

DHS Epic Optimization Newsletter



September 2022 Epic System Updates & Optimization

- Ambulatory Applications
- Inpatient Applications
- Ancillary Applications
- Access & Revenue Applications

In the Spotlight:



Helpful! documents for anyone who Schedules Appointments and Registers patients. Here are some general tips about using the different views in Book It.

Epic Book It Tips and Tricks tip sheet!

[Epic Book It Tips](#)

Registration Access Navigators tip sheet!

[Registration Access Navigators](#)

Ambulatory Applications

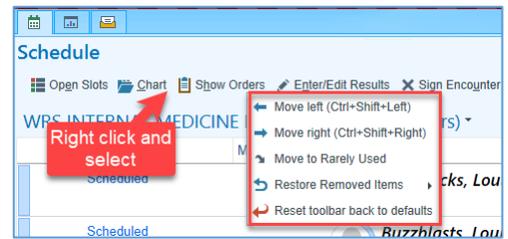
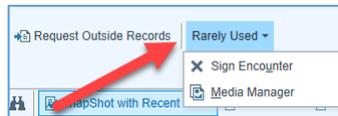
EpicCare Ambulatory

Customize MPS Toolbar

Now you can customize which speed buttons you have above the MPS (Multi-Provider Schedule). Hover over speed button, right-click to view options and left-click to select action.

- Move left
- Move right
- Move to Rarely User
- Restore Removed Items
- Reset toolbar back to defaults

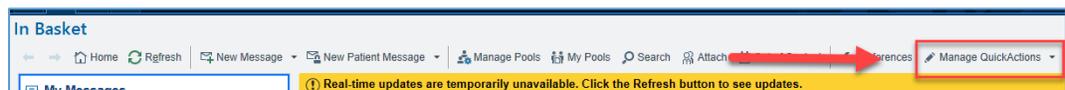
View moved item in Rarely Used section.



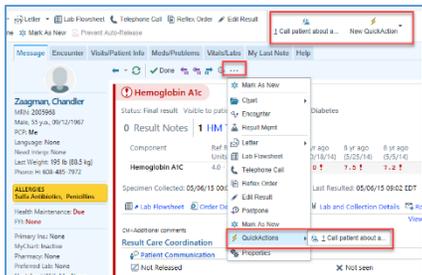
Create your own QuickActions

Use QuickActions to quickly follow up on routine messages.

QuickActions are available for routine letters, result notes, Notes, MyChart messages, and more.



For example, in your Results folder, you might have a QuickAction called Abnormal Lab Results that creates a result note using your standard text, routes it to your preferred recipients, and marks the message as Done in a single click.



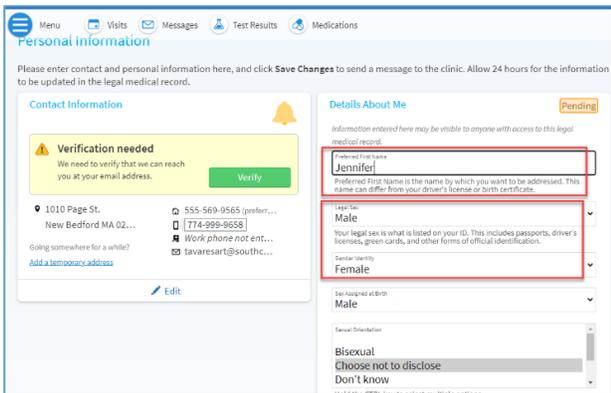
[Click to view the Create your Own QuickActions tip sheet](#)

MyChart

Patients can update SOGI (Sexual Orientation Gender Identity) in MyChart.

Users in the MyChart Administrator Pool will get an In Basket message in the “Pt Non-Clinical Update” folder and update the patient’s information. The changes will then be visible in hyperspace.

Patients can update SOGI information in MyChart



Inpatient Applications

ASAP (Emergency Room & Urgent Care)

Urgent Care:

New MDM Activity Tab

Urgent Care Provider: There is a new MDM activity tab that was added to your existing menu of activities when you are in the patient chart.

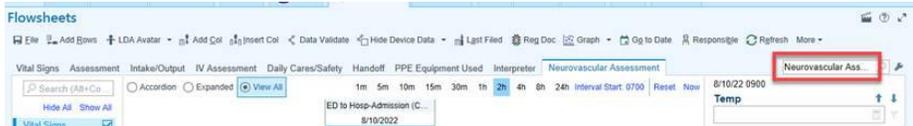
Tip Sheet: [Urgent Care MDM Documentation](#)

