

OneCare in the Clinics

OneCare will significantly change the way we do our work. Here's a glimpse into what the new systems will mean for our clinic.

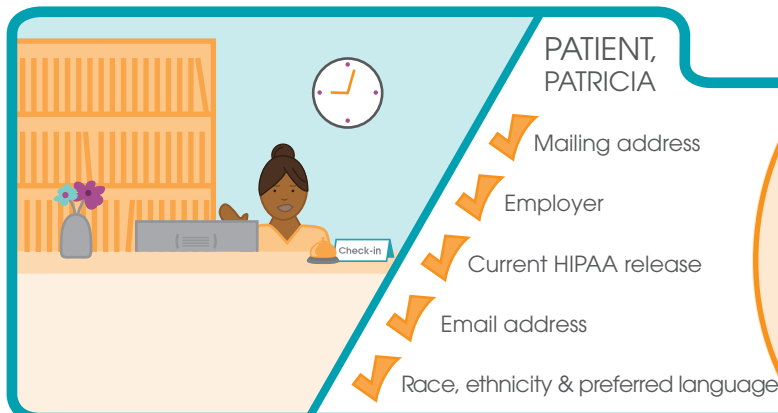


1 When Patricia Patient calls Dr. Daniels' office, Sarah Scheduler uses PPMS—Allscripts to find her an available appointment.

✓ PATIENT, PATRICIA
DOB: _____ Gender: _____
SS#: _____ TEL: _____

✓ Request Eligibility

2 Sarah confirms Patricia's information. Sarah uses PPMS—Allscripts to confirm Patricia's insurance coverage prior to her appointment.



3 At check-in, Sarah ensures Patricia's registration information is complete in PPMS—Allscripts. Sarah scans Patricia's ID and insurance card and collects her co-pay. Patricia's demographic information is visible in PPMS—Allscripts and the AEHR.

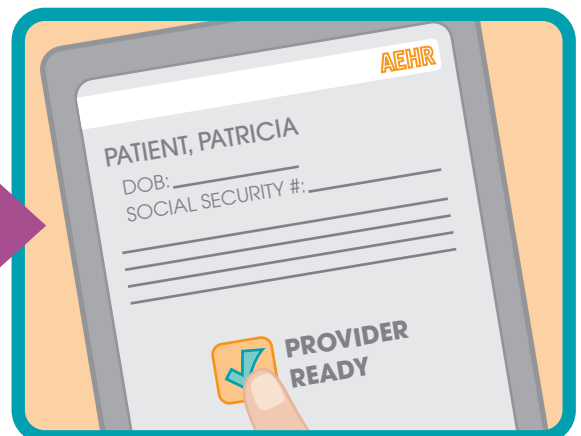


✓ ACKNOWLEDGED

✓ ARRIVED

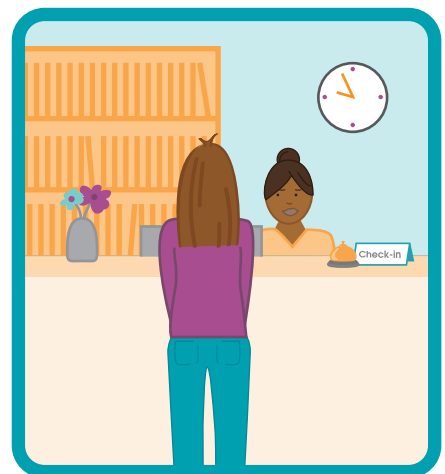
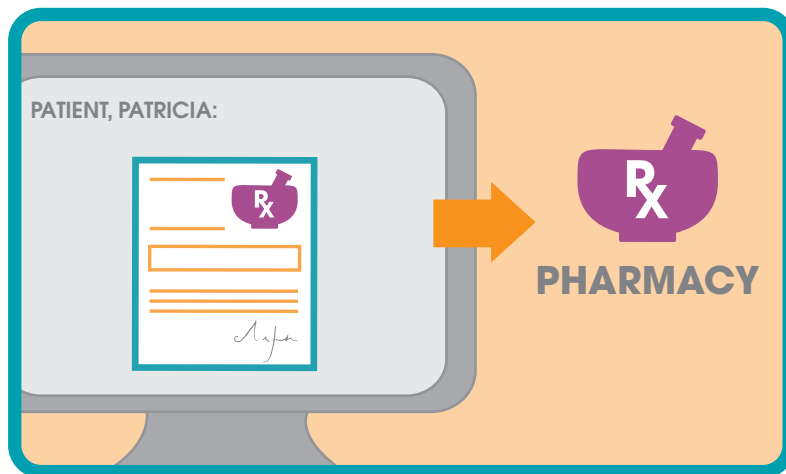


4 Nurse Nadine rooms Patricia. In the AEHR, she documents Patricia's chief complaint and gathers information like medications or allergies.

