# Partner Training for New Employees

© 2014, PCC

1-800-722-7708

support@pcc.com

---

**1. Introduction: Getting to Know Partner** ..... **5**

**2. Log In and Use Partner** ..... **6**

2.1. Introduction: Partner Program Basics ..... 6

2.2. Passwords and Logging In ..... 6

2.3. Partner Windows ..... 7

2.4. Finding Patients or Accounts ..... 7

2.5. Function Keys and Using the Mouse ..... 8

2.6. Multiple Partner Windows ..... 9

2.7. Choose Your Partner Printer ..... 9

2.7.1 Choose a Printer When You Print ..... 9

2.7.2 Set Your Default Printer Automatically, By Username ..... 9

2.7.3 Set Your Default Printer Automatically, By Workstation Location ..... 9

2.7.4 Set Your Default Printer Using "Pick-A-Printer" ..... 10

2.7.5 Set a Program or Specific Feature's Printer ..... 10

**3. Edit Families and Patients** ..... **12**

3.1. Introduction: Patients and Accounts Explained ..... 12

3.2. Edit Account Information ..... 14

3.2.1 Quickstart: Run the Family Editor and Make a Change ..... 14

3.2.2 Edit Account Demographics in fame ..... 16

3.2.3 Edit Family Dependents ..... 19
3.2.4 Edit Account Notes ..... 21
3.3. Edit Patient Information ..... 24
3.3.1 Run the Patient Editor and Make a Change ..... 24
3.3.2 Patient Demographics, Screen 1 ..... 26
3.3.3 Major Diagnoses and Allergies ..... 32
3.3.4 Edit Patient Notes ..... 33
3.4. Add New Patients and Accounts ..... 34
3.5. Work with Insurance Policies ..... 38
3.5.1 View a Patient's Insurance Policies ..... 38
3.5.2 Add a Policy ..... 40
3.5.3 Copy a Policy ..... 42
3.5.4 Expire a Policy ..... 45
3.5.5 Edit an Existing Policy ..... 47
3.5.6 Make a Policy Primary or Secondary ..... 48
3.5.7 Delete a Policy ..... 49
3.5.8 Review Log of Policy Changes ..... 50
3.6. Merge Duplicate Patients and Accounts ..... 53
3.6.1 Merge Two Patient Records Using "Movekid" ..... 54
3.6.2 Merge Two Family Accounts, Combining Billing Histories ..... 54
**4. Scheduling in Partner ..... 56**
4.1. Quickstart: Schedule a Patient ..... 56
4.2. Advanced Scheduling with sam ..... 60
4.2.1 Starting sam and Finding Patients ..... 60
4.2.2 The SAM Search Criteria Screen ..... 62
4.2.3 The Sam Normal View: Choose From Available Appointment Times ..... 69
4.2.4 The Sam Detailed View: Review Appointment Details, Remove Blocks ..... 72
4.2.5 The Sam Day View: Force in Appointments, Review All Providers ..... 74
4.2.6 Confirming Appointments ..... 77
4.3. Schedule Multiple Patients ..... 78

4.4. Review and Change a Patient's Appointments ..... 82
4.4.1 Review Patient Appointment Details ..... 82
4.4.2 Cancel, Delete, or Mark an Appointment as Missed ..... 84
4.4.3 Reschedule an Existing Appointment ..... 86
4.4.4 View Appointments for Multiple Siblings ..... 89
4.4.5 Reprint an Encounter Form ..... 89
4.4.6 Change Appointment Notes ..... 89
4.5. Scheduling Reports ..... 90
**5. Checkin Patients ..... 93**
5.1. Introduction ..... 93
5.2. Quickstart: Check In a Patient ..... 93
5.3. Checkin Screens ..... 99
5.3.1 Appointment Lists in Checkin, Checkout and Nimms ..... 99
5.3.2 Demographics ..... 103
5.3.3 Additional Demographics ..... 106
5.3.4 Eligibility Screen ..... 109
5.3.5 Policy Screen ..... 110
5.3.6 Balance and Copay ..... 112
5.4. Post a Copay or Other Payment During Checkin ..... 114
5.5. Review Checkin Status: Who Checked a Patient In? ..... 116
**6. Checkout Patients ..... 118**
6.1. Introduction: The Patient Checkout Process ..... 118
6.2. Quickstart: Post Charges and Check Out a Patient ..... 118
6.3. Checkout Screens Guide ..... 124
6.3.1 Appointment Lists in Checkin, Checkout and Nimms ..... 124
6.3.2 Demographics Screen ..... 128
6.3.3 Policies Screen ..... 128
6.3.4 Eligibility Screen ..... 129
6.3.5 Post Charges Screen Details ..... 130
6.3.6 Copay and Discount Screen ..... 133

6.3.7 Checkout Dates & Prices Screen ..... 135
6.3.8 Claim Info Screen ..... 135
6.3.9 Payments Screen ..... 136
6.3.10 Wrap-Up Screen ..... 138
6.4. Review Posted Charges: Dailycheck ..... 139
6.4.1 Dailycheck By Location ..... 142
6.5. EHR Charges with No Partner Appointment ..... 142
6.6. Test ICD-10 Checkout ..... 142
6.6.1 Charge Screen and SnapCode Configuration ..... 143
6.7. Customizable Charge Screens ..... 146
6.7.1 Sample Charge Screens ..... 147
6.7.2 Edit Charge Screens ..... 148
**7. Post Personal Payments and Adjustments ..... 150**
7.1. Quickstart: Post a Payment ..... 150
7.2. Posting Payment Screen ..... 153
**8. Phone Encounter Notes ..... 157**
8.1. Introduction: Triage Phone Calls ..... 157
8.2. Quickstart: Take a Phone Call and Record Details ..... 157
8.3. Run the Phone Encounter Notes Program ..... 160
8.4. Call Back or Update a Phone Encounter Note ..... 161
8.5. Review Multiple Phone Encounter Notes ..... 163
8.6. Print a List of Phone Encounter Notes ..... 164
8.7. Customize the Phone Encounter Notes Program ..... 165
**9. Immunizations in Partner ..... 167**
9.1. Review and Print an Imms Record ..... 167
9.2. Add Immunizations to a Patient's Record ..... 168
9.2.1 Method 1: Automatic Immunization Records ..... 168
9.2.2 Method 2: Add a Date in imms ..... 168
9.2.3 Method 3: Add Immunization With Details in imms ..... 169
9.2.4 Method 4: Add Multiple Immunizations With Details in nimms ..... 169

9.3. Find Patients By Immunization Lot Number..... 170

9.4. Display Missing Immunizations on Forms..... 172

# 1. Introduction: Getting to Know Partner

This topics below will guide you through all of the basic Partner programs.

Feel free to jump to the chapter you need to learn first. Most sections start with a "Quickstart" tutorial that will teach you the basics in just a few minutes.

- **Logging In, Running Partner Programs:** This chapter teaches you how to log in to the Partner server, how to move around among the Partner windows, how to find patients and accounts, and how to use the function keys in Partner.
- **Working with Families and Patients:** This chapter teaches basic account and patient editing using the **fame** and **notjane** programs.
- **Scheduling in Partner:** Read this chapter to learn all about scheduling in Partner using **sam** and **inquire**.
- **Patient Check-In:** This chapter teaches you how to check in patients while confirming demographic, insurance, and balance information in the **checkin** program.
- **Patient Check-Out:** This chapter teaches you how to check out patients. You will learn to use the **check-out** program to post diagnoses, procedures, and time-of-service payments.
- **Posting Personal Payments and Adjustments:** This chapter teaches you how to post additional personal payments and link them to specific charges.
- **Triaging Phone Calls:** This chapter teaches the Phone Encounter Notes program, **pen**, which is a popular tool for recording incoming phone calls. It also serves as a great patient-info page from which you can look up patient immunizations, schedule the patient, or perform other functions.
- **Immunizations:** Partner can track immunizations for patients, including lot number, manufacturer, and other important information. This chapter will teach you how to review and print a patient's immunization record as well as how to enter immunizations when a patient transfers to your practice.

**Get More Help:** With PCC, your office receives unlimited training, unlimited phone support, and unlimited help for the special projects and needs of your practice. As you learn the different programs in this manual, check with PCC if you would like to attend an online class. A Support Specialist is just a phone call or an e-mail away: 1-800-722-1082 or `support@pcc.com`.

**Online Learning:** This manual does not cover insurance billing procedures, personal balance tracking, Partner reporting, configuration, and many other aspects of Partner. To learn more about these subjects, visit PCC Online Help.

# 2. Log In and Use Partner

## 2.1. Introduction: Partner Program Basics

The topics below will teach you how to log in to Partner and navigate among Partner programs. You will also learn some of the basic tools and features that apply to most Partner programs, like the Find Routines and the Function Keys.

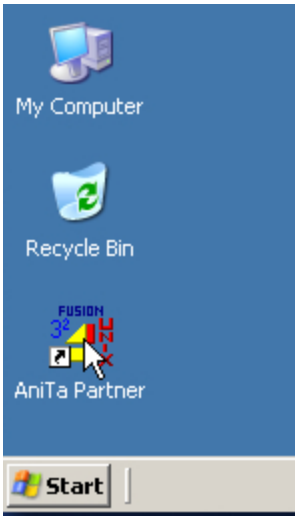
You can also watch a training video explaining Partner basics at http://downloads.pcc.com/video/PartnerBasics01.htm.

## 2.2. Passwords and Logging In

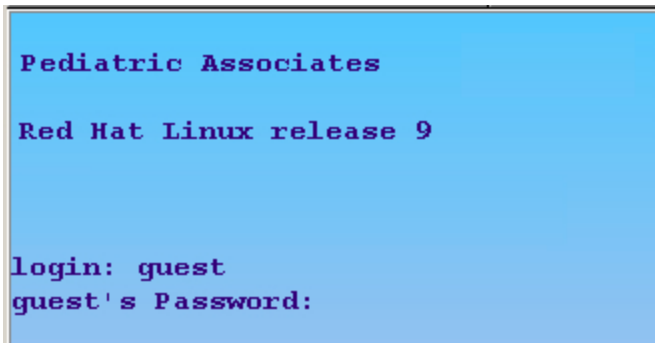
Your Partner Server is both password protected and placed behind an Internet firewall to protect your patient data from the outside world. From within your office, you will need a username and a password to log in to Partner.

Follow this procedure to log in from a Windows PC:

**Step 1: Double-Click on AniTa or Tera-Term**



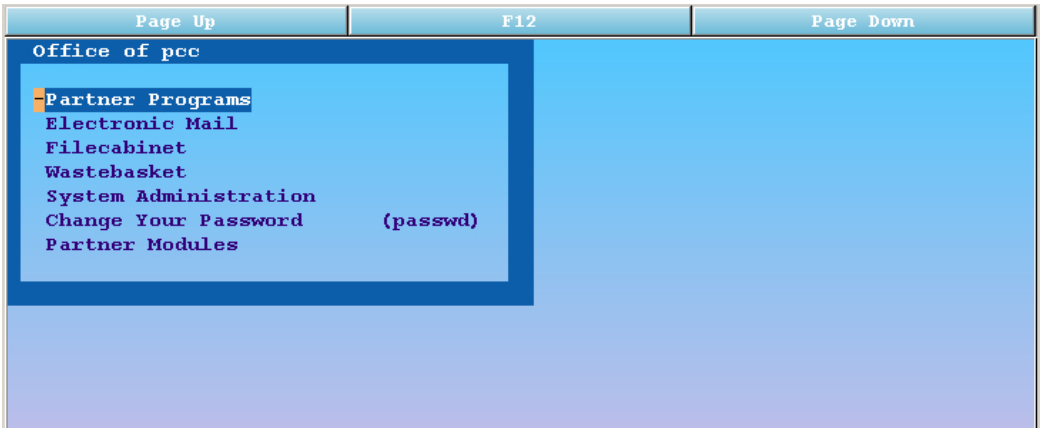

**Step 2: Enter Your Username and Password**



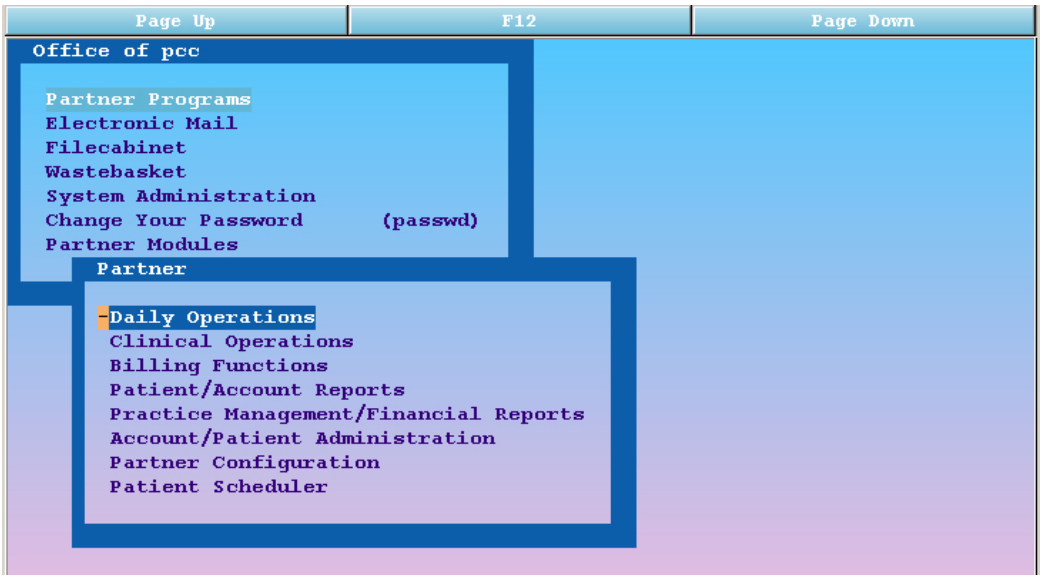
If you type the password incorrectly, you will be given another chance. If you type the username incorrectly, you may have to close the window and try again.

## 2.3. Partner Windows

After you have logged in to Partner, you will see the Partner Windows. These window menus can be customized for your office and for each user so they show exactly the programs you need most.




To choose an item from the menu, use the up and down arrow keys and press **Enter** to open your selection. If your selection is a program, it will run. If your selection is a sub-category, another window will open:




At any time, you can press **F12** to go back one window. No matter what program you run in Partner, **F12** is always the "Go Back" or "Quit Without Saving" key.

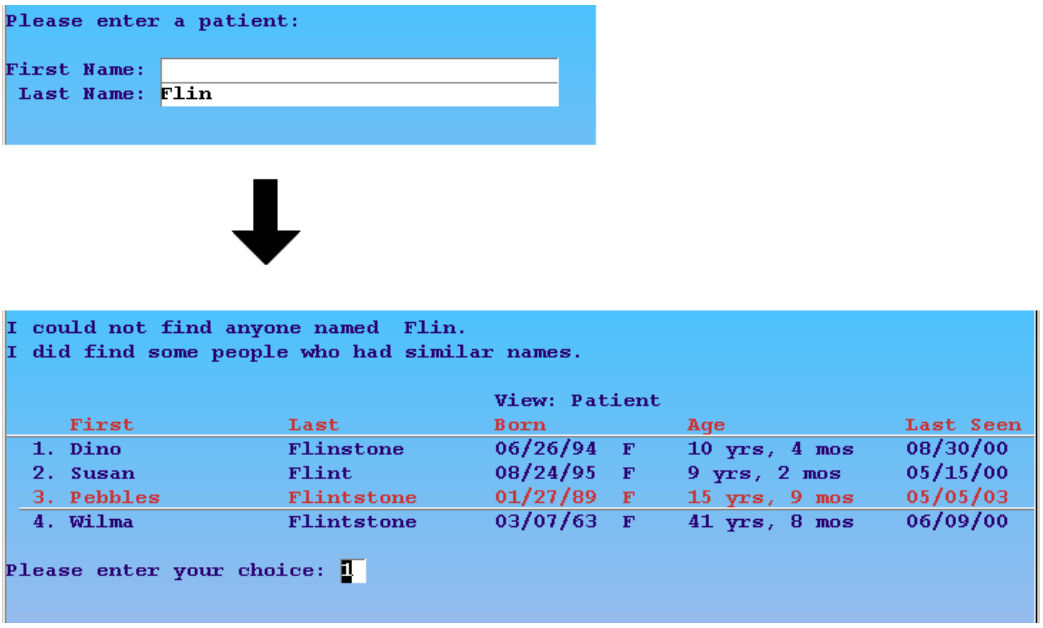
**The Command Prompt:** The Partner Windows make it easy to find and select programs. If you would rather use a prompt and type in program names, PCC can show you how to use the command prompt instead.

## 2.4. Finding Patients or Accounts

Whether you are editing demographics or posting payments, most programs are run for a patient or an account (a family). When you start running a program, you will be asked to select a patient or family. The **checkin** and

**checkout** (check out) programs offer lists of today's patients, but other programs ask for a name. You can also search by chart number, phone number, birth date, or several other variables, but the name is the easiest.

Here is what finding a patient by name looks like in all Partner programs:



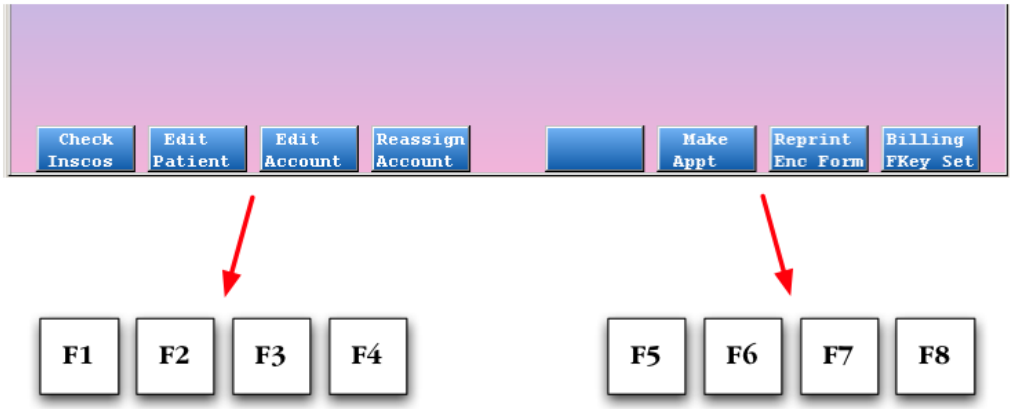

In the example above, the user entered "Flin" as the last name and Partner found members of the Flinstone and Flint families. The user could then press **Enter** to open the first record or enter the number next to the desired patient.

**Find Patients by Birth Date:** You can find patients by birth date instead of account. Enter the birth date into the First Name field in any program and press **Enter**.

There are lots of tools for finding patients and accounts. For example, you can automatically recall the last patient you worked with or find their siblings.

## 2.5. Function Keys and Using the Mouse

No matter what Partner program you are running, the eight buttons across the bottom of the Partner window always correspond with **F1** through **F8** on your keyboard. The power of each key changes from program to program, but they are always labeled on your screen to help you understand their purpose.



While using AniTa, you can also use your mouse to click on the keys on the screen or click in most text fields to move to them. Over the long term, Partner users find that keyboards are much faster and more precise than using the mouse, but tastes may differ.

The **F12** key always takes you back one step or quits the program you are running without saving any changes.

## 2.6. Multiple Partner Windows

Your Partner window displays one program at a time. It is easy to jump from program to program, but if you want to run a check-in program and a check-out program at the same time, you can open a second window and switch back and forth between them with a single keystroke.

To open a second window, simply double-click on the Partner (or AniTa) icon again and log in as before. If you can't see the Partner icon on your desktop anymore, you may need to minimize the current Partner window first.

On a PC, press **Alt-Tab** to switch between windows. You can also use your mouse.

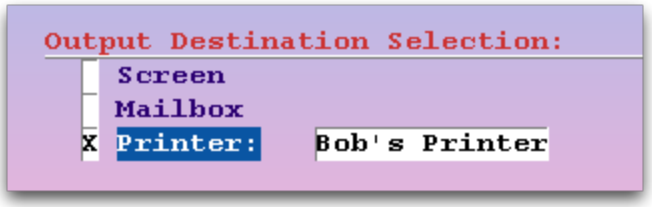
## 2.7. Choose Your Partner Printer

Your office may have a front-desk printer for receipts, a chart room printer for encounter forms, and a back office printer for everything else. When you log in, you may have printer needs that are particular for you, or particular for where you are working today.

This article describes all the different methods you can use to set your printer preferences for Partner programs.

### 2.7.1 Choose a Printer When You Print

While running Partner programs, you can often specify a printer before you print.




### 2.7.2 Set Your Default Printer Automatically, By Username

Partner can automatically set your default printer based on your login username, assigning you the same printer every time you log in.

Contact PCC Support to configure this feature.

### 2.7.3 Set Your Default Printer Automatically, By Workstation Location

If PCC manages your office's network, Partner can detect which computer you are sitting at when you sit down and login. Partner can then set your default printer automatically by that location.

Contact PCC Support to configure this feature.

## 2.7.4 Set Your Default Printer Using "Pick-A-Printer"

You can use the Pick-A-Printer program to set your default printer. PCC Support can configure Pick-A-Printer to run automatically at login for users. You can also run Pick-A-Printer manually at any time from your Partner windows or by typing **pickaprinter** at a command prompt.

Select a printer and press [**F1** - BLAH] to continue.

**Activate Pick-A-Printer:** The **pickaprinter** feature is optional, and it must be activated and configured by PCC Support.

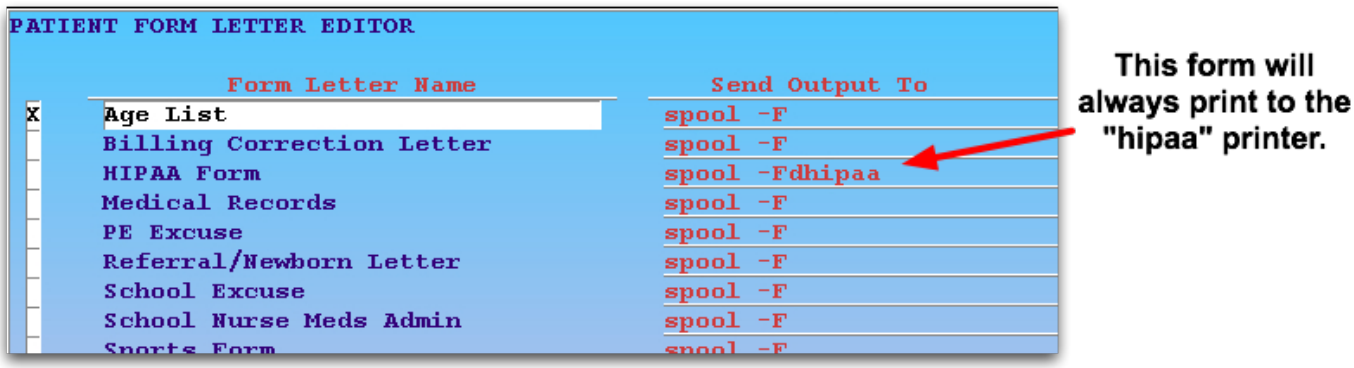
**Ask Again at Login?**: You can set whether or not you wish to see the Pick-A-Printer screen at login. If you answer "No", you can still run Pick-A-Printer manually. If your office decides that all users must set their printer at login (because Partner does not maintain your office network, for example), then this option may be hidden in order to prevent confusion.

**Partner's Other Settings May Override:** If your office uses your workstation location or username to set your printer, your Pick-A-Printer choice can only last until you log out. Your location or username settings will take preference the next time you log in. If you wish to turn off the automatic printer selection and only use Pick-a-Printer, contact PCC Support.

## 2.7.5 Set a Program or Specific Feature's Printer

PCC Support configures a printing command for many features in Partner. Your HCFA forms probably always print to a particular drawer of a particular printer, for example and your bills may behave the same way. Those printer settings typically work the same for any user, anywhere in your office.

If you are familiar with Partner configuration, you may make some of these feature-specific printer changes yourself. If you print form letters to a specific printer, for example, you can configure that in the Form Letter Editor (**waffle**).




Other printer choices are set in the Configuration Editor (**ced**). Please contact PCC Support if you need help making program-specific printer changes.

# 3. Edit Families and Patients

## 3.1. Introduction: Patients and Accounts Explained

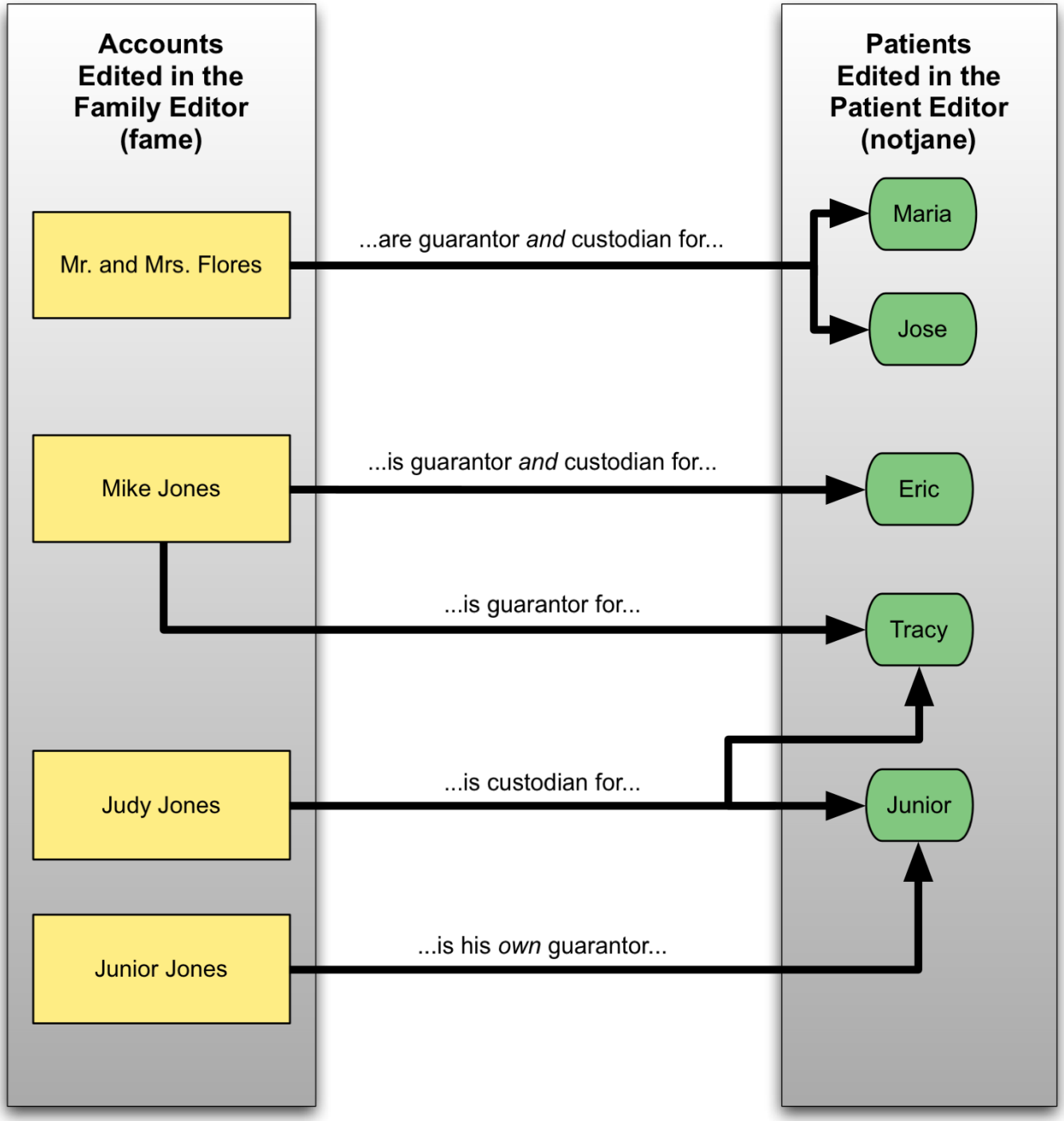
Partner's Family Editor (**fame**) and Patient Editor (**notjane**) programs can handle the many different kinds of families and billing situations your office encounters. The **policy** screen, available from the Patient Editor and in many other programs, stores the insurance policy record for each patient. The topics in this manual will explain the many features in each of these programs.

**Patients and Accounts Explained**

Partner is a family billing system. It stores information about every patient, but it also stores a database of accounts, or "families." A family account may be the custodian of the patient, the bill-payer for the patient (the "guarantor"), or both. Three siblings may all have one family account serving as both guarantor and custodian. That family account will be listed in Partner under a parent's name. Alternatively, children from a divorced family may have one family account assigned as the guarantor and a *different* account assigned as the custodian.

It may be helpful to think of Partner as having two giant lists: a list of patients and a list of accounts. You run different programs and reports to look at each list. Patients are linked-up to one or more family accounts, and they can be moved around to different accounts when families change. You schedule an appointment for a *patient*, but you mail a bill to the guarantor *account* of that patient.

In the image below, a list of accounts is on the left-hand side and a list of patients is on the right-hand side. You can see how Partner accounts and Partner patients can be linked together to handle different kinds of families.




As shown above, some patients live with one account but have their bills sent to another family. Tracy Jones lives with her mother Judy, but Mike Jones pays Tracy's medical bills. Junior Jones also lives with Judy, but he is responsible for his own bills and is therefore his *own* guarantor. Partner can handle all of these situations with ease.

- **When do you run fame, the Family Editor?** If you need to review outstanding balances or the billing history for a family, or if you need to update demographic information, such as addresses or phone numbers, then you need to view an *account*. Run **fame**, the Family Editor.

- **When do you run notjane, the Patient Editor?** If you need an immunization record, want to review a patient's major diagnoses, or need to change a patient's age or preferred name, you are going to edit a *patient*. Run **notjane**, the Patient Editor.
- **What about Insurance Policy Information?** Although personal bills and billing history are tied to accounts, insurance policies are assigned on a per-patient basis. To access a patient's Insurance Policies screen, run **notjane** or **policy**.
- **When do you run checkin?** The **checkin** program, designed for checking in a patient at the front desk, is also a useful place to review information from both **fame** and **notjane**. The **checkin** program also includes the Insurance Policies screen.

  Many Partner users run **checkin** first and then use function keys from the main **checkin** screen to run **fame** and **notjane**. You may find it easiest to run **checkin** for most tasks and never run **fame** or **notjane** as independent programs.

In the topics in this section, you will learn how to use **fame** and **notjane** to manage accounts and patients. To learn how to check in patients and use the **checkin** screen to edit accounts and patients, read *Patient Check-In (**checkin**)*.

# 3.2. Edit Account Information

The Family Editor, **fame**, manages account information. You can run the Family Editor to add a new family to Partner, update family demographics, or enter notes about the account. You can also review an aged balance summary, run a collection report, generate account form letters, or review an account's transaction history.

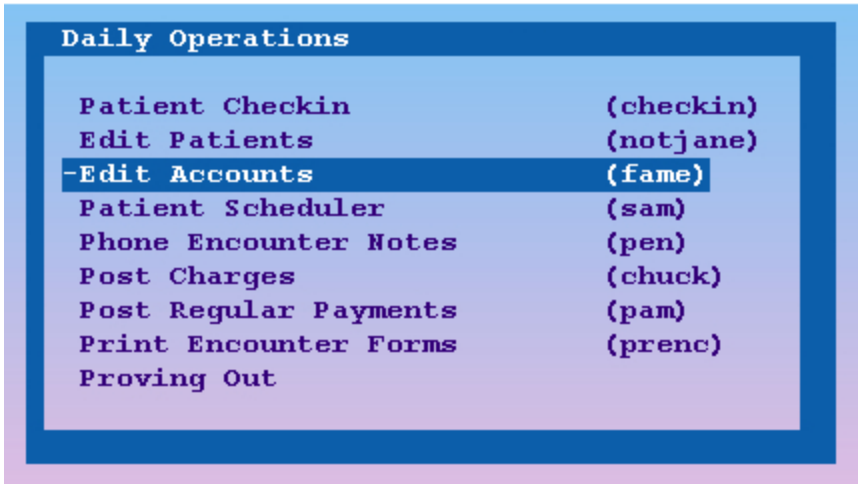
**Accounts and Patients:** All charges in Partner belong to accounts; all billing history is found by reviewing accounts. Use the Family Editor to work with accounts. Medical records, procedures, and diagnoses belong to patients. Use the Patient Editor (**notjane**) to work with patients.

## 3.2.1 Quickstart: Run the Family Editor and Make a Change

Follow the procedure below to learn the basics of **fame**.

**Step 1: Run fame**

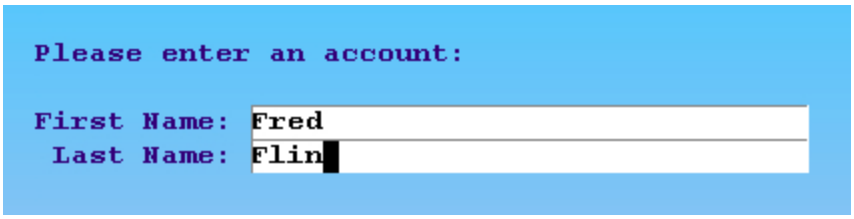
You can run **fame** from the Partner Windows or by typing **fame** at a command prompt.



**Note:** You can also run **fame** from within other programs, such as **checkin**. Run **checkin** for the patient, then press [**F3** -- *Edit Account*]. You can then skip to step #3.

## Step 2: Find an Account

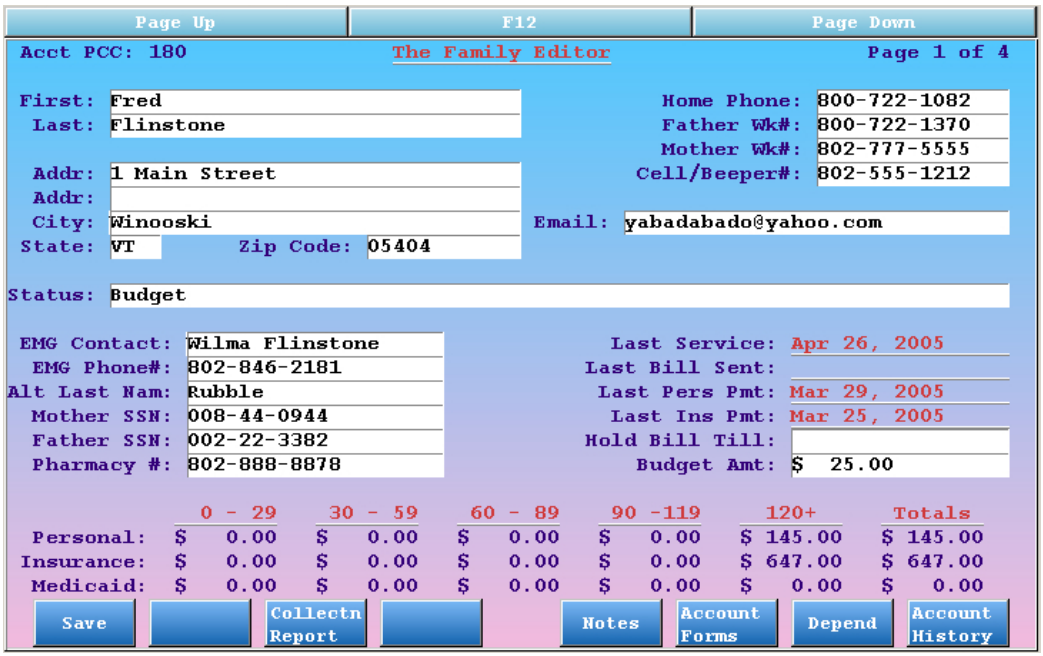
Enter the family's name, or part of the family's name, to search for the account.




You can also search by account number, phone number, or several other criteria. To learn more, read *Finding Patients and Accounts*.

## Step 3: Make Your Changes

On the first page in **fame**, you can change the account's basic demographics. Move around the screen by pressing **Tab**, **Enter**, or the arrow keys. You can also move back one field by pressing the **Back-space** key. If you wish, you can press **Page Down** to cycle through all the pages of **fame**.




Once you have moved the cursor to a field you wish to change, press the **End** key to automatically erase the current contents.

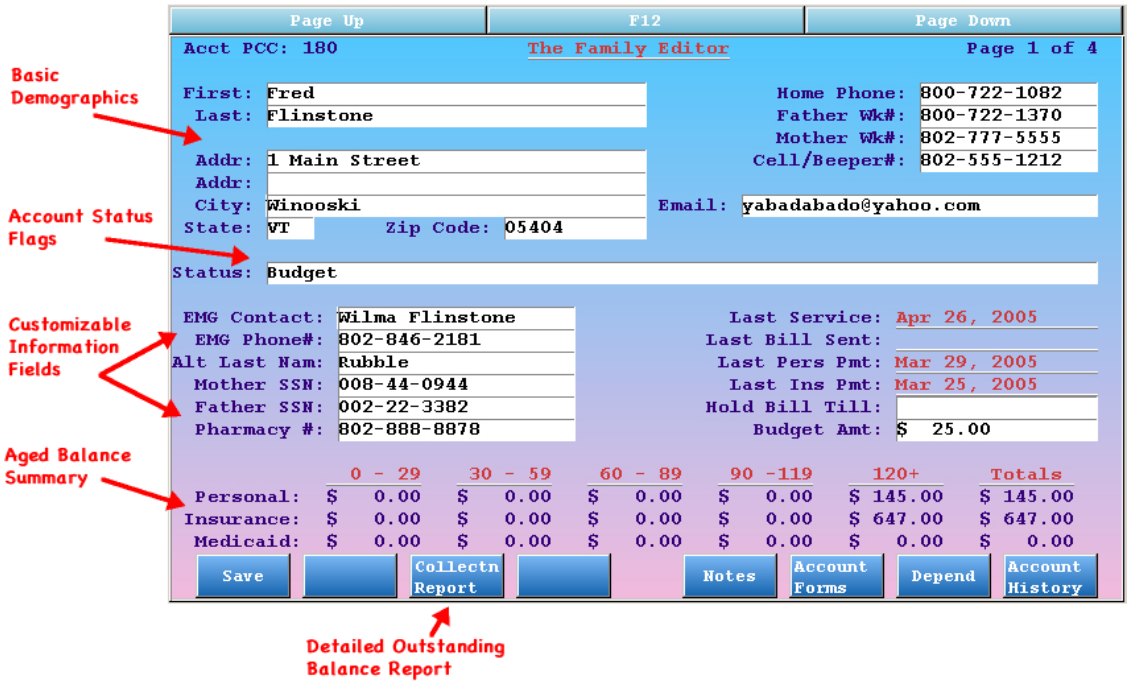
**Step 4: Press [F1 -- *Save*]**

Press **F1** to save your changes and quit. If you do *not* want to save your changes, press **F12** instead.

In the procedure above, you ran **fame** and made a small change to an account's demographics. In the next sections, you will learn about each of the screens in the **fame** program. Each of them serves an important purpose.

## 3.2.2 Edit Account Demographics in fame

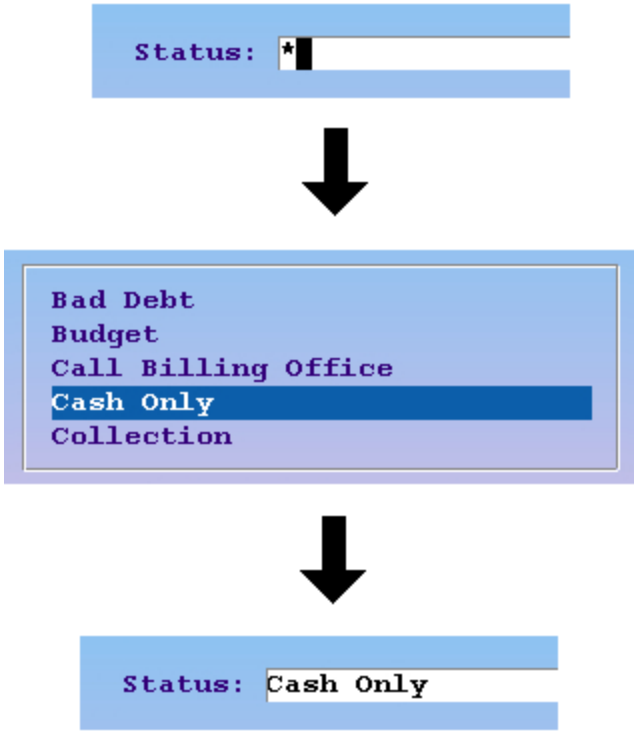
On the first page of **fame**, the main demographics screen, you can view and change demographic and other miscellaneous information about an account. You can also run two very useful account reports.



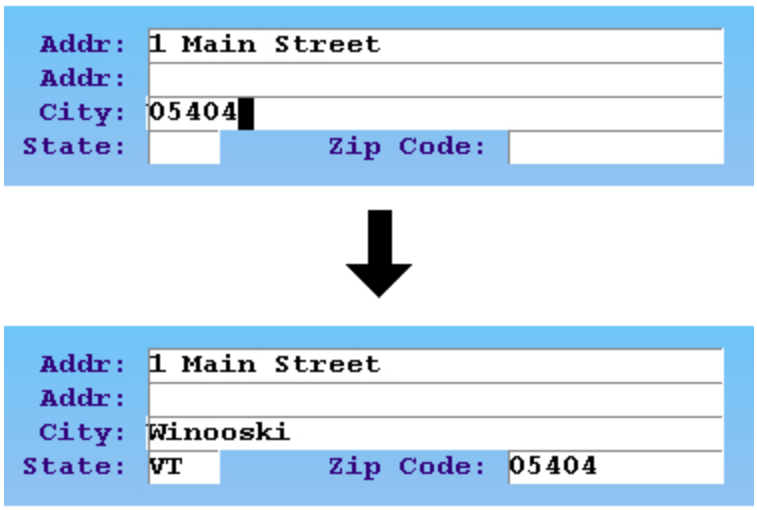

The fields at the top of the screen are self-explanatory. Press **Enter** or **Tab** to move from field to field and fill in any of the basic information. Partner will automatically capitalize names for you and enter dashes (-) in the phone numbers if you do not.

**Status Flags:** The "Status" field is not like other fields. Statuses are used to "flag" or classify accounts. You can put several different status flags on an account, separated by commas. An account might have "Overdue," "Bad Debt," and "Collection" status flags. Your office can run reports to see all the families that have a status. The status flags show up in the scheduler and elsewhere in Partner so your office will always know if there are any special circumstances surrounding an account.

**Look-Up Fields:** In all Partner programs, some fields have a list of possible answers from which you can pick. You can type anything you want into a name field or address field, but the "Status" field can only be filled from a list of predefined values, just like medical procedures elsewhere in Partner. To see a list of possible answers in a "Look-Up" field, type an asterisk (*) and press **Enter**. You can learn more about using the asterisk key to search for options in the *Charge Posting* manual.




**Zip Code City Look-Up:** If you type a zip code into the "City" field, Partner will look up the city name for you. Press **Enter** until the cursor is in the "City" field, type in the five digit zip code, and press **Enter** or **Tab** to perform the look-up.




**Customizable Fields:** The six fields in the lower left quarter of the screen are customizable. Your office may have set these fields to record HIPAA information, social security numbers, or other data.

**Billing and Budget Information:** In the lower-right quarter of the page, you can view the account's "Last

Service" date, the last date on which charges were posted for a patient on the account. Payment and billing dates are also listed. Partner tracks and maintains these dates automatically. The last two fields on the screen, "Hold Bill Till" and "Budget Amt," can be used to control when the family will receive a personal bill and what amount will be due. You can learn more about family billing options by reading *Personal Billing and Collections*.

| | |
|---|---|
| Last Service: | Apr 26, 2005 |
| Last Bill Sent: | |
| Last Pers Pmt: | Mar 29, 2005 |
| Last Ins Pmt: | Mar 25, 2005 |
| Hold Bill Till: | |
| Budget Amt: | $ 25.00 |

**Aged Balances:** Does the account or their insurance company have any outstanding bills? You can review outstanding balances in an aged chart at the bottom of the screen. The Personal, Insurance, and Medicaid totals will give you a quick reference, but you can also see how old the balances are by number of days since the transaction date (the date of service). Since a charge may become personal only *after* the insurance company rejects it, a 120+ personal charge may not be as terrible as it looks. However, a large amount of money overdue in the "120+" column might be a red-flag that the account needs attention by a biller. If you want more information about an account's outstanding charges, press [**F3** -- *Collectn Report*].

| | 0 - 29 | 30 - 59 | 60 - 89 | 90 -119 | 120+ | Totals |
|---|---|---|---|---|---|---|
| Personal: | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 | $ 145.00 | $ 145.00 |
| Insurance: | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 | $ 647.00 | $ 647.00 |
| Medicaid: | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 |

**Address Verification:** Insurance carriers will reject claims that have a bad zip code or are missing street or city information. When you edit an account, Partner checks the address and warns you if there is a problem.

Address Verification

Fred Flinstone (#149)

Addr: 479 Cocoa Avenue

Addr:

City:

State: NV Zip Code: 05056

1) Missing city

2) State doesn't match with zipcode

F1 Save changes and continue. F12 continue without saving.

Make corrections to the fields that are highlighted in red and press [**F1** -- *Save and Continue*]. If you do not have correct address information, you can press **F12** to continue.

**E-Mail Addresses:** The Email field in the Family Editor (**fame**) is designed to hold one e-mail address with no additional characters. If additional characters are entered or multiple e-mail addresses are typed into the field, Partner will attempt to parse the first available e-mail address.

**Function Keys on the Demographics Page**

[**F1** -- *Save*]

Press **F1** to save all changes and quit **fame**.

[**F3** -- *Collectn Report*]

Press **F3** to run the collection report program. Do you need to understand, in detail, why an account has an overdue balance? The collection report provides a complete record of outstanding charges, including an explanation of which charges are pending the insurance company and which are personal. To learn more about the collection report (**coll**), read *The Collection Report*.

[**F5** -- *Notes*]

Press **F5** to jump down to page three of **fame**, the main notes page. You can accomplish the same thing by pressing **Page Down** twice.

[**F6** -- *Account Forms*]

Press **F6** to generate a form letter for this account. You will see a list of available form letters:

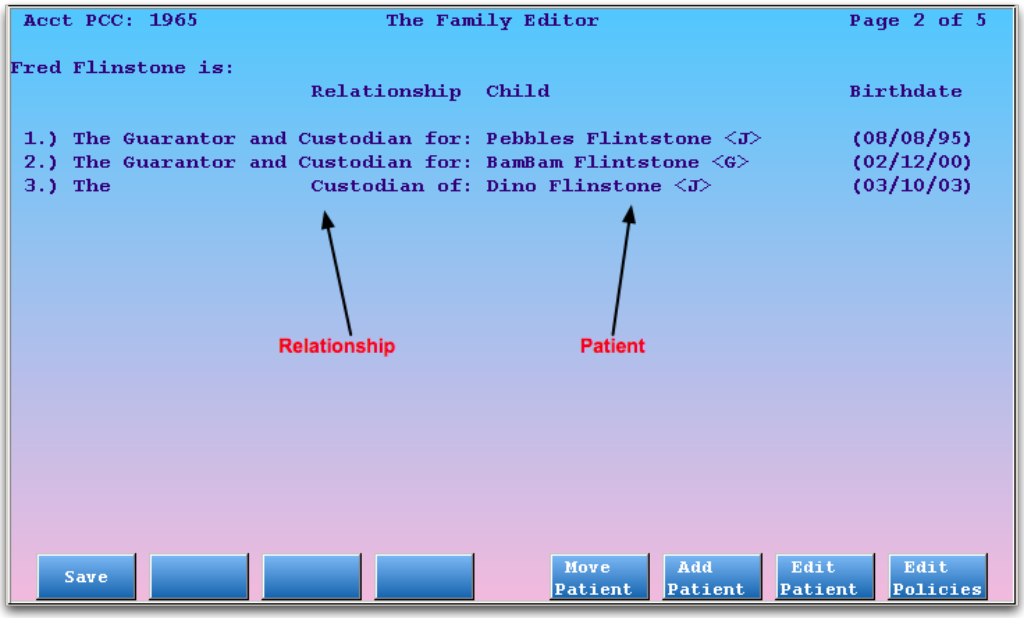
Use the arrow keys to select the desired letter, mark the letter or letters you want with an **X**, and press [**F1** -- *Process Forms*]. Some forms will ask you questions on the screen before you print them. Do you want to learn how to create your own form letters or edit the existing ones? Read *Customizing Form Letters*.

[**F8** -- *Account History*]

Press **F8** to run the Account History report, **tater**. The Account History report provides you with a complete transaction history for the account, including all dependent patients who have the account as a guarantor and a complete billing history for all insurance companies on the account.

### 3.2.3 Edit Family Dependents

The second page of **fame** is the dependents screen. It displays all patients related to the account, and contains tools for adding and editing patient information.




The list of family members includes any patients who have this account as either a guarantor, a custodian, or both. The relationship to the patient is described on the left, and the patient's name and birth date appear on the right. The initial next to the patient's name indicates their primary care physician, if one is assigned.

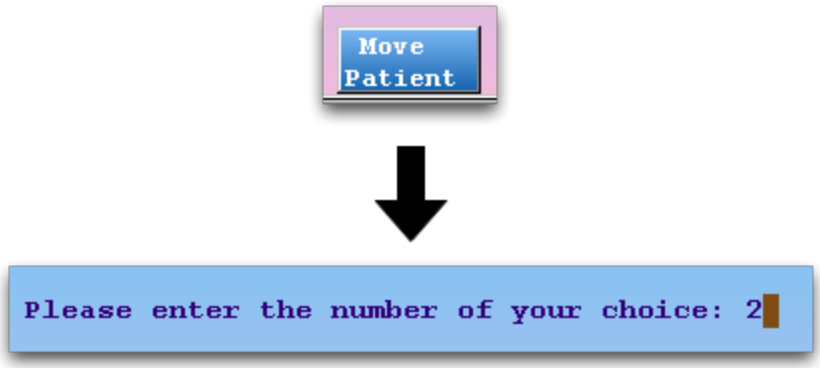
### Function Keys

[**F1** -- *Save*]

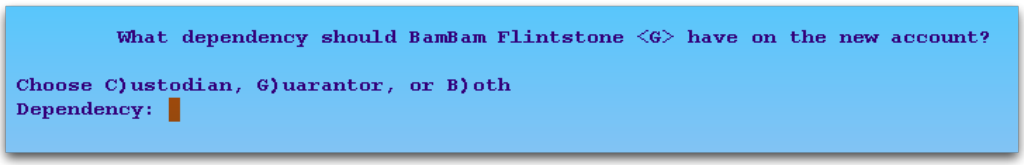
Press [**F1**] to save any changes and quit the Family Editor.

[**F5** -- *Move Patient*]

Press [**F5**] and select a patient to reassign them to another account.

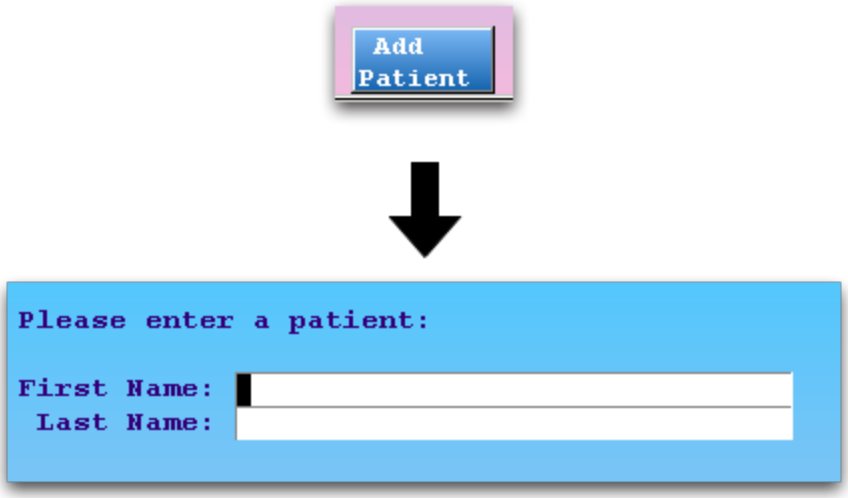



You will be prompted to find an account and then asked if that account should be the guarantor, custodian, or both for the selected patient.



[**F6** -- *Add Patient*]

Press **F6** to add a patient to the account.




If the patient is not already entered into your system, you can add them during the procedure. After finding or adding the new patient, you will be asked if the current account should be the guarantor, custodian, or both for the patient.

[**F7** -- *Edit Patient*]

Press **F7** and select a patient to run the Patient Editor (**notjane**) for that patient.

[**F8** -- *Edit Policies*]

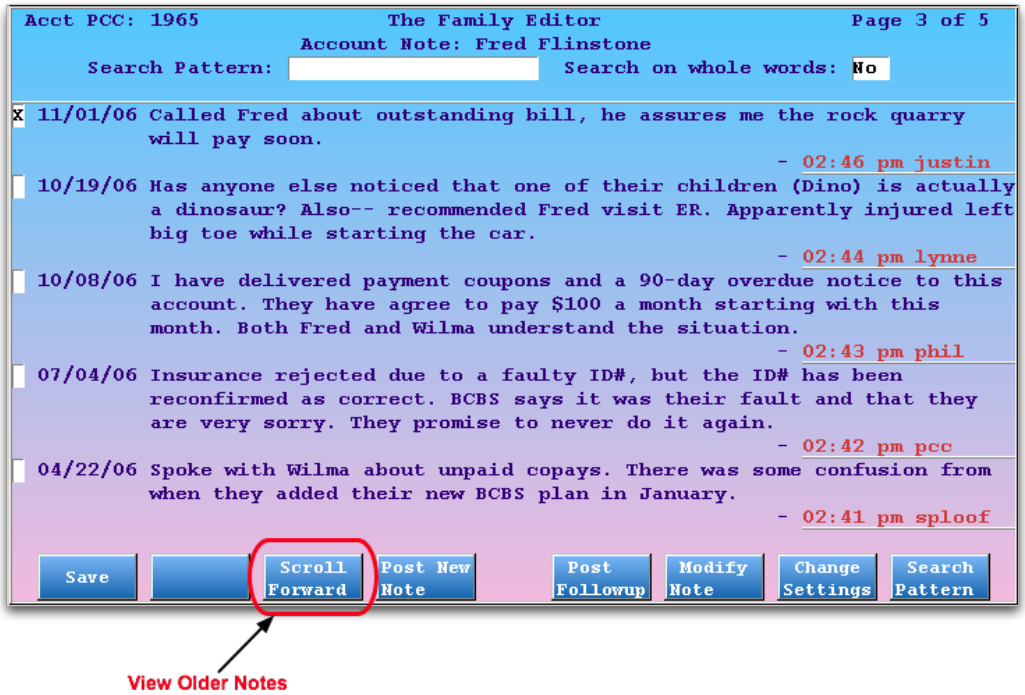
Press **F8** and select a patient to view the Insurance Policies screen for that patient.

### 3.2.4 Edit Account Notes

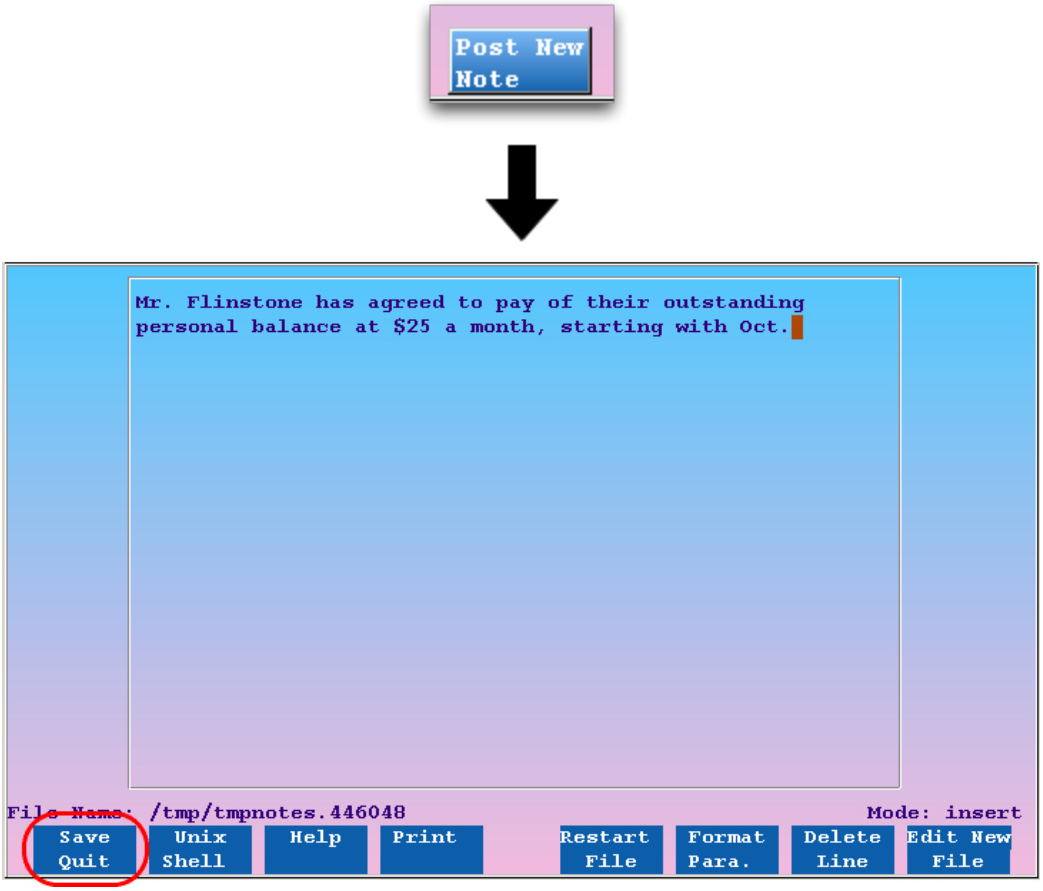
Pages three, four, and five of the Family Editor are notes screens. There are three different types of notes, and each has a screen to itself. They are: regular account notes, the account billing note, and the account copay note.

**Account Notes**

The Account Note screen stores user-entered notes about the family. Every note is saved with the username of the person who entered it along with a creation date and time.




Press [**F4** -- *Post New Note*] to add a note to the account record.



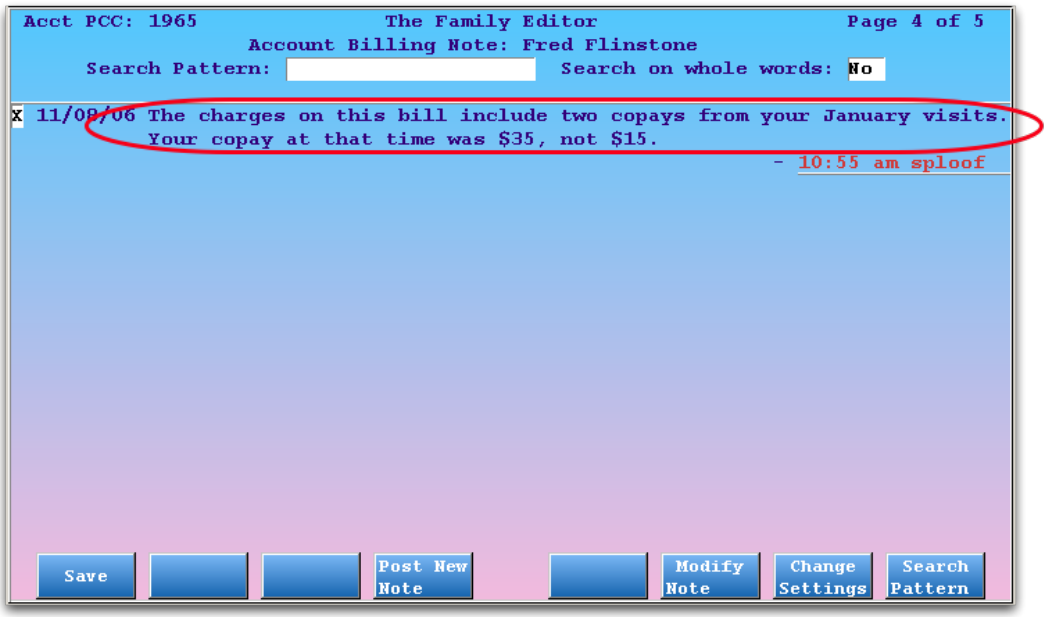

Type your new note and press [**F1** -- *Save*], or press **F12** to cancel.

**Learn More About Notes:** The main notes screen is the same in both the Family and Patient Editors. It

includes a follow-up note feature, a search field, and many other features to help you track important information about the patient or family. To learn about these features, read the Structured Notes manual.

### Account Billing Note

The account billing note will appear on personal bills sent home to this family. If you have a special message for the family that must appear on their personal bill, add it to this page.