Clinical Documentation

New Flowsheet for Neurovascular Check

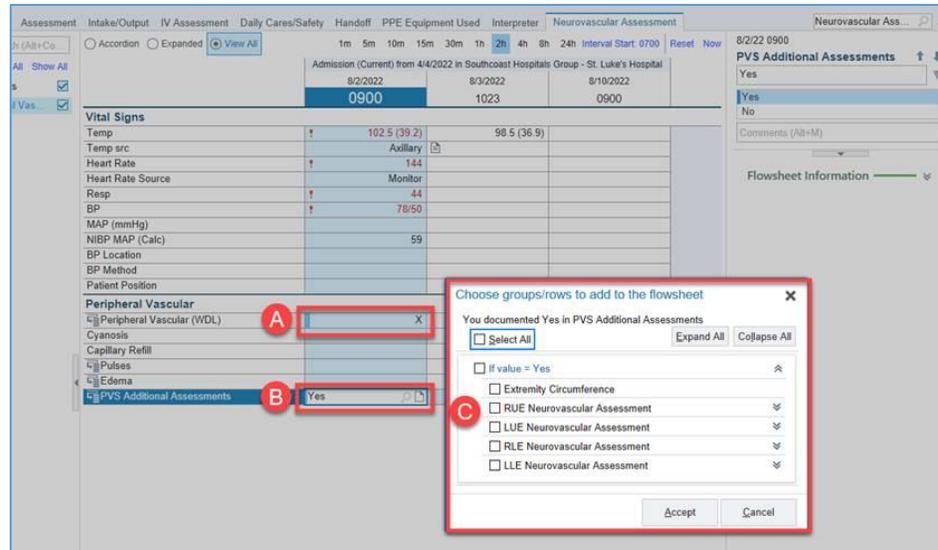
There is a new flowsheet to document neurovascular checks.

- The new flowsheet will be available by searching. You can search using any of the following and it will automatically pull in: NV, N/V, N/V Check, NV Check, Neurovascular Check, Neurovascular Assessment, N/V Assessment, NV Assessment

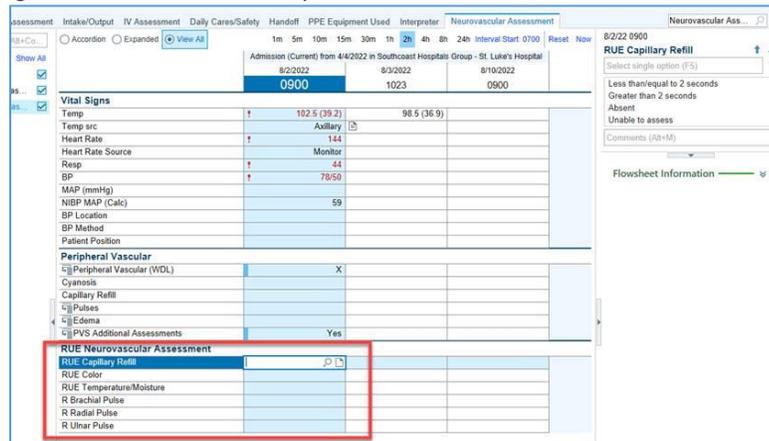


- If X is documented in the Peripheral Vascular (WDL) row (A), the PVS Additional Assessments row will become available (B).

3. Choosing Yes at the PVS Additional Assessments row will give you a pop up (C) to choose the assessment.



4. Checking off an assessment will pull it into the flowsheet and allow for documentation.



Inpatient Orders

Collecting SOGI Information – Pediatric Consideration Update

Pediatric Considerations:

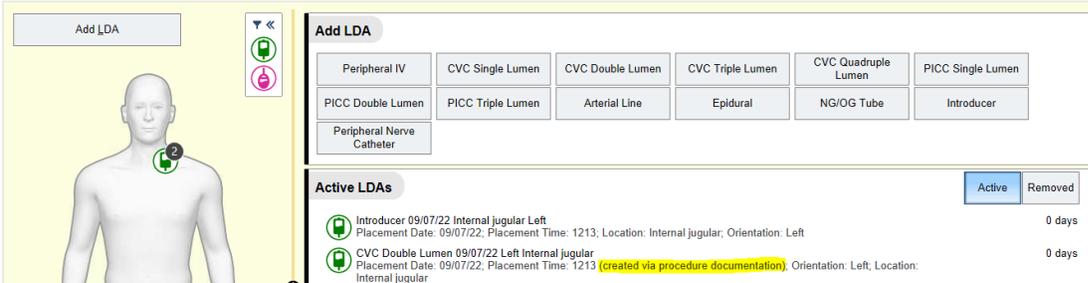
You can document SOGI information for children and adolescents. Asking about SOGI can launch important conversations about identity development, safety at home and school, social support, and sexual health. The National LGBTQIA+ Health Education Center recommends that you have these conversations with patients somewhere private without parents, guardians, or partners present, because the patient might not feel ready, or safe, disclosing this information in front of others. **It is also recommended to ask these questions on a regular basis for patients twelve (12) years of age and older**, such as during the annual wellness visit & to ask the patient if it is okay to document the information in the medical record.

View the revised tip sheet here: [Collecting SOGI Information](#)

OpTime
(Operating Room & Anesthesia)

Anesthesia: Introducer Documentation

Introducer will now display on the Active LDA list when documented in both the PAC Line and CVL Placement Px Note.



The screenshot shows a human torso with a green circle on the neck. To the right is a menu titled 'Add LDA' with options: Peripheral IV, CVC Single Lumen, CVC Double Lumen, CVC Triple Lumen, CVC Quadruple Lumen, PICC Single Lumen, PICC Double Lumen, PICC Triple Lumen, Arterial Line, Epidural, NG/OG Tube, and Introducer. Below this is a table of 'Active LDAs' with columns for 'Active' and 'Removed'.