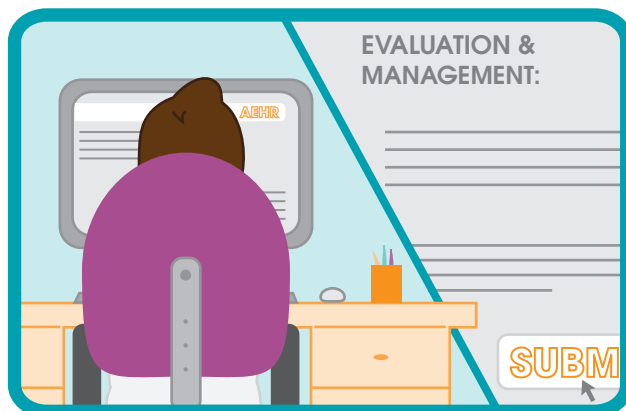




- 5 Dr. Daniels examines Patricia. In the AEHR he starts a patient note and orders a strep screen, which appears on Nurse Nadine's worklist.



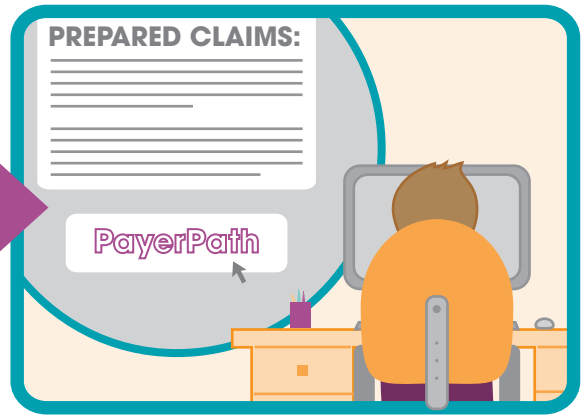
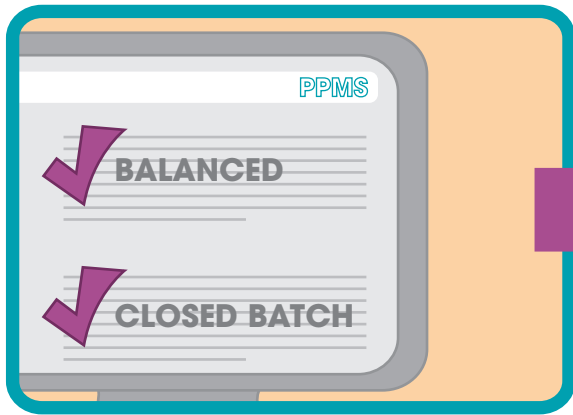
- 6 Dr. Daniels establishes a diagnosis and creates a care plan for Patricia. Her prescriptions are sent electronically from the AEHR to the pharmacy. At the check-out desk, Sarah uses PPMS-Allscripts to book Patricia's follow-up appointment.



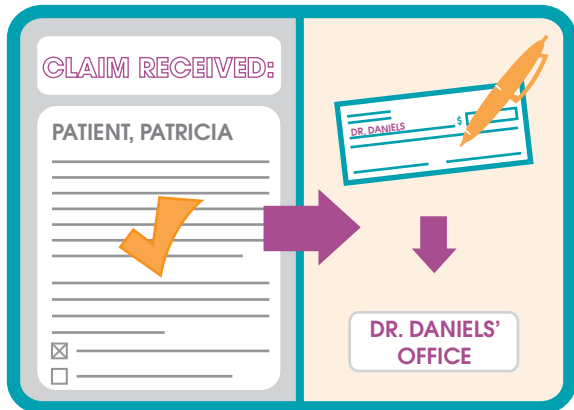
- 7 Dr. Daniels goes through his task list in the AEHR. He completes and signs off on the electronic note he started during Patricia's appointment. He also selects the evaluation and management levels and submits his charges.



