VistA-Edge™ PMS

User Manual

Version 0.9
(Beta Release – NOT for Production use)
February 2010

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Edgeware Technologies
Cutting Edge in Healthcare Information Technology Solutions

License

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Introduction

The **VistA-Edge™ PMS** is designed to register patients for a visit, to schedule patient visits (creating and canceling appointments) and capture billing data sent from VistA to generate Form CMS-1500 for billing.

VistA-Edge™ PMS is can also be used independent of VistA, by manually entering the billable services provided to the patient.

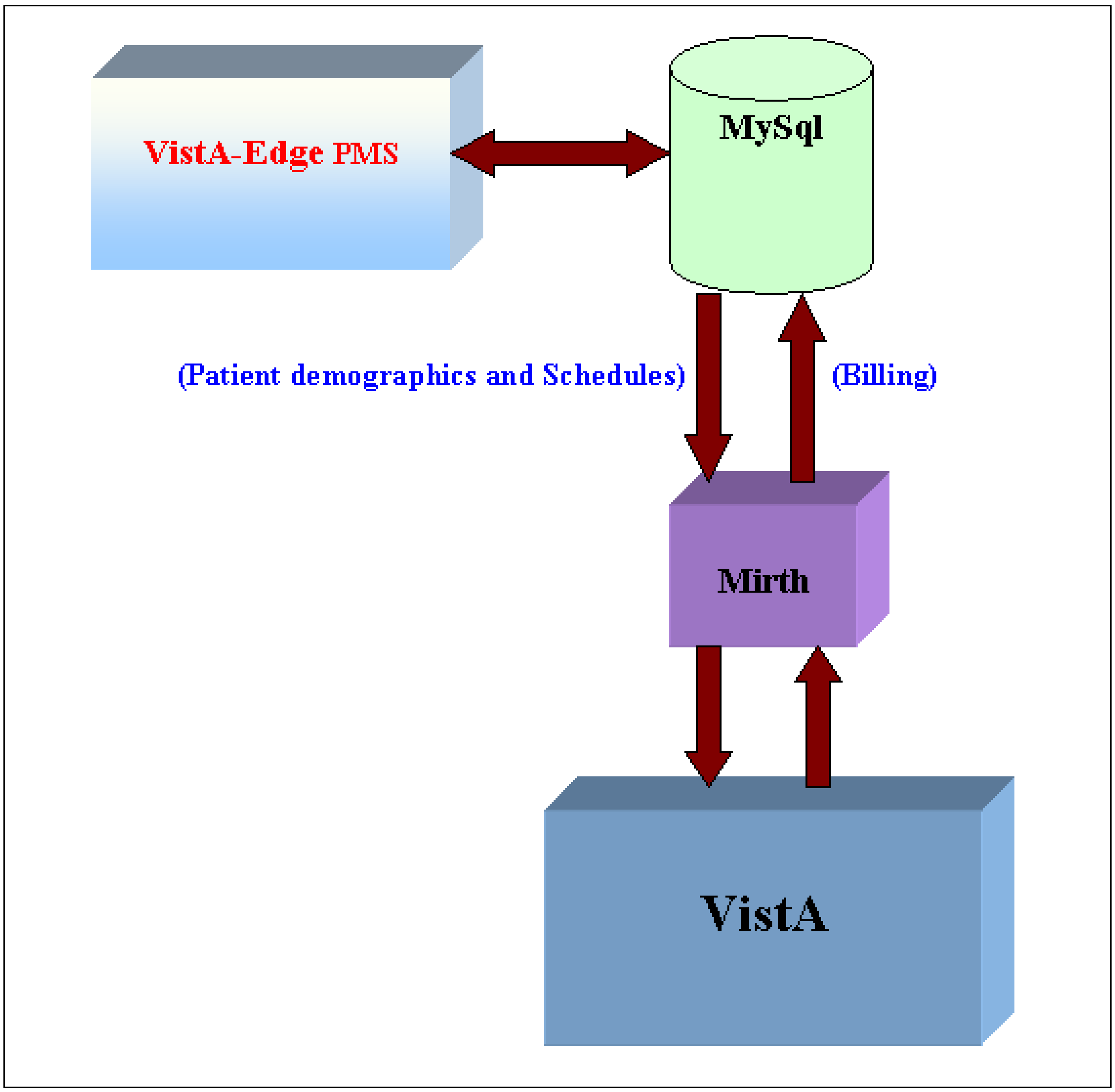


Figure 1: Data Flow diagram

The Open Source HL7 Engine - Mirth is used to send Patient registrations and appointments to VistA. The appointment interface assumes that the ‘Providers’ setup in the PMS is mapped to the required Clinics in VistA. Details on Location mapping can be found later in this manual.

Mirth is also used to receive, billing details (Procedures and Diagnosis) entered in CPRS, sent out from VistA.

This manual is organized in the way most people will use the **“Practice Management System”.** It begins with how to log on to the system and how to work step by step on different tasks you will perform.

Working with the system

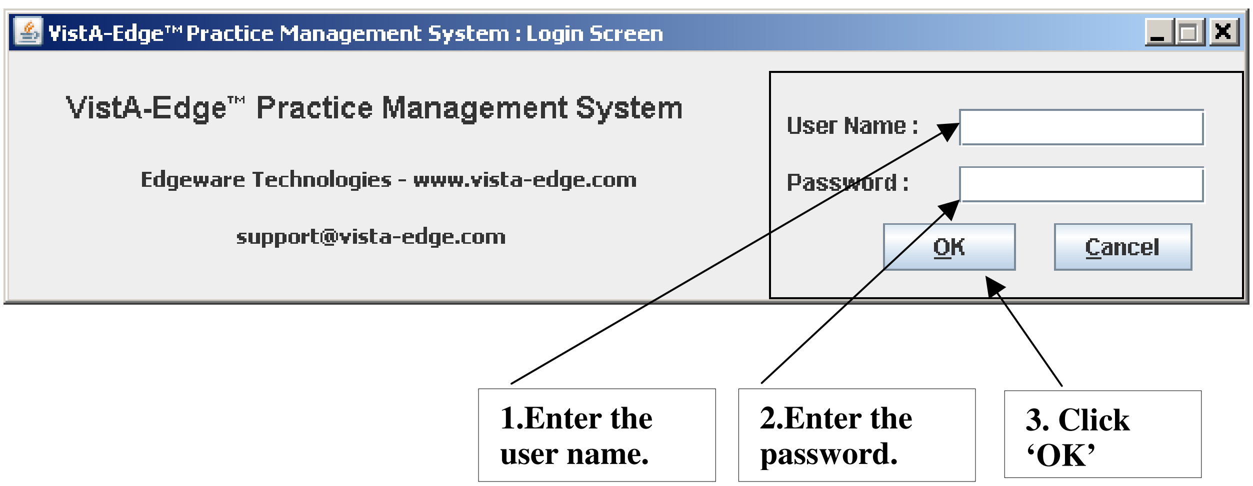
Logging in to the VistA-Edge™ PMS

On startup the following Login screen will pop up.

Enter the User Name and Password and click the 'OK' button to log in. The default login credentials are:

Username: admin
Password: admin

Note: Password is case sensitive.



The Main Screen

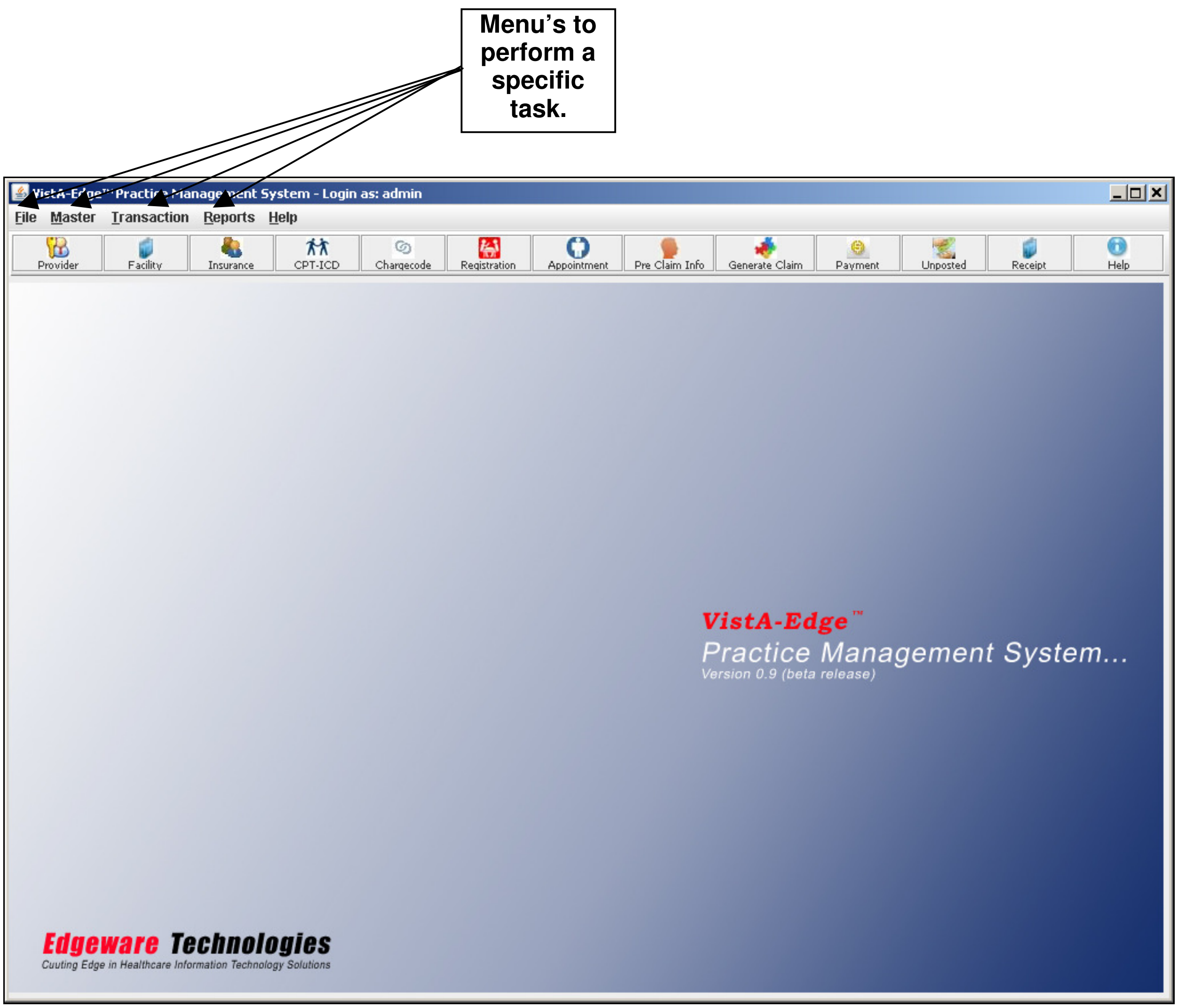
After successful login, the Main screen, as shown below, will be visible. The Screen title will Display the username of the login account used.

This screen has various menus:

- The File Menu,
- Masters Menu,
- Transactions Menu,
- Reports Menu, and
- Help Menu

In addition to the Menu's there are quick links to frequently used options made available on the main screen.

Each Menu has different options under it.

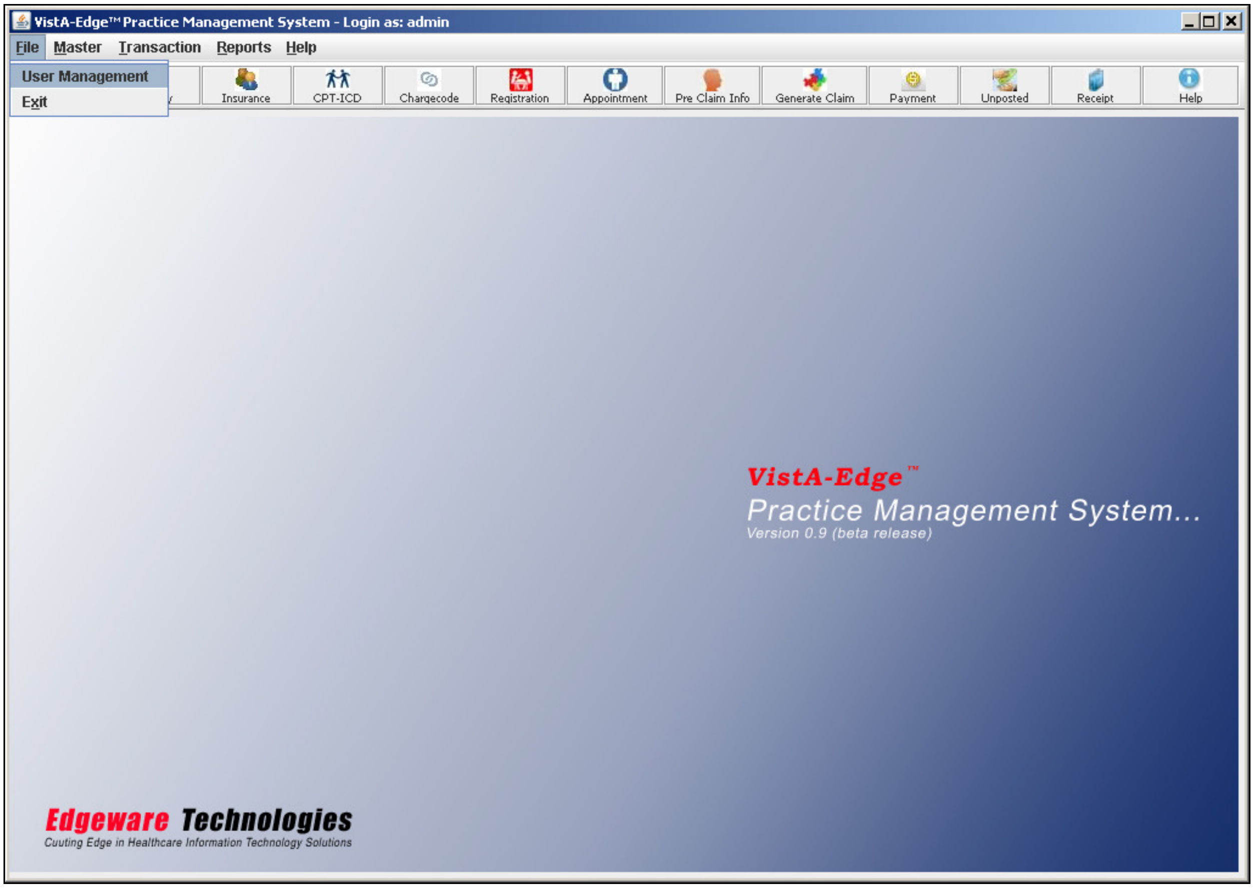


The Quick links provided include:

- Provider
- Facility
- Insurance
- CPT-ICD
- Chargecode
- Registration
- Appointment
- Pre Claim Info
- Generate Claim
- Payment
- Unposted
- Receipt
- Help – link to the User Manual

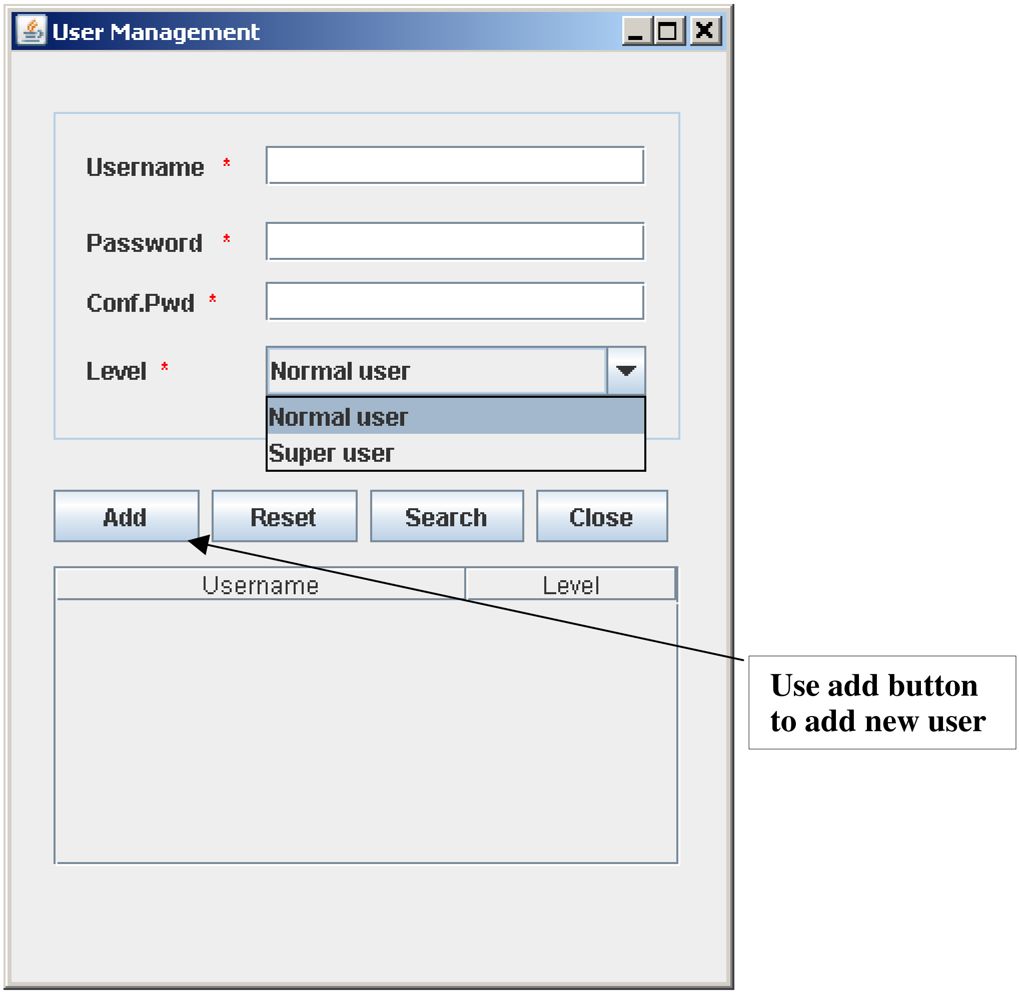
The File menu

On clicking the 'File' Menu, the 'User Management' and 'Exit' option will be displayed as seen below:



The **User Management** Option can be used to create additional users, delete existing users and to change password of users in the system. The system comes with a default super user named 'admin' with password 'admin'. There are two possible levels of users in the system:

1. Normal User – cannot create or reset any additional users passwords.
2. Super User – Can create additional users of both user levels.