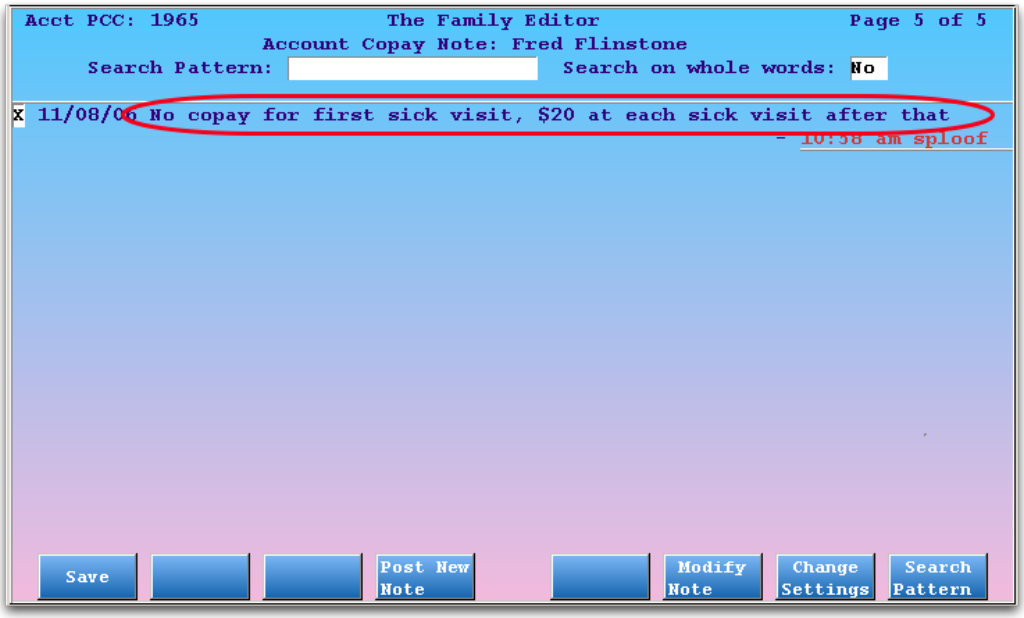

Press [**F6** -- *Modify Note*] to change the family billing message. Type the new message and press [**F1** -- *Save*].

If this is the first time you have added a note to this family's bills, you will need to press [**F4** -- *Post New Note*] instead of **F6**.

**Messages For All Families:** You can also add a message to *all* personal bills, for all families, or a specific message for current or overdue bills. Read *Personal Billing and Collections* to learn more.

### Account Copay Note

The copay note will appear in the Charge Posting (**checkout**) program when a patient on this account is checked out. If you need the front desk to review important information before posting a charge for this account, enter the note here.




Press [**F6** -- *Modify Note*] to change the account copay note. Type the new message and press [**F1** -- *Save*].

If this is the first time you have added a copay note for this family's patients, you will need to press [**F4** -- *Post New Note*] instead of **F6**.

# 3.3. Edit Patient Information

The Patient Editor (**notjane**) manages patient information. You can run **notjane** to add a new patient to Partner, view an immunization record, research visit history, or read about a patient's major diagnoses and allergies.

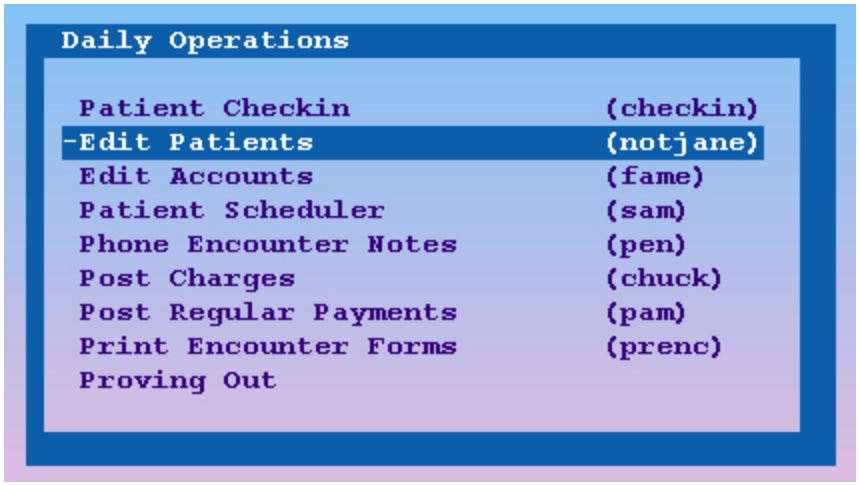
**Patients and Accounts:** Medical records, procedures, and diagnoses belong to patients. Use the Patient Editor to work with patients. Charges and billing history, on the other hand, belong to accounts. Use the Family Editor (**fame**) to work with accounts.

## 3.3.1 Run the Patient Editor and Make a Change

Follow the procedure below to learn the basics of **notjane**.

### Step 1: Run notjane

You can access **notjane** from the Partner windows or by typing **notjane** at a command prompt:




You can also run **notjane** from the main patient demographic screen in **checkin**. Run **checkin** for the patient, then press [**F2** - *Edit Patient*]. You can then skip to step 3.

**Step 2: Find a Patient**

Enter the patient's name, or part of the patient's name.

You can also search by chart number, phone number, or several other criteria. To learn more, read Finding Patients and Accounts.

**Step 3: Make Your Changes**

On the first page in the Patient Editor (**notjane**), you can change the patient's basic demographics. Move around the screen by pressing **Tab**, **Enter**, or the arrow keys. You can also move back one field by pressing the **Backspace** key. If you wish, you can press **Page Down** to cycle through all the pages of **notjane**.

Pat PCC: 3336 Patient Editor Page 1 of 4

First Name: Margaret
Nickname: Pebbles
Middle Name:
Last Name: Flintstone
Suffix:

Born: Jul 17, 2004
Age: 10 yrs, 1 mo
Sex: Female
Deceased: No
Deceased Date:

Physician: Mark Williams, M.D.

Status: $$ Problem, Adoption

Other ID: 828-74-6104
School: Bedrock Central

Note: Rubble
Old PM ID : 2755

Patient Lives With:
Wilma Flintstone (#1981)
Addr: 15 Quarry Lane
Addr:
City: Winooski
State VT Zip Code: 05404

Send Bill To:
Fred Flintstone (#1980)
1400 Rock Road
Winooski
VT Zip Code: 05404

Home Phone: 802-555-0194
Work Phone: 802-555-0197
Cell Phone: 802-555-0161
Emg Phone: 802-555-0168

Relation to Bill Payer: Child
Date of Last Visit: Oct 15, 2014
Date of Last Physical: Jul 25, 2013
Date Due for Next Physical: Jul 31, 2014

Save | Edit Policies | Imms Record | Reassign Account | Patient History | Patient Forms | Edit Account

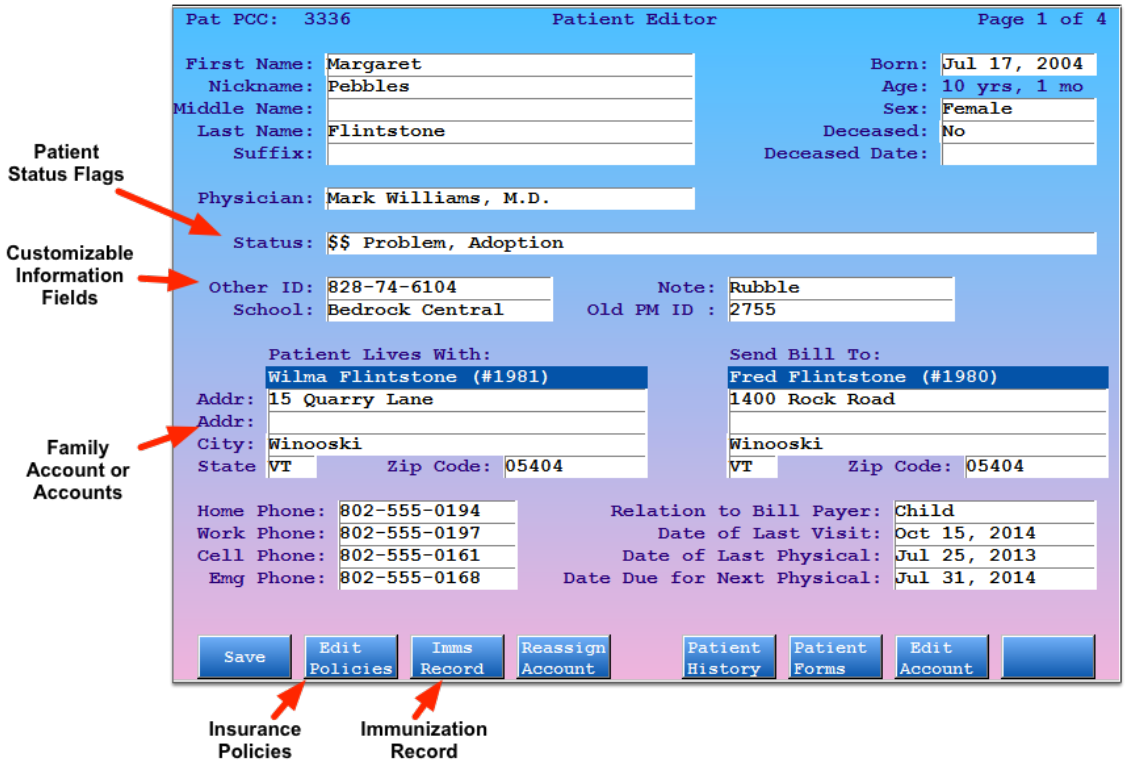
**Step 4: Press [F1 -- *Save*]**

Press **F1** to save your changes and quit. If you do *not* want to save your changes, press **F12** instead.

In the procedure above, you ran **notjane** and made a small change to a patient's basic information. In the next sections, you will learn about each of the pages in the **notjane** program.

## 3.3.2 Patient Demographics, Screen 1

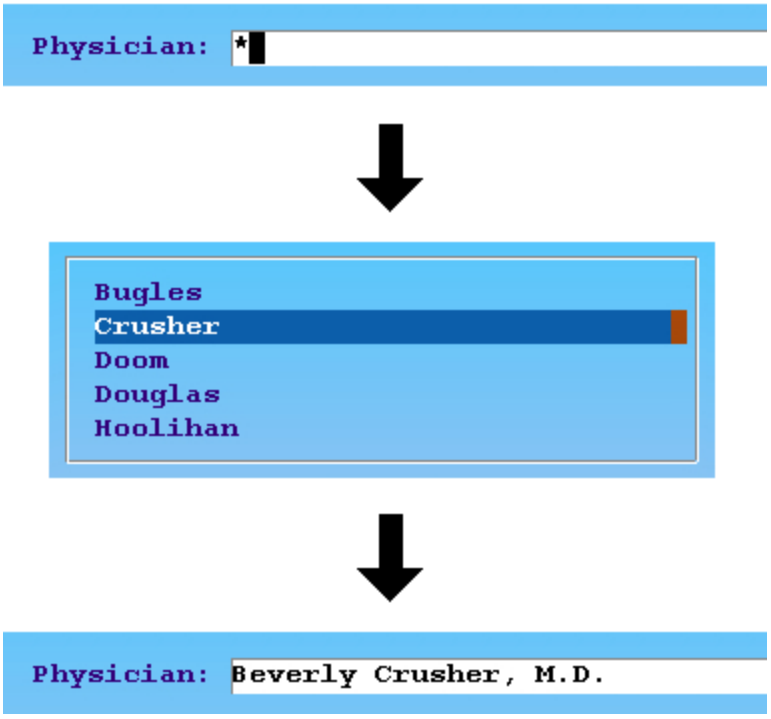
On the first page of **notjane**, the demographics screen, you can view and change basic information about the patient. You can also change the custodian and/or guarantor account for the patient and run two very useful patient reports (**imms** and **patinfo**).




Press **Enter** or **Tab** to move from field to field and fill out any of the basic information. Partner will automatically capitalize names for you and enter dashes (-) in the phone numbers if you do not. You can write the birth date in a condensed format, such as "082401" for August 24th, 2001, and Partner will expand the date for you and calculate the patient's age automatically.

**Look-Up Fields.** In all Partner programs, some fields have a list of possible answers from which you can pick. You can type anything you want into a name field or address field, but the "Physician" field can only be filled with a provider from your practice. To see a list of possible answers in a "Look-Up" field, type an asterisk (*) and press **Enter**.

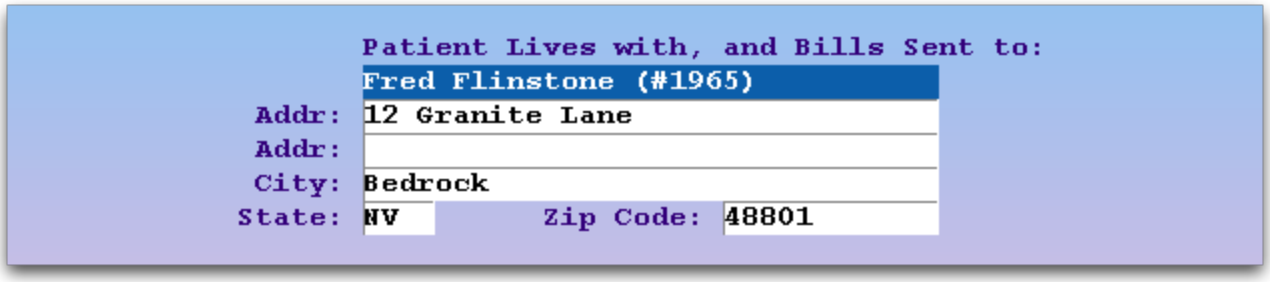
The primary care "Physician" field and the "Status" field are both look-up fields:




**Status Flags.** The "Status" field is not like other fields. Statuses are used to "flag" or classify patients. You can put several different status flags on a patient, separated by commas. A patient might have "Needs Extra Time" and "Diabetic" status flags. Your office can run reports to see all the patients that have a particular status. The status flags show up in the scheduler and elsewhere in Partner so your office will always know if there are any special circumstances surrounding a patient.

**Four "Extra Information" Fields.** There are four fields in the middle of the screen which are customizable. Your practice might use these fields to store additional contact information, nicknames, or important dates.

**Guarantor and Custodian.** In the middle of the screen, you will see either one or two account. If the same account is both the guarantor and custodian for this patient, one account will appear in the center of the screen:




If one account is the guarantor and a *different* account is the custodian, two accounts will appear:

| | Patient Lives With: | | Send Bill To: | |
|---|---|---|---|---|
| | Wilma Flintstone (#1510) | | Fred Flinstone (#1965) | |
| Addr: | 21 Granite Drive | | 12 Granite Lane | |
| Addr: | | | | |
| City: | Bedrock | | Bedrock | |
| State | NV | Zip Code: 48801 | NV | Zip Code: 48801 |

When two accounts are shown, the account on the left is the custodian account and the account on the right is the guarantor account.

**What is a guarantor, what is a custodian?** The custodian is the patient's care-giver and physical address. The guarantor is the bill payer. During the time an individual is a patient at your practice, the guarantor and custodian may change or even switch places! Press [**F4** -- *Reassign Account*] to make changes.

### Deceased Patients in the Patient Account

You can review and set a patient's deceased status in the Patient Editor (**notjane**).

Pat PCC: 3430 Patient Editor Page 1 of 4

| | | | |
|---|---|---|---|
| First Name: | Jonah | Born: | Apr 4, 2004 |
| Nickname: | | Age: | Deceased |
| Middle Name: | | Sex: | Male |
| Last Name: | Smith | Deceased: | Yes |
| Suffix: | | Deceased Date: | Feb 2, 2012 |
| Physician: | | | |
| Status: | Deceased | | |

Wherever the patient's age appears in Partner, it will be replaced with the Deceased indicator.

**Deceased Flag:** As shown above, the Deceased status automatically adds a Deceased status flag to the patient's record in Partner. You can use that status flag to include or exclude the patient from reports or the Patient Recaller. If you add or remove the status flag, it will also change the patient's deceased status.

As with queues in PCC EHR, Partner's patient lists will display the deceased status in place of the patient's calculated age.

Checkin Patient

I could not find J Smith exactly.
I did find several people with Smith for a last name.

View: Patient

| | First | Last | Born | Sex | Age | Last Seen |
|---|---|---|---|---|---|---|
| 1. | Jackson T. | Smith | 11/28/96 | M | 17 yrs, 6 mos | 04/02/14 |
| 2. | Jason | Smith | 08/09/10 | M | 3 yrs, 10 mos | 11/09/13 |
| 3. | Jayson | Smith | 07/05/99 | M | 14 yrs, 11 mos | 01/16/14 |
| 4. | Jennifer | Smith | 12/01/02 | F | 11 yrs, 6 mos | |
| 5. | Jonah | Smith | 04/04/04 | M | Deceased | |
| 6. | Jason R. | Smith, III. | 12/30/08 | M | 5 yrs, 5 mos | 01/07/09 |
| 7. | Joshua "Danny" G | Smith, M.D. | 01/09/96 | M | 18 yrs, 5 mos | |

Please enter your choice: 1

**Function Keys on the Demographics Page**

[**F1** -- *Save*]

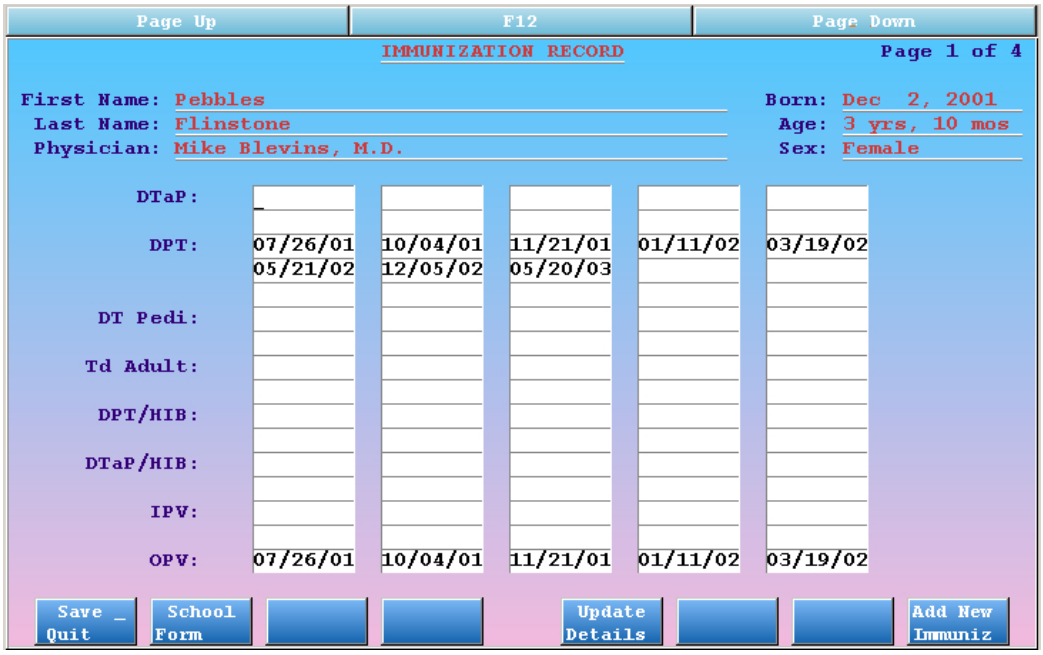
Press **F1** to save all changes and quit **notjane**.

[**F2** -- *Edit Policies*]

Press **F2** to view the patient's Insurance Policies screen.

[**F3** -- *Imms Record*]

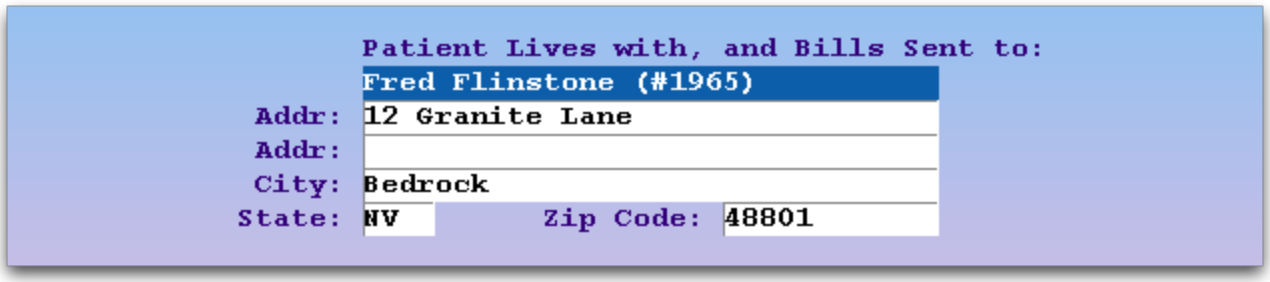
Press **F3** to run the **imms** program. In **imms**, you can view the patient's immunization record. Press [**F2** -- *School Form*] to print a nicely formatted immunization record, press **F12** to return to **notjane**.



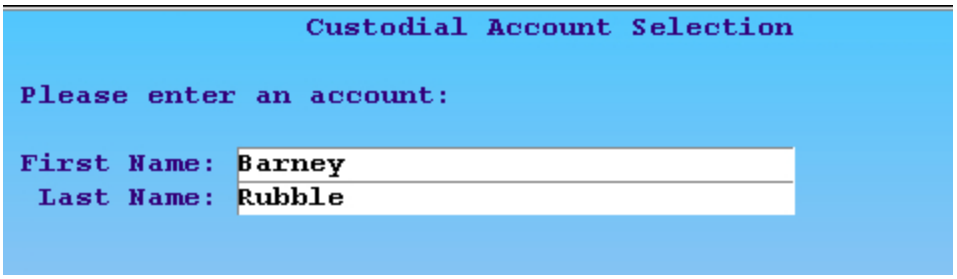

You can enter injection dates manually, by using the **F8** key, or by posting immunization charges during checkout.

[**F4** -- *Reassign Account*]

Press **F4** to change the guarantor or custodian accounts for this patient. You will first be asked which account to reassign:




Next, find the family account:

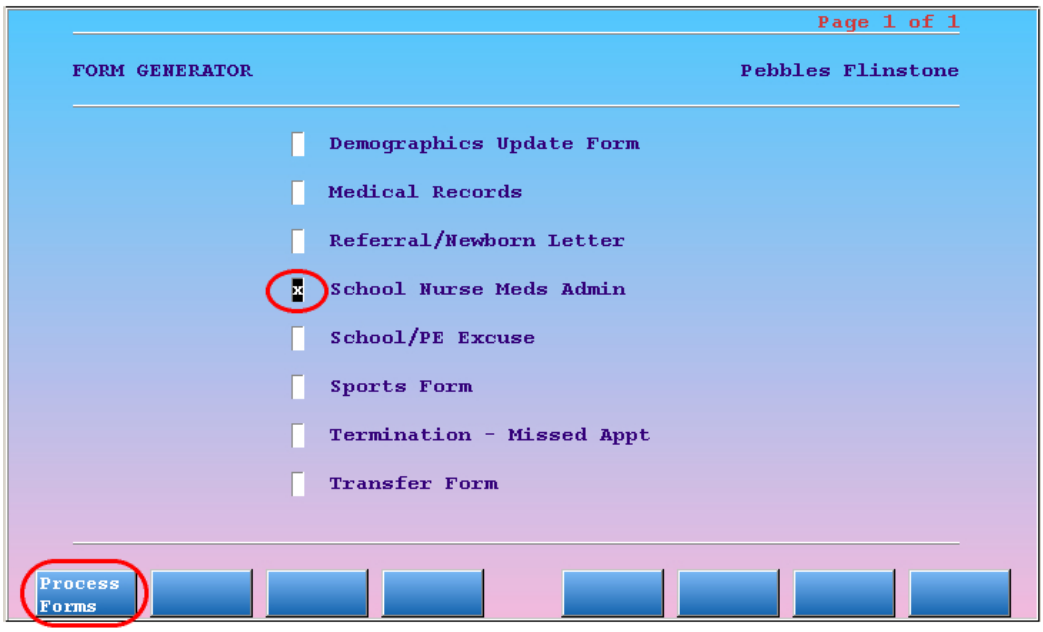



[**F5** -- *Patient History*]

Press **F5** to run the Patient History (**patinfo**) program. This program produces two different reports which summarize a patient's visits by date or by diagnosis. For example, a Patient History report could show you every date upon which asthma was used as a diagnosis for the patient.

[**F6** -- *Patient Forms*]

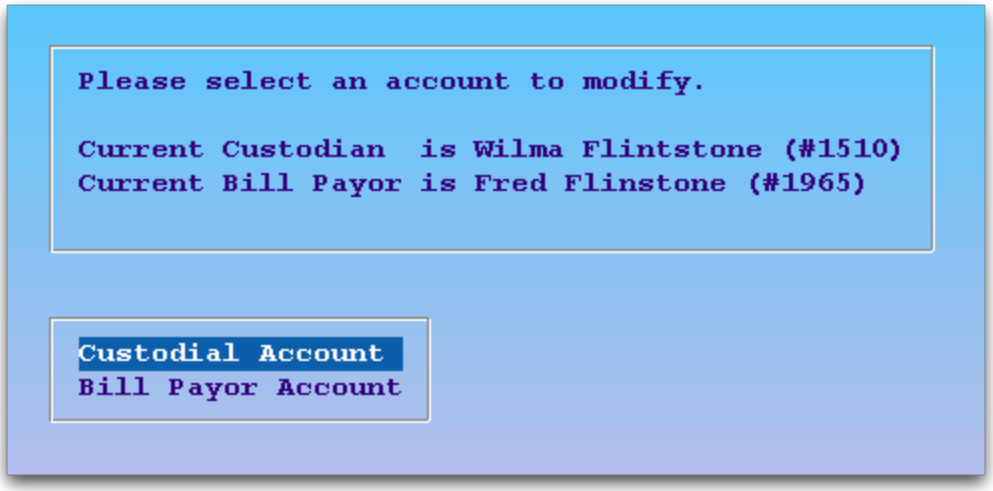
Press **F6** to generate a form letter for this patient. You will see a list of available form letters:




Use the arrow keys to select the desired letter, mark the letter or letters you want with an **X**, and press [**F1** -- *Process Forms*]. Some forms will ask you questions on the screen before they print. Do you want to learn how to create your own form letters or edit the existing ones? Read *Customizing Form Letters* for more information.

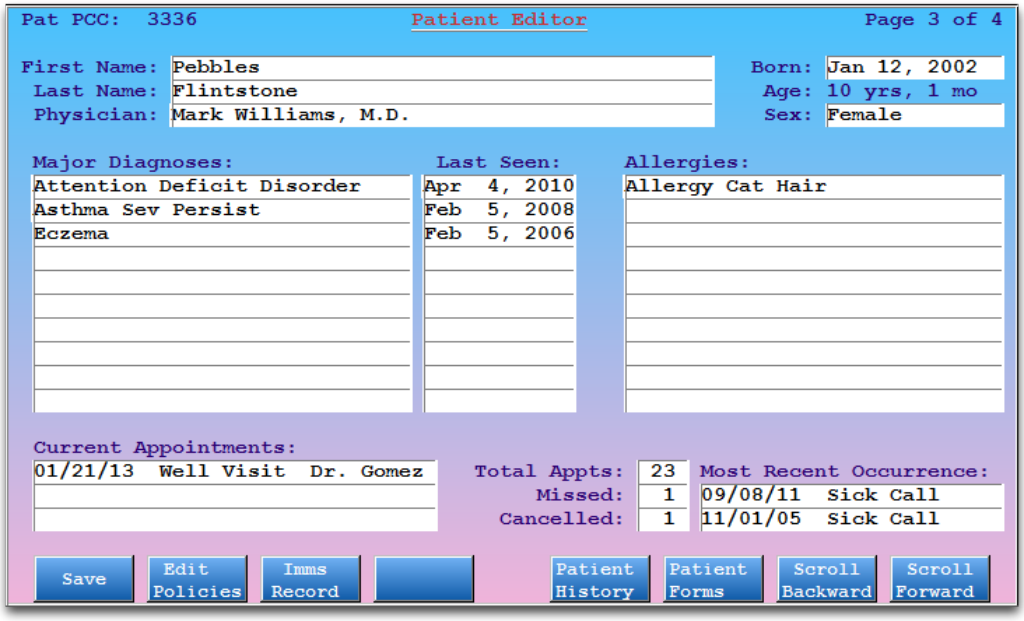
[**F7** -- *Edit Account*]

Press **F7** to run the Family Editor (**fame**) for the account(s) connected to this patient. If there are two different accounts related to the patient, you will be prompted to choose whether to edit the Custodian or the Guarantor:




### 3.3.3 Major Diagnoses and Allergies

The third page of **notjane** contains major diagnoses and allergies for the patient and a summary of appointment information.



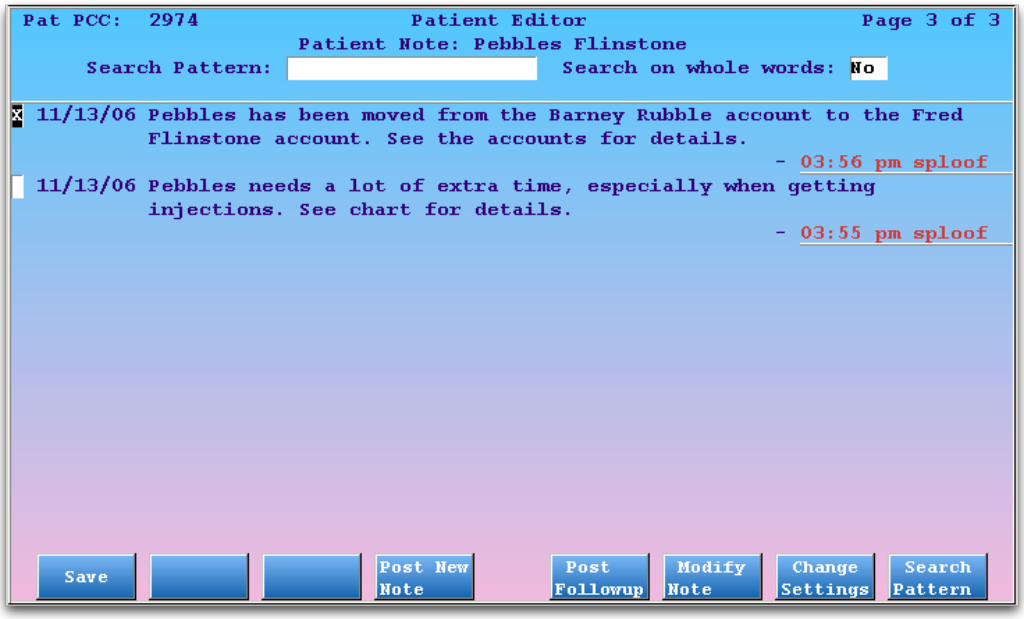

**Major Diagnoses and Allergies:** You can enter major diagnoses and allergies manually, but Partner will also add entries based on the diagnoses that are posted for the patient during checkout. Only diagnoses that are marked as "Major" or "Allergy" in the Partner diagnosis table will appear on these lists.

**Appointment Information.** Partner will list the next three scheduled appointments for the patient. You can also see the total number of appointments, the total number of appointments missed and canceled, and an explanation of what visits were most recently missed and canceled. All of this information is maintained automatically by Partner and can not be edited.

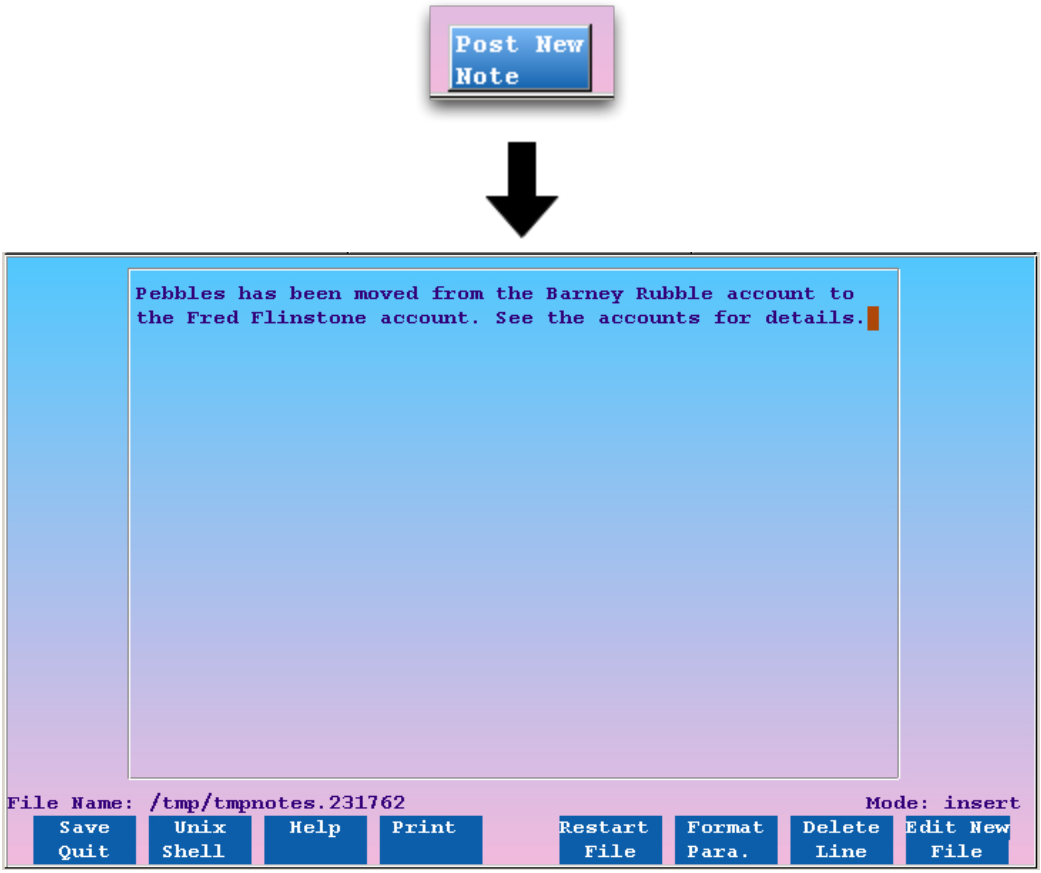
**More Diagnoses and Procedure Information.** For a detailed history of the procedures and diagnoses of this patient, press [**F5** -- *Patient History*] to run the **patinfo** program.

### 3.3.4 Edit Patient Notes

The third page of **notjane** is the Patient Notes screen. You can store important information and records of interactions with the patient.




Press [**F4** -- *Post New Note*] to begin adding a new note. You will see a text editor window for adding your note:



While typing your note, you can use the various function keys in the text editor to make changes. After typing your note, press [**F1** -- *Save & Quit*]. Press **F12** to cancel.

**Learn More About Notes:** The notes screen is the same in both the Family and Patient Editors. It includes a follow-up note feature, a search field, and many other features to help you track important information about the patient or family. To learn about these features, read *Structured Notes*.

# 3.4. Add New Patients and Accounts

Before patients can be scheduled or procedures can be posted, you need to add the patients and their family account(s) to Partner. This section will guide you through a basic procedure for adding a new patient and a family account: try to find the patient, add the patient, and then add the family (if they are new to your practice).

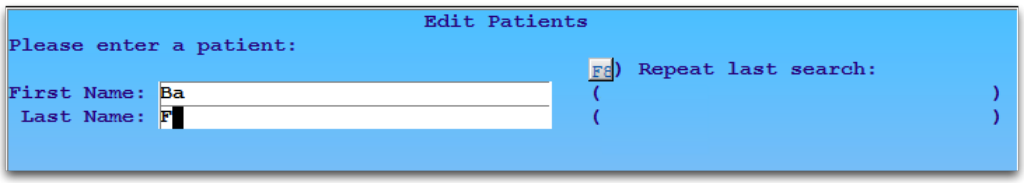
**When do you add patients?** You might need to add a patient when you try to schedule them and find they are not in your system. Or perhaps you are posting hospital charges for a newborn and know that "Babyboy Smith" has not yet been added to Partner. Whatever job you are performing, you will start by trying to find a patient.

Read below to learn the details of each step.

**Step 1: Attempt to Find the Patient**

Before you can add a patient, you must make certain that the patient is not already in the Partner system. You may already be searching for the patient while scheduling in **sam** or some other program.

If not, run the Patient Editor (**notjane**) and enter the first few letters of the patient's name. If the patient has already visited your office, they should be in the system.




**Step 2: Press [F2 - *Create Patient*]**

If the patient does not appear, and you are satisfied that you searched by the patient's real name, press [**F2** - *Create Patient*].

Edit Patients

I could not find anyone named Ba F.
I did find some people who had similar names.

View: Patient

| | First | Last | Born | | Age | Last Seen |
|---|---|---|---|---|---|---|
| 1. | Baby Boy | Ferris | 04/23/04 | M | 10 years | |
| 2. | Baby | Fischer-Blindo | 07/15/91 | F | 22 yrs, 9 mos | 08/12/09 |
| 3. | Baxter | Fleischer | 04/29/14 | F | 1 day | |
| 4. | Bartholome | Flickinger | 11/06/97 | M | 16 yrs, 5 mos | 04/20/14 |

Please enter your choice: 1

Create Patient | Advanced Search | Prev View | Next View | Select View | Start Over

## Step 3: Fill Out Basic Patient Information

Fill in each field, pressing **Enter** or **Tab** to move from field to field.

Pat PCC: 3439 Patient Editor Page 1 of 4

First Name: Barney
Nickname: Bam Bam
Middle Name:
Last Name: Rubble
Suffix: Jr
Physician: Beverly Crusher, MD
Status: Adoption

Born: Feb 2, 2012
Age: 2 yrs, 4 mos
Sex: Male
Deceased: No
Deceased Date:

In the "Born" field, you can type the birth date in many different formats; "082401" will be translated into August 24th, 2001. The "Physician," "Status," and "Referring Physician" fields are look-up fields. In a look-up field, you can use an abbreviation or enter an asterisk (*) to view a list of possible entries.

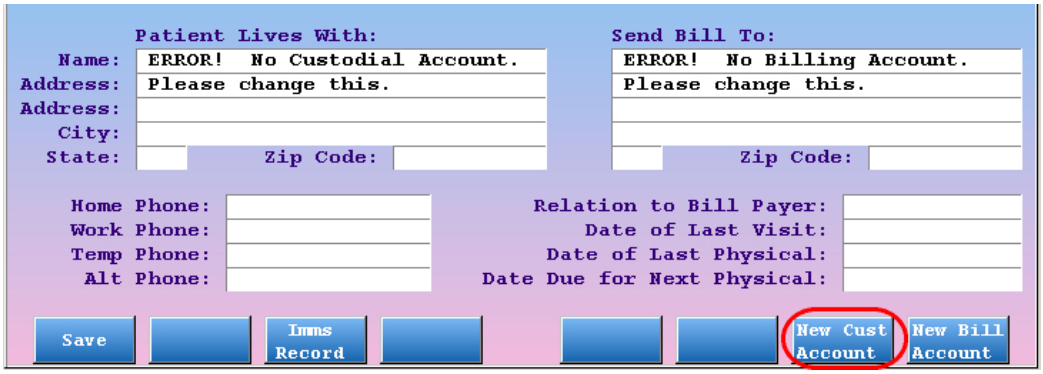
**Follow Your Office's Standards:** Some medical practices do not assign a primary care physician. Some practices have rules for how to record a patient's full name. Other practices assign certain Status Flags for new patients. You should follow the standards that your practice uses when entering data.

## Step 4: Fill In the Four Custom Boxes

The four boxes below the patient's basic information are customizable. Your office may use them for a special purpose.

Other ID:
School: Bedrock Central
Note: Rubble
Old PM ID : 2755

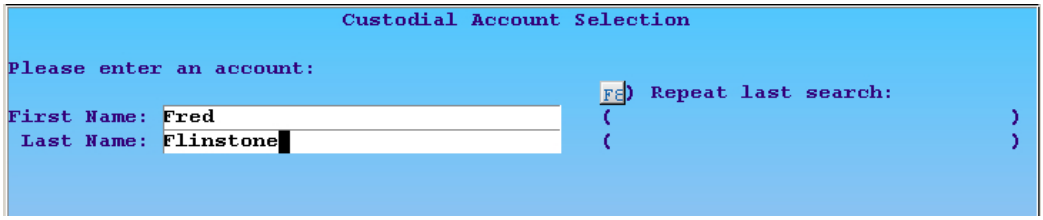
### Step 5: Press [F7 - *New Cust Account*] to Assign an Account




You must tell Partner who the custodian and guarantor accounts are for this patient. The patient's family account may already exists in Partner, or you may need to create a new family account. In either case, press [**F7** - *New Cust Account*] to start the process.

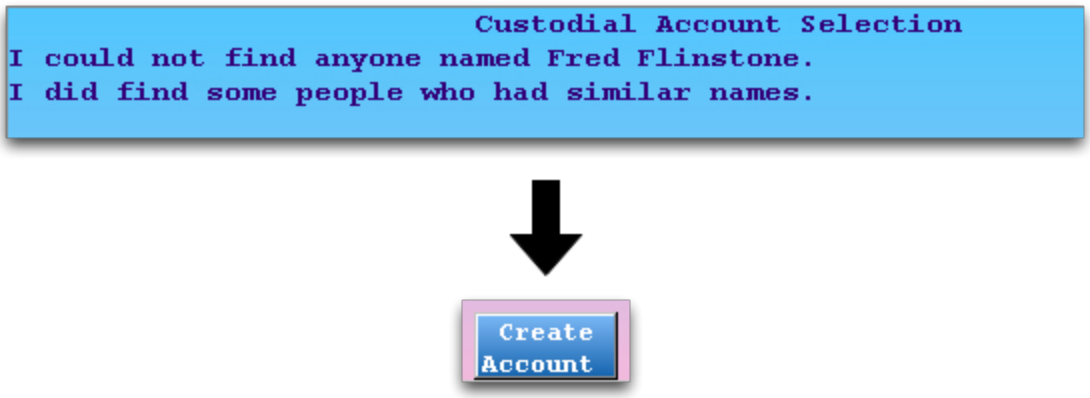
### Step 6: Find Existing Account or Add a New Account

Enter the name of the family with whom your new patient lives.




If the family already exists in Partner, you will be brought back to the **notjane** screen and the account you selected will be listed under the "Patient Lives With" and "Send Bill To" sections.

If you can not find the account, press [**F2** - *Create Account*].




### Step 7: Fill Out Account Information

If you are adding a new account to Partner, fill out the family name and basic information.

Acct PCC: 1964 Add Account Page 1 of 3

First: Fred
Last: Flinstone
Addr: 18 Bedrock Ln
Addr:
City: Bedrock
State: NV Zip Code: 01234
Home Phone: 800-722-1082
Work Phone:
Temp Phone:
Alt Phone:
Email:
Status:

PC Notes:
Family Notes:
SSN:
Box 4:
Box 5:
Box 6:
Last Service:
Last Bill Sent:
Last Pers Pmt:
Last Ins Pmt:
Hold Bill Till:
Budget Amt:

| | 0 - 29 | 30 - 59 | 60 - 89 | 90 -119 | 120+ | Totals |
|---|---|---|---|---|---|---|
| Personal: | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 |
| Insurance: | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 |
| Access MA: | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 | $ 0.00 |

Save | Default Address | Add New Patient | Notes

When you are finished adding account basics, press [**F1** - *Save*] to save the new account and assign it to your new patient.

## Step 8: Review Custodian and Guarantor, Change if Necessary

After selecting or saving the patient's custodian account, Partner will return you to the Add Patient screen. You will see your chosen family assigned as both the Custodian and Guarantor account.

Patient Lives With:
Name: Fred Flintstone
Address: 1400 Rock Road
Address:
City: Winooski
State: VT Zip Code: 05404

Send Bill To:
Fred Flintstone
1400 Rock Road
Winooski
VT Zip Code: 05404

Home Phone: 802-555-0105
Work Phone: 802-555-0146
Cell Phone: 802-555-0112
Emg Phone:
Relation to Bill Payer: Child
Date of Last Visit:
Date of Last Physical:
Date Due for Next Physical:

Save | Edit Policies | Imms Record | Patient History | Patient Forms | New Cust Account | New Bill Account

If necessary, you can now select a *different* family as the guarantor account by pressing [**F8** - *New Bill Account*]. Later, you can reassign either or both accounts.

**Step 9: Add Other Information**

Press **Page Down** to view the other pages of the **notjane** program. For example, you can add major diagnoses and allergies as well as any important notes about the patient. You can also press [**F3** - *Imms Record*] to enter the patient's immunization history, or [**F2** - *Edit Policies*] to add insurance policies.

**Step 10: Press [F1 - *Save*]**

Once you are finished entering patient information, press **F1** to save and quit. You are now ready to schedule the patient, post charges, or perform other functions.

**Two Methods:** As shown above, you can add a patient and Partner will guide you through adding or selecting the patient's guarantor and custodian accounts as you create the patient. However, if you are entering a whole family that has never before visited your Practice, you may find it faster to add the family account first, using the Family Editor (**fame**) and then add patients.

# 3.5. Work with Insurance Policies

Your office keeps track of insurance policy information for every patient that walks through your door. Managing those insurance policies is one of the most important functions of Partner. The Insurance Policies screen (**policy**), available from several different Partner programs, is your one-stop screen for reviewing and changing a patient's insurance information.

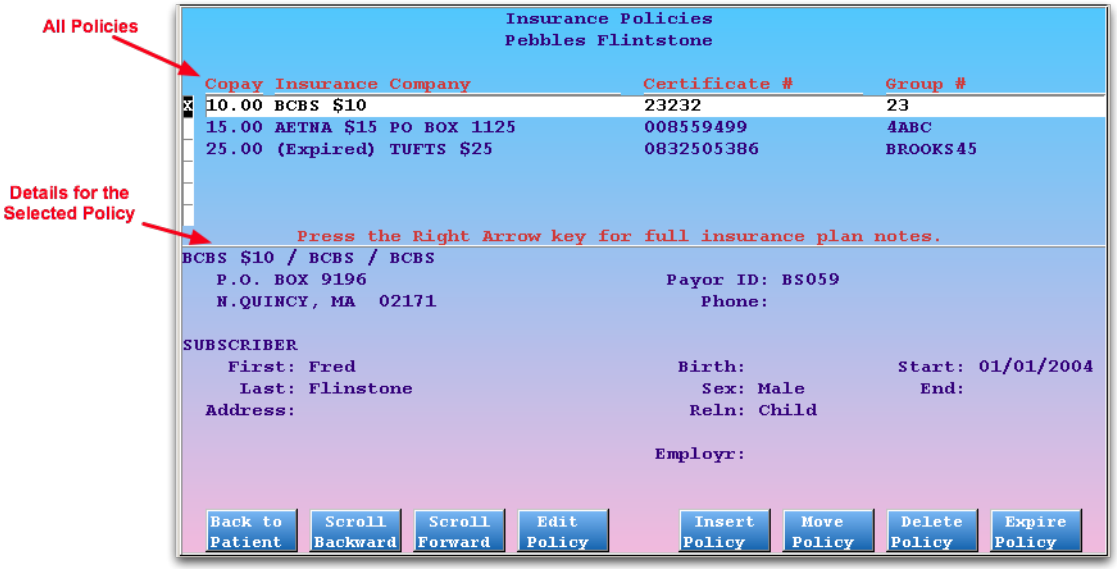
Good insurance tracking means fewer billing and collection problems. Partner's Insurance Policies screen will help you quickly and accurately track insurance information for each patient. If you have any questions, concerns or suggestions, please let us know at 1-800-722-1082.

## 3.5.1 View a Patient's Insurance Policies

To quickly open the **policy** screen and review a patient's insurance policies, simply run the Patient Editor (**notjane**), find a patient, and then press [**F2** -- *Edit Policies*].

**Other Ways to See the Policy List:** Many Partner programs have direct links to the Insurance Policies screen. For example, if you are at the first **checkin** screen in Partner, press [**F1** -- *Check Inscos*] or **Page Down** to review insurance policies for the patient. The Charge Posting (**checkout**) program and the Patient Editor (**notjane**) also have links to the **policy** screen.

Policies are listed briefly at the top of the screen, and the details for the selected policy are shown at the bottom:




## How to Read and Interpret the Policy List

- Press the up and down arrow keys to select any policy. Once you have selected a policy, full details will appear in the box at the bottom of the screen. If the list of policies is too long to fit on the screen, press [**F3** -- *Scroll Forward*] or [**F2** -- *Scroll Backward*] to review the entire list. Press the right arrow key to view additional plan notes for the selected policy.
- If any subscriber details are blank, such as the name or address, Partner will generate claims using the information from the guarantor account. If the policy holder's address is the same as the guarantor's address, you do not need to re-enter the address on the patient's policy screen.
- Unless it is expired, the first policy on the list is the patient's primary insurance. Policies are auto-sorted: expired policies are automatically moved below active policies, and Medicaid policies appear below active non-medicaid policies. You can arrange your active policies to set the primary and secondary insurances by selecting a plan and pressing [**F6** -- *Move Policy*].

## How to Make Changes

You can edit, add, move, delete, or expire an insurance policy with a few, quick keystrokes. While inserting a new policy, you also have the options to copy a recently edited policy or automatically add the new plan to the record of any siblings or family members. When expiring a policy, you will have the opportunity to expire the same plan for all patients in the same family.

The function keys for each task are self-explanatory:

Select a policy on the screen using the arrow keys, press the appropriate function key, and follow the prompts on the screen. The more detailed instructions in the sections below will guide you through each task.

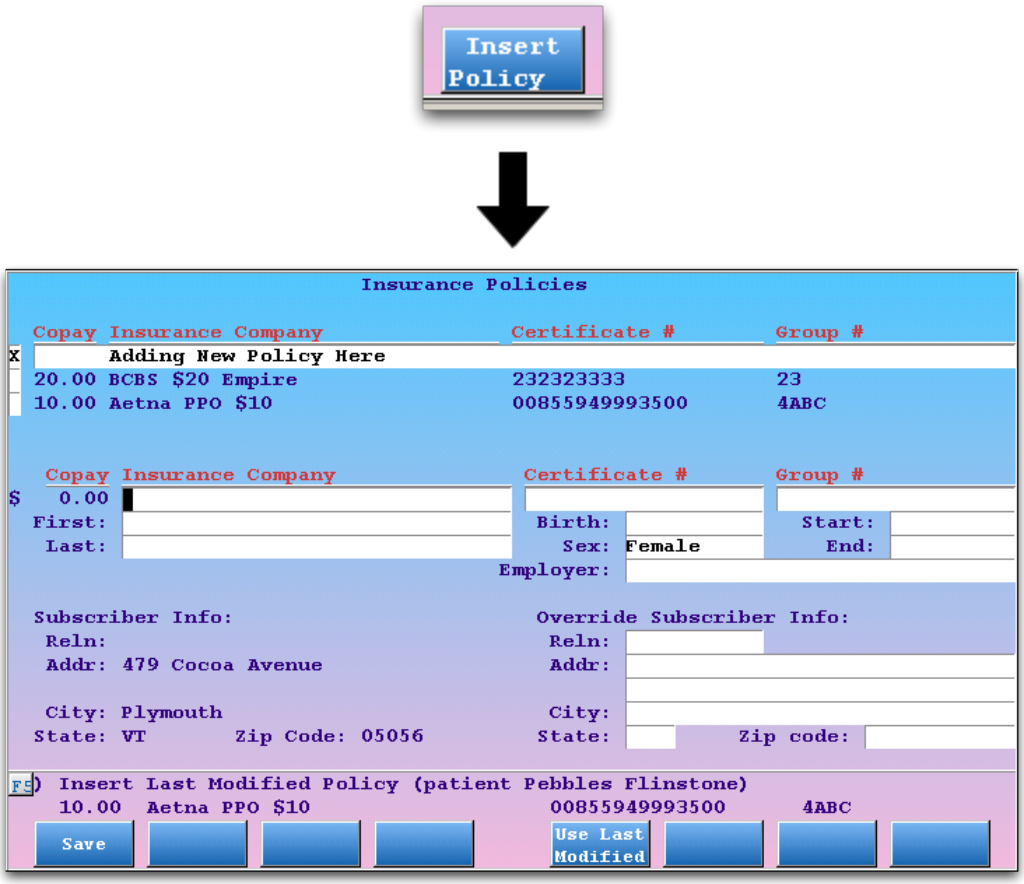
**Important:** You should never *delete* an old, expired policy. There may still be outstanding balances due that company, or you may later need to know previous plan information for a patient. Instead, insert a new policy at the top of the list and expire the old policy.

### 3.5.2 Add a Policy

When a patient's insurance information changes, you need to add a new plan to their list of policies. You should do this *before* posting charges for the patient. Otherwise, the procedures may be billed to the wrong carrier or with the wrong information.

Follow this procedure to add a policy:

**Step 1: Press [F1 -- *Insert Policy*]**




A new line will appear at the top of the list of insurance policies, and blank fields will appear at the bottom of the screen.

**Step 2: Enter Policy Information**

Enter policy information in the blank fields.

```
  Copay Insurance Company                  Certificate #        Group #
$  15.00 Cigna PPO $15                     012345678            BROOKS45
  First: Wilma                              Birth: 02/12/76      Start: 01/01/07
   Last: Flintstone                           Sex: Female          End:
                                          Employer:

 Subscriber Info:                         Override Subscriber Info:
  Reln:                                    Reln:
  Addr: 479 Cocoa Avenue                   Addr:

  City: Plymouth                           City:
 State: VT        Zip Code: 05056         State:          Zip code:
```

**Keep In Mind:**

- **Looking Up the Insurance Company:** For the Insurance Company field, you can use an asterisk (*) to search through your practice's list of plans. For example, entering ***BCBS*** would show you a list of BCBS insurance plans. Depending on how your office tracks insurance companies, typing ***4624*** may show you all insurances with a P.O. Box of 4624, a handy shortcut.
- **Override Fields:** When generating claims, Partner will use the guarantor's name, address, and relationship as recorded in the **fame** and **notjane** programs. If the insurance policy holder is not the guarantor, you should fill out the name, relationship, and address fields shown above.
- **Effective Dates:** The effective dates are very important. Partner chooses which insurance company to bill based on the effective dates. You *can* leave the date fields blank, but Partner will then assume that the insurance plan has always been valid and that the coverage has no known expiration.

**Step 3: Press [F1 -- *Save*]**

As soon as you press **F1**, the new policy will be saved and active for this patient.

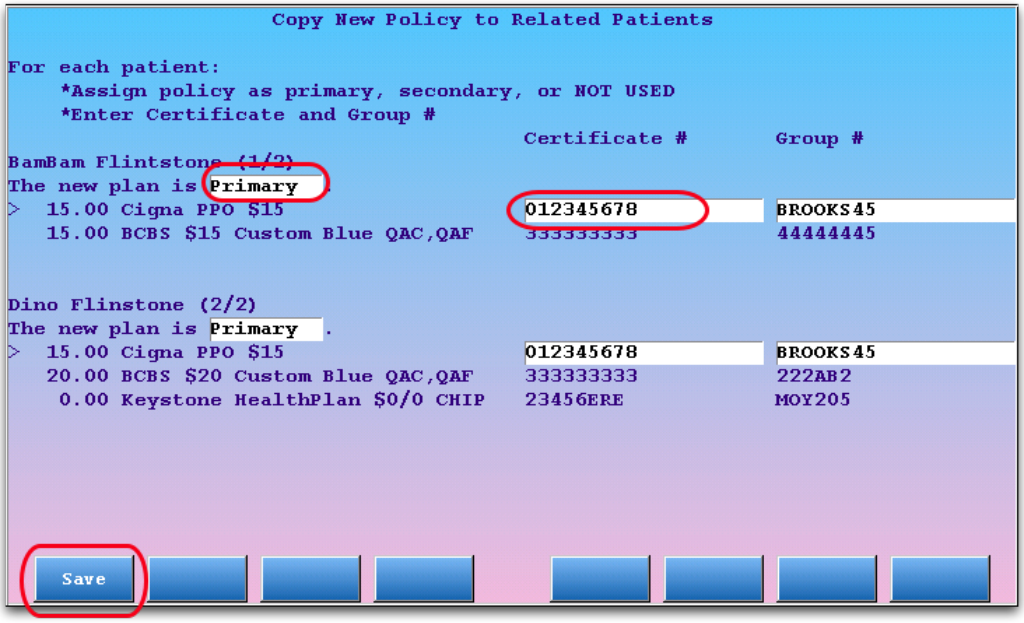
**Step 4: Optional: Copy the New Policy to Related Patients**

If the new policy is not a Medicaid policy, and the patient has relatives in your system that share the same guarantor, Partner will next ask whether you wish to add the new policy to the patient's siblings. A sibling is any patient who shares a guarantor with the current patient.

```
Policy saved for Pebbles Flinstone.
Do you want to copy this policy to siblings?

Press F1 to copy the new policy to siblings.
Press F4 or F12 to continue without copying.
```

Press [**F1** -- *Copy Policy*] to continue to the sibling screen, press [**F4** -- *Do Not Copy*] or **F12** to continue without modifying siblings.

On the sibling selection screen, confirm the position (primary, secondary, etc.) of the new plan and update any differences to the certificate and group numbers for each patient.




Press [**F1** -- *Save*] to add the plans to the sibling records.

If you do *not* wish to copy the new policy to any of these patients, press **F12**.

**Step 5: Review Your Changes**

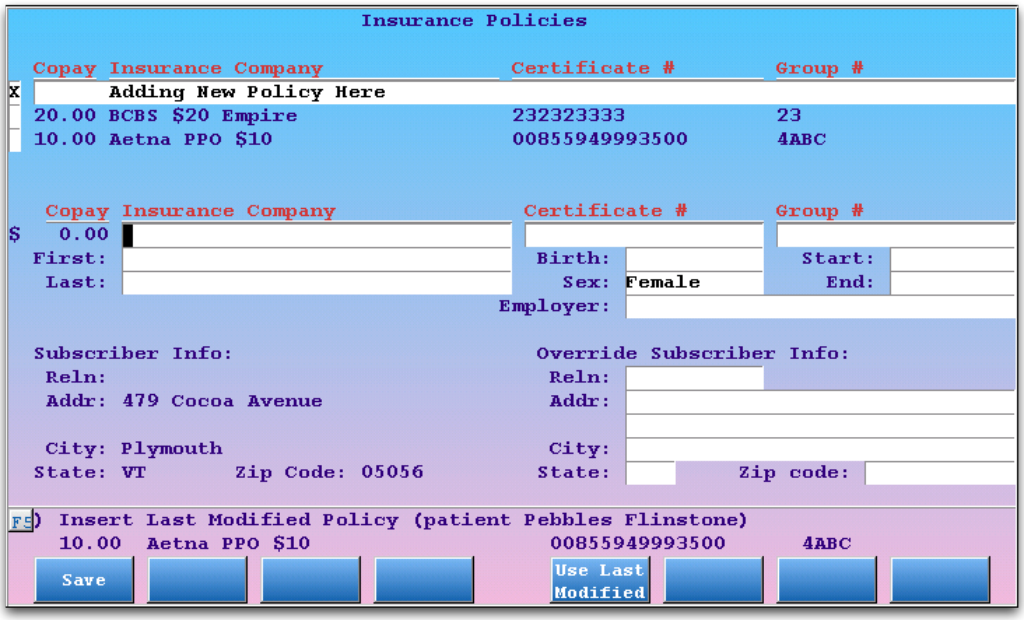
Finally, you will be returned to the main **policy** screen. After adding a new policy, you should review all active insurance policies for the patient. Is the primary insurance listed first? Do you need to expire an old policy? Use the function keys at the bottom of the screen to make any further changes to the patient policy record.

## 3.5.3 Copy a Policy

When adding a new policy, you may wish to copy insurance plan information from a recently edited policy elsewhere on the account. If you recently added or edited a policy for some other patient on the family, you can automatically import the entire plan to this patient's policy record.

Follow this procedure to copy the family's most recently edited policy:

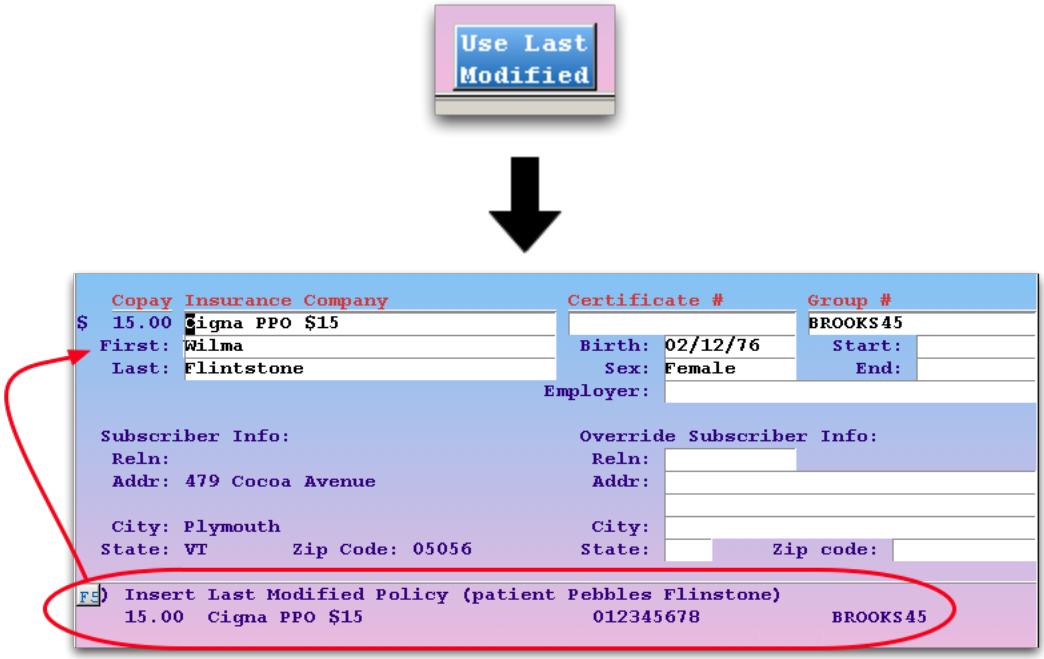
**Step 1: Press [F1 -- *Insert Policy*]**




A new line will appear at the top of the list of insurance policies, and blank fields will appear at the bottom of the screen.

