 Peachtree Parkway Suite 301 Cumming, GA 30041-7559 Phone: (678) 962-7337  
 Signature of health care professional: \_\_\_\_\_, MD, DO, NP, or PA

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Patient  
  
 Signature  
  
 Vision R 20/?  
  
 Vision L 20/?  
  
 Corrected? Type Y or N



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2024

PCC  
Pediatric EHR Solutions

# Snap Text

- We do not have defaults, but we encourage new clients use them any time they will type in the same thing more than once a day!
  - Texting patients, portal message instructions, visit notes, and more!

#chol	Discussed with parents and child about high cholesterol levels. Discussed cholesterol handout and normal levels. Reiterated the importance of healthy diet and exercise. Increase fiber to diet and have 1 hour of exercise daily outside of school activities. Will recheck cholesterol level in 3 months on diet and exercise changes.
#cold	Avoid OTC cold medications. Saline drops 3 drops each nostril every 1-2 hrs as needed (avoid suctioning too much or you risk worsening infection). Use humidifier in room. Take warm showers without the exhaust and have him sit in a steamy bathroom.
#wart	Discussed with parents. Wart on ball taped to area every night for 3 weeks. Parents chose:

## For Staff - New hire

#fam	Stimulate mental health, asthma, hearing.
#soc	Who lives in Pets Smoking Grade, daycare Carseat vs seat
#labs	Your child recently had a lab. If you completed them or if you decided not to. Please let us know by returning the office. Thank you, have a great day!
#task	Your child recently had a -- lab referral --. This follow up determine if it has been completed or if you decided not to have it done. Please let us know by returning to this message or by calling the office. Thank you, have a great day!



# Fake Users aka User Groups

Assign tasks to a group of users, not a specific person. Why?

- Order memory!



# Fake Users aka User Groups

- Front Desk
- Nurse/MA
- Billing Dept
- Pending PPD
- Pending Radiology
- Pending Referral
- Referral Coordinator
- Pending Lab
- Overnight Lab