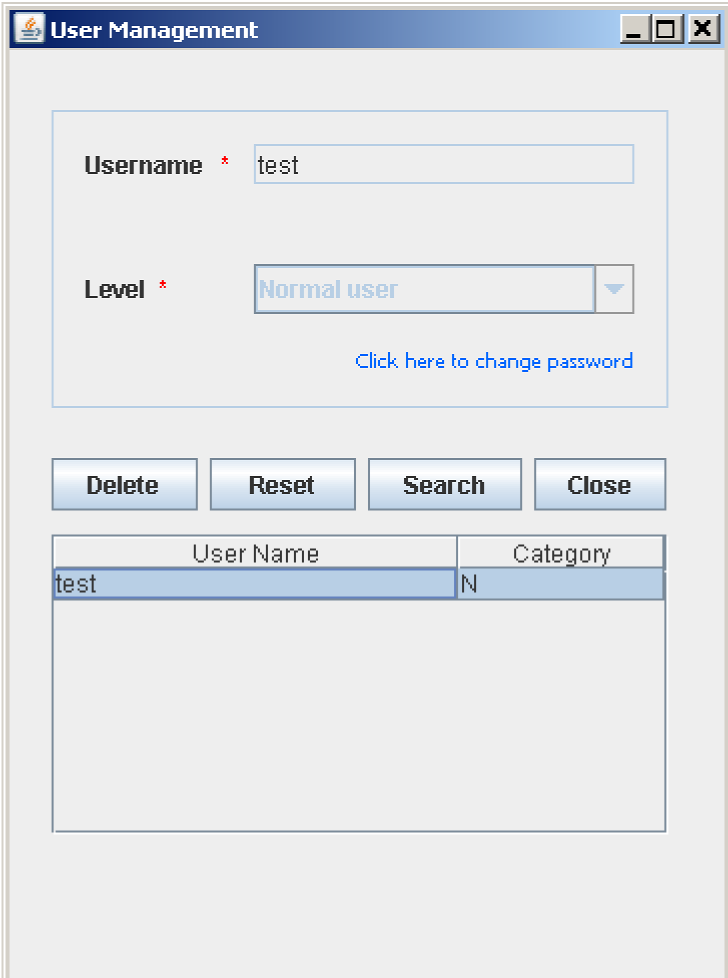


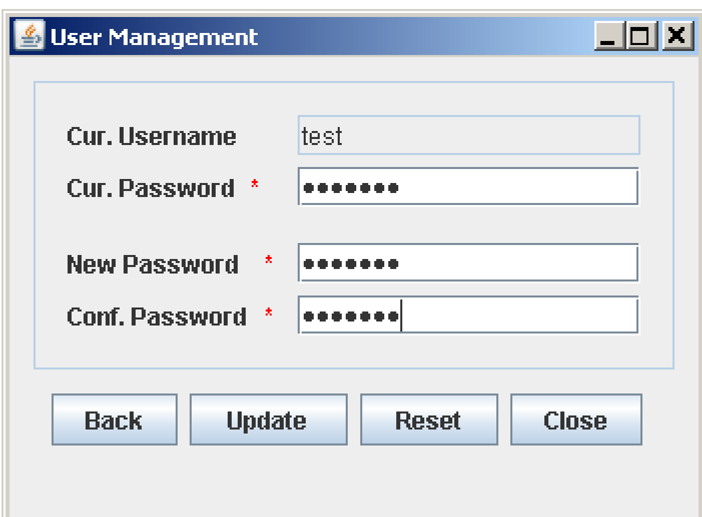
- **Add user(s) -** To add a user to the system enter the username, password, choose the User Level and click the 'Add' button.

- **Search user(s) –** To search for an existing user enter the username and click the 'Search' button.

- **Change password –** After searching for the user whose password is to be reset, use the 'Click here to change password' link to reset the user password. Enter the new password and use the 'Update' button to save changes.

- **Delete User -** After searching for the user whose account is to be deleted, use the 'Delete' button to remove the user from the system.



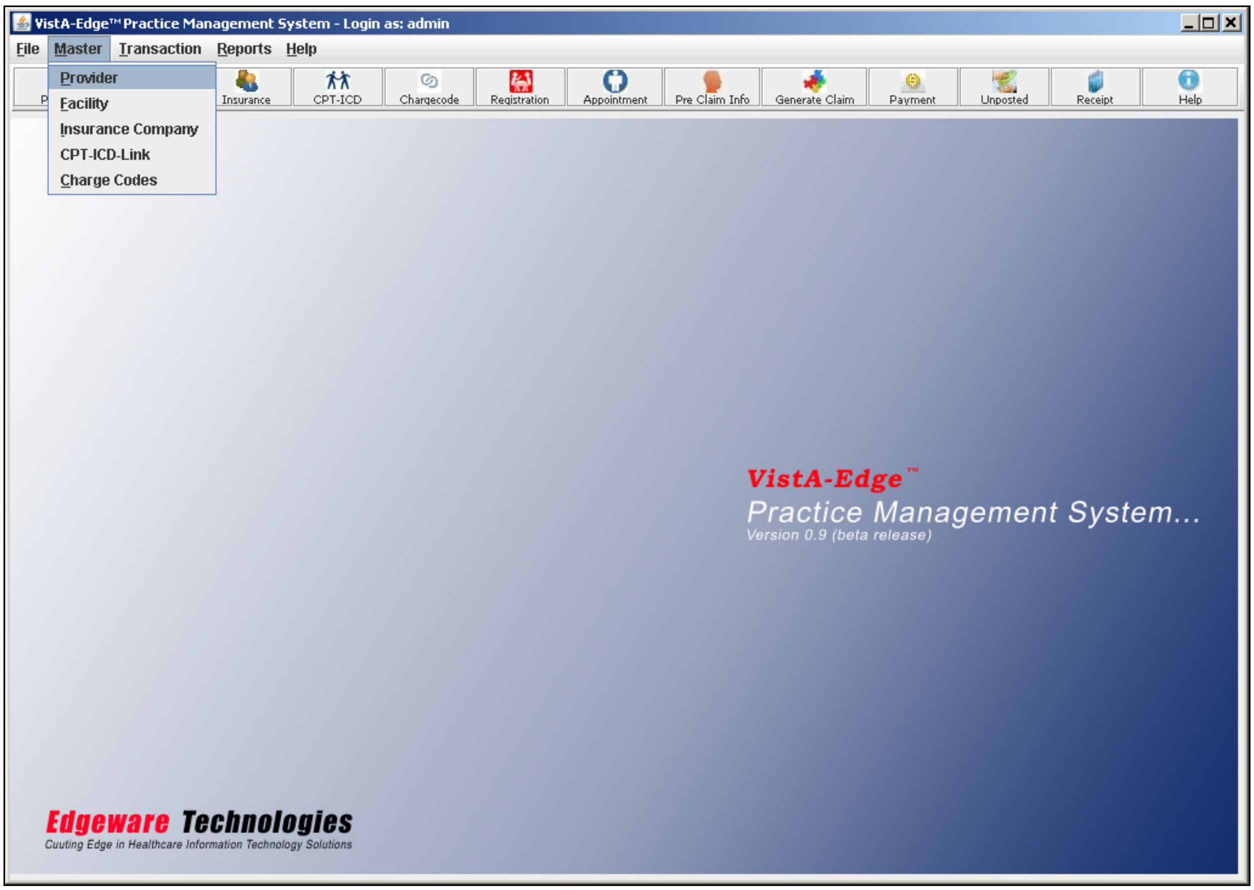


The **'Exit'** option as the name suggests can be used to close and exit from the PMS system.

The Master Menu

Clicking the 'Master' Menu, will display following options as seen below:

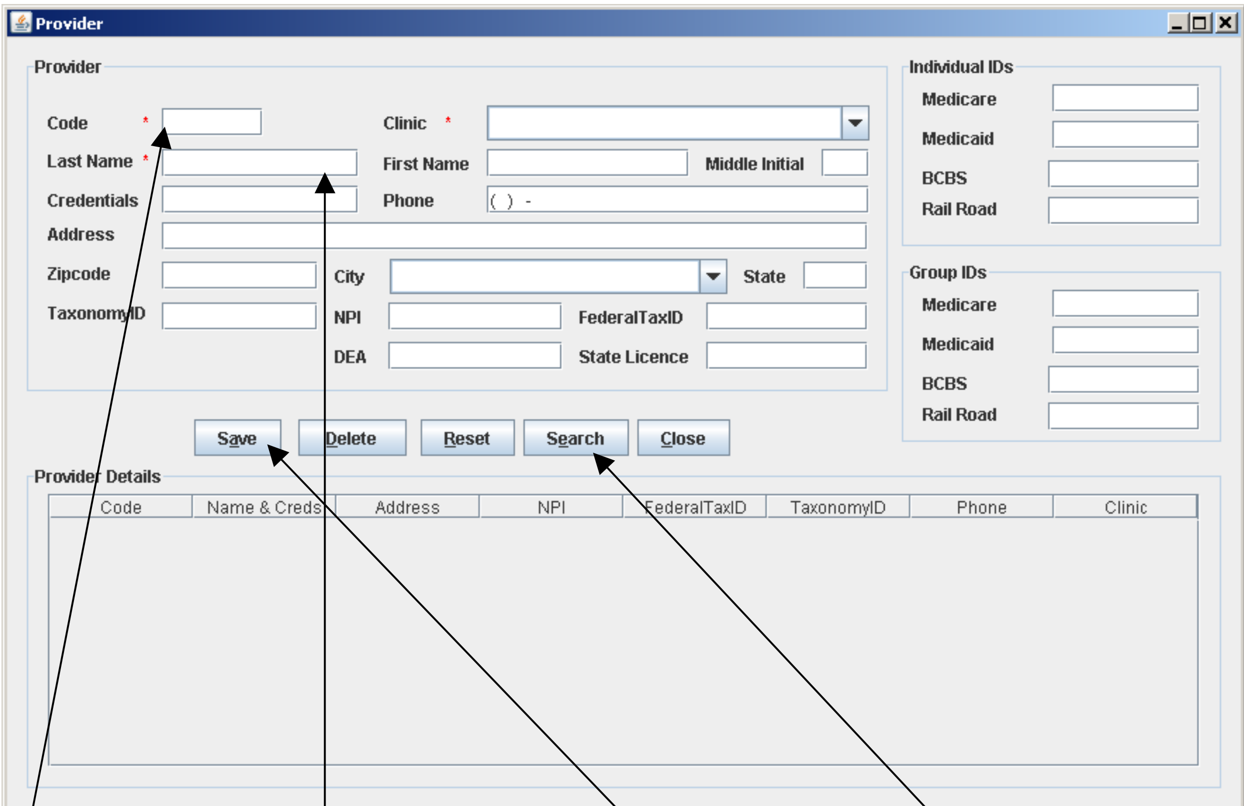
1. Provider
2. Facility
3. Insurance Company
4. CPT-ICD Link
5. Charge Codes



Provider option

On clicking the "Provider" option, the following screen pops up.

This screen is used to add the details about the Provider in the system.



1. Enter Code, which is unique for each provider.

2. Enter details about the provider like last name, first name, address, city, NPI, IDs and credentials, etc in the respective boxes.

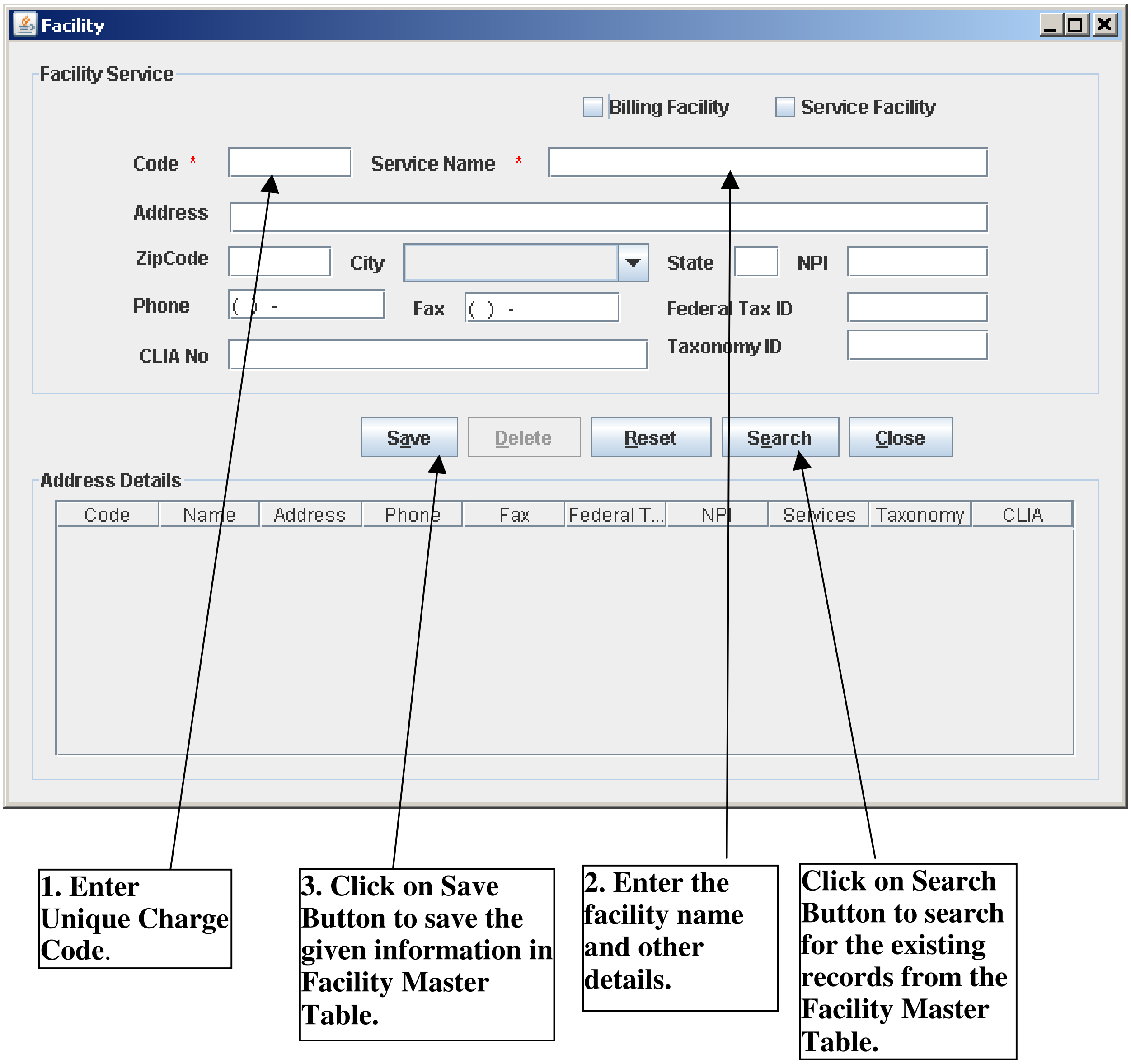
3. Click on Save Button to save the given information in Provider Master Table.

Click on Search Button to search for existing records from the Provider Master Table, if already entered.

Facility Option

On clicking the "Facility" option, the following screen pops up.

This screen is used to enter the Address and other details of the Facilities and Revenue center.



Billing Facility: To indicate if the Facility is to be included as a Billing Provider/Facility (section 33 on the 1500 Health Insurance Claim Form)

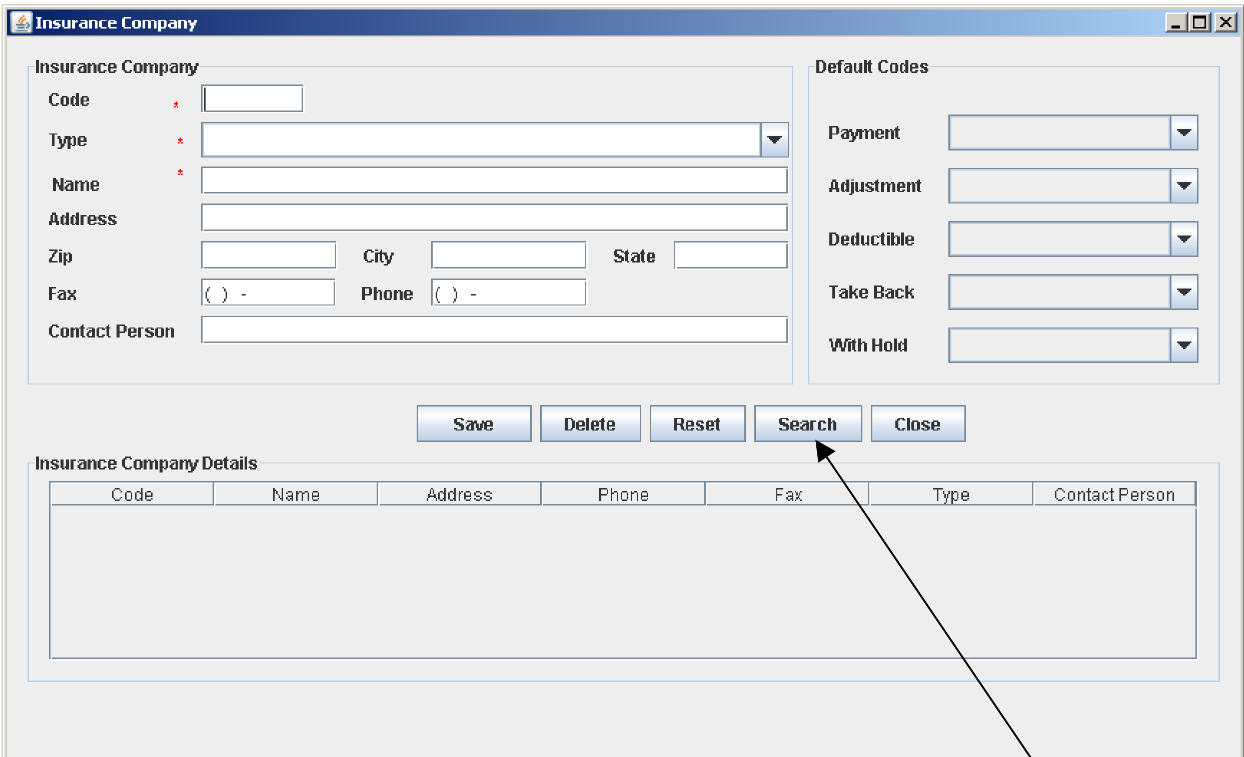
Service Facility: To indicate if the Facility is to be included as a Service Facility (section 32 on the 1500 Health Insurance Claim Form)

A facility can be created as a Billing Service, a Service Facility, or as both depending on the requirement.

