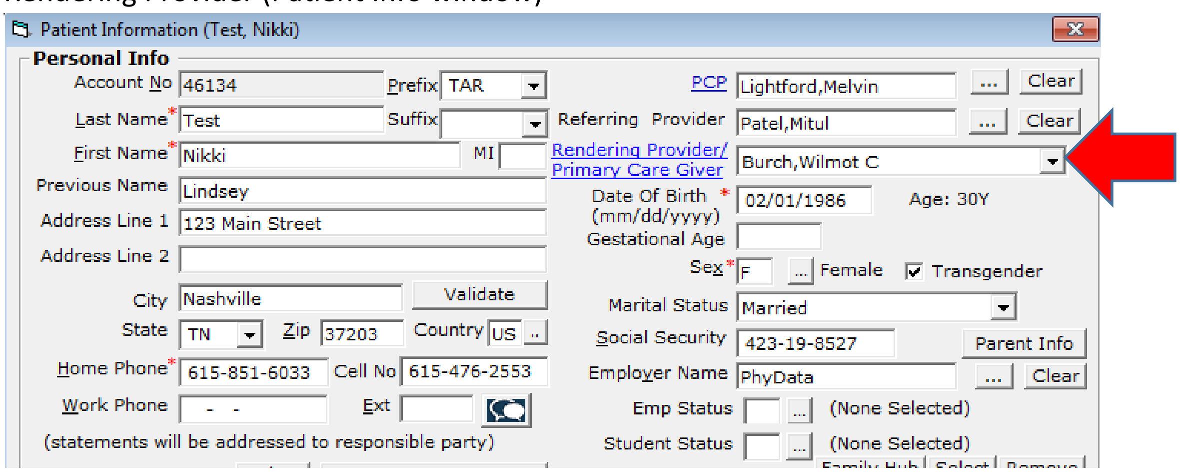
eClinicalWorks Training – Shared Patient Accounts Across Multiple Practices

The Advanced Health eClinicalWorks database is shared by multiple practices and specialties under the Advanced Health umbrella. Each patient has a single account that is then utilized by all treating providers within the database. This allows us to maintain a single, up-to-date, and accurate medical record. It's very important that all providers and staff know how to properly handle shared patient accounts to ensure accurate billing and clinical documentation. See the information below regarding how shared patient accounts should be managed.

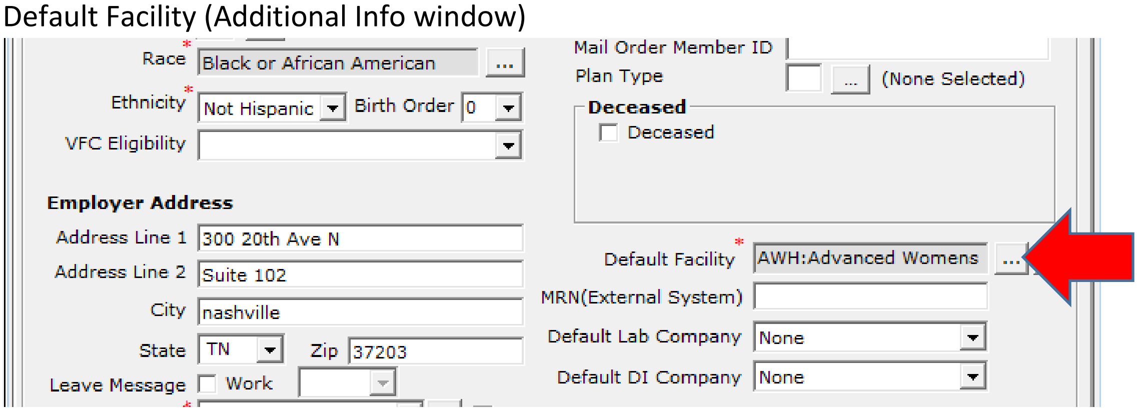
IDENTIFYING SHARED PATIENT ACCOUNTS:

We currently utilize facility-based security in the AH eClinicalWorks database. This allows us to use one patient account for all encounters but hides aspects of the chart from practice to practice, including Progress Notes, orders, and telephone encounters. There are still ways we can identify shared accounts, though:

- At the time of scheduling the initial appointment, staff should **ALWAYS** search for the patient by name **AND** DOB to ensure the patient does not already have an account in our database. Identifying that the patient already has an account in our eClinicalWorks database is the first indicator that the patient is likely shared between multiple practices. Staff can also use the Rendering Provider field and Default Facility fields to view the additional provider and practice that the patient is associated with. See below. These fields should be reviewed for all patients during check-in to verify accuracy.
    - Rendering Provider (Patient Info window)

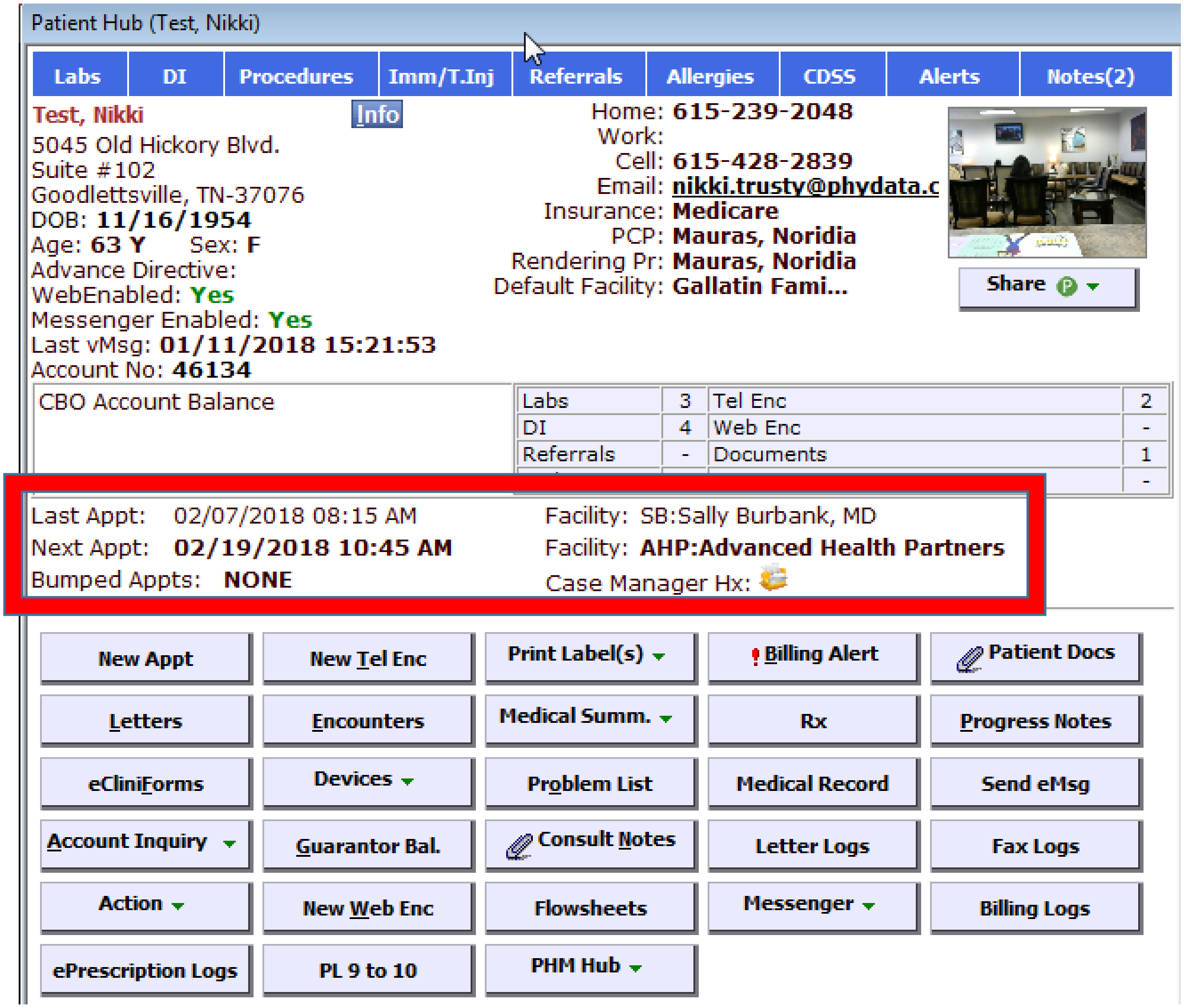


    - Default Facility (Additional Info window)