Active	Removed
<ul style="list-style-type: none"> Introducer 09/07/22 Internal jugular Left Placement Date: 09/07/22, Placement Time: 1213, Location: Internal jugular, Orientation: Left 	0 days
<ul style="list-style-type: none"> CVC Double Lumen 09/07/22 Left Internal jugular Placement Date: 09/07/22, Placement Time: 1213 (created via procedure documentation), Orientation: Left, Location: Internal jugular 	0 days

TAVR Scheduling questions

When schedulers are booking this Cath Lab Procedure, they will not be able to place the case on the Snapboard until confirming with the OR Control Desk (CMH Only) that they have the available staff, as this procedure MAY need emergent surgical intervention.

[Scheduling TAVR Tipsheet](#)

Stork (Obstetrics)

Accidentally Discharging a Patient

If you accidentally discharge a patient, call Central Registration immediately to undo the event.
Do not readmit/arrive the patient.

Medication Management

Beacon
(Oncology)

New Protocols:

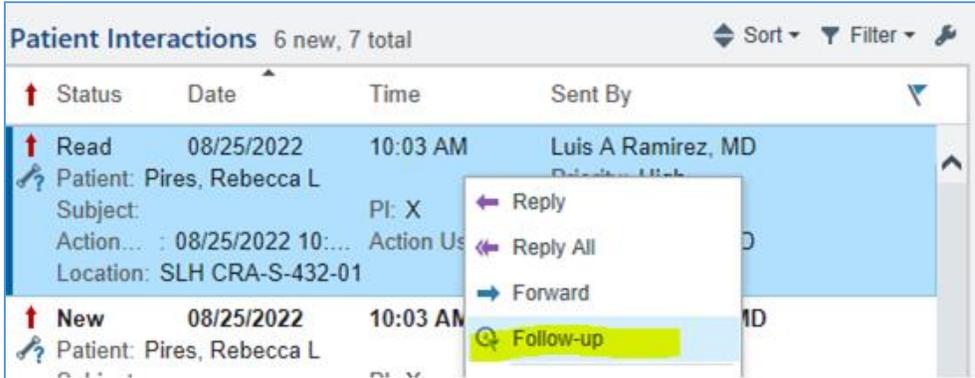
- OP UPPER GI NIVOLUMAB POST RESECTION - ADJUVANT (Q14/28 DAYS)
- OP LUNG NSC RAMUCIRUMAB / PEMBROLIZUMAB - ADVANCED (Q21 DAYS)
- OP MYELOMA ISATUXIMAB / CARFILZOMIB / DEXAMETHASONE - RELAPSED (Q28 DAYS)

Willow
(Inpatient Pharmacy)

Adding a Comment on an Interaction Message Received by the Pharmacist

The process for adding a comment to explain why you overrode an interaction message has changed as a result of the recent Epic upgrade. (Screenshots below.)

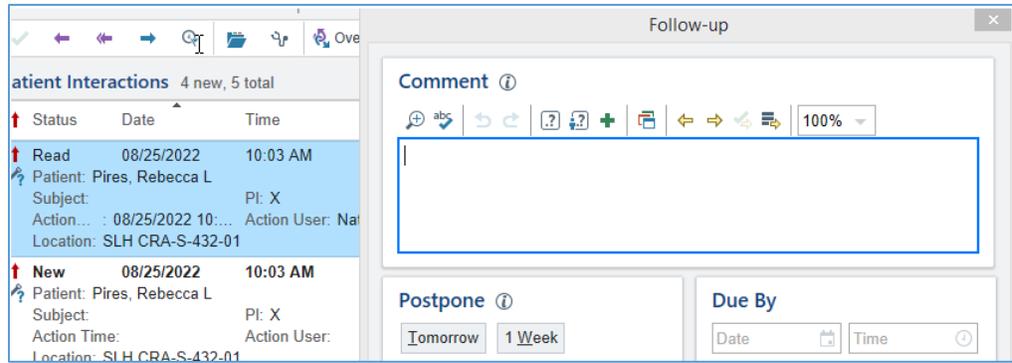
- The Pharmacist can **add a comment** to a Patient Interaction message by right-clicking on a highlighted message and selecting "Follow-up".



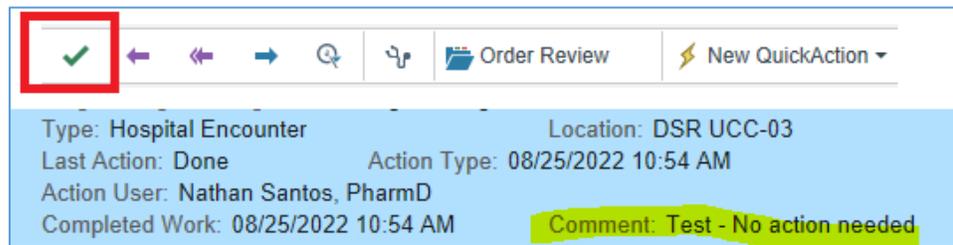
The screenshot shows a table of 'Patient Interactions' with columns for Status, Date, Time, and Sent By. A message from Luis A Ramirez, MD is highlighted in blue. A context menu is open over the message, showing options: Reply, Reply All, Forward, and Follow-up (highlighted in yellow).

