EMR PANEL SUBMISSION GUIDE

TELUS HEALTH – MED ACCESS

Contents

DISCLAIMER

This document is a general guide only and is not intended to replace EMR vendor set up and training.

This guide was created with the support of the EMR vendor. It was developed by staff at the Doctors Technology Office (DTO), Practice Support Program (PSP) and Doctors of BC Billing Support Team, and therefore does not form part of the EMR vendor's official documentation.

Section 1 – Submitting the Panel Report

NOTE: Panel reports can be submitted using the reporting services feature of Med Access. A bill template is created which is applied to the list of empaneled patients using Reports. These bills are then submitted in batches.

NOTE: You must have completed the steps to clean up your panel and develop your list of empaneled patients. The following guide and video outline how to prepare your list of empaneled patients so that it is accurate and up to date.

- Access the Med Access Empanelment How-to Guide here.
- Watch the Med Access Empanelment Video here.

Step 1 - How to create a bill template?

NOTE: You need to have Template administrative access to create Templates.

1. From the main EMR page, Click on the Templates icon 

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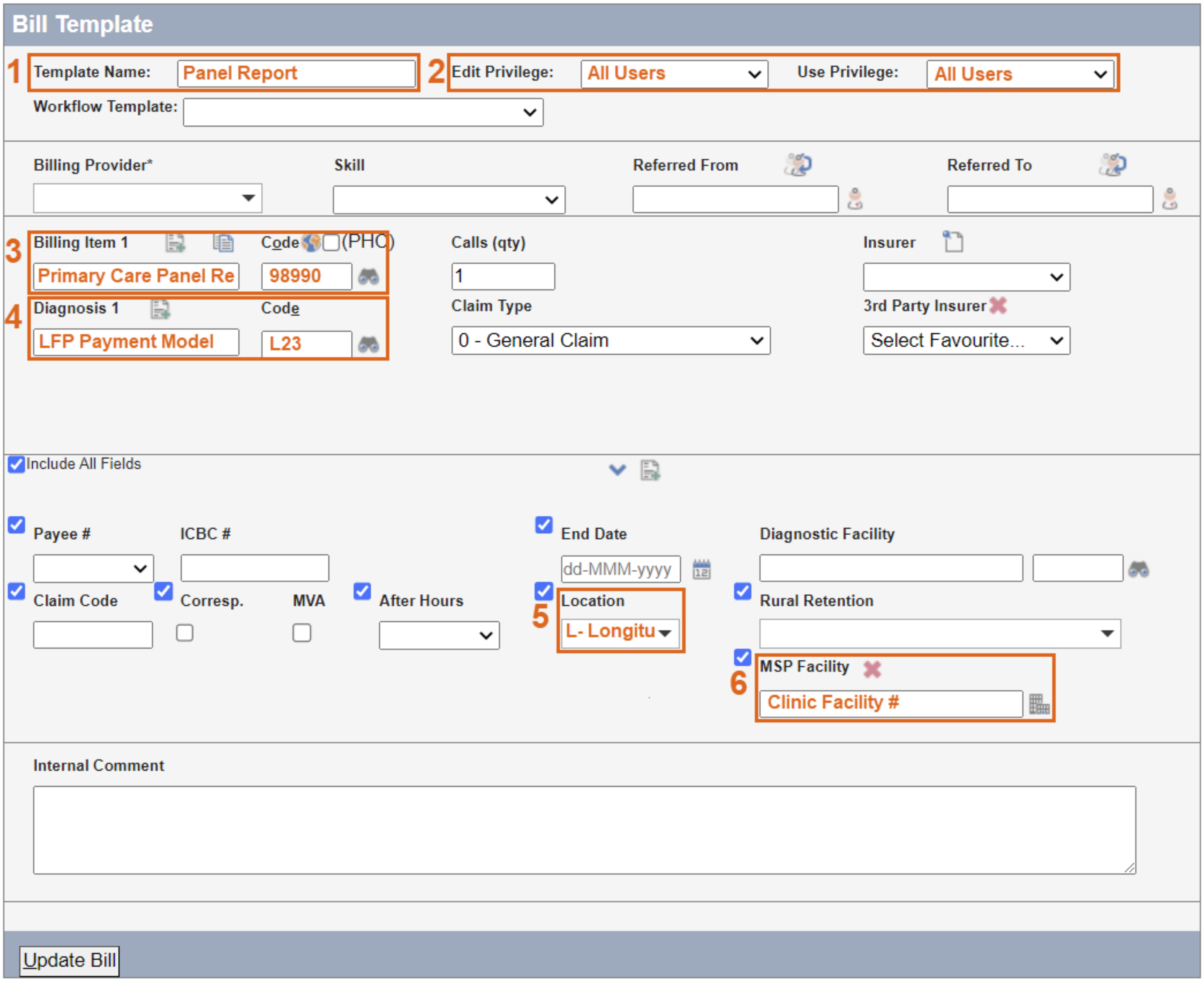
2. This opens the Template Management window. Select the Bills tab.

