KEY TERMS

access levels
Auto Log Off
backing up
chart
chief complaint
dashboard
database
disaster recovery
  plan
knowledge base
Medisoft Clinical
Medisoft Clinical
  Patient Records
  (MCPR)
Medisoft Network
  Professional
  (MNP)
park
password
restoring
user name

Introduction to Medisoft Clinical

3.1 List the practice management and electronic health record applications in Medisoft Clinical.

3.2 Discuss three security features in Medisoft Clinical that protect patients' health information.

3.3 List the menus in Medisoft Clinical Patient Records.

3.4 List the menus in Medisoft Network Professional.

3.5 Describe how pre-encounter tasks are completed in Medisoft Clinical.

3.6 Describe how encounter tasks are completed in Medisoft Clinical.

3.7 Describe how post-encounter tasks are completed in Medisoft Clinical.

3.8 Explain how to create and restore backup files in Medisoft Clinical.

3.9 Discuss the types of help available in Medisoft Clinical.

Reason to Worry?

Today the staff is meeting with Tiffany Patel, the consultant who is helping the Family Care Clinic make a smooth transition from paper records to electronic records. A major portion of the meeting is devoted to understanding the impact of the change on office workflow—the order in which tasks are completed. Ms. Patel explains that workflow in an electronic office differs from workflow in a paper-based office. She provides several examples. "When you have an integrated PM and EHR, you no longer need paper encounter forms, or superbills," she explains. "Also, there is no need to enter office visit charges manually, since the charges flow electronically from the EHR to the PM." As Ms. Patel continued to describe some of the upcoming changes, Joseph Sanchez, the practice's coder, and Chris Yakamoto, the billing specialist, begin sending text messages back and forth. "With all the changes, u think we'll still have jobs in 6 months?," Chris wrote. Joseph replied, "Not sure. Have 2 wait & see I guess."

What do you think made Chris and Joseph nervous about their job security? As you read this chapter, think about how the jobs of coders and billing specialists will be different in an office with an integrated PM/EHR.

WHEN YOU FINISH THIS CHAPTER, YOU WILL ALSO BE ABLE TO USE MEDISOFT CLINICAL TO:

1. Use a menu command to open a patient chart.
2. Use a toolbar button to open a patient chart.
3. Use a menu command to view charges and payments.
4. Use a toolbar button to view charges and payments.
5. Back up files.
6. Restore files.
7. Access Medisoft Help.

SOFTWARE SKILLS

3.1 Medisoft Clinical: A Practice Management/Electronic Health Record Program

Medisoft Clinical an integrated PM/EHR

Medisoft Network Professional (MNP) practice management application within Medisoft Clinical

Medisoft Clinical Patient Records (MCPR) electronic health record application within Medisoft Clinical

user name name that an individual uses for identification purposes when logging onto a computer or an application

password confidential authentication information

Medisoft Clinical is a practice management and electronic health record program for physician practices. The program is widely used in medical practices throughout the United States. Most of the concepts and techniques used in operating Medisoft Clinical are similar to those in other PM/EHR programs. Once you are familiar with Medisoft Clinical, you should be able to transfer many skills taught in this book to other programs. Throughout this text/workbook, we refer to the practice management application as **Medisoft Network Professional (MNP)** and to the electronic health record application as **Medisoft Clinical Patient Records (MCPR).**

This chapter begins with an overview of security features in Medisoft Clinical, and then introduces the practice management and electronic health record applications. Finally, the chapter describes how these applications are used to accomplish the tasks in the medical documentation and billing cycle, which you read about in Chapter 1.

3.2 Security Features in Medisoft Clinical

Medisoft Clinical has a number of built-in security features to ensure compliance with the HIPAA and HITECH privacy and security regulations.

User Names and Passwords

In order to log in to Medisoft Clinical, an individual must have a **user name** and a **password.** The use of user names and passwords prevents unauthorized access to the program, safeguards critical patient information, and protects patient confidentiality. As passwords are entered, the characters are replaced with asterisks (*) on the screen so there is no chance that someone will see the actual password characters. The system may be set up to limit the number of log-in attempts. If the number of unsuccessful attempts exceeds the number permitted, the user will not be allowed to access the system for a period of time, or in some cases, without a system administrator's intervention. The Medisoft Clinical Patient Records Sign In screen is illustrated in Figure 3.1.

Requiring people to log in limits access to the program to those who have been assigned log-ins, and also allows the actions of users within the program to be tracked through an audit report. The audit function can be used to track changes made in the program as well as identify those who made the changes.

The Login/Password Management dialog box assists in the management of passwords and log-in attempts (see Figure 3.2). The program can be configured to control the following aspects of password management:
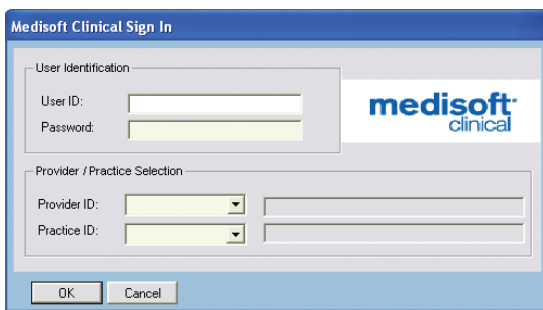
Figure 3.1 Medisoft Clinical Patient Records Sign In Screen

Renewal Interval Indicates how frequently users must change their passwords, in this case every ninety days.

Reuse Period Indicates how long users must wait until they can reuse their last password. Here it is set so that they cannot select the same password for a period of thirty days.

Minimum Characters Indicates the minimum number of characters allowable for a password. In this case, passwords must be at least eight characters in length.

Figure 3.2 Medisoft Network Professional Login/Password Management Dialog Box

Maximum Characters Indicates the maximum number of characters allowable for a password. In this case, passwords must be no more than fifteen characters in length.

Require Alphanumeric When this box is checked, a password must contain at least one number and at least one letter.

Maximum Allowed Attempts Indicates how many unsuccessful log-in attempts may be made before a user is locked out of the program. Here a user is allowed three log-in attempts. After the third failed log-in attempt, the user is locked out of the program.

Account Disable Period Users are locked out of the program for a specified period of time when the maximum number of log-in attempts has been exceeded.

Access Levels

Access levels define which areas of the program a user can view, and whether the user can only view the information or can also add, edit, or delete it. The program can be set up with a number of access levels for different positions in the office, such as receptionist, physician, nurse, medical assistant, and billing specialist. The program can also specify whether a user has to enter a password to access certain areas of the program. In most offices, access levels correspond to the user's job function on a need-to-know basis. If the user needs to know the information to perform tasks associated with the position, access is granted. If the information is not relevant to the user's job function, access may be denied. For example, a staff member responsible for scheduling may not be able to view a patient's laboratory test results. Likewise, a user responsible for following up on insurance claims may be able to view visit documentation in the patient chart, but not add, edit, or delete information. In Figure 3.3, the first column lists specific areas within the program, and the remaining columns represent the allowed actions for a user: Access, New, Edit, View, Del (delete), Pswd (password required). Access

access levels security option that determines the areas of the program a user can access, and whether the user has rights to enter or edit data
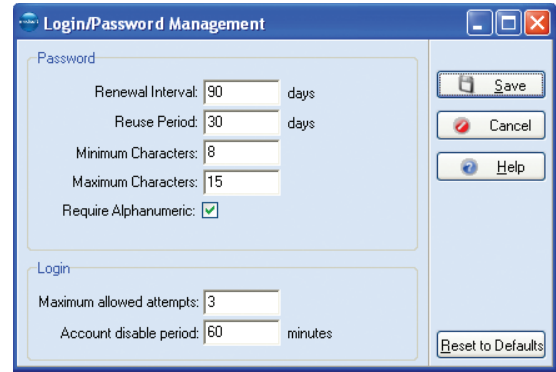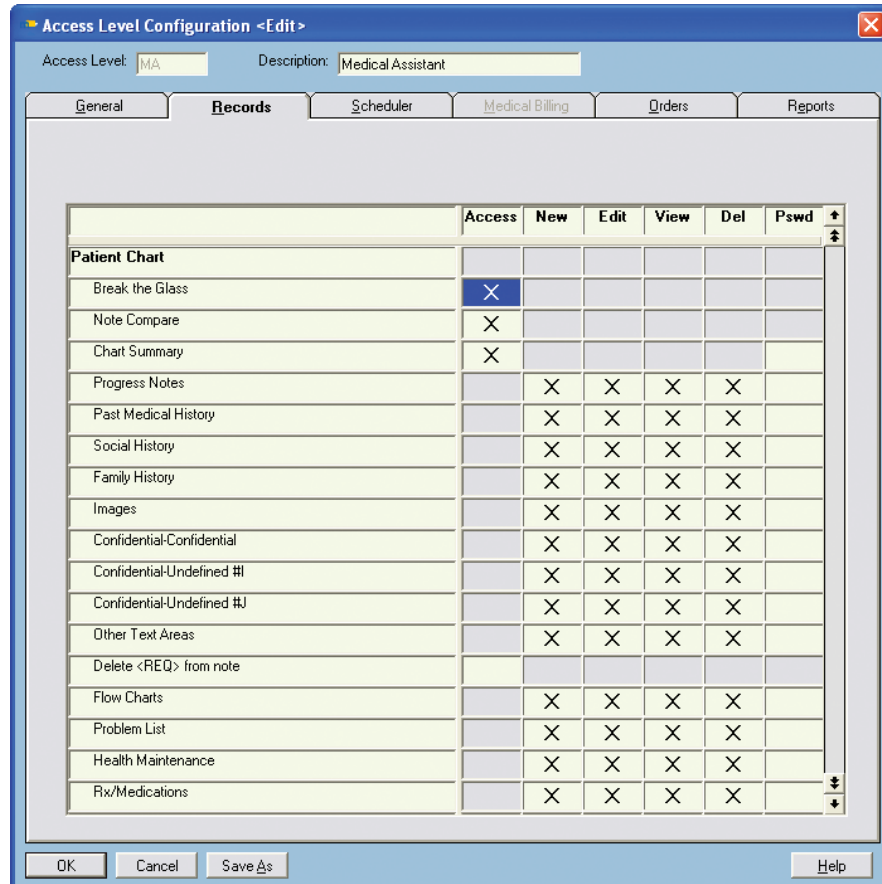
Both Medisoft Clinical applications contain features that are designed to protect the privacy of patient information. When would it be an advantage for a computer to go into Park? Auto Log Off? When would it be a disadvantage to use software with these features?

Figure 3.3 Screen Showing the Areas of MCPR That a Medical Assistant Can Access, Edit, or View

levels play a major role in ensuring the security and confidentiality of patient records in a practice.

The Park Feature and Auto Log Off

park privacy and security feature in MCPR that allows a user to leave a workstation for a brief time without having to exit the program

Auto Log Off feature of MNP that automatically logs a user out of the program after a period of inactivity

The privacy and security feature in MCPR known as **park** allows a user to leave a workstation for a brief time without having to exit the program. When a workstation is parked, it cannot be accessed without reentering a valid operator's user name and password. If someone were to walk by and see the screen while the user was away from the computer, he or she would see the screen illustrated in Figure 3.4 rather than patient data.

The **Auto Log Off** feature in MNP performs a similar function. If no activity is detected for a specified number of minutes, the program automatically logs out the user.

Figure 3.4 MCPR Screen in Park Mode
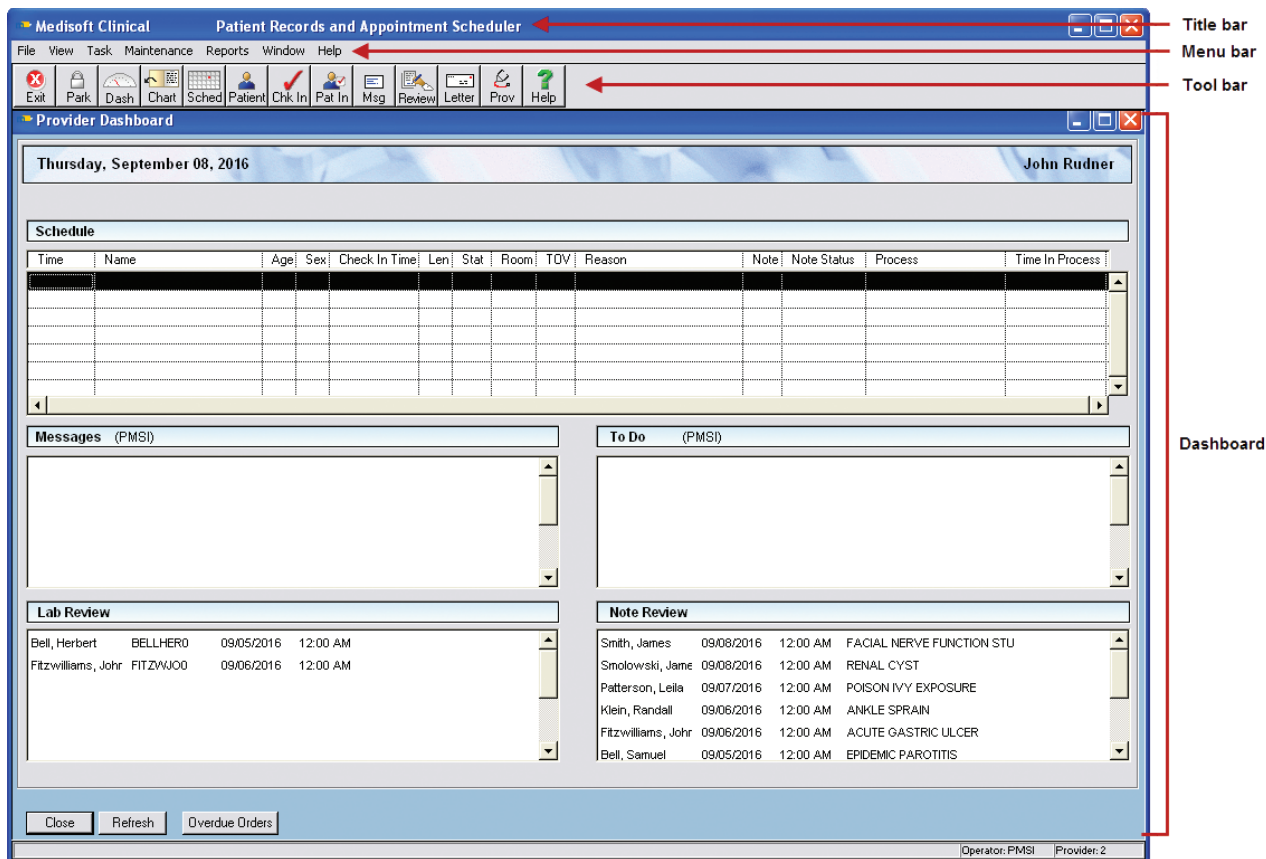
3.3 Medisoft Clinical Patient Records

Medisoft Clinical Patient Records (MCPR) is the electronic health record component of Medisoft Clinical. The program stores patient information in a number of databases. A **database** is a collection of related pieces of information. Each section of a patient chart is represented by a yellow folder, similar to folders used in a paper-based office. The term **chart** refers to a patient's medical record. Information about the patient is entered in the appropriate folder.

database a collection of related bits of information

chart folder that contains all records pertaining to a patient

Practices can customize the patient chart to include the folders that are relevant to their particular practice. Commonly used folders include:

- Progress notes
- Past medical history
- Social history
- Family history
- Consults
- Discharge summary
- Orders
- Messages
- Problem list (including diagnosis)
- Health maintenance
- Rx/medications
- Vital signs
- Laboratory data
- Images
- X-ray
- ECG
- Pathology

Figure 3.5   Main Medisoft Clinical Patient Records Window

Exploring the Main Medisoft Clinical Patient Records Window

The main screen, pictured in Figure 3.5, contains a number of different features.