Status	Date	Time	Sent By
Read	08/25/2022	10:03 AM	Luis A Ramirez, MD
New	08/25/2022	10:03 AM	MD

- Remarks are typed in the **Follow-up Comment** box.
Click Accept to complete the Follow-up action.



- To indicate the message as **Done**, click the **green check mark** on the toolbar.

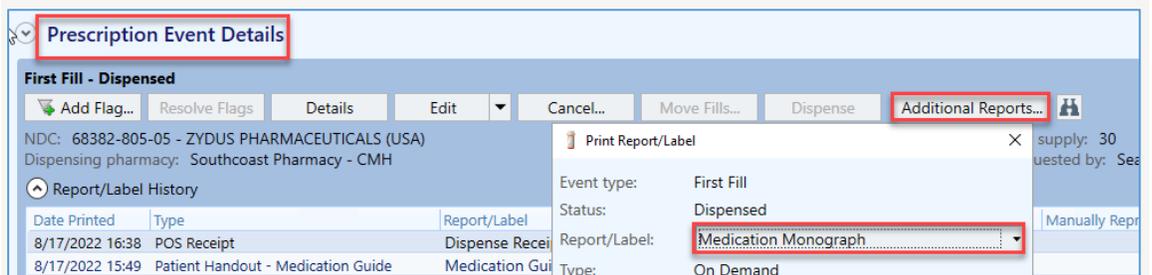


 **Willow**
(Ambulatory Pharmacy)

On Demand Medication Monograph

On Demand Medication Monograph:

Monographs do not automatically print with refills. If one is needed, there is an on-demand option within Willow Ambulatory to print a monograph with *any* fill. Under Prescription Event Details, Select Additional Reports, and from there select Medication Monograph from the dropdown menu.



Ancillary Applications

 **Beaker** (AP & CP lab)

Beaker AP-New Protocol

Small Intestine, Resection for Tumor Protocol
12 White Blocks
12 H&E Slides
CPT code 88309

Send Out Test Updates-

LAB2618 Strep Pneumo Antigen is no longer being offered by Quest Marlboro and has been deleted.

LAB1110 Vitamin K now has a new preferred specimen volume – 1.0 mL (previously 3 mL) and a new minimum specimen volume – 0.5 mL (formerly 1.5 mL). New acceptable alternate - **serum** (Green top NaHep is no longer an acceptable alternative).

 **Cupid** (Cardiology)

New workflow for Echo Techs using Enhancing Agents

Echo Techs can now document waste when using enhancement agents.
Tip Sheet: [Enhancing Agents for Echo](#)

 **Radiant**
(Radiology)

Radiology is now collecting payments

Radiology Front-desk Staff are now collecting Co-Payments.
Tip Sheet: [Collecting Copays](#)

