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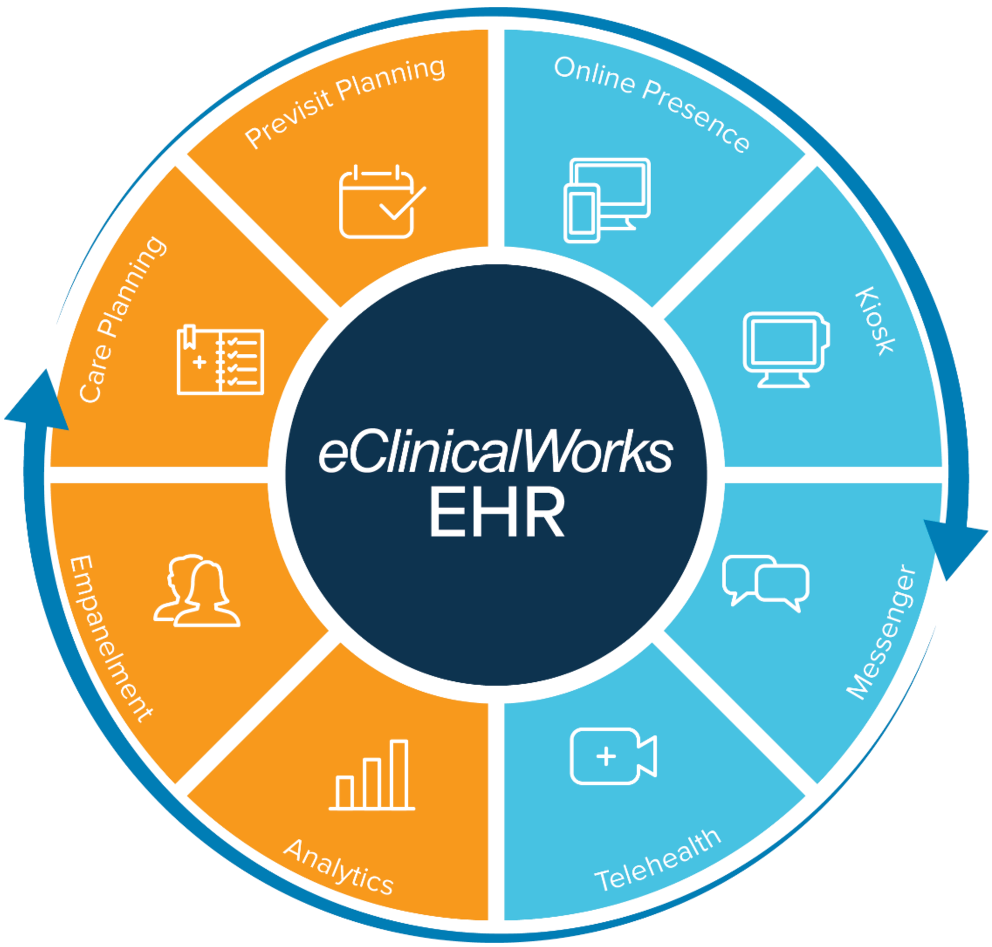
Business Analysis Department



eClinicalWorks End User Front Office - I

Client Name: Katy Trail Community Health Center

CONTENTS

Overview of the System

The following sections provide an overview of the eClinicalWorks v11e application.

Logging into eClinicalWorks

To log into the eClinicalWorks application:

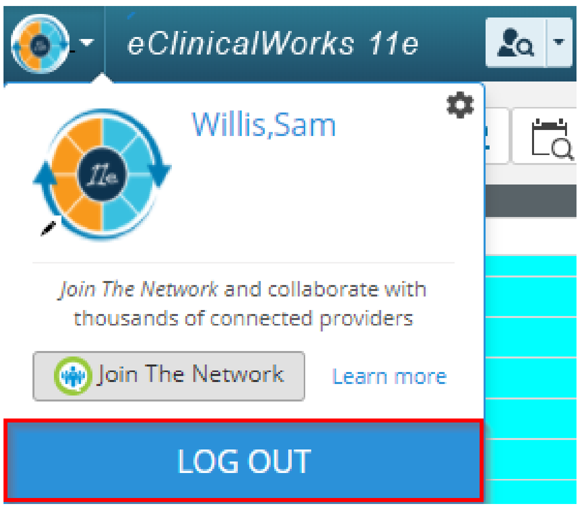
1. User logs into Windows and user will see two eCW icons.
2. Staff clicks on the eCW EHR icon.
3. Enter the user *Login ID* and *Password*:
4. Click *Sign in*.

Logging Out of eClinicalWorks

eClinicalWorks highly recommends that users should log out from the application using the *Log Out* button in the Profile window. Using this button ensures the security of the entered data and enables the application to shut down properly.

To log out of eClinicalWorks:

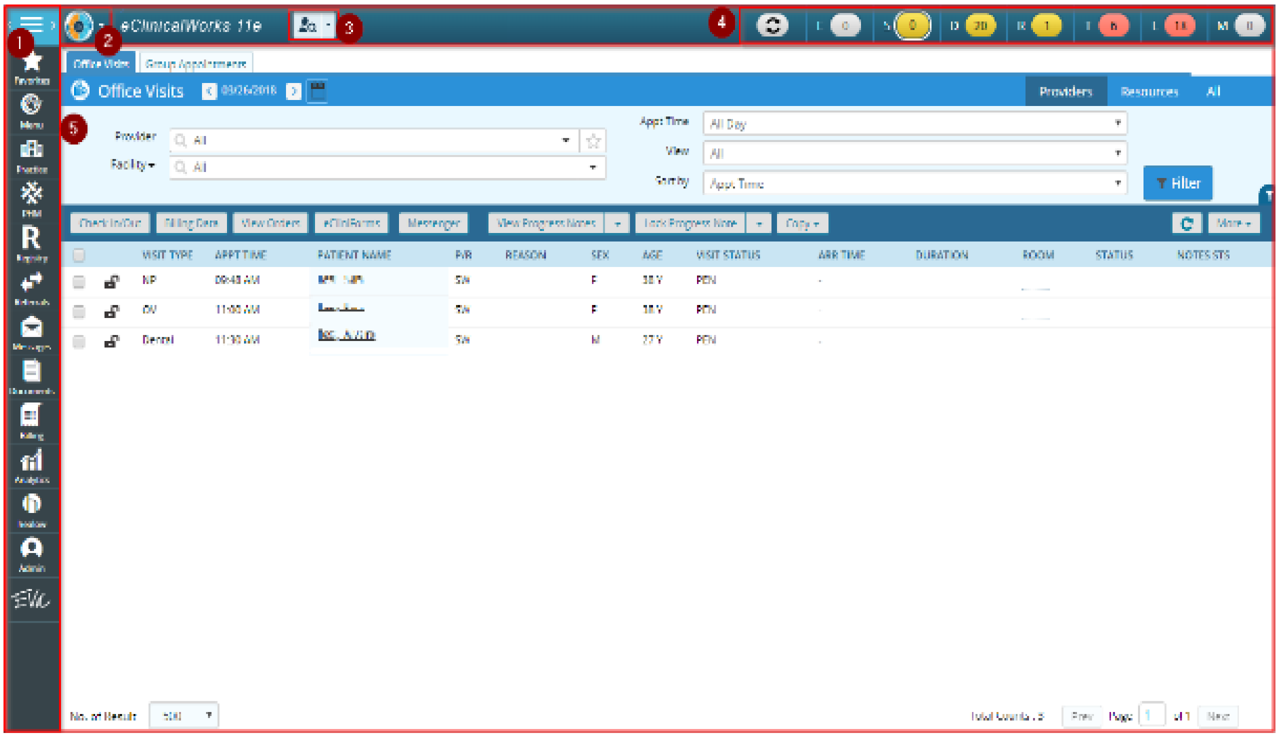
1. Click the Patient photo to display the Profile window.
2. Click *Log Out*:



eClinicalWorks Workspace

The Top Menu and Left Navigation Bar from previous eCW versions have been redesigned for V11e and replaced with one icon-based *Main Menu* navigation bar, which can be hidden from view when not needed.

the following table describes the eClinicalWorks V11e workspace:



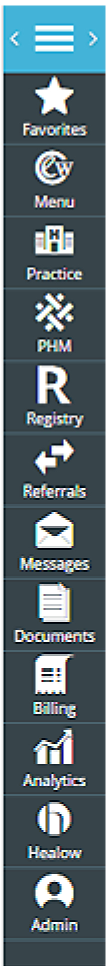
Area	Description
1. **Main Menu**	▪ Click the *Main Menu* icon to display the eCW Menu and navigation icons. ▪ Click the *eCW Menu*, or a navigation icon to display additional options. For more information about the eCW Menu, refer to **Error! Reference source not found.**
2. **User Profile window**	Click the user's photo to display the following: ▪ User Profile window ▪ Edit the profile photo ▪ View the user's profile ▪ Log out from the application
3. **Patient Lookup icon**	Click to look up for patients and access the Patient Hub.

Area	Description
4. **Dashboard Taskbar**	The taskbar provides a shortcut to information requiring attention and indicates the number and urgency of pending lab results, ePrescription requests, outstanding encounters, outgoing referrals, pending document reviews, and unread messages. For more information about the Dashboard Taskbar, refer to Quick-Launch Buttons or Keys.
5. **Workspace**	The workspace displays the window related task that the user performs. For example, for the office receptionist checking in patients, the workspace displays the Resource Scheduling window, which displays the day (or week) with appointments and blocked hours.

Main Menu

Click an icon in the Main Menu to display additional options. Click an *Option* to display the corresponding window.

The following table describes the functionality available in each icon:

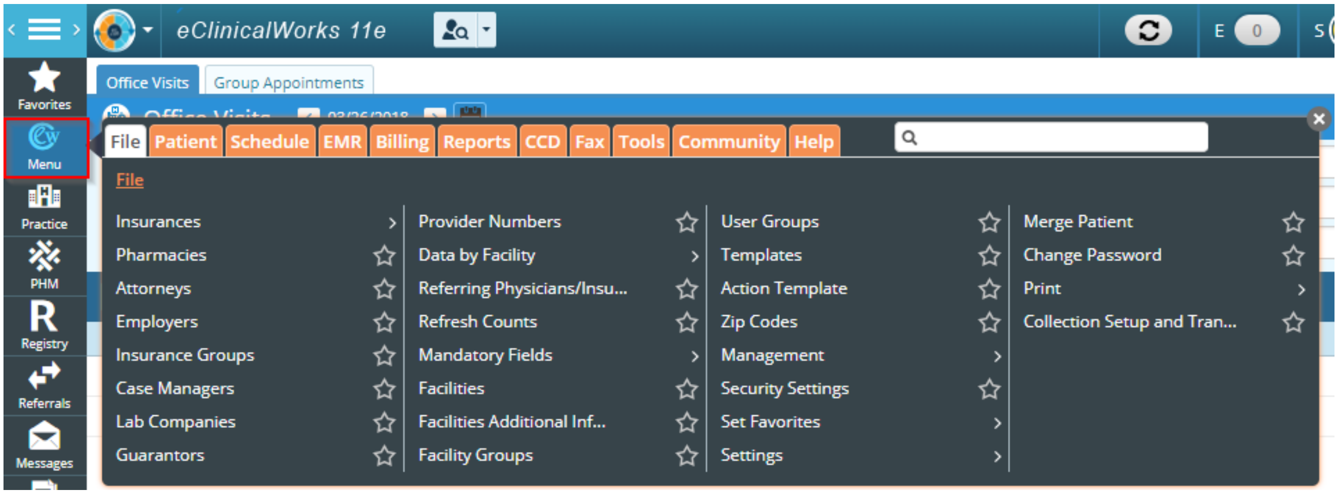


Icon	Description
Favorites	Displays menu options configured as favorites by the user for quick access and ease of use. To add a menu option to this Favorites icon, click the adjacent *Star* icon.
eCW Menu	Includes all the menu functionality from the Top Menu of previous eCW Versions. For more information about the eCW Menu, refer to **Error! Reference source not found.**.
Practice	Access various scheduling windows (Resource Schedule, Provider and Resource Schedule), and other short cuts (Progress Notes, Office Visits, Telephone Encounters, Out-of-Office Visits windows).
PHM	Access CCMR features within eClinicalWorks.
Registry	Access the recalling system of the application (Lookup Encounter, Patient Recall, *etc.*)
Referrals	Access the outgoing and incoming referrals that have been assigned to the user.
Messages	Access the internal messaging system and send and receive messages.
Documents	Access patient documents, faxes, and eCliniForms.
Billing	Access the billing modules, including the Encounters, Claims, Payments, ERAs, and Batches windows.

eCW Menu

This icon provides access to the File, Patient, Schedule, EMR, Billing, Reports, Fax, Tools, Community, and Help menus.

Use these menus to customize the application for a practice:



The following table describes the options available in the eCW Menu icon:

Tab	Description
File tab	Update the system dictionaries (insurances, pharmacies, facilities, *etc.*), and manage security settings, user settings, and other administrative settings.
Patient tab	Look up patients, create new patients, and perform basic patient-related operations.
Schedule tab	Set and block provider or resource schedules.
EMR tab	Customize the EMR system by configuring alerts, labs, diagnostic imaging, Order Sets, *etc.*
Billing tab	Customize the billing system by organizing codes, creating code groups, and enabling billing options.
Reports tab	Run eBO Reports® within eClinicalWorks (End-of-Day Reports).
CCD tab	Export and import CCD information.
Fax, Tools, and Community tabs	Configure additional administrative settings.
Meaningful Use tab	Access Meaningful User reports.
Help tab	Navigate to the Customer Portal and view current system information.

Quick-Launch Buttons or Keys

The Dashboard Taskbar consists of menus and buttons that provide quick access to the areas of the application practices use the most. Use the Dashboard Taskbar to access office visits, pending lab results, outstanding encounters, outgoing referrals, pending document reviews, and messages.

The following table describes the functionality available in the Dashboard Taskbar:

Click	Button	Link
E	Click to open the e-Prescription window. The number in the button indicates the number of refill requests waiting for approval. This number only displays for the Providers and not for any other staff member; other staff members will never see this number change from 0.	Click to access electronic prescription options.
N	Click to open the Transcriptions window. The number in the button indicates the number of transcriptions waiting for review.	Open the Transcriptions window to one of the following tabs: ▪ Dictation in Progress ▪ Open ▪ To be Reviewed ▪ All
S	Click to open the Office Visits window. The number in the button indicates the number of patients marked as *Arrived*. This number displays only for providers and not for any other staff member; other staff members will never see this number change from 0.	Click to display the following options: ▪ Review Progress Notes ▪ Office Visits ▪ Resource Schedule
D	Click to open the Review Document window. The number in the button indicates the number of documents assigned to the logged in user by other staff members.	Click to display the following options: ▪ Fax Inbox ▪ Fax Outbox

Click	Button	Link
R	Click to open the Outgoing Referrals window. The number in the button indicates the number of combined incoming and outgoing referrals. Click the button that has the number to open the Outgoing Referrals window or click on the R itself which will give you a drop down and from there you can select Incoming or Outgoing Referrals. The total number of referrals assigned to the logged-in user displays in parentheses next to each link.	Click to display the following options: ▪ Incoming ▪ Outgoing
T	Click to open the Telephone or Web Encounters window. The number in the button indicates the number of encounters assigned to the logged in user.	Click to display the following options (the number next to each option indicates the number of encounters of that type assigned to the logged in user): ▪ Telephone Encounter ▪ Web Encounter ▪ Accounts ▪ Claims ▪ Action ▪ New Telephone Encounter ▪ New Action
L	Click to open the Labs or DI or Procedures window. The number in the button indicates the number of labs, diagnostic imaging, and procedures assigned to the logged in user.	Click to display the following options (the number next to each option indicates the number of items in that category assigned to the logged in user): ▪ Labs ▪ Imaging ▪ Procedures ▪ Pending Approval ▪ Reconcile
M	Click to open the Messages window. The number in the button indicates the number of new messages in the inbox of the logged in user. **Note:** Messages are not supposed to be patient related, and that unlike the other Quick-Launch buttons, they are private between the sender and recipient.	Click to display the following options: ▪ Inbox ▪ Outbox ▪ Deleted Messages ▪ Patient Communication

Click	Button	Link
	Refresh Count	Click to Refresh Quick-Launch Button Counts.

Show or Hide Buttons

On the Progress Notes, the Show or Hide buttons enable the user to customize the workspace:

- **Left Show/Hide Button** – Displays, hides, or conditionally hides the Patient Dashboard.
- **Right Show/Hide Button** – Displays, hides, or conditionally hides the Interactive Clinical Wizard (ICW – formerly Right Chart Panel).

Click the *Show* or *Hide* buttons to set the visibility for the Patient Dashboard or ICW:

Color	Description
	Displays the feature always.
	Hides the feature when the user is working in the Progress Notes sections. Click the *Expand* icon to display this feature temporarily.
	Hides the feature always.

Patient Lookup and Demographics Windows (Overview)

The Patient Lookup window and Lookup Options

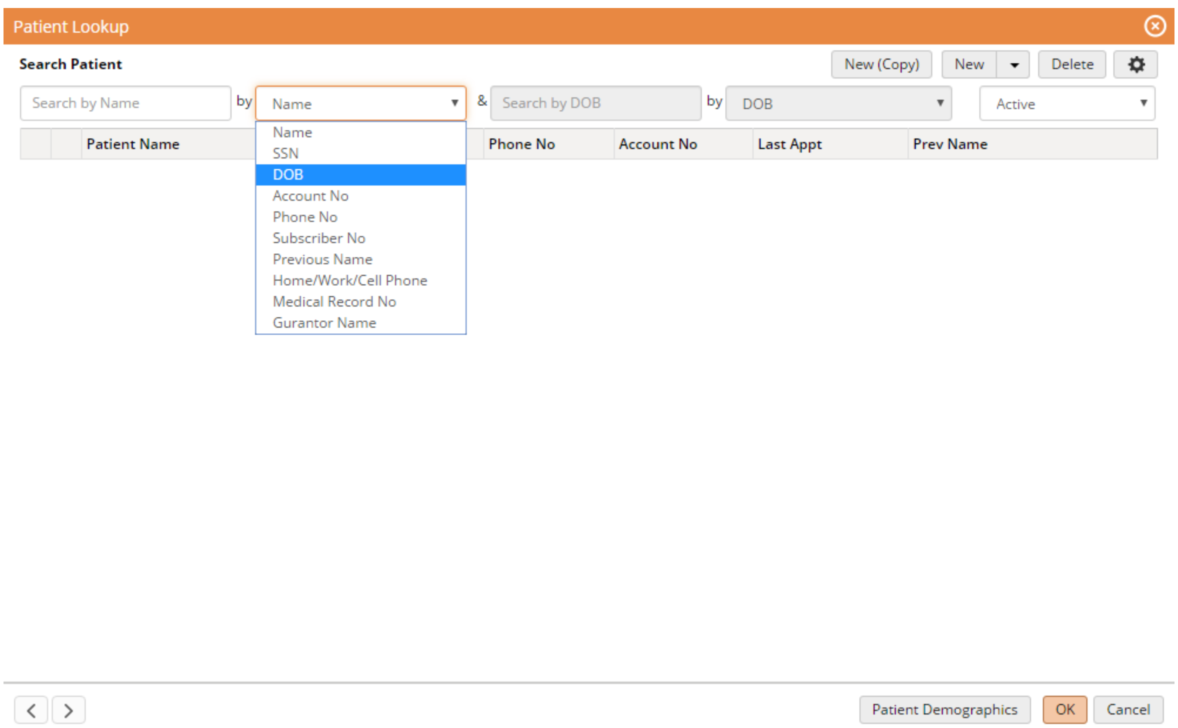
Patient Look-Up Screen allows users to:

- Search for Existing Patients
- Register New Patients
- Access Patients' Demographics and Patients' Hub

Looking Up a Patient

To look up a patient:

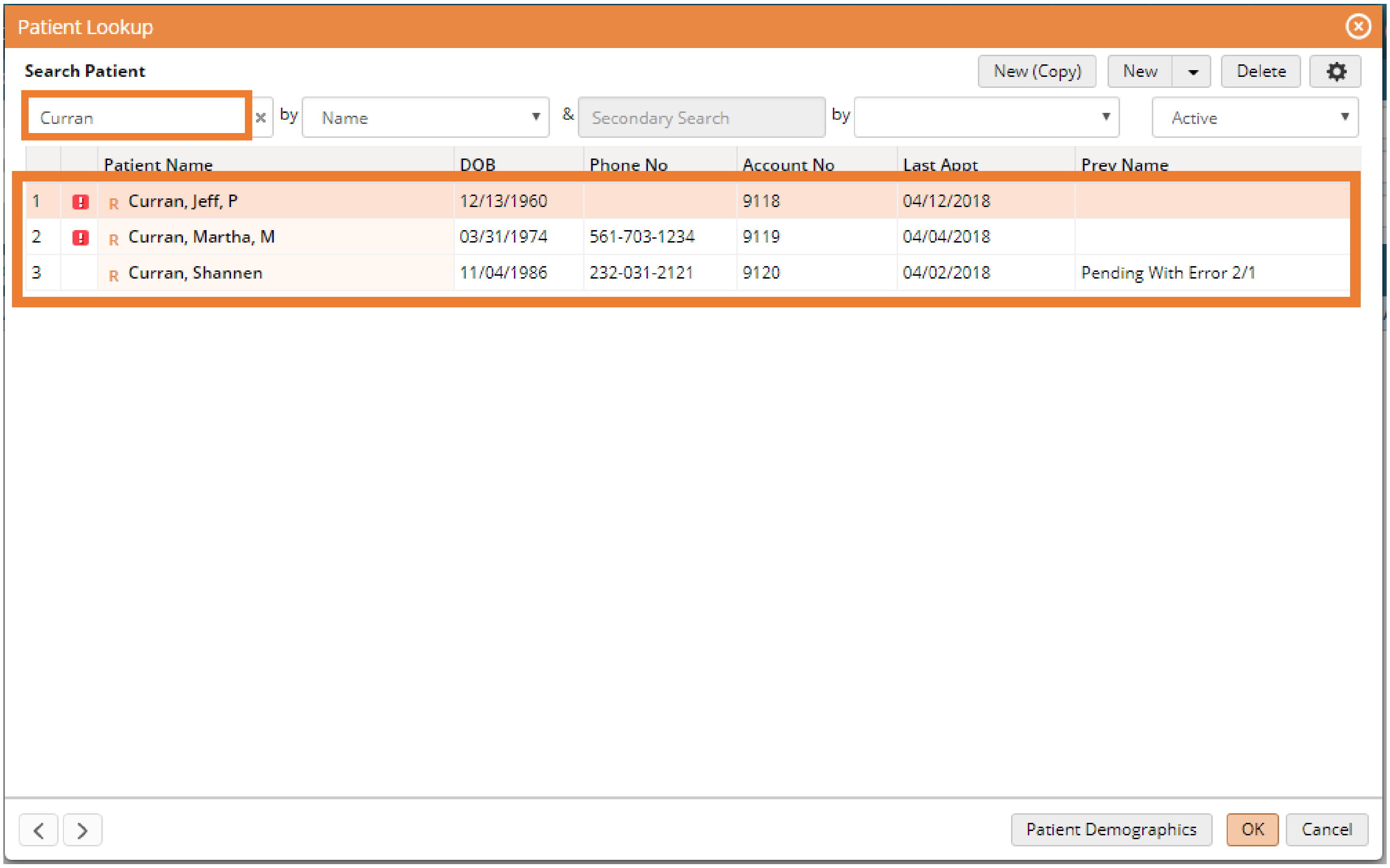
1. Click the Patient Lookup Icon 



2. Select your search criteria from the drop-down options:

- Name
- Date of Birth (DOB)
- Phone Number
- Previous Name
- Medical Records Number
- Account Number
- Insurance Subscriber Number
- Home/Work/Cellphone
- Guarantor Name

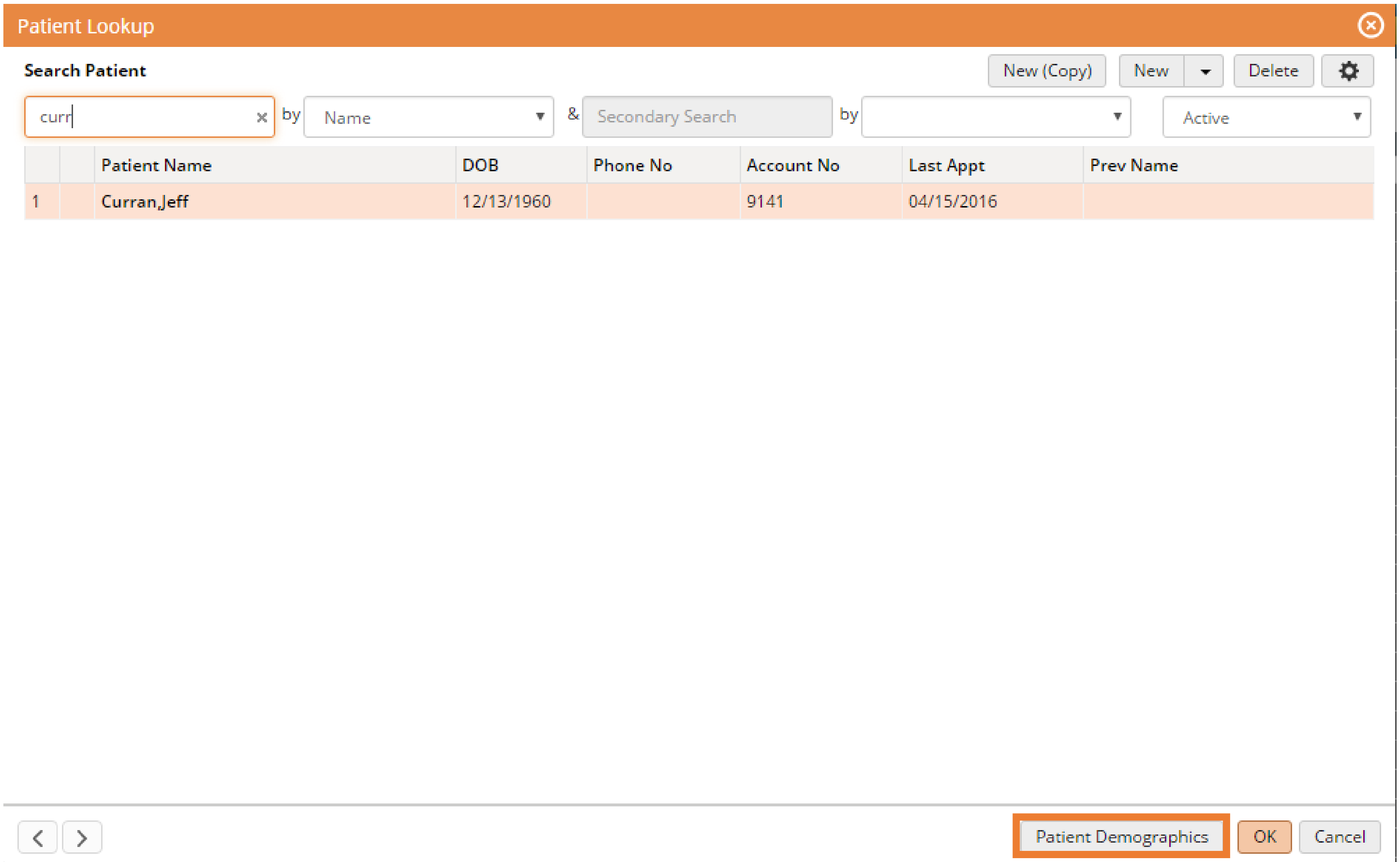
3. Type patient information in the search field, this will display a patient list. It will also search in the eEHX directory also. Click on View to show results.