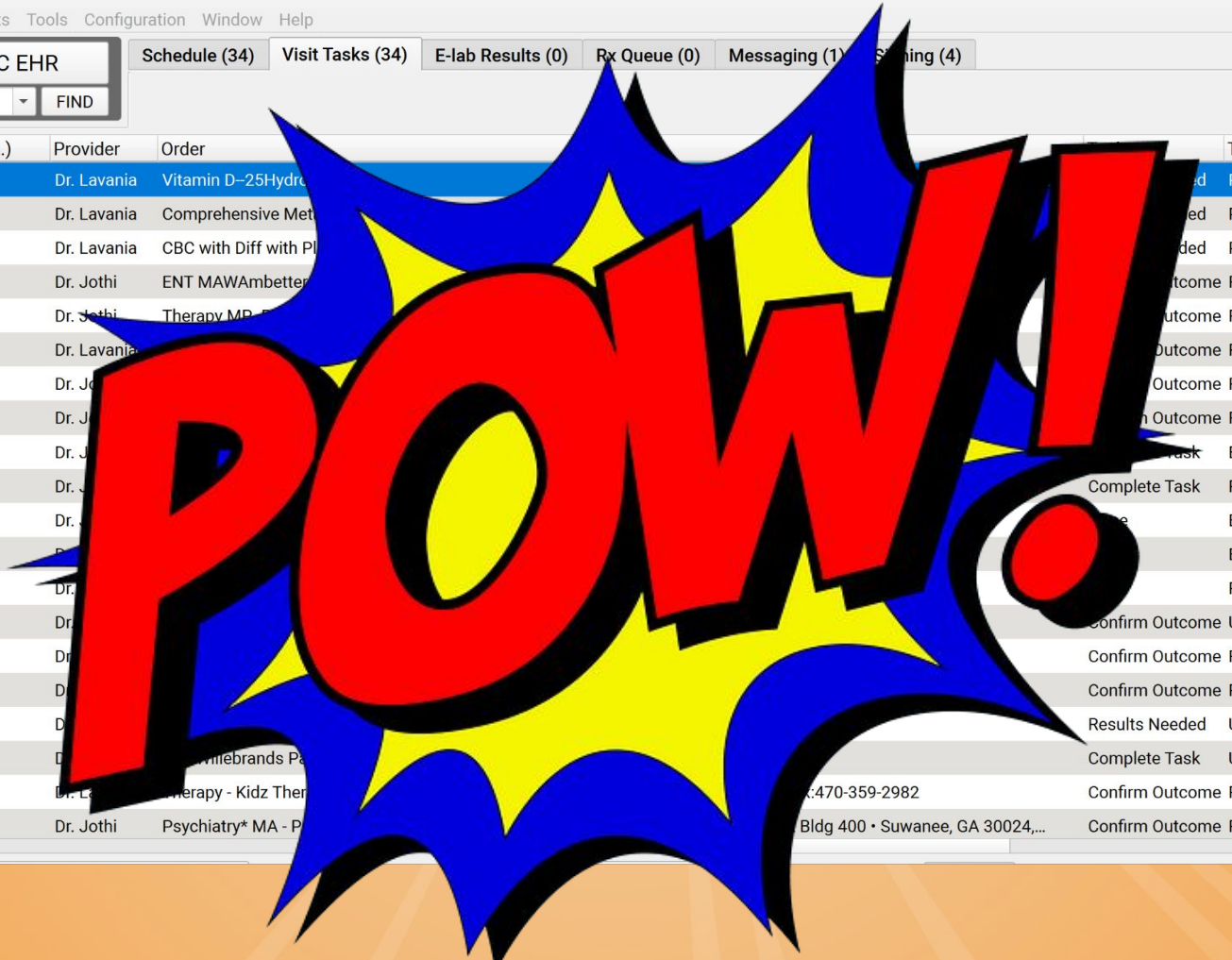
# Fake Users

In case someone is out or no longer works in your office

- Back Office
- Front Office
- Pending Labs
- Referral Referral

FIND

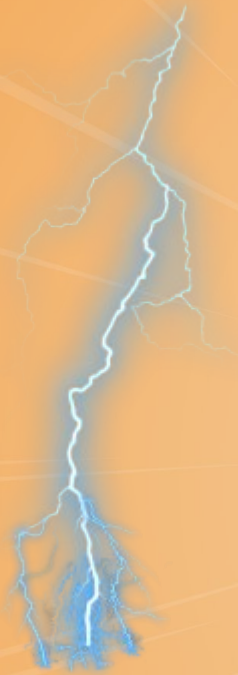
Visit Status (Rm.)	Provider	Order	To
Gone	Dr. Lavania	Vitamin D-25Hydro	Pending Lab
Gone	Dr. Lavania	Comprehensive Met	Pending Lab
Gone	Dr. Lavania	CBC with Diff with Pl	Pending Lab
Gone	Dr. Jothi	ENT MAWAmbetter	Outcome Referral Referral
Gone	Dr. Jothi	Therapy MR	Outcome Referral Referral
Gone	Dr. Lavania		Outcome Referral Referral
Gone	Dr. Jothi		Outcome Referral Referral
Gone	Dr. Jothi		Outcome Referral Referral
Gone	Dr. Jothi		Task Back Office
Gone	Dr. Jothi		Complete Task Referral Referral
Gone	Dr. Jothi		Back Office
Gone	Dr. Jothi		Back Office
Gone	Dr. Jothi		Referral Referral
Gone	Dr. Jothi		Confirm Outcome Unassigned
Gone	Dr. Jothi		Confirm Outcome Referral Referral
Gone	Dr. Jothi		Confirm Outcome Referral Referral
Gone	Dr. Jothi		Results Needed Unassigned
Gone	Dr. Jothi		Complete Task Unassigned
Gone	Dr. Jothi		Confirm Outcome Referral Referral
Gone	Dr. Jothi		Confirm Outcome Referral Referral



# Visit Status

Our defaults now include:

- Check Out
- Results Ready
- Breastfeeding
- RProv
  - Shout out to the PCC EHR Queen at Pediatric Associates of Mt Carmel for this one



☰	With Sean ▾	✓
☰	with Peyton ▾	✓
☰	with Ashanti ▾	✓
☰	with Rocio ▾	✓
☰	with Dyneesha ▾	✓
☰	With Maggie ▾	✓
☰	With Linda ▾	✓
☰	With Brooke ▾	✓
☰	with Student ▾	✓
☰	CHADIS ▾	✓
☰	Ready-Prov ▾	✓
☰	with Dr. Lavania ▾	✓
☰	With Dr. Jothi ▾	✓
☰	Ready-Nurse ▾	✓
☰	Clean Room ▾	✓

☰	Finished ▾	✓
☰	Nursing ▾	✓
☰	Breathing Tx ▾	✓
☰	WalkIn ▾	✓
☰	In Car ▾	✓
☰	Vitals ▾	✓
☰	LabPending ▾	✓
☰	Need Referral ▾	✓
☰	Radiology F/u ▾	✓
☰	Lab F/u ▾	✓
☰	STAT ▾	✓



# Portal Templates

- Agreements
  - Have portal users e-sign your financial policy
  - Use snap text to easily send a portal message with instructions!
- Attachments
  - Make it easy to upload insurance cards
  - Snap text works here as well!

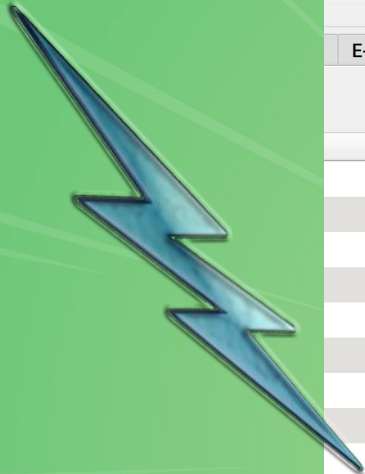
# Portal Templates

- Demographics Update
  - Ditch this and turn on Patient Pre-Check-in!

- Other

- Finally
- Or disa





E-lab Results (0) Rx Queue (0) Messaging (99+) Signing (4)						
Subject	Task	To	Docs	Billing Status	Sign	
Portal Message - Medication Refill Request	Portal Message					
Portal Message - Referral Request	Portal Message					
Portal Message - Referral Request	Portal Message					
Portal Message - Medications form	Portal Message					
Portal Message - Feeling better, still no ...	Portal Message	Priya Jothi M.D.				
Portal Message - Perceptions	Portal Message					
Portal Message - Katie Beckett forms	Portal Message	Front Office				
Portal Message - School Forms	Portal Message					
Portal Message - Medication Refill Request	Portal Message					
Portal Message - Medication for N. ...	Portal Message					
Portal Message - Baby Acne	Portal Message					
Portal Message - 3231 and 3300 forms	Portal Message					
Portal Message - Fever and small cough	Portal Message					
Portal Message - Ear rashes	Portal Message	Front Office				
Portal Message - Vaccines	Portal Message					
Portal Message - Noras rash	Portal Message					
Portal Message - Referral	Portal Message	Back Office				
Portal Message - Appointment Request	Portal Message					
Portal Message - Dermatitis around areola	Portal Message					
Portal Message - Rashes on R ear	Portal Message					

Due:

Display:

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# Immunizations

Display NOTHING by default


- Every time you have PCC add a new vaccine, make sure to turn it off
- Only see the vaccines the patient has received

# Billing Configuration

- Default procedures
  - Telemed codes added
- Default diagnosis
  - We removed the Z23, because of...
- Order Mapping
  - Vaccines now have the Z23, which links automatically when billing

# Documents

- Have you added a Trash bucket?



**BAM!**

# Visit Reasons

Tired of staff forgetting to change the visit reason when scheduling?

- Our default visit reason is now “Select a Reason”
  - Once again, a shout out to the PCC EHR Queen!