**Step 2: Press [F5 -- *Use Last Modified*]**

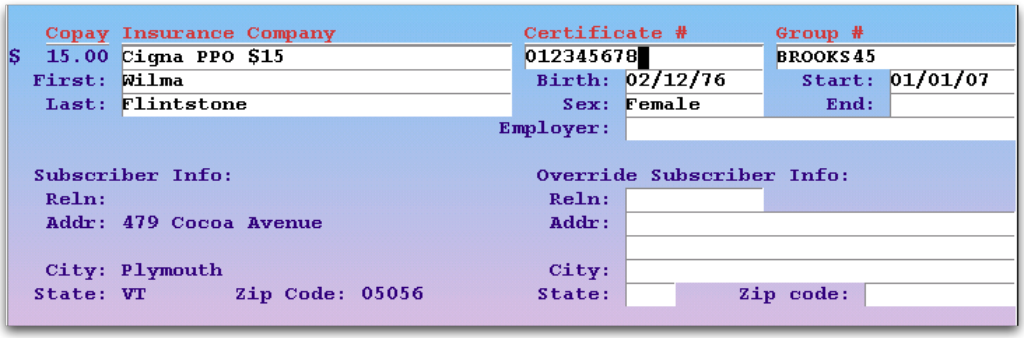
This family's most recently edited policy is shown in the middle of the screen. Press **F5** to copy that policy's details into the new policy fields at the bottom of the screen.




The blank fields will be filled out with all available information from the most recently edited policy.

### Step 3: Enter or Change Policy Information

Update any information that is different for the current patient, such as the insurance certificate number.

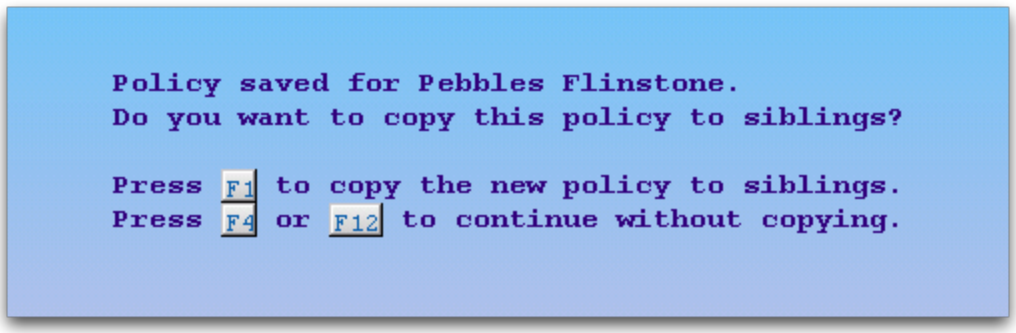



### Step 4: Press [F1 -- *Save*]

As soon as you press **F1**, the new policy will be saved and active for this patient.

### Step 5: Optional: Copy the New Policy to Related Patients

As with the insert policy procedure, you will now be offered the option of adding the policy to the record of other patients who share the same guarantor account.




Press [**F1** -- *Copy Policy*] to continue to the sibling screen, press [**F4** -- *Do Not Copy*] or **F12** to continue without modifying siblings.

On the sibling selection screen, confirm the position (primary, secondary, etc.) of the new plan and update any differences to the certificate and group numbers for each patient.

```
                    Copy New Policy to Related Patients

For each patient:
    *Assign policy as primary, secondary, or NOT USED
    *Enter Certificate and Group #
                                        Certificate #       Group #
BamBam Flintstone (1/2)
The new plan is Primary .
>  15.00 Cigna PPO $15                  012345678           BROOKS45
   15.00 BCBS $15 Custom Blue QAC,QAF   333333333           44444445


Dino Flinstone (2/2)
The new plan is Primary .
>  15.00 Cigna PPO $15                  012345678           BROOKS45
   20.00 BCBS $20 Custom Blue QAC,QAF   333333333           222AB2
    0.00 Keystone HealthPlan $0/0 CHIP  23456ERE            MOY205

 Save
```

Press [**F1** -- *Save*] to add the plans to the sibling records.

If you do *not* wish to copy the new policy to any of these patients, press **F12**.

**Step 6: Review Your Changes**

Finally, you will be returned to the main **policy** screen. After adding a new policy, you should review all active insurance policies for the patient. Is the primary insurance listed first? Do you need to expire an old policy? Use the function keys at the bottom of the screen to make any further changes to the patient policy record.

## 3.5.4 Expire a Policy

When you add a new insurance policy to a patient, you will usually expire an old policy. When you expire an insurance policy, you will also be given the option to expire the same policy for all patients with the same guarantor.

When you wish to expire a policy, follow this procedure:

**Step 1: Select the Policy You Want to Expire and Press [F6 -- *Expire Policy*]**

```
                    Insurance Policies
                    Pebbles Flintstone

  Copay Insurance Company                Certificate #       Group #
  10.00 BCBS $10                         23232               23
X 15.00 AETNA $15 PO BOX 1125            008559499           4ABC
  25.00 TUFTS $25                        083250538609        BROOKS45
  25.00 (Expired) TUFTS $25              0832505386          BROOKS45
```

**Step 2: Enter the End Date**

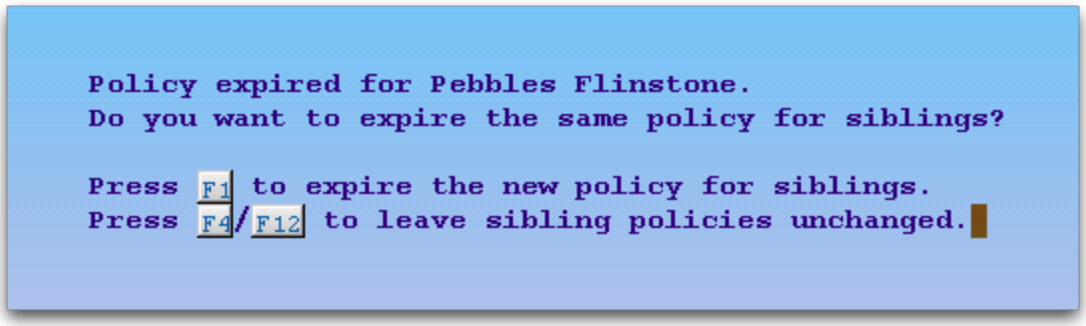
Yesterday's date will be entered automatically in the "End Date" field for the policy. You can enter a different date, indicating when the policy expires. The end date is the last date on which the selected policy should be billed for new charges.

**Step 3: Press [F1 -- *Save*]**

Press **F1** to save the policy's end date and expire the policy.

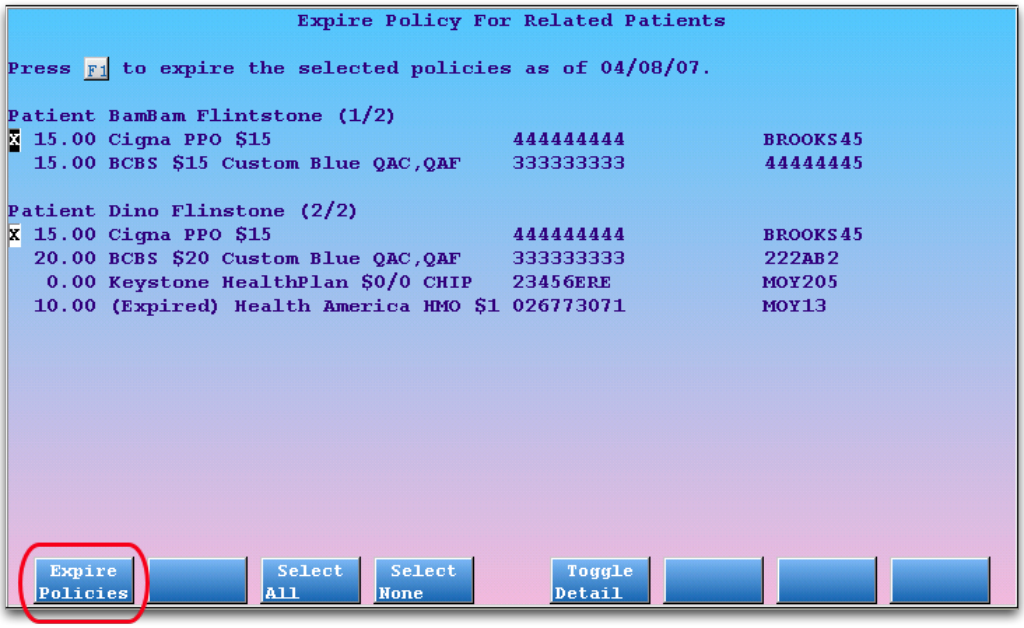
**Step 4: Optional: Expire Policy for Patient Siblings**

Next, Partner will ask if you wish to expire the same policy for the patient's siblings. A sibling is any patient who shares a guarantor with the current patient.




Press [**F1** -- *Expire Policy*] to continue to the sibling screen, press [**F4** -- *Do Not Expire*] or **F12** to continue without modifying siblings.

On the Expire Policy for Related Patients screen, review the policies for each of the siblings and press [**F1** -- *Expire Policies*] to continue. You can change which policies will be expired by deselecting them or using the selection function keys at the bottom of the screen. Press **F12** to cancel and leave the siblings' policies untouched.




**Toggle Detail:** If you need more information about the listed policies, press [**F5** -- *Toggle Detail*].

You can only expire policies that match the one you just expired. You will not be able to select and expire a sibling's policy unless it uses the same entry in the Insurance Companies table in the Table Editor (**ted**).

**Step 5: Press [F1 -- *Expire Policies*] to Expire Selected Policies**

**Review Your Work:** The procedure above will expire a policy for one patient and any related patients you select. Remember, however, that you should always review and update each patient's policy information every time they visit your office.

## 3.5.5 Edit an Existing Policy

You may discover a bad certificate number, or learn that a policy is in a different parent's name and not that of the guarantor account. Follow this procedure to change information about an insurance policy that is already on an account:

**Step 1: Select a Policy**

First, use the arrow keys to select the insurance policy you need to edit.

**Step 2: Press [F4 -- *Edit Policy*]**

The screen will change to allow editing, and your cursor will move to the "Insurance Company" name field.

Copay Insurance Company Certificate # Group #
$ 15.00 Cigna PPO $15 012345678 BROOKS45
First: Wilma Birth: 02/12/76 Start: 01/01/07
Last: Flintstone Sex: Female End:
Employer:

Subscriber Info: Override Subscriber Info:
Reln: Reln:
Addr: 479 Cocoa Avenue Addr:
City: Plymouth City:
State: VT Zip Code: 05056 State: Zip code:

**Step 3: Make Changes**

Use the **Tab**, **Enter** or arrow keys to move to the field that needs to be changed.

**Step 4: Save Your Changes**

When you are finished, press [**F1** -- *Save*] to save your changes. If you make a mistake or choose not to save your changes, press **F12**.

**Important:** You should never overwrite an existing policy with a new plan, even if only the address or the copay has changed. There may be outstanding charges pending the old policy or you may need to reference the family's insurance history. Instead, use [**F5** -- *Insert Policy*]. You can then press [**F4** -- *Copy a Policy*] to grab the information from the policy you wish to correct. When you finish adding the new plan, use [**F8** -- *Expire Policy*] to expire the changed policy.

## 3.5.6 Make a Policy Primary or Secondary

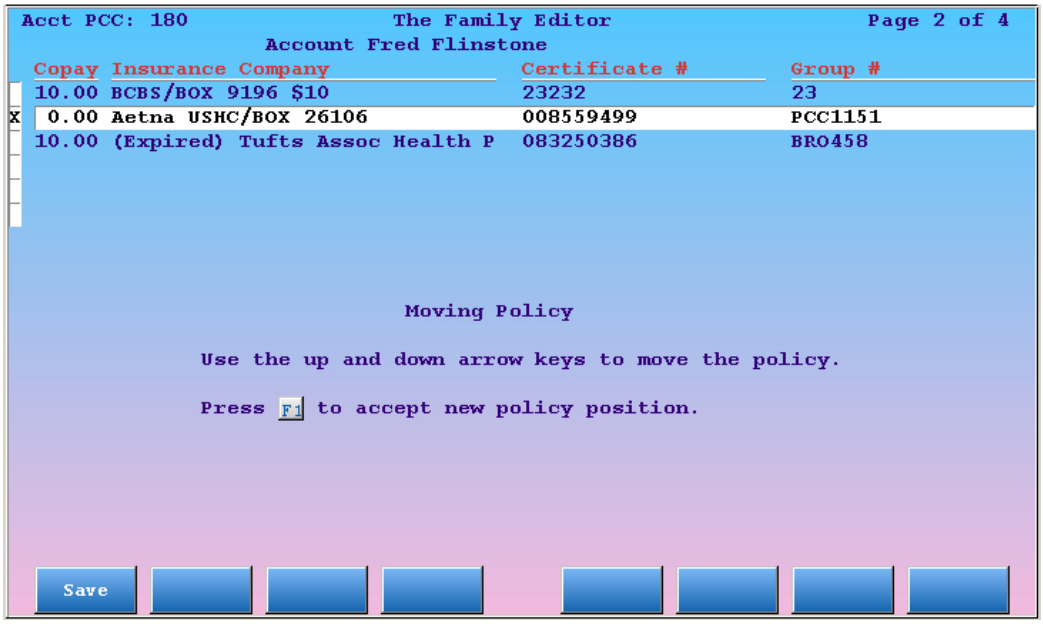
When you post charges, Partner pends them to the active insurance policy on the patient's account. But what if the account has more than one active policy? Which policy is the account's primary insurance? Partner will send the charges to the first policy listed on this screen. Therefore, you may need to adjust the order of the account's active policies. Follow the procedure below.

**Step 1: Select a Policy**

Open a patient's policy list and select the policy you wish to move. Use the up and down arrow keys to move to the policy.

**Step 2: Press F6**

Press [**F6** -- *Move Policy*]. You will see the screen shown below:




**Step 3: Move the Policy**

Use the arrow keys to move the policy where you want it. The screen will update as you move it, showing you the result of the move.

**Step 4: Press F1**

When you are finished, press [**F1** -- *Save*] to save your changes. If you make a mistake or choose not to save your changes, press **F12**.

## 3.5.7 Delete a Policy

Under rare circumstances, you may need to delete a policy from a patient's record. You should not delete expired policies under any circumstances. If any charges have been posted while a policy is active, you should not delete that policy, even if the charges were posted in error.

If you have added the wrong plan to the wrong patient, however, or the account never should have had a certain policy, you can do the following to remove it:

**Step 1: Select the Policy**

Open the policy record for the patient and use the up and down arrow keys to select the offending policy.

**Step 2: Press [F7 -- *Delete Policy*]**

You will see a warning screen.

**Step 3: Press [F8 -- *Delete*]**

If you are certain you want to delete the selected policy, press **F8**. If you change your mind and wish to keep the selected policy, press **F12**. Once deleted, there is no way to "undelete" a policy.

## 3.5.8 Review Log of Policy Changes

The Policy Log (**policylog**) program displays a log of all changes made to a patient's insurance policy record.

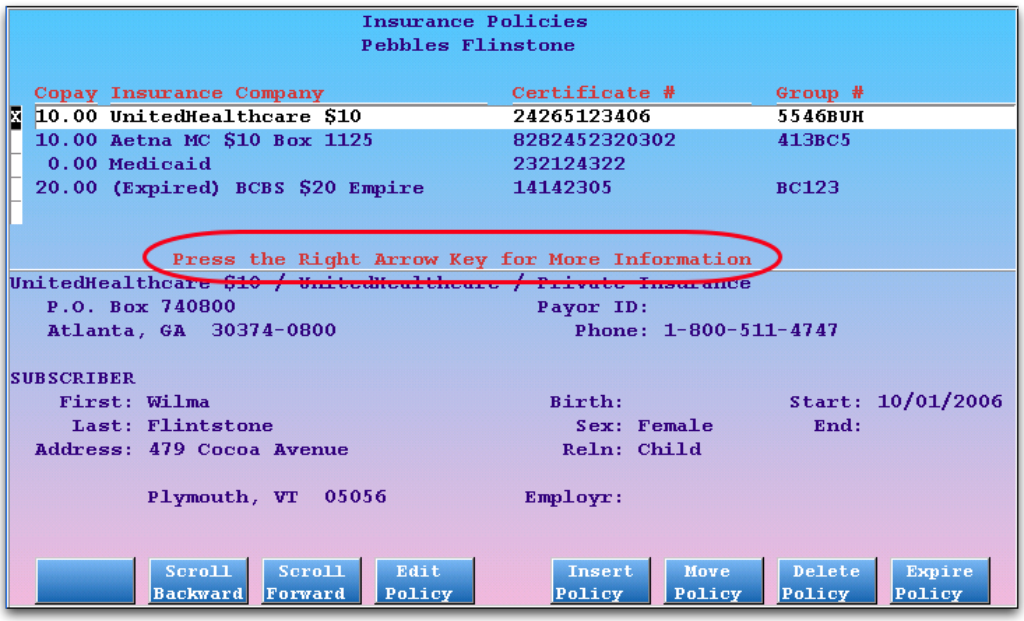
When an insurance policy is added, edited, deleted, or moved, Partner records that action, the time and date it was performed, and the user who made the change. If an insurance policy was accidentally deleted or changed, you can run **policylog** to review the patient's past insurance records. You can also review exactly when a policy was added to a patient's record, which may help explain a billing problem.

**How Far Back?** PCC created the **policylog** program in the spring of 2007. If you need help researching policy changes made before your Partner 3.2007 update, contact PCC support.

### Running Policy Log

There are two ways to run **policylog**:

- You can run **policylog** while viewing a patient's policies. First, press the right arrow key:




Next, press [**F4** -- *Policy Log*].

```
                    Full Insurance Plan Notes

Press F4 for Policy Change Log

Copay Insurance Company                Certificate #        Group #
10.00 UnitedHealthcare $10             24265123406          5546BUH

UnitedHealthcare $10 / UnitedHealthcare / Private Insurance
   P.O. Box 740800                        Payor ID:
   Atlanta, GA  30374-0800                   Phone: 1-800-511-4747

SUBSCRIBER
    First: Wilma                           Birth:              Start: 10/01/2006
     Last: Flintstone                        Sex: Female         End:
  Address: 479 Cocoa Avenue                 Reln: Child

           Plymouth, VT  05056           Employr:

   Go Back   [ ]   [ ]   Policy Log   [ ]   [ ]   [ ]   Print This
```

- You can also run **policylog** as a stand-alone program, either from a command prompt or from a custom entry in your Partner Windows. Contact PCC Software Support for more information.

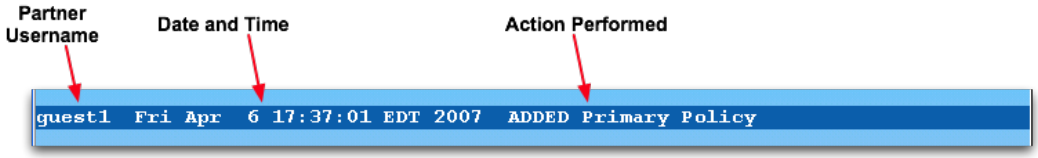
## Reading Policy Log

The policy log is a list of entries that describe changes made to a patient's policy record. The entries are displayed in reverse-chronological order, with the most recent changes listed at the top.

```
                Policy Change Log for Pebbles Flinstone

guest1  Fri Apr  6 17:37:01 EDT 2007  ADDED Primary Policy
Copay Insurance Company                Certificate #        Group #
15.00 BCBS $15 Custom Blue QAC,QAF     333333333            22222
   PO Box 890062                           Payor ID: SB865
   Camp Hill, PA  17089-0062                  Phone: 717-731-8080
SUBSCRIBER
    First: Wilma                           Birth:              Start: 01/01/2007
     Last: Flintstone                        Sex: Female         End:
  Address: 479 Cocoa Avenue                 Reln: Child
           Plymouth, VT  05056           Employr:

guest1  Fri Apr  6 13:27:52 EDT 2007  MODIFIED Primary Policy
BEFORE:
Copay Insurance Company                Certificate #        Group #
10.00 Aetna MC $10 Box 1125            8282452320302        413BC5
   PO Box 1125                             Payor ID: 60054
   Blue Bell, PA  19422                       Phone:

   Quit   [ ]   [ ]   [ ]   [ ]   [ ]   [ ]   Search Pattern
```

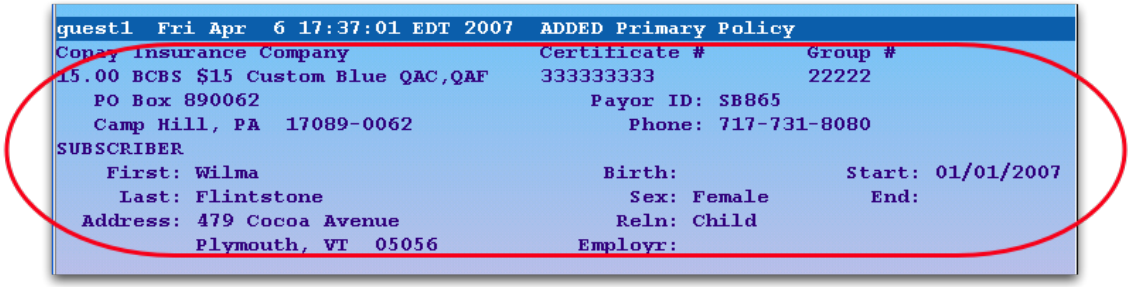
You can press **Page Down** and **Page Up** to scroll through the entries page-by-page, or press the down and up arrow keys to scroll through the list one line at a time.

Each entry in the log describes one action. For each action, **policylog** displays a header with the user who made the change, the date and time the change occurred, and a description of the change.



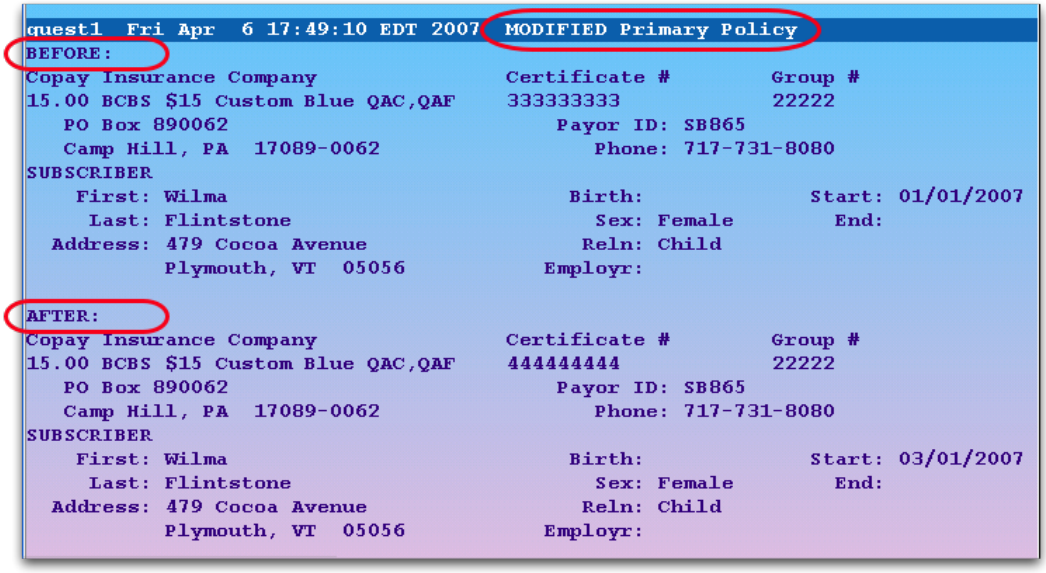

The header shown above indicates that the user "guest1" added a new primary policy on Friday, April 6th, at 5:37pm.

The body of each entry shows the details of the policy affected by the change.




The primary policy that guest1 added was a BCBS policy with a $15 copay.

**More Complex Changes:** When a plan is moved or modified in some way, the body of the entry will include a "Before and After" section to show the change that was made:

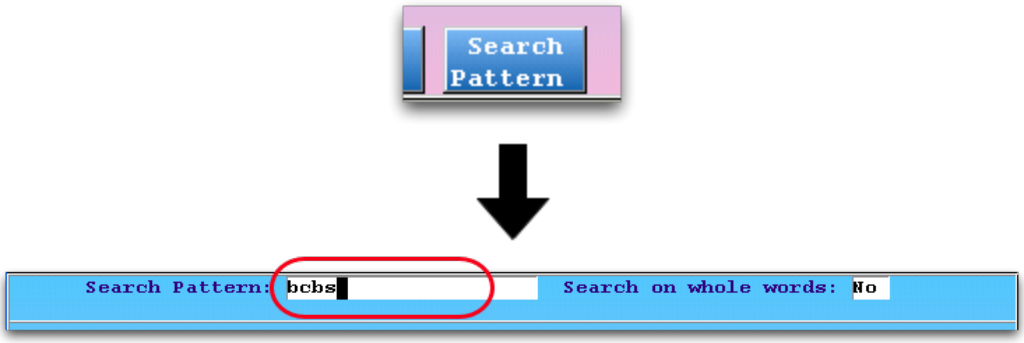



In the example above, guest1 changed the certificate number on the BCBS plan from 333333333 to 444444444. The policy's start date was also changed from 1/01/2007 to 3/01/2007.

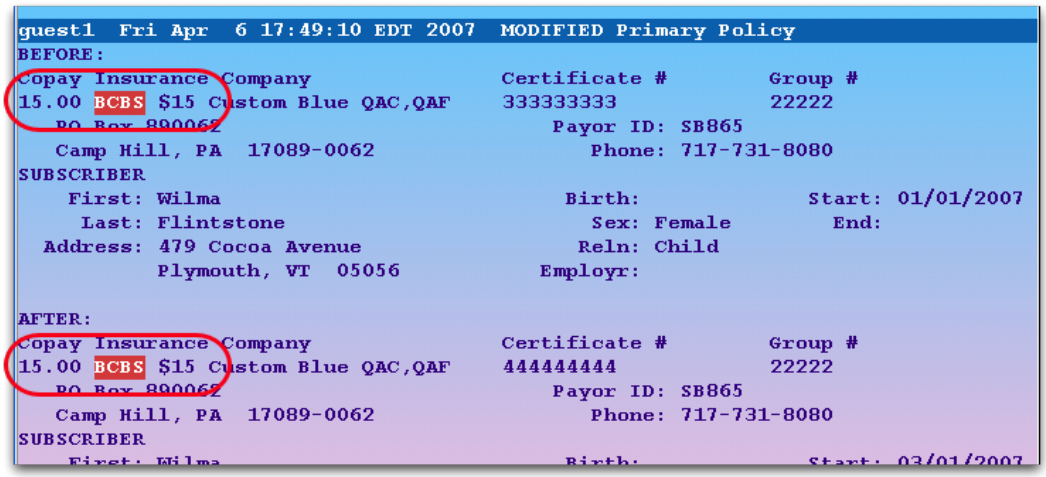
**Modified or Expired?** Policy expiration is shown in **policylog** with a "MODIFIED" header. When you expire a policy, **policylog** records that as a modification.

### Searching the Log of Insurance Policy Changes

If a patient's insurance record has been changed several times, it can be difficult to find specific information. Press [**F8** -- *Search Pattern*] to perform a search.




After typing a search term, press **Enter**. The results of your search will be highlighted and the screen will automatically scroll to the first search result.




Press [**F7** -- *Search For Next*] to jump to the next result.

**Conclusion**

By researching a patient's **policylog** record, you can recover lost insurance information, discover insurance updating problems at your practice, and improve communication in your office. Contact PCC Support at (800)-722-1082 or <`support@pcc.com`> if you have any questions.

# 3.6. Merge Duplicate Patients and Accounts

If your office has created duplicate patients or family accounts, you may need to merge them. Merging two patients combines data and saves a single set of basic demographic information. Merging two accounts combines the account billing and charge data so that it appears all of it occurred under one account.

Do *not* merge accounts if a family has remarried or divorced or made other status changes. Instead, use the features in **notjane** to reassign guarantor and custodian information appropriately. Keep the old account in place, as it probably includes account and patient-related history that should exist on its own.

**Proceed With Caution:** Combining two patients or two accounts is a permanent action. Partner keeps a background log of merge activity, but recreating separate account histories later is very difficult. Only combine patients and accounts when you are certain that they were created in error.

**Merging PCC EHR Chart Data?** When you merge patients in Partner 4.7 (released in January of 2011),

the corresponding medical records will also merge in PCC EHR. If your office uses PCC EHR, exercise extreme caution when merging patients. Recreating individual medical records is very difficult and time-consuming.

### 3.6.1 Merge Two Patient Records Using "Movekid"

Follow the procedure below to combine two duplicate patient accounts.

**Step 1: Move Both Patients to the Same Family Account**

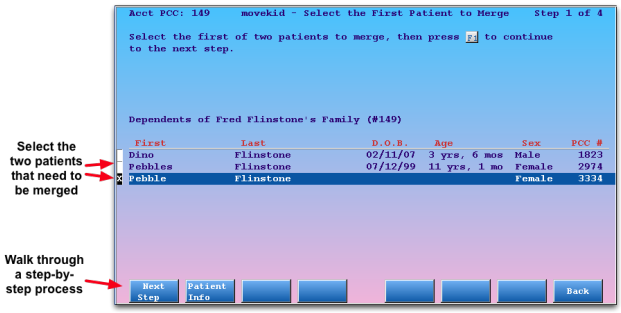
Run the Patient Editor (**notjane**) and use the [**F4** - *Reassign Account*] tool to move the duplicate patients so they are both on the same account, if they are not already.

**Step 2: Run Combine Two Patients (movekid)**

You can find **movekid** in the Account/Patient Tools window, or you can type **movekid** at a command prompt.

**Step 3: Follow the Onscreen Instructions**

The **movekid** program will help you find an account (by either patient or account name), choose two dependents to combine, select which demographic data to keep, and then confirm and finalize the merge.




While you work, you will see options for reviewing the patient records and for printing out a record of the merge before finishing.

### 3.6.2 Merge Two Family Accounts, Combining Billing Histories

Follow the procedure below to combine two family accounts. Be aware that merging accounts will irrevocably combine all billing history.

**Step 1: Run Combine Two Accounts (moveacct)**

You can find **moveacct** in the Account/Patient Tools window, or you can type **moveacct** at a command prompt.

**Step 2: Find the Two Accounts You Wish to Merge**

Starting with the account that your office created in error, find both accounts using the standard find routines.

**Step 3: Confirm and Finalize the Merge**

Partner will ask you one last time whether or not you wish to proceed with the account merge. Answer Y or N to finish.

# 4. Scheduling in Partner

Your provider's time is one of the most important resources of your office. Managing that time is vital. Partner's scheduling module is called **sam**, which is short for "**S**cheduling and **A**ppointment **M**inder." The **sam** program is a patient scheduling system that finds the best appointment time for your patients while helping to ensure your provider's time is used well.

Here are just some of the key features of **sam**:

- Automatically finds the best open appointment times based on your criteria
- Provides quick access to all open time slots
- Allows convenient patient scheduling by multiple people simultaneously
- Offers appointment openings based on your providers' individual needs and preferences
- Manages dozens of providers easily
- Searches through multiple providers' schedules at once using provider groups
- Can find concurrent or adjacent appointment times for siblings or schedule a single patient with both a provider and an assistant at the same time
- Synchronizes scheduling information with the patient record or your EMR
- Coordinates schedule information with the rest of Partner to produce visit and/or provider specific encounter forms, handouts, and charge-posting screens.
- Reserves sick time and other types of "blocks" throughout your schedule

If your office does not use **sam**, contact PCC. We will assist you in configuring the scheduler to match your needs and provide unlimited training for your staff.

## 4.1. Quickstart: Schedule a Patient

The Partner scheduler has lots of features and tools, but you can learn to schedule appointments in just five minutes. Here are the steps:

**Step 1: Run sam**

You can run **sam** from within several programs, such as Patient Checkin (**checkin**). You can also run **sam** directly by selecting the Patient Scheduler option from your Daily Operations window (shown below) or by typing **sam** at a UNIX prompt.

```
Daily Operations

 Checkin Patient                    (checkin)
 Edit Accounts                      (fame)
 Edit Patients                      (notjane)
 Generate Encounter Forms           (encount)
-Patient Scheduler                  (sam)
 Enter/Review Phone Encounters      (pen)
 Post Charges                       (chuck)
 Post Regular Payments              (pam)
 Print Encounter Forms              (prenc)
 Proving Out
```

## Step 2: Find a Patient

If you have not carried over a patient from another program, the next step is to find a patient. Follow the instructions on your screen. Finding a patient in **sam** is identical to finding a patient in any other program.

```
Please enter a patient:

First Name:
 Last Name:
```

## Step 3: Optional: Review Demographics, Other Tools

Once you have found your patient, the screen will show you patient information and allow you to enter the type of appointment you wish to schedule.

```
Enter visit criteria here
View patient and family information here
Jump to other functions, add patients, etc.

Page Up | F12 | Page Down

SAM Search Criteria
Name                Visit Reason                Provider    Mins   L
X Johnny Doe                                  C                    O

Time Frame:

PATIENT: Johnny Doe        PAT STATUS: Needs Extra Time   LAST PHYS: 09/25/00
    DOB: 02/02/2002        CUST STATUS: Budget            NEXT APPT: 12/13/04
    AGE: 2 yrs, 7 mos      GUAR STATUS: Budget                Physical

CUST: John Doe                          GUAR: John Doe
      1 Main St.                              1 Main St.
      Suite 7                                 Suite 7
      Winooski, VT  05404                     Winooski, VT  05404
H: 802-555-9228   PERS BAL: $ 135.00     H: 802-555-8177  PERS BAL: $ 135.00
W: 802-555-7344    INS BAL: $ 682.00     W: 800-555-7708   INS BAL: $ 682.00

PRI: BCBS/BOX 9196 $10          CERT: 008559499          GRP: PCC1151
SEC:                            CERT:                    GRP:

  Suffix #: 01252684305            Medicaid #:
  Alt Name: Rubble                    Chart #: 4585

MISS: 2 (07/13/04, Johnny, Sick Call)   CANC: 0

Schedule | Inquire | Find | | Next Relation | Demo-graphics | | Clear
```

Notice that from this screen you can press [**F2** - *inquire*] to view or cancel the patient's current and previous appointments. You can also add a relative using [**F5** -- *Next Relation*], or jump to the **checkin** screen to perform other functions by pressing [**F6** -- *Demographics*].

### Step 4: Enter Appointment Information

At the top of the screen, enter the visit reason, provider, location and time frame for the appointment. You can move among the fields by hitting the **ENTER** key or the **TAB** key.

Here are some helpful tips:

- An example visit reason for an appointment today might be a "sick" visit. Your office has its own list of visit reasons; use an asterisk (*) to select from that list.
- The initial of each patient's primary care physician (PCP) appears next to the provider box. If the patient is not assigned a PCP, you will see a dash (-).
- For the Time Frame, enter the time you would like to start looking for an appointment opening. You can enter a time ("10:00am" or "2pm") or a date ("10/25/04" or "Oct 25"). The Time Frame field also understands days of the week, names of months, and many other things that a person needing an appointment is likely to say: "Mondays," "afternoon," "in 1 month," and "ASAP" are all time frames.
- If you leave the Time Frame boxes blank, **sam** will look for the first available time in the next four days that the selected provider has available time.
- If you are trying to schedule an appointment for today, just use the word "today" or "sick" as your time frame. **sam** will find you available times for today only.

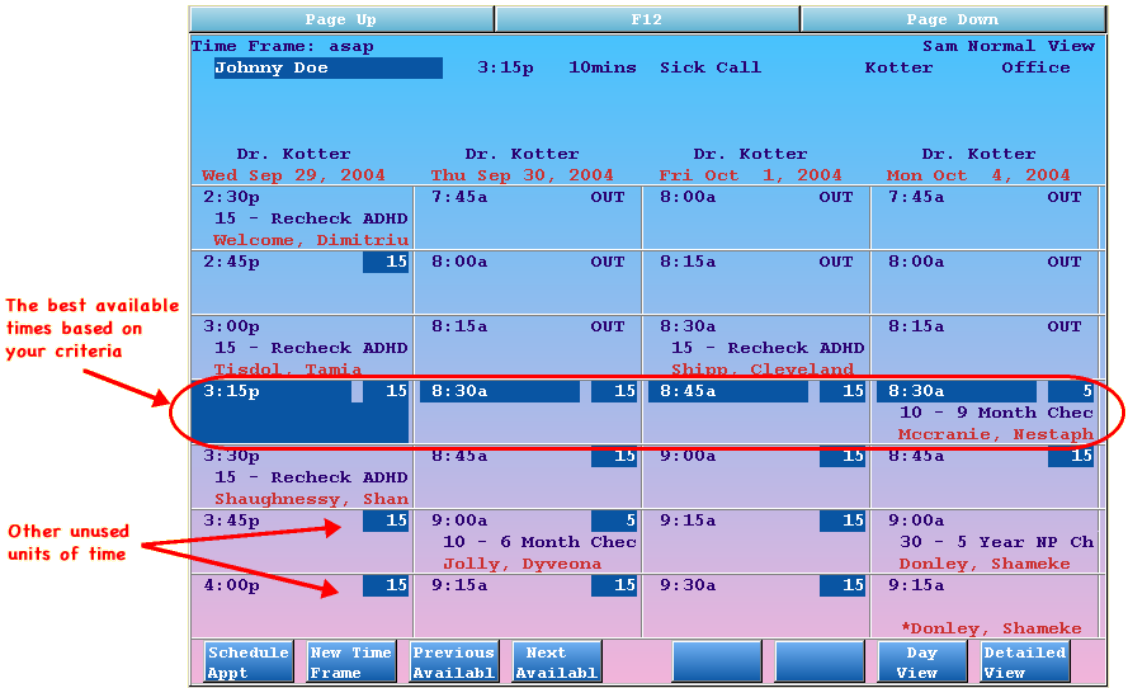
### Step 5: Press [F1 -- *Schedule*]

When you hit **F1**, the computer will take the information you have entered and find the best available times.

### Step 6: Choose the Best Time for the Patient

On the resulting page, you will see a calendar grid showing dates and times based on the information you entered. The best matches for the criteria you entered are in the middle row, which is highlighted. The earliest date and time available are highlighted for you, in the middle of the left-most column, ready to be confirmed.

In the example below, 3:15pm on September 16th with Dr. Kotter is selected. Press [**F1** -- *Schedule Appt*] to start confirming the selected time.

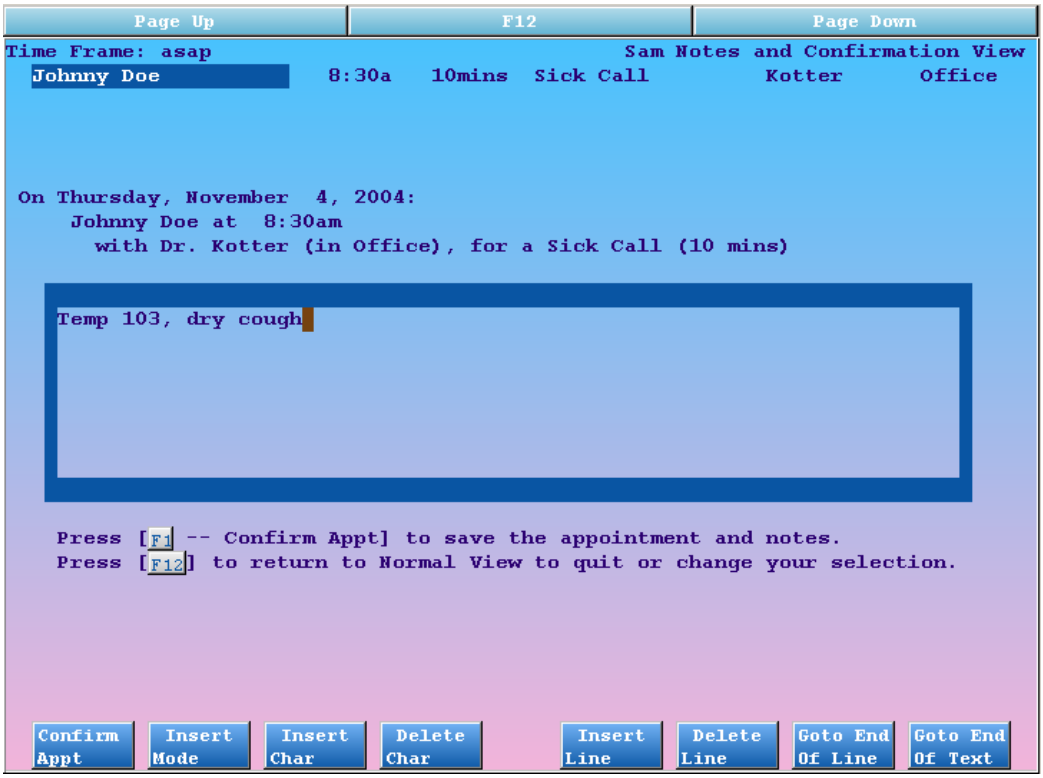



If the patient wants a different time than the one selected automatically, use the right and left arrow keys to move among the columns. The middle row shows you at least four available times, and if you arrow off the screen to the right your view will shift to show you the next available date. You can jump down to the next available appointment within each column by pressing [**F4** -- *Next Available*].

**No Times Available?** If a clinician is fully booked or has no room for the appointment you wish to schedule, you can use the Day View or Detailed View to review the schedule and force in an appointment, or you can press [**F2** -- *New Time Frame*] to return to the SAM Search Criteria screen and use a different time frame.

## Step 7: Confirm the Appointment

Once you have chosen an appointment slot by selecting its box, press [**F1** -- *Schedule Appt*] to start the confirmation process. If you choose the wrong time by mistake, you can still press **F12** to return to the previous screen.




On the confirmation screen, you will see complete appointment information so you can confirm it with the patient a final time. Follow the instructions on the screen to add notes about the visit, and then press [**F1** -- *Confirm Appt*] to finalize the appointment.

**Note:** Until you press [**F1** -- *Confirm Appt*], the appointment is not made. If you press [**F12**], you will be returned to the Normal View to make a different selection.

**Step 8: There is No Step Eight**

You have made the appointment. If the appointment is scheduled for today, an encounter form will print out immediately.

What do you want to do next? You can enter a new patient name and continue scheduling. If you want to check your work on the visit you just made, you can press [**F2** -- *Use Last Patient*] and then press [**F2** -- *Inquire*]. Finally, you can quit **sam** by pressing [**F12**].

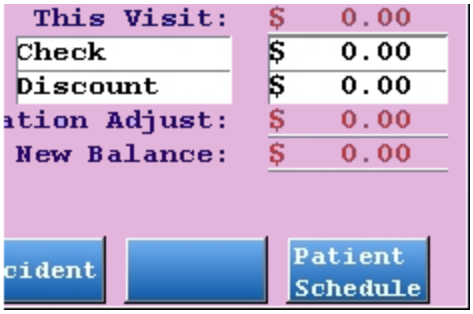
# 4.2. Advanced Scheduling with sam

The topics in this section explain each scheduling step and each **sam** screen in detail. Read these sections to learn about each step in more detail and review the advanced features to help you quickly find the right appointment for every patient.

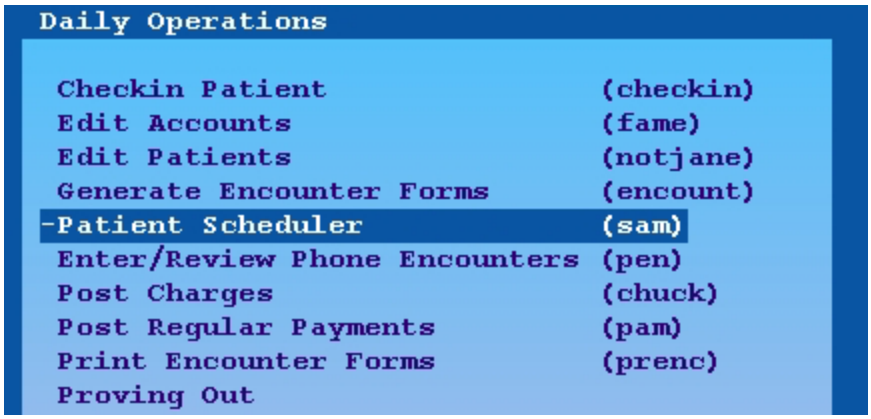
## 4.2.1 Starting sam and Finding Patients

You can launch the scheduler from several other Partner programs. For example, if your staff uses **pen** (Phone Encounter Notes) to handle triage calls, you can schedule directly from that program. If your front desk needs to schedule a follow-up visit while checking out a patient, they can press [**F8** -- *Patient Schedule*] while posting charges in **checkout** and jump into the scheduler. In fact, the programs **checkin**, **pen**, **checkout**, **tickle**, and the

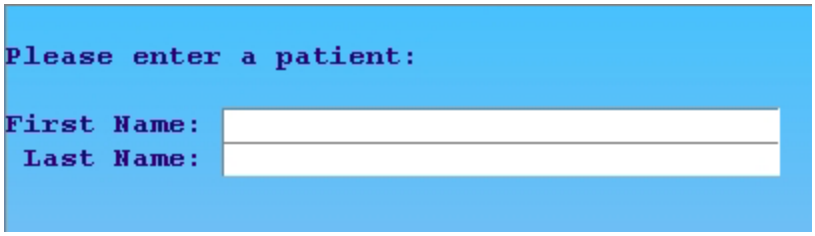
**lab** module all have a link to **sam**. If you use those tools, you will benefit from a direct link to the scheduler. Look for keys like this:



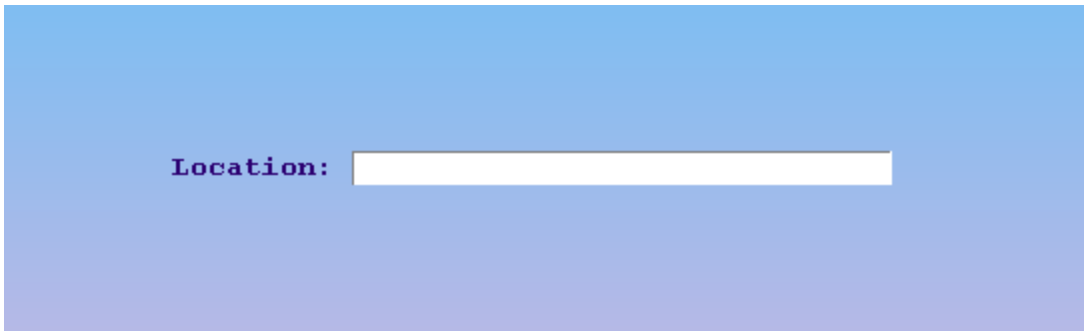

**sam** is also a stand-alone program. You can run it from the "Patient Scheduler" option in your Daily Operations window, or by typing **sam** from a UNIX prompt. The **inquire** program, used to review or edit patient appointment histories, can also be run independently.




If you are not already working with a patient, you will be asked to select one when you first run **sam**. You can find patients by name as well as by birthday or any of several other criteria. For more information, visit http://learn.pcc.com .



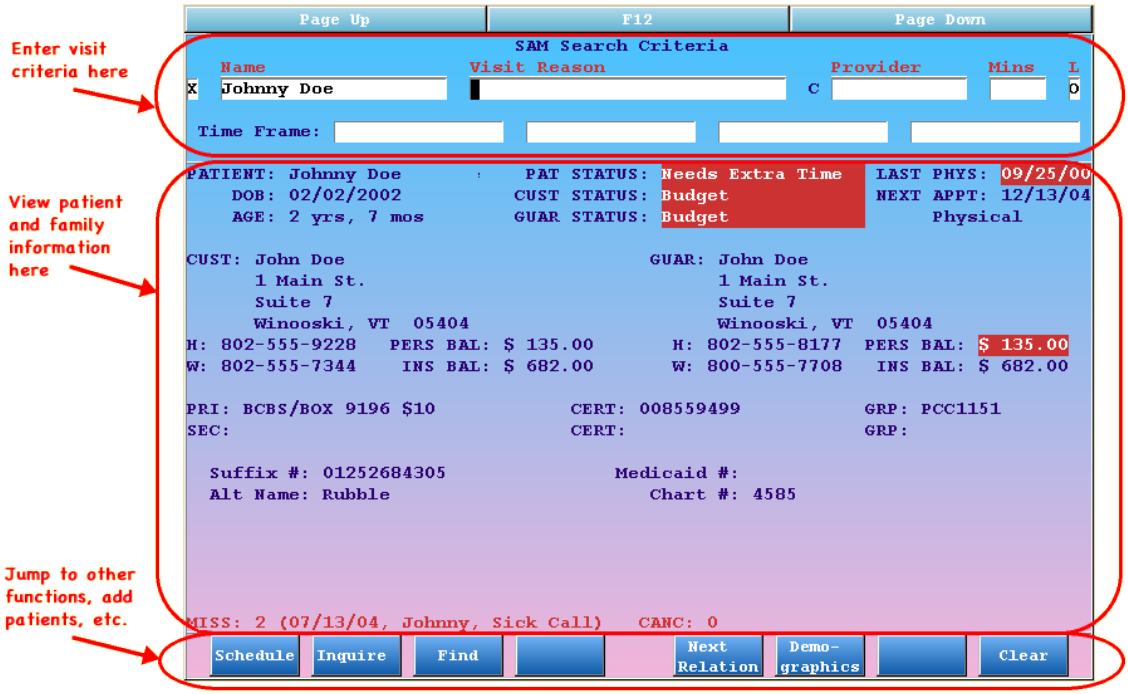

**More than One Office?** If you schedule appointments for more than one office or physical location, **sam** will ask you for which office you wish to schedule:



Once you have selected a scheduling office, **sam** will select it for you by default each time you run the scheduler. You can change the default by selecting a different location and you can override your default location at any time by changing the location field on the Search Criteria screen.

### 4.2.2 The SAM Search Criteria Screen

Once you have found the desired patient, you will see the SAM Search Criteria screen shown below. From here you can review information about the patient, add more patients and relatives for scheduling, jump to several other Partner programs, or enter visit criteria to schedule a new appointment.




The patient information in the middle of this screen can be very helpful. If the patient has been dismissed or transferred, for example, you will see a flag indicating that in one or more of the "STATUS" lines at the top. You can also confirm address, phone, and insurance information on this screen and use [**F6** -- *Demographics*] to correct any problems. Best of all, this screen is customizable. If your office needs to add or remove certain information, contact PCC for help editing this screen.

**Note:** Before scheduling, check out the "LAST PHYS" and "NEXT APPT" fields in the upper right hand corner. Many insurance companies will not pay for more than one physical a year, and another family member may have already scheduled this patient's appointment. The "NEXT APPT" field will show you this patient's first upcoming appointment *after* today.

#### Entering Visit Criteria

The Criteria screen contains patient information and scheduling tools, but the primary purpose is scheduling appointments. After reviewing the information on the screen, you continue scheduling by filling out the information at the top of the screen. The top row of fields are: Visit Reason, Provider, Minutes, and Location.

As you enter information, press **ENTER** to move from field to field. You can also use the **TAB** key. **TAB** moves the cursor through every field; **ENTER** only selects the most important fields: Visit Reason, Provider, and Time Frame. To go back one field, press **BACKSPACE** or use the left arrow key.

| | Name | Visit Reason | | Provider | Mins | L |
|---|---|---|---|---|---|---|
| X | Johnny Doe | | - | | | O |

**Default Values:** The criteria fields can have default values. If your office has only one provider, or almost always performs the same visit reason, ask PCC Support about configuring a default value. Partner can also automatically enter the patient's Primary Care Physician, instead. In either case, Partner can automatically enter the provider's preferred visit length (in minutes) for the Visit Reason.

**Status Flags Can Block Scheduling:** Some patient and account flags can restrict your ability to schedule. If the patient has the "Deceased" flag, for example, that flag will appear in the Visit Reason field and you will be unable to proceed. Contact PCC Support for help configuring the "Prevent Scheduling" feature for certain status flags.

SAM Search Criteria

| | Name | Visit Reason | | Provider | Mins | L |
|---|---|---|---|---|---|---|
| X | Sample Patient | Deceased | C | | | M |

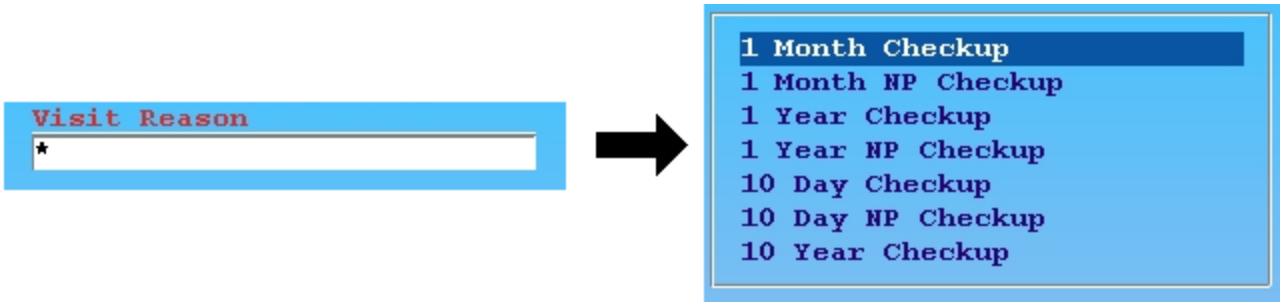
Time Frame: asap

| | | | | | |
|---|---|---|---|---|---|
| PATIENT: | Sample Patient | PAT STATUS: | Deceased | LAST PHYS: | 03/28/02 |
| DOB: | 02/12/2002 | CUST STATUS: | | NEXT APPT: | |
| AGE: | 4 years | GUAR STATUS: | | | |

**Visit Reasons**

Is the patient coming in for a standard sick visit or a physical? Does your office schedule flu shot visits and ADD consultations? Partner contains a predefined list of visit reasons that can be entered into this box. Your office has its own list which can be configured to your particular scheduling needs in **ted**, the Table Editor.

Do you want to see a list of visit reasons defined on your system? Enter an asterisk (*) and press **ENTER**. To learn more about defining different visit reasons for your office, read the Sam Configuration section of the Partner Manual or contact PCC support.




Remember to abbreviate. Instead of typing out **Sick Call** for a sick visit, just type **s** and press enter. The screen will show you what your abbreviation stood for, so do not worry if you make a bad guess and use an improper abbreviation. Abbreviations are customizable and can be changed for your office.

**Providers or Provider Groups, Minutes**

Just as Partner knows your office's visit reasons, it also knows your providers. You can see a list by entering an asterisk (*) and selecting the provider desired. You may notice a letter next to the Provider field. That letter is an

initial indicating the patient's primary care provider as stored in the Patient Editor (**notjane**) and **checkin** programs.

Groups? In addition to using a provider's name, your office may use provider groups for scheduling. For example, you may enter "any" to find open times for any available provider. PCC support can create any provider group you would find useful for scheduling. Many large practices have "male" and "female" groups for use when the patient wants an appointment with any male or female provider.

**PCP or Other Default:**PCC Support can configure the Scheduler to automatically enter a default provider or the patient's Primary Care Physician (if record in the Patient Editor).

**Minutes**: Each provider may have a default visit length for each visit reason. If Dr. Smith needs ten minutes for a sick visit, Partner can be configured so the Minutes field will automatically display that time without you having to type it. If you press **ENTER** from the provider field, **sam** will skip the Minutes field entirely. Some offices leave the length of consultations or other visit types unspecified. For those visits you can press **TAB** and enter a time in the "Minutes" field. You might also do this in order to extend a sick or recheck visit for a patient who needs extra time (indicated with a status flag).

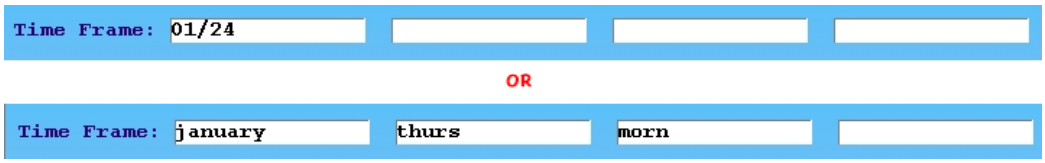
#### Location

The "Location" field shows an abbreviation for the office in which you are scheduling. It can be changed if you are making an appointment in a different location. You can skip this field by using the **ENTER** key to move among the fields. As with the visit reasons and the providers, you can see a list of scheduling locations by using the asterisk (*) key.

### Time Frames

After entering other appointment criteria, **sam** users enter a date or one or more time frames to indicate when an appointment should take place.

Time frames help a busy scheduler find the best available appointment.




A time frame can be nearly anything a caller says to you on the phone: a date, a day of the week, a month, a range of dates or times, or even a few everyday phrases. You can combine up to four time frames and use abbreviations. If someone asks you for Thursday afternoons in December, just enter "thurs", "aftn" and "dec" to view appropriate openings.

**Optional:** Time frames are optional. If you leave the Time Frame fields empty, **sam** will offer you the first available time slot on the next four days the provider has free time.

**Time Frames vs. A Scheduling "Book":** With traditional scheduling, if a family had Mondays off work and needed a 1 month recheck, you would have to flip through from Monday to Monday. Using sam's time frames, however, you can enter "Mondays" and "in 1 month" and find all available times that match the patient and

family's needs. **sam** will show you the first available time on each Monday starting one month from now. You can then confirm one of those times or scroll to more matching offerings with the touch of a key.

You will need to practice using time frames for a while before you become an expert. Until you learn all the tricks, remember that you can always just enter the date and/or time that the caller desires. You can also leave the question blank and **sam** will offer you the earliest available times.

#### Different Kinds of Time Frames

Many different words and phrases work as time frames. Below are the basic elements of different time frames you might use, along with some examples. Notice that the examples include both the full text as well as some of the abbreviations that are allowed.

| Basic Element | Possible Time Frames |
|---|---|
| Dates | 01/16/2004, 01/16, Jan 16 |
| Days | monday, mondays, mon, tues, wed, mo, tu, we, ... |
| Times | 10:30am, 1:00pm, 1pm, ... |
| Months | january, jan, feb, mar, apr, ja, fe, ap, ... |
| Ranges | wed-thu, 10/01-10/15, 3pm-6pm |
| How Far Out | in two weeks, 2wks, in 1 month, 1m |
| Time of Day | morning, morn, evening, eve, afterschool, afts, afternoon, aftn |
| Not... | not monday, not tuesday, not mo, not tu |
| Before... | Before 10/01/06, not before 09/01/06, before june |
| Everyday Phrases | asap, sick, today |
| Multiple Patient Indicator | concurrent, serial |

As illustrated above, the Time Frame fields accept two and three letter abbreviations for days and months. The exceptions include march, may, june, and july, which all need at least three letters.

##### Sick, "Today", and asap

The abbreviations "asap" and "sick" are not standard time frames.

The "asap" time frame looks for the first available time over the next several days. The "sick" time frame (which can also be typed as "today" or "t") concentrates on times for today only.

Use the "sick" time frame to see one column, with times for today only. This can be very helpful if you handle a lot of triage phone calls and do not wish to see any day except for today. If you use the "any" group as your provider, the sick time frame will show you one column for every provider who has available time today.

##### Multiple Patient Indicator

Another special time frame is the multiple patient indicator. If you are scheduling for more than one patient or scheduling the same patient for multiple visits or multiple providers, you can use one of these two time frames. You either want the visits to be "concurrent" (scheduled at the same time with different providers) or "serial" (scheduled back-to-back). The default behavior is "serial." For more information, read the Scheduling Multiple Patients topic.

#### Time Frames in Action

Now that you have seen the basic elements, some more examples will help you see how time frames can be entered. Below are some examples of appointment requests you might receive and what time frame to use. Remember that you can always just enter a date if the caller gives you a date. The tricks below might help you to find more appropriate openings more quickly.