Insurance Company option

On clicking the “Insurance Company” option, the following screen pops up.

This screen is used to add the details about the various Insurance Company(s) of patients in the system.



Click on Search Button to search for the existing records from the Insurance Company Master Table.

The Insurance Company Master contains the following fields:

- **Company Details Section**

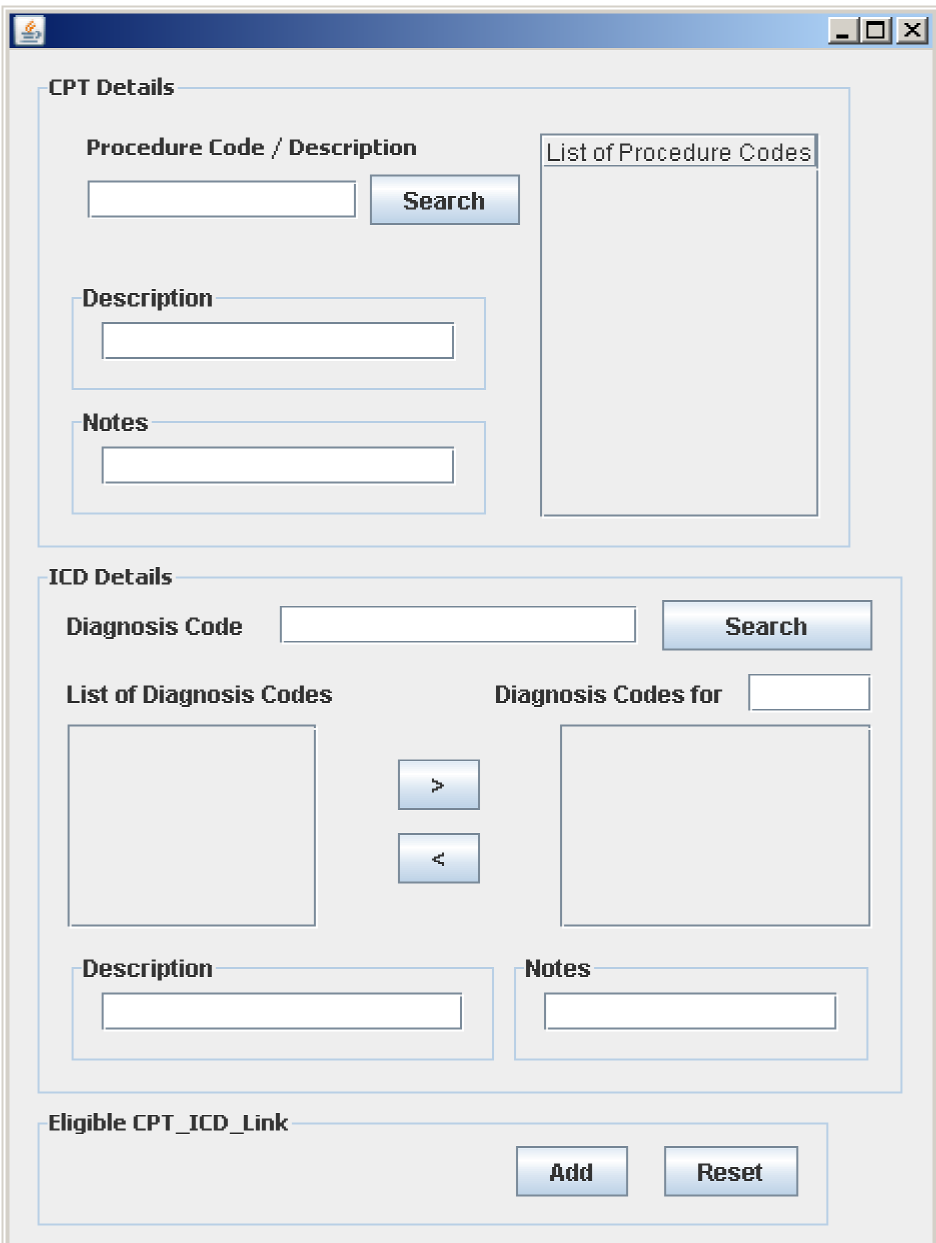
  - Code – Enter a unique value assigned to every insurance company.
  - Type – From the drop down menu type of insurance is selected. For example Medicare, Medicaid, BCBS etc.
  - Name – Enter the Name of the insurance company.
  - Address- Enter the Address
  - Zip- Enter the Zip code.
  - City- Enter the City
  - State- Enter the State.

- Fax- Enter the Fax Number.
- Phone- Enter the Phone Number.
- Contact Person: Name of the contact person in the insurance company.

Click on the “Save” button to save the Insurance Company details.

CPT-ICD Link option

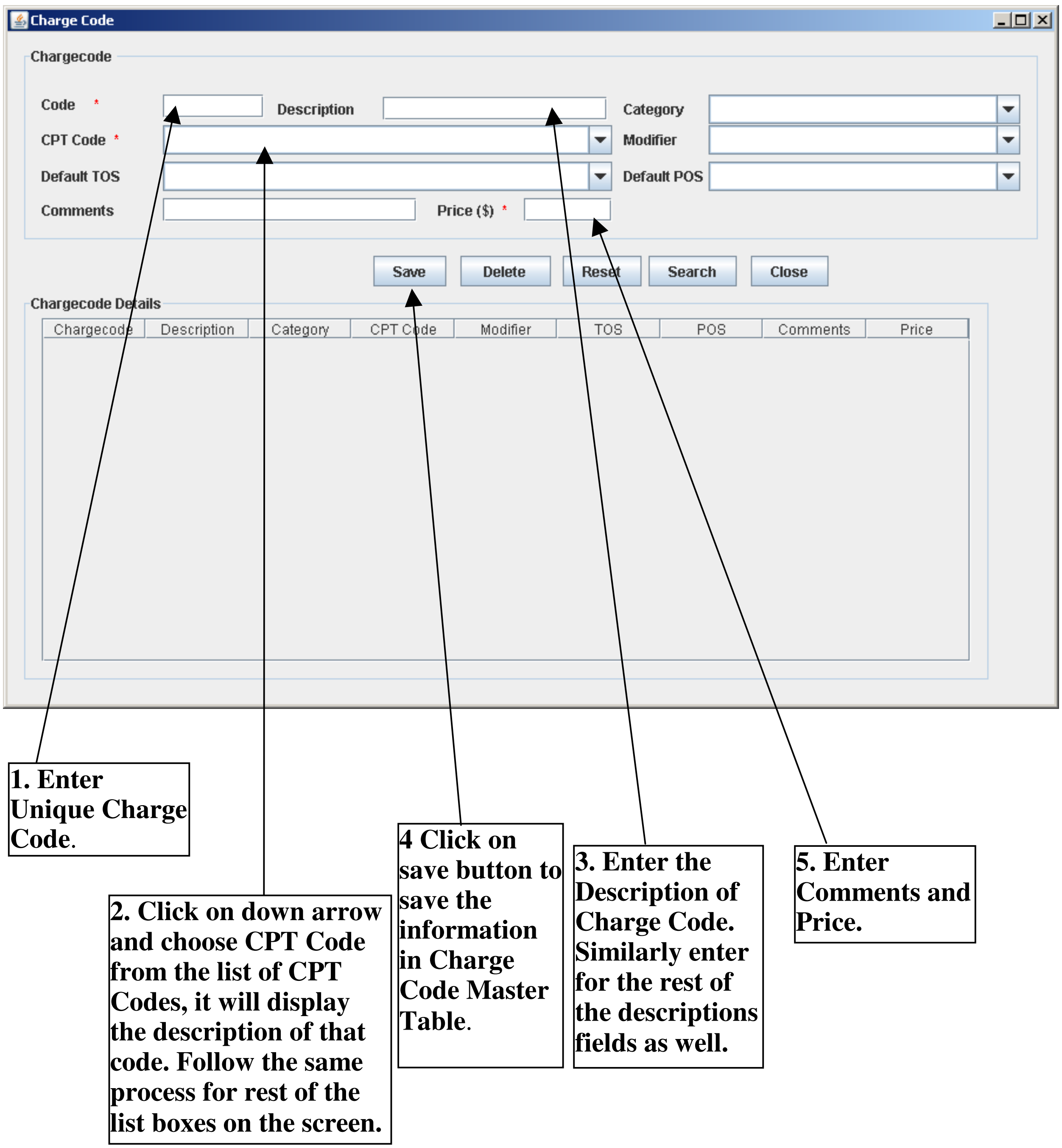
On clicking the CPT-ICD Link, the following screen will be available. From here we can select CPT’s in the database and link it with corresponding ICD(s). This information once entered can be used in the ‘Generate Claim’ screen to link the CPT’s sent from VistA or entered manually for claims.



Charge Code option

On clicking the "Charge Codes" option, the following screen pops up.

This screen is used to select the billable services provided by the doctor. It is mandatory to have charge codes associated with the CPT codes used to be able to add them on the patient Bill for a claim.



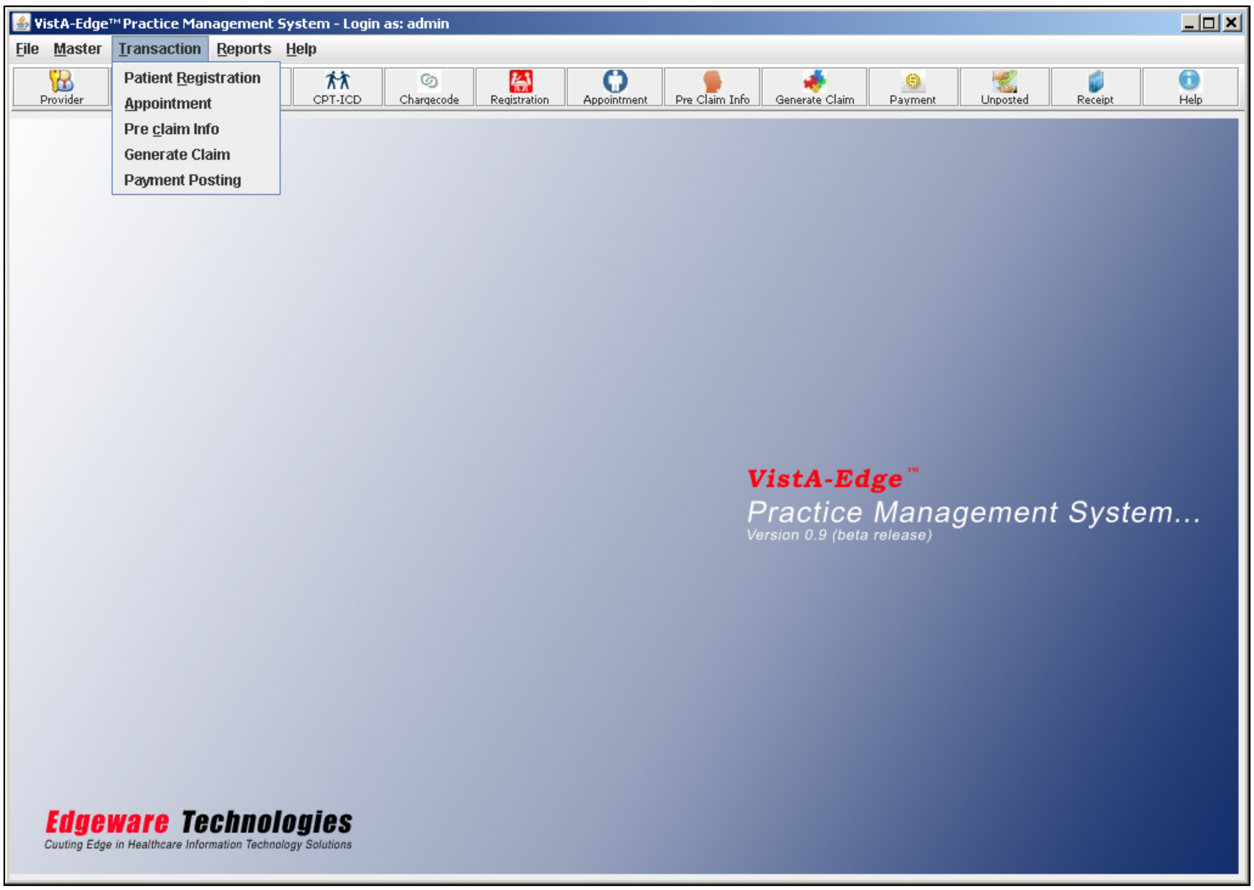
The “Search” button can be used to lookup specific charge codes, if searched according to the parameters selected in the screen. If no parameter is selected or the screen is reset, then clicking the “Search” button will display the complete list of stored charge codes. The “Search” button functions in the same way in other Master options as well, i.e, Facility, Insurance Company and Provider Masters.

NOTE: Due to licensing issues, CPT codes have not been added to the Database.

The Transaction Menu

Clicking the 'Transaction' Menu will display five options as seen below:

1. Patient Registration
2. Appointment
3. Pre-claim info
4. Generate Claim
5. Payment Posting



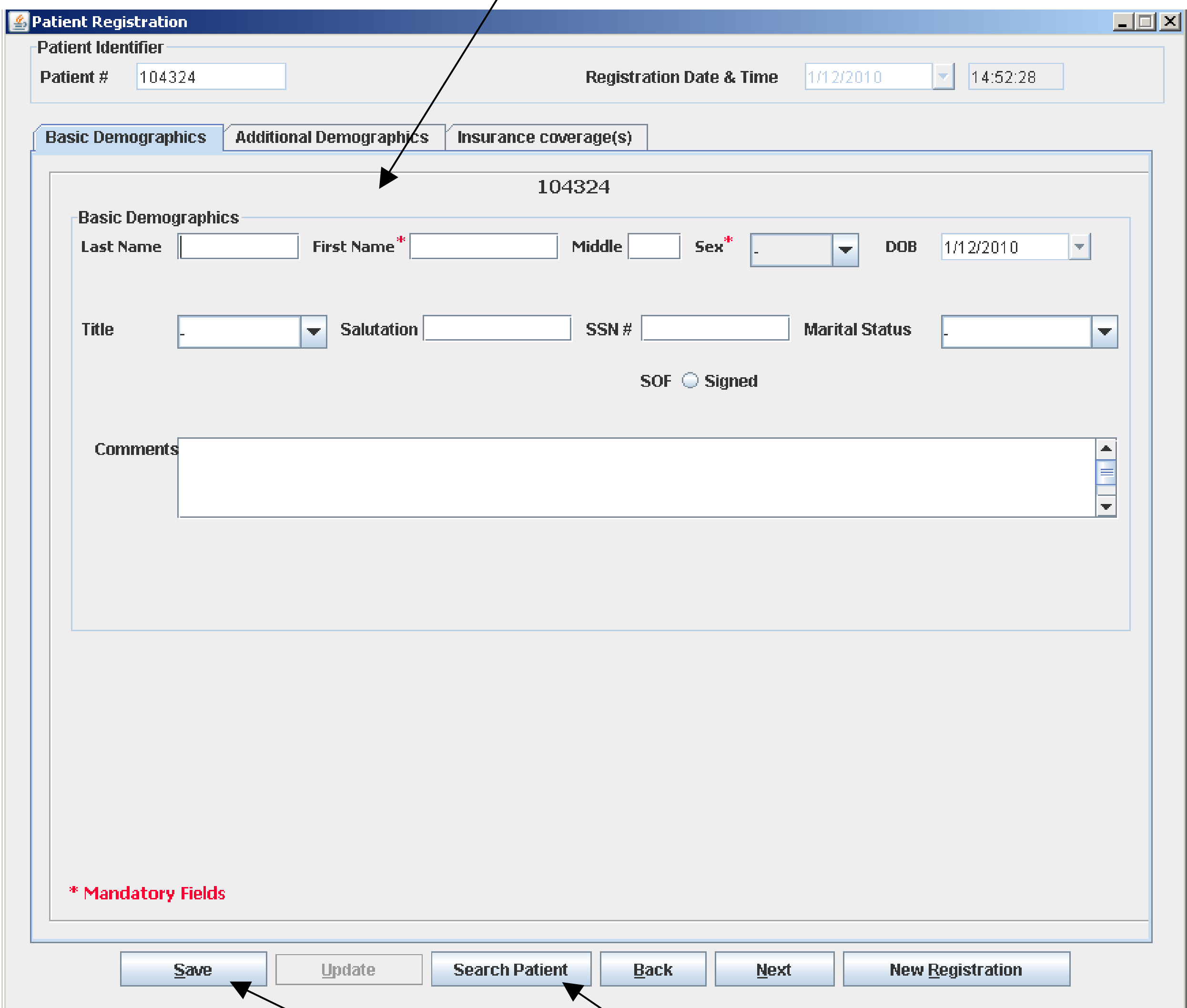
Patient Registration option

On clicking the "Patient Registration" option, the following screen pops up. This screen is used to register the patients by adding their details in the system.