# Growth Charts

- Make sure your Growth Charts are configured to appear in the portal.

Visit:

Sick Visit - OFP

Appointment Details

Informant/Relationship

Scribe

Chart-wide

Followup Orders

Handout Orders

Forms

Vitals

Reason For Visit (2-3 words)

History of Present Illness: I...

Chief Complaint

Medications

Immunization Consent

Immunizations

Visit Documents

Confidential Notes

Vitals

Weight

 lbs  oz

+

Height

 cm

+

BMI

Length

 cm

+

Temperature

 °F

+

Temporal

Respiratory Rate

 bpm

+

Blood Pressure

 s /  d

+

Unspecified Location

Sitting

Pulse

 bpm

+

O<sub>2</sub> Saturation

 %

+

➔ More

Vital Notes

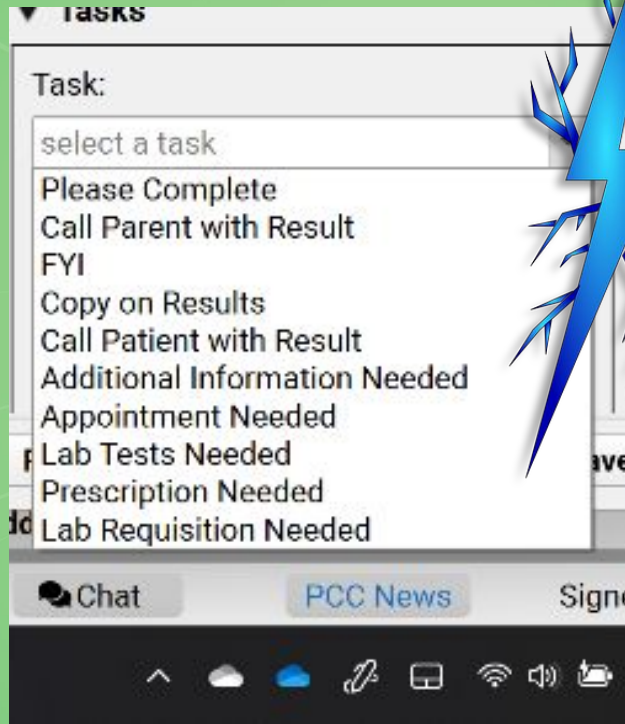
Growth Charts

Growth Charts are not available when patient's sex is unknown.

# Task Types - Documents

- **\*\* URGENT \*\***
- Add New Insurance
- Complete Document
- ED/Hosp Discharge
- Left Message
- Please Review
- Records Request
- Referral Needed

# What We Use





# Protocols: Well Child Checks

Edit Component - Development

## Edit Component

Component Name:

Component Type: Generic Check

Display the last saved answer for each question.

Item Name	Clear Historical Answers for Item	Delete Item
12 mos: Stands with supports or taking steps. Looks for objects that ...	<input type="checkbox"/>	<input type="checkbox"/>
15 mos: Bangs toys together. Walking on own. Drinks from a cup. Say...	<input type="checkbox"/>	<input type="checkbox"/>
18 mos: Walks up stairs with help. Scribbles. Stacks blocks. Uses sp...	<input type="checkbox"/>	<input type="checkbox"/>
1 mos: Smiles purposefully. Hears you and sees you pretty well.	<input type="checkbox"/>	<input type="checkbox"/>
2.5 years: Plays pretend. Other people understand half of what they a...	<input type="checkbox"/>	<input type="checkbox"/>
2 mos: Watches you across the room. Coos. Can hold head up and tri...	<input type="checkbox"/>	<input type="checkbox"/>
2 years: Uses 2 word phrases with 50 word vocabulary. Parallel plays ...	<input type="checkbox"/>	<input type="checkbox"/>
3 years: Uses sentences. Understand 75% speech. Interacts with peer...	<input type="checkbox"/>	<input type="checkbox"/>
4 mos: Holds head steadier. Rolling from front to back. Smiles at peo...	<input type="checkbox"/>	<input type="checkbox"/>
4 years: Fantasy plays. Knows name/age/gender. Answers appropriat...	<input type="checkbox"/>	<input type="checkbox"/>
5 years: Hops/skips/balances on 1 foot. Ties a knot. Good articulatio...	<input type="checkbox"/>	<input type="checkbox"/>
6 mos: May cry with strangers. Likes mirrors. Rolls both way. Strings ...	<input type="checkbox"/>	<input type="checkbox"/>
9 mos: Clingy with familiar people. Understands "no." Makes sounds l...	<input type="checkbox"/>	<input type="checkbox"/>

# Protocols: Well Child Checks

Edit Component - Well Child History

**Edit Component**

Component Name:

Component Type: Generic Check

Display the last saved answer for each question.

Item Name	Clear Historical Answers for Item	Delete Item
Activity: Behavior/Temperament	<input type="checkbox"/>	<input type="checkbox"/>
Activity: Extracurricular activities/Interests/Volunteering	<input type="checkbox"/>	<input type="checkbox"/>
Activity: Physical activity at least 1-2 hrs per day	<input type="checkbox"/>	<input type="checkbox"/>
Activity: Plays well	<input type="checkbox"/>	<input type="checkbox"/>
Activity: Screen time < 2 hrs	<input type="checkbox"/>	<input type="checkbox"/>
Activity: Tummy Time	<input type="checkbox"/>	<input type="checkbox"/>
Diet: <4oz/day Juice and no Soda	<input type="checkbox"/>	<input type="checkbox"/>
Diet: Bottle and Pacifiers weaned	<input type="checkbox"/>	<input type="checkbox"/>
Diet: Breastfeeding 8-10 times in 24 period for first 6 mos, 5-6 time...	<input type="checkbox"/>	<input type="checkbox"/>
Diet: Calcium Source (milk <16oz per day), cheese, yogurt, dark gre...	<input type="checkbox"/>	<input type="checkbox"/>
Diet: Eating good variety of fruits and veggies	<input type="checkbox"/>	<input type="checkbox"/>
Diet: Formula - ounces per bottle, # of bottles per day	<input type="checkbox"/>	<input type="checkbox"/>
Diet: Giving iron rich foods or supplements	<input type="checkbox"/>	<input type="checkbox"/>
Diet: Protein (meats, beans, lentils)	<input type="checkbox"/>	<input type="checkbox"/>
Diet: Solids started by 6 mos; eating good variety of fruits and vegg...	<input type="checkbox"/>	<input type="checkbox"/>
Diet: Vit D 400-800IU/day for infants/toddlers; 1000-2000IU/day for...	<input type="checkbox"/>	<input type="checkbox"/>
Elimination: Color and # of dirty diapers, # of wet diapers	<input type="checkbox"/>	<input type="checkbox"/>
Elimination: Soft stools daily	<input type="checkbox"/>	<input type="checkbox"/>