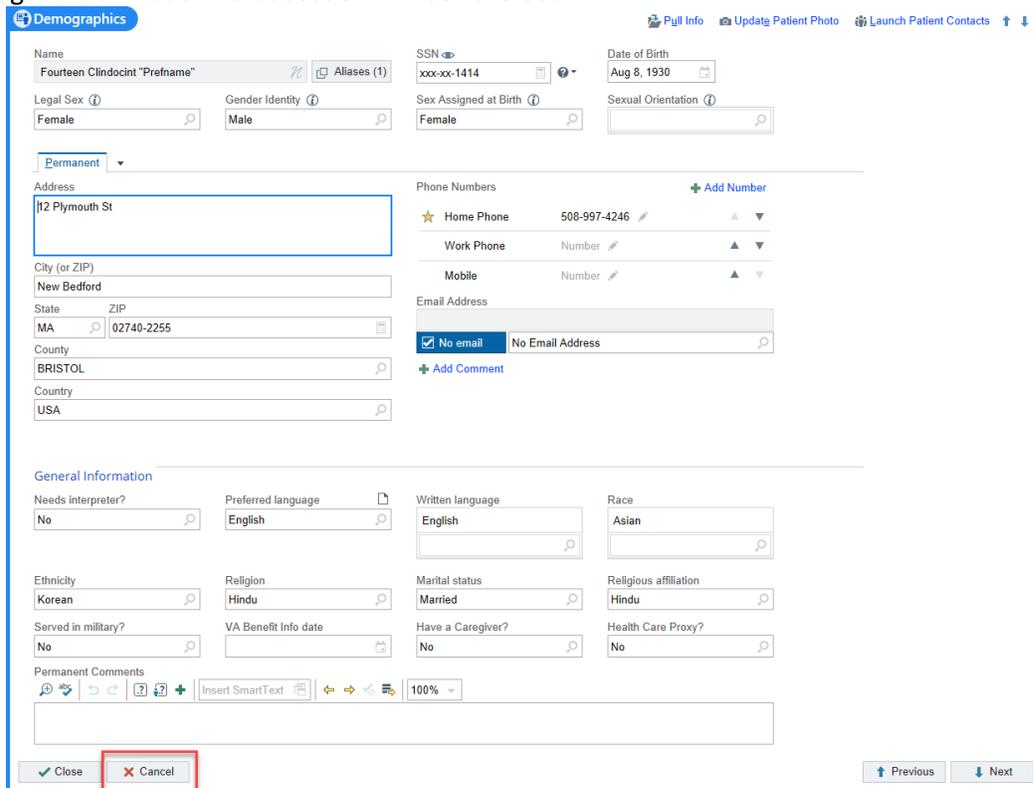
Access & Revenue Applications

 **ADT** (Admission, Discharge & Transfers)

While completing a patient’s registration using the new Access Navigators, if you make a mistake and wish to revert to your “pre-mistake” information, you can simply click “Cancel” at the bottom left-hand corner of the appropriate section.

For example, if I make a change to a patient’s Demographics but realize I am in the wrong patient record, before I leave the section of the Navigator, I can click “Cancel” and **all** of the changes that I made in that section will be reversed.

“Canceling” A Mistake in Registration



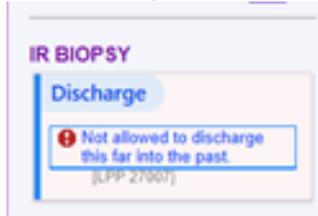
The screenshot shows the 'Demographics' section of a patient registration form. The form includes fields for Name, SSN, Date of Birth, Legal Sex, Gender Identity, Sex Assigned at Birth, Sexual Orientation, Address, City, State, ZIP, County, Country, Phone Numbers, and Email Address. Below these are 'General Information' fields for Needs interpreter, Preferred language, Written language, Race, Ethnicity, Religion, Marital status, Religious affiliation, Served in military, VA Benefit Info date, Have a Caregiver?, and Health Care Proxy?. At the bottom left, there are 'Close' and 'Cancel' buttons, with the 'Cancel' button highlighted by a red rectangular box. At the bottom right, there are 'Previous' and 'Next' navigation buttons.

Note: “Cancel” will only reverse the changes made in that one specific section. Once you move on from a section, that information is saved, and you would have to manually change the information.

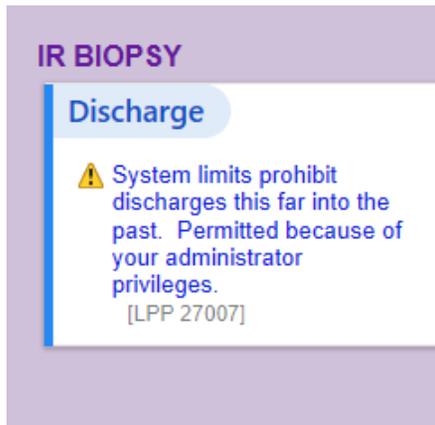
Patient Access Staff No Longer Have Date Restrictions for Discharges

In order for the 24/7 Reg Hotline staff to better assist with discharging patients, we have now removed the “3 day restriction” with discharging patients.

Previously, if a Patient Access user tried to discharge a patient more than 3 days ago, the user would not be able to because of a hard stop.



Now, in the same scenario, a Patient Access user will receive a warning alerting them that they’re discharging a patient more than 3 days in the past, but the user can bypass the warning and discharge the patient.



Billing (Hospital & Professional)

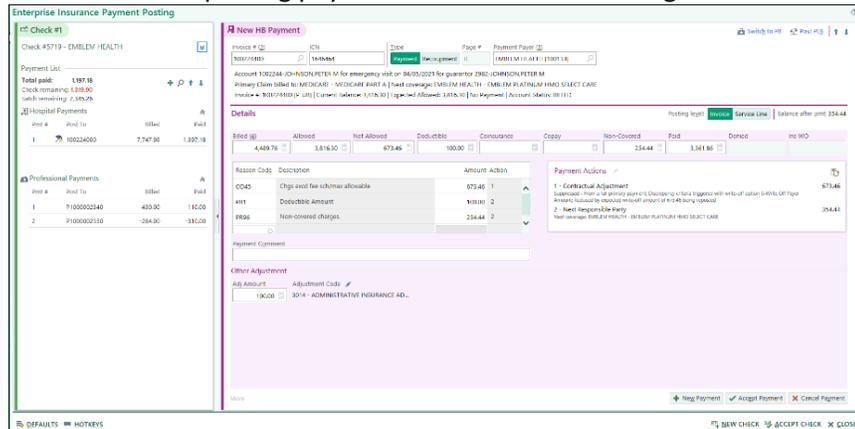
As of 8/18/2022, Enterprise Billing Insurance Payment Posting has a new look and feel. Several workflows when posting to Professional or Hospital invoices have been changed.

Review [Enterprise Payment Posting Tip Sheet](#)

Changes that apply when posting to Hospital Billing include:

- There is now a separate view for PLB payments.
- There is now an invoice-level payer entry field available, similar to the one available when posting payments to Professional Billing.