3. Click on the New icon 

. This opens a new Bill Template window.



How to populate your bill template?

1. Template Name - Enter the name for the Bill Template, e.g. "Panel Report".

2. Privilege – If you would like all users to be able to edit and use the template, select All Users for both the Edit Privilege and Use Privilege.

3. Billing Item – enter the code 98990 in the Code field. Click on the binoculars and the description of Primary Care Panel Report will automatically populate. Otherwise, a new window will open allowing you to find the code.

4. Diagnosis (ICD-9 code) – enter the diagnosis ICD-9 code L23 in the Code field. Click on the binoculars and the description of LFP Payment Model will automatically populate if the code is in Med Access.

   NOTE: the diagnosis ICD-9 code 780 (General Symptoms) can also be used instead of L23.

5. Location (service location code) – select the location from the drop-down list. 'L - Longitudinal Primary Care Practice', is likely to be the location code.

6. MSP Facility - A Facility Number is required when submitting your claims. A provider can obtain the Facility Number from the provider responsible for administration of the clinic. Populate with the Clinic's Facility #.

7. To save the template, click the Create Bill button Create Bill.

8. **NOTE:** The bill template needs to be set as a favourite to ensure it is available in report services.

   In the Bill Template window, click on the User Favourite icon to turn it pink , or the Clinic Favourite icon .

Step 2 - How to apply the bill template to the list of empaneled patients?