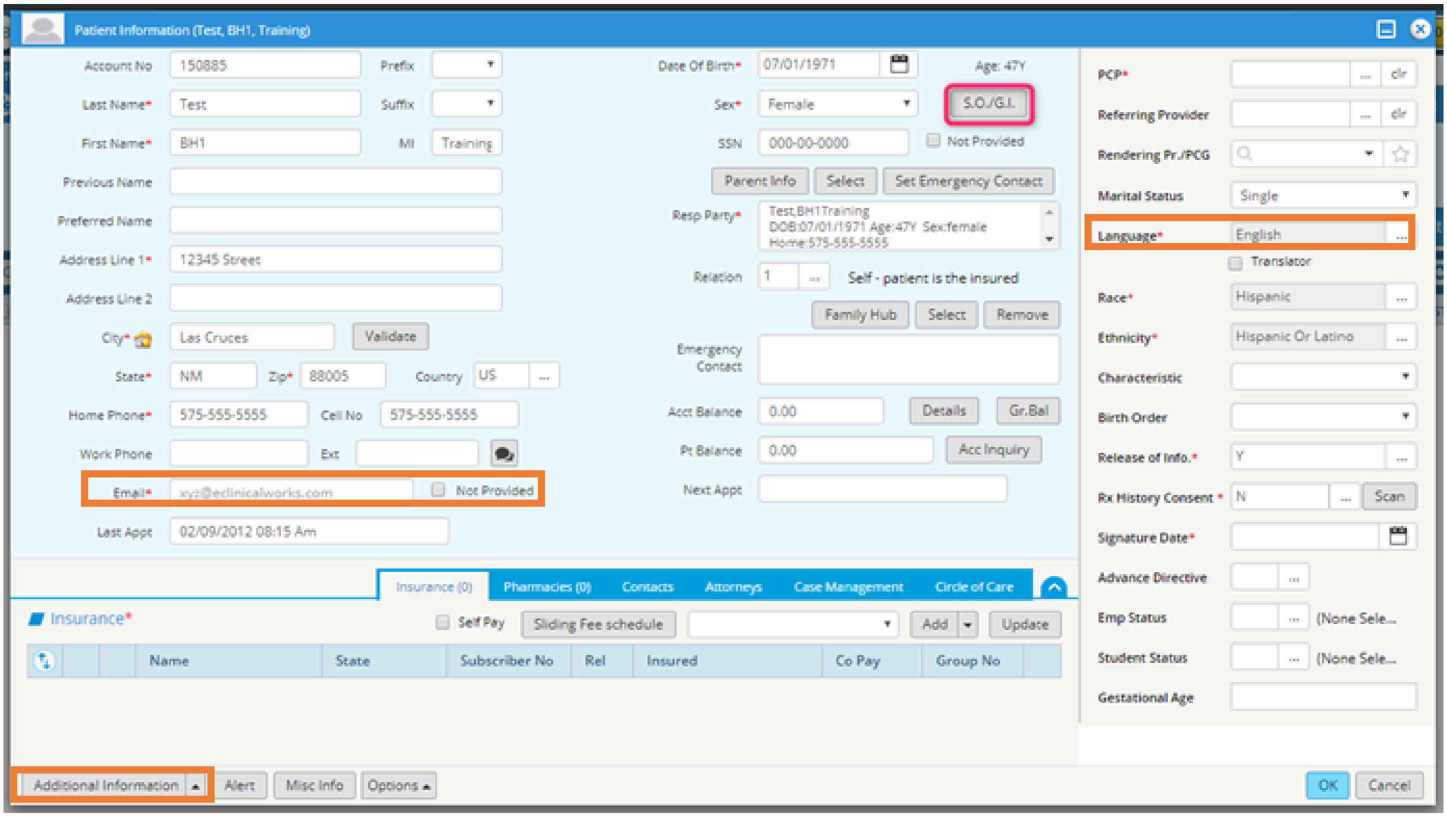
Accessing Patient Demographics

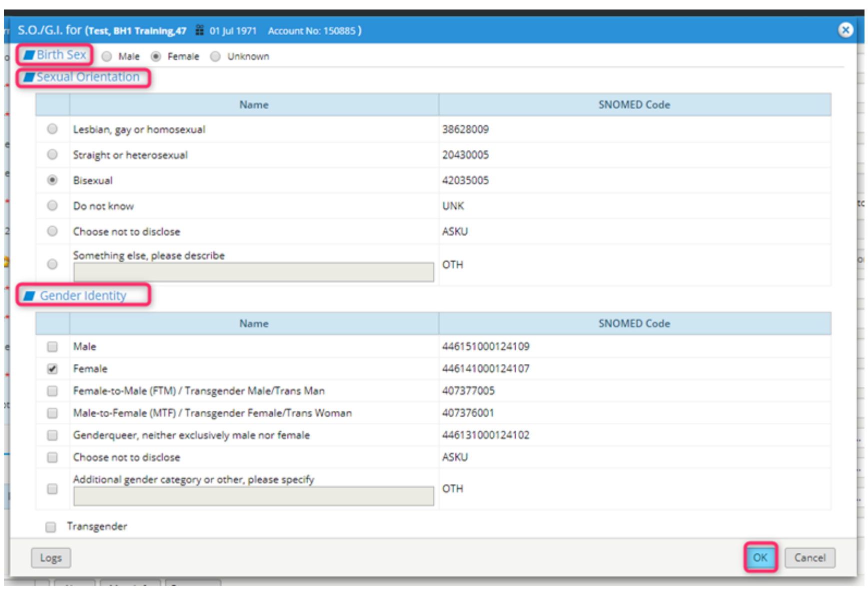
To access Patient Demographics:

Once the patient list appears, highlight the patient name and click on the “Patient Demographics” button.



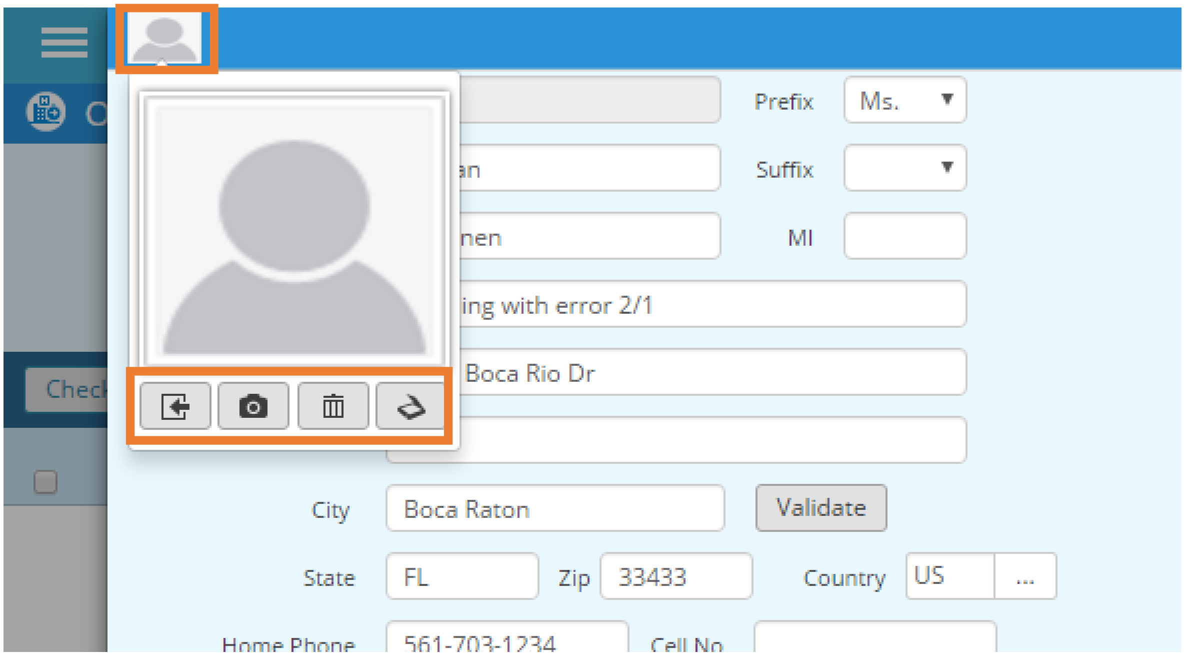
Patient Information Screen





NOTE:

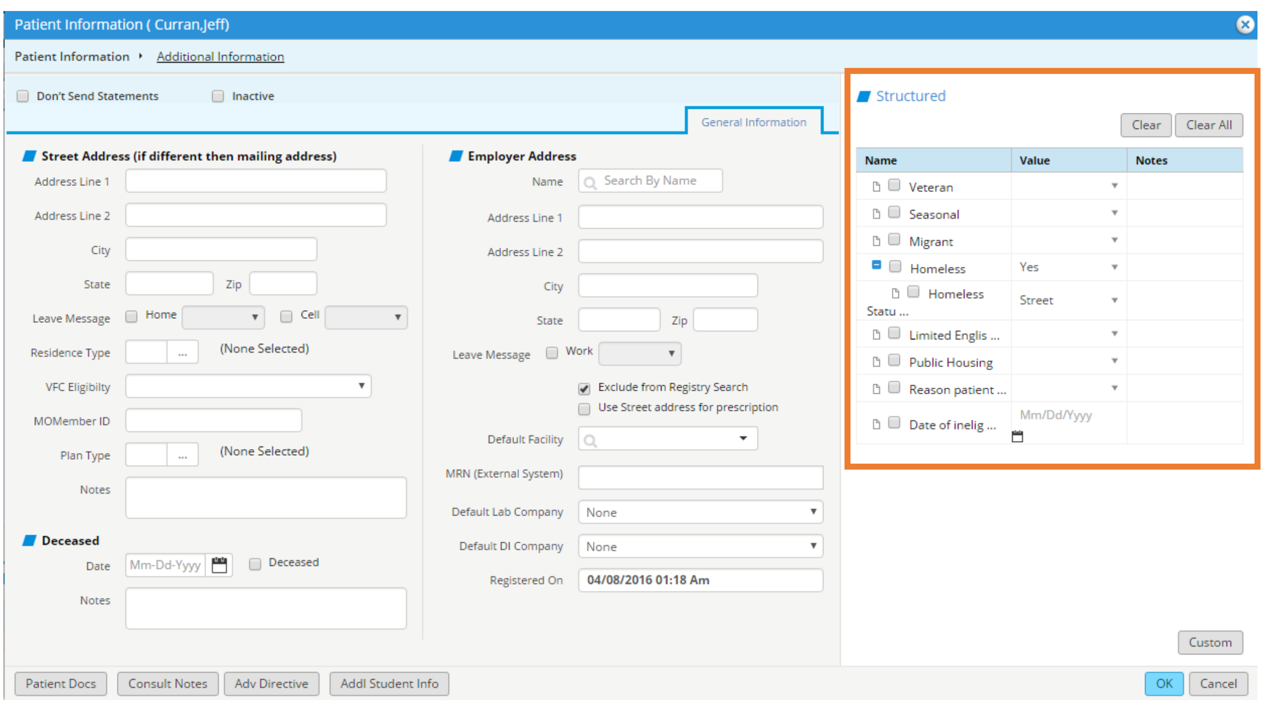
- ***Select the appropriate language.***
- ***If the patient needs a translator, please check the box off next to 'Translator'***
- ***If the patient doesn't have an email id, it could be marked as 'Not Provided'. Patients under the age of 13 do not get to sign up for their own portal.***



- *To Capture a patient's picture, click on the 'capture' button and use the webcam to take the patient's picture (Not every patient at Ezras will want to share their picture but this only applies to those who does)*

Patient Additional Information Screen

To access *Additional Demographics Information*, click the "Additional Information" button.

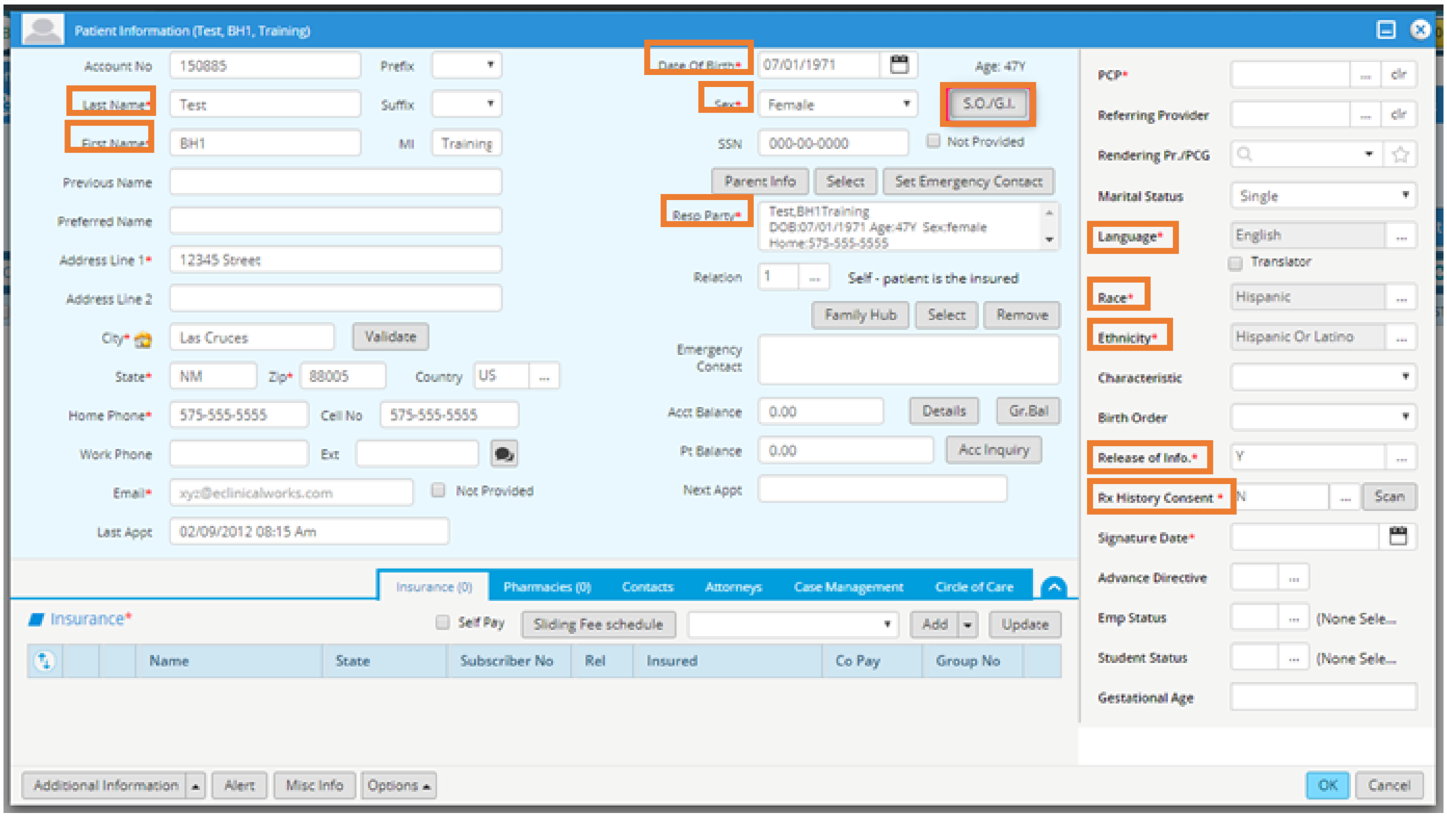


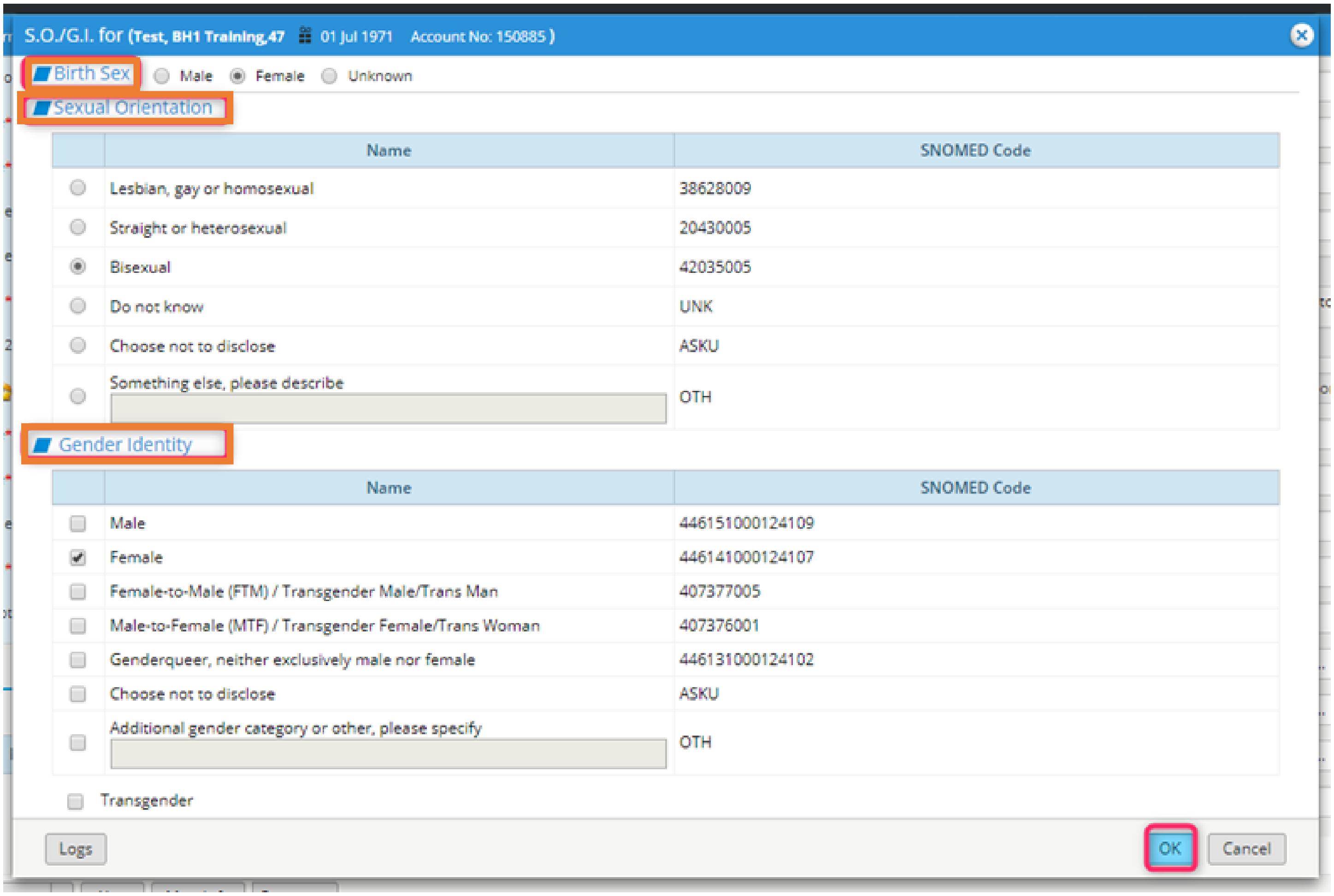
Understanding Demographics Mandatory Fields

In the Patient Demographics Screen, mandatory information is marked with an asterisk: *

__NOTE__: There are mandatory fields in the "Additional Information" and "Structured data" that needs to be addressed. All of these fields must be filled in to complete the registration process

Users will not be able to register a patient without completing these fields.



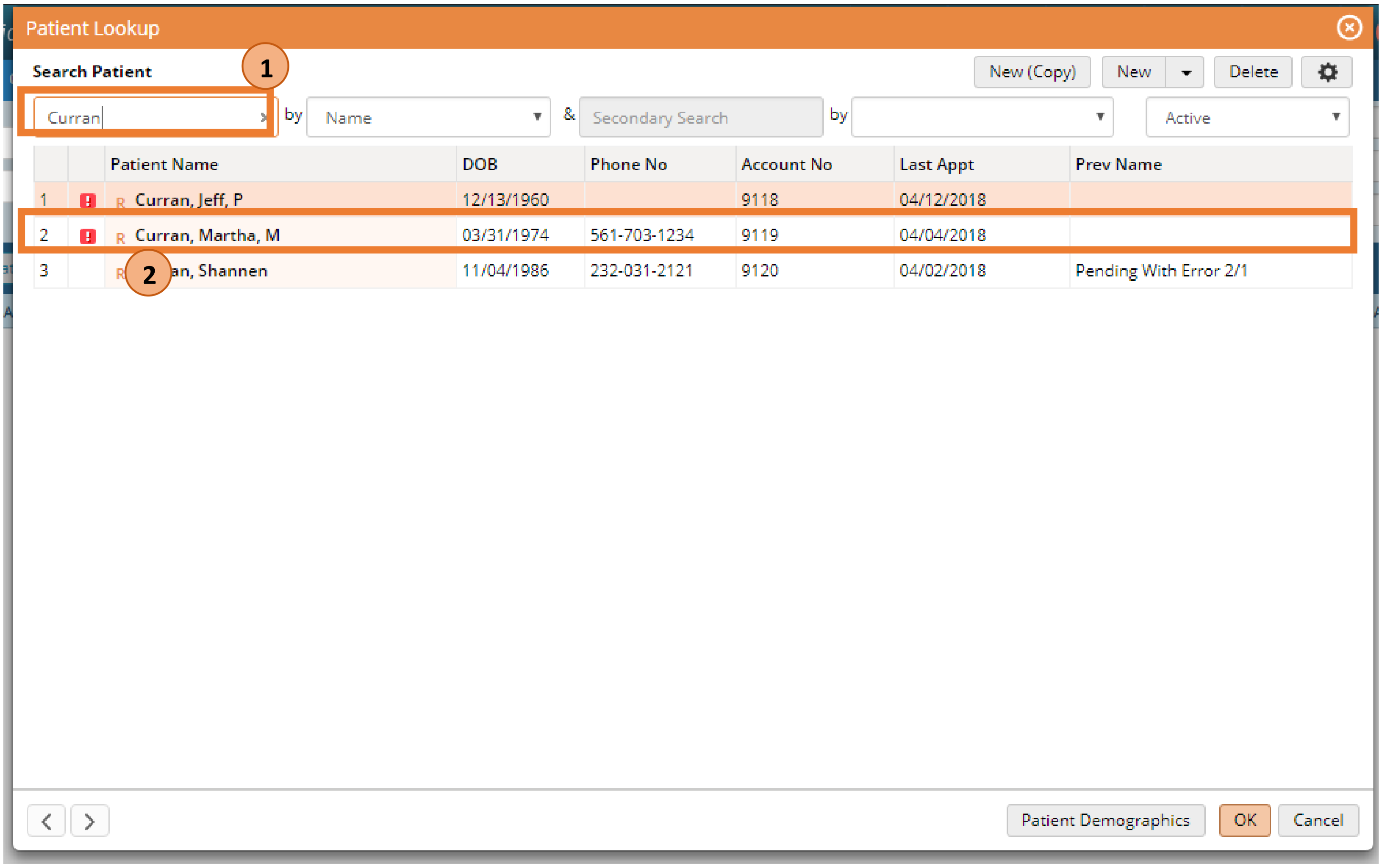


Note: For UDS requirements, patient age, gender, Race/Ethnicity and language must be captured.