The screen has the following three tab buttons:

1. Basic Demographics
2. Additional Demographics
3. Insurance Coverage(s)

1.Enter the last name, first name, sex and other relevant information about the patient in the boxes.



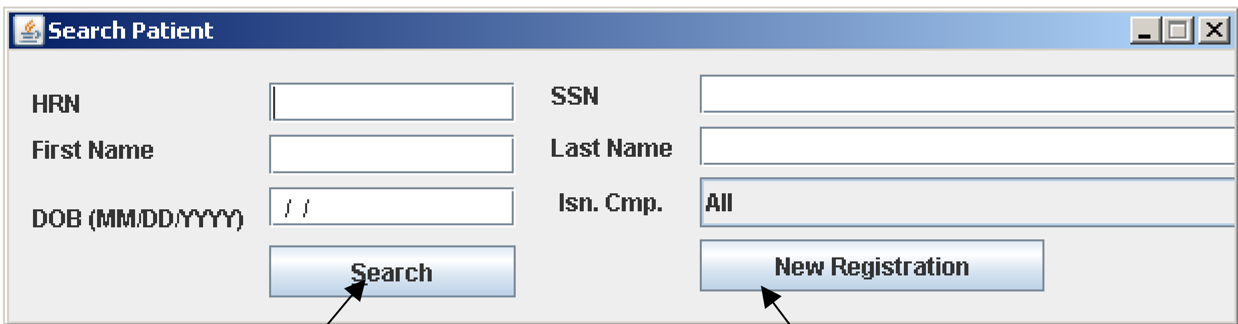
2.After entering the required details about the patient, click on the save button to register the patient.

Click on this button if you want to search for the already registered patient.

We can register a patient by filling all the mandatory fields in all the demographics tabs, marked as (*) .If we try to register a patient without entering any of the mandatory fields, then it will display an error message and the patient will not get registered. A unique patient ID is generated by the system, which will be used in VistA as well.

The patient registration screen also has an option for searching registered patients.

On clicking the “Search Patient” button on this screen, the following screen will pop up.
We can edit/update the patient information by selecting the patient by using the “Search Patient” Button.



1.After entering the Search Parameters, click the ‘Search’ button to search for the required patient.

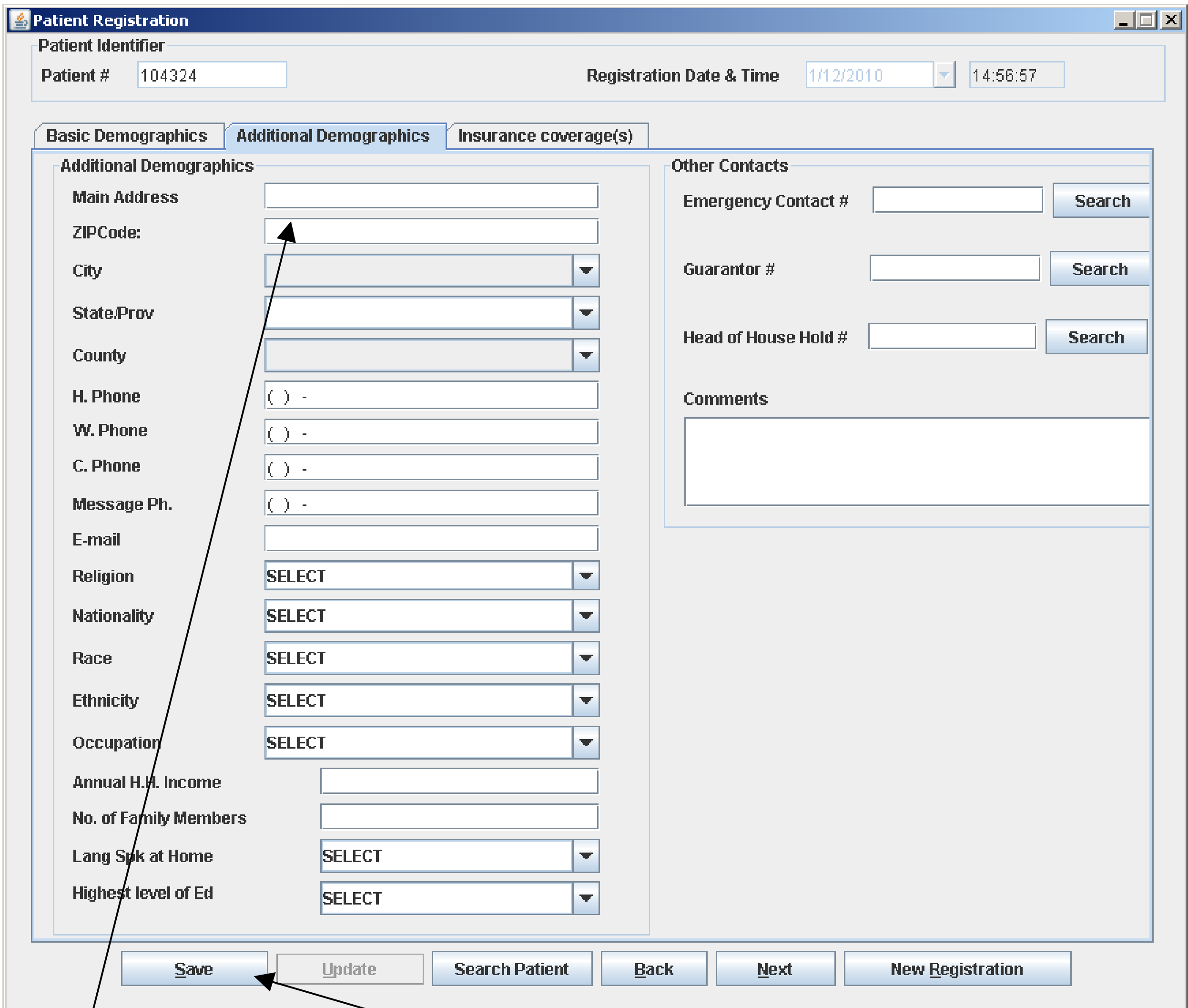
2.Click on this button if you want to make a new registration. Clicking this button will take you to the patient registration screen.

Once the patient has been added to the system, the patient demographics can be updated as and when required.

Additional Demographics tab

On clicking the "Additional Demographics" tab, the following screen is made available.

This screen has the option for storing more information about the patient.



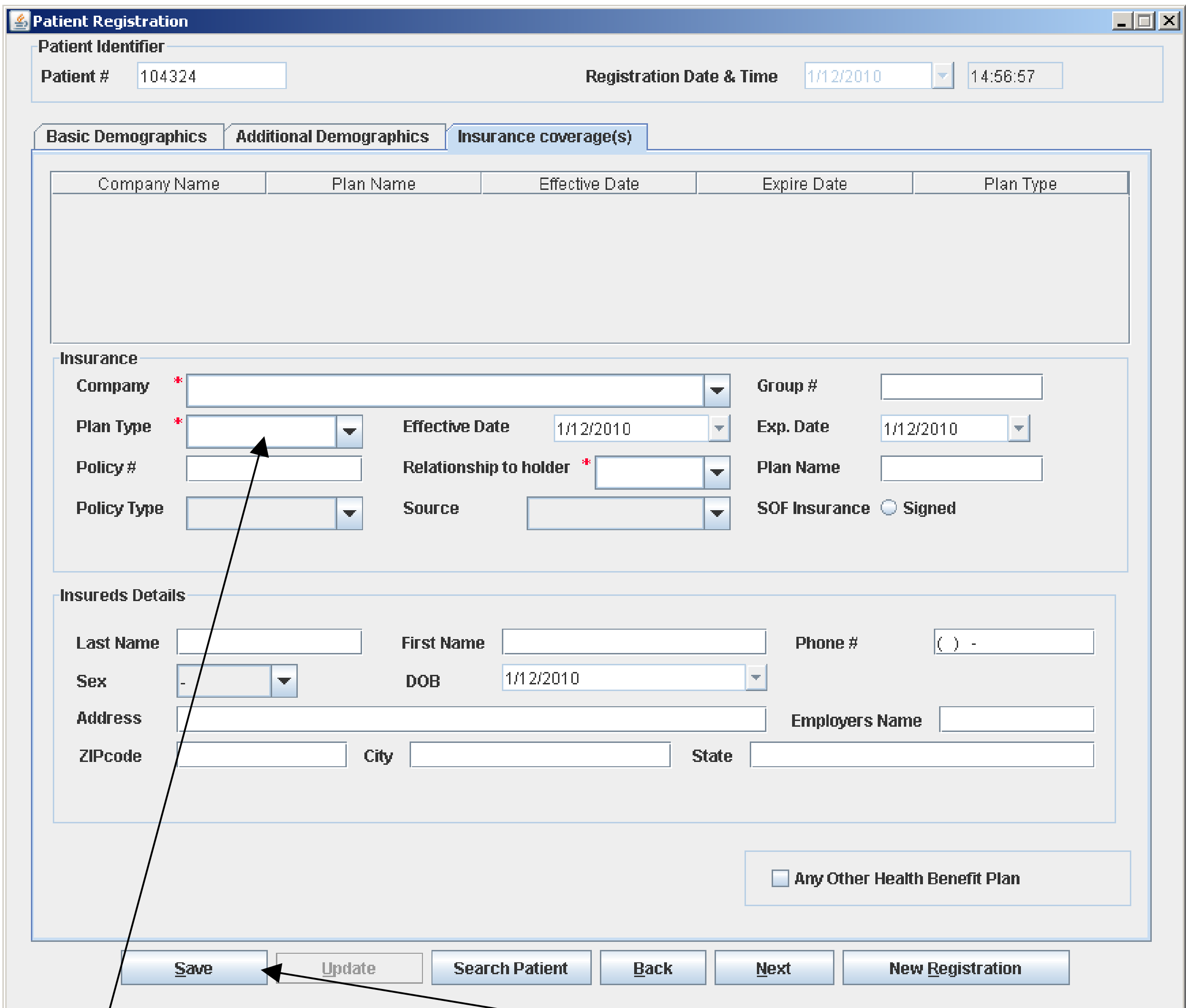
1.Enter all the required details about the patient like Address, Phone No., religion, nationality, etc in the respective boxes.

2.Click on the save button to save the information about the patient.

Insurance Coverage(s) tab

On clicking the “Insurance Coverage(s)” tab, the following comes up.

This screen is used for storing the Insurance Coverage(s) details of the patient for different Insurance companies and assigning them as Primary, Secondary or Tertiary. It also has the option for storing information about the Policy Holders.



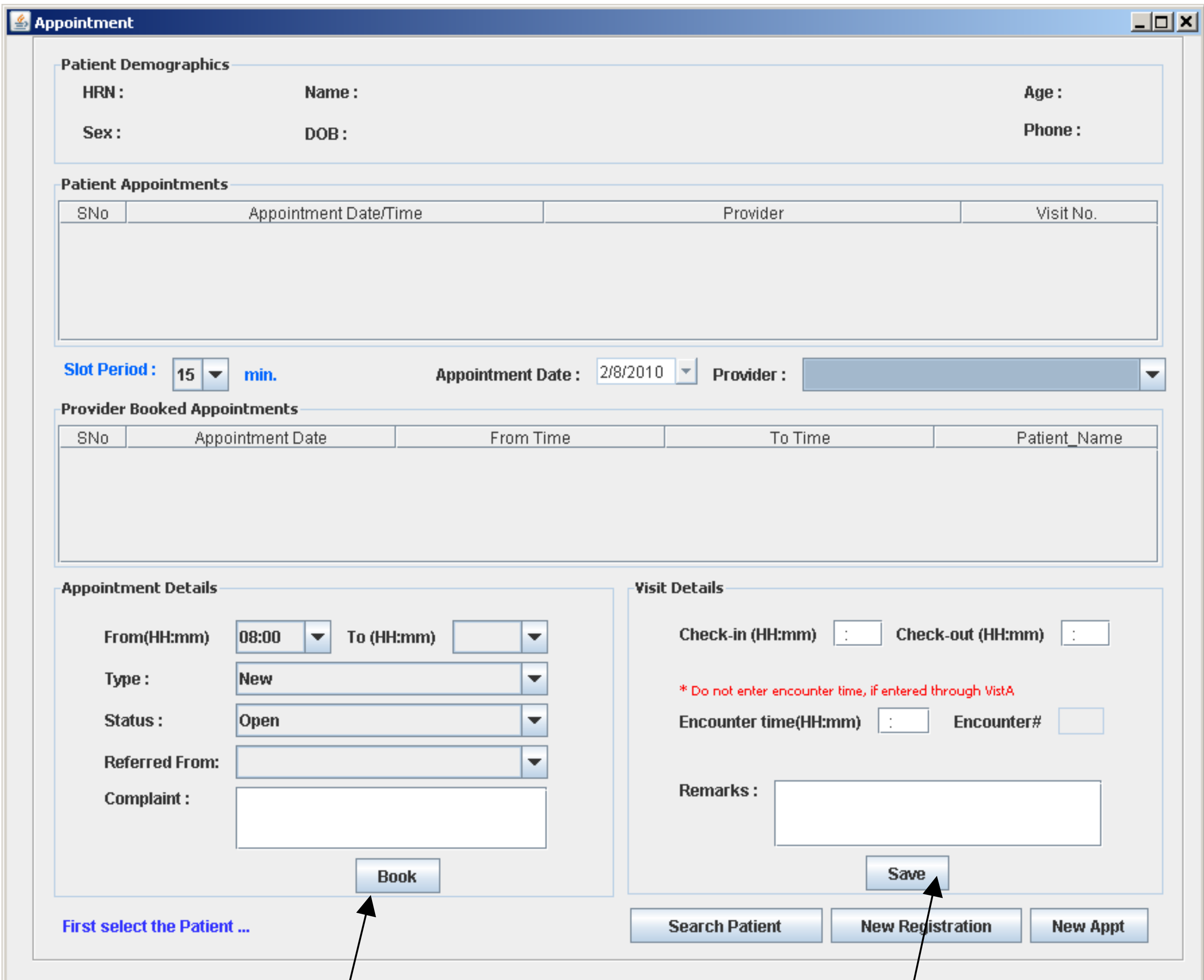
1.Select the Company and the Plan Type from the down menu and enter other relevant details like Policy Type, Source, Policy Holder's details, etc in the respective boxes.

2.Click on the save button to save the Insurance Coverage(s) details of the patient.

Appointment option

On clicking the "Appointment" option, the following screen pops up. To lookup patients, click the "Search Patient" button. Once the patient is selected choose the concerned provider from the "Provider" drop down box, enter the appointment date and time, click the "Book" button to create the appointment.

For new patients, we have to first register them by clicking the "New Registration" button before making the appointment.



1.Click on 'Book' button to Book an appointment for the required patient.

2.Click on the save button to save the Encounter Details of the patient.

The Visit details section allows the entry of ‘Check in Time’ and ‘Check out time’.

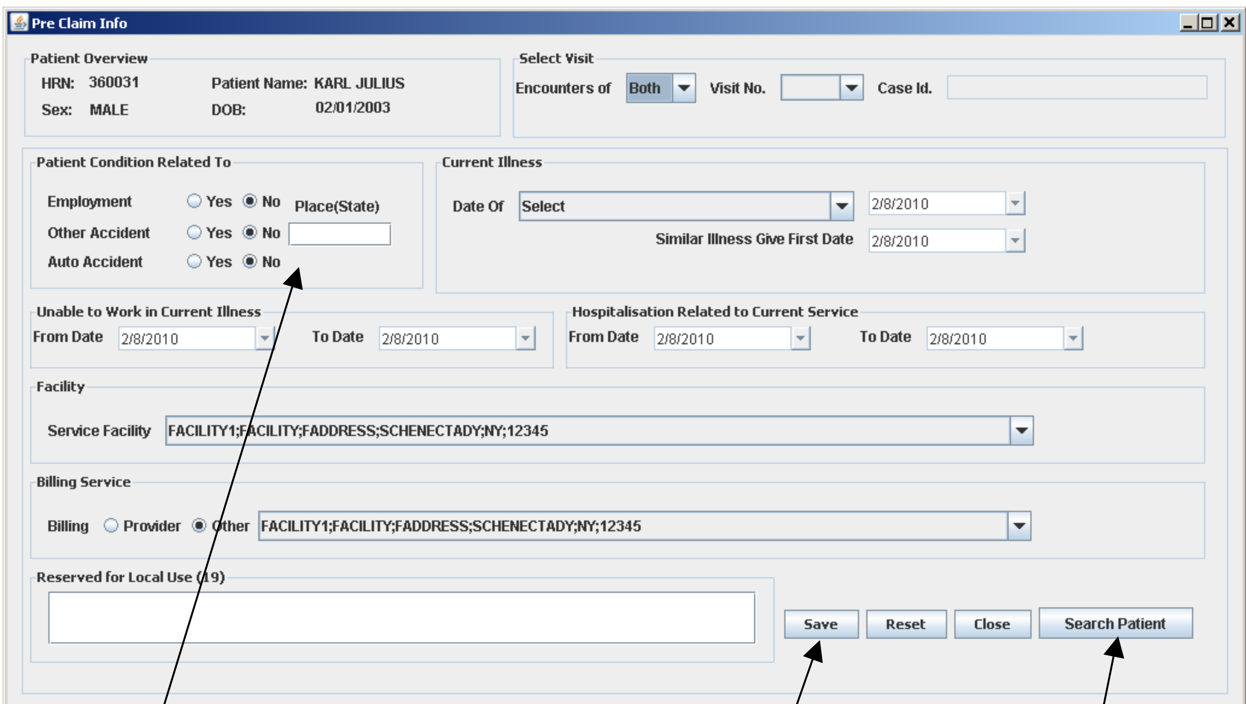
Please note: If the **VistA-Edge**™ PMS is not interfaced with VistA (that is the PMS is being used independently for Billing), when the patient arrives at the clinic, the Encounter Time is to be filled in, using this screen.

Pre Claim Info option

On clicking the “Pre Claim Info” option, the following screen pops up.