Title Bar   The title bar states the title of the program.

Menu Bar   The menu bar contains the menus of MCPR commands. The names of the standard menu items are File, View, Task, Maintenance, Reports, Window, and Help. The menus and commands available may change depending on the task that is being performed. For example, the Maintenance menu will not appear when working in the patient chart because maintenance tasks cannot be performed while a patient chart is open.

Toolbar   Located below the menu bar, the toolbar provides instant access to important MCPR functions (see Table 3.1). Clicking a button activates the related function in the program. The buttons on the toolbar vary depending on which function is in use.

The Dashboard

dashboard a panel in MCPR that offers providers a convenient view of important information

The main screen also displays the provider dashboard. The **dashboard** offers providers a convenient view of important information,

TABLE 3.1	Icons in the Medisoft Clinical Patient Records Toolbar	
Button	**Button Name**	**Activity**
Exit	Exit	Closes the charts and exits the program.
Park	Park	Protects the system from other viewers by locking the screen, requiring the next user to log in with a user name and password.
Dash	Dash	Opens the dashboard if it is not already open.
Chart	Chart	Opens a chart. More than one chart can be open at a time.
Sched	Sched	Opens the Appointment Scheduler program.
Patient	Patient	Opens a patient's registration screens for access to demographic information.
Chk In	Chk In	Checks in patients and tracks them through the visit.
Pat In	Pat In	Displays a patient's demographic information.
Msg	Msg	Enables staff to send messages (e-mail) to other staff members.
Review	Review	Displays the provider's review bin, which is similar to an in basket. All unsigned items go here automatically, including lab results, progress notes, and other incoming transmissions, to wait for the provider to review them.
Letter	Letter	Enables the writing of letters about specific patients and sends them to consulting physicians.
Prov	Prov	Changes the display to another provider or clinic.
Help	Help	Provides access to help features.

including messages, a to-do list, unsigned lab orders, notes, and more. Look at Figure 3.5 to view the provider dashboard in MCPR.

The main areas of the dashboard are Schedule, Messages, Lab Review, To Do. and Note Review. To access any of these features

directly from the desktop, you would click the title of the section, such as Messages or To Do.

Schedule

The schedule area presents the provider's daily schedule with appointment time, patient name, length of visit, reasons for visit, whether the patient has checked in, and, if so, which room the patient is in.

Messages

The Messages section lists electronic messages for the provider. Unread messages appear in bold type. Information provided in this area includes the message priority (0 to 9), the sender of the message, the subject, and the date the message was received.

Lab Review

The Lab Review area presents lab results that the current provider needs to review. Information includes patient name, patient identification number, date of the lab work, and time the results were sent.

To Do

The To Do section of the dashboard lists action items for the provider, including the date the item was added to the list, the priority assigned to the task (1 to 9), the patient name, the patient identification number, and the subject of the item.

Note Review

This area presents notes for the provider to review, and contains a patient name, the date and time of the note, and the note's subject.

EXERCISE 3.1

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STARTING MEDISOFT CLINICAL PATIENT RECORDS AND LOGGING IN

Start the Medisoft Clinical Patient Records application and log in.

1. Click Start > All Programs > Medisoft Clinical - Client > Medisoft Clinical Client. The Medisoft Clinical Sign In window appears.
2. Enter **medasst** in the User ID field. Notice that the Practice ID field was completed by the program.
3. Enter **master1$** in the Password field.
4. Click the drop-down triangle in the Provider ID field. The Provider Select dialog box opens.
5. Click the second line to select John Rudner, MD and click the OK button. You are returned to the Sign In screen.
6. Click OK. A Disclaimer screen appears. Click OK again.
7. The main Medisoft Clinical Patient Records window is displayed.

✅ **You have completed Exercise 3.1**

USING A MENU COMMAND TO OPEN A PATIENT CHART

Practice selecting a menu command to open a patient chart.

1. Click the File menu, and select Open Chart. The Patient Lookup dialog box is displayed.
2. Click the Lookup button. A list of patients appears.
3. Click the line that contains the entry for Janine Bell. The line is blackened.
4. Click the OK button. Janine Bell's chart opens.
5. Click Close Chart on the File menu to close the patient's chart.

☑ **You have completed Exercise 3.2**

USING A TOOLBAR BUTTON TO OPEN A PATIENT CHART

Practice using a toolbar button to open a patient chart.

1. Click the Chart button on the toolbar. The Patient Lookup dialog box is displayed.
2. Click the Lookup button. A list of patients appears.
3. Click the line that contains the entry for Janine Bell. The line is blackened.
4. Click the OK button. Janine Bell's chart opens.
5. Click the Close button on the toolbar to close the patient's chart.

☑ **You have completed Exercise 3.3**

3.4 Medisoft Network Professional

Medisoft Network Professional (MNP) is the Medisoft Clinical application used for patient accounting. MNP also includes Office Hours, a scheduling program. Physician practices use MNP to:

- Schedule appointments
- Register patients
- Enter charges
- Create insurance claims
- Post payments

- Create statements
- Follow up on accounts
- Create reports

Exploring the Main Medisoft Network Professional Window

The main window in Medisoft Network Professional contains the title bar, menu bar, and toolbar (see Figure 3.6).

Title Bar The title bar states the title of the program.

Menu Bar Medisoft Network Professional offers choices of actions through a series of menus. Commands are issued by clicking options on the menus or by clicking shortcut buttons on the toolbar. The menu bar lists the names of the menus in Medisoft Network Professional: File, Edit, Activities, Lists, Reports, Tools, Window, and Help. Beneath each menu name is a pull-down menu with one or more options.

Toolbar Located below the menu bar, the toolbar contains twenty-six buttons with icons that represent the most common activities performed in MNP (refer to Figure 3.6). These buttons are shortcuts for frequently used menu commands. When you click a
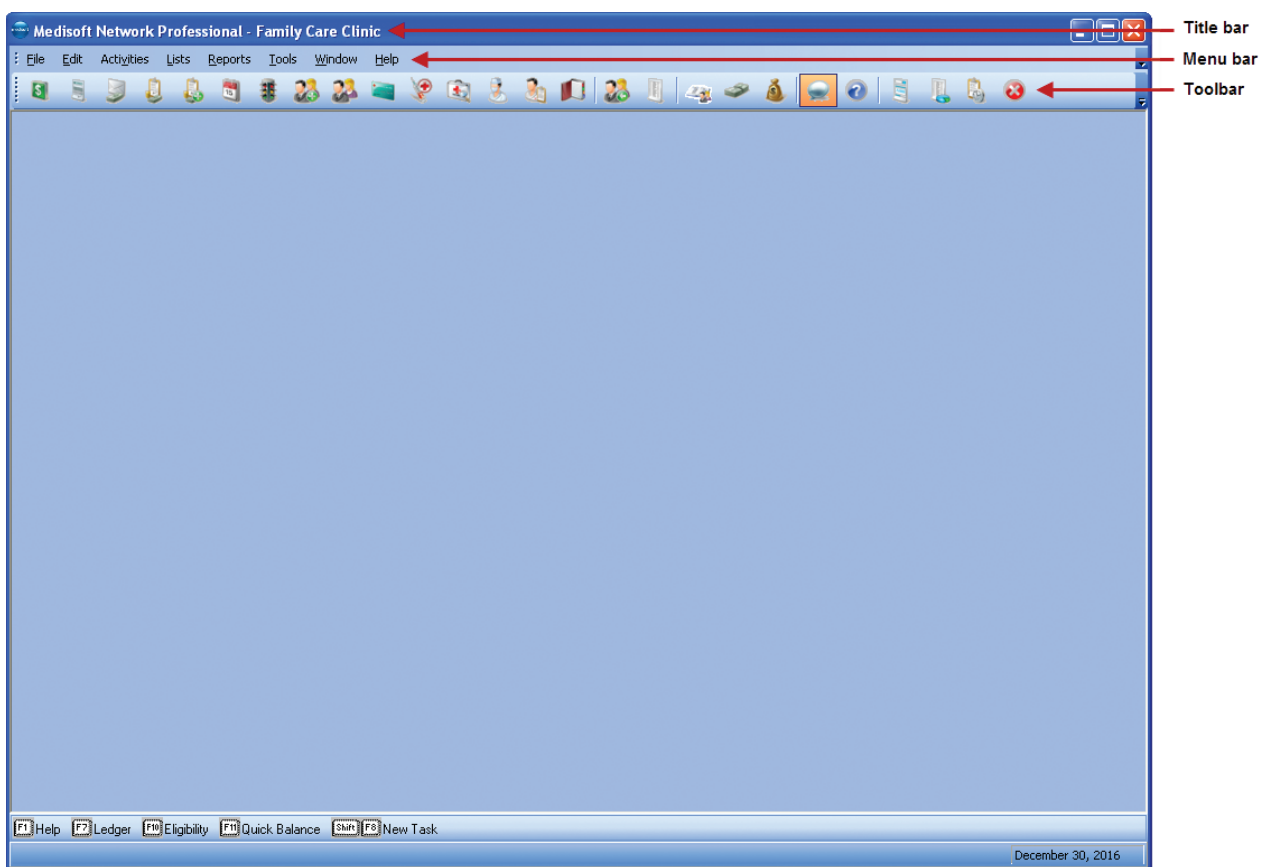
Figure 3.6 Main Medisoft Network Professional Window

button, the corresponding MNP dialog box opens. For example, clicking the Claim Management button opens the same dialog box as does selecting the Claim Management option on the Activities menu. When you move your cursor over an icon, a description of the icon is displayed. Throughout this text/workbook, the buttons can be used instead of the pull-down menus to perform common tasks. Table 3.2 lists the toolbar buttons and their associated activities.

connect plus+ - - - - - - - - - - - - - → **EXERCISE** **3.4**

STARTING MEDISOFT NETWORK PROFESSIONAL AND LOGGING IN

Start the Medisoft Network Professional application and log in.

1. Click Start > All Programs > Medisoft > Medisoft Network Professional. The Medisoft User Login – Family Care Clinic window appears.
2. Enter *billing* in the Login Name field.
3. Enter *master1$* in the Password field and click OK. The main Medisoft Network professional window is displayed.

☑ **You have completed Exercise 3.4**

connect plus+ - - - - - - - - - - - - - → **EXERCISE** **3.5**

USING A MENU COMMAND TO VIEW CHARGES AND PAYMENTS

Practice selecting a menu command to view a patient's charges and payments.

1. Click the Activities menu, and select Enter Transactions. The Transaction Entry dialog box is displayed.
2. Click the drop-down list button in the Chart field, and click Janine Bell. The charge and payment transactions for an office visit appear.
3. Review the two charges listed in the top section of the dialog box.
4. Review the payments entered by Herbert Bell (Janine's father) and the insurance plan, East Ohio PPO.
5. Click the Close button to close the dialog box.

☑ **You have completed Exercise 3.5**

TABLE 3.2	Medisoft Network Professional Toolbar Buttons	
Button	**Button Name**	**Activity**
	Transaction Entry	Enter, edit, or delete transactions.
	Claim Management	Create and transmit insurance claims.
	Statement Management	Create statements.
	Collection List	View, add, edit, or delete items on collection list.
	Add Collection List Item	Add items to the collection list.
	Appointment Book	Schedule appointments.
	View Eligibility Verification Results (F10)	Review results of eligibility verification inquiries.
	Patient Quick Entry	Use predefined templates to enter new patients.
	Patient List	Enter patient information.
	Insurance Carriers List	Enter insurance carriers.
	Procedure Code List	Enter procedure codes.
	Diagnosis Code List	Enter diagnosis codes.
	Provider List	Enter providers.
	Referring Provider List	Enter referring providers.
	Address List	Enter addresses.
	Patient Recall Entry	Enter patient recall data.
	Custom Reports List	Open a custom report.

(continued)

TABLE 3.2	*(continued)*	
	Quick Ledger	View a patient's ledger.
	Quick Balance	View a patient's balance.
	Enter Deposits and Apply Payments	Enter deposits and payments.
	Show/Hide Hints	Turn the Hints feature on and off.
	Medisoft Help	Access MNP's built-in help feature.
	Edit Patient Notes in Final Draft	Use the built-in word processor to create and edit patient notes.
	Launch Medisoft Reports	Obtain access to additional reports.
	Launch Work Administrator	Assign tasks to practice staff.
	Exit Program	Exit the MNP program.

connect plus+

EXERCISE   3.6

USING A TOOLBAR BUTTON TO VIEW CHARGES AND PAYMENTS

Practice using a toolbar button to view a patient's charges and payments.

1. Click the Transaction Entry button on the toolbar. The Transaction Entry dialog box is displayed.
2. Click the drop-down list button in the Chart field, and click Janine Bell. The charge and payment transactions for an office visit appear.
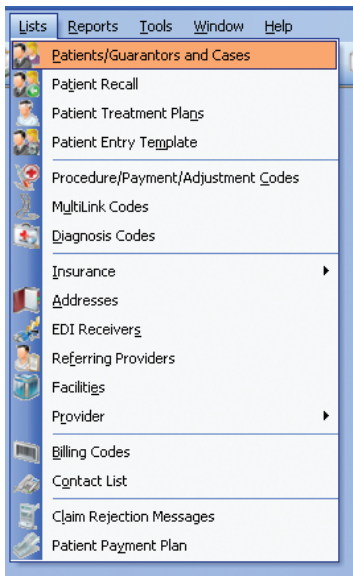3. Click the Close button to close the dialog box.

☑ **You have completed Exercise 3.6**

3.5 Using Medisoft Clinical to Complete Pre-Encounter Tasks

In Chapter 1, you learned about the medical documentation and billing cycle. The tasks associated with each step in the cycle were originally performed using paper forms, without the assistance of

Figure 3.7 Patients/Guarantors and Cases Selection on the Lists Menu

computers. Computers were first used in the physician practice for scheduling and billing. Today, practices both large and small are shifting from paper medical records to electronic health records. The tasks formerly completed using paper are now performed electronically through the use of computers.

The remainder of this chapter explains how computer software—specifically Medisoft Clinical—is used to accomplish the tasks associated with each step in the cycle. In this section, the steps are grouped into three categories: pre-encounter, encounter, and post-encounter.