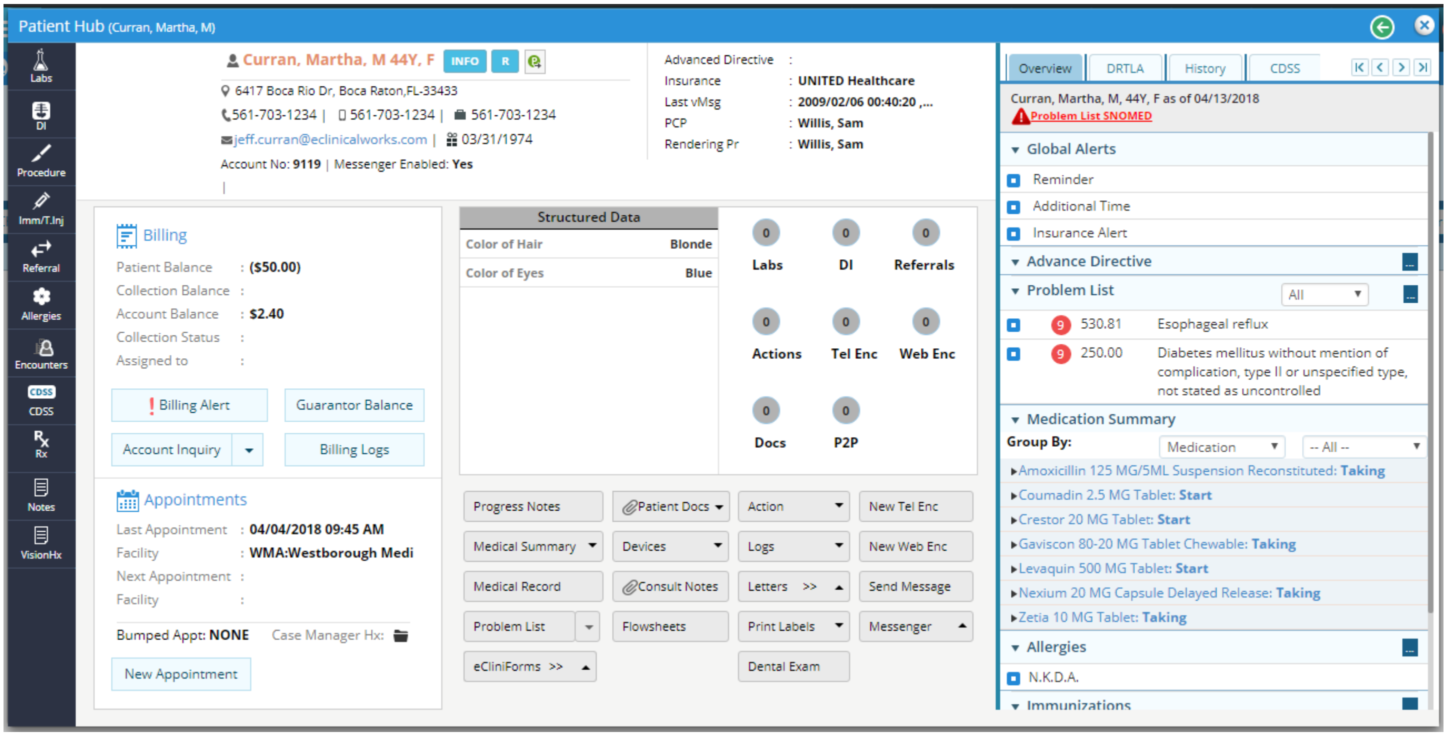
Accessing Patient Hub

To access the Patient Hub:

1. Lookup the desired patient from the patient lookup screen.
2. Click on the patient's name.



3. Patient Hub displays:



Patient Hub

Note:

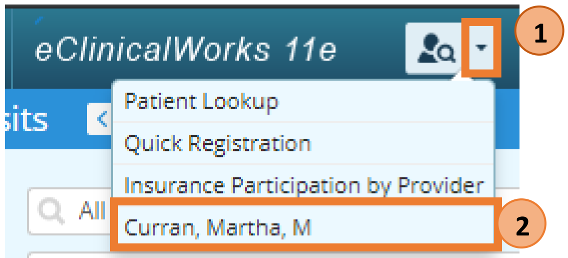
- **The Patient Hub displays basic demographics, clinical and financial information.**
- **The Hub also allows the user to perform tasks associated with the patient:**

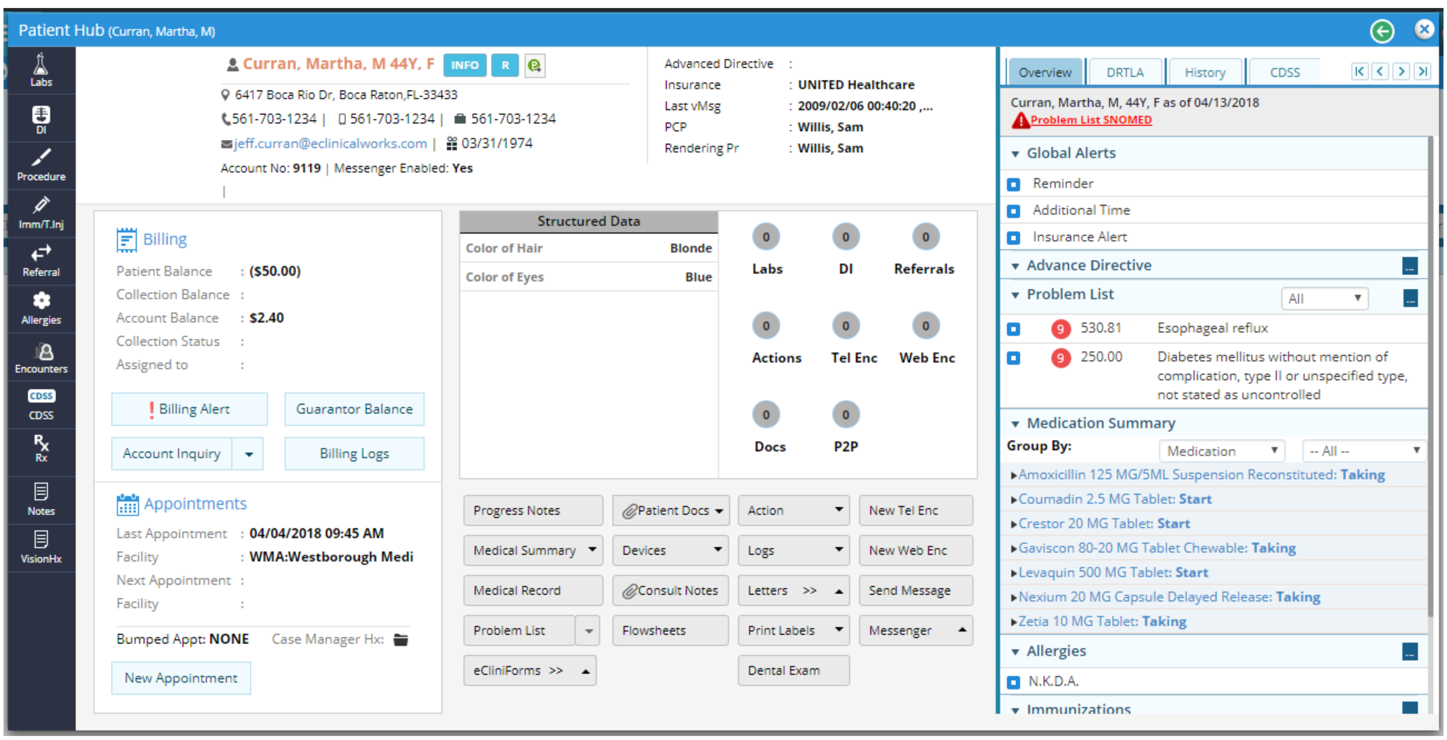
  (Ex: create a Telephone Encounter, Letter, New Appointment, etc.)

Quick Access to the Patient Hub

The system will store up to 5 *previously viewed* patients. Take the following steps to quickly access their Patient Hub:

1. Click on the arrow next to the Patient Lookup icon.
4. Click on the patient name.

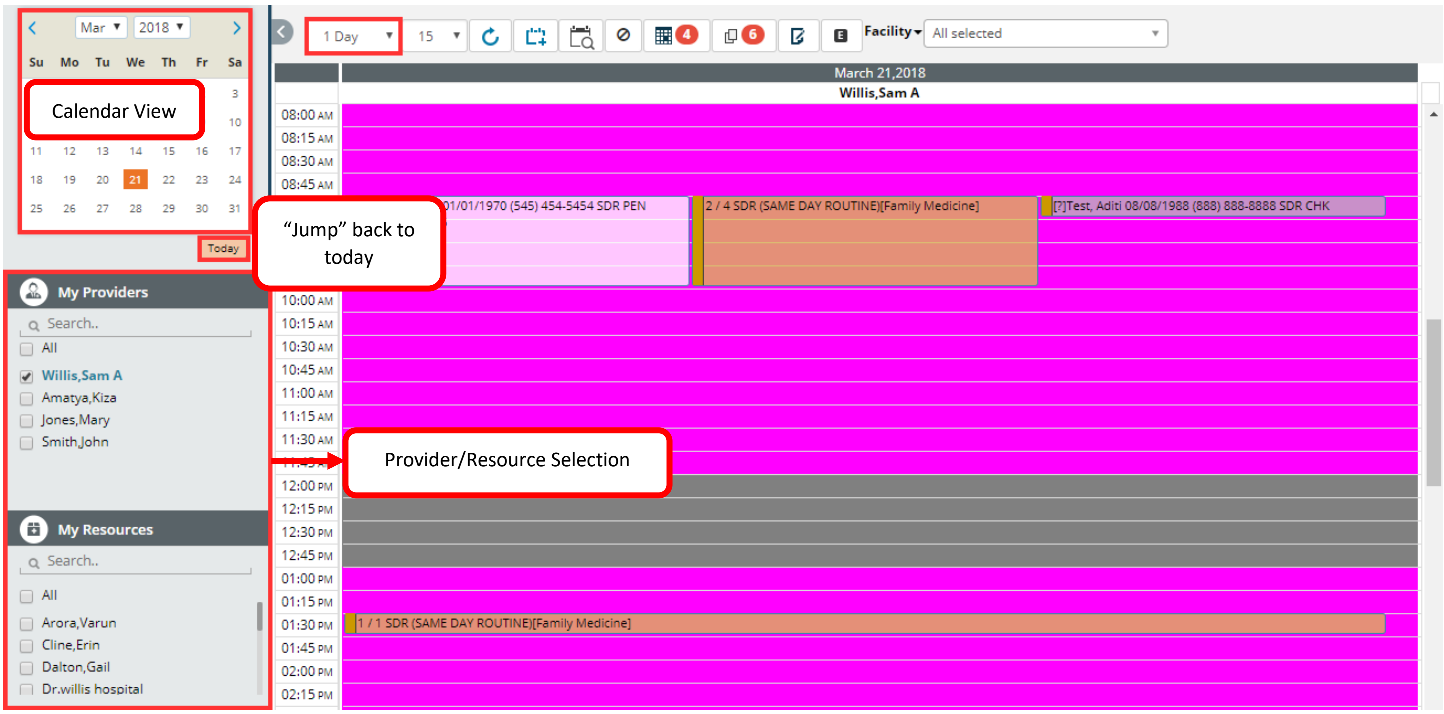




The Resource Schedule

Overview

The Resource Schedule screen is the “Home Screen” for the front office staff. This screen allows users to schedule appointments, check patients in and out, confirm appointments, and cancel appointments. The Resource Schedule can be accessed by clicking on the resource scheduling icon from the Practice Band or by hovering over the ‘S’ and choosing ‘Resource Schedule.’



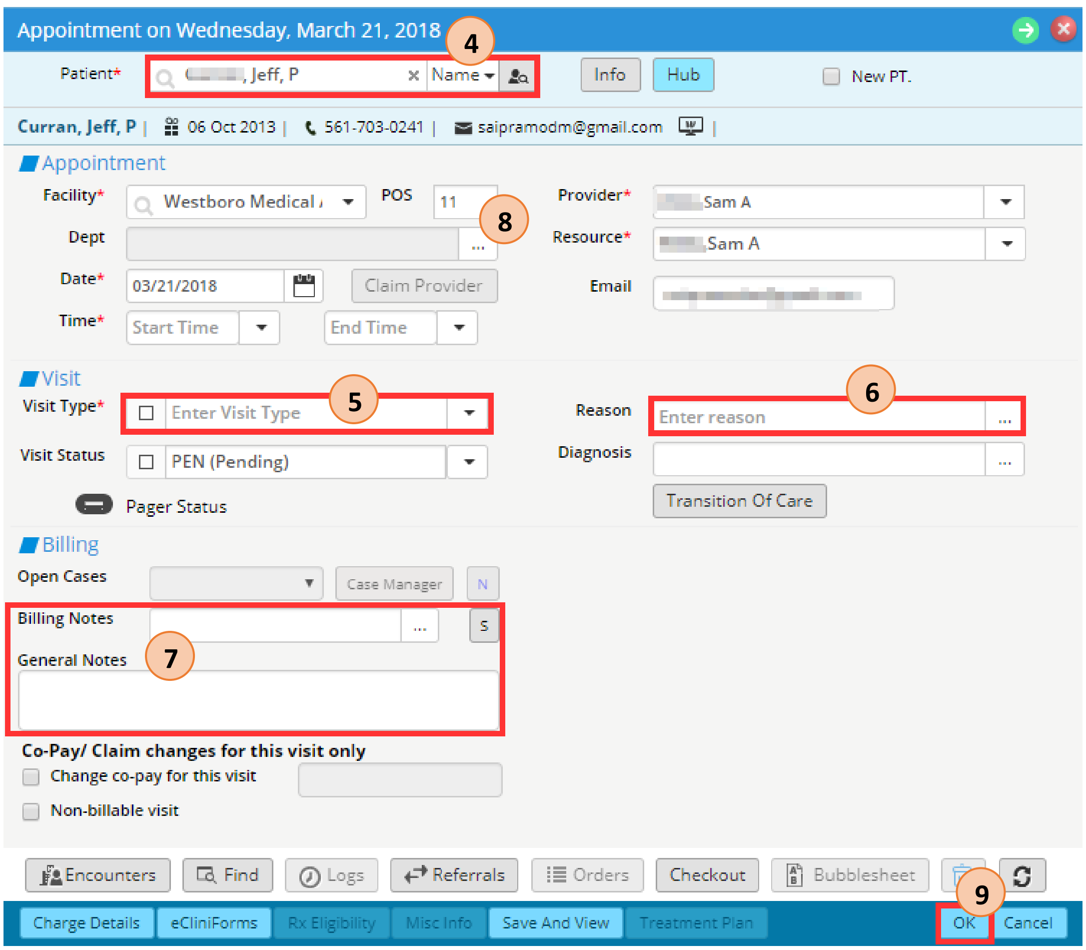
Note:

- **A user can choose to view the schedule for multiple providers/resources from the Resource Schedule screen**
- **You can “jump” to a specific date by right-clicking on the Resource Schedule and selecting “Go To Date” (see below)**

Scheduling an Appointment

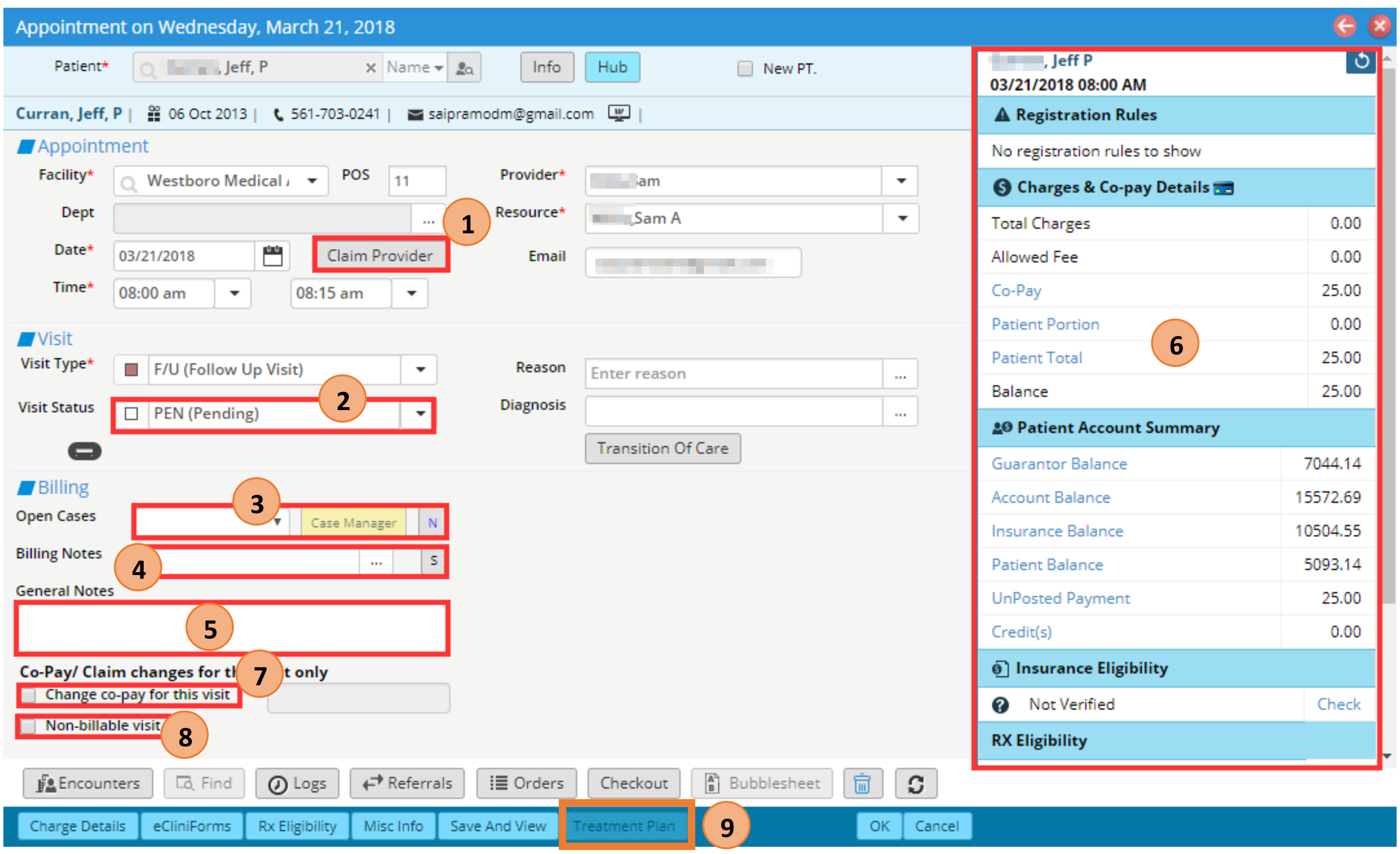
To schedule an appointment:

1. Select the date from the calendar.
2. Select the Provider(s)/Resource(s) on whose schedule the appointment needs to be booked.
3. Double click on the desired time slot.
4. Select the Patient.
5. Select the Visit Type.
6. Document the Reason of the Visit.
7. (Optional) Document any General and/or Billing Notes.
8. Facility, Provider, Resource, and Time will be calculated automatically.
9. Click 'OK.'



Additional Buttons and Sections on the Appointment Window

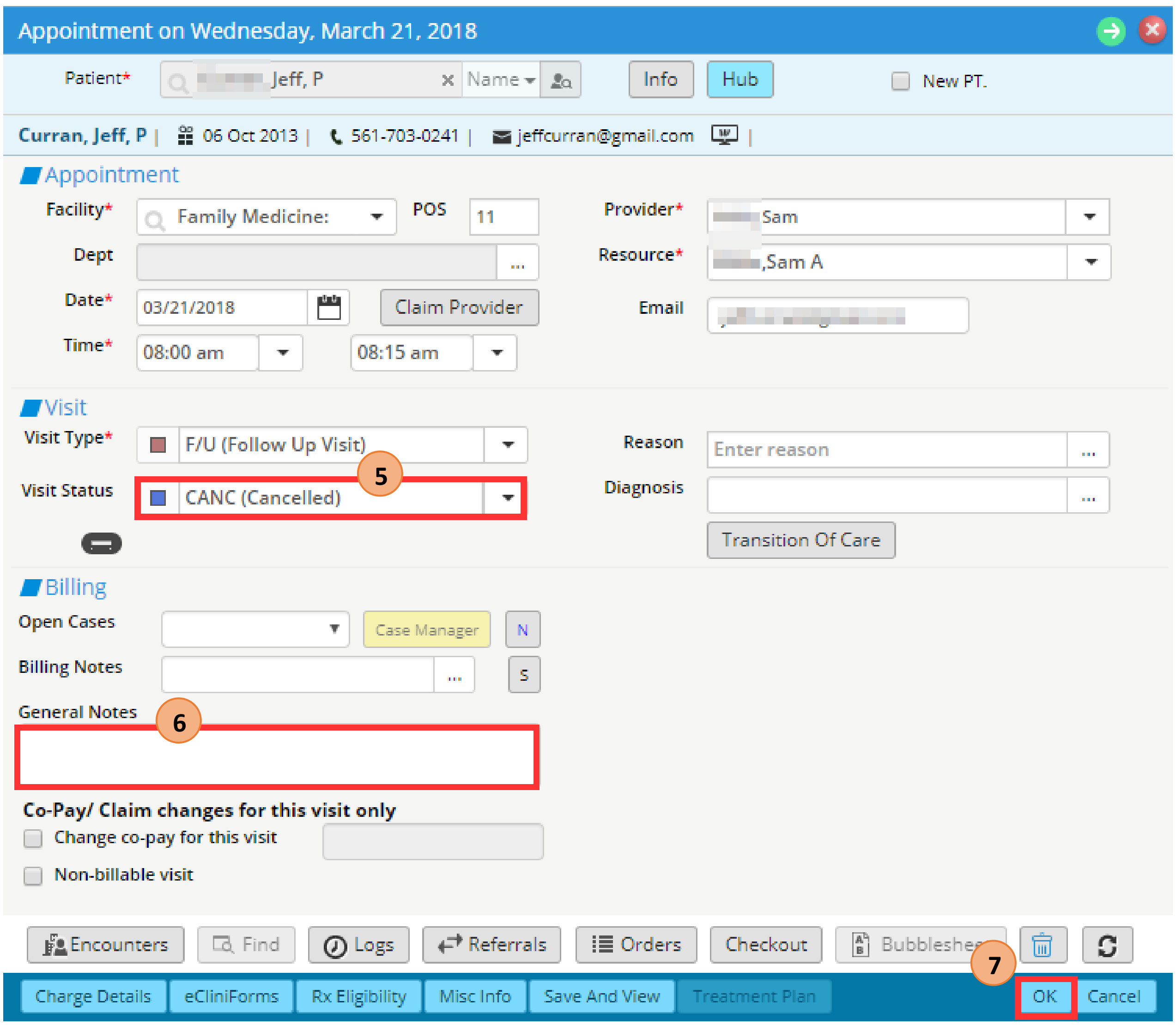
1. Claim Provider allows you to configure billing related information. (Rendering, pay to, and supervising provider)
2. Visit Status allows you to change the status of the appointment. (Pending, Confirmed, Arrived, Canceled, etc.)
3. Case Manager allows you to add workers comp information to the appointment.
4. Add any billing related information to Billing Notes.
5. Document general information about the appointment or patient with General Notes. (Patient is running late, owes money from last visit, needs forms updated, etc.)
6. Appointment Right Chart Panel allows you to view and collect payments from the patient.
7. Change co-pay for this visit allows you to manually change the copay for today's encounter.
8. Manually mark appointments as non-billable by checking off 'Non-billable visit.'
9. For dental visit Treatment plan will be accessable to select the procedures to be done for the visit. (Treament plan needs to be created from the initial visit for this button to be available)



Rescheduling, Cancelling, and Marking Appointments as a No-Show

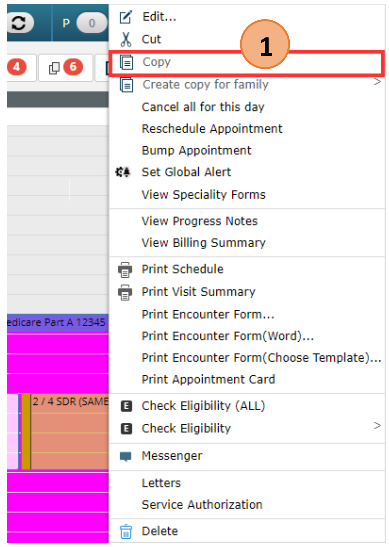
To Cancel an Appointment:

1. Navigate to the Resource Schedule.
2. Select the desired Provider/Resource.
3. Select the date of the appointment from the calendar.
4. Locate and double-click the appointment.
5. Change the Visit Status to ‘CANC (Cancelled).’
6. Document the Reason for the cancellation under the General Notes section.
7. Click ‘OK.’