AdvancedHEALTH

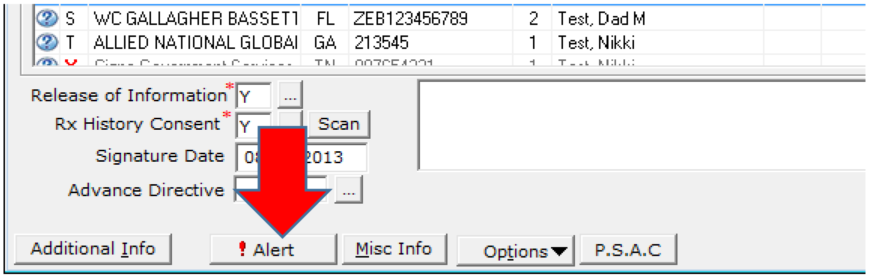
The Patient HUB window will also show the next and last appointment facilities.



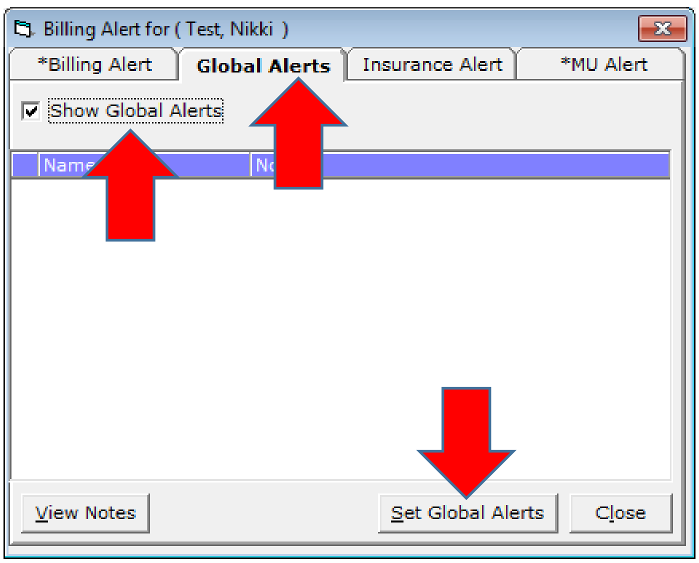
LABELING SHARED PATIENT ACCOUNTS:

Once a shared patient account is identified, staff should **ALWAYS** create a Global Alert to help easily notify/remind other staff and providers.

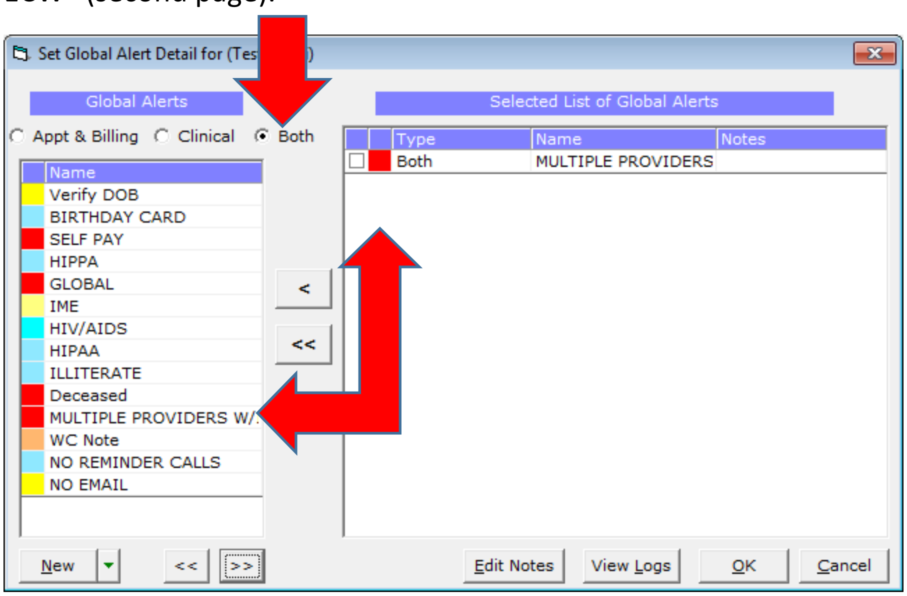
To apply the Global Alert from the Patient Info Screen, click “Alert” at the bottom of the window.