Menarche: Onset/Heavy bleeding/Heavy cramping	<input type="checkbox"/>	<input type="checkbox"/>
Potty Trained (Yes or In Process)	<input type="checkbox"/>	<input type="checkbox"/>
Risk: Any head injury or concussion in the past year	<input type="checkbox"/>	<input type="checkbox"/>
Risk: Any palpitations/chest pain/fainting/passing out in the past y...	<input type="checkbox"/>	<input type="checkbox"/>
Risk: Recurrent joint pains or fractures in the past year	<input type="checkbox"/>	<input type="checkbox"/>
Safety: Able to swim	<input type="checkbox"/>	<input type="checkbox"/>
Safety: If firearms are present, locked away	<input type="checkbox"/>	<input type="checkbox"/>
Safety: Knows parent names, address, phone number	<input type="checkbox"/>	<input type="checkbox"/>
Safety: Understand stranger and street safety	<input type="checkbox"/>	<input type="checkbox"/>
Safety: Wears helmet when riding bike/scooter/skateboard	<input type="checkbox"/>	<input type="checkbox"/>
Safety: Wears sunblock during long periods in the sun	<input type="checkbox"/>	<input type="checkbox"/>
School: Accommodations (IEP/504 plan)	<input type="checkbox"/>	<input type="checkbox"/>
School: Behavior or Academic Concerns	<input type="checkbox"/>	<input type="checkbox"/>
School: Grade/Performance	<input type="checkbox"/>	<input type="checkbox"/>
School: Post high school planning	<input type="checkbox"/>	<input type="checkbox"/>
Sees Dentist	<input type="checkbox"/>	<input type="checkbox"/>
Sleep: Stretch in hours	<input type="checkbox"/>	<input type="checkbox"/>
Social: Gets along with family	<input type="checkbox"/>	<input type="checkbox"/>
Social: Makes friends	<input type="checkbox"/>	<input type="checkbox"/>
Social: Participates in after-school activity	<input type="checkbox"/>	<input type="checkbox"/>

# Protocols: Well Child Checks

## Screening

Edit

➔ Create a portal for patient (12yrs and up)

Ordered

▼ Tasks: 1 (0 Completed)

➔ Task: Complete Task

Edit

➔ Adolescent Screen #624 (13+ years)



Ordered

SNOMED CT: Suicide risk assessment

Edit

➔ Adolescent Confidential Questions #823 (13+ years)



Ordered

Edit

➔ GAD-7 #878 (13+ years)



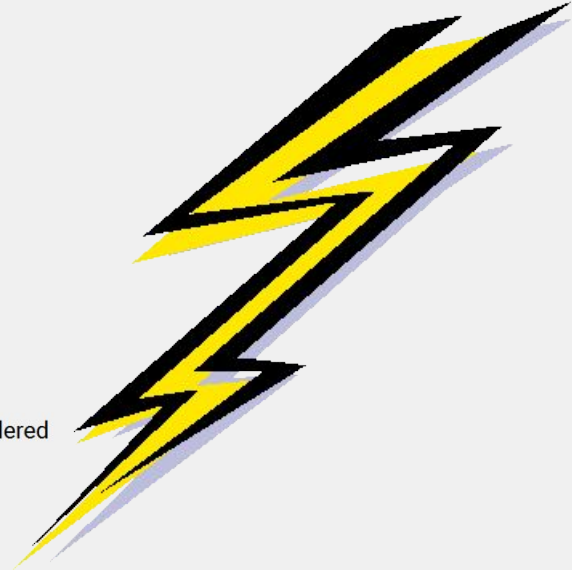
Ordered

To:  
Due: 03/19/24

To:  
Due: 03/19/24

To:  
Due: 03/19/24

To:  
Due: 03/19/24



# Protocols: Well Child Checks

**Well Child History**

Diet: Breastfeeding 8-10 times in 24 period for first 6 mos, 5-6 times from 6-9 mos, on demand >9mos  
Last Answer 02/29/2024: "mostly formula - mom not producing much breastmilk" [Peyton Salo]  
notes

Diet: Formula - ounces per bottle, # of bottles per day  
Last Answer 02/29/2024: "30 mL every 3-4 hours" [Peyton Salo]  
notes

Diet: Vit D 400-800IU/day for infants/toddlers; 1000-2000IU/day for 3+ years  
Last Answer 02/29/2024: "through formula" [Peyton Salo]  
notes


Diet: Solids started by 6 mos; eating good variety of fruits and veggies  
notes

Elimination: Color and # of dirty diapers, # of wet diapers  
Last Answer 02/29/2024: "brown/orange dirty diapers 8 times yesterday; 7 wet diapers yesterday" [Peyton Salo]  
notes

Sleep: Stretch in hours  
Last Answer 02/29/2024: "3-4 hours" [Peyton Salo]  
notes

Activity: Behavior/Temperament  
Last Answer 02/29/2024: "no concerns" [Peyton Salo]  
notes

Activity: Tummy Time  
notes



# Protocols: Well Child Checks

## 1-6 Mos OFP

### Development

✓ 4 mos: Holds head steadier. Rolling from front to back. Smiles at people. Babbles. Can hold a toy. Pushes down on legs when feet are on a hard surface.  
yes pt is rolling [Dyneesha Pardo]