Preregistration

The pre-encounter steps include preregistration and appointment scheduling. Preregistration consists of entering basic information about the patient in Medisoft Network Professional. The demographic information is entered in the Patient/Guarantor dialog box, which is accessed via the Lists menu (see Figure 3.7). When Patients/Guarantors and Cases is selected on the Lists menu, the Patient List dialog box is displayed (see Figure 3.8).

To enter preregistration information about a new patient, click the New Patient button. The Patient/Guarantor dialog box is displayed (see Figure 3.9). Basic information such as the patient's name, address, and telephone numbers are entered in the Name, Address tab. Additional information, including the assigned provider, are entered in the Other Information tab. The Payment Plan tab is usually not used during preregistration.

Entering the Chief Complaint/Reason for Visit

chief complaint patient's description of the symptoms or reasons for seeking medical care

If information about the patient's **chief complaint**—the patient's description of the symptoms or reasons for seeking medical care—is gathered during preregistration, a case must be created. Cases contain detailed information required to submit insurance claims. In MNP, the case folder consists of twelve tabs. During preregistration,
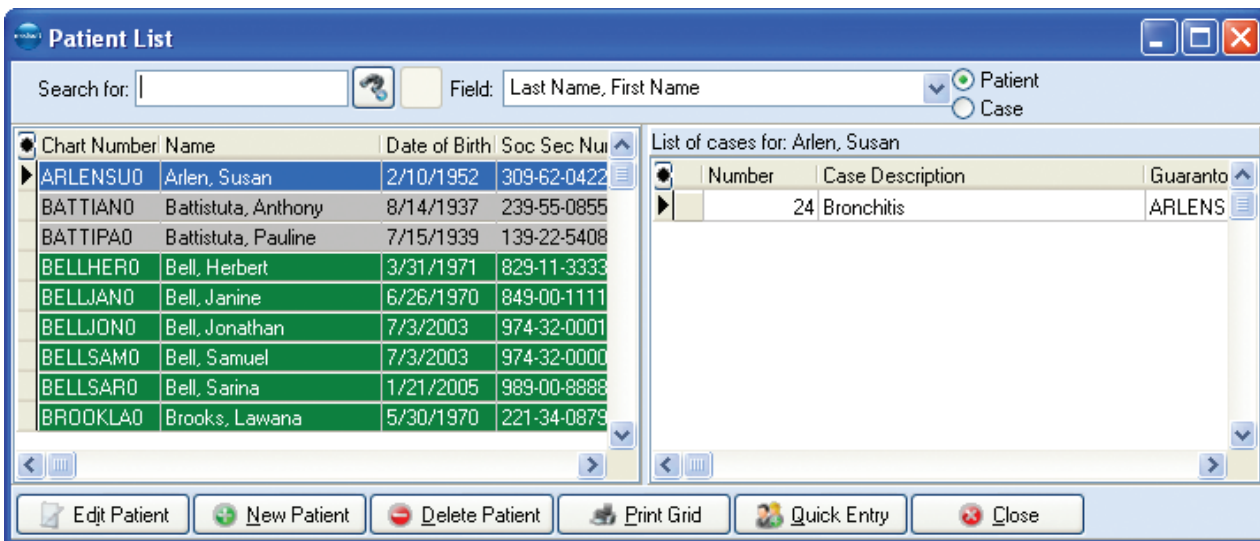
Figure 3.8 Patient List Dialog Box

Figure 3.9 Patient/Guarantor Dialog Box

a new case is created, and the chief complaint is entered in the Description field of the Personal tab. Figure 3.10 displays the Case dialog box with the Personal tab selected.
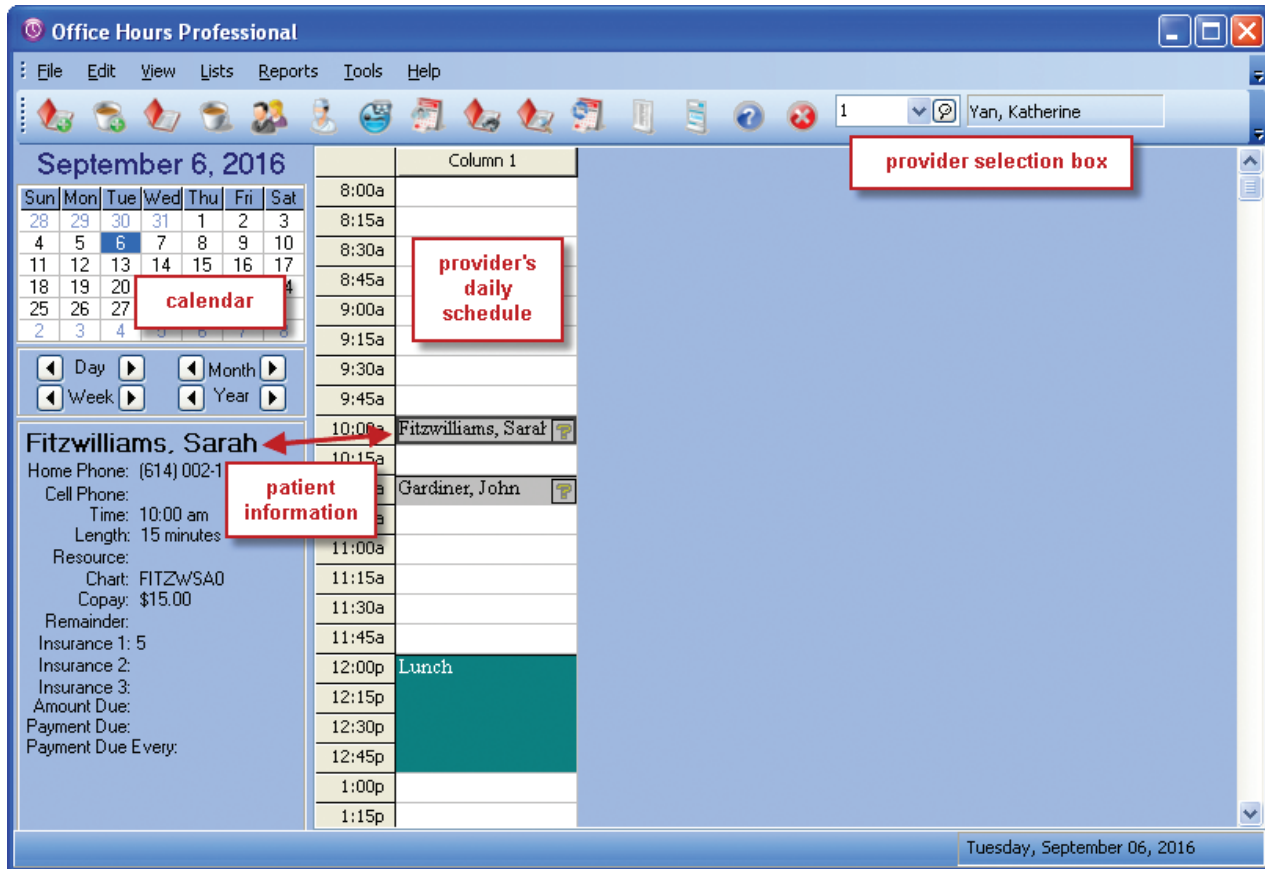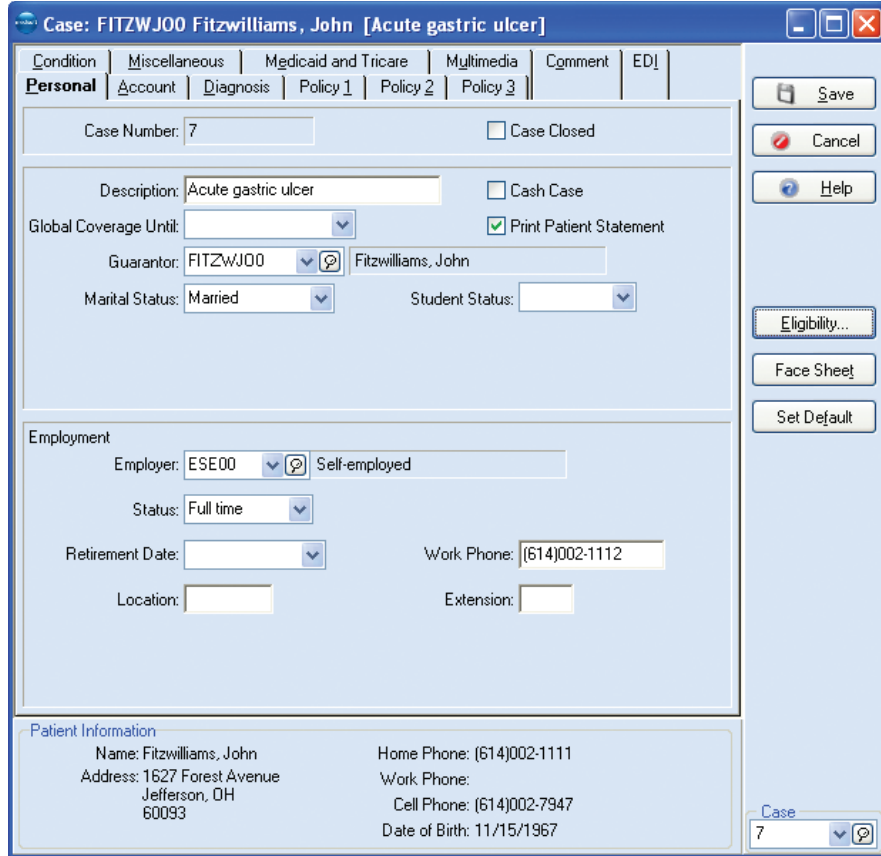
Scheduling Appointments

The preferences of physician practices vary in regard to scheduling software. Some practices prefer to schedule appointments in a separate scheduling program, while others use a scheduling program that is built into a practice management or electronic health record program. In the exercises in this text/workbook, we will use Office Hours for patient appointments. Office Hours is a scheduling program included with Medisoft Network Professional. The main Office Hours screen is shown in Figure 3.11.

The following steps are used to enter an appointment in Office Hours:

1. Select a provider in the provider box in the upper-right corner of the Office Hours window.

2. Select a date in the calendar in the upper left corner of the window.

Figure 3.10 Case Dialog Box

Figure 3.11 Main Areas of the Office Hours Window

THINKING IT THROUGH 3.2 ←-----------

Most physician practices use computerized scheduling programs. Think about the steps required to find an open time slot and to enter a patient appointment. What do you think are the main advantages of a computerized scheduling program?

Figure 3.12 The New Appointment Entry Dialog Box

3. Click a time slot in the provider's daily schedule in Column 1. The New Appointment Entry dialog box is displayed (see Figure 3.12).

4. Complete the New Appointment Entry dialog box, and click Save.

Preregistration and scheduling are covered in detail in Chapter 4.

3.6 Using Medisoft Clinical to Complete Encounter Tasks

The encounter steps include all activities that take place from the time the patient arrives for an office visit until the patient leaves the office.

Establishing Financial Responsibility

In Medisoft Network Professional, the patient's insurance information is entered in one or more of the Policy tabs in the Case folder (see Figure 3.13). If the patient has just one policy, only the Policy 1 tab is completed. If the patient has additional plans, the Policy 2 tab and possibly the Policy 3 tab must also be completed. The Policy

Figure 3.13   Case Folder with Policy 1 Tab Selected

tabs contain information about the patient's health plan coverage, including the name of the policyholder, the policy number, the co-payment or deductible amount, and more.

Checking Insurance Eligibility

The Policy tabs also contain a button that is used to make a real-time eligibility inquiry about a patient. In Figure 3.13, the button used to begin an eligibility check is highlighted in yellow. Using an Internet connection, the program sends an eligibility verification request to the patient's health plan and, in response, receives an eligibility response report that states whether the patient is eligible for benefits under the health plan.

The topic of eligibility verification is covered in detail Chapter 4.

Check-in

The check-in step includes a number of administrative and clinical activities, including:

- Checking in the patient and reviewing the patient's account balance
- Gathering and recording additional patient information
- Examining the patient and documenting the examination
- Coding the services performed and exporting the information to Medisoft Network Professional for claims and billing

Checking In and Reviewing Account Balance

As patients assume more of the financial responsibility for health care, medical offices look for more efficient ways to check patients' balances and discuss any payments that are due while the patient is in the office. For this reason, the appointment schedulers inside Medisoft Clinical Patient Records and Medisoft Network Professional contain features to help facilitate the collection of time-of-service payments. Since this text/workbook uses Office Hours, a program within MNP, for scheduling, that is where check-in will take place. Figure 3.14 shows an appointment on the provider's schedule with a check mark to indicate that the patient has checked in. Figure 3.15 illustrates the Quick Balance dialog box, a feature within the scheduling program that enables front desk personnel to easily view a patient's balance during check-in.
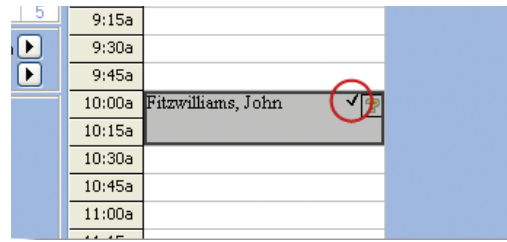
**Figure 3.14** Patient Appointment with Checked-in Status

Gathering and Recording Additional Patient Information

After patients check in at the front desk, they are given additional forms to complete, including a patient information form and a medical history form. Patients are also given several HIPAA documents, such as a Notice of Privacy Practices, an Acknowledgment of Receipt of Notice of Privacy Practices, and an Authorization to Use or Disclose Health Information. Most practices also provide patients with a copy of the practice's financial policy.

The information obtained during check-in is entered in several places in MNP. Most of the information on the patient information form is recorded in the Patient/Guarantor dialog box and in the Personal, Account, and Policy tabs of the Case folder. The data from the medical history form are reviewed by a medical assistant once the patient is taken to an exam room.

The HIPAA forms that are signed by the patient and returned to the front desk may be scanned and included in the patient record.

Check-in, patient registration, and account balance review are covered in Chapter 5.
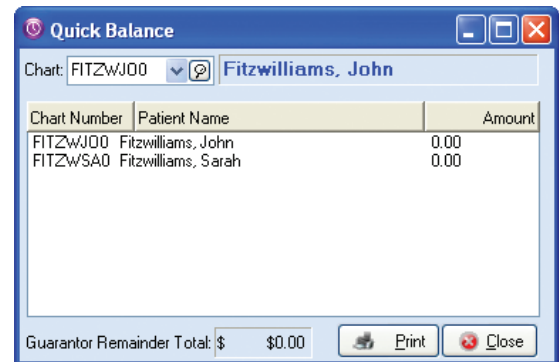

Figure 3.15 Quick Balance Dialog Box

Documentation and Examination

After waiting to be called, the patient is escorted to the exam room, and a medical assistant or other clinical staff member interviews the patient and measures the patient's vital signs. The type and length of the interview depends on a number of factors, including whether the patient is new to the practice, the nature of the chief complaint, and the purpose of the visit (for example, new condition or routine follow-up). When a provider sees a patient for the first time, it is important to obtain the patient's medical history, allergies, and medications, as well as the chief complaint/reason for visit.