**Common Requests and Possible Time Frames**

| If the caller asks for: | Use the time frame(s) of: | | |
|---|---|---|---|
| A sick/office visit for today | sick OR t | | |
| As soon as possible | asap | | |
| September 15th or after | 09/15 | | |
| 1 month from now | 1 mo | | |
| A recheck 2 weeks from today | 2wks | | |
| Any Monday afternoon | Mon | Aftn | |
| Any time between 10 and 2 | 10am-2pm | | |
| In the morning on Oct 20th | morn | 10/20 | |
| Any Thursday afternoon in July | thur | july | afternoon |
| Either Monday or Tuesday afterschool | mon, tues | afts | |
| At 2pm, but not Tuesday or Thursday | 2 | not tue, thur | |
| Any Monday afternoon before June 10th | mo | aftn | before 06/10/06 |

As you can see, you can combine time frames to focus in on what the patient needs. Using time frames is a skill that grows with practice, so you may want to review the elements above once you have used **sam** for a few weeks. Even if you only use dates, days of the week and asap, you will still find available time slots much faster than by searching through the entire schedule.

After you have entered a visit reason, provider, time, location and time frame(s), press [**F1** -- *Schedule*] to browse available times.

#### Overbooking and Jumping to a Specific Date

The **sam** program is designed to first show you all open, available slots. There is no time frame that will show you a day that is booked solid. Depending on how you enter time frames, searching for a date and provider where there is not enough time will either result in the next day or show no available appointments.

How can you overbook? You can review a full day and overbook a provider by using the Detail or Day View screens.

### Function Keys on the Criteria Screen

You can perform a wide range of Partner functions from the opening screen in **sam**:

[**F1** -- *Schedule*]

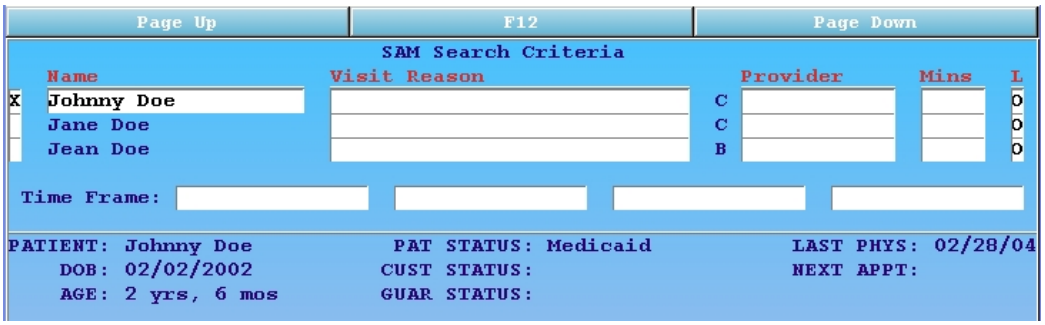
Press **F1** to continue the scheduling process using the information you entered at the top of the screen. See the Enter Visit Criteria articles for more information on completing the Visit Reason, Provider, Minutes, Location, and Time Frame fields.

[**F2** -- *Inquire*]

Press **F2** to run the **inquire** program. In **inquire** you can view complete visit information on a patient's future and previous appointments. You can delete, cancel, or mark these appointments as missed. You can change the notes for an appointment and reprint the encounter form. For more information, read the **inquire** article.

[**F3** -- *Find*]

Press **F3** to find more patients. You can then view and schedule more than one patient simultaneously. After you find them, they will be listed at the top of this screen. As you select each one using the arrow keys, the demographic information will change to show information for each patient. You can enter appointment criteria and schedule for each patient or you can clear unneeded patients from the screen by selecting them and pressing [**F8** -- *Clear*].




See the Scheduling Multiple Patients topic for more information. In addition to scheduling several different patients, you can schedule the same patient for a simultaneous visit with two or more providers or a provider and an assistant.

[**F4** -- *Customizable Function Key*]

Press **F4** to perform a custom action. If your office frequently adds a **pen** note, views a scheduling report, or performs some other common Partner function while scheduling, you can assign that function to the **F4** key on the Search Criteria screen. Contact PCC support (`<support@pcc.com>` or 1-800-722-1082) to set up a custom action for the **F4** key.

[**F5** -- *Next Relation*]

Press **F5** to add a relation of the current patient. A relation is any patient who shares a custodian with the current patient. This is particularly useful when scheduling siblings. When you press **F5**, **sam** will show you a list of all the patients related to the currently selected patient. Select the ones you wish to work with and press [**F1** -- *Process*]. See the Scheduling Multiple Patients section below for more information.

[**F6** -- *Demographics*]

Press **F6** to run the **checkin** program. This is a very important tool, as **checkin** contains links to most

other Partner programs. Do you need to look up the patient's immunization record before scheduling? Jump to **checkin** and then press [**F2** -- *Edit Patient*] to run the Patient Editor (**notjane**). From **checkin** you can also review outstanding balances, update insurance information, or even post payments.

[**F7** -- *Customizable Function Key*]

Press **F7** to perform a custom action. If your office frequently adds a **pen** note, views a scheduling report, or performs some other common Partner function while scheduling, you can assign that function to the **F7** key on the Search Criteria screen. Contact PCC support (<support@pcc.com> or 1-800-722-1082) to set up a custom action for the **F7** key.

[**F8** -- *Clear*]

Press **F8** to remove the currently selected patient from your list. If you only have one patient listed at the top of the screen, press **F8** to search and schedule for a new patient. If you have used the *Find* or *Next Relation* keys to add additional patients to the top of the screen, you can use **F8** to remove them from the list before scheduling.

**Jumping Back to the Criteria Screen**

After filling out the visit criteria and pressing [**F1** -- *Schedule*], you will have access to the three **sam** scheduling screens and can pick the best available date and time for the appointment. If you need to jump back to the Search Criteria screen and make a change to one of the items described above, you have several options.

[**F2** -- *New Time Frame*]

Press **F2** to jump back to the Search Criteria screen and put the cursor into the first Time Frame field.

**V**

Press **V** to return to the Search Criteria screen and put the cursor into the Visit Reason field.

**P**

Press **P** to return to the Search Criteria screen and put the cursor into the Provider field.

**L**

Press **L** to return to the Search Criteria screen and put the cursor into the Location field.

**M**

Press **M** to return to the Search Criteria screen and put the cursor into the Minute field.

**T**

Press **T** to return to the Search Criteria screen and put the cursor into the Time Frame field.

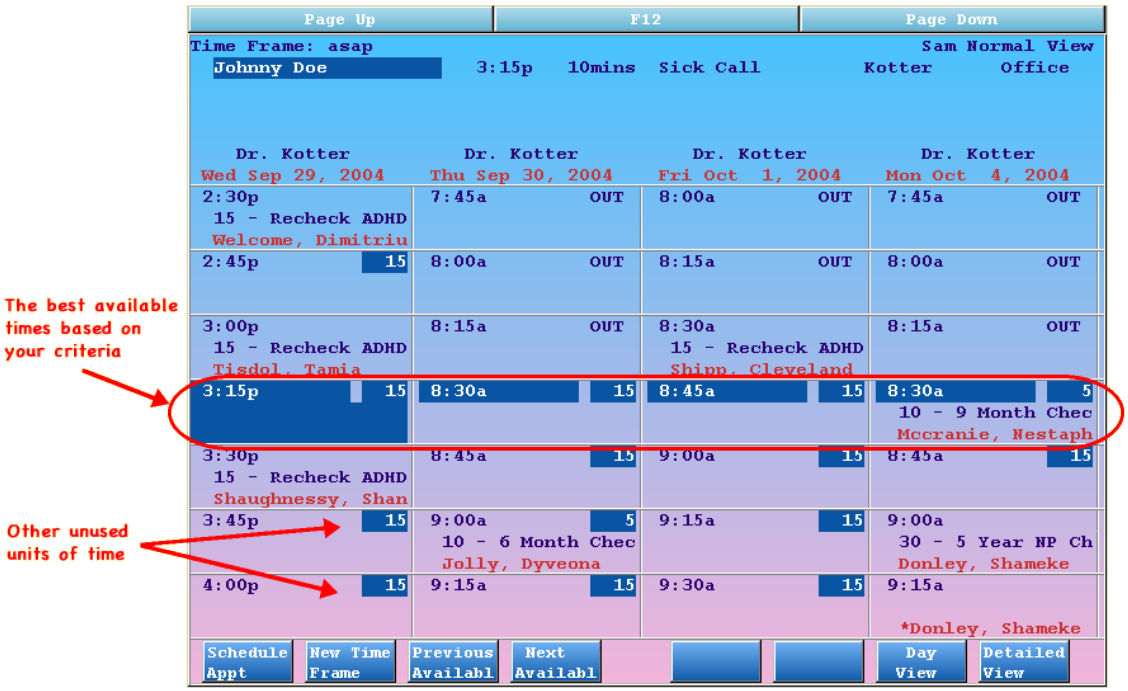
**F12**

Press **F12** to return to the Search Criteria screen and put the cursor into the first (Visit Reason) field.

The above hot-keys will help you quickly change visit criteria while scheduling a patient.

## 4.2.3 The Sam Normal View: Choose From Available Appointment Times

The Normal View in the Scheduler offers available times based on the criteria you entered on the Search Criteria screen. The earliest and best matches for the criteria you entered will be in the middle row, and the first available match is highlighted, ready to be confirmed.




Other available times are listed in the same row across the middle of your screen. You can also view other available times and move around the calendar to find the best time for the patient.

### Reading the Normal View

The Normal View screen is divided into a grid of columns and rows.

#### Columns

Each column provides details about a different day. The information at the top of the column tells you what day and provider the column displays.

The dates may be consecutive, but **sam** will not waste space showing a date for which there is no available time or that does not meet your search criteria. If a provider only works on Wednesday and Thursday, you will only see columns for Wednesdays and Thursdays. If you enter "Monday" as a time frame, **sam** will offer the next several Mondays with available time. If you enter "sick" as a time frame, you will only see one column for each provider in your criteria who has available time *today*.

#### Cells, or Units of Time

The columns are split into units of time during the day. In the screen above, each rectangle represents a fifteen minute unit of time. Your office might work with a ten or five minute schedule instead, and a few offices have used a thirty minute unit.

The currently selected unit is highlighted. Press [**F1** -- *Schedule Appt*], to start confirming that appointment. The currently selected appointment is also shown at the top of the screen.

Here are three units from a Normal View screen:

In the example above, for the day and provider selected, you can see that the 8:45am time slot is wide open, but a five minute allergy recheck partially fills up the 9:00am time. Since the visit being scheduled is only ten minutes long, it can still be scheduled to start at 9:00am.

In each slot you can also see basic information about existing visits. For example, the patient Jnaya Payne is scheduled for an allergy recheck at 9:00am. The 9:15am unit has a "+2" next to the time, indicating that two visits are scheduled in that time. You can use **F8** to go to the Detailed View (see below) if you want to see more details about those two visits.

**No Times Available?** If a clinician is fully booked or has no room for the appointment you wish to schedule, the day will not be offered on the **sam** Normal View. You may see a warning message that "There are no available times for your chosen criteria." You can use the Day View or Detailed View to review the schedule and force in an appointment, or you can return to the SAM Search Criteria screen and use a different time frame.

## Actions On the Normal View

### Find and Schedule the Best Time

The **sam** scheduler automatically selects the first and best match for you. However, you can use the arrow keys or function keys to choose a different time, date, or provider.

Use the right and left arrow keys to move across the middle row.

Press [**F4** -- *Next Available*] to ask **sam** to find the next best times according to your criteria. The middle row will shift to show the next open time in each column. You can use the **F4** and [**F3** -- *Prev Available*] keys to cycle through all the available times in the days shown.

### Review More of the Schedule

You can arrow off the screen and the screen will shift in that direction. Whenever you see a highlighted number of minutes in the upper right hand corner of a rectangle, there is open time available.

No matter how far you scroll off the screen to the right, **sam** will continue to only offer times based on the criteria you entered. If you decide to schedule based on a different time frame (or provider, visit reason, etc.), you should press [**F2** -- *New Time Frame*] to make changes to your criteria.

**Jump to a More Detail, Remove Blocks, Double-Book**

Press [F7 -- Day View] or [F8 -- Day View] to learn more about the selected day's schedule, remove blocks, or double-book.

### Function Keys on the Normal View

[**F1** -- *Schedule Appt*]

Press **F1** to schedule the currently selected appointment. You will be shown a confirmation screen where you can add notes and save the appointment by pressing **F1** again. On the confirmation screen, you have a chance to return to this screen by pressing **F12**. If you attempt to confirm an appointment at an unavailable time, you will be shown a conflict screen with a link to the Detailed View.

[**F2** -- *New Time Frame*]

Press **F2** to return to the SAM Search Criteria screen. If you need to change the patient, the visit reason, the provider, or the time frame for the visit, press **F2** and make your changes.

[**F3** -- *Previous Available*]

Press **F3** to see earlier available times in each column. **F3** scrolls all of the columns down so that the middle row shows the previous appointment openings. Keep in mind that **sam** will only offer open times that match your time frame, it will skip over times that are filled or that don't match your criteria. **F3**, along with **F4**, allows you to cycle through the available openings for the day you are viewing based on the criteria you entered.

[**F4** -- *Next Available*]

Press **F4** to see the next available times in each column. **F4** scrolls all of the columns up so the middle row shows the next available openings. Keep in mind that **sam** will only offer open times that match your time frame, it will skip over times that are filled or that don't match your criteria. **F4**, along with **F3**, allows you to cycle through the available openings for each day you are viewing based on the criteria you entered.

**Note:** If you are scheduling for a provider group, such as "any" or "male", the Normal View will shift to show you the next four openings for any provider in that group when you press **F3** or **F4**. That may mean that the columns no longer show the same providers, but instead will show the next possible available provider in the provider group you used. If you would rather scroll through available appointments with the providers "frozen" in the column they started in, use **Page Up** and **Page Down** instead of **F3** and **F4**. No matter which method you use to view next appointments, you can arrow off the screen to the right to see additional available doctors if any are available.

[**F5** -- *Select This Day/Deselect*]

Press **F5** to view all available doctors for the selected day. If you are scheduling for a provider group and are looking at a range of dates, you will see the first available provider for each date. You may want to

find out if alternate providers are available. Use the arrow keys to select the column of that day and press **F5**. The Normal View will show you a single column for every provider who is available on the date you selected. Press **F5** again to return you to the standard calendar view. Using the "sick" or "today" time frame is similar to selecting a day with **F5**.

[**F6** -- *Select This Prov/Deselect*]

Press **F6** to see more openings for the provider of the currently selected column. If you entered a provider group (such as "any") when specifying the provider, you may want to switch to a single provider while scheduling. Choose a column that shows that provider and press **F6**. The Normal View will show only that provider's schedule. You can press **F6** again to return to viewing open times for the provider group you originally entered.

[**F7** -- *Day View*]

Press **F7** to view the Day View screen. The Day View allows you to force in an appointment for any desired time and date. You can also review the current schedule for all providers. The Day View shows statistics on how busy each provider is for a given date. You can find out who the least busy provider is, switch to that provider and location, and continue scheduling. You can also force in an appointment for any desired time and date.

[**F8** -- *Detailed View*]

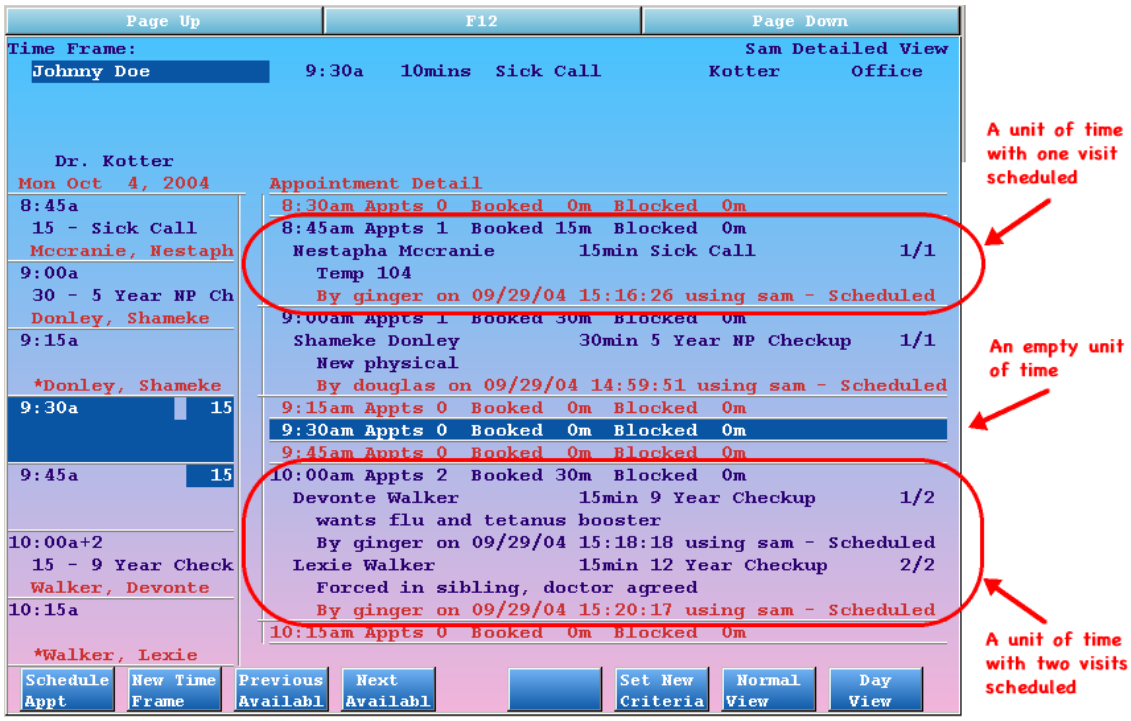
Press **F8** to view the Detailed View screen. The Detailed View offers more information about each time slot, including complete visit information and a tally of how each unit of time is used. You can also remove blocks and schedule directly from the Detailed View.

### 4.2.4 The Sam Detailed View: Review Appointment Details, Remove Blocks

Who booked an appointment on your screen? Why is a unit of time double or triple-booked? The Normal View only shows basic information about each unit of time. Use the Detailed View to review a busy schedule, as well as double-book or remove blocks.

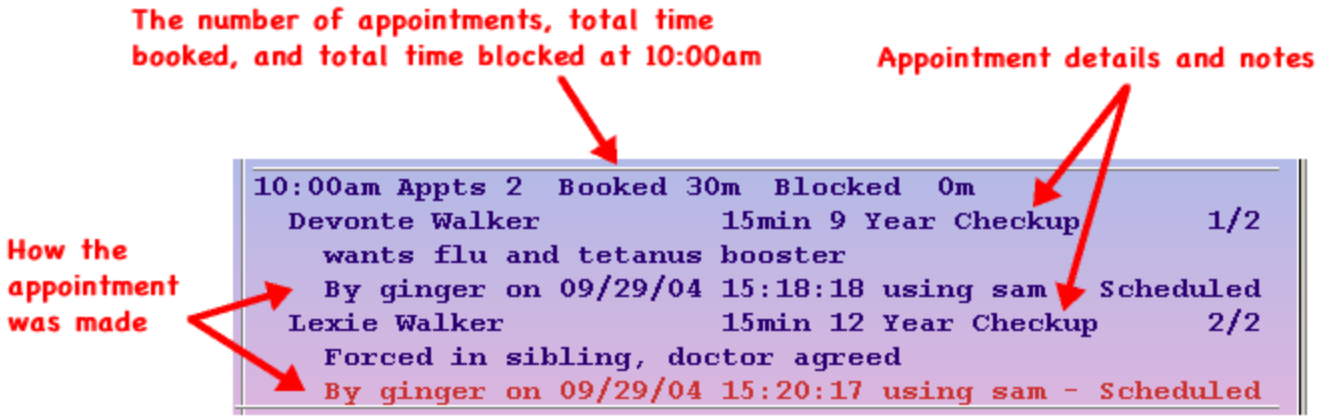
The Normal view in sam displays several columns with basic information. The Detailed View shows a single day with lots of information about each time slot.

Select a date column in the Normal View and press **F8** to switch to the Detailed View.




## Reading the Detailed View

The Detailed View shows complete information about every appointment and every time slot. Each time slot on the left hand side of the screen has an explanatory section on the right hand side. For each time slot, you can review the number of appointments, amount of time booked and blocked, and complete appointment information (including notes, scheduler, and when scheduled).




In the image above, you can see that there are two visits scheduled at 10:00am. The user "ginger" made both appointments on 09/29/04, and you can see that the first visit may include a flu and tetanus shot.

## Actions On the Detailed View

### Review the Schedule

If you want to look around the schedule, press [**F4** -- *Next Available*] to walk down through all the *available* openings.

Or, use your arrow keys to move up and down through each unit of the day. Press the right and left arrow keys to view different days.

#### Schedule an Appointment

When you find the appointment time you want, press [**F1** -- *Schedule Appt*].

#### Overbook or Force an Appointment

You can select and examine any day or time in the Detailed view, even a day that is fully booked and has no available times.

Use the arrow keys to select an unavailable time and press **F1** to force in an appointment.

**Permissions Configuration:** Permission to double-booking or force in an appointment can be limited to specific users. If you can not double-book and need to, speak with your office's system administrator or contact PCC Support at support@pcc.com or 1-800-722-1082.

#### Remove Blocks

You can select and remove blocks on the Detailed view. For example, if your allotted time for physicals is fully booked, you may decide to remove a sick or recheck visit block so you can fit an extra physical.

Use the arrow keys to select a block and press [**F5** -- *Remove Block*] to remove it.

This key only appears on the screen when you have selected a block appointment, like a sick call block.

**Permissions Configuration:** Permission to remove a block can be limited to specific users. If you can not remove a block but need to, speak to your office's system administrator or contact PCC Support at support@pcc.com or 1-800-722-1082.

#### Switch Time Frame or Criteria

While you are viewing the Detailed View, you are working with a single provider and your original time frame and criteria.

If you wish to change your search criteria or switch providers, press [**F2** -- *New Time Frame*].

You can also press [**F7** -- *Day View*] and switch providers on the Day View.

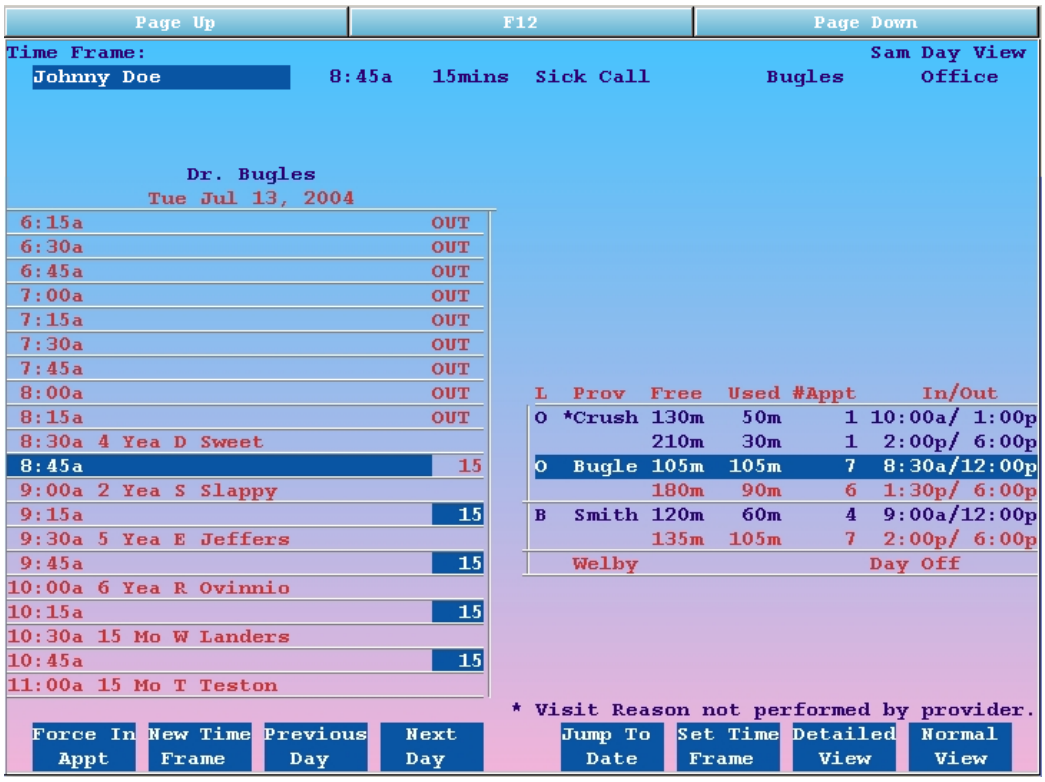
#### New Normal View Based on Selection

If you would like **sam** to search for new times based on the date you have selected in the Detailed View, press [**F6** -- *Set New Criteria*]. **sam** will take you back to the Normal View with your newly selected time and date as a starting point for your search.

### 4.2.5 The Sam Day View: Force in Appointments, Review All Providers

The Day View displays a provider's appointments for a day as well as how busy each provider is on that day. You can review your office's schedule and book appointments in any time slot. You can jump to a date that is unavailable or full and force in an appointment, a feature unavailable on the Normal View.

To reach the Day View, press [**F7** -- *Day View*] from the Normal View. Note that if you use **F8** from any scheduling view, you will cycle through the three different scheduling views.




## Reading the Day View

The Day View screen is divided into two parts.

### The Provider's Schedule

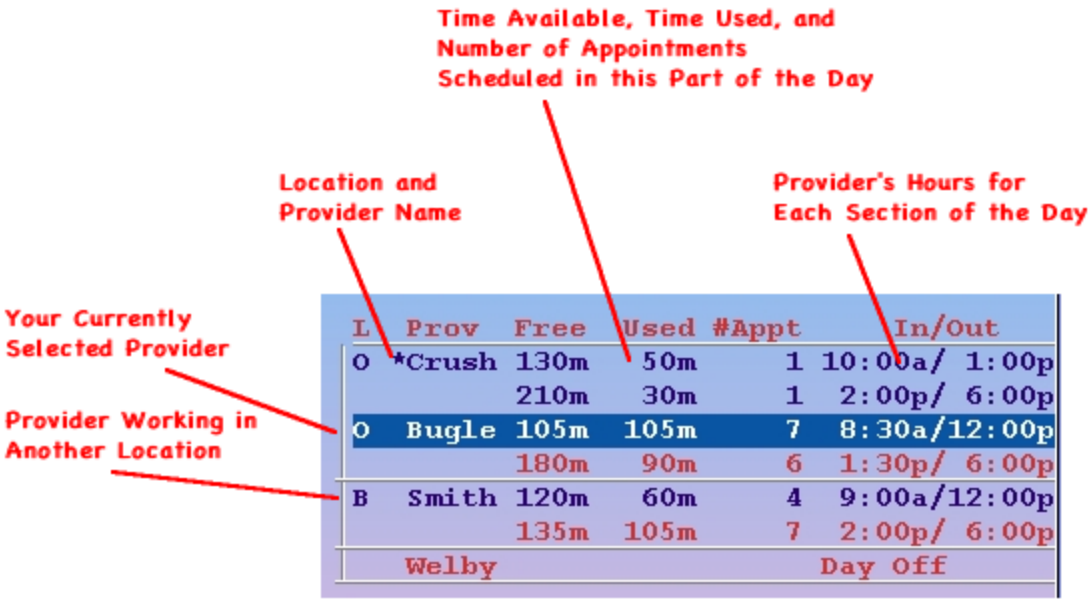
On the left is a simple view of the selected day for the currently selected provider. Each unit of time shows an abbreviated visit reason, a patient name, and any amount of blocked time or open time.

Use your arrow keys to move up and down through the day. Press [**F3** -- *Previous Day*], [**F4** -- *Next Day*] or [**F5** -- *Jump To Date*] to view other days.

### Summary for All Providers

A provider schedule summary, or "workload" summary, is on the right hand side of the screen. For each clinician, you can see the total number of free and scheduled minutes.

The currently selected provider and the shift you are reviewing will be highlighted.




In the example shown, an 8:45am visit is selected, and on the right hand side you can see that this is with Dr. Bugles, working in the office, during his morning hours of 8:30am to 12:00pm. You can also tell how much time during each part of the day is already scheduled and how much is still free. For example, in the afternoon Dr. Bugles has 180 minutes free and has six scheduled appointments for a total of 90 minutes scheduled.

**Configuration:** PCC can configure which of your clinicians you would like to appear in this list and whether to sort the list alphabetically or by available time.

**What is the asterisk (*) for?** You may notice an asterisk next to a provider's name and an explanation at the bottom of the screen that you can not schedule your current visit reason for the indicated provider. This happens when the visit reason you chose does not have a visit length listed in the table editor (**ted**). **sam** does not know how much time that provider needs for the visit. To schedule for that provider, you will need to press [**F2** -- *New Time Frame*] and enter a visit length.

## Actions On the Day View

### Review the Schedule

Use the up and down arrow keys to move up and down the day's schedule or the list of clinicians. Use the right and left arrow keys to move between the two panels.

As you select a clinician on the right-hand side, the panel on the left will change to display that clinician's schedule. You can therefore use the Day View to quickly review the entire day's schedule for all clinicians in all locations.

### Schedule an Appointment

You can use [**F1** -- *Schedule Appt*] to make an appointment at the selected time.

If the clinician is not available, or the appointment will not fit in the selected slot for some other reason, the key will read [**F1** -- *Force in Appt*].

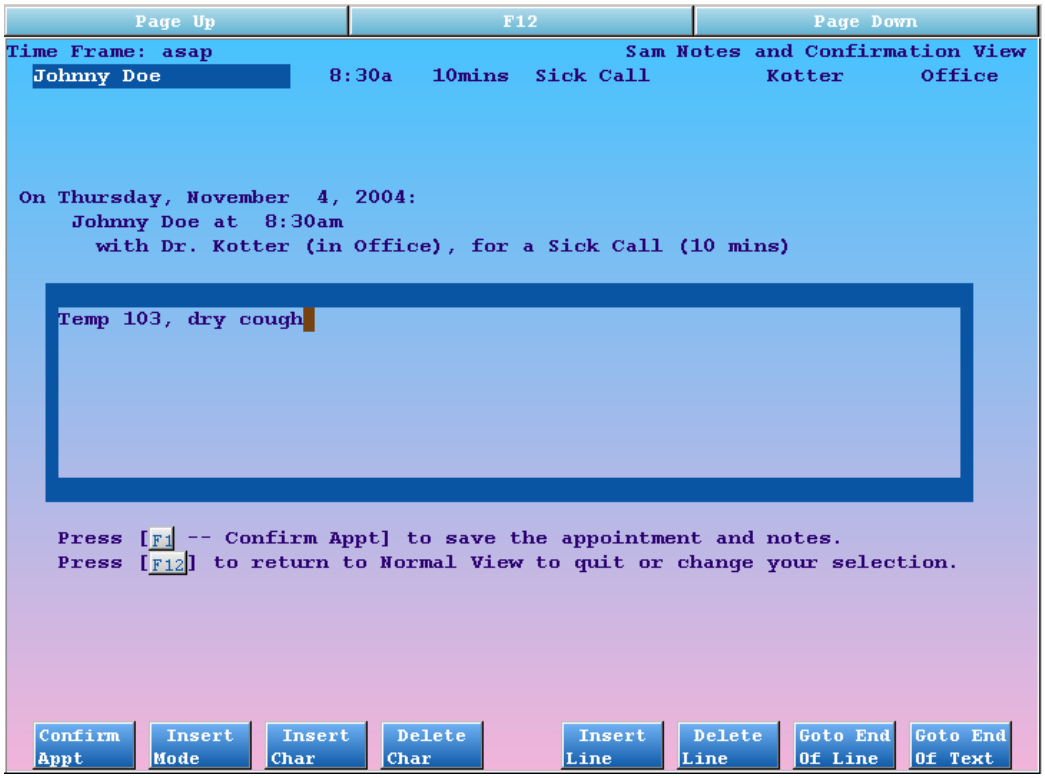
**New Normal View Based on Selection**

You can jump to any date, select any provider in any location, and then press [**F6** -- *Set New Criteria*] to return to the Normal View with new criteria.

If you press [**F8** -- *Normal View*] instead, **sam** will assume you were "just looking" and return to your original date and provider.

## 4.2.6 Confirming Appointments

Press [**F1** -- *Schedule Appt*] from the Normal, Detailed, Day, or Patient View to begin confirming appointments listed at the top of the screen. From the Notes and Confirmation screen you can enter notes and confirm the appointment:




While you are confirming, you can remind the caller about the time and date you have selected and note any pertinent information about the visit. The function keys are the standard options for the **fred** text editor. They allow you to manipulate the notes you type in various ways.

If you change your mind, or you selected the wrong visit time by mistake, just press **F12**. You will be taken back to the Normal View so you can pick a different appointment or quit.

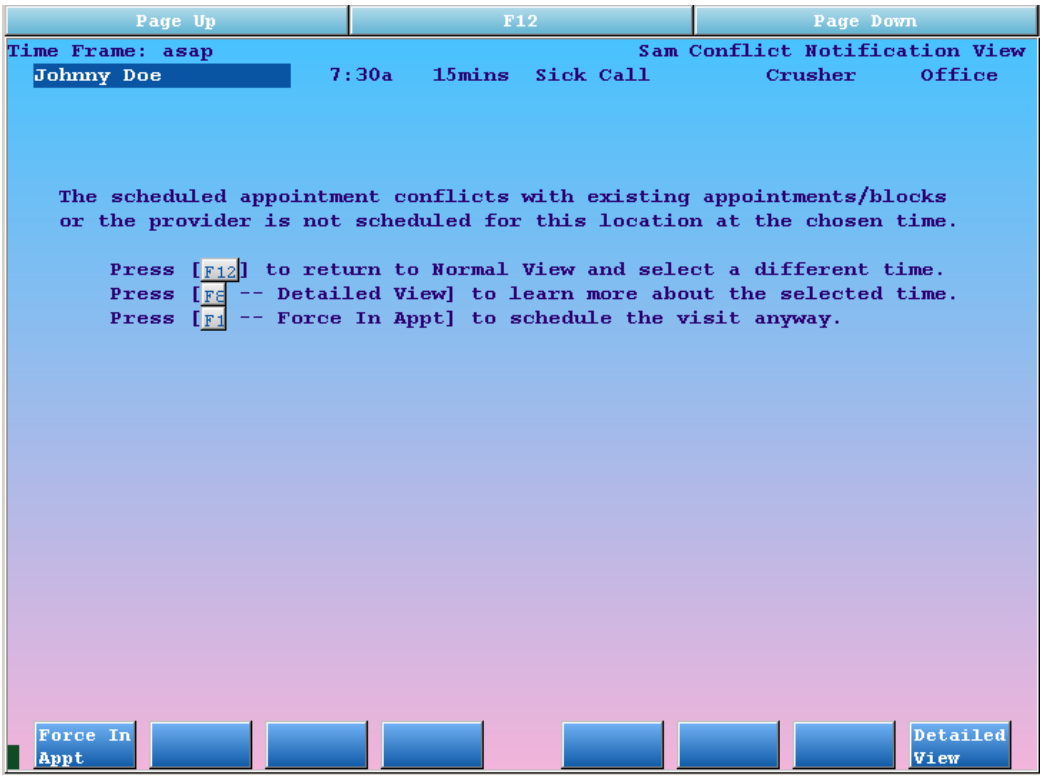
The most important function is [**F1** -- *Confirm Appt*], which will confirm the appointment you have selected and save any notes you have typed. If you are scheduling for two or more patients, you will be shown a separate confirmation screen for each one. If you are scheduling an appointment for today, an encounter form will print out as soon as you save.

After confirming the appointment(s), you will be brought to the find routines so you can schedule for the next patient. If you want to check the work on the visit you just made or make changes to the patient's demographics,

you can press [**F2** -- *Use Last Patient*] to return to the SAM Search Criteria screen. From their you can run **inquire** or view the patient's demographics.

**Conflicting Appointments**

If at any time you attempt to confirm a time slot that is already filled or is otherwise unavailable, you will be shown a conflict screen:




The conflict screen conveniently has a function key for jumping to the Detail View for more information. You can press **F12** to return to the screen where you selected the appointment time, or press [**F8** -- *Detail View*] so you can evaluate the day in more detail and determine how the slot was already filled.

If you are certain that you wish to schedule the appointment anyway, press [**F1** -- *Force In Appt*] to continue scheduling. This may result in double booking or scheduling an appointment when the provider is not scheduled to work. PCC can turn this option on and off for specified users.

# 4.3. Schedule Multiple Patients

The steps below will demonstrate multiple patient scheduling and teach you all the tools you need to find the best openings for them quickly.

**Step 1: Find the First Patient.**

When a caller wants to schedule two siblings or any two patients at the same time, the first step is to find the first patient. Run **sam** and enter the patient's name as described in the sections above.

**Step 2: Add Additional Patients.**

After finding the first patient, press one of the following two keys on the SAM Search Criteria screen:

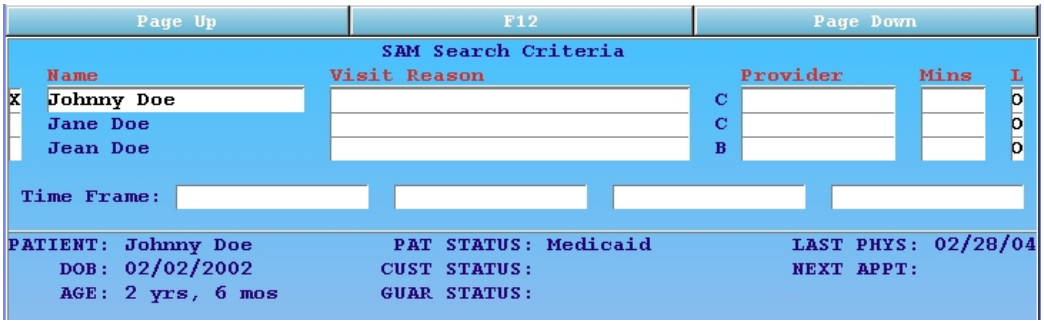
[**F3** -- *Find*]

Press **F3** if you wish to find an additional patient by name, birth date, or other identification. You will see the standard Partner find routines, where you can find any patient or add a new patient. If you are scheduling the same patient for multiple providers, you can press [**F2** -- *Use Last Patient*] from the find screen to select the current patient a second time.

[**F5** -- *Next Relation*]

Use **F5** to add a relation of the current patient. A relation is any patient who shares the same custodian as the currently listed patient. You will see a list of all patients who share the current patient's custodian.

When you have several patients on the screen, the SAM Search Criteria screen will list them all at the top:




**Step 3: Review Patient Information.**

You can use the check box at the left to select each patient. Press the left arrow key to enter the box, and then arrow up and down to choose a different patient. The information window in the middle of the screen will change to reveal info for the chosen patient. If the caller is making appointments for physicals, for example, you can verify each of the patients' last physical date before scheduling.

If you added a patient by mistake, you can remove them from the list by selecting them and pressing [**F8** -- *Clear*].

**Step 4: Fill Out Criteria.**

Fill out the Visit Reason and Provider fields for each patient. Note that an initial next to the Provider field indicates the patient's primary care provider. You can select each patient and use [**F6** -- *Demographics*] if any changes need to be made.

Page Up | F12 | Page Down

SAM Search Criteria

| | Name | Visit Reason | | Provider | Mins | L |
|---|---|---|---|---|---|---|
| X | Johnny Doe | 3 Year Checkup | C | Dr. Bugles | 15.0 | O |
| | Jane Doe | 3 Year Checkup | C | Dr. Bugles | 15.0 | O |
| | Jean Doe | 15 Year Checkup | G | Dr. Blevins | 15.0 | O |

Time Frame: asap

PATIENT: Johnny Doe
DOB: 02/02/2002
AGE: 2 yrs, 6 mos

PAT STATUS: Medicaid
CUST STATUS:
GUAR STATUS:

LAST PHYS: 02/28/04
NEXT APPT:

**Note:** You can specify exactly which provider each sibling should see, or you can use provider groups. If you use a provider group, such as "any", **sam** will attempt to find times when both patients can see the same provider.

## Step 5: Enter Time Frame.

Enter a time frame and press [**F1** -- *Schedule*] to find open appointment times.

**Note:** If you are scheduling multiple patients for more than one provider, the default search is for "serial" appointments; **sam** assumes that you do not want the visits to overlap. A parent would want to attend the physicals of each child, for example, even if the visits were with two different providers. You can add the time frame of "concurrent" if the caller does not mind having their patients in two different rooms at the same time or if you are scheduling one patient for a simultaneous two-provider visit.

## Step 6: Select the Best Appointment Times.

As with one patient, **sam** will next show you the Normal View:

Page Up | F12 | Page Down

Time Frame: asap — Sam Normal View

| | | | | | |
|---|---|---|---|---|---|
| Johnny Doe | 8:45a | 15mins | 3 Year Checkup | Bugles | Office |
| Jane Doe | 9:00a | 15mins | 3 Year Checkup | Bugles | Office |
| Jean Doe | 9:15a | 15mins | 15 Year Checkup | Blevins | Office |

| Dr. Bugles<br>Mon Jan 3, 2005 | Dr. Bugles<br>Tue Jan 4, 2005 | Dr. Bugles<br>Wed Jan 5, 2005 | Dr. Bugles<br>Thu Jan 6, 2005 |
|---|---|---|---|
| 8:00a OUT | 7:45a OUT | 8:00a OUT | 8:00a OUT |
| 8:15a OUT | 8:00a OUT | 8:15a OUT | 8:15a OUT |
| 8:30a<br>15 - 2 Year Check<br>Sheffield, Shanti | 8:15a OUT | 8:30a<br>15 - 8 Year Check<br>Curry, Casslin | 8:30a<br>15 - 8 Year Check<br>Loepker, Yliesha |
| 8:45a 15 | 8:30a 15 | 8:45a 15 | 8:45a 15 |
| 9:00a 15 | 8:45a 15 | 9:00a 15 | 9:00a 15 |
| 9:15a 15 | 9:00a<br>15 - 5 Year Check<br>Massy, Meet- | 9:15a 15 | 9:15a 15 |
| 9:30a 15 | 9:15a 15 | 9:30a 15 | 9:30a 15 |

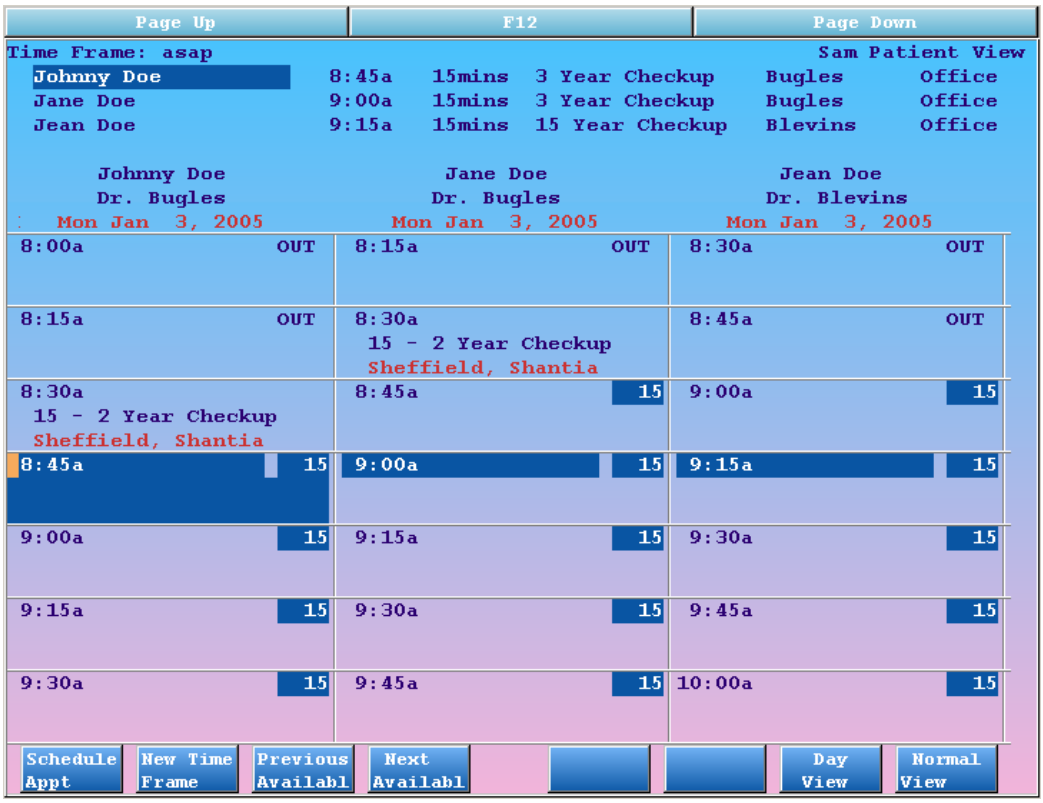
Schedule Appt | New Time Frame | Previous Availabl | Next Availabl | | | Patient View | Detailed View

The middle row shows you the first available times for the first child based on the time frame you entered. The top of the screen will display what time is held for each of the other patients. **sam** carefully selects available time slots in which all of the listed patients can fit. If you see any offerings, you can trust that all of the patients will fit into the schedule at that time. The Normal View's columns and rows, however, can only show time selection and provider for one patient.

Always look at the top of the screen when offering times to the caller. The listed times are held by **sam**, and pressing [**F1** -- *Schedule*] will begin confirming those times for the patients listed.

**Step 7: Optionally, check the Patient View.**

If you wish to see one column for each patient, press [**F7** -- *Patient View*]. The Patient View option only appears when scheduling multiple patients. It will show you columns for each patient you are scheduling and allow you to see existing appointments surrounding the selected time. If you are scheduling for more than one provider, the Patient View helps you understand each providers' schedule for the selected day and time.




You can move from left to right to select a different patient. Use [**F3** -- *Previous Available*] and [**F4** -- *Next Available*] to scroll to other possible openings in the selected day with the selected provider. **sam** will continue to calculate the best available times to bring in all of the patients listed. You can return to the Normal View by pressing [**F8** -- *Normal View*]. The Normal View picks times for you for all patients and lets you move from day to day, but the Patient View helps you understand exactly where the visits will land during the selected day.

**Step 8: Schedule and Confirm the Appointment.**

Whatever view is on your screen, press [**F1** -- *Schedule Appt*] to begin confirming the appointments. Remember that the times and providers you are confirming are always shown at the top of the screen. Read the section below for full details on how to confirm appointments.

**One Patient for Two Providers:** Do you ever schedule one patient for two different providers at the same time? Does your doctor need a translator, or do you need both a doctor and a nurse practitioner present during certain visits? Use the multiple patient features described below to find the same patient twice and schedule time with two different providers concurrently.

**Force a Specific Day and Time:** Do you want to use the Day View to force multiple patients into a day that is not offered on the Normal View? You can, but remember that the Day View only selects a single date, time, and provider. If you use the Day View to force in multiple patients, you will be booking back-to-back visits for the same provider starting at the selected time. If that is not what you want, use the Patient View or schedule each patient separately. As mentioned above, always review your selection at the top of the screen before confirming the appointments.

# 4.4. Review and Change a Patient's Appointments

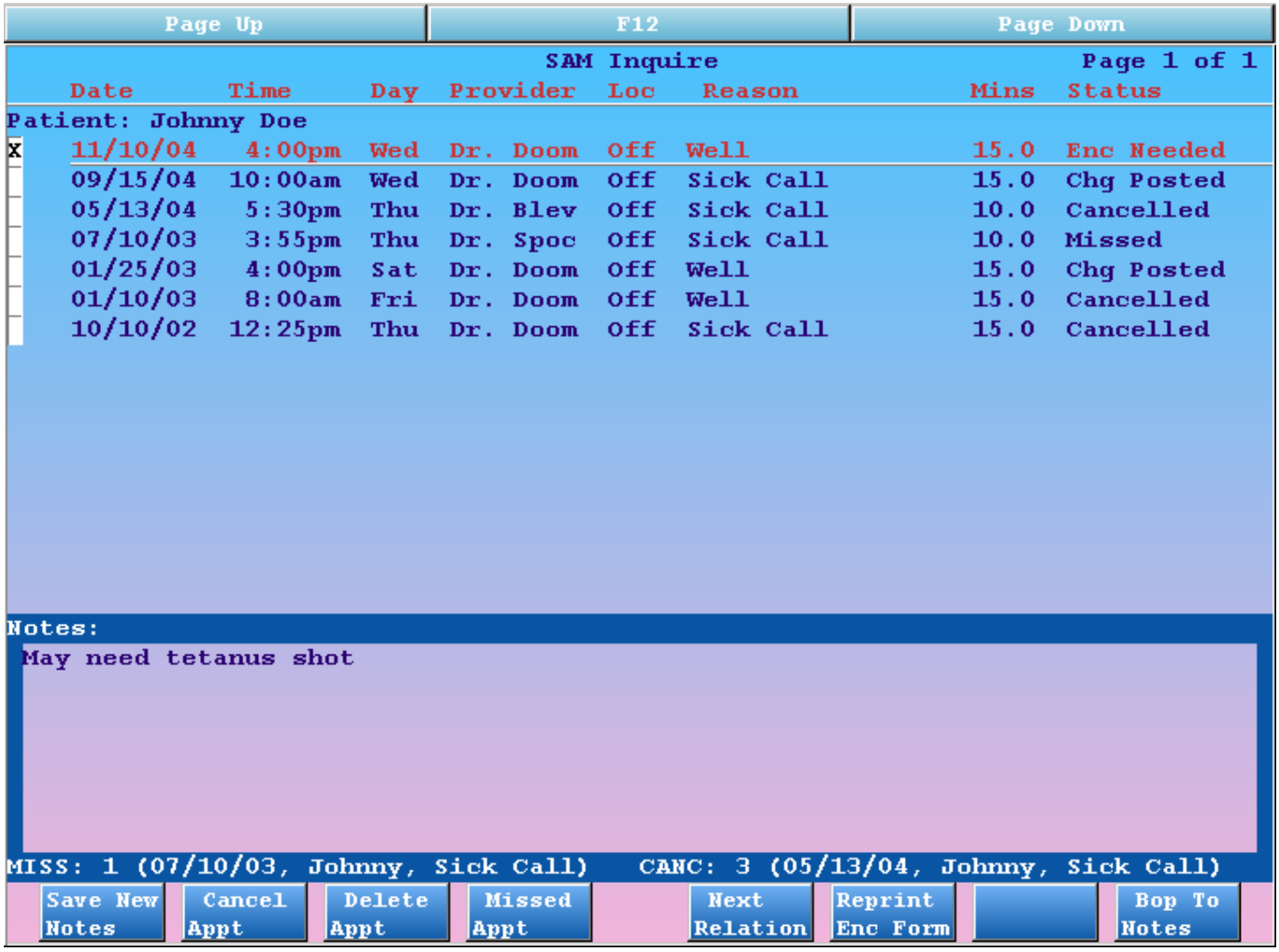
In **inquire**, you can look up a patient's future or past appointments. You can also make changes to appointment status or appointment notes, or cancel an appointment. Finally, you can reschedule any appointment in **inquire**, moving an existing appointment to a new date and time. Read the sections below to learn all the functions and tools of **inquire**, Partner's patient appointment record.

## 4.4.1 Review Patient Appointment Details

There are three ways to run the **inquire** program and review a patient's appointments:

1. If you are using **sam**, you can run **inquire** by pressing [**F2** -- *Inquire*] from the Search Criteria screen.
2. You can tell the scheduler to **inquire** automatically whenever you find a patient for scheduling. To turn on the automatic **inquire** feature, refer to the Scheduler section of the Configuration Editor (**ced**) or contact PCC.
3. Finally, **inquire** can be run as a stand-alone program. PCC can add the **inquire** command to your Partner windows. If you are at a UNIX prompt, type **inquire** and press **Enter**. The program will ask you to select a patient.

When **inquire** runs, you will see a list of the chosen patient's appointments, with information about each one:




For each appointment, you can see the date, time, day, provider, location, visit reason, length of visit, and appointment "Status."

You can select specific appointments by using the arrow keys to go up and down the list. The "Notes" box at the bottom of the screen displays the visit notes of the currently selected appointment. If the patient has more appointments than can fit on the screen, the **page up** and **page down** keys allow access to the full list.

While most of the appointment information is self-explanatory, the Status column may contain varied information:

| Status | Explanation |
|---|---|
| Enc Needed | The appointment has been scheduled, but the encounter form has not been printed yet. |
| Enc: word | You have printed the encounter form, and "word" is the magic word. |
| Enc: | You have printed the encounter form, but so many days have passed since printing that the word has expired and been reused. You may have posted the charges without using the magic word. |
| Checked In | Someone has used the **checkin** program to confirm the patient's information. The patient is probably in the building. |
| Chg Posted | Someone has posted the charges for the encounter form by using the magic word in **checkout**. |
| Visit | This is a visit that has been reviewed in Partner. PCC is preparing its databases for new charge |

| Status | Explanation |
|---|---|
| Reviewed | posting confirmation features. For now, this status is identical to "Chg Posted." |
| Canceled | This visit was cancelled using the **inquire** program. |
| Deleted | This visit was deleted using the **inquire** program. |
| Missed | This visit was marked as missed using the **inquire** program or the **magic** program. |
| Can/Del/Miss | This visit was "removed" with an old version of the **inquire** program that did not record how the appointment was removed. It was either marked as cancelled, deleted, or missed. |

## 4.4.2 Cancel, Delete, or Mark an Appointment as Missed

There are three ways to remove an appointment from the schedule. You can record that the patient has canceled the appointment, you can delete an appointment (if it is a mistake, for example), or you can mark that the patient has missed the appointment. All three of these functions are controlled in the **inquire** program.

You can "un-cancel" (or un-delete, or un-miss) appointments if they are removed by mistake.

**Remove an Appointment**

First, run **inquire** and use the arrow keys to select the visit you wish to change. Then use the following function keys:

[**F2** -- *Cancel Appt*]

Press **F2** to mark an appointment as Canceled.

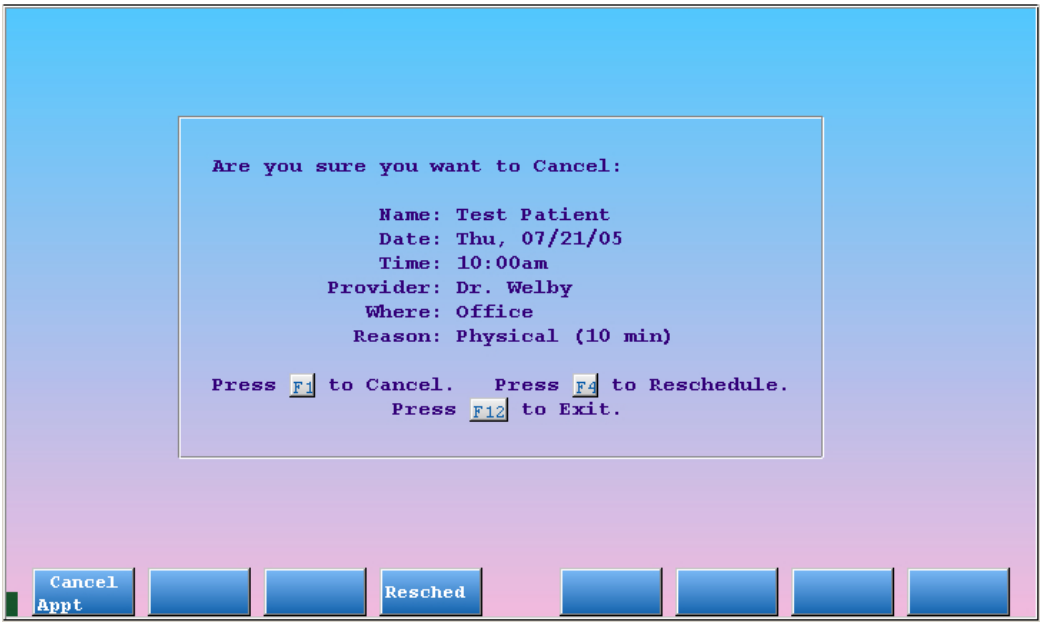
[**F3** -- *Delete Appt*]

Press **F3** to mark an appointment as Deleted.

[**F4** -- *Missed Appt*]

Press **F4** to mark an appointment as Missed.

For each of the above choices, you will see a warning screen asking you to press **F1** to confirm your cancellation or **F12** to keep the appointment and return to the main **inquire** screen.



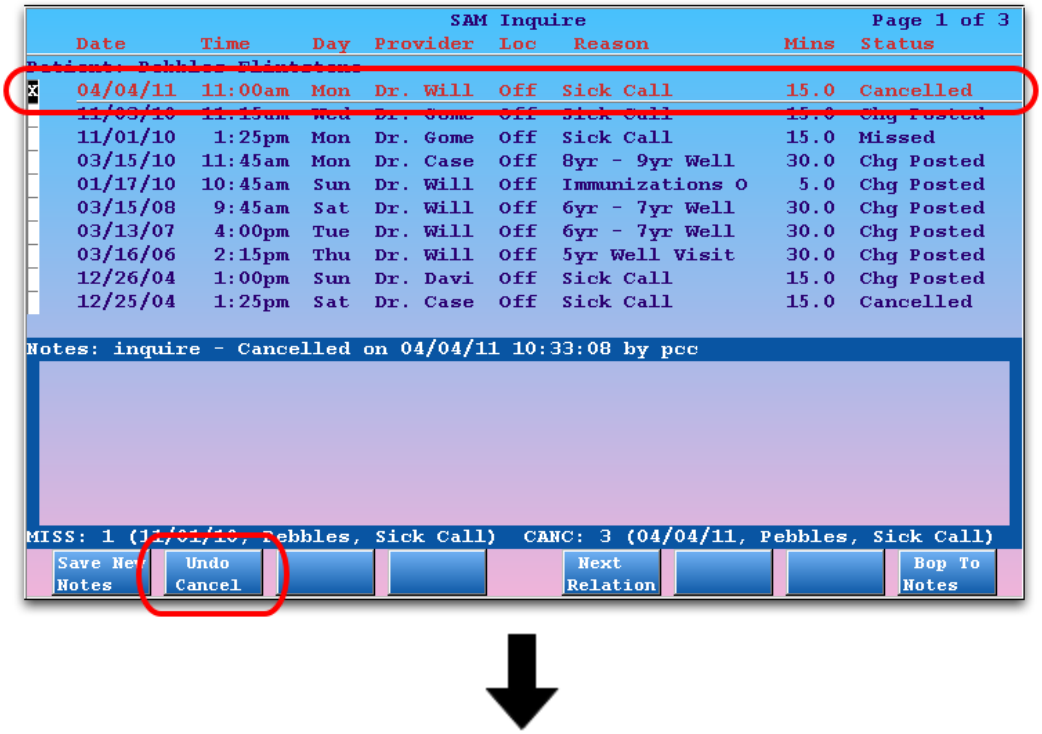
Once a visit is removed in one of the above ways, it can not be recovered. At the bottom of the main **inquire** screen you can see a summary of the total number of missed and canceled appointments the patient has had, along with the date of the most recently canceled appointment.

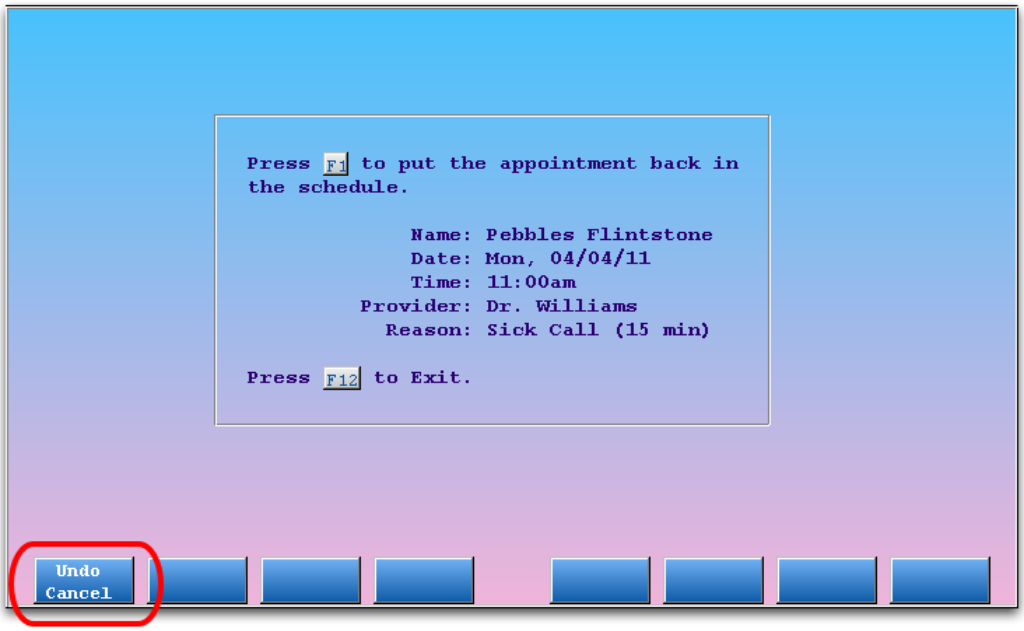
Depending on your office's configuration, deleted appointments may be invisible from the **inquire** screen.

**Automatically Mark an Appointment Missed:** PCC can create a procedure that, when posted during check-out, will automatically mark an appointment as missed and (optionally) post a fee to the responsible account. For more information, contact PCC Support.