This screen is used to store the visit details of the patient with the concerned provider. After the appointment has been made and the doctor sees the patient, a Visit Number is created. After filling the details mentioned on the screen, a Case Id is generated. The software will automatically assign the Case ID for the first case as “HRN.001”, “HRN.002” for the second visit, so on and so forth.

Only after the Case for the patient is created can the ‘Generate Claim’ option be used for generating the claim.



2.Enter the required details like Patient Condition details, Current Illness, Facility, Billing Service, etc about the patient in the respective boxes.

3.Click on the save/update button to save the visit details of the patient.

1.Click on this button to search for the required patient.

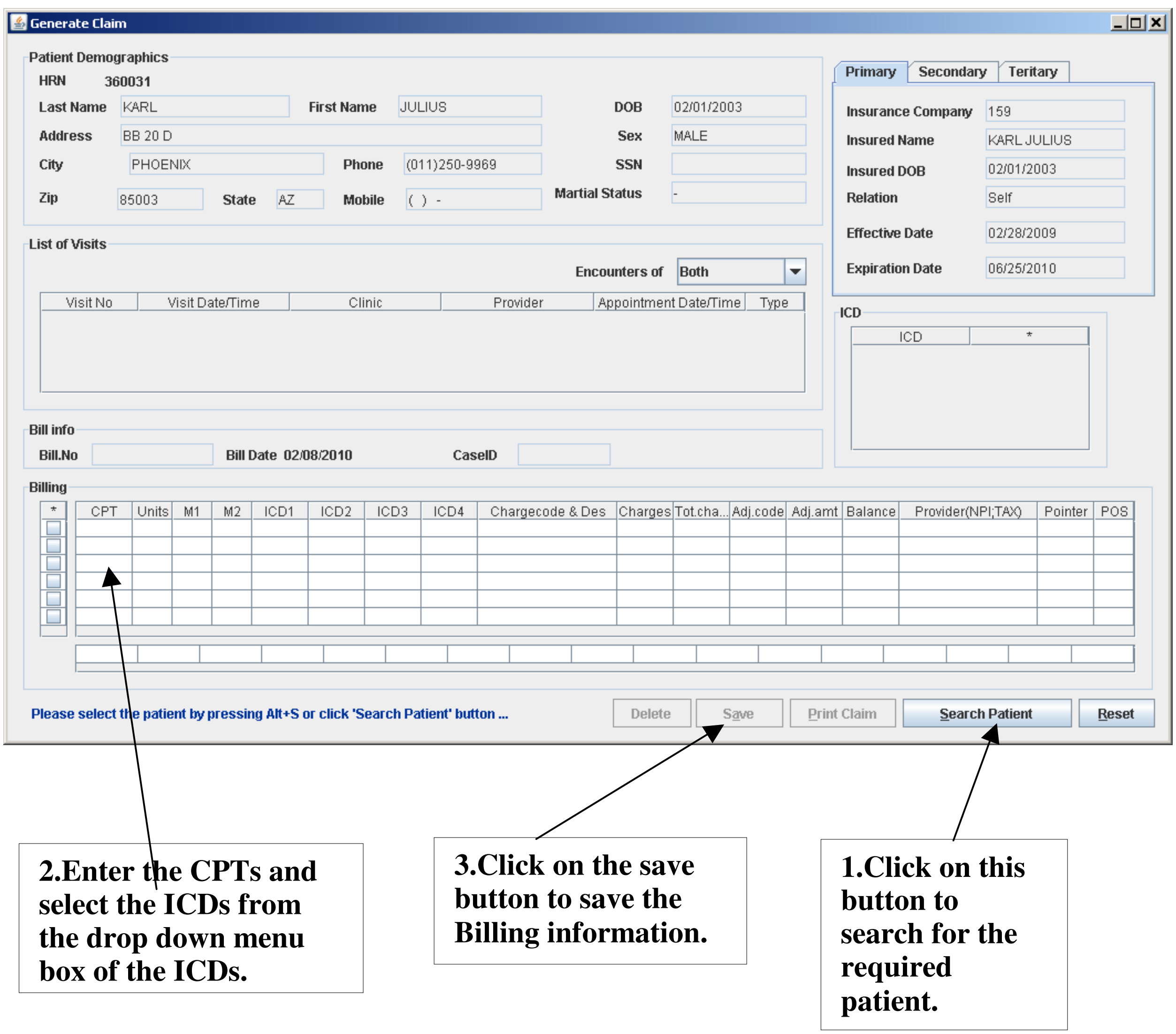
Generate Claim option

On clicking the "Generate Claim" option, the following screen pops up. This screen is used to store the billing information. Once the patient is selected, the 'Patient Demographics', Insurance Details and 'List of Visits' will be populated.

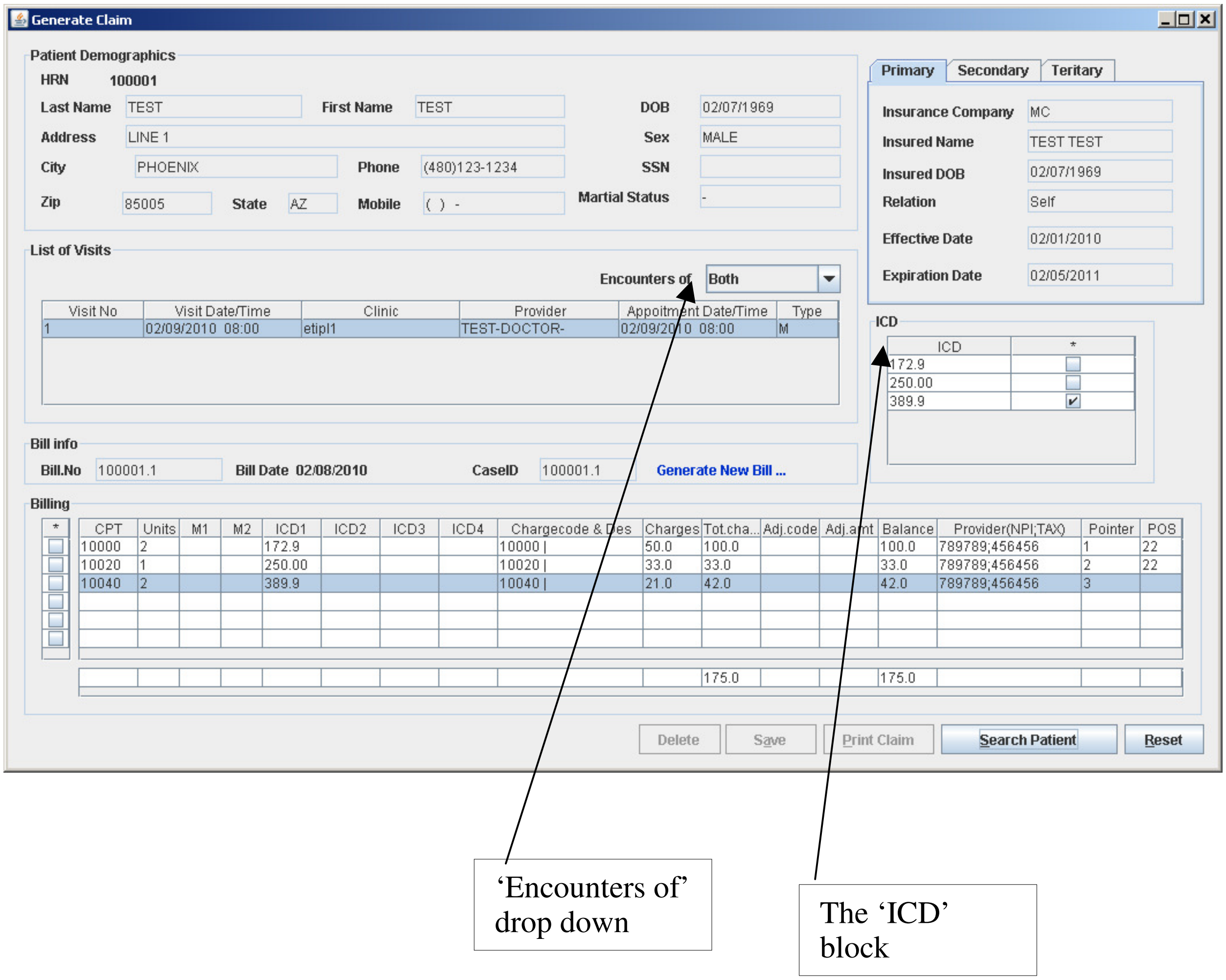
Select the Visit for which the CMS 1500 form is to be generated. The 'Encounters of' drop down box can be used to filter the List of visits, for those received from VistA, entered in the PMS, or both.

Note: Please refer to Annexure 1 for details on how the Billing details are captured and sent from VistA

In Case billing data is not received from VistA, they can be entered using this screen. First select the visit and then enter the CPT and ICD codes to be billed for the selected visit.



Populated 'Generate Claim' Screen:



The Visit Date is the date of service.

To Generate the CMS Form 1500

- If PMS is not interfaced with VistA:
  - Select the Visit (created using the 'Pre-Claim info' option)
  - Enter the CPT code for the procedures performed on the patient during the visit. To do so single click the first field in CPT column and type the appropriate CPT
  - Enter additional details (Units of procedure etc.)
  - Assuming that the CPT-ICD Link master is in place, the possible ICD codes can be selected for each entered CPT Code by clicking the drop down menu under ICD.
  - Assuming that the Chargecode master is updated, select the appropriate Chargecode for each CPT/procedure.
  - The charges will be picked up and total calculated automatically.

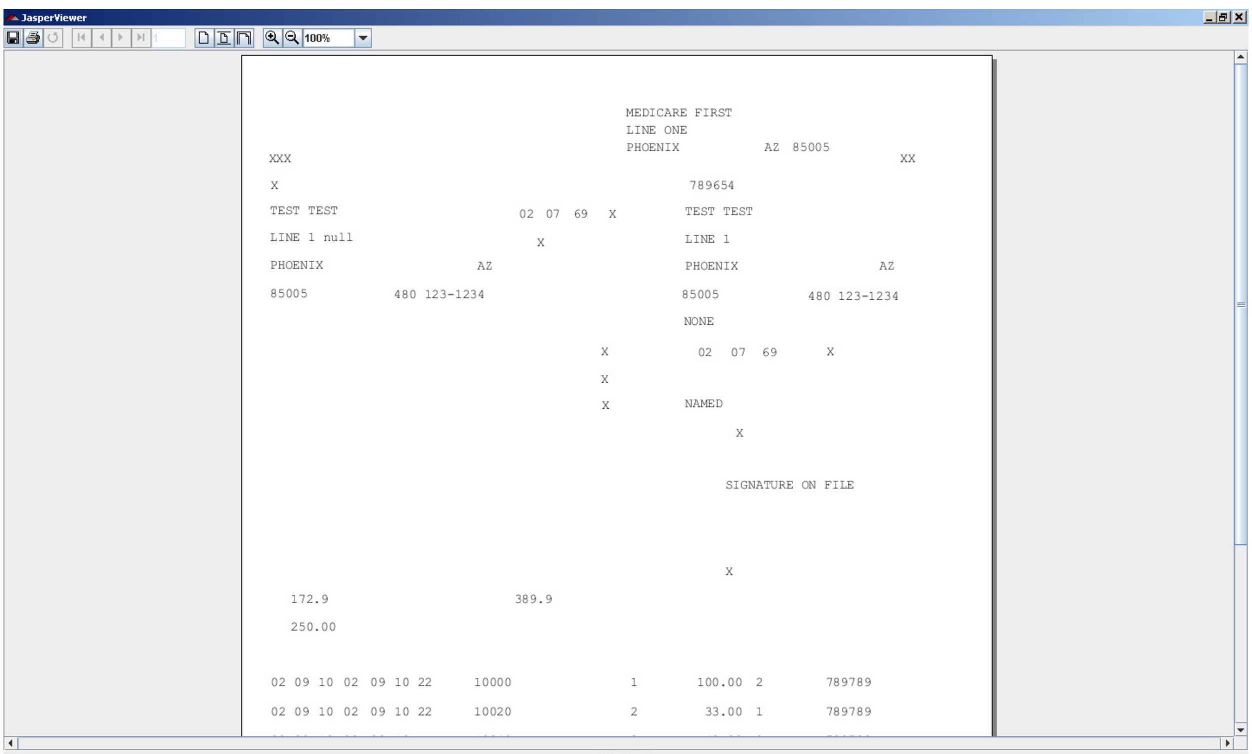
- Use the 'Save' button to save the claim data entered. This will enable the 'Print Claim' option.
- Use the 'Print Claim' option to print the HCFA 1500 form.

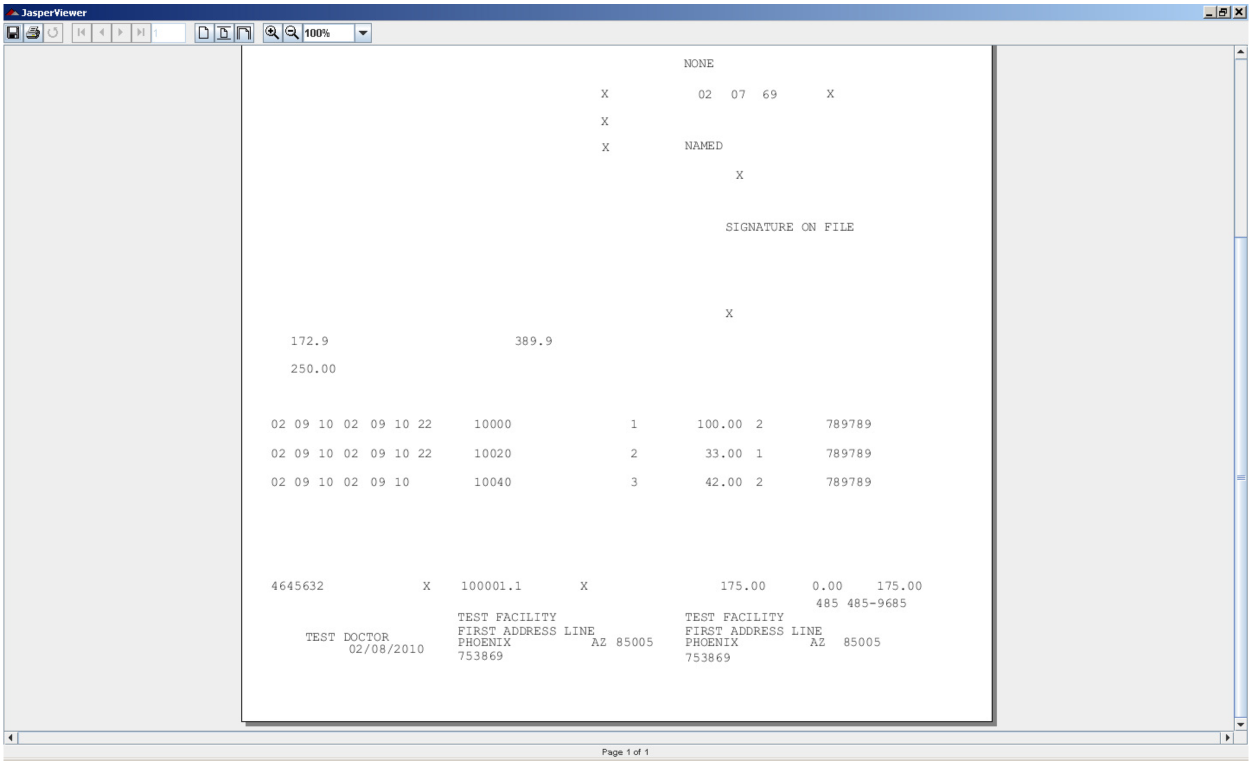
- If billing information is sent from VistA:

  - To see the list of CPT's sent from VistA only select 'VistA' from the 'Encounters of' drop down box.
  - The List of Diagnoses sent from VistA will be displayed in the ICD Block.
  - Click on the 'CPT' column to see and select the each CPT to be added to the Claim.
  - For each CPT selected, add the related ICD, units, chargecode and other details.
  - The charges will be picked up and total calculated automatically.
  - Use the 'Save' button to save the claim data entered. This will enable the 'Print Claim' option.
  - Use the 'Print Claim' option to print the HCFA 1500 form.

This form after a thorough check can be printed on a CMS 1500 FORM, which can be sent to the concerned payer.