Enterprise Insurance Payment Posting Makeover



Changes that apply when posting to Professional Billing include:

- A more streamlined workflow for posting denial payments. If multiple lines on a claim are denied for the same reason, users can easily copy the entered denial codes to all subsequent lines.
- A more streamlined workflow for posting full recoupments, both with and without repayments.
- Ability to view and search for payments within a given check while posting a payment.
- Updated terminology. This includes renaming the New Detail option to New Payment.

To better align with Epic recommendations, payment posting automatically handles the scenario where a charge has both an insurance and self-pay balance, and insurance pays the entire outstanding balance. This is done by automatically transferring the self-pay balance to insurance and then posting

- the payment. Previously, if your organization calculated both an insurance and a self-pay portion on charges and Transfer Self-Pay to Insurance was not set to automatic, this would result in an over-posted insurance balance and an outstanding self-pay balance requiring either manual intervention or configuring an automatic credit activity to resolve the imbalance. This is an automatic change to existing behavior and the Transfer Self-Pay to Insurance setting at the procedure (I EAP 2026), plan (I EPP 891), or payer (I EPM 245) levels is no longer referenced.
- Selecting Post By and Post Method options are done using buttons.
- The option to Post to Clearing Account is more visible.

The screenshot displays the 'Enterprise Insurance Payment Posting' interface. The main window is titled 'New PB Payment' and shows the following details:

- Check #1:** Check #151515 - EMBLEM HEALTH. Payment Code: 0000 - INSURANCE PAYMENT. Check #151515. Reference #: 151515. Department: EHS BUSINESS OFFICE.
- Payment List:** Total paid: 0.00. Check remaining: 31,541.11. Health remaining: 31,541.11.
- Professional Payments:** Section for additional payment types.
- Post By:** Quotient/Patient. Post Method: Payment. Post Method buttons: Payment, Recoupment, All Charges, Outstanding, Leave Undistributed.
- Invoice #:** *1000002010. Service Date Range: 05/15/2021 - 05/15/2021. Payment Amount: 155.00. Payment Payer: EMBLEM HEALTH (100133).
- Claim:** Claim sent to invoice payer Emblem Health for patient Adams, Collin L on 7/16/2021. The claim has 284.00 outstanding.
- Service Lines Table:**

Line	Invoice	Service Date	Procedure	Billed	Mode	Allowed	Copy	Coins	Deductible	COB	Paid	Debit Adj	Credit Adj	TCN	Balance
1	F100000210	05/15/2021	99214 CPT...	155.00		155.00									155.00
1	F100000210	05/15/2021	99723 CPT...	129.00											129.00
Total				284.00		155.00									284.00
- Edi Service Line #1 - 99214 (CPT#) - PR OFFICE/OUTPATIENT ESTABLISHED MOD 30-39 MIN**
- Primary Payment Table:**

Mode (B)	Prov Bal	Allowed	Net Allowed	Copy	Coins	Deductible	COB	Paid (D)
Payment	155.00	155.00	0.00					
- Reason Code Table:**

Reason Code	Action	Amount	Adjustment Code
NRN	Line Comment	Amount	Revised Responsible Party
- Service Line Information:**
 - Invoice: F100000210 (Line 1) (Tx #1)
 - Order: ADAMS,COLLIN L (2079)
 - Phys: ADAMS,COLLIN L (174)
 - Location: EHS CENTRAL BILLING OFFICE (100...
 - COB:
 - Bill to: Nicholas Johnston, MD
 - Inv org: EMBLEM HEALTH, EMBLEM PLATI...
 - Mod: Self-Pay
 - Ins bill: 155.00
 - Self bill: 0.00
 - Health plan: 100133
 - City/Mod: 1 / -
 - Comment:

As of 8/18/22, the Charge Entry layout has been updated and improved to give it a cleaner look and feel. You can enter and review charges in a new layout that consolidates features and adds consistency across applications.

Hospital Charge Entry - Session: 75026

Session

Hospital Account	Patient	Guarantor	Cost Center
SMITH,ALEXANDER C [1002255]	SMITH,ALEXANDER C [E4172]	SMITH,ALEXANDER C [2988]	

Diagnoses

Code	Description	Qualifier
1 Z00.00	Encounter for general adult medical examinatio...	Active
2 S22.43XA	Multiple fractures of ribs, bilateral, initial encoun...	Active

Charges (3) Total: 1,699.00

Procedure	Description	Daily	Service Date	Diagnoses	Rev Code	Cost Center	Modifiers	Qty	Amount
1	32471101... HC X-RAY RIBS, CHEST 3+ VW - XR RIBS 2 VWS LT W/ CHEST ANTEROPOSTERIOR			1,2	0324 - RADIOLO...	10009 - EMH ME...		1	1,409.00

Line 1 3247110101- HC X-RAY RIBS, CHEST 3+ VW - XR RIBS 2 VWS LT W/ CHEST ANTEROPOSTERIOR

Additional Info | Medication | MEA | Client | Research | Institutional | Supply | Time & Date | Doc Providers | Authorization

Comment:

Procedure code override:

Implant:

HIPPS code:

HIPPS code description:

Visit:

Place of service:

HIPPS code type:

Duration of service (min):

Department:

GO TO - HOTKEYS CLEAR ACCEPT & NEW ACCEPT CANCEL

- Updated Session Section: The Session Details section of Charge Entry has been renamed to Session and now includes Patient and Guarantor fields. Note that the values in these fields cannot be modified and are there for reference. The Client field has been removed in favor of the more robust client actions available on the Client tab in the Charge Line section.