Medical History The medical history information is entered in the Past Medical History, Social History, and Family History tabs in Medisoft Clinical Patient Records (see Figure 3.16).
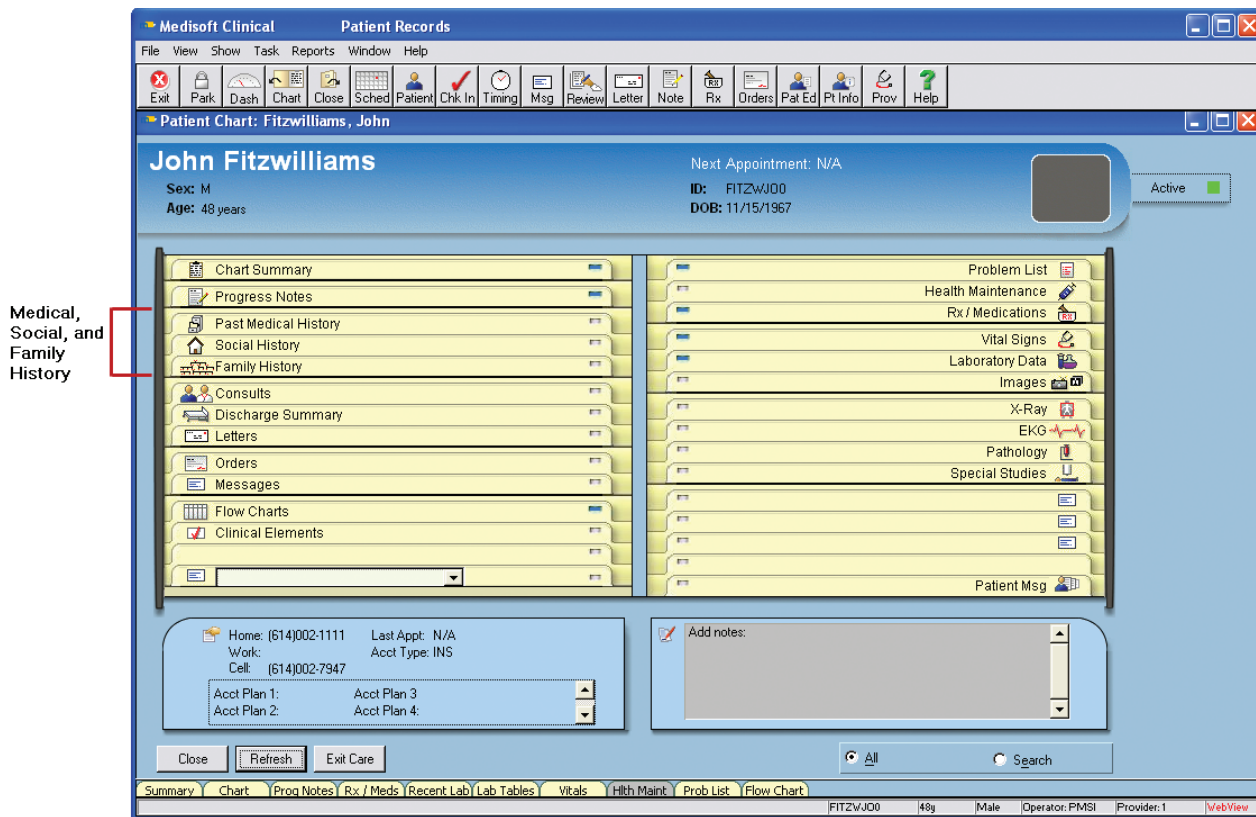
Figure 3.16 Patient Chart with Medical, Social, and Family History Folders Identified

Chief Complaint The chief complaint/reason for visit is recorded in the Problem List folder. The Problem List folder lists major problems, other problems, procedures, diagnoses, risks, and hospitalizations (see Figure 3.17).

Allergies and Medications A patient's allergies and medications are entered in the Rx/Medications folder. Allergies are listed at the top of the dialog box, and medications are grouped into current, ineffective, and historical categories. A date box indicates the last date on which the allergies were reviewed (see Figure 3.18).

**Figure 3.17** Problem List Folder with Other Problems Tab Selected
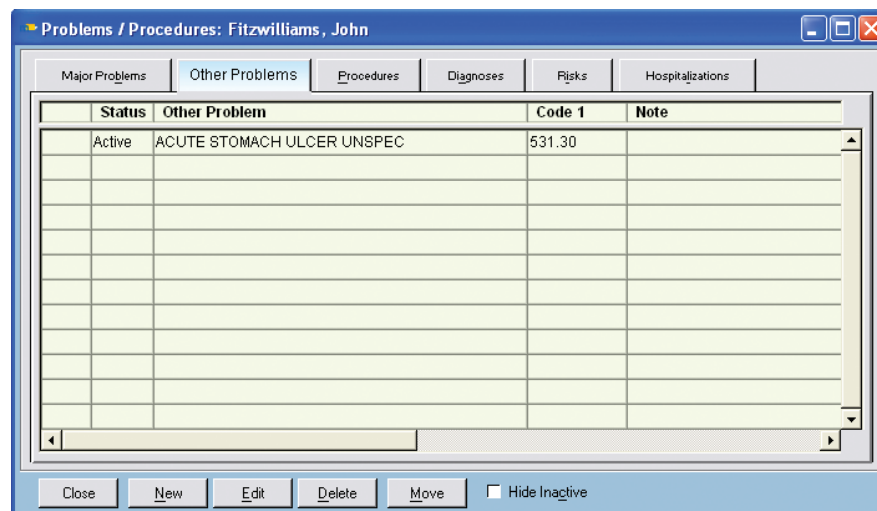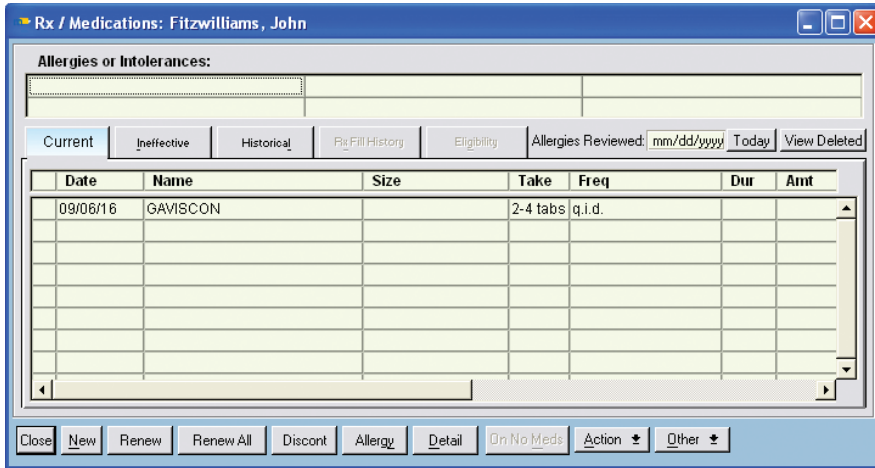
Figure 3.18 Rx/Medications Folder with Current Folder Selected

Measuring and Recording Vital Signs   Vital signs are recorded and entered in the Vital Signs folder in MCPR. The Vital Signs dialog box contains fields for all commonly used vital signs and measurements (see Figure 3.19). As each measurement is taken, it is entered in the appropriate field.

The topics of medical history, chief complaint, allergies and medications, and entering vital signs are covered in Chapter 6.

Physician Examination   During the office visit, a physician evaluates, treats, and documents a patient's condition. The visit documentation varies depending on a number of factors, including whether the patient
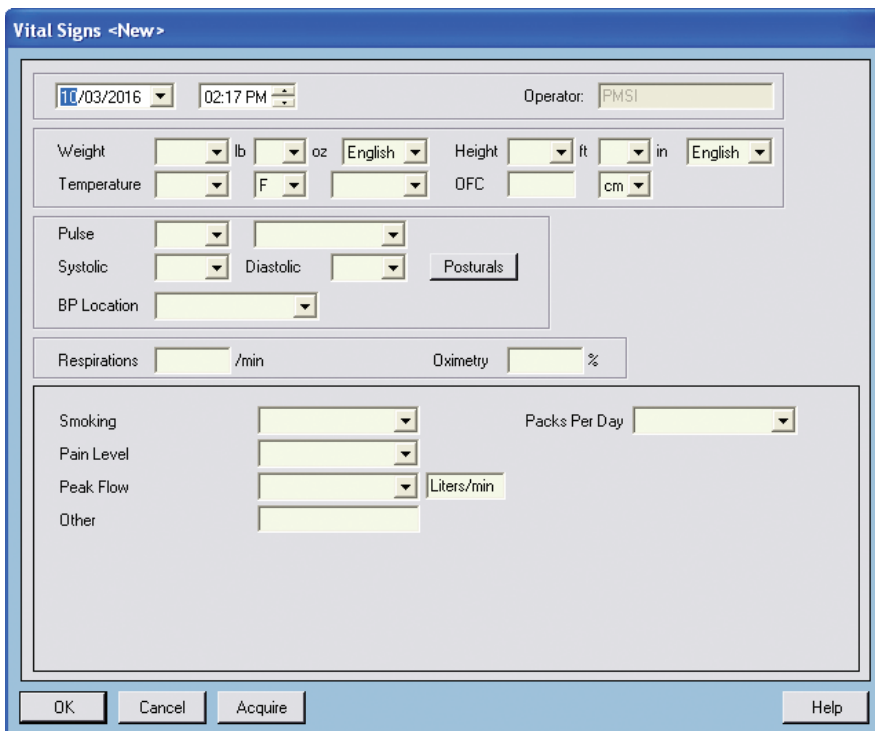
Figure 3.19 Vital Signs Dialog Box

is new or established. When examining a new patient, a complete review of systems may be appropriate. Once the patient is established, the visit focuses more on his or her current medical needs.
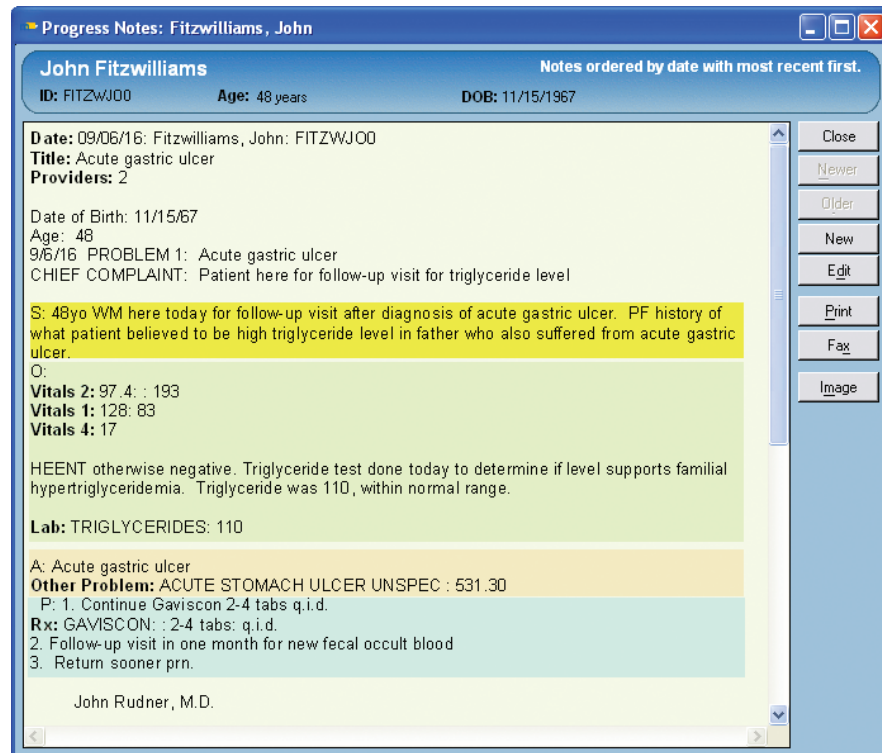
A number of methods are used to organize and record visit documentation. The most common method of documenting is called a problem-oriented medical record (POMR). The problem-oriented medical record has a general section with data from the initial patient examination and assessment. When the patient makes subsequent visits, the reasons for those encounters are listed separately (in the Problem List folder) and have their own notes.

A problem-oriented medical record contains SOAP notes. In the SOAP format, a patient's encounter documentation has four parts: Subjective, Objective, Assessment, and Plan:
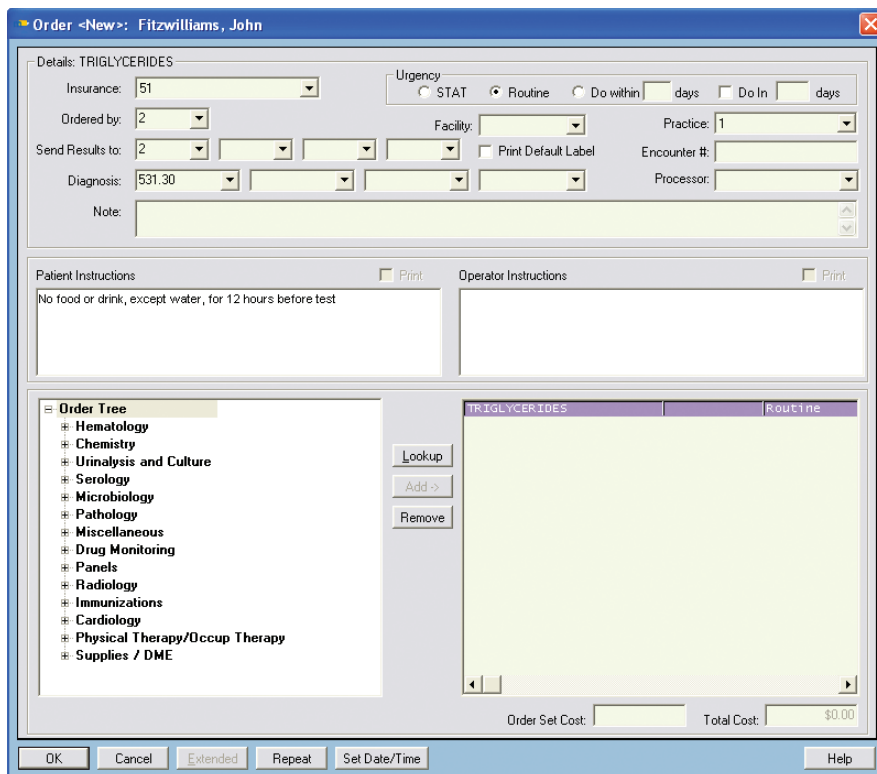
S: The subjective information is what the patient names as the problems or complaints.

O: The objective information includes relevant positive and negative physical findings; it may include data from laboratory tests and other procedures.

A: The assessment, also called the impression or conclusion, is the physician's diagnosis.

P: The plan, also called advice or recommendations, is the course of treatment for the patient, such as surgery, medication, or other tests, including instructions to the patient and necessary patient monitoring and follow-up.