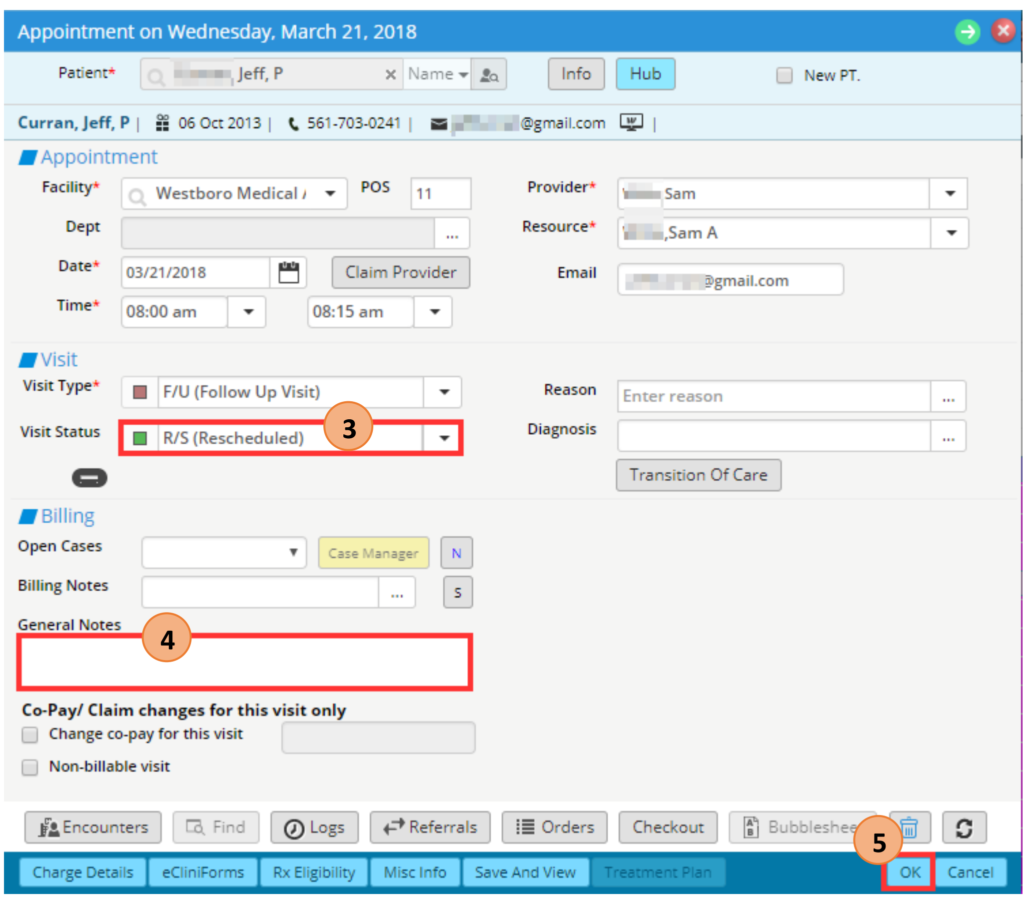


To Reschedule an Appointment:

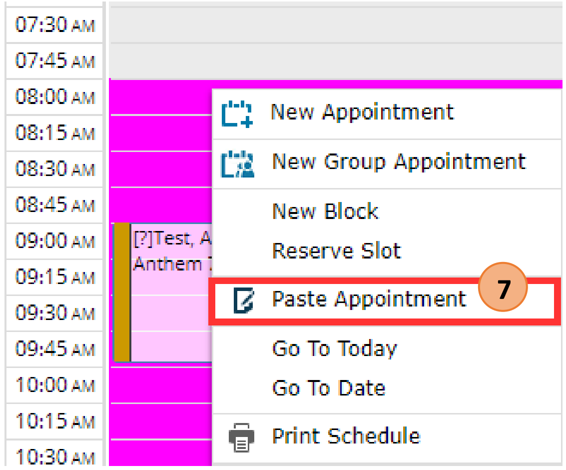
1. Right-click on the original appointment and select ‘Copy.’



2. Double-click on the original appointment.
3. Change the Visit Status to ‘R/S (Rescheduled).’
4. Document the reason for rescheduling under General Notes.
5. Click ‘OK.’



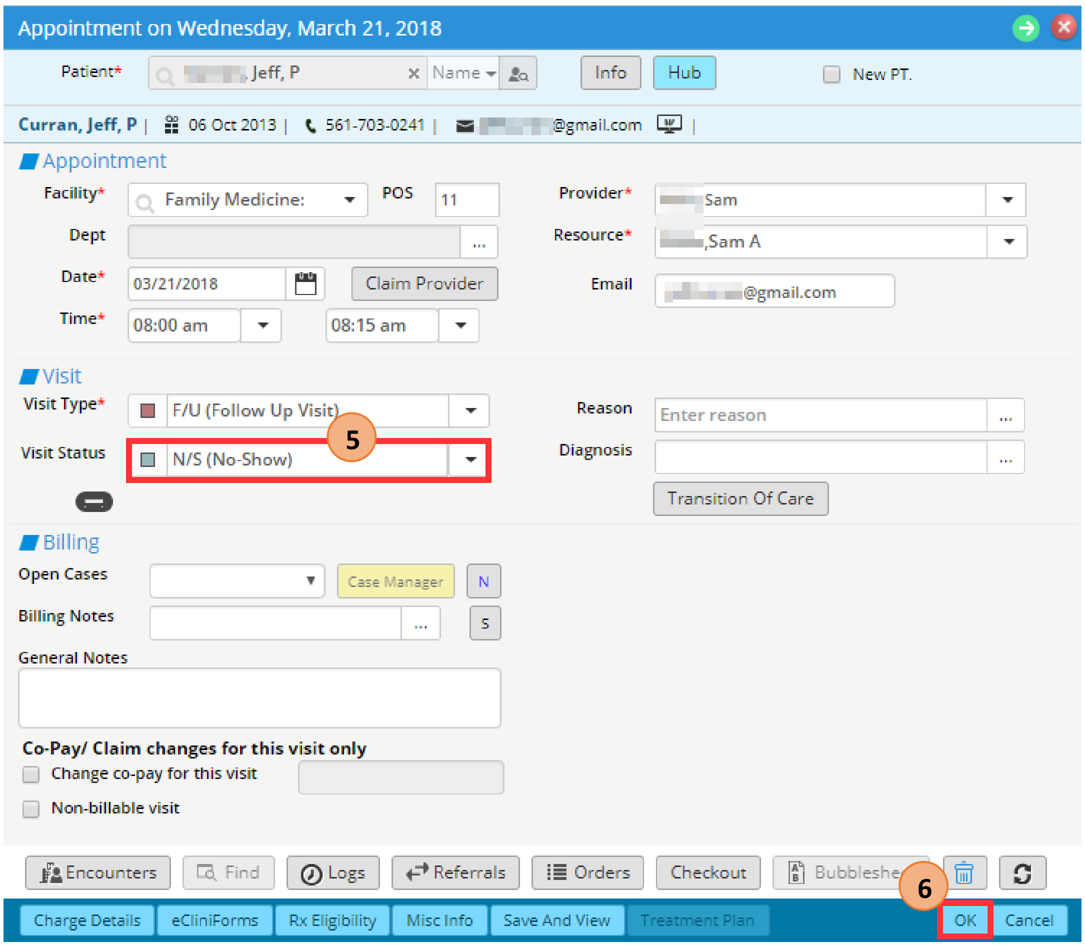
6. Select the new date and time on the Resource Schedule.
7. Right click on the slot and select 'Paste Appointment.'



8. Open the newly created appointment and make any necessary adjustments.
9. Click 'OK' to save and exit the appointment window.

Documenting No-Shows:

1. Go to the Resource Schedule.
2. Select the desired Provider/Resource.
3. Select the date of the appointment.
4. Locate and double-click the appointment.
5. Change the visit status to 'N/S (No-Show).'
6. Click 'OK.'



Note:

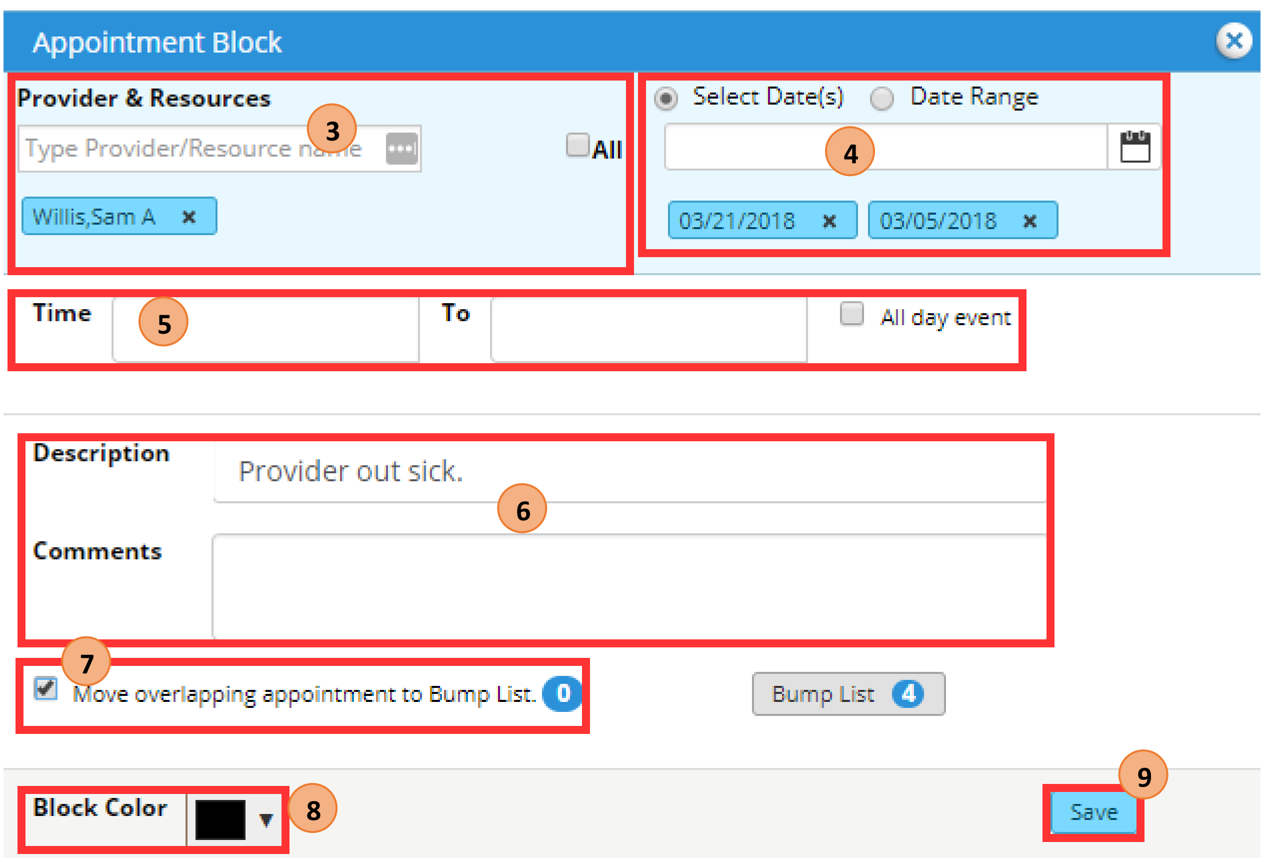
- ***Do not delete*** **a Cancelled, Rescheduled or a No-Show appointment, as you will not be able to run a report on the number of those appointments.**
- **An appointment *cannot* be marked as Cancelled, Rescheduled, or No-Show if there are any charges associated with the appointment (co-pay or self-pay). The payment collected will have to be deleted before the appointment can be marked with one of those statuses.**

Bumping Appointments

The “Bump Appointment” feature can be used to create a list that contains all scheduled patients who the Provider/Resource was unable to see that day. Multiple appointments can be bumped when blocking the provider’s schedule.

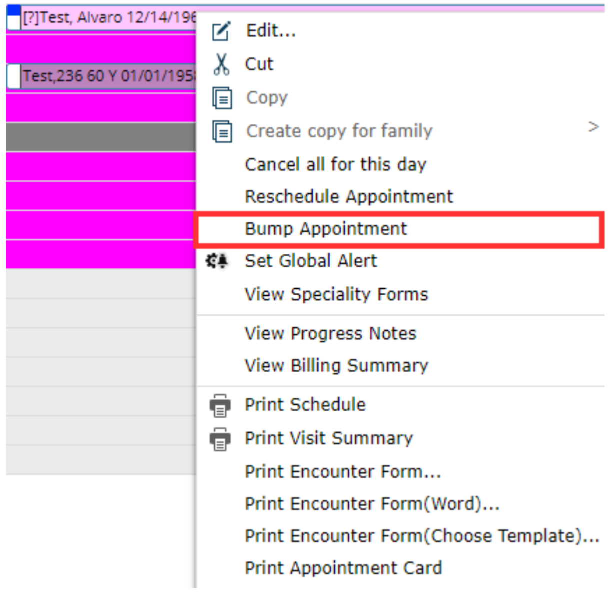
To bump multiple appointments:

1. Launch the Resource Schedule Screen.
2. Click on the block icon. 
3. Select the provider(s) or resource(s) that need to be blocked.
4. Select the date/date range for the block.
5. Select the time for the block.
6. Document a description and any comments for the block.
7. Check the box next to ‘Move overlapping appointments to Bump List’ to bump all appointments within that date/time range.
8. Select a color for the block.
9. Click ‘Save.’



To bump single appointments:

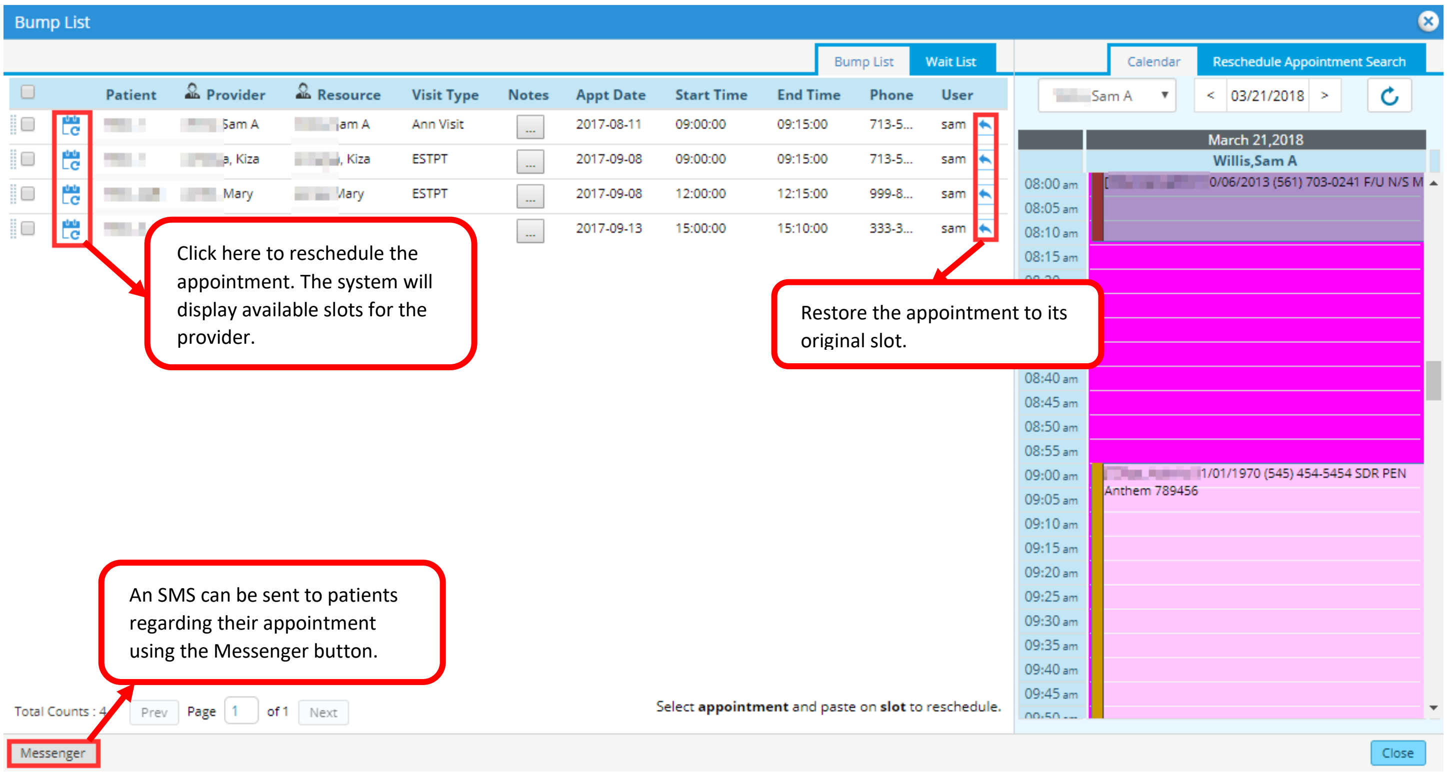
1. Right-click on the desired appointment.
2. Select 'Bump Appointment.'



Managing the Bump List

The Bump List can be managed by clicking on the Bump List icon from the *Resource Schedule*. 

- The number on the Bump icon displays the *number of bumped appointments*.
- Appointments from the Bump List can then be *rescheduled* as required.

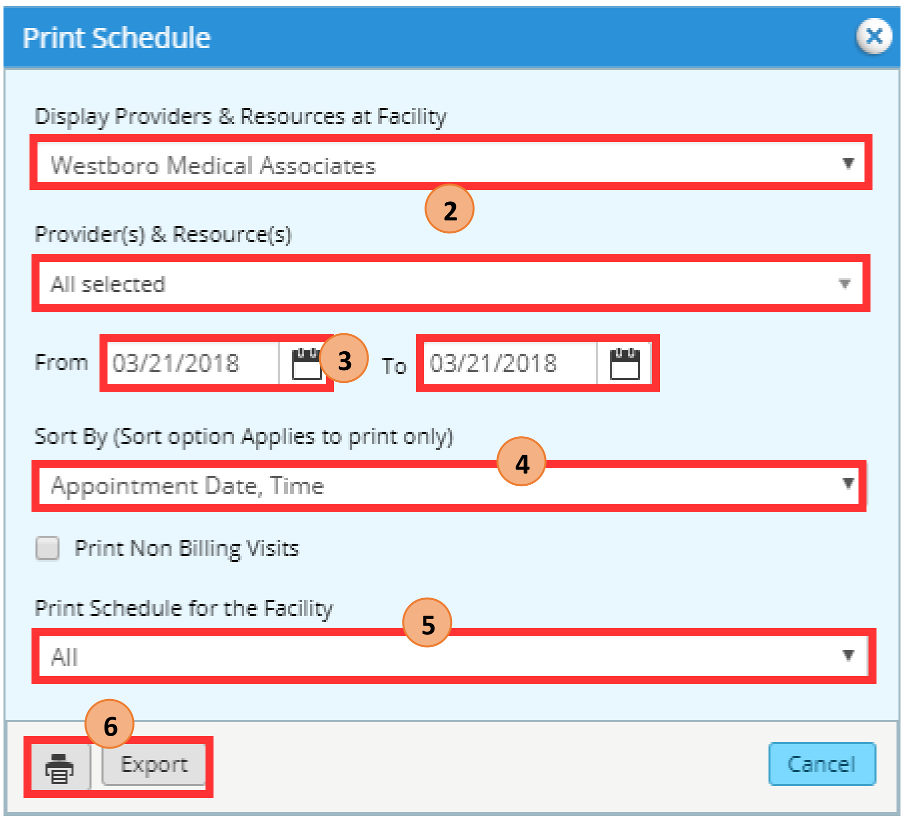


Appointment Preparation

Printing a Provider Schedule

To Print a Provider/Resource schedule:

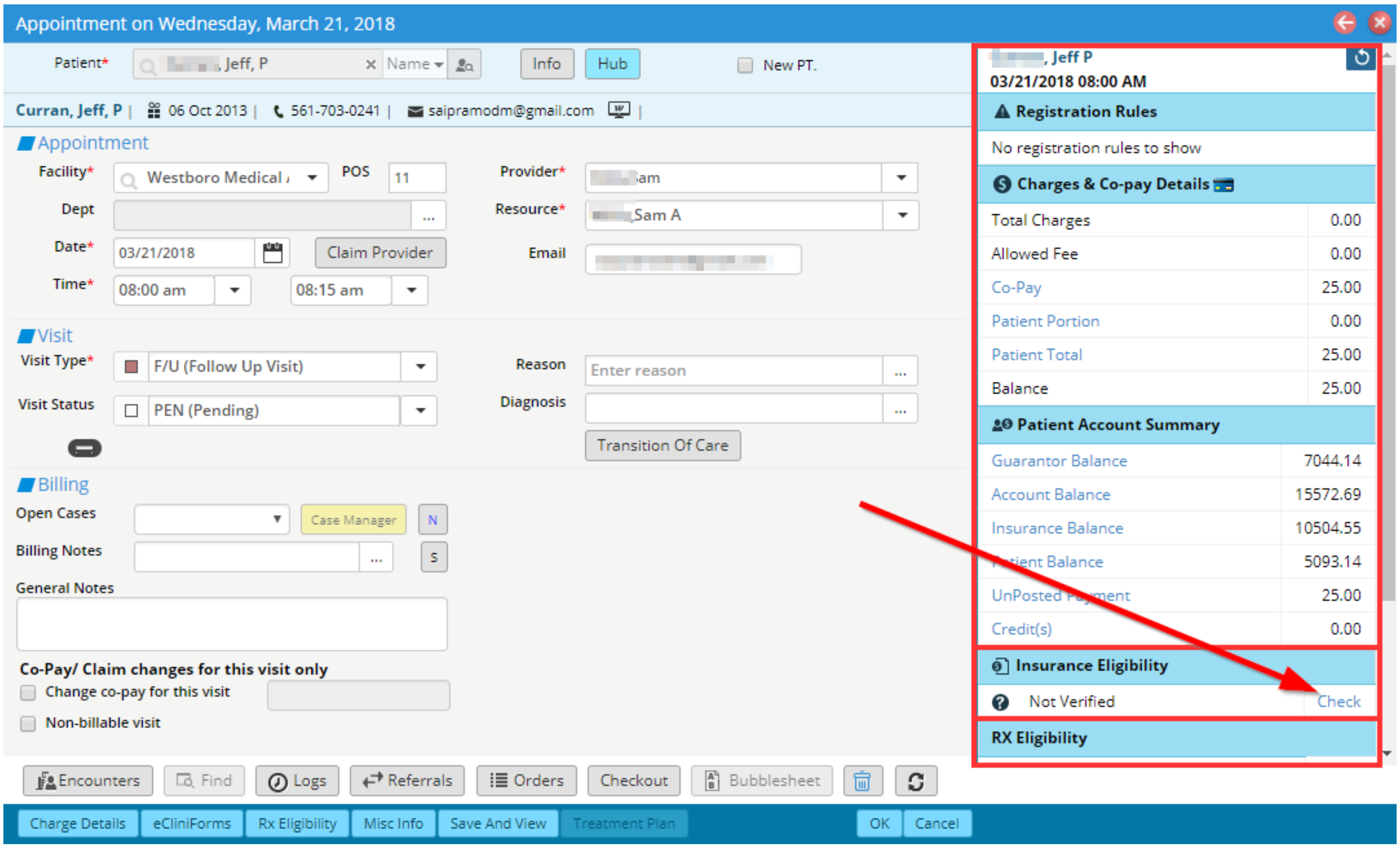
1. From Menu Band select File → Print → Print Schedule.
2. Select the Provider/Resource.
3. Select the date range.
4. Select the 'Sort By' order.
5. Select the facility.
6. Click the printer icon to print or 'Export.'