Sample CMS-1500 Form

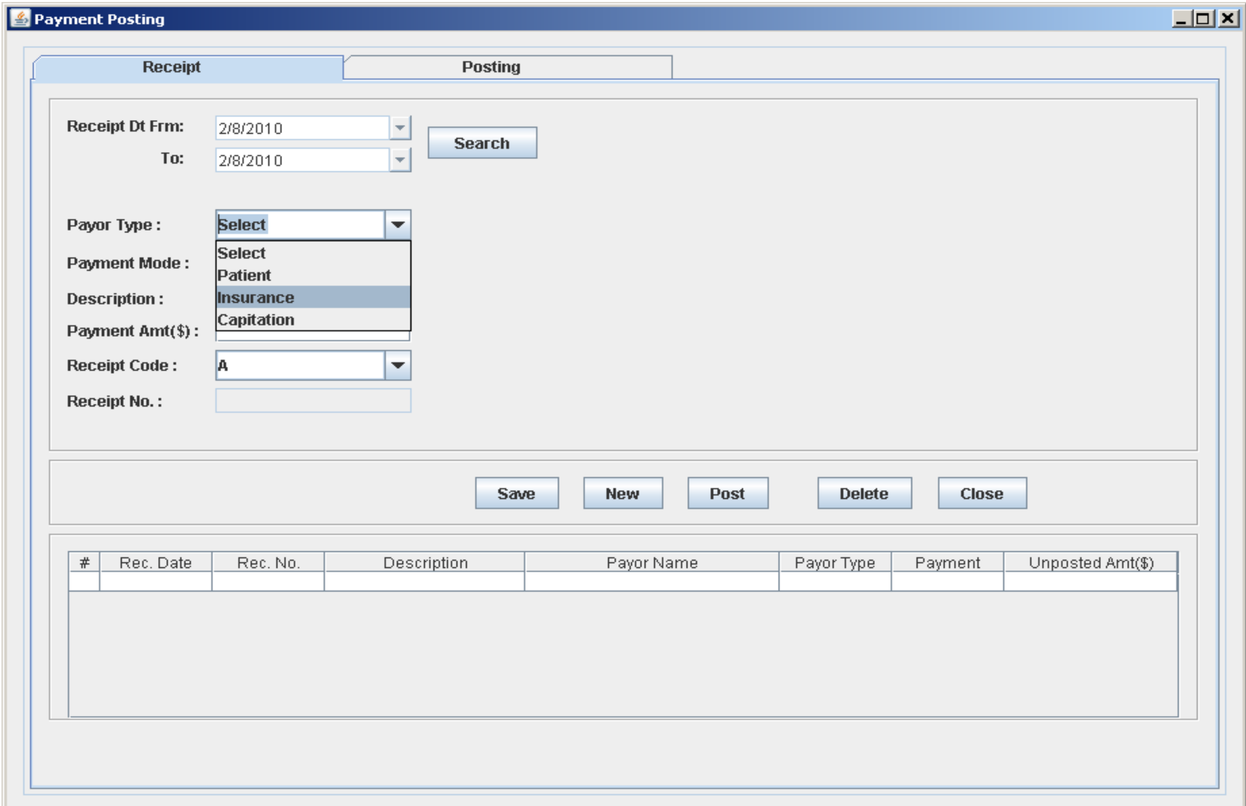


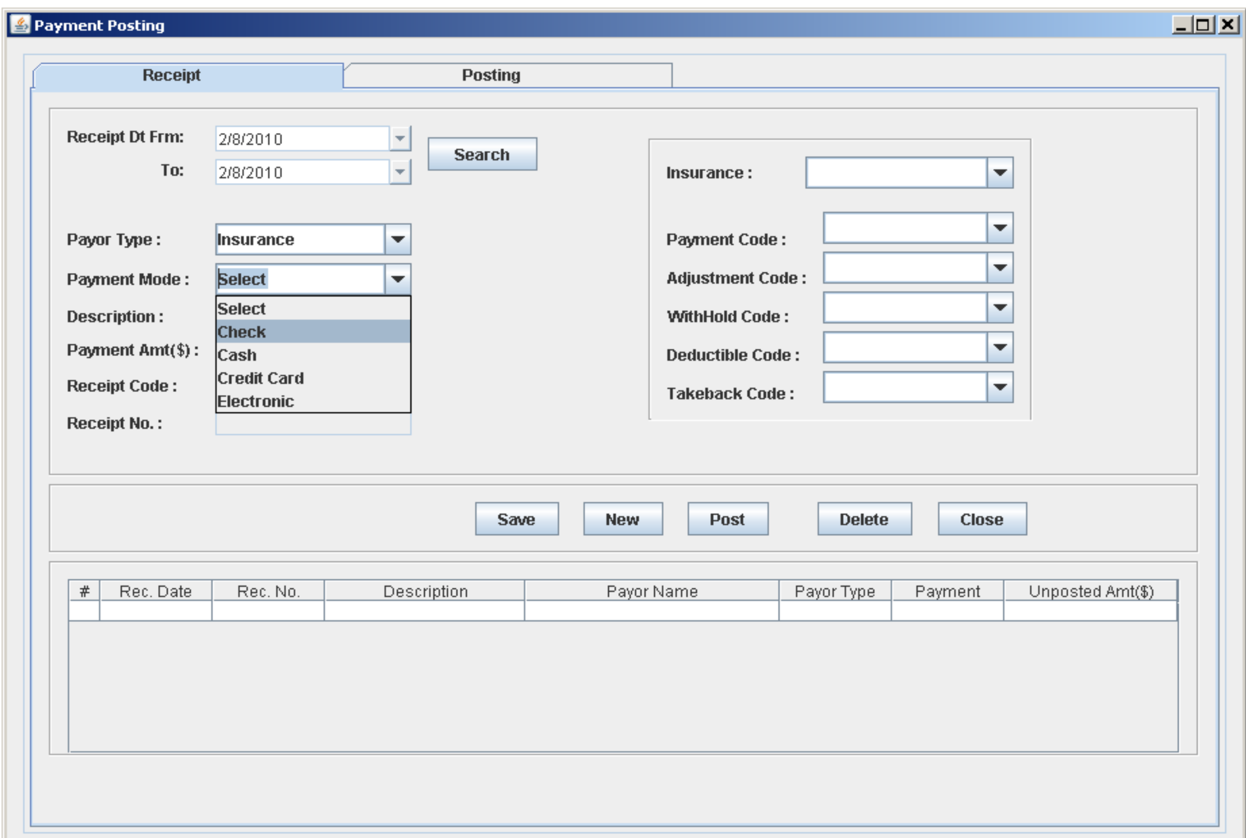


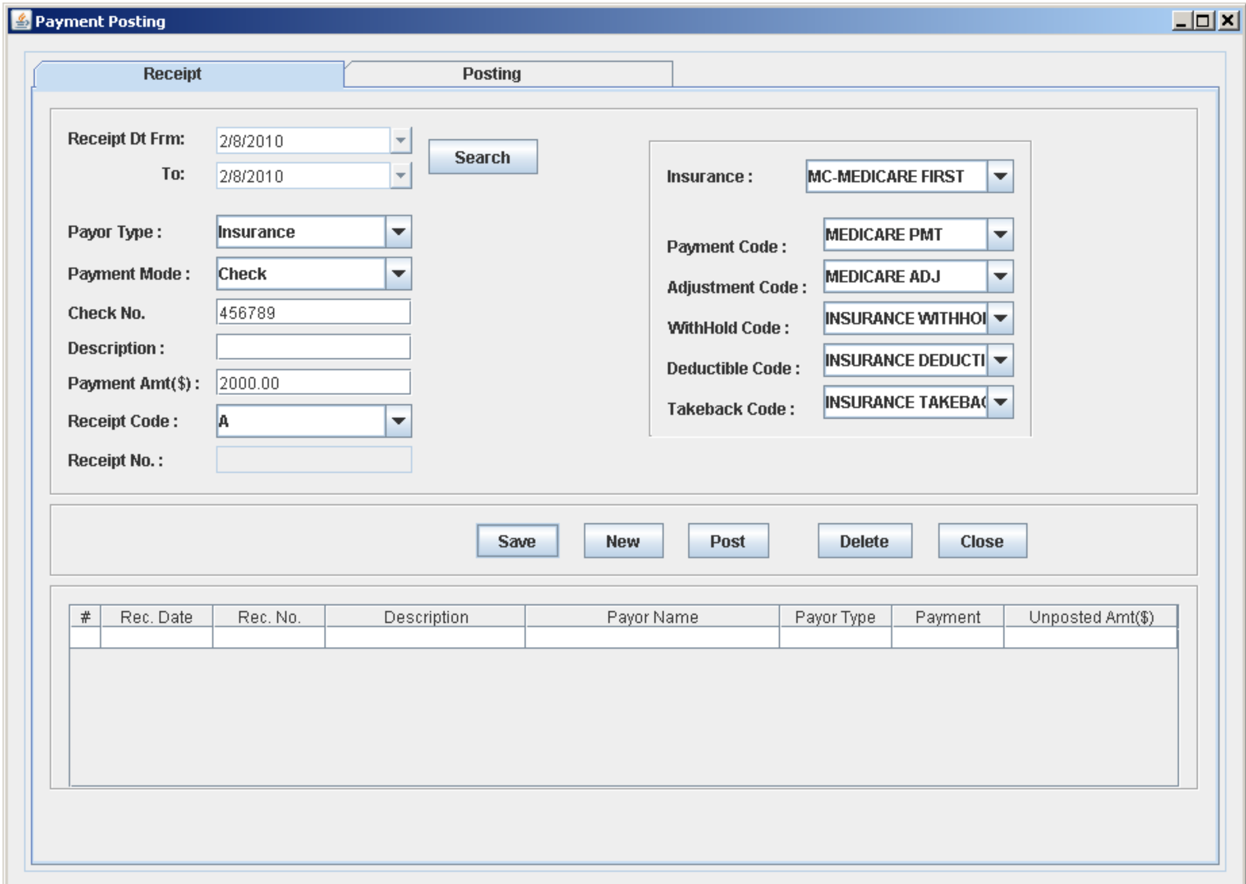
Payment posting option

This option can be used to enter the receipts of payments into the system and to post the corresponding amount to the patient claim.

Depending on the Payer is Insurance the details of the specific insurance company can also be linked to the receipt.

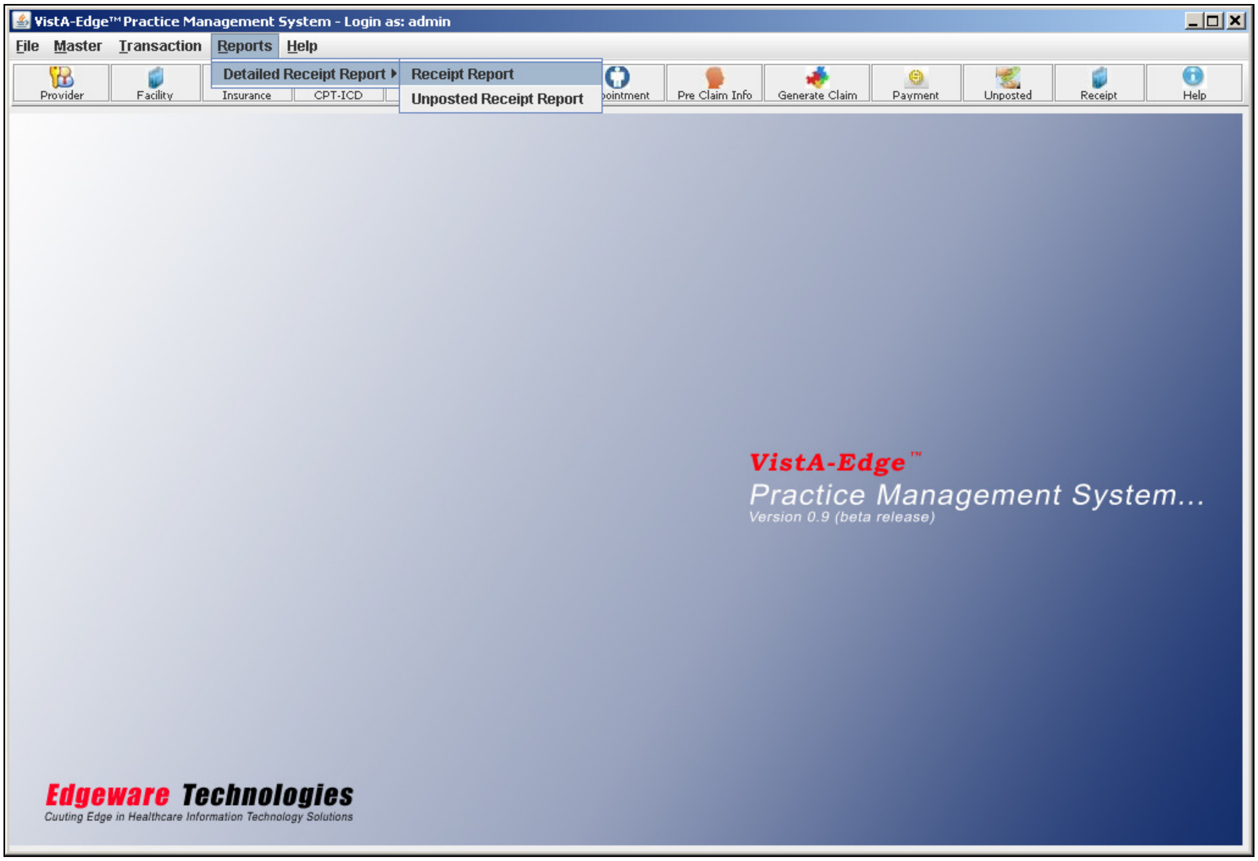

Payment Posting
Receipt
Posting
Receipt Dt Frm:
2/8/2010
To:
2/8/2010
Search
Payor Type :
Select
Payment Mode :
Description :
Payment Amt($) :
Receipt Code :
Receipt No. :
Select
Patient
Insurance
Capitation
A
Save
New
Post
Delete
Close
Rec. Date Rec. No. Description Payor Name Payor Type Payment Unposted Amt($)


Payment Posting
Receipt
Posting
Receipt Dt Frm:
2/8/2010
To:
2/8/2010
Search
Insurance :
Payor Type :
Insurance
Payment Mode :
Select
Description :
Payment Amt($) :
Receipt Code :
Receipt No. :
Select
Check
Cash
Credit Card
Electronic
Payment Code :
Adjustment Code :
WithHold Code :
Deductible Code :
Takeback Code :
Save
New
Post
Delete
Close
Rec. Date Rec. No. Description Payor Name Payor Type Payment Unposted Amt($)

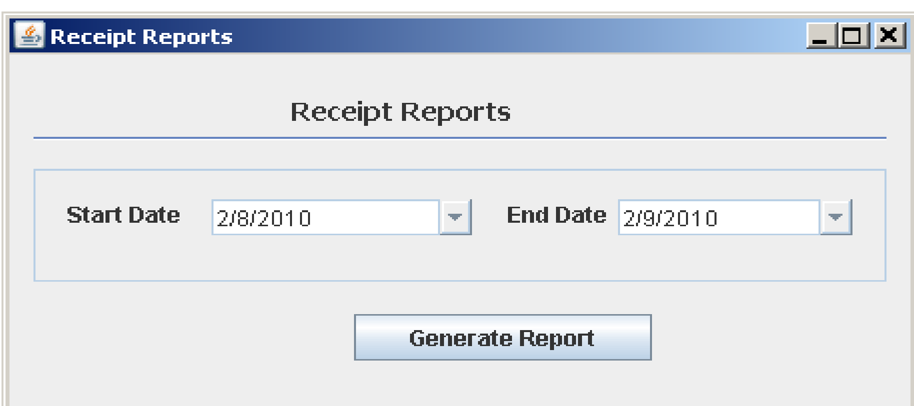

Payment Posting
Receipt
Posting
Receipt Dt Frm:
2/8/2010
To:
2/8/2010
Search
Payor Type :
Insurance
Payment Mode :
Check
Check No.
456789
Description :
Payment Amt($) :
2000.00
Receipt Code :
A
Receipt No. :
Insurance :
MC-MEDICARE FIRST
Payment Code :
MEDICARE PMT
Adjustment Code :
MEDICARE ADJ
WithHold Code :
INSURANCE WITHHOI
Deductible Code :
INSURANCE DEDUCTI
Takeback Code :
INSURANCE TAKEBA(
Save
New
Post
Delete
Close
#
Rec. Date
Rec. No.
Description
Payor Name
Payor Type
Payment
Unposted Amt($)

The Reports menu
Clicking the 'Reports' Menu will display two options as seen below:

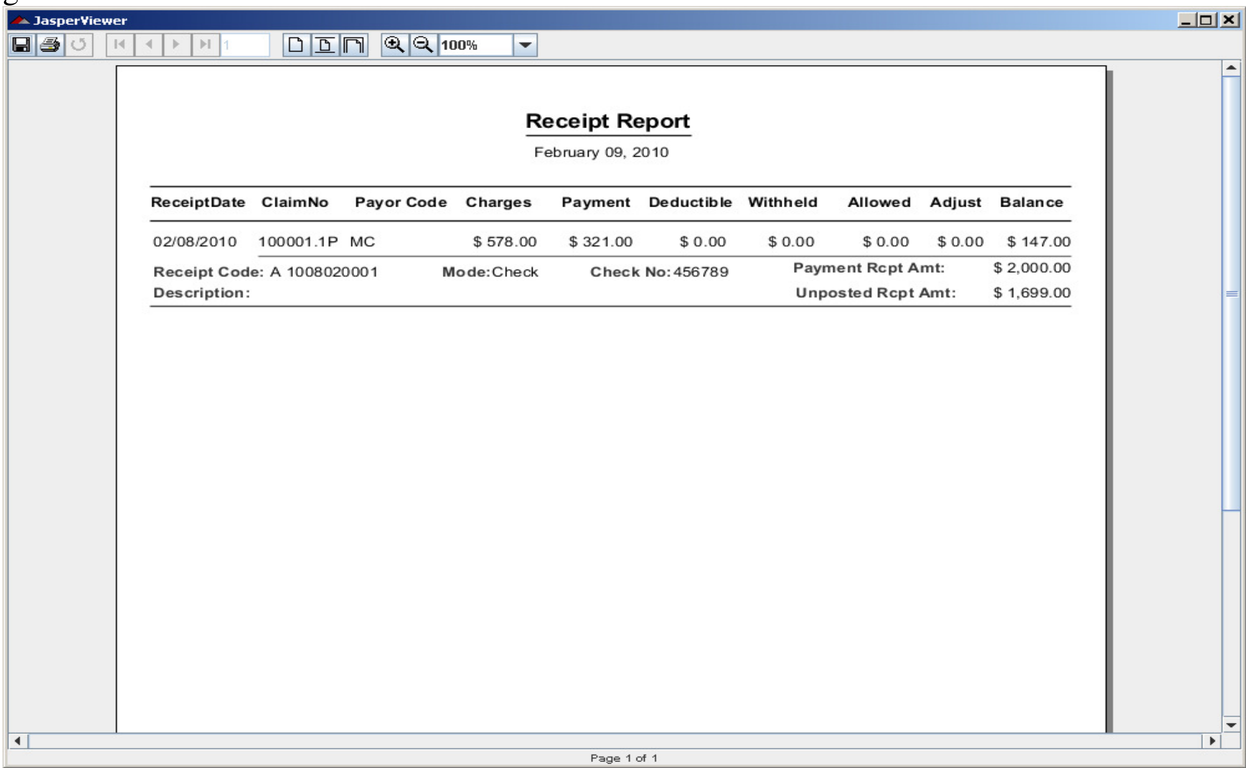
1. Detailed Receipt Report
   (a.) Receipt Report
   (b.) Unposted Receipt Report



Receipt Report:



On selecting the report to print, the user can enter the date range for which the report is to be generated.