### Bring Back a Removed Appointment

If an appointment was canceled (or deleted or marked as missed) by mistake, you can select it and press the corresponding function key to "un-cancel" it.






Putting an appointment back into the schedule may lead to scheduling conflicts, if the open slot has already been taken. Your office should plan for the proper use of this feature.

### 4.4.3 Reschedule an Existing Appointment

When a patient wants to reschedule, you *could* make them a new appointment without canceling the old appointment, but then the patient would be double booked! Instead, use **inquire** to both reschedule the appointment at a different time *and* cancel the old appointment at the same time. **sam** will transfer the basic visit information to the new appointment. Follow this procedure:

**Step 1: Find the Patient and the Appointment**

Run **inquire** and select the appointment that needs to be moved.

**Step 2: Choose F2, F3, or F4**

Press [**F2** -- *Cancel Appt*] to cancel the existing appointment. You could also choose [**F3** -- *Mark as Missed*] or [**F4** -- *Delete*], depending on the reason for rescheduling.

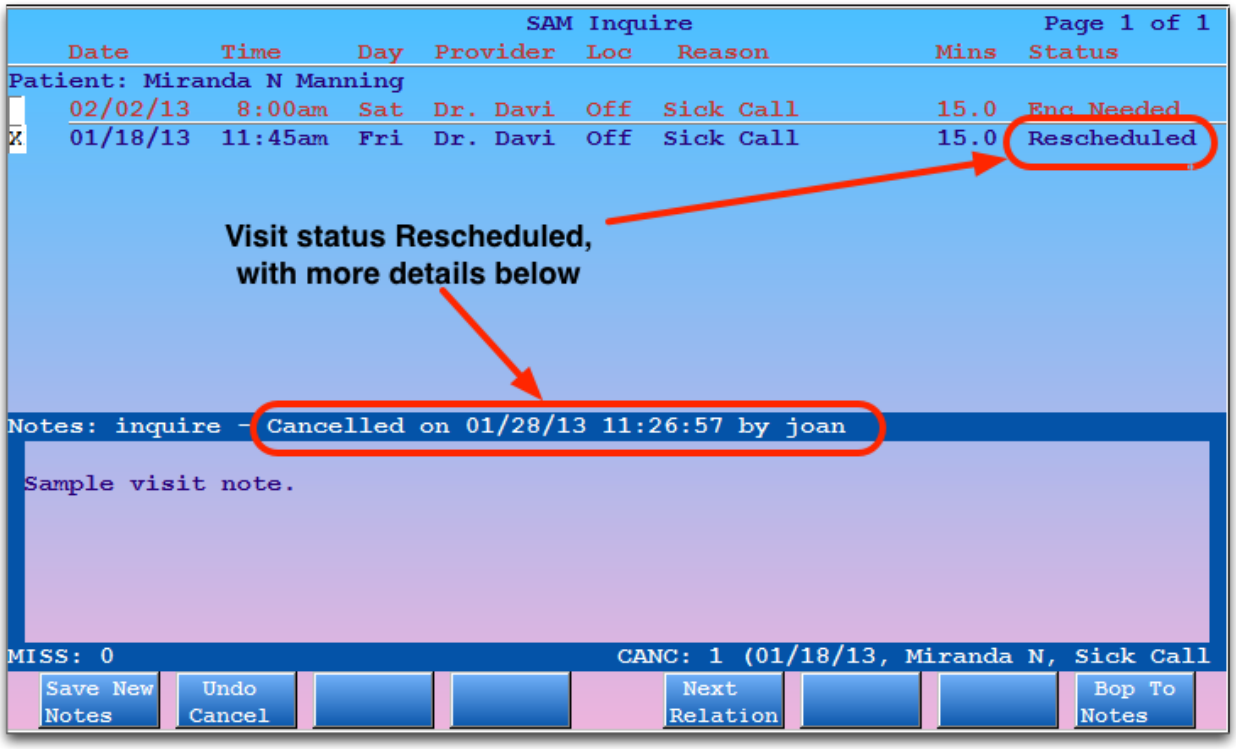
**Step 3: On the confirmation screen, press [F4 -- *Reschedule Appointment*]**

**Step 4: Schedule the New Appointment**

You will notice that the patient and visit information have been filled in for you. Enter a time frame (if desired) and press [**F1** -- *Schedule*] to choose the new date and time for the appointment.

**Step 5: Review Your Work**

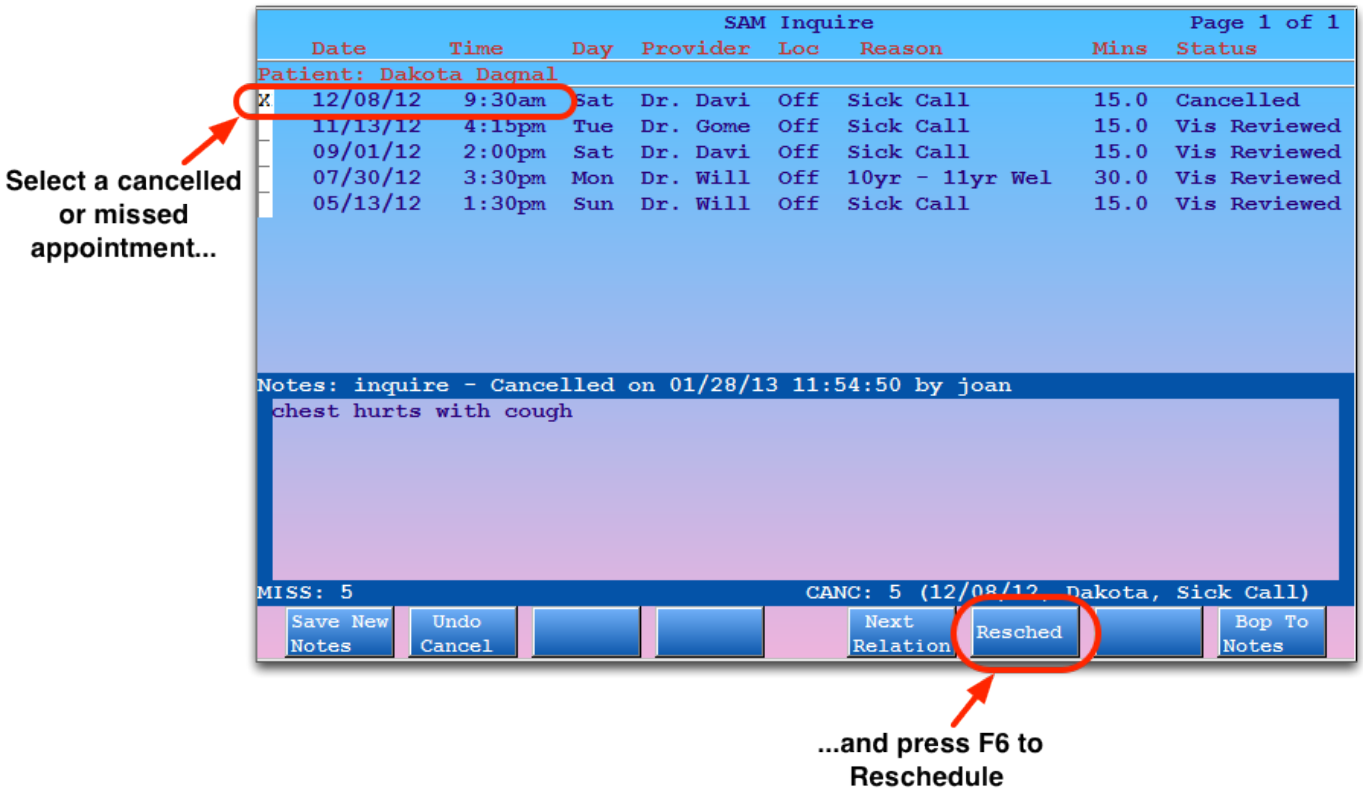
After you press [**F1** -- *Confirm*] from **sam**'s Confirmation screen, you will be returned to the **inquire** screen. You should see both the old and new appointment times listed, with the old time marked as "Canceled." The canceled (or missed) appointment will be described as "Rescheduled" in the status column.




**Changing Your Mind:** If you press **F12** while rescheduling, you will be returned to the **inquire** screen and the appointment you were rescheduling will *not* be canceled, deleted, or marked as missed.

**Who Rescheduled?:** When you use the procedure above to reschedule an appointment, **inquire** automatically adds your username to the appointment note. If you ever need to know who rescheduled an appointment, run **inquire** and select the appointment to review its notes.

**Reschedule a Previously Canceled or Missed Appointment?** In addition to the workflow described above, you can also select a previously canceled or missed appointment and press [**F6** - *Resched*] to reschedule.




## 4.4.4 View Appointments for Multiple Siblings

You can review appointment history and upcoming appointments for multiple family members at the same time.

**Step 1: Run inquire and Find a Patient**

**Step 2: Press F5 -- Next Relation**

**Step 3: Select One or More Additional Patients**

**Step 4: Press F1 -- Continue**

**Step 5: Review Multiple Patient Schedules**

## 4.4.5 Reprint an Encounter Form

You can reprint the encounter form (superbill) for any appointment in the **inquire** program.

**Step 1: Run inquire for the patient**

**Step 2: Use the Arrow Keys to Select the Appointment**

**Step 3: Press F6 -- Reprint Enc Form**

## 4.4.6 Change Appointment Notes

You can change the appointment notes for any appointment in the **inquire** program.

**Step 1: Run inquire for the Patient**

**Step 2: Use the Arrow Keys to Select the Appointment**

**Step 3: Press F8 -- Bop To Notes**

When you press F8, the cursor will jump down to the appointment notes section of the screen.

**Step 4: Edit the Appointment Notes**

**Step 5: Press F1 -- Save New Notes to Save Your Changes**

# 4.5. Scheduling Reports

There are several different reports for reviewing your patient schedule. These include short, quick reports for daily use, reports for analyzing your schedule over a period of time, and summary reports that help you evaluate your visit ratio. Partner's scheduling reports are listed below. As with all reports, remember that PCC can customize a report to meet your practice's needs.

**scan**

The Appointment Book Display (**scan**) displays the day's schedule for one or more providers. In **scan**, you can flip through the days of your schedule using the right and left arrow keys.

PCC can customize the information shown in the **scan** report. Along with normal schedule information, it could show you who scheduled each appointment and the date the appointment was made.

The **scan** report is located in the Daily Operations window within the Partner Programs window. You can also type **scan** at a command prompt.

**chart**

The Appointment Book Display (**chart**) was written to help users pull charts. It displays a single provider's appointments for a single day without showing spaces for available appointments. **chart** is usually shorter than the **scan** report, making it easier to read and print.

The **chart** report is located in the Daily Operations window within the Partner Programs window. You can also type **chart** at a command prompt.

**samview**

The **samview** program shows you the **sam** Day View or **sam** Detailed View without needing criteria. Run **samview** to use these two useful **sam** scheduling screens as a report, to help manage your schedule.

**Doctor's Free Time**

While viewing any of the scheduling screens in sam, press **F** to see the Doctor's Free Time report. Doctor's Free Time is a text-based chart that displays available time for a single provider.

Doctor's Free Time displays a single pound symbol (#) for every 2.5 minutes of available time. This allows you to quickly glance at a provider's day and make judgments about available openings.

**appts**

The Appointment Summarizer (**appts**) is a powerful scheduling analysis report. In **appts**, you can list appointments by a variety of criteria and subtotal by provider, visit reason, and other items.

The **appts** report is located in the Scheduling Reports window within the Patient Scheduling window of the Partner windows. You can also type **appts** at a command prompt.

**prscprint**

The **prscprint** report will show every provider's in and out times for a given date or date range. When you are configuring multiple providers' schedules and need a quick view of who is in and out of the office, **prscprint** is a quick and easy reference.

The **prscprint** report is located in the Scheduling Reports window within the Patient Scheduling window of the Partner windows. You can also type **prscprint** at a command prompt.

**bump**

The **bump** program lists overlapping appointments for any given day.

The **bump** report is located in the Scheduling Reports window within the Patient Scheduling window of the Partner windows. You can also type **bump** at a command prompt.

**squish**

The **squish** report displays an abbreviated schedule for any provider for an entire week. The report lists each visit reason, the length of the appointment, and the patient's name.

The **squish** report is located in the Scheduling Reports window within the Patient Scheduling window of the Partner windows. You can also type **squish** at a command prompt.

**full**

The **full** report displays an abbreviated daily schedule for several providers, side-by-side. Along with the time and provider, the report lists the length of each appointment, the patient's first initial and last name, and the visit reason.

The **full** report is located in the Scheduling Reports window within the Patient Scheduling window of the Partner windows. You can also type **full** at a command prompt.

**twomonths**

The **twomonths** report sends a calendar-style schedule directly to your default Partner printer. You can run the **twomonths** report from a command prompt.

**pnpscan**

The Appointment Book Display by Location (**pnpscan**) shows scheduled appointments for one or more providers and can be limited to a specific location.

The **pnpscan** report is located in the Scheduling Reports window within the Patient Scheduling window of the Partner windows. You can also type **pnpscan** at a command prompt.

**srs**: *Appointment Schedule by Insurance Plan*

The Appointment Schedule by Insurance Plan report helps you analyze the insurance plans of patients who are visiting your practice.

**srs**: *Missed Appointment Report*

The Missed Appointment Report shows all canceled appointments, with full appointment information, for a given date range.

**srs**: *Scheduling Reports*

The Smart Report Suite, located in the Practice Management window, has a collection of useful scheduling reports. The various sections include reports that could ease the process of checking eligibility, provide appointment statistics for long-term analysis of your schedule, and show monthly visit summaries.

# 5. Checkin Patients

## 5.1. Introduction

The **checkin** program checks in patients. During checkin, you can update account and patient information, update insurance information, review outstanding balances, check eligibility, and post a copay payment.

Because **checkin** has links to many essential Partner programs, it can be a great starting point for any staff member who deals with patients and accounts.

The **checkin** program is the perfect tool for the front office. In **checkin**, you can quickly confirm and verify essential information, make needed changes, and post a copay. The **checkin** program also tells your EHR and other Partner programs that the patient has arrived.

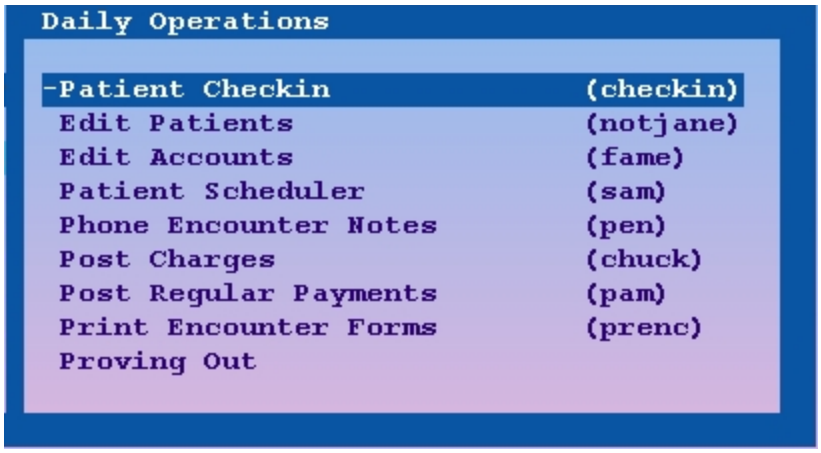
Visit learn.pcc.com to watch a training video on **checkin**, **checkout**, and many other basic Partner programs. Contact PCC Software Support at 1-800-722-1082 with any questions.

## 5.2. Quickstart: Check In a Patient

What is your office's procedure for checking in patients? Do you review their address, check their insurance information, and ask them for their copay? Whatever your procedure, **checkin** has tools to help you. The procedure below covers all the screens in **checkin**: Demographics, Additional Demographics, Eligibility, Insurance, Balance and Copay, and the optional Personal Payment screen.

**Step 1: Run checkin**

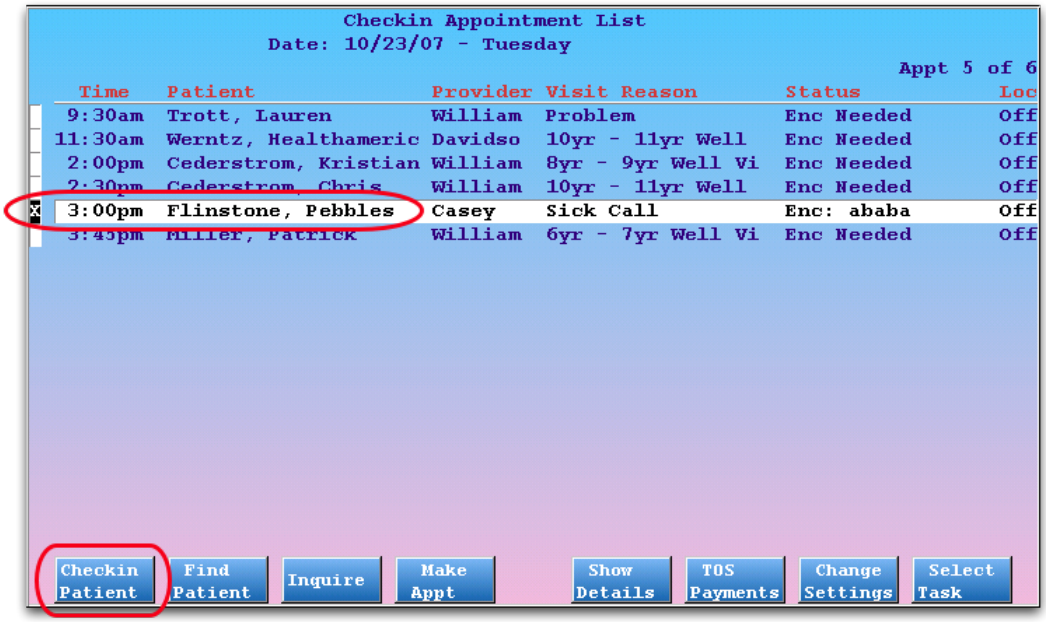
You can run **checkin** from your Partner windows.




You can also type **checkin** at a command prompt.

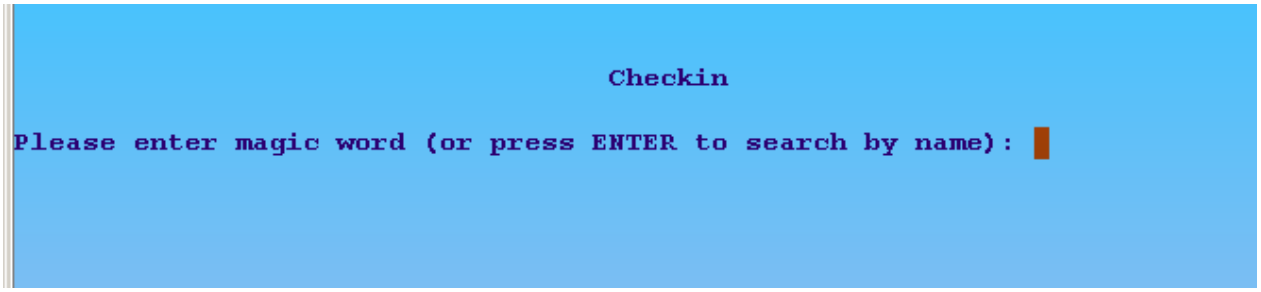
**Step 2: Select or Find a Patient**

When you run **checkin**, you must select the patient you wish to check in. Use the arrow keys to pick from a list of patients who are scheduled to visit that day:

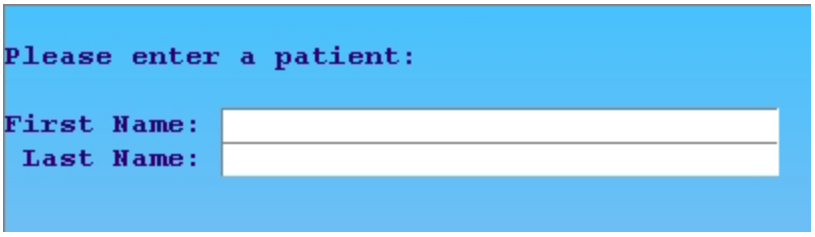



Press [**F1** -- *Checkin Patient*] to check in the selected patient. To learn more about the patient selection screen in Partner, read *Appointment Lists*.

If the patient is not scheduled to visit, you can press [**F2** -- *Find Patient*] to use a "magic word" or search by other means:




Or, after pressing **Enter**:




### Step 3: Confirm and Update Demographic Information

Next, confirm the patient's basic demographic information. Are the name and address entered correctly? Are bills being sent to the proper account? On the Demographics screen, you can quickly review and update this essential information.

Pat PCC: 3336 Checkin - Demographics Step 1 of 5

First Name: Margaret
Nickname: Pebbles
Middle Name:
Last Name: Flintstone
Suffix:

Born: Jul 17, 2004
Age: 10 yrs, 1 mo
Sex: Female

Physician: Williams
Status: $$ Problem, Adoption
Other ID: 828-74-6104
Note: Rubble
School: Bedrock Central
Old PM ID : 2755

Patient Lives with, and Bills Sent to, Fred Flintstone (#1980)

Status: Billing Problem
Addr: 1400 Rock Road
Addr:
City: Winooski
State: VT
Zip Code: 05404
Email: stones@HannaBarbera.com

Home Phone: 802-555-0105
Work Phone: 802-555-0146
Cell Phone: 802-555-0112
Emg Phone:

Next Step | Edit Patient | Edit Account | Reassign Account | | Make Appt | Reprint Enc Form | Billing FKey Set

The function keys at the bottom of the screen allow you to jump to other Partner programs. Read the article on Demographics for more information about tools on this screen.

Once you have finished checking and updating the patient's basic information, press [**F1** -- *Next Step*] to continue.

### Step 4: Confirm and Update Additional Demographic Information

Next, confirm the patient's race and ethnicity, preferred languages, and confidential communication preferences.

```
Pat PCC (#3336)          Checkin - Additional Demographics          Step 2 of 5
First Name: Pebbles                                    Born: Jan 12, 2002
 Last Name: Flintstone                                  Age: 10 years
 Physician: Mark Williams, M.D.                         Sex: Female
    Status: $$ Problem, Adoption

 Ethnicity: Not Hispanic or Latino
      Race: White

 Preferred Language: English
     Other Language:
     Other Language:

                 Patient Confidential Communication Preference:
 Contact Name:
       Method:   Mailing Address
                 Cell Phone
                 Work Phone
                 Home Phone
                 Text
                 E-mail
                X No Preference (Custodial Name and Mailing Addr. will be used.)

 Next Step | Edit Policies | Imms Record |  | Patient History | Patient Forms |  |
```

The function keys at the bottom of the screen allow you to jump to other Partner programs. Read the section on Additional Demographics for more information about tools on this screen.

Once you have finished checking and updating the patient's information, press [**F1** -- *Next Step*] to continue.

## Step 5: Confirm Eligibility

Review the insurance carrier's Eligibility Response, along with other eligibility details. The Patient Eligibility screen displays the patient's primary insurance policy along with the most recent eligibility result for the appointment.

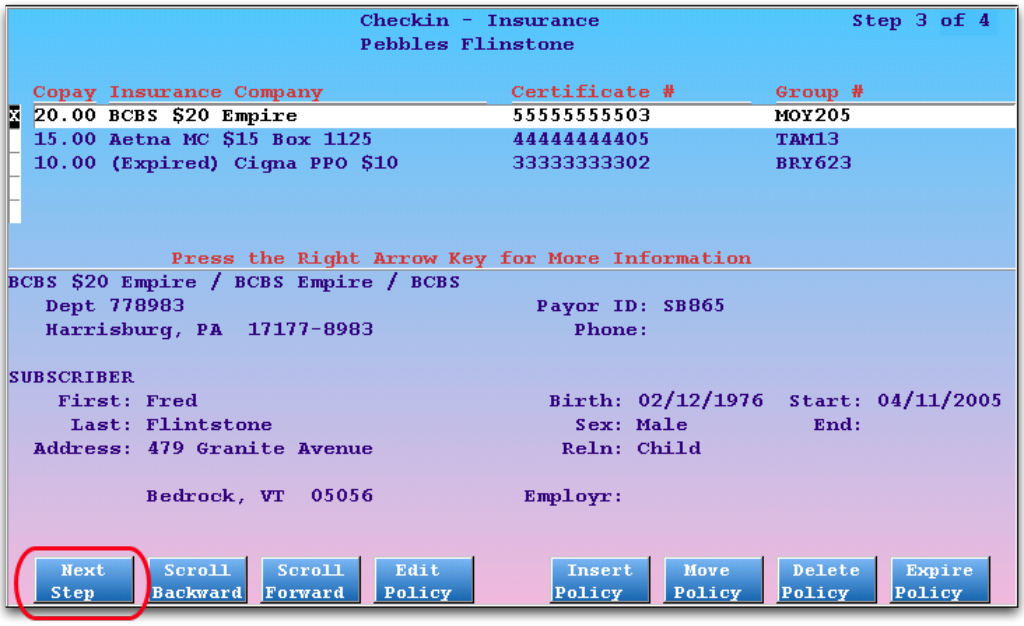
```
Pat PCC: 2974                Patient Eligibility                    Step 2 of 4

    Patient: Pebbles Flinstone (12/02/2001)
        PCP: None                          Subscriber: Wilma  Flinstone
Appointment: 04/20/09 10:45am Sick Call

PRI: SuperHealth $10          CERT: 999999999            GRP: ABCD

Notes:                   Status: Validated      Date Verified: 04/20/09
Notes regarding eligibility status.

Eligibility Response Date: 04/21/2009 (ACTIVE)
Service: 04/21/2009
Enrollment: 12/31/2007
PROFESSIONAL (PHYSICIAN) VISIT - OFFICE
     Active Coverage
      MSG: REFERRAL IS REQUIRED
    Auth: Yes
    $25 Individual Copayment Visit
      MSG: MEDICAL CARE - PRIMARY CARE (OB/GYN), NURSE PRACTITIONER
    $35 Individual Copayment Visit
      MSG: MEDICAL CARE - OTHER COVERED PROVIDER
 Next Step | Scroll Backward | Scroll Forward | Edit Policies |  | Edit Patient | Request Elig | See Full Report | Change Status
```

**Note:** Press [***F6*** -- *Request Elig*] to request updated information from the carrier. Eligibility confirmation usually takes several seconds.

Once you have reviewed patient eligibility, press [**F1** -- *Next Step*] to continue.

### Step 6: Confirm Insurance Information

On the Insurance screen, you can confirm or update the patient's policy information. The Insurance screen shows you information about every insurance policy associated with the patient.




You can arrow up and down to review each of the insurance policies, and you can use the function keys at the bottom to edit, insert, move, delete, or expire any policy. If you change the patient's primary policy, you may wish to **Page Up** to the Patient Eligibility step and request updated eligibility status from the carrier.

Once you have checked the patient's insurance card and confirmed it matches the screen, press [**F1** -- *Next Step*] to continue.

### Step 7: Check Copay, Copay Notes, and Outstanding Balances

On the Balance and Copay screen, you can review the appointment's expected copay, an aging summary for outstanding balances, and any available insurance eligibility information for the patient.

Checkin - Copay and Balance  Step 4 of 4

***** COPAY: $20.00 *****

Copay Note: Copay requires $20 for first sick, but no copay after that
Policy: Cigna PPO $20

***** PERSONAL BALANCE: $37.00 *****

Account: Fred Flintstone (#1980)

| AGING | 0-29 | 30-59 | 60-89 | 90-119 | 120+ | CREDIT | BALANCE |
|---|---|---|---|---|---|---|---|
| PER: | 0.00 | 0.00 | 0.00 | 0.00 | 37.00 | 0.00 | 37.00 |
| INS: | 0.00 | 0.00 | 0.00 | 0.00 | 128.00 | 0.00 | 128.00 |
| Med: | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 | 0.00 |

Finish Checkin | Show Detail | TOS Payments | Print

**Step 8: Optional: Press [F6 -- *TOS Payments*] and Post Copay**

If you collect copay payments during checkin, press **F6** to visit the Personal Payment screen.

Checkin - Personal Payment

Guarantor Fred Flinstone
10/23/07 Appointments

| Patient | Copay | Insurance | Visit Reason |
|---|---|---|---|
| Pebbles Flinstone | $ 20.00 | BCBS $20 Empire | Sick Call |

Total Copay: $ 20.00

Old Personal Bal: $ 30.00

Total Possible Bal: $ 50.00

| Date | Payment/Adjustment Type | Amount | Check # | Provider |
|---|---|---|---|---|
| 10/23/07 | Check | $ 50.00 | 434 | Casey |

Save Payment | New TOS Pmt | Balance Details

Enter the payment type, payment amount, and optionally a check number or provider.

Press [**F1** -- *Save Payment*] to save your payment and continue, or press **F12** to cancel and not enter a payment.

**Step 9: Press [F1 -- *Finish Checkin*]**

If you need to review any previous **checkin** steps, or you want to go back to a previous screen, just press **Page Up**. You can also press **F12** at any time during checkin to quit.

Press [**F1** -- *Finish Checkin*] from the Balance and Copay screen to finish checking in the patient. **checkin** will update the appointment's status to "Checked In," and you can select the next patient in line.

Now that you know how to check in a patient in Partner, read the sections below to learn about other tools and functions you can perform during checkin.

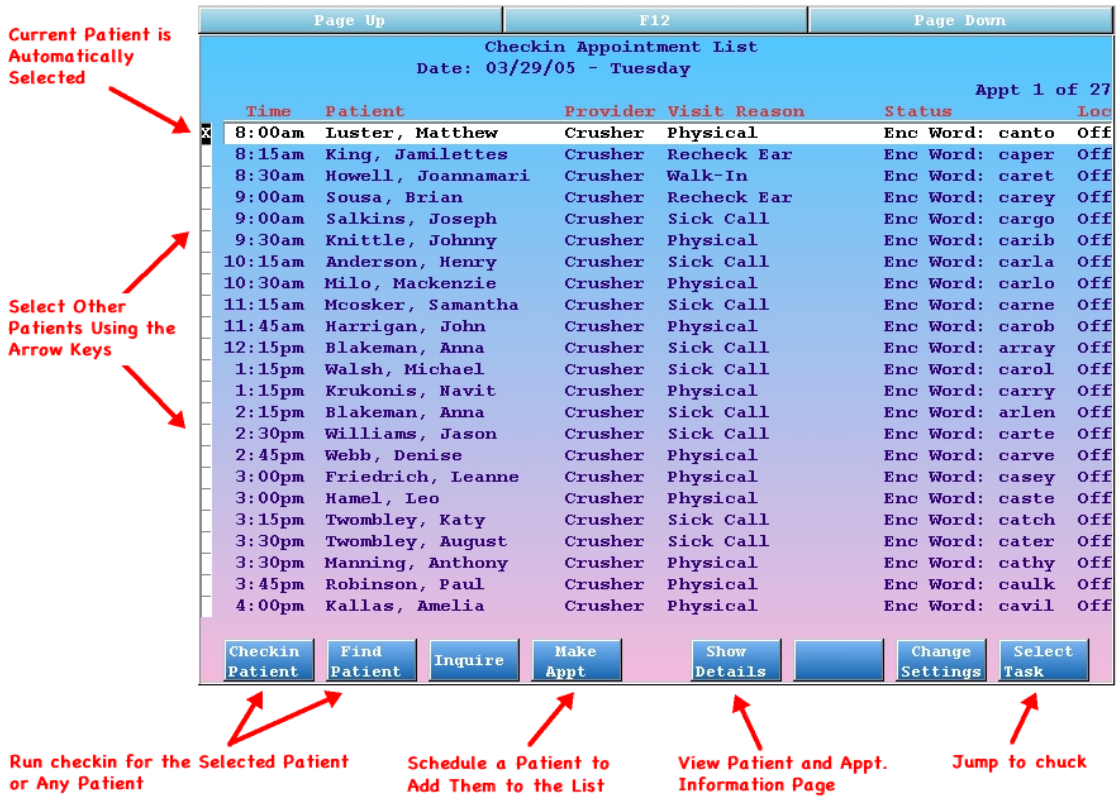
# 5.3. Checkin Screens

## 5.3.1 Appointment Lists in Checkin, Checkout and Nimms

Partner's **checkin**, **checkout**, and **nimms** programs have appointment lists that make selecting a patient fast and easy. Instead of typing in a patient's name, you can pick from a list of patient appointments. When you need to, you can skip the list and enter a name, but the appointment lists save time and reduce mistakes.

**Overview**

When you run **checkin**, **checkout**, or **nimms**, you see a customizable list of today's patients:

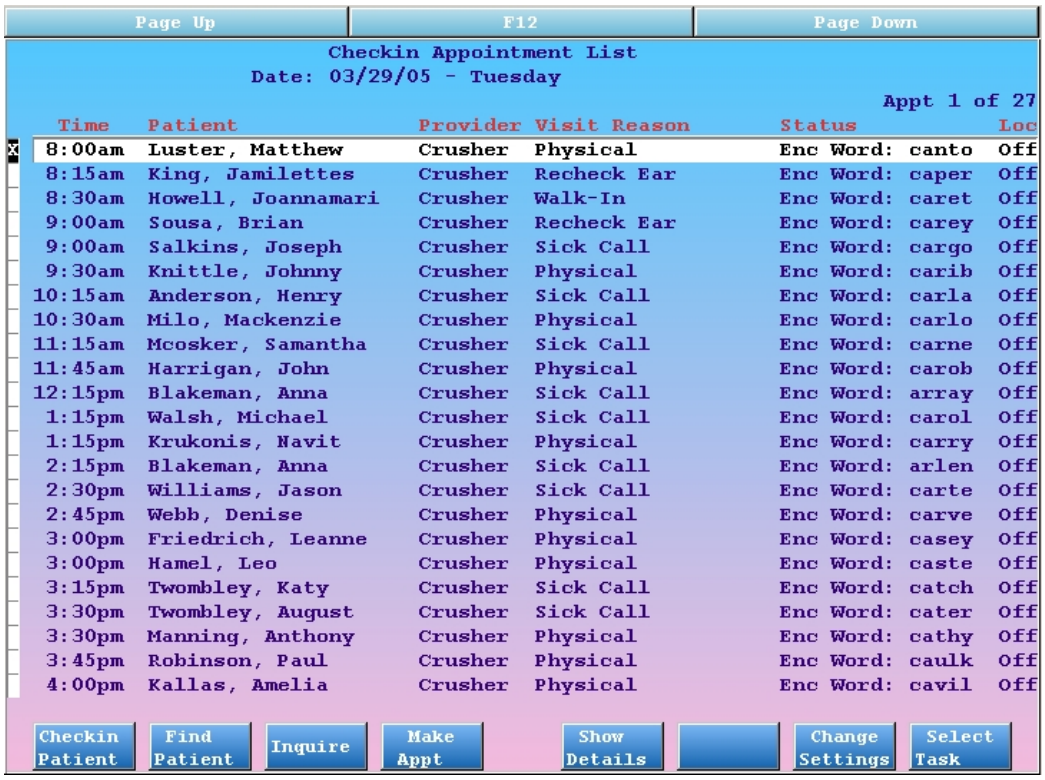



Basic visit information is included on the list, and you can quickly select a patient and press **F1** to continue. Function keys at the bottom of the screen help you find any patient or perform other important tasks.

By default, patients disappear from the Checkin Appointment List after they are checked in and disappear from the Checkout Appointment List (or Nimms list) when checked out. You can customize that behavior.

### Reviewing the Appointment List

When you run a program that uses an appointment list, such as **checkin**, Partner finds all the appointments that match certain criteria and creates a custom "Appointment List" for the program you are running.




| Time | Patient | Provider | Visit Reason | Status | Loc |
|---|---|---|---|---|---|
| 8:00am | Luster, Matthew | Crusher | Physical | Enc Word: canto | Off |
| 8:15am | King, Jamilettes | Crusher | Recheck Ear | Enc Word: caper | Off |
| 8:30am | Howell, Joannamari | Crusher | Walk-In | Enc Word: caret | Off |
| 9:00am | Sousa, Brian | Crusher | Recheck Ear | Enc Word: carey | Off |
| 9:00am | Salkins, Joseph | Crusher | Sick Call | Enc Word: cargo | Off |
| 9:30am | Knittle, Johnny | Crusher | Physical | Enc Word: carib | Off |
| 10:15am | Anderson, Henry | Crusher | Sick Call | Enc Word: carla | Off |
| 10:30am | Milo, Mackenzie | Crusher | Physical | Enc Word: carlo | Off |
| 11:15am | Mcosker, Samantha | Crusher | Sick Call | Enc Word: carne | Off |
| 11:45am | Harrigan, John | Crusher | Physical | Enc Word: carob | Off |
| 12:15pm | Blakeman, Anna | Crusher | Sick Call | Enc Word: array | Off |
| 1:15pm | Walsh, Michael | Crusher | Sick Call | Enc Word: carol | Off |
| 1:15pm | Krukonis, Navit | Crusher | Physical | Enc Word: carry | Off |
| 2:15pm | Blakeman, Anna | Crusher | Sick Call | Enc Word: arlen | Off |
| 2:30pm | Williams, Jason | Crusher | Sick Call | Enc Word: carte | Off |
| 2:45pm | Webb, Denise | Crusher | Physical | Enc Word: carve | Off |
| 3:00pm | Friedrich, Leanne | Crusher | Physical | Enc Word: casey | Off |
| 3:00pm | Hamel, Leo | Crusher | Physical | Enc Word: caste | Off |
| 3:15pm | Twombley, Katy | Crusher | Sick Call | Enc Word: catch | Off |
| 3:30pm | Twombley, August | Crusher | Sick Call | Enc Word: cater | Off |
| 3:30pm | Manning, Anthony | Crusher | Physical | Enc Word: cathy | Off |
| 3:45pm | Robinson, Paul | Crusher | Physical | Enc Word: caulk | Off |
| 4:00pm | Kallas, Amelia | Crusher | Physical | Enc Word: cavil | Off |

The list automatically scrolls to the current time. If it is two o'clock in the afternoon, the list will scroll to show patients who are scheduled for two o'clock.

Use the arrow keys or press **Page Up** and **Page Down** to scroll up and down and view the entire day. Press the right or left arrow key to move through the days. In this way, you can review appointment lists for any date, just as if you were flipping through a paper scheduling book.

Once you have chosen an appointment with which to work, press **F1** to continue working with the patient in the **checkin**, **checkout**, or **nimms** programs.

**Created in PCC EHR?** If an appointment was created in an EHR and not Partner, you will see "(EHR" appended to the status.

| Time | Patient | Provider | Visit Reason | Status | Loc |
|---|---|---|---|---|---|
| 11:00am | Case, Riley D. | Davidso | Sick Call | Enc: brian | Off |
| 11:10am | Flintstone, Dino | Crusher | Sick Call | Enc: allis (EHR) | Off |
| 11:15am | Hostettler, Amanda | William | Recheck | Enc: berne | Off |
| 11:15am | Yentsch, Eric | Davidso | Sick Call | Enc: breve | Off |
| 11:15am | Drescher, Reid | Casey | Recheck | Enc: bravo | Off |
| 11:30am | Hamann, Adam | Casey | 5yr Well Visit | Enc: boyar | Off |
| 12:00pm | Wagner, Makena | Davidso | Sick Call | Enc: brice | Off |
| 12:15pm | Daniels, Jordan J | Casey | Recheck | Enc: boyle | Off |
| 1:45pm | Spohn, Eryn | William | 6yr - 7yr Well Vi | Enc: bosom | Off |
| 2:15pm | Weiss, Jennifer S | Casey | 2wk Well Visit | Enc: bract | Off |
| 2:45pm | Firestone, Kelsey | William | Medication Follow | Enc: botch | Off |

## Can't Find an Appointment?

If you can't find an appointment, you can run the **inquire** program and check the patient's schedule. If you can't find the appointment in **checkout**, you might switch over and review the **checkin** program. By default,

appointments do not appear in **checkout** until they are checked in.

If the patient does not have an appointment, you can press F4 to schedule one. The patient will be added to your list, and (optionally) Partner will print an encounter form for the appointment.

If you wish to proceed without an appointment, press [**F2** -- *Find Patient*] to search by name or other criteria. Read *Finding Patients and Accounts* to learn more about finding patients.

**Extra Functions and Tools**

While you are choosing a patient to work with, you can perform many other useful functions.

[**F3** -- *Inquire*]

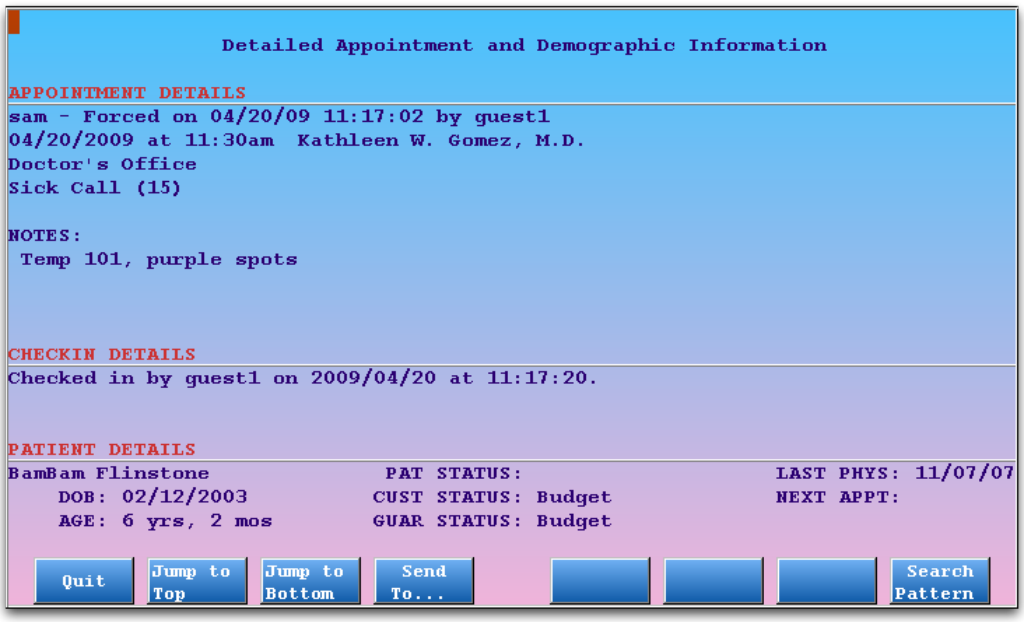
Press **F3** to run **inquire** for the currently selected patient. You can review the patient's visit history, change notes for the visit, and cancel, delete, or mark any appointment as missed.

[**F4** -- *Make Appt*]

Press **F4** to run **sam** and schedule any patient. You should do this for all "Walk-In" visits so they will have an encounter form and an appointment in your system. If your office does not use **sam**, **F4** can be configured to run **encount**.

[**F5** -- *Show Details*]

Select an appointment and press **F5** to view the Appointment and Demographic Information screen, which contains full details about the patient and the currently scheduled appointment:




[**F7** -- *Change Settings*]

Press **F7** to open the Settings window for the Appointment List. For a complete guide to configuring what appears on your appointment lists, read the Configure Appointment Lists article.

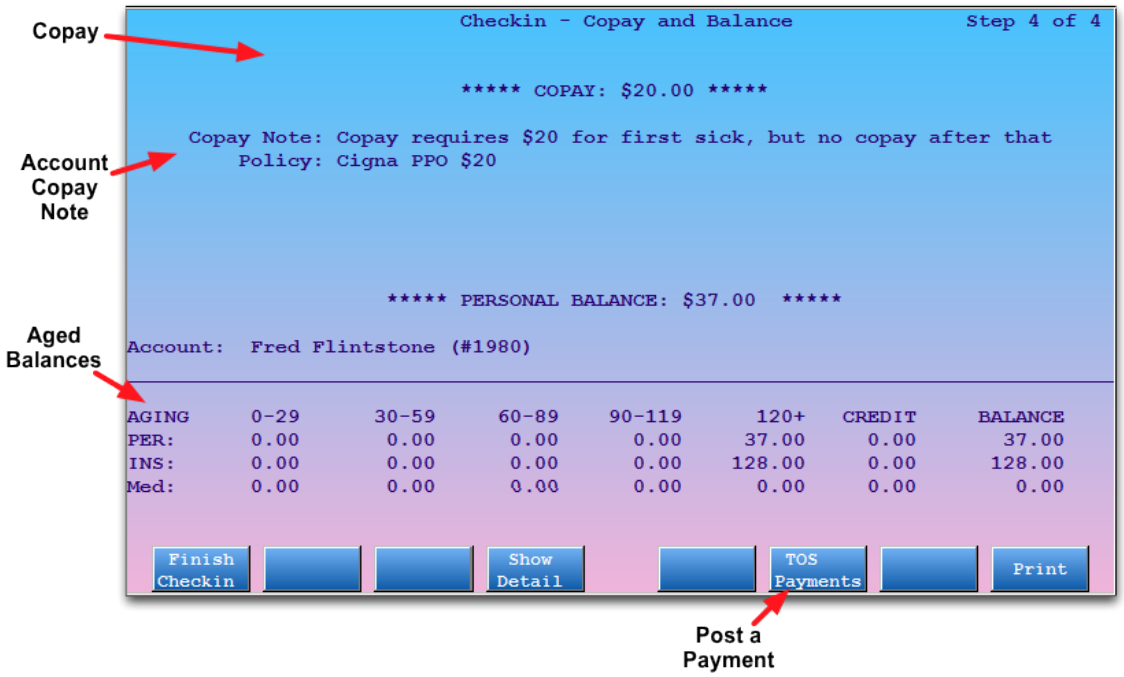
[**F8** -- *Select Task*]

Press **F8** to switch between patient check-in (**checkin**) and check-out (**checkout**). You can view a custom appointment list in both programs.

## 5.3.2 Demographics

The first screen in **checkin** shows demographic information and allows you to jump into other basic Partner programs. This screen is a great benefit to anyone using Partner, especially if they are at the front desk, answer phones, or need to use several different Partner programs with a patient at once.

### Reading the Demographics Screen




The Demographics screen shows the patient's name, age, primary care provider, sex, and status line as well as four customizable patient fields. The screen also includes the status line, address, and phone information for any family account(s) associated with the patient.

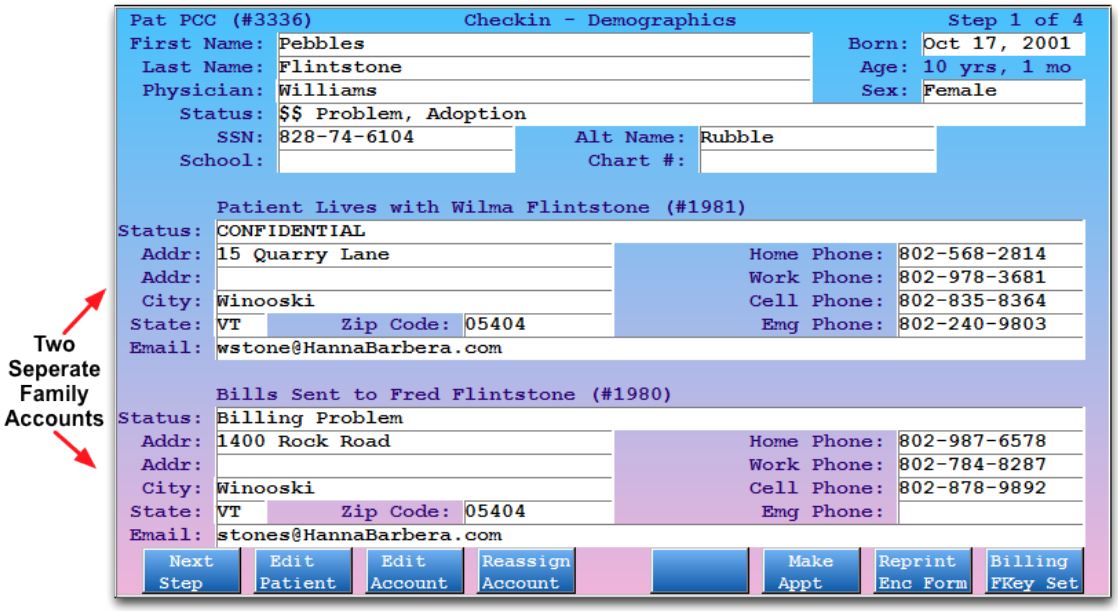
**Status Lines:** Status lines contain status flags that you can assign to patients or accounts. In the example above, Pebbles Flintstone has the status of "Medicaid" and "Needs Extra Time," and his guarantor (Fred Flintstone) has the status of "Budget." To see the list of statuses on your system, enter an asterisk (*) in any Status field. PCC can teach you how to create new status flags that will help your office identify certain patients or accounts.

Use the **Enter** and **Backspace** keys to move among the fields and make changes. Press **End** to erase the text after the cursor. In some fields, you can use an asterisk (*) to get a list of possible choices.

For example, if you learned that Pebbles Flintstone is really the patient of Dr. Crusher, you could press **Enter** until your cursor was in the Physician field, press **End** to erase Dr. McCoy's name, and then enter a "C" for Crusher.

**Get an Updated Encounter Form:** After changing important information about a patient, press [**F7** -- *Reprint Enc Form*] so the encounter form for the visit has the most up-to-date information. You may want to confirm insurance information on step two of **checkin** first.

**One or Two Families?** If your patient has only one family serving as both the guarantor and custodian, you will see only one family listed on this page. If the patient has one account as a custodian but a different account as a guarantor, you will see both accounts at the bottom of the screen. A two-account patient would look like this:




## Function Keys on the Demographics Screen

From this screen, you can jump into the patient or family editors (**notjane**, **fame**), assign the patient a new guarantor or custodian, or reprint the encounter form. You can also run many basic Partner programs, including scheduling, charge posting, and billing programs. Whatever task you jump into, you can always return to this screen by pressing **F12**. Read the function key descriptions below to learn more.

[**F1** -- *Next Step*]

Press **F1** (or **Page Down**) to continue the check-in process and move to the Insurance step. Any demographic changes will be saved.

[**F2** -- *Edit Patient*]

Press **F2** to run the Patient Editor (**notjane**) for the patient shown. From **notjane** you can view and edit immunization information, run reports on the patient's diagnosis and procedure history, and perform other patient related functions.

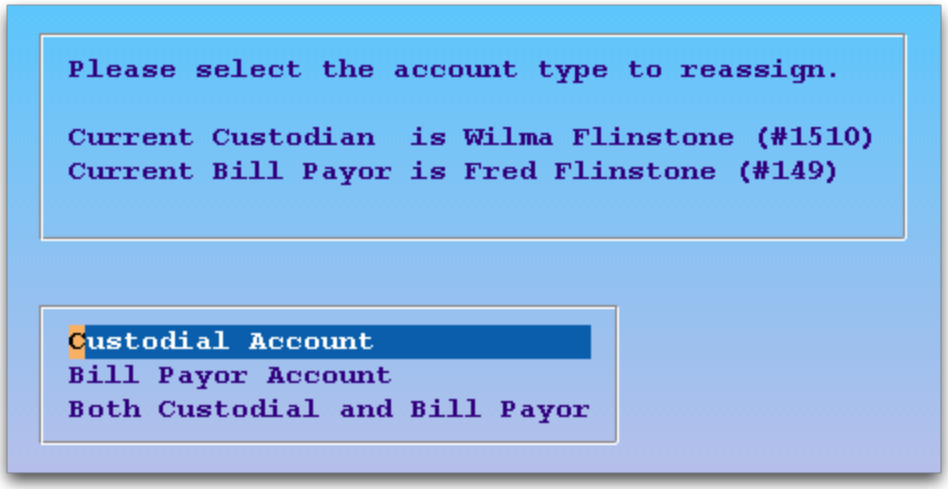
[**F3** -- *Edit Account*]

Press **F3** to run the Family Editor (**fame**) for the guarantor or custodian of the patient. If the patient has two different accounts as custodian and guarantor, Partner will ask you which account you wish to edit.

In **fame** you can review and revise complete account information, run various reports on the billing history, and perform other account-specific actions.

[**F4** -- *Reassign Account*]

Press **F4** to *change* the child's custodian or guarantor account. You will see the following:




After making your selection, Partner will ask you to find the new custodian or billing account. If the account is not in your system yet, you can add it immediately.

[**F5** -- *CUSTOMIZABLE*]

The **F5** key can be set to any tool or function in Partner. For example, if your office uses the Phone Encounter Note (**pen**) program, PCC can change **F5** so that it runs **pen** for the current patient.

[**F6** -- *Make Appt*]

Press **F6** to run **sam**, the Partner scheduler. If your office does not use **sam**, or you need a function key for generating instant encounter forms, PCC can configure **F6** to run **encount** instead.

[**F7** -- *Reprint Enc Form*]

Press **F7** to print an encounter form for the appointment. Encounter forms are generally printed a day or more in advance of a visit, but if you have changed the patient's name or other important information, you may want to reprint the encounter form.

[**F8** -- *Billing FKey Set*]

Press **F8** to change the function keys on the screen to billing-related programs. **checkin** is a great program for a biller who needs to hop among programs such as **oops**, **pip**, and **checkout** while still viewing important demographic information.

The new function keys that will appear look like this:

[**F1** -- *Next Step*]

Press **F1** to save any changes and move to the Insurance page.

[**F2** -- *Correct Mistakes*]

Press **F2** to run the **oops** program, where you can modify previously posted charges and fix

mistakes.

[**F3** -- *Post Charges*]

Press **F3** to run the **checkout** program and post charges.

[**F4** -- *Post Ins Payments*]

Press **F4** to run the **pip** program and post insurance payments or adjustments.

[**F5** -- *Post Reg Payments*]

Press **F5** to run the **pam** program and post personal payments or adjustments.

[**F6** -- *Form Letters*]

Press **F6** to open the form letter screen for patients. You can generate an excuse letter or another patient form.

[**F7** -- *Refund*]

Press **F7** to run the **refund** program and post refunds or adjustments.

[**F8** -- *Checkin FKey Set*]

Press **F8** to switch the function keys back to the standard set for this screen.

[**Page Down**] and [**Page Up**]

Press **Page Down** to continue to the Additional Demographics screen. Press **Page Up** to go backward to the Balance and Copay screen. All changes on this page will be saved. If you do not wish to save changes, you should press **F12**.

### 5.3.3 Additional Demographics

The second screen in **checkin** shows extra demographic information and allows you to jump into other basic Partner programs.

**Updating Additional Demographics**

In addition to Name, date of birth, primary care physician, sex, and status, the screen includes race and ethnicity, preferred language, and confidential contact preferences.

Pat PCC (#3336) Checkin - Additional Demographics Step 2 of 5

First Name: Pebbles
Born: Jan 12, 2002
Last Name: Flintstone
Age: 10 years
Physician: Mark Williams, M.D.
Sex: Female
Status: $$ Problem, Adoption

Ethnicity: Not Hispanic or Latino
Race: White

Preferred Language: English
Other Language:
Other Language:

Patient Confidential Communication Preference:

Contact Name:
Method:
- Mailing Address
- Cell Phone
- Work Phone
- Home Phone
- Text
- E-mail
- X No Preference (Custodial Name and Mailing Addr. will be used.)

Next Step | Edit Policies | Imms Record | Patient History | Patient Forms

Use the **Enter** and **Backspace** keys to move among the fields and make changes. Press **End** to erase the text after the cursor.

In some fields, you can use an asterisk (*) to get a list of possible choices.

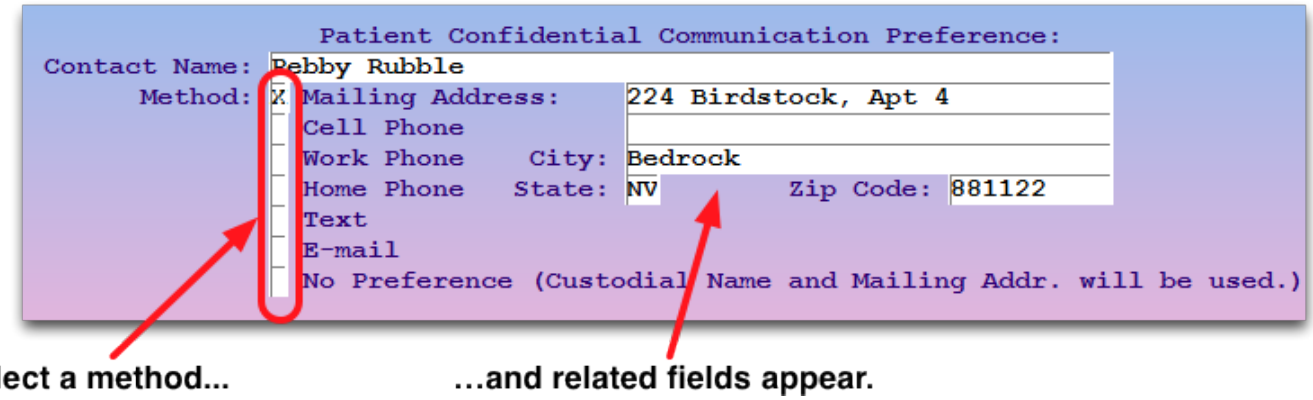
Preferred Language: English
Other Language: So*
Other Language:

Somali
South Ndebele
Southern Sotho

Preferred Language: English
Other Language: Somali
Other Language:

You may only select a single Confidential Communication Preference. Once selected, fields particular for that selection will appear.

For example, if the patient has a private address distinct from their parents, you can select Mailing Address and enter that new address.




**Why Track This Information?** Race and ethnicity, language, and confidential communication preferences help your practice in several ways.

- You can use the communication preferences to work directly with patients on confidential issues or on the maintenance of medical concerns that are their own responsibility.
- You can use any of these fields on form letters.
- You can limit some SRS reports by these fields.
- You can use the Patient Recaller (**recaller**) to calculate patient population numbers, generate patient lists, or generate mailings for a certain demographic based on a set of criteria.
- These fields are related to both the ARRA incentive and PCMH programs.

**Ethnicity, Race, and Language Lists:** The Ethnicity, Race, and Language fields are limited to values accepted by the ARRA Meaningful Use standard. You may enter more than one race by using a comma between entries.

**Configuration Options:** These fields appear in both the Patient Editor (**notjane**) and Patient Checkin (**checkin**). You can use the Configuration Editor (**ced**) to hide the Confidential Communication Preferences from **checkin** if your office does not collect this information and the fields distract from your checkin workflow.

### Function Keys on the Additional Demographics Screen

From this screen, you can jump into the Edit Policies (**policy**) program, the patient's immunization record (**imms**), the Patient History program (**patinfo**) and the list of patient form letters. Whatever task you jump into, you can always return to this screen by pressing **F12**. Read the function key descriptions below to learn more.

[**F1** -- *Next Step*]

Press **F1** (or **Page Down**) to continue the check-in process and move to the Insurance step. Any demographic changes will be saved.

[**F2** -- *Edit Policy*]

Press **F2** to run Edit Policies (**policy**) for the patient shown. From **policy** you can review and update the

patient's insurance policies.

[**F3** -- *Imms Record*]

Press **F3** to run the Immunization History (**imms**) for the patient. You can review and update immunization history, or generate an automatic school form.

[**F5** -- *Patient History*]

Press **F5** to run Patient History (patinfo) for the patient. You can review a history of a patient's diagnoses, organized by visit date or by frequency of billed diagnosis.

[**F6** -- *Patient Forms*]

Press **F6** to jump directly to the form letter generator found in the Patient Editor (notjane). You can generate any of your custom patient form letters for this patient.

[**Page Down**] and [**Page Up**]

Press **Page Down** to continue to the Insurance screens. Press **Page Up** to go backward to the Demographics screen. All changes on this page will be saved. If you do not wish to save changes, you should press **F12**.

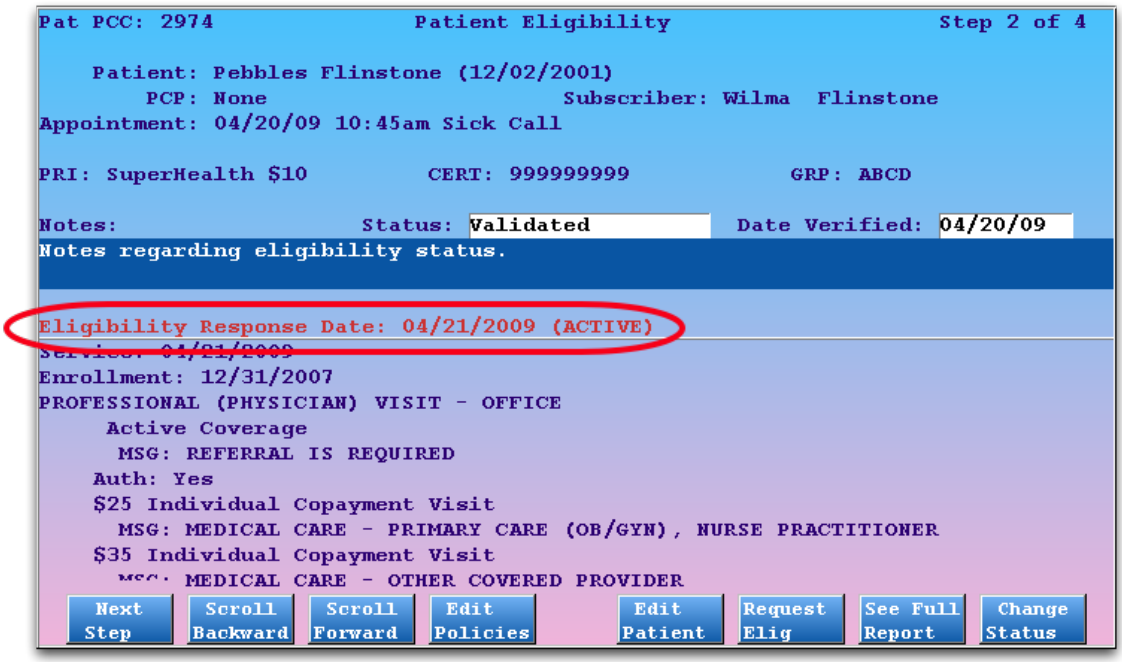
## 5.3.4 Eligibility Screen

The Eligibility page, which appears in **checkin** when the patient has an appointment, displays the patient's primary insurance policy and the most recent visit eligibility information.