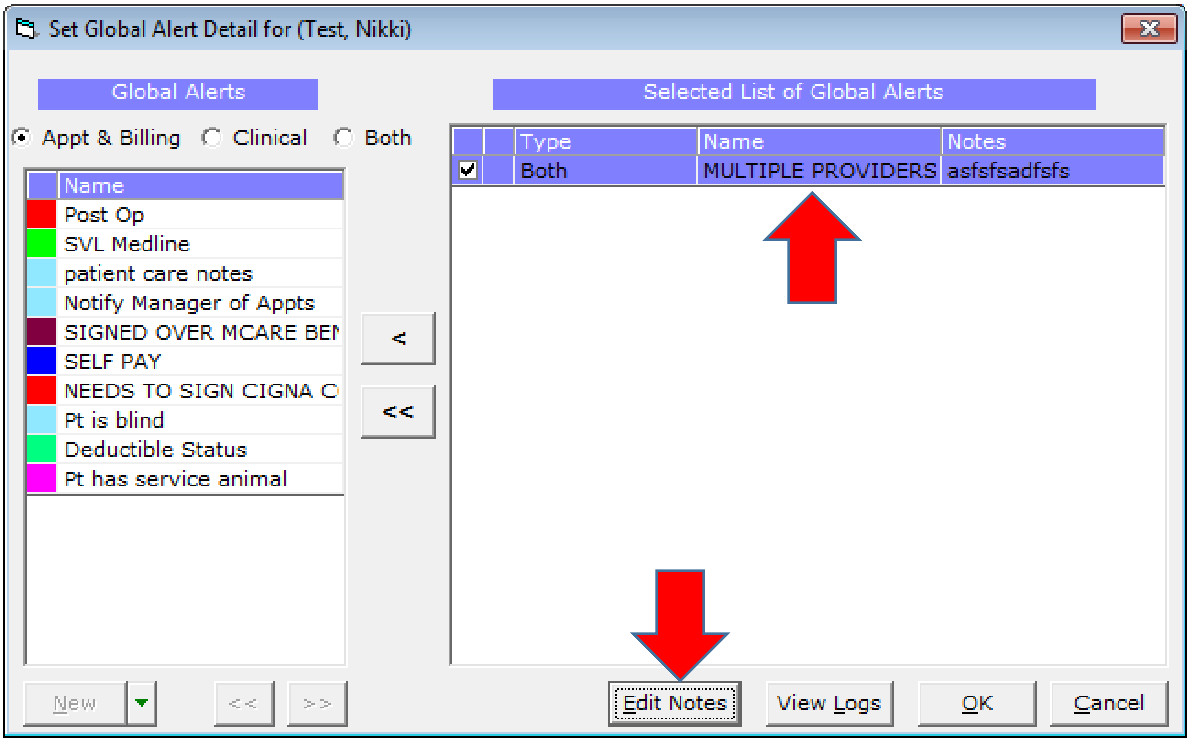
In the Global Alerts tab, first select “Show Global Alerts”. Then click “Set Global Alerts”.