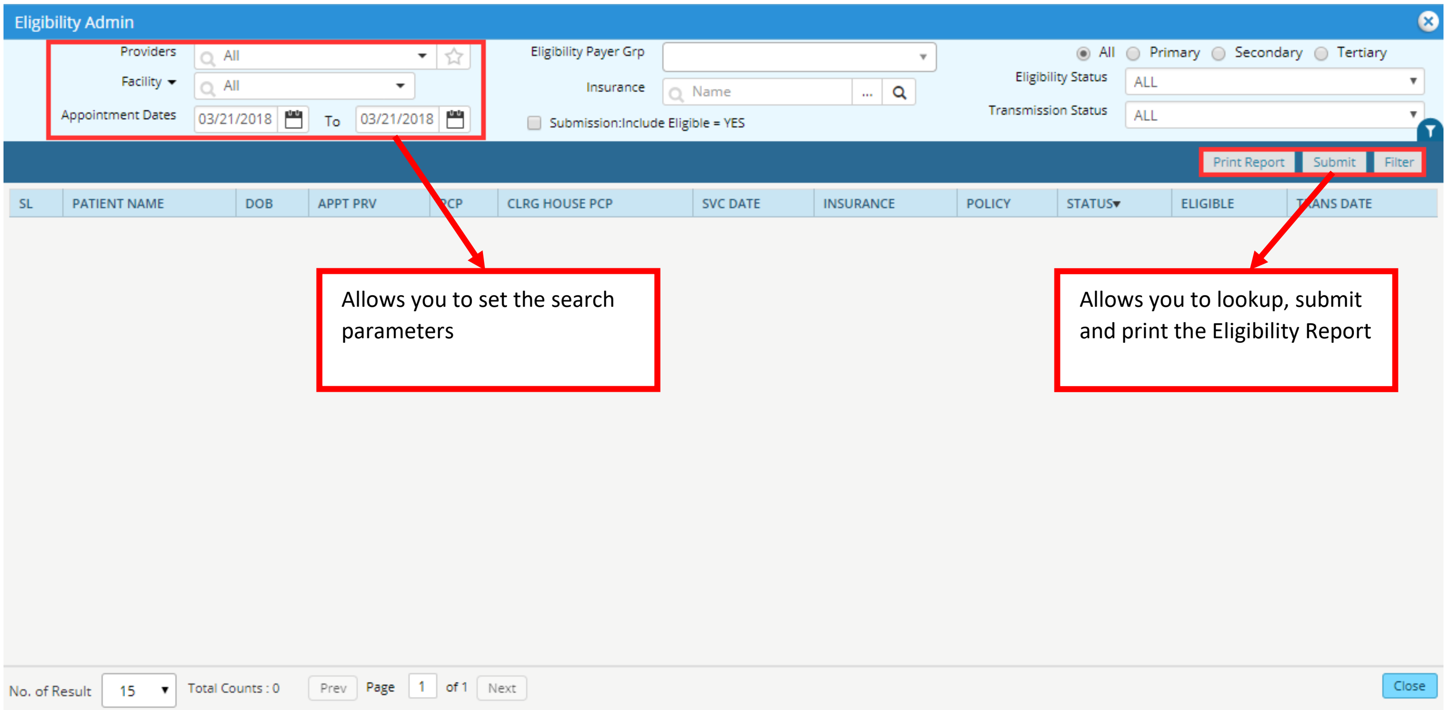
Using Insurance Eligibility (IE Button and Right Chart Panel)

Insurance Eligibility is used to verify if a patient is eligible for insurance coverage on a specific date. Insurance Eligibility can be run 2 ways:

1. Individual – Right-click on the patient's appointment then select 'Check Eligibility' or you can check it from the right chart panel in the appointment window.



2. Batch – Check the eligibility for all patients by selecting the  icon at the top of the Resource Scheduling screen.

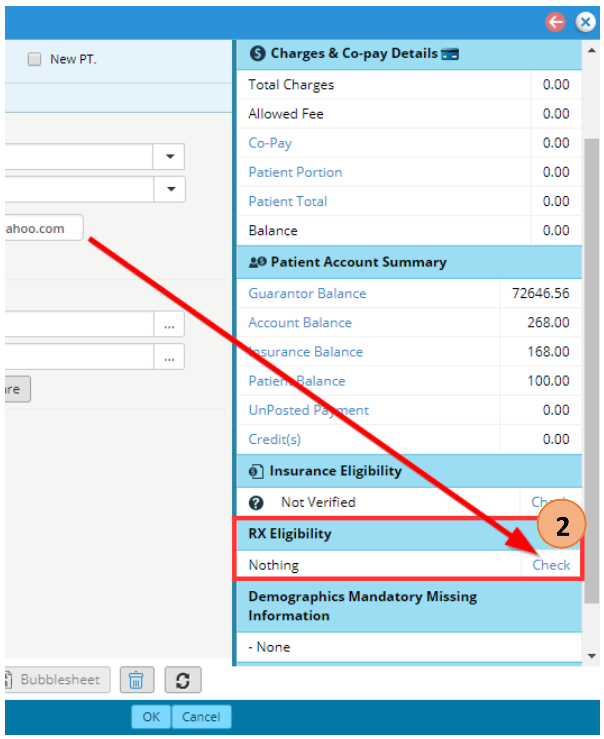


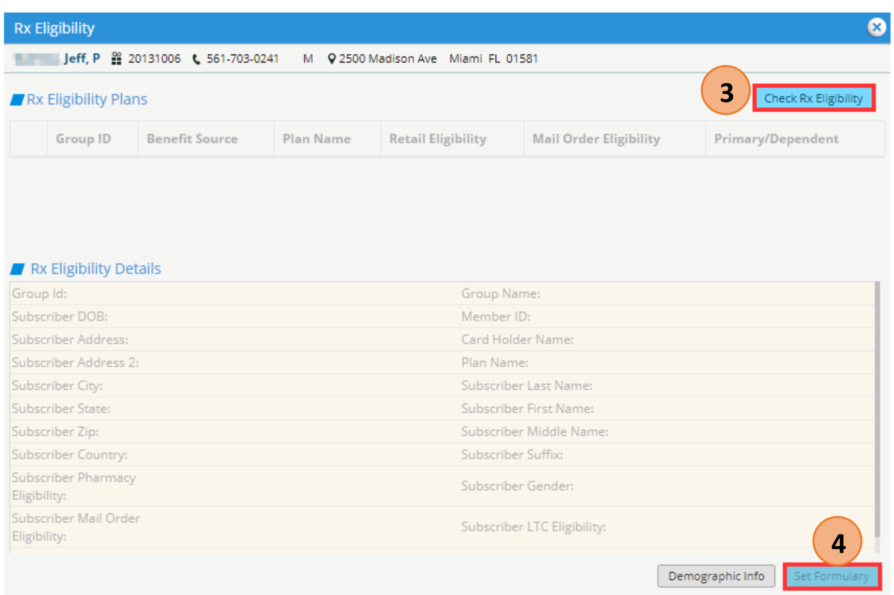
Using Rx Eligibility (Batch & Individual)

Similarly, Rx Eligibility can be used to verify if medications will be covered during the visit and it allows for clinicians to check external Rx history in the progress note.

To verify Rx eligibility for an individual patient:

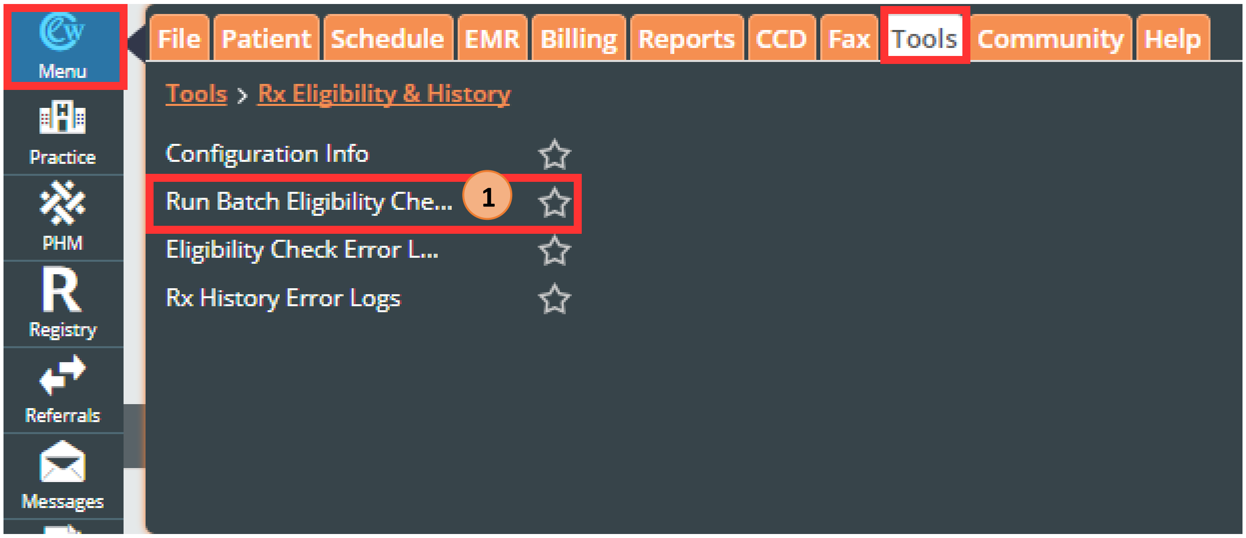
1. Open an appointment.
2. Click on 'Check' under Rx Eligibility section in the right chart panel.
3. Click on 'Check Rx Eligibility.'
4. Select 'Set Formulary.'

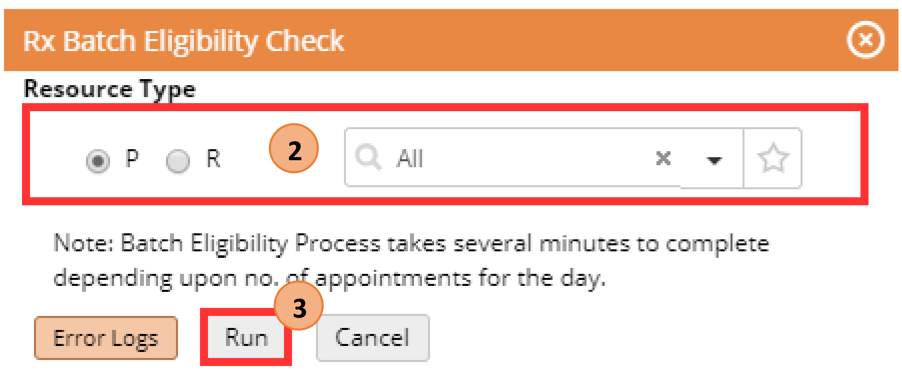




To verify Rx eligibility for a batch of patients:

1. From Menu Band → Tools → Rx Eligibility & History Option → Run Batch Eligibility Check.
2. Select the 'P' for providers, 'R' for resources then select them from the drop-down.
3. Click 'Run.'





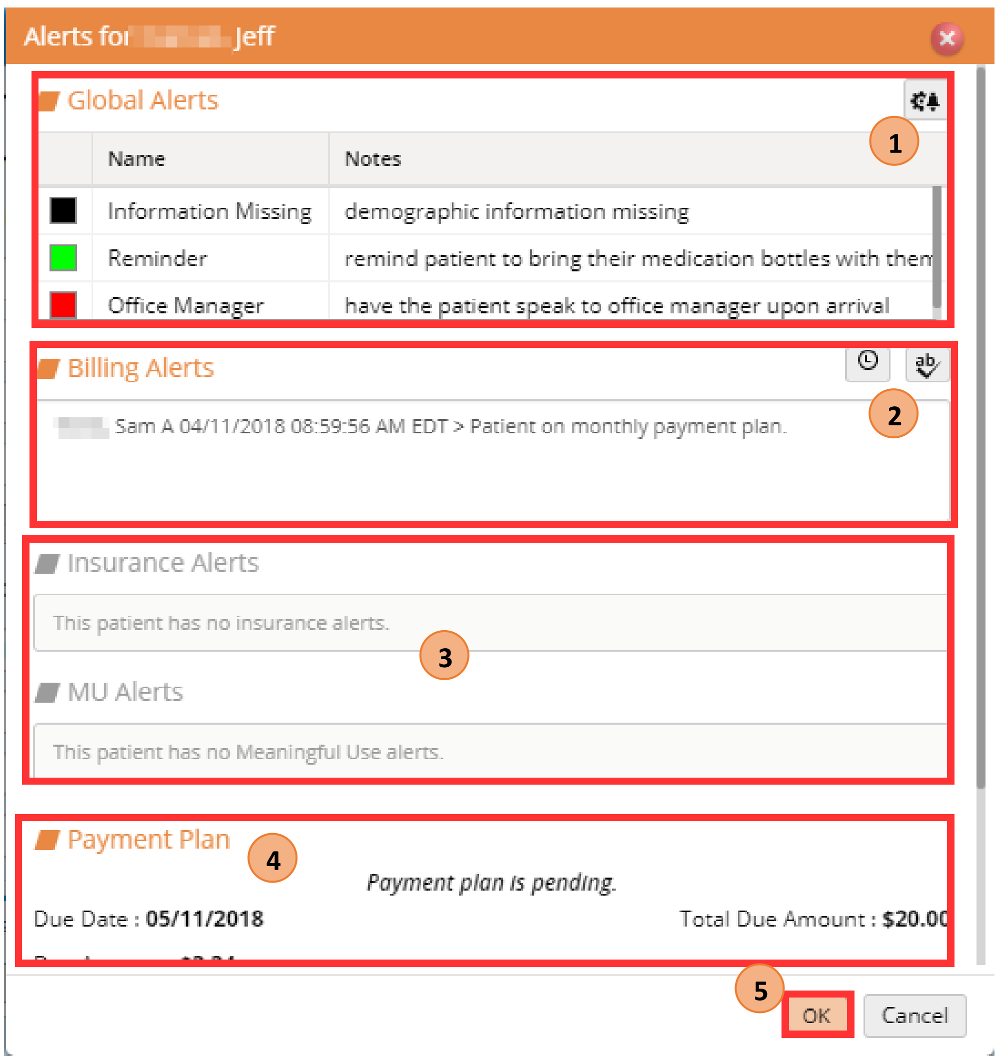
NOTE: RX eligibility must be check during the checking process of the appointment.

Patient Check In

Alerts

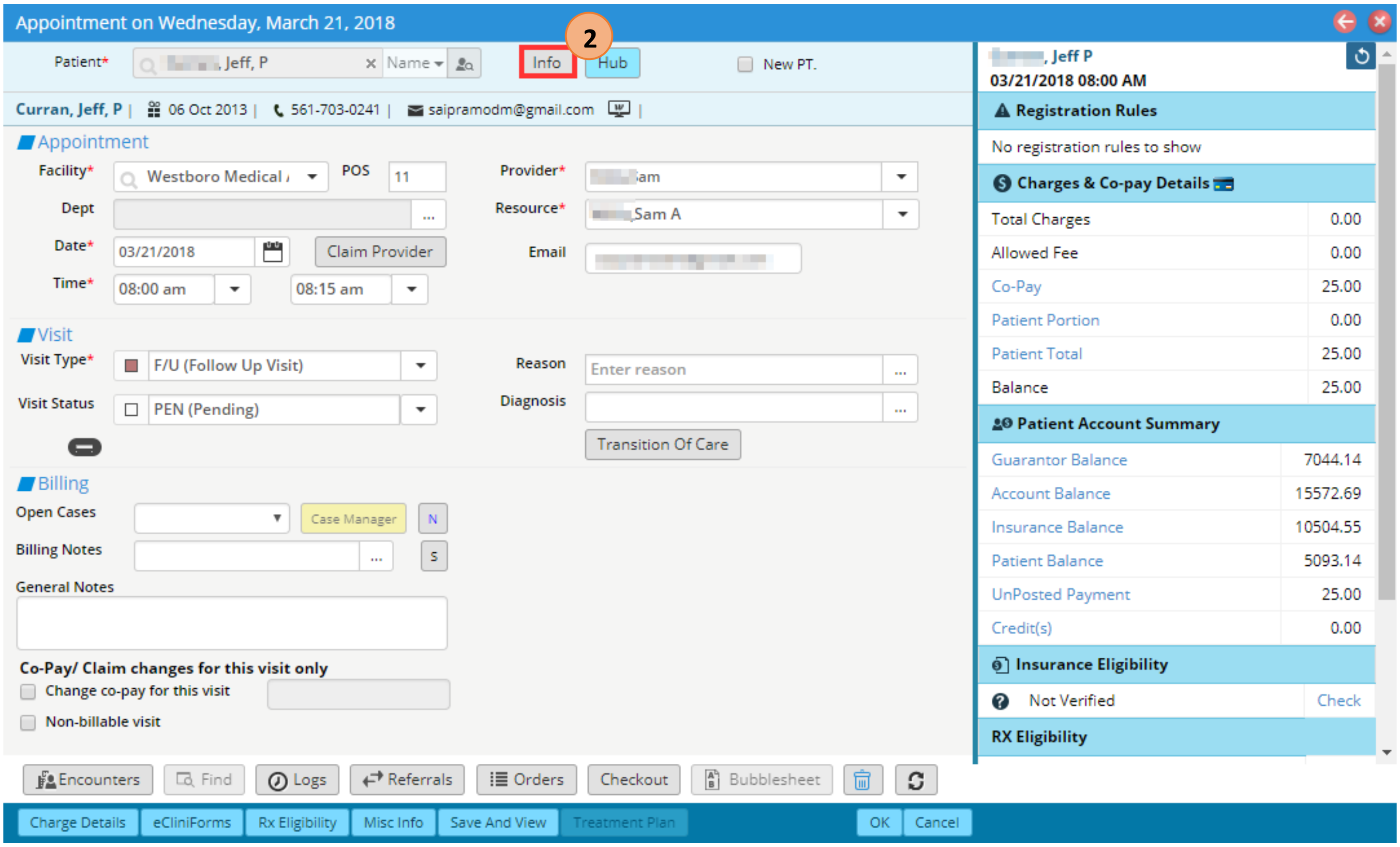
An alert window will appear after double-clicking on the patient's appointment from the Resource Schedule window.

1. Add any 'Global Alerts' by clicking on the gear icon.
2. Timestamp and free type in any 'Billing Alerts.'
3. Insurance and Meaningful Use (MU) Alerts will appear automatically.
4. Payment Plan information will appear if that patient is enrolled in a payment plan for past due balances.
5. Click 'OK' to exit the Alerts window.

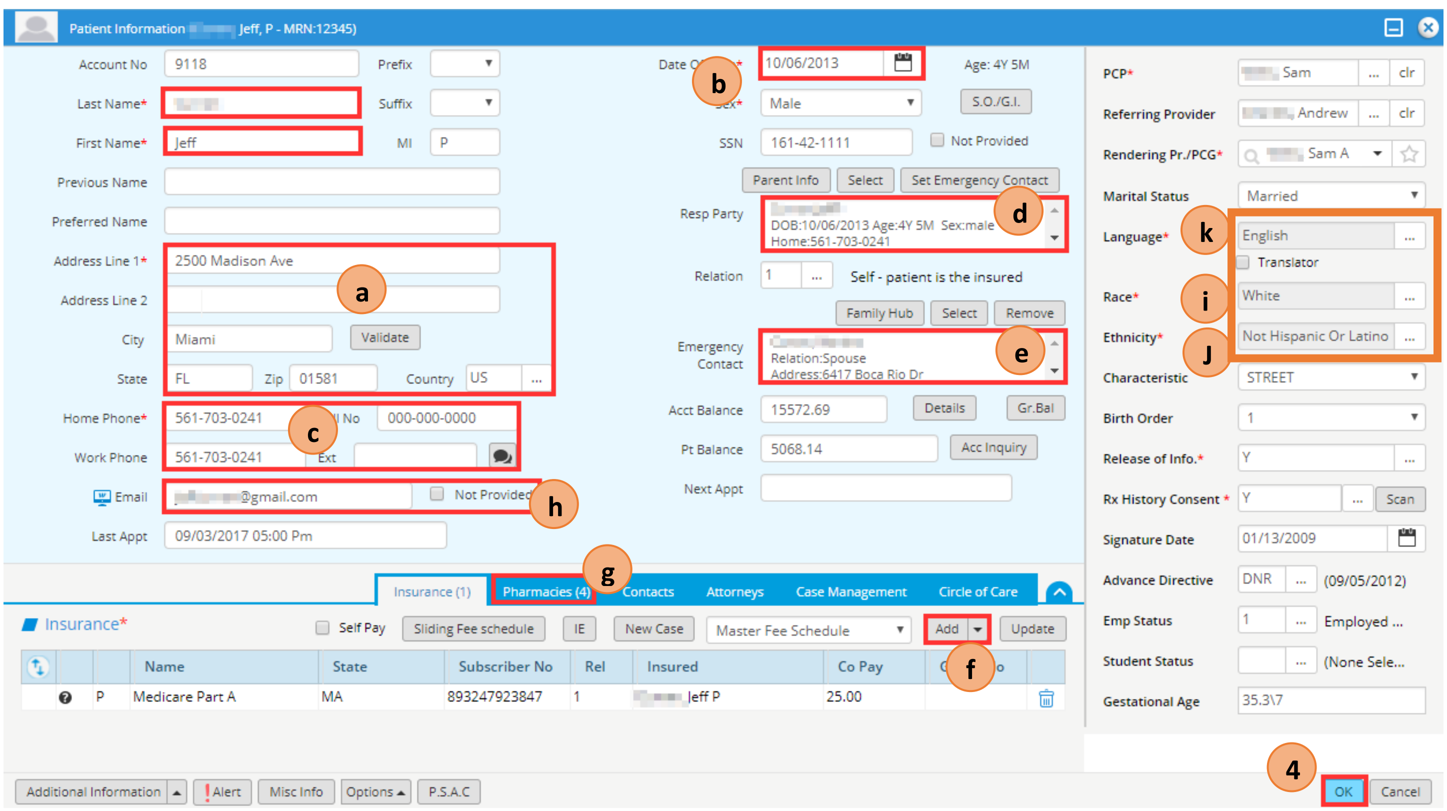


Verify Demographics

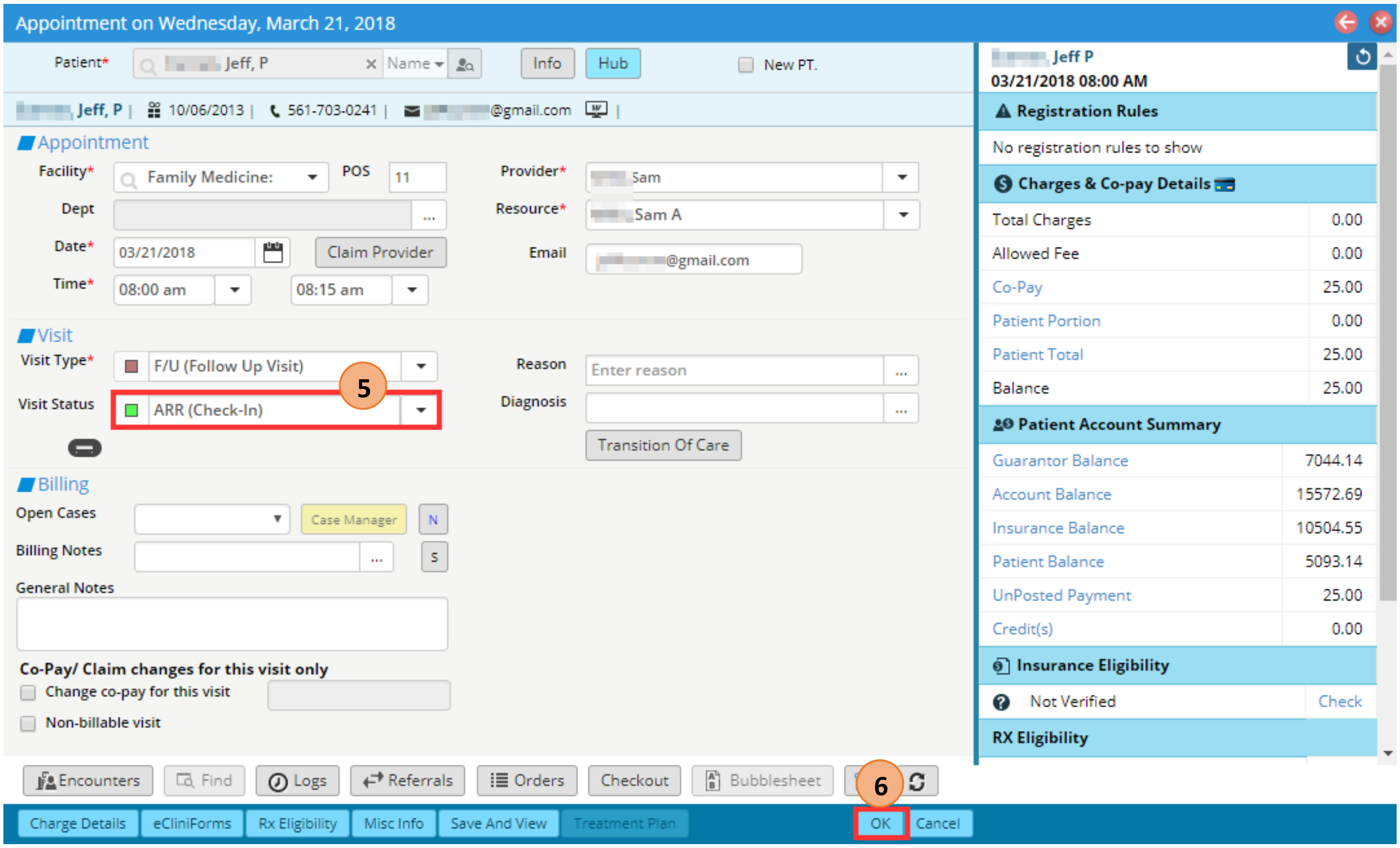
1. Locate and double-click on the appointment.
2. Click on 'Info' to verify/update the patient's demographics information.