JasperViewer

Receipt Report

February 09, 2010

ReceiptDate	ClaimNo	Payor Code	Charges	Payment	Deductible	Withheld	Allowed	Adjust	Balance
02/08/2010	100001.1P	MC	$ 578.00	$ 321.00	$ 0.00	$ 0.00	$ 0.00	$ 0.00	$ 147.00

Receipt Code: A 1008020001 Mode:Check Check No:456789 Payment Rcpt Amt: $ 2,000.00

Description: Unposted Rcpt Amt: $ 1,699.00

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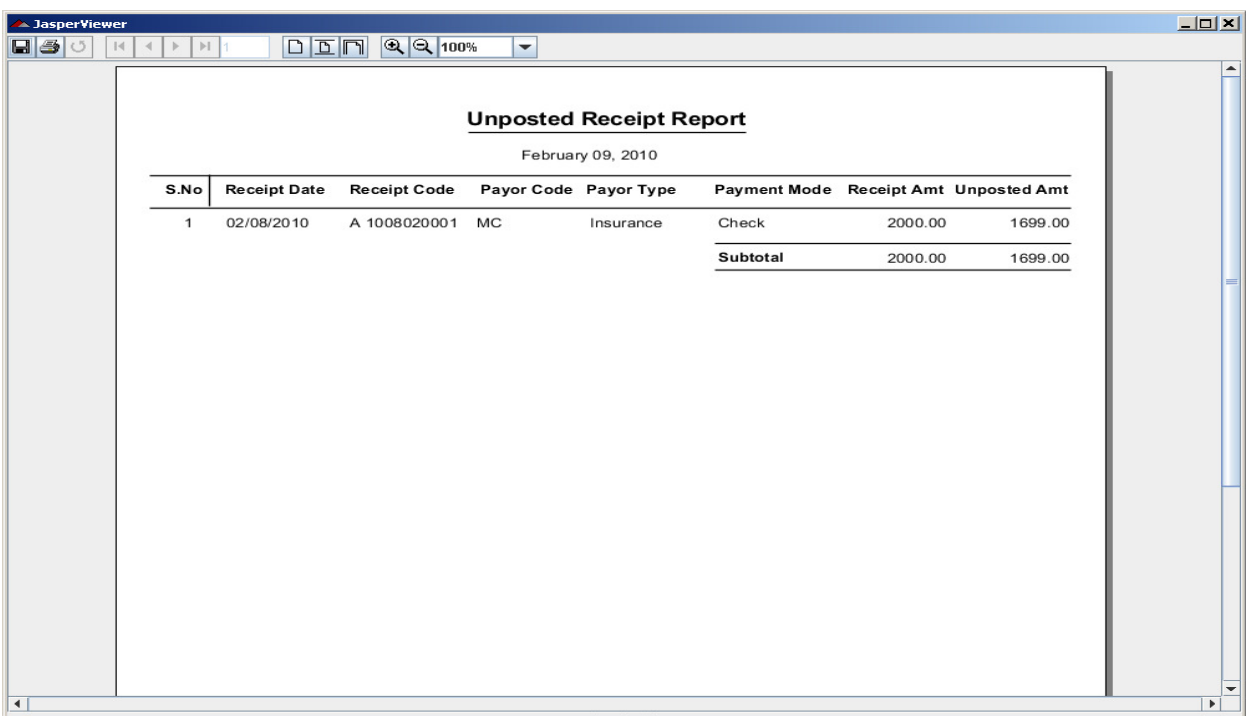
Unposted Receipt Report:



JasperViewer

Unposted Receipt Report

February 09, 2010

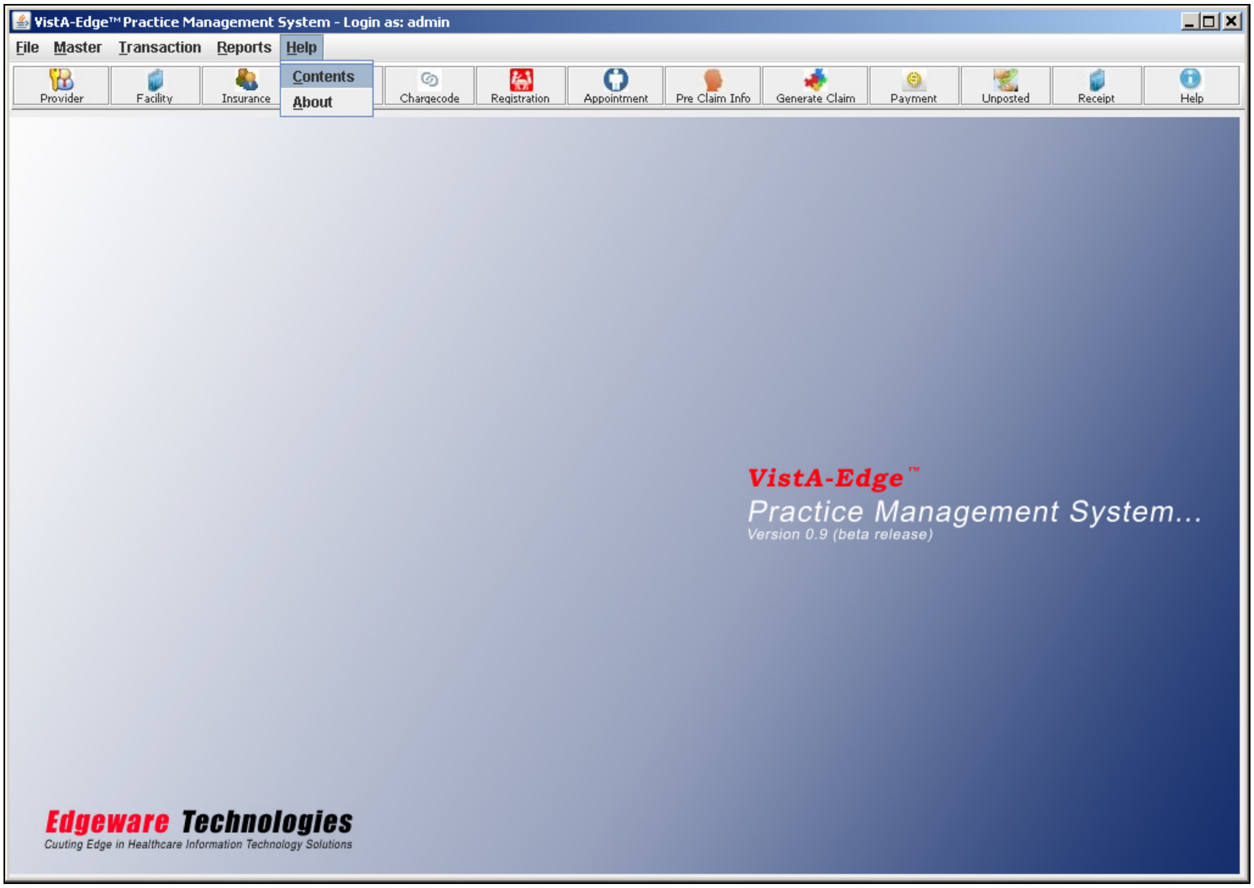
S.No	Receipt Date	Receipt Code	Payor Code	Payor Type	Payment Mode	Receipt Amt	Unposted Amt
1	02/08/2010	A 1008020001	MC	Insurance	Check	2000.00	1699.00
					Subtotal	2000.00	1699.00

Page 1 of 1

The Help menu

Clicking the ‘Help’ Menu will display two options as seen below:

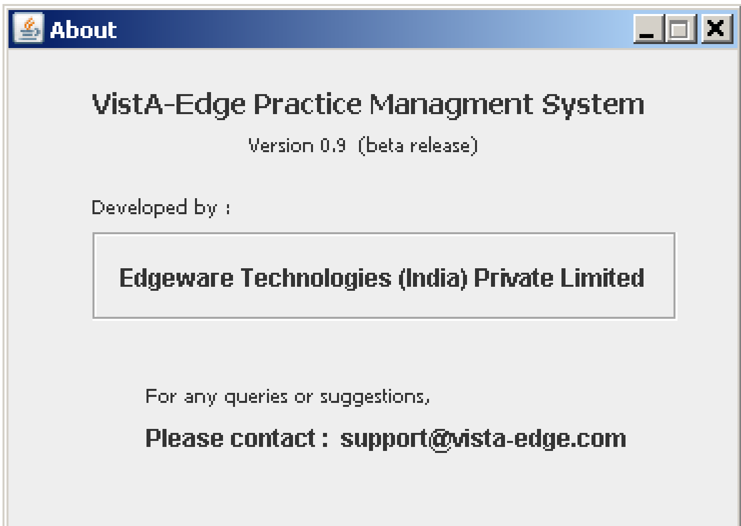
1. Contents
2. About



Clicking the ‘Contents’ option will open up the “**VistA-Edge™ PMS User Manual**”.

About option

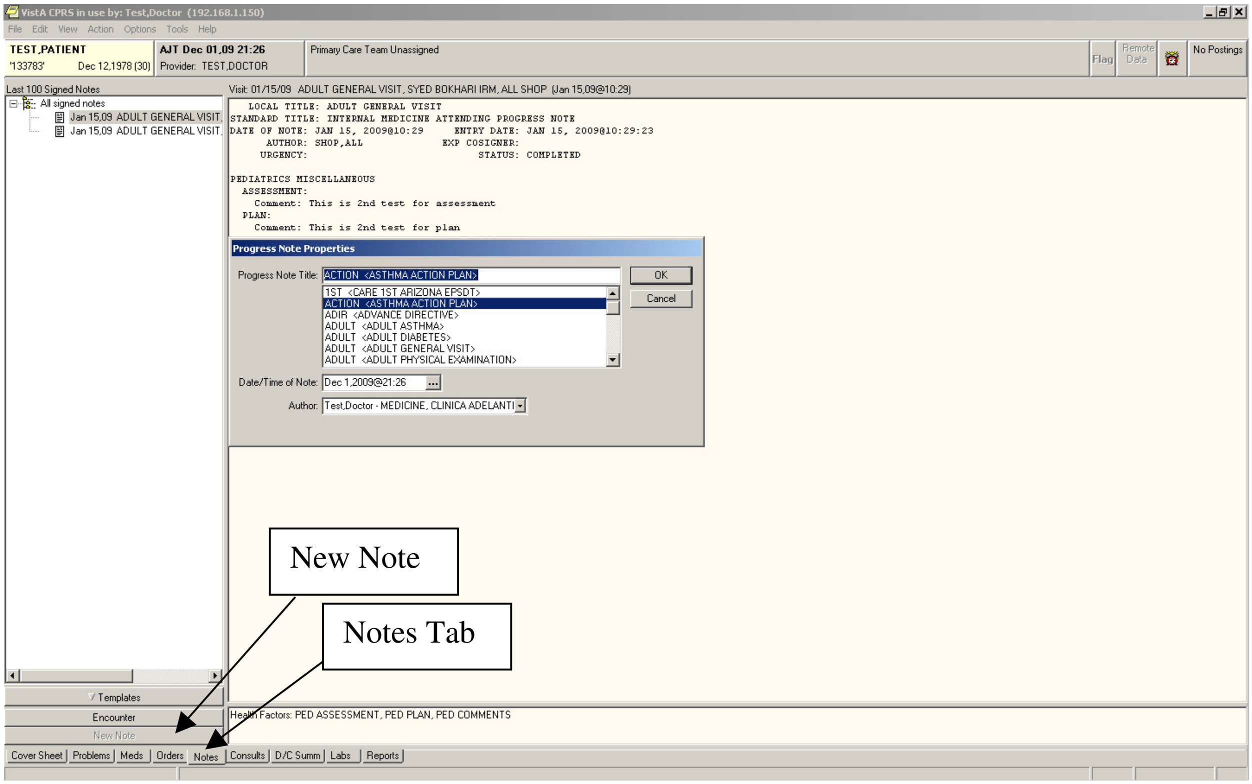
On clicking the "About" option, the following screen pops up.
This screen will display the information about the product and the contact details for any type of support required.

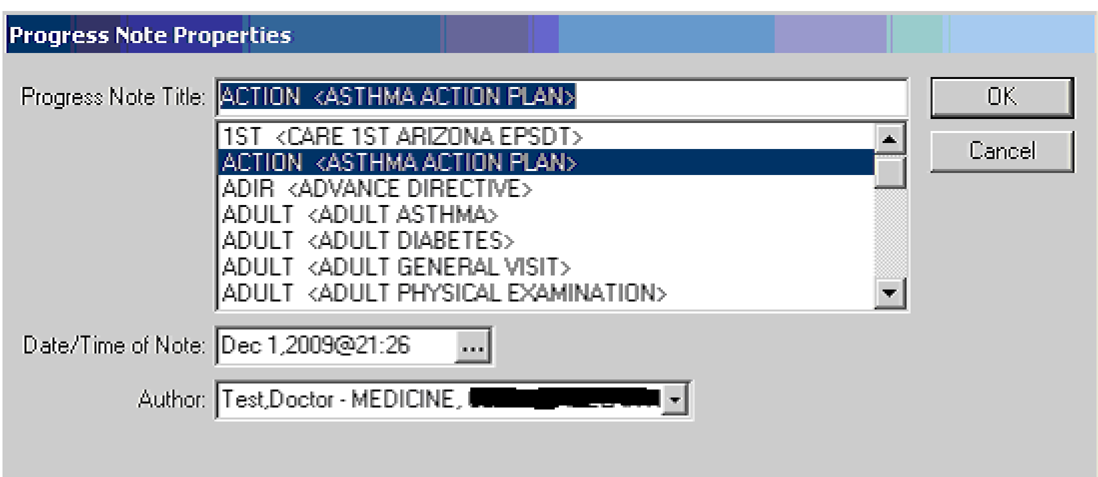


Annexure I

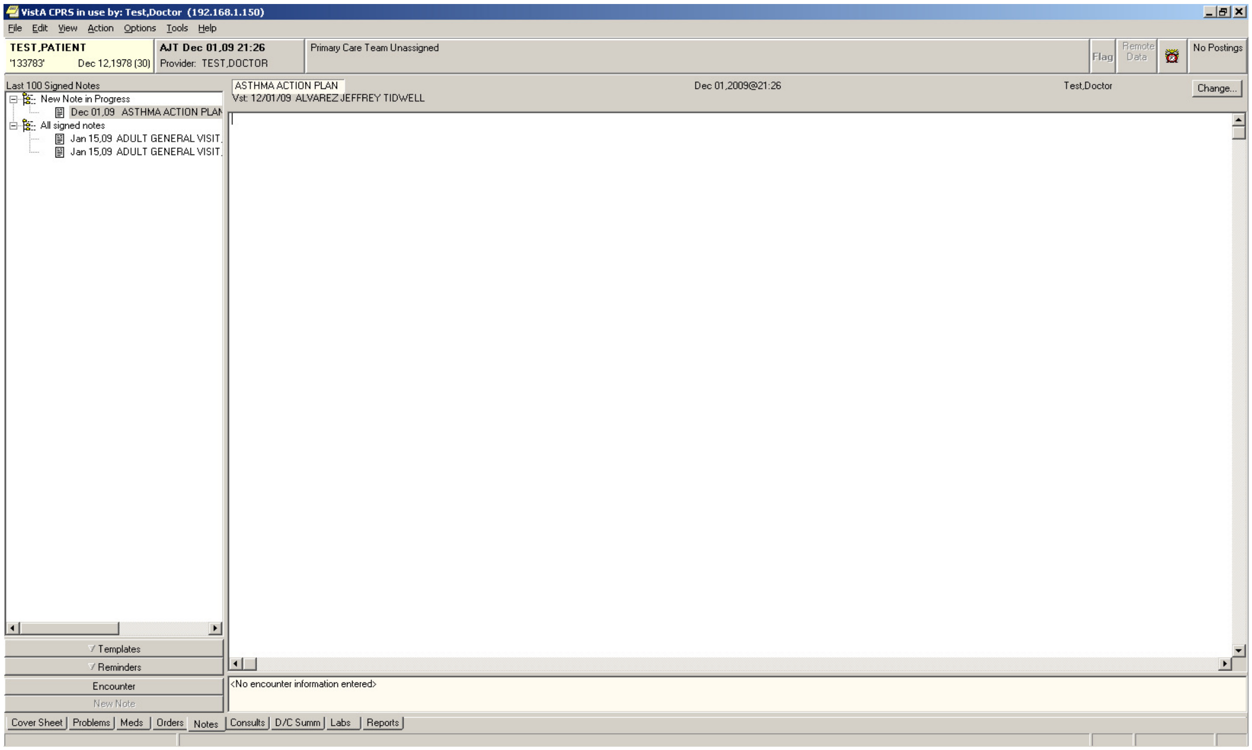
Enter Encounter Details in CPRS

Once logged in to CPRS, go to the 'Notes' Tab and click the "New Note" button to enter a note. Select a suitable note title.