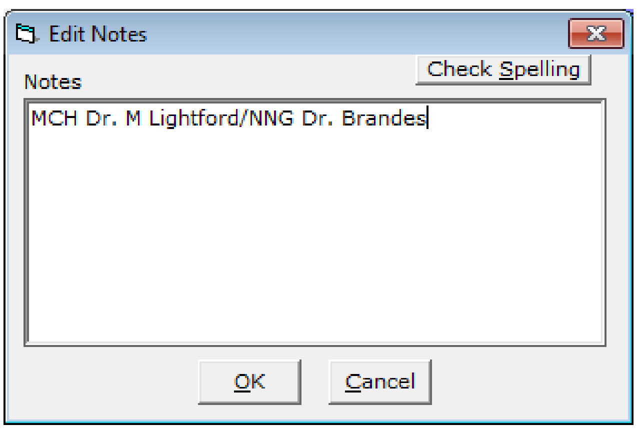
Select the “Both” category option and then choose the alert labeled “MULTIPLE PROVIDERS W/IN ECW” (second page).



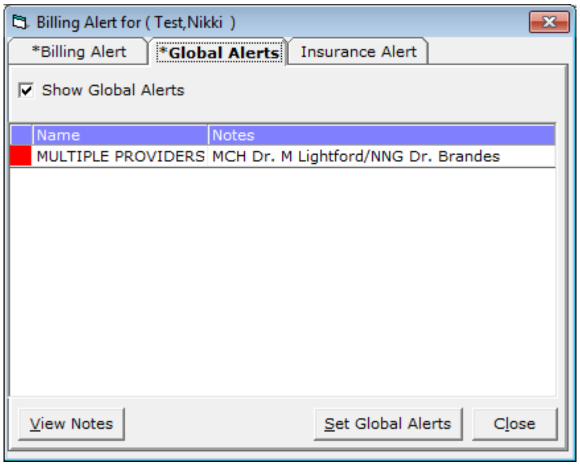
Highlight the selected alert and click the “Edit Notes” button to add the specific provider information.



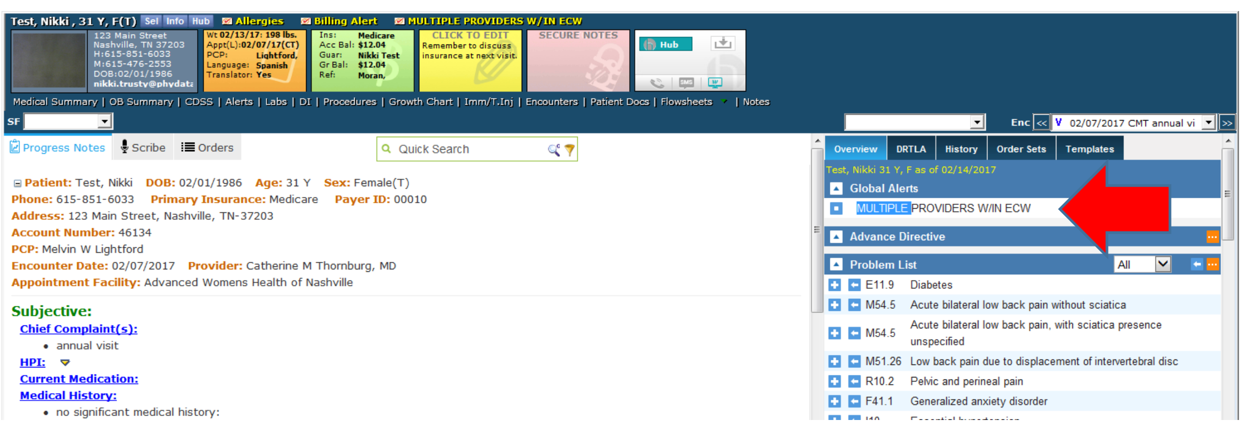
Add both known providers or practices and click “Ok”. Close the Global Alert window.