Hospital Billing Charge Entry Refresh

Session

Hospital Account	Patient	Guarantor	Cost Center
SMITH,ALEXANDER C [1002255]	SMITH,ALEXANDER C [E4172]	SMITH,ALEXANDER C [2988]	

Visit

Adm: 4/29/2021 CSN: 31210	Service Date	Service Provider	Billing Provider
	9/14/2021	LING, DANIEL [E1001]	LING, DANIEL [E1001]

Place of Service

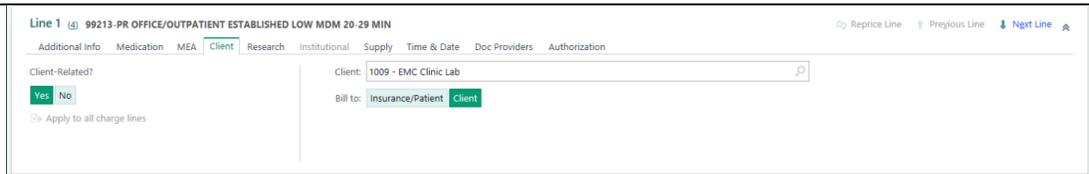
EHS HOSPITAL [10101]	Hospitalist Flag

- Updated Charges Section: The Charges section contains the same features as before, but it has received an updated look to match Charge Entry across billing applications. We've also added an icon column that indicates whether a charge is client or research related.

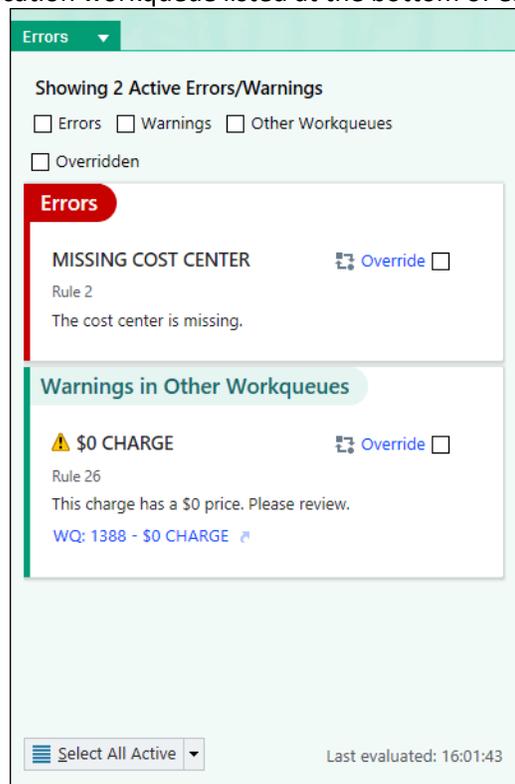
Charges (3) Total: 0.00

Procedure	Description	Daily	Service Date	Diagnoses	Rev Code	Cost Center	Modifiers	Qty	Amount
1	Client EMC Clinic Lab			1,2	0521 - FREE-STAL...	10100 - EHS UR...		1	0.00

- Updated Charge Line Section: We've reorganized how charge-specific information appears in the Charge Line section. By default, Additional Info, Medication, MEA, Client, Research, Institutional, Supply, Time & Date, Doc Providers, and Authorization tabs appear in this section. Each tab contains fields and options that were previously available from the Additional Info menu option. Some tabs become available when certain information is entered on the charge, such as a panel procedure enabling the Panel tab (available in the drop-down arrow).
 - As part of this change, Client and Research tabs replace the Research Correct and Client Correct windows.



- Updated Taskbar: The taskbar has been moved to the bottom of Charge Entry so that it is aligned with the Clear, Accept & New, Accept, and Cancel buttons. The Charge button has been removed because charge line information now appears in the Charge Line section. Additionally, a wrench icon appears on the taskbar to give users the option of customizing the tabs that appear in the Charge Line section and the order in which they appear.
- Updated Charge Errors Sidebar: The Charge Error sidebar has an updated look to improve clarity and consistency.
 - Filter checkboxes appear in place of the option to collapse the Errors or Warning sections.
 - Errors and warnings from other workqueues also appear in the sidebar, with the application workqueue listed at the bottom of each card.



A Refresh for Charge Capture

As of 8/18/22, Charge Capture has a new look, with some usability updates designed to help users easily find and file charges.

- Applying Filters: The filters on the charge list now use buttons to toggle between the personal filter and no filter. If the user doesn't want to use any filter, they can clear the toggle buttons instead of clicking No Filter like they did in the past.

My Charges



- Charge Edit and Diagnosis Association: To make better use of wide-screen monitors, the section has three columns instead of two.