You can review and edit status and notes about eligibility for the appointment, review the Partner-summarized eligibility report (if available), or send a request for information to the insurance carrier (if participating).

### Reading the Eligibility Screen

The eligibility step in **checkin** looks like this:



The top of the screen shows patient and policy information, the middle shows fields for entering status, date, and notes, and the bottom of the screen shows Partner's summary of information sent by the insurance carrier. The date of the most recent eligibility request, along with Active/Inactive status, appears in red.

After reviewing the eligibility information on the screen or using function keys to gather more information, you may update the status, date, or notes and press **F1** or **Page Down** to continue to the next step.

**Updating the Information:** If a patient's primary policy changes, you can request a new eligibility report by pressing [**F6** - *Request Elig*]. If you would like Partner to *automatically* request a new eligibility report whenever a patient's primary policy changes, ask PCC Support to activate that feature.

**Function Keys on the Eligibility Screen**

[**F1** -- *Save, Next Step*]

Press **F1** to save your changes. If you are viewing the Patient Eligibility screen in **checkin**, you will continue to the next step in the checkin process.

[**F2** -- *Scroll Backward*], [**F3** -- *Scroll Forward*]

If the eligibility details extend below the screen, press **F2** and **F3** to scroll that portion of the screen.

[**F4** -- *Edit Policies*]

Press **F4** to visit the patient's policy screen, where you may review or edit their insurance policies.

[**F5** -- *Edit Patient*]

Press **F5** to visit the Patient Editor (**notjane**). Press **F7** from **notjane** to edit the account.

[**F6** -- *Request Elig*]

Press **F6** to check eligibility. If the patient's primary insurance allows automatic eligibility requests, Partner will perform the check and update the eligibility information on the screen.

[**F7** -- *See Full Report*]

The screen includes a summary of the carrier's eligibility report. To view the report, press **F7**.

[**F8** -- *Change Status*]

Press **F8** to jump down to the Status field.

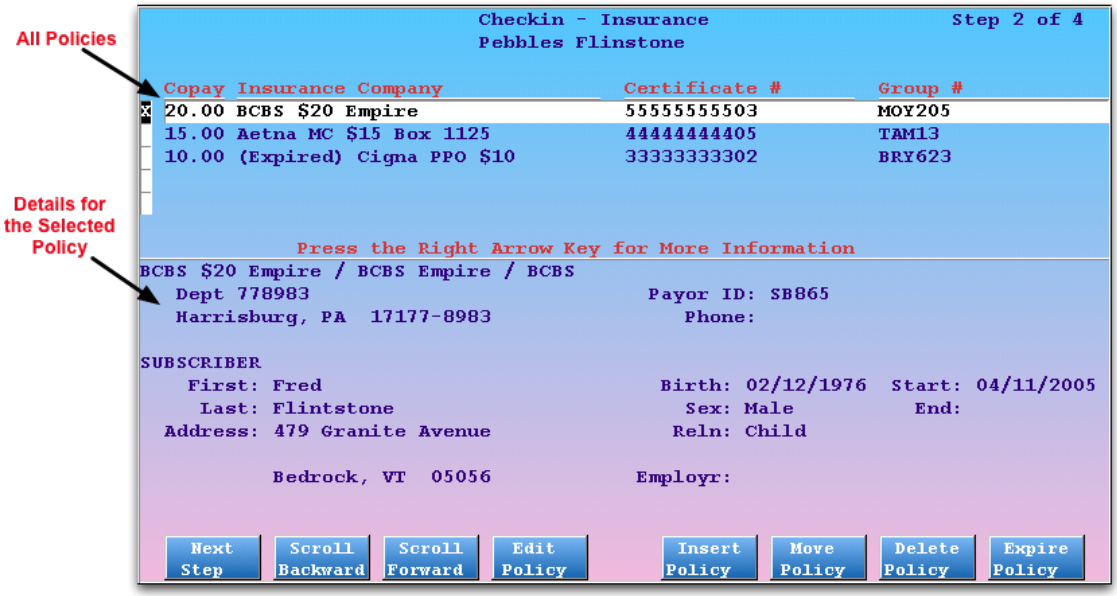
## 5.3.5 Policy Screen

The Insurance page shows you a list of all insurance policies associated with the patient. You can review a patient's active and expired policies. You can edit, add, move, delete, or expire any policy.

**Insurance Policy Manual:** For a complete guide to the insurance policy screen in Partner, read *Managing Insurance Policies*. A brief description of the page and how to use it is below.

**Reading the Insurance Screen**

The second page of **checkin** looks like this:




At the top of the screen is a list of all insurance policies for this patient. The list shows the copay, company name, and certificate and group numbers. Complete details about the selected policy are shown at the bottom of the screen.

Use the arrow keys to select a policy on the screen. Once you have selected a policy, full details appear at the bottom of the screen. You can then use the function keys to make changes to the selected policy or insert a new policy above it.

If a family has a long history of changing policies, you can use [**F2** -- *Scroll Backward*] and [**F3** -- *Scroll Forward*] to view the rest of the policies.

**Function Keys on the Insurance Screen**

From this screen you can edit, add, move, delete, or expire insurance policies on the patient's guarantor account.

[**F1** -- *Next Step*]

Press **F1** to save any changes and move on to the Balance and Copay page.

[**F2** -- *Scroll Backward*] and [**F3** -- *Scroll Forward*]

Press **F2** and **F3** to move up and down through a large list of insurance policies. Normally you can use the arrow keys to move among the listed policies, but if the account has more old policies than will fit on the screen, you can use **F2** and **F3** to scroll through the list.

[**F4** -- *Edit Policy*]

Press **F4** to edit the currently selected insurance policy. The bottom section of the screen will shift to show you fields for editing the policy.

[**F5** -- *Insert Policy*]

Press **F5** and follow the prompts on the screen to insert a new insurance policy. While adding a policy,

you will see options for copying a recently edited policy from a family member and for inserting the new policy to all family members.

[**F6** -- *Move Policy*]

Press **F6** to move the currently selected policy up or down within the list of policies. Expired policies will still auto-sort below active policies, but you can control which active policy is primary or secondary.

[**F7** -- *Delete Policy*]

If you created a new policy by mistake, you can press **F7** to delete it. You will be shown a confirmation screen to make certain you really wish to erase the plan from the account's records.

[**F8** -- *Expire Policy*]

Press **F8** to expire the selected policy. The screen will switch to allow editing, and the cursor will move to the "End" date field. After expiring a policy, the screen will offer to expire the same policy for patients who share a guarantor with the current patient.

[**Page Down**] and [**Page Up**]

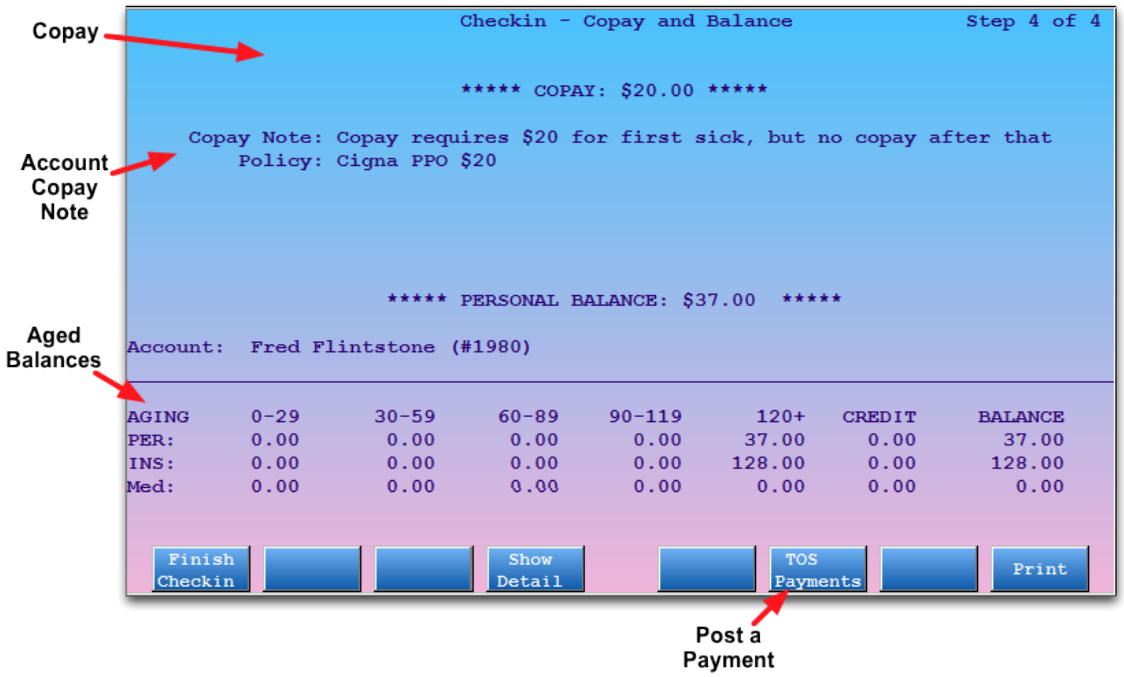
Press **Page Down** to continue to the Balance and Copay screen. Press **Page Up** to go backward to the Demographics screen. All changes on this page will be saved. If you do not wish to save changes, you should press **F12**.

## 5.3.6 Balance and Copay

The Balance and Copay screen shows the expected copay, an aging summary of outstanding balances, and any available eligibility information for the patient. Function keys provide access to additional information and a tool for posting a copay payment.

### Reading the Balance and Copay Screen

The third step of **checkin** looks like this:



The guarantor account name and PCC number appear at the top of the screen. The guarantor for the account is usually a parent, but could also be an organization or the patient herself. The account shown is responsible for the patient's bills; if you need to change the Guarantor account, press **Page Down** to return to the first page of **checkin** (Demographics) and press [**F4** -- *Reassign Account*]. See the Demographics section for more information.

In the main viewing window of the Balance and Copay screen, Partner shows:

- **Copay Amount:** This is the expected copay for the patient's primary insurance policy. It may be a new insurance policy, or it may expire tomorrow, but the amount is the patient's *current* copay. Some insurance companies have special copay rules for sick and well visits; the copay listed is the default copay for the patient's primary insurance plan.
- **Policy:** The insurance policy from which the copay information is drawn.
- **Copay Note:** The guarantor account's Copay Note, stored in the Family Editor (**fame**). This note will only be shown if the insurance policy in question requires a copay.
- **Aging Balance Totals:** Underneath the copay is a brief aging balance summary for the account. You can see outstanding balance amounts that are Personal (to the account holder), pending one or more insurance companies, or pending your default Medicaid company. The balances are aged into 30-day categories. Amounts are aged by payor responsibility, which means that old balances that just recently became personal will be under the 0-29 day column in the Personal line.

**Function Keys on the Balance and Copay Screen**

[**F1** -- *Finish Checkin*]

Press [**F1**] to complete the patient check in. Partner will set the patient's visit status to "Checked In" and inform any EHR or EMR that the patient has arrived.

[**F4** -- *Show Detail*]

Press **F4** to run the Collection Report (**coll**) and review a summary of the family's outstanding balances. For more information, read the Collection Report manual.

[**F5** -- *CUSTOMIZABLE*]

If your staff frequently needs to run a specific program or report when they are finished checking in a patient, you can add a function key for that program on this screen. The **F5** key is customizable and can be configured through the "Patient Check In" section of the Configuration Editor (**ced**). Call PCC support at 1-800-722-1082 for assistance.

[**F6** -- *TOS Payments*]

Press **F6** to visit the Personal Payment screen and post a time-of-service payment. See the section below for more information.

[**F8** -- *Print*]

Press **F8** to print the contents of the display window, consisting of the copay, aging balance chart, and

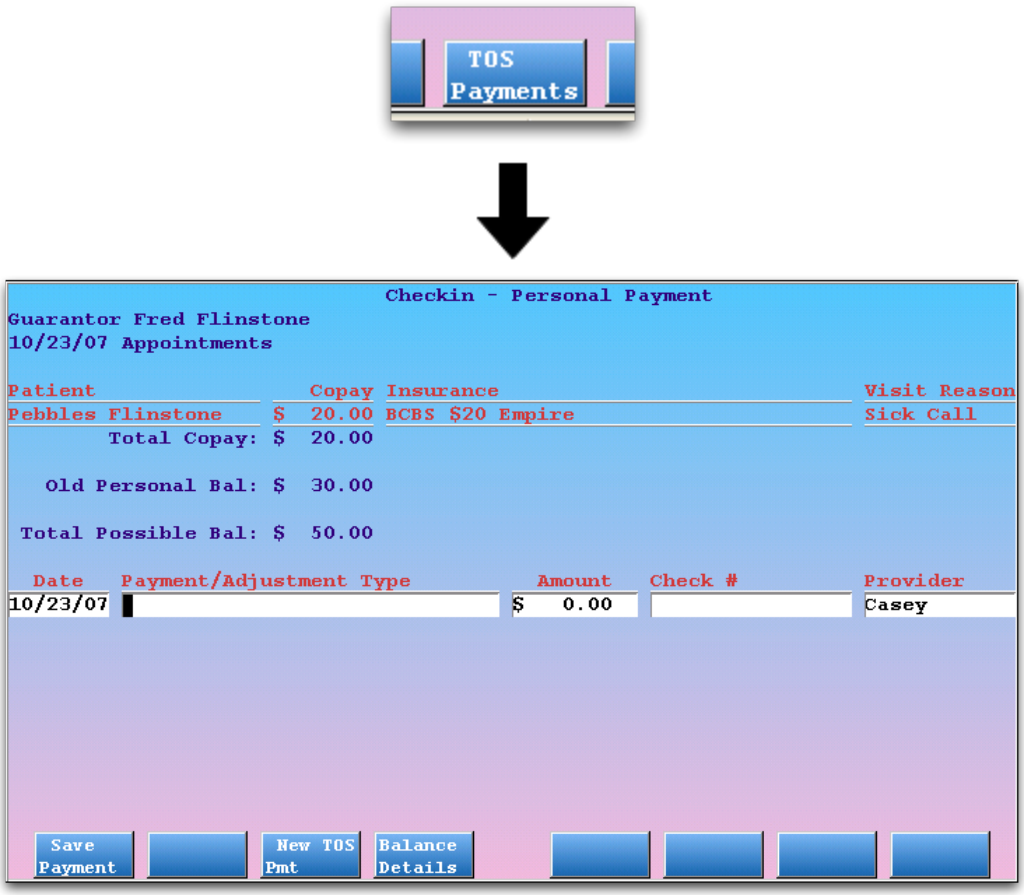
eligibility information.

## 5.4. Post a Copay or Other Payment During Checkin

Use the Personal Payment screen in **checkin** to post a copay or other payment received during checkin.

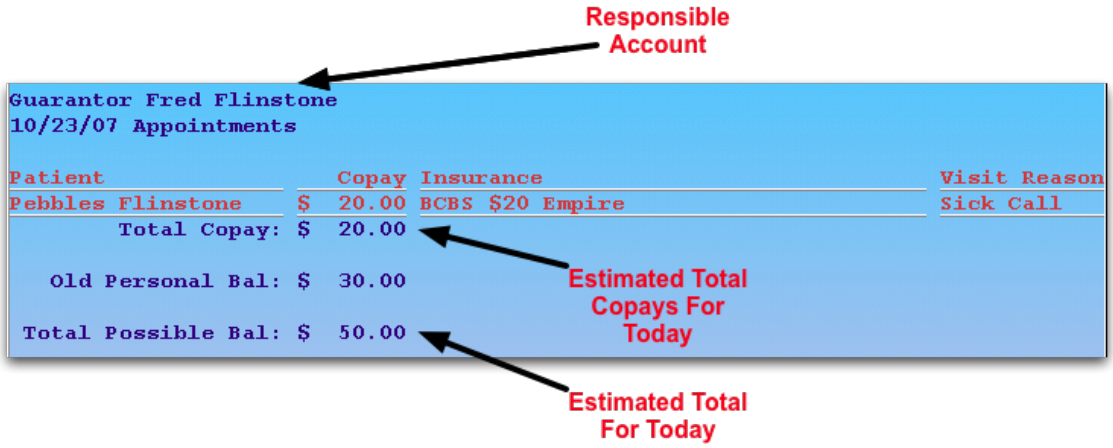
### Step 1: Open the Personal Payment Screen

Press [**F6** -- *TOS Payments*] from the Checkin Appointment List or from the third page of the **checkin** program to open the Personal Payment screen:




### Step 2: Review Visit Information

The guarantor for the current patient is shown at the top of the screen, along with details about each patient visiting. You may see one patient or several siblings.

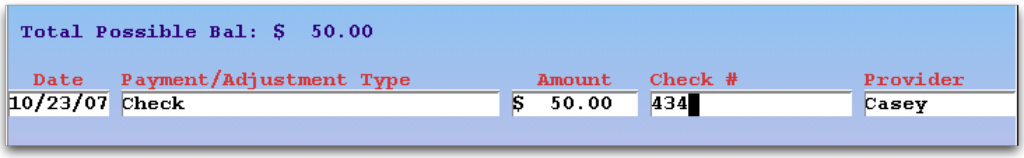



The Copay and Insurance columns indicate the expected copay for the visit. If several patients with the same account have appointments, you will see multiple patients and the total copay amount. Confirm this information with the patient or guardian visiting the practice.

**Old Personal Balance:** The screen also displays the account's personal balance. While the screen is designed for posting a copay, you may post a payment towards the old balance. To research the charges, press [**F4** -- *Balance Details*] to run the Collection Report.

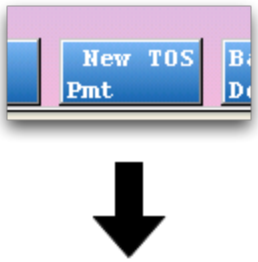
### Step 3: Enter Date, Payment/Adjustment Type, Amount, Check #, and Provider

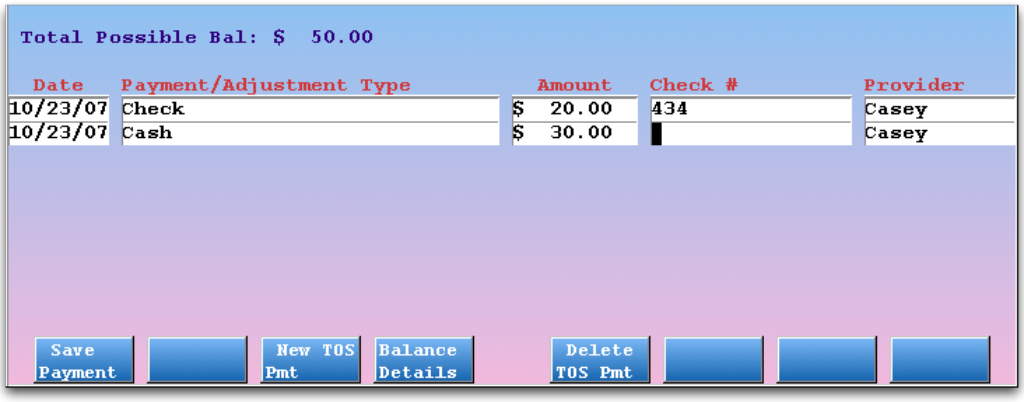
Enter payment details in the appropriate fields. Use **Enter** and **Backspace** to move among the fields.




### Step 4: Optional: Press [F3 -- *New TOS Pmt*]

Press **F3** to add an additional payment. If the payment consists of two or more checks or cash payments, use **F3** to add new lines.






If you need to remove a line, use the arrow keys to select it and press [**F5** -- *Delete TOS Pmt*].

**Step 5: Press [F1 -- *Save Payment*]**

Press **F1** to save the payment. If your practice prints receipts, one will be generated immediately.

# 5.5. Review Checkin Status: Who Checked a Patient In?

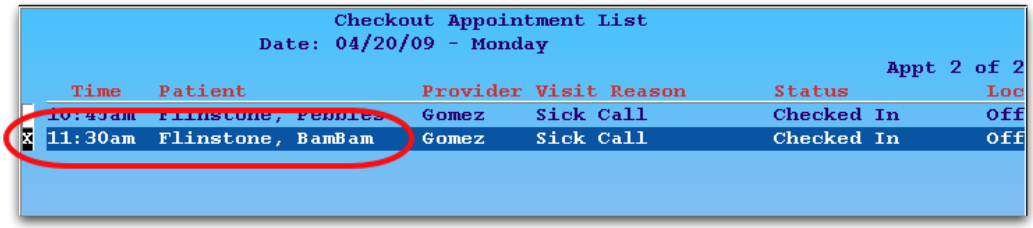
When a patient is checked in, Partner records the time of checkin, the user who checked them in, and the office location. You can view that information using [**F5** -- *Show Details*] in **checkout**.

**Step 1: Run Checkout**

Run the **checkout** program. You can run **checkout** from the Daily Operations window.

**Step 2: Select the Appointment**

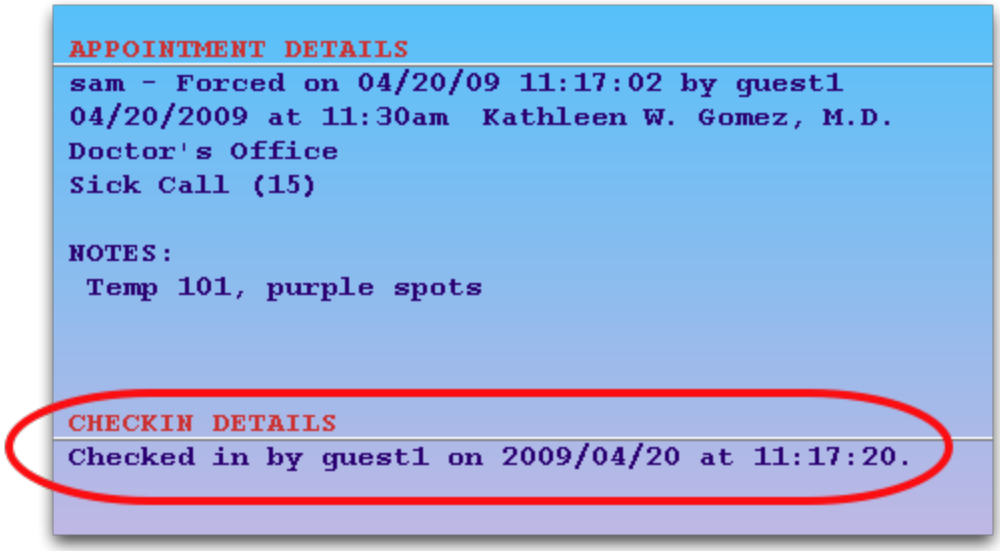
Use the arrow keys to select an appointment.




**Step 3: Press [F5 -- *Show Details*]**

**Step 4: Review Appointment and Checkin Information**

The Detailed Appointment and Demographic Information screen shows patient information as well as the time the patient was checked in and who checked them in.




**Tip:** The details screen also displays useful account information. Press **Page Down** to see more.

Press **F12** to return to the **checkout** appointment list.

# 6. Checkout Patients

## 6.1. Introduction: The Patient Checkout Process

Partner's **checkout** program, also called "**chuck**," can post charges and check out a patient in seconds. At the end of a patient visit, a medical office must record and bill the services performed by the provider. While this happens, the office may collect and record a payment, schedule a return visit, and sometimes collect other information from the patient or family. In **checkout**, you can quickly perform all of these tasks while giving care and attention to the customer.

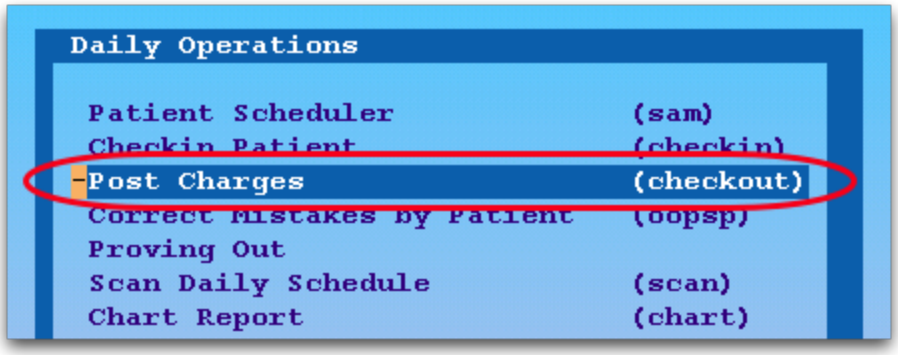
**Your Experience May Differ:** The **checkout** program is very customizable. Your practice can rearrange the order of the screens and customize the procedures and diagnoses that appear for different visit reasons. Your office's configuration will be different from the examples shown below.

## 6.2. Quickstart: Post Charges and Check Out a Patient

This section will walk you through a basic checkout procedure.

**Step 1: Run Post Charges (checkout)**

You can run the **checkout** program from your Partner windows.




You can also type **checkout** or **chuck** at a command prompt.

**Step 2: Select an Appointment, Press F1**

Just as the **checkin** program provides a list of today's appointments, the **checkout** program displays a list of patients waiting to be checked out:

Checkout Appointment List
Date: 11/01/07 - Thursday

Appt 6 of 7

| Time | Patient | Provider | Visit Reason | Status | Loc |
|---|---|---|---|---|---|
| 9:45am | Lasch, David | Casey | 8yr - 9yr Well Vi | Enc Needed | Off |
| 10:00am | Ludwig, Christophe | William | 4mo Well Visit | Enc Needed | Off |
| 11:15am | Sim, B | William | Asthma Recheck | Enc Needed | Off |
| 11:30am | Doerr, Nicole | Casey | 3yr Well Visit | Enc Needed | Off |
| 2:00pm | Rubendall, Rebecca | Casey | Sick Call | Enc: allis | Off |
| 3:00pm | Flinstone, Pebbles | Casey | Sick Call | Checked In | Off |
| 3:30pm | Rubendall, John | Office | Allergy Injection | Enc Needed | Off |

Post Charges | Find Patient | Inquire | Make Appt | Show Details | | Change Settings | Select Task

Use the arrow keys to select a patient and then press [**F1** -- *Post Charges*]. To learn more about the patient selection screen in Partner, read *Appointment Lists*.

**Can't Find the Patient?** If a clinician created a new appointment in PCC EHR, it may have missed your usual **checkin** procedure. Press **F8** to switch over to **checkin** to see any appointments that were not checked in. If no visit is available, you can press [**F2** -- *Find Patient*] to post charges for any patient on your system.

### Step 3: Review Insurance Notes and Copay, Other Messages

As soon as you select or find a patient, **checkout** will tell you the patient's insurance information, expected copay, and any copay note your practice added for the family:

```
* * * * * * * * * * * * * * * * *

I am obligated to inform you that Pebbles is covered
by BCBS $20 Empire, which requires
a $  20.00   co-payment at the time of service.

- - - - - - - - - - - - - - - - - - - - - - - - -

The Flinstones sneak out without paying their
copay!

* * * * * * * * * * * * * * * * *

Press <ENTER> to continue:
```

Press **Enter** to continue.

If your practice uses an EHR, and a clinician did not select a billing code for a diagnosis description, you may be prompted to choose the billing code before proceeding.

Checkout - Billing Diagnosis Mapping

PATIENT: Daniel Gray
VISIT DATE: 11/14/13
VISIT REASON: Sick Call

There are charted diagnoses that require a billing diagnosis to be assigned.

| Charted Diagnosis | Billing Diagnosis |
|---|---|
| Closed multiple fractures of both upper | |

Next Step

## Step 4: Check Demographic Information

Next, review and update patient and family information on the Demographics screen.

Pat PCC (#2974) Checkout - Demographics Step 1 of 4

First Name: Pebbles
Last Name: Flinstone
Physician:
Status: Medicaid, Needs Extra Time
Born: Dec 2, 2001
Age: 5 yrs, 10 mos
Sex: Female

SSN: 888-88-8888
School: Bedrock Elementary
Alt Name: Rubble
Chart #: 09533

Patient Lives with Wilma Flinstone (#1510)
Status:
Addr: 1862 Milky Way
Addr:
City: Winooski
State VT Zip Code: 05404
Home Phone: 802-987-6578
Work Phone: 802-784-8287
Cell Phone: 802-878-9892
Emg Phone:

Bills Sent to Fred Flinstone (#149)
Status: Budget
Addr: 479 Granite Avenue
Addr:
City: Bedrock
State: VT Zip Code: 05056
Home Phone: 800-722-1370
Work Phone: 800-722-1082
Cell Phone: 800-722-1082
Emg Phone: 802-722-1082

Next Step | Edit Patient | Edit Account | Reassign Account | Make Appt | Reprint Enc Form | Billing FKey Set

Press [**F1** -- *Next Step*] or **Page Down** to continue.

## Step 5: Check Insurance Information

Next, verify and update patient policies on the Policies screen. You should always confirm the patient's primary insurance before posting new charges.

Checkout - Policies  Step 2 of 4
Pebbles Flinstone

| Copay | Insurance Company | Certificate # | Group # |
|---|---|---|---|
| 20.00 | BCBS $20 Empire | 55555555503 | MOY205 |
| 15.00 | Aetna MC $15 Box 1125 | 44444444405 | TAM13 |
| 10.00 | (Expired) Cigna PPO $10 | 33333333302 | BRY623 |

Press the Right Arrow Key for More Information

BCBS $20 Empire / BCBS Empire / BCBS
Dept 778983
Harrisburg, PA 17177-8983
Payor ID: SB865
Phone:

SUBSCRIBER
First: Fred
Last: Flintstone
Address: 479 Granite Avenue
Bedrock, VT 05056
Birth: 02/12/1976
Sex: Male
Reln: Child
Employr:
Start: 04/11/2005
End:

Next Step | Scroll Backward | Scroll Forward | Edit Policy | Insert Policy | Move Policy | Delete Policy | Expire Policy

Press [**F1** -- *Next Step*] or **Page Down** to continue.

## Step 6: Post Procedures and Diagnoses

Next, enter procedures and diagnoses from the visit. The most common procedures and diagnoses for the scheduled visit reason appear for you to select.

Checkout - Post Charges  Step 3 of 4

PATIENT: Pebbles Flinstone
VISIT DATE: November 1, 2007
VISIT REASON: Sick Call
PHYSICIAN: Dr. Casey
BILLING: Dr. Casey
POS: Office

| | Diagnosis Name | | Procedure Name | # | Dx Code | CPT Code | Charge |
|---|---|---|---|---|---|---|---|
| a | Otitis Media Acute | | OV Problem Focuse | | | | |
| bx | Otitis Media Serous | be | OV Expanded Focus | 1 | 381.04 | 99213 | $ 56.00 |
| c | Sinusitis Acute | | OV Detailed H&E | | | | |
| d | Tonsillitis | | OV Comprehensive | | | | |
| ex | Cough | | Spirometry Simple | | | | |
| f | Viral Syndrome | | Spirometry Bronch | | | | |
| g | Bronchitis | | Tympanometry | | | | |
| h | Purulent Nasal Disch | e | Rapid Strep Scree | 1 | 786.2 | 87880 | $ 27.00 |
| i | Pharyngitis | | OV Sunday/Holiday | | | | |
| j | URI | | OV Saturday Diffe | | | | |
| k | | | | | | | |
| l | | | | | | | |
| m | | | | | | | |
| n | | | | | | | |
| o | | | | | | | |
| p | | | | | | | |

Discount Total: $ 0.00
Capitation Adjust: $ 0.00
This Visit: $ 83.00

Next Step | Copay _ Discount | | Hospital Details | Claim Info | | | Patient Schedule

Press **Tab** or **Enter** to move among the fields. You can use an asterisk (*) to search in any field. Mark each diagnosis with an **X**. Mark each procedure with the letter of the diagnosis to which it should be linked. You can also change the date, provider, location, and visit reason if necessary.

**EHR:** If your practice uses an EHR, the screen may be filled out for you. Review the entries for accuracy before continuing. Depending on the EHR interface, you may wish to update codes, linking, units, add supply codes, or perform functions on the Claim Info screen.

**Perform Other Special Visit Functions.** If you need to change the copay, enter a discount, enter hospital dates, or enter special claim information, there are function keys on the Post Charges screen for each of those tasks.

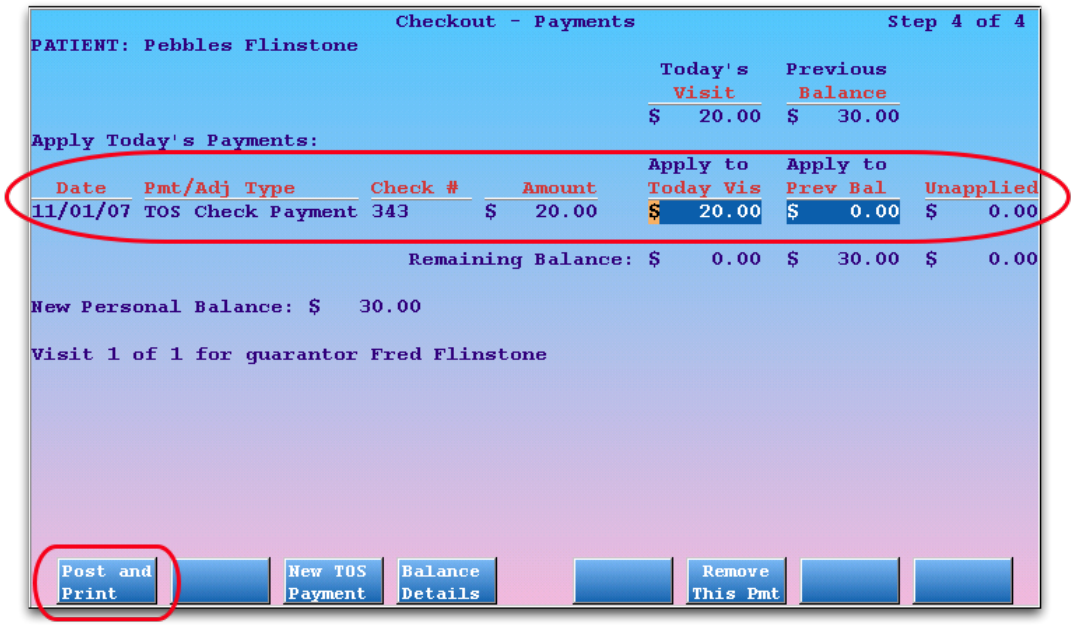
**Snap Codes:** Your office can setup Snap Codes which automatically enter procedures and diagnoses and select them for you. For more information, read the Snap Codes guide.

### Step 7: Press [F1 - *Next Step*]

When you are finished entering diagnoses and procedures, press **F1** or **Page Down** to continue.

### Step 8: Post Today's Payment

Enter payment information on the Payments screen. You can apply a payment collected during **checkin** or add new payments.




The Payments screen displays how much is due for today's visit and how much is due from a previous balance. If a payment was collected during **checkin**, you should review and confirm the amount and make sure it is applied correctly.

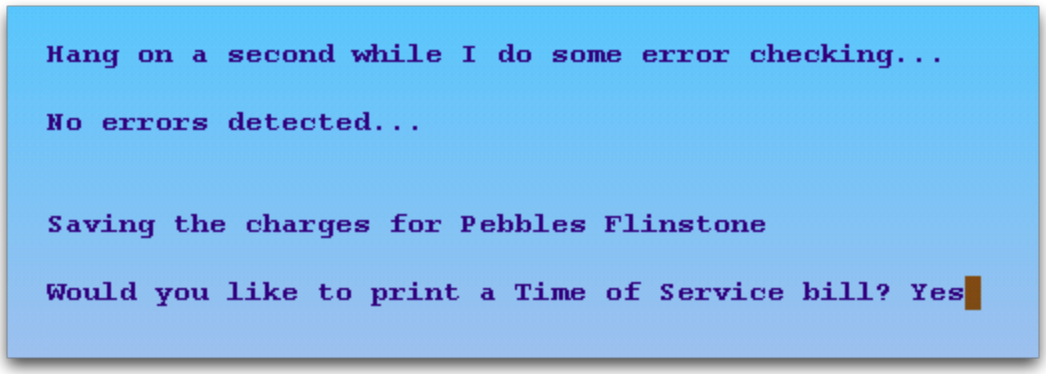
Press [**F3** -- *New TOS Payment*] to add a new payment and then enter payment type, check number, and amount.

### Step 9: Review Visit and Post

If you need to review previous steps in **checkout**, press **Page Up** or **Page Down** to move among the screens of the program.

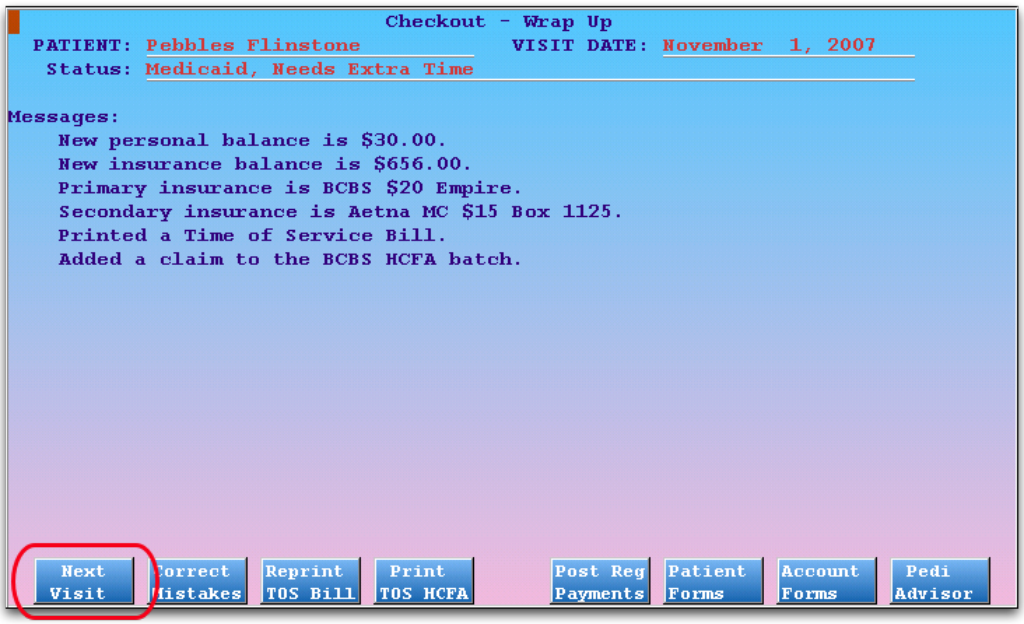
When you are finished entering and reviewing all visit information, press [**F1** -- *Post and Print*] from the Payments screen to save the new charges and payments to the account.

The **checkout** program will warn you if you made any obvious mistakes, such as entering an invalid diagnosis code or forgetting to enter a payment type. **checkout** may also ask you whether or not you wish to print a receipt.




### Step 10: Conclude the Visit

After posting the charges, you will see a "Wrap Up" screen describing the visit. The Wrap Up screen allows you to print an extra receipt, correct any mistakes, print patient form letters, or perform other functions:



When you are ready to check out another patient, press [**F1** -- *Next Visit*]. Or, press **F12** to quit **checkout**.

**Automatically Mark Visit as "Gone"?** Partner can automatically change the PCC EHR visit status to "Gone" when you finish checking out a patient. This feature is optional and can be found in the PCC EHR section of the Configuration Editor (**ced**).

# 6.3. Checkout Screens Guide

As you check in a patient, you can press **Page Up** or **Page Down** or **F1** to cycle through each screen in **checkout**.

Read the sections below to learn more about each screen in the checkout process.

**Patient Selection:** The first screen you will see when you run **checkout** is the Appointment List. To learn more about the patient selection screen in Partner, read *Appointment Lists*.

**Customizable Order:** The order of the four steps in **checkout** can be customized, so you may see the screens differently at your practice. No matter what order the screens are in, you can always press **Page Up** or **Page Down** to cycle through each page.

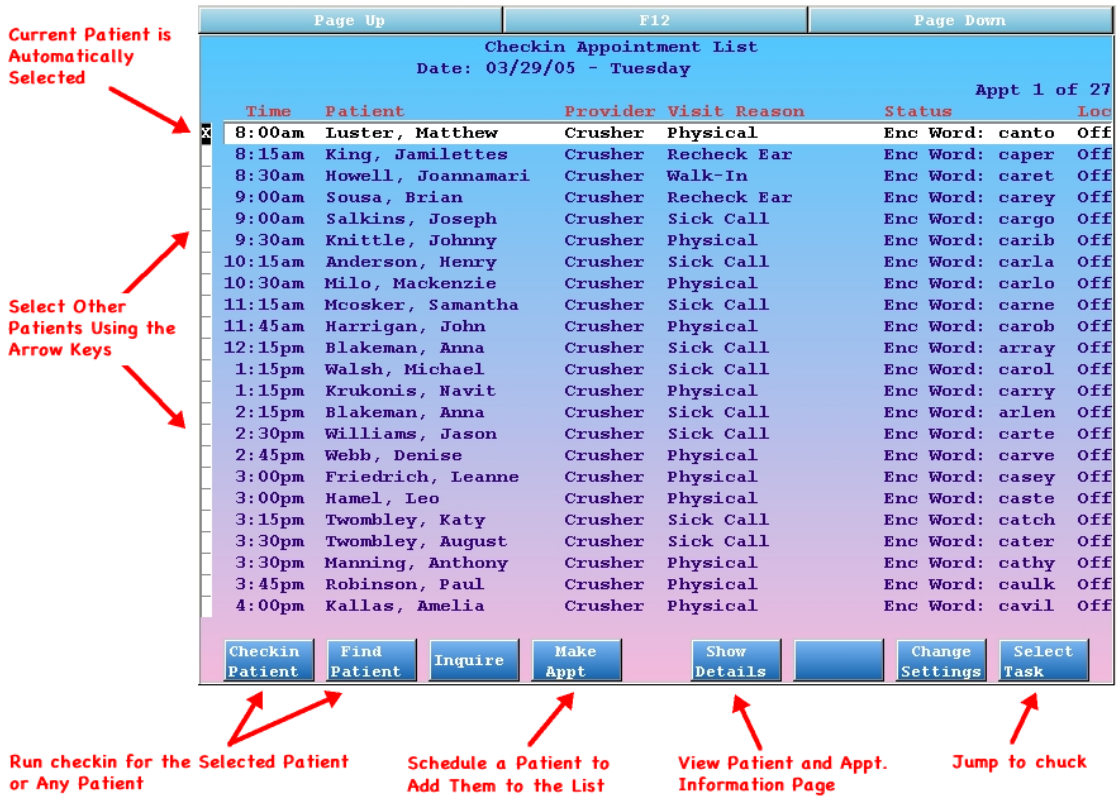
**Quitting checkout:** You can press **F12** to quit **checkout** at any time. No charges will be saved or billed. The other way to quit **checkout** is to save and post your charge by pressing [**F1** -- *Post & Print*] from the Payments Screen.

## 6.3.1 Appointment Lists in Checkin, Checkout and Nimms

Partner's **checkin**, **checkout**, and **nimms** programs have appointment lists that make selecting a patient fast and easy. Instead of typing in a patient's name, you can pick from a list of patient appointments. When you need to, you can skip the list and enter a name, but the appointment lists save time and reduce mistakes.

**Overview**

When you run **checkin**, **checkout**, or **nimms**, you see a customizable list of today's patients:

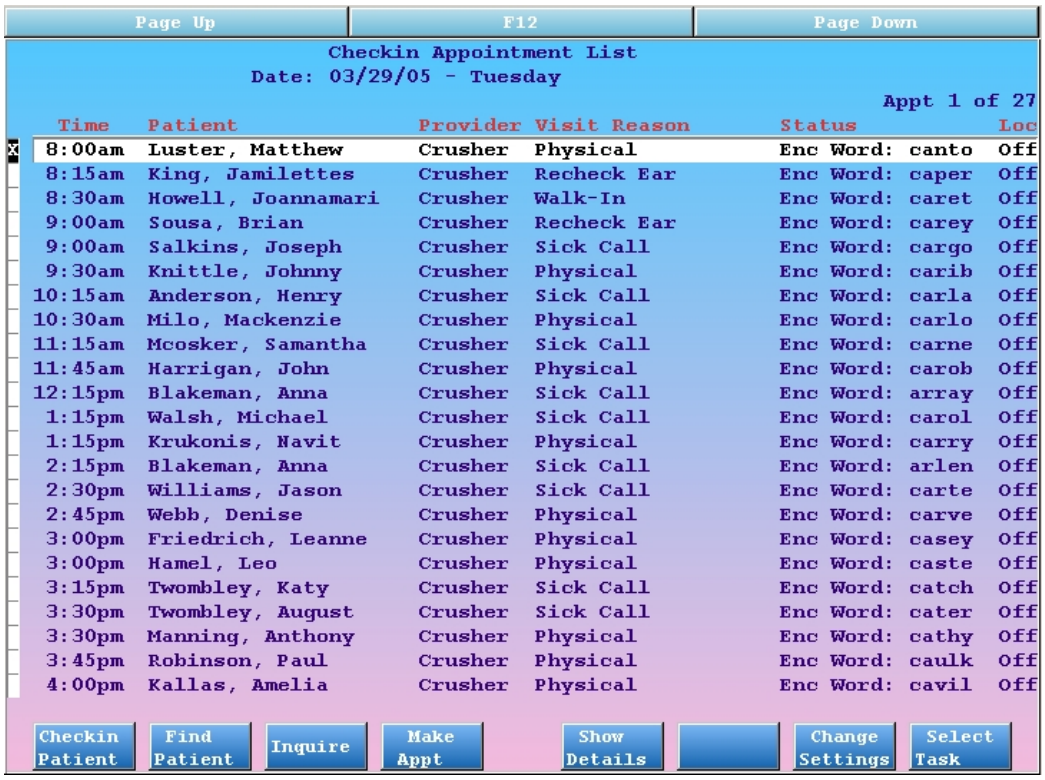



Basic visit information is included on the list, and you can quickly select a patient and press **F1** to continue. Function keys at the bottom of the screen help you find any patient or perform other important tasks.

By default, patients disappear from the Checkin Appointment List after they are checked in and disappear from the Checkout Appointment List (or Nimms list) when checked out. You can customize that behavior.

### Reviewing the Appointment List

When you run a program that uses an appointment list, such as **checkin**, Partner finds all the appointments that match certain criteria and creates a custom "Appointment List" for the program you are running.




| Time | Patient | Provider | Visit Reason | Status | Loc |
|---|---|---|---|---|---|
| 8:00am | Luster, Matthew | Crusher | Physical | Enc Word: canto | Off |
| 8:15am | King, Jamilettes | Crusher | Recheck Ear | Enc Word: caper | Off |
| 8:30am | Howell, Joannamari | Crusher | Walk-In | Enc Word: caret | Off |
| 9:00am | Sousa, Brian | Crusher | Recheck Ear | Enc Word: carey | Off |
| 9:00am | Salkins, Joseph | Crusher | Sick Call | Enc Word: cargo | Off |
| 9:30am | Knittle, Johnny | Crusher | Physical | Enc Word: carib | Off |
| 10:15am | Anderson, Henry | Crusher | Sick Call | Enc Word: carla | Off |
| 10:30am | Milo, Mackenzie | Crusher | Physical | Enc Word: carlo | Off |
| 11:15am | Mcosker, Samantha | Crusher | Sick Call | Enc Word: carne | Off |
| 11:45am | Harrigan, John | Crusher | Physical | Enc Word: carob | Off |
| 12:15pm | Blakeman, Anna | Crusher | Sick Call | Enc Word: array | Off |
| 1:15pm | Walsh, Michael | Crusher | Sick Call | Enc Word: carol | Off |
| 1:15pm | Krukonis, Navit | Crusher | Physical | Enc Word: carry | Off |
| 2:15pm | Blakeman, Anna | Crusher | Sick Call | Enc Word: arlen | Off |
| 2:30pm | Williams, Jason | Crusher | Sick Call | Enc Word: carte | Off |
| 2:45pm | Webb, Denise | Crusher | Physical | Enc Word: carve | Off |
| 3:00pm | Friedrich, Leanne | Crusher | Physical | Enc Word: casey | Off |
| 3:00pm | Hamel, Leo | Crusher | Physical | Enc Word: caste | Off |
| 3:15pm | Twombley, Katy | Crusher | Sick Call | Enc Word: catch | Off |
| 3:30pm | Twombley, August | Crusher | Sick Call | Enc Word: cater | Off |
| 3:30pm | Manning, Anthony | Crusher | Physical | Enc Word: cathy | Off |
| 3:45pm | Robinson, Paul | Crusher | Physical | Enc Word: caulk | Off |
| 4:00pm | Kallas, Amelia | Crusher | Physical | Enc Word: cavil | Off |

The list automatically scrolls to the current time. If it is two o'clock in the afternoon, the list will scroll to show patients who are scheduled for two o'clock.

Use the arrow keys or press **Page Up** and **Page Down** to scroll up and down and view the entire day. Press the right or left arrow key to move through the days. In this way, you can review appointment lists for any date, just as if you were flipping through a paper scheduling book.

Once you have chosen an appointment with which to work, press **F1** to continue working with the patient in the **checkin**, **checkout**, or **nimms** programs.

**Created in PCC EHR?** If an appointment was created in an EHR and not Partner, you will see "(EHR" appended to the status.

| Time | Patient | Provider | Visit Reason | Status | Loc |
|---|---|---|---|---|---|
| 11:00am | Case, Riley D. | Davidso | Sick Call | Enc: brian | Off |
| 11:10am | Flintstone, Dino | Crusher | Sick Call | Enc: allis (EHR) | Off |
| 11:15am | Hostettler, Amanda | William | Recheck | Enc: berne | Off |
| 11:15am | Yentsch, Eric | Davidso | Sick Call | Enc: breve | Off |
| 11:15am | Drescher, Reid | Casey | Recheck | Enc: bravo | Off |
| 11:30am | Hamann, Adam | Casey | 5yr Well Visit | Enc: boyar | Off |
| 12:00pm | Wagner, Makena | Davidso | Sick Call | Enc: brice | Off |
| 12:15pm | Daniels, Jordan J | Casey | Recheck | Enc: boyle | Off |
| 1:45pm | Spohn, Eryn | William | 6yr - 7yr Well Vi | Enc: bosom | Off |
| 2:15pm | Weiss, Jennifer S | Casey | 2wk Well Visit | Enc: bract | Off |
| 2:45pm | Firestone, Kelsey | William | Medication Follow | Enc: botch | Off |

### Can't Find an Appointment?

If you can't find an appointment, you can run the **inquire** program and check the patient's schedule. If you can't find the appointment in **checkout**, you might switch over and review the **checkin** program. By default,

appointments do not appear in **checkout** until they are checked in.

If the patient does not have an appointment, you can press F4 to schedule one. The patient will be added to your list, and (optionally) Partner will print an encounter form for the appointment.

If you wish to proceed without an appointment, press [**F2** -- *Find Patient*] to search by name or other criteria. Read *Finding Patients and Accounts* to learn more about finding patients.

**Extra Functions and Tools**

While you are choosing a patient to work with, you can perform many other useful functions.

[**F3** -- *Inquire*]

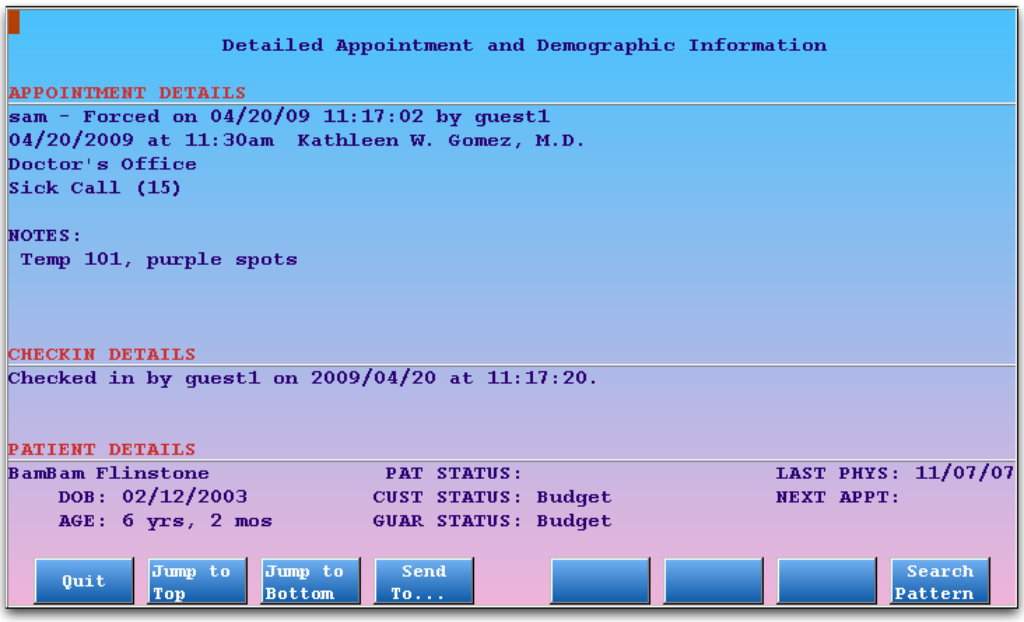
Press **F3** to run **inquire** for the currently selected patient. You can review the patient's visit history, change notes for the visit, and cancel, delete, or mark any appointment as missed.

[**F4** -- *Make Appt*]

Press **F4** to run **sam** and schedule any patient. You should do this for all "Walk-In" visits so they will have an encounter form and an appointment in your system. If your office does not use **sam**, **F4** can be configured to run **encount**.

[**F5** -- *Show Details*]

Select an appointment and press **F5** to view the Appointment and Demographic Information screen, which contains full details about the patient and the currently scheduled appointment:




[**F7** -- *Change Settings*]

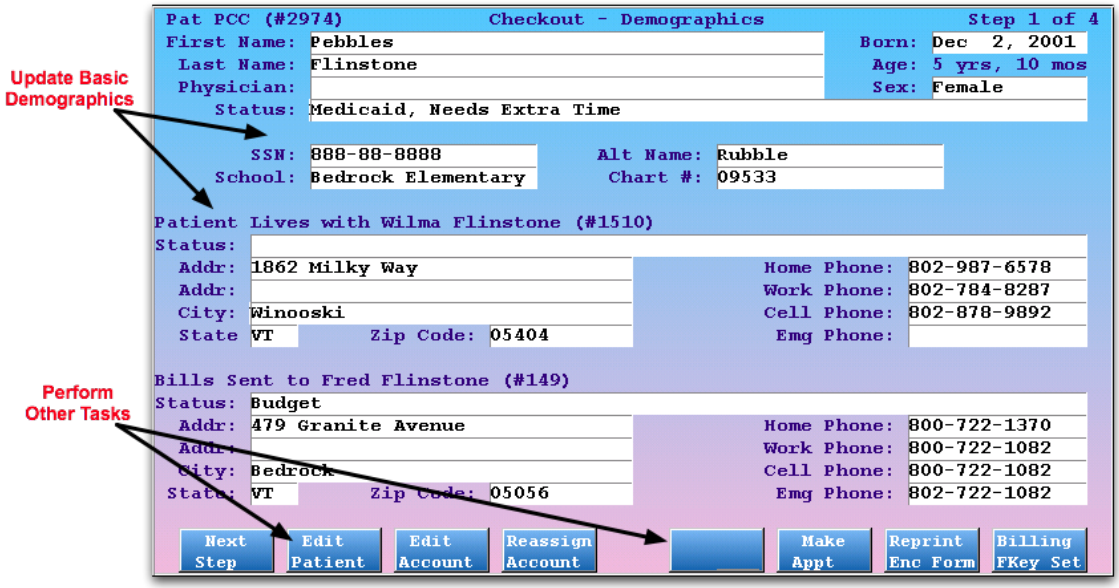
Press **F7** to open the Settings window for the Appointment List. For a complete guide to configuring what appears on your appointment lists, read the Configure Appointment Lists article.

[**F8** -- *Select Task*]

Press **F8** to switch between patient check-in (**checkin**) and check-out (**checkout**). You can view a custom appointment list in both programs.

## 6.3.2 Demographics Screen

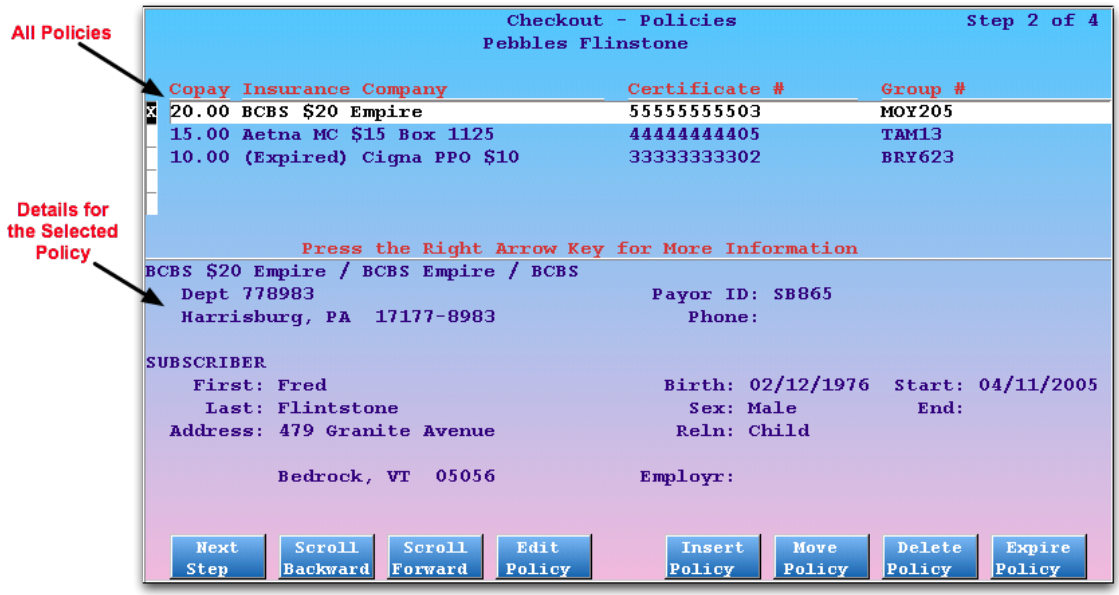
The Demographics screen in **checkout** contains basic information about the patient. You can press **Enter** or **Tab** to reach a field and make changes. Your changes will be saved when you continue to the next step by pressing **Page Down** or [**F1** -- *Next Step*].




The function keys match those found in the Patient Checkin (**checkin**) program. Use them to perform patient and account tasks. For more information, read *Patient Checkin*.

## 6.3.3 Policies Screen

The Policies page in **checkout** contains insurance information for the patient. You can add a new policy before posting charges. For information about insurance policies in Partner, read *Insurance Policies*.



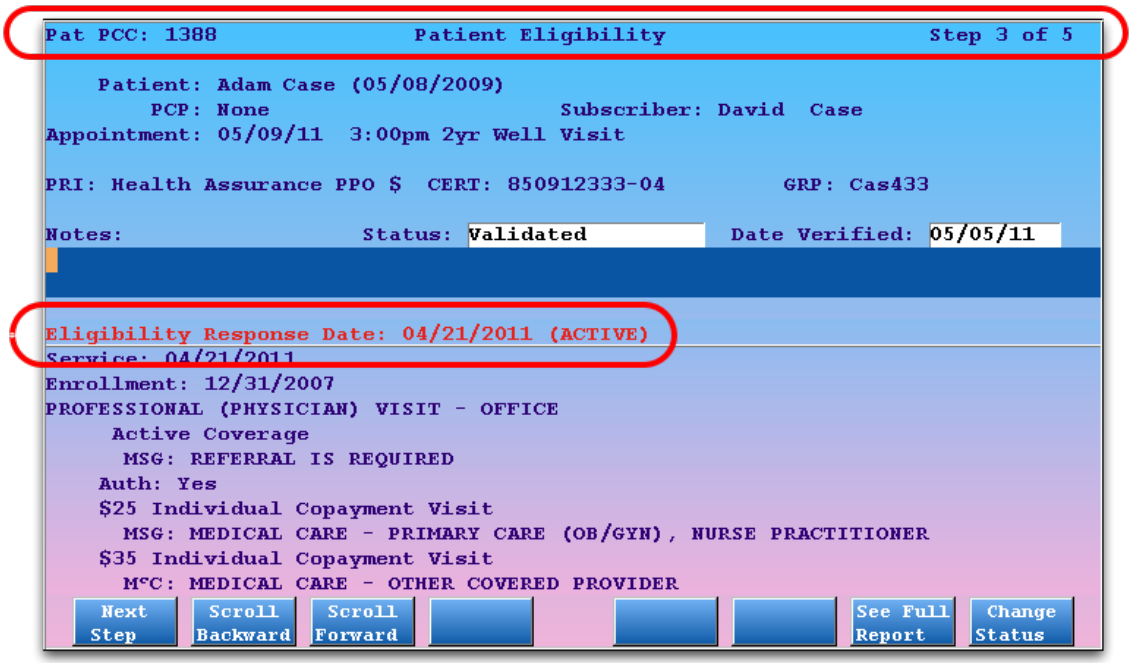
## 6.3.4 Eligibility Screen

The Eligibility page, which optionally appears in **checkout** depending on your office's configuration, displays the patient's primary insurance policy and the most recent visit eligibility information.