1. From the main EMR page click on the Reports icon 

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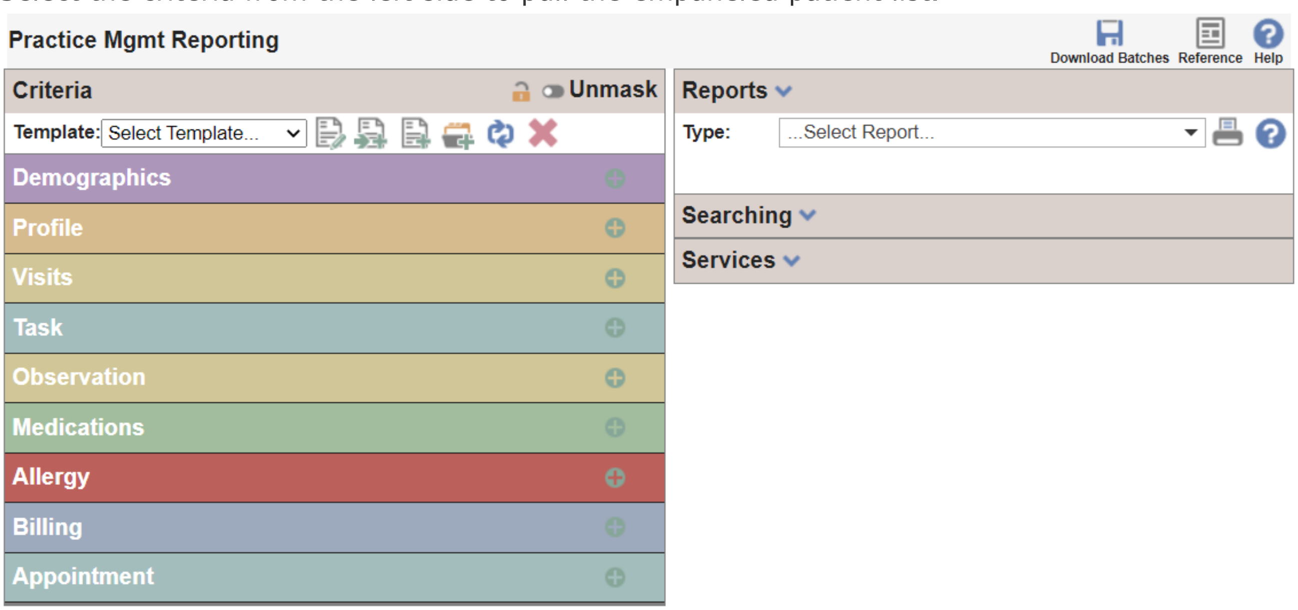
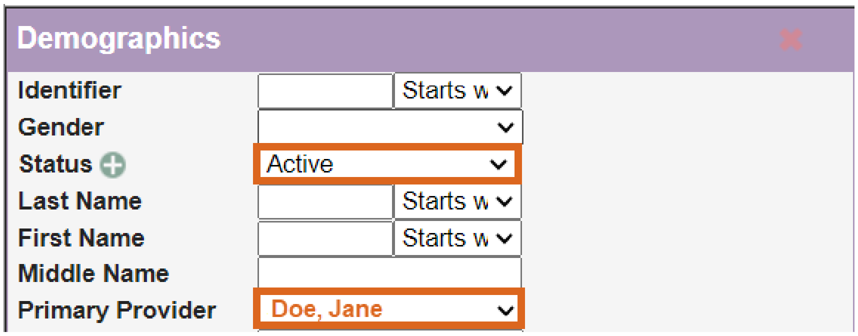
2. Select the criteria from the left side to pull the empaneled patient list.



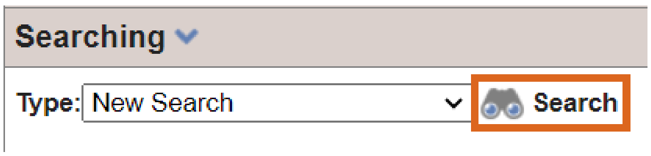
3. Expand the Demographic section, by clicking on the green plus.

4. Select 'Active' for the Status and ensure that you are the Primary Provider selected.

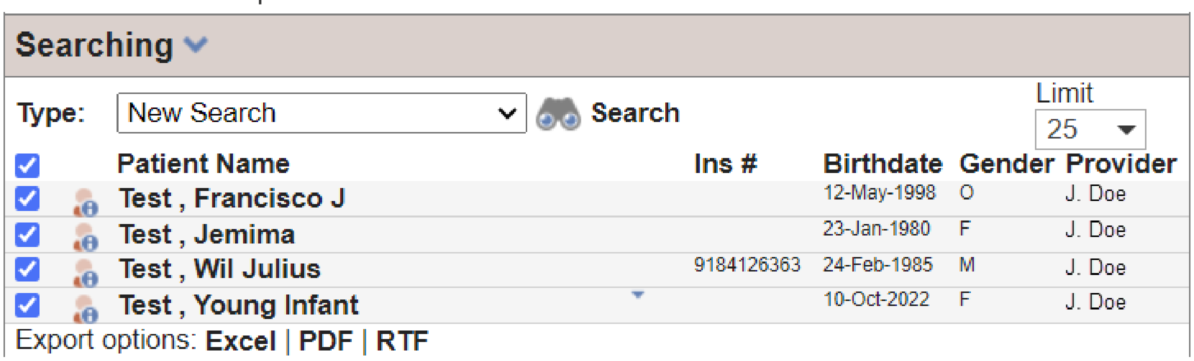


5. On the right side, click on the blue arrow next to Searching .

6. Click on the binoculars to run the search.



7. This will list all the patients that meet the search criteria.



Adjust the limit to show additional patients on the page by clicking on the black arrow and selecting 200 from the drop-down list .