Charges to be Accepted upon Closing the Section

Accept Charges

Description	Code	Dx	Service Date	Service Provider	Modifiers	Quantity				
Breathing capacity test [94010 (CPT®)]										
Service Date	Department	Place of Service								
5/18/2021	EMC FAMILY MEDICINE [10501101]	EHS CLINIC [10501]								
Service Provider	Billing Provider	Referring Provider								
Physician Family Medicine, MD [E1...]	Physician Family Medicine, MD [E1...]									
Quantity	1									
Diagnosis										
Search for diagnosis <input type="text"/> <input type="button" value="+ Add"/> <input type="button" value="Visit Diagnoses"/> <input type="button" value="Problems"/>										
<table border="1"> <thead> <tr> <th>Diagnosis</th> <th>Qualifier</th> </tr> </thead> <tbody> <tr> <td><input checked="" type="checkbox"/> 1. Moderate persistent asthma without complication [J45.40 (ICD-10-CM)]</td> <td>--</td> </tr> </tbody> </table>							Diagnosis	Qualifier	<input checked="" type="checkbox"/> 1. Moderate persistent asthma without complication [J45.40 (ICD-10-CM)]	--
Diagnosis	Qualifier									
<input checked="" type="checkbox"/> 1. Moderate persistent asthma without complication [J45.40 (ICD-10-CM)]	--									
Additional Charge Details										
						<input checked="" type="button" value="Accept"/> <input type="button" value="Cancel"/>				

- The Charge Diagnoses, Visit Dx, and Non-Hosp Prob List tabs have been replaced by menus that clinicians can use to select diagnoses. If a user prefers buttons instead of menus, they can select that option.

Result, Three - Charge Capture Diagnosis Association for Selected Charges

Charge diagnoses

Visit diagnoses

Problem list

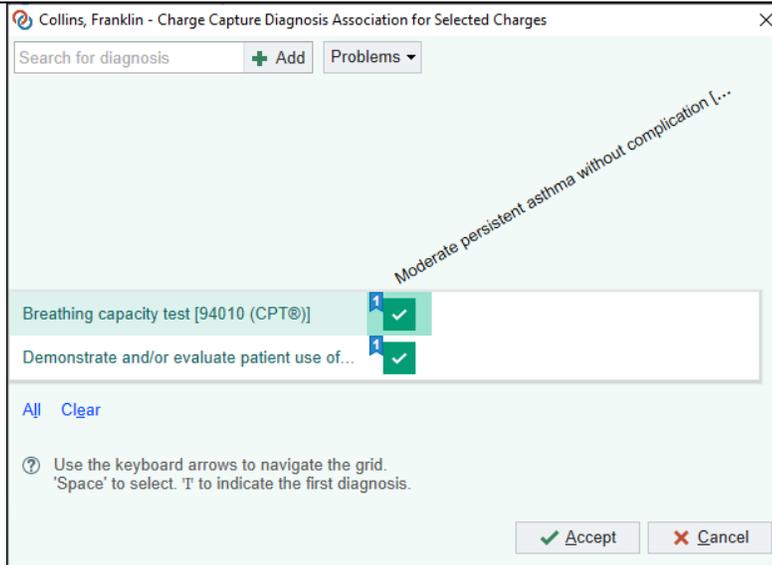
Non-hospital problem list

12034 - HC LAYR CLOS WND TRUNK,AR...

1 Contact lens stuck [H57.89 (ICD-10-CM)]

Use the keyboard arrows to navigate the grid.
'Space' to select. 'T' to indicate the first diagnosis.

- Similarly, we've updated the Diagnosis Association window that opens from the Charge Capture activity to use menus for problems instead of tabs.



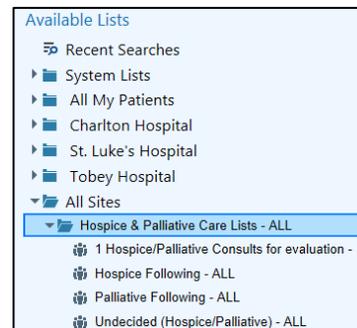
- Level of Service: If charging users document facility charges or physician level of service charges in Charge Capture, you might notice that the section has a slightly updated look and feel. While the section behaves in the same way as before, you might notice the following changes:
 - Filed facility charges and physician level of service charges now appear with all other charges in the accepted charges list.
 - If users have set the Preference list selection style user setting to use check boxes or if the navigator configuration record has Preference List Selection Mode set to Checkbox Selection, charges in the Facility Charge and Physician LOS Charge sections continue to appear as buttons. Check boxes imply that users can select multiple charges, which is not appropriate for these level of service charges.
- Accepting Charges: Previously, the system tried to accept charges automatically when a user switched to another tab in the encounter workspace or another activity. Now, these charges are not accepted automatically, so users can switch to another tab and return to Charge Capture without filing new charges.

VNA & Home Health Billing

VNA

VNA NPs and GIP RNs have the ability to work through Patient Lists in Hyperspace. This is to ensure a proper and time efficient workflow is happening for hospital patients needing palliative or hospice care. The lists are broken down both by hospital site, and an overall global list.

Patient Lists Now Live for Hospice and Palliative Patients



[Get the tipsheet here.](#)