You can review and edit status and notes about eligibility for the appointment, review the Partner-summarized eligibility report (if available), or send a request for information to the insurance carrier (if participating).

### Reading the Eligibility Screen

The eligibility step in **checkout** looks like this:




The top of the screen shows patient and policy information, the middle shows fields for entering status, date, and notes, and the bottom of the screen shows Partner's summary of information sent by the insurance carrier. The date of the most recent eligibility request, along with Active/Inactive status, appears in red.

After reviewing the eligibility information on the screen or using function keys to gather more information, you may update the status, date, or notes and press **F1** or **Page Down** to continue to the next step.

**Updating the Information:** If a patient's primary policy changes, you can request a new eligibility report by pressing [**F6** - *Request Elig*]. If you would like Partner to *automatically* request a new eligibility report whenever a patient's primary policy changes, ask PCC Support to activate that feature.

### Function Keys on the Eligibility Screen

[**F1** -- *Save, Next Step*]

Press **F1** to save your changes. If you are viewing the Patient Eligibility screen in **checkin**, you will continue to the next step in the checkin process.

[**F2** -- *Scroll Backward*], [**F3** -- *Scroll Forward*]

If the eligibility details extend below the screen, press **F2** and **F3** to scroll that portion of the screen.

[**F4** -- *Edit Policies*]

Press **F4** to visit the patient's policy screen, where you may review or edit their insurance policies.

[**F5** -- *Edit Patient*]

Press **F5** to visit the Patient Editor (**notjane**). Press **F7** from **notjane** to edit the account.

[**F6** -- *Request Elig*]

Press **F6** to check eligibility. If the patient's primary insurance allows automatic eligibility requests, Partner will perform the check and update the eligibility information on the screen.

[**F7** -- *See Full Report*]

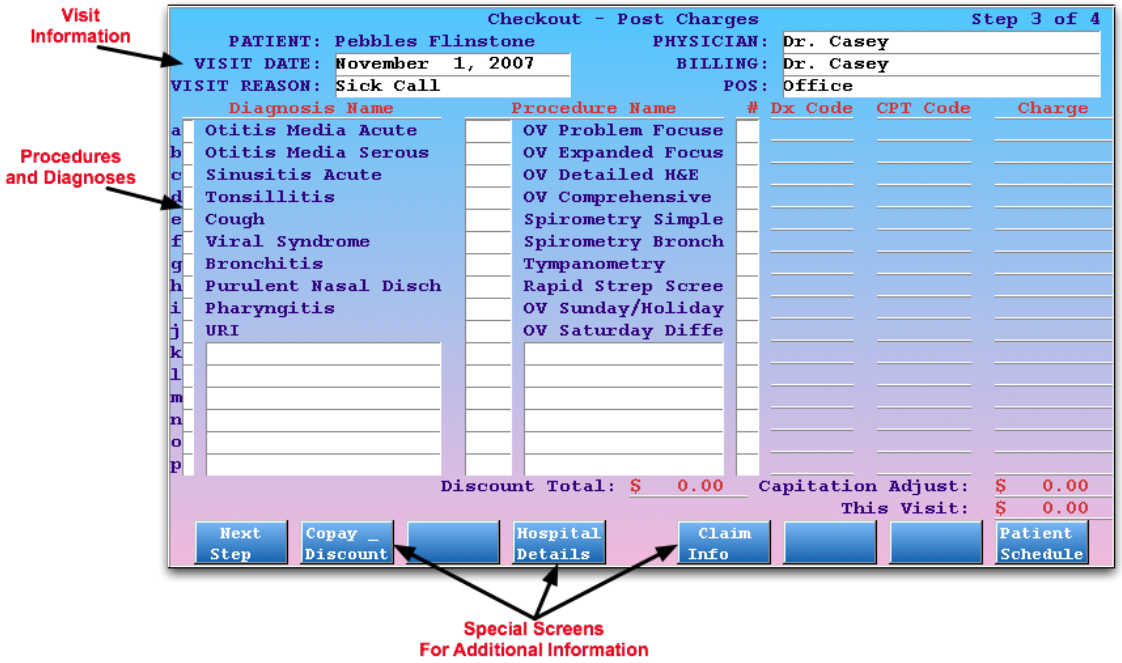
The screen includes a summary of the carrier's eligibility report. To view the report, press **F7**.

[**F8** -- *Change Status*]

Press **F8** to jump down to the Status field.

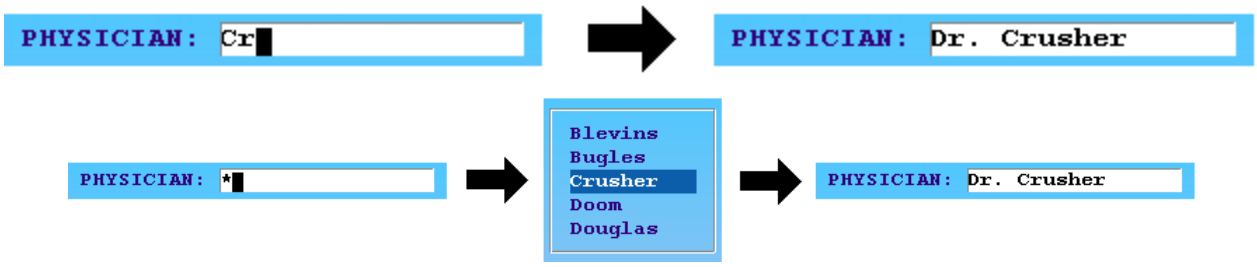
## 6.3.5 Post Charges Screen Details

After you select an appointment and complete other optional **checkout** steps, you will see the Post Charges screen. On the Post Charges screen, you can edit the appointment's date, provider, place of service, diagnoses, procedures, and the number of units performed. Partner will fill out some or all of that information for you, either from information in the appointment record or from your practice's EHR. Function keys on the Post Charges screen open special screens for adding additional visit information or scheduling a new appointment.

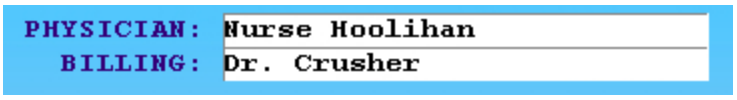



If the appointment was scheduled in Partner, **checkout** will automatically fill out most of the fields. For example, in the above image, Partner knows that Pebbles Flintstone is seeing Dr. Casey on November first for a Sick Call visit in the main office location.

If the patient has no appointment, or if the basic visit information has changed, you must fill out the Physician, Visit Date, Visit Reason, and Place of Service ("POS") fields in order to post a charge. You can use abbreviations or the asterisk (*) to find entries quickly.

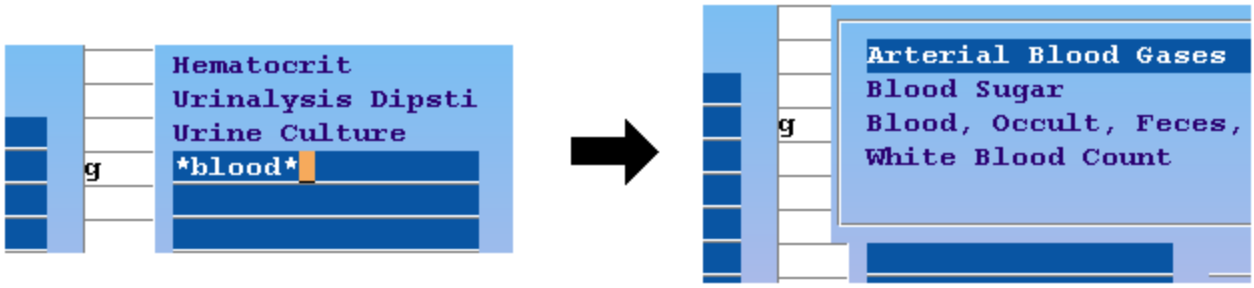



**Supervising Physician:** You can enter a supervising or "Billing" physician in addition to the primary physician for a visit. If a visit was scheduled with a nurse or an unaccredited physician, the "Billing" physician could replace or accompany the provider of service on the insurance claim. Contact PCC for assistance configuring these options, which can be set differently for each insurance company.




### Find and Enter Diagnoses and Procedures

If the provider performs a diagnosis or procedure that is not visible on the Post Charges screen in **checkout**, you can use abbreviations and asterisks to *search* for the item in any available blank field.




You can also enter diagnoses or procedure codes and Partner will look up the names for you.

**Charge Screens, or Diagnoses and Procedures from an EHR:** If your practice uses an integrated EHR, you will automatically see all the diagnoses and procedures sent to Partner by the charting software. If you do not use an integrated EHR, your practice can create custom charge screens for each visit type (or provider or office location), and **checkout** will display the most common and useful codes for each appointment. Read the *Custom Charge Screens* section to see examples.

### Other Features for Finding and Entering Procedures and Diagnoses

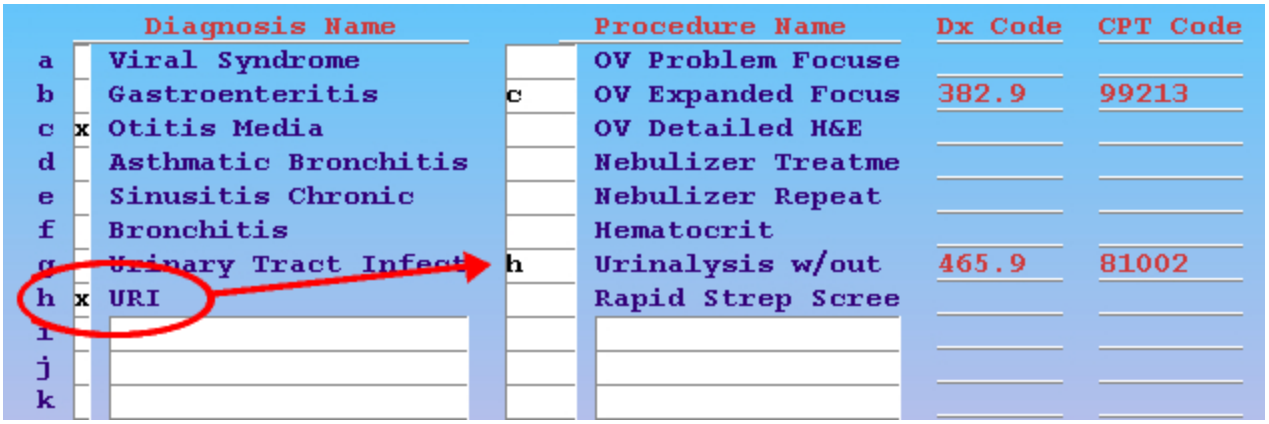
- **Snap Codes:** You can type one of your office's custom Snap Codes to automatically enter a set of procedures and diagnoses and link them. Learn how to setup and use Snap Codes in the Snap Codes guide.
- **Out of Room for Procedures:** If you run out of room while posting procedures, you can press [**F3** -

*Additional Procedures*] to toggle to a second list.

- **Out of Room for Reading Long Diagnosis Descriptions:** If you can't read all the text for a long diagnosis description, you can press [**F6** - *Show Dx Names*] to view the Diagnosis column in full-screen mode. From that screen, you can review and edit diagnoses and then press [**F1** - *Save*] to return to the normal view.
- **Change Visit Reason On-the-Fly:** You can enter a new visit reason to switch to a more useful list of diagnoses and procedures. If a physical visit turns into a sick visit, for example, you can change the text in the Visit Reason field and the lists of diagnoses and procedures will change to reflect the new visit.
- **Switch Between ICD-10 and ICD-9:** The **checkout** program will automatically switch to ICD-9 or ICD-10 diagnosis descriptions based on the date of service. If a visit date is entered incorrectly, you can adjust the date and **checkout** will switch back to the other code set.
- **Compliant Diagnoses Code Checking:** If you enter a diagnoses code that is not HIPAA compliant or is an expired billing code for the date of service, the code will turn red on your screen and you will receive a warning message when posting it. With Partner's diagnosis code validation, your office will not waste time and resources resubmitting claims due to expired diagnosis codes.
- **EMR/EHR Integration:** If your office uses an Electronic Health Record that has been fully integrated with Partner, you will not have to fill out procedures and diagnoses on this screen. The EMR will send the data to the screen, and you can review it for errors and continue to the Payments step.
- **Post a Missed Visit:** You can use **checkout** to post a Missed Appointment procedure with or without a fee. Partner can then automatically mark the appointment as missed in your schedule. For assistance configuring a Missed Appointment procedure, contact PCC Support.

**Linking Procedures to Specific Diagnoses**

While posting charges, you should specify which diagnoses apply to each procedure. Enter the letter of each diagnoses into the boxes next to the procedures they warranted. For example, the letter "h" is used to indicate why the Urinalysis procedure was performed:




You can link up to four different diagnoses to each procedure. A high-level sick visit, like a 99214, may need two or more diagnoses attached to it:

| | | Diagnosis Name | | Procedure Name |
|---|---|---|---|---|
| a | | Viral Syndrome | | OV Problem Focuse |
| b | | Gastroenteritis | | OV Expanded Focus |
| c | x | Otitis Media | cd | OV Detailed H&E |
| d | x | Asthmatic Bronchitis | d | Nebulizer Treatme |
| e | | Sinusitis Chronic | d | Nebulizer Repeat |
| f | | Bronchitis | | Hematocrit |
| g | | Urinary Tract Infect | | Urinalysis w/out |

**Other Features for Linking Diagnoses and Procedures**

- **Snap Codes:** You can type one of your office's custom Snap Codes to automatically enter a set of procedures and diagnoses and link them. Learn how to setup and use Snap Codes in the Snap Codes guide.
- **Skip The Diagnoses:** You can save time while posting by simply marking procedures with the letter next to the diagnoses. In other words, you do not have to manually "X" off each diagnosis, just use the associated letter on a procedure and Partner will know what diagnosis you intend.
- **Fixing Diagnoses After Posting:** Once a *procedure* is posted and saved, it is part of a patient's financial and medical record. Diagnoses are more flexible. You can change which diagnoses appear on a claim and how they link to each procedure from the Visit Status screen in the *Correct Mistakes (**oops**)* program. After making such changes, you should re-batch the claim.

**Setting Multiple Procedure Units**

The Units field in **checkout** indicates how many of each procedure will be billed. If you increase the number of units, you will see the corresponding charge for that procedure automatically increase in the Charge column.

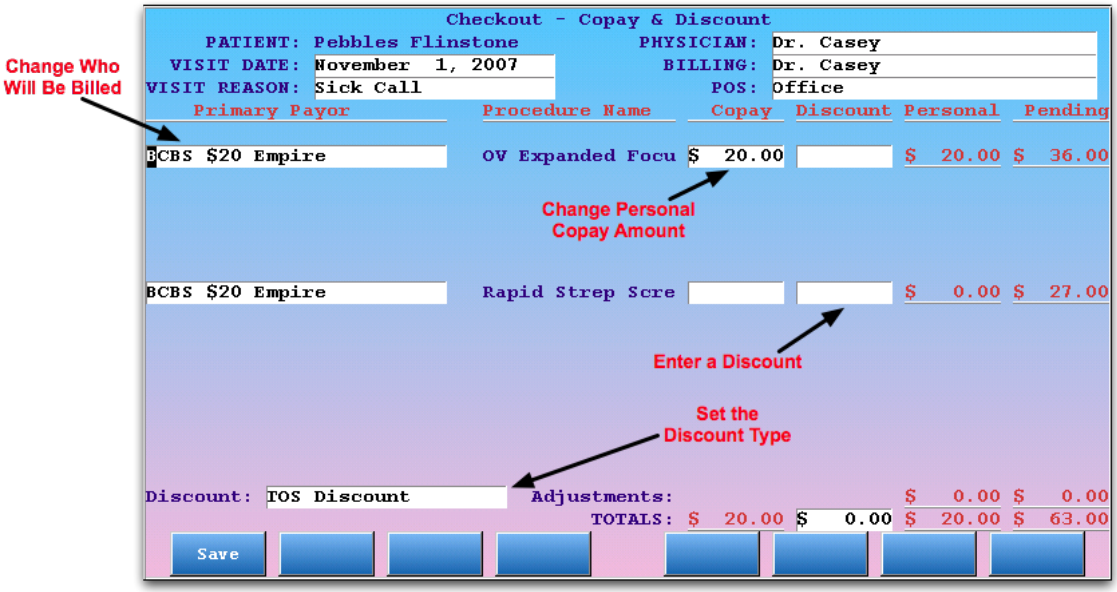
| | Procedure Name | # | Dx Code | CPT Code | Charge |
|---|---|---|---|---|---|
| ac | OV Expanded Focus | 1 | 493.22 | 99213 | $ 56.00 |
| | OV Detailed H&E | | | | |
| | OV Emergency | | | | |
| | Spirometry Bronch | | | | |
| a | Nebulizer Treatme | 1 | 493.22 | 94640 | $ 35.00 |
| a | Nebulizer Repeat | 1 | 493.22 | 94640-76 | $ 35.00 |
| a | Nebulizer Repeat | 3 | 493.22 | 94640-76 | $ 105.00 |

In the above example, three "repeat" nebulizer breathing treatments were performed. When the unit number was changed from 1 to 3, the New Charge increased. Both the number of units and the final price will appear on the insurance claim.

**Upper Limit:** You can post up to 999 units of any procedure, matching the HCFA claim standard of three digits.

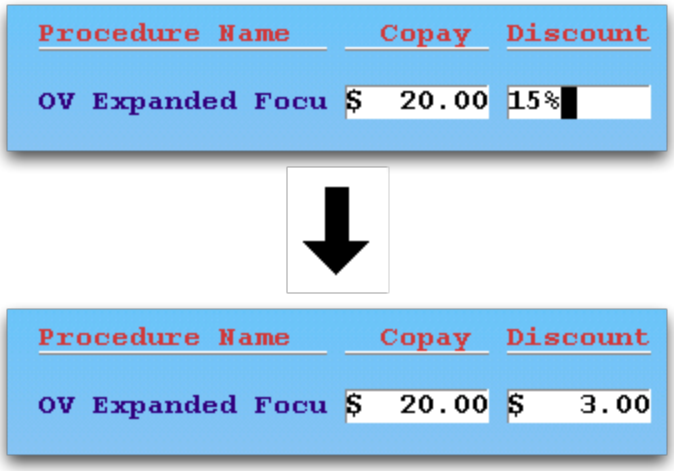
## 6.3.6 Copay and Discount Screen

After you enter diagnoses and procedures in **checkout**, press [**F2** -- *Copay & Discount*] from the Post Charges screen to open the Copay & Discount screen.




On this screen, you can:

- Enter a new expected copay amount for each procedure or erase the current expected copay. This may be necessary for insurance policies that have unusual copay rules.
- Assign a different Primary Payor to a charge. You can change the responsible party for a procedure to a different insurance policy. Leave the Primary Payor blank in order to charge the patient's guarantor instead of an insurance plan.
- Enter a time-of-service discount for each procedure and change the discount type. Your office may mark down the cost of procedures for Professional Courtesy or other reason. You can enter a discount amount or a percentage.




If you enter a discount on this screen, it will appear on the Payments screen.

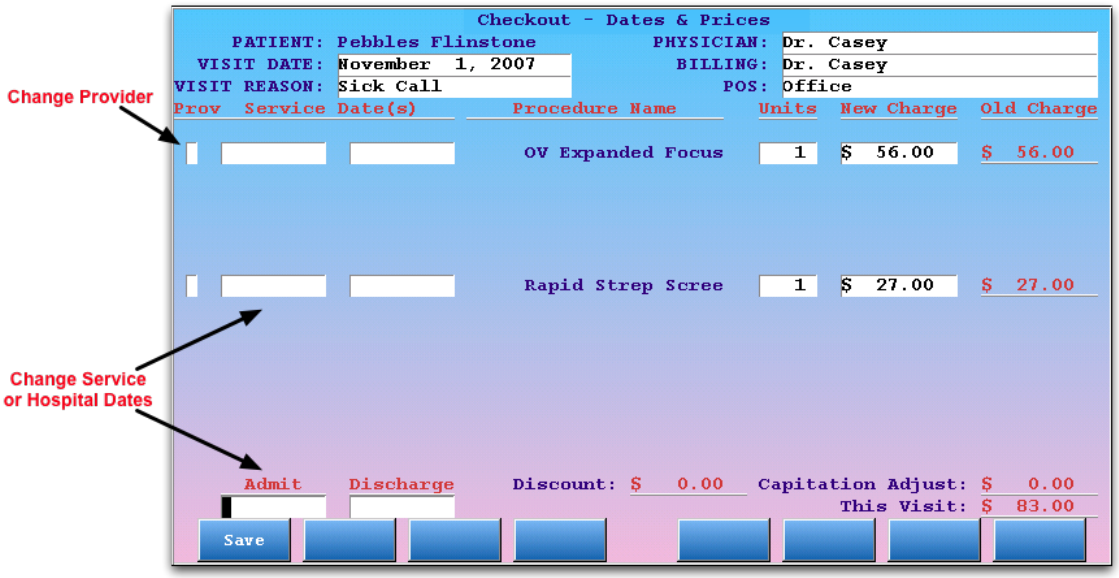
When you are finished changing copays or other items on this screen, press [**F1** -- *Save*] to return to the Post Charges screen and finish posting the visit.

**Automate The Copay:** Many unusual copay rules can be automated. If an insurance plan requires a different copay depending on the OV or physical procedure, Partner can adjust the copay automatically. Contact PCC

Software Support to learn more.

### 6.3.7 Checkout Dates & Prices Screen

After you enter diagnoses and procedures on the Post Charges screen during checkout, press [**F4** -- *Dates & Prices*] to change the provider for a specific procedure, enter service dates or hospital admission dates, or to change the price for a specific procedure.




The Dates & Prices screen shows the selected procedures along with fields for a provider initial, service dates, units, and the charge amount. At the bottom, you can enter Admit and Discharge dates for the visit.

- The "Prov" field on the left side of the screen will override the visit's provider for the specific procedure.
- The contents of the Service Dates fields will appear on the insurance claim. Changing the service dates may automatically increase the Units field.
- The hospital Admit and Discharge fields will appear on the insurance claim.
- The New Charge fields will override the default prices for the procedures.

When you are finished changing procedure dates, hospital dates, or other items on this screen, press [**F1** -- *Save*] to return to the Post Charges screen and finish posting the visit.

### 6.3.8 Claim Info Screen

Press [**F5** -- *Claim Info*] from the Post Charges screen to open the Claim Information screen.

```
                    Checkout - Claim Information
     PATIENT: Pebbles Flinstone          PHYSICIAN: Dr. Casey
  VISIT DATE: November  1, 2007             BILLING: Dr. Casey
VISIT REASON: Sick Call                        POS: Office

  Referring Provider: Stacy A. Forrest, M.D.

                   INSURANCE INFO                        HOSPITAL
  Prior Auth. Number: 5544332AX2                   Admit:
Resubmission Number:                            Discharge:
   Reference Number:
  Claim Delay Reason:                                 ACCIDENT INFO
   Accept Assignment?                       Accident Date:
                   LABORATORY WORK          Auto Accident?
   Was lab work done?                          Acc. State:
    Cost of Lab Work:
                                                       STATUS
                   DISABILITY INFORMATION   Marital Status:
      Disabled Start:                     Employment Status:
        Disabled End:                        Emergency Visit? No
                                               Worker's Comp? No
                   REPEAT VISIT         Related to Employment?
    Date First Seen:                         EPSDT Referral:
 Save | Refer Provider | Authoriz Number | Disabled Start | Hospital Admit | Accident Date | Worker's Comp | Set Jump Point
```

The fields on this screen contain additional information that may be required for insurance claim submission. If the visit needs a prior authorization number or accident information, for example, it can be entered on this screen.

Your office may choose to enter or update claim information later, after a visit has been posted. All of the fields on this screen are also available on the Visit Status screen in the Correct Mistakes (**oops**) program.

The function keys on this screen jump to specific fields, speeding up data entry. If your office regularly needs to jump to a specific field, you can select that field and press [**F8** -- *Set Jump Point*]. The **checkout** program will remember the field location and jump directly to it on subsequent visits to the Claim Information screen.

### 6.3.9 Payments Screen

The fourth and final step of the **checkout** program is the Payments screen. The Payments screen displays the previous personal balance and the new personal charges. You can review any personal payments received before **checkout**, add a new payment, and confirm the New Personal Balance.

```
                                                   Personal Totals
                    Checkout - Payments                          Step 4 of 4
PATIENT: Pebbles Flinstone
                                              Today's   Previous
                                               Visit    Balance
                                              $  20.00  $  30.00
Apply Today's Payments:
                                              Apply to  Apply to
 Date    Pmt/Adj Type       Check #    Amount  Today Vis Prev Bal   Unapplied
11/01/07 TOS Check Payment  343      $  20.00  $  20.00  $   0.00   $   0.00

                          Remaining Balance:  $   0.00  $  30.00   $   0.00

New Personal Balance: $   30.00

Visit 1 of 1 for guarantor Fred Flinstone

 Post and Print | | New TOS Payment | Balance Details | | Remove This Pmt | | |
```

Payments, Discounts, Adjustments

### Today's Visit and Previous Balance

The top of the screen displays the *personal* amount due for "Today's Visit." If the patient has insurance coverage, this will typically include only the copay. If the patient's guarantor has an outstanding personal charge or credit, it will appear under the "Previous Balance" header.

| Today's Visit | Previous Balance |
|---|---|
| $ 20.00 | $ 138.00 |

### Today's Payments

The "Apply Today's Payments" section displays all of the visit's personal payments, discounts, and adjustments. If a payment was collected during checkin or a discount was entered on the Copays & Discount screen, it will appear on this list.

Apply Today's Payments:

| Date | Pmt/Adj Type | Check # | Amount | Apply to Today Vis | Apply to Prev Bal | Unapplied |
|---|---|---|---|---|---|---|
| 11/02/07 | TOS Check Payment | 434 | $ 20.00 | $ 20.00 | $ 0.00 | $ 0.00 |
| 11/02/07 | TOS Cash Payment | | $ 100.00 | $ 0.00 | $ 100.00 | $ 0.00 |
| 11/02/07 | Master Card Payme | | $ 38.00 | $ 0.00 | $ 38.00 | $ 0.00 |
| | | | Remaining Balance: | $ 0.00 | $ 0.00 | $ 0.00 |

If the patient or family has not yet paid, the list will be empty:

Apply Today's Payments:

| Date | Pmt/Adj Type | Check # | Amount | Apply to Today Vis | Apply to Prev Bal | Unapplied |
|---|---|---|---|---|---|---|
| | ---------No Payments Posted--------- | | | | | |
| | | | Remaining Balance: | $ 20.00 | $ 138.00 | $ 0.00 |

Press [**F3** -- *New TOS Payment*] to add a new blank line and enter type, check number, and amount.

Apply Today's Payments:

| Date | Pmt/Adj Type | Check # | Amount | Apply to Today Vis | Apply to Prev Bal | Unapplied |
|---|---|---|---|---|---|---|
| 11/02/07 | Master Card Payme | | $ 158.00 | $ 20.00 | $ 138.00 | $ 0.00 |
| | | | Remaining Balance: | $ 0.00 | $ 0.00 | $ 0.00 |

**Pay Old Balance:** Note that you can allocate any amount of your payment to today's visit, to the previous balance, or leave your payment unapplied and unlinked. If you post additional money against an old balance, the new payment will be linked directly to the old charges.

### Applying Old Credits to Today's Charges

If the account has a credit, the credit will appear beside the "Previous Personal Balance" label and will appear as a "Credit on Account" payment in the Apply Today's Payments section.

```
                                                    Today's
Previous Personal Balance: $    20.00CR              Visit
                                                    $   20.00
Apply Today's Payments:
                                                    Apply to    Apply to
 Date    Pmt/Adj Type        Check #     Amount     Today Vis   Prev Bal    Unapplied
         Credit on Account           $   20.00      $   20.00   $    0.00   $    0.00

                              Remaining Balance:    $    0.00   $    0.00   $    0.00

New Personal Balance: $    0.00
```

When you press [**F1** -- *Post and Print*], Partner will automatically apply the old credit to today's charges, as shown above. A payment received in the past will be *linked* to today's charges.

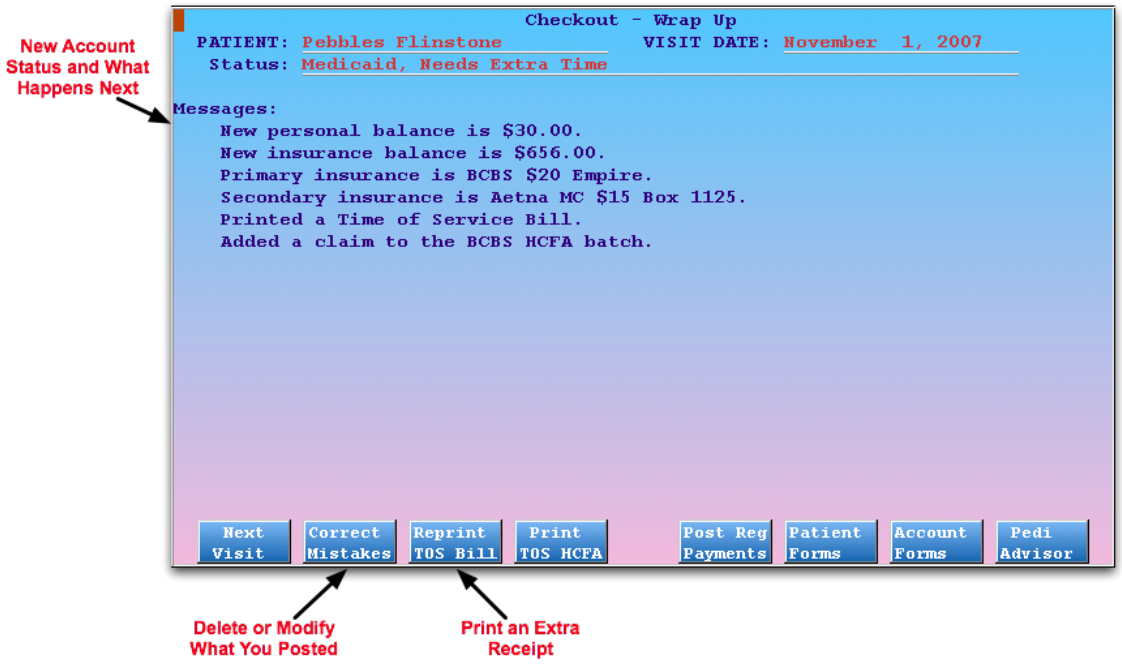
If you do *not* wish to apply the old credit to today's charges, press the **End** key to erase the "Apply to Today's Visit" field. The full amount of the credit will shift to the "Unapplied" column. You can then enter a new payment by pressing [**F3** -- *New TOS Payment*] or allow the charge to remain unpaid.

**Automatically Mark Visit as "Gone"?** Partner can automatically change the PCC EHR visit status to "Gone" when you finish checking out a patient. This feature is optional and can be found in the PCC EHR section of the Configuration Editor (**ced**).

**Partner Totals Credits and Charges:** Although you can leave credit amounts in the unapplied column, Partner will include any credits in its calculation of an account's final personal balance (on reports, for example).

## 6.3.10 Wrap-Up Screen

When you press [**F1** -- *Post and Print*] from the Payments screen, **checkout** saves the information you have entered, may print a receipt or ask if you want one printed, and shows you a wrap-up screen. Once you see the Wrap Up screen, the visit has been posted and saved.



The wrap-up screen displays several simple-English messages: the new personal and insurance balances, and insurance and claim submission information.

You can perform a number of useful functions on the Wrap-Up screen.

**Function Keys from the Wrap-Up Screen**

[**F1** -- *Next Patient*]

Press **F1** to return to the appointment list and pick a new patient.

[**F2** -- *Correct Mistakes*]

Press **F2** to run **oops**, the Correct Mistakes program. In **oops** you can delete charges and payments, change the responsible party for charges, change diagnosis information for procedures, and perform many other functions. Read *Correct Mistakes (**oops**)* to learn more.

[**F3** -- *Reprint TOS Bill*]

Press **F3** to generate an additional receipt. Some practices do not print receipts by default, in which case press **F3** to print the first receipt.

**Last Chance.** The receipt is a formal record of the transaction and the payment. Once the Wrap-Up screen has been cleared, there is no way to regenerate a receipt. You can instead generate an account history for a single day (**tater**), a Collection report, or a personal bill.

[**F4** -- *Print TOS HCFA*]

Press **F4** to print a HCFA form for the charges you just posted. Your practice may generate a HCFA for patients who have an insurance plan with which you do not participate.

[**F5** -- *Post Reg Payments*]

Press **F5** to run **pam**. Read Posting Personal Payments to learn more.

[**F6** -- *Patient Forms*]

Press **F6** to jump to the patient form-letter page.

[**F7** -- *Account Forms*]

Press [**F7**] to jump to the account form-letter page.

[**F8** -- *Pediatric Advisor*]

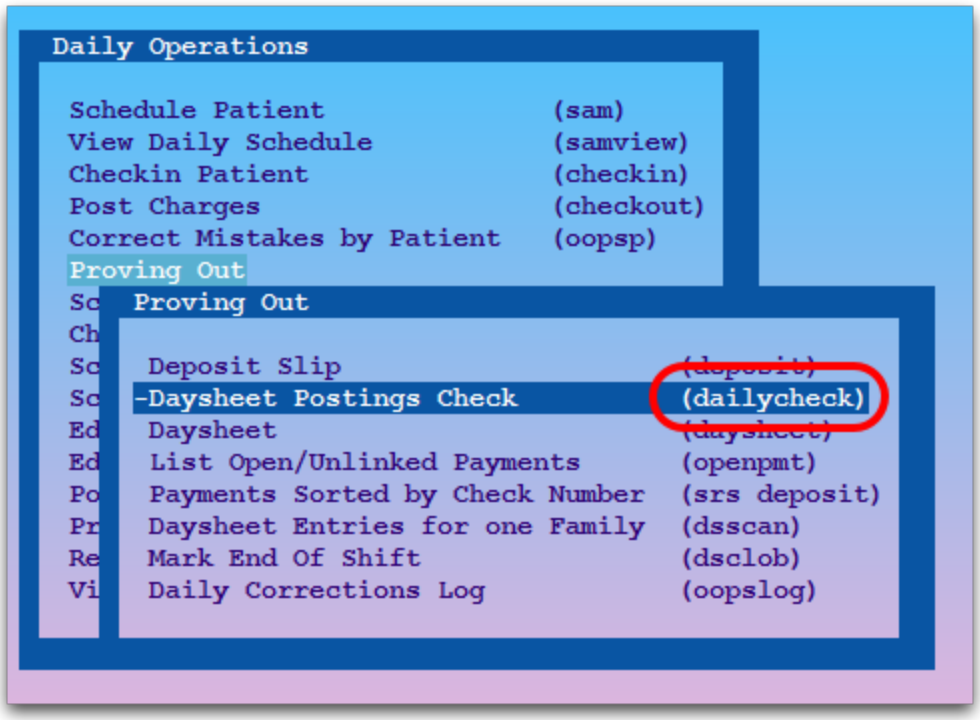
Press [**F8**] to run the Pediatric Advisor program. Pediatric Advisor is a library of handouts on various medical issues. Your office may not have the Pediatric Advisor program installed.

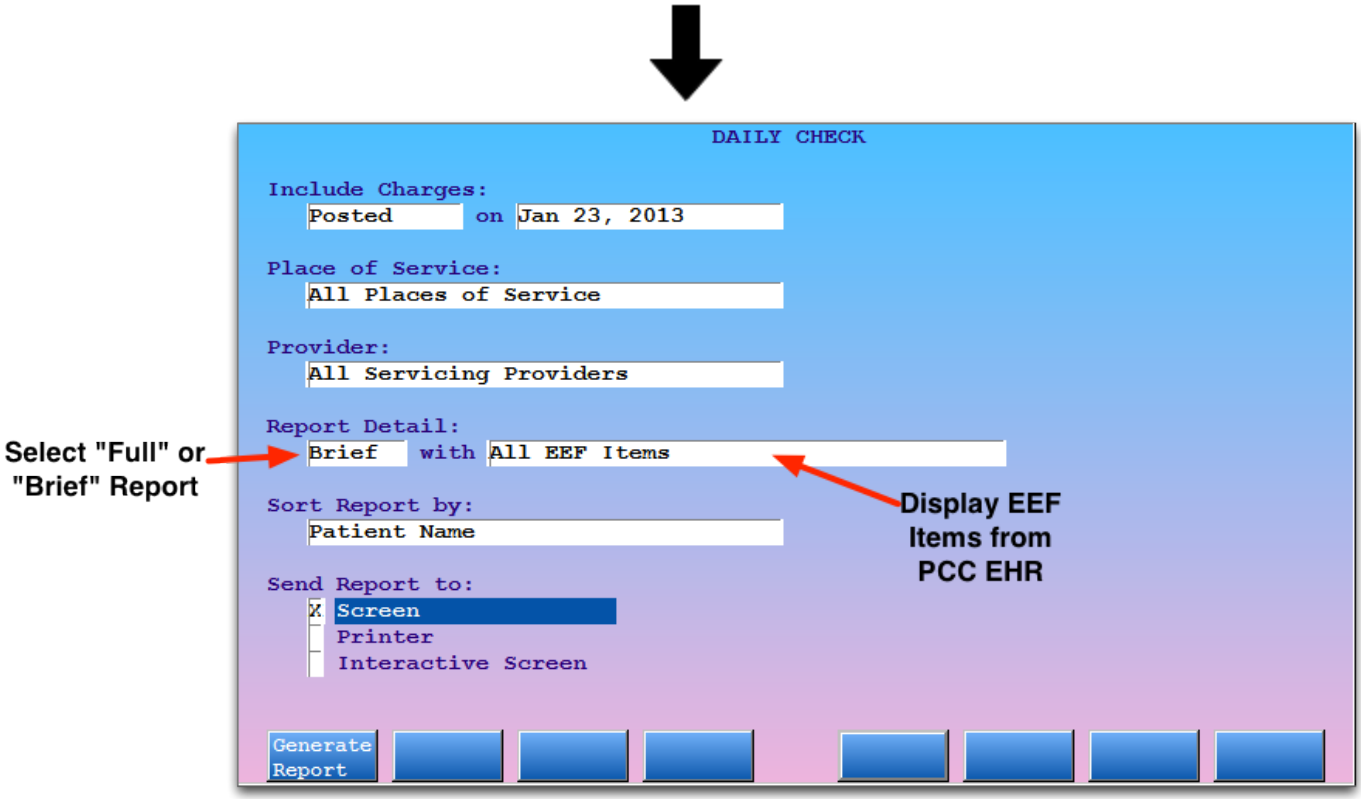
# 6.4. Review Posted Charges: Dailycheck

The Daily Check program (**dailycheck**) lists all the visits posted on a single day or range of days. The report includes every diagnosis, procedure, amount charged and payment posted. Use **dailycheck** to review a day's

postings and compare them against the encounter forms. Many office managers run dailycheck every evening or early the following morning.

The **dailycheck** report is located in the Proving Out window within the Daily Operations window of the Partner windows. You can also type **dailycheck** at a command prompt.



You can select which charges to include, select a place of service, limit the report to one clinician, choose a brief or full report, include EEF items from PCC EHR, sort the report by various values, and send the report to the screen, a printer, or an interactive screen.

```
PATIENT: Flintstone, Pebbles (F 10 years)                    BORN: 07/26/01

     POS: Office

08/12/11  W  UHC
               WCC 5-11 yrs                      99393          250.00
                  Well Child Care                   V20.2
                  BMI-ped >95%                      V85.54
08/12/11  W  UHC
               Varivax                           90716          125.00
                  Well Child Care                   V20.2
08/12/11  W  UHC
               Immun Admin/Counsel First Ant     90460          100.00
                  Well Child Care                   V20.2
08/12/11  W  UHC
               Flumist                           90660           45.00
                  Well Child Care                   V20.2

             TOTAL                                              520.00

--Less (type q to quit)-- (Byte 1967)
```

The **dailycheck** output displays complete charge posting details. A total for the day (or time range) appears at the bottom of the report. The "Brief" version of the report omits codes and units and condenses linking.

If you use one of the EEF options, you can compare posted charges with items on the electronic encounter form for the same visit.

Posted in checkout

PCC EHR's EEF Record

```
DATE      PRV PROCEDURE            DIAGNOSIS     INSURANCE     AMOUNT     COPAY

 PATIENT: Troutman, Dara (F 4 yrs, 6 mos)                     BORN: 06/25/08

     POS: Office

01/23/13 W   OV Expanded Focus     Otitis Med    Capital Bl     79.00     15.00
01/23/13 W   Lead Test             Otitis Med    Capital Bl     48.00      0.00

             TOTAL                                            127.00     15.00

 ELECTRONIC ENCOUNTER FORM

             OV Expanded Focus     Otitis Media
             Lead Test
            *Urinalysis with Micr
            *Rapid Strep Screen

 * item added after checkout
```

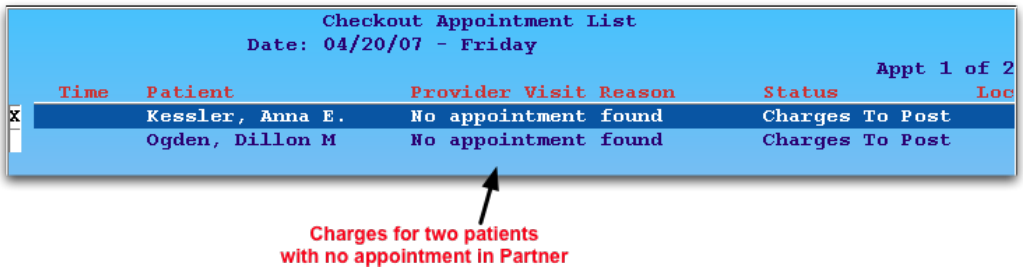
### 6.4.1 Dailycheck By Location

PCC Support can configure **dailycheck** so it runs only for the current user's location. When a biller in your remote office runs the report at the end of the day, the report will run in "By Location" mode.

Contact PCC Support if you wish to set up **dailycheck** by location for some of your users.

## 6.5. EHR Charges with No Partner Appointment

If an EHR sends Partner new patient diagnoses and procedures with no associated appointment, the charges will appear at the bottom of the Checkout appointment list.

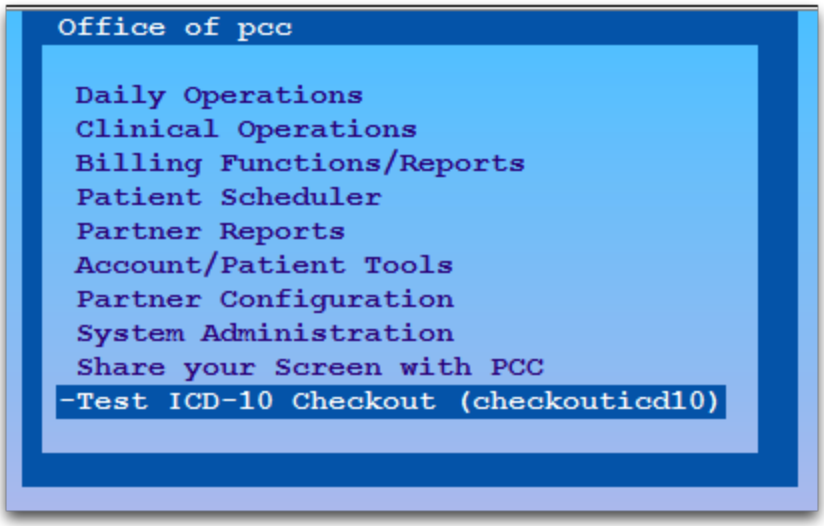



You can select these patient charges in **checkout** and post them as you would any appointment.

**When Will This Occur?** These entries will appear if a provider uses an EHR to chart a visit for a patient who was not scheduled in Partner. They may also appear if you schedule an appointment using your EHR instead of Partner and your EHR can not export appointment information to Partner.

## 6.6. Test ICD-10 Checkout

Run the "Test ICD-10" Checkout program (**checkouticd10**) to try posting a visit with ICD-10.




After choosing a sample patient, you can enter ICD-10 diagnoses and link procedures.

Test ICD-10 Checkout - Post Charges

PATIENT: Pebbles Flintstone PHYSICIAN: Crusher
VISIT DATE: March 20, 2014 BILLING:
VISIT REASON: Sick Call POS: Office

| | Diagnosis Name | | Procedure Name | # | ICD-10 | CPT | Charge |
|---|---|---|---|---|---|---|---|
| a | Otitis media, unspec | | OV Problem Focuse | | | | |
| b | Acute and subacute a | | OV Expanded Focus | | | | |
| c | Acute sinusitis, uns | | OV Detailed H&E | | | | |
| d | Acute tonsillitis, u | | OV Comprehensive | | | | |
| e | Cough | | Spirometry Simple | | | | |
| f | Oth viral agents as | | Spirometry Bronch | | | | |
| g | Bronchitis, not spec | | Tympanometry | | | | |
| h | Chronic rhinitis | | Rapid Strep Scree | | | | |
| i | Acute pharyngitis, u | | OV Sunday/Holiday | | | | |
| j | Acute upper respirat | | OV Saturday Diffe | | | | |
| k | | | | | | | |
| l | | | | | | | |
| m | | | | | | | |
| n | | | | | | | |
| o | | | | | | | |
| p | | | | | | | |

Charge Total: $ 0.00
Discount Total: $ 0.00 Cap Adjust: $ 0.00 This Visit: $ 0.00

Exit | Copay & Discount | Add'l Procs | Dates & Prices | Claim Info | Show Dx Names

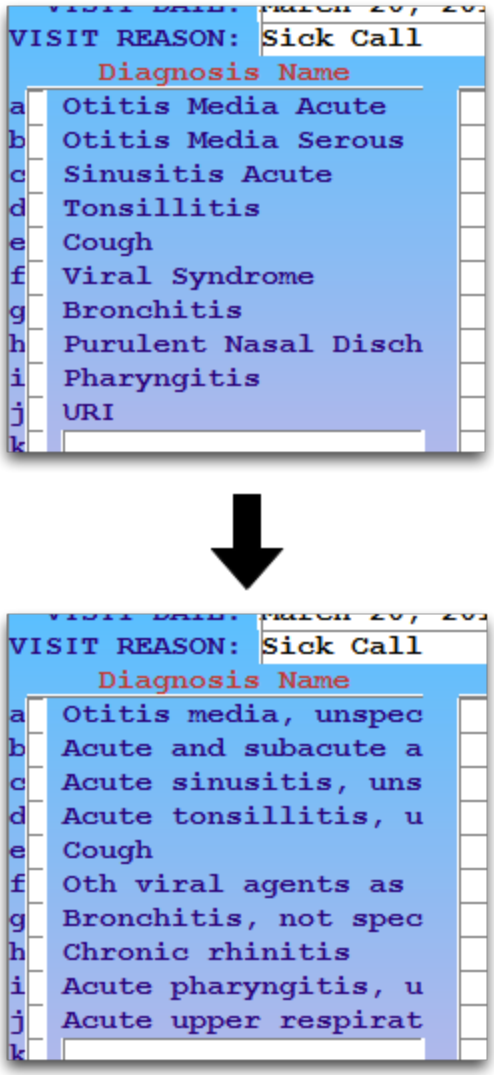
ICD-10 descriptions and codes will appear as you post.

As you try out ICD-10:

- **Don't Worry, Nothing Will Post:** Anything you do in the Test ICD-10 program is forgotten when you press **F12** or [**F1** - *Exit*]. The visit will not save to the patient's record and no claim will be batched. Also, all screens will behave as if it were *after* the ICD-10 changeover. The real **checkout** program will switch back and forth from ICD-10 to ICD-9 based on the date of service.
- **View Long Descriptions:** As you enter ICD-10 diagnoses, you can press [**F6** - *Show Dx Names*] to view a longer diagnosis field. This will be useful, as many ICD-10 diagnoses have long descriptions.

### 6.6.1 Charge Screen and SnapCode Configuration

When the new ICD-10 deadline takes place, Partner will automatically switch from displaying ICD-9 charge screens to ICD-10.




If your practice uses an EHR, then your EHR may fill out most of your charge screen; you might not use charge screens or SnapCodes. However, if you enter diagnoses or procedures manually (from a paper encounter form, for example), then you will see the ICD-10 charge screens in **checkout** once billing switches to ICD-10.

You can review and edit both your ICD-9 and ICD-10 configurations using the Table Editor (**ted**) and the Charge Screen Editor (**csedit**).

### ICD-10 in the Charge Screen Editor (csedit)

When you run the Charge Screen Editor, you can edit either ICD-10 or ICD-9 codes.

ICD-10 Charge Screen Editor

| | Charge Screen Name | Uses this Encounter Form |
|---|---|---|
| | Immunization Update | config/encount/encountform |
| | Injury | config/encount/encountform |
| | Lab | config/encount/encountform |
| | Medication Followup | config/encount/encountform |
| | Newborn | config/encount/encountform |
| | Pre-Op Exam | config/encount/encountform |
| | Recheck | config/encount/encountform |
| X | Sick | config/encount/encountform |
| | Weight | config/encount/encountform |
| | {Add New Screen - A} | |
| | {Add New Screen - B} | |
| | {Add New Screen - C} | |
| | {Add New Screen - D} | |
| | {Add New Screen - E} | |

To select a screen, place an X in front of it.
Press F4 to edit the selected screen.

Save and Quit | Scroll Backward | Scroll Forward | Edit Screen | ICD-9 csedit

You can toggle between ICD-9 and ICD-10 charge screens by pressing [**F5** - *ICD-9/ICD-10 csedit*] from the main **csedit** screen.

Select a charge screen and press [**F4** - *Edit Screen*] to review it and make changes.

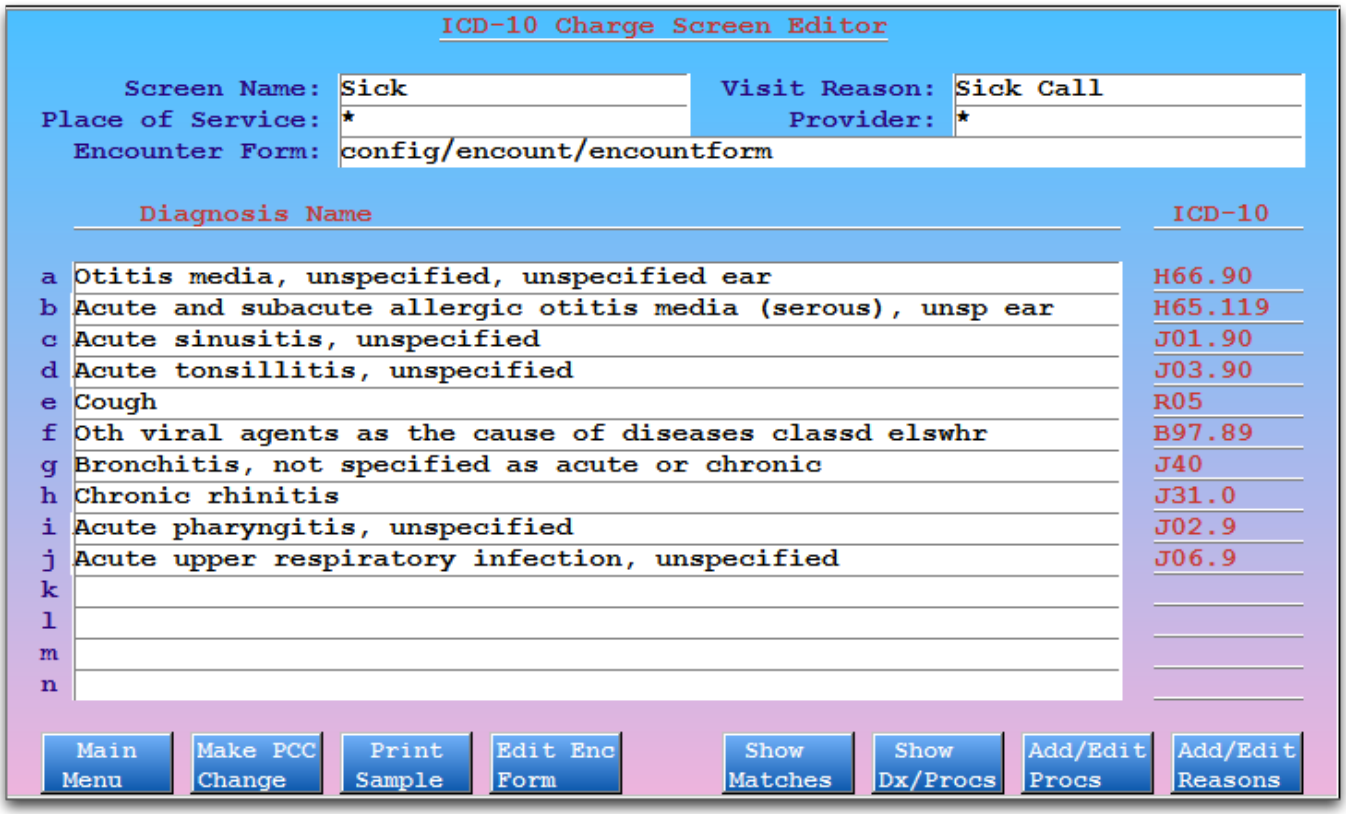
ICD-10 Charge Screen Editor

Screen Name: Sick
Visit Reason: Sick Call
Place of Service: *
Provider: *
Encounter Form: config/encount/encountform

| | Diagnosis Name | Procedure Name | ICD-10 | CPT |
|---|---|---|---|---|
| a | Otitis media, unspecifie | OV Problem Focused | H66.90 | 99212 |
| b | Acute and subacute aller | OV Expanded Focus | H65.119 | 99213 |
| c | Acute sinusitis, unspeci | OV Detailed H&E | J01.90 | 99214 |
| d | Acute tonsillitis, unspe | OV Comprehensive | J03.90 | 99215 |
| e | Cough | Spirometry Simple | R05 | 94010 |
| f | Oth viral agents as the | Spirometry Broncho Eval | B97.89 | 94060 |
| g | Bronchitis, not specifie | Tympanometry | J40 | 92567 |
| h | Chronic rhinitis | Rapid Strep Screen | J31.0 | 87880 |
| i | Acute pharyngitis, unspe | OV Sunday/Holiday Diff | J02.9 | 99054 |
| j | Acute upper respiratory | OV Saturday Differential | J06.9 | 99050 |
| k | | | | |
| l | | | | |
| m | | | | |
| n | | | | |

Main Menu | Make PCC Change | Print Sample | Edit Enc Form | Show Matches | Show Dx Names | Add/Edit Procs | Add/Edit Reasons

Press [**F6** - *Show Dx Names*] to work with a wider Diagnosis Name field.




**ICD-10 SnapCodes**

The Table Editor (**ted**) contains configuration sections for both ICD-9 and ICD-10 SnapCodes. You can review, edit, and create new SnapCodes for rapid entry of diagnoses and linked procedures.

After making changes (or creating new ICD-10 SnapCodes), you can test them in the **checkouticd10** program.

For more information, read the SnapCodes help article.

# 6.7. Customizable Charge Screens

If you use an EHR that integrates with Partner, then you may see the physician's selected diagnoses and procedures on the Post Charges screen in checkout.

Otherwise, your practice can select diagnoses and procedures. You can customize the default lists of diagnoses and procedures to make selecting them easier. Computer screens are too small to display the hundreds of different procedures and diagnoses that you may perform, so **checkout** brings up a list based on the visit reason or similar criteria.

Your practice's custom lists of per-visit diagnoses and procedures are called "charge screens".

## 6.7.1 Sample Charge Screens

If a patient is scheduled for a sick visit, Partner can automatically display your practice's custom "Sick" charge screen, which could include Otitis Media and other common sick diagnoses. For a well visit, you may have a Well charge screen that displayed 99393 along with immunization codes.

Here is a sample "Baby Well" charge screen from a PCC practice that incorporates both sick and well visit codes:

Checkout - Post Charges  Step 3 of 4

PATIENT: Pebbles Flinstone  PHYSICIAN: Dr. Casey
VISIT DATE: November 5, 2007  BILLING: Dr. Casey
VISIT REASON: Baby Well  POS: Office

| | Diagnosis Name | | Procedure Name | # | Dx Code | CPT Code | Charge |
|---|---|---|---|---|---|---|---|
| ax | Well Infant/Child Ca | a | Well Child | 1 | V20.2 | 99393 | $ 0.00 |
| b | Otitis Media | | OV Expanded Focus | | | | |
| c | | | OV Detailed H&E | | | | |
| d | | a | Hep B 0-19 Years | 1 | V20.2 | 90744 | $ 0.00 |
| e | | a | DTaP | 1 | V20.2 | 90700 | $ 0.00 |
| f | | | IPV | | | | |
| g | | a | MMR Vaccine | 1 | V20.2 | 90707 | $ 0.00 |
| h | | a | 1 Imms Admin | 1 | V20.2 | 90471 | $ 0.00 |
| i | | a | 2+ Imms Admins | 2 | V20.2 | 90472 | $ 0.00 |
| j | | | Imm Admin w/ Coun | | | | |
| k | | | | | | | |
| l | | | Hearing Screen | | | | |
| m | | | Vision Screen | | | | |
| n | | | | | | | |
| o | | | | | | | |
| p | | | | | | | |

Discount Total: $ 0.00  Capitation Adjust: $ 0.00
This Visit: $ 0.00

Next Step | Copay _ Discount | Hospital Details | Claim Info | Patient Schedule

This screen displays the v20.2 Well Infant diagnosis code, along with Otitis Media as a sample common diagnosis. For procedures, the 99393 appears along with other handy procedures, such as the immunizations given to babies. The screen also has plenty of blank spaces for less common diagnoses and procedures that occur during a visit.

Many offices design a different Well Child screen for every age physical. That allows them to specify which immunizations appear, for example.

**Automatic By Age:** Partner can place the correct physical procedure for the child's age on the charge screen automatically. Partner users should not need to hunt for the correct age-specific physical procedure code.

Here is a practice's custom "Asthma Recheck" charge screen:

Checkout - Post Charges  Step 3 of 4

PATIENT: Pebbles Flinstone  PHYSICIAN: Dr. Casey
VISIT DATE: November 5, 2007  BILLING: Dr. Casey
VISIT REASON: Asthma Recheck  POS: Office

| | Diagnosis Name | | Procedure Name | # | Dx Code | CPT Code | Charge |
|---|---|---|---|---|---|---|---|
| a | Asthma Chron Obstr w | | OV Problem Focuse | | | | |
| bx | Asthma Extrinsic w/A | | OV Expanded Focus | | | | |
| c | | b | OV Detailed H&E | 1 | 493.02 | 99214 | $ 87.00 |
| d | Asthma Mild Persist | | Spirometry Bronch | | | | |
| e | Asthma Mod Persist | b | Spirometry Simple | 1 | 493.02 | 94010 | $ 70.00 |
| f | Asthma Extrinsic w/A | | Respiratory Flow | | | | |
| g | | | | | | | |
| h | | b | Nebulizer Treatme | 1 | 493.02 | 94640 | $ 35.00 |
| i | | b | Nebulizer Repeat | 2 | 493.02 | 94640-76 | $ 70.00 |
| j | | | | | | | |
| k | | | | | | | |
| l | | | | | | | |
| m | | | | | | | |
| n | | | | | | | |
| o | | | | | | | |
| p | | | | | | | |

Discount Total: $ 0.00  Capitation Adjust: $ 0.00
This Visit: $ 262.00

Next Step | Copay _ Discount | Hospital Details | Claim Info | Patient Schedule

**Custom Length, More Screen Space:** The examples above show room for 16 diagnoses and 16 procedures. If you make your Partner window larger, **checkout** can show up to 23 of each. Contact PCC Support to learn more.