#### Select All

Newborn: Able to be calmed down. Hears you and sees you pretty well. Able to lift head when on tummy.

notes

1 mos: Smiles purposefully. Hears you and sees you pretty well.

notes

2 mos: Watches you across the room. Coos. Can hold head up and tries to push up on tummy. Brings Hand to Mouth

Last Answer 01/22/2024: "yes" [Ashanti Bridges]

notes

4 mos: Holds head steadier. Rolling from front to back. Smiles at people. Babbles. Can hold a toy. Pushes down on legs when feet are on a hard surface.

notes

6 mos: May cry with strangers. Likes mirrors. Rolls both way. Strings vowels together. May respond to name. Puts objects in mouth. Transfers toys from 1 hand to another. Sitting on own briefly. Bouncing on legs when standing with support. Rocks back and forth on all 4 or crawling.

notes

# Protocols: Sick Visits

Visit:
Sick Visit - OFP
<b>Appointment Details</b>
Informant/Relationship
Scribe
Chart-wide
Followup Orders
Handout Orders
Forms
Vitals
Reason For Visit (2-3 words)
History of Present Illness: I...
Chief Complaint
Medications
Immunization Consent
Immunizations
Visit Documents
Confidential Notes

Ear Ache - OFP  
Ear Follow Up - OFP  
Epistaxis  
eRx Encounter  
Eye - OFP  
Fever - OFP  
Flu - OFP  
Flu Vaccine - OFP  
Fussy Baby - OFP  
General Sick - OFP  
Guanfacine Side Effects - OFP  
Head Injury - OFP  
Headache - OFP  
Height Prediction  
Homebirth - OFP  
Hospital Newborn Visit  
Immunizations Only - OFP  
Injury - OFP

Rash - OFP  
Referral Protocol  
Reflux - OFP  
Risperidone Side Effects - OFP  
SBIRT  
Sick Visit - OFP  
Sleep Screen  
Sore Throat - OFP  
Sports Physical  
Stimulant Side Effects - OFP  
Suture Removal - OFP  
Telemedicine  
Time of visit - OFP  
Tongue Tie - OFP  
Travel - OFP  
Unsolicited CHADIS Results  
Unsolicited E-lab Results  
Urticaria - OFP  
UTI - OFP  
Wart Removal - OFP  
Weight Check - OFP  
Weight Check Newborn - OFP



# Protocols: Sick Visits

**Auto-Notes Configuration** Protocol:  User:

**Ear Ache - OFP**

**Physical Exam**

NL  
Practice Default:

N/E  
Practice Default:

Eyes

ABN  
Practice Default:

NL  
Practice Default:

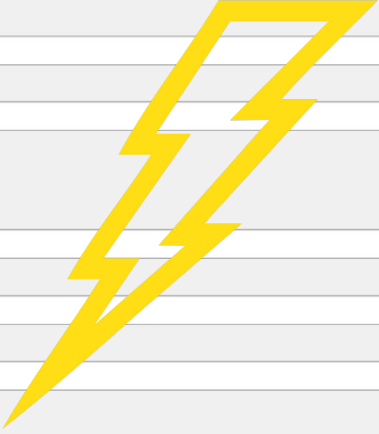
N/E  
Practice Default:

Ears (laterality, type of fluid, rupture, acute/chronic/recurrent)

ABN  
Practice Default:

NL  
Practice Default:

N/E  
Practice Default:



# Protocols: Sick Visits

**E&M Problem Level**

**Select All**

Level 4: 1 chronic illness with exacerbation/progression

Molluscum

add item

notes

**E&M Data Level**

**Select All**

Level 3: Assessment requiring and independent historian

notes

add item

notes

**E&M Risk Level and by Time**

**Select All**

Level 3: Low risk

notes

add item

notes

## Longitudinal Care

### G2211

**Select All**

- during an E&M visit only. Visit complexity inherent to evaluation and management associated with medical care services that serve as the continuing focal point for all needed health care services and/or with medical care services that are part of ongoing care related to a patient's single, serious condition or a complex condition. I have reviewed immunizations, problem list, chronic problems, specialists that the patient sees as related to this diagnosis.

Will monitor molluscum for now

- By being this patient's PCP, I am providing longitudinal care.

notes

- add item

notes



# Billing Encounters in the EHR

You can skip the visit and go straight to charge posting!

Ideal for:

- Hospital Visits
- Form Fees,
- Care Management billing

**Krista Hetrick** PCC# 1

Medical Summary

Demographics

History

- Visit History
- Immunization History
- Flowsheets
- Growth Charts
- Documents
- Billing History**
- Visit: 06/20/24
- Sick - Bright Futures

**Billing Status:**  
Not Ready

This visit is not ready for billing.

**Signed:**  
unsigned

**Appointment Details:**  
Appt Date: 06/20/24  
Appt Location: Winooski Pediatrics  
Place of Service: Winooski Pediatrics  
Appt Provider: Elizabeth Mary Casey, MD  
Provider of Service:

**Account:**  
Tom Hetrick (Account #1623)  
123 Main  
SOUTH BURLINGTON, VT 05154

**Billing History Index** Find Filter:  Find ◀ ▶

Date	Provider of Service	Place of Service	Billing Status	Signed	Billing Account	Docs
06/20/24	Elizabeth Mary Casey, MD	Winooski Pediatrics	Not Ready		Tom Hetrick (# 1623)	
03/14/23	Elizabeth Mary Casey, MD	Winooski Pediatrics	Posted	n/a	Tom Hetrick (# 1623)	
10/19/20	James Davidson, Jr. M.D.	Winooski Pediatrics	Posted	n/a	Tom Hetrick (# 1623)	
09/17/20	Office	Winooski Pediatrics	Posted	n/a	Tom Hetrick (# 1623)	
09/15/20	Mark Williams, M.D.	Winooski Pediatrics	Posted	n/a	Tom Hetrick (# 1623)	
01/09/20	Mark Williams, M.D.	Winooski Pediatrics	Posted	n/a	Tom Hetrick (# 1623)	

Print Payments Create Encounter Post Charges View Documents Close Save Save + Exit

2 0 0 Chat PCC News Signed in: pcc at Winooski

# Billing Encounters in the EHR

For Hospital Charges, simply select the hospital place of service to make the admit and discharge dates appear!