3. Verify/Update Demographics Information:
    a. Address. (Line 1, City, State, Zip and Country)
    b. Date of Birth.
    c. Phone Number.
    d. Responsible Party.
    e. Emergency Contact
    f. Insurance Information.
    g. Pharmacy Information.
    h. Email.
    i. Race.
    j. Ethnicity.
    k. Language.
4. Click 'OK' to save the updated information.



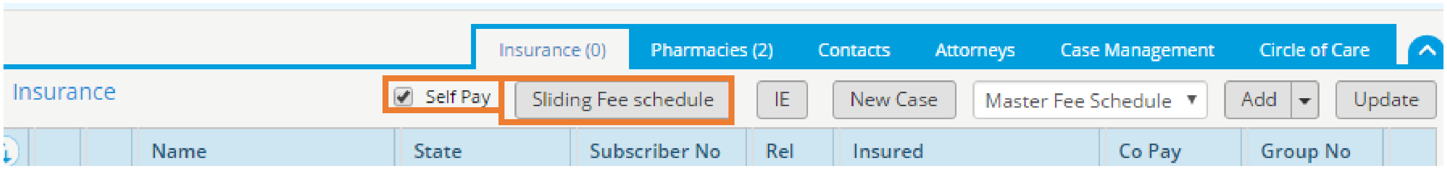
5. In the appointment window, change the Visit Status to 'ARR.'
6. Click 'OK' to close the appointment window.


Appointment on Wednesday, March 21, 2018
Patient*
Jeff, P
Name
Info
Hub
New PT.
Jeff, P | 10/06/2013 | 561-703-0241 | @gmail.com |
Appointment
Facility*
Family Medicine:
POS
11
Provider*
Sam
Dept
Resource*
Sam A
Date*
03/21/2018
Claim Provider
Email
@gmail.com
Time*
08:00 am
08:15 am
Visit
Visit Type*
F/U (Follow Up Visit)
Reason
Enter reason
Visit Status
ARR (Check-In)
Diagnosis
5
Transition Of Care
Billing
Open Cases
Case Manager
N
Billing Notes
S
General Notes
Co-Pay/ Claim changes for this visit only
Change co-pay for this visit
Non-billable visit
Jeff P
03/21/2018 08:00 AM
Registration Rules
No registration rules to show
Charges & Co-pay Details
Total Charges 0.00
Allowed Fee 0.00
Co-Pay 25.00
Patient Portion 0.00
Patient Total 25.00
Balance 25.00
Patient Account Summary
Guarantor Balance 7044.14
Account Balance 15572.69
Insurance Balance 10504.55
Patient Balance 5093.14
UnPosted Payment 25.00
Credit(s) 0.00
Insurance Eligibility
Not Verified
Check
RX Eligibility
Encounters
Find
Logs
Referrals
Orders
Checkout
Bubblesheet
6
Charge Details
eCliniForms
Rx Eligibility
Misc Info
Save And View
Treatment Plan
OK
Cancel

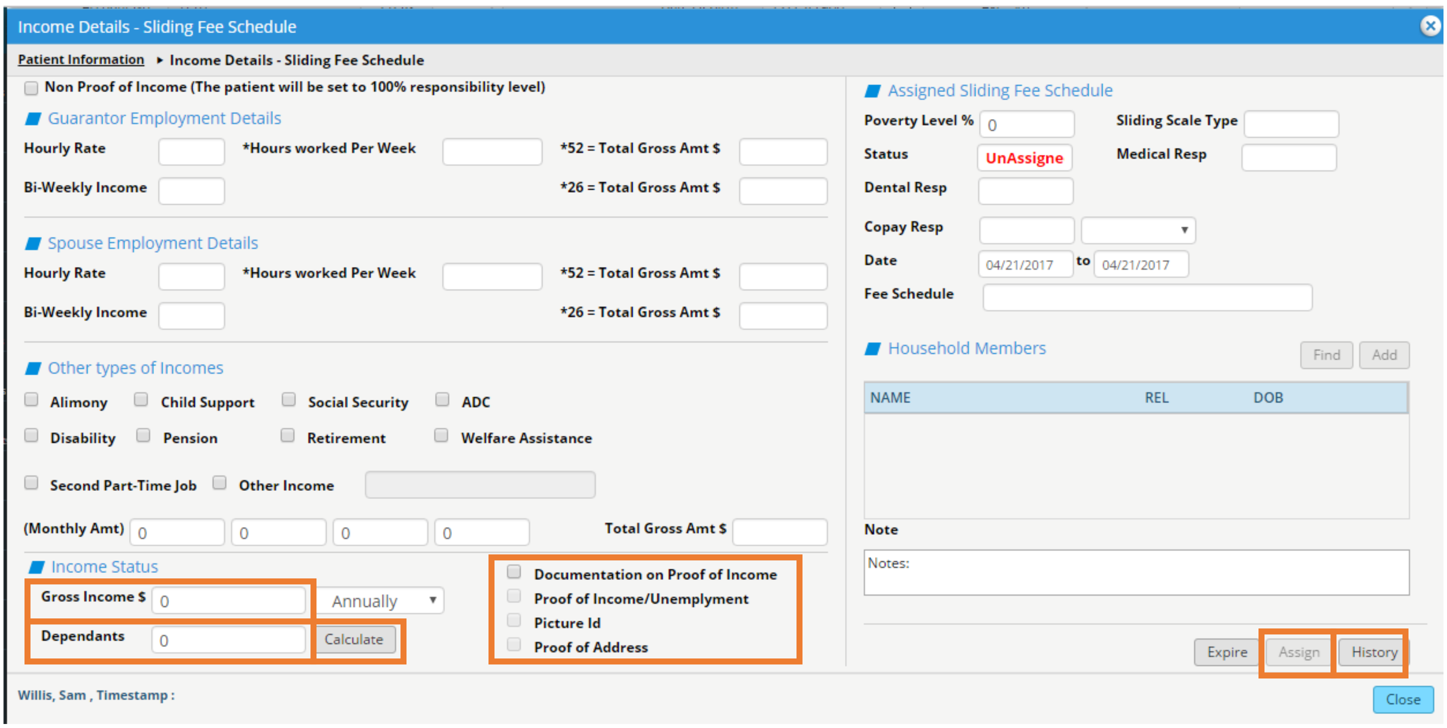
Applying a sliding fee scale

As a part of the patient check-in process, front office staff will calculate and apply an appropriate sliding fee scale to the patient. The steps for doing the same are outlined below:

1. In patient demographics, check the "Self-Pay" check box
2. Click "Sliding Fee Schedule" button located in the 'Insurance' section of the 'Patient Demographics' screen.



3. The sliding fee schedule window will then open up. The following tasks must be done on this screen: (please see screen shot below)



   a. Enter the patient's income appropriately in the "Income" field.
   b. Enter the number of dependants in the "Dependants" field.
   c. Click on the "Calculate" button. The system will automatically compute the sliding fee status for the patient and display the details on the screen. The "date" option denotes the duration for which this patient's sliding fee status needs to applied.
   d. If patient has provided the required documentation for his/her proof of income, check off the "Documentation of Proof of Income" check box.

This documentation must be scanned into the system appropriately. Scanned documents can be accessed from pt. hub → pt. documents.

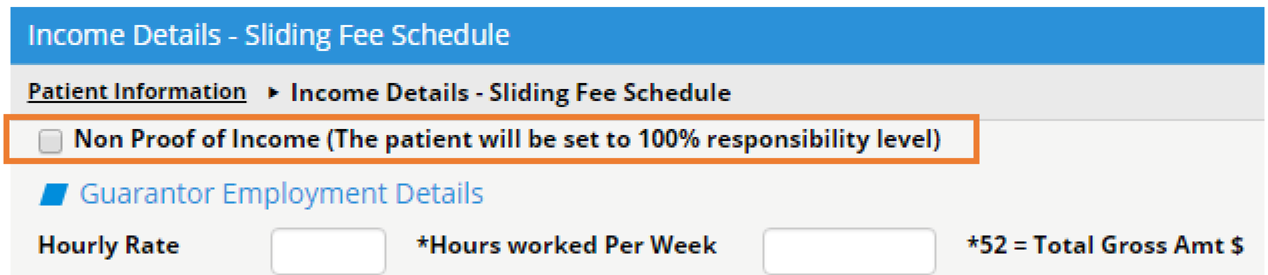
Please note: *that if this check box is left un-checked, the sliding fee will expire after the grace period. The check box has to be the last thing check before the "assign" button is selected.*

e. Click on the "Assign" button to apply the corresponding sliding fee status for the patient.

f. To look at Sliding fee level history, click on History in sliding fee window.

Note: *. Household income needs to be completed for patients with insurance and non-insurance follow the above steps then click on Sliding Fee Schedule again and expire the sliding fee. This is done to capture patient's income for UDS reporting*

For UDS,household gross income and dependence has to be collected annually from all patients.



******Do not use 'no proof of income' box at the top left*****

- Enter the Gross income
- Enter Dependents
- Select Calculate
- Assign

The system has recorded the patient income for UDS reporting purposes and assigned the patient to the highest slide level with 100% patient responsibility.

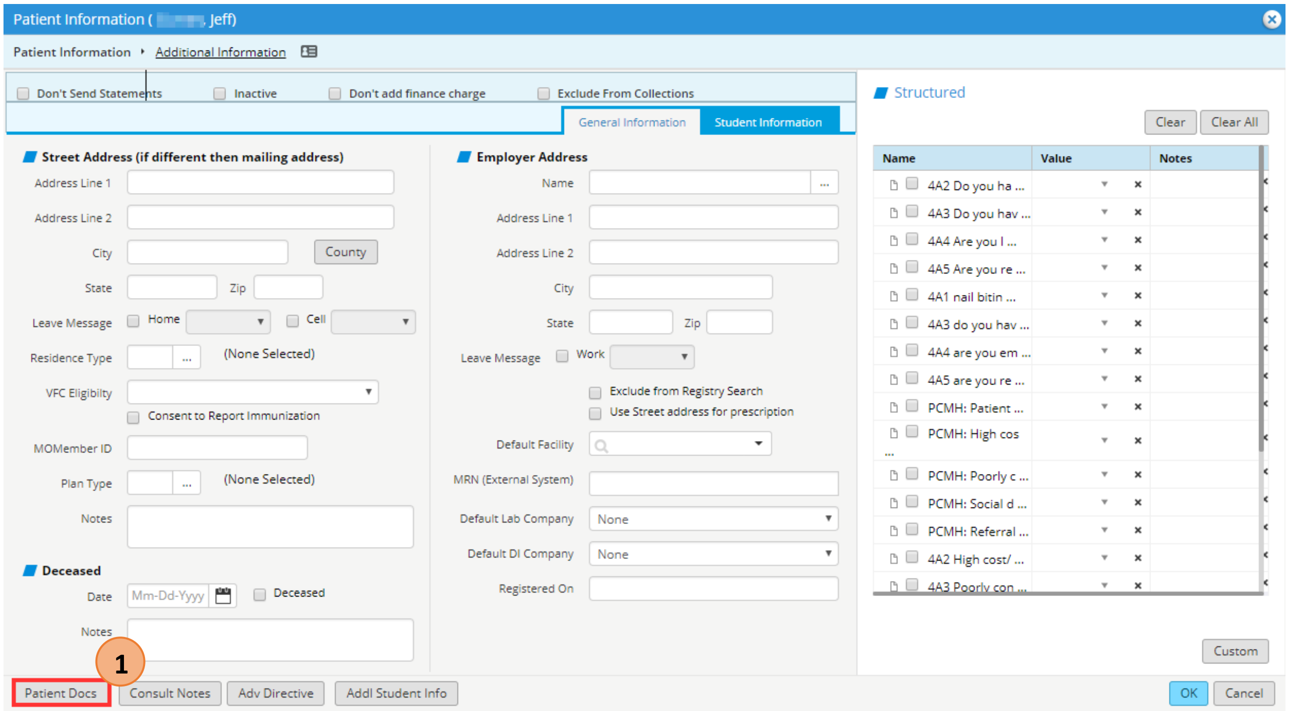
Note: For UDS requriment income must be captured for all the patients.

Scanning Driver's License, Forms, and Insurance Cards

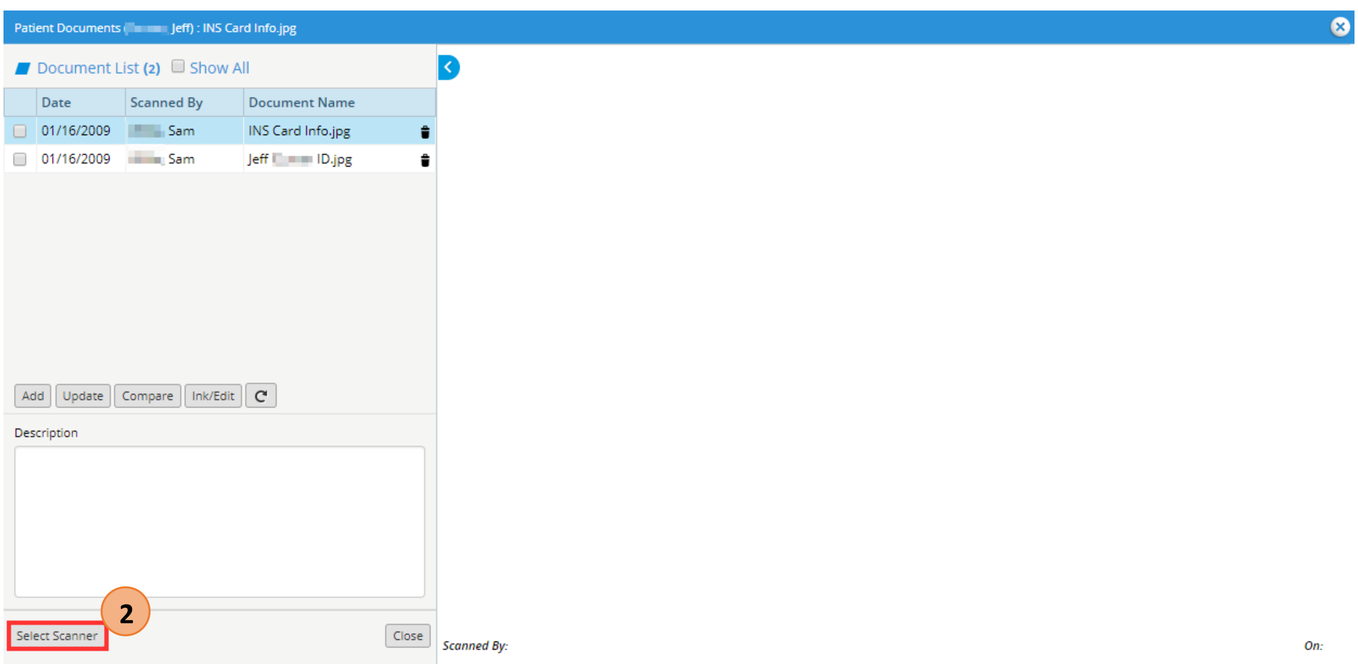
Licenses, forms, and insurance cards can be scanned directly into the patient's chart in eClinicalWorks.

To scan documents:

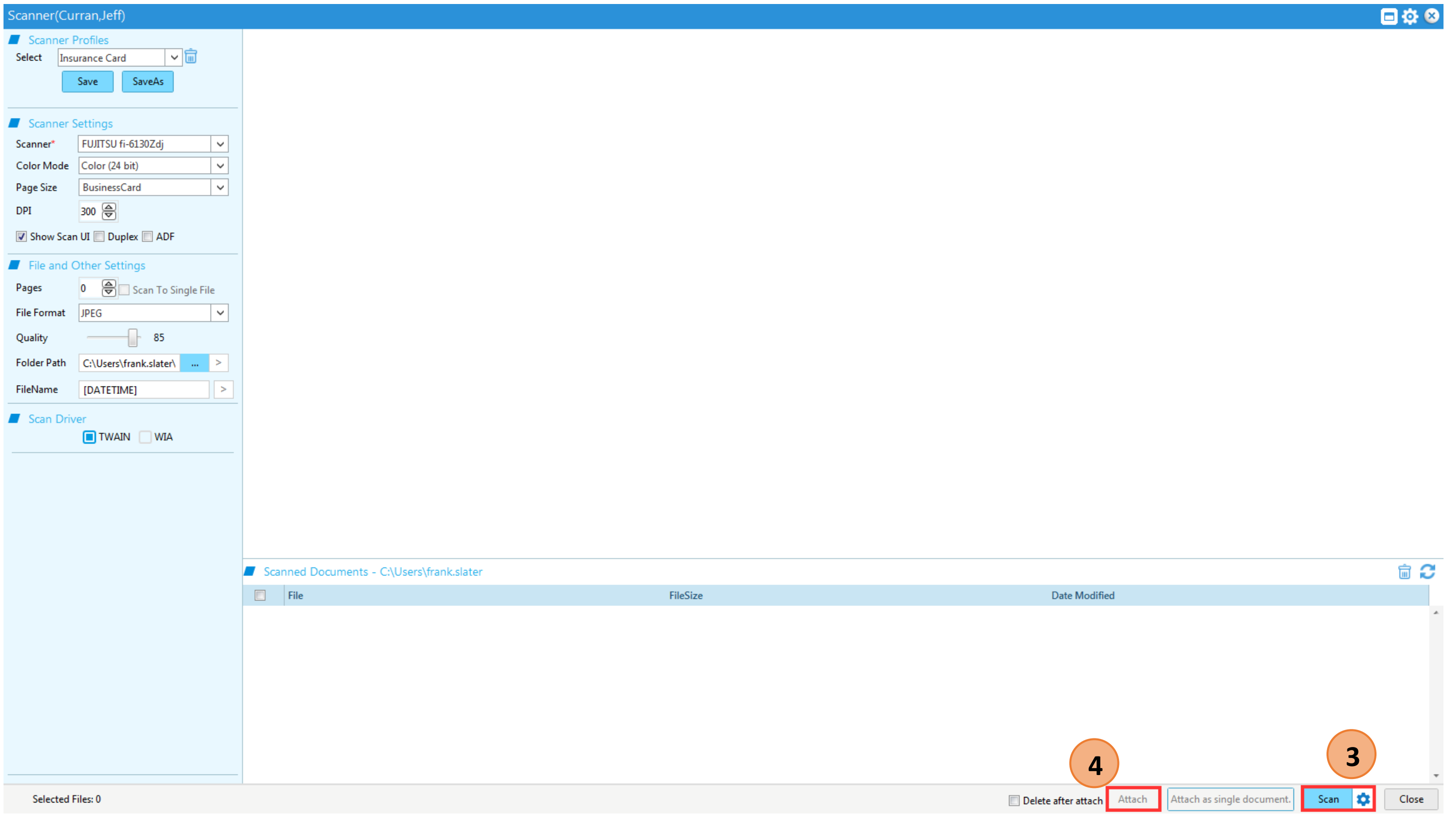
1. Open patient demographics → Additional Info → Patient Docs.

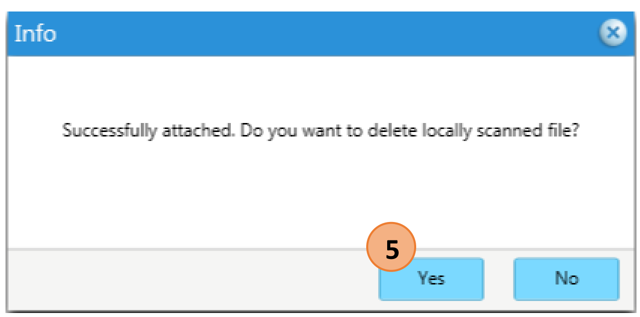


2. Click 'Select Scanner.'



3. Insert the cards/paperwork into the scanner and click ‘Scan.’
4. Once the scanning is completed, check the box next to the file name and select ‘Attach.’
5. Click ‘Yes’ to delete the file after uploading it to the patient’s chart.