## 6.7.2 Edit Charge Screens

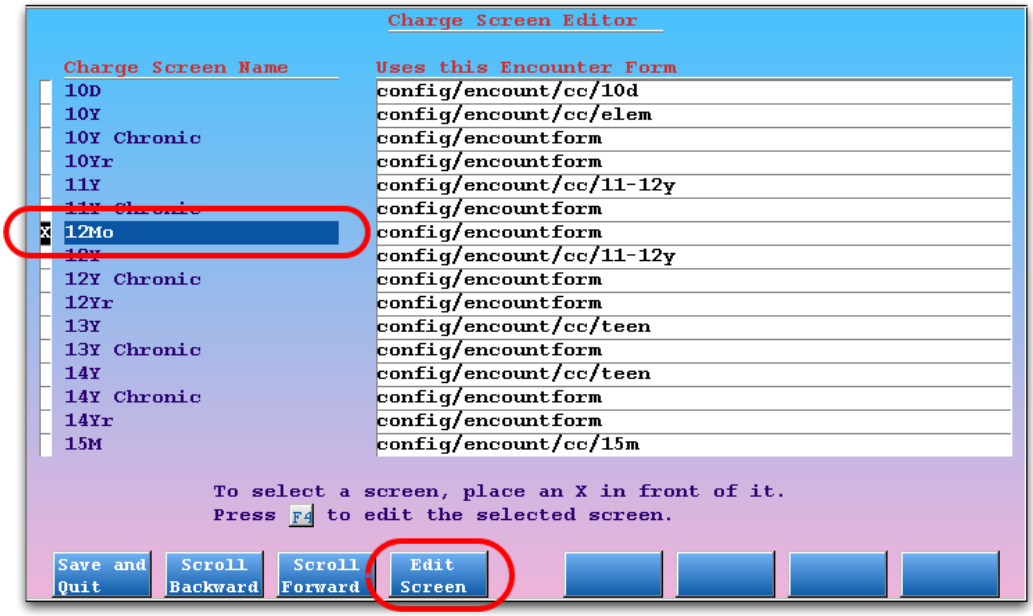
Use the Charge Screen Editor (**csedit**) to edit your charge screens or make changes to an existing charge screen.

You can run **csedit** from a command prompt or by selecting the **csedit** option from your Partner Configuration window.

Partner Configuration

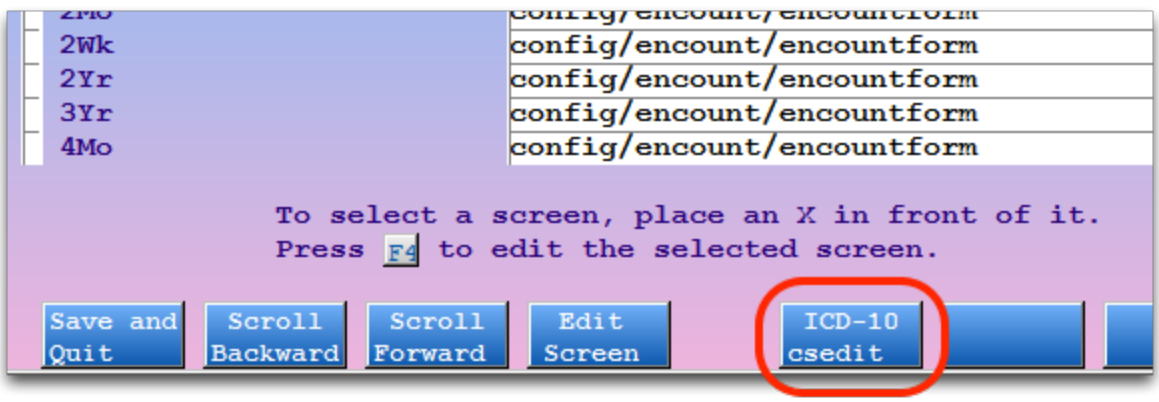
| | |
|---|---|
| Table Editor | (ted) |
| Check Insurance Groupings | (byins) |
| Check Procedure Groupings | (byproc) |
| Check Provider Groupings | (byprov) |
| Insurance Configuration | (insconfig) |
| Add/Edit Provider IDs | (provids) |
| Edit Form Letters | (waffle) |
| Edit Charge Screens/Enc Forms | (csedit) |
| Check Immunization Rules | (immrules) |
| Edit Provider Aging Groups | (apedit) |
| Show Encounter Form Variables | |
| Print Encounter Form Variables | |
| Show Form Letter Variables | |
| Print Form Letter Variables | |

On the main screen, you can select from your existing charge screens and press [**F4** - *Edit Screen*] to make a change.




To learn more about **csedit** and editing charge screens, read the example help article, "Add a SnapCode to a Charge Screen".

**ICD-9 and ICD-10:** During 2014, Partner will prepare for the ICD-9 to ICD-10 migration by duplicating your existing charge screens and making new ICD-10 versions. When you run the **csedit** program, you will be able to switch between editing the charge screens with ICD-9 codes and ICD-10 codes by pressing [**F5** - *ICD-10 cse-dit*].



# 7. Post Personal Payments and Adjustments

Use **pam** to post personal payments or adjustments to an account. The **pam** program makes it fast and easy to post a stack of checks or a single copay.

Payments typically posted through **pam** include personal checks, money orders, credit card payments, and cash. Payments from insurance companies are posted using the Post Insurance Payments (**pip**) program.

The sections below will teach you how to post a payment and apply it towards a charge. You will also learn special features and tools you can use during each step of the process.

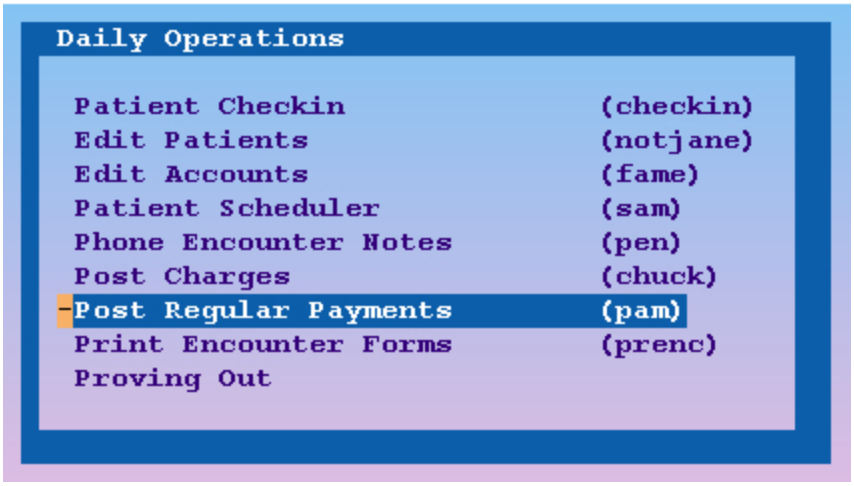
**Not Just For Payments:** While **pam**'s primary purpose is to post payments, it can also post account adjustments. Any adjustment that behaves like a payment and would result in a decreasing balance should be posted in **pam**. Adjustments that behave like refunds (or procedures) and increase an account's balance (or remove a credit) should be posted in the **refund** program.

## 7.1. Quickstart: Post a Payment

Read the steps below for a complete introduction to **pam**. Follow the steps to post a personal check and apply it to several old balances. Then read the sections below to learn more about the tools and features of **pam**.

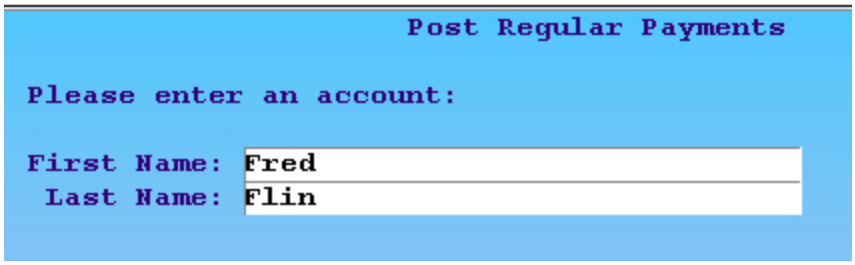
**Step 1: Start pam**

You can access **pam** from the "Daily Operations" window of your Partner windows. You can also type **pam** at a command prompt.




**Step 2: Find an Account**

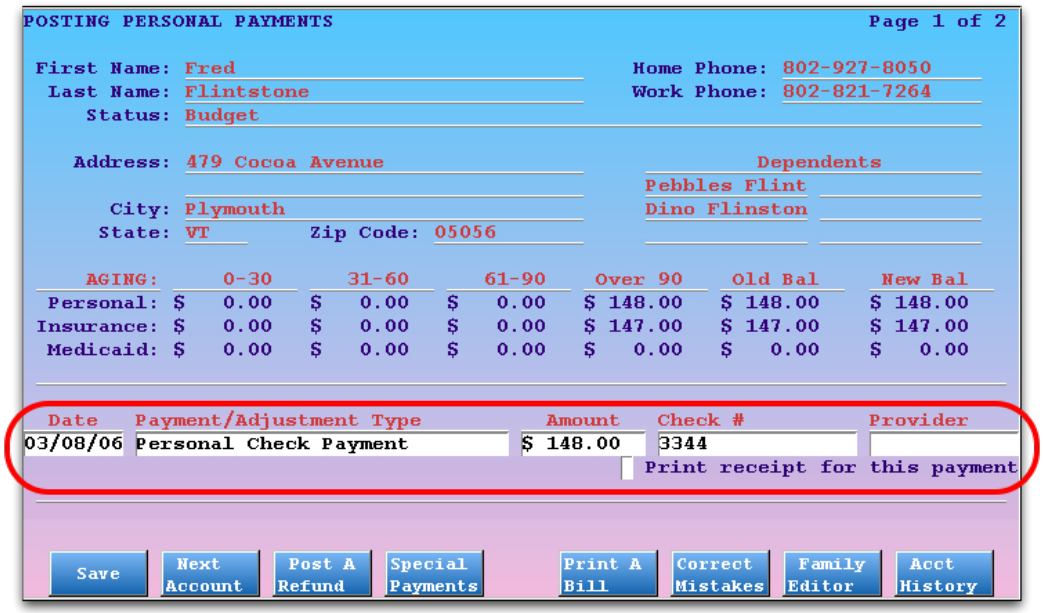
Enter the account's name into the find screen:




To learn more about finding patients and accounts, read *Finding Patients and Accounts*.

### Step 3: Enter Basic Payment Information

Enter the date of the payment, the payment type, the amount, the check number (if applicable) and optionally a provider. Press the **Tab** or **Enter** keys to move forward one field, press the **Backspace** or left arrow keys to move back one field.



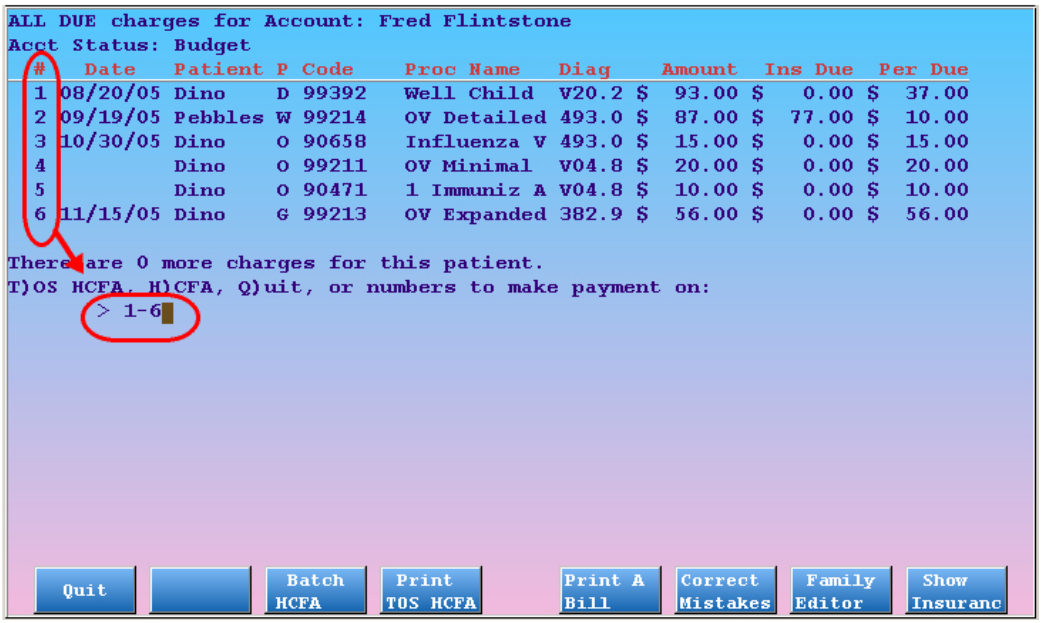

**Automatic Date:** Today's date is entered for you automatically. If you wish to record a previous date of payment, simply press **Backspace** and change the date. The date can be written without slashes, i.e. "092205" for September 9th, 2005, and you can use the abbreviations of "y" for yesterday and "t" for today.

### Step 4: Press [F4 -- *Link Payments*]

Press **F4** to view the list of outstanding charges to which your new payment may be applied.

### Step 5: Select Charges to Apply the Payment Against

Enter the number, or range of numbers, of the charges towards which you wish to apply your new payment. To help you make your selection, the screen displays the amount of each charge that is currently pending insurance and the amount due personal. In most cases, you will apply the full amount of a personal payment to the oldest charges first.




You can use a range of numbers or commas to select specific charges. Press **Enter** to continue.

**Where is the Charge I Need?** The screen will only show unpaid charges that are at least partly personal. Paid charges or charges that have no personal balance will not appear. If you can not find the charge you expected to see, press [**F8** -- *Show Insurance*] to view both insurance and personal charges. You can also press [**F6** -- *Correct Mistakes*] or [**F7** -- *Family Editor*] (from which you can run a Collection report or Family History report) to analyze the account and find out when the charge was paid off.

### Step 6: If Necessary, Indicate How to Apportion the Payment

If you selected charges that exceed the value of the payment, you can use the next screen to indicate how much of the payment should be applied towards each charge.

ALL DUE charges for Account: Fred Flintstone  Date of Payment: 03/08/06
Acct Status: Budget

| DATE | CODE | PROCEDURE | CHARGE | APPROVED | PAYMENT | ADJUST | BALANCE |
|---|---|---|---|---|---|---|---|
| 08/20/05 | 99392 | Well Child 1-4 yrs | $ 37.00 | $ 37.00 | $ 37.00 | | $ 0.00 |
| 09/19/05 | 99214 | OV Detailed H&E | $ 87.00 | $ 87.00 | $ 10.00 | | $ 77.00 |
| 10/30/05 | 90658 | Influenza Vac 36m + | $ 15.00 | $ 15.00 | $ 15.00 | | $ 0.00 |
| | 99211 | OV Minimal | $ 20.00 | $ 20.00 | $ 20.00 | | $ 0.00 |
| | 90471 | 1 Immuniz Admin W/O | $ 10.00 | $ 10.00 | $ 10.00 | | $ 0.00 |
| 11/15/05 | 99213 | OV Expanded Focus | $ 56.00 | $ 56.00 | $ 56.00 | | $ 0.00 |
| | | TOTALS: | $ 225.00 | $ 225.00 | $ 148.00 | | $ 77.00 |

Payment Type: Personal Check Paymen

Check Number: 3344

Save Payments | View Account | View Patient

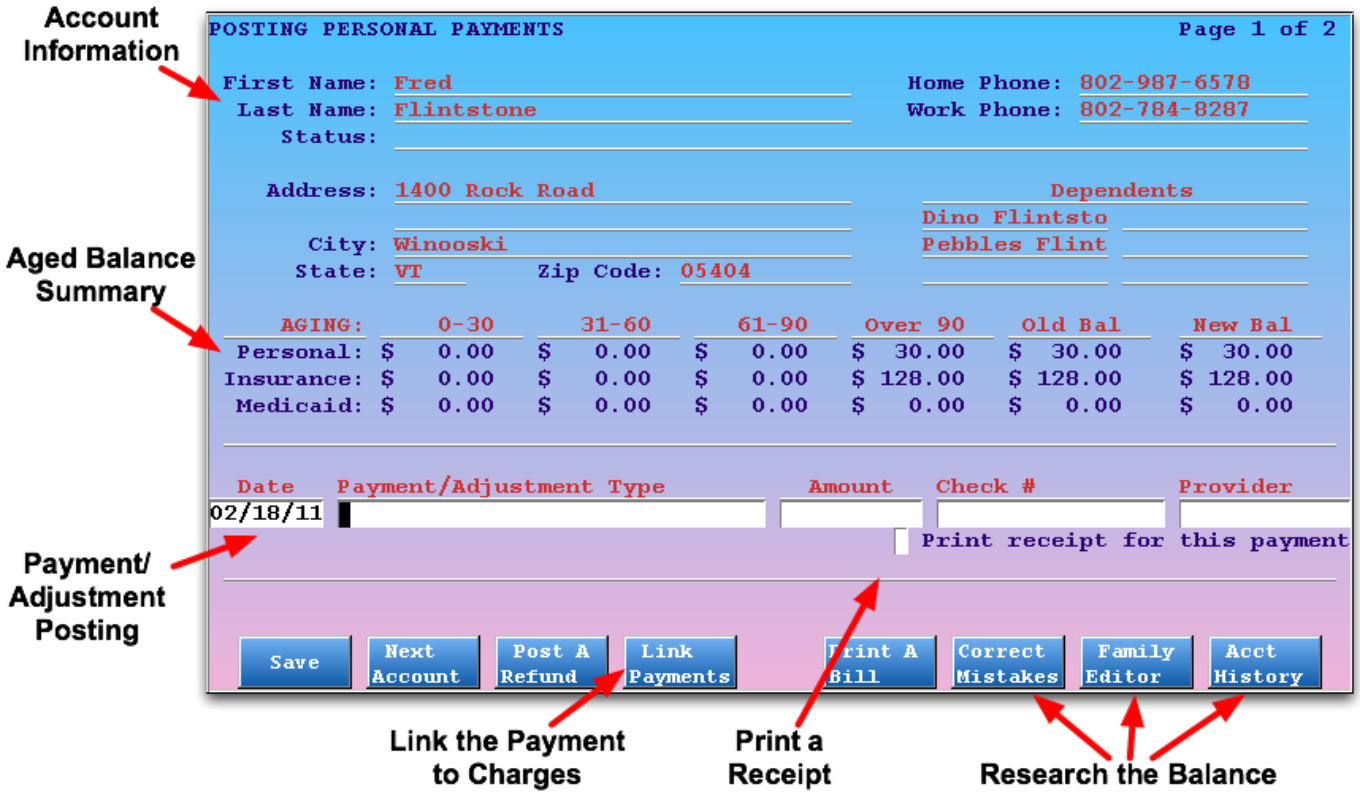
**Customized Behavior:** You can configure Partner to automatically distribute the payment among the charges or to apply the money towards the oldest charge first. Contact PCC for more information.

**Step 7: Press [F1 -- *Save*]**

Press **F1** to save your payment and return to the main **pam** screen. Your payment has been posted, and you will see the updated "New Balance" column.

## 7.2. Posting Payment Screen

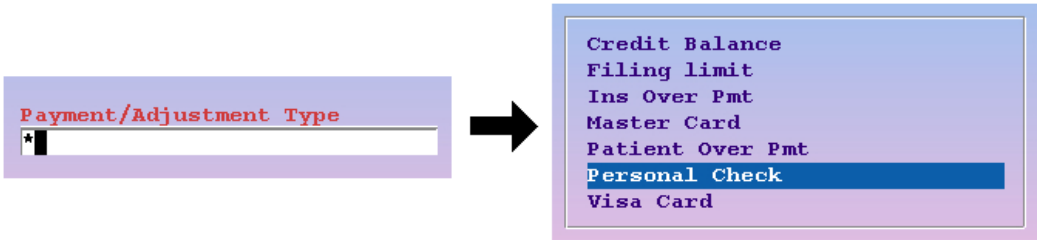
When you first run **pam**, it asks you for an account name. Once you have found an account, you are presented with the payment-entry screen:




This screen contains useful demographic information for the account, provides links to several other Partner programs, and allows you to begin posting a payment by entering information in the available fields.

The demographic information includes account name and contact information. You can also review the Status field, which may list important billing statuses for the family, such as "Overdue" or "Bad Check." The screen also shows you a list of dependents to the family and a balance summary, aged by transaction date, for Personal, Insurance, and Medicaid balances on the account.

**Look-Up Fields:** Both the "Payment/Adjustment" field and the "Provider" field are look-up fields. You can enter an abbreviation or use an asterisk (*) to look at a list of possible entries. Common answers for the "Payment/Adjustment" field are "Personal Check," "Cash," or "Courtesy Adjustment."




**More Demographic Information:** Press **Page Down** to view a quick summary of other account demographic information, including insurance information and recent account notes. You can press **Page Up** to return to this screen. You can also press [**F7** -- *Family Editor*] to run **fame** and make changes to the account information.

**Link Payments:** Whenever you post a payment, you should use **pam**'s *Link Payments* feature to link payments to the particular charges they are paying off. In other words, you should *specify* for which charges the payment is intended. If you *don't* press [**F4** -- *Link Payments*], and press **F1** to save the payment, you will be posting an unlinked or open-item payment. Open-item payments are still applied towards the account's oldest personal

balance, but they may float around on an account, making it difficult to track and understand an account's history and remaining balance.

**New Balance:** Once you have posted a payment, the final column in the balance summary, "New Bal" will be updated with the accounts new outstanding balance:

| Old Bal | New Bal |
|---|---|
| $ 140.00 | $ 0.00 |
| $ 0.00 | $ 0.00 |
| $ 0.00 | $ 0.00 |

**Posting Personal Overpayments/Credits:** Posting a personal overpayment in Partner is simple. Use **pam** to post a payment and do not press [**F4** -- *Link Payments*]. The account will have a credit, which you can then refund or leave on the account until the next visit. The credit will automatically be applied to any outstanding balances on the account, and you can link it to the charges by running **oops**.

**Get a Receipt:** Select "Print receipt for this payment" to generate a paper receipt when you press **F1**.

**Function Keys**

[**F1** -- *Save*]

Press [**F1**] to save any payments you have entered as open-item payments and quit **pam**. You can then enter a new account name or press **F12** to quit and run a different program. If you have entered a payment amount, you should consider pressing [**F4** -- *Link Payments*] and assigning the payment to specific charges before pressing **F1**.

[**F3** -- *Post a Refund*]

Press **F3** to run the **refund** program. Use **refund** to post refunds or any other adjustments that take money away from an account or increase the balance.

[**F4** -- *Link Payments*]

Press **F4** after entering a payment type (and check number, if desired) to select outstanding charges to which the payment should be applied. If you post a payment without using **F4**, it will be an open-item payment that Partner will automatically apply to the oldest unpaid charge.

**Function Keys While Specifying Payments:** On the first Link Payments screen, function keys are available to batch claims, print paper claims, print bills, run **oops**, and run the Family Editor (**fame**).

[**F5** -- *Print a Bill*]

Press **F5** to print a paper bill, for any desired date range, for the account.

[**F6** -- *Correct Mistakes*]

Press **F6** to run **oops**, the "Correct Mistakes" program. In **oops**, you can change the pending status of charges, delete payments or charges, and adjust various visit information. If you need to link or unlink payments from charges, run **oops**. For full documentation on **oops**, read *Correct Mistakes*.

[**F7** -- *Family Editor*]

Press **F7** to run **fame**, the Family Editor. In **fame**, you can change account demographic information, including mailing address and insurance policy information. The Family Editor also provides access to the *Collection Report*, which can help you understand an account's outstanding balances. For full documentation on **fame**, read *Editing Patients and Accounts*.

[**F8** -- *Acct History*]

Press **F8** to run **tater**, the Account History report. This report, which can be restricted by date and type of transaction, shows you a history of all transactions on an account.

# 8. Phone Encounter Notes

## 8.1. Introduction: Triage Phone Calls

The Phone Encounter Notes program (**pen**) is a powerful tool for handling patient phone calls. While you are on the phone with a patient, this software allows you to view patient information, record notes from the call, and perform many other useful functions.

Many offices use **pen** as a workstation for anyone answering the phone. Nurses working triage or schedulers can use **pen** to make a record of a call and jump directly into medical information or scheduling.

Here are some of the many tasks you can perform in **pen**:

- Document patient phone calls
- Review notes from all previous phone calls regarding a patient
- Review patient histories, check immunization records, print form letters or schedule a patient while recording call details
- Track the frequency of calls by certain patients
- Assign and track a status for each phone conversation
- Generate a summary of calls by date, patient, status, or person who took the call
- Work down a list of outstanding calls

**The pen** program is a great tool for triaging incoming calls and it can fit seamlessly into your office's daily routine.

## 8.2. Quickstart: Take a Phone Call and Record Details

In the procedure below, you will learn how a user handles an incoming phone call using the **pen** program.

**Step 1: Run pen**

Start the **pen** program by selecting "Enter/Review Phone Encounters" from your Daily Operations window or by typing **pen** at a command prompt. You are now ready for the phone to ring.

**Step 2: Press [F1 -- *Add/Edit Encountr*]**

When the phone rings, press **F1** and enter the patient's name. You can also find a patient using their phone number or other criteria. Read *Finding Patients and Accounts* for more information.

**Step 3: Optional: Update Demographic Information, Schedule, Other**

On the Patient Demographics screen, you can view basic information about the patient:

Patient Demographics

First Name: Pebbles
Last Name: Flinstone
Physician: None
Status: Chronic
Born: Dec 25, 1997
Age: 11 yrs, 1 mo
Sex: Female

SSN :
School :
Alt Name : Rubble
Chart # : 09533

Major: Atten Def Dis w Hype
Diagnoses: Posttraumatic Stress
All Rhinitis
Allergies:

Patient Lives With:
Wilma Flinstone
1862 Milky Way
Winooski, VT 05404

Send Bill To:
Fred Flinstone
479 Cocoa Avenue
Plymouth, VT 05056

Home Phone: 802-987-6578
Work Phone: 802-784-8287
Temp Phone: 802-878-9892
Date of Last Visit: 02/08/09
Date of Last Physical: 02/08/09
Date Due for Next Physical: 02/06/11

Next Patient | Edit Patient | Edit CustAcct | Add PhoneEnc | Imms Record | Schedule Patient | Patient Forms | Pedi Advisor

Use the function keys on this screen to quickly access other useful Partner programs, like the Scheduler (**sam**) and Pediatric Advisor. Below is a list of the functions you can perform from this screen.

[**F1** -- *Next Patient*]

Press **F1** to save your work and begin the next call.

[**F2** -- *Edit Patient*]

Press **F2** to run **notjane**, the Patient Editor, for this patient.

[**F3** -- *Edit CustAcct*]

Press **F3** to run **fame**, the Family Editor, for the custodian account of this patient.

[**F4** -- *Add PhoneEnc*]

Press **F4** to add a new phone encounter note or review and edit old phone encounter notes for this patient.

[**F5** -- *Imms Record*]

Press **F5** to review or update the patient's immunization history.

[**F6** -- *Schedule Patient*]

Press **F6** to schedule an appointment for the patient using either **sam**, Partner's scheduling program, or **encount**. Contact PCC to configure the scheduling method for **F6**.

[**F7** -- *Patient Forms*]

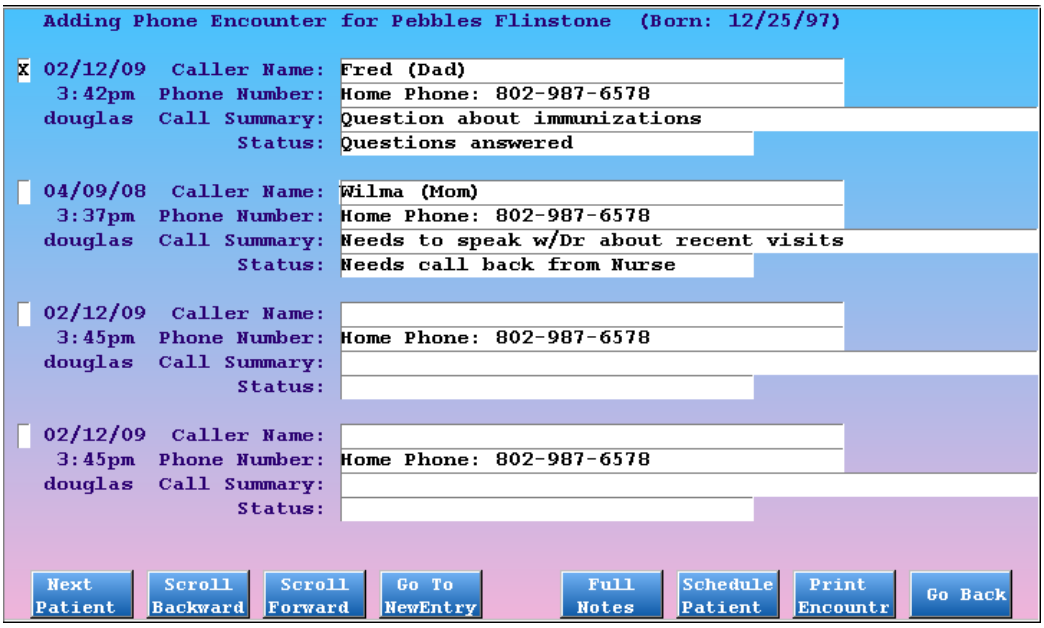
Press **F7** to access the patient form-letter page and print form letters for the patient.

[**F8** -- *Pedi Advisor*]

Run the Pediatric Advisor, if it is installed. Pediatric Advisor is an optional Partner module that contains a library of pediatric handouts.

### Step 4: Press [F4 -- *Add PhoneEnc*]

When you are ready to add a new phone encounter note or review an old one, press **F4**. You will see a list of all recorded encounters for this patient. When the screen appears, the most recently recorded calls will be at the top of the list:



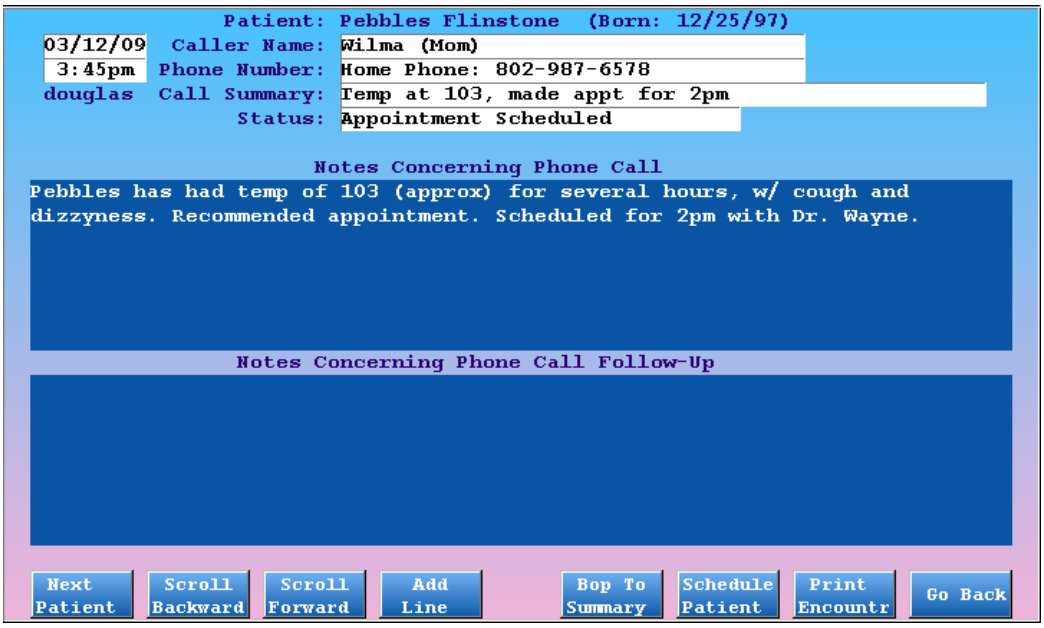

### Step 5: Create a New Phone Encounter

Select an empty encounter slot and enter a few details from the current call. Enter the name of the caller, and if desired, their relationship to the patient. You should also verify the caller's phone number, in case you get disconnected, or a provider needs to call them back later.

**Note:** If the screen is full of phone encounters already, press [**F4** -- *Go To New Entry*] to automatically select the next empty slot.

### Step 6: Press [F5 -- *Full Notes*]

Press **F5** to bring up the Full Notes screen. Use the "Notes Concerning Phone Call" field to record notes as the phone call progresses.




If you need more room for notes, press **F4** to add a line.

**Step 7: Add Summary and Status**

When finished entering notes, press [**F5** -- *Bop To Summary*] to enter/update the one-line summary of the call and the status (closed, waiting for callback, etc). The status can later be used for creating a list of calls needing a callback.

**Step 8: Optionally, Perform Other Actions for the Patient**

If the call requires you to update demographic information, schedule appointments, mail out form letters, or perform other functions, press [**F8** -- *Go Back*] twice to get back to the Patient Demographics screen. From there you have access to many other Partner programs.

**Step 9: Save Your Note and Continue to the Next Patient**

When finished with this phone encounter, press [**F1** -- *Next Patient*] to save your work and prepare for the next call.

# 8.3. Run the Phone Encounter Notes Program

You can run the **pen** program from the Daily Operations window in your Partner windows. Select "Enter/Review Phone Encounters".

You can also type **pen** at a command prompt. Some users remember the "**pen**" command because the **pen** program replaces the *pen* and paper they previously used to take notes for a call.

When you start **pen**, you will see the main screen shown below. From here you can jump into each of the **pen** functions described below.

**Function Keys**

[**F1** -- *Add/Edit Encounter*]

Press [**F1**] and enter a patient name to visit the Patient Demographics screen. From there, you can add new phone encounter notes or update existing ones. You can also jump into different programs for the patient you select. Read below for a detailed tutorial.

[**F2** -- *Review Encounter*]

Press [**F2**] to generate a list of phone encounters (based on desired criteria) and select those you would like to follow up on. See below for more information.

[**F3** -- *Print Encounter*]

Press [**F3**] to generate a list of phone encounters based on various criteria. You can then view the list, send it as an e-mail, or print it. See below for more information.

# 8.4. Call Back or Update a Phone Encounter Note

While many calls can be resolved immediately, others will need to be left open and addressed later. The parent may need to call back with more information or they may require a callback from the doctor. In either case, you may later need to update/edit an existing encounter record.

**Step 1: Run pen and Select the Patient**

As described in the procedure above, run **pen**, press [**F1** -- *Add/Edit Encountr*], and enter the patient's name. You will see the Patient Demographic screen filled with information relating to the patient.

**Step 2: Press [F4 -- *Add PhoneEnc*]**

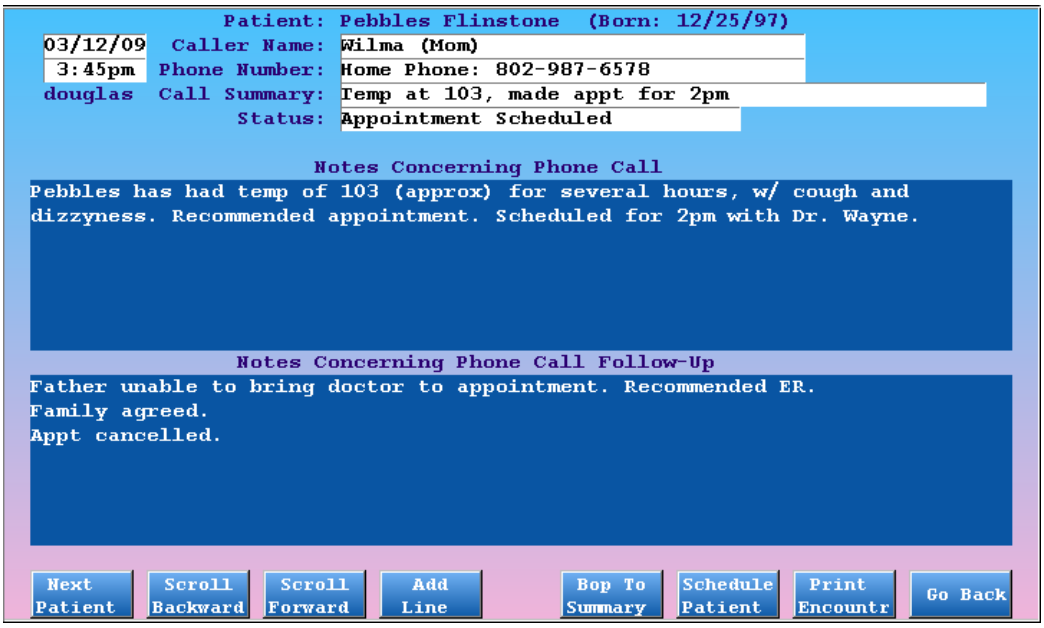
Press **F4** to access all recorded encounters for this patient. When the screen appears, the most recently recorded calls will be at the top of the list.

**Step 3: Find the Relevant Phone Encounter Note**

Select the encounter you wish to modify. You may have to press [**F3** -- *Scroll Forward*] to scroll down through the list of encounters to find the one you want.

**Step 4: Press [F5 -- *Full Notes*]**

Press **F5** to bring up the Full Notes for that encounter. Enter any new notes in the "Follow-Up Notes" field. If necessary, you can scroll through the original notes for specifics about the original call.



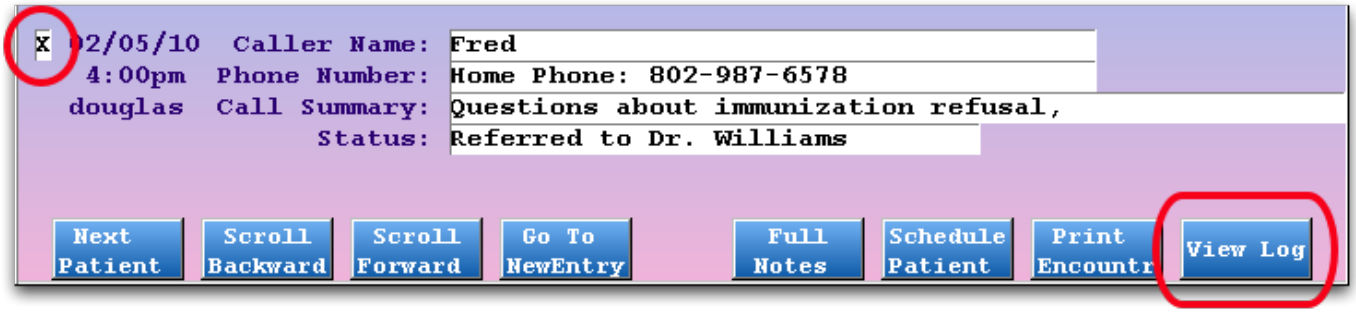

**Step 5: Update the Call Status**

If you have performed some action relating to this call, you should update the Status of the call.

**Step 6: Press [F1 -- *Next Patient*]**

When you are finished updating the encounter, press **F1** to save your changes and move on to the next patient.

**Phone Encounter Note Change Logging:** Every time a user changes a phone encounter note in **pen**, Partner records the change and logs the previous version of the phone note. You can review the log by selecting any note and pressing [F8 - View Log].




# 8.5. Review Multiple Phone Encounter Notes

The Phone Encounter Notes program includes an easy way to work with multiple encounters. If the morning rush included several calls which require a provider's attention, you can generate a convenient list of those encounters and work on that list, item by item. You can also pull up all the encounter notes that a single user entered or restrict by a date range.

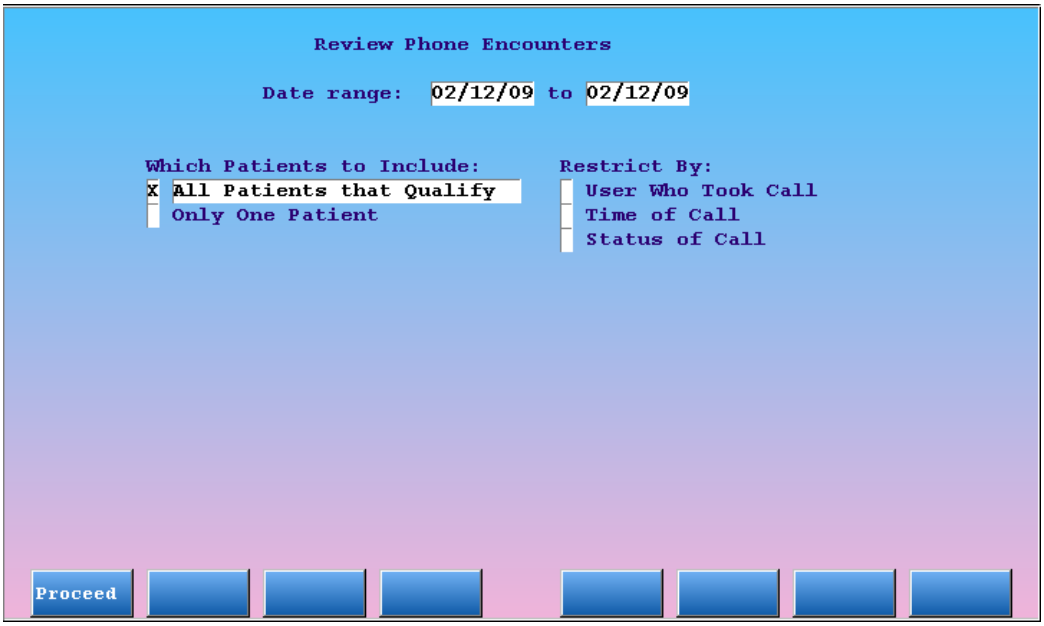
Follow the procedure below to create an interactive list of phone encounter notes:

**Step 1: Run pen**

**Step 2: Press [F2 -- *Review Encountr*]**

**Step 3: Select Criteria**

Choose the criteria for the phone encounter notes you need to review.




Set the date range for encounters entered today or for the dates you need. In most cases, you will want to work with "All Patients that Qualify," though you have the option of reviewing one patient at a time. If you wish to review all calls entered by a certain user or all calls during a time of the day,

choose those options. Finally, use the "Status of Call" option to restrict by whether the call is open or marked for the doctor's attention.

**Step 4: Enter Criteria Guidelines**

If you chose to exclude by the "Status of Call," **pen** will ask you to select the status by which you wish to restrict. Choose whatever call status you wish to review.

For example, a provider may wish to work with those encounters that have a status of *Needs To Speak With Doctor*. Highlight the desired status from the list and press **Enter** to include it in the report.

You may select several statuses. When done selecting, press **F1** to generate a list of encounters matching your criteria.

**Step 5: View Results and Select a Call**

The resulting list contains all of the phone encounters that meet your criteria. Select a call with which you need to work and press [**F1** -- *Review Entry*].

**Step 6: Work With Patient, Update the Call Information**

Make additions or changes to the phone encounter note you selected. You can call the patient, review the original notes, add follow-up notes, and use the function keys on the demographics page to access other parts of Partner. When finished, press [**F1**] to save your work. You will be brought back to this list where you can select the next encounter and continue working.

# 8.6. Print a List of Phone Encounter Notes

Press [**F3** -- *Print Encounter*] from the main **pen** screen if you need to print some encounter notes.

Indicate what type of encounters you are interested in, select a destination for the report (screen, mailbox, or printer), and then press [**F1**].

The output is a detailed report on every encounter matching the given criteria. It contains all information entered for each encounter. When printed, each encounter comes out on a separate page. When viewed on the screen or in your mailbox, the report will look something like this:

```
Patient: Boynton, Blake                 PCC # 13543
Date: 09/01/98  Time: 11:20am
Caller: Blake senior
Phone: Custodian Home Phone: 391-3530
Status: Call if Worsens

Call Answered By: scott
CALL SUMMARY: Blake has developed a rash

Detailed Caller Notes:
    Spotted, red rash first noticed last night, has gotten worse over
    night.  Puffy, sore to the touch.  Recommended Calamine lotion,
    call back in 24 hours if not better.


Detailed Follow-Up Notes:
```

# 8.7. Customize the Phone Encounter Notes Program

There are several ways of customizing the **pen** program to meet the needs of your office. For help with any of these advanced options, contact PCC at 1-800-722-1082 or <support@pcc.com>.

- **Add Your Own Status Indicators:** The Call Statuses table in **ted** stores the different status indicators you can use with your phone encounters. Some standard indicators include *Open, Closed, Needs Doctors Attention,* and *Appointment Scheduled.* As encounters are entered, they should be assigned a status indicators for easy sorting and follow-up later on. You can add new status flags that meet the flow of your office.

    1. Run **ted** and select the Call Statuses table.
    2. Press **a** to add a new entry, or **c** to clone an existing entry.
    3. Fill in the name of the new status and then press **F1** to save your work.

- **Retiring Old Status Indicators:** You may eventually wish to retire a status indicator that you no longer use. As with any other Partner table, we caution you against replacing old, unused entries with more useful ones. Renaming entries can have a significant (and undesirable) effect on past encounters, so please do not reuse your table entries.

  Instead, retire unwanted status indicators by inserting a tilde (~) at the beginning of the status's name. For example, *See Mary* becomes ~*See Mary*. The tilde makes the status inaccessible for future use.

- **Changing Your Encounter Printout: pen** prints a special form letter when you print out a single phone encounter note. The default form letter can be changed to meet the needs of your office. Contact PCC at (800)-722-1082 or support@pcc.com for help editing your phone encounter note form.

- **Change the Width of your Encounter Notes:** The Full Notes screen shows 80 characters on each line

of notes. The printed width of these notes, however, can be set to any desired size. This may be useful if you print out phone encounter notes regularly and desire a certain format. Contact PCC at (800)-722-1082 or <support@pcc.com> for assistance.

# 9. Immunizations in Partner

Partner keeps an immunization record for every patient. The record is based on charges posted during **checkout** or on manually entered data. If immunizations are tracked consistently, Partner can produce automatic school forms, warn a provider that a patient may be missing an immunization, and even help you find all patients who had an injection from a certain lot number and manufacturer.

Read the sections below to learn about the **imms** and **nimms** programs, used for tracking and reporting on a patient's immunizations.

## 9.1. Review and Print an Imms Record

Families often need immunization records for school or camp. You may also need to quickly check on what date a patient had a certain immunization. Follow the procedure below to run **imms**, review dates, and generate a school form.

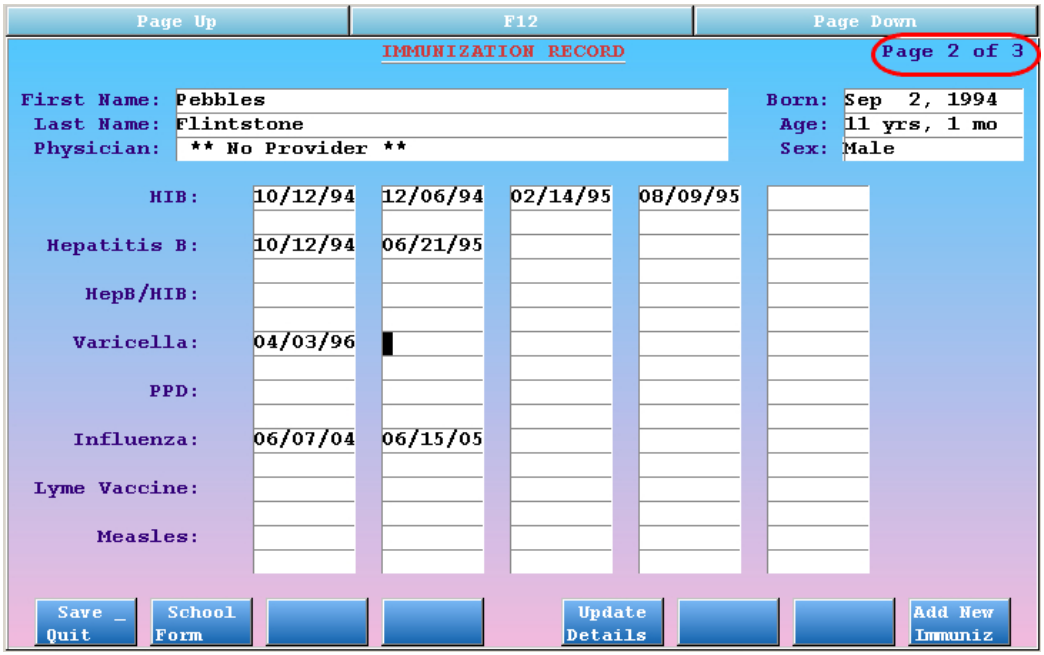
### Step 1: Run imms

You can run **imms** from the Patient Editor (**notjane**) and Phone Encounter Notes (**pen**) programs.

You can also type **imms** at a command prompt and then enter a patient name.

### Step 2: Review Immunization Dates

The **imms** program lists every type of shot your practice has ever performed. There will be several pages of immunizations:



Dates appear next to every shot that this patient has received, assuming the record is kept up-to-date. Press **Page Down** to cycle through each page.

**Step 3: Print an Immunization Record**

Press [**F2** -- *School Form*] to print an immunization record. The immunization record will map all of the different shots to specific immunizations. You won't see "Measles" as well as "MMR," as Partner knows that an MMR injection counts for Measles, Mumps, and Rubella.

A sample school form appears below.

**Step 4: Press F12 to quit imms**

**Important:** You should compare the immunization printout with the patient's chart record before giving it to them. The patient chart is the formal medical record for a patient.

Bedrock Pediatric Associates

IMMUNIZATION RECORD

FOR: Pebbles Flinstone
14 Sunset Rd
Waitsfield, VT 05673

DATE: November 15, 2004
AGE: 3 yrs, 3 mos
BIRTH DATE: July 20, 2001

Immunizations on the record for Pebbles Flinstone:

| TYPE | BASIC SERIES | | | BOOSTERS |
|---|---|---|---|---|
| DPT, TD, Td | 10/17/01 | 12/20/01 | 02/17/02 | 04/10/03 |
| Polio | 10/17/01 | 12/20/01 | none | |
| Measles | none | | | |
| Mumps | none | | | |
| Rubella | none | | | |
| Hemophilus B | 10/17/01 | 12/20/01 | 02/17/02 | 12/15/02 |
| Hepatitis B | 10/17/01 | none | none | |
| TB | none | | | |
| Varicella | 08/20/02 | | | |
| Rotavirus | none | none | none | |
| Lyme Vaccine | | | | |

Pebbles's last physical exam was September 25, 2000.

Bedrock Pediatric Associates
1 Main Street, Suite 7
Winooski, VT 05404

(802) 846-8177

Attach to school forms.

# 9.2. Add Immunizations to a Patient's Record

There are four ways to add an immunization to a patient's immunization record.

## 9.2.1 Method 1: Automatic Immunization Records

Whenever a user posts an immunization procedure in the Charge Posting (**checkout**) program, Partner updates the immunization record for the patient. If a user has already added the immunization using another method, Partner is smart enough not to add a duplicate record.

If you need assistance configuring automatic immunization records, contact PCC at (800) 722-1082.

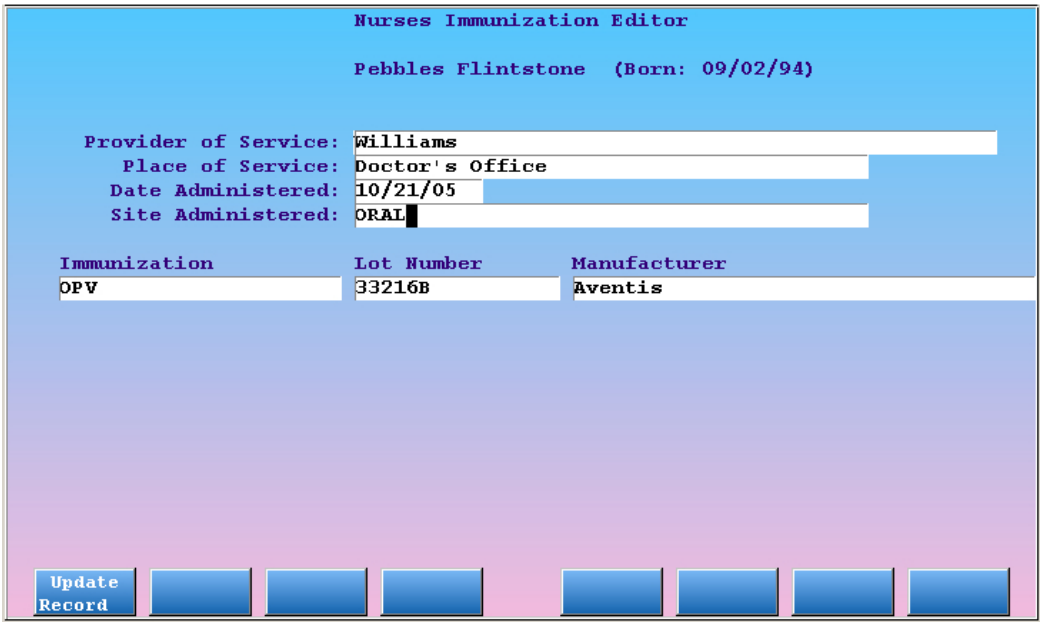
## 9.2.2 Method 2: Add a Date in imms

You can manually add an immunization to the record simply by entering a date next to the appropriate immunization:

You can enter the date without slashes; Partner will format the date for you.

### 9.2.3 Method 3: Add Immunization With Details in imms

If your practice records manufacturer, lot number, and other immunization details in Partner, press [**F8** -- *Add New Immuniz*] in **imms** to add an immunization with details. The screen will change to allow for the additional information:




Press **Tab** or **Enter** to move among the fields. No fields are required; enter only the information that your office collects.

Press [**F1** -- *Update Record*] to save the new immunization entry. Press **F12** to return to the **imms** screen *without* saving.

### 9.2.4 Method 4: Add Multiple Immunizations With Details in nimms

If you often give several immunizations and immediately record detailed information in Partner, you should use the Nurses Immunization Editor (**nimms**). The **nimms** program can be added to your Partner Windows or can be run from a command prompt.

For a complete manual on **nimms** features, read *Advanced Immunization Tracking*.

Nurses Immunization Editor

Pebbles Flintstone (Born: 09/02/94)

Provider of Service: Davidson
Place of Service: Doctor's Office
Date Administered: 10/21/05

| | Site | Immunization | Lot | Manufacturer |
|---|---|---|---|---|
| 1) | ORAL | OPV | 33216B | Aventis |
| 2) | Right Gluteal | DTaP | 126H | Merck |
| 3) | Right Arm | MMR | 44412 | Wyeth |
| 4) | | | | |
| 5) | | | | |

Update Record

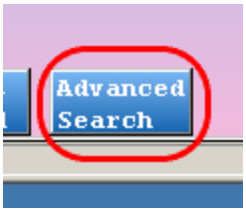
# 9.3. Find Patients By Immunization Lot Number

Follow the procedure below to look up all patients who received an injection from a specific lot number.

**Step 1: Run the Patient Editor (notjane)**

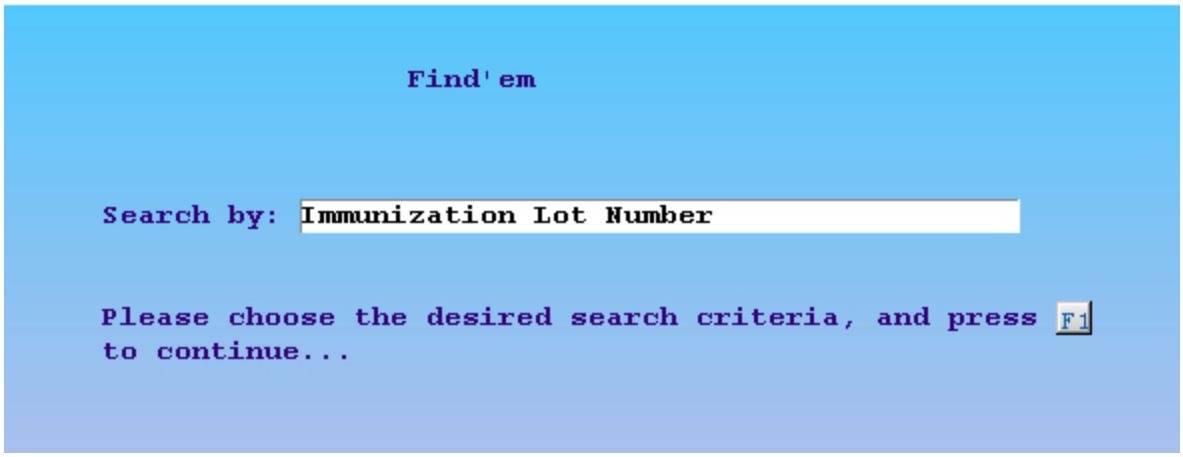
**Step 2: Press [F4 -- *Advanced Search*]**

Instead of entering a patient name, press **F4** to run the **findem** program.



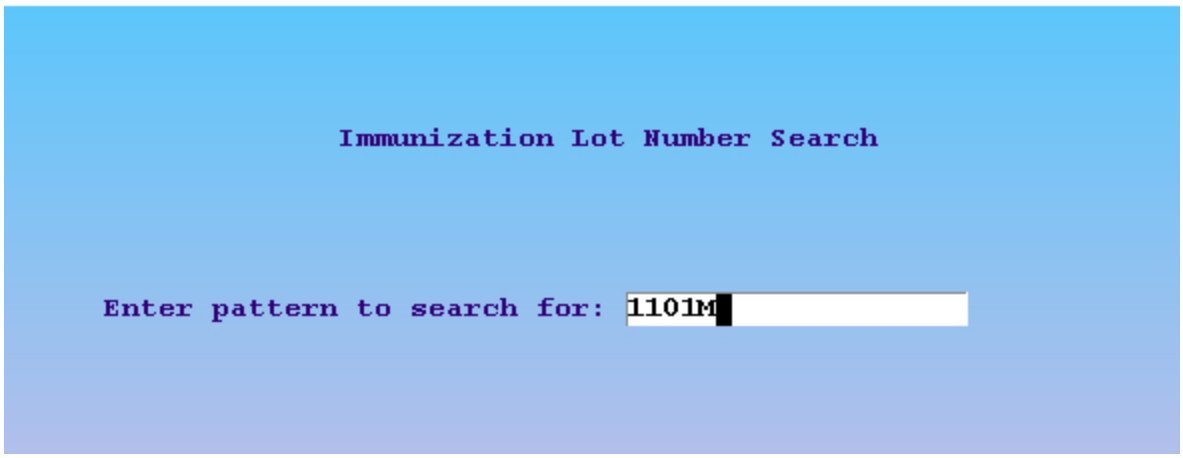

**Step 3: Choose to Search by "Lot Number"**

In the "Search by" field, select, "Immunization Lot Number." You can enter an asterisk (*) to see the list of available search variables, or just type "imm" to enter Immunization Lot Number.




Press [**F1** -- *Generate Report*] to continue.

**Step 4: Enter the Lot Number and Press [F1 -- *Process*]**




**Step 5: Review and Work With Patients**

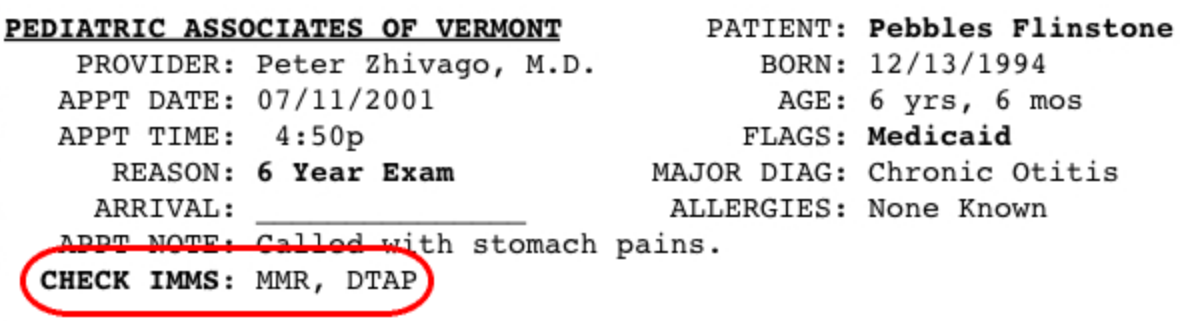
A list of patients will appear, along with account information.

Select any patient and press [**F1** -- *Select Patient*] to continue.

## 9.4. Display Missing Immunizations on Forms

Partner contains a customizable list of immunization rules that are based on the recommendations of the American Academy of Pediatrics. The **curimms** program can automatically compare a patient's immunizations against those rules and display what immunizations the patient may be missing.

You can not run **curimms** like other reports. Instead, it is added to your encounter form or any other handout or form letter Partner produces:




When looking at the list of missing immunizations, remember that the patient may have received the immunization but not had it recorded in Partner, or your practice's immunization configuration could be incorrect.

For help adding **curimms** to your forms or configuring your practice's immunization rules, contact PCC at (800) 722-1082.

**Immunization Tracking and Alerts:** Partner's immunization tracking tools, including **epidemic**, **curimms**, and the **recaller**, are in no way intended to replace the medical decision making of your practice. Partner attempts to display whether a patient has received the correct immunizations and can warn if an immunization is missing from the records or not in compliance with a given injection's interval requirements. Partner's suggestions, however, are based on known records and customizable rules, and the final responsibility of checking immunization compliance

rests in the hands of the physician.