**PCC EHR**  
File Edit Reports Tools Configuration Window Help

**Krista "Krissy" Joseph Hetrick III**

**Post Charges**

**Encounter Details**

Provider of Service: Beverly Crusher, MD  
Place of Service: UVM Medical Center Inpatient  
Admit Date:  
Discharge Date:

**Diagnoses**

select an ICD-10 diagnosis

**Procedures**

select a procedure Primary: Capital Blue Cross

**Claim Information**

Service Provider: Crusher PCP: None

Billing Provider: Beverly Crusher, MD  
Referring Provider: select a referring provider  
EPSDT Referral Indicator: select an EPSDT referral indicator  
Prior Authorization Number:  
Date First Seen:

Emergency Visit:  No  Yes  
Accident Date:  
Auto Accident:  No  Yes  
Accident State: select a state

**Payments**

Tom Hetrick (Account # 1623)

Patient	Visit Reason	Insurance	Pers Due	Description
Krista "Krissy" Joseph Hetrick III		Capital BC Traditional	0.00	Today's Visit
			0.00	Previous Balance (as of 06/20/24)
			0.00	Balance

Previous Next Cancel Save + Post

Signed in: pcc at Winooski

# Billing Encounters in the EHR

When you add procedures, the date fields will appear for each entry!

Procedures Primary: Capital Blue Cross

Procedures	From	To	Units	Price	Insurance	Ins Due	Ins Adj	Pers Due	Discount	Source
<input checked="" type="checkbox"/> 99431 IH Newborn Care Initial H&E ▼ Dx: <i>There are no diagnoses linked to this procedure</i>	06/01/24	06/01/24	1	130.00	Primary ▼	130.00	0.00	0.00	0.00	Post
<input checked="" type="checkbox"/> 99433 IH Newborn Care Subsequent ▼ Dx: <i>There are no diagnoses linked to this procedure</i>	06/02/24	06/02/24	1	70.00	Primary ▼	70.00	0.00	0.00	0.00	Post
<input checked="" type="checkbox"/> 99238 IH Discharge < 30 min ▼ Dx: <i>There are no diagnoses linked to this procedure</i>	06/03/24	06/03/24	1	150.00	Primary ▼	150.00	0.00	0.00	0.00	Post
<b>Totals:</b>				350.00		350.00	0.00	0.00	0.00	

select a procedure ▼

# Payment Posting: Personal

Automatically links to the oldest open items, but can be distributed as you choose by selecting the "Distribution" dropdown

**Payments** Orlando J Orlando Account #5014 1230

Posting

**Payments**  
Orlando J Orlando (Account # 5014)

Pers Due Description

**714.00** Previous Balance (as of 06/25/24 09:29am)  
**-200.00** Unsaved Cash Payment  
**514.00** Balance

Transaction Date	Payment Type	Amount	Check #	Apply to Prev Bal	Unapplied	Provider
06/25/24	Cash Payment	200.00	cash	200.00	0.00	

▼ Distribution

Date	Patient	Code	Description	Charge	Personal Due	Distribution	Balance
06/14/19	Rodger Orlando	99460	Initial Nb Hospital Visit	1500.00	13.50	13.50	0.00
04/14/22	Roger Rabbit	90680	RotaTeq	110.00	106.50	106.50	0.00
		90460	Immuniz Admin W/Counsel	30.00	30.00	30.00	0.00
		90461	Immuniz Admin W/Counsel (Add. Antigens)	20.00	20.00	20.00	0.00
		90461	Immuniz Admin W/Counsel (Add. Antigens)	20.00	20.00	20.00	0.00
		90461	Immuniz Admin W/Counsel (Add. Antigens)	20.00	20.00	10.00	10.00
		96110	Developmental Testing	80.00	80.00	0.00	80.00
		90670	Prevnar 13	170.00	128.89	0.00	128.89

# Payment Posting: Edit Unlinked Payments

When viewing the history tab in the payment tool, unlinked payments are highlighted in orange

When you edit the payment, you can distribute the payment to existing open items or, by default, let the payment apply to the oldest open items

▶ 06/14/19	35.11 TOS Cash Payment		0.00
▶ 06/14/19	2.50 TOS Discount		0.00
▶ 05/17/19	18.11 Ins Adj - Personal	ACH33880099	18.11
▶ 05/15/19	13.11 Ins Adj - Personal	ACH22200008	13.11
▶ 05/14/19	15.22 TOS Cash Payment	cash	15.22
▶ 05/14/19	10.00 TOS Check Payment	Check#1332	10.00

# EHR Billing History: Unliked payments

When viewing the billing history for an encounter in the EHR you will also see which items are being covered by unapplied payments