In Figure 3.20, a SOAP note entered in MCPR has been color-coded to show the S, O, A, and P sections. The SOAP format is used for the exercises in this text/workbook.

Figure 3.20 Progress Note in SOAP Format

Progress Notes: Fitzwilliams, John

John Fitzwilliams   Notes ordered by date with most recent first.
ID: FITZWJO0   **Age:** 48 years   **DOB:** 11/15/1967

Date: 09/06/16: Fitzwilliams, John: FITZWJO0
Title: Acute gastric ulcer
Providers: 2

Date of Birth: 11/15/67
Age: 48
9/6/16 PROBLEM 1: Acute gastric ulcer
CHIEF COMPLAINT: Patient here for follow-up visit for triglyceride level

S: 48yo WM here today for follow-up visit after diagnosis of acute gastric ulcer. PF history of what patient believed to be high triglyceride level in father who also suffered from acute gastric ulcer.
O:
Vitals 2: 97.4: : 193
Vitals 1: 128: 83
Vitals 4: 17

HEENT otherwise negative. Triglyceride test done today to determine if level supports familial hypertrigliceridemia. Triglyceride was 110, within normal range.

Lab: TRIGLYCERIDES: 110

A: Acute gastric ulcer
Other Problem: ACUTE STOMACH ULCER UNSPEC : 531.30
 P: 1. Continue Gaviscon 2-4 tabs q.i.d.
Rx: GAVISCON: : 2-4 tabs: q.i.d.
2. Follow-up visit in one month for new fecal occult blood
3. Return sooner prn.

    John Rudner, M.D.

Close
Newer
Older
New
Edit
Print
Fax
Image

Figure 3.21   Order Dialog Box with Order for a Triglycerides Test

If the physician wants laboratory or radiological tests performed, orders are entered in the Orders folder of the patient chart. Figure 3.21 displays an order for a blood test for triglycerides.

Orders for new medications or renewals of existing prescriptions are entered in the Rx/Medications folder. An order for a new prescription is displayed in Figure 3.22. Prescriptions can be printed and given to the patient, or they can be electronically transmitted to the patient's pharmacy.

Coding

Once the examination is complete and the documentation has been entered in MCPR, the services provided and the provider's determination of the patient's diagnoses must be assigned numeric codes. In some cases, physicians assign these codes; in others, medical coders or medical billers perform this task. In either instance, the codes are determined by reviewing the documentation. Whether physicians receive payment from health plans depends in part on the diagnosis and procedure codes assigned to the visit. Both types of information are used to calculate the charges for the visit, and must be reported to insurance plans in order to receive payment for services.

In MCPR, codes are selected from lists provided on an electronic encounter form (see Figure 3.23). In this example, the procedures performed were coded as 99212 and 84478. The diagnosis code, 531.30, was assigned to both procedures.

Figure 3.22   Prescription Dialog Box

**Figure 3.23**   Electronic Encounter Dialog Box

Transmit Charges to Medisoft Network Professional for Billing

Once the coding is complete, the visit charges are transmitted electronically to Medisoft Network Professional. The charges are automatically transmitted every few minutes, with the exact amount of time specified by the user.

The charges appear in MNP in the Unprocessed Transactions dialog box, which is accessed by selecting Unprocessed Transactions > Unprocessed EMR Charges on the Activities menu (see Figure 3.24).

The topics of documenting a patient visit, coding a visit, and transferring charges to Medisoft Network Professional are described in Chapter 7.
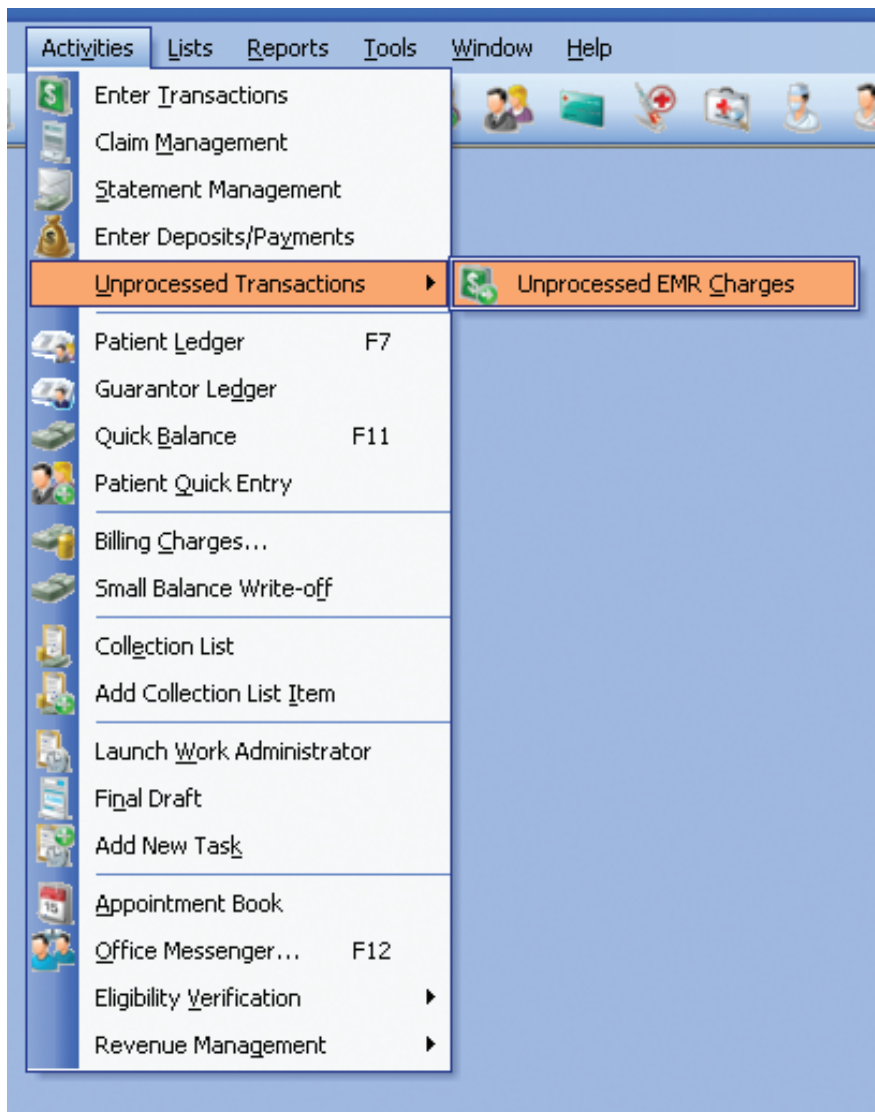
Figure 3.24   The Activities Menu with Unprocessed Transactions > Unprocessed EMR Charges Selected
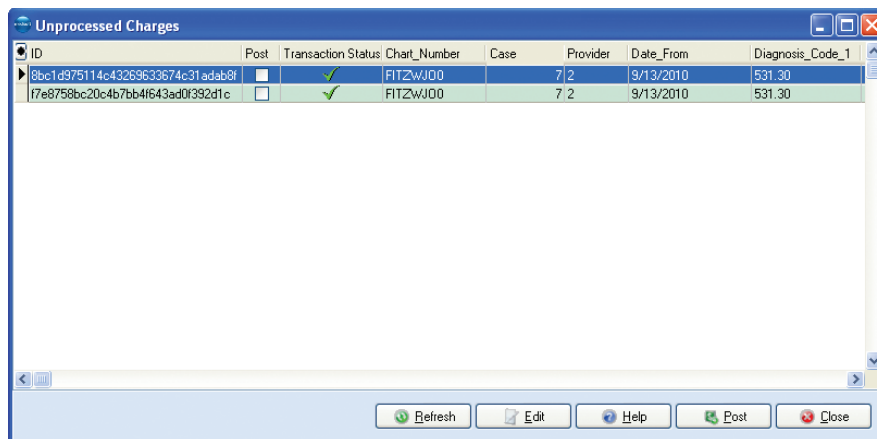
Figure 3.25   Unprocessed Charges Dialog Box

Checkout

During patient checkout, payments are calculated and posted, follow-up appointments and tests are scheduled, patient education materials are dispensed, and referrals are provided.

Coding and Billing Compliance Review

The Unprocessed Charges dialog box lists charges that have come from Medisoft Clinical Patient Records since the last time charges were posted (see Figure 3.25). Before the charges are posted to a patient's account, they must be reviewed for billing and coding compliance.

Diagnosis and procedure codes must be up-to-date and must follow the official guidelines of the American Hospital Association and the American Medical Association. In addition, the procedures and diagnosis must establish the medical necessity of the charges. If the guidelines are not followed or if medical necessity is not met, the physician will not receive payment from the health plan.

Health plans have different rules for what is required on health care claims, and they use sophisticated technology to check or "edit" incoming claims to determine whether to accept them for processing. If a claim does not pass the edit, it will be rejected. While it is not possible to memorize all health plans' rules, reviewing charges before sending claims will ensure that more claims are accepted on their first submission.

In Medisoft Network Professional, charges are reviewed in the Unprocessed Transactions Edit dialog box, which is displayed by clicking the Edit button in the Unprocessed Charges dialog box. The Unprocessed Transactions Edit dialog box lists detailed information, including information about the patient, the procedures, the diagnosis, and the charges (see Figure 3.26). If the billing compliance review finds a problem with the transaction, the charges can be held as unprocessed until the problem is corrected. If the review determines that the transaction is complete and accurate, the

Figure 3.26 Unprocessed Transactions Edit Dialog Box

charges are posted to a patient's account. Clicking the Post button enters the charges into the Transaction Entry dialog box in MNP (see Figure 3.27). Transactions are not finalized until the Save button is clicked.

Billing and coding compliance is covered in Chapter 9.

Calculate and Post Time-of-Service (TOS) Payments

When a patient goes to the checkout desk, a staff member reviews the amount that the patient owes for the visit. In some cases, nothing is owed at the time of service. The claim will be submitted to the patient's health plan, and the patient will not be billed until the claim is processed. In other cases, patients pay for all or a portion of services at the time of the visit. A patient may be responsible for a small copayment or a percentage of estimated charges.
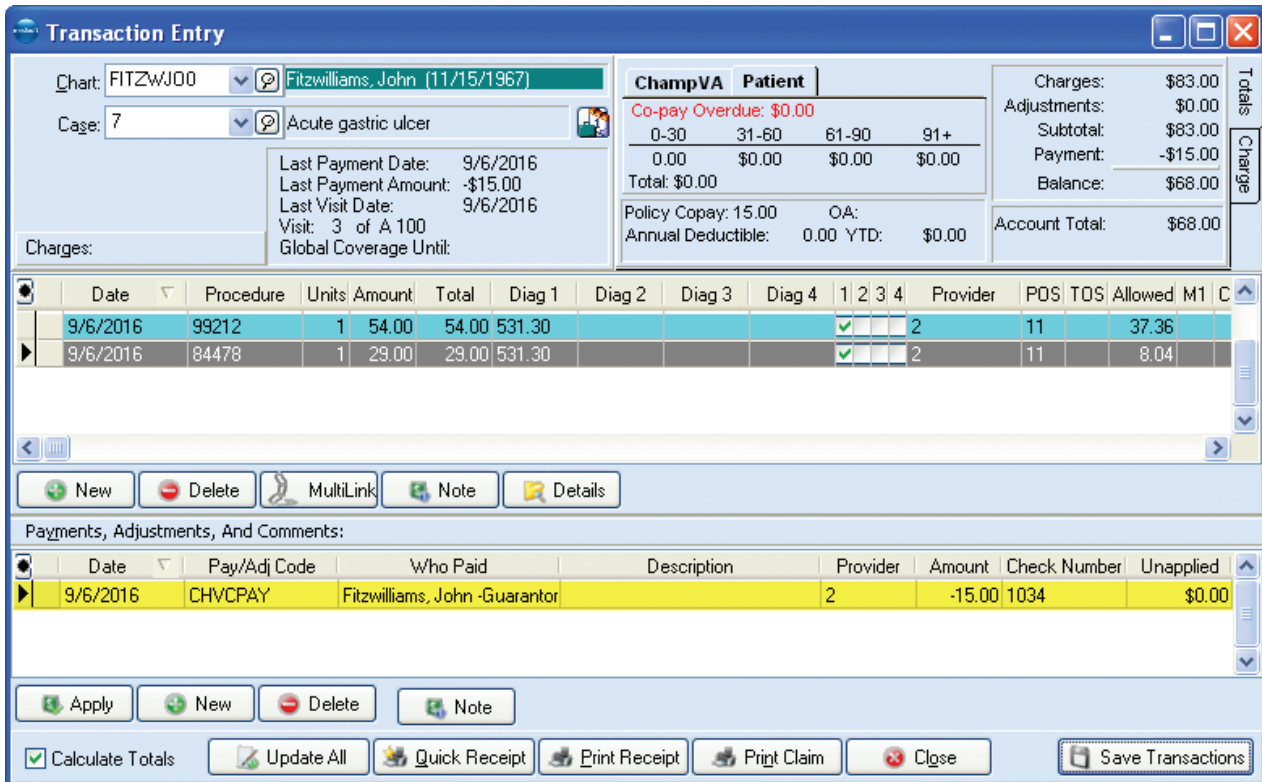
Patient payments are entered in the Transaction Entry dialog box. Figure 3.28 shows the Transaction Entry dialog box after a $15.00 patient copayment has been recorded. The payment line is highlighted in yellow.

If a patient makes a payment at the time of service, a receipt is typically printed. The Print Receipt button at the bottom of the Transaction Entry dialog box generates a receipt, which can be printed and given to the patient. Figure 3.29 displays a sample patient receipt.

