

ArcBI TS Newsletter

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ArcSys Hot Tip

Want a quick way to get to the Task Manager? Just do a right-click on the Windows toolbar at the bottom of your screen (or wherever it is shown). A pop-up window appears and then you can click on Task Manager. Getting familiar with the various tabs is a good way of getting feel for what is going on with your computer, too.

“Eh, (chomp, chomp, chomp) what’s up Doc?”

Now that we have your attention with the catchy headline, ArcSys has an important announcement: We have entered into a partnership with **Updox** who is a leading provider of Internet-based communication tools. Briefly, this will allow a Red Planet application to take advantage of:

- Setting up a secure patient/employee portal
- Sending appointment reminders by Text, Voice or E-mail
- Sending general information by Text or E-mail
- Allowing on-line appointment scheduling
- Sharing electronic medical records or employee payroll data
- Sending/receiving Faxes

All of this is *smoothly* integrated with Red Planet and even meets several Meaningful Use requirements. Once your business is setup, we add a couple of buttons to several screens and place a few options on existing menus. It is easy to use and will open a wide-range of opportunities how you engage with people. Contact Mike at 801-571-4158 for more details. This new product is ready for immediate deployment.

E-mail:

From: dnr@updoxqa.com [Add to Address Book]
 To: marchule@earthlink.net
 Subject: Notification From: ARCSYS MEDICAL GROUP
 Date: May 23, 2016 7:51 AM



Hello,

This reminder is for JIRRA. You have an appointment with BETH HANLON MD on 05/26/16 at 11:00AM.

Our office can be reached at 435-328-1260. We look forward to seeing you.

Thank You,

ARCSYS MEDICAL GROUP

Text:

BROOKLYN, you have an appointment at ARCSYS MEDICAL GROUP on 05/26/16 at 09:00 with BETH HANLON MD. Please remember that we require 24 hours notice for any cancellations. Thank you. Confirm, reply with Y or Yes. To Cancel, reply with N or No.





Meaningful Use Report (Part 4)

Measure 13 counts the number of clinical summaries given to people. The denominator is the number of people seen in the reporting period. The numerator is the number of summaries provided. A summary is provided by clicking of the Summary button in the Visit screen. The target is 50%. Estimate 1 minute to print and briefly explain to the patient. *The summary is sent to the patient's Updox portal.*

Measure 14 is intended to provide reminders for patients based on conditions that are unique to the individual. For MU1 the count is based on patients 5 and under and 65 or older. MU2 looks for all patients seen at least 2 times within the time frame of the reporting period and two years before. The target is 10%. There is a one-time setup to define the criteria for searching. Estimate 30 minutes.

Measure 15 is used for performing medication reconciliation. The intent is to review all medications of a patient who is transitioned into the practice. The Visit template has a prompt where you indicate if this is a transition of care coming into the practice. This defines the denominator. The medication screen has a field where the date of reconciliation is entered. If at least one medication has a reconciled date, then the numerator is counted. The target is 50%. The time to reconcile is 1 minute for all medications. There is an exclusion on this measure if your practice is not the recipient of any transitions of care.

Measure 16 is used for providing a summary of care. This is the opposite of measure 5 in that you are sending out a patient to another provider. If you do this less than a 100 times in the reporting period you can elect an exclusion. Otherwise, you must remember to check the transition of care box in the Visit template screen and then use the MakeCCDA button in the Dashboard screen to prepare the summary. Target is 50%. Estimate less than 1 minute per summary. *The summary can be sent to the patient's Updox portal or a doctor's Direct Address.*

Measure 17 is for secure electronic messaging. The denominator is the number of people seen by the provider. The numerator is the number of people who sent the provider a message *through the Updox portal*. The target is 5%.

Under MU2, it is required that 3 Menu Objectives be selected. Note that Menu Objectives 1, 5, 6 are related to providing information for a registry and are eligible for exclusions. Otherwise, you will need to do each of the following three measures.

Measure 18 is for the management of documents received by way of scanning or faxing. The first step is to create an order. The second step is to receive a fax or printed document that needs to be scanned. This creates the image. The image is then linked to the order. The denominator is the number of orders that are flagged as having an image in the reporting period. The numerator is number if images linked to the order. The target is 10%. Estimate 1 minute to scan, link and flag the order record. There is an exclusion if the provider orders less than 100 tests that would result in a document or image being returned. (This is Menu Objective 3 under MU2)

Measure 19 is for recording the first degree relatives of each patient. At least one relative needs to be entered. The complexity is becoming familiar with SNOMED and then knowing how to look up codes for identifying a person and their associated diseases. The denominator is the number of unique patients seen. The numerator is at least one relative for each patient. The target is 20%. Estimate 1 minute per relative. This is a one-time setup for a patient. (This is Menu Objective 4 under MU2)

Measure 20 is for electronic notes. Anything entered by a provider and signed in the Note field of the Visit screen will qualify. The denominator is number of unique patients seen in the reporting period. The numerator is the number of unique patients who have at least 1 note. The target is 30%. Estimate 5 to 10 minutes to document an average visit. (This is Menu Objective 2 under MU2)

Measures 21 and 22 are for Computerized Provider Entry of lab orders and xray orders. The intent is to have the provider do the entry. The target is 30%. Estimate an order taking 2 minutes to enter, print and explain to the patient.

For the purpose of figuring out how long it would take to record a new patient, let's assume they have no known allergies, have 4 medical problems and are on medications for each. The patient has 5 first-degree relatives. The doctor wants to change 2 medications and place an order for lab work. It could take staff 15 minutes to document. The provider would take 17 minutes. Later, the staff would require an additional 3 minutes for follow up and the doctor would need 2 minutes. These estimates are on the high end.