Procedures:					
Dates	CPT	Units	Description	Amount	Diagnoses
04/14/22	99391-25	1	Mod PE under 1 yr	0.00	Z00.129
04/14/22	99174-59	1	Mod 59 Ocular Screen, instrument based, remote analysis	0.00	Z00.129
04/14/22	90460	1	Immuniz Admin W/Counsel	30.00	Z00.129
04/14/22	90461	1	Immuniz Admin W/Counsel (Add. Antigens)	20.00	Z00.129
04/14/22	90461	1	Immuniz Admin W/Counsel (Add. Antigens)	20.00	Z00.129
04/14/22	90461	1	Immuniz Admin W/Counsel (Add. Antigens)	20.00	Z00.129
04/14/22	96110	1	Developmental Testing	80.00	Z23
04/14/22	96161	1	Health risk screening of caregiver for benefit of the patient	0.00	Z23
04/14/22	90698	1	DTaP/Hib/IPV	0.00	Z00.129
04/14/22	90460	1	Immuniz Admin W/Counsel	30.00	Z00.129
			Payment (Unapplied)	(30.00)	
04/14/22	90460	1	Immuniz Admin W/Counsel	30.00	Z00.129
			Payment (Unapplied)	(30.00)	
04/14/22	90670	1	Prevnar 13	170.00	Z00.129
			06/14/19 TOS Cash Payment	(30.11)	
			04/21/23 TOS Check Payment	(11.00)	
			Payment (Unapplied)	(29.39)	
04/14/22	90680	1	RotaTeq	110.00	Z00.129
			05/06/23 TOS Cash Payment	(3.50)	
Totals:				Charges:	510.00
				TOS Cash Payment:	(33.61)
				TOS Check Payment:	(11.00)
				Payment (Unapplied):	(89.39)
				Balance:	376.00

# Payment posting: Insurance

You can also manually post insurance payments using the EHR Insurance Payment tool

Patient Flags: New Patient  
Account Flags: New Patient, New Pt Records

**Insurance Payment:**

Transaction Date	Check Number	Payment Type	Adjustment Type	Current Policy	Next Policy
06/25/24	68416841	Ins Pmt	Ins Adj	Aetna MC \$10 3541 Winchester	Personal

**Distribution:**

Date of Service	CPT	Charge Amount	Expected Copay	Pending Insurance	Payment	Adjustment	Personal Balance	CARC: Code	Covered Amount
06/25/24	99213	100.00	10.00	90.00	45.00	45.00	0.00	45	55.00
								3	
06/25/24	87880	30.00	0.00	30.00	8.00	20.00	2.00	45	10.00
Totals:		130.00	10.00	120.00	53.00	65.00	2.00		65.00

# Auto-Posting in the EHR

Post your ERA in the EHR

Noted Difference: EHR will post more payments than when using Practice Management

**Electronic Remittance Advice**

The source of the information displayed is the payor. Search:

Remittance	Processed	Payor	Check#	Amount
04/05/24		Cigna	202020	1343.05
04/05/24		United	1111111	192.30
04/04/24		United	1111112	255.47
04/04/24		United	1111114	175.02
04/04/24		United	1111116	0.00
04/04/24		United	1111118	171.76
04/04/24		United	1111120	100.33
04/04/24		United	1111121	109.50
04/04/24		United	1111122	121.87
04/04/24		United	1111124	0.00
04/04/24		Oxford	3030303	78.54
04/04/24		Oxford	3030304	207.63
04/04/24		Oxford	3030305	83.18

Status: Unprocessed

Page Up Page Down Page 1 / 1 Process View Close



# AI and Charting

New SOAP Note

Notes In-person Online

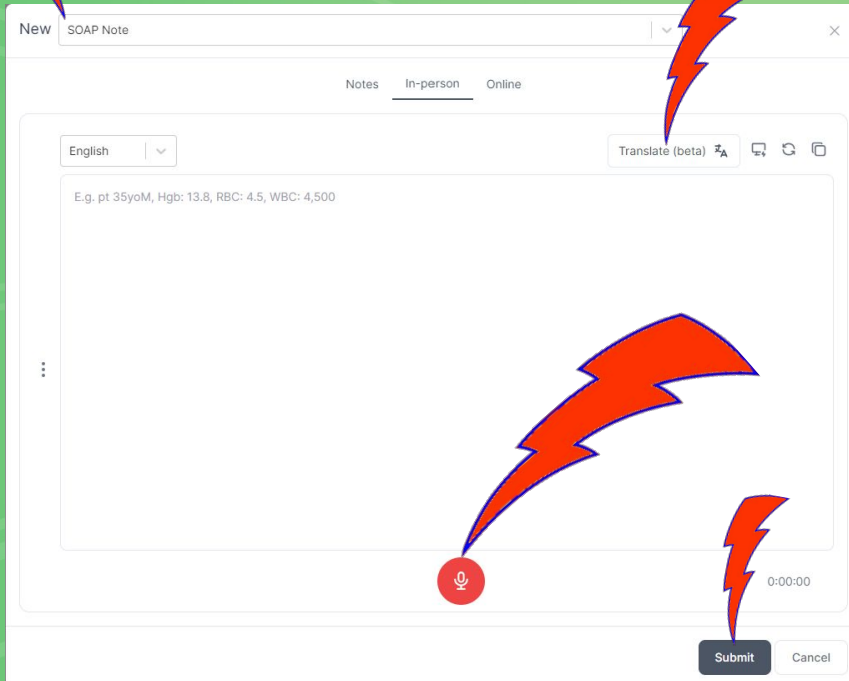
English

Translate (beta)

E.g. pt 35yoM, Hgb: 13.8, RBC: 4.5, WBC: 4,500

0:00:00

Submit Cancel



## History of Presenting Illness:

The patient, a young male, has been experiencing chronic fatigue, described by the parent as having been present for an extended period, possibly his entire life. The fatigue is characterized by a desire to lounge around, although he remains active, particularly in sports like hockey, where he reportedly keeps up with peers. Sleep patterns are regular, with bedtime at 8:30 PM and wake-up at 6:30 AM, without difficulty falling or staying asleep. However, the patient experiences nasal congestion attributed to allergies, which may contribute to his symptoms. The patient also reports frequent sore throats and stomach aches, occurring almost every other day, with a history of being evaluated for strep throat during a recent spring break. Despite these symptoms, the patient is a good eater and maintains a consistent growth curve, albeit on the lighter side, a trend observed since he was three months old. Allergy issues have been a long-standing concern, affecting his asthma and possibly contributing to his fatigue. The patient has tried various allergy medications, including Flonase and Zyrtec, with limited success. A recent suggestion included trying Singulair, with caution advised regarding potential mood changes. The patient's diet lacks milk but includes water, and there's an interest in increasing his intake of proteins and healthy fats to support his active lifestyle and possibly aid in mass gain.