Posting time-of-service payments is discussed in depth in Chapter 9.
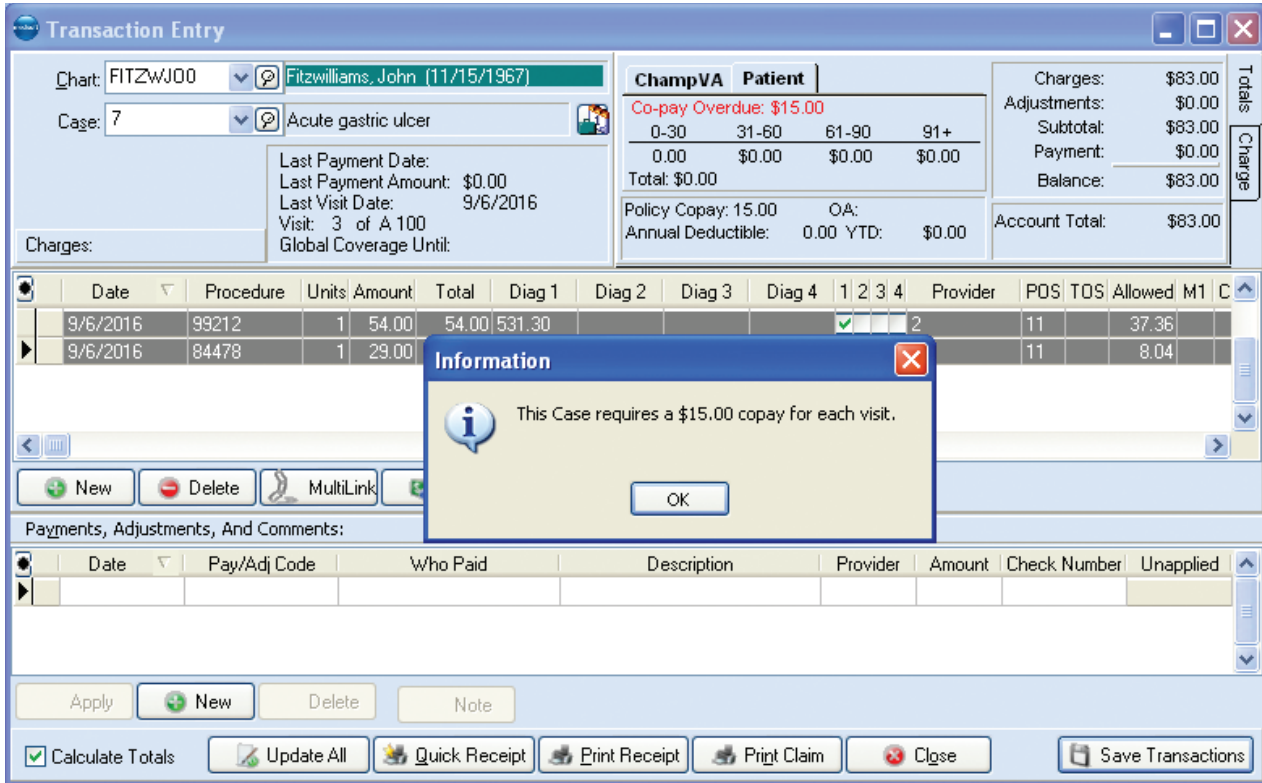
Figure 3.27 Transaction Entry Dialog Box with Transactions Posted

Figure 3.28 Transaction Entry Dialog Box with Patient Copayment Posted

Family Care Clinic
285 Stephenson Boulevard
Stephenson, OH 60089
(614)555-0000

Page: 1   9/6/2016

Patient: John Fitzwilliams
1627 Forest Avenue
Jefferson, OH 60093

Chart #: FITZWJO0
Case #: 7

Instructions:
Complete the patient information portion of your insurance claim form. Attach this bill, signed and dated, and all other bills pertaining to the claim. If you have a deductible policy, hold your claim forms until you have met your deductible. Mail directly to your insurance carrier.

Date	Description	Procedure	Modify	Dx 1	Dx 2	Dx 3	Dx 4	Units	Charge
9/6/2016	OF--established patient, low	99212		531.30				1	54.00
9/6/2016	Triglycerides test	84478		531.30				1	29.00
9/6/2016	ChampVA Copayment	CHVCPAY						1	-15.00

Provider Information
Provider Name: John Rudner MD
License: 84701
Champ VA PIN:
SSN or EIN: 339-67-5000

Total Charges:	$ 83.00
Total Payments:	-$ 15.00
Total Adjustments:	$ 0.00
Total Due This Visit:	**$ 68.00**
Total Account Balance:	$ 68.00

Assign and Release: I hereby authorize payment of medical benefits to this physician for the services described above. I also authorize the release of any information necessary to process this claim.

Patient Signature: _____   Date: _____

Figure 3.29   Patient Receipt for Payment

Additional Checkout Activities

The final step of the checkout process includes scheduling any follow-up appointments ordered by the provider, such as return office visits, laboratory tests, or radiology services; providing referrals or prescriptions as required; and providing related patient education materials as ordered by the provider.

Scheduling is performed in Office Hours, the Medisoft Network Professional scheduling program. Referrals and prescriptions are created from within Medisoft Clinical Patient Records, as are patient education materials. Figure 3.30 shows a sample patient education handout selected in MCPR.
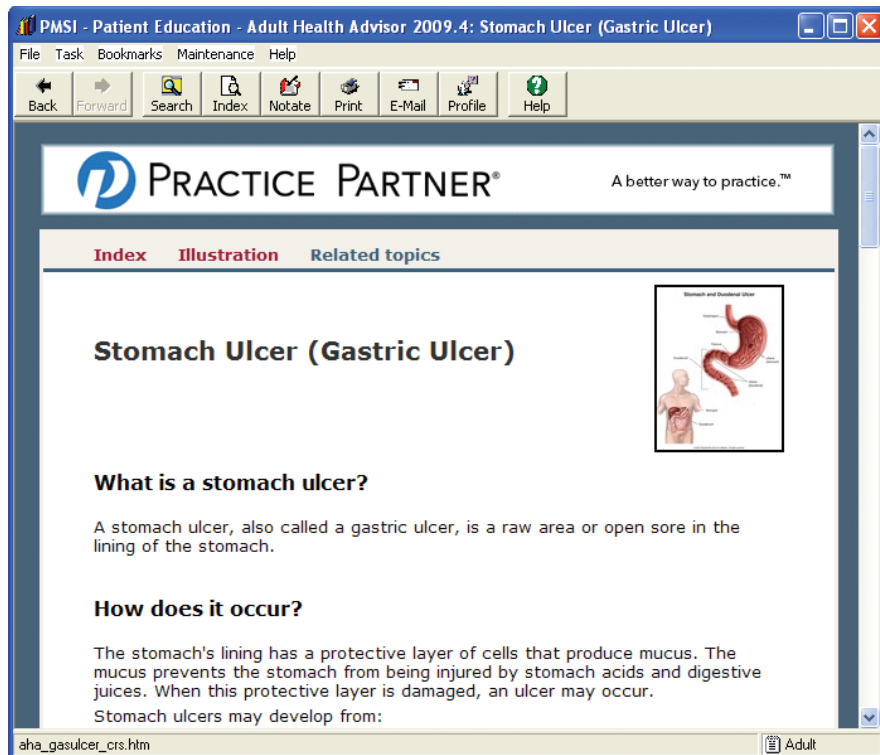
Figure 3.30   Patient Education Selection

Figure 3.31   Activities Menu with Claim Management Selected

## 3.7 Using Medisoft Clinical to Complete Post-Encounter Tasks

After the patient visit is complete, activities focus on payment for services, including preparing and transmitting claims, monitoring payer adjudication, generating patient statements, and following up on payments and collections.

Preparing and Transmitting Claims

To receive payment, a medical practice must create and submit claims to health plans. In Medisoft Network Professional, claim functions are located on the Activities menu (see Figure 3.31).

The Claim Management dialog box lists current claims. New claims are created in the Create Claims dialog box (see Figure 3.32).

Claims are transmitted to health plans through MNP's Revenue Management feature. In addition to transmitting electronic
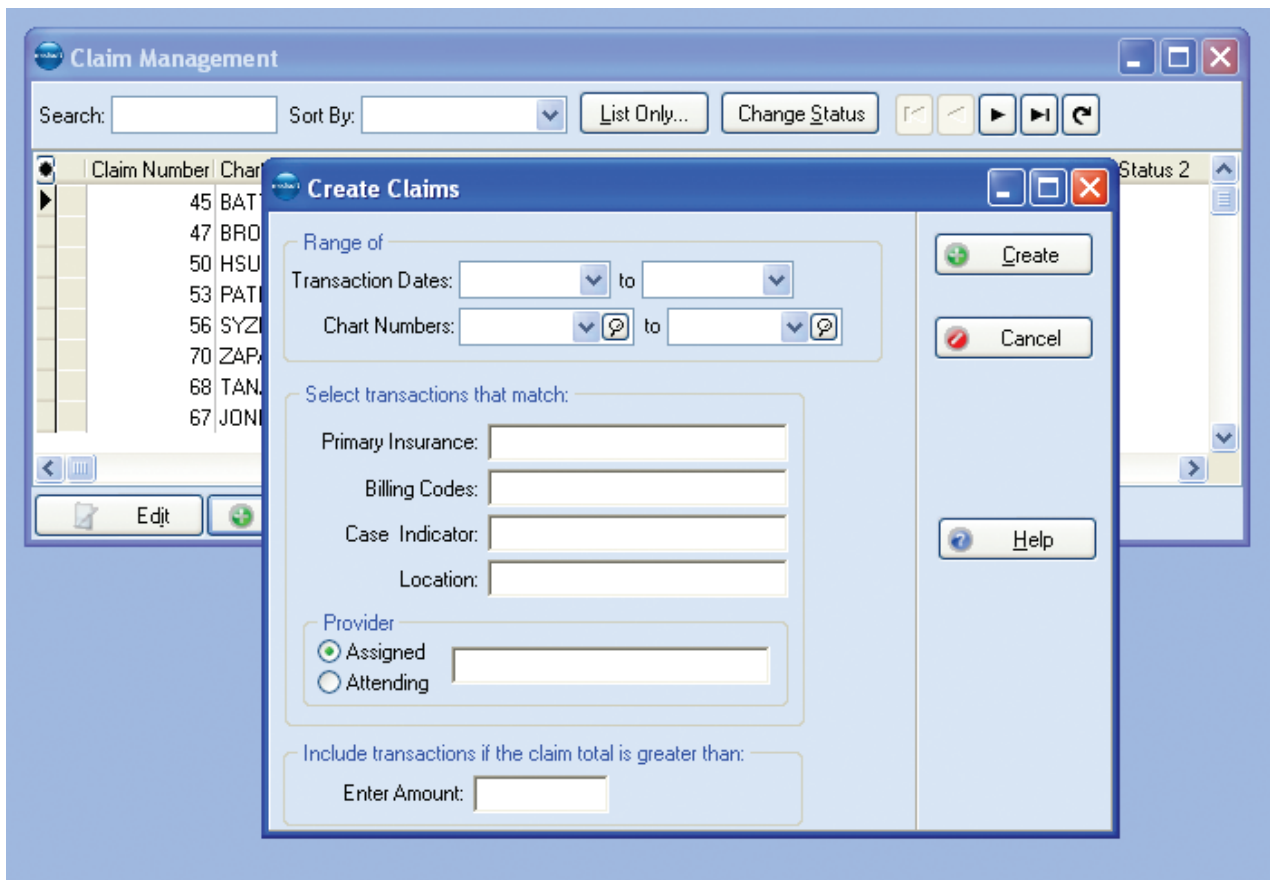
Figure 3.32 Create Claims Dialog Box

claims, Revenue Management checks outgoing claims for errors before sending them to the health plan. Claim management is covered in detail in Chapter 10.

Monitoring Payer Adjudication

The health plan reviews the claim and determines whether it will be paid in full, partially paid, or denied. The results of the claim review, including an explanation of why charges were not paid in full or were denied entirely, are sent to the provider along with the payment. This information is reviewed for accuracy by a member of the billing staff, such as a medical insurance specialist. If any discrepancies are found, a request for a review of the claim is filed with the payer. If no issues are discovered, the amount of the payment is recorded. The payment may be in the form of a paper check, or it may be sent electronically to the practice's bank.

In Medisoft Network Professional, the first step in entering health plan payments is to select Enter Deposits/Payments on the Activities menu. The Deposit List window is displayed. Clicking the New button brings up the dialog box used to enter payment information (see Figure 3.33).

Figure 3.33   Deposit Dialog Box

Once the deposit is recorded, it is applied to charges in individual patients' accounts in the Apply Payment/Adjustment to Charges dialog box (see Figure 3.34).

Generating Patient Statements

After payments from health plans have been received, patients are billed for any remaining balances. Patient statements are created in Medisoft Network Professional and are sent to patients. A statement lists all services performed, along with the charges for each service.

Figure 3.34   Apply Payment/Adjustments to Charges Dialog Box

It also lists the amount paid by the health plan and the remaining balance that is the responsibility of the patient. While some practices send statements electronically via e-mail, some practices still mail paper statements.

The Statement Management option on the Activities menu contains options for creating and printing patient statements (see Figure 3.35).

Selections in the Create Statements dialog box determine which statements will be created. The program allows filtering by patient, date, minimum amount owed, and other criteria (see Figure 3.36).

A sample patient statement is displayed in Figure 3.37.

The topics of posting insurance payments and creating patient statements are presented in Chapter 11.

Following Up on Payments and Collections

Because a medical practice must be successful as a business as well as a provider of health care services, it must track the money that is coming in and going out. Medisoft Network Professional provides a large number of reports that enable office managers to closely monitor accounts.

For example, practices regularly print a report that lists outstanding patient balances (see Figure 3.38). The information in this report identifies accounts that require follow-up.

Most physician practices have financial policies that specify when an account should be placed in collections. In Medisoft
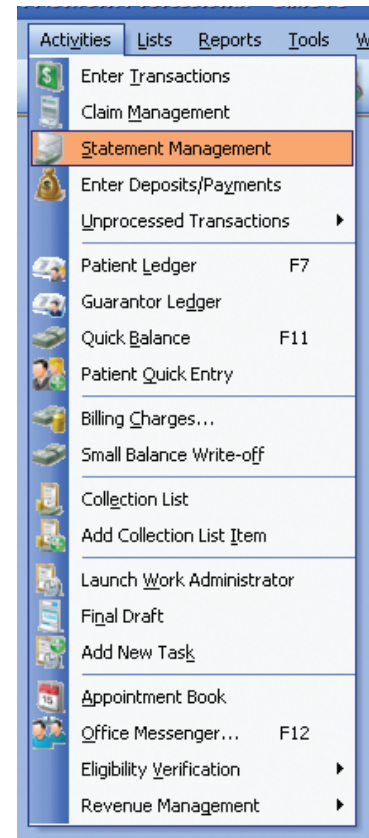
Figure 3.35   Activities Menu with Statement Management Selected
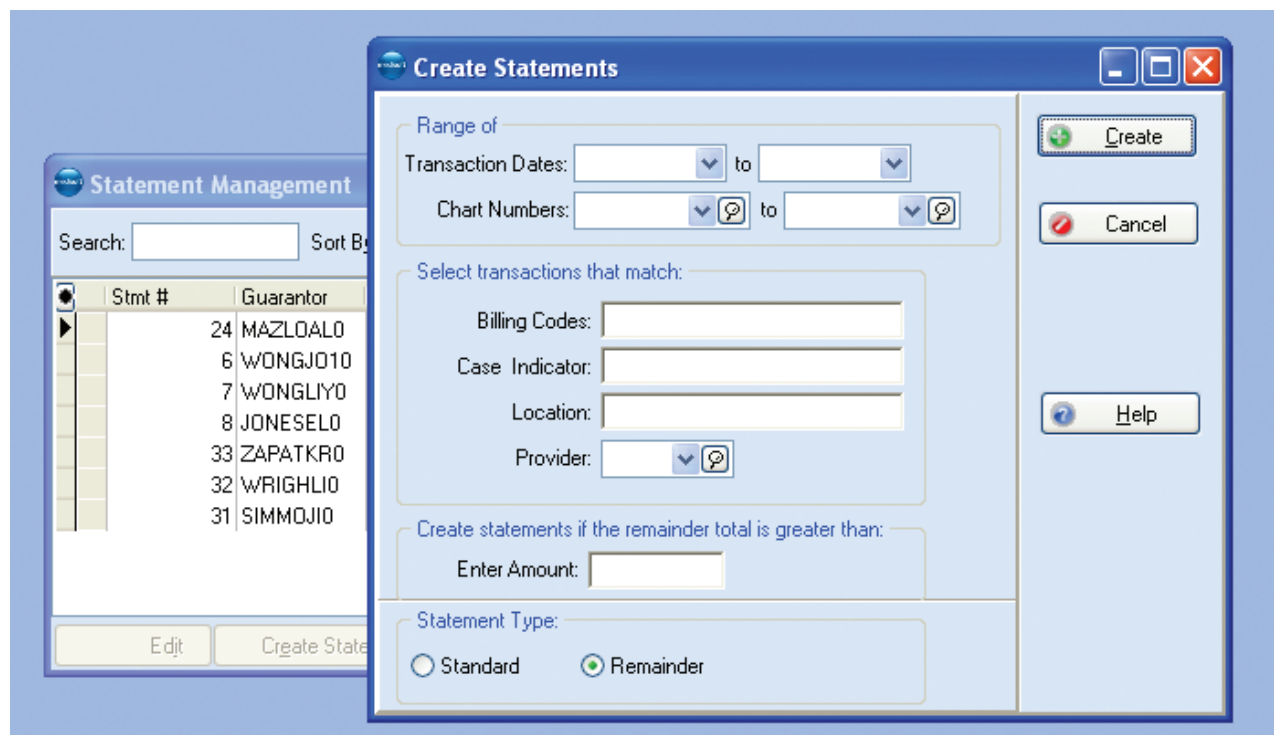
Figure 3.36   Create Statements Dialog Box