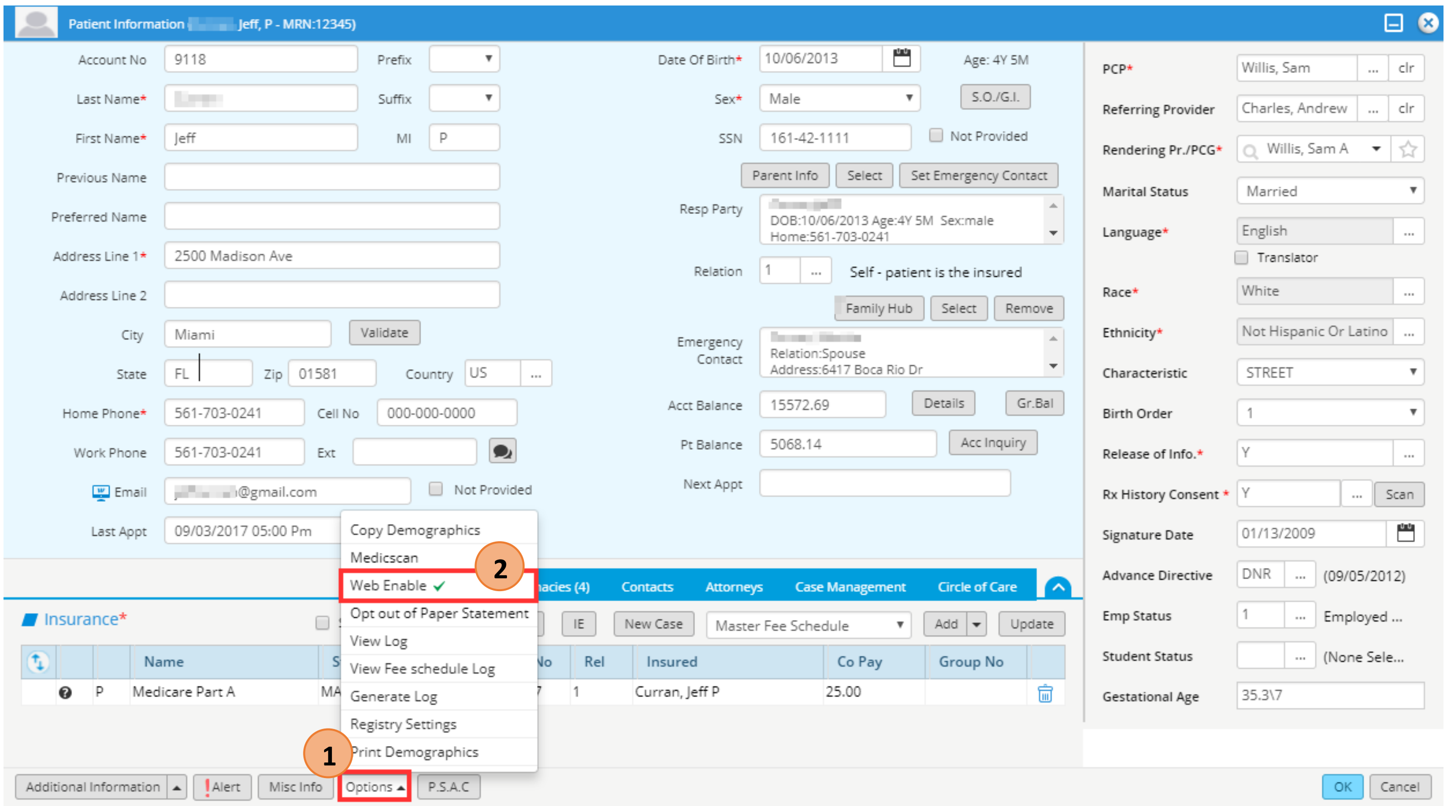
Note: Scanning Options

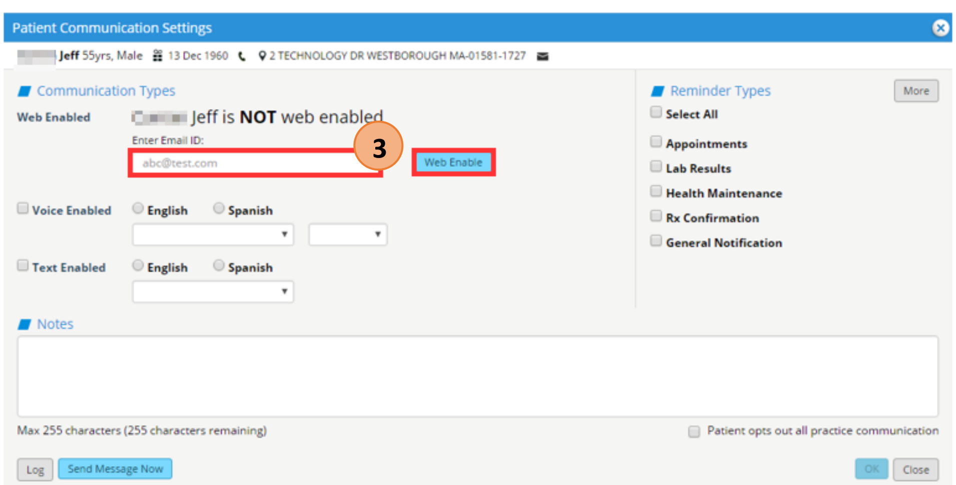
- **Color Mode – Select the mode (Black and White, Grey Scale, Color) in which the document will be scanned**
- **Scan Duplex – Scan both sides of the document**
- **Show Scan UI – Launch the Scanner’s User Interface**

Web and vMsg Enabling

To web enable a patient:

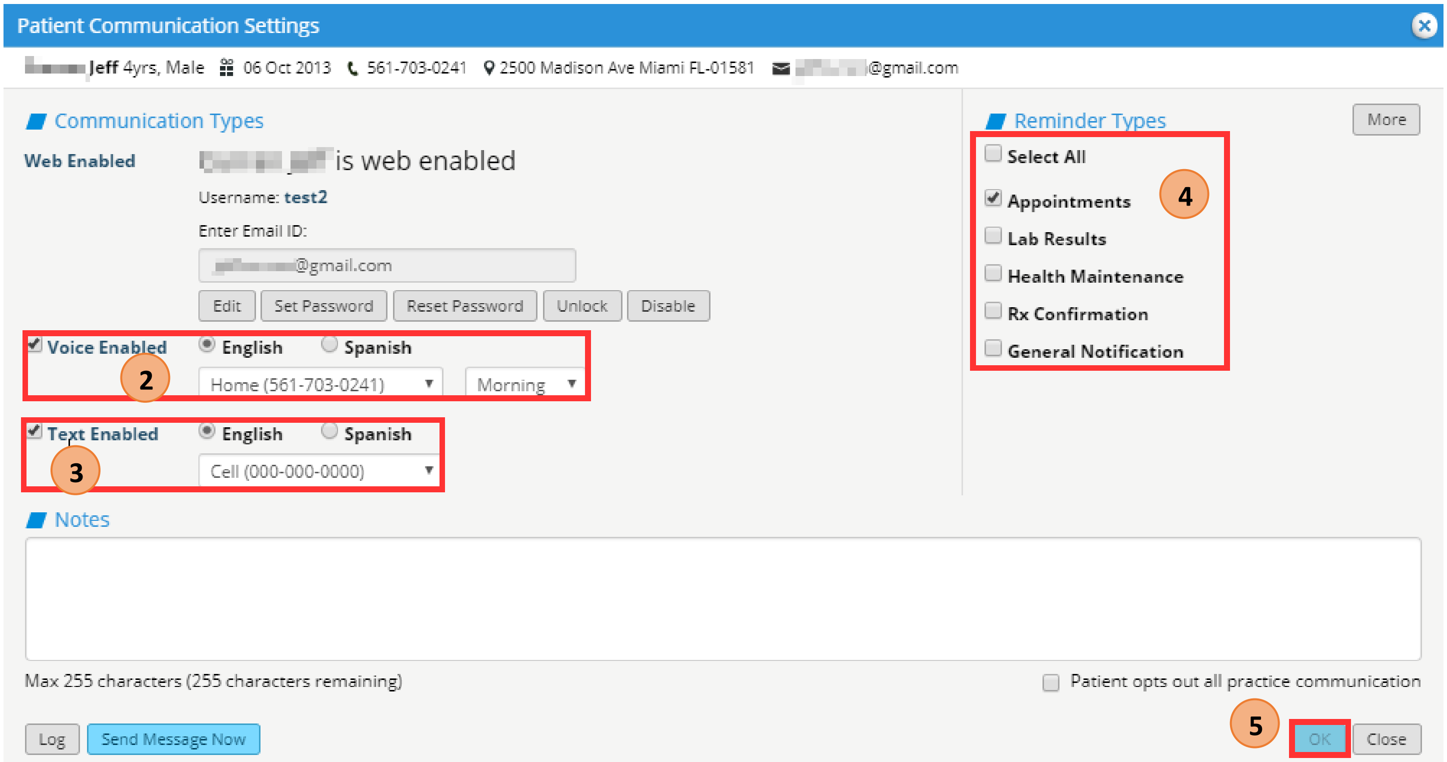
1. Click ‘Options’ at the bottom of the Patient Information screen.
2. Select ‘Web Enable.’
3. Document the patient’s email then click ‘Web Enable.’
4. Once the patient is web enabled they will receive an email with a link to the portal and a username and temporary password.





To enable the patient for vMsg:

1. Click on the speech bubble icon next to Ext in the Patient Information screen.
2. Make sure 'Voice Enabled' is checked off.
3. Check the 'Text Enabled' box to enable the patient to receive appointment reminder via SMS text.
4. Select the different 'Reminder Types.'
5. Click 'OK' to save.

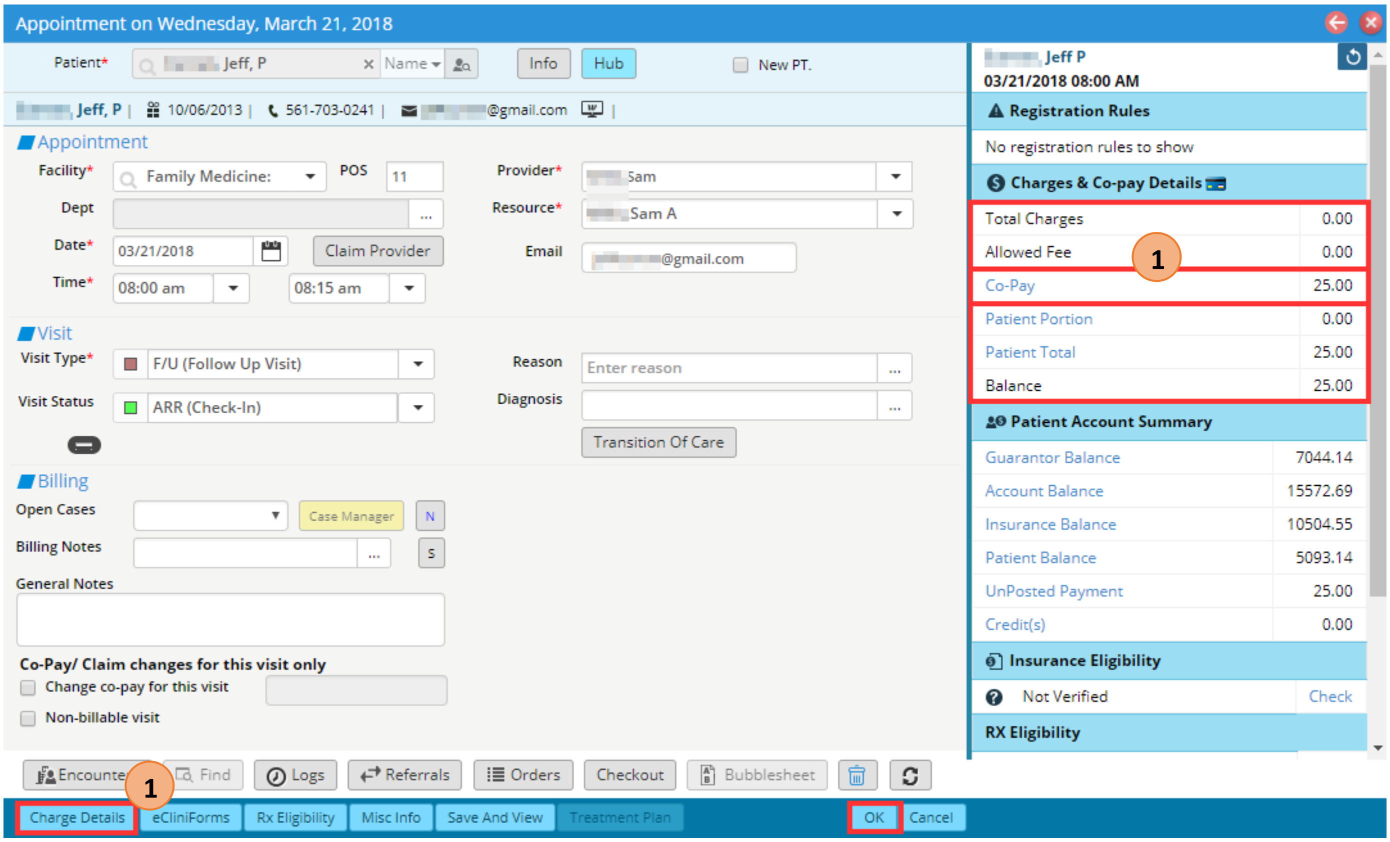


Collecting Co-Payments & Payments for Previous Patient Balances.

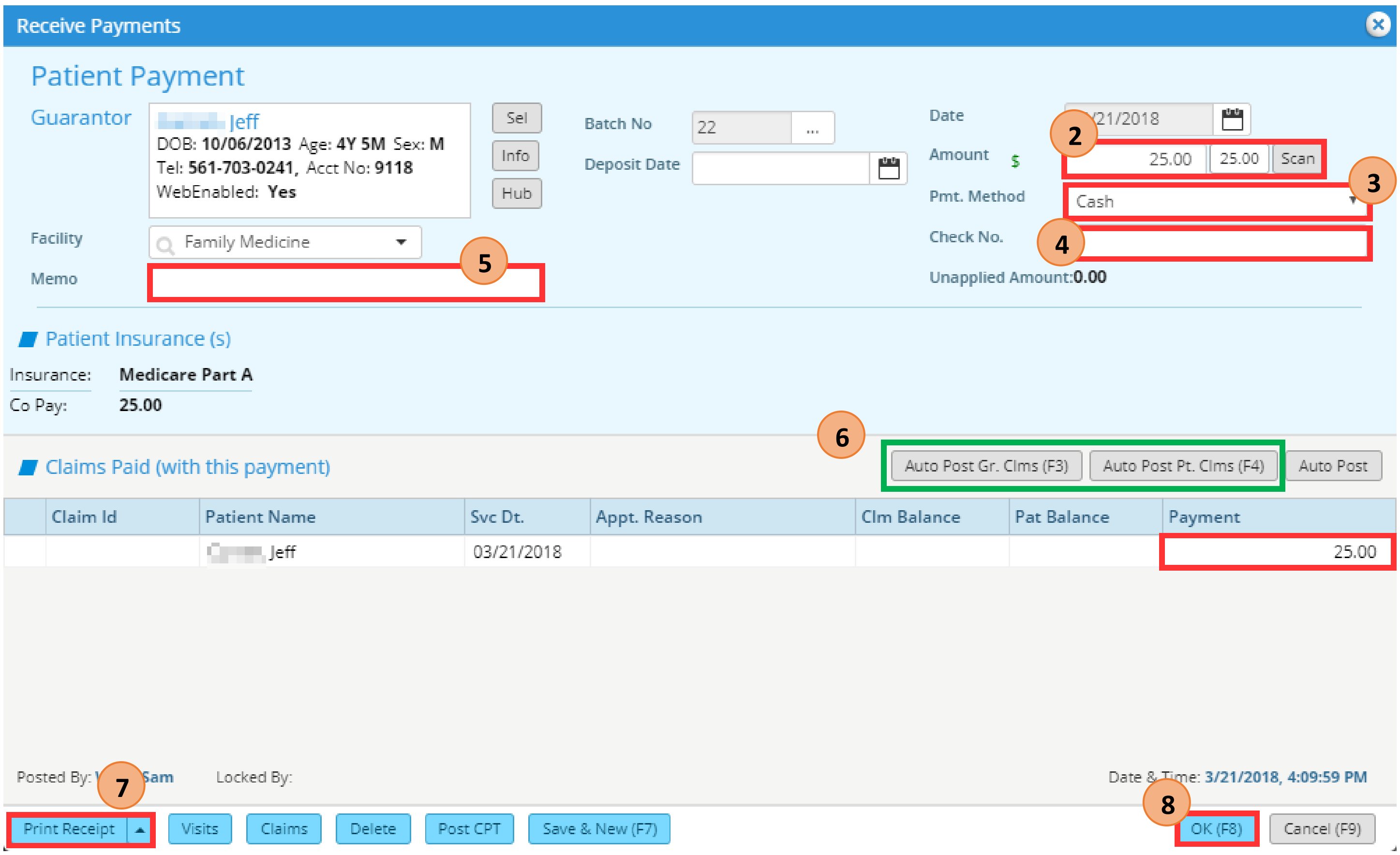
Any type of patient payment can be collected by selecting Charge Details → Co-Pay or the Co-pay/Patient Portion/Patient Total hyperlinks from the appointment right chart panel or from the patient Hub.

To Collect Copay/Payments:

1. Click on ‘Co-Pay’ from the appointment right chart panel or click on ‘Charge Details’ then select ‘Co-Pay.’



2. Verify and enter the co-pay amount in the ‘Amount’ field.
3. Select the Payment Method from the dropdown options.
4. The check number can be entered in the ‘Check No.’ field.
5. Add a ‘Memo’ to the payment if needed.
6. Click on Auto Post Gr. Claims or Auto post Pt. Claims.
7. Click on ‘Print Receipt.’
8. Click ‘OK.’



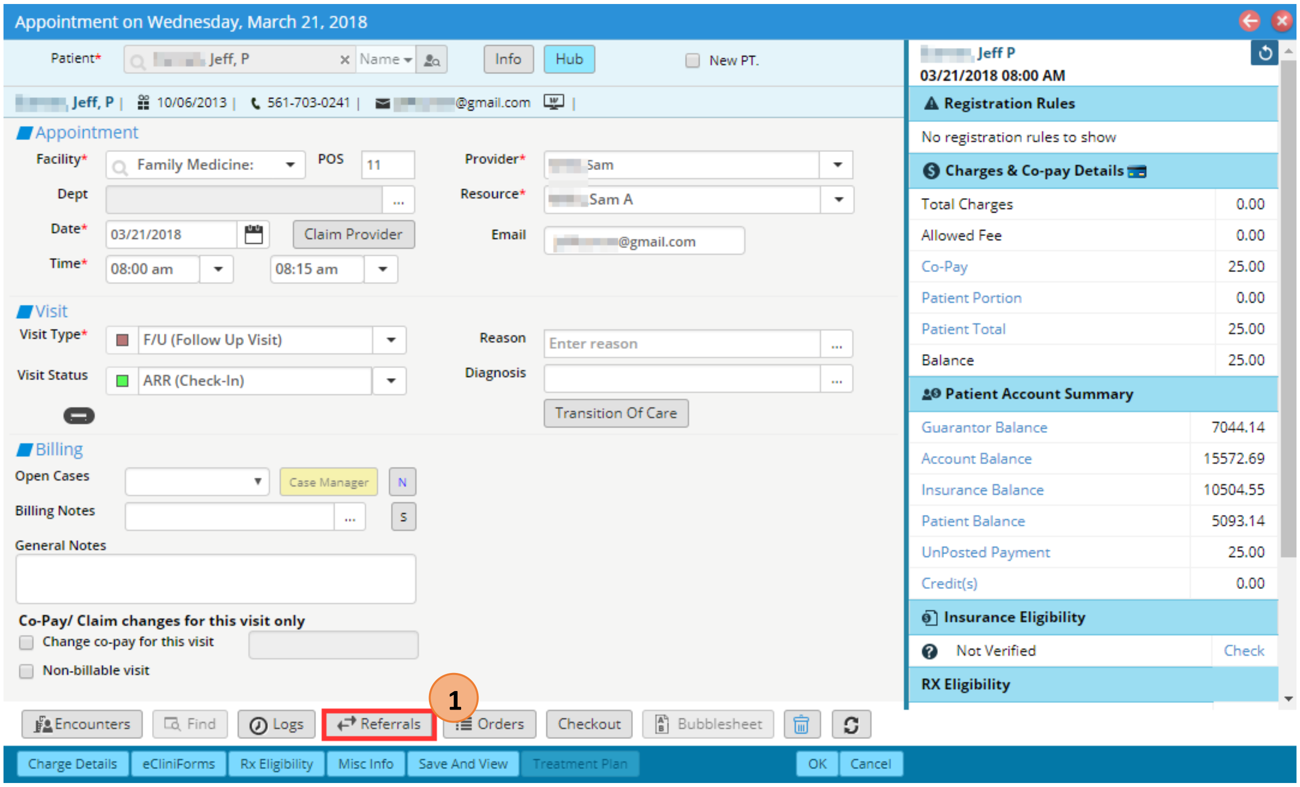
Note:

- **If any additional payments are collected (copay or old balance), the Front Desk can collect the entire amount, specify the copay under the “Payment” Column (bottom of the screen), and document under the memo section**

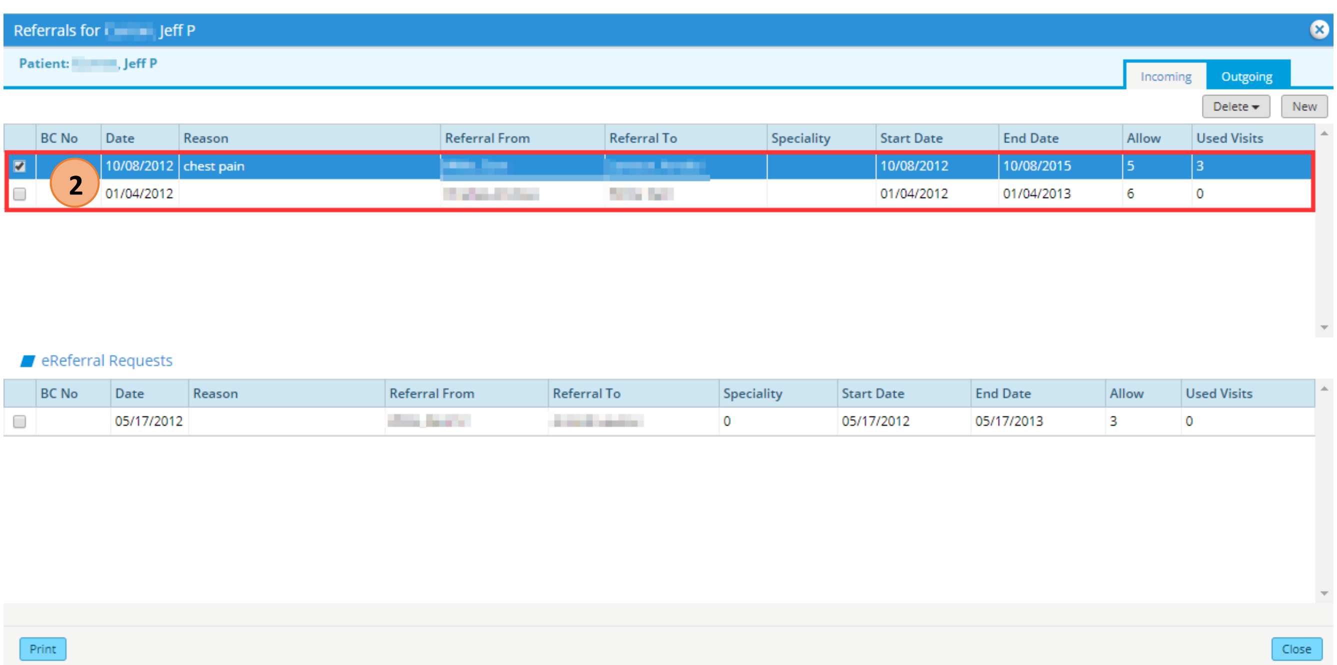
Linking a Referral to an Appointment

To associate an Incoming Referral with an appointment:

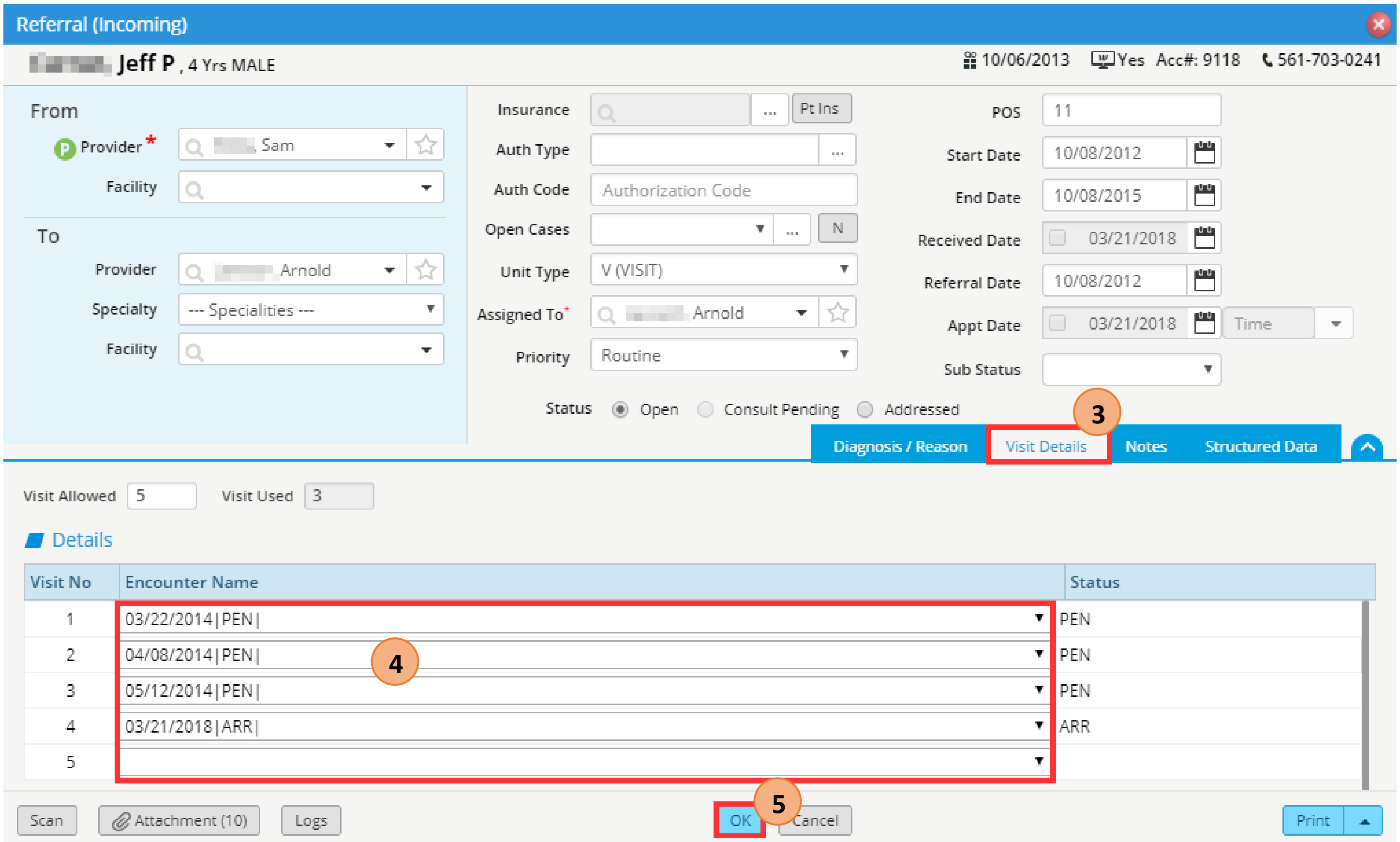
1. Click on ‘Referrals’ at the bottom of the appointment window.