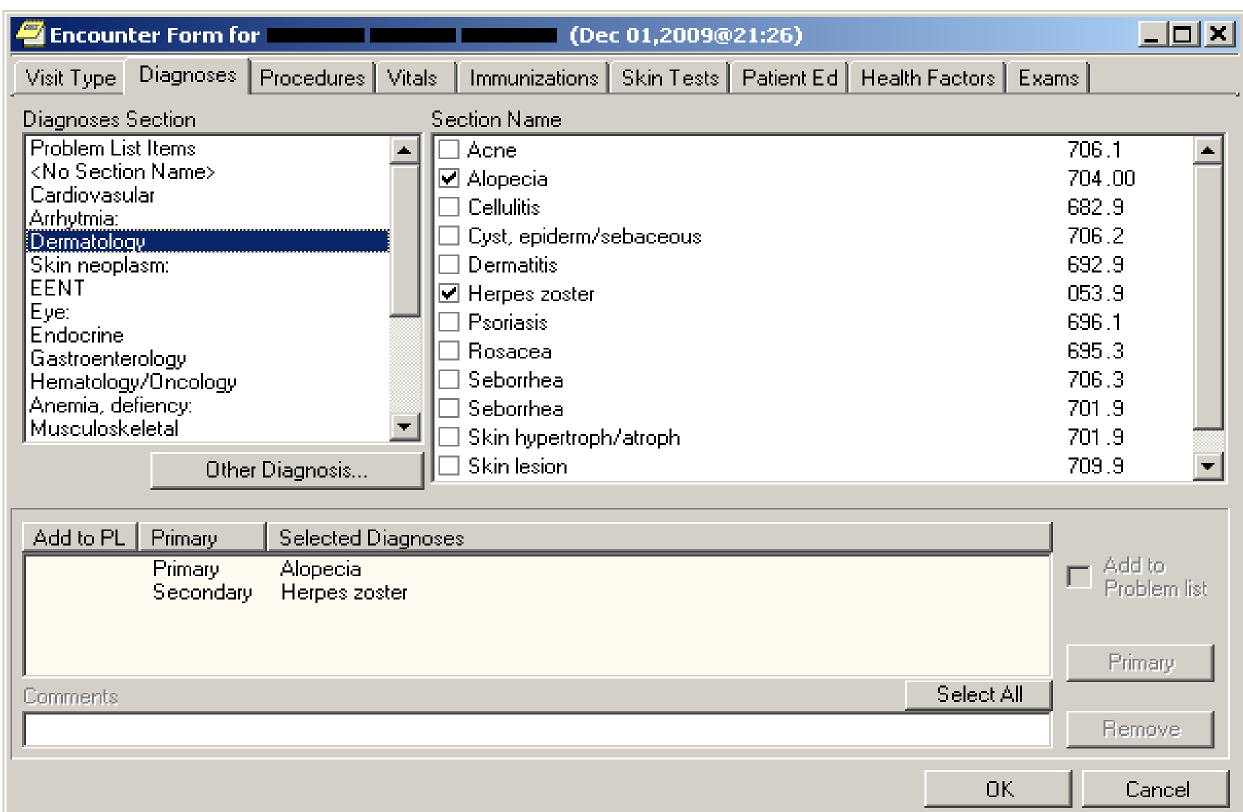




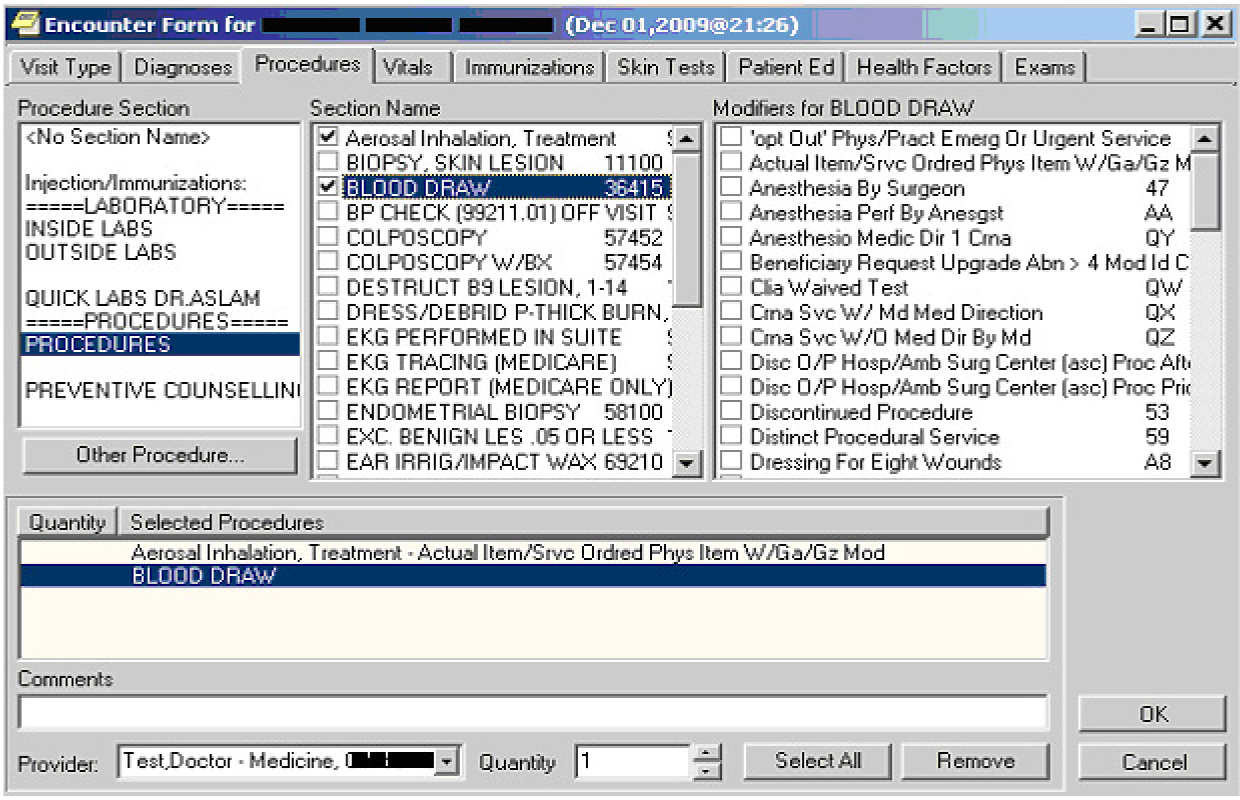
This will open a blank note as can be seen in the screenshot below



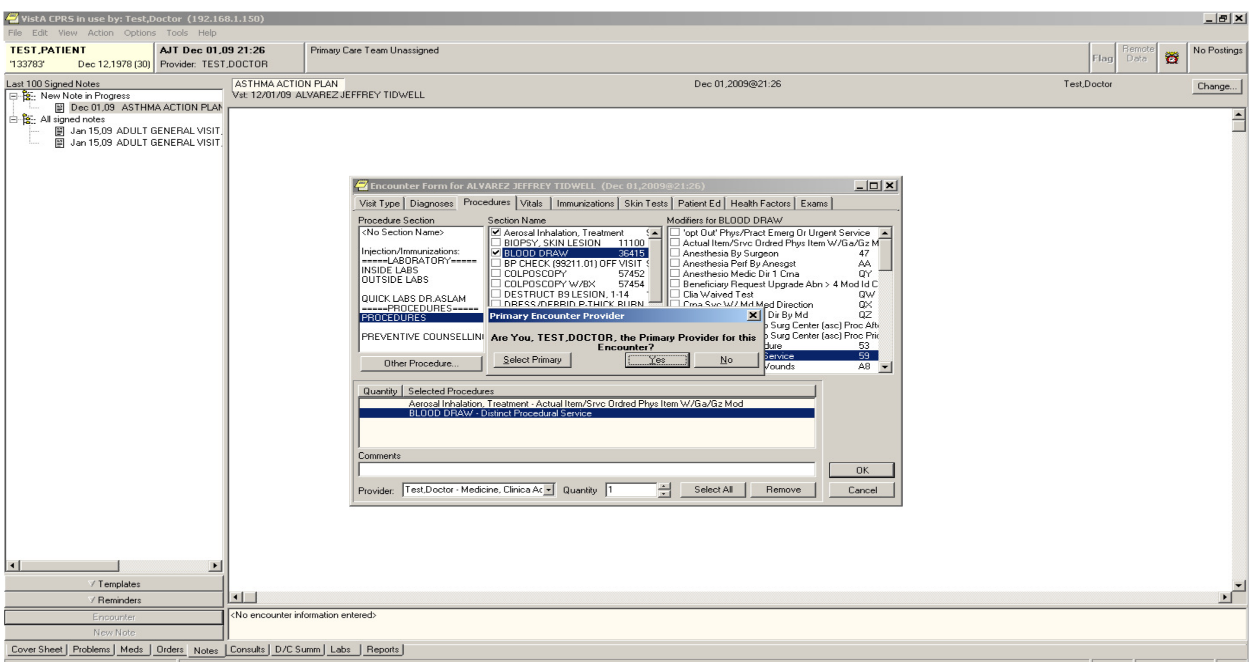
Click the 'Encounter" button to invoke the Encounter form. Enter the Diagnosis and procedure(s) for the Encounter using the respective tabs.



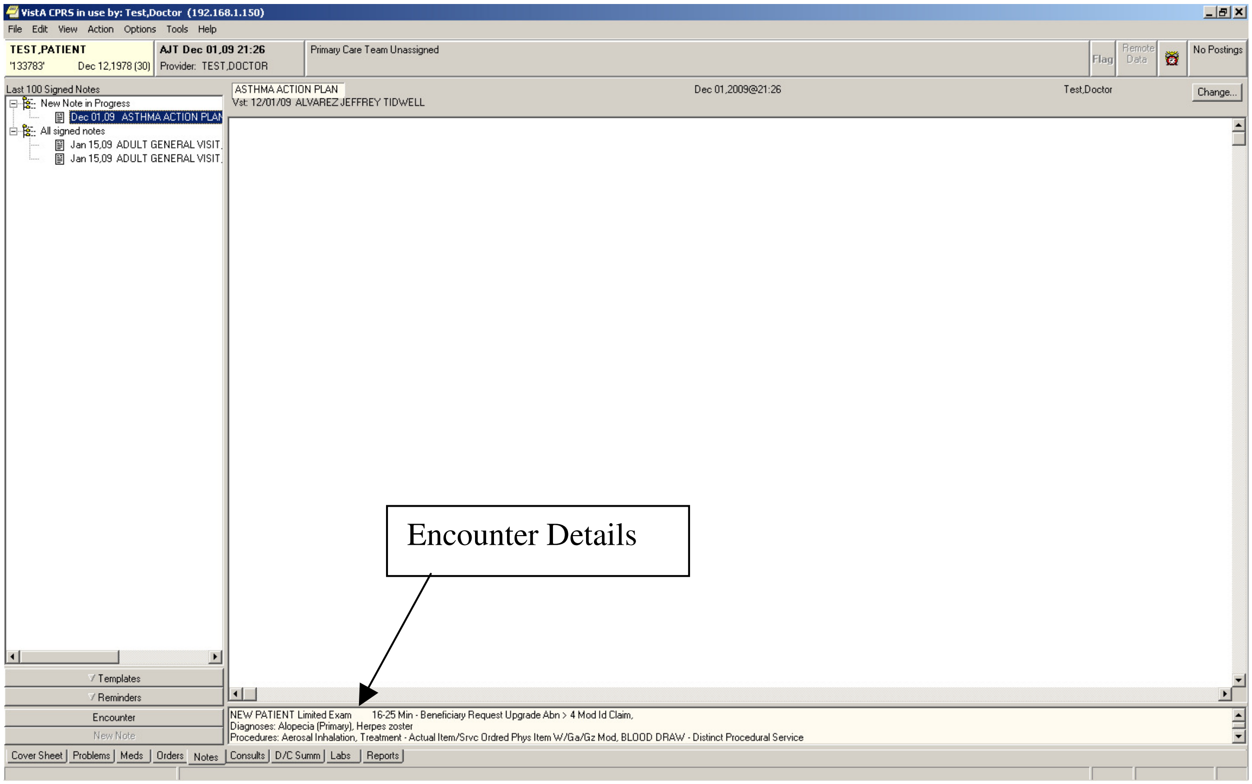
Ensure you assign a provider for the procedures documented in the Encounter.



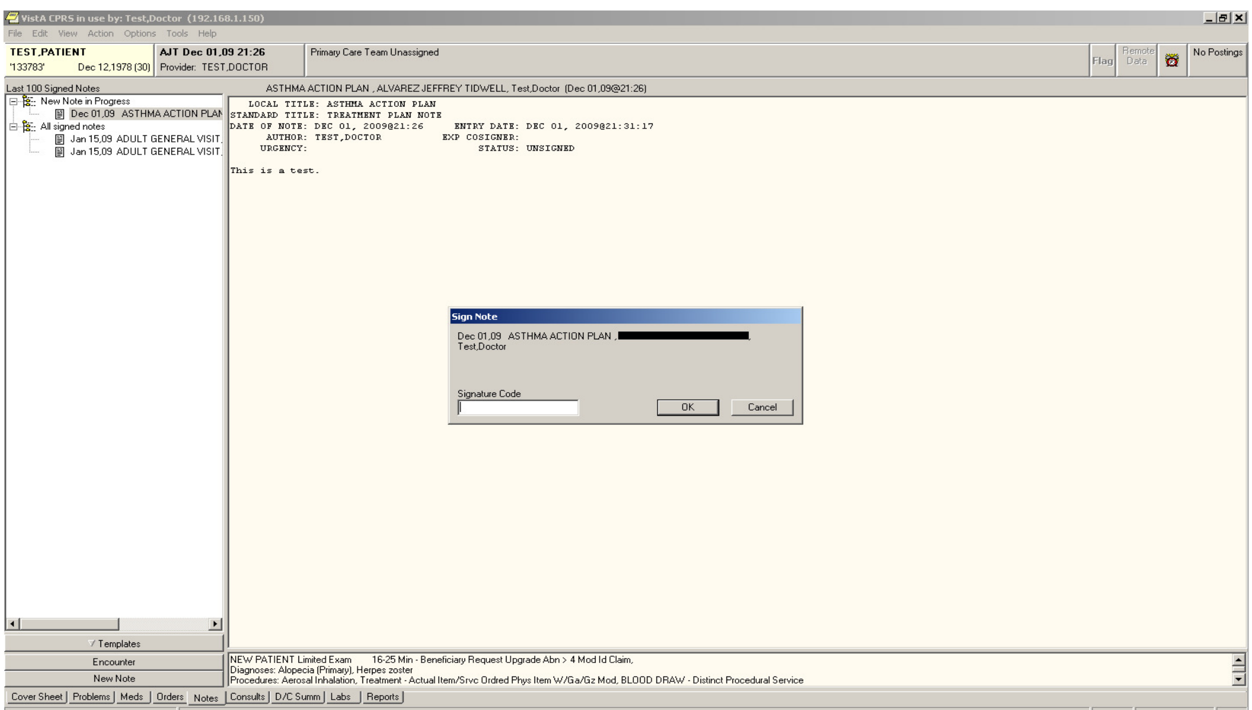
Click 'OK' when you have finished entering the Encounter details. This will show a popup to confirm the primary provider for the Encounter. If you are the primary provider click 'yes' or use the "Select Primary" button to select the Primary provider for the visit.

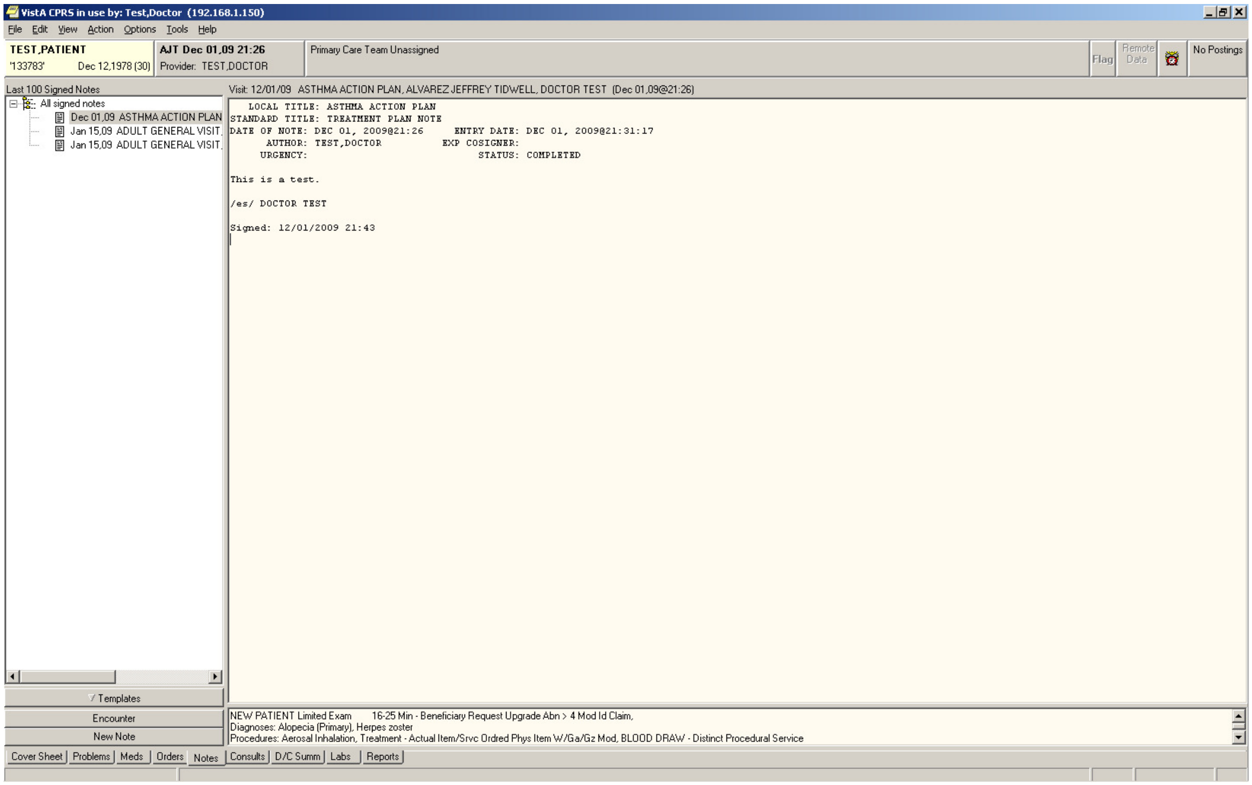


The details entered in the Encounter form will be visible in the bottom of the Notes block.



Add the relevant text to your note (can be done using templates) and Sign the note.





On signing the note the Diagnosis and Procedure information entered in the Encounter form are sent out of VistA to the **VistA-Edge**™ PMS, assuming that the interface is setup and functional