Figure 3.37
Patient Statement

Family Care Clinic 285 Stephenson Boulevard Stephenson, OH 60089 (614)555-0000		Statement Date	Chart Number	Page
		09/30/2016	FITZWJO0	1

Make Checks Payable To:

Family Care Clinic
285 Stephenson Boulevard
Stephenson, OH 60089
(614)555-0000

John Fitzwilliams
1627 Forest Avenue
Jefferson, OH 60093

Date of Last Payment: 9/6/2016	Amount: -15.00		Previous Balance:	0.00

Patient: John Fitzwilliams   Chart Number: FITZWJO0   Case: Acute gastric ulcer

Dates	Procedure	Charge	Paid by Primary		Paid By Guarantor	Adjustments	Remainder
09/06/16	84478	29.00	0.00			-20.96	8.04

Amount Due
8.04

Figure 3.38
Patient Aging
Report

Patient Aging by Date of Service
Family Care Clinic
Show all data where the Charges/Payments/Adj is on or before 11/30/2016

Chart	Name	0-30	31-60	61-90	91-120	121+	Total
BATTIAN0	Battistuta, Anthony		79.00				79.00
BROOKLA0	Brooks, Lawana		130.00				130.00
FITZWJO0	Fitzwilliams, John			8.04			8.04
GILESSH0	Giles, Sheila		61.60				61.60
HSUDIAN0	Hsu, Diane		102.00				102.00
JONESEL0	Jones, Elizabeth		72.00	21.17	7.47		100.64
MAZLOAL0	Mazloum, Ali					720.50	720.50
PATELRA0	Patel, Raji		34.00				34.00
SIMMOJI0	Simmons, Jill		21.00				21.00
SYZMAMI0	Syzmanski, Michael		34.00				34.00
WONGJO10	Wong, Jo			7.47		7.47	14.94
WONGLIY0	Wong, Li			4.14			4.14
WRIGHLI0	Wright, Lisa		46.40				46.40
ZAPATKR0	Zapata, Kristin		35.00		247.50		282.50
Report Totals:		0.00	615.00	40.82	254.97	727.97	1,638.76

THINKING IT THROUGH 3.4

In an office with an integrated PM/EHR, charges from an office visit are sent electronically to the practice management application. However, they are not immediately posted to patient accounts. A member of the billing staff must intervene and click a Post button to enter the charges. Since posting charges immediately seems more efficient, why do you think the program does not work that way? What is the reason for the delay?

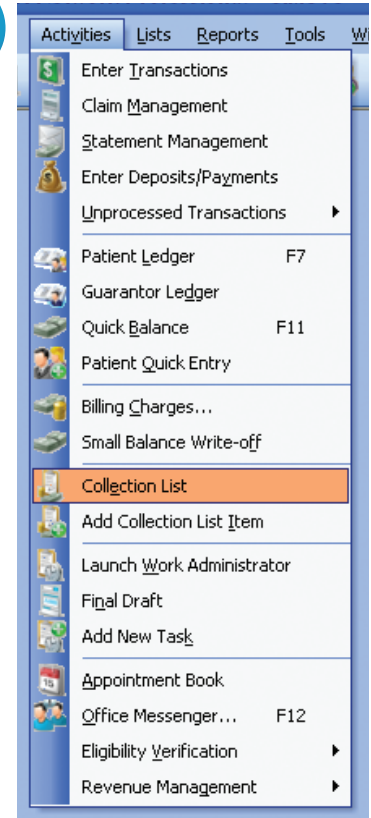**Figure 3.39**   Activities Menu with Collection List Selected

Network Professional, collection functions are located on the Activities menu and on the Reports menu. Selecting Collection List on the Activities menu is the first step in placing an account in collections (see Figure 3.39).

When Collection List is selected, the Collection List dialog box appears. Clicking the New button displays the Tickler Item dialog box (see Figure 3.40). Once the Tickler Item dialog box has been completed, the account appears in the Collection List.
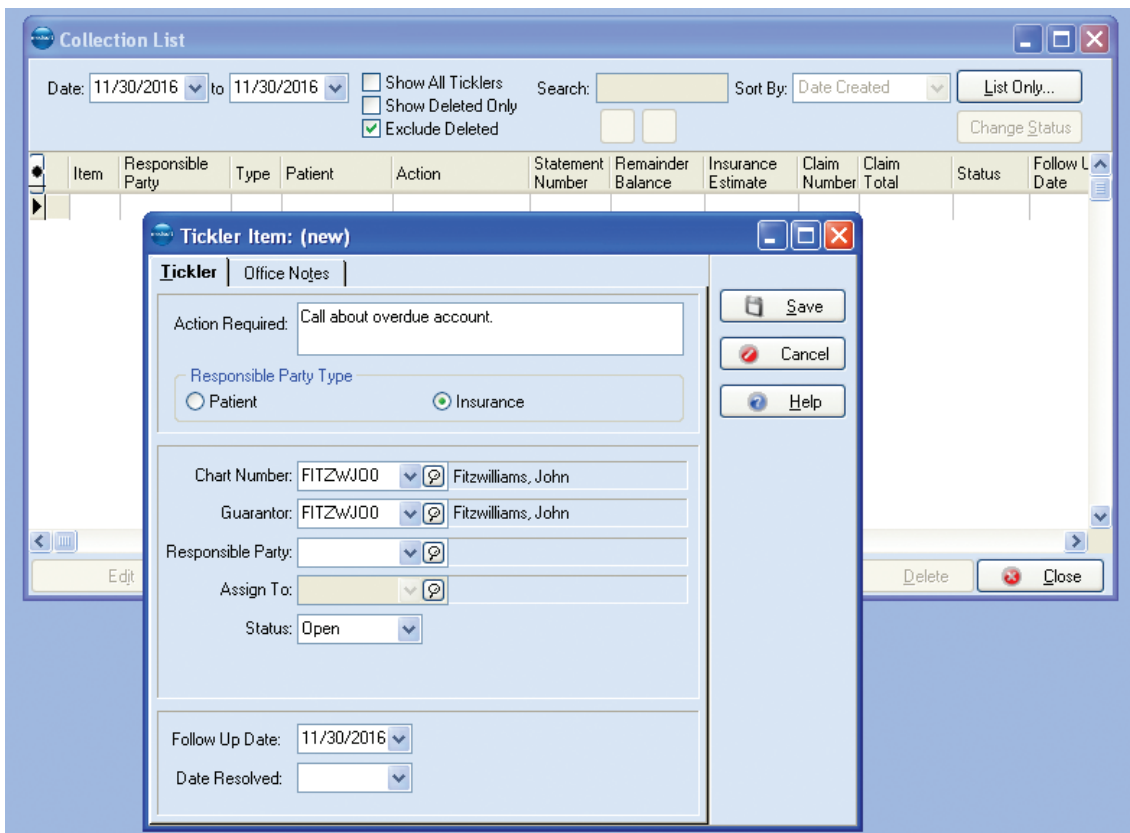
Medisoft Network Professional also facilitates the creation of collection letters. The option for creating collection letters is located on the Reports menu (see Figure 3.41).
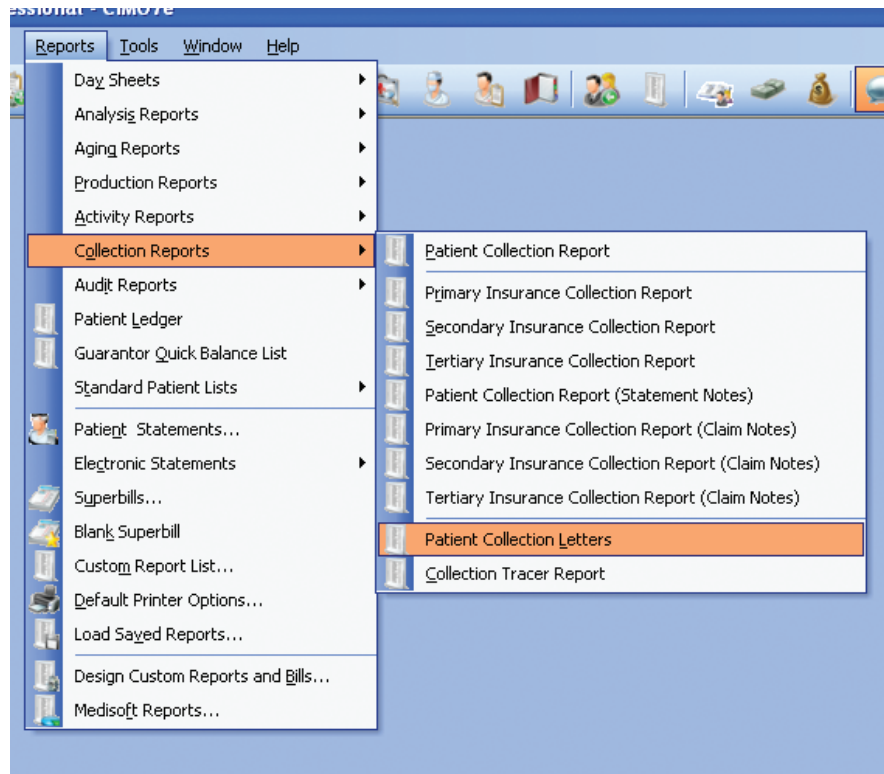
Figure 3.42 shows a sample collection letter.

Follow-up on patient accounts and the collections process are discussed in Chapter 13.

Figure 3.40   Tickler Item Dialog Box

Figure 3.41 Reports Menu with Collection Reports >Patient Collection Letters Selected

3.8 Backing Up and Restoring Files

With the increasing use of PM/EHR systems, physician practices are more dependent on information technology than ever before. This increased reliance on technology, coupled with the HIPAA Security Rule, has forced practices to develop and implement disaster recovery plans. A **disaster recovery plan** is a plan for resuming normal operations after a disaster such as a fire or a computer malfunction.

Backing Up Files

Disaster recovery plans require practices to back up computer data. **Backing up** refers to the process of saving a copy of files on a regular schedule to facilitate file recovery if data loss occurs. During a backup, files are copied from their normal location to a different location. The files may be copied to portable media, such as tapes or drives, or they may be transferred over a computer network such as the Internet. Most practices back up data on a daily basis, and store one copy of the backup in the office, and the other at an offsite location. Using an offsite location for storage protects the data should a natural disaster such as a fire or flood occur at the office. When Hurricane Katrina struck New Orleans, many medical records were destroyed. While most of these were paper records, it is also true that electronic records are not immune from disasters. In fact, computerized records are subject to additional threats, such as computer viruses and hardware malfunctions. As a result of the

disaster recovery plan plan for resuming normal operations after a disaster such as a fire or a computer malfunction

backing up making a copy of data files at a specific point in time that can be used to restore data

Figure 3.42   Collection Letter

Figure 3.43   File Menu with Backup Data Selected

lessons learned from Hurricane Katrina, medical facilities are more aware of the importance of backing up data.

Files that are backed up can be restored. **Restoring** is the process of copying backup files onto the office's computer systems, facilitating a return to normal business activities.

In Medisoft Network Professional, the Backup Data option on the File menu can be used to make a backup copy of the database at any time (see Figure 3.43).

The Medisoft Backup dialog box pictured in Figure 3.44 lists the destination file path and name of the file being created, and also lists existing backup files.

restoring process of retrieving data from a backup storage device

mc Graw Hill **connect** plus+

BACKING UP

Practice creating a backup file in Medisoft Network Professional.

1. Select Backup Data on the File menu. The Medisoft Backup dialog box is displayed.
2. In the Destination File Path and Name box, enter *C:\FCC\ Backup_Files\2016\09\09302016.mbk.*
3. Medisoft automatically displays the location of the database files to be backed up in the Source Path box in the lower half of the dialog box.
4. Click the Start Backup button.
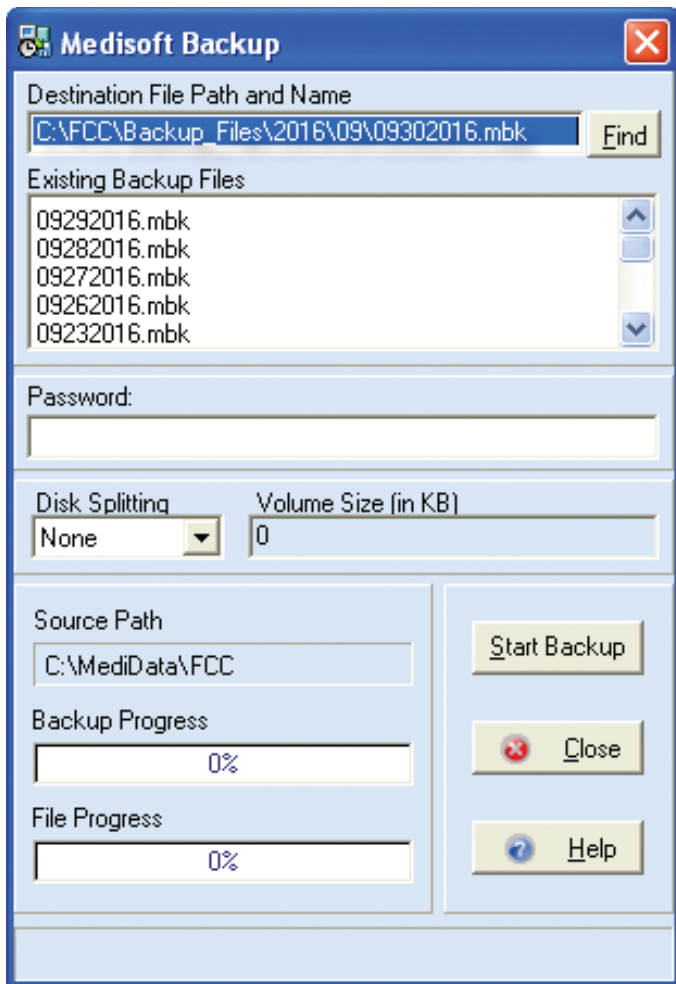5. The program backs up the latest database files and displays an Information dialog box indicating that the backup is complete. Click OK.
6. Close the Medisoft Backup dialog box by clicking the Close button.