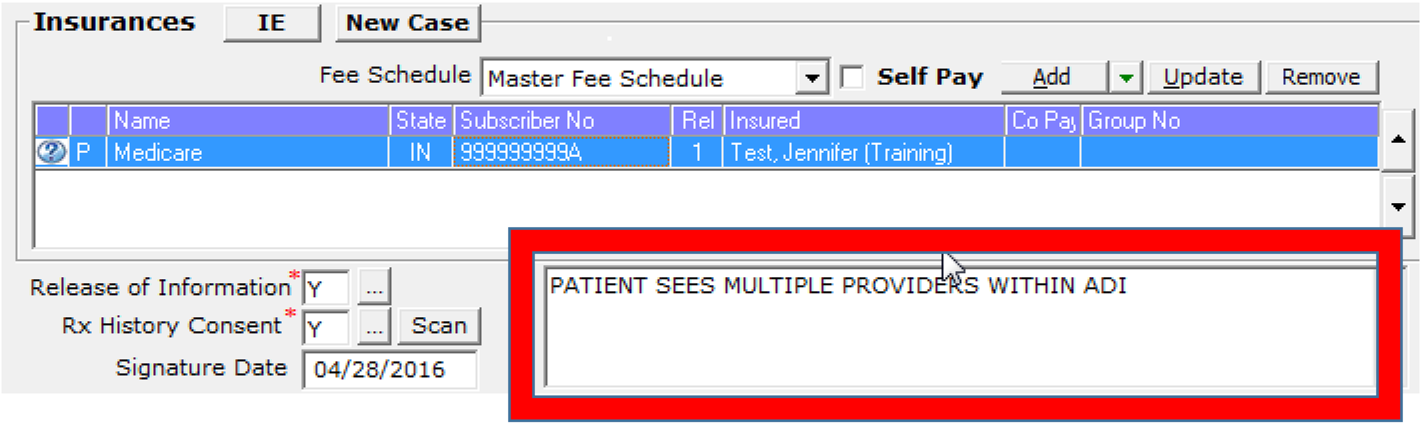
Adding this alert will ensure that all staff who schedule and/or open the patient appointment window will be notified that this patient is shared between practices.

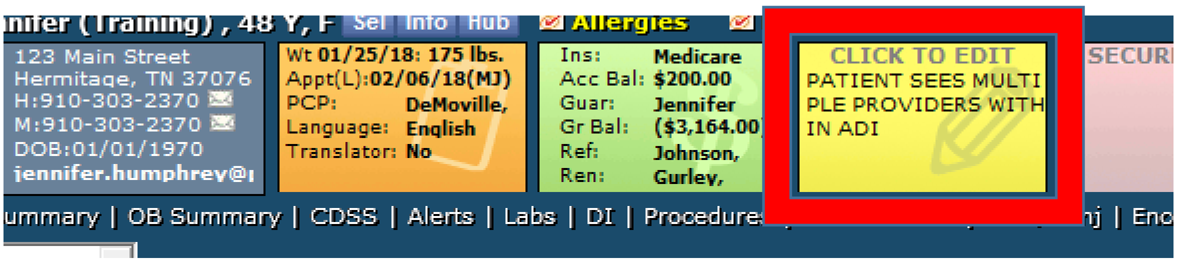


Staff and providers will also see this alert in the right side car of the Patient HUB and Progress Note views.



Additionally, practices may choose to enter “multiple providers” information in the note section of the Patient Info screen and/or the Sticky Note in the Progress Note view.