# AI and Charting

Given the patient's history and symptoms, the following plan is recommended for the parents:

## Allergy Management:

Consider the introduction of Singulair as discussed, observing closely for any mood changes or nightmares. If these occur, discontinue use and inform the physician. Schedule an appointment with an allergist for a comprehensive evaluation and management plan, considering the patient's history of significant allergy issues.

## Dietary Adjustments:

Increase intake of proteins and healthy fats to support the patient's active lifestyle and growth needs. Suggestions include incorporating meat, fish, steak, peanut butter, eggs, and possibly smoothies with avocado, coconut milk, and other nutrient-rich ingredients. Explore creative ways to make smoothies more appealing, such as making them into popsicles, to overcome texture issues.

## Activity and Rest:

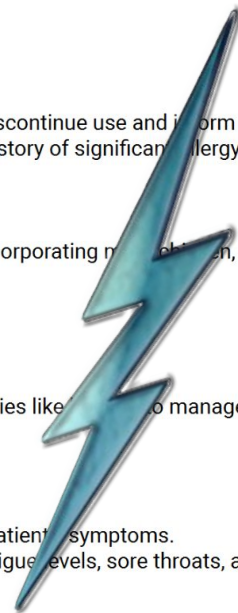
Encourage regular, moderate to vigorous physical activity, balanced with adequate rest periods, especially after intense activities like sports to manage fatigue. Monitor the patient's energy levels and adjust activities as needed to prevent overexertion.

## Follow-Up and Monitoring:

Follow-up by phone in 1-2 weeks to assess the effectiveness of the Singulair and any dietary changes. Consider blood work to rule out other causes of fatigue and to ensure there are no underlying conditions contributing to the patient's symptoms. Keep a symptom diary to track the patient's response to the new allergy medication, dietary changes, and any variations in fatigue levels, sore throats, and stomach aches.

## Long-Term Considerations:

If Singulair and dietary adjustments do not lead to significant improvement, or if mood changes occur, revisit the treatment plan with the physician. Will refer to allergist if not improving.



# AI and Charting

New SOAP Note

Notes In-person Online

English Translate (beta)

E.g. pt 35yoM, Hgb: 13.8, RBC: 4.5, WBC: 4,500

⋮

0:00:00

Submit Cancel

A red lightning bolt icon is drawn over the bottom right of the text area, pointing towards a red microphone icon. The interface includes a title bar, tabs for 'Notes', 'In-person', and 'Online', a language dropdown set to 'English', a 'Translate (beta)' button, and a text area containing a sample SOAP note snippet. A timer at the bottom right shows '0:00:00'. 'Submit' and 'Cancel' buttons are at the bottom.

Choose what to share with app.scribeberry.com

The site will be able to see the contents of your screen

Chrome Tab Window Entire Screen

Select a tab to share

Also share tab audio

Share Cancel

A dark-themed share menu is shown. It has three tabs: 'Chrome Tab', 'Window', and 'Entire Screen'. The 'Chrome Tab' tab is active, showing a list of browser tabs. The first tab is partially visible with a red redaction bar. Below it are four more tabs, each with a red redaction bar. A white arrow points to the 'Dashboard' tab. To the right is a box that says 'Select a tab to share'. At the bottom, there is a toggle for 'Also share tab audio' which is turned on, and 'Share' and 'Cancel' buttons.


# AI and Disability Letter

New Letter of Medical Necessity

Notes In-person

Medical context

5 year old boy, john canning, with autism who is unable to care for himself. Is dependent on his mom for all functions of daily living. Has urinary and stool incontinence, requiring diapers and has to be fed by caregiver. He is nonverbal.



Scribeberry will automatically fix most errors

Submit Cancel

# AI and Disability Letter



## Disability Letter

### Patient Information:

Name: John Canning

Age: 5 years old

Gender: Male

### Diagnosis:

John has been diagnosed with Autism Spectrum Disorder (ASD). This is a developmental disorder that affects communication and behavior. It is characterized by difficulties with social interaction, communication challenges, and a tendency to engage in repetitive behaviors.

### Treatment:

John's treatment plan is multidimensional and includes behavioral therapy, speech therapy, and occupational therapy. His treatment is tailored to his specific needs and is aimed at improving his ability to function and communicate effectively.

### Disability Description:

John is unable to care for himself and is dependent on his mother for all functions of daily living. He has urinary and stool incontinence, requiring the use of diapers. He also needs to be fed by his caregiver as he is unable to feed himself. John is nonverbal, which further complicates his ability to express his needs and wants.

### Prognosis:

Autism is a lifelong condition. While some children with autism make significant progress, others may continue to face significant challenges, including dependency on caregivers for daily living activities. John's prognosis is uncertain at this time, as the severity and progression of autism can vary greatly from person to person.

### Impression:

John's condition significantly impairs his ability to perform daily living activities independently. His incontinence and inability to feed himself indicate a high level of dependency on his caregiver. His nonverbal status further exacerbates his disability, making communication and understanding his needs a challenge.

### Recommendations:

Given John's high level of dependency, it is recommended that he continues to receive full-time care from his mother or a professional caregiver. It is also recommended that he continues with his current treatment plan, which includes behavioral, speech, and occupational therapy. These therapies aim to improve his communication skills, behavioral responses, and overall ability to perform daily living activities.

It is also recommended that John's caregiver receive support and training to manage his needs effectively. This includes training in communication strategies, behavior management techniques, and strategies for managing incontinence.

# Workflows

- Optimizing Lab and Referral Workflows
  - Check out our presentation from yesterday
  
- [learn.pcc.com](https://learn.pcc.com)
  - Search for workflow

# Session Takeaways

1. PCC EHR is constantly being updated and you may not have updated your configuration to keep up.
2. If any of these interest you, work with PCC to update your system.

# References

<https://learn.pcc.com>



Questions?

# Later Viewing

This and all other UC2024 course recordings will be available for later viewing through the app.