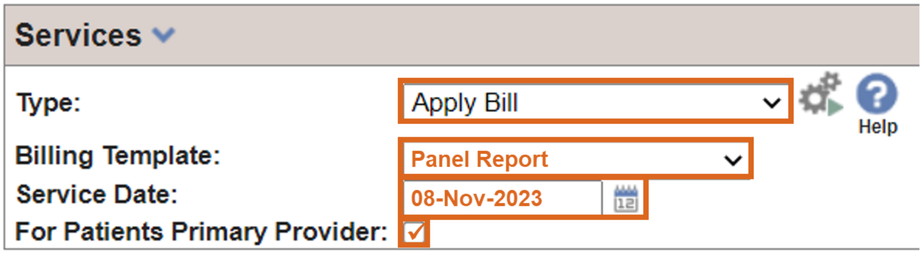
NOTE: the batch process will only apply to the patients displayed on the page.

8. All are selected by default. Select/unselect the blue check marks as needed.

9. Click on the blue arrow next to services .

NOTE: if you do not see the Services option, you will need the 'Batch Privilege' in the user Permissions for this.

10. Type - From the drop-down list, select Apply Bill.



11. Select the Billing template that was created in step 1.

12. Select the Service Date.

13. Check the box For Patients Primary Provider.

    WARNING! – there is no UNDO for this process, be careful when choosing the list of patients to add a bill for.

14. Click on the Gears icon to apply the bill template to the selected patients on the page.

    NOTE: you will briefly see a blank popup. When the popup disappears the bill template has been applied to all the patients on the page.

    WARNING! – be careful to only click the gears icon once per page, otherwise duplicate claims will be created.

15. Select the next page of patients, by clicking on the green arrow Pg 1, and click the Gears icon again.

16. Repeat the process for each page of patients as required.

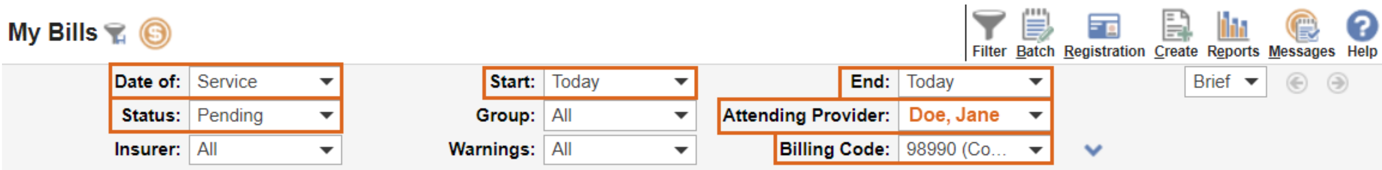
Step 3 - How to batch approve the bills?

NOTE: you will need to have user permissions to Batch Update bills.

1. From the main EMR page, click the My Bills icon My Bills.

2. Using the filters (Date of, Start, End, Status, etc.), filter the list to the desired list of bills. Ensure that Status is only set to 'Pending'. If only approving bills for one provider, set the Attending Provider.

   The example below has the following filters: bills created today, with a pending status, with 'Doe, Jane' as the provider, and only 98990 bills.



NOTE: to filter by the Billing Code, click on the blue arrow and select Billing Code Billing Code. In the top right box Code enter 98990.

3. Actions only apply to the bills listed on the first page. To batch approve all bills in the list, you need to either submit them one page at a time or expand the number of bills displayed on a page.

4. To change the number of bills on a single page. Hover over the right green arrow. The number of bills will be displayed (e.g. 1-50 of 80). Click on the black arrow, and select the desired limit to display on a single page.

5. Click on the Batch icon Batch. This displays the Batch Update and Bulk Approve options.

6. Click the Bulk Approve icon Bulk Approve. This will approve all the bills on the page.

7. Repeat for each page.

Section 2 – Facility Number

NOTE: A Facility Number is required when submitting your panel. A provider can obtain the Facility Number from the provider responsible for administration of the clinic.