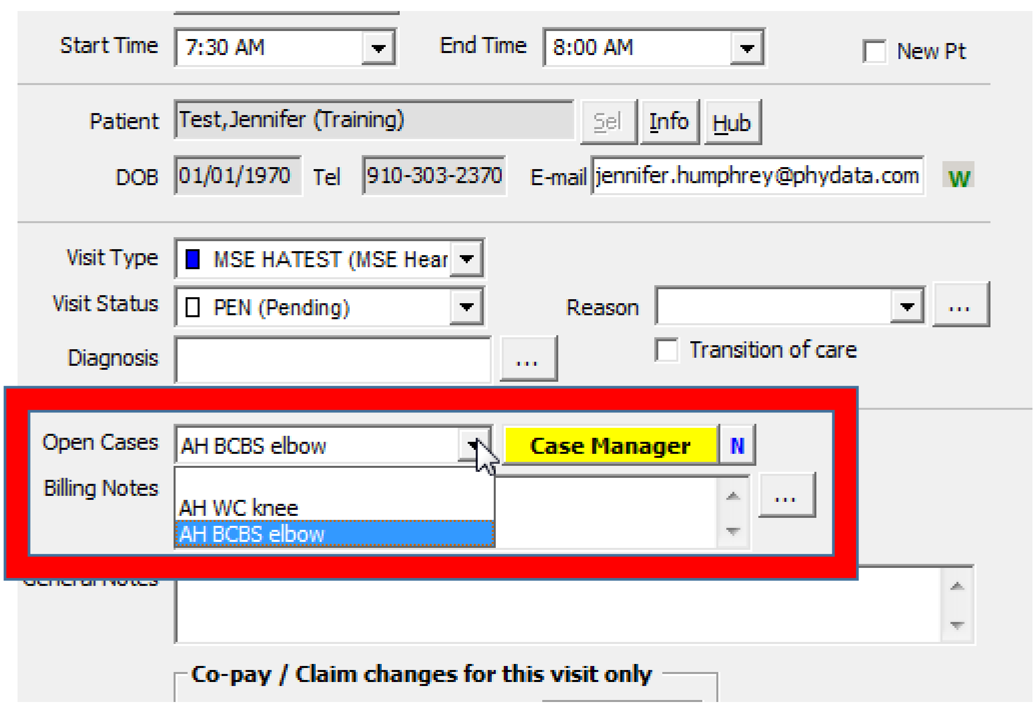
SCHEDULING AND CHECKING IN SHARED PATIENTS:

Check-in staff should **ALWAYS** verify the following fields for patients **AT EACH VISIT**:

1. Rendering Provider (Patient Info window)
2. Default Facility (Additional Info window)
3. Insurance (Patient Info window)/Case Manager (Appointment Window)

A large portion of the shared patients in our database utilize separate insurances for their different treating providers. For example, a common scenario is a patient who uses health insurance for office visits with their PCP and OB/GYN but may use WC or MVA coverage for office visits with their surgeon. It's important for **ALL** offices to keep this information in mind when scheduling and checking in these patients.

1. When insurances are identified on the patient account that are current but not used for today's appointment, do **NOT** terminate or delete those plans! Instead use the Case Manager feature to accurately apply the correct coverage to each visit (see separate Case Manager instructions).
2. Once a case has been created through the Case Manager function in eClinicalWorks, the check-in staff with **ALL** offices in our database will see the Case Manager button highlighted in yellow in the appointment window. Any time a check-in staff member sees a yellow Case Manager button, they should immediately:
   a. Review the insurance(s) currently loaded into the patient's demographics window.
   b. Identify which insurance should be utilized for today's visit.
   c. Apply the appropriate case to today's visit to ensure proper billing. **DO NOT DELETE OR TERMINATE ACTIVE INSURANCES UTILIZED BY OTHER PRACTICES.**
   d. Always name your cases starting with the practice initials followed by the insurance and body part information. This will make case selection easier for staff at all offices.



REVIEWING MEDICAL HISTORY FOR SHARED PATIENTS:

Since each shared patient within our eClinicalWorks database has a single patient account, this means there is also a single patient chart with one list of current medications, medical history, allergies, etc. Each office should work to maintain an accurate and complete medical record by doing the following:

1. Verify current medications at each visit, utilizing the External RX History option whenever possible. Never delete a medication unless the patient has actually never taken that med. Otherwise use the "not taking" and "discontinued" buttons in the Current Medications window.
2. Add, edit, and verify medical history, OB/GYN history, surgical history, social history, and family history as necessary. It's important that practices consistently document theses details in the same areas in order to avoid confusion (i.e. "tonsillectomy" should be loaded into surgical history and never medical history).
3. Review and update information included in each patient's CDSS rules as it pertains to your practice and specialty. If a CDSS rule does not apply to your scope of care, ignore it rather than marking it as "suppress".
4. Review and update the Problem List as it pertains to your practice. Note that the Problem List should be maintained as a list of **ALL** current problems for the patient, regardless of what diagnosis codes are added to individual notes.
5. It is **NEVER** appropriate to delete accurate historical data because it doesn't apply to your practice's scope of care. Doing so will remove the information from the patient's chart for all future encounters, regardless of provider or practice.