2. Select the referral that needs to be associated with the appointment.

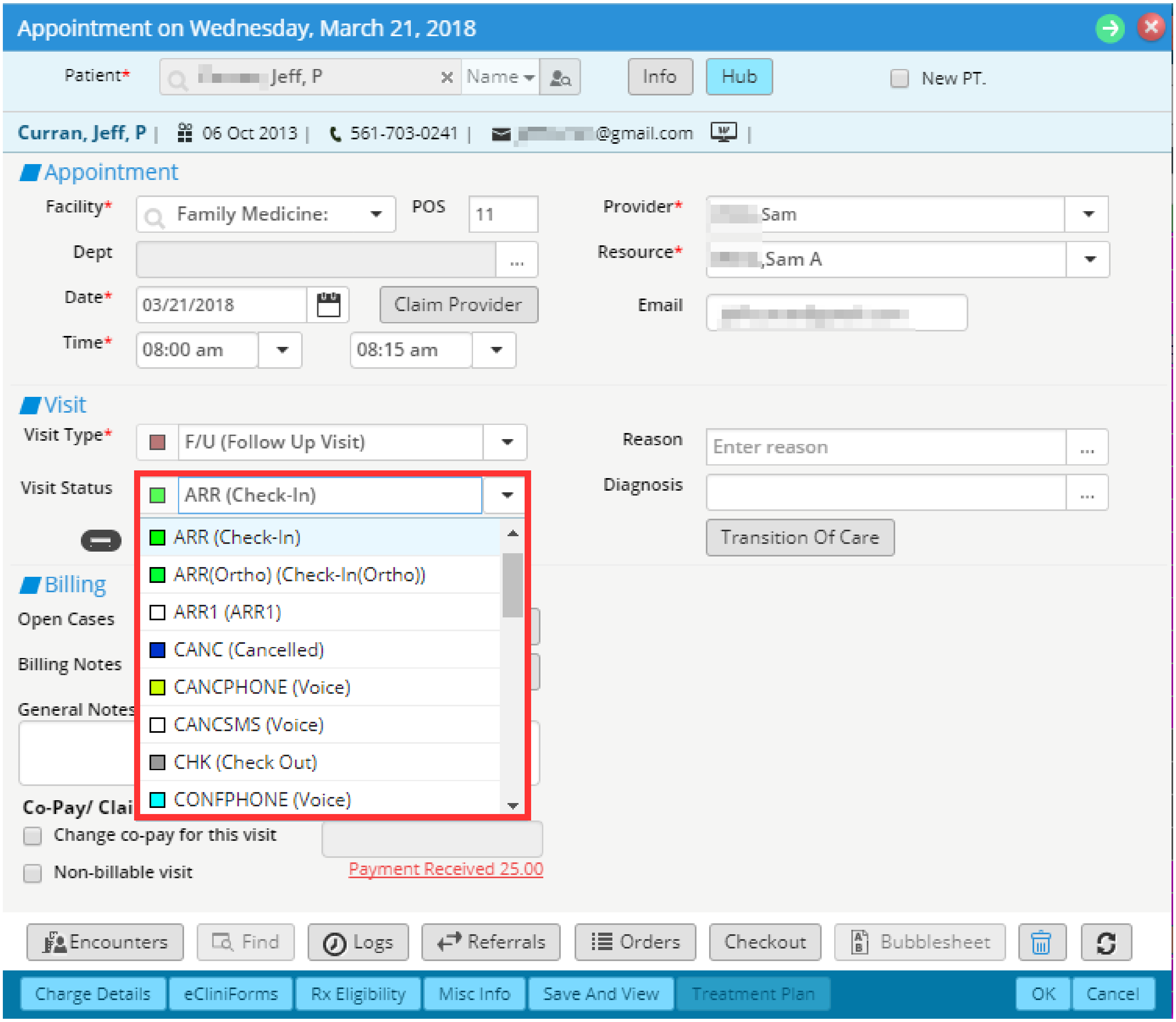


3. Click the 'Visit Details' tab.
4. Select the visit that needs to be associated with the Referral in the "Encounter Name" drop down.
5. Click 'OK.'

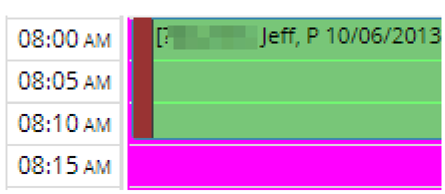


Change Appointment Status

- Change the Status of the appointment from ‘PEN (Pending)’ to ‘ARR (Check-in).’



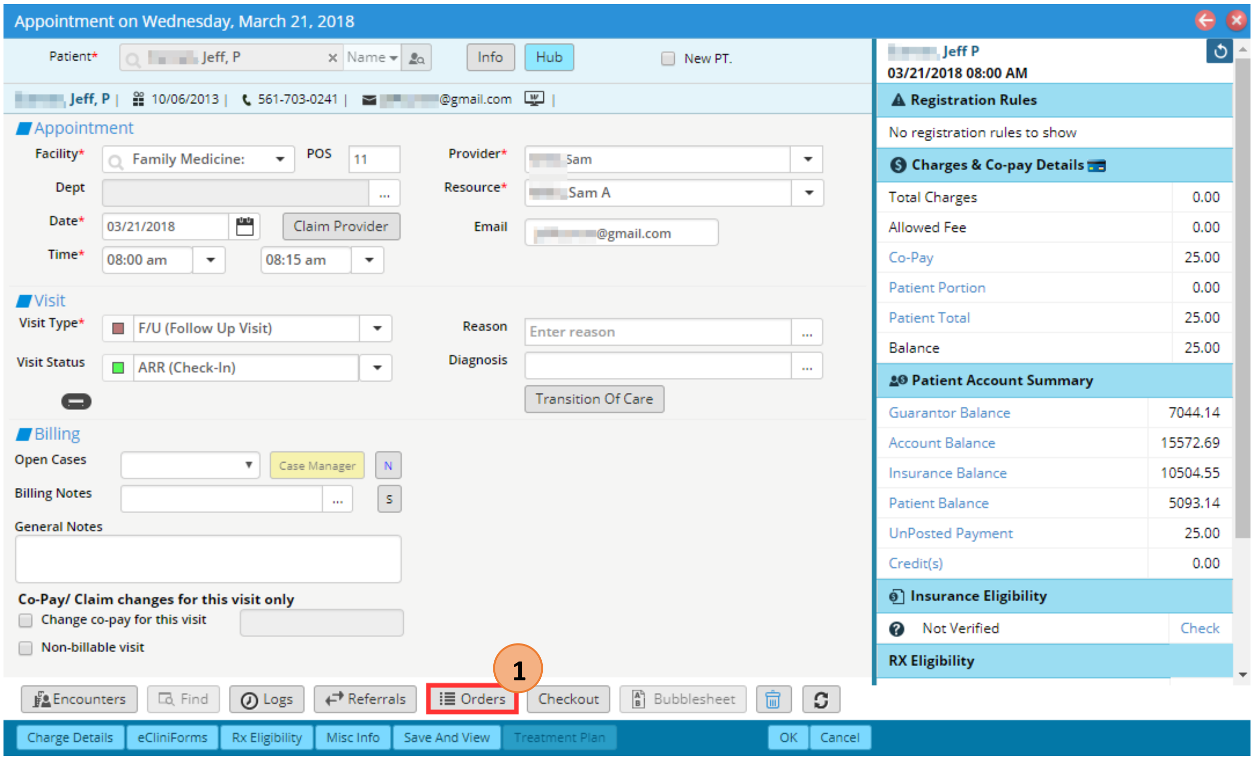
- The color of the appointment slot on the schedule will change to the corresponding color set for the ARR (Check-In) visit status.



Checking Out

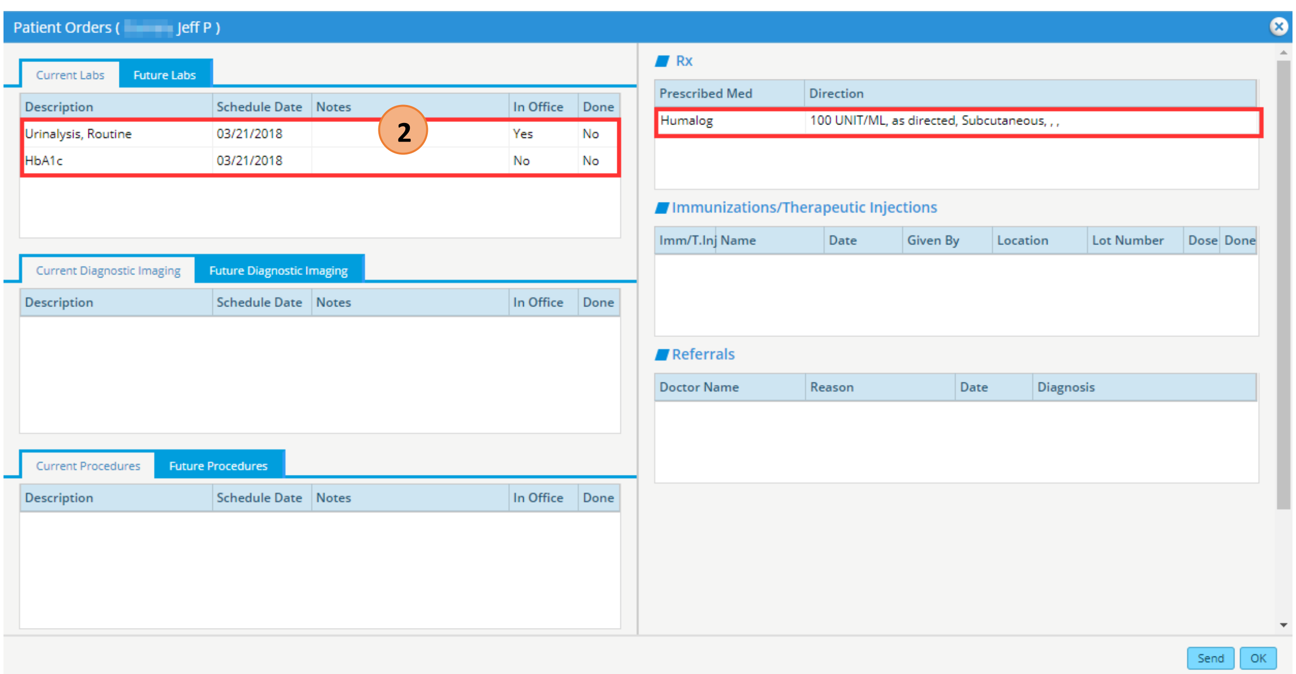
Check for Orders

1. Open the appointment screen and select 'Orders.'



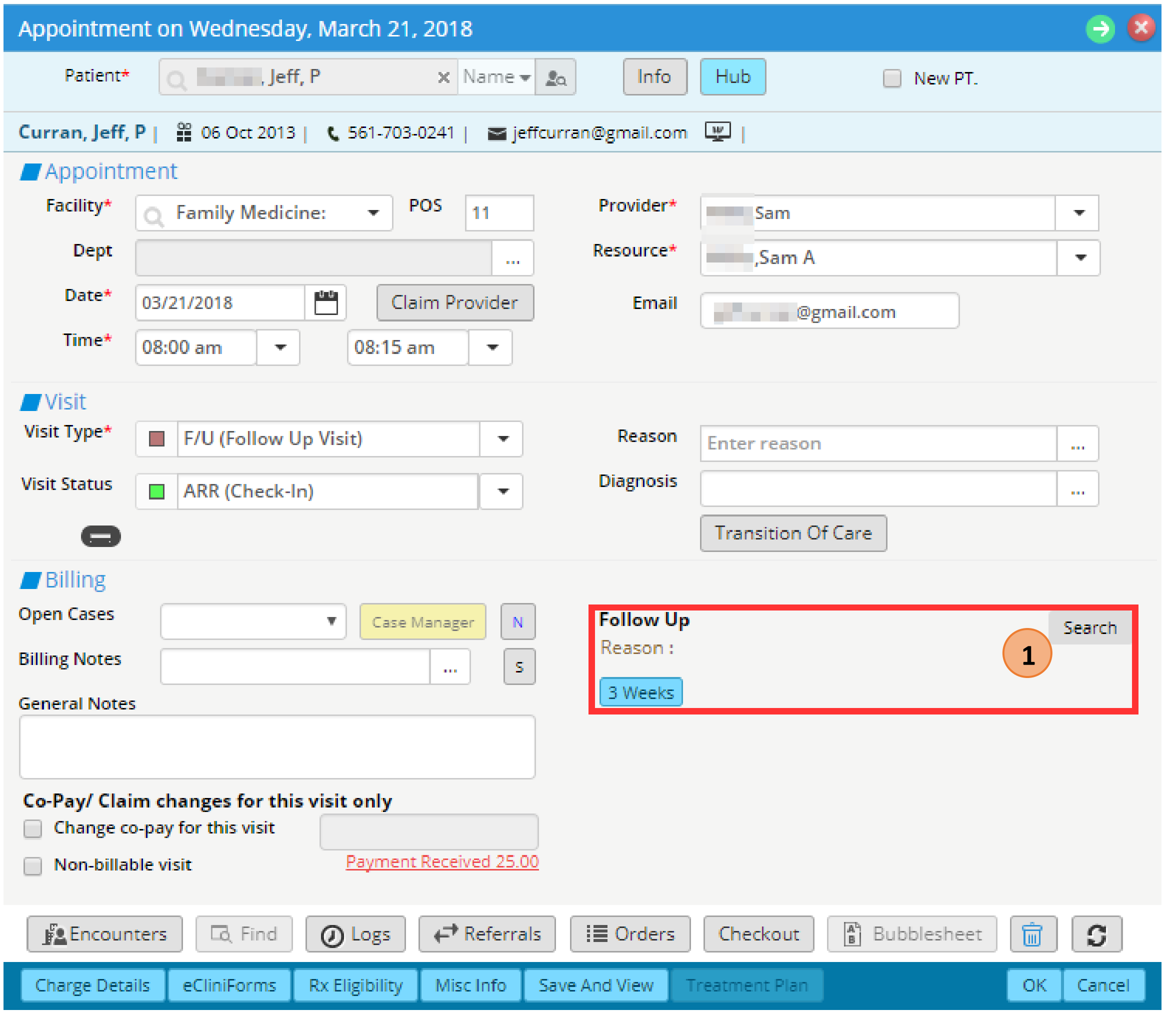
2. On the Patient Orders Screen, you will see all the orders requested by the provider.

3. Double-click on any order to enter any additional details. (appointment date, authorization number, etc.)

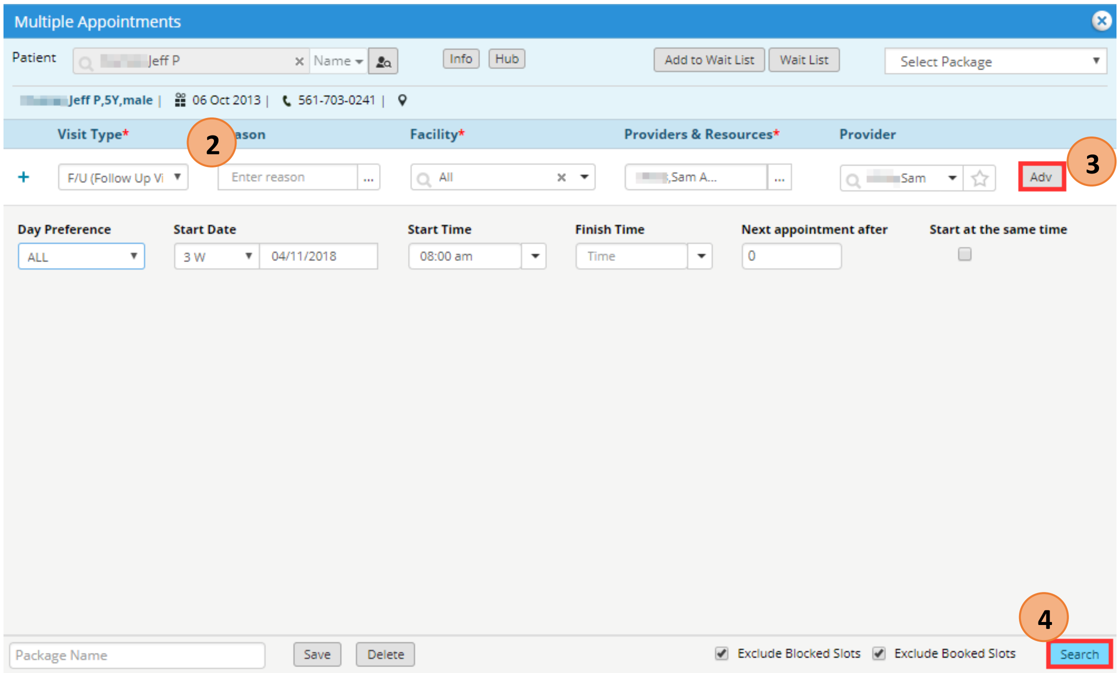


Search and Schedule Follow-up Appointments

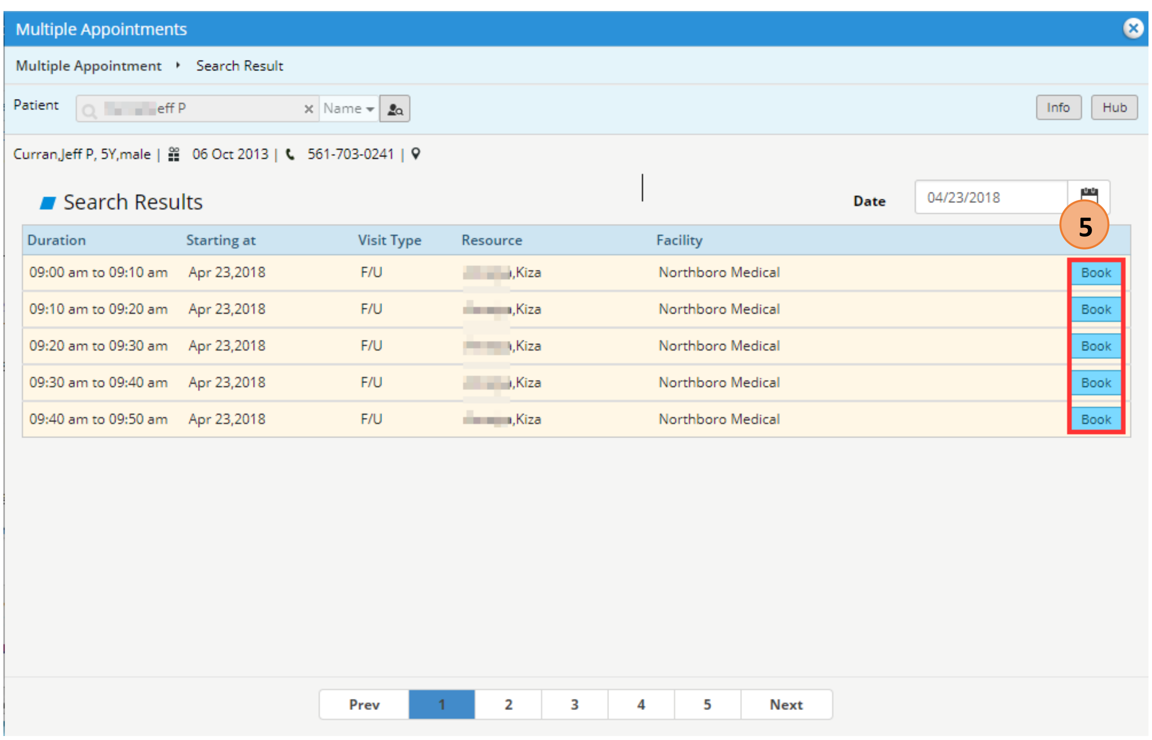
1. Double-click on the appointment slot to open the appointment and select 'Search.'



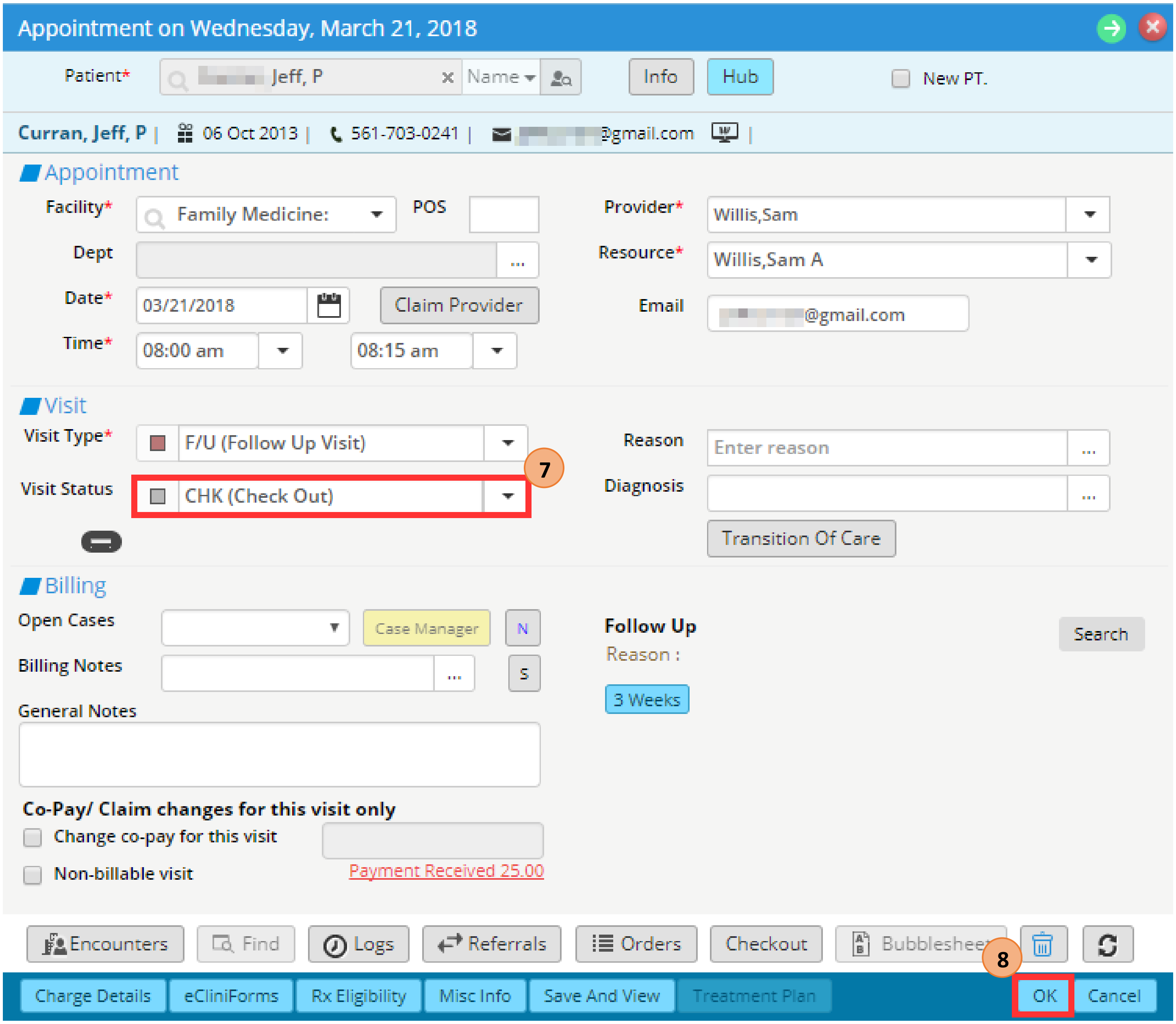
2. Select the Visit Type
3. Click on the "Adv" button to fill out additional information such as day preference, start date, etc.
4. Click Search.



5. Click on the 'Book' button to schedule the appointment.
6. Once the appointment is booked, a message will display stating 'Appointments created successfully!'



7. Change the status of the appointment from ARR (Check-In) to CHK (Check Out).
8. Click 'OK.'



Appendix A: Notices

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