For any questions on the Facility Number, you can contact Teleplan support at 1-866-456-6950.

If your clinic does not have a facility number - apply for one here.

How to set up the Facility Number?

NOTE: Site Administrator access is required to create or update a Facility.

1. From the main EMR page, click on the Providers icon Providers.

2. Click on the Facilities icon 

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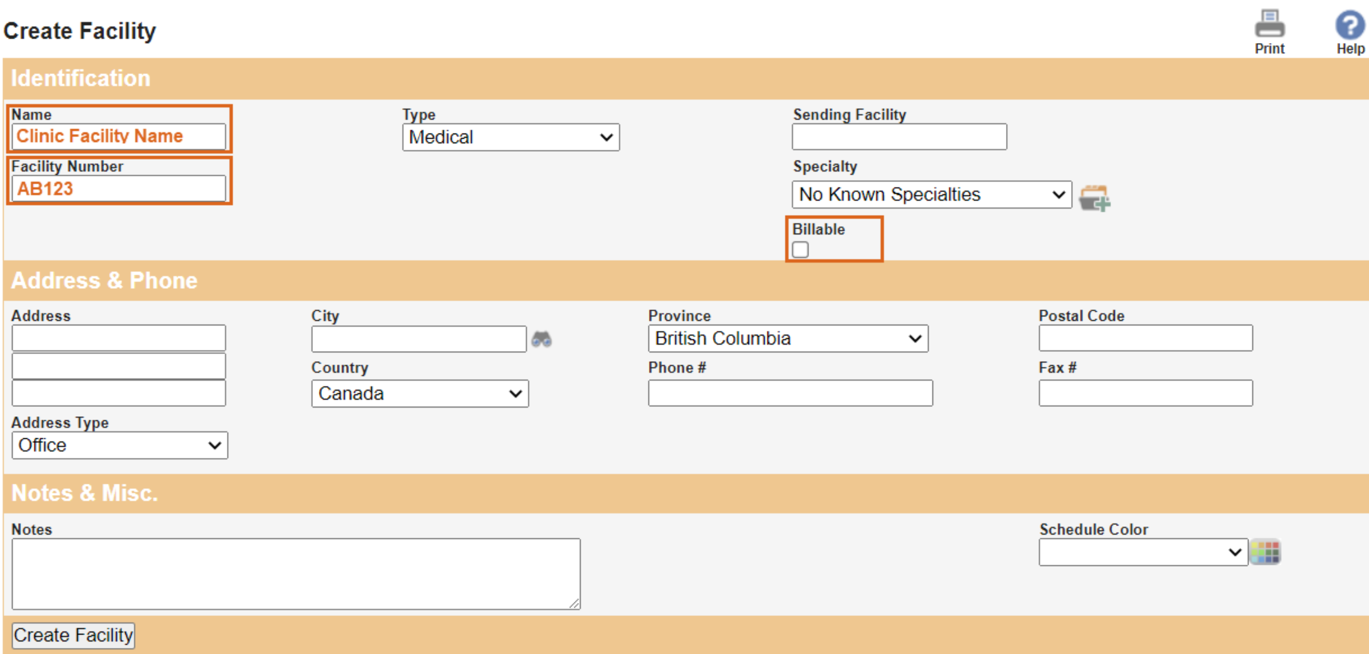
3. Either create new, by clicking on the New Facility icon 

, or update an existing facility.

4. Name – enter a name for the Facility.

5. Facility Number – this is provided by HIBC when applying for the Facility.

6. Billable – uncheck this box. This is to ensure the Facility Name will appear in the MSP Facility drop down on a Bill.



7. If creating a new Facility, click the Create Facility button. If updating a Facility, click the Update button.

Where To Access Extra Support

- EMR vendor support – TELUS Med Access Support Desk 1-888-781-5553
- Technical troubleshooting or Workflow support - Practice Support Program PSP@doctorsofbc.ca

Provincial Attachment System (PAS)

- Information on PAS can be found on the Doctors of BC website here
- For additional information or support on PAS - HealthBcSupport@phsa.ca