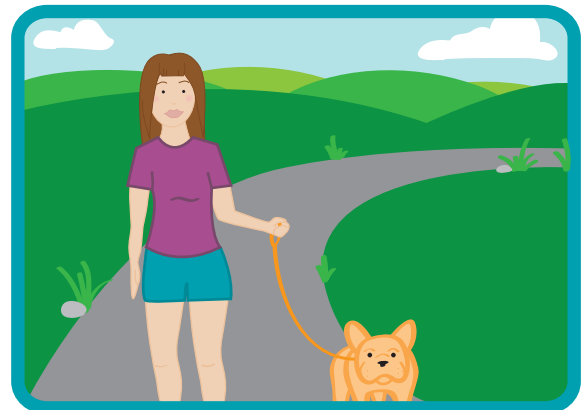
- 8 Bonnie Biller validates the charges and pushes them from the AEHR to PPMS-Allscripts. At the end of the day, Bonnie uses PPMS-Allscripts to verify and validate her charge batches.



9 Bonnie balances her charges and payments, and closes her charge batches in PPMS–Allscripts. She sends her claims to the central billing office, where Rick Revenue submits them to the PayerPath claims clearinghouse.



10 Patricia's insurance company receives the claim for her office visit and submits payment to Dr. Daniels' office.



11 Patricia follows her care plan. Two weeks later, she is feeling much better.

TURN THE PAGE for more details about how our work will change with OneCare. ➡

- 1 Patricia Patient has had a sore throat and a cough for three days. She calls Dr. Daniels' office to schedule an appointment.
 - Sarah Scheduler answers the phone and uses PPMS–Allscripts to find an available appointment.
 - Sarah also searches to see if Patricia is already in the system.
- 2 Sarah sees that Patricia is in the system. She confirms her full name, telephone number, gender and birth date.
 - She also checks Patricia's social security number and insurance information.
 - Before Patricia arrives for her appointment the next day, Sarah uses the iVerify feature in PPMS–Allscripts to confirm Patricia's insurance coverage. Patricia's coverage is current.
- 3 Sarah greets Patricia when she arrives for her appointment. She ensures that Patricia's registration information is complete, including:
 - Mailing address
 - Employer
 - Current HIPAA release
 - Email address
 - Race, ethnicity and preferred language
 - Sarah scans Patricia's ID and insurance card into PPMS–Allscripts and collects her co-pay.
 - Patricia's registration and scheduling information flow from PPMS–Allscripts to the AEHR.
 - Sarah marks Patricia as "Acknowledged" in PPMS–Allscripts. Clinical staff can then see Patricia's status as "Arrived" in the AEHR.
- 4 Nurse Nadine rooms Patricia. In the AEHR, Nurse Nadine documents Patricia's chief complaint and gathers any pertinent history, like medications or allergies.
 - Nurse Nadine marks Patricia as "Provider Ready" in the AEHR so Dr. Daniels knows she is ready to be seen.
- 5 Dr. Daniels examines Patricia. In the AEHR, he starts a patient note and orders a strep screen.
 - The strep screen appears on Nurse Nadine's worklist.
- 6 Dr. Daniels establishes a diagnosis and creates a care plan for Patricia. He prescribes antibiotics and cough medicine, and tells her he would like to see her again in two weeks for a follow-up visit.
 - The prescriptions are sent electronically from the AEHR to the Walmart pharmacy.
 - Dr. Daniels adds a two-week follow-up appointment to the worklist.
 - Patricia leaves the exam room and visits the front desk. Sarah Scheduler uses PPMS–Allscripts to book Patricia's follow-up appointment and check her out.
- 7 Dr. Daniels sits down to go through his task list in the AEHR.
 - He completes and signs off on the electronic note he started during Patricia's appointment.
 - He also selects the evaluation and management (E&M) levels and submits his charges.
- 8 Bonnie Biller validates the charges and pushes them from the AEHR to PPMS–Allscripts, where they are entered into the appropriate charge batch.
 - At the end of the day, with all charge entry information entered, Bonnie Biller is ready to verify and validate her charge batches. PPMS–Allscripts will help her identify errors or missing information.
 - When Bonnie's claims are validated, she balances her charges and payments and closes that day's charge batches in PPMS–Allscripts.
- 9 The next day, Bonnie uses PPMS–Allscripts to review the list of vouchers ready to be processed and double-check the claims before sending them to the central billing office.
 - Rick Revenue in the central billing office sends the claims to the PayerPath clearinghouse, which will review the claims and help catch errors before they're submitted to insurance payers.
 - If there are any problems, Rick will return the claims to Bonnie.
- 10 Patricia's insurance company receives the claim for her office visit and submits payment to Dr. Daniels' office.
- 11 Patricia follows her care plan. Two weeks later, she is feeling much better.