☑ **You have completed Exercise 3.7**

Figure 3.44 Medisoft Backup Dialog Box

Restoring Files

The steps required to restore a backup file are very similar to the steps used to back up a file. To restore 09302016.mbk to the Medisoft Network Professional directory on the C drive (C:\MediData\FCC):

1. Select Restore Data on the File menu.
2. When the Warning box appears, click OK. The Restore dialog box appears.
3. In the Backup File Path and Name box at the top of the dialog box, enter the location of the backup file, if this name is not already displayed.
4. The Destination Path at the bottom of the box should already show C:\ MediData\FCC.
5. Click the Start Restore button.
6. When the Confirm box appears, click OK.
7. An Information dialog box appears indicating that the restore is complete. Click OK to continue.
8. Click the Close button to close the Restore dialog box.

3.9 The Medisoft Clinical Help Feature

Medisoft Network Professional and Medisoft Clinical Patient Records offer built-in and online help files. These resources provide detailed explanations of program features, list common errors, and offer tips designed to improve user productivity.

Built-in Help

The built-in help feature is accessed by selecting an option on the Help menu. Figure 3.45 shows the Medisoft Help selection on the Help menu in MNP.

When this option is selected, the Help dialog box opens, and the contents of the Help feature are displayed (see Figure 3.46).
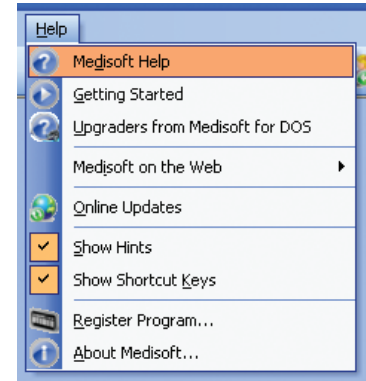
Figure 3.45 Medisoft Help Selection on Help Menu

EXERCISE 3.8

USING MEDISOFT CLINICAL HELP

Practice using MNP's built-in help.

1. Click the Help menu.
2. Click Medisoft Help. Medisoft displays a list of topics for which help is available.
3. Click the plus sign to the left of the entry for Entering Payments. A list of subtopics is displayed.
4. Click Apply Payment to Charges. The article appears in the right column.
5. Use the scroll bar to view the rest of the article.
6. Click the Close box in the upper-right corner to close the Help window.

☑ **You have completed Exercise 3.8**
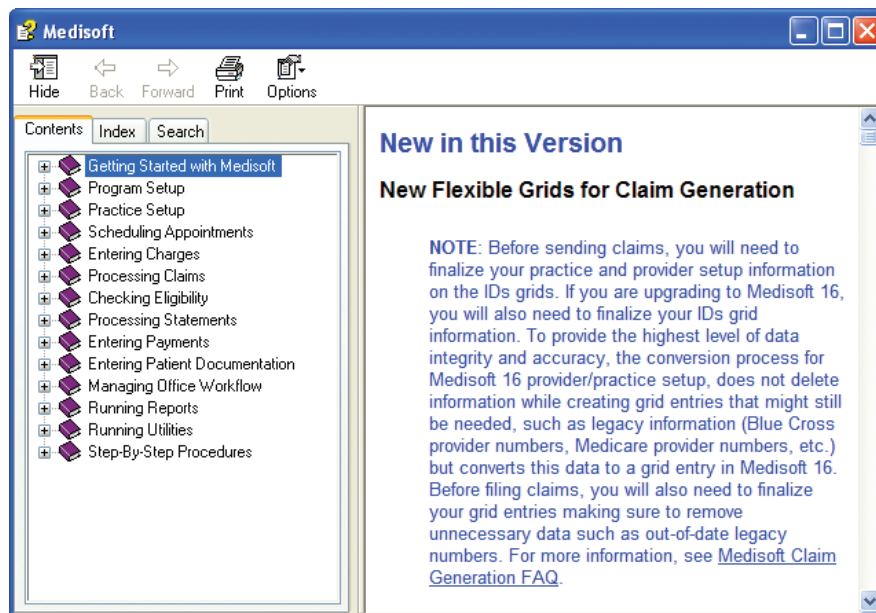
Figure 3.46 Contents of Medisoft Help Feature
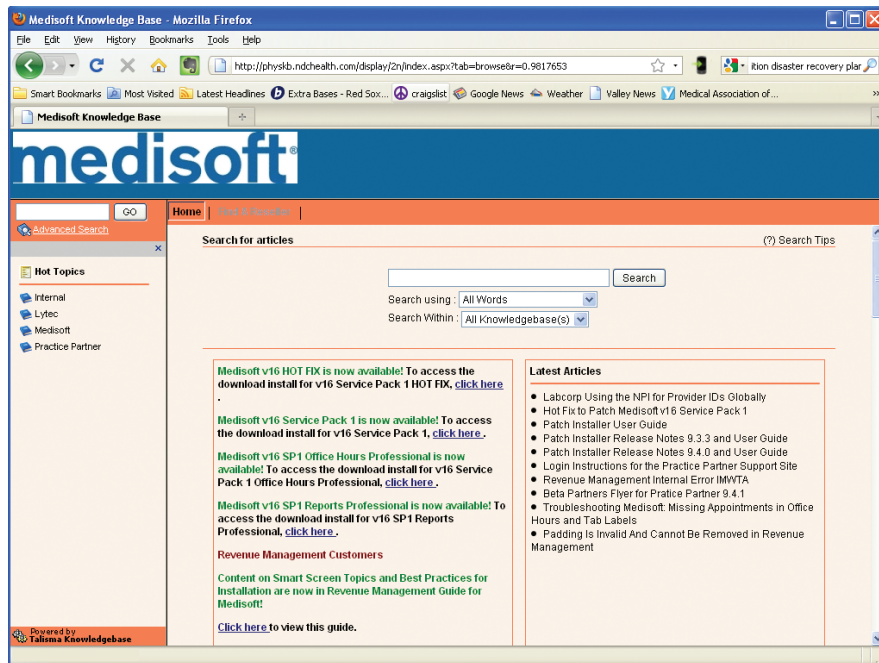
Figure 3.47 MNP Online Knowledge Base

Online Help

knowledge base a collection of up-to-date technical information

The Help menu also provides access to help available on the MNP website at www.medisoft.com. The website contains a searchable **knowledge base,** which is a collection of up-to-date technical information about Medisoft products (see Figure 3.47).

chapter 3 summary

LEARNING OUTCOME	KEY CONCEPTS/EXAMPLES
3.1 List the practice management and electronic health record applications in Medisoft Clinical. Page 106	The practice management application in Medisoft Clinical is called Medisoft Network Professional (MNP), and the electronic health record application is Medisoft Clinical Patient Records (MCPR).
3.2 Discuss three security features in Medisoft Clinical that protect patients' health information. Pages 106–108	- User names and passwords are assigned to individuals to protect unauthorized access, safeguard patient information, and protect patient confidentiality. - Access levels are assigned to job functions to specify who has access to information on a need-to-know basis; the user must enter a user name and password to see the information and to have editing and other privileges. - The park feature allows a user to walk away from the computer and still safeguard the information; it requires the next user to enter a user name and password to gain access. The Auto Log Off feature logs off a user after a specified period of inactivity. Both keep passers-by from viewing or accessing information.
3.3 List the menus in Medisoft Clinical Patient Records. Pages 109–113	The names of the standard menus in Medisoft Clinical Patient Records are File, View, Task, Maintenance, Reports, Window, and Help. The menus and commands available may change depending on the task being performed.
3.4 List the menus in Medisoft Network Professional. Pages 113–117	The menus in Medisoft Network Professional are File, Edit, Activities, Lists, Reports, Tools, Window, and Help.
3.5 Describe how pre-encounter tasks are completed in Medisoft Clinical. Pages 117–121	The pre-encounter steps include preregistration and appointment scheduling. Preregistration consists of entering basic information about the patient in Medisoft Network Professional. The demographic information is entered in the Patient/Guarantor dialog box, which is accessed via the Lists menu. A case is created, and the chief complaint is entered in the Personal tab. An appointment is scheduled in Office Hours.

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- *Activities*
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LEARNING OUTCOME	KEY CONCEPTS/EXAMPLES
3.6 Describe how encounter tasks are completed in Medisoft Clinical. Pages 121–134	The following tasks are handled in Medisoft Clinical during the encounter: - Insurance information is entered and eligibility is checked in the Policy tab. - At check-in, the account balance is reviewed, payment may be obtained, and additional patient information is gathered and recorded. - Documentation and examination take place, with the medical assistant or other clinical staff member doing part of it, and a physician doing and documenting the actual physical examination. - The diagnosis and procedures are coded, and charges are transmitted to MNP for billing. These are reviewed for coding and billing compliance.
3.7 Describe how post-encounter tasks are completed in Medisoft Clinical. Pages 134–139	- Claims are prepared and transmitted in the Claim Management dialog box of MNP. - The health plan's determination and payment are reviewed, starting with the Deposit dialog box. - Patient statements are generated in the Create Statements dialog box. - Follow-up takes place by creating a patient aging report.
3.8 Explain how to create and restore backup files in Medisoft Clinical. Pages 140–142	Files are backed up by choosing Backup Data on the File menu and entering the information in the Backup dialog box. They are restored by choosing Restore Data on the File menu and providing the required information in the dialog box.
3.9 Discuss the types of help available in Medisoft Clinical. Pages 143–144	Medisoft Clinical offers two types of help. Built-in help is available on the Help menu. Online help is obtained from the knowledge base on the MNP website.

chapter review

MATCHING QUESTIONS

Match the key terms with their definitions.

_____ 1. *[LO 3.2]* password

_____ 2. *[LO 3.8]* restoring

_____ 3. *[LO 3.3]* chart

_____ 4. *[LO 3.3]* dashboard

_____ 5. *[LO 3.1]* Medisoft Clinical Patient Records (MCPR)

_____ 6. *[LO 3.5]* chief complaint

_____ 7. *[LO 3.2]* user name

_____ 8. *[LO 3.3]* database

_____ 9. *[LO 3.9]* knowledge base

_____ 10. *[LO 3.8]* backing up

a. Panel in MCPR that offers providers a convenient view of important information.

b. Confidential authentication information.

c. Name that an individual uses for identification purposes when logging onto a computer or an application.

d. Making a copy of data files at a specific point in time that can be used to restore data.

e. Collection of up-to-date technical information.

f. Electronic health record application within Medisoft Clinical.

g. Folder that contains all records pertaining to a patient.

h. Patient's description of the symptoms or reasons for seeking medical care.

i. Process of retrieving data from a backup storage device.

j. Collection of related bits of information.

TRUE-FALSE QUESTIONS

Decide whether each statement is true or false.

_____ 1. *[LO 3.2]* Access levels define which areas of the program a user can view, and whether the user can only view the information or can also add, edit, or delete it.

_____ 2. *[LO 3.6]* The encounter steps include only activities that take place before the patient arrives for an office visit.

_____ 3. *[LO 3.8]* Disaster recovery plans require practices to back up computer data.

_____ 4. *[LO 3.9]* A user must be online to access any of the help features for Medisoft Network Professional and Medisoft Clinical Patient Records.

_____ 5. *[LO 3.1]* Medisoft Clinical is a practice management and electronic health record program for physician practices.

_____ 6. *[LO 3.4]* Medisoft Network Professional is the Medisoft application used for patient accounting.

_____ 7. **[LO 3.2]** In order to log in to Medisoft Clinical, an individual needs to have only a user name.

_____ 8. **[LO 3.5]** The pre-encounter steps include preregistration and appointment scheduling.

_____ 9. **[LO 3.3]** Medisoft Clinical Patient Records is the personal health record component of Medisoft Clinical.

_____ 10. **[LO 3.7]** The results of a claim review are sent to the provider along with the payment.

MULTIPLE-CHOICE QUESTIONS

Select the letter that best completes the statement or answers the question.

1. **[LO 3.6]** Once an examination is complete and the documentation has been entered in MCPR, the services provided and the provider's determination of the patient's diagnoses must be assigned _____.
   a. letters
   b. numeric codes
   c. names
   d. all of the above

2. **[LO 3.8]** A plan for resuming normal operations after a disaster such as a fire or a computer malfunction is a _____.
   a. back up plan
   b. restoring plan
   c. disaster recovery plan
   d. all of the above

3. **[LO 3.2]** Which of the following is a built-in security feature of Medisoft Clinical?
   a. user names
   b. passwords
   c. access levels
   d. all of the above

4. **[LO 3.9]** The website contains a searchable _____ which is a collection of up-to-date technical information about Medisoft products.
   a. database
   b. dashboard
   c. knowledge base
   d. user name

5. **[LO 3.5]** The pre-encounter steps include _____.
   a. appointment scheduling
   b. preregistration
   c. claim preparation
   d. both a and b

6. **[LO 3.3]** The term _____ refers to a patient's medical record.
   a. chart
   b. database
   c. dashboard
   d. consult

7. **[LO 3.8]** What is the process of copying backup files onto the office's computer systems, facilitating a return to normal business activities?
   a. restoring
   b. backing up
   c. parking
   d. both a and b

8. **[LO 3.7]** To receive payment, a medical practice must create and submit _____ to health plans.
   a. diagnoses
   b. claims
   c. statements
   d. adjudication

9. **[LO 3.7]** A statement lists _____.
   a. all service performed
   b. the amount paid by the health plan
   c. the charges for each service performed
   d. all of the above

10. **[LO 3.4]** Medisoft Network Professional includes _____, a schedule program.
    a. Medisoft Clinical Patient Records
    b. Auto Log Off
    c. Office Hours
    d. none of the above

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SHORT-ANSWER QUESTIONS

Define the following abbreviations.

1. *[LO 3.1]* MCPR _____

2. *[LO 3.1]* MNP _____

APPLYING YOUR KNOWLEDGE

Answer the questions below in the space provided.

3.1. *[LO 3.2]* How do access levels contribute to the security of patients' health information?

_____

_____

3.2. *[LO 3.5]* Some practices use built-in scheduling programs such as Office Hours, while others prefer to have scheduling programs separate from their PM programs. What advantages do you think using a built-in scheduling program offers?

_____

_____

3.3. *[LO 3.6]* What advantages are offered by the ability to make a real-time eligibility check on patients' insurance?

_____

_____

3.4. *[LO 3.7]* Why is it important for medical practices to monitor payer adjudication?

_____

_____